



Ostomy | Société
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Society | Personnes Stomisées

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Vancouver Ostomy

HIGH *Life*

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REMAINING 2017 MEETING SCHEDULE:

**SATURDAY
September 23**

1:30 PM (AGM)
Speaker Rob Hill, "AJ"
from InnerGood

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North Shore
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Another Great Week at Ostomy Youth Camp!

- by Sandra Morris, Ostomy Youth Camp Coordinator, Vancouver Chapter

The week at Camp Horizon is always a special time for the children who come from across Canada to the Ostomy Youth Camp in Alberta. While they all are living with some form of ostomy, first and foremost, they are regular kids who enjoy having the opportunity to get together and experience regular camp activities. The facility has a pool, an archery range, an art studio, a rock climbing wall, a high rope adventure course, and the 'giant swing'. They also go white water rafting, hiking, and biking. Highlights of the week include a dance and an overnight campout. This summer the Vancouver Chapter sponsored 8 children to attend camp. There were no last minute cancellations this year. For several summers, one or two campers have had to cancel just prior to camp, which is not surprising given their ongoing health issues. We were glad they were all healthy and strong enough for camp.



The BC contingent, YEAH! These are the kids you helped send to camp this year.

Ostomy Canada contracts with Easter Seals, which operates and manages the camp. This was the third year that Ostomy Canada shared the camp facilities with Crohn's & Colitis Canada. Three years ago the camp expanded to accommodate 90 campers, up from 65 prior to the renovation. The larger cabins provided the opportunity for the organizations to share the space for their respective campers. This is a good fit, as several of our campers are dealing with IBD (inflammatory bowel disease) and some of their campers have ostomies.

Also for the third year, the campers were divided into groups by gender. In previous years, groups were designated by age, and included both girls and boys. Some of the campers, especially the older ones, have suggested that mixed groups would provide more diversity and opportunity to socialize. Many of the kids say the most important part of camp is being in a place where they feel they can be themselves. All the kids are dealing with similar issues, and for many it's the first time they don't feel alone. The younger kids

cont. page 19



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newsletter are not necessarily endorsed by
the Ostomy Canada Society and may not be
applicable to everybody. Please consult your
own doctor or ET nurse for the medical advice
that is best for you.*

From Your President

I hope you all had a good summer and welcome back to those who have been on holidays! I hope none of you were adversely affected by the forest fires that raged this summer. A shout out goes to our fellow ostomates and their loved ones in the interior; we hope you made it through all right.

Our lead article this September issue is, as always, the Youth Camp which was a great success once again for the 8 kids our chapter sponsored. Thanks to all the kids, their parents, and Lisa Gausman in Calgary for sending photos. Thanks, as always, to our tireless Youth Camp Coordinator Sandra Morris and thanks to YOU, for your kind and generous donations that make Youth Camp possible.



This little girl's mother receives instruction from a CHAASTA volunteer in how to apply a flange.

All donations you specify for the Youth Camp go directly to that cause. But did you know that money donated into our general revenue helps assist children (and adults) in other countries? The Vancouver chapter ships donated ostomy supplies to the Friends of Ostomates Worldwide collection centre in Calgary, from where supplies are sent around the world to ostomates in less fortunate circumstances. Shipping of these supplies is one of our major expenses so we thank everybody who donates to general funds. Friends of Ostomates Worldwide Canada is a non-profit organization operated solely by volunteers. Since 1986, FOW Canada has collected and sent over 50,000 KG of ostomy supplies and literature to more than 52 needy countries. Here is a list of some countries receiving donations: Africa, Algeria, Bulgaria, Chili, China, Croatia, Cuba, Dominican Republic, Ecuador, Egypt, Hungary, India, Indonesia, Iran, Iraq, Jamaica, Malaysia, Mexico, Nigeria, Pakistan, Panama, Philippines, Romania, Russia-Belarus, Santo Domingo, Thailand, Vietnam and Yugoslavia. FOW gratefully accepts monetary donations as well as supplies. Visit their website at: <http://www.fowc.ca/>

The photos you see here are from a video produced by one of the volunteer groups FOW endeavours to help, CHAASTA Organization, in Tanzania. The children here are from two different villages, accessible only by ferry and bad roads, essentially a two day journey. Their parents are being taught how to use the ostomy appliances, without which they have to resort to wrapping their children in cloths which must be changed and washed continually throughout the day. The availability of ostomy appliances, while tenuous, is at least possible due to the efforts of organizations like CHAASTA, FOW, chapters such as ours, and donations from you. Photos are from the CHAASTA video on the FOW site. Sorry the quality isn't better.

Our AGM is Saturday September 23, I hope to see you there!

Debra



Wrapping a child in cloths -- the only alternative when ostomy supplies cannot be obtained.



Although this little boy's bag is clearly meant for an adult, he is one of the fortunate few who have some access to proper supplies.



THANK YOU FOR YOUR SPONSORSHIP

Dear Debra,

We want to thank you for your cheque covering the camp registration fee for the campers you are sponsoring. It is through your generous contribution that Ostomy Canada Inc. is able to further its services to the young ostomates by allowing them to participate in their camp experience. Please find enclosed a receipt for the registration fee. We appreciate your support, thank you.

Sincerely, Ann Ivol, President, Ostomy Canada Society

Editor's Note: And thank you to all the individual donors who contributed so kindly to our Youth Camp fund this year! Every single dollar you donate to the Youth Camp goes towards sending these wonderful kids.

LETTERS FROM OUR CAMPERS

Dear Vancouver Chapter,

Thank you once again for letting me go to camp this year! As a camper of 5 years, it gets harder and harder to leave each time. This is because at first camp was simply a place to have fun - after all, there's rafting, archery, night games...we even did an overnight back-packing camping trip! However, this year one of my favorite activities was simply hanging out and talking with the friends I've made. I've always found it hard to open up and tell people about my condition, but camp is the exception because everyone there has or is going through the same things I am. I feel accepted, understood and as if I have nothing to hide - which I don't as I've come to learn that my situation does not define who I am. It's also really inspirational to see past campers come back as volunteers. To anyone that is undecided on whether or not they should come out, do it. I promise you that the memories, experiences and friendships last a lifetime!

- Sarah Kadach

Hello Sandra! Jessica had a great time at camp! We are very grateful for all of your help getting her there ... and back. :)

What did you like the most about camp?

- "I liked going swimming often. And meeting other people like me."

Would you recommend it to other kids?

- "Yes!! Definitely!!"

What were your favorite activities?

- "Swimming, high ropes, and rafting!

Oh, and don't forget Arts and Crafts!!"

What would you suggest to make camp even better?

- "I don't think there is a way to make it better ... other than 'Smore's'." :)

How was the food?

- "Delicious! Except for maybe too much potato."

How was the weather this year?

- "Warm and sunny! And a little chilly at night. And there was some lightning on the first night!"

What were the counselors like?

- "They were funny, kind, and amusing. They made up some really cool camp songs too!"

What were the adult volunteers like?

- "The only adult volunteer I met was 'Mama Purple'. And she was kind, sweet, smart and fashionable." :)

What would you like to say to those who make donations so that we can send you to camp?

- "I would say we really appreciate the donations, because it helps kids meet other kids in some of the same situations. Its nice to meet other kids that understand what I'm dealing with everyday."

Would you go back to camp next year?

- "Totally, yes!!! One thousand percent, yes!!"

And as her parent I was worried about her flying, but that all went well. Hearing all of her stories when she got back, and seeing how happy she felt was wonderful. The crafts they made and the tie-dye shirts were pretty cool! Also, we are very grateful to those that donate! Our daughter had the time of her life (for 5 days) and came back with new experiences. Thank you!!! We also appreciate all you have done to help with all of this! I honestly can't thank you enough, Sandra!!!

We are attaching a few pics for you as well. Please let me know if they don't come through.

Sincerely,

Jessica and Christina.

To: Sandra

From: Happy Camper

1. i really enjoyed rafting, as it was quite relaxing.
2. yes, as it is a great way to be able to talk to others who have similar disabilities and finding ways to cope with them.
3. Archery and rafting.
4. i would recommend getting a better water filtration system as i can't really drink it.
5. Very nice but not always the most healthy.
6. the weather was blisteringly hot.
7. fun..... most of the time... nah, i'm kidding, they are good people.
8. they were quite interesting people.
9. merci!!! i'm really great full for the opportunity to go to camp again.
10. YES!!!!

Hi Sandra,

Jessi had an amazing time as I expected that she would. Thanks for all of your coordination to make this happen. To think that this time last year jessi was in the middle of a long and difficult hospital admission. So grateful that she was able to attend this year.

- Suzanne Campbell



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TIPS FOR PEOPLE WITH ARTHRITIS & AN OSTOMY

Many ostomy surgeries are performed on seniors so it stands to reason that many of those patients will have arthritis to some degree. Canadian statistics show approximately one in three (33.8%) senior males and one in two (50.6%) senior females reported arthritis in 2008.* Stiffness and pain in the hands, neck or back can make caring for an ostomy more challenging.

MAJOR PROBLEMS IDENTIFIED BY PEOPLE WITH AN OSTOMY AND ARTHRITIS ARE:

Gathering together the equipment & getting to private places Wheelchairs and walking frames require two hands, so there are problems moving equipment, especially if an ostomy bag is leaking and one hand is needed to minimize leakage. Solutions include having emergency supplies in a shoulder bag or a bag attached to the wheelchair /frame and keeping spares of ostomy equipment in various rooms of the house (such as upstairs and downstairs).

Stiffness getting on and off the toilet or bending over to empty an appliance An occupational therapist may be of great help to organise railings to fit around the toilet, an extension seat for the toilet or a non-slip chair adjacent to the toilet.

Stiff back or neck preventing bending to see the stoma when changing the appliance A well placed shaving mirror with a hinged frame and a magnifying side may help. Otherwise, sit, lean back and use a mirror on a table in front of you. A two-piece appliance may be easier to change because changing the bag (which needs to be done more frequently) can often be done by feel.

Arthritic hands The major problems have been opening packets, peeling off backing papers, cutting holes, opening and closing clips, using tubes of paste and undoing tops on bottles of ostomy pharmaceuticals. These are areas which have been most improved since 1989. Manufacturers have listened to their customers and provided a wide range of more userfriendly products. To find out which is best for your needs, see an ET nurse or go to an ostomy education day or attend a local ostomy association meeting. Often the representatives of

companies are present and they can advise you. Some appliances still have difficult packaging but others do not - and it is worth investigating to find whether there is a suitable alternative appliance in packaging that you can manage. Similarly with the backing papers some have brightly coloured tabs that are easily seen and manipulated. There are now many base plates and bags with pre-cut holes and the different manufacturers have slightly different sizes, so one of them probably makes your exact size. There are now mouldable products so even those with non-circular stomas may not need to use scissors to customize their holes. Many drainable bags for people with bowel stomas now have integrated closures rather than clips that have to be taken on and off. The integrated closures are soft and simple to use, even if you do not have much strength in your hands. Most pastes now come in soft tubes or you can use a key or paste dispenser, obtainable from a pharmacy or where arthritic aids are sold. Generally speaking, you should simplify all tasks to use the least amount of time, movement and effort, thus minimizing joint pain.

To do this . . .

GET READY decide what equipment is needed and take it all to the work area before you start.

DO THE TASK (ie appliance change) list all the movements you made. Ask yourself, whether it necessary to do all the movements and in that way?

ELIMINATE all unnecessary steps.

COMBINE as many movements and operations as possible.

REARRANGE the order of steps to save movements.

SIMPLIFY all the steps which are necessary. **REMEMBER** to do it the new way next time!

There are many aids available for those with arthritis, sold in pharmacies or the pharmacy section of large chain stores. If you are unsure where to buy a product to help with a specific challenge, ask a physio therapist, your doctor or your ET nurse. The Red Cross is also another source and you may be able to obtain equipment at low or no cost.

* *Stats Canada*

- Adapted from article by Julia Thompson, Stomal Therapist, St Vincent's Private Hospital, Sydney Australia

NEW PATIENTS' CORNER



NOW WHAT?

Your ostomy surgery is finished, and you are at home. For many people, surgery can be the beginning of a more comfortable life. But it still requires adjusting to life with a stoma—physically and mentally.

Although your ostomy surgery is complete, you may still have many questions and concerns—particularly during the first 12 weeks of living with an ostomy. You may feel nervous, confused or angry. You may be excited by the freedom, improved health and new activities you can enjoy after healing from your surgery. Or you may have a mixture of these emotions. All of these reactions are perfectly normal.

You are not alone. Your ostomy nurse and healthcare professionals are there to help you every step of the way.

Your “new normal”

During the first few months after ostomy surgery, it is important to recognize that you and your loved ones will be undergoing a major period of adjustment. Having a stoma means you must adapt to a new “normal” way of life.

Whether you have had a colostomy, ileostomy or urostomy, you will need to learn how to manage the passage of body waste through your stoma, as well as how to care for the skin around your stoma.

For the first six to eight weeks, your stoma will most likely shrink in size. Regular measuring of your stoma ensures you are wearing the correct pouching system size, increases your confidence, and reduces discomfort.

Over time, you will feel much more comfortable with your new lifestyle as stoma management becomes just another part of your daily routine. During this initial adjustment period, however, keep in close contact with your ostomy nurse. The answers to any problems or concerns are usually just a phone call away.

UNDERSTANDING YOUR FEELINGS

Living with an ostomy will take some adjustment. In the first few weeks following surgery, you may find yourself feeling confused, angry, sad or frustrated. These are normal post-surgery feelings and should diminish as you adjust to life with a stoma.

Here are some guidelines that may help ease difficult feelings

Be patient: Don't be too hard on yourself. Some days will be better than others. In time, you will feel like yourself again.

Keep talking: Keep communication open with a loved one and your ostomy nurse. You may find that discussing your feelings makes you feel better.

Try to stay active and in good company: With your doctor's permission, take up a new hobby or get involved with an activity group.

Express yourself creatively: Some people find that writing, painting, drawing or doing other craftwork can be energizing, offer an alternate outlet for difficult feelings, and help focus the mind.

Be on the lookout for depression: Though it is normal to feel sad or “blue” for a week or two after surgery, these feelings should go away as you heal. If these feelings worsen, or you have any of the following symptoms, talk to your doctor or ostomy nurse right away. The sooner you seek help, the sooner you will start feeling better.

Be on the lookout for depression:

- Prolonged feelings of sadness
- Grief
- Hopelessness
- Thoughts of suicide
- Loss of appetite
- Inability to sleep or sleeping too much
- Feelings of isolation
- Lack of interest in activities you normally enjoy

Other “feel better” ideas for your recovery

Become a well-educated consumer: The more you know, the easier it is to make important decisions about your health. Your ostomy nurse is your first resource. You can also find useful information from ostomy support groups and associations. The me+ program is a great place to start.

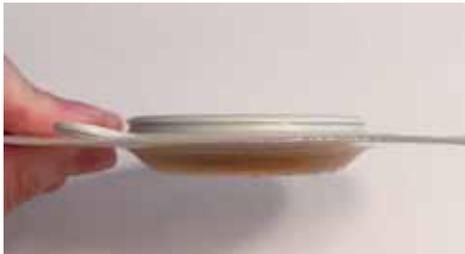
Talk to other people living with an ostomy, as well as their loved ones: Other people successfully living with an ostomy can help you understand you're not alone in your recovery. They may also offer helpful tips, or additional insight into what to expect as living with a stoma becomes normal for you.

Consider joining a local or online support group: Your ostomy nurse or local ostomy association chapter can

make suggestions and put you in touch
- excerpted from "Recovering from Ostomy Surgery" from www.convatec.ca/ostomy/right-after-surgery

What is a Convex Flange and Why Would I Need One?

A convex flange has a raised area around the hole which, when securely stuck to your abdomen, presses down on the area surrounding your stoma, effectively 'raising' the spout up a little. Depending on your surgeon's technique and/or your body type, your stoma once healed may be quite short or even flush with the surrounding skin. Some folks who gain a lot of weight around the



A convex flange, seen from the side. The top part of the photo is where the pouch attaches, the bottom is the raised part that goes next to your skin.

abdominal area my find that their stoma seems to be shorter. It isn't really shorter, it's just recessed as fatty tissue grows around it. This isn't necessarily a bad thing, but if the stoma gets too recessed, a

regular 'flat' flange may not cover the peristomal skin adequately, resulting in waste getting onto the skin. This can be a problem most commonly associated with recessed stomas in those with an ileostomy or urostomy. If your stoma is flush or very short and you are getting leaks onto the skin, you may need to use a convex flange. □

When is the Best Time to Change the Appliance?

Most guidelines will tell you a week is the longest you should keep the same flange on. Some folks can get more than 7 days without skin breakdown, but 7 days is the recommended amount. If you have an ileostomy the best time to do a change without any output is when you first wake up. If you stop eating a few hours before bedtime and get a full night's sleep, output should slow down enough for you to get a change done. If you must eat upon waking but before a change, try a nutrient-packed food that will raise your blood sugar but not cause any immediate output, such as a spoon of peanut butter or a hard-boiled egg. Of course, if your skin can handle the extra wear and tear and you can afford the appliances, you can change more often. Some folks, mostly those with a



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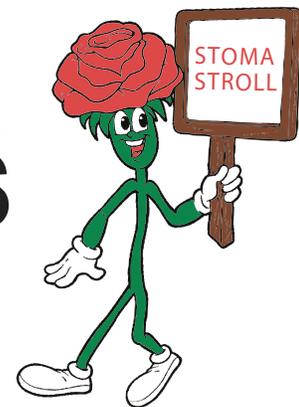
colostomy who irrigate, change what they wear every day.

A good time to do a complete change is when you shower in the morning. You can remove the entire appliance while standing in the tub, and then take your shower bagless. Dry yourself off while still in the tub and have your new change of gear handy to apply right away. If you have a relatively well-behaved ostomy, take your time and let it 'air out' as long as you can. Removing the bag and showering with just the flange on is not advisable as water will inevitably get under it and loosen the seal. □





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Make a hat for your stoma

- Heidi Skiba, *OstomyOutdoors.com*



When I first got my ostomy, I absolutely dreaded changes. They were tear-filled endeavors wrought with frustration because I couldn't get my barrier ring and wafer on without my stoma pooping all over the place and ruining the adhesives. I turned to the internet for ideas to solve this problem and discovered a post on a forum that suggested wrapping the tip of my stoma with a strip of paper towel. I gave it a try and couldn't believe how well it worked! Plus I liked that it made my stoma look like it was wearing a cute hat.



The only supplies needed for a stoma hat are one-inch-wide strips of paper towel.

When it has reached maximum carrying capacity, I simply pop it off, toss it in the trash can next to me, and wrap on another. Along with collecting output, the stoma hat frees up my hands to put on powder, barrier film, and all the other products that I use to protect my parastomal skin. It also keeps the base of my stoma dry as it absorbs some of the moisture from the mucous membrane.



It is easy to slide your wafer right over the stoma when it is wearing a hat. Note that under the wafer, I have already put on my Eakin ring and other materials. If you are using a one-piece appliance, you can still use the hat method. Just pop the hat off right before you put your appliance over your stoma.

This little trick allows me to change whenever I need to as it doesn't matter if my stoma releases output; the hat is always there to catch it. Occasionally, if my output is profuse and watery during a change, the technique doesn't work as well. However it is better than nothing, and if my output is watery, sometimes gulping down a few extra marshmallows will temporarily slow down the flow until I can finish the change.



My stoma, Wilbur, models a stylish poo-catching paper towel hat. To make one, simply wind the paper towel strip around the top of your stoma and you are set to go.

I realize that making a hat for a flush stoma won't work very well, so this trick works best if your ostomy protrudes from your belly a bit.

If you feel your ostomy controls your life and confines you to a certain schedule, keep searching and experimenting to find solutions. I'd never have guessed that something as simple as marshmallows and paper towel "hats" would give me the freedom to live with my ostomy on my terms rather than the whims of my stoma. ☐

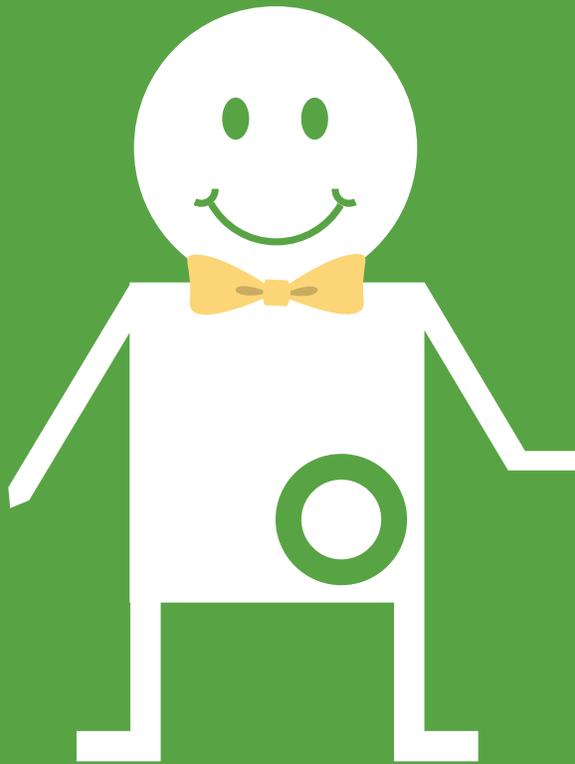


All pouched up with no mess at all. For those who are wondering about the tape job, I love Convatec Durahesive wafers, but the tape irritates my skin. I cut it off and add my own strips of 3M Medipore tape. This combo adheres well through showering, swimming, and all sorts of sweat-inducing sports.

ORIGIN OF SAYINGS Turn a blind eye

The phrase "turn a blind eye"—often used to refer to a willful refusal to acknowledge a particular reality—dates back to a legendary chapter in the career of the British naval hero Horatio Nelson. During 1801's Battle of Copenhagen, Nelson's ships were pitted against a large Danish-Norwegian fleet. When his more conservative superior officer flagged for him to withdraw, the one-eyed Nelson supposedly brought his telescope to his bad eye and blithely proclaimed, "I really do not see the signal." He went on to score a decisive victory. Some historians have since dismissed Nelson's famous quip as merely a battlefield myth, but the phrase "turn a blind eye" persists to this day.





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A Family Journey by Megan Herrett, Boise ID, October 2016, with permission from Inland Northwest (ID/WA) Insider Newsletter

Adequately summarizing what our family has gone through over the past eight years requires going back to the very beginning. Our daughter, Maggie (now eight years old), was three months old when we realized that she looked a little jaundiced. Our pediatrician agreed and ran what would be the first of hundreds of tests to determine what was wrong with our baby and why her liver function tests were so elevated. After being seen by multiple specialists here in Boise for a few months, we were referred to a doctor at Primary Children's Medical Center in Salt Lake City in November of 2008.

When Maggie was about six or seven months old, we noticed that she was starting to scratch quite a bit. Her arms, feet, and ears were covered in scabs and scratch marks. This itching was a side-effect of her liver not processing bile correctly – when not processed by the liver, the bile backs up into the bloodstream and circulates back through the body, resulting in an increased number of bile salts in the body. It is these bile salts in the bloodstream that make an individual with a liver disease very itchy.

At first, we were able to control her itching through several medications but by the time she was 12 months old, her itching had become unbearable. At that time, her liver was deteriorating quickly and she was exhibiting some developmental delays as a result of the incessant itching. In a matter of weeks, she had pulled out all of her hair and she was maxed out on her medication dosages.

We were presented with the option of an ostomy-placing surgery when Maggie was just over one year old, as an alternative to a liver transplant. The purpose of her ostomy would be to (1) drain bile from her body to combat the itching, and (2) slow the progression of her disease by giving her liver a much-

needed reprieve.

To be honest, I was devastated when I first heard the words, "ostomy bag." I imaged a life where Maggie would never wear a bikini or be a cheerleader or be captain of her swim team – all very big concepts when you are talking about a one-year-old child. I imagined her being bullied because she was different. But, we needed a solution...and we needed to act quickly.

Maggie underwent ostomy surgery on October 30, 2009, and we haven't looked back. She is now eight years old and is thriving health-wise as well as academically. Additionally, she is also excelling on a competitive gymnastics team. And although Maggie



Now that's a supportive father: Winston and Maggie's dad has an ostomy bag tattoo

absolutely beams on the outside, she struggles with confidence because of her ostomy pouch. She is fiercely private and does not want any of her peers to know. My husband and I have worked tirelessly to emphasize to her that her pouch is nothing to be ashamed of – after all, it saved her life and she would not be the person she is today without it.

In 2010, we were blessed by the birth of our son, Winston. We soon discovered that he was plagued with the same disease and would then undergo the same surgery when he was just over one year old. Although this news was devastating at the time, we have come to realize that it was a blessing in

disguise. Both of them have the same liver disease and both wear ostomy pouches – commonalities that they can rely on when the going gets tough.

I can still recall my "aha moment" though – that moment when I realized that we would not be a family that sat idly by and let her pouch be a source of shame or embarrassment for her. Maggie was probably two years old at the time and we were in the throes of potty-training, where our previous line of attack of onesies and bib overalls to prevent her from yanking her pouch off, were no longer an option. She was finally in a shirt and a pair of pants... and her ostomy bag was peeking out from the hemline of her shirt as we

left a restaurant. A man entering the restaurant noticed her ostomy pouch and said, "Ewwwww! What IS that?" Although my initial reaction was one of anger and dismay, it was then that I realized that working with her would be only one piece of the puzzle – we also needed to work with the community to help educate, support and raise awareness for those like Maggie so that the shame, fear and embarrassment would fade away to empowerment and pride.

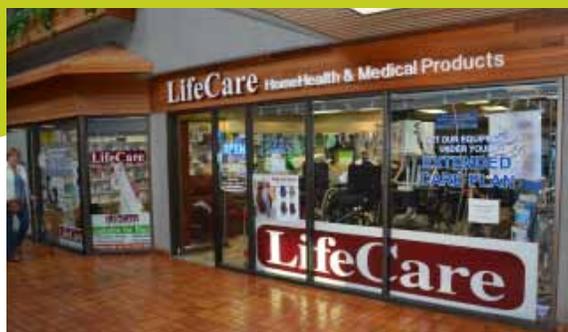
It was this "aha moment" that led me to contacting the United Ostomy Associations of America in January of this year [2016] about bringing their Run for Resilience

Ostomy 5k to Boise. My inquiry was met with a resounding "YES!" We held our inaugural race on Saturday, October 8th and had over 160 people registered for the 5K and Kids' Mile events. We even had participants, including ostomates and ostomy nurses, drive in for the race from Spokane, Washington and Lewiston! And Hollister even donated ostomy pouches to include in our race registration bags. If nothing else, I am hopeful that this year we laid the foundation for many successful years to come and got some ostomy-related dialogue started. Instead of "ewww," maybe people will say, "Oh, I know what that is and that saved their life!" ☐



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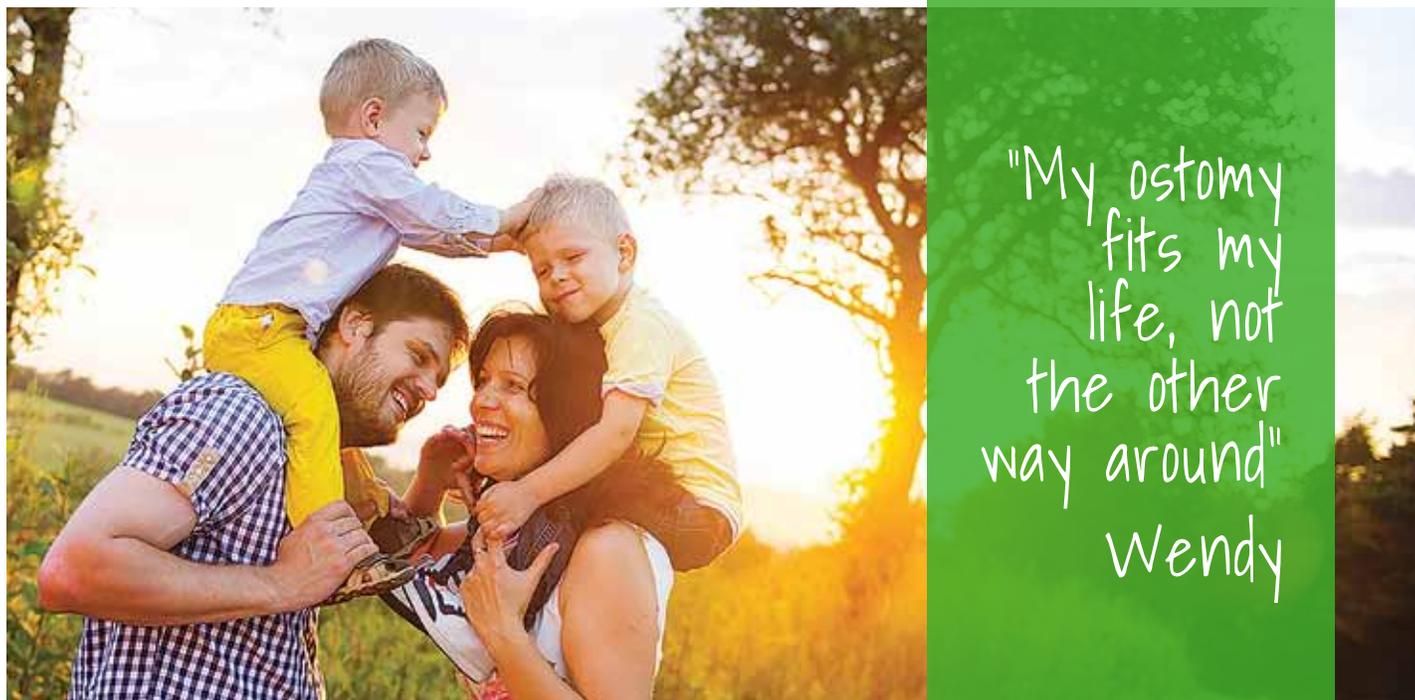
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Loo-sing it

Brits are baffled by the new advert for Airwick's V.I.Poo spray... but those who've tried it claim it really works

V.I.Poo is designed to be sprayed into the toilet bowl before you do your business and promises to prevent dodgy loo smells

By Natalie Keegan

11th May 2017, 1:24 pm Updated: 11th May 2017, 2:17 pm



BRITS have been left baffled by a new advert promoting a spray designed to eliminate toilet odours. Initially launched in the US, Airwick's V.I.Poo hit UK shelves back in March and adverts for the loo-freshening spray have been popping up on radio stations and TVs for the last week. The

product is designed to be sprayed into the toilet bowl before you do your business and promises to prevent dodgy loo smells.

The advert carries the tag line "even a V.I.P needs to V.I.Poo" and shows "Hollywood's latest sweetheart" revealing that even she she has to sometimes "punish the porcelain". Strange, right?

While many Twitter users have tried and tested the spray and deemed it "effective", others have been left completely baffled by the whole thing.

One user wrote: "Did I just seriously just see a product advert named #VIPoo at 8 in the morning can't handle this".

Another added: "Just watched the funniest video... #VIPoo I have seen it all now!!!"

Some even guessed the whole campaign was a joke.

One person said: "I really thought this was a joke when I first heard the advert but no Very Important Poo is a real thing. #vipoo" □



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get to see how the older ones cope and manage as they become teenagers and young adults. A highlight of the week is the Magic Circle, where the kids can open up about their own experiences and share some of their struggles, in a safe, supportive environment. The support they receive from the counsellors, ET Nurses, Adult Volunteers and, most importantly, the other campers fuels their self-confidence and builds self-esteem.

Although camp is only for 6 days, the kids stay in touch throughout the year, often texting or on Facebook, so their mutual support lasts long after camp ends. And when the next summer rolls around, they're anxious to meet up with their old friends and meet the new campers.

It costs about \$1,100 to sponsor a child to attend camp. Camp registration fees are \$620 and return airfare to Calgary was just under \$500. All funds are provided by the Vancouver Chapter, through our Wendy Irvine Youth Fund. This fund is made up of donations from our members, their families, and others who recognize the enormous benefits the kids receive from attending camp. All donations, large and small, make a difference. If you would like to help to sponsor a child to attend camp in 2018, we welcome your donation!

There are several donors who have helped us out for many years. We continue to receive a very generous donation from Jennifer Irvine, in memory of her sister Wendy Irvine who was one of our previous campers.

Major donations were received from our long-time supporters in the Fraser Valley, including the Dungeness family, and Doug Crowe and his wife Daphne. The Chilliwack & Area Ostomy Association continues to be a huge supporter, as they have for many years. And for the second year in a row, a substantial donation, organized by one of our Chapter members, Cec Rempel, was gratefully received from the Kiwanis Club of Sardis.

The campers and their parents are extremely appreciative of the opportunity to attend camp and thank the donors for their generosity. More than anything I could write, the notes they send us demonstrate how important camp is to them. (Check out the Letters & News section for a sampling of their feedback).

Many of the kids say that camp has changed their lives. Because of this, we believe the Ostomy Youth Camp is one of the most important programs provided by Ostomy Canada, and supported by the Vancouver Chapter and other Chapters across the country. □

cont. page 22

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Techie Corner

Many seniors are getting into the computer age with computers, laptops, tablets and smartphones. Whatever device you use to get connected with your friends, family and the rest of the world, they all need a good cleaning once in a while and they hate liquids being spilled on them!

Windex is [not] Best For Cleaning Your Monitor or Screen

Windex is great for cleaning windows, car windshields, and various types of glass. It's also good at cleaning gunk off of PC monitors, the problem is it's too good. That's because Windex contains ammonium hydroxide (ammonia), a pretty adept cleaning agent that can strip away your monitor's anti-glare coating (if it has one) and cause clouding. The same is true of alcohol-based cleaners—steer clear from these.

Depending on your panel, you should also avoid paper towels. They're too rough and can scratch your screen if you're not careful.



The best way to clean your monitor/screen is with compressed air and a microfiber cloth. Use the can of air to blast off any loose dust particles while being careful not to tilt the can, otherwise it will spray out liquid (you don't want that stuff on your skin, either). Follow that up with a few wipes of the microfiber cloth. If there are stubborn spots of dust that have collected and hardened on your monitor, lightly dampen the microfiber cloth with distilled water, such as AquaFina, and very gently scrub in a circular motion. That should be enough to clean most panels, but if it's extra gunky, you can dilute the distilled water with white vinegar (use a 50/50 solution). The same recommendations apply to tablets and smartphones.

OMG!!! I spilled coffee on my tablet!!

Don't panic.

If you do accidentally spill liquid on the tablet:

- Turn it off at once and if it's charging, unplug it.
- Position it so that the liquid can run out and leave it to dry for at least a day.
- If the tablet does not boot after it has dried out, take it back to where you bought it. Sometimes they can be repaired. □

ASK THE ET

- Ottawa Ostomy News, September 2016 (Answers provided by Cathy Downs, ET)



Question: *Is it possible for my stoma to grow? I am having to cut the hole bigger to make room and the edges are painful.*

Answer: It is possible for a stoma to change size and shape, particularly if you gain a significant amount of weight, or if you develop a Peristomal hernia. However, the stoma itself does not feel pain, and as such your description makes me think you may have another problem entirely.

Sometimes, when the skin around the stoma is exposed to effluent (stool or urine) for prolonged periods of time, the skin becomes irritated and inflamed. If this area continues to be aggravated by effluent, it eventually starts to hyper-granulate in an attempt to heal itself. This hyper-granulation looks like reddened bumps that are moist and the same colour as the stoma, but they are very painful and bleed easily. (Sometimes the colour can be white/yellow/reddish brown). This is known as Pseudoverrucous skin lesions, which are often mistaken as being part of a "growing" stoma.

To treat this, a person needs to do the opposite of what you are doing. The area needs to be covered by the flange to protect it and allow the skin to heal. This can be challenging because these lesions are moist and quite lumpy. Using stoma powder to absorb excess moisture, along with a skin wafer to help even out the skin surface can help. In severe cases, you may need to use Silver Nitrate to the lesions. While it's healing, your flange will need to be changed more often, but your discomfort will be immediately reduced because the skin is now protected from what is irritating it.

Question: *Can I play sports when I have an ostomy?*

Answer: Absolutely! You can participate in any sport that you enjoy as long as you follow 5 simple rules.

1. For any contact sport or sport where the stoma could be accidentally banged/bumped you need to wear a stoma guard. This is basically a hard plastic shield that is secured over your stoma appliance with a belt to protect the stoma from trauma. Hard bangs and bumps can cause a lot of swelling and bruising to a stoma which can inadvertently cause an obstruction. There are several companies that produce these and they can be ordered online. (examples include www.stomplex.com and www.ostomyarmor.com)
2. Hydrate, hydrate, hydrate! Especially if you have an ileostomy. Active sports will increase your water loss



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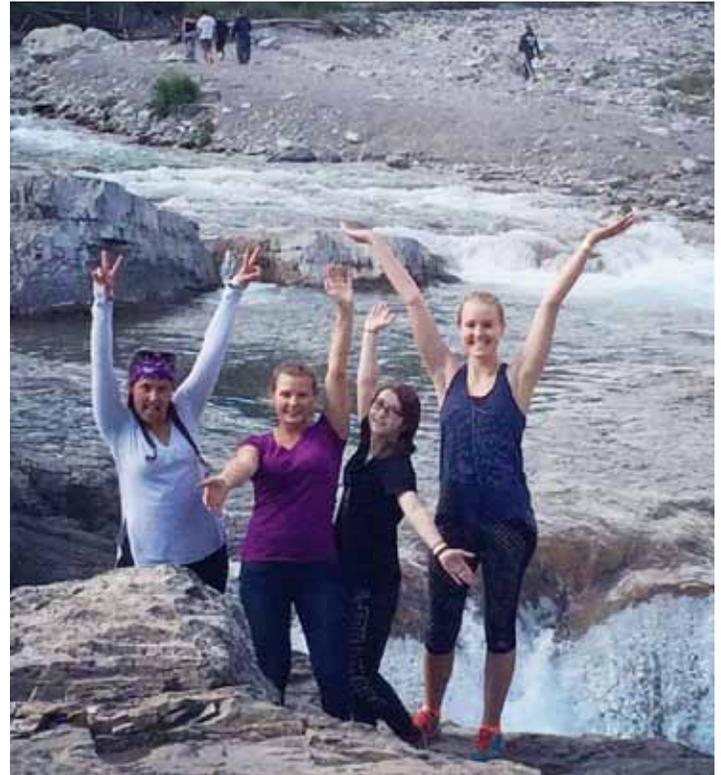
through sweating, so you need to consider replacing fluids with an electrolyte replacement beverage and drink extra water.

3. If the perspiration makes the outer edges of your flange lift, consider using flange extender strips to help with adhesion.
4. If you are doing a sport that requires twisting of the torso, such as golf, consider getting a hernia belt to wear while playing to provide additional support to your abdomen and prevent a hernia.
5. Have fun...above all else, relax and have fun!

*We could certainly
slow the aging
process down if it
had to work its way
through Congress.*

- Will Rogers





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*Francoise Pond
Carl Voigt
Rustam Teja*



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MEMBERSHIP / RENEWAL APPLICATION

United Ostomy Association Vancouver Chapter

Membership is open to all persons interested in ostomy rehabilitation and welfare. The following information is kept strictly confidential.

Please enroll me as a new renewal member of the United Ostomy Association Vancouver Chapter. I am enclosing my annual membership dues of \$30.00. I wish to make an additional contribution of \$ _____, to support the programs and activities of the Vancouver Chapter and the national Ostomy Canada Society. Any donations of \$20 or more will receive a tax receipt.

Name _____ Phone _____

Address _____

City _____ Postal Code _____ Year of Birth _____

email (if applicable): _____

Type of surgery: Colostomy Urostomy Ileostomy Internal Pouch N/A

May we welcome you by name in our newsletter? OK I'd rather not

Additional contributions of \$20 or more are tax deductible. Please make cheque payable to the **UOA Vancouver Chapter** and mail to: **Membership Coordinator, 405 - 1488 Hornby Street, Vancouver, BC V6Z 1X3**