



# INSIDE

JANUARY 2026



THE NEWSLETTER OF OSTOMY MANITOBA ASSOCIATION, Inc. (OMA)



**Ostomy Manitoba**  
Association

Healthier / Stronger / Together

## Find Your Way: The Journey Forward with an Ostomy

*Via Insights of OASNJ*

**Presence and Appreciation** When you have experienced uncertainty through the lens that we have, you gain appreciation for ordinary moments. Not because you're trying to be grateful – because you actually are. People talk about mindfulness like it's something you have to work toward. For us, it's just another day. We live it by necessity, not by choice. No expensive spiritual retreat with gurus required. This kind of presence can get exhausting at times, even bordering on hyper-vigilance. But kept under control, that presence is valuable body literacy – lessons we can transfer to all aspects of our lives. For me: it has made me feel more alive. When asked what it's like living with an ostomy for forty years, part of what I say is it taught me how to be present in my life instead of just racing quickly through it.

### Three stages of the Ostomy Journey Over Time

I've noticed the journey with an ostomy isn't one continuous road. It shifts, and it has stages. Understanding where you are in these stages can help make sense of current challenges and hint at what might be next in life. I think of it as three stages: 1. Getting medically stable. 2. Becoming functionally independent 3. Learning to flourish and thrive.

First things first. You can't do much until you're medically stable. This is about listening carefully to your doctors, managing complications, or recovering from a procedure. When leaving the hospital after one of my surgeries, when asked how I was feeling, I would joke: "I'm upright, I've

*(Continued on page 5)*



## IN THIS ISSUE

Find Your Way: The Journey Forward	.....	1
From the President's Desk January Chapter Meeting - ZOOM Link	.....	3
Christmas & New Year's Greeting	.....	4
Find Your Way: The Journey Forward (cont'd) Dehydration Can Drain Your Mind & Mood	.....	5
Resuming Social Activities After Surgery	.....	6
Resuming Social Activities (cont'd) When to Use Ostomy Barrier Extenders	.....	7
What is the Hidden Disabilities Sunflower?	.....	8
Ostomy Barrier Extenders (cont'd) An Ostomate's Thanksgiving	.....	9
Writing - A Pathway to Healing Should Your Family be Tested for Cancer?	.....	10
The Vicious Cycle	.....	11
The Vicious Cycle (cont'd) Family Testing for Cancer (cont'd)	.....	12
Tips & Hints that Still Apply	.....	13

*We encourage you to bring your spouse or significant other, members of your family or a friend to our meetings. Everyone is welcome. Membership is not required.*

**Ostomy Manitoba Association (OMA)** is a registered charity run by volunteers with the support of medical advisors. Through our members, we offer emotional support, experienced and practical guidance, and educational resources to families, caregivers, and the public. Our services and assistance extend throughout Manitoba and Northwestern Ontario.



**Ostomy Manitoba  
Association**

Healthier / Stronger / Together

## IN-PERSON MEETINGS

Regular chapter meetings are held from September through May. There are no scheduled chapter meetings in June, July, or August. A Christmas party is usually held in December.

**Meetings are held on the  
FOURTH WEDNESDAY  
of the month.**

**7:30 pm—9:30 pm**

**Manitoba POSSIBLE Bldg.**

**825 Sherbrook Street,  
Winnipeg, MB  
Rooms 202 & 203**

## FREE PARKING:

Enter the SMD parking lot to the south of the building just off Sherbrook and McDermott Ave.

## ONLINE MEETINGS



**Zoom is offered as an option at all our chapter meetings for those who are not able to attend in person for whatever reason.**

**Link is found in this newsletter as well as on our website at -**  
<https://ostomymanitoba.ca>

**Meetings open at 7:10 pm for random discussions among attendees.**

**Meeting Starts at 7:30 pm**

## OSTOMY VISITOR PROGRAM

### Get The Support You Need!

Speak to a Certified Ostomy Visitor for personal support with your ileostomy, colostomy, or urostomy. Visits are available in hospital, in-person, phone & virtually. It could be either pre-operative or post-operative or both.

At times you may just have a few questions or at other times you may be 'working' your way through something and it's good to talk to someone who can relate to your situation personally.

The visitor will be chosen according to the your age, gender, and type of surgery. All you have to do is ask.

A visit may be arranged by calling our Visiting Coordinator, Bonnie Dyson at 204-669-5830.

## ARE YOU MOVING?

If you move, please inform us of your change of address so we can continue to send you the newsletter.

**Send your change of address to:**

**OSTOMY MANITOBA  
204—825 Sherbrook St.  
Winnipeg, MB R3A 1M5**

**DISCLAIMER** Articles and submissions printed in this newsletter are not necessarily endorsed by *Ostomy Manitoba Association* and may not apply to everyone. It is wise to consult your Ostomy nurse (NSWOC) or Doctor before using any information from this newsletter.

## NOTICE:

**When in doubt about a meeting cancellation during inclement weather- here are the steps to follow:**



- **WAIT until after 12:00 Noon**
- **CALL 237-2022, - # found on back page.**
- **If there is no "CANCELLATION MESSAGE" on the machine, the meeting is still on. Use good judgement if you plan to attend.**

## LETTERS TO THE EDITOR

The Editor, *Inside/Out*  
Email: [pis\\_mel@outlook.com](mailto:pis_mel@outlook.com)

*Inside/Out* is published eight times a year.

All submissions are welcome, may be edited and are not guaranteed to be printed.

**Deadline for next issue:  
Friday, Feb. 6th**

## WEBSITE

Visit the OMA Web Pages:

<https://ostomymanitoba.ca>

**Webmaster:**  
[webmaster@ostomymanitoba.ca](mailto:webmaster@ostomymanitoba.ca)

## FROM the PRESIDENT'S DESK

I think I can safely say that things are back on track now health-wise on my part.

I've had to do a lot of catch-up – especially to do with tax receipts. The tax receipts should all be in your hands at this point. If you're missing something give me a shout at 204-489-2731.

Unfortunately, there were no newsletters issued for October & November/December 2025 either. This is probably a good time to mention that we need to find a new editor (or a back-up at least). We need someone who is comfortable in working with social media and using programs other than MS Publisher. As of October 2026, Microsoft will no longer be supporting MS Publisher and this would be a good time for someone new to move into this position. If you think you might be able to help, give me a call (204-489-2731) or email: pis\_mel@outlook.com.

This brings me to the fact that new board member, Rosanna Guzzi has offered to do the minutes as long as she can work on other tasks that arise. Welcome aboard Rosanna and thank you!

I admit to getting really excited when I receive letters and/or stories from our members. The stunning photo that Lena & Ed sent as a Christmas & New Year's greeting is just another example. I'm always looking for submissions and ideas for the newsletter.

At our meeting in November, Tina Rutledge (NSWOC) used her years of experience to speak to all things to do with ostomies. We thank her for taking time out from her life to provide such a great evening of information. Discussion started to arise over travelling with an ostomy. A member mentioned the Hidden Disabilities Sunflower which led to further questions. As we were running out of time, I promised to add this to our discussion group in the New Year. Ross Bingham recently found a link on this subject for your information. - Page 8.

We have had a fair number of new members join us this past year. We will also be discussing the Disability Tax Credit for ostomates to help our new members apply for this very lucrative credit successfully.



## OMA Chapter Meeting January

**Jan 28, 2026 07:30 PM**

### TOPICS for DISCUSSION

### TRAVEL TIPS & DISABILITY TAX CREDIT

#### Zoom Link

[https://us02web.zoom.us/j/83835090404?  
pwd=Ef2YUY5XQ3vonuqsTJ26kOGbVeAtHZ.1](https://us02web.zoom.us/j/83835090404?pwd=Ef2YUY5XQ3vonuqsTJ26kOGbVeAtHZ.1)

#### Zoom Website Login information

**Meeting ID: 838 3509 0404**

**Passcode: 326475**

**Dial in using 204-272-7920, then use the same ID and Passcode**

A reminder to you long term members – your input is needed as well! Yes, you've heard it over and over again. But your success needs to be heard by these new members to encourage them to apply.

MB Possible's & our move is supposed to be complete by April 1st. I'm told that it's a pretty exciting feeling if you drive by 1680 Notre Dame Avenue during the evening, as you can see all the lights on in the building and all the construction going on. I don't have much more information to share at this time although there are virtual meetings being arranged for February. In the meantime, Sandy Borys and Rhona Recksiedler have been busy downsizing our office. A huge task I must say - as this hadn't been done for many years. Thank you for all your hard work ladies.

Your board is discussing ideas in the meantime, to introduce you all to our new home following the move. Once we see how everyone & everything fits in, I'm sure plans will fall in place quite quickly.

In the meantime I leave you with this quote:

*As we step into another year, may it be filled with possibilities, renewed energy, and opportunities for us to grow and thrive. Happy New Year!*

*Lorrie*

## OSTOMY MANITOBA CHAPTER VOLUNTEERS

### SOCIAL CONVENORS:

Sandy Borys 204 - 793-8307  
Rhona Recksiedler 204 - 257-8680

### RECEPTION/HOSPITALITY:

Donna Suggitt 204 - 694-7660  
Bonnie Dyson 204 - 669-5830

### PUBLIC RELATIONS:

Randy Hull 204-794-4019

### MEMBERSHIP CHAIR:

Marg Pollock

### LIBRARY:

Ursula Kelemen 204 - 338-3763

### CARDS:

Sandy Borys 204 - 793-8307

### NEWSLETTER:

**Editor:** Lorrie Pismenny 204 - 489-2731

**Mailing:** Jan Dowswell

### WEBMASTER:

Leslie McKendry-Smith

### VISITOR TRAINING:

Lorrie Pismenny 204 - 489-2731

### SASO:

Vacant

**FOWC: Friends of Ostomates  
Worldwide (Canada)**

UNUSED SUPPLIES PICK UP

**“NEW” 204-237-2022**

Please leave a message

### CHAPTER WEBSITE:

<https://ostomymanitoba.ca>

### CHAPTER EMAIL:

[info@ostomymanitoba.ca](mailto:info@ostomymanitoba.ca)

Ostomy Manitoba Association is a registered non-profit charity run by volunteers. OMA was incorporated in August 1972.

### BRANDON/WESTMAN OSTOMY SUPPORT GROUP:

#### Contact/s:

Marg Pollock 204-728-1421

**OSTOMY SUPPLIES  
HSC MATERIALS HANDLING  
59 Pearl St. , Winnipeg, MB.**

**ORDERS: 204-926.6080 or  
1.877.477.4773**

E-mail: [ossupplies@wrha.mb.ca](mailto:ossupplies@wrha.mb.ca)  
Monday to Friday 8:00am to 4:00pm

**PICK-UP: Monday to Friday  
8:00am to 11:00pm**



*2025 Christmas Greetings - via email Dec. 24, 2025*

*An example of God's creative artistry on our window!*

*God bless you all.*

*Lena & Ed Harder (OMA Members)*

*(Continued from page 1)*

got pants on, and I'm taking nourishment by mouth." That was my humorous way of saying I was medically stable. On my way home. Medical stability is the foundation everything else builds on. Without it, you're just trying to survive. With it, you can start thinking about comes next.

**Wanting to flourish is being human** It's honoring the life you were given by actually living it fully. Becoming functional is about being proficient in looking after your stoma and appliance. It's creating a new daily routine that includes all your other hygiene and 'get ready' rituals. Getting comfortable in this whole new world. When you are functional, you become grateful. Functional is a big deal! You can leave the house without mapping every bathroom. You can eat dinner with friends. You can sleep through the night with minimal interruptions. But here's what happens sometimes. You get functional, and it feels so secure that you lock yourself in. You find your safe foods, your reliable routines, your predictable schedule. Too predictable? The problem is when function becomes your ceiling instead of your floor.

**Flourish and Thrive** Let's talk about moving from functional stage (stage 2) to flourishing (stage 3). Flourishing is what you want out of your life - not in spite of your ostomy but in fact because of your ostomy and the life-saving consequences that got you this far. Flourishing is when you stop asking "Can I do this with my ostomy?" and start asking "Do I want to do this?" It's when your ostomy becomes just one part of your life, not the organizing principle of your existence. It's when you stop planning around your ostomy - and start planning around what you want out of life. Sounds easier than it is to do! When we get functional, there is loud applause from friends, family and doctors. We too are excited. Except we are people. And just being stable, then functional, is not enough. We want to thrive and flourish and become the person we imagine ourselves being. That's where the gap

shows up - the space between functional and flourishing. There is a gap between being functional and flourishing. We can be so pleased with being functional that we decide to stay in that mode - never pushing forward, never trying new things, never creating new adventures that self-doubt warns against. Sometimes we get lost in that gap. You're no longer a patient, but you're not quite thriving either. It's easy to get disoriented, questioning if wanting more is worth the risk. If we want more, are we ungrateful for what we have? Deep question. I say no.

**Thriving is the aspiration** However it looks for each of us, that's the direction forward. Being grateful for your medical stability and functional independence doesn't mean you have to stop there. You can be thankful for what you've achieved AND still want to grow, explore, and push your boundaries. Wanting to flourish is being human. It's honoring the life you were given by actually living it fully. The ostomy journey is not a straight line. Circumstances will sometimes force you backward. What matters is finding your way back - regaining functionality and taking that leap of faith toward flourishing again.

**Inspiration Without Comparison - Final Reflections** When you see someone else thriving - really thriving - it expands your sense of what's possible for yourself. But careful about comparing. We are all on a unique journey, each of us at different stages - not just in our ostomy journey but in our life journey. The 19th century playwright Oscar Wilde said: "Be yourself, everyone else is already taken." Each of us knows our own life better than anyone else. We've already been carrying our courage forward every day - showing up here only made it more visible. That same courage is what lets us reach for more. Thriving is the aspiration. However it looks for each of us, that's the direction forward. And whatever tomorrow brings, we already carry what it takes to keep moving toward it.

*Source: UOASL Live and Learn Winter 2025*

### Dehydration Can Drain Your Mind and Mood

Feeling out of sorts, but not sure why? You might be dehydrated. Two new studies found even mild dehydration comes with big consequences: altered mood, impaired memory, trouble concentrating, fatigue, headaches, anxiety. While the reasons for these symptoms are unclear, researchers at the University of Connecticut, Human Performance Laboratory noted that dehydration causes changes in electrolyte balances in the blood as well as serotonin levels and mood.

#### How to tell if you're dehydrated?

Check the color of your urine. "Anything darker than a pale straw hue means you need to drink more," says study author Lawrence Armstrong, PhD.



### General Funds

*Wendy Cope*

*Fred Algera*

*Norma Wilson*

*Debra Parrish*

*Evhan & Sylvia Uzwyshyn*

*Janice Dowswell*

*Marion Reid*

*Meera Thadani*

*Kenneth Clarke*

*Wayne Hancock*

*Charlie Stevens*

### Stoma Anniversary

*Norma Wilson - 62 Years !!!*

*Barbara Halabut - 49 Years !!!!*

*Wanda Long - 45 Years !!!*

*Susan Luhowy - 3 years!*

*Carol Ann Simpson - ?? Years*

### In Memory of Stan Sparks (former WOA President)

*Terry Pennell*

*Allyson & Jerry Sparkes*

*Lorrie Pismenny*

### In Memory of Andrea Bradie

*Lorrie Pismenny*

### In Memory of Doug Bradie

*Lorrie Pismenny*

### In Memory of Jake Vandehooft

*John Kelemen*

### Camp Fund

*Betty Bakker*

*Sandy Borys*

***Your support and generosity  
is greatly appreciated !***

## Resuming Social Activities After Surgery

### Socializing

Once you are discharged from hospital, you'll need time at home to begin adjusting to the stoma and learn how to care for your body. How long this period lasts will vary greatly from patient to patient depending on how well their surgical wounds have healed and whether or not there are other factors affecting recovery. Work on building up your strength by gentle walking and putting around the home, and practice your stoma management skills. Build up your stamina a little each day.

Set yourself small targets when resuming socializing. You should be able to handle being out of the house for an hour or two - a trip to the dog park, or to the grocery store are simple excursions that reinforce a feeling of getting back into the swing of things. Such small outings that let you be around people without a major social commitment can help restore a feeling of normalcy. You'll soon realize that although you feel different, to others you are the same. You can add more ambitious events as your strength and confidence grow. It might be preferable to keep those first social outings low key, as a lot of noise and activity may be tiring in the beginning. On the other hand, maybe the anonymity of a loud crowd focused on something else might be what you need—we're all different!

Don't forget, if you are meeting new people, you don't have to tell them about your condition unless you want to. Just do whatever makes you feel most comfortable.

### Dining Out

While you are recovering at home you should begin to eat the foods you enjoyed before but with some precautions if your surgery resulted in an ileostomy. Nuts, raw vegetables, meat gristle, and popcorn are just a few of the foods you must be wary about eating because of the danger of blockages. Ask your ET nurse for a list of foods you need to be careful about. Introduce different things in small amounts at a time and chew well. Those with a colostomy don't need to be as vigilant, but common sense should be your guide. Urostomates can pretty much eat what they ate

*(Continued on page 7)*

(Continued from page 6)

before. Once you have had a chance to test different types of food and have a better idea of what foods suit you, there's no reason why you shouldn't be able to enjoy a meal out in a restaurant.

Start with a familiar restaurant and keep it simple. You can order what you used to like but be aware that rich foods and sauces may cause some upset - it may have been a long time since you ate such things! Also, pub and restaurant food portions can be larger than what you have been used to so don't stuff yourself. If you don't want to wait around to be served, go earlier when it's likely to be less busy. On the other hand, if you would rather blend in with the crowd, family times are usually busier.

If you're concerned about particular types of food such as ethnic dishes, try them out at home first so you know how you're going to react.

If you normally have a drink at home, it's best to start with a smaller quantity of your choice of drink. For example, drink a small beer rather than a large one. This will help your body build up your tolerance to alcohol again.

It might be wise to check out the availability of bathrooms in advance - if a restaurant requires a key to use the facilities, or if the facilities are one stall in the back through the kitchen, you might want to eat out elsewhere until you feel confident about managing your ostomy.

And last, don't worry about your stoma making noises. Pubs and restaurants have a lot of background noise. Nobody will hear anything your body does.

## Movies, Plays and Concerts

Movies are pretty easy - go early and choose an aisle seat if you're a little anxious the first time. A lot of movies are so loud these days nobody could possibly hear any noise the stoma might make anyway. With an aisle seat if you need to visit the bathroom you won't have to step over others. Plays and concerts that have less convenient assigned seats might be more of a challenge so let your confidence level be your guide. In time you'll get to know your body and what to expect from it in social situations.

## Weddings, Birthdays and Celebrations

Don't you dare miss out on special occasions because you have an ostomy!! If you are strong enough to attend, please do so. Be aware that you may tire more easily and should exercise some restraint if there's a lot of food and alcohol being served, but otherwise don't deny yourself the fun and pleasure of joining friends and loved ones on their special days. No one is going to be staring at you, they'll just be glad you came. □

Source: Vancouver Ostomy HighLife Nov/Dec. 2025. Taken from the New Patients' Corner

## When to Use Ostomy Barrier Extenders

Ostomy barrier extenders are one of the newest additions to the list of ostomy accessories in the past 5 years.

The question that begs answering is: What is the purpose of these barrier extenders? When I first became an ostomy nurse, I noticed that some ostomy products lacked the surface area for individuals with a larger abdomen, or if they had a large stoma, we were cutting to the maximum, leaving very little of the barrier to adhere to the abdomen.

Individuals have attended the ostomy clinic with tape around their flange to provide them with the security that their ostomy flange would adhere to their abdomen. I have seen it all, from duct tape, to hockey tape, to paper tape. Thus, the birth of the Ostomy Barrier extenders.

The big question I always get asked is, "Do I need these strips?" As mentioned above, there are times when these barrier extenders play a vital role.

However, the bigger question is; Are they needed? No, not everyone needs them. If you find your flange is starting to lift at the edges after a day or two, and there is no leakage, applying the Barrier extenders will help prolong your wear time.

Perhaps your belly button does not allow the flange to adhere very well; placing a strip over that section may help secure your flange. Other times you may want a little security when being active, like swimming, skiing, bike riding, or perhaps during intimacy. On the other hand, some individuals feel that it gives them a sense of security. Similar to an ostomy belt.

**A note of caution**, these flange extenders are not meant to keep a leak in.

What do I mean? They should not be used to trap the urine or stool behind the flange. They

(Continued on page 9)

**July 2025 - December 2025**

## VISITING PROGRAM REPORT

### **Surgeries:**

Colostomy 2; Ileostomy 4; Urostomy 0;

### **Valued Visitors:**

Fred Algera, Lorrie Pismenny, Bonnie Dyson, Jared Dymtruk X2, Rosanna Guzzi, Norma Wilson

Submitted by Bonnie Dyson,  
Visitor Coordinator



*Thanks to all our visitors. You are the heart beat of Ostomy Manitoba!*



- **I don't repeat gossip, so listen closely the first time.**
- **I think my phone is broken. I pressed the home button but I'm still at work.**
- **We all know mirrors don't lie. I'm just grateful that they don't laugh.**
- **The correct term for gluten-free sugarless vegan brownies is "compost."**
- **I need a six-month vacation, twice a year.**
- **Don't regret past mistakes. Whether good or bad decisions, they all led you to where you are today.**
- **Disregard this if you are in prison.**
- **To the person who stole my glasses. I will find you. I have contacts.**



### **What is the Hidden Disabilities Sunflower?**

The Hidden Disabilities Sunflower is a simple tool for you to voluntarily share that you have a disability or condition that may not be immediately apparent – and that you may need a helping hand, understanding, or more time in shops, at work, on transport, or in public spaces.

At our Nov. 2025 chapter meeting, while discussing air travel with an ostomy a member explained that the Sunflower tool is available via the info booth at the Winnipeg Airport with no questions asked.

Ross Bingham has provided a link (below) to WestJet's website and the Hidden Disabilities Sunflower for anyone who wishes more information.

<https://www.westjet.com/en-ca/special-needs>

**NOTE:** I would be interested if anyone has had success (or not) using the Sunflower when travelling. Lorrie (Editor)

### **REASONS TO COME TO MEETINGS...**

*"We come to our local chapter meetings to take comfort in the fact that we are not alone; to bolster up our morale; to be educated in options regarding ostomy management and equipment; to receive practical hints on skin and health care, to help ourselves by helping others."*

## In MEMORIAM

**Stan Sparks**  
(former WOA President)  
**Andrea Bradie**  
(former WOA Board treasurer)  
**Doug Bradie**  
(former WOABoard member)

We extend our sympathy to their families and friends

(Continued from page 7)

cannot prevent a leak; a leak started where your stoma meets your flange opening. Trapping the urine or stool beneath the flange will cause skin breakdown. They can be used to prevent the edges of the flange lifting. These strips have many names, depending on the company that makes them.

Lauren Wolfe RN, MCISc - WH, NSWOC, CWOCN, Macdonald's Prescriptions Fairmont Building

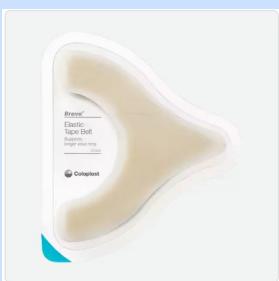
Source: *Vancouver Ostomy HighLife* January/February 2021 via *Ottawa Ostomy News* - October 2023

### What are barrier extenders?

Skin barrier extenders are **curved adhesive strips that “frame” the skin barrier and help it conform to uneven body folds and contours**. They may help increase wear time (i.e., how long you can wear your skin barrier before it fails) by reducing barrier edge lifting and increasing the adhesive coverage area.

A couple of examples of barrier extenders.

Coloplast - Brava -  
Elastic Barrier Strips



Hollister - ADAPT Barrier Extenders

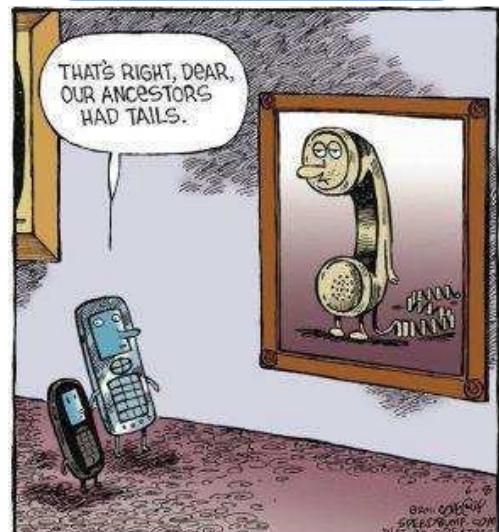


## AN OSTOMATE'S THANKSGIVING:

I am thankful for:

- Medical technology which has given me renewed life, free from pain and restrictions.
- New developments in appliances which allow me to live life normally.
- Family who, without complaint, endured months of worry, expense, and interruptions in their lives during the course of my illness. Friends whose acceptance made the road to recovery easier.
- That little “rosebud” that sputters and spurts, gurgles & growls, and is my lifeline.
- My ability to accept and adapt to this new life, and a wish to live that life to its fullest meaning.
- My ostomy support group which provides the latest in information and supplies, an opportunity for new friends, and a way to help others.

Source: The Ostomy Support Group of Northern Virginia, LLC “The Pouch” Jan. 2013 via INSIDE/OUT - Winnipeg Ostomy Association January 2013



## WRITING - A PATHWAY TO HEALING



Facing a major illness or undergoing surgery can be an overwhelming experience, not only physically but also emotionally and mentally. During medical treatments and recovery, many find solace and strength in writing, whether through

drafting a memoir or jotting down notes in a personal journal. Both forms of writing offer distinct benefits that can aid in healing, providing a powerful tool for navigating the challenges of illness.

One of the most profound impacts of writing, particularly during or after a health crisis, is the emotional release it provides. Reflecting on, and then writing about the events creating a narrative that gives meaning to what they have gone through. When dealing with illness, emotions like fear, anxiety, and uncertainty often feel all-encompassing. Writing offers a safe space to process these feelings, reducing stress and anxiety. By putting thoughts on paper, individuals can gain perspective, distance themselves from overwhelming emotions, and make sense of their journey. Writing can also help a person feel more in control of their health journey. Illness or surgery can leave a person feeling powerless, as so much is dictated by medical professionals and the physical body. When someone recounts their experience, they become the storyteller, reframing the events in a way that empowers them. They can choose which details to highlight, what lessons to emphasize, and how their personal growth is shaped through the narrative. This active role in their own story can renew a sense of agency. Writing also provides an opportunity for introspection. Whether it's journaling daily thoughts or crafting a memoir, the act of writing forces individuals to slow down and reflect on their inner world. This process can uncover new insights about one's strength, resilience, and capacity to overcome

adversity. For those recovering from surgery or managing a chronic illness, these revelations can be life-changing, fostering a deeper understanding of self and the ways they can adapt to and rise above physical limitations.

For those who plan on writing a memoir, their writing offers the chance to leave a lasting legacy. Sharing the story of an illness or recovery can be a way to inspire others going through similar challenges. In crafting a memoir, individuals create a permanent record of their journey that can comfort loved ones or provide insight to others facing similar struggles. Even if shared only with close friends or family, a memoir can create a connection that fosters healing on both sides.

For those not inclined toward a full memoir, daily journaling is an accessible and effective alternative. Unlike memoir writing, which tends to focus on the big picture and life lessons, journaling is often more immediate and raw. It allows people to vent frustrations, document small wins in recovery, and track their emotional fluctuations over time. Studies have shown that expressive writing, such as journaling, can lower blood pressure, boost immune function, and reduce the symptoms of depression.

Whether through structured memoir writing or free form journaling, the act of writing can be a powerful tool for healing after a major illness or surgery. It allows individuals to process their emotions, regain a sense of control, and uncover valuable insights about themselves. For many, these benefits extend beyond physical recovery, leading to a deeper emotional and psychological healing as well.

In times of medical crisis, pen and paper (or a keyboard) can become invaluable allies on the road to recovery.

*Source: written and submitted by Amy Taylor, via Ostomy Toronto Newsletter, October 2024, via Stratford Ostomy News via Ostomy Saskatchewan News Jan/Feb 2026*

### Should Your Family be Tested for Cancer?

**YES!** If your ostomy was necessary due to cancer of the colon or rectum, your children **and** your siblings should see their doctor at once for testing.

Although they may be younger than 50 (the recommended age at which colorectal cancer screening should start for the general population) it's not too soon to alert their doctor and have this information entered in their records. **It's advisable that children initiate testing 10 years prior to the age at which a diagnosed parent was affected**, ie, if the parent was diagnosed with colorectal cancer at age 55, the child should commence

*(Continued on page 12)*

## THE VICIOUS CYCLE

by Y Mary Lou Boyer, BSEd, RN, ET, CWOCN

Along with an appropriate pouching system, the skin around the stoma is most important for a secure ostomy appliance seal. The condition of the skin can affect not only how your pouch adheres to the skin, but also comfort level, emotional health and general well-being. Healthy, smooth skin provides the ideal surface for a pouch, while irritated weeping skin is painful and frustrating. However, even with all attempts to keep the peristomal skin in good condition, one of the most common problems for a person with an ostomy is peristomal skin irritation. Skin irritation can start out as a seemingly small problem, but can quickly develop into a difficult and painful situation. As it worsens, it is harder to obtain a secure appliance seal. That in turn increases chances for further leakage and increased damage to the skin. It turns into a vicious cycle: Irritated skin that becomes raw and weepy leads to poor adhesion of the skin barrier, allowing further opportunity for leakage of stool or urine onto the skin to cause even more skin damage. If the vicious cycle is allowed to continue, it can develop into an almost uncontrollable situation. Therefore it is important to avoid it, and how to care for problems that occur.

### There are a number of factors that can cause skin irritation. These are the most common:

1. Stool from a colostomy or ileostomy has enzymes that can “digest” and break down the skin as they do foods. Contact with the skin causes mild itching and burning at first, however it can quickly erode the skin until it is so open and raw that an ostomy pouch is difficult to adhere. The damage may be severe enough to cause bleeding and it is very painful.
2. Urine from a urostomy can damage skin as moisture soaks in, causing swelling of the skin cells and allowing bacteria to enter. Urine can deposit urine crystals that feel like fine salt, acting like sandpaper, scraping the skin surface. With prolonged exposure, urine causes wart-like thickening of the skin close to the stoma.
3. An allergic reaction to any ostomy care product in contact with the peristome skin can cause itching, redness, and weeping of the skin. There may even be blistering.
4. The peristomal skin can be injured when the pouch barrier is removed too often or too roughly. This is called “mechanical trauma”. Pulling

adhesive off of the skin strips the outer layer of skin cells faster than your body can replace them, causing red, painful damaged skin that may weep fluid.

5. Rough removal can tear out hair on the peristomal skin. Pulling out hair causes folliculitis, infection of the hair follicles, and is characterized by red, sore, itching and eventually weeping skin. It can also look like pus-filled or an open pimple.

6. Fungal infections or yeast infections usually look like tiny red pimples with small white tops. They can be scattered or so close together that the area is red. Severe fungal infections become very weepy. The most telling sign that the redness or tiny bumps are fungal is the constant itchiness.

### Breaking the Vicious Cycle

Breaking the vicious cycle starts with figuring out what caused the problem in the very beginning. To determine the cause, it is necessary to inspect the skin and pouch barrier that is removed with each appliance change. It could be called “ostomy detective work”.

Look at where the irritation is on the skin. Then look at the back of the pouch barrier. Compare them to see if the area of irritated skin is “mirrored” on the back of the wafer. In other words, does the wafer show signs of wearing away or have a stain from leakage across the same area where it previously adhered to the skin? Is the skin problem close to the stoma or further away from the stoma? If the irritation is close to the stoma, is it all the way around the stoma, or to one side, or below the stoma? Any of these can indicate stool or urine contact on the skin. The wafer opening size may need to be adjusted. It may be necessary to use a different pouching system, add a barrier ring or paste strip, or use a pouching system with convexity.

Next check to see if the affected area looks like shape of any product used on the skin, such as the circular or square skin barrier, where paste or a barrier ring was applied, or where the tape portion of the pouching system comes in contact with the skin. If redness, itchiness and weepiness match the size and shape of any product, the cause may be an allergic reaction. If you have a history of allergies prior to ostomy surgery, you may be more likely to have allergies to ostomy care products to prevent skin contact with problematic items. Some allergy medications can help. Check with your doctor as to whether you can take over the counter allergy medications.

(Continued from page 11)

Medical trauma related to removing the appliance too quickly can be prevented with careful pouch removal and the use of adhesive remover. Press the skin away from the barrier rather than pulling the wafer off of the skin. Adhesive removers help loosen the bond between the skin and pouch barrier without pulling the skin. Wash adhesive removers from the skin before applying the new pouch.

Avoid pulling of hair around the stoma to prevent or treat folliculitis. Keeping the area free of hair is the first step. It is best to use an electric shaver or trimmer as disposable or blade-type razors tend to cut or scrape the skin and pull on body hair. Use adhesive remover to help release pouch adhesives. Wash the skin with mild antibacterial soap and rinse thoroughly. Mild cases will clear up with careful technique. It may be necessary to use an antibacterial powder (such as Gold Bond, Columbia, or Amens) on affected areas. When using powder, gently massage the powder into the skin, dust off excess, and pat or spray no-sting liquid skin barrier to seal the powder.

Fungal infections commonly occur under the pouch barrier seal where it provides a warm, dark and moist environment in which they thrive. If you have been on antibiotic therapy, it is more likely that you will be susceptible to fungal infections under the appliance. It can easily spread further than the pouch seal and can become weepy and sore in addition to the pronounced itchiness. As it progresses, it may appear as solid red patches or have a white-coated appearance.

It is treated with antifungal powder sealed with no-sting skin barrier film. As always, when using powder, gently massage the powder into the skin, dust off the excess and pat or spray no-sting liquid skin barrier to seal the powder. If the problem is persistent, prescription medication may be needed.

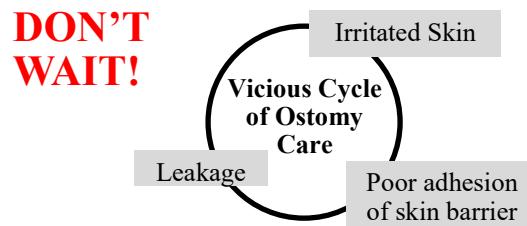
No matter what the reason for skin irritation, it is important to take immediate action. All too often, when the irritation is mild, it may be ignored or let go. It may be an inconvenient time, you may be busy, away from home, or decided to wait to do something about it.

If you are having a leakage and you are not able to clear up the problem on your own, do seek help from someone knowledgeable in ostomy care.

Contact your ostomy nurse (NSWOC)  
The ostomy nurses are located on Page 14 of this newsletter.

***Don't wait until it becomes difficult to break the cycle.***

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**Betty Bakker**

**Gloria Ming**

**Janet Cain**

**"Enjoy the little things, for one day you may look back and realize they were the big things."**

(Continued from page 10) **Family Testing for Cancer**  
testing at age 45. Colorectal cancer often runs in families.

Your risk will be higher if a parent is affected and higher still if a parent *and* sibling are affected. You'll be doing your other relations (aunts and uncles, nieces and nephews, grandchildren) a favour by letting them know this disease is in the family gene pool, as colorectal cancers can also skip a generation and strike the next. Tests vary in effectiveness and complexity; the gold standard is a colonoscopy.

Regarding bladder cancer, to date there is no established genetic connection between family members.

## TIPS & HINTS THAT STILL APPLY

Do not worry about "accidents" and "problems" that may never happen. Plan ahead; keep an extra appliance change and extra clothes handy in case something does happen, but don't worry needlessly. Life is too precious.

Remember after surgery when you were advised to "chew, chew, chew and drink, drink, drink?" It still applies; chew food carefully and never go by a water fountain without taking a drink.

Keep an updated list of all the ostomy supplies you use for your ostomy nurse, doctor, and family members; include the product numbers, sizes and manufacturers, as well. Keep it in a place where you can find it quickly. Make sure a family member knows where the list is.

Do not keep a "lifetime" supply of ostomy supplies on hand. Shelf life of those items may be limited.

Build a support system of people to answer questions when you have problems; include your ostomy nurse, ostomy visitor and the officers listed on the back of this newsletter.

Tea is an antispasmodic, is soothing to an upset stomach and contains potassium to replace one of the electrolytes frequently lost by ostomates.

Tomato juice is lower in cost per cup than Gatorade, while providing as much sodium and 5 times more potassium. Orange juice is another alternative, providing the same amount of sodium and 15 times the amount of potassium.

Don't shave parsley aside; it is one of nature's best deodorants.

Antihistamines in allergy medications can slow down bowel motility (spontaneous movement of the digestive track). If you become constipated while on antihistamines, your physician might suggest an

alternate medication.

Some foods can change the colour of your stool. Bananas may turn it black; beets and tomatoes may turn it red; dyes in many foods (like in Jell-O, licorice, etc. may turn it red, black or green.

Lengthy sitting in one place can force the pouch contents upward around the stoma and cause leakage. Getting up occasionally and moving around will help.

In an airplane or car, place the seat belt above or below the stoma. Don't leave the belt unbuckled or excessively loose (1" maximum slack is recommended). Shields are available to protect the stoma.

When emptying your pouch, if using a clip, slip it under your watchband, into the side of your shoe or top of your sock or hose so that it doesn't fall into the toilet or elsewhere. Carry an extra clip with you. □

## PAYING YOUR MEMBERSHIP or MAKING a DONATION

### e-Transfers now available

Use **e-transfers** to make a donation towards a Memorial Gift, the Youth Camp Fund, Stoma Anniversary, General Funds, or paying memberships.



#### **e-transfer instructions:**

Email: [treasurer@ostomymanitoba.ca](mailto:treasurer@ostomymanitoba.ca)

#### **Message box:**

- **Be very clear to say what the transfer is for.**
- **In matters of donations please include your address so tax receipts can be issued for you.**

**NEW—AUTO DEPOSIT** has now been set up. No need for secret questions.

## STOMA ANNIVERSARY CLUB

The anniversary date of my stoma is \_\_\_\_\_ and to celebrate my second chance for healthy living, I am sending the sum of \$\_\_\_\_\_ per year since I had my ostomy surgery.

NAME: \_\_\_\_\_

AMT. ENCLOSED: \_\_\_\_\_

Official receipts for tax purposes are issued for all donations, regardless of the amount.

My name and the number of years may be printed in the "INSIDE/OUT" newsletter. YES  NO

Clip or copy this coupon and return with your donation to:

Ostomy Manitoba Association  
204-825 Sherbrook Street  
Winnipeg, MB R3A 1M5

Proceeds from the Stoma Anniversary Club are now being directed towards enhancing our website, purchasing equipment to support the work of our volunteers in finance, membership, communications and updating ostomy brochures, etc. to promote Ostomy Manitoba Association and its programs on an ongoing basis.



**Ostomy Manitoba**  
Association  
Healthier / Stronger / Together

204 - 825 Sherbrook St.,  
Winnipeg, Manitoba, Canada R3A 1M5  
Phone: 204-237-2022 Email: [info@ostomymanitoba.ca](mailto:info@ostomymanitoba.ca)

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### PHYSICIAN DR. C. YAFFE



For pick-up of unused ostomy supplies please contact the  
**Ostomy Manitoba Association**  
**“NEW” 204-237-2022**

Leave a message and your call will be returned.

### OSTOMY MANITOBA ASSOCIATION MEMBERSHIP APPLICATION

**Current Members—PLEASE WAIT** for your **green membership renewal form** to arrive in the mail.  
Your renewal date is printed on your membership card.

**New Members: Please use this form.** The following information is kept strictly CONFIDENTIAL.

**Please enroll me** as a new member of the Ostomy Manitoba Association.

I am enclosing the annual membership fee of **\$40.00**.

To help reduce costs please send my copies of the **Inside/Out** newsletter via email in PDF format. YES  NO

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ YEAR of BIRTH: \_\_\_\_\_

Type of surgery: Colostomy: \_\_\_\_\_ Ileostomy: \_\_\_\_\_ Urostomy: \_\_\_\_\_ Other: \_\_\_\_\_  
Spouse/Family Member: \_\_\_\_\_ N/A: \_\_\_\_\_ (Please indicate type if other)

May we welcome you by name in our newsletter? Yes  I'd rather not .



Please make cheque/money order payable to: **“Ostomy Manitoba Assoc.”** and mail to:  
**Ostomy Manitoba Assoc. 204-825 Sherbrook St. Winnipeg, MB R3A 1M5**