How the Weather Affects Patients with Respiratory Conditions

Ainsley Ringma, Lung Care Nurse, The Australian Lung Foundation

As a nurse, I often hear my patients with chronic obstructive pulmonary disease (COPD) tell me that the weather has a major influence on their lung condition. One gentleman in particular used to tell me he knew when the wind was going to change as he always felt himself getting worse. Nearly all my patients tell me the humidity plays a major factor in their breathing and yet I still have the occasional patient who hates the dry air and prefers the moisture in the air. As all of this is anecdotal, it got me wondering if there was any research about the weather playing a role in the health status of patients with respiratory disease.

So, what are the weather-related factors that can affect a respiratory patient? Extremes in weather conditions can cause problems, but the obvious one for me, being in Queensland, is the humidity and the heat. Colder climates can affect people of course, but what about windy days, or still days when the pollen is floating around?

In an online article about COPD and the weather, How Weather Can Affect Your COPD, at http://www.everydayhealth.com/copd/weather-can-affect-copd.aspx, Dr Barry Make, MD, co-director of the COPD program at National Jewish Health states “Cold air and strong winds are known to be triggers for the worsening of COPD symptoms. If COPD patients go out when it is windy and they have to walk against the wind, there is more resistance, and that can be a problem.” If we look at this from a practical point of view, walking in windy weather is tiring, you are also more likely to have to fight to catch your breath and there is more likelihood of an increase in the dust particles in the air. Colder climates can affect people of course, but what about windy days, or still days when the pollen is floating around?

There are some useful tips on dealing with the heat in an online article by Deborah Leader, registered nurse called COPD: The Heat Is On: 8 Tips for Beating the Summer Heat With COPD, http://copd.about.com/od/complicationsofcopd/a/copdandsummer.htm

1. Drink plenty of fluids, fairly obvious for Australians, but please take into account if you have a fluid restriction.
2. Wear appropriate clothing and sunscreen.
3. Plan your activities carefully. Try to organise your activities or exercise for the coolest times of the day - early in the morning, or in the evening. When driving, park in shady areas if possible, and choose places to go that are air conditioned. Place sun protectors in your car when it is parked.
4. Keep cool, indoors. Use your air-conditioner if you have one and remember you do not need it to be freezing cold. Some people with severe COPD may be able to obtain a government subsidy to help with the cost of running an air conditioner. Discuss this with your doctor or respiratory nurse.
5. Use the buddy system. This means making sure that someone contacts you at least twice a day to check that you are OK.
6. Avoid rigorous exercise or excess activity.
7. Take your medications as directed.
8. Pay attention to weather reports.

Many of these suggestions are helpful in all weather conditions not just in the heat. So, good luck out there, and, as the saying goes, “We can't change the weather, so make the most of it”. Enjoy each day as you find it.
The Kylie Johnston Lung Cancer Network (KJLCN) Update
Kerrie Callaghan, Projects/Communications Coordinator, The Australian Lung Foundation

Join a shine a light on LUNG CANCER vigil this November

November is Lung Cancer Awareness Month and the Kylie Johnston Lung Cancer Network (KJLCN) invites all our supporters to join one of our shine a light on LUNG CANCER vigils to help stamp out the stigma of lung cancer and provide your support for an earlier diagnosis of the disease. There are currently three vigils taking place, but if you wish, you can host your own vigil and the Lung Foundation will support you by providing a checklist, event flyers, shine a light on LUNG CANCER torches and publicity.

shine a light on LUNG CANCER vigils will be held in the following cities:

- Sydney – Saturday, 12 November 2011, 7:15pm - 9:00pm
  Start with a walk from Macquarie Street along the Cahill Expressway to Observatory Rotunda
- Perth – Saturday, 12 November 2011, 6:45pm - 8:00pm
  Gather in Victoria Gardens for a short walk around Claisebrook Cove
- Canberra – Tuesday, 22 November 2011, 6:30pm - 8:00pm
  Walk from Old Parliament House along Federation Mall to New Parliament House

Speeches and a commemorative one minute silence will be held at all three vigils and shine a light on LUNG CANCER torches will be available for purchase at $5 each. You can register online to attend one of the vigils at www.lungfoundation.com.au/shinealightonlungcancer

If you can’t attend a vigil but would like to support the shine a light on LUNG CANCER initiative, why not purchase a torch online or make a donation? shine a light on LUNG CANCER is made possible through a partnership with the Lung Cancer Alliance www.lungcanceralliance.org/shinealightonlungcancer/, a US based non-profit organisation dedicated solely to patient support and advocacy for people living with lung cancer and those at risk of the disease.

New mesothelioma patient booklet
Cancer Council Victoria has recently launched a new booklet, Mesothelioma: a guide for people with cancer, their families and friends. A first of its kind in Australia, the booklet takes a comprehensive look at dealing with a diagnosis of malignant mesothelioma and the topics covered include, diagnosis; treatment options; support options; and living with advanced cancer. It also provides practical information, such as dealing with the financial and legal implications of a mesothelioma diagnosis. To order a copy, visit www.cancervic.org.au/resources

Lung cancer patient DVD now available in 12 languages
The lung cancer patient DVD, Lung Cancer: Understanding, Managing, Living produced by the Lung Foundation and the Peter McCallum Cancer Centre in partnership with Cancer Council Victoria is now available in 12 languages – Mandarin, Cantonese, Greek, Italian, Turkish, Arabic, Farsi, Macedonian, Croatian, Serbian, Vietnamese and Malay. Hard copies are available and will soon be available to download from the KJLCN website, www.kjlcn.org.au, or the Lung Foundation’s website www.lungfoundation.com.au

For more information about any of the KJLCN initiatives, please contact Kerrie Callaghan on 07 3251 3641, or email kerrie@lungfoundation.com.au

News from the World of Interstitial and Orphan Lung Disease – Pulmonary Interstitial Vascular Organisational Taskforce (PIVOT) Report
Nigel McPaul, Group Projects Officer, The Australian Lung Foundation

The development of an Idiopathic Pulmonary Fibrosis (IPF) Registry, to be used as a platform to study the incidence and prevalence of IPF is now underway. This National Australian Database Registry is expected to be operational in January 2012 and will not only focus the Australian respiratory medical community on this condition, but will also foster national and international collaborative efforts of research into IPF. PIVOT expects this exciting program, developed by Dr Tamera Corte at Royal Prince Alfred Hospital in Sydney, will benefit drug trial research, epidemiological research and medical research; raise the general awareness of IPF; and result in the development of patient support networks for IPF patients in Australia. If you would like any further information about PIVOT or the Registry, please call Nigel McPaul on 07 3251 3642, or email nigel@lungfoundation.com.au

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News from the Lung Care Nurse

Ainsley Ringma, Lung Care Nurse, The Australian Lung Foundation

Is that Christmas knocking on the door? How this year has flown! Christmas in Australia always means extremely hot weather and, with summer approaching, I have included some tips on coping with the heat in my earlier article in this newsletter. Through the 1800 number in the Information and Support Centre, I have already fielded a number of calls about handling different weather conditions and the problems that the different seasons in Australia can bring. One gentleman is surrounded by canola fields and has to deal with all the fertilisers and pollen in the air. Another lady is from the Northern Territory and has to contend with controlled burn-offs and the dust. Unfortunately we have no simple solutions to these problems, but a suggestion I had for both was to use their air conditioners. Using your air-conditioner, if you have one, can help you deal with the humidity because it helps with taking the moisture out of the air - remember, it is not necessary to have the temperature set too cold. For people dealing with fires and dust, the air conditioner may also filter the air for you.

The Australian Lung Foundation’s Multi-centre Clinical Trials Network (MCTN)

Nigel McPaul, Group Projects Officer, The Australian Lung Foundation

Patients are taking an increasingly active role in managing their own health and the Lung Foundation’s MCTN Patient Community helps its members do this by providing them with information on new clinical trials that are happening within Australia. Without clinical research, drug and medical device manufacturers would be unable to bring new treatments to the people who need them. Membership in the MCTN Patient Community is FREE and with no obligation. You can register through the MCTN website, www.mctn.org.au, or contact Nigel at the Lung Foundation on 07 3251 3642 or email nigel@lungfoundation.com.au for more information.

LungNet Education Days

As we approach the end of 2011, we acknowledge the success of another series of LungNet Education Days in each of the States this year, as well as the inaugural LungNet Education Day in the ACT. Over 900 people registered for these popular events throughout the year and enjoyed presentations on a range of different topics including sleep apnoea; fitness to fly; correct puffer and inhaler techniques; maintaining healthy airways; the use of oxygen; bronchiectasis and keeping positive whilst living with a lung condition. We thank all our wonderful guest speakers who generously gave up their time to present, our informative Trade and information displays and all our helpers and volunteers assisting with the days. We look forward to next year’s events. Planning has already begun!

New Lungs for Denise

On 22 September, Denise Stevenson, one of the Lung Foundation’s long standing members of the LungNet News volunteer team in Brisbane, underwent a double lung transplant at The Prince Charles Hospital in Brisbane. Denise who has the genetic lung condition, alpha1-antitrypsin deficiency had been on the transplant waiting list for over two years before the ultimate gift was given. The Australian Lung Foundation staff and volunteer team wish Denise all the very best for the fastest possible recovery.

As mentioned in my earlier article, some States and Territories may have a subsidy for those who require air-conditioning or heating to assist them with managing a chronic disease. It may be worth talking to your doctor or specialist about this to see if you are eligible.

Many of you will have attended the LungNet Education Days in your home States, and by the time you read this, I will have been to the Queensland Day with my local Support Group. We always have a great time and I thoroughly recommend attending them. I always learn something new and am amazed at the quality of the guest speakers we are able to attract.

Editor’s Note: Unfortunately, Ainsley’s 12 month contract as Lung Care Nurse at the Lung Foundation has now come to an end. We are currently searching for a replacement for her (which is proving no easy task), but in the meantime, she has agreed to continue working with us and will be setting aside some time from her busy job with Queensland Health to answer your queries. If you would like to contact Ainsley, please call 1800 654 301 or email ainsley@lungfoundation.com.au

LungNet is an initiative of The Australian Lung Foundation | Toll Free 1800 654 301
Dear Readers,

Welcome to the November LungNet News, the final edition for 2011. It is hard to believe that another year has almost passed by and once again, it has been an extremely busy 12 months for all staff at the Lung Foundation.

"Show Us Your Lungs!"

"Show Us Your Lungs!" was launched on 10 October and is the Lung Foundation’s new national public relations campaign designed to educate the public to notice early signs of lung disease and encourage them to take action by seeing their doctor. The Lung Foundation wants Australians to take their lung health seriously because a recent survey has shown that 36% of people consider their lungs "very unimportant" when, in fact, lung diseases kill over 50 people each day in Australia. As part of the "Show Us Your Lungs!" campaign, we have developed a Community Service Announcement (CSA), which is a little bit cheeky and designed to appeal particularly to the 40 and over age group. The Lung Foundation has been extremely fortunate to have John Jarratt (pictured) star in our CSA! John came into the Lung Foundation offices for a day of filming in September and we were delighted to welcome such a renowned Aussie actor to the office! A number of other celebrity advocates have come on board to support the campaign, so look out for the CSA on your television screens. You can support the new campaign by following us on Twitter www.twitter.com/lungfoundation and liking us on Facebook www.facebook.com/australianlungfoundation

Parliamentary Briefing Night

On 12 October, the Lung Foundation organised a briefing night for Members of Parliament and Senators at Parliament House in Canberra. This was a great opportunity to bring together Parliamentarians and showcase some of the work of the Lung Foundation. The aim of the event was also to try to make the Federal Government realise that it is time for Australians to take their lung health seriously. In addition to offering lung screening tests to willing participants, the evening provided a snapshot of the state of the nation’s lung health and included presentations from health professionals working in the area of lung disease and a patient advocate who has a diagnosed lung condition. The event provided an opportunity to distribute “Show Us Your Lungs!” promotional material.

Staff News

We are delighted by the news of the safe arrival of Banjo Thomas Lather, a son for Karen Lather, Australasian Lung cancer Trials Group (ALTG) Liaison Officer and her husband, Peter, and a brother for Ceinwen. We enjoyed meeting Banjo when the Lathers popped into the office and wish Karen all the best during her maternity leave.

Congratulations to Business Development Manager, Jo Mason on her wedding to Gary Smith which took place in Brisbane on 27 August. Jo and Gary enjoyed a second celebration in the UK in September followed by a honeymoon in Venice.

New Version of The COPD-X Plan

The most recent research on chronic obstructive pulmonary disease (COPD) is now reflected in the newly updated version of the Lung Foundation’s document, The COPD-X Plan: Australian and New Zealand Guidelines for the Management of Chronic Obstructive Pulmonary Disease. Significant changes have been made to COPD-X which can be accessed via the Lung Foundation’s COPD-X website, www.copdx.org.au

Breath of Life Music Festival

Planning for the 2012 Breath of Life Music Festival is well under way. The Festival will be held at Inveresk Park in Launceston, Tasmania on 10 and 11 March 2012 and an exciting line-up of national and local performers is in the process of being finalised. For further information, please see the website, www.breathoflifefestival.com

Correction to From the CEO’s Desk in August 2011 LungNet News

In the August 2011 edition of LungNet News, it was reported that Mr John Caravousanos had tendered his resignation from The Australian Lung Foundation’s National Council. We wish to advise that this statement was incorrect and that Mr Caravousanos’ term as Councillor had ended and he did not seek a further term.

Christmas Cards and Christmas Seals Appeal

As always, at this time of year, we enclose our selection of Christmas card designs, which have been designed by Gympie artist, Nonie Metzler, exclusively for the Lung Foundation. You will also find enclosed an accompanying sheet of Christmas Seals. I hope that you will support us by purchasing cards and donating to our 2011 Christmas Seals Appeal. Please remember that all donations over $2 are tax deductible.

Season’s Greetings

On a final note, the Lung Foundation’s National Council and staff wish LungNet News readers and their families all the best for the festive season. As always, we thank our wonderful volunteers, Support Groups and financial members of the Foundation, whose invaluable contributions have helped ensure a successful year in 2011.

Yours Aye

Diary Dates 2011

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LungNet is an initiative of The Australian Lung Foundation | Toll Free 1800 654 301
In medicine, the term treatment compliance (or treatment adherence) describes how a patient follows the medication regime prescribed by their doctor. This article will focus on medication or drug compliance only, but the term also covers the use of medical appliances or therapies e.g. compression stockings, wound care, physiotherapy, exercise or counselling. The term for not following, or ignoring your doctor’s prescribed treatment, is non-compliance (or non-adherence) and this is one of the main reasons why treatments are unsuccessful. Non-compliance with medication regimes is common and leads to ineffective management; deterioration of patients’ health; substantial worsening of the disease; hospital admissions; death, and increased health care costs.

Why don’t patients comply with treatment recommendations?

- Denial of the problem. Many diseases and conditions, in particular those that don’t have symptoms that bother the patient, are easy to ignore, even when they have been diagnosed.
- Cost of treatment. Costs may not be subsidised or covered by insurance, and the greater the out-of-pocket cost to the patient, the less likely they are to comply.
- Difficulty of the regimen. Patients may have trouble following the directions e.g. having to take a pill in the middle of the night, or ensuring their inhaler technique/use is correct. This may create a barrier to compliance.
- Unpleasant outcomes or side-effects of treatment. Any perceived negative outcome, such as an unpleasant taste of a medicine, or a possible side-effect may keep the patient from complying with the treatment.
- Lack of trust. When patients are not convinced that the treatment will be successful, they are less likely to follow their medication regime. They don’t trust that compliance will really improve their health.
- Lack of knowledge/indifference. When a patient doesn’t realise the importance of their treatment i.e. its benefits and effects, or doesn’t care if the treatment works or not, the less likely they are to comply.
- Previous experience. Patients will sometimes decide that if a treatment didn’t work in the past, they do not want to try it again. This is especially true where patients have a chronic or commonly occurring condition.

Your doctor’s actions can also contribute to poor compliance e.g. if they prescribe complex regimens; do not assess which inhaler device is appropriate and teach the correct technique/use; fail to explain the benefits and expected side effects of a medication; or do not consider your lifestyle or the costs of the medications.

It is important that you work with your doctor to make your treatment decisions together. Ask plenty of questions, take responsibility for your own decision-making, and explain what you think will and won’t work to your doctor.

In developing the medication regime, it is important that you are fully informed and understand:

- What the medication is for
- How the medication works and what the expected benefits are
- How to administer the medication
- How long the effects of the medication last
- What the possible side effects of the medication are and how to avoid or treat them
- If the medication will interact with other medications
- How long you have to take the medication
- What it will cost

The more you know about your treatments, and why you need them, the more likely you are to comply with what the doctor has prescribed. When you and your doctor have decided on a treatment, you should keep to the prescribed regime as best you can to ensure you receive the full benefit of the medication. Otherwise, your lung disease will be poorly managed and could get worse. Your symptoms may return, your health may deteriorate, and you may have to be hospitalised. If you find yourself tempted not to follow through with your treatment, contact your doctor to share your reasons, and try to work out an alternative you both can agree on.

COPD Patient Taskforce Report

Bryan Clift, Taskforce Chair

I welcome you to the final issue of LungNet News for 2011. With the Festive Season almost upon us, all members of the Taskforce wish everyone a happy, peaceful Christmas and the best of health during 2012.

We are still seeking additional interested people to join the Taskforce, particularly those who live in Capital Cities, and we would particularly welcome additional delegates from Adelie, northern Tasmania and the Northern Territory to help raise awareness of COPD in these communities. If you can spare a little time and are interested, please contact Karen Wright at the Lung Foundation on 1800 654 301 or email projects@lungfoundation.com.au

The Taskforce is currently focusing on recognising the unsung work of carers, particularly those unpaid people who care for family and friends who suffer from a disability such as a chronic or mental illness. According to Trish Hall and others from Families, Housing Community Services and Indigenous Affairs, this is estimated to be 16% of the total population of Australia. That is a huge number of people doing a carer job without recognition or remuneration.

The COPD Patient Stories Project is an important initiative and I encourage both patients and carers to submit your stories and experiences of living with COPD on a day to day basis.

The closing of the year has again seen the Lung Foundation and Taskforce engage in some exciting projects, focusing our efforts on educating people at risk of COPD. Firstly, the “Show us Your Lungs!” awareness campaign, mentioned elsewhere in this newsletter; and secondly, the activities around World COPD Day on 16 November.

Until next time, Bryan Clift
In 1992, Edna was diagnosed with interstitial lung disease (ILD) associated with rheumatoid arthritis. Shortly afterwards, her husband had a severe stroke and never regained consciousness. Suddenly, she found herself alone and realised she needed support. She wanted to meet others with the same disease, one that was not well known. She found that there were self-help/patient support groups for other conditions, but not for people living with chronic respiratory disease. As an ex-nurse she knew about the nursing side of ILD, but nothing about how to reorganise her life around living with it. She started looking for others in the same boat, to find out how they coped, and sought support from Dr Martin Phillips, a respiratory physician at Sir Charles Gairdner Hospital in Perth and State Chair of The Australian Lung Foundation. He encouraged her to start a group which could meet at the hospital with the support of the Department of Respiratory Medicine. Like many other support groups, LISA started out as a small group – three people with lung disease and three carers/family members, sharing information and learning to manage their conditions. At first, the group focused on the ILDs, but later broadened the focus to cover all chronic lung diseases. They exchanged information about lung health, services and treatments and also shared a cuppa and had a laugh together. After a couple of years of local and national publicity, people around Australia started ringing Edna seeking support. She could see there was a need for support groups in other places, so Dr Phillips took the idea to the Lung Foundation’s Chief Executive Officer and eventually “LungNet” was launched in the late 1990s at Sir Charles Gairdner Hospital.

Nineteen years after Edna and her friends started LISA, the group is still going strong. There is now more widespread community awareness of lung disease, pulmonary rehabilitation is available in many areas and there are guidelines on preventing, diagnosing and treating lung diseases. There are several Australian research studies looking into the causes and treatment of lung disease and, due to Edna’s efforts, there is a network of support groups around Australia, including seven in Western Australia. Edna has survived ILD much longer than she or the doctors ever expected. Although her group co-founders have all passed away, she has never given up helping people to live the best life they can despite their lung disease. Edna, we salute you and your valuable contributions!
Air Support Club, Liverpool, New South Wales

Article submitted by Sue Crowe, Secretary of the Air Support Club.

2011 marks the 10th Anniversary of the Liverpool Air Support Club, a group for people with a chronic lung disease, their family and carers. In May 2001, a group of patients attending the pulmonery rehabilitation program at Liverpool Hospital heard that support groups for people with chronic lung disease existed, but as there was nothing available in the South Western Sydney area, they decided to start a group of their own. We are a group of 40 members meeting at the local RSL Club, which also supplies us with a bus for monthly outings. Everyone enjoys these trips and, for some members, it may be the only chance they have to go out. Over the years, the Club has managed to raise funds for much needed equipment that is loaned to members when they need it. We hold raffles and many local businesses donate very generously.

We recently held a luncheon to celebrate our 10 year anniversary and it was wonderful to have several founding members attend. Our President, Betty Wells has worked tirelessly over the years and, where others have come and gone, she has been a stable influence in the Group. She has the warmest of hearts and loves nothing more than to do good for others. The feeling at our luncheon was one of much laughter, but also some sadness for those no longer with us. I am sure that all our past members would be thrilled that the group they began back in 2001 is still doing good work and is still going strong.

If you are interested in contributing a story that you believe would be of interest to LungNet News readers, please call 1800 654 301, email enquiries@lungfoundation.com.au or post to PO Box 847, Lutwyche, Qld 4030.

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Lungs in Action, Frankston and the Mornington Peninsula

Campbell Rule, Project Manager - Care in Your Community, Peninsula Health, Frankston, Victoria

Peninsula Health is the public health service delivering care to the Frankston and Mornington Peninsula communities in Victoria. In 2010 and 2011, Peninsula Health, under its Care in Your Community (CiYC) initiative worked with external partners to establish several Lungs in Action programs in the area. Peninsula Health was already running a number of Pulmonary Rehabilitation Programs (PRP), but felt it was important to start looking at options for providing exercise maintenance classes for PRP “graduates”. In late 2009, a Working Group of the Peninsula Health PRP Coordinators and the CiYC project team contacted the Lung Foundation to discuss using Lungs in Action in our area. The Working Group contacted fitness centres and gyms to seek their interest in delivering Lungs in Action and expressions of interest were received from the David Collins Leisure Centre in Mornington, and Monash University Frankston’s Monash Sport. Both these organisations were already delivering non-traditional sessions to groups like the elderly or the disabled and this made them well placed to work with Peninsula Health on Lungs in Action. The other local provider of PRP, the private John of God Nepean Rehabilitation Hospital, joined the Working Group as well, and has since worked with PACE Health Management, to start Lungs in Action in Frankston. Tracy Kelly, a private fitness leader linked in with our Working Group and subsequently started her own Lungs in Action program, working with the Peninsula Health PRP coordinators in Rosebud. A consumer representative was also invited to be part of the Working Group to ensure that the groups would be structured appropriately for the clients and would be in the right settings.

Lungs in Action has not always been easy, especially when a fitness leader completes the training, but then leaves for a different job. Venues have had to be changed when one doesn’t work out for some reason. However, we now have Lungs in Action groups run in traditional private gyms, council fitness centres and even an RSL. All have advantages and disadvantages.

Two main components have been important to the success of Lungs in Action so far:

1. The training put together by the Lung Foundation is comprehensive, well thought out and of a high standard. When backed up by the mentoring relationship with PRP Coordinators, the result is high quality, safe and evidence-based exercise groups for PRP “graduates” to maintain the gains from PRP and continue the social connections they have made.

2. Collaboration across public and private health and the private and public fitness industry has allowed us to understand each other’s “business”. We have worked hard to link the fitness leaders with mentors, to develop common pathways and referral mechanisms where possible, to ensure the cost is consistent and affordable across the groups, and most importantly, to ensure the groups are accessible by clients being referred from either private or public PRPs to any Lungs in Action.

Goals for the future are to establish a PRP and Lungs in Action on the Westernport side of the Mornington Peninsula. We look forward to more fitness leaders and exercise physiologists undertaking the Lungs in Action training and we would like to see more COPD Patient Support Groups develop in our area.

The Frankston and Mornington Peninsula area is far better serviced now than in 2009. New groups are starting as the existing groups reach capacity, and the links and relationships established have been fruitful. The Lung Foundation has been instrumental in the success of establishing exercise maintenance for people with COPD in our area, by creating the Lungs in Action training and model, and by supporting initiatives such as ours.

If you would like further information about Peninsula Health’s Lungs in Action programs, or would like to find out if there is a program near you, please call the Lung Foundation on 1800 654 301. Remember that you need to have previously completed a Pulmonary Rehabilitation Program.

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New Alpha-1 Booklet

The Alpha-1 Association of Australia (AAA) has produced a new information booklet on Alpha-1 Antitrypsin Deficiency, a genetically inherited condition which can have a serious effect on the lungs and liver. To help raise awareness of the condition, the AAA has also designed a poster for display in general practices and other medical establishments. The resources can be downloaded from the AAA website www.alpha1.org.au. For further information, contact the AAA on 07 3103 3363 or email enquiries@alpha1.org.au.
Lung Health Awareness Month and World COPD Day 2011

November is Lung Health Awareness Month and the Lung Foundation’s focus this year is on making lung function screening more readily accessible to the general public. Two major FREE lung function screening events have been coordinated and will take place at Federation Square in Melbourne and at Wynyard Park in Sydney on Wednesday 16 November. This event coincides with World COPD Day on 16 November, so please mark your calendars and help us raise awareness of chronic obstructive pulmonary disease (COPD). Anyone wishing to organise an event, such as a walk or an information display, is encouraged to do so and event materials and educational resources will be available as in previous years.

For further information about World COPD Day, or the lung function screening events, please contact Karen Wright on 07 3251 3647 or email projects@lungfoundation.com.au

New COPD Management Resource Available

The Lung Foundation has recently launched a new resource for clinicians who manage patients with chronic obstructive pulmonary disease (COPD). Stepwise Management of Stable COPD is a one-page pictorial summary of the evidence-based management interventions for patients with mild, moderate or severe COPD. Based on The COPD-X Plan, this quick reference guide has been developed in response to requests from clinicians caring for COPD patients. Adelaide-based general practitioner and Chair of the Lung Foundation’s General Practitioners’ Advisory Group, Dr Kerry Hancock, was involved in the development of the new resource and believes it will become a well-used guide for general practitioners, practice nurses, community nurses, respiratory nurses, pharmacists, physiotherapists and general physicians. “As a GP, I understand the need to access information quickly and in an accessible format,” said Dr Hancock. “Our aim in developing this new product was not to replace The COPD-X Plan, which is an important source of detailed information, but to provide a summary resource that is more compatible with the realities of daily clinical life in a busy general practice.”

To access the new resource, visit www.lungfoundation.com.au/professional-resources

Pat Carroll Running Group Raises Funds for the Lung Foundation

On Sunday 3 July 2011, 210 members of the Pat Carroll Running Group (PCRG) in Brisbane took to the streets of the Gold Coast to take part in the annual Gold Coast Marathon. As if completing the Marathon wasn’t achievement enough, the runners also pledged to raise funds for the Lung Foundation and their efforts resulted in an amount of $15,688 being raised. Chief Executive Officer, William Darbishire was presented with the cheque and said, “The Lung Foundation sincerely thanks all the members of PCRG for their fantastic support. The funds raised will go towards supporting those with lung disease and their families and educating the public about the importance of lung health.” Group founder, Pat Carroll, has a strong connection to the Gold Coast Marathon having competed in the event since 1982, winning it four times. “We are delighted to be involved with this worthy cause” said Mr Carroll, “Several members of the group have been touched by lung disease and we wanted to do something to help. The Gold Coast Marathon is a terrific way to demonstrate the importance of healthy lungs.”

For further information about the PCRG, please visit www.patcarroll.com.au If you are interested in fundraising for The Australian Lung Foundation, please contact Jo Mason on 07 3251 3643 or email jo@lungfoundation.com.au

Tribute to Karen Munro

The Lung Foundation is deeply saddened by the passing, on 23 September, of lung cancer patient, Karen Munro from Warragul, Victoria, aged only 41. Karen, a fitness fanatic and never-smoker was diagnosed with Stage 4, inoperable lung cancer in February 2010, but refused to let her diagnosis stop her from taking part in one of the activities she loved most – cycling. Having completed her first Ride Hard to Breathe Easy challenge, cycling from Adelaide to Melbourne in January and February 2011 to raise awareness of lung cancer, Karen competed in her second challenge – a 24 hour endurance cycling event later in February. She was passionate about helping to raise awareness of lung cancer and through the Ride Hard to Breathe Easy initiative also raised valuable funds for the Lung Foundation’s national lung cancer program. Our sympathies are with Karen’s husband Steve, her parents, Brian and Sylvia and her brother, Craig. Karen’s Ride Hard to Breathe Easy legacy will live on as her family and friends build on her achievements.

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