

JUNE-JULY 2015

Your next appointment:



> *Overcoming Bullying & Fatigue*



> *Bedwetting in the Adolescent*



> *I Have GORD: What Next?*



> *PCOS & Diet*

TAKE ME HOME!

Enjoy this free newsletter

Please remember that decisions about medical care should be made in consultation with your health care provider so discuss with your doctor before acting on any of the information.

www.healthnews.net.au

● PRACTICE DOCTORS

Dr Kandiah Sritharan

MBBS, LRCP, MRCS, DA, DRCOG
Aged Care, Family Medicine

Dr Peter Lim

MBBS
Circumcisions, Minor Surgery

Dr Stuart Burton

MBBS(WA), DipRACOG, FRACGP
Anaesthetics, Palliative Care

Dr Adrian Jameson

MBBS(WA), DA(U.K.), DipRACOG,
Anaesthetics, Colposcopy, Obstetrics

Dr Colin Stevens

MBBS(WA), FRCS(Ed)
Family Medicine, Vasectomy, Skin Cancer Surgery

Dr Ted Collinson

MA, MB, BChir(Cantab), MRCP, DRCOG, FRACGP
Aged Care, Minor Surgery, Sport's Medicine

Dr Jane Potter

BSc, MBBS, MRCP, DCH, FRACGP
Children & Women's Health

Dr Leif Thonell

MBBCh, D.T.M.H. M.Fam. Med. DA., FRACGP
Men's Health, Anaesthetics, Tropical Medicine

Dr Michelle Skellern

MBBCh, FRACGP
Family Medicine, Women's Health

Dr Fatin Wajdi

MBChB, MRCP(UK), FRACGP
Female Arabic Speaking, Family Medicine

Dr Deby Rori

MBBS, FRACGP
Family Medicine

● CHRONIC DISEASE MANAGEMENT

Primary Health Nurses:

Wendy & Sam

● PRACTICE STAFF

Practice Managers: Jackie Lewis & Tina Pollock

Nursing Staff: Fiona, Heather, Shelley, Bindu, Cindy & Coralie

Reception Supervisor: Matilda Wagennar

Reception Staff: Heather, Liz, Sylvia, Monique, Paula, Sue, Kerrie, Marysia, Jennifer, Gemma & Tammy

Nursing Home Liaison: Jeni

● SURGERY HOURS

Monday to Friday 7.00 am to 7.30 pm

Saturday 8.30 am to 2.00 pm

Sunday & Public Holidays 9.00 am to 11.00 am

For Emergency After Hours phone advice ring: 0417 924 576

● AFTERHOURS & EMERGENCY

This Practice Supports GP Afterhours Armadale

Weekdays 7pm – 10pm

Weekends & Public Holidays 2pm – 9pm

Tel: 9391 2285



● OTHER SERVICES OFFERED

- Audiometry
- Aviation Medicals
- Epidural Service
- Pregnancy Care & Deliveries
- Travel Advice
- Colposcopy
- Palliative Care
- Wound Dressings
- Podiatry
- Mental Health
- Hospital Care at Armadale or Galliers Private Hospital
- Diving Medicals
- Heart Traces
- Employment Medicals
- Vasectomy
- Immunisations
- Home Visits
- Pathology
- Veterans' Medical Problems
- Lung Function Tests

● BILLING ARRANGEMENTS

This practice does not bulk bill routinely. This practice bulk bills Aged Pensioners and Children under the age of 16 at certain times.

Fees for common services are displayed on the board at accounts.

Due to the complexity special fees are payable for Maternity, Insurance and some other procedures.

Cash payment is preferred at the time of the consultation; credit card or EFTPOS facilities are available.

● PRESCRIPTIONS & OTHER TELEPHONE SERVICES

Prescriptions can be ordered by phone.

Please allow 3 days, and there will be a fee of \$10.00.

Our Practice Nurse can advise on simple matters or tell you if a matter requires an appointment with the Doctor.

● APPOINTMENTS

Online appointment now available – Book in with any doctor of your choice. Just go to www.kelvale.com.au or use your smart phone Appointuit App.

Appointments are made at 10 minute intervals.

Longer consultations can be requested.

You may be asked to make longer times for Insurance, Diving and other medicals and for Counselling.

Please advise the reception staff if the consultation is related to a Work Place injury.

▷ **Please see the Rear Cover for more practice information.**





Overcoming Bullying and Fatigue at Work

Bullying creates stress, which in turn can create fatigue

Modern technology is actually causing us to work more hours rather than fewer hours. We can now take work home on our computer, tablet or phone. We can work anywhere with Wi-Fi coverage. Coupled with this, today's 24/7 society means many work night shifts or rotate day-night shifts. Not surprisingly, many people suffer fatigue.

Most fatigue treatment is simple and requires practise and perseverance to work, as well as a body and mind approach. More fruits and vegetables and less processed food is a start. Regular exercise and regular adequate water intake, all help.

Mindfulness training is becoming popular, as is yoga and meditation, to help people both "switch off" and use the power of the mind. To be able to do this, getting enough sleep is critical. If need be, catch up on the weekend with a nap. Aim to go to bed around the same time each night, have the bedroom dark and switch off screens at least 30 minutes before bed. If working night-shift develop your own routine for sleep time.

Take time off each year to 'recharge the batteries' and 'put fuel in your tank'. Don't let your holidays accrue!

Bullying behaviour, which was "laughed off" a generation back, is no longer

acceptable. People are under enough pressure as it is. To be repeatedly threatened or demeaned is soul destroying. It may be:

- physical, through pushing or shoving,
- subtle harassment, like hiding possessions.
- verbal abuse (which does not have to include foul language).

In the workplace, usually the perpetrator is someone in a higher position. It is always distressing to the victim and can make going to work highly stressful.

Talk to your doctor about any stress (or other) symptoms you have, so these can be documented and you can be treated if need be. This may include referral for counselling. You may also need to talk to your health and safety officer, employer or in some instances a lawyer, or the relevant industrial relations body. Laws allow anyone feeling bullied to make a formal complaint and this has to be investigated.

Shingles: What Is It?

Shingles is a (usually) painful viral infection of nerves during which blisters appear in the skin. It can occur anywhere, however the chest, back and abdomen are the most common sites.

The culprit is the varicella zoster virus, a herpes virus best known for causing chicken pox in childhood, then perhaps shingles in later life. This reactivation of the original chicken pox virus occurs after the virus has sat dormant for many years in nerve cells.

Triggers for shingles are similar to those for 'cold sores', so you often hear of another illness or stress sparking an infection. There may be no trigger obvious.

The rash often looks like a band or belt as it follows the line of the nerve endings in the skin. Typically, there is a burning pain first and blisters appear a day or two later. Blisters can be grouped or separated and last between a few days and a few weeks. The infection can return but most people only get one episode.

The virus can be spread by direct contact with the blisters – a serious risk for pregnant women if they have not had chicken pox in the past.

There is no "cure" but medication on prescription can shorten the course. It must be started within 72 hours of the rash appearing. Other treatments to ease symptoms include painkillers and topical gels with local anaesthetic.

A small number of people can get 'post herpetic neuralgia' where the burning pain persists long after the rash fades. This is a nerve pain and does not always respond to regular painkillers. There are specific medications, which can be used to ease the symptoms. Talk to your doctor about this.

Groups of blisters that emerge after a period of unexplained pain or skin discomfort, are nearly always due to this herpes virus.



Weblink www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Shingles



Bedwetting in the Adolescent

Enuresis means passing urine while asleep and some older children can be affected. Roughly 10% of ten-year-olds are not dry at night. This figure drops to 1% by mid teens. The cause in teenagers is generally the same as in young children. That is, the brain has not established control over bladder function at night.

Although not harmful, it causes considerable distress and embarrassment to the sufferer. This is even more so for teens.

It is rare to have an underlying abnormality of the kidneys or bladder, but this should be checked if it had not been done earlier (usually the problem has persisted from younger years).

Treatments have often been tried before but are worth revisiting.

Basic things like emptying the bladder before bed and restricting fluid after 6pm help. The first line is an alarm, which goes off if the sheet becomes wet, waking the person. The aim is to establish a link between passing urine and waking up.

Even though you may feel embarrassed, talk to your doctor about the problem. Medications are available on prescription too. There is a nasal spray and tablets that can be used. In most instances these help and the situation ultimately resolves. Enuresis rarely persists into adult life and those affected can be controlled with medication usually.



Weblink www.continence.org.au and search "teenager"



I Have GORD: What Next?

Heartburn is a common symptom and happens when acid from the stomach rises up into the gullet (or oesophagus). Almost everyone gets this at some stage, especially if they eat or drink too much. The stomach produces acid to help digest food and because its lining is adapted to this, acid in the stomach does not cause pain. Not so with the oesophagus lining, where acid "burns".

Gastro-oesophageal reflux disease (GORD) is where acid regurgitates into the oesophagus regularly, regardless of what we eat.

In some this is due to a hiatus hernia, where the sphincter (valve) between the anatomical stomach and oesophagus stops working, usually because the stomach herniates (or slides) into the chest cavity from its usual place in the abdomen.

This can be demonstrated on gastroscopy where a flexible telescope (or

endoscope) is inserted down into the stomach whilst you are sedated.

Treatment for GORD starts with avoiding any foods that set off symptoms – alcohol, dairy and spicy foods are common triggers. So are smoking and being overweight.

Antacids purchased over the counter or on prescription neutralise acid and usually decrease that 'heartburn' sensation within 10 minutes. Next step is use of medications to reduce acid production, which may be needed for months depending on the severity of the symptoms and likely cause. If symptoms settle quickly there is no need for investigations but if they persist then a gastroscopy may be needed.

Women with lumpy breasts can help their doctor through self-examination.



About Lumpy Breasts

Breast tissue is a mix of glands, fatty cells and a connective tissue "scaffold". Some have the gland tissue arranged loosely on the connective tissue. In others the glands coalesce and form lumps, which can be felt. This is sometimes called "lumpy breasts", which is not abnormal and does not lead to cancer. However, it can be harder to detect new lumps in a lumpy versus non-lumpy breast.

Regular breast self examination lets women become familiar with what the breast normally feels like, including any lumps. Hence if there is a change this can be noticed sooner and medical advice sought. Fortunately the vast majority of lumps in the breast are not cancerous.

Lumpy breast can be due to hormonal effects. This can vary through the cycle, being most prominent in the second half of the cycle and almost disappearing just after the period. Non-cancerous breast cysts are also common, especially in women 35 to 50. Fibro-adenomas are non-cancerous

lumps made of gland and fibrous tissue and are more common in younger women. They can be painful, especially just before a period. Hence they are sometimes removed surgically.

Most lumps are harmless but it is vital to see your doctor if you notice anything you are not sure about. A mammogram or ultrasound may be required and in some cases a fine needle biopsy done to confirm diagnosis.

Women over 50 are entitled to a free screening mammogram every two years. Those younger can be tested when the need arises.



PCOS & Diet

Diets can help. Weight loss is first line treatment in PolyCystic Ovary Syndrome – just 5% to 10% weight loss helps symptoms and leads to a greater chance of pregnancy. We know PCOS affects about 1 in 7 women during their reproductive years, which makes it one of the commonest hormonal disorders for women.

The PCOS tendency is inherited to some degree but lifestyle factors also play a part. Heart problems, diabetes, mental health problems and eating disorders are part of the pattern and symptoms vary a lot, such as infrequent periods, acne and hairiness. Insulin resistance (where insulin levels are high after eating) occurs in some women, who are also prone to weight gain.

There is no 'PCOS weight loss diet' but whole grains, lean protein, fresh fruit and vegetables, with fats that come from plants or fish are recommended.

Strong support from family and friends and regular follow-up helps chances of success. So does regular exercise, particularly after meals.

Some celebrities, such as Posh Spice, have successfully kept their weight down and had children despite PCOS.



Weblink www.betterhealth.vic.gov.au search "lumpy breasts"



Weblink <http://jeanhailes.org.au/health-a-z/pcos>



LAUGHTER

the Best Medicine

Upon entering a little country store, the stranger noticed a sign warning, "Danger! Beware of dog!" posted on the glass door. Inside, he noticed a harmless old dog asleep on the floor beside the cash register. "Is that the dog folks are supposed to beware of?" he asked the owner.

"Yep, that's him," came the reply.

The stranger couldn't help but be amused. "That certainly doesn't look like a dangerous dog to me. Why in the world would you post that sign?"

"Because," the owner explained, "before I posted that sign, people kept tripping over him."

SUDOKU

6	3		2					7
					3			2
	9		8			5		
2	8	5						
			9		5		2	
			1			7	6	
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		8				1		4

Kelvale Medical Group

● **SPECIAL PRACTICE NOTES**
Patient Feedback. We welcome your comments or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer, you can contact the Health and Disability Services Complaints Office (HaDSCO) on 1800 813 583 (Free Call).

Despite our best intentions, we sometimes run late! This is because someone has needed unexpected urgent attention. Thank you for your consideration.

Communication. A doctor is available during normal surgery hours for emergency advice. Our staff are experienced in deciding the appropriate response to any phone request.

Patient Privacy. This practice protects your personal health information to ensure it is only available to authorised staff members for the intended purposes and to comply with the Privacy Act. To obtain a copy of our Privacy Statement or your medical records, please ask.

Reminder system. Because our practice is committed to preventive care, we may send you an occasional reminder regarding health services appropriate to your care. If you wish to opt out of this, please let us know.

Test Results. Results are reviewed by the doctors and acted on in a timely manner, with your health in mind. We will contact you if necessary.

Healthful Hint

MEDICAL ADVICE FOR EXERCISE

When starting an exercise program, set realistic goals, start slowly, make it interesting and keep track of your progress. Chat with your doctor for advice if you: are on medication; haven't exercised for a long time; have had major surgery or have any medical conditions or physical limitations; or have any concerns about your ability to start regular physical activity.

LAMB SHANK CASSEROLE

SUITABLE FOR SLOW COOKER/TAGINE OR CASSEROLE IN OVEN. PREHEAT OVEN TO 150 DEGREES

INGREDIENTS

- 4 lamb shanks
- 1 tblspn Olive oil
- 2 medium size brown onions chopped
- 3 cloves garlic crushed
- 1 tablespoon ground ginger
- 2 teaspoons ground cumin
- 2 teaspoons sweet paprika
- 4 cups (1 litre) Beef Stock
- 400gm can chopped tomatoes
- 1 punnet Button mushrooms halved
- 2 medium carrots chopped
- 100gms pitted Kalamata olives
- 150gms fresh dates

METHOD

Heat the oil in a heavy based pot over high heat. Add onion & garlic, stirring until onion is soft. Add ginger, cumin & paprika until aromatic. Add lamb shanks, beef stock, tomatoes, carrots, mushrooms & bring to boil. Remove from heat. Put into casserole or tagine. Cover and bake for



2 hours. Add the olives and dates and set aside, covered for 5 minutes, or until heated through. Otherwise put in slow cooker making sure the lamb is covered by the liquid. Add olives and dates.

Cook for approximately 6-8 hours on low setting or until lamb is soft and falling off the bone.

Serve on a bed of mashed potato with steamed fresh vegetables or on a bed of couscous.

Questions for That Other Person!

- Heartburn is mainly due to "lifestyle" but there can be a physical abnormality. What is it?
- Regular mammograms are particularly recommended in women with lumpy breasts. Why?
- What percentage of adolescents are affected by bedwetting?
- Workplace bullying – do you know who to complain to if it happens to you?
- Someone with shingles should avoid certain people. Who?

SUDOKU Solution

4	7	1	6	3	9	8	2	5
8	9	2	7	1	4	6	3	9
6	5	8	2	5	7	1	4	6
9	6	3	8	2	2	8	1	4
6	9	7	2	8	1	6	4	3
3	2	8	6	9	4	6	9	7
1	7	1	7	6	3	7	6	8
2	8	5	4	1	9	6	3	7
7	6	2	8	8	6	4	5	3
8	5	6	1	7	6	3	6	4
8	5	6	1	7	6	3	6	4
6	3	4	2	5	1	9	8	7