

The Mailbag



Meetings are held at the Baptist Medical Center
8th Floor - Meeting Room C - 3rd Sunday of each month 3PM

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

Brenda Holloway
282-8181

Inside this issue

Complications.....2-4
Ostomy Chat Room
Weekly Meetings.....5

**Please plan
to join us
Sunday May.
21st
starting at
3 p.m.**

OSTOMY SUPPORT GROUP

I would like to thank everyone who attended our workday at Medical Care Products. We accomplished everything we set out to do. We now have new patient packets put together.

This month we will be having **Paul Capitano from Hollister** join us at our meeting on **May 21, 2006** at Baptist Medical Center, 8th Floor, Function Room C. I look forward to seeing each and everyone of you.

The following are the speakers I have line up so far:

- June 25 Steve C. Senay from Coloplast
- July 16 Patti w/Medical Care Products to play Ostomy Jeopardy
- Dec Christmas Party at a local restaurant

We are going to continue this year collecting the pop tabs for the Ronald McDonald House. We are going to see if we can fill a gallon jug by the end of the year again. In 2005 we filled a gallon jug up. This year we have far exceeded this amount. We will collect these at every meeting or you can drop them off at Medical Care Products

Also, please remember if you have any extra supplies that can be donated to our closet for those less fortunate and or to help individuals during the hard time or in between insurance companies. Either bring to a meeting or take them to Medical Care Products or call Brenda Holloway and she will arrange to pick them up at your home, her number is 422-8165. We appreciate all you do for our closet.

Only meetings that are changed this year due to holidays are the following:

***** June = June 25, 06 due to Father's Day*****

Thank you for your time,

Brenda L. Holloway, Support Group Contact

Medical Care Products, Inc
Toll Free 800 741-0110
WE ARE ON THE NET
www.ostomymcp.com



**WORLD
OSTOMY
DAY**
7 OCTOBER 2006

COMPLICATIONS

Adhesions

Definition

An adhesion is a scar tissue that binds together two anatomic surfaces which are normally separated from each other.

Description

Adhesions are most commonly found in the abdomen, where they form after abdominal surgery, inflammation or injury. Lysis (destruction or dissolution) of adhesions is a surgery performed to free adhesions from tissues.

Although sometimes present from birth, adhesions are usually scar tissue formed after inflammation. The most common site of adhesions is the abdomen, where they often form after peritonitis (inflammation of the abdominal lining) or following surgery, as part of the body's healing process.

Abdominal adhesions infrequently bind together loops of intestine resulting in intestinal obstruction. The condition is characterized by abdominal pain, nausea and vomiting, distention and an increase in pulse rate without a rise in temperature. Nasogastric intubation and suction may relieve the blockage. If there is no relief, an operation is usually required to cut the fibrous tissue and free the intestinal loops.

Although scar tissues within the abdomen can occur after any abdominal operation, they are more common after a ruptured appendix.

Most adhesions cause no problems, but they can obstruct the intestine in about two percent of all patients. These obstructions can occur several years later. The adhesions can also block the ends of the fallopian tubes, possibly causing infertility.

Questions to Ask Your Doctor:

How do you know the problem is the adhesions and not some other growth or condition?

Is surgery recommended to remove the adhesions?

What is the procedure?

Will the adhesions redevelop?

(www.healthcentral.com)

Bowel Obstruction

Obstruction of the bowel may result from a variety of complications which prevent the normal passage of intestinal contents. As the flow becomes blocked, back pressure builds up, causing the bowel to enlarge and produce pain. Since everyone swallows a lot of air which is normally passed from the bowel, continuation of the obstruction soon causes vomiting, and dehydration becomes a problem. Danger of the obstruction, other than severe discomfort, is the swelling bowel itself eventually cutting off the blood supply and leading to the death of small intestine tissue.

An obstruction can be detected very soon after it starts in ileostomates, because the normal constant flow of intestinal wastes suddenly stops and cramping discomforts begin. Occasionally, the ileostomy works intermittently with passage of particularly foul-smelling contents. Cramping doesn't mean obstruction, but simply indicates gas or spasm in the small bowel. Often an obstruction is temporary, with a sudden cessation of cramps and the rush of intestinal wastes heralding the end of the problem. Perhaps, one-third or more of all ileostomates have experienced some degree of intestinal obstruction, while a small proportion of ileostomates have required one or more operations because of obstructions.

The causes of obstructions include scar-tissue formation, stenosis (constriction) of the stoma, and food blockage. Scar tissue of adhesions can form rough cord-like bands across the bowel, narrowing it to a point where slight swellings or food particles can close off the passage entirely.

Food blockage is probably the most common type of obstruction that is encountered by an individual with an ileostomy, particularly in a new ostomate. Fibrous foods, such as tough meat and raw vegetables must be thoroughly chewed, the only teeth in the digestive system are in the mouth. Fibrous food should be avoided initially by the new

ileostomate and consumed only after determined by a trial and error what foods should be avoided and how long the food should be chewed.

Obviously, indigestible items, such as pits and seeds must be avoided, because they may form the center to which particles cling, producing a large wad of material which is capable of blocking the bowel.

As with many principles of ostomy life, prevention of food obstruction is much better than treatment. In fact, the word prevention, which is the key to so many ostomy complications, should be regarded as the key to good health.
(Dr. Marshall Sparberg)

Constipation

At one time or another, most of us experience the unpleasant condition of constipation. For people with ostomies, this situation pertains mostly to people with a colostomy or a urostomy. Ileostomates should not have this problem because they have no colon.

Many Americans are obsessed with their bowels—and we thought ostomates were the only ones. If they do not move them every day, they think something terrible will happen.

This focus on regularity is fueled by the mistaken idea that feces are poisonous; the colon is full of toxins; and that unless there is at least one elimination every day something dire will happen. As a result, many healthy people use laxatives on a regular basis. Most of them are convinced that they are constipated but really are not. In studies, people with this idea were given placebos, and most had bowel movements anyway. Some take laxatives routinely simply because they believe a regular purging is a good thing.

Feces are not poisonous. They are simply what are left of the food we eat after the body has absorbed the nutrients it needs. If you have fewer than two bowel movements a week, whether or not they are easily passed, you are officially constipated. A better definition is “any reduction in your usual number of bowel movements that continues beyond a week or two.”

How often you “go” depends on a variety of factors: your diet, how much liquid you drink, your metabolism, the medications you take; and your elimination habits. A healthy person may have one bowel movement a day, or two or three. Others “go” every second day or even less often. However, if your bowels suddenly stop, and you have a fever, are nauseated or vomiting, and have a severe pain in your belly, call your doctor right away. Also, do so if your bowel habits change and do not return to what is normal for you.

COMMON CAUSES OF CONSTIPATION

Drinking too little water – Water is the best drink. We need at least two quarts of liquids a day depending on your profile; i.e., ileostomates, urostomates and those on chemotherapy may need more.

Eating too little fiber – Fiber adds bulk to the stool, making it softer and easier to pass. It also speeds up transit time moving the stool down and out fast. We need 30-40 grams of fiber a day. Eat your vegetables!

Lack of exercise – Exercise stimulates the contractions of the intestines.

Medication – Many drugs can cause constipation. Most common are: calcium or iron supplements; diuretics, antidepressants, anticancer drugs; pain killers; codeine, aluminum-based antacids, nonsteroidal anti-inflammation drugs like ibuprofen, and high blood pressure medications.

Diverticulosis – This condition—the presence of fingerlike projections into the side of the bowel—is common in constipated people. Over 50 percent of people over 50 years old have this condition. If you are chronically constipated and are found to have diverticulosis, eat more fiber and drink more water.

Neurological problems – A stroke can affect the nerves that give the signal to eliminate, or it can weaken the muscles necessary to do so. (continued on next page)

Laxatives – If you take laxatives too often; i.e., more than prescribed, your bowel may stop moving until stimulated by some chemical. In addition, taking laxatives will lead to expansion of the colon; like overfilling an inner tube, weakening it which leads to serious complications like perforation and death.

Travel schedule – Travel may disrupt your normal routine. So, if you either ignore or cannot do anything about signals to “go,” this may eventually leave you constipated.

Bowel obstruction – A polyp, or tumor is the most worrisome cause of constipation. If a change in your bowel habits persist, see your doctor. He/she will test you to determine the cause by means of an occults blood test or a colonoscopy, etc. Narrowing of the stool may reflect an advanced problem.

Irritable Bowel Syndrome—IBS – can be a nervous condition with chronic gas, cramps, bloating and constipation that often alternate with diarrhea. Treatment is drinking more water, eating more fiber and reassurance.
(Dorothy Vaillancourt, RNET)

**The 2006 World Ostomy Day
Photo Contest**

Sponsored by
Hollister

**For more information please visit the
International Ostomy Association
Website**

<http://www.ostomyinternational.org>

Or view the March 2006 Mailbag Newsletter



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

Visit our chapter Website:

<http://www.ostomymcp.com/chapter/Jaxchapter1.htm>

Ostomy Chat Room Weekly Meetings

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

StuartOnline Ostomy Chat* - Tuesdays, 8:00 pm US Central time
<http://www.stuartonline.com/id10.html>

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:

Join us
Sunday May.
21st starting at
3 PM
Baptist Medical Center
8th Floor
Meeting Room C

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