



FREE TO TAKE HOME!

**DECEMBER - JANUARY 2021 EDITION**



STI's



Shin Splints



Gestational Diabetes



Over 65 and exercising?

● **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, FRACGP
- Dr Adnan Rasheed** MBBS, FRACGP
- Dr Catherine Pye** MBBS, FACRRM
- Dr Christian Ezeobi** MBBS
- Dr Marcus Wilcox** MBBS
- Dr Miguel Dajao** MBBS
- Dr Kannan Ramanathan** MBBS

*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, Deb, Leah & Rhea
- Nursing Staff:**  
Pam, Vicki, Belinda, Crystal, Amelia & Lana

● **COVID-19**

As the practice is observing social distancing we ask that you limit the number of people accompanying a patient to one other.

We also advise that telephone or video consults are preferred if you do not need to be seen in person.

● **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 2020:**

**Standard consult**

Private .....	\$76.00
Health Care Card Holder .....	\$65.00
Pension Card Holder .....	\$58.25

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 .....	\$88.05
Sunday .....	\$100.55

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.



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](http://www.healthnews.net.au)



## Sexually transmitted infections (STI's)

The term Sexually transmitted infections (STI's) applies to a group of infections that are predominantly spread by sexual contact. The group is diverse in both symptoms and severity. It includes Chlamydia, gonorrhoea, hepatitis B, hepatitis C (some people do not classify this as an STI) syphilis, HIV (AIDS) and herpes simplex.

The symptoms depend on the infection. The most common symptoms of an STI are pain or burning with passing urine, discharge from the penis or vagina, discomfort in the pelvis and sores on the genitals or groin. It is important to note that there may be no symptoms.

The best form of treatment is prevention so practising safe sex is the key. It is also important to have STI screening tests if you are sexually active and not in a monogamous relationship. This can be arranged by your GP and involves both a blood and urine test.

Treatment depends on what is diagnosed.

Chlamydia is by far the commonest STI and is easily treated with antibiotics. Gonorrhoea and syphilis are also treated with antibiotics. Treatment for hepatitis or HIV is far more complex. Fortunately, these conditions are less common. There is a vaccination against hepatitis B.

If you have any symptoms you are concerned about, ask your GP. If you are diagnosed with an STI, it is important to notify people you have been with so they can be treated too. Some STIs have to be reported by your GP to the health department who track cases of some infections. Do not be alarmed about this.



## Gestational Diabetes

This is a rise in blood sugar during pregnancy, which generally returns to normal after giving birth. It affects 3% to 8% of pregnant women and typically starts between week 24 and 28, hence there is routine blood testing for glucose at this stage of pregnancy. The test is a glucose tolerance test where blood is taken before and after consuming a glucose drink

Risk factors for gestational diabetes include being overweight, being over age 30, having a family history of diabetes and having had gestational diabetes in a prior pregnancy. People of Chinese Polynesian, Vietnamese and Indigenous Australian background are at increased risk.

During pregnancy, hormones from the placenta help the baby grow. However, they can block the effects of maternal insulin leading to insulin resistance. It is estimated that insulin requirements when pregnant can be three times normal. For some people, the body doesn't handle the load and thus gestational diabetes develops. When insulin levels drop post-delivery, blood sugars can return to normal.

Gestational diabetes increases your chances of developing Type 2 diabetes later in life, but it is not a given. It does not mean your baby is born diabetic.

Eating a healthy diet, doing regular exercise and maintaining a healthy weight all reduce the risk.

If you have gestational diabetes, it is important to monitor and control sugar levels in the bloodstream. This means eating a healthy diet low in sugars and refined carbohydrates. You may benefit from seeing a dietician. Regular exercise helps.

## Shin Splints

Shin splints are a common condition seen in runners and those who play sports involving running and rapid acceleration.

The exact cause is not known but is thought to be due to repeated stress on the shinbone, and it's attaching connective tissue. It is more common in females and those with a previous leg injury and in those often running on hard or uneven surfaces.

The typical symptom is pain in the shin with running. There may be associated swelling. At first, the pain is when one starts running and eases after warming up. As the condition advances, pain persists for longer and can even continue after ceasing exercise.

Diagnosis is based mainly on the history. There is no diagnostic test. X-rays (or rarely, an MRI scan) may be done to rule out other causes such as a stress fracture.

There is no specific treatment. Ice packs and simple painkillers provide symptom relief in the short term. Rest and avoiding activity, which worsens the pain, is key. However, you don't need to stop all exercise. Swimming or walking in water are two options to maintain fitness.

Attention to training techniques can be helpful. Use of orthotics or insoles may also help as can change of shoes. For the more serious athlete, having a biomechanical assessment of their running style may lead to technique changes, which are beneficial.



<https://www.betterhealth.vic.gov.au/health/ConditionsAndTreatments/shin-splints>

<https://www.diabetesaustralia.com.au/about-diabetes/gestational-diabetes/>



## Over 65 and exercising?

Work on strength, balance & coordination.

We often think of exercise as running swimming or other cardiovascular type pursuits. This is important for fitness, but other exercises can be just as important. As we get older resistance (or weights) based exercise maintains bone strength and also muscle mass. This reduces the chances of getting osteoporosis (brittle bones) and sarcopenia (loss of muscle mass). You are never too old.

Research in NSW looked at resistance

training in people with an average age of 89 and found that people could make new muscle at the age of 102! And you do not have to be Arnold Schwarzenegger.

Start with lighter weights and increase slowly. You do not have to purchase weights. Exercises using the body's own weight such as push-ups can be very effective. Consider getting input from a physiotherapist or trainer. Do not try to be a hero!

Exercise that improves balance and

coordination can reduce the chances of falls, which is increasingly important as years go by. Pilates, yoga, Tai Chi are three examples. Start at a low level and increase slowly. Get good instruction, so you do it right.

The key to exercise is consistency, doing exercise that you enjoy and of course, not getting injured. Those exercising regularly enjoy better mental health and tend to be more resilient. The risks of heart disease stroke and bowel cancer are lowered too.

 [https://www1.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5BCA257BF0001E720D/\\$File/Tips&Ideas-Older-Aust-65plus.pdf](https://www1.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5BCA257BF0001E720D/$File/Tips&Ideas-Older-Aust-65plus.pdf)

## Migraine

A migraine headache is a particular form of headache characterized by being one-sided and accompanied by nausea or vomiting and sensitivity to light. It can be preceded by a sensory warning (aura) such as flashes of light or tingling.



The term has come to be used to describe a severe headache, but whilst most migraines are severe in nature, not all severe headaches are migraines.

The exact cause is not known. Theories revolve around circulation to the brain and changes in serotonin levels within the brain. Both genetics and the environment play a role.

Around 90% of sufferers have a family history of migraines. Women are three times more likely to have migraines. Generally, they start before age 40. There are thought to be hormonal influences in some women as migraines may be more prevalent around the time of periods.

Some triggers include certain foods (alcohol, cheese, chocolate and MSG), stress, certain medications (e.g. The contraceptive pill) bright lights, strong smells and sudden changes in atmospheric

pressure. However, for many people, there are no identifiable triggers.

There is no specific test for migraine. It is diagnosed on history. Where tests are done it is to exclude other causes of headaches.

Treatment is with painkilling medications. Milder migraines may respond to over the counter tablets, but others will need prescription painkillers. Some specific migraine headache medications can be prescribed. They are only useful in migraine headaches but do not work for everyone. Ask your doctor about this. There are also preventative medications for people who have frequent migraines. Some new biologic medications have recently been approved for this use. None are an absolute cure.

Simple measures that can help are maintaining good hydration, getting enough sleep, managing stress and avoiding known triggers where possible.

 <https://headacheaustralia.org.au/migraine/migraine-a-common-and-distressing-disorder/>



## **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](mailto: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.



## CHRISTMAS CAKE

### Ingredients

- 3 cups (approx. 500 grams) sultanas
- 1 1/2 cups (approx. 250 – 270 grams) raisins
- 1 cup (approx. 150 grams) currants
- 1 cup (approx. 150 grams) pitted dates, roughly chopped
- 100g red glazed cherries, quartered
- 1/2 cup (approx. 75grams) craisins
- 1/2 cup (approx. 75grams) dried pineapple, roughly chopped
- 2 teaspoons finely grated orange rind
- 1/4 cup (approx. 50 grams) mixed peel
- 185ml
- 3/4 cup brandy
- 4 eggs (75grams eggs)
- 250g butter, at room temperature
- 200g of brown sugar
- 2 cups plain flour
- 2 teaspoons of mixed spice
- Red Glazed Cherries and Blanched almonds to decorate

### Method

**1.** Combine sultanas, raisins, currants, dates, cherries, craisins, pineapple, mixed peel, brandy and orange rind in a large bowl.

Cover with plastic wrap and set aside, stirring occasionally, for a minimum of 2 days to macerate. The longer this is left the more the flavours will develop.

**2.** Preheat oven to 150°C. Brush a round 22cm (base measurement) cake pan with melted butter to lightly grease and line the base and side with 3 layers of non-stick baking paper.

**3.** Beat butter and sugar in a bowl until pale and creamy (an electric beater is preferred). Add eggs, 1 at a time, beating well between each addition until just combined. Add butter mixture to fruit mixture and stir to combine. Add mixed spice and stir until well combined. Spoon into prepared pan and smooth the surface. Lightly tap pan on benchtop to release any air bubbles. Arrange almonds and cherries on top of the cake.

**4.** Bake in oven, covered with foil, for 2 hours 40 minutes to 3 hours or until a skewer inserted into centre comes out clean. Drizzle hot cake with extra brandy. Set aside to cool before turning out.



**This practice wishes you a very Merry Christmas and Happy New Year!**