

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



Roolostomy

A Koolostomy Pouch Cover is a product that will assist the ostomate with eliminating moisture and heat associated with wearing an ostomy appliance. The Koolostomy Pouch Cover slips over the existing collection bag (pouch). This product will "wick" moisture away from your skin, making the appliance comfortable to wear. Koolostomy Pouch Covers can be worn with most pouches, regardless of the manufacturer.



I am an ostomate with a permanent colostomy. It was discovered in the early part of 2001 that I had a large mass in the pre-sacral space (lower part of the pelvic area). Prior to surgery my doctor informed me about colostomies. It wasn't until after surgery that I learned I would have to deal with wearing an ostomy appliance for the rest of my life.

Since I am an experienced seamstress, I searched to find a comfortable material to cover the pouch. I purchased several different types of materials and finally came upon a lightweight fabric that suited my need. Then the idea of a decorative pouch cover came to mind. Because we must wear this appliance, why not make it look and feel good. The Koolostomy Pouch Cover does both! I solved the "heat" problem, but also I now wear covers that make me feel good about myself.

All Koolostomy Pouch Covers are machine washable. The Koolostomy Pouch Covers are available in several different designs: Basic, Silky Satin, Swimwear, The Fly, The Storage, The Lacy, Shower Pouch, Victoria, The Dolphin and Custom Design. They come in children and adult sizes. For special orders not listed in the catalog, please contact us through our Customer Service.

~Verna Griffin, Koolostomy Owner & Ostomate KOOLOSTOMY.COM

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. 4836 Victor Street Next Meeting: **TBA**

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 www.ostomyocala.com

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: **September**

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 UF North Campus

UF Health North 15255 Max Leggett ParkwayJacksonville, FL 32218

(Meeting Room 3-4)

Free parking

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 Saddlebroon Recreation Center 3010 Saddlebrook Lane The Villages, Florida Linda Manson tvostomy@gmail.com 865-335-6330 Next Meeting: via Zoom

Contact Linda tvostomy@gmail.com



...Continued from the June Issue of the MailBag

Napoleon Bonaparte



Napoleon Bonaparte was a military conqueror, world leader, and an ostomate. Emperor of France from 1804 to 1815, Napoleon is often pictured with his right hand in his shirt, a method he is rumored to have developed to conceal his goat bladder ostomy bag.

Rolf Benirschke



Rolf Benirschke is a former NFL placekicker. Shortly after joining the San Diego Chargers, Rolf's battle with Ulcerative Colitis took a turn for the worse and the doctors ultimately removed his colon. Waking up with two ostomies, Rolf went on to adjust to life as an ostomate and continued to kick for the Chargers for eight years.

Thomas P. O'Neill Junior (Tip O'Neill)



Tip O'Neill was an American politician, Ambassador to Ireland, and the second longest-serving Speaker of the

U.S. House of Representatives in U.S. history. Tip held a seat in the House Rules Committee then rose to the role of Speaker of the House in 1977 until his retirement in 1987. In retirement, Tip developed colon cancer and eventually underwent a ostomy surgery. This motivated him to make several public service announcements with athletes and stars to promote awareness of colon cancer.

Babe Zaharias



Babe was an extremely athletic woman. In 1932 she won two Olympic Gold Medals and one Olympic Silver Medal for Track and Field. She played basketball, but was always known for Track and Field. She began playing golf in 1935. Although she started the sport much later in life than others, she was successful. She played in 3 PGA tours.

While still playing golf, Babe was diagnosed with colon cancer in 1953. She underwent colostomy surgery, and made a comeback in 1954, winning the Vane Trophy. Her colon cancer recurred in 1955 and Babe passed away the next year at 45 years of age. She has since been inducted into the Hall of Fame of Women's Golf and was named "10th Greatest North American Athlete of the 20th Century" by ESPN.

Continued in the August MailBag...

The Science of Soap by Pall Thordarson,

The Guardian, March 12, 2020; via Vancouver (BC) Ostomy HighLife

Viruses can be active outside the body for hours, even days. Disinfectants, liquids, wipes, gels and creams containing alcohol are all useful at getting rid of them – but they are not quite as good as normal soap.

When I shared the information above using Twitter, it went viral. I think I have worked out why. Health authorities have been giving us two messages: Once you have the virus there are no drugs that can kill it or help you get rid of it. But also, wash your hands to stop the virus spreading. This seems odd. You can't, even for a million dollars, get a drug for the coronavirus – but your grandmother's bar of soap kills the virus.

So why does soap work so well on Sars-CoV-2 (the coronavirus that causes COVID-19) and indeed on most viruses? The short story: because the virus is a selfassembled nanoparticle in which the weakest link is the lipid (fatty) bilayer. Soap dissolves the fat membrane and the virus falls apart like a house of cards and dies – or rather, we should say it becomes inactive as viruses aren't really alive.

The slightly longer story is that most viruses consist of three key building blocks: ribonucleic acid (RNA), proteins and lipids. A virus-infected cell makes lots of these building blocks, which then spontaneously selfassemble to form the virus. Critically, there are no strong covalent bonds holding these units together, which means you do not necessarily need harsh chemicals to split those units apart. When an infected cell dies, all these new viruses escape and go on to infect other cells. Some end up also in the airways of lungs.

When you cough, or especially when you sneeze, tiny droplets from the airways can fly up to 10 meters. The larger ones are thought to be the main coronavirus carriers and they can go at least two meters. These tiny droplets end up on surfaces and often dry out quickly. But the viruses remain active. Human skin is an ideal surface for a virus. It is "organic" and the proteins and fatty acids in the dead cells on the surface interact with the virus.

When you touch, say, a steel surface with a virus particle on it, it will stick to your skin and hence get transferred on to your hands. If you then touch your face, especially your eyes, nostrils or mouth, you can get infected. And it turns out that most people touch their face once every two to five minutes.

Washing the virus off with water alone might work. But water is not good at competing with the strong, glue-like interactions between the skin and the virus. Water isn't enough. Soapy water is totally different. Soap contains fat-like substances known as amphiphiles, some of which are structurally very similar to the lipids in the virus membrane. The soap molecules "compete" with the lipids in the virus membrane. This is more or less how soap also removes normal dirt from the skin. The soap not only loosens the "glue" between the virus and the skin but also the Velcro-like interactions that hold the proteins, lipids and RNA in the virus together. Alcohol-based products, which pretty much includes all "disinfectant" products, contain a high-percentage alcohol solution (typically 60-80% ethanol) and kill viruses in a similar fashion. But soap is better because you only need a fairly small amount of soapy water, which, with rubbing, covers your entire hand easily. Whereas you need to literally soak the virus in ethanol for a brief moment, and wipes or rubbing a gel on the hands does not guarantee that you soak every corner of the skin on your hands effectively enough. So, soap is the best, but do please use alcohol-based sanitizer when soap is not handy or practical. * Pall Thordarson is a professor of chemistry at the University of New South Wales, Sydney Ed. Note: This article says there is no drug for the coronavirus, which was true when the article was originally published on March 12. Now, as of early May, a drug called remdesivir has shown some promise and is being used in some cases of COVID-19.

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/



What to Do As an Ostomate with the Flu

Nashville Area Ostomy Association

Ostomates must take special care not to take any medications including laxatives without being prescribed by a doctor as they have no effect on viruses and can change the balance of the gut and cause severe diarrhea. For the Colostomate the diet needs to change while recovering from the flu. Eat a fiber free diet and then gradually move towards a regular normal diet.

DO NOT IRRIGATE WHILE HAVING DIARRHEA AND DO NOT TAKE LAXATIVES. Some drugs and specific foods can cause constipation in Colostomates. This can be prevented by increasing your fluid intake.

Ileostomates: Diarrhea presents a big problem. In addition to causing excessive discharge a person with an ileostomy can risk an electrolyte imbalance. Most importantly POTASSIUM must be kept within safe levels. If vomiting and dehydration becomes an issue the Ileostomates must go to the ER earlier then later. It cannot be stressed how important it is to go to the ER as an Ileostomate cannot hydrate oneself fast enough.

It is recommended to drink Ginger Ale, bouillon and either Gatorade or Pedialyte. Always ensure the symptoms are related to the Flu and not Gastritis.

Urostomates: Follow the same special care and make sure to protect the kidneys. Prompt attention of distress from the Flu will make a difference.

Colostomates: Always protect the abdominal muscles if coughing or sneezing as a peristomal hernia can develop and a support belt can make a difference.

General Information: Authors Note: (I can certainly attest to this suggestion, as it has helped me to keep hydrated, which has cut down my hospital stays.) Always have Lomotil and Imodium plain and Imodium ES (extra strength) available. Imodium is by far the better choice as it does not contain Atropine or Anti-cholinergics which can have ramifications with many medications as well as side effects.

Pouch options with the Flu: If you have a closed pouch switch to a drainable one and finally if you do get excoriated or raw peristomal skin use Milk of Magnesia; Mylanta or Maalox and dab it onto the raw skin areas and blow dry on low until a white dry crust is seen. One can pouch on top of the white crust and the raw skin will be healed without 24 hours.

Always try to have a variety of pouches available at all times. Simply contact your vendors and ask for free samples.

Get your Flu shot – it is worth it!!

UOAA's 8th National Conference

AUGUST 5, 2021 - AUGUST 7, 2021 HOUSTON, TEXAS

https://www.ostomv.org/event/uoaa-8th-national-conference/



Preparing for a Disaster with an Ostomy

Whether you are living in an area often affected by natural disasters or not, it is important to plan ahead if you are living with an ostomy. These tips may help you to feel more confident in the event of a disaster or severe weather.

- The Federal Emergency Management Agency (FEMA) suggests that if you take medicine or use medical supplies on a daily basis, be sure you have what you need on hand to make it on your own for at least 7-10 days.
- If you don't already use a moldable skin barrier, consider trying one now. In the event you do not have access to scissors, moldable skin barriers may be easier to manage when displaced from your home.
- Keep a copy of your prescriptions, dosage or treatment information, specific order number and name of ostomy products used, healthcare provider contact information and medical insurance information with your emergency supplies.
- Hydration is important. If you have advance notice of a potential disaster situation, make sure you have enough clean drinking water on hand for at least three days. If you do not have advance notice, consider water sanitation devices available from camping or outdoor equipment retailers.
- If possible with your personal dietary needs, find some non-perishable, ostomy-friendly foods to keep with your emergency supplies. For suggestions on what foods may work for you, consult with your healthcare provider.
- Disposable cleansing wipes may be helpful if your normal pouch change routine is altered due to lack of clean water. Consider keeping cloths with your emergency supplies.
- Review your emergency preparedness plan with your family and friends. Having a support system in the event
 of a disaster may increase your confidence in handling various situations.

Editor's note: This educational article is from a UOAA digital sponsor, ConvaTec. Sponsor support helps to maintain our website www.ostomy.org and the free trusted resources of UOAA, a 501(c)(3) nonprofit organization.

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



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