

FEBRUARY-MARCH 2023 EDITION

FREE TO TAKE HOME!



Glaucoma



The importance of Exercise



Healthy food choices



Impetigo (School sores)

● PRACTICE DOCTORS

Dr Steve Gust MBBS, FRACGP, JCCA
Family Medicine, Diabetes, Skin Cancers;
Paediatrics, Travel Medicine, Anaesthetics & Lap
Band Adjustments.

Dr Victoria Hayward
MBBS (Hons), FRACGP
Family Medicine, Diabetes & Women's Health

Dr Brian Malone MBBS, FRACGP, BSc, DCH
Family Medicine, Diabetes, Travel Medicine &
Skin Cancers.

Dr Susan Shaw MBBS, DRACOG
Family Medicine, Women's Health, Mental
Health, Asthma & Diabetes.

Dr May Ure MBBS
Family Medicine & Women's Health.

Dr Mark Zafir MBBS, DA
Family Medicine, Aged Care, Anaesthetics, Ante-
natal care, Men's Health; Diabetes, Skin Cancers
& Lap Band Adjustments.

Dr Lorri Hopkins
MBBS, FRACGP, DRANZCOG, DCH
Family Medicine, Ante-natal care; Asthma,
Diabetes, Paediatrics, Women's Health & Skin
Cancers.

● PRACTICE BILLING POLICY

We are a private billing practice.
We generally bulk bill children under 16.
We do not routinely bulk bill. Payment is
made at the time of the consultation. If
you are experiencing financial difficulties,
please discuss with your Doctor or with
our Practice Manager.

● SPECIAL PRACTICE NOTES

Emergency or Urgent Appointments.
Please notify staff if your request is
urgent or requires immediate medical
attention. If an immediate appointment
is not available, you will be assessed
by a practice nurse for appropriate
Management.

After hours & Emergency. Outside
our normal surgery hours go to Albany
Regional Hospital if you need urgent
treatment. In an emergency call 000 for
an ambulance. Our doctors provide after
hours services all year round. Follow the
prompt on our after hours phone message
if it is medically essential to talk to the on
call doctor. Maternity cases are to contact
the labour ward direct.

Home Visits. Any requests for home visits
will be directed to the patient's GP and
the visit will be made at the discretion of
the treating Doctor.

Dr Maida Akhtar

MBChB, Post Grad Dip Public Hlth, PDHIV
Family Medicine, Paediatrics, Women's Health &
Emergency Medicine. Speaks Urdu.

Dr Ben Bradley MB BCH BAO (Hons)
Family Medicine, Emergency Medicine, Mental Health

Dr Stephen Chiang MBBS
Family Medicine, Internal Medicine, Geriatrics and
Chronic Conditions.

Dr Darcy Smith
MBBS, FRACGP, FRACMA, FACRRM, BHA, DIP RANZCOG
Paediatrics, Mental Health, General Medicine,
Obstetrics, Women's Health, Men's Health

Dr William Smith MBBS
Family Medicine, General Medicine

Dr James (Jim) Lie (Locum) MBBS
Family Medicine, Asthma, Diabetes, Skin Cancers,
Paediatrics, Sports Medicine & Obstetrics.
Speaks Mandarin.

● PRACTICE STAFF

General Manager:
Ian Graham

Co-Ordinator Patient Services

Dee Maquire

Practice Nurses:
Elizabeth Quinn (Nurse
Manager), Jenna, Jess,
Leanne, Lisa, Bonnie &
Annika

Reception Staff:

Kate Stanhope (Office
Manager), Brett, Imogen,
Julie W, Kelly O, Liz, Shauna,
Lauren, Julie M, Kiara, Hedi,
Kelly M, Eulisa & Kali

● SURGERY HOURS

Monday to Friday
8.30am – 5.30pm

*Vaccination clinics held on
scheduled Saturdays.*

*We are closed on Public
Holidays & Sundays, and for
general appointments on
Saturdays*

Covid-19 Safe Care in our practice

We abide by Health Department directives. Do not attend the practice if you have a fever, sore throat, runny nose, difficulty breathing or have a loss of taste or smell. Phone us to make an appointment to talk with a doctor. Masks are to be worn at all times when in our practice. You will be asked for proof of vaccination. Appointments may be by phone or video.

Telephone Advice. To obtain advice regarding your treatment phone the practice and you will be put through to the appropriate person or you can leave a message for a return call. Phone calls will not be put through to the GP while they are consulting.

Prescriptions. Scripts should be requested during a face to face or phone consultation with your regular GP. Non-urgent scripts done outside of an appointment will incur a \$10.00 fee and should be ready within 48 hours. Scripts needed urgently, on the same day as requested, will incur a \$15.00 fee.

Your Test Results. It is not practice policy to routinely contact patients with test results. Doctors review all test results and will either inform the patient themselves or ask a staff member to contact the patient with appropriate instructions. Patients are strongly encouraged to phone the surgery for results after 1 week. Please phone after 10am in the morning. INRs are now done in the treatment room by the Nurse. Results are reviewed by your GP and management discussed with them.

Skin Lesions & Skin Cancers. A number of our doctors have special interest in and considerable experience treating skin lesions. Ask the doctor to check any lesions you are concerned about. A full skin check is also advisable on a regular basis. A Treatment Room Fee is charged, in addition to the doctors fee, when a skin lesion is removed

YOUR NEXT APPOINTMENT:

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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.
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Glaucoma

Glaucoma affecting one in eight of those over 80 is the second commonest cause of permanent vision loss in Australia.

Primary open-angle glaucoma is the main form. It is a build-up of pressure in the eye, which eventually damages the optic nerve. Secondary glaucoma can follow eye trauma or the use of some medications, such as steroids.

Acute angle closure glaucoma is when the pressure increases rapidly. This is a painful condition and requires immediate medical attention and surgery.

Generally, there are no symptoms early on. Initially, side vision is affected. Vision loss can be slow and gradual. Risk factors include advancing age, a positive family history, diabetes and short-sightedness.

Diagnosis is by checking the pressure of the eyes. An optometrist can do this, which is recommended regularly for those aged 40 and above.

Visual field testing is also done, and this can be monitored over time.

Eye drops to lower pressure are the first line of treatment and are influenced by what other medical issue you may have. They reduce pressure either by reducing fluid production or improving drainage of fluid.

Surgical options include laser surgery or open surgery. A newer treatment is a minimally invasive surgery and involves using a stent. This is used where drops have failed or where the use of drops may be difficult for the person.



More info »

Medicinal cannabis

It is now six years since Medicinal Cannabis was legalised in Australia and in that time well over 300,000 approvals have been issued for its use.

Therapeutic Goods Administration (TGA) data shows that chronic pain remains the most common indication, with mental health conditions (anxiety, insomnia and PTSD) next. Over the last two years, there has been an increased use of the dried herb, which now accounts for over a third of approvals, with oral liquid still being the most common form.

It remains that medicinal cannabis products (with two specific exceptions) are unregistered products and not subsidised. They can be prescribed in situations where the TGA recognises evidence for medicinal cannabis and that other treatments have either not helped or caused unacceptable side effects. There is no set level of side effects nor a set number of prior treatments to be trialled.

Australia is part of a global trend toward wider use and acceptance of cannabis. There are an increasing number of formulations on the market, and the ability of prescribers to fine-tune treatment to the needs of the individual is increasing.

As with all medications, effectiveness varies. Some people get significant improvement in symptoms, and some get no response, with everyone else somewhere in between. Continuing treatment is always based on patients experiencing symptom improvements. Further research is also being undertaken in Australia at a number of centres.

There does remain some hype, and it is not a panacea nor suitable for all. However, the progress over six years has started to silence the naysayers.



More info »

The importance of Exercise for young and old



The human body was designed to be active and for most of human history has been. Till modern times most work was physical as was the means of getting from "A" to "B".

The human body was designed to be active and has been for most of history. Till modern times most jobs were physical, as was the means of getting from "A" to "B". Even as recently as the 1970s, we had to get out of our chairs to change TV channels. It is estimated that between the mid-1960s and today, the amount of incidental movement taken over by labour-saving devices is around 2000 calories per week (about one day's food intake).

Exercise is vital for good health – at any age. As we get older, regular exercise supports the health of our hearts and lungs. Resistance-type exercise is good for bones and maintaining muscle mass. Exercise can also reduce the likelihood of falls and has been shown to be positive for the immune system. Mental and physical health are related and regular exercise is associated with an up to 40% lower chance of depression. Some work has found that those who exercise regularly are at a lower risk of dementia.

Are you ever too old? It has been demonstrated that people as old as 102 are able to add new muscle fibres. What is the best type of exercise? It is the type that you enjoy and will stick to. However, that does not mean it has to be every day or a set amount of time. The key is being consistent.

If you haven't exercised in a while, start slowly and perhaps get advice from a physio or trainer. Don't overdo it!

The benefits of exercise are many. As the shoemaker says -just do it!

Healthy food choices for school-aged children

One in four Australian children are overweight or obese. There are two main drivers of this.



Firstly, is the tendency for children to snack on high-calorie foods and drinks. Second is the replacement of physical activity with time on a computer or other electronic devices. We can't turn back time, but it is not all bad news. You can do much as a parent or guardian to help a child battling weight.

Back to school means thinking about lunch boxes. It is fine to have a sweet treat in the lunchbox sometimes, but there are many healthy snack options too. Sticks of carrot or celery can be a snack. Fruit in season is a great snack. Even with snack bars, you can select those with natural ingredients, whole grains and less sugar by reading the labels. Read the labels on cracker biscuits

too. Some are high in fats and sugar, whilst others (like rice crackers) are not. A mix of seeds, nuts (watch for allergies) and dried fruit is another simple snack, as are cheese sticks or popcorn.

Substitute water for sweet drinks. Eliminating liquid calories can cut down calorie intake without leaving a child hungry. Have soft drinks only on special occasions or no more than once a week. Rather than fruit juice, give your child a piece of fruit and a glass of water. This gives them more fibre and fewer calories.

Sugar-free sweets and drinks are not necessarily a better alternative, as artificial sweeteners can be just as harmful.

Impetigo (School sores)

Impetigo is a skin infection caused by common bacteria (staphylococcus and streptococcus).

It is far more common in children, and the name school sores reflects this, but it can also affect adults. It is not a reflection of poor hygiene. The bacteria can live quietly on the body, but minor grazes or other disruptions of the skin surface may allow infection to set in.

The condition is not harmful or serious but is unsightly and very contagious. It often starts with redness which quickly develops into blisters that may have crusts or be weepy. They may be itchy or sore. Some children feel unwell, but many do not. It can spread from point to point around the body.

Diagnosis is generally on appearance. Sometimes your doctor may suggest swab tests to confirm the type of bacteria.

Treatment is with antiseptic on the sores and mainly with an antibiotic. It is important to keep your child home from school and away from other children. Wash the child's clothes, bedding and towels in hot water and add something germicidal. Avoid sharing towels. Encourage hand washing and discourage scratching the sores and cover them if advised. The sores will heal within a few days, and there should be no permanent scars.



More info »



COCONUT PINEAPPLE CHICKEN

Ingredients

- 1 can whole coconut milk (preferably unsweetened)
- 3/4 cup pineapple juice
- 1/4 cup chilli-garlic sauce
- 2 fresh limes - juiced
- 1/4 cup light brown sugar
- 3 cloves garlic, finely chopped
- 2 tbsp of light soy sauce
- 1 tbsp finely grated peeled ginger
- 1kg boneless, skinless chicken thighs (about 8 small)
- Salt
- 1/2 cup of diced pineapple or pineapple rounds
- Coriander to taste
- Spring onions to garnish

Method

1. In a large bowl mix the coconut milk, soy sauce, pineapple juice, chilli sauce, lime juice, brown sugar, ginger and garlic together. Add chicken to marinate and cover and place in fridge for 1 hour – 3 hours.
2. Transfer the marinade to a saucepan and bring to the boil, stirring occasionally until the marinade has thickened. Remove from the heat.
3. Grill the chicken on a lightly oiled grill or pan, seasoning with salt along the way.
4. Add the pineapple to the pan at the end and grill slightly.
5. Transfer the chicken and pineapple to a serving plate and drizzle with the marinade. Add coriander and spring onions to garnish.

WORDSEARCH

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The Surgery

● MORE PRACTICE NOTES

Chronic Disease Management Our practice will prepare a plan to ensure conditions such as Asthma, Diabetes, Heart Disease, and Osteoporosis and also Mental Health Problems are properly managed. If you have a chronic condition ask your GP about a plan. Help us to help you.

Recall & Reminders. Our practice uses a Recall and Reminder system to flag patients for preventative health care. We recall patients for health assessments and checks, skin checks, breast checks, pap smears, colonoscopies, IUD and Implanon removal. This surgery participates in State & National registers.

Patient Feedback. We would like to hear about your concerns, complaints or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer to make your concerns known outside the surgery, you can call the Western Australian Health & Disability Services Complaints Office on 1800 813 583

Patient Privacy. Our practice protects your personal health information to ensure it is only available to authorised staff and to comply with the Privacy Act. To obtain a copy of our Privacy Statement or your medical records, please ask.

Telehealth. Our practice is fully set up for video conferencing with participating specialists. Using Telehealth may save you time and travel costs; ask your GP and Specialist for advice.

My Health Record. Our practice is participating in the My Health Record program. If you wish to activate your My Health Record or would like to know more please ask your doctor or discuss the issue with our Practice Manager.

On Line Appointments. You can make appointments from our website www.thesurgery.net.au or through Healthengine: <https://healthengine.com.au>

Communication Policy. We use mail, facsimile & secure electronic mail to transmit patient information. If you have a mobile phone we will send an SMS to confirm appointments. Patients can contact us via our website for non-urgent matters.