



MAY / JUNE
2017

In This Issue

<i>The Benefits of Juicing</i>	1
<i>Editorial</i>	3
<i>Article continued from page 1</i>	4
<i>Belts vs Tape</i>	5
<i>Fluids & Electrolytes with an Ostomy</i>	6
<i>Biography - Susan Hunter</i>	8
<i>Retracted Stomas</i>	9
<i>Membership Form</i>	10

MEETINGS

Meetings are held on the second Tuesday of the month at 7:30 p.m., starting in September, at the Community of Christ Church, 4710 8th Avenue (corner of Arthur and 8th). No meetings are held during the months of January, July and August)

UPCOMING MEETINGS

May - 9 The "John McGregor"
Story

May 15 - Yorkton Ostomy Buddies
(Manos at 2:00)

June - 13 Wind up meeting and social



THE BENEFITS OF JUICING



Some ostomates are lucky in that they can eat whatever they want with no consequences. Others start sweating at the thought of eating raw celery or nuts. Well, sweat no more. These ostomates may benefit from juicing. Once thought to be the activity of hippy, trippy granola bar eaters, juicing has found its way in the mainstream; and with good reason. There are many benefits to juicing, including:

- Providing vital nutrients, antioxidants, vitamins and minerals for healing, strengthening the immune system and cell regeneration;
- Preserving the live enzymes in the fruits and vegetables that are lost to heat through cooking;
- Assisting in weight reduction as juices contain a large amount of fluid which makes the consumer fuller faster;
- Creating more readily digestible/absorbable form of food. There are several juicers on the market. Some will strain the fibre out of the juice, while others pulverize all the ingredients to create a thicker end product.

Juicers can vary in price from \$100 to \$400. However, they are well worth the cost as they can help diet-challenged ostomates resume a healthy diet. A great tip on finding the best juicer for you is to read the reviews. Find out which ones are easy to maintain and use. This will make the juicing experience much more pleasurable.

Continued on Page 4

REGINA OSTOMY CHAPTER EXECUTIVE

President	Agnes Parisloff	761-0221
Vice President	Murray Wolfe	584-2111
Secretary	Heather Bathgate	949-4664
Treasurer	Neal Holt	949-5538
Membership Chair	Susan Hunter	585-0410
Flowers & Cards	Edith Klein	266-2115
Phoning	Gord Kosloski	789-1592
	Gail Zipchian	522-8669
Host	June Crawford	543-2852
	Bill Collie	543-2647
Lunch	Brenda Frohlick	949-2352
	Gale Miller	789-5139
Mailing	Brenda Frohlick	949-2352
Newsletter & website	Deb Carpentier	775-1869
	Louise Laverdiere	536-5442
Visiting	Enterostomal Therapy Services	766-2271
SASO	Bob Fearnside	924-5993

MISSION STATEMENT

The Regina Ostomy Chapter is a non-profit mutual support society for the benefit of people who have had, or are about to have intestinal or urinary diversion surgery.

Our purpose is:

- To help people with intestinal and/or urinary diversions to lead full and productive lives and to provide information and emotional support to their families and caregivers.
- To educate the public about intestinal and urinary diversion surgery.
- To provide trained visitors to those who have undergone intestinal and/or urinary diversions, including preoperative and postoperative visits or phone calls, at the request of the physician or enterostomal therapist.

NEW MEMBERS

*There are no strangers here,
only friends who haven't met"*

Diane Weir-Wagg - Regina



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WOUND CARE CENTRE
TO ENTEROSTOMAL THERAPY SERVICES
Pasqua Hospital 766-2271**

Jane Wilmot, RN, BScN, ETN, Program Coordinator

Sheryl Walker, RN, BScN, CETN

Monica Aikman, RN, BScN

Ruth Suderman, RN, BSN, ETN

Arleene Arnold, RN, CETN

Lana Klein, RN, BScN, ETN

Patty Gianoli, Office Manager

Dana Anderson, Unit Assistant

DONATIONS

Thanks to the following individuals who
generously donated funds to the chapter:

Jolly's
Richard Silzer

Ostomy Canada Society / Société Canadienne des Personnes Stomisées

Hosts the

**5th Annual
Stoma
Stroll
Awareness Walk**

"No Colon, Still Strollin!"
Saturday, October 7, 2017

Editor's Message



Summer is almost upon us and I'm quite sure most of us are looking forward to it. What a great time of year to enjoy being outside, travelling to see family and friends and soaking in some natural Vitamin D while we walk and garden and play.

Here are a few reminders of events just around the corner that you may want to include in your spring and summer plans

May 9 – Regina Ostomy meeting at 7:30

May 10 – Crohn's and Colitis "Newly Diagnosed Night", a 5:00 to 7:00 pm on-line seminar, for those just diagnosed or those just wanting more information on their condition. (Noelle at 306-966-4096.

June 4 – Crohn's and Colitis' annual "GUTSY Walk" at the AE Wilson park in NW Regina

June 13 – the final Regina Ostomy meeting and social prior to summer

July 23-28 - the annual Ostomy Youth Camp, held in Bragg Creek, Alberta. Ostomy Youth Camp is a unique and exciting opportunity for young people, between the ages of 9 and 18, with an ostomy or related special need. It's a great camp, but there are costs associated with attending. The Regina Chapter sponsors campers, as does the Ostomy Canada Society. If you know of someone who would be interested in attending, contact Agnes Parisloff or the Ostomy Canada Society office. We're happy to know that Sidney Dorash is attending again this year. Have fun Sidney!!! And, we are still open to sponsor other "campers".

On a slightly more serious note I'd like to let you know that our national body, Ostomy Canada Society, is in dire need of people who would be willing to join the team at the national level to work as part of the National Board. Currently vacant is the Secretary position as well as a Finance and Fundraising Director and a Marketing and Communications Director, which have committee members already. I'm currently on the Board as the Prairie Region representative. Contact me if you have questions.

A new group is forming in the Saskatoon area, YOUNG OSTOMATES SUPPORT & FRIENDSHIP GROUP. Hoping to get something going for the under 40 crowd. For more info contact Veronica at jay-lynn13@hotmail.com

I'd like to give a shout out to our great ET Nurses as they celebrate National Nurses week May 8-14 with the theme "Yes, This is Nursing".

Happy Mothers' Day to all the women who nurture and 'mother' their friends and family and Happy Fathers' Day to all the men, who nurture and 'father' the people around them.

We're back to meetings in September so be sure to mark your calendars for the 5th Annual Stoma Stroll on Saturday, October 7th. It's sure to be a great day again!!! Have a great summer. Walk and stretch and drink lots of water. Stay healthy, be happy and see you soon!

GUTSY WALK
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JUNE 4, 2017
Register at gutsywalk.ca

WALK WITH US.
IT TAKES GUTS TO MAKE IT STOP.

For information: gutsywalk_SK@crohnsandcolitis.ca

The Colorectal Cancer Association of Canada is a support group for the estimated 22,000 Canadians annually diagnosed with colorectal cancer. Membership is free.

Info is available at their website: www.colorectal-cancer.ca with links to news reports, articles, and other cancer organizations in the field. Support cancer coaches are also available to talk with patients. **Or Phone 1-877-50COLON**

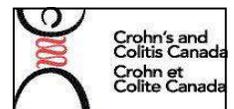
Crohn's and Colitis Canada

Box 28074 Westgate
Saskatoon, SK S7M 5V8

(306) 664-4420

Toll free in Saskatchewan 1-844-664-4420

www.crohnsandcolitis.ca ; clquintin@crohnsandcolitis.ca



Continued from front page

In terms of ingredients, the choices are endless. You can do all fruit juices, all vegetable juices, or a combination of both. You can introduce seeds and nuts to add protein, or purchase a protein powder if you want the juice to replace a meal. Sweeteners can be used including honey or agave. Spend a little time on the internet and you will find a multitude of delicious juice recipes.

Some Juice Recipes

Bright Beet - Apple

2 apples
1/4 beet
1/2 lemon

Lemons stimulate the liver's production of enzymes. Beets are one of the best liver cleansers known.

Apple Carrot

1 apple
5-6 carrots
1/2 lemon

Apples & carrots regulate digestion and elimination as well as reduce cholesterol. Apples also enhance mineral absorption.

Pinky Green Power Drink

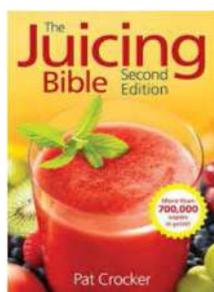
4-5 carrots
2 Romaine lettuce leaves
1 beet, 2 celery stalks
1/4 cup cilantro

Cilantro and lettuce have vitamin A & chlorophyll which nourish hair and skin.

From Your Garden

4-6 carrots
1 beet
2 celery stalks
1 small cucumber

This juice has it all ...
Celery calms the nerves. Alkaline minerals for bones and teeth & Beets build the blood.

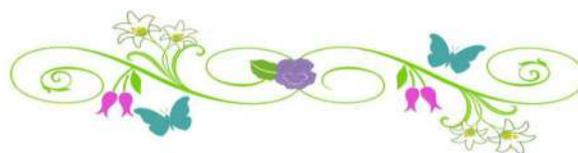


Leave the Toxins Behind

1 pear
2 apples
4 oranges
1 grapefruit

Substituting powerful vitamins & minerals will help leave coffee behind - if you want.

(From the Ostomy Toronto Newsletter vis Oshawa & District Ostomy Ass Dec 2015)



A Senior citizen called her husband during his drive home

“Herman, I just heard on the news that there’s a car going the wrong way on Interstate 90. Please be careful!”

Herman replied, “It’s not just one car. There’s hundreds of them!”



OSTOMY CANADA SOCIETY

Suite 210

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Mississauga, ON L4W 4J4

e-mail: info1@ostomycanada.ca

Toll-free telephone number:

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<http://www.ostomycanada.ca/>

Ostomy Canada Society Mission Statement

Ostomy Canada Society is a non-profit volunteer organization dedicated to all people with an ostomy, and their families, helping them to live life to the fullest through support, education, collaboration and advocacy.

BELTS vs TAPE

It's sometimes necessary to use extra measures to make sure that an appliance stays firmly in place. Many factors can dictate a need for further measures to ensure a worry-free fit—body shape, skin type, sports played, job demands or quantity of waste. Tape and/or ostomy belts are sometimes a solution. Each has its advantages depending on the individual. In some instances, a combination of both may be recommended. Which method might work best for you and how do you properly use them?

Ostomy belts are a frequent first choice because they are reusable, washable, adjustable, and don't have to be

peeled off the skin. But a belt that is too tight can cause its own problems. Wearing the belt too tight will cause the elastic to become overextended which allows the elastic to curl, forming a rope-like fit instead of a flat fit around the waist. This could get mighty uncomfortable in a hurry. You want the belt to be snug, but not so snug it's digging into you. You also want to keep the belt from 'riding up', which will create an off-centre pull on the appliance. Try to keep the belt level with your flange. Wider ostomy belts might be more comfortable if one has rolls of fat around the midsection. Most belts are about an inch wide but you could ask your supplier if a wider model is available. You might want to allow your bag to fill up and then test how effective an ostomy belt might be under different tensions and body movements. If presented with a choice, choose cloth rather than rubber or elasticized fiber. Cloth will be cooler. Belts can provide vital support, especially if the contents of a bag become significant. Always empty a full bag as soon as possible, or better yet, don't let it get that full in the first place.

Some times belts are just not practical. They may be too uncomfortable for the wearer, or spoil the look of some clothes. Tape can be a good solution in such cases. They come in a variety of materials, paper porous tape, all plastic tape or a combination of both. Some appliances come with a tape perimeter 'built-in' but you may still need to apply another layer over top of this. Tape is relatively inexpensive so give different materials and brands a try. To properly apply tape, it should encircle the entire flange, with one half on the flange and the other half on the skin. In time you'll get skilled at

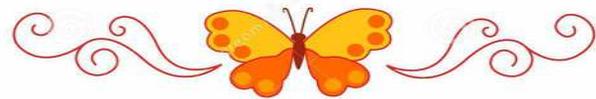
applying this. A gentle pressing-on with the finger tips will ensure that it's stuck.

Most problems with tape arise from poor application technique, impatient removal or allergies to the material. Prepare the skin with careful removal of the old flange and thorough cleaning and drying of the skin. When removing the tape, use the 'two hand' method—one to gently pull the tape off and the other to hold the skin down. Too frequent or rushed tape removal can cause irritation.



Either or even both methods—tape or belt—can greatly increase your confidence and comfort. Give both a try if you have concerns about your appliance staying in place.

Source: *Vancouver Ostomy HighLife*—Sept./Oct. 2016



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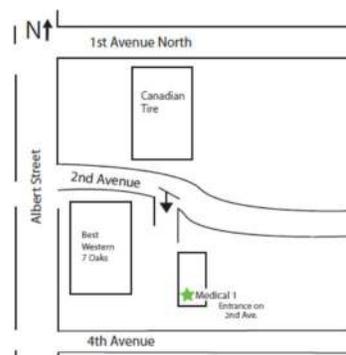
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<http://www.stomabags.com/fluids-and-electrolytes-with-anostomy>.

Electrolytes are ionic mineral solutions that transmit electricity. Electrolyte balance refers to the combined levels of the different electrolytes found in the blood. The balance of these ions in our body is key to regulate fluid amounts, blood acidity, muscle and nerve health, and all functions from oxygen distribution to fluid delivery to cells. Essentially, electrolytes are the chemicals needed to keep our bodies working.



Extraction of the large intestine impairs the body's ability to assimilate electrolytes and nutrients. Therefore, people that have undergone ostomy diversion surgery including colostomy, ileostomy and urostomy are more inclined to suffer electrolyte deficiencies.

Especially those with an ileostomy or a urostomy need to watch for persistent diarrhea, vomiting, sweating, nausea and high fever. Ostomy patients' diets must ensure proper intake of fluids and foods containing potassium and sodium. The latter ingredient is important, but it does not require major efforts to acquire, as it is present in most foods. As a note of caution, if dizziness or signs of dehydration appear, immediately drink a sports drink or an electrolyte beverage. Use sports drinks only as a boost. Electrolyte drinks may be made at home with water, salt, salt substitute for potassium, and baking soda.

Problems related to Electrolyte Imbalances.

DEHYDRATION:

Symptoms: Extreme thirst, dry mouth, nausea, decreased urine, fatigue, shortness of breath, headaches, dry eyes and abdominal cramping.

Solution: Increase ingestion of fluids (water sports drink (Gatorade), electrolyte solution (Pedialyte). Drink throughout the day at least 8-10 glasses of 8 oz. each. All liquid counts: milk, juices, and water. Abstain from surgery drinks. They may result in osmotic diarrhea and weight gain.

SODIUM DEPLETION:

Symptoms: Nausea and vomiting, headache, confusion, lethargy, fatigue, appetite loss, drowsiness, leg cramps, coldness of arms and legs, feeling of faintness.

Solution: Increase foods and beverages high in sodium, such as soups, bouillon, sports drink (Gatorade), electrolyte solution (Pedialyte). Examples of some foods high in sodium are broth, buttermilk, canned soups, canned vegetables, cheese, soy sauce, table salt, tomato juice, and pickles.

POTASSIUM DEPLETION:

Symptoms: Muscle weakness, confusion, irritability, fatigue, gas, shortness of breath, chronic diarrhea.

Solution: Increase foods and beverages high in potassium such as oranges, orange juice, bananas, and sports drinks (Gatorade), electrolyte solution (Gastrolyte, Pedialyte). Examples of some foods high in potassium are black-eyed peas, bananas, bouillon, chicken, fish, oranges, pinto beans, raisins, tomato or vegetable soup, veal, watermelon, and yogurt.





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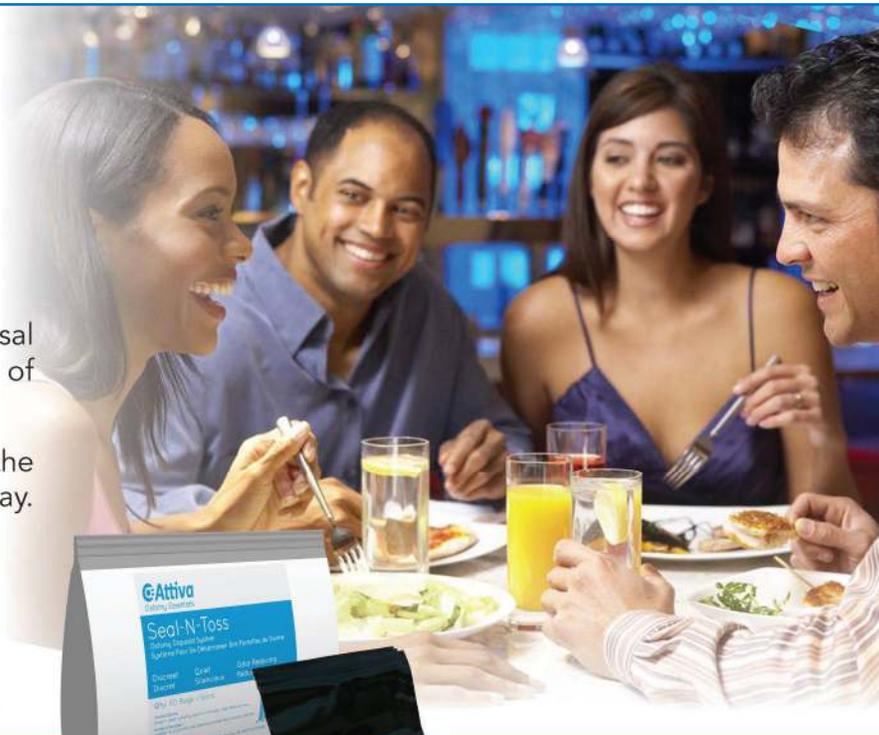
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Susan Hunter, Chairperson, Membership Committee



I have nursed all of my adult life. I started in labor and birth followed by emergency nursing. After that I was the Nursing Care Coordinator for a wound care team at the Pasqua Hospital. Thanks to Miss Betty Hailstone, I found my nursing passion, Enterostomal Therapy Nursing. With her support and encouragement, I applied for a position in the newly created southern Saskatchewan Enterostomal Therapy Department, located at the Pasqua Hospital. In 1981, I went to Vancouver to complete the Enterostomal Therapy Nursing education program and for the next 26 years worked as an ET nurse in the RQHR and southern Saskatchewan. I have not worked in many areas but I can't imagine anything more rewarding and fulfilling than being an ET nurse. In 2007 I left my ET position in the RQHR and set up a private nursing practice. It was quite a learning curve. I learned more about the operation of our health region in this role, than I ever knew when I worked within it. It was interesting to see things from another side and it made me appreciate my years working for the region.

I received the ET recognition award from the Ostomy Society of Canada in 2003. The Regina Chapter had nominated me and I was and still am so very proud to have received this award. Thanks again to this great Chapter.

I am married to Graeme Hunter and we have two sons. Our first born is Ethan. He is married to Becky and is the father of our two grandchildren, Hannah (2 years) and Owen was born this past March. Drew is our second son and his partner is Amanda. They all live in Regina. Thank goodness. We love having them near us.

A few years ago, Agnes Parisloff asked if I would be the Mistress of Ceremonies at the Regina Chapter's 40th Anniversary Celebration. What a great celebration that was and how wonderful it was to be among the people (and their families) that I had worked with for so very long. I decided it was time for me to give back to a group of people who had given so much to me when I was an ET nurse. So, 3 years ago I became the Membership Chair for the chapter. Since then I have been involved in many other local and national events and committees. What a great ride..... life is good!

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RETRACTED STOMAS

A normal stoma has a slight protrusion from the skin level; this allows it to fit with ostomy appliances and the skin is protected from stoma output.

Retraction is when the stoma is flush or below skin level. Sometimes the stoma may protrude when standing, but disappear into the skin when sitting. Retraction is relatively common, with about 10 – 24% of stoma patients experiencing retraction. It's also more common with ileostomies than colostomies and tends to affect heavier patients more frequently. Retracted stomas can cause problems with leaking with standard pouching systems. A retracted stoma is far more prone to leaks since the stoma outputs its contents directly to the skin. This can compromise the adhesives on barriers and cause skin irritation if not cleaned regularly. However, there are solutions to help prevent leakage and keep the skin clean and the barrier safe:

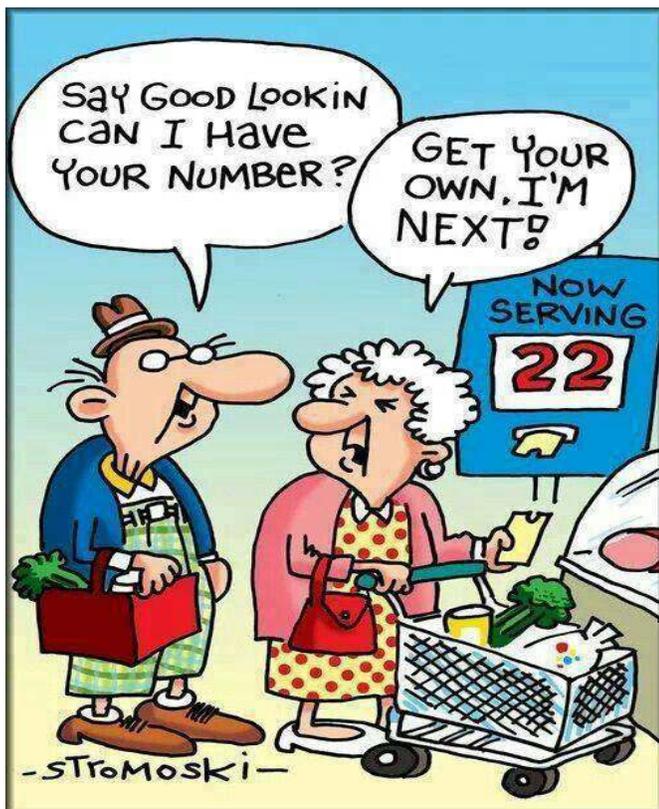
Convex Barriers/Wafers – The curved shape of the barrier helps the stoma protrude enough to keep the contents from leaking under the barrier.

Ostomy Belt – Helps support the barrier and the pouching system to prevent leaks by supporting the appliance around the waist.

Adhesives – Some barrier adhesives provide an extra tackiness that is far more waterproof; these adhesives can help prevent the skin and wafer from being compromised by leaks.

In extreme cases, a doctor may recommend surgery to fashion a new stoma through the skin.

via Winnipeg Ostomy Assoc. INSIDE/OUT Sept. 2014; - Brantford Ostomy News, via the "New Outlook", UOA Chicago, May 2014; Source:



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Regina Ostomy Chapter Membership Application

You can join the Regina Chapter and enjoy the benefits of being part of a group of people in Saskatchewan and across the country through meetings, websites and social media. Our membership fee is \$30 annually, and supports many local and national initiatives. We publish a newsletter five times a year and the national Ostomy Canada magazine is published twice a year.

Please Print

*Name: _____

*Address: _____

*City/Prov/Postal Code: _____

*Phone Number: _____

*E-Mail (preferred, to save on mailing costs)

Membership Information

Colostomy Ileostomy Urostomy

Other

Supporter

Age: Under 18 18—40 41—59 60 +

New Member Membership Renewal

Address Change

A charitable tax receipt will be issued for all additional contributions of \$20.00 or more

Please write on the back if needed

Please make cheques payable to:

Regina Ostomy Chapter and mail with this form to: OCS Regina Chapter 6123 Brunskill Place Regina, SK S4T 7W7

Bequests & Donations

We are a non-profit association and welcome bequests, donations and gifts. Acknowledgement cards are sent to next-of-kin when memorial donations are received. Donations should be made payable to OCS Regina Chapter at address listed on this page and tax receipts will be forwarded.

VISITING SERVICES

We provide lay visiting service, at the request of the physician, patient or enterostomal therapist, either pre-operative or post-operative or both. The visitor is chosen according to the patient's age, gender, and type of surgery. A visit may be arranged by calling the Visiting Program at the Enterostomal Therapy Services department at [306-766-2271](tel:306-766-2271).

Moving? Questions? Need Information?

Regina Ostomy Chapter

6123 Brunskill Place

Regina, Sk S4T 7W7

[\(306\) 761-0221](tel:3067610221) or reginaostomygroup@gmail.com

PRODUCTS MENTIONED IN THIS NEWSLETTER ARE NOT NECESSARILY ENDORSED BY THE REGINA OSTOMY CHAPTER. SEE YOUR DOCTOR FIRST BEFORE TAKING ANY OF THEM!

**Charitable Registration No.
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HOSPITAL VISITS

February - 3 Colostomy

March - 1 Colostomy; 1 Ileostomy; 1 Urostomy

April - 2 Colostomy; 2 Ileostomy