

"UOA is a volunteer-based organization dedicated to providing education, information, support and advocacy for people who have had or will have intestinal or urinary diversions."

Monthly support and information meetings are held in three locations for member convenience.

### Central Group

Monthly:	Third Monday
Time:	7:00 p.m.
Place:	American Cancer Society Building
	6301 Richmond Avenue, HoustonContact:
	Ed Wood 281-493-5015
	(ewood6@houston.rr.com)

Meeting: September 19th, Monday evening

#### Program: 2005 Youth Rally Report

Erika Daniel, Regina Haney, and Colleen Reeves will tell of their experiences at this year's Youth Rally.



School days, School days, Good ol' golden rule days . . .

### J-Pouch Group

Monthly: Third Monday Time: 7:30 p.m. Place: American Cancer Society Building 6301 Richmond Avenue, Houston Contact: Ron Meisinger 281-491-8220

Meeting: September 19th, Monday evening

Program: Round Table Discussion

Join us for a discussion about ulcerative colitis and the J-Pouch connection.

## Northwest Group

Monthly: Tuesday following the third Monday Time: 7:00 p.m.

Place: NW Medical Professional Bldg. (The Cali Bldg.) 17117 Cali Drive, Houston (This location is just off of 1960 and west of I-45. Turn north on Cali Drive from 1960. At the stop sign turn left on Judiwood and left again to park behind the Cali Building.)

Contact: Tony Romeo 281-537-0681 (sa1tmr@sbcglobal.net)

Meeting: September 20th, Tuesday evening

#### Program: Hollister Representative

Chris Robison will be present to give us an update on products and services from Hollister. Come join us!!

### Baytown Group

Monthly: Fourth Monday

Time: 7:00 p.m.

Place: Cancer Center Community Room 4021 Garth Road, Baytown

Contact: Cindy Barefield 281-420-8671

Meeting: September 26th, Monday evening

#### Program: Having Fun with Fitness

Join us for an informative presentation about fitness. We'll discuss exercise and the ostomate.

#### Patient Visiting and Support Services

**Doctors and ET Nurses please note**: Upon request from a doctor or nurse, a specially trained visitor will be sent to visit an ostomy patient before and/or after surgery. The visitor will be matched as nearly as possible according to sex, age, and type of ostomy. There is no charge for this service. The visitor does not give medical advice. Please contact our Visitor Coordinator, Dorothy Andrews at 713-789-4049.

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 to their families. Membership fees and donations are tax deductible.

#### **Central Group News**

At our August 15th meeting, Floyd and Judy Swinger presented their report on the last ever national United Ostomy Association conference held in Anaheim, California. We are glad they were able to represent our chapter at the conference. They reported on the various sessions that they attended. Many topics at the conference concerned the effects on chapters when UOA ceases to exist at the end of September and useful information was presented that will help us meet the challenges that our chapter will face. They were greatly encouraged by an announcement early in the conference that a new organization is being formed to fill some of the void which will be left by the dissolving of the United Ostomy Association. The new venture is called the United Ostomy Associations of America, Inc. You can learn more about this organization on page 6. Floyd and Judy brought back several items from the conference to present as door prizes. They also brought back a CD made by an ostomate who has written songs about his ostomy experiences. The Northwest and Baytown groups will also be receiving a copy of the CD.

We had 23 in attendance at the meeting and were glad to see Jane Fieldcamp back from her illness. We appreciate the report Shirley Mucasey gave us as a result of her monthly phone calls. We offer Harold Richmond, Bryan Washington, Meyers Lewis, and Victor Blue our best thoughts and wishes for recovery from illness and surgeries.

Chuck Bouse reported that dues notices for those who became members between July and December have been sent. At this time, of 91 notices sent, 54 have been returned. We appreciate those who sent funds in addition to the \$10.50 normal dues. During August, a second dues notice was sent to the 37 people who had not yet responded. For the first half of the year, we received dues from 95% of those who received notices. We hope to have a response equal to that, if not better, from the second part of the year.

Our support group officers are now meeting on a monthly basis. Originally, it was to plan and prepare for the 50<sup>th</sup> Anniversary Celebration that is scheduled for March 26, 2006. Since the announcement of the dissolution of UOA, the work has increased. The topics for the next meeting will include incorporation, fundraising, and new by-laws. We appreciate the time that the officers give to the decisions that are to be made for the group's future.

Dorothy Andrews reported two visitations made in the last month. We appreciate those who serve our group with their willingness to participate in the visitation program. The nurse and young lady who we sponsored to this year's Youth Rally in Colorado have reported having a great time at the Rally. Next year's Rally is planned for San Diego. Our September program is planned around this Rally, and we hope to hear from Charlene and Erika concerning their attendance and experiences.

We continue to have questions and requests from people who have contacted us at our website. We also have received payments from the community programs at Krogers and Randalls grocery stores as payment for those who are shopping there. If you have any questions about participating in these programs, call Ed Wood at 281-493-5015.

Recently, we have been able to help several people from our inventory of donated supplies. We would like to thank Ana Poonawala for providing temporary space for us to store supplies at Spring Branch Medical Supply. We also thank the American Cancer Society for providing space to store supplies and the Spanish version of the brochures that we have recently distributed.

I hope to see you at the September 19th meeting.

Ed Wood President

## WHEN TO CALL THE DOCTOR OR YOUR WOC/ET NURSE

- ! If cramps last more than two or three hours.
- ! If you get a deep cut in the stoma.
- ! If there is excessive bleeding from the stoma opening or a moderate amount in the pouch after emptying several times.
- ! If there is bleeding at the juncture of the skin and stoma.
- ! If you have severe skin irritation or deep ulcers.
- ! If there is unusual change in the size or appearance of your stoma.
- ! If you have severe watery discharge lasting more than five or six hours.
- ! If there is a strong odor lasting more than a week.
- If you notice any other unusual occurrence regarding the stoma. ♦

*"A* memory is a photograph taken by the heart."

- Unknown

#### **ANNIVERSARY GIFT**

As you celebrate the anniversary of your ostomy surgery each year, consider making a monetary gift to the Houston Chapter UOA. A gift of \$1.00 for each year you have had your ostomy is a guideline; however, each person determines the amount, if any, he/she wishes to give. If you desire to make such a gift, make your check payable to Houston Chapter, UOA and please send it to:

> Houston Chapter, UOA Attn: Chuck Bouse, Treasurer P.O. Box 25164 Houston, TX 77265-5164

#### PERSONAL

From the New Life Newsletter, Charlotte, NC

Should you tell people about your ostomy? What should you say? Of course, your family and close friends will know the circumstances and procedures involved in your operation, but the situation may arise where reference is made to your surgery around someone who is unaware of "your condition". One would think that a straightforward explanation - "I have an ileostomy" would be sufficient, but most people have no idea what that means. Learn to keep it simple (very simple) by saying, "I had my large intestine removed". Usually that is plenty of information and no mention of a bag or rectum is necessary. Your attitude toward your body and your ostomy will be reflected in the people around you. The human body can be altered so drastically and be so resilient, it is nothing short of a miracle.

You cannot be ashamed of a surgery that has saved your life!  $\blacklozenge$ 

#### CONTRIBUTE WHEREVER AND HOWEVER YOU CAN FOR THE HURRICANE VICTIMS.

#### ATTENTION... Ostomates and Medical Personnel

Clarice E. Kennedy, Certified Enterstomal Therapist and Immediate Past President of the Houston Chapter, UOA, is available for consultations by appointment only at Spring Branch Medical Supply at 8700 Long Point Road, Houston, Texas. Clarice is an ostomate herself and has over 30 years of knowledge and experience to share with anyone who has questions about, or needs assistance with, the care of an ostomy both prior to and following surgery. The Houston area is fortunate to have such a dedicated individual available for personal consultations. Appointments can be made by calling Clarice at 713-647-8029. We encourage you to bring your spouse or significant other and members of your immediate family to our meetings.

#### **MEMORIAL FUND**

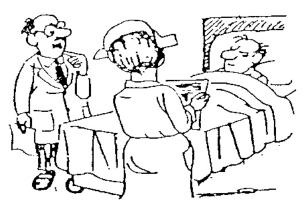
The Houston Chapter of UOA has established a Memorial Fund. Donations can be made to the fund to memorialize or honor individuals. All donations should be made payable to the Houston Chapter, UOA and sent to:

> Mary Harle 9643 Winsome Lane Houston, TX 77063-3725

When sending a donation, be sure to include the name of the person being honored so that appropriate acknowledgement can be sent.

#### **Donation of Supplies**

If you have ostomy supplies that you no longer use, please consider donating them. The Houston Chapter of UOA is contacted on a regular basis by individuals who are in need of donated supplies of all kinds. This is one way that you can assist your fellow ostomates in the Houston area. Please contact Ed Wood at 281-493-5015 with any questions.



"He should be getting out of bed more. Refrigerate his bedpan."

**Disclaimer:** The information contained within this newsletter is presented expressly for informational purposes only and may not be applicable to everyone. It should not be substituted for professional medical care or attention by a qualified practitioner. Always check with your doctor if you have any questions or concerns about your condition.

#### PHASES OF SURGICAL RECOVERY

By Dr. Albert G. Wagoner

Each patient, along with the family, usually goes through four phases of recovery following an accident or illness that results in loss of function of an important part of the body. Only the time required for each phase varies. Knowledge of the four phases of recovery is essential. They are:

- 1. The Shock Phase—The period of psychological impact. Probably, you remember nothing of this phase after your operation. Nevertheless, it is a phase that requires a lot of support.
- 2. The Defensive Retreat Phase—the period in which you defend yourself against the implication of the crisis. You avoid reality. Characteristic in this period is wishful thinking or denial, or repression of your actual condition. For example, an ostomate believes that his/her entire colon is still there and will be reconnected later.
- 3. The Phase of Acknowledgment—In this period, you face reality. As you give up the existing old structure, you may enter into a period, at least temporarily, of depression, of apathy, of agitation, or bitterness, and of high anxiety. You hate your stoma, yourself, cry a lot, pity or condemn yourself. You may not eat, be unable to sleep or want to be left alone to die. In this phase, you need all the support that can be mustered.
- 4. The Phase of Adaptation—Now you actively cope in a constructive manner. You adapt and make the adjustments that are necessary. You begin to establish new structures and develop a new sense of worth. With the aid of a WOC nurse and an ostomy visitor, you learn about living with a stoma. Aided by your physician, social workers, ostomy association and family, you go about rebuilding and altering the life that brought about the condition. ◆

#### PARASTOMAL HERNIA & PROLAPSE - AN OVERVIEW Presentation by Dr. Steve Mills at the UOA Conference

Colostomates are twice as likely to have parastomal hernias than ileostomates. Contributing factors include... obesity, malnutrition, steroid use, emergency surgery, age, infection, size of hole in abdominal wall, elevated abdominal pressure (lifting, etc.).

Prolapses occur in 2 to 7 percent of ostomies. Most require no surgical intervention, but can be repaired if necessary.  $\blacklozenge$ 

# "Don't try diving for the first time in front of a bunch of people."

- From Really Important Stuff My Kids Have Taught Me

#### HINTS AND TIPS FROM EVERYWHERE

- Wear protection between the pouch and your skin to prevent a rash from perspiration (especially in hot weather.)
- Leave a little bit of air in the pouch after emptying and before clipping it shut. The air provides space for the effluent to flow down into the pouch, rather than sideways or underneath the adhesive wafer.
- Apply your pouch standing, lying or sitting; but, do not allow abdominal wrinkling or this will break the seal when you straighten up.
- Do not suppress a sneeze. If you seal your lips and pinch your nose while sneezing, you create enormous pressure in your nose and throat, which can force infections into your sinuses or ears through the Eustachian tubes.
- Don't put limitations on yourself just because you have a stoma. Enjoy yourself!!

#### **Discovering Your Best**

Positive Strategies for bringing out the best in you

- 1. Be enthusiastic about who you are and what you do.
- 2. Let your enthusiasm and respect for people, diversity, life, and your ostomy support group be contagious.
- 3. Discover and appreciate your own creativity, gifts, and abilities.
- Be self-motivated to become the person you are capable of becoming. We are the painters of our own self-portraits.
- 5. Know that in order to change, you have to be flexible.
- 6. Be a goal setter...reach higher than you thought possible.
- 7. Learn...have an ongoing educational and selfdevelopment plan.
- 8. Develop outstanding communication skills at all levels.
- 9. Be friendlier by saying "Hello" first and then be a good listener.
- 10. Laugh more and share positive humor with others every day.
- 11. Show compassion and that you care about others by asking "What can I do for you?".
- 12. Find a mentor for yourself and be a mentor to someone else.
- 13. Give recognition to others and give generously each day.
- 14. Be a valuable resource and know that you <u>do</u> make a difference.
- 15.Always be known for giving more than others expect. ◆

#### **BAYTOWN SUPPORT GROUP**

T he Baytown group had a great turnout for August with 12 in attendance on the 22nd.

Informative issues from the National UOA Conference were shared and formation of the new UOAA was announced.

Our roundtable discussion was beneficial to everyone as troubles, frustrations and joys were shared!

We also discussed plans to contact those members not in attendance.

Our September program will be "Having Fun with Fitness". Look forward to seeing everyone on the 26th!

Cindy Barefield, RN, WOCN 281-420-8671 Pager 713-404-0296

#### WISDOM FROM THE PHARMACIST

By Florian Norwicki, R. PH, Rockford, IL

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

We constantly hear of organizations being formed for many types of bodily dysfunctions such as the paraplegics, epileptics, heart conditions, 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 you to attend meetings regularly. If you come away with one new fact 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 that you may determine what food it was that caused you a problem, then steer yourself away from that problem.

Your local ostomy support group is the way to go. Ask questions. The members have already been in your shoes.  $\blacklozenge$ 

#### LEND SUPPORT WHILE YOU SHOP...

Remember to use your Kroger and Randall's shopping cards. Both stores return a percentage of your purchase to the Houston support group on a quarterly basis. For card applications, contact Ed Wood at 281-493-5015.

#### NORTHWEST GROUP HAPPENINGS

 $\mathcal{A}_a$  tour August 16th meeting, a good turnout enjoyed a program by Byron Richard, Dietitian, from NW Hospital. His presentation was interesting and informative. Our special thanks to him!!

We discussed our October social get-together and more details will be announced soon.

As always we welcome family and friends to attend our monthly meetings.

See you on Tuesday, September20th, for a program by Chris Robison, Hollister representative.

## **Tony Romeo** 281-537-0681

#### A PIECE OF GOOD ADVICE...

Get a copy of your complete medical/surgical record and keep it at home for reference if you require hospitalization or medical treatment.... especially in an emergency situation. ◆

#### ACTUAL SENTENCES FOUND IN PATIENT'S CHARTS

(Proves that those medical folks are right on top of things)

- 1. Patient has chest pain if she lies on her left side for over a year.
- 2. On the second day the knee was better, and on the third day it disappeared.
- 3. The patient has been depressed since she began seeing me in 1993.
- 4. Discharge status: Alive but without my permission.
- 5. Healthy appearing decrepit 69 year old male, mentally alert but forgetful.
- 6. The patient refused autopsy.
- 7. The patient has no previous history of suicides.
- 8. Patient has left white blood cells at another hospital.
- Patient's medical history has been remarkably insignificant with only 40 pound weight gain in the past three days.
- 10. She is numb from her toes down.
- 11. The skin was moist and dry.
- 12. Occasional, constant infrequent headaches.
- 13. Patient was alert and unresponsive.
- 14. Rectal examination revealed a normal size thyroid.
- 15. I saw your patient today, who is still under our car for physical therapy.
- 16. Patient was seen in consultation by Dr. Blank, who felt we should sit on the abdomen and I agree.
- Patient has two teenage children, but no other abnormalities. ♦

#### **Report from UOA Conference** Anaheim, California

By Judy and Floyd Swinger

Anaheim, California was host to the last annual United Ostomy Association Conference from August 3 - 6, 2005. We, along with most other attendees, arrived at the conference with mixed emotions....glad to be attending, but feeling a weight of sadness that this would be the final conference due to UOA's dissolution as of September 30, 2005.

As was the case at the first conference we attended in Las Vegas two years ago, we arrived at the hotel and were amazed at the number of volunteers and attendees who were already scurrying about to have everything ready for registration, the various programs to be presented, the social events, etc. Many people are required 'behind the scenes' to put together a meeting of this magnitude and their efforts were evident. Approximately 530 individuals were in attendance for this conference representing all areas of the U.S. plus the International Ostomy Association president from Canada and a representative from Bermuda.

UOA, over the past 43 years, has provided incalculable assistance to ostomates, their families, the medical community, and others. This conference was an acknowledgement and celebration of 'a job well done'.

The opening evening ceremony paid tribute to the many individuals and chapters across the country who have so richly contributed to UOA's successful era. We were delightfully entertained by humorist, Nancy Leff, who wore a "necklace" of various ostomy bags, and songwriter/vocalist, Brett Martin, whose renditions were about his experiences as an ostomate. To complete the evening, everyone enjoyed a huge ice cream social sponsored by Coloplast.



Nancy Italia, UOA Executive Director, and Floyd Swinger enjoying the ice cream social.

The conference included sessions for parents of children with ostomies, teens, young adults, singles, and adults of all ages. There were also informative sessions for spouses/ partners, and caregivers. Meetings were held for directors, various regions and group leaders. Topics such as skin problems, infections, pouching, irrigation, surgery, living with an ostomy, motivation, selfesteem, traveling, visitor training, hernias, scar tissue and adhesions,

autoimmune diseases, arthritis, osteoporosis, nutrition, discrimination, advocacy, fund-raising, and newsletters were covered among others. Presenters included doctors, nurses, a pharmacist, plus officers, directors and volunteers from within UOA.

"Have regular hours for work and play. Make each day both useful and pleasant and prove that you understand the worth of time by employing it well."

- Louisa May Alcott

In addition to the meetings and sessions, manufacturers, distributors and UOA program representatives participated in demonstrating and presenting information in the Exhibit Hall. A silent auction was also enjoyed by everyone.



As usual ConvaTec sponsored an evening of food, entertainment, music, dancing and games and introduced the Great Comebacks award winner. Nu-Hope sponsored their Fun Run for those who wished participate. During the to Awards Luncheon, the WOCN of the year was honored, as well as the Sam Dubin award winner.

Judy Swinger and Mary Beth Akers in the Newsletter session

As mentioned earlier, this was the last UOA annual conference. We were pleasantly surprised on the 2nd day of the conference to learn that a group of volunteers, including current and former officers and directors of UOA, have been actively working to put a new organization together which will be called the United Ostomy Associations of America, Inc., or UOAA. Many details are incomplete at this time but it is clear that support will be ongoing for advocacy issues A young ostomate and many of the UOA programs, such as the Youth Rally, that have been of such



enjoying the ConvaTec party

value to ostomates. There will be no national membership for individuals, but local support groups will be given the opportunity to affiliate with UOAA for a fee yet to be determined. A quarterly magazine, The Phoenix, will take the place of the OO. Current members of UOA will be contacted regarding subscribing to this magazine in the coming months. There will be a UOAA website and the current UOA website will remain available for one year. Communication from UOAA will be via email to support group leaders. Ken Aukett, who has been involved with UOA at all levels for many years, will be president of UOAA. We believe Ken's leadership and expertise, along with others, will help make UOAA a successful venture.

As we look to the future one thing is clear...where there are people with caring hearts, there is a way to accomplish great things. We, as part of the Houston support group, feel blessed to have had the privilege to attend the last UOA Annual Conference and to have had the opportunity to see the enthusiasm of those who desire continuity of UOA's mission. ♦

and financially viable.



Ken Aukett

UOAA is an association of affiliated, non-profit, support groups who are committed to the improvement of the quality of life for people who have, or will have, an intestinal or urinary diversion. It is dedicated to the provision of information, advocacy and service to, and for, its affiliated support groups, their members and the intestinal/urinary diversion community at large. It is organized to grow and develop while remaining independent

#### **KEEPING IT FUN**

Source: ConvaTec's Health & Vitality Magazine

Choose the right appliance. For water sports, use a one or two-piece appliance (ideally a closed-end pouch) that does not have a vent. A pouch with a filtered vent allows water to enter and slosh around. For cold-weather activities like skiing, vented bags allow you to monitor gas buildup as well as keep the appliance close to the skin. In the cold, it's helpful to use an appliance with a comfortwear panel to relieve the effects of sweat on skin. For longer excursions, pre-bag adhesive remover and protective barrier wipes, paste, seals and replacement appliances separately for each change-out.

Experiment with clothing. Appliances can be held in place by most good athletic wear, such as bicycling pants and stretch underwear. Moisture-wicking materials such as Lycra keep skin cool and sweat buildup to a minimum.

Clean up frequently. Sweat is your enemy in the outdoors. Especially in dry climates, your clothing may not feel damp, but you still sweat under your appliance's adhesive patch. Inspect yourself regularly, and clean and dry yourself as soon as you finish any outdoor activity to prevent bacteria or other irritations from causing problems near your stoma.

Keep track of the time. Be careful if your stoma is active. Water sports or other activities that might call for an unvented bag can invite unwanted gas expansion. Plan ahead by avoiding troublesome foods or caffeine if you'll be far from a restroom for long periods.

Tune in to your body. Try an activity gently before revving up to full speed. If you find your appliance interfering with movement-or feel signs of internal stress-modify your technique to relieve the affected area. •

#### MEDICARE MONTHLY ALLOWABLES

Are you aware of the number of pouches and wafers you can receive each month?

- Drainable pouches up to 20/month.
- Urinary pouches up to 20/month.
- Closed pouches up to 60/month.
- Irrigation sleeves up to 4/month.
- Solid skin barriers and skin barriers with flanges - up to 20/month.
- DMERC now allows one ostomy belt per month.

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## **Moving??**

Our newsletter is sent by bulk mail, which the Post Office will not forward even if you fill out a forwarding request. To continue receiving the newsletter after a move you need to contact Chuck Bouse, Treasurer, at 281-495-1840 (dewitt@houston.rr.com) or Judy Swinger, Newsletter Editor, 281-463-0069 G (swingcon@ev1.net). You may also send your request to UOA, Houston Chapter, P.O. Box 25164, Houston, TX 77265-5164.

Personal Profile



Clarice Kennedy has been a member of the ostomy support group in Houston since shortly after her ileostomy surgery in 1970. She suffered from ulcerative colitis and ultimately became so ill that surgery was her only alternative. At that time there was no ET or WOCN to instruct her on the care of her ostomy. Fortunately, her surgeon put her in touch with a member of the Houston Ostomy Support Group. The support she received from the ostomy group was invaluable.

As is true for many ostomates, the surgery changed Clarice's life in many ways but the most notable was in her desire to be of assistance to others who would face the same challenges that she had been through.. Clarice decided, with the encouragement and support of Dr. Richard Jackson, to attend an Enterostomal Therapy Training Program in 1974 and became the third Certified ET in the Houston area. Thus began a career during which she has cared for and influenced the lives of innumerable people. Her expertise in the ostomy field is recognized by the entire Houston medical community and she is still actively involved with patients, doctors, and fellow ostomates.

Clarice became active in the ostomy support group by first volunteering to be the group Librarian, subsequently holding nearly every office, and served as President several times. Currently she attends monthly meetings and serves in an advisory role as Immediate Past President and on the Board of Directors. Recently she was contacted about managing a Focus Group which will test ostomy products manufactured in Germany.

In the past, Clarice has been presented with many honors including "Who's Who of American Women" in 1993-94. She has appeared on medical programs, various panels and was an organizer of and speaker for the 1993 Regional UOA Conference. She also spoke at the UOA National Conference in Dallas in 1978. Nursing students and graduates as well as Home Health nurses were taught by Clarice at Brazosport Memorial Hospital in Lake Jackson. Texas.

A few years ago, Clarice thought of retiring, but, after recovering from a broken arm, she has continued to be a pillar of strength and knowledge for ostomates and their physicians.

Clarice is the mother of two daughters and has one granddaughter and three grandsons.

Life can hand out lemons, but some people choose to make lemonade....Clarice Kennedy is one of those people.

EDITOR'S NOTE: The "Personal Profile" article is a new feature for our newsletter and will be published quarterly.

#### **POUCH EMPTYING - the inevitable questions**

From Metro, MD , NV Town Karaya

One of the most frequently asked question is...how and what is the correct way to empty your appliance (regardless of what type of ostomy you have). So many ostomates want to make this so complicated and <u>so unnatural</u>! Some kneel on the floor in front of the toilet, others stand facing the toilet bowl, and others remove the pouch and empty and rinse it in the toilet and then wash it out in the sink. Still others fill the pouch with water, swish it around, and then empty it again. I could go on and on about the way pouches are emptied...into containers, plastic bags, tin cans, you name it and it's been done before! I've even heard of one ostomate who used a straw stuck into the end to suck out every last bit of air before sealing it with a clip!

Why not make life as easy as possible and make pouch emptying as natural (and stress free) as a normal trip to the restroom. When the pouch is one quarter to one half full, empty it, as the weight will cause tension and loosen the adhesion of the appliance resulting in leakage if it becomes too heavy. Throw out the syringes, plastic bags, tin cans and whatever else you use. I know, I know the nurse at the hospital told you that you had to wash it out or that you had to kneel and face the toilet.

But let's think about an easier system.

Sit on the toilet with pouch between your legs. Lean forward. With the clip on, turn the contents upward, away from your body. Remove the clip and **carefully** aim the end of the pouch into the toilet and empty. With toilet paper, wipe off the end of the pouch. Refasten with the clip. Sometimes it is a bit sticky and you have to push it out with both hands. Try to slide it out, wipe the end and seal. If you take time to wash it out, you know that in a few minutes or sooner it is going to get soiled again! Try it and Good Luck!  $\blacklozenge$ 

#### **OPPORTUNITY TO LEND A HELPING HAND**

If you would like to sponsor a member of our ostomy support group with a tax-deductible donation to cover the cost of their membership, send your check in the amount of \$10.50 to:

Chuck Bouse, Treasurer P.O. Box 25164 Houston, TX 77265-5164

#### Advocacy for Patients with Chronic Illness

This site has been launched for people with IBD. Jennifer C. Jaff, author of "Know Your Rights: A Handbook for Patients with Inflammatory Bowel Disease," has inaugurated a new nonprofit corporation to advocate for patients with chronic illnesses, especially IBD. Visit www.advocacyfor patients.org to use this free service. ◆

#### THIS 'n' THAT

- Some applesauce with breakfast sometimes controls stoma noise, and the pectin in it may have a thickening effect on a too liquid output.
- To keep urine acid, take two vitamin C tablets daily, if it is all right with your doctor. It also helps odor. Be sure to drink lots of fluids. Bacteria can't live in acid urine.
- ✓ Scraps and cut-outs from barriers are great to relieve pressure of blisters or corns on one's feet. ◆

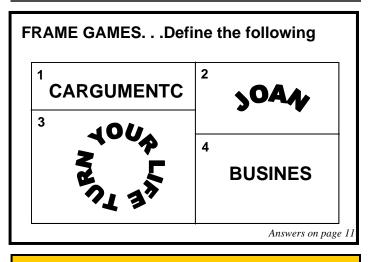
#### EVER WONDER...

- : Why the sun lightens our hair, but darkens our skin?
- Why don't you ever see the headline "Psychic Wins Lottery"?
- ! Why is "abbreviated" such a long word?
- ! Why is it that doctors call what they do "practice"?
- Why is the man who invests all your money called a broker?
- Why is the time of day with the slowest traffic called rush hour?
- : Why didn't Noah swat those two mosquitoes?
- You know that indestructible black box that is used on airplanes? Why don't they make the whole plane out of that stuff?!
- : Why don't sheep shrink when it rains?
- Why are they called apartments when they are all stuck together?
- ! If flying is so safe, why do they call the airport *the terminal*?

#### Count the "F's" in the following text:

Finished files are the result of years of scientific study combined with the experience of years...

Answer on page 9



Only in America will you find drive up ATM machines with Braille lettering.