

The Australian Lung Foundation Inc.

2009
Annual Report



**THE AUSTRALIAN
LUNG FOUNDATION**

"When you can't breathe...nothing else matters"™



Who We Are

The Australian Lung Foundation was established in 1990 by a group of Thoracic Physicians concerned about both the chronic shortage of funds for research work in respiratory medicine and the impact of lung disease on our community. We are a registered charity with our Head Office located in Brisbane. The Australian Lung Foundation strives to meet the need in the community of reducing the significant and debilitating cost of lung disease, both in human and financial terms.

Vision

The alleviation of lung disease for all in Australia.

Mission

To make lung health a priority for all in Australia.

Goals

- Promote lung health
- Influence public and corporate policy
- Empower patients, their families and carers
- Work with clinicians to promote best practice in prevention, diagnosis and management
- Encourage and facilitate research into lung disease
- Best practice in governance of The Australian Lung Foundation

Values

We strive for excellence and quality outcomes, with respect for the individual, integrity and ethical behaviour as integral tools when we work with our community: whether they are patients, their families and carers; stakeholders or employees.

Our Undertaking

The Australian Lung Foundation is focused on reducing the impact of lung disease on the community through eight key programs:

1. LungNet Information and Support Centre
2. Chronic Obstructive Pulmonary Disease (COPD)
3. Lung Cancer
4. Interstitial and Orphan Lung Diseases
5. Chronic Cough – Infants, Children and Adults
6. Multi-centre Clinical Trials Network
7. Research Awards
8. Indigenous Lung Health



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2009 has been a year of great success for The Australian Lung Foundation and one of the most important in our 19 year history.

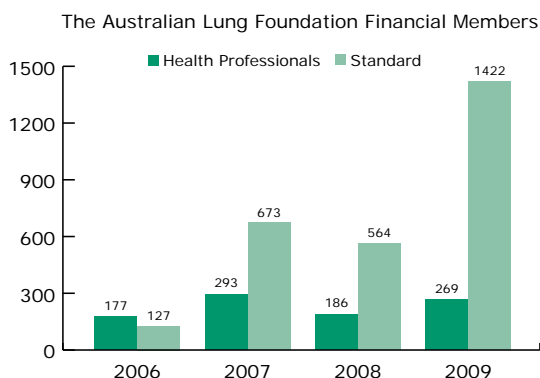
The year has been characterised by extreme dedication to each of our projects and initiatives by our staff, volunteers and advocates.

One notable legislative victory was the inclusion of COPD in the Federal Government's Asthma Management Program.

Lung disease is responsible for one in three deaths and ranks as Australia's third killer after heart disease and stroke. Clearly, there is much work to be done in the fight against lung disease and the Lung Foundation is well positioned to play its part.

One of the Lung Foundation's key goals is to encourage and facilitate research into lung disease. In 2009, there was a healthy 50% increase in the amount of money expended on Research Awards. This is particularly pleasing in view of the difficult economic climate. The Lung Foundation management collaborated closely with the Education and Research Standing Sub-Committee of the Thoracic Society of Australia and New Zealand, resulting in a significant increase in the number of good quality submissions for the various Research Awards offered.

I am also delighted to report that the Lung Foundation financial membership levels increased during 2009. We now have 1,691 members, an increase of 55% over the previous year. It is particularly pleasing to note that a large proportion of these members are health professionals. Membership of the Lung Foundation gives the community an opportunity to add their voice to the only charity devoted to serving everyone in Australia with a lung disease.



My very sincere thanks goes to all those who support the Lung Foundation – whether it is by financial means or by volunteering time so selflessly. Membership of our various Committees and Consultative Groups of Key Opinion Leaders has also grown in 2009 and we now have more than 200 health professionals voluntarily assisting us on the various programs. This is underpinned by hundreds of volunteers who assist us with tasks ranging from acting as marshals on event days to preparing and checking legal documents. Undoubtedly, we could not function without this incredibly valuable and generous input. We were delighted to see that Dr Michael Boyer, one of our key volunteers, was included in the Australia Day 2010 Honours List for service to medical oncology as an educator and clinical researcher and through the development of integrated care facilities for people with cancer.

The National Council has also had a busy year and I am grateful for the time, effort and dedication to make our meetings so successful. In 2009, I established the National Council Executive Committee which meets regularly between full Council Meetings. This has been a very positive step and a number of strategies have been actioned expeditiously with benefit for the Lung Foundation.

As you will read in this Annual Report, 2009 has been an exceptionally busy and successful year for The Australian Lung Foundation. This is principally due to the dedicated and talented team led by our Chief Executive Officer, William Darbishire at the National Office. I am sure you will find their reports herein most enlightening. I commend the 2009 Annual Report of The Australian Lung Foundation to you.

Dr Robert (Bob) Edwards
National Chairman



2009 was filled with many successes as The Australian Lung Foundation worked to help Australians breathe easier, and we thank you for being with us every step of the way.

While navigating the challenges of a changed philanthropic and business environment, significant progress was made against our key strategic goals. We returned our operating

result to a surplus, while simultaneously laying the foundation for further expansion in both service provision and industry consolidation.

Our strategy is very clear; the Lung Foundation will continue focusing on our vital strategic initiatives to make our organisation stronger, more agile and more competitive as demand for our services inevitably grows.

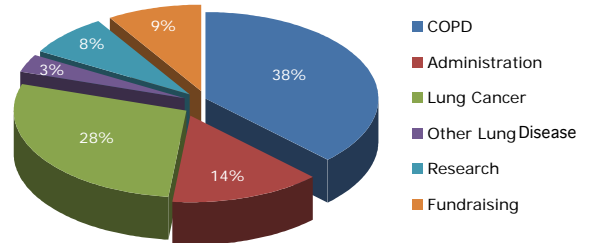
Now in its 20th year, the Lung Foundation is the leading organisation working to improve lung health and prevent lung disease in Australia. We continue to push for more stringent measures in tobacco control to further reduce the number of adults and children who are caught in nicotine's deadly grasp.

We have continued to advocate for those burdened by lung disease and have enjoyed some positive outcomes from these lobbying efforts. Highlights during the year include:

- The COPD Coordinating Committee and its General Practice Advisory Group established The Australian Lung Foundation COPD National Program Strategic Plan, 2010 to 2013.
- Together with the Thoracic Society of Australia and New Zealand (TSANZ), the Lung Foundation was nominated as the Australian lead body for the '2010: International Year of the Lung', an initiative of the Forum of International Respiratory Societies.
- Professor Kwun Fong and I were invited to become members of The National Lung Cancer Advisory Group
- Continuation of efforts towards consolidation of 'respiratory industry players' with a round table meeting of Presidents hosted by the Lung Foundation.

The results for the year have been positive, with a surplus of \$251,946 (the corresponding figure for 2008 was a deficit of \$1,685). As shown in the chart, the administration expenses reduced to 14% in 2009. This is a pleasing result when compared with other Not-for-Profit entities and will serve to give confidence to our donors and supporters as it demonstrates that the bulk of our income is spent on projects and research.

The Australian Lung Foundation 2009 Combined Expenditures



The Lung Foundation could not have achieved its 2009 outcomes without our volunteers. The number of volunteers working with us has grown once again this year and there are now more than 500 people who selflessly give their time to the Lung Foundation.

The Lung Foundation community suffered several painful blows in 2009 and early 2010 with the passing of Mrs Yvonne Bedson, Ms Elizabeth (Liz) Simon, Professor Peter Black and, as reported in the 2008 Annual Report, Dr William Scowcroft. Yvonne worked with the Lung Foundation for many years, both as Group Leader of the largest LungNet self-help patient support group 'Lungs and Respiratory Friends' (LARF), with more than 1000 members; and also as a strong patient advocate, serving on our COPD Coordinating Committee. Liz was one of the fiercest lung cancer patient advocates and I feel privileged to have worked with her in our lobbying efforts. Peter Black was our New Zealand COPD Coordinating Committee representative and brought a measured and incisive contribution to the Committee, often attending meetings by making a day trip from New Zealand; he was also one of the driving forces behind the Australian COPD Research Network (ACORN). These Lung Health Warriors are greatly missed.

The National Council and I are deeply appreciative of the support from the staff and volunteers who have worked so hard on day-to-day projects and initiatives and delivered so strongly on the goals of our strategic plan.

William Darbishire
Chief Executive Officer

CHIEF EXECUTIVE OFFICER'S MESSAGE

OUR PROGRAMS

The Australian Lung Foundation administers a number of disease specific programs that are overseen by multi-disciplinary Consultative Groups of Key Opinion Leaders. A brief overview of the 2009 activities of the various programs is outlined on the following pages.



Heather Allan
Director, COPD
National Program

Chronic Obstructive Pulmonary Disease National Program

The COPD National Program, under the leadership of Prof Peter Frith, had another successful year in 2009. The Lung Foundation is extremely fortunate to work with many clinical and patient volunteers whose commitment, energy and creativity have been the driving force in meeting the goals set out in the COPD Strategic Plan.

Guiding the work of the Lung Foundation in relation to Chronic Obstructive Pulmonary Disease are four important committees: The COPD Coordinating Committee, the General Practice Advisory Group, the COPD Evaluation Committee and the Australian COPD Patient Taskforce.

The following lists some of the key achievements of the year.

- **Advocacy** For the first time, Chronic Obstructive Pulmonary Disease will be included in the Department of Health & Ageing's Asthma Management Program. The Australian Lung Foundation will be working with the Asthma Foundations of Australia and the National Asthma Council Australia to include COPD messages in clinical training and consumer awareness programs.
- **Clinical support** Clinical groups worked to update both the Pulmonary Rehabilitation Toolkit and the COPD-X Guidelines. These resources continue to be accessed internationally. Work has also been carried out by the University of Adelaide to review the effectiveness of the COPD-X Checklist with focus groups of general practitioners. The feedback will guide us in the redevelopment of this resource in 2010.
- **Primary Care Collaborative** For the first time, COPD has been included in the important work of the primary care collaboratives. The Lung Foundation has worked with the collaborative to ensure general practitioners and practice nurses have the resources required to support their work in the diagnosis and management COPD.
- **New patient resources** Work has been carried out to develop a new Handbook for users of oxygen therapy. Early drafts of this important resource have progressed and it is expected it will be available in April 2010.
- **Community awareness** The Australian Lung Foundation launched an important initiative in preparation for 2010, The International Year of the Lung. The Lung Health Checklist is a clinically developed checklist to help the public recognise the important, but often ignored, symptoms of lung disease. To date, thousands of people have filled out the checklist on line www.lungfoundation.com.au
- **Lungs in Action** Lungs in Action is a community based exercise program that will support those who have completed pulmonary rehabilitation to maintain the gains achieved at rehab. A pilot program on the Gold Coast and Cairns is now complete and data collected to date are showing early promise of the positive impact this program has on keeping those with COPD well. The Lung Foundation will continue to support Lungs in Action, despite the fact that pilot program funding by Government is now at an end. Our goal will be to collect data for a further 12 months to confirm early positive results and to support the sustainability of the program into the future.
- **Better Living with COPD: A Patient Guide** This important resource that guides those living with COPD in daily management of COPD continues to be in great demand. Over 15,000 copies have been distributed throughout Australia to patients, general practitioners, respiratory nurses, pulmonary rehabilitation programs and community health centres.



COPD Evaluation Committee

The COPD Evaluation Committee is overseen by the COPD National Program. The Committee is chaired by Professor Michael Abramson and its primary purpose is to update The COPD-X Plan: Australian and New Zealand Guidelines for the management of Chronic Obstructive Pulmonary Disease (COPD-X). The Committee meets quarterly to review and evaluate the latest published evidence in COPD and make recommendations to update the content of COPD-X. The latest version is accessible via the Lung Foundation's COPD-X reference site, www.copdx.org.au

Over the course of 2009, approximately 100 papers & 200 abstracts were reviewed by the Committee, with around 40 additional papers cited in COPD-X. The document is well-referenced and now contains over 300 references.

The COPD-X reference site, www.copdx.org.au is well-utilised with an average of 373 visitors per day in 2009 – a 36% increase on 2008. The average number of page views per day in 2009 was 904 – a 69% increase on 2008.

In 2009, the COPD Evaluation Committee began the process of obtaining endorsement of COPD-X from the key respiratory bodies in Australia and New Zealand. To date, endorsement has been received from the Royal Australian College of Physicians and the Asthma and Respiratory Foundation of New Zealand.

Heather Allan Director, COPD National Program



Glenda Colburn
Program
Development
Manager

Lung Cancer National Program

The Lung Foundation's Lung Cancer National Program had a very productive and successful 2009. The Lung Cancer Consultative Group (LCCG), under the leadership of the Chairman, Prof Kwun Fong, is a broad based multidisciplinary group, with national representation, assisting the Lung Foundation with the development of lung cancer-related projects. LCCG meets quarterly and, in consultation with consumers, is striving to reduce the impact of lung cancer.

The National Lung Cancer Program has grown significantly during 2009 which has assisted in raising the profile and awareness of this unforgiving disease that has such a major impact on Australian lives. LCCG goals for 2010 are to enhance our lung cancer educational program/resources and develop broader community activities. The following initiatives were established in 2009:

- **Strategic Plan 2010 - 2012**

The Lung Foundation's Lung Cancer National Program has developed a strategic work plan for 2010 – 2012. Five major focus areas will guide and inform the framework for future lung cancer projects – they are: Clinical (awareness, support, education); Community (awareness, support); Governance and Funding; and Research and Advocacy.

- **IASLC – 2013 World Conference on Lung Cancer**

A successful Australian bid was submitted by LCCG to host the 15th World Conference on Lung Cancer (WCLC) 2013 in Sydney. It is anticipated that this event will attract more than 7,500 delegates from around the world. Activities are underway in preparation to host this event including a launch/invite at the 14th WCLC 2011 in Amsterdam. William Darbishire and Glenda Colburn attended the 13th WCLC in San Francisco in July 2009 which provided an opportunity to progress the planning for the 15th WCLC in Australia.

- **Australian Lung Cancer Conference**

The third Australian Lung Cancer Conference (ALCC) which will be held at the Sofitel Melbourne on Collins from 7th – 9th October 2010. Two satellite workshops – a Lung Cancer Nurses Workshop and a Lung Cancer Bio Markers Workshop will also be undertaken. International speakers will include Dr David Gandara & Dr Fred Hirsch from the US with other keynote speakers still being confirmed. This conference will attract more than 300 delegates. Up-to-date conference details are available at www.alcc.net.au.

- **New Patient Resources**

A new introductory information brochure on Lung Cancer was published.

• **Australian & New Zealand – Lung Cancer Nurses Forum**

The ANZ-LCNF was established in 2009 to provide a forum for specialist nurses working with people affected by lung cancer and mesothelioma and to promote a standardized, evidence-based approach to the care delivery for all. Terms of Reference have been developed and are awaiting endorsement from the Cancer Nurses Society of Australia (CSNA).

Glenda Colburn, Program Development Manager



Kerrie Callaghan
Project Coordinator

Kylie Johnston Lung Cancer Network

The Kylie Johnston Lung Cancer Network (KJLCN), chaired by Associate Professor Matthew Peters, focused on fundraising and grant submissions for improved patient support services and produced a number of important patient support materials. The following are examples of some of the key achievements for 2009:

- Hosted a Gala Lunch for Lung Cancer in November and, in partnership with the Rotary Club of Robina, a Corporate Charity Golf Day in August, more than \$20,000 was raised to help employ a part time Lung Care Nurse on our 1800 toll free number.
- Released the second edition of Lungevity Stories – a book of inspirational stories from lung cancer patients, carers, family members and several health professionals who specialise in lung cancer care.
- In conjunction with the Lungevity Stories booklet we produced, four patient/carer video stories have been made available on the KJLCN website and YouTube – www.kjlcn.org.au.
- Following a kind invitation by Prime Minister Kevin Rudd the Lung Foundation hosted a Lunch for Lung Cancer in November at the iconic Kirribilli House in Sydney at which KJLCN Chair, Associate Professor Matthew Peters, launched the 2009 Lungevity Stories and patient video stories. More than 130 KJLCN supporters including Lungevity Stories contributors (from Brisbane, Sydney, Melbourne and Devonport), Sydney Adventist Hospital Cancer Support Centre, lung cancer nurses, health professionals and lung specialists gathered to enjoy a picnic lunch overlooking Sydney Harbour.
- Worked in partnership with the Peter MacCallum Cancer Centre and Cancer Council Victoria to produce a lung cancer patient support DVD “Lung Cancer: Understanding Managing & Living”. The DVD will be uploaded to the KJLCN website with links to related Australian health websites and distributed to health professionals (in particular lung cancer nurses and cancer care coordinators) and patients, carers and family members throughout Australia.
- Through Cancer Australia’s Collaborative Cancer Support Networks Grants Program, the KJLCN translated our lung cancer educational brochure “Answering Your Questions on Lung Cancer” and an awareness poster highlighting lung cancer symptoms to promote early diagnosis into seven languages. These translated resources will be uploaded to the KJLCN website with links to multicultural/health websites throughout Australia.
- Submitted a successful funding application for a grant through Cancer Australia’s “Building Cancer Support Networks Initiative: Better Cancer Support Through Consumers” program to pilot an open Lung Cancer Telephone Support group for rural/remote consumers on a 1800 number, utilising the new lung cancer patient support DVD and linking in with the Lungevity Patient Forum and the latest web-based communications technology including Skype, Twitter and Facebook social media platforms.

Kerrie Callaghan, Project Coordinator



Karen Lather
Group
Administrator

Australasian Lung cancer Trials Group

The 2009 Australasian Lung cancer Trials Group's (ALTG) activities once again increased at a rapid rate. The Group met several times during the year under the visionary leadership of Professor Michael Millward.

Two ALTG trials were activated in 2009 with another two ALTG trials opened for patient recruitment in early 2009. Other trial concepts that were approved by the ALTG this year have initiated protocol development, feasibility surveys and submitting applications for funding.

To assist the ALTG, a Clinical Research Fellow, based at the NHMRC Clinical Trials Centre in Sydney, was employed to continue the development of trial protocols and other trial activities.

In 2009, the ALTG had a membership of 180 financial members (an increase of 70%) which is rapidly expanding due to the interest in reducing the incidence, morbidity and mortality of lung cancer.

Karen Lather, Group Administrator

Chronic Cough in Infants, Children and Adults: Diagnosis and Assessment

In 2009, the Cough in Infants, Children and Adults: Diagnosis and Assessment Consultative Group (CICADA) worked on developing Australian Cough Guidelines. These guidelines will be released in April 2010. The CICADA group is funded solely by the Lung Foundation.

Karen Lather, Group Administrator



Juliet Brown
Executive Officer,
PIVOT

Pulmonary Interstitial Vascular Organisational Taskforce

The Pulmonary Interstitial Vascular Organisational Taskforce (PIVOT) met quarterly in 2009 under the continuing leadership of Dr Ian Glaspole. Membership of the Group expanded with two new members joining - Dr Nicole Goh from Melbourne and Dr Chris Zappala from Brisbane. Past Chair, A/Prof Eli Gabbay resigned from PIVOT late in the year and the Group thanks him sincerely for his endeavours and leadership.

The Australasian Registry Network for Orphan Lung Disease (ARNOLD), which is being developed jointly by The Australian Lung Foundation and the Thoracic Society of Australia and New Zealand (TSANZ), made good progress in 2009.

ARNOLD now has its own website, www.arnold.org.au which includes patient information on the various orphan lung diseases and an online patient forum. Data collection has begun in Australia, and this will ultimately provide statistical information relating to the incidence and prevalence of orphan lung disease in Australasia. A poster outlining the aims of ARNOLD was presented at the 2009 TSANZ Annual Scientific Meeting.

During 2009, PIVOT developed an Idiopathic Pulmonary Fibrosis patient education brochure and revised the existing Sarcoidosis brochure

PIVOT successfully raised the profile of disease areas, such as pulmonary fibrosis and pulmonary hypertension, in the media in 2009. This occurred largely as a result of the Lung Foundation's Lung Health Awareness Month campaign, which saw the launch of the Lung Health Checklist.

The first steps have been taken towards development of a formal collaboration with Pulmonary Hypertension NSW. PIVOT is open to building working relationships with other organisations which have an interest in interstitial and orphan lung diseases.

Juliet Brown, Executive Officer, PIVOT



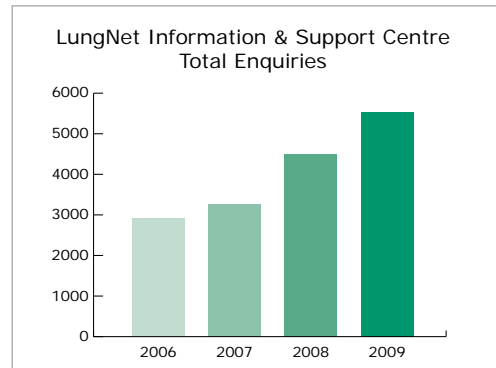
Eileen Perry, Juliet Brown and Jenny Hose
LungNet Information and Support Centre

LungNet Information and Support Centre

In 2009, the LungNet Information and Support Centre (the Centre) continued to develop and grow, to meet the increased demand for its services. The Centre, which is coordinated by Juliet Brown, Jenny Hose and volunteer, Eileen Perry, provides information and support at both the time of an initial enquiry and on an ongoing basis through education days, newsletters and support groups. Services extend to the general public, patients recently diagnosed with a lung condition and/or their families and carers and health professionals.

- **Enquiries** The Centre can be contacted via a free-call number (1800 654 301) or via email at enquiries@lungfoundation.com.au

- **Enquiry Statistics** The number of enquiries received by the Centre again increased substantially in 2009. During November, which saw the launch of the Lung Foundation's Lung Health Checklist as part of Lung Health Awareness month, the Centre managed its largest ever number of monthly enquiries – approximately 900 calls.



- **Newsletter** LungNet News is an important means for the Lung Foundation to communicate regularly with patients, health professionals and other individuals interested in lung health. Published quarterly, the newsletter provides articles on lung health and information about the Lung Foundation's projects and initiatives. The newsletter is currently mailed to approximately 13,500 households in Australia, with a total circulation of more than 15,000. The number of households who receive LungNet News continued to increase during each quarter of 2009. The newsletter is also accessible via the Lung Foundation website, www.lungfoundation.com.au

- **LungNet Patient Support Group Network** Self-help patient support groups, active in all States and Territories, are an important means for patients to gain mutual support and ongoing education about their condition. Whilst the majority of groups have face-to-face meetings, support is also available online or by telephone. The current number of groups in Australia is 112. Regular contact is made with group leaders by means of a Group Leaders Update sent out twice a year.

The Australian Lung Foundation strives to meet the need in the community to reduce the significant and debilitating cost of lung disease, both in human and financial terms.



World COPD Day at Mildura Base Hospital | Alice retires after years of volunteering | Lung Health Checklist launch



- **LungNet Education Days** LungNet Education Days take place in all States and provide an opportunity for patients to listen to experts in the field of respiratory medicine and allied health, as well as enabling members of the patient support groups to interact with one another. Attendances increased across all States in 2009, and the increase was particularly noticeable in NSW.
- **Pulmonary Rehabilitation Programs** The Centre maintains a list of over 250 pulmonary rehabilitation programs across Australia and details are given to patients on request. Contact was made with all programs during 2009 to ensure contact details were accurate.
- **Volunteers** A group of 11 volunteers assists with the newsletter mail-outs and Eileen Perry is an essential and invaluable and cherished member of the Centre team.

Juliet Brown, Coordinator, Information and Support Centre



Eileen Boyle
Manager,
Indigenous Health

Breathe Easy, Walk Easy: Better lung health for rural and remote Australia

Chronic obstructive pulmonary (lung) disease (COPD) and bronchiectasis (a related condition often developing in childhood) is the fifth leading cause of death in Australia and the third in burden of disease. The impact of chronic lung disease for Aboriginal Australian and Torres Strait Islander (ATSI) populations in remote Australia is even more marked. ATSI peoples in the Northern Territory die from COPD at a rate more than five times the national average.

In 2009, The Australian Lung Foundation was successful in sourcing funding to support the implementation and evaluation of the Breathe Easy, Walk Easy (BE,WE) rural and remote pulmonary rehabilitation train-the-trainer package, to measure its impact on local health service practice and clinically relevant health outcomes. The project is designed to refine and evaluate the effectiveness of the Breathe Easy, Walk Easy education modules and training resources in building the capacity of primary and allied healthcare and improving services and outcomes for patients with chronic lung disease in rural and remote Australia.

Performances successfully achieved against goals of this project include:

- Successfully completed Breathe Easy, Walk Easy training package and engaged three community sites
- Successfully delivered training using the Breathe Easy, Walk Easy training package (Casino, NSW | Griffith, NSW | Alice Springs NT).
- Casino BEWE training for the Dharah Gibinj Aboriginal Medical Service (AMS) respiratory team as part of their Bugl Booyay; Good Breathing Respiratory program

Eileen Boyle, Manager, Indigenous Health



Dharah Gibinj respiratory team during the BEWE spirometry training | Healthy Active Golf Winners | Fiona and Roslyn | COPD Triumph launch



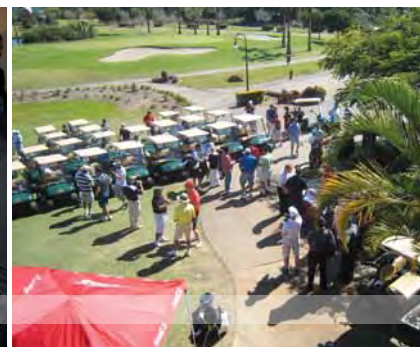
Margaret Goody
Director of
Development

Community Relations

In a challenging economic environment, The Australian Lung Foundation has grown its support base in membership, donations and fundraising and, at the same time, implemented strategies to enhance our mission to make lung health a priority for all in Australia.

- **Membership** Membership continues to grow with an encouraging 55% increase in membership numbers during 2009, reflecting an interest in and support of the Lung Foundation. Of particular note is the increase in Health Professional memberships by 45% from 2008. Our membership year has changed from April-March to January-December, reflecting our financial year.
- **Lung Health Awareness Month / Lung Health Checklist** An initiative of the Lung Foundation, Lung Health Awareness Month in November was underpinned by a media campaign based on lung health and promotion of the Lung Health Checklist, a clinically developed tool to promote early diagnosis of lung disease with the theme 'Catch lung disease before it catches up with you'. The launch of the Lung Health Checklist generated coverage of more than 200 media pieces across Australia. The Lung Health Checklist will be the basis of Lung Foundation media campaigns in 2010, including those associated with 2010: International Year of the Lung.
- **Fundraising / Donations** A number of successful fundraising events were held in a variety of locations around Australia. Many of them were centred around Lung Health Awareness Month and included a Gala Lunch for Lung Cancer (Brisbane), Picnic Lunch for Lung Cancer (Sydney), Lunch for Lung Cancer (national), Triumph for Breath (national) and the Corporate RiverRun (Brisbane). The 2010 Breath of Life Music Festival secured the support of major Australian singers including Jimmy Barnes, Diesel, Troy Cassar-Daley, Kasey Chambers and Band, Deni Hines and Beccy Cole to perform at the event scheduled from 25th to 27th March in Devonport, Tasmania. Supporters of the Lung Foundation donated to the Tax Appeal and Christmas Seals Appeal magnificently and, in spite of this difficult economic period, donations to the Lung Foundation increased by 11%. A new initiative for 2009 was the introduction of an array of Lung Foundation branded merchandise (including the popular Christmas cards) which was favourably received.
- **2010: International Year of the Lung** Initial planning by the Lung Foundation in support of the 2010: International Year of the Lung, an initiative of the Forum of International Respiratory Societies was undertaken.

Margaret Goody, Director of Development



Helen Cayas and family | Diesel at Breath of Life Music Festival Ticket launch | Roslyn and Ross Hogan with Jenny Hose | Kylie Johnston Golf Day



Awards

The Australian Lung Foundation invites applications for a number of Awards to facilitate and encourage research into lung disease. An increasing number of high calibre applications are received each year for the various Awards that are advertised. The Education and Research Standing Sub-Committee of the Thoracic Society of Australia and New Zealand reviews the applications against the relevant criteria and advises the Lung Foundation of the successful applicant that most closely meets the Award criteria. The Australian Lung Foundation congratulates the winners of the 2009 Awards.

ALF/Boehringer Ingelheim COPD Research Fellowship	Dr Ben Harris
Webster COPD Research Award	Dr Sophie Timmins
The Slater & Gordon Asbestos Research Grant-in-Aid	A/Professor Paul Reynolds
The Lung Cancer Consultative Group Post-graduate Grant-in-Aid for Lung Cancer Research	Miss Morgan Davidson
Cochrane Review Scholarship	Mr Robert Smith
Ros Hogan Early Detection of Lung Cancer	Dr Phan Nuen and Dr Daniel Steinfert
The Ludwig Engel Grant-in-Aid for Physiological Research	Professor Haydn Walters A/Professor Shyamali Dhargmage Dr John Marrone

Acknowledgements

The following individuals supported The Australian Lung Foundation in a variety of voluntary roles during 2009.

Our Patron

Her Excellency Ms Quentin Bryce AC, Governor General of the Commonwealth of Australia

National Council

The National Council of The Australian Lung Foundation defines the strategic direction and policy, is responsible for corporate governance and regularly reviews progress against the strategic plan.

Dr Robert L Edwards, FRACP, FCCP	Chairman, National Council
Dr Martin Phillips, FRACP	Deputy Chairman / Chairman State Council WA
Mr Jim Mattock, FCA	Treasurer / Chairman State Council SA
A/Prof Peter W Holmes, FRACP, FCCP	Chairman, State Council Vic
Mr David Macintosh, BBus (UTS), FCS	Chairman, Australian Respiratory Council
Dr James Markos, MBBS, FRACP, FCCP	Chairman, State Council Tas
A/Prof Matthew Peters, MF, FRACP, FCCP	Chairman, State Council NSW
Mr John Caravouanos, FTIA	Council member – legal portfolio
Prof Peter Frith, MBBS, FRACP, FCCP (Regent)	Chairman, COPD Coordinating Committee
Prof Mark Holmes, MBBS.MD, FRACP	Research and Education Sub-Committee, TSANZ ¹
Prof John Upham, MBBS (Hons), FRACP, PhD,	Research and Education Sub-Committee, TSANZ
Prof Philip Thompson, MBBS FRACP FCCP MRACMA	President, TSANZ
Prof Christine Jenkins, AM, MD, FRACP	Past-President, TSANZ
Dr Bill Scowcroft*	Co-Chairman, Australian COPD Patient Taskforce
Mr William Darbishire, FCA	Secretary

¹ Thoracic Society of Australia and New Zealand



COPD Coordinating Committee

Prof Peter Frith (Chair)
Prof Michael Abramson
A/Prof Jenny Alison
Mrs Yvonne Bedson*
Ms Jenny Bergin
Dr Helen Bell
Prof Peter Black*
Prof Alan Crockett
Mr Bryan Clift
Dr Robert Edwards
A/Prof H. John Fardy
Mr Peter Guthrey
Mr David Hayne
Prof Christine Jenkins
Prof Christine McDonald
Ms Vanessa McDonald
Dr Bill Scowcroft*
Dr Julia Walters
A/Prof Ian Yang

COPD General Practice Advisory Committee

Dr Kerry Hancock (Chair)
A/Prof Amanda Barnard
Dr David Batt
Dr Chris Brown
Prof Ian Charlton
A/Prof H John Fardy
Dr Chris Hogan
Dr Steven Rudolph
Dr Victoria Smith
Dr Noela Whitby
Dr Russell Wiseman

The Australian COPD Patient Taskforce

Mr Bryan Clift, Co-Chair
Dr Bill Scowcroft, Co-Chair*
Ms Dianne Proctor*
Ms Veronica Kemp
Mr Barry Neal
Ms Collette Prause
Mrs Hazel Mellor
Ms Judith Hart
Ms Mary Duell*
Mrs Christine Hunt
Mr Reg Hunt
Mr Barry Blaikie
Mr Bill Morris
Mr Mike Watteau
Mrs Thelma Nicholson
Mr John Blue
Mrs Judith Walters

COPD Evaluation Committee

Prof Michael Abramson (Chair)
Prof Alan Crockett
Prof Nicholas Glasgow
A/Prof Sue Jenkins
Prof Christine McDonald
A/Prof Richard Wood-Baker

COPD Pharmacy Screening Project Team and Expert Advisory Panel

Project Team

Ms Heather Allan (Chair)
Dr Bandana Saini
Ms Simone Diamandis
Ms Phoebe Kearey
Dr Guy Gavagna
Mr David Marshall
Dr Geraldine Peterson-Clark

Expert Advisory Panel

Ms Heather Allan (Chair)
Mr David Hayne
Mr Gary Wilcher
Prof Peter Frith
Prof Christine McDonald
Dr H. John Fardy
Ms Alison Crocker
Mr Peter Cox

Lungs in Action Steering Committee and Expert Advisory Panel

Steering Committee

Ms Liz Harper (Chair)
Ms Yvonne Bedson
Dr Nick Buckmaster
Ms Corinne French
Ms Sue Rayner
Ms Kelly Sinclair
Ms Lissa Spencer
Mr Trent Young

Expert Advisory Panel

A/Professor Jenny Alison
Ms Sue Bligh
Dr Angela Chang
Ms Judith Hart
Ms Sally Watts
A/Prof Ian Yang

Breathe Easy, Walk Easy Rural and Remote Pulmonary Rehabilitation Training Package Expert Advisory Panel

Steering Committee

Ms Eileen Boyle (Chair)
A/Prof Graeme Maguire
Dr Carmel Nelson
A/Prof Jenny Alison
Ms Monica Frain
Dr Naru Pal
Dr Andrew Bell
Ms Chris Flavell
Dr David Atkinson
Ms Elaine Jaeschke
Ms Jan Saunder

Expert Advisory Panel

A/Prof Jenny Alison
A/Prof Graeme Maguire

Lung Cancer Consultative Group

Prof Kwun Fong (Chair)
Prof Bruce Robinson
Ms Caitlin Broderick /
Ms Kirsten Mooney
A/Prof David Ball
A/Prof Eddie Lau
Dr Jenny Ma Wyatt
Dr John Litt
A/Prof Matthew Peters
Prof Lou Irving
Dr Nick Pavlakis
Prof Nico van Zandwijk
A/Prof Paul Mitchell
Dr Peter Cole
Dr Rayleen Bowman
Ms Linda Christenson
Prof Jane Ingham

Kylie Johnston Lung Cancer Network Management Committee

A/Prof Matthew Peters (Chair)
Ms Mary Duffy
Ms Elissa Lewis
Mr Nick Johnston
Mr Andrew Bowen
Ms Katharine Melville-Jones
Ms Liz Simon – Consumer Advocate*

**Australasian Lung cancer
Trials Group**

**Management Advisory
Committee (MAC)**

Prof Michael Millward (Chair)
Dr Michael Boyer (SAC Chair)
Ms Haryana Dhillon, Secretary
Dr Peter Flynn, Treasurer
Prof Kwun Fong
Ms Mary Duffy
Dr Geoffrey Hawson
Dr Martin Phillips
Dr Ben Solomon
Dr Richard Sullivan
Dr Shalini Vinod
Mr Gavin Wright

**Scientific Advisory
Committee (SAC)**

Dr Michael Boyer (Chair)
Dr Tim Christmas
Prof Kwun Fong
Prof Michael Millward
Dr Mahmood Alam
Dr Jeffrey Bowden
Mr Andrew Bowen
Dr Martin Stockler
Dr Andrew Wirth
Mr Gavin Wright

**NHMRC Clinical Trial Centre
Operational Executive
Committee**

Prof Michael Millward, President
Dr Michael Boyer
Prof Kwun Fong
Ms Xanthi Coskinas
Ms Peta Forder
Dr Martin Stockler
Dr Mahmood Alam

**Cough – Infants, Children
Adults Diagnosis &
Assessment**

Prof Peter Gibson (Chair)
A/Prof Robert Berkowitz
Prof Nicholas Glasgow
A/Prof Peter Katelaris
Prof Lou Landau
Prof Peter van Asperen
A/Prof Anne Chang
A/Prof Peter Holmes
Prof Andrew Kemp
Dr Peter Newcombe
Ms Anne Vertigan

**Pulmonary Interstitial
Vascular Organisation
Taskforce**

Dr Ian Glaspole (Chair)
A/Prof Eli Gabbay
Ms Nicole Goh
Dr Adrian Havryk
Prof Mark Holmes
A/Prof Peter Holmes
Dr Peter Hopkins
A/Prof Adam Jaffe
Dr Susanna Proudman
Mrs Miriam McLean
Dr Chris Zappala

**Respiratory Infectious
Diseases Group**

A/Prof Tom Kotsimbos (Chair)
Dr David Armstrong
Dr Nick Buckmaster
Dr David Hart
A/Prof Peter Holmes
A/Prof Paul Johnson
Dr Tom Konstantinos
A/Professor Joe McCormack
Dr Justin Waring
A/Prof Grant Waterer

LungNet State Coordinators

Mr Paul Cafarella (SA)
Mrs Lyn Joseph (Tas)
Mrs Lissa Spencer (NSW)
Ms Jenni Hibble (NT)
Mrs Rosemary Moore (Vic)
Ms Louise Ganderton (WA)
Ms Sarah Jones (WA)
Ms Cathy Read (WA)

LungNet News Volunteers

Mrs Helen Choice
Miss Elsie Clack
Mrs Alice Jackson
Mrs Margaret Moran
Mrs Hilary Mulcahy
Mrs Aileen Russell
Mrs Christine Robertson
Mrs Maureen Smith
Mrs Denise Stevenson
Mr Frank Stevenson
Ms Myrna Wakeling
Mrs Judith Walters
Mrs Clare Watts

*Prof Peter Black died suddenly in January 2010. His contribution to respiratory research and to The Australian Lung Foundation is acknowledged in the CEO's Report.

*The tireless work of Yvonne Bedson who passed away in January 2010 and Dianne Proctor and Mary Duell who passed away in October 2009 is acknowledged by all who worked with them.

*The enthusiastic work of Dr Bill Scowcroft who passed away in March 2009 is also acknowledged.

*The passionate advocacy work of Liz Simon who passed away in April 2009 is acknowledged by all who had the privilege to work with her.

We strive for excellence and quality outcomes, with respect for the individual, integrity and ethical behaviour as integral tools when we work with our community: whether they are patients, their families and carers; stakeholders or employees.



The Australian Lung Foundation Inc

Financial Report for the year ended 31 December 2009

ABN 36 051 131 901

Councillors' Report

The councillors present their report for the year ended 31 December 2009.

The financial statements and specific disclosures included in the concise financial report on pages 2 to 7 have been derived from the full financial report of The Australian Lung Foundation Inc (The Foundation) for the year ended 31 December 2009.

The concise financial report cannot be expected to provide as full an understanding of the financial performance, financial position and financing and investing activities of The Foundation as the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

Councillors

The names of councillors in office throughout the year and at the date of this report are:

Mr John Caravousanos
Dr Robert Edwards
Professor Peter Frith
Professor Mark Holmes
Associate Professor Peter Holmes
Professor Christine Jenkins
Mr David Macintosh
Dr James Markos
Mr Jim Mattock
Associate Professor Matthew Peters
Dr Martin Phillips
Dr William Scowcroft (deceased March 2009)
Professor Philip Thompson
Professor John Upham
Mr William Darbshire (Secretary)

Principal activities

The principal activities of The Australian Lung Foundation Inc during the course of the financial year were providing support to those burdened by respiratory disease through patient support groups, education and raising funds for research. The operating result for the year was a net surplus of \$251,946 (2008: deficit \$1,685).

Significant changes

There was no significant change in the nature of these activities during the year.

Signed in accordance with a resolution of the councillors.




Dated this 19th day of February 2010



The Australian Lung Foundation Inc

Statement of Comprehensive Income for the year ended 31 December 2009

	2009 \$	2008 \$
Revenue - continuing operations		
Revenue from projects	2,486,315	2,133,979
Revenue from donations and bequests	388,704	147,107
Other income		
Overhead recovery	364,686	261,994
Dividends received	12,584	19,303
Membership fees	52,937	31,126
Sale of educational publications	12,702	12,608
Fundraising and events	133,030	36,828
Sundry Income	25,047	50,296
Interest received	81,214	159,358
Expenses - continuing operations		
Project expenses	(2,491,913)	(2,147,945)
Employee benefits	(388,457)	(328,345)
Premises	(140,676)	(130,891)
Depreciation	(18,953)	(40,020)
Telecommunication	(10,931)	(18,336)
Website and internet	(13,367)	(16,177)
Marketing and fundraising events	(133,331)	(63,349)
Educational leaflets	(27,040)	(11,579)
Consultancy fees	(500)	(11,727)
General, administrative and other costs	(93,983)	(87,651)
Net surplus/(deficit) from continuing operations	238,068	(3,420)
Revenue - specifically designated activities		
Donations and bequests	295,439	182,600
Interest received	2,559	7,135
Expenses - specifically designated activities		
Research awards	(284,120)	(188,000)
Net surplus/(deficit) from specifically designated activities	13,878	1,735
Surplus/(deficit) before income tax	251,946	(1,685)
Income tax	-	-
Net surplus/(deficit) for the period	251,946	(1,685)
Other comprehensive income		
Net unrealised gains on investments	19,577	(50,369)
Other comprehensive income for the period	19,577	(50,369)
Total comprehensive income for the period	271,523	(52,054)
Surplus/(deficit) for the period is attributable to:		
Non-controlling interest	251,946	(1,685)
Owners of the parent	-	-
	251,946	(1,685)
Total comprehensive income for the period is attributable to:		
Non-controlling interest	271,523	(52,054)
Owners of the parent	-	-
	271,523	(52,054)

The accompanying notes form part of the financial report

The Australian Lung Foundation Inc.

Statement of Financial Position as at 31 December 2009

Notes	2009 \$	2008 \$
Current assets		
Cash and cash equivalents	2,530,312	2,534,519
Receivables	601,706	198,173
Inventories	0	18,195
Total current assets	3,132,018	2,750,887
Non-current assets		
Financial assets	180,815	161,238
Property, plant and equipment	43,778	34,172
Total non-current assets	224,593	195,410
Total assets	3,356,611	2,946,296
Current liabilities		
Payables	1,301,678	1,168,139
Total current liabilities	1,301,678	1,168,139
Non-current liabilities		
Provisions	17,309	12,057
Total non-current liabilities	17,309	12,057
Total liabilities	1,318,987	1,180,196
Net assets	2,037,624	1,766,101
Equity		
Retained earnings	1,581,638	1,343,570
General reserve	300,000	300,000
Reserves for specifically designated funds	144,208	130,330
Unrealised gains reserve	11,778	(7,799)
Total equity	2,037,624	1,766,101

The accompanying notes form part of the financial report



The Australian Lung Foundation Inc.

Statement of Cash Flows for the year ended 31 December 2009

Notes	2009 \$	2008 \$
Cash flows from operating activities		
Receipts from customers	3,742,885	2,656,464
Dividends received	12,584	19,303
Interest received	83,772	166,493
Payments to suppliers and employees	(3,814,888)	(2,869,961)
Net cash flows used in operating activities	24,353	(27,701)
Cash flows from investing activities		
Acquisition of plant and equipment	(28,560)	(13,523)
Acquisition of investments	0	(7,200)
Net cash flows used in investing activities	(28,560)	(20,723)
Net decrease in cash held	(4,207)	(48,424)
Cash and cash equivalents at the beginning of the financial year	2,534,519	2,582,943
Cash and cash equivalents at the end of the financial year	2,530,312	2,534,519

The accompanying notes form part of the financial report

The Australian Lung Foundation Inc.

Statement of Changes in Equity for the year ended 31 December 2009

Notes	2009 \$	2008 \$
Retained earnings		
Balance at 1 January 2009	1,343,570	1,346,990
Surplus/(deficit)	251,946	(1,685)
Transfer to specifically designated funds reserve	(13,878)	(1,735)
Balance at 31 December 2009	1,581,638	1,343,570
General reserve		
Balance at 1 January 2009	300,000	300,000
Balance at 31 December 2009	300,000	300,000
Specifically designated funds reserve		
Balance at 1 January 2009	130,330	128,596
Transfer from income statement	13,878	1,735
Balance at 31 December 2009	144,208	130,330
Unrealised gains reserve		
Balance at 1 January 2009	(7,799)	0
Transfers to/(from) reserves	19,577	(7,799)
Balance at 31 December 2009	11,778	(7,799)
Total change in equity		
Balance at 1 January 2009	1,766,101	1,775,586
Surplus/(deficit)	251,946	(1,685)
Transfers to/(from) reserves	19,577	(7,799)
Balance at 31 December 2009	2,037,624	1,766,101

The accompanying notes form part of the financial report

The Australian Lung Foundation Inc.

Notes to and forming part of the Concise Financial Report
for the year ended 31 December 2009

1. Basis of preparation of the concise financial report

This concise financial report is an extract from the full financial report for the year ended 31 December 2009. The concise financial report has been prepared in accordance with Australian Accounting Standard AASB 1039 "Concise Financial Reports" and the Corporations Act 2001.

The financial statements, specific disclosures and other information included in the concise financial report are derived from and are consistent with the full financial report of The Australian Lung Foundation Inc (the Foundation). The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of the Foundation as the full financial report.

The financial report of the Foundation complies with all Australian equivalents to International Financial Reporting Standards (AIFRS). The presentation currency used in this concise financial report is Australian dollars. The concise financial report was authorised for issue by the councillors on 19 February 2009.

2. Taxation

The Australian Lung Foundation Inc has been endorsed by the Australian Taxation Office as a Tax Exempt Charitable Entity

3. Events subsequent to reporting date

No events have occurred subsequent to reporting date that will have a material effect on the financial report of The Foundation for the year ended 31 December 2009.



The Australian Lung Foundation Inc.

ABN 36 051 131 901

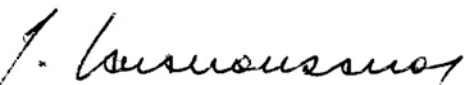
Statement by Councillors

The councillors of The Australian Lung Foundation Inc declare that the concise financial report set out on pages 2 to 6:

- (a) has been derived and is consistent with the full financial report of The Australian Lung Foundation Inc for the year ended 31 December 2009; and
- (b) complies with Accounting Standard AASB 1039 "Concise Financial Reports".

This statement is made in accordance with a resolution of the Council and is signed on and behalf of the Council by:

Chairman 

Councillor 

Signed at Brisbane, 19 February 2010

INDEPENDENT AUDITOR'S REPORT

To the members of The Australian Lung Foundation Inc.

Report on the concise financial report

The accompanying concise financial report of The Australian Lung Foundation Inc (the Foundation) comprises the Statement of Financial Position at 31 December 2009, the Statement of Comprehensive Income, Statement of Cash Flows and the Statement of Changes in Equity for the year then ended and related notes, derived from the audited financial report of Australian Lung Foundation for the year ended 31 December 2009. The concise financial report does not contain all the disclosures required by Australian Accounting Standards.

Councillors responsibility for the concise financial report

The councillors of Australian Lung Foundation are responsible for the preparation and presentation of the concise financial report in accordance with Accounting Standard AASB 1039 "Concise Financial Reports" (including the Australian Accounting Interpretations) in accordance with Australian Lung Foundation's constitution. This responsibility includes establishing and maintaining internal control relevant to the preparation of the concise financial report, selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on the concise financial report based on our audit procedures. We have conducted an independent audit, in accordance with Australian Auditing Standards, of the financial report of Australian Lung Foundation for the year ended 31 December 2009. Our audit report on the financial report for the year was signed on 19 February 2010 and was not subject to any modification. Australian Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report for the year is free from material misstatement.

Our procedures with respect to the audit of the concise financial report included testing that the information in the concise financial report is derived from and is consistent with the financial report for the year, and examination on a test basis, of evidence supporting the amounts and other disclosures which were not directly derived from the full financial report. These procedures have been undertaken to form an opinion whether, in all material respects, the concise financial report complies with Accounting Standard AASB 1039 "Concise Financial Reports".

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Independence

We are independent of the Australian Lung Foundation, and have met the independence requirements of the Australian professional and ethical pronouncements.

Audit Opinion

In our opinion, the concise financial report of The Australian Lung Foundation Inc complies with Australian Accounting Standard AASB 1039 "Concise Financial Reports".




WHK Horwath



Don Langdon
Principal

Signed at Brisbane, 19 February 2010

Liability limited by a scheme approved under Professional Standards Legislation other than for the acts or omissions of financial services licensees.



Support the work of The Australian Lung Foundation

Research by The Australian Lung Foundation shows that seven million Australians aged over 35 years are at risk of lung disease¹. This has a dramatic impact on the quality of life for patients, their families and carers and costs Australia billions of dollars each year.

Your donation to The Australian Lung Foundation will assist us in our mission to make lung health a priority for all in Australia.

Together, we can create awareness, provide understanding and find a cure!

If you would like to be part of this journey, contact The Australian Lung Foundation on 1800 654 301 for details on how you can support this work.

As a public benevolent institution, all donations over \$2 to The Australian Lung Foundation are tax deductible.

As an alternative and after you have carefully considered family and friends in your Will, you might like to make a bequest under your Will to The Australian Lung Foundation. All you need to do is have your solicitor insert a clause in your Will or go to our website (www.lungfoundation.com.au) for examples of sample wording for the consideration of your legal adviser.

¹Galaxy Research. Galaxy Telephone Omnibus Lung Health Study. September 2009



**THE AUSTRALIAN
LUNG FOUNDATION**

"When you can't breathe...nothing else matters"™

44 Brookes Street, Bowen Hills Qld 4006

PO Box 847, Lutwyche Qld 4030

Free call: 1800 654 301

Website: www.lungfoundation.com.au