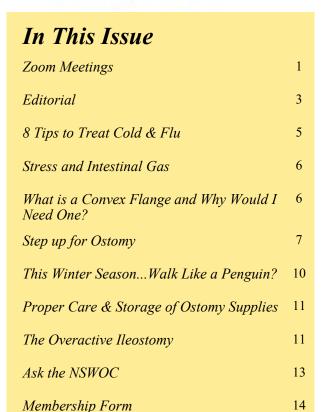
Regina and District Ostomy News



NOVEMBER / DECEMBER 2021





MEETINGS

Meetings are held on the second Tuesday of the month at 7:00 pm except for January,

July and August. Currently we are not meeting face to face but by **ZOOM.** If you'd like to be part of that please contact Murray Wolfe to ensure he has your email.

November 9 – 7 pm Zoom - Foot Care and Product Support with Jane Wilmot

December 14 - 7 pm Zoom - Story Swap & Christmas Favourites





Nov 9, 2021 07:00 PM Saskatchewan

Join Zoom Meeting

https://us06web.zoom.us/j/7093178979? pwd=OGE1V0xxVUZqb1JIWVgybjR1ZTZ2dz09

Meeting ID: <u>709 317 8979</u>

Passcode: 6zj3X1

Dial in option:

+1 204 272 7920 Canada Meeting ID: 709 317 8979

Passcode: 625820

Topic: Foot Care with Jane Wilmot

Healthy Feet! Happy Body!

During our lifetime we will likely walk about 115,000 miles or the equivalent of about five times the circumstance of the earth (Canadian Federation of Podiatric Medicine).

Our feet need and deserve attention throughout our lives but often in our youth they get neglected. Here we are now, in our mid and later life, with more time to care for our feet. What can we be doing to support our feet and body right now? Let's talk about this at our November meeting!

REGINA OSTOMY CHAPTER EXECUTIVE

7 11		
President	Murray Wolfe	550-7958
Past President	Agnes Parisloff	761-0221
Vice President	Patty Gianoli	535-8251
Secretary	Diane Weir-Wagg	539-7404
Treasurer	Gerry Powers	586-7758
Membership	Patty Gianoli	535-8251
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Phoning	Gord Kosloski	789-1592
	Diane Weir-Wagg	539-7404
Host	June Crawford	543-2852
	Bill Collie	543-2647
Lunch	Brenda Frohlick	949-2352
Mailing	Brenda Frohlick	949-2352
Newsletter & website	Deb Carpentier	536-3319
	Louise Laverdiere	536-5442
Visiting Coordinator	Ruth Suderman	450-4690
Partner & Family Support	Bob Fearnside	924-5993

MISSION STATEMENT

The Regina & District Ostomy Chapter is a non-profit mutual support society for the benefit of people who have had, or are about to have intestinal or urinary diversion surgery.

Our purpose is:

- To help people with intestinal and/or urinary diversions to lead full and productive lives and to provide information and emotional support to their families and caregivers.
- To educate the public about intestinal and urinary diversion surgery.
- To provide trained visitors to those who have undergone intestinal and/or urinary diversions, including preoperative and postoperative visits or phone calls, at the request of the physician or enterostomal therapist.

OSTOMY & WOUND CARE Pasqua Hospital 766-2271

November / December 2021

Sheryl Walker, RN BScN WOCC (C) Program Coordinator

Lela Mileusnic, RN BScN WOCC (c)

Monica Aikman, RN, BScN WOCC (c)

Ruth Suderman, RN, BScN NSWOC

Louise Swan, RN, BScN NSWOC

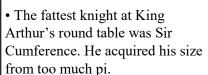
Christi Tsui, RN, (NSWOC in training)

Karen Kinaschuk, RN, BScN WOCC (c)

Bobbi Kish, Office Manager

Amy Moore, Unit Assistant

Puns for Educated Minds





- She was only a whisky-maker, but he loved her still.
- A rubber-band pistol was confiscated from an algebra class, because it was a weapon of math disruption.
- No matter how much you push the envelope, it'll still be stationery.
- A dog gave birth to puppies near the road and was cited for littering.
- Two silk worms had a race. They ended up in a tie.
- A hole has been found in the nudist camp wall. The police are looking into it.
- Time flies like an arrow. Fruit flies like a banana.
- Two hats were hanging on a hat rack in the hallway. One hat said to the other, "You stay here; I'll go on ahead."

IN LOVING MEMORY It is with deep regret that we report the death of one of our members. We extend our most sincere sympathies to family and friends. Edie Klein



Editor's Message



Greetings to all of you reading this newsletter. Didn't we had a nice long summer and fall? It gave us the opportunity to spend lots of time outside with friends and family. I think we all looked forward to a fall of 'covid' being more in the background than the foreground, which is not the case now. It's very sad to see our medical staff and facilities overwhelmed with so many ill with the covid virus. Our thoughts go out to all of those who have had their lives impacted by covid

In October we attempted a joint Zoom and face-to-face meeting and we had quite a number of people out to meet face to face. We had a great evening with our NSWOCs Sheryl Walker and Lela Mileusnic leading a discussion of questions and answers to living with an ostomy. There were some audio issues for those on Zoom though, which we'll resolve for the next time we launch a dual gathering.

In December, in anticipation of the upcoming Christmas and holiday season, we're hoping that many of you will join us in your 'easy chair' with a cup of tea or coffee and a cookie. We thought it would be fun to think back on some memories of past Christmas's. That memory could be a certain food you remember fondly, or a place that conjures up warm feelings, maybe a surprise from a friend or family member or a person who played a big role in your life or how you like to spend your time now. Please join us on December 14th at 7:00 pm for a great ending to our year. If you've never attended a ZOOM session and would like to please contact Murray Wolfe.

Did you read the last **Canada Connects**? All members of our Chapter and/or Ostomy Canada, who have an email address, receive the Ostomy Canada electronic newsletter, Canada Connects. This past October's issue was a revamped newsletter, which had lots of great information and was very pretty to look at. Canada Connects is published four times a year, October, January, April and July.

Interested for a bit more information? Mark your calendars for the first on-line *National Webinar* hosted by Ostomy Canada. It will be on November 18th at 4 pm Saskatchewan time. It will also be recorded so you can watch it at your own leisure. November's topic and speaker haven't been quite determined yet but we'll know more soon and let you know. Or better yet, visit www.ostomycanada.ca and it will be easy to link to.

Stay safe, healthy and enjoy time with family and friends.

Deb

<u>Letters to the Editor . . .</u>

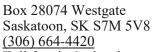
Dear Readers, our aim is to provide you with articles that inform and entertain. We're always looking for stories, tips and anecdotes about life and/or living with an ostomy. Here are some ways to contact me or connect with a larger on-line group.

Deb Carpentier <u>carpentier.deb@gmail.com</u>
Phone: 306-536-3319
<u>www.reginaostomy.ca</u>
<u>www.ostomycanada.ca</u>

Facebook coordinates:

Regina Ostomy Chapter group Ostomy Canada Society group Ostomy Canada Parents' group Young Ostomates support – YOS+FG

Crohn's and Colitis Canada







The Colorectal Cancer Association of Canada is a support group for the estimated 22,000 Canadians annually diagnosed with colorectal cancer. Membership is free.

Info is available at their website: www.colorectal-cancer.ca with links to news reports, articles, and other cancer organizations in the field. Support cancer coaches are also available to talk with patients. Or Phone 1-877-50COLON



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8 Tips to Treat Colds and Flu the 'Natural' Way

With no cure in sight for the cold or the flu, over-the-counter treatments can at best bring symptom relief or shorten the duration of those symptoms. Or you can take the natural approach. WebMD explores some home remedies that may help you feel better along the way.



No. 1: Blow Your Nose Often -- and the Right Way

It's important to blow your nose regularly when you have a cold rather than sniffling mucus back into your head. But when you blow hard, pressure can cause an earache. The best way to blow your nose: Press a finger over one nostril while you blow gently to clear the other. Wash your hands after blowing your nose.

No. 2: Stay Rested

Resting when you first come down with a cold or the flu helps your body direct its energy toward the immune battle. This battle taxes the body. So, give it a little help by lying down under a blanket.

No. 3: Gargle

Gargling can moisten a sore throat and bring temporary relief. Try a teaspoon of salt dissolved in warm water, four times daily. To reduce the tickle in your throat, try an astringent gargle -- such as tea that contains tannin -- to tighten the membranes. Or, steep one tablespoon of lemon juice in two cups of hot water and mix in one teaspoon of honey. Let the mixture cool to room temperature before gargling. Honey should never be given to children under age 1.

No. 4: Drink Hot Liquids

Warm liquids help relieve nasal congestion, help prevent dehydration, and soothe the uncomfortably inflamed membranes that line your nose and throat.

No. 5: Take a Steamy Shower

Steamy showers moisturize your nasal passages and relax you. If you're dizzy from the flu, run a steamy shower while you sit on a chair nearby and take a sponge bath.

No. 6: Apply Hot or Cold Packs Around Your Congested Sinuses

Either temperature may help you feel more comfortable. You can buy reusable hot or cold packs at a drugstore. Or make your own. Take a damp washcloth and heat it for 20 seconds at a time in a microwave (test the temperature first to make sure it's not too hot). Or take a small bag of frozen peas to use as a cold pack.

No. 7: Sleep With an Extra Pillow Under Your Head

This will help with the drainage of nasal passages. If the angle is too awkward, try placing the pillows between the mattress and the box springs to create a more gradual slope.

No. 8: Don't Fly Unless Necessary

There's no point adding stress to your already stressed-out upper respiratory system, and that's what the change in air pressure will do. Flying with cold or flu congestion can hurt your eardrums as a result of pressure changes during takeoff and landing. If you must fly, ask your doctor about using a decongestant and carry a nasal spray with you to use just before takeoff and landing. Chewing gum and swallowing frequently can also help relieve pressure.

Remember, serious conditions can masquerade as the common cold and a mild infection can evolve into something more serious. If you have severe symptoms or are feeling sicker with each passing day or must travel, see a doctor.

Source: WebMD



Stress and Intestinal Gas – Berrien Co. Cancer Service Ostomy Newsletter and Grand Rapids Promoter

Stress is the cause of one of the most common gastrointestinal complaints. Flatulence occurs in people during stressful situations. While under stress, breathing is deeper and one sighs more, encouraging a greater than normal intake of air. Dr. Richter, a gastroenterologist at Massachusetts General Hospital, states that the average person belches about 14 times a day. The person with flatulence problems does not belch more often. However, they may experience the sensation of needing to belch and get little relief from doing so.



Here are some ways to relieve gas:

- 1. Avoid heavy fatty meals, especially during stressful situations.
- 2. Reduce the quantity of food consumed at one setting. Eat small low-fat meals about every three hours.
- 3. Avoid drinking beverages out of cans or bottles. Avoid drinking through a straw.
- 4. Avoid food and beverages you personally cannot tolerate.
- 5. Avoid any practice that causes intake of air, such as chewing gum, smoking, blending foods that contain a lot of air.
- 6. Drink at least 8 glasses of water a day.
- 7. With the advice of your doctor and WOCNurse, experiment with foods in your diet to achieve adequate bowel regularity.
- 8. Avoid eating too many fiber foods at one meal. Gradually add fiber food in your diet to prevent excessive intestinal gas.
- 9. Avoid skipping meals. An empty bowel encourages small gassy stool. Poor digestion can often exaggerate the symptoms associated with flatulence. Digestion enzymes help to reduce the gas in food assimilation and chemical digestion.

Food coats the stomach and helps prevent gastric juices and acids from destroying the enzyme action. \(\square\$

What is a Convex Flange and Why Would I Need One?

A convex flange has a raised area around the hole, which, when securely stuck to your abdomen, presses down on the area surrounding your stoma, effectively 'raising' the spout up a little. Depending on your surgeon's technique and/or your body type, your stoma once healed may be quite short or even flush with the surrounding skin. Some folks who gain lot of weight around the abdominal area my find that their stoma seems to be shorter. It isn't really shorter, it's average. It's just receded as fatty tissue grows around it. This isn't necessarily a bad thing, but if the stoma gets too recessed, a regular 'flat' flange may not cover the peristomal skin adequately, resulting in waste getting onto the skin. This can be a problem most commonly associated with receded stomas in those with an ileostomy or urostomy. If your stoma is flush or very short and you are getting leaks onto the skin, you may need to use a convex flange.

Via Ottawa Ostomy News, December 2017

REMINDER 2022 MEMBERSHIP FEES ARE DUE!

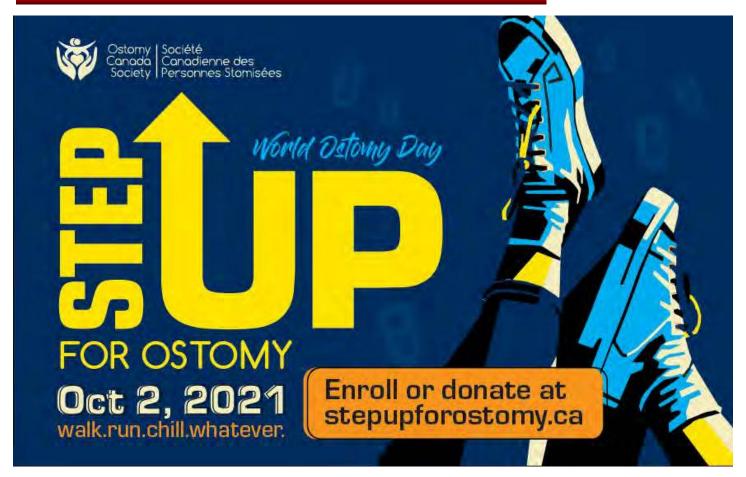
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Security Question: what city are we located in?

Answer: Regina



The Step Up for Ostomy Campaign has been very successful to date. We had a goal of \$50,000 and are now sitting at \$60,000, still quite modest for a national organization. There was so much more promotion this year, internally and externally. You might ask, "What does Ostomy Canada do with the money?" Here's some information you may find interesting and encouraging as we don't always have an opportunity to talk about Ostomy Canada of which we are part of. Ostomy Canada Society works with a very wide group of people living with an ostomy. Our mission is to help people with an ostomy, and their circle of support to live life to the fullest. Yes, there is fundraising and an appeal for donations, as this is how we offset and pay for such national programs as our Ostomy Canada Magazine; support and development of our Visitor Program; produce information and brochures to drive awareness and support for the Disability Tax initiatives, advocacy, Youth Camp and the like. We also provide support to our network of Chapters and Peer

Support Groups across the country which includes in some cases financial support if needed. OCS also works with such organizations as NSWOCC, Friends of Ostomates Worldwide Canada and others. If you want to learn more please don't hesitate to contact me.

Thank you to everyone who has donated to date. There's

still time to contribute.

A special thank you to the companies who participated in

the new "Local Sponsorship" program.

Adventure Printing, Regina and Saleski Pharmacy, Grenfell

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YOUNG OSTOMATES SUPPORT & FRIENDSHIP GROUP

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Contact Veronica: jay-lynn13@hotmail.com for more info
or check out our facebook group: YOS+FG



Bi-Monthly group get togethers in Saskatoon

Zoom meetings offered for those outside of Saskatoon

Sponsorship for all our activities

20-40 branch of the Saskatoon Ostomy Association Come meet others living well with an ostomy in a relaxed setting! We do various activities that are typically followed by coffee.

2021 meetings will remain virtual until we can safely meet in person!

Zoom meetings will be offered in January, March and May with a chance to win a gift card for all attendees!

We will re-assess meeting for a socially distant BBQ in the spring & what our fall meetings will look like. Follow us on Facebook for updates!



In Canada Contact - Peter West

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1-888-969-9698

http://www.ostomycanada.ca/

Ostomy Canada Society Mission Statement

Ostomy Canada Society is a non-profit volunteer organization dedicated to all people with an ostomy, and their families, helping them to live life to the fullest through support, education, collaboration and advocacy.



Call: (306) 352-8874 Fax: (306) 352-8876

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Tom was at the hospital visiting with his best friend Larry who was dying. Tom asked, "If there is baseball in heaven will you come back and tell me?" Larry nodded yes just as he passed away. That night while Tom was sleeping, he heard Larry's voice in a dream, "Tom..." "Larry! What is it?!" asked Tom. "I have good news and bad news from heaven." "What's the good news?" "There is baseball in heaven after all, but the bad news is you're pitching on Tuesday."



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In this winter season Walk like a penguin?

Ideally, people will shovel snow from walkways and mop water from floors. But if they don't, how can people stay safe and avoid slipping?

I saw one interesting suggestion on Twitter from the Dublin Fire Brigade: "Do the penguin walk! Walking like a penguin in compacted snow and ice will help prevent slips, trips and falls."

- Bend slightly and walk flat footed
- Point your feet out slightly like a penguin
- Keep your centre of gravity over your feet as much as possible
- Watch where you are stepping
- Take shorter, shuffle-like steps
- Keep your arms at your sides (not in your pockets!)
- Concentrate on keeping your balance
- Go S-L-O-W-L-Y



Freeimages.com

Following in the foot-steps of these experienced – and adorable – ice walkers is a great idea any time you're on slippery ground.

Niagra Ostomy Association, November 2019

Proper Care & Storage of Ostomy Supplies

Ostomy supplies are not inexpensive, to say the least. So, it is important to understand how to apply them properly with the fewest errors possible and equally important to know how to take care of and store supplies until use. Proper care may avert the need to discard unused supplies and thus be as economical as possible.

Be sure to read carefully the instruction sheet included in the box or guidelines on the container for specific recommendations for a given product.

Generally, all ostomy supplies should be stored in a cool, dry location. Too much heat can melt or weaken many of the materials used in ostomy wafers, pouches, and accessory items. Avoid leaving supplies in a hot car or in direct sunlight.

Review instructions periodically to refresh your memory and to see if any recommendations have changed over time.

Keep supplies such as wafers and pouches in their original box. By doing so, you save the brand name, product identification number, and the lot and date information for those items. Perhaps you will never need this information, but in the event you do, the box you have saved will provide the information you (or someone helping you) will need for reorder or to report any quality control problems.

Some ostomy supplies do have a "shelf life." Be sure to check for dates that may be recorded on their containers. If you find you have a box with an expired date, check with the manufacturer, your local supplier, or an Ostomy nurse for advice on usage.

While you do want to keep a "stock" of supplies so you are always prepared to change out your system, avoid the practice of stockpiling too much so your reserve will be as fresh as possible. This, of course, depends on factors such as the availability, proximity to a local supply house, or shipping issues.

Purchase supplies from a trusted vendor—one you know will provide good service as well as stock/ship current stock.

Reporting Defective Supplies

If you determine your supplies are defective in spite of proper use and storage, contact the manufacturer at their toll free number to report the problem and receive product replacement or adjustment. Let your supply source know of your report to the manufacturer. They need to be aware of problems; however, the complaint needs to be directed to the manufacturer to ensure the defect can be addressed.

*Source: Teresa Murphy-Stowers, Fort Worth, TX; via Dallas (TX) Ostomatic



The Overactive Ileostomy

An overactive ileostomy can result from a variety of causes. If the small bowel is inflamed due to Crohn's disease, radiation injury, or bacterial/viral enteritis, the output will be profuse. If there is narrowing of the small bowel close to the stoma, where the ileostomy goes through the abdominal wall, a pressure backup can lead to explosively high output. Any food that has a laxative effect should be eliminated or, at best, kept to a minimum. People with lactose intolerance will have output if they use any kind of milk product, including powdered milk, which is found in many prepared foods.

Excessive drinking of fluids will also increase the ileostomy output. (NOTE: this refers to over-drinking of soda, alcohol, coffee and similar liquids. Those with ileostomies are at increased risk of dehydration and should NEVER restrict fluids in an attempt to control output. Use common sense, folks.) An ostomate who has had a gall bladder removed may have an increased output. Medicines to counteract bile salts can be used if the problem is related to gall bladder removal. Many prescriptions and OTC drugs list diarrhea as a side effect.

The ostomate should work with his/her physician to evaluate the problem. Once disease can be ruled out, therapeutic emphasis can be placed on diet, and utilizing foods that decrease output. Some common foods that inhibit overactive output are white rice, apple sauce, peanut butter, and marshmallows. Potato latkes are good too!

Source: Osto-Info Hamilton; February 2011, via Halton Peel Newsletter, Jan 2012.





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ASK THE NSWOC

Q: My ileostomy runs like water and I have to wake up in the night to empty. Is this normal? A: Anyone who's had an ileostomy knows there can be a real variety in stool consistency, especially at the beginning. However, it is very important to thicken things up. An "applesauce" or "toothpaste" consistency is the goal. If stools are too watery, the body doesn't have time to absorb important things your body needs. Your food, your fluids or even your medications might just go flying by, kind of like they were shooting down a waterslide! This can be a serious problem. You might become dehydrated, feeling weak, tired or dizzy, or have dry mouth. Also, your appliance may not be lasting as long as it should. If your stools are liquid, it may be time to reach out to your local Ostomy Nurse for some advice. There are foods and medications that can help to get things back on track!



Monica Aikman

Q: Can I drink alcohol with my ostomy?

A: This may depend on what type of ostomy you have. With a colostomy, you may be able to return to the foods and drinks you enjoyed before your surgery, especially if your doctor says it's okay. With an ileostomy, things may work a little differently now. Bubbly beer could cause gas. Hard alcohols may be absorbed differently. Cocktails that are high in sugar could make stools more watery. Also, if you are already having liquid stools, alcohol could make you even more dehydrated. That said, life with an ostomy is meant to be lived. If raising a glass to the newly married couple, or having the odd 'cold one' on the back deck feels right for you, Cheers!

Q: Can I be allergic to my ostomy appliance?

A: True allergic reactions to ostomy appliances are rare, but they can happen. Rashes happen for lots of reasons — moisture, leaks, yeast, irritated hair follicles, or even damage to skin when removing an appliance. Ostomy Nurses are trained to help you to identify the cause. If your rash is a true allergy, there are things the Nurse may recommend, including choosing products without tape, switching to another brand, or using skin barriers to protect skin from the offending products. Your Ostomy Nurses are happy to help!



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We are a non-profit association and welcome bequests, donations and gifts. Acknowlegement cards are sent to next-of-kin when memorial donations are received. Donations should be made payable to Regina Chapter at address listed on this page and tax receipts will be issued.

VISITING SERVICES

We provide lay visiting service, at the request of the physician, patient or Ostomy Nurse, either pre-operative or post-operative or both. The visitor is chosen according to the patient's age, gender, and type of surgery. A visit may be arranged by calling the Visiting Coordinator, Ruth Suderman at 306-450-4690 or emailing sudermanruth@gmail.com

PRODUCTS MENTIONED IN THIS NEWSLETTER ARE NOT NECESSARILY ENDORSED BY THE REGINA OSTOMY CHAPTER. SEE YOUR DOCTOR FIRST BEFORE TAKING ANY OF THEM!

Charitable Registration No. 119114213RR0001

Moving? Questions? Need Information?

Regina Ostomy Chapter 7631 Discovery Road Regina, Sk S4Y 1E3

(306) 761-0221 or reginaostomygroup@gmail.com

VISITING PROGRAM

September and October

Colostomy - 1

Ileostomy - 3