MEETING ANNOUNCEMENT

Saturday, November 17, 2018 @ 10:30 AM

Winter Park Memorial Hospital
Dining Room B (Main Building). See map below.
Our Speaker: Seeta Noah, is a nationally Certified Health Promotion Specialist
See Page 2 for more information on our speaker.

MEETING INFORMATION:
Our fellowship meetings offer an exchange of valuable information offered by our speakers, members, and guests. All are welcome, especially supporting family and friends. Coffee is provided and donated treats are always welcome.

MEETING LOCATION:
Winter Park Memorial Hospital Library, 200 N Lakemont Ave. This month our meeting will be held in Dining Room B. Use the main hospital entrance on N Edinburgh. Free valet parking is available.

MEMBERSHIP INFORMATION
The Ostomy Association of Greater Orlando can not continue its programs without your support. Your membership and contributions allow us to support those facing ostomy surgery and those with ostomies through our Meetings, Mentor/Visitation Program, and Gift Room.

Our low annual dues of $20.00 are not mandatory, but allow us to continue our programs to help others. Donations to the Ostomy Association of Greater Orlando, Inc. are tax deductible. Thank You!

Membership Application & Renewal Form on Page 6.
For more information please call 407.603.5088

DO YOU HAVE INTERNET ACCESS?
If you have internet access you can help reduce our costs by electing to receive the newsletter via email. Please call us at 407.603.5088 or email us at support@oagohome.org. Thank You.

PLEASE DONATE YOUR UNUSED OSTOMY
If you have unused supplies please bring them to our meetings or call us at 407.603.5088 or Jack Vreeland at 407.415.8855. Donated supplies are given free of charge to those without insurance.

PRESIDENT’S MESSAGE

Hello Everyone,

One reason we banded together as OAGO, the Ostomy Association of Greater Orlando, is that although we are not doctors, surgeons, or nurses, we are experts … in “us.” We live the life, we walk the walk. Although every ostomate is different, we share “stomany” of the same issues in our daily lives. This sharing brings us together in both an emotional and practical way.

At our last meeting, we shared our ostomy “hacks” – clever, simple, or more economical ways of doing something. It was fun to see the smiles of even our most seasoned ostomates and hear, “I can’t believe I never thought of that before.” (Thank you to those who shared!)

If you weren’t able to attend this meeting, we still want to share! One of our goals is to create a library of printable materials, including “tricks of the trade” that can be downloaded directly from our website. We hope to sprinkle these throughout our newsletter, as well. Just E-mail your tips and ideas to newsletter@oagohome.org.

We’re making progress on many different fronts. Our new pamphlets are almost complete, our new membership tally is growing, and we’re networking with other ostomy associations and nonprofit support groups. This is all wonderful, but the work is snowballing! We have all sorts of jobs (from big to small) so if you’d like to help, just E-mail me at president@oagohome.org.

I look forward to seeing everyone at the next meeting! If I don’t see you, please have a wonderful Thanksgiving.

Sincerely,

Erica Michaels

P.S. My apologies to members who had difficulty in finding us at our last meeting. We had been told there was valet parking, and unfortunately that was not correct. Our November meeting will still be in the same Dining Room B location. We will return to our Conference Center location for our December and subsequent meetings.
November Meeting

Ostomy surgery is one of the few surgeries that is inexorably linked to food and eating. The program will focus on both nutritional and emotional issues associated with changes in eating habits. Seeta Noah obtained her Masters Degree in Health Sciences from the University of Alabama and a Masters Certificate in Community College Education from The University of Central Florida. Seeta Noah is a nationally Certified Health Promotion Specialist or CHES. She is a member of The Society of Health Education Specialists- SOPHE and The International Association of Eating Disorders Professionals-iaedp. Seeta Noah has a private practice in Health Coaching in Oviedo Florida. Areas of specialty include personalized weight loss programs, Binge Eating, Emotional Eating, Stress Management and Quit Smoking Programs. Information available at www.SEETANOAH-WELLNESS.com.

Our speaker, Seeta Noah, is a nationally Certified Health Promotion Specialist, or CHES, as well as a member of The Society of Health Education Specialists - SOPHE.

On Deck!!

Our New Year’s Resolution
(Our December Meeting – Preparing for the New Year)

OAGO has so much to offer – real life ostomy information, emotional support, social interaction. We represent the positive face of what living with an ostomy can be. But, too few people even know we exist. It’s time to correct this.

This January our goal is to get this information about OAGO out to anyone and everyone who could possibly need us. We will share our information with hospitals, clinics, doctor’s offices, suppliers, convalescent centers, the V.A., and fellow support groups.

We will make use of our online presence, social media, and good old fashioned “print” materials. We will use our website and newsletter as well as pamphlets and magnets. We’ll print information about our meetings in local newspapers (thanks Bob), neighborhood newsletters, and Everybody’s Business. And of course we’ll use good old “word of mouth.”

It’s absolutely essential that we be prepared. Our materials must be informative, accurate, and up-to-date. We have already begun the process by updating our website and streamlining our newsletter. We have a permanent new phone number and E-mail address, we’ve trained a new class of Visitors. We are in the process of updating our informational pamphlets and creating short in-house presentations for doctors’ offices and other care providers. And of course we are maintaining our relationships with our wonderful wound care and ostomy nurses.

We need your help! This can only work if it is a team effort. We need you to pull up your sleeves and help us fold, sort, address, and deliver. Our December 15th meeting will be a true “working meeting.” Of course, we haven’t forgotten that, for many, December is also a time for celebration. And in this spirit, we invite you to bring your favorite appetizer or dessert to celebrate and “fortify” us as we get the job done.

P.S. Thank you to everyone who has already started this process.

Try It; You’ll Like It!

There are three OAGO positions that must be filled before January: Vice-President, Secretary, and Newsletter Editor. Although actual time investment may vary, most of these positions will require between 10 and 20 hours per month. Meeting attendance (included in those hours) would be expected, although everyone in this group understands the vagaries of life! Complete job descriptions are available, and you will receive the full support and guidance of all other officers and board members. If you are interested, need more information, or would like to “try” the job out before fully committing, please E-mail Erica at president@oagohome.org.

Our Purpose

The Ostomy Association of Greater Orlando, Inc. is an IRS 501(c)(3) tax-exempt corporation with “umbrella” status under our parent organization, United Ostomy Associations of America, Inc. We are an all volunteer support group dedicated to assisting people who have or will have intestinal or urinary tract diversions by providing emotional support, family support, education, advocacy, and promoting the services of this organization to the public and professional communities.

“Playing Frisbee with a five year old is amazingly similar to just running after a Frisbee.” Jim Gaffigan
She was so thankful that an ostomy gifted her 15 years of good living.

My Grandma Mabel had ostomy surgery in 1938 and went home with no medical supplies.

How did she cope? How did she live with her ostomy?

Let's try to imagine 1938…and then imagine living with an ostomy in 1938. This was before the internet, before cell phones, before microwaves, before TV, before plastics. The stock market had crashed in 1929, followed by a decade called "The Great Depression." It was a challenging time to live. In parallel, there was a decade of drought and crop failure in the entire Midwest of North America, appropriately named, Dirty 30s.

This was also before the 2nd World War. An era before flanges and pouches or any other ostomy appliances were invented. Ostomy patients were sent home after surgery with no collection device. NO COLLECTION DEVICE!?!?

How did Mabel live with an ostomy without supplies?

Mabel lived on the prairies in Western Canada, where summer temperatures rose to +104°f and winter temperatures dropped to -40°f. The only heat in the house was the stove which burned coal, and when they had money, wood. There was no cold running water, it was pumped from a well during winter and summer. There was no hot running water, they heated water in a large pot on the stove. There was no shower. No bathtub. No bathroom inside the house, just an outhouse — a seat perched over a pit in a small shed about 50 yards from the house.

This outhouse experience during winter, when it felt negative 40 degrees, was the origin of the expression "so cold it would freeze your ass off!" Personal ostomy clean-up was probably in the outhouse. Mabel made do with rags, towels, and a pail of cold water.

Her husband Walter was a practical and inventive man. He devised a tin can with a belt strap to contain the stool. This was leaky and stinky, but a big improvement over using messy rags. The tin can would have to be strapped tightly around her waist to reduce the leakage (not prevent leakage… just reduce). The edge of the tin bit harshly into Mabel's skin, leaving a nasty red compression ring. Walter was a horseman who made his own horse-harnesses, so he built a leather collar to cover the tin can edging. This was certainly more comfortable and leaked less, but it was difficult to clean the leather collar and the device still smelled.

Mabel considered a glass container which would be easier to clean than the tin can, but adding a leather collar and attaching a belt would be difficult and the risk of glass breakage would be a big concern. The tin can with leather-collar strapped around her waist was her best (and only) ostomy equipment. The 4-inch circle around her stoma was constantly covered with stool, and I expect she had many rashes, breakdowns, infections, and damage to her skin. The salves used for harness-burns on horses would've been Mabel's only relief from these skin problems.

There was no "support group" for Mabel. She never talked about her ostomy. My father, who lived at home for the first six years of Mabel's surgery, was never told about her ostomy and he never saw anything that would indicate she had one. He never saw a bulge on her dress. While her husband designed and built her ostomy-gear, that would be the last time he participated and the last time they would talk about it. It just wasn’t ever discussed. For 15 years, Mabel lived silently and with many inconveniences. She never wore proper medical supplies and had nobody to talk to who could relate.

My grandma Mabel was one tough lady. She was the sole steward of a 1-acre vegetable garden. She dug the entire garden with a shovel, planted seeds and hoed weeds. In the fall, she dug out the potatoes and carrots, harvested and preserved corn and peas and beans for each cold winter ahead. For 15 years, from ages 52 to 67, she worked that garden with an ostomy. Mabel was British, Victorian, stoic and content. She never complained. She was thankful that her ostomy gifted her 15 more years of good living.

There have been days that I've complained about my colostomy. With the imagination of reliving Mabel's ostomy experience, I will not complain again. Ever.

Mabel’s Timeline:
1886 - born in England
1904 - Age 18, married Walter
1912 - Age 26, emigrated to Canada
1938 - Age 52, ostomy surgery
1953 - Age 67, died

I did considerable sleuthing to locate Mabel's medical history. Not surprisingly, the 76-year-old records have sadly been destroyed. I have so many more questions. BUT, there was an index card with handwritten notes stating: "Mabel was diagnosed with acute ulcerative colitis and hospitalized from December 18 through to February 13." There was no written record of her ostomy type, and the answers are lost in history.


"I am grateful to be a woman. I must have done something great in another life."  Maya Angelou
I USED TO THINK I WAS INDECISIVE, BUT NOW I'M NOT SURE.

My parents came in two different sizes...my father was extra large and my mother was narrow and slim. While it is not unusual for a daughter to model after her mother, I would say that my modeling was extreme. My mother not only was very weight conscious, she was very rigid and restrictive of food and drink, and binging was a big part of her life, and as I found out later, unnamed bulimia. Her daily guidelines for foods to be consumed had a critique that usually ended with “remember, Ellyn,” she would repeat, “a moment to the lips, a lifetime to the hips!”

Blueberries, watermelon, and oranges were on her DO NOT EAT list since they had too much sugar. Meat, potatoes, breads were all annotated with what could just as easily have been a skull and cross bone. So as long as I followed her dictum, I would be narrow and slim like her, or so I thought. The problem was, however, that although I inherited her very narrow and slim upper body, I inherited my father’s larger and rounder lower body. Regardless of how much I tried, I was never to be lithe in my legs and hips. College not only brought the “freshman 15,” it brought anorexia and eventually, bulimia. So I lived with an eating disorder that lasted for years, and the reality of body dysmorphia that plagued me for decades. And now, as an ostomate, I am finally grateful and humbled by my beautiful body...because it is an incredibly resilient organism and I am so proud to own it!

For over two decades my strong little body fought through surgeries, hospitalizations, PICC lines, infections, abscesses and lack of bowel motility. And yet, regardless of my physical state, I would expect it to be thin and attractive, fitting into whatever garment I wanted to wear. I never questioned its strength, its ability to weather weeks in the hospitals or the most grueling of tests and procedures. It was never an issue of can I travel alone to Rochester, Minnesota to the Mayo Clinic by myself and stay for two weeks to have bowel retraining. I just wanted to be certain I could exercise, eat “normally” and not put on weight. Regardless of how many scars I had down and across my abdomen from 23 abdominal surgeries, the goal was to fit into my clothes and like what I saw on the scale. Enduring an enteroclysis study (a wire inserted down the nose to be able to see into the small intestine) I steadily focused on what I would allow myself to eat once I was finished. In retrospect, my expectation of my infirmed body to be perfect was abominable, and I would never, ever support anyone I love put that expectation on their body.

And then four years ago, I had my ileostomy, and suddenly, my now very obedient body gave way to an imperfection I was forced to acknowledge. The first time I saw my reflection in the mirror after the surgery, I was horrified. My high-output bag, which is transparent, was reaching down my short frame to my right mid-thigh. But after the shock of my appliance and pouch, I began to relax and look at the possibility that I could have a new life, free of hospitals, surgeries and worry. I began to see the beauty in my stoma, and named it, as many do. Her name is Lily because my mother, Lillian, gave me my first life, and Lily has given me my second.

No longer striving toward an unrealistic goal, I am now so proud of the ability I have to live and love my life. My little body is strong enough to advocate for others: it is strong enough to lead my support group; it is strong enough to visit those suffering in the hospital, and it is strong enough to start a grassroots movement to open our ostomy center, one of the few in New Jersey! On a personal note, I am strong enough to be able to have a second life, free of surgeries and worry. I began to see the beauty in my stoma, and named it, as many do. Her name is Lily because my mother, Lillian, gave me my first life, and Lily has given me my second.

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The Benefit of Blending Fruits and Vegetables When You Have an Ostomy
OC EDITORS APR 23, 2018. We’re a group of writers who know exactly what makes ostomates so special. Featured on OstomyConnection.com

A blended smoothie can make it easier to deliver nutrients to your body. Some people have questioned whether or not they’ll be able to eat fruits and vegetables after ostomy surgery. The fear is that the fiber (or bulk) could cause a blockage—and ostomates who have experienced one just know how painful it can be. Although each person is different, it’s wise to start out eating soft foods during your recovery and build in whole foods gradually.

If you have an ostomy and are worried about blockages from eating raw fruits and vegetables, a simple solution is to blend them into a healthy smoothie. It’s easy to make and takes only minutes to prepare. The benefits of superfood smoothies are endless and the best part is that the fiber content of fruits and vegetables remain intact, but easier to digest.

Nutritionally speaking, superfoods provide you with vitamins and minerals to keep your body healthy and will help in the recovery process. Superfoods are a great way to eliminate toxins from your body that can make you feel sluggish and drained. They aren’t any more expensive than other grocery store food, in fact, many superfoods are more economical than highly processed, pre-packaged food.

A healthy balanced diet results not only in your physical wellbeing but mental health too. If your body is healthy, your mind naturally follows. Eating healthy needs to become a way of life after ostomy surgery—not a fad or phase.

Kick off your morning by drinking plenty of water to stay hydrated, then make yourself an energizing berry smoothie or nourishing green drink to jump-start your day and watch your energy soar!

WOUND CARE CLINICS AND OSTOMY NURSES

OAGO does not offer medical advice.
If you are having a medical problem always call your physician or surgeon first!

The majority of stoma-related issues are taken care of by specialized ostomy nurses or wound care clinics. Generally, if a patient has an issue of concern, within for the first six months of surgery, he or she should try to make an appointment at the clinic associated with the hospital that treated them. Most stoma clinics and nurses will still require a doctor’s referral. We are extremely fortunate to have not one, but two ostomy/wound care clinics in the Orlando Area. We also have a mobile unit that is tremendously helpful for elderly, bedridden, or wheelchair-bound patients. Their primary phone numbers are listed below.

Florida Hospital (South)
Outpatient Ostomy Clinic
601 East Rollins Street
Orlando, Florida 32803
407-609-3341

Orlando Health Wound Center/Ostomy Clinic
55 West Gore Street
Orlando 32806
321-841-5469

Central Florida Wound and Skin Consultants
( Providing Mobile Ostomy Care)
407-359-6426
407-421-6265

Health First Wound Management & Hyperbaric Center
5191 Babcock Street
Palm Bay, FL 32905
321-434-1788

A GREAT WAY TO HELP FELLOW OSTOMATES

We regularly get calls for help with supplies. Sometimes a member’s delivery doesn’t arrive in time, sometimes an out-of-town visitor to Disney didn’t bring enough changes, sometimes people don’t have health insurance, sometimes a dog decides to use a pouch as a chew toy, and sometimes (too many times) people live in places where supplies are just not to be found. We can help locally (thank you Jack and Evelyn), nationally, and internationally (thank you Shabbir). Please help if you can, and remember we are here if you need us.

OAGO Gift Room
The Gift Room is stocked with donated unused ostomy supplies that we collect and provide, free of charge, to fellow ostomates who are uninsured or underinsured. This service is run solely by the Ostomy Association of Greater Orlando, Inc. on a volunteer basis. For information call 407-603-5088.

OSTO Group
This not-for-profit organization provides free ostomy supplies to those without insurance. Your only cost is shipping and handling. Call 877-678-6690 or visit their website at www.ostogroup.org.

Friends of Ostomates Worldwide - USA
The modern ostomy supplies we take for granted in the U.S. and other developed countries may be unavailable or too costly in many areas around the world. Since 1968, the Friends of Ostomates Worldwide-USA (FOW-USA) has collected new supplies from U.S. individuals and groups and sent them overseas to over 70 countries. You can help with supplies and financial donations: FOW-USA, 4018 Bishop Lane, Louisville, KY 40218. Phone: 502-909-6669. Website: www.fowusa.org

Na`Scent
Ostomy Odor Eliminator
- More than freedom.
- More than security.
- Gives ostomates an odor-free life.

Contact: Shelley Dittmer, Member
407-929-3668
shelleydittmer@nascent4u.com
www.nascent4u.com

Ostomy Supplies
and Medical Equipment
830 South Ronald Reagan Blvd
Suite 192
Longwood, FL 32750
Phone: 407-691-3009
Fax: 407-691-3021

To report abuse, neglect, or exploitation call 1-800-962-2873
MEMBERSHIP APPLICATION & RENEWAL FORM

Membership in the Ostomy Association of Greater Orlando, Inc. is open to persons with all types of intestinal and urinary diversions, as well as supporting family, friends, organizations, and businesses.

This form may be used for both new memberships and renewals.

**NOTE:**
Renewals are due on January 1 of each year.

PLEASE PRINT
Name: ______________________________________________ Date: ______________
Address: ___________________________________________________________________
City: __________________________ State: _____ Zip: __________
Phone: _________________________  Alternate Phone: _________________________
Email Address: __________________________________________________________
Date of Birth (optional): ___________________

PLEASE FILL IN THE APPROPRIATE BLANKS BELOW. Information will be kept CONFIDENTIAL.

Type of diversion(s) - Circle all that apply or check None.
- Ileostomy          - Colostomy          - Urostomy          - Ileoanal Reservoir/J-Pouch          - Continent Ostomy
- Other: _______________________________ Date of Surgery: _____________ None: ____

Relationship to Ostomate:  Self  Spouse  Family Member  Parent  Other: __________________

Dues and Donations: (Please note that donations are tax deductible)

$20.00  Enclosed are my dues for membership in the Ostomy Association of Greater Orlando, Inc.

_______  Enclosed is an additional donation to support all of our ongoing programs.

_______  Enclosed is an additional donation to support the annual Youth Rally.

_______  Enclosed is an additional donation to support our ostomy supply GIFT ROOM.
Our Gift Room provides ostomy supplies for those without insurance in the greater Orlando area.

_______  Total Amount Enclosed

You can pay or renew your dues using **PayPal**, by going to our website [www.oagohome.org](http://www.oagohome.org) under the “MEMBERSHIP” menu.

Or, pay by check payable to the **OAGO**. Bring this form and payment to our next meeting, or mail to:

**Patrick Rodgers, Treasurer**
309 E Citrus Street
Altamonte Springs, FL 32701

“The greatest GOOD is what we do for one another.”  Mother Teresa