



HAVE A GOOD EASTER

April, 2009

REACH OUT A HELPING HAND TO OSTOMATES AND THEIR FAMILIES

Our next meeting will be Thursday, April 9, 2009 at 7:30 p.m. in P24 Pioneer Building. Val MacDonald will speak on income tax deductions.

Our next meetings

May 14, 2009

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 information, 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.

MEDICAL CONSULTANT

Olga Goncalves, R.N., BScN, E.T.

Available through VON, HNPE by referral, 392-4181 or 966-3530 Access Centre for Hastings & Prince Edward Counties.

Leanna Gillian R.N. BScN, E.T.

Available through VON, HNPE by referral 392-4181 or 966-3530 Access Centre for Hastings Prince Edward Counties.

Laura Rogers R.N. BScN, E.T.

Available at Belleville General Hospital, 613-969-7400 Ext. 2991

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.

OFFICERS:

PRESIDENT:

Maddy Swindon 399-3010

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COMMUNICATIONS:

EDITOR:

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DSS REP

Gerry Putman 476-6557

Regular monthly meetings are held on the second Thursday of each month, 7:30 p.m. Rm P24 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.

Special thanks to Gerry for chairing the February meeting and doing the Presidents Message for me in my absence. I hear that it was a great meeting and Bruce was very pleased with the turnout and the questions.

Thanks also to Mary Roberts for her informational talk about Coloplast products. It's so gratifying to have people ask questions and chat with the representative. Mary is a fountain of knowledge and I'm sure she helped me and several others.

How about this weather!! Who would believe that the temperature is right up there. I have noted a huge change in peoples attitudes too. The sunshine and good weather seem to pick everyone up, just makes you want to get outside and do something, doesn't it? I'm a little leery though that we are not done with snow yet. I wonder what the robins will eat? We have a flowering crab tree in our back yard and they have worker robins who peck off the tiny apples and send them to the ground for the rest of the flock. They take turns. That is what I would call team work.

Forms are available to nominate the ET of your choice for special recognition. Also the form is available for nominating a Chapter member in good standing who has been instrumental in keeping the Chapter functioning well, held a position, etc. Please feel free to make a nomination, the ETs are our lifeline and have helped us all so much.

Hope to see lots out at our next meeting. I'm sure that you will find it fun, informative and useful. Just in time for taxes too.

Have a wonderful month, keep well and know that we are here for you.

Maddy

The Dead Horse

Young Chuck in Montana bought a horse from a farmer for \$100. The farmer agreed to deliver the horse the next day.

The next day the farmer drove up and said, "Sorry son, but I have some bad news... the horse died."

Chuck replied, "Well, then just give me my money back."

The farmer said, "Can't do that. I went and spent it already."

Chuck said, "Ok, then, just bring me the dead horse."

The farmer asked, "What ya gonna do with him?"

Chuck said, "I'm going to raffle him off."

The farmer said, "You can't raffle off a dead horse!"

Chuck said, "Sure I can, Watch me. I just won't tell anybody he's dead."

A month later, the farmer met up with Chuck and asked, "What happened with that dead horse?"

Chuck said, "I raffled him off. I sold 500 tickets at two dollars a piece and made a profit of \$998."

The farmer said, "Didn't anyone complain?"

Chuck said, "Just the guy who won. So I gave him his two dollars back."

Chuck grew up and now works for the government. He's the one who figured out how this "bail-out" is going to work.

Results of the Questionnaire

I received 7 completed questionnaires and the following are the results.

1. Are you please with the time and place of the meetings?
All of the responses stated that they were happy with the day of the month, the time and the location.
2. What do you hope to get out of the meetings?
The mutual support of each other during our group discussions
Information on problems ie: new products
Support and friendship
Learning experience
Sharing of new and old ideas
"All in the same boat" - all need each other.
Guest speakers
3. Suggestion of speakers?
- Disability tax credit—this will be the topic for the April meeting
- Have a joint meeting a joint support group
- ET night—this will take place at the May meeting
- Registered Professional Dietitian for example Heather Williams
- Exercise with an ostomy—speaker Brock Masters—Bawn will try to get this speaker for the new year if people are interested.
- Picnic in the good weather
4. People are willing to contact speakers.
5. There were no other suggestions for other activities.
Maybe we should take a look at some fundraisers for the future.
We should plan for World Ostomy Day.
We need to have a visitation programme set up for new visitors and to recertify the visitors that we have. Gerry is looking into this.
6. No one wants to share any hobbies or interests.
7. No other suggestions or concerns were given.

I would like to thank all those who did take the time to fill out the form. As you can see Maddy has acted on some of the suggestions and will follow up next year.

HELPFUL HINTS FROM HERE AND THERE

Zip-lock sandwich bags are useful and odor proof for disposal of used ostomy pouches. Don't get hung up on odors. There are some great sprays and internal deodorants.... Remember: everybody creates some odors in the bathroom. Don't feel you are an exception. Hydration and electrolyte balance is of vital importance. Be sure to drink enough fluids to maintain good hydration (ileostomates, especially).

Read and learn all you can about ostomies. You never know when you may find an opportunity to educate someone about the life-saving surgery that has extended so many lives.

Learn to be matter of fact about this and never embarrassed. In the beginning after surgery, almost everyone experiences some depression. If you fit into this category, you certainly are not alone. But, it need not be a lasting condition. Try something as simple as walking—long walks. If the depression seems to linger, don't be afraid or ashamed to seek help. There is help out there! Never wait until you've used your last appliance before ordering new ones. Keep a list of your equipment, complete with order numbers, sizes and manufacturers. Let a number of your family know where you keep the list so that they can get the necessary supplies in the event of an emergency.

Do not spread paste on the entire back of a barrier—it will produce less than satisfactory results. Use paste only sparingly to fill uneven areas and around the stoma. Paste is a great filler, if used correctly. Use a round clothespin to roll up your tube of paste. (works for toothpaste tubes too.)

If you still have your rectum and have pain or a full feeling, you may have a collection of mucus which should be washed out. Check with your doctor regarding this.

Newfoundland Humour

As a young piper in Newfoundland, I was asked by a funeral director to play at a grave-side service for a homeless man, with no family or friends.

The funeral was to be held at a cemetery way back in the country, and this man would be the first to be laid to rest there. As I was not familiar with the backwoods area, I became lost; and being a typical man did not stop for directions. I finally arrived an hour late. I saw the backhoe and the crew, who were eating lunch, but the hearse was nowhere in sight.

I apologized to the workers for my tardiness, and stepped to the side of the open grave, where I saw the vault lid already in place.

I assured the workers I would not hold them up for long, but this was the proper thing to do. The workers gathered around, still eating their lunch. I played out my heart and soul.

As I played the workers began to weep. I played, and I played, like I'd never played before: From My Home & The Lord is my Shepherd to Flowers of the Forest. I closed the lengthy session with amazing Grace and walked to my car.

As I was opening the door and taking off my coat, I overheard one of the workers saying to another, 'Lard Jeezuz b'y, I never seen nothin' like that before and I've been putting in septic tanks for twenty years.'

If you know of a new ostomate or one of our members who is 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



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.

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EATING & DIGESTION AFTER ILEOSTOMY SURGERY

Via: Metro MD

There is no such thing as an ileostomy diet. An ileostomy is not a sickness, so there is usually no health reason for not eating the foods you ate in the past. If you have a special diet because of heart disease, diabetes, or other health problems, you should ask your doctor about a diet that will work with both the problem and your ileostomy.

You may wonder if you will be on a limited diet after surgery. Here are a few simple guidelines about your diet. Doctors often have their patients follow a low-residue diet the first weeks after any

abdominal surgery. This includes only foods that are easily digested and excludes raw fruits and vegetables. Be sure to find out when you can start a regular diet. Eat all foods that you like except those restricted by your physician. Try one food a day that you have not eaten since surgery.

Eat small portions at first, then gradually increase the amount. Chew well. If a small serving gives you cramps, diarrhea, or odor, eliminate that food from your diet temporarily and try it again in a few weeks. If it still bothers you, try it again in six months. Eat a balanced diet. You need protein, fats, carbohydrates, vitamins and minerals, just as you did before your illness. Your diet should include dairy products, vegetables and fruits, meats, fish, or legumes high in protein and cereals, bread, and liquids every day. Watch for foods that cause watery discharges with cramps or partial obstruction of the small bowel.

Some foods may tend to clump together to form a mass difficult to digest or expel. If this occurs, the ileostomy may squeeze out the water and retain the pulp. Nut, kernel corn, popcorn, coconut, Chinese vegetables, coleslaw and celery are among the trouble makers if eaten in large quantity. Many ileostomates find that these foods can be tolerated in small amounts if chewed well and eaten in combination with other foods. Experimenting is the only way to find out for sure. Eat regularly. Skipping meals to avoid gas or discharge is unwise because your small intestine will be more active, and more gas and watery discharge might result.

Some people find it best to eat a lesser amount of food four or five times a day. Drink plenty of liquids. A minimum of one quart a day is recommended.

Dehydration and loss of electrolytes are possible if not enough fluids are consumed in a day. Foods which are difficult to digest such as whole corn,

Chinese foods, skins or seeds, may appear in the pouch, undigested, if not chewed well. Medication in the form of coated tablets or time-release capsules may also come out whole in the pouch and be of no benefit at all. Beets will

make ileostomy output turn a reddish color rather like blood, but there's no harm done. Tomato juice and food dyes may change the usual color of ileal

discharge as well. Tomato skins can also appear in the pouch. For some ileostomates, milk or large quantities of beer can cause a watery discharge, as can iced beverages. How long is it before intestinal contents flow through the stoma after eating? This varies with each individual. It may take anywhere from 20 minutes to

several hours after eating. Some ileostomates find their movements occur regularly after eating; others find their movements are irregular. What you eat or drink, your mood, and your health may affect how long it takes, as does the length of the remaining ileum and many other personal characteristics of your digestive system.

FROM THE EDITOR of the UOAC Connection

Where are the unsung heroes?

Since September 2008, in each issue of the OA Connection, we've been asking, pleading, cajoling for UNSUNG HEROES. How many have we received? Maybe one.

Chapter presidents, secretaries, newsletter editors: Please look at your membership. Please ask your membership. Surely there have to be men and women in your chapters who are doing all the little things that make the chapter tick. Surely there have to be greeters at the door, people who check in members, guests and new members and make everyone feel welcome – but get no thanks for doing a simple, yet important job. Surely there have to be people who organize programs, other than the president, who try to come up with something exciting, interesting, and educational at each meeting. Surely there must be someone who coordinates refreshments and ensures a pleasant display is arranged when the meeting ends and people are ready to pig out. Surely there is someone who is at your venue an hour ahead to set up chairs, microphones, A/V equipment. Surely there is a long-time member who has served in so many areas, maybe nonexecutive, and who is there to answer questions that only he or she can.

Come on, people. Let's recognize those who deserve it.

At the annual meeting and/or conference, the person might only receive a plaque but it is a welcome THANK YOU for all he or she has given, without recognition or desire for it.

Let's make Unsung Heroes people to sing about.

Joel Jacobson

LOOK FOR UNSUNG HEROES IN YOUR CHAPTERS LET'S HONOUR THEM BY TELLING WHAT THEY DO.

E-MAIL Joel Jacobson, UOACConnection editor at jjacobson@hfx.eastlink.ca with their story.

Or you can give your entry to Bawn and I will get it to Joel for you

UOAC Visiting Program

1. The United Ostomy Association of Canada Inc and its chapter members are dedicated to complete rehabilitation of ostomates, through mutual aid, moral support and education.

Where does all this begin? With the trained ostomy visitor! The trained visitor is the heartbeat of the organization. Visitors come in various sizes, shapes, ages and sex. They may be models, business people, athletes or homemakers, young and old alike, but they all have the common bond of having undergone ostomy surgery, and are now living productive and happy lives.

Despite assurances from doctors, nurses and others concerned with complete recovery of the patient, there is no substitute for the visual proof received through a visit from a cheerful, attractive and well-adjusted ostomate. The visitor ostomate is a member of the rehabilitation team, which consists of physician, nurse, enterostomal therapy nurse, and volunteer visitor.

However, only the visitor is uniquely qualified to share non-medical information and to help in the psychological and social rehabilitation of the patient. The visitor comes prepared to share positive experiences and the combined information of the members of the Association.

Potential visitors attend a training session that focuses on certain fundamentals of visiting: purposes and objectives, visitor responsibilities, phases of psychological adjustment, and concepts of basic care and management. Then the Art of Visiting is examined by looking at: visiting techniques, frequently asked questions, types of visits, and potential problems. A certification of each visitor results from a satisfactory participation and understanding of the role of visitor.

Once certified a visitor is called as required by the Chapter Visiting Coordinator who acts in response to a request for a visitor by a doctor or an Enterostomal Therapy nurse. When the visit has been completed, a simple report is made to the Chapter Visiting Coordinator.

Most new ostomates prefer having a visit with a trained ostomate in order to rationalize their experience and to be convinced that a happy and productive life is indeed possible after their ostomy surgery.

The Visitor training sessions are conducted by the District Support Services representative for your Chapter. Qualified visitors are advised to up grade approximately every 3 years.

The D.S.S. representative for the Belleville Quinte West and Area Chapter is Gerry Putman

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Shoppers Home health Care takes great pride in our professional, knowledgeable staff. They have earned us our position as Canada's leading Home Health Care

retailer, and they ensure that you will get great advice and most importantly the right solution for your health care needs.

That is why Shoppers Home Health Care is pleased to announce that on the last Thursday of every month, we will be sponsoring an Ostomy clinic.

From 1-4 p.m. you are invited to come to our retail location and speak privately to a knowledgeable ET nurse regarding any concerns you may have about your ostomy.

Come in during our ostomy clinic on seniors day and with your Shoppers optimum card, you can receive 20% off your ostomy supplies.

For more information stop in at 264 Dundas St. E in Belleville or call us at 613-967-4333 and talk to one of our knowledgeable customer service representatives. Clinic dates for the spring are February 26th, March 26th. And April 30th.



Every individual is unique and may need to try a number of products to find the best solution...



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Everyone over 40 should have a pretty easy time at this exam. If you are under 40 you can claim a handicap. This is a History Exam for those who don't mind seeing how much they really remember about what went on in their life.

Get paper & pencil & number from 1 to 20.

Write the letter of each answer & score at the end.

Then before you pass this test on, put your score in the subject line.

1. In the 1940s, where were automobile headlight dimmer switches located?

- a. On the floor shift knob.
- b. On the floor board, to the left of the clutch.
- c. Next to the horn.>

2. The bottle top of a Royal Crown Cola bottle had holes in it. For what was it used?

- a. Capture lightning bugs.
- b. To sprinkle clothes before ironing.
- c. Large salt shaker.

3. Why was having milk delivered a problem in northern winters?

- a. Cows got cold and wouldn't produce milk.
- b. Ice on highways forced delivery by dog sled.
- c. Milkmen left deliveries outside of front doors and milk would freeze, expanding and pushing up the cardboard bottle top.

4. What was the popular chewing gum named for a game of chance?

- a. Blackjack
- b. Gin
- c. Craps

5. What method did women use to look as if they were wearing stockings when none were available due to rationing during WW II.

- a. Suntan
- b. Leg painting
- c. Wearing slacks

6. What postwar car turned automotive design on its ear when you couldn't tell whether it was coming or going?

- a. Studebaker
- b. Nash Metro
- c. Tucker

7. Which was a popular candy when you were a kid?

- a. Strips of dried peanut butter.
- b. Chocolate licorice bars.
- c. Wax coke-shaped bottles with colored sugar water inside.

8. How was Butch wax used?

- a. To stiffen a flat-top haircut so it stood up.
- b. To make floors shiny and prevent scuffing.
- c. On the wheels of roller skates to prevent rust.

9. Before inline skates, how did you keep your roller skates attached to your shoes?

- a. With clamps, tightened by a skate key.
- b. Woven straps that crossed the foot.
- c. Long pieces of twine.>

10. As a kid, what was considered the best way to reach a decision?

- a. Consider all the facts.
- b. Ask Mom.
- c. Eeny-meeny-miney-mo.

11. What was the most dreaded disease in the 1940s and 1950s ?

- a. Smallpox
- b. AIDS
- c. Polio

12. "I'll be down to get you in a _____, Honey"

- a. SUV
- b. Taxi
- c. Streetcar

13. What was the name of Caroline Kennedy's pony?

- a. Old Blue
- b. Paint
- c. Macaroni

14. What was a Duck-and-Cover Drill?

- a. Part of the game of hide and seek.
- b. What you did when your Mom called you in to do chores.
- c. Hiding under your desk, and covering your head with your arms in an A-bomb drill...

15. What was the name of the Indian Princess on the Howdy Doody show?

- a. Princess Summerfallwinterspring
- b. Princess Sacajawea
- c.. Princess Moonshadow

16. What did all the really savvy students do when mimeographed tests were handed out in school?

- a. Immediately sniffed the purple ink, as this was believed to get you high.
- b. Made paper airplanes to see who could sail theirs out the window.
- c. Wrote another pupil's name on the top, to avoid their failure.

17. Why did your Mom shop in stores that gave Green Stamps with purchases?

- a. To keep you out of mischief by licking the backs, which tasted like bubble gum.
- b. They could be put in special books and redeemed for various household items.
- c. They were given to the kids to be used as stick-on tattoos.

18. Praise the Lord, & pass the _____?

- a. Meatballs
- b. Dames
- c. Ammunition

19. What was the name of the singing group that made the song "Cabdriver" a hit?

- a. The Ink Spots
- b. The Supremes
- c. The Esquires

20. Who left his heart in San Francisco ?

- a. Tony Bennett
- b. Xavier Cugat
- c. George Gershwin



ANSWERS

1. (b) On the floor, to the left of the clutch. Hand controls, popular in Europe, took till the late '60's to catch on.
2. (b) To sprinkle clothes before ironing. Who had a steam iron?
3. (c) Cold weather caused the milk to freeze and expand, popping the bottle top.
4. (a) Blackjack Gum.
5. (b) Special makeup was applied, followed by drawing a seam down the back of the leg with eye brow pencil.
6. (a) 1946 Studebaker.
7. (c) Wax coke bottles containing super-sweet colored water.
- 8 (a) Wax for your flat top (butch) haircut.
9. (a) With clamps, tightened by a skate key, which you wore on a shoestring around your neck.
10. (c) Eeny-meeny-miney-mo.
11. (c) Polio. In beginning of August, swimming pools were closed, movies and other public gathering places were closed to try to prevent spread of the disease.
12. (b) Taxi Better be ready by half-past eight!
13. (c) Macaroni.
14. (c) Hiding under your desk, and covering your head with your arms in an A-bomb drill.
15. (a) Princess Summerfallwinterspring. She was another puppet.
16. (a) Immediately sniffed the purple ink to get a high.
17. (b) Put in a special stamp book, they could be traded for household items at the Green Stamp store.
18. (c) Ammunition, and we'll all be free.
19. (a) The widely famous 50's group: The Inkspots.
- 20.(a) Tony Bennett, and he sounds just as good today.

SCORING

17- 20 correct: You are older than dirt, and obviously gifted with mental abilities Now if you could only find your glasses. Definitely someone who should share your wisdom!

12 -16 correct/: Not quite dirt yet, but you're getting there.

0 -11 correct: You are not old enough to share the wisdom of your experiences.



Canadian Ostomy Youth Camp Mission Statement

- To provide an opportunity for young people aged 9-18 with consideration to emotional growth and maturity, who have ostomies or other special related needs (intermittent catheterization; urinary or bowel incontinence; internal pouch; Crohn's disease or ulcerative colitis), to attend camp and participate in camp activities under professional supervision
- Provide formal/informal education on:
 - anatomy and physiology
 - self esteem and coping
 - sexuality
- Encourage independence and self confidence with personal care and camp activities
- Provide individual ET and UOAC counselling on physical and psychosocial needs

Activities:

- formal/informal education sessions
- swimming
- camp out
- outdoor recreation
- rafting
- arts and crafts
- dance
- rap sessions

WHEN: July 6 - July 11, 2009

WHERE: Camp Horizon, Bragg Creek Alberta (southwest of Calgary)

WHO: Children between the ages 9 - 18 who have had or who will have bowel or bladder diversionary surgery or who have related special needs (i.e. self catheterization, bowel and bladder incontinence), due to birth defects, trauma or disease (e.g.. Crohn's disease, ulcerative colitis, cancer, spina bifida.)

COST: Registration fee is \$550.00/child plus airfare (transportation to and from camp, room and board are included)

CONTACT: UOAC office or Camp Coordinator, Pat Cimmeck at pvc@shaw.ca

APPLICATION FORMS: Available upon request from Coordinator

DEADLINE FOR APPLICATION: June 1, 2009

Reminder

Could you please donate you Canadian Tire money for the purchase of plastic cups, plastic spoons, etc.

If you can could you please give it to Gerry.

Thank you

This article has been copied from the Handbook for New Ostomates that was written by the Vancouver Ostomy Association. Our group has copies of this book for lending to ostomates.

SPORTS & EXERCISE

You should begin walking in moderation after your surgery and do this regularly, every day after you get home. Walking stimulates the return of bowel function and will get you back on the road to regaining the muscle you lost while in hospital. Whatever sports you may have played in the past, you can enjoy them again with few exceptions. Common sense is required, of course and this mean NO heavy lifting during the weeks immediately following surgery. Unless your surgery was done laparoscopically, your abdominal muscles will have been weakened by incisions and must be given adequate time to heal. Improper lifting, or lifting too heavy a weight too soon could cause a hernia. Again, NO lifting, not even a vacuum cleaner or laundry hamper for those first few weeks and then only introduce light loads gradually and carefully. If you want to return to the gym you can do this but you should avoid abdominal exercises for a while, and then only introduce these in gradual, gentle amounts. A personal trainer, if you can afford one, can work with you to develop a safe exercise regime. Ostomates who regain previous fitness levels can and do return to a huge variety of sports and exercise -- running, swimming, biking, snorkelling, golf, hiking, yoga, team sports, triathlon -- you name it. The list includes many contact team sports as well -- professional footballers have played with an ostomy. Unless your chosen sport before was power lifting or wrestling, you will probably be able to do your favourite sports again.

Protecting the Stoma During Sports

Stomas are fairly hardy, but some common sense rules apply. Stomas should be protected from direct physical blows, from too tight clothing, and from rigid objects (ie: belt buckles) over them. Ostomates engaged in contact sports should protect their stomas by wearing a stoma guard and if desired, an abdominal /surgical support belt as well.

A stoma guard is similar in function to a male athletic cup and is held in place with an ostomy belt. Abdominal/surgical support belts aren't 'belts' per se, but more like corsets that close in front with velcro. They come in different sizes; you can make them as tight or loose as you want. It's like wearing armour and can boost confidence if you're anxious about being bumped in crowds or groups. They can be worn under clothes but they're bulky and rather restricting. The main danger to a stoma during strenuous sports is being cut or lacerated. Because the stoma itself has no nerve endings, you can be injured without knowing it. Causes of stomal laceration include shifting of the wafer, too small an opening, and rigid items too close to it. You don't want to overdo things, but stomas can withstand a bit of rough and tumble. Keeping the Appliance on During sports

Ostomy belts are useful, as is taping the appliance around the edges. If you sweat a lot, you should check your flange periodically -- you might need to change if a game is ongoing and you feel the appliance slipping. And Very Important . . . HYDRATION. Especially for ileostomates -- drink lots of water if you're exercising, playing sports or just out for a long walk.

Know how to prevent sagging?
Just eat till the wrinkles fill out.

Always Remember This:

You don't stop laughing because you grow old,
You grow old because you stop laughing

I've sure gotten old! I've had two bypass surgeries, a hip replacement, new knees, fought prostate cancer and diabetes. I'm half blind, can't hear anything quieter than a jet engine, take 40 different medications that make me dizzy, winded, and subject to blackouts.

Have bouts with dementia.

Have poor circulation; hardly feel my hands and feet anymore.

Can't remember if I'm 85 or 92.

But, thank goodness,

I still have my Florida driver's license.

Innovation in Ostomy Care

Discover a **Worry-Free FIT**

A unique patented **Moldable Skin Barrier Technology** that allows users to mold and shape their wafer with their fingers to fit intimately to the unique shape of their stoma every time.

Experience Benefits

- **Improved Skin Protection** -- Custom fit minimizes the risk of effluent coming in contact with peristomal skin.
- **Simple to Use** -- Easy to shape -- no measuring, tracing or cutting necessary!
- **Adaptable** -- Expands and contracts along with the stoma helping to maintain a gapless fit during wear.

For more information on this product and others, call our Customer Relations Center (Registered Nurses on staff) at 1 800 445-6302, Monday through Friday, 8:00 AM to 7:00 PM (EST), or visit our Web Site at www.convatec.ca

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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.

The following information is kept strictly confidential

Please complete the following form:

Name _____ Phone _____

Address _____

City _____ Postal Code _____

E-mail (if applicable) _____

Type of surgery _____

Please make cheques of \$23.00 payable to:

**UOAC Belleville, Quinte West & Area Chapter
C/O Vernon Kemp
RR#1, Frankford, On
K0K 2C0**

Websites of Interest

UOAC: www.ostomycanada.ca

FOW: www.fowcanada.org

Crohn's & Colitis Foundation:
<http://www.cffc.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 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.