

BERRIEN COUNTY CANCER SERVICE

7301 RED ARROW HWY.

STEVENSVILLE, MI 49127



OSTOMY

NEWSLETTER

March – April 2008



what matters.™

The Ostomy Garage

Via Twin Tier Ostomy Assoc., Baltimore, MD

I was having problems with my exhaust system. Since it hadn't improved, and in view of the pressure on everyone on pollution, I decided I couldn't wait for my 70,000 mile check-up. My wife and I went to see our M.D. My poor wife had two things wrong - - wax in both ears. I had only one problem - a badly corroded spot inside my tailpipe. Doc said I should see a tune up expert. After extensive tests, X-ray and what-not, it was decided that I had to have an immediate overhaul to my exhaust system. Well, on the 13th day, they towed me into the shop and prepared me for the repair job on the 15th. On the 16th, I found out they had cut out about three feet of my tailpipe and threw the "hole" thing away. They pulled the remainder to the side and made a new opening. In less than four hours, they turned me into one of those sporty foreign jobs with a side exhaust! When I get out of here, I think I'll buy one of those sport Italian cars and roar up and down the main drag like a Ferrari.

Hints From Here and There

Men usually don't carry purses slung over their shoulders, but a camera case never causes a second look. So, if you are needing something to carry some extra ostomy supplies with you wherever you go - try a camera bag.

Change your appliance first thing in the morning, before eating or drinking. Your stoma is more likely to cooperate.

Ileostomates, Attention:

From: Ostomatic news, Dallas, TX

We have all read articles about eating peanuts and other hard nuts, but there are other things we don't read much about. I have trouble with sautéed mushrooms, even though I cut them real small. Raw, in salads, they are crisp and chew up nicely, but when cooked they can cause blockage and should be avoided. Other vegetables: celery should be thinly peeled and then cut into short pieces across any strings that are left; potato skins do not digest; plum peels should not be eaten, green beans and some other vegetables should be chopped into small pieces; and bell peppers can be peeled by toasting like marshmallow over a barbeque or under a broiler till the skins are black. Don't avoid all these goodies, but learn to prepare them so they won't cause trouble. We can use fiber foods like bran muffins with raisins, etc., but we haven't all the "machinery" other people have and must be careful. A good idea is to keep prune juice in the house and the minute you feel a cramp, start prune juice with about a 2 ounce serving, more if that doesn't help. Maybe prevent a trip to the hospital, by being careful. It pays to be cautious, but you aren't a baby who needs pureed food, so enjoy!

Oral Drug Absorption

Author Delceda G. Walker, Rh.P.

Via: The new Outlook

Whenever anyone takes a narcotic pain reliever, one risks the high possibility of constipation. This is not much of a concern for someone with an ileostomy: however, narcotic analgesics will slow peristalsis. People with colostomies that irrigate should be aware of the likelihood of a disruption of their normal elimination pattern. Narcotic derivatives employed as anti-diarrheal agents are often used to alter excessive ostomy output.

Antibiotics decrease the bacterial content, which metabolizes food into fecal matter. When these bacteria are killed, the result is a liquid stool, which can result in diarrhea. Ampicillin, cephalosporins and sulfonamides have the potential to alter normal bacterial flora of the intestinal tract. Ileostomy patients may experience dehydration and electrolyte losses.

The influence of antacids on the ostomy patient depends upon the type of antacid used and the type of ostomy the patient possesses. Sodium bicarbonate antacids; i.e., Alka Seltzer, baking soda, etc., should generally be avoided because of their high sodium content. These antacids may precipitate or worsen congestive heart failure in susceptible patients. The magnesium containing antacids; i.e., Ripan, Maalox, Gelusil, Mylanta, must be used with caution in patients with ileostomies because of their propensity to cause an osmotic diarrhea.

Patients who have issues with excessive ostomy output when taking magnesium aluminum combination antacids, may benefit from a change to an aluminum hydroxide gel antacid or to a calcium containing preparation; i.e., Tums, Titalad, Amphogel. Patients with constipation secondary to aluminum-hydroxide-gel antacids may benefit by using a product containing magnesium.

The ileostomy patient should be closely monitored for electrolyte depletion if a diuretic is necessary. The diuretic induced potassium loss added to the potassium loss of the ileostomy will necessitate potassium replacement. Potassium depletion may be offset by consumption of high potassium foods like fresh fish, nonfat milk, veal, beef, pork, split peas, potato chips and squash. Because of the risk of dehydration, loop diuretics like Lasix and Bumex should be used with great caution in ileostomy patients.

Thiazide diuretics-HCTZ-decrease urinary excretion of calcium. They are sometimes useful in patients who are at high risk for development of calcium stones.

The Ostomy Support Group will meet with the Cancer Support Group at BCCS on the 18th of March and the 15th of April at 1:30 p.m.

Colostomy and Constipation

Via: Greater Cincinnati, Metro MD & Vancouver Ostomy High Life

Way back before surgery, did you go the bathroom after a hot cup of coffee, milk, cold juice, whiskey or beer? Well, whatever made you feel that need then can make you feel the need now. Check it out. See if your irrigation can be helped by some of the things you used to do. Of course, if you have had your colostomy for a number of years, your previous habits may not be the same now. Your body can, however, be trained as it was before, and you can adapt yourself to certain habits which can help you to be in contro. A glass of hot water or juice, or a cup of coffee before a morning irrigation may initiate gut reaction. Also, a glass or two of water, after the water return starts, is usually helpful. If you irrigate before going to bed, a glass of ice water or a cup of hot coffee should get you started. If you have not drunk much water during the day, it would be wise to drink an extra glass or two to make sure your tissues will not absorb so much, or you may be left with little or no return. But what if you don't irrigate? Part of the difficulty in elimination of waste matter experienced by colostomates is due to lack of bulk in the diet. Consumption of white bread, pastry and highly refined foods does not provide the roughage and bulk necessary for proper evacuation of the colon. The deficiency can be overcome in part by the simple addition of bran to the diet. A colostomy is not an illness, so try to eat the same foods you have eaten and enjoyed in the past. If you are on a diet for a condition such as diabetes or high blood pressure, of course you should stay on that diet. Foods can be acidic or alkaline, bland or spicy, laxative-like or constipating. Individuals react differently to food. Try to return to your former, normal diet. Those foods which disagreed with you in the past may still do so. Chew well and see the effect of each food on your colostomy output. To maintain good health, the body requires carbohydrates, protein, fat, minerals, and vitamins. Water is not nutritious but is absolutely necessary. Having a balanced diet is a fitting way to maintain good nutrition and keep bowel activity normal. Every day your body needs meats or fish, dairy foods, vegetables and fruits, cereals and bread, and liquid. Talk to your physician or ET nurse if you have problems.

Ostomy Facts

UOA Findings via: Space Coast Shuttle Blast

Cancer is the leading cause of ostomy surgery, and colorectal cancer alone affects over 130,000 Americans per year. People with an ostomy have to deal with body altering surgery and fears relating to having an ostomy and managing their appliances, worrying about odor, spillage, social activities, isolation, rejection, feeling unclean, and the ability to be normal again. The average age of a person with an ostomy is 68 years. Approximately 57% of people with an ostomy are women and women use substantially more pouches than men.

MORE HELPFUL HINTS FROM HERE AND THERE

Via: Evansville Ostomy News

Emotional pressures and over-fatigue can cause bowel upsets, especially when traveling. Do not allow yourself to become over-tired. For hard-to-deal-with, itchy, irritated skin due to tape burns, scar healing, pouch friction on the skin, etc., doctors often recommend a cortisone cream or ointment. Two products of this nature available without a prescription are: Cortaid or Dermolate. If you like mushrooms, remember they don't digest, so chew them well. Asparagus generates a strong odor in the urine. Yogurt, cranberry juice, and buttermilk help to combat urinary odor. Parsley is excellent in combating fecal odor, besides being a good source of potassium. Keep grape juice in the refrigerator. If you eat something that causes a blockage, just try drinking a glassful. It really works. Never wait until you've used your last appliance before ordering new ones. Keep a list of your equipment, complete with order numbers, sizes and manufacturers. Let a member of your family know where you keep the list so that they can get the necessary supplies in the event of an emergency. Use a round clothespin to roll up your tube of paste. (Works for toothpaste tubes too.) If you still have your rectum and have pain or a full feeling, you may have a collection of mucus which should be washed out. Check with your doctor regarding this. Buttermilk will soothe an irritated digestive tract and will not cause diarrhea or constipation. Colostomates should not use water that is too cold or too hot as it may cause cramps, pain or nausea. Do allow 45 minutes to one hour for a complete return of water. Arrange to sit for comfort and relaxation. Do not hurry through irrigation. Anxiety, frustration and spillage may result. Getting up tight can cause little or no return. Rounding off the square edges of a firm wafer or skin barrier will decrease the chance of the belt catching on the corners. For urostomates, if your drainage tube is clogged, try soaking it in a solution of Tide for about two hours. Then rub the tube between your fingers, insert a baby bottle brush as far as possible, pull out and rinse.

MORE HINTS & TIPS

Fats of all kinds should be kept at a minimum by most ostomates. Fats induce an increased flow of bile into the intestines and make the body wastes more liquid and harder to control. They also tend to produce gas. If you want medicines to work quickly, drown 'em. They dissolve and absorb faster with lots of water. Use a hand mirror for a better view of the stoma. It's about the only way you can see under it.

New Ostomate Corner

Author Mark Shaffer
Via Hemet-San Jacinto, CA

At a recent chapter meeting, a subject came up that I found intriguing. One of the participants in the rap session stated that he found himself depressed and withdrawn even though it has been a year since his surgery. He wondered how long he could expect that feeling and, I think, whether it would go on for the rest of his life. Some ostomates adjust almost immediately. These folks see an ostomy as a cure for an illness that threatened their lives or restricted their activities. Others take a few months, generally feeling better about the situation as soon as they master the fine art of pouch changing and maintenance. For many, ostomy surgery begins a process that appears, and is very close to the grieving process and like any grieving process, the amount of time needed to feel emotionally whole again will vary. It took me almost two years following my surgery before I felt like I had regained my former personality and was ready to move on with my life. So there is no magic amount of time needed to adjust to your new ostomy. Allow yourself the time you need and realize that the feelings of depression and isolation will eventually go away. If the depression is severe, don't be afraid to seek professional help. If your isolation is caused by a lack of confidence in your appliance seek help from an ET nurse. If your appliance is working fine but you still feel separated from others, seek help from other ostomates. Go to a meeting and meet others in the same situation. If you don't already have one, call your local chapter and get an ostomy visitor who can talk to you about how they managed their post-operative emotions. But above all, give yourself time to adjust.

The Overactive Ileostomy

Via; It's In The Bag, Camarillo, CA

An overactive ileostomy can result from a variety of problems. If the small bowel is inflamed due to Crohn's disease, radiation injury, or bacterial/viral enteritis, the output will be profuse.

If there is a narrowing of the small bowel close to the stoma, where the ileostomy goes through the abdominal wall, a pressure backup can lead to explosively high output.

Any food that has a laxative effect should be eliminated or, at best, kept to a minimum. People with lactose intolerance will have output if they use any kind of milk product, including powdered milk, which is found in many prepared foods. Excessive drinking of fluids will also increase the ileostomy output.

An ostomate who has had a gall bladder removed may have an increased output. Medicines to counteract bile salts can be used if the problem is related to gall bladder removal. Many prescription and OTC drugs list diarrhea as a side effect. The ostomate should work with his/her physician to evaluate the problem.

Once disease can be ruled out, therapeutic emphasis can be placed on diet, utilizing foods that decrease output. Bulk laxative can be used with each meal to absorb and solidify some of the liquid output.

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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