



Ostomy Association of the Houston Area

AFFILIATED SUPPORT GROUP

"We help ourselves by helping others to help themselves."

We are a volunteer-based organization dedicated to providing education, information, support and advocacy for people who have had or will have intestinal or urinary diversions.

P.O. Box 25164
Houston, TX 77265-5164
www.ostomyhouston.org

Nurse Shares 4 Common Convex Ostomy Skin Barrier Myths

by Terri Cobb, RN

A convex ostomy skin barrier can help prevent output leakage and skin issues. Unfortunately, some misconceptions about convexity may keep people with ostomies from using it.

A convex pouching system refers to the shape of the back of the ostomy skin barrier – the side that goes against your skin. A convex skin barrier is not flat, rather it is curved or dome shaped. Using an integrated convex skin barrier is often referred to as "adding convexity" to a pouching system. This convexity provides a gentle push on the belly, allowing the stoma to protrude up and outward. This can help output go directly into the pouch and not under the skin barrier (which can cause a leak).

Common reasons for using convexity are to prevent leakage and related skin issues, and to avoid having to change the pouching system more frequently. If your pouching routine or body weight has changed, chances are it's time to consider using a convex skin barrier.

Flat Skin Barrier



Convex Skin Barrier



Below are a few myths or misconceptions about using convexity:

1. All convexity is the same

Convexity should be chosen and customized based on your specific stoma and body shape. There are two main types of convexity: soft and firm. Soft convexity is flexible and conforms to your body as you move. Firm convexity is rigid and provides firm support around your stoma to help it stick out. In most cases, soft convex skin barriers are used on firmer abdomens, and firm convex skin barriers work best on softer abdomens. Someone may have a bad experience with convexity, only to learn that it was the wrong type for their stoma, body shape, or output. It's important to know that the convex skin barrier opening needs to be close to the stoma in order to help the stoma protrude. This will also help reduce the possibility of leakage.

2. A convex skin barrier is uncomfortable or even painful

If your convex skin barrier is causing pain or discomfort, you are not wearing the right type of convexity. Based on your needs, and with guidance from a healthcare professional, consider trying some of the many convex barrier options available and see if they make a difference. The importance of addressing leakage should outweigh the fear of trying something different. Use the health of the skin around your stoma as a barometer. If your skin looks

(Continued on page 3)

We are a health support group, a non-profit, tax-exempt, organization of volunteers whose purpose is to provide mutual aid and education to persons who have ostomies and to their families. We are a Texas non-profit corporation. Membership fees and donations are tax deductible.

Patient Visiting and Support Services

Doctors and WOC Nurses, please note:

Upon request from a doctor, nurse, or social worker, a specially trained visitor will be asked to contact an ostomy patient by phone or visit them in person before and/or after surgery. The visitor will be matched as nearly as possible according to sex, age, and type of ostomy. The visitor does not give medical advice, and there is no charge for this service. Please contact our Visitation Coordinator, Marian Newman at 713-392-5768, or newmarian@gmail.com.

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Central Group News

Are you looking for answers to your ostomy questions? Can't find an ostomy nurse or ostomy clinic in the Houston area? Then you need to attend our special February 22nd Zoom Meeting where we will be introducing you to the Coloplast CARE support team. You can join the meeting and connect by computer, phone, iPad, etc. So, please mark your calendars and join us.

Here are the details:

Date: Monday, February 22, 2021
Time: 7:00 pm
Title: **How Coloplast CARE Can Support the Houston Area**
Presenters: Tabatha Kelley—Regional Manager
 Shannon Triplett—Houston Territory Manager
 James Bartley—Coloplast Care Advisor
 Nancy Carver—Coloplast Care Advisor
Description: An in-depth look into all the ways you can be supported post discharge and throughout your life by a Coloplast Care Advisor. ***Learn more about resources available!***

For registration information contact me, a member of the board or anyone of our group coordinators listed on the last page of this newsletter. Hope to see you on the 22nd!!

And, don't forget to check out the group news for more virtual meetings this month.

Also posted in this newsletter is a wonderful volunteer opportunity with United Ostomy Associations of America, Inc. If you are interested in learning more about being a Program/ Speaker Coordinator for the UOAA 2022 National Conference, please review the job description and contact Millie Parker at mparker75@tampabay.rr.com.

Kathleen Duplessis, President, OAHA, 713-299-3180

We have an **Ostomy Visitor Training Workshop** every other year, so, this is the year for the workshop. Please **SAVE THE DATE: July 17, 2021 from 8:30 a.m.–1:00 p.m.** This training carries on a service that our organization has provided for over 65 years. Upon completion of this program, attendees will be specially trained to visit with an ostomy patient before or after their ostomy surgery. Trained visitors do not give medical advice, but these visits help patients in their rehabilitation process by demonstrating an ability to live a normal and active lifestyle with an ostomy. **Stay tuned for more details as we begin planning this workshop!**

HOPE—TCH Woodlands, Pediatric Group News

The HOPE group will not be meeting in February. You are welcome to join the Sugar Land Group Virtual Meeting on February 18, 2021.

MaryAnne Lewis, maryannelewis@hotmail.com or 281-948-1490

Northwest Group News

The Northwest Group was thrilled to host “Emergency & COVID-19 Care for Ostomates” at their January meeting. A total of 28 participants attended the presentation by Jane Fellows, CNS, CWOCN-AP. Special thanks to Crystal Luna-Anderson, RN, BSN, CWON, CFCN, with Coloplast Professional Education Programs for coordinating this program with us. The participant audience comprised a balanced blend of professional health caregivers, ostomates and family as well. We were pleased to also see representatives from the Metro Maryland Ostomy Association among our guests. Ms. Fellows joined us from her home in North Carolina and provided a comprehensive slide show followed by an open forum for questions and answers. Her information was comprehensive, practical and helpful to everyone. She received an abundance of positive feedback following her educational and informative presentation. Technical and Zoom co-hosting support was provided by Lynnae Schatz, RN.

Our February program “Self-Care for the Care Giver” will be presented by our own Patti Suler, OAHA Media Coordinator. This program will feature a variety of self-care techniques appropriate for professional and/or primary caregivers and ourselves. Contact any program or group coordinators for registration information.

Billy Locke, 337-515-6354

Baytown Group News

Baytown Support Group members were pleased to resume monthly meetings with a virtual meeting on Monday January 18th. Participants shared experiences of isolation from family, children and grandchildren as these months of dealing with corona virus have caused additional stress. I commend my ostomy friends for their resilience that was evidenced by their sense of humor, their purpose in life, flexibility, and adaptability during these difficult times.

Group shared thoughts on educational needs for the upcoming year. Agreed that we would like to re-schedule those presenters we had for 2020 and discussed ideas for additional programs.

Baytown Support Group will continue to meet virtually on the Third Monday of each month from 6-7:00 pm until further notice. We hope you will plan to join us. Coloplast will sponsor the February 15th program. Look for the invite. If you do not receive it, please email me and I will be happy to forward it to you.

Look forward to “seeing you” soon,

Cindy Barefield, BSN, RN-BC, CWOCN
 281-428-3033, cbarefield@houstonmethodist.org

Sugar Land Group News

Our meeting began at 6:00 p.m. with Joan welcoming all, then handing the program and PowerPoint on Skin and Stomas to Sarah Arriaga, BSN, RN, WOC Nurse.

A wide variety of skin issues were reviewed and then the “crusting” process was covered. Crusting procedures are techniques of using ostomy powder and skin barrier to apply a protective barrier layer over the broken skin.

Products needed for the crusting procedure are:

1. Ostomy powder
2. Barrier film wipe or spray
3. Warm water and wash cloth to clean

Crusting is used when either the skin is dry and irritated or wet and irritated. When the skin wet or weepy, apply an ostomy powder first, like Stomahesive, brush off the excess. Now either pat with a barrier wipe over the powder or spray the skin barrier on top of the powder. You may repeat this process—always ending with the barrier wipe or spray. Once the barrier is COMPLETELY dry (it will be a little sticky) apply your ostomy appliance/bag.

When skin is dry and irritated, apply the barrier first, then the ostomy powder and then the barrier, when COMPLETELY dry (it will be sticky) apply the ostomy appliance/bag.

Here is a link to see the procedure: [Convatec Crusting Procedure Demo](#)

Download this [GUIDE](#) to help identify skin damage before it progresses and get tips for taking better care of peristomal skin.



Sarah Arriaga and Meghan Atchison, RN, Ostomy Care Certified, answered questions from the group and several members offered up their process for crusting and skin care.

Our next meeting is February 18, 2021 at 6:00 PM and we will be discussing “Love Your Stoma—Emotions and Stomas.”

Details on how to join the call are provided in your February OAHA Email. Please feel free to join us!

Joan Burnham, MSN, RN, OCN, MEDSURG-BC,
Oncology Nurse Navigator at jmburnham@houstonmethodist.org or 281-274-0188

Nurses Share 4 Common Convex Ostomy Skin Barrier Myths *(continued from page 1)*

good, and you are not leaking, you’ll know you’re using the right type of ostomy skin barrier for a good fit.

3. I have to wait to use convexity

You don’t need to wait a certain amount of time before using a convex skin barrier. Each person is different. Some may need to add convexity immediately after surgery, while others may not need to add it at all. There is no concrete rule, and it depends on the type of stoma you have and how well it protrudes. If your belly is soft enough, you can start right away. Again, it’s important to prevent leakage while keeping the skin around your stoma healthy, and trying convexity could help accomplish both goals.

4. If my stoma is level with my skin, I need a convex skin barrier

In most cases this is true, but choosing a type of convexity can depend on your stoma output. There are always exceptions and everyone has different experiences. For example, someone who has a colostomy with formed stool and regular bowel habits may not need to use convexity, even if their stoma is flush to the skin. That’s because formed stool is unlikely to leak underneath the skin barrier. On the other hand, more liquid output can increase the chances of leakage.

Consider trying a convex ostomy skin barrier to see if it will help prevent leakage and skin issues, and increase your pouching system wear time (i.e., how long you can wear your skin barrier before it fails). Convex skin barriers come in both pre-cut and cut-to-fit options and are covered by most insurance plans. An ostomy nurse can help determine which type of convexity is right for you and when you should use it.

For more information on skin barrier convexity and other resources, visit the [Hollister Ostomy Learning Center](#)

Terri Cobb earned her RN degree in 1991 and became a board-certified CWOCN in 2011. Currently on staff at the Cleveland Clinic in Cleveland, Ohio, her responsibilities include caring for ostomy patients of all age groups from the neonate and beyond. Terri interacts with patients in all phases of their journey from pre-op, to immediate post-op and through follow-up care. Financial Disclosure: Terri received compensation from Hollister Incorporated for her contributions to this article.

Editor’s note: This article is from one of UOAA digital sponsors, Hollister Incorporated. Sponsor support along with donations from readers like you help to maintain their website and the free trusted resources of UOAA, a 501(c)(3) nonprofit organization.

We encourage you to bring your spouse or significant other and members of your immediate family to our meetings.

New Ostomates Deserve Our Best

By Ellyn Mantell

Welcome to my fantasy.

We all have our fantasies, so come along with me as I describe one of mine...new ostomates (those with ileostomy, colostomy or urostomy, all having had stoma surgery) would begin their adjustment to their new life with all of their questions answered, they would have knowledge and be welcomed into an Ostomy Support Group, they would have a connection with a Wound, Ostomy, and Continence Nurse (WOC Nurse) and they would recognize what a gift, what a lifesaver an ostomy is.

My concern is that this is not the usual for ostomates, either new or even those who have them for many years. In New Jersey, particularly where I live, there are many resources available, and yet, even in our sophisticated arena, many ostomates leave the hospital uninformed and underserved. Prior to Covid-19, I visited patients in the hospital or in rehab facilities to answer their questions. I brought journals and pens so they could write their emotions, concerns, and observations, and refer back to their notes as they made progress. I am so anxious to return to that important undertaking as soon as it is safe to do so.

When I had my surgery in March of 2014, my surgeon told me I would be in the hospital for 5-7 days. However, I felt so well, so quickly, that I was able to leave 4 days later. That was pushing the envelope, but I was so used to recovering from abdominal surgeries, having had 22 before that, my ability to go into recovery mode was well-entrenched. The majority of patients need so much more time, and now, even 4 days is more than they are offered.

Back to my fantasy, and my pipe dream of a great transition for new ostomates:

How can questions be answered, and knowledge gained as needed?

The majority of ostomies, even those performed in an emergent situation, require marking the abdomen for placement of the stoma (opening.) That is typically done by the Wound, Ostomy, and Continence Nurse (WOC Nurse) and that is the person who comes to the patient's room post-op to begin to prepare the ostomate for life at home. In an ideal world, the WOC Nurse has written information to share, which once home, will make more sense, and provides contact information for any questions. Additionally, the ostomate is put in touch with the United Ostomy Associations of America to become part of a bigger group of kindred people.

How do we find Ostomy Support Groups in our area?

I am involved in three Support Groups, becoming president of one already formed when I had my ileostomy, and then worked

with WOC nurses at two other hospitals in the area to form new ones. Until Covid hit, these were growing so nicely. But we are meeting virtually now, and staying as close as possible, knowing that the day will come when we are back together. It is wonderful to see "my people" who share my concerns, experiences and fears and accomplishments. We help each other in countless ways. People reach out to me through the WOC nurses in the area, United Ostomy Associations of America, The Phoenix Magazine, the American Cancer Society, three hospitals, and through word of mouth. Because I am so open and revealing about my ileostomy and Lily, my stoma, I believe my name pops into the minds of people when they know someone in need.

Ostomies are Lifesavers! "Read all about it!"

An ostomy provides the gift of health for many, many medical situations, including cancer, ulcerative colitis, Crohn's disease, diverticulitis, motility issues and devastating organ injury. We live in good times for our supplies and the ability to try new and innovative appliances and accessories. *The Phoenix* magazine is a great resource for all, and assists in wading through the confusion many feel. Motivational stories and practical guidance round out the offerings.

A final word about those we call our Angels...the Wound and Ostomy Nurses.

Establish a relationship with one, and if there is an Ostomy Clinic or Ostomy Center in your area, use it! These nurses are your connection to properly-fitting appliances, the correct supplies and accessories, questions and personal support, as well as the ability to refer to a Support Group. More and more are entering the private sector and providing services such as home visits, particularly to those who cannot travel to a clinic or office, and your surgeon may even have one in the office to help navigate the transition to life as an ostomate. We call our WOC nurses our Angels, and that is exactly what they are, ladies and gentlemen with big wings to support us!

Ellyn Mantell is a UOAA advocate and Affiliated Support Group leader from New Jersey. You can follow her personal blog at morethanmyostomy

Central Group

Monthly: (This month) Fourth Monday of the month
Date: Monday, February 22, 2021
Time: 7:00 p.m.
Place: Virtual Meeting (Contact your group leader for login credentials.)
Program: How Coloplast CARE Can Support the Houston Area
Contact: Denise Parsons 713-824-8841 rockynme2@gmail.com

Baytown Group

Monthly: Third Monday of the month
Date: Monday, February 15, 2021
Time: 6:00 p.m.
Place: Virtual Meeting (Current Baytown Support Group members have been invited.)
Program: Coloplast will sponsor the program.
Contact: Cindy Barefield, CWOCN, 281-428-3033

Northwest Group

Monthly: Third Wednesday of the month
Date: Wednesday, February 17, 2021
Time: 7:00 p.m.
Place: Virtual Meeting (Contact your group leader for login credentials.)
Program: Patti Suler, OAHA Media Coordinator presents "Self Care for the Care Giver"
Contact: Billy Locke 337-515-6354

Sugar Land Group

Monthly: Third Thursday of the month
Date: Thursday, February 18, 2021
Time: 6:00 p.m.
Place: Virtual Webex Meeting (Information is provided in the email of your February Newsletter.)
Program: "Love Your Stoma—Emotions and Stomas," RSVP to Joan at 281-274-0188 or jmburnham@houstonmethodist.org
Contact: Joan Burnham, MSN, RN, OCN, RN-BC, Oncology Nurse Navigator (info above)

Woodlands Pediatric Group

Monthly: Second Sunday of the Month
Date: No meeting in February—Join one of the available group meetings this month.
Contact: MaryAnne Lewis, maryannelewis@hotmail.com or 281-948-1490

J-Pouch

For J Pouch questions, attend any of our group meetings, or call or text Ron Meisinger at 281-491-8220

Opportunities and Announcements

Use Those Shopping Cards

Kroger (LB326) and Randalls (3698) return a percentage of your purchases to the Ostomy Association on a quarterly basis. For information about shopping cards, please visit the website: <http://www.ostomyhouston.org/>

Anniversary Gift

As you celebrate the anniversary of your ostomy surgery each year, consider making a monetary gift to the Ostomy Association. Checks should be made payable to the **Ostomy Association of the Houston Area** and sent to the Treasurer at the address shown below.

AmazonSmile

On your first visit to AmazonSmile (smile.amazon.com), you are prompted to select a charitable organization from the list of organizations. You can change your selection at any time. To change your charitable organization: Sign in to smile.amazon.com on your desktop or mobile phone browser. From your desktop, go to Your Account from the navigation at the top of any page, and then select the option to Change your Charity. Or, from your mobile browser, select Change your Charity from the options at the bottom of the page. Select Ostomy Association of the Houston Area as your charity.

Memorial Fund

Donations can be made to our Memorial Fund to memorialize or honor individuals. Checks should be made payable to the **Ostomy Association of the Houston Area** and sent to the address below. When sending a donation, be sure to include the name of the person being honored so that acknowledgement can be sent.

Moving? Changing Your Email Address?

Please make sure we have your current contact information so we can reach you by email, U.S. mail, or phone. Send updates to Lorette Bauarschi at lorette@bauarschilaw.com.

For Anniversary Gifts, Memorial Donations, Mailing Changes, or Sponsorships, please send all correspondence to:

Ostomy Association of the Houston Area
 Attn: Mike McGinity, Treasurer
 P. O. Box 25164
 Houston, TX 77265-5164

(When sending a donation, please include the name of the person being honored so that appropriate acknowledgement can be sent.)



The **United Ostomy Associations of America (UOAA)** can be contacted at: www.ostomy.org or **800-826-0826**

WOC Nurse Directory

Cindy Barefield, RN, CWOCN (281) 428-3033
Houston Methodist Baytown Hospital
cbarefield@houstonmethodist.org

Pat Thompson RN, BSN, CWON (281) 397-2799
Patricia.Thompson6@hcahealthcare.com



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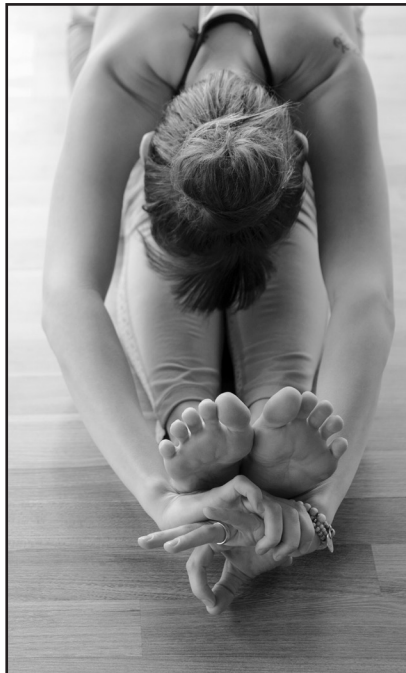
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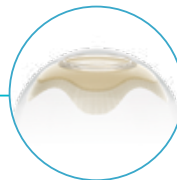
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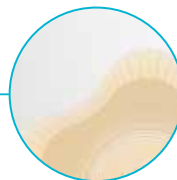
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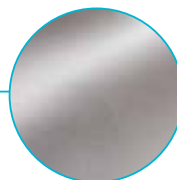
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Membership in the Ostomy Association of the Houston Area requires one easy payment. Please complete the following form and mail as directed with payment as shown. Dues of **\$25.00 per year** are payable to:

Ostomy Association of the Houston Area, Attention: Treasurer
P. O. Box 25164, Houston, TX 77265-5164

Date: _____

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ ZIP: _____ E-mail: **(required)** _____

Surgery Date: _____ Birth Date: _____ Sex: ☐ Male ☐ Female ☐ Other _____

Reason for surgery ☐ Crohn's ☐ Ulcerative Colitis ☐ Cancer ☐ Birth Defects ☐ Other _____

In addition to English, I also speak the following language(s). Foreign language spoken: _____

Why do we ask this? We have a patient visiting program and we are occasionally contacted by ostomates who are not fluent in English and we look to our membership to assist with communication.

Procedure or Relationship:

To help us complete our records, please answer the following.

Check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Colostomy | <input type="checkbox"/> Continent Ileostomy | <input type="checkbox"/> Parent of Child with procedure |
| <input type="checkbox"/> Ileostomy | <input type="checkbox"/> Continent Urostomy | <input type="checkbox"/> Spouse/Family Member |
| <input type="checkbox"/> Urinary Diversion | <input type="checkbox"/> Pull-Through | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> J-Pouch | <input type="checkbox"/> Nurse |

*Membership benefits include:
Monthly Support/Information
Meetings, Social Events,
Monthly Newsletter*

☐ I would like to attend meetings with the **(please circle one):**

Central Group Baytown Group Northwest Group Sugar Land Group Woodlands Pediatric Group

☐ I would like to become a member but cannot pay dues at this time. *(This will be kept confidential.)*

I learned about the Ostomy Association from

☐ WOC Nurse ☐ Physician ☐ Newsletter ☐ Surgical Shop ☐ Website ☐ Other: _____

I am interested in volunteering. ☐ Yes ☐ No

I have enclosed an additional \$_____ as a donation to support the association's mission of helping ostomates.

VOLUNTEER OPPORTUNITY WITH THE UNITED OSTOMY ASSOCIATIONS OF AMERICA, INC.

Program/Speaker Coordinator for the UOAA 2022 National Conference



- Work with the UOAA 2022 Conference Committee Members to develop an educational and social program
- Contact suggested speakers to determine their interest and ability to participate advising them of workshop name, presentation date, time and “compensation”.
- Upon receipt of agreement to speak send thank you message and request bio information for introduction and Program Book as well as AV requirements
- 60 days out send follow-up message; give presentation instructions
- Prepare and maintain a status spreadsheet showing:
 - Workshop title
 - Workshop location, date and time
 - Speaker name and contact information
 - Speaker “compensation”
 - Required AV
 - Room setup
- Collaborate with Volunteer Coordinator to recruit workshop moderators
 - Create a working guide for session moderators
 - Train Workshop moderators during pre-conference
- Write speaker introductions to be used by moderators
- On site, manage and set up speaker Ready Room
- During conference, greet and welcome speakers, have them escorted to their room, give them any specific instructions
- Coordinate preparation (with Administrative Coordinator) and distribution of speaker certificates and speaker gifts
- Send post conference thank you messages for participating in conference

If you are interested in this volunteer position or would like to learn more about this opportunity please contact: Millie Parker at mparker75@tampabay.rr.com

Millie Parker will be stepping down as Program/Speaker Coordinator but will be available to mentor and coach the new coordinator.



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