

The Ostomy Care and Supply Centre

Ostomy News



Is it time for an Ostomy TUNE-UP?

Why is it that we take our cars in for a tune-up but we don't think of doing the same for ourselves and our stomas? Your last contact with an ostomy nurse may have been in the hospital after surgery or shortly after discharge, and then you've carried on with daily life with an ostomy...good or bad.

Many patients seek out an ostomy nurse only when they are in dire straits with a major problem or leave things too long until they get out of hand. This does not have to be the case. An Ostomy Nurse, or Enterostomal Therapy Nurse (E.T.) *is your lifetime link to care for you and your ostomy.* This means that you have access to this expertise with all areas of stoma health including concerns such as skin problems, leak issues

and sizing changes but did you know that an Ostomy Nurse can also help with many other things? These topics can include: diet, intimacy, travel, new products, hernias, blockages, wounds or sores around the stoma, caregiver support and teaching, irrigation, swimming and bathing, sports and exercise, clothing ideas, counselling about psychologic and social aspects of having an ostomy, and stoma changes. Many patients don't have an annual check-up to see how things are going and get feedback. You may be doing something to the best of your ability, but there may be a different or better way of doing things. Don't hesitate to call on an Ostomy Nurse as a routine part of living with your stoma. We are here to help!



Tips to Manage Intestinal Gas

- Eat Slowly: avoid "gulping"
- Avoid using a straw when drinking
- Avoid carbonated beverages
- Avoid chewing gum or sucking candies
- Avoid foods that are known to cause gas such as onions, cabbage, brussel sprouts, beans, cucumber, cauliflower
- Avoid smoking

Did you have a Positive Experience at our Clinic?

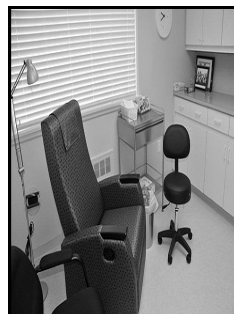


Please consider letting others know by reviewing the Ostomy Care and Supply Centre on Google and Yelp reviews.

If you have suggestions on how we can do something better or differently, please let us know! Your feedback is important to us!

andy@ostomycareandsupply.com

Or call Andy @ 604-522-4265



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REASERCH & EDUCATION

Each university semester we host nursing students from BCIT as part of their community health practicum, allowing them to learn more about ostomy care, different roles for community nurses and about resources available for people with a stoma. Although they only get to spend one day with us, we hope our passion and philosophy of holistic nursing care makes an impression on them! Having a student sit in on your appointment is completely optional, but the lessons they learn about stoma care are invaluable to their nursing careers where many nursing students have never even seen an ostomy!

We are also actively involved in nursing research. A few times a year, we participate in clinical trials of new ostomy products as they are developed. Sometimes

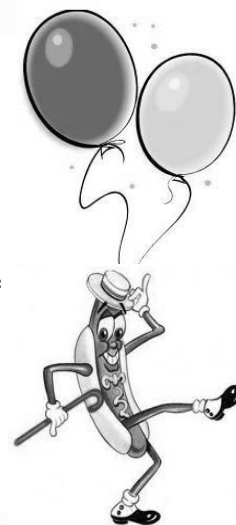
these trials are to test products that, while having been tested on human skin before, have never been used on people with a actual stoma. These trials help manufacturers refine and improve the products and move the technology forward which benefits you in the long run. Assisting with research is important to us to stay current with new innovations, better understand the development process, and help with improving products that play a role in peoples' quality of life. We are so fortunate to have patients who are generous enough to participate in these studies. If you are interested in participating in a trial of a new product please let us know. When a study comes up that looks like a good match, we will be in touch with you!

Customer Appreciation Day!

SATURDAY TBA, 2015

Come join us for a hotdog, a tour and meet & greet our staff at the store. Vendors will also be here with displays of what's new!

We look forward to seeing you!



Meet Lynn!

Lynn has been an invaluable pharmacy assistant with the Ostomy Care and Supply Centre for 10 years.

Likes: Greek food, walking trails near her home in Port Moody, yoga and reading, dinner with family and friends, playing dominos or board games

Favorite indulgence: Dark chocolate!

Favorite TV show: Downton Abbey, Amazing Race

Favorite vacation spot: Anywhere warm and near water. Lynn also loves Disneyland! She has only visited 7 times!






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Rebounding Memory Technology.™ Actively matches the size and shape of your stoma, even as it grows and shrinks throughout the day.

The one and only smart adhesive with tri-laminate construction. The one and only smart adhesive with tri-laminate construction. Turtle-necks comfortably around your stoma to help prevent leaks and skin irritation.

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¹ Scott V, Rasbach D, Kennedy G, Heise C. Prospective assessment and classification of stoma related skin disorders. Poster presented at: 41st Annual Wound Ostomy and Continence Nurses Society Conference; June 8-10, 2009; Orlando, Florida.

² Hoeffel J, Guy D, Allen S, St-Cry D. A prospective multicenter evaluation of a moldable stoma skin barrier. *Ostomy Wound Manage*. 2009;55(5):62-69.

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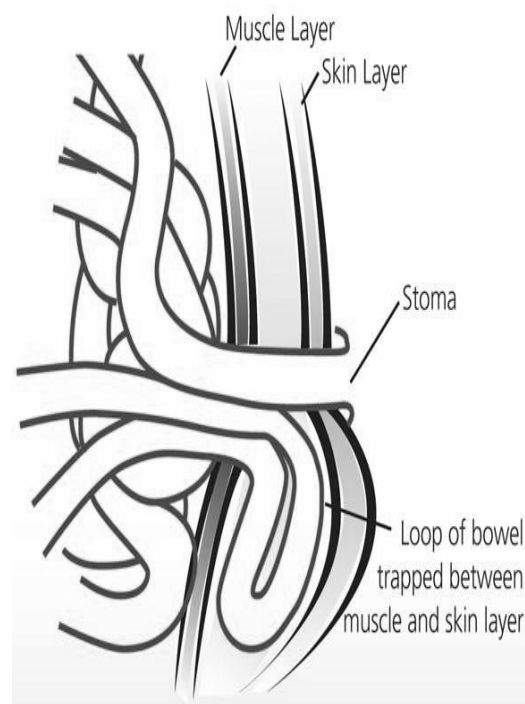
Risk of Peristomal Hernia and an Ostomy

All has been going well with your ostomy until one day you notice a bulge around your stoma. It may be large or small, but it certainly wasn't there before! You may have a peristomal hernia. This is a protrusion of the intestine through the abdominal muscle wall that occurs when intra-abdominal pressure increases. This can happen when lifting more than 10lbs, sneezing, coughing, or vomiting and can happen quite suddenly or slowly over time. You may have a heavy or "dragging" feeling of your abdomen and notice the bump or bulge increasing slightly throughout the day and reducing a little overnight and by morning.

In fact, there is an 20-50-% chance for an ostomy patient to develop a peristomal hernia. This is because the surgeon had to pull the bowel through the abdominal muscle wall for stability of the stoma. This hole forever weakens the muscle wall and can allow for an additional loop(s) of bowel to pop through the muscle wall and get "stuck" when intra-abdominal pressure increases. This will then look like a bump around the stoma. The treatment of a peristomal hernia is ultimately surgery but this has to be

considered wisely. The mere presence of peristomal hernia is not "a medical emergency" on its own. It only becomes a serious concern if it becomes strangulated or twisted and the blood supply to the bowel is compromised. A patient would know there is a problem because of sudden and severe abdominal pain. This is considered a medical emergency and requires a call to 911. Otherwise, living with a peristomal hernia is more a matter of comfort and support for a heavy feeling abdomen and concealment of any deformity with carefully selected clothing options.

It is unfortunate that many patients receive this information after it is too late and the hernia has already presented itself. PREVENTION is the key in developing a peristomal hernia. The doctor's may have said there is a lifting restriction after a few months after surgery but this is often brushed off after a few months. In actual fact, this restriction of a maximum of 10-15lbs is for as long as a patient has a stoma because of the risk of hernia. Bracing your abdomen with coughing or sneezing when you have a cold, or bracing the tummy when vomiting with the flu is also a very good idea.



The Ostomy Nurses at the Ostomy Care and Supply Centre are very familiar with peristomal hernias and are available for consultation. If you are concerned that you may have a hernia or are considering abdominal support in the form of a hernia belt, make a complimentary appointment with us today. We have a variety of custom hernia belt and support options that we can provide. Call us today 604-522-4265.



Vancouver Chapter: Ostomy Society of Canada

Join us for information and meet others living with an ostomy.

2015 Dates: February 22, April 19, June 15, September 20

President
Deb Rooney
604-683-6774

Visiting Co-ordinator
Julie Singer
778-879-6600

Chapter Meetings at The Collingwood
Neighbourhood House
5288 Joyce Street, Vancouver @ 1:30

Andy's Corner : Meet Andrea Manson RN, BSN, ET, NEA



Andy originally worked with her mother, Helen Manson, one of the first ET nurses in BC who also has an ostomy. Upon her retirement in 1989, Andy proudly took ownership of the Ostomy Care and Supply Centre. She knew she had big shoes to fill to provide a much needed service within the community. For over 25 years now, we have been serving patients throughout the Lower Mainland as well as province wide and nationally, providing expertise to patients as well as fellow ET/Ostomy Nurse colleagues, Home Care Nurses, Physicians and Surgeons.

It is an honour to work so closely with patients after their surgeries and to help make life with an ostomy easier. Andy has built the Ostomy Care and Supply Centre to stand out as a centre of excellence for ostomy care where all of the products we sell are completely backed up with Ostomy Nursing expertise 6 days a week.

Andy is also trained as a Nurse Continence Advisor, meaning that she is able to support patients experiencing bowel or bladder continence concerns, provide assessment and advice. She is available for complimentary consultation at the clinic.

Ask

Andy...



I don't go out very often because I feel like people can smell my ostomy. Is there anything I can do?

One of the most unfortunate misconceptions about having an ostomy is that other people will know you have one because they will smell it. It is very important to understand that this should **never** be the case! ALL ostomy pouching systems are considered odor-proof and self contained. This means that the only time you, or anyone around you should smell anything is when you empty the stool into the toilet or throw away an old pouch (as with 1 or 2 pc disposable systems). There are several

commercial products that can help with reducing odour when emptying into the toilet. These include deodorizers that can be placed into the pouch to neutralize odour and others that are dropped into the toilet water to create a film on the water surface that traps odour in the water such as *Just a Drop*.

When a patient comes in to the clinic with this concern, and indeed there is a noticeable odor with regular wear, it is **ALWAYS** related to one of two things:

Either there is a leak beneath the flange indicating a problem with making a good seal around the stoma OR the bottom opening hasn't been kept clean enough during emptying and the end closure has been soiled with stool. There are **NO** other situations where you should smell an odor.

Please do not hesitate to come in to see an Ostomy Nurse at the Centre if you are experiencing this issue and not going out of the house or living your life to its full potential!

If you have a question for ET Andy—please email her at andy@ostomycareandsupply.com subject line: “newsletter question”



Steve Gill – Abbotsford Gutsy Walk Chair

I know intimately the devastating impact that ulcerative colitis can have on every aspect of your life, including your family and friends. I lived with the symptoms of colitis and the myriad of mental, emotional, expense, and physical problems for 17 years. Each year I clung to the hope that the prescribed medications would soon have the desired outcome. To no avail. The result was an ileostomy which changed my life dramatically. It was a renaissance.

The Gutsy Walk is a vehicle for me to grow and promote an awareness and understanding of this debilitating disease. It is a venue to support others suffering and an opportunity to assist in raising needed funds to support research projects. At this time there is no cure, but I hope my legacy will be to contribute to find a cure and stop the suffering.

GUTSY WALK
FOR CROHN'S AND COLITIS
CROHN'S AND COLITIS CANADA
It takes guts to make it stop.

Join me on June 7th and together we can make it stop. For life.

www.gutsywalk.ca