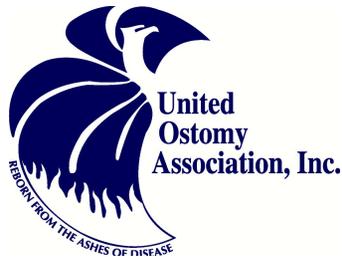


UOASL MEETING SCHEDULE



Nov 14* St. Luke's 2:00PM -Institute of Health Education,
"Are You Prepared?" Living with an Ostomy Rm 1&2
Colleen Cole, RN WOCN

Dec 5 St. Luke's 6:30PM -Institute of Health Education
HOLIDAY MEETING - Lower Atrium & Auditorium

For more information call: Bill Lawson, 636-256-7703 or
Betsy Naeger, 314-725-1888

**Any articles welcome for consideration:
personal experiences, health, obituaries, find a pen pal, etc.**

Publication Deadline: November 25, 2005

Send articles to: Mary Beth Akers
949 Chestnut Oak Dr
St. Charles, MO 63303
636/916-3201
marybethakers@excite.com

Note: Two recommended books provided valuable information for
"Another Side of the Story" on page 3-4.

In The Ostomy Book, Barbara Dorr Mullen and Kerry Anne McGinn,
R.N., present basic information about all three types of ostomies
(colostomy, urostomy and ileostomy), and tips about best ways to return
to good health following surgery and continuing to feel well.

After ileostomy surgery, Maureen Bender wrote A Secret No More
about her experiences as she resumed working, dating and started an
exercise program for ostomates.

LIVE AND LEARN

Fall 2005

President's Message

Hello Member of St. Louis Chapter,

I bring sad news that the United Ostomy Association, Inc., our national organization has ceased its operation as of September 30, 2005. A new United Ostomy Association of America, a new national organization, is already in development, with new leadership and a different financial structure. As the new information becomes available I will make sure the members of our chapter know what is in the pipeline.

Why do we need a national organization?

1. 800 number so that patients can get contact information about local chapters
2. Advocacy at the national level- working with insurance companies and Medicare
3. To address ostomate concerns with product manufacturers
4. To assist in national fundraising for a. Youth Rally Camps & National Conferences
5. Develop a "state of the art" web site

It was a great experience to be involved in the national UOA and I am sad to see it end, but I think the new UOAA will help ostomates, and that is our main mission.

Mary Beth Akers, LeeAnn Barcus, Elizabeth Burris, Kate Lobstein & family, Paul Mollet and his wife, all attended the Anaheim conference in August. I want to thank them for their help at the meeting, they helped being moderators, and speakers. Thank you all.

Please start thinking about the annual **Holiday Party, December 5th at St. Luke's**. Put in on your calendar, it is always a lovely evening.

Hope to see you soon.

Susan Burns, President

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RELAY FOR LIFE - ACS

The UOASL team of Bill Lawson, Lee Ann Barcus, Bob and Ginny Mattingly, Walter Fussner, and Herb Boerner participated at the Laumeier Sculpture Park on June 24-25th. Hank Thill, Carl Meyers and Eleanor came to participate in the Survivors' Lap.

The purpose is to raise funds for the ACS. Our team of 6 raised about \$1500 and had someone on the track all night until dawn. They also received a prize for the innovative project they did to represent their team at the relay.

It is a great way to raise funds for helping those with cancer as well as to fund research. For us, it is a great time to gather with friends, make new ones, and remember that we are survivors.

Relay for Life represents our hope that those lost to cancer will not be forgotten, that those who are battling cancer will be supported, and that cancer will one day be eliminated.

If you would like to join us or sponsor us in the upcoming year, contact Bill Lawson at 636-256-7703.

Have you thought lately about what your local UOASL chapter does for you?

Let us take a moment to refresh your memory.

Your annual dues of \$7.50 helps pay for the following:

Live and Learn – Quarterly publication

Meeting notices/Meeting refreshments

Telephone Book listing for UOA

Visitation Program

Speaker at Product Fair

Office Supplies

Brochures/Literature

Banquet cost above what is charged

Sending Youth to the Youth Rally

Indigent Fund

Honoring the WOCN of the Year

Don't we do a lot with a little? Our Chapter is alive and strong. Consider attending a meeting soon.

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Rolla Satellite News

For meeting dates, times, and place, contact:
Retta Sutterfield RN CNS CWOCN
Phelps County Regional Medical Center
Rolla, MO 65401
retta@fidnet.com 573-458-7688

United Ostomy Association's Annual Youth Rally **The rally will continue!**

Thanks for your continued support. We hope to have quotes from the Thank You letters the kids wrote in the next issue.

As always, I had a wonderful time. There were 94 youth from across the country including a group of 7 from Hawaii. I coordinated airport duty again and all arrived and departed safely.

The rally was a rousing success and work was begun immediately after its conclusion to find a way to sustain the opportunity for future youth.

Mary Beth Akers, UOASL, Youth Rally Chair 636-916-3201.



2005 UOA National Conference

August 3-6
Anaheim, CA



SAD ENDINGS AND NEW BEGININGS

By: Paul W. Mollet

I would first of all like to thank my St. Louis Chapter for giving me the opportunity to attend this year's UOA National Conference. It was a very rewarding experience for me. It was the first time since my accident nearly five years ago that my wife and I were able to get away together. It really gave us the time to talk to so many people that have had similar experiences.

As I sit here today and reflect back on those few days back in early August I still am amazed by the genuine kindness and sincerity of the people that we met in Anaheim. I remember the words of our president as we were sitting around a table at one the banquets. She said, "Look around. What do you see?" She said we definitely have a diverse group of people here, but when we all get together we are just one big family. This is so true. I don't know what it is, but just being together makes you feel better.

The conference was filled with so much information, emotion, and personal experiences, it was almost overwhelming to take it all in. As we all know it was determined before the conference that the UOA would be shutting down after 43 years of support. With the sadness of the ending of UOA there was also the excitement of a new organization the UOAA.

I went to the session on New Beginnings and came away with such a positive outlook for our future.

Again I would just like to thank my chapter for their support.

It was an experience that will never be forgotten.

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Memorial

Lisa Caraffa, former member, Visitor Training presenter, Vice President and Board Member, Young Adult group moderator, psychologist working with children and friend to many, died August 25, 2005.

Please let us know if you hear of any others.

VISITING SERVICES

Upon request from you, a Doctor, a Nurse, or an Enterostomal Therapist (Wound Ostomy Continence Nurse): A **VISITOR**, who has been specially trained will be sent to visit an Ostomy patient, either Pre-Op or Post-Op. The visitor will be chosen according to the patient's age, sex and type of Ostomy. There is **NO CHARGE** for this service and **WE DO NOT GIVE ANY TYPE OF MEDICAL ADVICE**. We only show the patient that his/her operation is not the end of the world, but a **NEW** pain free beginning to life again.

For a visitor or info on being trained, call Betsy Naeger, 314-725-1888.



Some of the St. Louis contingent
at the conference in Anaheim.

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UOAA Info

While the board has yet to vote on whether or not we will affiliate with the new organization, we wanted to tell you some of what it offers.

It will do all that Susan indicated in her President's Message.

*Already it is incorporated as a non-profit organization in the state of New Jersey. That means it is tax exempt and donations are tax deductible. As an affiliate, we would receive the same under their umbrella.

*The production of the new magazine THE PHOENIX has begun and all who currently receive the OQ will receive a complimentary copy of the first issue in December or January. You will then be invited to subscribe to the magazine for \$25 which will be paid direct to the publisher. UOAA will then receive half of your subscription price for operations.

*There is a website in construction at www.uoaa.org as well as the previous one being left in operation for a year. All national

publications can be downloaded and printed from the site – www.uoa.org

*The new advocacy hotline is advocacy@uoaa.org

*The Youth Rally has also already incorporated and is in process of receiving its tax exempt status as well. It will be in San Diego in 2006. The new website for the rally is www.rally4youth.org

*Conferences will continue to be held. In odd years there will be a National conference. In even years, there will be Regional conferences.

*The new organization will be affiliated with chapters, not individuals. The local chapter will join, paying dues based on its own membership numbers. Local chapters will not pay anything for the first year. Dues will begin January 1, 2007.

*The UOAA will remain affiliated with all the related support groups and networks as UOA was.

* A complete constitution has been sent to chapter officers. This covers the structure and bylaws of the new organization. If you have any further questions, contact an officer or board member.

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ANOTHER SIDE OF THE STORY

Lynne Rich, Ph.D., Via: Hemet-San Jacinto Stoma-Life

If anyone walked a mile in the shoes of an ostomate, how would they feel? Maybe a little tired, but their ostomy would work just fine, thank you. What does having an ostomy mean to you? Survey says: good health, no pain, belonging to a group of strong, caring and compassionate people—ostomates, savvy individuals who've learned how and where to get and share knowledge, help, humor and hope.

Okay, there hasn't yet been a comprehensive survey. Are you living as actively as you'd like to? If not, Why? An ostomy is merely tissue that's been surgically relocated and designed to function smoothly. If ever temporarily an ostomy doesn't work correctly and trouble free, it may only need a little extra attention and care. You and your ostomy deserve the time necessary to be taken care of really well. After that, let your heart and brain take charge. Living through health problems that led to ostomy surgery, you no doubt gained strength and fortitude. Your ostomy won't break and neither will you. You might develop feistiness

and greater determination. You may also discover more bad hair days are likely than bad ostomy days especially in a tropical, humid climate, during blustery winters, or in the windiest rainstorms.

If you are not sure whether an activity is medically or physically all right for you to do, before you stop yourself from trying, ask your physician and ET/WOCN if actual medical or physical restrictions prevent you from participating in or learning to: water ski, play the guitar, swim, play canasta or poker, scuba dive, speak Spanish, French or Italian, dance, (ballet, tap, waltz, samba), eat Cajun, sushi, or Greek foods, hike, canoe, kayak, take a trip by car, bus, ship, plane or train, ride a horse, run a marathon, walk 30 minutes, do yoga, golf, garden, sing or laugh. Ostomies don't prevent working, traveling, living anywhere, swimming, scuba diving, hiking, or water skiing. Don't allow inaccurate information or a negative attitude to prevent you from doing what you want.

Adjust your attitude with realistic information. Just as you adapted to the ways your body changed as you were growing up and as an adult too, you can adapt again and resume living as millions of other ostomates have done.

Continued...

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Another Side of the Story (continued)

Learning how to take care of an ostomy is not as difficult as originally learning —earlier than you remember— to walk, or later, perhaps, learning to drive a car, to wear contact lenses or bifocals. Ask questions. Terrific at sharing information, ostomates are resilient, inventive, practical and creative.

At ostomy association meetings, notice how well people look. That's due to deliberate effort and an optimistic attitude. Give yourself the same quality of care you expect from your doctors. Don't ask less of yourself. Having an ostomy might mean better health now, and living longer. Decide each day what you'd like to do. Socialize with other people, or spend time alone. Count on the people most important to you to remain living and supportive. Call people you'd like to see. Let your family and others know when you want them to join you in various activities. Don't think or expect the worst from anyone, including yourself. An ostomy gives you health and options. Consider the Spanish proverb: Living well is the best revenge. Live well!!

SKIN THERAPY FOR UROSTOMATES

Excerpted from an article by Peter W. Shannon, MD South Alameda, CA.,
Via: The Green Bay Ostomy News Review

Dr. Shannon has been a urostomate since 1980 and has had many peristomal skin problems caused from seepage, but, he has found relief for skin problems by using an antibacterial gel—Dial Antibacterial Hand Sanitizer. According to the doctor, this product sterilizes the skin around the stoma. He uses it whenever he changes his appliance. Per Dr. Shannon, “this gel states that it kills over 99.99% of harmful germs in 15 seconds.” Another plus for this amazing gel is that the peristomal skin has never looked better, and the wearing time of his appliance is a day longer than before using this antibacterial gel. By cleansing and sterilizing the peristomal skin, Dr. Shannon claims he has had fewer urinary tract infections. While in the shower, he removes his urinary appliance. This allows him to thoroughly cleanse his skin with soap and water. He then applies the “gel” to the skin, waits 30 seconds, and then rinses off. The gel then comes off easily and leaves the skin “squeaky clean.” After towel drying his body, he is ready to put on a clean urinary bag. The doctor also claims that before using this remarkable sanitizing gel, his peristomal skin was slightly raw and inflamed.

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Good news for ostomy travelers!

TSA ALLOWS OSTOMY SCISSORS ABOARD AIRCRAFT
WASHINGTON, Aug. 30 /PRNewswire

TSA is modifying the interpretive rule to exempt ostomy scissors from the prohibited items list. Ostomy scissors with pointed tips with an overall length of four inches or less are permitted when they are accompanied by an ostomate supply kit containing related supplies, such as collection pouches, wafers, positioning plates, tubing, or adhesives. There are an estimated 750,000 ostomates in the United States. While specific data on the number of ostomates who use air transportation is not available, TSA has heard from individuals with ostomies who say they avoid air travel in part because they cannot carry these particular scissors. Allowing this limited exception to TSA's prohibition on metal pointed scissors removes a barrier to ostomates traveling by air without negatively impacting aviation security. For more information on TSA, please visit our Web site at <http://www.tsa.gov>.

REDUCING YOUR RISK OF PNEUMONIA

Via: Sherman Area & Golden Spread Ostomy Association, Amarilla, TX

Although certain organisms are more contagious than others. It is unusual to “catch” pneumonia from someone else. You usually develop pneumonia because your own immunity is weakened. To fortify your natural resistance to pneumonia; get vaccinated. Because pneumonia can be a complication of the flu, getting a yearly flu shot is a good way to prevent pneumonia. In addition, get a vaccination against pneumococcal pneumonia at least once after age 65 or if your doctor recommends it sooner for your condition. Wash your hands. Your hands come in daily contact with germs that can cause pneumonia. Wash your hands frequently to decrease your exposure. Do not smoke. Smoking damages your lungs’ natural defenses against respiratory infections. Take care of yourself. Proper rest, diet, and moderate exercise can help keep your immune system strong. Although most cases of pneumonia do not prove fatal, you do not want to mistake pneumonia for a cold of flu and leave it untreated.

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COLOSTOMY AND CONSTIPATION

Via: Greater Cincinnati, Metro MD & Vancouver Ostomy High Life
Way back before surgery, did you go to the bathroom after a hot cup of coffee, milk, cold juice, whiskey or beer? Well, whatever made you feel that need then can make you feel the need now. Check it out. See if your irrigation can be helped by some of the things you used to do. Of course, if you have had your colostomy for a number of years, your previous habits may not be the same now. Your body can, however, be trained as it was before, and you can adapt yourself to certain habits which can help you to be in control. A glass of hot water or juice, or a cup of coffee before a morning irrigation may initiate gut reaction. Also, a glass or two of water, after the water return starts, is usually helpful. If you irrigate before going to bed, a glass of ice water or a cup of hot coffee should get you started. If you have not drunk much water during the day, it would be wise to drink an extra glass or two to make sure your tissues will not absorb so much, or you may be left with little or no return. But what if you don’t irrigate? Part of the difficulty in elimination of waste matter experienced by colostomates is due to lack of bulk in the diet. Consumption of white bread, pastry and highly refined foods does not provide the roughage and bulk necessary for proper evacuation of the colon. The deficiency can be overcome in part by the simple addition of bran to the diet. Bran can be made into muffins adding raisins and molasses to taste.

Diet. There is no such thing as a colostomy diet. A colostomy is not an illness, so try to eat the same foods you have eaten and enjoyed in the past. If you are on a diet for a condition such as diabetes or high blood pressure, of course you should stay on that diet. Foods can be acidic or alkaline, bland or spicy, laxative-like or constipating. Individuals react differently to food. Try to return to your former, normal diet. Those foods which disagreed with you in the past may still do so. Chew well and see the effect of each food on your colostomy output. To maintain good health, the body requires carbohydrates, proteins, fat, minerals and vitamins. Water is not nutritious but is absolutely necessary. Having a balanced diet is a fitting way to maintain good nutrition and keep bowel activity normal. Every day your body needs meats or fish, dairy foods, vegetables and fruits, cereals and bread, and liquids. Talk to your physician or ET nurse if you have problems.

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SOME ILEOSTOMY DON'TS

Via: Ostomy Spotlight, UOA Oshkosh, Wisconsin Chapter & Chambersburg Good News Helper

Don't fast. Fasting can lead to serious electrolyte imbalances, even when adequate fluid intake is maintained. *Don't limit fluid intake.* Ileostomates are always slightly dehydrated due to the constant outflow of fluids, so maintaining fluid intake at all times is a must. *Be cautious about giving blood.* A constant state of dehydration places enormous stress on the kidneys when blood is given. Serious damage can occur. Giving blood is not recommended practice for Ileostomates, but if you want to do it, consult your own doctor first. *Don't eliminate salt from your diet.* Because salt is also lost with the fluid outflow, even those with high blood pressure should not eliminate salt altogether. Consult your doctor for your recommended mended salt intake when other physical problems are a consideration. *Don't put anything in your stoma.* *Don't allow anything to be put in your stoma without your own doctor's personal supervision.* Doctors have sometimes incorrectly given routine orders in hospitals— for enemas, for example. Question any procedure that intrudes upon the stoma, including suppositories. *Don't take any medication unless you know it will dissolve quickly and be fully absorbed.* Before filling new prescriptions, be sure to ask your pharmacist whether or not it will dissolve in the stomach quickly. Coated and time-release medications will not be absorbed and will pass through without benefit. If in doubt, purchase only six pills and try them before getting the rest of the prescription. Women should be especially alert when taking birth control or estrogen replacement medications. *Don't take any vitamin B-12 product for granted.* Have your doctor check your B-12 level whenever you have a blood test taken. Some Ileostomates with short bowels may require B-12 injections when they do not absorb enough of the vitamin.