

CLAN



THE NATIONAL ASSOCIATION OF LARYNGECTOMEE CLUBS NEWSLETTER

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A WORD FROM THE EDITOR

HOME AND AWAY



For once, the Editorial Committee (aka Editor and Mrs Editor) have not been away on holiday. Sad but true. Fortunately, there is a week in delightful Dorset to look forward to in September. This issue, though, has a definite international flavour with items from India, Africa, The Netherlands and Australia. And from Canada we learn of a multi-billion dollar fine for three giant tobacco companies to compensate over 100,000 smokers.

On Target

There's also good news on the domestic front as NALC has met its fund-raising target for this year and so is able to maintain its services. A big thank you to all those clubs and individuals who have been so generous in their support. Please keep up the good work and do send more representatives to the General Committee meetings as we need to involve as many people as possible in future fund-raising.

Finally, some wry observations from the New South Wales Newsletter on how to tell if you're getting old. One we particularly like is: *it's when your back goes out more often than you do!* Keep smiling...

Ian Honeysett
Ian Honeysett (Editor)

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The views expressed by the contributors are not necessarily those of the Editor or NALC. Great care has been taken to ensure accuracy but NALC cannot accept responsibility for errors or omissions.

Deadline for issue No. 135: 1 NOVEMBER 2015

Sharks are the only animals that never get sick. They are even immune to every known disease, including cancer

To make a donation please complete and return this form to: NALC Suite 16, Tempo House, 15 Falcon Road, Battersea, London SW11 2PJ

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Cancer Cases Worldwide

The number of new cases of cancer in the world is rising, according to a new report that looked at cancer in 118 countries. Globally, the number of new cancer cases increased from 8.5 million in 1990 to 14.9 million in 2013, the study found. (The world population rose from 5.3 billion to 7.1 billion during that time.) In addition, cancer is accounting for an increasingly greater proportion of deaths: In 1990, 12% of all deaths in the countries studied were due to cancer, but in 2013, it was 15%. The researchers specifically looked at 28 different types of cancer, and found that cases from nearly all of these types of cancer have increased in the last two decades... ranging from a 9% increase in cervical cancer cases to a 217% increase in prostate cancer cases.

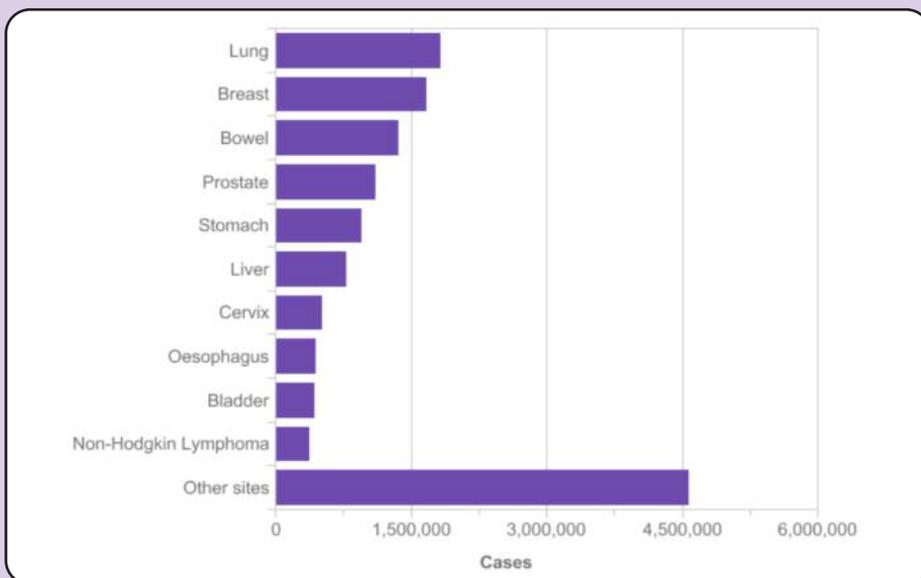
The 10 Most Commonly Diagnosed Cancers, World, 2012 Estimates (Cancer Research UK)

The only cancer that decreased during the study period was Hodgkin's lymphoma, which saw a 10% decrease in the number

of new cases between 1990 and 2013. The overall rise in cancer cases is partly due to longer life spans, since the risk of cancer increases with age. "With life expectancy increasing globally, the future burden of cancer will likely increase," the researchers said. The growing global population, increases in obesity and poor dietary habits also have contributed to the rise, they said. A particularly concerning trend is an increase in cancer cases in developing countries, the researchers said. In 2013, the rates of new cancer cases were higher in developing countries than in developed countries for stomach cancer, liver cancer, oesophageal cancer, cervical cancer, mouth cancer, and nose and throat cancer.

If you wish to see the complete article online, please click on:
www.livescience.com/51008-cancer-worldwide-increase.html

Rachael Rettner, a Senior Writer at LiveScience.com on 28 May 2015. The article was in the PLC newsletter.



How to tell if you're becoming a fossil?

Everything hurts – what doesn't hurt doesn't work

The gleam in your eye is the sunlight hitting your bifocals

You feel like the morning after, but you haven't been anywhere

Your black book only contains names of doctors

You get worried just playing cards

You go into a maze but cannot remember if you went in to cut the flowers or to find your way out

Your children begin to look aged

A dripping tap causes an uncontrollable urge

You know all the answers but no one asks the questions

You look forward to dull evenings

You need glasses to look for your glasses

You turn the light out for economy not romance

A Gracious Queen

Len Hynds recalls the day in 1953 when he was part of a Police Force Guard of Honour for the Queen. "The uniforms were terribly smart, of doeskin material and with tunics buttoned up your back, ramrod stiff. My division was 'L' and my station Carter Street and I remember the day well. The Queen stopped and spoke to several of us. I subsequently wrote the following poem."

London policemen in ceremonial dress,
All soldiers as of late,
Doeskin tunics up to the neck,
Making backbones ramrod straight.

Black belts with silver buckles,
All buttons shining bright,
White gloves and medals by the score,
It truly was a sight.

Her Majesty stopped in front of me,
And asked from where I'd come,
"From Carter Street, Your Majesty,"
I said with some aplomb.

She then pointed to my medals,
And asked where I'd served the King.
"Egypt and Sudan, Ma'am"
Not believing this whole thing.

She smiled as only our Queen can,
To put us at our ease
And passed along her honour guard,
And so graciously did please.

I had lined her route on her special day,
The last time her empire marched.
Troops from the snows and prairies wide,
Deep jungles and desert parched.

A quarter of the world's population,
Represented by soldiers there.
Then our Queen in her golden coach,
Passed regally smiling fair.

You sit in a rocking chair but can't make it go

Your knee buckles but your belt won't

Your back goes out more than you do

You put your bra on back to front because it fits better

Your house is too big but the medicine cabinet is not big enough

You sink your teeth into a steak and they stay there

Your birthday cake collapses from the weight of the candles

You long to be young again but can't remember why

From Still Talking, NSW Newsletter

Laryngectomy And The Sense Of Smell

The loss of the sense of smell (or loss of olfaction as it is also called) is one of the consequences of total laryngectomy that does not receive much attention. Nevertheless, olfaction is an important sense in daily life. For instance, if you think of smelling gas, fire, or spoiled foods to alarm you, or smelling a nice perfume, or food that is so good it makes your mouth water, it is not hard to imagine that the loss of this sense has a considerable impact on daily life.

Olfaction

The olfactory organ is located high up in the nose. This organ has elements that are able to trap odour molecules when the air flows by it. The information about the odours is then sent to the brain via the nerves and the odour is recognised. For this mechanism to work, it is essential that the air containing the odour molecules passes the olfactory organ. Normally, air passes the olfactory organ each time someone breathes in through the nose.

Olfaction after Laryngectomy

Research has shown that following a laryngectomy, people are not able to smell as well as before the operation. In a study at the Netherlands Cancer Institute, with 63 patients participating, odour tests showed that 68% of the laryngectomees in that study were considered non-smellers. The underlying reason for this problem is the absence of airflow into the nose. Since laryngectomees are breathing in and out through the tracheostoma, the air simply does not reach the olfactory organ high up in the nose. The olfactory organ itself is unaffected by the surgery. This means that when the odour can reach the olfactory organ, you will smell it. This happens for instance when the odour is literally blown into the nose, or when the odour is extremely strong or vaporising.

Rehabilitation of Olfaction

There may be situations in which it is actually an advantage not to be able to smell automatically but in most situations it would be nice to be able to smell. At The Netherlands Cancer Institute a technique has been developed that can help laryngectomees to learn to smell again. The method is called the Nasal Airflow Inducing Manoeuvre or Polite Yawning Technique. Research of the technique has shown that quite a high percentage (89%) of the participating laryngectomees were able to learn to use the technique in one therapy session. An evaluation after six weeks showed that 46% of the laryngectomees that could not smell had mastered the technique and now were able to smell again. A long-term evaluation showed that not all laryngectomees were able to carry out the manoeuvre correctly even after a longer period of time. The results of further investigations suggest that initial intensive training and using a water manometer for biofeedback, improves the results and increases the number of laryngectomees that are able to successfully use the technique. As with many things, practice is the word!

Polite yawning technique

The name of the technique already indicates the core of this method: it looks like polite yawning. By making a movement that is similar to yawning with closed lips, the oral cavity is enlarged and the vacuum that is created causes air to flow into the nose. This airflow reaches the olfactory organ and you can smell!

How to make the movement:

- Close your lips (and keep closed)
- Hold your tongue against the roof of your mouth
- In one movement, simultaneously lower your jaw, floor of mouth and tongue downwards
- Repeat the movement

It is important not to breathe in too heavily simultaneously with performing the movement. Many laryngectomees initially do breathe in during the movement simply because they are used to taking a breath when trying to smell something. It is not necessary at all and can make you dizzy.

Refined polite yawning technique

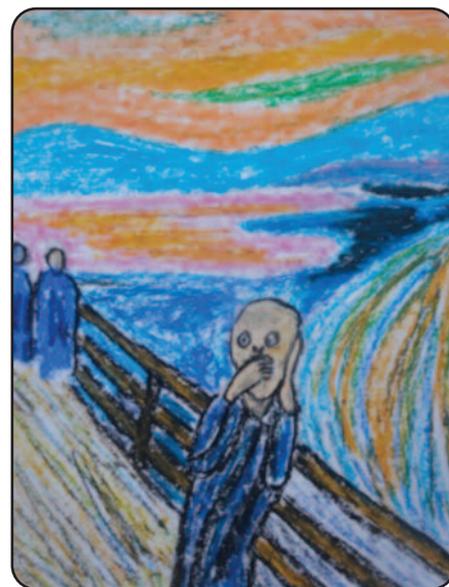
Some laryngectomees are able to learn to make the movement somewhat smaller, which is usually appreciated because it makes the movement less visible. In general, it is advised to start with the regular polite yawning at first, to develop a good feel for the movement. As a second step one can try to use an isolated pumping movement of the back of the tongue and the floor of the mouth and eliminate the downward movement of the jaw (this looks like the movement frogs and turtles make with their floor of mouth!). The key points for this movement:

- Close the lips (and keep closed)
- Hold your tongue against the roof of your mouth
- Stabilise the tip of your tongue against your teeth or against the ridge on your palate right behind your upper teeth
- Move the back of the tongue downwards (compare with tongue clacking)
- Repeat the movement

Water manometer for visual feedback

As mentioned earlier, we have found that the use of a water manometer has been very helpful to see the immediate results of the movement (the water will move towards your nose if you are carrying out the movement correctly). It will also help you to improve the movement, to make it smaller and more efficient. The manometer may be hard to make, but you can simply make one yourself by taping a plastic tube on to a piece of cardboard in a U-shape.

Corina van As-Brooks, Amsterdam, the Netherlands: published in April's edition of The New Voice published by the Laryngectomee Association of Victoria and was taken from www.webwhispers.org/news/apr2005.htm. It was included in Still Talking, the NSW Newsletter.



The (Polite) Yawn – with apologies to Edvard Munch

Cancer, not the Cancellation of Life

Pradip Kumar Lahiri from Mumbai India writes: "I lost my voice box due to cancer about 24 years back and suffered mental trauma and torture. It was difficult to believe that I had to lose something so dear and was unbearable at that time for me.

I was totally disheartened, self-repentant, demoralised especially as I thought of myself as disabled. Dr Ashok Mehta assured me that I may develop by way of using my Esophagus (food pipe). I slowly gained back my confidence and by adopting tremendous will power and dedicated practice I regained my voice back. Subsequently I took advance training from Association (AFLA) in Tokyo, in 1999 my hoarse voice was reached near normalcy.

I believe that cancer is not the cancellation of life. I have also proved that cancer is curable, if diagnosed and detected in time, followed with appropriate recommended treatment. I am now very happy and proud of new voice.

Since 1998, I am associated with Cancer Rehabilitation Clinic (CRC) at Prince Aly Khan Hospital, Mazagaon, Mumbai, wherein I started Laryngectomy Rehab. Services."

Chain Smoker

In 2008, the leading newspaper *Annand Bazar Patrika* reported:

"Pradip Lahiri was a chain smoker and used to smoke 50-60 cigarettes daily. He was young then, had lucrative job in department of Atomic Energy, used to chat with his friends and colleagues during leisure time and also having a happy peaceful family life with his spouse and two kids. His throat cancer in larynx was detected about 17 years back. Finally he had to sacrifice his vocal cords along with normal breathing system by wide range surgery, and lost his voice completely. Except for a victimised person no normal human being could realise that to lead a voiceless life would be how much painful and mental torture it would be. Initially Pradip broke down completely while facing this trauma. He was totally demoralised. With this clue he got back his confidence and by adopting tremendous will force and by carrying out hard practice for about 10-12 hours daily he got back his voice."

In 1998, when the Prince Aly Khan clinic expanded to support those afflicted by other cancers, they invited Pradip Lahiri, who had lost his vocal cords due to cancer. Lahiri had not permitted the trauma of a laryngectomy to become a barrier in his life. With practice and dedication he regained his voice through oesophageal speech: "I love my new voice because I have created it."

Prince Aly Khan Hospital with the help of JICA sent Lahiri to Tokyo, where he pursued an instructor's course. He now offers voice training at the Cancer Rehabilitation Centre along with Dr Zehra Rangwala, a qualified Speech Therapist, volunteers like Meena Kamdar (having graduation in Pharmacy) and others. Other volunteers help with imparting information, providing process of exercises needed for the patients, stoma covers and lending moral support to patients and their families to deal with therapy and to return to normal life, on post-surgery.



Volunteers at the Cancer Rehabilitation Centre of Prince Aly Khan Hospital in Mumbai. Courtesy of the Prince Aly Khan Hospital.

Giving Back

Our African correspondent, Bychance Emma, writes: "As your life changes in any way – for example being vulnerable to speech problems – it does make you stop to think about your dream goals. So if you're helped at some point, you also need to help others. Thank you all my dear friends especially Ms Kerry, members of NALC and my relatives and family members who have supported me in every situation. So far my involvement

helping youths with disabilities has given me another opportunity to build confidence in serving the community. Right is a picture representing my second activity for empowering youths with disabilities on entrepreneurship skills to help develop their business careers."

From left to right: Bychance Emma (speech impaired), Peter (blind), Florence (blind), Johnson (cerebral palsy) and Claire (physically disabled) posing for photo after a session of training on entrepreneurship skills.

Shower Shields

One of the main worries when becoming a laryngectomee is the possibility of getting water in the stoma and each day there is the prospect of that happening whenever you take a shower. The water jet can be avoided by strategically placing yourself and covering the stoma with one hand when facing the water flow but that means having to keep yourself continually aware of where you are in relation to the water.

The best way to take a shower has to be using a shower guard of some kind, like a baby's bib worn back to front. A shower shield from our Welfare Officer would be the ideal way to go; they are sturdy, comfortable to wear and allow for easy breathing when being worn. They are very long lasting except for the velcro ties, however they are readily replaced, just buy some adhesive velcro from the haberdasher or supermarket and sew on to the shower shield through the holes left where the discarded velcro was attached. The velcro can be replaced a number of times.

Wearing a shower guard makes life a lot easier especially when washing your hair, doing that one-handed can be really tricky. Buying a shower shield or making yourself one is a very good investment in time or money to give yourself peace of mind, enabling you to take your daily shower without worrying about water getting into your stoma.

from Still Talking, NSW Newsletter

If you electrically shock a person's brain, their maths skills can greatly improve for about six months!

Think of a number. Double it. Add six. Half it. Take away the number you started with. Your answer = 3



Billions In Damages

Three tobacco giants have been ordered by a Canadian court to pay billions of dollars in moral and punitive damages to nearly 100,000 smokers, in what has been hailed as an 'historic judgment' by the plaintiffs in Quebec. Imperial Tobacco Canada, Rothmans, Benson & Hedges, and JTI-Macdonald were found to have violated their general duty not to cause injury to another, their duty to inform their clients of the risks and dangers of their products, and their obligation not to mislead their clients. A Quebec Superior Court slapped the three cigarette manufacturers... which have already vowed to appeal... with damages totalling CAD \$15.5 billion (\$12 billion US), to be split among them. The ruling means that plaintiffs suffering from lung or throat cancer are entitled to receive CAD \$80,000 or \$100,000 (\$63,000 or \$80,000), while those afflicted with emphysema can receive CAD \$24,000 or \$30,000 (\$19,000 or \$24,000), plus the interest accumulated since 1998, which is when the lawsuit commenced.

To view the complete article online, please click on this link: news.vice.com/article/canadian-court-orders-three-major-tobacco-companies-to-pay-billions-in-damages

Natalie Alcoba on the Canadian Vice News website and reprinted in the PLC newsletter.

FUNDING UPDATE

NALC has been an associated charity of Macmillan since its formation in 1975, receiving financial support for all of its activities. In 2013 NALC learned that Macmillan wished to phase out its support over a three-year period, by the end of 2016.

A joint action plan was agreed to assist NALC develop its fundraising activities and this enabled NALC to continue to provide its full range of services in the current year, 2015. I am pleased to report that we will be able to do the same in 2016, despite a further reduction in Macmillan funding. This is because we have managed to meet our fundraising targets for the year.

We are very grateful to the clubs and individuals that have made this possible, by their hard work and generosity.

Looking further ahead, it will be essential to continue to develop our fundraising work. However NALC's officers have every confidence that our work to assist patients, carers and clinicians will continue for many years ahead.

CAN YOU HELP?

Whilst fundraising is very important, so is having a team of people to carry out the work of sustaining and developing NALC. It would be of great help if we had representatives of more of our affiliated clubs at our General Committee meetings. If you think you might be interested or would like more information please contact Vivien Reed at the NALC office.

Malcolm Babb

Still Rocking

Aerosmith bassist Tom Hamilton has announced that he is cancer-free after battling the disease for almost a decade. The 63-year-old rocker, who was diagnosed with throat and tongue cancer in 2006, updated fans on his clean bill of health in a recent interview with *Long Island Pulse* magazine. Recalling the harrowing ordeal, the musician explained that his doctor had initially given him the all-clear back in 2006 but the cancer reappeared in 2011.

Tom said: "I was faced with losing my way of life... if not my life, but there's a guy here in Boston that Adele referred to [Steven Zeitels], who does novel surgeries," said Hamilton. "He was able to do a procedure that got the cancer out of my throat without having to ruin the rest of it."

To see the complete article online, please go to: www.ibtimes.co.uk/aerosmiths-tom-hamilton-cancer-free-after-long-battle-disease-1509774

This article was published by the International Business Times on 7 July 2015 and then in the PLC Newsletter



Bread and Butter Pudding

Ingredients

6 slices of white bread with crusts removed
2 oz butter
2 oz sultanas or currants
2 oz caster sugar
2 large eggs
1 pint of full fat milk
Grated nutmeg – to taste

Method

Preheat oven to 160 C, 325 F or Gas 3. Grease a 1 litre/2 pint ovenproof dish with butter. Spread bread thickly with butter and cut each slice into 4. Arrange half the bread, butter side down, into the prepared ovenproof dish. Sprinkle with the fruit and half the sugar. Arrange the remaining bread buttered side up, on top. Beat the eggs and milk together. Strain



over the pudding. Sprinkle the remaining sugar and nutmeg on top. Allow to stand for 30 minutes. Bake for about 40 minutes until golden. Serve with cream or custard.

Ian & Rose Browse

Taken from 'Soups & Puddings' produced by THANCS Group. Minimum donation (from non-laryngectomees) of £2.00 per copy. THANCS group: Hawthorn Suite, Worcestershire Royal Hospital, Charles Hastings Way, Worcester WR5 1DD.

Sydney Survey

The Communication Disorders Treatment and Research Clinic (CDTRC) of the University of Sydney are undertaking a study to evaluate the value of an existing quality of life questionnaire which has been widely used to assess the physical and social effects of having a laryngectomy. Determining the appropriateness and accuracy of this questionnaire will allow health professionals to better understand the needs of the laryngectomised population in order to provide appropriate care and support. Therefore, they are looking for participants over the age of 18 who have undergone a laryngectomy. The online survey will take 10 to 15 minutes and can be found at: www.surveymonkey.com/r/laryngectomy

New Breath Test

A breath test has been developed that could give instant diagnosis of two of the most deadly cancers. The test for cancers of the stomach and the oesophagus, or gullet, can give a diagnosis with 90% accuracy and takes just minutes. Conventional laboratory tests can take as long as six hours. The test also prevents the need for an endoscopy... which involves patients having a probe pushed down their throat... and could save the NHS up to £145million. To be tested, patients simply breathe into a device that looks like a breathalyser, which picks up distinctive odours produced by cancerous tumours. Imperial College scientists, who developed the test, say it can discriminate between malignant and benign cancers in patients for the first time.



Promising Results

A trial involving more than 200 patients has produced promising results, and there are now plans for a larger trial involving three hospitals in London. The news comes after researchers in Israel reported a similar breakthrough in April. They are also proposing large-scale trials. Cancer of the stomach and the oesophagus make up 15% of all cancer deaths. Both are usually diagnosed in the advanced stages because they rarely cause any noticeable symptoms early on. Long-term survival rates in the UK are 13% for oesophageal cancer and 15% for gastric cancer. An endoscopy is used to diagnose both types of the disease but only two per cent of patients who are referred for the procedure by GPs are diagnosed.



Wider trials of the breath test will be carried out on 400 patients at University College London Hospitals, The Royal Marsden and Guy's and St Thomas'. The researchers hope to create a sensor device that can signal to clinicians if a patient has a malignant tumour. Professor George HANNA, lead author of the study, which was published in the *Annals of Surgery*, said:

"Oesophageal and gastric cancers are on the rise in the UK with more than 16,000 new cases diagnosed each year. The current method for detecting these cancers is expensive, invasive and a diagnosis is usually made at a late stage and often the cancer has spread to other parts of the body. This makes it harder to treat and results in poor long-term survival rates."

This article by Colin Fernandez was published in The Daily Mail on Tuesday, 23 June 2015 and republished in the PLC Newsletter

Epic Adventure

continued from page 7

Fund-Raising

I have a fundraiser campaign to raise money to make this bicycle adventure dream a reality. I would like to leave this July and travel down the Pacific coast to the Mexican border and then across to the East coast. The exact route will depend on funding and survivors who want to be interviewed. We will be camping and using couch surfing services, like

warmshowers.org, where fellow cyclists open their homes to those touring, along with staying at the homes of other survivors along the route. The goal is to raise enough money to travel all around North America, by bicycle, and connect with 30 to 50 survivors.

If I am unable to secure enough funding this year I plan to limit my ride to just the Pacific coast and continue my fundraising efforts until I'm able to afford the greater adventure.

From 20:20 Voice Newsletter

A Special Thank-You

We are continually grateful for all the very kind and generous donations that have been received in this past year. Since hearing the news of the phasing out of Macmillan's funds, several individuals have contributed sums that have made a real difference.

Some of our clubs have also raised significant sums and deserve a special mention. Our thanks go to Chesterfield, Edinburgh, Harrow, Preston, Solent, South Essex and South Devon clubs for their vital contributions.

We are fully aware that some clubs have limited resources in terms of numbers of members and find it difficult to organise fundraising activities. Please be assured we really appreciate every contribution, large or small.

We are now in receipt of official NALC collecting boxes. If anyone would like to borrow one or two if they are planning a fundraiser please let me know.



Kerry@headoffice

Pill On A String

A "pill on a string" has been developed by the University of Cambridge to detect the early signs of throat cancer without the need for a biopsy. The pill is swallowed and, when the outer case dissolves, it exposes a sponge which can then be pulled up the throat lining, collecting cells.

Researchers say the tiny sponge is more effective at picking up cancer because it takes a swab of the whole throat and not just a small area that a biopsy would examine. The new test can also pick up the conditions earlier, so that treatment can start sooner. The research at the University's Medical Research Council Cancer Research Unit took samples from 73 cancer patients over three years.

The Daily Telegraph



News from the Clubs

Laryngectomy Patient Day in Blackburn

NALC and Countrywide Supplies organised another patient event in June, in Blackburn. There were around 80 people in attendance, mainly from Lancashire and Yorkshire, but a few from further afield. There was a good turnout of manufacturers with stalls to display the latest products available.

The programme of speakers followed our usual pattern, with clinicians and patients accompanied by specialists in other areas of concern to laryngectomees.

Janice Lang, an SLT from Manchester, was supported by two of her patients who each told part of their story. These inspiring contributions illustrated that patients set differing targets along their journey to mark their recovery. It could be becoming highly proficient with a new method of speech or getting back to the workplace. Then, Louise Stevens, an SLT from Preston, gave a presentation about the development and importance of HME systems.

Recent Changes

Oliver Mawdsley, a benefits advisor, spoke about the recent changes and shared resources with Vivien Reed, NALC Secretary, to help her deal with enquiries to our office. Finally, Wes Truran, from Lancashire Fire and Rescue Service, gave a highly entertaining talk on keeping safe in the home.

The evaluation sheets returned to us showed how much people had enjoyed the event and we hope to hold another one later in the year in a new location. As an officer of NALC, I find it very valuable to meet members of our affiliated clubs, share experiences and listen to their needs. It was a pleasure to meet so many who are working hard to help other laryngectomees and their carers.

NALC expresses its thanks to Countrywide Supplies for their assistance and we look forward to a continuing partnership with them.

Malcolm Babb

Ashford Laryngectomy Club

Caroline McKenzie reports that they have just enjoyed their summer outing on the Hythe and Dymchurch Railway. A group of 16 enjoyed the hour and a quarter train journey to Dungeness where we then enjoyed a fish and chip lunch at The Britannia Inn. It was a lovely sunny day, some of the group took a walk to look at the RNLI lifeboat which was out on display and some chose to sit and soak up some sun rays whilst awaiting the return journey.



Epic Adventure

Sean Z. Smith is an American lary survivor who is starting a 268 mile bicycle journey (see: www.giveforward.com/fundraiser/vyk8/epic-adventures-for-survivors) from Mendocino all the way down the west coast to Los Angeles! The idea is to meet and talk to fellow larys along the way so that a documentary can be made. If you read through Sean's bio you will be amazed that he has survived at all... never mind the fact that he's taking this monster on!



Sean writes: Hi! My name is Sean. I had cancer when I was seventeen and I became a laryngectomee ten years later. Remember this: cancer strikes anywhere, anytime and anyone and, in England alone, experts now consider that 50% of the population will contract some form of cancer by the year 2020! I have decided to embark on an epic adventure travelling North America by bicycle to meet with other survivors of head and neck cancers and document their stories in a video documentary in hopes of inspiring others to achieve their own epic adventure.

My epic adventure is planned around meeting others with head and neck cancers to tell their stories through on-line videos and a documentary film, since I had my throat reconstructed using part of my intestines. This documentary would be available on Video On Demand (VOD) platforms and on DVD for patients and medical providers to use as a resource to inspire and raise awareness about life after cancer. I am working closely with Phil Johnson, Chairman of '20-20 Voice' Cancer (U.K. Charity No: 1156733) in England, who fully supports this awareness action, and who was the inaugurator of the first ever 'Awareness Survey' for head and neck cancer sufferers. *continued on page 6*

News from the Clubs

Speak Easy Club, Cornwall

The day at Botallack in May was a real treat. Lunch at the Queens Arms was excellent and to be recommended; then Brian gave an enjoyable guided walk around the splendid mine buildings (they featured in the recent Poldark series on TV) and along the cliff top which was ablaze with bluebells, gorse and many other wild flowers; then they called in at the National Trust building which houses photographs and records of the area over the centuries. It was a glorious, sunny day, though they had to hold on to their hats at times! Thanks to the Recovery Club for inviting them to join this.

On 26 May a Garden Party was held at the ENT Clinic, organised by the Recovery Club and supported by Speak Easy. Then, on 3 June, "The six of us who made it to

Falmouth on 3 June enjoyed a superb Italian meal before making our way round the fascinating Maritime Museum." In July there was a meal at Elizabethan Trerice Manor. In August there was a visit to Burncoose Nurseries, gardens and tea room on the Caerhayes Estate, Gwennap, Redruth. And in September a meal at the Victoria Inn, Threemilestone for lunch.

A much valued club member, Jack Paget, died in May. "Jack was a kind and generous man and, with his wife Jean, a great supporter of Speak Easy. He was a very talented wood turner, exhibiting at many shows, and after his operation and over subsequent years has made many beautiful things for our group for fund raising. Friends remember that he grew excellent peaches and often took them to the hospital for others to enjoy."

HNCHELP (Chesterfield Club)

The weather couldn't have been better as members and guests embarked on *The John Varley* barge at Tapton Lock, on the 'Brindley' Chesterfield Canal. This historic waterway is sadly under threat if the proposed HS2 railway is built. The canal probably couldn't have looked better as *The John Varley* started up its engines and began to cruise along the sunlit placid waters.



Twelve of us had an opportunity, in turn, to stand up front at the open end of the barge to take advantage of the natural delights.

Approximately half an hour later we disembarked at our venue, The Mill pub, cafe and restaurant which was adjacent to the canal. There we met up with other members and we all enjoyed a drink and a two course meal.

After a having a laugh, socialising and participating in a raffle we all hopped back on to our waiting waterway taxi to cruise back to Tapton Lock, arriving back at approximately 9.30pm.

We are now on our summer break but have many activities planned for the autumn, including having a fundraising stall at Chesterfield Hospital.

20:20 Voice

Their annual '20-20' Fashion Show in the prestigious 1880 Suite at the Leicester Tigers ground was a great success. This year they worked with the De Montfort University design team so there were fashions galore to see. There was also a '7-tier raffle' culminating in the top prize of a glorious 2 night mini break for 2 people at the delightful 'Cromer House' B&B in Cromer, Norfolk which was won by Tony & Sandra. The young designers (12 girls & 3 boys) involved really let loose with flair & creativity & there was a tumultuous final round of applause as they all took to the catwalk together to wave goodbye. They presented Gillian Proctor with a beautiful bouquet of flowers at the end of the show.



Plymouth

Future events include: A visit to The Royal Citadel, another Boat Trip up the River Tamar, a picnic on the Plymouth Hoe, a talk from a District Nurse, a talk from the Devon and Cornwall Fire and Rescue Service, a visit to the Plymouth Merchant's House, a trip on the South Devon Railway, a trip on the Tamar Valley Line, a trip on the Plym Valley Railway, a trip on the Bodmin and Wenford Railway, a trip to Plymouth Gin and a Christmas Luncheon at Boringdon Park Golf Club.

Your girlfriends will probably outlive your husband. So find good ones.



Things Our Mothers Taught Us

1. Religion: "You better pray that will come out of the carpet."
2. Logic: "Because I said so, that's why."
3. Irony: "Keep crying, and I'll give you something to cry about."
4. Contortionism: "Will you look at that dirt on the back of your neck!"
from Still Talking, the NSW newsletter