

## November 2020 Newsletter

Providing a supportive and informative environment for people with a variety of lung conditions and their carers.

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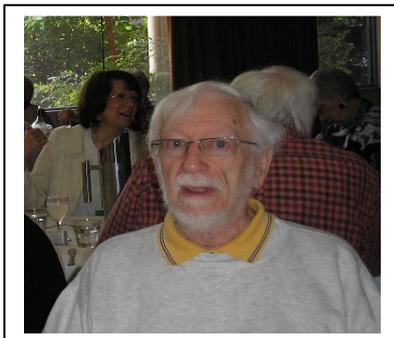
**NEXT FUNCTION:** Lung Life Christmas Lunch  
Thursday 10 December 2020 at 12:00 pm  
Canberra Irish Club in Weston  
Further details to come by email

**NEXT MEETING:** Date yet to be confirmed

This is the final newsletter for the year; the next edition will be in late January.

### Thanks to the sub-editors and major contributors to the newsletter Geoff Cox

As my first year as the editor of the lung life newsletter draws to a close, I would like to thank three people who have helped to produce the newsletter each month. **Chris Moyle** (pictured centre) has been a major contributor, researching and writing about members past and present, as well as finding interesting articles and 'puzzles' to add to the newsletter. **Helen Cotter** (pictured right) has likewise been a major contributor, with both articles she has written and found through other sources. Both have also proofread the newsletter each month. **Don Neal** (pictured left), although living in Cowra NSW, has proved distance is no barrier, as he has proofread all the newsletters and ensured anything that required technical expertise was seen to.



## COPD Part 4 (Parts 1, 2 and 3 are in previous editions)

### Vaccinations

Ensure your vaccinations are up-to-date. A yearly **influenza vaccine** has been shown to reduce risk of death and hospital admissions. It's important to remember that no matter how healthy and active you are your risk of getting **pneumococcal pneumonia** increases with age. This is because the immune system naturally weakens as we get older, making it harder for our bodies to fight off infections and diseases. Talk with your doctor about the best way to protect yourself against pneumococcal pneumonia.

### Access emotional support

Everyone experiences COPD differently. Initially your COPD may not have much impact on your life or emotions, however as it progresses, it is important to access support. You may also experience changes in your mood or feel anxious. It can be difficult to know if you feel down because of your physical health or if you have symptoms of depression and/or anxiety. Your doctor or another member of your health care team can help you work through these feelings. There are also a number of community organisations that specialise in providing confidential help and support.

For more information see: <https://lunghealth.lungfoundation.com.au/>

## Pulmonary Fibrosis (PF) Research

In the October edition of this newsletter there was an article on Idiopathic Pulmonary Fibrosis (IPF). Here is some information on research of Pulmonary Fibrosis (PF).

### In Australia

Pulmonary Fibrosis (PF) is a debilitating and rare condition that causes scarring which stiffens the lungs, progressively reducing a person's ability to breathe. For some people, the cause is unknown and for most, the survival rates can be as low as some of the most devastating cancers – but there is hope. In recent years, Australian-based research into this complex disease has provided significant advances in treatments which are helping to slow disease progression – providing hope that never existed before.

Little is understood about how to diagnose or treat this illness. Up until very recently, until 2016, we had no treatment at all – but research has now taken us to the point where we have two medicines which can slow the condition down. However, it cannot be completely cured. Research is important to improve the care of PF patients, to understand the condition more and to help intervene earlier.

Lung Foundation Australia (LFA) is thrilled to provide Australia's single-biggest philanthropic investment in dedicated PF research to our research partners at the Centre of Research Excellence in Pulmonary Fibrosis. This \$1.1 million investment has been made possible by an anonymous donor family whose father passed away from PF and will support ground-breaking and world-leading discoveries tackling the debilitating and incurable lung disease that impacts on thousands of Australians each year.

## Researchers

Researchers are looking at ways to identify which patients with lung fibrosis are likely to progress quicker than others. Some of the exciting new results have shown that there are blood and CT scan biomarkers which help with this identification and allow targeted and personalised treatment to begin at an early stage.

## IPF Registry

There is an IPF Registry that collects information on patients living with IPF to better understand this complex disease.

## Clinical Trials

LFA is proud to support the Pulmonary Fibrosis Australasian Clinical Trials Network (PACT). PACT unites leading clinicians and researchers from across Australia and New Zealand to conduct clinical trials that will help find new advances in the diagnosis, treatment, and management of pulmonary fibrosis.

If you are an IPF patient and interested in participating in a clinical trial, consult with your specialist.

For more information see: <https://lunghealth.lungfoundation.com.au/>

## Colonoscopy – a humorous view

All the organs of the body were having a meeting trying to decide who was in charge.

‘I should be in charge,’ said the brain, ‘Because I run all the body’s systems, so without me nothing would happen.’

‘I should be in charge,’ said the blood, ‘Because I circulate oxygen all over, so without me, you’d all waste away.’

‘I should be in charge,’ said the stomach, ‘Because I process food and all of your energy.’

‘I should be in charge,’ said the legs, ‘Because I carry the body wherever it needs to go.’

‘I should be in charge,’ said the eyes, ‘Because I allow the body to see where it goes.’

‘I should be in charge,’ said the rectum, ‘Because I’m responsible for waste removal.’

All the other body parts laughed at the rectum and insulted him, so in a huff, he shut down tight.

Within a few days, the brain had a terrible headache, the stomach was bloated, the legs got wobbly, the eyes got watery, and the blood was toxic.

They all decided that the rectum should be the boss.

The moral of the story?

Even though the others do all the work... the ass hole is in charge.



## Australian Prime Ministers

As we are located in the nation's capital, we are at the heart of our political system. How well do you know Australia's post-war Prime Ministers? Can you link each Prime Minister to a relevant fact?

Ben Chifley  
 Robert Menzies  
 Harold Holt  
 John McEwen  
 John Gorton  
 Billy McMahon  
 Gough Whitlam  
 Malcolm Fraser  
 Bob Hawke  
 Paul Keating  
 John Howard  
 Kevin Rudd  
 Julia Gillard  
 Tony Abbott  
 Malcolm Turnbull  
 Scott Morrison

1. Australia's only female Prime Minister.
2. Australia's longest serving Prime Minister.
3. This Prime Minister made the apology to Indigenous Australians.
4. He is remembered for wearing his budgie smugglers.
5. This Prime Minister drowned going for a swim.
6. He famously said, 'I'll tell you what ... any boss who sacks anyone today for not turning up is a bum.'
7. His wife Sonia made headlines in her slit dress worn to the White House.
8. He notably said, 'Well might we say, God save the Queen, because nothing will save the Governor-General'.
9. This Prime Minister from Bathurst had been a train driver.
10. He is known for his brisk morning walks often in an Australian tracksuit.
11. This Prime Minister follows the Cronulla Sharks.
12. Known as Black Jack, he held office for less than a month.
13. He was the member for Wentworth, in Sydney's eastern suburbs.
14. He became Prime Minister by accident and left by voting himself out of office.
15. This Prime Minister is famous for his many quotes such as calling the senate an 'unrepresentative swill'.
16. This Prime Minister had a Victorian property called Nareen.

Answers on page 6

## Puzzling

Can you go from sick to well in four steps by changing one letter at a time? (Each step must create a 'real' word)

SICK \_\_\_\_\_ WELL

Can you unscramble this word? LONGITCH

\_\_\_\_\_

Clue: Worn to keep you decent. Answers on page 6



## Chronic Health Care

The Health Care Consumers' Association (HCCA) has been involved for many years in committees relating to chronic conditions and their management. This has included the development of all the chronic conditions strategies, and as a member of the coordinating committee for Primary Health Care and Chronic Conditions. This was an important committee as it was the only place where HCCA, Capital Health Network, Calvary Public Hospital and ACT Health (including The Canberra Hospital and Health Services) came together to discuss the management of chronic conditions.

**We must have consumers and carers involved in the development of services to meet our needs** - so the current work of Canberra Health Services on integrated care for people with chronic conditions, across services and disciplines, is most welcome. We will be focussing on this in the next six months so if you are interested to find out more please contact Anna Tito in the policy team at [annatito@hcca.org.au](mailto:annatito@hcca.org.au).

Reference: The newsletter of the Health Care Consumers' Association Inc.  
Vol 7/Issue 26/12 November 2020.



For many the home office has become the norm this year, and workers' pets have become part of the process, leading to situations like... **Tigger (feeling neglected), 'Why would you want to play with that mouse when I'm here?'**

## Richard White OAM

*This article by Helen Cotter appeared in our March 2018 Newsletter, but it is worth repeating in this current series on past members, although Richard is still a member today.*

We're pleased to hear that Richard White, a long-time member of Lung Life, has received an Australia Day award – the medal of the Order of Australia (OAM) – for service to community health. Richard has been, and still is, very involved with support for people with dust diseases.

Richard has been a member of Canberra Lung Life Support Group for over 10 years and has been very active in keeping us informed about dust diseases - providing us with information about the diseases, and about the Senate Inquiry and its outcome.

Over thirty years ago, in Darwin, Richard White was sandblasting barges and inside inspection plates, blasting and cleaning out in the confined space of the RAAF bulk fuel tanks. In 1992 he was diagnosed with silicosis, a lung disease caused by exposure to toxic dust in the workplace.

For years he has been struggling to get equity in treatment and support for himself and for others with such conditions. He is currently the Convenor of the Australian Sandblasting Diseases Coalition.

Richard was very active in getting a Senate Inquiry into dust diseases, *Workplace Exposure to Toxic Dust*, in 2008, which recommended increased awareness, information, prevention and improved treatment and standards at a national level. He was significant in pushing and advocating to get it established.

Since then a number of its recommendations has been adopted, including more specialised monitoring at work sites, along with 'on the spot' inspections. As well, the time limit for taking action has been increased.

One example of improvements after the Inquiry is seen in the Fire Services around Australia. Firefighters who have ingested toxic fumes or contaminants by swallowing, absorbing, or breathing, previously needed to fight through the courts to establish that the cancer they had contracted was from their workplace. Now they are automatically accepted for compensation.

We appreciate Richard's input very much. He has provided us with important information that increases our awareness of dust diseases and of the importance of good air quality at work, home and in the environment. Our congratulations to Richard for achieving the OAM. A wonderful honour.

*There will be more information on Richard and his life in an upcoming edition of the newsletter.*

## Fish'n Chips Luncheon

On 12 November 2020, 17 people attended the Lung Life fish'n chips luncheon at the Southern Cross Club in Yarralumla. With its ambience and pleasant view across the water, this is quite a popular venue with our members. Unfortunately, the day was overcast and rainy, but it didn't stop people enjoying the tasty food and good company.

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Answers to Puzzling – 1. sick, silk, sill, sell, well  
2. clothing

Answers to 'Australian Prime Ministers' relevant facts' – 1. Julia Gillard, 2. Robert Menzies, 3. Kevin Rudd, 4. Tony Abbott, 5. Harold Holt, 6. Bob Hawke, 7. Billy McMahon, 8. Gough Whitlam, 9. Ben Chifley, 10. John Howard, 11. Scott Morrison, 12. John McEwen, 13. Malcolm Turnbull, 14. John Gorton, 15. Paul Keating, 16. Malcolm Fraser.