



# YOUR DOCTOR



## SEPTEMBER 2013

### HEALTH HQ

**"Quality Caring"**  
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**W:** www.skinhq.com.au



#### Dr Norman Hohl

*MBBS, FRACGR, 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, Frid** 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.



## PREGNANCY AND THE FLU

The flu season is upon us and the best way to avoid infection, aside from good hygiene, is to get vaccinated. While this is not risky business for the majority of people, there are groups of people that are thought to be at higher risk of adverse outcomes, one of which is pregnant women. During the Influenza A (H1N1) pandemic in 2009, the World Health Organisation (WHO) recommended that pregnant women receive the vaccination. Despite this, anecdotal reports began to emerge claiming adverse foetal outcomes due to the vaccine. A study in Norway investigated the risks posed to pregnant women by the influenza virus itself, as well as the vaccination against it.

113, 331 Norwegian women who gave birth during 2009 or 2010 were analysed through national health registries. Researchers aimed to investigate the risk of foetal death after having been exposed to the pandemic, and clinically diagnosed by a clinician, compared to the risk after vaccination during pregnancy. The results revealed a link between the infection itself and increased risk of foetal death, but no significant risk association with the vaccination. Of all participants, 25,976

women were vaccinated, and 87,335 were not. Foetal deaths occurred in both groups, amounting to 78 and 414 in the vaccinated and unvaccinated groups respectively. There was no link between vaccination and non-fatal birth complications.

This study indicates that exposure to the flu may be linked to increased chances of adverse foetal outcomes, and remaining unvaccinated amplifies this risk. While there is growing evidence to support this, it is important that women consult a healthcare professional before taking medications or receiving vaccinations during pregnancy.

## INSIDE:

- TAKING A STAND
- CLOCKING IN ON WEIGHT LOSS
- DR NORMAN SWAN - A MATTER OF HEALTH



## TAKING A STAND

**Physical activity is known to benefit** our overall health and wellbeing in a number of ways. There's also mounting research suggesting that sedentary behaviour, like sitting or lying, may have the opposite effect. Australian men are known to have a higher rate of chronic disease than women, yet middle-aged Australian males remain a relatively under-investigated group. Now there's been a study looking at the association between overall sitting time and chronic disease in this group of Australian men.

Data on 63,048 men were gathered from the 45 and Up Study – a long term study following the health and wellbeing of men and women aged 45 years and over living

in New South Wales. The men were asked whether or not they had ever been diagnosed with a chronic disease such as cancer, heart disease, diabetes or hypertension (high blood pressure). Participants recorded their total daily sitting time in one of four categories: fewer than four hours, four to six hours, six to eight hours, or greater than eight hours. They also recorded how much physical activity they engaged in weekly, and of what intensity, as well as various lifestyle habits including smoking, body mass index (BMI) and limitations of movement.

The results showed that increased sitting time was associated with chronic illness especially diabetes. Reports of diabetes

increased with sitting time, with those seated for four to six and six to eight hours a day more likely to have reported diabetes than those in the under four hour category. This research highlights the importance of being active and suggests that there are lifestyle changes that people can make to improve their health and quality of life with minimal disruption to their day-to-day routine. Simple changes such as walking to work, standing at your desk, if that's possible, and taking the stairs instead of the lift are easy ways to get more activity into your day, even when you have minimal time available.

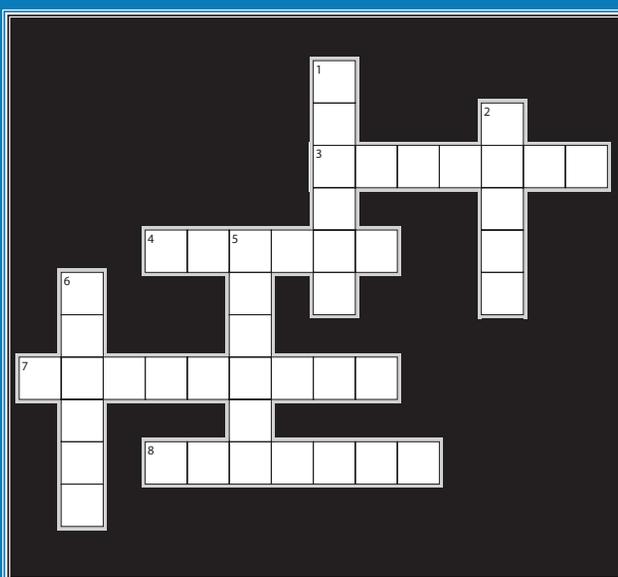
## Clever CROSSWORD

### Down:

1. Itching has different causes, one main one is due to what?
2. If you're experiencing itchiness it may be caused by problems with your kidneys and what?
5. Exposure to the flu may be linked to increased chances of what problems?
6. Eating meals late at night can decrease your chances of losing what?

### Across:

3. Increased amounts of what, have been linked to chronic illness and diabetes?
4. What drink has been falsely linked with helping you to sober up?
7. Modifying which habits can help to reduce risk of cancer?
8. There are many ways to improve your daily health, such as using stairs, and what?



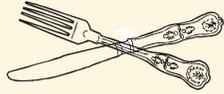
**EACH OF THE WORDS CAN BE FOUND IN THIS ISSUE OF "YOUR DOCTOR". ANSWERS ARE SHOWN ON UPPER RIGHT BACK PAGE.**

## MYTH VS FACT - DOES COFFEE SOBER YOU UP?

**There are many weird and wonderful** myths surrounding how best to sober yourself up after a big night on the grog. Some include drinking lots of water, eating bread and taking paracetamol. One of the most common supposed remedies is caffeine, however research suggests that it may not be all it's cracked up to be.

Researchers tested caffeine sobriety effects on a group of mice, injecting them with various doses of alcohol and caffeine, and injecting a control group with a saline solution. They then let the mice loose in a maze and observed their behaviour. The alcohol group moved around more and became less anxious, yet they learned significantly less about the maze when compared to the control group. When injected with caffeine, the negative effects of the alcohol remained present in the mice.

Researchers suggested that, while coffee may increase an intoxicated person's alertness, it does not reverse the damaging effects that alcohol has on a person's learning capacity or decision-making skills. The myth that coffee has sobering powers can actually be quite dangerous, with people mistaking alertness for sobriety and then feeling they can undertake complex tasks such as driving. Time is the best measure of sobriety and, if ever in doubt, stay off the roads until you're certain that the alcohol has left your system and you're well rested enough to function safely. Better still, let your designated driver do the job.



## Good Health on the Menu

### MUSHROOM, CAPSICUM, FETA AND THYME OMELETTE

*An easy breakfast guaranteed to fill you up.*

#### Ingredients:

- 2 tsp olive oil
- 100g sliced mushrooms
- ¼ fresh capsicum finely sliced
- 2 tsp fresh thyme leaves, chopped
- 2 eggs
- 1 tbs water
- 25g low fat feta cheese
- Cracked pepper and lemon wedge to season

#### Method

1. Add 1 tsp of oil to a fry pan over heat
2. Add mushrooms and sauté until tender
3. Mix in capsicum and thyme and stir until capsicum softens then transfer mixture to a bowl
4. Whisk eggs and water together in a bowl
5. Add second tsp of olive oil to fry pan and pour in egg mixture
6. Cook over medium heat until omelette is almost set
7. Add mixture and crumbled feta to one half of the omelette and season with pepper
8. Flip unfilled side of omelette over the filling
9. Allow omelette to cook over low heat for a further minute
10. Serve with a squeeze of lemon juice and sprinkle of cracked pepper over the top

**Recipe serves 1**



*Enjoy!*



## CLOCKING IN ON WEIGHT LOSS

**The issue of meal timing**, and how much food we consume at different times of the day, is often brought into weight loss and weight gain discussions. How often, and in what quantity, people eat throughout the day is thought to play a role in the development of obesity, yet how best to time meals remains lost in a sea of competing theories. Is it best to have three meals a day, and avoid snacking, or are multiple small meals throughout the day a better option? Should we have a big breakfast and then decrease food intake as the day progresses? Is intermittent fasting throughout the week a viable weight loss tool or will this lead to weight gain? Researchers have investigated the link between meal timings and weight management, and how this could inform efforts to lose weight.

Researchers analysed 420 volunteers, looking at the effect of meal timing on fat storage. Participants were following a 20-week behavioural treatment for obesity, and were divided into two groups, classified as early or late eaters, based on the timing of their main meal of the day. Additional factors were recorded including total amount of food eaten, dietary composition, energy expenditure, appetite hormones and sleep duration.

The results revealed that the late eaters lost less weight after 20 weeks than those who consumed their main meal earlier, amounting to a 2.2kg difference. While this may not seem like a significant amount of weight in the short term, when added up over a number of years the change becomes significant. There were minimal differences between the two groups with regards to any of the additional factors mentioned above.

Researchers said that the disparity in weight loss could be, in part, due to the effect this had on participants' remaining meals of the day, with the late eaters being more likely to have little or no breakfast and a later dinner in the evening. While a variety of factors play into weight loss, including exercise and lifestyle habits, it may be worth talking to a healthcare professional about the best way to plan your diet and meal timings based on your lifestyle.





**Dr Norman Swan**

## A MATTER OF HEALTH

### DON'T SCRATCH THAT ITCH

**I hate writing about itching** because I start to itch and scratch just thinking about it and you're probably starting to right now – and I haven't even got going. If you ask people who have a chronic itch (pruritus is the medical name) they often say they'd rather be in pain, so unpleasant is the experience.

This time of year is bad for itching because the cold dry air dries out the skin, then you itch, then you scratch, then you get a rash and then some people get a skin infection because they've been tearing away at their skin so hard. Sometimes the rash comes first when you have eczema or psoriasis or an allergy to something you've come in contact with. Occasionally it's a skin infection called scabies where a mite burrows under the skin. (Okay now you're really scratching)

One of the aims in dealing with itching is to try to avoid scratching because all sorts of things occur when you do, not the least being that you can break down the natural immune barriers in your skin, which in turn can make the skin more susceptible to the effects of chemicals and allergic substances. The trouble is that scratching is such a primal response. Just watch birds and dogs attacking themselves with beaks, teeth, claws and paws.

Itching has three main causes: one, due to rashes; two, due to internal problems and three, an itch-scratch cycle where no physical cause can be found, despite your doctor searching hard.

Starting with the rashes, surprisingly scabies is a much more common cause than people think, especially constant itching that keeps you up at night. Scabies can run riot through nursing homes although luckily it's relatively easy to treat with anti-scabies lotion. In some

Aboriginal communities, scabies is a serious problem and contributes to the high prevalence of rheumatic heart disease from secondary skin infections in children with scabies.

Eczema – also called atopic dermatitis – which often starts in infancy with dry skin, and an itchy rash in the folds of the elbows and behind the knees, is also very common. Experts believe that a lot of the problems with eczema could be avoided if parents and adults with eczema were far more obsessive about skin moisturisation.

What that means is eliminating soap products, having long baths rather than showers, to give the skin a chance to absorb water into its outer layers, then slapping on large amounts of simple, unperfumed moisturising cream or ointment with no plant extracts (not lotion which doesn't do the job). The right amount is about double what you'd imagine to be a lot.

There are other causes of itching when organs like the kidney and liver are failing to work properly and some forms of cancer like lymphoma can make you itch quite badly. So it's important to be properly assessed by your GP when itching is a problem.

The other interesting thing about recent research into itching is that the experts used to think that a chemical in the skin called histamine was important in the itching sensation. Histamine is involved in allergic and inflammatory responses and that has led doctors to prescribe antihistamines when a person is itching. But studies are showing that histamine is only involved about 10% of the time, supporting experience that antihistamines are not effective in many people. That's led specialists to use alternatives such as extreme moisturisation and treatment of the underlying cause. There is even some evidence that evening primrose oil and ultraviolet therapy can help itching when the cause is liver or kidney disease.

Then there are people who itch yet doctors can't find anything to explain it. In such instances, it's likely that a switch in the brain has been thrown for some reason or other so that the person perceives an itch without a physical reason for it. This is hard to treat and may need the assistance of a psychologist to re-set the person's perceptions.

## DID YOU KNOW? CANCER: THE PAST TWO DECADES

**Figures released** by the Cancer Council reveal that, over the past two decades, around 61,000 cancer related deaths have been avoided in Australia. Since the 1980s, there have been 2154 less lung cancer deaths annually, and a yearly reduction of 1797 and 773 deaths due to bowel cancer and breast cancer respectively. Researchers attribute this reduction to improvements in cancer prevention, screening, treatment and research. Another potential contributor could be the increase in public health messaging

surrounding lifestyle habits, like quitting smoking and maintaining a healthy diet and exercise regime, that play a role in cancer prevention. While there has been significant progress in improving the outcomes of many types of cancer, some remain relatively stagnant. Cancers such as that of the pancreas and oesophagus have shown only small improvements over the past 20 years, reiterating the need for continued investment in research initiatives.

## ANSWERS TO THE CROSSWORD

**Down:** 1. Rashes; 2. Liver; 5. Foetal; 6. Weight

**Across:** 3. Sitting; 4. Coffee; 7. Lifestyle; 8. Walking

## PRACTICE UPDATE

### Valuable websites of quality information

[www.travelmedicine.com.au](http://www.travelmedicine.com.au)  
[www.healthinsite.gov.au](http://www.healthinsite.gov.au)  
[www.blackdoginstitute.com.au](http://www.blackdoginstitute.com.au)  
[www.uptodate.com/patients](http://www.uptodate.com/patients)  
[www.beyondblue.org.au](http://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](http://www.vasectomyvenue.com.au)  
[www.gccircumcisions.com.au](http://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.