



Ostomy Exercise

Just because you're living with an ostomy doesn't mean you're ineligible for a jaunt through Pioneers Park or a day trip to beautiful Beatrice. For some, the idea of exercise can seem intimidating. You might worry whether you'll injure yourself, damage your stoma, or have a leak. Or! Perhaps the surgery has opened a plethora of exercise possibilities.

Exercise Matters

Post-surgery, doctors usually say take it easy. But once you get a green light, stepping up activity brings big benefits. Exercise helps with recovery and improves mental and physical well-being like a healthy weight, stronger muscles, improved circulation, and, mental health benefits.

The Journey Back

According to UOAA, the first couple weeks after surgery, aim for 15 to 20 minutes of walking at least two or three times daily, if your doctor approves. Holmes Lake's paved trail is perfect for this – it's flat, well-maintained,

and has benches for rest.

Simple exercises at home

Arm raises: Sit up straight and slowly raise one arm overhead while engaging your pelvic floor muscles. These are the muscles you use to hold back urine.



Pelvic tilts: Lie on your back with knees bent, then slowly curl your lower back slightly off the floor, starting from the base of your spine.



Leg lifts: On your back, hold your pelvic floor firm as you bring one knee up to form a right angle. Wait 8-12 weeks after surgery before trying this one.



Knee rolls: Lying flat with arms out to your sides and legs bent, gently roll both knees partway to one side while tightening your pelvic floor.





Special message from your
LOA President Amy Fairchild

My journey to exercise and wellness

After surgery, I was determined that my ostomy wouldn't hold me back from doing what I wanted to do (no matter how slow the process).

I enjoyed walking and running prior to surgery, and those were forms of exercise I got back into soon after surgery. It was one of the best forms of stress relief in the early days post-surgery when the ostomy learning curve can really hit you hard.

As I learned more about my new body, I decided it was valuable to start some kind of strength training, something I have always disliked and stayed away from (although now

I know I avoided it more because I didn't know how to start rather than because I didn't like it). I realized that keeping my body strong, my core especially, was going to be good for me both now and as I aged.

I sought help, wanting someone knowledgeable to take my questions to rather than just guessing on my own. Having a personal trainer gave me confidence that I was doing the exercises correctly and safely.

Best of all, I was fortunate to find someone, Jennifer (pg 8) who had experience with ostomies and willingly did some research in order to help me. She made sure everything was comfortable and safe, and made

adjustments to the routine based on my feedback.

I started small with body weight routines and only doing my exercises 1-2 times per week, then progressed to gradually adding more weight. And something unexpected happened. First of all, I found that I love doing the exercises. It's hard work but I feel great afterwards.

But most of all, it has benefited my mind just as much as my physical health. I have more confidence and a healthier body image. Even more, accomplishing one thing I've never done before with an ostomy gives me confidence to branch out and try other new things too.

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Advanced hydration showing promise

Exercise is important, but for ostomates, hydration is critical.

Recent developments in oral re-hydration technology are offering new options.

Friend of Lincoln Ostomy Association, H2ORS, offers an oral rehydration solution based on decades of World Health Organization research. It brings advancements to hydration challenges ostomates face.

Oral hydration technology works through the sodium-glucose co-transport system, where proteins in the small intestine instantly transport sodium and glucose across the intestinal wall in precise ratios.

This creates an osmotic pull that enables near-instantaneous absorption of fluids and electrolytes directly into the blood. Unlike other beverages that are absorbed in the colon, oral rehydration solutions are uniquely absorbed in the

jejunum, making them far more efficient.

Clinical research has demonstrated the effectiveness of this approach. In a large-scale study involving over 20,000 patients with moderate to severe dehydration, researchers found that oral rehydration solutions could successfully replace intravenous therapy in 71% of moderately dehydrated cases while maintaining identical mortality rates.



By Chris Shaw, H2ORS

The treatment proved significantly more cost-effective than traditional intravenous approaches.

Patients produced greater urine volumes, indicating better fluid processing and kidney function.

The formulation differs significantly from commercial sports drinks. While typical sports beverages contain high sugar content and minimal electrolytes, medical-grade oral rehydration solutions maintain low osmolality with clinically significant electrolyte replacement.

This combination allows the solution to remain in the bloodstream longer while providing rapid gastric emptying.

For individuals with ostomies or other medical conditions that affect fluid balance, dehydration can have serious consequences including cognitive impairment, increased cardiovascular strain, and electrolyte imbalances.

The availability of advanced oral rehydration solutions provides an additional tool for managing these challenges, particularly for patients who may have difficulty with traditional intravenous therapy or need rapid rehydration in non-clinical settings.

Instantaneous absorption! Ostomates maximize fluid intake

What makes H2ORS ideal for exercise is precisely the same as it is for ostomates. Because H2ORS is absorbed at a near instantaneous rate in the jejunum, it means that meaningful amounts of fluids and electrolytes are delivered into the bloodstream rather than the slow process of absorption in the colon. Nobody likes a bloated feeling in their stomach which can happen with common sports drinks and the amount of sugar in many 'sports' drinks can actually cause fluids to be pulled out of your system to digest all those carbohydrates.

Exercise, whether in the gym, outdoors, or in the garden, can dehydrate ostomates faster than expected. H2ORS replenishes fluids and electrolytes as fast and effectively as IV hydration.

Beat the heat and avoid unplanned trips to the ER by staying hydrated with H2ORS!

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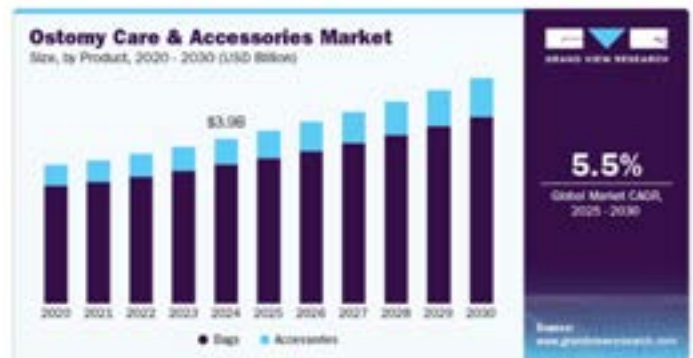
Yokes

What do you call a doctor who fixes websites? A URLologist!

What did the Rhonda, WOCN, say to the window? "You have a panel!"

Why did Makayla, APRN, CWOCN, become a chef? Because she had a good bedside manner and knew how to take someone's temperature!

Why did the X-ray technician break up with his girlfriend? He could see right through her!



Ostomy market growing

LOA oftens says you're not alone. Global markets prove it out. The global ostomy care market reached \$3.57 billion in 2023 and is projected to grow to \$6.01 billion by 2032, representing a 5.98% annual growth rate. This expansion reflects increasing demand driven by rising gastrointestinal diseases and improved home healthcare solutions.

Colorectal cancer ranks among the most commonly diagnosed cancers globally (WHO).

Product Breakdown (2023)

- > Ostomy bags: 83% market share - dominant due to essential waste collection function
 - > Products now feature odor-resistant materials, waterproof functionality, and advanced adhesives
 - > Colostomy: 43% market share - largest segment
 - > Home care: 45% market share - leading segment
- Driven by rising healthcare costs and patient preference for privacy. Government support for home healthcare initiatives reduces treatment costs

Technology Impact

Modern ostomy products incorporate skin-friendly materials, leak-proofing, and discreet designs. Patient feedback integration has significantly improved pouching systems and skin barriers, leading to better outcomes and higher adherence to care regimens.

Source: SNS Insider Market Research, 2024

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LeeAnne, CeraPlus™ Product User



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One-Piece Soft Convex Barrier

CUT-TO-FIT WITH ADHESIVE BORDER				
Ultra-Clear Stock No.	Baggie™ Stock No.	For Stomas Up To	Pouch Length	Box Qty
8964	8954	1" (25mm)	12" (30cm)	5
8968	8958	1-1/2" (38mm)	12" (30cm)	5
89611	89511	2-1/8" (55mm)	12" (30cm)	5

PRE-SIZED WITH ADHESIVE BORDER			
Baggie™ Stock No.	Barrier Opening	Pouch Length	Box Qty
8960	3/4" (19mm)	12" (30cm)	5
8961	7/8" (22mm)	12" (30cm)	5
8962	1" (25mm)	12" (30cm)	5
8963	1-1/8" (29mm)	12" (30cm)	5

HCPCS A5057
Key Features: CeraPlus™ Skin Barrier (extended wear), Integrated AF300™ Filter, Lock 'n Roll™ Microseal Closure

CUT-TO-FIT FULL HYDROCOLLOID BARRIER				
Ultra-Clear Stock No.	Baggie™ Stock No.	For Stomas Up To	Pouch Length	Box Qty
-	89518	1-1/2" (38mm)	12" (30cm)	5
8195411	8195111	2-1/8" (55mm)	12" (30cm)	5

HCPCS A5057
Key Features: CeraPlus™ Skin Barrier (extended wear), Integrated AF300™ Filter, Lock 'n Roll™ Microseal Closure

One-Piece Soft Convex Urostomy

CUT-TO-FIT WITH ADHESIVE BORDER				
Ultra-Clear Stock No.	For Stomas Up To	Pouch Length	Box Qty	
84134	1" (25mm)	9" (23cm)	5	
84138	1-1/2" (38mm)	9" (23cm)	5	
841311	2-1/8" (55mm)	9" (23cm)	5	

PRE-SIZED WITH ADHESIVE BORDER			
Baggie™ Stock No.	Barrier Opening	Pouch Length	Box Qty
8412	3/4" (19mm)	9" (23cm)	5
8413	7/8" (22mm)	9" (23cm)	5
8414	1" (25mm)	9" (23cm)	5
8415	1-1/8" (29mm)	9" (23cm)	5

HCPCS A4430
Key Features: CeraPlus™ Skin Barrier (extended wear), Anti-Reflex Valve, Multi-Chamber Design, Soft Streamlined Tap, Drain Valve Indicator, includes one adaptor

Two-Piece Soft Convex Skin Barriers with Integrated Floating Flange

CUT-TO-FIT WITH ADHESIVE BORDER			
Stock No.	Flange Size	For Stomas Up To	Box Qty
11702	1-3/4" (44mm)	1" (25mm)	5
11703	2-1/4" (57mm)	1-1/2" (38mm)	5
11704	2-3/4" (70mm)	2" (51mm)	5

PRE-SIZED WITH ADHESIVE BORDER			
Stock No.	Flange Size	Barrier Opening	Box Qty
11903	1-3/4" (44mm)	7/8" (22mm)	5
11904	1-3/4" (44mm)	1" (25mm)	5
11905	2-1/4" (57mm)	1-1/8" (29mm)	5
11906	2-1/4" (57mm)	1-1/4" (32mm)	5

HCPCS A4407
Key Features: CeraPlus™ Skin Barrier (extended wear), Flexible design, Floating Flange

SECURE START SERVICES AT A GLANCE

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- **Connects patients** with a supplier of their choice based on their insurance plan
- **WOC access available** for product questions

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DIGITAL

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Hold your device so the code appears in the viewfinder in the camera app, and when prompted tap the notification to open the link.

"The supportive connection to Secure Start services provides my patients with another resource after they leave the hospital. Many of my patients have commented on their sense of relief and their gratitude for this service."

—Theresa K., WOCN

Questions about enrollment? Call a Secure Start services coordinator at 888-808-7456

Prepare to exercise with an ostomy

You're ready to get active again, but want to make sure you're prepared for anything. Smart planning and a few simple precautions can boost your confidence when exercising with your ostomy.

Practical Tips for Active Living

- > Empty your ostomy bag before each workout – this prevents discomfort and reduces leak risk
- > Know where restrooms are located – most Lincoln parks have facilities, but scout them out beforehand
- > Time meals and workouts so your body produces less waste during activity
- > Test swimming pouches in your bathtub first to ensure they stay sealed



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Simplify your ostomy routine and protect against leaks with Convatec Moldable Technology™

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Reference: 1. Clinical Summary: Osmose Study, Multinational Evaluation of the Peristomal Condition in New Ostomates Using Moldable Skin Barriers. Maria Teresa Szewczyk, MD, PhD; Grazyna Majewska, RN, ETN; Mary V. Cabral, MS, FNP-BC, CWOCN- AP; and Karin Hölzel-Piontek, RN; The Effects of Using a Moldable Skin Barrier on Peristomal Skin Condition in Persons with an Ostomy; Results of a Prospective, Observational, Multinational Study, Ostomy Wound Management 2014;60(12):16-26.

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Sports and recreation with ostomy

Ready to get back out there and explore Nebraska's great outdoors?

Your doctor will likely recommend avoiding lifting anything heavier than 10 pounds for the first couple of months to prevent hernias. But if you feel good and have medical approval, here are activities our members have successfully returned to:

- > Swimming at local pools
- > Yoga and Pilates classes
- > Cycling the Trails
- > Running

If you weren't active before your surgery, consider working with a physical therapist or trainer to help you get started safely.

Weight lifting can strain healing tissues, so discuss using a binder or hernia prevention belt with your doctor or ostomy nurse before resuming this activity.

Traditional sit-ups and crunches can be uncomfortable with your ostomy bag and may increase hernia risk – stick with gentle alternatives like the pelvic tilts and knee rolls we discussed last month.

Lincoln Ostomy Association supports you. We've all been where you are, and we know that with proper preparation

and gradual progression, you can return to the activities you love – and maybe discover some new ones along the way.

Wound & Ostomy Services

at Beatrice Community Hospital with

Makayla Wiese

APRN, CWOCN

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Community Advisory Board for Research

Community Advisory Board for Research in the Context of Digestive Tract Resections (CABReCoDiTaR) has been created by Dr. Jacques Izard.

The board is composed of volunteers, patients with ostomy or short bowel disease, nurse, nutritionist and clinician. We will meet quarterly via Zoom.

The board will seek to validate research tools, help define research questions, and facilitate the recruitment of participants into studies.



If you would like to be considered,
send an email to
Dr. Izard - jizard@unmc.edu



Exercise your LOA benefits

The [Lincoln Ostomy Association](http://ostomynebraska.com/lincoln) provides critical tools that people with an ostomy need to build their lives. LOA, and this newsletter, Sparrow, is a link to latest supplies, treatments and a community of others who can provide support and experience.

UOAA suggests ostomates get in touch with other people with ostomies. You can ask questions that you might be embarrassed to ask your doctor or nurse.

<http://ostomynebraska.com/lincoln>



Jennifer Baehr, PTA, CPT, PCES, Pelvis Pro, CFNC, speaks to the Lincoln Ostomy Association. Article from Jennifer on page 8

Who did we miss? Come to the LOA meetings listed at ostomynebraska.com/lincoln and let us know!

DID YOU KNOW?

Students who attend LOA meetings often use the time for class credit! and will have more knowledge to help future ostomates. Win Win!



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Beatrice Ostomy Clinic opened May 6, 2019 with 4 patients. Now the clinic serves about 200 visits per month with one provider and 2 WTA nurses.



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 Communications John 402-310-3496

Lincoln Ostomy Home
 LOA welcomes calls from ostomates, especially new people, with questions on everything from, “how do I shower?” to “what about clothes?”

Meetings (Let’s meet, shall we?)
 In person meetings are at a church at 8230 South St., starting at 1:30 p.m. updates at ostomynebraska.com/lincoln

We kick off in August. Watch for details

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
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Unstoppable Core: Thriving after Ostomy

By Jennifer Baehr, PTA, CPT, PCES, Pelvis Pro, CFNC

Let’s get one thing straight: having an ostomy doesn’t mean you’re fragile. It means you’re a survivor! You’ve already pushed through something most people can’t even imagine—now it’s time to push for strength.

Your core isn’t gone. It’s waiting.

Whether you’re 25 or 75, it’s never too late to rebuild, reawaken, and reclaim your power. The core isn’t just abs—it’s your foundation. It supports your spine, protects your stoma, and fuels every movement you make. Training it after surgery isn’t a risk—it’s a return to your power!

Start smart. Controlled breathwork, gentle bracing, and slow, deliberate movements light the fire. From there?

Add resistance. Add challenge. Add whatever makes you feel alive.

No, you’re not “too old.” You’re not “too broken.” You’re just getting started.

This isn’t about bouncing back. It’s about powering forward.

And don’t let anyone feed you fear. You’re allowed to sweat. To lift. To punch. To plank. You can be strong with an ostomy. You can be fierce. And you can absolutely rebuild a core that feels unshakable.

Modify. Adapt. But never settle.

You didn’t go through all that to sit on the sidelines.

You’re built for more. You’re built to move.

And that fire in your gut? It’s still there. Let’s train it.

No, you’re not “too old.” You’re not “too broken.” You’re just getting started.”

-Jennifer Baehr

