



SHORT CIRCUIT



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OCTOBER 2006 ISSUE

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If you have specific topics that you would like to see in the "Short Circuit" newsletter, please contact Katie at Fifth Avenue Medical.
 Phone (319)298-0953
 or Toll Free at (877)787-6790.
 Email: katiedostal@careprohs.com
 Website: www.fifthavenuemedical.com

Contact information for CR / IC Area Ostomy Support Group

Carol Haack
 Home 319-337-6749
 Cell 319-530-6749
 email: haack@infionline.net

*A Special Thanks to
 Fifth Avenue Medical
 for providing this newsletter.*

FUTURE MEETINGS & EVENTS:

***Please note that you can tune into the following stations if a meeting is cancelled due to inclement weather: Radio KXIC 800 AM or KCJJ 1630 AM in Iowa City and WMT 600 AM or KCRG 1600 AM in Cedar Rapids. KCRG-TV or KGAN-TV.

OCTOBER

Meeting Date: Monday, October 23rd, 2006
 Time: 6:30pm
 Place: Scanlon Room at Mercy Medical Plaza
 540 East Jefferson Street
 Iowa City, Iowa
 The Scanlon Room is on the lower level. Thanks to Mary McCarthy & Ricki Jones for hosting the meeting.

DECEMBER

Meeting Date: Thursday, December 14th, 2006
 Time: 6:30pm
 Place: Bonanza Family Restaurant
 3505 16th Avenue SW
 Cedar Rapids, Iowa
 319-396-1876

"We'll have an Ostomy gift exchange!"



☞ *Medicare Coverage* ☞
MONTHLY ALLOWABLES

- Drainable Pouches: 20 per month
- Urinary Pouches: 20 per month
- Closed pouches: 60 per month
- Irrigation sleeves: 4 per month
- Solid skin barriers and skin barriers with flange: 20 per month
- Ostomy belts: 1 per month

You are entitled to obtain 1, 2, or 3 months supply at a time if you live at home and 1 months supply if you are in a nursing home.

It is necessary to have a doctor's order or prescription in order to submit supplies to insurance.

If you need more supplies other than those allowed, you will simply be required to obtain a letter from your doctor explaining the medical reason for needing more supplies than the usual maximum quantities as listed above. Your supplier does not need to routinely submit this letter with your claim, but must keep it on file in your records as a copy may be requested.

From United Ostomy Association, "Medicare Policy for Ostomy Supplies Improved"



HELPFUL PHONE NUMBERS AND WEBSITES

AMERICAN CANCER SOCIETY 1-800-227-2345
www.cancer.org

CROHN'S & COLITIS FOUNDATION 1-800-343-3637
www.cdfa.org

CONVATEC 1-800-422-8811
www.convatec.com

CYMED 1-800-582-0707
www.cymed-ostomy.com

FRIENDS OF OSTOMATES WORLDWIDE (FOW-USA)
www.fowusa.org

HOLLISTER 1-800-323-4060
www.hollister.com

UNITED OSTOMY ASSOCIATION OF AMERICA
 1-800-826-0826
www.uoaa.org

UOAA E-MAIL info@uoaa.org

WOUND OSTOMY AND CONTINENCE NURSES SOCIETY
 1-800-224-WOCN (9626)
www.wocn.org

CEDAR RAPIDS/IOWA CITY AREA OSTOMY SUPPORT GROUP E-MAIL
cr_ic_ostomy@yahoo.com



1. Update on International, National and Local items of Interest
Next Meeting we will talk about...

2. Training for Visitor Program
3. Round table discussion topics:
 Things I Never Leave Home Without
 My Favorite Ostomy Travel Tip

Directions to Mercy Medical Plaza in Iowa City:
 From Interstate 80, take the Dubuque Street exit and go south. Turn left (east) on Jefferson Street. Mercy Medical Plaza will be on the left, on the corner of Jefferson and Johnson. The Plaza has its own parking lot and it's very close to the door. Take the elevator or stairs to the Scanlon Room on the lower level. See you there!!

Welcome!

The CR-IC Ostomy Support Groups welcomes all persons who have, or will have, a temporary or permanent bowel or urinary diversion – caregivers, spouses, children and friends are all welcome, too! We meet bi-monthly to discuss topics and share information and items of interest. If you are unable to come to a meeting and have questions we can help with, or if you'd like to schedule a home or hospital visit from one of our members, give us a call:

Vicki Kee, Visitor Coordinator
 319-338-2751

Carol Haack, Group Coordinator
 319-337-6749

Email Information

Our group has its own email address! We've created an email address for our group, and will be printing it on our new brochure. The email address will make it easier for new ostomates – especially "younger" people to contact us for information. Carol has agreed to monitor the email address and respond to inquiries. If anyone else would like to do this task for a while, please let her know!

Here is our email address:
cr_ic_ostomy@yahoo.com

Notes from August 28th, 2006 Meeting:

Local ET nurses have told us that there is a definite need for our Visitor Program to be reinstated. I'm sure all of us remember what it was like when we had ostomy surgery, and not all of us were lucky enough to be able to talk to someone with an ostomy. There are many concerns and fears that new ostomates and their families have. Participation in the Visitor Program is a great way for you to show new ostomy patients and their families that they can live a full and productive life after surgery.

In order to have a successful Visitor Program, we need you! We will provide visitors to patients who request them, matching them according to gender, type of surgery, age, and diagnosis. To do so, a wide assortment of volunteer visitors are required. Non-ostomate family members and caregivers are welcome to join you in your Visits when appropriate, and should plan to attend the Visitor Training as noted below.

Our October meeting will include Visitor Training. We will do this towards the end of the meeting. If you are not able to attend the October meeting and you are interested in becoming a Visitor, please contact Vicki Kee by telephone at 319-338-2751, by e-mail at vicki-kee@iowaostomy.org, or by regular mail at P.O. Box 133, Oakdale, IA 52319.

Give her your name, address, phone number, gender, age, type of surgery (ileostomy, colostomy, urostomy, or continent diversion), diagnosis, the cities in which you are willing to visit patients (Iowa City area, Cedar Rapids area, or both), day/time limitations, and any special expertise that you have. She will mail you the training materials. We will repeat the training program at one of our Cedar Rapids meetings in the next few months, and from time-to-time as needed.



Upcoming Cedar Rapids/Iowa City Area Ostomates' Meeting

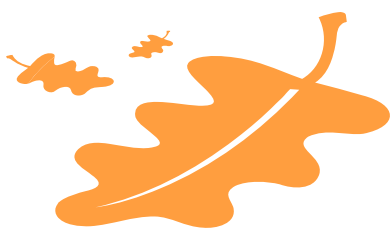
Where: Scanlon Room at Mercy Medical Plaza in Iowa City

When: Monday, October 23rd, 2006 at 6:30pm

Topic:

- 1. Update on International, National and Local items of Interest*
- 2. Training for Visitor Program*
- 3. Round table discussion topics: Things I Never Leave Home Without My Favorite Ostomy Travel Tip*

Please come and bring your ideas to share!



Have you subscribed to the Phoenix?

The Phoenix is the official magazine of the United Ostomy Associations of America (UOAA). The UOAA receives a significant portion of its operating revenue from magazine subscriptions. The magazine contains regular features such as "Ask the WOC Nurse" and "Ask the Doctor", as well as informative and inspirational articles by and about ostomates. A one year subscription is only \$25.

Need a ride to the next meeting?

Call Carol Haack 319-337-6749
Or Vicki Kee 319-338-2751

October 7, 2006
World Ostomy Day
To encourage global awareness of the Rehabilitation of Ostomates around the World.

August 16-18, 2007 UOAA National Conference, Chicago, IL

Next year, the UOAA will convene its first National Conference at the Lincolnshire Marriott Resort situated 18 miles northeast of Chicago's O'Hare airport. There will be educational seminars, new product information and a social evening sponsored by one of the leading ostomy supply manufacturers.

Visitor Training for our Group:

One of the responsibilities of being affiliated with the UOAA is for each group to have a Visitor Program. Visits are made via telephone, in person at the hospital, or in the patient's home. Often a follow-up visit or two is required. We'll be watching a very short Visitor video at our next meeting, which is on October 23rd.

Special Messages

Happy Birthday!!

The UOAA – United Ostomy Associations of America is one year old! The UOAA was created last year after the UOA (United Ostomy Association) disbanded after many years of service to ostomates and their caregivers. The UOAA is a “virtual” organization, with very little overhead and a volunteer Board of Directors. Our group the Cedar Rapids – Iowa City Area Ostomy Support Group # 171 is affiliated with the UOAA. Membership dues will be \$2.00 per member, beginning in 2007. The UOAA’s primary source of income is The Phoenix Magazine.

The UOAA provides information, support and advocacy to its member groups.

THANK YOU!

A heartfelt “Thank You” to all of my ostomy friends who sent cards, flowers and well wishes during my Mom’s recent illness. She passed away on August 28th. My Mom was a wonderful support to me, and made it a point to learn all she could about Crohn’s Disease and Ostomys.

Looking for a Place to Donate Old Ostomy Products that you no longer have a use for?

Friends of Ostomates Worldwide (FOW) accepts donations of new, unused pouches, flanges (face plates), skin barriers, skin wipes, past, tapes, belts, pouch deodorant, pouch covers, scissors, wrapped soap (small hotel soaps are good), and pediatric supplies. FOW cannot ship flammables, liquids, aerosols, or used equipment. When donating, FOW asks that you include the donor’s name on both the inside and outside of the carton. A letter of receipt that can be used for tax purposes is mailed to each donor.

Donations can be sent to:
FOW-USA Project S.H.A.R.E.
4304 Regency Drive
Glenview, Illinois 60025-5200

For more information, you can contact FOW at info@fowusa.org



Commandments for New Ostomates

- Thou shalt not take out thy feelings of anger and frustration on thy spouse/significant other or family.
- Thou shalt not demand special consideration. Thy ostomy doth not make thee an invalid or render thy disabled.
- Thou shalt remember to use deodorizer in the bathroom after thou has emptied thy pouch. Remember thy family needs thy love and affection just as thee needs theirs.
- Honor thy ET—she/he is your friend in need.
- Thou shalt not be ashamed of thy ostomy; it may have saved thy life.
- Thou shalt be ready at all times to help others as others have helped thee.
- Thou shalt not feel sorry for thy self, instead thou shalt give thanks for a new lease on life.
- Thou shalt remember at all time that thy partner in life suffers with thee and thou shalt not add to his/her suffering.

Above all thou shalt give thanks for a new life and freedom from pain

(by Ron Bartlett, Halton-Peel)

Unfit Exercises

These activities often use the body's energy unproductively. If you engage in any of these activities, think about saving some of the wasted energy for a more healthy activity.

- Jumping to conclusions
- Pushing your luck
- Beating your head against a wall
- Making mountains out of molehills
- Fishing for compliments
- Dragging your heels
- Adding fuel to fire
- Throwing your weight around
- Dodging responsibility

ODOR MANAGEMENT

Isn't it interesting that people with normal intact bowel tracts and urinary systems manage odor problems in an acceptable manner in our society? But when disease or trauma strike, and the person is the owner of an ostomy, the one big concern is the fear of offending society with an odor.

Basically, and simply, an ostomy is a man-made exit site that changes the point of exit from the bottom of our body to the front. Our eyes and nose are obviously on the front of our body, which leads us to be more aware of our changed body image and our odor-producing products.

You've heard the statement "You've come a long way, baby." Yes, ostomy management has come a long way—considering that as little as ten years ago we had very few 100 percent odor-free pouches. When ostomy surgery was first developed, ostomates wore anything to collect output. Tin cans, rubber gloves, cups of all sizes, bread wrappers, and plastic margarine cups, just to mention a few, were standard supplies for the ostomate. Not only the feasibility, but odor problems these type of supplies produced, was enough to give ostomy surgery and people with ostomies a deplorable place in our society. Presently, almost all ostomy supplies available to us today are made of odor-barrier materials. Therefore, if an ostomate does have a fecal or urinary odor about them, some detective work should be done: Check out the application of the pouch to the body—is it leaking?

Check out the closure of the pouch—is it closed properly so that no fecal matter oozing out after the closure is applied? Do not put holes in the pouch as gas will seep out continuously.

A urostomate should rinse or wipe off the spout of the pouch with a bathroom tissue after emptying. Those few drops left in the spout after closing the pouch can cause a urine odor under clothing. It's interesting to note that most urostomy pouches on the market are odor-proof, but the connector tubing and bedside and leg bags are not. You must dispose of and replace these products when they take on odors, or else your entire living quarters will smell.

Emptying an ostomy pouch is comparable to a person with an intact bowel or urinary tract having a bowel movement or emptying their bladder. How does the nonostomate handle the odor produced by this normal function of their body? Room deodorizing sprays are popular; a quick flush of the toilet when defecation occurs, and striking a match or opening a window are some acceptable methods that have been used for odor management since the invention of indoor plumbing.

Why then are we ostomates so "up-tight" about the odor produced when our pouches are emptied? This complaint has encouraged ostomy supplies manufacturers to create products to meet this need of "odor control." The trouble is, the ostomy deodorants do not work for everyone, and they are expensive.

Can we then consider ourselves "as normal as blueberry pie" so far as waste odors are concerned? Just remember, there is not a man or woman on this earth whose wastes do not smell. If someone tells you their waste products are odorless, then a nose overhaul is in order.

By Rosemary Van Ingen



Thyroid Disease

Thyroid diseases affect millions of Americans. The most common conditions are an under-active or an over-active thyroid.

Too little hormone release, hypothyroidism, may result in weight gain, intolerance to cold, depression, fatigue, or sleeping problems. Too much hormone release, hyperthyroidism, may cause weight loss, intolerance to heat, nervousness, jitteriness, or trouble concentrating.

To diagnose thyroid dysfunction, a simple blood test can measure the level of thyroid hormones and the presence of antibodies. Other tests can confirm the exact nature of the condition. To correct thyroid problems, doctors usually recommend medical treatment alone or in combination with either radiation or surgery.

Thyroid surgery is performed for several reasons: Thyroid cancer, to remove a goiter or lump on the thyroid, when medical management alone is not effective, or when a pregnant woman's hyperthyroidism cannot be controlled by other means. In most cases, thyroid surgery takes no more than two hours.

(Health Notes from the Physicians at Washington University School of Medicine in St. Louis, MO, November 2, 2002)



Take Your Best Shots

Each year, up to 40,000 Americans die of diseases that could have been prevented by routine adult vaccines. That's about the same number of people who die annually from auto accidents. Don't assume your physician is keeping track. "Your auto mechanic probably does a better job of reminding you about preventative maintenance than your doctor does," says James Singleton of the National Immunization Program at the Centers for Disease Control. Depending on your own health history, there are a number of adult vaccines you should consider to protect yourself against potentially fatal diseases.

The Vaccines and Who Needs Them:

Influenza (1 shot annually). This virus causes the flu and an average of 20,000 deaths year. The following is a list of those who should have an annual flu shot: Adults age 50 & up, people with asthma, diabetes, heart, lung, kidney disease, or with compromised immunity, nursing home residents, health care workers, and anyone anxious about flu.

Pneumococcal (1-time shot). These bacteria cause pneumonia and can lead to more serious problems, like meningitis. Adults age 65 & up, those with chronic heart, lung, kidney or liver disease, diabetes, sickle-cell disease, alcoholism or compromised immunity, or w/spleen dysfunction.

Hepatitis B (3 doses over 6 months). This is transmitted through blood and can cause liver disease. Those who are susceptible for hepatitis B are people who live with or have sex with carriers of hepatitis B, people who abuse injectible drugs, men who have sex with men, kidney dialysis patients, health care workers and travelers to endemic areas.

Tetanus (booster every 10 years) A bacterial infection, it can affect the nervous system.

(Consumer Reports)

OSTOMATE-A BOXER- IN AWARD-WINNING FILM:

Yes, you heard right- a boxer. In 2002, independent filmmaker John Sullivan produced a documentary about an American lawyer, living in Thailand, who took up amateur boxing in his 30's to improve his overall health. Lawyer & Boxer Craig Wilson later learned that his long-standing ulcerative colitis had developed into colon cancer, and he underwent ileostomy surgery.

Then he returned to the boxing ring, where it is not unknown for him to defeat someone who is half his age! The film "*Farang Ba*," tells his story and goes through one day of preparing for a bout, complete with the routine care of his ostomy.

Also, included is an interview with his surgeon, Bruce Orkin, MD. "*Farang Ba*" is literally translated as "Crazy Foreigner", an affectionate name Craig was given by his trainer, and one he wears with pride.

For more information from us about this, and in the meantime see more details for yourself at:

<http://www.buyindies.com/listings/1/0/1091054311859.html>

**Cedar Rapids/Iowa City
Area Ostomates
c/o Fifth Avenue Medical
402 10th St. SE, Suite 600
Cedar Rapids, IA 52403**

Reminder: October Meeting
Date: Monday, October 23rd, 2006
Time: 6:30pm
Look inside for details!