



# The Austi-Mate Journal

Ostomy Association of Austin Monthly Publication  
P. O. Box 143383 Austin, Texas 78714

[www.austinostomy.org](http://www.austinostomy.org)

Gethsemane Lutheran Church  
200 West Anderson Lane, Austin, Texas 78752

**Next Virtual Zoom Meeting ~ Thursday, March 3rd @ 7:00 pm.**

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This Bi-monthly newsletter is available online at

[www.austinostomy.org](http://www.austinostomy.org)

The Ostomy Association of Austin is a volunteer based Non-Profit Health Support group dedicated to providing mutual aid and education, information and advocacy for persons and their families who have had or will have ostomy surgery. It is our vision to educate, empower and inspire through information and mutual support in all phases of life.

Spring is in the air...and we're all ready for milder temperatures, longer days and the colors of flowers that begin to bloom.



The Ostomy Association of Austin held a February virtual Zoom meeting on one of the coldest nights of the year. Austin was under a winter weather advisory with ice, sleet, snow, windchills and single digit temperatures.

While our meeting was smaller...as expected given the weather conditions, we had good conversations, questions & answers, and plenty of support for some new people joining us for the first time.

Once the Covid threat is gone, we will return to in-person meetings coupled with the Zoom virtual component (hybrid) in hopes to meet everyone's needs, especially those who live far from Austin.

We will continue our virtual meetings until the Gethsemane Church gives us the 'go ahead' to return.

**Our next virtual Zoom meeting is Thursday, March 3rd @ 7:00 pm.**

**See page 6 for the Zoom link.**



I Live Here  
I Give Here

## Amplify Austin

### Annual 24 hr Fundraiser (link)

Wednesday, March 2, 2022 @ 6pm to  
Thursday, March 3, 2022 @ 6 pm.

Please consider making a **donation to the Ostomy Association of Austin** on or after this one-day event.

# The Ins & Outs of Continent Diversions for the Bladder: What You Need to Know

By Joanna Burgess-Stocks BSN, RN, CWOCN & Anita Prinz RN, MSN, CWOCN



## Why does one have their bladder removed?

The most common reason for removal of the bladder (radical cystectomy) is due to bladder cancer. Less common reasons are due to gynecological cancers of the vagina and uterus and rectal cancers. These cancers may invade the bladder. Indications for bladder removal not related to cancer include bladder dysfunction due to a neurological impairment, radiation cystitis, interstitial cystitis or some kind of trauma that has occurred. Whatever the reason for bladder removal, it takes consultation with a surgeon to determine the most effective bladder diversion and one that will result in the best quality of life. This article focuses on continent urinary diversion types.

## To pouch or not to pouch?

Patients facing radical cystectomy may be presented with several surgical options; urostomy (ileal conduit), a continent pouch, or orthotopic neobladder. Many candidates naturally want an option that does not require wearing an ostomy pouch. However, continent diversion surgery needs to be thoughtfully and seriously considered as these surgeries are extensive and have possible complications including incontinence.

## Continent Urinary Diversion Types:

With a continent urinary diversion one has **control** over when the bladder is emptied versus a [urostomy](#) (ileal conduit) where one does not have control and urine output must be contained in a pouching system. Individuals with continent diversions will either catheterize a continent pouch several times a day or they will learn to urinate through the urethra. These surgeries are typically done at large teaching hospitals which for many, may be located quite a distance from where they live. This should be considered, as regular post-operative visits are necessary.

**The continent pouch** is a surgical procedure in which a “reservoir” is created by opening up loops of bowel (small or large intestines) and sewing them back together to create an internal pouch or pseudo-bladder. This is now where urine is stored in the body. The urine is drained on a regular basis through a stoma (intestinal channel) located on the abdomen and connected to the reservoir. The stoma is continent (does not leak urine) because it is created with a valve already located in the body (the ileocecal valve) or a valve is created surgically. The valve is placed between the internal reservoir and the stoma. The valve stops urine from exiting the body until a catheter is inserted.

These diversions do not require the use of an ostomy pouch but are managed with a stoma cover (foam dressing) or a piece of gauze for protection. Emptying the bladder is done by inserting a catheter into the stoma. Manual dexterity is a must for learning this technique. Catheters, water-soluble lubricant, and stoma covers will be your needed supplies. Catheters can be cleaned and reused. Over the first year of surgery the capacity of the continent pouch will increase from 300 to 500 mls. Thus, the time between each catheterization will increase until a frequency of every 4-6 hours is achieved.

**The Indiana, Modified Kock Pouch, Mitranoff, Miami and Mainz** are types of surgical procedures to create a continent pouch. The choice of which one to use is based on the surgeon’s assessment of which one will be most appropriate for the individual. Want to know what it’s like having an Indiana Pouch? Watch this YouTube [video](#).

## Specific Considerations in choosing a continent pouch:

- Frequent self-catheterization
- Occasional irrigation to cleanse the pouch of mucus
- Sufficient manual dexterity
- Acceptance of the appearance of a stoma
- Evaluation and preoperative stoma site marking by a WOC nurse is important in preparing for this surgery.

**The orthotopic neobladder**, a bladder substitute, is created from the small intestines much like the continent pouch. With this technique, a reservoir or pouch is created to hold urine which is then connected to the urethra to allow urination in the usual manner. The individual will sit to urinate and must learn to relax the urethral sphincter and bear down and/or press on their belly to empty all the urine.

It is recommended that neobladder candidates should have their pelvic floor muscles' (PFM) strength, tone, and endurance evaluated prior to surgery. Learning how to do pelvic muscle exercises before surgery is helpful and will need to be continued after the catheter has been removed following surgery. Achieving continence will take consistent daily practice with timed toileting and strengthening the pelvic floor muscles.

People who undergo surgery for a neobladder must be aware of the potential for both daytime and nighttime incontinence and urinary retention. However, this will improve but it may take up to one year. Current studies show vast ranges in complete continence after one year from 22-63%<sup>1</sup>. Patients need to be educated regarding regular toileting and use of continence aids to manage this potential problem. Another consideration is that individuals will need to learn self-catheterization as periodic irrigation with a catheter will be required to remove mucous that can build up in the bladder and may be needed to help with urinary retention. When considering surgery for a neobladder, one must be open and honest with both self and the surgeon concerning your feelings of caring for a neobladder and the potential problems of incontinence and urinary retention.

Additional neobladder facts are [here](#).

### **Specific Considerations when choosing a neobladder:**

- Must be able to adjust to scheduled voiding every 2-3 hours
- Must be able to perform self-catheterization as needed to drain urine or mucous.

### **Special Considerations with Continent Diversions**

A continent diversion does not have muscles to expand or contract like a natural bladder, nor does it have nerve endings to alert you when it is full. These changes require the individual bear down and press on their belly to aid in emptying it and/or insert a catheter into the stoma or the urethra. Individuals must become very in-tune with their bodies as to when it is time to empty. In the beginning, most individuals must rely on alarms to remind them to empty their new bladder. After a period of time, many state that they get a "sense" that they need to empty.

Individuals with continent urinary diversions have an increased risk for many complications, the most common being urinary tract infections. Metabolic problems can also occur as the "new" bladder absorbs urine byproducts such as ammonium, hydrogen and chloride. Other complications include pouchitis (inflammation of the pouch), pouch rupture, kidney infections, stomal stenosis (when the diameter of the stoma at the skin level narrows or constricts), urethral strictures, bladder stones, and B12 deficiency. The prostate is most always removed in radical cystectomy procedures making sexual performance a concern in men. Women may also experience painful intercourse.

One of the most difficult and emotionally challenging complications of these surgeries is the development of incontinence (urine leakage; the inability to control urine). This can happen either from the stoma or urethra. Those with continent pouch diversions can wear an ostomy pouch to contain the leakage. Those with neobladders may need to catheterize themselves on a regular basis or wear incontinence garments. Treatments vary and surgical interventions may be necessary.

### **Why would continent urinary diversion surgery not be considered?**

Continent diversion surgery requires a patient to have a healthy bowel. They are also surgically challenging to create making it a lengthy OR procedure. The following are reasons why a surgeon may not consider continent diversion surgery:

- The intestine is diseased (i.e., inflammatory bowel disease)
- Past history of multiple bowel surgeries
- Overall general poor health
- Treatment with pelvic radiation therapy
- There is disease of the bladder neck and/or urethra (in cases of cancer for neobladder)
- Poor working urinary sphincter (for neobladder)
- Liver dysfunction
- Kidney disease
- Poor manual dexterity
- Poor motivation to care for self

### **In conclusion**

Those who choose continent diversion surgery can lead a happy and successful life without the need of wearing a pouching system. However, one must be counseled prior to surgery of the work that goes along with daily life in managing the diversion and the possible complications that may result. Individuals should wear a Medic Alert bracelet at all times in the event of an emergency to alert caregivers. Support is

imperative to adapt to a new body, and new life, physically and emotionally. UOAA is here for you. Check out our helpful continent urostomy [guide](#).

**Helpful Donations ~ Thank you!  
Now, Please Use Them...**

Karen Hollis, RN, CWON



Thanks to the kindness of others the Ostomy Association of Austin receives donations of new and unused ostomy supplies from time to time. These donations make it possible for us to help others in need of supplies. Here is a listing of supplies at Karen's house. Carol Laubach also has supplies, so between the two of us we should be able to assist you while you are waiting on your regular shipment from your distributor. Though we have many supplies, we are not an actual distributor. We do not have every available style or size, but we probably have something that will help you out in a time of need.

If you are in need of supplies, please contact **Karen Hollis at 512-785-7448 (voice message or text)** or **Carol Laubach at 512-339-6388 (voice message only)**. Be sure to leave your name, phone number and a brief message to indicate what type of ostomy you have, brand preference, size, and whether it's a one or two piece. They will call you back and work out a way to get the supplies to you.

**HOLLISTER**

- 11503 New Image CeraPlus, 1 3/4 " flange wafer, precut to 7/8", 28 boxes
- 18182 New Image pouches with Lock and roll closure, 1 3/4" flange, 14 boxes
- 18402 New Image Urostomy pouch, 1 3/4" flange, 1 box
- 18162 New Image drainable pouch, clamp closure, 1 3/4" flange, 1 box
- 14706 New Image wafer, 1 3/4" flange, precut to 1 1/4", 3 boxes
- 14705, New Image wafer, 1 3/4" flange, clamp closure, precut to 1 1/8", 6 boxes
- 11204 New Image CeraPlus wafer, 2 1/4" flange, cut to fit, 3 boxes
- 8991 New Image CeraPlus 1 piece drainable pouch, precut to 7/8", 6 boxes + 4 pouches
- 86211 New Image Premier, 1 piece pouch, cut to fit, 3 pouches
- 88400 New Image CeraPlus, 1 piece drainable pouch, cut to fit, 1 box
- 3778 Pouchkins, Newborn pouches, 4 boxes
- 9773 Wound Drainage collectors, 29 pouches

**COLOPLAST**

- 18705 SenSura Mio, Baby ostomy barrier, 2 piece flexible, 4 wafers
- 18700 SenSura Mio, Baby ostomy pouch, 14 pouches
- 18712 SenSura Mio, Kids urostomy pouch, cut to fit 2/5" - 1 3/8", 4 boxes
- 18711 SenSura Mio, Kids ostomy pouch, 2/5" - 2 1/8", 2 boxes
- 08009 Pedi Urostomy 1 piece, flat wafer, cut to fit 1/2" - 1 1/2 ", 1 pouch
- 18712 Pedi Urostomy 1 piece flat wafer, cut to fit 5/8" - 1 3/8", 1 pouch
- 16765 SenSura Mio, Deep convexity 1 piece pouch with filter, wide outlet, cut to fit 3/8" - 7/8", 5 boxes
- 11483 SenSura Mio, 2 1/4" flange, transparent, Click ostomy pouch with wide outlet filter, 16 pouches
- 16961 SenSura Mio, 2 1/4" flange, deep convexity Click wafer, cut to fit 5/8" - 1 9/16", 15 wafers
- 11482 SenSura Mio 2 1/4" flange pouches with Click wafer, 27 pouches
- SenSura Mio 2 1/4" flange, flat Click wafer, 9 wafers
- 10481 SenSura Mio, 1 piece wide outlet with filter, cut to fit, 3/8" 2 1/8", 13 pouches
- 16840 SenSura Mio, 1 piece, light convexity Urostomy pouch, precut to 13/16", 1 box
- 11590 2 piece drainable with filter; drainable pouch with matching flat wafer, cut to fit to 3 1/8", 3 wafers and pouches
- 16715 SenSura Mio, 1 piece with convex wafer, cut to fit 1/2" - 1 5/16" drainable, 5 pouches
- 10481 SenSura Mio 1 piece, clear, with filter, cut to fit 5/8" - 2 1/8 ", 2 pouches
- 10471 SenSura Mio, 1 piece, opaque, with filter, cut to fit 5/8" - 2 1/8 ", 2 pouches
- 12272 SenSura Mio, 2 piece, pouches, 2 pouches
- SenSura Mio, wafer to go with 12272, 2 wafers

Brava Ostomy support belt/hernia support belt, Small (31" - 35"), 1 belt  
Brava Ostomy support belt/ hernia support belt, Large (37" - 42"), 4 belts  
Brava Ostomy support belt/ hernia support belt, XLarge (40" - 46"), 1 belt

## CONVATEC

404016 SurFit Natura, drainable pouches, opaque, with 1 3/4" flange, 30 pouches  
411807 SurFit Natura, Moldable Durahesive wafer, 2 3/4" flange, Oval opening size from 1 1/4" -x 1 2/4" to 1 3/4" x 2 1/8" , 1 box  
411804 SurFit Natura, Moldable Durahesive wafer, 2 1/4" flange, Round opening, size from 1 1/4" - 1 3/4", 1 box  
413161 SurFit Natura wafer 1 3/4" flange, 2 boxes  
416743 Esteem 1 piece with convex wafer, drainable, InvisiClose precut to 1", 14 pouches  
413516 Esteem 1 piece, flat wafer, moldable, drainable, InvisiClose, cut to fit 1 3/16" - 1 9/16", 1 box  
416742 Esteem 1 piece, flat wafer, InvisiClose, precut to 1", 15 pouches  
416744 Esteem 1 piece, flat wafer, InvisiClose, precut to 1 1/8", 4 boxes  
416704 Esteem 1 piece, closed end pouch, precut 1", 10 pouches  
421615 Esteem 1 piece, soft convex pouch, cut to fit 1/2" - 1 2/3", 5 pouches  
175611 Stoma cap, cut to fit 1/2" - 1 3/4 inch (for someone who irrigates or does NOT wear a pouch 24/7)

## Cleveland Clinic Wellness



### Lower stress with a dose of nature!

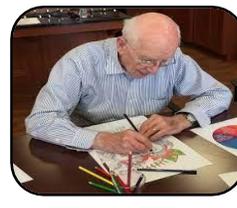
If you spend time camping, hiking, or strolling along a shoreline, you probably know it intuitively: being in nature feels good. A growing body of research has affirmed nature's potential stress-relieving benefits, including a new study on city dwellers. That's right, while deep wilderness and untouched beaches are teeming with good vibes, city gardens, urban parks, and even tree-lined streets have them, too. In the study, city dwellers who spent 20 to 30 minutes in a place that made them feel close to nature at least three times a week had significant drops in levels of the stress hormone cortisol. Along with practices like yoga and meditation, regular doses of nature may help to counteract the harmful effects of stress. Put this research into practice by finding the natural areas near you. And then add a "nature pill" to your routine—perhaps the least bitter pill of all.

### Never grow up! Boost your health and happiness with two childhood activities.

We're not suggesting that you throw tantrums or lick cookie crumbs off the floor, but engaging in some basic childhood activities, such as the two below, can help you to relieve stress and enjoy the little things more.

**Coloring.** It's easy to brush off the current "adult coloring" craze as a passing trend, but it's tapping into something deeper. By drawing (pun alert!) you away from your usual tangle of thoughts, coloring mimics aspects of mindfulness practice. "Mindfulness is about being aware of the present moment with intention and without judging," explains Cleveland Clinic psychologist Scott Bea, Psy.D. "So if we can engage in an activity such as coloring without too much judgment, I think it replicates the most positive aspects of mindfulness reasonably well."

**Play.** You know what they say about all work and no play! And in a culture that emphasizes productivity, play can be elusive, says Bea. Whether it's a game of hide-and-seek, charades, or touch football, playful activities help you find balance. As with coloring, play "draws you out of self-awareness," says Bea, and may help to fend off depression and anxiety as well. Plus, activity in general, no matter which kind, is beneficial for many parts of your body, including your brain.



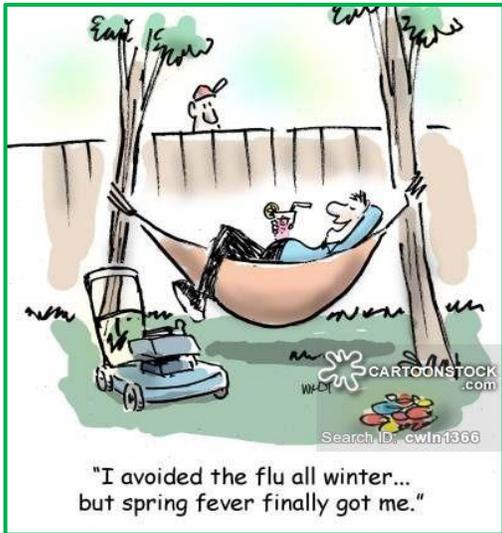


**Yearly Anniversaries:**

**March & April 2022**

Carol Laubach, 54; Beth Mosley, 46;  
Kellie Zullig, 24; Dan Boswell, 7; Allen Scott, 17

**Virtual Zoom Meetings: 7- 8 pm**  
**First Thursday of the month**  
**March 3**  
**April 7**  
[Join Zoom Meeting](#) (click on live link)  
 Meeting ID: 886 3266 6521  
 Passcode: Welcome!  
 \*Must download the [Zoom App](#) prior to



**Problem-Solving Clinic CLOSED**

The Ostomy Problem Solving Clinic remains closed for in person visits during this pandemic period.

- Many folks have reached out to Karen Hollis, RN, CWON via text and have been assisted during this time.
- Text Karen at **512-785-7448** for assistance. Send a text first and include your name. Send photos if you can as that will help in identifying the problem. Phone calls and facetime visits can be set up as needed.
- Don't suffer alone if you are having issues with your ostomy.



We are a health support group, a non-profit, tax-exempt 501(c)(3), organization of volunteers whose purpose is to provide mutual aid and education to persons who have ostomies and their families. Membership fees and donations are tax deductible. The information contained within our newsletters is for informational purposes only and may not be applicable to everyone. **Please do not follow any medical advice in our Newsletter without first checking with your physician or Wound Ostomy Continence Nurse.**

**Have you paid your dues?**

## OAA Membership Application

Name \_\_\_\_\_  
Ostomy Type \_\_\_\_\_ Surgery Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Year of Birth \_\_\_\_\_ Email \_\_\_\_\_  
Spouse/Relative/Partner/Friend Name \_\_\_\_\_

I do \_\_\_\_ I do not \_\_\_\_ give permission for my name to be included in our newsletter or membership directory.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Annual Dues:

\$25 \_\_\_\_\_ Ostomate

\$15 \_\_\_\_\_ Spouse/Relative/Partner/Friend/Other

\$25 \_\_\_\_\_ Professional

Mail Application to:

Ostomy Association of Austin

P.O. Box 143383

Austin, TX 78714

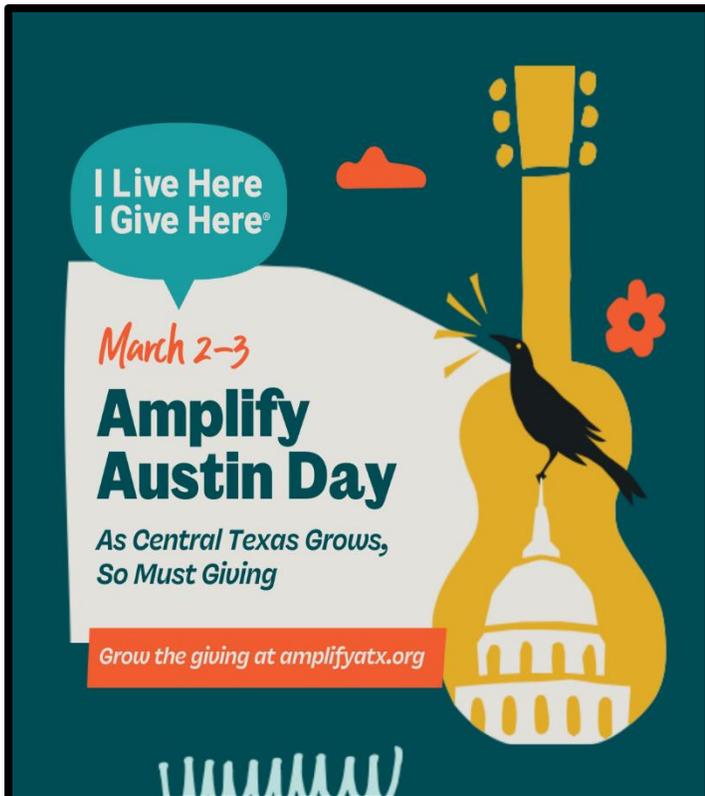
**Newsletter Preference: Check one**

\_\_\_\_\_ Printed version via US mail

\_\_\_\_\_ Email notification/download to your computer via website [www.austinstomy.org](http://www.austinstomy.org)

Membership benefits include:

- Monthly support & informational meetings
- Social events
- The Austi-Mate Bi-Monthly Newsletters

The cover of The Phoenix magazine, Summer 2021 issue, priced at \$9.95. The cover features a photo of Jonathan Negretti, a runner, celebrating with a trophy. Text on the cover includes "The Phoenix", "Summer 2021 \$9.95", "Jonathan Negretti", "7 Marathons", "7 Countries", "7 Days", and "WORLD MARATHON CHALLENGE 2020".

The Phoenix magazine is the official publication of the United Ostomy Associations of America. The Phoenix magazine is published quarterly - Annual subscriptions are \$19.95. <https://phoenixuoaa.org/>  
Toll-free 800-750-9311.

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Rachel<sup>®</sup>, SenSura<sup>®</sup> Mio Convex Flip user

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PM-0430C 03.19



# Hollister

people

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products

services



Heinrich Köberle, Germany



Jonathan Mendez, USA