

*Health on Kensington*

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*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

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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

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

### ADMINISTRATIVE & NURSING STAFF

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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

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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

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#### 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 *Winter 2018*

### PRACTICE ANNOUNCEMENTS

- Our Practice will be closed on the Queen's Birthday Public Holiday – Monday 11<sup>th</sup> June.
- Due to unprecedented demand, there is a national shortage of influenza vaccine available. Doctors are being asked to use any remaining stock on those considered 'high-risk only'. For this reason, we request you call to check if stock is available before making an appointment to be vaccinated. It may be several weeks before additional stock is made available.
- 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.



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# 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.

**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.

### 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](http://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)

## An Introduction to the NDIS

The National Disability Insurance Scheme (NDIS) aims to provide reasonable and necessary support for all Australians aged 65 years and under who have permanent and significant disabilities. It has been rolling out progressively across Australia since 2016. Once the scheme has been fully deployed, it is estimated that over 460,000 Australians will be supported by the NDIS.

The aim of the NDIS is to provide a lifetime support approach, rather than a welfare scheme, to people living with a disability. This may include support with finding employment, improved independence, improved physical and mental wellbeing and community engagement.

There are two main entry points to the NDIS:

1. Children aged 0-6 years may access it through the Early Childhood Early Intervention pathway
2. People aged 6-65 can access through the general pathway.

To become a participant, you must meet the eligibility criteria. This means you must:

- Have a permanent impairment that significantly affects your ability to take part in everyday activities, or have a developmental delay.
- Be aged 65 years or under
- Live in Australia in an NDIS area (some areas are still waiting for the NDIS to be available)
- Be an Australian citizen or permanent resident, or on a protected special category visa.

You will likely need to provide evidence of your disability, how long it is predicted to last and the impact it has on your life. Your GP or other health professionals may be asked to supply evidence to support your application. They may be asked to comment on how your disability impacts your mobility and/or motor skills, psychological wellbeing, communication skills, social interaction, ability to learn, ability to self-care and manage independently.

It can take a while for your access to the NDIS to be reviewed and approved. If you are approved, there are further planning stages that will determine what kind and how much funding you will receive to meet your immediate needs and to start to identify your long term goals. It is important to remember that the NDIS funds 'reasonable and necessary support'. This means any funding provided must be linked to a specific goal you have set to improve your quality of life, employment prospects, mobility, social interactions etc. Your plans will be reviewed every 12 months or more frequently if your circumstances change.

For more information about the NDIS, or the Early Childhood Early Intervention pathway, the best place to start is the NDIS website [www.ndis.gov.au](http://www.ndis.gov.au). There are a multitude of factsheets available, FAQ's, multi-lingual resources and links to begin the application process.

## Signs and Symptoms of Influenza



Influenza (or the 'flu') is a viral infection that is transmitted person to person via airborne 'droplets', tiny particles of fluid that are expelled into the air, or onto a surface when an infected person coughs or sneezes. It affects the respiratory tract, the nose, throat and lungs. It is highly contagious and is attributed to around 3000 deaths in Australia per year.

Some flu seasons, like that we experienced in 2017 are worse than other years. This can be attributed to the strains of flu virus that are most prevalent in the community and changes or 'mutations' in these virus strains. Viruses are constantly changing, in an attempt to subvert the immune system. Strains of virus that are more successful at this, become dominant and spread. Annual flu vaccines contain three or four of the most prevalent strains for that particular flu season and provide excellent protection against infection but they cannot provide immunity against all strains, or strains that have mutated. When a person comes in contact with the virus, there may be 1-4 days before they start to exhibit symptoms. This is called the 'incubation period'. A person may still infect others even if they have not yet started to feel unwell.

Typical symptoms include sudden onset fever, dry cough, sore throat, muscular aches and pains, weakness and lethargy, nasal congestion, chills, headaches, vomiting and diarrhoea. You will notice many of these symptoms are very similar to those of the common cold, so it can be difficult to tell the difference. Generally, flu symptoms come on very suddenly and can persist for several weeks. Cold symptoms develop more slowly and generally resolve within 4-10 days.

Influenza generally resolves on its own without medical treatment. It is a virus so antibiotics are not effective. Antiviral medications can shorten the length of symptoms, but only if started within the first 48 hours of symptoms presenting. Symptoms can be relieved with mild analgesics, throat lozenges, decongestants, plenty of fluids and plenty of rest.

For some people, a flu infection can be more dangerous, because they are more susceptible to complications such as pneumonia, bronchitis, asthma flares, cardiac problems or bacterial infections. These 'high risk' people include those:

- Aged under 5 years or over 65 years of age
- Pregnant women
- People with weakened immune systems
- People with chronic diseases such as diabetes, asthma, heart disease, lung disease or kidney disease
- People who are very obese
- Residents of nursing homes or other aged care facilities.

Anyone considered 'high-risk' should seek medical attention if they come down with symptoms of flu.

# What is Amenorrhea?

Most women have a good knowledge of what is happening in their body when they experience a menstrual bleed, more commonly referred to as a 'period'. In basic terms, a period is the discharge of blood and uterine tissues from the vagina. This happens every month from the age of menarche (your first period) until menopause.

Amenorrhea is defined as the *absence* of a menstrual bleed in a woman of reproductive age. The most common and obvious cause of amenorrhea is pregnancy, as menstruation ceases when an egg is fertilised and implants in the uterine wall. It resumes in the weeks or months following birth. Things like breast feeding can affect how quickly your period returns after pregnancy. However, for some women, amenorrhea is NOT related to pregnancy and it can be very concerning. The menstrual cycle is affected by a number of different factors, so amenorrhea is not uncommon however, it can also signify a possible underlying health issue that should be investigated by your Doctor.

There are two main types of amenorrhea:

- *Primary amenorrhea* – defined as the absence of a FIRST period in a girl 15 years or older, meaning she has never had a period. This affects 0.1-0.3% of the female population (very uncommon).
- *Secondary amenorrhea* – when a woman who has had regular periods, stops having normal monthly periods for three months or more. This type is much more common, affecting 3-4% of women at some stage of their reproductive lives.

## Primary amenorrhea

If a girl has not started menstruating by the age of 15, it is defined as primary amenorrhea and is likely due to a genetic or anatomical anomaly. This means that there has been some failure in the development of the female reproductive organs, or the endocrine (hormone) organs that is preventing them from functioning normally.

Some of the most common causes of primary amenorrhea include:

- Diseases of the pituitary gland and hypothalamus – endocrine organs that play a vital role in the regulation of ovarian hormones.
- Gonadal dysgenesis – A genetic condition where the ovaries are prematurely depleted of egg cells.
- Turner Syndrome - A genetic condition where part or all of one of the two female X chromosomes are missing, causing scar tissue to essentially 'replace' the ovaries.
- Polycystic Ovarian Syndrome (PCOS)
- Structural abnormalities of the vagina

Sometimes however, the failure to begin menstruating by the age of 15 years is due to any of the same reasons as for secondary amenorrhea, so Doctors will also look at these factors when making a diagnosis.

## Secondary amenorrhea

Secondary amenorrhea can be linked to a wide variety of causes but sometimes, the exact cause cannot be identified. Some common causes and risk factors include:

- Obesity
- Being very underweight
- Polycystic ovarian syndrome (PCOS)
- Certain medications such as antidepressants, antipsychotics, allergy medications and some blood pressure medications
- Ceasing birth control
- Extreme stress
- Extreme weight loss
- Extreme exercise
- Chemotherapy and radiation treatments
- Problems with the thyroid gland
- Benign pituitary tumours
- Uterine scarring or fibroids
- Premature menopause

As well as the absence of a period, some women may experience additional symptoms such as hair loss, a milky nipple discharge, weight fluctuations, facial hair growth, acne, pelvic pain headaches and visual changes.



## Diagnosis & Treatment

Amenorrhea should be discussed with your Doctor, who can organise tests to determine the cause for your symptoms. This may include blood tests, a pelvic ultrasound, an MRI and a pregnancy test (to rule out pregnancy). If genetic tests are indicated, they can make referrals for this. Any treatments proposed will depend on the results of these tests.

Amenorrhea should be thought of as a symptom, not a disease, so it can be treated only to the extent that the underlying cause can be treated. This could be as simple as lifestyle changes or medication. Sometimes surgery is required, or a combination of these treatments. For those where a genetic or developmental abnormality has caused the amenorrhea, there may be no effective treatment options.

If the cause of amenorrhea is not treated there are long term complications including infertility and osteoporosis so it is important to discuss your symptoms with your Doctor.

# Practising Mindfulness

There are many tools and practices that can be used to help people cope with stress, anxiety, depression and grief. Mindfulness is one of these techniques and it has been used extensively in psychological practice for many decades. Mindfulness is about learning how to be 'present' in the moment, being aware of your emotions, physical sensations and thoughts in real time, without judgement. It is about recognising and accepting what you are feeling without downplaying, excusing or rationalising those feelings. It is a skill that can take some time to develop but can be very helpful in alleviating stress dealing with grief, overcoming compulsive behaviours and improving self-awareness. Mindfulness techniques teach us how to de-clutter our mind and how to thoughtfully 'respond' rather than 'react' to stressful situations.

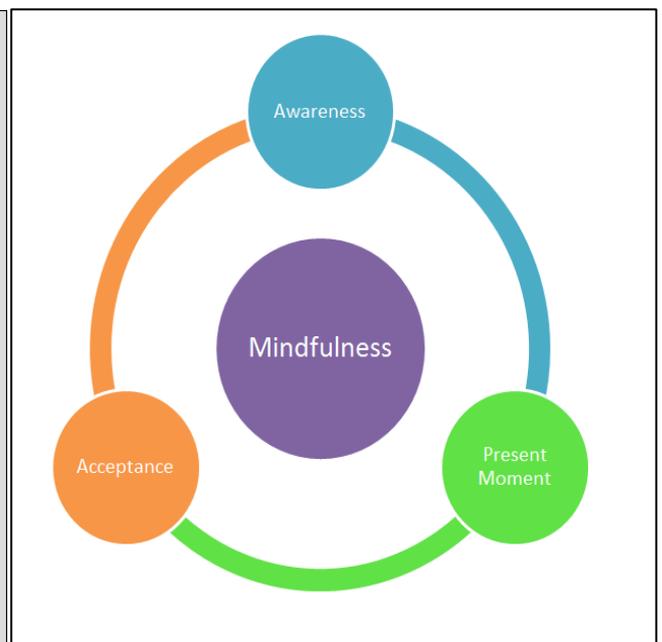
Neuroscientists researching mindfulness techniques have found evidence that this type of meditation helps to:

- Improve concentration, memory and attention
- Reduce fear, stress and anxiety
- Preserve brain tissue and grow parts of the brain associated with compassion, empathy, emotional response and perspective.

Practicing mindfulness for just a few minutes a day can be very beneficial and you do not need to engage a psychologist, or counsellor to learn how to do it. There are many simple exercises you can attempt at home, on your lunch break, in between classes or even in the middle of a particularly stressful activity. One such exercise is provided below, courtesy of the Black Dog Institute [www.blackdoginstitute.org.au](http://www.blackdoginstitute.org.au).

## De-stressing Exercise

- Bring yourself into the present by deliberately adopting an erect and dignified posture.
- Then ask yourself: "What is going on with me at the moment?"
- You simply allow yourself to observe whatever happens. Label any thoughts that you have and then leave them alone....just be prepared to let them float away. Attend to your breathing or simply take in your surroundings instead.
- Besides thoughts, there may be sounds you hear, bodily sensations that you are aware of. If you find yourself constantly elaborating on thoughts, rather than labelling them and returning to the neutral, remember to observe your breathing.
- When emotions or memories of painful events occur, don't allow yourself to become caught up by them.
- Give them short labels such as "that's a sad feeling", "that's an angry feeling" and then just allow them to drift or float away. These memories and feelings will gradually decrease in intensity and frequency.
- More importantly, you will begin to identify yourself as an objective observer or witness rather than a person who is disturbed by these thoughts and feelings. This requires practise but can then be used whenever you are stressed.



## The Truth about Turmeric

Turmeric is a widely available spice that comes from the Turmeric plant, part of the ginger family, used widely in Indian and Asian cooking. It has a warm, bitter taste and a deep mustardy-yellow colour. Turmeric powder contains a chemical ingredient called curcumin that gives it its colour. Curcumin is often used as a colourant in food and cosmetics.

Turmeric (or curcumin) supplements have been marketed for use in the treatment and management of such wide reaching health conditions as heartburn, joint and arthritic pain, osteoarthritis, digestive problems, gastrointestinal diseases (such as Crohn's disease, ulcerative colitis and gallbladder problems), bloating, haemorrhage, liver and kidney diseases, high cholesterol, skin conditions (itching and inflammation), bronchitis, fibromyalgia, menstrual problems, depression, Alzheimer's disease and diabetes. As you can see, this list is extensive and while anecdotal evidence of the health benefits of turmeric is abundant, there have been very few extensive clinical studies conducted to confirm some of the claims that are made. There are currently many clinical studies being conducted to investigate the medicinal use of curcumin supplements, with many displaying positive results.



What we do know is that curcumin (the chemical compound in turmeric) has been shown to aid in the reduction of swelling and inflammation. Therefore, many diseases and health conditions that result from inflammation, or have an inflammatory response, **may** be improved by the use of turmeric as a dietary supplement. Turmeric is considered a very safe product, with very few side effects. Some people can experience diarrhoea or nausea but this is quite uncommon. There are contraindications for people on blood-thinning medication or anti-platelet therapy, or other medications that can slow blood clotting such as aspirin, clopidogrel, ibuprofen, diclofenac (Voltaren) etc.

If you have any doubts, do not commence a Turmeric supplement without advice from your Doctor.