

# IT'S IN THE BAG



**SINCE 1974** 

April 2020



# This Month's meeting: April 15th

#### **COVID-19 notice:**

April Speaker has been cancelled

Meeting tentatively cancelled as well.

Please keep an eye on your email or on our website for further updates.

## WOULD YOU LIKE TO RECEIVE THIS NEWSLETTER VIA EMAIL?

In an effort to reduce mailing costs, we would like to offer the monthly newsletter to all of our members electronically.

If you have access to email, please send your request to info@niagaraostomy.com. The newsletter will be in PDF format. Most computers come equipped with the capability to read PDF files.

If you experience a problem opening the file, there will be a free PDF reader program download link attached to the newsletter.

#### Location:



Grantham Lions Club

(in the smaller hall)

732 Niagara St, (corner Parnell & Niagara St.) St. Cath.

Use Parnell Entrance

Doors open @ 7:00p.m.

Meeting starts @ 7:15p.m.

\* fully accessible—no stairs\*

(Ridgeway/Pt. Colborne meeting info on Page 4)

#### INSIDE THIS ISSUE:

President's Message	2
APPLICATION FOR MEM- BERSHIP/CALENDAR	5
OSTOMY HISTORY	6
OSTOMY VISITOR Training Session	10
Crossword	11
STRESS AND COPING	13

#### **PRESIDENT'S MESSAGE:**

As always, I hope this newsletter finds everyone in good health, especially with the Covid-19 virus pandemic.



My message is very short this month.

At this time, we have cancelled our guest speaker and we are probably canceling the April Meeting. If there is a turnaround with this virus, we will reconsider.

For the March meeting we arranged for a few people attend, just so if someone came by that needed help, or wasn't aware of the closure we could talk to them. But no one came (no surprise) hopefully, we can do the same in April. We had a few Outreach programs set up in Niagara Hospitals, they have been cancelled

The Ostomy Visitor training, June 7<sup>th</sup> at the Lions hall is tentatively still scheduled, but it's a wait & see till the time gets closer.

The Friends of Ostomates Worldwide (Canada) sort & pack at the Lions Hall on April 26<sup>th</sup>. Is cancelled until further notice

Sorry I don't have any happy news; Stay healthy and we'll get this thing Kicked in the Butt sooner or later

Best Regards John Molnar





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www.boddlos.com

#### SAND IN A JAR

A Philosophy professor stood before his class and had some items in front of him. When the class began, he picked up a large empty pickle jar and proceeded to fill it with large rocks about 2" in diameter. He then asked the students if the jar was full? They agreed that it was. So the professor then picked up a box of pebbles and poured them into the jar. He shook the jar gently. The pebbles, of course, rolled into the open areas between the rocks. He then asked the students again if the jar was full. They agreed that it was. The students laughed. The professor picked up a box of sand and poured it into the jar. Of course the sand filled up every thing else.

 $(Continued\ on\ page\ 3)$ 



(Continued from page 2)

"Now," said the professor, "I want you to recognize that this is your life."

He continued.

"The rocks are the important things, your family, your partner, your health, your children,-

Things that if everything else was lost and only they remained, your life would still be full.

The pebbles are the other things that matter like your job, your house, your car.

The sand is everything else, the small stuff. If you put the sand in the jar first, there is no room for the pebbles or for the rocks.

The same goes for your life. If you spend all your time and energy on the small stuff, you will never have room for things that are important to you.

Healthy skin. Positive outcomes.

Pay attention to the things that are critical to your happiness. Play with your children. Take time to get medical checkups. Take your partner out dancing.

There will always be time to go to work, clean the house, give a dinner party and fix the disposal.

Take care of the rocks first-the things that really matter. Set your priorities. The rest is just sand."

#### SOUTH NIAGARA OSTOMY GROUP

## Boggio Pharmacy, 200 Catharine St, Port Colborne

#### Doors Open 6:15pm, meeting at 6:30pm

Please note that the meetings are held after business hours when the pharmacy is locked. To keep the pharmacy secure, the front door is attended by staff and unlocked only to admit attendees between 6:15 and 6:30pm. No-one else will be admitted after 6:30 because the staff are also involved in the meeting.

May 27, 2020: Les Coulter,
The Ostomy Clothing Company (formerly
Weir Comfees)

#### 2019 Board of Directors

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#### **CALENDAR OF EVENTS**

Our Website: www.niagaraostomy.com

Our Email: info@niagaraostomy.com

**2020 Dates** 

Mar 18-Premier Ostomy

Apr15-B. Braun Medical

May 20-TBA

#### **Telephone Numbers:**

Niagara Ostomy Association: 905-321-2799

Coloplast: (866) 293-6349

ConvaTec (800) 465-6302

Hollister: (800) 263-3236

BBraun of Canada: (855) 822-7286



### Car Pool-

If you need a ride or are available to pick up someone in your area for our meetings, please call us at

905 321 2799

Anyone that would like to maintain a list of people offering/needing rides, please



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#### NOTICE TO READERS:...

Products and methods mentioned in this newsletter are not endorsed by the Niagara Ostomy Association and may not be relevant to everyone. Consult your doctor or ET nurse before deciding to use any of them.

Application for Membership		
Name:		
Address:		
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Type of Ostomy(optional):		

Dues are \$30.00 per year, renewable by December 31 of each year. Membership is open to all ostomates, family members, medical professionals, health professionals and other interested parties. Includes monthly newsletter. We do not wish to exclude anyone because of inability to pay dues. If payment of dues is a hardship, please inform the treasurer or president. They have the authority to waive individual dues. This information is kept in the strictest confidence. We will never share your email address. It will be kept strictly confidential. Completed application along with your cheque or money order (payable to Niagara Ostomy

Association) should be mailed to:

Brenda Bagley, 66 Portmaster Dr, St. Catharines, ON L2N 7H7

#### Ostomy and Ostomy Bags History <u>www.stomabags.com</u>



#### The Early Years

Bowel blockages were usually fatal up to the latter part of the 18th century. Doctors' surgical knowledge did not encompass techniques that could effectively correct such obstructions. Consequently the risk of infection was extreme-

(Continued on page 7)





(Continued from page 6-Ostomy History)

ly high and for patients diagnosed with the condition the situation was much like a death sentence. Palliative measures were very ineffective and consisted of powerful laxatives, enemas, and ingesting potentially poisonous mercury, all of which did not do much to alleviate pain and much less the condition.

#### The First Successful Ostomy Procedure

In the year 1776, Dr. M. Pilore, a French surgeon specializing in treating bowel obstructions and other digestive tract related illnesses, performed the first ostomy surgery. The procedure was quite complicated by those years' standards. Very much like today, the surgeon made an incision on the abdominal wall and dissected the large intestine. One side was anastomosed and the other was pulled out of the incision just above the skin, effectively creating what is now known as a stoma. The opening served as a clean pathway to expel fecal waste. A sponge was attached to the opening with an elastic bandage to absorb any leakage. The operation was successful as far as irrigating the digestive tract was concerned. However, the patient died of apparent mercurial poisoning from prior treatments to deal with the obstruction.

#### **Continuing Struggle**

Following the first successful colostomy, different doctors all over the world tried to make the procedure safer by lowering the risk of post operative complications such as sepsis and the subsequent infection. While the mortality rate was still very high, doing nothing was fatal. Therefore, many surgeons took to perform the procedure and do all they could

(continued on page 8)





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(continued from page 7—Ostomy History)

to improve survival rates. From 1716 to 1839 there were about 27 documented colostomy procedures, of which only six patients managed to pull through without any complications. An ostomy then, was considered the last recourse for doctors and their patients.

#### **Modern Day Ostomies**

Up until the early part of the 20th century, there was little knowledge of bowel and small intestine injuries. Patients were full of post-op problems and were forced to remain at the hospital for weeks and even months after surgery. There were no antibiotics and poor asepecis contributed to high mortality rates. In the early 1950s, ostomy surgery made major advances. Later, with the help of countless researches and clinical trials, new surgical techniques were discovered and made available for use all over the world. These days, people who suffer from blockages can now undergo ostomy procedures safely since the

threat of severe post operative infections and other forms of complications is totally manageable. Ostomy procedures are now a certified life saver, and having an ostomy is no longer the burden that it was before.

On the "life after Ostomy" front, up until the late 1950's, ostomies were kept secret as nobody felt comfortable with the subject. All psychological recovery was left to chance and the individual. Once the physical side of the problem was solved, it took much longer to deal with the associated discomfort and psychic trauma that followed. Once the first nurses became trained, quality of life began changing for ostomates. Today, Enterostomal Therapists, support groups, and the internet all contribute to improve conditions and to quickly bring ostomates back to full functionality.

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(Continued from page 8-Ostomy History)

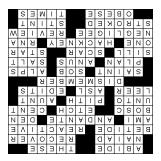
#### **History Ostomy Bags**

Aside from being attributed with the first procedure, Monsieur Pillore paved the way for the invention of the first ostomy collector. It consisted of a sponge held together by an elastic bandage. The sponge required constant draining, and it

was inconvenient. Yet it was a start. During future procedures, much attention was allocated to the patient's post-op functionality and new developments came including leather pouches and glass bottles. In 1920, the so called Koenig-Rutzen rubber pouch was launched. No further advances occurred until around the time of WW II when rubber pouches with adhesives and detachable caps came out. From that point on, mass manu-



facturing and continued modifications to that original concept took place. However, reusable rubber bags with rigid flanges and coarse adhesives were the norm. Vinyl was launched in the 70's, but made dealing with odor difficult. It was not long after that light when advanced and odor resistant pouches were developed. Today there is a full range of options and numerous manufacturers dedicated to deliver ostomy pouching systems.



#### Ostomy Visitor Training Session & Refresher Seminar – June 7, 2020 9:00 am-3:30 pm

#### Do you answer yes to any of the following?

- Have you been certified as an ostomy visitor in the past, but you need re-certification?
- Do you know the positive emotional impact a trained visitor can have on a fellow ostomate?
- Have you lived with an ostomy or been a caregiver or spouse to someone that has had ostomy surgery for at least a year that has adjusted well to the impact of living with an ostomy?
- Do you want to become an Ostomy Canada Trained Visitor?
- Do you know why it is important to become an ostomy visitor under Ostomy Canada guidelines?

If you have answered "yes", then you are eligible to register for the Visitor Training session hosted by the Niagara Ostomy Association.

Please register by calling **905-321-2799 as** early as possible.

# The training will be held at the Grantham Lions Club, 732 Niagara St., St. Catharines.

Spouses and/or caregivers of someone with an ostomy are eligible to participate.

#### What's required by you?

- Be well-adjusted to your ostomy for at least one year.
- Have a positive outlook on life, with good listening and communication skills



- Agree to be on the Visitors team of trained visitors and try to make yourself available when called upon by the visiting coordinator
- Agree to follow the guidelines of the Ostomy Canada Society's Visiting program

#### What you need to know.

- Dress comfortably, in clean, tidy clothes as if you were making an actual visit.
- Bring a lunch with you since there are no restaurants near the hall.
- Coffee, tea, refreshments & light snacks will be provided by Niagara Ostomy.
- An information package will be sent ahead of time to prepare you for the session.
- You will be required to participate in all aspects of the session, and there will be active roleplaying to familiarize you with visiting scenarios.

The session will start at 9 am sharp and run until about 3:30 pm to be held at:

Grantham Lions Club, 732 Niagara St., St. Catharines.

Note that we will be using the new version of the visitor Training Guidelines, and certification will be for a 5 year term.

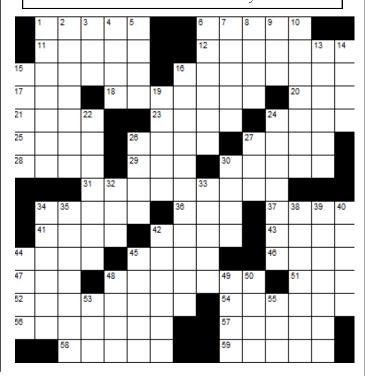
#### **ACROSS**

- 1. Stay
- 6. Not those
- 11. A nymph of lakes
- 12. Recuperate
- 15. Befall
- 16. Responsive
- 17. French for "Friend"
- 18. A moderately slow tempo 48. A carriage for hire
- 20. Lair
- 21. Pear variety
- 23. Carve in stone
- 24. 1/100th of a dollar
- 25. "Do \_\_\_\_ others..."
- 26. Gist
- 27. Parental sister
- 28. Lascivious look
- 29. American Sign Language
- 30. Makes changes to
- 31. Take apart
- 34. Good person
- 36. Weep

#### 37. Austrian peaks

- 41. Scheme
- 42. Rectum
- 43. Sodium chloride
- 44. Window ledge
- 45. Stigma
- 46. Celebrity
- 47. Half of a pair
- 51. Ribonucleic acid
- 52. A loose dressing gown
- 54. Examine again
- 56. Caressed
- 57. Scrimp
- 58. Overweight
- 59. Occasions

#### CROSSWORD www.mirroreyes.com



#### DOWN

- 1. Windflower
- 2. Thin plain-weave fabric
- 3. 3 in Roman numer-
- 4. Slang for Father
- 5. Biblical garden
- 6. Ditch

- 7. A low evergreen shrub
- 8. Behold, in old Rome 24. Chest armor
- 9. Drunkard
- 10. Apparent
- 13. Happenings
- 14. Lease
- 15. Acacia
- 16. Pit viper
- 19. Anagram of

- "Dimes"
- 22. Affable

  - 26. Long ago
  - 27. Citrus drink
  - 30. Wanes

  - 32. Hotel
  - 33. Grieve
  - 34. Small piano
  - 35. Lively tempo 38.

- Public toilet
- 39. Venus and the
- Earth
- 40. Chaff
- 42. Yield
- 44. Male offspring
- 45. Mentors
- 48. Go backpacking
- 49. At one time
- (archaic)

- 50. Abominable Snowman
- 53. Toss
- 55. Vigor



Answers on

page 9



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### B BRAUN SHARING EXPERTISE

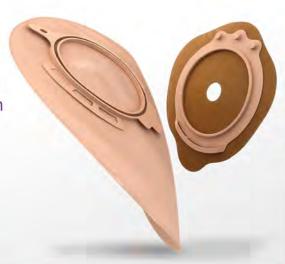
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#### STRESS AND COPING

Excerpts from www.cdc.gov

The outbreak of coronavirus disease 2019 (COVID-19) may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger.

Everyone reacts differently to stressful situations. How you respond to the outbreak can depend on your background, the things that make you different from other people, and the community you live in.

Stress during an infectious disease outbreak can include:

Fear and worry about your own health and

the health of your loved ones

- Changes in sleep or eating patterns
- Difficulty sleeping or concentrating
- Worsening of chronic health problems
- Increased use of alcohol, tobacco, or other drugs
- People with pre-existing mental health conditions should continue with their treatment and be aware of new or worsening symptoms.

Taking care of yourself, your friends, and your family can help you cope with stress. Helping others cope with their stress can also make your community stronger.

Things you can do to support yourself:

(Continued on page 14)



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- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.
- Call your healthcare provider if stress gets in the way of your daily activities for several days in a row.