



# THE Ostomy Association of Dallas OSTOMATIC NEWS



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*The Ostomy Support Group is a volunteer-based health organization dedicated to assisting people who have had or will have intestinal or urinary diversions.*

*Regular meetings are held on the 3rd Tuesday of each month (except December) at 7:00 P.M. in the Meadows Classroom C in the Margot Perot Building at Texas Health Presbyterian Hospital, 8200 Walnut Hill Lane, Dallas, Texas.*

*Directions to the meeting room: Park in parking lot 11 (behind the Perot building) on the lower level (second level down), come into the building and turn right down the first hall and the classroom is on the left. If you come into the building from the front of the building or from a different level of parking lot 11, take the South elevators to the lower level. Turn left out of the elevator and take the first hall on the left to the Meadows Classroom C.*

## NEXT MEETING PLANO JANUARY 9, 2018

MEETING START TIME  
12:00 NOON  
SPEAKER WILL BE  
PHARMACIST RANDY SHULKIN

## NEXT MEETING DALLAS JANUARY 16, 2018

MEETING START TIME  
7:00 P.M.  
GENERAL MEETING

### IDENTIFICATION STATEMENT

The Ostomatic News ..... Ostomy Support Group  
Published Monthly

P.O. Box 262202  
Plano, TX 75026

### Contacting Enterostomal Therapy Nurses

If you have a need to contact an ET Nurse, we suggest that you call the American Cancer Society, the Visiting Nurse Association, or one of the major hospitals of Dallas.



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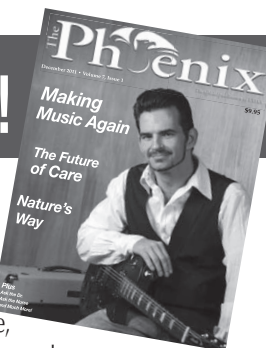
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## **LAST MEETING**

I want to thank Ostomy nurse Gwen Spector for covering the Plano meeting for me in December. Gwen got some ideas from the group about future meeting topics. If you have an idea for a meeting topic or you just want us to cover something let me know.

The Dallas meeting in January will be a general meeting. Pharmacist Randy Shulkin of Medical City Plano will speak at the Plano meeting. Randy has spoken to the group several times. He always gives an informative and topical talk. Please try and attend.

As always...thanks for your support...  
Dave

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## **LONG-TERM MEDICATION**

The question is whether or not it is okay to take one Imodium pill on a daily basis?

Yes, it is safe to take anti-diarrheal agents long term. These medications act to slow down your intestine so there is time to absorb nutrition and fluid.

There are no long-term adverse side effects that should worry you, especially if you are not having short-term effects such as fatigue or dry mouth.

Editor's note....always check with your doctor.

Adapted from a question and answer in Dr. Rafferty's column...The Phoenix

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## **FUNGAL OR YEAST RASH**

- A. Wash and dry the skin.
- B. Apply a layer of Antifungal powder (Mitrazol, Micro-Guard, Zeasorb AF-2% miconazole nitrate) brush off excess.
- C. Spray 3M No Sting Barrier Spray and allow drying for 30-60 seconds.
- D. May repeat steps A and B, allowing drying between applications.
- E. Apply the pouch as usual.

by WCON Shirley Dunbar

# DIGESTIVE ENZYMES

Digestive enzymes are important to everyone. They are especially important to colostomates and ileostomates. Dr. Lois Vanderhoof said, at one of our support group meetings, that we don't get or have enough enzymes. Age depletes enzymes and our soils are depleted so food contains fewer enzymes, we eat more dead and devitalized foods that contain no enzymes. Digestive distress, illness, trauma, and prescription drugs all reduce the amount and types of enzymes we get.

A trip to the health food store for some supplemental enzymes might help your digestion.

Listed below are the names of some enzymes and what they do:

- Papain- found in papaya fruit, it plays a key role in digesting proteins.
  - Bromelain- found in pineapple, it also helps digest proteins.
  - Amylase- works to break down starches to sugars.
  - Protease- breaks down protein.
  - Lipase- breaks down fats.
- 

## WATER

- 75% of Americans are chronically dehydrated.
  - In 37% of Americans, the thirst mechanism is so weak that it is mistaken for hunger.
  - Even MILD dehydration will slow down one's metabolism as much as 3%.
  - One glass of water will shut down midnight hunger pangs for almost 100% of the dieters studied in a University of Washington study.
  - Lack of water is the number one trigger of daytime fatigue.
  - Preliminary research indicates that 8-10 glasses of water a day could significantly ease back and joint pain for up to 80% of sufferers.
  - A mere 2% drop in body water can trigger fuzzy short-term memory, trouble with basic math, and difficulty focusing on the computer screen or on a printed page.
  - Drinking 5-8 glasses of water daily decreases the risk of colon cancer, breast cancer, and bladder cancer. Are you drinking the amount of water you need each day?
- 

A study by researchers at Ohio State University found that people who took the opportunity to individually discuss their medical condition with a pharmacist wound up taking 13 percent fewer medications on a daily basis and had 60 percent fewer medication-related problems.

# ILEOSTOMY AND FOOD BLOCKAGE

The best strategy is to prevent the food blockage, not to treat it yourself once it occurs.

Ileostomates have a small hole made in the abdominal wall at the time of surgery for the stoma to come through. This is a fixed-size opening that is not expandable. Food residue that is not well digested—from peels, nuts, and foods high in insoluble fiber—can accumulate and block the intestine near the fascia where the stoma comes out, causing a small bowel obstruction.

The important thing is for your surgeon to be able to distinguish between this and a blockage caused by scar tissue. This often means a trip to the hospital with special x-rays performed. These tests are often diagnostic and therapeutic.

Once blocked, it is easy to become dehydrated, so expect a hospital stay of at least a few days if this occurs. Remember, the best defense is a great offense when it comes to foods! Adapted from an article by Dr. Rafferty the Phoenix winter 2017.

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## THESE ARE SOME FOODS THAT MAY CAUSE A BLOCKAGE

Asparagus  
Apple peels  
Cabbage, raw  
Celery  
Chinese vegetables  
Coconut  
Dried fruit  
Mushrooms  
Oranges  
Nuts  
Pineapple  
Popcorn  
Raw vegetables  
Seeds  
Bran Cereals  
Prunes  
Raisins  
Raw Vegetables  
Fresh Fruit  
Broccoli  
Shrimp

# **DALLAS** *Ostomy Clinic*

Under the Direction of Texas Colon & Rectal Specialists



## *Meet Keri Grimmett, RN, WCC, OMS*

She is a proud Dallas, Texas native. Mrs. Grimmett earned her Associates Degree in nursing from El Centro College. She has been a nurse for eighteen years, and has greater than eight years of wound, ostomy, and continence care nursing experience. During that time she developed an interest in Ostomy Care due to a lack of help and resources for ostomy patients in the community. She completed her certification for Wound Care and Ostomy Management. She has been a Wound and Ostomy Consultant for several home health agencies and over 5 hospitals in the Dallas/Fort Worth area over the last four years. Keri is caring, compassionate, and has a unique ability to connect with individuals. She enjoys helping and educating her patients. The goal of ostomy services is to help the patient heal, return to normal daily activities faster, and enjoy the best possible quality of life. When she is not at the clinic she enjoys boating, traveling, and cooking.

*It's our goal to ensure that OUR PATIENTS . . .  
Resume normal life habits, BE INDEPENDENT with their stoma care,  
and have a POSITIVE SELF IMAGE.*



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## UROSTOMIES: Blue Discoloration

Why do urostomates occasionally notice blue discoloration in the urostomy pouch or overnight drainage pouch? Be assured there is nothing wrong with the appliance. In laboratory tests conducted by ConvaTec, the blue color was found to be the result of normal bacterial decomposition of an essential amino acid called tryptophan.

There is no clinical evidence, according to an article in the American Journal of Nursing, to indicate that the production of indigo blue is harmful or that dietary tryptophan should be limited. If you are concerned please talk with your doctor. Tryptophan is part of the regular intake of dietary protein. As it passes through your system, it undergoes a series of chemical changes that ultimately result in a blue color when it finally oxides in the urostomy pouch. Via Metro Maryland

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## CONTROLLING ODOR

An important part of a new ostomate's rehabilitation is learning to control odor. It is important to feel good about oneself and to be secure in relationships with others. The ostomate can be extremely sensitive to odors and the reactions of those around him or her, especially family and friends.

Colostomies tend to emit more odor than ileostomies because of the bacterial abundance in the colon. Most sigmoid and descending colostomies are routinely irrigated, so persistent odor is less of a problem than with a transverse colostomy where semi-liquid drainage tends to be rather malodorous.

Ileostomates experience almost continual peristaltic waves which sweep the ileum and prevent stagnation of the intestinal contents, thereby eliminating the major cause of odor, i.e. bacterial growth. Extreme and persistent odor from an ileostomy could be an indication of a secondary problem, such as a stricture or blockage.

Urine has a characteristic odor, but a foul odor could be a sign of infection due to overgrowth of bacteria. Certain foods will affect the odor of both feces and urine. Avoiding such odor-producing foods will help.

External and internal deodorants are available, but two important aspects of odor control are good personal hygiene and appliance care. Internal deodorants that can be taken by mouth include bismuth subgallate tablets which control odors by absorbing toxins. Ostomates should consult their physician before taking these tablets.

Via the Roanoke Valley

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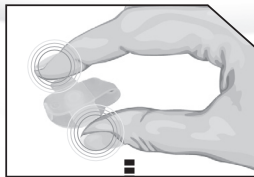


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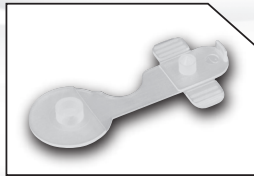
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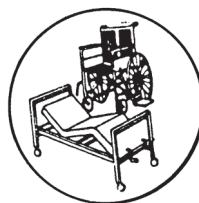
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# STOMAL PROLAPSE

Prolapse is a relatively frequent stomal complication (affects up to 14 percent of all ostomates) defined as the excessive protruding of the bowel out of the abdomen. The piece of bowel that protrudes may often be as long as six inches in length, up to three inches wide easily.

If your stoma prolapses, you should remove your pouch, so that the bowel has space without being constricted. Apply a cool compress. If this is the first time you have prolapsed, call your physician or WOCN nurse immediately. If you cannot get in touch with a WOCN and especially if your drainage has stopped, it would be wise to go to the emergency room at your local hospital. If your stoma has prolapsed before, you may have been taught by the physician to "reduce" your stoma and you should try to do so.

By Diane Kasner, RN, MS, ET, Baltimore, MD  
UOAA UPDATE 6/2014

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## PROLAPSE

There are no new improvements to correct stoma prolapse recurrence. It usually results from increased intra-abdominal pressures that cause the stoma to "push out."

Conditions that predispose to this include coughing, being over-weight, lifting/straining. Minimizing these conditions can help minimize recurrence.

Adapted from an answer by Dr. Cera in the Phoenix Fall of 2014.

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## RED AND ITCHY SKIN

Bright red, itchy irritated skin can be an overgrowth of a fungal organism, usually candida. Yeast or fungus are opportunistic infections. Fungus exists in the environment, but thrives in warm and moist places.

You can treat this infection by applying an anti-fungal powder containing 2% miconazole. Powder forms are chosen over creams or ointments to still allow your pouch to adhere.

To apply the antifungal powder, you will need to remove your pouching system and clean the peristomal skin well with water. Dry it thoroughly. Sprinkle the antifungal powder on you peristomal skin, rub it into the skin and dust off the excess. You can dab or spray the powdered area with a no-sting barrier spray if this is not contra-indicated by the manufacturer of the wafer.

Apply your pouch as you normally do. The symptoms and fungus should resolve in a matter of days. If it persists, see your ostomy nurse or your doctor.

Adapted for an answer by Nurse Brown in the Phoenix Fall of 2014.

# **OSTOMY SUPPORT GROUPS IN THE DFW AREA**

**Dallas –Ostomy Association of Dallas Meets the 3<sup>rd</sup> Tuesday of each month (except December) 7:00 – 8:00 pm**

**Contact: Dave Darnell 972-931-9651 [pdanddave@earthlink.net](mailto:pdanddave@earthlink.net)**

**Texas Health Presbyterian Hospital  
8200 Walnut Hill Lane, Dallas, TX  
Margot Perot Building  
Meadows Classroom C on the lower level  
Park in parking lot 11 on the lower level**

\*\*\*\*\*

**Plano – Meets the 2<sup>nd</sup> Tuesday of each month 12:00- 1:00 pm lunch is provided.**

**Medical Center of Plano  
Professional Building 3 Community Classroom 170  
4001 W. 15<sup>th</sup> Street (NW Corner of 15<sup>th</sup> and Coit)  
Contact Dave Darnell 972-931-9651 [pdanddave@earthlink.net](mailto:pdanddave@earthlink.net)**

\*\*\*\*\*

**Carrollton –Meets the first Tuesday of each month 6:30 – 7:30 pm at Baylor, Scott and White Hospital. Dinner is provided.**

**4343 North Josey Lane  
Carrollton, TX 75010  
Conference Room 1**

**Contact Stazny Duckworth, BSN, RN, CWOCN  
[ostomysupport@bswhealth.org](mailto:ostomysupport@bswhealth.org) 972-394-2336**

\*\*\*\*\*

**Lewisville—Meets every third Thursday of each month at 12:00 noon at the Medical Center of Lewisville. Light lunch is provided.**

**Medical Arts Building, 1<sup>st</sup> Floor, Classroom 3  
475 Elm Street, Lewisville, TX 75057**

**Contact Rita Whitney, MSN, APRN, FNP-BC, CWOCN  
972-420-1523 [rita.whitney@hcahealthcare.com](mailto:rita.whitney@hcahealthcare.com)**

\*\*\*\*\*

**Ft. Worth - The Ostomy Support Group of Ft. Worth meets the 3<sup>rd</sup> Sunday at 2:00 pm (unless on a holiday and then it may be changed) no meetings in July or December. 817-561-1961 [uoafw@yahoo.com](mailto:uoafw@yahoo.com)**

**UNT Health Science Center 3500 Camp Bowie, Carl Everett Administration Bldg  
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.....  
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*RIDESHARE:* General Area (ie, Preston/Forest Lane) -  
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☐ I need a ride to the meeting.

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### Board Meeting

The Board of Director's meeting is on the 3<sup>rd</sup> Tuesday of the  
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The location is our regular meeting room.

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### The Plano - North Dallas Ostomy Support

Group meets the 2nd Tuesday of each month at 12 noon in  
The Medical Center of Plano Professional Building 3, room 170  
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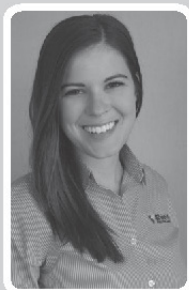
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*Our monthly meetings are open to all interested persons.*

### OSTOMY ASSOCIATION OF DALLAS NEW MEMBERSHIP APPLICATION

Membership includes:

The OSTOMATIC NEWS, our chapter's monthly newsletter, containing helpful hints on living with an ostomy.  
Monthly meetings to exchange ideas, answer questions and enjoy programs.  
The right to take visitor training and become a part of the association's Visitation Program.

Tax deductible membership dues are **\$20.00** collected annually in January. Please use the following to calculate your dues for the first year. **Jan-March \$20.00** **April-June \$15.00** **July-Sept. \$10.00** **Oct.-Dec. \$5.00**

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