

Ostomy Outlook



NEWSLETTER OF THE OSTOMY ASSOCIATION OF THE MINNEAPOLIS AREA

Volume XXVI, Issue III

October/November/December 2012

NEXT MEETING

Date:	Monday, October 15, 2012	
Time:	6:30 PM	
Place:	United Methodist Church of Peace 6345 Xerxes Avenue South Richfield, MN 55423 612-866-0069	
Program:	Q & A Session Dr. Judith Trudel, Colorectal Surgeon	
Date:	Monday, November 19, 2012	
Time:	6:30 PM	
Place:	United Methodist Church of Peace	
Program:	Rap Session with Julie Powell	
Date:	No Meeting in December 2012	
Time:	6:00 PM	
Place:	United Methodist Church of Peace	
Program:	Happy Holidays to All!	

President:	Frank Moriarty	763-577-5907	moriartyf@earthlink.net
Secretary:	Carol Larson	952-934-3804	caroldavidlarson@aol.com
Treasurer:	Donald Heinrich	651-631-4978	donh17023@hotmail.com
Newsletter Editor:	Nancy Hagfors	952-237-6465	pitplayer@q.com
Membership:	Anne Marie Kronick	612-236-4899	amkronick@comcast.net
Hospitality:	Marilyn Carlson	952-941-9148	mcarlson@easween.com
Visitation (Outreach):	Fran & Bob Edelson	952-882-0154	fran.bob.edelson@gmail.com
ET Nurse CWOCA	Julie Powell	952-924-5086	jpowell1@fairview.org
Past Co-Presidents:	Marilyn Carlson	952-941- 9148	mcarlson@easween.com
	Anne Marie Kronick	612-236-4899	amkronick@comcast.net
	Amy Finley	763-561-2752	amynmandi@yahoo.com

Ostomy Association of the Minneapolis Area Web Site: www.mplsuoaa.org

United Ostomy Association of America Web Site: www.uoaa.org or www.ostomy.org

Mailing Address:

Ostomy Association of the Minneapolis Area
PO Box 38543, Bloomington, MN 55438-5453

The Ostomy Outlook is printed and circulated for people with colostomies, ileostomies, urostomies & alternative procedures, their families and other interested persons.

Consult your MEDICAL PROFESSIONAL before using any product or procedure published in this newsletter.

**Frank Moriarty
President's Message)**



This Sept we start another new year in our ostomy group and I am really looking forward to a great year. Our board has already planned some interesting and enjoyable programs.

Our September program will include the always popular "Getting to Know You" game. In October, we will have the very popular Dr. Judith Trudel, Colorectal Surgeon. She did a question and answer session with us several months ago and we all loved her.

Speaking of programs, nothing beats a program where we just talk to each other and share ideas, problems and solutions to the challenges we all face. We have reserved the time between 6:30 and 7:00 to allow us to meet and get to know each other just a little better and pass on hints and suggestions about ostomy problems we have solved. What a great time to support each other.

Finally, we welcome any ideas and suggestions, etc., regarding programs you, the members, would like us to add to future programs, or simply how we could improve the programs we currently offer. Please give this request some serious thought.

Frank Moriarty

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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 or amkronick@comcast.net



Finding and/or Keeping a Physician

Lots of people get their healthcare from a clinic these days and often that clinic is one that is 'preferred' by their insurance company. Many times the doctor that is assigned to be our primary care physician or specialist is a great fit. You respect the doctor. You feel that she/he really listens and cares for you. Often it is not a great fit and the doctor patient relationship just does not seem to click. What do you do?

It can be difficult to 'break up'. Remember how hard it was when you were a teenager and you didn't want to date him or her anymore. As the old song goes, "Breaking up is hard to do." Before doing that, however, it's best to articulate your issues with the doctor and see if you notice any changes and improvements. If nothing changes, it really is the best thing in the long run.

What next?

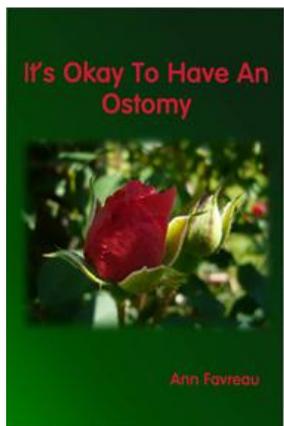
- Ask your friends and family for recommendations on doctors. In surveys doctors themselves regarded those recommendations very highly.
- Check online. You'd be surprised at the amount of information available on doctors there. Many clinics will list their entire medical staff, their education, their specialties, and sometimes their hobbies and other personal information. You can make a fairly good judgment from that information.
- Schedule an 'interview' appointment. Many clinics actually have that choice on their scheduling programs.
- Ask lots of questions and be honest. If your looking for a specialist, it's perfectly okay to ask about their experience and knowledge with your particular ailments. The more you know about your doctor, the more satisfied you can be with your healthcare.
- Be honest with the doctor about the part you play in your own care. Do you take your medicine as prescribed? Do you stick to the diet that has been recommended? The more open the conversation is between you the better healthcare you'll receive.

Surveys show that more and more physicians really appreciate a two-way relationship with their patients where each one contributes their share. Patients also report better health and healthcare when they have a good relationship with their doctor.

Ann Favreau has given all ostomates and their families a rare gift: her book of poetry, [It's Okay To Have An Ostomy](#). Her poems are intimate and honest, insightful and healing. It's a "must-have" for anyone who has had life-changing ostomy surgery due to cancer or other causes. Ann's book may be purchased for \$5.95 on Amazon.com. or on Kindle \$.99

Ann was the [2000-2002](#) president of the United Ostomy Association and is a member of the National Colorectal Cancer Roundtable. She facilitates an affiliated support group in Venice, FL. Her two other books, Window Eyes is on Amazon.com and Places may be ordered through favra1@comcast.net.

CAROL LARSON
caroldavidlarson@aol.com





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Book Review by Fran Edelson

Weathering the Storm

Carol Larson, the author, is our very own secretary of the Ostomy Association of Minneapolis. She has written many books about her life since her successful battle with colon cancer.

Carol's latest book deals with life-changing events that emphasize the importance of relatives, friends, and faith in God. It also emphasized after a life-changing event the importance of giving back to the community. It's a wonderful and rewarding way to say thanks for another chance with life.

Carol also offers some very practical advice on how to question a doctors diagnosis and how to deal with unpleasant procedures. Advice is also given about how to accept and love your new body image.

This is a must read for anyone who is going through a life crisis. It gives you hope and faith that the world will be better again, but different.

Good job, Carol.



Don't Forget!
Membership Dues are due for 2013, if you haven't paid them already!
 Meetings are the third Monday of every month except for July, August, and December.
 Could you bring treats to a meeting? Contact one of our board members.

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*.



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Wellness Education



GETTING TO KNOW ME!



Hi Fellow Ostomates!

My name is Ed Scinto and I come from the Iron Range (Mountain Iron, MN.) I married Margaret, an Iron Ranger from Buhl. We have three adult children who grew up in Bloomington. We also have eight wonderful grandchildren who live in Lakeville and Rosemount.

I graduated a long time ago from UMD in education and received my Masters Degree from Mankato in Administration.

My teaching career started in Gilbert, MN. for two years and then in Bloomington for 32 years. My career ended in 1992 in Bloomington as a Special Education Coordinator in charge of Developmental/Adapted Physical Education and Physically Impaired students K-12.

After retirement in 1992, I moved to Gull Lake (near Brainerd) for 2½ years. I became the Director of The Confidence Learning Center for The Facility of Cognitively Impaired Persons. After 2½ years I was back in the Cities and retired for good

I received my ileostomy in 2002 because of ulcerative colitis. Since that surgery it has been clear sailing for the past 10 years, except for two hernias. I am not limited in anyway as what I can do, or not do, or what I eat or do not eat. Joining OAMA has been extremely helpful. I don't miss many meetings and do enjoy listening, learning and sharing with fellow ostomates. The group has provided answers to many of my questions and reinforces things I do that others are doing. The speakers have been very helpful and informative. Our group nurse is fantastic. Thank you, fellow ostomates!

Ed Scinto

JULIE'S CORNER

Question:

How often should I change my pouching system?

Answer:

Changing the pouching appliance varies from person to person. Frequency of appliance change is dependent on many factors including the type of stoma, nature of the output, type of appliance and activity.

Schedule appliance changes when less stoma output occurs, usually in the morning or before eating or drinking for the day.

Rule of thumb: Plan for regular appliance changes, usually 1-2 times per week. Do not wait for leakage to occur before changing the appliance.

Change the appliance between regularly scheduled appliance changes for itching, burning under the appliance or odor. The above symptoms may indicate a leak.

Always keep a 2 week supply of pouches.

Contact your WOCN for persistent appliance leakage.

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*– Linda Bures Ileostomy, 30 years+
Past President of The United Ostomy Association
Olympia, WA Chapter*

- For use in colostomy, ileostomy and urostomy pouches and Stoma caps
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- Recommended by ET Nurses throughout the United States
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FUNNY SAYINGS – SIGNS

Courtesy Green Bay Area Ostomy Support Group

Door of a plastic surgeon’s office: “Hello. Can we pick your nose?”

At a towing company: “We don’t charge an arm and a leg. We want tows.”

On a plumber’s truck: “We repair what yours husband fixed.”

On a maternity room door: “Push. Push. Push.”

At an optometrist’s office: “If you don’t see what you’re looking for, you’ve come to the right place.”

At the electric company: “We would be de-lighted if you send in your bill however if you don’t you will be.”

Quote of the month:

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

The Secrets of Preventing Blockages and Hemias

*By Elice Feiveson, Edited by B Brewer, UOAA November 2011 Update
from Green Bay Area Ostomy Support Group, February 2012*

Blockages may occur when one is an ostomate. That's a fact of life. But certain steps can be taken to minimize the risk. Here are some ideas:

- When eating, always concentrate on chewing the food. Make sure it is chewed well before swallowing. For instance, if a piece of meat seems too tough and gristly, it might be better to take it discreetly out of your mouth. Don't take the chance of swallowing it and then having it cause a partial or full blockage.
- Try new foods in moderation. Do not eat a huge helping of something you have not tried before. This is a good rule to follow whenever you eat anything. Some ostomates may find it is better to eat small quantities of food at more times during the day than to eat one big meal.
- If a particular food has given you problems in the past, try to avoid it until you feel you can try it again without a problem. Most of us try very small amounts of problem foods from time to time, and if we chew them well and drink water with them, we are able to tolerate almost anything.
- Drink plenty of water or other fluids throughout the day. Some fluids may be substituted for water. These include fruit juices and non-caffeine herbal teas.

Hernia prevention is not under our control all the time. But there are certain proactive steps that we should do routinely:

- Never lift anything heavy. For some people, even ten pounds may be too much. Picking up children and tumbling around with them could cause problems. Any time you strain yourself, there is a potential for a hernia.
- Try to exercise three or four times a week. You should discuss a plan with your doctor. He or she will help advise you what is best for your health. Following the doctor's cautions. You will only benefit from exercise. You will build up your abdominal muscles, which will help prevent hernias. It is curious to note that every time a muscle is exercised, it tears a bit. Then when it repairs itself, it builds the muscle. A big tear is a hernia.
- Do not push boxes or heavy weights on the floor with your feet. This can definitely put a strain on your back and abdomen and possibly cause a hernia.

All in all, think before you act, and use common sense. We were given our brain to use as a tool, not an ornament. Be safe rather than sorry!!!

- Do not push boxes or heavy weights on the floor with your feet. This can definitely put a strain on your back and abdomen and possibly cause a hernia.

All in all, think before you act, and use common sense. We were given our brain to use as a tool, not an ornament. Be safe rather than sorry!!!

Some "senior" personal ads seen in Florida and Arizona newspaper:

Courtesy of Green Bay Area Ostomy Support Group, October 2011

SERENITY NOW: I am into solitude, long walks, sunrises, the ocean, yoga and meditation. If you are the silent type, let's get together, take our hearing aids out and enjoy quiet times.

WINNING SMILE: Active grandmother with original teeth seeking a dedicated flosser to share rare steaks, corn on the cob and caramel candy.

MINT CONDITION: Male, 1932, high mileage, good condition, some hair, many new parts including hip, knee, cornea, valves. Isn't in running condition, but walks well.



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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.

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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>

Why Visitors?

via *The Pouch*, Ostomy Support Group of Northern Virginia, via *UOAA Update*

Prior to ostomy surgery, patients are stunned to think that an internal part of their anatomy will soon be outside the body. To them, this is not normal. Bodily excretions were meant to go into the toilet-not into a pouch attached to the abdomen! So, when a doctor asks the patient if he or she would like to see a trained ostomy visitor, the first reaction is horror. It is bad enough to discuss this with the family-but **never** with a total stranger.

It is at a time like this that doctors should make the decision to have a visitor come to the hospital. It's only when an ostomy patient, while lying in bed with an unfamiliar ostomy pouching system attached to his or her body and still adjusting to the odors accompanying ostomy surgery, can look at another ostomate in amazement and see that the visitor is not "abnormal."

An ostomy visitor is like a strong sedative prescribed by the doctor. There is nothing more calming than to sit and talk to someone who has been through the same type of operation you just had. Suddenly, the answers to the questions begging to be answered are available-not from ostomy literature, but from a real - live ostomate.

In addition, the fact that the patient is finally learning to cope with the traumatic effects of ostomy surgery will help the doctor in follow-up care. Much has been written about holistic healing, i.e., the mind controlling the healing of the body. A positive attitude is the best way to promote healing of both mind and body. Therefore, whenever a patient is having difficulty accepting ostomy surgery, the first thing a doctor should prescribe is an ostomy visitor. There can be no better medicine for a frightened and insecure patient than a short, pleasant visit by someone who has been there (and done that)!



5k Run/Walk
for Colon Cancer Awareness

Saturday, October 6, 2012

Get Your Rear in Gear - St. Cloud

ZOMBIE 5K Run/Walk and Kids' Costume 1K

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The Ostomy Trap

By the Tulsa Ostomy Association via UOA of Chicago's "The New Outlook" August 2009

One trap we must avoid is letting our whole life revolve around our ostomy. Preoccupation with managing an ostomy can sometimes make us fail to realize how unimportant it is to other people.

Our families and friends are only concerned that we join them again in our usual activities of work and play. Sure, we have challenges managing our ostomies on occasion. However, people without ostomies have elimination problems at times, and if we can think back, we can probably remember when we had more than our share.

Now, we can enjoy a freedom not possible before our operation. We will continue to have upsets from time-to-time, but so do those who never had an ostomy. Our own experience, together with the shared knowledge of our fellow ostomy members, along with the advice of our doctors and WOC nurses, will see us through these infrequent and unpleasant episodes.

Other websites of interest:

A fellow member launched a website promoting lifestyle topics for those with an ostomy. Please click on the link below to be directed to that site.

www.havebagwilltravel.net

Below is a link to a website that you will likely find helpful. It's for the IBD &

Ostomy Awareness Ribbon. It's my understanding that they are getting some press, even from as far as Australia!

www.ibdandostomyawarenessribbon.bbnw.org

C.O.O.L. 2012 ~Celebration Of Ostomy Life



Join us in celebrating World Ostomy Day!

Saturday, October 6, 2012
Highland Park Pavilion, St. Paul
11:00 a.m. – 3:00 p.m.

A free event for ostomy awareness and to recognize World Ostomy Day
Featuring guest speakers, give-a-ways, vendors, ostomate testimonials,
food, clowns, face painting, balloon sculpting & more!

Join us to show people that having an ostomy is a very positive thing! On this
day, we celebrate individuals who have had this life-saving surgery, and
recognize their families and caregivers.

Highland Pavilion, 1200 Montreal Ave, St Paul, MN 55116

COMMITTEE    

For more information go to these websites:

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www.ostomyassociationofstpaul.org www.mplsuoaa.org www.uoaa.org

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To:

Please enroll me as a new member of the Ostomy Association of the Minneapolis Area
Or ** Renew My Membership**

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

Name: _____ Email Address: _____
Street: _____
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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 \$ _____

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