



FREE TO TAKE HOME!

JUNE - JULY 2019 EDITION



Post-Traumatic Stress



Parkinson's disease



Headaches



Whooping cough

YOUR NEXT APPOINTMENT:

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

● **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, FRACGP
- Dr Venkateshwar Komerelly** MBBS, FRACGP
- Dr Swetha Bandaru** MBBS
- Dr Adnan Rasheed** MBBS, FRACGP
- Dr Catherine Pye** MBBS, FACRRM
- Dr Chris Ezeobi** MBBS
- Dr Wen Jiang** MBBS
- Dr Hussein Rabia** MBBS
- Dr Marcus Wilcox** 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.

● **PRACTICE STAFF**

- Practice Manager:**
Kim Hinkley
- Administration Staff:**
Kerryn, Jess, Tina, Rebecca, Melissa, Deb & Leah
- Nursing Staff:**
Pam, Vicki, Jan, Rachel, Belinda & Crystal

● **SURGERY HOURS**

Monday – Friday
8.30am – 5.30pm
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 WILL 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 8.30am to 5.30pm 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 WILL 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.**



Weblink www.beyondblue.org.au/the-facts/anxiety/types-of-anxiety/ptsd

Post-Traumatic Stress (War Veterans)

First described in the 1970's in Vietnam War Veterans, Post-Traumatic Stress Disorder (PTSD) is a reaction that people can develop after being through or witnessing a traumatic event which threatened life or safety of themselves or others. This includes war, natural disaster, assault or serious accident. It is estimated that 12% of Australians may experience it during their life. Risk factors, aside from trauma include a past history of other mental health problems and stress.

Symptoms include feelings of fear, flashbacks, sleep disturbances, anxiety, sweats, heart palpitations, being on high arousal, irritability, anger, emotional numbness and withdrawal from usual activities. They can start straight away or some weeks after the event and persist for weeks to years. PTSD can co-exist with other mental health issues such as depression or anxiety.

Diagnosis is by history (there are no specific examination findings or diagnostic tests). Bloods may be ordered to rule out other conditions.

Treatments mainly involve psychological

counselling of which there are different forms. Medication may be advised but not in the first four weeks of symptoms and usually not until psychological treatments have been started.

Lifestyle measures which can help include meditation and mindfulness, regular exercise, avoiding alcohol, getting adequate sleep (have a regular sleep routine). For most there will be improvement over time and full recovery. Some may have relapses and need further treatment. Some will need long term treatment.

If you have been subjected to any trauma or have any concerns talk to your GP.

Parkinson's disease

A progressive degenerative condition that affects body movements, Parkinson's disease affects around 40,000 Australians. It is more common in men and it is more common in older people. It is caused by a loss of dopamine production in the brain but why this happens is not known. Genetic factors, some toxins and head trauma may be involved.

The condition may start six years before the onset of symptoms, which typically are trembling of the hands and arms, stiffness of the muscles, a shuffling with walking and loss of facial expression. Not all symptoms are present in all people and they don't all start concurrently.

Diagnosis is based on history and examination. There is no specific diagnostic test to diagnose Parkinson's. However, you may be sent for tests to exclude other causes of tremor. Most instances are referred to a specialist neurologist for an opinion. It can take some time to diagnose as in mild cases the diagnosis is not clear. Paradoxically this does not matter



Weblink <https://brainfoundation.org.au/disorders/parkinsons-disease/>

as use of medication is generally delayed till symptoms are severe enough to warrant them. This is because effectiveness can wane over time.

Lifestyle measures such as not smoking, maintaining a healthy weight and exercise can help. Physiotherapy can play a role. There are a number of potential medications which can be used and surgery is an option in selected cases. There is no one size fits all treatment regime.

**SUDOKU
SOLUTION**

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Headaches

Headache is one of the commonest symptoms we experience. Virtually everyone will get a headache at some stage, but some people get them often. Whilst there are serious causes, the vast majority are not and treatments are generally successful.

The commonest form of headache is the "tension type headache" felt as a band around the head. It can last from half an hour to an entire day, occur rarely or be as often as 15 days per month. Stress can be a factor but not necessarily. Treatment is with simple analgesia. Ensure you drink adequate water.

Eye strain can lead to headache. They will come on with reading or watching screens. Treatment is getting your eyes checked and appropriate glasses if need be. Neck strain can cause headaches as can arthritis of the neck. Heat treatments on the neck and physiotherapy may help.

Sinuses can cause headaches due to infection or congestion. It can be seasonal. Treatment depends on cause.

Migraines are a particular type of headache, more common in females and usually one sided, and which can be associated with nausea or vomiting and sometimes an aura. Avoiding known triggers helps.



Headaches can be part of a viral illness or various other medical conditions.

Accurate assessment by your GP is important. This is through history, examination and in some instance's investigations. Treatment is directed towards the underlying cause so is variable.

General preventative measures for headaches include getting enough sleep, drinking enough water, managing stress and avoiding any known specific triggers. Simple analgesics have a role but should not be relied upon.



 Weblink www.mydr.com.au/respiratory-health/whooping-cough-overview

Whooping cough

Whilst rare these days due to vaccination, there are still over 1000 cases of the infection "whooping cough" in Australia each year. It is caused by the bacteria *Bordetella pertussis* spread from person to person. The infection causes irritation of the lining of the airways and increased mucus.

Although any age group can be infected, the elderly and those under age one, are at particular risk of secondary pneumonia. Symptoms start about a week after exposure and may be non-specific with runny nose, low grade fever and cough. The paroxysmal stage starts 7 to 14 days later with the hallmark cough on spasms ending with the "whoop". Later vomiting may also occur.

Diagnosis is not always straight forward. In the early stages there are no specific features. Swabs from the nose or throat can be diagnostic. Blood tests are not always reliable and can take some weeks to turn positive.

Treatment is directed to easing the cough and other symptoms. Steam inhalation helps. A course of antibiotics may be needed. Young children may need to be hospitalised. Those with infection need to stay away from school or work. Exclusion times vary according to circumstances.

Prevention is the key so make sure you and your family are fully vaccinated. The whooping cough vaccine is part of the childhood schedule and is also recommended for pregnant women between weeks 28 and 32.

Haemorrhoids

One of the most common health problems are haemorrhoids, affecting about 300,000 Australians each year. Haemorrhoids are essentially a "varicose vein" at the anus and can be internal (inside the rectum) or external. Risk relates to repeated pressure in the abdomen which may be from pregnancy, constipation or heavy lifting. Sitting on hard surfaces for prolonged periods is another risk factor. There may be a genetic tendency.

Symptoms include itching or pain at the anus, discomfort when opening the bowels, bleeding at the anus and a "dragging sensation". The severity ranges from mild to severe.

Diagnosis is based on the history and examination of the area. There is no need for tests to diagnose haemorrhoids. However, bleeding from the bowel in the absence of haemorrhoids will need investigation. If you experience bleeding (haemorrhoids usually cause fresh blood on the toilet paper) consult your GP.

Treatment is about relieving symptoms while waiting for things to resolve, which often takes a few days. There are a number of ointments and suppositories, most of which do not require prescription. Some people find sitting in a lukewarm bath helpful. Drink adequate water and eat enough fibre so as the stools are not hard. Stool softeners may help. In rare cases the haemorrhoid may need lancing and if infected, antibiotics.

If recurrent and troublesome, haemorrhoids can be treated surgically. Today this is usually by injection or banding rather than formal removal. Prevention measures include avoiding constipation by drinking enough fluid and having plenty of fibre in the diet. Be careful with heavy lifting.



 Weblink www.betterhealth.vic.gov.au/health/conditionsandtreatments/haemorrhoids



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.

THICK VEGETABLE SOUP – PERFECT DISH FOR A COLD DAY

Cook time: approx 35 mins.

Serves 6-8

Ingredients

- 1/4 cup olive oil
- 1 large brown onion (diced)
- 3 stalks celery (diced)
- 3 cloves garlic (minced)
- 1 tspn kosher salt or salt of your choice
- 1/2 tspn coarse ground black pepper
- 2 large potato (peeled and diced)
- 2 carrots (sliced)
- 1 cup corn
- 1 cup peas
- 1 cup green beans (chopped)
- 2 vine tomatoes (diced) or 1 can drained diced tomatoes
- 4 cups chicken broth
- 2 cups vegetable juice (V-8) or use the juice from drained can tomatoes - add brown sugar to help with the acidity.
- Fresh oregano, parsley & thyme or add 1 tspn Italian seasoning

Add a dash of Tabasco or Chilli sauce if you like your spice.

Instructions

In a large stock pot add the olive oil over medium heat and sauté the onions, celery and garlic for 4 -5 minutes until translucent. Add the remaining ingredients and bring to the boil. Then reduce and simmer for about 30 minutes. Can cook in a slow cooker on low for around 8 hours, just put all ingredients in and stir to mix together. Top the bowl with a little shredded or Parmesan cheese. Serve with toasted garlic bread. This recipe is great for using up leftover veggies



from the night before or use whatever veggies are in season.

Other ideas –

- Add a pkt of frozen vegetables if you don't have sufficient fresh vegetables.
- Add browned ground beef, left over chicken etc!
- Add some al-dente pasta shells right before serving if you are wanting some carbs.
- Add 1 can coconut milk for a creamy vegetable soup or a sachet of tomato puree (3-4 tablespoons)
- If you're going to add leafy greens to the soup, like kale or spinach, add them about 20 minutes before you're ready to serve.

SUDOKU

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