



The IOA Regions reporting, through their presidents, in this issue of IOA TODAY are the the EUROPEAN OSTOMY ASSOCIATION (EOA); ASIAN OSTOMY ASSOCIATION (IOA); SOUTH PACIFIC OSTOMY ASSOCIATION (SPOA); NORTH AND CENTRAL AMERICA AND CARIBBEAN OSTOMY ASSOCIATION (NCACOA); SOUTH AMERICA OSTOMY ASSOCIATION (ALADO).



IOA President's Report

By Heinz Wolff

ioapresident@ostomyinternational.org

Dear friends, Time flies and it was only a short time ago that I wished you all a Happy New – Year, and here is spring again, for us up north and for the ones down South it is cooling off after a hot summer.

I am glad that I can report to you with a lot of satisfaction that things are going very well. The web site is doing a very good job and more and more are joining us, even if not all had an easy time at the beginning.

In March we had our second E.C. meeting in Paris, which was a hard working affair for all of the E.C. members, but we got a lot of work done.

I know that most of our members don't quite understand what it is all about, the best advice that I can give you is, ask your local organization to let you have a look at a copy of our minutes, they are 20 pages of hard work.

You will very soon start to get information for our next World Congress in Bangkok. Start saving now ! and be with us. I would like to remind the 20/40 group that this time we will all be together, all the info is on the web.

I wish you all peace and health in this crazy world we are in.

Heinz Wolff President

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Editors message

As of this issue there are **849 active subscribers**. This is an increase of nearly 500 since the first issue (January 2002). See country list on page 3. Please note that not all subscribers listed their country.

The next issue will be on or about July 31, 2002. The issue will cover the events of the up coming **WORLD OSTOMY DAY - 5 OCTOBER 2002**. If you have an article please submit them to the IOA Vice President: ioavicepresidentn@ostomyinternational.org. by 10 July 2002.

Internet and Website

Di Bracken, Vice President

At the Executive Council/Strategic Planning meeting held in Paris last month, the members of the Executive committee expressed their ongoing support for the work being done on the Website by the Webmaster. The first edition of IOA TODAY was well received and the decision was made to continue with the publication on a quarterly basis. I indicated that changes will be made to the way the newsletter is being distributed. Newsletter has changed to Portable Document Format (PDF). Adobe PDF files are compact and can be shared, viewed, navigated, and printed exactly as intended by anyone with free Adobe Acrobat® Reader® software. Over 300 millions free copies of Adobe Reader are being used around the world. In order to view this format one needs to download the FREE Adobe Acrobat Reader:

<http://www.adobe.com/products/acrobat/readstep2.html>

The second edition will be distributed electronically at the end of April.

Currently IOA TODAY is available to those signed up on the List Builder data base or those who request a copy from the Webmaster. The Executive Council indicated that they would like to see IOA TODAY available to all who logged on to the site and the following action was decided upon.

The next edition of IOA TODAY will be sent to all members of List Builder; as well it will automatically be sent to all members of the Executive, the contact office and all associations that have an e mail address. After the IOA TODAY has been out for a limited time, it will be posted on the Website for all who wish to read it.

The whole of the internet operation is organized by Stu Schaefer and I am in the position of being the liaison between the Webmaster and the IOA Executive Council. I provide the information for IOA TODAY and answer the questions that are generated through the Website. This is an excellent vehicle for the vice-president to assume as it gives the internet liaison an opportunity to get a feel as to what the regular individual is thinking of IOA.

The number of e – mails being received on our site is increasing and I am finding it difficult to keep up with responses to these items. Martha Vélez de Nieves, president of the NCACOA region has agreed to help me when we get really busy.

Left over business from the last meeting was the matter of advertising. There is definite interest in advertising on the Web. It was agreed that this needs to be done by letter over the signature of the president but if IOA is directly approached through the Website, the liaison and Web consultant will handle the matter. Concern was express re advertising on the Web as so much time is taken up with down loading ads.

I have relayed this concern to our Webmaster - Eastern Europe, South America and some of the areas in North America in regard to the costs associated with dial-up networking – still the only method available for much of the developing world.

The format of the new Discussion Forum has proved helpful in this regard as someone logging on can get directly to what interests them, rather than surfing through one site only containing a surfeit of material. There is little money available for young people and internet access is precious. Any ways that we can devise to minimize time will be greatly appreciated. We will keep this in mind when we start accepting advertising but we have to balance this with the need to raise money through advertising on the Website so that we can cover our Website costs and follow through on the ideas we have for its development.

Our Webmaster had supplied me with a number of statistics regarding the List Builder that were interesting to the Executive Council and I think they may be of interest to you as well. Members in List Builder come from 50 different countries with representation from all continents. Roughly 50% of List Builder members are American with Canadian and British following in positions two and three.

See details provided by the Webmaster.

There is also an interesting age span. To our knowledge the youngest of our subscribers are under 18 years. There are three age groupings that make up the bulk of the membership; between 40 – 49 years, 50 – 59 years and 60 +. However, there is a sound listing from the 30 – 39 age group so as you can see there is interest expressed from most age groupings. As you know, when signing on as a List Builder member, one is not required to give ones age and 28% of our subscribers do not give their age.

As you see in this edition of IOA TODAY, we have given you information regarding two ostomy related conferences – one in Canada and the other in the USA; both unfortunately at identical times so you cannot attend both. If you have a conference or an event that you would like to see included in the newsletter, do let me know. With people traveling around the world, it is possible that someone may be in your area and would like to participate.

I hope that you enjoy reading the reports from the individual regions of IOA. Thank you for your interest in the organization. Take good care of yourselves and stay well.

Di

11th IOA World Congress

October 26-30, 2003

Bangkok, Thailand

List Builder Stats

<u>Country</u>	<u>Subscribers</u>	<u>%</u>
1. Afghanistan	1	0.13%
2. Argentina	3	0.39%
3. Australia	19	2.47%
4. Belgium	3	0.39%
5. Brazil	6	0.78%
6. Canada	64	8.32%
7. China	3	0.39%
8. Czech Republic	4	0.52%
9. Denmark	9	1.17%
10. Dominican Republic	1	0.13%
11. Ecuador	1	0.13%
12. Finland	1	0.13%
13. France	4	0.52%
14. France, Metropolitan	1	0.13%
15. Germany	6	0.78%
16. Greece	3	0.39%
17. Hong Kong	1	0.13%
18. Hungary	1	0.13%
19. Iceland	1	0.13%
20. India	10	1.30%
21. Indonesia	1	0.13%
22. Iran (Islamic Republic of)	1	0.13%
23. Ireland	6	0.78%
24. Israel	4	0.52%
25. Italy	6	0.78%
26. Japan	11	1.43%
27. Korea, Republic of	1	0.13%
28. Lebanon	1	0.13%
29. Malaysia	5	0.65%
30. Mexico	3	0.39%
31. Nepal	1	0.13%
32. Netherlands	7	0.91%
33. New Zealand	6	0.78%
34. Norway	8	1.04%
35. Pakistan	1	0.13%
36. Panama	1	0.13%
37. Philippines	2	0.26%
38. Poland	3	0.39%
39. Portugal	5	0.65%
40. Puerto Rico	2	0.26%
41. Romania	1	0.13%
42. Saudi Arabia	2	0.26%
43. South Africa	3	0.39%
44. Spain	3	0.39%
45. Sri Lanka	1	0.13%
46. Sweden	7	0.91%
47. Taiwan	1	0.13%
48. Thailand	3	0.39%
49. Trinidad and Tobago	1	0.13%
50. Turkey	4	0.52%
51. United Kingdom	58	7.54%
52. United States Minor Outlying Islands	6	0.78%
53. United States of America	433	56.31%
54. Viet Nam	1	0.13%
55. Unanswered	28	3.64%

Please Note: These stats as of April 22, 2002

EUROPEAN OSTOMY ASSOCIATION

ACTIVITIES JULY 2001 - MARCH 2002

New Associations

Spain - Expatriate Ostomates of the Costa Blanca (associate member)

Organization of English speaking people settled in Spain, sent the application form, constitution and dues in December 2001.

Turkey- Turkish Ostomy Surgery Association

Sent application form and report (not a constitution) in September 2001. I have not been able to keep further contacts.

Ukraine

There exist only local organizations there. New organization was established in Odessa. The existing organizations (Kiev, Lvov and Odessa) promised to work towards founding a national association.

Other countries

I was contacted by people from Greece and Saudi Arabia, who offered the help with founding ostomate organizations in these countries.

Membership problems

Problems persist with keeping contacts with some associations (e.g. Algeria, Belarus, Spain, Portugal - APO, Yugoslavia (now Serbia and Montenegro)). The majority of these associations have not access to internet and thus probably also to updated addresses. I try to update the directory on the web page regularly, but updating by contact office is very slow and irregular. There is missing a new edition of the Handbook, it is not available to the new associations.

Several economically less strong associations are unable to pay membership dues. We asked for assistance with the payment the richer associations, but without any response. Again, it is difficult to contact these associations.

The question of the membership of Latvia is solved now. Their application is missing, but I have found the English translation of their constitution, which was submitted in 1996 and they paid already dues for the last two years.

Meetings

The 4th Meeting of Ostomates from Central and Eastern Europe will take place in Kaunas, Lithuania from May 31 to June 3, 2002. The Meeting is organised in parallel with the 7th Central European Congress of Coloproctology and Viscerosynthesis. Up to now delegates from ten Central and Eastern European associations have registered. It is envisaged that the Meeting will help to locate and discuss problems facing ostomates in this part of Europe. The Lithuanian Ostomate Association has found a local sponsor for this event.

The other proposed European meeting in the framework of an Advocacy Programme will be prepared by German ILCO. The date has not been agreed upon yet.

Information

The EOA Newsletters being published regularly. Two issues appeared in the last six months. Information about EOA appeared in IOA Today.

Vladimir Kleinwachter,

EOA President

SPOA REPORT March 2002

Greetings and good wishes to the IOA executive from the South Pacific Region, In 2001 Australia and New Zealand adopted the task of determining the most effective means of assisting a country each in our region. New Zealand has had some success with Fiji, but Australia after looking promising early has had no success at all, more details of both countries activities are set out below.

Australia

Australia has had little success in establishing any means of communication with any group of Ostomates or their careers in Papua New Guinea since the relocation of a surgeon in Port Moresby to a neighboring island. They are still exploring other avenues, and are hopeful of success.

There is currently an extensive review into the Stoma Appliance Scheme in Australia. The Department of Health have assured Ostomates of the continuation of the scheme where the appliances are fully subsidized. The review is to establish the best and most effective means of product distribution and Ostomate support systems. The findings of this review are expected to be made available in the first half of 2002.

Australia has adopted the project of establishing the International Benefit Fund as their project for World Ostomy Day 2002. The fund raising target is 50,000 Swiss Francs. The establishing of such a fund to assist Ostomates who are less fortunate than ourselves was put forward as a suggestion by the IOA president at our previous annual meeting. Other awareness activities will be pursued at a state level.

New Zealand

As reported previously. New Zealand is considering means of funding to enable a nurse with suitable qualifications from Fiji to undertake a distance education course. This would give her a working knowledge of Stoma care and equip her to enhance the clinical practice of other interested nurses and be of great benefit to Fijian Ostomates.

FNZS are fortunate to have been in contact with an oncology and palliative care nurse working in Suva. Her interest in the welfare of Fijian Ostomates involves her with the Fijian cancer Society and she has been helpful in her efforts to obtain data regarding the number of Ostomates.

Reported by Peter McQueen, Australia

AOA REGIONAL REPORT June 2001 to March 2002

1. IOA EC Meeting in Frankfurt, Germany

The IOA Executive Council met in Frankfurt, Germany, from Friday 20th July to Sunday 22nd July. All the members of the EC except the SPOA President, who was unable to come, were present. Linda Aukett, Editor of the Ostomy International Journal (OI) and the IOA webmaster Stuart Schaefer were also present to brief us on matters pertaining to the OI Journal, and to the new format of the IOA Forum respectively. A full two and a half day agenda was discussed, and many decisions were taken. Because of the tight meeting schedule, there was little time for social activities. However, on the Sunday afternoon, many of us took the opportunity of the free afternoon to go on a Rhine River Cruise. This was most interesting and a worthwhile experience for us.

2. New Ostomy Groups in AOA Region.

Since the last Report period (November 2000 to May 2001), new ostomy groups have been established in the following countries:

- a. Nepal – in Khatmandu and Bharatpur
- b. Bandung, Indonesia
- c. Tehran, Iran
- d. Ho Chi Minh City (Saigon), Vietnam
- e. Sri Lanka – Colombo
- f. Bangladesh – Dhaka
- g. Myanmar - Yangon

Of the above groups, Bandung is a branch of the Indonesia Ostomy Association (InOA), an Associate Member of AOA/IOA.

Iran has not yet joined AOA/IOA as they have not been able to find the funds to pay their Associate Member Dues. They are looking for a sponsor. B|Braun has sponsored or is sponsoring the following country associations as Associate Members of AOA/IOA: Vietnam, Nepal, Sri Lanka, Bangladesh and Myanmar.

Hollister is being approached to sponsor the dues of the Pakistan Ostomy Association which has been in existence for the past two years, but has yet to join the AOA/IOA as a member due to lack of funds to pay its membership dues.

Other groups are now in the process of formation in:

- * Denpasar, Bali, Soerabaya and other Indonesian cities as branches of the Indonesian Ostomy Association (InOA)
- * Hanoi and Hue in Vietnam as branches of the Vietnam Ostomy Association (VOA)

- * Ulan Batur, Mongolia – Hollister has promised to sponsor the Associate Membership dues for Mongolia for two years.
- * In various major cities in China under the umbrella of the China Ostomy Association.
- * In various cities in the Philippines under the umbrella of the Ostomy Association of the Philippines.
- * In the East Malaysian State of Sarawak, as a branch of the Stoma Care Society of Malaysia.

It is also hoped that more groups and new Ostomy Associations will soon be formed in Bhutan, Cambodia, Laos and North Korea.

3. The Japan Ostomy Association, Inc. (JOA) has, since August 6th 2001, set up its own homepage, in both Japanese and English. We would like to congratulate the JOA on this achievement, and we hope that many ostomates, especially those in Asia, will go to their homepage to read about their activities. The URL is:

<http://www.normanet.ne.jp/~JOA/eng>

The biennial AOA Newsletter, December 2001 edition, has been published in IOA TODAY for the thousands of Asian Ostomates who now have access to computers. We are very grateful to the IOA TODAY Editors Di Bracken, and webmaster Stuart Schaefer, for their assistance in making this possible. Future editions of the AOA Newsletter will also be published in IOA Today. The printed version will continue to be published twice a year.

4. The IOA Executive Council will be meeting in Paris from the 22nd to 24th of March 2002. B|Braun will host the EC Meeting, which will be at the Axel Hotel, Paris.

5. 7th AOA HOD Meeting

The 7th AOA House of Delegates' Meeting cum 4th AOA Conference will be held:
from 23 – 26 October 2002,
in Manila, the Philippines,
at the Century Park Hotel, Roxas Boulevard
Registration Fee: US\$50
Accommodation: US\$90 per night for single
US\$60 per night, per person
twin sharing inclusive of meals;
breakfast, lunch, dinner, am/pm
snack

For further information, contact:
 The Secretariat, 4AOA Conference / 7AOA HOD
 c/o Philippine Cancer Society,
 310 San Rafael Street, San Miguel
 P.O.Box 3066, 1005 MANILA, PHILIPPINES
 Tel/Fax: +63 2 = 734 2126
 Email: pcsi@uplink.com.ph

The AOA Coordinating Committee requests that those who intend to attend the HOD begin to make preparations to attend this important triennial Meeting from NOW. Only FULL Member Country Associations may propose or second nominations to the Coordinating Committee. Nominations for the posts of: President, Vice-President, Secretary/Treasurer, and CC Member should be sent in to the Secretary/Treasurer, Mr Ramakant Shah, email ramakantshah@usa.net, at least one FULL Calendar Month before the Meeting date, i.e. 23rd October 2002. Nominations should be duly signed by the proposer, seconder, and nominee to be valid.

All individual members of member ostomy associations are most welcome to attend the HOD Meeting. However, each FULL member Association is allowed to nominate TWO delegates to the HOD, and ONE of these two should be designated as the Voting Member. At the present time, AOA has only 8 FULL Members, namely: CHINA, HONG KONG, INDIA (OAI), JAPAN, KOREA, MALAYSIA, SINGAPORE, and THAILAND.

Associate Member Associations may each nominate ONE delegate who may participate in the debates at the HOD, but may not vote. All others may attend the HOD as observers, but shall not have a voice in the proceedings.

Official Notice of the HOD Meeting will be circulated to all member associations by the Secretary three months before the scheduled date of the meeting.

Sd. Dato' John David Cardosa
 President, Asian Ostomy Association

This AOA President's Report will be circulated to all AOA Member Associations after it has been presented to the IOA Executive Council in Paris.



Ostomy Club, Bharatpur Chapter taken at the BPKM Cancer Hospital.

NEW OSTOMY ASSOCIATION FORMED IN NEPAL
 Reported by John David Cardosa – President, AOA

AOA President, John Cardosa, visited the Himalayan country of Nepal recently, and was able to successfully inaugurate the new NEPAL OSTOMY ASSOCIATION there on February 26th 2002.

Together with the Working Committee which consisted of 13 Ostomates and Family Members of Ostomates, two doctors and a nursing sister who is a qualified ET, a preliminary constitution was roughed out. This constitution is now being refined with professional help, and will soon be submitted to the Nepalese authorities for approval to form the Nepal Ostomy as soon as possible. Although the person elected is not an ostomate himself, he is the nephew of an ostomate. His uncle was also present, and agreed to take over the reins as soon as the preliminary work of setting up the association is completed, but by the next Annual General Meeting at the latest. Cardosa insisted that the NOA should be run BY Ostomates FOR Ostomates, with the help of doctors, nurses and family members of Ostomates. This principle was agreed to by the 35 people present at the Inaugural Meeting at the Stoma Clinic of the PATAN Hospital in Khatmandu, the capital city of Nepal. There was great enthusiasm and excitement at the Meeting, The proceedings were translated by Ganga Lal Tuladhar, an ex-teacher turned politician, who was elected President.

A Pro-Tem Committee was elected as follows:

President: Mr Ganga Lal Tuladhar, (nephew of a prominent Nepali businessman ostomate)

Vice-President Mr Cipendra Niraula, (son of Ostomate who will get personally involved next year)

- | | |
|-----------|-------------------------------------|
| Secretary | Mr Macha Bhai Shakya – ostomate |
| Treasurer | Mr Guna Raj Bajracharya – ostomate |
| Committee | Bala Bahadur Shrestha – ostomate |
| | Sanjeet Rana Magar – ostomate |
| | Chandra Bahadur Malla – ostomate |
| | Kishor Joshi – ostomate |
| | Badri Prasad Adhikari – ostomate |
| | Ghindari Basnet – ostomate |
| | Krishna Narayan Shrestha – ostomate |
| | Chudamani Timalsina – ostomate |
| | Jhamak Niraula – ostomate |



Daughters of Dr Bakhtaman Shrestha, surgeon & advisor, Bharatpur Nepal



Patan Hospital. Group of ostomates listening to Mr Ganga Lal Tuladhar.

Advisors
 Dr Jagdish Lal Baidya
 Dr Bijay Jaysawal
 Dr Rajesh Gangol
 Dr Manish Shrestha
 Dr Subodh Adhikari
 Dr Sampurna Tuladhar
 Dr J Shah
 Dr S Maskey
 Dr Baktha Man Shrestha
 Sister Shanti Bajracharya, ET

Note: The doctors are from the Patan Hospital, Bir Hospital and B & B Hospital in Khatmandu, abd from the National Cancer Hospital in Bharatpur, a provine about 150 km south-west of Khatmandu. Sister Shanti is one of only two qualified Ets in Nepal, the other being in the general hospital in Pokhara, about 280 km east of Khatmandu. They both had their ET training at the Tata Memorial Hospital in Bombay, India.

On the 27th February, John Cardosa visited two other hospitals in Khatmandu where there are ostomy groups, and got a promise of cooperation with Patan Hospital in the newly formed Ostomy Association. Representatives (ostomates, nurses and doctors) from these two Hospitals, Bir Hospital and B & B Hospital, were also present at the Inaugural Meeting at Patan Hospital on the 26th February.

On the 28th February Cardosa went to Bharatpur, and on the 1st of March met a total of 36 ostomates at the National Cancer Hosital there, and also several nurses including the hospital Matron and Dr Baktha Man Shrestha, the senior colorectal surgeon, and Dr Maskey, the hospital administrator. They all promised cooperation with the NOA in Khatmandu, and voted to form a branch of the NOA. They accordingly elected their own branch committee as well, consisting mostly of ostomates and family members. But Dr Shrestha and the two stoma nurses were also included as members of the committee.

On his return to Penang, John Cardosa approached Mr Christopher Barnabas, B|Braun's Regional Manager for Asia, to sponsor the subscription dues for the new NOA. He promptly agreed to do so for two years at CHF150 per year. He also promised to send his Product Manager to Nepal as soon as possible to meet the key doctors and nurses there to discuss promotion of his products. However I warned him that Nepal is a very poor country and he cannot expect to get much business from there initially. He accepted that, but said B|Braun would still sponsor Nepal's dues for two years at least. At the same time he reiterated that B|Braun would sponzor the dues of the newly formed or about-to-be-formed Ostomy Associations in Sri Lanka, Vietnam, Bangladesh and Myanmar. This is very encouraging news.

Reported by John David Cardosa, President AOA
 18th March 2002.



María Ceclia (Maureen) Flynn
President of ALADO – Asociación Latinoamericana de Ostomizados

Maureen was born in Buenos Aires in July 1955 in an Anglo-Irish Argentine family, and is the youngest of three children.

She attended a British bilingual school in the suburbs of Buenos Aires. Later, as a teacher she taught English for many years in a Primary School. She then worked as a bilingual secretary in several international companies and at present is working in a Catholic bilingual school in the northern suburbs of Buenos Aires.

She married and lived in Spain for seven years. She has two sons, Gonzalo who is 20 years old and Federico who is 18. Both already doing their university studies.

Already in Buenos Aires and after suffering from ulcerative colitis for many months, she finally had an ileostomy surgery in 1987. In 1992 she helped in the formation of L.A.C.I.U. (Liga Argentina Colostomizados, Ileostomizados, Urostomizados) and is now the Vice-president.

Since the IOA Congress in Calgary, in 1997, she has been involved at international level, representing Argentina and South America. In 1998 she was chosen President of ALADO and since then has been working closely with associations in different countries of South America.

She is keen sportswoman and at present plays hockey in the veteran's national league. She has also travelled to Golden Oldies' Tournaments with her team. She enjoys scuba diving and tennis as well. As relaxing therapy she does some drawing and acrylic painting.

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NCACOA REGION REPORT

Prepared by: **Martha Velez de Nieves, President**
March, 2002

The North America, Central America & Caribbean Region outlines below what is happening in our region.

CANADA

The United Ostomy Association of Canada is a very well organized association. They will have their First Annual Golf Tournament on June 20th, 2002, and their 5th Annual Conference will be held from August 15-17, 2002 at Halifax, Nova Scotia.

Attached to this report is a copy of "The Connection" their monthly publication, which explains in detail their latest progress.

COSTA RICA

In my previous report, I informed about a new group was trying to obtain government registration in order to establish a foundation under the name of "Fundación Costarricense de Ostomizados" FUCO. They still haven't been able to obtain this registration.

I visited Costa Rica on October 2000, and made a presentation to the different hospital groups, including FUCO, I suggested that the best way of working was to set-up a national association. All these groups would have to work together in order to strengthen their local forces. At that time, they were a little bit reluctant with the idea of working together. Last Saturday, Guadalupe Lobo organized a meeting inviting all ostomy groups in Costa Rica and the meeting was a real success. For the first time, they have realized that it is better to work together. They will have one representative from each group to be

on the board of directors of the national group FUCO. They discussed the possibility of working under the ISCAP program and have requested training.

DOMINICAN REPUBLIC

The Dominican Ostomy Association (ASODOMI) has finally reached the point where they believe; it is not an "unknown" anymore. Many doctors (especially surgeons), call the association when ostomy related cases come to their attention. Several doctors are advisors of their association. They have been working steady for the past five years and it is obviously paid off. It is very gratifying to hear local doctors refer to them as "a group of ostomates helping other ostomates".

Membership has increased due to the efforts of their volunteers and to the members themselves, who continually inform people of their existence. They meet on a monthly basis, and on these meeting they welcome new faces, who often travel miles to get to know more about the association and the valuable information they receive from the group.

Last December, an outdoor get-together activity was organized, with more than 100 participants. This activity was a success and was enjoyed by all ostomates, and it certainly, is the best way to spread "word of mouth" about the important work an ostomy association performs in a community.

During the last EC Meeting, I presented the actual situation in the Dominican Republic. George Mallen, founder member and Immediate Past President of ASODOMI disbanded from ASODOMI and founded his own association (APACHO). APACHO wants to be an associate member of IOA. Di Bracken, Vice-President of IOA has all the details on this matter, as she visited the Dominican Republic in request of FOW Canada.

NETHERLAND ANTILLES (CURACAO)

After ten years of foundation, ROSA continues offering service and support to ostomates in Curacao. ROSA gives information, and advice on how products should be used, educating those involved in the care of ostomy patients and those interested with this specific type of care.

Every month patients, family and those interested can participate in a meeting, where specific problems can be addressed, for example; concerning diet, skin problems or cleaning habits.

PANAMA

Panama has a small office at the Oncology Hospital. They have an employee who answers the phone, collects information in the different hospitals regarding new cases, acts as a messenger, etc.

They don't have as many members as they expect. On the board, there are only two members who are the ones who do the work.

They are confronting with the following problems:

- Ran out of capital and at this point they cannot purchase additional supplies.
- The Social Security Institution is not supplying ostomy equipment to retired or working people that have the benefits.

- The nurses that were trained to attend ostomates nationwide, are under new personnel regulations of the Ministry of Health, and are now supervisors, who don't offer direct ostomy care service. They have not been able to establish a direct contact with the Hospitals and some hospitals don't even know there is an Ostomy Association to help them. Also there is lack of statistics.
- General Surgeons are practicing ostomy surgeries that are not well located, creating difficulties. Sometimes they make two stomas on babies; one working and the other is useless. Doctors are unaware about the quality of life of ostomates or simply don't take this into consideration.
- When the government institution of Social Security Hospital buys an equipment, they take into consideration the cheapest and not the best or more suitable to the different kind of needs among ostomates. In a meeting with top managers of the Social Security Hospital, they asked them to guide them in relation of what kind of equipment and the advantages of each product, but they didn't know how to answer that question.

Fernando Ferrer, is requesting our help in order to him organize and give advice on the actual situation of Panama. Panama will be our host for our next Regional Meeting, and we are sure that with our visit to this country we can further discuss all the problems they are having.

PUERTO RICO

During the past year we worked very hard to organize the Parents of Ostomy Children group. This group has been organized and is working very closely with the parents of ostomy children at the Pediatric Hospital of the San Juan Medical Center. They meet once a month and have great plans. When they meet they usually give testimonials of their experience with an ostomy child. I'm sure they will soon develop a working plan in order to help these parents. The elected president of the group is Deborah Acosta, MD. This young lady suffered a terrible experience when her child was born with imperforated anus.

When we discussed the idea of forming a POC group she was very impressed with the idea and immediately offered her help to organize the group.

The 20-40 Focus group is working at a slower pace. This group is having problems in order to set a date for their meetings, as some are students and also have part-time jobs. Others are married and claim they have many responsibilities and no spare time to attend the meetings. It looks like their interest has decreased, but with the next preparation of WOD, I'm sure they will regain interest.

Puerto Rico will bid for 12th World Congress and is supplying additional information to the previously presented last July, in Frankfurt, Germany.

We are discussing the possibility of creating and producing a video in Spanish. There are many videos in English, but we certainly need one in Spanish. This is a long-term project that we intend to do with the financial support of local manufacturers. It is a dream that we hope will come true.

BERMUDA & MEXICO

By the time this report was completed, no reports were received from Bermuda and Mexico.

UNITED STATES

The year 2002 marks forty years of service by the UOA. This is a milestone of which they are extremely proud. They continue to reach out to provide information, education, support and advocacy to their constituents. The delivery system has changed in forty years but their mission remains viable. The UOA invites you to celebrate with them their fortieth anniversary at the Annual Conference to be held in Philadelphia, Pennsylvania, August 14-17, 2002.

The United Ostomy Association, Inc. is pleased to announce that they have a new Executive Director. Nancy Italia, who is enhancing and managing the resources of UOA.



ALADO REGION REPORT MARCH 2002
 Reported by María Ceclia (Maureen) Flynn

ARGENTINA
LIGA ARGENTINA COLOSTOMIZADOS
ILEOSTOMIZADOS UROSTOMIZADOS - LACIU

We are in the final steps of forming a national federation FEDOA, together with two other provincial associations, one in Cordoba and another in Rosario. We are organizing an event for the inauguration.

We are also looking forward to celebrating IV WOD in these different cities.

I've been in contact with two other provinces, trying to get associations started: Chaco y Mendoza.

Things are getting difficult for senior citizens, the social health organization is not distributing what people need.

BRAZIL
Sociedade Brasileira dos Ostomizados - SBO
ACTIVITIES FOR 2002

Please find below SBO Events for year 2002 in English as per your request:

- 1- Special edition of booklet about the female ostomate to celebrate the Women's International Day - March 8 prepared by Damaris Nunes de Lima Morais (National Ostomy Association of Goias)
- 2- 2 editions of SBO Informe (our newsletter)
- 3- WOD (IOA) - October 5
- 4- II SBO Meeting on Ostomy Leaders Qualifications - October II-13, Rio de Janeiro
- 5- II National Meeting of Young Ostomates - November, S.Paulo

COLOMBIA
ASOCIACION COLOMBIANA DE OSTOMIZADOS - ACDO

ACDO started its 2002 activities holding their first meeting on February 2nd during which they started with the preparations for WOD 4 and also continued with their commitment in trying to obtain premises for the Association.

In future meetings amongst other things we dealt with Internet, and are also instructing ostomates in how to fight for their rights, presenting, what they call "Tutelas", – demands to the government, in order to receive the necessary materials and pouches for a dignified life.

We are finding it hard to organize and get teenage ostomates together, but we are setting up a program for parents of young ostomates in the "Hospital de la Misericordia".

We are also organizing lectures and conferences to be held during the year.



<http://www.ostomycanada.ca/>

Are you looking for somewhere to vacation this year? We invite you to join us at our annual UOAC conference to be held in Halifax, Nova Scotia, Canada.

Picture the blue of the ocean and the sky, the green of foliage in a huge garden in the center of the city, a lobster turning red in the pot, the friendliness of the citizens and you have many good reasons to visit Halifax in 2002 when the United Ostomy Association of Canada in conjunction with the Halifax chapter, hosts the 5th annual national conference from August 15th to the 17th.

Need more reasons? Try exciting walks along Halifax's vaunted and historic waterfront, a visit to a genuine brewery where you will see beer brewed and taste its cool and awesome flavor at the end of a 40-minute tour, or an hour-long amphibian boat trip on land and sea on Halifax's Harbour Hopper where entertaining tour guides regale you with stories.

Halifax is home to Pier 21, a restored museum that commemorates the arrival of more than one million people between the 1920s and 1970s. The Maritime Museum of the Atlantic has Titanic relics. Several Halifax cemeteries house the remains of Titanic passengers.

And of course, the Halifax Citadel and Peggy's Cove, two of Canada's most visited and most photographed historical and scenic sites, await you.

Halifax and Nova Scotia offer seaside towns, fine and quaint restaurants, sandy beaches, picturesque fishing villages, museums, galleries, live theatre, all combined in an area rich with history.

You can come to Halifax by car, bus, or train or take advantage of many of the seat sales available by airplane. You will be welcomed with open arms by a warm and friendly host committee which has a program packed with educational sessions, entertainment functions and will still allow time to relax and visit sites.

Come see us and **Catch The Wave** in August 2002.