



# The AUSTI-MATE Journal

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

[www.austinostomy.org](http://www.austinostomy.org)  
[www.facebook.com/uoaainc](http://www.facebook.com/uoaainc)



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

**Meetings are every first Thursday of the month @ 7:00 pm**

**Next meetings: Thursday, September 3, 2015  
Thursday, October 1, 2015**

**Vice President/Editor**

Amy Nichols  
512-869-6638

**Secretary**

Bonnie Hartford  
512-966-6040

**Treasurer**

Carol Laubach  
512-339-6388

**Webmaster**

John Duncanson  
512-837-0358

**Medical Advisors**

Scott Becker, M.D.  
David Fleeger, M.D.

**Certificated Wound**

**Ostomy Nurses**

Karen Hollis, R.N.  
512-324-1053  
Carol Marshall R.N.  
512-324-1053

**Ostomy Association  
of Austin**

512-339-6388

[ostomyaustin@gmail.com](mailto:ostomyaustin@gmail.com)

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 hope you're having a lovely summer, staying cool and keeping hydrated. We had a full house at our August meeting with a Question & Answer session. The expertise and camaraderie within our support group is amazing! We appreciate all of you!

In April 2015, our Board made the decision to publish our Newsletter on a bi-monthly rather than monthly basis. This is the September - October issue. We have color-coded the article headings to align with specific Ostomy-type topics. See page 2 for the color codes.

*We have a new look!! Check out our new website:*

[www.austinostomy.org](http://www.austinostomy.org)

**September 3<sup>rd</sup> Meeting:**

Dr. Jim Meyer, Pharmacist at People's Pharmacy, will talk about the impact of medication, absorption, and natural alternatives for people with Ostomies. **Refreshments:** Board Members

**October 1<sup>st</sup> Meeting**

Dr. April Fox, Colon/Rectal Surgeon, will share her experiences, professional thoughts, and answer any questions you might have. **Refreshments:** Board Members

## Tips for the Urostomate

Ostomy Outlook, Stillwater, OK



Check the pH of your urine about once a week to be sure the urine is acidic, with a pH of less than 6.0. Always wash your hands before working with your appliance or stoma to avoid introducing bacteria into the stoma. Reusable or disposable appliances that are not cleaned adequately or are worn for long periods of time can cause urinary tract infections from bacterial growth in the pouch and urine. Signs and symptoms of a urinary tract infection include fever, chills, bloody urine, cloudy or strong-smelling urine, and pain in the back and kidney area. If you experience these symptoms, see your physician.



## What Would You Do If...

By Ellice Feiveson, Metro MD, via Dallas Ostomatic News

Trust me, every ostomate has had or will have an “ostomy accident.” By accident, I mean a pouch leak of some kind. The question is, “are you prepared in case an accident occurs away from home?” Not so much prepared as far as having a change of clothes and extra pouches, but prepared emotionally to deal with the unexpected mishap.

The reality of it is that every ostomate must think of what he or she would do if at a party, in a restaurant, work or anywhere else, your pouch leaked because it wasn't on securely, or the clasp came off and the contents were spilling out. The question is “What do you do if you feel your pouch is not on securely, or you feel wet around your pouch?”

First of all, you think that everyone is noticing you and knows what's happening. Stay calm. Go to the nearest bathroom and take care of business. Most likely, your friends are continuing their conversation in the restaurant or in your workplace and no one knows you are temporarily missing.

When I encountered an accident while I was in a group situation, I just removed myself and took my time in freshening up and rejoined my friends. No explanation is ever needed! The more outings you take and the more public situations you are in, the more confident you will be as time goes on

## In Memory.....Frank Cunningham recently passed away at age 92.

Frank served on our OAA Board for many years and was a faithful member of our group. Please keep his family in your thoughts and prayers.

Read more about Frank:

<http://www.legacy.com/obituaries/statesman/obituary.aspx?n=franklin-c-cunningham&pid=175556829&fhid=4296>



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

## Colostomy

Source: Nursing Articles <http://studynursing.blogspot.com/2011/01/colostomy.html>  
Partial article presented here

Colostomy surgery is often a frightening prospect for most people. But it can dramatically improve a person's quality-of-life, especially in cases of serious disease.

### Types of Colostomies:

There are several different types of colostomies including ascending, transverse, and descending.

**Ascending:** This colostomy has an opening created from the ascending colon and is found on the right abdomen. Because the stoma is created from the first section of the colon, stool is more liquid and contains digestive enzymes that irritate the skin. This type of colostomy surgery is the least common.

**Transverse:** This surgery may have one or two openings in the upper abdomen, middle, or right side that are created from the transverse colon. If there are two openings in the stoma, (called a double-barrel colostomy) one is used to pass stool and the other, mucus. The stool has passed through the ascending colon, so it tends to be liquid to semi-formed.

**Descending or sigmoid:** In this surgery, the descending or sigmoid colon is used to create a stoma, typically on the left lower abdomen. This is the most common type of colostomy surgery and generally produces stool that is semi-formed to well-formed because it has passed through the ascending and transverse colon.

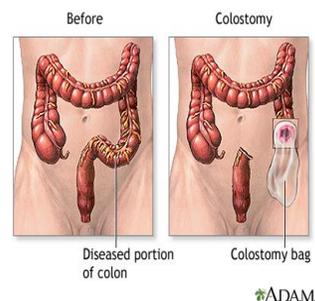
### Types of products used for Colostomies:

**Pouch:** There are a variety of sizes and styles of colostomy pouches. Pouches are lightweight and odor-proof. Pouches have a special covering that prevents the pouch from sticking to the body. Some pouches also have charcoal filters which release gas slowly and help to decrease gas odor. The following is general information about types of colostomy pouches:

**Open-ended pouch:** This type of pouch allows you to open the bottom of the pouch to drain the output. The open end is usually closed with a clamp. The open-ended pouch is usually used by people with ascending or transverse colostomies. The output from these colostomies is looser and is unpredictable (does not drain at regular times).

**Close-ended pouch:** This type of pouch is removed and thrown away when the pouch is filled. Close-ended pouches are usually used by people with a descending or sigmoid colostomy. The output from these types of colostomies is firm and does not need to be drained.

**One-piece:** A one-piece pouch contains the pouch and adhesive skin barrier together as one unit. The adhesive skin barrier is the part of the pouch system that is placed around the stoma and attached to skin. When the pouch is removed and replaced with a new one, the new pouch must be reattached to the skin.



(Continued on next page)

**Two-piece:** The two-piece pouch has two parts: an adhesive flange and pouch. The adhesive flange stays in place while the pouch is removed and new pouch is attached to the flange. The pouch does not need to be reattached to the skin each time. The two-piece system can be helpful for patients with sensitive skin.

**Pre-cut or cut-to-fit pouches:** Some pouches have pre-cut holes so you do not have to cut the opening yourself. Other pouches can be cut to fit the size and shape of your stoma. Cut-to-fit pouches are especially useful right after your surgery because your stoma decreases in size for about eight weeks.

**Stoma covers and caps:** Stoma caps or covers can be placed on the stoma when the stoma is not active (draining). People with descending or sigmoid colostomies who irrigate may use stoma covers or caps. The cover or cap is attached to the skin in the same way as a pouch.

## **Colostomy care**

### **How to empty the pouch:**

- Empty the pouch when it is one-third to one-half full. Do not wait until the pouch is completely full because this could put pressure on the seal, causing a leak. The pouch may also detach, causing all of the pouch contents to spill.
- Place toilet paper into the toilet to reduce splash back and noise.
- Take the end of the pouch and hold it up. Remove the clamp (if the pouch has a clamp system).
- You may need to make a cuff at the end of the pouch to keep it from getting soiled.
- Drain the pouch by squeezing the pouch contents into the toilet.
- Clean the cuffed end of the pouch with toilet paper or a moist paper towel. You may also rinse the pouch but it is not necessary. Make sure and keep the end of the pouch clean.
- Undo the cuff at the end of the pouch. Replace the clamp or close the end of the pouch according to your caregiver's instructions.

## **Ostomates' Guide for Hospitalization**

By Lindsay Bard, MD: UOAA Update March 2015



It is important for a person with an ostomy who needs to be hospitalized, to know that he/she should be handled differently than someone without an ostomy and how.

**Rule 1** - The Cardinal Rule! If you feel something is being done or going to be done to you that might be harmful, refuse the procedure. Then explain why to the medical personnel, especially your physician. They will then decide with you, if the procedure will actually be in your best interest.

**Rule 2** - Supplies: Bring your own supplies to the hospital. Never assume the hospital will have the exact pouching system or irrigation system you use. Most hospitals have some supplies available. These are used for emergency situations.

**Rule 3** - Instructions: Take to the hospital two copies of instructions for changing and irrigating your pouch.

**Rule 4** - Communicate!!! Again, let me stress that you communicate with the hospital personnel who take care of you. You will have a better hospitalization and they will have an easier time treating you.



## Vitamin B-12 Replacement Therapy

By Bob Baumel, Ostomy Assn of North Central OK UOAA Update May 2015



Vitamin B-12 is, under normal conditions, absorbed in only a small section of the terminal small intestine (ileum), raising the possibility of B-12 deficiency if that section of the ileum has been removed surgically or damaged by disease. People who may have lost that portion of their ileum include some ileostomates, people who had a failed J-pouch or Kock pouch, and some people with urinary diversions (especially continent urinary diversions) made using the terminal ileum. A condition such as Crohn's disease may have damaged the terminal ileum, even if it hasn't been removed surgically.

Vitamin B-12 is necessary for many metabolic processes, including development of red blood cells and maintains normal functioning of the nervous system. Deficiency causes anemia (reduced oxygen carrying capacity of the blood resulting in fatigue) and can also cause nervous system damage. It's worth noting that folic acid (another B vitamin) can correct the anemia caused by vitamin B-12, but will not correct the nerve damage caused by B-12 deficiency. So it's important to get enough vitamin B-12.

If you think you are at risk for vitamin B-12 deficiency, you can ask your doctor to check your serum (blood) B-12 level. This test can be added easily to routine blood testing. If your ability to absorb vitamin B-12 by the normal pathway involving the terminal ileum has been impaired, you can supplement the vitamin by three basic methods:

- **By Injection:** This method bypasses the normal gastrointestinal process of B-12 absorption by inserting it into the body by intramuscular or subcutaneous injection. B-12 injections may be self-administered in the same way that diabetic patients can give themselves insulin shots. Maintenance therapy may require only one B-12 injection per month.
- **Nasally:** This method also bypasses the normal gastrointestinal absorption process, as vitamin B-12 can be absorbed through nasal mucous membranes. The nasal form of B-12 was developed first as a nasally applied gel and later a true nasal spray (brand name Nascobal®). This product is marketed by the Strativa Pharmaceuticals, who promotes it as the only FDA approved form of vitamin B-12 besides the injectable form. Nasal B-12 can be effective, but because one company has sole rights to distribute it in the U.S.A., it can be an expensive way to get your vitamin B-12.
- **Orally:** Until recently, doctors believed that B-12 taken orally was useless to people who lack the normal absorption mechanism involving the terminal ileum. That opinion has changed, however, as research has revealed that even in such people, when a large dose of vitamin B-12 is taken orally, a small fraction (typically around 1%) gets absorbed by mass-action transport across the gut.



**Note:** Time Released medications should, in general, be avoided if you have an ileostomy as they may pass through your gut without getting absorbed adequately.

## Wisdom from a Pharmacist

By Florian Norwicki, Rph: Snohomish County WA, *Insights* UOAA Update May 2015

I find ostomates with the least problems are those who become acquainted with other ostomates with a similar surgery. The best method of acquaintanceship is to become involved in your local ostomy chapter.

We constantly here of organizations being formed for many types of bodily dysfunctions, such as paraplegics, epileptics, bypass cardiac club, diabetes, etc. These peer groups perform invaluable services, especially to new members when the trauma is often more psychological than physical. I encourage each and every one of your to attend meetings regularly. If you come away with one new fact or idea per meeting for your self-help, you know it is worth the time and effort.

Your best medicine is preventive medicine. Whatever your procedures are, or your diet is, think of the problems you encounter if you deviate from your norm. Spices, alcohol, caffeine and some vegetables which cause flatulence are to be used moderately or not at all.

Again, it is pertinent to your well-being that you know what is best for you. A good idea is to keep a diary or log of your diet so you may determine what food it was that caused a problem for you then steer yourself away from that problem.

Your UOAA Chapter is the way to go. Ask questions - get answers. The members have already been in your shoes!

**The more you praise and celebrate  
your life, the more there is in life to  
celebrate.**

~Oprah Winfrey

[www.gauraw.com](http://www.gauraw.com)

### Yearly Anniversaries

#### September 2015

Vernal Bracken - 46

Beatrice Gibson - 4

Joanie Miranda - 2

#### October 2015

Louis Zegub - 32

Dianne Baxter - 28

Dorothy Ruhl - 21

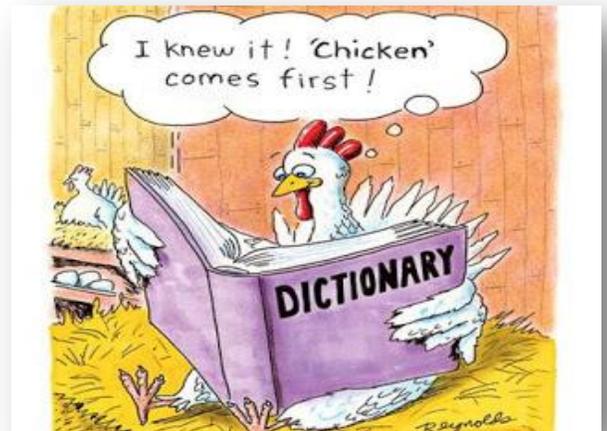
Dwight Vance - 19

Ruth Kanneburg - 12

Diana Hall - 4

Charles Schoch - 2

Eddie Padilla - 2



#### Thursday Meetings @ 7:00 pm:

September 3

October 1

November 5

December 3 ~ Holiday Party

January 7, 2016

February 4

March 3

April 7

May 5

June 2

No July Meeting

August 4

### OAA Membership Application

Name \_\_\_\_\_  
Ostomy Type \_\_\_\_\_ Surgery Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Year of Birth \_\_\_\_\_ Email \_\_\_\_\_  
Spouse/Relative/Partner/Friend Name \_\_\_\_\_

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Annual dues: Checks payable to: Ostomy Association of Austin

\$20 \_\_\_\_\_ Ostomate

\$12 \_\_\_\_\_ Spouse/Relative/Partner/Friend/Other

\$20 \_\_\_\_\_ Professional

Mail to: Ostomy Association of Austin  
P.O. Box 143383  
Austin, TX 78714

Membership benefits include:

- Monthly support / information meetings
- Social events
- The Austi-Mate Journal  
Monthly Austin Newsletter

**Newsletter Preference:**    Email digital copy        Postal Mail paper copy   

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 now have our monthly newsletter sent via email in addition to regular mail. If you would like to receive your newsletter by email, send your current email address to [ostomyaustin@gmail.com](mailto:ostomyaustin@gmail.com) or call 512-339-6388.

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. We are a Texas non-profit corporation. Membership fees and donations are tax deductible.

**\*\*Please do not follow any medical advice in our Newsletter without first checking with your physician or Wound Ostomy Continence Nurse.**

**YOU** place a special mark in our world. What is your ostomy anniversary month and year? Please let us know!



2350 AIRPORT FREEWAY, SUITE  
230BEDFORD, TX 76022-4010

(888) 768-2805

We accept Medicare and all other Insurances like Blue Cross Blue Shield, Sterling Insurance, Pacificare, United, and Texas Medicaid, Secure Horizon and all other Private Insurances. If you have any insurance question contact us at 1-800-866-3002

**Free. Fast. Discrete Delivery**

<http://www.usostomy.com>

## OSTOMY ANSWERS!

- Diet and Nutrition
- New Products
- Skin Care
- Intimacy
- Exercise
- Odor



*Click here to find your answer*

The Phoenix magazine is the official publication of the United Ostomy Associations of America. The Phoenix magazine is published quarterly - Annual subscriptions are \$29.95.

Toll-free 800-750-9311.



Hollister Ostomy. **Details Matter.**

**Details. Details.** That's where you'll find the signature of Hollister Ostomy. From the first pouch we developed nearly 50 years ago, to today's ongoing innovations in function and design, Hollister Ostomy remains committed to quality products and quality of life. We're dedicated to providing reliable, high-performing solutions for individuals with ostomies — and helping them to enjoy peace of mind and fulfilling lives.

To learn more about Hollister Ostomy products and services or to request a sample, call 1.888.740.8999 or visit [www.hollister.com](http://www.hollister.com).



Hollister and logo is a trademark of Hollister Incorporated. "Hollister Ostomy. Details Matter." is a service mark of Hollister Incorporated. ©2013 Hollister Incorporated. 922198-213 PROMOCODE147HOLL213