

Summer 2020
NEWSLETTER

adss

Asbestos Disease
Support Society



Asbestos Disease Support Society
16 Campbell Street, Bowen Hills, 4006
PO Box 280, Spring Hill, QLD 4004
Phone: 1800 776 412

DO YOU KNOW
BEING AN
**ADSS & SSN
MEMBER**

There is free assistance through the provision of:

Information on asbestos & silica related diseases

Support from our social worker

Clinical support from the registered nurse

Medical aids on loan

Community morning tea groups and support groups

Nutritional advice

Occupational therapy assessment

Quarterly Newsletter

**Legal consultation with our preferred lawyers experienced
in asbestos and silica compensation.**

**Call the Society if you would like to
discuss any of these services**

1800 776 412



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ASBESTOS DISEASE SUPPORT SOCIETY LIMITED

Christmas Closure

The ADSS office will be closed from 12pm Friday 18 December 2020 and re-open from 8.30am Wednesday 6 January 2021.

A staff member will be on call for new referrals and urgent matters 1800 776 412.

We would like to wish you all a very Merry Christmas and a Happy New Year from ADSS Staff and Directors



In Loving Memory

*The sorrow we feel
No words can explain
The ache in our hearts
Will always remain*

*There is a special loved one
Up there in Heaven above
There will never be another
With a heart so full of love*

*Wherever I go, Whatever I do
Those I love don't go away
They walk beside me everyday
"Unseen, unheard but always near"
Still loved and missed and very dear*

Ian Eric Webster
Alexander Leigh (Alex) Treadwell
Colin Jeston
Jean Beatrice Mills
Maurizio Maioglio
Graham Bryant
Leon Auciello
Stephen Paul Fenton
Gary Bond
Noel Patrick (Pat) Hoolihan
Howard McGeachin
Orme Malt
David Blair
Maurice Young
Jeffrey Evan Simmons
Ronald Keith Knight
Trevor Patrick
Kenneth Arthur Edwards (Ken)
Michael Harrigan (Mick)
Brian Muller



General Managers Report

TREVOR TORRENS



A “warm” welcome to the Summer edition of the Asbestos Disease Support Society Newsletter.

As we come to the end of 2020, the Society’s 28th year, it is timely to reflect on all the sufferers that have passed on and those who are currently afflicted by an asbestos or silica related disease and their families and carers. Sadly, the Society has lost over 60 members this year from an asbestos related disease, predominantly mesothelioma.

It would be fair to say that 2020 has been a different year. COVID has dramatically affected the way we have gone about our lives. The Society has had to suspend our community morning teas, face to face support contact has been limited, the annual Symposium cancelled, our major fund raiser - the Charity Race Day also cancelled and many of our members have had to strictly isolate. Many other events which the Society would participate in, such as the Safe Work Month at King George Square, Labour Day BBQ, have also been cancelled this year.

Unfortunately, COVID did not affect the legacy of our past use of asbestos – it continues without interruption. In fact, could COVID actually contribute further to the harmful asbestos legacy? Large amounts of asbestos are still present in many Australian homes, workplaces and environment. Australia was actually the highest user of asbestos per capita in the world, prior to being fully banned in 2003.

Evidence suggests COVID has fuelled a boom in DIY home improvements giving rise to concerns of increased asbestos exposure risk. For instance, Bunnings reported a 2020 second half sales growth of 25% attributed to customers taking advantage of the COVID restrictions. Between April and June 2020, quotes for home renovations and maintenance more than doubled. It will be decades before we know if COVID has unwittingly contributed to the diagnosis of asbestos diseases, due to the long latency period from initial exposure.

Consistent research shows that Australians are unaware of how prevalent asbestos is, where it might be found, and how to protect themselves from exposure. Worryingly, many Australians doing DIY or home maintenance believe they are doing it safely but may not be taking correct safety precautions.

The Australian Government Asbestos Safety and Eradication Agency’s (ASEA) research shows that even amongst targeted trades (for example, construction workers, electricians and plumbers), awareness of where asbestos can be and what to do to stay safe is low.

Research undertaken by ASEA also shows that asbestos is not thought of as a risk when planning or undertaking DIY or maintenance work, despite 1 in 5 DIYers having had contact with it in the past. This suggests that most people are either handling it without knowing, or handling it in an unsafe manner. Additionally, a third of DIYers admit to disposing of asbestos inappropriately and the majority do not feel confident managing the risks.

It is vitally important that DIY home improvers:

- Know the health risks of asbestos exposure;
- Be aware of where asbestos might be found before you start work – It lurks in more places than you think; and
- Call a professional to check, remove and dispose of asbestos safely.

Storm and Bushfire Season

We should also be mindful that as we commence the festive season, we are also entering storm season, cyclone season and bushfire season. Homeowners and others should take extra care if they find themselves involved with community clean-up processes or building repairs. As we know, many buildings could contain asbestos materials which are exposed easily when shifted during storms, high winds and fires. “EXPOSURE CANNOT BE REVERSED”

Ecumenical Service



While COVID did disrupt many of the Society's events, the 28th Ecumenical Service held at the Cathedral of St Stephens did proceed, with controlled numbers and no morning tea following the service. Held on Friday 27 November, we came together to remember those who have succumbed or have been inflicted by an asbestos or silica related disease – a disease that they did not choose. We gave thanks to all those people who do their utmost in supporting the Society and supporting sufferers, their families and carers - whether they be Society volunteers, doctors, researchers, carers, community leaders, family members, lawyers, unions or employers. Without the support of so many people, the Society would not be able to do what it does for that we are very appreciative.

2020 Annual General Meeting



The Society's Annual General meeting was held at City Hall on Wednesday 21 October. Thank you to those members who were able to attend. The Chair of the Society, Phil Blair delivered the Board Report which can be found on the Society's website at: <https://www.adss.org.au/wp-content/uploads/2020/10/2020-Board-Report.pdf>

Director Elections

The Society is governed by a Board of nine (9) Directors elected by and from the membership. A Director's term of appointment is two (2) years with compulsory retirement of half the sitting Directors at every Annual General Meeting. A retired Director is eligible for re-election.

In 2020, nominations were called for five (5) Director positions, with seven (7) nominations received. This necessitated a ballot of the Society's membership, which is the first time an election for director positions was required.

The election was supervised by Thady Blundell of Turner Freeman lawyers. The Society sent out 635 ballot papers, with 215 returned. The following members were elected to the Board:

- **Pat Cini**
- **Sheila Hunter**
- **Andrew Ramsay**
- **Trish Ramsay**
- **Garry Rogers**



All are returning directors. Thank you also to Leo Jensen and Nancy Notman for their nominations.

Following the conclusion of the AGM, Phil Blair and Bianca Neve were endorsed by Directors to fulfil the roles of Chair and Deputy Chair of the Board respectively for the next 12 months.

The full Board and short biographies are on the Society's website at: <https://www.adss.org.au/about/board-of-directors/>

Finances

The Society's 2019/20 Audited Financial Statements were also presented at the AGM.

The Society is in a sound financial position. In the 2020 financial year, the Society produced a surplus of \$239,190.00. As at 30 June 2020, the Society had a net asset base of over \$2.2 million dollars.

The significant surplus produced was certainly not contemplated when the Board formulated the 2019/20 budget. But as I stated earlier, it has been a different year with COVID issues prominent and disruption to many of the Society's events, including the schedule of our state-wide morning teas.

In terms of financial stewardship of the Society, it is important to note that the audit confirmed:

- An unqualified audit opinion
- The Society's accounting principles and policies are appropriate and the disclosure practices are clear
- There were no material uncertainties or going concern issues
- No instances were found of non-compliance with laws and regulations that may have a material effect on the financial statements.
- There was no awareness of any fraud or illegal acts during the audit
- The audited Financial Statements are in accordance with the requirements of Australian Charities and Not-for-profits Commission Act 2012.

The Society's audited financials can be found on our website at:

<https://www.adss.org.au/wp-content/uploads/2020/10/FINAL-ADSS-Financial-statements-Signed-and-Complete.pdf>

It takes a lot of support to provide the Society's services. On behalf of the Society, I would like to thank the construction industry, our corporate sponsors and the many donations from individuals that we regularly receive. Our finances are in good shape, which allows the Society to provide comprehensive services to asbestos and silica disease sufferers, their family and carers, undertake awareness activities and advocate on asbestos and silica related issues.

Good Luck Lauren and Judith



Lauren Rawding has now completed her student placement with the Society as part of her Masters of Social Work. This was the Society's second student social work placement. Lauren said her time with the Society was very rewarding and informative. She particularly acknowledged the challenges and journeys of our members (and their families and carers) who have been affected with an asbestos or silica related disease.

Sadly, we are also farewelling Judith Thomson, Society Social Worker, who has accepted a position a bit closer to home - on the Sunshine Coast. Judith was instrumental in setting-up the support services for those who have been diagnosed with silicosis and their families and carers. This "younger" cohort provided different challenges and issues than encountered in the asbestos field. We will miss her good cheer, commitment and compassion and wish her all the best in her new position.

Thank you for your donation

The Society would like to thank all those that have made a donation to the society since the last Newsletter. Without your kind financial support, the Society would not be in a position to provide the services, advocate on your behalf or lobby Government for improvement in asbestos related matters. In particular, we would like to recognise the following donations over \$500.00.

- **Don Harris**
- **CFMEU members**
- **Vend2GO Pty Ltd**
- **Electrical Trades Union**
- **Precision Interior Walls and Ceilings**
- **C&C People Pty Ltd**
- **Turner Freeman**
- **X Vend**

Thanks Precision Interior Walls and Ceilings



Thanks to John Kelly, managing director of Precision Interior Walls and Ceilings and Chris Heenan, CFMEU delegate and the crew on all sites on the fund raising day for the Society on Friday 20th November. We couldn't get around to all the sites, but we did get to the 80 Ann Street job. It was great morning with a BBQ and series of terrific raffles. The fund raising efforts resulted in a donation to the Society of \$5,000.00 and will go towards our Medical Aides Loan Scheme which provides portable oxygen concentrators, humidifiers and other equipment.

Corporate Membership

On the back page of the quarterly newsletters are listed our corporate members who play a valuable role in ensuring the Society provides the much-needed support services for sufferers of asbestos and silica related diseases. Currently, this membership stands at 32. In the 2021 editions of the Society's newsletters we will be featuring these organisations under "Get to know our corporate members". The Society is very thankful for their support.

I would like to thank the Society' staff – Kerrie Williams, Kay Ravbar, Karen Selman and Judith Thompson, our wonderful volunteers and the dedicated Board of Directors for all of their hard work and assistance throughout the year.

On behalf of the Board of directors and the staff of the Society I wish you a Merry Christmas, joyful holidays and a happy and safe New Year.

Trevor Torrens

Trevor Torrens
General Manager

All Dust is Dangerous



THADY BLUNDELL – SOCIETY LEGAL ADVISER

For years, the focus on occupational lung disease has been asbestos exposure causing conditions such as asbestosis, mesothelioma and lung cancer. The fact is though that prior to that silicosis was a much bigger problem than asbestos disease.

The incidence of silicosis in the 1930s and 1940s led to the creation of what was known as the “Silicosis Board of New South Wales” in 1942 – a specialist workers’ compensation body to deal with those with silicosis. Over time, the name of this body changed to the Dust Diseases Board to encompass all occupational dust related lung disease.

As time marched on and the use of asbestos containing materials increased, (the peak in Australia was not reached until 1980) so did the incidence of asbestos disease, which tended to dwarf all other occupational lung disease.

With the recent re-emergence of silicosis from engineered stone, there has been more focus on not just engineered stone induced lung disease, but dust exposure from the myriad of building products used, particularly in the construction industry over the years.

Most persons working in the construction industry historically have had exposure to not just asbestos

dust, but silica from a variety of sources (concrete, tiles, general stone and even fibro contained silica), as well as exposure to a variety of other dusts, such as dust from MDF Board, metal and aluminium dust through the grinding of metal and aluminium products on worksites and other such dusts.

Recent medical opinion has shown that this type of “mixed dust” exposure can contribute, and indeed cause, lung disease such as COPD and emphysema – diseases which were almost exclusively attributed to cigarette consumption in the past. No doubt cigarette consumption contributes to these conditions, but it is becoming apparent that occupational dust exposure has often been overlooked as a contributor to these conditions, particularly in those who have fairly modest smoking histories.

Whilst the re-emergence of silicosis, and indeed life-threatening silicosis from engineered stone, has been a tragedy, it has focused attention on dust exposure generally and led to the reiteration to the message that “all dust is dangerous”.

For further information about mixed dust lung disease, please contact the Society.

ASBESTOS AWARENESS WEEK
23-29 NOV. 20

in ceilings

behind tiles

within surfaces

vinyl/adhesives

BEFORE YOU START, BE AWARE.
ASBESTOS lurks in more places than you'd think.

Asbestos Awareness Week Campaign, Social Media Tile



I had planned to write a final article for this newsletter by acknowledging that the Festive Holidays while wonderful for some, can be challenging and isolating for others particularly after the death of a loved one. However, after coming across this beautifully crafted resource created by Karuna Palliative Care hospice in Brisbane, I realised that there is no need to 're-invent the wheel' so to speak. They cover this poignant issue so beautifully, with compassion and practical tips and I share their perspective wholly..... when it comes to grief 'There are no rules'...

To Survive Christmas after the loss of a loved one always follow the golden rule of grief: *there are no rules*

Grief is as unique and individual as the person who is experiencing it. Nowhere is it written that you must follow a regimented sequence of emotions and behaviours. And nor should there be: it is an impossibility. Many different people can suffer the same type of loss but will cope in entirely different ways. This is because there are a number of factors that need to be considered, such as personality, life experiences, genetics, the type of relationship shared with the deceased, support from family and friends and previous losses, just to name a few.

Let people know how you feel

They may be relieved for the guidance. Remember, friends and family will be grieving your loved one in their own way and may not know how to respond to your grief. People usually say and do inappropriate things (sometimes even with good intentions) when you do not communicate your needs at this time.

You do not have to do it allif at all

Regardless of whether you were the main chef and Family Christmas Event Organizer or only ever took a salad to Aunt Flo's, you do not have to do any of it. Let someone else do the work, or at least help.

Create a new tradition

The death of a loved one may impact on your sense of self, impelling you to adopt a new way of 'being' in the world. Friends and family may want you to 'be your old self' again, but you may need to express yourself differently now. Your loved one may no longer have a physical presence, but you may feel that they are still very much a part of your family. You can create new traditions that will encompass the memory of your loved one for Christmas - and anytime.

You can change your mind

Go ahead and arrange to participate in festivities but see how you feel on the day. Allow yourself to pull out at the last moment if you don't feel up to it; people will understand if you forewarn them (and therefore not take it personally). Often, it is the lead up to the day that is harder to cope with than the day itself. See how you go.

Do what feels right for you

You may want to withdraw from all Christmas and holiday activities this year. It's OK. 'Taking a year off' to be on your own may be just what you need to begin integrating the loss of your loved one into your life. Alternatively, you may want to carry on with your family traditions with a focus on your loved one. Let your family and friends know your decision.

You are not going crazy

The barrage of emotions that engulf you after the loss of a loved one can heighten in intensity on any special occasion. Having fun can sometimes seem wrong, almost as if you are betraying your lost loved one. This is normal and some-times, the day after you have enjoyed yourself, you may find yourself feeling very low. Don't let that stop you having some fun.



Letting people know how you feel...

Talk. And then talk some more. It is common for family and friends to fear losing you to grief. For children in particular, your grief may feel like a form of abandonment. Instinctively, people need you to be the person that they have always known, have always been able to predict and have always been able to rely on. This sense of knowing creates a sense of security. It may be this that motivates people to insist that you do what you have always done at Christmas, enjoy how you have always enjoyed and have the same energy levels that you have always had.

If it feels right for you, be honest and reassuring to your loved ones and friends

Let them know how deeply the loss has affected you and that you are dealing with an array of intense emotions and you are not sure how they will affect you and when. Tell them that you will do what feels right for you day to day...and then that will probably change too. Reassure them that you are journeying through a natural grieving process and that you need to alter how you operate in the world because your life as you knew it has changed.

Let them know that your love for them is unwavering. Any non-acceptance of invitations is not personal - you just need time to adjust.



Christmas Tree

- Will you leave it the same or change it? May-be you could add a special memorial ornament every year.

Where will you have dinner?

- It may be important for you to continue tradition or you may like to create a new tradition and celebrate at a place that was special to you and your loved one. Do what feels right.

Christmas Cards

- To send or not to send? They can maintain a link between family and friends but if it is just too exhausting to do, leave it for a year.

Parties

- Go if you want, even for a short time. Let the host know you may need to go early.

Society Social Worker

JUDITH THOMSON



If family and friends are unable to be with you this Christmas...

If you know that you will be alone this Christmas, try making a list of the things that you would like to do on the day. You may not get around to doing any of the things on the list, but at least you were prepared. You have the chance to make Christmas a beautiful tribute to your loved one in a very special way. Only you will know how to make that hap-pen, but here are a few suggestions:

- Make a special memorial spot in the garden where you can sit and 'be' with your loved one
- Plant their favourite tree or flowers
- Make a memory box with special items that belonged to your loved one or that meant something special to them. You may like to bring it out every Christmas here-after as a memorial and perhaps add to it
- Write a letter to your loved one that can be placed in the memory box
- Visit a local spot that you both enjoyed together
- Visit somewhere that you had both wanted to see together but couldn't
- Visit your local Community Centre or Church to see if they are looking for people to visit others who will be alone at Christmas too
- Maybe you would like to volunteer for a couple of hours in a charity kitchen
- Buy or prepare yourself a lovely meal, hire some DVDs and curl up on the sofa

It has been a great privilege to walk with you, our members during your times of joy and sorrow over the last year and although I am moving on to a new role, everything you have taught me will live on in my practice with others.... So, with much appreciation and love, I wish you well for now and the new year,

Warmest wishes

Judith

Judith Thomson
Social worker.

For further information on
Karuna Palliative Care:
www.karuna.org.au/care





Oxygen Concentrators

Oxygen makes up 20% of the air we breathe and is an essential part of life. Each time we take a breath, we take oxygen into our bodies via the lungs and it is then dissolved into the blood and delivered to body tissues and organs as the blood circulates. Home oxygen therapy involves breathing in air that contains more oxygen than normal through nasal prongs or a mask and connected to an oxygen concentrator in your home.

An oxygen concentrator draws in ambient air which is roughly 20% oxygen and 80% nitrogen. The motor draws the air through intake filters and pushes it to the sieve beds. Inside the sieve beds, granulates of medical sieve absorb most of the nitrogen leaving almost pure oxygen which is sent to the holding tank. The holding tank contains a pressure regulator and flow meter that work to ensure the correct flow rate is received.

There are 2 main concentrators:

Home Oxygen Concentrator - usually the size of a bedside table and requires electricity to operate. It has a long tube that allows you to move freely around the house.



Portable or Mobile Oxygen Concentrator - This is a smaller concentrator designed to be taken out of the home and are very light so they can be carried or wheeled. Portable or mobile concentrators run on batteries.

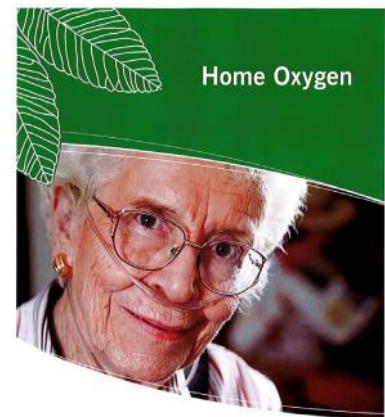


Your Respiratory or Treatment Specialist will assess whether home oxygen therapy is suitable for you. This can include blood tests, oximeter (probe placed on your finger) and spirometry. If tests show that your blood oxygen saturation levels are adequate, then breathing in extra oxygen - through oxygen therapy, is not likely to benefit you.

The Asbestos Disease Support Society (ADSS) has portable oxygen concentrators which can be loaned. To access a concentrator, you will require a prescription from your treating specialist with the flow rate nominated.

For more information on Home Oxygen Therapy, the Lung Foundation of Australia has an information booklet on their website;

<https://lungfoundation.com.au/wp-content/uploads/2018/09/Book-Home-oxygen-booklet-Nov2014.pdf>



LUNG FOUNDATION
AUSTRALIA
"When you can't breathe...
nothing else matters"

November 2014

Asbestos Awareness Week Campaign

ASBESTOS AWARENESS WEEK
23-29 NOV.20

Big penalties for illegal disposal of asbestos
DON'T DUMP ASBESTOS IN HOUSEHOLD BINS!

BEFORE YOU START, BE AWARE.
ASBESTOS lurks in more places than you'd think.

This poster features a green household bin with a red lid. The background is a light blue and white speckled pattern. The text is in bold, black and white fonts.

ASBESTOS AWARENESS WEEK
23-29 NOV.20

EXPOSURE TO ASBESTOS
WARNING!
CAN CAUSE CANCER

BEFORE YOU START, BE AWARE.
ASBESTOS lurks in more places than you'd think.

This poster features a hand holding a chest X-ray. The background is a light blue and white speckled pattern. The text is in bold, black and white fonts.

ASBESTOS AWARENESS WEEK
23-29 NOV.20

in ceilings

behind tiles

within surfaces

vinyl/adhesives

BEFORE YOU START, BE AWARE.
ASBESTOS lurks in more places than you'd think.

This poster shows a kitchen area with white tiles and a sink. Red circles and arrows point to various locations where asbestos is found. The background is a light blue and white speckled pattern.

ASBESTOS AWARENESS WEEK
23-29 NOV.20

BEFORE YOU START, BE AWARE.
ASBESTOS lurks in more places than you'd think.

This poster shows a close-up of electrical wiring and a meter. The background is a light blue and white speckled pattern.

ABC NEWS

Canberra man who contracted mesothelioma after exposure to Mr Fluffy asbestos awarded \$250k from ACT Government

A Canberra man who contracted mesothelioma after playing in deadly loose-fill asbestos as a toddler has been awarded more than \$250,000 by the ACT Government to cover his medical treatment, despite the territory laying the blame for his suffering squarely with the Commonwealth.

James Wallner, 54, was diagnosed with malignant pleural mesothelioma earlier this year and called on the ACT Government to establish a compensation fund to support his and future 'Mr Fluffy' mesothelioma cases. In a statement to the ABC, Chief Minister Andrew Barr committed to investigating a scheme for future victims, but confirmed an "act of grace" payment had been made to Mr Wallner to go towards his medical costs. It is the first time any level of government has paid out any claim for sickness associated with the so-called 'Mr Fluffy' loose-fill asbestos saga.

'Not so angry now': Funds relieve financial burden of treatment

Mr Wallner was just a young child when he and his three brothers had a "snowball fight" with piles of loose-fill asbestos in the garage of their home in Canberra's inner north. They had no idea of the damage they were doing. Fifty years later, Mr Wallner was diagnosed with the incurable condition, one of the first-known Mr Fluffy residents to contract the disease.

According to data from the Australian Mesothelioma Registry, the average time between diagnosis and death was only 11 months. His family launched a bid for government compensation, with concerns his expensive medical treatment would cripple them financially.



© Provided by ABC Health James Wallner has been diagnosed with mesothelioma, of which the median survival is eight to 12 months. (ABC News: Craig Allen)

In a letter obtained by the ABC, ACT Chief Minister and Treasurer Andrew Barr said he had now agreed to an "act of grace" payment of \$251,474 to help Mr Wallner cover two years of medical expenses.

A larger claim, covering the former veterinary surgeon's loss of income and superannuation, pain and suffering, is still being assessed by the government, but the family has welcomed the initial payment.

"It's just an enormous weight off our mind," Mr Wallner said.

"I can't thank [the Government] enough for taking me seriously, and acknowledging that I had no other avenues to pursue."

James' wife Linda Wallner said their initial shock of his mesothelioma diagnosis had changed to anger when it was obvious he was not likely to win any legal bid for compensation.

"Not so angry now, and that means that you can concentrate on just getting the best treatment," she said. Mr Wallner said his treatment was prohibitively expensive, as it included a new generation immunotherapy drug costing more than \$8,500 every three weeks.

The drug, Keytruda, is considered effective in treating melanoma and some lung cancers, but is not yet approved on the Pharmaceutical Benefits Scheme for treating mesothelioma. "But you'll try anything," Mr Wallner said.

A deadly childhood game

James' older brother, Bruce Wallner, has distinct memories of finding the asbestos fluff in the garage of their home in the Canberra suburb of Campbell, and the childhood game that followed, back in 1970.

"It was a magnetic thing for young kids," Bruce Wallner said.

On the National Front

“We made snowballs and had fights and threw it about the place until Mum roused on us and told us to get out of there. “I remember the way it hung on your clothing after you’d been hit by a snowball or whatever.”

James Wallner said that, for decades, his family had put up with ‘dust’ raining from the ceiling of their home but thought little of it. His mother even sealed up a kitchen ceiling vent with aluminium foil, to stop the material contaminating their food. “I’d had 18 years of living in that house, with air vents, with cracks in cornices, and that loose fill asbestos was able to float down,” James Wallner said. “So there was 18 years of exposure really.”

Clean up botched

The man behind the Mr Fluffy company, Dirk Jansen, had no record of which — or even how many — Canberra homes he had pumped asbestos into over an 11-year period. So, in 1988 the Commonwealth commissioned a survey of all 60,000 homes then in the ACT, finding Mr Fluffy asbestos insulation in the ceilings of more than 1,000. It then financed a costly remediation program to remove the asbestos insulation — but refused to accept legal liability for the potentially lethal mess.

What no-one realised at the time was that the clean-up program was botched, with some homes poorly cleaned, and others missed altogether. While the ACT Government embarked on a billion-dollar scheme in 2014 to buy back all the homes tainted by Mr Fluffy asbestos, until now it had not made any payments to anyone who had contracted mesothelioma linked back to the failed insulation program.

Government to consider Asbestos Disease Assistance Fund

In a statement to the ABC, ACT Chief Minister Barr indicated the matter was now resolved.

“This is a very difficult situation and our thoughts are with James Wallner and his family as he battles this illness,” Mr Barr said. “The Government has been engaging with the family over a number of months and we are pleased that a resolution has been reached to support James in spending quality time with his family.”

Mr Barr said he had directed the Asbestos Taskforce to “investigate the establishment” of a broader Asbestos Disease Assistance Fund to support future mesothelioma victims, and he was “deferring consideration” of Mr Wallner’s broader claims for compensation.

Felicity Prideaux from the Mr Fluffy Full Disclosure Group said it was time for a broader health support scheme to be considered.

“The cost of treatment is horrific and the fact is that [the payment] simply means that James will hopefully be able to pay for some treatment,” she said. “Everybody needs a chance to be able to fight for life. “Perhaps now is the time to show some compassion, to show some caring and to show some understanding of the predicament that people are going to be in the future and look at establishing some health support for members of the Mr Fluffy community — it’s a must.”

But crucially, the Chief Minister’s letter confirmed the ACT Government “does not hold liability for the events” that caused Mr Wallner’s mesothelioma.

While the Mr Fluffy company was operating before the ACT was granted self-government in 1989, the Commonwealth has also refused to accept any legal liability, despite years of warnings from experts and its own health officials.

Speaking to ABC Radio Canberra on Wednesday, Mr Barr said the Commonwealth “had not really engaged on the matter” and said it might require a change of government at the federal level for the Commonwealth to come to the table. “The only framework we have at the moment is the act of grace payment mechanism under the Financial Management Act, hence the investigation into a scheme,” he said. “But given the ACT Government didn’t exist at the time of Mr Fluffy, there are obviously a lot of moral hazards that taxpayers are taking on here.” Mr Barr would not be drawn on the potential cost of any official compensation scheme or future act of grace payments. “You can’t put a dollar figure on it but I presume it would be related to the number of cases that would come forward,” Mr Barr said.

The legal tug-of-war between the two governments has made it difficult for residents to pursue legal options for compensation. “The smoking gun for these deaths is held by the Commonwealth government,” James’ brother Bruce said.

“I think they should make amends, and come to the table and coordinate with the ACT government to help underwrite a proper scheme for the people who follow James.”

CDU city campus project hits a snag after asbestos found at site

WORK on the \$250m Charles Darwin University (CDU) Education and Community Precinct has hit a snag with asbestos debris being uncovered during excavation. Warning signs have gone up on the Cavenagh Street site advising of the asbestos discovery. A CDU spokesman has allayed concerns about the asbestos discovery. "CDU was advised by its excavation contractor that minor asbestos debris had been found on the Education and Community Precinct site," the spokesman said. "The pieces located are fragments about the size of a 50-cent coin and of small concentrations." The spokesman said the fragments most likely resulted from the removal of buildings that contained asbestos from the site.

"This is unfortunate but not unexpected," he said. "Under the contractor's Unexpected Find Protocol, the suspect material was tested for asbestos and returned a positive reading. The contractor immediately halted works in the area."

The new CDU city campus under construction.
Credit: News Corp Australia, Che Chorley.

"The contractor engaged its registered asbestos removalist and an environmental consultant to begin works on the mitigation and removal strategies. "All relevant authorities have been notified and work is being conducted safely, in accordance with all relevant standards."

Despite the asbestos find, it is expected that it will not have any major impact on the site or surrounding areas. Work is continuing to make good progress on other areas of the site with excavation well under way. The construction of the new CDU city campus got under way three weeks ago. It followed the federal government's decision to bring forward \$74.8m in funding to enable the excavation works to begin this year. The Education and Community Precinct will be a centrepiece of the revitalisation of the CBD, through the Darwin City Deal.

Local business DTA Contractors won the contract for site works and main building excavation, supporting up to 18 contractors working on site. The project will create 350 on-site jobs and a further 380 jobs across the supply chain through to 2024, making it one of the biggest building projects undertaken in Darwin during recent times. It will deliver state-of-the-art teaching and research facilities, an art gallery and a library.



Company fined \$16K for unsafe demolition, asbestos removal



A specialist demolition company and its two directors has been fined \$16,000 for not properly demolishing a house which had asbestos-containing material (ACM). The company was found guilty of six charges under the Work Health and Safety Regulation 2011, relating to improper removal of ACM. The company was fined \$8000, plus court costs of \$1100, with no conviction recorded. The two company directors, who carried out the demolition works, were each fined \$4000.

The demolition company was contracted to remove a Toowoomba house which had asbestos-containing material that should have been appropriately removed prior to any demolition work; however, that did not occur. Instead, an excavator was used to demolish the dwelling and ACM was pushed into piles across the site, with limited effort made to remove the asbestos or put in control measures against inadvertent dispersal of ACM. The excavator should not have been used to demolish the structure while it contained the ACM. The specialist company did not use 'asbestos removal' signage on the property perimeter, as required to alert people about the potentially hazardous works being undertaken. Additionally, an adequate asbestos removal plan was not put in place before removal work commenced

The company also failed to inform property owners close to the site that ACM works were happening. Workplace Health and Safety Queensland inspectors who attended the site found ACM was not adequately contained and labelled as required before its removal from the site. The defendant company was a licensed asbestos removalist and aware of the safe methods of handling and removal of asbestos; however, these methods were not followed. In sentencing, Magistrate Kay Ryan noted that if the roles for the safe removal of asbestos are not followed, the effects can be devastating for people who acquire a related illness. Her Honour added that there was a heavy onus on all three defendants (the company and its two directors) to keep the worksite safe.

Magistrate Ryan considered the defendant company's timely plea, that it had no previous convictions for any work health and safety breach, and that it had engaged a contractor (at its own cost) to remediate the contaminated worksite. The company was also no longer engaged in demolition or asbestos removal works and was moving towards deregistration. Both individual defendants advised the court that they had been affected financially and health wise.

Around the World

BEFORE THE BLACK LUNG



*In the photo above, dust circles a worker during the construction of the Hawks Nest Tunnel in 1930. Workers on the project were exposed to toxic levels of silica dust; hundreds ultimately died.
Courtesy of Elkem Metals Collection, West Virginia State Archives*

Southern West Virginia is a playground for hikers, cyclists and rock climbers, but in the heart of that lush landscape rests the site of what many consider the worst industrial disaster in American history. Today, from a picturesque overlook on the mountain above, tourists can see the gate of the Hawks Nest Tunnel, located on the New River in Gauley Bridge. There, water rushes through 16,240 feet of steel and rock. But almost 90 years ago, thick clouds of dust blurred the eyes and choked the lungs of workers inside the tunnel. The project attracted thousands of men, hoping to find work during the Great Depression. Three-fourths were African-Americans fleeing the South.

“To these men, going to West Virginia was like going to heaven — a new land, a new promised land — and when they got here, they found that they had ended up in a hellhole,” says Matthew Watts, a minister and amateur historian in Charleston, W.Va. Hundreds of workers would die after working in the tunnel from exposure to toxic silica dust, a mineral that slices the lung like shards of glass.

That same deadly dust has caused a resurgence of severe black lung disease among coal miners in Appalachia. Miners today are sickened younger and entering advanced stages of the disease more quickly. What’s more, federal regulators could have prevented it. But before the modern epidemic plaguing coal miners, there was the Hawks Nest Tunnel disaster, a long-forgotten example of the occupational dangers of silica dust — and the government’s response to death on its doorstep.

“The town of the living dead”

The Union Carbide and Carbon Corp. began constructing the 3-mile tunnel in the spring of 1930. The company wanted to divert water from the New River to a plant

downstream to generate power for iron smelting. Nearly 3,000 workers labored in shifts of 10 or 15 hours. The tunnel, projected to be completed in four years, wrapped in 18 months. Workers drilled holes and then stacked dynamite to blast through sandstone.



*An African-American man poses with others in the photo above while working on the Hawks Nest Tunnel in 1932. Thousands of black men came to West Virginia to work on the project, making up the vast majority of the workforce.
Courtesy of Union Carbide Collection, West Virginia State Archives*

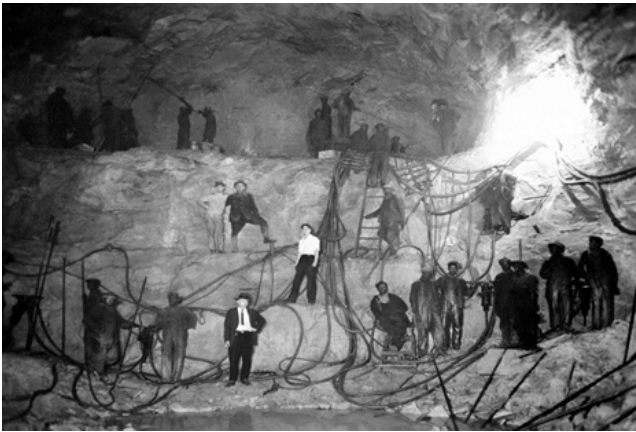
Gauley Mountain, where the tunnel was built, was 99 percent pure sandstone, a valuable commodity in 1930. Drilling through sandstone kicks up silica dust. One worker later said the dust was so thick, he could practically chew it. “There was a nickname at the time for Gauley Bridge: the town of the living dead,” says local writer Catherine Venable Moore, “because there were so many sick workers, and also because they had this kind of ghostly presence when they were coming out of the tunnel being covered in this white silica dust.”

One of those workers was Dewey Flack, a 17- or 18-year-old African-American man. Flack’s age is unclear because — like many other black tunnel workers — only a few traces of his life and death remain. Most likely, Watts says, Flack left his home in North Carolina with a one-way train ticket to West Virginia and the promise to send money to his parents and five younger siblings. He would never see them again.

“Young, healthy people breaking down”

Soon after construction began, men were already getting sick and dying at the tunnel. “Each and every day I worked in that tunnel, I helped carry off 10 to 14 men who was overcome by the dust,” a Hawks Nest worker recalled in a 1936 newsreel. Photos taken during construction show ghostly images of workers shrouded in clouds of white dust.

According to Union Carbide documents, 80 percent of the workers became ill, died or walked off the job after



A drilling crew poses for the above photo in 1931. To create the Hawks Nest Tunnel, workers had to drill through nearly pure sandstone, which kicks up toxic silica dust. Workers in the photo are not wearing respirators — a requirement later mandated by Congress after hundreds of men died from exposure to silica in the tunnel.

Courtesy of Elkem Metals Collection, West Virginia State Archives

The local doctors really were not quite clear at first what they were seeing. We had young, healthy people breaking down in a very short period of time and there really isn't a lot of precedent for that," says Martin Cherniack, a University of Connecticut professor who wrote a 1986 book about the tunnel.

The count of how many workers died varies. According to congressional testimony at the time, as many as 300 people died from silicosis, caused by exposure to silica dust. Cherniack estimates the number to be at least 764 workers — including Flack.

"They would become sick, profoundly short of breath, have severe weight loss, basically be unable to move and function and exercise themselves," Cherniack says. Flack died on May 20, 1931, two weeks after his last shift in the tunnel. His death certificate says he died of pneumonia, but according to Cherniack, company doctors often misdiagnosed worker deaths or attributed them to a disease they called "tunnelitis."

The company would later use those death certificates to prove there were few, if any, silicosis deaths at the tunnel.

"They never knew the real truth"

Hundreds of local white men worked in the tunnel alongside black migrant workers like Flack, but conditions were even worse for the more than 2,000 black men, who made up the vast majority of the workforce.

Black workers who testified before Congress in 1936 said they were denied 30-minute breaks in clean air. They said if they got sick, supervisors would force them from bed at gunpoint.

According to death certificates, black workers were often buried in unmarked graves. In some cases, there was no attempt to notify the victim's family, according to Watts. But NPR did find one relative: Sheila Flack-Jones of Charlotte, N.C., who is Dewey Flack's niece.

I'm heartbroken that my family died thinking that he had run away and they never knew the real truth.

Sheila Flack-Jones, whose uncle died from silicosis after working in the Hawks Nest Tunnel

"My father mentioned when I was younger that he did have a brother but the brother he thought had run away," Flack-Jones says of learning her uncle's fate. "I'm heartbroken that my family died thinking that he had run away and they never knew the real truth."

Five years after Flack and over 700 others began to contract silicosis, the U.S. House of Representatives Committee on Labor held a hearing on the Hawks Nest Tunnel disaster. Representatives from the tunnel companies declined to attend. One submitted a letter that called witness testimony "slandorous rumors and hearsay." "We know of no case of silicosis contracted on this job," the letter concluded.

The congressional committee said the tunnel was completed with "grave and inhuman disregard for all consideration for the health, lives, and future of the employees." Congress took no action against the companies, but that same year it passed a law requiring the use of respirators in dusty working conditions.

More than 500 lawsuits were filed against Union Carbide and a contractor, Rinehart & Dennis, many of which were settled out of court. Dow Chemical, which purchased Union Carbide in 2001, did not respond to NPR's requests for an interview.



Whippoorwill Cemetery in Summersville, W.Va., serves as the final resting place for many of the men who died after working on the Hawks Nest Tunnel. Adeline Lancianese/NPR

The Hawks Nest Tunnel disaster has been memorialized over the years in novels, folk songs and art. In 1938, poet Muriel Rukeyser published *The Book of the Dead*, based on her interviews with tunnel survivors and their families. The book was reissued in 2018.

Flack-Jones plans to hold her own memorial for her uncle Dewey.

"I'm really, really angry. I am heartbroken," Flack-Jones says. "Do I mourn for my uncle, the one that I never knew? Do I mourn for my family because they thought he had left? Or do I mourn for what he would have become had he lived?"

Watts worked at Union Carbide as an engineer for two decades. He also grew up just miles from the tunnel but had heard of it only a few years ago.

"Anything that is dark about what had happened to African-American people in particular in this state, it is as if it did not happen," Watts says. "We don't talk about it. And that's the nature of West Virginia. We live with the historical amnesia, historical denial."

Whippoorwill Cemetery in Summersville, W.Va., is Flack's final resting place. Records suggest that when Flack died, an undertaker loaded his body onto a wagon with others to bury together.



Charlotte Yeager, a local newspaper publisher, is the caretaker of the Whippoorwill Cemetery.
Adelina Lancianese/NPR

"Sometimes they were just stacked in those vehicles just like cordwood," says local newspaper publisher Charlotte Yeager.

According to Yeager, there was a contract with the undertaker: \$50 for each body buried. When the undertaker ran out of room in an old slave cemetery, he buried 40 additional men in plain coffins in a mass grave on his family's farm.

In the 1970s, the farm was excavated to make way for a new road, and the bodies of the workers were reburied at Whippoorwill. The cemetery was abandoned until Yeager found it and restored it, locating each grave with radar equipment. She is now the cemetery's lone caretaker.

At a weekly visit, she assesses the damage from a recent thunderstorm: fallen branches and loose cobblestones. She pauses at a grave, caving in from decades in the soft dirt.

"This is pitiful because that's sunken down," Yeager says, shaking her head. "That's where the casket is. Now that shouldn't be that way at all." She sucks in air through her teeth, holding back tears. "That is sad."

This grave is one of around 40. They're scattered throughout the property, all identical, and each marked by a single wooden cross. It's impossible to know which one belongs to Flack.

Around the World

IN A WORLD FIRST, RECYCLING PLANT USES SPECIAL KILN TO MAKE DISPOSING OF ASBESTOS SAFE FOR FUTURE GENERATIONS

Thermal recycling in the West Midlands town of Wolverhampton can take asbestos, remove it from the cement it's mixed in, and turn "chrysotile asbestos into a material that is no more harmful than the cement from which it was derived." Famed as an electrical insulator and building material, asbestos is now well-known for its health hazards, as breathing the long silicate fibers released into the air when the material is cut or broken can cause fatal lung diseases.

Thermal Recycling has developed a process for "denaturing," as in, "to remove the nature of" asbestos through heating the material in a special kiln that passed environmental regulations and is set to come online for business in 2021. "To date, nearly 200 tests of the treated material have been conducted using Polarised Light Microscopy," explains Thermal Recycling on their website. "No asbestos has been detected in any of these tests. We have also undertaken eight tests using Scanning Electron Microscopy. These have also shown that no asbestos has been detected."

Not only does their process remove the properties that make asbestos what it is, but it does so without any pre-treatment of chemicals, as other denaturing processes might require. This lowers costs of the final product and prevents the additional step of needing to dispose of chemicals.

Chairman Graham Gould noted at the opening of their test plant that "we can't continue putting asbestos in landfill sites for future generations to deal with," highlighting the unfortunate reality of asbestos disposal up until his ground breaking innovation. Thermal Recycling was also awarded the Innovate UK Smart Grant, which they'll use to identify the exact best use for the post-asbestos cement aggregate material leftover from their process.

The market value of this process could be immeasurable, since despite its toxicity and banned-status in 55 different nations, asbestos is still mined in the millions of metric tonnes around the world every year.

Russia produces about one million metric tonnes from its mines in Asbest, northeast of Moscow, while the world's second largest producer China mines about 400,000 metric tonnes every year. Brazil and Kazakhstan are also significant miners of chrysotile asbestos, and nations like India and Indonesia—though not big producers themselves—import hundreds of thousands of tonnes every year.

Short of dumping the end-use product in landfills, Thermal Recycling is the only environmentally safe option, and the value of their process, in terms of earnings or reductions in lung disease risk from dealing with asbestos disposal in the future, could be priceless.



Around the World

JOHNSON & JOHNSON CANCER APPEAL FAILS

Johnson & Johnson says testing shows its baby powder does not contain asbestos or cause cancer.

A US court has refused to consider Johnson & Johnson's appeal of a \$US2.12 billion (\$A2.97 billion) damages award to women who blamed their ovarian cancer on asbestos in its baby powder and other talc products.

The Missouri Supreme Court has let stand a June 23 appeals court decision, which upheld a jury's July 2018 finding of liability but reduced J&J's payout from \$US4.69 billion after dismissing claims by some of 22 plaintiffs.

Johnson & Johnson says it plans to appeal to the US Supreme Court.

It said on Tuesday the verdict was the product of a "fundamentally flawed trial, grounded in a faulty presentation of the facts" and "at odds with decades of independent scientific evaluations confirming Johnson's Baby Powder is safe, does not contain asbestos and does not cause cancer".

The New Brunswick, New Jersey-based company also said it will set aside a \$US2.1 billion reserve for the verdict, to be reflected in its year-end financial results.

Kevin Parker, a lawyer for the plaintiffs, said in a statement: "Johnson & Johnson should accept the findings of the jury and the appellate court and move forward with proper compensation to the victims."

Johnson & Johnson said in May it would stop selling its Baby Powder talc in the United States and Canada.

The company said last month it faces more than 21,800 lawsuits claiming its talc products cause cancer because of contamination from asbestos, a known carcinogen.

In its June decision, the Missouri Court of Appeals said it was reasonable to infer from the evidence Johnson & Johnson "disregarded the safety of consumers" in its drive for profit, despite knowing its talc products caused ovarian cancer. It also found "significant reprehensibility" in the company's conduct.

Internal company records, trial testimony and other evidence show from at least 1971 to the early 2000s, J&J's raw talc and finished powders sometimes tested positive for small amounts of asbestos.

Did You Know?

What we need to know about silica... it's a key ingredient in products that we use every day.

Crystalline silica is so common that products containing it are used in a vast array of industries, including glass, foundries, construction, mineral wool, ceramics, chemicals, horticulture, and even sports and leisure.

It is used as a filler for paints, plastics, and rubber, whilst silica sand is used in water filtration and agriculture.

Crystalline silica is irreplaceable in a series of high-tech applications, for example precision casting, fibre-optic cables, and the raw materials for computer chips.

It is also used in the metallurgical industry, oil and gas extraction, and recycling.

That means that crystalline silica is a key component in the manufacture of almost everything we use on a daily basis. It is present in our computers and phones, cars and buses, roads and railways, and throughout our homes.

It is even key to the infrastructure of the internet, renewable energy and telecommunications. It can truly be described as one of the building blocks of modern life.



Asbestos in the Ancient World

Asbestos occurs naturally on every continent in the world. Archaeologists uncovered asbestos fibres in debris dating back to the Stone Age, some 750,000 years ago. It is believed that as early as 4000 B.C., asbestos' long hair-like fibres were used for wicks in lamps and candles. Between 2000-3000 B.C., embalmed bodies of Egyptian pharaohs were wrapped in asbestos cloth to protect the bodies from deterioration. In Finland, clay pots dating back to 2500 B.C. contained asbestos fibres, which are believed to strengthen the pots and make them resistant to fire. Around 456 B.C., Herodotus, the classical Greek historian, referred to the use of asbestos shrouds wrapped around the dead before their bodies were tossed onto the funeral pyre to prevent their ashes from being mixed with those of the fire itself.

Others believe that the word's origin can be traced back to a Latin idiom, *amiantus*, meaning unsoiled, or unpolluted, because the ancient Romans were said to have woven asbestos fibres into a cloth-like material that was then sewn into tablecloths and napkins. These cloths were purportedly cleaned by throwing them into a blistering fire, from which they came out miraculously

unharmful and essentially whiter than when they went in. While Greeks and Romans exploited the unique properties of asbestos, they also documented its harmful effects on those who mined the silken material from ancient stone quarries. Greek geographer Strabo noted a "sickness of the lungs" in slaves who wove asbestos into cloth. Roman historian, naturalist and philosopher, Pliny the Elder, wrote of the "disease of slaves," and actually described the use of a thin membrane from the bladder of a goat or lamb used by the slave miners as an early respirator in an attempt to protect them from inhaling the harmful asbestos fibres as they laboured.

Pulmonary Rehabilitation

Research has shown that regular exercise helps people with a lung disease maintain their physical fitness (exercise capacity) as well as improve their symptoms and quality of life. It is one of the most important interventions for people diagnosed with chronic respiratory conditions. The benefits can last approximately 12-18 months and can include:

- Increased physical fitness, functioning and exercise capacity
- Reduced breathlessness/help people breathe easier
- Reduced hospital admissions
- Reduced fatigue
- Reduced anxiety and depression
- Reduced length of stay in hospital
- Improved quality of life
- Improved mood, motivation and emotional function
- Improved knowledge and ability to manage lung condition
- Increased participation in everyday activities
- Enhances patients sense of control over their condition

What are the benefits of Pulmonary Rehabilitation?

Research shows that pulmonary rehabilitation is one of the best things patients can do to improve their breathing and wellbeing. The program has been shown to help people breathe easier, improve their quality of life and stay out of hospital. It reduces breathlessness, fatigue, anxiety and depression, improves exercise capacity, emotional function and enhances patients' sense of control over their condition.

What is Pulmonary Rehabilitation?

Pulmonary rehabilitation is a 6 – 8 week evidence-based exercise and education program that teaches people with a lung disease the skills they need to manage their breathlessness and stay well and out of hospital.

The program consists of an individual assessment which includes safe exercise capacity testing and medical history followed by exercise training and education. The exercise component focuses on increasing physical function and is individualised to cover safety considerations. The education component assists patients to manage their condition by providing knowledge in areas such as breathing techniques, using medications and energy conservation.

Who is eligible for Pulmonary Rehabilitation?

Pulmonary rehabilitation programs are generally suitable for people who have a mild, moderate or severe chronic lung disease and who are limited by breathlessness.

Inclusion criteria:

- Have COPD or other chronic respiratory condition e.g. bronchiectasis, interstitial lung disease.
- Can be recovering from an acute exacerbation.
- Are willing and able to participate in a progressive exercise program over 8-9 weeks.
- Can be a current smoker.
- Are independently mobile with or without aid.

Exclusion criteria:

- Have unstable cardiovascular disease (e.g. unstable angina, aortic valve disease, unstable pulmonary hypertension)
- Have severe cognitive impairment.
- Have severe psychotic disturbance.

How do patients join a program?

Referrals to pulmonary rehabilitation programs can come from:

Respiratory specialists including physicians, surgeons, physiotherapists and nurses.

General practitioners.

General physicians.

Other allied health professionals.

Community health professionals.

Potential participants (i.e. self-referrals).

Costs involved

Pulmonary Rehabilitation is offered across various settings including both private and public settings, costs and fees vary.

Medicare

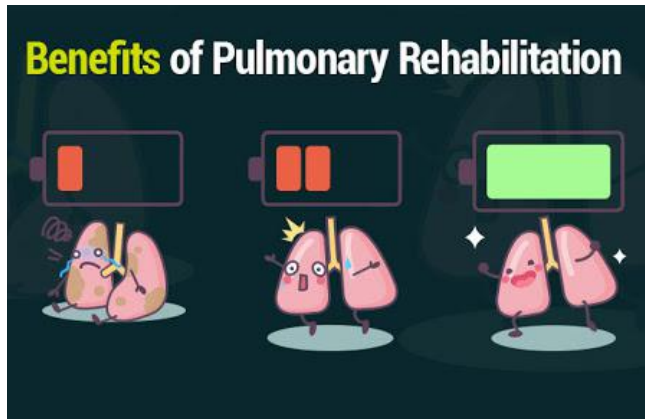
Funding is available through the Chronic Disease Management plan (formerly the Enhanced Primary Care or EPC). To access funding for this, services require a valid, current Chronic Disease Management Care Plan from your doctor/specialist/GP. Some services may also provide bulk billing.

Private health insurance

If you have private health fund cover for physiotherapy, you may be able to use this to assist in the payment of your physiotherapy/pulmonary rehabilitation fee. Each health fund provides different amounts, and different caps on physiotherapy rebates available. Consult with your health fund if unsure of your entitlement.

Workcover

Workers who have a current, accepted WorkCover Qld claim, and have a referral from a GP or specialist may be able to access private physiotherapy services. For these clients, WorkCover will be billed directly. If interested in pulmonary rehabilitation, please consult with your GP or specialist for more information.



Medical Article

FLINDERS UNIVERSITY

With more than 650 Australians diagnosed with malignant mesothelioma last year, Flinders University is leading new research to discover alternatives to chemotherapy and even prevent deaths by early detection in future.

One novel approach, using natural therapeutic benefits of curcumin, a key component of the spice turmeric, will be put to the test in a clinical trial in 2021 as part of world-leading research at Flinders University.

To coincide with Asbestos Awareness Month in November, the Flinders experts warn the high number of cases could persist for years with hundreds more cases of the deadly disease possible after latency of more than 30 years from work-related (builders, plumbers, gasfitters, mechanics and marine engineers) or other exposure. Firefighters may also be at risk after the devastating bushfires razed old buildings and sheds across Australia.

While asbestos is now banned from being used for new buildings, many houses still contain asbestos, so exposure during renovations is common. Australia has one of the highest per-capita rates of asbestos-related disease in the world.

Flinders University researchers led by Associate Professor Sonja Klebe are studying the safety and feasibility of using a form of intrapleural liposomal curcumins to benefit patient survival and quality of life – with fewer toxic side-effects than chemotherapy.

“That’s why it’s important to explore alternative therapies and facilitate early diagnosis to reduce suffering and support early intervention measures,” says Flinders University lead researcher Associate Professor Sonja Klebe.

As well, the researchers are looking for early diagnostic methods with a special lung fluid test. “In most cases, malignant mesothelioma is not diagnosed until it is in the late stages,” she says. “We’re hoping to find a way to test for the disease before it becomes invasive.”

Patients diagnosed with malignant mesothelioma, the cancer caused by asbestos exposure, experience poor survival of 6-12 months following diagnosis and a five-year survival of less than 5%. Therapeutic options are limited due to high resistance rates to chemotherapy and the advanced age of patients (median age 75).

Associate Professor Klebe’s team will test the safety and feasibility of intrapleural liposomal curcumin to benefit patient survival and quality of life. Future treatments are expected to have fewer toxic side-effects than chemotherapy.

In addition, the researchers are investigating methods to facilitate early diagnosis, using novel techniques on the lung fluid that is drained in the early stages of diagnosis. “In most cases, malignant mesothelioma is not diagnosed until it is in the late stages,” she says. “We’re hoping to find a way to test for the disease before it becomes invasive.”

The Asbestos Victims Association (SA) supports the research initiative, based at Flinders University’s Doug Henderson research laboratory.

President of the Asbestos Victims Association Peter Baxter, who was exposed to workplace asbestos, is one of the volunteers campaigning to raise awareness during Asbestos Awareness Month

“I now suffer from asbestosis and have lost two of my managers (from James Hardie), from this terrible cancer mesothelioma,” says Mr Baxter, 80, of Davoran Park.

“We look forward to working with the Flinders Uni researchers and other campaigners to promote further awareness and raise funds for more studies.”

World-First Treatment for Silicosis Underway at The Prince Charles Hospital

Clinicians and Researchers from The Prince Charles Hospital (TPCH) and the University of Queensland (UQ) have developed whole lung lavage, a ground-breaking new treatment that provides a glimmer of hope to those suffering with artificial stone silicosis, a deadly lung disease.

Silicosis affects tradespeople who inhale toxic silica dust while cutting engineered stone products such as kitchen benchtops. The silica dust settles in the lungs, leading to internal scarring (fibrosis) that prevents lungs from working.

Following a comprehensive screening process of nearly 1053 Queensland tradespeople by WorkCover, an astounding 179, or 17%, were diagnosed with silicosis. A further 32 had a diagnosis of progressive massive fibrosis – a far more advanced form of the disease.

Silicosis is now being viewed as the ‘new Asbestosis’ affecting a new generation of people who have been exposed to high-silica products including the popular engineered stone products used in benchtops.

TPCH’s Head of Lung Transplant and Lung Fibrosis Research Professor Dan Chambers said that there is now hope for those hundreds of workers in Queensland who have contracted silicosis, as until now there has been no treatment for the disease.

“We’ve seen silicosis mostly in young people, some as young as 25 years old, so it’s critical to help them and help them fast. This has been a race against the clock, since once scarring occurs it may be too late to remove the silica.” Professor Chambers said.

“Early detection and treatment is key, so that the disease does not progress into the more advanced form – progressive massive fibrosis. We encourage any tradespeople to get screened so that treatment can begin as early as possible.”

To determine if whole lung lavage would be effective against silicosis, TPCH researchers led by Dr Simon Apte and Prof Chambers developed completely new diagnostic techniques that allowed clinicians to directly measure silica levels in patient’s lungs. This step was critical to the success they have seen with whole lung lavage.

“Normally bacteria in the lungs are fought off by the immune system, but silica crystals don’t break down like bacteria. This causes the immune system to go into overdrive, leading to lung inflammation and scarring. This simply means that the lungs cease to function properly, and people cannot breathe,” he said.

Former stonemason and whole lung lavage recipient Anthony Constantine said that the treatment had been life-changing.

“Just knowing that horrible stuff is not inside me anymore is just such a relief, I’m not stressed about it anymore. My mental load has been lifted,” he said.

“Being given a death sentence was a shock, I basically shut down. “Having this procedure has truly changed my life, I can’t thank everyone enough.”

Professor Chambers worked alongside TPCH Senior Research Fellow Dr Simon Apte to develop a technique that allows them to ‘open up’ a patient’s affected lungs and extract the crystal, allowing them to calculate their ‘crystal load’.

Armed with this information, a team of clinicians led by Professor Chambers have been able to use the whole lung lavage treatment to wash out damaging silica crystals and damaged cells, effectively ‘rinsing out’ the lungs in what can be a four to five-hour procedure. The Brisbane protocol has now been rolled out to clinicians in Sydney and Melbourne, who will soon commence whole lung lavage for workers in NSW and Victoria.

The Common Good CEO Michael Hornby said that funding this type of research is extremely important and is hopeful this whole lung lavage procedure will help many young workers not just in Queensland, but across Australia.

“This treatment, if successful, could mean a cure for these young people – we are hopeful this innovation will save many lives and give them back their health and future,” he said.

“This problem is very widespread, and potentially worse than we currently know. It is fantastic that we now have this treatment to offer hope to sufferers of silicosis. However the best thing is prevention. Appropriate personal protective equipment is extremely important for anyone working with high silica products, in order to prevent exposure in the first place,” said Hornby.

Dr Apte is supported by a Fellowship from The Common Good, and both he and Professor Chambers have recently received a research grant from the Foundation to further help the study.





Asbestos Disease Support Society

National Asbestos Awareness Week 2020 Asbestos lurks in more places than you'd think

Monday 23 November kicks off National Asbestos Awareness Week and the Asbestos Disease Support Society is calling on Australians not to be complacent about the dangers of harmful asbestos fibres.

"It is easy to forget that asbestos is still present in millions of Australian homes, but it's a fact that if a house was built or renovated before 1990, there's a good chance it has some asbestos", said Trevor Torrens, General Manager of ADSS.

Asbestos can be easily disturbed and is still commonly found in bathrooms, laundries, and kitchens as well as behind tiles and under flooring and many other household areas.

National Asbestos Awareness Week 2020 reminds Australians to be asbestos aware before they start any work around the home. Asbestos lurks in more places than you'd think. At the height of its use, asbestos was in over 3,000 products and many of these products are still contained in our homes and workplaces.

Asbestos is a known carcinogen and inhaling asbestos fibres can cause a number of life-threatening diseases including pleural disease, asbestosis, mesothelioma and lung cancer. Asbestos fibres are around 200 times thinner than a human hair and can be inhaled easily. They can become trapped deep in the lungs and cause damage over a long period. It can take many years for an asbestos related disease to develop after a person is exposed to asbestos, which is commonly 20 to 30 years.

Asbestos-related diseases cause approximately 4,000 deaths a year. Amid the COVID-19 pandemic, Australians have increased their love of DIY and are using the extra time at home to do some home improvements and maintenance.

"We are encouraging Australians to make sure an asbestos check forms part of their DIY checklist before they start their home improvements." said Mr Torrens. Research shows that 1 in 5 DIYers have encountered asbestos, but only half sought any kind of professional help to deal with it.

"Additionally, a third admitted to disposing of the asbestos improperly – including in their own household bin or in a neighbour's bin and potentially putting others at risk.

"Just like plumbing and electrical work, asbestos removal – or jobs around the home that might uncover asbestos - are jobs best left to the experts." said Mr Torrens.

This Asbestos Awareness Week, ADSS is calling on Australians to know the health risk, be aware of where asbestos might be found before starting work and call a professional for help.

Be aware: Asbestos lurks in more places than you'd think."

The Asbestos Disease Support Society is a registered charity and was established in 1992 to support sufferers of asbestos related disease, their families and caregivers and promotes awareness about the risks of exposure to asbestos.

Media Contact: Trevor Torrens (ADSS) M 0435 895 928 or trevort@adss.org.au

Society Events

Due to Covid in 2020, we have been unable to hold many of the Society events. We were lucky, once restrictions were lifted at the end of the year, that we were able to attend a few support group lunches. Thank you to those that were able to attend.

We have started to secure dates for our support groups in 2021 and I have listed those below. Our morning teas will also start back in the new year with the first ones being in Toowoomba, Maroochydore and Bribie Island in February. Details will follow by way of an invitation in the mail or on social media.
<https://www.facebook.com/asbestosupport/>

CHERMSIDE: First Thursday of the Month (February – November) at the Chermshire Library

BUNDEBERG: First Wednesday of the Month (February – November) at the Bundy Neighbourhood Centre

HERVEY BAY: Second Wednesday of the Month (February – November) at the Hervey Bay Neighbourhood Centre

SUNNYBANK: Second Friday of the Month (February – October) at the Sunnybank Hills Library
Sunshine Coast, Gold Coast, Ipswich, Rockhampton and Cairns awaiting to be confirmed.



14.10.20 – Spring Newsletter Mail Out



13.11.20 – Sunnybank Support Group Xmas Lunch



2.12.20 – Bundaberg Support Group Xmas Lunch



4.12.20 – ADSS Directors & Staff Xmas Lunch



9.12.20 – Hervey Bay Support Group Xmas Lunch



10.12.20 – CFMEU Christmas Toy Drive, supporting Rizeup and families affected by domestic violence

Support Those Who Support The Society



Thanks to QLD Health for providing funding to ADSS to help carry on our services.

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We thank all members for their ongoing support.

