



FREE TO TAKE HOME!

DECEMBER 2018 - JANUARY 2019 EDITION



Hearing Loss in Adults



Heart Attack Alert!



Beating Christmas Stress



Plantar Fasciitis – Heel Pain

YOUR NEXT APPOINTMENT:

● AFTER HOURS & EMERGENCY

In case of a medical emergency call '000' and ask for an ambulance immediately. For all other After hours medical enquiries, after Stawell Medical Centre has closed, on weekends or public holidays, please call **5358 1410** and your call will put through to our after hours service for advice.

● PRACTICE DOCTORS

Dr Andrew Cunningham MBBS

Dr Eleazer Okwor-Ojwang MBBS

Dr Venkateshwar Komerelly MBBS

Dr Swetha Bandaru MBBS

Dr Adnan Rasheed MBBS, FRACGP

Dr Catherine Pye MBBS, FACRRM

Dr Sally Takahashi MBBS

● VISITING SURGEONS

Dr Iruka Kumarage MBBS, FRANZCOG

Mr Ahmed Naqeeb FRACS, FRCS, MBChB

Practice doctors are experienced in the broad range of general practice problems and the treatment of all age groups.

● VISITING PRIVATE PSYCHOLOGIST

Anne-Marie Cooper

● PRACTICE STAFF

Practice Manager:

Kim Hinkley

Administration Staff:

Kerryn, Jess, Tina, Rebecca, Melissa, Sharna, Deb & Holly

Nursing Staff:

Pam, Vicki, Jan, Rachel, Belinda, Bronwen & Crystal

● SURGERY HOURS

Monday – Friday

8.00am – 6.00pm

Saturday, Sunday & Public Holidays

(By appointment by the doctor at Urgent Care Centre, Stawell Regional Health - Urgent patients only)

All attendances at Stawell Regional Health Urgent Care Centre may incur an out of pocket fee of \$50.00

● BILLING ARRANGEMENTS

All patients are required to pay in full at the time of appointment. Medicare refunds can be processed immediately via TYRO terminal and deposited directly back into your account. Payment can be made by cash, credit card or EFTPOS. If you would like to know more please ask to speak to our accounts team.

Fees as of 1st July 2018:

Standard consult

Private \$75.00

Health Care Card Holder..... \$64.00

Pension Card Holder \$57.50

All patients under 16 and over 75 years of age will be bulk billed for appointments at Stawell Medical Centre Monday to Friday 8.00am to 6.00pm only.

After Hours fees apply to EVERYONE seen by a Doctor at Stawell Regional Health Urgent Care Centre:

Standard consult - Regular Hours

Saturday \$87.05

Sunday \$99.00

All attendances at Stawell Regional Health Urgent Care Centre may incur an out of pocket fee of \$50.00

● APPOINTMENTS

Consultation is by appointment. We have appointments available for urgent cases on the day.

Please let reception staff know if you would like a longer appointment, for a medical report, TAC or Workcover form or if you have several things you wish to discuss.

Home Visits. These are available on request. Please speak to reception if you would like further information.

If **more than one person** from your family would like to see the doctor, please ensure that a separate appointment is made for each person otherwise they may not be seen.

Time is valuable to all of us. If you are **unable to attend a booked appointment**, please let the practice know at least 2 hours prior. If you **fail to attend** a booked appointment without warning or explanation you may be charged a non-attendance fee. We may not be able to offer you booked appointments in the future either.

● SPECIAL PRACTICE NOTES

Stawell Medical Centres Values and Mission align with those of Stawell Regional Health;

Stawell Regional Health Mission

In partnership with our community, Stawell Regional Health will deliver high quality care and improve health outcomes by providing safe, accessible and integrated services.

Stawell Regional Health Vision

Caring for our community.

Despite our best intentions, we sometimes run late! This is because someone has needed unexpected or urgent medical attention. Be assured that when it comes to your appointment, your doctor will give your consult the time that it deserves. We thank you for your understanding and consideration.

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



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

Hearing Loss in Adults

Our senses become less acute as we get older. An estimated half of Australians aged 60-70 years have some hearing loss, and this increases to 80% for those over age 80. Severity, of course varies. Hearing loss can be 'sensorineural' (affecting the cochlea and or nerve), 'conductive' (blockage in the middle ear) or a mixture of the two. Generally, age-related loss is sensorineural and other risks include past noise exposure, a family tendency (genetics), ear trauma and chemical exposure.



With a nifty hearing aid the grandchildren's demands are heard!

 Weblink: www.healthdirect.gov.au/hearing-loss

As we age the hair cells in the inner ear become less effective. This change cannot be reversed. Typical symptoms are difficulty hearing voices, usually picking up speech in a crowded room or when there is background noise (e.g. television). Sometimes those with the affected person notice it first because they have to keep repeating themselves.

Hearing loss can be isolating as many feel (incorrectly) embarrassed about asking for speech to be repeated. Collectively, we tend to be less accepting of hearing loss than visual loss and the need for glasses. There is no valid reason for this.

Hearing can be assessed by an audiologist. Depending on circumstances you may need a referral from your GP. Apart from a proper hearing test in a sound proof booth, there are no other specific tests usually.

Treatment is use of a hearing aid. Waterproofing, size, directional microphones, etc vary with the price. When is a hearing aid needed? That depends on the person and how they and those around them are affected. Chat with your GP about any concerns you have with your hearing.

Quiz

- 1) How long did the Hundred Years War last?
- 2) Which country makes Panama hats?
- 3) From which animal do we get cat gut?
- 4) In which month do Russians celebrate the October Revolution?
- 5) What is a camel's hair brush made of?
- 6) The Canary Islands in the Pacific are named after what animal?
- 7) What was King George VI's first name?
- 8) What colour is a purple finch?
- 9) Where are Chinese gooseberries from?
- 10) What is the colour of the black box in a commercial airplane?

ANSWERS:
1) 116 years
2) Ecuador
3) Sheep and
Horses
4) November
5) Squirrel fur
6) Orange
7) Albert
8) Crimmon
9) New Zealand
10) Of course

Heart Attack Alert!

Heart disease kills Australians - 8011 deaths in 2016 but fatal heart attacks have decreased 30% in a decade. The Australian Institute of Health and Welfare (AIHW) estimates that 430,000 Australians have had a heart attack at some stage in their lives. If it happens to you, it is an emergency requiring an ambulance to hospital.

Typical symptoms are pain in the chest, left arm, neck, jaw or back, together with nausea, sweating, shortness of breath and feeling unwell. Not everyone gets typical symptoms. Risk factors include a family history, smoking, raised cholesterol, high blood pressure and having diabetes (but all may be absent).

Warning signs can include tiredness, chest discomfort on exertion and shortness of breath. Of course, not everyone with these symptoms is on the verge of a heart attack! However, it is far better to 'be safe than sorry' and even if there is a slight chance of heart attack you need an ambulance and hospital.

Diagnosis is based on history, electrocardiogram (ECG) and blood tests. You will likely have a coronary angiogram where dye is inserted into the arteries to examine blood flow to the heart. Deaths from heart attack have decreased due to better and earlier treatment. This can include medications, stenting (opening the artery) or surgery. Length of hospital stay is much less than in the past.

Prevention, where possible is the key. Don't smoke. Eat a healthy diet and maintain a healthy weight. Get some regular exercise. Have a regular check up with your GP.



Awareness of heart attack symptoms can come in handy

 Weblink: www.heartfoundation.org.au and www.betterhealth.vic.gov.au/health/conditionsandtreatments/heart-attack



Planning ahead can stop a lot of the Christmas stress.

Beating Christmas Stress

Christmas is a time of joy for most. But not all of us. Rates of depression and anxiety can be increased at Christmas but it need not be the case. Much of the stress we feel is self-imposed. The good news is that it can be reduced.

The best way to avoid a Christmas credit card hangover is to buy presents with cash. That way you can only spend what you have. The old adage about the gift counting still applies so don't feel the need to buy expensive presents for all. Small children can still get as much fun from the wrapping paper as the present.

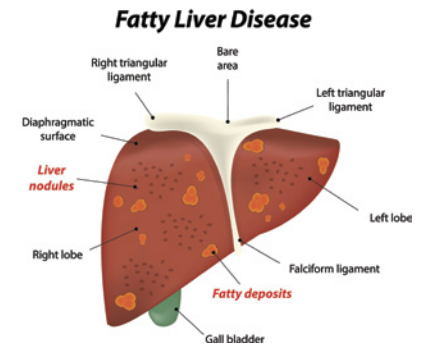
Many worry about weight gain over Christmas. This too is avoidable. Even if invited to multiple events, you do not have to attend all of them. You

can keep your weight in check by eating something before you go and by drinking plenty of water. You don't have to be the first to arrive or the last to leave. Keep up a regular exercise regime over the holiday period.

Christmas day lunch should be enjoyable. If you are stressed out about relatives coming over, delegate tasks so you don't have to do all the preparation. Whilst it is a bigger lunch than usual, don't cater for 30 people if only ten are coming. Be honest with yourself and your family about what is realistic. Don't try to do it all yourself.

If you are the sort who likes solitude it is OK to slip away and re-emerge on December 27. Don't feel pressured to socialise if you really do not want to. Christmas should be relaxing and enjoyable. This means different things to different people – do it your way.

Best wishes for a wonderful holiday season and a new year filled with peace and happiness.



Fatty Liver

Often symptomless, fatty liver disease is a build-up of fat in the liver cells. The commonest causes for this are too much alcohol, being overweight and diabetes. About 10% of Australians are affected. Because there is always some fat in the liver if more than 10% of the liver weight is made up of fat, then this is significant and called 'fatty liver'.

Generally, it is often detected on blood testing or imaging. In mild cases there may be no effects on the workings of the liver but there is this risk in the longer-term. In the worst cases there can be cirrhosis (scarring) and serious impact on the functioning of the liver.

Currently there is no specific treatment. Weight loss can lead to some reversal of fatty change and improvement in liver function. Where alcohol is a factor then abstinence is vital. Diabetes and high blood pressure can be associated with fatty liver and it is important that these are treated.

Prevention is the key. Eat a sensible diet and maintain a healthy weight. Do regular exercise and consume alcohol only in the drink safe levels. Talk to your doctor about getting your liver checked if appropriate.

Plantar Fasciitis – Heel Pain

A common cause of heel pain, 'plantar fasciitis' is inflammation of the tissue (plantar fascia) that runs along the sole of the foot connecting the heel to the toes, creating the arch of the foot. Risk factors include age, being overweight, sports which stress the heel (e.g. running) and spending long periods of time on the feet.

The main symptom is pain under the heel. It can be dull or sharp. It is often worse on rising in the morning, after prolonged sitting or after intense activity. Diagnosis is from the story and examination. X-rays generally do not show anything. Some changes in the fascia may be seen on ultrasound or MRI.

Treatment is a mix of improving symptoms and preventing further aggravation. Analgesics or anti-inflammatory medications may help in the short term but are not a cure. Avoid activities which aggravate the situation. Wear shoes with good arch support and cushioning. Purpose made insoles may be helpful as can be stretching, as advised by a podiatrist or physiotherapist.

In more severe cases cortisone injections may be recommended. Surgical treatment is viewed as a last resort.



Weblink: www.healthdirect.gov.au/plantar-fasciitis

Do not expect immediate results from treatment or get frustrated. Perseverance with treatment is important and most fasciitis improves with time.

Weblink: www.betterhealth.vic.gov.au/health/conditionsandtreatments/liver-fatty-liver-disease



FESTIVE SUMMER VEGETABLE SALAD (SERVES 8-10)

Ingredients

400gms thin green beans – trimmed
 400gms cherry tomatoes (mixed coloured tomatoes) – halved
 2-3 medium sized Lebanese cucumbers – halved and cut in to moon shapes
 4 spring onions – thinly sliced or 1 red onion – thinly sliced
 ½ large yellow capsicum – seeded and diced
 ½ large red capsicum – seeded and diced
 2-3 ears fresh corn – kernels removed
 2 avocados – peeled, pitted & diced
 ½ cup fresh coriander leaves – coarsely chopped
 1 fresh long red chilli, very thinly sliced into rounds
 Olives – optional
 Bocconcini halved - optional

Vinaigrette dressing

Prepare dressing day before and refrigerate overnight.

Stand at room temperature before serving (whisk again).

4 limes

1 large shallot finely chopped

¾ cup extra virgin olive oil

Grate 1 tablespoon of lime peel into a medium bowl.

Add ¾ cup lime juice.

Add shallot.

Whisk in oil.

Season with salt & pepper to taste.

Instructions

Bring a large saucepan of salted water to boil over high heat. Add beans and cook for 1-2 minutes or until bright green and crisp-tender.

Once cooked, drain and refrigerate until cold.

Once cold toss all ingredients together in a large salad bowl (keeping some coriander to sprinkle over top) with vinaigrette dressing.

Season salad.

Serve immediately.



Christmas Colour In!



Stawell Medical Centre
 A division of Stawell Regional Health

● SPECIAL PRACTICE NOTES

SMS reminders are sent to all registered mobile phones. Phone reminders are also available should you require this.

Electronic Communication.

Although most problems are best dealt with in a consultation with your doctor, our staff are experienced in helping you decide whether the matter requires an appointment, return phone call or urgent advice.

You are able to **contact the practice by email** as well should you need to. We do advise that this is not the most secure method of communication.

We have a **recall system** in place for all test results and chronic disease management.

Patient Health Information.

To obtain a copy of your health record or to obtain a copy of Stawell Regional Health "Protection and use of your health information" brochure or to view the Stawell Regional Health privacy policy, please ask to see our Practice Manager or Privacy Officer.

If you prefer you can contact the Health Services Commissioner Complaints and Information on; Telephone: 1300 582 113 or email: hsc@dhhs.vic.gov.au.

Patient Feedback. We welcome your feedback and invite you to fill out a "Compliment, Complaint and Feedback form". These are located near the entrance to the practice, in the reception area. You can also ask to speak to the Practice manager or your GP.

Test Results. Results are viewed by our doctors and acted upon in a timely manner, always with your health as a priority. Please make sure you have made an appointment with your doctor to review any results as they will not be given over the phone.

● SPECIALIST SERVICES

Stawell Regional Health has a large number of other Medical Services and Visiting Specialist's available. Our doctors have extensive knowledge of these and can advise you about whether a referral is appropriate and arrange for this to occur if needed.