

# Ostomy Outlook



## NEWSLETTER OF THE OSTOMY ASSOCIATION OF THE MINNEAPOLIS AREA

Volume XXLXII, Issue XI 2015 July/August

<b>Date:</b>	<b>Monday, July 20, 2015</b>	
<b>Time:</b>	<b>6:30 PM-Social hour</b>	
<b>Place:</b>	<b>United Methodist Church of Peace</b> 6345 Xerxes Avenue South Richfield, MN 55423 612-866-0069	
<b>Program:</b>	<b>7:00 P.M.</b> <b>“Rap” with Darlene Hafner and Carol Larson</b> <b>Bring your cares, concerns, and joys to our meeting!</b>	
<b>Date:</b>	<b>Monday August 17, 2015</b>	
<b>Time:</b>	<b>6:30 PM – Social Hour</b>	
<b>Place:</b>	<b>United Methodist Church of Peace</b> 6345 Xerxes Avenue South Richfield, MN 55423 612-866-0069	
<b>Program:</b>	<b>Ruth Bachman</b>  <b>Writer of “Growing Through the Narrow Spots” Ruth Bachman.</b> <b>More than a book about cancer. It is a roadmap of sorts, encouraging the reader to look closely and patiently at all of life's challenges.</b>	

President	Ed Scinto	952-440-6905	<a href="mailto:ed.marge.scinto@integra.net">ed.marge.scinto@integra.net</a>
Secretary:	Ruth Siefert	952-402-0808	<a href="mailto:rrsiefert@comcast.net">rrsiefert@comcast.net</a>
Treasurer:	Beth Amundson	612-715-1686	<a href="mailto:bma1126@gmail.com">bma1126@gmail.com</a>
Newsletter Editor:	Nancy Hagfors	952-237-6465	<a href="mailto:pitplayer@q.com">pitplayer@q.com</a>
Membership:	Anne-Marie Kronick	612-236-4899	<a href="mailto:amkronick@comcast.net">amkronick@comcast.net</a>
Hospitality:	Marilyn Carlson	952-941-9148	<a href="mailto:mcarlson@easween.com">mcarlson@easween.com</a>
	Rich Trainer	763-560-9692	<a href="mailto:goldenstrainer@yahoo.com">goldenstrainer@yahoo.com</a>
Past President:	Frank Moriarty	763-577-5712	<a href="mailto:moriartyf@earthink.net">moriartyf@earthink.net</a>
Patient Advocate:	Dar Hafner	952-835-4599	<a href="mailto:dmhaafner@yahoo.com">dmhaafner@yahoo.com</a>
<b>ET Nurse CWOCN:</b>	Julie Powell	952-924-5086	<a href="mailto:jpowell1@fairview.org">jpowell1@fairview.org</a>
ASG Representative:	Carol Larson	952-934-3804	<a href="mailto:caroldavidlarson@aol.com">caroldavidlarson@aol.com</a>

Mailing Address: Ostomy Association of the Minneapolis Area P O Box 385453, Bloomington, MN 55438-5453  
 The Ostomy Outlook is printed and circulated for people with Colostomies, Ileostomies, Urostomies, and alternative procedures, their families and other interested Persons.

**Our new website address is: [ostomyminneapolis.org](http://ostomyminneapolis.org)**

### Ostomy Association of the Minneapolis Area Membership Creed

As members of this group, it is important to be ever mindful of our many blessings: our understanding families and friends, our homes, and our way of life. Most of all, as ostomates, we need to be ever mindful of the life which has been given back to us and to find the courage to face our daily challenges. Let us continue to be concerned for people who need our help, our support, and the knowledge that we have gained. Let it be our task to reach out to others and to ourselves. May we do this in a spirit of fellowship and fond regard.

#### *The President's Corner*



Hello, Ostomates and Friends of Ostomates,

We just finished our annual picnic and I felt it was a huge success. The turnout was pretty good and the jokes were as good as ever.

We are looking forward to our summer meetings, which we have not had in the past. It will be interesting to see if our attendance gets better, stays the same, or drops.

New people are always welcome and I encourage you to give us a try!

We are looking for a President Elect as soon as possible. If you, or someone you know is interested, please notify the President or one of our Board members. The President Elect will work closely with the President for approximately one year and then take over the Presidency at that time.

Hope to see you all in July. In the meantime, take care.

Your President, Ed Scinto

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# GETTING TO KNOW US!

## Austin and Lois Hummel:

Lois at 4 years



Austin 18 months



Austin was born and lived in Maryland until 1976. He was married to Sandy in 1961 and spent 4 years in the Air Force working with nuclear weapons. Later he was employed by Control Data, where he was a Systems Analyst. Control Data gave him and his beloved wife, Sandy, and their 2 sons and 2 daughters the opportunity to move to the Twin Cities. He did not hesitate to move here, where he found a home in Bloomington and has lived there ever since. Austin retired from Control Data/Siemens in 2001. Austin lost his oldest son, Henry, in 1978, and his beloved wife of just under 49 years, Sandy, after a long illness in December 2009.

In his spare time Austin enjoys participating in Gumdo (a Korean sword fighting martial art form) and computer-assisted machine embroidery.

Lois was born and raised in Proctor MN, (just south of Duluth), graduated from the College of St Scholastica in Health Sciences. Most of her working life she did hospice work, but has been employed by United Health Care for 14 years. On July 3, 2015 she will be officially retired. She enjoys spending her spare time reading and working with animals. Lois has two grown sons, the main reason she moved to the Twin Cities 11 years ago.

In November 2012 Austin met Lois through an online dating service for seniors. It was love at first sight and they were married June 15<sup>th</sup>, 2013. Together they have 12 grandchildren and 8 great grandchildren which give them much joy. Austin had his ileostomy April 28<sup>th</sup> 1994. Austin would not have been part of much of the above without this lifesaver.



ConvaTec is proud of our nearly 30-year heritage and our many contributions towards advancing the fields of modern wound and ostomy care. Today, we are equally energized and excited about our future as part of Nordic Capital and Avista Capital Partners. As we move forward, what remains unchanged is our passion for making a difference in people's lives.

## Patient Power

**If you have any ideas or issues you'd like us to address, please send them in to the newsletter editor or directly to us, Darlene Hafner and Anne Marie Kronick." You can reach us by emailing [dmhafner@yahoo.com](mailto:dmhafner@yahoo.com) or [amkronick@comcast.net](mailto:amkronick@comcast.net)**



### Surprise

Do you remember your mother telling you to be sure and have clean underwear on because "You never know what might happen?" Well, now I know what can happen. It was pretty bizarre, but yes, I did have on clean underwear.

I asked a friend to come along on my midday dog walk because I had a surprise for her – a huge, old magnolia tree in full bloom with a fragrance you could smell a block away. When we arrived, the owner came out to tell us all about its history, who planted it, etc. He and his wife stood outside with us, telling us the history of the tree and house, etc. It was a pleasant spring day and a neighborly experience. When we excused ourselves to continue our walk, I spotted a Pit Bull dog lying on the lawn of the house across the street in the direction we were walking. After looking it over I determined that it was not tied up and that it was staring at us – or should I say, at my dog. It was looking my dog over and, since Pit Bulls don't have the best reputation, our best recourse was to cross the street and get out of its way. We turned our backs on it and waited for the light. As it changed and we stepped out into the street, I was hit on the right hip by the Pit Bull racing after my dog. It threw me in the air and I landed in the middle of the street. My friend was screaming and screaming. Thank goodness she caught hold of the leash as I lost it flying through the air. So she was able to pull my dog out of the Pit Bull's way. I discovered when I tried to get up that something was wrong with my leg. It just wouldn't function. A bystander offered to pick me up and put me in the grass in the park, but when he touched my leg I started to scream. It was so painful, so I stayed in the middle of the road blocking traffic. A young woman stopped and propped me up as I was having difficulty and didn't want to lie flat on my back. She dialed 911 and reported that an elderly lady had been knocked down in the middle of Portland Ave. ELDERLY LADY? Who was she talking about? That was almost as bad a moment as getting hit by the Pit Bull!

The police arrived and took information, including who owned the Pit Bull. All the neighbors were out for the excitement and all pointed to the corner house. The police went off to talk to them. (In the meantime the Pit Bull had come back home and returned to his resting place under the tree on the front lawn.) The policeman returned with the information, "They said they don't own a dog." All the neighbors moaned and groaned saying, "They own that one AND another one." So I have no idea what happened to the dog that hit me at all. I believe that no one even called Animal Control with the information that a Pit Bull with no identification was loose in the neighborhood.

The ambulance finally arrived and I must admit it was a painful experience getting moved from the street to the gurney to the ambulance. We were only a few blocks from Hennepin County Medical Center and that's where we headed. I had no idea what was in store, but the surgery the next morning put 4 pins in my legs with the explanation that the tibia was shattered and I'd need to have these in for several months. I am not allowed to put any weight on the foot. I can only use one leg. When the pins come out there will be another fixator for a while and I may be able to put weight on that leg by fall, but not before. And if I'm lucky, my knee will start to work again and I won't need a knee replacement. My entire summer? And still things will be up in the air – (so to speak). So far, it has been quite something to come to terms with, but I'm coping as best I can.

The "accident" has put my husband's and my lives in a tailspin. We live in a townhouse. It has lots of stairs and the thought of me trying to operate in such an environment is quite overwhelming. We have both been processing it as best we can. We put our house on the market and started looking for apartments. So far that has not been very successful – a lot more money for a lot less space. We've given away lots of 'stuff'. We'll probably have to have a garage sale to get rid of more. I really don't want to sell my house and neither does my husband, but we truly don't know what's in store for us. It has been two months and we still don't know what the future holds. I'm healing – but not quite enough for the surgeon to take the pins out. When he does take them out will my knee work properly or need more surgery? If that happens how much more rehab will be needed? What will the next fixator be and how long will that be in? After each of these what kind of rehab will I need? All of these questions are part of our daily life – but not a thought in the life of the Pit Bull owners. I find that fact very frustrating. I don't necessarily want them to be punished but I would like them to be aware of the damage that was done to another person, the pain, the long time in rehab, and the disruption to their life. **Anne Marie**

My "sudden surprise" came June 12th, 2003. I had finished my school year as a teacher and was going to see my GI doctor because of a nagging rectal abscess. We decided that the best thing to do was to have it lanced and perhaps spend the night in the hospital. But to make a long story short, the surgeon nicked my intestine during the procedure, peritonitis set in

and an emergency permanent colostomy had to be performed. What was going to be a one night stay turned into almost a month. I left the hospital weighing 79 lbs. with drainage tubes and a feeding tube and a pouch attached to my belly for the rest of my life.

My second surprise came 6 months later when I was diagnosed with breast cancer. Much like Anne Marie, I felt helpless, beaten down and so incredibly sad and angry.

There are times in our lives when we need to give ourselves permission to grieve, to feel sorry for ourselves and feel angry about our situation. But then, as time goes on, we need to pull ourselves up by our bootstraps and tell ourselves, "We will be ok and we're lucky to be alive." In Anne Marie's case, she could have hit her head when she fell and sustained horrible brain damage or death. In my case, the surgery could have been delayed had they not done a CT scan showing my kidneys were shutting down. I was lucky that the breast cancer hadn't spread to other organs.

Our minds wander to the "woulda, coulda, shouldas " over our sudden surprises, but we also need to be thankful for what DIDN'T happen to us. If we remain positive in our thinking and dig down deep for our coping strategies, we STILL can find the power within us to move and conquer our detour in life and find another route to take. **Darlene Hafner**

## How the Ileostomy Changes Digestive Function

UOAA Update November 2014

Some may wonder how it's possible to live without your colon (large intestine). The major functions of the colon and rectum are sorting intestinal contents, absorbing water and carrying waste to the outside. Although these functions are necessary for you to live, they can be taken over by the small bowel.

The major function of the small intestine is to absorb the body's nutrients and water. Enzymes released into the small intestine break food into small particles so that vitally needed proteins, carbohydrates, fats, vitamins and minerals can be absorbed. These enzymes will also be present in the ileostomy discharge and they will act on the skin the same way they work on foods. This is why the skin around an ileostomy must always be protected.

When the colon is present, the food you eat eventually reaches the large intestine, where it's stored and more water is absorbed. Many hours or perhaps days later, the mass is expelled through the anus in a formed stool. Peristalsis (muscle contractions of the colon) pushes the contents toward the rectum. When the stool reaches the rectum, the need to empty the large intestine occurs and nerve pathways from the brain initiate the process of defecation.

After removal of the colon and rectum, you no longer have control. Unlike the anus, the stoma has no shutoff muscle. Digestive contents pass out of the body through the stoma and are collected in an individually fitted pouch, which is worn at all times. Because the small intestine doesn't store and make intestinal contents solid, your stool will never get thicker than toothpaste. However, the soft stool in your ileostomy pouch should not be confused with loose stool and diarrhea.



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### Adapt Ostomy Accessories

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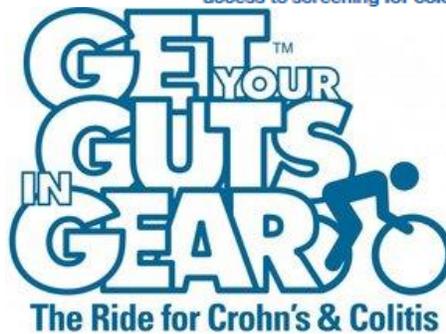
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### OUR VISION

- To establish a colon cancer event or align with an existing event in every state to help raise awareness and funds to adequately support colorectal cancer activities at both the local and national level.
- To recruit partners from local and national businesses, health organizations, media and those touched by colon and rectal cancer to help develop these events.
- To assist local organizers in identifying and directing funds raised to the best local organizations or programs that ensure our mission that all citizens have adequate information and access to screening for colorectal cancer.



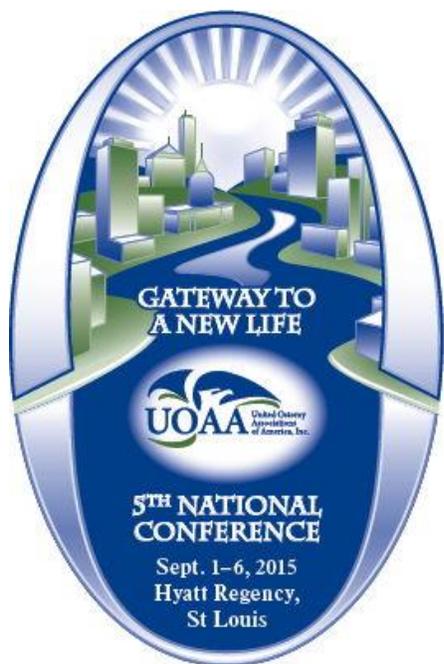
**JULIE'S CORNER***Ostomy Travel Tips*

**New:** See an [Extensive List of Travel Tips from TSA](#) – the US Transportation Security Administration.  
Also download UOAA's [Travel Communication Card](#) as an aid in dealing with airline security.

In these days where extra precautions for security are being taken worldwide, it would be wise for traveling ostomates to do advance planning in order to avoid possible problems. Some suggestions are:

1. Pre-cut all pouches at home, as you may wish to avoid having scissors in your carry-on luggage (see [additional comments below](#)).
2. Pack ostomy supplies in at least 2 places – carry-on and checked luggage.
3. Take extra supplies in case you are stranded where supplies may not be available.
4. A statement from your physician stating your need for ostomy supplies might be helpful. Also a statement advocating a private area be used in case of an extended search.
5. If traveling to a foreign country it is a good idea to have critical ostomy information written in their language. One of the 70 member associations of the [International Ostomy Association](#) (IOA) may be of help with this translation as well as with locating supplies while visiting their country.
6. A copy of the book "[Yes We Can](#)" (no longer in print but copies may be available) has many helpful hints and advice for traveling and also has a dictionary of ostomy terms translated to several different languages. There is important contact information for resources worldwide as well as a wallet-sized statement written in 11 languages that asks for privacy if a search is to be conducted.
7. One ostomate reported a very positive result from carrying photocopies of the catalog pages displaying and explaining his equipment. When a searcher asked about the items found on a hand search, he was able to explain their function without a long conversation that would hold up others in line. Our experience has been that over time the TSA agents are much more knowledgeable and sensitive to these personal care products.





# Celebrate!

*UOAA's 10th Anniversary at*

## **Our National Conference**

*September 1-6, 2015*

*in St. Louis, Missouri*

## **Your “Gateway to A New Life”**

*Traditionally, September is St. Louis' best weather month and we will be there to celebrate our new lives! St. Louis is a major U.S. port on the Mississippi River with lots of history right in the downtown area, the location of our conference hotel, the [Hyatt Regency St. Louis at The Arch](#).*

**Conference programming will begin on the morning of Wednesday, September 2<sup>nd</sup> and end the evening of Saturday, September 5<sup>th</sup>.**

[Online Conference Registration](#)

[Online Hotel Registration](#)

### *Highlights of Sessions and Speakers*

**ASG Leadership Academy** ... the 5 most critical problems facing ASGs, as determined by a survey of ASG leaders, will be addressed in this inaugural 7 hour session. Attendees will be recognized with a certificate of course completion.

**1<sup>st</sup> Timers Orientation and Reception** sponsored by **Coloplast** ... for those attending their 1<sup>st</sup> UOAA National Conference this session will explain the Conference's "What, Where, When and How." At the reception meet other "1<sup>st</sup> Timers" and the UOAA Board members in a social setting.

**1<sup>st</sup> Night Ceremonies** with featured speaker **Joanna Burgess** ... a heartwarming speaker whose ostomy journey of 45 years began when she was just three years old suffering from a rare type of bladder cancer and given only a 10% chance of survival. Joanna underwent many surgeries and medical challenges and will never regain full motion in her legs, but has a passion, and as a WOC Nurse, the ability to give back and be a source of strength for many people needing hope and guidance.

**Ice Cream Social** sponsored by **Hollister Incorporated** ... socialize while you enjoy an ice cream sundae with all of your favorite toppings being served by the UOAA National Leaders. A surprise entertainment event will round out this special evening.

**Stoma Clinic** ... a free opportunity for those who would like to meet one on one with a WOC Nurse, have their ostomy examined and have guidance regarding their pouching system and skin care issues ... appointment times can be obtained when registering on-site.

**Young Adults Workshops** ... educational programming will be presented to meet the needs of ostomates in the 20 to 30 age range.

**Coloplast Medical Chair** with featured speaker **Dr. Katherine Jeter** ... a most engaging, energetic, world renowned educator, will discuss what you as an ostomy patient should expect from a WOC Nurse and how to make the most of your visit with a WOC Nurse. Dr. Jeter is also into physical fitness and will share some of her insights about the 3,100 mile charity-benefiting cross-country bike ride she made at age 73.

**Exhibition Hall** ... a "kick the tires" opportunity to meet with representatives from our major ostomy pouching system manufacturers, suppliers and retailers, specialty manufacturers, related non-profit associations and many others. They will be on hand to talk about their services, answer your questions, demonstrate their latest products and, of course, provide samples.

**Educational Workshops** including "Basic Ileostomy," "Colostomy," "Urostomy" and "Continent Diversion;" "Intimacy and Dating;" "Ask the Doctors" and "Ask the WOC Nurses;" "Social Media Update;" "Advocacy Update" and "Medicare and Private Insurance Reimbursement Issues;" Spouses Meetings and Caretakers Boot-camp; "Basic Ostomy Nutrition" and "Nutrition and Short Bowel Syndrome;" "Anxiety and Other Ostomy Related Psychological Issues."

**Visitor Training, "Train the Trainers"** ... a workshop for ASG representatives to learn how to conduct a Visitor Training Session in their local ASG.

**Closing Ceremonies** with featured speaker **Bo Parish** ... a dynamic ostomate with a compelling story to tell. Bo was diagnosed with Crohn's Disease when 12 years old and for the next 13 years fought the disease and resisted surgery. After ostomy surgery he was determined to overcome his weakness and is now a triathlete completing his first triathlon 5 months after his surgery.

**"Till We Meet Again" Festivities** sponsored by **ConvaTec** featuring a dessert bar, vocalist **Tom Kelly** and dancing.

### Conference Registration

Please [click here for online conference registration](#). Or, if you prefer to mail a hard-copy registration form, you may [download a registration form here](#).

### Hotel Registration

Please [click here for online hotel registration](#) using our Hyatt "Passkey" link to get our discounted conference rate at the Hyatt Regency St. Louis at The Arch. You can also reserve a room by calling Hyatt at 888-421-1442.



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Wellness Education



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#### Our Vision

Colon and Rectal Surgery Associates is an innovative leader in colon and rectal surgery grounded in our belief that continued research, training and technology keep us on the forefront of our specialty and best serving our patients. We strive to have a collaborative, cooperative culture where excellence and innovation are valued. We care for every patient as we would care for our family members and ourselves.

#### Our Mission

Colon and Rectal Surgery Associates is an independent practice committed to:

- Providing the best care for the individual
- Training residents and future leaders in colon and rectal surgery
- Improving outcomes through education, research and meaningful collaborations

<http://www.colonrectal.org>

## Ostomy Procedures that Can Backfire

UOAA Update November 2014

There are times when we think we're doing the right thing, but get ourselves into trouble. Here are some instances to think about:

- Alcohol: Alcohol is a powerful drying agent. Prolonged contact with the skin can have serious consequences.
- Clamp Usage: Wrapping the drainable pouch tail around and around the clamp before closing it. This will not make the clamp work any better. All it will do is spring the clamp out of shape, which will ensure that the clamp won't work for future application and it will make releasing excess gas more difficult.
- Releasing Gas: Snapping the pouch off the face plate to expel gas. This doesn't do much for odor control! It's much better to hold the tail of the pouch beyond the clamp with a tissue, open the clamp and allow the gas out through the tissue with deodorant. Then use the tissue to clean out the end of the pouch and replace the clamp.
- Normal Wear Time: You shouldn't wear the appliance until it leaks. The object is to change the appliance before leakage occurs. This way, the skin gets the best protection and care. Three to five days is normal wear time. Some people report seven days, but manufacturers feel that this may be pushing their products to their limits.
- Washing Pouches: Washing pouches and using the same pouch for months will eventually saturate the plastic of the pouch with odor of the chemicals and no amount of washing will get rid of it. It is recommended that you throw the pouches away when you throw the face plate away.
- Experimenting With Appliances: Although it's fine to experiment with new appliances, especially if you're unhappy with your usual equipment, you'll generally get the best service from the equipment you have the most experience with.
- Ignoring Skin Problems: All skin problems are easier to manage if they are treated early.
- A Full Pouch: Letting your pouch get full before emptying it can separate a two-piece system. Try to empty your pouch when it's one-third to one-half full.
- Seat Belts: A well-placed and adjusted seat belt shouldn't interfere with stoma function or damage your stoma. True, in an accident your stoma may be damaged, but it's a lot easier to repair a stoma than a crushed skull.

Wound Ostomy Nurse: It's not a good idea to try to live with a condition you can't correct yourself. When in doubt, see your friendly wound ostomy continence nurse (WOCN) or your doctor.

One isn't necessarily born with courage, but one is born with potential. Without courage, we cannot practice any other virtue with consistency. We can't be kind, true, merciful, generous, or honest.

**Maya Angelou**

A successful man is one who makes more money than his wife can spend. A successful woman is one who can find such a man.

**Lana Turner**

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**To:**

**Please enroll me as a new member of the Ostomy Association of the Minneapolis Area**

If you haven't enrolled, 2015 Annual dues are \$25 and are due following your submittal of this form. Membership in the Ostomy Association of the Minneapolis Area includes 8 informative meetings, subscription to the "Ostomy Outlook" newsletter and an "Antless picnic" in June.

OAMA  
PO Box 385453  
Bloomington, MN 55438-5453

I have a: Colostomy  Ileostomy  Urostomy (ileal diversion)  Other  Non-ostomate

Name: \_\_\_\_\_  
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As a tax exempt Organization, all contributions and dues are tax deductible

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***OSTOMY ANNIVERSARY***

The Anniversary of my stoma is \_\_\_\_/\_\_\_\_/\_\_\_\_, and in order to celebrate my return to good health, I am contributing the sum of \_\_\_\_\_ or \$\_\_\_\_\_ per year for my stoma.

I hereby grant permission to print my name in the Chapter Newsletter.

Name \_\_\_\_\_ Years \_\_\_\_\_ Amount \$ \_\_\_\_\_

*Send this form with your check, Payable to OAMA*

----- ✂ -----