UOAA United Ostomy Associations of America, Inc.
LINCOLN OSTOMY ASSOCIATION

FALL 2026 • Lincoln Ostomy Association

Sparrow



Nebraska Gov. Jim Pillen, far right, welcomed representatives of the Nebraska ostomy community including, from left, Joe Frey, LOA treasurer and owner of Triumph Home Health Supplies; John Stevens, LOA communications; WOCN Society President Chris Berke, APRN-NP; Nebraska Medicine Omaha, Amy Fairchild, LOA president.



STATE OF NEBRASKA

Proclamation

WHEREAS, *An ostomy is a type of surgery that creates an opening (stoma) in the abdomen that allows for the removal of bodily waste when a person has lost the normal function of digestive or urinary systems due to birth defects, colorectal cancer, bladder cancer, Crohn's disease, ulcerative colitis, and other medical conditions. They are also necessary in cases of severe abdominal or pelvic trauma resulting from accidents or from injuries sustained during military service. The bodily waste passes through the stoma into an ostomy 'pouch' on the outside of the body or in the case of continent diversion surgeries, an internal surgically created reservoir; and*

WHEREAS, *Approximately 725,000 to one million Americans have an ostomy, with approximately 100,000 new ostomy procedures performed each year; and*

WHEREAS, *Ostomy or continent diversion surgery can occur at any age and affects people from all cultural backgrounds; and*

WHEREAS, *The United States of America celebrates Ostomy Awareness Day every year on the first Saturday of October; and*

WHEREAS, *Nebraska is committed to increasing public understanding of "ostomy" to eventually help dispel the fear of those about to undergo this surgery, as well as the fear that confronts their families. This day can serve as a reminder to the American public that this is a lifesaving and life-restoring surgery; and*

WHEREAS, *Nebraska recognizes the need that public education and awareness is vital to ensure those who are living with an ostomy face no discrimination and are accepted as normal, healthy, individuals. Through education and awareness, we can erase the myths, stigma and embarrassment that are sometimes associated with having an ostomy; and*

WHEREAS, *Nebraska and other government and private sectors are deeply committed to the proper care and advancement of knowledge about bowel and urinary diversion surgery as a result of birth defects, disease, injury and other digestive disorders.*

NOW, THEREFORE, *I, Jim Pillen, Governor of the State of Nebraska, DO HEREBY PROCLAIM the 3rd day of October, 2026,*

OSTOMY AWARENESS DAY

in Nebraska, and I do hereby urge all citizens to take due note of this observance.

IN WITNESS WHEREOF, I have hereunto set my hand and cause the Great Seal of the State of Nebraska to be affixed this Twenty-First Day of October, in the year of our Lord Two Thousand Twenty-Six.

Attest:

Secretary of State

Governor

Ostomy recognition at State Capitol

A fun moment occurred during a Ostomy Awareness event at the Nebraska State Capital Building Oct. 22, when Governor Jim Pillen signed a proclamation and pronouced it "ost-oh-my!" day.

"We had to giggle a little," said Amy Fairchild, LOA president. "Actually this was a great chance to raise awareness and the governor was very gracious."

Ostomy Awareness Day was planned and coordinated by both Lincoln and Omaha Ostomy Support Groups to bring nurses, patient advocates, and ostomates together to demonstrate community strength and visibility to Nebraska lawmakers.

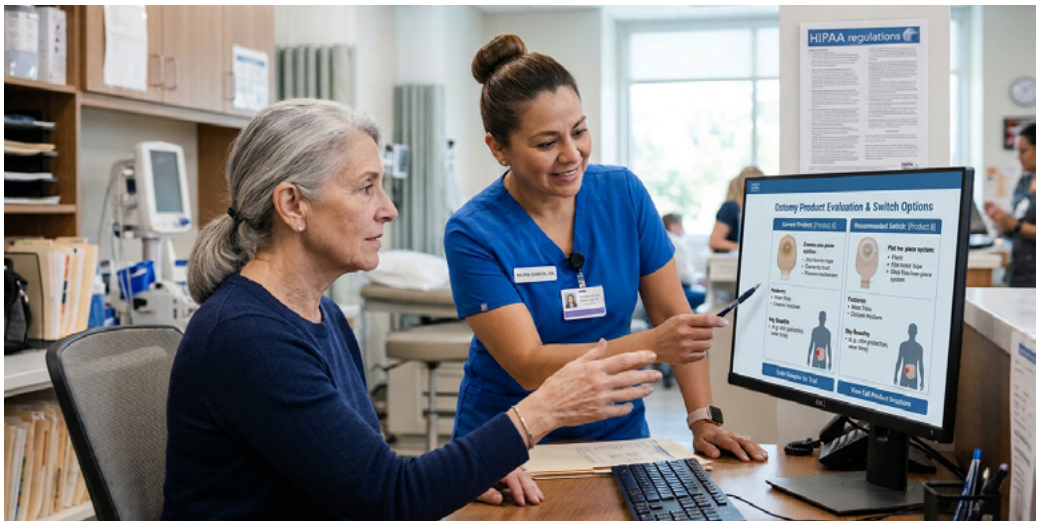
Attending the proclamation was Amy Fairchild, LOA president; Joe Frey, LOA treasurer and owner of Triumph Home Health Supplies; Chris Berke, WOCN society president; and John Stevens, LOA communications.

Why do people switch ostomy products?

People living with an ostomy often change pouches, skin barriers or brands over time. Research and patient surveys suggest the reasons usually have less to do with brand loyalty than with three basics: a secure seal, healthy skin around the stoma and the confidence to go about daily life.

Leakage and skin irritation top the list of concerns. In 2019, an international panel of ostomy nurses published guidelines in the *Journal of Wound, Ostomy and Continence Nursing*. The panel said a person's peristomal body profile — the shape of the abdomen around the stoma — should be assessed regularly, because a poor fit is a leading cause of leaks.

That profile can change. Weight gain or loss, a hernia, new creases or folds, or changes in the stoma's size or shape can all weaken a seal that once held. Output can change too. A product that worked right after surgery may not be the best match months or years later.



Problems can start early. A 2025 study in the *Journal Nursing Reports* reviewed the hospital records of 98 people with new ileostomies at UPMC in Pittsburgh. Leakage was recorded for 19% of them, and the rate rose from 17% to 27% over the course of their hospital stay. Skin complications around the stoma were documented in 25% of patients. The type of barrier also mattered: leaks were less common with an elastic, tapeless-border barrier than with a tape-border barrier. Coloplast, the maker of the tapeless barrier studied, funded the research.

Not every switch is the patient's choice. In a 2024 national online survey highlighted by the *United Ostomy*

IS YOUR OSTOMY SUPPLY COMPANY TRULY LOCAL?

Triumph Home Health Supplies: Lincoln's Ostomy Experts.

WE MAKE SWITCHING EASY

We simplify everything and personalize your service.

WE OPTIMIZE YOUR CARE

- Insurance & coverage optimization.
- Brand matching & expert selection.
- Personalized support & product specialists

HAVE YOU HEARD?

Transanal Irrigation (TAI) is a clinically proven, ***non-surgical*** method to help manage bowell function with confidence. Contact us to day to learn more!

TRIUMPH home health supplies

LINCOLN-OWNED & OPERATED
4540 N 56th Street
Lincoln, NE 68507
(402) 434-5080



The switch

continued from previous page

Associations of America, about half of more than 300 respondents said an insurer, supplier or other third party had switched their supplies for nonmedical reasons. Among those who were switched:

- 64% had a medical complication from the new product.
- 56% said the change hurt their ostomy care, in some cases leading to a doctor's visit or an emergency room trip.
- 25% faced higher health care or out-of-pocket costs.

UOAA has pushed insurers and policymakers to limit such switching. Ostomy nurses say a product change works best when it is deliberate rather than trial and error. Warning signs worth tracking include:

- leakage under the barrier
- redness, itching, burning or soreness
- a seal that fails when sitting, bending or exercising
- visible changes in body shape

An ostomy nurse can examine the stoma, the surrounding skin and the abdomen while the person is sitting and standing. The nurse can then help decide whether the problem lies with the product, the fit, the application technique or a skin condition that needs treatment. People trying a new product are encouraged to report back on comfort, leakage and wear time.

Repeated leaks and irritated skin are not something people need to accept, ostomy advocates say. Neither is switching products based on a brand name alone.

The Lincoln Ostomy Association encourages members to see a product change as a normal adjustment, not a failure. The best pouching system is the one that fits a person's body and lifestyle, and that can change over time.

Sources: Colwell JC et al., "International Consensus Results," Journal of Wound, Ostomy and Continence Nursing, 2019; Zamarripa C et al., "A Retrospective Chart Review of Ostomy Pouching Systems in New Ileostomy Patients: A Sub-Analysis," Nursing Reports, 2025; United Ostomy Associations of America, Ostomy Switching Findings, 2024.



Support your Lincoln Ostomy Association

Your Lincoln Ostomy Association provides quarterly meetings, this Sparrow newsletter, a website, peer support, and professional education. We also partner with local nursing schools to bring ostomy awareness to the next generation of nurses.

Everyone is invited to meetings, and those who choose to join as members help to support the efforts.

Dues are $20 annually and can be paid during any quarterly meeting. Please complete the form (QR code) so we can update our contact information for group members.

While you can join anytime throughout the year, dues cover Jan. 1 - Dec. 31. Any amount is appreciated to help with chapter operations and UOAA national dues.





UOAA United Ostomy Associations of America, Inc.

AFFILIATED SUPPORT GROUP

LINCOLN OSTOMY ASSOCIATION



Special Guest Panel

WITH:

CHRIS BERKE
MSN, APRN-NP, AGPCNP-C, CWOCN-AP
NEBRASKA MEDICINE WOUND & OSTOMY CLINIC

AMANDA PAPROCKI
RN, BSN, CWOCN
CHI OUTPATIENT WOUND OSTOMY CLINIC

RHONDA SOUCHEK
APRN, MSN, CWOCN
LINCOLN VA CLINIC

OSTOMATES
COLOSTOMY, ILEOSTOMY, UROSTOMY

SUNDAY, DECEMBER 6
2–4 PM

Aldersgate United Methodist Church
8320 South Street, Lincoln, NE

You are invited to attend

QUESTIONS:
lincolnostomy@gmail.com

Symptoms of UC and Crohn's after surgery

For many, ostomy surgery brings big relief. It dramatically reduces pain, improves quality of life, and makes everyday activities possible again. But surgery doesn't always make problems disappear.

What Causes Crohn's Disease and Ulcerative Colitis?

To understand why symptoms linger after surgery, it helps to know what causes inflammatory bowel disease (IBD) in the first place. Crohn's disease and ulcerative colitis (UC), modern research shows, are both are complex, systemic, immune-mediated conditions (Williams, 2026).

Scientists identified four primary causes:

1. Genetic Predisposition: Specific gene variants impair how the intestinal lining interacts with foreign substances and control baseline immune responses.

2. Gut Microbiome Dysbiosis: An imbalance in microbial diversity disrupts normal digestion and damages the intestinal epithelial barrier.

3. Immune System Dysregulation: The mucosal immune system mistakenly mounts a persistent, aggressive inflammatory response against normal gut microbes.

4. Environmental Triggers: External factors—including diet, stress, antibiotics, and smoking—can trigger or exacerbate systemic inflammatory pathways.

Because root causes stem from underlying genetic and immune responses, removing portions of the digestive tract addresses the primary tissue damage, but it does not alter the underlying immune issue.

Why Do Symptoms Persist After Ostomy Surgery?

Removing part of the bowel improves local digestive distress, but it does not completely deactivate systemic inflammatory pathways.

Inflammation frequently affects sites outside the gastrointestinal tract—most commonly the joints, skin, eyes, and liver (ResearchGate, 2026). Joint inflammation and skin lesions can persist or recur even after total colectomy or ileal resection (Dai, 2025; Sanders, 2025).

Surgery—especially involving ileum resections—can disrupt nutrient and fluid absorption, and alter salt processing.

An ostomy doesn't mean you should simply accept ongoing discomfort as part of your normal daily routine.

If you continue experiencing joint pain, skin issues, fatigue, or other symptoms, talk with your health care provider.

Lincoln Ostomy Association community supports shared experiences to navigate post-surgical life.

References

Dai, C. (2025). Extraintestinal manifestations in patients with ulcerative colitis post-restorative proctocolectomy and ileal pouch-anal anastomosis. Inflammatory Bowel Diseases, 31(7), 2051. https://doi.org/10.1093/ibd/izaf080

Mayorga, L. (2026). Distinct microbial mediators link diet to inflammation in Crohn's disease and ulcerative colitis. Gut, 0, 1–11. https://doi.org/10.1136/gut-jnl-2025-337480 Sanders, M. S. (2025). Facial pyoderma gangrenosum revealing inflammatory bowel disease after prior total colectomy. Cureus, 17(10), e95332. https://doi.org/10.7759/cureus.95332

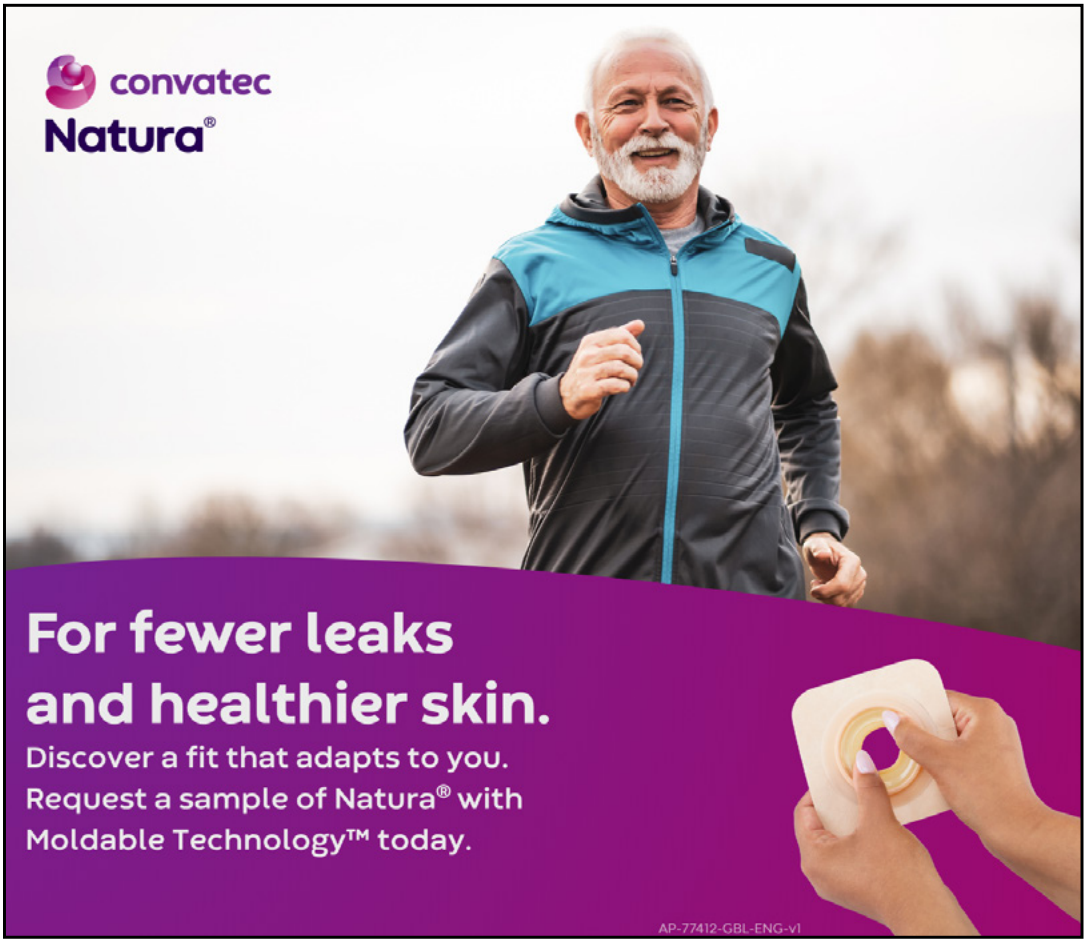
Williams, S. (2026). REACH: C—cause. *Journal of Crohn's and Colitis*, 20(Suppl 2)

Wu, H. (2026). Extraintestinal manifestations of inflammatory bowel disease: Metabolic and renal complica-











Optimism, football & ostomy

Optimism is a funny thing. Take my doctor, who says I need to maintain a positive attitude about my health challenges. Easy for him to say! But I've decided to treat my body like the Cornhuskers.

Sure, there are unexpected structural breakdowns, a total lack of fluid control under pressure, and every weekend brings a brand-new physical penalty. But no matter how painful the current half gets or how many disastrous turnovers occur, I refuse to give up. I just smile, put on my red shirt, and confidently declare: "Next season is definitely going to be our year!"

Riddle answer: Hospital!

Specialized ostomy care close to home in SE Nebraska

People in Lincoln, Beatrice and nearby towns who live with an ostomy have more places to go for specialized care. Hospitals across the region offer wound and ostomy services, often run by nurses with advanced certification.

CHI Health St. Elizabeth Ostomy Outpatient Clinic nurses are certified in wound, ostomy and continence care. They offer teaching before and after surgery, help with stomas and pouching systems, and continence evaluations. The clinic can be reached at 402-219-8770.

Bryan Health's Wound Clinic, at Bryan Medical Plaza on S. 48th Street, also lists ostomy care among its services. Its team includes vascular and foot surgeons and a certified wound, ostomy and continence nurse. A provider referral is required. Appointments are scheduled at 402-481-5121.

Beatrice Community Hospital and Health Center lists wound and ostomy services and runs a wound clinic. Farther away, Nebraska Medicine has a Wound/Ostomy Clinic at University Tower in Omaha (402-552-3932).

Local hospitals don't publish how many ostomy nurses they employ. Nationally, the Wound, Ostomy and Continence Nursing Certification Board says it certifies more than 10,000 registered nurses. Those nurses serve an estimated 725,000 to 1 million Americans with an ostomy, according to UOAA. Hospitals in Beatrice and Lincoln have recently hired for wound and ostomy nursing jobs, a sign of steady demand.

The biggest new trend is care that reaches patients at home. UOAA now offers a **Virtual Ostomy Clinic with The Wound Company**. For a one-time fee, adults get 30 days of video assessments and email and text support from certified ostomy nurses. Insurance does not cover the fee. Major ostomy product makers also run free nurse support lines for their customers. These options can help people in rural areas, where the nearest specialist may be an hour or more away.

Members can search for a certified nurse with the "Find a WOC Nurse" tool at wocn.org. Services and referral rules change, so it's best to call a clinic before visiting.

Members should know they don't have to manage leaks, skin problems or supply questions alone.

Sources:
CHI Health St. Elizabeth Ostomy Clinic
Bryan Health Wound & Ostomy Clinic
Beatrice Community Hospital
Nebraska Medicine Wound/Ostomy
WOCN Midwest
UOAA Virtual Ostomy Clinic
UOAA Find an Ostomy Clinic

Gastroenterology Specialties P.C.
4545 R Street
Lincoln, NE 68503

The physicians and staff of *Gastroenterology Specialties* and *Lincoln Endoscopy Center* specialize in the diagnosis and treatment of disorders of the esophagus, stomach, intestines, gallbladder, liver and pancreas; including colon cancer, irritable bowel syndrome, acid reflux, liver disease, Crohn's Disease and more.

Stop in, give us a call, or visit our website! We're here for all your digestive needs!

www.gidocs.net 402-465-4545



UOAA United Ostomy Associations of America, Inc.

LINCOLN OSTOMY ASSOCIATION

President	Amy 620-341-3811
Secretary	Beverly 402-525-9271
Communications	John 402-310-3496
Treasurer	Joe Frey
Director	Rhonda Souchek
Director	Jacques Izard
Director	Tera Norris

Lincoln Ostomy Home

LOA welcomes calls from ostomates, especially new people, with questions on everything from, “how do I shower?” to “what about clothes?” Start with an email lincolnostomy@gmail.com

Meetings (Let’s meet, shall we?)

In person meetings are at a church at 8230 South St., starting at 2 p.m. updates at ostomynebraska.com/lincoln



Contact, Advertise

Contact or visit LOA to learn more about support group meetings, ostomy products and educational opportunities. Sparrow is a quarterly publication for the Lincoln Ostomy Association. If you’d like to advertise or to submit an article, email lincolnostomy@gmail.com

Ostomy Nurse Contacts

LOA board
Rhonda R. Souchek, RN BSN CWOCN
Beatrice Community Hospital
Makayla Wiese, APRN, CWOCN
Bryan Medical Center 402-481-2018
Cindy Skinner RN, BSN, CWOCN
CHI Health St. Elizabeth
Nicole Carmine, RN BSN, CWOCN
Amanda Paprocki, RN, BSN, CWOCN

Website
ostomynebraska.com/lincoln
Email
lincolnostomy@gmail.com

Lincoln Ostomy Association Sparrow
3553 N 89th St
Lincoln, NE 68507
lincolnostomy@gmail.com

Free supplies at LOA meetings

Need more reasons to join LOA?

Donation table: At each quarterly meeting, members can take unused ostomy products for free, as “a peer-to-peer exchange.”
Samples: Supplier representatives sometimes send samples to members.
Local option: Supplies can also be donated to HELP Equipment, 8522 Park Drive in Omaha, open Monday through Friday.

Don’t do this path alone, find LOA



Lincoln Ostomy Association provides a friendly, confidential environment for ostomates to gather, learn, and meet others facing similar challenges. LOA plays a vital role in the emotional well-being of those with ostomies.

Member Amy said besides LOA, support at home was key. “My husband was my biggest support, just letting me be angry or sad when I needed to be.”

A UOAA survey asked those with ostomies what were their top struggles after surgery and more than 400 respondents revealed lack of emotional support as one of their top 3 concerns.

Findings confirm the challenge:

> 60% of surveyed ostomates did not receive resources to organizations like LOA which supports and advocates for ostomy patients.

> 68% never received support group information

> 70% were not given an opportunity to talk with someone who has been through an ostomy surgery.

One LOA member said support, for her, started with ostomy nurses in the hospital. “I still remember my ET nurse at the hospital. She was my guiding light. She boosted my sagging spirit,” Sal said. “Her constant positivity made a huge difference in those early days.”