

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



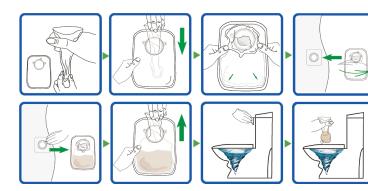
Colo-Majic® Biodegradable Colostomy Liners

How to use Colo-Majic® Liners



Colo-Majic® flushable ostomy bag liners are easy to use, and help thousands of colostomy and ileostomy patients in Canada, the USA and further afield. The bag liners' patented design features make inserting and removing them from a pouch very simple, with the added feature of being able to flush them after use. Helpful hint: always handle Colo-Majic® disposable colostomy bag liners with dry hands! Many patients express renewed self-confidence and proclaim increased mobility after

they begin using our flushable Colo-Majic® ostomy pouch liners to manage their dayto-day output needs wherever they are in the world, whether visiting friends and family, at work, traveling or on vacation.



To order samples: <u>https://www.colomajic-</u> <u>samples.com</u>

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 <u>http://ostomymcp.com/id6.html</u> 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 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: **October 11th**

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

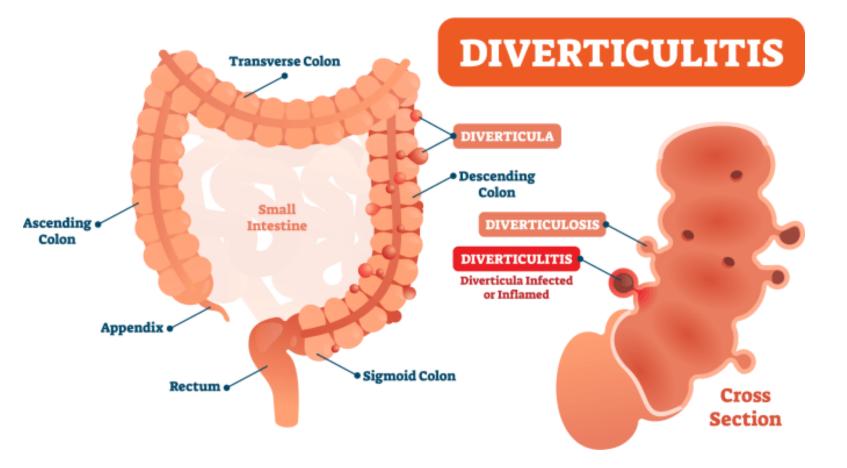


DIVERTING DIVERTICULITIS

By Ellyn Mantell



From the time I can remember, constipation was always an issue for me. I assumed I was doing something wrong to cause it. It turns out that I was born, like so many, with a redundant foot of bowel, which in layman's terms, means that my colon was not only oversized, but a portion of it went in the wrong direction. Here is what I mean...the colon or large intestine ascends on the right side (ascending colon) and goes across the abdomen (the transverse colon) and descends the left side (the descending colon.) That is exactly the path that stool takes in its journey to leave the body. My redundant foot of bowel meant that the transverse colon actually went up at the connection to the descending colon, for a foot, before heading downward, so stool had to travel against gravity before leaving my body.





My first barium enema was when I was 10 years-old, and although we didn't know what the problem was, I was always told at that time, and every subsequent test, that my sluggish bowel would be an issue for me, (and it truly was, until my ileostomy 6 years ago). So, it came as no surprise that I was also told, each colonoscopy or c-t scan, that I had severe diverticulosis, which could become diverticulitis, a problem that often requires medical intervention.

The diverticula are small sacs that form along the mucosal lining of the colon, often due to straining to move stool through the intestinal tract, which puts pressure on the intestinal wall (which causes the bulging). This issue can worsen with age, medications and other causes of constipation. If the diverticula are inflamed or rupture, serious infection can result, which then is called diverticulitis.

While diverticulosis doesn't cause discomfort, diverticulitis can be terribly painful, cause fever, constipation or diarrhea, nausea and fatigue. Several in our <u>Ostomy Support Group</u> have had resections of their colon and ostomies due to diverticulitis. Some choose to be reversed after the several weeks of healing necessary to allow the connection in the intestine to do its job. Others choose, instead, to live with their ostomy, which offers them freedom from constipation.

There are ways to avoid diverticulitis, and they are manageable for most. Eating a high-fiber <u>diet</u> rich with fruits and vegetables and whole grains is a great place to start. You may remember that I have also mentioned that is a smart way to enhance our immune system, which may help fight Covid-19. Add more fluids, and if possible, pitted watermelon, for an extra kick of fluid. These tips will soften waste and help it pass more quickly through your colon. That may reduce the risk of diverticula becoming inflamed. Also, exercise and maintaining a healthy weight are very helpful.

Many physicians recommend reducing red meat; some used to say avoid nuts and seeds, although that restriction seems to have changed. As I tell others with an ostomy especially those with an <u>ileostomy</u>, if you eat nuts and seeds and fresh fruits and vegetables, which are healthy and filling, please chew, chew, chew, since that is the best way to avoid inflammation or a <u>blockage</u>.

Many medications can impact <u>motility</u> of the bowels, so be mindful to changes when you add or delete medications, and please address with your physician any concerns. And most important, if you notice any changes, pain, distention, nausea, vomiting or generalized discomfort in your abdomen that has you concerned, do not wait. Speak with your physician and consult UOAA's <u>blockage card</u> and don't be hesitant to go to the Emergency Room if needed. Much can be done to not only make you feel better, but to prevent a manageable situation from becoming extremely serious!

Ellyn Mantell is a UOAA advocate and Affiliated Support Group leader from New Jersey. You can follow her personal blog at <u>morethanmyostomy</u>

UOAA's 8th National Conference AUGUST 5, 2021 - AUGUST 7, 2021 HOUSTON, TEXAS

CANCELED

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

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/



6 Tips for Avoiding Ostomy Leakage

Leakage of your stomal output can happen for a variety of reasons. Explore some prevention tips to help you avoid leaks.



Learn how to help prevent stoma fluid leakage.

Making sure your ostomy pouch adheres properly will go a long way towards preventing leaks. Here are some tips for staying leak-free:

Put a high priority on ostomy skin health. Damaged skin around your stoma can be hard to manage because you need to place the ostomy pouching system over the irritated area. This is why being proactive with your peristomal skin health is so important.

Suggestions:

- Follow these routine skin care tips
- Consider the use of a ceramide-infused skin barrier, which has been demonstrated to support skin health
- Contact your stoma care nurse right away if you notice signs of a peristomal skin complication

Make sure your skin barrier fits properly. A skin barrier that fits well around your stoma helps protect your skin from being irritated or damaged by drainage. It doesn't really matter whether your stoma is large or small, or whether it protrudes or not, as long as the drainage flows into your pouch without leaking under the skin barrier. Suggestions:

- Measure the stoma using a <u>stoma measuring guide</u> before every barrier application
- Apply the skin barrier, making sure it fits where the skin and stoma meet
- Verify that no skin is showing between the skin barrier and the stoma
- Apply stoma powder to any open skin before applying your new pouching system
- Discontinue use of stoma powder when peristomal skin is no longer weepy or moist to the touch. If red, but not moist, stoma power is not necessary.

Change your ostomy pouch on a regular basis. It is important to change your pouch on a regular basis before it is susceptible to leakage. An overfilled or overweight pouch causes undue strain on your skin barrier attachment to the skin, which could lead to leakage.

Suggestions:

• Change your pouch on a regular schedule before it leaks



- Pouching system wear time is based on personal preference, your unique stoma, and output
- Twice a week changes are considered usual

Make sure your ostomy pouch is secure during exercise or physical activity. If you are participating in sporting activities or other forms of exercise, you can wear certain clothing or accessories that can help ease your concerns. The same goes for other "physical activities" (i.e. sex).

Suggestions:

- Use a support garment or an ostomy wrap to keep the pouch securely in place
- Try different sports attire, such as running tights or Lycra® shorts, to see what works best
- It's also a good idea to empty your pouch before exercise or having sex

Take special care when removing your ostomy skin barrier. Improperly or rapidly removing of your skin barrier could cause skin stripping. The associated damage could lead to irritation, pain, and leaks.

Suggestions:

Take your time – gentle and slow is best

• Gently peel the barrier away from skin, starting at the top and working downwards, while pressing against the surrounding skin **Find the right product mix for you.** There are many ostomy products and accessories that are designed to ensure good skin health and help prevent leakage. Every stoma is unique, so you will need to determine what is best for you by working with your stoma care nurse, as well as trial and error.

Suggestions:

- Keep up on the latest products and research
- If you have broken skin around your stoma, use a stoma powder (not talcum powder) to absorb moisture and protect your peristomal skin.
- Try other leakage prevention products, such as skin barrier rings, paste, and strips

What to do if you have a leak

Following these preventive steps can help you prevent leaks. However, if you do experience leakage, it is important to pinpoint the source. Contact your stoma care nurse for help.

This article is from www.hollister.com



Medical Care Products Now Carrying Ostomy Pouch Covers TOLL FREE 800-741-0110

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

Medical Care Products, Inc PO Box 10239 Jacksonville, FL 32247-0239

To: