

Health on Kensington

**252 Kensington Road
Leabrook SA 5068**

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sue@healthonkensington.com.au

**Women's Health – Counselling – 3-Step Mental Health - Psychiatric Care - Palliative Care
Total Family Care - Acute Medicine - Minor Surgery - Paediatrics – Family Planning
Nutritional Advice - Audiology - Podiatry - Diabetes Management**

OPENING HOURS

| | |
|-----------|------------------|
| Monday | 7.30am – 5.30pm |
| Tuesday | 7.30am – 5.30pm |
| Wednesday | 7.30am – 5.30pm |
| Thursday | 7.30am – 7.00pm |
| Friday | 7.30am – 5.30pm |
| Saturday | 8.45am – 11.45am |
| Sunday | Closed (on call) |

MEDICAL STAFF: GP's

| | |
|------------------------|---------------------|
| Dr Chris Heinrich | Dr Catherine Dorsch |
| Dr Penelope Dargaville | Dr Tanja Shahin |
| Dr Cindy Koh | |

ADMINISTRATIVE & NURSING STAFF

| | |
|------------------|-------------------------|
| Susan Leighton | <i>Practice Manager</i> |
| Kate Torok | <i>Receptionist</i> |
| Leonie McIntyre | <i>Receptionist</i> |
| Justine Morgan | <i>Receptionist</i> |
| Janet Gilles | <i>Receptionist</i> |
| Katie Court | <i>Receptionist</i> |
| Michaela Cocking | <i>Registered Nurse</i> |

ONSITE PROVIDERS & SERVICES

| | |
|---------------------|------------------------|
| Dr Les Koopowitz | <i>Psychiatrist</i> |
| Dr Edward Kokoang | <i>Psychiatrist</i> |
| Dr Felicity Ng | <i>Psychiatrist</i> |
| Dr Gary Wittert | <i>Endocrinologist</i> |
| Con Psaromatis | <i>Podiatrist</i> |
| Rosalie Blackwell | <i>Physiotherapist</i> |
| Su Upton | <i>Psychologist</i> |
| Dr Anna Chur-Hansen | <i>Psychologist</i> |
| Clinpath | <i>Pathology</i> |
| Connect Hearing | <i>Audiology</i> |

CONSULTATION FEES

Standard Consultation

\$75.00 (Medicare rebate \$37.05)

Pensioners Fee \$55.00

Long Consultation

\$115.00 (Medicare rebate \$71.70)

Pensioners Fee \$95.00

Prolonged Consultation

\$160.00 (Medicare rebate \$105.55)

Pensioners Fee \$132.00

Fees are payable at the time of consultation.
Bulk billing is available for Veteran's Affairs
gold card holders.



PRACTICE NEWSLETTER Summer 2017-2018

PRACTICE ANNOUNCEMENTS

- Our Practice will be closed on the following Public Holidays:
 - Christmas Day 25th December
 - Boxing Day 26th December
 - New Year's Day 1st January
 - Australia Day 26th January
- Our Practice fees have been reviewed recently. The new consultation fees are:
 - Standard Consultation \$75.00
 - Pensioner Rate (Standard) \$55.00
- An important part of giving our patients accurate health care is by ensuring we have your family and social history up to date as well as your current contact information. Please advise our receptionist if you have moved or changed phone numbers and speak to your doctor to ensure your medical file is up to date.



The Doctors and Staff of Health on Kensington would like to wish all our patients and their families a very Merry Christmas and a safe festive season.

In this issue

- **New Cervical Cancer Screening Guidelines**
- **Common Issues in General Practice: Migraines**
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- **Christmas colouring for kids**

About Our Practice: Important Information for Our Patients



Appointments

- Appointments can be made via phone or in person with one of our reception team.
- Consultations are generally in 15 or 20 minute intervals and are by appointment.
- We make every effort to ensure clients are seen on their preferred day and with your doctor of choice.
- Provisions are made in our appointment system for emergency consultations.
- At the time of booking, our reception team will make an enquiry as to the complexity of the problem and will allocate the appropriate time with your doctor.
- Doctors are legally accountable for all medical opinions and advice given to a patient and for this reason it is practice policy NOT to provide consultations via telephone, with the exception of medical emergencies. Even seemingly simple problems may have complicating factors which cannot be assessed accurately over the phone.

Telephoning the Practice

- Our doctors may be contacted during normal practice opening hours.
- If the doctor is in a consultation, a message will be taken and our receptionist will advise you when it is likely that the doctor will return your call. Emergency calls will always be put through to a doctor.

Results, Repeat Prescriptions & Referrals

- Your doctor will advise when results are expected to arrive at the practice. Please make an appointment to correspond with this time.
- We believe it is good medical practice to make an appointment for the issue of repeat prescriptions or referrals to specialists and allied health professionals.
- All conditions requiring regular, ongoing medication need to be reviewed and monitored to confirm the need for ongoing treatment. The amount of medication and number of prescription repeats provided is at the discretion of your doctor and in line with guidelines for responsible prescribing.

Recalls and Reminders System

- Our practice is committed to preventative health and runs a recall and reminder system for preventative health services.
- From time to time, you may receive a reminder notice for preventative health services appropriate to your care. If you do not wish to be part of this service, please advise your doctor or one of our receptionists.

Home Visits

- Our practice provides 24 hour care, seven days a week.
- Home visits are provided when there is a difficulty attending the practice. During practice hours, a doctor will travel within a 5km radius of the practice to attend an ill patient.
- If a patient lives outside this boundary, or if the doctor is unable to attend, a locum may be requested to attend on our behalf.
- Nursing home or other institutional visits are provided as a routine or when requested by the client or carer.

After Hours Arrangements

- When our practice is closed, our phone line is diverted to a doctor's personal mobile phone. The doctor will personally deal with each call and either consult with the client, or make alternative arrangements.
- The Locum Service is available by calling 8363 3333.
- Wakefield Hospital Emergency Centre Ph: 8405 3440
 - Operates 24 hours a day, seven days a week
 - Substantial fees apply and must be paid in full on the day.
- St Andrews Hospital Acute Assessment Unit
Phone: 8408 2222
 - 350 South Terrace, Adelaide
 - Open 8am to 10pm, seven days a week
 - Staffed by experienced doctors
 - Substantial fees apply, partially covered by Medicare rebate.
- Admission to public or private hospitals can be arranged through our practice at all times or through St Andrews AAU or Wakefield Emergency Department.

Your Personal Health Information & Privacy: Our Policy

- The provision of quality health care requires a doctor-patient relationship of trust and confidentiality. Consistent with our commitment to quality care, this practice has developed a policy to protect patient privacy in compliance with privacy legislation and the '10 National Privacy Principles' (*Available at www.privacy.gov.au/health/index.html*).
- Our policy informs:
 - Why we need to collect your information.
 - How your information is used by us and to whom we may need to disclose it.
 - That you may request access to the information we hold about you.
 - That you may discuss any concerns you have about how we handle your personal information.
- Your details, medical information and consultations within this practice are kept strictly confidential. Your personal information is accessible only by authorised staff and will not be released without your written consent.
- Only de-identified data may be used for research purposes. During the Accreditation process, medical records are randomly selected by a GP for quality assurance purposes. If you do not wish your records to be accessed, please inform your doctor.

Complaints & Feedback

- Your feedback, both positive and negative is an invaluable communication tool and is used to improve our practice and our provision of service.
- If you have a problem with any member of staff, including a doctor, please feel free to use either the suggestion box in our waiting room, or speak to our Practice Manager Sue Leighton at any time.
- If you wish to make a complaint in writing, please address it to our Practice Manager and it will be dealt with promptly. It is practice policy to reply to all correspondence.
- If you wish to take matters further you may contact:
 - Health & Community Services Complaints Commissioner (Phone: 8226 8666)

DISCLAIMER: While every effort is taken to ensure the information contained in this newsletter is accurate and up to date, it is not exhaustive and not intended to replace the advice of your doctor. The information provided is for educational purposes only. Readers should always consult their health care professional for advice for their individual health care needs or concerns. My Doctor: Practice e-newsletters will not be liable for any loss or damage from misuse of the information provided. My Doctor: Practice e-Newsletters is not responsible for erroneous or misleading information provided by subscribing medical practices and all practice information is approved at time of publication.



New Cervical Cancer Screening Program December 2017

From the 1st of December this year, significant and important changes have been made to the cervical cancer screening program.

Until now, sexually active women between the ages of **18-69** years were screened on a two yearly basis with a Pap smear test. The new program replaces the smear with a five yearly Cervical Screening Test (CST) for women between the ages of **25-74** years. Extensive studies have shown that cervical cancer is incredibly rare in women under 25 and screening women under this age (i.e. 18-25) has not reduced the number of cases of cervical cancer or deaths from cervical cancer.

The CST detects the Human Papilloma Virus (HPV), the cause of 99% of cervical cancers. The traditional Pap test examined cervical cells looking for abnormalities that could lead to cancer. The CST looks for HPV, which is the cause of those cellular abnormalities.

The test procedure is the same. Your Doctor will still use a vaginal speculum to take a cell sample from your cervix, however, the sample is suspended in liquid rather than smeared onto a glass slide like a traditional pap test.

Your first CST will be performed when you are due for your next (or first) pap smear, which is generally two years from your last one. From that point on, the testing becomes five yearly (dependent on results of course).

The CST does not replace the need for HPV vaccination as the vaccine protects against some high risk HPV strains, but not all of them.

When HPV is detected from a CST sample, further testing can easily be performed on the same sample to determine the type of HPV present. The presence of certain high risk strains will determine whether further testing (such as a colposcopy) is recommended.

The ability of the CST to detect HPV and therefore detect the potential for high-grade lesion development makes the CST a far more sensitive test than traditional pap smears and will prevent even more cervical cancer cases.

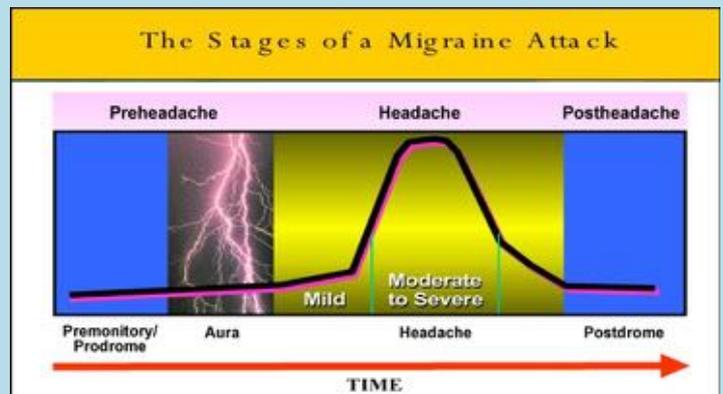
Common Issues in General Practice: Migraines

The common migraine is a very painful type of headache. For unknown reasons, they tend to affect women more than men suggesting that hormones may play some role.

Migraines can be very distressing and disabling. An attack can last anywhere from four hours to several days. Symptoms experienced can be extensive but commonly include:

- Pain and throbbing of the head
- Pain exacerbated by movement
- Feeling vaguely unwell (especially beforehand)
- Nausea, vomiting and/or diarrhoea
- Sensitivity to light (photophobia)
- Sensitivity to noise (phonophobia)
- Sensitivity to smell (osmophobia)
- Visual disturbances such as flashing lights, blind spots, fuzziness, difficulty focusing, often referred to as an 'aura'.
- Difficulty concentrating
- Confusion
- Numbness in the extremities

Many people who experience migraines state that they can 'feel' a migraine coming on before the other symptoms begin. They report symptoms such as yawning, food cravings, a stiff neck, fatigue, irritability and depression as early warning signs of a migraine to come.



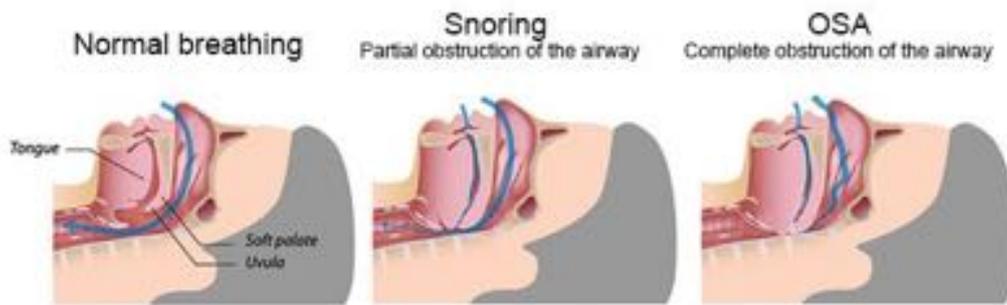
Aura symptoms affect up to 20% of migraine sufferers. They can be more than just visual disturbances. They can also present as parathesia or numbness of the skin or of a whole limb. It tends to affect one side of the body only and can last for a few minutes or a few hours.

There is no definitive cause for why some experience migraines and others don't. There is thought to be genetic factors involved. There are a number of known 'triggers' for migraine attacks including:

- Certain foods such as cheese, chocolate and food containing MSG.
- Stress, excitement or fatigue
- Changes in weather
- Hormone levels and the oral contraceptive pill
- Alcohol, especially beer and red wine.

Treatment options for migraines include avoiding known triggers, pain relieving medication, preventative medication and non-medicated therapies such as acupuncture, hypnotherapy, exclusion diets and meditation.

Obstructive Sleep Apnoea



Obstructive Sleep Apnoea (OSA) is a condition where the airways become blocked when a person is asleep. It is a serious medical condition that affects a person's health and quality of life.

The severity of the condition can vary between individuals, meaning there may be partial or complete restriction of the airway during sleep. The restriction may last from several seconds to up to a full minute. The lack of oxygen causes the person to 'wake' briefly, generally followed by a snort or loud snore and a gasp which restores airflow. They tend to fall back asleep immediately with no idea that this has occurred. This can happen hundreds of times per night.

Normal sleep – less than 5 apnoea episodes / hour

Mild sleep apnoea – between 5-15 episodes / hour

Moderate sleep apnoea – 15-30 episodes / hour

Severe sleep apnoea – more than 30 episodes / hour

Sleep apnoea tends to affect men more than women and has been strongly linked to obesity. It is estimated to affect one in four men over 30 years of age. Post menopausal women are also commonly affected, especially if they are also overweight.

Other contributing factors include:

- Alcohol consumption – especially in the evening
- Large tonsils
- Nasal congestion and obstruction (e.g. when a person has a cold or flu)
- Medications such as sleeping tablets
- Facial bone shape and the shape of the jaw
- Thyroid conditions and/or large thyroid gland.



Many people with sleep apnoea do not know it, especially if they live or sleep alone. Often it is a partner who points out that the snoring and gasping for breath is keeping them awake.

Symptoms to be aware of include:

- Snoring – especially when lying on the back
- Daytime sleepiness
- Waking up feeling unrefreshed
- Irritability and moodiness
- Difficulty concentrating
- Forgetfulness
- Impotence and reduced libido
- Frequent need to urinate during the night
- Morning headaches

Untreated or unmanaged sleep apnoea can have serious side effects and is linked to a number of problems that decrease quality of life and general health. These include:

- Increased blood pressure (hypertension)
- Increased heart rate
- Metabolic problems e.g. difficulty losing weight
- Impaired liver function
- Severe fatigue (especially problematic for those who drive or operate heavy machinery during the day)
- Nervous system problems
- Depression
- Type 2 diabetes
- Cardiovascular disease

Diagnosing sleep apnoea is generally achieved with an overnight sleep study, referred to by your doctor. This tests measures sleep, breathing and oxygen levels during the night.

There are a number of conservative treatment options that can aid in improving sleep quality and reducing apnoea episodes, the most useful of which are weight reduction, avoiding alcohol in the evenings and adjusting to a side sleeping position.

Active treatment is required for moderate to severe sleep apnoea. This generally involves an air pump machine (commonly called a CPAP) worn during the night to hold the throat open and maintain a clear airway. Oral appliances (such as a mouthguard) fitted by a dentist can also be useful, especially in milder forms of sleep apnoea. In very severe cases, surgical operations to the soft palate and base of the tongue may be useful.



Health Assessments for those aged 75+

If you have recently turned 75 or will turn 75 in the coming year, you will likely be invited for an annual Health Assessment with your Doctor and Practice Nurse.

An initiative of the Department of Health and fully funded by Medicare, annual health assessments are designed to identify health issues and conditions that are potentially preventable and to reduce your risk of hospitalisation.

A broad range of questions and examinations are performed to provide your Doctor with a complete overview of your physical, mental and social health and overall quality of life.

Based on this assessment, your Doctor and Practice Nurse can assess the need for additional services to help keep you well and maintain independent living. This could include home help, taxi concessions, disabled parking applications, mobility aids, specialist referrals and medication management. They can also assist in linking you in with community groups for social gatherings.

We encourage you to participate in these annual assessments and to speak to your Doctor or Practice Nurse for more information.

Preparing for Blood Collection



Having blood collected isn't a pleasant experience, so proper preparation is essential to ensure a

viable sample is taken the first time.

This is especially important if your Doctor is requesting tests that require fasting, such as cholesterol and blood glucose. In order to prepare for a blood test, the recommendations are:

- Come well hydrated; drink plenty of water the day before and the day of your test.
- Avoid smoking.
- Fasting tests require you to have had no food for 10-12 hours. An overnight fast is preferable.
- Fasting for longer than 12 hours can distort results.
- You can have water during the fasting period but no coffee, juice, tea, soda or alcohol.
- You can continue to take your medication as normal unless you have been specifically advised not to.
- Let the nurse know if you have a preferred arm, or if you have veins that have been difficult to access in the past. Smaller needles can be used in the veins of the hand for some people, though this can be a little more uncomfortable and not suitable when several blood tubes are required.
- Let the nurse know if you are feeling anxious or nervous about the needle. They may suggest you lie down to reduce the risk of fainting. They can also talk you through the procedure and suggest other ways to reduce your anxiety.

Christmas Colouring for Kids



