



The Marsupial

DECEMBER 2022

harleston • Mattoon • Effingham Area Ostomy Chapter

Meetings

Meetings of our Ostomy Chapter are held the second Thursday of the following months:

- April - HSHS St. Anthony's Hospital Auditorium, Effingham (go in main entrance and go to the right)
- July - Effingham - location to be determined
- September - Lumpkin Family Center for Health Education, Sarah Bush Lincoln Health Center
- December - Airport Steakhouse - in the meeting room, Mattoon, IL

Special Invitation

A special invitation is being extended to all persons who have a colostomy, ileostomy or a urinary diversion (ileo bladder or ileo conduit) and all other interested persons who desire to participate in the organization. Our objectives are to help in the physical, emotional, and social rehabilitation of ostomy patients through mutual aid, information, and understanding.

For transportation, additional information, or being added to the mailing list, please call Debbie Murray, RN CWOCN Sarah Bush Lincoln Health Center **(217) 238-4850**.

Individual Support

Upon request by a doctor or nurse, a visitor who has had special training will be sent to visit an ostomy patient. The visitor will be chosen according to the patient, age, sex, and occupation. There is no charge for this service; and we do not give medical advice.

Please consult your own doctor or ostomy nurse for the medical advice that is best for you.

Chairperson

Paula Miller
1902 N. US Hwy 45
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(618) 686-7975

Linda Will
511 N. Main St.
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Medical Advisors

Linda Will, RN
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Jenna Vogel, MSN/APRN, CWOCN
(217) 238-4804

Amber Mooney, BSN, RN, CWOCN
(217) 994-3385



December Meeting

Please join us for the Christmas Party!!

5 pm • December 8

The Airport Steakhouse

Meeting Room

410 Airport Rd, Mattoon, IL 61938

Please feel free to bring a homemade or small \$5 gift for an exchange! There will be pie provided by the Sarah Bush Lincoln Advanced Wound Center.

In case of inclement weather:

If you think the meeting is possibly cancelled due to bad weather, you can call **(217) 238-2211**, cancellation information will be left on voicemail.



Oval Ostomy Solutions

The Phoenix Magazine - Winter 2021

Well, guess what? The world isn't really round after all. If you are feeling a bit left out because, instead of a nice little round rosebud stoma that you heard about (or used to have), you've got an oval one, I have good news. That is not going to be a road block to keeping a good seal for your ostomy. It's not at all unusual to have an oval stoma, even though most of the ostomy pouching systems and accessories look like they are for round stomas. All it requires is a bit of knowhow and you'll be good to go!

Causes

For a variety of reasons, a person may have a stoma that is oval, rather than round. If it is a colostomy, it may have been formed in a 'double-barrel' fashion. This is sometimes done for temporary ostomies because it is easier to sew up and put back into the abdomen later. Another reason is because the surgery is relatively quick compared to an 'end' stoma. Perhaps the person was very ill and it was best to cut down the time on the operating table.

'End' stomas are formed when the bowel is cut completely and the healthy end is brought out to the skin level and 'cuffed' and sewn to the skin. These are often round stomas, but if there is tension at each end the stoma may stretch to become oval. One reason an 'end' stoma may become oval later is when the abdomen stretches or weight is gained. This can happen in pregnancy in the later months causing the stoma to become oval. It will likely decrease in size and change shape again after the baby is delivered. Another reason is when bowel protrudes into a hernia. This can cause the stoma to stretch and change shape.

Protecting the Skin

One thing to keep in mind when trying to problem-solve for your ostomy challenges is that simple is always better. You want to spend the least amount of time and effort for each pouching system change that gives you a reliable wear time and keeps your skin healthy near the stoma. Also consider shortening your wear time when trying something new. Try it for a couple days, then change it. If your skin looks good, lengthen it out to your regular wear time.

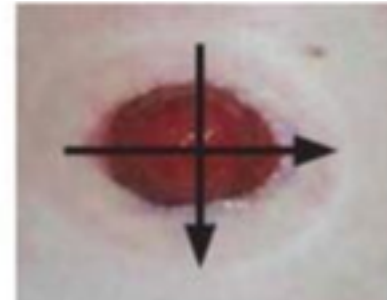
There are two approaches to keeping skin healthy when pouching an oval stoma. The first involves using a pre-cut barrier. You can buy a pre-cut barrier that has a hole that is as large as the longest measurement of the oval stoma and use a barrier ring or strip around the stoma to protect the exposed skin. You can even coat the barrier ring or strip after it is applied with a skin prep wipe or spray, in order to help it last longer. This approach may not be successful if your stoma output is urine or very liquid. However, it is fine to try this approach if you prefer it.

The other way to use a pre-cut barrier is to buy one with a hole the size of the smallest dimension of your stoma and then cut it to fit the longer dimension. Remember that you want to leave at least a half inch of wafer material extending past all edges of the stoma. If your stoma is much longer than it is wide, this approach may not be the best option for you.

Measure down (vertical)



Measure across (horizontal)



1 1/4"

7/8"

Custom Approach

The second approach involves using a cut-to-fit or moldable barrier opening. Many ostomy pouching systems are available where the ostomate cuts the hole the size and shape needed for their stoma. Most boxes of cut-to-fit pouching systems come with a measuring guide, but

these are for round stomas. However, it is very easy to make a template for your unique stoma. Start by measuring the length and width of the stoma. Mark these measurements on a piece of paper and connect them to make an oval. Cut this out and see how close you are.

Continued on next page

Once you have it the right size, use that to draw on a piece of clear plastic (like the backing of many ostomy pouching system) and cut that shape. Now, you have a washable template. Remember to measure every week in the first couple months after surgery, and monthly after that, to see if your stoma has changed size. If the stoma still fits just inside the template, then you are good to go. If you are using a cut-to-fit type barrier, just use the template to draw the oval on the barrier and cut it out. Be sure there is at least half an inch of barrier material extending past all the sides of your stoma.

Also available is moldable barrier. This is a wafer that has a soft material at the inner aspect of the barrier. There will be a starter hole and then you can roll the soft material from that inner edge to be the right dimensions and shape for your stoma. Oval is just fine! All the skin will still be protected when this type is used. There are moldable barriers available in drainable and closed-end one-piece pouching systems as well as two-piece pouching systems. You can get it in either an adhesive coupling (the pouch sticks to the wafer or in a click-on coupling. In the adhesive coupling style, the moldable style comes in a flat wafer or a convex wafer for those who have a recessed

stoma. The convex option has a built in bump that fits down into a recessed area of the belly right around the stoma. This helps with a better seal because output is less likely to sneak under the edges of the wafer.

Solutions for the Taking

For pretty much every problem imaginable with a stoma, there are solutions because lots of other people have had that issue. For an oval shaped stoma, these two simple approaches nearly always keep the peristomal skin healthy and give you a reasonable wear time. However, wear time varies and must be determined for each individual.

If you try these solutions and notice red or irritated skin near your stoma, please call the help number on the box of you supplies or contact a nurse that is certified in ostomy care. There are excellent ideas on the Internet also, but remember what works great for one person may not work for you. If trial and error do not solve the issue, please reach out for assistance. It really is important to keep the skin near your stoma healthy, so it's worth working for the answer if it doesn't come easily at first.

Flu Facts

What is the flu?

Influenza or 'flu' is a highly contagious respiratory virus infection of the nose, throat, and lungs that usually occurs in the late fall, winter, and early spring.

How long is the flu contagious?

Typically you are contagious 1 day before symptoms then 5-7 days after you get sick.

What are two ways to decrease the spread of influenza?

Washing your hands and getting the flu shot!

Who can get the flu shot?

Everyone over 6 months of age should get the flu shot unless instructed otherwise by your healthcare provider.



A Visit from St. Ostomy

By Marjorie Kaufman, Los Angeles (CA) Los Ostomy News

'Twas the night before Christmas and all through the flat,
There was 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 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 pecked 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 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 suspect, 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 more 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.



Common Ostomy Problems & Possible Solutions

UOAA STL. Winter 2018 • Excerpt from an article in the Huntsville, Alabama “Re-Route”

Food Blockages

Symptoms may include no output from the stoma for more than 4 hours, cramping in the abdomen, nausea or vomiting and high watery output.

Solution: Drink hot tea and increase your fluid input. Take a warm bath or shower and massage your abdomen. Have a glass of wine. This will help relax your abdominal muscles. Get down on all fours with your backside in the air. An undignified position, but it does help some people move a blockage. If the blockage persists for more than a few hours, seek medical advice from your nearest hospital.

Mucous and bleeding from the rectum

Solution: This is completely normal if your rectum is still intact, although annoying, since the mucosal lining of the rectum is still working. Try wearing a sanitary napkin to save soiling your underwear. If the bleeding is profuse, see your doctor.

Odor

Solution: Simple solutions that work for some ostomates are to place mint tic tacs or mint mouthwash into your bag. Deodorants, either taken orally or placed in your bag, are available from your ostomy supplier. DO NOT place aspirin in your bag in an attempt to eliminate odor—doing so can cause damage to your stoma.

Bleeding

Solution: First, determine if the bleeding is coming from the surface of the stoma or from internally. If it is internally, then it's wise to seek medical advice. If the bleeding is from the surface of the stoma, it should stop quite quickly. Stomas are made from the same type of skin as the inside of your cheeks and you know how easily they bleed. Even the slightest little nick can cause it to bleed. If bleeding is profuse or doesn't stop quickly, seek medical help. Cuts to the stoma can also be caused by the wafer riding off center. Try “picture framing” the wafer with some tape to stop it from moving.

Phantom rectal pain

ie: you get the urge to go to the toilet-the old way- even though you know you can't

Solution: This pain is because your body needs time to adjust to its new plumbing and still thinks it needs to go to the toilet in the old way. Try going and sitting on the toilet anyway, even though you know it's pointless. A lot of people find this alleviates the pain. The good news is that over time, phantom rectal pains become less frequent and eventually disappear altogether.

Stoma is placed on or above the beltline

Solution: This is more common in men than women for some reason. DO NOT let them site your stoma on or above the belt line if at all possible. Belts will stop the stool from flowing into the pouch so try wearing trousers a size bigger than you would normally wear and wear braces or suspenders to keep them up rather than a belt.

Stoma shows through a tight dress

Solution: Try wearing bike pants or similar lycra pants under your outfit that will smooth out the line of the bag. Empty frequently.



Ask your Ostomy nurse!!

Do you have questions? If you have a question, you are not alone!

Email me at jvogel@sblhs.org or send your question to:

Jenna Vogel
Sarah Bush Lincoln
1000 Health Center Dr.
Mattoon, IL 61938

The questions will be anonymous but answered in the next newsletter!

Frequently Asked Questions

How Should I Bathe With a Colostomy

You may shower or bathe with the colostomy pouch on or off. But keep in mind that your body may keep eliminating waste during that time.

Will Weight Gain or Loss Affect My Colostomy Pouch?

Yes, if it's more than 10-15 pounds. It could change the fit of your colostomy pouch or alter the wearing time of the pouching system.

Tell your surgeon or enterostomal therapy (ET) nurse if weight changes start to become a problem.

When Should I Call the ET Nurse?

It's a good idea to check in if you have:

- Leakage problems
- Skin irritation in the area of your pouch
- Trouble finding places to buy your supplies
- Problems finding a support group
- Questions about becoming pregnant
- Relationship problems due to the colostomy
- Any other questions or concerns about your colostomy



C-M-E Ostomy Chapter

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