Hi everyone,

I hope you all had a great summer! I definitely have had an eventful summer with this pregnancy. See the included article on page 8 about my pregnancy with an ostomy.

This month we will be having an ice cream social. Ice cream and drinks will be provided, but everyone needs to bring a topping!

Also, if you haven’t done so already, it is time to renew your membership. Please see the form on page 10 for more information.

Our next meeting is Tuesday night September 7th at 7:30pm. Please join us for the first meeting of the 2010-2011 year.

See you on Tuesday!
Jennifer Higdon
MEETING INFO:
Meetings are held the first Tuesday of each month (except July and August) at 7:30 PM in the Rex Surgical Center Waiting Room, 4420 Lake Boone Trail, Raleigh, NC. Enter through the Rex Hospital Main Entrance, which is near the Parking Garage.

REMINDER:
In the event of inclement weather on the day of a scheduled meeting, please contact Rex Healthcare at 919-784-3100. If Wake County schools are closed due to weather, then we will not meet.

GROUP OFFICERS AND CONTACT INFO:
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MISSION of the Triangle Area Ostomy Association:
The mission of our organization is to assist people who have or will have intestinal or urinary diversions: including a colostomy, ileostomy, urostomy, and continent diversions including j-pouches. We provide psychological support, educational services, family support, advocacy and promote our services to the public and professional communities.

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CALENDAR OF EVENTS:
- Sept 6 Labor Day
- Sept 7 UOAA meeting, Rex
- Sept 20 CCFA meeting, Rex

MINUTES OF THE JUNE 1, 2010
MEETING OF THE TRIANGLE OSTOMY ASSOCIATION

After delicious refreshments provided by Carolyn and Cy King were enjoyed by everyone, President Jennifer Higdon opened the Triangle Ostomy Association June meeting at 7:45 PM in the Rex Surgical Center waiting room. 25+ members and guests were welcomed and Jennifer thanked the members for the checks she and Reuben Gradsky had received for their team, Juicy Toots, in the upcoming CCFA Take Steps Fundraiser Walk. Jennifer and Reuben were wearing bright yellow t-shirts with “Juicy Toots” on the front and invited everyone to walk with their team.

After introducing George Malindyak, whose wife has a recent ileostomy and is still in rehab, Jennifer asked if anyone had any issues to discuss. She also reminded members that annual membership dues were due in September and could be paid to Ruth Rhodes, Treasurer, at any time.

Stephanie Yates announced that our guest speaker, Terry Kuczynski, counselor at Rex Cancer Center, needed no introduction and could just introduce herself. After much laughter, Terry thanked Stephanie for her introduction and asked members and guests to introduce themselves and say what type of ostomy they had, how long they had had their ostomy, and the reason for their surgery. She then talked about ostomy issues and said one of the main issues is feeling vulnerable. A general discussion followed. As always, Terry was very entertaining and informative.

Ruth Rhodes stated that Dot Hoover had been hospitalized with pneumonia but that she is home and doing much better.

Jennifer shared a couple of tips to end the meeting and wished everyone a good summer.

The meeting was adjourned at 8:50 PM. There will be no meetings in July and August and we will have an ice cream social at the September meeting.

Respectfully submitted,
Bonnie Sessums
MEMBERSHIP DUES ARE DUE!

Dear Chapter Member: It is time to renew your chapter membership for the Triangle Ostomy Association. Your dues help us to provide chapter services and programs such as newsletters, meetings, a patient visitation program, etc. to serve patients and their families in our community.

Please pay at the September 7, 2010 meeting or if you won’t make it, then mail your check payable to: Raleigh Chapter-UOAA to Mrs. Ruth Rhodes, 6616 Rest Haven Drive, Raleigh, NC 27612-2167. Call Ruth with any questions at 919-782-3460.

Dues Amount: $20.00 Member name: Spouse:

Address: Zip: Phone: Email:

Type of ostomy: Year of surgery:

The recent Icelandic volcano eruption has disrupted air travel for many days, and at this point there's no end in sight to the disruptions that this natural disaster has caused. What does this have to do with ostomy supplies, you might ask? Well, the fact that air travel is so easily disrupted by a single natural disaster shows just how connected our modern world is. Events on one side of the world can cause chaos on the other side, famines, and disorder in supply lines. Just look at the effect of this year's earthquake on the country of Haiti. It will be years before that poor place will enjoy a semblance of normalcy. Even though you may not live in a part of the world prone to earthquakes, or tornadoes, floods, wildfires, hurricanes, or other natural disasters, hiccups in the supply chain can occur anywhere. If you have an ostomy condition that requires you to wear colostomy bag, I'll bet you don't want to run out of any of the supplies that you use daily.

Fortunately, with the advent of the Internet, it's possible to order all the ostomy supplies you need on a regular basis and have them delivered to your home. But, suppose there's a strike by UPS workers, or cargo pilots and you can't get your order delivered to you? Because your health and continued well-being are too important to take chances with, you need to be sure that you always have an adequate supply of everything that you need, just in case you can't get them through your regular channels. That's the thing about any medical condition that's permanent. You have to deal with it every day. As long as you live, it's going to be there. Just like a diabetic needs regular doses of insulin, someone who's undergone an ostomy will need colostomy bags and the other accessories that come with one.

While it's good to have the peace of mind from knowing that you have all the medical supplies that you need, there are other advantages to planning ahead with regularly scheduled orders. For instance, if you're placing a regular order month after month, you should be able to get a discount. If you're not, then you need to shop around and find another supplier for the things that you order every month or two weeks, or however often you choose to schedule your deliveries. Just because you have a chronic medical condition, it doesn't mean that you have to be taken advantage of.

Do your research and try to find the best source of medical supplies you can find, whether it's a local store with good prices and friendly service, or an online company that specializes in the products you need and can supply them cheaper than any storefront because they deal in such huge volumes of merchandise. While it's nice to have the personal touch with local business that you've established a relationship with, there's also something to be said for getting the biggest bang for your buck.

Choose to schedule your deliveries. Just because you have a chronic medical condition, it doesn't mean that you have to be taken advantage of. Fortunately, there's a strike by UPS workers, or cargo pilots and you can't get your order delivered to you? Because your health and continued well-being are too important to take chances with, you need to be sure that you always have an adequate supply of everything that you need, just in case you can't get them through your regular channels. That's the thing about any medical condition that's permanent. You have to deal with it every day. As long as you live, it's going to be there. Just like a diabetic needs regular doses of insulin, someone who's undergone an ostomy will need colostomy bags and the other accessories that come with one.

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If you have had a colostomy operation that requires you to wear a colostomy bag most of the time, just think of all the bags and other supplies you'll go through in your, hopefully, long and busy life. Over the course of a lifetime, even a modest savings on supplies can wind up saving you a bundle. Of course, even if you're trying to save money, always go for the best products. Where your health is concerned, it just doesn't make sense to skimp on necessities. So make sure that you have plenty of ostomy supplies, just don't pay too much for them. Shop smart and plan ahead.
Antacid Users Beware
by Elizabeth Smoots, M.D. via UOAA 8/2010

Almost everyone has indigestion occasionally, and it is probably all right to take an antacid pill now and then; but many health authorities warn that taking antacids regularly may not be wise, especially for ostomates. Here’s why:

- **Magnesium hydroxide** causes diarrhea and reduced absorption of vitamins and minerals.
- **Aluminum hydroxide** causes constipation, reduced phosphate levels leading to fatigue, poor appetite and bone loss. It also contains aluminum which has been linked to Alzheimer’s disease.
- **Calcium carbonate** may cause acid rebound where, when the antacid wears off, stomach acid suddenly shoots up. It may also cause constipation, a potential disturbance in the body’s calcium and phosphate levels called milk-alkali syndrome, which in turn may lead to nausea, headache, weakness and kidney problems.

All antacids may reduce absorption of certain medications such as iron, digitalis and tetracycline. Many antacids contain lots of salt, which can elevate blood pressure.

Prepare for Take-off: Steps for Security Simplicity

Body Scans
The newest technology to increase airline security is the development of full-body scanning, which allows TSA (Transportation Security Administration) personnel to see a detailed image of your body under your clothing, as well as anything you may have attached to your person. For people with ostomies, the thought of someone viewing their ostomy pouching systems, catheters, urine leg bags, and other devices is embarrassing to say the least. Unfortunately, this invasion of privacy cannot be avoided, but there are steps you can take to minimize your discomfort:

- Cooperate and explain that you’re wearing an ostomy device
- Make sure your pouch is emptied
- Ask to be searched in private by someone of the same sex
- Send complaints to TSA if you feel your privacy or rights have been violated in any way

Carry-Ons
The good news is that flying with your ostomy pouching system and supplies has gotten much easier. Gone are the days of tight restrictions on medications and gels. Familiarize yourself with the following points before you pack for your next trip and check www.tsa.gov before you leave to make sure requirements haven’t changed:

- Scissors of four inches or less are permitted when they are accompanied by other ostomy supplies
- If you need bottled water on the aircraft to irrigate your pouch, simply purchase the water in the boarding area after you go through the security checkpoint
- You may carry on liquid medications, gels, and pastes; however, if they are greater than three ounces you must declare them separately for further inspection
- It is recommended, but not required, for passengers to bring along any supporting documentation (ID cards, letter from doctor, etc.)

For more information contact our Customer Interaction Center at
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Monday – Thursday, 8:30 a.m. – 8:00 p.m., ET
Friday, 8:30 a.m. – 6:00 p.m., ET
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#1 Venting Device for all Ostomy Pouches

“I am sure this is just one of innumerable thanks for your Osto-EZ-Vent™. I’ve had an ostomy for over 30 years, since I was 6 yrs. old. As a child my life would have been much easier had it been possible to discreetly release gas, instead of scrambling to find a bathroom, or worse emptying my pouch outdoors behind a tree, or other impossible situations... or as a teen desperately trying to find a way to hide a bloated bag from a girlfriend.

As an adult, this product has helped me beyond words. Incredible that something so simple and so easy to use could make such a profound difference in one’s life. I feel this is the single most important advance in ostomy maintenance.”

Thank you again,
Eric M. PhD
Indiana, PA
Pregnancy and an Ostomy
By: Jennifer Higdon

For those of you that haven’t heard the news, my husband and I are pregnant with twin girls. By the time of the next meeting, we will be 29 weeks along. It has been quite a rough road for us. At 17 weeks, I ended up in the hospital with an abruption and lost 2 liters of blood. We were faced with possibly terminating the pregnancy, but luckily everything got under control. Since that time, I have been on bedrest and am not able to get out and about. At 25 weeks, I had to get steroid injections and magnesium for the babies’ development which landed me in the hospital overnight. Over the coming week, my ostomy output was way different. I was having minimal output and thought I had a blockage, so I started liquids to see if that would help. Unfortunately, this did not help, and my symptoms got progressively worse. Next my output stopped completely, and I was having so much gas fill my pouch, that I had to “empty” it every 10 minutes. Completely abnormal. After about 5 days of this, I started vomiting and went to the hospital. They diagnosed me with dehydration and said that all pregnant women get constipation and gas. HELLO?!?!?!?!?!?! I have an ostomy, and excessive gas and constipation are not an issue. They sent me home. The following day, I continued to vomit and not keep anything down, so back to the hospital we went. This time I notified my GI doctor that we were on our way. He checked me out, ran a stool sample, and found that I had contracted the C-Diff bacteria from the previous week I was in the hospital. This serious intestinal bacteria had caused my intestine to paralyze, hence all my weird symptoms. I was put in the hospital for a week to receive IV antibiotics and liquids while we waited for my intestines to start working again. Finally by day 5, I was able to have ice chips and worked my way up to soup, then was released. Needless to say, I’m still on bedrest and trying to find ways to occupy my time.

As for pregnancy and having an ostomy, I now have to have my husband hold a mirror, so I can see my stoma as I change my pouch. Additionally, I have to cut the hole in the wafer larger since my stoma has swollen/grown for now. Aside from that, my ostomy hasn’t posed much of a problem (knock on wood).

Urology Concerns

Germs are all over the world, but when they are in the urinary tract, either in the conduit, the ureters, or the kidneys, they are in an abnormal location, and that is what causes an infection. What causes infection? Mostly, the reasons are unexplainable. Why do some people get more colds than others?

Infections can be caused by obstructions, kidney stones, tumors, cysts or scar tissues. Almost synonymous with obstruction is infection, and then too often comes stone formation. Once you have stone formation, it’s hard to get rid of the infection. It’s a kind of a cycle that goes around and around.

Infection can be caused by urine being forced back to the kidneys through the conduit. This could happen if you fall asleep with the pouch full of urine and accidentally roll over on the pouch, causing urine to be forced back through the stoma and the urinary tract with tremendous pressure. Invariably, the urine in the pouch is contaminated.

In general, to prevent and treat infection, you need a good flow of urine, much like a stream. That not only dilutes the bacteria or germs in the urine but also helps wash them out. Two and one-half quarts of liquids daily are required for the average adult. Night drainage is a MUST. Otherwise, you run the risk of urine backing up into the kidneys which can cause irritation or infection. This is especially important for urostomates with only one kidney.

It’s important to be aware of the symptoms of a kidney infection: elevated temperature, chills, low back pain, cloudy urine, or decreased urine output. People with ileal conduits normally produce mucus threads in their urine which give a cloudy appearance, but bloody urine is a danger sign. You must see your doctor if any of these symptoms occur.
On June 5 the CCFA held their Raleigh walk-a-thon at Lake Crabtree Park. Our own members Reuben, Jennifer, and Mary Ann were in attendance for this event.

Our team name was “Juicy Toots,” and we won the award for best name. As the pictures show, we used the logo from “Juicy Fruit” gum as our t-shirt inspiration.

Our team raised $8,000 and ranked 2nd place among all the teams for top fundraising. Additionally, Reuben was the overall 3rd highest fundraiser and Jennifer was the 5th highest on an individual level.

In all, this event raised $75,000 toward research of Crohn’s and colitis. Reuben and I again want to thank the Triangle Ostomy Association and their members for their donations and support of this event.