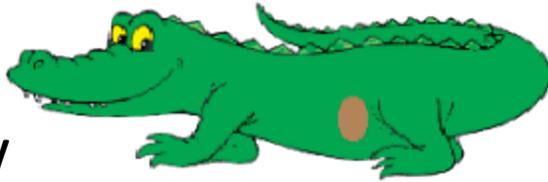


**Colorado
River
Ostomy
Chapter**



CROC April 2022 Newsletter

April In-Person Meeting

Our chapter will meet on the second Monday of April, the 11th, from 1-3pm.
Come and join us!

Location: **Western Arizona Regional Medical Center's (WARMC) education room.**

The address is 2728 Silver Creek Road, Bullhead City, AZ 86442.

The Education building is across the street from the main entrance to WARMC. It is labelled building 2.

You may park in building 2 parking spaces or in the WARMC main visitor lot and walk across the street to Building 2.

Enter the building through the right-side door, go down the short hall through the next door, onto the patio and the room will be on the right.

Currently, our meetings will be every other month.

-JUNE-

	S	M	T	W	T	F	S
				1	2	3	4
Next Meeting:	5	6	7	8	9	10	11
	12	13	14	15	16	17	18
	19	20	21	22	23	24	25
	26	27	28	29	30		

Did you know?

Famous Ostomates

Dwight D Eisenhower, 34th US President in his 8th year in office, had a colostomy placed for Crohn's.

Rolf Benirschke, NFL player, was able to play with an ileostomy after his colon was removed for Ulcerative Colitis.

Al Geiberger, American Golfer, also had an ileostomy, when his colon was removed due to Inflammatory Bowel Disease.

Jerry Kramer, Green Bay Packer offensive lineman, in his 6th year, had 9 bowel surgeries including having a colostomy place. He then played 5 more years of football.

Napolean Bonaparte reportedly had a colostomy and used a goat's bladder as the pouch.

Babe Zaharias was an Olympic athlete winning 2 Gold medals for Track and Field, she went on to basketball, then golf on the PGA circuit. She had a colostomy placed for colon cancer and went back to playing golf winning another tournament.

Loretta Young, actress, at some point in her life had an ostomy placed, likely later in life.

The CROC Website Updates



A new page has been added to our chapter's website. The new page is titled:

Ostomy/Stoma Products. While our chapter does not endorse or recommend any particular products, there are many innovative entrepreneurs who have developed products based on necessity. Please look over this new page to see if anything could benefit you. Also, if you know of a product that is not listed, let us know.

The **High Output** page has also been updated to include the 5th edition of the now The Adult Patient's Guide to Managing a Short Bowel and the new, Kid's Guide to Short Bowel books. Find this info at www.shortbowelsyndrome.com

Both books are no cost to order, one does have to provide name and an email address to sign up to either book. The website also has oral replacement therapy recipes on it as well.

Education of the Month: Skin Barriers

Some may know skin barriers by their old names such as a wafer, flange or face plate. Functions of the skin barrier are to protect the skin from output and connect the ostomy pouching to the skin.

A good seal that protects the skin is through proper pouching, with the correct products.

There are two types of skin barriers to discuss today that can make a huge impact

on an ostomates life because: 1) it is the correct skin barrier for your stoma output, or 2) because it is the wrong skin barrier for your stoma output.

There are several companies out there that have innovative skin barriers, but the basic of which type stoma output and which skin barrier is needed is fairly constant across the companies.

Extended-Wear Skin Barriers

For a watery, liquid, or mushy output from a urostomy, ileostomy, or ascending/transverse colostomy—you will likely do best with an extended wear skin barrier.

Extended-wear have special formulations that allow a stronger adhesive seal, absorb moisture at a slower rate and resists erosion of the skin barrier from the output.

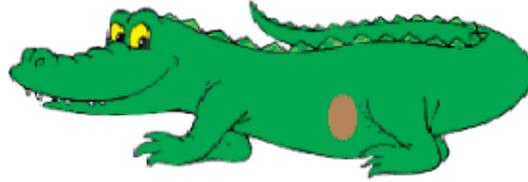
It is not recommended to use skin prep or barrier protector formulas with an extended - wear skin barrier as the preps interfere with the stickiness/adhesion of the skin barrier which will allow leakage.

Extended wear products are not well suited for those that sweat a lot as they do not absorb fluid or sweat very well and the skin barrier will leak or pouch may fall off.

Standard or Regular Skin Barriers

These are meant for the more solid stool output. These skin barriers distribute over the skin better, absorb moisture more quickly which make them well suited for humid environments and for persons the sweat a lot.

Skin prep solutions can be used with this type of skin barrier formulation.



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There is a contact page on our website to reach us by email.

For Additional Resources:

United Ostomy

Association of America:

www.ostomy.org

