

Triangle Ostomy Association Membership Application

Name _____ Today's Date: _____

Spouse's Name _____

Mailing Address _____

Phone Number: _____

Email: _____

[] I would like to receive the newsletter by email

I have a Colostomy _____ Ileostomy _____ Urostomy (Ileal conduit) _____

Other _____ Year of Surgery _____

I am not an Ostomate, but would like to be a member and support the organization _____

I cannot afford the dues but would like to be a member _____ (Confidential)

We welcome for membership ostomates and other persons interested in the in this group and its activities and appreciate the help they can provide as members. To join, complete the above form and send it with a check or money order for \$20.00 made out to Raleigh Chapter of UOA Mrs. Ruth Rhodes, 6616 Rest Haven Drive, Raleigh, NC 27612-2167.

Dues cover membership in the local chapter, including a subscription to the local By-Pass publication.

6616 Rest Haven Drive
Raleigh, NC 27612-2167



NEXT MEETING: November 6, 2007

SPEAKER: Ask the WOC Nurses Leanne and Jane



The By-Pass

Triangle Area
Ostomy
Association

November 2007



President's Message:

Hi All,

Thanks again for a great October meeting. I thought Bob from Convatec gave a very informative presentation about his products and services. I know I learned some good stuff about the products I use and he is sending me some samples of a new item. Convatec has been one of our valued partners for years.

I'd like to thank all the visitors and newcomers for sharing their evening with us also. We hope you went away with a good feeling about our ostomy family and that we'll see you again soon. We have a lot to offer.

Ostomy Nurse Q and A

This month promises to be another good meeting. We're going to have our valued ostomy nurses, Leanne and Jane, presenting the results of their pouch wear time survey. Plus they will be taking your questions concerning any issues you may be having with your ostomy. Please come prepared to ask them the tough questions about some of those nagging pouching issues that have been bugging you.

Also, Jennifer will be presenting a short film about the F.O.W. The FOW stands for 'Friends of Ostomates Worldwide'. They are a volunteer organization that collects surplus ostomy supplies. Then they box them and send them to third world regions that don't have access to the modern equipment and technology available to us.

So I hope to see all of you on Tuesday, November 6th, at 7:30. Please bring friends and other loved ones and help kick off this holiday season.

Yours in service.....Dan

MISSION of the Triangle Area Ostomy Association:

The mission of our organization is to assist people who have or will have intestinal or urinary diversions: including a colostomy, ileostomy, urostomy, and continent diversions including j-pouches. We provide psychological support, educational services, family support, advocacy and promote our services to the public and professional communities.

MEETING INFO:

Meetings are held the first Tuesday of each month (except July and August) at 7:30 PM in the **Rex Surgical Center Waiting Room, 4420 Lake Boone Trail, Raleigh, NC.** Enter through the Rex Hospital Main Entrance, which is near the Parking Garage.

REMINDER:

In the event of inclement weather on the day of a scheduled meeting, please contact Rex Healthcare at 919-784-3100

DISCLAIMER

Articles and information printed in this newsletter are not necessarily endorsed by the Triangle Ostomy Association and may not be applicable to everybody. Please consult your physician or WOC Nurse for medical advice that is best for you.

RALEIGH AREA OFFICERS AND CONTACT INFO:

President:	Dan Wiley	919-477-8363
VP / Editor:	Jennifer Higdon	919-553-4770
Secretary:	Bonnie Sessums	919-403-7804
Treasurer	Ruth Rhodes	919-782-3460
Past President:	Kathy Bong	919-303-6475
Webmaster:	Ed Withers	919-559-9083
Member Support:	Susie Peterson	919-851-8957
	Alison Cleary	919-387-3367
BOD/Member Support:	Shirley Peeler	919-787-6036
	Donald Meyers	919-781-0221

Website: www.RaleighUOA.org

New Email: TriangleUOAA@EmbarqMail.com

Pouch Changes – How Often

via Green Bay (WI) GB News Review and Seattle (WA) Ostomist

This question is among those most frequently asked, particularly by ileostomates and urostomy patients. Like many other questions, there is no one answer that applies to all ostomates. An informal survey revealed that people change their appliances as much as 3 times a day, and as infrequently as every 2 to 4 weeks. Obviously, there must be reasons for this great variation. After pointing out that the great majority of ileostomy and urostomy patients change in the range of once daily to once a week, let us explore some of the reasons. People on either side of this spectrum can have a skin problem or skin which is nearly indestructible. Some of the reasons for the variation in time between changes include:

Stoma length: A short stoma exposes the adhesive material to moisture which decreases wearing time.

Amount or consistency of effluent: Profuse effluent tends to loosen the seal.

Skin Type: Moist or oily skin tends to decrease adhesion time.

Skin Irritation: Decreases adhesion. The appliance should be changed more frequently to evaluate the success of your attempts to heal the skin.

Experience: Good technique, such as allowing glue (adhesive) to dry well, increases adhesion.

Personal Experience: Preferences, convenience and odor control.



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- Wake Medical
- Leigh Ammons 919-350-5171
- Melanie Johnson 919-350-5171
- Leanne Richbourg 919-350-6462
- UNC Hospital
- Jane Malland 919-843-9234
- Barbara Koruda 919-843-9234
- Durham Regional
- Tom Hobbs 919-470-4000
- Duke
- Jane Fellows 919-681-7743
- Michelle Rice 919-681-2436
- Duke Health Raleigh Hospital
- Krys Dixon 919-954-3446
- Maria Parham Hosp.
- Kathy Thomas 919-431-3700
- Durham VA Center
- Mary K. Wooten 919-286-0411
- Rex Hospital
- Ann Woodruff 919-784-2048

Today's Tip from Duke: The Gelatin Myth

Gelatin cannot help to make your nails stronger. Experts say eating or soaking in it won't do a thing to increase nail strength -- and a liquid soak may actually waterlog and eventually weaken nails. Nails take a lot of abuse in daily life and are exposed to harsh detergents and chemicals that can dry them out. The best way to grow strong nails is to make sure that they are kept moisturized by regularly using a hand cream.



SUPPORT GROUP

- Date: Third Monday of every month
- Time: 7:30 pm – 9:00 pm
- Place: Rex Healthcare, surgical waiting room
- Contact: Reuben Gradsky
reuben513@yahoo.com



Relaxation Exercise

Adapted from Cancer.gov website sponsored by the National Cancer Institute
UOAA UPDATE SEPT 07

Practicing deep relaxation exercises may help relieve pain or reduce stress. This exercise may not be right for everyone. Ask your doctor or nurse if this exercise can help you. Practice slowly at first so you can get used to deep breathing and muscle relaxation.

Find a quiet place where you can rest undisturbed for 20 minutes. Let others know you need this time for yourself. Make sure the setting is relaxing. For example, dim the lights if you like, and find a comfortable chair or couch.

Get into a comfortable position where you can relax your muscles. Close your eyes and clear your mind of distractions.

Breathe deeply, at a slow and relaxing pace. People usually breathe shallowly, high in their chests. Concentrate on breathing deeply and slowly, raising your belly, rather than just your chest, with each breath.

Next, go through each of your major muscle groups, tensing (squeezing) them for 10 seconds and then relaxing. If tensing any particular muscle group is painful, skip the tensing step and concentrate just on relaxing. Focus completely on releasing all the tension from your muscles and notice the differences you feel when they are relaxed. Focus on the pleasant feeling of relaxation. You may find that your mind wanders. When you notice yourself thinking of something else, gently direct your attention back to your deepening relaxation. Be sure to maintain your deep breathing.

Review the parts of your body again, and release any tension that remains. Be sure to maintain your deep breathing.

Now that you are relaxed, imagine a calming scene. Choose a spot that is particularly pleasant to you. It may be a favorite comfortable room, a sandy beach, a chair in front of a fireplace or any other relaxing place. Concentrate on the details. What can you see/ hear/ smell/ feel around you? Continue to breathe deeply, as you imagine yourself relaxing in your safe, comfortable place.

When you are ready, start gently moving your hands and feet and bringing yourself back to reality. Open your eyes, and spend a few minutes becoming more alert. Notice how you feel now that you have completed the relaxation exercise, and try to carry these feelings with you into the rest of your day.

Exercise: The Final Ingredient in Ostomy Management

Adapted from the Coloplast Website, UOAA UPDATE SEPT 07

Exercise has become “fashionable”—and that has probably done more to put people off it than anything else. If the thought of strobe lights, rowing machines and leotards gives you the shivers, then take heart. There are no end of easy, enjoyable ways to make yourself a little stronger, a little fitter. Just find the ones that are right for you.



Most of all, don't overdo it. Even light exercise is good exercise—for your heart, your joints, your muscles, your lungs and for your general sense of well being. Gently does it.

To begin with, don't confuse exercise with sports. There's more to getting healthier than chasing a ball around on a football field. Walking is a great place to start. Post-operatively, just walking to the next door neighbors or to the end of the garden is fine. When you begin to regain your strength, try to walk more—both for pleasure and as an alternative means of transport. And when you do, walk briskly—so you get slightly out of breath.

Gardening is great too. Digging, weeding, hoeing and mowing can constitute a superb day's workout. And of course you'll have a showpiece garden to show for it. Wait for about 3 months after surgery before beginning gardening. You'll be surprised at how

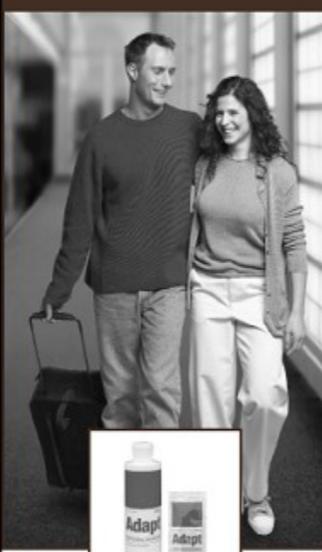
quickly you feel the benefits. After a few aches in the early days, you'll begin to feel more supple, and be able to do more without getting out of breath.

Doctor's orders—All doctors agree on the benefits of exercise—but it's a good idea to talk to your doctor before starting an exercise program, especially if you're very out of practice or if you have other health considerations, like asthma or a heart condition. Your doctor will advise you to take it easy to begin with and to enjoy yourself. And you can't get better advice than that.

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Skin Problem Prevention

from www.convatec.com

The peristomal skin must be protected from direct contact with the discharge from the stoma, because this discharge is potentially irritating. These secretions contain various substances that can lead to skin damage after either short-term or prolonged contact. Urostomy or urinary diversion stomas conduct urine, an effluent that, when exposed to air, changes to an ammonia-like substance. This substance is very caustic (can produce burning or corrosion) to the peristomal skin. Ileostomies and certain types of colostomies, such as ascending and transverse colostomies, also emit a caustic effluent containing digestive enzymes, which can damage the skin. Even the discharge from a descending or sigmoid colostomy can be irritating, if left in contact with the skin for an extended period of time, making colostomy skin care an important part of your routine.



Medical Humor

UOAA UPDATE SEPT 07

One day I had to be the bearer of bad news when I told a wife that her husband had died of a massive myocardial infarct. Not more than five minutes later, I heard her reporting to the rest of the family that he had died of a “massive internal fart.”
Submitted by Dr. Susan Steinberg, Manitoba, Canada.

While acquainting myself with a new elderly patient, I asked, “How long have you been bedridden?” After a look of complete confusion she answered...”Why, not for about twenty years - when my husband was alive.”
Submitted by Steven Swanson, Corvallis OR

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Friends

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The best known relief for mundane, everyday stress—the flat tire, breaking a dish, the batteries dying on the remote, and hundreds of other nits that pick at us—is nothing more complicated than someone to pal around with.

The basic human need for playmates—childhood or adult—serves us well in helping us deal with day-to-day troubles. We need emotional support from our friends in the stressful times of severe life situations, when some major life event occurs; such as, death of a loved one, losing a job or ostomy surgery.

In times of ordinary life, troubles are relieved more by companionship—going to a movie with a friend; visiting a museum with a buddy; and going to a UOAA meeting, etc. In those situations, talking doesn't reduce stress as much as doing something with an acquaintance.

In fact, talking too much about small troubles actually can make them worse. What we need instead is distraction, something that gets our minds on something else. A companion with shared interests is usually just the ticket.

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A Gift of Time

UOAA UPDATE SEPT 2007

What does your ostomy mean to you? Does it mean a constant nuisance and care, problems, embarrassment, leakage and resentment? Or do you relegate it to a significant but minor part of your daily routine and now enjoy a new lease on life.

What would have happened to you if the surgery hadn't been done? Did you get to choose between a box six feet under or a pouch on/in your belly? That doesn't leave much room for negotiation, does it!

A surgical diversion to create an ostomy or an internal pouch is usually done as a life-saving procedure. Some are temporary solutions to an acute problem and some are permanent diversions. Some are done as cures for whatever ailed you in the first place and some alleviate a lot of worry, pain, misery and medical expense. All of them buy you a GIFT OF PRECIOUS, EXTRA TIME.

For those who have been given that GIFT OF TIME, what are you going to do with that PRECIOUS, EXTRA TIME? Are you going to waste it—now that you have it—or are you going to do something productive or memorable with it? Are you going to crawl into a psychological hole and remain there, feeling sorry for yourself until your time runs out, or are you going to make a difference in the world around you? Are you going to appreciate and give thanks for good health, family, friends, and live life to the fullest, making good use of the time you have left? THE CHOICE IS YOURS!

MINUTES OF THE October 2, 2007
MEETING OF THE TRIANGLE OSTOMY ASSOCIATION

Dan Wiley, President, opened the Triangle Ostomy Association October meeting at 7:40 PM in the Rex Surgical Center waiting room. 26+ members and guests enjoyed refreshments provided by Tom and Kit Hemma. Dan thanked members who have paid their membership dues and those who made additional donations to the association. He also reminded members who have not paid their membership dues to see Ruth Rhodes, Treasurer. Jennifer Higdon, Vice President, said that any member who has a financial difficulty and cannot pay their dues to see Ruth and let her know their situation. She said that this information would be kept confidential and this information is needed so newsletters would continue to be mailed to them.

New ostomates Charles Ellis and Janice Andrews were introduced and welcomed to our group.

Dan thanked Jennifer for her efforts in publishing the newsletter each month. Jennifer announced that she would not be publishing a newsletter in December, as she would be busy studying for exams. Jennifer is working on her Masters degree in Business and Health Care Management from East Carolina University and has received two generous scholarships. We appreciate all of her hard work during this busy time.

Minutes Continued from page 6

Dan introduced Bob Phillips, ostomy sales representative from ConvaTec. ConvaTec was formed in 1978 and produced the world's first two-piece disposable ostomy system. Bob showed us samples of the new product, Sur-Fit Natura Moldable skin barriers in both flat and convex wafers as well as numerous other ConvaTec products. As always, it was nice to see the new products and learn about the products offered by ConvaTec. The company has been a partner of the Triangle Ostomy Association for many years. Bob answered questions and planned to meet with individuals after the meeting.

Dan thanked Tom and Kit for providing delicious refreshments and he and Jennifer awarded a number of door prizes. The meeting was adjourned at 8:30 PM. The November meeting will be held on Tuesday, November 6 and WOC nurses Jane Fellows and Leanne Richbourg will discuss results of their ostomy pouch wear time survey. Refreshments will be provided by Bobby and JoAnn Qualls.

Respectfully submitted,

Bonnie Sessums