

**Ostomy Association of South Texas**  
**WWW.ostomysouthtx.org**

Affiliated  
with...



**NOVEMBER 2015**



**Support Groups Meeting The Needs of all Ostomates**

~~~~**MEETINGS**~~~~

**American Cancer Society**                      **8115 Data Point Drive**

Last Monday of the month @7:00 pm

Contact: Cecilia Lynn, President    (228)-217-6106

**\*\*\*PROGRAM THIS MONTH\*\*\***

**Talk about Holidays and Travel**

~~~~**REFRESHMENTS**~~~~

**BRING YOUR HOLIDAY LEFTOVERS**

**SAMMC Chapter of the Ostomy Association of South Texas**

**4th Tuesday of month at 6PM**

**2551 Roger Brooks Rd (COTO Bldg) Conf Rm (TN122)**

**Leader:    Shanna Fraser, WOCN, RN    210 452 3713**

**Meetings 2nd Sunday of the month @ 3:00PM**

**Peterson Regional Medical Hospital    Kerrville, Texas**

**James R. Almand, Support Group Leader    830 258 7307**

**Susan M. Bausch RN    830 258 7891**

**OSTOMY ASSOCIATION OF SOUTH TEXAS holds its meetings and produce this newsletter under the kind sponsorship of the American Cancer Society.**



### THE PREZ SEZ

This will be my last prez says, Some of you may be aware and others still do not know. As you all know, I have graduated from nurse practitioner school and I have a job offer in Seattle that I will be taking. The November meeting and December party will be the last events I attend. I am bitter-

sweet to be leaving all of you behind, but I am confident in the group's leadership to keep the meetings going strong! Matt Bryant will be the new President with Cristine Miller as Vice-President,

Yvette Tamayo will continue as Secretary, Mary Jurado will continue as Treasurer. Shari Crowel will be filling in Ralph's footsteps as newsletter editor. Cecilia Gutierrez will continue as Visitor Coordinator, Bill Fuller & Danny Vargas will continue as Directors. Pamela Larson will be our medical liaison. The Sohm's will continue with the welcome committee, and Eddie Jurado will help with welcome committee. Please take the time to say thank you to these members for their time and service!

We do need a Card Committee! This would include a few people that will send out greeting cards to our members who are ill or in the hospital. We can help provide the cards and postage, please contact any of the Board members if you are interested in helping with this important task!

Last month, the Ostomy fair was the biggest we have ever had!!! Thank you to everyone who attended and a special thanks to all of the vendors! The 50/50 raffle generates \$139 and the winner, Ed Pardee generously donated his winnings to our group! Thank you Ed!!!!

Our December Christmas Party will be on Friday Dec 11th at 6pm-8pm. We will be hosting a white elephant gift exchange to those who wish to participate. The gift should be a \$10 gift that is wrapped, they can even be silly gifts! If you don't want to participate that is okay! Just come and have dinner with us! The board will be providing Turkey this year! We just need help with all the fixings! We are using sign up genius again and will also bring a paper list at the Nov meeting. It will be a potluck style dinner. I will be setting up a link on our Facebook page and website shortly this upcoming week. We have

decided to do another toy drive this year - so please if you can bring one unwrapped gift for a boy or girl. Again thank you for letting me be your president these past few years, each and every one of you have touched my heart and I have learned so much from everyone that I meet. I hope I continue to serve the Ostomy community in Seattle.

Much love

*Cecilia*

Our November meeting will be on the 30th, we will be talking about the holidays and travel. The food theme will be 'Bring your Leftovers'

### We Want Your Feedback

If you have any ideas or comments that you would like to give to the OAST, please let Matthew know. We want to know what kind of speakers you look forward to hearing, food suggestions, ideas for the newsletter, and anything else you feel would benefit the group. We want to give YOU the best meeting we can!

**Contact:::** President Matthew Bryant

**Email** ::::mearbryant@gmail.com

**Phone** 210-887-3719

Or simply bring in your written ideas to the meeting and give them to Matthew!

### \*\*\*\*\*If You Have Internet Access\*\*\*\*\*

**AND YOU** are still receiving the newsletter in hard copy? You can save us money by joining our electronic distribution list. Just send an e-mail request to [artrod@aol.com](mailto:artrod@aol.com) We appreciate your efforts to keep costs down while also being more eco-friendly!

### Surplus Ostomy Supplies

Ostomy supplies have been donated by chapter members or their families when an ostomate has had a revision surgery or passed away. These supplies are available to our chapter members or individuals in need of supplies. Please contact Cecilia Lynn if you have supplies you would like to donate. Our reservoir is VERY low right now, so we are counting on our members to help us replenish it!



**From the Editors Corner**  
Medical, Treatment, or  
Technical items contained in  
this newsletter are not in-



tended to be the last and final word. Any medical or technical information is included as information to pique someone's memory or help recognize a situation present with someone's family or friend. Remember, the final word on medical or ostomy conditions will be with your doctor and/or your E.T. Nurse.

If you have any information you think our membership might be interested in, such as a news article, a publication, a good recipe, an incident or a personal experience please let me know. Contact me via e-mail at: [RalphPitt@gmail.com](mailto:RalphPitt@gmail.com) or "snail mail", Ralph Pittenger---9914 W Military Dr. Apt 1303— San Antonio, Tx 78251 Phone 210 674 0295

### Lloyd Tshirhart

OAST member Lloyd Tschirhart passed away 19 October 2015. The membership expresses it's prayers and deepest sympathies to his loving wife Anita and Lloyd's family.

### New Patient Visits

### New Members

## Activities to Encourage Engagement in People With Dementia

As Alzheimer's disease progresses, accompanying behavior changes can cause distress for family members. It's important to know that these so-called "behaviors" are an expression of their loved one's needs. Aggression, sleep problems, anxiety and agitation usually draw the most immediate attention. But apathy is another common effect of the disease. It may be the first sign that something is wrong, when families begin to realize that their loved one seems emotionally blunted and no longer seems interested in things.

In a recent in-depth study on the topic, Penn State University assistant professor of nursing Ying-Ling Jao reported that 90 percent of people with dementia will experience apathy. She cautioned that apathy is not to be ignored. Patients who suffer from apathy are more likely to experience a rapid decline from mild dementia into severe memory loss.

Apathy should be discussed with a patient's healthcare provider. It's important to rule out depression; although apathy can be a symptom of depression, it can exist on its own. Explained Dr. Yonas Geda of the Mayo Clinic, "Depression causes changes in mood, thinking, physical well-being and behavior, while apathy is loss of motivation without associated feelings of being depressed or blue." The National Institutes of Health says that because the recommended treatments for apathy and depression are different, it's important to get a correct diagnosis.

Jao explained, "My interest in apathy was mainly driven by my clinical observations in nursing homes when I was a nurse practitioner student. I remember that no matter which nursing home I visited, I often saw a crowd of residents sitting in the living room or hallway with no interest in the surroundings and no emotional expression."

The opposite of apathy is engagement—a sense of connection and interest. Jao set out to discover what could promote engagement in people with dementia. She recommended "clear and strong environmental stimulation" that is "intense, persistent and interesting." Jao explained, "Clear stimulus is found in an environment without competing background noise, and

with a single straightforward stimulus. A good example of this is a therapist leading a music therapy program for residents in an otherwise quiet room."

This research suggests that when selecting mentally stimulating activities for your loved one, look for the happy medium—activities that hold your loved one's attention without being overstimulating and confusing. An activity that is comfortable and inviting for one person might be overwhelming for another, so be attuned to clues as to whether your loved one is withdrawing or responding.

Keep in mind, say experts, that active participation is not always necessary; sometimes your loved one will be content to observe. Also keep in mind that as the disease progresses, your loved one may enjoy things they might have dismissed as "boring" in the past—while old favorites might cause frustration and a sense of failure.

Here are some suggestions from the Alzheimer's Disease Education and Referral Center of the National Institute on Aging:

**Household chores.** Doing household chores can boost your loved one's self-esteem. Your loved one could wash dishes, set the table, help prepare food, sweep the floor, polish shoes, sort socks and fold laundry, and help with cooking and baking. Emphasize the process, not the result.

**Children.** Being around grandchildren and other young people often gives people with dementia a mood boost. It may bring back happy memories and can help them realize how much they still can love others and be loved. Visit family members who have small children, or invite them to your home. Your loved one can read to children or have children read or tell stories.

**Music and dancing.** Music can bring back happy memories and feelings. Some people feel the rhythm and may want to dance. Others enjoy listening to or talking about their favorite music. People who have trouble speaking may still be able to sing songs from the past. You might play recordings of well-known songs, talk about the music and the performer, and what your loved one was doing when the song was popular.

**Pets.** Many people with Alzheimer's disease enjoy spending time with dogs, cats, birds and other animals. Living creatures can bring people

out of their shell. They offer a chance to succeed □ a cat who loves to be petted and an elder who enjoys the tactile sensation of fur and the sound of purring is a win-win. Pets offer unconditional love and reduce feelings of anxiety. Your loved one might help care for, feed, groom or walk a pet.

**Gardening.** Gardening is a way to be part of nature. It also may help people remember past days and fun times. Your loved one can help take care of indoor or outdoor plants, plant flowers and vegetables with you, and discuss this garden and those of the past.

**Going out.** In the earlier stages of Alzheimer's disease, your loved one may still enjoy the same kinds of outings they enjoyed in the past. Keep going on these outings as long as you are comfortable doing them. Your loved one might enjoy trips to a favorite restaurant, the zoo, a museum or a park. Plan outings for the time of day when your loved one is at their best. Don't stay out too long; be sensitive to whether your loved one is getting tired after a certain amount of time.

Across the country, senior services agencies, parks departments, senior centers and cultural organizations are offering activities that are tailored for people with dementia. Alzheimer's cafés are gatherings where people with dementia and their families can socialize in a safe, nonjudgmental environment. Museums and music groups offer programs to help people with memory loss express themselves creatively □ a powerful tool in overcoming apathy. Inter-generational programs provide benefits for children and for seniors with dementia alike. Professional in-home caregivers can provide transportation and facilitate a schedule of enriching activities.

### **Abdominal Changes to an Ostomy**

By Arthur Clarke, CWOCN Edited by B. Brewer, UOAA  
When you had your ostomy surgery, the surgeon was allowed (according to your personal physiology) only so much moveable bowel in the construction of your stoma. Once that piece of bowel was pulled through your abdominal wall, it was tacked down on the inside of the abdominal wall and on the outside of the skin. That length will remain constant throughout your life; therefore, if the wall of your abdomen thickens; (i.e. with fatty tissue), the length of the bowel used for your stoma will not be changed to accommodate your increased girth.

One result caused from the fixed length of bowel which forms the stoma as the abdominal wall thickens, is that when you sit or stand, the changed position causes the abdominal wall to shift forward and down. The stoma segment prevents the peristomal skin from shifting as much as the rest of the abdomen. The limited movement results in a skin well

around the stoma when you sit or stand. Skin adjacent to the stoma becomes quite mobile being pulled down and then flatted by your changing positions. This may cause problems with your pouching system adhering well or springing leaks. Consider these two solutions: 1) Adjust your weight to return your abdomen to its shape at surgery. This would include exercises to firm your body as well. 2) Another common solution is to change to a convex pouching system. I have found that a skin barrier with a convex surface, which pushes the skin back, and holds it stable, relative to the stoma, works much better than the highly flexible flat barriers. The moral of the story is that if you have abdominal changes due to weight gain, you have viable choices with your pouching system to continue a high quality of life. You just need to implement these suggested changes. Your ostomy nurse can help you with these issues.

### **TEXAS**

Sam Houston (1793-1863) was the first president and first governor of Texas. The Cherokee, with whom he lived in Tennessee, called him □the Raven. □Though one of the most famous Texans, he was actually born in Virginia and served as governor of Tennessee. A statue of Sam Houston called a □Tribute to Courage□is the world's largest freestanding statute of an American.

### **~~~~XMAS PARTY~~~~**

**\*\*\*Friday, December 11—  
6 to 8 PM\*\*\***

**\*\*\*Meat furnished by our  
Association\*\*\* (Turkey)**

**###-Sides furnished by members-  
Check sign-up sheet at  
November Meeting ###**

**~~~~\$10.00 White Elephant gift ex-  
change~~~~  
(Lotsafun)**

**Please bring one unwrapped Toy  
for a Tot**

### **A Silver Lining**

Not everything that comes from cancer is negative. Many patients experience what has been termed post-traumatic growth to describe the positive life changes that arise from traumatic experiences. More specifically, cancer survivors perceive positive change in a number of areas, including personal strength, appreciation of life, new possibilities, relating to others, and spiritual change.

## Continuing Your Social Life with an Ostomy

Your social life can be as active as it was before surgery. You can enjoy all activities: meeting people, attending concerts, sporting events, civic and social club meetings, parties, religious occasions or whatever you enjoyed before. The first time you go out of the house after surgery, you may feel as if everyone is staring at your pouch, even though it is not visible under your clothing. You can feel your pouch on your body, but no one can see it. Keep those concerns in mind. Did you know what an ostomy was or where a stoma was located or what it looked like before you had surgery?

You may also worry about your pouch filling with gas and sticking out under your clothing. A quick trip to the restroom can take care of this problem. If you are worried about your pouch filling up immediately after eating at a social event, remember, people without ostomies often need to go the restroom after eating and nobody will think it is unusual if you do the same! You will probably find that you need to empty your pouch less often than you need to urinate

### Friendship and love-

You may be wondering about your relationships with others. Now that you have an ostomy, you may feel that it will change your present relationships and decrease new opportunities for friendship and love. True friendships and deep relationships on any level are built on trust and mutual understanding. These qualities depend on you and other persons. You have the same qualities you had before surgery and your ability to develop friendships is unchanged. If you care about yourself, others will feel your strength and will not be deterred. If your ostomy does cause a break in friendship, a sexual alliance or even marriage, this relationship was not built upon trust and mutual respect and probably would have crumbled sometime in the future anyway.

### MORE OF THE STORY

#### Who was the first person to get Social Security benefits?

A: A fellow named Ernest Ackerman, who retired one day after the Social Security program began, got a payment for 17 cents in January 1937. This was a one-time, lump-sum pay-out--which was the only form of benefits paid during the start-up period January 1937 through December 1939. First Payments

From 1937 until 1940, Social Security paid benefits in the form of a single, lump-sum payment. The purpose of these one-time payments was to provide some "payback" to those people who contributed to the program but would

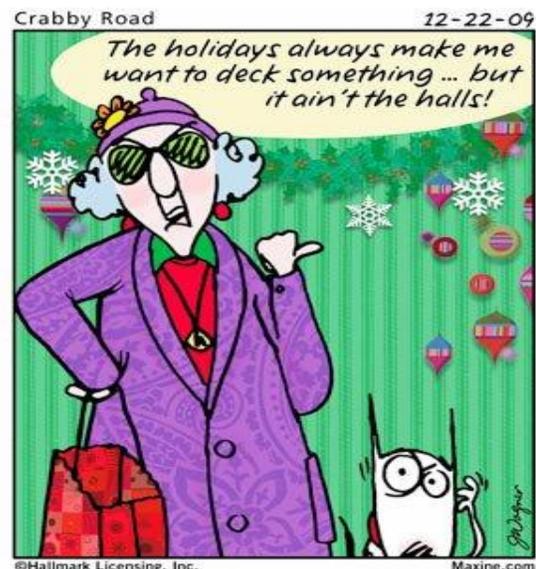
not participate long enough to be vested for monthly benefits. Under the 1935 law, monthly benefits were to begin in 1942, with the period 1937-1942 used both to build up the Trust Funds and to provide a minimum period for participation in order to qualify for monthly benefits.

The earliest reported applicant for a lump-sum benefit was the retired Cleveland motorman named Ernest Ackerman, During his one day of participation in the program, a nickel was withheld from Mr. Ackerman's pay for Social Security, and, upon retiring, he received a lump-sum payment of 17 cents.

The average lump-sum payment during this period was \$58.06. The smallest payment ever made was for 5 cents!! Ernest Ackerman only received a single lump-sum payment.

Who was the first person to receive ongoing monthly benefits?

Answer: A woman named Ida May Fuller, from Ludlow, Vermont, was the first recipient of monthly Social Security benefits. On January 31, 1940, the first monthly retirement check was issued to Ida May Fuller of Ludlow, Vermont, in the amount of \$22.54. Miss Fuller, a Legal Secretary, retired in November 1939. She started collecting benefits in January 1940 at age 65 and lived to be 100 years old, dying in 1975. Ida May Fuller worked for three years under the Social Security program. The accumulated taxes on her salary during those three years was a total of \$24.75. Her initial monthly check was \$22.54. During her lifetime she collected a total of \$22,888.92 in Social Security benefits.



#### BADGE COLORS

Urostomy — Green

Ileostomy — Red

Colostomy — Yellow

If badge colors don't match up with this, let me know and I'll make new ones. —Editor

## TORTILLA LASAGNA

### Ingredients

- 1 pound ground beef
- 1 cup water
- 1 envelope taco seasoning
- 1/2 teaspoon garlic powder
- 1/4 teaspoon cayenne pepper
- 1-1/2 cups (12 ounces) sour cream
- 1-1/2 teaspoons chili powder
- 2 cups (8 ounces) shredded Monterey Jack cheese
- 2 cups (8 ounces) shredded cheddar cheese
- 1 tablespoon cornmeal
- 10 flour tortillas (6 inches)
- 1 cup salsa
- 1 small onion, sliced

### Directions

In a large skillet, cook beef over medium heat until no longer pink; drain. Stir in the water, taco seasoning, garlic powder and cayenne. Bring to a boil. Reduce heat; simmer, uncovered, for 10 minutes.

Meanwhile, in a small bowl, combine sour cream and chili powder. In a large bowl, combine cheeses; set aside. Sprinkle cornmeal into a greased 13-in. x 9-in. baking dish. Arrange five tortillas, overlapping, in the bottom of prepared dish; spread with 1/2 cup salsa. Layer with half of the meat mixture, onion and sour cream mixture. Sprinkle with 1-1/2 cups cheese mixture. Repeat layers.

Bake, uncovered, at 375° for 40 minutes. Sprinkle with remaining cheese mixture. Bake 10 minutes longer or until cheese is melted. Let stand for 10 minutes before cutting. Yield: 8 servings.



## OFFICERS/DIRECTORS

|                             |   |                                   |
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## MEMBERSHIP APPLICATION

**Note:** Just your name needed for renewals.

NAME \_\_\_\_\_ BIRTHDAY \_\_\_\_\_ Gender M F  
 ADDRESS \_\_\_\_\_ CITY, STATE & ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

DATE OF SURGERY \_\_\_\_\_  
 CIRCLE ONE: COLOSTOMY ILEOSTOMY UROSTOMY OTHER \_\_\_\_\_

Please make checks payable to Ostomy Association of South Texas and mail completed application with payment of \$9.00 to: Ostomy Association of South Texas, 5319 Arrowhead Dr. San Antonio, Tx 78228 .

In addition to my membership I am enclosing a donation of \$ \_\_\_\_\_.

You are welcome to pay your dues at the monthly meeting. The newsletter is included in the cost of membership.

Newsletter VIA E-mail (Circle one) YES NO (E-mail saves almost 50¢ postage and it's in color)