



Newsletter November 2010

contact: Helen Cotter ph: 6281 2988
lung.life@hotmail.com

Next Meeting

Thursday 11 November

10.30am - noon

The Weston Club,
1 Liardet St
Weston

speaker: Geoff Dabb, noted bird expert

October Meeting by Chris Moyle

The October meeting was an informal meeting. We first attended to business – mainly reminding us all that

- it was World Spirometry Day (or Test Your Lungs Day) so some people were at Woden Mall assisting the event;
- **Wednesday November 17 is COPD Walk Day** – to be held on the Lake, the same place as last year. More information next month;
- in December, we will have our **Christmas Lunch** – more details next month.

Several members then discussed their spare time activities. Madeline has just returned from a holiday in country towns in Queensland, unfortunately spending time in hospital with pneumonia - before returning home. But she's looking and feeling fit again as she heads off on another trip to Port Stephens.

Helen talked about U3A (University of the Third Age) which is set up and run by retired people who can impart knowledge/gain knowledge in a wide variety of fields and activities. It costs very little to join (\$20 a year) and very little to attend the courses, held at venues all over Canberra.

New member, Betty, helps the Samaritans Purse charity by making up small sewing kits which go in shoe boxes to needy people in overseas countries. Each felt fabric kit is handmade by Betty and contains scissors, a small packet of buttons, 8 plain pins and 8 pearl-headed pins and 5 different threads wound onto a piece of card. Betty will gladly receive empty small cotton reels, buttons (all sizes), needles and thread.

Judy crochets coat-hangers which she sends off elsewhere for them to sell. Several other members love dining out. An interesting meeting.



For more information, see www.lungfoundation.com.au

More information on European *Year of the Lung* activities, see: <http://www.ersnet.org/yearofthelung>

More information on worldwide *Year of the Lung* activities, see: www.2010yearofthelung.org

Test Your Lungs Day/World Spirometry Day



Natalie, pleased the way the day is going

As part of International Year of the Lung, World Spirometry Day – or Test your Lung Day – was held around the world on 14 October. The ACT participated with an event held at the Woden Shopping Centre. Staff from the Thoracic Department and the Chronic Care Team from Canberra Hospital set up base in Woden Shopping Centre and spent the day testing the lungs of passing shoppers with a simple spirometry test.

Over 175 people were tested, people queuing up happily to wait their turn. Only a few of those 175 were counselled to see their doctors for

follow up action.

Glenda from the Lung Foundation (based in Brisbane) and Natalie from the department of Respiratory and Sleep Medicine organised the day. Lucy Costa from Air Liquide was lending a hand as were quite a few from Lung Life in their lime green t shirts – Laurelle, Caroline, Pam, Jenny, Pat W, Chris and Helen. Apologies if I have missed anyone.



Lucy and Helen modelling the t-shirts

How common is COPD in Australia?

- COPD is the leading cause of death and disease burden after heart disease, stroke and cancer.
- Approximately 2.1 million Australians have some form of COPD equating to 1 in 5 people aged 40 years or over.
- Of those. 1.2 million have lost 50% of their lung capacity.
- By 2050, the number of people with COPD is expected to more than double to 4.5 million with 2.6 million having moderate to severe COPD.
- Nearly 900,000 Australians have a mild form where symptoms are often ignored.

(information from Australian Lung Foundation)

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Cannula Problems

by Albert Richards

Albert has been having a problem with the swivel on his oxygen tube dragging on the ground and the dangers that entails. He writes about the difficulties of getting some solution to the problem.

The availability of swivels was of great benefit to many patients using domiciliary supplementary oxygen. Prior to that they mostly used standard Salter Type 1606 cannulas without supply tube that had to be plugged directly into a plastic tube connected to an oxygen supply. Patients had to contend with the hazard of the plastic tube forming loops that latched onto any passing projection and either painfully wrenched their nose or at worse tripped them up causing them to fall. This had potential for causing a serious injury such as breaking a bone that could lead to complications and even death in the elderly.

However, using a swivel has drawbacks. Salter Type 1606 cannulas cannot be directly connected to a swivel but the Salter Type 1600 cannula now supplied by BOC under the auspices of ACT Health can. Unfortunately, it is supplied with 2.1 metres (7 feet) of tubing causing the swivel to drag on the floor. Thus, not only does the swivel also catch onto projections, such as castors and sharp corners, causing similar problems to not using a swivel, it may become trapped beneath doors as a patient pass through them, with distressing results that again could be hazardous.

Salter Laboratories in the USA was emailed for advice. They replied within an hour and not only did they clearly understand the problems of using swivels but recommended two cannulas that solved them. In addition, they forwarded free samples of these cannulas that amazingly were delivered by special courier only three days later. They are the:

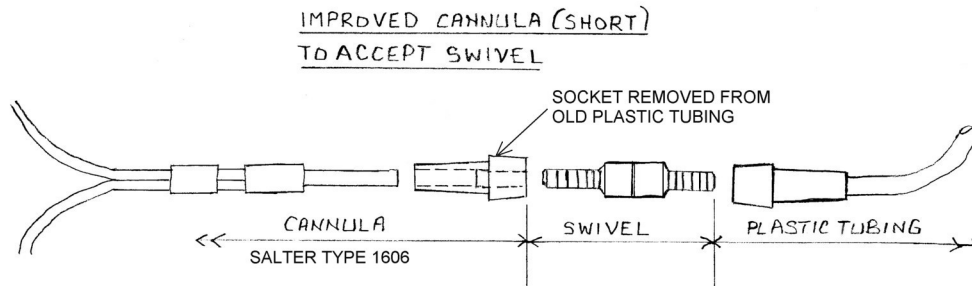
- Salter Type 1600-1 with 0.3 (1 foot) of tubing, and
- Salter Type 1600-2 with 0.6 (2 feet) of tubing.

Either would be ideal as the swivel would be just as effective as the Salter Type 1600 cannula but be well clear of the floor.

BOC were contacted via ACT Health to enquire whether they could supply either of the cannulas recommended by Salter. Their response was most disappointing. They totally ignored the enquiry but chose instead to address Infant and Paediatric cannulas that were irrelevant.

Four other Australian health product providers, including Air Liquide, were contacted to enquire whether they were able to supply either of the cannulas recommended by Salter. Only one company responded in ten days but again the enquiry was ignored and only the Salter Type 1606 cannula was offered that BOC currently supply and is the subject of complaint.

As an interim solution the tubing on the Salter Type 1600 cannula currently supplied by BOC can be cut short and inserted into the rear of end of a socket connection removed from a piece of old tubing. The swivel connected to the opposite end of the swivel would then be well off the floor. Friction will hold the tube in the socket. It may prove difficult to remove an end socket from tubing without causing unacceptable damage to it but it can be done with perseverance as hereunder.



Better Health through extra oxygen or one leg at a time

Taken from www.sciencedaily.com (Jan. 25, 2010) from Tony @ the Y Chifley

People with chronic-obstructive pulmonary disease (COPD) often find themselves in a downward spiral when it comes to their health. COPD, which includes chronic bronchitis and emphysema, means that the elasticity of the lungs is destroyed.

One of the results of this loss of elasticity is that people with the disease find it difficult to completely exhale when they breathe. As a result, COPD patients are more likely to be sedentary, which in turn makes their physical condition even poorer. A series of new studies has found several ways to help improve a COPD patient's overall fitness, which improves their quality of life.

Using extra oxygen

Exercise places demands on the muscles, which in turn need the lungs to provide enough oxygen. For COPD patients who exercise, however, the lungs may have such a difficult time providing the oxygen they need that the oxygen saturation in their blood may drop below 88 percent.

One approach to help these patients is to provide them with extra oxygen when they exercise. One study shows that when inhaled air contains 100% oxygen, and the blood becomes sufficiently saturated, COPD patients can actually exercise at the intensity that's needed to provide optimal stimulation of the muscles and heart. Patients reported that their quality of life improved both physically and mentally.

Ride with one leg, rest the other

One-legged cycling while the other rests can dramatically improve fitness in COPD patients. This is cycling with one leg while the other leg rests. Essentially, exercising only one leg at a time enables the load on each leg to be increased without increasing the work that the lungs have to do.

In one study published in the European Journal of Applied Physiology late last year, one-legged cycling increased almost doubled the peak work rate of the cyclist.

Providing extra oxygen at the same time doesn't seem to improve the results.

Give it a try.

Clarification

At last month's meeting, we had a talk by Jan Ironside and Chris Hyland of the Chronic Care Team. We wrote that Chris goes home with patients after a hospital stay to help set up their home oxygen. Chris certainly does home visits although she encourages patients to come in for clinic appointments where possible. However, BOC are usually the ones who set up the oxygen for clients – Chris can assist with trouble shooting when there are issues with home oxygen. If you need any assistance in this regard, contact the Chronic Care Team on 6244 2273.

Smoking stigma affects TV coverage

from CT Oct 9, 2010

Researchers in a recent study analysed the coverage of different cancer types on Sydney's free-to-air TV news programs. They discovered a lack of reporting compared with other cancer types. Researchers believed this was due to the stigma connected to smoking and lung cancer with a wider perception that smokers deserved to get lung cancer. This attitude often stops people from seeking treatment for smoking caused diseases.

Professor Chapman, University of Sydney's Professor of Public Health, said many of the current smokers first became addicted during a time when smoking was encouraged – when there was much tobacco misinformation and government inaction.

Researchers also believe the lack of media coverage given to lung cancer may be due to the absence of strong representative groups like those that exist for breast cancer. These organisations may be hard to form because of the speed with which lung cancer kills sufferers.

Salt - the deadly food addiction - "A Current Affair" (27 August, 2010) by Chris Moyle

Excess salt consumption is linked with a number of conditions including stroke and cardiovascular disease and high blood pressure. Years ago salt was so valuable it was used as currency. It was a Roman soldier's wage (if they were worth their salt!) giving us the word 'salary'. Today it's the deadly food addiction that is claiming the lives of 2,000 Australians every year. According to nutritionists the amount of salt we are eating is on average more than 10 times the recommended daily allowance, and is killing more of us than smoking! The total daily allowance is 4 grams. So which foods contain the most salt? Sometimes the worst offenders aren't the most obvious. Breads, cereals, sauces and canned savoury goods, like soups, are surprisingly high in salt.

Some quick salt facts:

- Half a pizza contains 4 grams of salt - your total daily allowance
- 100 grams of ham contains 4-5 grams of salt
- A bowl of low fat cereal and a couple of slices of toast will add up to half of your recommended daily salt intake

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- A quarter of all the salt we consume is in our bread

Top tips for cutting back on salt in your diet:

- Don't add any salt to food you are cooking or at the table
- Choose reduced salt bread and breakfast cereals
- Cut back on processed foods
- Cut back on takeaway and fast foods
- Buy fresh vegetables rather than canned. Frozen vegetables can have 3 times less sodium than canned varieties
- If using canned foods, drain and rinse the contents to remove some of the salt
- Buy "low salt"(contains less than 120mg/100gr.) or "salt free" versions of commonly ready-made sauces.
- Use herbs and spices, instead of salt, to add flavour to meals.
- Our taste buds are used to salt so it is best to cut down very gradually.

Snippet

from CT 6 Sept 2010

Popcorn Lung

Popcorn lung is a life threatening disease caught by people working in popcorn and popcorn-flavouring plants. A US factory worker was awarded \$30 million against the supplier of a chemical, diacetyl, found in butter flavoured microwave popcorn. The worker, aged 45, had developed the disease, bronchiolitis obliterans, which has destroyed 75 percent of his lungs.

Dates for your diary

November lung awareness month

Wednesday 17 November World COPD Day

2011

Thursday 13 January first meeting of the year for the Canberra Lung Life Support Group

Wednesday 5 April practical session with Physio students at University of Canberra

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