



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 work, 325-670-4302, or by e-mail, callen@hendrickhealth.org. We are now sending our newsletter electronically to those who request it be sent that way. **Please send me your e-mail 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

For the June 11 meeting, Shannon Pierce, the new Coloplast rep, gave a presentation. This was her first time to speak to a support group, and she did an awesome job. We learned much about the way to use their products and accessories.

NEXT MEETING

Remember, we do not meet in July, so the next support group meeting is August 13. Have a great summer and stay cool. We will have our traditional ice cream social at the August meeting, as well as a social activity, like a game of Jeopardy or Stoma Bingo.

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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Prepare for Take Off

Pack These Tips and Advice When Traveling with an Ostomy

By Wil Walker, Manager, Clinical Education, Hollister Incorporated (Article provided to UOAA, our national parent organization, by Hollister, which is a digital sponsor of UOAA. Sponsor support along with donations from readers like you help to maintain the website and free trusted resources of UOAA, a 501(c)(3) nonprofit organization.)

Traveling with an ostomy does not have to slow you down. Whether you're traveling by car or plane, here are some suggestions on how to make your trip worry free.

How many extra ostomy supplies should I pack when traveling?

When traveling, you should pack double the number of supplies you would normally need to make sure you have plenty of pouches and supplies on hand. That way, you are ready for the unexpected, such as a delay in returning home, lost pouches or changes in climate and environment that call for more pouch changes than usual. In the event that you do need additional supplies while traveling, most manufacturers have products available around the world. Before you leave home, check to see where you can purchase new supplies in the areas where you plan to travel.

Which supplies should I keep with me in my carry-on when I fly?

Your short-term items should go in carry-on luggage so they remain with you at all times and are within easy reach. It's advisable to keep these supplies in a separate, small travel kit to make visits to the toilet simple and discreet.

On long car trips, what should I do about emptying my ostomy pouch?

It could be very messy to attempt emptying an ostomy pouch during a car trip, especially on bumpy roads without the correct type of receptacle in which to empty it. Frequent restroom stops are recommended for the most hygienic emptying.

What should I expect when going through airport security?

Pack all of your ostomy supplies in a separate, small travel kit that can go through security independently from your other carry-on items. Your hand luggage will be inspected at the security baggage check before boarding an aircraft.

If you have any prescription drugs with you, have your healthcare professional prepare a card explaining that they are medical supplies. You may be searched before boarding the aircraft, so be prepared to explain about your stoma and ask to be searched in a private area for medical reasons.

I heard that I can get a special travel certificate explaining what I am bringing on the plane. What is this and how do I get one?

Travel certificates through ostomy associations are available to help explain your need to carry ostomy pouches, skin barriers and medications. It is recommended to search online for travel certificates available for ostomy patients. Read: UOAA's Travel Communications Card online at ostomy.org/ostomy-travel-and-tsa-communication-card.

What if I have to use the restroom when the "fasten seat belt" sign is on?

Government and airline restrictions could interfere with your access to the restroom during flight. Plan accordingly by emptying your pouch before takeoff. You may also want to consider a private conversation with the flight attendants to inform them that you require restroom trips throughout the flight, and ask them to help you plan accordingly based on your flight schedule.

Will the pressure in the cabin affect my pouch? A change in cabin pressure on a plane could create a small amount of gas in the pouch. You may consider using a pouch that includes a filter while traveling to help deodorize and slowly release gas from the pouch.

Basics of Skin Care

Via Vancouver (BC) Ostomy HighLife

Check for Barrier Fit

The best course of action is to keep skin problems from starting. A correctly fitting pouch system – that is, one which is snug to the stoma, but not too tight – is a good start. If you can see any exposed skin on the inner circle of the skin barrier when you apply it, chances are the hole on your barrier is too big. If in doubt, use a stoma measuring guide and double check to make sure you have the correct fit.

Stomas can change both shape and size in the early days and weeks following surgery, so it is a good idea to always re-measure. Also, if you lose or gain weight, the peristomal skin may change size and thus affect the size of the barrier hole.

Cleaning Around the Stoma

There is no need to use harsh cleansers or disinfectants around the stoma, nor is it necessary to scrub rigorously. Plain warm water and gentle rubbing with the pads of your fingers is best. If you need a little more ‘cleaning power,’ use a plain non-scented soap like Ivory or Dial. If you dislike these brands, ask at the cosmetic counter for unscented, non-oil-based soaps.

After carefully removing your skin barrier, cleanse your skin with warm water. Many people like to remove everything in the shower and completely rinse. It’s your choice and will not harm your stoma.

Remover wipes are useful if you have a build-up of residue from either tapes or skin barriers. Be sure to cleanse your skin after using remover wipes. Once you have given your skin a good rinse, simply pat the skin dry. Then re-apply your skin barrier.

Powders, Adhesives and Paste, Oh My!!

There are many products made that are designed to address or prevent skin issues. These include pastes, stoma powders, protective wipes, as well as rings (washers) and strips. All this stuff can be confusing to the new patient learning basic skin care! First and foremost is getting a proper seal with the skin barrier after you’ve cleaned the skin and are ready for your next change. If your barrier opening is the correct size as previously mentioned, the next step is to make sure it has a smooth, dry and level area to stick to. This can be tricky if you have wrinkles, or a recessed stoma, or hair, or skin that is already irritated. (To shave hair, shave in the direction the hair grows. You can use an empty toilet roll tube around the stoma to protect it if your hands aren’t steady enough.)

Check to see if you have any skin dips or gullies around your stoma. If you do, you may want to add a stoma paste as filler to smooth the surface. Pastes can be applied directly around the stoma or you can apply paste on the skin barrier. Either way, you should have a firm seal between the pouch and your skin. Be sure to use stoma paste only as a filler and not adhesive. (If you remember using “paste” in grade school, you may think that stoma paste is a sticking agent. It’s not. Stoma paste is a caulking agent, not an adhesive.) Pastes contain varying amounts of alcohol, and they can sting on broken skin. When they are applied to unbroken skin, there should be no sensation. If you don’t want to use stoma paste, there are other choices such as **barrier rings** and **strips**. These are free of alcohol and easy to apply. You can also obtain skin barriers that fit an outward curve of the skin around the stoma. These are **convex skin barriers**, and they are different from **flat backed barriers**; the back of the barrier is curved outwards along with the skin. This fills in places where the skin is folded or the stoma is recessed, and gives the stoma a little push forward to assist drainage to go into the pouch. It also helps flatten out any peristomal folds and creases which might be interfering with a good skin barrier seal.

Stoma powder (not talcum!) is a good skin protector for broken skin. It absorbs moisture and protects the skin. You can apply stoma paste over powder to seal the powder in. This may reduce the stinging sensation that can be experienced with pastes. If you have a small amount of broken skin, you can apply stoma powder to protect these areas from further breakdown. Be sure to brush off the excess powder before applying any other pastes or skin barriers. Once your skin has healed, stop using the powder. It is not used for prevention, only to help treat an existing problem.

Skin protective wipes offer a protective film to the skin. This can serve a dual purpose by a) helping shield the skin against corrosive discharge and b) allowing easier removal of skin barriers. Most skin protective wipes contain alcohol, so if you have broken skin, there might be a stinging sensation when you apply them. If you find it difficult to remove your skin barriers and tapes, or if you are stripping your skin, you might want to consider trying these wipes. It is not recommended to use skin protective wipes with extended wear barriers as this can reduce the amount of wear time.

Remember, each person’s skin is unique. What works for one person may not work for someone else.



U: Unexpectedly

There is a health crisis center in Minneapolis called Pathways. They invite people that are in the midst of their health crisis to attend classes free of charge. Alternative therapies such as massage, Reiki and art therapy were just a few offered to supplement traditional medical care. I participated in a program called Renewing Life when I first dealt with my ostomy.

Rushing to get there on time, I hurried from the bathroom into my bedroom before I put my pouch back on. Unexpectedly, poop went flying all over my bed, my floor, and part of the vanity. There was no way I'd be on time. I was mad at myself and cried as I cleaned up the mess.

When I got to Pathways, they were just about to end their weekly tradition of each person stating their brag and bummer for the week. I told them mine was one in the same. Even though I had just had a painful reminder of having a colostomy, I put on my prettiest purple dress, fixed my makeup and went out to face the world.

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Can I Control My Ileostomy with a Strict Diet or Irrigation?

A definite "NO" to both questions. Occasionally, a doctor may irrigate an ileostomy with a lavage set for food obstruction. This procedure should be done only by your doctor to prevent perforation of the small bowel and further surgery. An ileostomy cannot be controlled by any diet.

It is vitally important that everyone with an ostomy eat at least three nutritionally balanced meals a day. If your doctor has given you a special diet, remember that when your stomach is void of food, it will fill up with gas. Excess gases result in a noisy ileostomy. Excess gas may also increase the activity of the small bowel, causing the ileostomy to discharge very liquid feces.

Diet is an individual matter. Some people can eat all varieties of food, including food with skins without affecting the consistency of the stool or the activity of the bowel. Others find that any violation of a strict low residue diet leads to frequent and watery movements. Each person must discover his own dietary pattern through trial and error.
From The Roadrunner of Albuquerque