

BERRIEN COUNTY CANCER SERVICE

7301 RED ARROW HWY.

STEVENSVILLE, MI 49127



OSTOMY

NEWSLETTER

January – February 2008



what matters.™

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

An Old Farmer's Advice

Via: Buchanan Senior Chronicle, April 2006

- Your fences need to be horse-high, pig tight and bull-strong.
 - Keep skunks and bankers and lawyers at a distance.
 - Life is simpler when you plow around the stump.
- A bumble bee is considerably faster than a John Deere tractor.
 - Words that soak into your ears are whispered...not yelled.
 - Meanness don't jes' happen.
 - Forgive your enemies. It messes up their heads.
 - Do not corner something that you know is meaner than you
 - It don't take a very big person to carry a grudge.
 - You cannot un-say a cruel word.
 - Every path has a few puddles.
 - When you wallow with pigs, expect to get dirty.
 - The best sermons are lived, not preached.
 - Don't judge folks by their relatives.
 - Remember that silence is sometimes the best answer.
 - Live a good, honorable life. Then when you get older and think back, you'll enjoy it a second time.
 - Don't interfere with somethin' that ain't botherin' you none.
 - If you find yourself in a hole, the first thing to do is stop diggin'.
 - Sometimes you get and sometimes you get got.
 - The biggest troublemaker you'll probably ever have to deal with, watches you from the mirror every mornin'.
 - Always drink upstream from the herd.
 - Good judgement comes from experience, and a lotta that comes from bad judgement.
 - Lettin' the cat outta the bag is a whole lot easier than puttin' it back in.
 - If you get to thinkin' you're a person of some influence, try orderin' somebody else's dog around.

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A Urostomy Experience to Share

Author: Becky Redmond

Via: Belle, Regina Ostomy News/ Evansville Ostomy News, October Issue

I have been reading articles on this site for a couple of years. I had an unusual and frightening experience concerning my urostomy last week that I thought might be of interest to your readers. I have had my stoma for four years now and have had no complications or problems. For the past six months, I had noticed that the skin around my stoma was white and irritated. I tried several different things to clear it up, changing different brands of flanges, changing the flanges more often, drinking more water and cranberry juice, and using different powders but nothing seemed to clear it up. I knew I should get in to see the doctor, but with starting a new job this summer, I couldn't afford to take time off. So I just put up with it, hoping that once I had enough time saved up at work, I could get in for an appointment. Last Thursday, while at work, I went to empty my pouch and it was full of bright red blood. I noticed two small blood clots. This really got my attention and I went directly to the phone and called the doctor who had performed my surgery four years ago. The nurse said she would get hold of him and have him call me back at work. Meanwhile, I continued to work. I started drinking a lot of water and drank a bottle of cranberry juice, thinking this would clear things up. After lunch in the afternoon, I again went in to empty my pouch and this time, it was not only full of bright, red blood but so full of huge blood clots that my pouch wouldn't even drain! I was so scared that I went immediately to the phone and had an urologist come in to look at it. When I took off the pouch, the blood had coagulated so thick the doctor couldn't see the stoma. He peeled off the flange and blood was spurting from a severed artery next to the stoma. He said that because the skin around the stoma had such severe erosion, it caused the breakdown by the artery and it broke loose. He had to put in several stitches to close the artery. I had lost quite a bit of blood, but not enough to keep me in the hospital, so I was released and went home. I was told my urine would clear up by later that evening which it did. It took several days for me to get over the panic of what had happened. Because of this ordeal, I made an appointment with my ostomy nurse. She told me that she recommends people with urostomies wear a convex flange. It keeps the urine from pooling around the stoma area. And, she showed me how to use Stomahesive Powder and paste on the white, moist areas surrounding my stoma. I have also scheduled an appointment with my doctor to have him check what the emergency room urologist did. I was told that in twenty-five years of practice, this was only the second time the urologist had ever seen this happen.

You Are Not Alone

The New Outlook Ostomy Association of Greater Chicago
Via: Milwaukee Ostomy Association

If you have just had ostomy surgery, do you feel as if the bottom has dropped out of your world? Your doctor has just shown you your ostomy for the first time. You cannot visualize how it is going to be from now on. You wonder if you will ever become accustomed to this strange thing. Be assured that you will . . . in time.

An ostomy is a lifesaving appurtenance; you can make of it what you desire. You can hibernate, become a recluse and withdraw into your own small world, or you can take it in stride; learn the proper care of your ostomy; then forget about yourself and enjoy the extra time God has allotted to you.

You will find that as time goes on, the bewilderment will disappear, and the challenge you encountered with the first association of your ostomy will become minimized. You will be delighted to find that you can still lead a perfectly normal life: swim, dance, work and participate in things just the same as before surgery. If ulcerative colitis was the reason for your surgery, then you will be able to do more things than you did before surgery.

The person with a new ostomy has a tendency to become overly sensitive . . . particularly to odor. There are many ways of eliminating all odors should this be a future problem. Most modern ostomy systems are odor proof. This means, if they are used as directed, there is no odor. In addition, there are over the counter internal deodorants as well as many tablets, liquids and powders that eliminate odors in the pouch itself.

Yes, at first you will be all thumbs tackling an ostomy system or irrigation respectively according to whichever ostomy you have. As you become familiar with your prosthetic, care-time will be cut to a fraction of what it is as a "new-bee". With the new ostomy system and supplemental supplies available, your job will eventually become easy and automatic. Do not become discouraged. Summon up all your patience and courage to see you through this phase of your rehabilitation.

Remember, all of us ostomy graduates went through this period of adjustment, and we are available for help whenever needed; if only to bolster your morale; to assist in choosing an alternative ostomy system or irrigation equipment; practical hints on skin care, etc. However, be sure to check with your doctor or WOC nurse first. We do not practice medicine. Most doctors recognize the fact that many people with ostomies soon become near expert in the care and management of stomas.

Fight that depression; it is your mortal enemy. Things are going to get a hundred percent better than they are now. Thank God that you are alive, and take comfort in the fact that "you are not alone."

Ostomy Hints & Tip

Via: Evansville Ostomy Newsletter – October

If your pouch doesn't stick well, are you applying it right after showering in a high-humidity bathroom? Skin must be perfectly dry to receive and hold the appliance. Also, oily products, such as Dove soap, can cause the wafer to loosen and fall off. If you are beginning a new medication for any reason, keep a close eye on your appliance. Contact your doctor immediately if you suspect the medicine is going straight in and out. When taking liquid medicines, do not use a tablespoon instead of the measuring device that came with the medication. Tableware can give as much as 20% larger dose than desired. Washing ostomy bags with Woolite will keep them soft and odorless.

I'VE HAD MY POUCH SURGERY....NOW CAN I EVER HAVE A BABY?

Reprint Permission By: Dr. Scott A Strong, M.D.

Ulcerative colitis and familiar adenomatous polyposis are diseases that most commonly afflict young adults with 50,000 individuals requiring operative treatment of their disease annually. In recent years, the ileal pouch-anal anastomosis procedure (internal pouch) has emerged as the operation of choice for many of these individuals, even though some patients are understandably concerned whether the ileal pouch operation will affect intimacy with their partner or the ability to have a family. The majority of men and women report an improved sexual life following restorative proctocolectomy because of better overall health. However, approximately 2% of men will have difficulties with sexual dysfunction while nearly 25% of women complain of painful intercourse, although this discomfort is usually improved over the pain experienced preoperatively. We also understand that most women with an ileal pouch-anal anastomosis can successfully conceive, yet the infertility rate among these patients is nearly tripled. Women who do become pregnant will often complain of increased stool frequency and worsened control over bowel motions as the pregnancy progresses and the enlarging uterus compresses the ileal pouch. These symptoms are usually tolerable and bowel habits typically return to normal within three months after delivery. Lately, many surgeons and obstetricians share the patients' concern about which mode of delivery should be utilized. While vaginal delivery would possibly benefit the health of the infant or mother, cesarean section might avoid irreparable damage to the ileal pouch, the sphincter muscles, or the nerves that control these muscles. Fortunately, studies from three large centers, including the Cleveland Clinic Foundation, report that bowel function is not significantly altered by the mode of delivery. We are unsure, however, if these short-term similarities will continue to be comparable decades later when delayed effort of vaginal delivery combines with other detrimental factors to cause worsened bowel function. Therefore, we generally suggest delivery by cesarean section unless this approach introduces excessive risk to the infant or mother.

The Most Powerful Prescription

By C. Hagedorn, Evansville Ostomy Association

A positive attitude toward negative situations is one of the most powerful forces in the world. It not only affects how we respond to hardships and difficulties, it can actually help to change the outcome.

This can be seen first hand in many people with ostomies. In addition, many people who have overcome potentially devastating diseases have gone on to lead full, productive and happy lives. The physical aspect of life may be compromised greatly by illness or surgery. However, with a positive mental attitude and willingness to let go of self-pity and bitterness, life goes on and can even be enriched by a painful and traumatic experience.

Focusing on what we have going for us, instead of what we feel we have lost, can change our outlook for the better. Once we accept our situations, we have a starting point for moving forward. Helping someone else in need is a most healing and rewarding experience for both persons. Keeping a strong sense of humor can prevent bad days from snowballing into bad weeks.

Time is too precious to waste on "if only" and "what ifs". What makes me so smart? The caring people, who helped me through my difficult time, laid the groundwork for my positive attitude and changed my life forever.

Factors that Affect Ostomy Function

Via: Ostomy News; Ostomy Assoc. of Okla. City Inc.

Ostomy function may be changed by a variety of medications and medical treatments. This is common. The following are examples:

Antibiotics – These often cause diarrhea, even in patients without an ostomy. Make sure your doctor knows about your ostomy, and inform him/her of problems as they occur. Drink plenty of liquids and drinks that will help maintain your electrolyte balance if diarrhea strikes.

Pain Medications – These are often constipating. Extra irrigations or laxatives or stool softeners might be required for colostomates to combat the side effects of pain medications. Perhaps the dosage of pain reliever may be reduced to eliminate the situation. Again, be sure to drink plenty of liquids.

Chemotherapy – Many cancer patients have follow-up chemotherapy after surgery or as an alternative to surgery. That often produces nausea and/or vomiting. You need to drink fluids that help you maintain your body chemistry balance.

Radiation Therapy – This often produces the same effects as chemotherapy.

Travel – Travel may cause constipation in some people and diarrhea in others. Be aware that these are possibilities. Altered diet when traveling accounts for some of this, plus the excitement of new surroundings. Allow sufficient time for irrigations and take along an antidiarrhea medication.

Antacids – Some types of antacids may cause diarrhea-usually those with magnesium. There are many fine new products on the market. Find out which is best for you. Drink plenty of liquids. You need to maintain your electrolyte balance in case of diarrhea. Tea, orange juice and even Coca Cola are sources of potassium. Bouillon cubes mixed in hot water are a source of sodium. Remember that some of the signs of electrolyte imbalance are irritability, nausea and drowsiness.

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.

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