

OSTOMY CONNECTION
OF CHARLOTTE
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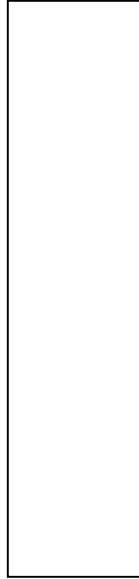


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MEETING NOTICE –
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Ostomy
Connection of
Charlotte

For info on the upcoming **OCC meeting** please see **p.3**
To read about our own **Chapter Highlights** read **p.6**
We will tour the **Convatec** Plant in Greensboro Feb. 22, see p. 6
+ There's much, much more inside this issue! Check it out.

www.ostomyconnectionofcharlotte.org

Our meetings are open to all ostomates, their families and friends. Physicians and Nurses are cordially invited. A social hour and refreshments follow each meeting.

February - March 2011

NEW LIFE NEWSLETTER

Volume 41 Number 1
Ostomy Connection
of Charlotte

Finding Professional Help



These medical professionals are available in our area:

Heather Pucket, NP
North East Medical Center
Concord NC - 704-783-2180

Julie Bowers RN, CETN
Springs Memorial Hospital
Lancaster SC - 803-286-1516

Gretchen Caldwell, RN, BSN, WOC
Julie Elliott, RNET
Lauri Fowler, RN, MSN, WOC
Jean Goldner, RN, BSN CWOCN
Mary French Hut, RN, BSN CWON
Jackie Kelly, CWOCN
Carolinas Medical Center
Charlotte NC - 704-355-7605

Brenda Rutland, CWON
Carolinas Medical Center – Pineville
Pineville, NC 704-667-5002

Union Regional Medical Center
Monroe NC 28111 704-283-3198

Amanda Griffin, RN, BSN, CETN
Rowan Regional Medical Center
Salisbury NC 28144

Cheryl Postlewaite, MSN, WOCN,
Piedmont Health Care System
Rock Hill SC - 803-909-2170

Phyllis Kupsick, RN, BSN, CETN
Stanley Memorial Hospital
Albemarle NC 28001

Betty Loftin, RNET
Medical Mart
Rock Hill SC - 803-366-5544

Carla Mellon CWCN, COCN
Pager # 6579 Voice Mail 704-863-6524
CMC-University

Phyllis McGalliard RN, CWOCN
Presbyterian Hospital
Charlotte NC - 704-384-3229

Debbie Myers RN, CCRN
Lake Norman Regional Medical Center
 Mooresville NC - 704-660-4711

Debbie Strider, RN, BSN, CWOCN
660 Summit Crossing Pl., Suite 306
Gastonia NC 28054 - 704-671-7830

Vickie Hall RN CDE CETN
Iredell Memorial Hospital
Statesville, NC 704-873-5661

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Hollister

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1-800-323-4060

Ostomy Connection of Charlotte Membership Application

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

E-mail Address _____

Date of Birth _____

Note: Members will be notified by mail for renewal.

I have a (please check):

Colostomy Urostomy (Ileal conduit)

Ileostomy Other

Year of Surgery: _____

I am interested in becoming involved in
service with OCC. Yes No

Permission to use your name, address, phone no. in an
Ostomy Connection directory. Yes No

Please complete this application and mail along
with a check payable to **Ostomy Connection of
Charlotte** for \$15.00 (annual dues) to:

George Martin
5925 Donegal Drive
Charlotte, NC 28212

The OCC...Ostomy Connection of Charlotte

The goal of the OCC is to provide support for the person that has undergone ostomy surgery. We are committed to providing the ostomate, their family and friends with an atmosphere that is non-threatening, open, honest and supportive. We plan to accomplish this by:

1. Continuing to produce the NEW LIFE Newsletter 6 times a year.
2. Continuing to provide ostomy visitors to new ostomy patients when requested.
3. Establish a website for the local support group.
4. Provide social gatherings to promote support and bonding within the group.
5. Provide helpful educational meetings which reflect the needs of the patient with an ostomy.
6. Reach out to smaller support groups in the surrounding Charlotte area and include them in social and educational events.
7. Encourage membership to subscribe to the *Phoenix* magazine published by the uoaa.

Dues are \$15 for a 12 month membership.
You will receive the Bi-monthly New Life Newsletter.

Meetings are held at Presbyterian Hospital, Matthews, N.C. at 7:00 p.m. on the third Tuesday of every other month, starting with February. Members will be informed of any changes. Facilities for the handicapped.

Special Thanks to **CONVATEC** for the printing of our Newsletter!!!
We so appreciate your support of our Chapter!!!

February Meeting



Date: Tuesday, February 15, 2010

Time: 7:00 PM

Place: Presbyterian Hospital Matthews
Community Room

Program: Guest Speaker

Doug Yoch, PharmD - Compounding Pharmacist from Stanley Apothecary will be sharing with us... please bring your questions!!!



Gather up any supplies you would like to donate for our April meeting--- we will be sending to Ostogroup.

Come join us for an evening of enlightenment and fun!

We need YOU!!!



Can't Come to Meetings? -

Come to our daytime "Stuffing Party!"

Want to volunteer a few hours helping to prepare our Newsletter for mailing? It's fun; there's lots of banter; we make a significant contribution to our chapter.

We need your help now more than ever!

**The next Stuffing Party will be Tuesday April 5, 2011
at 1:00 PM at St. Luke's Lutheran Church
on Park Road near the YWCA.**

And Thank You St. Luke's for your gracious hosting!

Year 2011

Stuffing Party Date

April 5
June 7
August 2
October 4

**Mark
Your Calendar**



Meeting Date

February 15
April 19
June 21
August 16
October 18
December 6
Christmas Party

The **NEW LIFE NEWSLETTER** is the newsletter of the Ostomy Connection of Charlotte. We publish the newsletter bimonthly from the address below and send it to members of our chapter, as well as to others whom we hope will be helped by receiving it. This newsletter is a major component of our mission, detailed on later pages, of helping ostomates to a full recovery from surgery through many means, including education, public meetings, and individual visits.

Address correspondence to:
Editor, New Life Newsletter,
Ostomy Connection of Charlotte
7301 Woodstream Dr
Charlotte, N.C. 28210

Don't Miss an Issue!

Free Ostomy Magazine!



Special Offer for New Subscribers. Subscribe to the leading national magazine for ostomates, their families and caregivers, *The Phoenix* magazine, and get a free issue – that's a 25% discount. This offer is only available through support groups and only for new subscribers. Simply return this order form (no copies) with payment today!

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*This form must be submitted with payment to receive free magazine, no exceptions.
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OFFER SUBJECT TO TERMINATION AT ANY TIME

Just For Fun...

EDUCATION: What you have left when you subtract what you have forgotten from what you have learned.

BATH MATS: Little dry rugs that children like to stand beside.

MONEY: Something that brushes by you on its way to Washington.

ALIMONY: It's the same as paying monthly installments on your car—after the wreck!

ALARM CLOCK: A mechanism designed to scare the daylight into you.

HOPE: The feeling we have that the feeling we have is not permanent.

PREDICAMENT: When a woman doesn't want any more birthdays, but still wants the presents.

JUVENILE DELINQUENT: A youngster who has been given a free hand, but not in the right place.

CONSCIENCE: That small inner voice which tells you that the Internal Revenue Service might check your return.

RECKLESS DRIVER: A motorist who passes you on the highway in spite of all you do to prevent it.

COURTSHIP: The period during which the girl decides whether or not she can do any better.

CREDIT CARD: A convenient way to spend money you wish you had.



“He’s a self-made man – but I’m afraid someone slipped him some inferior building materials.”

OSTOMY CONNECTION OF CHARLOTTE

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George Martin
5925 Donegal Dr.
Charlotte, N.C. 28212
704-568-7972 (h and fax)
GeorgeMartin@carolina.rr.com



Looking For Help? Call:

AMERICAN CANCER SOCIETY:
Beverly Eller
704-552-6147

**CROHNS & COLITIS
FOUNDATION OF AMERICA:**
1-800-343-3637

VISITOR COORDINATOR:
Christale Norwood
704-573-1835



Call

O.C.C. Chapter Highlights

December Meeting Notes

Attendance – 20

Our OCC Christmas Party was held on December 7, 2010 at Matthews Presbyterian Church. We enjoyed spaghetti and delicious desserts provided by Janet Cline, Carla Mellon, Lisa Harris and Christale Norwood. We also enjoyed singing Christmas carols along with the handbell choir from Matthews Presbyterian Church. Thanks to Janet Cline and Carla Mellon for all they did in cooking the spaghetti and sauces.

Christale Norwood
Secretary

2011 COLONDARS ARE AVAILABLE

Thanks to a grant from Coloplast we will be offering the 2011 COLONDAR *at no charge* to anyone who requests one. Please contact the office at oa@uoaa.org for your 2011 Colondar.



Those interested in touring the **Convatec** Plant in **Greensboro** on **February 22nd**: The bus will depart from Concord Mills at Best Buy 7:30am sharp (Charlotte area folks) The bus will proceed to the Magic Mart at exit 75 to pick up Cabarrus County and Concord residents. After lunch and touring the plant the bus will leave Greensboro at 3:30pm and return to Concord Mills by 5pm.



Congratulations!

To Bert and Bette Carroway, who celebrated their 67th Wedding Anniversary on January 3, 2011.

Chicken Lynn

Submitted by Christale Norwood

- 4 Chicken breasts, cooked & torn apart
- 2 cans cream of chicken soup (may substitute 1 can of cr. of mushroom)
- 1 stack of Ritz crackers (Ritz only)
- 1 stick butter
- 1 8 oz. ct. sour cream
- 2 tbsp. poppy seeds (opt.)

Put cooked chicken in bottom of 9 x 13 dish. Mix sour cream and soups together and pour over chicken. Sprinkle crushed crackers over chicken and soups. Drizzle melted butter over top and then sprinkle with poppy seeds. Bake at 350 degrees, uncovered, for 30 minutes.



Practice Healthy Habits During Flu Season:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it. If a tissue is unavailable, cough or sneeze into your shoulder or elbow instead of your hands.
- Wash your hands often or use hand sanitizer.
- Avoid touching your eyes, nose or mouth.
- Get the season flu vaccine if recommended.
- Try to avoid close contact with sick people.
- Keep sick children at home.
- If you have flu-like systems (fever with cough or sore throat), stay home for at least 24 hours after you are free of fever without the use of fever-reducing medications.

A Gas-tly Subject

Via: San Mateo OA & Hartford CT

If anyone were to search for the most embarrassing bodily phenomenon, the passing of gas would certainly come out on top.

The average person passes gas about fourteen times a day, in spite of all attempts not to. Physicians refer to the process as flatulence, which only rarely requires a visit to the doctor's office.

Technically speaking, gas can pass either by way of the mouth (belching), or by way of the anus (flatulence). Each is considered unacceptable in polite society. Although in some cultures, belching after a meal is deemed complimentary to the cook.

As a result of incomplete digestion, gasses are formed in the alimentary canal. Normally food is broken down into simple sugars, amino acids, and fats in order to be absorbed and used by the body. However, complex sugars found in certain foods tend to resist this process and end up in the large intestine where they begin to ferment, forming carbon dioxide which works its way to the outside.

To avoid intestinal gas, chew your food thoroughly; eat slowly and leisurely in a quiet atmosphere (when possible). Avoid washing solids down with a beverage. Don't gulp liquids. Avoid drinking through straws. Do not lie down or sit in a slumped position immediately after eating. Eating yogurt and parsley can help cut down on gas. Never put a pinprick in your pouch to release gas; it will also release odor.

If approved by your doctor, Mylicon tablets or Mylanta liquid can relieve excess gas.

INDIVIDUALS WITH UROSTOMIES: FLUID MANAGEMENT AND INFECTION

By Juliana Eldridge, WOC/ET Nurse, Edited by B. Brewer, UOAA 1/2011

People with urinary diversions no longer have a storage area (a bladder) for urine. Therefore, urine should flow from the stoma as fast as the kidneys can make it. In fact, if your urinary stoma has no drainage after even an hour, it is of serious concern. The distance from the stoma to the kidney is markedly reduced after urinary diversion surgery. Any external bacteria have a short route to the kidney. Since kidney infection can occur rapidly and be devastating, prevention is essential. Wearing clean pouches and frequent emptying are vital. Equally important is adequate fluid intake, particularly fluids that acidify the urine and decrease problems of odor. In warm weather, with increased activity, or with a fever, fluids should be increased to make up for body losses due to perspiration and increased metabolism.

It is important that you be aware of the symptoms of a kidney infection:

- Elevated temperature
- Chills
- Low back pain
- Cloudy, bloody urine
- Decreased urine output

All ileal conduits normally produce mucus in the urine, which give it a cloudy appearance. Blood in the urine *is* a danger signal. Thirst is a good index of fluid needs.

Important: If urine is collected for urinalysis, either routine, microscopic (R&M) or for culture and sensitivity (C&S), or if you are asked to give a sterile urine specimen, be sure your doctor and nurse know a sterile specimen must be taken directly from your stoma and not from the pouch. Bacteria build up in the pouch constantly. You will always get a false positive test result.

If they are not sure how to do this, do the following:

- Remove your pouch
- Clean your stoma
- Bend over
- Catch the urine in a sterile cup



You are unique, so be sure to consult your doctor or WOC nurse before trying products or methods that are mentioned in this newsletter.

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UOAA NEWS ★

Our 2011 UOAA National Conference will be held at the Nugget Hotel in Reno on August 7th to the 11th. This Conference will have the opening ceremonies on Monday night and continue through Thursday. The room rate will be \$ 79.00 + tax. Plan now to join the fun in Reno as they observe their "Hot August Nights" festivities.



Keep current with the **UOAA blog!**

It's our way of bringing you up-to-the-minute news about happenings within UOAA. In addition to the general blog there will be one concerning advocacy matters and others as time goes along. You can find it at www.uoaa.org in the left-hand navigation menu or go to www.uoaa.wordpress.com.

The 2011 **COLONDAR** is now available for purchase online and you can read about it at: www.colonclub.com/colondar.html.

To see how the 2009 Colondar was produced go to: www.youtube.com and enter: 2009 Colondar in the search box. There are 4 short video segments with interviews. It's quite interesting. The video's are still on youtube as of November 2010.

Public TV/Cable Documentary Tape

UOAA entered into a contract for the production of a 5 minute UOAA/ostomy public awareness tape that will appear in Public TV, National Medical Report as shown on cable, network TV and internationally as part of Voice of America.

This excellent project, coordinated by Kristin Knipp, can now be viewed on the UOAA website at http://www.uoaa.org/uoaa_psa.shtml; or on the UOAA Blog: <http://uoaa.wordpress.com>, and if you are a member of Facebook, on the **UOAA Cause** at <http://apps.facebook.com/causes/261710?m=618>.

To all who receive our Newsletter...Please understand that some articles are repeated occasionally for the benefit of new ostomates and some are just worth repeating as well.

If you haven't visited our own "local" website – you should! There is a lot of information available and some very helpful links also – check us out at: www.ostomyconnectionofcharlotte.org

The Crohn's & Colitis Foundation of America is also another good resource and you can visit their website at: www.cdfa.org.

This is 'Our' Life

via: Corpus Christi Chapter

We have what we have, we are what we are, we've got what we've got and we're "stuck" with it! Nothing can change what life has in store for us, so we must make the best of it and go on from there. It isn't the "end" of the world, only another beginning--to live to the fullest to the best of our ability. Not everyone has this second chance--we sure are the lucky ones for we were "chosen" to try another way of living...What about all those other unfortunates who are not given this second chance?

An Irish Blessing

via: *The Ostomist*, Seattle, WA



May there always be work
for your hands to do;
May your purse always hold
a coin or two;
May the sun always shine
on your windowpane;
May a rainbow be certain
to follow each rain;
May the hand of a friend
always be near you;
May God fill your heart
with gladness to cheer you.



AN
OSTOMY
IS FOR
LIVING

Job Description of a Floor Nurse in 1887

In addition to caring for your 50 patients each nurse will follow these regulations:

1. Daily sweep and mop floors on your ward, dust the patients furniture and window sills.
2. Maintain an even temperature in the ward by bringing in a scuttle of coal for the *day's* business.
3. Light is important to observe the patient's condition, therefore, each day fill oil lamps, clean chimneys, and trim wicks. *Wash* windows once a week.
4. Nurse's notes are important, make your pens carefully; you may whittle to your individual taste.
5. Each nurse will report for day duty at 7:00 a.m. and leave at 8:00 p.m., except on the Sabbath on which day you will be off from 12:00 noon to 2:00 p.m.
6. Graduate nurses in good standing with the Director of Nurses will be given an evening off each week for courting purposes, or two evenings a week if you go to church regularly.
7. Each nurse should lay aside each payday a goodly sum for her declining years, so she will not become a burden. Example, if you earn \$30.00 a month, set aside \$15.00.
8. Any nurse who smokes, uses liquor, gets her hair done at a beauty shop or frequents a dance hall will give the Director of Nurses good reason to suspect her worth, intentions and integrity.
9. The nurse who performs her labors, serves her patients and doctors faithfully and is without fault for a period of five years, will be given an increase by the hospital administrator of 5¢ a day, providing there are no hospital debts that are outstanding.



"Who then can so softly bind up the wound of another as he who has felt the same wound himself."

-Thomas Jefferson

COLOSTOMY BOWEL CONTROL

Edited by B. Brewer, UOAA 1/2011

Patients with a right-sided *colostomy* do not have as much remaining colon as those with a left- sided colostomy. Because of this, there is usually too little colon left to absorb enough water to make a solid stool. This type cannot be controlled by irrigation, but instead behaves very much like an ileostomy with a fairly continuous discharge. The left-sided colostomy is often described as a dry colostomy because it discharges formed stool. One has the choice of attempting to manage this type either by trained control or irrigation control.

Only one-third of the people who attempt to train themselves to control the colostomy without irrigation are successful in doing so. This type of training relies very heavily on diet and medication to achieve regularity. Many physicians in this country feel that control is more easily and satisfactorily achieved by irrigation. However, there are some patients who can't achieve irrigation because they have an irritable bowel. This problem has nothing to do with the colostomy. It is just part of some people's makeup. Some people, even before they have their colostomy, may have very irregular bowel habits. They retain these habits after the colostomy is performed, so that regular irrigation does not assure them of regularity.

When this condition exists, the physician will sometimes suggest that the patient dispense with irrigation since it will not produce the desired regular pattern, and the person may become frustrated trying to achieve this. In this case, once again the colostomy is treated much like an ileostomy with the wearing of a pouching system all of the time.

HILLBILLY MEDICAL TERMS

Benign: What you are after you be eight.

D&C: Where Washington is.

Enema: Not a friend.

Urine: Opposite of mine.

Impotent: Distinguished, well known.

Labor Pain: Getting hurt at work.



ILEOSTOMATES AND CHOLESTEROL

By David A. Merowitz, Baltimore Ostomy Group, via: UOAA 1/2011

People who have ileostomies do have altered cholesterol and this may be a benefit of having your terminal ileum resected or an ileostomy performed, which usually results in the loss of a considerable piece of the ileum.

The terminal ileum is the site of absorption of bile salts (materials made in the liver), which aid in the digestion of fatty foods. People who lose bile salts in their feces because of ileitis, or those whose ileum is resected by surgery, often have low levels of cholesterol. They pour out bile salts into the stool faster than the liver can make them. Since those bile salts are used to digest fatty substances that may be rich in cholesterol, the cholesterol levels in individuals with ileostomies tend to be lower than those of the general population.

For Your Info about the UOAA

UOAA Update – August 2010

OUR FACELIFT IS COMPLETE!

As you know, we've been in the process of receiving a logo and website "facelift". I'm happy to report that the project is complete! If you've not done so already, please go and check out our new website. In addition to the design changes, our URL is now www.ostomy.org (Thanks to the family of Dick Taylor for helping us acquire this domain name). You can still access the website at the old uoa.org web address; it just forwards you to www.ostomy.org.

IN CASE YOU MISSED IT: WE'VE MOVED!

Just a reminder that the UOAA office has moved from Tennessee to Minnesota. Our new mailing address is PO Box 512 Northfield, MN 55057. Our toll-free number will remain the same at 1-800-826-0826.

CAROLINAS MEDICAL CENTER

Ostomy Supply Sources – Charlotte and Surrounding Areas

Check with your insurance company to see if you have a preferred provider for ostomy supplies. If so, this is where you will need to obtain your supplies for the most reimbursement. Following is a list of some of the medical supply dealers in the Charlotte area.

Faulkner's Drugs
215 East Jefferson Street
Monroe, NC 28110
704-283-8131

Griffin Home Health Care
4231 Monroe Road
Charlotte, NC
704-347-1993

Giant Genie
5123-A South Blvd
Charlotte NC
704-525-3956

Medical Center Pharmacy
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Hickory, NC 28601
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Medical Mart
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Rock Hill, SC 29732
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Pharmaceutical Center
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Medical Home Health and Mobility
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American Ostomy Supply	1-800-858-5858
Parthenon:	1-800-453-8898
Byram	1-877-902-9726
Mercy Surgical	1-888-637-2912 (Accepts N.C. Medicaid)
CCS Company	1-888-724-4357 (Accepts S.C. Medicaid)

Outpatient Ostomy Help

CMC-Pineville	Brenda Rutland RN, CWOCN	704-667-5002
CMC-University	Carla Mellon RN, CWOCN	704-863-6524

Ostogroup.org is a company that may be able to help you with low cost supplies. Ostogroup 877-678-6690

Updated 9/2010

WHY CRANBERRIES HELP PREVENT URINARY INFECTIONS

via North Central Ostomy Outlook, Edited by B. Brewer, UOAA 1/2011

The secret ingredient in cranberries, which is pivotal in preventing urinary infections, is concentrated tannins in the juice, also known as Proanthocyanidins. In a significant study conducted in Boston and published in the *Journal of the American Medical Association*, cranberry juice was found to be effective in reducing the incidence of urinary tract infections and the need for antibiotic treatments.

How does this special ingredient in cranberry juice work? The concentrated tannins from cranberry juice prevent E. Coli bacteria, the main culprit in urinary infections, from adhering to the cells that line the urinary tract. Scientists believe that the substance blocks the growth of the part of the bacteria that is necessary for it to stick to the walls of the bladder and kidney.

What are the implications of this for persons who may be more susceptible to urinary tract infections? Scientists in the Boston study state that the addition of cranberry juice to dietary regimens in circumstances, where urinary tract infections have a high incidence, would be sensible. In addition, it would probably reduce both the incidence of infections and need for antibiotic treatments and be a useful adjunct to treatment in high-risk groups.

"You must give some time to your fellow man. Even if it's a little thing, do something for others ~ something for which you get no pay but the privilege of doing it."

-Albert Schweitzer

"A diamond is a chunk of coal that made good under pressure."
-Anonymous

"We make a living by what we get, but we make a life by what we give."

-Winston Churchill

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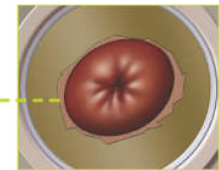


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Gaps expose skin to effluent



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