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Dr Ruth BAIGENT MB BS (Hons), FRACGP, DCH

Special interests: women's health, paediatrics, chronic disease management, wound care

Dr Crina SOLOMON MD, FRACGP Special interests: lifestyle medicine, chronic medical conditions, shared obstetric care, women's health, children's health, mental health

Dr Anita DANIEL MD, FRACGP Special interests: women's health, paediatrics, preventative health & wellbeing, ophthalmology

Dr Demelza TOH MB BS, FRACGP, DCH Special interests: women's health, children's health

Dr Anne IRVING MB BS, FRACGP Special interests: chronic disease & pain management, palliative care, shared obstetric care, paediatrics

Vanessa KAO IBOP - Podiatrist Special interests: general & paediatric podiatry, diabetic footcare, orthotic therapy, ingrown toenail treatment & management

Ann-Louise RN - Practice Nurse

HOURS

The surgery is open:

Monday 9am – 6pm
Tuesday to Friday 9am – 5pm
Thursday Extended 5pm – 7:30pm
Saturday 9am – 12pm

APPOINTMENTS

Please ring (08) 7221 2588 for an appointment or book online at www. healthatdulwich.com.au or through the HotDoc App. If you need more time or have multiple concerns to discuss with your doctor, please tell the receptionist when you make your booking.
Urgent medical problems will always be dealt with promptly.

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YOUR MALE ALTH

healthy advice from your family doctor

Summer 2020 Edition 96

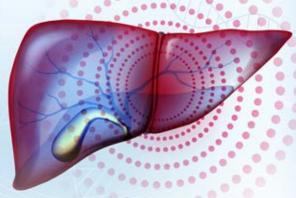
Fatty Liver Disease
The Health Benefits of Laughter
The Facts About Weight Loss Surgery
Male Infertility Explained
Bedwetting in Older Children

YOUR COPY — FREE TO TAKE HOME

Fatty Liver Disease

What it is — and why it matters

atty liver disease the build-up of fat in the liver cells. While excess alcohol intake is a major cause, it is being seen increasingly in those who don't drink to excess and is referred to as non-alcoholic fatty liver disease, or NAFLD for short.



NAFLD describes the spectrum of fatty liver disease from a simple fatty liver through to severe liver damage.

- ➤ The first stage is a fatty liver, also called steatosis, where excess fat is stored in the liver but doesn't cause any significant damage
- ▶ The second stage is known as non-alcoholic steatohepatitis, or NASH, where the excess fat causes inflammation (known as hepatitis) and can start to damage the liver cells and cause scarring, preventing the liver from working at its best
- ► The final stage is cirrhosis which occurs when there is significant damage to the liver, and can lead to liver failure

The exact cause of NAFLD, and who will progress from having a fatty liver to more severe forms the disease is unclear. However, people who carry excess weight, particularly around the middle, those with type 2 diabetes and/or metabolic syndrome, and people with high triglycerides (blood fats) are at higher risk. Other causes of fatty liver include excess alcohol intake, certain medications, malnutrition and exposure to certain environmental toxins and chemicals.

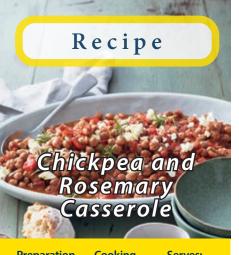
A fatty liver doesn't usually cause any symptoms on its own, so most people aren't aware that they have it. It is usually diagnosed when blood tests show abnormal liver function tests or may be seen on an ultrasound. The only way to get a definite diagnosis is by having a liver biopsy but this isn't always necessary as other tests can give your doctor enough information to suggest that something

needs to be done. If left untreated it could progress to more serious liver damage. At this stage symptoms may include fatigue, abdominal pain and weight loss.

Whether you have fatty liver disease or want to avoid it, there are many things you can do to protect your liver:

- Lose weight, if you are carrying excess weight. But avoid rapid weight loss, which can sometimes contribute to fatty liver disease.
- Eat a healthy, balanced diet.
- Exercise regularly and try to be more active throughout your day.
- Avoid or limit alcohol, particularly in excess.
- If you have diabetes, try to keep your blood glucose levels in your target range.
- Lower triglyceride levels by eating a healthy diet, exercising regularly and taking medication as prescribed by your doctor.
- Check your medications some medications, both prescription and overthe-counter (including vitamin, mineral and herbal supplements) can affect your liver, so always check with your doctor before taking any new medication and follow the directions.
- Protect your liver by avoiding alcohol, drugs, smoking and exposure to toxic chemicals, which can include some household chemicals

To find out more about fatty liver, visit <u>www.</u> <u>healthdirect.gov.au/fatty-liver</u> or download a free information sheet at <u>www.gesa.org.au/resources/patients/fatty-liver-disease/</u>



Preparation time:

Cooking time:

Serves:

15 minutes 25 minutes

Ingredients

- Extra-virgin olive oil
- 1 red onion, finely diced
- 1 small red chilli, halved, deseeded and
- Finely chopped or pinch chilli flakes 2 garlic cloves, finely diced
- 1 red capsicum, deseeded and diced
 3 x 400 g tins chickpeas, drained and rinsed
- 1/2 cup (125 ml) red wine
- 2—3 rosemary sprigs, leaves picked
- and chopped, plus extra to serve 1/2 teaspoon ground cinnamon
- 1 x 400 g tin crushed tomatoes
- 2 cups (500 ml) boiling water
- Sea salt and freshly ground black pepper 30 g feta, crumbled

Instructions

- Heat the olive oil in a large heavybased saucepan over a medium heat and sauté the onion and chilli until the onion is softened and translucent.
- Add the garlic, capsicum, chickpeas and red wine and simmer until the alcohol has mostly evaporated.
- 3. Add the rosemary and cinnamon to the pan and stir through.
- 4. Add the tomatoes and boiling water, then simmer for 10–15 minutes, or until the mixture thickens.
- 5. Season with salt and pepper to taste.
- Serve, topped with the extra rosemary and crumbled feta.

Extracted from The Heart Health Guide by Dr Catherine Itsiopoulos, published by Pan Macmillan Australia, available now.

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The Health Benefits of Laughter

ou probably recognise that you feel pretty satisfied after a good belly laugh. But did you know that laughing is good for your health?

While more research is needed, studies show that laughing can:

- Reduce levels of stress hormones
- Improve mood and reduce symptoms of anxiety and depression
- Increase the production of endorphins ('feel-good' hormones)
- Increase pain tolerance
- Lower blood pressure
- Boost your immune system by increasing the activity of natural killer cells
- Improve blood vessel function
- Reduce the rise in blood glucose levels after a meal in people with type 2 diabetes
- Reduce agitation in people with dementia Importantly, laughter is also free, easily accessible and without any negative side effects!

While the optimal duration, frequency and intensity of laughter needed to provide health benefits is still unclear, current research suggests that benefits may be seen with 30–60 minutes, once per week. So, just like exercise, schedule

yourself some laughter therapy each week, whether it's watching a funny movie, spending time with people who make you laugh or joining a laughter club.

Here are a few ways to help you to laugh more:

- Practice smiling and laughing every day
- Work out what makes you laugh and make time to do these things
- Spend time with people who make you smile and laugh
 - Share jokes with family and friends
 - Wtch a funny movie or television show, or attend a comedy show
 - Spend time playing with young children
 - Join a laughter club run by trained leaders, they are designed to help you to gain the benefits of laughter for no reason,

helping you to practice laughing until it becomes more natural.

To find your nearest laughter club, or participate online, visit <u>laughteryoga-australia.org/laughter-</u>club/

The Facts About Weight Loss Surgery

he number of Australian's undergoing weight loss (bariatric) surgery is increasing each year.

There are three main types of weight loss surgery performed in Australia:

Gastric banding involves placing an adjustable silicon band around the top of the stomach by keyhole surgery. The band reduces the amount of food you need to feel full and prevents you from overeating. It requires major changes to your eating – you will need to eat much smaller amounts, eat slowly, chew food well and some foods may not be tolerated.

Gastric sleeve surgery, also called sleeve gastrectomy, involves permanent removal of a portion of stomach, reducing its capacity by about 80% and lowering levels of appetite hormones. Following this surgery, you need to change your eating habits to include small frequent meals across the day and be careful to stop eating as soon as you feel full.

Gastric bypass surgery also known as Roux-en-Y, involves creating a small stomach pouch (to reduce the volume of the stomach). The food you eat then bypasses most of your stomach and the

first section of your small intestine that normally absorb food. Gastric bypass surgery usually leads to more weight loss than other types of surgery. However, there is a high risk of developing nutritional deficiencies.

Weight loss surgery is generally only recommended in those who are carrying significant amounts of excess weight and who have been unable to lose weight despite lifestyle changes. It carries several risks including the risk of infection, slippage and erosion of the band (with gastric banding), nutritional deficiencies, worsening of reflux (with gastric sleeve surgery) and the possibility of developing a condition called 'dumping syndrome' (with gastric bypass) where undigested food moves too rapidly into the small intestine and causes symptoms such as abdominal pain, diarrhoea, nausea, flushing, palpitations, sweating and feeling faint after meals. You will also need to make permanent changes to the way you eat, including the quantity, frequency and types of foods you eat.

If you are considering weight loss surgery, speak with your GP, who can help you to determine whether this is the right option for you, and refer you to a specialist bariatric surgeon for more information.

Women's Health: Caring For Your Pelvic Floor

Pelvic floor muscles are the group of muscles in your pelvis which stretch from the pubic bone (at the front) to the coccyx or tail-bone (at the back). In women, they support he bladder, bowel and uterus, helping to maintain bladder and bowel control and playing an important role in sexual sensation and function.

The health of your pelvic floor muscles can be affected by:

- Not keeping them active or overworking them
- Being pregnant and giving birth
- Having chronic constipation and straining to empty the bowels
- Carrying excess weight
- Heavy lifting
- Having a chronic cough or sneeze
- Injuries to the pelvic region
- Age

You may not be able to see them, but just like other muscles, your pelvic floor muscles will become stronger with regular exercise. All women should do regular pelvic floor exercises – ideally daily. Maintaining strong pelvic floor muscles can help to reduce the risk of incontinence and prolapse.

Pelvic floor muscle exercises (also known as 'kegels' or 'kegel exercises') can be done anywhere. However, some women find them hard to do, as it can be difficult to isolate these muscles. If you can't feel anything happening when you exercise your muscles, or doing the exercises yourself doesn't help with pelvic floor problems, consider getting help from a pelvic floor physiotherapist.

While the exercises can be done anywhere, it is best to start with sitting or lying down and then progress to doing the exercises while standing and then walking. Aim to exercise your pelvic floor muscles at least once per day but you might start with a few shorter sessions when first getting started.

For exercises to strengthen your pelvic floor, including videos and apps, visit www.pelvicfloorfirst.org.au. Or listen to this Jean Hailes podcast on Pelvic Floor exercises www.pelvic-floor-exercises-with-janetta-webb

If you are experiencing problems with bladder or bowel control, speak to your GP or call the National Continence Helpline on 1800 33 00 66 or email helpline@continence.org.au

Men's Health: Male Infertility Explained

round 15–20% of couples find it difficult to conceive. In about 30% of cases, this is due to fertility problems in the man, and in another 20% of cases, both partners have problems contributing to their difficulties falling pregnant.

Male fertility depends mainly on the quantity and quality of sperm. If the number of sperm produced is low or the sperm are of poor quality, this can make getting pregnant difficult, or in some cases not possible.

There can also be problems with how the sperm travel. Other, less common causes include certain hormonal problems and genetic causes.

If a couple has had regular, unprotected sex, for at least 12 months without conceiving and haven't managed to fall pregnant, it's worth visiting the doctor to have investigations for infertility.

For men, this may involve:

- Taking your medical history
- Having a physical examination
- Arranging a semen analysis to check the number, shape and movement of your sperm
- Having blood tests to measure hormone levels and/or for genetic testing
- Undergoing a testicular biopsy to check if the tubes within the testicles contain any sperm

 Having an ultrasound of the reproductive organs, such as the prostate gland

In many cases, the cause of the infertility can be treated and couples can conceive naturally. In other cases, assisted reproductive treatment, such as in vitro fertilisation (IVF) may be recommended.

For men considering pregnancy in the future, there are many things you can do to help improve your fertility. These include:

- Not smoking cigarettes
- Avoiding excess alcohol
- Protecting yourself against sexually transmitted diseases
- Wearing loose fitting underwear to avoid heat stress
- Not using anabolic steroids (often taken for body-building or sporting purposes)
- Wearing protective clothing and following all occupational health and safety guidelines if your work has the potential to affect your fertility
- Avoid exposure to harmful chemicals For more information on male infertility visit www.healthymale.org.au/mens-health/maleinfertility

To find out more about the factors affecting fertility and what you can do to increase your chances of conceiving Visit the Your Fertility website www.yourfertility.org.au

Dr.LoL:)



COMPETITION



Win a copy of THE HEART HEALTH GUIDE courtesy of Pan Macmillan.

The Mediterranean diet is the most researched, effective and accessible diet for dealing with a range of lifestyle diseases including cardiovascular disease (CVD).

In *The Heart Health Guide*, Catherine provides practical advice, based on up-to- the-minute research, that will help readers understand their condition and improve their health via diet, along with input from leading doctors.

Recipe and information extracted from *The Heart Health Guide* by Dr Catherine Itsiopoulos, published by Pan Macmillan Australia, available now.

To enter visit us online at win.yourhealth.net.au

Competition opens 1st December 2020. The winning entry will be selected on 1st March 2021 and patified by email

Children's Health Bedwetting in older children

hile it is common for children six years and under to wet the bed, sometimes older children can wet the bed too. They may continue bedwetting from birth or start wetting the bed again when they are older.

There are a number of possible causes of bedwetting in older children. These include:

- Sleeping deeply and not walking up when their bladder is full.
- Having a small bladder that can't hold a lot of urine overnight.
- ▶ Not producing enough of a hormone called AntiDiuretic Hormone (ADH) it makes urine more concentrated so when levels are low a child will produce more urine.
- ► Family history if one or both parents wet the bed when they were younger, it is more likely to occur in their children.
- In rare cases, there may be an underlying medical condition.

Bedwetting can be upsetting and frustrating for both you and your child. But there are things that you can do to help.

- 1. Don't punish or scold your child bedwetting is accidental and isn't their fault.
- 2. Make sure your child drinks enough fluid throughout the day but avoid drinks containing caffeine at night.
- 3. Consider a device which senses when your child starts to wet. They help your child start to recognise when their bladder is full and learn to hold on, or wake up and go to the toilet. Alarms aren't suitable for all children and are usually only recommended for those aged 7 years or older.
- 4. Consider buying bedwetting sheets or a waterproof mattress protector. These can make it easier to change your child's bedding at night and stop their mattress from become wet and smelly. Underwear pads can also be helpful, particularly if your child is sleeping away from home such as at a sleepover or school camp.
- In some cases, your child's doctor might prescribe medication (a synthetic form of ADH) to help with bedwetting.

If you are worried about your child's bedwetting or if it is causing issues for your child, speak to your child's doctor who can help you to find the best solution for your child and your family.

AFTER-HOURS & EMERGENCY

In case of emergency, please dial 000 for an ambulance.

When the surgery is closed, please ring Home Doctor Service 13 74 25.

OUR PRACTICE

Health at Dulwich is fully accredited by OPA.

Experienced and committed doctors and health professionals have come together to provide the highest standard of healthcare with a personalised service involving respect and compassion.

Our friendly reception staff, Alex, Alli, Buffy, and Magdolina, are available to make bookings or help in any way. Our practice nurse, Ann-Louise, assists our doctors with a range of healthcare services. Trien is our business and practice manager.

All patient information and medical records are kept strictly confidential at all times

TELEPHONE / ELECTRONIC COMMUNICATION

All telephone calls for doctors will be relayed through reception staff via message and the doctor will return your call at their earliest convenience. Consultations will not be interrupted unless in the event of an emergency. Our practice uses SMS to issue you with reminders and recalls appropriate to your care. If you do not wish to be part of this SMS system, please advise your doctor. It is our practice policy that we do not communicate with our patients via email, and we do not answer clinical questions by email. To comply with RACGP Accreditation Standards, Health at Dulwich will not accept any correspondence electronically (ie via email, SMS, social media) from patients, relatives and friends of patients, medical providers, insurance companies etc requesting or requiring medical advice. If medical advice is required, please call (08) 7221 2588 to make an appointment.

REFERRAL RENEWALS & REPEAT PRESCRIPTIONS

Referral renewals require an appointment with your doctor as this provides you and your doctor an opportunity to review your health conditions. It is also essential to update your medical information to your specialists and other healthcare providers. Repeat prescriptions require an appointment with your doctor to ensure your medications and medical conditions are being managed appropriately. Please check your medication regularly and contact our surgery at least 2 weeks before they run out.

Please book an appointment with your doctor, or alternatively we also offer telephone consults.

There is a charge of \$15 for a repeat prescription without a consultation. This fee covers the cost and time involved in processing your request.

FOLLOW-UP OF TEST RESULTS

At the time of consultation, your doctor will advise when they expect your results and whether you can call or need to make a return appointment. All test results require an appointment as they will not be given over the phone by our receptionists. Our receptionists can assist you with booking either a face-to-face or a telephone appointment with your doctor.

OUR SERVICES

As well as routine consultations, we provide the following services:

- Annual Health Checks
- Asthma, Diabetes & Hypertension Management
- GP Medical Care Plan Chronic Disease Management
- Health Check for 45 49 yrs
- Senior Health Assessment > 75 yrs
- Family Planning, Pap Smears, Pregnancy Tests, Obstetric & Ante-natal care
- Vaccinations & Childhood Immunisations
- Implanon Procedures
- ECG: Heart Check. Spirometry: Lung Function Test
- Iron Infusion Therapy
- Skin Cancer Checks Bulk-billed
- Minor Surgical Procedures & Wound Care: Stitching Cuts, Removing Moles
- Liquid nitrogen 'freezing' therapy for sunspots and warts

FEES

We are a private billing practice. Fees are payable at the time of consultation by Cash, Visa, MasterCard, or EFTPOS. A full schedule of fees is on display at reception. Children under 13 yrs and Veterans Affairs cardholders will be bulk billed. Pensioners and Health Care cardholders are billed a reduced fee.

Saturday and weekday evenings after 5pm attract a higher fee, with no bulk billing available.

PRIVACY POLICY

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

FEEDBACK & COMPLAINTS

If you are concerned with the service you receive, we are keen to hear about it. Please speak to our Practice Manager to discuss your concerns.

You may also contact the Health & Community Services Complaints Commissioner on (08) 8226 8666.