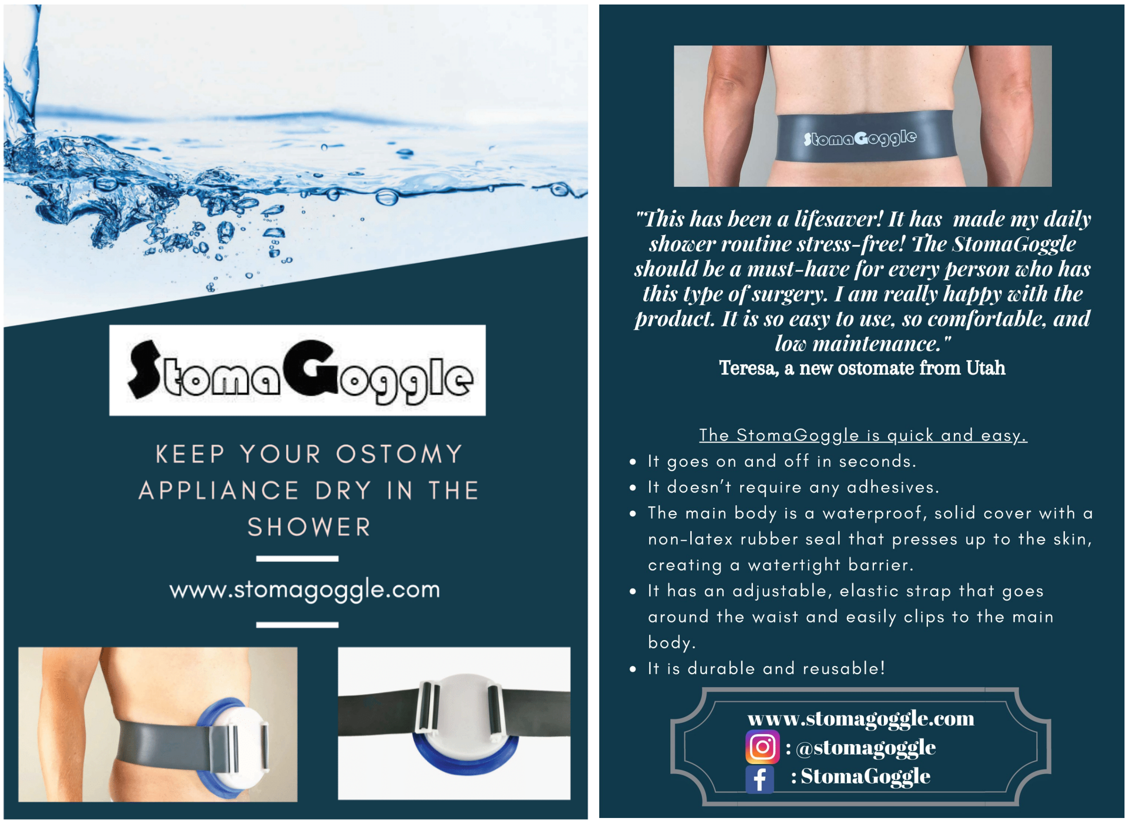
UOAA United Ostomy Associations of America, Inc.

The MailBag

July 2021

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



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

Check Out The MailBag Now On FaceBook
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: **July 18th**
Zoom will also be available for those out of area or uncomfortable to attend in person.

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: **TBA**

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

The importance of hydration in short bowel syndrome

Editor's note. The following article can't be edited or truncated in any way if shared.

When a person has a condition called short bowel syndrome or SBS, their body has a hard time absorbing all the nutrients and fluids it needs to function normally. This can put them at higher risk for dehydration, which can be a serious concern, especially for those with no colon and high ostomy outputs.

For people with SBS, battling dehydration isn’t a matter of simply drinking more water. In fact, water can make the problem even worse because it does not contain the proper amount of sodium or glucose necessary to maximize intestinal absorption, which results in an increase in diarrhea or ostomy output. Other types of fluids to avoid include sodas, fruit juices, alcoholic beverages, and sweet teas because of the high amount of sugar in these drinks.

Dehydration shouldn’t be ignored. If it is ongoing, or left untreated, dehydration can lead to serious complications, such as kidney damage, that may require hospitalization. Here are some signs of dehydration to look out for:

- Rapid weight loss
- Diarrhea or stool output is higher than total fluid intake
- Urinating less frequently
- Dark colored urine
- Fatigue
- Lightheadedness or dizziness when standing
- Dry mouth
- Thirst

Many things can help manage dehydration, and a healthcare professional should be notified as soon as possible when signs of dehydration occur to help lessen or prevent serious complications. They will look at the type of food, drink, and vitamins in the diet and then take necessary steps tailored to the specific bowel function and anatomy in order to best improve the hydration status. Anti-diarrheal medications and oral rehydration solutions (ORS) are usually recommended as they can also achieve this goal for many people with SBS.

Why oral rehydration solutions can help
Oral rehydration solution (ORS) can be an optimal way to manage dehydration due to diarrhea and maintain proper hydration in people with SBS. It is a simple, yet specific, solution of sodium, glucose, and water. The special ratio of ingredients has been shown to add back what’s lost and enhance absorption. Therefore, ORS will be absorbed even in the setting of diarrhea. It is important to drink fluids slowly and continuously throughout the day to avoid abdominal cramps and diarrhea.

An example of homemade ORS
1 quart water
¾ teaspoon salt
6 teaspoons sugar
Optional: Crystal Light® to taste (especially lemonade or orange-pineapple flavors)

While ORS can be extremely helpful, some people do not like how it tastes. There are some other recipes that may be more agreeable. Always consult a healthcare professional to determine if ORS is right for you.

SBS management
Hydration is just one part of the big picture of SBS management. There are many more factors and strategies to consider when deciding on a plan to manage SBS. To learn more about how intestinal surgery can impact your nutrition and hydration needs, visit HydrationandSBS.com

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

Ostomy Myths and Hints

From an article on Wendy Lueder's presentation to the North Central Oklahoma Ostomy Association by Joel Jacobson; Halifax (Nova Scotia) Gazette.

The invitation stood out from the North Central Oklahoma Ostomy Association to join its ZOOM meeting. The speaker, Wendy Lueder of Broward Florida Ostomy Association, was to speak on Ostomy myths and hints. It sounded interesting, so here I was on an April Saturday afternoon, connecting with people from all across the US. Wendy has had an ostomy since 1972 and is very willing to talk about it. She travels the southeastern US to speak to groups and promote the good life an ostomate has. She de-bunked half a dozen myths.

- Things haven’t changed since the early days. Equipment used to be bulky, heavy and you emanated an odor. No longer the case, as we all know, with lighter, easier-to-use equipment, and ways of eliminating or reducing odors.

- Ostomates need to wear baggy, unsightly clothes. “Today, I wear tight jeans and you can’t see anything,” says Wendy. “You can be comfortable in any type of clothing.”

- Ostomates have odor control problems. That used to be the case, she says, but new appliances are odor-proof.

- Once you’re an ostomate, you’re continuously aware of your appliance. Once the healing starts and the complications end, it’s like background music. You don’t think about it. You only think about it when you have to change or empty the pouch or have a medical issue.

- Ostomates think of themselves as patients. That isn’t our identity. I’m Wendy. 6. As an ostomate, I’m all alone. Wendy gave some US stats. There are almost one million people living with an ostomy. More than 100,000 surgeries performed annually. Likely over one million have had a temporary ostomy that’s been reversed.

She concluded this portion by saying, “Hopefully someday being an ostomate means living in a Stigma-Free Zone.” As for solutions to problems associated with ostomies and stomas and skin irritation, Wendy suggested a few things.

- Having odor problems, skin irritation and frequent leakage is not a new normal. See a WOC nurse to address these issues.

- An ostomy is a treatment and hopefully a cure for some, not a disease.

- Sounds (burps) made by your ostomy will diminish over time.

- If you itch at the stoma site or under the appliance, it can mean you are slightly dehydrated. Try drinking a glass or two of water. Wait 15 minutes and see if it goes away. If not and it persists, might necessitate a call to a nurse.

- An ostomate does not need to sponge bath. You can shower, bathe in the tub, even snorkel or scuba dive with your appliance. It can get sopping wet, and you’ll have no problems.

UOAA’s 8th National Conference-Canceled

AUGUST 5 - AUGUST 7

Due to the continued uncertainty with COVID-19, UOAA has made the decision to cancel our 2021 National Conference. We will revisit the situation next year to determine if one can be held in 2022. Thank you.

Post Ostomy Surgery: Do’s and Don'ts of Exercise

Exercising after ostomy surgery is about patience and doing what feels right. It’s important to take your time and know your limits. When you begin working out again, you may run into some challenges or limitations. Be patient and don’t give up. Before long, nothing will stand in your way.

Optimal Ostomy Exercises
After ostomy surgery, many people may find these activities to be easier than others. But before starting any new exercise, talk to you doctor to make sure you're ready.

Core muscle conditioning
People who have an ostomy are at greater risk for having weakened core due to years of digestive or bladder issues, coupled with surgery. Building back core stability and flexibility is important, as it makes exercises and routine activities easier. Here are a few basic exercises to get started:
Hip Extensions
Upper Body Extensions
Arm/Leg Extensions
Pelvic Tilt
Bridging

Swimming
Swimming is great exercise. It works your whole body without putting strain or pressure on your stoma. Most ostomy pouching systems are water resistant, even for swimming. First, ensure that your pouching system is securely in place. Then, cover the vent on your deodorizing filter with a filter cover to prevent water from entering the pouch. For more swimming tips visit:
https://meplus.convatec.com/articles/swimming-with-an-ostomy/

Walking
Get your steps in. Walking is a simple and energizing way to exercise. When walking, you can build up fitness at your own pace. Walking can also reduce stress and constipation.

Reminder!
Choose an activity you enjoy. Running, jogging, swimming, climbing, skiing; when it comes to working out with an ostomy, you shouldn’t be prevented from staying fit the way you want to.

The me+™ recovery series, provides information and support about the importance of movement and physical activity after ostomy surgery.

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.

UOAA’s 8th National Conference
AUGUST 11, 2022 - AUGUST 13, 2022

2022
HOUSTON
TEXAS

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

First Steps for New Ostomates

Source: Lincoln Ostomy Association Sparrow

After surgery, new ostomates may fear that their social role may be changed and that others may not accept them as in the past. One of the first concerns seems to be how to tell others about your surgery, who to tell and when.

- Ostomates can explain surgery with a few brief statements such as, “an ostomy is a surgical procedure for the diversion of the bowel (or bladder).”

- Ostomates do not have to tell everyone about surgery. Be selective about who and how much to tell. It may be only to friends who will be supportive through rehabilitation.

- Returning to work place may present a concern about restroom facilities, interaction with co-workers, and feelings of being “watched.”

- A few co-workers may need to know in the event of an emergency.

- Employability and insurability are issues for some individuals. If these issues develop, seek help from healthcare professionals and/or talk with others who have found solutions.

- Sexuality issues are common concerns for the new ostomate. Linked closely to our feelings of sexuality is how we think about ourselves and our body image.

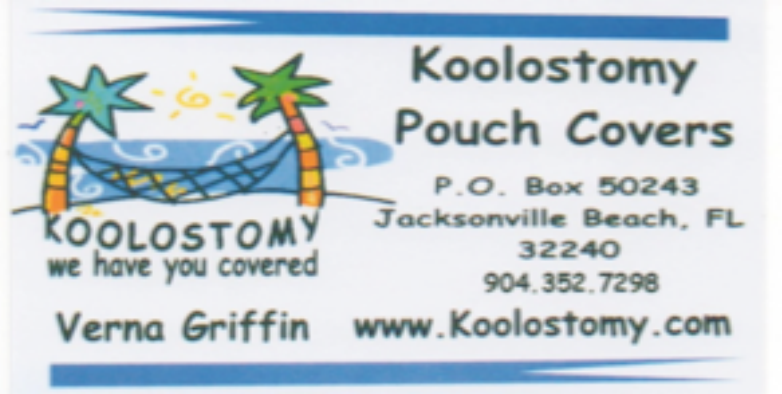
- Any sexuality concerns should be discussed between the patient and their partner. An intimate relationship is one in which it matters how well two people can communicate about the most personal of human functions, that is, bodily elimination and sex.

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

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/



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

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