

## March 2021 Newsletter

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

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**NEXT MEETING:** Thursday 8 April 2021  
10:15 am - 12 noon  
Weston Creek Labor Club  
Teesdale Close, Stirling ACT 2611

Guest speaker will be Val Dempsey who will speak about First Aid in everyday life.

### From the Editor

It is a beautiful time to be in Canberra, wonderful to see the amazing balloons hovering in the sky. Indeed, this edition includes a bit more about balloons.

And we're back! After a twelve month hiatus our monthly meetings are due to recommence on Thursday 8 April at the Labor Club in Weston Creek. As has become the norm you will need to check in to the club when you arrive (using the smart phone app if you are able). There will be a few other 'COVID rules' which will need to be followed when you are at the club.



Should you require further information please call Lyn Morley on 041 720 5613.

## Bronchiectasis (Part 2, you will find Part 1 in the February 2021 Newsletter)

It's important to know that each person may experience bronchiectasis differently. Having a regular airway clearance routine and responding early to flareups (exacerbations), generally helps to maintain a good outcome. Symptoms and quality of life are more likely to worsen if a person is not treated promptly, especially if they are experiencing a flare-up.

### **Treatment**

Although there is no current cure for bronchiectasis, early treatment is important to help improve how you feel, keep the condition well managed, and maintain normal lung function. Many patients manage their symptoms with an airway clearance routine (a cornerstone of bronchiectasis management) along with exercise, without the need for specific medications, except during flare-ups.

### **Current treatment options include:**

#### Medicines

**Antibiotics** are the most common medicine used to treat infection during flare-ups – these can be taken by mouth, inhaled (nebulised) or given into a vein (intravenously). **Nebulised medicines**, such as nebulised saline (salty water) may be prescribed to help clear mucus from the airways. Occasionally, patients may be prescribed **long-term antibiotics** to help reduce the number of flare-ups they experience.

#### Oxygen

Although not common, if your oxygen levels are low, oxygen therapy may be prescribed. Some patients may need continuous oxygen and others may only require oxygen during physical activity.

### **Self-management options include:**

#### Airway clearance program

Clearing mucus/sputum from the chest every day is very important to decrease the risk of flare-ups. A physiotherapist trained in airway clearance techniques can help you develop a daily clearance routine. This may potentially include breathing exercises, using positive expiratory pressure devices, inhaling saline via a nebuliser, positioning to open the airways and a prescribed exercise program.

#### Pulmonary rehabilitation

Pulmonary rehabilitation is an exercise and education program provided by specially trained health professionals that teaches you the skills needed to manage your symptoms and to stay well and out of hospital.

#### Staying active and healthy

Quitting smoking, being physically active, eating well, getting plenty of rest, enjoying friends, family, and hobbies, practising relaxation techniques, joining a support group, and keeping a positive attitude, are all things you can do to support your health and manage your bronchiectasis.

#### Ensuring your vaccinations are up-to-date

This may include discussing a seasonal flu vaccination and the pneumonia vaccine with your doctor, in order to help support your immune system.

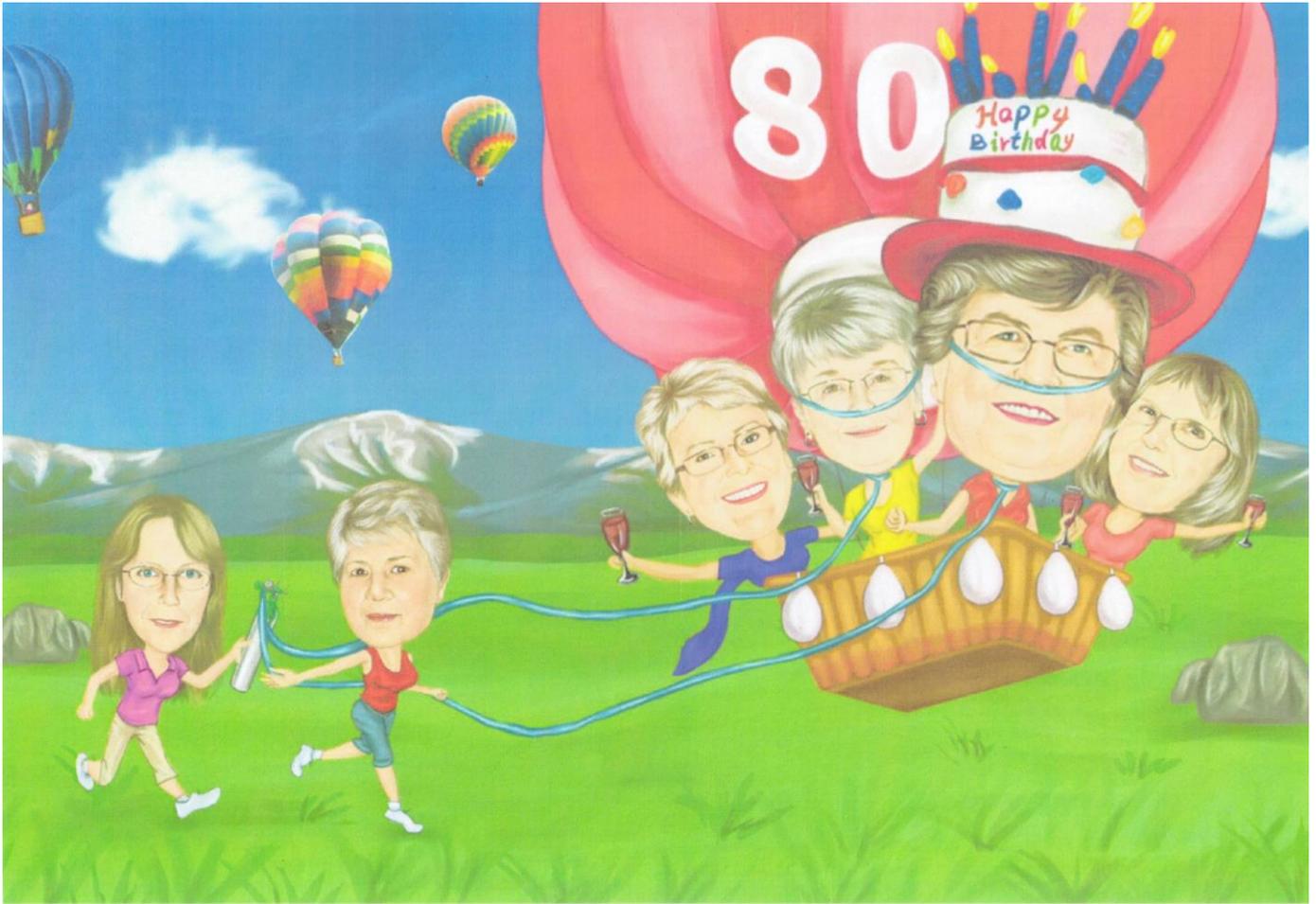
#### Accessing emotional support

Anxiety and depression are not uncommon in bronchiectasis and it is important to access support, if needed. Talk to your doctor or contact Lung Foundation Australia for referral to an appropriate support service.

For more information see “Overview | Lung Foundation Australia” at the following link:

<https://lungfoundation.com.au/patients-carers/conditions/bronchiectasis/overview/>

Would you like to ride in my beautiful balloon?



This picture depicts the caricatures of six past and present members of the Canberra Lung Life Support Group. They are from left to right: Jenny Keen, Robyn Meaney, Pam Harris, Maddie Fleming, Pat Stewart, and Lorna Rowland.

The picture was drawn in May 2012 to celebrate Pat's 80<sup>th</sup> birthday. Sadly, Pat passed away in 2016 as did Maddie. Robyn and Lorna died in 2018, while Jenny and Pam are both still active members of our group.



**The group at the LFA Education Day in April 2010. Can you see the likeness?**



**The group again, this time at Pat's birthday lunch in 2012.**

**A little trivia for you:** 'Would you like to ride in my beautiful balloon?' are lyrics from which song?  
**And a little harder:** Which band released the song in 1967?  
**Maybe a little easier:** Which airline used the tune as an advertisement in the early 1970s?  
(The answers are on page 6).

## **If you were an ancient Greek**

Helen Cotter

Here you are, living over 2500 years ago in Greece, along with Alexander the Great (who was actually Macedonian), Socrates, Aristotle, Plato, and a whole lot of other famous ancient Greeks. You know that your lungs are busy taking in air to cool your hot blooded heart – that's the job of your lungs. Just imagine what would happen if you didn't cool down that blood. One thing that would happen is that your 'humours' would get out of balance.

It's really important to keep those four humours in balance. Those humours are the things that make you who you are. They affect your personality; and your behaviour – and they affect your health. You know that your lungs produce cold, moist phlegm; your liver produces blood; your gallbladder makes black bile, and your spleen is responsible for yellow bile – these are the four important humours. If one or more of them produces too much or too little, well, who knows what would happen.

Feeling sluggish? Dull? Timid? Anxious? Your lungs are producing too much 'vapour'. You have to get your humours back in balance. Try some of this wonderful herbal medicine (and hopefully nothing worse) to help get rid of that excess vapour.

You could live for the next two thousand years (more or less) thinking about your lungs and body like this – until interested people started investigating round about the 1400s and found things to be different.

Reference: The History of the Lungs (stanford.edu)

<https://web.stanford.edu/class/history13/earlysciencelab/body/lungspages/lung.html>



## LUNCH at the IRISH CLUB in WESTON

Thursday  
11<sup>th</sup> March

Val (left),  
Pam (right),  
and Marina  
(lower right)  
are all smiles.



Roving reporter, **Chris Moyle**, attended the March lunch at the Irish Club with twenty other Lung Life Support Group members. She took these delightful photos of various members of group enjoying the occasion.

It was an enjoyable meal and a great chance to catch-up with friends. We also welcomed two new members, Julie Hayes, and Chris Gray. Chris is in the photo above seated next to Val Siemionow.

## What COVID-19 can do to the lungs

Doctors are still learning more about how COVID-19 can cause lasting lung damage. They know it can cause lung complications such as **pneumonia** and, in the most severe cases, **acute respiratory distress syndrome**, or ARDS. **Sepsis**, another possible complication of COVID-19, can also cause lasting harm to the lungs and other organs.

**COVID-19 Pneumonia** tends to take hold in both lungs. Air sacs in the lungs fill with fluid, limiting their ability to take in oxygen and causing shortness of breath, cough, and other symptoms. While most people recover from pneumonia without any lasting lung damage, sometimes the lung injury may result in breathing difficulties that might take months to improve.

**Acute Respiratory Distress Syndrome (ARDS)** results as more of the air sacs become filled with fluid leaking from the tiny blood vessels in the lungs. Eventually, shortness of breath sets in, which can lead to acute respiratory distress syndrome (ARDS), a form of lung failure. Patients with ARDS are often unable to breathe on their own and may require ventilator support to help circulate oxygen in the body. People who do survive ARDS and recover from COVID-19 may have lasting pulmonary scarring.

**Sepsis** occurs when an infection reaches, and spreads through, the bloodstream, causing tissue damage everywhere it goes. Lungs, heart, and other body systems work together but in sepsis, organ systems can start to shut down, one after another, including the lungs and heart. Even when survived, sepsis can leave a patient with lasting damage to the lungs and other organs.

**Superinfection** occurs because the immune system is working hard to fight the virus, and this can leave the body more vulnerable to infection from other bacteria or viruses. This can result in additional lung damage.

## Is COVID-19 lung damage reversible?

Generally, a patient's lungs can recover, but it takes time. It may take three months to a year or more for a person's lung function to return to pre-COVID-19 levels.

Reference: Johns Hopkins Medicine  
<http://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/>

## USEFUL NUMBERS AND WEBSITES

### **Health Support:**

**Lung Foundation Australia** is the national non-government body for lung health information and has a variety of useful information. Phone 1800 654 301 or [www.lungfoundation.com.au](http://www.lungfoundation.com.au).

### **Travel information:**

**ACTION:** Phone 13 17 10. Web site: <https://www.transport.act.gov.au>.

**Flexible bus service:** a free service that picks up from your home and takes you to places in your zone. Phone 02 6205 3555 or email: [flexiblebusservice@act.gov.au](mailto:flexiblebusservice@act.gov.au).

**Taxi Subsidy Scheme:** Phone 02 6205 1012.

**Interstate Patient Travel Assistance Scheme:** for those who need to travel interstate for medical treatment: Phone 02 5124 9082 or email: [IPTAS@act.gov.au](mailto:IPTAS@act.gov.au).

**Incidents and complaints:** Phone the Office of Regulatory Services (Public Transport Regulation) on 02 6205 4585 or email [taxiservices@act.gov.au](mailto:taxiservices@act.gov.au).

**Seniors Moving Safely:** road safety for older people, at <https://acrs.org.au/trust-report/seniors-moving-safely>.

**ACT Engine Immobiliser Scheme:** aims to reduce motor vehicle theft in the ACT by discounting the fitting of engine immobilisers to seniors' cars. For more information call Canberra Connect on 13 22 81.

**Service Stations Providing Driveway Service:** service stations where staff will (sometimes or always) provide driveway service for people with disabilities. Phone Access City Hotline 02 6257 3077.

### **Oxygen and life support information:**

**Oxygen provision:** Provided free to those identified as needing oxygen by a respiratory specialist. Phone 02 5124 1063; email: [oxygen@act.gov.au](mailto:oxygen@act.gov.au); CPAP provision also available for CPAP clients who meet the criteria.

**Essential Medical Equipment Payment:** provided annually to those who use oxygen, CPAP or other life support equipment. For more details, type in: *essential medical equipment payment* or check with Centrelink

**ACT Electricity Rebate:** The ACT Government provides a rebate for users of life support equipment such as oxygen or CPAP. For more details, contact: type in *ACT life support rebate* or [www.revenue.act.gov.au/community-assistance/life-support-rebate](http://www.revenue.act.gov.au/community-assistance/life-support-rebate).

### **General information:**

**COTA ACT Seniors Information Line:** Phone 02 6282 3777 (business hours Monday to Friday) or [www.seniors.act.gov.au](http://www.seniors.act.gov.au).

**National Toilet Map:** You can find a map showing the location of all Canberra's public toilets at [www.toiletmap.gov.au](http://www.toiletmap.gov.au).

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Answers to the trivia questions: 'Up, Up and Away' sung by the Fifth Dimension.

It was used as a catchy advertisement by TAA.