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WINTER 2016

NSW LTD



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CONTENTS

Noticeboard	Page 5
New G.M. Stephen Lardner	Pages 7 & 9
Volunteer Profile: Helen	Pages 11 & 13
Regional Day in Lithgow	Page 15 & 17
Do You Have A Kock Pouch?	Page 19
The Phantom Tip Researcher	Page 21
Annual Stocktake Closure	Page 22
Hello From The Clinic	Page 23
Membership Fees	Page 24

DEADLINES

Spring Edition	August 1
Summer Edition	November 1
Autumn Edition	February 1
Winter Edition	May 1

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WINTER 2016**President: Tom Flood**
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Colleen**Warehouse Supervisor:**
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Bev, Justine, Barry, Janice,
Natalie, Aye Aye, Frank,
Carol-Anne & Matt****PLUS OUR
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REGIONAL INFORMATION MEETINGS 2016

Wagga Wagga on Friday May 27th, 2106

Moree on Friday September 16th, 2016

**SHAREESTIMATES SUPPORT GROUP,
SHOALHAVEN, NSW**

All sessions are at the Nowra Community Health Centre,
5-7 Lawrence Ave, Nowra, from 2pm to 4pm.

2016 dates: Monday, 2 May, Monday, 1 August,
Monday, 7 November

**AMENDMENTS TO THE STOMAL THERAPY SERVICES
(NSW AND ACT) NOVEMBER 2015 DIRECTORY**

ACT & Districts Stoma Association

Please note there is no longer an STN clinic at the rooms

Albury Wodonga Private Hospital

Geradine O'Brien STN is located at 1125
Pemberton Street, Albury

Bateman's Bay and Moruya Hospitals

Trena O'Shea CNS Phone: (02) 4474 2666
trena.O'Shea@gsahs.health.nsw.gov.au

Port Macquarie Base Hospital

Jeanie McCarroll STN Mon & Wed
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ONL'S NEW GENERAL MANAGER STEPHEN LARDNER



I have recently joined the team at Ostomy NSW as the General Manager. I am fortunate to be able to use skills learned from my past general management roles in consumer goods companies to a not-for-profit organisation operated for the benefit of our members. In a very short time the team in Sydney have made me feel at home and have begun to patiently teach me new skills

and processes.

My role is to work with the team to maintain and enhance the rich service culture that exists with ONL.

Our Board of Directors has set our business goals to "provide efficient and accurate delivery of stoma appliances" and "be recognised...as the Ostomy association that excels in member service".

Continued page 9



Change your life with Dermacol®

The unique collar creates a barrier between your stoma and your skin, helping to give complete security from leakage

When correctly fitted, the thin polyurethane collar stays in contact with the stoma – even during bending or twisting – creating a secure barrier between your stoma and your skin.

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from page 7

My previous roles were 20 years with Energizer (batteries, Schick razors, Banana Boat sunscreen) working as the General Manager for Asia (based in Sydney), New Zealand (Auckland) and in various sales and marketing roles. Prior to Energizer I worked with Smiths Snackfoods in Sydney and Streets Ice Cream in Melbourne and Perth.

I also grew up living in Adelaide, so I am a well-rounded Australian! I graduated with a Bachelor of Commerce from the University of Melbourne after finishing school, and more recently I completed two years of a four year Bachelor of Education degree at the University of Wollongong, majoring in Primary education. At home my interests are with my wife and three children, who all have their own skills and careers.

I enjoy sport and exercise, having played cricket and Aussie rules in the past. I keep myself fit today with regular walking, running and cycling, and I remain an avid watcher of most sport, both live and on TV. Other interests are reading biographies, music and travelling around Australia. We live in Wollongong, a city I became familiar with through my wife, and we have lived there for most of the past 25 years.

We had a six year experience living in Auckland, New Zealand. It was initially hard to move my family over there, and it was even harder getting them back.

I have been involved in volunteer work having been president of a local charity conference; a member of a parish finance committee; minute secretary for a school board of trustees; and various sports committees. I gain enjoyment interacting with people and meeting face to face.

If you wish to learn more about me,

please feel free to get in touch. Come and see me at Kirrawee or make a diary date for this year's AGM (at the Bowlers Club, 95 York Street Sydney on Saturday the 19th of November 2016) or one of our regional association meetings.

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HELEN – WHO HAS A STOMA - IS A VOLUNTEER AT OSTOMY NSW LTD

Helen had suffered many years with ulcerative colitis, after an emergency operation she became an ostomate in 2003. After her operation and after being sent home, Helen was overwhelmed with her situation, she had many questions that in the shock of having an emergency stoma operation had been unanswered. In the first few months Helen and her husband Warren visited the then Ileostomy Association of NSW at Lewisham to seek the advice and support of the Stomal Therapy Nurse. She talked to the staff about the different products available to her, how to order and the quantity she would need.

The first couple of years were tough for Helen, as she adjusted to being an ostomate and all the issues that entails. What she might look like to others? Could people see she had a bag? What if the bag smelled? How would she handle leakages?

After Helen retired as a Primary School Teacher in July 2012, she wanted to keep interacting with people.

Helen thought about the help she had received from ONL and wanted to find a way to give back to the association.

Initially having reservations about being a volunteer, in regards to constraints to her free time, she rang and spoke to Colleen, ONL's Operations Manager.

Colleen quickly put her at ease by assuring her that whatever time she could volunteer would be appreciated, whether 1 day a month or once a week, and that it was purely at her discretion when she volunteered.

Colleen invited Helen to visit ONL at Kirrawee to see what the office was like. Helen found the staff at ONL very welcoming and friendly and never looked back.

Currently Helen volunteers on Mondays for 5 hours.

What volunteering at ONL has done for Helen is to give her interaction and contact with people during the week, the feeling of being wanted and valued, keeping her self-confidence and self-worth high.

Being at ONL has made Helen part of a team of people who genuinely care and value her as a human being and she feels that she makes a difference as a volunteer and she would be missed if she wasn't there.

She enjoys the mark of appreciation from ONL at the end of the year, when being invited to the Annual Staff and Volunteers Christmas Party.

Some of the most useful things she has learned from being a volunteer are the range of products that are available to ostomates and what goes on behind the scenes to deliver a service to customers. When not volunteering at ONL Helen likes to visit the library to borrow books to read, spend time with her friends during the week at cafes, look after her grandchildren, go for daily walks with her husband Warren.

She prefers driving and touring holidays with her husband Warren, they regularly travel to Coolangatta and recently drove around the North Island of New Zealand.

Continued page 13



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AF300 Filter

- > Decreased ballooning, greater airflow, improved deodorisation

Hollister Barrier Technologies

- > Choice of standard and durable barriers

Greater flexibility and security

- > Conforms to your body shape for the most supple solution

Quiet rustle free film

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from page 11

Helen has recently been a star in a training video for aged care professionals regarding clients who have a stoma, to be shown on ACCTV a television channel for Aged Care Professionals, after Heather Hill approached her about participating in the video.

She was given a script beforehand, which she found interesting because they had dialogue she wouldn't normally say like yep instead of yes.

The crew doing the video didn't know what a stoma was, she did a selfie of her stoma, to show them what it was.

It was filmed at Anglican Chesalon Jannali, Helen acting as a resident with Julia Kittscha STN as the Stomal Therapy Nurse visiting her.

Luckily when Helen went to the filming she carried her own bags with her, as the crew were under the impression that they could be brought at the local chemist.

A crew member asked if Helen was an actor, she replied 'No, just an old lady with a bag'.

She was nicknamed OP1 (Old Person 1). Helen being a bit concerned about the dialogue asked if she could ad lib a bit, which was fine.

But she found after twenty takes of saying the same lines you soon forget what your own name was.

The crew were not prepared for what it would entail – as when Julia looked at her bag, it being done after Helen had lunch, the stoma had started to work, and one of the crew wasn't prepared for it and had to look away.

It ended up being a Q&A session between a stomal therapy nurse and her patient for a first visit after a stoma operation.

Helen enjoyed doing it, by highlighting the need for special care of ostomates

in aged care to maintain their dignity and independence.

She also liked helping raise awareness and feels that there needs to be more information for the general public about stomas and ostomates.

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*Compared to our standard hydrocolloid. Data on file at Salts Healthcare Ltd.



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UNITED OSTOMY ASSOCIATIONS' REGIONAL DAY IN LITHGOW WAS HELD ON FEBRUARY 26TH 2016



As Anne Marie Lyons (STN at CA) and I experienced the joy of travelling to Lithgow via the old mountain route there was no denying the views and countryside were incredible. Lithgow is an historic town, its fame in the 19th century was for industry. The first European settlers arrived in the area in 1824 but by 1860 only four more families had joined them in Lithgow. In 1869 the town began to prosper as the western railway had been constructed. Lithgow had the first commercial coal mine and the first steel manufactured

in Australia. Lithgow was also famous for copper smelting, breweries, brickworks, and pipe and pottery work. In 1875 meat refrigeration was introduced and the first Australian chilled meat from Lithgow arrived in England in 1880! Today Lithgow is shaped by its colourful history. What a fascinating place to hold our Ostomy Educational Meet and Chat day. As a venue The Workies (as the Lithgow Workers Club is affectionately called) was excellent.

Continued page 17

NEW

NEW EasiSpray™ Adhesive Remover

Because your comfort is important



BENEFITS:

- Sting-free formulation
- Works quickly
- Spray from any angle
- Reliable spray every time
- Does not feel cold on skin
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From page 15

A very enthusiastic group of people arrived and enjoyed the opportunity of talking with personnel from 9 companies supporting us, besides being able to look at, touch and smell products available to members on the Stoma Appliance Scheme. Representatives were there from Cello Paper, Future Environmental Services, Dansac, Hollister, Ainscorp (Salts), 3M, Omnigon, ConvaTec and Coloplast. The Colostomy Association and Ostomy NSW would like to thank all companies for their continued involvement in these Regional days and also for the excellent door prizes you donate. Members have commented most favourably! A warm welcome was made to all present by Tom Flood (President ONL) and Eugene Tomczyk (Committee member CA). An interesting open discussion followed regarding the way associations work and how supplies on the appliance scheme are allocated under strict government regulations. The companies then shared the floor giving short interesting talks regarding their companies and products. Unfortunately two guest speakers were unable to be with us so after lunch Anne Marie and Heather spoke on several stoma and life related topics, animatedly assisted by a very pro-active group of members. We then progressed to the formal Q & A session and were happy to note there was no lessening of enthusiastic interaction with the audience. At the completion of the day people verbalized their great satisfaction and appreciation of what they had gained from all aspects. This included meeting and talking with each other, a chance to talk at length with STNs, seeing people from the association committees and, last but not least, the time to view products

and ask questions of the company representatives. Our next days will be held in Wagga Wagga on Friday, 27th May 2016 and Moree on Friday, 16th September 2016. Should you not receive a flyer by the first week of May for Wagga Wagga and the first week of September for Moree please ring either association to have one posted to you.

Heather Hill (STN Retired)

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Place just one sealed sachet of Perform™ into your pouch. When using a drainable pouch you can add further sealed sachets via the opening each time you empty.

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DO YOU HAVE A KOCK POUCH?

At one of our Regional Meetings a member approached me with this history of his stoma and requested it be published to see how many there are with a Kock pouch. "I was diagnosed with Ulcerative Colitis in 1965 and managed to exist with it until 1978. Whilst away with my wife and two young sons we ate a meal at a roadside café and got food poisoning. My wife and sons recovered from their vomiting and diarrhoea within 48 hours but my electrolytes were all over the place. Several days later my GP organised an ambulance to take me to Royal North Shore Hospital. Following tests and examinations at RNSH I was informed that besides ulcerative colitis there were two benign tumours in the large bowel and I needed a total colectomy performed. Mr. Harry Cumberland operated on me for six and a half hours and gave me a Kock's pouch. Mr. Cumberland had done at least five other Kock pouches, and Colorectal surgeons at Sydney Hospital were also performing this particular surgery. I seem to be a rare survivor of this type of operation. Over time I have met others who underwent the same surgery but have had their Kock's pouch converted to conventional ileostomies with an external bag. I often wonder how many others are still in existence. If you are one of those with a Kock's pouch (an internal pouch with an airtight valve - the pouch is emptied by catheterisation) could you please contact Heather Hill at Ostomy NSW (02 9542 1300). It would be comforting to know that I am not the only one. In order to obtain supplies of suitable catheters the companies

need volume to make it worthwhile. The ideal would be catheters with a 12 mm inside diameter instead of the 10 mm presently supplied, but we require numbers for it to be a feasible proposition for companies to make." Note from Heather: a Kock pouch is a continent pouch formed by the terminal ileum after colectomy. The procedure was first performed in 1969 by Dr Nils Kock.

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The most popular
Adapt barrier ring—
now **50% thinner**



The addition of slim. The advantages of Adapt barrier rings.

The Hollister Adapt barrier ring line of products just got a little bigger *and* thinner. The newest addition, the Adapt slim barrier ring, delivers the same convenient features of the other Adapt barrier rings—at around half the thickness of the standard 48 mm flat ring.

The Adapt slim barrier ring:

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A NOTE FROM THE PHANTOM TIP RESEARCHER

We all enjoy swapping tips but sometimes we need to think beyond the words and query whether the “helpful hint” has any substance for us ...

I recently read “A cup of tea can be an ostomate’s best friend as it is an anti-spasmodic, can soothe an upset stomach and contains potassium, which is often lost by ostomates”.

Seemingly simple statement. Certainly most of us feel much better after we have sat down with a good cuppa (whether we have a stoma or not).

However, I could find no supporting research to say that tea is anti-spasmodic, but, anecdotally most people gain some relief by sipping a warm drink. If you suffer from severe spasms it would be a good idea to see your doctor who can prescribe appropriate medication. Again, for the majority of us, sipping slowly on a warm drink can often soothe an upset stomach (aided by a comforting hot water bottle!).

Potassium: tea does contain minimal amounts of potassium BUT frequently tea can also have a diuretic effect and, should this occur, the tea may be washing out not only potassium but magnesium and sodium too. We need these minerals in our bodies to maintain our electrolyte balance.

This is another time you should consult the doctor, stomal therapy nurse and nutritionist, because they will know your history and the current research available. There are many factors to consider when assessing whether minerals and electrolytes need to be added or subtracted from ones diet, e.g.



the medications you are on (including any natural therapies), additional health issues, what surgeries you have had etc..

Not everyone with a stoma has an issue with electrolytes. It depends on the surgery, the type of stoma, and what part of the bowel the stoma is positioned in, other health issues and overall fitness.

ANNUAL STOCKTAKE CLOSURE

**THE KIRRAWEE
OFFICE AND
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WILL BE CLOSED
ON THURSDAY
23RD JUNE 2016
NO DELIVERIES
WILL BE
ACCEPTED INTO
OUR WAREHOUSE
AND NO ORDERS
WILL BE ISSUED
ON THIS DAY
THE OFFICE AND
WAREHOUSE
WILL RE-OPEN
ON MONDAY
27TH JUNE 2016
AT 9AM.**

THE SERENITY PRAYER
GOD, GRANT ME THE SERENITY
TO ACCEPT THE THINGS I CANNOT CHANGE,
COURAGE TO CHANGE THE THINGS I CAN,
AND THE WISDOM TO KNOW THE DIFFERENCE.

Hello From The Clinic

Colostomy and ileostomy diet guidelines
 - Nutrition is important for your health and healing. When you are recovering from surgery that involves the bowel there is a tendency to lose your sense of taste for a few weeks. This may also affect your appetite, however the desire to eat will return. For the first few weeks following surgery you will be asked to limit fibre intake due to swelling and tenderness at the ostomy site. After your post operation check with your surgeon you can usually but gradually start to add favourite foods back into your diet. Unless they have been otherwise advised, people with ostomies can enjoy a normal diet remembering food tolerances can vary from person to person. Some simple food guidelines include

- eat meals regularly, you should eat three or more times a day. Small frequent meals may be better tolerated and produce less gas. Chew your food thoroughly; if you have an ileostomy chewing well will help avoid a food blockage.
- Eat in moderation and slowly - Too much of any food can cause problems, so eat moderate amounts and eat slowly to allow for proper chewing and digestion. If a new food seems to give you problems don't eat it for a few weeks but try it again later.
- Drink plenty of fluid daily - You may lose more body fluids through the ostomy, particularly with an ileostomy or from a colostomy that is positioned high in the large bowel, patients who have lost a large part of the large bowel will notice more fluid loss. This is because most of the body's fluid is reabsorbed in

the large bowel. Some foods MAY help thicken stools and these include : apple sauce, bananas, cheese, cream of rice, marshmallows, mashed potato, creamy peanut butter, rice and crackers



Above all, keep in mind that no two people will react the same to foods. You will learn through experience which foods IF ANY, you should avoid.

Reduce gas and odour – Gas is normal but if you feel you are having excess gas, you may try to change your diet to reduce the problem. Try these tips – eat regularly. Do not skip meals. Do not swallow air while eating. Relax and eat slowly. Avoid chewing gum or drinking through a straw. Drink 8-10 glasses of non-caffeinated beverage a day.

Foods that MAY cause gas or odour include asparagus, broccoli, Brussels sprouts, cabbage, eggs, onions, cauliflower and carbonated drinks.

Foods that MAY help relieve gas and odour include Yogurt with active cultures, buttermilk, cranberry juice and parsley.

Good health to all
 Janet Forsyth CNC Stomalthery
 (RES.uwhealth)

**OSTOMY NSW LTD MEMBERSHIP FEES ARE DUE TO BE
PAID BY JULY 1 2016**

MEMBERSHIP FEES 2016-2017

FULL MEMBER: \$55

CONCESSION MEMBER: \$45

**A CONCESSION MEMBER MUST HOLD A CENTRELINK
ISSUED PENSION OR HEALTH CARE CARD.**

**PLEASE NOTE AS PER THE OPERATIONAL GUIDELINES
OF THE STOMAL APPIANCE SCHEME - ALL OUTSTAND-
ING AND CURRENT FEES MUST BE PAID BY JULY 1 2016
FOR SUPPLIES TO BE ISSUED FROM JULY 1 2016**

PAYMENTS

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