



LETTER FROM THE EDITOR

If errors are noted in your name or address, please bring these to my attention. If you know of someone to add or delete from our mailing list, please notify me. I can be reached at 325-670-4302 or callen@hendrickhealth.org. We are now sending our newsletter electronically to those who request it be sent that way. **Please send me your email address if you would like a link to the newsletter.**

If you know of someone who would be a good speaker at one of our meetings, please contact us.

– Charlotte Allen, MSN, RN-BC, CWOCN



LAST MEETING

Since February was all about hearts and valentines, Hendrick Stroke Coordinator Kristen Grand gave a short talk on signs/symptoms of a stroke or heart attack at our meeting. This was very informative.

NEXT MEETING

March is Colon Cancer Awareness Month, so we will focus on that at the March 12 meeting. Be sure to wear blue to the meeting in honor of colon cancer awareness!

Everyone is welcome. Bring your spouse or a friend or come alone.

We meet in the Diabetes Center at 1742 Hickory St. (corner of Hickory St. and N. 18th St.) at 6:30 p.m. Hope to see you there!

CONTACT US

For more information, please contact us at 670-4302.

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A Thank You from Puerto Rico

Ostomy Supply donations from the mainland a huge help to those affected by Hurricane.

By: Martha Velez De Nieves, President, Asociacion de Ostomizados de Puerto Rico, Inc.

Editor's Note: I was moved when I read this article from the UOAA and thought you readers would also find it interesting the way ostomates pull together around the world.

On Sept. 20, the island of Puerto Rico was hit by Hurricane Maria. It was the worst hurricane to hit Puerto Rico and the U.S. in recorded history.

Ruth Salinger of FOW-USA was the first person to contact me. Ken Aukett, whom I consider a mentor, also called. They were rightly concerned about Puerto Rico's need for ostomy supplies.

Ostomates in Puerto Rico would indeed need supplies, but the infrastructure was so damaged there was no way we could receive them. We all know ostomy supplies need to be treated with care. Yet, we had no power, communications that were sporadic and a complete breakdown in postal service. We were in a bad way. I told them I would inform them when conditions improved enough for supplies to get through.

In discussions with the vice president and secretary of our association, we agreed it was best to postpone the shipments until we could receive assurance they would not be held up in transit. At the time, stories were circulating of packages being opened, of batteries and other vital supplies being pilfered. Even if we received the donations, we worried about how to store them and how they would be distributed. So much had been damaged, it was like starting over.

We decided the safest place to send those supplies was my home address. I live in a condominium, and thank God we had a generator that supplied electricity and water, if only for limited hours. For security purposes, the elevators had been shut down. We kept looking for options, contacting other places for storage, but none had power. Every option we considered held another roadblock.

As a last resort we called an old school where we conducted meetings. This old school was given by the government for restoration to Casa Dominicana. They agreed to give us a room, but they had no water or power either.

My apartment would have to do. Time was running out. Ostomates were in desperate need.

As days passed, more communication towers came on line. Power was returning to limited areas. My apartment got electricity! The time was ripe to request supplies. The first supplies we received were from FOW-USA. Since then, we have been receiving supplies. My apartment looked like a warehouse, but I was grateful to have received so much. Just over a month later, I received a call from Casa Dominicana. They had electricity. It took us two days to transport the boxes.

A Thank You from Puerto Rico *continued...*

Even today, we are receiving donations. We are truly grateful to have so many friends in the ostomy community in the USA.

To my surprise, Harikesh Buch, the past president of the IOA informed me that the Korean Ostomy Association would send a donation. Mr. Bonggyu Jeon, president of the Korean Ostomy Association said he would also send a monetary donation from funds they would collect in registrations. For their philanthropic support, we are truly humbled and appreciative.

To distribute supplies to those in need, we held two different activities, and are currently planning another for the end - January. It will be in the city of Hatillo, located in the island's northwest about an hour and a half drive from the metropolitan area.

I would also like to point out that I receive many calls on a daily basis requesting help. Calls so desperate that I sometimes inform them to come directly to my apartment to pick up supplies.

It is unfortunate that some medical insurance plans don't cover ostomy supplies. These supplies are needed to have a good quality of life, to be able to work, to have social contact - to have a normal life. Ostomates are not handicapped, but if we don't have access to supplies then life gets quickly miserable.

It has been four months since we were hit by the hurricane and there is so much to do. People in many towns still don't have electricity and water. The island has been devastated. Bridges and roads are broken. But our people have faith that our beautiful island will recuperate and shine again. I want to give special thanks to our local volunteers, Estela Rodriguez, Lydia Alayón, Iris Reyes, Luis Pérez, Marta Guzmán and the staff of Casa Dominicana who have gone the extra mile in helping AOPR in the organization and distribution of these supplies for those in need. A very special thanks to my dear husband Carlos Nieves for supporting me in this event for those in need. I'm very blessed to be able to help my fellow ostomates.



Ileostomy Blockage

By Ann Lee, RNET via Sherman (TX) Ostoline, and Fort Lauderdale (FL) Broward Beacon

If you have an ileostomy, chances are at some point you may experience a blockage. Almost always food blockages are caused by too much fiber at any one time. You can probably get away with eating small amounts of high fiber foods, but when you eat too much or too many different kinds at one time, you can get into problems. These foods do not digest well, and the result can be an actual "plug" of fiber which obstructs the small bowel.

The first sign of blockage can be a slight cramping or maybe just flutter sensations. This occurs when your intestine tries to get things going by pushing a little harder. At first, you may have no drainage at all, but this may be followed by great quantities of watery drainage; also, the pain may increase and become quite severe. If these symptoms are recognized early, it is sometimes a simple matter to get things straightened out.

First, eat crackers and drink tea, either hot or cold. Some people prefer grape juice. Eating or drinking these does two things. It gives you something to push with and it helps to replace the salt you are losing with all the watery drainage. Avoid drinking carbonated beverages. Next, get down on your hands and knees and rock back and forth while rubbing your abdomen. This helps break up the blockage so it can pass through. This may be all you need to do. If this doesn't work right away, change to an appliance with a larger stoma opening, as your stoma may swell causing the faceplate to cut into your stoma. Also, don't lie still; get up and move around. Remember to keep up your fluids because you can dehydrate rapidly. Gatorade or some of the sports drinks on the market [diluted to half strength] are helpful, or you can make your own solution at home using a liter of water and 5 mL (1 tsp) each of baking soda and salt. If the blockage persists, or if food/liquid stops exiting at all for more than an hour or two or nausea and vomiting persists, check with your WOC nurse, doctor or emergency room.

March is National Colorectal Cancer Awareness Month

In February 2000, President Clinton officially dedicated March as National Colorectal Cancer Awareness Month. Since then, it has grown to be a rallying point for the colon cancer community where thousands of patients, survivors, caregivers and advocates throughout the country join together to spread colorectal cancer awareness by wearing blue, holding fundraising and education events, talking to friends and family about screening and so much more. ccalliance.org/awareness-month

Colorectal cancer screening saves lives. Screenings should start at age 50 unless you have a family history and then you should begin earlier.

Stoma Shape and Leakage

By *New Beginnings*, via *Hernando Co. FL*; and *Contra Costa (CA) Contra Costomy News*

Are you aware that stomas sometimes change shape? This can happen when you change from a standing to a sitting position. Mirrors are handy gadgets – take a look! The stoma that is round when you are lying down or standing may be oval when you sit down. This may be a source of a leaking problem and merits thought.

Remember, the stoma is a portion of the intestines brought to the surface of the abdomen. The healthy red color of the stoma means there is a good blood supply. The natural lubricant of the intestines is mucus. No adhesive will stick to the stoma because of the mucosal lining. Therefore, any part of the wafer that comes in contact with the mucus on the stoma will automatically refuse to stick.

Thus, the seal around the stoma does not change even though the stoma shape changes. This means that if the stoma is oval in a sitting position, perhaps the opening on the wafer should be oval. This particularly applies to people who are sedentary most of the day.

This is not an absolute rule, but a consideration if you find leakage a problem.

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M: Mile High Club

Used with Permission from Brenda Elsagher from: *Id Like to Buy a Bowel Please: Ostomy A to Z*, www.livingandlaughing.com

Gil Lorenz of Fenton, Missouri, shared his version of the Mile High Club.

“We were on an airplane heading for Vancouver when all of a sudden, my pants were wet. I grabbed my good old pink tape and headed for the restroom to try to repair my appliance. We were having some turbulent weather. I simply could not fix it. I opened the door and told the flight attendant my problem. I asked, “Would you please ask my wife to come back here?”

What a time we had. The plane was bumping around, and we were both in the bathroom. You know how tiny those restrooms are on the plane and neither of us are small people. She sat on the toilet seat and I was hanging on to the washbasin. After about 20 minutes, we got the job done.

My wife asked, “What should we way when we leave here?”

I said, “Nothing—just smile?”

Gil and Melba Lorenz have been married for 66 years, and they have a family of 30. They are retired and spend their time taking care of each other these days. Gil had a urostomy in 1999 due to cancer.