



INSIDE OUT



SUMMER 2022

THE NEWSLETTER OF THE WINNIPEG OSTOMY ASSOCIATION, Inc. (WOA)

Why Tokyo's New Transparent Public Restrooms Are a Stroke of Genius.

Suzanne Rowan KelleherForbes Staff

At first it's hard to fathom how a public restroom with transparent walls could possibly help ease toilet anxiety - but a counterintuitive design by one of Japan's most innovative architects aims to do just that.



Around the world, public toilets get a foul rap. Even in Japan, where restrooms have a higher standard of hygiene than in much of the rest of the world, residents harbour a fear that public toilets are dark, dirty, smelly and scary.

To cure the public's phobia, the non-profit Nippon Foundation launched "The Tokyo Toilet Project," tasking 16 well-known architects to renovate 17 public toilets located in the public parks of Shibuya, one of the busiest commercial areas of Tokyo.

The mission was to apply innovative design to make public bathrooms accessible for everyone regardless of gender, age or disability, with a goal "that people will feel comfortable using these public toilets and to foster a spirit of hospitality for the next person, according to a statement from The Nippon Foundation.

So far, the most talked-about design comes from Pritzker Prize-winning architect Shigeru Ban, whose transparent restrooms popped up this month in Haru-no-Ogawa Community Park and the Yoyogi Fukamachi Mini Park.

The two units each have three cubicles, which are surrounded by the transparent tinted glass in cyan, lime green, blue, yellow, pink or purple. The see-through design has a practical reason, which is to allow a person to easily check inside before entering.

"There are two concerns with public toilets, especially those located in parks," explains The Nippon Foundation, the non-profit

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Summer



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WHO WE ARE

The *Winnipeg Ostomy Association, Inc. (WOA)* is a non-profit registered charity run by volunteers with the support of medical advisors. We provide emotional support, experienced and practical help, instructional and informational services through our membership, to the family unit, associated care givers and the general public. Our range of service and support covers Winnipeg, Manitoba and North Western Ontario.

MEMBERSHIP

Anyone with an intestinal or urinary tract diversion, or others who have an interest in the WOA, such as relatives, friends and medical professionals, can become a member.

WHAT IS AN OSTOMY?

An ostomy is a surgical procedure performed when a person has lost function of the bladder or bowel. This can be due to Crohn's disease, ulcerative colitis, cancer, birth defects, injury or other disorders. The surgery allows for bodily wastes to be re-routed into a pouch through a new opening (called a stoma) created in the abdominal wall. Some of the major ostomy surgeries include colostomy, ileostomy and urostomy.

VISITING SERVICE

Upon the request of a patient, the WOA will provide a visitor for ostomy patients. The visits can be pre or post operative or both. The visitor will have special training and will be chosen according to the

patient's age, gender, and type of surgery. A visit may be arranged by calling the Visitor Coordinator or the ostomy nurse (NSWOC) by asking your Doctor or nurse. There is no charge for this service.

WHAT WE OFFER

MEETINGS: Regular meetings allow our members to exchange information and experiences with each other. We also run groups for spouses and significant others (SASO) and a young person's group (Stomas R Us).

INFORMATION: We publish a newsletter, *INSIDE/OUT*, eight times a year.

EDUCATION: We promote awareness and understanding in our community.

COLLECTION OF UNUSED SUPPLIES: We ship unused supplies to developing countries through *Friends of Ostomates Worldwide (Canada)*.

OUR MEETINGS

Chapter meetings are held from September through May. There are no scheduled chapter meetings in June, July, or August. A Christmas party is held in December.

**Meetings are held on the
FOURTH WEDNESDAY
of the month.**

7:30 pm—9:30 pm

**Manitoba POSSIBLE Bldg.
825 Sherbrook Street,
Winnipeg, MB
Rooms 202 & 203**

FREE PARKING:

Enter the SMD parking lot to the south of the building just off Sherbrook and McDermott Ave.

UPCOMING EVENTS



**FOURTH
Wednesdays
of the month**

**SEPTEMBER 28
OCTOBER 26
NOVEMBER 23**

**Meetings open at 7:10 pm
for random discussions
Meeting Starts at 7:30 pm**

ARE YOU MOVING?

If you move, please inform us of your change of address so we can continue to send you the newsletter and Ostomy Canada magazine.

Send your change of address to:

**WOA
204—825 Sherbrook St.
Winnipeg, MB R3A 1M5**

LETTERS TO THE EDITOR

The Editor, *Inside/Out*
1101-80 Snow Street
Winnipeg, MB R3T 0P8
Email: woainfo@mts.net

All submissions are welcome, may be edited and are not guaranteed to be printed.

**Deadline for next issue:
Friday, September 9, 2022**

WEBSITE

Visit the WOA Web Pages:
<https://www.ostomy-winnipeg.ca>
Webmaster:
webmaster@ostomy-winnipeg.ca

DISCLAIMER

Articles and submissions printed in this newsletter are not necessarily endorsed by the Winnipeg Ostomy Association and may not apply to everyone. It is wise to consult your Enterostomal Therapist or Doctor before using any information from this newsletter.

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UNUSED SUPPLIES PICK UP
204-237-2022

Email: rossbingham@gmail.com

Please leave your name,
phone # and address

CHAPTER WEBSITE:

<http://:ostomy-winnipeg.ca>

CHAPTER EMAIL:

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The Winnipeg Ostomy Association is a registered non-profit charity run by volunteers. The WOA was incorporated in August 1972.

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OSTOMY SUPPLIES

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59 Pearl St., Winnipeg, MB.

ORDERS: 204-926.6080 or
1.877.477.4773

E-mail: ossupplies@wrha.mb.ca
Monday to Friday 8:00am to 4:00pm

FROM the PRESIDENT'S DESK



Hi folks,

Is this the 'New Normal'?, is the number one question floating through my head continuously.

Climate change gives us super dry weather in 2021 and now a wetter than wet 2022? A brutally long winter with snow into May, followed by Colorado Low rain days later, and 3 weekends in a row?

Covid 19 is in its third or fourth variation, I have lost track. People wear mask outdoors then not indoors! Or they wear them covering their mouth, but not their nose?!? People are vaccinated with 2, 3 or 4 doses. Some continue to challenge the science.

Our 50th Anniversary year has kinda fallen short of our Grand plans, because of Covid. The one thing we have done is hold draws for \$50 gift cards at our meetings. There have been five excited winners, who saved a few dollars shopping at Sobey's or going out for dinner. There will be three more chances to win as we hold our fall Chapter meetings the 4th Wednesday of the month. Stay tuned for information about our fall meetings. Details on Zoom login or potentially in person will be found in our September Newsletter

I just wanted to express my appreciation to all the Board members who have chipped in to do their part in making our Association work for all the members.

I will save other thoughts until our September Newsletter. I figure a short, quick to read message is best for the summer edition.

Please stay healthy, safe and remember to help others when you can!

Ciao'

Randy Hull

r.hull@shaw.ca

President City of Winnipeg Retirees Association

President Winnipeg Ostomy Association



*For pick-up of unused ostomy
supplies please contact the*

Winnipeg Ostomy Association

204-237-2022

Email: rossbingham@gmail.com

Please leave a message with your name, phone # and address

FROM the EDITOR'S DESK

Youth Camp Report - Four youth were sponsored this year by WOA to attend the Ostomy Canada Youth Camp in Bragg Creek, Alta from Monday, July 4th to Friday, July 8th. Three first timers (all male) ages 9, 13, & 17 joined Enzo who returned this year for his graduation. The camp was shortened by one day to accommodate the cleaning of camp between the groups attending.



Registration was \$650 per camper and as you can assume the flight costs were much higher this time around. I was just hoping against all hope that the flights weren't cancelled. The camp director asked that they arrive in Calgary by 9:00am so that they could make the most of that day of camp. That meant our campers were booked to fly out by 6:30 am on Monday.

There was a lot of back and forth between myself, the camp director and the parents as we tried to quickly coordinate registrations, health check-ups and flights. I worked with a new agent, Ellyn, at CAA who I must say earned every bit of her fee. I will be contacting the parents and asking for a report from the campers for a later newsletter.

We're expecting our September chapter meeting will be a hybrid meeting—with "in person and Zoom combo". Ideas for our September meeting are open at this time. Watch for more details in the September newsletter.

Presenter Dale Kornelson RD—Registered Dietician is booked for our October meeting. He was a speaker at our meeting in 2017 and a presenter at our conference in 2016.

His intro in 2017 reads as follows:

Certified Diabetes Educator - Nutritional Counseling - Cholesterol Reduction - Sports Nutrition - Weight Loss - Celiac & Ostomy Diseases - Health Canada's New Food Guide Lines.

Start getting your questions ready.

To say I'm disappointed in not being able to celebrate WOA's 50th Anniversary in style is an understatement. Our last kick at the cat will be a banquet around the end of November beginning of December. The board did start off with some ideas but we've found ourselves reconsidering the whole event in the matter of venue, dates and times. I blame the pandemic for eating into our (at least my) energy to get things rolling. Are there a few of you who would be willing to join me to form a committee to help plan

this one very important event? Please give me a call if you have some ideas or are willing to meet and do some planning. I sure could use the help!

I found another article on Hydration!!! I keep finding these articles that emphasize the importance of water for ostomates that address the subject in a slightly different way. If it wasn't for finding these articles, I'm sure I would be quite dehydrated as I tend to get busy and forget about that glass of water sitting in the frig.

I finally found a way to "get paid" for all my volunteer work after all these years. Bell MTS Retirees are encouraged to add up the number of hours spent doing volunteer work and record it on the website for Bell Giving. Just counting my hours spent doing this newsletter adds up pretty quickly.

This is the second time in the last 12 months that \$1000 was forwarded to WOA owing to my submission of hours volunteered. When Jo-Anne offered to do a photo op of me and the big fake cheque I jumped at the chance. Randy and I set up a WOA back drop with part of our show package along with Hildy, our teaching model, in our storage room at MB Possible. I wish I had started this earlier. \$1000 is nothing to sneeze at.



Bell MTS Retiree Lorrie Pismenny donated her \$1000 Bell Giving grant to the Winnipeg Ostomy Association. Lorrie publishes the Ostomy newsletter *Inside/Out*. She is pictured here with President Randy Hull. All current employees and Bell MTS Retirees who volunteer are eligible to participate in Bell Giving. Contact [Jo-Anne Weeks Pelzer](#), Manitoba's Bell Giving Champion, for more information.

Cheers,

Lorrie



SUE BRECHMANN

January 14, 1972 - May 17, 2022



I came upon this photo from a happier time in the life of the WOA during my time as President. Pictured from left is Angie Izzard, Adam & Sue Brechmann - WOA members and founding members of *Stomas R Us*.

I could always count on Sue & Adam. They were always so supportive of everything we did as a group. They attended all the FOWC Sort & Packs, wind-ups, silent auctions, Christmas events, mall demonstrations, and of course meetings, just to name a few. Adam also stepped up to help us during a period when we were without a treasurer and kept things running until we found another body.

These two always supported me in whatever hairbrained idea I dreamt up. For example: *World Ostomy Day* is held on the first Saturday in October every three years. The *2015th World Ostomy Day's* challenge was one of those events. WOD's motto that year was "*Many Stories—One Voice*". I had the brainy idea that stories could also relate to the number of floors buildings had and asked the three of them to climb the observation tower at The Forks and get their picture taken with the banner provided for that event. And they did! I believe Angie's mother took this picture which we submitted to the WOD committee's photo competition.

But it was the first meeting that they attended that has stayed with me all this time.

That evening they were met by a roomful of grey haired people. While speaking to them and acknowledging the lack of young people in attendance, I urged them to return each month, in the hope that other young people walking through our doors would see them and be encouraged to return as well and help build up this elusive group of ostomates.

Adam and Sue took up the challenge and before long we had a sizeable group in attendance. These new, younger ostomates were starving for connections and answers. And so, with Sue and Adam's help the number of young people attending WOA meetings grew.

As I said, this was from a happier time. Angie was in touch with me at the beginning of May to say that after a lengthy illness, Sue didn't have much time left.

Sue died at the age of 50 on May 17, 2022. Part of her obituary reads as follows:

Susan was a kind supportive and caring person who enjoyed spending time with her family and friends, especially her nieces and nephews. She loved cats, movies, going out to dinner, playing board games and crafting.

She was proud of her years teaching, especially when contacted by former students who told her what a difference she had made in their lives.

Unfortunately, Crohn's disease sidelined her teaching career and she battled it for nearly 30 years until it took her life.

Our deepest sympathies to Adam, family and friends.



(Continued from page 1)

organization. "The first is whether it is clean inside, and the second is that no one is secretly waiting inside." The design relies on a new smartglass technology that turns the walls opaque when the door is locked. "At night, they light up the parks like a beautiful lantern," according to The Nippon Foundation. Along with the two facilities designed by Ban, "The Tokyo Toilet Project" has also opened three other public restrooms, created by interior designer Masamichi Katayama in Ebisu Park; Pritzker winner Fumihiko Maki in Ebisu East Park; and New York-based furniture designer Nao Tamura near Ebisu Station. In the coming weeks, restrooms will open from architect Takenosuke Sakakura in Nishihara Itchome Park and Tadao Ando, yet another Pritzker Prize winner, in Jingu-Dori Park. The remainder of the project's renovations are slated to open in the spring of 2021.

Source: *Vancouver Ostomy HighLife* July/August 2022

UROSTOMY - Controlling Alkaline Urine

Odorous urine is usually caused by a high alkaline condition created by bacteria in the urine. Irrigation of the pouch with a solution of water and vinegar will help but will not correct alkaline urine coming from the stoma. The more bacteria present in the urine, the higher and stronger becomes the alkaline condition and odour. Incidentally, it only takes 20 to 30 minutes for the bacteria to double its count in the pouch.

Indications of alkaline urine: Usually it has a darker yellow colour. Sometimes calcium deposits are seen on the appliance or skin.

Additional problems caused by this condition.

1. Irritated skin pebbled with what appear to be tiny warts.
2. Closing of stoma opening.
3. Tendency of stoma to bleed easily.
4. Calcium deposits that collect inside the appliance opposite the opening (these can scratch and cause the stoma to bleed).

Tips for good body chemistry: If only a slight overbalance of alkali is indicated, Vitamin C (ascorbic acid) may do the job. The dosage depends on how alkaline the urine is. Two to four grams of Vitamin C per day may be taken for a week, backing off to about 500mg to 1 gram per day as a regular maintenance dosage. **Check this with your doctor.** Adding cranberry juice to your diet may also help balance the urine chemistry if it is not too heavily alkaline. Sufficient daily intake of water is always important (in hard water regions distilled water may be recommended). Mixing of "Electrolytes Plus" to the water will not only make this a very satisfying thirst quenching drink but will also replenish vitamins, minerals and electrolytes needed to maintain proper body chemistry.

Treatment of skin irritation: Use soft cloths to apply "Soaks" with a 50/50 solution of warm water and distilled white vinegar. Apply gently to affected area for 10 to 15 minutes. This will remove calcium deposits and help neutralize any PH imbalance of contacting urine. Allow warm

air to circulate of the area. Sunlight or the heat from a 60-watt lamp held about 12 inches from the skin will provide the preferred temperature. After drying, apply a skin care product such as a Stoma Care or Sween Skin Care. If a skin irritation continues, consult your enterostomal therapist and he or she will suggest additional treatment to meet your individual needs.

Maintain proper appliance hygiene: It is good hygiene to irrigate the pouch daily with a 50/50 solution of warm water and distilled white vinegar. A deodorant may then be used in the pouch. However, keep in mind that the use of a deodorant - while providing a pleasant scent - should not be construed as a solution to continuing urine odour. When the infection or body chemistry is corrected, a few drops of deodorant can be added to the pouch daily after irrigation.

Source: Greater Seattle Ostomy Assoc. "The Ostomist" Mar/April 2017

An Opportunity to Give Back - Become an Ostomy Visitor

VISITOR TRAINING this FALL

Date: TBD (looking at dates in October)

When new to the game of managing an ostomy, good advice and encouragement from an experienced ostomate tends to be invaluable. Becoming a visitor for the Winnipeg Ostomy Assoc. gives you an opportunity to give back by helping a newcomer.

Visits can be made in hospital, at an ostomates's home, or a coffee bar. Since the pandemic, all visits have been done by phone.

To be on the list of visitors you must ...

- Be well-adjusted and comfortable with your self-care,
- Become a member of the WOA,
- Attend and complete the visitor training session.
- Retraining is required after five years to make sure you are familiar with new surgeries and techniques.

The training presentation is provided by one or two of the Manitoba Ostomy Program NSWOCs (ostomy nurses) over a 4 hour period—usually on a Friday night with assistance of WOA board members and some experienced visitors. Workbooks are provided.

Interested in becoming an ostomy visitor or wish more information? Please forward your name, address, phone #, email address, age, and type of surgery you have to the following:

Lorrie Pismenny
Tel: 204-489-2731
Email: pismel@mymts.net

Watch for more information in September's newsletter.

The Heat is ON! Hydrate with an Ostomy

By Ellyn Mantell (courtesy of UOAA, July 2020)



While walking this morning it occurred to me that for many Ostomates, the heat is very challenging. Ileostomates, in particular, are prone to dehydration because our stoma is always productive. In Mother Nature's inimitable creation, the colon, or large bowel, is responsible for absorbing fluids and allowing them to be reabsorbed into the body. Since ileostomates either no longer have a colon or it is no longer being used, the precious fluids are flushed from the body through the stoma. Hence the rapid filling and refilling of the pouch, which can be worse in the heat.

Naturally, drinking water is advised. UOAA's new ostomy nutrition guide recommends you "Make a habit of drinking water throughout the day. At the same time, limit or avoid beverages with added sugars and artificial colours and sweeteners." Many of us may have difficulty drinking enough to support our anatomy, so we may need to be mindful of symptoms that we are lacking the hydration/dehydration balance.

Some symptoms of dehydration include headache, fatigue, dark or decreased urine, lack of concentration, dry mouth, feeling disorientated, shortness of breath, dry skin, stomach cramps. Additionally, leg cramps, loss of appetite, drowsiness, tingling in fingertips and muscle weakness are all concomitant to dehydration.

Learning to live with the chronic dehydration possibility presented to ostomates is certainly attainable. For me, since I do not have a high blood pressure issue which might preclude adding salt, it means adding it frequently at meals. It is strange to servers at restaurants when I ask for the salt shaker, and many have asked if I mean the pepper shaker? We have become a salt-resistant society. But there are those of us who need it for our fluid balance. Additionally, I have a handful of a salty snack before bed, such as pretzels, since nighttime muscle cramps can be very painful and cause sleep deprivation. I keep a bottle of tonic water in the refrigerator, as well as a jar of pickles for those times when nothing else works. For muscle cramps I recommend an over the counter

foam moisture. The manufacturers recommend using it prophylactically* at night, but I have found it usually very fast-acting when I have foot or leg cramps, so I apply as needed.

Many Ostomates swear by sports drinks like Gatorade, but truthfully, although I have a bottle in the refrigerator at all times in case of fever, I find it difficult to drink. However, if presented with the option of drinking it or winding up in the Emergency room for fluids, I will imbibe gladly! It's recommended you dilute sports drinks to reduce the sugar content as well. At some of our Support Group meetings I have heard of many different electrolyte balancing drinks and powders, so you may find one that works for you.

UOAA recommends you drink 8 - 10, eight-ounce glasses of water/fluid daily. If you have a urostomy this also helps prevent UTIs and keeps urine diluted. Concentrated urine also can cause odour.

It has been recommended that Ostomates drink more than simply water, since it flushes through the system and little gets absorbed before it exits through our pouch. Drink with meals, since food slows down the transport of fluids. Bring fluids with you when you are out and about, since being busy may cause us to forget the responsibility we have to stay hydrated. Lastly, in addition to feeling awful when we are dehydrated, being in that state puts a great deal of pressure on our kidneys, and can lead to kidney failure and light-headedness, which can lead to falling.

Although this sounds ominous for summer fun, being mindful and smart will help us to relax and enjoy ourselves ... after all, with the Covid experience, we have learned to grab the good and be grateful we are as healthy as we are!

Ellyn Mantell is a UOAA advocate and Affiliated Support Group leader from New Jersey. You can follow her personal blog at <https://morethanmyostomy.com/>.

Source: Ostomy Association of the Houston Area - July 2022

***Note:** What does it mean to take a drug prophylactically?

Prophylactic: A preventive measure. The word comes from the Greek for "an advance guard," an apt term for a measure taken to fend off a disease or another unwanted consequence. A prophylactic is **a medication or a treatment designed and used to prevent a disease from occurring.**



A WIN-WIN ARRANGEMENT

International HOPE Canada Inc is a volunteer-driven humanitarian organization working to redistribute surplus medical supplies and equipment to areas in need in developing nations.

- They provide free medical supplies and equipment to needy people in developing nations without discrimination on the basis of religion, race, creed, nationality or gender.
- They receive donated medical supplies and equipment from hospitals, suppliers, private donors, nursing homes and government agencies. These surplus goods are shipped to destinations where medical supplies are largely non-existent
- Since inception in 1997, IHC volunteers have shared medical materials with needy communities in more than 40 countries.
- They operate as a charitable non-profit organization with 100% volunteer support

The above is basically the mandate of FOWC too!

WOA is a charitable non-profit and operates with 100% volunteer support.

Such a great fit!

When I joined WOA in the year 2000, Helmut Friesen was already a one-man sorter, packer, and shipper of FOWC supplies. He had a team of WOA members who helped him pick up supplies when he had too many requests to handle himself. He would then come in to the office at least twice a month (before board meetings and chapter meetings) spending 2 to 3 hours sorting and packing all these supplies - readying them for shipment to the FOWC collection depot in Ontario.

It should be noted - after Helmut passed away, it took 26 WOA volunteers, 4 to 5 hours one Saturday in our meeting room, to sort and pack the supplies that this man did on his own without help.

Somehow he made the connection with International HOPE and found that they needed to find a home for donated ostomy

supplies. Every so often, we would receive a phone call saying they had 2 to 3 boxes of ostomy supplies ready for pick-up.

One problem we encountered was the amount of medical supplies included with the donations of ostomy supplies. Barry Cox, (and his wife, Grace) who was the coordinator for FOWC supplies after Helmut died, spent countless hours dropping off these numerous medical supplies to some of the homeless shelters here and there so they wouldn't end up in the landfill.

Recently Randy discovered that IHC will take all medical supplies in return.

What a win-win situation for both organizations!





Giving the Gift of Dignity
Improving the quality of life of people with ostomies



Ukraine Shipment update

When the invasion of Ukraine started in February, we thought we would never be able to send supplies to an Ostomy group in Kyiv.

But fortunately, we were informed that a Canadian/Ukrainian shipping company was offering to send humanitarian aid at a reduced cost to Ukraine.

They delivered our two pallets from Warsaw by truck transport to Lviv, but cautioned us that they might not get our supplies to our destination in Kyiv due to safety reasons. The alternative would be to distribute the supplies to hospitals in Lviv.

The shipping company in Lviv works with a charity that has volunteers who deliver humanitarian aid. In Lviv they were in touch with our contact in Kyiv (our paperwork had all the contact information required) and arranged for delivery.

It was serendipitous that the volunteer who delivered our shipment from Lviv to Kyiv about 500 kilometres (again by truck transport) was from Canada.

He was gracious enough to call me from Ukraine, through our MagicJack number, to let us know he had completed the delivery successfully to our intended destination and was met by tears from our contact in Ukraine. He also explained that hundreds of Canadian volunteers have gone to Ukraine and are working to deliver humanitarian aid.

We then got an email from our contact confirming our shipment made it to its destination. Humanitarian aid sent by a Canadian Charity delivered by a Canadian volunteer!

Lorne Aronson
President FOWC
fowc.ca



A successful collaboration with Mercy Medical Canada

On June 6, 2022, FOWC received a phone call from Medical Mercy Canada requesting assistance to provide ostomy supplies to ostomates in Karkive, one of the war-torn cities in Eastern Ukraine. Mercy Medical Canada reached out to FOWC for help since they do not usually distribute ostomy supplies.

FOWC has its warehouse, so volunteers were able to spring into action, sorting and packing products to have a 450 kg shipment, which represents 60 boxes of product, ready to ship within 48 hours! Volunteers from Medical Mercy Canada picked up the skids and delivered them to the shipping company to be sent by air.

It is truly heartwarming to know that volunteers from both charities made this happen in such a short time.

If you've ever wondered what happens to your donations – this is an example of how FOWC, in collaboration with Medical Mercy Canada, is Giving the Gift of Dignity to ostomates in Ukraine.

Medical Mercy Canada and FOWC are each absorbing 50% of the shipping fees which permits each charity to do more work with their funds.



April Visitor Report

Surgeries: Ileostomy 1; Colostomy 1; Urostomy 3;

Hospital referrals: HSC 1; STB 1; Grace 1; Pre-Op 2;

Valued Visitors: Bonnie Dyson (2), Evan Uzwyshyn (2),
Georgette Dobush

May Visitor Report

Surgeries: Ileostomy 3; Colostomy 1;

Hospital referrals: STB 3; Grace: 1;

Valued Visitors: Lorrie Pismenny, Don Opper, Bonnie Dyson (2)

June Visitor Report

Surgeries: Ileostomy 5; Colostomy 3; Urostomy 2;

Hospital referrals: STB 7; HSC 2; Grace: 1;

Valued Visitors: Angie Izzard, Jared Dmytruk, Lena Harder,
John Kelemen, Debbie Balzar, Georgette Dobush,
Evhan Uzwyshyn, Bonnie Dyson (3)



Submitted by -
Bonnie Dyson,
Visitor Coordinator

Problems are like
washing machines.
They twist, they spin
and knock us around.
But in the end we come
out cleaner, brighter and
better than before.



In MEMORIAM

Angele Fransoo

We extend our sympathy to
her family and friends

HOMEMADE ICE PACK

It's time for summer fun, sports, games and out-ing. Many people use a bag of frozen peas as an ice pack for an "owie", but this homemade ice pack will get cold but won't freeze solid. It'll manipulate to in around arms, legs, knees and shoulders.

Put 1 part rubbing alcohol to 3 parts water in a zippered freezer bag and add a drop or two of food colouring as a reminder that it is NOT edible. Place into a second bag. CLEARLY LABEL it and put it in the freezer. It turns into a slushy mixture. Wrap the bag in a thin towel, then place on the affected area for short periods of time.

Labelling the bag and colouring its contents are extremely important.

Source: Springfield, MO *Ostomy Family Newsletter* via Vancouver *Ostomy HighLife* July/Aug. 2022

RECTAL DISCHARGE

Any individual who has a fecal ostomy with an intact rectum/anus will experience rectal discharge. Unfortunately, a lot of these individuals aren't told about this when they are discharged from the hospital and can become quite distressed the first time this occurs.

This discharge is due to the remaining bowel attached to the rectum. One of the main jobs of the bowel is to secrete mucous to lubricate the stool on its journey through the intestines. While the bowel is very good at its job, it isn't very smart. So it doesn't realize that there is no poop coming through, and as such, it keeps secreting mucous like it always has. Normally, when passing feces, we wouldn't really see the mucous because it would be coating the stool. But in the absence of feces, this mucous has to go somewhere, and it follows the natural progression down to the anus to be evacuated.

Once at the anal sphincters, the mucous can cause the sensation of needing to have a bowel movement, or it can leak out the rectum if the sphincter tone is poor. For some individuals who lack sensation or muscle tone, it can also dry up into a ball and cause pain.

If you experience the sensation of needing to have a bowel movement, it is best to sit on the toilet and try to bear down. For some, this is enough to expel the mucous, which varies in consistency from clear and thin (like egg whites) to a thicker, stickier creamy colour. Due to the bacteria that lives in the bowel, the mucous does have an unpleasant odour. If the mucous won't come out naturally, a glycerine suppository or enema may be required to help pass it.

How often these products are used is very individual: it may be a few times a week or as little as once a month. If the mucous leaks out due to poor sphincter tone, it can be very irritating to the anus and surrounding skin. Using a barrier cream or spray (such as Critic-Aid or Cavilon) can help to protect the skin from excess moisture and prevent breakdown. In addition, applying a few squares of gauze between the buttocks, or using a panty liner in your undergarments can absorb the mucous as it exits the body.

Some individuals may be able to strengthen their sphincter tone through pelvic floor exercises, which may help to control the passage of the mucous. These may not help everyone depending on possible nerve damage, but a consultation with a Pelvic Floor Physiotherapist or your surgeon can help determine if these exercises would help you.

Source: Cathy Downs RN ET, NSWOC reprint Ottawa Ostomy News April 2015 & 2022.



Volunteer Opportunities

VISITOR COORDINATOR

Bonnie Dyson has given notice that she will be stepping down from her Visitor Coordinator position as of our April 2023 AGM. She has done this to give us ample time to find a suitable person to take over. We look forward to speaking with any person who may be interested.

A job description is available from Lorrie upon request.

FOWC TEAM LEADERS

A large portion of our ostomy supplies for shipping to FOWC depot in Ontario is picked up from members, families of deceased ostomates, people who have had reversals, ostomy nurses offices, Pearl St depot, etc. We have a few members located in different areas of the city who do these pick-ups for us when we get called (through our voice mail 204-237-2022) or via an email request. We definitely could use more people to help with this task as we're getting more and more calls. If you have a vehicle and don't mind driving around your city area please contact Ross Bingham at 204-889-9554 to put your name forward. Ross will be able to fill you in on the process which is quite simple.

FOWC SORT & PACK TEAMS

Prior to Covid, we would book the meeting rooms, pull out the unused ostomy supplies, bring in a large group of people, spend 4 to 5 hours sorting and packing up these supplies for shipment to Ontario.

During Covid, Randy found it was much simpler to go into the storage room on a regular basis, with or without help, and sort through the boxes to keep ahead of the situation. It is our intention to do this more often with a small group of volunteers. If you think this is something you would like to do, contact Lorrie and she will put you on a call list for this opportunity.

Ten Things I Wish I Could Tell Myself Before My Ostomy

By Amy Oestreicher, featured on www.ostomyconnection.com and thanks to Ostomy Digest, Springfield, OR



When I first got my ostomy, I felt very alone. I felt self-conscious of the smell and sound, and sometimes I longed for my old body. When I couldn't take self-loathing anymore, I decided to make friends with it. I reached out. I inquired about support groups in my area and realized there are many people like me. I realize my ostomy is a beautiful thing and has enabled me to do all the things I've been able to accomplish over the years. It is my uniqueness. These are ten things I would have liked to tell myself when I first had my ostomy, ten things I didn't know, but eventually learned, which I am so grateful for today:

1. **What it was** - I had no idea what an ostomy was before I had one. But I have a confession: I didn't realize exactly what it was until years later! Coming out of multiple surgeries, I had so many bags and new anatomical surprises to think about that a little pink bulge on my belly seemed to be the least of my problems. I've learned things in the past ten years that have shocked, scared and relieved me, such as: you can't actually feel your stoma - no nerve endings! I've had three ostomies and four ileostomies over the years. I didn't realize how different they were. Once I learned about the differences and functions of each, I was better able to take care of them.
2. **What my limits were** - When I saw I'd have to live life with a bag stuck to my side, I assumed I'd be "fragile" for the rest of my life. But believe it or not, there are so many active ostomates out there! Swimming, karate, ballet, yoga - I've done everything I did before my ostomy and more.
3. **There are so many strong ostomates** - I was privileged to be the Eastern regional recipient of the Great Comebacks Award and meet five other amazing ostomates doing incredible things. There is a huge, supportive ostomy community. Did you know Great Comebacks was founded by former NFL linebacker Rolf Benirschke?
4. **Ostomates excel at innovations and inventiveness** - It turned out I was able to do all those things I thought I couldn't - but that didn't mean it was easy. Some of the best things in life take work, and that makes you appreciate it even more. Let's just say that ostomy wraps, stoma guards and pouch covers have become good friends of mine, all products that were created by ostomates. I've also created a workshop for ostomy patients and healthcare professionals.
5. **How Amazing My Body Is** - I have a new respect for my body and the way it can function now.
6. **Judgement Hurts, But Fear Hurts More** - Stay informed and know the facts. The more I actually understood how an ostomy worked, the more I realized how wonderful it was. After that, I took it as my responsibility to educate others. Instead of wondering if I was being "judged" by others, I took it as a privilege to inform them.
7. **Everything is Connected** - Take care of your full self: emotional, spiritual, mental and physical. If you're stressed, you might be bloated or feel pain or discomfort. Remember to take deep breaths in difficult times.
8. **The People Who Love You, Love You** - If you're getting comfortable with your ostomy, remember that your support system loves you for who you are. You are more than your ostomy. Reach out when you feel alone and never forget how loved you are.
9. **Eat Fresh** - You are what you eat, so eat whole and nourishing foods. Your



(Continued on page 13)

PAYING YOUR MEMBERSHIP or MAKING a DONATION

e-Transfers now available



Use *e-transfers* to make a donation towards a Memorial Gift, the Youth Camp Fund, Stoma Anniversary, General Funds, or paying memberships

IMPORTANT: Be very clear in your “**message box**” to say what the transfer is for. Example: Memorial (dedicated to who and from whom), Camp Fund, memberships, etc.

e-transfer instructions:

Email: treasurer@ostomy-winnipeg.ca

Message box: Be very clear to say what the transfer is for.

Security Question:

What is the middle word of WOA?

Answer: Ostomy

(**note:** first letter “O” is upper case)

Questions or concerns? Contact:
president@ostomy-winnipeg.ca

(Continued from page 12)

ostomy will thank you, and so will you!

10. **Life Can Go On** - Throughout the years, I’ve been strong, determined, and willing to do whatever it took to stay alive. I’ve dealt with tubes, bags, poles, you name it. And if this ostomy is all that I am left with after everything, then I am truly grateful. More than that, I thank my ostomy for enabling me to live life to the fullest, to my fullest. I call it my Harry Potter thunderbolt scar: a symbol of strength, courage, individuality, and life. There are a few things I didn’t know before my ostomy. But what I look forward to most is everything left to learn. Thank you, ostomy, for making the world a wide-open door once again.

Source: Greater Cincinnati Ostomy Association “Phoenix Risings” April 2022.

STOMA ANNIVERSARY CLUB

The anniversary date of my stoma is _____ and to celebrate my second chance for healthy living, I am sending the sum of \$_____ per year since I had my ostomy surgery.

NAME: _____

AMT. ENCLOSED: _____

Official receipts for tax purposes are issued for all donations, regardless of the amount.

My name and the number of years may be printed in the “*INSIDE/OUT*” newsletter. YES ___ NO ___

Clip or copy this coupon and return with your donation to:

Winnipeg Ostomy Association
204-825 Sherbrook Street
Winnipeg, MB R3A 1M5

Proceeds from the Stoma Anniversary Club will continue to go towards the purchase of audio & video equipment to promote the Winnipeg Ostomy Association and its programs.

How Good is Your Balance? Try this Test Now

Start by standing comfortably near the wall, holding your arms in any position you choose. Lift one foot an inch or two off the floor so that you are balancing on the other foot. Time how long you can do this before having to put the raised foot down or touch the wall for support.



If you can’t stand on one leg unassisted, lightly touch the wall or hold the back of a chair with one or both hands for support. Use less support as you improve your balance. If you can hold this single leg stance for 60 seconds or more, you have excellent balance. If you can’t hold it for more than 10 seconds, you could be at risk for a fall.

- the *Pouch* Northern Virginia/*Vancouver HighLife* January 2022
via *Regina and District Ostomy News* March/April 2022

Praise is like champagne; it should be served while it is still bubbling.



**Winnipeg Ostomy
Association**

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PHYSICIAN DR. C. YAFFE



*For pick-up of unused ostomy
supplies please contact the*

**Winnipeg Ostomy
Association**

“NEW” 204-237-2022

Leave a message and your call will be returned.

WINNIPEG OSTOMY ASSOCIATION MEMBERSHIP APPLICATION

Current Members—PLEASE WAIT for your green membership renewal form to arrive in the mail.

Your renewal date is printed on your membership card.

New Members: Please use this form. The following information is kept strictly **CONFIDENTIAL**.

Please enroll me as a new member of the Winnipeg Ostomy Association.

I am enclosing the annual membership fee of **\$40.00**.

To help reduce costs please send my copies of the *Inside/Out* newsletter via email in PDF format. YES ___ NO ___

NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

EMAIL: _____ YEAR of BIRTH: _____

Type of surgery: Colostomy: ___ Ileostomy: ___ Urostomy: ___ Other: _____
Spouse/Family Member: _____ N/A: _____ (Please indicate type if other)

May we welcome you by name in our newsletter? Yes ___ I'd rather not ___.

Please make cheque/money order payable to: **“Winnipeg Ostomy Assoc.”** and mail to:
Winnipeg Ostomy Assoc. 204-825 Sherbrook St. Winnipeg, MB R3A 1M5