

**NORTH STRAND
OSTOMY
ASSOCIATION**

Loris Healthcare System
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Loris , SC 29569

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The Pouch Report

Newsletter serving Members and Friends of the North Strand Ostomy Community

Volume 3, Issue 3

Spring 2008

HISTORY OF NORTH STRAND OSTOMY ASSOCIATION

It is Spring again. The flowers are blooming and the birds are singing. All of God's creatures are growing and so is our ostomy support group! This is great news. Along with growth is change and opportunity. As we grow as a group and expand we will have added opportunities for assisting within the group for the betterment of the members. We have come a long way in a short period of time. As we strive to move forward we must step back and reflect upon the past. Many of you know the story, but I will tell it for the sake of those who do not. In 2005 we started the North Strand Ostomy Association (NSOA). The NSOA was a vision of our existing president Doug Spivey. Doug discussed the fact that we need an ostomy support group in the community with Mr. Arnold Green Chief operating officer for Loris Healthcare System, Mr. Green in turn spoke with me and I meet with Doug to plan our first meeting. There definitely was a need , because there was no support group anywhere in the area and to this day Wilmington or Florence is the nearest location to participate other than our own. With one man's vision this group began, and of course I wanted to start a group too. It has been the mission of the group to educate, support, and mentor ostomates and their significant others. In our meetings we frequently have guest speakers who are knowledgeable regarding issues relevant to ostomates , but we also have educational meetings that are more general in nature like the April meeting on Disaster preparedness. Over the past three years we have appointed officers for needed positions such as secretary , treasurer , president, and vice president. We became an affiliated group of the United Ostomy Association of America (UOAA). We have an annual picnic and Christmas party. We started a food and equipment pantry which has been a huge success thanks to the membership. These are just a few of our accomplishments, but we also have plans for the future. Mr. John Mcdermit has taken on the huge job of creating a website for but he needs our help and suggestions on what we want on the website. We need a logo, but I need a graphic artist to help with this. If you know one let John or myself know. He will be discussing these issues at our meeting in April. Last meeting Joan Mansfield CWOCN from Conway came and she typed the minutes for me. A big thanks to Joan! We are planning on some of the membership going to Convention this year and have plans for raising some money for that project. I will be doing some research for Coloplast and am going to donate some of my proceeds to this cause as well so if anyone is interested in being in a study for Coloplast let me know. It really is easy, but they are including only ileostomy and colostomy participants at this time. We will discuss it more in detail at upcoming meetings. So with all of this history and plans for the future we can only flourish and prosper, so I want you to give your suggestions and get involved if you feel lead to do so. We have a great group and I am very proud to serve you all.

In your service,

Regina

**North Strand Ostomy Association Meeting Minutes
FebruaryMarch 2008
2:00—4:00 pm
SMC Private Dining Room**

North Strand Ostomy Association :

President: Doug Spivey

Vice President: Jim Rose

Secretary: Virginia Hucks

Treasurer: Jim Faulk

The January meeting was all about health and fitness. We had a mini fitness fair with blood pressure, weight, glucose testing done. The focus was on being healthy for the new year. Hand outs were given to members about living healthy lifestyles. It was fun and motivating.

The February meeting was a round table meeting as we do from time to time. We just talked and discussed upcoming events. Mr. Lawrence showed us a nice white cover for pouches his sister makes and he gave us some as well. The material was a cotton and appeared very comfortable. We took up monies for flowers for Dr. Stout one of our members who passed away.

At March's meeting we had 22 people at the meeting. Dr Trevor Poole spoke to group. James and Pat had the refreshments for this time. David and Virginia well have the refreshments in April.

Dr Trevor Poole talked to us about Cancer and that people should have a colonoscopy about ever 5 years. Some people will have polyps. Dr Pool states that some people will need surgery for illesotomy and Colostomy. People with Chron's disease often have to have a colostomy or illeostomy. Dr Trevor Poole gave us some good information about cancer and other problems. Dr Trevor also talked in length about hernia surgery. Dr Poole also stated that senna was a good natural laxative and prune juice is also a good laxative. Dr Poole also stated we need about 25-30 GM's of fiber daily and we all need to drink plenty of water.

The ostomy group is making plans for going to the Ostomy Convention in New Orleans in August 2009. We are hoping to send some of our membership to the Convention. If you are interested please let Regina Know.

Use this form to join our chapter! **You do not have to be an ostomate to be a member . 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: Regina F. Holmes 3655 Mitchell St. Loris, S.C. 29569

Meetings Re held T the SeaCoast Medical Center Private Dining Room the !st Sunday of each month.

No scheduled meetings during June or July.

You Have Adjusted to Your Ostomy

When...

via Hemet-San Jacinto (CA) Stoma-Life

- You stop spending all of your spare time in the bathroom waiting for your stoma to work so you can empty the pouch right away.
- You can move about freely, without holding your appliance as though it might fall off any minute.
- You make that first trip to the mailbox without taking along your ostomy supplies.
- You stop grabbing your abdomen when the grocery clerk asks if you need help to the car with your bag.
- You go out for the evening and realize too late that you left your emergency kit at home.
- You begin to think how lucky you are to be alive

North Strand Ostomy Association Mission Statement

The mission of North Strand Ostomy Association is to assist people who have or will have an intestinal or urinary diversion including: colostomy, ileostomy, urostomy, and continent diversions such as J-pouches. We provide education, psychological and family support, advocacy, and fellowship to ostomates as well as their friends and families.

Printing of this newsletter is provided by:



New from UOAA's March 08 Newsletter

1.

they replace all, or part of an internal body organ. Buried deep in the Social Security Act is the statement that prosthetic devices include colostomy bags and supplies related to colostomy care. Over the years this coverage has also been understood to apply to ileostomy and urostomy pouching systems.

Therefore, to keep this fact in front of our legislators, we have to start writing and talking about our prosthetic devices and not our bags or appliances. There may come a time in the near future when the powers-that-be may take the position, for example, that one type of pouching system is good for all people with ileostomies. We know that no two people manage their ostomy the same way ... that we need prosthetic devices that allow us to choose the system that works best for us. So in the future when referring to that "thing" attached to our abdomen, remember "appliance" ... bad; "prosthetic device" ... good!

ELECTION RESULTS

To those ASGs that exercised their right to vote, thank you! We again have a Secretary. Susan Burns was the successful candidate. Our thanks to the other candidates: Bob Parish and Michael Guss. Susan's term commenced March 1st, 2008 and will continue through December 31st, 2009. Susan will continue participating as a member of the 2009 New Orleans Conference Planning Committee.

FALL, 2008, ELECTION

Again this Fall you will be asked to elect two Directors. Attached to this UPDATE are two documents prepared by our Chair of the Nominations and Elections Committee, Ginnie Kasten. The first contains information about the election process; the second is a nomination form.

CONSTITUTION AMENDMENTS THAT ARE ELECTION-RELATED

This January the ASGs approved the following amendments to the Constitution that will impact all

ASG LEADERSHIP ADVISORY BOARD

Your MBoD has established an ASG Leadership Advisory Board that will serve as a non-voting, proactive resource through the provision of advice and counsel regarding UOAA's activities. With this new Board in place it will ensure that UOAA's management body is in tune with the needs and interests of the ASGs. It is hoped that this action will also stimulate grass-root level interest in UOAA's management affairs.

The 4 ASG Leadership Award recipients will be invited to serve on the Advisor Board. In addition the MBoD will appoint 4 members. The terms of service will be 2 years. The 2007 Award recipients, Eileen Bohrer, Demi Cotrupe, Harvey Shatz and Mary Lou Thomas will make up the Board for 2008. The MBoD will appoint 4 more people, from nominations made by the ASGs, to serve commencing January 1, 2009. The Board will elect their own Chair. Contact Ken Aukett at kenaukett@uoaa.org for further details.

CWONurse ON CALL AT UOAA OFFICE

Joan McGorry advised the MBoD that telephone calls were coming in to the UOAA Office from people seeking personal ostomy management information on an increasing frequency basis. Joan, utilizing the WOCN Society Directory, has been referring these calls to an ostomy nurse in the caller's geographic area; however, on many occasions there is not a nearby nurse.

To resolve this problem UOAA has entered into an agreement with Rita Hillis, a retired RN, BSN, CWONurse who lives in Frankewing, Tennessee, who will serve as UOAA's CWONurse on Call. If Joan cannot identify a local ostomy nurse, then she will call Rita with contact information. Rita will communicate directly with the person seeking advice. UOAA views this action as a valuable service to the nation's ostomy community.

SUPPORTIVE MEDICAL PROFESSIONAL

Join fellow ostomates of the North Strand area to talk about the challenges of living with an ostomy & care of your ostomy. Discuss the latest products, services & education available. Meetings are held at the Seacoast Medical Center private dining room in Little River.

Meeting times: 2:00-4:00 pm

Visit us on the web:

<http://www.lorishealth.org/wellness.cfm#Support%20Groups>

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Keeping Your Pouch Odor Proof

by Victor Alterescu, RNET; via Quad City (IL) Newsletter and S. Brevard (FL) Newsletter

Rinsing a pouch out each time it is emptied is primarily a waste of time. For one thing, it takes longer to empty the pouch and you need more materials around you. You also leave more odor in the room since the pouch is kept open longer. The water, especially if it is warm, may open the pores of the pouch material and encourage odor permeation. Also, rinsing can affect the seal of your adhesive. Rinsing a pouch after each emptying serves only an aesthetic purpose; the interior of the pouch may be clean but it does not serve a functional purpose. Frankly, it does not matter whether the interior of your pouch is clean any more than it matters if the interior of your colon is clean. The pouch is replacing an organ of storage, the colon and/or rectum.

The most important portion of the pouch that should be cleansed very thoroughly is the tip of the drainable pouch.

Rinsing the interior can only increase permeation but cleaning the exterior neck will avoid any odor that may be present as a result of having fecal residue on the end of the pouch. Therefore, I often recommend that a person carry an alcohol wipe (individually wrapped in foil) to clean the tip of the pouch. The pouch is emptied, the toilet flushed immediately, and the lower portion of the exterior pouch cleansed with toilet tissue and alcohol.

International Ostomy Association

www.ostomyinternational.org

The IOA Today Newsletter available. If you would like to keep up with Ostomy related information from around the world, then please sign up for the FREE IOA Today Newsletter.

<http://www.ostomyinternational.org/Today.htm>

You may also view past issue from the above URL.