

The Mailbag



Meetings are held at the Baptist Medical Center
8th Floor - Meeting Room C - 3rd Sunday Quarterly @ 3PM

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Mark Your Calendar For Our Next Chapter Meeting October 21st @ 3pm

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International Ostomy Association Goes Blog
Have you visited the International Ostomy Association (IOA) Website lately: www.ostomyinternational.org? Well last month they went live with their Blog from the 12th World Congress held in Puerto Rico August 7-12. Currently they have Blogs from the European Region, 20/40 Focus, Lions For Stoma Care and the IOA Today Newsletter. Plans call for all Regions to have a Blog soon. This includes North & Central America. If you have time take a look and see what is going on around the world with Ostomates.

Now speaking of hearing about Ostomy related information from around the world if you have not done so you should check out the **IOA TODAY Newsletter**. This newsletter brings you Ostomy related information from around the world. It is a quarterly (four times a year) newsletter packed full of great information. You may check this out via the IOA Website: www.ostomyinternational.org.

Visit our chapter Website:
<http://www.ostomymcp.com/chapter/Jaxchapter1.htm>

A Pouch Falling Off

Adapted By The New Outlook

One of the most embarrassing situations that can befall a person with an ostomy is to have an accident because the barrier or the pouch pulled loose. Multiple reasons exist to explain the falling-off of a pouching system:

- The stoma
- The skin around the stoma
- The barrier
- The pouch

The stoma may be placed too close to a scar, crease or bodily prominence so that the twisting or bending loosens the barrier. There is no single solution for a misplaced stoma. A different skin barrier may be tried; e.g., one that is softer and more pliable like the new and improved version of Hollister's New Image Ostomy System.

An irregular area may be built-up with one of the new barrier seals—like ConvaTec's Eakin Seals—or with paste. Using these products will usually solve most challenges.

A stoma may require surgical intervention if one has a prolapsing stoma that is pushing the pouch off. Inversely, a flat or recessed stoma may cause pooling of the effluent around the stoma eroding the adherence and eventually lifting the barrier from the skin. Fortunately, manufactures have developed pouching systems with curved barriers that put minor pressure on the skin around the stoma. These convex ostomy systems are a growing product line of retailers as more and more people discover the advantages of wearing a convex barrier.

The most stubborn falloff problem can usually be solved by using a seal with a convex barrier held on with a belt. Your WOC nurse is expert in solving these types of issues.

The skin around the stoma might be too oily or too irritated for the barrier to hold satisfactorily. Bath oils and greasy creams should be avoided. However, there are products that may be placed on the peristomal skin to treat skin irritation issues. Ostomy product manufacturers all carry skin care products that will treat peristomal skin and yet at the same time allow your barrier to adhere firmly to the skin.

There are many different manufacturers of a variety of different skin barriers. They offer you a large choice of products that may work for you. You need to try different products if you are having challenges of any kind. One skin barrier will not work for everyone in the same way. For instance, one person with a urostomy in our local ostomy association had a problem with falloff using a flat, Stomahesive barrier. He saw a local WOC nurse who recommended that he try a Cymed Ostomy System with Microskin only; i.e., with no washer type skin barrier or seal attached. It worked! Our member is so pleased that he can resume his active life style and go back to his former job of being a bouncer at an inner city strip club.

A well fitting pouch that is suited to one's needs and lifestyle is essential. If your pouch keeps coming off, have your entire pouching system evaluated by a WOC nurse. Do not settle for less than excellent service from your pouching system. There are solutions to most any problem with ostomy management. Invest the time to talk to a professional ostomy nurse—at a hospital, through your retailer, at our local ostomy association meeting or even by calling one of the manufacturers themselves. There is no need to suffer!

Visit our chapter Website:

<http://www.ostomymcp.com/chapter/Jaxchapter1.htm>

Is Your Pouch Showing?

Forwarded By Newsleak, DuPage County Ostomy Assn.

Are you worried about your pouching system showing under your clothes? On the other hand, is your stoma protruding so much that it shows through your clothes?

Most Americans today lead pretty busy lives at a relatively fast pace. Everyone seems to be concerned with his/her own individual happenings. Aren't you? By the way, what is the color of the bus driver's hair? Did the sales clerk in the store wear brown shoes or black ones today? What color was the bank teller's tie? Does your brother's wife have blue or brown eyes? Men, what color is your wife's hair?

Give up? Forget about the uncalled for worries and enjoy each day. Remember that your attitude about your image will affect the attitude of your family and friends. Most of us are more conscience of our ostomy than anyone else around us is. Virtually no one in the world even knows what an ostomy is much less to look at one of us and see where it is and if it is showing. Even your fellow friends with ostomies, when we get together often casually look at each other, checking to see if an ostomy shows. If we cannot see it, and we know exactly where to look and what to look for, how is anyone else every going to know? Be happy, you have been given a new life.

International Ostomy Association

www.ostomyinternational.org

The IOA Today Newsletter Second Quarter 2007 is now available. If you would like to keep up with Ostomy related information from around the world, then please sign up for the FREE IOA Today Newsletter.

<http://www.ostomyinternational.org/Today.htm>

You may also view past issue from the above URL.

Watch this newsletter in the future for valuable coupons for \$\$ off a visit with Kathy the ET Nurse!!!



www.koolostomy.com

Caring for Excoriated Skin

By Diane Duran, CWOCN

If after removing your skin barrier you find your skin to be red, denuded of skin, painful or sensitive, you have "excoriated skin." Excoriated skin is often caused by pulling off the skin barrier too aggressively. Follow the adage; push the skin and not the barrier. Pulling at the barrier may rip the skin or tear off the top layer of skin. Excessive perspiration under the barrier may also lead to excoriated skin as well as movement of the barrier while wearing your pouching system.

If needed, remove the skin barrier with a non-alcohol adhesive remover made specifically by ostomy equipment manufacturers for this purpose. Simple hold down your skin with the adhesive remover pad and going from side to side, gently pull your skin barrier down and away from your skin. After gently washing the stoma and surrounding skin with warm water—using soap around the stoma is rarely beneficial—and dry the skin thoroughly, usually by air-drying, never by rubbing.

Sprinkle the skin with an ostomy powder, like ConvaTec's Stomahesive Powder or Hollister's Adapt or Karaya Powder. Dust off the excess powder and place your new skin barrier on your abdomen. Some people rotate the placement of square barriers around the stoma to give some skin a chance to breath. However, research has shown that this technique is not very effective. Skin under a quality skin barrier repairs itself fast and better than if it is left out in the air. People who have had ostomies for many decades usually find that the skin that has been covered under a skin barrier is some of the healthiest on their entire body.



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Skin Care Basics

By Barb Barrickman, RN, WOC Nurse

Caring for the skin around the stoma is an important part of basic ostomy care. Good skin care around the stoma—the personal area—is not very different from caring for the rest of your skin. Healthy skin protects us from the environment; produces vitamin D; provides a tough, flexible foundation to hold the rest of your body; regulates body temperature; insulates the body from cold and trauma; provides an avenue for sensation and grip.

Normally the skin is acidic in pH, approximately 5.5. This natural acidity discourages bacterial growth, helps to absorb moisture, and keeps the cells closer together to prevent cracks in our protective layer. As we age, the skin changes.

It becomes thinner, making it more susceptible to injury and changing the way our body reacts to temperature, pain, pressure and chemicals. It becomes less flexible and often sags. It heals half as quickly as before and becomes drier with visible cracks, which harbor bacterial growth. Good skin care can delay many of these natural aging processes and aid in keeping the skin healthy. The basics of good skin care include:

1. Clean the skin with a good cleanser with a pH between 4.5 & 0. Normal skin can handle this well, with the skin regaining its normal acidic pH within 20-30 minutes. Most people with ostomies should never use anything except water to wash their peristomal skin. It does not become very dirty under the barrier.
2. Frequent washing irritates skin. Soap and a washcloth are the worst enemies of fragile and/or damaged skin. Washing with just plain water and gentle friction is all that is needed.
3. Air drying is beneficial if time permits. However, drying skin with a hair dryer set to cool should work just fine.
4. Apply moisturizer to skin—except under the barrier—after bathing to take advantage of open pores. Look for moisturizers that contain one or more of the following ingredients: liquid paraffin, lanolin, castor oil, cetostearyl alcohols, glycerol stearate.
5. Check the ingredients in your skin care products and know what they are to provide. Active ingredients should be listed in descending order of percentages contained in the product. The purposes of ingredients and examples:
 - Emollients soothe and soften the skin. Examples: almond oil, aloe vera, lanolin, dimethicone copolyol, mineral oil
 - Antimicrobials eliminate microbes and reduce skin infections; kill normal skin flora as well as unwanted bacteria. The normal skin flora re-colonizes one to two hours after the use of an antimicrobial. Examples: hexylresorcinol, triclosan, benzethonium chloride emulsifying surfactants dissolve human excreta, polyaxamar 188, potassium palmitate, polysorbate
 - Humectants prevent drying; soften and moisturize damaged skin by binding moisture to the skin. Examples: d-panthenol, propylene glycol, sodium PCA, glycerin.

The peristomal skin may need special protection from the adhesives on the pouching equipment and/or the output from the stoma. Barrier products are designed to protect the skin from contact with moisture and prevent friction. Skin films, actually plasticize the skin by placing a co-polymer film on the skin. Product examples that provide this barrier film include:

- Bard Protective Barrier Film
- ConvaTec AllKare Barrier Wipe
- Hollister Skin Protectant Barrier
- Smith & Nephew / United Skin Prep
- 3M No-Sting Skin Protectant

These products may be helpful in preventing and/or treating skin breakdown problems in the peristomal skin area. They should be used only as directed and after consulting with a WOC nurse or ostomy supplier. Some ostomy barriers; i.e., the new extended wear barriers like ConvaTec's Durahesive or Hollister's FlexTend, are not recommended to be used in conjunction with these film protectants. These barriers actually melt into the skin and a protectant would frustrate this effort.

Ostomy Chat Room Weekly Meetings

Yahoo Peoples with Ostomy2* - Mondays, 8:00 pm US Central time

<http://clubs.yahoo.com/clubs/peopleswithostomy2>

Community Zero (Ostomy) Support* - Wednesdays, 9:00 pm US Eastern time

<http://groups.yahoo.com/group/ostomatessupport/>

Shaz & Jason's Chat* - Saturdays, 8:00 pm UK time / 3:00pm US Eastern Time

<http://www.ostomy.fsnet.co.uk/chat.html>

Yahoo UK Ostomy Support* - 1st & 3rd Sundays, 8:00 pm UK time / 3:00 pm US Eastern Time

<http://clubs.yahoo.com/clubs/ukostomysupport>

Use this form to join our chapter! **You do not have to be an ostomate to be a member and/or support the work of UOA. All information on this form will be kept confidential.**

Name _____

Address _____

City _____ State _____ Zip _____

Phone# Home _____ Work# _____

Email Address _____

Type of intestinal or urinary diversion: Colostomy __, Ileostomy __, Urostomy __, Ileoanal Pull-thru __
Continent Ileostomy __, Continent Urostomy __, None __, Other __

You may use my name in chapter Newsletter & Directory: Yes __ No __

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