

ALICE STREET MEDICAL CENTRE



15 Alice Street
Atherton QLD 4883

P: 07 4091 3122
A/H: 0418 184 070
F: 07 4091 1317

Dr Tony McLellan **Dr Ed Stark**
Dr Chris Earl **Dr Dan Caines**
Dr Robin Leven **Dr Emma Griffiths**
Dr Gene Walker **Dr Meech Freeman**
Dr Takehiro Ichikawa

Our doctors have satisfied the requirements of the Royal Australian College of General Practitioners and are on the Vocational Register of General Practitioners.

They are family doctors experienced in the broad range of general practice and as well as routine consulting involving all age groups they do:

- Obstetrics, including caesarean sections and ultrasound scans
- Epidurals
- General anaesthetics
- Surgery, including both minor surgery and some major surgery
- Immunisations
- Audiograms
- Skin cancers
- Family planning, including tubal ligations and vasectomies

STAFF

Madeleine Shaw (Practice Manager)
Jen DeBondi, Melissa McDonald, Julie Pink, Sasha Snow, Gabrielle Turner, Lisa Blaney, Lerae Hubner and Mandy Allcock.

NURSING STAFF

Robyn Trimble RN Marea Mead RN
Lauren Caines RN Heidi Baker RN
Anna Montgomery RN

SURGERY HOURS AND SERVICES

CONSULTATIONS are by appointment.

Monday to Friday 8am to 5pm
Saturday 8am to 11am

EMERGENCIES will be dealt with immediately. AFTER HOURS the doctor on call can be contacted by ringing 0418 184 070. HOME VISITS are made where appropriate. Please contact the surgery as soon as possible after 8am to arrange a home visit. NURSING HOME VISITS are made on request.

AFTER HOURS CONTACT DETAILS

Phone numbers are placed on the external door, recorded on our answering service message and noted on all our stationery. These numbers include:

After-hours mobile: 0418 184 070
1300 Health: 1300 432 584
GP Helpline: 1800 022 222
Atherton Hospital: 07 4091 0211
Ambulance emergency service: 000

YOUR DOCTOR

OCTOBER 2020

FREE!

This month we talk about...



CHILD OBESITY & SUGARY DRINKS



THAT DIZZY FEELING



THE FACTS ON FLATULENCE



WHAT IS DYSTHYMIA?

Breast cancer - how you could reduce your risk

Breast cancer happens when some abnormal or 'cancerous' cells begin to grow and spread in breast tissue, or the ducts and nodes around the breast. In later stages breast cancer can spread to other areas of the body.

It's the most common cancer in Australian women, and the second most common cause of cancer-related death in women after lung cancer. Both men and women can develop breast cancer, although it's uncommon in men.

It's important to remember that most people survive breast cancer and there's a good chance of recovery if it's detected in the early stages. Outcomes are improving all the time due to early detection through screening, and the development of more effective treatments.

RISK FACTORS YOU CAN'T CHANGE

- The risk increases with age and is more common in women over 50.
- Oestrogen fluctuations play a part – women who started menstruating early and those who reach menopause later have a slightly higher risk.
- Having a significant family history can also affect the level of risk.
- A small number of breast cancers are thought to be caused by inheriting abnormal genes.

WHAT TO DO TO LOWER YOUR RISK

Recent research has given us evidence that making some fairly simple lifestyle changes can lower your chances of getting breast cancer. So what can you do to reduce your risk?

- 1. Maintain a healthy weight and follow a healthy diet.** Women who are overweight or obese are at increased risk – especially after menopause.
- 2. Get regular exercise.** Exercise helps to regulate hormones and maintain a healthy weight – improving overall health.
- 3. Limit your alcohol intake.** Even moderate alcohol intake can increase the risk.
- 4. Stop smoking.** Smoking is a high risk factor for many diseases, including various cancers. Giving up smoking is one of the best things you can do for your health.
- 5. Breastfeeding** – this is thought to be due to more periods of reduced fluctuation in oestrogen levels.

The lifestyle changes known to reduce the risk of breast cancer are also well-known to improve our overall health and modify the risk of many different diseases. It's never too late – or too early – to improve your health and lifestyle.

91% THERE IS NOW AT LEAST A 91% SURVIVAL RATE AT FIVE YEARS FROM DIAGNOSIS OF BREAST CANCER

150 AROUND 150 AUSTRALIAN MEN ARE DIAGNOSED WITH BREAST CANCER EACH YEAR

55 ON AVERAGE, 55 AUSTRALIANS ARE DIAGNOSED WITH BREAST CANCER EVERY DAY

8 EVERY DAY EIGHT PEOPLE LOSE THEIR LIFE TO BREAST CANCER



Our newsletter is free! You can take a copy with you.

What is **dysthymia** – could you have this form of **depression**?

Dysthymia – also called persistent depressive disorder – is a form of depression that persists over a long period, usually years. People with this condition may seem to have a generally negative outlook in life with feelings of sadness nearly all of the time.

SYMPTOMS

People with dysthymia report feelings of low-level depression – bad enough to have a negative effect on their lives, but often without a severe stage or rapid-onset. They may lack energy for normal activities, feel hopeless, have low self-esteem and a general feeling of inadequacy. They're often described as the type of person who complains a lot, has a gloomy outlook and is incapable of having fun.

Dysthymia is also associated with sleep and energy disorders, such as insomnia, chronic lethargy or fatigue. This can make dysthymia worse, triggering a cycle of mental ill health and sleep problems. Eating patterns are commonly affected, with some people overeating and others having little appetite. Fluctuating weight and diet patterns can have adverse effects on physical as well as mental health.

HOW IS DYSTHYMIA DIFFERENT FROM 'NORMAL' DEPRESSION?

Where other depressive mental health conditions tend to have shorter, extreme periods of symptoms, dysthymia is characterised by its long-term, or chronic, nature. People with dysthymia may also have other mental health or mood disorders, as dysthymia is closely linked to other forms of depression and anxiety.

Acute – short and intense – episodes of depression may be called 'major' depression; this does not mean that chronic – long-term – depression is 'minor'. Dysthymia can be a serious and disabling condition.

Dysthymia can cause people to make considerable adjustments in their life. Feelings of low self-worth, fatigue and hopelessness naturally influence the choices people make, and can have significant and long lasting effects on their daily activities, work, and relationships.

Dysthymia may have developed so slowly, and lasted for so long that it feels almost normal to sufferers. Sadly, this may mean that they are less likely to seek help than people with other forms of depression.



Professional help and treatment can usually help, so if you think you, or someone you know is suffering from dysthymia it's important to seek advice.

OCTOBER IS BREAST CANCER AWARENESS MONTH

Changes to look for include:

- ▶ A new lump or lumpiness in your breast or underarm
- ▶ A change to your nipple such as discharge, sores, or inversion
- ▶ Changes in the size or shape of your breast
- ▶ Dimpling, rash or redness of your breast skin
- ▶ Thickening or swelling in your breast or armpit
- ▶ Unusual pain in any area of your breast

Frozen raspberry yoghurt dessert

A refreshing fruity dessert that's easy to make, tastes delicious, and is a healthier and lighter alternative to ice-cream.

INGREDIENTS

- 1½ cups frozen raspberries
- 1½ cups plain unsweetened Greek yoghurt
- 2 Tbsp runny honey or maple syrup
- ½ cup chopped walnuts
- ½ cup freeze-dried raspberries or blueberries, lightly crushed

METHOD

1. Partially thaw 1 cup of raspberries in a medium bowl, add yoghurt, honey or maple syrup and blend.
2. Stir in walnuts, freeze-dried fruit, and the remaining ½ cup of whole frozen raspberries.
3. Pour into a small loaf tin and freeze for 4 hours, or until firm.

To serve:

Remove from freezer and let stand for 10 minutes, decorate and serve.

Decorating suggestions: chocolate curls, nuts, mint leaves, berries, or edible flowers.



Facts about farting

Farting, 'passing wind', or 'flatulence', is a normal bodily process – and absolutely everybody does it – but it can still cause embarrassment.

It's when intestinal gas is expelled from the bowel through the anus. Sometimes this gas smells bad, and the frequency and smell of it can be affected by what we've eaten. Estimates of how much flatulence is 'normal' range from around 10 to 25 times a day.

WHAT IS INTESTINAL GAS?

Intestinal gas is partly created by the normal digestive processes and partly swallowed air.

There are lots of different gases produced by the bacteria in the gut to breakdown food. Some of these gases smell bad, such as hydrogen sulphide, which smells like rotten eggs. Some foods produce more or smellier gases as they break down in the gut.

Air can be swallowed when eating, chewing gum, smoking, or other activities. The air may come back out at the top end of the digestive system – burping – or may follow the digestive tract down and come out of the bottom end – farting.

Modern detergents can contain enzymes that are pretty much the same as the ones that break down food in your digestive system!

WHEN IS FARTING A PROBLEM AND WHAT CAN HELP?

It can become a problem if it's bad-smelling, frequent, or difficult to control.

Sometimes, excess wind is associated with bloating or other symptoms, and these can be simply due to something you've eaten, or a symptom of intolerance to certain foods. Different foods affect different people, and if flatulence is a problem, keeping a food diary along with your symptoms may be helpful. Foods that are high in fibre or high in certain sugars are common culprits.

You may find that regular exercise and watching what you eat can improve digestion. Take your time when you eat and drink. Drinking peppermint tea may help bloating and flatulence.

Each person's bowel function is different, and you're the best person to notice if something is out of the ordinary or causing problems. It's always best to see your doctor if you have any unexplained changes in bowel habits.

Why some people feel dizzy when they stand up

Do you ever feel dizzy when you stand up quickly? Ever wondered why, or what you can do about it?

Some people feel dizzy or light-headed when they go from lying or sitting to standing up. It's caused by a drop in blood pressure, and is known as postural hypotension or orthostatic hypotension (OH).

When you stand up, blood pools in your legs and your blood pressure starts to fall, but normally your body automatically compensates for this. Your heart beats faster to pump more blood, and your blood vessels tighten to increase blood pressure. So what can affect this function from working well?

OH is more common as people get older, and can be caused by certain medications or by dehydration. Medications which are designed to lower blood pressure can cause OH or make it worse.

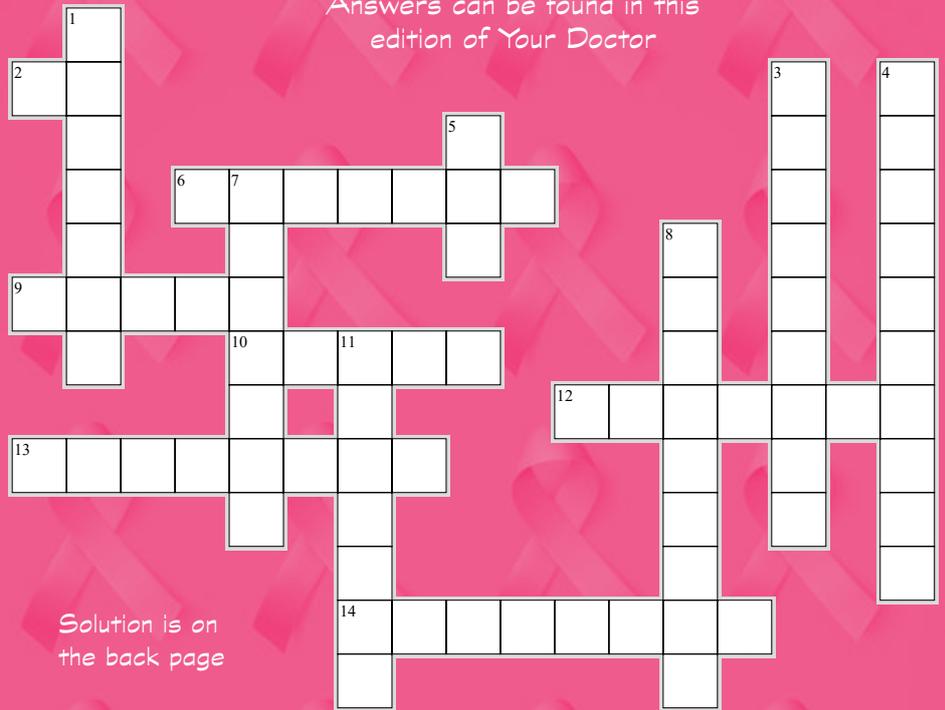
Some conditions can make people more likely to experience OH – such as heart conditions, diabetes or Parkinson's disease. Often, treating the underlying cause will resolve the problem, but sometimes it's not clear what causes it.

OH can be diagnosed by checking your blood pressure when you're lying or sitting down, and again when you stand up to see if there's a significant drop. Simple remedies include wearing compression stockings to help with circulation in your legs, staying well hydrated, and taking your time when standing up. Some people are more prone to OH after a large meal.

If OH is causing you concern and isn't relieved by simple measures, see your healthcare professional. Your doctor might check whether there is any underlying cause. Always consult your doctor before stopping any prescribed medication, even if you think it may be causing OH.

CROSSWORD CORNER

Answers can be found in this edition of Your Doctor



Solution is on the back page

ACROSS

2. Abbreviation for orthostatic hypotension
6. To eat or drink
9. Fruits, vegetables, nuts and wholegrains provide this
10. A refined carbohydrate
12. Extreme tiredness
13. Become swollen or inflated
14. Inability to fall asleep or to stay sleeping

DOWN

1. Describes an illness or medical condition that lasts over a long period
3. One of the main female sex hormones
4. Medical term for passing wind or farting
5. A measure using your height & weight to work out if your weight is healthy
7. A disorder involving excessive body fat
8. A form of depression that is long-term
11. Relating to genes and heredity

Sugary drinks and childhood obesity – what you can do to help your child

Obesity-related illness is higher than ever throughout the Westernised world, and it's becoming more of a problem for our children.

Obesity is fast becoming a health crisis; it's a high risk factor for many serious illnesses, including heart disease, type 2 diabetes, some cancers, and stroke.

The majority of research shows that sugar-sweetened drinks are strongly linked to weight gain, so cracking down on these is one of the simplest ways to reduce the risk of children becoming obese.

Around one quarter of Australian children aged 2-17 years were overweight or obese in 2017-18

Sugary drinks include soft drinks, energy and sports drinks, and flavoured waters. They have little or no nutritional benefit, and can contain a shocking amount of sugar. Generally people know about the dangers a high sugar diet poses to their teeth and gum health, but may be unaware of the sheer volume of empty kilojoules they're drinking.

These highly sweetened drinks – which often also contain caffeine and assorted additives – can be addictive, and it's all-too-easy for kids to get hooked on them. However there are some simple ways to break the habit and reduce your family's consumption.

HOW TO CUT OUT SUGARY DRINKS

First, remove the temptation – don't keep sweet drinks in the home.

Getting everyone into the habit of drinking water is the best option, although it may not be easy. Try sparkling water, adding a slice of fruit, mint leaves, or cucumber to make it appealing. Milk or healthy milk alternatives are also a good choice.

Avoid drinks containing artificial sweeteners as they won't help break the sugar habit. Fruit juices may not be the healthy alternative they seem either – they have a high sugar content and relatively low nutrients.

Remember young children can only consume what you give to them, so you can ensure they eat healthily. As children get older, education is important. It's not always easy to get teenagers to take health risks seriously – that's sometimes part of what being a teenager is all about. Giving them the right information and ensuring they understand the seriousness of a poor diet is a good start.

The most popular brands of soft drinks contain as much as 17 teaspoons of sugar in one single-serve bottle

We don't need sugary drinks and it's best to avoid them altogether. If your child is already keen on them, expect some resistance, be patient, lead by example, and know that you're doing your best for your family's health.



CROSSWORD SOLUTION

DOWN: 1. CHRONIC 3. OESTROGEN 4. FLATULENCE
5. BMI 7. OBESITY 8. DYSTHYMIA 11. GENETIC
ACROSS: 2. OH 6. CONSUME 9. FIBRE 10. SUGAR
12. FATIGUE 13. BLOATING 14. INSOMNIA

Disclaimer: The information provided in this newsletter is for educational purposes only, and is not intended as a substitute for sound health care advice. We are not liable for any adverse effects or consequences resulting from the use of any information, suggestions, or procedures presented. Always consult a qualified health care professional in all matters pertaining to your physical, emotional and mental health.

CLINIC UPDATE

RENEWING SCRIPTS

It is so important to have your medication well managed and part of that process is to ensure that you do not run out. Please do not wait until the day before taking your last tablet to renew your script. Every day we have a limited number of Emergency places available and at present these are being used by patients who are out of tablets and desperate for a script.

This can be so easily avoided if you could please call when you've picked up the last box of medication from the pharmacy, this is indicated by a sticker stating last repeat.

To ensure that you speak with your own doctor and are monitored well, we ask that you please phone well in advance for script appointments.

If you know that your medications are monthly, 3 monthly or 6 monthly please make your appointments accordingly. Scripts will not be renewed without consulting your doctor.

COVID 19

At Alice Street Medical we are totally up to date with policy and procedures to ensure patients are in a safe environment. We do ask that the following precautions are taken:

- Do not enter if you have cold or flu Symptoms
- Do not arrive early for appointments
- Do not bring extra people unnecessarily into the surgery
- Maintain hand hygiene and social distancing
- We appreciate your help in all these matters and thank you.

WHY STAYING ACTIVE IS IMPORTANT

As we spend more time at home to stop the spread of COVID-19, it's easy to forget our daily activity routine. Many of our usual venues have closed, and we're no longer getting incidental exercise from commuting or running errands. But it's especially important to stay active during this time. Regular exercise is good for both our physical and mental health. It has many benefits, including:

- reducing the risk of health conditions like stroke and heart disease
- controlling weight
- reducing stress and anxiety
- improving sleep

DISABLED PARK SPOT

Please do not park in the disabled car park if you don't hold the appropriate certification. A wheel chair bound patient advised us that she struggled to manoeuvre from her car to her chair, and watched as the driver without a sticker then drove away from the disabled park space as she made her way from up near the Big W loading area. Lets all be a little more caring.

TEAM BUILDING WEEKEND

It is that time of the year where we all head off for a weekend of Team Building with all the gang from Alice Street. Yes, this means Doctors, nurses, receptionists and all their families together. It's a great time to catch up, relax and yes, a cocktail or two is to be had. It won't be long and the Christmas rush will be upon us so let's enjoy.

DOCTORS ON LEAVE OCTOBER

Dr Chris Earl – until 05/10/20
Dr Emma Griffiths – until 05/10/20
Dr Gene Walker – until 09/10/20

Our newsletter is free! Take a copy with you.