

Affiliate Group #004

Clearwater Ostomy *Support Group*



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March 2025

Next Meeting

Saturday, March 15, 2025

Support Meeting 10:30 am

The Masonic Lodge 1145 Highland Avenue Largo, FL 33770

the President's Message

Hi Everyone,

We are now welcoming Spring with the warmer temperatures and lots of pollen. I hope everyone stays healthy and happy as we bring our gardens back from their winter break.

We are looking for speaker/topic suggestions. Please let me know what you would like to hear.

We are still working on getting a new home for our Angel Closet. Continue your prayers that we find someplace soon as so many need our help.

Blessings,

Marilyn



2025 MEETING SCHEDULE

Subject to changel

April 19, 2025

May 17, 2025

Future dates and locations are still to be determined and confirmed.



Our meetings are open to new ostomates, the experienced ostomates, the caregivers, the families, the healthcare workers, the support persons, the nursing students, the social workers and anyone who has a connection with ostomies and would like to join us. We welcome you all!



Life Hacks with an Ostomy by Rachel Hendee, PA-C

Hate the dreaded "splash back" when emptying your pouch? Place a layer of toilet paper down over the water to prevent it, or try flushing while emptying.

Run out of deodorizing lubricant drops? Use a small amount of olive oil to coat the inside of your pouch to prevent pancaking.

Having difficulty opening the end of your pouch because it's stuck together? You can either put a large crease down the center or cut a small diamond out of the middle so it will open up very easily.

Problems with watery output overnight? Eat a bowl of Lucky Charms before bed, as some say the marshmallows help thicken the output!

Ever had your favorite scissors taken away at airport security because you forgot they were in your ostomy supply bag? Pre-cut the barriers and leave the scissors at home.

Concerned about your pouch showing underneath tight clothes? Buy high waisted control top or shape-wear one size above your usual. It will still hold the pouch in and prevent bulging but won't be too tight or restrictive.

Worried about the Velcro seal leaking? A mini binder clip might help you feel more secure.

Concerned about odor? Place an Altoid, mint, or Tic Tac in the bottom of your bag!

Dehydration Can Drain Your Mind and Mood

eeling out of sorts, but not sure why? You might be dehydrated. Two new studies found even mild dehydration comes with big consequences: altered mood, impaired memory, trouble concentrating, fatigue, headaches, anxiety. While the reasons for these symptoms are unclear, researchers at the University of Connecticut. Human Performance Laboratory noted that dehydration causes changes in electrolyte balances in the blood as well as serotonin levels and mood. How to tell if you're dehydrated? Check the color of your urine. "Anything darker than a pale, straw hue means you need to drink more," says study author Lawrence Armstrong, PhD.





The Vicious Cycle

by Mary Lou Boyer, Based,, RN, ET, CWOCN

long with an appropriate pouching system, the skin around the stoma is most important for a secure ostomy appliance seal. The condition of the skin can affect not only how your pouch adheres to the skin, but also your comfort level, emotional health and general wellbeing.

Healthy, smooth skin provides the ideal surface for a pouch, while irritated weeping skin is painful and frustrating. However, even with all attempts to keep the peristomal skin in good condition, one of the most common problems for a person with an ostomy is peristomal skin irritation.

Skin irritation can start out as a seemingly small problem, but can quickly develop into a difficult and painful situation. As it worsens, it is harder to obtain a secure appliance seal. That in turn increases chances for further leakage and increased damage to the skin.

It turns into a vicious cycle: Irritated

skin that becomes raw and weepy leads to poor adhesion of the skin barrier, allowing further opportunity for leakage of stool or urine onto the skin to cause even more skin damage. If the vicious cycle is allowed to continue, it can develop into an almost uncontrollable situation.

Therefore it is important to know what can cause skin irritation, how to avoid it, and how to care for problems that occur.

There are a number of factors that can cause skin irritation. These are the most common:

 Stool from a colostomy or ileostomy has enzymes that can "digest" and break down the skin as they do foods. Contact with the skin causes mild itching and burning at first, however it can quickly erode the skin until it is so open and raw that an ostomy pouch is difficult to adhere. The damage may be severe enough to cause bleeding and it is very painful.

- 2. Urine from a urostomy can damage skin as moisture soaks in, causing swelling of the skin cells and allowing bacteria to enter. Urine can deposit urine crystals that feel like fine salt, acting like sandpaper, scraping the skin surface. With prolonged exposure, urine causes wart-like thickening of the skin close to the stoma.
- 3. An allergic reaction to any ostomy care product in contact with the peristome skin can cause itching, redness, and weeping of the skin. There may even be blistering.
- 4. The peristomal skin can be injured when the pouch barrier is removed too often or too roughly. This is called "mechanical trauma". Pulling adhesive off of the skin strips the outer layer of skin cells faster than your body can replace them, causing red, painful damaged skin that may weep fluid.
- Rough removal can tear out hair on the peristomal skin. Pulling out hair causes folliculitis, infection of the hair follicles, and is characterized by red, sore, itching and eventually weep skin. It can also look like pus-filled or an open pimple.
- 6. Fungal infections or yeast infections usually look like tiny red pimples with small white tops. They can be scattered or so close together that the area is red. Severe fungal infections become very weepy. The most telling sign that the redness or tiny bumps are fungal is the constant itchiness.

Breaking the Vicious Cycle

Breaking the vicious cycle starts with figuring out what caused the problem in the very beginning. To determine the cause, it is necessary to inspect the skin and the pouch barrier that is removed with each appliance change. It could be called "ostomy detective work". Look at where the irritation is on the skin. Then look at the back of the pouch barrier. Compare them to see if the area of irritated skin is "mirrored" on the back of the wafer. In oth-

er words, does the wafer show signs of wearing away or have a
stain from leakage
across the same area
where it previously adhered to the skin? Is
the skin problem close
to the stoma or further
away from the stoma?
If the irritation is close
to the stoma, is it all
the way around the stoma, or to one side, or
below the stoma? Any

of these can indicate stool or urine contact on the skin. The wafer opening size may need to be adjusted. It may be necessary to use a different pouching system, add a barrier ring or paste strip, or use a pouching system with convexity.

Next check to see if the affected area looks like the shape of any product used on the skin, such as the circular or square skin barrier, where paste or a barrier ring was applied, or where the tape portion of the pouching system comes in contact with the skin. If redness, itchiness and weepiness match the size and shape of any product, the cause may be an allergic reaction. If you have a history of allergies prior to ostomy surgery, you may be more likely to have allergies to ostomy care

products. It is necessary to eliminate the offending product by using an alternate brand or protective products to prevent skin contact with problematic items. Some allergy medications can help. Check with your doctor as to whether you can take over the counter allergy medications.

Mechanical trauma related to removing the appliance too quickly can be prevented with careful pouch removal and the use of adhesive remover. Press the skin away from the barrier rather than pulling the wafer off of the skin. Adhesive removers help loosen the bond between the skin and pouch barrier without pulling the skin. Wash adhesive removers from the skin before applying the new pouch.

Avoid pulling of hair around the stoma to prevent or treat folliculitis. Keeping the area free of hair is the first step. It is best to use an electric shaver or trimmer as disposable or blade-type razors tend to cut or scrape the skin and pull on body hair. Use adhesive remover to help release pouch adhesives. Wash the skin with mild antibacterial soap and rinse thoroughly. Mild cases will clear up with careful technique. It may be necessary to use an antibacterial powder (such as Gold Bond, Columbia, or Ammens) on affected areas. When using powder, gently massage the powder into the skin, dust off excess, and pat or spray no-sting liquid skin barrier to seal the powder.

Fungal infections commonly occur under the pouch barrier seal where it provides a warm, dark and moist environment in which they thrive. If you have been on antibiotic therapy, it is more likely that you will be susceptible to fungal infections under the appliance. It can easily spread further than the pouch seal and can become weepy and sore in addition to the pronounced itchiness. As it progresses, it may appear as solid red patches or have a white-coated appearance.

It is treated with antifungal powder sealed

with no-sting skin barrier film. As always, when using powder, gently massage the powder into the skin, dust off the excess and pat or spray no-sting liquid skin barrier to seal the powder. If the problem is persistent, prescription medication may be needed.

No matter what the reason for skin irritation, it is important to take immediate action. All too often, when the irritation is mild, it may be ignored or let go. It may be an inconvenient time, you may be busy, away from home, or decided to wait to do something about it.

Ignoring the problem will not make it go away, but it can quickly develop into a very complex problem. As with any problem, prevention is the best management; however when problems occur, don't wait. Find out what caused the irritation.

If you are having a leakage and you are not able to clear up the problem on your own, do seek help from someone knowledgeable in ostomy care.

Don't wait until it becomes difficult to break the cycle.



As an ostomate, managing your ostomy can be a challenging but ultimately rewarding experience. Whether you are a beginner or have been living with an ostomy for a while, there are always ways to improve your daily routine and make life with an ostomy more manageable. Here are ten tips to help you get started:

1. Learn as much as you can about your ostomy. The more you understand about your specific type of ostomy (colostomy, ileostomy, etc.), the better equipped you will be to manage it. Research online, talk to your healthcare team, and consider joining a support group to get the infor-

group to get the information you need.

2. Choose the right ostomy supplies.

There are many different types of ostomy bags, wafers, and other supplies available, and it's important to find the ones that work best for you. Experiment with different brands and products to find what fits your needs and lifestyle.

- 3. **Practice good hygiene**. Proper hygiene is key to preventing skin irritation and other problems with your ostomy. Keep the area clean and dry, and consider using a protective barrier cream to prevent irritation.
- 4. **Embrace a healthy lifestyle**. Eating a balanced diet, getting enough exercise, and managing stress can all help you feel your best and maintain your overall health.
- 5. **Know your limits**. It's important to listen to your body and pay attention to how your ostomy is functioning. If you are feeling overwhelmed or experiencing problems with your ostomy, it may be time to take a break and rest.
- 6. **Find the right support**. Living with an ostomy can be challenging at times, and

it's important to have a support system in place to help you through the ups and downs. Consider joining a support group, connecting with other ostomates online, or seeking out a therapist or counselor who can provide additional support.

- 7. **Plan ahead**. Whether you are traveling or just going about your daily routine, it's important to plan ahead and be prepared for any eventuality. Keep extra supplies on hand, and think about how you will manage your ostomy in different situations.
- 8. **Wear ostomy clothing** that fits well and is comfortable. Ostomy clothing, such as ostomy wraps and ostomy belts, can help keep your ostomy bag secure and in place, and can also provide an extra layer

of protection against leaks. Choose clothing that fits well and is comfortable to wear, and be sure to follow the manufacturer's instructions for care and maintenance

tions for care and maintenance.

9. **Stay active**. Just because you have an ostomy doesn't mean you have to give up your favorite activi-

ties. With a little extra plan-

ning, you can continue to

exercise, participate in sports, and enjoy other forms of physical activity.

10. **Find your own way**. Every ostomate is different, and what works for one person may not work for another. Experiment and find what works best for you, and don't be afraid to try new things.

By following these tips, you can learn to manage your ostomy effectively and live a full, active, and fulfilling life.

Remember, you are not alone, and there is always help and support available if you need it.



Other Ostomy Solutions!!!

Pancaking

One of the subjects most often asked about is pancaking. This is where the stool collects at the opening of the appliance and doesn't drop down into the pouch. This build-up of stool works its way beneath the appliance, separating it from the skin and leading to flange failure.

Pouching Issues

There are a few things involving the pouch itself that can contribute to this issue. In some instances, the stool sticks to the sides of the

pouch. To solve this, a lubricant can be added to help the stool slide down into the pouch. One can use a commercially prepared lubricant designed for ostomy appliances, or simply use Baby Oil or Mineral Oil. Just remember that the lubricant often has to be added and massaged around in the pouch after each bowel movement.

If your pouch has a filter,

sometimes a vacuum can occur due to too much air being released. This causes the pouch to collapse, and the sides to stick together leaving no space for the stool. One way to solve this is to cover the pouch filter with a sticker or some tape so that some air remains in the bag. If too much gas builds up, you can easily lift the tape and apply gentle pressure to the pouch to allow the gas to escape. And don't forget to remove the tape at night to pre-

vent ballooning. You can also try adding a small piece of wadded up tissue or a cotton ball to the pouch. This tissue or cotton ball can be moistened or inserted dry and physically holds the walls apart, preventing the sides from sticking together.

Sticky Stool

The consistency of the poop can make a big difference in managing this situation, as "sticky" stools (or almost formed) tend to...well, stick! This is where changing what you eat by increasing insoluble fiber and ensuring adequate hydration come into play. This subject often causes confusion about how much is

enough. "Adequate hydration" means drinking a lot of fluids, and these fluids should not contain alcohol or caffeine as both of these things actually dehydrate an individual. This doesn't mean that you can't have your tea or coffee etc. But in addition to those beverages, you should aim to drink 6-8 glasses of water or juice per day.



Insoluble fiber is the "roughage" provided by whole grains, fruits and vegetables.

These are important for two reasons. First they attract and hold water within the intestine and stool, making the poop softer. Second, insoluble fibers add bulk to the stool, which in turn encourages the intestines to begin their wavelike action to move the poop out. The faster the poop moves out, the softer it is.

Some foods are known to help thin

stools. These include grape juice, prunes, fresh fruits and vegetables, green leafy vegetables, chocolate, fried foods and beer. In addition, some ostomy information forums suggest avoiding (or using in moderation) foods that are known to be stool "thickeners". These are the starchy foods such as potatoes, white rice, white pasta as well as peanut butter, marshmallows, bananas and tapioca.

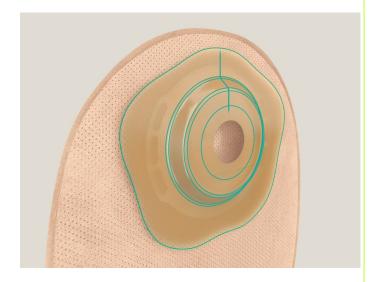
These changes, particularly the addition of fiber, can take several weeks before you really notice an improvement. If you find they aren't enough, you may wish to speak with your physician about taking a mild laxative or stool softener.

Appliance Issues

This issue is a little more difficult to address, as every person has a differently shaped stoma and abdomen. Some individuals find relief by changing their appliance from a flat to a convex version. Others find that wearing an ostomy belt helps, or a guard that applies pressure to the peristomal region. These three techniques would subtly "pop out" the stoma to create a slight spout that would, in theory, direct the stool down into the pouch.

However I would urge you to use caution and seek a professionals advice prior to changing your appliance to a convexity, particularly if you have a hernia, as convex appliances can cause pressure sores if they are used improperly.









Hints & Tips from Here, There and Everywhere!

- After showering or bathing with the flange/ faceplate off, hold a cold compress over the peristomal area for a few seconds to close pores before putting on a new appliance.
- Do not worry about "accidents" and "problems" that may never happen. Plan ahead; keep an extra appliance change and extra clothes handy in case something does happen, but don't worry needlessly. Life is too precious.
- Remember after surgery when you were advised to "chew, chew, chew and drink, drink, drink?" It still applies; chew food carefully and never pass a water fountain without drinking.
- Keep an updated list of all the ostomy supplies you use for your ostomy nurse, doctor, and family members; include the product numbers, sizes and manufacturers, as well. Keep it in a place where you can find it quickly. Make sure a family member

knows where the list is.

- Do not keep a "lifetime" supply of ostomy supplies on hand. Shelf life of those items may be limited.
- Build a support system of people to answer questions when you have problems; include your ostomy nurse, ostomy visitor and the officers listed on the back of this newsletter.
- Tea is an antispasmodic, is soothing to an upset stomach and contains potassium to replace one of the electrolytes frequently lost by ostomates.
- Don't shove parsley aside; it is one of nature's best deodorants.
- It is not necessary to use sterile supplies.
 The stoma and surrounding area is not sterile.
- If your scissors get sticky after cutting a flange, clean the blades with rubbing alcohol.

- Scotch guard sprayed on an elastic ostomy belt will keep it clean longer and help to hold its shape.
- Tired of getting up at night to empty your pouch or release gas? Try using a 'high output' pouch with a built-in gas filter at night.
- Two tablespoons of plain baking soda in water to wash around the stoma can help heal the skin and relieve itching.
- Pecans, cashews and walnuts are softer and easier to digest than peanuts.
- Put a piece of tape down the entire length in the center of the pouch to reduce rustling noises.
- Antihistamines in allergy medications can slow down bowel motility (spontaneous movement of the digestive track). If you become constipated while on antihistamines, your physician might suggest an alternate medication.
- Tomato juice is lower in cost per cup than Gatorade, while providing as much sodium and 5 times more potassium. Orange juice is another alternative, providing the same amount of sodium and 15 times the amount of potassium.
- Lengthy sitting in one place can force the pouch contents upward around the stoma and cause leakage. Getting up occasionally and moving around will help.
- If you wear a two-piece snap-on appliance, make sure the pouch is securely

- snapped to the flange. Give a little tug on the pouch to test its 'lock'.
- Use a hand mirror for a better view of the stoma. It's a great way to see under the stoma.
- When changing your appliance, for better adherence, warm the flange and peristomal skin 30 seconds before applying the flange. Then, with gentle pressure, hold your hand over the entire appliance for about 5 minutes for an even better seal; the warmth of the hand helps with adherence also. By taking the time to do these two things, you may actually get an extra day or more wear-time from your appliance.
- In an airplane or car, place the seat belt above or below the stoma. Don't leave the belt unbuckled or excessively loose (1" maximum slack is recommended). Shields are available to protect the stoma.
- When emptying your pouch, slip the clip under your watchband, into the side of your shoe or top of your sock or hose so that it doesn't fall into the toilet or elsewhere. Carry an extra clip with you.
- Some foods can change the color of your stool. Bananas may turn it black; beets and tomatoes may turn it red; dyes in many foods (like in Jell-O, licorice, etc.) may turn it red, black or green.

Loads of information can be found at the United Ostomy Association of American website.



UOAA's Main Website - www.ostomy.org

UOAA Discussion Board -

www.uoaa.org/forum

Facebook: Facebook.com/UOAA

Twitter: **Twitter.com/UOAA**

Phoenix Ostomy Magazine:

https://phoenixuoaa.org/my-

account/

Keep Hydrated!

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Follow us on Facebook and Twitter for lots of great information and some humor.



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Need Emergency Ostomy Help?

Our Ostomy Clinic and Angel Closet are temporarily closed.

We are searching for a new home for the clinic/closet. If you have any ideas on where we might be able to house them, please contact Marilyn at 727-366-0807 or Lila Watkins at 727-744-2660. We would like to have this resolved as soon as possible!

There are no bad ideas! We appreciate your help!



COSG #004

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