



BELLEVILLE QUINTE WEST AND AREA CHAPTER  
JOURNAL  
UNITED OSTOMY ASSOCIATION OF CANADA

# HAPPY NEW YEAR!!

January, 2008

REACH OUT A HELPING HAND TO OSTOMATES AND THEIR FAMILIES

**Our next meeting will be an open discussion. Come with your ideas And concerns. To be held Jan 10th At 7:30 p.m.**

Our next meetings  
January 10th  
February 14th  
March 13th

**An Ostomates Prayer**

O, Lord as we have been reborn  
Let us share Your blessings  
With those Ostomates who do not know  
How good the life is You have given us

Let us vow in the years ahead  
To renew the work of our group  
As You have renewed our lives  
We thank You for those lives  
To mutual support of each other  
And the charge You have given us  
to support each other.

Those seeking assistance, a ride, information or those offering suggestions are requested to phone a member listed on the right. Ostomates or their caregivers requiring hospital or home visits should not hesitate to call any member of our Chapter Executive listed on the right.

Before following any onformation, suggestions and other matters pertaining to your health in general, in the Journal, it is important to consult with your doctor, ET, pharmacist or other qualified to pass medical advice.

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Regular monthly meetings are held on the second Thursday of each month, 7:30 p.m. Rm P21 at the Loyalist College Business and Development Centre, Belleville. \*\*July & August excepted. Please come and gain from the experience of others.

Open and full discussions with other Ostomates are great sources and resources for information

Every opportunity is a learning experience for yourself and for those with whom you share.

**MEDICAL CONSULTANT**

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Note: E.T. stands for "Enterostomal Therapist" To qualify for this designation, each candidate must attend a specifically designed programme, and successfully complete it through very specialized exams.

## **PRESIDENT'S MESSAGE:**

I hope as, as I am sure you do, that the great display of Christmas spirit and love of one's fellow man that we have all seen in the last month continues. Though demands at work, chores at home etc. remain the same, the month of December seems to kick in a whole different human attitude that, unfortunately is often short lived. Strange!

MMM, good! That is what I hope all your Christmas dinners were. We have a small butcher in Picton and their meat is delicious and the turkey!! Well! Let's just say that we had thirteen full, happy tummies by the end of the day.

On a more sensitive note, we realize that we have members who had an empty chair this year and we have not forgotten. We appreciate your continuing to support the group as new ostomates will be seeking advice or comfort from groups such as ourselves. Experience and confidence in who we are can give a new ostomate a whole different outlook on life, as we all know.

I thank those who attended the Christmas get-together and hopefully enjoyed both the excellent meal and the music. Without going into details, I can assure you that Vern, Earl and Gwen are folks of musical merit and are super sports. Thank you! Thanks to Shelley and Santa everyone took something away as a treat.

There were several regulars unfortunately unable to attend because of various reasons. We seemed to have a lot of competition that night in the various halls and theatres in the area. Also, because of hall bookings, the regular second Thursday night was unavailable and though the alternate date was in the Intell and twice in the newsletter, one couple missed the dinner.

Perhaps it is time to explore new options as to day of week, venue, etc as it would be nice if more members were able to attend. Enough said!

Hoping to see you all out on January 10th. And have a safe and Happy New Year.

Regards  
Gerry Putman

A senior citizen drove his brand new BMW Z3 convertible out of the car salesroom. Taking off down the motorway, he floored it to 90 Mph, enjoying the wind blowing through what little hair he had left. 'Amazing!' he thought as he flew down the M40, enjoying pushing the pedal to the metal even more.

Looking in his rear view mirror, he saw a police car behind him, blue lights flashing and siren blaring. 'I can get away from him - no problem!' thought the elderly nutcase as he floored it to 110mph, then 120, then 130mph. Suddenly, he thought, 'What on earth am I doing? I'm too old for this nonsense!'

So he pulled over to the side of the road and waited for the Police car to catch up with him. Pulling in behind him, the police officer Walked up to the driver's side of the BMW, looked at his watch and said,

'Sir, my shift ends in 10 minutes. Today is Friday and I'm taking off for the weekend. If you can give me a reason why you were speeding that I've never heard before, I'll let you go.'

The man, looked very seriously at the policeman, and replied,

'Years ago, my wife ran off with a policeman. I thought you were bringing her back.'

'Have a good day, Sir,' said the policeman.

### **Hints and Tips**

To protect your skin from damage, don't wait until your pouch starts leaking. Try to figure out how many days you usually get out of your appliance and change it before you get a leak.

Remember that your stoma might change its' size and shape over time. Periodically check it with a mirror to make sure that your flange fits properly. The hole in your flange should be no more than 1/8" larger than your stoma.

Eating a few large marshmallows may slow down output, which is helpful when it is time to change the appliance.

## A VISIT FROM SAINT OSTOMY

by: Marjorie Kaufman

"Twas the night before Christmas and all through the flat,  
there was a general confusion, including the cat.  
The bathroom was strewn with the ostomy ware,  
That I had abandoned, in utter despair.  
The courage I'd had in the hospital bed,  
To follow instructions, had suddenly fled.  
It all looked so strange and so uncommonly new;  
I swore I would never know quite what to do.  
Now which goes to which, and what sticks to what?  
I fumbled each step, with my nerves overwrought.  
And then in my anguish, I went to my room.  
To settle my brains for a night full of gloom.  
With a household a-flutter in holiday matter,  
I shut out the sounds of excitement and chatter.  
When out in the hallway I heard from below  
The sound of a voice with a jolly "Hello!"  
As I peaked through the door, up the stairway she came;  
And she smiled when she saw me, and called me by name.  
And, I in my wonder, just couldn't believe,  
That ostomy visits were made on Christmas Eve.  
And then in a twinkling she put me at ease,  
And said she could lessen my anxieties.  
She was dressed all in white, in a form-fitting sheath,  
With nary a sign of what lay underneath.  
So trim and well-groomed, a delight to behold,  
No one would expect, unless they'd been told.  
That standing before me so calm and serene,  
Was the very first ostomate I'd ever seen.  
Her manner so friendly, with faith and good cheer  
Soon gave me to know I had nothing to fear.  
My questions, like leaves in a hurricane flew;  
And with each knowing answer, my confidence grew.  
Then under her guidance each part fell in place,  
As I conquered the problem I'd just failed to face.  
And all of a sudden I knew I was free,  
To live just as normal and happy as she.  
For only an ostomate is really akin,  
To the fears and frustrations that lie deep within.  
Her time and her friendship so willing to give,  
Will keep me remembering as long as I live.  
And my family was grateful for what she had done.  
For once the evening was festive and fun.  
Now each time I meet her, more clearly I see,  
The "saint" who came calling with blessings for me!"

### COUNSELLING

A husband and wife came for counselling after 15 years of marriage. When asked what the problem was, the wife went into a passionate, painful tirade listing every problem they had ever had in the 15 years they had been married. She went on and on and on: neglect, lack of intimacy, emptiness, loneliness, feeling unloved and unlovable, an entire laundry list of un-met needs she had endured over the course of their marriage. Finally, after allowing this to go on for a sufficient length of time, the therapist got up, walked around the desk and, after

asking the wife to stand, he embraced and kissed her passionately. The woman shut up and quietly sat down as though in a daze. The therapist turned to the husband and said, 'This is what your wife needs at least three times a week. Can you do this?' The husband thought for a moment and replied... 'Well, I can drop her off here on Mondays and Wednesdays, but on Fridays, I golf.'

If you know of a new ostomate or one of our members who are ill, hospitalized or would just like to hear from us, please let us know. Contact Bawn Putman at 613-476-6557 or e-mail: [bgputman@sympatico.ca](mailto:bgputman@sympatico.ca)



### Our Purpose

The purpose of this group, is a volunteer-based organization dedicated to assisting all persons facing a life with gastrointestinal or urinary diversions by providing emotional support, instructional and information services through the membership, the family associated care givers and the general public.

Our trained volunteer ostomates collectively possess a wealth of knowledge and experience in coping with their ostomies and are always willing upon request, to visit new ostomy patients as well as and including their family members by non-ostomates (SASO) from our group.

**Subject: Fwd: 3 mysteries**

Here's three little mysteries you might enjoy solving..

**Mystery one**

A man was found murdered Sunday morning. His wife immediately called the police. The police questioned the wife and staff and got these answers:  
The wife said she was sleeping.  
The cook was preparing breakfast.  
The gardener was gathering vegetables.  
The maid was getting the mail.  
The butler was polishing shoes in the pantry.  
The police instantly arrested the murderer. Who did it and how did they know?

**Mystery two**

A man walks into his bathroom and shoots himself right between the eyes using a real gun with real bullets. He walks out alive, with no blood anywhere and no, he didn't miss and he wasn't Superman or any other crusader wearing a cape. How did he do this?

**Mystery three**

Old Mr. Teddy was found dead in his study by Mr. Fiend. Mr Fiend recounted his dismal discovery to the police: 'I was walking by Mr. Teddy's house when I thought I would just pop in for a visit. I noticed his study light was on and I decided to peek in from the outside to see if he was in there. There was frost on the window, so I had to wipe it away to see inside. That is when I saw his body. So he kicked in the front door to confirm my suspicions of foul play. I called the police immediately afterward.' The officer immediately arrested Mr. Fiend for the murder of Mr Teddy.> >>>>  
How did he know Mr. Fiend was lying?

Try to figure these questions before looking at the answers below:

**ANSWERS:**

1. It was the Maid. She said she was getting the mail but there is no mail delivery on Sunday.
2. He shot his reflection in the bathroom mirror.
3. Frost forms inside of the window, not the outside. So Mr Fiend could not have wiped it off to discover Mr. Teddy's body. Did you get them right?

**.POOR OSTOMY MANAGEMENT IDEAS**

Via: GB News Review

The following are poor procedures we found some people implement to manage their ostomy system. They are not recommended because they will yield less than optimal results. Sometimes we all do things that seem logical at the time, but inadvertently lessen our quality of life. A few of these are: Using alcohol regularly to clean the peristomal skin. This may result in itching, skin irritation and damage to sensitive tissue. Using the same pouch too long. Seven days is the maximum recommended. Pouches become saturated with odor which cannot be removed. Ignoring skin problems. Always treat any skin irritations when you change your ostomy system. Barriers covering damaged areas are made to actually help heal them if used properly. Wrapping the drainable pouch tail around and around the clamp before closing it. This will not make the clamp work better. All it will do is spring the clamp out of shape. Replace your old clamp with a new one every month. Letting the pouch get full before emptying . Excess weight will separate a two-piece system and will also put too much weight on the skin barrier resulting possibly in multiple problems. Empty the pouch at least when it is about one-third full. Living with unsatisfactory ostomy management. If you are unhappy with how your ostomy system works, make an appointment with an ET nurse. Not coming to UOAC Chapter meetings. Once you figured out this thing, sharing with others turns out to be a surprisingly good way to keep yourself proactive and happy.

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## I AM A STOMA!

Mary Lou Thomas, RN, ET, North Arundel Hospital via  
OAB Bulletin, Boston

Hi, I'm a stoma! I am great when you think about it. I must admit I have upset many people. Some people even consider me crude, rude and socially unacceptable. Well, excuse me!!

Just about everyone gets bent out of shape when their doctor says, "It may be necessary to create a stoma". Me!! They make it sound like a dirty word. Listen, it isn't the greatest for me either. I'm usually created from a piece of your intestines. I guess you know all about that. And then, just maybe you don't. So I will tell you.

Becoming a stoma wasn't my original function. No sirreee!! I used to just lie there in your abdomen, minding my own business. Then boom!! Some surgeon decided - let's make a stoma. He had a nerve! Why?? How could he consider such a thing? Well, I guess it was because you hurt so much, because you were very sick from a disease like Ulcerative Colitis or cancer, from a trauma like that automobile accident or from a birth defect. Your surgeon knew that by putting me to work, you could be free of discomfort and problems. In truth, so you could get on with living.

If that is why I was created, then why do so many people complain about me? Did you know that I am not given to just anyone? You see, there is a lot of planning and evaluation of each human being before I am created. So I know you can say only a "chosen" million or so are lucky enough to have me. You see - my people are special. My people are not like the normal run-of-the-mill people. I must say it takes them a while to recognize that fact. And, sad to say, there are a few who never do.

It isn't easy being a stoma! Some of you just don't understand what a miracle I am! Listen, before creation, I just lay quiet and usually content in your abdomen.

Now I work! It's rather easy when fecal waste comes through because that's what I'm used to. But some character decided, why not water waste as well? We then found out that character was very wise because that works also.

You think YOU have problems adjusting! Phooey. Did you realize that I am a delicate mucus membrane? Yet I am durable but some people think I am asphalt tile. Thank God, I don't have feelings. But my friend skin does. You want complaints? Give a listen to her sometime. She really gets upset because of ulcers, fungus, irritants, barriers, etc.

We are a team! And a darn good one. I'm moist, she is dry. I'm pink red, she is natural. I'm smooth, she is a little bumpy.

One of my biggest problems is my size. I am not always the same size from one human to the next. I am not always round. I don't always protrude nicely. Then why do some of you insist that my pouch opening is always the same? You need to check my size once in a while and fit me appropriately. Your shoes fit, don't they? Some of you complain because I'm not pretty. Well, your anus wasn't Miss America! I think I am attractive. I am red like a rose. I am always moist if I am healthy. And, I don't smell. My discharge can't help what you put in your mouth. If you care for me with thought and keep my equipment clean, that just about takes care of that.

In closing, let me say you can live a good life, a productive life. It's up to you. Believe me, I do not deserve a pedestal life. I am just part of you trying to do my job. All I ask is that you be honest about me. The doctors, special nurses, other professionals and your Ostomy Association are always ready, willing and able to help you.

### **Even non-seniors will appreciate it!!!! It pays to think outside the box!**

We went to breakfast at a restaurant where the 'seniors special' was two eggs, bacon, hash browns and toast for \$1.99.

'Sounds good,' my wife said. 'But I don't want the eggs.'

'Then I'll have to charge you two dollars and forty-nine cents because you're ordering a la carte,' the waitress warned her.

'You mean I'd have to pay for not taking the eggs?' my wife asked incredulously.

'YES!!' stated the waitress.

'I'll take the special then.' my wife said.

'How do you want your eggs?' the waitress asked.

'Raw and in the shell,' my wife replied.

She took the two eggs home.

**DON'T MESS WITH SENIORS!!!**

We've been around the block more than once



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# Young Woman with a Mission

by Jessica Grossman

I was diagnosed with Crohn's Disease at the age of nine, and was told that I needed surgery at the age of 13. The doctors informed me that there was nothing else we could do to relieve my pain and suffering in light of the way my disease had developed. I didn't have very much time to think about the lasting effects of the surgery — I just knew that I was sick and that this was my only option.

With my mind clouded by pain and drugs, I agreed to the surgery and three days later went into the operating room to receive an ileostomy. I didn't know it at the time, but this was the smartest decision I had ever made.

It has now been four years since my operation, and I have not had a single ounce of pain from my Crohn's Disease. What's more, I am now able to live life again instead of being bedridden and too weak to move! I have to admit that at first I found having an ostomy difficult, especially since I had never heard of such a thing before. To start with, I was young and still recovering my strength from being sick for so long. Realizing that I was now different from other people was hard, but the worst part was simply getting used to caring for my ostomy. It was a huge hassle and I did not enjoy it at all. To help myself face the challenge, I would remind myself that taking care of my ostomy was a lot better than lying in bed all day. Eventually I was able to fully care for my ostomy, and today I hardly give it a second thought.

Besides learning all the tricks of ostomy care, I also learned to accept who I am as a person with an ostomy. I know that I am "different", but I find myself different in a way that makes me special. I have embraced this and set out to make others aware of what I have. This is a perfect goal for me because I am not a shy person (you could say I have the personality of a comedian who just had 12 cups of coffee) and I am very outgoing and open. Because of these traits, most people who know me know about my ostomy. To me, this is not enough! My goal is to spread the word about what I have because I know that most people have never heard of an ostomy before.

During the course of the last school year, I had a flash of inspiration: What better way to spread the word than to use what people see and use every day? The media! I was taking a grade 12 media class at Lawrence Park Collegiate Institute at the time, and our final project was to represent a group in Canada and design an advertising campaign for them. I had thought long and hard about what I wanted to do. Then one night, I dreamt up a campaign for the United Ostomy Association of Canada and I knew it was what I had to do! I made the ad as well as a whole report used to present in my class. That's where this whole thing started...

After I made the ad, my parents were so proud of me they just had to show everyone they knew. People kept telling me that my ads really had a message and that they really hit home, and now they're being shown in this publication!

I'm hoping that *The Link* is a stepping stone to bigger things. Eventually I'd like my advertisements to be seen all over Canada so that Canadians can learn what the term "ostomy" means and what is associated with it, and so that my fellow ostomates can learn that it's about time we stopped covering up!

*Jessica gratefully acknowledges Valerie Wilcox, professional photographer, and Jonathan Grossman, image editor extraordinaire, for their help in bringing her vision to life.*



Over 70,000 Canadians have an ostomy

Most Canadians don't know what an ostomy is

It's about time we stopped covering up

For more information go to

[www.ostomycanada.ca](http://www.ostomycanada.ca)

*This article was copied from "The Link" which is magazine for the Ets.*

*I obtained permission from the editor Harvey Schwartz and the Executive Director Cathy Harley*

# Christmas Dinner



## LIVING WITH YOUR ILEOSTOMY

By: Lawrence R. Davis, M.D., Via: Spacecoast Shuttle Blast, & Metro Maryland

This article is from a talk about "The Surgeon's Responsibility to You and Your

Responsibility to the Surgeon." My talk will be on what a physician expects of an ileostomy patient. Being an ileostomate myself, I have jotted down things I experienced and what I (as a physician) expect of you as you learn to cope.

1. Immediate post-op care, the most important thing the doctor expects is the patient's acceptance of the change in body image: One of the biggest hurdles with patients who will not even look at their stoma is to let him or her take care of it. This is the beginning of the road to recovery and complete recuperation. This patient should and must be independent by the time he or she leaves the hospital.

2. Get the patient to look at the positive effects of their operation. They are free of the disease, cancer, diarrhea, pain. Most Ileostomates say they are so happy to be rid of 20 trips to the bathroom and sometimes getting there too late. The new ostomate should be made aware that he has not been mutilated but changed for the better.

3. The next big obstacle is "bagging the stoma," or finding the right appliances for the patient. The patient needs to know that their stoma is going to change. With weight change, the need will change. It is very important to understand the problems a surgeon faces. Keep in mind that the individual's problems dictate the surgeon's techniques. Individual problems dictate different stomas and locations. You do not swap dentures for eyeglasses, so don't compare stomas. Go to your ostomy meetings and learn all you can about ostomy care. The caring and sharing will help more than anything else. Usually, the ileostomate has been on diets for years, and after surgery, does not want to talk about diets. However, there are foods that may cause problems, gas or odors. The patient should be aware of possibilities that the doctor waits until some of the problems occur. This way, the patient is not overwhelmed with so many "iffy" things to think about.

### **Ostomy Myth # 1:** People with Ostomies Smell Bad.

Modern ostomy appliances are made of light weight odor proof materials. No one has ever walked up to me, sniffed and said, "Boy you smell terrible. You must have an ostomy." I spent the first year of living with an ostomy thinking everyone could smell me. Every time we drove past one of the many Minnesota cow pastures, I was sure it was me—it wasn't. Some ostomates worry about the smell when they empty. Our stool isn't any more toxic than other people's — We just empty up front— where our noses are. A touch of the flush handle and away goes the smell. The roots of this smelly myth probably stem from old time appliances. Early ostomy supplies were made from non-odor proof materials. Many ostomates had trouble controlling the odor from these old time appliances. Thank goodness for modern technology!

## AGING AND THE OSTOMATE

Via the Oakland County, MI Chapter

Growing old is a life-long process, and the physical, social, and psychological liabilities of aging are all part of it. Thanks to gerontology and geriatrics, we know more information than ever before on an intelligent approach to aging. As we grow older, subtle changes occur in our bodies. The most insidious is our skin. It loses elasticity and becomes thinner and drier, thus becoming prone to wrinkles and irritation. These changes can become real problems for those who must wear an appliance all the time. To prevent leakage as the skin becomes more wrinkled, one should stand up straight when changing the appliance. With one hand, stretch the skin so that it is tight, and with the other hand attach the appliance (using a mirror may help you see what you are doing). The skin over the entire body tends to bruise more easily and heal more slowly as we age. We need to be more careful when removing an appliance. A skin barrier covering the entire area under the appliance, or a very thin application of a skin-care product may help protect the tender skin. Aging may also result in less strength in the hands. Arthritis, lessening mobility, or pain in the fingers can make it difficult to put together a two-piece appliance. A one-piece appliance may eliminate the task of stretching a pouch over a faceplate. To sum it up, aging is a phenomenon we must all face, and when one considers the alternative, it's not too bad!

### **Ostomy Myth # 2:** New Clothes Optional.

While the shop-a-holic ostomates among us, myself included, may harbor thoughts of having a perfect excuse for buying an entire new wardrobe—it's really not necessary. I have only had to make one change in my attire as a result of my ileostomy. I used to wear French cut undies and now wear briefs. It's just more comfortable for me that way. There are some men whose stomas are poorly placed in at the belt line. They frequently find suspenders easier to deal with than belts. If you have an experienced ET nurse who pays attention to such things—stomas at the belt line can be avoided. What about spandex, skin tight leather, and bikinis? None of those items were in my wardrobe to begin with. But I do know a young woman from [alt.support.ostomy](http://alt.support.ostomy) who still wears a bikini— she just found a new style. I'm sure every ostomate has stories to tell about folks who stared and stared and still couldn't see our pouches through our clothing! So— if you find yourself facing ostomy surgery, don't waste time worrying about wearing muu muus or overcoats. At the most, you may have to buy a new swimsuit or some new undies. Though feel free to be like me and use it as an excuse to buy more clothes!

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In addition Kelly's pay the mailing costs to send out the Chapter's monthly Journals  
**Kelly's welcomes the opportunity to continue serving you.**

# Membership Application (for new members only)

Belleville, Quinte West & Area Chapter

Membership includes annual subscription to Chapter Journals and the UOAC publication "Ostomy Canada"

Membership in the UOA of Canada is open to all persons interested in Ostomy rehabilitation and welfare.

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Websites of Interest

UOAC: [www.ostomycanada.ca](http://www.ostomycanada.ca)

FOW: [www.fowcanada.org](http://www.fowcanada.org)

Crohn's & Colitis Foundation:  
<http://www.ccfcc.ca>

Ostomy.com - this has many different sites that you are able to access for ostomy supplies.

Editor's Note:

If you have a suggestion of what you would like to see in the newsletter please contact me at [bgputman@sympatico.ca](mailto:bgputman@sympatico.ca) or call 613-476-6557. You could also write your suggestions and give them to me at the meetings. If you have any pictures you would like to see included please send them to me.

I would appreciate if you could write your story of how you got here in order to publish it. I would like stories from ostomates and SASO members.