

ST AGNES SURGERY

1251 North East Rd

Ridgehaven 5097

P: 8264 3333



TEA TREE SURGERY

975 North East Rd

Modbury 5092

P: 8264 4555



PRACTICE PARTNERS

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MBBS DRCOG (Eng)

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MBBS FRACGP

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Dr Paul Veitch

MBBS FRACGP

Dr Christopher G Platis

MBBS

Dr Janet Davie

MBBS FRACP

SURGERY HOURS AND SERVICES

ST AGNES SURGERY

Monday to Friday 8.00am–5.30pm

TEA TREE SURGERY

Monday to Friday 8.30am–6.00pm

Saturday 8.00am–1.00pm

WEEKEND AFTER HOURS & PUBLIC HOLIDAY HOURS

Tea Tree Surgery will close at 1.00pm on weekends. After hours service sessions are at **Tea Tree Surgery**.

Saturday 8.00am–1.00pm

Sunday & Public Hols 9.00am–1.00pm

An appointment time is required.

For urgent medical problems outside these hours, a duty doctor can be contacted on 8264 3333 (St Agnes Surgery) or 8264 4555 (Tea Tree Surgery). Follow the instructions on the recorded message.

You can now find us on the web at

www.stagnessurgery.com.au

YOUR DOCTOR

FREE!!
TAKE ME HOME

JUNE 2018

Testing tears to diagnose Parkinson's disease

Early and non-invasive testing for Parkinson's Disease could be on its way.

A study presented at the American Academy of Neurology in April 2018 determined that testing an individual's tears for biomarkers could help to diagnose Parkinson's disease far sooner than it currently is, thus providing an opportunity to slow down the disease.

According to the lead author of the study, Mark Lew, MD, from Keck School of Medicine, University of Southern California, Los Angeles, the current diagnosis method for Parkinson's disease, while effective, is only suitable for the condition in its later stages. By this time, motor symptoms may have already started to develop.

Mark Lew said the assessment of alpha-synuclein (or a-synuclein) protein in tears could make the testing process more reliable, less expensive and less invasive. It can be carried out at any stage of the disease, and may, in future, provide medical professionals with the opportunity to slow it down with disease-modifying treatments.

This test could also make ruling out other causes of symptoms far easier. Currently, signs of Parkinson's can look like many other conditions. Sufferers may experience disturbances in their sleep, depression, a reduced sense of smell, constipation, and may or may not have problems with their motor skills early on. Some people may be diagnosed with other conditions with similar symptoms when a simple tear test could eventually determine whether they have Parkinson's or not.

Initially, Mark and his team of colleagues carried out studies using saliva, but the

target proteins they were looking to measure weren't suitable due to bacteria and food particles. However, after working with ophthalmologists who have found biomarkers for other diseases using tears, they decided to see whether that method would work for them as well.

Tears from 55 patients with Parkinson's and age-matched controls were used during the study, and a Schirmer test was used to collect the tears. This process involves adding a strip of paper onto the eye to absorb moisture which Mark says, is a "relatively non-invasive and simple process".

The fluid collected was then analysed, with researchers looking for concentrations of alpha-synuclein, among other proteins. The study showed that the level of a-synuclein decreased in the tears of patients with Parkinson's, but there was an accumulation of oligomeric (toxic) a-synuclein. In Parkinson's disease patients, oligomeric a-synuclein clumps together rather than spread out throughout the body as they would in a healthy subject. This provided the researchers with evidence that tears are a good indicator of the disease's presence.

While the study is in its early stages, researchers are looking to include more patients – both men and women with various stages of Parkinson's and will add a subgroup analysis as well.

Approximately 80,000 people are diagnosed with Parkinson's disease in Australia each year, and one percent of those over the age of 60 in New Zealand have the disease as well. A simple tear test could, in future, make the diagnosis process far more efficient for both doctors and patients.

To try the latest RECIPE take me home...

Dying of embarrassment: Bowel Cancer Awareness month

Thousands of people in Australia and New Zealand are dying of embarrassment.

Too scared to speak out or tell their doctor what's going on, thousands of people are enabling bowel cancer to have a higher death rate than it needs to have. Therefore, this June is a prime opportunity for people to stand up, take notice, and get the word out about bowel cancer. It's not a secret, it's not embarrassing, and it shouldn't be a death sentence.

Australasia has one of the highest bowel cancer rates in the world, and in both Australia and New Zealand, it's the second highest cause of cancer. While the survival rate can be as high as 90 percent, it's the embarrassment that is killing thousands of people every year – 1,200 in New Zealand, and over 4,000 in Australia. That figure is expected to rise this year.

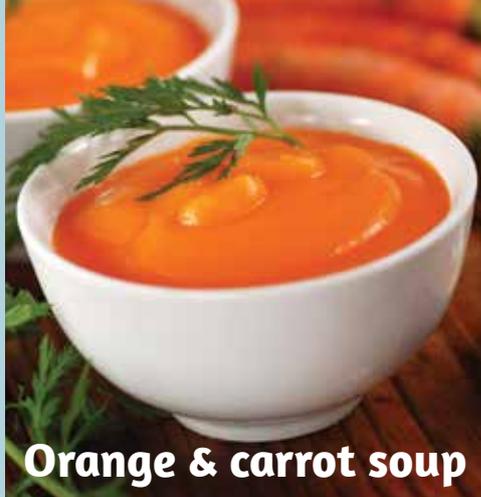
While bowel cancer can affect many different people, some are more at risk than others. You are more at risk if you have a family history of bowel cancer spanning over two or three generations, a family member who has received a diagnosis at a young age, if there is a genetic bowel cancer syndrome in your family, or you've had an inflammatory bowel disease for more than a decade.

If you believe you may be at risk, don't be afraid to see a health professional for advice. Seeing your GP is especially crucial if you've noticed a change in your bowel movements spanning over several weeks – such as constipation, diarrhoea or a difference in how empty your bowel feels, or you notice blood in your stool. While these are signs of many conditions, not specifically bowel cancer, there's no time to waste.

Those who seek treatment for bowel cancer as soon as they notice a change in their body can have up to a 90 percent chance of survival. Those who wait may not have the same desirable outcome.

Bowel Cancer Awareness Month, held every year throughout Australasia in June, is about more than just urging those who may be at risk to seek help. It's about creating awareness of this treatable cancer, helping people to understand that they shouldn't be embarrassed, and to promote early diagnosis. The longer you wait, the more advanced cancer can become, and the harder it is to cure.

If you or a loved one have noticed changes in your bowel movements, seek advice from a medical professional. Even if you believe it's nothing, there's every reason to rule out a death sentence.



Orange & carrot soup

INGREDIENTS

- 2 brown onions, chopped
- 1kg carrots, peeled and chopped
- 4 cups chicken or vegetable stock
- 1 orange
- Salt and pepper to taste

METHOD

1. Peel 3 strips of orange rind and set aside. Juice orange and set aside.
2. Put small amount of olive oil in a large saucepan and heat over medium heat.
3. Cook onion in pan until soft.
4. Add chopped carrot to pan and cook until soft.
5. Add stock to pan and bring to a boil.
6. Add the 3 strips of orange rind to pan and allow to simmer on low heat for 20 minutes.
7. Remove orange rind from pan.
8. Blend the contents of the pan in a blender or by using a stick blender, until smooth.
9. Add orange juice to blended soup and mix well.
10. Place back in pan and heat to taste.
11. Add salt and pepper to taste.

A cholesterol catastrophe

Every year, 2.6 million people die from high cholesterol levels. How much do you know about your cholesterol?

Cholesterol is fat that travels through your bloodstream via carriers made of fat and proteins. One form of cholesterol is good (high-density lipoproteins or HDL) while the other is bad (low-density lipoproteins or LDL).

The higher the level of bad cholesterol in your body, the higher the risk of a stroke or heart disease. What's more, a third of all ischaemic heart disease cases can be linked to high cholesterol – a condition that shows itself in the form of angina, heart attacks, heart failure, and death.

It's clear to see we're in the middle of a cholesterol catastrophe. The problem is, high cholesterol has no symptoms and can only be diagnosed through a blood test. Unless you're getting cholesterol level checks every

four to six years as recommended by health professionals, you won't know whether your levels are high or average.

However, there are so many things you can be doing to ensure you're keeping your cholesterol at a healthy level. They are easy to do and may even reduce the risk of heart disease and strokes in the process. Here are three stand-out techniques:

Know your fats

Fat can be confusing. There is fat in avocado and deep-fried food, yet

avocados are healthy and fried food isn't. That's because they're different kinds of fat. Saturated fat and trans-fat can raise your LDL (low-density lipoprotein) levels, resulting in high cholesterol. As part of a healthy diet, your daily calorie intake should only be made up of 30 percent fat.

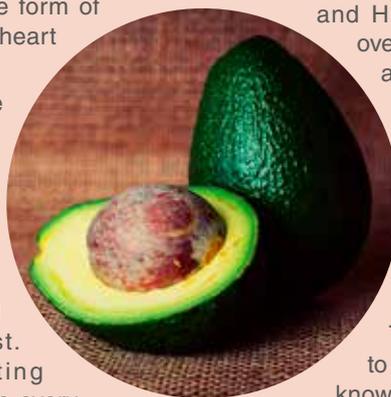
Exercise and diet

You can reduce your cholesterol levels and improve your overall level of health by exercising for an hour at least five times per week. According to Your Guide to Lowering Your Cholesterol with TLC by the U.S. Department of Health and Human Services, being overweight and not following a healthy diet and exercise routine increases your chances of high cholesterol, heart disease, high blood pressure and some cancers.

Quit smoking

There are many reasons to quit smoking, but did you know high cholesterol can be caused by smoking as well? Your high-density lipoprotein cholesterol levels may be improved by stamping out the habit. The benefits don't end there, either. In just one year of being smoke-free, you can cut your risk of heart disease in half.

If you believe your current lifestyle may indicate high cholesterol levels, consult a medical professional for advice. Arrange to have your cholesterol levels checked and be sure to follow through on any recommendations made, based on your results.

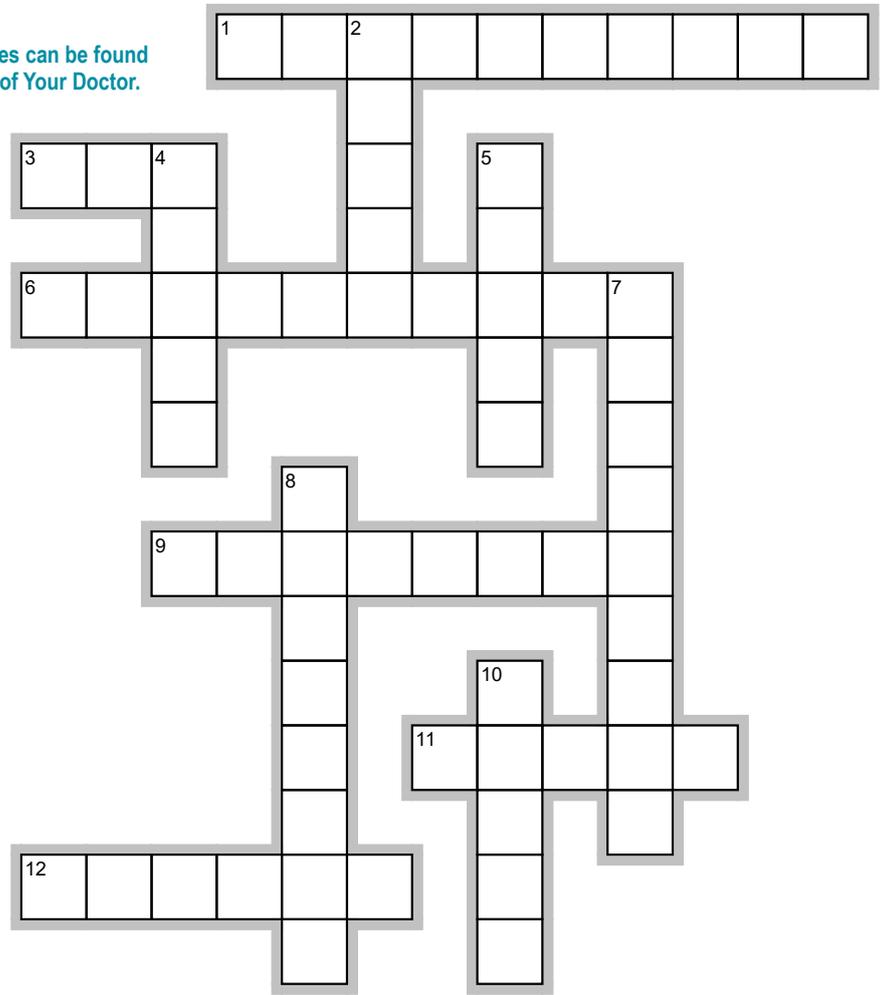


ACROSS

1. The passageway from your mouth to your stomach. (10)
3. As part of a healthy diet, your calorie intake should be made up of only 30% of this. (3)
6. Approximately 80,000 people are diagnosed with this disease in Australia each year. (10)
9. Test used to collect tears. (8)
11. The second highest cause of cancer in Australia and New Zealand. (5)
12. Heartburn is a symptom of gastroesophageal _____. (6)

DOWN

2. Your body needs at least this many hours of sleep. (5)
4. You should have your dinner a minimum of _____ hours before bed if have difficulty falling asleep. (5)
5. If you see this in your stool you should see your GP. (5)
7. This type of fat can raise your LDL levels. (9)
8. A metal present in e-cigarette liquids. (8)
10. E-cigarettes and vaping liquids are exposing users to _____ metals. (5)



Fresh risk for E-cigarette users

When revolutionary new products hit the market, it can take some time for research to confirm or deny their merits. In the case of e-cigarettes, a new study has brought fresh concerns for risk.

In recent years, daily smokers have been giving up cigarettes in favour of electronic smokes or vapes. E-cigarettes are not only more affordable for the average buyer, but were thought to be considerably safer than their tobacco and chemical-laden counterparts. Instead of releasing smoke, an electronic cigarette releases vapour which comes from flavoured liquid heated up by an internal and replaceable coil.

Recent studies have shown e-cigarettes can still create a higher risk of cancer than if you didn't smoke at all and a higher chance of cardiovascular problems as well. However, the bad news doesn't end there for e-cigarette users.

New studies from Environmental Health Perspectives also concluded that e-cigarettes and particular vaping liquids are exposing users to toxic metals due to the heating coil within them. Of the research conducted, lead, nickel, manganese, chromium, and cadmium were all identified as present in e-cigarette liquids. All of these metals, excluding cadmium, have been linked to brain damage, respiratory issues, and cancer.

The study, which covered 56 daily e-cigarette users, found 15 metals within refilling dispensers, vaping liquids, and the vapours produced after inhalation. It concluded that those toxic metals were found in small amounts in the fluids put into the dispensers but were found in high concentrations once they had been put through heating cycles by the internal coils.

There is evidence to suggest that the heating coils which are made from nickel, chromium and similar materials, are the source of the toxic metals. However, it is unclear from where the lead comes, or whether the metal is leaching from the coil, or is vaporising upon being heated. What is known is that new heating coils are likely to leak more metals than old coils.

Using the same participants as the initial study, those who used e-cigarettes were also found to have higher levels of chromium and nickel in their saliva and urine, and this tied in with the metals found within the vapours of the e-cigarette.

There are many different e-cigarettes on the market and several different vaping fluids with or without nicotine from which to choose. As a result, the levels of metal found in each can vary dramatically. However, if you're looking to quit smoking and believe the way to do it is with an e-cigarette, there are other options, which may just be safer.



Choose a support person and visit www.quitnow.gov.au or www.smokefree.org.nz to find out what help is available for you. Signing up for QuitCoach, using patches or nicotine gum, or getting a free Quit Pack could very well be the beginning of your smoke-free journey.

Five ways to improve your sleep health

Most adults need between seven and nine hours of sleep, but when was the last time you got that?

When you don't get enough sleep, your mood, mental clarity, and energy levels are all affected. That's just in the short term. In the long run, you may find you're suffering on an entirely new scale. With a lack of sleep that spans several weeks or months, your physical and mental health can also be affected. Here are five of the many ways you can get that much-needed sleep and kickstart your bedtime routine.

Turn off technology

Mobile phones have changed the way people live their lives, but is your phone controlling yours? If you find yourself browsing through social media when you should be sleeping, it's time to make a change. Ban technology from your bedroom and dedicate your bedroom to rest instead. It's all too easy to while away the hours on a mobile phone, and this can impact the number of hours you're getting for sleep.

Create a sanctuary

Your bedroom should be a peaceful space. If it's not, it might be time to make it so. Use thermal-backed curtains to block out the light, and use ambient bedside lighting instead of the main light. Creating a tranquil space may also mean you need to get the

paintbrush out and swap those red walls for something calmer.

Get into a routine

Your body needs at least seven hours of sleep, but it needs to be consistent. Get into the habit of going to bed at the same time every night, and getting up at the same time. Your body needs a routine, and if your sleep isn't consistent, it can impact your moods and productivity during the day.

Avoid carb-loading

If you've tucked into a big roast dinner or a spicy curry before you head to bed, it might be time to reschedule dinner time. Heavy meals before bedtime can disturb your sleep, and can also make it harder to doze off. Try to have dinner a minimum of three hours before bed, and combat hunger cravings later with a healthy snack such as a banana, or herbal tea.

Don't sleep with pets

You may like to snuggle up next to your furry friend at night, but they may be interrupting your sleep. Try to get both your pet and yourself into the habit of sleeping in separate beds, and you may find you get a better night's sleep.

Getting enough sleep is crucial when it comes to maintaining optimum levels of physical and mental health. Try these tips and mention it to your GP if you still have trouble sleeping.

Heartburn hindrance

Have you ever felt pain or a burning sensation in your throat, behind your sternum, or in your lower chest? Heartburn could be to blame.

Heartburn is the result of stomach acid and digestive juices making their way back into your oesophagus from your stomach. It's uncomfortable, it burns, and it can last for several hours. However, it's not supposed to happen.

Your oesophagus is a passageway from your mouth to your stomach, and it pushes food into your stomach ready to be digested and absorbed. When your food is digested correctly, you don't notice any burning because your stomach has protective cells. However, if these acids find their way back into your oesophagus, there is no protection. Stomach acid and digestive juices then cause inflammation and damage which creates the discomfort you feel.

Heartburn is a symptom of gastroesophageal reflux and other oesophageal diseases, but it's also a side effect of poor lifestyle choices. If

you drink alcohol, caffeine, and acidic juices, or you eat acidic food or chocolate, you are more prone to heartburn due to a stimulation of stomach acid. However, you may also suffer from heartburn if you are pregnant, obese, consume ibuprofen or aspirin, you have a hiatal hernia, or you smoke.

You may notice the pain feels like a burning sensation in your breastbone or behind your sternum or it may even feel like a spasm or sharp pain. You may notice symptoms after eating or lying flat and you can only find comfort from sitting up or taking over-the-counter medication.

If you're tired of heartburn, it's time to take action. You can make lifestyle changes such as eating smaller meals, avoiding alcohol, caffeine, and aspirin, quitting smoking, and sleeping elevated.

If you experience heartburn more than twice a week, or you're relying on over-the-counter medication, be sure to mention it to your doctor. If neglected, heartburn has the potential to turn into a serious condition.

PRACTICE UPDATE

MOLESCAN

Molescan is available again through Dr Harb at Tea Tree Surgery.

DUTY DOCTOR CLINIC

Each weekday from 4.00pm to 6.00pm our patients who need to be seen on that day, but cannot get an appointment, can be seen at Tea Tree Surgery by the Duty Doctor. An appointment time is required. Normal fees apply.

DIABETES CLINICS

St Agnes Surgery and Tea Tree Surgery offer a Diabetes Clinic (held at the St Agnes Surgery) which is proving very successful with patients achieving significantly improved control and knowledge of their diabetes.

PAP SMEAR CLINIC

Saturday mornings at Tea Tree Surgery with a female Doctor. Normal fees apply.

ENURESIS CLINIC

Dry Bed Program for children 6 years and over. Speak to your Doctor for more information.

SENIOR'S HEALTH ASSESSMENTS

St Agnes Surgery provides a comprehensive health assessment for patients 75 years of age and over – the program involves a detailed functional and safety assessment at home conducted by our Nurse, followed by a medical check-up at the Surgery.

PRACTICE ACCREDITATION

St Agnes Surgery and Tea Tree Surgery have achieved FULL ACCREDITATION until 2020. Accreditation reflects the attainment of national standards of quality at a practice level.

PRIVACY

This practice is committed to maintaining the confidentiality of your personal health information. Your medical record is a confidential document. It is the policy of this practice to maintain security of personal health information at all times and to ensure that this information is only available to authorised members of staff.

ACROSS 1. OESOPHAGUS 3. FAT 6. PARKINSONS 9. SCHIRMER
DOWN 2. SEVEN 4. THREE 5. BLOOD 7. SATURATED 8. CHROMIUM
10. TOXIC
11. BOWEL 12. REFLUX
CROSSWORD SOLUTION

Take me home to complete our PUZZLE – check inside!