



# YOUR DOCTOR



DECEMBER 2014

## HEALTH HQ

### “Quality Caring”

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### Dr Bill Cassimatis

MBBS

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MBBS, FRACGP, M.Med (Skin Cancer)

### Dr Craig Thompson

MBBS, FRACGP, FACRRM, MPHTM, CTH

### PRACTICE STAFF

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Mirja, Kim, Kris, Viv, Margie, Jenny, Kim C, Lindsey and Emily (RN) Brenda (AIN), Ilana, Dorothy, Rosalie, Heidi, Charlotte and Christina (Reception) Janet (Financial Assistant)

### HOURS AND SERVICES

Consultations by appointment.

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.

**Mon, Tue, Wed, Fri** 8:30am-5:00pm

**Thursday** 8:30am-6:00pm

**Saturday** 8:30am-12:30pm

### AFTER HOURS CARE

GP & Home Visits: Chevron After Hours  
(07) 5532 8666

Hospital: Pindara Emergency Centre  
(07) 5588 9000

In a serious emergency, call 000.

### VALUABLE WEBSITES FOR QUALITY INFORMATION

[www.travelmedicine.com.au](http://www.travelmedicine.com.au)

[www.healthinsite.gov.au](http://www.healthinsite.gov.au)



## TRAIN YOUR BRAIN FOR GOOD HEALTH

**Our desire for unhealthy foods is not something we're born with** – it's something that we learn over time after repeatedly eating these foods. In a way, our brain is trained over time to desire junk food. This begs the question: if we can train ourselves to crave unhealthy foods, can our brain be retrained to replace this with a desire for healthier foods?

A team of researchers tested this theory in a group of 13 overweight people over a 6-month period. People were assigned to either a weight loss program or the control group. The weight loss intervention involved a group support program that aimed to achieve sustained eating changes through hunger awareness, devaluing associations between unhealthy foods and rewards, and replacing these associations with healthy foods.

The weight loss intervention resulted in weight loss of around six kilograms. Researchers took magnetic resonance imaging (MRI) brain scans of participants

at the beginning and end of the study and found that those in the weight loss program had changes in the area of their brain involved with learning and addiction. By the end of the study, this area of the brain had greater sensitivity to healthier, low-calorie foods and less sensitivity to high calorie foods in those who'd participated in the weight loss program.

This was a very small study therefore much more research is needed to confirm the validity of this theory. Nevertheless, it adds weight to the idea that our brain can be trained over time to support healthy lifestyle changes that can be sustained over the long term.

**For reference:** Deckersbach, T et al. Pilot randomized trial demonstrating reversal of obesity-related abnormalities in reward system responsivity to food cues with a behavioral intervention. *Nutrition and Diabetes* Epub online September 1 2014, doi: 10.1038/nutd.2014.26.

## INSIDE

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- **DR NORMAN SWAN: MEDICAL USES OF CANNABIS**
- **MYTH VS. FACT: DOES LIVING IN THE CITY INCREASE FOOD ALLERGY RISK IN KIDS?**



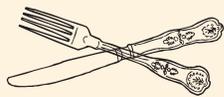
## SALT AND THE HEART

**We know that too much salt is not a good thing.** Increased salt intake is associated with high blood pressure, stroke, kidney problems and heart failure. The National Health and Medical Research Council (NHMRC) recommend that Australian adults limit their salt intake to around 4g (1600mg of sodium) per day in order to minimise risk of chronic disease however it's thought that most of us consume around 10g daily. The relationship between dietary salt intake and heart disease is well documented however its association with actual death is less certain.

Researchers have estimated the effect of salt intake on cardiovascular (heart) death worldwide. The results showed a dose-response relationship between salt intake and blood pressure. That is, with each reduction in quantity of salt consumed came a reduction in blood pressure. They then incorporated data on the link between blood pressure and cause-specific deaths due to heart disease. They estimated that around 1.65 million deaths from cardiovascular causes could be attributed to salt consumption above the advised level.

While this research does not prove that reducing salt intake will reduce death rates it does add weight to the recommendation of restricting salt intake to advised levels. You can make simple lifestyle adjustments to minimise salt intake on a daily basis like not over-salting foods when you're eating at a restaurant and using less salt when you're cooking at home.

**For reference:** Mozaffarian, D et al. Global Sodium Consumption and Death from Cardiovascular Causes. *N Engl J Med* 2014; 371: 624-34. DOI: 10.1056/NEJMoa1304127



### Good Health on the Menu

#### SPINACH AND RICOTTA ROLLS

*A salt-less savoury treat.*

##### Ingredients:

- 1 tbsp olive oil
- 1 clove garlic, crushed
- 1 egg
- 1 onion, diced
- 2 large bunches spinach, leaves chopped (ends discarded)
- 250g tub low fat ricotta cheese
- 8 sheets filo pastry

- 1 tsp grated nutmeg
- 1 tbsp dried oregano
- 1 egg, whisked (for brushing)
- Poppy or sesame seeds

##### Method

1. Preheat oven to 200 degrees Celsius
2. In a saucepan, heat two tbsp. water and add onion, garlic and spinach – cover with lid and cook for five minutes until spinach has wilted. Remove from heat until cooled
3. In a mixing bowl combine spinach mixture, ricotta cheese, nutmeg, oregano and egg – mix well until all combined
4. Work with four sheets of pastry at a time. Spread out two sheets of pastry on the bench and brush lightly with olive oil. Top with another two sheets of pastry and brush with oil again

5. Spoon spinach mixture along length of pastry and roll up to create one long pastry roll. Repeat with remaining four sheets
6. Brush lightly with egg mixture and sprinkle with poppy or sesame seeds
7. Cut into individual mini rolls and place on lined baking tray
8. Bake for 15 minutes or until crisp



*Enjoy!*

## DID YOU KNOW? A FAT TONGUE CAN RUIN A GOOD NIGHT'S SLEEP

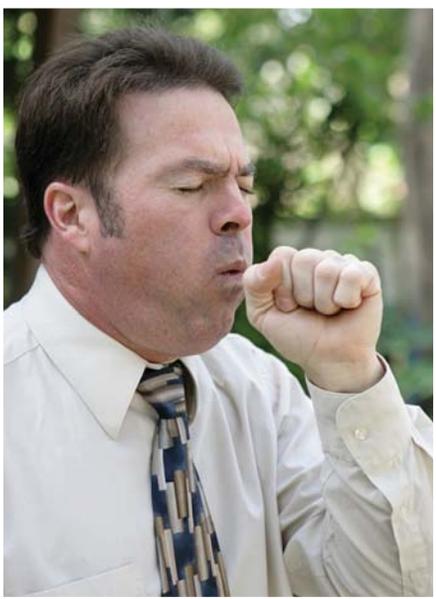


**Obstructive sleep apnoea (OSA) is a condition in which people stop breathing repeatedly during their sleep.** It occurs when the walls of the throat come together or collapse during sleep, blocking off the upper airway. Obesity is one of the most common causes of sleep apnoea and new research has shown that having a fat tongue also increases this risk. OSA can affect people's health and quality of life.

Researchers used magnetic resonance imaging (MRI) to measure tongue size in a group of obese people. Larger tongues, which had more fat, were found to increase the risk and severity of OSA.

A fat tongue is another risk factor to be aware of when it comes to OSA. Excessive snoring and daytime tiredness are also hints that OSA may be present and may require further investigation by a healthcare professional.

**For reference:** Kim, AM et al. Tongue fat and its relationship to obstructive sleep apnea. *Sleep Epub online October 1 2014;* 37: pii: sp-00806-13.



**One in five Australian adults over the age of 40 have what's called Chronic Obstructive Pulmonary Disease (COPD).** You may know it better by one of its other names such as emphysema or chronic bronchitis often going along with a chronic form of asthma. The problem is damaged airways in your lungs, which restrict breathing and cause symptoms like breathlessness, wheezing, coughing,

## Clever CROSSWORD

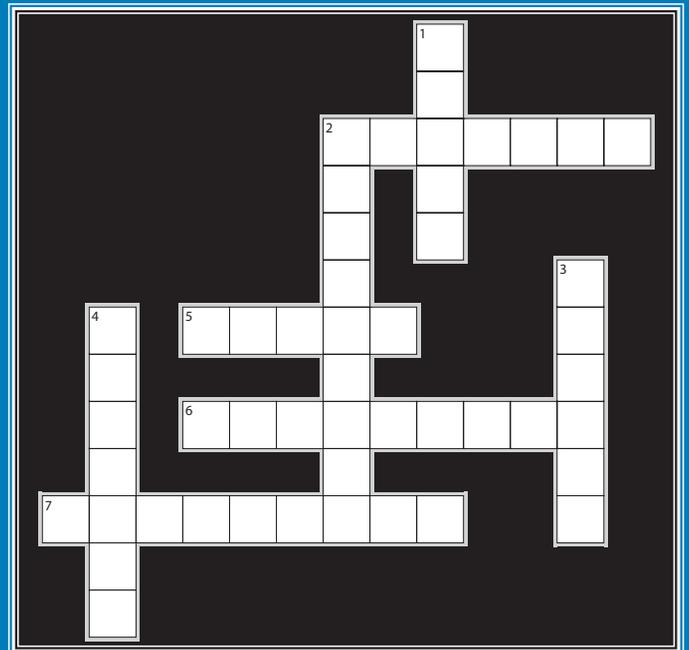
### Down:

1. High salt intake can lead to what failure?
2. One in five Australian adults over the age of 40 have Chronic Obstructive what Disease?
3. A fat \_\_\_\_\_ is a risk factor for Obstructive Sleep Apnoea.
4. One cause of Chronic Obstructive Pulmonary Disease is what?

### Across:

2. Cow's milk, eggs and what, are the three most common food allergies experienced by young kids?
5. Increased salt intake is associated with high \_\_\_\_\_ pressure.
6. OSA is a condition in which people stop what regularly during sleep?
7. It may be possible that our brains can be retrained to support a healthy what?

**EACH OF THE WORDS CAN BE FOUND IN THIS ISSUE OF YOUR DOCTOR. ANSWERS ARE SHOWN ON THE BOTTOM LEFT OF THE BACK PAGE.**



## COPD: A TREATMENT FOR ME?

recurrent chest infections and fatigue. Someone who has COPD really does have a reduced quality of life.

The causes of COPD include smoking and long term exposure to things that irritate the lungs like occupational dust. The best way to avoid COPD is to not smoke, and to quit smoking if you already do. According to Asthma Australia, around half of all smokers will develop some form of breathing issue in their life. At the moment, there's no cure for COPD however there are treatments that can help reduce symptoms and slow the effects of the disease such as medications to help open up the airways, oxygen therapy, exercise and a healthy diet. While current treatment can make people feel better, they often don't get rid of all of the symptoms and they can be complicated to take.

Researchers are constantly looking to help GPs find better ways to treat their patients who are living with COPD and in fact the Australian arm of a worldwide research study is currently looking for people with COPD to participate in their clinical trial (a research study involving human beings). The study is trialing a potential new treatment for COPD

and whether it reduces people's symptoms, keeps them out of hospital and improves the aspects of day-to-day life that are affected by their chronic lung disease.

Eligible participants who are involved in the study (which has been approved by Ethics Committees in Australia) will receive medical check ups and monitoring from specialist doctors, a thorough evaluation, education including correct inhaler technique and feedback on lung function at no cost. Your GP will be informed of your participation as well. The trial in Australia is being run by local lung specialists and is funded by a pharmaceutical company called GSK.

There's absolutely no pressure to participate but if you'd like more information about this trial you can call 1800 301 206 or visit [www.gsk.com.au/COPD](http://www.gsk.com.au/COPD)

### For reference

[www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)

[www.asthmaaustralia.org.au/copd.aspx](http://www.asthmaaustralia.org.au/copd.aspx)

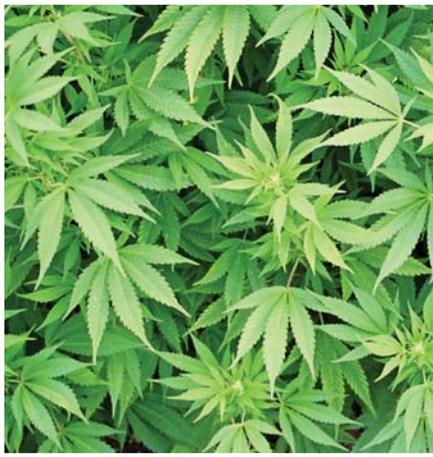
[www.gsk.com.au/COPD](http://www.gsk.com.au/COPD)



**Dr Norman Swan**

## A MATTER OF HEALTH

### MEDICAL USES OF CANNABIS



You might have read or seen stories in the media about using marijuana for medical purposes. Pressure has been on for legalisation from people with conditions such as multiple sclerosis, chronic pain

and appetite loss. The Prime Minister is supportive and a trial led by NSW is being planned. But just what is the evidence that cannabis works?

Well, in fact, there have been approved medications based on marijuana on the market in some countries for 30 years. The initial use proposed was to relieve nausea and vomiting in people with cancer. The trouble is that these cannabis medications don't work as well as newer anti-nausea drugs and have more side effects. When someone isn't used to cannabis, for example, they don't necessarily like the effects on the brain. With muscle spasm in multiple sclerosis, the evidence isn't good for the effectiveness of cannabis and there is some disturbing evidence that it might damage thinking and memory. With chronic pain, at best the effects of cannabis are small. Then there are the side effects such as lung damage, dependence and possibly reducing motivation to engage with treatment, which could be a serious consequence if someone's undergoing potentially lifesaving chemotherapy.

Hopefully the Australian trial will help consumers decide the pros and cons of medical cannabis for themselves but so far the research suggests you shouldn't expect too much.



## MYTH VS. FACT: DOES LIVING IN THE CITY INCREASE FOOD ALLERGY RISK IN KIDS?

Food allergy rates are on the rise. It's thought that around one in 10 Australian infants and one in 20 children up to the age of five have food allergies. Cow's milk, peanut and egg allergy are three of the most common food allergies experienced by young kids. Researchers looked into potential environmental factors that may be contributing to the high rates of food allergy in children.

Researchers measured the presence and severity of allergies to milk, eggs and peanuts in a group of children over a five year period. The children lived in the inner city – ranging from disadvantaged to higher socioeconomic areas. They found that the presence of certain bacteria was a protective factor against allergy risk. Children with higher levels of

these bacteria in their bedroom were more protected against food allergies.

It's thought that these bacteria come from the wider urban environment like dirt and outdoor spaces and therefore kids living in inner city environments with little exposure to the outdoors may be at higher risk of food allergy. This adds another reason to get kids outside and active from an early age – not only will their bodies benefit from the exercise, their risk of allergies may be reduced too.

**For reference:** McGowan, EC et al. Influence of early-life exposures on food sensitisation and food allergy in an inner-city birth cohort. *Journal of Allergy and Clinical Immunology* Epub online August 13 2014, doi: 10.1016/j.jaci.2014.06.033.

Down: 1. Heart; 2. Pulmonary; 3. Tongue; 4. Smoking.  
Across: 2. Peanuts; 5. Blood; 6. Breathing; 7. Lifestyle.

## ANSWERS TO CROSSWORD

### PHOTO COMPETITION: BE IN TO WIN A \$50 SHOPPING VOUCHER

Choose from either **Woolworths, JB Hi Fi or Dymocks Book Stores.**

Simply email us your best holiday photo, along with your name, address, phone number and the clinic you attend



to: [cliniccompetition@gmail.com](mailto:cliniccompetition@gmail.com) with the subject heading 'December Doc 2014'. The winner will have their photo displayed in the next issue of Your Doctor.

Entries must be received by 31/12/2014.

**THAT'S IT! GOOD LUCK!**

## PRACTICE UPDATE

### SERVICE

Our mission is to provide the highest quality care and service using evidence based medicine to ensure the health of our patients. "Quality caring" means we excel in our work, products, and environment and show concern for and interest in our patients' needs. Further information about our practice policies can be obtained by asking one of our friendly receptionists.

### PRIVACY

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. You can make a request in writing for a copy of your records to be transferred to another GP.

### COMMUNICATION

Information regarding appointments, investigations, results, scripts, referrals may be shared with your consent as required for your care. Patient requests requiring action are attended to promptly, based on level of urgency. You will be notified if there is any charge for the service.

### FOLLOW-UP OF RESULTS

Your doctor will decide with you how to inform you of test results (e.g., phone call, follow-up appointment, etc.). All results are reviewed by the ordering doctor. For any results requiring urgent action, you will be phoned. If you have not been contacted regarding your results, call and ask.

### FEEDBACK

Our goal is to provide a quality, caring service. If you have any concerns or suggestions, please let us know. We genuinely wish to hear from you. If we have not satisfied your concerns, please contact the Health Quality and Complaints Commission on 1800 077 308 or [info@hqcc.qld.gov.au](mailto:info@hqcc.qld.gov.au).

### FEES

Consults \$55 gap. Welfare \$40 gap. Skin Checks \$35 gap. DVA bulk-billed. Scripts and referral letters \$20 (bulk-billed if collected by patient). Saturday: No concessions. 3% surcharge for American Express and Diners Club payments.

### SKIN HQ

P: (07) 5591 4844 • [www.skinhq.com.au](http://www.skinhq.com.au)  
Remember to book your next skin check with Skin HQ. Ask about our laser, IPL and PDT treatments. Anti-wrinkle and volume enhancement treatments are also available.

### VASECTOMY VENUE

Gold Coast Circumcisions  
P: (07) 5531 1170 • [www.vasectomyvenue.com.au](http://www.vasectomyvenue.com.au)  
[www.gccircumcisions.com.au](http://www.gccircumcisions.com.au)  
Dr Michael Read provides "no scalpel" vasectomies as permanent contraception for men. He also performs circumcisions for boys and men, as well as babies.

### TRAVEL HEALTH DOCTORS

P: (07) 5526 4444 • [www.healthhq.com.au](http://www.healthhq.com.au)  
A member of the Travel Medicine Alliance, The Travel Health Doctors at Health HQ receive daily updates from worldwide sources to give you accurate, personalised advice based on your itinerary. We carry almost all vaccines and other travel requirements. We work with your GP in caring for you in a specific area.

You can now Book your next Appointment "Online" Just visit our website.