

BERRIEN COUNTY CANCER SERVICE

7301 RED ARROW HWY.

STEVENSVILLE, MI 49127



OSTOMY

NEWSLETTER

MAY – JUNE 2007



what matters.™

The Ostomy Support Group will meet with the Cancer Support Group at BCCS on the 15th of May and the 19th of June at 1:30 p.m.

THE DRINK OF CHAMPIONS

by Susie Harrison, RD
from The New Outlook – Chicago – May

Water is the most important nutrient, yet it is often the most neglected. Water is essential for every metabolic function in the human body and lack of an adequate amount will result in less than-optimal performance, fatigue, and impaired metabolism. As little as a 2% water loss from the body causes a noticeable decline in strength/power, precision, speed, endurance, aerobic capacity, and temperature regulation.

How much water is enough? Eight cups a day, or 64 oz., plus additional amounts to compensate for losses through sweating during exercise or loss through an ostomy. Although this may sound like a quite a bit of water to someone not accustomed to drinking water, rest assured that once you start drinking plenty of water, your thirst mechanism becomes active, and you will crave water frequently. Remember though, that thirst is normally a very poor indicator of hydration. A person typically will consume only two-thirds of his or her water needs when drinking according to thirst.

In addition, our thirst regulating mechanism declines with age, which is why the elderly are at such high risk of dehydration. Therefore, it is a good idea to drink to satisfy thirst, and then drink a bit more. Drinking plenty of water will enable you to exercise at higher levels and for longer periods, therefore burning more calories.

In order to assure an efficient workout, follow these guidelines for fluid consumption before, during, and after your workout:

- Two hours before exercise – 16 oz. of water
- Immediately before exercise – 8 oz. of water
- During exercise – 2 to 8 oz. of water every 15 to 20 minutes up to about 26 oz. per hour.
- Weigh yourself before and after a workout, and replace each pound of weight lost with 16 oz. of water.

STOMA RETRACTIONS

by Gail Wilhite

Let us begin by talking about an ileostomy stoma. An ileostomy stoma should be about an inch long. It should look much like a spout because it is necessary for it to expel the constant flow of effluent into a pouch, and to prevent pooling of the effluent at the base of the stoma.

Conversely, a stoma that is longer than an inch may be subject to external trauma and injury. Weighing the consequences, it is preferred to have a stoma somewhat too long than one too short.

There is a difference between the creation of a colostomy or an ileostomy stoma. Frequently, when fashioning a left-sided colostomy, the surgeon will create a flush stoma. The contents of the left colon are relatively inert and usually regulated with irrigation. Therefore, little or no functional problems occur with a flush colostomy stoma.

An ileostomy stoma is never constructed as a flush stoma. Nevertheless, sometimes the stoma may retract for various reasons. The most common cause of stomal retraction is postoperative weight gain. Prior to his/her operation, most people with an ileostomy have lost at least some weight. Following surgery, weight gain can be rapid and many times excessive. What once was an adequate stoma now retreats within the expanding environment.

Another cause of retraction may be inadequate fixation of the opposing serosal layers following eversion. If these layers fail to adhere, healing and subsequent scarring may tend to draw the stoma into the abdomen. Problems resulting from retraction are decreasing adherence of one's ostomy system and skin breakdown. The pooling of the excoriating intestinal contents cause the loosening of the adherent bond of the skin barrier, thus, results in the leakage of ileal effluent on the skin. This skin-effluent contact naturally produces breakdown quite quickly.

(continued from page 2)

The combination of irritated, weeping peristomal skin and continual pooling leads to an unbearable situation, which must be remedied. The treatment for a slightly retracted stoma is the use of a convex barrier. The convexity applies pressure on the skin surrounding the stoma, thus pushing the stoma up and out. When using a convex barrier, it is important to manage the convexity. You and your WOC nurse must decide if it is advisable to use one of the many quality barrier seals around the stoma before putting on the barrier. The skin and barrier, with or without a seal, should suffice to maintain the advantages of both convexity and skin protection. If the use of a convex barrier proves unsuccessful, or if the retraction is severe, then surgery is advised to create a new longer stoma.

I went to the doctor for my yearly physical. The nurse started with certain basics, "How much do you weigh?" she asked. "115," I said. The nurse put me on the scale and it turned out that my weight was 150.

The nurse asked, "Your height?" "5 foot 8," I said. The nurse checked and said that I only measured 5' 2". She then took my blood pressure and told me that it was very high. "Of course it's high!" I screamed, "When I came in here I was tall and thin! Now I'm short and fat!" The doctor put me on Prozac.

—The New Outlook – May 2006

NINE REASONS FOR OSTOMY POUCH LEAKAGE

(Marie Siegl)

Poor Adherence to Peristomal Skin – Make sure that your peristomal skin is "bone dry" before applying your pouch. Hold a warm hand over the pouch and stoma for 30-60 seconds after application to warm it and assure a good initial seal.

Wrong Size Pouch Opening – If the size of your stoma has changed (due to postoperative shrinkage or change in body weight) and you have not remeasured and adapted the opening accordingly, undermining of the wafer and leakage may be the result.

Folds or Creases – If folds or creases develop in the skin and leakage always occurs along the crease, wafer pieces or ostomy paste can be used to build up the area. Consult your ET nurse for proper methods.

Peristomal Skin Irritation – Pouches will not stick well to irritated skin. If any of these problems develop, consult your ET nurse or physician at once so that the problem can be nipped in the bud.

Improper Pouch Angle – If the pouch does not hang vertically, the weight of its contents can exert an uneven, twisting pull on the wafer. Ostomates must find an optimal angle for their own individual body configurations.

Too Infrequent Emptying – Pouches should be emptied before they become half full. If they are allowed to overfill, weight of the effluent may break the seal and cause leakage.

Extremely High Temperatures – Wafer meltout may cause leakage in warm weather. Try more frequent pouch changes or change wafer material.

Pouch Wear and Tear – Disposable wafers do wear out. If you are stretching your wearing time, leakage may be due to the wafer wearing out. Change your pouching system more frequently.

Improperly Stored Appliances or Aging Materials – Store your ostomy supplies in a cool dry place; humidity may affect your pouch adhesive. Also, pouches won't store forever. Ask your vendor what the shelf life is for your supplies and keep some extra pouches on hand.

As always, consult your ET nurse if the problem persists!

! HAPPY MOTHER'S DAY - SUNDAY, MAY 13TH !

! HAVE A SAFE AND HAPPY MEMORIAL DAY !

WISE FOOD CHOICES HELP KEEP YOUR HEART AND BLOOD VESSELS HEALTHY

Diabetes increases your chances of having a heart attack or a stroke. You can help protect your heart and blood vessels by eating less of the foods that raise blood cholesterol and your chances of heart disease and by eating more of the foods that lower cholesterol, thereby lowering your risk. Here are some simple suggestions:

1. *Eat less fat-especially saturated fat and trans fats-and fewer high-cholesterol foods.* Saturated fat is found in meat, poultry skin, butter, 2% or whole milk, ice cream, cheese, lard and shortening.
2. *Choose the kinds of fat that can help lower your cholesterol.* If you use cooking oil, choose olive oil or canola oil. Corn oil, sunflower oil, and safflower oil also protect your heart.
3. *Have fish two or three times a week.* Choose fish that is high in omega-3 fatty acids, a type of fat that may help lower blood fat levels and prevent clogging of the arteries.
4. *Use special cholesterol-lowering margarine.* Having two to three tablespoons of a cholesterol-lowering margarine every day can lower your cholesterol.
5. *Eat more fiber.* Oatmeal, oat bran, dried beans and peas, (such as kidney beans, pinto beans, and black-eyed peas). Fruits, and vegetables are good sources of fiber.
6. *Limit your alcoholic beverage consumption.* Drinking more than one or two drinks daily may raise your blood pressure and triglycerides. Males should limit their consumption to two drinks daily, while females should limit their consumption to one drink daily.

18th ANNUAL PENNIES FOR PATIENTS™ DAY

THURSDAY, MAY 10, 2007

SAVE THOSE PENNIES, EVERY ONE COUNTS!

BERRIEN COUNTY CANCER SERVICE
7301 Red Arrow Highway – Stevensville MI 49127
Stevensville: (269) 429-3281 Niles: (269) 683-7460

OUR MISSION: To provide free skilled home nursing services, equipment, information and supplies at cost for cancer patients and their families in Berrien County.
FOR YOUR INFORMATION: at BCCS, we accept donations of ostomy supplies. We would be happy to give these supplies to anyone who can use them. Please have your supply numbers ready and call our Stevensville office to see if we have what you use!

WOULD YOU LIKE TO HELP . . .

Contributions to our non-profit 501(c) (3) corporation are tax deductible.

Donations to our General Fund help to balance our current budget.

Memorial contributions are made in memory of a friend or loved one who has passed away. For memorial contributions, we need to know the name of the person being memorialized as well as the name and address of their next-of-kin so that we may send them a tribute card.

Honorary contributions are made in honor of someone yet living. For honorary contributions, we need to know the name and address of the person being honored so that we may send them a letter of recognition.

Any contribution may be mailed or brought to our Stevensville or Niles offices.

ENDOWMENT FUND

The Berrien County Cancer Service has its own Endowment Fund to ensure that we will be available for as long as needed. Donations to this fund may be mailed or brought to our Stevensville or Niles offices. We have partnered with the Berrien Community Foundation and the Michigan Gateway Community Foundation to enable donors to take full tax credit advantage from the Michigan Community Foundation Tax Credit.

To make this type of donation, please send payment directly to:

Berrien Community Foundation
2900 South State Street, Suite 2 East
St. Joseph MI 49085

Michigan Gateway Community Foundation
111 Days Avenue
Buchanan MI 49107

A letter to be used as a receipt and for tax purposes will be sent for all donations.

Before you follow any medical advice in this newsletter, or any other publication . . . check first with your doctor or ET.

PRINTING COURTESY OF LAKELAND CENTER FOR HEALTH
ENHANCEMENT.