



The AUSTI-MATE Journal

Ostomy Association of Austin Monthly Publication
P. O. Box 143383 Austin, Texas 78714

www.austinostomy.org



Gethsemane Lutheran Church
200 West Anderson Lane, Austin, Texas 78752

Next meetings: Thursday, August 4, 2016 @ 7:00 pm
Thursday, September 1, 2016 @ 7:00 pm

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This bi-monthly newsletter is located on our website:

www.austinostomy.org

Printed Courtesy of
The American Cancer Society

Ostomy surgery is a lifesaving surgery that enables a person to enjoy a full range of activities, including traveling, sports, family life and work. **YOU MATTER** ~ Come join us!

We had a very successful Vendor Fair in May! Representatives from Coloplast, Hollister, ConvaTec, and Edgepark joined us. Thank you to all the local, regional, and national Reps that took time to support our amazing Ostomy Support Group.



In June, we continued part 2 of our Visitor Program training series. We highlighted overall guidelines, policies, procedures, and professional considerations. As always, we had comfortable conversations and questions. Members were given a Participant Workbook ~ be sure to bring it with you in August & September.

August 4th Meeting: We continue part 3 of our educational Visitor Program training series addressing the various medical, physical, and psychological needs of Ostomates and their Care Givers. Offering support to individuals and their families both before and after surgery is invaluable. This is one of the most important supports our group provides. You are proof that life after ostomy surgery can be normal.

Refreshments: Board Members

Hot, Cold, and Stoma: How Weather Effects an Ostomy

Edited version: Ostomy Guide, November 2010; London & District Ostomy, The Torch, Spring edition

The temperature and climate of the region you live in can have a game-changing effect on how you wear your ostomy appliances. Especially useful for traveling to new climates, or for those who live in temperate zones with extreme temperatures each season, an Ostomate has to adapt to these new conditions to keep a consistent wear time and maintain the reliability of their ostomy appliances.

Here are some tips for managing your ostomy in warm and cold temperatures.

Hot Weather:

Long, hot summer days might be great for barbecues and being outdoors, but can be a real nuisance for Ostomates. Hot temperatures decrease the wear times by causing skin barriers to break down faster and excess moisture on the skin.



Here are some considerations for managing a stoma in hot climates:

- Perspiration caused by heat gets between the skin and the barrier, which can cause adhesives to break down. If this is a problem with your adhesive, talk with your nurse and seek out something stronger and more reliable. You can also try an antiperspirant or powder around the ostomy location to keep from perspiration from building up.
- If you have trouble with ostomy appliance leaks because of moisture, you can also try stoma paste or Eakin seals to create a stronger, more reliable seal.
- Avoid using any Karaya rubber-based ostomy wafers in high heat conditions. This rubber material is soft and conformable, but in hot conditions it can break down and even melt. It's best to use a synthetic wafer which tends to have a higher heat threshold.
- The skin is more susceptible to breakdown. An ostomy pouch cover can be used to soften this and is also recommended for a more comfortable wear. You can typically find ostomy pouch covers in medical supply stores.
- Due to sweating, it is especially important for Ostomates to drink more fluids to avoid dehydration.
- Ostomates who exercise and are more active in the summer months. They will likely want to keep a variety of pouches, including ostomy mini-pouches and stronger, waterproof adhesives that won't breakdown if you're running or swimming. You may also prefer to use a Waterproof tape or elastic ostomy belt with a two-piece system to increase wear time and confidence.



Winter and Cold Weather:

There is indeed more concern over heat and its effects on ostomy appliances than cold. Colder climates are actually far more ideal than excessively hot temperatures when it comes to ostomy appliances, but dry air can sometimes be an issue to cause or affect the skin, causing dryness and irritation. A dry skin surface is actually the best condition for applying adhesives and ostomy appliances, but excessive dryness on any part of the skin (especially parts covered with adhesives and appliances...) are more susceptible to irritation. A solution for dry air may be to try a low-cost humidifier indoors to increase the moisture in the air. Use moderation in how much humidity you increase indoors, however, as excess moisture can cause adhesives to loosen, and can also cause issues with mold in the home.

How much humidity is good? Sticking within a range of 30-50% relative humidity is a good range to keep skin from getting too dry without overwhelming you or your home.



Restaurant Revolution: Stay Healthy When You Eat Out!

Cleveland Clinic Wellness – Your Daily Wellness Tip April 9, 2016



Those enticing restaurant menus can send your rational mind on a brief vacation far, far away and leave you believing that french fries are vegetables and Mt. Everest-size portions are perfectly reasonable (a big no on both counts!). We tend to eat more calories, more sugar, and more sodium when eating out than when eating at home. But you can keep your faculties intact at any restaurant by embracing the Boy Scout motto: Be prepared!

Don't go hungry. Leave the house famished and your rational mind starts packing for that vacation. "You're more likely to eat quickly and eat much more food than you really need to feel satisfied," advises Cleveland Clinic nutritionist Amy Gannon, RD. Snack on a small handful of nuts, apple slices, or even carrots dipped in hummus before you leave home.

Beware of health halos. What sounds nutritious can be anything but. Salads are often the biggest offenders, with sugar-coated nuts, fried toppings, and heavy dressings. "The Moroccan-spiced chicken salad at a popular chain has 1,500 calories, 99 grams of fat, and 80 grams of sugar!" says Gannon.

Use "out of sight, out of mind." We tend to eat the food we see and the portions we're served. If a mega-size serving comes your way, carve out a sensible portion and immediately ask for the rest to be placed in a to-go box. Also, remember to Just Say No (Thank You) to that "free" basket of white bread. You'll save yourself hundreds of empty calories, not to mention a bellyache. Save your palate for food that's delicious and nutritious!



Hernia and the Ostomate

By Eugene Broccolo via North Oklahoma Ostomy Outlook



Hernias can develop postoperatively through any surgical incision. Incisions that are not closed tightly are more prone to hernias. Colostomies represent surgical incisions that cannot be closed tightly because to do so could result in a stricture or narrowing of the bowel opening.

Hernias of colostomies, or pericostomy hernias, can occur frequently. They can be apparent in the immediate postoperative period, or more often, develop years after the original surgery. They can be recognized as a bulge forming around the colostomy, most noticeably when the patient is standing. Good bowel function is dependent on good abdominal musculature and is especially dependent on the muscles around the colostomy site. Therefore, a colostomy hernia would give symptoms of poor colostomy functions, e.g. incomplete evacuation, difficulty in irrigation and discomfort during elimination for colostomates who irrigate).

Most hernias will cause fewer symptoms with some external support, e.g. an abdominal binder, but the colostomy itself and whatever pouching system is used will interfere with good compression. Therefore, surgical repair should be considered for the hernia. Since the very same problems exist at the time of repair as were present at the original surgery, e.g., inability to obtain a tight closure, the recurrence rate for this type of hernia is much higher than with other hernias. Because of the possibility that even in the best of circumstances a colostomy hernia can recur, the decision to proceed with surgery should be made only after consideration of all the factors, such as general health and nutrition, the degree of disability and the level of physical activity required.

Article Borders with **Red** - Colostomy-related; **Green** - Ileostomy-related; **Blue** - Urostomy related
; **Yellow** - All Ostomy types

Urology Concerns

Via Honolulu Ostomy Association, Edited by B. Brewer UOAA Update 4/11



GermS are all over the world, but when they are in the urinary tract—either in the conduit, the ureters, or the kidneys— they are in an abnormal location, and that is what causes an infection. What causes infection? Mostly, the reasons are unexplainable. Why do some people get more colds than others? Infections can be caused by obstructions, kidney stones, tumors, cysts, or scar tissues. Almost synonymous with obstruction is infection, and then too often comes stone formation. Once you have stone formation, it's hard to get rid of the infection. It's a kind of a cycle that goes around and around. Infection can be caused by urine being forced back to the kidneys through the conduit. This could happen if you fall asleep with the pouch full of urine and accidentally roll over on the pouch, causing urine to be forced back through the stoma and the urinary tract with tremendous pressure. Invariably, the urine in the pouch is contaminated.

In general, to prevent and treat infection, you need a good flow of urine, much like a stream. That not only dilutes the bacteria or germs in the urine but also helps wash them out. Two and one-half quarts of liquids daily are required for the average adult. Also antibiotic therapy is used to fight infection.

Night drainage is recommended. Otherwise, you run the risk of urine backing up into the kidneys which can cause irritation or infection. This is especially important for urostomates with only one kidney. It's important to be aware of the symptoms of a kidney infection: elevated temperature, chills, low back pain, cloudy urine, or decreased urine output. People with ileal conduits normally produce mucus threads in their urine, which give a cloudy appearance, but bloody urine is a danger sign. You must see your doctor if any of these symptoms occur.

Hydration, Fluid and Electrolytes

(a portion from presentation by Kathie Fuller, RN, BS, CWOCN Northside Hospital)
Via: The Greater Atlanta Ostomy Association July/Aug 2013



Hydration: Drinking adequate amounts of water is essential for maintaining adequate blood volume and its flow to such vital organs as the brain and the kidneys. Also it is important for maintaining optimal function in the cells of the body. Water controls body temperature, serves as building material and solvent and transports nutrients.

Dehydration can be defined as a significant decrease in the total water content of the body. It occurs when the rate of water intake, mostly by mouth, is lower than the rate of losing water from your body, via urine, skin, lungs and gastrointestinal tract. Dehydration is a critical element of the body, and adequate hydration is a must to allow the body to function. Up to 75% of the body's weight is made up of water.

Signs and Symptoms: 1) thirst, 2) decreased urine output, 3) dry mouth, 4) muscle cramps, 5) light headedness, 6) vomiting/diarrhea, 7) heart palpitations.

Treatment: Fluid replacement by mouth may include: water, clear broths, milk, juice, soda and other replacement fluids that may contain electrolytes (Pedialyte, Gatorade, Powerade, etc.). And water from the food you eat (e.g., tomatoes, melons) helps to meet your daily requirement. Be sure when drinking coffee or tea, to increase your water consumption to counter balance the higher output. Encourage fluid intake of eight to ten (8 oz.) glasses of liquids each day.

Individuals with vomiting and diarrhea can try to alter their diet, begin with the BRAT diet, (e.g. bananas, rice, applesauce, toast) and/or use medications. However, you should seek medical attention if there is no change in 24 hours or seek emergency help for signs of dehydration such as dizziness, shortness of breath or changes in cognition.





Yearly Anniversaries

July 2016

- Richard Wright - 52
- Dick Hartford - 17
- Christina Luna - 14
- Joe Torn - 5
- William Zeiss - 9
- Marius VenClauska- 9

August 2016

- Trudy Faloon 37
- JoAnne Wheeles - 23



*Thursday Meetings
@ 7:00 pm*

No July Meeting

August 4

September 1

October 6

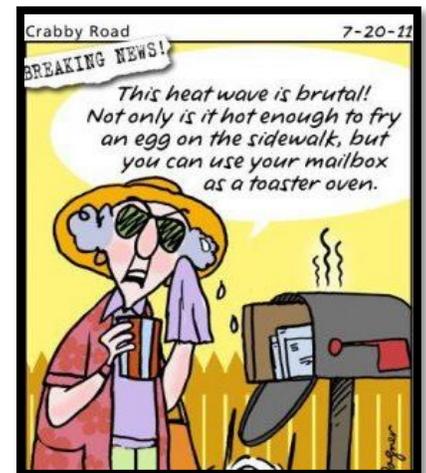
November 3

*December 1

*begins @ 6:30

When is your ostomy anniversary month and year? Please let us know!

This is a wonderful day; I have never seen this one before.” Maya Angelou



Are you in need of donated supplies? We have **plenty** available!
Please contact Carol Laubach, (512-339-6388) and indicate what type of ostomy you have, brand preference, size, and whether it's a one or two piece.
This will help to get you the best fitting supplies possible.



We are a health support group, a non-profit, tax-exempt, organization of volunteers whose purpose is to provide mutual aid and education to persons who have ostomies and their families. Membership fees and donations are tax deductible.

The information contained within our newsletters is for informational purposes only and may not be applicable to everyone. **Please do not follow any medical advice in our Newsletter without first checking with your physician or Wound Ostomy Continence Nurse.**

OAA Membership Application

Name _____

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Address _____

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Check one: I do ___ I do not ___ give permission for my name to be included in our newsletter or membership directory.

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Austin, TX 78714

Prefer a paper copy be mailed, check here

Bi- monthly newsletters are located on our website: www.austinosstomy.org

Membership benefits include:

- Monthly support / informational meetings
- Social events
- The Austi-Mate Bi-Monthly Newsletters



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**Not hearing
my pouch.
That matters.**



QuietWear™ Pouch Material

New QuietWear™ pouch material from Hollister virtually eliminates embarrassing pouch noise sometimes found in other ostomy pouches. It is also designed to be one of the closest things to the natural fabric found in your most comfortable clothing - you should hardly know you're wearing a pouch.

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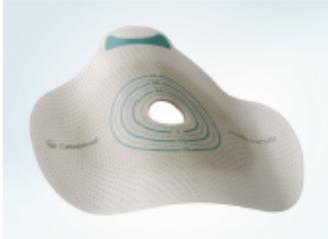
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