

The MailBag

Jacksonville group meets the 3rd Sunday of each month 3 p.m. 4836 Victor Street.
Ocala support group 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).
Amelia Island Area Ostomy Support Group meets last Monday of each month at 6pm - Bapt Medical Center Nassau board room.
Gainesville Support Group meets the 1st Sunday of each month (except Holidays)
Hope Lodge 2121 SW 16th St Gainesville



**Sept 1-6, 2015 • Fifth UOAA
National Conference •
St Louis MO**

**World Ostomy Day
Coming Next Year**
Saturday October the 3rd 2015.
The theme for WOD 2015 will be
"Many stories, one voice."

Jacksonville Contact Information:
Patti Langenbach
(800) 741-0110
(904) 733-8500
patti@ostomymcp.com

The Jacksonville UOAA chapter meets the 3rd Sunday of each except when otherwise posted.

To help offset the mailing cost you may now receive the MailBag Newsletter via email. Please contact:
Patti: patti@ostomymcp.com
(Newsletter will be in PDF format)

Support group meets the 3rd Sunday of each month 3 p.m. 4836 Victor Street
Next Meeting Jan. 18th

Gainesville Support Group meets the 1st Sunday of each month (except Holidays)
Next meeting: **Jan. 4th at 2pm** at Hope Lodge 2121 SW 16th St Gainesville, FL 32608
Contact info:
Brinda Watson (352) 373-1266
Nelson Griffiths (352) 376-8703

Ocala support group 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 Jan. 11th
Patti Langenbach will be speaking at the January 11th meeting
Ocala Contact Information
Lynn Parsons (352) 245-3114
www.ostomyocala.com

Amelia Island Area Ostomy Support Group meets last Monday of each month at 6pm (except May, June, July & Aug) Bapt Medical Center Nassau board room.
Free parking (904) 310-9054
Next Meeting Jan. 26th



“Gutsy’s Gab:” “Speak Out and Be Heard!”

By Linda Blumberg AKA “Mrs. Lips”

December 2014: Time to CELEBRATE...much anticipated December 21 Jax ASG holiday party at Patti’s condo!...fabulous food, friends, and fun!...great way to end 2014!...on the horizon is January...time for “Resolutions, Renewal, and Reveling”...

SPOTLIGHT ON: January 2015: New Years Day (1st), Linda’s return to work (5th), Martin Luther King’s Birthday (19th), Linda’s 59th Birthday (27th)...Happy Healthy New Year to you and yours from “Gutsy,” Linda’s ileostomy stoma!...“Resolutions, Renewal, and Reveling”...another way to convey: “Awareness, Acceptance, and Advocacy”...

Awareness involves “Resolving” to: 1) check for blood in stools/urine, 2) choose life-saving colonoscopy, with follow up life-affirming ileostomy, colostomy, or urostomy surgery, if needed...Fulfill MLK-like “dream” of a better life by “Renewing” your commitment to improved health...But, take your life for granted, and your “Reward” could be premature death from denial/avoidance of “Responsibilities!”...

Postsurgical Ostomy Acceptance occurs when we CELEBRATE BEING ALIVE...“Realizing” that even with a stoma, WE are still normal, beautiful, loveable people who can feel EMPOWERED to live well with an ostomy! STOMA ARRIVAL=YOUR SURVIVAL to “Revel” in the privilege of having just one more precious day with relatives and relationships for the rest of our lives!...Accept YOUR stoma, and nonostomates likely will “Reevaluate” and “Readjust” their attitudes, too! (See Linda’s 1st Phoenix article/photo, June 2011, p.30)

...

The New Year: time to “Reflect” by Advocating for Ostomy: 1) Share YOUR ostomy journey: a) at support group meetings, b) on Inspire.com: ConvaTec’s “Revolutionary” 24/7 inspirational informational social media website, c) by submitting your unique experiences/perspectives/humor, in writing, to this (or YOUR local) newsletter, or publications, e.g., Phoenix mag, and d) by educating general public to dispel their negative preconceived notions; 2) drive loved ones to/from colonoscopy, remaining loving/loyal if he/she has ostomy surgery; 3) Advocate for YOUR stoma: a) “Rejuvenate” the New Year with a pouch cover from Koolostomy.com, b) Make your stoma a STAR!...email his/her name: Patti@ostomymcp.com or Linda: blumbergl@duvalschools.org for inclusion in future Gutsy’s Gab column...In January, Gutsy welcomes “Remarkable:” “Glennis the Menace” and “Bella” (Inspire.com)...cathartic and fun! (See Linda’s 2nd Phoenix article/photo, December 2013, p. 78)...

BOTTOMLINE/MARK YOUR CALENDAR: January: Time to get your “Rear” in Gear!...our next Jax ASG meeting is Sunday, January 18, 2015...Come CELEBRATE BEING ALIVE...With “Reckless” abandon, “Revisit” with old friends, enjoy Kimberly’s “Regal Refreshments and Recipes”...“Reexamine” ostomy concerns/experiences, e.g., nonostomates “Recall” James Deans’ “Rebel Without a Cause”...but, our theme for the New Year should be: “Rebel Without a Colon/Bladder!” (hahaha)...caring/sharing...all that is “Required?”...YOU, of course!...

See YOU there!!

GAINESVILLE OSTOMY SUPPORT GROUP
JANUARY, 2015 NEWS LETTER
From Nelson Griffiths, 352-376-8703

OUR NEXT SUPPORT GROUP MEETING
January 4, 2015, 2 pm, at the Hope Lodge
2121 SW 16th Street, Gainesville, FL

Welcome to our combined newsletter! Our sister support group in Jacksonville has offered to print and distribute our Gainesville group's news along with items of interest to all ostomates. Thank you Jacksonville folks! At our December support group we had a good discussion of difficulties with prolapsed stomas. A recent issue of the combined newsletters had a very informative article about care of the stoma and prolapsed stomas. Our December discussion would have been very much helped if we had that material in mind. Every issue of the Jacksonville newsletter carries informative and helpful articles. As this combined newsletter arrives, either by email (if we have your email address) or by post, please take note of all news included.

Dues are now due.

Once a year we are asked to make a three dollars contribution to the national UOAA. Ernie Bliss, our collector, receives these cash contributions and combines them in one payment for our national membership. We hope to receive these donations during January and February group meetings. Our goal is to enlist everyone on our list which includes about 75 members. Thank you for your cooperation and support.

Our January 4 group meeting agenda

is still in progress. Many of us are aware of the very special work that Jean Haskins has done arranging for speakers for every other month programs. Unfortunately Jean had a fall which has required extensive rehabilitation and confined her to a therapy setting for this. Therefore, she has been unable to confirm our speaker for January. We know that, if we have a speaker, we will have a special time of learning. Fortunately, we seem to do pretty well assisting each other as we share issues and difficulties. So, if you have a concern, please be sure to be present and help resolve one another's challenges.

Several of our folks have been in touch

with us to say that they regret missing recent gatherings. Some have been involved with other therapies, others have been out of town, and several are just so busy doing volunteer work that they cannot share with us just now. Thank you for letting us know. We try to share your messages when we are together, your support in whatever way given, is appreciated.

Brinda Watson, our group leader, wishes everyone a very happy and prosperous new year. We all need to be thankful for our friends and family and wish them all well in the coming year!

The Gainesville Ostomy Support Group leaders:

Leader – Brinda Watson – 373-1266

Program Chair - Jean Haskins- 495-2626

Newsletter editor: Nelson Griffiths -376-8703

Ernie Bliss **Dues Collector** 386-462-1496

Kim's version Apple Pie Parfait
Recipes served at Jacksonville Ostomy Support Group Meetings

Pumpkin Spice Bars

Bars:

- 4 Eggs
- 2 C. Sugar
- 1 C. Veg. Oil
- 1 Can (15 oz) Pumpkin
- 2 C. All Purpose Flour
- 2 Tsp Baking Powder
- 2-1/2 Tsp Cinnamon
- 1 Tsp Baking Soda
- ½ Tsp Salt
- 1 Tsp Ground Ginger
- ½ Tsp Ground Cloves

Frosting:

- 1 Pkg (3oz) Cream Cheese – softened
- ¼ + 2 Tsp Butter – softened
- 1 Tsp Vanilla
- 2 C. Powdered Sugar

Direction:

Pre-heat oven 350 degrees. Grease jelly roll pan. Beat eggs, sugar, oil and pumpkin. Stir in flour, baking powder, baking soda, salt, cinnamon, ginger, cloves. Pour batter into jelly roll pan. Bake 25-30 minutes or until light brown. Cool

Mix cream cheese, vanilla, butter until combined. Gradually add powdered sugar until smooth. Frost & enjoy.



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Ostomy Terms and Procedures

If you are reading this newsletter, chances are you or someone close to you has had an intestinal or urinary diversion. This is the broadest terminology for the types of surgeries we are all dealing with at various stages, whether just starting out or successfully managing for a number of years. Quite simply, our body's waste management system has been diverted or changed from its normal course. If you have an intestinal diversion, the way your body excretes (or passes) solid waste has been changed. If you have a urinary diversion, the normal flow of urine from the kidneys to the bladder has been interrupted. These two types of diversions can be further divided into two more subdivisions: continent and incontinent diversions.

- **Continent Diversion**: A continent diversion is one where the elimination of solid waste or urine is controlled. The control is made possible through the creation of an internal reservoir (a man-made pouch inside your body) to hold the feces or urine. Elimination is then done through manually inserting tubing to drain the reservoir (catherization). In the case of "pull-throughs" where the reservoir has been attached to the anus, elimination is through normal means. You may have a Kock (or K) pouch; a Barnett Continent Ileal Reservoir; or a pull-through pouch such as J, S, or W pouch; an ileoanal (or pelvic) reservoir; or similar procedure. These are all considered continent (controlled) diversions.
- **Incontinent Diversion**: The elimination of either fecal waste or urine is not controlled in this type of diversion and requires the patient to wear a pouching system. Usually an ostomy is considered to be an incontinent procedure.
- **Ostomy**: An ostomy refers to a surgically created opening in the body for the discharge of body wastes and allows for the formation of a stoma.
- **Stoma**: The actual end of the small intestine (ileum) or large intestine (colon) that can be seen protruding through the abdominal wall and through which the feces or urine is discharged. The ideal stoma is round, dark pink and moist. The skin around the stoma (the peristomal skin) is intact with no breaks or cuts and no irritation. Not every stoma is ideal, though. Your own stoma may be retracted, flush or prolapsed and may require additional attention to manage properly.
- **Retracted Stoma**: Your intestine is pulling in and creating a concave effect, so that your stoma is below the surface of your skin. This may result in increased skin irritation.
- **Flush Stoma**: The stoma is at the same height, or flush, with the surface of the skin. This also may result in increased skin irritation.
- **Prolapsed Stoma**: The intestine is being pulled out of the abdominal opening, so that the stoma sticks out further than desirable. This can be uncomfortable and may cause the stoma to not work as efficiently.

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To: