The MailBag

December 2020

The Ostomy Support Newsletter Of Jacksonville, Ocala, Amelia Island, Citrus County, Gainesville, & The Villages

EZ-Clean: A System Designed To Make Life Easier For Anyone With Colostomy Or Ileostomy.

The Schena EZ-Clean System uses water (under pressure) to clean the inside of specially designed EZ-Clean pouches and the exposed surfaces of the stoma in less than 3 minutes!

The Power Feed Water System is available in both Fixed and Portable versions. Both versions use a pressurized handheld sprayer. The Fixed System hooks up to a toilet water supply semi-permanently as shown above (left). The Portable System temporarily connects to any bathroom faucet, at home or while traveling.

Invented and developed by an ostomate, and field tested by Colostomy and Ileostomy patients, the EZ-Clean System has shown remarkable results.

The EZ-Clean pouch is a one piece design with the wafer permanently attached. Evacuated contents are deposited in the toilet and simply flushed away. It is fast, efficient and hygienic. While the fixed power feed water system is not covered by Medicare, he pouch is covered. Medicare will allow 10 pouches per month.

Medical Care Products, Inc.
(904) 733-8500
(800) 741-0110

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https://www.facebook.com/JaxUOAA/?ref=aymt_homepage_panel
Find all the past issues of the MailBag at http://ostomymcp.com/id6.html

Jacksonville
Contact Information:
Patti Langenbach
(800) 741-0110
(904) 733-8500
patti@ostomymcp.com
Support group meets the 3rd Sunday of each month 3 p.m.
Next Meeting: **via Zoom**

Gainesville Support Group
Contact info:
JoAnne Bell at 352-284-4214
Meets the 1st Sunday of each month (except Holidays)
at Hope Lodge2121 SW 16th St
Gainesville, FL
Next meeting: **TBA**

Ocala Support Contact info:
Karen Franco 352-304-1309
Meets the 2nd Sunday of each month (except July & Aug) at 2 p.m. at the Sheriff's Station 3260 SE 80th Street between Ocala and Belleview.
Next Meeting: **December 13th**

Citrus County Support Group
Meets third Sunday of each month at 2:00 PM in the Seven Rivers Regional Medical Center, 6201 N. Suncoast Blvd., Crystal River, FL 34428, in the Community Room of the Medical Office Building
Next Meeting: **TBA**

Amelia Island Area
Ostomy Support Group
(904) 310-9054
Meets second Monday of each month at 6:30pm
Next Meeting: **TBA**

The Villages Ostomy Support
We meet on the 2nd Tuesday evening of each month at 6:00 PM at (except July & August
Linda Manson
tvostomy@gmail.com
865-335-6330
Next Meeting: **via Zoom**
Contact Linda tvostomy@gmail.com

CORONA VIRUS ONE LINERS – GROANERS

From Rancho Mirage Newsletter

Finland has just closed their borders, so nobody will be crossing the Finnish line. • Due to the quarantine, I'll only be telling inside jokes. • World Health Organization has determined that dogs cannot contract COVID-19. Dogs previously being held in quarantine will be released. To be clear, WHO let the dogs out?

I'll tell you a Coronavirus joke, but you'll have to wait two weeks to see if you got it. • I ran out of toilet paper, so I had to start using old newspapers. Times are rough. • What do you call panic buying of sausage and cheese in Germany? A Wurst Kase scenario. • In my day, you would cough to cover up a fart. Now you fart to cover up a cough. • The grocery stores in France look like a tornado hit them. All that's left is de brie. • There will be a minor baby boom in 9 months. Then around the year 2033, we shall witness the rise of the "quaranteens." • So many coronavirus jokes out there, it's a pundemic.

UOAA COVID-19 UPDATES

UOAA will update this blog post with any information that may affect our community.

https://www.ostomy.org/coronavirus-effects-on-the-ostomy-community/

How I Answered the Most Common (and Entertaining) Questions about My Ileostomy – I am 100% open

by Leah Nikki, Aug 29, 2019, via Ostomy Connection; and Vancouver (BC) Ostomy HighLife

People are always so fascinated when they find out I have an ostomy. Sometimes, I get a blank stare that I think means, "Oh man, I have so many questions… I really want to ask, but I don't want to offend her."

I find that with my friends, one of four things tends to happen:
1) They were around when all this went down, so they know the drill. •
2) They met me after it all went down, but have no shame and will straight up ask me whatever is on their mind.
3) They are longtime friends and feel as though they haven't been in touch enough to ask me such intimate questions.
4) They are weirded out by the whole thing and don't want to know.

I decided to do a little question and answer session, gathering some of the most common and entertaining questions I've been asked about my ileostomy. So here goes, in no particular order.

Q: Can I see your ostomy bag?
Absolutely. I'm more than happy to show it to you. Most people don't know what it is and have all these ideas built up in their mind of what the bag looks like. Just ask me, than you can rest easy.

Q: Do you pee normal?
Yes, I pee normally. An ileostomy has nothing to do with the urinary system.

Q: How does the ostomy bag stay on your stomach?
The ostomy bag (or pouching system) has an adhesive wafer part that adheres to the skin on my belly and it has a hole cut out for the stoma to come through.

Q: Can you ever take your ostomy bag off?
Yes and no. I take it off in order to replace the system (wafer/bag) about every 3–5 days and occasionally while I

shower. Otherwise, no, I cannot take it off since I can't control when I "go." An ostomy bag must be worn at all times.

Q: How do you empty an ostomy bag?
It has an opening at the bottom of the bag, closed using a clip. I remove the clip, empty into the toilet bowl, wipe the end clean and close it. It literally takes me seconds. Guaranteed, when I go into the bathroom, you don't even know I'm doing it.

Q: Does ostomy poop smell?
Heck yes, it smells. All poop does. I've often thought that it shouldn't smell as bad as regular poop since it doesn't sit in your intestines for as long. That's not the case. It smells as bad, usually worse, than regular poop. But there are products that help reduce or eliminate the odor, and the ostomy bag itself does not smell.

Q: Do you still feel the urge to poop?
No, that feeling has gone away. And since the stoma has no feeling, I usually can't feel anything coming out. However, I can tell when my bag is filling up.

Q: Do you miss pooping like a normal person?
No, not even a little bit. You need to understand that with active Crohn's disease, I never pooped like a normal person. I was in severe pain every time I sat down. So no, I don't miss that.

Q: Can you have sex while wearing an ostomy bag?
Yes. This took me a while to learn due to my own hang-up – feeling like my bag wasn't sexy. I spent a lot of time and energy trying to cover it up. But trust me, if you're even remotely interested in the sex you're having – you won't even notice the bag.

Q: Do you still fart?
This is one of my favorite questions. Technically, I don't fart the traditional way. Sometimes though, my stoma does release air into the bag (at the most inopportune times) which makes a noise. I have no control over that; it's sometimes embarrassing.

Well, have I answered most of your questions? Have I blown your mind? I hope not. I hope after reading this post, you realize that I am 100% open, and welcome any and all questions you may have about living with an ileostomy. My goal is to help raise ostomy awareness and get rid of negative stigmas. I want people who face this surgery to know that it's not a death sentence.

I've literally heard people say they'd rather die than have ostomy surgery. It's so silly! Yes, it's an adjustment. Yes, it has its challenges. Yes, obviously life without one would be easier (for people who don't suffer from a severe chronic illness). But if this is the hand you're dealt and surgery is the only answer — I say DO IT! Life goes on… a very normal life even!

UROSTOMY – Cranberries, For and Against for Urostomates

From the Ostomist, Winter-2019-2020, Niagara (ON) Ostomy Association, "It's in the Bag," via Lawton-Fort Sill (OK)

FOR The secret ingredient in cranberries that is pivotal in preventing urinary tract infections (UTIs) is concentrated tannins, called proanthrocyanidins, in the juice. In a Boston study published in the Journal of the AMA, cranberry juice was found to be effective in reducing the incidence of UTIs and the need for antibiotic treatments. This has important implications for persons with ostomies and continent diversions. Recurrent UTIs can be common in persons who catheterize frequently. They can be more evident if proper hand washing and cleaning of catheters is not done routinely. In addition, a large proportion of women over age 65 will experience at least one UTI per year.

How does this special ingredient in cranberry work? The tannins from cranberries prevent E-coli bacteria, the main culprit in urinary infections from adhering to cells that line the walls of the bladder and kidneys. The bacteria thus will "wash out" before infection can develop.

Scientists in the Boston study believe that the routine addition of cranberry juice in dietary regimes in circumstances where UTIs have a high incidence would be sensitive.

AGAINST An article from the Mayo Clinic says drinking cranberry juice to prevent recurring bladder or urinary infections is an "old folk" remedy. Does it work? Maybe – but don't count on it.

A key to preventing a bladder infection is blocking the growth of the bacteria that cause the infection. Researchers have two theories about how cranberry juice may help: (1) by making the urine more acidic, discouraging the growth of the bacteria. But scientists don't know whether a realistic amount of cranberry juice can produce enough change in the urine acidity to affect bacteria. (2) By keeping bacteria from "sticking" to the bladder wall where they multiply and cause infections. The theory was confirmed in the laboratory and in mice, but results vary in humans. We do know that taking 500 mg of vitamin C (ascorbic acid) twice a day along with cranberry juice can increase urine acidity. Still, if you think you have a bladder infection, don't try home remedies. See your doctor. The usual treatment is in antibiotics and lots of liquids.

Less Is More – Are You Using Too Many Products?

By Lauren Wolfe, RN, BSN, CWOCN, via Ostomy Outlook, No. Central Oklahoma, July, 2020
Via Vancouver (BC) Ostomy HighLife, January, 2020

Pouches, barrier rings, adhesive removers, adhesive sprays, ostomy powder, skin prep…I could keep listing products that could be used to manage your stoma. The big question is; do you need to be using all these products?

When it comes to your skin and stoma you will find that most stoma nurses (WOCNs) have the philosophy that less is more. What this means is that you only need to use products that ensure you don't experience a leak and your skin remains healthy. Using many different accessories can cause confusion when you experience a problem and sometimes may even cause problems.

Problems can be skin reactions, your pouching system not adhering causing leaks or decreased wear time. The simple fact is that you may be complicating your change using too many added products. A change that could be 5-10 minutes is taking more than 30 minutes. On another note, accessory products can be expensive and if they are not helpful to you then best not to use them.

So, when do we use accessory products?
Adhesive removers are designed to help remove the pouching system without causing trauma and skin tears to your skin. They also help to remove any sticky residue that may be left on your skin after removal of your pouching system. I find that the spray works well to remove the pouching system and the wipes help to remove any leftover barrier from the skin.

Skin Preps: In the past, everyone was advised to use skin preps to help keep your skin healthy and ensure the ostomy wafer/faceplate/flange adheres to your skin. In recent years, with the advancement of technology, the barrier composition allows for the barrier to adhere directly to your skin without using skin prep. In fact, using skin prep can decrease how well the barrier adheres to your skin. Skin prep is commonly used with stoma powder when treating denuded/raw skin by following a “crusting” procedure until the skin is healed.

Ostomy Powder: Similar to skin prep, ostomy powder was used for many years as part of the application process for ostomy barriers. In fact, the ingredients in Ostomy powder are similar to the wafer/flange, the goal being to absorb moisture. Unless you’re extremely sweaty, I would suggest forgoing the powder and seeing how your ostomy flange adheres to your skin; you may be quite surprised.

Barrier rings: These serve a very important function. They can help to fill in the creases or dips and valleys in your abdominal contours or, for some, they can add to the wear time, allowing for less frequent changes. However some- times, as your stoma settles down post surgery, it may be worth discussing with your WOCN whether you need to use a barrier ring. In my experience, I often use them if you have an ileostomy but for colostomy and urostomy I may try to see if we can remove them.

Ostomy Belts: Ostomy belts provide added support for the pouching system at 3 and 9 o’clock, i.e., on the sides. It is not uncommon for people who have a challenging stoma to need to use an ostomy belt to add more support to prevent a leak. For some, it is also peace of mind that the appliance will stay on or perhaps it helps with the weight of the pouch if it’s a little too full when a bathroom is not nearby.

Barrier extenders / Adhesive tape barriers: This accessory product is new to the market and has a place for some individuals. I tend to recommend it for people who are using a smaller flange and need to increase the surface area if they are perhaps a larger person. Another use is to provide peace of mind when showering or swimming by adding an area of water resistance to the edge of the flange. For some people, it’s just a comfort helping to prevent a leak. However, from a WOCN perspective, these DO NOT prevent a leak; they camouflage a leak, as a leak starts immediately around the stoma. By the time it reaches these barrier extenders, your pouch has been leaking for a while causing potential skin damage.

In conclusion, if you are unsure if you need to be using all the accessories, see your WOCN and discuss what you need and what may be nice to have. Less is best; our skin is sensitive and we do not need to use more products than necessary.

Visit the Peristomal Skin Assessment Guide for Consumers
http://psag-consumer.wocn.org/#home

UOAA Discussion Board
https://www.uoaa.org/forum/index.php

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