Vote of Confidence

Eliminating embarrassing gas and odor is easier than you think

Let's face it. Everybody has gas from time to time, but when it's trapped inside an ostomy pouch it adds a whole new dimension. It not only takes up space and is noticeable under clothing, but also can weaken the pouch seal. In the past, burping the pouch was the easiest solution, but that required a trip to the restroom. Luckily, the future of gas and odor control is here at last.

"An integrated filter continuously vents and deodorizes gas providing greater discretion," explains Joy Boarini, Sales Education Manager at Hollister. "Continued advances in technology are being applied to filters and are helping to make life more dignified for people with ostomies."

The new **AF300** Filter from Hollister (more details on this on Page 4) is an improvement over existing pouch filters. It is designed to help reduce pouch ballooning through enhanced venting of air while still providing a sense of security with excellent odor control. This innovative filter also provides liquid protection, allowing people with colostomies and ileostomies to bathe and swim with confidence.

If gas in the pouch is a concern, there are other things that can help. Some foods can cause odor and gas. If that's an issue for you, it may be a good idea to eat them in moderation. Some of these include beans, beer, broccoli, brussels sprouts, cabbage, eggs, fish, garlic and onions. Gas can also be the result of swallowing air, drinking carbonated beverages, smoking and chewing gum with your mouth open.

"Gas is a part of normal life, but for a person with an ostomy it offers new challenges," concludes Joy. "This new filter gives you more options and choices, but, as always, good eating habits, plenty of rest and a healthy lifestyle go a long way to reduce gas and give you that extra vote of confidence."

*Patent Pending.*
As Ride Director for Get Your Guts in Gear, The Ride for Crohn’s and Colitis, J.A. Pacitti has seen shifts in perception, attitude and self-esteem for all involved.

“It’s really a support group built around a bike ride,” explains J.A. “Once people have done it, they get the sense they can accomplish anything they set their minds to.”

J.A. has experienced this on a personal level, too. In 1998, increasing pain revealed Crohn’s disease, which necessitated an ileocolic resection. Having never heard of the disease, he hopped on the computer and found information and support on IBDsucks.com.

“I couldn’t believe that little kids were suffering with a disease that nobody talks about,” he added. “And I wanted to be a part of a group that was doing something about it.”

J.A. was among those who founded the IBD Quilt Project (Irritable Bowel Disease), and when it came to fundraising, J.A. grabbed what he knew best—his bike. J.A. and the first riders rode from New York City to Saratoga, N.Y. in three days and raised over $6,000.

After that, nothing could stop J.A., and Get Your Guts in Gear (GYGIG) was incorporated in August 2003. Twenty-seven riders mounted their bikes for the first official ride in June 2004 and raised $105,000 for empowerment, awareness and a cure for IBD. Personally, J.A. was shifting gears from lawyer to consultant and assumed a full-time role with the ride, which was a perfect fit.

Get Your Guts in Gear now travels through New York, the Seattle area and Texas, gaining momentum for the cause along the way. More than a dozen people with ostomies have ridden with GYGIG, some multiple times. J.A. encourages people of all physical abilities to participate in some way, not just those who can ride or crew.

“It’s all about how we can make you a part of this experience,” J.A. explains. “After surgery, it’s important to have a positive attitude and find a community that works for you—we hope to be that community.”
The first time I saw my ET nurse, I remember thinking how attractive she was with her hair all done up and makeup applied so beautifully. Somehow, that just didn’t make sense for a woman who worked around poop all day. She was elegant and refined and made it almost dignified to talk about these personal body habits.

“Do you have any questions?” she asked.

“Yes, I do,” I said hesitantly. “Where do the farts go?”

“Flatulence goes into the pouch,” she said calmly.

My mind was busy at work; “So flatulence must mean fart and pouch must mean bag.” That was my breaking point. The tears streamed down my face at the thought of farting in a bag the rest of my life. That was twelve years ago, but now I can see some good uses for them. Crowded restaurants, subways or theaters—any place a person might need some more space.

Why not use them as a nonviolent approach to ending wars? I propose we form “The Flatulence Brigade,” and brandish our own version of biological weapons. Homeland Security will surely take my advice and back this newest line of defense.

A bunch of innocent looking, Hawaiian shirt-wearing, American tourists with cameras would pass through airport security with our weapons in place. We’d then proceed to the hot spots, where people need dispersing without violence. At the count of three, we’d open our non-filtered pouches and let those pungent fumes into the air. “Silent, but deadly” would take on new meaning! But people wouldn’t die; they’d just get nose-stunned.

People would come out of hiding and surrender their weapons. It would be a cheap organic approach that would save nations from economic ruin. No lives would be lost, but nobody would know what hit them. We wouldn’t need the National Guard anymore. When the President sends in “The Flatulence Brigade,” wild college parties would disband, prison riots would cease and all would be well in the world. Heck, a gal can dream.

In 1980, Pat was a new ET who typically dressed in short skirts and three-inch spiked heels. Nervously, she had successfully finished teaching her first patient how to irrigate his colostomy when she turned around with the full bedpan in her hand and slipped. All that success flew everywhere, on her face, her hair, and her lab coat. She and her patient stared in shock and then burst out laughing. She donned some scrubs, cleaned up the best she could and went on with her day.

Pat says, “There’s nothing bad about poop or pee except when you can’t do it; that’s the only time it’s bad.” Being able to laugh at ourselves is half the battle, with or without a stoma. The first “Flatulence Brigade” will be meeting next week. Let me know if I can sign you up.

Brenda Elsagher is a national keynote speaker, ostomate of 12 years and author of If the Battle is Over, Why am I Still in Uniform? and I’d Like to Buy a Bowel Please! You can submit your funny or inspiring story for her next book, Bedpan Banter. Go to www.livingandlaughing.com for more details or to order Brenda’s books. She welcomes comments or questions about this column at 1.952.882.9882.

“It would be a cheap organic approach that would save nations from economic ruin.”
Announcements/What’s New

AF300 Ostomy Filter

Hollister is pleased to introduce the AF300* Ostomy Filter, a revolutionary new filter designed to greatly improve the quality of life for people with ostomies. How does it work? Two white high air flow membranes reduce gas build-up and ballooning, so your pouch is less visible under clothing. Continuous venting allows gas and air to escape unnoticed and a patent pending configuration decreases embarrassing odor release. A specially designed film barrier won’t let liquid in, and there is no need for a filter cover. This means you can confidently wear any New Image pouching system while bathing, swimming or taking part in other forms of an active lifestyle.

Want to try it?** Please call 1.800.323.4060 and select option 3 for a complimentary New Image Pouching System equipped with the AF300 Filter using Hollister Technology.

Chapter Profile

Albuquerque Looks to the Future

One of the oldest U.S. cities takes a new approach to support

Old and new merge dramatically in Albuquerque, New Mexico. The ancient Sandia Mountains loom behind an urban skyline. Like the city itself, the Ostomy Association of Albuquerque offers good old-fashioned support mixed with modern education. There’s something for everyone.

“We make sure that people with new ostomies know they’re not alone and that life goes on after having ostomy surgery,” explains Sue Mueller, President of the Association.

This personal brand of sensitivity has kept many members coming back for 35 years. Monthly support group meetings provide a round-robin forum for sharing experiences and asking questions. Quarterly educational meetings, led by WOC nurses and other professionals, cover up-to-date topics, including sexuality, ostomy 101 and aging with an ostomy. And every January, members kick back at a fiesta luncheon.

The Association casts its net for members with a new brochure that goes out to WOC nurses and physician’s offices. Their quarterly newsletter is chock full of useful information for new and seasoned members, and an upcoming blog will keep everyone connected.

“At the same time we want to reach out to people with new ostomies, frequently the baby boomers,” adds Sue. “The WW2 generation is wondering who will be providing care for their ostomies when they are no longer able to care for them themselves.”

In response to this need, the Association plans to launch an educational program for nurse’s aides about caring for people with ostomies. And there’s more to come as the future unfolds, needs change and new friends are made.
Filters have been a feature in closed pouches for a long time, but they have recently become much more popular in drainable pouches thanks to improved high performance technology. If a filter is not something you are familiar with or is something you tried in the past, they’re definitely worth a second look now. Here are a few frequently asked questions:

Q: How does a filter work?
A: Air in the pouch takes up space and adds to the profile of the pouch under clothing. A filter allows the air to escape. When the gas in the pouch gets to the filter, it travels through several layers. This allows the gas to be deodorized, but it also makes it difficult for liquid to get outside.

Q: Will the pouch break if too much gas builds up inside?
A: The pouches are really quite strong! The real risk for excessive gas build-up is that it can loosen the pouch seal, causing failure of the pouching system. Too much gas in the pouch also creates a more noticeable profile.

Q: Do I have to cover the filter when I shower or swim?
A: Generally, a filter cover or sticker is required for showering or swimming. However, with the Hollister AF300 Filter, you do not need a filter cover or sticker.

Q: How long does a filter last?
A: It can vary, but generally a filter lasts approximately 2 days.

Q: Currently, I use a two-piece pouching system and just “burp” my pouch when I have gas. Isn’t that recommended?
A: Some people do this, but a filter integrated into the pouch offers several advantages. First, the filter eliminates odor when the gas is expelled. Second, it vents continuously so you do not need to wait for a build-up in the pouch. Lastly, the filter eliminates the need to go to the restroom to expel air from the pouch.

Q: Why doesn’t every pouch have a filter?
A: The amount of gas an individual has varies quite a bit. Some people have very little gas and do not need a filter. Others choose a filtered pouch for some situations and a non-filtered one for others. Always choose what best fits your lifestyle.

Ravat Bhutani is a team player at Hollister. However, for the past three years, his teammates weren’t across the hall but around the globe. Each skilled engineer and manufacturer was carefully chosen to help bring the new AF300 Ostomy Filter to life, which is featured on New Image Two-Piece pouching systems.

“Our goal was to help decrease the embarrassing moments and help people with ostomies live their lives without inhibitions,” explains Ravat.

The international team included Robert Tomey and Ravat in Libertyville, Illinois; Peter Bannon of Ballina, Ireland; and John Doucette from Stuarts Draft, Virginia. The men became daily pen pals in between frequent meetings in Germany.

Ravat, a bioengineer with nine years of experience in the medical device field, first took on the project when working in New Product Development. Initially, the team analyzed the three main filter concerns: air flow, deodorization and liquid protection and worked to tackle each one. The challenge was to design a filter that could strike the perfect balance between these critical customer needs. After countless experiments and feedback from clinicians and people with ostomies, the team developed a winner.

Soon after the AF300 filter was completed, Ravat became Global Product Manager, responsible for the marketing of new ostomy products globally.

“I helped build the AF300 filter and now my new role is to help promote it,” concluded Ravat. “I’m excited to bring this particular product to market because it will so greatly improve the quality of life for people with ostomies worldwide.”
Talking Points

Filtering Out High Costs

Deanna Eaves clears the air around filter reimbursement

With the introduction of the new AF300 Ostomy Filter from Hollister, more and more people are considering switching to a filtered pouch. As with any change, many questions come up—especially around cost and Medicare reimbursement. The following is an explanation of the ins and outs of Medicare reimbursement for filters and filtered pouches.

Pouches with filters definitely meet Medicare’s criteria (see callout box on the right). Per Medicare’s Ostomy Supplies Policy, “Codes for pouches with filters (e.g., A4416) describe pouches that have an opening which allows venting of trapped gas. They typically include materials such as charcoal to deodorize the vented gas. Code A4368 describes replacement filter material.”

Below is a table of the Medicare billing codes that are used when billing filtered ostomy products from Hollister.

<table>
<thead>
<tr>
<th>Billing Code</th>
<th>Description</th>
<th>Max per month</th>
<th>Medicare Fee Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>A4368</td>
<td>Ostomy Filter, any type</td>
<td>Each*</td>
<td>$0.26</td>
</tr>
<tr>
<td>A4416</td>
<td>Ostomy Pouch, Closed, with Barrier Attached, with Filter (1 Piece)</td>
<td>Each 60</td>
<td>$2.75</td>
</tr>
<tr>
<td>A4418</td>
<td>Ostomy Pouch, Closed, without Barrier Attached, with Filter (1 Piece)</td>
<td>Each 60</td>
<td>$1.81</td>
</tr>
<tr>
<td>A4419</td>
<td>Ostomy Pouch, Closed; for use on Barrier with Non-Locking Flange, with Filter (2 Piece)</td>
<td>Each 60</td>
<td>$1.74</td>
</tr>
<tr>
<td>A4424</td>
<td>Ostomy Pouch, Drainable, with Barrier Attached, with Filter (1 Piece)</td>
<td>Each 20</td>
<td>$4.75</td>
</tr>
<tr>
<td>A4425</td>
<td>Ostomy Pouch, Drainable; for use on Barrier with Non-Locking Flange, with Filter (2 Piece)</td>
<td>Each 20</td>
<td>$3.58</td>
</tr>
</tbody>
</table>

*No published maximum quantity

As you can see, Medicare recognizes that having a filter in an ostomy pouch is very important to the psychological health of many individuals. They deem the filter as being reasonable and necessary and usually there is a higher fee schedule for the filtered product versus a similar pouch without a filter.

Hollister also recognizes the importance of a filter and that is why we have improved ours. Our products with the new and improved filter will use the same billing codes as before, so the reimbursement is already established. Why not try our new filter today?
Spain

Everyone is family when it comes to support, service and warmth

Spain is known for flamenco music, bullfights and lots of sunshine. But to love Spain is to love the warmth of her people. The Hollister team in Madrid wraps an extra layer of warmth around those they generously serve. It helps that the Madrid facility is small, run by only 36 dedicated employees.

“We are like a small family company, and can move quickly when we detect a problem,” explains Lucía Becerra, Ostomy Product Manager in Spain.

There are approximately 40,000 people with ostomies in Spain. Hollister gains over 7,000 new ostomy customers per year, including an international crowd drawn there for vacation or retirement. In fact, one of the local ostomy associations caters specifically to German and English speakers.

Spain has both public and private healthcare, and reimbursement for ostomy products is outstanding for all. Active workers pay a maximum of 10% for supplies. Products are 100% reimbursed for retirees, immigrants and the unemployed.

Lucía’s immediate Hollister family consists of one assistant and two ET nurses who offer support on the toll-free phone line. Because the government reimburses all ostomy pouches, Hollister is forbidden to approach people with ostomies directly, so contact is made through nurses, ostomy associations and foundations. Hollister provides a kit filled with samples and educational materials, and once the connection is made, individuals can call for support.

“We are like a small family company, and can move quickly when we detect a problem,” explains Lucía. “We are always looking for more options to help them improve their quality of life.”

Those living in small towns, where ET nurses are virtually non-existent, especially feel Hollister’s warmth. Lucía and her nurses attempt to offer solutions over the phone, or refer them to a pharmacist or specialist in a nearby bigger town. Hollister in Spain also provides in-depth training for ET nurses and holds focus groups when a new product comes on the market.

“The biggest difference between us and other companies is that we offer quality products as well as solutions and superior training,” added Lucía. “We are not selling shoes or cars, we are offering something very special.”
Announcements/What’s New

Secure Start Newsletter Needs You

The Secure Start Newsletter has brought you several jam-packed issues of inspiring stories, up-to-date information and educational opportunities. But now it’s time to hear from you. Please fill out the enclosed business reply card and tell us what you’re thinking. What could we do better? Are there additional topics that pique your interest? Please let us know.

Coming in 2008

Due to increasing web subscriptions, all four issues of the Secure Start Newsletter will be available online. The summer and winter issues will continue to come to you by mail as well. We look forward to continuing to serve you in the New Year.