

ROAR



RED LION
Pouch Support

SUMMER 2023

#65



PLUS...

A day to remember
St Mark's celebrates
'ageless' IBD Day

Zarah does it again!
Nurse consultant
wins another award

Is your pouch
as good as a
kangaroo's?

See page 8





Regional Reps

Here is our current list of regional reps with home telephone numbers — please feel free to contact your local rep and get acquainted.

If you would like to be a regional rep, please contact **David Skinner** on **01708 455194** or by email at **info@pouchsupport.org**

BRISTOL/AVON

David Mair
Bristol
0117 922 1906
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07815 322137
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02892 661559

WILTSHIRE AND SOMERSET

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The Red Lion Group is a charity run by volunteers with advice from St. Mark's Hospital (pouch department). The content of *Roar!* aims to help people with an internal ileo-anal pouch and anyone considering this type of surgery. It is not a substitute for professional medical advice or a medical examination. If in doubt consult a specialist. We do not promote or recommend any particular treatment or course of action.



RED LION

Pouch Support

All donations, however small, towards expanding the work of the group will be gratefully received. You can donate online via the donate button on the RLG home page **pouchsupport.org**

Please support the Red Lion Group

Registered Charity number 1068124



NOTES FROM THE EDITOR



'Their achievements set a glowing precedent for the rest of the UK's NHS hospitals'

Kangaroos and pouches! The link is obvious! But how much do we really know about the longevity and strength of our man-made ileoanal pouches?

That is the theme of this summer's *Roar!* – and to find out all about it please turn to page 8.

And talking of age. It seems to be a common thread in the many items in this issue – from the 'ageless' IBD Day (pages 6 and 7) at St Mark's Hospital to the stories of some remarkably sprightly RLG members (page 8 and 9).

One of our happiest articles is how a City banker and RLG member painstakingly worked out a five-year treatment plan for his pouch. And it was all done without any medical knowledge or highbrow reference books to guide him. Such determination and nous are an example to us all.

Determination

Another pouchee with an overdose of determination is RLG's liaison officer and our very own marathon man, David Skinner. The account of his Falklands Islands marathon is truly inspiring as he overcame a succession of obstacles and language difficulties to finish in a perfectly acceptable time.

Then there are some heroics of a different kind – the efficiency and exploits of the St Mark's Hospital nursing team who keep on winning awards and plaudits from their peers as you will discover on page 11. Congratulations to all of them! Their achievements set a glowing precedent for the rest of the UK's NHS hospitals.

For a resume of RLG's activities, read the reports of RLG chair David Davies and membership secretary Gary Bronziet. David reflects on six months of vibrant RLG progress, much of it online, and St Mark's Hospital medical

achievements, while super-guru Gary savours some spirited summer webcasts and welcomes the growing network of RLG members now meeting up in the monthly personal Zoom forums.

And now for something completely different!

Annual meeting alert!

A combination of Covid-19 and the retirement of our super-efficient treasurer Jim Symington has led to a delayed Annual General Meeting (AGM). However I'm delighted to say that a combined one for the financial years 2020 and 2021 will be held on Zoom at 7pm on Thursday, 10 August – just before the webinar of St Mark's head pharmacist Uchu Meade (as David Davies explains on pages 4 and 5).

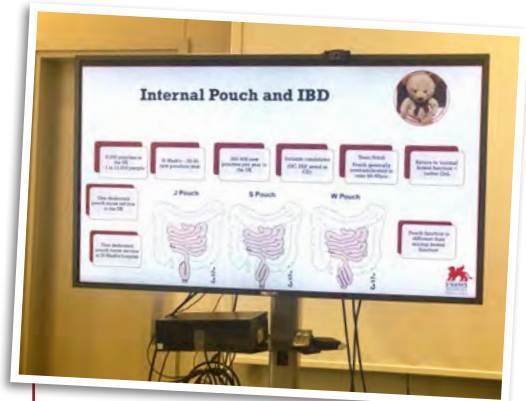
If you cannot attend, please vote by proxy on the forms that were recently emailed to you.

For now, I wish you a very happy rest of the year and some light summer reading!

Christopher Browne

Editor

cbrowne@brownmedia.co.uk



What does my pouch look like?

The three most common pouches – as shown at St Mark's Hospital's IBD Day (see pages 6 and 7). These images may be small but they show the differences between the three types of pouch. The most popular is the J-pouch which is made by using two loops of the small intestine, each about 20cm long. The S-pouch is similar though it also has a 2cm out-spout of small intestine below the pouch which is attached to the anal canal. The W-pouch is hand-sewn and uses four loops of 12cm-long terminal ileum. It was created at St Mark's in the 1980s by Professor John Nicholls, a patron of RLG.

WANTED – RLG TREASURER

Money talks – or at least it should do – and the last time we needed a treasurer we were lucky enough to recruit Jim Symington.

However Jim is unwell and is unable to carry on his exemplary role as possibly the best treasurer RLG has ever had.

Do you by chance know of someone who is looking for a bit of part-time work (they may or may not be retired) who would be willing to take on the role?

If you do, please contact RLG chair David Davies (info@pouchsupport.org) and he will tell you all about the role. David will be delighted to hear from you.



LETTER FROM THE CHAIR

David Davies flanked by St Mark's award-winning nurses Rali (left) and Petya Marinova



'The monthly RLG pouch forums continue to be a roaring success'

David finds many reasons to be cheerful

RLG chair **David Davies** reviews a lively, event-filled 2023

Success breeds success, as the old saying goes. And without being too boastful the Red Lion Group is thriving - as membership numbers continue to grow and our online efforts multiply.

Much of this is due to Gary Bronziet who manages the website and oversees the membership with such aplomb.

However material success is all very well. Our role as a support group is to help pouchees, potential pouchees and their families cope with and recover from illness which is sometimes serious and operations. And from yours and others' responses, I'm pleased to say our efforts seem to be

working aided by such outlets as Zoom and Facebook.

The hit parade

Let's look at the facts and figures. We are No 1 on Google for 'pouch support' and we have achieved over 100,000 hits since the new website (pouchsupport.org) went live, as shared by Gary in his report on page 12; membership is at its highest level (over 400) since the group began; and the UK Facebook group membership keeps rising with almost 1,400 pouchees from many countries (see Gary's article).

Then there are the webinars. We've enjoyed contributions from two

leading pouch surgeons - St Mark's Janindra Warusavitarne, an RLG patron, and Chelsea and Westminster's Valerio Celentano - and biofeedback specialist Ellie Bradshaw discussing investigative methods for pouch problems, while in August we have the ever-popular pharmacist Uchu Meade from St Mark's talking about drugs to maintain pouch health.

The magic of Zoom

The monthly RLG pouch forums continue to be a roaring success with some 20 to 30 pouchees and potential pouchees meeting up via the magic of Zoom to discuss all sorts of pouch

issues in a very supportive and enjoyable spirit of camaraderie. Two of the regulars have pouches that are 44-years-old and still functioning well – and long may that be the case (see ‘What’s the lifespan of a pouch’ on pages 8 and 9). There are a lot of people in our community who have had their pouches for decades and with good function and few problems. These cases reflect the quotation from Janindra Warusavitarne that “... approximately one third of pouch patients sail off into the sunset after their surgery and we never hear from them again.”

RLG exists to support all pouchees, however good or bad your pouch function. For those with problems, it is amazing how the same issues crop up again and again across the pouch community, demonstrating over and over the value of shared experiences and solutions; while for new pouchees it is to know they are not alone and that there are solutions to many pouch issues.

Annual meeting alert!

Covid-19 frustrated our ambitions to bring you an AGM in 2021 (for the financial year 2020), but I am pleased to say that we will be conducting a combined Annual General Meeting for the financial years 2020 and 2021 at 7pm on Thursday, 10 August, immediately before Uchu Meade’s webinar. Please make every effort to attend – it would be great to see as many members as possible. If you cannot attend this Zoom event then please authorise your vote by proxy so that your votes will count. All the AGM documentation will be emailed to you soon, if not already with you by the time you read this *Roar!*

It remains for me to wish you all a magical Summer, whatever you are doing. Keep well, look after yourselves and don’t forget the St Mark’s rehydration drink E-mix (see article on page 14) in this hot weather.

And please remember to attend and/or vote at the AGM. Or if you would like to volunteer to be a Trustee of the group please drop me a line at info@pouchsupport.org, I would be delighted to hear from you. Best wishes...

David Davies
RLG Chairman

Fistulas and how to treat them

RLG’s communications officer **Michelle Martin** gives us the lowdown in a new video



Fistulas and how to cope with them is the theme of a new video by RLG’s communications officer Michelle Martin.

various stages of the pouch operation, the expected recovery time and the operation’s risks and benefits.

A third video on hernias, a ‘popular’ topic among pouch patients, is currently being made.

It is the second in a series of videos made specially for pouch patients and which feature Michelle’s own pouch surgeon Toby Hammond, consultant colorectal surgeon at Broomfield Hospital in Chelmsford, Essex.

The new video explains how fistulas are formed, what they are, their different symptoms and the best ways to treat them. It follows the first video in the series, “J-pouch surgery: a life-changing decision”, which explores the

Mr Hammond commented: “I was asked to provide information for patients who were deciding on whether or not a J-pouch would be for them as well as information on potential future complications including fistulas and hernias. I thought it would be a great opportunity to speak to patients out there and help them make an informed decision and choice about what they wanted to do.”

To view the videos, please go to youtube.com/@pouchsupport

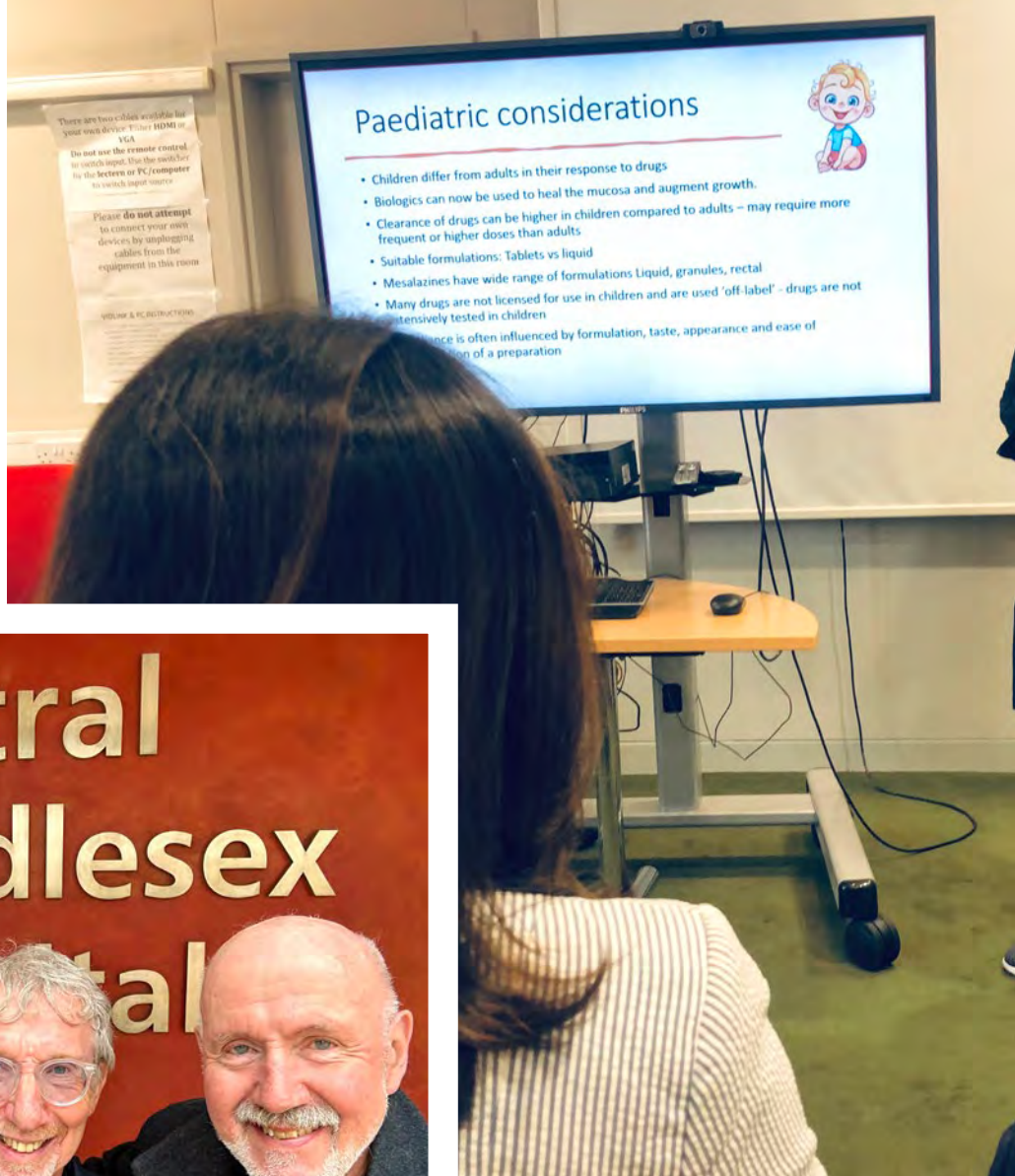


Consultant colorectal surgeon
Toby Hammond



THE MAIN EVENT

BELOW: IBD Day line-up: RLG chair David Davies (l), membership secretary Gary Bronziet and Christopher Browne (*Roar!* editor)



St Mark's Hospital celebrates 'ageless' IBD

One of 2023's key events was held at St Mark's new base at Central Middlesex Hospital

A special IBD Day for patients, relatives, carers, medical staff, surgeons and consultants was held at St Mark's Hospital's new Central Middlesex Hospital site on 13 May.

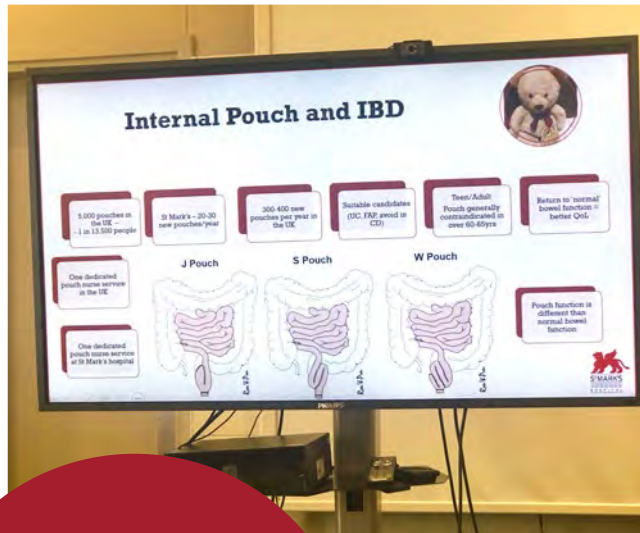
Catchily titled "Aging well with IBD" and hosted by St Mark's Academic Institute, the day was held to mark World IBD Day, an annual event that unites people worldwide in the fight against ulcerative colitis (UC) and Crohn's disease.

Introduced by Professor Omar Faiz, St Mark's clinical director and consultant surgeon, there were key talks on how age affects patients with IBD from the very young to the most senior age group, pregnancy and IBD and the importance of nutrition for IBD patients.

More than 100 attendees enjoyed a lunchtime buffet and sampled the advice forums and brochures of the St Mark's nursing team and the main support groups, including the Red Lion Group, Crohn's and Colitis UK and the Inside Out Stoma Support Group.



LEFT: Tasheem Harrath discusses IBD and pregnancy



ABOVE: Take your pick: a trio of pouches

BELOW: Nikolas Kamperidis highlights the challenges of IBD

'How IBD affects patients from the very young to the most senior age group'



Speakers' Corner

A selection of speakers marking IBD Day at St Mark's



Nikolas Kamperidis
Consultant gastroenterologist



Rali Marinova
Pouch and stoma nurse



Comfort Opekh
IBD nurse



Tasheem Harrath
Senior Rotational Pharmacist



Event organiser Jason Bacon, CEO of the St Mark's Foundation, said:

"It was a day to remember. And everyone from hospital consultants to the speakers and exhibitors were all very pleased with the turnout throughout the day."



What's the lifespan of a pouch?

Those precious little miracles of human engineering have yet to reach their sell-by date

What is the age limit of an ileoanal pouch? The simple answer to this question is: no one knows. And we can only base our knowledge on our own and pouchcare specialists' experiences of pouches and pouchees. What we do know is that there are several Red Lion Group (RLG) members who have had their man-made miracles for 40 or more years, as a recent RLG poll shows. Not forgetting many overseas pouchees, members of other support groups and those who do not appear on any databases.



'I can honestly say I haven't had any problems since 1981'

Pam Everitt

A long-term pouchee

So let's tune in to the experiences of a long-term pouchee. RLG member Pam Everitt has had her pouch for 43 years. She had a Parks pouch fitted in 1981 – five years after that historic moment in 1976 when the first one was created by Sir Alan Parks and Professor John Nicholls at the London Hospital (now Royal London Hospital).

However Pam noticed her first symptoms of UC (ulcerative colitis) soon after the birth of her first son in 1978. She was treated with enemas and several types of medication including prednisolone and a few years later she gave birth again, this time to a daughter, to her and her husband Jim's delight.

However to Pam's chagrin the UC flared up again and she was admitted to Cambridge's famous Addenbrooke's Hospital near her home in St Ives, Cambs. This time her consultant advised her to have pouch surgery – "it was then a fairly new op" she says.

Pam had a two-stage op which "took a lot of getting used to". Then the following year – 1981 – Pam and her family moved to Cornwall and her health slowly improved. She used a Medena catheter for two years "and can honestly say I haven't had any problems since 1981 – 42 years ago", she says.

"I eat and drink anything I want and even went on to have a third child, a son, by normal delivery. He weighed a healthy 8lb 3oz!," she says proudly.

"I lead a normal life, holiday abroad and now enjoy being a granny. I go to the toilet on average four times a day and feel very fortunate that I was lucky enough to be ill at the right place and at the right time and that my surgeon did a good job."

Pam recently joined the Red Lion Group. "I felt it would be good to be in touch with like-minded people and it is a great reassurance to know I am not alone," she says.

A piece of history

Pam's story is an encouraging one and we at RLG wish her all the very best for



'I was told about a revolutionary operation created by a surgeon called Alan Parks'

Sylvia Panford

the future. Which brings me to a piece of pouch history. RLG member Sylvia Panford is one of the world's first pouchees, in fact No 9 in the pecking order!

She was admitted to the Royal London Hospital (then known as the London Hospital) in Whitechapel Road in 1977 with a serious bout of UC. She was offered a permanent ileostomy but refused. Then her registrar told her about a revolutionary new operation created by a surgeon called Alan (later Sir Alan) Parks. "The first operation went well and I was the proud owner of a stoma," she says. Parks then carried out a second op to create a pouch. Sylvia had a few complications but the third op was successful and in 1978 she was the proud owner of a pouch.

Since then, apart from a few glitches, Sylvia's pouch has been problem-free. She joined a yoga club and a swimming group and in 1988 (10 years after her final pouch op) she completed a marathon and has done several more. She also joined a walking club and says: "It's actually a drinking club with a running problem and is known as Hash House Harriers."

Sylvia moved to Portugal five years ago. "I have had a few small problems but I show the doctors my RLG Medic Alert card and they are able to order me prescriptions which is such a relief," she says.

As she says now: "A very special thank-you to Sir Alan Parks for creating the pouch."

A friend in need

One of Sylvia's fellow patients in the Royal London Hospital was Jean Reed. Like Sylvia, Jean had been suffering from UC and her doctor decided the new ileoanal pouch would be the ideal solution for her as there was also a possible threat of cancer.

And that, ladies and gentlemen, is how Jean became pouch patient No 10.

It was during her three-month recovery period in hospital that Jean met Sylvia and they have remained close friends ever since. Like Sylvia, Jean joined the Red Lion Group and still contacts her friend to talk about mutual pouch issues.

"My pouch has been OK most of my life. I've had a few blockages but other



'The pouch keeps working with no pain and I haven't had a blockage for two years'

Jean Reed

than that it's been fine," says Jean.

However last year misfortune struck when Jean had a stroke and she now needs to use a wheelchair. "But," as she says, "the pouch keeps working with no pain and I haven't had a blockage for two years."

Janindra Warusavitarné, St Mark's Hospital consultant colorectal surgeon, says:



"The longevity of the pouch is a question I am always getting asked. The answer is we know that about 10 to 15 per cent of pouches will be either removed or defunctioned with a stoma or complete removal of the pouch over a period of 15 to 20 years. So we assume that the rest are functioning reasonably.

"But the reality is that we have never investigated that concept and ultimately as the pouch was created 40 plus years ago we wouldn't know what the ultimate longevity is for quite some time.

"The pouch is created to improve quality of life and this is a concept that is very individual and cannot be measured accurately. My final words are that in most cases a pouch will last forever (ie a person's lifetime) but will it continue to function in the way that improves the quality of life for an individual is the question we don't yet know the answer to."



THE ROAR! CASE STUDY



Ben's five-year pouchee-versary

It was some upsetting news from his consultant that prompted City banker and RLG member Ben Barnabel to launch his own unique pouch treatment plan. Did it work? Read on and you'll find out ...

Have you heard the one about the five-year pouchcare plan? You haven't - well have a word with Red Lion Group member and pouchee Ben Barnabel and he will tell you all about it.

As Ben says: "I am delighted and proud to tell my friends, colleagues and fellow pouchees about the self-discovered regime I have put together over the past five years by taking little snippets of advice and help from a wide and varied array of different sources."

So what exactly are Ben's sources? They are two Facebook sites: the J-pouch support group (UK specific) which is hosted by the Red Lion Group (RLG), and the US-based Facebook pouch support group; RLG's monthly Zoom-led personal advice forums; and the "wonderful pouch nurses" and medical staff at St Mark's Hospital, says the City banker.

In fact Ben's story begins in 2002, when after a spell of ulcerative colitis (UC), he had a pouch fitted with "no issues at all until 2018" when pre-cancerous cells were discovered in the lining of his rectum. Those tests also marked the birth of Ben's five-year plan.

Following medical advice, Ben's rectum was accordingly removed. "I was so lucky to then have a one-step pouch made and connected by the talented lead consultant surgeon at St

Mark's, Janindra Warusavitarne." [Janindra is an RLG patron].

A work in progress

Post-op Ben wrote down the first two ideas in his pouchcare plan.

"St Mark's consultant nurse, Zarah Perry-Woodford, told me that, as a pouchee, if I ate the same cheese sandwich every day for breakfast, lunch and dinner, my output would be different each time I went to the loo". The second was when Ben's pouchcare team said that - realistically - it would take him up to five years to see the "full working effects and stabilisation" of his pouch. Prophetic words indeed!

Here then are the highlights of Ben's successful formula:

- Six days a week he takes two sachets of Vivomixx probiotic - "I understand this is effectively the original De Simone formula that was most extensively trialled and tested for its efficacy in the treatment of IBD, IBS etc. (source : https://en.m.wikipedia.org/wiki/De_Simone_Formulation)" he says.
- Ben takes one 400mg capsule of potent green tea extract daily - "I see this is routinely recommended in the US by a leading pouch gastroenterologist," he says.
- He uses a warm water enema most times he visits the toilet - if convenient - to "completely empty

my pouch. I always do this last thing at night before I go to bed and it enables me to sleep uninterrupted for probably five out of seven nights a week."

- Finally, Ben uses a Medena catheter after the enema to make sure the pouch is completely empty.

Says Ben: "I'm certain that this regime has given me a healthy pouch, with not one bout of pouchitis since the pouch's formation. It also enables me to control my bowel motions very easily. My consultant is always very happy with how the pouch looks when I have an endoscopy, and is also very happy with my regime."

Celebration time

He says: "While I am not a doctor or nurse or in any way medically qualified, this regime seems to work very well for me. And I would always recommend discussing any changes to your own regimes or plans with your medical team."

And how will Ben celebrate his pouchee-versary? Uniquely, of course. In September this year he and Janindra Warusavitarne will deliver a lecture titled "What do the public expect from surgeons" at the European Society of Coloproctology's annual conference in the Lithuanian capital of Vilnius. (You can read their report in the Winter 2023 issue of *Roar!*)



Zarah (second from left) and the silver award-winning St Mark's pouchcare team

'Zarah has achieved one of the nursing profession's highest accolades'

Zarah wins 'Nurse of the Year' award

The St Mark's Hospital nurse consultant says that it is her mother who has inspired her throughout her career

St Mark's Hospital's consultant nurse Zarah Perry-Woodford has done it again! No, she hasn't won the Lottery, or been awarded a damehood or even single-handedly swum the Channel (or at least not as far as we know!). But she has achieved one of the medical profession's finest accolades – Nurse of the Year in the British Journal of Nursing's 2023 awards. The award follows her success in last year's Nursing Times awards when she was nominated as Nurse Manager of the Year (see the Winter 2022-2023 *Roar!* pages 8-9).

Zarah says it was her mother, who also worked as a nurse, who inspired her to join the nursing profession and throughout her career. She said after the presentation: "I dedicate this award to my biggest fan and inspiration, my mother Doris

Perry-Woodford, who passed away peacefully on 11 April, 2023."

The judges highlighted Zarah's "excellent nursing and leadership skills and how she and her team provided "uninterrupted service for patients throughout the Covid-19 pandemic". They said Zarah and her team also managed the complete digitalisation of the stoma services at St Mark's and co-authored a 182-page patient handbook "Stoma Care – A Guide to Patients".

And to add even greater kudos to Zarah's win, her team won silver in the BJAwards' Stoma Care Nurse of the Year category. This follows their four nominations and a 'highly commended' in the 2022 Nursing Times and Association of Stoma Care awards.

Petya Marinova, St Mark's Hospital's

lead nurse for pouch and stomacare, said: "This is a joint team silver – or runners-up medal – for the stoma and pouch nursing team. We are very proud of this achievement and hope to continue doing amazing nursing work for all of our patients."

Jason Bacon, CEO of the St Mark's Hospital Foundation, commented: "The St Mark's Foundation, members of the hospital trust and the staff of St Mark's send a huge message of congratulations to Zarah and the whole team of remarkable nurses.

"We are delighted that Zarah Perry-Woodford has been awarded "Nurse of the Year" and the St Mark's stoma and pouchcare nursing team won the silver medal for the BJAwards Stoma Care Nurse of the Year."



MEMBERSHIP REPORT



RLG hits another milestone

Gary Bronziet, RLG membership secretary and IT guru, reflects on RLG's winning website and some ever-popular summer webcasts

In my last *Roar!* report in the winter 2022/2023 edition, I spoke proudly about how our website was performing and the growth in our membership numbers.

Since then, we have hit another milestone with the website hitting 100,000 all-time views! I think this is a fantastic achievement for a website focused on such a niche medical condition.

What is also remarkable is the geographic spread of our website viewers. Although we are primarily UK based, we have had views from 135 different countries. I posted more detailed information and the full list of countries on a recent website post. See <https://pouchsupport.org/red-lion-group-website-hits-100k-views/> for full details.

Eminent speakers

In other news, we resumed our series of zoom webcasts featuring eminent experts on J-pouch surgery and

management. These are proving more popular than ever with increasing numbers of attendees. There are still some to come for our 2023 series. You can see the schedule and register for upcoming webcasts (and recordings of past ones) at

pouchsupport.org/events

And don't forget our

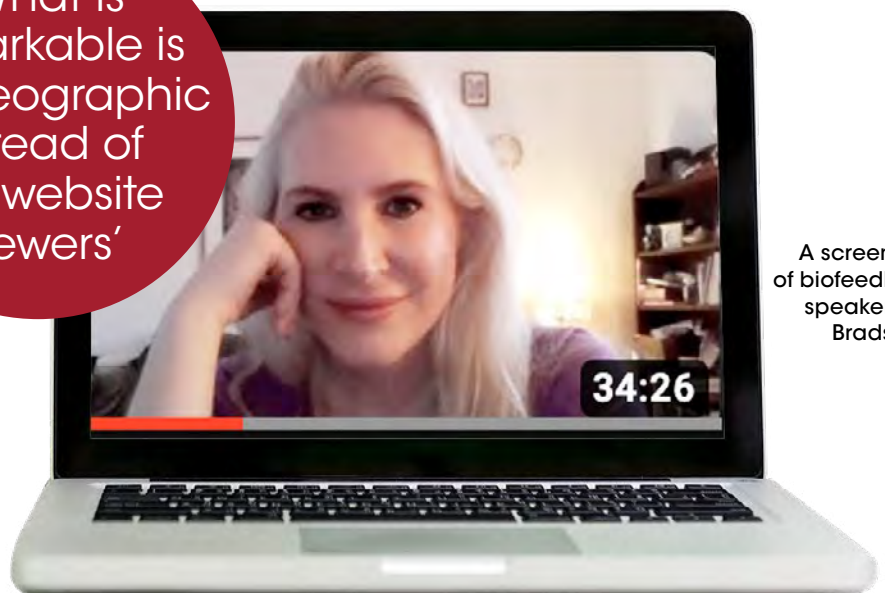
regular open Zoom forum which takes place (usually) on the first Monday of each month at 7:30 pm.

That's all from me for now. Enjoy the rest of the Summer!

Gary Bronziet

Membership Secretary and IT
membership@pouchsupport.org

'What is remarkable is the geographic spread of our website viewers'



LEFT:
A screenshot of biofeedback speaker Ellie Bradshaw

EMAIL ADDRESS ALERT

RLG is still missing the email addresses of 25 members. If this applies to you, and you have an email address, could you please notify the membership secretary at membership@pouchsupport.org as you are missing out on a lot of useful information, such as announcements and notifications of online events.

LETTER TO THE EDITOR

Is the W-pouch an unusual kind of pouch?



I had my pouch operation on New Year's Eve 1997 when I was 57. It was carried out by Mr Charles Collins who was then the senior

surgeon at Musgrove Park Hospital in Taunton.

The following day he turned up very early to check on my progress, wearing his full regalia ready to go and join the New Year meet of the local stag hounds. That really wowed the nurses!

I have a W-pouch and although I always read my copy of *Roar!* when it arrives, I have never seen anything about another person with a W-pouch.

Mine has behaved impeccably all these years. I go to the loo in the morning, after lunch and before bed with just occasional slight variations and rarely need to get up to empty it at night. I find that taking two Loperamide tablets with breakfast and two with the evening meal keeps my output under control.

In 25 years I have had one episode of pouchitis. I don't need to use any kind of catheter and emptying is never difficult. All I need is a baby wipe for the final 'polish'. I can eat what I like but I try to maintain a good intake of fibre from cereals, vegetables and fruits.

I am intrigued to know why this type of pouch seems to have gone out of favour.

Carole Moore

The Editor writes:

You are not alone Carol! There is a sizeable group of us with W-pouches - including me. The main reason it has gone out of favour is "progress". Although the W-pouch was very effective and favoured by many surgeons including Professor John Nicholls, co-founder of the pouch, it was larger, multi-sectioned and hand-sewn, and took longer to form than the J- and S-pouch alternatives. Thus, because they were less technically demanding, the others - specially the J-pouch - were adopted as the standard design.



David Skinner with his finisher's medal

David defies the odds - again

Marathon man and RLG liaison officer **David Skinner** has just added to his growing tally of races - in the Falklands Islands!

Mile Eight which ended at Stanley Airport, one of the unfortunate targets during the Falklands War, took me 28 minutes, most of which was spent in the loo, to such an extent in fact that they sent in a marshal to check on me.

Around mile 12ish it started to rain and as I approached one of the key landmarks, Sapper Hill, thick mist came down and I couldn't see anyone in front of me.

It meant that when I looked back, I could just about make out someone waving their arms in the air. Thinking I may be off course, I stood in the middle of the road and flagged down a police car.

The nice police lady assured me I was on the right road and I had to run up

and over the hill in front of me.

With two miles to go, there seemed to be some dispute between the aforementioned nice police lady and a marshal about the route I should take. The local police Inspector stepped in and said to his colleague, you had better escort him around Stanley for the last two miles!

So, there I am, running in a marathon, 8,000 miles from Blighty following a police patrol car driven by a now VERY nice police lady, whose name was Wendy.

I failed to beat seven hours - which was my goal - by 48 seconds. However, I achieved my one objective, and that was to finish - and the time was totally irrelevant.

To completely misquote the Falkland's War BBC journalist, Brian Hanrahan: "We counted 37 runners out, but only 35 in." And I'm pleased to say I was one of the 35 who finished the islands' Stanley Marathon earlier this year.

With only eight weeks' training the event was the toughest and hilliest I've run, but what larks and japes I had on the way Pip!



ROAR'S HEALTH TIPS



Thirsty, dry, dehydrated? No problem – just pour yourself a glass of E-mix

Yes, this techie-sounding product is an extra-special drink that should really have its own patent. Just ask the many satisfied patients who've used it during their long and sometimes frustrating weeks of recovery after a pouch operation.

E-mix in fact stands for electrolyte mixture and is an oral solution devised by St Mark's Hospital to help pouches rehydrate after they have lost precious fluids such as sodium (salt) and several other key nutrients that are flushed out of your reworked digestive system after surgery.

So how do I make E-mix?

The drink is pleasingly simple to make and merely needs a visit by yourself or a family member to your local pharmacy to buy the ingredients - glucose powder, sodium bicarbonate and sodium chloride (salt).

You then fill a jug with cold water, add six teaspoonfuls of glucose, a heaped teaspoon of sodium bicarbonate and a teaspoon of salt (sodium chloride). Then stir until the mixture has completely dissolved.

Hey presto! You have your own nutritious drink ready to be taken at regular intervals throughout the day. (It can be a real boon in hot weather too).



What are the benefits of E-mix?

The great merit of E-mix is that its high sodium content is easily absorbed from your new intestine and allows for greater absorption of fluids. The glucose also boosts the absorption of salt and water and so helps to keep you hydrated during your recovery in hospital and when you go home.

Why E-mix is best?

When you are thirsty and dehydrated, instead of drinking low sodium drinks such as tap-water, bottled water or soft drinks which have very little nutritional value, you should take regular doses of E-mix.

How should I store the solution?

E-mix can be stored at room temperature or in the fridge. If you have not drunk all the solution on the day you make it, it must be discarded - preferably after 24 hours - and a fresh batch made up the next day.

Tips and advice

If you have any questions or want to find out more about the merits of E-mix, please contact St Mark's Hospital's Medicines Information Department on 020 8869 2762 (option 4) between Monday and Friday (9am-5pm).



Write for *Roar!*

Ideas, Ideas and More Ideas

Yes, *Roar!* thrives on them for it's ideas that make the magazine the readable package that we all like it to be.

Whether it's something that happened to you on the way to work, an interesting holiday or personal experience, an insight into your life with a pouch or a lively letter, please don't hesitate to send it in.

But then if writing articles isn't exactly your favourite pastime, we are always looking for cartoons, jokes, crosswords and competition ideas too.

That way we can keep your magazine bursting with life and information and make reading about pouch issues fun and stimulating. Please send your articles, letters and ideas to:

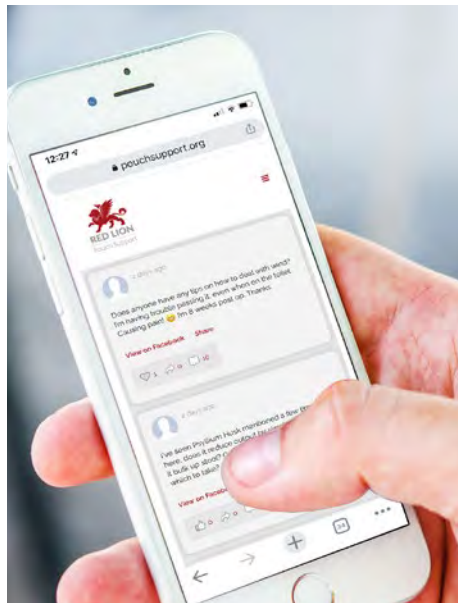
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