Regina and District Ostomy News



SEPTEMBER / OCTOBER

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Meetings are held on the second Tuesday of the month at 7:00 p.m., starting in September, at the Community of Christ Church, 4710 8th Avenue (corner of Arthur and 8th). No meetings are held during the months of January, July and August)

MEETINGS

UPCOMING MEETINGS

September 15 - join us for a ZOOM meeting at 7:00 pm

October 3 - Stoma Stroll "on our own terms"

October 13 - Another ZOOM meeting - TBA

Ostomy | Société Canada | Canadienne des Society | Personnes Stomisées

Sports After Ostomy Surgery

There is no reason to reduce sports activity just because one has had ostomy surgery, though there are some common sense considerations that should be utilized:

A tight and stronglysticking pouch is absolutely necessary. There is no need to do anything extraordinary. One should try to keep one's pouch reasonably empty. One must consider the physical



shape one is in, plus the day-to-day ostomy management.

Avoid sports with high risk of injury, such as boxing. If you insist on contact sports, and some still do, protect yourself. There are manufacturers of special stoma guards which will permit you to do just about anything. Do not allow the stoma to keep you from doing any activities you wish. Of course, if you are 120 years old, you may want to limit your sports activities to those your body would ordinarily tolerate without a stoma.

A sport that stresses your abdominal muscles too much should be avoided, unless you have slowly and deliberately, under the guidance of a knowledgeable professional, built up these muscles to the point where you can easily perform the skills necessary without undue exertion.

When playing ball games such as tennis, you may want to cover or in some way protect your stoma. There are vendors advertising in the *Ostomy Quarterly* that sell stoma caps and stoma guards.



Check your pouch after a strong physical effort. A change of pouch may be necessary due to perspiration and movement. We all get less wear time due to any kind of physical activity. It is better to change the pouch after an exciting, active day than relaxing, yet not putting a strain on your equipment.

Before you go swimming, make sure your pouch is secure and empty. There is no reason that having an ostomy should keep

Continued on Page 4

REGINA OSTOMY CHAPTER EXECUTIVE

	_	
President	Murray Wolfe	584-2111
Past President	Agnes Parisloff	761-0221
Vice President	Diane Weir-Wagg	539-7404
Secretary	Heather Bathgate	949-4664
Treasurer	Gerry Powers	586-7758
Membership Chair	Patty Gianoli	535-8251
Flowers & Cards	Agnes Parisloff	761-0221
Phoning	Gord Kosloski	789-1592
	Diane Weir-Wagg	539-7404
Host	June Crawford	543-2852
	Bill Collie	543-2647
Lunch	Brenda Frohlick	949-2352
Mailing	Brenda Frohlick	949-2352
Newsletter & website	Deb Carpentier	775-1869
	Louise Laverdiere	536-5442
Visiting	Ostomy & Wound Care	766-2271
SASO	Bob Fearnside	924-5993

MISSION STATEMENT

The Regina & District Ostomy Chapter is a non-profit mutual support society for the benefit of people who have had, or are about to have intestinal or urinary diversion surgery.

Our purpose is:

- To help people with intestinal and/or urinary diversions to lead full and productive lives and to provide information and emotional support to their families and caregivers.
- To educate the public about intestinal and urinary diversion surgery.
- To provide trained visitors to those who have undergone intestinal and/or urinary diversions, including preoperative and postoperative visits or phone calls, at the request of the physician or enterostomal therapist.



OSTOMY & WOUND CARE Pasqua Hospital 766-2271

Sheryl Walker, RN BScN WOCC (C) Program Coordinator Lela Mileusnic, RN BScN WOCC (c) Monica Aikman, RN, BScN WOCC (c)

> Ruth Suderman, RN, BScN NSWOC Louise Swan, RN, BScN NSWOC

Karen Kinaschuk, RN, BScN (NSWOC in training)

Christine Day, RN, BScN (NSWOC in training)

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President's Message



Welcome to the start of our "Covid-19" fall! There's some good news in these times of not being able to gather together. We are going to have a "gathering" via a ZOOM meeting on September 15th at 7 pm. Zoom enables us to see each other. ZOOM has become a popular way of connecting with people through a computer, tablet or smart phone. The only item you need to have on your computer to have it work most effectively is a camera, which many computers have but some don't.

Here's how **ZOOM** works:

You will receive an "invitation" by email to attend a Zoom meeting from Murray Wolfe The email will have a link that you would 'click' to start the connecting process. If you don't have Zoom on your computer or device you may receive a message that indicates you can 'download' Zoom for the meeting. Click on the "agree" box.

You will then see a page/box that asks you to "allow" the connection. Click on "allow" You will then see a page/box that asks if you want computer audio. Click on yes. You will then see a page/box that asks if you want to connect to video. Click on yes. Then you wait a bit and Murray will have you join in.

Once you join in you'll see friendly faces. Take a look around the screen with your cursor to find little symbols/icons for a microphone and video camera, which is often in left bottom screen. Also, you will see in one of the corners of the screen a little box that says "Speaker View" or "Gallery View". On Speaker View you will see who is talking at that moment and Gallery View lets you see everyone. It's fun and easy, so please don't hesitate to join in.

We have many of your email addresses but some people have never submitted their email address. Having them is good for communication. If you'd like the option of trying out this Zoom gathering please send your email to Murray at mwolfe@myaccess.ca We would not share any of your email addresses if you have concerns. Most times, when we email the members we "blind" copy people so even other members would not see your email address.

Here's something else we're trying out. Fall is the time we start collecting membership payments for 2021. This year, we are also encouraging payment by **e-transfer**. E-transfer is a relatively easy way of sending money, if you'd rather not mail or drop off a cheque. Gerry Powers and Patty Gianoli will be processing 2021 memberships starting in September through to December. You can see the instructions for e-transfer on page 12.

One of the big challenges of Covid-19 is that our social systems suffer as we keep our circles small and we don't gather in groups. We'd like to thank our sponsors for their ongoing support even in these times when their profile is limited to their stores. Thank you to Jolly's and thank you Medical1.

Letters to the Editor...

Dear Readers, our aim is to provide you with articles that inform and entertain. We're always looking for stories, tips and anecdotes about life and/or living with an ostomy. Here are some ways to contact me or connect with a larger on-line group.

Deb Carpentier

carpentier.deb@gmail.com

Phone: 306-775-1869 www.reginaostomy.ca www.ostomycanada.ca

Facebook coordinates:

Regina Ostomy Chapter group Ostomy Canada Society group Ostomy Canada Parents' group The Colorectal Cancer Association of Canada is a support group for the estimated 22,000 Canadians annually diagnosed with colorectal cancer. Membership is free.

Info is available at their website: www.colorectal-cancer.ca with links to news reports, articles, and other cancer organizations in the field. Support cancer coaches are also available to talk with patients. Or Phone 1-877-50COLON

Crohn's and Colitis Canada

Box 28074 Westgate Saskatoon, SK S7M 5V8 (306) 664-4420

Toll free in Saskatchewan <u>1-844-664-4420</u> www.crohnsandcolitis.ca



Continued from front page

you from swimming. Some people may need to take extra steps, though. If your skin is oily, tape your pouch with pink tape, rather than taking a chance.

Many ostomates water and snow ski. They only take normal, common sense steps when active. The newer ostomy equipment with advanced adhesives works pretty well on its own. Specialty stores have specific swimming wear for ostomates, which are higher cut, with a pocket for the pouch.

In summary, have fun, do the sports you like. You do need to use some common sense, protect your stoma from injury, then go out and do it.

from Swiss Ostomy Website; via S. Brevard (FL) Ostomy Newsletter, via Greater Seattle (WA) The Ostomist, May 2013



YOUNG OSTOMATES SUPPORT & FRIENDSHIP GROUP

Online and Community Group for Young Ostomates! Contact Veronica: <u>jay-lynn13@hotmail.com</u> for more info or check out our facebook group: YOS+FG



- Bi-monthly group get togethers in Saskatoon
- Skype meets offered for those 2020 meetings: outside of Saskatoon
- Sponsorship for all of our activities
- 20-40 branch of the Saskatoon Ostomy Association

Come meet others living well with an ostomy in a relaxed setting! We do various activities that are typically followed by coffee.

January: Glass Fusing @ Wet Paint

March: Pokey's Pinball Cafe

May: Family BBQ at the Forestry Farm

September: Family Swim November: Group Suppe





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Hollister Secure Start Services provide a lifetime of customized support for people living with an ostomy.

We are proud to offer dedicated support for each and every patient along the continuum of care! Once enrolled, a Hollister Secure Start Services Coordinator will call to explain our services, answer any questions, and provide ongoing support.

A Hollister Secure Start Services Coordinator can assist with the following:

- Finding the right products
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- Finding local resources (ie. Retailers and Clinicians)
- Product usage care tips

To learn more about Hollister Secure Start Services, call us at **1.866.789.7574**, or email us at **securestartcanada@hollister.com**, or visit us at **www.hollister.com**.

Start enjoying the benefits of Hollister Secure Start Services today!





More Vitamin D Needed to Reduce Colorectal Cancer Risk



Researchers have reported that markedly higher intake of vitamin D is needed to reach blood levels that can prevent or markedly cut the incidence of breast cancer, colorectal cancer and several other major diseases than had been originally thought. They found that daily intakes of vitamin D by adults in the range of 4000-8000 IU are needed to maintain blood levels of vitamin D metabolites in the range needed to reduce by about half the risk of several diseases -- including colon cancer. They were surprised to find that the intakes required to maintain vitamin D status for disease prevention were so high -- much higher than the minimal intake of vitamin D of 400 IU/day that was needed to defeat rickets in the 20th century.

The study reports on a survey of several thousand volunteers who were taking vitamin D supplements in the dosage range from 1000 to 10,000 IU/day. Blood studies were conducted to determine the level of 25-vitamin D -- the form in which almost all vitamin D circulates in the blood. Most scientists who are actively working with vitamin D now believe that 40 to 60 ng/ml is the appropriate target concentration of 25-vitamin D in the blood for preventing the major vitamin D-deficiency related diseases. Researchers maintain that now that the results of this study are in, it will become common for almost every adult to take 4000 IU/day.



Heaney, Robert, et al., Vitamin D Supplement Doses and Serum 25-hydroxyvitamin D in the range associated with cancer prevention. Anticancer Research. Vol. 31, No. 2 (2011)

Kegel Exercises - Harvard Healthbeat via Metro MD



These exercises won't help you look better, but they do something just as important – strengthen the pelvic floor muscles that support the bladder. Strong pelvic floor muscles can go a long way toward preventing incontinence. While many women are familiar with Kegels, these exercises can benefit men too. To do a Kegel exercise correctly, squeeze the muscles you would use to prevent yourself from passing urine or gas. Hold the contraction for two or three seconds, then release. Make sure to completely relax your pelvic floor muscles after the contraction. Repeat 10 times. Try to do four to five sets a day.

Many of the things we do for fun (and work) count as exercise. Raking the yard counts as physical activity. So does ballroom dancing and playing with your kids or grandkids. As long as you're doing some form of aerobic exercise for at least 30 minutes a day, and you include two days of strength training a week, you can consider yourself an "active" person.



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OSTOMY CANADA SOCIETY

Suite 210 5800 Ambler Drive Mississauga, ON L4W 4J4 e-mail: info1@ostomycanada.ca Toll-free telephone number:

1-888-969-9698 http://www.ostomycanada.ca/

Ostomy Canada Society Mission Statement

Ostomy Canada Society is a non-profit volunteer organization dedicated to all people with an ostomy, and their families, helping them to live life to the fullest through support, education, collaboration and advocacy.



* People living with an ostomy are eligible for the disability tax credit when a qualified medical practitioner certifies the disability tax credit certificate and Canada Revenue Agency approves the application. See our website for details: http://www.ostomycanada.ca/dtc

A joint project by:





8th Annual Ostomy Canada Stoma Stroll

In non-Covid-19 times the Regina & District Ostomy Society meet many times throughout the year, providing support, comradery, education and information to people living with an ostomy and the family and friends who support them.

The Stoma Stroll allows us to raise awareness in the community and raise money that helps support people living with an ostomy here and across the country. The monies we raise are directed to initiatives such as local education seminars, the annual Youth Ostomy Camp, promotion of benefits such as the Disability Tax Credit, advocating for better provincial health coverage, educational support for nurses, and other national and local activities.

This year we can't walk together or share a lunch but we encourage everyone to do "your own walk in your own way". Have your family members or friends join you in a symbolic walk for the 2020 Virtual Stoma Stroll.

Please consider donating on-line at <u>www.stomastroll.ca</u> and look for team Regina & District Walkers or sending a cheque to the National office at #210, 5800 Ambler Dr., Mississauga, ON L4W 4J4



POOR OSTOMY MANAGEMENT IDEAS

The following are poor procedures we found some people implement to manage their ostomy system. They are not recommended because they will yield less than optimal results. Sometimes we all do things that seem logical at the time but inadvertently lessen our quality of life.

Using alcohol regularly to clean the peristomal skin: This may result in itching, skin irritation and damage to sensitive tissue.

Wrapping the drainable pouch tail around the clamp before closing it: This will not make the clamp work better. All it will do is spring the clamp out of shape. Replace your old clamp with a new one every month.

Wearing a pouching system for as long as you can until it leaks . . . the actual goal is to change the skin barrier before it leaks. Two or three times a week is about average.

Using the same pouching system too long:

Seven days is the maximum recommended. Pouches can become saturated with odor, which cannot be removed.

Ignoring skin problems: Always treat any skin irritations when you change your ostomy system. Barriers covering damaged areas are made actually to help heal them if used properly.

Let the pouch get full before emptying it:

Excess weight will separate a two-piece system and will put too much weight on the skin barrier resulting possibly in multiple problems. Empty the pouch at least when it is about one-third full.

Not wearing seat belts in a car: A well-placed and adjusted seat belt should not cause a major interference with stoma function or damage your stoma. In an accident, is possible that your stoma is injured, but it is much easier to repair a bruised stoma than a crushed skull.

Living with unsatisfactory ostomy management: If you are unhappy with how your ostomy system works, make an appointment, now and with an ET nurse. Most ET nurses really have great ideas.

Not coming to your local ostomy association meetings: once you figured out this thing, sharing with others turns out to be a surprisingly good way to keep yourself proactive and happy.

Reprinted from ostomy support group of greater Chicago. The optimist; via Ottawa Ostomy News, Dec 2017





Give the Gift of Dignity

For over 35 years, Friends of Ostomates Worldwide Canada (FOWC) has sent free ostomy supplies to more than 52 countries. Recently, we have sent supplies to ostomates in Kenya and Zimbabwe, and in Central and South America where ostomy supplies are scarce and expensive. Local groups re-distribute these precious supplies to those in need.



FOWC's goal is to raise funds to enable us to ship these supplies. Just one shipment to Kenya was \$4,500.

You can help by sending a cheque payable to FOWC mailed with the form below to the address listed. Online donations are accepted through **www.fowc.ca**.





My Name is Gertrude from Bulawayo in Zimbabwe. On behalf of the Ostomates friends here, we would like to thank you for your kindness in donating ostomy supplies to us. We are really short of words to express your kindness towards us. We pray that you may be blessed

in whatever you do in life.



I would like to improve the Je souhaite faire un don po	life of needy ostomates worldwide ur aider les personnes stomiseés d	e by making a donation. Iu tiers-monde.	
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Management of a Flush or Retracted Stoma

The ideal stoma is one that protrudes above the skin, but this is not always possible and a flush (skin level) or retracted (below skin level) stoma may result. This can happen if the surgeon is unable to mobilize the bowel and mesentery adequately or to strip the mesentery enough without causing necrosis or death to the stoma. (Note: the mesentery is membranous tissue that attaches the intestine to the abdominal wall and provides the intestine's blood and nerve supply.)



Happy stoma



Some causes of stoma retraction after surgery may be weight gain, infection, malnutrition, steroids or scar tissue formation. Stomas that are flush or retracted can lead to undermining of the pouch by the effluent (drainage). This continued exposure could lead to irritated and denuded skin as well as frequent pouch changes. These problems can be very stressful and expensive.

The inability to maintain a pouch seal for an acceptable length of time is the more common indication for a product with convexity. Shallow Convexity may be indicated for minor skin irritations and occasional leakage; Medium Convexity may be indicated for a stoma in a deep fold, with severe undermining and frequent leakage; Deep Convexity is used when medium convexity is not sufficient, stoma retracted, in deep folds or leakage is frequent and the skin is denuded.



[Editor's note: Some of the manufacturers have recently introduced barriers with Soft Convexity, which provide shallow convexity in a less rigid form that conforms better to skin contour changes that occur with movement.]

Pouches designed with convexity are available in both one and two-piece systems. These can be shallow, medium, or deep and can be purchased as either pre-cut or cut-to-fit. Addition of skin barrier gaskets (seals) around the stoma can be cut or purchased pre-cut. You can use one layer or several layers. Products like the Eakin Seal or Coloplast Strip Paste, can be pressed into shape around the stoma to protect and seal.

by Gloria Johnson, RN, BSN, CWOCN; edited by B. Brewer; via UOAA UPDATE; and Middle Georgia Ostomy Rumble; Ostomy Association of North Central Oklahoma, June 2016

REMINDER 2021 MEMBERSHIP FEES ARE DUE SOON!

PLEASE FORWARD \$30.00 BY EITHER
CHEQUE TO PATTY GIANOLI, (MEMBERSHIP CHAIR)
7631 Discovery Road Regina, SK S4Y 1E3

OR E-TRANSFER TO GERRY POWERS

How to set up and Send an Interac e-transfer

Fall is the time we start collecting membership payments for 2021. This year we are also encouraging payment by e-transfer as well as by cheque. E-transfer is a relatively easy way of sending money if you'd rather not mail or drop off a cheque. Gerry Powers and Patty Gianoli will be processing 2021 memberships starting in September through to December.

Here are the instructions for setting up for e-transfer.

Set Up new recipient - First time only (Regina and District Ostomy Society)

Access the **Transfer** section of your banking App.

Select "Add New Recipient" or similar wording, depending on your bank.

The following fields should appear where you enter information:

Name: enter Regina and District Ostomy Society

Email: enter **gpowers@myaccess.ca**

Preferred Language: select English Send Transfers By: select Email

Security Question: enter what city are we located in?

Answer: enter Regina

Send Interact e-transfer

Access the **Transfer** section of your banking App.

Select "Send Interac e-transfer"

Transfer To: select Regina and District Ostomy Society

Transfer From: select the account you wish to use

Amount: enter amount of payment including decimal point your first Name and Surname and reason for payment.ie: Membership, donation

Press "Send Transfer" (some applications have an additional "Send Transfer" button)

Dealing with Itchy Skin

- by Mary Lou Boyer, BSEd. RN., CWOCN, Department of Colorectal Surgery, Cleveland Clinic, Florida

We often have ostomy patients who complain of itching on the peristomal skin. When evaluating the problem, it is important to determine the cause. Itching can occur with leakage of stool or urine, fungal rashes, traumatic removal of the flange, allergic reaction to a product or with other skin disorders. In most cases a little detective work can determine why itching is occurring.

If stool or urine is coming in contact with the skin, refitting the ostomy appliance is the first step.

If the itching is fungal or a yeast infection (a rash with small pinpoint red spots with tiny white heads and is extremely itchy) treatment involves an antifungal powder or cream.

Skin irritation from rapid removal of the pouching system should clear up with normal cleansing and pouch application. (The patient should be coached in removing the appliance slowly, using two hands, one to pull the flange off and the other to hold the skin down.) An allergic reaction to a product will usually show up in the pattern of the offending product. It is very helpful to take a close look at the pattern of the red, itching area and then at the back of the wafer just removed. Finding out what product comes in contact with the skin at that exact same location indicates what product needs to be eliminated or substituted with another product. Sometimes the cause of itching is not so obvious. Not drinking enough 'good' hydrating fluids, [i.e. coffee, alcohol or black tea are not hydrating fluids] using skin cleansers or other products that are drying to the skin and hormone changes are a few examples.

In the case of allergic reaction and when the other causes have been ruled out, Benadryl cream, cortisone cream or cortisone gel may be recommended to help relieve the itching and clear the skin of redness. Ointments are not recommended as they prevent the appliance from adhering to the skin.

Often our patients worry about using a cream or gel on the skin for fear the pouch seal will not stick well to the skin. The instructions we provide are as follows:

Use of cream: Apply a small amount to the peristomal skin. Gently massage the cream into the skin and allow it to remain there for 2 - 3 minutes if possible. (Wipe away urine or liquid stool during the waiting time!) After allowing the cream to absorb into the skin, gently wipe away any excess cream. Wait another 30 - 60 seconds and

then apply the pouching system. If a skin barrier wipe is part of the system you use, simply pat it on the skin instead of wiping it across the skin. Wiping skin preps on the skin may remove some of the healing cream; patting allows the prep to seal over the cream.

Use of gel: Apply a thin layer to the affected area and massage gently into the skin. Allow to absorb for a few seconds, massage any excess into the skin, and then apply the pouching system. The gel dries quickly and does not affect the adherence of the pouch. The one we recommend is Cortizone-10 Anti-Itch Liquid. It comes in a bottle with a sponge applicator top, however it is best to apply the gel using a swab or clean fingertip on clean skin. It can be found next to the other anti-itch creams and ointments on the pharmacy shelf, but can be hard to recognize. The box packaging is rectangular and has a picture of the bottle with the words "Easy Relief Applicator".

Over-the-counter cortisone cream or gel can be used with each pouch change for one to two weeks. It can be applied as often as daily, however we usually recommend every other day at most so the skin is not irritated from frequent adhesive removal. Cortisone cream or gel is not intended for long-term use. If the skin remains very itchy for more than two weeks, you should have the peristomal skin evaluated.

-via Broward Ostomy Assoc., Fort Lauderdale, Florida, the "Broward Beacon"; Okanagan Ostomy News, June 2012; Vancouver Ostomy HighLife - September / October 2012 / via Halton-Peel October 2015

Father In Law Joke

"Mom, Dad, sit down. I have something very important to tell you," said Samantha, upon her return home from college after graduation. "I met a guy who lives near the college that I really like and we decided we are going to get married!"

"Oh Samantha! I am so happy for you!" Gushed her Mom giving her a big hug, "I hope you two will be really happy together! I can't wait to meet him!"

"Tell us more about him" said her Dad, "does he have any money?"

"Oh Dad! Is that all you men ever think about?

That was the first question he asked me about you too!"



REGINA AND DISTRICT OSTOMY SOCIETY MEMBERSHIP APPLICATION

Membership is open to all persons interested in supporting people with ostomy surgery and their fayou can enjoy the benefits of being part of a group in Regina and Saskatchewan through newsletter websites and social media. Members receive the Society's 5 newsletters annually, become member Society and receive the Ostomy Canada magazine. The following information is kept strictly confident	s, meetings, s of Ostomy Canada
 □ Please enrol me as a □new or □renewal member of the Regina and District Ostomy Society. □ I am enclosing my annual membership dues of \$30.00. □ I wish to make an additional donation of \$	f the Regina and
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Bequests & Donations

We are a non-profit association and welcome bequests, donations and gifts. Acknowlegement cards are sent to next-of-kin when memorial donations are received. Donations should be made payable to Regina Chapter at address listed on this page and tax receipts will be issued.

VISITING SERVICES

We provide lay visiting service, at the request of the physician, patient or Ostomy Nurse, either pre-operative or post-operative or both. The visitor is chosen according to the patient's age, gender, and type of surgery. A visit may be arranged by calling the clinic at 306-766-2271.

PRODUCTS MENTIONED IN THIS NEWSLETTER ARE NOT NECESSARILY ENDORSED BY THE REGINA OSTOMY CHAPTER. SEE YOUR DOCTOR FIRST BEFORE TAKING ANY OF THEM!

Charitable Registration No. 119114213RR0001

Moving? Questions? Need Information?

Regina Ostomy Chapter 7631 Discovery Road Regina, Sk S4Y 1E3

(306) 761-0221 or reginaostomygroup@gmail.com

HOSPITAL VISITS

June - 2 colostomy; 1 urostomy

July - 1 colostomy; 1 urostomy