

The

Mailbag

The Ostomy Support Newsletter Of
Jacksonville, Florida

Contact Information:

Patti Langenbach
(800) 741-0110 or
(904) 733-8500
patti@ostomymcp.com

Brenda Holloway
282-8181



Season Greetings

Next meeting will be the 3rd Sunday in January at 3pm

I encourage everyone to attend our meetings not just for you to get information and fellowship, but for you to share your challenges and successes with new or prospective ostomates. Remember when you had your surgery? Do you remember how you felt - your concerns and fears? All the professionals (Doctors, nurses, suppliers, vendors) can give information - only YOU can really share with a new ostomate the realities of surgery and beyond. We have been very lucky to have new ostomates and even someone who has yet to have surgery attend our last few meetings. This is an excellent opportunity to help your fellow ostomates!! Our next meeting is the **3rd Sunday in January - 3PM at Medical Care Products**. Please attend!

Patti Langenbach, Pres
Medical Care Products, Inc.

WORLD OSOMY DAY OCTOBER 3, 2009

**For more information please visit the
International Ostomy Association Webiste:
<http://www.ostomyinternational.org>**

Exercise: The Final Ingredient In Ostomy Management

Exercise has once again become fashionable - and that has probably done more to put people off it than anything else has. If the thought of strobe lights, rowing machines and leotards gives you the shivers, then take heart. There is no end of easy, enjoyable ways to make yourself a little stronger and a little fitter. Just find the ones that are right for you. Most of all, do not overdo it. Even light exercise is good exercise - for your heart, joints, muscles, lungs and for your general sense of well being. Gently does it.

To begin with, do not confuse exercise with sports. There is more to getting healthier than chasing a ball around on a football field. Walking is a great place to start. Post-operatively, just walking to the next-door neighbors or to the end of the garden is fine. When you begin to regain your strength, walk more - both for pleasure and as an alternative means of transportation. Moreover, when you do, walk briskly - so you get slightly out of breath. Gardening is great too. Digging, weeding, hoeing and mowing can constitute a superb day's workout. Of course, you will have a showpiece garden to show for it. Wait for about three months after surgery before beginning gardening. You will be surprised at how quickly you will feel the benefits. After a few aches in the early days, you will begin to feel suppler and be able to do more without getting out of breath. All doctors agree on the benefits of exercise, but it is a good idea to talk to your doctor before starting an exercise program, especially if you are very out of practice or if you have other health considerations, like asthma or a heart condition. Your doctor will advise you to take it easy to begin with and to enjoy yourself. You cannot obtain better advice than that.

Adapted from Coloplast: The New Outlook on-line, UOA Chicago, January 2008, via Inside Out On-line Feb/08.

How Often Do People Empty Their Pouch

We are often asked this by new ostomates! They want to know if they are doing it enough, or doing it too much or just doing it right. Regardless of what kind of ostomy you have, you should empty your appliance when it becomes 1/3 full, or sooner. How often people empty depends on a variety of factors: what they eat and drink, their particular metabolism, and what their tolerance is for having any waste in the pouch.

Very generally speaking, colostomates empty 3 - 4 times a day, ileostomates 6 to 8 times a day and possibly during the night as well, and urostomates 10 to 12 times per day. If this seems like a lot, consider the number of times you go to the bathroom to urinate - use that opportunity to empty your pouch as well. You're in there anyway, right? One male ileostomate remarked that the biggest change his ileostomy has made in his life is that he never uses a urinal anymore. He empties his pouch every chance he gets, which means every time he urinates.

Many of us don't make special trips to the bathroom just to empty a pouch, unless we have a urostomy. Make each trip serve a dual purpose. (Could this be called multi-tasking?)

SOURCE: Vancouver Ostomy Highlife May/June 2008, via Inside Out On-line May 2008.

Depression and the New Ostomate

by Mark Shaffer, from Northern Virginia *The Pouch*; via
Chippewa Valley (WI) *Rosebud Review*

At a recent support group meeting, a subject came up that I found intriguing. One of the participants in the rap session stated that he found himself depressed and withdrawn even though it had been a year since his surgery. He wondered how long he could expect that feeling to last and, I think, whether it would go on for the rest of his life.

Some ostomates adjust almost immediately. These folks see an ostomy as a cure for an illness that threatened their lives or restricted their activities. Others take a few months, generally feeling better about the situation as soon as they master the fine art of pouch changing and maintenance. For many, ostomy surgery begins a process that appears to be, and is, very close to the grieving process, and like any grieving process, the amount of time needed to feel emotionally whole again will vary.

It took me almost two years following my surgery before I felt like I had regained my former personality and was ready to move on with my life. So there is no magic amount of time needed to adjust to your new ostomy. Allow yourself the time you need and realize that the feelings of depression and isolation will eventually go away. If the depression is severe, don't be afraid to seek professional help.

If your isolation is caused by a lack of confidence in your appliance, seek help from an ostomy nurse. If your appliance is working fine but you still feel separated from others, seek help from other ostomates. Go to a meeting and meet others in the same situation. If you don't already have one, call your local support group and ask for an ostomy visitor who can talk to you about how he or she managed post-operative emotions. But above all, give yourself time to adjust.

Upcoming 2009 Events

Starting off in 2009 North & Central American & Caribbean Ostomy Association (NCACOA)

Regional Meeting February 4-7, 2009 will take place in the City of Colima, State of Colima, Mexico. If you are interested in attending this event please visit:

<http://www.ostomyinternational.org/Forms/NCACOARegioanlConference.pdf>

UOAA will be holding their 2nd conference. This one will held August 5-8 2009 in the city of New Orleans. If you are able to attend this event you will not only enjoy the conference but the city. Let the Good Times Roll. For more information please visit their Website: <http://www.uoaa.org>.

MRSA Found in More Locations

MRSA - methicillin resistant staphylococcus aureus - is one of the bacteria that is antibiotic resistant. It was usually seen only in hospitals. However, now it has been discovered in such unlikely locations such as health clubs, as reported in The Denver Channel.

This "super bug" exists on human skin or in the noses of healthy people where it is fairly harmless. However, if there is the slightest cut or abrasion on the skin, MRSA is able to enter the bloodstream. It can be deadly. It will attack anyone, young or old, male or female, healthy or sickly.

The Center for Disease Control says that MRSA is virtually always spread by direct physical contact and not through the air. It can be spread through indirect contact by touching objects such as towels, clothes, workout areas or sports equipment that have been contaminated by the infected skin of a person with MRSA. It begins as a small pimple or boil on the skin. It can be successfully treated with antibiotics at this stage. People with ostomies have the added risk of contacting MRSA under their skin barrier. It is advised always to wash one's hands with soap and water before touching the peristomal skin. This reduces the possibility of transferring some bacteria or fungus to the skin under the skin barrier, an ideal location for bacteria or fungus to grow; i.e., dark, warm and moist.

The Center for Disease Control Recommend the following to reduce the risk on contracting MRSA:

1. Wash your hands frequently and thoroughly with soap and warm water, especially if you are in a public place.
2. Wash towels, uniforms or gym clothes frequently.
3. Clean wounds and scratches immediately.
4. Do not share personal equipment with friends.
5. Keep cuts and abrasions clean and covered with bandages until they are healed.
6. Avoid contact with other people's wound or material contaminated from wounds.
7. If you think you may have a MRSA infection, contact your doctor immediately

SOURCE: The New Outlook on-line, Chicago, August 2008, via Inside Out On-line Sept. 2008.

International Ostomy Association

Are you interested in Ostomy related news from around the world? If so please visit the IOA Website <http://www.ostomyinternational.org>. There you will be able view past issues of the **IOA TODAY** Newsletter containing Ostomy related reports from around the world. There is also an up to date section called Publications. There you will find a number links to **Ostomy related publications** from around the world.

You may visit this page via <http://www.ostomyinternational.org/publication.html>.

Also found on this page you will find

Ostomy Chat Room Weekly Meetings

Yahoo Peoples with Ostomy2* - Mondays, 8:00 pm US Central time
<http://clubs.yahoo.com/clubs/peopleswithostomy2>

Community Zero (Ostomy) Support* - Wednesdays, 9:00 pm US Eastern time
<http://groups.yahoo.com/group/ostomatessupport/>

Shaz & Jason's Chat* - Saturdays, 8:00 pm UK time / 3:00pm US Eastern Time
<http://www.ostomy.fsnet.co.uk/chat.html>

Yahoo UK Ostomy Support* - 1st & 3rd Sundays, 8:00 pm UK time / 3:00 pm US Eastern Time
<http://clubs.yahoo.com/clubs/ukostomysupport>

Use this form to join our chapter! You do not have to be an ostomate to be a member and/or support the work of UOA. All information on this form will be kept confidential.

Name _____

Address _____

City _____ State _____ Zip _____

Phone# Home _____ Work# _____

Email Address _____

Type of intestinal or urinary diversion: Colostomy __, Ileostomy __, Urostomy __, Ileoanal Pull-thru __
Continent Ileostomy __, Continent Urostomy __, None __, Other __

You may use my name in chapter Newsletter & Directory: Yes __ No __

Mail to: Patti Langenbach, PO Box 10239 Jacksonville, FL 32247-0239

Medical Care Products, Inc

Toll Free 800 741-0110

WE ARE ON THE NET

www.ostomymcp.com

Medical Care Products, Inc
PO Box 10239
Jacksonville, FL 32247-0239

TO:

Medical Care Products, Inc

Family owned and operated for over 40 years

Call For Free Catalog

800 741-0110

We accept Medicare Insurance Assignments

Visit Our Web:

www.ostomymcp.com