

Asbestos

INFORMATION BOOKLET



**Asbestos Council
of Victoria**

Booklet revised 2020

Disclaimer

This document has been prepared in good faith, exercising due care and attention. However no representations or warranties, are expressed or implied, in relation to the relevance, accuracy, completeness or fitness for the purpose of this document in respect of any particular user's circumstances.

Users of this document should satisfy themselves concerning its application to managing asbestos issues and where necessary, seek expert advice about their situation.

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ACV/GARDS wishes to acknowledge the information in this booklet was provided in part from the Asbestos Related Disease Support Society Queensland and the author of the Asbestos Diseases Foundation of Australia booklet, Dr Keay Foster & Dr Christopher W. Clarke. Also Mesothelioma.com



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**All types of
asbestos are
dangerous**



The Group aims to provide assistance to anyone affected or concerned about asbestos in our community

INTRODUCTION:

Asbestos Council of Victoria (ACV)
Gippsland Asbestos Related Diseases Support Inc. (GARDS)

ABN: 77 687 118 554
INCORPORATION #A0042386U

ACV/GARDS is a non-profit organisation and endorsed charity. Donations of \$2.00 and above are tax deductible.

The Group aims to provide assistance to anyone affected or concerned about asbestos in our community.

Every year in Australia and overseas there are thousands who die of asbestos related disease. Asbestos related disease and deaths are increasing and not expected to peak in Australia until well beyond 2021.

ACV/GARDS Statement: To improve the quality of life of people, and their families, who have been exposed to and affected by asbestos, and reduce the risk to future generations.

OBJECTIVES OF THE ASSOCIATION:

1. To provide support and information to people, and their families, who have been affected by asbestos
2. Raise awareness and reduce the risk of the danger of asbestos
3. Advocate for the needs and rights of people affected by asbestos
4. To maintain a viable and effective Association (ACV/GARDS)

WHAT IS ASBESTOS?

Asbestos is a mineral fibre that occurs naturally in the ground in various parts of Australia. Commercial asbestos mining was carried out in New South Wales and Western Australia. In some instances, asbestos was mined as a nuisance by-product of other commercial mining operations such as the former Greenvale Nickel mine.

There are three main types of asbestos:

1. Crocidolite (Blue Asbestos)
2. Amosite (Brown Asbestos) and;
3. Chrysotile (White Asbestos)

All types of asbestos are dangerous.

Asbestos is a well-established occupational carcinogen. The term 'asbestos' refers to a group of naturally occurring fibrous silicate minerals that are composed of fibres that do not readily break down within the human body and are resistant to fire and chemical corrosion. Asbestos fibres are so small that they are invisible to the naked eye and can be inhaled into the lungs. Until the mid-1980s, Australia was a producer of asbestos and one of the world's highest users per capita of asbestos (Leigh et al. 2002). Asbestos-containing materials (ACMs) were used extensively in Australia. The reason for using so much asbestos is that it is extremely strong and durable and has a very high fire rating and good heat and sound insulating properties.

PREVENTING EXPOSURE TO ASBESTOS RELATED DISEASE

How to control the asbestos hazard:

The main asbestos related diseases are caused by inhaling very small asbestos fibre. In order to prevent – or at least minimise asbestos exposure – it is necessary to:

- Identify products which may contain asbestos fibres
- Prevent – or if this is not possible, minimise – the amount of fibre released from asbestos products.
- Protect people who are at risk of exposure to asbestos fibre.

How to identify asbestos products:

Unless products are labelled as asbestos products, the only way to identify whether they contain asbestos is by laboratory analysis (under a microscope). This is time-consuming and costly. The best approach therefore is to treat products as having asbestos in them.

Where is asbestos likely to be present?

Asbestos was used as a heat and noise insulating material. It was installed:

- Around steam pipes
- Around hot water pipes
- Around boilers
- Under roofs and;
- Around steel beams.



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products**

The asbestos insulation products are among the most hazardous because even minimal disturbance often generates a significant amount of asbestos dust. These situations were commonly found in old power stations, steam trains, high-rise buildings, factories, shopping centres etc. They are unlikely to be encountered in the home.

The sale of all asbestos products was banned on the 31st of December 2003, however asbestos will still be commonly found in brake linings, brake pads and clutch plates. It is also used in the manufacture of gaskets. The replacement of asbestos brake linings without appropriate safety precautions is one of the greatest risks to the home handy person. Compressed air and domestic vacuum cleaners should never be used to remove dust from brake drums because this will disturb any asbestos fibre that may be present. It is now also against the law to reuse or refit any asbestos products.

The most common asbestos products in the home are asbestos-cement products such as:

- Asbestos-cement sheets (walls and ceilings)
- Tilux sheeting in bathrooms and kitchens
- Asbestos-cement corrugated roofing sheets
- Asbestos-cement pipes
- Asbestos-cement guttering
- Asbestos-cement drains
- Some roofing tiles
- Some vinyl floor tiles
- Some caulking compounds such as black jack
- Asbestos insulated electric wiring in some stoves, hot-water systems and light fittings
- Millboards at the back and sides of electrical switch boards

Asbestos was also used in the manufacture of electrical switchboard panels, and electrical insulation around electrical wiring used in stoves and hot-water systems. Products containing asbestos can constitute a health hazard if the asbestos is disturbed and asbestos fibre is released into the air.

For further information on asbestos in the home refer to the ACV/GARDS web site www.gards.org

The ACV/GARDS web site displays The Asbestos in the Home Removal Kit, DVD, information and links to other sites.

Asbestos regulations have been altered to prohibit the use of all asbestos since February 2003.

Please note: Asbestos is still widely used in some countries. Despite being a prohibited import in Australia, goods containing asbestos are still sneaking into Australia.

Prohibited and restricted importation - asbestos

The [Department of Immigration and Border Protection](http://www.border.gov.au) has important information on their website regarding prohibited and restricted imports which includes all forms of asbestos.

<http://www.border.gov.au/Busi/Impo/Proh>

WHY IS ASBESTOS DANGEROUS?

The same qualities (strength, durability, insulation, fire and acid resistance) that make asbestos a desirable industrial product are the same qualities that make it extremely dangerous to people. Once asbestos enters the body, defence mechanisms are unable to break it down or destroy it. The most common organ in which asbestos accumulates is the lungs.

The most common asbestos-related diseases are:

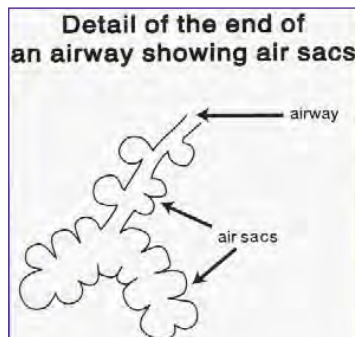
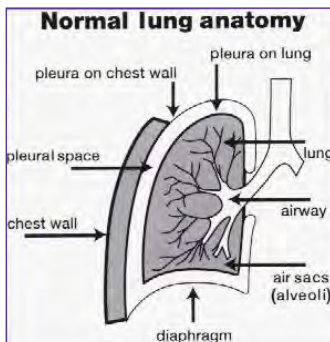
- Pleural Plaques
- Lung cancer
- Mesothelioma - Pleural & Peritoneal & Pericardial
- Asbestosis.

Asbestos is a carcinogen. Asbestos related disease is caused by inhaling the very tiny, indestructible asbestos fibres. These fibres are so small that they are capable of bypassing the defence mechanism of the respiratory system and entering and accumulating in the lungs. Once they reach the lungs, the shape of the asbestos fibres often prevent them from being exhaled.

TIME DELAY BETWEEN EXPOSURE AND DISEASE

No one dies from asbestos-related cancer immediately after exposure. There is always a time delay between exposure and the onset of the disease. This time delay varies, but is usually in excess of ten years and could be as much as thirty or forty years after initial exposure. Therefore, there is no sense in having X-Rays immediately or shortly after exposure.

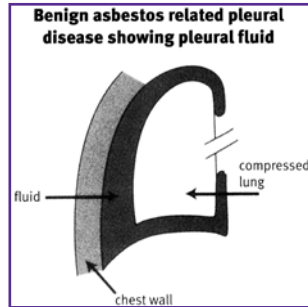
The following is an overview of asbestos diseases, however anyone with asbestos disease should seek the advice of medical practitioners and be guided by them as to appropriate investigation and treatment. The information that follows is not meant as a substitute for information from medical practitioners but merely as a guide to the understanding of various asbestos diseases.



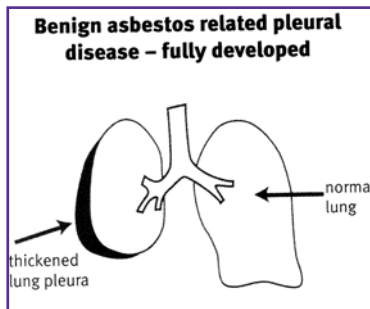
... seek the
advice of
medical
practitioners

ASBESTOS RELATED PLEURAL THICKENING

Usually begins with an inflammation of the pleura leading to fluid collecting in the space between the lung and the chest wall. This may be associated with some discomfort, but most usually it causes shortness of breath, which may come over days or weeks.



When the pleural fluid eventually goes away, the pleura on the lung may become thickened and compress the lung



TREATMENT FOR ASBESTOS RELATED PLEURAL DISEASE

Removal of the fluid is usually indicated and is usually followed by immediate relief of breathlessness. This is a small procedure done with local anaesthetic and it may need to be repeated if the fluid gathers again.

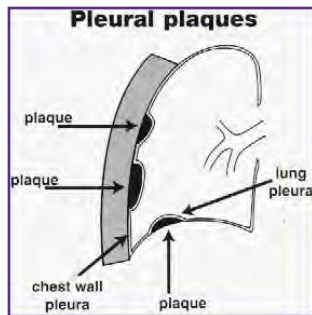
The fluid eventually stops coming back if nothing is done and the lung pleura may begin to thicken. This pleural thickening can be seen on x-ray or CT scan. Because the thickening of the pleura tends to squeeze the lung it may cause shortness of breath. The amount of thickening may vary from person to person.

PLEURAL PLAQUES

Unrelated to the appearance of scar tissue within the lung, patches of thickening may appear on the lining of the chest wall and over the diaphragm in the pleural membrane that lines the chest.

The same thing can occur over the pericardium (outer covering of the heart), where this membrane lies between the lungs. Such patches are known as “pleural plaques.” They may also appear in the absence of any other chest signs resulting from asbestos inhalation. They have minimal effect on lung function and do not go on to become malignant.

Sometimes salts of calcium may form in the plaque that makes them appear striking on a chest x-ray. They may never be diagnosed in life, and may not affect general health in any way.



ASBESTOSIS

Asbestosis is not a cancer. It is a scarring or a fibrosis of the lungs. If asbestos fibre accumulates in the lungs, the body's defence mechanism cannot remove or destroy it. The body then covers the fibre in scar tissue. The scar tissue is not elastic (it doesn't expand and contract) like the lungs. Asbestos-related scar tissue is progressive because it continues to grow in the lung even if no further asbestos is inhaled. Once a significant amount of scar tissue has developed, the lungs become inefficient and cannot handle the volume of air necessary to produce the amount of oxygen the body needs. People with asbestosis often experience shortness of breath. Asbestosis can therefore lead to heart failure.

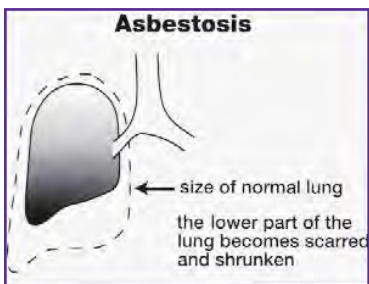


**Asbestosis
is not a
cancer**



Extra oxygen can help people

Asbestosis may slowly progress over time, although the rate varies widely. Breathlessness on exertion gradually worsens often over a period of years. As asbestosis progresses the scarring causes the lung to shrink and breathing becomes more difficult. The damage to the lungs' capacity may not be detected for many years due to the lungs' reserve. As the disease progresses lung capacity reduces. Patients who suffer from asbestosis have an increased risk of developing bronchitis, pneumonia and heart disease. As a consequence asbestosis sufferers may present with heart-related symptoms such as abnormal heart rhythm and heart failure. The diagnosis of asbestosis, however, may be difficult to make. The diagnosis is made by obtaining a history of asbestos exposure, typical x-ray signs, lung function studies and clinical signs such as inspiratory (respiratory) crackling. Clubbing of the fingers and toes is rare but may be present. – Some treatments can help improve the quality of life. Extra oxygen can help people – you should discuss this with your doctor. Some people may have many years of good life.



ASBESTOS RELATED CANCER

Lung cancer and mesothelioma are cancers that are more prevalent in people who have been exposed to asbestos. The cancer process is not fully understood. Most cancers are believed to be caused by damage to a single cell. Exactly how hazardous substances, such as asbestos and cigarette smoke, cause cell damage is uncertain.

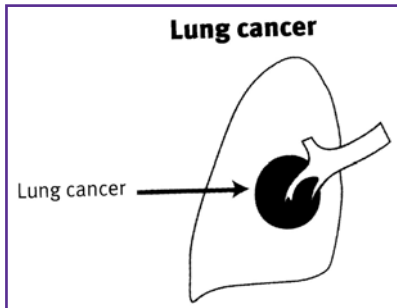
There is no minimum asbestos dose at which there is no risk. The only 100% safe level of asbestos exposure is zero. In theory, one asbestos fibre can cause cancer. In reality, the vast majority of asbestos-related cancer victims have been exposed to significant amounts of asbestos fibre. The more fibres that are inhaled the higher the risk. Exposure to asbestos fibre must be kept as low as possible.

Individual susceptibility is a factor in asbestos-related cancer. There have been cases where family members of asbestos workers have died from exposure to the asbestos on work clothes, when the person working directly with the asbestos has not been adversely effected, even though their exposure was much greater.

LUNG CANCER

Lung cancer is the growth of tumours in the bronchial tubes and lungs. The latency period between exposure to asbestos and development of lung cancer is generally believed to be about 15 to 25 years. Lung cancer caused by asbestos exposure is under notified. The popular conception is that lung cancer is invariably related to cigarette smoking, but in those patients who have also been exposed to asbestos, the risk of developing lung cancer is much higher. There are various types of lung cancer including Adenocarcinoma and squamous cell carcinoma and asbestos exposure has been implicated in virtually all types of lung cancer. Asbestos exposure has also been implicated in other cancers such as oesophageal cancer, kidney cancer, laryngeal cancer as well as other cancers.

People who have been exposed to asbestos are at greater risk of lung cancer than those who haven't. People who smoke are also at greater risk of lung cancer than those who don't. However, smokers who have been exposed to asbestos are at far greater risk than those who are exposed to only one of the two hazards. The collective exposure is not an additive effect but a synergistic (multiplying) effect.



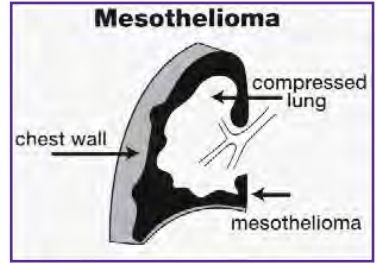
The collective exposure is not an additive effect but a synergistic (multiplying) effect



Cigarette smoking is not related to the development of mesothelioma

MESOTHELIOMA

Asbestos disease is increasing at an alarming rate in Australia, this is particularly so for mesothelioma. It is thought that the incidence of mesothelioma in Australia will not peak until, conservatively, around 2021+.



Of the various commercial types of asbestos, mesothelioma is predominantly associated with exposure to the blue asbestos, crocidolite and brown asbestos, amosite. White asbestos, chrysotile has also been linked to the incidence of mesothelioma. All asbestos exposure should be avoided given the potential of developing mesothelioma which is also often associated with quite brief or low level of asbestos exposure.

The Pleura, which is normally about as thick as cigarette paper, becomes markedly thickened when mesothelioma occurs, sometimes to as much as several centimetres. It may eventually totally enclose the lung.

Mesothelioma is an incurable malignancy which affects the parietal layer (lining) of the pleura. It may also affect the abdominal cavity (the peritoneum). The majority of cases affect the pleura. As the disease progresses the pleura or the peritoneum thickens from the calibre of a cigarette paper to form a hard tumour mass often between 0.5 and 1.0 cm thick. This tissue compresses the lung and the gastrointestinal tract. This may cause intestinal obstruction. Cigarette smoking is not related to the development of mesothelioma. Exposure to Erionite, a fibrous mineral found in Turkey, may also cause mesothelioma.

The latency period between first exposure to asbestos and the onset of mesothelioma is rarely less than 20 years from first exposure and may be more than 50 years. Diagnosis of mesothelioma is usually made by biopsy by either a needle biopsy or through key-hole surgery.

Different Cell Types of Pleural Mesothelioma

Pleural mesothelioma forms in a layer of tissue called the epithelium, which lines hollow organs and body cavities. The cells in this layer are called epithelial cells when they are healthy. When they become cancerous, they can morph into epithelioid or sarcomatoid cells, or a combination of the two, known as biphasic mesothelioma.

Epithelioid - Epithelioid mesothelioma is the most common histological type of this rare form of asbestos cancer – Though both pleural and peritoneal mesotheliomas can express an Epithelioid histological type, Epithelioid cells are most common in malignant pleural mesotheliomas

Biphasic - Malignant biphasic mesothelioma is the second most common cell type of the disease - Approximately 20 to 35 percent of all malignant mesothelioma cases are classified as biphasic. This cell type is more common among pleural patients.

Sarcomatoid – Accounting for 7 to 20 percent of all mesothelioma cases, sarcomatoid mesothelioma is the least common of the disease's three main histological cell types: Epithelioid, sarcomatoid and biphasic. This type of tumor has also been called sarcomatous, diffuse malignant fibrous and spindled mesothelioma.

PHYSICAL SIGNS AND SYMPTOMS OF MESOTHELIOMA

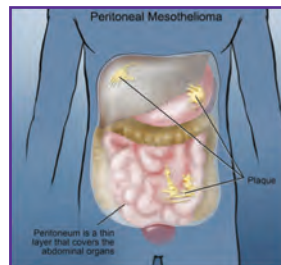
In the passage of time the inhaled asbestos fibres in the alveoli gradually obliterate them with fibrous tissue that surrounds the fibres. There is fibrous pleural thickening and pleural plaque formation. The altered physiological pattern is that of restrictive lung disease with a decrease in lung volume, diminished gas transfer, and hypoxemia.

The patient has progressive shortness of breath, mild to moderate chest pain, loss of appetite, and weight loss. Right heart failure and respiratory failure occurs as the disease progresses.

PERITONEAL MESOTHELIOMA

Occasionally mesothelioma is not in the chest, but occurs in the abdomen. About one out of ten mesothelioma is abdominal (or peritoneal).

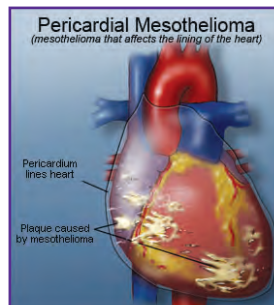
The abdomen is lined with a similar type of tissue to the pleura, but is called peritoneum when it is inside the abdominal cavity. Peritoneal mesothelioma originates in the abdomen and will frequently spread to other organs in area including the liver, spleen or bowel. Severe abdominal pain is the most common complaint that patients present with. There may also be a discomfort level with fluid buildup in the abdomen as well. Other symptoms of peritoneal mesothelioma may include difficult bowel movements, nausea and vomiting, fever and swollen feet



PERICARDIAL MESOTHELIOMA

Pericardial mesothelioma is an asbestos cancer, meaning it's only known cause is asbestos exposure. While the precise route by which microscopic asbestos fibres reaches the pericardial lining is not known, doctors surmise that inhaled asbestos fibres are absorbed into the bloodstream and become entangled in the heart's lining as the blood processes through the heart.

Malignant Mesothelioma occurring in other parts of the body, such as in the pleura or peritoneum, can also metastasize to the pericardial lining.



Physicians will often suspect Pericardial mesothelioma diagnosis if the patient has trouble breathing, shortness of breath, or chest pain. A comprehensive diagnostic and biopsy process will be undergone through use of multiple body imaging scans.

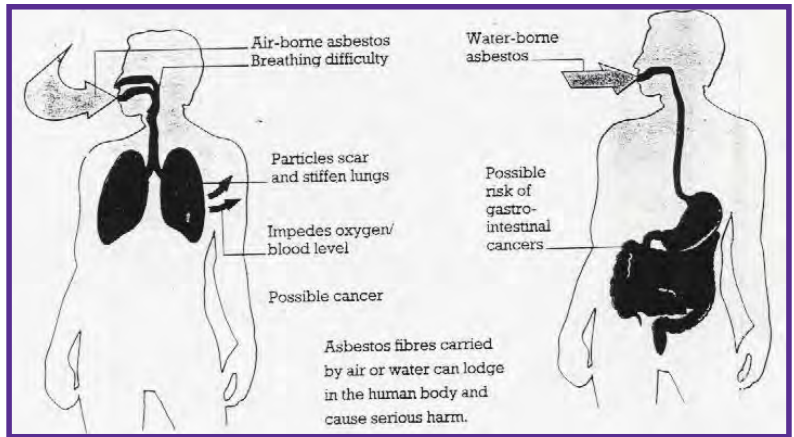


AIR - BORNE AND WATER - BORNE

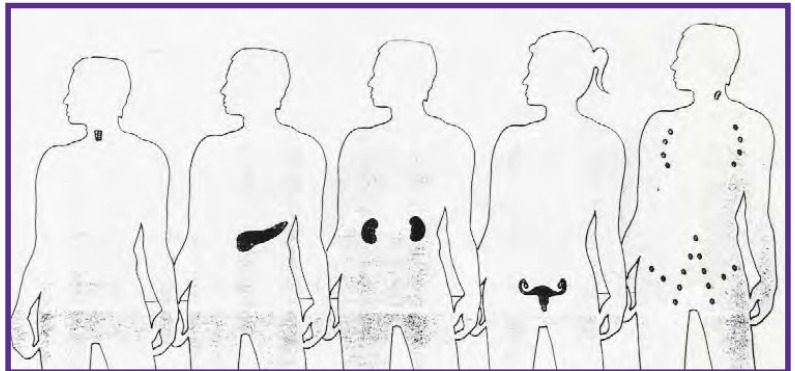
When asbestos fibres are inhaled they lodge, like glass slivers, in the lungs and cause scarring. This prevents the lung tissue from carrying out the task of exchanging oxygen and carbon dioxide gases, so that the person suffers from shortness of breath.

Asbestos fibres can also be carried by water when an asbestos liner crumbles into a water tank.

The result is that people may swallow the fibres when drinking and these can lodge in their stomach or intestines.



Other possible asbestos-related tumour sites



Asbestos fibres that have lodged in the body and stayed there for a long time are suspected of causing cancer.

WHAT KIND OF DOCTOR WILL I SEE?

Usually your general practitioner will do a chest x-ray and maybe one or two other investigations, then refer you to a specialist. Nevertheless, your general practitioner will remain an important member of your treatment team, particularly if your cancer continues to progress.

Specialists who treat lung diseases include respiratory physicians, thoracic (chest) surgeons, radiation oncologists and medical oncologists (an oncologist is a doctor who specialises in cancer). These doctors work as a team to provide the best treatment for each patient.

If pain or other symptoms are a problem but a cure for the cancer is not possible, palliative care physicians are the experts. They can help you at any stage of your illness if pain is difficult to control. Palliative care teams also offer a wide range of support services to people with advanced cancer.

WHAT DOES PALLIATIVE CARE DO?

It enables people who are terminally ill:

- To be free from pain, distress and other discomforts.
- To remain in their own home, in familiar surroundings, for as long as they wish, receiving all the nursing and medical care they need
- To make decisions about their own care.
- To have experienced support and care available for patient and family as they face new physical, emotional and spiritual issues.

DEPRESSION/ANXIETY

The diagnosis of an asbestos disease, and, indeed, just exposure to asbestos, can lead to depression and anxiety and other emotional effects.

Asbestos exposure has been referred to by many persons as a "ticking time bomb" and obviously when there is the potential development of a severe disease there can be a variety of emotional responses such as anger, anxiety, depression and persons can find it difficult to cope. The diagnosis with a life-threatening asbestos disease, or, indeed, any asbestos disease, can of course carry with it not just a physical but an emotional consequence.

This of course is common with the diagnosis of any significant medical condition and professional medical help should be sought not just for the physical consequences of asbestos disease and exposure but for the emotional consequences as well.



**Emotional
consequences
of asbestos
exposure
and disease
is often
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oxygen
therapy is
not without
risk

Details of persons who are trained to provide advice and assistance in this area can be obtained by calling ACV/GARDS - 03 5127 77 44
Depression, anxiety and other emotional consequences of asbestos exposure and disease is often overlooked – physical consequences tend to be looked at first and the emotional consequences second. However, the emotional impact of asbestos exposure and disease can be very overwhelming and support is available.

COMPENSATION FOR ASBESTOS DISEASE

Those with asbestos disease are often entitled to compensation. Generally speaking, compensation entitlements can be obtained in a stress-free way. Compensation entitlements can usually be obtained depending upon the nature of the asbestos disease, where the exposure occurred (the State or country) and whether the exposure to asbestos occurred during employment, self-employment or in a domestic situation such as home renovations or washing asbestos-laden clothes. The States of Australia and overseas jurisdictions all have different compensation schemes.

It is important that anyone who is diagnosed with an asbestos disease seek advice about compensation entitlements as soon as possible after diagnosis as strict time limits for lodging claims can apply. There should therefore be no delay in seeking advice about compensation entitlements.

For advice about compensation entitlements contact ACV/GARDS 03 5127 77 44 ACV/GARDS will be able to put you in contact with an experienced asbestos compensation practitioner who can give you specialist advice, which is essential. Or alternatively if you are a member of a union please contact your union for advice.

CORRECT USE OF OXYGEN & THE DANGERS OF MISUSE

The administration of oxygen can be used for treatment of patients suffering from respiratory failure. Patients with asbestos disease can sometimes benefit from the provision of home oxygen however certain criteria must be met and a person must be assessed by a respiratory physician and home oxygen prescribed. The provision of home oxygen needs to be discussed with the treating respiratory physician. However, oxygen therapy is not without risk and should not ever be used unless advised and prescribed by a physician. Oxygen can be provided utilising oxygen compressed into cylinders or tanks and more conveniently using concentrators, either home units or small portable units which directly draw air from the atmosphere and by means of molecular sieves separate the oxygen from other gases and deliver it to the patient in a pure state. While people do not ever become dependent on oxygen, it must be prescribed to flow at set rates in individual patients, particularly those who have chronic obstructive airway disease,

so as benefit can be provided and adverse effects prevented. There are some patients who suffer from a condition referred to as “carbon dioxide (CO₂) retainers”, who must not be given oxygen beyond a certain rate because if they do receive oxygen flowing at too high a rate it will exacerbate the condition and result in respiratory failure. In all other cases oxygen can be given safely, but it does have a side-effect profile. When oxygen is not humidified and is flowing at a high rate for a long period of time, it may cause nasal stuffiness, a dry and painful pharynx, retrosternal pain because the trachea and major airways become dry, and may also result in nasal drying and nose bleeding. Adequate humidification and the use of a nasal lubricant such as Nozoil may prevent this. Oxygen can also be used successfully in patients who are recovering from a long hospitalisation and who are debilitated. The use of low-flow oxygen in those patients recovering from respiratory illness may improve exercise tolerance and enable rehabilitation to proceed at a faster rate.

The message is that oxygen therapy is safe and necessary in some individuals, but must be prescribed by a physician so as the correct flow rates for any particular patient can be advised. Flow rates should not be exceeded unless directed by a physician, lest complications occur.

INFORMATION ON SERVICES TO ASSIST YOU

Discharge Planning

If you are admitted to hospital, before being discharged it is important to discuss the care and assistance you may require in the home environment. Any discussion involving discharge planning should involve key people such as yourself, your carer or family, hospital staff, doctors and social workers.

Discharge planning will also cover whether assessment is required by an Aged Care Assessment Team (ACAT) to identify the level of care required.

Some community support services that may be helpful once you are discharged include:-

- Home visits by your local doctor
- Home nursing or domestic care
- Commonwealth Respite & Carelink Centre
- Meals on Wheels
- Dietician
- Physiotherapy
- Podiatrist
- Social Worker
- Chemist

It is important to obtain a medication list prior to discharge which sets out all the discharge medication, the dosage required and any possible side-effects.



**It is
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All persons
should carry
identification
on them at
all times

NATIONAL COMPANION CARD

The National Companion Card enables eligible Australians with a disability to attend events and other activities without incurring the cost of an extra ticket for their carer.

To apply for a Companion Card you will need to complete an application form and submit two passport photos with your application. You will then be able to use your card at any venue or event which displays the Companion Card logo. Details of participating businesses, venues and activities can be obtained from the website or by calling the enquiry line.

Victoria - Call 1800 650 611 or visit www.companioncard.gov.au to obtain an application form or further details regarding this scheme. Phone numbers for this service are different in each state - refer to web site for numbers in your state.

VICTORIAN GOVERNMENT CARER CARD PROGRAM

The intent of the Victorian Carer Card is to provide both a symbolic and financial recognition of the value of carers in society. The Carer Card will:

- Recognise and reward the unpaid role provided by many carers of people with disabilities, mental illness, the frail/aged and foster children, particularly carers less than 60 years of age and foster carers; and
- Recognise that often the responsibilities of carers prevent them from participating in the paid workforce and can make them more vulnerable to social isolation and reduced social activity.

Specific benefits the Carer Card will provide as defined:

- Discounts on a range of government and community venues, activities and services;
- Free travel on public transport on Sundays and travel vouchers for two free return off-peak trips
- Benefits and discounts secured through the participation of corporate sponsors.

Call 1800 901 958 (during business hours) or visit www.carercard.vic.gov.au

EMERGENCY CONTACT

All persons should carry identification on them at all times in case of an emergency and/or if you are by yourself at any time. Those with asbestos related conditions often suffer from other conditions and it is important to let a family member or two and perhaps a friend know what these conditions are, the medication that you are taking or contact numbers for your GP or treating specialist. It may also be helpful to provide a neighbour with the telephone number of a family member who can be contacted in an emergency should something occur whilst you are at home by yourself.

It may be prudent to carry details of emergency contacts in your wallet as well as the number of your general practitioner or treating specialist. This emergency information could also include details of Your Enduring Power of Attorney or whether or not you have an Advance Health Directive.

ESTATE PLANNING

All persons should have estate planning issues attended to and this is even more important for persons suffering from serious illnesses such as some asbestos diseases. There are 3 main components to proper estate planning and these are a Will, an Enduring Power of Attorney and an Advance Health Directive.

WILL

A Will is a document that sets out how a person's estate is to be dealt with on their passing. The Will appoints someone to be the executor who "steps into the shoes" of the deceased and deals with the estate. The Will nominates the beneficiaries who will receive the estate.

In addition to these basic provisions, a Will can perform a range of functions such as establishing trusts, appointing guardians for infant children and making charitable gifts.

It is essential that anyone making a Will receives expert legal advice to ensure their wishes are properly carried out and to ensure, as far as possible, that their loved ones are not burdened with uncertainty and dispute about their estate. Once the terms of the Will are settled the Will should be signed without delay whilst the testator (the person executing the Will) has proper capacity to do so. It is important to ensure that a Will is kept up to date and reviewed periodically.



**The Will
nominates
the
beneficiaries
who will
receive the
estate**



Alarm systems can be used for protecting your home as well as your personal safety

ENDURING POWER OF ATTORNEY

Whilst a Will deals with a person's estate on their passing, an Enduring Power of Attorney is a "living document" which appoints someone to handle a person's affairs, usually both financial and medical, if they become incapacitated. It is a very important document which is often neglected. Many people think that because they have a Will which appoints an executor, the executor can handle financial and medical affairs if a person becomes incapacitated, but in fact the Will has no effect until a person passes away. Only an Enduring Power of Attorney can make this provision and is accordingly a crucial document.

ADVANCE HEALTH DIRECTIVE

An Advance Health Directive sets out how a person wishes to be medically treated if they lose the capacity to make their own decisions about medical treatment. It allows an individual to exercise a degree of control over the course of their treatment which would otherwise be completely in the hands of others.

ALARM SYSTEMS

Alarm systems can be used for protecting your home as well as your personal safety. Medical or personal alarm systems are easy to set up and there are many options available depending on your needs. Examples of alarm systems that could assist you are:-

- Pre-programmed telephones
- Intercom system
- Shower or toilet falling alarm
- Location monitoring
- Personal pendant alarm
- Household alarm
- Medication reminder
- Voice operated alarm

For details of the various options available to you contact Commonwealth Carelink who can assist you and direct you to the appropriate service provider. Contact details for Commonwealth Carelink can be found in the directory at the back of this book.

COMMUNITY RESOURCES

In each community there will be a differing variety of voluntary and non-government services and resources. A few are listed as contact points, and this list is by no means exhaustive.

- Senior Citizen's Centre – contact your Local Council for details
- Veterans' Home Care – You can phone DVA for the cost of a local call

on: 133 254, or 1800 555 254, if you are outside a major city or www.dva.gov.au

- Meals on Wheels - contact your Local Council for details
- Respite Day Care – Refer to Commonwealth Respite & Carelink Centre for the cost of a local call 1800 052 222
- Service Clubs (e.g. Apex, Lions, Rotary) may offer assistance with gardening and home maintenance or in smaller communities they may be able to donate home modifications such as ramps, etc.
- Some local churches may assist with respite, shopping and paying of accounts – check with your local church
- Neighbourhood Groups which can be contacted through your local Member's office.

The aim in using all or some of these services and agencies/groups is to try and provide the best and broadest support and encouragement to the carer, those being cared for and their family. Each situation is individual and special and what helps one may not help another.

DAILY ACTIVITIES & EXERCISE

As far as possible and within the abilities of each person, it is advisable to continue with daily activities and to engage in light exercise.

Attempts should be made to develop the maximum chest expansion and to maintain stamina as best as possible. Before commencing any physical activity or exercise you need to discuss this with your doctor or physiotherapist.

Daily activities should be planned so as to conserve valuable energy, and to best cope with breathlessness, should you suffer from this. Some helpful hints include:-

- Alternate light and heavy tasks.
- Rest frequently.
- Use pursed-lip breathing during periods of greater activity.
- Sit whenever possible to perform tasks, as standing uses more energy.
- Use a cart for shopping to avoid carrying heavy loads – remember to unload your bags of shopping first before loading the cart into the boot of a car.
- Consider a garden cart for use in the garden – raised garden beds can also help to reduce unnecessary bending.
- Consider the use of an easy-reacher to avoid unnecessary reaching or bending.

Some simple exercises to do if you are able to include:-

- Deep breathing.
- Breathing in whilst raising the arms slowly above the head and then exhaling whilst slowly lowering the arms.
- Coughing performed after 5 – 6 deep breaths is useful to help bring up sputum.
- Walking
- Riding a stationary bike.



Develop the maximum chest expansion and to maintain stamina as best as possible



a healthy diet and engaging in regular exercise is important

Exercising should be ceased immediately if you experience any increased shortness of breath, heart fluttering, extreme fatigue, nausea or muscle cramps. You should also cease exercise immediately if you experience pallor, mottled or clammy skin. If symptoms persist, you should consult your doctor. The use of low flow oxygen during exercise can assist, if prescribed by your lung specialist.

MEDICATION

Medications should only be taken at the direction of the doctor, which includes any over the counter medicine such as cough medicine, nasal preparations and anti-histamines.

All of these drugs whilst quite safe to use normally could interact adversely with more potent drugs prescribed by the doctor. Any drug may combine to increase the desired action of a prescribed drug so that it has a dangerous effect that could be life threatening. (Some cough suppressants, sedatives and hypnotics cause respiratory depression.) It is vitally important to discuss thoroughly with your doctor the desired effect and possible side effects of prescribed drugs. Most drugs have side effects, but only occasionally do they present as a problem. When a combination of drugs is taken, or when drugs are taken in larger doses, or over a prolonged period of time, then serious side effects may occur. The effect of some drugs may significantly reduce quality of life and may have irreversible effects on other organs and systems in the body. By understanding the expected outcomes of drug use the person can weigh the cost and benefit of medication in their treatment and quality of life.

NATURAL & ALTERNATIVE THERAPIES

Some people prefer to use natural or alternative therapies to treat, manage and live with an asbestos related disease. Natural therapies may also be considered to complement the more traditional approach to treatment such as chemotherapy or radiotherapy.

Of course, following a healthy diet and engaging in regular exercise is important whatever path you choose.

Some natural therapies to consider are:-

- Acupuncture
- Nutritional / Herb Supplements
- Massage
- Meditation
- Yoga

You should discuss the use of any herbal or alternative therapies with your doctor or general practitioners as some medications may interfere with alternative therapies. It may also be helpful to keep a record of all medications taken (both traditional and herbal) including the amount taken, frequency of use, reason/s for use and results. Side effects should be noted as well including good effects, no effect and detrimental effects

AVOIDING RESPIRATORY INFECTION

The main risk to persons with a chronic respiratory disease, such as asbestos related diseases, is the common cold. As the lung's ability to exchange oxygen and carbon dioxide is already severely impaired this can cause obstruction of the airways with excessive mucous. At the first sign of a cold:-

1. Rest more and increase nutritious fluids and water intake.
2. Notify the doctor if any symptoms persist for three days or more.
3. Learn to recognise abnormal changes in the colour and amount of sputum.
4. Advise your doctor of increasing shortness of breath, wheezing and chest discomfort.
5. Do not take over the counter medicines without your doctor's knowledge
6. Take the full course of any antibiotic prescribed.
7. Avoid irritants to the respiratory system.

Irritants such as smog, aerosol sprays, fumes and cigarette smoking will only exacerbate the respiratory system and make breathing more uncomfortable, tiring and even distressing.

Excessive dust in the environment of the patient can also aggravate coughing and stimulate wheezing and discomfort.

Cigarette smoking will increase mucus production causing the airways to become clogged with mucus causing increased shortness of breath.

Points to Remember:

1. Keep away from people with colds and flu.
2. Wash hands frequently as cold and flu germs are often transmitted on objects and clothing.
3. Eat a nutritious diet based on wholefoods.
4. Rest more when not feeling well.
5. Inquire with your doctor about vaccination against flu viruses

SUPPORT FOR THE CARER

The burden of care of a chronically ill person falls almost fully on the carer at home, who is usually the spouse and in the case of asbestos related diseases, is often but not always a woman. There are a number of government and non-government supports available to help the carer and sometimes friends, neighbours and voluntary organisations can be enlisted to provide assistance and respite. Whatever help is available few people will ever feel completely supported and at times will experience severe tiredness, anxiety, grief, loss and loneliness.

Having said this, many carers also experience a wonderful sense of achievement, greater closeness to their loved one and a strong sense of spiritual peace through the caring and love they have been able to share. It is hoped that some of the support available and certain issues addressed in this information may be of use to carers.



**Take the full
course of
any
antibiotic
prescribed**

CARING FOR THE CARER

The avenues for enlisting support and information are on the following page and will address many of the evident problems of the carer and patient. However, the emotional, spiritual and individual needs of the carer can really only be addressed by the carer.

This may include:

- Undertaking a program of stress management or using relaxation tapes and exercises.
- Stress may also be relieved by going out and doing something for yourself, no matter how frivolous or time wasting it may seem or appear to others.
- Have a good confidant. Someone you can really unfold to and who you know will keep what you say to themselves.
- Be honest with agencies, helpers, friends AND FAMILY.
- Be forgiving, especially of yourself, spouse and other loved ones.
- Take each day as it comes and celebrate small achievements.
- Worry about the things that matter and the things you can change. Some things, no matter how much you worry, won't change.
- Concentrate on quality of life.
- Be as normal as possible and try to follow a normal daily routine. The course of the disease differs with every person and it may be years before debility causes significant interruption to life style, earning capacity and daily living skills. Even so it is prudent to look to the future and consider how to maintain income, home and relationships. Setting mutual goals for couples may help overcome the anxiety of chronic illness and ensure the worthwhile use of time, talents, financial and material resources, and emotional and physical energy. Bossing and babying a person with asbestos related disease often has negative outcomes and may make the carer anxious and upset too. Be patient, understanding and caring as well as respect each other.

IT MUST NOT BE FORGOTTEN that the carer is one who must also be cared for with information, understanding and appropriate services at the appropriate time and place along with lots of SUPPORT.



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DIRECTORY

Emergency only call.....000

GENERAL

Commonwealth Respite & Carelink Centre1800 052 222

Commonwealth Respite and Carelink Centres provide free and confidential information on local carer support, disability and community services. Centres are located throughout Australia and you can contact your nearest Centre by phoning the no listed above (Free call except from mobile phones). If you require information on services in another region, your call can be transferred to any other Centre around Australia, free of charge.

Department of Veterans' Affairs (DVA).....133 254
www.dva.gov.au

Regional callers 1800 555 254
Veterans and Veterans families counselling service 1800 011 046

Palliative Care Australia 02 6232 4433
www.palliativecare.org.au
is also available through Commonwealth Respite & Carelink Centre

Cancer Council Victoria..... 13 11 20
www.cancervic.org.au

The Cancer Council Helpline is staffed by trained professionals with knowledge about cancer and cancer care. They are there to help you with information, support and referrals to other services from 8am to 8pm, Monday to Friday.

The Cancer Counselling Service gives people affected by cancer the opportunity to talk through problems and learn new ways of coping. They are linked to a number of support programs that offer peer support and information to people with cancer and their families and a range of informative workshops and seminars. The Cancer Connect service provides cancer patients with peer support and information by connecting them with people who have had similar cancer experiences.

Veterans & Veterans Families Consulting Service - 1800 011 046
Regional Callers - 1800 555 254

A range of people may be eligible to claim benefits and pensions from DVA, including veterans, current serving members, family, carers and former serving members.

Multi Purpose Taxi Program (03) 9655 6666
taxi.vic.gov.au/passengers/mptp

The Multi Purpose Taxi Program makes it easier for Victorians with a severe and permanent disability to afford taxis.





The Multi Purpose Tax Program helps the people who most need it. You can become a member of the Multi Purpose Tax Program if you:

- live in Victoria, and
- have a severe and permanent disability, and
- have a disability that means you can't use public transport by yourself.

To become a member you also need to either:

- use a wheelchair all the time, or
- hold a Department of Veterans' Affairs Pensioner Concession Card or gold Repatriation Health Card, or
- hold certain Pensioner Concession or Health Care Cards from Centrelink, or
- be able to show you have financial hardship by providing financial information.

COUNSELLING & BEREAVEMENT SERVICES

Beyond Blue 1300 224 636
www.beyondblue.org.au

beyondblue is a national, independent, not-for-profit organisation working to address issues associated with depression, anxiety and related substance misuse disorders in Australia.

Life Line 13 11 14
www.lifeline.org.au

Lifeline is staffed by trained volunteer telephone counsellors who are ready to take calls from any person 24-hours a day, any day of the week from anywhere in Australia. Lifeline offers a counselling service that respects everyone's right to be heard, understood and cared for as well as information about other support services that are available in communities around Australia. Lifeline telephone counsellors are ready to talk and listen no matter how big or how small the problem might seem. They are trained.

The Australian Psychological Society 1800 333 497
www.psychology.org.au

Search for a psychologist in your area. Access over 2,300 psychologists Australia wide, who are in private practice and provide services for a fee. Psychologists who are endorsed by Medicare Australia can provide consultations with a Medicare rebate.

Kids Help Line
Phone Counselling Service 1800 551 800
www.kidshelpline.com.au

Australia's only free, private and confidential, phone counselling service especially for young people aged between 5 and 25 years.

CONTACT DETAILS OF THE ASSOCIATION:

Asbestos Council of Victoria (ACV)

Gippsland Asbestos Related Diseases Support Inc. (GARDS)

PO Box 111, Moe. Victoria. 3825

211 Lloyd Street, Moe, Vic. 3825

Ph: 03 5127 7744 (24/7)

Email: gards@wideband.net.au

enquiries@gards.org

Web: www.gards.org



INFORMATION ABOUT THE ORGANISATION

ACV/GARDS is an endorsed charity. Donations of \$2.00 and above are tax deductible

ACV/GARDS FEES

Joining Fee - \$5.00

Annual Fees:

Pensioners/Concession/

Unemployed - \$5.00

Employed persons - \$15.00

OFFICE HOURS

Monday - Thursday, 10.00am - 4:00pm

Friday by Appointment

Call in for a chat and cuppa - please note no office at Chadstone.

ACV/GARDS is a not for profit organisation and is an endorsed charity with tick of approval. Donations of \$2 and above are tax deductible.

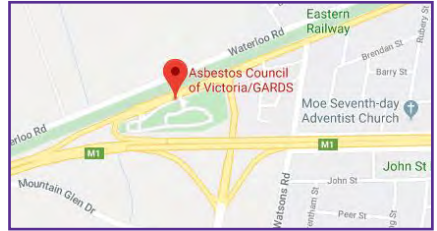


INFORMATION ON MEETINGS

ACV/GARDS SUPPORT MEETING

We conduct a monthly meeting (1.30pm – 3.30pm) on the last Tuesday of the month where guest presenters are invited to provide information about support services of all kinds and any other topics of interest that the members might find of relevance. The meetings also provide a gathering place for experiences; ACV/GARDS Support is open to anyone whose lives have been affected by asbestos, their families and the general public.

Regional
ACV/GARDS office
211 Lloyd Street Moe 3825
Last Tuesday of Month
1.30pm -3.30pm
Mobile: 0407 274 173



Metro
Amaroo Neighbourhood Centre
34 Amaroo Street
Chadstone 3148
2nd Monday of Month
1.30pm – 3.30pm
Mobile: 0481 987 953



Please note - No support group meetings are held in December or January – there are calendars posted on our web site of dates for meetings at www.gards.org and also posted in each edition of our newsletters

ACV/GARDS has a night time organisational meeting which is held at our main office 211 Lloyd Street Moe on the 3rd Tuesday of the month – there are no night time meetings held in Dec or Jan

ACV/GARDS loans out free of charge to asbestos sufferers in the Gippsland area - oxygen bottle regulators, conserving devices, home oxygen concentrators, wheel chairs, oxygen bottle carriers, nebuliser, walking sticks and bed poles. We also have an extensive library of books, DVDs and CDs on asbestos issues, health, social and environmental that we loan free of charge to those wishing to improve their knowledge.

ACV/GARDS can provide professional counselling with qualified psychologists free of charge for those who have been diagnosed with asbestos related disease, this can be extended to family members. If preferred, alternative support can be telephone counselling and this can be arranged.

About our support groups

ACV/GARDS provides support and information to asbestos & silica sufferers, their families and carers. This includes telephone information/support service 24 hours, 7 days a week – ACV/GARDS has an office, which is open for sufferers their families and carers and the general community to access at the times listed

Office Hours located in Gippsland

Monday – Thursday

10am – 4.00pm

Friday by appointment

Please note there is no office in the Metro area.

ACV/GARDS welcomes visits to the Regional office at all times listed – if you are coming from any distance it would be advisable to ring before you come in case we have an emergency or are at a meeting.

CONTACT DETAILS OF THE ASSOCIATION:

Asbestos Council of Victoria (ACV)

Gippsland Asbestos Related Diseases Support Inc. (GARDS)

PO Box 111, Moe. Victoria. 3825

Ph: 0407 274 173 (24/7)

Email: gards@wideband.net.au

enquiries@gards.org

Web: www.gards.org



www.facebook.com/gardsinc



www.twitter.com/acv_gards



ACV/GARDS INC. Membership Form

Name

Address

..... P/Code

Telephone

Email

Occupation

ACV/GARDS NEW MEMBERS Joining Fee \$5.00

PLUS

ACV/GARDS Annual Subscription 20___

1. Concession (Pensioner/unemployed) \$5.00

2. Full Rate (employed) \$15.00

Upon my admission as a Member, I agree to be bound by the rules of ACV/GARDS Inc.

Signature Date

Please return to ACV/GARDS with payment, PO Box 111, MOE, Vic. 3825

Office Use Only

I, a Member of the ACV/GARDS Inc. nominate the Applicant for Membership of the Association

Signature of Proposer Date:

I, a member of ACV/GARDS Inc., second the nomination of the Applicant for membership of the Association.

Signature of Date

Signature of Seconder Date



