

FREE!
PLEASE TAKE ONE

YOUR
DOCTOR 

NOVEMBER 2013

HEALTH HQ

“Quality Caring”

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Southport 4215

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F: (07) 5531 3697

W: www.healthhq.com.au

W: www.skinhq.com.au



Dr Norman Hohl

MBBS, FRACGP, FAFPHM, DTM&H, CTH

Two years in Papua New Guinea convinced me of the imperative need for preventive medicine. After six years in Nigeria establishing a Rural Health Program, my emphasis is still on preventive medicine.

Dr Simon Thatcher *MBBS CTHP*

I have many years of experience, having worked at The Royal Brisbane Hospital, Greenslopes Hospital and in General Practices on the Gold Coast and Brisbane. Special interests in family medicine, antenatal care and chronic illness.

Dr Michael Read *MBBS*

After graduating from Qld university in 1983 I worked for two years at Royal Brisbane & Prince Charles Hospitals before taking up the position as Medical Superintendent With Right of Private Practice in a rural community. For twenty years I have provided all the services to this community, including emergency care, surgery, obstetrics and General Practice.

Dr Donna Armstrong *MBBS*

After graduating from University of Qld in 1986 and working for three years at Royal Brisbane Hospital, I have spent the last twenty years practicing as a rural general practitioner, providing “birth to death” medicine, including obstetrics and anaesthetics. After relocating to the Gold Coast for family reasons, I am hoping to continue to focus on whole patient care with a special interest in antenatal care, women's health and paediatrics.

Dr Neil Chorley *MBBS FRACGP FACCRM FACSM*

I have recently enjoyed eight challenging years as a rural GP in western Qld. Previous to that I worked as a GP in inner city Brisbane, Bamaga/Thursday Island, UK, RBH Greenslopes and the Gold Coast Hospital. Most recently I have become a Fellow in Skin Cancer Medicine which led me to become the President of the Australasian College of Skin Cancer Medicine.

Dr Bill Cassimatis *MBBS*

Dr Rachel Wyndham *MBBS*

Dr Danika Fietz *MBBS, FRACGP, M.Med (Skin Cancer)*

PRACTICE STAFF:

Kathryn (**Practice Manager**)

Mirja, Kim, Kris, Viv, Margie, Jenny & Kim C (**RN**)

Brenda (**AIN**)

Nicky, Ilana, Dorothy, Rosalie, Heidi & Charlotte (**Reception**)

Janet (**Office**)

SURGERY HOURS AND SERVICES:

CONSULTATIONS by appointment.

(Refer to reception for each doctors' sessions)

Monday 8.30am–5.00pm

Tues, Wed, Fri 8.30am–5.00pm

Thursday 8.30am–6.00pm

Saturday 8.30am–12.30pm

If you need to be seen urgently or need a long consultation, please ask when you book. Home visits within 5km can be arranged if necessary. Please ask if you need to speak with a Doctor. On occasions it may be necessary to return your call later.



LOW GLYCAEMIC INDEX (GI) AND GESTATIONAL DIABETES

Gestational diabetes (GDM) is a form of diabetes experienced by pregnant women, characterised by above average blood glucose levels. Up to eight percent of pregnant women are affected by GDM, which can cause their baby to grow larger than normal inside the uterus and result in complications both during and after birth. Research has shown that women who have GDM are at a higher risk of developing type 2 diabetes later in life. So behavioural and lifestyle interventions that may help to reduce this risk are important. The ways you reduce your risk of type 2 diabetes and its complications include maintaining a healthy weight with adequate physical activity and a small portioned, calorie controlled diet, keeping your blood pressure and cholesterol levels down, and avoiding unhealthy behaviours like smoking and excess consumption of alcohol. The specific behaviours which are best, however, remain uncertain. Researchers investigated the benefits of a low glycaemic index (GI) diet in reducing risk of type 2 diabetes in women with a history of GDM.

Seventy women with a history of GDM, who did not have type 2 diabetes at the beginning of the study, took part in the six-month trial.

They were divided into two groups, both of which were assigned to conventional guidelines of a diet low in energy, fat and sugar, and high in fibre. In addition to conventional dietary guidelines, one group received education on substituting high GI foods with lower GI options.

Women who were educated in the low GI options showed a significant reduction in body weight as well as improvements in their fasting glucose and insulin levels when compared to the other group. Around 33% of women in this group lost more than 5% of their body weight, compared to 8% of women in the control group.

For women with a history of GDM, substituting high GI foods with their low GI equivalent may be beneficial in reducing risk of type 2 diabetes. Talk to your doctor about the best meal plan for you.

INSIDE:

- **BURN OUT**
- **DON'T TEXT AND CROSS**
- **DR NORMAN SWAN - A MATTER OF HEALTH**

BURN OUT

With summer fast approaching, so too are all of the great outdoor activities that come with nice weather. Getting outdoors and being active benefit our health in many ways, as long as we take the appropriate precautions. Australia and New Zealand have the highest melanoma rates in the world, compromising quality and length of life.

The most significant risk factor for developing skin cancer is exposure to ultraviolet (UV) radiation from the sun. Sunburn can be avoided by wearing a hat, covering up with appropriate clothing and using sunblock when outdoors yet despite this, and the numerous sun safe campaigns, the rate of skin cancer in Australia remains significant. Researchers looked at the frequency of sunburn in adults in Queensland and investigated what factors contributed to this hazard.

Researchers asked 16,473 adults to report whether or not they had experienced sunburn, defined as reddening of the skin lasting longer than 12 hours after sun exposure, on the previous weekend. They recorded additional demographic and risk factors including participants' age, sex, height and weight, education, fruit and vegetable intake, smoking status, sun

protection measures and frequency of physical activity.

Of the 16,743 participants, 901 men and 596 women reported having been sunburnt on the previous weekend. Predictors of sunburn included youth, gender, level of education and frequency of physical activity. Sunburn was more common in men, and more likely to occur in those who had undertaken physical activity in the previous week. Furthermore, young people in the 18-24 year age group were seven times more likely to experience sunburn than those aged over 65.

This study reveals that too many people are still putting themselves at unnecessary risk of sunburn. Wearing sunscreen and protective clothing like hats and long sleeved shirts are easy, and effective ways of minimising risk of skin cancer. Given that physical activity, which is extremely important for our health, was identified as a risk factor for sunburn, particular care should be taken when exercising outdoors. Sunburn can be avoided altogether with smart behaviour, so there should be no reason for people to put themselves at unnecessary risk of a potentially fatal outcome.



MYTH VS FACT - DO MEN GO THROUGH MENOPAUSE?

Female menopause involves the gradual and permanent loss of the primary function of the ovaries – namely producing eggs. While the term menopause is most commonly attributed to women, some men reckon they experience a type of menopause themselves. “Male menopause”, as it is sometimes referred to, is largely a myth and when it does occur, differs to that which females experience and really only describes what happens when men’s testes fail to produce their hormones – primarily testosterone. The technical term is gonadal insufficiency and only affects a minority of men. Symptoms of low testosterone levels in men can include changes in sexual function – like erectile dysfunction and lower sexual desire; sleep issues like insomnia; and physical and emotional changes including weight gain and depression.

Many women comment on the psychological impact of menopause and this is no different in men with gonadal insufficiency. It’s important to discuss any physical or psychological discomfort you are experiencing with your doctor, who’ll be able to point you in the right direction. Maintaining a healthy lifestyle, with plenty of exercise and a nutritious diet, may also help to maintain strength, energy, and better mood and sleep patterns.

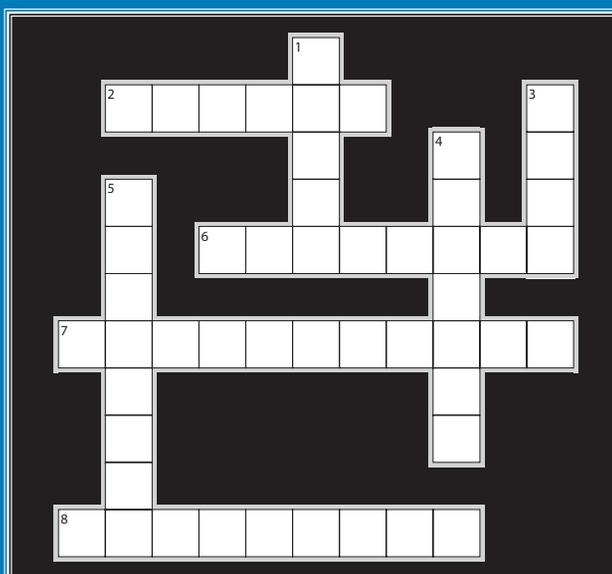
Clever CROSSWORD

Down:

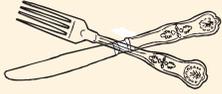
1. People who use a what, while driving, are four times more likely to crash?
3. Fruits and vegetables make up an important part of our daily what?
4. Menopause is the gradual loss of the primary function of the what?
5. Australia and New Zealand have the highest rate of what?

Across:

2. Maintaining a healthy what, with adequate physical activity can help reduce the risk of diabetes?
6. Gestational Diabetes (GDM) occurs in women who are what?
7. What is the name of a specialist who helps with Cancer treatment?
8. The most significant risk factor for developing skin cancer is exposure to Ultraviolet what?



EACH OF THE WORDS CAN BE FOUND IN THIS ISSUE OF “YOUR DOCTOR”. ANSWERS ARE SHOWN ON UPPER RIGHT BACK PAGE.



Good Health on the Menu

VEGETARIAN RICE PAPER ROLLS

Try this deliciously fresh, low GI snack that's perfect for spring entertaining.

Ingredients:

- 80g Vermicelli rice noodles
- 1 carrot, finely grated
- 1 cucumber, finely sliced
- ½ red capsicum, finely sliced
- 1 cup shredded Chinese cabbage
- Coriander leaves – whole
- Mint leaves – whole
- 1 packet rice paper wrappers

Method

1. Place Vermicelli rice noodles in a bowl of boiling water for 5 minutes or until soft
2. Drain noodles, and cut them into shorter lengths – approximately one third of their original size
3. Place noodles, vegetables and herbs in a bowl and toss to combine
4. Place 1 sheet of rice paper in warm water until it softens
5. Place softened sheet of rice paper on a board
6. Spoon 1/3 cup of vegetable filling horizontally across the lower part of the sheet
7. Fold the bottom end of the sheet over, followed by the sides, then roll up tightly
8. Repeat for remaining sheets and mixture

For extra flavour, serve with a small bowl of reduced salt soy sauce for dipping.



Enjoy!



DON'T TEXT AND CROSS

Distracted driving contributes to a significant number of fatalities on the roads each year. Studies suggest that people using a mobile phone when driving are up to four times more likely to have a crash than those who don't use their phone in the car. Devices like mobile phones are a major source of distraction with features like music, videos, social media, and talk and text to occupy the user. While it is illegal to use a handheld phone while driving, people continue to use their phones in other contexts on the roads, like when crossing the street on foot. Researchers investigated the risk associated with walking and mobile phone use.

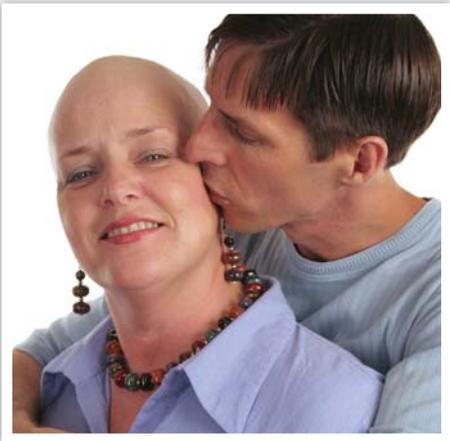
Participants in the study were given a mobile device and asked to cross a simulated pedestrian crossing. At times the device remained inactive, while other times the participants were engaged in a game that involved sending and receiving text messages. Researchers found that sending or receiving texts greatly increased the risk of almost, or actually, being hit by an oncoming vehicle on the simulated set. Compared to when the device was inactive, participants engaged in text messaging took longer to cross the road, did not look to their right and left as often, and missed more safe opportunities to cross.

This research suggests that interacting with roads when texting, both in the car and on foot, can be risky. When we engage in complex conversations, our awareness of the external environment may diminish, causing us to be less conscious of our surroundings and slower to react to any sudden changes. It is important to keep your eye on the road, both when you're inside and outside the car, and remember that no text message or phone call is more important than your safety.



Dr Norman Swan

A MATTER OF HEALTH



CANCER CARE

If you or someone you care for is diagnosed with cancer, it would help your GP, if you had an idea of what issues you may want to discuss about where you would most like to be treated.

Modern cancer diagnosis and treatment is complex and is hard to be done well by a cancer specialist working alone. Good cancer care occurs in teams where

groups of specialists such as surgeons, pathologists, radiologists, radiation oncologists (radiotherapy) and medical oncologists (chemotherapy) work together and talk about your case to decide on the best possible therapy. Good cancer care also includes supportive services such as psychologists and trained cancer nurses who can help you deal with the stresses and strains of treatment.

If you have a rare tumour such as pancreatic or oesophageal cancer then it's really important you go to a major centre where they do a lot of this kind of surgery. It makes a big difference to how well you do.

High quality cancer services also offer their patients the opportunity to be enrolled in clinical trials of the latest treatments. Clinical trials in cancer don't use dummy or placebo therapies. It's always the new treatment measured against the best possible existing therapy. There's good evidence that cancer patients on clinical trials do better even if they're not allocated to the new treatment.

And if you're going to be treated by private specialists, it's important to be informed about the costs up front so there are no surprises. Good private doctors will be only too happy to give you informed financial consent.

It's worth pausing and taking some time with your GP to explore these issues so that your journey with cancer is as smooth as it can be and fits with your circumstances.



DID YOU KNOW? EATING YOUR FRUITS AND VEGETABLES IS BETTER THAN DRINKING THEM

We all know that fruits and vegetables make up an important part of our diet, but does it make a difference what form we consume them in? Juicing fruit and veg has become a quick and convenient way to get them into our diet, however research is showing that this comes at a nutritional cost. A 21-week study of 34 healthy, lean and overweight people tested the effect of solid and juiced fruits on appetite and satiety. Each person consumed a similar amount of fruit and vegetables daily in either solid, raw form or juiced.

The results revealed that overweight participants, who consumed juiced fruit and

veg prior to meals, ate significantly more food overall and reported being hungrier after the meal. Conversely those who ate solid fruits and vegetables consumed less in the meal that followed.

It is much easier to drink the equivalent of many pieces of fruit in a short space of time than it is to eat them. Furthermore, there is fibre and other nutrients found in the skin and pulp of fruits and vegetables that are lost when made into juice. While fruit and vegetable juice is better than nothing, if you're trying to keep your weight under control, it's worth eating your fruit and veg, not drinking them.

ANSWERS TO THE CROSSWORD

Across: 2. Weight; 6. Pregnant; 7. Pathologist; 8. Radiation

Down: 1. Phone; 3. Diet; 4. Ovaries; 5. Melanoma

PRACTICE UPDATE

Valuable websites of quality information

www.travelmedicine.com.au
www.healthinsite.gov.au
www.blackdoginstitute.com.au
www.uptodate.com/patients
www.beyondblue.org.au

Remember to have your Skin Check with Skin HQ. Also ask about our Laser, IPL and PDT treatments.

FEE POLICY

Consults \$55 gap. **Welfare** \$40 gap DVA bulk billed. **Home Visits** \$75 gap. **Skin operations** \$125 gap, **Welfare** Bulk Billed. **Scripts and Referral Letters**, \$20.

If collected by patient bulk billed.

SATURDAY: No Concessions.

A \$5 cancellation fee will be charged if 24 hours notice isn't given to cancel your appointment. \$55 fee for procedural appointments.

Amex & Diners Club payments will now attract a 3% surcharge.

FEEDBACK

Our goal is to provide a quality, caring service. Therefore if you have any concerns or suggestions, please phone or write. We genuinely wish to hear from you. If we appear not to have satisfied your concerns, please write to the Health Quality and Complaints Commission, on 1800 077 308.

SERVICE

Quality caring means we do everything possible to see you on time and provide a service that listens to and meets your personal needs.

PRIVACY POLICY

Your medical record is a confidential document. It is the policy of this practice to maintain security of personal health information at all times, and to ensure that this information is only available to authorised staff members.

VASECTOMY VENUE

Phone (07) 5531 1170
www.vasectomyvenue.com.au
www.gccircumcisions.com.au

Vasectomies: See our websites or ask at Reception for a brochure on Vasectomies.

Are you aware Dr Read performs CIRCUMCISIONS on boys and men as well as babies?

TRAVEL HEALTH

The Travel Health Doctors is a member of the Travel Medicine Alliance. Daily updates from worldwide sources mean we can advise you accurately and personally for your trips. We carry almost all vaccines and other travel requirements. We will send a detailed report back to your personal GP.

Our Travel Medicine Service exists to assist your GP in caring for you in a specific area. We encourage you to continue a strong relationship with your GP.

After Hours Care: Phone Chevron After Hours on 5532 8666 after 6pm or Pindara Emergency Centre on 5588 9000.

If you require a home visit call Chevron After Hours. In a serious emergency Call 000.

Travelling overseas?
Make sure you book in for all your travel health advice with our experienced Travel Doctor.