



SHORT CIRCUIT

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

www.iowaostomy.org *Our 43rd Year!* Serving Ostomates of Eastern Iowa since 1972 August 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, 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.

“Seize the Opportunity”



From our Coordinator...

Many of you know that my life has been crazy for the last couple of years. I've had several truly life-changing events, and that doesn't even include anything ostomy-related, which itself is a huge change in your life.

I retired early after working for over 40 years, so I could care for my partner who was diagnosed with a terminal illness. I sold my house and moved in with him. His elderly mother, who was almost his only relative, had a massive heart attack so I cared for her too, until she passed. After being a “townie” my entire life, I find myself living out in the country, in a 135 year old farmhouse which I am remodeling (and doing much of the work myself.) I now live across the road from corn, and the occasional cow that gets out of the neighbor's pasture. And I am a “dog mommy” to not only my Labrador Jack, but a very sweet, very furry, absolutely huge and often dirty Alaskan Malamute.

Wow. How much can one person's psyche take, without going nuts? Prior to all this, I had thought that being sick for a year, then having ostomy surgery was the worst thing that life could throw at me.

I'm relating all this to you because I've learned that yes, a person can get through huge life changes like bowel surgery—even many bowel surgeries—and survive with their sense of self, and even their good humor intact. It is devastating at first, I agree, especially for those ostomates who had no idea going into surgery that an ostomy might be the outcome.

As far as I can tell there is no set of rules that guide you through a life changing event such as ostomy surgery. There isn't a “how-to” manual or step by step instructions. Oh sure, there are videos on how to change your bag, and a very kind and understanding WOCN will help you choose and apply the right products and guide your wound healing. But how about your emotional healing?

How do you tell your children or grandchildren you now poop or pee in a bag? What do you say to your employer and co-workers? Will you be able to resume your hobbies and activities? How do you deal with intimacy in your relationship? Can you ever start a new relationship?

Continued on page 2

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

I don't have the answers, but I know who does. The *best answers come from people who have been there before you, your fellow support group members*. They have had to get through the same things (maybe even worse) that you are going through as a new ostomate. They didn't have step-by-step instructions either, but they learned to make it up little by little, same as you are doing.

They did not lose their minds, and you won't either. They continue to come to meetings because they care about you, the new ostomate. They know you will survive, because they did. They know you will laugh again, and love again. *They know you will be just fine.*

I sincerely hope that none of you "survive" ostomy surgery only to be hit with several more life-changing events a few years later. I know it sounds a little odd, but because I got through the ostomy surgery and came out a stronger person, I somehow knew I could get through anything else that might come my way. Now *that* is a life-changing thought!

See you Thursday, August 20th at 6:30 pm at Mercy Medical Center in Cedar Rapids.

Carol Haack

THE COUNTDOWN CONTINUES...



UOAA 2015 NATIONAL CONFERENCE

**September
1-6, 2015**

St. Louis

Our opening ceremony begins with an inspirational speaker, Joanna Burgess, whose ostomy journey began when she was just 3 years old and given only a 10% chance of survival. Although she faced many medical challenges, Joanna is a WOC Nurse who has a passion to give back and be a source of strength for many!

**Visit the Exhibit Hall where representatives from major ostomy manufacturers, specialty manufacturers, and related nonprofit organizations will be on hand to talk about their products, answer questions, and provide samples.*

**Hear featured speaker Dr. Katherine Jeter. She is an engaging, energetic, world-renowned educator, who will discuss what you as an ostomy patient should expect from a Wound Ostomy Continence Nurse and how to make the most of your visit during an appointment. She is also into promoting physical fitness and will share some of her insights about the 3100 mile charity cross-country bike ride she accomplished at age 73!*

**Visit the free Stoma Clinic. Through this free clinic, you will have an opportunity to meet one on one with a Wound Ostomy Continence Nurse, have your stoma examined, and seek guidance on skin care issues and pouching systems.*

**Closing Ceremonies speaker Bo Parish.....Ileostomate, Ironman Triathlete. Bo was diagnosed with Crohn's Disease at just 12 years old. After fighting the disease, then having ostomy surgery 13 years later, Bo was determined to persevere with his new lifestyle completing his first triathlon 5 months after surgery. Bo will discuss "The Problem with Perfect."*

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 _____

Friends of Ostomates Worldwide is holding a fund raiser in October at a mall in Aurora, IL just outside of Chicago. This worthwhile organization collects and sends unused supplies to ostomates all over the world. See the article on FOW on page 9.



www.fowusa.org

Hold The Date!

Fundraiser

Sunday, October 25, 2015

2:00pm - 5:00pm

Westfield Fox Valley Mall

Aurora, IL



- **Painting**
- **Take home Artwork!**
- **Refreshments**
- **Raffle Prizes**
- **Silent Auction**
- **Fun! Fun! Fun!**

Adults! Children! Family Fun!

For a GREAT Cause!

Help FOW-USA get much needed medical supplies to those in need!

Tax Deductible non-profit (501c3)





Special Guest
Topper the Penguin
and others to be announced!

For advanced information call
1-847-764-0891

The Painted Penguin
Family Activity Center
2244 Fox Valley Mall
Aurora, IL 60504

Hold The Date!

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.

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. 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

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

- Thursday, Aug. 20, 2015 6:30 pm **Support Group meeting** Mercy Medical Center, Cedar Rapids. Training Room B on the lower level. Park in the ramp at the east end of the building and come in the door by the gift shop. Take the elevator down one floor. Turn left off the elevator.
- Tuesday - Sunday Sept 1 - 6, 2015 **5th UOAA National Conference**, St. Louis, MO. Check the UOAA website at 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.
- December 2015 **Support Group meeting** and Holiday party. Details coming next newsletter.

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. If you receive the Short Circuit via email, you will also receive an email notice of cancellations. 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	www.us.coloplast.com
ConvaTec	800-422-8811	www.convatec.com
CyMed	800-582-0707	www.cymed-ostomy.com
Hollister	800-323-4060	www.hollister.com
Marlen	800-321-0591	www.marlenmfg.com
Nu Hope	800-899-5017	www.nu-hope.com

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

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

United Ostomy Associations of America
800-826-0826 www.ostomy.org

Wound, Ostomy and Continence Nurses Society 800-224-9626 www.wocn.org

Friends of Ostomates Worldwide-USA
www.fowusa.org. Donate unused supplies.

Osto Group free product for the uninsured
877-678-6690 www.ostogroup.org

American Cancer Society
800-227-2345 www.cancer.org

Crohn's & Colitis Foundation
800-343-3637 www.cafa.org



UOAA PRESIDENT'S MESSAGE AUGUST 2015

Dear Friends of UOAA,

Joan McGorry, Director of Administrative Services, has decided to retire after many years of dedicated service. We are pleased to welcome Alicia Aylward as Office & Development Coordinator. She will be working alongside Jay Pacitti, Director of Development & Program Support, in a new office that we are establishing in southern Maine. Alicia can be reached at oa@ostomy.org.

Effective immediately, the office address and phone number is:

PO Box 525
Kennebunk, ME 04043
(207) 985-9700

The 800 information hotline is still being staffed by Kathy Ward in Minnesota.

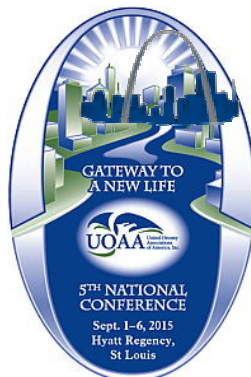
You can call Alicia or Jay for help with questions on administrative matters and donations.

Please also call Alicia or Jay with questions pertaining to your ASG. If needed, they will redirect you to the ASG Support Team or Advisory Board.

Thank you to Joan for her many years of work for UOAA.

Best Regards,

Susan Burns, President
UOAA



**Register for the
Conference and Book
Your Hotel Room
Now!**

www.ostomy.org/2015_National_Conference_page.html

**Attend workshops dedicated to Ostomy Nutrition, Anxiety and Other Ostomy Related Psychological Issues, Intimacy and Dating, Spouse's Meetings ... and much More!*

**Attend the Barrier "Cooking" show. Michael Taylor, research scientist, Hollister Corp. We are all familiar with ostomy skin barriers, those sticky adhesive wafers that keep the pouching systems in place on our skin. Have you ever wondered what ingredients go into making a skin barrier? In this hands-on, interactive session, we will review the kinds of ingredients used to make skin barriers and see how they work individually and how they work together. It's a "Cooking" Show because we will be mixing and blending ingredients and we will actually make a custom skin barrier.*

**Traveling - Understanding the TSA.....Curious about TSA and how to make your air travel as an ostomate less complicated? *Seena Foster will help you to learn what to expect when going through TSA security and how to make the process go easier.*

Seena Foster serves as the Director of the Disability Branch at TSA's Office of Civil Rights and Liberties, Ombudsman and Traveler Engagement (CRL-OTE), and has over 24 years of public and private sector experience. At the Disability Branch, Ms. Foster leads a team of program specialists in the areas of engagement, outreach, policy review, training, and discrimination complaint resolution related to TSA's screening passengers with disabilities and medical conditions in compliance with Section 504 of the Rehabilitation Act. Ms. Foster has a Juris Doctorate from The George Washington University Law School, and is a mediator. Moreover, Ms. Foster is a member of the Discrimination Law and Human Rights Law Committees of the International Bar Association.

**Attend workshops dedicated to Ostomy Nutrition, Anxiety and Other Ostomy Related Psychological Issues, Intimacy and Dating, Spouse's Meetings ... and much More!*

HELPFUL HINTS FOR SWIMMING

UOAA Update July 2015

Summer is here and you know what that means. More family trips to the beaches, lakes, pools, etc. Swimming is a great way to have fun, exercise and cool off. Having an ostomy should not stop you from relaxing in the water, going for a swim or enjoying other water sports. However, here are a few precautions you might want to take:

- Don't change your pouch immediately before getting into the water, allow a few hours for the adhesive to set.
- Picture frame the faceplate by applying micropore (pink, waterproof) tape around the edges to provide a waterproof seal. This will ensure that the faceplate adheres to the skin.
- Wear a soft panty girdle (or pantyhose with the legs cut off) under a bathing suit if you feel it is needed to give extra security and support for the pouch.
- If you will be in a spa, jacuzzi or hot tub beware as hot water destroys the pouches ability to contain odor. Also, you will probably not get as much wear time as usual.
- Ladies, choose a swimsuit with a skirt and a "busy" pattern. This will effectively cover up the vulnerable spot. Boxer swim shorts work well for men.
- Remember to drink lots of water. Sweating cools the skin, but moisture must be replaced.

ARE YOU HAVING TROUBLE SLEEPING AS YOU GROW OLDER?

UOAA Update July 2015

How much sleep do older people need?

Most of us need about eight hours of sleep at night to feel fully alert when we're awake. Many things can get in the way of sleeping well or sleeping long enough. As we get older, we might have more trouble sleeping.

What sleep changes are coming in elderly people?

People 65 and older may have trouble falling asleep when they go to bed at night. They might not stay asleep all night. They might wake up very early in the morning and not be able to go back to sleep.

These problems can make older people very sleepy in the daytime. The sleep-wake cycle changes as we get older, so we might get sleepy earlier in the evening and wake up earlier in the morning.

What causes sleep problems?

Several things cause sleep problems. By the time we're in our 60s and 70s, our sleep-wake cycle doesn't seem to work as well. Some lifestyle habits (like drinking alcohol, caffeinated drinks, or smoking) can give us sleep problems.

Sleep problems may even be caused by illness, when pain keeps us from sleeping, or by medicines that keep us awake. People of

all ages might have sleep disorders: sleep apnea, restless legs syndrome and periodic limb movement disorder.

HOW TO GIVE YOUR HDL A BOOST

UOAA Update July 2015

More than ever, the most recent government guidelines emphasize the health benefits of having a good HDL level. It's harder to raise levels of this "good" cholesterol than it is to lower the "bad" kind, but there are some things you can do.

- **Get Aerobic Exercise:** The longer and harder you exercise, the greater the effects will be.
- **Watch Your Weight:** Lose excess weight through daily exercise and sensible eating.
- **Stop Smoking:** Smoking lowers HDL by an average of five points and increases your total cholesterol level.
- **Medication:** Talk to your doctor about medication. Your doctor can prescribe cholesterol-lowering drugs that can help to improve your cholesterol reading.
- **Saturated Fats vs. Non-Saturated Fats:** Replace saturated fats with non-saturated fats. For example: use olive oil for cooking.

HOW TO MANAGE YOUR BLOOD PRESSURE

UOAA Update July 2015

Your blood pressure is one of the most important components to your health and one of the most manageable. Referring to the force of the blood pushing against the walls of the arteries, our blood pressure naturally fluctuates with various daily activities like running or sleeping. When the pressure is too high, the heart works harder than it should, and dangerous health conditions can result, including heart and kidney disease, arteriosclerosis and stroke.

It's important to have your blood pressure checked regularly, since high blood pressure often has no warning signs or symptoms. Blood pressure is gauged by two numbers, both of which are important. The top number, or

systolic pressure, is measured when your heart beats, the time when your blood pressure is the greatest. The bottom number, or

diastolic pressure, is measured when your heart is at rest between beats and your blood pressure falls. A blood pressure less than 120/80 mmHg is considered normal. No single cause of high blood pressure is known, but four factors do appear to strongly influence it.

They are:

1. **Weight:** Maintaining a healthy weight is essential since blood pressure increases with body weight. Even

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

losing small amounts of excess weight can improve your blood pressure.

2. Physical Activity: People who exercise have a 20 to 50 percent lower risk of high blood pressure.

3. Diet: Reducing the amount of sodium and salt you eat can cause your blood pressure to drop. Adults should eat no more than 2,400 mg of sodium (6 grams or 1 tsp.) each day.

4. Alcohol Intake: Drinking too much alcohol can raise blood pressure. To prevent high blood pressure, limit or avoid alcohol consumption.

For more information, visit <http://www.info-on-high-blood-pressure.com/>

IS IT HEARING TEST TIME?

UOAA Update July 2015

Do crowds make you grumpy? Do you avoid noisy restaurants, even when the food is great? Are you beginning to suspect that there's a widespread mumbling conspiracy afoot?

You may be suffering from an invisible disability that's the third most common health problem in the United States, afflicting 30 percent of adults ages 65 and up. It's hearing loss, and many people don't even suspect they have it.

Most hearing loss is due to aging, with the condition developing so slowly that many people don't notice for quite some time. In fact, most people wait from seven to ten years to seek help. Other causes of hearing loss besides aging include excessive exposure to loud noises, trauma, ear infections and genetics.

To see if you might be one of the 28 million Americans suffering from hearing loss, ask yourself if any of the following situations apply to you on a regular basis. If so, consider seeing an audiologist for a hearing test.

- You miss a social event because you misunderstood the place or time.
- You'd rather sit at home and watch reruns than go to a party because parties are noisy and conversations at such events can be challenging.
- You're constantly feuding with family members because they turn the television and stereo down way too low.
- Whenever someone speaks at a public event, you have to ask others what was said.
- You find men's voices easier to understand than women's.
- You try to avoid talking on the phone because the sound quality isn't what it used to be.

For more information on hearing loss, contact the American Academy of Audiology at 1-800-222-2336 or find them on the internet at www.audiology.org.

A LOOK AT SCIENCE BEHIND MEDITATION

By Judy Foreman, *The Boston Globe*:UOAA Update July 2015

For decades, open-minded patients and doctors have been touting the medical benefits of meditation, an ancient practice that comes in hundreds, if not thousands, of different flavors. It consists basically of quieting the mind through contemplation, prayer, or focusing on something simple, such as breathing.

Dr. Herbert Benson, president of the Mind/Body Medical Institute and associate professor of medicine at Harvard medical School, has been a pioneer in the medical study of meditation. Considerable research suggests that regular meditation, or practicing what Dr. Herbert Benson calls the "relaxation response" for 10 to 20 minutes a day, can reverse many of the ill effects of stress.

The relaxation response has been shown to lower blood pressure, heart rate and respiration; to reduce anxiety, anger, hostility, mild-to-moderate depression, to help alleviate insomnia, premenstrual syndrome, hot flashes, infertility; and to relieve some types of pain, most notably tension headaches.

What nobody, until now, has ever come close to explaining is how meditation may work. That is, what mechanisms within the brain might explain why changing one's mental focus can have such large effects on mood and metabolism. Nor has there been until now, much collaboration between neuroscientists and experts in meditation such as Buddhist monks.

All that is changing -- fast. A study published in *Psychosomatic Medicine* is a significant first step in understanding what goes on in the brain during meditation. The study was led by Richard Davidson, director of the Laboratory for Affective Neuroscience at the University of Wisconsin, and John Kabat-Zinn, founding director of the Stress Reduction clinic and Center for Mindfulness at the University of Massachusetts Medical School.

The underlying theory - one of many theories of depression - is that, in people who are stressed, anxious or depressed, the right frontal cortex of the brain is overactive and the left frontal cortex under-active. Such people sometimes show heightened activation of the amygdala, a key center in the brain for processing fear.

By contrast, people who are habitually calm and happy typically show greater activity in the left frontal cortex relative to the right, according to the theory. These lucky folks pump out less of the stress hormone cortisol, recover faster from negative events and have higher levels of certain immune cells.

Each person has a natural "set point," a baseline frontal cortex activity level that is characteristically tipped left or right, and around which daily fluctuations of mood swirl. What meditation may do is nudge this balance in the favorable direction.

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

To find out, they recruited stressed-out volunteers from the Promega Corp., a high-technology firm in Madison, WI. At the onset, all volunteers were tested with EEGs, or electroencephalographs, in which electrodes were placed on the scalp to collect brain wave information. The volunteers were then randomized into one of two groups -- 25 in the meditation group ("meditators") and 16 in the control group.

The meditators took an eight-week course developed by Kabat-Zinn. At the end of eight weeks, both meditators and controls were again given EEG tests and a flu shot. They also got blood tests to check for antibody response. Four months later, all got EEG tests again.

By the end of the study, the meditators' brains showed a pronounced shift toward the left frontal lobe, while the control group's brains did not, suggesting that meditation may have shifted the "set point" to the left. The meditators also had more robust responses to the flu shots.

The new work fits with data suggesting that certain drugs mimic the effects of meditation the brain, said Dr. Solomon Snyder, director of the department of neuroscience at John Hopkins Medical School. "It's reasonable to assume," he said, "that meditation may increase serotonin, a calming neurotransmitter, in the brain."

No one has been more fascinated by this kind of research than the Dalai Lama, the leader-in-exile of Tibetan Buddhism. The Dalai Lama spent five days in March 2000 meeting with other Buddhist monks, philosophers and neuroscientists at a retreat in Darmaasala, India, that is chronicled in a book called "*Destructive Emotions*" by Daniel Goleman, author of "*Emotional Intelligence*".

In addition to lots of debate, the conference had a practical outcome. One participant, Paul Ekman, professor of psychology at the School of Medicine at the University of California at San Francisco, invited several monks to visit his California lab so he could study them.

One meditator, a 60-year old Frenchman who has been a monk for nearly 30 years, appeared able to suppress the startle reflex while meditating -- a stunning display of control over a basic, biological response to stimuli such as a sudden loud noise. Meditation is, Ekman said cautiously, "an exercise for the brain that could become benefit."

So, what does it mean? Obviously, a few studies on several dozen meditators is not the final answer as to how meditation procedures changes in mood and biological functions. Though it's "a wonderful tool", no one should expect meditation to work miracles, cautioned psychologist and medical sociologist Barrie Cassileth, chief of the integrative medicine service at Memorial Sloan-Kettering Cancer Center in New York. It "cannot bring about levitation. It cannot control cellular activity in the sense of getting rid of disease. It's not going to let you fly to Europe on your own without a plane."

But what these preliminary studies do suggest is that, at long last, the subjective experience of meditation may prove capable of being understood objectively as well.

SUCCESSFUL AGING

By Grace Lynch: UOAA Update July 2015

Images of older people pumping iron, teaching kids to read, building homes for the homeless, surfing the net and tap dancing abound in the media today. Whether they're selling vitamins or vacations, today's images of older people are a welcome substitute for stereotypes of the past. The images have changed because the realities have changed.

Today's older people are, in fact, nothing like their parents and grandparents. For one thing, they are living a lot longer. The life expectancy for people age 65 and over is 17.4 years. Compare this with the beginning of the century when the average life span was only 47.

While policy experts once worried that this gift of time would be marred by illness and disability, recent research reveals a gradual decline in chronic disease and disability. The number of people with high blood pressure, arthritis and emphysema has shown an unexpected and steady decline since 1982 and overall, according to the national Long-Term Care Survey, there has been a 15% drop in disability. Never before in history have so many older people had the opportunity to live so long and so well.

VITAMIN D HELPS ELDERLY AVOID FRACTURES

UOAA Update July 2015

Preventing broken bones as you age could be as easy as popping a vitamin D pill just three times a year. It's especially important to prevent bone thinning and fractures in the elderly. In fact, breaking the hip can even cause death in many elderly people -- due to an increase in pneumonia or blood clots from being immobilized in bed. Prior studies have shown that a combination of vitamin D and calcium can reduce fractures. But researchers in a study wanted to see if vitamin D alone would have the same effect.

The study is published in the March 2009 issue of the *British Medical Journal*. Researchers studied more than 2,500 people ages 65 to 85. Each took 100,000 IU of vitamin D -- a high dose compared with the normal dose of 400 IU -- or a placebo every four months. People who took vitamin D were 22% less likely to have a fracture during the five-year study. They were also 33% less likely to have a fracture in areas of the body that are commonly affected by osteoporosis (hip, wrist, forearm, and vertebrae). There were no side effects of vitamin D and the cost is minimal.

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

If future research confirms that vitamin D is effective at preventing fractures, even when taken only a few times a year - this could be a welcome addition to staving off osteoporosis and the potentially serious health effects of this disease.

FRIENDS OF OSTOMATES WORLDWIDE (FOW-USA)

By Ann Favreau, Vice President FOW-USA: UOAA July 2015

Since 1968, the Friends of Ostomates Worldwide-USA (FOW-USA) has collected new supplies from US individuals and groups and sent them overseas where needed.

The modern ostomy supplies we take for granted in the U.S. and other developed countries may be unavailable or too costly in many areas around the world. People resort to plastic bags, rags, and duct tape, resulting in poor skin, odor, no jobs, no school.

A recent recipient of supplies said that he "often used linen wrappings in collecting stool but now he is so happy that he can now afford to put on proper appliances that are smart, neat and designed for that." He used to spend much of his time seated at home and not in a position to travel and socialize with other fellow elders in his community due to lack or unavailability of ostomy appliances. But now, due to the provision of free ostomy supplies, he is able to move and associate with others.

You can make a difference through your donations of supplies and financial support. Please contact them at: FOW-USA, 4018 Bishop Lane, Louisville, KY 40218. Phone: 502-909-6669 - Website: www.fowusa.org

FAIR

By Debbie Hull: UOAA Update July 2015

The following article is available in *I'd like To Buy A Bowel Please!* by Barbara Elsagher.

As a new ostomate, I attended my local ostomy support group and shortly afterward started receiving newsletters and other information. I got a flyer on an upcoming Appliance Fair. I assumed it had to do with refrigerators, stoves, and dishwashers. I live in an apartment and those items are included in the rent, so I thought an appliance fair was of no use to me. Thinking it was odd that an ostomy group would send a flyer for that, I glanced at the flyer again, and then realized I had misunderstood and the Appliance Fair was for people to learn about various ostomy products. When I went to the fair, I shared my story with WOCN, Pat Keegan. She put her arm around me and said, "Oh, honey, you really are a rookie, aren't you?"

Debbie Hull, of Minnesota, was a typical healthy twenty year-old when she suddenly became ill with Crohn's Disease

in December, 1977. In 1984, she had ileostomy surgery and has been well ever since. Debbie says, "All the bad memories have faded, I can do anything I want: travel, work, exercise, eat what I want. Life is good. I am grateful there was a solution for my situation."

ON THE SHORT SIDE

By Kathy Ward, Admin Asst, UOAA July 2015

A lot of questions come in to me at National Office about leakage and how to apply a bag. For everyone it's different. What works for me doesn't necessarily work for others. However, by the responses I received from callers, I can give you a few tips that seemed to help a lot of people.

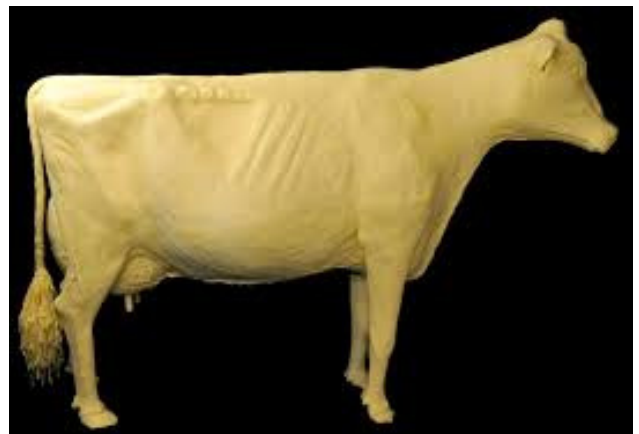
Question: *How do I stop my ostomy from leaking during the night?*

Answer: I can tell you how I solved this problem and hopefully, it will help you too. When I put my ostomy bag on, I usually have it at a diagonal. When I sleep, I sleep on my side in the direction I tilted my bag. Gravity will take it's course and pull anything coming out of your stoma down into the bag. If you are in the habit of sleeping on your back, gravity will bring everything down, which can be the cause of some seepage.

Question: *How do I get my bag to stick better?*

Answer: The first thing I do is to put the barrier ring onto the wafer (or adhesive, whichever you use). Before placing it on my body, I use a hairdryer to warm up the barrier ring (or adhesive) for a few seconds to activate it. I find this works better than placing it on my body and then trying to rub it with my hands to warm it up and activate it.

I always enjoy hearing from you, so call me at National Office (1-800-826-0826) and let me know if any of my tips have been working for you or if you have a tip you'd like to share.



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



***Next meeting
Thursday, August
20th, 6:30 pm
Mercy Medical Center
Cedar Rapids***