



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
FEBRUARY 13, 2018
MEETING START TIME
12:00 NOON**

**NEXT MEETING
DALLAS
FEBRUARY 20, 2018
MEETING START TIME
7:00 P.M.**

THE SPEAKER FOR BOTH MEETINGS

**MELISSA YATES
OF
COLOPLAST**

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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LAST MEETING

Thanks to all who attended the Plano meeting in January. Pharmacist Randy Shulkin sends his sincere apology for not being able to attend the meeting. He promises that he will be there next time. We will schedule him for later in the year. Thanks to Ostomy nurses Rita Whitney, Shirley Dunbar and Gwen Spector for attending and leading a discussion on ostomy issues.

I cancelled the Dallas meeting because of the bad weather potential...and then we really did not get that much in the Dallas area. I tried to get the message out to everyone about the cancelation...but one lady did show up at the meeting. I am very sorry about that.

The speaker for both meetings in February will be Melissa Yates of Coloplast. Please try and attend.

Kay Smith has mailed the membership renewal notices. Please look for it in your mail.

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

FOOD

The question of what to eat is usually one of the first questions a new ostomate asks. There is no one answer...because each person's body reacts differently. Once the doctor tells you that you can eat real food...add new foods cautiously in small amounts and chew everything to liquid and see how your gut reacts. The list below is a partial guide line...

Foods that increase odor- Asparagus, Broccoli, Brussels Sprouts, Cabbage, Beans, Eggs, Fish, Onions, Spices...

Foods that increase gas- Beans, Beer, Carbonated Soda, Broccoli, Brussels Sprouts, Cabbage, Cauliflower, Corn, Cucumber, Mushrooms, Peas, Radishes, Spinach, Dairy Products...

Foods That Thicken Stool- Applesauce, Bananas, Cheese, Boiled Milk, Marshmallows, Pasta, Peanut Butter, Pretzels, Rice, Bread, Tapioca, Yogurt, Bagels...

Foods that loosen stool- Green Beans, Beer, Fresh Fruit, Raw Veggies, Prunes, Prune Juice, Spicy Foods, Fried Foods, Chocolate, Spinach, Leafy Green Vegetables, Aspartame, NutraSweet, Sorbitol...

Foods that may cause blockage- Dried Fruit, Grapefruit, Nuts, Corn, Raisins, Celery, Popcorn, Coconut, Seeds, Coleslaw, Meats with casings, Oranges, Broccoli, Brussels Sprouts, Cabbage, Mushrooms, Asparagus....

Editor's note: Ileostomates must use caution when eating vegetables and fruits. They can cause a blockage. Chew all food to liquid.

COLOSTOMY HINTS

For those who irrigate: Part of the difficulty in elimination of waste matter experienced by colostomates is the 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 quarter to half a cup of ALL BRAN, with enough milk to moisten, taken five or more hours before irrigation, should help alleviate this problem.

The bran can be made into muffins if preferred. Add raisins and molasses to taste.
Via Metro Maryland

UROSTOMY INFORMATION

A urostomate needs to keep his/her urine on the acid side to prevent urinary system problems.

Cranberry juice is the most popular drink for this. Ascorbic acid powder to mix in water or juice, or Vitamin C tablets taken in doses recommended by your doctor, are also good to keep on hand to keep your PH level on the acid side.

Most citrus fruits, which one would assume would keep the urine acid, work just the opposite and result in alkaline ash.

A sort of rule of thumb is that most bland foods seem to cause an acidic reaction and most acidic tasting foods seem to cause an alkaline reaction.

Keep the white crystallized alkaline ash material that collects around your stoma under control by using a mixture of 1/3 white vinegar and 2/3 water to flush the pouch and soak the stoma. The crystallized material can build up and actually cut into and injure the stoma.
Via North Wind News, Anchorage, AK.

A SWEET SURPRISE

Honey can be so much more than a sweetener. New research suggests that it can also promote oral health by preventing the growth of biofilms, accumulations of harmful bacteria that can lead to cavities, bad breath and gum disease.

In one study, consuming Manuka Honey, a bold-flavored variety produced in Australia and New Zealand, significantly reduced plaque and gingivitis.
Via Prevention.com

DON'T ASSUME

When you live with an ostomy, it is easy to forget that most people, including medical professionals, don't know much about stomas. Even those who have heard of ostomies, assume they are all colostomies.

When a doctor ordered an abdominal scan I discovered that it involved drinking a lot of contrast fluid in a short period of time. I told them that everything I drank came out through my ostomy very quickly and I thought there might be a problem. I was assured there should not be a problem. So I commenced drinking the contrast. Unfortunately, as I expected, it didn't take long for it to start coming into my pouch (it had a very obvious color). I went to the desk and told them that the contrast was already coming through into my pouch. The tech took me aside and after my explaining what was happening, he said "can't you put a plug in it (meaning the stoma) or something?"

Now anyone who has been around ostomies knows that no, you can't "put a plug in it" (believe me there have been days when I wished I could!). The tech had not come across my situation before.

We were able to complete the test only with less than optimal contrast, but it did show me that just because someone works in the medical field, I should not assume they know about or understand ostomies.

Sometimes a medical professional treating you for something not stoma related may forget you have an ostomy and need to be reminded. Once during a physical a doctor told me that as part of the medical exam he would do a rectal—I had to remind him that it was physically impossible for him to do that since it had been removed and that area sewn up! So always inform and never assume!

By Lyn Rowell....reprinted from Anne Arundel County MD Ostomy Association and the Hendrick Ostomy Support Group.

WHEN SHOULD I SEEK MEDICAL ASSISTANCE?

You should call the doctor or ostomy nurse when you have:

- Severe cramps lasting more than two or three hours.
- A deep cut in the stoma
- Excessive bleeding from the stoma opening (or a moderate amount in the pouch at several emptyings)
- Continuous bleeding at the junction between the stoma and the skin.
- Unusual change in stoma size and appearance
- Severe watery discharge lasting more than five or six hours
- Continuous nausea and vomiting
- The ostomy does not have any output for four to six hours and is accompanied by cramping and nausea.

DALLAS *Ostomy Clinic*

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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.*



DALLAS

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Love your Stoma

Show your stoma some love this Valentine's Day. It's a part of you and deserves your love and respect.

- ♥ Be kind to your hard working guts and avoid all candy with coconut, seeds and nuts.
- ♥ Skip the chocolate covered fruit. Having a bowel blockage isn't sexy!
- ♥ Don't flirt with danger. Limit alcoholic beverages and remember to stay hydrated with water.
- ♥ Be aware that foods and beverages with **red** dye, like red velvet cupcakes and red or pink frosting on cookies, can turn your stool red. Red may be the color of love but it's not lovely to see in your pouch!

The ER is not a romantic place to spend Valentine's Day so stick to the rules and avoid a rendezvous with the medical team.



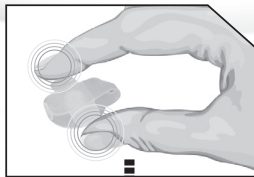
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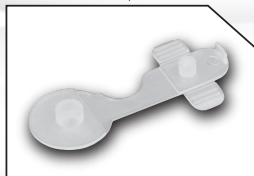
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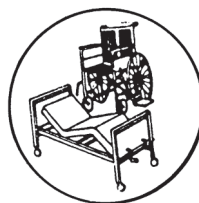
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CRANBERRY AND D-MANNOSE

UTIs (urinary tract infections) also known as cystitis, are bacterial infections that affect the lower urinary tract (urethra and bladder) and are caused when bacteria, usually *E.coli*, enters the urethra and attaches to the walls of the urethra and bladder. This bacteria is especially nasty because once it attaches, it forms a protective coating around itself that resists the body's normal immune response.

Women are more prone to these infections than men because of their shorter urethras, although they do occasionally affect men.

According to the National Institutes of Health, UTIs are the second most common type of infection in the body, and account for more than 8 million doctor visits each year. And 60 percent of women will have one at least once in their lives, with 20 percent suffering from recurrent infections.

Usually the first course of action for treating a UTI is antibiotics; however, there are natural compounds that protect the urinary tract and prevent bacteria from attaching in the first place, promoting urinary tract health. Two of these compounds are cranberry and D-mannose.

How do they work? The main bacterium that is implicated in causing urinary tract infections is *E. coli* (this is not the same *E. coli* mutation found in unsanitary food that has made people sick; rather, it is the *E. coli* that is part of the natural micro flora in our intestinal tracts). These microbes have tiny, fingerlike projections that allow the bacteria to stick to the inside walls of the urinary tract and bladder so they can't easily be washed away by urine. This is where cranberry and D-mannose come in—both have the ability to coat the *E. coli* bacteria, preventing them from sticking.

D-mannose is a naturally occurring simple sugar, closely related to glucose, but unlike glucose, it is absorbed at a much slower rate. Also, unlike glucose, D-mannose passes directly into the bloodstream largely unchanged. From the bloodstream, it then passes through the kidneys where a large portion is added to urine, where it flows through the bladder and urinary tract, coating and flushing out any *E. coli* bacteria that may be hanging out there. Because it is a simple sugar, D-mannose is safe to take and has shown no clinical side effects.

Cranberries contain proanthocyanidins, which like the D-mannose, prevents the *E. coli* from sticking to the walls of the bladder and urinary tract. Additionally, cranberries are a natural source of D-mannose.

A UTI is nothing to ignore. If left untreated, it can progress into a kidney infection. If you think you have an infection...see your doctor. To help maintain urinary tract health and prevent infection from occurring, consider taking a cranberry and D-mannose supplement. By Lindsay Wilson, Natural Grocers Weekly Hotline, July 2012.

OSTOMY SUPPORT GROUPS IN THE DFW AREA

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

Contact: Dave Darnell 972-931-9651 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 2nd Tuesday of each month 12:00- 1:00 pm lunch is provided.

Medical Center of Plano

Professional Building 3 Community Classroom 170

4001 W. 15th Street (NW Corner of 15th and Coit)

Contact Dave Darnell 972-931-9651 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 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, 1st Floor, Classroom 3

475 Elm Street, Lewisville, TX 75057

Contact Rita Whitney, MSN, APRN, FNP-BC, CWOCN

972-420-1523 rita.whitney@hcahealthcare.com

Ft. Worth - The Ostomy Support Group of Ft. Worth meets the 3rd 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

UNT Health Science Center 3500 Camp Bowie, Carl Everett Administration Bldg (NE corner of Camp Bowie and Montgomery Sts. Park in Lot 6)

.....
The *Ostomy Outpatient Resource Book* for the Dallas-Ft. Worth area is posted on North Texas Wound and Ostomy Nurses web page.

<https://ntxwon.nursingnetwork.com/page/45471-ostomy-outpatient-resource-book>

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Board Meeting

The Board of Director's meeting is on the 3rd Tuesday of the
month prior to the general meeting. The time is 6:30 p.m.
The location is our regular meeting room.

All members are welcome to attend.

Please send any surplus supplies that you may have on hand to:

Project Share

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info@fowusa.org

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
Professional Bldg 3 is located at the NW corner of
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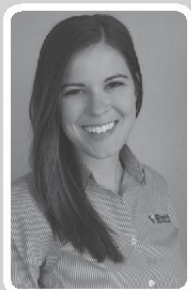
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Our monthly meetings are open to all interested persons.

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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