

**Gold Coast Ostomy Association Seminar**  
**Saturday 9<sup>th</sup> March 2013**  
**Southport Sharks Club**  
*By Helen Ebzery (Secretary)*

Karen (Treasurer of YOU Inc) and I arrived at Tullamarine Airport on Friday 8<sup>th</sup> March to travel to the Gold Coast (Q'ld) to attend a seminar held by the Gold Coast Association. We were both very fortunate enough to be sponsored by YOU Inc and were both looking forward to sharing the word of YOU, where we could. Our plane departed 1 hour late due to some technical difficulty however I felt as long as they rectified it on terra firma and it still had the necessary engines and wings, I was fine with that! We had booked accommodation in Southport which was around 15-20 minutes from the Conference Centre and arrived there around 3pm.

We arrived at the Conference on Saturday morning at approximately 8.30 and found a surprising amount of people in attendance, approximately 230 I was told, which was fantastic. I would say from a show of hands approximately ¼ of them were ostomates, others being STNS, family, doctors and volunteers from Associations.

What we learned.....

We arrived in time to hear Peter McQueen (ACSA President) giving an overview of how the Associations operate.....

- There are 21 Associations Australia wide all operated by volunteers however a few do have paid workers.
- The Associations are funded by memberships and fund raising.
- There are approximately 40,000 ostomates Australia wide.
- Stoma appliance scheme began in 1962 with skin care products through the PBS and then due to ostomates having terrible skin care problems a working party was set up in 1973 starting up a scheme for products for the ostomates.
- In October 1975 it began and Repatriation moved onto the scheme in 1990.
- There are 2000 products on the scheme with an annual cost to the Government of \$80,000,000 – the scheme is often reviewed by the government and there are always issues facing Associations with regards to meeting new and very increasing administration and legal issues due to being “Not for Profit” organizations.
- Members can play a role in saving (the Government wants to save another \$14,000,000) therefore we all need to be very mindful of how we use our products i.e. do not store / order an excessive amount, people have been known to change their drainable bags instead of emptying them etc.
- The Government expects value for money and is therefore happy to fund the scheme as long as we are all thoughtful in how we use the products.
- Associations assist people overseas by sending products to 3<sup>rd</sup> world countries where supplies are few and far between and very much appreciated.

## Guest Speakers

### Margaret Allan – Nutritionist, specializing in Stomal nutrition



### Dr Mark Doudle - Colorectal Surgeon



- Dr Doudle stated that stomas have been described as long ago as the Bible.
- In the early years (1888) rods in the stoma were used to help “firm” the stomas.
- Brooke’s ileostomy was formed in the 1950’s.

### Professor Elie Bokey – Foundation Professor of Surgery and colon and rectal surgery, Clinical Dean Liverpool and an STN



- Professor Bokey told of how Dr Brian Brookes who worked at St Georges Hospital in London, fashioned ileostomies properly as prior to him Doctors were fashioning “blockages” i.e. the stoma was pulled out too far, causing it to have air around it and therefore shrivel up and block. Dr Brian Brookes decided by turning the intestine inside out and exposing the mucosa to the air, meant it could deal with the air instead of the outside of the bowel being exposed which caused it to shrivel.
- Professor Bokey was trained by Rupert Turnbull who discovered karaya gum use for templates / flanges.
- Professor Bokey also worked for quite some time on J pouch surgery in London.
- Norma Gill founded the first Stomal Therapy group in the USA.
- He is also interested in the older “kock” pouch which is being reformed to perhaps one day help Ileostomates.

## **Elaine Lambie – National president of AASTN**



- There are 460 STN's nationwide.
- The 2015 AASTN conference is in conjunction with the Colorectal Care Conference.
- The role of STN's can be in anywhere from hospitals, Nursing Homes, Community or Ostomy Associations.

## **Bill Tyrell – STN since 1985**

- Ways to help patients – firstly, know the type of stoma i.e. urostomy, ileostomy etc.
- Site patient correctly however, sometimes due to emergency surgery this is not always possible.
- Good preparation of skin as skin care for ostomates is essential.
- Seals, pastes, powders, wipes, belts, hernia belts, filters, pouch cover are all relevant.
- Follow up of patient is always needed.

The conference also enabled us to view various new products on the market from Companies such as Dansac, Omniwell, Convatec, Coloplast and Hollister and being that I have worn the same appliance for the past 30 years literally, I thought mm maybe I'll try a new one but no, I haven't been game as yet, better the devil you know !

We also met ladies who have a business making "Ostomy underwear" call "Knightwear" ([knightwear.com.au](http://knightwear.com.au)) which is worth checking out if you prefer underwear with a materials pouch sewn into the inside, which secures your appliance.

It was a great opportunity to meet with other ostomates, some elderly and trying to cope with having to change their lifestyles due to various surgeries. One lady I met with a urostomy (only 7 months old) was telling me her husband always changes her bag and that she has NEVER changed it. She said he likes doing it for her. I thought well, that might not be for me but if it works for them that's great.

I find it interesting the way people cope having had similar surgeries with the same or similar outcomes i.e. ostomies and yet people can do things very differently from each other and I suppose THAT is what makes us individuals!