SEASONS GREETINGS

Best I start off by wishing everyone all the best for the festive season and hoping that 2004 will be a great year for all of us.

Lilah’s report inside gives food for thought on two points. The concern that hospital staff are still sometimes not familiar with the particular requirements of laryngeectomy and the fact that we are total neck breathers. Also what the situation is with the Newcastle branch of the Association. I wonder whether monthly meetings are still being held at the Mayfield Bowling Club as advertised on this page of the newsletter?

Sorry it’s another short newsletter this month, I hope to lift my game a bit in the new year. In the meantime I hope to see many of you at our annual Christmas lunch at the Bowler’s in York Street. I’ve got a couple of presents wrapped for the raffle already so I’m ready and eager to go.

Take care of yourselves and make sure that you stay healthy and happy into the New Year and beyond.

A.T. Krasnodebski

WHO TO CONTACT

FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, PO Box 884, Petersham 2049. Phone 02-9799-1154
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033. Phone 02-9863-2550
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dooling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1900. Fax: 02-9357-2576
Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - Faith & Russell Green, Tony Krasnodebski

PRESIDENT Brian Gardner in the chair opened the meeting at 11am. The president welcomes back Des Nicholson after her hip operation and also Jo Nowland who had a bad fall needing 5 stitches in her eyebrow. Minutes as appeared in newsletter were taken as read.

Moved Pat Halliburton, seconded John Chaloner.

SECRETARY/TREASURER'S REPORT - November '03

MEMBERSHIP

There has been little movement in membership figures during the last month. Only one new member and that was Mr Edward Copelin of Port Macquarie. Edward had his operation at the John Hunter Hospital, Newcastle in September and we hope he will be able to attend a meeting at the Newcastle Branch.

To date 27 members have paid their subscription for 2004. The annual subs are now $10.00 per annum and we would appreciate payment by members as soon as possible.

CHRISTMAS PARTY

So far 29 members have said they are coming to the Christmas Party being held on the 6th, December. Would members please note that the closing date for the Party is 24th, November.

Moved by Jo Nowland, seconded by Carol Gardner.

WELFARE OFFICER'S REPORT - As this is my last report for the year I want to wish you all a happy and healthy New Year.

Mary Morris (POW Speche) had a baby girl, Laura, and she rang to ask me to thank the Association for the beautiful flowers we sent. Josephine and Noel Bluet also rang thanking the Association for the beautiful arrangement sent to them. Noel is having trouble with his legs and has difficulty getting around and is no longer able to attend our meetings. Received a 'Thank you' from Des Nicholson for the card the Association sent her while she was in hospital having a hip replacement. She is home and coming along in leaps and bounds.

The Hospital Visitor who visited Mr C Hales of Unanderra, (I have no report on this gentleman). Mr Hales is now having treatment at POW, if you wish to visit him - please do. Derrick Roper wrote to me regarding a visit he did, and it was fortunate he and Dot were visiting, there was a bit of trouble, everything ended well but it is something I feel should be discussed at the meeting. Thanks Derrick for letting me know.

Gosford Hospital rang me, a new larry wanted to see larry visitor but as I have no contact with Newcastle Laryngectomee Association and my calls are never returned. John Chaloner was kind enough to go up by train to see him and I am most grateful to John for that. Also had another call from the wife of a new larry who was operated on at Newcastle, had seen nobody, all information coming from staff at hospital and because of the 'Hospital Pack' they found my phone number. As we have a larry in their town I wrote to him to see if he would call on them. Things like this make me mad because I try my hardest to give new larrys-to-be a bit of peace of mind, but I seem to be flogging a dead horse. Bye for now. - Lilah

GENERAL BUSINESS - John Chaloner raised question of cut off date for non financial members. The Secretary reaffirmed Jan 1 as no more newsletters would be sent to these former members after that date.

Des Nicholson raised the problem of patients missing the enrolment forms in the patient packs sent to the hospital.

The President reported he has had no replies on inclusions member would like in the training video to be made at Westmead. He again requested input and reminded members that this is the opportunity to remedy anything they feel is missing in the current video.

The Victorian and Queensland branches are also planning new videos. Caitlin Reimer speech pathologist Westmead is to contact them and consolidate ideas. The question of breath testing of laryngectomees was raised by John Chaloner. The President replied that he has raised the point with N.S.W. Police and there should be no problem here.

Reminders that executive position nominations are to be in by 31st January were also given.

The meeting closed and lunch was served.

WESTERN DISTRICTS NEWS - November 2003

Our last meeting for 2003 on Tuesday, 11th November was very well attended.

The final function for the year is the Christmas party at the Dundas Rugby Union Football Club 35 Quarry Road Dundas on Tuesday, 2nd December.

The meeting on Tuesday February 10th 2004 will be the Annual General Meeting. At this meeting all committee positions are declared vacant and an election is held for committee members. Nominations for committee positions will be received up until 10th February.

Members are asked to consider nominating for one of the positions listed:- President, Vice-President, Secretary, Treasurer, Minute Secretary, Social Secretary, Welfare Officer, Committee Member (3).
AMBULANCE EMERGENCY

In the Victorian October newsletter their ex-President John Ritchie wrote an account of all the drama that he had to go through when he inhaled his prosthesis in the process of changing it.

After trying to extract the prosthesis himself with no success, his doctor told him to go to hospital. His local hospital was unable to help him, so he took himself off to Monash Hospital where a doctor managed to drag it out of his lungs with a 'fishhook' contraption.

All that trauma resulted in his coughing up blood for a couple of weeks, bruising, swelling in the neck area and soreness in the trachea, an experience he wouldn’t wish on anyone. It occurred to him that if it would be a worse problem for someone living on their own, unable to talk in an emergency situation.

Now I hope no one ever finds themselves needing to dial 000 for an ambulance, especially under circumstances like the foregoing where you are unable to talk, but just in case it would be best to be prepared. I rang Telstra and asked if there was a facility whereby we could register with the 000 call centre. I was told that wasn’t possible but was advised that there was a private emergency call service available named ‘VitalCall’.

I rang ‘VitalCall’ and they sent me their brochure. Their rates include a $279 installation fee and $415.80 per annum monitoring fee. I will arrange to have one of their representatives attend either our February or March 2004 meeting to give us a talk on the various ways their service can be accessed. If you are eager to find out more in the meantime you can call their toll free number 1300 360 808 yourself.

At the same time I am writing to the new minister of communications, Hon Daryl Williams, asking why we don’t have free access to the 000 service even if we are not able to speak when we ring it. More about that at a later date when we have exhausted our enquiries. Meanwhile it could pay you to consider how you would cope in a medical emergency if you weren’t able to talk at the time, especially if you live alone.

NEXT MEETING
The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 18th February, at the Uniting Church Hall, Carrington Avenue, Strathfield. at 11 am.
There is parking on site and it is also a short walk from the Railway Station.
The meeting will be followed by a light luncheon.
Laryngectomees, Friends, Families, Professionals all WELCOME.

VALE
Regrettfully, I have to report that Mr. Leo Bolt of Ashfield, has died. I have no details of his death as the advice received was from his returned Newsletter.

December 2003
CHRISTMAS GIFT IDEAS FOR LARYNGECTOMIES
1 A cookbook with recipes for soft foods such as soups.
2 A vaporiser or humidifier for winter especially.
3 A long handled backbrush for bath or shower time.
4 A Shower Shield, available from the Welfare Officer.
5 A neckrest or travel pillow for intrepid travellers.
6 A good quality magnifying mirror for stoma care.
7 A small but powerful torch.
8 A food processor, milkshake maker, omelette maker.
9 A stoma cover, cotton scarf or skivvy.
10 A world cruise on the maiden voyage of the Queen Mary II.

humour
True extracts from UK Insurance Claim forms, collected by Norwich Union for their annual Christmas magazine:

"I started to slow down but the traffic was more stationary than I thought."

"I pulled into a lay-by with smoke coming from under the bonnet. I realised the car was on fire so took my dog and smothered it with a blanket."

Q: Could either driver have done anything to avoid the accident?
A: Travelled by bus?

This Norwich Union customer collided with a cow. The questions and answers on the claim form were:

Q - What warning was given by you?
A - Horn

Q - What warning was given by the other party?
A - Moo

"I didn't think the speed limit applied after midnight"

"I knew the dog was possessive about the car but I would not have asked her to drive it if I had thought there was any risk."

"Windscreen broken. Cause unknown. Probably Voodoo."

"The car in front hit the pedestrian but he got up so I hit him again"

"I pulled away from the side of the road, glanced at my mother-in-law and headed over the embankment."

"The other car collided with mine without giving warning of its intention."

"I collided with a stationary truck coming the other way"

"A pedestrian hit me and went under my car"

"I had been shopping for plants all day and was on my way home. As I reached an intersection a hedge sprang up obscuring my vision and I did not see the other car."

"I was on my way to the doctor with rear end trouble when my universal joint gave way causing me to have an accident."

Two elderly couples were enjoying friendly conversation when one of the men asked the other, "Fred, how was the memory clinic you went to last month?"

"Outstanding," Fred replied. "They taught us all the latest psychological techniques: visualization, association, etc. It was great."

"That's great! And what was the name of the clinic?"

Fred went blank. He thought and thought, but couldn't remember.

Then a smile broke across his face and he asked, "What do you call that flower with the long stem and thorns?"

"You mean a rose?"

"Yes, that's it!"

He turned to his wife, "Rose, what was the name of that memory clinic?"

***

MERRY CHRISTMAS

December 2003
TIME TO ACT

The back page of this newsletter has the form to nominate for positions in the Association. This organisation is in danger of collapsing as we don’t get new blood, so I encourage everyone who is able to put their hand up for a position to do so.

You will also see that the annual subscription has been reduced to $10. This is to benefit current members and also to encourage new members to join. Since I have been involved with ‘Still talking’ I have noticed that we are losing members at a faster rate than new ones join. One reason for this of course is that doctors are better at targeting throat cancers and dealing with them without having to perform laryngectomies.

I’ve had a couple of letters recently, from Tom Kelly showing his support for the newsletter and Blanche Piacun telling me she has moved and supplying some jokes, one of which goes:

A Keeper at the Zoo saw a dead finch in the finches cage so he picked it up and put it in a bag. Going to the monkey cage he saw a couple of dead monkeys so he put them in the bag as well. Passing the lions cage he decides to throw the bag in their cage. The lions sniffed the bag and one said ‘Finch and Chimps again’.

A.T.Krasnodebski

WHO TO CONTACT

FOR BLOM-SINGER SUPPLIES - David Smith, 27 Bellevue Pde, North Curl Curl 2099, Phone 02-9933-1539, Ask for David personally;
FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, PO Box 684, Petersham 2049, Phone 02-9799-1154
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033.
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Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - Russell & Faith Green, Noel & Josephine Bluett, Don Newby,

PRESIDENT Brian Gardner in the chair opened the meeting at 11am. Minutes of September were taken as read.

Moved Pat Halliburton seconded Carol Gardener.

SECRETARY/TREASURER’S REPORT - October 2003

I apologise for the absence of my wife and self today. Desma had an operation yesterday to remove and replace one hip joint so I am visiting her today in hospital. We’ll be back next month.

MEMBERSHIP

In the last month I have welcomed Mr James Porter as a member. James comes from Emerton and he became a lary at Westmead in May this year.

2003 CHRISTMAS PARTY

So far nine (9) members have advised they will be coming to the Christmas Party on 6th December. Would members please note we need to know if you are coming to the party by 24th November, 2003.

Don Newby has advised me he will be in Queensland this week so he apologises for his absence from this meeting.

INCOME & EXPENDITURE 1/1/03 to 14/10/03

Balance b/f $ 8417.83
Income $ 5018.21

$13438.04
Expenditure $ 8439.09
Balance c/f $ 4996.95
Term Deposits $39182.79

WELFARE OFFICER’S REPORT - Lilah didn’t prepare a report this month. She spoke at length but it was unrecorded.

GENERAL BUSINESS - Lilah Walton instigated a discussion regarding the supply and charges for stoma covers at the hospitals. Tony Krasnodebski said that some charge should be made or demand may outstrip our ability to supply. It was decided to leave these matters to Lilah’s discretion.

Brian Gardner said he had been approached regarding a new video to be made featuring updated treatments and interviews on laryngectomy procedures. It was felt by some of the speech therapists that the present one is outdated. Those present at the meeting were asked for ideas and presentation of difficulties encountered to help make the video the most helpful for both training speech therapists and assisting laryngectomies. Anyone wishing to contribute can contact Brian by phone or e-mail.

Tony Krasnodebski nominated that the membership fee be reduced to $10 as our membership is rapidly aging and also to encourage more to join.

The motion was moved by Tony Krasnodebski and seconded by Pat Halliburton. It was passed by the meeting.

We were all saddened to hear that Noel Bluett’s problems that prevent him from driving have lead to his resignation as vice-president and will prevent him and wife Josephine from attending meetings. They will both be missed and we wish them better health in the future.

The meeting closed and lunch was served.

The next meeting is Wednesday 19th November.

TOBACCO SETTLEMENT

Philip Morris, or Altria as they now prefer to be known, recently reached a secret settlement in a case where a 21 month old baby girl was severely burned and suffered multiple long term disabilities. In the case against Philip Morris, lawyers for the girl blamed the fire on defective design of a Marlboro 100 cigarette, which like other brands is intentionally made to burn down to the filter even when not beinguffed.

This might be the first case where the tobacco industry has agreed to pay damages in a personal injury case. Let's hope it opens the floodgates for more successful litigation around the world which eventually bankrupts the tobacco industry and related companies.

2
CHEESE AND SPINACH PIE

INGREDIENTS
2 bunches of English Spinach
1 250g tub of Cottage Cheese
100g of Fetta Cheese
Filo Pastry
2 Eggs beaten
1 Tablespoon chopped Parsley
1 pinch Nutmeg
Pepper
Cooking Oil

DIRECTIONS
Wash spinach, cut off and discard stalks. Chop spinach then place in a colander and run hot water over it. Squeeze out water and place it in a bowl. Add cottage cheese, crumble in the fetta, beaten egg, parsley, nutmeg and pepper.

Oil a small (8 or 9 inch) dish and line it with three or four sheets of filo pastry. Add spinach and cheese mixture. Top with another three or four sheets of filo pastry. Tuck top layers of pastry into the side of the pie, trim edges of pastry. Brush the top of the pie with oil.

Bake in a moderate oven (180C or 350F) for 45 minutes to 1 hour or until lightly browned.

humour

NEW MEANINGS:
Abdicate, to give up all hope of ever having a flat stomach.
Carcinoma, a valley in California, notable for its heavy smog.
Esplanade, to attempt an explanation while drunk.
Willy-nilly, impotent.
Flabbergasted, appalled over how much weight you have gained.
Negligent, describes a condition in which you absentmindedly answer the door in your nightie.

Lymph, to walk with a lisp.
Gargoyle, an olive-flavored mouthwash.
Bustard, a very rude bus driver.
Coffee, a person who is coughed upon.
Flatulence, the emergency vehicle that picks you up after you are run over by a steamroller.
Balderdash, a rapidly receding hairline.
Testicle, a humorous question on an exam.
Semantics, pranks conducted by young men studying for the priesthood, including such things as gluing the pages of the priest's prayer book together just before vespers.
Rectitude, the formal, dignified demeanor assumed by a proctologist immediately before he examines you.
Oyster, a person who sprinkles his conversation with Yiddish expressions.
Sarchasm, the gulf between the author of sarcastic wit and the reader who doesn't get it.
Reintarnation, coming back to life as a hillbilly.
Osteopornosis, a degenerate disease.
Glibido, all talk, no action.
VACCINE AGAINST SMOKING

Back in August 2000 we reported on the development of a vaccine named NicVAX designed to stop the urge to smoke. They claimed it had the potential to be a very powerful form of nicotine addiction treatment. Because less nicotine reaches the brain, smokers get less of a kick from the nicotine. People who want to quit smoking could use NicVAX as a way to make smoking less rewarding for them and therefore smoke less over time. NicVAX would also have lasting effects, up to a year per shot, so smokers who quit would be less likely to relapse and resume smoking at a later time. Because it acts in the blood and doesn't affect neurochemistry, NicVAX should cause fewer side effects and be safer overall.

However, NicVAX had only been tested on laboratory rats in which nicotine reaching the brain was reduced by 64%. Although this result showed great promise, there was a possibility that humans would not respond to the vaccine the same way rats did. For example, people might feel the need to smoke more to compensate for the reduced levels of nicotine in the brain.

Last year the company, Nabi Biopharmaceuticals, announced results of a clinical trial in 20 healthy volunteers. They said local reactions to vaccination were mild to moderate, temporary and required no therapeutic intervention. Antibody levels were detected within 7 days of vaccination and were maintained or continued to increase through 60 days post-vaccination.

The trial was a double-blinded, placebo-controlled, phase 1, single centre, safety and immunogenicity trial in healthy, non-smoker adults that were randomly assigned to receive either intramuscular injection of NicVAX or placebo. Investigators collected blood samples throughout the trial to assess safety parameters and to measure antibody levels to both nicotine and carrier protein. In addition, an Independent Safety Committee reviewed unblinded local and systemic reactions and adverse events at various times during the trial.

In July the Centre for Tobacco Research and Intervention (CTRI), a program of the University of Wisconsin Medical School, one of three sites in the United States picked to test whether NicVAX works on humans began further testing on the vaccine. The director of clinical services, Dr Jorenby, said that the idea of enlisting the body's own immune response to protect against the nicotine molecule is really a conceptual leap.

NEXT MEETING

The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 19th November, at the Uniting Church Hall, Carrington Avenue, Strathfield, at 11 am.
There is parking on site and it is also a short walk from the Railway Station.
The meeting will be followed by a light luncheon.
Laryngectomees, Friends, Families, Professionals all WELCOME.

VALE

Unfortunately I have to report that
M. T. G. Armstrong
of Molymook
and Mr. Bill Roberts
of Yagoona
have passed on and we have sent our condolences to their families. We offer our sincere condolences to their friends.

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November 2003
POSITIONS VACANT

Anyone out there looking for a new lease on life? Why not broaden your horizons and take on a new job, the application form is on the back page of this newsletter. Following are the job descriptions of the vacant positions and rest assured, you are fully qualified for any position.

PRESIDENT

This position entails chairing the monthly meetings, assisting the Secretary and Treasurer in answering members' queries, keeping contact with branches throughout the State and representing the Association in any matter that might arise during the year.

VICE-PRESIDENT

Assist the President and Secretary and stand-in as meeting chairman in the absence of the President.

SECRETARY

Receive all correspondence and attend to enquiries or forward on to the appropriate person. Act as a public relations officer for the Association and make any necessary arrangements with professional, patient or public individuals or groups seeking information on the Association and the membership. Keep all records of the Association. Liaise with Cancer Council and other bodies in contact with the Association.

TREASURER

Keep the books of the Association to produce a financial statement for the Annual General Meeting and prepare any financial returns that may be required. Collect subscriptions, issue receipts, make cheques for laryngectomee supplies and other payments for the smooth running of the Association.

ASSISTANT SEC/TREAS

Assist or understudy the Secretary and Treasurer and take over on extended holiday or illness.

WELFARE OFFICER

This position involves visiting laryngectomees in hospital and sometimes at their home. Reassuring spouses of a laryngectomee's prospects. Buying in materials and making up hospital packs and stoma covers. Liaising with Speech Pathologists and Social Workers on behalf of individuals or laryngectomees in general. Some record keeping required.

SPEECH AIDS CO-ORDINATOR

Look after electro-larynxes for loan. Buy in and keep a stock of batteries. Liaise with suppliers and Speech Pathologists regarding speech aids. Trial new devices etc.

NEWSLETTER EDITOR

Collect and write information of interest to laryngectomees and publish it in 'Still talking', have it printed or photocopied, put in envelopes and mailed and emailed each month. Opportunity to learn how to maintain our website on the internet.

COMMITTEE MEMBERS

Input into decision making and filling positions in the extent of extended holiday or illness.

APPLY OVERLEAF

November 2003
THE LARYNGECTOMEE ASSOCIATION OF NSW

ANNUAL GENERAL MEETING 11am, WEDNESDAY, FEBRUARY 18th 2004

ELECTION OF OFFICERS AND EXECUTIVE COMMITTEE

At the Annual General meeting of the Laryngectomee Association of NSW, to be held on Wednesday, February 18th, 2004 all offices and committee positions will be declared vacant. Under the constitution of the Association nominations for these positions must be made IN WRITING, prior to the meeting, BY FINANCIAL MEMBERS of the Association.

The nomination must carry the signatures of the nominee, the nominator and seconder, and be lodged with the Secretary of the Laryngectomee Association of NSW, PO Box 58, RICHMOND, NSW 2753, by 31st January 2004.

The following offices are to be filled:-

President Vice-Presidents (2) Secretary Treasurer
Welfare Officer Speech Aids Co-Ordinator Newsletter Editor Committee Members (2)

NOMINATION FORM

LARYNGECTOMEE ASSOCIATION NSW, COMMITTEE 2004

(PLEASE USE BLOCK LETTERS)

I .................................................................................................................................
(Note:- You may nominate yourself for any position)

Nominate ....................................................................................................................

For the position of ............................................................................. Of LANSW

Signed................................................................................................. (nominator)

Signed................................................................................................. (nominee)

Signed................................................................................................. (seconder) Date

ALL SUBSCRIPTIONS DUE 1st JANUARY 2004

PLEASE RETURN THIS SECTION TO:- Mr John Nicholson
Treasurer LANSW
PO Box 58
RICHMOND 2753

I ENCLOSE MY CHEQUE/MONEY ORDER FOR $10.00 BEING FOR RENEWAL OF MEMBERSHIP OF THE LARYNGECTOMEE ASSOCIATION OF NSW FOR 2004

NAME.................................................................

ADDRESS.................................................................................................................................

......................................................................................................................... POSTCODE

Do you attend Branch meetings?........................................... Which Branch?...........................................

IF YOU DON'T CURRENTLY RECEIVE 'STILLTALKING' BY EMAIL BUT WOULD LIKE TO, PLEASE ADVISE THE EDITOR AT ‘atkras@tpg.com.au’ AND I WILL PUT YOU ON THE EMAIL LIST.

November 2003
MONTHLY MEETINGS:

#SYDNEY: Third Wednesday 11am at Uniting Church Hall, Carrington Ave, STRATHFIELD.
#NEWCASTLE: Third Tuesday, at Mayfield Bowling Club, Ingal St, Mayfield.
#WESTERN DISTRICTS: Second Tuesday, 11.00am at Masonic Club, 153 George St, Parramatta.
#ILLAWARRA: Third Wednesday, 2.30pm at Wollongong Medical Centre, Baptist St, Wollongong.
#NORTHERN RIVERS: 4 times per year, rotating venue, Contact J Bass, 184, Ballina Rd, Goonellabah, 2480. Ph. 02-6524 5192.
#DUBBO: Louden Hospital, Third Thursday, 10.30am, Board Room. Contact Murray Robbins, 109 Taylor St, Dubbo. Ph. 02 6882 7944.
#ALBURY: Ph. 02-6023 2011, extn. 323.
#CANBERRA: First Thursday, 11am, Mar, Jun, Sep, Dec. Canberra Hospital.
#SOUTHERN DISTRICTS: 4th Wed. 11.00am, Thomas Rachel Moore Education Cte, Liverpool Hosp. Ph. 02-9607 6708.

CHRISTMAS PARTY

Inside this issue of your newsletter is the booking form for this year's Christmas party. The Christmas party this year is being held at the Bowlers' Club in York Street in the York Function and Conference Centre. The club is in a very central location and very close to Town Hall Station and right next door to the Queen Victoria Building bus terminus. So we should expect a good turn out this year.

The jacarandas will start blooming any minute now, a great time of year. Hopefully all those nigglly aches and pains will retreat to the back of the mind for a few months even if they don't disappear completely.

Next month the subscription renewal form and the nomination for office form will appear. Now would be a good time to run over in your mind how you can best represent yourself and your fellow laryngectomees in standing for a position on the Laryngectomee Association of NSW committee. All positions, except that of President, are open to both laryngectomees and non-laryngectomees and any new nominees can expect the support of the previous incumbent and other committee members.

A.T.Krasnodebski

WHO TO CONTACT

FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, PO Box 684, Petersham 2049. Phone 02-9799-1154
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilian Walton, 23 Baker Street, KENSINGTON 2033. Phone 02 9663 2650
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1900. Fax: 02-9357-2676
Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - Lilah Walton, John & Clarissa Chaloner, Margaret Silver, Tony Krasonodebski.

PRESIDENT Brian Gardner in the chair opened the meeting at 11am. Minutes of August meeting were taken as read.

Moved Noel Bluett seconded Don Newby.

SECRETARY/TREASURER'S REPORT - September 2003

John Nicholson gave a very short report which, unfortunately, I don't have a copy to reproduce here.

Moved Pat Halliburton seconded Janet Berghammer.

WELFARE OFFICER'S REPORT - There was no welfare report as our hard working Lilah Walton has had a minor accident and was incapacitated. However Lilah forwarded a report to the editor for inclusion in the newsletter.

While visiting POW Hospital, met up with a Larry approx 2 years ago, he had trouble with leaks but to my great surprise and delight he has taught himself oesophageal speech. Isn't it surprising what some people achieve.

A chemist from Rockdale rang me on behalf of a local doctor who wanted to buy speech aids to send overseas to client's relations. I explained to the chemist about the different types and what may help one could maybe be no good for another, but I sent the doctor 'You Can Say That Again' booklet. I can only presume it satisfied him as I never heard back. What do you think about me sending to all know ENT doctors a copy of 'You Can Say That Again' to put in their waiting rooms so that more people might learn about laryngectomies? If I don't hear from any of you, I'll wipe that thought.

Another thought. Visitors going to hospitals have strife parking. I thought I might ask John Nicholson, our Secretary, if he would write to all Speechies of hospitals that our Visitors visit and see if they could get free parking space from the hospitals for our visitors. Keeping your brains active this month, aren't I?

Don't forget. Anybody going to POW, Mary Morris is on maternity leave and Sally White is replacing Mary.

The Smith family fromEngadine have booked for the Christmas party. Les is in America so it should be quieter with Les away. Received a letter from Eric Smith. He has been in RNSSH for 9 weeks and apart from the operations he has had trouble breathing and clearing his trachea. Humidifiers were tried without success and then they tried a 'respiratory hot humidifier' made by Fisher & Paykell, model MR700. First time in 15 years Eric is able to breath normally and recommends it. Thanks Eric for letting us know. Trust you will be back to your usual self very soon, please let me know which Rehab hospital you go to. Cheers to all. - Lilah.

GENERAL BUSINESS - A discussion was held regarding the bequest that the association will receive when all the estate has been finally settled. As shares are subject to capital gains tax and the association is able to receive tax free donations it was decided to take the bequest in cash. Also there was a request in the will that there be a rose memorial erected to Mrs Capers. Carol Gardner moved that the Association pay their share of the cost of this out of their share of the estate.

Brian Gardner spoke of the death of Western Districts member Kevin Kelly. He was a popular, caring and loyal member of the Association and will be missed.

The President and his wife also attended the Western Districts and Illawarra barbecue at Woronora Dam. All enjoyed the outing and the opportunity to meet the friends from the south.

Brian also reported receiving a request from a 12 year old requesting information on laryngectomies for a school project she was doing. He forwarded this on and received a thank you for same. All present felt that this sort of publicity to help more understanding in the community was a benefit. On the downs side there has been no further contact by the student doctor who was also requesting help.

Des Nicholson reported a radio programme highlighting the shortage of speech therapists for children with learning difficulties. This of course impacts on laryngectomies who also need the services of the speech therapists. Brian Gardner was asked to lecture speech therapists at Macquarie University recently and of a class of only 19, 17 were going into private practice and only 2 into the public hospital system.

A donation of long stitched framed pictures by Marilyn Plonges was displayed and admired. They are to be part of the yearly raffle.

The next meeting is to be on October 15th.

The meeting closed at 11.45 and lunch was served.

WESTERN DISTRICTS NEWS - September 2003

Vice-President, Kevin Kelly, died suddenly on Sunday 31st August while on a visit to Manly with his daughter.

Kevin was a popular member of Western Districts and will be missed by his many friends. Several Branch members attended his funeral service on Thursday 4th September. In memory of Kevin a minute's silence was observed at the beginning of the September meeting.

A donation of one hundred dollars has been sent to the Cancer Council of N.S.W. in memory of Kevin.

We welcomed new members Jim and Mavis Porter to our meeting.

As usual a very enjoyable day was had by all at the barbecue at the Woronora dam with the members of the Illawarra group.

At the September meeting details were finalized for the Christmas function to be held at the Dundas Rugby Union club on Tuesday 2nd December.
REMEMBER

CHRISTMAS PARTY
2003

To: The Treasurer, Laryngectomee Association
PO Box 58, Richmond, 2753

Please reserve me.......tickets for our Annual
Christmas Party at The Bowlers’ Club of NSW,
75 York Street, City, SYDNEY;

Saturday 6th December, 2003, 12 noon - 3.00pm;

I enclose $25.00 for both each laryngectomee
and each non-laryngectomee.

TOTAL ENCLOSED........................

NAME......................................

SIGNATURE..............................

ADDRESS....................................

MY GUESTS WILL BE......................

...........................................

...........................................

...........................................

This form must be completed and returned to the
Secretary/Treasurer by 24th November, 2003. Your receipt
will be mailed to you. This receipt will be your entry card
so please remember to bring it with you on December 6th.

STAYING ACTIVE

People who engage in
regular physical activity
tend to live longer, are less
likely to have or more likely
to recover from a heart
attack, feel more energetic,
have a lower blood
cholesterol level, have
lower blood pressure, have
stronger bones and
muscles and feel happier,
relaxed and able to sleep
better.

The Heart Foundation
recommends at least 30
minutes of physical activity,
such as brisk walking, on
all or most days of the
week. Some activity is bet-
ter than none at all and
more is better than a little.

The good news about
being physically active is
that it doesn’t have to be
strenuous or vigorous. Any
moderate intensity activities
such as walking and
cycling are enough for you
to enjoy the resulting health
benefits. Of course if you
want to be active in a
vigorous way, like aerobics,
netball or touch football
should continue to do so as
those activities can provide
additional benefits.

Choose activities you
enjoy; vary the type of
activity you do; set yourself
small, realistic, achievable
goals; be active with
friends or a partner or join
a club or group for social
support.

October 2003
SLIPPERY ELM

I have been a big fan of Slippery Elm powder since soon after my laryngectomy. After my laryngectomy I had trouble eating anything acidic such as tomatoes, capsicums, onions etc or drinking beer and orange juice as I would suffer acid reflux. And once the reflux started I had coughing fits that seemed to trigger more reflux and so on. It was getting to a point where I didn’t look forward to meal times at all and was living on a more and more restricted diet.

Once I was put onto Slippery Elm I used it whenever I suffered from acid reflux and each night before going to bed. I used to mix a heaped teaspoon of Slippery Elm powder with about half a cup of milk, stirring very thoroughly before drinking.

I used Slippery Elm at least once a day for about two years and since then I only use Slippery Elm powder if I suffer acid reflux, which thankfully is not very often these days. In fact it would be at least three months since I last took it.

Slippery Elm (Ulmus rubra or Ulmus fulva) is a native of North America. The inner bark is the part of the tree that has medicinal properties, it is extracted from a ten year old tree and dried. The subsequently ground bark is sold in two forms; a coarse powder for use in poultices and a fine powder for making a mucilaginous drink. It also has nutritive properties and can be used as a food for infants and invalids.

Red Indians were well versed in the use of poultices of Slippery Elm bark powder for wounds, boils, ulcers and burns. During the American Revolution, surgeon treated gunshot wounds with a bark poultice. Toothache can also be treated with a bark poultice.

A drink made from Slippery Elm is effective against coughs and soothes the throat. It is also used to treat gastric problems including GERD and acid reflux, for which I am recommending it. The high mucilage content adheres to the wall of the oesophagus and soothes any irritation and tends to sit on top of the stomach contents preventing further reflux.

Http://www.sfp.forprod.vt.edu is a good site to read more about this product, it contains a number of further references including http://www.botanical.com/botanical/mgmh/e/elmsli09.html.

LARYNGECTOMEE SUPPLIES,

available from Lilah Walton:

Stoma Material; $7 per metre.

Shower Shields; $32 each.

Stoma Covers; $4 each.

These are prices for members, postage is extra.

NEXT MEETING

The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 15th October, at the Uniting Church Hall, Carrington Avenue, Strathfield. at 11 am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.

Laryngectomees, Friends, Families, Professionals all WELCOME.
ANTI-TOBACCO TREATY

The Framework Convention on Tobacco Control (FCTC) should come into effect in October. It has been a long and rocky road to reach this point and even though it can be considered a weak position it is a beginning and a recognition that the international tobacco industry is a killer and a menace to society.

Despite rearguard action by the United States, Germany, Japan and China the treaty will ban tobacco advertising and promotion in countries where it is constitutionally permissible, set high taxes on tobacco products, require companies to state all the ingredients in cigarettes, prohibit terms such as "light", "mild" or "ultra lite" and require warning labels on at least 30% area of cigarette packets.

The Bush administration, which is beholden to tobacco companies, worked methodically to weaken every aspect of the treaty including using strong-arm tactics and financial threats against Saudi Arabia, Thailand and other developing countries. Both Democrat Durbin and Republican Waxman sent a letter to Bush expressing their concern about the treaty and donations by Philip Morris to the Republican Party.

On May 21, 2003 the World Health Assembly formally adopted the FCTC but individual countries still have to formulate legislation and construct the appropriate regulatory framework to make it all work, and for poor and underdeveloped countries being pressured by Big Tobacco and the US that may be easier said than done.

With 40 countries ratifying the treaty the Convention then becomes law in those countries that have ratified it, unless their constitution specifically prohibits it. As at the end of August there were 56 signatories and will remain open until June 2004. To date only Norway and Sri Lanka have ratified the treaty so there is still a long way to go.

With America, Australia, Germany, Japan still dancing to Big Tobacco's tune it is no wonder that the World Health Organisation (WHO) in August, accused the cigarette companies of blaming organised crime for the massive amount of cigarette smuggling whereas much of the smuggling occurs with the knowledge and connivance of the cigarette companies and wouldn't occur without their compliance. The WHO said it should be the manufacturer's responsibility to ensure that their products reach the intended, legitimate destination.

The Alliance for Global Cancer Control recognizes that tobacco use is the single most preventable cause of cancer in the world today. Tobacco kills 4.9 million people each year and is responsible for one in three cancer deaths. If current smoking patterns persist, there will be about 1 billion deaths resulting from tobacco use during the twenty-first century, compared to 100 million tobacco-related deaths during the twentieth century. Well over a billion people are addicted to tobacco, and most begin as children or adolescents.

By the middle of next year the Federal Government will require the tobacco companies to carry graphic colour health warnings that cover 50% of the packaging featuring images such as lung disease and cancerous lips. This will be in accordance with article 11 of the FCTC.

The current health warnings such as 'Smoking Kills' were introduced in 1995. Since that time science has uncovered further adverse effects of smoking such as its contribution to blindness. The challenge will be to stagger warnings over time so the novelty doesn't wear off.
humour

Joe was in his usual place in the morning - sitting at the table, reading the paper after breakfast.

He came across an article about a beautiful actress who was about to marry a football player who was known primarily for his lack of IQ and common knowledge.

He turned to his wife Mary with a look of question on his face. "I'll never understand why the biggest jerks get the most attractive wives."

Mary replied, "Why thank you, dear!"

________________________

An old man goes to the Wizard to ask him if he can remove a curse he has been living with for the last 40 years.

The Wizard says, "Maybe, but you will have to tell me the exact words that were used to put the curse on you."

The old man says without hesitation, "I now pronounce you man and wife."

________________________

"Honey," said this husband to his wife, "I invited a friend home for supper."

"What? Are you crazy? The house is a mess, I didn't go shopping, all the dishes are dirty, and I don't feel like cooking a fancy meal!"

"I know all that."

"Then why did you invite a friend for supper?"

"Because the poor fool's thinking about getting married!"

________________________

A pastor at a frontier church ended a stirring sermon with, "All those who want to go to heaven, put up your hands!" Everybody enthusiastically raised their hands.... everybody except a grizzled old cowboy who had been slouching against the door post at the back of the room.

All heads turned as he sauntered up to the front, spurs jangling and said, "Preacher, that was too easy. How d'ya know if these folks are serious? I c'n gar-an-tee to prove who really means it an' who don't!"

Bemused and not a little frightened the preacher said, "Ok, stranger, go ahead and put the faith of these good people to the test. Ask them anything you want."

At that the cowpoke pulled his twin six-shooters, turned to the audience and said, "Alright... who wants to go heaven... raise your hands!"

________________________

While motorcycling through the hungarian countryside, Cristo Falatti came up to a railway line just as the crossing gates were coming down.

While he sat idling, he was joined by a farmer with a goat, which the farmer tethered to the crossing gate. A few moments later a horse and cart drew up behind Falatti, followed in short order by a man in a sports car. When the train roared through the crossing, the horse startled and bit Falatti on the arm. Not a man to be trifled with, Falatti responded by punching the horse in the head. In consequence the horse's owner jumped down from his cart and began scuffling with the motorcyclist. The horse, which was not up to this sort of excitement, backed away briskly, smashing the cart into the sports car. At this, the sports car driver leaped out of his car and joined the fray. The farmer came forward to try to pacify the three flailing men. As he did so, the crossing gates rose and his goat was strangled. At last report, the insurance companies were still trying to sort out the claims.

________________________

The first step to European integration:

EEC Directive 14533-8

"The term "spending a penny" will be replaced with "euronating"
TREADING WATER

I don't have anything much to say this month so I thought I would just ramble on a bit. I feel I'm getting a bit stale with editing and compiling this newsletter but as nobody else is putting their hand up I will continue on for another couple of years or so, unless of course someone else expresses an interest in doing it in the meantime.

I will be getting a new computer system in the near future and maybe with better equipment I could lift my game a little, let's hope so. One of my main stumbling blocks is that I seem to have covered many aspects of laryngectomee problems and monitoring the tobacco industry and it becomes difficult to come up with new approaches to topics that I've covered previously. So forgive me if I seem to be repeating myself a bit from here on in. I'm bound to get some new ideas eventually.

I've even had a few doubts of the value of running our website www.stilltalking.org.au but after talking to a couple of our committee members we feel it's worth continuing with and I will look if I can improve it in some way. Stay tuned.

A.T.Krasnodebski

WHO TO CONTACT

FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, PO Box 684, Petersham 2049. Phone 02-9799-1154
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033. Phone 02-9663-2650
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1900. Fax: 02-9357-2676
Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - M Silver, J Chaloner, P Lamont.

PRESIDENT Brian Gardner opened the meeting at 11am. Nominations for a committee member replacement due to the death of Pat Rogers were presented. Don Newby and Russell Green both declined to make a commitment. It was decided to hold over further nominations to the Annual General Meeting in February. Minutes of the previous meeting were taken as read.

Moved Pat Halliburton, seconded Carol Gardner.

SECRETARY/TREASURER'S REPORT - August 2003

MEMBERSHIP

Due to an error (overlapping in printing), there were several mistakes in the last address list produced by the Cancer Council. I think all the errors have now been corrected but if you find this is not so please let me know in order that appropriate corrections can be made.

NEW MEMBERS

I have welcomed the following members to our Association:

Mr T H Kelly of Port Macquarie
Mr Anton Grgic of Box Hill
Mr John Ryan of Villawood
Mr G Gregory of Thanwa
Mr A Williamson of Dapto

ESTATE MRS E O CAPPER (DEC'D)

Permanent Trustee Co Ltd of Melbourne has advised that a Grant of Probate of the Will of the late Mrs E O Capper has been granted. In the terms of the State Regulations it will be at least eighteen months before any distribution action is taken.

CANCER COUNCIL OF AUSTRALIA

Mr Lawrie Wright, Executive Officer for the Cancer Council of Australia for the past 25 years has retired from that position and he has advised our Association accordingly. During his long term as E.O. he has endeavoured to assist our Association in gaining support and assistance from the Federal Government. At this time I am unable to find out if the Laryngeal Committee will continue to function.

CORRESPONDENCE

1. St Vincent's Hospital, Lismore. Advising their new Speech Pathologist's name is Liz Savina.

3. Telstra Consumers Affairs Office. Revised catalogue of products and services.
5. Newsletters from Victoria and South Australia.
8. John Chaloner. Details of supplies to members.
9. Telstra. Advising that the Nepean Hawkesbury Disability Liaison Officer is based at 111 Henry Street PENCIL - Tel. 02 4724 8882.
12. Medical Services Directory Online. Advertising material. Entry in the directory is $96 plus GST.
14. Mr Joe Denahy, Aberglasslyn. Seeking membership form after being in Qld for 16 years. Also seeking info on humidifiers.

INCOME & EXPENDITURE 1/1/03 to 19/8/03

Balance b/f $ 8417.63
Income $ 4465.26
$12883.09
Expenditure $ 7136.77
Balance c/f $ 5746.32

Term Deposits $39182.79

Moved Liliah Walton, seconded Tony Krasnodebski

WELFARE OFFICER'S REPORT - Had a telephone call from the daughter-in-law of A. Cowgill, Bundanoon who will be 90 next month and has been a larry for 26 years. All he wanted was a new larry I.D. card. Can't say he has been an expensive member.

Sitting watching the City to Surf I thought of Frank Coughlin who ran a few years in it until he became ill. Not once did he not finish.

Had a thank you card from the lady who organised the making of the film 'Lennie Cahill Shoots Through'. She thinks it may be screened Nov - Dec or early next year on SBS so watch out for it.

Because we have new people who are in charge of the L.A. mailing list names and addresses it was in disorder but now everything should be OK once again. Whilst the list was being fixed, when somebody rang, I checked the list as I usually do to see if the person ordering the goods was financial (because of members discount) I offended some telling them they hadn't paid their subs and as John Nicholson was in hospital I was unable to to check. To all those I did offend please accept my humble apology and may I suggest asking the President to demand my resignation, to be effective immediately.

The President, his wife and yours truly went to Western Districts August meeting and Brian was successful in
MINUTES CONTINUED...

winning a prize in their raffle. I of course was only there to make up the numbers and shall make amends at their Christmas party on Tuesday, 2nd December at Dundas Rugby Union Club (same venue as last year).

I received a parcel from Lorrie Armstrong of Mollymook. Thank you Lorrie, they will be most welcome.

The Christmas luncheon will cost $25 a head. My phone is still working if you want to have a talk. Until next time. Cheers, Lilah.

Moved David Lamont, seconded Russell Green.

GENERAL BUSINESS - Tony Krasnodebski, editor of the excellent newsletter requested a grant for the purchase of a new computer to facilitate the compiling and printing of the newsletter and other business arising from his position. Des Nicholson suggested a grant of $1500 and there was unanimous approval for this.

Mary Halliburton raised the ongoing problem of informing the public and health professionals that laryngectomees are neck breathers only. Lilah Walton pointed that there are Health Alert Medallions available to be worn either as a bracelet or around neck. Check with Lilah for details.

Brain Gardener reported representing laryngectomees at a second year speech pathologist course at Macquarie University. He was able to present many of the problems experienced by larys and helped those present to a greater understanding of this. There is no training available for those interested in teaching oesophageal voice training which seems a great oversight in this area.

Carol Gardener read a letter from a medical student requesting help in a course that needed an interview with a subject having severe health problems. Brian Gardener has volunteered to help and will be researched for one hour for six weeks. Carol suggested this was an excellent way to get good P.R. and spread the message about laryngectomees at the same time. Tony Krasnodebski requested an updated address list and the president will arrange for this to be sent from the Cancer Council.

Next meeting is on Wednesday September 17, 2003.

The meeting close at 12 and a light lunch was served.

WESTERN DISTRICTS NEWS - August 2003

The August meeting was very well attended with twenty people being present. Amongst these were Brian and Carol Gardner and Lilah Walton from Head Office.

We welcomed new members Mario and Carmella Lipoma.

The barbecue with the Illawarra group will be held at the Woronora dam on Tuesday 2nd September.

The Social Secretary has booked Tuesday 2nd December at Dundas Rugby Union Club for the Christmas party.

We thanked Helen Morley for the donation of stoma covers.

Treasurer Alan Dawson has received a reply to his application to to the Office of Fair Trading regarding unincorporating the Western Districts branch. The reply basically said that in order to cease being incorporated we would have to transfer all our assets to Head Office and close our bank account. After much discussion it was agreed that Alan would submit the required form together with the late fee so that we would remain incorporated and Western Districts L.A. continue as we are.

NORTHERN RIVERS BRANCH

Our quarterly luncheon meeting was held at ‘Maggie Moore’s’ on Tuesday the 15th, July. It was well attended. There were fifteen present with six apologies received.

We welcomed two new members, David and Rita McClymont. They traveled all the way from Laurieton. It is a long way to travel but there doesn’t seem to be any other meeting places in between Lismore and Laurieton, other than go to Newcastle.

Our guest speaker was our new Speech Therapist at the Base Hospital, Karen Patterson. She will be handling all laryngectomee problems. Thank you Karen.

Our next luncheon meeting will be held at ‘Maggie Moore’s’ in October.

John Basso.

BIG TOBACCO TARGETS WOMEN

A new report co-published by the American Cancer Society, The World Health Organisation and the International Union Against Cancer shows that the tobacco industry is increasingly targeting women in developing nations because they are the largest remaining untapped market for cigarettes.

These women once had low smoking rates but this is now changing. The tobacco industry is targeting women in marketing and promotional strategies by using western images which present women as being independent, glamorous, sophisticated and equal with men. It is also associating smoking with stress relief, beauty, weight control, health and fitness.

What is particularly alarming is that the tobacco industry is sponsoring beauty pageants, sports, art and music events and even women’s organisations to entice girls and young women to smoke. The report also indicates that in some countries the incidence of female smokers is actually higher than males.

September 2003
COLOURFUL FOOD

An article in the recent Healthworks magazine encouraging a balanced diet suggested that one way to achieve that is by eating fruit and vegetables from different colour groups.

**RED**
such as tomatoes or watermelon are rich in carotenoid lycopene, which could protect against prostate cancer plus heart and lung disease.

**RED/PURPLE**
 such as red grapes, blueberries, strawberries, beetroot, eggplant, red cabbage, red capsicum and plums contain antioxidants called anthocyanins that prevent the formation of blood clots.

**ORANGE**
such as carrots, mangoes, rockmelons and sweet potatoes are rich in cancer-fighting alpha carotene, plus beta carotene which protects against skin damage and helps repair damaged DNA.

**ORANGE/YELLOW**
such as oranges, peaches, pawpaw and nectarines contain beta cryptothianxin which may prevent heart disease.

**YELLOW/GREEN**
such as spinach, sweetcorn, peas, avocado and honeydew melon are good sources of the carotenoids lutein and zeaxanthin, which appear to reduce the risk of cataracts and age-related macular degeneration and possible blindness.

**GREEN**
such as broccoli, brussels sprouts, cabbage and bok choy are cruciferous vegetables rich in cancer-blocking chemicals like sulforaphane, isocyanate and indoles.

**WHITE/GREEN**
such as onions, leeks, garlic, celery, asparagus, pears and grapes. The foods in the onion family contain allicin, known to have anti-tumour properties. The other foods contain antioxidant flavonoids like quercetin.

Try to eat fruit and vegetables from as many of these groups each day to achieve a healthy diet.

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**LARYNGECTOMEE SUPPLIES**, available from Lilah Walton:
- **Stoma Material**; $7 per metre.
- **Shower Shields**; $32 each.
- **Stoma Covers**; $4 each.

These are prices for members, postage is extra.

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**VALE**

Regretfully I have to report that the following members have died:

Mrs Heather Harvey of Charnhaven
Mrs K Baker of Wellington
Mr Pat Rodgers of Glebe

We express our deep condolences to their family and friends.

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**NEXT MEETING**
The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 17th September, at the Uniting Church Hall, Carrington Avenue, Strathfield, at 11 am.
There is parking on site and it is also a short walk from the Railway Station.
The meeting will be followed by a light luncheon.
Laryngectomees, Friends, Families, Professionals all WELCOME.

4 September 2003
DEBI AUSTIN
A FEMALE LARYNGECTOMEE

Debi Austin is a laryngectomy and is one of the most well known anti tobacco activists in America. In 1997 she appeared in an ad in which she actually smokes through her stoma.

Debi, now in her fifties, had her laryngectomy in 1992 when she was 42. She says "I had my first cigarette in 1963 at the age of 13 for two reasons, one to look cool and two to look older. When I started smoking in 1963, every major tobacco company was allowed to advertise on television, radio, newspapers and magazines. They used beautiful young people that made promises of wealth and happiness if you smoked their brands. And of course, the ads were directed to the young. We all remember the Marlboro Man. While information was available on the dangers of smoking, you had to go look for it. Not likely for a 13 year old..... but I was one of the lucky ones, I survived. I don't remember seeing anyone like me in one of those ads.

Before her operation, Debi was an office manager of a major company. She says "I have since joked about going to bed on Monday as an office manager.....and woke up on Tuesday evening wrapped like a mummy". To Debi it now seems like a lifetime away.

Debi was in hospital for ten days after the surgery and later for another month, there were a lot of people around so she couldn't smoke but she soon started smoking again through her stoma. She says, "It was almost overwhelming. You have to understand, the smoke went straight to my lungs, without all the filters in between. The effect was almost like my first cigarette, I was dizzy and light headed. That feeling should have been enough to let me know not to do it anymore. But the cravings were just too strong. You have no control when you are addicted to cigarettes. I am a control freak, and it is very humbling to realise that you have no control".

In one TV ad Debi talks about her decision to stop smoking. She thanks her niece, Joy, for helping her to stop. She says that when Joy was only five years old she asked Debi about the funny smell in the house. Debi lied to her and she felt guilty about that. She also says that Joy only knew her as she was after surgery. Debi says, "She learned from me. We had to teach her to cover her mouth when she coughed, not her throat! I realized that I was an example to her, and I didn't want her to turn out like me". When she made the TV commercial, in which she smokes through her stoma, she realised how much of a prisoner she was. At that time she had never smoked in front of anyone else. She says, "But when I finished that day, I felt good about it. If one person stopped smoking because of what I did, it was worth it".

Debi says that the first time someone said that she deserved being a laryngectomy because she was a smoker, she was angry. She says, "I stayed angry but I didn't stay quiet about it. That's why I became an advocate for patient's rights and laryngectomies rights". Debi not only does TV commercials and interviews but also visits schools and rallies as she is very angry at the tobacco companies and believes that she can do more damage to them by doing commercials and talking to students than "wasting my life in courtrooms fighting lawyers". See Debi's website at:

An elderly lady in the US did her shopping and, upon returning to her car, found four males in the act of leaving with her car. She dropped her shopping bags and drew her handgun, proceeding to scream at them at the top of her voice, "I have a gun and I know how to use it! Get out of the car you scumbags!"

The four men didn’t wait around for a second invitation but got out and ran like mad, whereupon the lady, somewhat shaken, proceeded to load her shopping bags into the back of the car and get into the driver’s seat.

She was so shaken that she could not get her key into the ignition.

She tried and tried and then it dawned on her why.

A few minutes later she found her own car parked four or five spaces farther down. She loaded her bags into her car and drove to the police station. The sergeant to whom she told the story nearly tore himself in two with laughter and pointed to the other end of the counter, where four white males were reporting a car jacking by a mad elderly woman described as white, less than 5’ tall, glasses, and curly white hair carrying a large handgun.

No charges were filed.

At the circus the Alligator man came into the ring. In a loud, confident voice he announced that he would put his private parts into the mouth of an alligator. The ‘gator would then clamp it’s mouth tight shut but the Alligator man would neither flinch nor make a sound ... he was immune to pain. Furthermore, when the ‘gator opened it’s mouth again his privates would be undamaged.

With a roll of the drums he did indeed put his rather magnificent member into the mouth of the alligator, which immediately clamped it’s jaws shut. Every man in the audience winced, and every woman looked impressed.

After a few seconds the ‘gator man punched the alligator hard in the eye, it opened its mouth in surprise, and he walked around the ring showing a totally undamaged member.

To show that it was not just a freak he repeated the process with another ‘gator, again punching it hard in the eye to make it release him. Then he loudly proclaimed that he dared anybody in the audience to try to emulate the performance. Every man in the audience immediately crossed his legs and tried not to catch his eye. After several seconds a little old lady, about 4ft tall and looking at least 100, stood up and said.

"I don't mind trying as long as you don't punch me so hard in the eye".

Willie and Ray, a couple of farmers, met at the town hardware shop one Saturday. 'I had some problems with my herd' lamented Willie, 'My prize bull was impotent. The vet came and gave him some special medicine and now he seems to be doing fine'.

Next week, Ray met Willie at the shop again. 'My bull's having problems too' said Ray, 'What was that medicine the vet prescribed?'

'I don't know' answered Willie, 'but it tastes like chocolate'.

Always take time to smell the roses and sooner or later, you'll inhale a bee.

Keep your nose to the grindstone and your shoulder to the wheel, it's a lot cheaper than plastic surgery.

It's a small world. So you gotta use your elbows a lot.
StilI talking
Dedicated to the welfare of Laryngectomees and those with similar vocal disorders
WWW.STILLTALKING.ORG.AU
ALL CORRESPONDENCE: The Secretary, The Laryngectomee Association of NSW, PO Box 58, Richmond, NSW 2753 Fax 02 4578 4412. Phone 02 4578 1415
No 136 The Laryngectomee Association of NSW AUGUST 2003

MONTHLY MEETINGS:
#SYDJNEY: Third Wednesday 11am at Uniting Church Hall, Carrington Ave, STRATHFIELD.
#NEWCASTLE: Third Tuesday, at Mayfield Bowling Club, Ingall St, Mayfield.
#WESTERN DISTRICTS: Second Tuesday, 11.00am at Masonic Club, 163 George St, Parramatta.
#ILLAWARRA: Third Wednesday, 2.30pm at Warilla Medical Centre, BelfaSt, Warilla.
#NORTHERN RIVERS: 4 times per year, rotating venue, Contact J Basso, 164, Ballina Rd, Goonellabah, 2480. Ph. 02-6624 5182.
#DUBBO: Lourdes Hospital, Third Thursday, 10.30am, Board Room, Contact Murray Robbins, 109 Taylor St, Dubbo. Ph. 02 6882 7944.
#ALBURY: Ph. 02-6323 2011, extn. 323.
#CANBERRA: First Thursday, 11am, Mar, Jun, Sep, Dec. Canberra Hospital.
#SOUTHERN DISTRICTS: 4th Wed. 10.00am, Thomas Rachel Moore Education Ctr, Liverpool Hosp. Ph. 02-9607 6708.

OFFICE BEARERS 2003
President: Brian Gardner, 4 Morelyn Rd, BELROSE, 2085. 02-9452 2658
Vice Presidents: Noel Blueitt, 154 Greenville St, CHATSWOOD 2067. 02-9419 6527
John Chaloner (see below)
Secretary/Treasurer: John Nicholson, MBE. PO Box 58, RICHMOND, 2753. 02-4578 1415

MINUTE SECRETARY: Mrs Mary Halliburton, 94 Carmen Drive, CARLINGFORD, 2118
Speech Aids Co-ordinator: John Chaloner, PO Box 664, PETERSHAM 2049, 02-9799 1154
Welfare Officer: Mrs Lilah Walton O.A.M., 23 Baker St, KENSINGTON, 2033. 02-9663 2550
Editor: A.T. Krasnodebski, PO Box 232, Bondi 2029. 02-9265 1111
H 02-9130 2560
Email: Atrak@tpg.com.au
Committee: Pat Halliburton, 94 Carmen Drive CARLINGFORD, 2118. 02-9871 8690.

WHO TO CONTACT
FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, PO Box 664, Petersham 2049. Phone 02-9799-1154
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033. Phone 02-9663-2550
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOO, PO Box 572, Phone 02-934-1900. Fax: 02-9357-2578
Or contact the Social Worker at the hospital you will be attending.

MID WINTER LULL
Yet another quiet month on the laryngectomee front. Nothing much to report. Not many people turning up to the monthly meeting. Generally quiet all round really.

I was informed by our Thai friends that they now have a website at www.thai-alarynx.org with some pages that are translatable into English if you would like to check it out. It gives a potted history of their Association along with what they are up to now and their various locations around the country.

People thought I was young when I had my laryngectomy at forty four years of age. Recently I went to the Prince of Wales and visited a young chap of thirty four years of age who had just been operated on. I asked him what his hobbies were and of course surfing was his main interest, I guess he can pursue that with a Larkel if he is determined enough. I was on the verge of buying a sailing dinghy when I had my operation but that idea went straight out the window. Every time I think that the laryngectomee population will eventually die out of old age I am jerked back to reality when I hear of a story like this.

Members who use John Chaloner's services should take note of his new telephone number 02 9799 1154.

A.T. Krasnodebski
MINUTES


VICE-PRESIDENT Noel Bluett in the chair opened the meeting at 11.15am. Minutes of the June meeting as appeared in the newsletter were taken as read.

Moved Lilah Walton seconded Pat Halliburton.

SECRETARY/TREASURER'S REPORT - No report this month due to John’s illness but we are pleased to report that he is home from hospital.

WELFARE OFFICER’S REPORT - I have confirmed our Christmas luncheon at the Bowling Club, York St. on the 6/12/03 at 12 Noon. Anybody who is on a special diet, notify me two weeks before 6/12/03 and the caterer will try to comply with their request. It CANNOT be altered after 22/11/03.

I had a lary ring me for stoma covers and I asked if he was a member (because of prices). He said he was and had been since his operation in ’99, but on checking the membership list couldn’t find his name, but he insisted he was and had been sending his $20 each year. I checked with our Secretary/Treasurer and he didn’t have his name, but after much discussion this man had been sending it to one of our branches. Please check when receiving membership money that they mean to join your branch and not head office.

SBS rang me re a movie they are producing at Fox Studio (and so as not to spoil the plot won’t give the story away), but there is an actor who commits a crime and he has plastic surgery but is still recognised by his voice and as he knew about laryngectomees he decides to use a Servox. Mary Morris S/P from POW has taught him how to use it (with great difficulty because of his thick neck). Will let you know, if possible, because they expect to have it ready Dec/Jan and we will be closed for our break.

Speaking of Mary Morris, on 17/10/03 Mary and husband are expecting their first child. Congratulations from us all.

My request for help to sew, knit or crochet stoma covers has been taken up by a few and the Clarkes from Goulburn, even though their daughter, because of illness, is no longer in the sewing group, the other ladies have offered to do some. From all who will benefit, thank you.

I have just received a letter to John Chaloner from Pat Rogers’ son, Tony, informing us that Pat died on 1/6/03. Pat was a quiet achiever doing things, when asked, in his quiet unassuming way, never complaining of the pain he suffered. May his soul rest in peace.

John Nicholson is having a few days in RPA Hospital. Hurry up and get well John, remember the mail is piling up. To all who are not feeling the best, trust it won’t be long before you are feeling better. I’m only a phone call away remember. Lilah

Moved Janet Berghammer seconded Russell Green

SPEECH AIDS CO-ORDINATOR’S REPORT - July 2003

Nothing to report this month. However, please note on the front of the newsletter my new telephone number and postal address.

GENERAL BUSINESS - John Ryan from Riverwood queried his membership fee not shown as received. After enquiries it appears the money was going to Liverpool branch without explanation and they thought it was a donation. The matter has now been cleared but it is requested that membership fees be sent to the Secretary only.

We have been saddened at the news of the deaths of some members. Noel Bluett requested if any members know of others that are ill would they contact the Welfare Officer, Lilah Walton.

Lilah Walton has booked the Sydney Bowling Club (the York Function and Conference Center) for the Christmas Party. There is a set menu as follows: - Pumpkin soup... Chicken Schnitzel ... Tropical fruit salad and ice-cream. If anyone has special dietary problems would they please write to Lilah and she will arrange with the club.

We look forward to a big turnout this year with lots of fun and prizes in the raffle.

Jim O’Meara attended a symposium of Speech Pathologists at St. George Hospital with attendances from all over Australia. He reported that it was very successful and they are very aware of the problems of laryngectomees and are well educated in this.

Pat Lamont mentioned troubles with a replacement servox. She was advised to contact the Speech Therapist at Concord Hospital on this matter.

The next meeting is Wednesday 20th August.

The meeting closed at 12.15 and lunch and chatter was shared by the members.

NEXT MEETING

The next meeting for the Laryngectomees Association of NSW will be held on Wednesday, 20th August, at the Uniting Church Hall, Carrington Avenue, Strathfield at 11am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.

Laryngectomees, Friends, Families, Professionals all WELCOME.
WOMEN AND LARYNGECTOMY

Women who smoke not only share the same health risks as men, such as lung cancer, coronary heart disease and respiratory diseases but also face health problems that are unique to women such as pregnancy complications, menstrual problems and cervical cancer. Menopausal women who smoke increase their chances of developing osteoporosis, breast cancer and emphysema.

When a woman has to undergo a laryngectomy she faces many of the same problems as a male laryngectomee but also experiences difficulties related to her gender. Although most female laryngectomees report that their life is good after a laryngectomy, it can take a woman from one to four years to adjust to her situation. She may experience depression, anxiety and frustration. She may feel unworthy of keeping her husband and family. Many female laryngectomees lose confidence in maintaining their occupation. Social isolation is very common after a laryngectomy.

It is also common for a woman to become very self conscious about the way she looks. As one woman said "Was I treated different?.....I got all kinds of looks.....Did it bother me?.....Of course. No one likes to be stared at or made a spectacle of. Another woman said "I didn't want to see any one because of the way I looked." As the neck is a sensitive and sensual area of the female body a woman may feel unfeminine as the area must now be covered up. Most women, however, learn to adjust their way of dressing to their problem and of course wear very attractive scarves and jewellery etc.

After a woman has had a laryngectomy her voice is often perceived as low in pitch, coarse, unnatural or masculine. Some women say that over the phone they are often mistaken as men and so they avoid phone conversations. Their voice also appears to lack emotion because the larynx is linked to the limbic system that is the control centre of the brain. The voice can be linked to a person's personality and such characteristics as self confidence, kindness, courage, humour, gentleness, affection and dominance have been shown to be conveyed through the voice. Not only does her voice lack emotion, but crying, laughing and shouting produces no sound. Because she cannot express her feelings in the same way as she did before her operation, she may feel very depressed and frustrated.

Following a laryngectomy, women often gain weight and experience hormonal changes. This is due to the fact that a laryngectomy often includes the extraction of the thyroid gland. There may also be problems with pregnancy and childbirth. A woman giving birth may now need to have a cesarean section as she may find it difficult to bear down.

Most laryngectomees experience a loss of smell. A woman may now miss the smell of her favourite perfume, flowers and cooking. Because her inability to smell effectively could be dangerous, the installation of a smoke detector in her home is very important. All laryngectomees of course need to observe this precaution.

After a laryngectomy a woman may not be able to continue her previous job. There may be many different reasons for this such as her altered voice or appearance or hazards like dust or air conditioning that could irritate her lungs. She may experience financial problems and this could put an added strain on her family life.

Although most female laryngectomees eventually learn to cope, they do have many problems to cope with.
EMERGENCY

Recently, an American laryngectomee complained that when he asked at the emergency section of his hospital for a trachea mask for inhaling, they didn’t know what he was talking about. After getting a mask from the ward he called into emergency to show it to them and they said they hadn’t seen one before. While he was talking to them someone asked what his prosthesis was, so he explained how that worked for them.

In response a Canadian laryngectomee said he was attending a club meeting near a Toronto hospital when the club president accidentally dropped his prosthesis down his trachea. Luckily a Speechie was in attendance who rushed him over to emergency where the staff administered oxygen through his nose and had no idea how to proceed. Luckily the Speechie called an ENT surgeon down who fished it out with a long tweezer thing.

There is also the story here in Australia where an anaesthetist placed a tape over a laryngectomee’s stoma and applied the oxygen mask over his nose and mouth prior to an operation. Fortunately we haven’t heard any further horror stories like that for a while but it doesn’t mean that you couldn’t have the misfortune to be taken to an emergency ward where nobody who knew about laryngectomees was in attendance.

Always be prepared for the worst. Tell your partner, next of kin or friend that if you are taken to hospital in an emergency situation to inform the medical people who receive you that you are a laryngectomee with special breathing requirements. Quiz the person they are speaking to that they really do understand what they are talking about, always better to be safe than sorry. You can buy bracelets, stickers, tattoos etc to also inform observant medical staff, and if you are conscious, you should determine yourself that the people in attendance understand your requirements. Of course, nothing untoward is going to happen, but to cover that one time in a thousand when everything conspires against the patient: be on your guard.

humour

In 1976 a twenty-two-year-old Irishman, Bob Finnegan, was crossing the busy Falls Road in Belfast, when he was struck by a taxi and flung over its roof. The taxi drove away and, as Finnegan lay stunned in the road, another car ran into him, rolling him into the gutter. It too drove on.

As a knot of gawkers gathered to examine the magnetic Irishman, a delivery van ploughed through the crowd, leaving in its wake three injured bystanders and an even more battered Bob Finnegan. When a fourth vehicle came along, the crowd wisely scattered and only one person was hit - Bob Finnegan. In the space of two minutes Finnegan suffered a fractured skull, broken pelvis, broken leg, and other assorted injuries. Hospital officials said he would recover.

Eight new choir robes are currently needed, due to the addition of several new members and to the deterioration of some older ones.

The concert held in Fellowship Hall was a great success. Special thanks are due to the Minister’s daughter, who laboured the whole evening at the piano, which as usual fell upon her.

On a church bulletin during the Minister’s illness: GOD IS GOOD, Dr Hargraves is better.

Weight Watchers will meet at 7 pm. Please use the large double doors at the side entrance.

Next Sunday Mrs Vinson will be soloist for the morning service. The pastor will then speak on ‘It’s a Terrible Experience’.
Why All the Fuss about Antibiotic Overuse?

What are antibiotics?
Antibiotics are medicines that treat infections caused by bacteria. They can be lifesaving medicines for people suffering from severe bacterial infections. However, their effectiveness is being reduced by inappropriate use, so people are now dying from infections that were previously treatable. Unless we use antibiotics properly, the problem will only get worse, and more people will die unnecessarily.

What’s the difference between bacteria and viruses?
Bacteria and viruses are tiny micro-organisms (germs) that live throughout our environment. Bacteria live outside cells. Viruses invade cells and live within them, and are much smaller than bacteria. Some infections are caused by bacteria; others by viruses.

Why shouldn’t we use antibiotics for viral infections?

Useless
Antibiotics treat only infections caused by bacteria. They have no effect on viruses. Therefore, they cannot treat viral infections, such as the common cold and the flu (influenza).

Antibiotic resistance
When a person has a bacterial infection, they have millions and millions of the bacteria in their body. The individual bacterium vary in their susceptibility to antibiotics: most are susceptible, a few are resistant. When treated with an antibiotic for the first time, most of the bacteria are killed off. However, some of the resistant ones may survive. With each successive exposure to the antibiotic, the more susceptible bacteria are killed off first, leaving the resistant ones. Over time, the proportion of resistant bacteria may increase, until almost all the bacteria are resistant to the antibiotic. When this happens, the bacteria are said to be ‘antibiotic resistant’.

Using a course of antibiotics for a viral infection gives bacteria in the environment another exposure to the antibiotic. As a result, we may make it a tiny bit harder to treat the next infection caused by bacteria, while not achieving any benefits.

Before antibiotics were discovered in the 1930s, more than half of all deaths were caused by bacterial infections. By the late 1960s, antibiotics had been so successful in treating bacterial infections that the US Surgeon-General told the US Senate it was time to ‘close the books on infectious diseases’. Today, some strains of bacteria that cause infections have become resistant to many antibiotics, so people are again dying of infections caused by them. In Australia, antibiotic-resistant bacteria are thought to cause more than 7000 deaths each year.

Antibiotics treat only infections caused by bacteria. They have no effect on viral infections, such as the common cold and flu.

Side effects
Antibiotics can cause unpleasant side effects, such as stomach upsets, diarrhoea and thrush. The suffering is usually justified because the benefits outweigh the side effects. However, if the treatment is inappropriate in the first place, the suffering is completely unjustified.

Waste of money
Unnecessary use of antibiotics is a waste of money. The National Prescribing Service estimates that more than 3 million antibiotic prescriptions are wasted on viral infections each year. This wastage costs the community millions of dollars — money that could be better spent elsewhere.

What should we do?
Don’t use antibiotics unnecessarily. When consulting a doctor about a cold or the flu, don’t ask for an antibiotic. Save antibiotics for the times when you really need them. That way bacteria won’t become resistant to antibiotics unnecessarily, and we will continue to have effective treatments for them.
Can I Get It at the Pharmacy?

Medicines can have detrimental effects as well as beneficial ones, so rules and regulations have been developed to ensure their safety and effectiveness. Some of these rules and regulations affect where and how you can buy medicines. As a result, some medicines can be bought from supermarkets and other retail outlets, and others can be bought only from pharmacies. Still others can be bought from pharmacies only if you have a prescription from a doctor or dentist.

Availability

The rules and regulations determining where and how you can buy a particular medicine depend on a number of factors, including:
- safety and toxicity of the active ingredient
- condition used for
- effects when used correctly
- side effects
- likelihood of accidental or deliberate misuse
- effects if taken accidentally by children
- effects of taking an overdose
- potential for people to become dependent on it
- desirability of making it easily available.

In general, the safer the medicine and the more minor the condition being treated, the fewer the restrictions on the medicine’s availability. The table below shows the main categories of medicines, their availability, and the type of conditions they are intended to treat.

In some cases, the amount of medicine in a packet may affect where and how it can be sold. As a result, small packets of some medicines are available in supermarkets and other retail outlets, but packets containing more tablets are available only in pharmacies. For example, packets of 25 or fewer tablets of paracetamol (500 mg) can be sold in supermarkets. However, packets of more than 25 tablets can be sold only in pharmacies.

Over-the-counter medicines

In general, over-the-counter medicines are intended for conditions that people can recognise themselves, and which are common, minor, self-limiting, and not life threatening.

Some over-the-counter medicines have specific rules and regulations governing their availability. ‘Pharmacist Only Medicines’ are stored behind the pharmacist’s counter. You can buy them only after seeking advice from a pharmacist to ensure that they are appropriate and safe for you. ‘Pharmacy Only Medicines’ are stored on the open shelves in pharmacies. You do not have to seek advice from a pharmacist before buying them, but if you want advice you can ask for it.

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Safety &amp; appropriateness in use</th>
<th>Conditions used for</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prescription Only Medicines</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Schedule 4 medicines)</td>
<td>Medicines that need a prescription from a doctor or dentist.</td>
<td>For conditions that need diagnosis and ongoing management by a doctor.</td>
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<tr>
<td><strong>Pharmacist Only Medicines</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Schedule 3 medicines)</td>
<td>Medicines that are substantially safe in use, but need professional advice from a pharmacist to ensure they are used safely and effectively.</td>
<td>For conditions that can be easily recognised, with the help of a pharmacist, and which are amenable to short-term treatment, and can be monitored by consumers with help from a pharmacist.</td>
</tr>
<tr>
<td><strong>Pharmacy Only Medicines</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Schedule 2 medicines)</td>
<td>Medicines that are substantially safe in use when obtained from a pharmacy where advice or counseling is available from a pharmacist if needed.</td>
<td>For conditions that can be easily recognised, with the help of a pharmacist, and which are amenable to short-term treatment, and can be monitored by consumers with help from a pharmacist if necessary.</td>
</tr>
<tr>
<td><strong>Medicines on open sale</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Unscheduled medicines)</td>
<td>Labels give consumers information about when and how to use them.</td>
<td>For minor conditions that consumers can recognise and manage independently.</td>
</tr>
</tbody>
</table>
Priority areas

The main reason for collecting and analysing reports of adverse drug reactions is to improve the safety of medicines by increasing the body of knowledge about adverse reactions and identifying potentially dangerous situations. Therefore, most of ADRAC’s efforts are directed towards reports likely to achieve those goals, rather than trying to document thoroughly every adverse reaction experienced.

Reports of reactions to new medicines, serious reactions and interactions between medicines are strongly encouraged. Every issue of ADRAC’s regular bulletin includes the ‘Drugs of Current Interest’, which is a list of medicines of particular interest to ADRAC. Doctors and pharmacists are asked to report all suspected adverse reactions to medicines on the list. The information gathered about reactions and interactions strengthens and augments the body of knowledge about medicines.

Reporting your reactions

You can contribute to the process of adding to the body of knowledge about medicines by telling your doctor about any adverse reactions you think you may have experienced. The information may help your doctor better understand you and your situation, give them a better understanding of the medicine and its effects, and give them the opportunity to report the reaction to ADRAC.

Reporting an adverse reaction also gives you and your doctor the opportunity to discuss the reaction and its implications. This may enable your doctor to alleviate the problem by changing the medicine, modifying the dose, or suggesting another solution. It may also give your doctor greater insight into your health problem, which may enable them to modify and improve your management.

An example of the system in action: Celebrex

Celecoxib (Celebrex) became available for the treatment of arthritis in Australia in October 1999. It was put on the ADRAC ‘Drugs of Current Interest’ list for two years. Health professionals responded by submitting nearly 3000 suspected adverse reaction reports in that time. The reports enabled ADRAC to develop a comprehensive adverse reactions profile for the medicine. The resulting profile confirmed ADRAC’s initial impression that the adverse reactions of celecoxib were similar to those of other anti-inflammatory arthritis medicines*, except that serious gastro-intestinal effects** were less common. ADRAC kept health professionals informed of this knowledge through a series of articles in its bulletin and the Medical Journal of Australia.

Recently, ADRAC changed its advice about celecoxib. In the August 2003 issue of its bulletin, it discussed the several hundred reports it had received of gastro-intestinal ulcers and bleeding during celecoxib treatment. Based on these reports and the clinical trial results, it concluded by saying that celecoxib should be used with the same caution as other anti-inflammatory arthritis medicines.

This example shows how Australia’s system for reporting and analysing suspected adverse reactions to medicines can strengthen and change the body of knowledge about a medicine. Some clinical trials of celecoxib indicated that it had fewer serious gastro-intestinal effects than other anti-inflammatory arthritis medicines. The first two years of reporting appeared to confirm that picture. It was not until the medicine had been used by many thousands of consumers for long periods that a better understanding of the serious gastro-intestinal effects of the medicine emerged. As a result, the hope that celecoxib would be much less likely to cause gastro-intestinal ulcers and bleeding than other anti-inflammatory arthritis medicines seems not to have been fulfilled.

* The other anti-inflammatory arthritis medicines include naproxen (Anaprox, Inza, Naprosyn, Naprosyn SR, Naprogesic, Proxen SR) and diclofenac (Diclohexal, Voltaren, Voltaren Rapid).

** Serious gastro-intestinal effects include stomach and duodenal ulcers, and stomach and duodenal bleeding.
ODDS AND ENDS

Inside this issue of ‘Still talking’ is a short story on my trip over to Thailand. During my visit to the Thai laryngectomees I was given a few copies of their annual report. It is mostly in Thai, but if you would like to see a copy then contact John Nicholson.

On our website is a description of the Program of Appliances for Disabled People (PADP). That information is now two years old and might no longer be accurate. If anybody who uses the scheme is aware of any discrepancies, please let Lilah Walton or I know and I will update the advice.

The Christmas Party this year is to be held at the Bowler’s Club in York Street. This venue should be easy to get to as it is close to Town Hall station and bus routes and even has limited parking facilities. Lilah will want to be notified as soon as possible if anyone has any food they can’t eat, such as a vegetarian or no pork etc.

With the email edition from now on, I will include a reminder to Speech Pathologists that if they are going to be moving on from their current hospital they should let me know where they are going and who will be replacing them so we can retain some sort of continuity, and no hospital actually misses out on the newsletter.

A.T.Krasnodebski
MINUTES


APOLOGIES - Lilah Walton, Janet Berghammer, Pat Rogers, Patricia Lamont, Russell & Faith Green.

PRESIDENT Brian Gardner in the chair, the meeting started at 11am.

SECRETARY/TREASURER'S REPORT - June 2003

MEMBERSHIP

A review of our membership cards showed that 39 members were still unfinancial on the 10th June so we have deleted those members names from the Newsletter mailing list. In view of the notices of this intended action that have appeared in the Newsletter this year we believe the action taken was fair to all.

Only one new member since our last meeting and that was: Mr R.C. Hammarstrom of Hamilton, and we have extended a welcome to him.

Unfortunately I have to report the passing of Jack Darby of Glendon. Jack has made and donated to us our Christmas Raffle prizes for many years and his workmanship has been admired by all those who were recipients of those wonderful prizes.

We only found out recently that Mrs Jean Case died some six months ago and Lilah has extended our condolences to her family.

Last month's Newsletter has been returned from Mr J.P. Emmerson of Uralia endorsed 'Left Address' so if anyone knows of his new address would they please advise me of that address.

CORRESPONDENCE

1. Western Sydney Health - Seeking database info.
2. Facsimile Business Directory - Asking if we want to be listed at a cost of $106.70.

INCOME & EXPENDITURE 1/1/03 TO 11/5/03

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</table>

WELFARE OFFICER'S REPORT - Lilah was sick and Des Nicholson said that there was nothing to report that could not wait until next meeting. This year's Christmas Party would be at the city Bowling Club on York Street and anyone with dietary requests should advise Lilah so she can arrange to meet their needs long before December 6th.

SPEECH AID CO-ORDINATOR'S REPORT -

John Chaloner was able to attend the June meeting but had nothing to report.

GENERAL BUSINESS - Tony Krasnodebski read a very pleasant letter from Michael Jordan ex Pacific Medical sending his regards and recalling his times at our meetings. We also remember Michael with pleasure.

Tony also suggested we consider support for laryngectomies in East Timor and New Guinea. He reported research is being done in America on a basic pneumatic speech aid which would be cheap and easy to make and maintain for these countries that don't have access to the health system we have in the western countries.

Carol Gardner has contacted her source regarding the stoma covers and received a tentative price. More options have to be taken into account with advice regarding material and dispatch. Des is still doing her wonderful job of supplying both hospital packs and individuals but if this can take some of the load from her it would be worth while.

The president had welcomed Bill Eccleston who had been a member for some but has been working. Bill gave us a short summary of his work history and health. We hope he continues well and look forward to seeing him at future meetings.

Mary Halliburton reported she has written to 'A Current Affair' and 'New Dimensions' regarding publicity for the Association. She will report on the outcome.

Carol Gardner heard of a member of Parliament who has announced he has throat cancer. If he has the operation and returns to his work it would certainly get the message to a lot of people and perhaps help the anti-smoking campaign as well.

Don Newby raised the matter of the bequest. Brian Gardener said the matter is being processed and more information will be available, perhaps at the August meeting.

There was some discussion about patient packs, an ever present drain on the association finances. Des Nicholson said all patient should be entitled to them while Tony Krasnodebski suggested application forms be handed out to apply for the packs. As this is an ongoing problem more discussion will take place later. One suggestion was that only hospitals that actually do the laryngectomie operation be given the packs.

Tony is to report on his trip to Thailand in the newsletter which should make interesting reading.

The meeting closed at 11.45 and all adjourned for lunch.

Next meeting is at Strathfield on Wednesday July 16th.
often, when patients are undergoing their laryngectomy, a partial or total thyroidectomy is performed at the same time.

the thyroid gland is a butterfly shaped gland that is located in the front of the neck just below the Adam's apple with one 'wing' on either side of the windpipe.

the thyroid produces several hormones that are known collectively as thyroid hormone and which affect all parts of the body. the heart, liver, kidneys and skin all need the right amount of thyroid hormone to work effectively, also cholesterol levels, mood, memory, muscle strength, reproductive functions and appetite can all be affected by a thyroid disorder.

insufficient thyroid hormone is called hypothyroidism and can cause the victim to be lethargic, with a slower mental process, to have a reduced heart rate, have tingling or numbness in the hands and an increased sensitivity to cold. to minimise or reverse the effects of hypothyroidism the patient will need to take thyroid hormone replacement tablets for the rest of their life to stabilise the body's metabolic functions.

prior to the 1950's when synthetic thyroxine tablets were formulated, hypothyroid patients were treated with dried and powdered animal thyroid glands. the tablets contained both levothyroxine or T4 and triiodothyronine or T3. 'oroxyine' is the brand name of the thyroxine tablets prescribed in Australia. there is a full description in the excellent Australian website: http://www.thyroid.org.au.

regular blood test readings of T4 and T3 help establish the daily number of micrograms of thyroxine that a patient should be taking. thyroxine causes an increase in the rate of carbohydrate metabolism and a rise in the rate of protein synthesis and breakdown, also leading to increased activity of the endocrine system. thyroxine activity is controlled by thyrotropin, a substance released from the pituitary gland.

there shouldn't be any side effects from taking thyroxine at the prescribed dose, however, indicators that you are under the required dose could be lethargy or other symptoms listed earlier. should the daily dose exceed that required there could be increased metabolic activity which might result in palpitations, chest pain, muscle cramps, sweating, tremors, diarrhoea, insomnia or headaches. a reduced dose will fix any of those problems. problems could also occur when thyroxine is taken with other necessary drugs. your doctor will help you juggle those requirements.

Always remember to take your prescribed amount of thyroxine each morning and having no thyroid or an underperforming thyroid should present no problem.
NICOTINE

Using tobacco products can lead to various cancers such as laryngeal cancer. There are any number of reasons why people take up smoking; curiosity, peer group pressure, rebellion, succumbing to advertising hooks, calming nerves, suppressing hunger etc. However, there is one main reason why they continue smoking even after they realise the stupidity and dangers of the habit and that reason is nicotine.

Nicotine is a poisonous alkaloid that occurs naturally in a number of other plants as well as tobacco. There is about 1 milligram of nicotine in a cigarette and if that amount were injected directly into the bloodstream it would kill you. Most of the nicotine in a cigarette goes up in smoke and of that which is inhaled when you puff on the cigarette only a small amount is absorbed through the lung wall into the bloodstream, where it is further diluted. So only a tiny fraction makes it to the receptors in the brain where it acts as a stimulant and hunger suppressant. The effect only lasts for half an hour to one hour, which starts the craving for another hit of nicotine.

The word nicotine is named after a Frenchman, Jean Nicot, who introduced the plant to the French Court in the sixteenth century where it was named Nicotiana tabacum. Three centuries later when the alkaloid drug was identified it was called nicotine.

Tobacco companies hold onto addicted consumers by selling low-nicotine cigarettes. Unfortunately, smokers tend to draw more heavily on these cigarettes to try and get the nicotine level that they are used to. That or smoke more cigarettes. The end result being that more of the thousands of carcinogenic constituents and additives are inhaled by the reluctant smoker.

Smokers who are only addicted to the nicotine and not other facets of the smoking culture are able to quit smoking by weaning themselves off nicotine by using a nicotine-patch program and gradually reducing their daily nicotine intake.

Pity we didn’t know all of this fifty years ago, but in those days it was a well kept secret of the tobacco companies.

LARYNGECTOMEES SUPPLIES, available from Lilah Walton:

- Stoma Material; $7 per metre.
- Shower Shields; $32 each.
- Stoma Covers; $4 each.

These are prices for members, postage is extra.

NEXT MEETING

The next meeting for the Laryngectomees Association of NSW will be held on Wednesday, 16th July, at the Uniting Church Hall, Carrington Avenue, Strathfield, at 11 am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.

Laryngectomees, Friends, Families, Professionals all WELCOME.

Vale

Regretfully have to report that the following members have died:

Mr Jack Barry of Glenden
Mrs Jean Case of Lindfield

We express our sincere sympathy to their family and friends.

July 2003
THAILAND TRIP

During May I had a couple of weeks holiday in Thailand, visiting Udon Thani in the northeast with a day trip to Laos, also Rayong on the coast of the Gulf of Thailand. The remainder of the time I spent in Bangkok.

On my last day in Thailand I visited with the Laryngectomees Association in Thailand. Their meeting was in Siriraj Hospital which is located on the other side of the Chao Phraya river from the Grand Palace and Wat Phra Kao.

Every Wednesday they hold classes of instruction in oesophageal speech. They have classes for beginners, intermediate and advanced oesophageal speakers. Once a month they hold a committee meeting and as it was held on the day of my visit I was fortunate enough to meet most of their committee members and we had an excellent lunch together in the hospital restaurant.

Of the more than 3,000 Thai laryngectomees I was told that 30 - 40% use oesophageal speech, 50 - 60% use an artificial larynx or voice prosthesis, but at least 10% have no speech at all and if any are illiterate I dread to think how they manage to communicate. Membership of the Association is free and apparently their funding comes from Japan. There is fairly frequent contact between South East Asian Associations so I would guess that the Japanese might give help to other countries as well as Thailand.

Siriraj Hospital, Bangkok

Beginners taking oesophageal speech instruction

Continued on Page 6
Continued from Page 5
The Speech Pathology Department of Siriraj Hospital, the largest hospital in Thailand, furnishes the facilities for the Association's activities in Bangkok. There are up to 18 other locations in Thailand where speech training is conducted, but I don't know how often or where the locations are. Looking to the future, maybe we can establish contact with other laryngectomees in South East Asia and the Pacific region.

Committee members at lunch, Siriraj Hospital

PUBS AND CLUBS

Being laryngectomees would indicate that we are susceptible to contracting cancer and the gradual introduction of non-smoking areas in pubs and clubs must be viewed as a positive move to lowering the risk of cancer from passive smoking.

From July 1, 2003 NSW pubs and clubs will have smoking bans at all serving counters and have a designated non-smoking bar area, however, enforcement will not apply until January 1, 2004. From July 1, 2004 pubs and clubs with two or more bars will have to make one non-smoking.

Even though Mosman Rowers Club has been smoke free for two years and has experienced booming trade most pubs and clubs are up in arms about the changes. Whereas restaurants and the anti-smoking lobby view the restrictions as half-hearted, as a laryngectomee I think it is at least a step in the right direction.

Humour

The ladies of the church have cast off clothing of every kind and they may be seen in the church basement Friday.

Wednesday, the Ladies Liturgy Society will meet. Mrs Jones will sing 'Put Me In My Little Bed' accompanied by the Vicar.

Thursday at 5 pm, there will be a meeting of The Little Mothers Club. All wishing to become little mothers, please see the Minister in his private study.

Low Self-Esteem Support Group will meet Thursday at 7 to 8.30 pm. Please use the back door.

The Pastor will preach his farewell message. After which the choir will sing, 'Break Forth Into Joy'.

During the absence of our Pastor, we enjoyed the rare privilege of hearing a good sermon when J.F. Stubbs supplied our pulpit.

The eighth-graders will be presenting Shakespeare's Hamlet in the church basement on Friday at 7 pm. The congregation is invited to attend this tragedy.

Twenty two members were present at the church meeting held at the home of Mrs Mary Crutchfield last evening. Mrs Crutchfield and Mrs Rankin sang a duet, 'The Lord Knows Why'.

July 2003
BEQUEST

Information has been received that our Association has been bequeathed a substantial sum of money. In brief, a lady named Mrs Caper of Bayview died on 1st March 2003. Mrs Caper, whilst not being a laryngectomee, had suffered from cancer and in recent years our Welfare Officer, Lilah Walton, through her contacts with the Cancer Council of NSW had become a friend and confidante to the late Mrs Caper. Lilah has received correspondence from the Permanent Trustee’s Office to the effect that our Association is one of four nominated beneficiaries of Mrs Caper’s will.

The estate is in the process of being assessed and formulated for the purpose of probate. Accordingly, until the legal processes have been finalised, the actual amount of Mrs Caper’s unexpected bequest, whilst from initial information received we are aware may be substantial, is purely speculative.

Members who do attend monthly meetings will be aware that the funds the Association has at present in trust are often discussed as to how we can benefit our members within the aims and objectives of the Association’s purposes. Now, with this unexpected windfall, those discussions will now be required to be addressed in more depth and legally formulated. Our legal advice is that the probate process may take a couple of months considering all legal avenues to be addressed. In the intervening period your Executive Committee will analyse and examine our good fortune and hopefully be in a position to present various submissions, perhaps by the August meeting. If you have any constructive thoughts on the matter please do not hesitate to contact or approach any member of the Committee.

B.C. Gardner

WHO TO CONTACT

FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, 111 Station St, Petersham 2049. Phone 02-9560-2852
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033. Phone 02-9663-2550
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1903. Fax: 02-9357-2676
Or contact the Social Worker at the hospital you will be attending.
MINUTES

MINUTES OF THE MAY MEETING OF THE
LARYNGECTOMEE ASSOCIATION OF NSW, HELD IN
THE UNITING CHURCH HALL, STRATHFIELD ON
WEDNESDAY 21ST MAY 2003.

PRESENT - B Gardner, D Newby, P Halliburton, N Bluett,
G Cecconi, J Berghammer, R Green, J O'Meara, M Rady,
J Nowland, C Gardner, M Halliburton, L Cecconi,
F Green, J Bluett, L Walton.

APOLOGIES - John & Des Nicholson, David & Pat
Lamont, Tony Krasnodebski, John & Clarissa Chaloner,
Pat Rogers, Margaret Silver.

PRESIDENT Brian Gardner in the chair, the meeting
started at 11am. Minutes of previous meeting as
appeared in the newsletter were taken as read.

Moved Carol Gardner, seconded Pat Halliburton.

SECRETARY/TEACHER'S REPORT - May 2003
(read by Lilah Walton)

This will be a short report this month as Desma and I are
taking the opportunity of seeing our younger son and his
family at Wagga and our younger daughter and family at
Paynesville, Vic. Des has not been 100% lately and we
think a break will do us both some good - at least that is
our hope. I apologise for not being at the May meeting. I
am sure it will be our only absence for the rest of this
year.

MEMBERSHIP

Only one new member so far this month and we welcome
Mr Mihailo Zaric of Cabramatta to our Association. Mihailo
became a laryngectomee way back in 1989 at St George
so no doubt he knows all the tricks by now.

Sadly I have to report the passing on of David Palmer of
Coffs Harbour. David was only 43 when he died and his
mother, Ruth, has advised me that he did look forward to
receiving 'Still talking' each month. Mrs Palmer has sent
our Association many stoma covers, some spare parts etc
for hos Blom-Singer and a kind donation of $50.00.
Naturally I have thanked Mr and Mrs Palmer and I have
extended to their family our sincere condolences.

Since our reminder about outstanding subscriptions was
included in the last Newsletter I have only received, to
date (14 May) only one payment so unfortunately it will be
necessary, when I return later this month, to delete the
names of those members who have not paid their sub-
scription for 2003.

INCOME & EXPENDITURE 1/1/03 TO 11/5/03

| Balance b/f | $8417.83 |
| Income      | $3288.68 |
| Expenditure | $5583.67 |
| Balance c/f | $6122.84 |
| Term Deposits | $39,035.34 |

Moved Janet Berghammer, seconded Don Newby.

WELFARE OFFICER’S REPORT - Very little to report
this month apart from making up hospital packs and
sending them to various hospitals, plus the odd stoma
cover. I've had a quiet time.

On the radio the other day the announcer was asking for
anybody with a few dollars to spare to send it to Royal
North Shore Hospital as their finances are not the best. I
rang the Speech Pathology Dept and spoke to Margaret
Patterson and she said they always want things but what
she would really like would be a pile of new stoma covers
to give to new larys who are going home (country?) and
only has the two 'hospital' stoma covers that I put in the
hospital packs. So I thought maybe if I sent material,
ripping and velcro to all our sewing ladies with a pattern
you would help me get a lot made and then I could send
them to all Speech Pathologists at city and country
hospitals who do laryngectomee ops. I think its a great
idea but I can't do it alone. Maybe Bonny Clark, your
daughter's sewing group may help. Please think about it
everybody.

Had a letter from the Public Trustees regarding a sum of
money left to L.A.N.S.W. As she has no family I can't
write and thank them but I know she would have known
how grateful I (and all members) are.

All the rain we have had in Sydney would have more than
drowned all the germs away, so it should be a healthy
winter for all. Any rate I hope so. - Cheers, Lilah.

PS. Had 2 lovely 'Thank you' cards from Christine and
Greg Segal. In one he said, people they bump into at the
hospital say 'Go ask Lilah, she'll check it out for you.'
Who will they say next year????

Moved Carol Gardner, seconded Jo Nowland.

GENERAL BUSINESS - An e-mail was received from
Jenny Clemens expressing appreciation to the
Association for help given to her husband who has
passed away.

As our hard working sewing ladies are finding it difficult to
cope with the supply of stoma covers it was decided after
some discussion to approach some persons regarding
commercial supply. Lilah and Carol are both making
enquiries in this respect.

A discussion was also held on the possibility of laryngecto-
mees receiving publicity on T.V. and radio. Mary
Halliburton offered to approach someone in these areas
and try to arrange for an interview for one of our laryngecto-
mees.

Lilah Walton reported she was approached by Margaret
Patterson regarding crocheted stoma covers. Carol
Gardener and Janet Berghammer have generously
offered to crochet some according to the pattern Margaret
enclosed. Lilah is to supply the cotton and the Association
will reimburse her.

Next meeting will be at Strathfield on June 18th.

Meeting closed at 12am and all adjourned for lunch.

At the evening service tonight, the sermon topic will be 'What is Hell?' Come early and
listen to our choir practise.
MAKING A KILLING

In March 2003 a new tobacco company was officially incorporated in the US state of Virginia calling themselves 'Licensed to Kill'.

Their press release stated 'Licensed to Kill, Inc is pretty much like any other tobacco company. We kill to make a profit. The main difference is that we're very upfront about our purpose, and this is reflected in our name.'

The new company is banking on its brutal honesty to spare itself from the multitude of lawsuits currently plaguing other companies within the industry. Many of these lawsuits have centered on the tobacco industry's long history of lies and deception about the deadly nature of the business.

'We would like to especially thank the Commonwealth of Virginia's State Corporation Commission for granting us permission to exist,' says company director Gray Vanstone, 'If a person was to ask the state for authorisation to go on a serial killing rampage, he would surely be locked up in jail or a mental institution. Luckily, such moral standards do not apply to corporations.'

This supposed honesty in marketing has raised the hackles of corporate lawyer Robert C. Hinkley, who made a speech on the grounds of the Virginia Capitol denouncing both 'Licensed to Kill' and the Commonwealth of Virginia. He said something was wrong when the State Corporation Commission has no choice but to issue a corporate charter to a company boldly stating that it has plans to make money killing people.

US state government laws provide for the formation of corporations, license them to operate and grant their shareholders immunity from liability. It is time to change the corporation law and deny the advantage of corporate status to companies that use it to make their fellow citizens sick and die.

You can read all about 'Licensed to Kill' on their website http://www.licensedtokill.biz. Their company motto is 'We're rich, you're dead'. The company even plans to have a line of cigarettes called 'Throat Hole', probably a dig at laryngectomees.

BELIEVE IT OR NOT

A doctor Bepler at the H. Lee Moffitt Cancer Center in the US has been awarded a US$3.1 million grant from the National Cancer Institute to research the drug 'Exisulind' which is hoped will prevent lung cancer.

When cells in the lungs are affected by smoking, most of them die, however, cells that don't die have a high risk of becoming cancerous. 'Exisulind' attacks the damaged cells that didn't die and pushes them to cell death, so none are left to become cancer. Well, that's the theory anyway.

Belper will run a 5 year study on former smokers who smoked a pack a day for 30 years or more, are over 45 and quit smoking more than a year previously. He will see how the treatment affects 'pre-malignant lesions' in the subjects, with the hope that the lesions will decrease and disappear.

The time could come when a person could smoke for over 30 years, quit, take an oral treatment and never worry about contracting lung cancer.
PHOTODYNAMIC THERAPY
The lead story of Web Whispers in May caught my eye. It said that laser therapy might be the 'magic bullet' for treating throat cancer.

Photodynamic Therapy (PDT) is a developing technique where a photosensitiser drug called porphyrin sodium is injected into a patient and this photosensitising agent apparently remains in cancer cells longer than in healthy cells. Then red light, as from a laser, is directed onto cancerous tissue containing the agent that becomes activated and destroys the tissue where the light beam has been directed. An advantage of PDT is that it should cause minimal damage to healthy tissue.

So PDT is the interaction of the porphyrin sodium dye and the red laser light. The red light is absorbed by the dye which is excited and transfers energy to molecular oxygen in the tumour killing the cancerous cells. The trick is to get the correct light dose to penetrate to the deepest part of the tumour as it is dependent on tissue pigmentation, dye absorption and light scattering.

As an alternative to radiotherapy PDT could preserve larynx function while treating tumours. However, there is a danger of some damage to healthy tissue that has retained some dye. Dose and timing are critical to successful use of PDT and continued research is necessary for it to be a fully effective tool in cancer treatment. A good report on the internet can be seen at [http://www.sciencedaily.com/releases/2003/03/030303075156.htm](http://www.sciencedaily.com/releases/2003/03/030303075156.htm).

ELECTRONIC NOSE
A French newsagency has reported that Italian scientists are expanding on the industrial hi-tech hygiene sensors that 'smell' chemicals released by rotting food. They are developing an eight-sensor nose that proved 100% accurate in testing breath samples from people with lung cancer and others who were healthy.

The sensors are quartz crystal coated with dyes called metalloporphyrins which bind to certain carbon-based chemicals causing them to vibrate at a different frequency. A breath sample creates a unique profile of vibrations giving a signature of the tumour.

Further research is needed to increase sensitivity to detect tumours at an earlier stage so it can be used as a routine check for smokers and other high-risk groups.

NEXT MEETING
The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 18th June, at the Unitig Church Hall, Carrington Avenue, Strathfield, at 11 am.
There is parking on site and it is also a short walk from the Railway Station.
The meeting will be followed by a light luncheon.
Laryngectomees, Friends, Families, Professionals all WELCOME.

VALE
Regrettfully, have to report that the following member has died:
Mr F. Palmer
of Clovis Harbour
We express our sincere sympathy to his family and friends.
MESSAGE FROM THE PRESIDENT

There hardly seems to be a meeting that goes past without some discussion on our falling membership numbers and the reasons are for that decline are varied and complex. However, it seems even more confusing when our records indicate that we are issuing more Patient Packs than ever, indicating that there are more laryngectomy operations being done.

The following is an abridged version of a paper that I presented to the School of Communication Sciences and Disorders some three years ago:

One of the main problems the Association encounters is falling membership. To some extent this is caused by an ageing membership - most laryngectomees have their operation late in life and after all - we are a dying breed; it may be the $20 membership fee; or the hesitancy of larys to declare their disability and/or join any club or association. It is my firm belief that the main reason behind declining membership is that the Association is not being made aware of people who are having the operation. It has been raised that it may be unethical for the surgeon to inform the Association of an impending operation - I can understand and appreciate this line of thought. So how do we find out? In almost every case the Speechie at the hospital involved makes contact with their authorised visitor who then, at the request of the patient or family, makes a pre or post operative visit. Hence, we make contact with a potential member. Sometimes this does not occur because the patient refuses that visit or sometimes there is a breakdown in communication. I have even heard of cases where the Speechie was never informed that the operation had taken place. In this regard I would ask all Speechies and medical personnel who receive or read our monthly newsletter to find out who your authorised Association visitor is, make contact with them and establish that important working liaison.

The issue, management and distribution of the Association Patient Packs is causing concern. The Pack costs the Association over $14.00. We have answered requests from over 25 hospitals throughout Australia for the supply of the Pack at an overall cost of approx. $3000 to the Association. Following discreet inquiries we find that laryngectomys are not even performed at some of the requesting agencies. It appears that the Speechie tends to be the main avenue through which the Packs are issued to patients. We would like to see better control and management of the issue of these Packs.

I hope I have not offended anybody by raising the foregoing issues, if so I apologise, but these issues need to be addressed. If you have any comment or ideas on same please do not hesitate to speak to any of our members, or contact me by telephone on (02) 9452 2858, email briangardner@optusnet.com.au or our over-worked Welfare Officer, Ms Lilah Walton on (02) 9663 2550.

Brian Gardner
President
No Oscar for Nicole's smoking

Health groups have warned that Nicole Kidman's smoking at a media launch will be devastating for young women and girls whose health and fertility continues to be seriously undermined by the glamorisation of smoking by celebrities both on and off screen.

The Oscar winning actor was shown on a TV news report lighting up a cigarette at an international media launch watched by millions of people worldwide.

Says Anne Jones, Chief Executive of Action on Smoking and Health (ASH) Australia: 'Smoking by celebrities has been used by the tobacco industry for decades to glamorise smoking and associate it with success and independence – as opposed to the reality of disability and early death.'

'The truth is that smoking kills over 6,000 women a year in Australia,' she says, 'and female smoking rates (21%) are not falling as fast among women as men.'

New research also shows girls are starting younger and becoming addicted more rapidly than previously thought; and smoking by celebrities encourages children and young people to smoke.

'Mass media coverage of celebrity smokers, like Nicole Kidman, is priceless for the tobacco industry in their drive to addict new smokers – most of whom are children,' says Anne Jones.

'The biggest threat to the health of women is tobacco - and we will be appealing to Nicole Kidman, through her agent Wendy Day, to avoid sending the wrong message to young people and children.'

'We accept that Nicole Kidman has a right to smoke, but with celebrity comes a responsibility to avoid promoting lethal and addictive products to young people.'

humour

Hitting on the novel idea that he could end his wife's incessant nagging by giving her a good scare, Hungarian Jake Fen built an elaborate harness to make it look as if he hanged himself. When his wife came home and saw him, she fainted. Hearing the disturbance a neighbour came over and, finding what she thought were two corpses, seized the opportunity to loot the place. As she was leaving the room, her arms laden, the outraged and suspended Mr Fen kicked her stoutly in the backside. This so surprised the lady that she dropped dead of a heart attack. Happily, Mr Fen was acquitted of manslaughter and he and his wife were reconciled.

A man and a woman are driving down the highway when another car passes them. The woman notices that the occupants of the other car are young and obviously in love. The girl is sitting very close to her boyfriend as they cruise on down the highway.

This causes the woman to think back when she and her husband were young and in love, and wondering where the show of affection had disappeared to over the years.

Finally she says to her husband, "Remember when we used to be like that young couple? Where did the love go, honey?"

Her question was met with a few moments of silence. Then he quietly replied, "I haven't moved."

Follow your dream! Unless it's the one where you're at work in your underwear during fire drill.

Into every life some rain must fall. Usually when your car windows are down.
WINTER’S COMING

What a cold, wet and miserable Easter that was. Letting us know that winter is just around the corner. Time to get out the heaters and jumpers and put an extra blanket on the bed. Also, if you intended having a flu vaccination, you really should have had it done by now, if you haven’t, I suggest you get down to the doctor right away.

As for myself, I intend taking a couple of weeks off in May and going over to Thailand for a short holiday unless a sudden explosion of the SARS virus prevents it. When I am there I will pay a reciprocal visit to Karoon and the Thai Laryngectomee Association and find out what their set up is like. So expect a short report in either the June or July newsletter.

Remember, if you get a computer and connect to the internet through the year, send me an email and let me know so that I can send ‘Still talking’ by email. This month I am following up medical staff to encourage them to take up email delivery.

A.T. Krasnodebski

WHO TO CONTACT


FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, 111 Station Street, Petersham 2049. Phone 02-9560-2852

FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Lilah Walton, 23 Baker Street, KENSINGTON 2033. Phone 02-9663-2550

FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1900. Fax: 02-9357-2676

Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - Pat Rogers, Joe Perz, Janet Berghammer, Clarissa Chaloner, Tony Krasnodebski, Alan & Pat Dawson, Don Newby.

THE PRESIDENT, Brian Gardner opened the meeting at 11am. Minutes of the 2002 Annual General Meeting as appeared in the Newsletter were taken as read.

Moved Lilah Walton, seconded John Chaloner.

NOMINATIONS: Brian Gardner - President, Noel Bluett - Vice President, John Nicholson - Secretary/Treasurer, John Chaloner - Speech Aids Co-ordinator, Lilah Walton - Welfare Officer, Tony Krasnodebski - Editor, Mary Halliburton - Minute Secretary, Pat Rogers and Pat Halliburton - Committee Members.

All nominations were accepted unopposed and they were so elected.

FINANCIAL Report was presented by the Secretary and this audited report was accepted on a motion by Lilah Walton and seconded by Brian Gardner.

There being no further business the Chairman closed the A.G.M. at 11.25 am.


PRESIDENT Brian Gardner in the chair, the meeting started at 11am. Minutes of Annual General Meeting omitted in last newsletter will appear in next one. Minutes of last meeting were taken as read.

Moved Alan Dawson, seconded Pat Halliburton.

SECRETARY/TREASURER'S REPORT - April 2003

MEMBERSHIP

Some April Newsletters have been returned endorsed 'Left Address' or 'Not at This Address'. If anyone knows the new address for the following members would they please advise me accordingly:
Mr B Hodges of Miller Road, VILLAWOOD
Mrs K Critchard of Quirk Street, ROZELLE

Only one new member this month and I have welcomed Mr John Coughlin of Maroubra to our Association.

Having just finished the above when the afternoon mail arrived with new membership applications so I can now welcome the following three new members:
Mr David V Markham of Mayfield
Mr Jim Callender of Fairfield West
Mr Ronald Chapman of Umina.

MEMBERSHIP FEES

At our last meeting it was decided that we would stop forwarding the Newsletter to those members who were still unfinancial as at 30th April 2003. Unfortunately that decision was not shown in the minutes of the last meeting in the April Newsletter. I therefore seek your approval to cease sending Newsletters to those members who have not paid their subscription for 2003 by the date of the May meeting - ie 21st May 2003. (Agreed by a show of hands)

INCOME & EXPENDITURE 1/1/03 TO 13/4/03
Balance b/f $ 8417.83
Income $ 2887.93
$11285.76
Expenditure $ 4268.92
Balance c/f $ 7016.84

Term Deposits $39,035.34

Moved Carol Gardner, seconded Margaret Silver.

WELFARE OFFICER'S REPORT - How many of you read the office bearers for 2003? None I bet, because no new nominations were received. Believe me, I don't want to win the prize for being the oldest and longest serving office bearer of any voluntary organisation not only in Australia but the world. I received a letter from the New Voice Association of South Australia wishing me well in my retirement and congratulating me on the good job I have done. South Australia, I came to your 25th Anniversary and it looks as though you will have me as a guest for your 50th!!! Thank you for the letter any rate.

Speaking to a daughter of a lary who lives overseas I was thinking how lucky Australian larys are. You have very skilled Doctors who perform the operation and the marvellous Speech Pathologists and then the help (if needed) from the Laryngectomee Association of NSW. I don't think there would be as many complaints if you could hear of some of the conditions other countries experience.

Have had requests from Hospitals for 'Patient Packs' but on going through the visitor's reports have only received one. Please send any reports you have. I know they (patients) have had visitors because they ring for supplies (which get passed on to good old Des).

I had a call from a new Speakie, Alison McKenzie, who is at Gosford Hospital and sent the 'Patient Packs' to Bathurst Hospital. This, in my humble opinion, is a sure sign of senility, thank you Bathurst for sending them on to Alison. I haven't had anybody ring me about any of our larys being in Hospital but if anybody is not 101% I trust by the time this goes to press you are feeling better.

Trust everybody has a Holy, Happy Easter. --------- the old lady (?) Lilah
MINUTES CONTINUED...

The cost of patient packs, which is $14 each, was raised and the number which are requested by the hospitals. It was pointed out that they are meant for new laryngectomees only and should not be used to replace stoma covers of existing laryngectomees. The stoma covers are available to be purchased on application to the Welfare Officer.

Moved Brian Gardner, seconded Pat Dawson.

SPEECH AIDS CO-ORDINATOR’S REPORT - APR 2003

"It never rains but it pours!" After some months of little activity I had requests for 12 batteries within one week.

Due to very kind donations from the Speech Pathologists at Westmead Hospital, at John Hunter Hospital in Newcastle and at the Royal Adelaide Hospital, and from the family of the late Joseph Nagy we now have a stock of spare parts for the DSP-8 pneumolarynx speech aid (which you may recall is no longer in production).

If users of the DSP-8 are in need of something, contact me and we’ll see what we can do (I don’t have any spare housings for the smaller DSP-81 though).

Moved Tony Krasnodebski, seconded Lilah Walton.

GENERAL BUSINESS - Lilah Walton reported a non-member laryngectomee rang her to complain that he could not buy batteries from the association. On enquiry from John Chaloner she found out that if a non-member buys batteries or other goods from us we are liable for GST.

Lilah Walton would like to remind members that tattoo stickers stating that patient is a neck breather are available free from her. These are more specifically for use if the laryngectomee is to have surgery or a hospital visit of any kind.

Des Nicholson reported that they had their first phone call directly as a result of the website set up by Tony Krasnodebski. Congratulations Tony. Let’s hope there are many more to come.

Pat Lamont suggested an accounting system to monitor dispatch of patient packs be installed. The President said the already overworked Welfare Officer could not handle more work.

Margaret Silver raised the matter of hospital visitors, an ongoing problem to contact those having laryngectomee operations. Although it is better to see the patient before the operation to allay some of their fears and show how life can go on, it has become more difficult as they can be in hospital on the same day as their operation with no time to have visitors. Because of privacy laws, patients must be asked if they want a visit. As they are in a fragile and emotional state many say no, failing to realise the support they can be given. The Association can only rely on the Speech Therapists to contact them and make use of the specially trained hospital visitors that are available.

With no more general business the meeting closed at 11.50 and all adjourned for lunch.

Next meeting is on May 21st.

WESTERN DISTRICTS NEWS - April 2003

We were pleased to welcome back Eric Smith to our meeting. Eric has been very ill including a stay in hospital.

A letter and a card from Eric thanking the Branch for the flowers and good wishes were read.

At the meeting on 8th April a special motion was passed to approach the Department of Fair Trading to cancel the Branch’s incorporation. We no longer need to be incorporated as we are covered as a Branch of the Head Office, also we no longer run street stalls, one of the original reasons for becoming incorporated.

On Tuesday, 22nd April a barbecue at Woronora Dam with our friends from the Illawarra Branch has been organized. Members of the Southern Districts Branch have been invited to join us.

RADIATION AND ALOE VERA

We previously ran a story on this topic by a Paul Galioni a couple of years ago. That article can be seen in the TIPS section of our website www.stilltalking.org.au. This piece was taken from the ‘CAL Voice’ newsletter.

‘I first found out that I had cancer in 1993 when they removed a growth from my vocal cords. After the biopsy came back malignant, I was presented with three choices; full laryngectomy, partial laryngectomy (not recommended) and radiation (low success rate). I chose to go with the radiation as it seemed preferable to try this, which presented a slim chance, rather than lose my vocal cords for sure. The following was my experience with radiation and what I did about it.

I was scheduled for 7 weeks of radiation and started right away. At about the 3rd or 4th session I told the technicians that I was experiencing a burning in my throat. I asked them what this was about, and they told me this was from the radiation. They told me to

Continued on Page 4
Continued from Page 3

think of it as a severe sun burn (on the inside) and that this would go on throughout the treatment. They then had me see the doctor, who prescribed a concoction of chemicals to relieve the pain. After taking that stuff twice I became convinced there had to be something better. I was right. I thought of having used Aloe Vera in the past for burns and scars. I decided to see if anything in that vein existed for my purposes (no), and started to experiment with the different aloe products. I tried the juices and mixes; none of them did the job. I then tried pure Aloe Vera gel. I mixed 1 ounce of gel with 2 ounces of water to gargle and rinse my mouth with. Wonder upon wonders, immediately the burning was reduced, and within 3 days was gone completely. I'm sure that this time factor may vary for others, and in fact may not work with everyone. I do know that people who were seeing the same doctor, and having radiation anywhere in the neck area tried the concoction and had the same success that I did.

I tried to take this to pharmaceutical companies to try and make it available to people, but there was no interest. Apparently there is no way to patent something like Aloe Vera and water, plus the time involved for clinical testing would be costly. The general consensus was that there was no money to be made, only a cost. It is sad, but understandable in this day and age.

My suggestion to anyone having radiation and a problem with it, is to ask their doctor about any bad effects they may be aware of for your particular therapy if you should use Aloe Vera; and if not, give it a try.

Written by, Craig Smith

NICOTINE PATCHES

Tim Dowling of the UK Guardian said, tongue in cheek, that they contain plenty of nicotine, they cost a lot of money and you don't need matches; it's amazing no one saw the potential before. The industry will be looking to launch several branded versions of the nicotine patch over the next year, including a luxury Silk Cut version made from actual silk. Eventually, we expect to see tobacco companies repositioning the patch less of a pharmaceutical product and more of a cigarette you can use on a plane. Of course the prominent logos of the patches will help to promote affiliated tobacco products, but as time goes on, he predicts cigarettes will become a mere gateway drug.

NEXT MEETING

The next meeting for the Laryngectomy Association of NSW will be held on Wednesday, 21st May, at the Uniting Church Hall, Carrington Avenue, Strathfield at 11 am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.

Laryngectomees, Friends, Families, Professionals all WELCOME.

VALE

Regrettfully I have to report that the following members have died:

Mr B Everley of Cootamundra
Ms I Dunn of Appin

We express our sincere sympathy to their families and friends.
HOMEOPATHY

At the end of the eighteenth century a German doctor named Samuel Hahnemann adopted a new approach to treating sick people. Instead of countering an illness in the usual way, he administered a tiny dose of a substance that, in a larger amount, could cause the problem being treated.

An analogy would be immunisation, but in homeopathy a small dose is given to a sick person whereas immunisation uses a larger dose on a healthy person. Or that the symptoms that manifest themselves when an illness is contracted can be combated by a small dose of a poison which also causes the same symptoms.

It is not known exactly how homeopathic medicines work, but there is evidence that the medicines are active and can heal. Dana Ullman, an American authority on homeopathy says that it became popular in the US and in Europe during the 1800s because of its success in treating the many infectious diseases that raged during that time, including yellow fever, scarlet fever, cholera, and many others. The death rate in homeopathic hospitals was between one-half to one-eighth of those in conventional medical hospitals. Homeopathic medicines also have been shown to work on infants and on various animals (including dogs, cats, horses and even cows) where it is highly unlikely that they are acting only as a placebo. Homeopaths also find that people who are being treated with homeopathic medicine for a chronic disease sometimes experience a temporary exacerbation in their symptoms as the body's defenses are being stimulated. Homeopaths have found that a "healing crisis" is sometimes necessary to achieve healing. It is highly unlikely that this temporary worsening of symptoms is the result of a placebo response. Clinical trials have demonstrated that homeopathic medicines can work and that when a wrong medicine is prescribed nothing happens. Only when the correct medicine is given does it act as a catalyst to the defenses and without any side effect.

If you take it as given that homeopathy is a viable alternative treatment regime for many ailments, how do you go about finding a homeopath? Same as finding a doctor, tradesman or any other professional I guess. Word of mouth would be your best bet but failing that, try two or three located near your home and go with the one you like best. There are two or three associations in Sydney plus a couple of places that run courses in homeopathy. If you wanted to research the subject yourself and self-administer remedies then Newton's Pharmacy in York Street dispenses homeopathic pills, powders and liquids.

There is of course some conflict between homeopaths and mainstream medicine where doctors see homeopathy as a threat and run by charlatans. However, homeopathy is popular in much of Europe, the sub-continent and parts of South America and the US. I was unable to establish any connection between homeopathy and Chinese herbal medicine, so I might look at Chinese herbal medicine and acupuncture some time in the future.
PREDICTING LUNG CANCER

The US National Cancer Institute in March published a formula for predicting the risk of smokers and ex-smokers in contracting lung cancer.

The formula can be applied to people over 50 years of age who smoked at least half a pack a day for at least 25 years, but the risk falls for each year after a person quits the habit.

For example a 51 year old woman who smoked a pack a day since she was 22 but quit 9 years ago has a 1 in a 100 chance of getting lung cancer in the next 10 years. However a 68 year old man smoking 2 packs a day since he was 18 has a 1 in 7 chance of lung cancer within 10 years, dropping to a 1 in 9 chance if he quits today.

Only 15% of lung cancer victims survive 5 years because the disease is usually diagnosed late and so far there is no proven screening test. The National Cancer Institute is studying whether spiral CT scans can be used to spot tumours early. In the meantime people can use the risk prediction indicators to make a more informed decision on what health-care strategies to adopt.

You can check out the formula at http://www.mskcc.org/PredictionTools/LungCancer

"Sarah, Sarah," her mother said, "calm down! Tell me, what could be so awful? What 4-letter words?"

"Please don't make me tell you, mama," wept the daughter, "I'm so embarrassed they're just too awful! Come get me, please!"

"Darling, baby, you must tell me what has you so upset.... Tell your mother these horrible 4-letter words!"

Still sobbing, the bride said, "Oh, mama...words like DUST, WASH, IRON, COOK...!"

Two ladies were talking. One looked at the other's ear and said 'Did you know you have a suppository in your ear?'

Her friend looked worried, she said 'So I have, I wonder what I did with my hearing aid?'

Why did the toilet-roll roll down the hill?

To get to the bottom.

How did the lion feel after eating the comedian?

A little funny.

When a man says, 'I'm going fishing.' He really means, 'I'm going to drink myself dangerously stupid, and stand by a stream with a stick in my hand, while the fish swim by in complete safety.'
HUMOURLESS?

I must apologise for a short four page newsletter again, but sometimes there isn’t that much to write about. I guess I could copy some stuff off the internet or reproduce information from other newsletters or brochures but I try to keep ‘Still talking’ relevant to our particular needs in NSW.

A few people have asked, ‘What happened to the humour?’ I suppose I could have done a couple of pages this month but then we would be turning it into a jokes mag. Not a bad idea I hear you say, but it would be inappropriate for a newsletter such as this. However, Blanche Piacun of Emu Plains sent in a couple of jokes. One of which goes:-

A lady had two female parrots which kept saying, ‘We are two prostitutes out for some fun’.

She became worried and embarrassed when people visited, so she went to the local church and told the priest that all her parrots would say was, ‘We’re a couple of prostitutes out for some fun’.

The priest said, ‘Don’t worry, I have two male parrots who say their prayers and use the rosary beads. Bring your birds and I’m sure mine will reform them’.

Next morning the lady brings her parrots and the first thing they say is ‘We are two prostitutes out for some fun’.

The male parrots look at each other and one said, ‘Put away the rosary beads and stop praying. Our prayers have been answered’.

A.T.Krasnodebski

WHO TO CONTACT


FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, 111 Station St, Petersham 2049. Phone 02-9560-2852

FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Des Nicholson, PO Box 58, Richmond, NSW 2753 Phone 02-4578-1415

FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowing Street, WOOLLOOMOOLOO, PO Box 572. Phone 02-9354-1900. Fax: 02-9357-2876

Or contact the Social Worker at the hospital you will be attending.


APOLOGIES - Pat Rogers, Joe Perz, Janet Berghammer, Clarissa Chaloner, Tony Krasnodebaki, Josephine Bluett, Faith Green, Alan & Pat Dawson, Don Newby.

PRESIDENT Brian Gardner in the chair, the meeting started at 11am. The Annual General Meeting was held as it was postponed last month due to illness. The General Meeting was then resumed.

The President welcomed Newcastle visitors D and N Eyre.

The minutes of the last meeting as appeared in the newsletter were taken as read.

Moved Noel Bluett, seconded Carol Gardner.

SECRETARY/ TREASURER'S REPORT - March 2003

MEMBERSHIP

There are still some 40 members who have not paid their subscription for 2003 and I would appreciate advice from this meeting as to how long we should continue to provide the newsletter etc to such unfinancial members.

Ms Kate Hudson has replaced Ms Angela Firth as the Speech Pathologist at Bathurst Base Hospital and we hope she will be able to advise us of any interesting happenings in that area.

AUDITOR - LARYNGECTOMEES ASSOCIATION

Lance Dowlie & Co., our Accountant/Auditor has advised that 'a strategic business decision has been made that their firm will no longer perform audit work' and as such they intend to resign as our auditor effective from the date of our Annual General Meeting. We will need to seek another auditor in time but as there could well be a new Secretary/Treasurer in 2003/04 I think it best to defer such a search for a new auditor for a few months.

PUBLIC LIABILITY INSURANCE

Our Public Liability Insurance Policy has been renewed for 2003 and the cover remains at five million dollars. Our broker advised that it is not realistic to try to get cover at a lesser amount. The policy covers public liability for ourselves and all our branches and the premium has been reduced by some $36.00.

CORRESPONDENCE

1. Lance Dowlie & Co. Resignation as our Association's auditor as they are ceasing audit work.
2. Mrs Janet Berghammer. Advising of her election as President of Southern Districts Branch. Also seeking a supply of forms and 'You Can Say That Again' booklets.
3. Commonwealth Bank. Account for $30.00 for the supply of a list of Term Deposits to our auditor.

5. Family of late Stan Morley. Thank you for expression of sympathy.

INCOME & EXPENDITURE 1/1/03 TO 17/3/03

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Moved Carol Gardner, seconded Lilah Walton.

WELFARE OFFICER'S REPORT - Lilah presented her report. Unfortunately I haven't received a copy for this issue of 'Still talking'.

Moved John Chaloner, seconded Margaret Silver.

GENERAL BUSINESS - The President has been in touch with Sergeant Rob McKenna from Frenchs Forest Highway Patrol regarding laws for the use of hand held devices such as the Servox. The Sergeant is on the board of the State Traffic Coordinators and will attend a national conference in April. He will raise the matter there and any decisions will apply nationally.

A letter was read from Tom Kelly from Port Macquarie. Tom cited the example of manual gear change as a case of lacking a hand off the wheel.

John Chaloner reported a quiet month and no report was presented.

Lilah Walton represented the Association at the Volunteer service at the Uniting Church at Bexley.

Get well thoughts were sent to all our sick members. Eric Smith was one mentioned.

Next meeting will be 16th April 2003. At Strathfield.

The meeting was closed and lunch was enjoyed by all.

NB There was no Western Districts report this month.

VALE

It is with regret that I have to report that the following members are deceased and we extend our condolences to their families and friends.

Mr Sid Lowe of Alexandria
Mr David Scuban of Mascot

NEXT MEETING

The next meeting for the Laryngectomees Association of NSW will be held on Wednesday, 16th April, at the Uniting Church Hall, Carrington Avenue, Strathfield, at 11 am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.

Laryngectomees, Friends, Families, Professionals all WELCOME.
PALLIATIVE CARE

WHAT IS IT?
When a person is suffering from an illness such as cancer, and their illness will no longer respond to treatment, they can receive a special kind of care called palliative care. The word "palliate" means to alleviate without curing.

WHAT DOES IT AIM TO DO?
The main aim of palliative care is to provide the patient and their family with the best quality of life. Coping with a terminal illness will obviously bring with it many different kinds of problems such as physical pain and spiritual or emotional problems. Palliative care not only provides medical services but also a support network for the patient and their family and friends. It can help to ease the physical pain and also refer the patient to specially trained palliative care workers such as chaplains and counsellors who can help the patient to deal with other more personal spiritual or emotional problems they may be facing. Palliative care also tries to help the patient's family and friends during this difficult time. They too will have particular problems to cope with. They will need to be prepared for the eventual passing away of their loved one and they may also need help and support during the grieving process.

WHO PROVIDES PALLIATIVE CARE?
Because the patient can receive care from a range of medical and other services, the people providing the care need to coordinate as a team working together with the patient. The kind of people involved in palliative care services include doctors, nurses, chaplains, carers and volunteers. Family members can also play an important part in this team. All of these people consult with the patient to make important decisions such as the kind of care that the patient would like to receive, the best time to begin care, where it will take place and who will be involved. Palliative care aims to maintain the person's independence by including them as much as possible in decision making related to their care.

WHAT KIND OF SERVICES ARE PROVIDED?
Many different services are available for the benefit of patients and their families such as medical care, nursing, spiritual guidance, loan of equipment, physiotherapy, occupational therapy, day care, counselling, diet advice, bereavement support and social workers.

CAN PALLIATIVE CARE BE IN YOUR OWN HOME?
The patient can choose where they would like to access palliative care. Depending on their circumstances a patient may prefer to be cared for in their own home. Hospitals and other types of medical institutions may be rather threatening to some people. Some people may prefer to stay at home because it may be easier to continue their usual way of life with fewer disruptions and they may of course feel happier and more comfortable at home in their normal surroundings. They may feel worried about losing their independence if they go to a hospital or similar institution where they may feel more dependent on others. For older people a hospital may be particularly difficult to adjust to as everything is unfamiliar.

However, people who are unable to continue living at home because they don't have assistance from family or friends, or are too frail to look after themselves, may prefer to receive palliative care in a nursing home, hospital, hospice unit or other health care facility. The choice is up to the patient and they can discuss this with the people involved in their care.

Continued Page 4
Continued from Page 3

WHAT IS A HOSPICE?
This is a place where specially trained doctors, nurses, or other health workers care for people who are terminally ill. Sometimes a person can go into a hospice for just a short time to give their carers a rest or receive medical attention and have their symptoms eased, and return home again.

WHEN IS PALLIATIVE CARE GIVEN?
This is discussed with the patient. As the aim of palliative care is to help the patient remain in control of their life, important decisions such as these are made in cooperation with the patient who may prefer to have palliative care at the beginning of their illness or later in the course of the disease.

WHO CAN GET THIS KIND OF CARE?
Anyone can receive this kind of care. It doesn't matter what race, culture or background a person comes from or what religious beliefs a person has. Palliative care aims at providing for the special needs of people from non English speaking backgrounds and indigenous people. If a person comes from a particular culture or belongs to a particular religion for which there are special needs, palliative care can provide assistance.

HOW CAN I GET PALLIATIVE CARE?
A person’s doctor can give them a referral or it can be arranged through a hospital or community based palliative care service such as the ones below.

WHERE CAN I GET MORE INFORMATION?
Further information can be obtained from the State or Territory Palliative Care Association listed in the 'Contact Us' area of the following website:

www.pallcare.org.au

Or contact:
The Palliative Care Association of N.S.W
153 Dowling Street
Woolloomooloo 2011
PO Box 572
Kings Cross, 1340
Tel (02) 9334 1891

www.palliativecaresw.org.au

NORTHERN RIVERS BRANCH

Our Xmas party was held at 'Maggie Moore's' on Tuesday the 10th December, it was well attended, however it was sad to see a number of members absent due to ill health, apologies were received. To make up for this we welcomed new members Norm and Irlee Gray from Ballina.

The party was made colourful by the attendance of Brian and Carol Gardner. They were both helpful in answering questions asked by members, also by the amount of laughter, I think Brian’s humour was appreciated. Thanks again Brian and Carol for attending.

The Xmas raffle was drawn. First prize: a Christmas Hamper drawn by Carol, went to Charlie Scotcher of East Lismore. Second Prize: a Wine Cask drawn by Brian, was won by Ray Wynne of Goonellabah.

It is with sad regret we advise the loss of one of our members, Frank Corcoran. Our sympathies and condolences to partner Nora and family.

Our next luncheon meeting will be held at 'Maggie Moore's' in March.
INAGURAL EMAIL ISSUE

Not that many subscribers have elected to receive their newsletters by email, this is at least a start. In a couple of years I imagine it will increase to a sizeable percentage of the total each month. Most of the initial recipients are Speech Therapists, I guess that is because they have occasion to use email in their job.

Next year I anticipate that the Association will offer a discounted membership fee to encourage members to take 'Still talking' by email and to distribute the savings achieved in reduced postage and stationery.

The composition of the committee remains the same yet again, so we can breathe easily until next year. It will probably be a very dramatic wrench when there is an eventual changing of the guard. That is why we are again asking members to put themselves out and understand any position with a view to taking it over in the future. This situation can't go on forever, especially if a number of people withdraw from the committee in the same year, which could lead to a collapse of the Association.

A.T.Krasnodebski

OFFICE BEARERS 2003

President: Brian Gardner, 4 Mersyln Rd, BELROSE, 2085. 02-9452 2858
Vice Presidents: Noel Bluett, 154 Grenville St, CHATSWOOD 2067. 02-9419 5527
John Chaloner (see below)
Secretary/Treasurer: John Nicholson, MBE, PO Box 58, RICHMOND, 2753. 02-9578 1415
Minister Secretary: Mrs Mary Halliburton, 94 Carmen Drive, CARLINGFORD, 2118
Speech Aids Co-ordinator: John Chaloner, 111 Station St, PETERSHAM 2049. 02-9560 2052
Welfare Officer: Mrs Lilah Wilton O.A.M. 128 Baker St, KENSINGTON. 2033. 02-9263 2550
Editor: A.T.Krasnodebski, PO Box 232, COUNCIL OF NSW. 2753
WHO TO CONTACT

FOR SPEECH AIDS, BATTERIES PARTS AND ADVICE ON REPAIRS - John Chaloner, 111 Station Street, Petersham 2049. Phone 02-9580-2852
FOR STOMA COVERS, SHOWER SHIELDS, STOMA COVER MATERIAL AND WELFARE MATTERS - Dee Nicholson, PO Box 58, Richmond, NSW 2753
Phone 02-9578-1415
FOR ACCOMMODATION ASSISTANCE WHEN NEEDING OUT-PATIENT TREATMENT AWAY FROM HOME - Cancer Council of NSW, 153 Dowling Street, WOOLLOOMOOO, PO Box 572. Phone 02-9334-1900. Fax: 02-9337-2676
Or contact the Social Worker at the hospital you will be attending.
MINUTES


APOLOGIES - Patricia Lamont, Pat Dawson, Jim Knight, Des and John Nicholson, Pat Rodgers, Clarissa Chaloner, Faith Green, Margaret Silver.

PRESIDENT Brian Gardner in the chair, the meeting started at 11am. As Secretary/Treasurer John Nicholson was absent due to family illness the Annual General Meeting was postponed to next month and the February monthly meeting was held.

Present were 21 comprising 14 laryngectomees and 7 non laryngectomies. The Secretary/Treasurer's report could not be given as he was absent as shown above, but it is included below.

SECRETARY/TREASURER'S REPORT - February 2003

MEMBERSHIP

We welcome the following new members and we hope that we may see you at one of our, or one of our branch meetings:

Mr Paul Rose of Rose Bay
Mr Harold Knight of Dubbo
Mr Paul Romero of Villawood
Mr David McClymont of Laurieton
Mr Barry Glass of Bega

Mr Peter Beasley of Watson, who died recently, was one of the original members of the Canberra group and he will be sadly missed by the members of that great group of laryngectomées and their families.

SUBSCRIPTIONS

At this time there are still about 60 members who have not forwarded their subscriptions for 2003. We would appreciate payment please members.

CHRISTMAS CARDS - A THANK YOU

A great number of members were kind enough to send our Association Christmas cards last December and I thank them for being so thoughtful - they were very much appreciated.

CORRESPONDENCE

1. Newsletters from Victoria, Queensland, South Australia, New Zealand and the UK.
2. IDEAS Inc. Seeking update on our Association for their directory.
4. Mrs P Willoughby of Mt Gambier. Donation in memory of her late brother - Harvey Ploenges.
6. Mr John Chaloner. Seeking OK to purchase a Griffin Tru Tone voice aid for use by Neville Porter.
7. Cancer Advocacy Network Australia. Advising of proposed operations and asking if we would care to join them.
8. Mrs Beryl Darlington. Thank you for flowers sent by our Association.
10. Otago District Health Board, NZ. Order for shower shields.
11. NSW Police. Concerning breath testing of laryngectomées. Certificate issued by a Medical Practitioner should be carried. Letter will be reprinted in 'Still talking'.

INCOME & EXPENDITURE 1/1/03 TO 18/2/03

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WELFARE OFFICER'S REPORT - Happy, healthy, New Year all! This is the first meeting for 2003 and my sincere wish is that a brand new committee is elected because we older people who are committee members wish to sit back and pick fault with you younger people. Judging by reading the Queensland newsletter they are having the same trouble. Apparently, now that you are over your operation and back to normal, you don’t give a damn about your fellow larynx-to-be. Don’t make the excuse, ‘I wouldn’t know what to do’. How do you think we learnt? Trial and error. But at least we oldies are here to give assistance if required; something that, when I started, was not available. Don’t think about it, JUST DO IT.

During our ‘break’, some of our members have died, which our Secretary will have in his report, we send our heartfelt sympathy to all the families. With regret I report the death on Monday, 17th February of Jack Darby. Jack and Jane who lived at Glendon used to travel down to Kimberlili every year to attend our Christmas party and to deliver the hand turned wooden gifts he made for our yearly raffle. To Jane and family we send our deepest sympathy; Jim Knight is in R.P.A. Hospital and improving slowly from a heart operation. Best wishes for a speedy recovery Jim. Anybody else who is not on the ‘not so hot’ list, hurry up and get well. Lilah Walton

Moved Pat Halliburton, seconded Carol Gardner.

Speech Aids Co-ordinator, John Chaloner reported a quiet period with nothing to report.

GENERAL BUSINESS - Tony Krasnodebski brought up again the use of the Internet by those able to do so to save money on postage and help the Editor with his workload. He had some replies to his queries as to those who could use the Internet but as these people have not given their Internet addresses he could not go any further.

Alan Dawson suggested that there be assistant office bearers to help those in office. There has been concern expressed that the burden, particularly for our hard working and unwell Welfare Officer is too much and
MINUTES CONTINUED...

needs to be shared. This is to be discussed in more detail at the General Meeting. Appeals were made for others, perhaps younger, to consider positions in the future.

Noel Bluet raised the question of police fining laryngectomyees for using one hand for parking and not on wheel when driving. Legislation has already been passed in Victoria to allow this and Brian Gardner is to approach the Police Commissioner here to try and clarify the situation in NSW. Russell Green pointed out that it is still advisable to try to keep both hands on the wheel as much as possible even if it does limit speech. Carol Gardner then mentioned a one-armed friend who was able to successfully get his licence and drives competently.

Meeting closed at 12pm and a light lunch was enjoyed by all while we caught up with all the holiday news.

Next meeting will be at Strathfield on March 19th.

WESTERN DISTRICTS NEWS - February 2003

The new year began on a sombre note with the death, in mid January, of our long standing President, Stan Morley. Alan Dawson has written a tribute to Stan which appears elsewhere in this Newsletter. Also the death occurred, in late January, of popular member Fred Daniel.

To wives, Helen and Shirley, we extend our deepest sympathy. At the February meeting a minute's silence was held in memory of the two.

The February meeting was also the A.G.M. and the new committee for 2003 is as follows:

President
Vice-President
Treasurer
Secretary
Assistant Secretary
Minute Secretary
Social Secretary
Welfare Officer
Committee Members

Ron Carlin
Kevin Kelly
Alan Dawson
Pat Halliburton
Mary Halliburton
Pat Dawson
Peg Fazakerley
Eric Smith
Eric Roper
Ron Fazakerley
Marilyn Ploeges.

A bus has been arranged for a barbecue with the Wollongong branch at the Woronora dam on 22nd April.

LETTERS TO THE EDITOR

Dear Tony,

On 10/1/2003 our President of Western Districts Branch, Stan Morley, passed away after a long illness.

I first met Stan in 1986 when we started our Branch. In February 1990 Stan was elected President and has held that position unopposed until his recent death.

He was a foundation and life member of our branch and held in the highest regard by everyone who knew him.

The position of President he carried out most effectively and with distinction, especially when asked to represent our Association at any functions. One of his best assets was diplomacy and that made him a very special person and will be very sadly missed.

On behalf of all members I would like to tell Helen and the rest of the family Stan will always be remembered as a gentleman and a good guy. May he rest in peace.

Kindest regards from Pat and me.

Alan Dawson

BREATHE TESTING

The NSW Police Traffic Services Branch have replied to our enquiry regarding the position of laryngectomyees who are stopped for random breath testing. Here is the text of a letter dated 19th November, 2002.

Dear Sir/Madam,

I refer to correspondence received from Mr John Chaloner on 5 November 2002, regarding the Police's position in relation to breathalyser testing of Laryngectomyees.

It is recommended that your members carry a Certificate issued by a Medical Practitioner or Specialist to confirm their physical condition and produce such Certificate to Police should they be stopped for the purpose of undergoing a breath test.  

Cont'd Page 6
BIG DAY OUT

Big Tobacco is forever mouthing platitudes about how it has changed its ways and that it is concerned that young people shouldn’t take up the smoking habit. That, of course, is a load of rubbish as evidenced at this year’s Big Day Out on the Australia Day weekend.

Apparently Peter Stuyvesant secured exclusive rights to selling cigarettes at the event in “chill out” tents using a clothing brand named DWA as a front through their agents Peer Media Group.

Adam Zammit of the Peer Media Group was quoted as saying “Good creative thinking is what brands need more of”, which no doubt is reassuring for Imperial Tobacco but perhaps a little distressing for the parents of teenagers attending the Big Day Out.

SMOKING AND ACID REFUX

Dr Reza Shaker, who has been mentioned in this newsletter previously for developing an exercise to aid swallowing, along with some colleagues in Milwaukee, USA, have established that cigarette smoking affects the muscle reflex that protects airways from gastric reflux damage.

Injecting water into the pharynx activates the pharyngoglottal closure reflex which, along with other reflexes, prevents aspiration and closes off the vocal chords when the water enters the pharynx. However, a study of smokers and non-smokers has shown that smoking cigarettes adversely affects this reflex and may have implications in the cause of reflex-related respiratory problems in smokers.

Whether smoking somehow damages the nerve endings that trigger the reflex mechanisms or if nicotine or one of the other many components of and additives to cigarette smoke causes the effect is uncertain so further study into the phenomenon is necessary.

Meanwhile, another possible cause of how we might have acquired laryngeal cancer has been identified and hopefully further research will help prevent some future laryngectomies having to be performed.

VALE

With regret we report that we have advised that the following members are no longer a part of our Laryngectomy Association:

Mr Greg St John
Mr PH Lloyd
Mr W Brinkman
Mr John Supple
Mr Peter Beasley
Mr V McGregor
Mr FA Daniel
Mr R Kissick

of Northmead
of Parramatta
of Killeen Bay
of Lalor Park
of Watson
of Grafton
of Plumpton
of Emu Plains

NEXT MEETING

The next meeting for the Laryngectomee Association of NSW will be held on Wednesday, 19th March, at the Uniting Church Hall, Carrington Avenue, Strathfield, at 11 am.

There is parking on site and it is also a short walk from the Railway Station.

The meeting will be followed by a light luncheon.
Laryngectomees, Friends, Families, Professionals all WELCOME.
CAN AUSTRALIA

On February 4th, 2000 an international grouping of people from governments, cancer treatment and research organisations along with cancer patient support and advocacy groups met in Paris to discuss ways to improve cancer treatment and research. The result of this meeting was "The Charter of Paris Against Cancer" with 10 articles relating to various elements of cancer prevention, treatment, care, patient rights, research and quality of life.

The parties' aims included strengthening the position of the cancer patient as an active participant in the fight against cancer and promoting the principles of inclusivity, where the patient is fully informed about the disease and treatment options. Plus more collaboration between patients, health care professionals and scientists, leading to a more holistic approach to cancer care with an anticipated advance in standards of care and survival.

The parties recognised that the physical and emotional effects of cancer can be significant, and exacerbated by the side effects of treatment. They realise that there should be an increased commitment to quality of life issues in the fight against cancer, regardless of the stage of the disease or the prognosis, including supportive and palliative care.

February 4th was nominated as World Cancer Day and this year the day was used to launch a new cancer organisation called Cancer Alliance Network Australia or CAN for short. The former NSW Premier and Federal finance minister the Hon. John Fahey, who is a lung cancer survivor, officially launched CAN. Other speakers gave short talks including Professor Lester Peters who released a report entitled "Optimising Cancer Care in Australia" by the Clinical Oncological Society of Australia, The Cancer Council Australia and the National Cancer Control Initiative.

CAN will be a national organisation of consumers and carers, clinicians and policy makers working together on shared issues of concern. They hope to improve the lives of people affected by cancer along with their families and carers by advocating on cancer-related issues in the public and political domains. CAN intends to:

- Raise the profile of cancer patients nationally
- Identify issues and advocate for optimal care
- Network in partnership with a wide range of stakeholders
- Facilitate a cultural change in the community
- Provide a national forum for discussion on cancer-related issues

How much relevance all of this has for the laryngectomee community remains to be seen. Hopefully CAN will be able to achieve the aims set out in the "Charter of Paris Against Cancer" and make the cancer industry more user-friendly for all concerned, particularly anyone diagnosed with cancer in the future. However, as a laryngectomee I consider myself cured of cancer and therefore face a completely different set of issues than the person fighting cancer at present. Anyway, good luck to them and should you want to learn more about CAN, you can visit http://www.canaustralia.org/ bearing in mind that it is a brand new site. If you would like to read the "Charter of Paris Against Cancer" visit http://www.can-survive.org/our_charter/charter_paris.html.
Hi, my name is Don Newby and I am in my seventies. In 1980 I was diagnosed with throat cancer and had a tumour removed followed by radiation, 3,600 units in the microwave. They had to stop treatment at one stage as it could have killed me off.

After the treatment it became harder to breathe as I was suffering from laryngeal radio necrosis, so in July 1988 I had a tracheostomy that made me a total neck breather.

The "tracheo" I'm fitted with is a 'Shiley' size 10mm that has a removable inner tube so it can be cleaned to remove any mucous obstruction and it has a toggle grip so it can lock in. I originally had an 8mm but it started to leak around the stoma so I jumped up in size. They only guarantee them for 28 days, but I always have 3 soaking so I change the whole unit daily.

I buy the tracheo units from Melbourne. They are made in America, cost $58.00 and are called 10CFN's, which is 10mm in diameter, cuffless and fenestrated tracheostomy tube. The outer is fenestrated and the inner is straight. I place my finger over the end of the tube, close off the air and talk from my oesophagus. I still have the same symptoms as a lary, crusting, weeping, it all depends on the weather and what I eat. If I drink a cup of chino or have beetroot, it weeps all over my tape and stains it. I make my own tapes and have ends with velcro.

My throat opening is closing up, and now is only about 2mm. They told me this would happen, but it's going okay after 14 years. I do not wear a stoma cover as it restricts my breathing, it would have to be made out of chicken wire. Not only that, I am unable to have an anaesthetic as they can't fit a tube down me. I had the tracheo fitted with a local anaesthetic, had my kidneys done under local and had a knee replacement the same and have had plastic surgery on my head.

Cont'd from Page 3

It might be noted that in cases of obvious physical impairment induced by the over indulgence of intoxicating liquor, action could still be taken under the alternative charge of 'Driving Under the Influence'. Should one of your members receive injuries in a motor vehicle accident and seek hospital attention, the present legislation enables a blood sample to be obtained from that person and should this prove positive, he/she could still be charged with 'Prescribed Concentration of Alcohol'.

Signed, R.A. Sorrenson, Assistant Commissioner, Commander.

Of course, none of our members would go as far as to drink and drive. Would they?
A NEW YEAR KICKS OFF

This could prove to be quite a testing year for our Association and I encourage as many members as possible to attend the February meeting as it is shaping up as a momentous occasion. Will it be the start of a 'brave new world' or the first step on a slippery slope?

Next month will see the first copies of 'Still talking' being delivered by email to those who checked the YES on the renewal section of the November newsletter. It is hard to know whether embracing all this new technology will help strengthen the Association or accelerate it's decline but with the inevitable generational change I reckon it has to be the only way to go.

The next step will be to try and set up some sort of chat room on the website www.stilltalking.org.au, hopefully by the end of this year. I'm not sure that will meet with much success as there has never been much in the way of communication from the membership but then we will never know unless we try. Anyway, good luck in 2003.

A.T.Krasnodebski
A PRESIDENTIAL DIARY

Sat 30 November, 2002
The Association Christmas party was held at the popular Kirribilli RSL. Attended by 38, including members and their guests. A strong contingent from Western District was also present.

Tues 3 December, 2002
The President, and his lovely wife, together with the effervescent Lilah Walton, represented the Association at Western District Branch Christmas party at the Dundas Valley rugby Club. It was a great day, great venue with excellent food, including "Paul" the singing barman/waiter. Lilah was back to her best, telling everyone what to do and how to do it. She was also seen leaving the venue with a couple of shopping bags full of raffle prizes. However, she did not even compete with Helen Morley and Pat Dawson who had to hire a patechnicon van to accommodate their trophies. I wonder if their luck had anything to do with the fact that they were in charge of same. It was good to see Beryl Darlington there also. She was also seen sneaking out carrying lots of shopping bags.

Tues 10 December, 2002
The President and his lovely wife continued the Christmas cheer by attending the Northern Rivers Branch Christmas party luncheon held at "Maggie Moore's Bistro". A great day had by all and it was pleasing to renew old acquaintances and meet new friends.

I sincerely apologise for not attending Hunter Valley's Christmas function. Unfortunately, it was on the same date as Northern river's day, and their invitation arrived first and I accepted theirs first. Similarly with the St Vincent's function, theirs was on the 11th, the day after Lismore, and obviously we could not get back to Sydney in time to attend.

Carol and I hope you all have a happy and prosperous New Year. See you all at the AGM on 19/02/03.

Brian Gardner, President

WINNERS OF THE ANNUAL CHRISTMAS RAFFLE DRAWN AT THE LARYNGECTOMEE ASSOCIATION CHRISTMAS PARTY ON 30/11/02

First Prize: Wall Clock
John Coverdale, 23 Bellevue Ave, Denistone, 2114.

Second Prize: Desk Clock
John Lettice, 4 Kogil St, Narrabri, 2390.

Third Prize: Salt and Pepper Mills
B. Barwell-Cook, 15 Kew Rd, Laurieton, 2443.

Fourth Prize: Dip and Biscuit Platter
Kevin Marshall Kelly Jnr, 43 Sly St, Revesby, 2212.

The grandson of well-known Western District member, Kevin Kelly, who was at the Christmas party to accept the prize on behalf of his grandson.

Fifth Prize: Wood/Tile Platter
Vic Bellotti, 47 Moana St, Woy Woy, 2256.

The Association would like to sincerely thank our member Jack Darby of Glendon for his continued donation of his beautiful hand-carved woodwork, the artistry of which makes these magnificent prizes a treasured trophy by the ultimate prize-winners. Well done Jack!!

VALE STAN MORLEY
I am sorry to have to relate that Stan Morley, President of the Western Districts Branch, died in Westmead Hospital on 10th January, 2003 after a long fight with a recurrence of cancer. Our sympathies and condolences go to his wife Helen and their family.
humour

ENGLISH COUNCIL HOUSING COMPLAINTS

* My bush is really overgrown round the front and my back passage has fungus growing in it.
* ......it's the dog's mess that I find hard to swallow.
* I wish to complain that my father hurt his ankle very badly when he put his foot in the hole in his back passage.
* .....and their 18 year old son is continually banging his balls against my fence.
* .....50% of the walls are damp, 50% have crumbling plaster and the rest are just plain filthy.
* The toilet is blocked and we cannot bath the children until it is cleared.
* Our lavatory seat is broken in half and is now in three pieces.
* I want to complain about the farmer across the road; every morning at 6am his cock wakes me up and its now getting too much for me.
* The man next door has a large erection in the back garden, which is unsightly and dangerous.
* Our kitchen floor is damp. We have two children and would like a third so please send someone around to do something about it.
* Please send a man with the right tool to finish the job and satisfy my wife.
* This is to let you know that our lavatory seat is broke and we can't get BBC2.

It's always darkest before the dawn. So if you're going to steal the neighbour's newspaper, that's the time to do it.

BIOTECH CIGARETTES

Late last year, researchers at the University of California who were going through internal documents of the tobacco companies that were made available under the nationwide tobacco settlement, discovered that Philip Morris experimented with genetically engineered tobacco to reduce nicotine levels in cigarettes.

Apparently, in 1986 Philip Morris paid $1.5 million to a biotech company that is now a subsidiary of Monsanto to create a low-nicotine cigarette. The experiment was a failure, but Philip Morris continued trying to develop a low-nicotine cigarette as they think that the public perceive low-nicotine cigarettes as being healthier, even though they are not.

LARYNGECTOMEE SUPPLIES, available from Lilah Walton:

Stoma Material; $7 per metre.
Shower Shields; $30 each.
Stoma Covers; $4 each.
These are prices for members, postage is extra.

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