

wellnews



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The newsletter of **Wellness on Wellington**

Winter 2013

Apologies that this winter edition of the newsletter has been printed a little late. There's been so much going on at the practice it's been hard both to put pen to paper (or fingers to keyboard) and even harder to know what to put as the lead article in this edition of Wellnews.

By the time you read this newsletter our on-site pharmacy will be up and running— a wonderful addition to the services which we can offer patients. You may not have realised we now have a pharmacy until you visited the practice—but if you follow us on Twitter or Facebook you would have known about it first. We've also got an article on managing back pain and another on a suite of services and health assessments which our practice can offer you at all ages and stages of life.

We hope the wait for the newsletter was worthwhile!

The convenience of a chemist

Since the day our practice relocated in 2010, patients have been asking us to include a pharmacy in the premises. The convenience of being able to pick up scripts as soon as they are written is obvious.

Unfortunately there are very strict rules about the location of pharmacies and it was not possible to establish a new pharmacy within a certain radius of existing pharmacies.

To our delight, there has been a sensible rewriting of the regulations governing

pharmacies so that large scale medical centres are now able to have on-site chemists. The policy recognises the important work of extended hours clinics in taking pressure off public hospitals and in providing ongoing care to the community.

The co-location of chemist with an extended hours clinic means that

patients are able to receive medical care

and pick up scripts at times when they are needed, rather than just basic "office-hours".

The pharmacy will be open

cal centre, including week-

ends and public holidays.

the same hours as the medi-

From our point of view, the addition of a pharmacy to the centre complements our services strengthens

our vision of creating a health precinct to serve Rowville, Lysterfield and Ferntree Gully.

One aspect of having an onsite phar-

macy that is very important to us, is that the chemist not just sell drugs -we want them to be a part of your health care team . Estimates are that up to 20% of hospital admissions in Australia are due to medication interactions or side effects and we believe that close cooperation between doctors and pharmacists is the best

way to ensure that your medications are

both prescribed and dispensed properly. We have previously written about the

> close working relationship between the doctors, nurses and allied health practitioners at our practice, where the exchange of infor-

mation and knowledge leads to much better outcomes for patients. Working closely with the pharmacists is something we look forward to as a way of optimising the quality of our prescribing. Members of the pharmacy team will also be attending our clinical meetings, so that we can discuss both general principles about new and old medications, and specific problems with particular patients.

The principal pharmacist is Leah Bartolotta, a very experienced, energetic and committed pharmacist. We have seen her interactions with patients at other locations and are very impressed with the dedication she shows to their wellbeing.

As a bonus, she is very familiar with our practice and the local suburbs as she spent over twenty years growing up in Rowville.

To ensure that patients get the best possible benefit whenever they need it, the pharmacy will be open the same hours as the medical centre, including weekends and public holidays.

Finally, we are sure that our patients will appreciate the low pricing of many products which My Chemist is famous for.



We are open every day of the year:

Monday - Friday 8.00 am - 9.00 pm Saturday - Sunday 9.00 am - 5.00 pm **Public Holidays** 9.00 am - 1.00 pm (Christmas & New Year Day 10.00 am -12.00 noon)

For patients of this practice with urgent problems after hours, a doctor from the clinic can be contacted by calling the surgery and following the instructions on the answering machine.

Save a life your own or your family's!

Update your home phone, work phone, mobile phone and address at reception!

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Now on Facebook

Thank-you to the patients who have chosen to follow our practice on Twitter and to read our blog. After an initial flurry the number of posts and tweets has de-



creased a bit but we hope to update both often in an effort to communicate more regularly with you about health news.

In the past few weeks we've commented on the controversial new psychiatric guidelines DSM-V, the risk of burns with hot noodles, the effectiveness of the HPV vaccine in almost eliminating wart

virus in teenage girls and many other media items.

We've also let our Twitter followers know first about practice updates such as the return of Dr Anna Harris and the opening of the pharmacy.

In early May we added Facebook to our social media offerings. Like everyone else, we'd like you to "Like" us (though

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we'd much prefer you to like us in person rather than just on Facebook!)

So if you would like to keep up with our practice news and medical opinions, try:

Facebook: Wellness-on-Wellington

Twitter: WellOnWell

Blog: www.wellonwell.wordpress.com We'd love to hear your feedback on the topics we

choose and the information we provide.

The search for work

Work is important for lots of reasons. Of course, it provides an income; but for many people work also provides a sense of purpose, social interaction and a reason to get up in the morning. Unfortunately due to injury or disability many people are excluded from the workplace and the work process. Getting these people back into employment may not initially sound like a medical service—but it can have profound benefits for both their physical and mental health.

Meaningful help to return to meaningful work is available

We are therefore delighted that a company called Advanced Personnel Management (APM) has joined our allied health team.

APM provide workplace rehabilitation, employment and psycho-

logical services which make it possible for employees to find and return to work and for employers to think about employing staff whom they might initially reject as being too difficult to take on. By working with large and small private and public sector organisations they assist clients with injuries, disabilities or illnesses.

APM's services include:

- Training in specific job skills
- Job-search support, such as résumé development and training in interview skills
- On the job training and co-worker or employer support
- Ongoing support in a job if required
- Support with the cost of vocational training
- Help with workplace modifications

We hope you never are in need of their assistance, but if you do it is good to know that meaningful help to return to meaningful work is available.

II o'clock—and (hopefully) all is well

tients have with our clinic is ringing up for test results.

We know that whenever anyone gets a test done, the waiting for the result is the hardest thing. Naturally patients are anxious to hear what the result is and find out what to do about it.

Unlike many clinics we do not automatically require patients to come back for test results. Your time is valuable and we know that in most cases you would prefer to get the result by phone rather than make an appointment.

We know that in most cases test results are normal (and no action is required), or the results require only minor instructions that can be given over the phone.

However it is important to understand Unlike many clinics that when a result we do not automaticomes back to the clinic there is still a cally require palot of processing that tients to come back needs to take place for test results. before the result is available to you.

One of the commonest interactions pa- Most importantly the doctor has to re- The other issue related to phone results is ceive the result (usually electronically the workload on our reception staff. If downloaded) and think about the signifi- you have ever attended the clinic for an

> cance in your case. That may involve looking back through your Please don't ring file, comparing the result to previous tests, to national guidelines or to letters from your specialist. In other cases the results may prompt a tor starts in the call back to the lab to discuss the afternoon, please interpretation. This is particularly ring after 4pm. common with radiology tests.

This process takes time, and whilst all that is happening, other patients also need to be seen!

Most of our doctors have a quick glance at their results when they first arrive at work (to make sure there is nothing

life—threatening) but then go through them more thoroughly later in the day.

Ringing too early in the morning will therefore almost certainly result in being asked to call back later as the doctor will not have had time to prop-

erly check the results.

for results till after 11am. If your doc-

early appointment you will know how busy the phones can be in the first few hours of the day as patients ring to make appointments.

For both these reasons, we there-

fore ask that you don't ring for results till after 11am. If you know that your doctor doesn't start till the afternoon, please don't ring for results till at least 4 or

Finally, if you are told you do need to come back in, please don't assume that the results show something dreadful. Sometimes it means the doctor wants to explain a result to you face-to-face, or that he wants to ask a few clarifying questions to interpret the result more

From the medical press

Each issue we bring you a few interesting developments in the world of medicine with references so you can read more.

Eating fish more than once a week may decrease acne whilst drinking skim milk more than twice a week might make it worse.

Italian researchers compared 205 teenagers with moderate acne against 358 peers without acne and looked at their dietary differences. Cakes, lollies and chocolate had no impact at all on acne.

Body Mass Index of less than 18.5 protected boys from acne - possibly because of hormonal effects. www.jaad.org/article/PIIS0190962212001648/

Mobile phones do not cause death in hospitals but can cause some minor incidents.

Whilst no life-saving machines were interfered with, there were cases of false alarms on monitors, malfunctions in infusion pumps, and incorrect readings on cardiac monitors.

The belief traces back to an article in the Wall Street Journal in 1993 but has almost no effect in real life except at very close range.

bmj.com/content/335/7633/1288

It is better to pass wind on a plane than keep it in—especially if you're the pilot.

People fart more on flights because of change in intestinal gasses as cabin pressure alters. Stress, discomfort, pain, bloating and dyspepsia can result and for the pilot there is a risk of reduced safety due to diminished concentration on the job.

Researchers stated "There is actually only one reasonable solution ... just let it go".

journal.nzma.org.nz/journal/index.shtml

Health assessments

Whilst there is lots of talk about the importance of preventative medicine, general checkups and holistic care, most of the time when we see patients it is because they have come in sick.

We are delighted to be able to help ill people feel better, but sometimes it's important to step back, take a good look at the big picture and then give advice that will really make a difference for the long term.

Medicare now provides three major opportunities to spend a longer period of time with a patient and really look at their overall health. We'd like to be sure that you take advantage of these programs.

The first is called the Healthy Kids Check but is also known as the preschool or 4 year-old health check. In fact that name is quite misleading as the visit can now be done any time after age three till the child turns five.

This visit is primarily conducted by our nursing team who have been trained to carry out this check. It involves a thirty minute appointment at the practice to discuss the parents overall impressions of the child's development as well as an

An annual visit for patients over 75 which we strongly recommend.

exam looking at their v i s i o n , h e a r i n g , oral health, height and weight.

The nurse will also ask about their allergies, toilet-training, interaction with other kids and so on as a way of gauging whether your child is ready for school. If any concerns arise, an appointment will be made with your doctor to explore the issues more fully.

Parents can have their own thorough health assessment. Everyone, between the ages of 45 and 49, should have a one-off comprehensive review by their doctor. One way to think of this visit is to note that almost everyone in Australia will live to be seventy—but it is the

action that you take in your middleyears that will determine whether you live to be healthy in your eighties and nineties.

The visit therefore will update your family history and past medical problems; discuss your home, family and work life; your diet and exercise habits; review smoking, alcohol and medication use; and assess your risk of developing a chronic disease in the foreseeable future.

This visit must be done before your 50th birthday and its often better to get a few basic tests like cholesterol and sugar before the visit, so that those issues can be covered during the consultation. Please come a few minutes before your appointment, so the nurse can check your urine, blood pressure, height, waist and weight which will leave more time for discussion with the doctor during the visit.

Finally, there is an annual visit available for patients over the age of 75 which we strongly recommend. Our nurse will usually visit you at home where she will help you look for any hazards in the house and discuss any aids that might help. She will ask some questions looking for early clues of depression and memory problems, review your medication and your daily activities.

We then ask you to see your usual doctor for a 30 minute appointment where a thorough review of your history will be taken and a physical exam conducted. Rather than looking at individual problems this is a genuine "big picture" visit which can reveal issues we otherwise overlook. A comprehensive written report is then supplied.

Sometimes follow-up visits with the doctor or a visiting pharmacist are also indicated.

All up, these health assessment visits provide a thorough review in a way that quick visits for individual problems cannot provide. Please do book in.

Back pain

Our chiropractor, Frank Whelan has provided the following article on the common problem of back pain.

Back pain is so common that nearly 10% of people develop pain each year. Back pain can affect families, lifestyle and productivity as well as causing an increase in other conditions such as depression.

Whilst sometimes back pain can be due to other conditions, the commonest cause is Acute Non Specific Back Pain. This is usually caused by straining or overloading the back when bending, lifting or twisting which results in a "locking" of the joints and surrounding muscles.

There are two ways to approach the problem: first resolving the acute symptoms and second improving your postural fitness as a preventative measure.

The acute issue is typically resolved by rest, massage, taking anti-inflammatories and perhaps a visit to a chiropractor.

Improving postural fitness gives you greater strength, better coordination and balance. It can help reduce muscle fatigue

and improve your postural endurance which may improve your quality of life.

To take control of your postural fitness, you need to think and walk tall and pick an exercise plan that will strengthen your

core muscles. These include exercises such as Pilates, yoga or swimming. It also means paying attention to how you sit and for how long.

Tips for improving your posture at work include:

- Try standing when you're on the phone for extended periods;
- Stretch regularly during meetings;
- While you're working at your computer take short breaks to stretch and stand;
- Check and adjust your position regularly.



Wellness Whispers

This newsletter is pro-

like us to cover in the

next edition.

duced by our clinic. Let

us know what you would

NEW STAFF

Two new receptionists joined our team shortly after our last newsletter was printed. Although you may have already met them, this is their first chance to introduce themselves.

Zoe Reiseger tells us "I have been at WOW for a few months now—I previously worked in a university health service. I come from a family of 8 brothers and sisters who mean a lot to me. I'm originally from Cairns and moved to Melbourne to study science after graduating high school. I have always been around the medical environment as most of my family have pursued a career within it. I really enjoy working at WOW!

Outside of work I enjoy playing basketball competitively, reading, my new kitten Kovu and catching up with friends.

Emma Smith has just returned to the work force

after being on maternity leave since August 2012. "I have two beautiful children who are my world—Ethan is two and a half years old and Ruby is eight months.

Together with my husband, we enjoy doing many things

as a family and one of our favourite activities is going away camping. We have enjoyed camping since we were young and wanted to continue the trend once we had kids so although a few changes have had to be made, we still get away and have a good time.

I am very excited about my new position here at Wellness on Wellington and look forward to being part of such a wonderful team."

WELCOME BACK

We are delighted that **Dr Anna Harris** has returned from maternity leave. Initially she is doing just one session a week for a few weeks and will then be going on a brief pre-planned trip. She'll then be returning for two sessions per week. Welcome back Anna!

WAITING CAN BE FUN

Sometimes there are unexpected benefits of our practice's growth.

We were very amused recently when the Maybury family, well known for their bubbly humour, were reluctant to be called in for their appointment.

Whilst sitting in the waiting room they had started playing a variation of the "Guess Who" game - using the gallery of staff photos instead of a board game with pictures—and they didn't want to have to interrupt play.

With nearly forty pictures of staff on display, it's not surprising that they were able to amuse themselves for some time.

A LITTLE LESS PAIN

From 1 July 2013, a combined measles, mumps, rubella and varicella (MMRV) vaccine for

children aged 18 months will be added to the National Immunisation Program.

All these vaccines are already part of the children's schedule, but by combining MMR with varicella (chicken pox) there will be one less injection. The vaccine replaces the

current varicella vaccine given on its own at 18 months, and also the booster dose of MMR which has previously been given just before school at the four-year old visit.

Children who've already received their 18 month varicella vaccine will still need to get an MMR shot when they turn four.

We also remind parents that there is a recommendation to give children a booster shot of varicella a few months after the initial shot but that this is not funded by the government.

REMINDER

A reminder that this newsletter is produced by our clinic. Unlike off-the-shelf flyers which most practices buy, we can tailor articles to suit our patients interests. Let us know what you would like us to cover in the next edition.

The information in this newsletter is general in nature and cannot be relied upon in any particular case. Serious conditions may appear minor and vice-versa. We therefore advise that if you have any concern about your health, you should consult your doctor at the earliest opportunity.