



# SHORT CIRCUIT

© 2015 Cedar Rapids / Iowa City Area Ostomy Support Group #171, Inc. — an affiliate of UOAA, Inc.

[www.iowaostomy.org](http://www.iowaostomy.org) *Our 43rd Year!* Serving Ostomates of Eastern Iowa since 1972 *May 2015*

## **Welcome!**

The Cedar Rapids / Iowa City Area Ostomy Support Group is dedicated to providing information, advocacy and service to our members, their caregivers, and to the intestinal and urinary diversion community at large.

## **Our local chapter**

We meet regularly to share experiences, provide mutual support and learn about the latest products and information for ostomy, urostomy and intestinal diversions.

Meetings are held at area hospitals, and involve informal round-table discussions on topics of interest, new product demonstrations, occasional guest speakers, and a question and answer session with one of the local WOC nurses. Families and friends of ostomy and intestinal diversion patients are always welcome to attend.

**For more information about the local chapter**, contact us at 319-530-6749, at [www.iowaostomy.org](http://www.iowaostomy.org), or [find us](#) on Facebook.



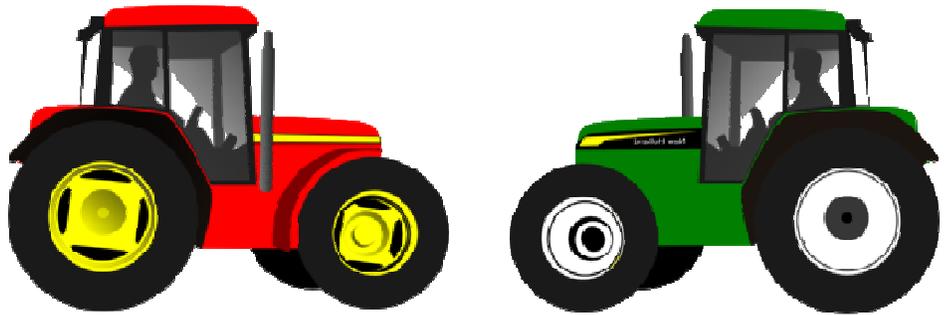
## **The U.O.A.A.**

The United Ostomy Associations of America is a 501(c)(3) non-profit organization. The UOAA serves to unify and strengthen ostomy support groups in America.

UOAA services include: Advocacy • Non-profit Status • Conferences • The Phoenix magazine • Toll-free Help and Referral Line • Special Interest Groups • Ostomy Community Liaison

**For more information**, contact the UOAA at 800-826-0826, or at [www.ostomy.org](http://www.ostomy.org).

*“Seize the Opportunity”*



## **From our Coordinator...**

Our next meeting is Tuesday, May 19th at 6:30 pm. We'll meet at the Iowa River Landing Clinic in Coralville. The building is easy to get to, and parking is right in front of the door in a covered ramp. From I-80, take the 1st Avenue-Coralville exit #242. You'll see the tall University of Iowa Health Care building just to the south of the interstate. There will be signs inside directing you to the room.

At our May meeting we'll have a presentation from Heather Nelson, NPS Pharmaceuticals, on short bowel syndrome. We'll also hear about the upcoming Youth Rally camp for kids with bowel related health situations.

At the Ostomy Education Day in Des Moines in April, we met a young lady named Ashley who hopes to attend Youth Rally this summer. She has several bowel issues but is spunky, knowledgeable and just a charming young person. As Bonnie said, she just makes you want to give her a hug!

Our group has supported a young person at Youth Rally camp for the last several years. Our group decided at the April meeting to support Ashley if she is able to go. Please send your donation to Vicki Kee, Treasurer, at P.O. Box 5227, Coralville, IA 52241. Make sure you note it is for Youth Rally, and make the check out to *Cedar Rapids/Iowa City Ostomy Support Group*. You may also bring your donation to the May meeting.

Our picnic this summer will be on Saturday, August 1st at 5:00 pm, at the Lagoon Pavilion at Jones Park in Cedar Rapids. This is the same place we've been having the picnic. We will again have a potluck, so please bring a dish to share, and a beverage. We will provide plastic silverware and paper plates. There is a shelter, picnic tables, and electricity if you need to plug in a crock pot. This is always a fun get-together. Friends, families and caregivers are welcome to join us.

*Continued on page 2*

***This and That... ostomy news you can use!***

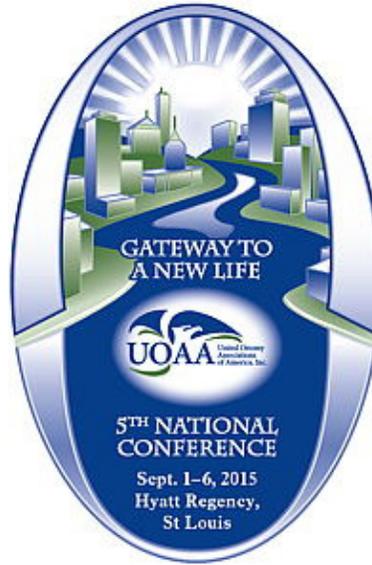
At our April meeting at Unity Point/St. Lukes we gave away samples of products which the UOAA had sent to our group. We also gave away product samples we collected from the vendors who were at the Ostomy Education Day in Des Moines. Also, thanks to Amber Hoyt, WOCN from St. Lukes who had extra supplies that our group members could take home.

A couple of our members are interested in going to the UOAA National Conference in September this year. It's in St. Louis, which is practically our backyard! Our group will use some of the money in our treasure to help our members attend. If you are interested in going to conference, please contact either Gina, Bonnie or myself, and/or see the UOAA website at [www.ostomy.org](http://www.ostomy.org).

Finally, several members mentioned they'd heard that a regular aspirin in the ostomy bag can help with odor. A WOCN once told me, "if you can put it in your mouth, you can put it in your bag". Aspirin is cheap, so it's worth a try!

See you May 19. *Carol Haack*

***THE COUNTDOWN CONTINUES...***



**125 DAYS  
TO GO  
UOAA 2015  
NATIONAL  
CONFERENCE**

***Gain Knowledge and Insight!***

***Fantastic Workshops with  
Brilliant Speakers!***

*Some of the many features include:*

- Ask the WOC Nurse and Ask the Docs
- Emotional issues
- Pain management
- Social life and dating
- Skin issues
- Spouse's meetings
- Young adult workshops offering specific advice and support, to meet the needs of the younger community
- Basic Colostomy, Ileostomy, Urostomy, Continent Diversion information
- Colostomy Irrigation

Also enjoy yoga and meditation each morning

**Register Now!**

[www.ostomy.org/2015\\_National\\_conference\\_page.html](http://www.ostomy.org/2015_National_conference_page.html) **www.ostomy.org**

**Get Ostomy Answers!**

The Phoenix is the leading national magazine for ostomates, their families and caregivers. Each issue contains 72 pages of inspiration, education and information including new products, medical advice, management techniques, personal stories and more.



Subscriptions directly fund the nonprofit United Ostomy Associations of America – the only national organization providing vital information, resources, support and advocacy for ostomates.

**Phoenix**



One-year subscription \$29.95    Two-years for \$49.95  
Payable to: The Phoenix magazine, P.O. Box 3805, Mission Viejo, CA 92690

Name \_\_\_\_\_  
Address \_\_\_\_\_ Apt/Suite \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



## Do You Shop Online?

This is a super easy way to support our Support Group whenever you shop online. Install the [iGive.com button](#) on your computer's browser. Each time you shop online, click the **iGive** button, and the online store will automatically donate money to our group. This is at no extra cost to you!

Here's how to get started:

1. Go to [iGive.com](#)
2. Create a member account. All you need is your name and email address.
3. To support our group, click Search by Name. Enter the word "ostomy" in the search box.
4. When the list of ostomy related organizations comes up, click our group, the Cedar Rapids/Iowa City Area Ostomy Support Group.
5. To put the iGive button on your browser, click the *Install Now* button. You'll need to restart your browser to have the iGive button appear in the menu bar.
6. Add your favorite online stores to your iGive button.
7. From now on, every time you shop online, use your iGive button. You'll earn a donation for our group!

## FOW-USA Seeking Board Members

### Do You Want to Help Needy Ostomates Around the World?

The Friends of Ostomates Worldwide-USA is a volunteer-run, non-profit organization, providing ostomy supplies and educational materials to ostomates in need around the world. Founded in 1968, we collect donated ostomy equipment from individuals and groups in the US, and send overseas, through clinics, hospitals, cancer societies, and ostomy groups. Please see our website: [www.fowusa.org](http://www.fowusa.org)

Imagine not having the equipment we are used to, because of cost or availability, and using rags, plastic bags, and tape. Imagine having skin breakdown and odor. Your family and community may reject you, and your kids may not be able to go to school.

We have been making a difference for needy ostomates, sending over 300,000 pounds of supplies, worth over \$15,000,000, to over 70 countries.

We are looking for a few volunteers for our Board of Directors. We meet by teleconference several times a year as necessary. We have one face-to-face meeting a year. We need those committed to the ostomy cause; with access to a computer; and willing to serve on a task force or committee matched to your skills (e.g., public relations; fund-raising; databases; website).

Please go to our website and click on [contact us](#) to express your interest. We will need a reference regarding your previous or current volunteer work.

The **SHORT CIRCUIT** is the official newsletter of the Cedar Rapids / Iowa City Area Ostomy Support Group #171, and is published 6 times per year.

**MEMBERSHIP** is open to ostomates and their families, friends and caregivers. Dues are \$10 per year and include an **email** subscription to the SHORT CIRCUIT newsletter. Copies are also available free on our website at [www.iowaostomy.org](http://www.iowaostomy.org).

If you wish to subscribe to the **printed edition of the newsletter** there is an *additional* \$10 charge per year to cover the costs of printing and mailing.

Membership dues and print subscription fees are collected on the honor system. If you are reading this newsletter you are a member even if you are not able to attend meetings. Your membership fee is tax deductible and will help support educational activities for ostomates in eastern Iowa. Send membership dues and subscription fees to Vicki Kee, at the address in the column to the right.

Our **WEBSITE** is [www.iowaostomy.org](http://www.iowaostomy.org). It contains helpful information, meeting schedules, archived editions of the SHORT CIRCUIT, ostomy-related books that we recommend, and a link to **Amazon.com**, which pays our group commission each time a purchase is made through our website.

**Officers** of the Cedar Rapids / Iowa City Area Ostomy Support Group  
[info@iowaostomy.org](mailto:info@iowaostomy.org)

**Gina Carlile, Visitor & Membership Coordinator**  
309-292-0150

**Carol Haack, Coordinator & Newsletter Editor**  
319-530-6749

**Vicki Kee, Treasurer**  
P.O. Box 5227  
Coralville, IA 52241  
319-853-8765

# Meeting Schedule 2015



- Tuesday, May 19, 2015 **Support Group meeting** UIHC Iowa River Landing Clinic, Coralville. 6:30 pm. Presentation by Heather Nelson, NPS Pharmacueticals, on short bowel Syndrome. From I-80 take exit 242 (1st Avenue) in Coralville. The University of Iowa Health Care Building is just south of the interstate. Park in the ramp, very close to the front door.
- Thursday, June 18, 2015 6:30 pm **Support Group meeting** Mercy Medical Plaza, Iowa City (across from Mercy Hospital in Iowa City.) Take the elevator to the lower level. We'll meet in the McAuley room.
- Saturday, Aug. 1, 2015 5:00 pm Summer Picnic Jones Park, Cedar Rapids, at the pavilion near the lagoon. Potluck, please bring a dish to share. Table service and paper plates provided. Families and friends are welcome!
- Thursday, Aug. 20, 2015 6:30 pm **Support Group meeting** Mercy Medical Center, Cedar Rapids. Training Room B on the lower level
- Tuesday - Sunday Sept 1 - 6, 2015 **5th UOAA National Conference**, St. Louis, MO. Check the UOAA website at [www.ostomy.org](http://www.ostomy.org) for more information during the coming months.
- Tuesday, Sept. 15, 2015 **Support Group meeting** UIHC Iowa River Landing clinic, Coralville.
- Saturday, Oct. 3, 2015 **World Ostomy Awareness Day**
- Thursday, Oct. 22, 2015 **Support Group meeting** St. Luke's Hospital, Cedar Rapids.

**Meeting cancellations** — If it becomes necessary to cancel a support group meeting due to weather conditions, the information will be posted on our website: [www.iowaostomy.org](http://www.iowaostomy.org). If you receive the Short Circuit via email, you will also receive an email notice of cancelations. If you suspect a meeting will be cancelled because of inclement weather but don't have access to email, just give Carol or Gina a call to find out the status of the meeting. Phone numbers are at the bottom of page 2.

**Contact information...** *looking for information on ostomy products or ostomy –related organizations?*

**Manufacturers** - most have an ostomy nurse on staff to answer your questions about products. They'll even send you free samples to try!

Coloplast	888-726-7872	<a href="http://www.us.coloplast.com">www.us.coloplast.com</a>
ConvaTec	800-422-8811	<a href="http://www.convatec.com">www.convatec.com</a>
CyMed	800-582-0707	<a href="http://www.cymed-ostomy.com">www.cymed-ostomy.com</a>
Hollister	800-323-4060	<a href="http://www.hollister.com">www.hollister.com</a>
Marlen	800-321-0591	<a href="http://www.marlenmfg.com">www.marlenmfg.com</a>
Nu Hope	800-899-5017	<a href="http://www.nu-hope.com">www.nu-hope.com</a>

**Suppliers** - will send a free catalog featuring many brands of ostomy supplies. A great way to compare products!

AOS Medical Supply	800-858-5858	<a href="http://www.mmsmedical.com/aos">www.mmsmedical.com/aos</a>
Byram Healthcare	877-902-9726	<a href="http://www.byramhealthcare.com">www.byramhealthcare.com</a>
Duke Medical Supply	888-678-6692	<a href="http://www.dukemedicalsupply.com">www.dukemedicalsupply.com</a>
Edgepark Medical	800-321-0591	<a href="http://www.edgepark.com">www.edgepark.com</a>
Liberty Medical	888-844-2651	<a href="http://www.libertymedical.com">www.libertymedical.com</a>
SGV Medical	800-395-6099	<a href="http://www.sgvmedical.com">www.sgvmedical.com</a>

**United Ostomy Associations of America**  
800-826-0826 [www.ostomy.org](http://www.ostomy.org)

**Wound, Ostomy and Continence Nurses Society** 800-224-9626 [www.wocn.org](http://www.wocn.org)

**Friends of Ostomates Worldwide-USA**  
[www.fowusa.org](http://www.fowusa.org). Donate unused supplies.

**Osto Group** free product for the uninsured  
877-678-6690 [www.ostogroup.org](http://www.ostogroup.org)

**American Cancer Society**  
800-227-2345 [www.cancer.org](http://www.cancer.org)

**Crohn's & Colitis Foundation**  
800-343-3637 [www.cafa.org](http://www.cafa.org)

**UOAA UPDATES** is how our national organization communicates to all support groups and members about what is happening throughout the organization.

## PRESIDENT'S MESSAGE



To our members, friends and partners,

We're looking forward to seeing everyone at our 5<sup>th</sup> National Conference, "Gateway to a New Life," September 1-6 at the Hyatt Regency St. Louis at the Arch. Please go to our website [www.ostomy.org](http://www.ostomy.org) for up to date information about sessions, things to do in St. Louis, hotel information, and to register online.

As a previous Affiliated Support Group (ASG) leader, I know the importance of having regular meetings for people that have or will have surgery. Talking with people face to face makes a real difference in going forward with your life after surgery. We know how much work it takes to organize your group and these meetings, and that you are facing several challenges these days. Many ASG leaders have told me that younger people do not attend ASG meetings because they are getting most of their information and support from social media and the internet. This is just one of the many important topics that will be covered at the ASG Leadership Academy at our Conference in September.

We do not provide medical advice, but we do assist people in adjusting to life with ostomy or continent diversion surgery, and that is not something that the physician or many nurses have time to share. We do offer an individual membership for those people that are not near an ASG. This member will receive updates and is a part of UOAA. By being a member of an ASG and supporting UOAA by sending in your membership dues, allows us to continue to send our new patient guides and trifold informational literature to doctors, nurses and members, and advocate for people with ostomy and continent diversion surgery.

**BALLOT RESULTS** - Thank you to all who voted. The constitutional amendment allowing all amendments to be voted on by email has passed.

**WORLD OSTOMY DAY- SATURDAY OCTOBER 3, 2015** - Please add this important date to your newsletters. World Ostomy Day is recognized every three years on the first Saturday in October, and is an excellent opportunity to hold an educational event in your area. We encourage all ASGs to begin planning an event to mark this occasion.

**UOAA ELECTIONS**- Our office will be sending out the national election information by April 10, 2015, so please be on the lookout for candidate information. AGSs that are current with their dues to UOAA are eligible to vote.

**ADVOCACY** - Our need for awareness-raising and advocacy is ongoing. We are continuing our response to two recent anti-smoking ad campaigns that used the prospect of ostomy surgery as a scare tactic. While UOAA supports encouraging people to reduce their risk factors for colorectal cancer, we will continue to speak out against any campaigns that cast these life-saving surgical procedures in an unnecessarily negative light.

**WANNAWEARONE 5K RACE** - The second annual WannaWearOne Ostomy 5k will again be held in Durham, NC on October 3rd. Additional events are in the planning stages, so please be on the lookout for ways to get involved in a local race, or take part in a virtual race. Stay tuned for more information!

**TEAM OSTOMY UNITED** - A team of people who have had ostomy or continent diversion surgery is training to participate in the Lake Meridian Triathlon in Kent, Washington on August 23, 2015. To find out how to join or support them, visit <https://www.facebook.com/OstomyUnited>.

**YOUTH RALLY - There IS a camp for THAT!** The Youth Rally is a week long summer camp for kids and teens living with congenital birth defects, chronic illness, and trauma that have affected their bowel and/or bladder systems. The majority of these youth have had, or may one day face, ostomy surgery. Staffed by volunteer counselors who live with similar diagnoses, the Youth Rally provides a safe and welcoming environment for young people to learn from each other, instill confidence in one another, and perhaps most importantly, realize that they *are not alone*.

The 2015 Youth Rally will take place July 13th - 18th at the University of Colorado in Boulder, CO. Applications for campers, counselors, nurses, and the counselor-in-training leadership program are currently available at [www.rally4youth.org](http://www.rally4youth.org).

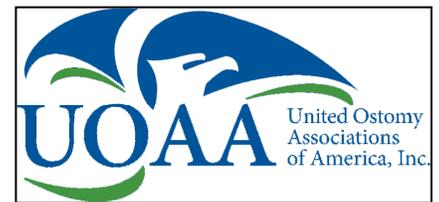
Best Regards,

Thank you,



Susan Burns  
President, UOAA





## **AFFILIATED SUPPORT GROUP (ASG) UPDATE - APRIL 2015**

Dear Members,

First, we appreciate the cooperation and courtesy provided by the Affiliated Support Groups (ASGs) when they were contacted by a member of the Management Board of Directors or a member of the ASG Advisory Board. The information you have or will provide will serve as a reference for the Management Board of Directors as they make decisions that impact the future of UOAA.

Second, we are finding that calling ASGs and getting involved in a game of telephone tag is taking longer than expected so we will begin sending the questionnaire via email to speed up the process. That doesn't mean the telephone calls will stop! You may be contacted via telephone and you are always welcome to call when you receive the email. In addition to the names of people who may contact you, please add Doug Milgram to the list.

I call your attention to the resource rich UOAA website where you and all people with ostomies will find valuable and pertinent information. Please share the information via your newsletter or orally with all people in your ASG. Here are three items on the website that are likely to be of interest:

A revised version of ASG in a Box [http://www.ostomy.org/ASG\\_in\\_a\\_Box.html](http://www.ostomy.org/ASG_in_a_Box.html)

Ostomy Discussion Board <https://www.uoaa.org/forum/index.php>

Links to other ostomy websites <http://www.ostomy.org/Links.html>

Please remind people in your ASG about the **UOAA National Conference** in St Louis this coming September. They can register online via the UOAA website or find the contact information in The Phoenix magazine.

We are still accepting suggestions for the **Leadership Academy** that is scheduled for the UOAA 2015 Conference in St Louis. We need that information by May 1, 2015. Also, you can send us suggestions as to how to improve UOAA at any time. Please send all suggestions to: [ASGinput@ostomy.org](mailto:ASGinput@ostomy.org).

Thank you,

Ival Secrest, Chair  
UOAA ASG Advisory Board

## **NATIONAL ELECTION TIME**

It's UOAA National election time. Please take the time to read this information over with your members. Remember that, due to a constitutional amendment, you are now be able to vote for your national leaders via email. We are including the 2015 Election Ballot and the biographical information of the candidates. [Note: we will have the biographical info at the next meeting.]

Any questions or comments please refer them to Jim Murray, 1st Vice President at [jimbmurray@ostomy.org](mailto:jimbmurray@ostomy.org) or me at [susanburns@ostomy.org](mailto:susanburns@ostomy.org).

**The deadline for returning these ballots is June 30, 2015.**

Best Regards,

Susan Burns, President  
UOAA

Note: all candidates are running unopposed. We will vote on these candidates at our May meeting at the Iowa River Landing clinic. The offices and candidates are below.

President: Susan Burns  
1st Vice President: Jim Murray  
Treasurer: George Salamy  
Secretary: Frances Popp  
Director: Millie Parker  
Director: Olden B. "Jay" Johnson

## CARING FOR YOUR OSTOMY

By Pat Murphy, RN, CETN, Middle GA, *Ostomy Rumble*  
UOAA Updated May 2015

Here are some simple pointers for ostomy care. They may not be new, but sometimes it is good to be reminded of them. Good ostomy care habits can catch and nip problems in the bud-the rosebud that is.

Inspect your stoma and skin each time you change your skin barrier. Your stoma should be bright red, smooth and shiny. Inspect the lower edge especially well. Use a mirror if necessary. Look for any signs of irritation or bleeding. These signs may mean your skin barrier is rubbing there.

Your skin should not be pink, purple or gray, even right next to the stoma. You may, however, notice some pink skin under pressure points when you first remove the skin barrier from your body. This is the same as when you take off your watch or a pair of stockings and is normal.

Inspect your skin in a sitting position to see if creases or low areas form around the stoma. This will tell you where to take special steps to even out the area when you put on your skin barrier. Stretching the skin to make it smooth may be all you need to do, or you may need a dab of ostomy paste to help seal the area.

Remember: a new stoma can change size for up to a year. Re-measure your stoma every time you change the skin barrier for the first six months after surgery and every month thereafter. Always re-measure if you are having a leak. Measure the stoma at the base from side to side and from top to bottom.

Many stomas are oval. If you are cutting a skin barrier of a one-piece pouching system, no skin should show when it is in place. However, making sure the skin barrier doesn't touch the stoma unless it is an extended-wear skin barrier manufactured to be able to touch the stoma (these skin barriers are designed to "turtleneck" where they touch the stoma). Since it can be tricky to cut the opening to the correct shape without leaving gaps around the stoma, manufacturers have developed skin barrier seals and ostomy paste that can be used to fill the gaps.

If your stoma is not perfectly round, do not trace and cut a round circle. Instead, make the skin barrier fit exactly. Your ostomy nurse can show you how. It should just miss the stoma, sealing down on the skin right next to it. Your skin barrier should not go over any red, wet mucosal tissue, the kind that forms the stoma. If you wear a pouch with a Karaya ring on it, the ring should gently touch the stoma all around.

## CAMPING

*I'd Like to Buy A Bowel Please!* By Brenda Elsagher Reprinted with permission  
UOAA Update May 2015

Back in the days when patients were in the hospital for longer stays, ten days to two weeks was normal for a colectomy/colostomy. You really got a chance to get to know your patients

and see their progression of dealing with their medical issues. A forty-four-year-old patient and mother of four had a diagnosis of cancer and her prognosis was not good. Initially, like most, she really had trouble with the whole cancer deal, but unlike many, she was very open about her feelings.

We were in the hospital room bathroom during the irrigation procedure one morning when she asked, "Will I be able to continue camping with my family?" I assured her with some planning and adaptation, she should be able to join her family and resume their good times together. I'll never forget her light-hearted response when she looked up and said, "In other words, have bag will travel!" I just about lost it. It marked the beginning of a new outlook for her. She was over the hump with self-care after that.

The next day I slipped into her room to find her sleeping; at least I thought she was asleep. Before I could turn to leave, she opened her eyes, smiled mischievously, and reported, "I have already been up, completed my irrigation and bag change, and am done for the day." It never ceases to amaze me how the human spirit rises to meet the challenges of life.

Brenda's book, *I'd like to buy a bowel, please!* is available through Amazon.

## WISDOM FROM A PHARMACIST

By Florian Norwicki, Rph: Snohomish County WA, *Insights*  
UOAA Update May 2015

I find ostomates with the least problems are those who become acquainted with other ostomates with a similar surgery. The best method of acquaintanceship is to become involved in your local ostomy chapter.

We constantly hear of organizations being formed for many types of bodily dysfunctions, such as paraplegics, epileptics, bypass cardiac club, diabetes, etc. These peer groups perform invaluable services, especially to new members when the trauma is often more psychological than physical. I encourage each and every one of you to attend meetings regularly. If you come away with one new fact or idea per meeting for your self-help, you know it is worth the time and effort.

Your best medicine is preventive medicine. Whatever your procedures are, or your diet is, think of the problems you encounter if you deviate from your norm. Spices, alcohol, caffeine and some vegetables which cause flatulence are to be used moderately or not at all.

Again, it is pertinent to your well-being that you know what is best for you. A good idea is to keep a diary or log of your diet so you may determine what food it was that caused a problem for you then steer yourself away from that problem.

Your UOAA Chapter is the way to go. Ask questions - get answers. The members have already been in your shoes!

**Articles of Interest...** Newsletter articles obtained from various sources. If necessary, please check with your health care provider before using these tips.

## WHEN TO CALL THE DOCTOR OR OSTOMY NURSE

*The Right Connection, Ostomy Assn. of San Diego  
UOAA Update May 2015*

- If cramps last more than two or three hours.
- If you get a deep cut in the stoma.
- Excessive bleeding from the stoma opening or a moderate amount in the pouch after several emptyings.
- Bleeding at the juncture of the skin and stoma.
- Severe skin irritation or deep ulcers.
- Unusual change in size or appearance of stoma.
- Severe watery discharge lasting more than five or six hours.
- Strong odor lasting more than a week.
- Any other usual occurrence regarding the stoma.

You can find an Wound Ostomy Continence Nurse at the following web address:

[http://www.wocn.org/?page=Nurse\\_Referral](http://www.wocn.org/?page=Nurse_Referral)

Fill in the sections that ask for "Zip Code" and "Zip Code Within" ONLY.

## VITAMIN B-12 REPLACEMENT THERAPY

*By Bob BaumeI, Ostomy Assn of North Central OK  
UOAA Update May 2015*

Vitamin B-12 is, under normal conditions, absorbed in only a small section of the terminal small intestine (ileum), raising the possibility of B-12 deficiency if that section of the ileum has been removed surgically or damaged by disease. People who may have lost that portion of their ileum include some ileostomates, people who had a failed J-pouch or Kock pouch, and some people with urinary diversions (especially continent urinary diversions) made using the terminal ileum. A condition such as Crohn's disease may have damaged the terminal ileum, even if it hasn't been removed surgically.

Vitamin B-12 is necessary for many metabolic processes, including development of red blood cells and maintains normal functioning of the nervous system. Deficiency causes anemia (reduced oxygen carrying capacity of the blood resulting in fatigue) and can also cause nervous system damage. It's worth noting that folic acid (another B vitamin) can correct the anemia caused by vitamin B-12, but will not correct the nerve damage caused by B-12 deficiency. So it's important to get enough vitamin B-12.

If you think you are at risk for vitamin B-12 deficiency, you can ask your doctor to check your serum (blood) B-12 level. This test can be added easily to routine blood testing. If your ability to absorb vitamin B-12 by the normal pathway involving the terminal ileum has been impaired, you can supplement the vitamin by three basic methods:

- **By Injection:** This method bypasses the normal gastrointestinal process of B-12 absorption by inserting it into

the body by intramuscular or subcutaneous injection. B-12 injections may be self-administered in the same way that diabetic patients can give themselves insulin shots. Maintenance therapy may require only one B-12 injection per month.

- **Nasally:** This method also bypasses the normal gastrointestinal absorption process, as vitamin B-12 can be absorbed through nasal mucous membranes. The nasal form of B-12 was developed first as a nasally applied gel and later a true nasal spray (brand name Nascobal®). This product is marketed by the Strativa Pharmaceuticals, who promotes it as the only FDA approved form of vitamin B-12 besides the injectable form. Nasal B-12 can be effective, but because one company has sole rights to distribute it in the U.S.A., it can be an expensive way to get your vitamin B-12.

- **Orally:** Until recently, doctors believed that B-12 taken orally was useless to people who lack the normal absorption mechanism involving the terminal ileum. That opinion has changed, however, as research has revealed that even in such people, when a large dose of vitamin B-12 is taken orally, a small fraction (typically around 1%) gets absorbed by mass-action transport across the gut.

**Note:** Time Released medications should, in general, be avoided if you have an ileostomy as they may pass through your gut without getting absorbed adequately.

## SPECIAL CLOTHING FOR THE OSTOMATE

*Tulsa Ostomy Association Newsletter  
UOAA Update May 2015*

Having a stoma does not mean you need to have any special clothing; you should be able to dress just as you always have. High-waisted clothes are more comfortable and hide your pouch.

Many people find that tucking their pouch into their underwear makes them feel more secure, but with a belt, you can let it hang outside if you prefer. A large capacity appliance shows less than a small one when full, handy to remember when away from home. Lycra type clothing provides excellent and effective support so look out for these in the stores. Support wear is available often on prescription.

If you wear an appliance belt, make sure it is at the same level as the stoma to avoid an upward drag. Make sure that your belt or trouser waist lines do not rub on your stoma as this can be very uncomfortable. A sports protector can be worn to protect the stoma while playing physical contact sports.

- Patterned swim suits mean our pouch is less visible.
- A tankini with a high waist can be quite discreet.
- A 2-pc with boxer shorts is a good choice for women.
- A one-piece suit can have gathers horizontally or crisscross.

Emphasize again - you do not need special clothing. Dress as you always have. Even jeans if they are not tight. However, sometimes switching to elastic waist bands is the way to go.

**Articles of Interest...** Newsletter articles obtained from various sources. If necessary, please check with your health care provider before using these tips.

## **TAP WATER vs. BOTTLED WATER: DEPENDS ON THE SOURCE**

Metro Maryland: UOAA Update May 2015

Many ostomy newsletters are sharing an article entitled "Water" By Prometheus T. Peabody, NNBH. In it he states "Tap water should be used in moderation. It contains toxic chemicals that in large quantities are poisonous to our bodies. Bottled water should not contain these toxins."

Despite marketing claims by the bottled water industry, bottled water is not safer than tap water. In fact, tap water is subject to more stringent regulation than bottled water. In 2009, almost 50% of all bottled water came from municipal tap water supplies.

According to a 2010 survey, only three companies provide the public with the same level of information available for tap water, including:

- where the water came from,
- how it was treated, and
- what the results of the water quality tests were.

Independent testing of bottled water by the Environmental Working Group in 2008 found that 10 popular brands of bottled water, from grocery stores and other retailers in 9 states and the District of Columbia, contained 38 chemical pollutants with an average of 8 contaminants in each brand.

Bottled water has negative environmental impacts, frequently ending up in landfills, lettering our streets and/or our streams. It takes 17 million barrels of oil per year to make the plastic water bottles used in the U.S. alone. That's enough to fuel 1.3 million cars for a year. For more information, check the website: [www.foodandwaterwatch.org](http://www.foodandwaterwatch.org)

## **SOME ABCs OF UROSTOMY CARE**

Philadelphia Newsletter: UOAA Update May 2015

**Adherence:** Urinary appliances adhere well with cement Stomahesive® and Colly-Seel™. The urinary stoma drains continuously. The urine may be mildly irritating to the skin and may be odorous.

**Bleeding:** Often blood is noted in the appliance and its origin isn't immediately clear. One source may be irritation of the stoma by uric acid crystals. These can be formed in the appliance or on the skin around the stoma if the faceplate is too large. This may be indicated by small white spots on the stoma upon removal of the appliance. The crystals have an abrasive effect on the stoma. The crystals may be readily dissolved and the bleeding relieved by bathing the stoma and the surrounding area with a half-strength vinegar solution. Do this three or four times a day while the appliance is being worn.

**Changing Appliances:** Usually the best time to change a

urinary appliance is in the morning before drinking anything.

**Closed Bottom:** Only drainable pouches should be used on urinary stomas. Closed bottom pouches should never be used.

**Face Plate:** A convex face plate may be extremely useful with the flush urinary stoma.

**Fluid Intake:** Two to three quarts of fluid daily provide adequate "traffic" through the urinary system to prevent an increase in bacterial growth. (This can occur in a slow moving system.) Increased bacterial growth may lead to urinary tract infection.

**Leaking:** Urinary pouches that are allowed to get too full will tend to leak. Connecting the pouch to the leg bag will be helpful if you're unable to empty often enough. Attach the strap of the leg bag loosely to allow good blood circulation.

**Night Drainage:** Bedside drainage bag or bottle, probably similar to the type you used in the hospital, may be used for children and adults. This is how you can avoid getting up during the night to empty the pouch. The average urinary pouch won't hold the amount of urine that may be excreted during the night.

**Odor:** Drinking cranberry juice is helpful in deodorizing urine.

**Plugging:** You should NEVER use anything to plug your stoma while cleaning, changing or emptying your bag. This could cause problems with your stoma.

**Showers:** You may shower with your skin barrier on and removing the pouch or you may take a shower with the entire appliance off. It is found that if you chose to leave your skin barrier on, using Pink Tape (available through your supplier) around the edges helps prevent water from seeping in and compromising the seal. This also allows you to keep the skin barrier on longer causing less stress and irritation to your skin. This applies to colostomates and ileostomates as well.

## **"LIFE WITH LUKE"**

An ongoing saga by Michelle Rogan, Printed with Permission  
UOAA May 2015

Picture a 7 year old boy with a beautiful long stem, plastic rose in pink with red tips in his hands. He has the flower end facing his older brother and sister, who are seated on the couch watching television.

Luke: "Pow" "Pow" "Pow"

Mom: "Luke, what are you doing?"

Luke : "I'm a soldier fighting the enemy."

Mom: "You're using a pretty rose as a gun, Luke?!!!"

Luke: "FLOWER POWER, MOM!"

**Cedar Rapids / Iowa City  
Area Ostomy Support Group #171, Inc.  
P.O. Box 5227  
Coralville, IA 52241**



***Join us!***

*Next meeting*

*Tuesday, May 19th, 6:30 pm*

*Iowa River Landing clinic, Coralville*

*Details inside*