



Submission No 29

Inquiry into RAAF F-111 Deseal/Reseal Workers and their Families

Name:

Name withheld

Parliamentary Inquiry 2008
Submission by [REDACTED]

**This is my submission in Confidence to the
F111 Deseal Reseal Parliamentary Inquiry**

A BRIEF OVERVIEW – A WORKER’S DILEMMA

***We just got the job done –
No questions asked –
We trusted them to care for our well being
and now I have no future!!***

From 1973 until 1980, I worked on F111 aircraft in various capacities, late in 1975 I was employed for some months on the deseal reseal of the leaking F111 fuel tanks. This task involved working inside the fuel tanks with respirators, cloth overalls and Ansell rubber gloves picking and scrubbing off old sealant, abrading, cleaning, priming and re-applying new sealants to the whole tank to stop the leaks. This was the very first program on F111 A8-126 I believe, prior to the move to the “rag hanger” and we were still finding our way but were following the accepted maintenance guidelines.

I remember well, squeezing into impossible places, the discomfort, the smell of the sealants and other chemicals and the way it affected my body odour and the odour of the other body functions, from the bowels in particular, 24 hours a day for the duration of my time on the program.

Almost all of my conditions were reported to medical (my medical documents show continual treatments brain scans etc in an endeavour to find the problem) quite soon after exposure and became a continual on going problem for 30 years mostly treated at my expense until the BOI was released and I realised why I was sick and had all these health issues, some of my conditions have been accepted because they fit into the Statement of Principles (SOP's) that DVA use yet despite the best specialists and DVA's own doctors specifying that my headaches and erectile dysfunction are caused by chemical exposure and started soon after exposure the SOP's prevent many claims being accepted.

DVA's Dr Lethlean stated “Despite this supporting medical documentation the DVA's Neurologist (report available) stated “Now aged 55 years [REDACTED] presented with headaches which were first reported (Service File in 1977 and may then have been migrainous in nature. These subsequently became more

frequent, most recently approximately weekly. The features reported favour migraines as a diagnoses."

He further states:- "The headaches are continuing. Migrainous in nature, the prognosis is uncertain. Migraine generally ceases but can persist through the 50's and 60's and beyond. Indefinite consider as permanent."

The question was then put: ***Does a direct causal link exist (on the balance of probability as distinct from possibility) between the Claimant's employment and the claimed condition?***

Headaches. These are of a migrainous nature and commenced in 1977 during the period in which ██████ served on the Deseal Reseal programme, for approximately three months. In my opinion, there is not a direct causal link but this cannot be excluded on known data. Migraine is a common disorder and individual attacks can be brought on by environmental factors, including food, drinks and **chemicals**. The initiation of a migraine pattern continuing over years and decades is not generally attributable to these factors, although the aetiology of migraines remains generally unknown (with knowledge of many factors which modify its presentation).

When the F1-11 deseal/reseal assessment program is complete, data regarding the development of migraine may become evident."

All of my other conditions were being treated or assessed by my GP prior to the BOI being called and consequently when the results were released a lot of problems were better understood and so began the long struggle with DVA.

During this time I have had a continual fight with DVA with limited success; my wife and I are planning for my failing health and her future. I haven't worked for 13 years and doubt my ability to be totally reliable as an employee as my clouded thoughts and headaches as well as general malaise prevent me from functioning properly on a daily basis.

When assigned to this task, we just got the job done as servicemen tend to do – obey orders unquestionably yet we were sacrifice for the cause – the ability to put aircraft in the air was more important that the welfare of a few airman unfortunately.

I am already classified as 60% to 70% disabled and several of my conditions aren't accepted because they don't fit the SOP, which prevents me receiving the gold card for further health care unless other conditions worsen - so we

continue to battle on limited financial assistance and limited prospects of future employment.

I trust this Government will review:-

- 1 the inadequacy of compensation for those employed on the deseal reseal
- 2 the awarding of gold card to meet on going health issues
- 3 the treatment of all workers who worked in the tanks equally because they were ordered to do so not just the 3AD personnel.
- 4 the amendment of SOPs to reflect chemical exposure and its relationship to the many conditions suffered by those exposed.

This is a summary of my feelings toward my issues I still don't feel that I have fully expressed my real sadness and disappointment that this period of my employment in the RAAF which impacted in a detrimental way on my life and as that well I am embarrassed to reveal all my issues to all as it is embarrassing to say the least despite the occasional jokes and bravado with my friends.

All my conditions were reported long before the F111 BOI was announced or considered up to 22 or so years before the BOI – I didn't know why I was sick!

The fact that:-

- Meaningful sexual relations with my wife cannot be undertaken due to erectile dysfunction that has been confirmed by the urologist after sleep studies and the fact that Viagra type drugs are ineffective, with the urologist talking about an implant as the solution. I went to several doctors throughout the 1980's and have no resolution to the problem.

This issue arose very soon after intense exposure to the deseal reseal chemicals in the confined working environment required by this work, is this normal for someone less than 30 years old?

- Despite appropriate subscription drugs that supposedly last for 24 hours to treat my rhinitis under control, they become ineffective during the night and one is forced to breath through his mouth – the dry mouth and the snoring are major issues.

This issue arose very soon after intense exposure to the deseal reseal chemicals in the confined working environment required by this work.

- I can remember long ago when dawn broke you awoke feeling revitalised now more often than not I have headaches of varying degrees of severity such that pain killers are purchased six boxes at a time and they go every where with me, along with the stronger prescription pain killers to treat and control the headaches. When working, the serious, out of control headaches meant I had to go to bed during the day, which is still the case. After taking the strongest medication I am often distressed as I awake again during the night with the headache unabated.

This issue arose very soon after intense exposure to the deseal reseal chemicals my medicals documents reveal that I never once attended medical with headaches as an issue and I don't remember headaches ever being an issue - but now they are a continuing burden on my life. I stopped working 1995 as all my health issues that caused me distress – because I felt unwell and was unsure of why I felt this way.

- No one has ever been told this but embarrassingly, suicide or death was considered but I finally figured that a poor life was better than no life and as I better understood why it was a help. Enough said!
- Memory issues were a problem for me most things were managed by writing them down; this memory problem caused me to lose sleep as I wondered what I had forgotten as I thought of things that may have been overlooked. This was addressed initially by keeping paper and pencil by the bed to jot down issues when I awake during the night and lay there and worry. Jot them down and try to go back to sleep, I now keep a voice recorder for this issue. I continually am unable to find things, can be driving the car and become unsure of where I am going, buy unique things for the home only to find I already own one of them.

DVA thinks I am "normal" but once again I went to my Doctor before the health issues were even considered – I knew I was not "normal" – I was not the same – but because I have fallen back from "rocket scientist" to "normal" DVA considers that's satisfactory. "Normal" is okay if that's the best you have ever been and I am disappointed as its all relative to "where you came from" to get to normal, if you had been a dullard and then became "normal" after some miracle drug of course you would be satisfied with your place in society.

- Anger management is in hand its difficult – I do go off but I try hard and I should be okay but I still "loose it" unfortunately>

My issue, despite sound scientific evidence that chemical exposure causes or contributes to all these conditions the DVA legislation prevents many of my conditions being accepted, consequently I continue to support myself on my wife on a DFRDB pension that has not been kept abreast with the real cost of living and a 60% disability pension, when advocates and others involved in this type of assessment consider that I am in fact totally and permanently disabled – there is no coming back from here. As far back as 1983 when I was assessed for my new job after leaving the RAAF their medical officer considered me as a disabled employee.

Fighting with DVA and the legislative limitations within the act as it currently stands, only further degrades my quality of life. Your Parliamentary Inquiry gives us all hope to be cared for in a fair and compassionate manner after “stepping up to the plate” to serve our country where and when required – no questions asked

Yours sincerely

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