



Max Bochmann

Every naturist, card carrying or otherwise, knows we all physically have the same equipment. Some have received a bit better care, metabolic rates vary, some age more gracefully, but we all have the same stuff. Two distinct models, but each is consistent.

That is, unless the medical industry has intervened.

You won't notice my missing urinary bladder (nor the prostate which went along for the ride) but you'll probably spot its plastic stand-in (appliance, bag, pouch) happily swinging from my belly.

My bladder has been replaced by a stoma, a fire engine red, one inch diameter surgeon-fashioned nipple, waist height, three inches to starboard of my navel that weeps urine, every few seconds, 24/7 for the remainder of my life.

The health and happiness of that first inch of skin surrounding the stoma is of utmost importance to me as continence for me is simply a pouch that doesn't leak. It needs to adhere tenaciously but yield stylishly when it's time for removal.

I also have a lifetime lifting embargo of 25 lbs. It's ok for my diversion to work its way through my abs, but not other "stuff"—that's called a hernia.

And, to end this "medical" portion, I don't want to get a UTI. I have very little urinary tract so a UTI quickly becomes a kidney infection. Now two years down this path, I know that a happy



photo by Carmen Hamm

ostomate means happy parastomal skin, happy kidneys, drink lots of water, and leave the lifting to others.

Am I a happy ostomate? You bet. I swapped cancer and bladder and prostate for this stoma and pouch pair, and got out of town without chemo or radiation. You bet I'm a happy camper.

But a cancer diagnosis is transformative. Everyone understands at some level there will be end of life issues somewhere down the road, but "you have cancer" attaches your name to them. It alters your horizon. You assign value differently than before. And happy camper is easier some days than others.

At the time of diagnosis and choosing a treatment, we (Margaret, soul mate, caregiver, travel companion and fellow can-

cer widow) had money down on the 2015 Whitewater Rafting Trip through the Grand Canyon with the Arizona Wildflowers club. As we moved through recovery and were learning to appreciate my new “friend” the trip was a nice distraction and gave me a great “I’m back” target, and no one on our medical team saw any need to cancel. Our pattern had been to roam Florida during February and March by car and tent, but given the recent surgery, we opted to do it May 1 (summer rates!) by plane to Orlando, limo to Cypress Cove, and a week in one of their hotel rooms “to introduce my pouch to sunshine and strangers.” The three months from diagnosis to surgery had been consumed with research and worrying, and the three months from surgery to Florida were recovery and embracing the new normal, and frankly I had some concerns about my comfort level when pouched and ‘barefoot all over’ in a crowd.

Midway through that week, we were taking some sun at the west pool when I decided to slip into the hot tub. I left Margaret and walked the 50 feet to the outdoor shower. Returning to the chairs I noticed she was in an animated discussion with an attractive 50-something wearing a sarong in the classic “nipples to knees” coverage. I arrived to be introduced to a retired public school superintendent, an ostomate herself, who had seen me from a distance and wanted to compliment me on my openness. We chatted for some time, met her husband, and shared a few meals with them in their two days remaining. I continued to gently press my case that she needed to escape the sarong. She countered that her pouch was clear, not opaque as mine, and her output came from the small intestine. My response was swap the sarong for an opaque pouch. The morning they departed I had showered outside and was drying my hair when they stopped the car next to me to say goodbye. I told her I wanted her to come back next year with an opaque pouch and to shower with me. She laughed and said they were working on it. Her husband then told me that her comment privately had been that seeing me walking the grounds comfortably in flip flops, glasses and pouch was the best thing to happen to her in the eleven years since her surgery. I believe there’s a bit of hyperbole there, but it was still a powerful message for me, and I believe our shared experience gave both of us a more reasonable view of our situations. She was a delight and I’ll never forget her.

That boost plus the great week at Cypress propelled us toward the Canyon run a month later, first noticed in *N* coverage of the previous Wildflower river trip. I’m not certain why, but the run through the Grand Canyon has always been on my bucket list, back when bucket list was a joke and not a footrace versus mortality. The photo on the cover of the 2017 Naturist Society calendar is of our “other” boat, shot from the boat we were on. It was an amazing week.

The year 2015 was the year of the surgery, two subsequent surgeries (fixes don’t always stay fixed) the flight to Orlando, the Grand Canyon run, and some local clubs up north before season end, but in 2016 we were back in the “grab the tent and drive to Florida” mode where the first club we visited provided the season’s



Happy blood donors at the Midwinter Festival in 2016.

first teaching moment. We had checked in dressed, not mentioning my bionic bladder, then stripped to pitch the tent in glorious warmth and sunshine, as it was still only the third day from snowdrifts for us. Once set up we walked to the showers, and while waiting for Margaret to finish, I stepped into the unoccupied hot tub but remained standing, the pouch just above the water level.

When Margaret emerged, we walked to the tent, and moments later were visited by the day manager who had checked us in. Standing astride her bicycle, in her flip flops and nipple jewelry, she wanted some information about my “contraption” as some of her members were interested. As is my habit, I over-answered her inquiry, stressing that it was urinary and my surgeon insists it’s less prone to leakage than the original system we’re born with. I was commenting that some in the medical industry refer to hot tubs as petri dishes and I was more at risk than she but the nice lady was off rolling again.

As a blood donor since the seventies, I responded to the red bus at the Midwinter Festival in 2016 and after a small interview and some web connections I was allowed to donate. I’d made a platelet donation before leaving my local area after having established I had met their One Year Cancer-Free rule. I’m in the back of the bus on the port side recliner with my right arm hooked up, and there’s a nice lady on the starboard recliner with her left arm involved. She said nothing during the draw, but when we’re back in the front of the bus for our cookies and juice, she commented she thought it was a really big deal for me to be “out” in public “after what I’d been through,” also thought it was great that I was donating, and then said, “And I love your decal.”

LIFE IS SHORT—PLAY NAKED

When you find me running around naked outdoors you will also find a four inch diameter decal attached to my pouch. If you think it reflects my sense of humor you would be right.

Additionally it unloads the social impact of the pouch as it conveys “I know you’re looking at my pouch and that’s OK.” Oddly enough, it also is a drape, a cover, as in preventing the nice lady across from me in the hot tub from scrutinizing too closely the goings on within, as the opaque pouches lose much of their opacity when wet.

But its primary role is as a sunshade. Both my surgeon and my stoma nurse know of my attitude toward vitamin D collection and have cautioned me about direct sunlight on the stoma itself as the conduit and stoma are fashioned from my own repurposed tissue never intended to see the light of day. Neither of them want their patient to make medical history with the first sunburned stoma.

My next order of decals might include “Go ahead, light up. I did...for 40 years” for the smoker in a nearby lounge chair, or “My other bag is a Gucci” for the ladies, or one of increasing appeal to me...“Bladder cancer pisses me off.”

It doesn’t take an ostomate very long to develop a range of stock verbal responses to TSA comments, locker room observations, or inane bathroom humor. The quickest is “Yep, this is my bladder. Wanna see what’s in it?” Or “I swapped my cancer, bladder, and prostate for this. Not a bad deal, huh?” Or simply “Yes, this is why I’m still alive.” And leave it at that.

Some exchanges require more, though, and I’m still seeking a satisfactory response. Twice in 2016, once in a Florida club and once on Playalinda Beach I encountered a preschool male, each with his Mom. In both encounters they just stopped, stared at it for a few seconds, then asked “What is that?”

I mumbled something about I got really sick, Doctor fixed it and we should always listen to our Mothers, which was perhaps unfair to the girls involved, and then told the Moms they could expand to cancer on their own timing. I hated to pass on a teaching moment, but all I could focus on was how precious and vulnerable a naked four year old is, ankle deep in the massive Atlantic, and how inappropriate any level of realism would be for him in context. His Mom commented she could see from his face he was already processing what he’d seen and heard.

Folks who comfortably wander among strangers or friends without a stitch have internalized some sense of “It is what it is” and then moved on. The ostomy community is about as far away from that as you can get, at least visually. Many fully come to terms with their situation, certainly on the gastro side, where the surgery often improves their daily lives significantly, but few would consider allowing anyone to see their device, ever. I attend a support group based in a hospital in my area, and regarding the troublesome subject of body image, I spoke privately with the group leader, allowing there were experiences available that I could speak to about resolving image issues positively. I explained they involved the most accepting and tolerant subgroup in our society—nudists. He said he’d think about it, but wanted to “set the stage” prior to the discussion. That was a year ago, and he still seems reluctant even to call on me in a group setting. He appears as locked down as the majority, but I haven’t given up on him. Maybe he’ll run this article in his newsletter, perhaps anonymously.

There are between 750,000 and one million Americans wearing an ostomy appliance. (Colostomy, Ileostomy, both temporary and permanent, and Urostomy) In my naturist experience I have seen numerous missing nipples, unequal breasts, missing limbs, skin issues, balance issues, eyeglasses, hearing aids, canes, braces, walkers, the chair bound, and miles of scars, but pouches? Five. Mine, a guy in Wisconsin, a guy in Indiana, the retired Delaware school super, and Jane, who wrote the “I’m a Kangaroo” story in *N* issue 33.4. In my view pouches are trapping ostomates in their clothes, as in a normal distribution there would certainly be more than the five of us with one foot in the ostomy business and the other foot on a nude beach.

Bladder cancer patients are being trapped in more than their clothes. Consider. Bladder cancer is the fifth most common cancer diagnosis today, but ranks in the high 20’s in federal money per diagnosis for research.

The radical cystectomy/Ileal conduit urinary diversion surgery that extended my life in 2015 was pioneered in the late 1940’s. Can you name another 70 year old technical advance that’s still in front line use today? Granted, when a toileting issue comes up against a warm, soft, nurturing female breast in the political/fundraising environment, the winner will nearly always be the obvious, but pouch wearers’ obsession with secrecy contributes to the inequity. To advance your cause you need to be out there. Stealth advocacy is an oxymoron. And I long for the day when “body parts” no longer need to compete with one another for cancer research dollars.

For this bagman, I don’t know a soul who deserves to be shielded from my reality. Many in the broader textile world could clearly benefit from the “mellow” of the naturist community, but ostomates in particular could realize a unique freedom by adopting “It is what it is” from their naturist friends and neighbors.

I know. I have. I’m out. *N*