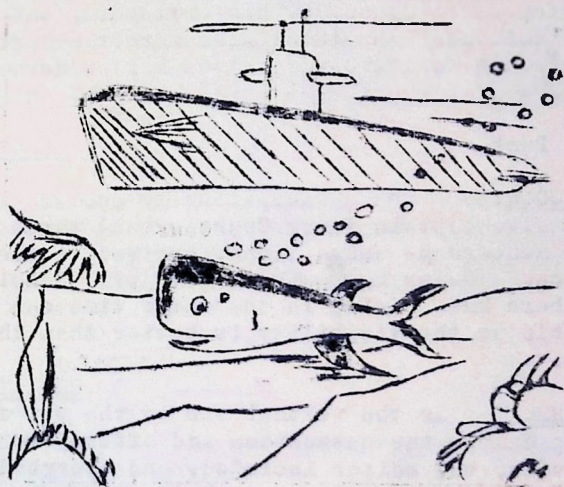


# FATHOMS

OFFICIAL NEWSLETTER FOR THE VICTORIAN SUB AQUA GROUP.

JUNE, 1964.

PRICE 3d.



Mummy?

Registered at the G.P.O. Melbourne for transmission per post as a periodical.

GENERAL MEETING:

The next general meeting will be held at Scots Church Hall, on Friday the 19th June, 1964, at 8 p.m.

There will be a talk on first aid by a member of the St. Johns Ambulance and as everyone knows, after last Sunday, first aid is a must. (Beetlemann!!)

DIRECTOR:

Owing to the resignation of Ian Beeson on his being transferred to Sydney by his employers, the committee unanimously appointed Miss Marget Robertson as a Director and we all congratulate her on her appointment.

OUTINGS: Past.

POINT COOK: On an exceptionally good day for diving, the dive captain Frank Coustley and three prospective members he asked along, arrived at the meeting place. Guess how many turned up? None!!! As most members know diving in the winter time can be most enjoyable as the visibility is better than the summer time.

FLINDERS: As the weather was on the wet side it seemed to dampen the enthusiasm and affect the timing of arrivals, the editor included, and everybody seemed to chase each other around, but not catch up. Anyway, it was just as well we did not collect any abalone as we would not have been able to sell them.

OUTINGS: Future.

DRUM ROCK SORRENTO: Meeting place. Cnr. Nepean Highway & St. Pauls Rd., before you come to Sorrento. Time. 10.00 a.m. Anyone there after 10.30 will have to go direct to Drum Rock.

OUTINGS: Future

July 5. Sandringham - Submarine dive - Meeting place outside Sandringham Yacht Club at 10.00 a.m.

SNOW TRIP - 22 - 23 August, 1964

It appears that quite a few members are going on this trip, so book early. Don't be afraid if you cannot ski, because you will have quite a few mates. Accommodation has been booked at £3 per person. So be in it and make this a first class social outing.

A tentative date in September has also been set for another trip to the snow, so make sure you book in early. More details at the next General Meeting.

SUBSCRIPTIONS.

These are due on 1st July, so the next General Meeting is your last opportunity to pay before the due date. So please help the club by paying your dues promptly: Male £2.10.- Ladies £1.10.- Junior £1.10.- Associate members 15/-.

CRAYFISH TALES.

- Q. How do you tell a crayfish from a grape???
- A. A grape is purple.
- Q. If you are colorblind how do you tell a grape from a crayfish?
- A. You jump round on it for a while. If you don't get any wine its a crayfish!
- Q. How can you tell when a shark is getting ready to charge?
- A. He takes out his diners club card?

SELF-CONTAINED DIVERS FEDERATION:

The federation, after much work has been successful in obtaining a Recompression chamber in Victoria. This chamber will be available for any person who would be unfortunate enough to need its service 365 days of the year.

After negotiation with Normalair (Aust) and the parent Company in England, Normalair agreed to extend a chamber they were to build in Melbourne for research and test purposes, to the stage where it would be a full operative Medical Chamber. This entailed the addition of a second smaller chamber or air lock to enable the entry of attendants without affecting the pressure in the main chamber. A service lock which is used for passing supplies into the main chamber.

The chamber is to be in operation by the end of 1964. Of course this is not a "all clear" to take unnecessary risks when diving. At the end of this month a course will start with Navy instructors to train personnel to operate the chamber. Three members of the V.S.A.G. have been selected to attend this course.

As the full details on how to obtain the service of this chamber are detailed they will be published in Fathoms in the near future.

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FREE ASCENTS - PRACTICE:

This article is not offered as a shocker to frighten anyone away from diving, but, to alert members to some of the dangers if our sport is carelessly indulged in.

TIME: In the future.

LOCATION: Water deep enough to practise free ascents 6 feet or more.

REFERENCES - FREE ASCENTS.

Free Ascents:

- (a) Royal Navy Diving Magazine Vol.10 No. 2 (Pages 31 to 37).
- (b) British Sub-Aqua Club Diving Manual Diving Bulletin No. 39. GROUP LIBRARY.

Air Embolism:

British Sub-Aqua Club Diving Manual (Diving Bulletin No. 25 ) GROUP LIBRARY

Proxix:

British Sub-Aqua Club Diving Manual (Diving Bulletin No. 24) GROUP LIBRARY  
Diving Manual (1957)- French Navy (Page 45).

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CRAYFISH TAYLES

Club didn't get a very good response for gathering alone to swell funds. Just as well or there would have been a big stink ...

Factory was closed down and abs. don't keep two or three weeks ... Phony.

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CRAYFISH  
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OUTINGS LIST

1964 -1965

- |         |                                       |
|---------|---------------------------------------|
| 15/6    | L.W.E. Portland                       |
| 21/6    | Drum Rock - Sorrento                  |
| 5/7     | Sandringham - Submarine dive          |
| 19/7    | W.E. Mount Gambier (Fresh Water Dive) |
| 2/8     | Shoreham                              |
| 22/8    | W.E. Ski trip - Mt. Buller.           |
| 30/8    | Table Rock                            |
| 13/9    | W.E. Wilsons Promontary               |
| 27/9    | Mount Martha (Small boats)            |
| 11/10   | W.E. Anglesea                         |
| 8/11    | The Nobbies and area                  |
| 13/11   | NIGHT DIVE Fishermans Point           |
| 22/11   | Pt. Nepean                            |
| 5/12    | W.E. Liptrap                          |
| 20/12   | Frankston Wreck (Boat Trip)           |
| 10/1    | W.E. Thin Lakes New Year Outing.      |
| 24-25/1 | L.W.E. Cape Otway                     |
| 7/2     | Cape Woolamai (Boat Trip)             |
| 21/2    | Pearces Beach (Rye)                   |
| 7/3     | W.E. Lake Tali Karng (E. Gippsland)   |
| 21/3    | Cape Schank                           |

FREE ASCENTS - PRACTICE:

PROPOSAL: To practise free ascents.

If this is you sometime in the future then STOP and think again of an article you read in the GROUP NEWSLETTER sometime or other.

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It is reasonable to assume that all aqualung users have at least some knowledge of the procedures for a Free Ascent. The method of regaining the surface following exhaustion of air supply or failure of breathing apparatus. These few lines however are directed not only to those with only a little knowledge of these procedures, but also the many who have in the past, satisfactorily practised this emergency method.

Free ascents or Emergency Free Ascents are Emergency Procedures not just fancy ways of surfacing. Such procedures have everpresent hazards which should be clearly understood and avoided if the use of this method is to have a happy ending.

The general problem is to surface through decreasing water pressures without suffering the effects of either (a) over-expansion of the lungs (Air Embolism) or (b) Oxygen-starvation (Anoxia). For some time past it has been the practice of many Diving Clubs to carry out tests of members performing controlled free ascents under supervision so that they will be prepared should the need ever arise during actual diving, and, this no doubt is carried on by members outside of controlled conditions.

However, now the number of fully documented cases of serious injury and even death following practising of free ascents is steadily growing and is causing concern in high places associated with diving. Involved in these documented cases are many men, healthy, fit and young, fully conv-

FREE ASCENTS - PRACTISE:

ersant with diving techniques and the theory of practising free ascents. The deaths have occurred following free ascents from as little as 20 feet and have occurred as late as three days after the free ascent, although the onset of symptoms was within minutes of surfacing. Injury has occurred in ascents from 6 to 8 feet deep.

Dealing briefly with the main hazards individually we have HAZARD: (a) AIR EMBOLISM. This is one of the most serious and most easily developed physiological complications to arise in diving and is due to a relative excess of air pressure in the lungs. The lungs as we know consist of a vast number of air sacs called alveoli, these alveoli are surrounded by a network of small capillary blood vessels. It is through the alveoli that oxygen diffuses into the blood. If a diver ascends whilst using compressed air breathing apparatus and does not allow the excess air in his lungs to escape freely from his mouth and nose it will force its way through the alveoli into the capillary blood vessels rupturing these in the process. The air, in the form of small bubbles or emboli will pass, in the blood, through the heart and block small blood vessels throughout the body, including those in the heart, brain and spinal cord. In more severe cases large bubbles may gather in the heart where they prevent it beating properly, the circulation fails and the diver dies. The symptoms of air embolism in severe cases which may occur up to four minutes after the ascent are:-

- (1) a tightness in the chest,
- (2) blood or froth at the mouth,
- (3) numbness or paralysis of arms and legs,
- (4) dizziness - fainting,
- (5) convulsions and unconsciousness.



Less severe cases may be indicated by choking feeling in the throat, hoarse voice, rattling in the chest, with feeling of air under skin of the chest.

Treatment: There is no first aid treatment. Recompression as soon as possible in a recompression chamber is necessary to diminish the size of the air bubbles in the blood. Other complications can also occur (see references). The bends may also be manifest simultaneously with air embolism but the latter is the more serious complaint.

HAZARD (b) ANOXIA (oxygen starvation). This results from insufficient oxygen in the alveolar air. In prolonged free ascents, even though carbon dioxide may be exhaled on the ascent so that no great desire to breathe is experienced, the total oxygen in the lungs can be depleted and unconsciousness ensues. The seriousness of unconsciousness under water needs no elaboration.

Treatment: If the diver is rescued immediately restoration of normal breathing should be sufficient and consciousness should be restored after about half a minute. On the other hand if he has been unconscious under water for some time artificial respiration may have to be applied and medical assistance obtained.

CONCLUSIONS: (a) Wise counsel in trained circles, recommend that the techniques of free ascent should be known but not practised.

(b) Always dive with a buddy and if you run out of air or your equipment fails you can buddy breathe to the surface by means of "assisted free ascent".

(c) Divers should acquaint themselves with the symptoms and treatments in case they are present when such an accident occurs, speed in correct treatment is essential.