

Chemically affected clients - what every lawyer should know

Peter Harding, President, Australian Chemical Trauma Alliance

Chemically affected people may look fine to the untrained observer and this sets them apart from victims of many common illnesses. Like epileptic sufferers, they appear no different on the outside from any ordinary person. However, the more serious cases could be likened to machines that are normal in most respects, but whose control systems have gone awry.

Cancer is the usual perceived outcome of toxic encounters, while many other debilitating consequences are overlooked. Apart from organic damage, there are several functional shortcomings that are shared by chemical victims, especially when their illness has progressed to the point where they have developed Multiple Chemical Sensitivity (MCS). The manifestations of MCS include short-term memory loss, inability to concentrate, mood swings, fatigue and headaches. These symptoms can make lawyer/client relations difficult. Becoming impatient with these people should be resisted because they are universally angry and frustrated.

Much of this anger and frustration is the sequel to the scepticism which chemically affected people meet at every step of the way from friends, relatives, workmates, and many of the mainstream medics to whom they may have turned for support. Toxicology is not a high priority on the medical syllabus. Chemically affected patients are often inappropriately tagged with a variety of unacceptable and confusing labels, while medicine presently offers no cure for their condition.

These patients feel condemned to an isolated existence which is frequently no more than a series of adaptive gambits necessitating diets, antioxidant therapy and a host of other measures, while avoiding a range of incitants that trigger their symptoms. They describe their lives akin to walking blindfold through a minefield.

Understandably, these people feel abused and abandoned, and unable to communicate except with others who

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have endured similar experiences. It must be remembered that there is a distinction to be made between people who have been acutely poisoned, for example by an episode of alcohol overindulgence, and those who have suffered irreversible systemic, organic or neurological damage through prolonged contact and encounters with toxins such as pesticides and industrial solvents.

This does not mean however that acute toxic exposure cannot cause long-term illness in some people. Such developments are best explained as the dramatic climax to a chain of sub-acute, day-to-day exposures, so often compared to the well known fable of the last straw that breaks the camel's back.

Finally, lawyers being only human may regard their chemically affected clients as being purely incidental and secondary to what is going on, while they occupy centre stage. In reality, it is the clients who are important and pivotal to proceedings. Chemical victims are presently a lost and forgotten tribe, exiled by ignorance, disinterest and their illness. If current trends con-

tinue, it will not be long before the existing toxic epidemic becomes the headline feature on the national agenda, demanding political, medical and societal attention.

Peter Harding is President and National Co-ordinator of the Australian Chemical Trauma Alliance. He is a survivor of a workplace encounter with two highly toxic chemicals used as fumigants while he was General Manager of a Sydney communications firm in 1982. The advice contained in this article is the result of first-hand experiences that occurred during his seven year long effort to obtain reparation for the injuries he had sustained.

Peter was instrumental in forming the Australian Chemical Trauma Alliance, a volunteer, non-profit group designed to provide a support system for chemically injured people. The services offered by this Alliance include advice, counselling, networking and referral to medics and lawyers. There are representatives of this national group in many areas and each state of Australia. ■

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