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Managing the Challenges of Pancaking

via UOAA E-News October 2024 and UOAA Blog Post

By Janet Stoia Davis RN CWOCN FCN and Janice C. Colwell APRN, CWOCN, FAAN



Image by: FreePNGing

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MEETINGS

Meetings and gatherings are held at the hall at Community of Christ Church on Arthur and 8th. Throughout the year we will have a combination of face to face and ZOOM or a hybrid of both for our get togethers. We look forward to meeting you.

UPCOMING MEETINGS & EVENTS

May 3 - Spring into Education 11:00 - 3:00 (Arthur & 8th)

June 4 - Pizza & Pasta Youth (see poster)

October 4 - Step Up for Ostomy

Our Appelle Valley Image by: PublicDomainPictures from Pixabay

What is pancaking?

For a person with a fecal stoma, emptying an ostomy pouch can at times be slow, messy and frustrating—especially if they find that stool is stuck at the top of the pouch around the stoma. When stool is thick and dry, a phenomenon called pancaking may occur. Thick stool exiting the stoma that does not fall to the bottom of the pouch can form into the shape of a pancake at the top of the pouch, hence the term “pancaking.”

” Why can pancaking be a problem?

Thick pasty stool can remain over the stoma, making its way under the pouch adhesive and potentially lifting the adhesive/pouch. When this occurs, the stool contacts the skin around the stoma causing leakage. This leakage can damage the peristomal skin, lift the pouch from the skin, and result in odor and seepage of stool onto clothing.

Who is at risk for pancaking?

Anyone with a fecal stoma can experience pancaking, but it is more common among people with a colostomy. Colostomies are created in the colon or large intestine. The colon’s job is to absorb or “suck” water out of the intestinal contents, and as stool travels through the colon it becomes thicker. By the time it reaches the final section of colon on the left side of the body, it can be pasty and dry. Many colostomies are created on the left side of the colon, making the stool pasty, dry, and thick. When stool is expelled from the stoma, it may not move away from the stoma, getting stuck at the top of the pouch leading to pancaking.

Individuals with ileostomies can also experience the challenges of pancaking, but it is less common and will depend on the consistency of their stool. In some cases, form-fitting clothes may constrict the pouch and flatten the stool, preventing it from falling to the bottom of the pouch.

Cont'd on page 3

"Greetings from Patty"



Hello Friends,

The week of April 27 to May 3 is National Volunteer Week. The theme this year is Volunteers Make Waves. Together, we create ripples of change. Each individual contribution, big or small, creates momentum and inspires, joining a wave of positive change.

At Ostomy Saskatchewan we have an amazing group of volunteers. We are especially appreciative of a core group who graciously volunteer every time we ask to help put on a big event. Such an event would include our **Education Day scheduled for May 3**. Lots of planning goes into these events. This includes getting food, organizing speakers, advertising, etc. Our hope, when we plan these events, is that we will have a big turnout. Of late, the attendance at such events has been very low. In order to keep this organization vibrant, we need to continue to support these events. Whether you have had your ostomy for six months or 36 years, everyone brings value to the table; to gain support or give support. I hope all of you will make an effort to attend our events.

SAVE THE DATE: Ostomy Canada's annual awareness campaign & fundraiser **Step Up** is set for Saturday, October 4. We are in the initial planning stages and are organizing an event in both Regina and Saskatoon. Stay tuned for further information.

Summer youth camp is right around the corner. You will see a poster further in the newsletter for a *Pizza Pasta Fundraiser on June 4*. We have three young people who are very excited to have the opportunity to attend camp. The camp is in Bragg Creek, Alberta and is an Easter Seals camp thus the cost is expensive at \$1,250 plus travel costs. This fundraiser will help with their registration fees and also allow us the opportunity to gather for a social event. 50/50s will also be sold to further support campers. Looking forward to seeing you there!

"There is no better exercise in your heart than reaching down and helping to lift someone up." Bernard Meltzer

MISSION STATEMENT

Ostomy Saskatchewan is a mutual support group 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 someone who has undergone intestinal and/or urinary diversions, including preoperative and postoperative visits or phone calls, at the request of the individual, an ostomy nurse (NSWOC) or physician

Get The Support You Need!

OSTOMY VISITOR PROGRAM

Speak to a Certified Ostomy Visitor for personal support with your ileostomy, colostomy, urostomy or j-pouch. Visits are available at the hospital, in-person, phone & virtually. It could be either pre-operative or post-operative or both. At times you may just have a few questions or at other times you may be 'working' your way through something and it's good to talk to someone who can relate to your situation personally. All you have to do is ask.

A visit may be arranged by calling the Visiting Coordinator, Ruth Suderman at 306-450-4690 or emailing sudermanruth@gmail.com



Article continued from front page

What can be done to decrease instances of pancaking?

For some people, increasing fluid intake can make the stool less thick and pasty, which may allow it to travel away from the stoma and drop to the bottom of the pouch. Stool softeners can be taken orally to increase the moisture content of the stool which may also facilitate the movement of the stool into the bottom of the pouch. If an individual's clothing fits snugly over the pouch, wearing a looser fit may also help decrease the incidence of pancaking.

Some pouching systems have a built-in filter that helps air escape the pouch and deodorizes the gas. However, if the filter removes all air from the pouch, it may create a suctioned environment that makes it difficult for stool to slide to the bottom. A sticker for the gas filter (provided with some pouches for underwater use) or a piece of tape over the filter may help avoid the vacuum effect in the pouch. This will vary by individual.

The use of an in-pouch lubricant can facilitate the movement of stool away from the stoma and into the bottom of the pouch. These lubricants can be applied to the inside of the pouch one or more times per day. This creates a slick surface on the inner lining of the pouch to help thick stool slide to the bottom of the pouch and prevent it from pancaking over the stoma. Lubricants can be used in both drainable and closed end pouches.

In addition to pancaking reduction, a lubricant may also make pouch emptying faster and cleaner. Several companies make lubricants that can be used in the pouch. A new company, Revel, has placed special emphasis on pancaking and drain time reduction. Revel created a new type of lubricant using a technology called LiquiGlide that creates a long-lasting slippery surface on the inside of the pouch. Their product, *It's in the Bag*, can last up to 24 hours, alleviate pancaking, and decrease pouch drain time. This product has been used by people with a fecal stoma who reported a decrease in pancaking and emptying time as well as leaving behind an overall cleaner pouch.

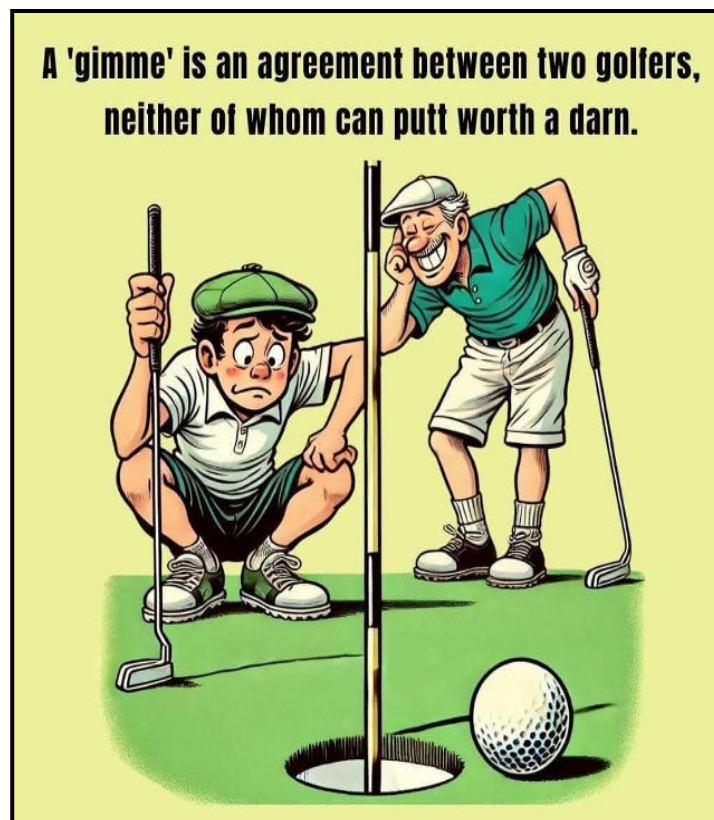
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“People living with an ostomy are eligible for the Disability Tax Credit (DTC) when a qualified practitioner certifies the DTC Application and the CRA approves it.”

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We want to congratulate Ms Sydney Dorosh on her recent graduation as a Registered Psychiatric Nurse from the Saskatchewan Polytechnic. You might ask, “who is Sydney Dorosh?”



We first met Sydney over ten years ago, when she was a 10 year old who suffered with gastrointestinal issues from the age of nine months. She had ostomy surgery a few weeks prior to her 11th birthday. Her

Mom, Corry, had done her research and knew that there was a camp for kids who had experienced diversionary bowel or urinary tract surgery. She knew there were other kids going to that camp and what Syd needed was to spend time with those kids in an environment that was confidence building and where she wouldn't feel “different”. Ostomy Canada and the community support groups financially support the camper families so that no child is turned away. It was the Regina and Saskatoon Ostomy groups, now Ostomy Saskatchewan, who supported the Dorosh family through those years of camp.

She came home a more confident kid with a better attitude towards her medical issues and requirements. She has continued to stay in touch with kids she connected with at camp. The family found out about camp from the Ostomy Canada Facebook group and just asking many questions about kids and ostomies as Syd was the first in Saskatchewan who got a cecostomy. At that time, they didn't have local supports or doctors who knew how to handle that type of surgery. Sydney was gifted an anatomical doll, that had a cecostomy, from the Regina Chapter and learned to explain her tube to doctors and nurses as no one had seen it before.

Sydney has gone back to camp as a volunteer since she graduated as a camper at 18 and wants to return as a volunteer again. She now works on the pediatric mental health unit at the General Hospital.

Congratulations Sydney Dorosh from all of us at Ostomy Saskatchewan



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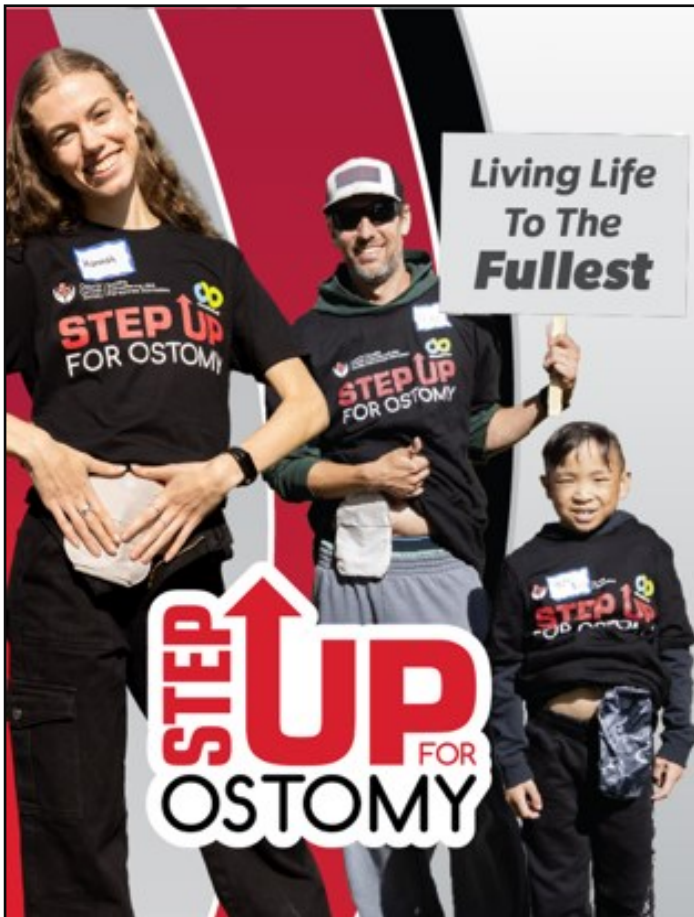
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Discarding Pouches Discreetly But With Dignity

via UOAA E-News November 2024 and UOAA Blog Post
By Lynn Wolfson, UOAA Director



As ostomates, we often feel self-conscious in public but deserve the same respect as anyone else. We don't want to be singled out or face discrimination because of our ostomies. However, we also have a responsibility to leave a positive impression on others and the places we visit.

Recently, while flying, I had an unusual interaction with an airline attendant. Before I entered the restroom, she approached me to ask if I needed anything. Though her inquiry seemed strange, I assured her I was fine. After I left the restroom, she asked if I had disposed of any bodily waste in the trash. I was surprised by the question and said I hadn't.

As a teacher, I saw this as an opportunity for education. I asked the flight attendant why she had asked such a personal question. She explained that she had noticed my ostomy through my clothing and that her grandmother had also had an ostomy, often discarding used bags in the trash without proper disposal. Her concern clarified her question. While the inquiry was inappropriate, it underscored how improper ostomy hygiene can reinforce negative stereotypes.

I explained that her grandmother likely had a colostomy, while I have an ileostomy with a drainable pouch. I suggested that her grandmother should have used a disposable bag, like a grocery or Ziplock bag, to seal or knot before disposal. This practice helps reduce mess and odor and allows ostomates to discreetly dispose of their pouches. It's important for all ostomates to follow this practice at home, in others' homes, and in public spaces. Many manufacturers provide plastic bags with the pouches for this purpose.

It's crucial for us to carry or request a bag for disposing of our ostomy pouches and to knot these bags before discarding them.

For new ostomates, if you find yourself in a public restroom without disposal bags, wrap your used pouching system in toilet paper and place it in the wastebasket. To minimize odors, consider using one of the many deodorizers available from ostomy supply providers. Some deodorizers are drops that can be added to the bottom of the pouch, while others are air freshener sprays.

To minimize splashing when draining a pouch, try sitting backward on the toilet seat and placing toilet paper in the bowl before draining. It's worth noting that at past UOAA conferences, hotels have commented on how clean and hygienic UOAA groups are for their cleaning staff compared to the general public.

Following my experience, I've advocated with the airline to consider adding a universal sign in the lavatories to provide guidance on the proper disposal of medical supplies. It would be beneficial if airplane restrooms included bags for this purpose, which could also be used for baby diapers, sanitary napkins, and tampons.

In summary, it's crucial for us to carry or request a bag for disposing of our ostomy pouches and to knot these bags before discarding them. ■

SIGNS OF DEHYDRATION any time of the year

- *Light-headedness
- *Disorientation
- *Weakness
- *Hyperthermia (overheating)

Most people don't think to drink unless they are thirsty. But thirst is not always the best indicator that your body's fluids need replenishing.

And if you drink water to quench a thirst, chances are you will feel satisfied before your body has had enough hydration. That's because consuming pure water may depress the urge to drink.

Add the electrolyte sodium, and you restore the salt-dependent thirst drive. Sodium helps suppress the kidney's urine output, which means that you retain fluids for a longer period of time.

Drink some kind of liquid first thing in the morning to bring hydration levels up.

Take frequent drink breaks if you exercise, and drink fluids after you exercise to replace those you have lost.



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Now What???

(Every edition we'll add some new questions so be sure to review.)

NOW WHAT??? (Every edition we'll add some new questions so be sure to review.)

So, you're home from the hospital and everything feels a bit overwhelming and confusing. There's a pretty good chance your medical support sent home a package with information that can help you through these early days. Take a look for that too.

Initially I remember thinking these questions. Will people know by looking at me? What will I wear? Do I smell? (because I think we all think we smell in the beginning.) Can I eat normal food? Can I still have sex? All of these questions that make us worry if life will ever feel normal again. The internet has a wealth of information. If you're not familiar with how to search for information perhaps you have a family member or friend who can assist you. Here are some questions that may come up for you. Also, check out the Ostomy Canada Medical Lifestyle Advisory page that has more questions & answers. https://www.ostomycanada.ca/medical-lifestyle-advisory-committee-questions/?mc_cid=514ae9bbb0&mc_eid=5b3301ccc4

What should I consider in my preparations for air travel? (going through Security, document that explains my disability, use of a leg bag, access to bathrooms, planning the amount of supplies). The generally acknowledged 'rule of thumb' for planning the number of ostomy bag changes is double what you would normally use. Some, if not all, supplies should be kept with you in your carry-on bag.

Canadian Customs agents and security have had training over the past few years on people who have an ostomy. You can advise security staff that you have an ostomy and you can choose a private pat down versus the scanner or public pat down. Ostomy Canada (Ostomy Sask) also has travel cards that explain that you have an ostomy which you can show agents.

You are entitled in Canada to carry an additional third small bag for medical supplies on the aircraft. Some flights with discount fares such as the "UltraBasic" on West Jet or Air Canada are now charging for the carry-on suitcase, but medical supplies are still exempt. See the link for the security and regulations for Canada: [Medication and Medical Items - CATSA](#)

What if I'm challenged by airline staff on carrying the "medical bag"?

Loosely quoting a friend, "An airline steward cannot make decisions about our constitutional rights. I was asked once, and I just said that I have a legal disability and cannot be separated from my medical bag in case of a mishap (epic disaster). They can check with their legal department. That ended the conversation."

How do I prepare my appliance for swimming? Some people take no additional steps before swimming and others may use tape along the sides of the adhesive. There are belts you can use as well to keep the appliance close to your body.

Activity and exercise? Am I good to go? Your physician will give you a guideline as to when it's safe for you to return to your previous activities. Don't forget we have physiotherapists and occupational therapists to go to for direction. I found this website interesting.

<https://www.colostomyuk.org/wp-content/uploads/2019/12/Active-Ostomates-Sport-and-Fitness-after-stoma-surgery-2019.pdf>

I forget how to change my appliance. What are the steps?

If you have an information booklet from the hospital or clinic when you were discharged, check there for some instructions. Here's a link to instructions and another link to a video as to how to change your appliance. If you need to call your NSWOC or who is your contact person.

<https://www.ostomycanada.ca/ostomy-care-basics/general-management/changing-your-pouching-system/> and <https://www.veganostomy.ca/?s=how+to+change+my+appliance>

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Partner & Family Support	Bob Fearnside	306-924-5993

Letters to the Editor . . .

Dear Readers, our aim is to provide you with articles that inform and entertain. Every personal story has an impact for others. Please consider writing your story, I'd be happy to assist. Here are some ways to contact me or connect with a larger on-line group.

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carpentier.deb@gmail.com

Phone: 306-536-3319

<https://ostomysaskatchewan.ca>

<https://www.ostomycanada.ca>

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Membership is open to all persons interested in supporting people living with an ostomy and their circles of support. As a member supporter you can enjoy the benefits of being part of Ostomy Saskatchewan as well as Ostomy Canada. You'll receive newsletters, opportunities for webinars, a magazine and the support of people here and across the country. You will be supporting an organization that is striving to be the voice for people living with an ostomy in Canada.

A \$30 "supporter" donation will give you all the benefits of membership. \$25 will go to Ostomy Canada and any donation above \$25 will allow us to continue to support our local group with support and advocacy. No donation is too small or too big. You will receive a tax receipt for your entire donation.

Your financial contribution supports many initiatives including supporting the youth camp, an education fund for our ostomy nurses, the visitor's program, educational seminars, outreach and training programs. We have regular 'get togethers and updates will be listed in the newsletter and/or on the website (<https://ostomysaskatchewan.ca>).

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- Use directly on irritated skin

Available Sizes:
SNS20630 - 1" arc
SNS21130 - 2" x-tra wide arc
SNS22222 - 1"-1/2 circle arc

Ask your supplier to bring in these products for you!
For more information to acquire locally or to request a sample please call
In Canada Contact - Peter West
519-726-5959 | peter@westcaremed.com

Safe n Simple
Clean, Comfortable, Certified.

844-767-6334
www.sns-medical.com

Stretch Your Dollars with our High Quality, Cost Effective Products!

Colorectal Cancer Canada is the nation's non-profit colorectal cancer patient organization. They are dedicated to colorectal cancer awareness and education, supporting patients and caregivers, and advocating on their behalf. Their goal is to reduce the incidence and mortality of colorectal cancer in Canada and to improve the quality of life for patients, their families and caregivers.

Email: info@colorectalcancercanada.com Website:
<https://www.colorectalcancercanada.com>

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

