



FREE TO TAKE HOME!

## DECEMBER - JANUARY 2021 EDITION



STI's



Shin Splints



Gestational Diabetes



Over 65 and exercising?

### ● PRACTICE DOCTORS

- Dr Christine Barstad
- Dr Nerrelie Cann
- Dr Debra Chandler
- Dr Joanne Chaffey
- Dr Justin Chipman
- Dr Stefan Delitzsch
- Dr Emil Djakic
- Dr John Fisher
- Dr Margret Oetterli
- Dr Elisabeth Robin
- Dr Saminda Rubasinghe

Dr Lizzi Shires

Dr Diana Webster

Dr Josephine Woodman

Dr Sooriya Wijewardena

Dr Yilin Zhang

### ● PRACTICE STAFF

Practice Manager: Sheree Snare

Clinical Manager: Breanna Carroll

Business Manager: Katrina Pugh

Reception Staff: Vivienne, Janine, Rhia, Heidi, Peyton, Maree, Bronte, Jacqui, Shannon & Michelle

Registered Nurses: Roselyn Hendriks, Ann Louise Jones, Sharon Turner, Julie Turner, Sharon Brain & Sarah Shaw

Enrolled Nurses: Jeannie Ansell, Jackie Nash & Sarah Howard

### ● SURGERY HOURS

Ulverstone Branch Hours:

Monday to Friday

8am – 5.30pm

Weekends & Public Hols – Urgent Clinic

9am – 12noon

Shared with Victoria Street Clinic

Penguin Branch Hours:

Monday to Friday

9am – 5pm

### ● AFTER HOURS & EMERGENCY

Phone **6425 1611**. Listen to voice message and ring the number advised. Please do not try to leave a message. In an emergency, phone **000** for an ambulance.

### ● SPECIALISTS & ALLIED HEALTH AT PATRICK STREET CLINIC

- Hearing Australia
- Physiotas Physiotherapy
- Launceston Orthotic/Prosthetic Service Prem Anadam
- Dr Collin Chia – Respiratory & Sleep Medicine Physician
- Victoria's Cosmetic Medical Clinic
- Mr Gary Kode - Launceston Plastic & Cosmetic Surgery

### ● FULL FAMILY MEDICINE SERVICES

- Minor Surgery
- Travel Medicine
- Lung Function Tests
- Aged Care
- Workplace Health Care
- Immunisations
- Blood Tests
- Trauma Care
- Antenatal Care
- Desensitisations
- Women's & Men's Health
- Skin Checks & Skin Cancer Treatments
- Diabetic & Asthma Clinics
- Family Planning/Contraception
- Child Health & Baby Checks

### ● PRACTICE BILLING POLICY

The Patrick St Clinic will not let financial hardship prevent access to medical care where at all possible.

Over many years, both sides of government have not supported the real cost of providing healthcare. Therefore your Medicare rebate has not kept up with inflation. This means that some costs must now be passed on to patients.

Significant discounting down to Medicare's "bulk billing" rate however does occur according to the individual patient circumstances at the doctor's discretion.

The following policy is aimed at being able to maintain our services to the community:

- Patrick St Clinic fees are guided by the Australian Medical Association.
- An annual charge payable on the first bulk billed consultation in the financial year will apply to all patients, including pensioners and health care card holders. This charge is currently \$30.
- A full fee payment for non-health care card holders will occur at the first consultation in each quarter.

We hope these measures will help you stay healthy regardless of your financial position.

### ● BOOKING APPOINTMENTS

We try to make sure patients are seen in a timely manner according to the urgency of the problem. Please let the receptionist know at the time of booking if your problem is routine or urgent.

Please give at least 2 hours' notice if cancelling a booking to allow that space to be made available to another patient in need.

Failure to attend an appointment may attract a fee.

You can also book online via our website: [www.patst.com.au](http://www.patst.com.au) or download the HotDoc App.



Booking a longer appointment: If you want an insurance medical, review of complex health problem, travel advice, counselling for emotional difficulties or a second opinion, please book a longer appointment.

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)

▷ Please see the Rear Cover for more practice information.



## 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.

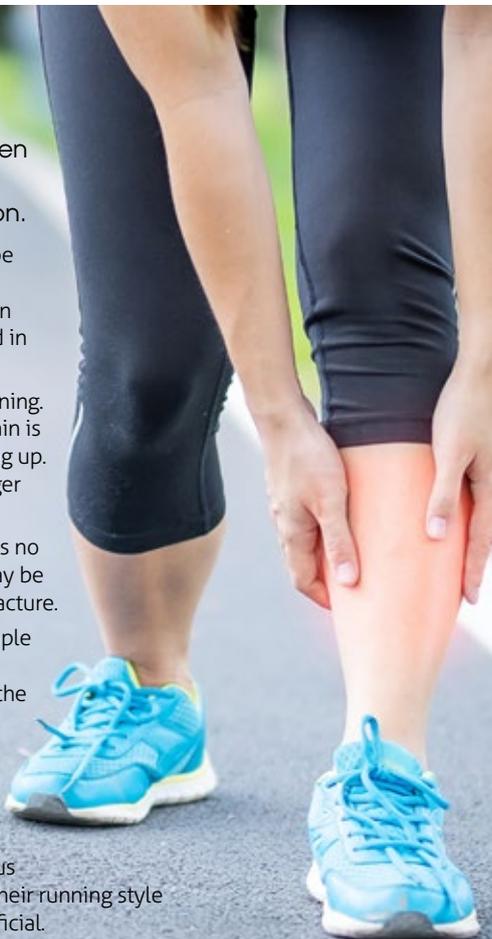
The exact cause is not known but is thought to be due to repeated stress on the shinbone, and it's attaching connective tissue. It is more common in females and those with a previous leg injury and in those often running on hard or uneven surfaces.

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/>



## 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) raisins
- 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, raisins, 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.

## Patrick Street Clinic

### ● PRACTICE NEWS

#### Covid-19 Pandemic Preparedness.

Its absence in Tasmania over the past few months and near eradication in Australia in recent weeks is in marked contrast to the current world situation. It is vital that Australia learns from the mistakes in the northern hemisphere, where the end of lockdown was all too often followed by the end of all precautions in the general population, leading to an inevitable vicious resurgence in cases and death toll. Whilst we understand the fatigue, anxiety and frustration present in the community after 9 months of pandemic conditions, we urge you to continue to practice social distancing and enhanced hygiene practices, as well as avoid any un-necessary gatherings, to minimise potential transmission. These precautions are particularly relevant to Tasmania which is now open to interstate travel, and will need to be in place until the availability of a new effective vaccine at some time in the next 12 months, to avoid further avoidable disability and deaths. We remind you that:

- It is recommended that if you have any of the following symptoms, get tested for COVID-19: fever, runny nose, cough, sore/itchy throat, or shortness of breath.
- If you become very unwell or have difficulty breathing, call Triple Zero (000) and ask for an ambulance.
- If you have any of the above and need to be assessed medically, please inform our reception or nursing staff who will be asking appropriate questions, to allow our team to take adequate precautions. Please do NOT attend without prior warning and please answer the questions truthfully.

Testing centres remain The East Devonport Recreation Centre (67 Caroline St, Devonport) and West Park “the Point” (10 Bass highway, Burnie), open 8:30 – 3:30. THANK YOU – We would also like to take this opportunity to thank our patients for the overwhelming support and understanding during this time.

Wishing you all a happy & safe festive season.



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