



The Austi-Mate Journal

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

www.austinostomy.org

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

Upcoming 7-8 pm In-Person & Virtual Meetings:

March 7, 2024

April 4, 2024

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This Bi-monthly newsletter is available
online at www.austinostomy.org

Have you paid your dues?

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.



**Where flowers bloom,
as does hope.**

Thank you & shout out to Emily Brooke, Licensed Clinical Social Worker, who joined us at our February meeting. She spoke about Mental Health, Body Image, Intimate Relationships and Ostomies. See her presentation on our website

Our March Meeting will be an open Q & A.

Ode to a Filter



UOAA Update: Used with permission from Brenda Elsagher from:
I'd Like to buy a Bowel Please: Ostomy A to Z, www.livingandlaughing.com

I like your style, you're so discreet.
With your job well done, I still smell sweet.
Bring on the onions, the sodas, the beans.
I'm no longer worried about causing a scene.

In planes, at games, home, and work,
Flatulence dissipates, oh, what a perk.
Thank you, filter makers, you've made my day,
I go through life in a much happier way.

What Keeps You Up at Night?

UOAA Online Article 12-7-2023



Sleep is vital for health and healing. Hormones released at night are responsible for cell growth and repair. We also need quality sleep for healthy cognitive functioning and so we can complete everyday tasks. A lack of sleep can lead to confusion, delayed healing, immunosuppression, elevated blood pressure, decreased pain tolerance, and many other negative effects.

If you have an ostomy, your quality of life may be impacted by the condition of the skin around your stoma (i.e., your peristomal skin), and issues like pouch ballooning and leakage. One area often not given much attention is how having an ostomy affects your sleep. Based on anecdotal evidence (i.e., clinician experiences and patient stories), we know that living with an ostomy can negatively impact sleep. But to what extent?

[Ostomy Sleep Survey](#)

To answer this question, Hollister Incorporated conducted an Ostomy Sleep Survey¹. The results revealed some interesting insights on how having a stoma impacts sleep and on how ostomates address their sleep issues.

To conduct this research, we collaborated with product distributors and patient organizations to provide nearly 6,000 people with a detailed 15-question online survey. Participants varied in type of ostomy and length of time living with an ostomy.

The survey included both those with healthy and unhealthy/compromised peristomal skin. Nearly 60% of participants were in the unhealthy category, although most of them (40%) reported only reddened skin and no other symptoms. (n=5,690)

[The Impact of Sleeping with an Ostomy](#)

Many people experience interrupted sleep for various reasons, including insomnia, sleep apnea, stress, and environmental factors. However, those with an ostomy have an added layer of potential sleep disruption.

The survey results provided strong evidence of an ostomy's impact on sleep:

- **Nearly 50%** of respondents said their pouching system disrupted their sleep in the past 30 days (n=5,648)
- **75%** experienced pouch-related sleep disruptions at least once a week (n=2,476)
- **64%** of participants - nearly 2 in 3 - cited pouch ballooning as a sleep disrupter (n=2,676)
- **50%** said that sleep disruption was due to pouch leakage or worry that the pouch would fail (n=2,676)
- **Nearly 20%** said their sleep was disrupted by itchy skin with no visible sign of irritation (n=2,676)

To read more about the data collected and how to address sleep disruptions, keep reading [here](#).

1. [Hollister Data on File, ref-02989, 2022](#).

This article was contributed by Hollister Incorporated. Hollister Incorporated is a proud sponsor of United Ostomy Associations of America and dedicated to delivering the highest standard of quality in ostomy care products. For more helpful resources, visit <http://www.hollister.com/ostomylearningcenter>.

Please make sure to consult with your healthcare professional for further guidance and instruction. The information provided herein is not medical advice and is not intended to substitute for the advice of your personal physician or other healthcare provider. Hollister is a trademark of Hollister Incorporated.

Article Boarder Distinctions: **Yellow- All Ostomies;** **Blue –Urostomy;** **Green-Ileostomy/Colostomy**

Stoma & Peristomal Investigation: What Should I Look For?

Jan Colwell, MS, RN, CWOCN, FAAN



For the person with a stoma, it is important to examine the stoma and the skin around the stoma (called peristomal skin) on a frequent basis. Why? Because finding subtle changes can allow you to determine if these changes need attention. Let's look at what should be included in your stoma and peristomal investigation.

Stoma: all stomas should be red. The color red can vary: the stoma is made of moist red tissue that lines our GI tract from top to bottom (mouth to anus). The mouth is lined with a red moist tissue that is very similar in appearance to our small and large intestine lining. (Remember your stoma is either the small or large intestine) If the stoma has any areas that appear to have a bump, an ulcer (scooped out) or a laceration (small linear line of white tissue) this could indicate a problem and a consultation with your ostomy nurse or physician is warranted. Stomas can be harmed by a snug fitting hard pouching system, or by a belt and an evaluation by your health care provider can help you determine what activity might be causing your stoma harm. Stoma injury is not common, but it is smart to examine your stoma on a routine basis.

Peristomal skin: the skin around the stoma should have no open areas, should not burn or feel itchy and should look like skin on other sections of your abdomen. Of course, when you first remove your pouching system the skin around your stoma can be pink from the pouch adhesive removal. This pink area should slowly fade. If there are any openings on your skin, you will see moisture in the area that is not intact. Remember our skin is dry and once you have moisture on your skin, it means the first layer of the skin has been injured.

If you notice red, discolored, or moist skin, think about the cause of this injury to your skin. Did the skin get pulled as the pouch was removed? This is called an adhesive injury and can be prevented with a slow removal of the adhesive by gently pulling up with one hand and with the other hand pushing the skin downward to release the tape. You can also consider using an adhesive remover product, either a spray or a fabric wipe that can help to release the skin from the pouch adhesive. Is the cause of the skin injury from stool or urine getting under the seal? You should always look at the back of the skin barrier (adhesive) to see if urine or stool is under the seal and on your skin at pouch change, this finding is called undermining and the treatment can be one of many interventions.

Things you can check for a cause of undermining include: is the opening in the skin barrier too large and stool or urine is contacting the skin and getting under the barrier? Is the skin next to the stoma uneven with creases (you can check this out in a sitting position with no pouch on)? If so, you might need a convex (rounded on the adhesive side) skin barrier. Or your wear time (the amount of time between application and removal) may be too long: average wear time is 3-4 days and extending beyond might mean that the skin barrier adhesive eroded (washed out) and allowed urine or stool to be on your skin. It is advisable that you see your ostomy nurse on a routine basis and in between those visits you can be the investigator and check out your stoma and peristomal skin health.

“In between visits with your healthcare provider, take a look at your stoma and peristomal skin”



Eating with an Ostomy; Foods and Their Effects

Food Reference Chart for People with an Ostomy

Listed below are general guidelines for individuals who have a colostomy or ileostomy. It is important to know the effects that various foods will have on stool output. The effects may differ for each person depending on surgery type and length/ function of the remaining bowel. To determine individual tolerance to foods, try new foods in small quantities. Remember to always chew thoroughly.

Disclaimer: This document contains information developed by United Ostomy Associations of America. This information does not replace medical advice from your healthcare provider. You are a unique individual and your experiences may differ from that of other patients. Talk to your health care provider if you have any questions about this document, your condition, or your treatment plan.

<p>GAS PRODUCING:</p> <ul style="list-style-type: none"> ALCOHOL (BEER) BROCCOLI BRUSSELS SPROUT CABBAGE CARBONATED BEVERAGES CAULIFLOWER CHEWING GUM CUCUMBERS DAIRY (e.g., MILK) EGGS LEGUMES (e.g., BAKED BEANS, LENTILS, PEAS) MELONS NUTS ONION PICKLES RADISH SOY PRODUCTS SPICY FOODS 	<p>*ODOR PRODUCING:</p> <ul style="list-style-type: none"> ASPARAGUS BROCCOLI BRUSSELS SPROUT CABBAGE CAULIFLOWER EGGS FATTY FOODS GARLIC LEGUMES (e.g., BAKED BEANS, LENTILS, PEAS) ONION SMOKED FOODS STRONG CHEESE <p>SOME MEDICATIONS SOME VITAMINS</p>	<p>MAY CAUSE LOOSE STOOLS; DIARRHEA:</p> <ul style="list-style-type: none"> ALCOHOLIC BEVERAGES APPLE AND PRUNE JUICES BAKED BEANS CHOCOLATE FRESH/RAW FRUIT FRESH/RAW VEGETABLES FRIED OR SPICY FOODS HIGH SUGARED BEVERAGES LEAFY GREEN VEGETABLES MILK/CHEESE (LACTOSE INTOLERANCE) 	<p>** STOMA BLOCKAGE:</p> <ul style="list-style-type: none"> BAMBOO SHOOTS BOK CHOY BROCCOLI (RAW) CABBAGE (FRESH/RAW/ALL TYPES) CAULIFLOWER (RAW) CELERY COCONUT COLESLAW CORN (WHOLE KERNEL) DRIED FRUITS FRESH/RAW PINEAPPLE MUSHROOMS (ALL TYPES) NUTS, SEEDS PITH FROM CITRUS (e.g., ORANGES) POPCORN SKIN OF FRESH FRUITS (e.g., APPLE PEELS, GRAPES)
<p>COLOR CHANGES:</p> <ul style="list-style-type: none"> ASPARAGUS BEETS FOOD COLORING (RED DYES FROM KOOL AID AND PUNCH) IRON PILLS LICORICE RED JELL-O TOMATO SAUCE 	<p>*ODOR CONTROL:</p> <ul style="list-style-type: none"> CONSUME PROBIOTICS (e.g., YOGURT, AIDS IN DIGESTION) EAT SMALLER/ MORE FREQUENT MEALS, AIDS IN DIGESTION FRUITS AND VEGETABLES; HELPS KEEP THE COLON CLEAN STAY WELL HYDRATED AND AVOID CONSTIPATION ODOR ELIMINATORS (DROPS, GELS, SPRAYS, TABLETS, SACHETS THAT CAN BE PLACED INTO AN OSTOMY POUCH) 	<p>***CONSTIPATION PREVENTION/RELIEF:</p> <ul style="list-style-type: none"> BRAN PRODUCTS FRUIT JUICES FRUIT (FRESH/RAW OR COOKED) OATMEAL PRUNES RAISINS VEGETABLES (FRESH/RAW OR COOKED) WATER (STAY HYDRATED) WARM BEVERAGES WARM SOUPS WHOLE GRAINS 	<p>THICKENS STOOL for Diarrhea and High Output</p> <ul style="list-style-type: none"> APPLESAUCE BANANAS BOILED WHITE RICE OR NOODLES CREAMY PEANUT BUTTER HOT CEREALS (OATMEAL, CREAM OF WHEAT, RICE) MARSHMALLOWS PEELED POTATOES TAPIOCA PUDDING UNSEASONED CRACKERS WHITE BREAD, TOAST YOGURT
<p>C Applies to people with a colostomy</p>		<p>i Applies to people with an ileostomy</p>	

* Odor from diet will differ for each person. If you have concerns, discuss with your doctor. Odor eliminators may be purchased from distributors of ostomy products. ** People with an ileostomy are at greater risk for stoma blockage/obstruction. These food types should be eaten with caution and not introduced into the diet until 4-6 weeks after surgery. Introduce them slowly, one at a time, and chew well. *** Increasing the amount of fiber in your diet will help you avoid becoming constipated. Discuss options with your MD.



Living Well with Bladder Cancer

BCAN Online Article



Many patients and their families want to know what they can do to help prevent bladder cancer from [recurring](#) and to live well after a diagnosis. There are many different ways that people can live well after a diagnosis. Good nutrition is one way to live well, and is important for everyone, but balanced, healthy diets are strongly recommended for those [living with a bladder cancer diagnosis](#).

Another essential part of living well is surrounding yourself with a support system and knowing when to ask for help. People want to know what they can do to help, and it is important to let them. You can ask them to make you a meal, come visit with you, or take up an activity with you.

There are many other people living with a bladder cancer diagnosis and there are [support groups around the country](#). There is also an [online BCAN Support](#) Forum with nearly 60,000 members who know exactly what you are going through. Living well can also mean becoming and staying physically active by getting at least 30 minutes of physical activity a day. Physical activity can be anything that gets your heart rate up, such as walking, gardening, swimming, weight lifting, or dancing. Talk to your doctor before starting a new exercise routine.




Great Resource:

Know Your Ostomy Checklist®

Surgeon: _____ Surgery Date: _____

Ostomy Type: I have a (n) ___ Colostomy ___ Ileostomy ___ Urostomy ___ Other (_____)
___ Temporary ___ Permanent
(A healthy stoma should look red, moist, and shiny.)

Stoma Shape: <ul style="list-style-type: none"><input type="checkbox"/> Round<input type="checkbox"/> Oval<input type="checkbox"/> Irregular<input type="checkbox"/> Smaller at the top, larger at the bottom<input type="checkbox"/> Larger at the top, smaller at the bottom<input type="checkbox"/> Has one opening<input type="checkbox"/> Has two openings	Stoma Color: <ul style="list-style-type: none"><input type="checkbox"/> Red<input type="checkbox"/> Pink<input type="checkbox"/> Brown (not normal)<input type="checkbox"/> Black (not normal)<input type="checkbox"/> Maroon (not normal)<input type="checkbox"/> Blue/Purple (not normal)<input type="checkbox"/> Other	Stoma Position and Level: <ul style="list-style-type: none"><input type="checkbox"/> Below skin level (in a skin fold or sunken)<input type="checkbox"/> Flush to skin level/at skin level<input type="checkbox"/> Above skin level	Stoma Location: <ul style="list-style-type: none"><input type="checkbox"/> Right side of the body above the belly button<input type="checkbox"/> Right side of the body below the belly button<input type="checkbox"/> Left side of the body above the belly button<input type="checkbox"/> Left side of the body below the belly button<input type="checkbox"/> In or near a skin crease<input type="checkbox"/> In or near a skin fold<input type="checkbox"/> On a flat skin surface	Stoma Size: ___ X ___ <ul style="list-style-type: none"><input type="checkbox"/> Round<input type="checkbox"/> Oval<input type="checkbox"/> Irregular
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Advocates for a Positive Change www.ostomy.org 1.800.826.0826 

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March & April 2024 Yearly Anniversaries
Carol Laubach, Dan Boswell, Kellie Zullig



Meetings
First Thursday of the month, 7-8 pm
Meeting are combined in Person & Virtual

March 7

April 4

May 2

June 6

No July Meeting

[Join Zoom Meeting](#) (click on live link)

Meeting ID: 886 3266 6521

Passcode: Welcome!

*Must download the [Zoom App](#) prior to joining the link



Are you in need of donated supplies? We have **plenty** available! Please contact Carol Laubach, (512-339-6388) and indicate what type of ostomy you have, brand preference, size, and whether it's a one or two piece. This will help to get you the best fitting supplies possible.

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.**

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.austinosomy.org

Membership benefits include:

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

Free Problem-Solving Clinic

This free clinic is open on the first Thursday of the month at the Gethsemane Lutheran Church from 1-4:00 pm.

- Text or call Karen Hollis, Retired RN, CWON at 512-785-7448
- Text/leave your name, number, type of ostomy and problem
- Karem will contact you



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<https://phoenixuoaa.org/>

Toll-free 800-750-9311.

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Rachel^{*}, SenSura[®] Mio Convex Flip user

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