

# The New Outlook

July/August/September 2018



## UPCOMING TUESDAY MEETINGS

July 17, 7:30 pm

September 18, 7:30 pm

**GLENBROOK HOSPITAL**

2100 Pfingsten Rd, Glenview, IL

Conference Rooms C & D, 1st Floor

### **April's Meeting** (our 475th)

We celebrated our 43rd Anniversary with Laughter Yoga lead by Ellen Klein, BSN, RN, BSW, Certified Laughter Yoga Leader/Teacher. It was hilarious! We thank Ellen for lowering our stress level.

### **May's Meeting** (our 476th)

Peggy lead us in an informative discussion on the effect of various foods after ostomy surgery. The conversation was great as were the questions!

### **June's Meeting** (our 477th)

Our amazing WOCN Madelene Grimm presented "Parastomal Hernias - The What, the Why, the How." She began by defining a parastomal hernia, which 20-30% will develop following ostomy surgery. She outlined the causes and challenges, as well as non-surgical management. Interventions can include support belts, change in pouching system and at times surgery.

We love our "Grimm Adventures!"

We also met 2 of our terrific new WOCNs in the Northshore Health System - Agnes Brugger and Casey Mulle.

[www.uoachicago.org](http://www.uoachicago.org)

We also have amazing guests for our next 2 meetings!

On July 17 Stephanie Brenner (see bio on page 9) presents "Surviving the Challenges of an Ostomy"

September 18 features Dr. Jennifer Paruch, Colon and Rectal Surgery, Northshore Health Systems.

Attending your first meeting? There are always supportive ostomy veterans to chat with you.

**\*\*IMPORTANT\*\*** See new policy for receiving the newsletter via USPS on page 3.

Remember, newsletters are now quarterly. Make sure we have your current email address to receive monthly meeting reminders.

Save paper AND save us money by choosing the electronic version of the newsletter. Email [uoachicago@comcast.net](mailto:uoachicago@comcast.net) to request the e-newsletter.



## Ostomy Association of Greater Chicago (OAGC)

Established 1975

### President

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### Hospitality

Sandy Czurylo

## Wound Ostomy Continence Nurses (WOCN)

Julianne Ciaglia 773-990-8498

*Presence Resurrection Medical Center*

Ana M. Boden 773-296-7095

*Advocate Illinois Masonic Medical Center*

Nancy Chaiken 773-878-8200

*Swedish Covenant Hospital*

Teri Coia 773-880-8198

*Lurie Children's Hospital*

Jan Colwell, Maria De Ocampo, 773-702-9371 & 2851

*Michele Kaplon-Jones*

*University of Chicago*

Laura Crawford 312-942-5031

*Rush University Medical Center*

Casey Mullen 847-657-5963

*Glenbrook Hospital*

Cheryl Isberto

*Skokie Hospital* 847-933-6091

*Highland Park* 847-926-5806

Agnes Brugger 847-570-2417

*Evanston Hospital*

Connie Kelly, Mary Kirby 312-926-6421

Karen Blum 312-695-6868

*Northwestern Memorial Hospital*

Kathy Krenz 815-338-2500

*Centegra-Northern Illinois Medical*

Marina Makovetskaia 847-723-8815

*Lutheran General Hospital*

Carol Stanley 847-618-3125

*Northwest Community Hospital*

Nancy Olsen, Mary Rohan 708-229-6060

*Little Company of Mary Hospital*

Kathy Garcia, Jola Papiez 708-684-3294

*Advocate Christ Medical Center*

Sandy Fahmy 847-316-6106

*Saint Francis Hospital*

Nancy Spillo 847-493-4922

*Presence Home Care*

Colleen Drolshagen, Jean Heer, Barb Stadler 630-933-6562

*Central DuPage Hospital*

Kathy Thiesse, Nanci Stark 708-216-8554

(Ginger Lewis-Urology only 708-216-5112)

*Loyola University Medical Center*

Alyce Barnicle (available on as needed basis only) 708-245-2920

*LaGrange Hospital*

Sarah Grcich 219-309-5939 or 219-983-8780

*Porter Regional Hospital & Ostomy Clinic Valparaiso, Indiana*

## National UOAA Virtual Groups

Continent Diversion Network: Lynne Kramer 215-637-2409

Familial Adenomatous Polyposis (FAP) Foundation: Travis Bray 334-740-8657

Friends of Ostomates Worldwide - USA: Jan Colwell 773-702-9371

GLO Network: Fred Shulak 773-286-4005

Ostomy 2-1-1: Debi K Fox 405-243-8001

Pull-thru Network: Lori Parker 309-262-0786

Quality Life Association: Judy Schmidt 352-394-4912

Thirty Plus: Kelli Strittman 410-622-8563

## Upcoming Meetings at Glenbrook Hospital

**TUESDAY, July 17 – Stephanie Brenner, LCSW**

**AUGUST – No Meeting**

**TUESDAY, Sept. 18 – Jennifer L Paruch, MD**

### Additional area support groups:

**Northwest Community Hospital, Arlington Heights**

2nd Thurs at 1:00 pm every other month. Feb, Apr, Jun, Aug, Oct, Dec in The Learning Center, Level B1 of the Busse Center Contact Carol Stanley 847-618-3215, [cstanley@nch.org](mailto:cstanley@nch.org)

**Southwest Suburban Chicago, Evergreen Park**

The third Monday at 6:30pm, Little Company of Mary Hospital, 2800 W. 95th St., Evergreen Park - Rm 1702.

Contact Nancy Olesky 708-499-4043, [nanook60@sbcglobal.net](mailto:nanook60@sbcglobal.net) or [swscost@gmail.com](mailto:swscost@gmail.com)

**Sherman Hospital, Elgin**

The second Wednesday of each month at 2 pm. Lower level Conference B. Contact Heather LaCoco 224-783-2458, [Heather.Lacoco@Advocatehealth.com](mailto:Heather.Lacoco@Advocatehealth.com) or Tom Wright, [tomwright122@att.net](mailto:tomwright122@att.net)

**DuPage County, Downers Grove**

The fourth Wednesday at 7:00pm, Good Samaritan Hospital, in the Red and Black Oak Rooms by the cafeteria. Contact Bret Cromer 630-479-3101, [bret.cromer@sbcglobal.net](mailto:bret.cromer@sbcglobal.net)

**Aurora**

The second Tuesday at 7:00pm, Provena Mercy Center. Contact John Balint 630-898-4049, [balint.john@yahoo.com](mailto:balint.john@yahoo.com)

**Will County, Kankakee IL**

2:00 p.m. the last Saturday of Feb, Apr, Aug and Oct in the Riverside Medical Center Board Room, next to the cafeteria. Also a June picnic and December holiday party. Charlie Grotevant 815-252-1551, [charliegrtvnt@gmail.com](mailto:charliegrtvnt@gmail.com)

**Grundy County, Morris IL**

Monthly Meetings at 11:00 AM, the 3rd Saturday at Grundy Administration Bldg., 1320 Union St., Morris, IL. Contact Judy Morey at 815-592-5717 or Kelly Hitt at 815-941-6818.

**Lake County Illinois**

Hollister in Libertyville, 10:00am the 3rd Saturday, every other month. Jan, March, May, July, Sept, Nov. Contact Barb Canter 847-394-1586, [barb1234@sbcglobal.net](mailto:barb1234@sbcglobal.net)

**Loyola University Health System, Maywood**

The 2nd Wednesday of the month at 7:15 in the Cardinal Bernadine Cancer Center 2nd floor Auditorium A. Contact Robin Handibode 708-205-6664 or Nanci Stark, WOCN 708-216-8554, [nhstark@lumc.edu](mailto:nhstark@lumc.edu)

**Valparaiso, Indiana**

Porter Regional Hospital, 1<sup>st</sup> floor Community Room. 6:30 pm the 4<sup>th</sup> Thurs., Jan – Oct. Contact Sarah Grcich 219-309-5939, [Sarah.Grcich@porterhealth.com](mailto:Sarah.Grcich@porterhealth.com)

**Wellness House, Hinsdale**

Kay & Mike Birk Home of Hope 131 North County Line Road  
**Ostomy Networking Group for Cancer Survivors** 4th Mondays  
Contact Karie Milewski-Carlson, 630.654.5114 or [kmcarlson@wellnesshouse.org](mailto:kmcarlson@wellnesshouse.org)

## Here and Now

with Patricia Johnson

"A smile starts on the lips, a grin spreads to the eyes, a chuckle comes from the belly; but a good laugh bursts forth from the soul, overflows, and bubbles all around." -Carolyn Birmingham

This is how laughter should start. Rising up within us, pouring out, and touching those around us with joy. "Laughter opens lungs, and opening the lungs ventilates the spirit." -Unknown



Having an ostomy is serious business. There is much to learn and do. We tend it carefully every day. At times it can be overwhelming. And in the midst of all of this we forget to laugh.

But laughter is good for us. It relieves the pent-up stress and helps us heal. We can use a break from taking ourselves too seriously.

I didn't think too much about the healing benefits of laughter until our April meeting when our guest speaker, Ellen Klein, introduced us to ...laughter. Really. She taught us how to laugh and how important it is to do this often, daily. As much as possible.

I enjoy a good joke and reading a book which includes humor. Dale and I have recently seen some very funny movies that have left us laughing helplessly. At these times I find myself wondering why I don't do it more. It seems the older I get the less there is to laugh about. On average babies laugh 200 times a day and adults only 12 times a day. I've decided that I want to be like the baby, see things through new eyes and laugh.

So, I am ending this column not with a joke but a Haiku. One that I read that made me laugh.

Skinny young men  
Grouped around the car's raised hood  
Spring's here

-Winona Baker

There is truly much to laugh about.

*Life is Good!*



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# ATTENTION!

## NEW POLICY FOR USPS MAILED NEWSLETTERS

We need to reduce the number of unread newsletters we send via the USPS, as costs are becoming quite prohibitive. **Those who are currently receiving through USPS and wish to continue will need to notify us by September 18, 2018.**

We will assume that those who do not notify us are not reading this newsletter and will therefore be purged from the mailing list. Either email [uoachicago@comcast.net](mailto:uoachicago@comcast.net) or call Tim at 630.624.4176 and leave a message. Please provide your name and address, and indicate whether you wish to continue with the mailed version. Should you choose to switch to the electronic version, please do so in an **email**. We will also accept notification at the July and September meetings. **Thanks in advance for your cooperation and understanding.**

If you already receive the electronic version, no action is required.



## Taking UOA for Granted

From UOA Library via Fred Shulak

Prior to 1962, there was no United Ostomy Association. (the precursor to UOAA) At one time there were no appliances to collect waste. Early ostomates tell how they cemented rubber gloves to their abdomen. We read about a lady who had a successful urostomy but didn't know about the UOA. For three years she used gauze to absorb the fluid. She didn't leave the house.

It was the UOA that got manufacturers to develop appliances, belts and tape that we take for granted. It was the UOA that testified before Congress to get Public Law 92-603, dated October 20, 1972, to provide ostomy supplies through Medicare. They also removed the tax from all ostomy supplies. It was the UOA that was responsible in forming the 500+ chapters with membership of 40,000 in North America to help new ostomates as well as those who have had their ostomies for years.

When you have lived with a stoma five to ten years, it is just another chore like brushing your teeth. But think back to when you first found out you were going to be an ostomate! You had a hundred questions. Can I drive a car? Can I play golf? Or swim again? Will I ever be able to return to work? How will I live with this thing? Every hour you were awake you had another question.

At one time we had no (support group) chapters or ET nurses (WOCNs), and there was no one to provide you with answers. But thanks to UOA and thanks to many dedicated members through the years—this has changed. Every ostomate who is living has a debt to repay to the persons who went before us to pave the way in improving our quality of Life. The debt is there, whether you pay it or not is up to you. **Think about it!** Attending monthly meetings and sharing with others is one way to repay the debt we all owe.



## New from The Phoenix

### Ask Doctor Rafferty

Sex after Surgery

Dear Dr. Rafferty,

I had ileostomy surgery three weeks ago. I am doing pretty well, considering it was major surgery. I was told that my sexual function might be "diminished, impaired or severely affected" by my surgeon. I'm nervous that there was some damage, but I can't tell if everything is OK or not. How do I know if everything still works? When can I resume sexual activity? S.U



Dear S.U.,

Without knowing more details, it is impossible to say when it is safe for you to resume sexual activity. Typically, it is recommended to avoid sex and strenuous activity for about a month after ostomy surgery to allow wounds to heal properly.

The nerves to bladder and sexual function are intimately associated with the rectum. When the rectum is surgically removed, these tiny nerves can be injured. Injury is a bit more common after pelvic radiation combined with surgery. Men will notice a change in erectile and ejaculatory function shortly after surgery if these nerves have been affected, but not all notice a change and not all changes are permanent. Many men notice a return to near-normal function after several months. Women may notice no significant change in sexual function following removal of the rectum, unless the angle of the vagina is significantly different.

Get more Ostomy Answers in the 88-page Summer issue of *The Phoenix*, the official publication of UOAA. Ostomy experts, medical professionals and ostomates provide answers to the many questions and challenges of living with an ostomy. From odor control to intimacy to skin care, the leading ostomy publication has in-depth articles that inform, educate and inspire. Visit [www.phoenixuoaa.org](http://www.phoenixuoaa.org) or call 800-750-9311 to get your ostomy answers now!

## Skin Issues & Solutions

Vancouver (BC) Ostomy HighLife March / April 2018

### What Are Some Examples of Skin Issues?

#### SKIN IRRITATION UNDER TAPE

Irritated skin that develops only under the tape of your skin barrier can occur for a variety of reasons. The skin may be itchy, blistered or open and weeping. This problem can develop at any time, even if you have worn the same type of product for months or years. In this case, you may be sensitive to an ingredient in the tape, or your skin may have become damaged when tape is removed.

#### RASH AROUND A STOMA

Sometimes a rash is caused by a skin infection or sensitivity, or even from leakage. The area may be red or red with bumps. Itching may also be a symptom. It is important to get assistance in determining the cause since the suggestions for treatment will vary.

#### LEAKAGES CAUSING IRRITATION

Stoma discharge can be irritating to your skin, causing redness that can lead to open raw skin that weeps or even bleeds. This type of irritation is often very painful. (People with ileostomies are at the highest risk for this kind of skin damage.) A change in the size or shape of your stoma or the shape of your abdomen can change the fit of your pouching system, leading to leakage.

### What Are Some Solutions?

- Try a pouching system without tape. These products are adhesive but use a skin barrier instead of tape.
- Apply stoma powder to any open skin before applying your new pouching system.
- Contact a stoma care nurse if you are having difficulty keeping your skin barrier on.
- Change your pouch promptly if drainage is leaking under the skin barrier.
- Change your pouch on a regular schedule before it leaks.
- Contact your stoma care nurse if you are having difficulty keeping your skin barrier on.
- Consider using accessories (convex skin barriers, paste, rings/seals) to help prevent leakage under the skin barrier.

## Ostomy ~ The New Normal



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## Dining Out

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Enjoying a meal at a restaurant is one of life's great joys - and there is absolutely no reason why you shouldn't be able to do that after your surgery, assuming your doctor has given the green light to resume a normal diet. You might have already tried dining out again, but it is completely understandable if you do not feel quite ready yet.

### Choose a familiar place

No matter what, a good strategy is to start with a familiar restaurant and keep it simple when ordering. For example, you may want to order a type of food that you have already tried at home first so you know how it affects you. As you gradually expand your diet, you will feel more confident when eating out as well. Always have an extra supplies kit with you in case you need to change your pouch. You should do this whenever you leave home.

### Show restraint when drinking

Even if you are used to having a drink at home, it could well be best to 'start small'. For example, drink a small beer rather than a large one. This will help your body build up your tolerance to alcohol again.

[www.coloplastcare.com/en-US/ostomy/](http://www.coloplastcare.com/en-US/ostomy/)



New area support group in **Hazel Crest, IL**  
**South Suburban Hospital**  
 17800 South Kedzie Avenue  
 SSUB-CONF-RM Dining Room 1 located in the  
 lower level of the hospital, adjacent to the cafeteria.

Meeting Every 4th Saturday 10am to Noon  
 Upcoming dates - June 23, July 28, August 25,  
 September 22, October 27, January 25, 2019

All are welcome! Ostomy wearers, family, friends,  
 caregivers, and others.

Free Parking \* Light refreshments

For additional information, please contact Herb at  
 708-510-7479

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## Tips for sleeping with a stoma z z z

1  **Empty or change pouch** before you  
 settle for the night

2  If you have a urostomy pouch connect  
 to an **overnight drainage bag**

3  Try and **eat your main meal** before 7 pm

4  Be careful with your food choices  
 all people are different but try and avoid  
 soft drinks and very fibrous foods  
 (broccoli/beans etc.) before bedtime

5  People seem to **develop a sixth sense** -  
 they become aware when they sleeping that  
 the **pouch needs changed** or emptied.

6 Use a **pillow** between your legs or along your  
 back ( if you sleep on your side) this should **help**  
**stop prevent you from rolling** from side to side z z z

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## RUSH OSTOMY SUPPORT GROUP

Rush University Medical Center  
 Professional Building 1725 W. Harrison St.  
 Suite 1138 - Conference Room  
 Chicago, IL 60612

\*Parking for main garage will be validated  
**First Tuesday of every month, 6:30 to 7:45 p.m.**

This group is open to anyone with a bowel or urinary  
 diversion (ileostomy, colostomy or urostomy); their  
 supporting family, caregiver, spouse or significant other;  
 and anyone considering a possible diversion surgery.  
 You do not have to be a patient at Rush to attend.

Meetings will often include informative guest speakers  
 as well as an open forum where participants can ask  
 questions and discuss ostomy-related issues.

Before or after the talk there will be time for socializing.

Meetings are informal and no registration is required.

Group Facilitator - Rachel Hendee, PA-C, MPH,  
 Physician Assistant, Colon and Rectal Surgery  
[rachel\\_hendee@rush.edu](mailto:rachel_hendee@rush.edu)

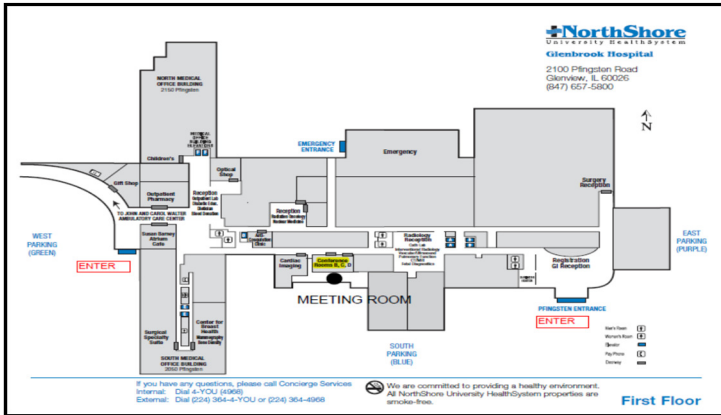
\*Light refreshments will be served.



## OAGC General Meetings

Glenbrook Hospital, 2100 Pfingsten Rd, Glenview, in the **first floor Conference Rooms C-D**.

There is **abundant free parking** including many handicapped spaces directly in front of the hospital. An information desk is just inside the Hospital's Pfingsten side Entrance. Upon entering, take the hallway to the left.



**Glenbrook Hospital** is bordered by Pfingsten Rd east, Hospital Dr. south and Landwehr Rd. west.

From I-294 take Willow Rd exit east to Landwehr Rd south. From I-94 take Willow Rd. exit west to Pfingsten Rd. south. From Waukegan (43) take Lake or Willow west to Pfingsten. The parking lot entrance is on Hospital Dr.



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If you have a suggestion for a meeting or know someone you would like to invite to speak, contact Nancy Cassai, Vice President/Program Director at [cassainancy@gmail.com](mailto:cassainancy@gmail.com)

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## What my 4 year old Thinks About Stomas

Stephie Simpson colitistoostomy.com

I thought I would do a quick interview with Ra-Ra; after she was so helpful with my bag change video



**What's your name?** Lyra-Beth

**How old are you?** 4

**What is your favourite colour?** purple, pink, blue and yellow

**What is your favourite film?** Frozen

**What do you like to do best?** Painting and arts and crafts

**What are you looking forward too?** School

**What's the best thing about you?** I play with my baby brother and read him stories

**Do you know how old you were when mummy got her stoma?** Nope (you were 2)

**Do you know why mummy got her stoma?** You were poorly (ill)

**Would you say I have an ileostomy, colostomy or urostomy (I explained these as watery output, thick output and urine)?** Colostomy (nope an ileostomy although she is adamant I have thick output!)

**Do you think mummy having a stoma is a good thing?** Yeah

**Why?** Because you're healthy

**Did mummy used to spend a lot of time in hospital?** Yeah

**Do you know what a stoma does?** Poop (I explained the difference between a urostomy and the bowel types)

**How often do you think I have to change my bag?** Just sometimes, because sometimes it leaks (ha ha)

**Do you have anything with a stoma on?** Yes 2 teddies and a doll (ICEOF gastronaut puppet)

**Is there anything bad about my stoma?** Your poop is stinky!

**What makes mummy different from other mummies?** Because you cuddle me more (I guess that's because of the fatigue)

**Did you know little kids have stomas?** I had forgotten that

**Did you that mummy having her stoma helped her get pregnant with baby Button?** Oh yeah!

**Did you know lots of people have stomas?** Yes of course I do!

**Did you realise most of the people at the support group had stomas?** Nope

**Do you think having a stoma is a bad thing?** No way! It's awesome it means you can be a proper mummy (I always thought I was a bad mum to her from being so poorly)

**If one of your school friends had a stoma what would you say to them?** You look great today (aww)

**Did you enjoy helping me change my bag?** Yes it was fantastic!

I hope you can appreciate my 4 year old scatter brains answers to my little interview. What does your child think about your stoma?

The author in her own words: *"I'm a newly ostomated (is that even a word?) punk rock mum and wife. I'm lewd, crewd, tattooed and prepared to take the taboo out of poo! Please follow me on my journey back to health from the clutches of the dreaded Ulcerative Colitis! Being a wife, a mum of two and day to day life with an ileostomy."*

Follow Stephie at [colitistoostomy.com](http://colitistoostomy.com)

**ConvaTec me+™ Team Member Tip:** "I tell people who are scared to swim with an ostomy to spend a few hours in the tub on a lazy day. If your pouching system holds up to that, then the pool should be a breeze." -Sarah B. [meplus.convatec.com](http://meplus.convatec.com)

### *Did you know....*

"If the brain is not getting the energy it needs from sleep it will often try to get it from food," says Chris Winter, MD, owner of Charlottesville Neurology and Sleep Medicine in Virginia. Running low on rest can increase the production of ghrelin, also known as the hunger hormone, in your gut. Too much ghrelin makes your body crave fatty and sugary foods, Dr. Winter says. Poor sleep can also mess with leptin, the satiety hormone. "When you're not sleeping properly you tend to eat more of what you're craving because you're not feeling the signals to stop eating," Dr. Winter says.

Via Health.com



A private psychotherapy practice in Evanston, Illinois, intended to help those facing chronic health challenges. Whether you don't have a name for your symptoms, are facing a new diagnosis, or have been dealing with your health concerns for decades, we are here to help you make improvements to your mental and emotional health as you navigate the medical world.



Stephanie Brenner (formerly Stephanie Horgan) is a Licensed Clinical Social Worker who has 8 years of experience working with those with chronic illnesses. Throughout her

journey as a patient and clinician, she has developed a passion for helping those with health challenges live their life to the fullest. She uses Cognitive-Behavioral Therapy, Mindfulness, Medical Hypnotherapy, Psycho-education, and a Strengths-based approach when working with her clients. She sees clients from age 5 through late adulthood. She has a special interest and advanced training in treating gastrointestinal conditions.

Stephanie received her undergraduate degree in Elementary and Special Education from the University of Iowa. She taught students with severe autism in the Chicago Public Schools for three years before earning her graduate degree in social work from Loyola University Chicago. She worked at NorthShore University HealthSystem in the Kellogg Cancer Center for six years as an outpatient oncology social worker. During this time, she also co-founded Oak Park Behavioral Medicine with Dr. Tiffany Taft, where she worked for six years seeing patients with chronic illness. She now is starting her own practice in Evanston, where she will focus on continuing to provide support and encouragement to those facing medical illnesses.

[chronicillnesspsychotherapy.com](http://chronicillnesspsychotherapy.com)

847-497-8374

Meet Stephanie Brenner at our July 17 meeting.

After ostomy surgery, people should be able to resume their normal activities after healing completes and their strength returns. However, they may need to restrict activities, including driving and heavy lifting, during the first 2 to 3 weeks after surgery. Strenuous activities, such as heavy lifting, increase the chance of a stoma hernia. A person who has recovered from the surgery should be able to do most of the activities he or she enjoyed before the ostomy surgery, even swimming and other water sports. The only exceptions may be contact sports such as football or karate. People whose jobs include strenuous physical activities should talk with their health care provider and employer about making adjustments to job responsibilities.

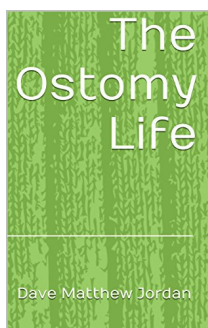
People should avoid extreme physical exercise and sports activities for the first 3 months. Walking, biking, and swimming are fine and should be encouraged as long as they are not overly strenuous. People with an ostomy should talk with their health care provider about when they can resume normal activities.



## Summer reading is here!

From OstomyConnection.com

These amazing ostomates are all authors with published books of their own.

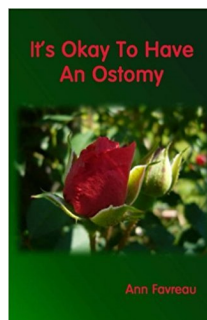
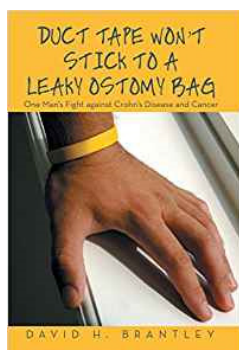


### **The Ostomy Life** by Dave Matthew Jordan

Dave Matthew Jordan received ostomy surgery when he was three weeks old. He has learned a lot about himself and ostomies along the way. The Ostomy Life is an easy-to-understand guide to living with an ostomy and taking care of it. Topics include playing sports, traveling, eating habits, exercise, intimacy, and much more. The Ostomy Life also covers basic care techniques, what to expect after surgery, raising a child who has an ostomy, how to buy supplies, and what to say to friends and significant others when it comes time to tell them you have an ostomy. Available in Paperback and on Kindle.

### **Duct Tape Won't Stick To A Leaky Ostomy Bag** by David H. Brantley

David H. Brantley's first serious challenge came when his doctor told him it would be a miracle if he survived another six months. Crohn's disease was taking a toll on his system. 30 years later, another doctor told him that he'd have to open him up for surgery to determine the severity of his colorectal cancer. In this inspiring account about fighting Crohn's and cancer, David looks back at the big dreams he had growing up, including becoming a successful actor and writer and celebrates what he actually became best at—beating the odds. If you're struggling to overcome an obstacle that seems impossible, you'll be inspired to keep fighting by reading lessons he's learned in Duct Tape Won't Stick to a Leaky Ostomy Bag. Available in Paperback, Hard Copy and on Kindle.



### **It's Okay To Have An Ostomy** by Ann Favreau

In this book Ann Favreau informs and inspires by sharing prose and poetry about her ostomy journey. Her message of transformation from cancer to caring resonates with hope and encouragement as she relates her touching experiences that emphasize, "It's Okay to Have an Ostomy." Ann is a retired educator who underwent colostomy surgery in 1988. She was President of the Ostomy Association of Greater Springfield in Massachusetts and then went on to hold offices at the United Ostomy Association, serving as President from 2000-2002. Ann is the current President of Friends of Ostomates Worldwide USA.

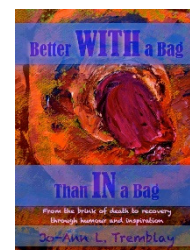
### **Health The Way Nature Intended** by Leanne D. Chan

Health the Way Nature Intended was written for Darren Pedersen who knows firsthand what it is like to lose his health. Darren underwent radiation, chemotherapy and had two major surgeries to remove his colon and lymph nodes. Lost in the tunnel of cancer treatment with no guide, and an overwhelming myriad of choices to make, Darren found his own balance between treatments, diets, lifestyle and mindset. Eating well with a stoma is a whole new world. What to buy? What to cook? Your step-by-step guide is here.



### *Here's one of our favorites:*

**Better WITH a BAG Than IN a BAG** by Jo-Ann L. Tremblay, is a practical and humorous look at a survivor of colon surgery. This book has been written for ostomates, their caregivers, the medical community, and anyone who is facing the challenges of a lifetime.



[www.jo-annltremblay.com](http://www.jo-annltremblay.com)

## Ostomy Association of Greater Chicago

### Confidential Membership Application

We invite you to join our association. You are especially welcome if you have an ostomy, are preparing for surgery, are a healthcare professional and/or have a loved one who has had surgery. We are a completely volunteer-operated ostomy support group. Our mission is to support, educate and advocate for people with ostomies.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Type of Ostomy:      Colostomy      Ileostomy      Urostomy      Continent Procedure

Date of surgery \_\_\_\_\_ Age Group   <21   21–35   35–50   51–65   66–80   80<

Donation enclosed \$ \_\_\_\_\_ (optional)

Attend one of our general meetings. There are always friendly people to talk with you. You may even want to participate in our association's leadership. We always need talented people to share in our good work. Membership is free (our funds come primarily through donations). Please mail this application to

Judy Svoboda, President  
605 Chatham Circle, Algonquin, IL 60102

► A very special thank you to everyone who donates to our association! Our largest expenses, the cost of printing and mailing this newsletter, and security for our website are continually increasing and is only made possible through the generous donations of our members.

To make a tax deductible donation, please make check payable to Ostomy Association of Greater Chicago or OAGC and bring to a meeting, or send to

Tim Traznik  
Treasurer/OAGC  
40 Fallstone Drive  
Streamwood, IL 60107

Donations can also be made online using a credit card: [www.uoachicago.org/donations](http://www.uoachicago.org/donations)

**Without you, we don't exist!**



On **July 4, 1776**, the thirteen colonies claimed their Independence from England, an event which eventually led to the formation of the United States. Each year on **July 4th**, we proudly celebrate this historic event.



## Kegels: Not for women only

Harvard Men's Health Watch

*Women use kegels to strengthen their pelvic floor muscles, but men may also benefit from doing these exercises.*

Kegel exercises to strengthen pelvic floor muscles have long been seen as just for women, but they may be a way for men to address some common unpleasant issues as they age.



"Men also can have issues with these muscles, which can cause urinary leakage, bowel trouble, and even erection problems," says physical therapist Celia Brunette, with Harvard-affiliated Spaulding Rehabilitation Center.

### The pelvic floor

The floor of your pelvis is made up of thin layers of muscle and other tissues that stretch like a sling from your pubic bone to your tailbone. Its primary job is to support the abdomen, bladder, and colon and help maintain control over urination and bowel movements. In men, these muscles also are activated during erection, orgasm, and ejaculation.

"Men can have one of two dysfunctions with their pelvic floor muscles—they can be either too weak or too tight," says Brunette.

Your pelvic floor muscles weaken with age, like all muscles, but can also be hampered by bladder, bowel, or prostate surgery; constipation; and chronic coughing from conditions like asthma, bronchitis, or smoking. Weak pelvic floor muscles can lead to stress incontinence, in which urine leaks when you cough, sneeze, or move in certain ways like lifting something heavy or hitting a golf ball.

Tight muscles can be a result of prolonged sitting, general muscle tension and stress, and even musculoskeletal problems in the back and hips. Tightness can trigger pelvic pain, urgent and frequent need to urinate, leakage, incomplete emptying, or straining during bowel movements. You also may suffer from pain in your low back or during and after intercourse.

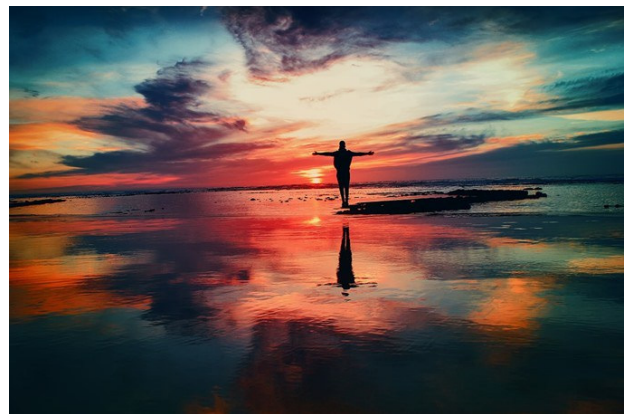
### A subtle movement

How do kegels work? Imagine what you would do to stop the flow of urine or to hold back gas. The goal is to contract and hold only those muscles and not rely on other muscles, like the abdomen or buttocks. The movements and sensations are more subtle than with other muscle exercises.

Kegels can be performed while lying down, sitting, or standing. A typical routine consists of a set amount of "hold" time, followed by adequate rest time between repetitions. The number of reps per session can vary from 10 to 100 depending on your need.

Brunette suggests to first consult with your doctor to make sure there are no other medical issues related to your symptoms, such as prostate problems or a urinary tract infection. If your doctor recommends kegels, he or she can direct you to a physical therapist who can evaluate your needs and design an individual program.

"The therapist can teach you how to correctly perform kegels and give you a routine to follow in terms of number of repetitions and sets, so you can then do them at home," says Brunette.



*Life is amazing. And then it's awful.*

*And then it's amazing again.*

*And in between the amazing and the awful,  
it's ordinary and mundane and routine.*

*Breathe in the amazing, hold on through the  
awful, and relax and exhale during the ordinary.*

*That's just living a heartbreaking, soul-healing,  
amazing, awful, ordinary life.*

*And it's breathtakingly beautiful."*

*- L. R Knost*