Meeting Notes

May 12, 2020

Meeting via ZOOM

Guest: Dr. Tiffany Willard

Meeting began informally with a discussion of different methods of dealing with ostomy bags. Some people are using the Colo-Majic Ostomy Liners from Canada. US insurance doesn’t cover these useful bags, but they are available online in bulk. Some people use dog poop bags to dispose of them, instead of flushing them down the toilet.

Justus formally opened the meeting and introduced Dr. Tiffany Willard, colorectal surgeon at UC Health in Colorado Springs.

\*Dr. Willard always brings two interns with her, as she is an educator in her field. However, due to the State of Colorado regulations during the coronavirus pandemic, she is not allowed to work with students at this time.

Justus informed Dr. Willard that the PPOA has a new flyer that she can access online and print out to give to new ostomates so they can be connected to our support network.

Dr. Willard let us know that she is low on supplies for donation purposes. She is lacking in matching sets. She has a lot of wafers and a lot of bags but not a lot of matching sets. So if anyone can help her out, please contact her!

Dr. Willard has been doing colorectal surgery for 18 years, and the last four years that has been her exclusive focus. She is the 2nd busiest colorectal surgeon in Colorado. In addition, she is a national trainer, working with doctors around the country in this field.

In answer to a question many people have about hernias and the role that body weight plays, Dr. Willard said that weight gain does pose a high risk for hernias. The abdominal wall cannot stretch to support weight, so it tears. This is also a risk during pregnancy. Ostomies are holes, and weight gain with ostomy can cause hernias. Laparoscopic procedures are also holes, and even though they’re tiny, they can result in hernias. Hernias can result from scars from surgery. Many of us have scars near our ostomies, and that’s a risk for hernias. Regular exercise, especially core strengthening, can prevent hernias, but ostomates tend to be concerned because many of us have had hernias already. If they were repaired with the mesh procedure (also called Sugarbaker), chances are good that the abdominal wall with strengthen and not pose any further risk. If someone has a hernia that is on the ostomy, though, there is a risk of reoccurrence.

Justus related his experience with Convatec’s MyPlus Program, which doesn’t require members to use their products. They accept everyone and it’s a good support network for people who have further questions about things like hernias, or anything related to ostomies.

Question about rashes came up, with one member relating they’ve tried many different remedies to cure a rash around the stoma. Dr. Willard informed the group that most rashes around the stoma are fungal, and can be cured with an anti-fungal topical medication, or one in pill form. People experiencing ongoing rashes should consult with either their primary care physician or a wound care clinic.

Question about stinging around the stoma came up, which was more of a urostomy issue. Dr. Willard suspects there is an opening in the skin, most likely, because urine on an open wound would sting. She recommended trying bacitracin or Neosporin because these remedies are cheap and easy and wouldn’t hurt in any way.

There was a long conversation about takedowns, also called reversals. This is a complicated topic, as there are many factors involved depending on the type of ostomy and the reasons for getting the ostomy. We’ve talked about this during meetings. It is considered to be major surgery requiring several days of recovery afterwards, and weeks of returning to normal bowel function. Dr. Willard said that half the people who get the J-pouch want the stoma back again later.

Nowadays with COVID posing unpredictable and serious medical problems, Dr. Willard cautioned us all to stay healthy not only because having a stoma puts us at risk, but our conditions and diagnoses put us at risk. If hospitals become overwhelmed, they enact policies which privilege people who don’t have preexisting conditions.

We ended the meeting after that cheerful bit and got Dr. Willard’s contact information. She is happy to talk to anyone who has medical issues related to their stoma.

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