



MAY/JUNE
2022

“BACK IN THE POOL”

Swimming is an excellent exercise and activity you can enjoy with family and friends. So, why are so many of us afraid to get back into the water? Here are some of our issues and solutions.

I'm afraid that my pouch will leak or come off while I'm in the pool.

This is by far everyone's number one concern. The thing to remember is that your pouching system is designed to be leak-free and water-proof, and your wafer adhesive actually gets stronger in water. As long as your seal is strong and intact, strap on your swim fins and jump in. Check out these tips.

1. Don't go swimming immediately after you have put on a new pouching system.
2. Make sure your pouch is empty.
3. Picture framing your wafer with water-proof tape isn't necessary, but may give you the extra confidence you need.
4. Avoid wearing pouches with filters in the pool. Water may get into the pouch through the filter. Filters may become ineffective after they are wet.

I'm concerned that people will be able to see my pouching system under my swimsuit.

Dark coloured suits with a busy pattern will camouflage your pouch better than light colours like white or yellow, which can become almost transparent when wet. Consider the following tips.



1. Women, choose a suit with a small, well-placed ruffle or skirt.
2. Men, choose a suit with a higher cut waist or longer legs. Add a lycra or spandex undergarment. (This can go for women as well).
3. Consider a tank top to cover any scars and /or a waist high stoma placement.
4. Colostomates who irrigate my wish to wear a smaller, non-drainable pouch.

Cont'd on page 4

In This Issue

<i>Back in the Pool</i>	1
<i>Editorial</i>	3
<i>Can Dehydration Affect Your Blood Pressure</i>	5
<i>Miscellaneous Questions</i>	11
<i>The 10 Immutable Laws of Colostomy Maintenance</i>	11
<i>Have You Ever Wondered Why Aluminum Foil Has Two Sides</i>	12
<i>Ask the NSWOC</i>	13
<i>Membership Form</i>	14

MEETINGS

Meetings are held on the second Tuesday of the month at 7:00 pm except for January, July and August. Currently we are not meeting face to face but by **ZOOM**. If you'd like to be part of that please contact Murray Wolfe to ensure he has your email.

May 10 - Hernia Management via ZOOM

June 18 - Summer Social & AGM (11:00-1:00)
Face-to-face Social/lunch & AGM
Where: Hall - 8th Ave and Arthur



REGINA OSTOMY CHAPTER EXECUTIVE

President	Murray Wolfe	550-7958
Past President	Agnes Parisloff	761-0221
Vice President	Patty Gianoli	535-8251
Secretary	Diane Weir-Wagg	539-7404
Treasurer	Gerry Powers	586-7758
Membership	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	536-3319
	Louise Laverdiere	536-5442
Visiting Coordinator	Ruth Suderman	450-4690
Partner & Family Support	Bob Fearnside	924-5993

OSTOMY & WOUND CARE

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Ruth Suderman, RN, BScN NSWOC

Louise Swan, RN, BScN NSWOC

Christi Tsui, RN, BScN NSWOC

Karen Kinaschuk, RN, BScN WOCC (c)

Bobbi Kish, Office Manager

**Camp Registration Deadline
May 15th**

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.

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2022

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www.ostomycanada.ca/camp

Editor's Message



Have you ever seen a longer winter than the one we've gone through? Wow! I'm hoping that the weather is really perk' up by the time you're reading this little piece and that we've got sunny skies coming our way, in more ways than one. If you have a good "winter" story please let me know!!

The Ostomy Canada national webinar April 20th "Battle of the Bulge" was incredibly good. If you didn't get a chance to see it live or watch the recording here's the link. <https://www.youtube.com/watch?v=x0tYXRA8KNw>

BUT if you missed it, we'll be talking about hernias at our May 10th ZOOM meeting, with our own NSWOCs leading the discussion and highlighting some of the webinar footage.

MARK Saturday, June 18 from 1100 to 1 pm on your calendar. Our June meeting will be a face-to-face, lunch included. Let's make it a time to celebrate and see each other. A great way to kick off the summer. SEE YOU at the hall on 8th and Arthur. Just bring yourself and a lawn chair.

What would we do without our ostomy nurses? For most of us they were, and continue to be, a life line to healing and living a full life. April 18-22 was National NSWOC week, so next time you see your NSWOC give them a pat on the back. A little recognition goes a long way.

THANK YOU to all of our own volunteers and all volunteers in the community as part of National Volunteer week April 25 to 30. We maintain strong organizations through the efforts of our volunteers.

Speaking of volunteers, we're hoping someone would like to get a bit more involved. Are you one of the members who receives a phone call before every meeting or event? Well right now our two wonderful telephone callers, Gord Kosloski and Diane Weir-Wagg are looking for another partner to help them with the calling. It's easy and fun, you get to talk to some people and they get to hear from you.

Our very own President, Murray Wolfe, has completed a couple of terms in this role and is now moving over to have Patty Gianoli take over as President of Regina & District Ostomy. A huge thank you to Murray for all his dedication and good humour during these past few years.

On our front page you'll see the Ostomy Canada banner with a new twist, a 60th Anniversary logo. Stay tuned for more information as to how we'll be celebrating starting this fall. All ideas welcome! We've been here a long time supporting people living with an ostomy and their families.

YOUTH CAMP – coming up after being away for 2 years. Deadline for registration is May 15th. Any children between 9 and 18 is welcome, no one would be turned away.

STEP UP for Ostomy is coming again this fall! We had such a successful campaign last year thanks to all of you and others across the country. Good work continues. We'll have a fun campaign this year.

Deb



*"There are no
strangers here, only
friends
who haven't met"*

*Lavada Arnold, Bernie Salyn,
Sheman Skreden, Peter Thiessen*



Cont'd from front page

I'm embarrassed about changing into/out of my swimsuit in the locker room and people noticing my ostomy pouch. If you are a little modest, try to find a spot that is out of the way or a time it is less crowded.

Some tips follow:

1. You may wish to change and towel off in a convenient bathroom stall.
2. Put on a dry, oversized shirt as a cover-up while you change.
3. A dry suit is easier to take off than a wet one. Relax by the side of the pool with a good book or a talkative friend before heading for the locker room.
4. Wear your swimsuit under a jogging suit/sweat pants and don't worry about changing it at all.

What about using the hot tub or Jacuzzi?

Go ahead. Again, as long as your pouch seal is good and your pouch is empty you should have no problems with your ostomy.

General Tips:

- Take it slow the first time out. Save those strenuous swims and dives until later.
- Always leave a little air in pouch, to permit stoma drainage to fall down into the pouch.
- When sun bathing, take a magazine or book to the pool. Lay it open over your pouch to protect your pouching system (wafer) from the heat of the sun.
- Test your pouching system...fill the bathtub with water and soak for a few minutes.
- Don't talk about your ostomy surgery at the community pool. If asked, talk in private.

Source: Ostomy Rumble of OSG Middle Georgia, June 2018 ; Winnipeg Inside/Out March 2022

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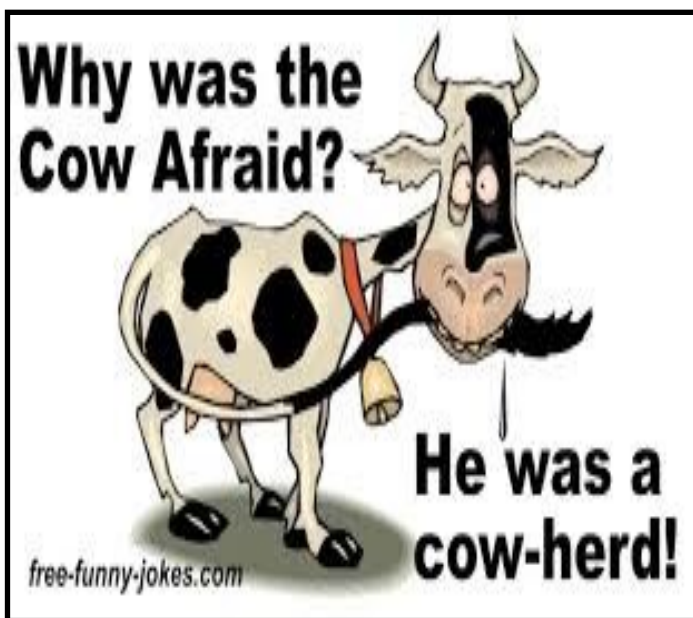
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STEP UP

FOR OSTOMY

Oct. 1, 2022

walk.run.chill.whatever.

Can Dehydration Affect Your Blood Pressure?

Dehydration can be serious. If it's left untreated, it can lead to life-threatening complications, like heat-related emergencies and kidney problems. Additionally, dehydration can cause potentially dangerous changes in blood pressure.

Dehydration and low blood pressure

Low blood pressure (LBP) is when your blood pressure (bottom number) reading is lower than 60 mm Hg. Dehydration can cause LBP due to a decrease in blood volume. Blood volume is the amount of fluid that's circulating in your blood vessels. When you're very dehydrated, your blood volume can decrease, leading to a drop in blood pressure. When blood pressure drops too low, your organs won't receive the oxygen and nutrients they need and you could potentially go into shock.



Dehydration and high blood pressure

High blood pressure is when you have a systolic (top number) reading of 160 mm Hg or higher, or a diastolic (bottom number) reading of 90 mm Hg or higher. Dehydration has been linked to high blood pressure. Although more research is needed, it's worth noting that dehydration can lead to an increase in blood pressure due to the action of a hormone called vasopressin. Vasopressin is secreted when there's a high number of solutes (or sodium level) in your blood, or when your blood volume is low. Both of these things can happen when you lose too much fluid.

When you're dehydrated, your kidneys reabsorb water as opposed to passing it in urine. High concentrations of vasopressin can cause your blood vessels to constrict which can lead to an increase in blood pressure.

Other symptoms of dehydration

In addition to changes in blood pressure, there are other dehydration symptoms to look out for.

These symptoms include: thirst, dry mouth, urinating less often, urine that's dark in colour, feeling tired or fatigued, light headedness or dizziness, confusion.

Additionally, children who are dehydrated may have the following symptoms:

No wet diapers for several hours absence of tears when crying, irritability, sunken cheeks, eyes, or soft spot on the skull (fontanel), listlessness

Causes of dehydration

Other than not drinking enough fluids, there are other possible causes of dehydration. They can include:

Illness. A high fever can lead to dehydration. Additionally, vomiting and diarrhea can lead to a significant loss of fluids and electrolytes.

Increased sweating. Water is lost when you sweat. An increase in sweating can occur in hot weather, during exercise, and if you're sick with a fever.

Frequent urination. You can also lose fluids through urination. Medications like diuretics, underlying conditions such as diabetes, and alcohol consumption can all cause more frequent urination.

When to get medical attention

It's important to seek prompt medical attention if you have any of the following symptoms:

Diarrhea that's lasted longer than 24 hours, inability to keep fluids down, a rapid heartbeat, extreme exhaustion, disorientation, or confusion, stool that's black or bloody.

For low blood pressure

A lower than normal blood pressure reading, without other symptoms, may not be a cause for concern. However, if you have low blood pressure readings along with other symptoms, it's important to get medical care.

Symptoms to look out for include:

Feelings of light headedness or dizziness, nausea, feeling tired or fatigued, blurry vision. Shock is a medical emergency that needs immediate care. Call for help if you have much lower than usual blood pressure and symptoms like: Skin that's cold and clammy, quick shallow breathing, a pulse that's rapid and weak, confusion

Cont'd on page 6

Cont'd from page 5

For high blood pressure

High blood pressure doesn't usually cause symptoms. Most people find out about it during a routine checkup with their doctor. If you regularly take your blood pressure and find that your readings are considerably high, see your doctor.

How much water should you drink each day?

Daily fluid recommendations can depend on several factors, including things like: age, sex, weight, your overall health, weather conditions, activity level, pregnancy or breastfeeding

According to the Mayo Clinic, a good goal to aim for is to drink at least eight glasses of water a day. If you find it hard to drink plain water, you can also stay hydrated by drinking:

Water infused with slices of fruit, like lemon or cucumber, sugar-free sparkling water, smoothies made with fruits and vegetables, decaffeinated herbal tea, milk, low sodium soups. Also, remember that you can get water from some food sources, particularly fruits and vegetables.



Tips to Stay Hydrated

Always drink when you feel thirsty. Remember to drink more water when you're being physically active, in a hot climate, or have a fever, vomiting, or diarrhea. Carry a water bottle with you as you go about your daily activities. Choose water instead of sugary sodas, energy drinks, sweetened beverages, or alcohol drinks. □

Healthline - Source: Vancouver Ostomy HighLife ; Winnipeg Inside/Out March 2022



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WHO WE ARE



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Société Canadienne des Personnes Stomisées

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Collaboration.

Support.



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* Did You Know?

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MISCELLANEOUS QUESTIONS

Via Dallas (TX) Ostomatic News



1. **Do skin wipes make the pouch stick better?** No, the wipes that are generally classified as “skin preps” are not adhesive. They are designed to provide a protective layer to the surface of the skin. This helps to make the removal of adhesives easier on the skin. The use of these types of products may actually decrease the wear time of some extended wear products.
2. **Does paste make the pouch stick better?** No, paste helps to prevent liquid drainage from getting between the skin and the skin barrier. This protects the peristomal skin and often extends the life of the skin barrier. Paste is NOT an adhesive and too much paste can actually interfere with a good seal.
3. **When should skin barrier powder be used?** Skin Barrier Powder - such as Stomahesive or Adapt Powder is used when the peristomal skin is moist due to irritation. When the skin has recovered and healed, the powder should be discontinued. If another type of powder - such as an antifungal powder - has been prescribed, it should be used according to instructions.
4. **How often should a pouching system be changed?** The answer is “it depends.” It depends on many factors such as type of discharge, skin condition, type of skin barrier used, location on the body and construction of the stoma. The key is to achieve predictable wear time. Changing a pouch twice a week is very acceptable.
5. **What do I need to think about before returning to work?** Make sure you have a release from your physician to return to your job, especially if you do a lot of physical work. It is a good idea to have an emergency kit available at work in case you need to change your pouch.
6. **Do I need to tell people that I have had ostomy surgery when I return to work?** The choice is yours! With a secure ostomy pouching system, nobody needs to know that you have an ostomy unless you want him or her to know. Depending on the situation and your relationship with the person you may wish to share general information about your surgery. Most people are very understanding.
7. **How often should I empty a pouch?** The type of ostomy and the amount of output will influence how often emptying is necessary. You will want to empty your pouch regularly throughout the day - usually when it is 1/3 to 1/2 full. It is not a good idea to let your pouch overfill.

Source: Ostomy Association of North Central Oklahoma Ostomy Outlook - March 2022; Winnipeg Inside/Out March 2022

THE TEN IMMUTABLE LAWS OF COLOSTOMY MAINTENANCE ,

Law 1 – Poop happens.

Law 2 – Poop happens constantly.

Law 3 – The probability of your colostomy going off during changing is directly proportional to the expense of the carpet or bedspread beneath you.

Law 4 – Once on the carpet or bedspread it is impossible, no matter how solid it looks, to pick it up with your bare hands. Once on your hands, Law 5 becomes self-evident.

Law 5 – Poop is the stickiest substance known.

Law 6 – The probability of getting toilet paper off the roll with one hand is inversely proportional to the amount of poop on the other hand.

Law 7 – The probability of remembering to get toilet paper in advance of emptying your bag is inversely proportional to how far the toilet paper dispenser is located behind and below you.

Law 8 – The probability of getting a useful piece of toilet paper off a large commercial roll is $p=0.0000001$.

Law 9 – Poop exhibits unique gravitational forces that allow it to mysteriously attach to anything within a metre of the toilet. Anecdotal evidence suggests this is related to Law 5.

Law 10 – No matter how much you chew, it is impossible to adequately masticate corn.

by John Lafferty, member of H&DOA; originally published in the Hamilton newsletter, May 2013, via Niagara Ostomy Assoc, June 2013

Have you ever wondered why aluminum foil has two sides?

It's a common question and one that we've been too afraid to ask our mothers: Should we use the shiny or the dull side of aluminum foil when we cook? And have we been doing it wrong this entire time?!

Concerned cooks can breathe a sigh of relief: As it turns out, there's no "correct" side of aluminum foil to use when cooking so using it on either side is not one of the cooking mistakes that could ruin your food. According to the Huffington Post, they're both equally effective at heating your food—so just choose whatever side you prefer.



If there's no trick to it, then why, exactly, does aluminum foil have a shiny and a dull side in the first place? Experts at Reynold's Kitchen say that the difference between the two sides is due to a manufacturing process called milling, during which heat and tension is applied to stretch and shape the foil. Two layers of foil are pressed together and milled at the same time, because otherwise, it would break.

"Where the foil is in contact with another layer, that's the 'dull' side," Reynold's explains. "The 'shiny' side is the side milled without being in contact with another sheet of metal. The performance of the foil is the same, whichever side you use."

But pay attention if you are using non-stick foil; in that case, there is a difference between the two sides. Since the non-stick coating is only applied to one side, you'll want to use the dull side. Side note: There will be a label that designates the "non-stick side" in case you forget.

Aluminum Foil can be used for more than just cooking or storage of food!

Aluminum foil can be used in a decidedly "alternative" way for the most common household chores. Check out these amazing aluminum foil hacks!

1. aluminium foils clean the silverware – To clean the silver without using chemicals on the market, it is necessary to use tinfoil. You have to put it with the shiny part upwards in a container, pour in boiling water and baking soda and let forks or necklaces soak in it. The aluminium foils will make the baking soda effect much more intense.

2. aluminium foils scare the birds – When the balcony is "invaded" by pigeons and birds, which do nothing but leave their guano on the railing, you can use tinfoil to chase them away. You have to cut strips of 30 cm and tie them with a string to the "incriminated" surface. In this way the scared birds will fly away.

3. aluminium foils iron delicate clothes – aluminium foils used in the kitchen can resist heat and can therefore also be used for ironing delicate items of clothing. Just place them on the dress from which you want to remove the folds and you will have a sensational result: the fabric will remain intact.

4. aluminium foils clean the barbecue – The barbecue is one of the most difficult things to clean as food leftovers ends up charring on the grill. To eliminate dirt, you can rub it away after making a small ball of aluminium foil. The only thing to do next is that you will have to wash everything with hot water.

5. aluminium foils move heavy furniture – Who has never been able to move heavy furniture with only the strength of the arms? The remedy to do it effortlessly is to use tinfoil. You will just have to place it under the feet of the furniture, so that they can slide with ease on the floor.

6. aluminium foils soften the hardened sugar – When the brown sugar has hardened and you do not know how to bring it back to normal, you can use tinfoil. The brown sugar must be wrapped in aluminium foil and placed in oven at 150 degrees for 5 minutes: it will immediately return to its normal state.

ASK THE NSWOC

How to outsmart gas with ileostomy?

After getting an ileostomy, gas tops many patients' list of worries. Gas may be the worst right after surgery and get better over time as swelling in your abdomen goes down. To better control gas, you can also do these things:

- Don't eat or drink too many gas-causing foods and drinks such as eggs, cabbage, broccoli, onions, beans, milk, bubbly drinks, and booze.
- Don't skip meals. Doing so can aggravate your small intestine and cause even more gas.
- Eat several small meals throughout the day.
- Fresh parsley, yogurt and buttermilk are foods which help to reduce both gas and odours.
- Many pouches contain a filter so gas can empty and keep your pouch relatively flat.
- Avoid straws as you tend to gulp more air.



By Karen Kinaschuk



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REGINA AND DISTRICT OSTOMY SOCIETY MEMBERSHIP APPLICATION

Membership is open to all persons interested in supporting people with ostomy surgery and their families. As a member you can enjoy the benefits of being part of a group in Regina and Saskatchewan through newsletters, meetings, websites and social media. Members receive the Society's 5 newsletters annually, become members of Ostomy Canada Society and receive the Ostomy Canada magazine. The following information is kept strictly confidential.

- 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 \$_____, to support the program and activities of the Regina and District Ostomy Society and Ostomy Society Canada.
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A charitable tax receipt will be issued for all additional donations of \$20.00 or more. Please make cheque payable to: **Regina and District Ostomy Society** and mail with this form to: 7631 Discovery Road Regina, Sk S4Y 1E3

Bequests & Donations

We are a non-profit association and welcome bequests, donations and gifts. Acknowledgement 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.

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**

Moving? Questions? Need Information?

Regina Ostomy Chapter

7631 Discovery Road

Regina, Sk S4Y 1E3

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

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**

VISITING PROGRAM

March & April

Colostomy - 2

Ileostomy - 1

Urostomy - 1

Other - 1