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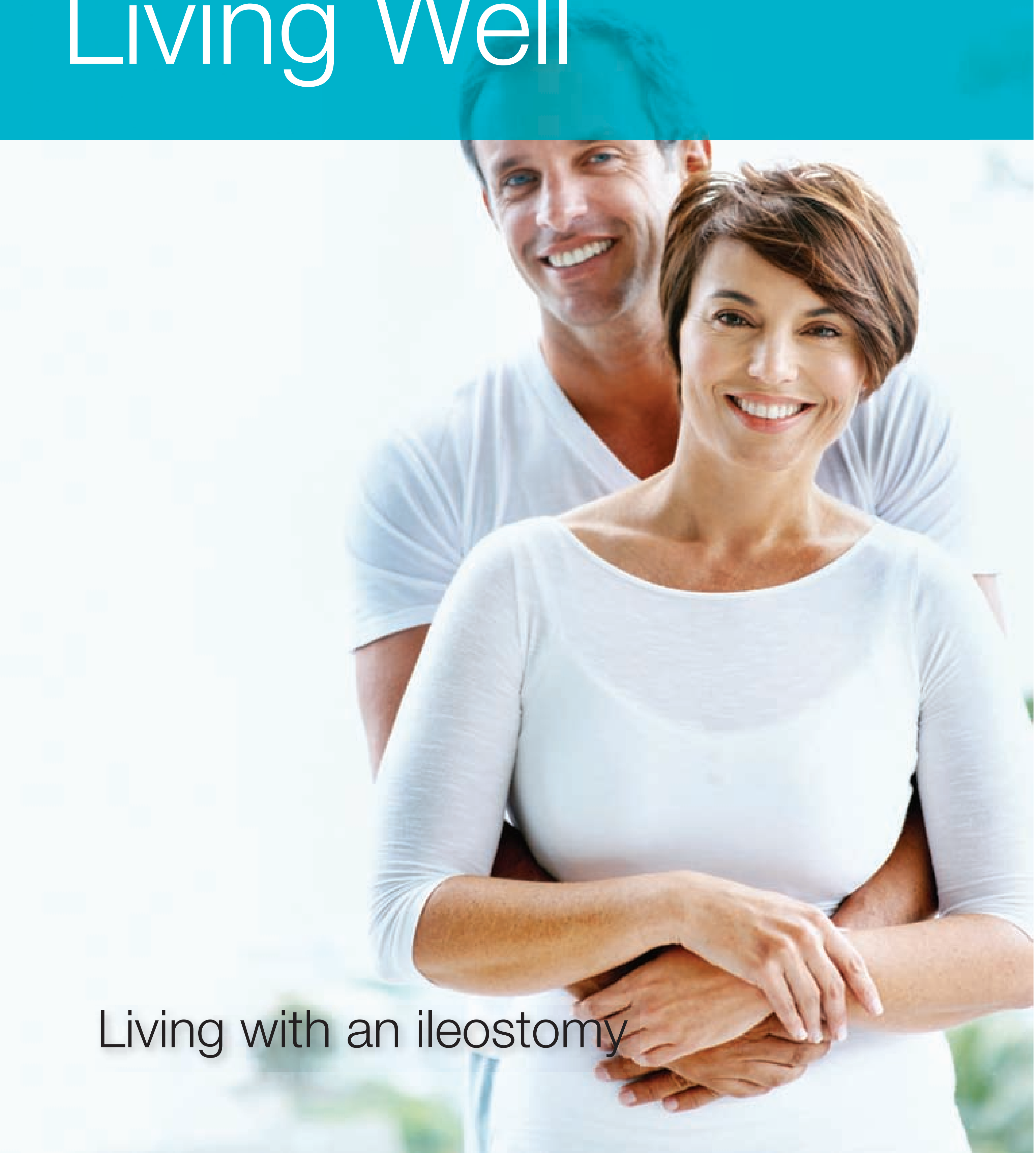

Living with an ileostomy

Coloplast®
Care

Welcome to Coloplast Care!

The Coloplast Care Program is designed to support you as you get back to living your life after ostomy surgery. It may take some time to become comfortable living with a stoma. But through the Care Program we will provide support for you throughout the process with product samples, a personal Care Advisor, and with a wealth of education.

This wellness education booklet is one of the ways that Coloplast Care can help you adjust to the changes you will experience following your surgery. There can be a lot to learn, and some of it you will need to learn through experience. The articles in this booklet will provide tips and advice along the way, offering twelve months of education for living with an ostomy. Each article has been written by a Wound, Ostomy, Continence (WOC) Nurse, offering sound advice based on years of experience in ostomy care.

The articles in this book were written to follow your journey after surgery. You can read one article each month over your first year with a stoma, or you can start with the articles that match your lifestyle – it's up to you.

To receive even more personalized support, be sure you enroll in Care online as well. Through our online program we can customize the education you receive to meet your needs. You will get the information you need when you need it. Just call your Coloplast Consumer Care Advisor for more information.

If you have any questions, or need personal support, make sure to take advantage of your Coloplast Consumer Care Advisor. They are available to help you when you need it. Your Care Advisor can answer questions related to your products and offer advice. They can also provide free product samples to help you find the right pouching system to fit your body and to meet your lifestyle needs. You can reach your advisor by calling 1-877-858-2656.

Thank you, and welcome to Coloplast Care!

Sonia McDonough
Ostomy Care Director of Marketing
Coloplast Corp.

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12 months of education

Coloplast does not practice medicine. The recommendations and information in this material are not medical advice. Contact your healthcare professional for personal medical advice or diagnosis. IF YOU THINK YOU HAVE A MEDICAL EMERGENCY, CALL 911.

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Ileostomy: Self-Care and Dietary Guidelines

After ileostomy surgery it's very natural for you to have questions about self-care and your diet. It's an experience that has changed your life and until you become more comfortable with these changes, some anxiety is normal. However, you can lessen your anxiety by learning more about self-care and diet.

In this article:

- Emptying and changing your ostomy pouch
- Fluid intake
- Addressing constipation and diarrhea
- How to manage gas and odor

Emptying your ostomy pouch

A common guideline is to empty your pouch when it is ⅓ to ½ full, or more often if you desire. A full pouch can get heavy and cause the adhesive backing on your barrier to loosen from your skin. Emptying the pouch is also more difficult when it's full. Refer to the "Instructions for Use" for your particular pouching system.

Changing your ostomy pouch

Typically you should change your pouching system about twice a week, usually when your stoma is less active. But the frequency will depend on your body, your activity level, and the type of barrier you use. The best time of day to change

Helpful tips:

- To avoid spilling, begin by holding the end of the pouch up.
- You can empty your pouch while either sitting or standing over the toilet.
- To prevent water from splashing upward, you can place a tissue into the toilet, or empty the pouch while flushing the toilet.
- Wipe the end of the pouch with a tissue to prevent odor.
- Always remember to securely close the end of the pouch

your pouching system may be first thing in the morning—before you've had anything to eat or drink.

If there is burning or itching under the barrier, change your pouching system immediately. Burning and itching could indicate leakage, and possible damage to the skin around the stoma.

Removing your pouch

Gather all supplies and place them within easy reach before you begin. To remove your barrier work slowly from the top to the bottom, pushing down on the skin as you lift off the barrier. Never rip or tear off the barrier too quickly, because that can irritate the skin. At times your skin may look pink or red after removing the adhesive, but this should fade in a few minutes.

Cleaning the stoma and surrounding skin

Clean the stoma and the skin around it with a moist washcloth or soft paper towel, then let it dry completely. You don't need to use soap, cleansers, or moistened wipes as they may cause skin problems and keep the barrier from sticking. Remember to look at the skin around your stoma for redness or signs of irritation.

Always check your stoma as well. The natural color of your stoma should be red. If your stoma looks very dark, purple or black, contact your doctor or Wound, Ostomy, Continence (WOC) Nurse. Every time you change your pouching system you may notice a little bleeding. This is normal and should stop quickly.

Applying your pouch

In the first six to eight weeks after your ileostomy surgery, the size of your stoma will gradually decrease. During this time, it is very important to measure your stoma every time you change your pouching system.

Additional self-care guidance

Bathing

Showering and bathing will not hurt your stoma or your pouching system. Some people prefer to shower without their pouching system on the days they change their pouch and barrier. You can decide what works best for you.

Remember to avoid using bath oils, or soaps with moisturizers and perfumes. These products may make it harder for the barrier to stick to your skin. Have all of your materials ready before you bathe, so your pouching system can be easily applied afterwards.

When to call your WOC Nurse

Call your nurse if you experience:

- A change in the size or appearance of your stoma
- A skin rash or irritated skin around your stoma
- Discomfort or problems with pouching
- Frequent leaking
- A weight loss or gain that causes problems with your pouching system

Helpful tips:

- Cut the barrier ⅛" larger than the stoma.
- Apply the skin barrier directly to clean, dry skin.
- Avoid the use of any moisturizers around the stoma.
- Ensure no skin is showing between the barrier and stoma to prevent skin irritation and leakage.

Dietary Guidelines

Below are some general dietary guidelines that are helpful for people with an ileostomy. However, if your doctor has recommended a special diet, you should follow that advice.

Fluid intake

Drink 10 to 12 glasses of fluid every day unless your doctor tells you otherwise. Since you no longer have a large bowel (a large intestine) to absorb water—and since fluids are lost through your stoma—you need to help your body by drinking more fluids.

More fluids are essential so that you don't become dehydrated. You may be dehydrated if you:

- Notice that your mouth or tongue are dry
- Do not urinate as often, or as much
- Notice that your urine is darker than normal
- Get dizzy when you stand
- Feel weak and don't react normally
- Have cramps in your legs or abdomen
- Are unable to think clearly
- Feel tingling in your hands and feet

Call you doctor if you show signs of dehydration. If you are dehydrated, try to increase your fluid intake. You will need to replace your body's electrolytes—sodium and potassium—by drinking or eating the following.

To replace potassium:

- Broths or bouillon
- Sports drinks
- Tea
- Orange juice
- Bananas
- Potatoes
- Apricots

To replace sodium:

- Electrolyte drinks or sports drinks
- Broths or bouillon
- Rice water
- Pretzels or crackers

Important: Confusion, dizziness and shriveled skin can be signs of extreme dehydration. If you notice these symptoms of extreme dehydration, go to the emergency room.

Could I sometimes get diarrhea?

With an ileostomy you may still get diarrhea or even looser, watery stools from time to time. Since your pouch may fill more quickly than normal, you will need to empty it more often.

Foods that can thicken stool:

- Pudding
- Creamy peanut butter
- Potatoes
- Bread
- Pasta
- Baked apples / applesauce
- Cheese
- Rice

If you have three of more consecutive loose stools, you are at risk of getting dehydrated—so you should contact your doctor.

Foods to avoid

Before your surgery, large particles of food passed through your large bowel. Now, however, large food particles can easily get caught where your intestine comes through the abdominal wall. If this happens, it can cause a blockage. A food blockage can cause abdominal cramps, pain and watery stools with a bad odor. Stool may be released in spurts, as your intestines try to get the waste past the blockage.

For the first six to eight weeks after your surgery, avoid high-fiber foods that absorb water—foods such as oats, citrus fruits, apples and beans. These high-fiber foods can cause a food blockage or severe cramping soon after your surgery.

Foods that may cause a food blockage include:

- Nuts
- Popcorn
- Coconut
- Dried fruits
- Celery
- Mushrooms
- Foods like apples that have fibrous peels
- The white fibrous coverings of oranges and grapefruits
- Raw crunchy vegetables (carrots, broccoli, cauliflower and Chinese vegetables)

You can also help avoid a food blockage by eating slowly, chewing your food thoroughly and drinking fluids with your meals.

If you have a food blockage, you are not vomiting and you have some output from your stoma, try to increase your fluid intake slowly. Drink hot tea, or take a hot shower and run water on your back to relax your abdominal muscles.

Important: If you have no output from your stoma and you are vomiting, do not drink any liquids. Contact your doctor immediately.

How to manage odor

The only time you or anyone else should notice an odor is when you are emptying your ileostomy pouch. Even then, pouch odor can be reduced with special drops. (One type of drops is Brava® Lubricating Deodorant made by Coloplast.) You simply put the drops in when the pouch has been emptied, or when you put on a new pouch. The next time you empty your pouch, the drops should reduce the amount of odor and help to empty the contents of your pouch due to the lubrication.

Some people prefer to carry bathroom deodorizer with them. This can be helpful when using a restroom in a public place.

Medications

Before surgery, you may have been taking medications that were made to be absorbed gradually through both your small and large bowels. Now that you do not have a large bowel, these medications could be only partly absorbed or not absorbed at all. This can happen especially with certain coated pills (called enteric-coated pills) and time-release capsules.

Medication tips

- Always let your doctor and pharmacist know that you have an ileostomy.
- Do not take time-release or enteric-coated pills.
- Never crush your medications or open time-release capsules. Rather, consult with your pharmacist.
- **Never take a laxative.** This could cause severe dehydration.

Some final comments

Feeling comfortable with your body is important, especially after this type of surgery. It's equally important to enjoy good food as a part of a full life. We're hoping these guidelines are helpful to you. If you have any questions regarding stoma care, product usage and availability please contact your Coloplast Consumer Care Advisor at 1-877-858-2656.

Keeping Skin Healthy, Preventing and Treating Complications

In this article:

You will find information on the following topics:

- Checking for skin irritation
- Skin issues to look out for
- Stoma issues to look out for
- Products to help prevent skin issues

It's hard to overstate the importance of maintaining the health of your stoma and the skin around your stoma. Skin that's healthy is much less likely to become irritated. The pouching system also attaches better to healthy skin. However, on occasion, problems can occur. It's a good idea to recognize skin or stoma problems as early as possible, and to then seek advice from your Wound, Ostomy, Continence (WOC) Nurse or doctor. We've put together the following suggestions to help you keep your skin as healthy as possible.

Checking for skin irritation

According to a recent study, almost half of all people living with an ostomy have irritated skin around their stoma. But the study had two surprising findings. First, people often don't recognize that they have preventable skin irritation. Second, when people notice signs of skin irritation, they often don't realize they need help from their Wound, Ostomy, Continence (WOC) Nurse or doctor. By seeking help, the problem can be addressed and resolved before it gets out of hand. Working with your WOC Nurse will help you come to know what healthy skin looks like for you.

What should I look for?

Like many people with ostomies, you may never have an issue with skin complications. But it's good to be aware of potential problems. It's important to look for any output that may have leaked on your skin. Other signs of leakage can be odor, pain, skin irritation, or loosening of the skin barrier. Get in the habit of checking the skin each time you change your barrier and clean the area. If you are unable to see the skin around the stoma, use a hand-held mirror. Then follow this routine and ask yourself these questions:

Examine your barrier after you remove it

What does it look like? Is any of the adhesive melted or washed away? Is there evidence that stool or urine has leaked underneath the barrier? (If so, your skin is directly exposed to the stool or urine from your ostomy and this can cause skin irritation and / or breakdown.)

Examine your skin

What does it look like? Is there any leakage on your skin? Is there any adhesive residue? Is your skin uneven under the barrier? Are there creases or folds in the skin that prevented you from getting a good seal, causing a leak? Is the skin the same color as on the rest of the abdomen? Is there evidence of irritation, redness or rash? Does your skin feel sore? Are there open areas of skin?

How do I keep my skin healthy?

There are things you can do to prevent stool or urine from coming into contact with your skin. And even if your skin does become irritated, proper care should return your skin to good health.

- When cleaning the skin around the stoma, use water. If there is any adhesive residue on the skin after cleansing, leave it alone.
- Avoid using bath oils or soaps with moisturizers and perfumes, since they can make it harder for the barrier to adhere to your skin.
- Before applying the barrier, make sure your skin is clean and completely dry.

- Adjust the hole in the barrier so that it fits exactly to the diameter of your stoma.
- Periodically check the size of your stoma. If there are any changes in the stoma size, be sure to adjust the hole size of the barrier.
- Ensure full contact between your skin and the barrier by using your hand to put light pressure over the barrier for two to three minutes.

Change your barrier as soon as you can if you notice any discomfort, itching or leaking.

Crusting Technique

With certain types of skin irritation, your skin might be moist and weepy. You can use the crusting technique to produce a dry skin surface even on tender and moist skin. This ensures a better seal with the barrier:

- Sprinkle the moist skin with ostomy powder and brush off the excess.
- Use skin sealant to seal in the powder.
- Dab the sealant on the powder only, don't rub it on your skin.
- Allow the sealant to dry completely.
- Repeat the process as needed to form a dry crust.

Skin issues to look out for

IRRITANT DERMATITIS – which looks like red, weepy areas surrounding the stoma. You might notice pain or even bleeding. Irritant dermatitis is caused by something that irritates your skin. It could be stool or urine, or products such as solvents or pastes.

Treatment: Re-measure your stoma and make sure you cut the barrier to size ($^1/_8$ inch larger than the stoma). Use the crusting technique to help you get a good seal.

Future Prevention: Make sure you change your pouch on a regular schedule. If uneven skin may be the cause of the irritation, consider an extended wear barrier or a convex (curved) barrier. If creases or folds in the skin may be the cause, use strip paste or a moldable ostomy ring to "caulk" those areas. That can help you get a better seal.

MECHANICAL IRRITATION – which, like irritant dermatitis, looks like red, weepy areas around the stoma. Pain or bleeding might occur. It's caused by removing the skin barrier or tape with too much force, or by washing your skin too vigorously.

Treatment: If your skin is moist and weepy, use the crusting technique.

Future Prevention: Use a gentle touch when washing your peristomal skin. Likewise, be gentle when removing your skin barrier. Carefully peel the barrier downward while holding the skin tight with the other hand.

CONTACT DERMATITIS OR ALLERGIC DERMATITIS – which appears as red, irritated skin surrounding the stoma. Contact dermatitis can occur when your outer layer of skin has been cut or damaged, making it more easily irritated. Allergic dermatitis occurs if you're allergic to a product that you're putting on your skin. The allergy may be caused by soap, wipes, paste, powder or the barrier or pouch material.

Treatment: Talk to your WOC Nurse to find out (1) what might be causing the problem and (2) if you need a product to treat your skin.

Future Prevention: Avoid using any allergy-causing products.

FOLLICULITIS – which causes tiny, red, painful bumps. Folliculitis is caused by an infection of the hair follicles near your stoma. It can develop if you use force rather than gentle peeling when removing the barrier. It can also develop if you shave the hair in the peristomal area incorrectly, or too often.

Treatment: If your skin is moist and weepy, use the crusting technique. An antibacterial cleanser or powder may be useful; talk to your doctor or WOC Nurse to find out if you need them.

Future Prevention: It's best to use a scissors to clip the hairs on your peristomal skin. An electric shaver can also be used. If you use a razor, you should (1) use a clean, sharp razor, and (2) use a non-moisturizing shaving gel.

FUNGAL INFECTION – which begins as a red rash before progressing to round, raised areas of skin. A fungal infection causes itching and burning and can spread beyond the edge of the barrier. People at higher risk of a fungal infection are those who have diabetes, have anemia, have a lowered immune system or have taken antibiotics for more than a week.

Treatment: If your skin is moist and weepy, use the crusting technique. Ask your doctor or nurse if you should use an antifungal powder.

Future Prevention: Because fungal infections like moist, dark areas, always dry your skin thoroughly before replacing the pouching system. To keep your skin dry, be sure to change your pouching system before any output gets on your skin. It's also best to remove your pouching system gently, to keep your skin as healthy as possible.

HYPERPLASIA – which looks like white-, gray-, or red-colored raised areas of skin very close to the stoma. This portion of raised skin, which is thickened, can resemble warts. Pain and bleeding can also occur. Hyperplasia is most common with urostomies, and it is caused by urine pooling on the skin for long periods.

Treatment: When you change your pouch, treat the affected skin for 5 minutes using a paper towel soaked in a diluted vinegar solution (1 part vinegar to 3 parts water). Then rinse thoroughly and dry your skin.

Future Prevention: At regular intervals, re-measure your stoma and make sure you cut the barrier to size. It is important that the hole in the barrier is exactly the right size to match that of the stoma at the skin level. If the hole is too small it can irritate the stoma, and if too large, stool or urine will be able to leak under your barrier and come into contact with the skin.

Stoma issues to look out for

STOMAL PROLAPSE – which occurs when a small part of the bowel protrudes through the stoma opening. A stoma that previously had projected 1 inch from the skin might project 4 inches (or longer). The lengthened stoma is then at risk for injury or trauma. Stomal prolapse could result from increased pressure (for example, from pregnancy), blockages, tumors or loss of muscle tone with age.

Treatment: See your doctor to make sure that additional surgery is not needed. If the prolapse can be managed without surgery, you might wear an ostomy support belt with a prolapsed flap to hold the stoma in place. You should also check with your WOC Nurse, who can tell you if a different type of pouching system might be better for you. You should also re-measure your stoma, in case you need to change the size of the barrier opening.

PERISTOMAL HERNIA – which is a weakness in the abdominal wall that can create a bulge from the bowel being pushed forward. Contact your doctor if you notice nausea, vomiting, abdominal pain, or decreased or absence of output from your stoma.

Treatment: Talk to your WOC Nurse, since the change in shape of the abdominal wall might require a different type of pouching system. Some pouching systems – for instance, flexible pouching systems – adhere more easily to the rounded contours of the abdomen. A support belt or a lightweight girdle might also be helpful.

Additional thoughts

Like many people with ostomies, you may never have complications with your stoma or with your peristomal skin. However, it's good to know about potential complications so you can be attuned to them if they develop. To avoid skin issues in particular: clean your skin gently, remove the barrier gently, use paste or other products to seal any creases or uneven surfaces, and change the pouching system before output could leak on your skin.

If you notice skin irritation or stoma issues: See your Wound, Ostomy, Continence (WOC) Nurse or doctor to find the underlying cause of the problem. Your WOC Nurse can help you decide if you need to make any changes.

Keeping your skin and stoma healthy are key factors in your feeling comfortable with your ostomy. And that can allow you to be worry free.

If you have any questions regarding stoma care, product usage and availability please contact your Coloplast Consumer Care Advisor at 1-877-858-2656.

Ostomy Pouching Systems

In this article:

- Types of pouching systems
- Barrier options
- Ostomy accessories available
- Applying your pouching system

How do you decide which type of ostomy pouch is right for you? It usually depends on three factors: your lifestyle, the type of stoma you have, and the shape of your abdomen.

Know your options

You had one type of ostomy pouching system in the hospital, but that may not be your choice for the long term. Your abdomen and stoma will change in shape as swelling decreases following your surgery. As you heal you will be able to be more active, and your pouching needs may change.

It's a good idea to know what your options are. It's also helpful to talk to your Wound, Ostomy, Continence (WOC) Nurse, who can assess the look and feel of your abdomen. She or he can offer one-on-one advice based on your situation. But ultimately it's your choice, based on what works best for you.

Pouching systems

When choosing a pouching system, one of your first choices will be whether you want a one-piece or a two-piece pouch system.

In one-piece systems, the skin barrier and the pouch are a single unit. Since it is all one unit, there are fewer steps in putting it on. This makes one-piece systems easier for those with limited eyesight. They may also be easier to use for those with arthritis, since minimal hand strength and dexterity are needed. One-piece systems are very flexible, and they will lay flatter against the body, making it less noticeable under clothing.

In two-piece systems, the skin barrier and the pouch are separate pieces. There are two options for coupling, or connecting the two pieces together.

- **Mechanical coupling** – The pouch and barrier are connected similar to the way a lid snaps snugly onto a plastic container. Some hand strength and dexterity are needed to attach the pouch to the skin barrier. The skin barrier is easy to apply because you can see the stoma as you center it in the barrier. However the mechanical coupling barrier is somewhat rigid compared to one-piece or adhesive coupling options. With a two-piece system you can easily change your pouch size for activities such as swimming or intimate times.

- **Adhesive coupling** – The pouch and barrier are connected using an adhesive, similar to tape. Some dexterity – but little hand strength – is needed to attach the pouch to the skin barrier. The skin barrier is easy to apply because you can see the stoma as you center the barrier. The adhesive design allows this two-piece pouching system to be very flexible. With a two-piece system you can easily change your pouch size for activities such as swimming or intimate times. The adhesive coupling system lays flat against the body, which makes it less noticeable under your clothes.

Barrier options

The barrier is the most important part of the pouching system because it protects your skin from stoma drainage and keeps your pouch in place. Be aware that your skin might take a few days or up to a few weeks to get used to the adhesive on your barrier.

Helpful tips:

- Cut the barrier ⅛" larger than the stoma.
- Apply the skin barrier directly to clean, dry skin.
- Avoid the use of any moisturizers around the stoma.
- Ensure no skin is showing between the barrier and stoma to prevent skin irritation and leakage.
- Apply gentle pressure to skin barrier for about a minute for the best adhesion.

There are two types of barriers:

- **Standard wear barriers** are designed for more solid stool and are commonly used with colostomies. They absorb moisture quickly, so they are able to handle perspiration and still stay bonded to the skin. If they are exposed to moisture for long periods of time, however, these barriers may begin to erode or break down. Keep this in mind if you have a bout of diarrhea. In that case you may need to change the barrier more often.
- **Extended wear barriers** are designed to manage loose stools or liquid drainage from the stoma. They are commonly used with either an ileostomy or a urostomy. They resist absorbing moisture and maintain their shape longer than the standard wear barrier. If you have an ileostomy or urostomy, the extended wear barrier isn't likely to erode, so you should be able to wear it longer than a standard wear barrier.

There are also different barrier shapes:
A skin barrier will either have a flat shape or a convex (curved) shape. Most people will use a flat barrier right after surgery. As the swelling from surgery decreases you may find you need a convex barrier.

Convex barriers are designed to gently push against the skin around your stoma. This helps prevent leakage by creating a secure seal. Your WOC Nurse may suggest that you wear a convex barrier if any of the following apply to you:

- Your stoma is flush with the skin or below skin level
- The skin around your stoma is not flat
- Your abdomen is very soft around your stoma
- If you often have leakage – even if your stoma protrudes (sticks out) from your skin

Make sure you discuss convex barriers with your WOC Nurse before trying them on your own.

Ostomy accessories

There are a number of Brava® ostomy accessories that may allow you to get better results with your pouching system.

Moldable Ring – Used like a washer underneath the barrier to create a good seal right around the stoma. It can also be used to build up soft convexity around the stoma when using a flat barrier. Another option is to use it as caulking to fill in uneven gaps or creases in the skin. The ring can be molded and shaped into whatever shape or size is needed, and it is erosion resistant, allowing it to keep its shape longer than an ostomy paste.

Elastic Barrier Strips – Used to support the outer edge of the barrier, providing security by holding the barrier in place. Elastic Barrier Strips prevent the barrier from rolling up or peeling off due to clothing catching the edge of the barrier, or simply due to movement throughout the day.

Ostomy Powder – Commonly used on open skin or denuded skin. (Denuded skin has lost its outer skin layer.) The powder provides an absorptive layer of protection.

Skin Barrier – Leaves a plastic coating on the skin. When used with ostomy powder, sealant helps a barrier stick to moist, open skin. If sealant is used on dry skin, the plastic coating may interfere with the barrier adhering to the skin.

Ostomy Belt – Helps strengthen the seal between the barrier and skin and is often used with convex barriers. A belt can help with hard-to-manage situations: irregular contours of the abdomen, frequent leakage or a stoma that doesn't protrude from the skin.

Pouch Deodorant – A pouch lubricant and deodorizer in one. Powder-fresh liquid neutralizes odor and allows output to slide to the bottom of the pouch for easier emptying.

Protective Paste – Used to fill in uneven skin surfaces to create a flat pouching surface. Provides tight seal around the stoma and protects against stoma output, while minimizing risk of maceration.

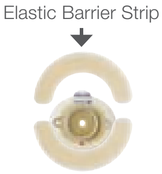
Applying your pouching system – the basics

- Gently wash the skin around your stoma with warm water and pat dry. Avoid soaps with scents or oils, which may irritate the skin and interfere with adhesion.
- Cut the barrier to the size of your stoma. Measure your stoma and use an opening that doesn't expose any skin between the barrier and the stoma. If your stoma is round, consider wearing a pre-cut barrier.
- Apply the skin barrier directly to clean, dry skin. This should give you the best adhesion.
- Remember that the adhesive on the skin barrier is pressure sensitive. The barrier takes both time and pressure to adhere to your skin. Apply gentle pressure to the barrier once it is on your skin to ensure complete contact. You will know that the barrier is bonded well when the edges no longer lift away from your skin. Applying gentle pressure may help ensure longer wear time.

You have options

Even after you make your first selection, you are not locked into that choice. People often try out different pouching systems and supplies over a period of days, weeks or months. Trying out different options can help you know what works best for your lifestyle and your body type. There is no right or wrong choice, just the choice that works best for you.

If you have any questions regarding ostomy pouching systems, or simply want to try a product sample, please contact your Coloplast Consumer Care Advisor at 1-877-858-2656.



Socializing

In this article:

- Sharing your story
- Talking with family
- Talking with co-workers & others
- Tips for dating

After your ostomy surgery, you might have questions about socializing. Whom do I tell? What should I say? Do I explain things now or wait until I'm more comfortable with this physical change myself? Whether your ostomy is temporary or permanent, decisions about telling others are entirely up to you. You may choose to keep this topic private, not mentioning it to anyone. And if you make this decision, others are unlikely to ever know about your ostomy. Chances are you've met someone with an ostomy too, and you didn't even know it. On the other hand, you might decide to tell many or just a few people.

Regardless of your decision about telling friends and co-workers, it's best to tell all healthcare providers, including your pharmacist, that you've had ostomy surgery.

Sharing your story

Again, the choice is yours. If family and friends know you've had surgery, they may be concerned and want to know you're all right soon after surgery. If friends know the nature of your surgery, they're likely to want to support you by listening. Shortly after your ostomy surgery, you may feel uncomfortable talking about it. This is normal. However, let those close to you know when you feel ready to open up about it.

Talking with family

Talking to family and close friends about your surgery is important for both you and your loved ones. Your family and close friends are concerned about your health and recovery. When you share details of your operation, it can help answer their questions and minimize their concerns.

Besides comforting your family and close friends, sharing this part of your life is also a healthy way for you to cope with your emotions. Many people feel a sense of relief when they do open up. The relief comes not only from sharing your story, but also from feeling the support of people close to you. Yet the choice of sharing this information is up to you.

Talking to your children – If you have younger children, it often helps to talk openly your ostomy surgery. When information is given openly, most children have little trouble accepting it. A lack of openness may make them think the situation is worse than it actually is.

Allow your children time to ask questions, then answer their questions simply and truthfully. Often a simple explanation is all that is needed. Talking about your surgery in a natural way will help resolve any misconceptions your children may have.

If you have teenagers, you know from experience that they may withdraw when it comes to subjects like a parent's health condition or surgery. In this case, some parents choose to tell their teenagers only key points about their surgery. However, it's still important for them to hear your open and honest answers to their questions.

If you have grown children, you might want to speak openly about the surgery and how it has affected you – as you would with any surgery.

Talking with co-workers & others in your life

It is your choice whether you say anything about your surgery or not. However it's usually best that at least one co-worker knows you've had ostomy surgery, in case any issues arise on the job.

If you choose to be more open with your co-workers, you might begin by explaining the reason for your surgery. Then mention that, as a result of the surgery, you have a different way to empty your bowels or bladder.

Going back to work brings up other questions about socializing, too. How will my ostomy change my daily routine? And how will I adapt to that on the job? While you're still on medical leave, it's a good idea to do some trial runs to feel confident about leaving home for long periods of time. For a couple weeks before you return to work, you may find it helpful to dress and plan your day as if you were going to your job. This can help you get into a new workday routine – and build your confidence when you do return to your job.

Neighbors and other people in your life may be curious about why you were in the hospital, and they may ask about your health. Think ahead about what to say when questions come up. If you prefer not to discuss details with people you don't know well, you could be more general, and say you've had abdominal surgery, or that you had part of your colon or bladder removed. Never feel that you need to explain details of your surgery to everyone that asks.

Tips for dating

Dating is a normal part of life for many people – including people with ostomies. If you begin dating someone after your surgery, you can choose how much to tell, and when.

Some people think it's better to tell their new partner early on, to try to be open and up front. Others may wait a while, letting their partner get to know them as a person, so the partner can see that an ostomy hasn't changed who they are. However, it may not be best to wait until the relationship is serious before bringing up your ostomy.

When it's time to have the conversation, speak with self-confidence. It may help to start with a simple explanation. Be open to questions. Your new partner needs to understand that having an ostomy has not affected your quality of life. If you seem negative about your ostomy, your partner may view it the same way.

Additional thoughts

Feel free to follow your instincts when it comes to telling others about your surgery. You may find that talking about it becomes much easier over time. Getting back to living – and enjoying the activities you did before surgery – is very important. That includes socializing. Remember, your ostomy is a change to your body only – you are still the same person. And there is no reason your relationships with family, friends and co-workers to change.

If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2656.

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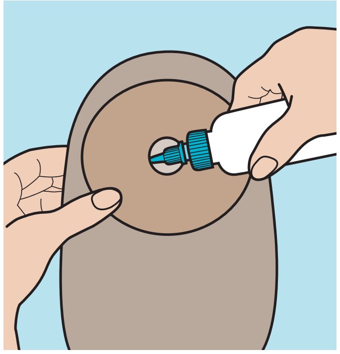
Think again. Think **Brava®**

Try your new Brava® Lubricating Deodorant samples today!

How to use:

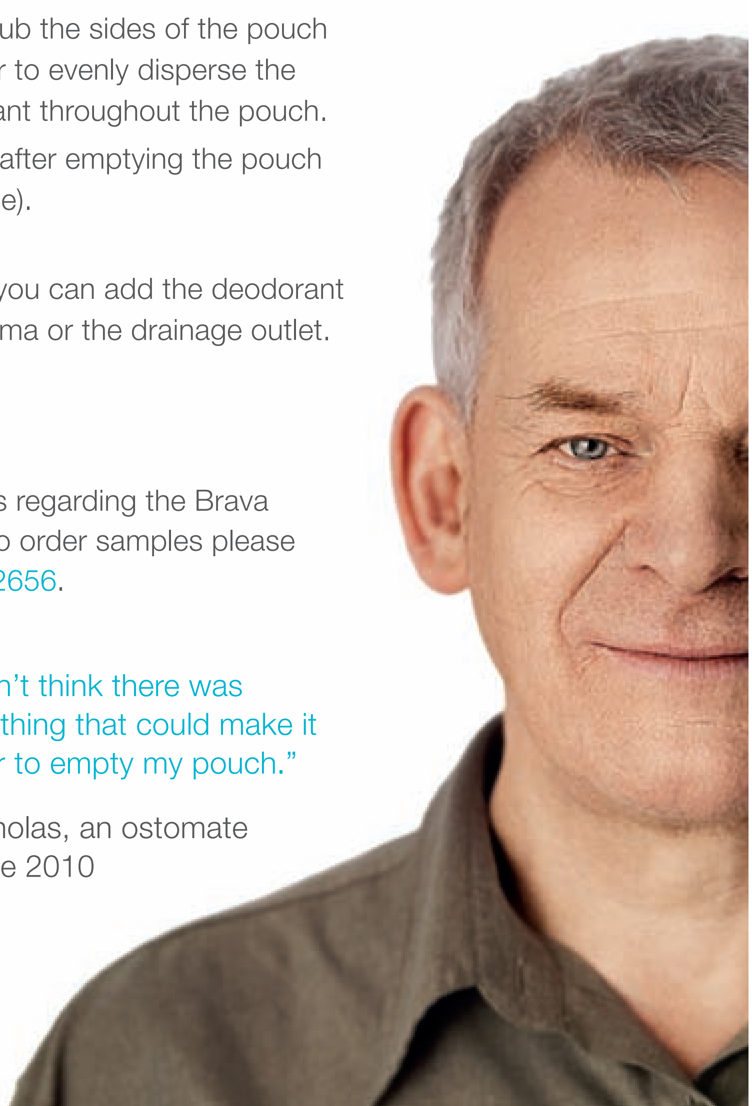


- Squeeze 5-10 ml / 1 sachet of Brava Lubricating Deodorant into the pouch before you apply it to your skin.
- Gently rub the sides of the pouch together to evenly disperse the deodorant throughout the pouch.
- Repeat after emptying the pouch (see note).

NOTE: If you use a drainable pouch, you can add the deodorant through either the opening for the stoma or the drainage outlet.

Order Samples Today!

If you have any questions or concerns regarding the Brava Lubricating Deodorant or would like to order samples please call your Care Advisor at 1-877-858-2656.



"I didn't think there was something that could make it easier to empty my pouch."

\- Nicholas, an ostomate
since 2010

Coloplast® Care

Coloplast

BodyCheck Tool: Understand Your Body Profile for a Better Product Fit

In this article:

- Body shapes change over time
- What is the BodyCheck Tool
- Receive free samples of the right product for you

Body shapes change over time

Following your ostomy surgery, your Wound, Ostomy, Continence (WOC) Nurse recommended the right product to fit your needs at that time. But you have probably noticed that both your body and your stoma have changed in the time since your surgery. Your stoma has probably reduced in size, and the area around the stoma has probably changed quite a bit as well.

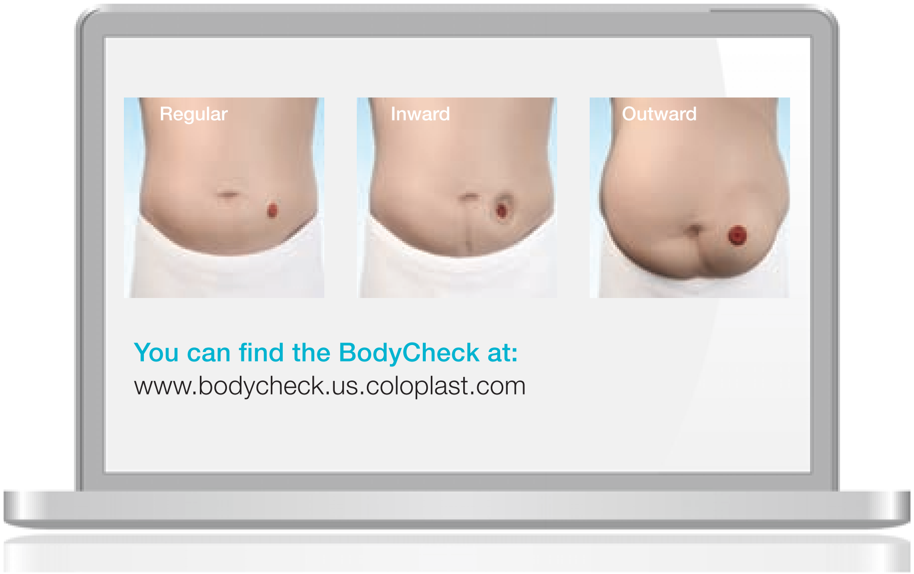
Now that you have had some time to settle in to your life after surgery, it is a good time to consider if your pouching system is still providing a good fit to your body. When the pouch doesn't fit perfectly anymore it can lead to a number of issues for you. There is a risk that you could begin to experience problems with leakage under the barrier, and this can often lead to skin irritation.

By being aware of small changes to your body and adjusting your products to those changes, you can reduce the risk of issues like leakage and skin irritation. These types of issues are not things you need to accept as part of having a stoma. Even if you only experience a leak once in a while, it is still too often.

Take advantage of the BodyCheck Tool

Fortunately there is a very simple way to find out if you have the right product for you. Coloplast has developed a great resource that makes it easy to assess your body shape. Together with 300 of the best ostomy care nurses in the world, we developed a tool called the “BodyCheck”: An easy way for you to check if you have a perfect match between your body profile and your pouching system.

The BodyCheck Tool is a website (www.bodycheck.us.coloplast.com) where you can find the best product to meet your needs, and then receive a free sample of that product. It’s very simple – you just go online and type in the website below, and answer 8 visual questions.



You can find the BodyCheck at:
www.bodycheck.us.coloplast.com

Receive free samples of the right product for you

When you complete the 8 simple questions, you will receive recommendations for products that fit your unique profile, and as a member of Coloplast Care, you can order free samples of these products. Try out the new products, and make sure to discuss them with your WOC Nurse for her/his input.

If you have any questions about the product recommendation, or about the BodyCheck Tool itself, please just give your Coloplast Care Advisor a call. They would be happy to walk you through the tool. You may reach your Coloplast Consumer Care Advisor at 1-877-858-2656.

Additional thoughts

Your body has probably changed quite a bit following your surgery, as you have been settling back into your routine again. Over time, people often find that they gain and lose small amounts of weight. This is very normal. It is just important to make sure you continue to assess if your pouch is meeting your needs.

You may want to consider using the BodyCheck Tool once each year, just to make sure you still have the best fit. It will be worth it to prevent leakage issues and the discomfort those issues can bring. It is always a good idea to discuss any product changes with your WOC Nurse as well, so please make sure you are staying in contact with your nurse.

What to Wear

In this article:

- Undergarment suggestions
- Men's clothing
- Women's clothing
- Swimwear

Clothing options remain endless after you've had ostomy surgery. When your abdomen has healed, you'll no doubt be able to wear many of the clothes you currently have. However there may be some styles you want to avoid and other styles you find more appealing. It's a good idea to know what your options are, because ultimately it's your choice, based on what works best for you.

Clothing tips

Your ostomy pouch is meant to lie flat against your body, and it will not be obvious to others. Many of today's pouches are designed to be unnoticeable even when you wear the most stylish, form-fitting clothes. It's important to empty your pouch regularly, however, since it may bulge outward when stool or urine collects in the bottom of the pouch. Most Coloplast pouches have a unique tuck-away pocket that holds the end of the pouch with a Velcro closure. By simply folding the rolled-up closure into the tuck-away pocket, you shorten the pouch length. This will make it easier to fit your pouch comfortably under your clothing.

Undergarment suggestions

In general, underwear should be snug, to keep the pouch in place. But it shouldn't be so snug that stool or urine cannot pass to the bottom of the pouch.

Men can wear either boxers or briefs, depending on their preference. However jockey-type briefs usually work best to support the pouch. Boxers offer less support for the pouch. If you prefer boxers, one way you can adapt this style is by sewing a "pocket" into the waistline to carry and support the pouch.

Many women prefer wearing a snug – not tight-fitting – girdle. Cotton knit, spandex or similar types of stretch underpants are also useful. Panty hose, with its snug waistband, is another good option.

Men's clothing

Since many men wear their pants below their natural waistline, their pouching system may be above the beltline. You might see if you like wearing trousers one size larger, since this may allow you to put the belt above the pouching system. Keep in mind too that trousers with a pleated front hide the pouch better than trousers with a flat front.

If your stoma is near your waist, avoid tight trousers or belts. Depending on the location of your stoma you may prefer to wear suspenders, especially if you find belts uncomfortable or restrictive.

Another option is to wear an item of clothing over your trousers. Vests, which come in sporty, casual or business styles, can be used to hide the pouch. Sweaters or jackets are another option in cooler climates, or for more formal occasions.

For active wear, consider biker-style shorts. They can be worn alone or layered under shorts, exercise pants or swim trunks for added security.

Women's clothing

As is often the case for any woman, finding pants that fit your body shape can be a challenge. If your stoma is near your waist, avoid tight pants, skirts or belts. You may feel more comfortable wearing pants or skirts with a higher or looser waistband, or with an elastic waistband. Pants or skirts with pleats near the waistband may hide the pouch better than those with a flat front. Clothing designers have recognized that women come in all shapes and sizes. So you can now find pants with a variety of rises (waistline heights) – allowing you to find a style to fit your body and your needs.

For active wear, consider wearing yoga pants or stretch pants to help support the pouch during exercise. You might also try biker-style shorts since they can be worn alone or layered under shorts, exercise pants or other stretch pants.

Swimwear

Women may want to choose a swimsuit that has a lining to provide a smoother profile. Many suits come with shirring (rows of gathered material) across the abdomen, which can also conceal the pouch.

Men have several options, too. For instance, swim trunks with an elastic waistband and Bermuda-style shorts offer you a variety of waistband positions. If the stoma is above your belt line, consider wearing trunks with a tank shirt.

Additional thoughts

Although there may be some styles of clothing you want to avoid after surgery, you still have many choices open to you. See which styles you like the best, and which you find most comfortable. If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2656.

Intimacy

In this article:

- How to approach intimacy again
- Pouch recommendations
- Intimate apparel

After your ostomy surgery, you might have questions about how your surgery may affect your sexual health. Intimacy and intercourse are a natural part of life. That doesn't change when you've had ostomy surgery – you can still have a very satisfying sex life.

Approaching intimacy again

As you recover, you will be getting used to the way your stoma and pouch look. The same will be true for your partner. Despite what we see in ads and movies, a perfect body isn't needed for a fulfilling life or a fulfilling sex life. Feeling comfortable with these changes to your body is a critical first step in resuming intimacy.

It's important to feel good, not only physically but psychologically too. Anxiety and doubt affect both desire and sexual function. Anxiety also prevents you from focusing on your partner. Your self-esteem and confidence not only make you feel better generally, they help your partner feel better as well. Together, the two of you can rediscover the intimacy that you enjoyed before.

Easing into it

Once both of you are feeling more comfortable with the changes to your body, think about how you can approach sexual activity in a relaxed, non-pressured way. Be open to discussing your feelings, too, so that your partner doesn't misinterpret an initial reluctance to have intercourse. Share your concerns, and listen to your partner's concerns. Honesty in talking about this topic will only help build mutual trust and respect between the two of you. Be patient and allow both yourself and your partner the time you need.

Making intimacy comfortable

You might want to try positions that keep your weight off your stoma. Some options include lying side by side, front to back, or putting a pillow under your abdomen for support.

You should never have intercourse through the stoma. Depending on the reason for your surgery, you might need to avoid anal intercourse as well. If a woman has had vaginal reconstructive surgery, she will need her doctor's OK to resume vaginal intercourse. Talk with your doctor or your Wound, Ostomy, Continence (WOC) Nurse about any types of sexual activity that you should avoid.

Pouch recommendations

Keeping the pouch clean and empty is a good idea. You may want to put a new pouch on beforehand, and there are several good options if you'd like to use a smaller pouch. Some people switch to a stoma cap. Other people may switch to a smaller mini-pouch or a closed-end pouch. All of these choices are smaller, less bulky and more discreet.

Intimate apparel

Intimate apparel can help to secure the pouch with clothing, and can prevent pouch movement as your body moves. Intimate apparel can help you feel and look sexy, too. Another product option is a pouch cover, which can come in an array of different colors. This can allow you to feel more discreet.

A web search will give you many options. Men might want to consider tank tops, a cummerbund-type garment or boxers with a waistline that helps secure the pouch. Women might consider teddies, camisoles, wraps or silky robes, certain types of thongs or panties with pouch pockets.

Other considerations for intimacy

Sometimes ostomy surgery involves removing the rectum. In men the nerves that regulate erection and ejaculation are near the rectum. In some cases men who've had this type of surgery have problems with erections. However, the majority of men encounter no problems having an orgasm.

For some women surgery might involve removing the rectum and part of the vagina. In these cases women may feel pain during intercourse. Different sexual positions or use of vaginal lubricants can be useful.

If you're unable to resume having intercourse, or if you're unable to find the same level of enjoyment as before, talk to others. Your doctor and WOC Nurse are excellent sources of information.

More resources

In addition to talking to your doctor or WOC Nurse, there may be support groups in your area. Consider attending the groups, since many people have faced and overcome the same challenges. You'll find that it can be very helpful to get suggestions from others. Or, for more one-on-one advice, you and your partner might want to talk to a therapist or a counsellor. A counsellor is a good resource to help with both body and image issues and intimacy issues.

The United Ostomy Association of America (UOAA) has a helpful publication, "Intimacy, Sexuality and an Ostomy." It can be found at www.ostomy.org; look under "Ostomy Info" and then click on "Sexuality."

You can also post a specific question on the UOAA's message board online. The message board allows people with ostomies to share stories, tips and more. Just click on the "Discussion Board" link on www.ostomy.org.

If you'd like information about or free samples of pouch options, contact Coloplast Consumer Care Advisor at 1-877-858-2656.

Ostomy Accessory Products

In this article:

- Creating an even surface
- Creating a tight seal
- Protecting your skin
- Preventing odor
- Pouching options for all stoma types

The decision to use an accessory product is mostly a matter of personal preference. Some people have a good seal between the skin and the barrier, and they may never need accessories. Other people face challenges in getting a tight seal and avoiding leaks. In such cases your Wound, Ostomy, Continence (WOC) Nurse may recommend that you try one or more accessories to improve the seal between your skin and the barrier.

You may want to use an accessory product if:

- Your stoma is flush with the skin (at skin level)
- Your stoma is retracted (below skin level)
- The skin around your stoma is not flat
- The skin around your stoma is red or irritated
- Creases in your skin don't allow the barrier to adhere tightly
- Your abdomen around your stoma is very soft
- You notice leaks regularly

Before using an accessory product, it's best to read the following and talk to your WOC Nurse about your options.

Creating an even surface

You might notice that gaps, creases or an uneven skin surface may sometimes cause the barrier to not stick tightly to your skin. A tight seal is important to prevent output (urine or stool) from sitting on your skin. Either ostomy paste or Brava® Moldable Ring can be used around the stoma opening, between your skin and the barrier, to provide a tight seal.

Brava Moldable Ring – The Moldable Ring is a very good option for creating an even seal right around the stoma. It can also be used to fill in uneven areas underneath the barrier by simply breaking off small pieces and shaping them to the size of the gap or crease in the skin. Rings are easy to handle and also easy to remove. Advantages: It can be used both to create convexity and to create an even skin surface. The Brava Moldable Ring is also made to hold up well to liquid output, so it would be a good choice for someone with an ileostomy or urostomy.

Strip Paste – This product is very cohesive; even more cohesive than ostomy paste. It's a good choice for filling in uneven gaps or creases, to help provide a better seal. Advantages: It helps create a mild convex (curved) shape for a flat barrier, or it makes a convex barrier more convex, to help it fit lightly against your skin. Strip Paste is alcohol-free, so it won't irritate your skin.

Ostomy Paste – This product is used like caulking to fill uneven gaps or creases and provide a tight seal. It's most often used around the barrier opening next to the stoma to create a better seal. Advantages: A small bead of ostomy paste is all that's needed. Reminders: Do not use more than a small bead of paste, and don't spread it over the adhesive barrier. Ostomy paste is not the best choice if you have a urostomy; this type of paste, if it comes in contact with urine, may not bond well to your skin.

Added security

It is important to make sure your barrier stays sealed to your skin and does not start to lift up. If you have any lifting occurring, this can lead to other issues, such as leakage. To keep a tight seal to the skin, there are a couple of good accessory products that can help you.

Elastic Barrier Strips – These elastic strips are used to make sure the outside edges of the barrier don't start to lift. They are a skin-friendly alternative to using an aggressive tape on your skin. Because they are made of an elastic material, they will stretch and move with your normal body movements throughout the day, and still create a secure seal for your barrier.

Ostomy Belt – Using a belt can help strengthen the seal between the barrier and your skin. Advantages: A belt can give added security with hard-to-manage situations: irregular contours in the abdomen, frequent leakage or a stoma that doesn't protrude from the skin. It is also helpful when using convex barriers.

Protecting your skin

If you have open areas of skin around your stoma, a two-step solution is helpful: applying ostomy powder, followed by skin sealant.

Ostomy Powder – This product is often used on open skin or denuded skin. (Denuded skin has lost its outer skin layer.) Advantage: The powder provides an absorptive and protective layer, allowing the wet skin to dry for a better seal. Reminders: Powder is necessary only when your skin has healed.

Skin Barrier Wipe – This product will leave a breathable, plastic coating on the skin. When used over ostomy powder, the sealant bonds with the powder to create a dry surface. This dry surface helps the barrier stick, even if there is moist, open skin underneath the powder. Advantages: Protects the skin from body waste and adhesives. For open or denuded skin, it can create a good seal. Reminders: If sealant is used on healthy, intact skin, the plastic coating may prevent the barrier from adhering. It may also prevent the barrier from absorbing perspiration.

Removing the adhesive from your skin

Each time you change your pouching system, it's important to remove all of the adhesive from your skin. Otherwise your skin may become irritated. Usually you can do this with warm water and gentle cleansing with a cloth. If some adhesive remains, however, you might use ostomy adhesive remover.

Ostomy Adhesive Remover – An adhesive remover helps to remove any of the remaining adhesive still on the skin after removing the barrier. Advantages: Useful for anyone using adhesives. It's also available in no-sting, quick drying silicone formula. Reminder: Remember adhesive removers are non-alcohol based and are intended for removal of adhesive residues. In some cases paste residues may be more difficult to remove. Cleanse the skin after use of an adhesive remover.

Preventing odor

To help prevent odor, you might try an ostomy deodorant. If you have a colostomy or ileostomy and are concerned about gas odor, there are also pouch filters you can use.

Lubricating Deodorant – This is an accessory that you put in the ostomy pouch when changing or emptying the pouch. Advantages: A lubricating deodorant ensures that your stoma's output slides to the bottom of the pouch, makes the pouch easier to empty, and neutralizes odor from urine and/or stool.

Pouch Filters – These filters use charcoal to neutralize odor as it is passed from the pouch. One type of filter is within the pouch itself. No matter what style of pouch you use, you'll be able to find the same pouch that comes with a filter. A second type of filter can be attached to the outside of any pouch. Ask your WOC Nurse which type of filter might be better for you. Advantage: The filters remove odor from gas.

Pouching options for all stoma types

Deciding which ostomy pouching system is right for you will depend on various factors – the type of ostomy you have, your personal preferences and your lifestyle. You might also consider different accessories to make your life easier. Again, the place to start is to talk to your WOC Nurse about her/his recommendations. The following list may also give you helpful information.

Products for urostomies

Urostomy Minicap – This is a very small pouch for short-term use. It's an alternative to a standard-sized pouch. Depending on your fluid intake, it can be used for up to an hour before it fills. Advantages: It's a good option for certain leisure activities, such as swimming, or intimacy with a partner.

Urostomy Micro-Pouch – This is a smaller pouch than a standard-sized urostomy pouch. A standard-sized pouch can become twisted during sleep, due to the tubing that connects to a Night Drainage Bag. Advantages: A smaller pouch can be more comfortable while sleeping, and allows you to move around without twisting the pouch.

Urostomy Night Drainage Bag – This is a large bag that can be placed on the floor or hung on the side of the bed. Tubing connects the bag to your pouch. You can choose from either disposable or re-usable styles. Advantages: Since it's a large-volume bag, it won't overfill and it prevents you from having to awaken at night to empty your pouch. Many people like the security of knowing that they can sleep through the night and still avoid leakage.

Products for colostomies

SenSura® Mio One-Piece Closed-End Pouch – This is a simple-to-use product, since the pouch is meant to be removed and disposed of. The SenSura Mio barrier on this pouch is elastic, which means it will fit to your body contours, and it will be very comfortable as you move throughout the day. Advantages: It's simple to use, as well as flexible and waterproof. This makes it useful for many activities or sports. It's also discreet under clothing.

Two-Piece Closed-End Pouch – This pouching system consists of a barrier and a disposable pouch. Advantages: This style allows you to change pouches without changing the barrier. It also allows you to choose the right pouch size for your needs, and to snap on a new pouch easily. These pouches are lightweight, and the "click" you hear when you attach a new pouch lets you know it's secure.

Two-Piece Colostomy Stoma Cap – The stoma cap is a very small pouch that's a good option with a two-piece system. It snaps on if you want to be discreet (for instance, in intimate situations), and it's easy to remove when you need to return to a standard-sized pouch. Advantages: This is a good option for those who use colostomy irrigation. Irrigation is a way to control bowel movements by emptying the colon at a scheduled time. If you want to learn whether irrigation is an option for you, talk to your WOC Nurse.

Products for colostomies or ileostomies

Integrated Closure Pouches – These pouches allow you to open and close the pouch more easily. One type of closure, for instance, uses Velcro. Advantages: It's a good option if you still use the older type of closures and you find yourself fumbling with clips or clamps. The integrated closure is also very useful for anyone with arthritis or limited hand dexterity.

Additional thoughts

If the first product you try doesn't work well for you, don't be discouraged. There are many options, as you can see from this list. You will very likely find an accessory that is right for you. It's helpful to get some suggestions from your WOC Nurse before you try a product. She or he may know just the right product for you, or may have other good suggestions to help make your life easier.

If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2626.

Getting into Exercise

In this article:

- Why you should exercise
- Easing into it – knowing the basics
- Suggested activities
- Team sports & yoga

Important: Check with your doctor or your Wound, Ostomy, Continence (WOC) Nurse before you start or increase your exercise activities. What is good for one person may be too much for someone else.

You've heard it many times but it's worth repeating: physical activity is good for everyone. Getting exercise or participating in sports – as long as your doctor or nurse says it's OK – is highly encouraged. In the months after surgery, exercise can speed up your recovery. It can also prevent complications that might happen after sitting or lying too long.

Why you should exercise

It's worth making time in your life to exercise when you consider that it can offer a number of benefits. It can lead to faster recovery, a stronger heart, improved blood flow and improve your balance and flexibility. It also can increase your self-confidence and give you more energy overall. Maybe most important of all, physical exercise is one of the top ten stress busters.

Easing into it – knowing the basics

There are limits, especially soon after your surgery. Until your stoma and abdominal area are fully healed, a lot of activity can put you at risk for a hernia. To avoid getting a hernia, do not lift more than 8 pounds (the weight of a gallon of milk) for the first six weeks after surgery. When you're lifting and/or using abdominal muscles, an ostomy support belt is strongly recommended.

Suggested activities

For your overall health and well-being, it's important to get moving. The simple rule is: take it easy, start out slowly and build up gradually. When you do start exercising for longer amounts of time, make sure you drink plenty of fluids before, during and after exercise. If you feel lightheaded at any point, stop and rest. And it's a good idea to empty your pouch before any exercise or activity.

Start by Walking

Walking can be an easy and gentle way to get back into a routine. It's also an activity that you can start soon after surgery, and you can gradually increase both time and distance. When you challenge yourself to walk farther, your strength and endurance will improve. Make sure you give your body the support it needs with a good pair of walking shoes. Walking can help the following areas of your body: heart, lungs, muscles and joints.

Consider Biking

As long as your doctor approves, biking can be a good option. Your doctor may want you to wait until your abdominal area is completely healed before starting to bike. Biking can be an excellent activity since it's a low-impact exercise that doesn't put too much strain on your abdomen. If you had to have surgery to remove your anus, you'll need to wait longer to begin biking, to allow this area to heal.

Swimming

Swimming and water aerobics are a great way to keep fit. With your weight supported by the water, swimming gives your muscles a workout with minimal risk of injury. Swimming can also help you develop more flexibility, and it's a good option if you're bothered by arthritis.

Don't avoid the pool, thinking that "others will know" about your ostomy. Most people will never notice! If you want to be more discreet, you can use a small ostomy pouch specially designed to be less bulky. You can also find specialty swimwear available. You might want to consider the following:

- Snug swimsuits with dark colors or busy patterns can help hide the ostomy pouch.
- If you wear a filtered pouch, don't forget to cover it with a filter sticker.
- You may want to protect the barrier by adding Elastic Barrier Strips to the edges. These strips will add extra support and prevent roll-up of the barrier edge.

Team sports & yoga

Again, check with your doctor. Competitive sports can put a strain on your body, so it is important that you be fit before you take part. Make sure your pouch is empty before starting. Some people also wear close fitted waistbands or girdles to keep their pouch securely in place. For sports such as football, rugby, wrestling or kung fu, there are protective stoma guards that can help prevent stoma injury. Always inspect your stoma after participating in sports. If any injuries occur, contact your WOC Nurse.

Yoga is another good option for exercise, since it reduces stress, strengthens muscles and improves balance. Yoga can be done anywhere – at home or in a class – and can be done in a standing or sitting position. It's also an exercise that does not strain the heart.

Additional thoughts

Some people find it hard to get motivated to exercise, but nearly everyone finds that, after exercise, they are glad they made the effort. It can help improve your muscle tone, your health and your mood. You might exercise alone, to reflect or meditate. Or you might exercise with others, to socialize. Whatever your style and whatever you choose for your exercise routine, exercise has the bonus of being fun and good for you.

If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2626.

Tips for Dining Out

In this article:

- Dealing with gas
- Food & beverage choices
- Be prepared
- How to handle a leak

You may have stayed close to home for a few months, while your body gradually adapted to having an ostomy. If you have a colostomy or ileostomy, your gastrointestinal (GI) tract needed to adjust, too. That's why it was recommended that you initially ate simple, basic foods and gradually added other foods into your diet. But if your doctor has given the green light to resume a normal diet, take advantage of that. Resuming a social life – and dining out – is a welcome change for most people.

Dining out

When you do go out to dinner, try to time your outing to coincide with your regular meal schedule. People with a colostomy or an ileostomy sometimes find that when they skip meals, they are more likely to have gas and liquid stools.

When eating out the first few times, it's helpful to think through a number of situations, and then prepare for them. That will not only help you deal with any concerns that arise, it will also allow you to feel comfortable with yourself and to fully enjoy the food and conversation.

Dealing with gas

If you have a colostomy or an ileostomy, you may have noticed that some foods give you gas, while most foods do not. You can simply follow your instincts when ordering your meal. When dining out you might also feel more comfortable using a pouch with a charcoal filter. The filter will allow the gas to exit the pouch without odor. The filter also prevents the pouch from over-expanding.

In addition, it's possible to buy over-the-counter products at the drug store to help reduce gas. Ask your pharmacist about options.

If you find that gas is causing your stoma to make noise, you can simply cross your arms and hold them gently over the pouch. This will help muffle the sound of the gas, reducing any noise.

Food & beverage choices

If you have a colostomy or ileostomy, you generally know which foods might not agree with you – for instance any foods that might have caused diarrhea. You can simply avoid those foods when dining out. A good rule of thumb is to eat slowly and chew the food thoroughly.

Keep in mind that carbonated beverages – soda, beer or carbonated water – will produce gas. If you have a colostomy or ileostomy, you might choose to avoid carbonated drinks while you're dining out. You might also avoid drinking through a straw, since that can produce gas, too.

Be prepared

Always take a kit with you in case you need to change your pouch. That's something you should do whenever you leave home – whether you're headed to dinner, to a doctor's appointment or to a baseball game. The kit should include the following items:

- A pre-cut barrier and pouch (cut out the barrier beforehand if you do not use a pre-cut product)
- Paper towels, which you can moisten with water on the way into the stall
- Zip-top plastic bags - this will allow you to dispose of the old pouch in an odor- and leak-proof manner
- Pocket-size room deodorizer
- Sanitizing gel to clean your hands

Preparing for odor - If you may need to empty your pouch and you're concerned about odor, you can minimize pouch odor with special drops. (One type of drops is the Brava Lubricating Deodorant made by Coloplast). You simply put the drops in when the pouch has been emptied, or when you put on a new pouch before you go out to dinner.

The pocket-size room deodorizer in your kit could also help with any odor. This is especially helpful when using a restroom in a public place

How to handle a leak

If you feel a leak or detect an odor, excuse yourself and go to the restroom. Since it's always a good idea to have an extra pouch with you, you can change your pouch and (if needed) dry off your clothes.

Having a sense of humor will gracefully get you through a situation like this. In addition, the people you're dinning with enjoy being with you, so even if they know what has happened, they will be understanding and supportive.

Additional thoughts

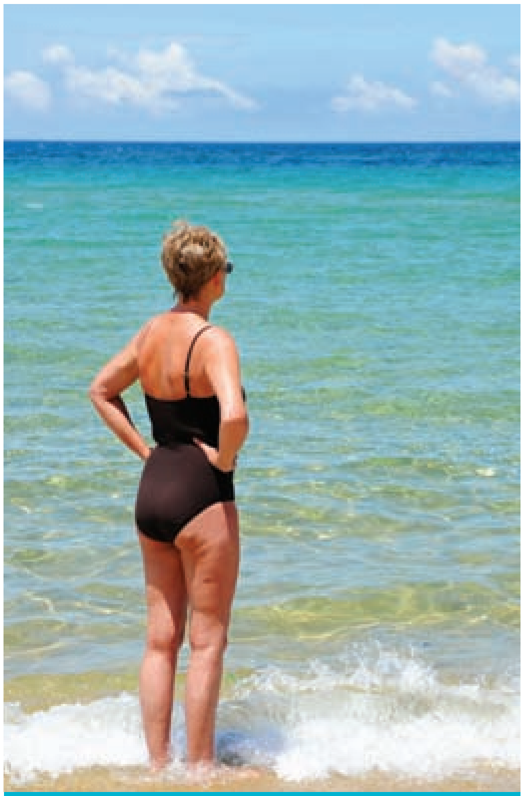
Regardless of how long it has been since your ostomy surgery, it's always best to make healthy food choices – for optimal nutrition and to keep your weight in check. A balance of fruits, vegetables and protein will give you the nutrients your body needs to heal and to stay healthy.

But it's equally important to enjoy dining out with friends or family. To make sure you feel comfortable with what you might order, you could try foods one at a time, at home, to see if they have any effect on you.

Then make a reservation, get dressed and head out to your favorite restaurant. You'll be glad you did.

If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2626.

Tips for Traveling



In this article:

- Getting ready for your first trip
- Preparing for a longer trip
- Tips for air travel

Traveling is one of the great joys of life, and it's one you should continue to enjoy after your ostomy surgery. In the first few weeks or months you might want to be close to home, to recuperate. But after your recovery period, you should be able to travel anywhere you'd like to go. It's a good idea, however, to check with your doctor or your Wound, Ostomy, Continence (WOC) Nurse before you plan your first post-surgery trip.

Getting ready for your first trip

Some people feel apprehensive about any travel. In that case it's best to start with short trips. Go downtown, to a mall or to the grocery store, until these short trips feel routine. Then plan an overnight trip, even if you go somewhere close to home. Staying elsewhere overnight can help improve your confidence in traveling.

Pouch considerations

Even if you're going for a very short distance, it's a good idea to keep an extra pouching system and supplies in the glove compartment or in a small travel kit. If you're on a short trip but are delayed by traffic or by an impromptu stop, you'll always have what you need to change the pouch, if needed. If you're on a longer trip, make sure to plan extra time to stop and change the pouch as often as needed. However your supplies should be stored in a cool place. Don't leave your ostomy products in the car for long periods during hot weather, since the heat may damage the barrier adhesive.

Preparing for a longer trip

People often feel more secure having all the supplies they'll need for the duration of their trip. In some situations it's absolutely necessary – when traveling in rural areas, by cruise ship or to any location that could have few or no medical supply stores. Plan ahead for possible travel delays, too.

You might want to travel with zip-top plastic bags for used pouches, to avoid spilling or odor. In a public restroom or in a hotel room you can dispose of the used pouches in the wastebasket. If you feel self-conscious about leaving pouches in your hotel room wastebasket, use a trash can in a public space.

Tips for air travel

There is always a risk that checked luggage will reach your destination late, or not at all. It is important to pack all of your supplies, if possible, in your carry-on luggage. Consider carrying travel "packs" on the plane as well. Put all of the supplies you'll need for a pouch system change in a zip-top plastic bag. That will make it easier to go to the restroom with the supplies you need, and allows you to throw away the pouch in the plastic bag. If you have a colostomy, you may want to try using a closed-end pouch when traveling on a plane. It can be easier to throw away a used pouch instead of emptying it.

Drink fluids to counteract the effects of dehydration and jet lag. A glass of water or fruit juice every hour will reduce the risk of dehydration. Avoid gas-producing foods and liquids on the plane. You may also want to use a pouch with a filter to decrease gas build-up.

Airport security screening

Empty your pouch prior to entering the security area and boarding the plane. This will help take away anxiety about pouch filling or pressure. It's a good idea to pre-cut all of your barriers at home, since some airports may not allow scissors in your carry-on. Even though the U.S. Transportation Security Administration (TSA) allows an exception for "ostomy scissors," this applies only to flights departing the United States. Airport rules can vary from country to country, and airport to airport. So if you do take scissors, keep them in your checked luggage. For the latest information, check the TSA website (www.tsa.gov) for updates.

All airport screening must be conducted in a way that treats the passenger with courtesy, dignity and respect. If the security staff need to do a hands-on pat-down check, you can ask that it be done in a private area. You might find it helpful to carry one or two documents with you. One is a letter from your doctor stating that you have an ostomy. The letter should also include the contact information for your primary care doctor and your ostomy doctor. The second document is the United Ostomy Associations of America (UOAA) Travel Communication Card. You can print the card from the UOAA website (www.ostomy.org). The card offers information about the surgery and the supplies you're carrying.

Additional thoughts

You can find more tips on travel by going to the United Ostomy Associations of America (UOAA) website: www.ostomy.org. It's important that you don't let concerns about your ostomy stop you from traveling where you want to go – whether to a neighboring state or across the globe. If you plan ahead you can do all of the activities that interest you. Enjoy yourself, and travel safe.

If you have any questions regarding stoma care or ostomy pouching systems, please contact your Coloplast Consumer Care Advisor at 1-877-858-2626.

Reach Out and Get Connected

In this article:

- You've come a long way
- Consider a support group
- Helping others
- Dealing with doubt

It has been many months since you had your ostomy surgery. You probably didn't realize then how much you would learn over several months – and how well you would adjust to this change to your body. Here are a few more things to consider. They may help you as you continue learning and continue feeling more comfortable with your body.

You've come a long way

Sometimes we don't recognize how much we can accomplish in a fairly short period of time. In the first year or so after your surgery you have become skilled at pouch changes. You made decisions regarding whom to tell about your ostomy and what to say. You've learned more about how your body works and how to care for your skin. You've probably figured out which foods work well for you and which ones to avoid. You've probably also resumed intimacy with a partner, become more comfortable with socializing, and possibly traveling too.

Maybe most important of all, you've learned to deal with changes in a very private part of your life. So give yourself credit for all of the ways you've adapted gracefully to these changes.

Consider a support group

You may feel that your anxiety level has gone done over time following your surgery, but you probably still deal with some amount of it today. First, realize that any anxiety you still feel is due to a significant life change. Second, it's very helpful to be thinking about other steps you might take to reduce anxiety and stress. Ignoring stress can potentially lead to other health problems such as headaches, insomnia or depression.

Many people find it helpful to go to support group meetings. Whether you go often or just once in a while, it can be a good chance to learn more and to connect with others who have the same questions you do. The ability to learn more is a big draw for support groups. If there is one certainty in life, it's that we enrich our lives if we keep learning. It's helpful to recognize that you're not the only one who's wondering about certain issues. The answers to questions that never occurred to you can offer insights that might benefit your life.

Helping others

If you are wondering if there is more you can do to help others, a good person to ask is your Wound, Ostomy, Continence (WOC) Nurse. She or he may have good suggestions about how you might direct your energies in ways that help others.

When we go from needing help to offering help it's encouraging to see our growth. A great example is Ramona, who had a colostomy from colon cancer a number of years ago. In the days leading up to the surgery, she was fearful about the surgery and very worried that people would be able to see her ostomy pouch, or notice its odor. Then a fashionably dressed woman visited her at the hospital and invited her to a support group meeting.

Following the woman's visit, Ramona said, "Hey, if she can do it, I can do it." Ramona, who then became active in her ostomy support group, would tell others, "There is life out there, and you can live it."[1]

Dealing with doubt

Like it says in an article on ostomies: "Our toughest critics are ourselves. An ostomy does not change who we are ... This is a time to step back and look at the big picture. What are the things I have control over? What is beyond our control?"

The author went on to say, "Examining what we can do to brighten our lives a little each day can have a tremendous impact on optimizing the quality of our lives ... It is the little things that add up to make a big difference in our lives and those we care about.[1,2]

Additional thoughts

There are many resources and organizations available to help you with information, advice and support. Use the contact information below to find out about a support group or to get other types of help.

FOR INFORMATION AND REFERRALS TO LOCAL SUPPORT GROUPS:

United Ostomy Associations of America, Inc.
(UOAA) 1-800-826-0826 www.ostomy.org

FOR INFORMATION AND LOCAL REFERRALS FOR OSTOMY NURSE SPECIALISTS:

Wound, Ostomy, Continence Nurses Society
(WOCN)1-888-224-9626 www.wocn.org

For other useful information:
American Cancer Society
1-800-ACS-2345 www.cancer.org

Crohn's and Colitis Foundation of America, Inc.
(CCFA) 1-800-932-2423 www.ccfa.org

Coloplast Consumer Care Team
1-877-858-2656

References:

1. Patty McCormac. "Coping with change." North County Times – Californian. Nov 11, 2007
2. Paula Erwin-Toth, MSN, RN, ET, CWOCN, CNS. "Living with an Ostomy: Quality of Life." Ostomy Wound Management, Vol. 50, September 2004.

General Medicare Guidelines for Ostomy Care

In this article:

- Hospital and doctors' fees
- Ostomy supply coverage
- Number of supplies covered
- General Medicare guidelines

As you may know, Medicare is a federal insurance program. It covers people over age 65 and younger people (under age 65) who have certain disabilities. If you have Medicare insurance, here is some general information about ostomy-related coverage. You will always have a need for regular doctors' visits for ostomy supplies, and it's helpful to know what is covered by your Medicare insurance.

Hospital and doctors' fees

Everyone* over age 65 is entitled to Medicare Part A coverage. Part A is hospital insurance coverage. It covers hospital inpatient care and care in skilled nursing homes (but not long-term care). It also covers some home health care and hospice care. You usually don't pay a monthly premium for Part A coverage if you or your spouse paid Medicare taxes for at least 10 years while working.

Doctors' fees and outpatient care would fall under Medicare Part B, which is optional coverage. People who choose to receive Medicare Part B pay a monthly amount, or monthly premium, to get this insurance coverage. Part B helps cover eligible doctors' visits, lab tests and outpatient care. It also helps pay for supplies, including ostomy supplies, when they are medically necessary. After you pay the Part B deductible for the year, Medicare pays for 80% of the Medicare approved charges for your doctors' visits and supplies. You pay the other 20%. (Individuals may separately buy a supplemental insurance policy to help pay for this 20% of costs.)

Ostomy supply coverage

If you have Medicare Part B coverage, then your ostomy supplies are covered. (As noted above, Medicare pays 80% and you pay 20%.) You must have a prescription, signed and dated by your doctor, on file with your supplier. It is important to make sure that your supplier is enrolled in Medicare and has a Medicare supplier number. Otherwise your claim will not be paid by Medicare.

Before you order your ostomy supplies, ask the supplier if it is a participating supplier in the Medicare program. Participating suppliers must accept assignment. "Accept assignment" is a term that means the supplier agrees to accept the Medicare-approved amount. If your supplier accepts assignment, it can save you money. If your supplier does not accept assignment, you may have to pay for the entire bill, and then seek reimbursement from Medicare on your own.

Number of supplies covered

Medicare covers items that are usually thought to be medically necessary. The table below shows the maximum number of items that are usually medically necessary for some common ostomy products.

Questions? Please call your Care Advisor if you have any questions at 1-877-858-2656.

HCPCS	Description	Usual Maximum
A4357	Bedside drainage bag	2 each / month
A4362	Solid skin barrier 4x4	20 each / month
A4367	Ostomy belt	1 each / month
A4368	Ostomy pouch filter	** no maximum listed
A4369	Skin barrier, liquid, per ounce	2 ounces / month
A4371	Skin barrier, powder, per ounce	10 ounces / 6 months
A4373	Skin barrier with flange, convex	** no maximum listed
A4388	Ostomy drainable pouch with extended wear barrier	** no maximum listed
A4389	Ostomy drainable pouch with barrier, convex	** no maximum listed
A4394	Ostomy pouch liquid deodorant	8 ounces / month
A4404	Ostomy ring	10 each / month
A4405	Ostomy paste (non-pectin based)	4 ounces / month
A4406	Ostomy paste (pectin based)	4 ounces / month
A4407	Skin barrier with flange, extended wear, convex (4x4 inches or smaller)	** no maximum listed
A4409	Skin barrier with flange, extended wear (4x4 inches or smaller)	** no maximum listed
A4414	Skin barrier with flange, standard wear (4x4 inches or smaller)	20 each / month
A4415	Ostomy standard wear skin barrier greater than 4x4	20 each / month
A4416	Ostomy closed end pouch with filter	60 each / month
A4417	Ostomy closed end pouch with barrier, convex, filter, one-piece	60 each / month
A4419	Ostomy closed end pouch with filter on non-locking system	60 each / month
A4423	Ostomy closed end pouch for locking system, with filter	60 each / month
A4424	Ostomy drainable pouch with barrier, filter, one-piece	20 each / month
A4425	Ostomy drainable pouch for non-locking system, with filter	20 each / month
A4426	Ostomy drainable pouch for locking system, non-filter	20 each / month
A4427	Ostomy drainable pouch for locking system, with filter	20 each / month
A4433	Ostomy urinary pouch for locking system	20 each / month
A5055	Stoma cap	31 each / month
A5056	Ostomy drainable pouch with extended wear barrier, filter, one-piece	40 each / month
A5057	Ostomy drainable pouch with extended wear barrier, convex, filter, one-piece	40 each / month
A5061	Ostomy drainable pouch with barrier attached; one-piece	20 each / month
A5063	Ostomy drainable pouch with flange, non-filter	20 each / month
A5071	Urinary pouch with barrier	20 each / month
A5073	Urinary pouch for use on barrier with flange; two-piece	20 each / month
A5120	Skin barrier wipes or swab, each	150 each / 6 months

HCPCS refers to Healthcare Common Procedure Coding System. These Medicare code numbers are used by doctors and other health providers when they describe and bill for medical supplies.

* Those covered under Medicare are all U.S. citizens and lawfully admitted noncitizens who have lived here for at least five years.
** Medicare has not set a maximum number of supplies for this HCPCS code.

Planner/calendar

Schedule your pouch changes: Weeks 1-6

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1							
Week 2							
Week 3							
Week 4							
Week 5							
Week 6							

Notes:

Meet Amy, an ostomate

Amy was diagnosed with ulcerative colitis in 2007, at the age of 21. The disease progressed quickly and in 2010, she had emergency surgery to remove her colon, resulting in an ileostomy. During her time in the hospital, complications arose and Amy nearly lost her life. Her positive attitude and strong spirit helped her recover faster than expected. She was thankful not only to be alive but also to have her quality of life back.

How did you feel when you left the hospital?

When you go home, it's kind of like 'whoa.' No one is there anymore. You don't have people checking on you. You're by yourself. It's a little scary; it's a little intimidating.

What value did the Coloplast Care program provide to you?

Coloplast Consumer Care called me periodically. And I loved those calls - I looked forward to those calls. Even if I didn't call them, when they called me, any questions I had I asked them right away and they always helped me. I felt like someone still cared and that someone still remembered that I went through this ordeal. And that I wasn't alone. That's a big deal as a patient because you leave that hospital where everyone's caring and you go home and you feel like 'hello, does anyone care anymore?'.

> "The interactions I had with Coloplast Consumer Care were really valuable. They made a difference in my life."

Consumer Care was a really big aid in my attitude and with the products. I wouldn't have known to try other products in the Coloplast brand. For instance, I didn't know about pre-cut barriers for the size of my stoma. This all came through talking to Consumer Care representatives.

How have Coloplast products impacted your life?

I truly believe that Coloplast products have made my life with an ileostomy very easy. If the products weren't so easy to handle, and change, and purchase and use, I might have a whole different approach to how I live with an ileostomy.

I wouldn't have the life I have without the Coloplast Care program and Coloplast products. My life was given back to me!

Some final comments from Amy

I think the biggest piece of advice that one can receive after surgery is to accept it, and have a positive, uplifting, motivational attitude to go on with life. I think the faster you can decide that it's a good thing for you, the better off you'll be.

Although my ileostomy can be reversed, I have no intention of getting reconnected. I feel like I won the lottery because I have my life again. I honestly feel there's nothing I can't do. ■

The Coloplast story began back in 1954.

Elise Sørensen is a nurse. Her sister Thora has just had an ostomy operation and is afraid to go out, fearing that her stoma might leak in public. Listening to her sister's problems, Elise creates the world's first adhesive ostomy bag. A bag that does not leak, giving Thora – and thousands of people like her – the chance to return to their normal life.

A simple solution with great significance.

Today, our business includes ostomy care, urology and continence care and wound and skin care. But our way of doing business still follows Elise's example: we listen, we learn and we respond with products and services that make life easier for people with intimate healthcare needs.

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