



May 2026 Newsletter

Our mission is to provide a supportive and informative environment for people with lung conditions, as well as their families and carers.

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[Canberra Lung Life Support Group | Facebook](#)

NEXT MEETING: Thursday 11 June 2026
10:15 am – 12:00 noon
Weston Creek Labor Club
Teesdale Close, Stirling ACT 2611

A member of Canberra Memorial Parks will be speaking on the options available for end of life planning

Your editor, Geoff Cox

Your capable editor, Geoff Cox, has resigned from being the editor of the newsletter. He has been editing it for 7 years and has created a newsletter that is not only informative but also included personal stories and photos for a lighter touch.

Geoff is now having some medical issues requiring various treatments and occasional travel to St Vincent's Hospital in Sydney.

So he feels that he no longer has the focus to be responsible for the newsletter. We wish him well and thank him very much for his years of being the editor of our newsletter.



Geoff has given us some details of his situation now – you'll find it later in this newsletter.

May Meeting

Unfortunately, there were only three people present at the meeting. There were a few apologies - luckily the proposed speaker on VAD had to postpone her date. The small number did allow for a good discussion about Lung Life issues.

Due to the passing of a dear friend in Adelaide, Marina and Val were unable to attend this meeting and Caroline Polak Scowcroft agreed to run it. It concentrated mainly on organising the up-coming Lung Foundation Australia's **Lung Health Awareness Month** stall at Belconnen Mall on Friday May 22.

Lung Health Awareness Month and our stall are aimed at raising awareness of the prevalence of lung disease in Australia and the support available to people with such conditions.

Caroline raised matters of interest to Lung Life which were included in the annual report for 2024-5 of the Healthcare Consumers' Association of the ACT, the 2025 Impact Report of LFA; and the Canberra Health Services booklet titled When Someone Dies. They included topics such as:

- A guide to finding the right health service in the ACT,
- planning for your future health care,
- advanced care planning, and
- a practical guide for carers, family and friends on what to do when someone dies or for people who are dying.

Check it out on [HCCA Annual Report 2024-2025 - HCCA](#) ; [Our Impact - Lung Foundation Australia](#) and [When someone dies: A practical guide for carers, family, friends and for people who are dying](#)

We spoke about the difficulty some people have in attending meetings but could offer no definitive solutions. Meetings via Zoom are not suitable for everyone. There is also a high attrition rate for the smaller groups, who are run by volunteers who are ageing and becoming increasingly less mobile. It is a topic we need to look at further.

From Geoff, our retired editor

Seven years ago, Geoff had a double lung transplant. He has a lung condition called **alpha 1 anti-trypsin deficiency**. For him, it is caused by a genetic defect in the liver which he has had all his life but it only became obvious in his later years.

This defect in the liver affects the lungs so in 2019, Geoff had a lung transplant. All went well.

Now he brings us up to date.

Transplant really is a journey with some similarities and many differences for all of us. Overall luck (and fantastic medical work) has ensured that I've done well. There is no doubt I would not have lasted much longer without having one.

Over the last 7 years I have been able to climb mountains, ride my bike, do some travel and generally be part of life. Most importantly I have had time with my family.

Having said this I reached my peak about two or three years ago and for various reasons I'm now descending the other side. Like all transplant patients the drugs keep us alive but also cause us problems. The main problem is that we have low immunity.

I was good last year up until towards the end of the year. I got away on a number of trips, but more lately trips away have been cancelled.

On top of my primary conditions I have a few new ones and skin cancers are a constant threat. Those cut out of my lower leg keep me out of action for a long time.

So now it is probably rejection, being treated on high dose steroids which make my mind quite fuzzy. Definitely not driving.

I've made a lot of trips to Sydney lately to see the team at St Vincent's. Hard work for all involved.

I've got a trip booked to go to the Flinders Ranges in late May so fingers crossed that that trip won't be cancelled as well.

Cheers

Geoff

What is 'air hunger'? And can it be treated?

[What is 'air hunger'? And can it be treated?](#) The Conversation: March 24, 2026

Author: Clarice Tang, a member of the Thoracic Society of Australia and New Zealand, the European Respiratory Society and the American Thoracic Society.

Some people – such as those living with lung conditions or severe anxiety – experience **air hunger** frequently in their day-to-day lives.

Many conditions can cause shortness of breath (also called dyspnoea). These commonly include heart diseases and lung conditions such as asthma, chronic obstructive pulmonary disease or long COVID. Although the terms are sometimes used interchangeably, air hunger is not the same as shortness of breath. Air hunger is an extreme and distinct feature of breathlessness: **the feeling you can't get enough air or take a full breath in.**

This sensation can make people take bigger breaths or breathe faster, to try and get more oxygen. But this can actually make the feeling of breathlessness worse. Some people may also find they yawn or sigh a lot as they try to get more air.

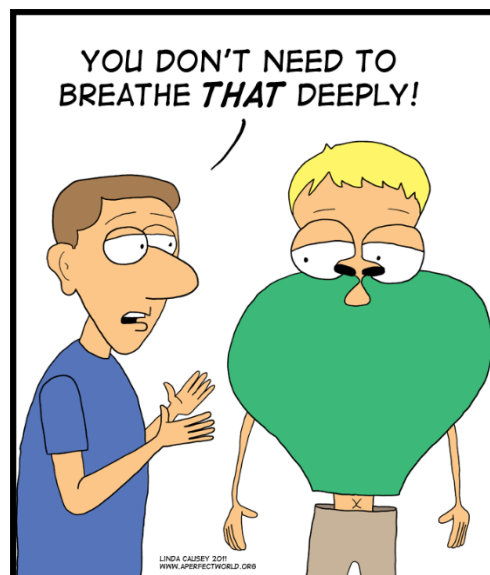
In addition to difficulty breathing, symptoms can include chest tightness, sweating, dizziness and coughing. For some people, an episode may be brief and resolve on its own. Others may pass out and need immediate medical attention to regain their breath.

What helps?

Depending on the cause, you may be prescribed medication, such as inhalers or oxygen for a lung condition. Opioids (morphine) or benzodiazepines (diazepam) may alleviate symptoms, but these would only be used in the short term, due to the risk of becoming dependent.

Apart from medications, breathing and relaxation techniques may help some people manage the unpleasant sensation. These include:

- **pursed lip breathing:** pucker your lips and focus on blowing the air out slowly, until you are able to take a big breath in. Pursed lip breathing can help you stay calm and slow the pace of your breathing.



- **mindful breathing:** find a relaxed resting position where you can draw your attention to your breath and focus on regaining control of your rate of breathing.
- **timed breathing:** while moving, time your breath with your body. For example, focus on breathing out when stepping with your right leg and breathing in when you step out with your left.
- **the cool fan technique:** blow a fan (electric or hand-held) directly onto your face. The cool air stimulates the nerves in the face to reduce the sensation of breathlessness. A cool washer on your face may help create the same effect.

When to seek help

To manage air hunger episodes, you should follow your health professional’s advice about how and when to take medications. In an emergency, or if you are experiencing air hunger for the first time, always call 000.

Arboretum Visit

Val Dempsey

On the last Friday of April, we organised a visit to the Arboretum and to its Bonsai garden. We met and enjoyed a delightful lunch after which we were met by Sally, the volunteer organiser, who gave us her time to provide a snapshot guided tour of the arboretum.

Then onto the national bonsai garden where we met the gentleman who has been there for a number of years, a bonsai specialist. He showed us through the area and provided an extremely informative and interesting guided tour describing each of the trees and how they represent the Japanese bonsai themes.

We were shown a tree stump that was petrified thousands of years old and the oldest bonsai tree in Australia.



The whole day was just delightful and we will be well pleased to go back and do it again.



Bronchiectasis: Airway clearance and exercise

From www.lungfoundation.com.au

In the last newsletter, we talked about bronchiectasis - a long-term lung condition where the airways become permanently widened, leading to mucus build-up and recurring infections. This article talks about specific breathing and chest clearance exercises which can be done at home, providing a clear action plan to manage symptoms effectively.

Lung Foundation Australia recommends several airway clearance techniques designed to clear mucus from the airways, making breathing easier and reducing the risk of infections.

Active Cycle of Breathing Techniques (ACBT) involves a series of breathing exercises to move mucus from deep in the lungs to the throat, where it can be coughed out. It includes deep breathing, relaxed breathing, huffing, and coughing. This technique helps clear the airways and improve lung function.

Postural drainage uses gravity to help drain mucus from the lungs. By positioning the body in specific ways, mucus can be directed towards the larger airways, making it easier to expel. A respiratory physiotherapist can guide you on the best positions for your condition.

Positive Expiratory Pressure (PEP) devices create back pressure during exhalation, keeping the airways open and helping to move mucus towards the larger airways. This makes it easier to clear mucus from the lungs.

Oscillating Positive Expiratory Pressure (OPEP) devices, such as the Flutter or Acapella, combine PEP with oscillations to loosen and mobilise mucus. The vibrations help break up mucus, making it easier to clear from the airways.

Autogenic drainage involves controlled breathing at different lung volumes to move mucus from the smaller to the larger airways. This technique requires practice and guidance from a respiratory physiotherapist to master.

Regular physical activity, such as walking or cycling, can improve overall lung function and make it easier to clear mucus. Pulmonary rehabilitation programs often include exercise as a key component.

Staying well-hydrated helps thin mucus, making it easier to clear from the lungs. Drinking plenty of water and using a humidifier can be beneficial.

Manual techniques, including chest percussion and vibration, involve rhythmic tapping or vibrating on the chest to help loosen mucus. These techniques are usually performed by a physiotherapist. Consulting with a respiratory physiotherapist is essential to determine the most suitable airway clearance techniques for your specific condition. They can provide personalised instructions and ensure you are using the techniques safely and effectively.

By following these airway clearance techniques recommended by Lung Foundation Australia, people with Bronchiectasis can better manage their symptoms, improve lung function, and enhance their quality of life. The Lung Foundation offers detailed information on their website. Check them out on: www.lungfoundation.com.au or talk to them on [1800 654 301](tel:1800654301).

Taxi Subsidy Scheme: subsidises the transport costs of eligible individuals who are unable to use public transport due to severe or profound activity limitations.

Run by ACT Revenue Office Ph: 02 6207 0028 - Select Option 5 Email: concessions@act.gov.au

A Proactive Approach to Mental Health

by Dr Vivienne Lewis, Assistant Professor and Clinical Psychologist at University of Canberra, Canberra Weekly, Nov 2025 from Chris Moyle

When it comes to mental health most people think about what to do once things start to fall apart. But looking after your mental health is something that should start well before that. Just like your physical health, it's about what you do every day that keeps you well, not just what you do when you're struggling.

Dr Vivienne Lewis, Assistant Professor and Clinical Psychologist at University of Canberra, has the following advice: **Keep the basics in check: *Sleep, nutrition and movement are the basics of good mental health.*** It sounds simple but it's where most people start to slip when life gets busy. Late nights, skipped meals and working through lunch all take a toll on your body and mood. Keeping a regular routine helps you stay balanced and more resilient to stress.

- ✓ *Exercise* is one of the best tools for managing stress and improving mood.
- ✓ *Stay connected.* One of the biggest risks to mental health is isolation. When life gets full with responsibilities, friendships often fall away. But connection is protective.
- ✓ Make time to see your friends, even briefly, and talk about what's really going on.
- ✓ *Talk early.* Don't wait until you're in crisis to reach out. Talking to your GP, a psychologist, or a trusted friend can stop stress from building up. You don't need to have something wrong to look after your mental health. Think of it as maintenance, the same way you'd service your car or go for a check-up.

When you feel rested and emotionally steady, you're better able to show up for your partner, your kids and your friends. Looking after yourself isn't just good for you, it's good for everyone around you.

Taking care of yourself isn't selfish or weak, it's smart. Being proactive about your mental health isn't just about avoiding problems, it's about making choices every day to prioritise your own health and wellbeing.

Membership Payment

This is a voluntary payment but it helps with Lung Life costs for materials, expos and other events. Membership fee is \$20.00 pa which can be paid as a direct transfer into our Beyond Bank account. See details below or pay in cash to the treasurer at any meeting.

BSB No: 325 185

Account Name: Community Account

Account number: 04043535

Reference: please write your name in full.

