

# TheMailbag

UOA Jacksonville Chapter #211

September 2002

Volume 4 Issue 9

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

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**Please plan to join us  
Sunday Sept 15th starting at 3 p.m.  
&  
Tuesday night, Sept 17th at 7 – 8:30 pm.**

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We are on the Net

Toll Free 800 741-0110

[www.ostomymcp.com](http://www.ostomymcp.com)

## **A Message From the President,**

As the end of summer draws near and Labor Day weekend approaches, it's time to get out that BBQ grill one last time for that final end of summer party, before we pack it away for the winter. I look forward to hosting the last party of the summer at my house. My family will converge on my house Labor Day for hours of eating and playing games. It's been a great summer for me, I hope yours was too and I hope you enjoy your Labor Day weekend. I look forward to the winter months and some cooler temperatures!

Just a reminder; mark your calendars now! We have two meetings scheduled for September. The first one is on **Sunday, September 15, 2002 at 3 pm**, our usual third Sunday of the month meeting. Our next one is on **Tuesday night, September 17th at 7 – 8:30 pm**. Both meetings are on the 8th floor in the conference room. We will have a trial run of two meetings a month for September and October. If it goes well, we will review this trial and formally adapt it at our November meeting. I hope that a choice of meeting times will be more convenient for all of you and help to increase attendance at our meetings. I look forward to seeing you all.

A big thanks to Eugene Sommerville for helping me and Brenda assemble the information packets we hand out to patients we visit. Thanks to his hard work, we were able to complete several other projects as well. Thanks Eugene!

Brenda and I have assembled a folder to present to potential advertisers in our newsletter. It contains a brief message from me explaining who we are and what our purpose is. It also has an explanation of our advertising rates and a few of our brochures. I'll present one of the folders at the next meeting for you to review. I also hope to have advertisers by then. All money raised through advertising will go to fund brochures and booklets for our information packets for our visitor program. It will also help fund supplies we need for our visitor program. We will also be starting a conference fund so we can send someone to the next annual U.O.A. Conference. If you know of anyone who might be interested in advertising their business, please contact me, Brenda or Patti. Please do your part to help make this a success!

I will soon be publishing a wish list of items that we need to help run our programs, such as a fax machine, a small personal copier, etc. These items are more desperately needed soon. You can donate them to our organization or donate the cash to buy a specific item on our list. All items are tax deductible. A full list will be presented at our next meeting and published in our next newsletter.

Don't forget! Election nomination will be held at our next meeting. Please make plans now to attend the next meeting and participate. For updates on our visitor program please see Brenda's column in this newsletter.

In a show of support for our country and the victims of **September 11th** please wear red, white and blue.

Come out and show your support...a moment of silence will be held for all the victims and their families. I will also have a prepared speech honoring them.

We will also have a small going away party for one of our treasured members. Come on out and find out who it is. This will take place at our Sunday meeting.

I hope to see you all at one of our next meetings!

Ronald G. Perry, President

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<p><b>The United Ostomy Association</b> 41st Annual UOA Conference Las Vegas, NV August 10-13, 2003 <a href="http://www.uoa.org">www.uoa.org</a></p>	<p><b>11th IOA World Congress</b> Bangkok, Thailand October 26-30, 2003 The Amari Watergate Hotel <a href="http://www.amari.com/watergate/index.htm">http://www.amari.com/watergate/index.htm</a> More Information: <a href="http://www.ostomyinternational.org/congress2003.htm">http://www.ostomyinternational.org/congress2003.htm</a> (More Information coming soon)</p>
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### **Meeting Call To Order:**

The meeting was called to order at 3:10pm. by the President, Ronald Perry. Sixteen members were present.

Mr. Van W. Russell, Senior Territory Executive, ConvaTec Company was the guest speaker. Mr. Russell gave an informative overview of the company's appliances and their functions. He stated that new products would be available in the year 2003.

### **Approval of Minutes:**

The minutes from July 21, 2002 meeting were read and approved.

### **Treasurer's Report:**

Patti reported \$1,706.21 in the treasury.

### **Meeting and Reports:**

Brenda, visitation coordinator and the president gave reports of their visits to new ostomy patients and their plans for contacting others. They also visited a patient with Crohn's disease who maybe a candidate for ostomy surgery and a young man living in an adult facility.

There are plans to distribute packages that contain information on nutrition, care of ostomy and other pertinent materials to new patients.

The president mentioned several methods to generate funds to purchase these materials, such as selling advertisements in the newsletter and applying for grants.

The president stated that it was time for election of officers. Patti volunteered to chair the nominating committee and select members to work with her. A slate of officers would be announced at the next meeting.

Ronald stated that it was time to start planning for the Christmas party, and he asked for suggestions for the party. One idea was to donate toys for children to Ronald mcdonald house. The president stated this idea and others will be discussed at the next meeting.

The meeting was adjourned at 4:30pm.

Submitted by Mamie B. Davis, Secretary

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## **VISITATION COORDINATOR'S COLUMN:**

Last month we received one emergency visitation and continued to follow the previous man that had his ostomy surgery on July 26, 2002. The emergency visit which was done by Ron. It was with a young man in his late teens. He had been stabbed numerous times and one of the wounds he received happened to be in the descending colon, therefore they had to do a temporary ostomy in the ascending colon so that the wounds and the colon could heal. He was first told that it would be 6 to 8 months but now has been told by his doctor that it probably will be 2 to 3 months which is a good sign. As of this date, he is doing fine but still weak as we all know how that is after this type of surgery. The other man that we are following, we visited on August 13, 2002, and is doing okay except that he too is still weak. We encouraged him to take his medications and to try to eat to gain strength back. Ron and I will be revisiting these two individuals this month to check on their status. I will be waiting for the next visits that come along and will keep you inform each month on how many calls we get.

Last month I had mentioned in my column that we were ready to begin our master plan on getting the word out. Unfortunately, Ron and myself were sick a lot in August, with me spending a couple of days in the hospital and were unable to fulfill that statement. My daughter also had to go home early so I had to take her back to South Florida all in one trip. (homesick).

So I lost my help but this coming up month at the September meeting, I plan to tell you that I have visited all the doctors in Jacksonville and surrounding areas. As we have a date set to get those folders prepared and get me out on the road for a couple of days to get them at least to the doctors offices. Then we will start setting appointments with the ET nurses. This may take us a little bit of time, as we all know that they are very busy nurses and we have to set the appointment according to their schedule. Thanks again and I look forward to seeing everyone at our next meeting. Remember we have two meetings in September. (one on Sunday, the 15th and one on Tuesday, the 17th)

Sincerely,

Brenda L. Holloway  
Visitation Coordinator

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**Visit StuartOnline Ostomy Chat Room Tuesday evening 8PM CST: [www.stuartonline.com](http://www.stuartonline.com)**

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## **Ostomy Identification Card - New Member Benefit**

UOA is making available to all members a traveler's identification card to be used at airport security checkpoints if necessary. The cards include space to fill in personal information such as name, type of surgery, physician name and phone number. The cards also include the following message: "For humane reasons, please carry out personal and luggage examinations discreetly. The cardholder has had an ostomy operation. Security screening and/or a body search may reveal a plastic pouching system (bag). Luggage may contain pouches and products for treatment of the ostomy as well as necessary medical supplies."

We hope these cards aid ostomates when traveling and going through security checkpoints. The cards are free to members and have been sent to all UOA chapters for distribution. They are also available by calling the UOA office at 1- 800-826-0826.

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## **Young Adults Conference**

The United Ostomy Association has announced the first conference designed for young adults who've undergone diversionary surgery. The Conference is scheduled for July 17-19, 2003, at the Holiday Inn East in St. Paul, Minnesota. Conference sessions will address body image, relationships, insurance reimbursement, college life and employment concerns. The registration fee, which includes most meals, will be \$125 for members and \$150 for nonmembers which includes a one-year UOA membership. Additional

details will be forthcoming, but for now spread the word to all young adults in your area. For more information visit the United Ostomy Association Web site [www.uoa.org](http://www.uoa.org).

You may contact them via 800 826-0826 or [info@uoa.org](mailto:info@uoa.org).

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## Thoughts on Odor Management

by Rosemary Van Ingen, ET, Greater Detroit Chapter; via South Brevard (FL) *OSTOMY NEWSLETTER*

Isn't it interesting that people with normal intact bowel tracts and urinary systems manage odor problems in an acceptable manner in our society? But when disease or trauma strike, and the person is the owner of an ostomy, the one big concern is the fear of offending society with an odor.

Basically, and simply, an ostomy is a man-made exit site that changes the point of exit from the bottom or back of our body to the front. Our eyes and nose are obviously on the front of our body, which leads us to be more aware of our changed body image and our odor-producing products.

I'm sure you've heard the statement "You've come a long way, baby." Yes, ostomy management has come a long way--considering that as little as ten years ago we had very few 100% odor-free appliances. When ostomy surgery was first developed, ostomates wore anything to collect output. Tin cans, rubber gloves, cups of all sizes and shapes, bread wrappers, and plastic margarine cups, just to mention a few, were standard equipment for the ostomate. Not only the feasibility, but odor problems this type of equipment produced, was enough to give ostomy surgery and people who had ostomies a very deplorable place in our society. Presently, almost all the ostomy equipment available to us today is made of odor-barrier materials. Therefore, if an ostomate does have a fecal or urinary odor about them, some detective work should be done:

1. Check out the application of the appliance to the body -- is it leaking?
2. Check out the closure of the appliance -- is it closed properly so that no fecal matter is oozing out after the closure is applied?
3. Do not put holes in the appliance as gas will seep out continuously.

The urostomate should rinse off or wipe off the spout of the appliance with a bathroom tissue after emptying. Those few drops left in the spout after closing the appliance can cause a urine odor under clothing. It's interestingly to note that most urostomy appliances on the market are odor-proof, but the connector tubing and bedside and leg bags are not. You must dispose of and replace these products when they take on urinary odors, or else your entire living quarters will smell.

Emptying an ostomy appliance is comparable to a person with an intact bowel or urinary tract having a bowel movement or emptying their bladder. How does the non-ostomate handle the odor produced by this normal function of their body? Room deodorizing sprays are popular; a quick flush of the toilet when defecation occurs, and striking a match or opening a window are some acceptable methods that have been used for odor management since the invention of indoor plumbing.

Why then, as ostomates, are we so "up-tight" about the odor produced when our appliances are emptied? This constant complaint has encouraged ostomy equipment manufacturers to create products to meet this need of "odor control." The trouble is, the ostomy deodorants do not work for everyone, and they are expensive.

Can we then consider ourselves "as normal as blueberry pie" so far as waste odors are concerned? Just remember, there is not a man or woman on this earth whose wastes do not smell. If someone tells you their waste products are odorless, then a nose overhaul is in order.

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## The UOA and the American Cancer Society

by Ann Favreau, UOA President; via Lorain County (OH) Chapter

As many of you know the [UOA](http://www.uoa.org) and the [American Cancer Society](http://www.americancancer.org) have worked together in communities for many years in a number of different ways. It is with excitement that we share the news that the ACS and the UOA have entered into a nationwide collaborative agreement with a colorectal cancer (CRC) focus.

The agreement outlines three areas of mutual interest and opportunity:

1. The ACS will continue its support of local UOA activities related to the patient visiting program and other support based on the needs of the community.
2. Public education efforts will promote the fact that colorectal cancer screening saves lives.
3. The UOA and ACS may work together on advocacy issues of mutual interest, as they are an important component in the fight against CRC.

Local chapters and ACS Divisions are encouraged to seek each other out to explore collaborative opportunities. As we move forward to implement this agreement, further information will be provided to you.

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## **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/chatroom.htm>

**Community Zero (Ostomy) Support\*** - Wednesdays, 9:00 pm US Eastern time

<http://www.communityzero.com/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>

**Provided as a courtesy by Jacksonville UOA Chapter.**

**These Chat Rooms are the work of individuals and do not represent any organization.**

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