



CARD NEWS

Center for Asbestos Related Disease

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If you haven't already, don't forget to get your name on the Victim Registry!

- Forms and more information are available at:
 - The CARD
 - The EPA Information Center (501 Mineral Ave)

Dr. Whitehouse Speaks

-Dr. Alan Whitehouse, CARD Pulmonologist

For the past six months, I've been pleased to see asbestos patients in the CARD clinic since I closed my practice in Spokane. I have some observations that I hope will resonate throughout the entire Libby community. There is a lack of community cohesiveness in dealing with the asbestos situation that is very damaging, but changes could very rapidly solve many problems that will be with you for at least 20-30 years until this epidemic plays out. My thoughts and observations are below.

1. A large number of people with asbestos problems are looked at as slackers or whiners. That's the biggest piece of nonsense I've ever heard. We have about 1200+ patients, the

majority of whom have varying degrees of shortness of breath. Chronic shortness of breath or intractable coughing are devastating symptoms and can greatly impact a person's ability to function in everyday life.

2. We can get a very expensive CT scan for patients on the LAMP program but can't get a chest x-ray done. It's a very large waste of money, when an x-ray is often all we need. LAMP should allow more flexibility in their specified coverage of benefit so that appropriate health evaluations can be done that would benefit the patient as well as the LAMP program's efforts to stretch their limited dollars as far as possible.

3. The MASSA program presents as if they are providing a health assessment and many patients come from out of town because of

symptoms. They must wait several weeks to get a chest x-ray report and being many times far from Libby, return to Libby again (if possible) to go to the CARD to get a full medical evaluation. We cannot get the chest x-ray before it's sent out of town because of MASSA rules, regardless if the patient wants it to go to the CARD. MASSA is an epidemiological study and should immediately refer the patient for health evaluation including copies of all test results.

4. Health Network America denies medical care now to nearly 1/2 of the new cases. Between Dr. Black, Dr. Becker and myself, we are describing a new variant of asbestos disease due to the Libby amphibole fiber. Outside radiologists do not understand and recognize these changes many times,

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Lauren Gautreaux Shares Her Skills with the CARD

Lauren Gautreaux is a Marketing student from The University of Montana and has joined the CARD staff as an intern for summer. Lauren is thankful to be able to work in Libby, where she was born and raised and her family continues to live. She has completed three years in the Business Department at The U of M and comes to the CARD with hopes of gaining some experience in the health-services marketing arena.

Although only with the CARD for the past month, Lauren has jumped in with both feet and has already become a valued member of the team. Sharing her ideas and enthusiasm, Lauren is working on developing outreach strategies and resources to promote the CARD locally and nationally. She demonstrates great skill as she assists in the creation of the CARD's new website and is leading all components of the planning for the CARD's Open House. This summer, Lauren also plans to take in all that the Libby area has to offer, including hiking, playing softball, canoeing, and other outdoor activities.

*“Life shrinks
or expands
in proportion
to ones courage”
-Anais Nin*

Presentations Abound

CARD staff are spreading the word about the uniqueness of Libby amphibole asbestos and the struggles our community is working to overcome. Dr. Whitehouse recently presented at the annual meeting of the Montana State Occupational Medicine Association. Pat Cohan, RN and Tanis Hernandez, MSW, along with Helen Clarke of E:ABCs, will be presenting on the human element of asbestos at the U of M Center for Environmental Health Sciences' Asbestos Conference that is primarily focused on asbestos basic science research.

Dr. Whitehouse Speaks continued...

... thus denying care and coverage to patients. We have had excellent confirmation of our findings with many outside nationally renowned radiologists and chest physicians. In addition, HNA is denying many aspects of care, especially oxygen, and overriding the treating physician's decisions. The ultimate goal may be to reduce the number of patients and the cost on the HNA program to reduce the amount the bankruptcy court will require WRG to set aside for medical care. This could ultimately result in less healthcare and medical services for patients.

5. CARD has been unable to obtain long term treatment dollars for care of the patient population at CARD, which is growing steadily at about 12 cases per month. The University of Montana's promises of research dollars has yet to show any results, and Washington political promises of funds have come to naught. The community members hold the power and

have the voice to make promises and political assurances translate to action. We need to act to secure future medical needs and research happen!

6. At the top of this mess is W.R. Grace who continues to not give a damn about the disaster they have created, and continues to manipulate the situation through HNA. As a community who has been devastated by this slow motion disaster, we will continue to experience the ripple effect for many years; we have to take a no tolerance stance to the ongoing manipulation and deception of Grace.

With a latency period of 15-30 years, new cases will be appearing until 2030 in all probability. Research has great possibility to control this disease but only if the entire CARD program can be stabilized with adequate funds to treat patients at the same time freeing physicians to get on with the research. Wholesale community outcry will help solve these problems.

FYI...DPI

-by Ashley Day,
CARD Respiratory Therapist

As most of us know, there is no cure for asbestos related diseases. However, there are treatments available to improve quality of life and help prevent people from becoming very ill. Inhalers are one of the modes of treatment many people are using. Inhalers are devices designed to deliver a certain amount of medication to the lungs. Some inhalers relieve inflammation in the lungs and others may help you get more air out or take a deeper breath in. Inhalers are very important when managing a disease and using them properly is even more important.

One type of inhaler we prescribe at the CARD is a dry-powder inhaler (DPI). This is the round disk-like inhaler containing, most commonly, Advair and Serevent. Proper use of a DPI is very important in order to get all of your medication. To use a DPI you must prepare the diskus first: Hold the diskus in one hand and place the thumb of your other hand in the thumb grip. Push your thumb away from you as far as it will go until it snaps into position and you can see the mouthpiece. Hold the diskus in a level, horizontal position to prevent the medicine from falling out. Slide the lever away from you until it clicks. This action loads the medicine.

To inhale the medicine you should

turn your head away from the diskus and breathe out as much air as you comfortably can. Place the diskus mouthpiece in your mouth and take a deep, fast breath in through your mouth. Never breathe **into** the diskus. Remove the diskus from your mouth and hold your breath for 3-10 seconds and breathe out slowly. Just because you can't taste or feel the medication doesn't mean you haven't gotten a full dose. Close the diskus by placing your thumb in the thumb grip and slide the grip back toward you, over the mouthpiece. This will reset the inhaler so it is ready to use for the next treatment.



Inhalers are very important when managing a disease and using them properly is even more important.

Show your medical provider, pharmacist, or respiratory therapist how you're using your inhaler. If you are experiencing any unpleasant side-effects, or have decided to quit taking your inhaler, please contact your medical provider.

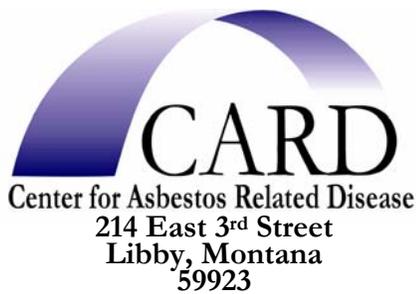
One of the most common medications we see come as a DPI at the CARD is Advair. Advair is a steroid that relieves constriction and inflammation in the airways.

Constriction is the tightening of the muscles around your airways, and inflammation is when the airways are swollen. Together, constriction and inflammation cause the airways to narrow and reduce airflow into the lungs, which may result in symptoms such as coughing, shortness of breath, wheezing, and chest tightness. You **MUST** take your Advair as prescribed to get full advantage of the medication. Advair is not a "rescue" inhaler. You will not feel instant relief. This kind of medication can take 30 minutes to several weeks before feeling any changes. Possible side effects include ear, nose, and throat irritation, respiratory symptoms, headaches, stomach irritation, and general muscle aches, but should diminish with time. If these side-effects persist please consult your physician.

When using a DPI for a steroid (i.e. Advair) **ALWAYS** rinse your mouth after using it so you don't get thrush (yeast infection of the mouth). Never shake or breathe into DPI. Never use a spacer with a DPI. Keep your DPI in a dry place at room temperature. Never place the DPI in water. Keep the inhaler out of children's reach. Never break the canister and be sure to check the date before using it.

In the next edition of CARD News we will discuss the proper use of a MDI (metered dose inhalers), and the effects that Albuterol, Atrovent, and Combivent have on the body. So stay tuned!

If you have questions or comments about this newsletter, or would like to receive it by mail:
Contact Tanis Hernandez at the CARD: tanis@libbyasbestos.org or 406-293-9274 x29.



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THE BIG CARD NEWS

CARD OPEN HOUSE SCHEDULED: FRIDAY, AUGUST 12th 2005

Now that we have settled into our new facilities at 214 East 3rd Street, we are pleased to announce that we will be holding an Open House for patients and friends of the CARD. This is a great opportunity for you to visit our new facilities and get to know our wonderful Board and Staff. It will be held on Friday, August 12th from 4:30 to 8:00p.m. Snacks and beverages will be provided and there will be a casual seating area for everyone to mingle outside. In addition to showing the film documentary “Libby, Montana,” there will also be an educational slideshow pertaining to the mineralogy of Libby amphibole asbestos via information from Unites States Geological Survey. We sincerely hope that you and your families will attend. It promises to be a very good time for everyone. We hope to see you there!