



## Dance 4 Asthma Awareness



Sailor joins Addiction Dance students to Dance 4 Asthma in preparation for 2012 Asthma Awareness Week **30th April to 6th May**

### Issue Highlights

- ✿ All relievers relieve symptoms but are they all the same?
- ✿ Is your medication device right for you?
- ✿ Whats Sailor been up to?
- ✿ How we've helped

Thinking of getting an HRV system before winter?  
Take a look at the special offer for AsthmaLink  
readers on page 4 and help Asthma Waikato at the same time!



## From the Manager

### Join us to help raise Asthma Awareness



Asthma Waikato is experiencing exciting and challenging times at the moment. We welcome new board member Michael Caselberg, Sailor has new resources and we have some big events coming up.

Events help us to raise awareness of how respiratory conditions affect the everyday lives of children, adults and families. They also help you realise that we can help you to manage your condition so you can continue to enjoy doing the things that you love doing most.

The National Asthma Awareness Week runs from 30th April to 6th May with Balloon Day on 4th May. Asthma Awareness Week raises the profile of asthma in New Zealand as 1 in 4 kids struggle to blow up a balloon. This year, we are promoting 'Dance 4 Asthma'. We need our friends and supporters to help raise Asthma Awareness and to help raise funds for Asthma Waikato. Addiction Dance are having a dance party in May – all proceeds to go to Asthma Waikato and HRV Waikato have a great offer for AsthmaLink readers – see page 4. Our Members Extraordinaire, Norm and Myra Malan have just filled up their jar of coins and donated the contents to Asthma Waikato. If you have a fundraising idea and would love to help, do let us know.

One of our board members is working hard to get fit for his Waikato Bike Ride for Asthma in July. Ian will ride approximately 800 km and stop at all the Community Pharmacies along the way. For ways to help him and Sailor keep an eye on our website and the local papers.

Spirometry Day is coming up on June 27th. Think about checking out your lung age during our Spirometry promotion. Spirometry (or lung function testing) is the most basic objective measure of lung function. The results give an indication of whether your air-flow and lung volume are appropriate for your age, height and gender.

Sailor has some great new resources, so do take a look at his website [www.sailorthePufferfish.co.nz](http://www.sailorthePufferfish.co.nz). Learn how to use your MDI and spacer correctly and show others Sailors Video so they can learn too. Join the over 1600 people who have already downloaded Sailors free app PUFF'D and learn about the asthma triggers.

Sailor loved being at Teddy Bears Picnic and seeing his friends the Funky Monkeys at the Kids Carnival and he loves meeting his friends at their school or community event. If you'd like Sailor to come to your school or event, email him and tell him all about it at [sailor@sailorthePufferfish.co.nz](mailto:sailor@sailorthePufferfish.co.nz). He'd love to hear from you.

Vikki Blundell - Asthma Waikato Business Manager

## How we have helped

### How loud is your whistle?

A client self referred as she had been using a whopping 10-15 puffs of Ventolin a day over the last 6-8 weeks. She felt her asthma was getting out of control. I made an appointment for her to come to the Asthma Centre for education. During this session I suggested we do a spirometry test to see just where things were. The results of the spirometry showed quite an obstruction – that means that her breathing tubes weren't open properly. This backed up her theory things were not under control.



She was taking Symbicort 200/6 daily. I tested her technique with the Symbicort placebo whistle. This is a tool provided by Astra Zeneca to help people decide whether they can inhale the drugs in the turbuhaler device adequately. If you have a good inspiration, you make a loud 'whistle' noise, a little noise means little inspiration and consequently very little medication is reaching your lungs. My client was barely audible. We may have found the problem!

With her permission, I wrote to her GP enclosing her spirometry results and suggesting she discuss with him the option of changing to Vannair and a spacer. I am pleased to report that a few months later a very happy client phoned us to say she felt she had her life back.

### TIPS

***If you wonder why your medication isn't working as well as it used to, contact Asthma Waikato. A whistle test may be right for you too or we may be able to identify another problem affecting you.***

Barbara Lawrence - Community Respiratory Educator

## Three Generations affected by respiratory conditions

I recently spent time doing asthma and COPD education with three generations of one family.

Julie and her two school aged children had recently moved to Hamilton from the South island. I met Julie in hospital when her son Malachi had been admitted. Malachi and his brother Maitlan both had asthma and croup. I was able to visit them at home and spend time providing asthma education.

During the education session we:

- discussed the **daily preventer** use
- practised correct **spacer technique**
- discussed **triggers**
- and I completed an **asthma action plan** for each child.

I rang Julie one month later; she was amazed at the improvement in the children's asthma through using their medications correctly. Knowledge is power!

Julie said **"When I was asked if we would like a visit I thought, well it can't hurt can it? But during the visit I was amazed at how far out my understanding of asthma was and I was really excited to see how much using the inhalers properly improved our health. I wished we had known this years ago, it was great learning the details the doctors just don't have the time to go into. I would recommend it to anyone who has asthma."**

Julie's parents were also at her home during the visit, her father has emphysema. I was able to spend time with him discussing his condition and the importance of exercise. Fortunately we are running a Respiratory Rehabilitation Program in Te Awamutu that he is now going to attend. I explained to him that respiratory rehabilitation is a useful programme of education and exercise, which is shown to have benefits for people with COPD.

### TIPS

**A poorly controlled respiratory condition can affect schooling and work down to the daily activities of everyday life. With the right education, families can take control of their situation and improve their wellbeing.**

Jolene Dalziel - Community Respiratory Nurse



The Agnew Family

### Do you have a long-term condition?

Are you aged 18 and over and live with a long-term condition? (e.g.: asthma, arthritis, diabetes, bipolar disorder, emphysema, COPD, other lung disease, heart disease or other long-term conditions.)

You are invited to complete an online survey which will take approximately 20 minutes of your time.

If you would like to take part please go to [www.selfcarenz.co.nz](http://www.selfcarenz.co.nz) for more information.



### From Asthma Matamata

OBITUARY WENDY LOWRIE (PUFF'N WENDY) passed away 8th February, 2012

Wendy was a Foundation Member of Asthma Matamata. She held the position of Matamata President for two years, was an active Committee Member, wrote news items for the AsthmaLink magazine and regularly attended our gym sessions until she found that too difficult because of her health problems. Wendy had many interests too. She was the organising force behind the group Minus One, enjoyed Machine Knitting, the Matamata CAB and her much loved computer.

For all those that knew her, Wendy was an inspiration to others living with COPD and she made of most of what she was able to do. Rest in peace.

Shirley MacLeod Secretary, Asthma Matamata



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# Breathe easier

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WAIKATO

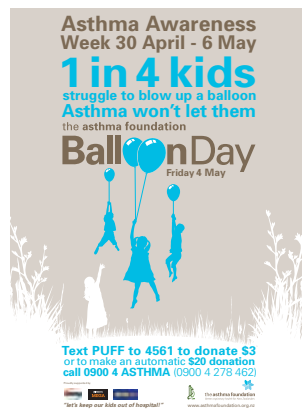


0800 HRV 123 or (07) 850 1613

[www.hrv.co.nz](http://www.hrv.co.nz)

## Asthma Awareness Week

We are really excited about 2012 Asthma Awareness Week. It runs from 30 April - 6 May with Balloon Day on the 4 May. Asthma Awareness Week raises the profile of asthma in New Zealand as 1 in 4 kids struggle blow up a balloon.



### Addiction Dance dances 4 Asthma



This year, Asthma Waikato is promoting 'Dance 4 Asthma'. Staying active helps keep you fit and healthy and is fun. Look out for more information on how you can join us and our supporters at Addiction Dance and 'Dance for Asthma' to help promote better respiratory health.

Look out for a FLASH MOB somewhere in Hamilton, sometime in May. Asthma Waikato and our friends at Addiction Dance will be doing a Flash Mob to raise asthma awareness. If you'd like to be part of it email Vikki at [vikki.blundell@asthmawaikato.co.nz](mailto:vikki.blundell@asthmawaikato.co.nz)

62 schools around NZ have joined the Dance 4 Asthma competition so far. Come on Waikato - encourage your school to join in the fun and raise Asthma Awareness.



### Things we are looking at doing for Asthma Awareness week include:

- Sailor will visit as many schools as he can including Tokoroa Primary on 1st May
- Come and see Sailor and an Asthma Educator at Westfield Chartwell on Thursday 3rd May
- We'll be dancing for asthma with our friends at Addiction dance
- A Public Meeting about Asthma with Doctor Janice Wong, Respiratory Specialist Waikato Hospital on Monday 30th April.
- There'll be a big page on Asthma in the Waikato Times

**Keep an eye out for more information on our website**  
[www.asthmawaikato.co.nz](http://www.asthmawaikato.co.nz)

### Important Dates

#### June 27th World Spirometry Day

This is an international awareness campaign that offers people the chance to test their lung health and demonstrates the importance of sport and healthy lungs. The 2012 campaign coincides with the Olympic Games and aims to encourage people to exercise and look after their lungs regardless of their age or physical ability.

#### July 1st to 6th Waikato Bicycle Ride for Sailor

One of our board member's Ian McMichael is going to ride 800 km's around the Waikato over six days. Sailor and Asthma Nurse Val will travel with him and they will stop at every community pharmacy on the route.



## COMPETITION

**We are looking for a name for the Bicycle Ride.**

**Be in to win a flight simulator experience**

Sponsored by CTC Aviation

Email us your ideas to: [sailor@sailortheufferfish.co.nz](mailto:sailor@sailortheufferfish.co.nz)

*So far, we have:*

Bike for Breath  
 Sailors Bike Ride Challenge  
 Sailors Great Tour of the Waikato

The winner will be notified by return email.



## Help us help Asthma Waikato

This May, with every HRV system\* purchased by an Asthmalink member using this voucher - HRV Waikato will donate \$50 to Asthma Waikato.



\*Up to 50 HRV systems.

0800 HRV 123 or (07) 850 1613 • [www.hrv.co.nz](http://www.hrv.co.nz)

# Winter Tips from Sailor



Be ready for your winter sports. Have your asthma under control so you can play cough free.

Remember if you have a cold keep your nose clear to breathe though by blowing it and if you have a cough make sure you cough into your elbow to stop the germs flying around.

Control your asthma by remembering to take your preventer every morning and night.

Pop your reliever inhaler and spacer or your turbuhaler in your sports bag.

There are lots of germs around in the winter. They like the cold weather so make sure you wash your hands before eating and after you go to the toilet.

Sailor has new Videos on his website - Take a look at [www.sailorthePufferfish.co.nz](http://www.sailorthePufferfish.co.nz)



## IPAD app - PUFF'D

now available to download FREE!

### Spacer Stickers

Sailor has stickers for your spacer. To get yours, contact Sailor at Asthma Waikato  
 Phone: 07 838 0851  
 Email: [sailor@sailorthePufferfish.co.nz](mailto:sailor@sailorthePufferfish.co.nz)

# Sailor out and about



Sailor with his new friends at the Rototuna Primary School Fun Run



Sailor visited the kids in Ward 53, Waikato Hospital

Sailor loved meeting lots of children at the Teddy Bears Picnic



Sailor and his friend Harold the Giraffe at the 2012 Teddy Bears Picnic

Sailor loved getting a shout out from the Funky Monkeys at the Kids Carnival, Garden Place



Sailor gave out prizes at Huntly's Bikewise Event



# Do you have COPD?

Ask your doctor\*  
about **SPIRIVA**<sup>®</sup>

when your COPD symptoms  
impact everyday life because...

# LIFE CAN'T WAIT.



So if you are currently using your reliever inhaler quite often, but still have COPD symptoms that impact your everyday life...

## Ask your doctor\* if **SPIRIVA**<sup>®</sup> is right for you!

\*Normal Doctor's fees and pharmacy charges apply. SPIRIVA<sup>®</sup> is fully funded for COPD. Special Authority criteria apply.

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**What you need to know**

**Is your Medication Device right for you?**

Did you know that you have a choice in your asthma medications? For relievers, there is Salamol, Respigen, Ventolin and Bricanyl. Beclazone. For Preventers, there is Pulmicort and Flixotide. Even with the combination medications, you have the choice of Seretide, Symbicort and Vannair. Medications come in three different devices.

**Metered Dose Inhalers (also known as MDI's or puffer's.)**

Salamol, Respigen, Ventolin, Beclazone, Flixotide, Seretide and Vannair are all contained in MDI's. This is the most commonly used device that has been used for over 40 years. It contains a pressurized inactive gas that propels a measured dose of drug in each 'puff'. This needs to be shaken before each use to mix the medicine evenly with the propellant. An MDI can be difficult to coordinate, so to make this easier it is recommended that it be used with a spacer which ensures that the optimum amount of medication is delivered throughout the lungs. Unless there is a counter on the MDI (Seretide and Vannair only) it can be difficult to judge when the container is empty and once the medication is finished, propellant only may be delivered.

*TIPS*

***If your MDI doesn't seem to be helping, see your G.P. to renew your prescription.***

**Common errors people make when using MDI's include:**

- **not shaking the inhaler before using it**
- **inhaling too sharply or at the wrong time**
- **not holding your breath long enough after breathing in the contents (10 seconds).**



*Sailor Says*

**Take a look at my videos to see how to correctly use your MDI**

**Turbuhalers**

Turbuhalers are dry powder devices. These inhalers do not contain the pressurized inactive gas to propel the drug. You don't have to push the canister to release a dose. Instead, you trigger a dose by breathing in at the mouthpiece. This is a very good device for those who cannot coordinate an MDI and do not wish to use a spacer, but the user must have a strong enough suck to propel the medication through the device and down into the lungs, so it may not be suitable for the elderly and children under 6 years of age.

*TIPS*

***It is important to keep your Turbuhaler mouthpiece dry, so do not breathe into it or wash it.***

Turbuhalers have a block of medication in the bottom with a measured dose being scraped off when the base is turned and it 'clicks'. It does not need to be shaken – all you hear is the drying device rattling. Once the device is armed, a good strong suck is needed to propel the medication through the turbinate in the mouthpiece and down into the lungs. Then, breathe out gently through the nose.

A reliever in a turbuhaler is easier for children to manage for school and also for sports people. Symbicort has a counter and Bricanyl has a dial that turns red when there are 20 doses left.

**Accuhalers**

Accuhalers looks like a fish or a powder compact. It is a good alternative to an MDI and spacer. It is also a dry powder device, on a similar principle to the old Becadisks, where a bubble containing the medication is pierced. It has a counter. This device is very popular with children and teenagers, but it contains more powder than the turbuhaler.

*TIPS*

***With Accuhalers care needs to be taken to rinse your mouth and brush your teeth after use.***

**Medication devices**

*These different devices are all funded by Pharmac*



**Spacer devices**



*Val Hollands - Community Respiratory Nurse*

**What you need to know *continued...***

**All relievers relieve symptoms but are they all the same?**

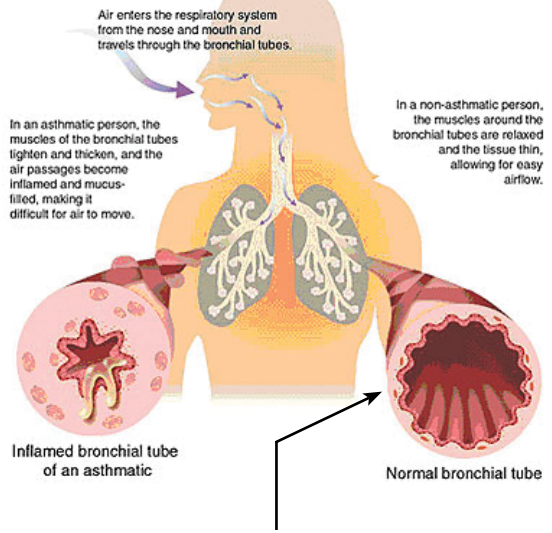
There is a difference between relievers; Salbutamol (Ventolin, Respigen, Salamol, Bricanyl), Ipratropium Bromide (Atrovent) and Tiotropium (Spiriva). Firstly I have named the generic medication and in brackets is the drug company's brand name. All reliever medications work by dilating (opening up) the airways in the lungs. This will relieve your shortness of breath, cough and wheeze. But these relievers work in different ways and use different body functions to work.

To understand the difference between how each of these medications work we have to look at some physiology. Asthma effects the bronchioles (small airways) causing inflammation (swelling), smooth muscle constriction (tightening around the airways) and mucus production. COPD causes damage to the air sacs in the lungs, the small airways partially collapse and there is increased mucus production and inflammation (swelling). In Asthma and COPD there is airway narrowing due to muscle tightening.

One of the systems our bodies use to function is called the parasympathetic nervous system. This is a system that occurs unconsciously and is responsible for the stimulation of "rest and digest". So this means all the things that happen without our control. The parasympathetic system is also responsible for the movement of the muscles in the lungs.

Atrovent and Spiriva work on the muscles around the bronchi (large airways) by blocking the parasympathetic nerve impulses to stop the muscles tightening around the airways. Atrovent works in 30mins and lasts for about 6-8 hours. Spiriva is a once daily medication.

**Why asthma makes it hard to breathe**



The medication relaxes the muscles around the tubes.

*Jolene Dalziel - Community Respiratory Nurse*

**Good news for Symbicort users**

Last September we let you know about the changes to Symbicort funding that would mean people newly prescribed the medication would have to contribute a hefty part charge.

The good news is that decision has been overturned and Symbicort is back to being fully funded. Great to have choice back and have an option as to which medication you prefer to use. There is no change to the availability of Vannair, it is still fully funded and gives you the choice between a turbuhaler and an aerosol. (Remember to use your spacer with Vannair for optimum delivery of your medication).

*Barbara Lawrence - Community Respiratory Educator*



*TIPS*  
**Do not use  
 Spiriva and Atrovent together,  
 as they do the same thing and  
 you would be over dosing.**

Ventolin, Respigen, Salamol and Bricanyl are Beta Agonists and work differently to Atrovent and Spiriva. They work on the muscles around the bronchioles (small airways). They are called "agonists" because they work by activate the beta2 receptors on the muscles around the airway. This stimulates the beta2 receptors to relax the muscles around the bronchioles and opens the airway. These medications work quickly - within 5 minutes and last 4-6 hours.

*TIPS*  
**Symbicort is Pulmicort and Oxis together.  
 If you are using them as separate inhalers  
 now may be the time to talk to your GP about  
 changing to Symbicort as Oxis  
 is going to incur a part charge.**

Don't chase asthma symptoms  
with a blue inhaler.  
Seek control instead.<sup>1</sup>



If you're using your blue reliever inhaler more than twice a week, chances are your asthma is not as good as it could be.<sup>1</sup> Work with your doctor to help control your asthma.

**Seretide**<sup>®</sup>  
Fluticasone propionate/Salmeterol xinafoate



Ask about the purple inhaler – Seretide<sup>2,3</sup>



**References:** 1. Global Initiative for Asthma; *Global Strategy for Asthma Management and Prevention*. Updated 2009. 2. Woodcock AA et al. *Prim Care Respir J*. 2007;16(3):155-161. 3. Bateman ED et al. *Am J Respir Crit Care Med*. 2004;170:836-844

**Seretide**<sup>®</sup> (fluticasone propionate/salmeterol xinafoate; available as a 50/25 or 125/25 micrograms per actuation inhaler, or as a 100/50 or 250/50 micrograms per actuation *Accuhaler*<sup>®</sup>) is a **Prescription Medicine** for the treatment of reversible obstructive airway disease (ROAD) including asthma, and for the treatment of chronic obstructive pulmonary disease (COPD). **Seretide is a fully funded medicine; Special Authority criteria apply. Seretide 250/25 microgram inhaler is a private purchase medicine that you will need to pay for. Use strictly as directed.** *Seretide* is not for relief of acute symptoms. Always carry your reliever inhaler. **Do not discontinue Seretide abruptly. Tell your doctor if:** you are taking any other medicines or herbal remedies; you have pulmonary tuberculosis (TB), a thyroid problem or a heart problem; or you are having treatment for high blood pressure; **Side Effects may include:** 'shaky' feeling; headache; fast heart rate; irritation in the nose and throat. **If symptoms continue or you have side effects, see your doctor, pharmacist or health professional.** For more information, see *Seretide* Consumer Medicine Information at [www.medsafe.govt.nz](http://www.medsafe.govt.nz). Normal doctor's office visit fees apply. **Ask your doctor if Seretide is right for you.** *Seretide* and *Accuhaler* are registered trade marks of the GlaxoSmithKline group of companies. Marketed by GlaxoSmithKline NZ Limited, Auckland. TAPS NA4463-10SE  
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 Hauraki Plains Lioness Club  
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*Asthma Waikato wishes to thank the generous support of the following businesses/Organisations - Please support them too*

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- \* Information pamphlets
- \* Quarterly magazine - local and national
- \* Community based Respiratory Rehabilitation Programs - conditions apply

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- \* Asthma and COPD Support Groups  
Hamilton, Matamata, South Waikato and Thames

**Koha appreciated**

- \* Guest speakers for groups
- Other Services available**

- \* Spirometry testing (certified)
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- \* Practice Nurse asthma training
- \* Community Health Worker training

**IF you are UNSURE about anything, ALWAYS ASK.**  
**Get an ASTHMA MANAGEMENT PLAN from either your**  
**FAMILY DOCTOR or LOCAL ASTHMA SOCIETY.**  
**It is best to ALWAYS BE PREPARED for any problems.**

**Asthma Waikato**

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