



The Roadrunner



Newsletter of the
Ostomy Association of Albuquerque, NM

Next Meeting

Sunday, November 6, 2016

1 PM

Executive Board Meeting, Aspen Room (Open to All)

2 PM

Support Group Meeting, Aspen Room

Support Group Updates and Events

Attendees to our August meeting enjoyed an informative talk by our new Coloplast product representative, Duriel McDonnell.

Coming:

- ♦ **November 6th**, regular support group meeting following the executive meeting. We will view more of the videos by ostomates relating their stories as time allows.
- ♦ **December 4th**, B Braun ostomy products by representative, Scott
- ♦ **Templet**. Come see some new and innovative products! To preview products see website: bbraunusa.com
- ♦ **January 8th**, our Fiesta Luncheon!! Details to come as arrangements solidify. Updates on this will occur at meetings and by your regular method of email or postal mail. No regular meeting in January.

Members, thank you for your support of our meetings. Your dedication to others is so commendable, often even on holiday weekends. You are all appreciated very much!! Three major holidays before our next newsletter in February; Thanksgiving, Christmas, and New Years. Enjoy!

Volume 50 Issue 4

November 2016

Upcoming Meetings:

- **November 6, 2016** (quarterly)
- **December 4, 2016**
- **January 8, 2017 Fiesta Luncheon** (details later)
- **February 5, 2017** (quarterly)

Meetings are at 2 PM

in Aspen room

at Kaseman Hospital

unless otherwise stated.

Inside this issue:

"President's Message"	2
"Dehydration/"	3
"OAA Lending Library"	4
"Ostomies vs Teeth"	5
"Flush Stoma"	6
Resources	7
Membership Forms	8
All About OAA	9
Contact Us	10



PRESIDENT'S COMMENTS

By Brian Leen, President OAA, NM



Hi. If you are reading this for the first time, in a hospital, doctor's office or on-line., "Welcome." You are the reason we exist. Please come join us at one of our monthly meetings. And that is

true whether your Ostomy is temporary or permanent, since in many cases this is an unknown. If you are an existing member, new or old but one who has not come to a meeting in a while, come on by. You are the key to making our support group work. You just might have the answer to a newbies question. Honestly, I realize there is a time when an Ostomy just becomes part of life and recedes into the background like perhaps a limp, bad vision or lack of hearing. It just becomes something you live with. You change batteries on your hearing aide and you change your bag. But we are a fraternity that shares something no one else has and probably cannot understand (our spouses excepted since they shared this all with us). It is good to have a list and people we can call on. The other day we got a call from a new Ostomate in Valencia County who needed someone to talk to. Luckily I was able to call one of our members with a similar Ostomy who also lived down there and he agreed to call this person. So please, keep in touch and stop by our meetings when ever you can or feel like it.

REMEMBERING

by Sue Mueller

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Mark Stan- Passed August 12, 2016, age 59. Mark always had a smile on his face- a genuine smile, a life was good smile. The first meeting he came to he jumped right in to assist with a computer problem the presenter was having. He was an avid bicyclist and was eager to resume this activity after his surgery. He attended meetings to learn how to live with an Ostomy, he contributed, and then went on to do just thatlive his life. He knew his time might be limited as he was diagnosed with advanced stage cancer. He resumed his bicycling, he traveled, he enjoyed his family.

Peter Weddige -Passed 10/10/16, Memorial Service November 5, 2016 at 2pm French Mortuary at Wyoming. Peter wanted to learn all he could about managing his colostomy, he did learn and was always willing to share his knowledge. He and his wife attended the support group meetings and Fiesta celebrations and Peter brought his business acumen to the executive board meetings. Peter was a kind man and will be missed.



Dehydration and the Ileostomy

By Terry Gallagher, UK (Edited & Excerpted): UOAA Update

March 2015, from Ostomy Association of the Houston Area October 2015

In someone with a working colon, the colon is responsible for absorbing most of the water we drink and that is contained in our food. In addition, electrolytes such as sodium and potassium, essential to maintaining good health, are absorbed there. Removal or disconnection of the colon immediately causes the first problem because of the removal of the ileo-valve. This valve is between the ileum (or small intestine) and the colon where the appendix is attached. Its purpose is to hold back the food in the ileum to enable it to be absorbed better.

As an ileostomate, when we lost this valve, food and water pass through our digestive system faster, so less is absorbed, often accounting for weight loss when a person first recovers from the surgery. The ileum does absorb more water to compensate, but still absorbs much less than the colon did. Waste from the ileum normally has about 30% of the water remaining, while waste from a colon has about 10% remaining - quite a difference. In addition, the ileostomate loses ten times as much sodium and potassium as someone with a colon. Because of all this, anything which upsets the balance in our bodies has a much faster effect, as well as happening much quicker than in a person with a working colon. A typical example is gastroenteritis. A person with a working colon with the same degree of infection may be sick and have diarrhea for a couple of days, whereas someone with an ileostomy may well end up in the hospital as an emergency. This may apply to other problems which upset the digestive system's balance as well as gastroenteritis. When these occur, a person with a working colon experiences nausea, vomiting, fever, abdominal cramps, sometimes bloody diarrhea and signs of dehydration (including the veins on the back of the hands and elsewhere becoming visible). Those of you with an ileostomy may

fill up very rapidly with fluid. On emptying, the pouch can refill in minutes. You may feel nauseous and develop abdominal discomfort. You may rapidly begin to experience the symptoms of dehydration, with dry mouth, decreased or virtually non-existent urine output, heart irregularities and dry skin. In many cases, you can see urine out has ceased. This is a medical emergency! If hospitalized for dehydration, the ileostomate may expect IV solutions to be given. The fluid given will be saline, potassium, or potassium and glucose to replace those essential electrolytes lost as mentioned earlier. Expect an EKG (to check for heart problems), bloods to be taken and stool and urine samples (to check for infection), and abdominal x-rays. Dehydration can also lead to kidney damage, which may be permanent, requiring lifelong dialysis or a transplant.

If you become ill with diarrhea, vomiting and fever that persist and you find yourself with a pouch which is filling and refilling with fluid and start to develop a dry mouth with abdominal pains, seek emergency treatment immediately. Normal people may sneer that we're making a lot of fuss for a simple "tummy ache", but we're not! It can be much more serious for us than for people with a working colon.





OAA Lending Library

by Sue Mueller, BSN, CWOCN

The Ostomy Association of Albuquerque has a collection of books and magazines for people to borrow. I think the collection could be grouped into three categories: medical information books, living with an ostomy books, and humor.

Medical Information Books: Crohn's Disease and Ulcerative Colitis, Positive Options for Crohn's Disease, 100 Questions and Answers about Bladder Cancer, The Guide to Living With Bladder Cancer, and The Complete Guide to Colorectal Cancer. These books are chock full of information presented in very accessible manner.

Living with an Ostomy Books:

Alive and Kicking and Great Comebacks by Rolf Benirschke. You may be aware that Rolf Benirschke is a famous football player and became ill with ulcerative colitis when he was a kicker for the San Diego Chargers. Alive and Kicking is his story, Great Comebacks is a compilation of the stories of people with ostomies who are representatives of the Convatec sponsored Great Comebacks Program. I found these stories interesting, heart warming and inspirational. I think you will too.

Yes We Can! Advice on Traveling with an Ostomy and Tips for Everyday Living- Another great gathering of stories! I just love reading about all the different ways people cope with living with an ostomy, the little tricks that worked for them, some of the challenges they faced..

Don't Die of Embarrassment You will probably recognize Barbara Barrie from her picture on the cover. She is an actress who had

colon cancer and has a colostomy and this is her story. She tells a good story with a wonderful sense of humor! This is a great read.

Ileostomy- Practical Knowledge For You and Your Doctor I haven't read this one but it is a quick read, and again a story to share.

Brenda Elsagher books: If the Battle is Over Why Am I Still In Uniform?, I'd Like to Buy a Bowel Please!, Bedpan Banter, Its In the Bag and Under the Covers, Your Glasses Are On Top Of Your Head. Brenda owned a hair salon prior to having cancer and becoming a colostomate. Along the way in her new post surgical life she became a standup comedienne and author. These books include Brenda's story, stories about living with an ostomy, sex and dating and care giving post ostomy and stories about the humor in being human Brenda is a wonderful humorist and you WILL be laughing. Also check out her website www.livingandlaughing.com.

Living Well With An Ostomy This is a well researched book about living with an ostomy and offers another viewpoint and more tips.

If you haven't subscribed to the Phoenix magazine yet you can borrow some issues to check them out. The Phoenix is the publication of the United Ostomy Associations of America. It is a combination of ostomate stories, medical information and all the newest and latest in ostomy products.

Seriously consider checking out these resources.



Ostomies versus False Teeth

from Spacecoast Shuttle Blast, FL; via Seattle (WA) The Ostomist

How often have members of ostomy groups said that having an ostomy is no worse than wearing false teeth? Non-ostomates often laugh at this and can't believe that we are being honest.

False teeth? Everyone dreads the day that teeth must go and an expensive set of "false choppers" replaces them. But think of false teeth as the equivalent to that "awful surgery?" Never!

Well, before folks feel so sorry for us ostomates, let's look at the similarities. Everyone would prefer to keep his own teeth—or his own colon or bladder. Wearers of false teeth try to pretend their teeth are real—many ostomates hide their surgery. A big problem is keeping false teeth in place—same way with ostomy appliances. No one wants the "click" of teeth to be heard—ostomies may gurgle audibly.

After a few months, false teeth are supposed to feel like a natural part of you—also true of your ostomy appliance. As one grows and changes, a set of false teeth may have to be changed—and appliances may have to be changed due to weight gain/loss or stoma retraction.

False teeth are expensive—but so is ostomy

surgery. False teeth must be worn all the time—ostomates wear appliances, or at least tiny pads, all the time. Many products are sold to keep false teeth clean and odor-free—the same is true for ostomy equipment. Let's say that false teeth are a necessary evil, a little nuisance in the mouth—at the opposite end of the tract may be the nui-



sance of a stoma needing an ostomy appliance or pad.

So the next time a distressed family member says a relative will "have his life ruined" by having an ostomy, ask whether someone who has all his teeth suddenly knocked out has a ruined life. If we could think of ostomies with the same calm humor with which we view false teeth, wouldn't everybody see them for what they really are? Not really worse than false teeth.



Four Steps for Dealing with a Flush Stoma

By Wendy Lueder, “Broward Beacon”, reprinted from The Ostomist, GSOA

One of the more difficult challenges an ostomate may face is dealing with a stoma that either protrudes just a little bit or not at all. Some are even what I like to call “below the water line” or lie below skin level. After some unsuccessful surgery I have been dealing with this condition for a few years. When your stoma is flush the output has difficulty being directed into your pouch, thus, leaks occur and pouch changes are more frequent and annoying.

For ileostomates or colostomates with a liquid output, changing your skin barrier wafer immediately when experiencing leakage is not an option to be delayed, as the output contains digestive enzymes and bile salts which damage and irritate your skin. If you have a flush stoma, here are four suggestions that might help make your life easier.

First try using a skin barrier wafer that has built-in convexity. This means that the wafer doesn't lay flat on your skin but has a gentle curve toward your body that pushes the skin around your stoma down and away. But for some, this solution is insufficient to take care of the problem, and greater convexity is needed.

Secondly, you might try the ostomy products on the market that are in the shape of flexible washers called Barrier Rings. You may know of them as Eakin Cohesive Seals (distributed in North America by Conva-Tec), or Adapt Barrier Rings by Hollister. There are also other generics on the market. Be careful. Quality does differ among these rings. If places around the skin of your stoma underneath convexity thus helping to push the skin down around your stoma even farther. Remember, no other skin creams, preparations of any kind or stoma pastes should be used along with the barrier rings, as this will adversely affect the adhesion of the seal. Also make sure your skin is clean and dry before applying and use a soap with no oils or creams. I use a hair dryer set on very low to make sure my skin is dry in humid South Florida.

Third hint is that you actually might need to use an ostomy appliance belt (not a hernia belt). Conva-Tec makes a white one and Hollister a flesh tone one. Both can be used interchangeably and snaps onto the sides of your pouch. I put very little pressure on with the belt, forcing my skin barrier closer to my body and thus pushing my stoma up. DO NOT use a belt without first consulting your

ostomy nurse or doctor as some conditions such as a hernia make wearing one a prohibited option.

As all three of these options used together still don't completely solve my problem I've had to go to DEFCON level 4. I have to lose weight. Some extra pounds I really don't need have given my tummy a little pooch which makes my convexity options less effective. As I've been losing weight, my tummy's gotten flatter and the convexity options one through three are more effective. When out to dinner with my husband “honey”, I hate this option as desserts are always calling to me off the menu. But a functional ostomy pouching system just happens to be more important.





Medical and Support Group Resources

New Mexico Ostomy Support Groups:

Albuquerque: Ostomy Association of Albuquerque meets monthly in Albuquerque, NM. For current info call voicemail: (505) 830-2135 Email: oa.albuquerque@gmail.com

Albuquerque: VA Ostomy Support Group for military veterans. Meets at the VA Hospital, Albuquerque, NM. For current info call ostomy nurse at VA Medical Hospital voicemail: (505) 265-1711, Ext. 5171

Las Cruces: Ostomy Support Group of Southern NM. Meets in Las Cruces, NM. For current info call ostomy nurse at Memorial Medical Center voicemail: (575) 640-5242 or (575) 521-5038

Other Hospital Contacts in Albuquerque, NM

(not having a support group):

Lovelace Medical Center Ostomy Nurses:

(505) 727-8250

Presbyterian Main Hospital Ostomy Nurses:

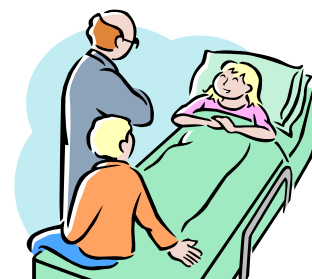
(505) 841-1251

Presbyterian Outpatient Wound Care Clinic:

(505) 823-8870

University Medical Center Hospital Ostomy Nurses:

(505) 272 9098



Manufacturer Resources

Coloplast Ostomy Supply Manufacturer:

Local Representative: Duriel McDonnell

1 (480) 220-9921 usdmed@coloplast.com

Coloplast Care Program

1-(877) 858-2656

ConvaTec Ostomy Supply Manufacturer:

Local Representative: Christin Hungerford

1 (720) 412 8203 christen.hungerford@convatec.com

CYMED Ostomy Supply Manufacturer: (Microskin products) Local Representative: none

www.cymedostomy.com 1 (800) 582 0707

For samples: samples@cymedostomy.com

EDGE PARK Medical Supplies:

www.edgepark.com 1-888-394- 5375

Hollister Ostomy Supply Manufacturer:

Local Representative: Randall Boord

1 (405) 819- 5635

Cust. Svc: Richard Wysocki 1 (888) 808 7456

Marlen Ostomy Supply Manufacturer: www.marlenmfg.com

1 (216) 292 7060

Nu-Hope Ostomy Supply Manufacturer:

1 (800) 899 5017 www.nu-hope.com

Stomacur Ostomy Supply Manufacturer: www.forlife.info

TORBOT Ostomy Supply Manufacturer: 1 (800) 545 4254
www.torbot.com



Join Our Albuquerque Ostomy Support Group

OSTOMY ASSOCIATION OF ALBUQUERQUE MEMBER APPLICATION

The Ostomy Association of Albuquerque (OAA) is a member of the national American Ostomy Association. This allows us to have access to all the latest ostomy information available for our use. The OAA annual membership fee is \$20.00 and can be paid by check or cash. If being paid by check, make the check payable to Ostomy Assn. Of Albuquerque. Your payment can be mailed to OAA, PO Box 35598, Albuquerque, NM 87176-35598 or at any monthly meeting. If you are financially unable to pay this fee, please call 505-275-2470 and leave a message with your name and telephone number and someone will contact you. Please complete the form below as best as you can and all information will be used for our records and be kept confidential.

NAME: _____ DATE OF BIRTH: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____ PHONE NUMBER: _____

OCCUPATION (If retired, enter former occupation): _____

HOBBIES: _____

CHECK ALL THAT APPLY:

☐ Colostomy ☐ Ileostomy ☐ Urinary Diversion ☐ Continent Ileostomy ☐ Continent Urostomy ☐ Pull-Through
☐ Parent with Child Procedure ☐ Spouse/Family Member ☐ Physician ☐ Nurse ☐ Other _____

Year of Surgery: _____ Reason for Surgery: ☐ Crohn's ☐ Ulcerative Colitis ☐ Cancer ☐ Birth Defects

I have enclosed an additional \$ _____ as a donation to support the ongoing work of the OAA

**Join United
Ostomy
Association
of America**

Save the Date

The next UOAA
National Conference
will be held at the
Hotel Irvine, Irvine,
California
Aug. 22-26, 2017

UOAA's Mission

UOAA is an association of affiliated, non-profit, support groups who are committed to the improvement of the quality of life of people who have, or will have, an intestinal or urinary diversion.

- It is dedicated to the provision of information, advocacy and service to, and for, its affiliated support groups, their members and the intestinal/urinary diversion community at large.
- It is organized to grow and develop while remaining independent and financially viable.

Membership in UOAA is open to any non-profit ostomy support group that meets UOAA's affiliation requirements. UOAA has an IRS Group 501(c)(3) charity status that its affiliated support groups can use.

1-800-826-0826

Website: www.ostomy.org

Get Ostomy Answers!

The Phoenix is the leading national magazine for ostomates, their families and caregivers. Subscriptions directly fund the nonprofit United Ostomy Assoc. of America – the only national organization providing vital information, resources, support and advocacy for ostomates.

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505-856-0203

Vice President: Richard Copeland

505-856-6045

Treasurer: Barbara Regan

703-261-3920

Secretary: Patricia "PJ" Dwyer

973-783-1843

Voicemail and Visitation Coordinator:

Diana Wong: 505- 877-4223

Telephone Reminder:

Gerry Copeland: 505-856-6045

Ostomy Supply Closet:

(donations & supplies)

Eunice Hoeft

Call ahead; 505-889-9705

5012 San Pedro Ct. NE

Albuquerque, NM 87109

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505-797-4388

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About Us

Ostomy Association of Albuquerque (OAA) is organized to support people with ostomies and their caregivers in the New Mexico region. OAA publishes *The Roadrunner* newsletter quarterly to inform and update its members.

Membership is \$20.00 a year and includes the Roadrunner newsletter and monthly informative meetings. This money is used for promotional purposes and expenses of the OAA. Although chapter membership is encouraged, anyone with financial hardship, should see the Treasurer or President for help in this matter. No one is denied based on ability to pay.

Meetings are monthly at 2:00 PM in the Aspen Conference Room at Presbyterian Kaseman Hospital. Meetings are usually held on the first Sunday of every month. Since there are occasional changes due to holidays, please

refer to *The Roadrunner* for information or call the association's voice-mail.

Executive Board Meetings are held at 1 PM prior to the Quarterly meetings (Feb, May, Aug, and Nov.) in the Aspen Room. Everyone is welcome to attend and participate.

Directions: Address: Kaseman Hospital, 8300 Constitution Pl., NE; Albuquerque, NM. Kaseman Hospital is one block North of I-40 and Wyoming Blvd. Then it is about one block West of Wyoming on Constitution. Drive to West end of parking lot and enter the Emergency Room entrance. Take an immediate left, go through double doors and find Aspen room on the right side.

Affiliation: Ostomy Association of Albuquerque (OAA) functions as a chapter affiliate of the national organization supporting people with

ostomies-- the United Ostomy Association of America (UOAA).

The UOAA holds biennial national conferences. They publish the wonderfully informative *Phoenix* magazine four times a year. There is a subscription cost for this publication. They have a great website with all kinds of information available for free. Much of it is available in any language on earth!

Contact Information:

United Ostomy Association of America
P.O. Box 525

Kennebunk, ME 04043-0525

1-800-826-0826

Web: www.ostomy.org

Find them on Facebook and Twitter.

Postmaster: Contains Dated Material.
Please do not delay.

P.O. Box 35598
Albuquerque, NM 87176

Ostomy Association of Albuquerque



Helping each other to live well and do the things we love!

How to Keep in Touch with Us

Contact us: For info please call voicemail 505-830-2135 or Email us at oa.albuquerque@gmail.com

Unsubscribe or Change to Mailing Address or Email: For any of these changes, please notify the sender by return Email. If your change concerns mailed copies, please call person in charge of mailing or send back cover page with your address and changes requested to return address. Thank You.

Supplies: If you have new and unused supplies you no longer need, please bring them to a support group meeting to be given to those who need them.

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Disclaimers: Check with your doctor before taking any medication or before heeding any advice given in this newsletter. The Ostomy Association of Albuquerque does not endorse any product or medication and takes no responsibility for any product, medication or advice.

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