Fishermen’s Friends

Finally: Just as when setting out to sea, plan ahead with your health. Don’t wait for things to go wrong, they will usually happen at exactly the worst possible time!
The Men's Health Forum's mini-manuals contain easy-to-read information covering a wide range of men's health subjects.

The Men's Health Forum's aim is to be an independent and respected promoter of male health, and to tackle the issues and problems affecting the health and well-being of boys and men in England and Wales.

Founded in 1994, The Men's Health Forum is a charity that works with a wide range of individuals and organisations to tackle male health issues. Well established and with an active membership, we work for the development of health services that meet men's needs and help men take more control of their own health and well-being. Our members, partners, staff and trustees bring plenty of experience in health care, media, business and activity.

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Website: www.menshealthforum.org.uk
Our registered office is as listed above.
A registered charity (number 1087375).
A company limited by guarantee (number 4142349 – England).

Website: www.malehealth.co.uk (for fast, free, independent health information from the Men's Health Forum)
Website: www.menshealthforum.org.uk

Our members, partners and trustees bring plenty of experience in health care, media, business and activity. More than just manuals

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The author and the publisher do not intend this book to be used instead of advice from a medical practitioner, which you should always get for any symptom or illness.

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Useful contacts

Health advice and information, 24 hours a day

England – NHS Direct 0845 4647
www.nhsdirect.nhs.uk
Northern Ireland – www.mh-ni.nhs.uk
Scotland – NHS24 0845 242424
www.nhs24.com
Wales – NHS Direct 0845 4647
www.nhsdirect.wales.nhs.uk
Useful websites about health

Change4Life – www.nhs.uk/healthy
Male health – www.malehealth.co.uk
NHBF LifeCheck – www.mhs.org.uk/lifecheck

Helplines (health related)

Alcohol
NHSA helpline 0300 123 1087
www.drinkaware.co.uk
A Helpline 0845 769 7555
www.alcoholics-anonymous.co.uk

Diabetes
Diabetes UK Helpline 0845 120 2960
www.diabetes.org.uk

NHS Direct
England – NHS Direct 0845 4647
www.nhsdirect.nhs.uk
Northern Ireland – www.mh-ni.nhs.uk
Scotland – NHS24 0845 242424
www.nhs24.com
Wales – NHS Direct 0845 4647
www.nhsdirect.wales.nhs.uk

NHS Choices
www.nhschoices.nhs.uk

NHS LifeCheck
www.mhs.org.uk/lifecheck

Fishermen’s Mission port staff contact details

ABERDEEN AND FIFE (Forth Estuary north to Aberdeen)
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Tel: 01224 584651

BRIGHAM (Devon incl Plymouth, also Somerset and Dorset ports east to Weymouth)
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Tel: 01803 859123

EAST ANGLIA (King’s Lynn to Thames Estuary)
Supt Tim Jenkins
Tel: 01224 562569

EYEMOUTH (Scotland South East, Seafarers to Houseforth Estuary)
Supt George Ayoma
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FIT HERMAN

A health workshop manual for working fishermen

CONTENTS

Fit to fish? .......................................................... 2

Working at sea ...................................................... 4
  Accidents
  Infections
  Immunisations
  Skin cancer

Ears, eyes and mouth ........................................... 9
  Say it again, Sam
  Eyes
  Eye injury
  Poor vision
  Mouth matters

Brain pain ........................................................ 13
  Stress
  In the depths: depression
  Booze and boats
  Recreational drugs

Fit for anything? ................................................ 18
  Back to basics
  Slips, trips and falls
  Fender belly?
  Salt and blood pressure
  Fruit and veg

Smoking ............................................................... 22

It’s on your watch ............................................... 24
  Prostate problems
  Bowel cancer
  Testicular cancer
  Sexual health
  Sexually transmitted infections

Health navigation ................................................ 30
  Finding the best service at the right place

Useful contacts .................................................... Inside rear cover
Fishing is a tough job both mentally and physically. It is also demanding, often pushing you to the limit, definitely not for the faint hearted. Not surprising then the need to be fit to fish, as a mistake can mean more than a bent fender. Problem is, it’s not always easy to look after your health. *Fisherman* won’t teach you how to catch fish or avoid catching a cold. *Fisherman* is your manual for health at sea, home or port. It will help you brave heavy weather and come out sailing. Keep it in the wheelhouse or galley, read it, follow the advice and the longer you’ll stay working at sea.

**Angel fish**

Nobody says fishermen are angels. Hard risky work with long irregular hours can make health choices difficult when it comes to booze and grub. Nobody likes to be preached at, especially after coming home from a long trip with a hold full of fish. *Fisherman* doesn’t tell you what to do – it gives you choices and you make up your own mind. You take risks every time you step on board, but by understanding them you reduce risks enough to get on with the job safely. Poor health increases your risk, especially from accidents, which are never far away on a fishing vessel.

**Any port in a storm**

Getting to Dogger Bank may be no problem for a seafarer but even at the best of times men aren’t particularly great at getting to the doctor, dentist or optician. It can be even more difficult for fishermen. Yet simple things like needing new glasses, a tooth abscess or feeling tired all the time can turn into something much worse when you’re 100 miles out and a winch turns nasty on you. Being part of a team at sea is a world away from on a football pitch; not hearing a command or seeing a warning light can mean more than just a missed goal. So health problems need to be sorted quickly, just like the complex machinery you work with every day.

*Fisherman* is your satnav for getting to the best health services. Even more, it’s your workshop manual on how to get the most out of what is on offer.
Working at sea

Accidents

An army manual once stated: ‘the best way of avoiding harm from a nuclear bomb is not to be there when it goes off’. The best way of avoiding accidents is not to let them happen in the first place.

Being fit to fish is part of the story. Easily said, but commercial fishing is the most dangerous industry in the United Kingdom. Hospitals can be a long time away. Even with air evacuation, foul weather can slow down your arrival at A&E. Deaths at sea have reduced over the years and not just because of the cutbacks in fishing fleets. Safety at sea is better than it was, yet accidents still happen.

Fishing fact
Fishermen in Britain have a one in 20 chance of being killed on the job during the course of their working lives.
10 fishermen continue to lose their lives at sea, on average, every year.

All at sea?
- Crew in the sea accounts for 96% of deaths
- Lifejackets were once called ‘life preservers’ and these days they do it. Unfortunately they only work if you are actually wearing one (and correctly)
- RNLI guides help select the most appropriate lifejacket. www rnli org uk

Infections
When it comes to injury and infections, fishermen’s hands come off worst. Not really surprising considering the stuff they have to put up with. Between broken ends of warps, knife cuts and crushed fingers, infections are almost inevitable. Worse still, hand injury and infection can lead to accidents.

Protective gloves are essential and all infections should be treated quickly.
You can help prevent infection by:
- Thorough hand washing with a germicidal hand wash solution at the end of every work period
- Prompt treatment and cleaning of all cuts, scrapes and scratches
Odd man out?

- Are you the one who always seems to come home with infected cuts which are still there when you go back out again?
- Are you only fit for flat out when you get home, sleeping or lying around? Could be a simple reason. Ask the Doc or NHS direct.

Remember: some infections are much more common in fishermen than other workers. Don’t believe it? Ask your local plumber has he ever had a Haddock Rash.

Action points

- Check it out in The Ship Captain’s Medical Guide
- Get advice about antibiotic treatment if you have throbbing pain or inflammation anywhere in the hands or fingers

Immunisations. Prevention is better than cure

Think how much time you take checking equipment, the weather, safety gear, winches, engines, radios, lights, beacons, etc, before you even leave port. Thinking ahead saves problems when you are somewhere less hospitable. So think immunisations. They will prevent the big nasties happening when a medic is 200 miles away, and probably in bed.

Tetanus

Before immunisation this deadly infection was a serious threat to fishermen. It attacks through the skin or open wound and travels up to the brain. Muscles are paralysed on the way (hence ‘lockjaw’ when it reaches the face). It can be treated, but only if caught early. It can take a long time to get lifesaving antibiotics – not always easy in a force 10 off Orkney.

Action points after an injury

- Check with your GP to see if you’ve been fully vaccinated against tetanus (five doses are required for permanent immunisation)
- Get advice and/or a booster jab. Beats a dash across the sea in an empty boat. Keeps you popular too

Flu

We are not talking a bad cold here. Flu is bad enough at home with your feet up sipping a hot toddy. At sea you will still have to work, think about your mates and hopefully sleep – all while feeling as though you are dying. You probably won’t, but you might wish you could.

Real flu lasts a week or more so that could mean an entire trip as a zombie. Paracetamol helps but sorry mate, no hot whisky when you are handling a winch that could pull a man’s arm off before you can say ‘cheers’.
**Action point**
Get your yearly flu jab. It's free if you have certain medical conditions like diabetes or asthma or if you are over 65. Remember, flu viruses change every year so last year’s protection is useless. It is a virus not a bacterium so antibiotics are ineffective.

**Fishy facts?**
*Goose grease on your chest protects from infection…*
- False: And you might not be invited out on the next trip

*Cod liver oil stops the common cold…*
- False. Nor will vitamin C or not going out in the rain

*Shaking hands spreads flu…*
- True. More bad news for politicians

**Skin cancer**

*Red sky at morning…*
See that big yellow thing hanging in the sky? It’s not always your best mate.
- Skin cancer is the most common cancer in the UK and it mainly affects men working outdoors
- Your lifetime risk as a man of developing skin cancer is one in eight
- Even cloudy days can deliver 90% of the dangerous cancer-forming UV rays
- Some football shirts are so thin they let almost all the sun shine through
- Skin damage remains after your sunburn fades. It builds up under the skin just like rust under deck paint and it can come back to haunt you in later years
- Virtually all the risk comes from the sun

There are basically two types of skin cancer:

**Non-melanoma (most common)**
Watch out for:
- A new growth or sore that does not heal within four weeks
- A spot or sore that continues to itch, hurt, crust, scab or bleed
- Constant skin ulcers that are not explained by other causes
These are commonly found on the forehead, tip of the chin, nose or ears, arms and hands, the exposed bits.
Malignant melanoma
The most serious form of skin cancer. Although it is much less common, it is on the increase. It most often appears as a changing mole or freckle.

Watch out for:
- Size: bigger than the butt end of a pencil (more than 6mm/quarter inch diameter)
- Colour variety: shades of tan, brown black and sometimes red, blue or white
- Shape: ragged or scalloped edge and one half unlike the other
- Itchiness
- Bleeding

Action points
- Look at your moles and watch out for changes in them
- Many skin changes are harmless but a quick check with your doctor can save your skin

Sun Smart Tips
- Seek shade
- Wear clothes made from closely woven fabric
- Slap on a hat. A big hat (that covers ears, neck and nose!)
- Wrap on sunglasses to protect your eyes
- Don’t get burned. Use sunscreen (SPF 15 or higher)
Ears, eyes and mouth

Say it again, Sam

By the time you’ve finished saying, ‘Sorry, what was that again?’ there might be a steel hawser with 2 tons of fish on one end and your left leg on the other. Poor hearing is no joke for anyone but especially not a fisherman.

Commercial fishing is noisy. Worse still it’s noisy most of the time so your ears get little time to rest. Noise Induced Hearing Loss creeps up on you. More and more you are asking people to say it again or getting abuse for playing music too loud. Hearing also deteriorates with age: around 42% of over 50 year-olds in the UK have some kind of hearing loss.

Action points

• Wear ear protectors when appropriate
• Let your ears rest after being exposed to unavoidable noise
• See your doctor if your hearing is getting worse

‘Action on Hearing Loss’ offer a hearing test online or via the telephone - call 0844 800 3838.

Lug holes blocked?

Wax is a common cause of reduced hearing especially when water gets trapped behind it.

See your GP.

Do not stick anything in your ear. Fuse wire, matchsticks, six inch nails – all are bad ideas.

Hearing aids are getting smaller and cleverer too. They can tell the difference between speech and noise so you hear ‘duck!!’ not ‘quack, quack’. Most are water-resistant but you will need special ones to resist salt water.

If you do wear a hearing aid, remember to carry spare batteries with you. You also need to be able to wake up in an emergency so you may need to wear it at night!

Eyes

Most fish have eyes on each side of their head. This means they can see in two directions at the same time. Sounds a great idea but they still end up in a very big net. Human eyes look ahead and we only wish we had eyes in the back of our heads – would come in handy at times! Poor vision is a major cause of accidents. Eye injuries are a major cause of poor or even loss of vision.
Eye injury

The surface of the eye is vulnerable to damage by foreign bodies or by irritating substances. Where appropriate, wear protective glasses, goggles or a face shield. Immediate irrigation with lots of water will often wash out foreign bodies and is essential for severe irritants. Foreign bodies may also be removed directly (see The Ship Captain's Medical Guide).

Eyes are tough. A blow from a flat object like a fist rarely damages the eye itself yet can break the bones around the eye as it bulges out. Sharp pointed
objects are another matter. Metal splinters from a hammer-strike travel at the speed of sound and can pass right through the front of the eye damaging the sensitive retina at the back. This can lead to the loss of both eyes even though only one has been injured.

**Action points**
- Wear the right protective gear when handling tools
- Consult The Ship Captain’s Medical Guide for first aid advice after an eye injury

**Poor vision**
Accidents aren’t the only cause of worsening sight.

**Infection**
Eye infections are common and can cause redness, pain, itchiness and intermittent blurring of vision from pus. Conjunctivitis (infection of the surface of the eye) is catching so use your own towel. Ask your pharmacist for antibiotic drops or cream.

**Glaucoma**
Caused by pressure building up inside the eye. It is passed down in the family so get checked out by an optometrist before it hits you. Some forms of glaucoma cause severe eye pain and halos around lights. These require urgent treatment to prevent permanent blindness.

**Impairment of vision**
As we age our eyes frequently develop problems. Some people lose distance vision, others lose near vision. For some of us such difficulties are there throughout life and can normally be corrected by the use of glasses or lenses. See an optometrist if you find you are having problems. This is important as defective vision may mean you are no longer fit to do lookout duties. Cataract is another cause of impaired vision that becomes more common with age. An optometrist can advise on treatment.

**Mouth matters**
Men visit their dentist less often than women. It can be difficult to find time to get to a dentist when you’re a fisherman and it’s not exactly the first thing you want to do when you are on land. However, most things that go wrong in your mouth can be prevented. Getting a check-up can avoid a lot of pain and even prevent an unnecessary extraction.

**Tooth decay and gum disease**
Sugary foods and drinks feed the plaque bacteria that live naturally in the mouth. The bacteria then make acid which attacks the tooth enamel causing
tooth decay. The bacteria also irritate the gums which can cause gum disease. Most older people who lose their teeth, do so because of gum disease. Smoking also causes gum disease. Preventing all this is quite simple:

**Action points**

- Brush your teeth AND GUMS every night and morning with a fluoride toothpaste. And spit but don’t rinse to keep the fluoride working
- Try to keep sugary foods and drinks to mealtimes only. Choose healthier snacks between meals such as fruit and vegetables
- Visit a dentist at least once a year

**Mouth Cancer**

Men are more likely than women to get cancer of the mouth, lips or throat. Most of these cancers are caused by smoking (or chewing tobacco) and excessive alcohol intake.

- Watch out for any white or red patches, an ulcer or lump (which may not be painful), which does not go away within two weeks
- Early diagnosis is critical - go and see your doctor or dentist as soon as possible
**Brain pain**

**Stress**
Life without stress is impossible, and a small amount of stress can be good for you, but a build-up of pressure can lead to a dangerous amount of stress. This can damage your health and even affect the people around you. Being at sea comes with its own stresses, such as the demanding repetitive tasks, fatigue, adverse weather conditions, the cramped and dangerous environment and being away from loved ones.

**Stress signals**
Although we all have to deal with stress, people vary in how much stress they can deal with before it has an effect on their life. Watch out for common stress signals in yourself and in others including:

- Eating more or less than normal
- Mood swings, irritability or not caring
- Not being able to concentrate
- Feeling tense
- Feeling useless
- Feeling worried or nervous
- Not sleeping properly
- Being tired or forgetful

Part of the problem is not recognising our own stress signals. Another part is expecting too much of ourselves. It is important to remember that stress is NOT a sign of weakness. Recognising the symptoms of stress and taking action could help keep you and others safe and healthy.

**Money worries**
Your income as a fisherman can fluctuate making budgeting more difficult. Financial difficulties are a major cause of stress and family breakdown but you can get advice and help in managing your finances by calling the Seafarers’ Advice & Information Line (SAIL) on 08457 413 318.

**Why bother?**
Stress can trigger anxiety, depression and physical symptoms such as:

- Back pain
- Indigestion
- Irritable bowel syndrome
- Psoriasis (scaly skin)
- Migraine
- Tension headaches
There are several things you can do to help yourself and improve how you feel physically and mentally:

1 Time out
It can be hard to cope when you are feeling very stressed which is why it is important to take time out.

Quick fix
Getting yourself out of a stressful situation, even for a few moments, can give you the space you need to feel ready to tackle the problem.

Long term
If possible, plan (and take!) a proper holiday in a quiet period of the year.

2 Chill out
Getting enough sleep will relax your mind and help you cope with stress.

Quick fix
Simple relaxation techniques like breathing deeply can be an effective way of helping you deal with stress.

Long term
Try to get a good night’s sleep when you’re back on land. Avoid sleeping tablets as they can be addictive and make things even worse.
3 Leave it out
Avoid smoking, junk food and alcohol! These won’t help your stress levels. Go easy on drinks that contain a lot of caffeine, as caffeine may make you feel anxious.

Quick fix
Drink plenty of water. This will help you concentrate and may stop you getting stress headaches.

Long term
Improving your diet will help your body to deal with stress. It’s important to make time for proper meals. Talk during meals, as this is a time to relax as well as eat.

4 Talk it out
Just talking about things that are making you stressed may help you see things differently.

Talk to your friends or family
Dealing with stress alone is never a good idea. Talking to even one other person can help you deal with stress, and family or friends may be able to help you.

Talk with a health professional
You can speak to a doctor or practice nurse for advice and support, or contact NHS Direct.

You can also talk to the Fishermen’s Mission. They can be a confidential ‘listening ear’ and can help you access a range of other support (contact details at the back of this manual).

In the depths: depression
Everyone feels miserable and down at some time but this is different from true depression where nothing seems to lift the feeling of despair. It is difficult for other people to realise what you are going through. Most will ignore it or make really helpful suggestions such as ‘pull yourself together’ or ‘snap out of it’ as if it’s your own fault. Worse still, this can be exactly what you are thinking as well.

Depression comes in two forms:
‘Great time to lose my job, I am depressed’.
• You are reacting to bad news but a new job stops the feeling of misery. This is normal

‘Just won twenty thousand on the Lottery, why do I feel so sad?’
• True depression keeps you down even when things are going well. This needs help from your doctor. Modern treatments really do work

Severe weather warning
Feeling as though life just isn’t worth it? Ever considered ‘ending it all’? See your GP, ring Samaritans (on 08457 90 90 90), or call the Mind infoline (on 0845 766 0163) for other sources of help.
Booze and boats

You’ve probably heard it all before. Booze is Bad, The Evil Brew, etc, but let’s take a cold hard look at it. Having a drink with your mates, with a meal or watching TV is part of most people’s lives. So far, no problem. It’s when booze becomes the problem that things go wrong.

If you regularly drink more than 35 units a week you are probably already experiencing things like feeling tired or depressed, putting on weight, memory loss, sleeping badly and having sexual problems. You could also suffer from high blood pressure. If you’re drunk or hung over at sea you are potentially a risk to everyone on the boat.

Some people are argumentative if they drink a lot, even when they are sober. Just what you need on a small vessel with the weather closing in.

Dead easy to say but what is ‘heavy drinking’ and how do you lower your risk of suffering from these problems? Lower risk drinking means no more than three to four units a day for men. If you keep to these amounts, in most circumstances, you should prevent damaging your health.

So just how heavy is your drinking?

It can be confusing trying to work out how many units you are drinking as drinks vary so much.

<table>
<thead>
<tr>
<th>Drink Description</th>
<th>Alcohol %</th>
<th>Units</th>
<th>Calories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large glass of wine (175 millilitres)</td>
<td>15%</td>
<td>3</td>
<td>120 to 170</td>
</tr>
<tr>
<td>Small glass of wine (125 millilitres)</td>
<td>12%</td>
<td>1.5</td>
<td>85 to 120</td>
</tr>
<tr>
<td>Bottle of wine (750 millilitres)</td>
<td>12%</td>
<td>9</td>
<td>510 to 720</td>
</tr>
<tr>
<td>Pint of beer</td>
<td>5%</td>
<td>3</td>
<td>180</td>
</tr>
<tr>
<td>Pint of beer</td>
<td>3.5%</td>
<td>2</td>
<td>160 to 170</td>
</tr>
<tr>
<td>Single measure of spirits (25 millilitres)</td>
<td>40%</td>
<td>1</td>
<td>60 to 75</td>
</tr>
</tbody>
</table>

For more information go to www.drinkaware.co.uk

If you have a smart phone, download the NHS Drink Tracker app to help monitor your intake.

Fishy facts?

One pint of beer is cleared out of the body each hour...

- False: Like beer strength, people vary enormously when it comes to clearing alcohol. It gets longer as the alcohol builds up with heavy drinking

Tomorrow is another day...

- False: Alcohol in large amounts has a lasting impression. You can still be way over the limit despite sleeping for 8 solid hours. Worse still, your judgment is also suspect. A bad mixer when it comes to heavy machinery
**Tipple tips**

- Drink plenty of water, both during the day and when drinking alcohol. Try alcohol-free beers between pints, you probably won’t notice the difference!
- Taste or kick? Swapping beer strengths doesn’t mean losing the taste
- Try to have at least one alcohol-free day a week

**Recreational drugs**

There are many different types of recreational drugs, each with their own facts, issues and risks, too many to cover in this guide. For frank, confidential information from friendly people who are professionally trained to give straight up, unbiased information about drugs, ring FRANK on 0800 77 66 00, or check out www.talktofrank.com

The lines are open 24 hours a day, 365 days a year and offer translation services. Both the helpline and website also give confidential information and support for those worried about a friend or family member.

Anything which clouds your judgment or concentration can make you a hazard to your vessel, its crew and yourself. Most will continue to affect you well after the ‘buzz’ has gone.
Back to basics
Back and neck injuries are often caused by the conditions associated with particular activities at sea:

• Holding a constant position, especially when sailing or setting nets for small vessels
• Repeated bending or twisting in handling gear and fish
• Working in an awkward position in relation to the slope of the deck or viewing angle

There are a few simple exercises to counteract these conditions that can be done by all the crew:

• In the standing position put your hands on your hips and arch backwards as far as you are able. Do this 10 times
• If you have space, lie face-down and do a similar movement, using your hands to lift your shoulders off the floor
• Stand against a wall and try to get your head back against the wall. Then see if you can get the back of your neck flat too

If you are always standing sideways on a slope (e.g. at the gutting table), either try to change sides after each haul, or move your hips sideways in the opposite direction to counteract the slope before and after gutting.

Manual handling
Manual handling codes are difficult to follow at sea. The manual handling book often states: lift between two people, on a flat, stable, non-slippery surface, etc.

If possible keep to safe handling techniques, lifting within your levels of ability. Often, however, it is the smallest weight or a trivial movement that turns out to be the straw that breaks the camel’s back.

What you were doing before you lifted may be a damaging factor, i.e. long term bending or sitting. So before you lift, do a few of the back arching movements to give your back a chance.
Slips, trips and falls
The risk factors are generally obvious: ladders, confined spaces, equipment, water, fish slime, darkness, etc.

After any initial first aid treatment, remember RICE: Rest, Ice, Compression, Elevation. A visit to a physiotherapist when you get ashore may well get you moving and pain-free faster.

Sleeping positions
‘Somewhere to sleep’ may be the net hold or just on deck. Those with the luxury of bunks have a better chance of a few hours of sleep. But the bunks are often smaller than beds at home. Wherever you sleep, before you head off on deck again give yourself a stretch out with your hands on your hips and bend backwards a few times.

Action points
- Try to reduce the pressure on the spine when lying down. It can help to lie sideways with your legs slightly bent and with a cushion between them
- Spasm and tension respond well to gentle back massage
- Roll over or even stand up and walk for a few steps
- Non-steroidal anti-inflammatory medicines (NSAIDs) and painkillers (for example, ibuprofen and paracetamol) can really help, but check out the instructions on the packet
- Warm towels and cool compresses help relax muscles

Fishy fact?
Back physio is useless...
- False: Far from it, early physiotherapy after a back injury can get you back to work faster, enabling you not to miss the next trip

Did you know?
- The Seamen’s Hospital Society funds and promotes free, rapid-access physiotherapy for fishermen in several parts of the country. Call on 020 8858 3696 or visit www.seahospital.org.uk to find out if help is available in your area

Fender belly?
Scale matters
Eating a well-balanced diet can seriously improve your health by:
- Keeping your weight down
- Lowering your blood cholesterol
- Preventing high blood pressure

All of these lower your risk of getting heart disease, which is the single biggest killer, and things like diabetes and cancer.
A healthy diet is made up of foods from 5 different groups:
• Fruit and veg (your 5 A DAY!)
• Starchy foods – bread, rice, cereals, potatoes
• Proteins – meat, fish, eggs, beans
• Milk and dairy
• Fatty and sugary foods

4 *Top Tips for a healthy diet*
• Base all your meals on starchy foods and fruit and veg
• Eat more fish – at least one portion of oily fish a week
• Cut down on sugar and saturated fat (found in things like butter, cheese, whole milk and red meat)
• Try to eat less salt – no more than a teaspoon (6 grams) a day
**Fishy fat fact?**

Fat fishermen float...

- Possibly, but not with the rest of the crew using them as a buoyancy aid they don’t

**Fat facts**

Did you know:

- Seriously overweight people are 33% more likely to die from cancer than those with a healthy weight?
- Two out of every five people in the UK have high blood pressure?
- A person who is 12kg (about two stone) overweight is twice as likely to have a heart attack?
- Every year, 30,000 deaths are directly linked to obesity, and every 17.5 minutes a person dies of an obesity-related illness?

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**Salt and blood pressure**

Eating too much salt (more than 6 grams or a teaspoon a day) is bad for your health. This is because it can raise your blood pressure. Having high blood pressure triples your chances of heart disease and stroke. Did you know that 75% of the salt we eat is already in the food we buy? But if you know what to look for, you can start choosing foods that are lower in salt.

**Tips to reduce your salt intake**

- Eat home-cooked meals rather than ready-made
- Don’t add salt when cooking – use herbs, garlic and spices instead – or at the table
- Go easy on smoked foods and processed meats like ham and bacon
- Check the labels on bought foods – see how much salt is in the food per 100g

**Fruit and veg**

Unless you have been hiding under a rock for the past few years you will know that eating plenty of fruit and vegetables is good for your health. Aim to eat at least five portions a day. This can include fresh, frozen and tinned and remember fruit juice and dried fruit can count as one portion a day too.
Smoking

Herring last ages with smoking, unlike fishermen’s lungs.

Fishy fact?

Danger from smoking is exaggerated...

- False: Smoking harms nearly every organ in the body
- It is the greatest cause of bronchitis, emphysema, heart disease, lung cancer and cancer in other organs
- One in two long-term smokers will die early as a result of smoking – half of these in middle age
- Smoking is also linked to erection problems

Fisherman’s fatalism

‘I’ve been smoking for years, not much point in stopping now. The damage is done’.

Nothing could be further from the truth. Once you’ve stopped smoking, your body will begin to heal within 20 minutes, beginning to repair the damage done by years of smoking.

- After 20 minutes your blood pressure and pulse will return to normal
- After eight hours your blood oxygen levels will return to normal and your risk of having a heart attack will fall
• After 24 hours carbon monoxide will leave your body. Your lungs will start to clear out smoke-related rubbish
• After 48 hours your body will be nicotine-free, and your sense of taste and smell will improve
• After 72 hours you will breathe easier and you will have more energy
• After two to 12 weeks your circulation will improve, and it will be easier for you to walk and exercise
• After three to nine months your breathing will improve. You can say goodbye to coughing, shortness of breath and wheezing
• After five years of not smoking your risk of having a heart attack will have halved
• After 10 years of not smoking your risk of lung cancer falls to about half that of a smoker

Preparing to stop smoking is about being practical and having a plan. Thousands of people stop smoking for good every day, and you can, too. If you and your shipmates all give up at the same time you can support each other.

**Action points**
• Contact your local NHS Stop Smoking Service – a free service where trained experts are waiting to help you. You can talk to an adviser or share your experiences as part of a group
• Sign up to the Together Programme by contacting the NHS Smoking Helpline
• Use nicotine-replacement products such as patches, gum and inhalators to cope with your withdrawal symptoms and cravings
• If you have a smartphone, download the NHS ‘Quit Smoking’ app
Prostate problems

**Big prostate: Big problem?**
Only men have a prostate gland. It’s round and about the size of a golf ball. It is in the pelvis, against the base of the bladder. The prostate surrounds the urethra – the tube that runs from your bladder inside your penis to the outside (you pee through it). Imagine the prostate as a fat rubber washer around a bit of tubing. In most men it gets bigger with age – this is called BPH (benign prostatic hypertrophy), often causing problems such as:

- Frequent need to pee, especially at night
- Rushing to the toilet
- Difficulty starting to pee
- Taking a long time on the job
- Having a weak flow
- Feeling that your bladder has not emptied properly
- Dribbling after you’ve finished peeing
- Pain or discomfort peeing

**Fishy facts?**

Private Godfrey in *Dad’s Army* had problems with his prostate…
- True: But then so did Captain Mainwaring and half the rest of the cast (over 90% of men over 70 will also suffer)

An enlarged prostate is more likely to develop cancer…
- False: There is no connection between BPH and cancer

The so called ‘G Spot’ is on the prostate…
- True: How very strange
**Prostate cancer**
Rare before the age of 45, this nasty cancer is an increasing risk with age. There are over 10,000 deaths annually in the UK and the risk of men developing prostate cancer is roughly the same as for women having breast cancer. Not many people know this.
Higher risk men include:
- Older men of African or Caribbean origin
- Men whose brother had prostate cancer
- Those with a high animal fat diet
So how do you know when you have prostate cancer? Good question. Most men don’t until it is well developed. Symptoms include those of an enlarged prostate, which is confusing. If in doubt see the doctor.

**Are there any checks?**
Increasing levels of a protein in the blood called Prostate Specific Antigen (PSA) can indicate a growing cancer, but it is not a definitive test and you would be referred to a urologist to make sure.

**Can I avoid it?**
Other than avoiding a high animal fat diet (and possibly eating lots of tomatoes) the best bet is early diagnosis, as we are still not sure what causes prostate cancer.

**Bowel cancer**
Bowel cancer is a disease of the large bowel (colon) or rectum. It is also sometimes called colorectal or colon cancer.
- It is the second largest cause of cancer deaths in the UK
- In 2006 there were over 30,000 new cases of bowel cancer in England and over 14,000 deaths
- Around one in 20 people will get bowel cancer at some point in their life

**Causes of bowel cancer**
The definite cause of bowel cancer is still a mystery. But we know some things do increase your risk:
- Eating lots of processed food, fat and sugar
- Not eating enough fruit and vegetables
- Being overweight
- Smoking
- Not getting enough exercise
- Having a close family member with bowel cancer
**Better sooner than later**

Being ‘bowel aware’ is the name of the game. Guts play up at the best of times but there are some warning signs that you shouldn’t ignore:

- A **persistent** change in normal bowel habit, such as going more often and diarrhoea, especially if you are also bleeding from your bottom
- Bleeding from the bottom without any reason
- A lump in your tummy or back passage felt by your doctor
- Pain that affects your appetite
- Unexplained iron deficiency
- Unexplained weight loss
- Unexplained extreme tiredness

If you have any of these symptoms for four weeks you should go and see your GP.

Hang on before you reach for the ship-to-shore radio: *please remember that most of these symptoms will not be cancer.*

**Action points**

- See your GP if you have any of the above symptoms for four weeks – early diagnosis increases your survival chances enormously
- Take part in the NHS bowel screening programme if you’re in your sixties (you’ll be sent a test in the post!)

**Testicular cancer**

A young man’s condition, it’s the single biggest cause of cancer-related death in men aged between 18 and 35.

Symptoms of testicular cancer:

- A lump on one testicle
- Pain and tenderness in either testicle
- Discharge (pus or smelly goo) from the penis
- Blood in the sperm when you ejaculate
- A build-up of fluid inside the testicular sac (scrotum)
- A heavy dragging feeling in the groin or scrotum
- An increase in the size of a testicle
- An enlargement of the breasts, with or without tenderness
Action points

- Have your monthly pollock check lying in a warm bath or during a long shower, as this makes the skin of the scrotum softer
- Hold the scrotum in the palm of your hand and feel the difference between the testicles. You will very probably feel that one is larger and lying lower, which is completely normal
- Examine each one in turn, and then compare them with each other. Use both hands and gently roll each testicle between your thumb and forefinger. Both should be smooth so check for any lumps or swellings. Remember that the duct carrying sperm to the penis, the epididymis, normally feels bumpy. It lies along the top and back of the testicle
- Don’t ignore a lump, check it out with your GP

Fishy facts?

The more times you check the better...

- False: Checking too often can actually make it more difficult to notice any difference

Partners can often do it better for you...

- True: More fun too

Sexual health

Erectile dysfunction (ED/impotence)

There is still confusion between erectile dysfunction (ED/impotence) and infertility. A man can father children without being able to have an erection. Problems with erections are common. At least one in 10 British men have had some sort of erectile dysfunction at some stage in their lives. Furthermore, around one man in 20 has permanent erectile dysfunction problems. This is not helped by most men’s reluctance to discuss these problems, despite the fact that virtually all of them can be overcome by relatively simple treatments.
At one time, what was going on between a man’s ears was considered the major factor for ED. We now know that less than one third of all cases will be purely psychological, and will often respond well to non-clinical treatments such as sex counselling.

Generally speaking, if you have erections at any time other than during attempted intercourse then you have a psychological rather than physiological problem. Successful erections during television programmes, sexy videos or self-masturbation bode well for the future, although it is not a 100 per cent test.

**Age: the great escape**

If ever there was a universal scapegoat for things that go wrong with the human body, particularly sexual activity, it has to be ‘too many birthdays’. Thankfully we are realising that sex is not just for the young and the enjoyment of sex can go on indefinitely. Expressions such as ‘dirty old man’ are becoming less common as we all live longer and older people predominate in our society.

Some medicines, such as anti-depressants and blood pressure tablets, are known to cause problems with erections. Ask your pharmacist for advice. You can probably change them.

Alcohol is a common cause. Obviously binge drinking has an immediate effect but chronic alcohol abuse can lead to permanent problems with erectile dysfunction.

Tobacco has an immediate short-term effect but is a much worse long-term factor. You can’t enjoy an erection when you’re dead.

Diabetes can cause a problem with the small nerves which affects the ability to have an erection and tends to go undiagnosed for many years.

**Check it out**

A proper medical check-up is needed to look for any underlying cause of erectile dysfunction.

- Your history will be the most important tool for diagnosis, but various tests on hormone levels are often performed
- Some diseases which run in families, such as diabetes, hypertension or depression, can also be an important clue to diagnosis
- Details of drinking habits (remember brewer’s droop?), smoking, diet and exercise can all be important

**Prevention**

Avoiding excessive alcohol and tobacco are the obvious first lines of attack. Check with your doctor whether any drugs you are taking could be part of the problem.
Sexually transmitted infections (STIs)

The best way to prevent sexually transmitted infections is to practise safer sex. Use a condom whenever you have sex (unless you are trying to start a family, or in a monogamous relationship), because STIs can be a serious problem. They can affect you at any age, whether you’re straight or gay, in a long-term relationship or with a casual partner. Symptoms don’t always show up immediately, so you could have been infected recently or a long time ago. If you have had unsafe sex or are at all worried, you can have a confidential check-up, and treatment if needed, at a genitourinary medicine (GUM) or STI clinic.

Although extra lubrication is sometimes needed, do not use oil-based lubricants such as petroleum jelly or baby oil with condoms, as they will damage the condom (as can lipstick!). There are water-based lubricants available, but if you are not sure, ask a pharmacist – they will not be embarrassed to give you advice.
Finding the best service at the right place

Getting to see a health professional can be challenging when you’re frequently away at sea. There are increasingly more ways to access health advice and information though, some of which will be available in your area or will suit you better than others.

Unsure where your nearest health service contact is? If you have a smartphone you can download NHS Local’s NearMe app which will find your nearest GP, hospital or pharmacist anywhere in England.

Pharmacists: more than just blue bottles

Pharmacists are highly-qualified professionals providing advice on the use and selection of prescription and over-the-counter (OTC) medicines. They can give advice on how to manage small problems and common conditions. This includes lifestyle advice about eating habits, exercise and stopping smoking, but they will also tell you where you can get further advice.
**NHS Direct:**
*direct and to the point*

NHS Direct provides 24-hour confidential health advice and information.

Phone 0845 4647 or visit NHS Direct Online at www.nhsdirect.nhs.uk

In Scotland the same service is provided by NHS24 (www.nhs24.com or call 08454 242424).

**Doctors’ surgeries**

Doctors are often available from around 8.30am to 6pm (or later) on weekdays. Calling at other times will put you in touch with an out-of-hours system. It’s always best to see your own doctor if possible, so unless your problem is urgent and cannot wait, you should make an appointment to be seen by your normal doctor. If you tell the practice that you are a fisherman they may be more willing to accommodate you with one of their emergency appointment slots.

**Getting the best from your doctor**

- Write down your symptoms before you see your doctor. It’s extremely easy to forget the most important things during the examination.
- Doctors will spot important clues about a problem by asking questions such as: When did the problem start and how did it feel? Did anyone else suffer as well? Has this ever happened before? What have you done about it so far? Are you taking any medicine for it?
- Ask questions, and don’t be afraid to ask your doctor to give more information or make something clear that you don’t understand. Asking them to write it down for you is a good idea.
- Get to the point – if you have a lump or bump say so. Time is limited so there is a real danger of you coming out with a prescription for a sore nose when you might need a serious problem sorted.
- Have your prescription explained, and ask whether you can buy any medicines from your chemist. Make sure you know what each medicine is for. Some medicines clash badly with alcohol.
NHS Walk-in Centres: a step in the right direction
Highly qualified NHS nurses offer a range of convenient services, with no need to make an appointment. They also offer good advice, look after minor illnesses and injuries, provide prescriptions and even provide emergency contraception. Look out for the centres in railway stations, shopping centres or on the high street. They normally open from 7am until 10pm, Monday to Friday, and 9am to 10pm, Saturday and Sunday.

The Dreadnought Medical Service
If a doctor or health professional assesses that you need further treatment and you face a long wait for this locally or find that the treatment is not available in your area, you may be able to get treatment at the Dreadnought Medical Service. Often called simply ‘the Dreadnought’, the facility offers priority medical treatment to eligible seafarers through the medical services at Guy’s and St Thomas’ NHS Foundation Trust in London. Its principal aim is to enable serving seafarers to return to work as soon as possible by providing treatment in a shorter timescale than may normally be offered at a seafarer’s local NHS hospital (although this cannot always be guaranteed). Dependents are also catered for where the illness of the spouse or child causes the seafarer grave concern.

If you would like to access the Dreadnought Medical Service, you need to get a referral from a GP. You can obtain a referral form at www.seahospital.org.uk or by calling 020 7188 2049.

Dentists
You will have to pay for dental check-ups and treatment unless you receive certain benefits. To find an NHS dentist in your area, go to www.nhs.uk

Accident and emergency
Accident and emergency departments treat serious accidents or life-threatening illnesses such as heart attacks or medical conditions which suddenly become worse. They are open 24 hours a day all year, and are often used by people who should really see their own doctor or a pharmacist.

You should be prepared to wait if there are people more seriously ill than you.

Don’t get caught in the net
Buying drugs from illegal internet sites is potentially very dangerous. Almost all such drugs are at best fake and useless, at worst harmful. You may also have your credit card details stolen as well. More important is the danger of not getting a medical diagnosis. Erection problems won’t kill you but linked diabetes or high blood pressure most certainly can. You should speak to your doctor or chemist about this first. More than ever before, the NHS has a range of services that offer convenient options that allow you to get the right treatment at the right time, and at the right place. These services can make life a lot easier so visit www.nhsdirect.nhs.uk or phone 0845 4647.
The Men's Health Forum's mini-manuals contain easy-to-read information covering a wide range of men's health subjects. The Men's Health Forum's aim is to be an independent and respected promoter of male health, and to tackle the issues and problems affecting the health and well-being of boys and men in England and Wales. Founded in 1994, The Men's Health Forum is a charity that works with a wide range of individuals and organisations to tackle male health issues. Well established and with an active membership, we work for the development of health services that meet men's needs and help men take more control of their own health and well-being. Our members, partners, staff and trustees bring plenty of experience in health care, media, business and activity.

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020 7922 7908
Website: www.menshealthforum.org.uk
Website: www.malehealth.co.uk (for fast, free, independent health information from the Men's Health Forum)
Our registered office is as listed above.
A registered charity (number 1087375).
A company limited by guarantee (number 4142349 – England).

The author and the publisher have taken care to make sure that the advice given in this edition is right at the time of publication. We advise you to read and understand the instructions and information included with all medicines we recommend, and to carefully consider whether a treatment is worth taking. The author and the publisher have no legal responsibility for the results of treatments, misuse or over-use of the remedies in this book or their level of success in individual cases. The author and the publisher do not intend this book to be used instead of advice from a medical practitioner, which you should always get for any symptom or illness.

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Useful contacts

Health advice and information, 24 hours a day
England – NHS Direct 0845 4647
Northern Ireland – www.mh.org.uk
Scotland – NHS24 0845 242424
Wales – NHS Direct 0845 4647

Useful websites about health
Change4life – www.nhs.uk/changes4life
Male health – www.malehealth.co.uk
NHSCheck – www.nhs.uk/nhscheck

Helplines (health related)
Alcohol
NHSCareline 0300 123 1087
www.drinkaware.co.uk
AA helpline 0845 769 7555
www.alcohols-anonymous.co.uk
Diabetes
Diabetes UK Helpline 0845 120 2960
www.diabetes.org.uk

Fishermen’s Mission port staff contact details

ABERDEEN AND FIFE (Forth Estuary north to Aberdeen)
Supt Mike Sandison
Tel: 01224 804061

BRIXHAM (Devon incl Plymouth, also Somerset and Dorset ports east to Weymouth)
Supt John Anderson
Tel: 01803 859123

EAST ANGLIA (King’s Lynn to Thames Estuary)
Supt Tim Jenkins
Tel: 01842 562569

EYEMOUTH (Scotland South East, Seabourne to Firth of Forth)
Supt George Ayoma
Tel: 01890 751313

FLEETWOOD (incl Cumbria, Workington, Whitehaven, Maryport)
Supt George Ayoma
Tel: 01253 772372

FRASERBURGH (and Moray coast, incl Macduff, Banff, Buckie, Inverness)
Supt Murray Campbell
Tel: 01346 518388

HULL (incl Bridlington, Filey, Scarborough, Whitby)
Supt Tracey Oliver
Tel: 01482 393440

KINTYRE and OBAN (incl Campbelltown, Tarbert, Islay)
Supt Matthew Ramsay
Mo: 07788 674376

LIGHTHOUSE (incl Fort William, Skye)
Supt Murray Campbell
Tel: 01346 518388

NEWLYN (Cornwall)
Supt Keith Dickson
Tel: 01736 393499

NORTH SHIELDS (incl Hartlepool, Blyth, Amble)
Supt Peter Dade
Tel: 01912 571316

NORTHERN IRELAND (plus emergency incidents south of border and in the Isle of Man)
Supt Maurice Lake
Tel: 02841 760000

PETERHEAD
Supt George Power
Tel: 01779 472940

SCRABSTER (North of Scotland incl Ullapool, Lochinver, Scrabster, Wick, Helmsdale, Avocol)
Supt Colin MacKay
Tel: 01847 892402

SHETLAND (Leirwick)
Supt Aubrey Jamieson
Tel: 01205 832703

SOUTH OF ENGLAND (Hastings: Poole to Thames Estuary)
Supt Peter Shaw
Tel: 01622 826543

SOUTH WEST SCOTLAND
(Troon, Clyde, Solway)
Area Officer Paula Daly
Tel: 01292 316500

STORMNOWAY (Outer Hebrides incl Lewis, Harris, North Uist, South Uist, Barra)
Supt Finlay Macleod
Tel: 01851 704424

WALES (Milford Haven)
Supt Greg Phillips
Tel: 01671 704424

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Fishermen’s Friends

Finally: Just as when setting out to sea, plan ahead with your health. Don’t wait for things to go wrong, they will usually happen at exactly the worst possible time!

Come on lads – just another few stretches before we set off!