

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 MEETINGS

PLANO APRIL 10, 2018 12 NOON

THE TOPIC WILL BE CORE STRENGTHENING FOR OSTOMATES

DALLAS
APRIL 17, 2018
7 PM
GENERAL MEETING

IDENTIFICATION STATEMENT

The Ostomatic NewsOstomy 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 Jessica Jay and Grey Toombs of B.Braun for speaking at the support group meetings in March. They presented the product line and answered question for the group. Their product is called FLEXIMA. The products look interesting. For samples call 1-877-209-9626.

Also thanks to Ostomy Nurses Shirley Dunbar and Gwen Spector for attending the meetings and keeping us on track.

The speaker for the Plano meeting in April will be Jimmy Olores. He is a Physical Therapist at the Medical City of Plano Re-hab center. His topic will be core strengthening for ostomates. We all need that. Please try to attend.

The Dallas meeting will be a general meeting.

As always thanks for your support. Dave

FIT STEPS FOR LIFE

Fit Steps for Life is an exercise and conditioning program created by Cancer Foundation for Life (CFFL) for cancer patients. Ask your physician to refer you. There are several locations around the Dallas area.

Moderate exercise is an important part of your treatment. Many participating physicians financially support this non-profit program so they offer their services **free of charge**.

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HELPFUL HINTS

To slow down stoma activity before changing your appliance, you may try eating a tablespoon of creamy peanut butter beforehand or eat four or five marshmallows 15 minutes before changing.

If your stoma gurgles a lot, try eating solid foods first and then take beverages. Carbonated beverages tend to cause gas.

Skipping meals will cause gas to be produced, so don't skip meals before going out. Empty stomachs tend to growl.

Eating bran muffins is a simple and delicious way for colostomates to solve constipation problems.

To keep urine acidic, with your doctor's permission, take two Vitamin C tables daily.

Club soda is an effective cleaner of feces and urine spots.

If you find the scissors sticky when cutting a flange or faceplate, clean the blades with rubbing alcohol.

Scissors, which have curved blades with blunt ends, are best for cutting openings in the faceplates.

Hole cutters can be purchased from suppliers of durable medical equipment. They won't work if your stoma is an oval or irregular shape.

If you have abdominal cramps, try running a hot shower on your back. It will relax the muscles and help hurry the food through the digestive tract.

OAT BRAN CAUTION

As one member learned, to her regret, oat bran can have a very serious effect on ileostomates. After reading of its effect on cholesterol in a diet book, this member took to using it often, not only on her cereal, but baking oat bran muffins. Unfortunately, the stuff has a tendency to ball up in the distal end of the ileum, causing a blockage that can range from minor to extremely serious. The latter happened to this particular member with the result that she was taken to the hospital.

As with most good things, oat bran has it disadvantages. So, in conformance with that tried and true motto all ostomates learn at an early age, if you do use it, use it in moderation until it's demonstrated that your system can pass it on, and above all, drink more fluids than usual.

Adpated from the Ostomy Newsletter, Brevard, FL.

COLOSTOMY

Ascending Colostomy

A colostomy can be performed on any site along the colon depending on the colon segment affected. Anatomically, the colon is comprised of four segments; ascending colon, transverse colon, descending colon and the sigmoid colon. These four colon segments have been used to derive names for the different colostomies that are commonly performed on patients suffering from colon disorders. One of them is the ascending colostomy. As the name suggests, an ascending colostomy is performed on the ascending segment of the colon which is located on the right side of the abdomen. The stoma is placed on the wall of the right abdomen where a portion of the ascending colon is pulled through to allow for the discharge of stool. Since the ascending colon is the first segment of the colon which receives contents from the small intestines, most of its contents are liquid in nature because the water component of the stool has not been absorbed. The stool is also rich in digestive enzymes that are released in the duodenum. These enzymes cause irritation to the abdominal skin surrounding the stoma when stool is passing through the stoma. For these reasons, the ascending colostomy is the least performed of all the colostomies unless there is no other option to correct the colon disorder. To correct defects on the right side of the abdomen, another type of ostomy, called an ileostomy, is the most preferred.

Transverse Colostomy

Transverse colostomy is a type of colostomy that is performed and it is located on the upper abdomen, either towards the body's right side or in the middle. This type of surgical procedure allows the stool to exit the body before reaching the descending colon. It is usually done to treat different colon problems, diseases or injury. Through surgery the normal body function of expelling waste material becomes altered to permit stool to take a different route to exit the body. A colostomy made in the colon right half of the body implies that only a small portion of the colon on that side is active. The stool coming out from transverse colostomy changes from time to time and from person to person. Some transverse colostomies may eject firm stool at different irregular intervals, but a majority usually eject loose/soft stool at fairly regular intervals.

Descending and Sigmoid Colostomy

A descending and sigmoid colostomy is a procedure that takes place in the last third section of the colon. The resulting stoma is located on the lower left-hand side of the abdomen. There may be several reasons that a patient may need this type of procedure and depending on the severity of the condition or injury to the colon or rectum, the resulting colostomy may be either temporary or a permanent fixture. Since there is still a fair amount of healthy colon remaining to absorb much of the water from the fecal matter, the waste material of this type of colostomy tends to be more firm than that of other types of colostomies. Patients with a descending or sigmoid colostomy may be able to eventually develop a routine and be able to predict more accurately when to expect bowel movements during the day. This makes patients with a descending or sigmoid colon prime candidates for colostomy irrigation should they want to explore an alternative to traditional colostomy supplies for their waste management needs. Via colostomycare.org

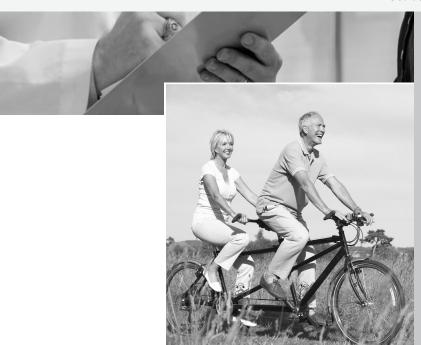
DALLAS Ostony Clinic Under the Direction of Texas Colon & Rectal Specialists



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 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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GIFT OF TIME

What does your ostomy mean to you? Does it mean a constant nuisance and care, problems, embarrassment, leakage and resentment: or do you relegate it to a significant but minor part of your daily routine and now enjoy a new lease on life?

What would have happened to you if the surgery hadn't been done? Did you get to choose between a box six feet under or a pouch on/in your belly? That doesn't leave much room for negotiation, does it?

A surgical diversion to create an ostomy or an internal pouch is usually done as a life-saving procedure. Some are temporary solutions to an acute problem and some are permanent diversions. Some are done as cures for whatever ailed you in the first place and some alleviate a lot of worry, pain, misery and medical expense. All of them buy you a Gift of precious, extra time!

For those who have been given that **Gift of time**, what are you going to do with that **precious**, **extra time?** Are you going to waste it—now that you have it—or are you going to do something productive or memorable with it? Are you going to crawl into a psychological hole and remain there, feeling sorry for yourself until your time runs out, or are you going to make a difference in the world around you? Are you going to appreciate and give thanks for good health, family, friends, and live life to the fullest, making good use of the time you have left? THE **CHOICE IS YOURS!**

UOAA update

WASH YOUR HANDS

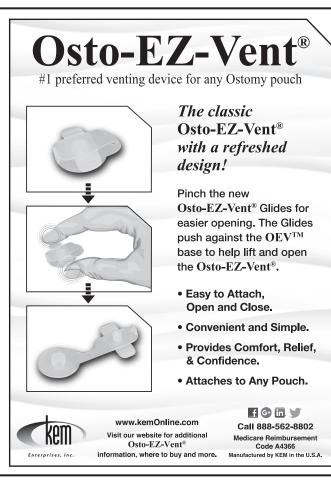
Before and after your hands are near your face. Before eating and cooking, and if you smoke, before lighting up.

After using the bathroom, changing diapers, blowing your nose or sneezing into a hand, handling any kind of meat or garbage, and touching animals or cleaning up after them.

The U.S. Centers for Disease Control recommends a vigorous 20 second scrub, once hands are lathered.

MAKE MINI MEALS

Don't worry about sitting down for large, daunting dinners. Instead, eat small meals every 2-3 hours.



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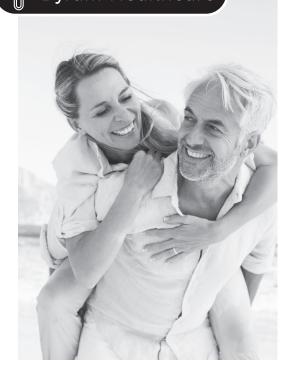


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OSTOMY SUPPORT GROUPS IN THE DFW AREA

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 Josev 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 6:00 pm at the Medical Center of Lewisville. Medical Arts Building, 1st Floor, Classroom 3 475 Elm Street, Lewisville, TX 75057 Contact Rita Whitney, MSN, APRN, FNP-BC, CWOCN 972-519-1479 rita.whitney@medicalcityhealth.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 uoaftw@vahoo.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

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.

If you have an obstruction, it is important 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 answer given by Dr. Rafferty in The Phoenix December 2012.

NUTRIENT LOSS FROM IRRIGATION

You do not need to worry about upsetting the balance of bacteria or losing nutrients by irrigating your colostomy. The colon is really just a conduit to transport stool.

Water, and a few electrolytes, are absorbed on the ascending or right side of the colon, but not on the left (descending and sigmoid colon).

You can certainly cause the lining of the colon to become inflamed by using certain soaps or detergents in your irrigant, so pay attention to the consistency of the effluent after you irrigate.

Adapted from an answer given by Dr. Rafferty in The Phoenix December 2012.

FOODS AND ARTHRITIS

If you have arthritis, eliminate all nightshade foods: tomatoes, eggplants, peppers, and white potatoes.

Many people have experienced good results by eliminating these foods. www.thedoctorstv.com

Mail to: Ostomy Association of Dallas, P.O. Box 262202 Plano, TX 75026 Member or Visitor Name: My address and/or phone number has changed to the following: City: State: _____ Zip: Phone: _____ Email: Please \Box do not publish my name in the newsletter. ☐ You may include me as a phone volunteer. ☐ I understand that you will call me as needed. ☐ I have some new Ostomy Supplies that I would like to contribute to the Chapter. Please have someone call me. RIDESHARE: General Area (ie, Preston/Forest Lane) -☐ I need a ride to the meeting.

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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 C/O FOW-USA 4018 Bishop LN Louisville, KY 40218-4539 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 Coit and 15th streets in Plano.

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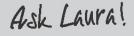


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Our monthly meetings are open to all interested persons.

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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