

Thank you to our doctors, nurses and receptionists who volunteered during the Commonwealth Games

March/April 2018

Issue 73

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Just a reminder that Hope Island and Homeworld Helensvale Medical Centres will be closed for
Anzac Day - Wednesday 25 April

For Emergencies Telephone Chevron After Hours on **55328666**

My Health For Life

Hope Island and Homeworld Helensvale Medical Centres have been awarded funding to offer our patients the My Health For Life Program.

My health for life is a **FREE** healthy lifestyle program designed to help people who are at high risk of chronic disease get their health back on track.

Chronic disease, such as type 2 diabetes, heart disease and stroke, is often influenced by lifestyle factors. *My health for life* is about knowing your health risks and taking small steps towards a healthier life so that your health stays on track and your risk of future illness is minimised.

It is important to note that this program has a prevention focus, so it is not open to people who already have diabetes but could be ideal for a family member or friend.

You may be eligible if you are:

- Aged 45 years and over and have been identified by a health professional as being at high risk of chronic disease (which includes type 2 diabetes, heart disease and stroke)
- Aged 18 years and over and are of Aboriginal or Torres Strait Islander descent and are at high risk of chronic disease
- Age 18 years and over with pre-existing conditions (E.g. previous history of gestational diabetes or have been diagnosed with high blood pressure or high cholesterol).

Talk to your doctor or our practice nurses today.

The first thing to know about **My health for life** is that it's different to traditional weight loss or gym-style programs.

We've taken a fresh approach to helping people make healthy choices. Maybe yours is finding the motivation and support to get going, while for someone else it's weight loss or finding a physical activity they enjoy. Sometimes it is just about finding the right headspace to keep on track when life gets in the way.

We work with you to identify your barriers to healthy change and help you take manageable steps to get past them. We show you how to set realistic goals and an action plan for success – and we support you throughout your journey to get your health on track. The program is delivered in your general practice by qualified health professionals.

The great thing about **My health for life** is that it is personalised to suit your needs – **and it's free!**



Are you looking after your kidneys?

Chronic kidney disease

Often the development of kidney disease is gradual and kidney function worsens over a number of years. If you permanently lose more than one-third of your kidney function, it is called 'chronic kidney disease'. Chronic kidney disease can lead to kidney failure. You are more at risk of chronic kidney disease if you:

- Have diabetes
- Have high blood pressure
- Are obese
- Are over 50 years of age
- Have a family history of kidney disease
- Smoke
- **men** who smoke are three times more likely to have reduced kidney function
- Are of Aboriginal or Torres Strait Islander descent.



If kidney disease is found early, medication combined with diet and lifestyle changes can increase the life of your kidneys. If you have kidney disease, it does not mean that you will develop kidney failure. One in seven Australian adults aged over 25 years have at least one sign of chronic kidney disease. Only a few people with kidney or urinary problems have long-lasting kidney damage and even fewer have kidney failure. Kidney failure occurs when the kidneys are no longer able to remove waste from your blood and control the level of fluid in the body. Kidney failure can happen suddenly or gradually. People with kidney failure need dialysis or a transplant to stay alive.

About 52,000 Australians aged 12 to 74 years have severely damaged kidneys. In many cases, the signs of disease aren't noticed until the kidneys are close to failure. You can lose up to 90 per cent of kidney function before you even feel sick.

Osteoporosis

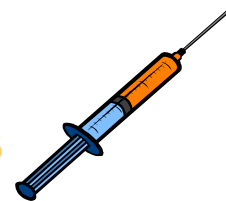
The body constantly absorbs and replaces bone tissue. With osteoporosis, new bone creation doesn't keep up with old bone removal.

Many people have no symptoms until they have a bone fracture.

Treatment includes medication, a healthy diet and weight-bearing exercise to help prevent bone loss or strengthen already weak bones



Flu Vaccination— It's that time of year again—April 2018



Although most people recover from the flu quickly, some people such as young children, older people and people with certain health conditions can be seriously affected by the flu, which can sometimes even result in death. Flu vaccination can be administered to anyone who wishes to reduce the likelihood of becoming ill with influenza. Annual vaccination is recommended for people who are at increased risk of flu related complications, including all people 65 years and older. The flu vaccine is FREE for all Australians aged 65 and older, children aged 6 months—5 years and everyone with conditions that meet eligibility criteria.

This year the Australian Government is supplying a super strong vaccine for those aged over 65. It is not available in pharmacies

There is also a free 4 strain (Quadrivalent) for other eligible patients.

If you are not eligible for free vaccine you can obtain the Quadrivalent vaccine here at your Medical Centre at a cost of \$22.00, or you can have your prescription filled at the pharmacy of your choice. Last year was a particularly

bad flu season and we encourage everyone who works with the public to strongly consider vaccination.

Vaccination against influenza is recommended every year, for anyone wanting to lower their chance of catching influenza. Influenza vaccination is particularly recommended for the following groups of people for whom influenza can have complications:

- those 65 years of age or older,
- Aboriginal and Torres Strait Islanders 15 years of age or older,
- All children aged 6months—5 years
- Children and adults who have certain heart, lung or blood circulation diseases. This includes, for example, people with heart problems, cystic fibrosis, chronic obstructive pulmonary disease, or severe asthma,
- Children and adults who have other ongoing illnesses including: diabetes, kidney problems, poor immunity (including

people with HIV, cancer, chronic steroid use) or inherited abnormal haemoglobin conditions,

- those 6 months of age or older who have illnesses of the nervous system that may affect the lungs. children 6 months to 10 years on long term aspirin therapy,

- women who are planning to become pregnant, and those who are pregnant during the influenza season,

- people living in nursing homes hostels or other long-term care facilities,

- homeless people, and those who care for them.

Influenza vaccination is also recommended for people who:

- may spread influenza to anyone from the groups of people listed above including anyone who lives, works or cares for them,

- provides essential services or work in other industries, especially those associated with the public.

If you are seeing the doctor for your flu vaccine ONLY then the service will be bulk billed. If you are seeing the doctor for other things as well such as scripts, then normal fees will apply.

Aboriginal and Torres Strait Islander people experience a burden of disease two-and-a-half times that of other Australians. A large part of the burden of disease is due to chronic diseases such as cardiovascular disease, diabetes, cancer, chronic respiratory disease and chronic kidney disease. This can be reduced by earlier identification and management of risk factors and the disease itself.

Despite improvements in recent years, there are continuing problems with the under-identification of Aboriginal and Torres Strait Islander people in many health-related data collections. A more systematic

approach is required to ensure the standard Indigenous status question is asked correctly and consistently of all clients, and that this information is recorded accurately.

Earlier identification and the management of risk factors like smoking, low physical activity, poor nutrition, and alcohol consumption can assist in reducing the burden of disease which currently impacts on Health and Social and Emotional Wellbeing.

Hope Island Medical Centre is proud to be participating in the Closing the Gap Program and can offer patients all aspects of the PIP Indigenous Health Program including Wellness Checks. For more information, please speak to our Practice Nurses .



17 March is National Close the Gap Day

Glaucoma Facts

- Glaucoma is the leading cause of irreversible blindness worldwide.
- One in eight Australians over 80 will develop glaucoma.
- First degree relatives of glaucoma patients have a ten-fold increased risk of developing the disease.
- 50% of people with glaucoma in Australia are undiagnosed.
- Australian health care cost of glaucoma in 2005 was \$342 million.
- The total annual cost of glaucoma in 2005 was \$1.9 billion.
- The total cost is expected to increase to \$4.3 billion by 2025.

The eye works very much like an old-style camera. In the camera, the light comes in through the shutter, is focused by the lens, falls onto the film and then we take it to be processed. In the eye, light comes in through the cornea and pupil. It is focused by the lens, falling onto the film in the eye (the retina) and then goes, via the optic nerve (the nerve of sight), to the brain (the processor) for developing. The shape of the eye is achieved through the circulation of a clear fluid (aqueous). It bathes and nourishes the eye, keeps it firm and gives the eye a certain pressure. High pressure left uncontrolled can lead to damage of the optic nerve and result in vision loss. It must be noted that eye pressure varies from person to person. What is high pressure for one person may not be for another.

Glaucoma is the name given to a group of eye diseases in which the optic nerve at the back of the eye is slowly destroyed. In most people this damage is due to an increased pressure inside the eye - a result of blockage of the circulation of aqueous, or its drainage. In other patients the damage may be caused by poor blood supply to the vital optic nerve fibres, a weakness in the structure of the nerve, and/or a problem in the health of the nerve fibres themselves. Over 300,000 Australians have glaucoma. While it is more common as people age, it can occur at any age. As our population becomes older, the proportion of glaucoma patients is increasing.

What are the symptoms of glaucoma?

Chronic (primary open-angle) glaucoma is the most common type. It has no symptoms until eye sight is lost at a later stage. Damage progresses very slowly and destroys vision gradually, starting with the side vision. One eye covers for the other, and the person remains unaware of any problem until a majority of nerve fibres have been damaged, and a large part of vision has been destroyed. This damage is irreversible. It is progressive and usually relentless. Treatment cannot recover what has been lost. But it can arrest, or at least, slow down the damage process. That is why it is so important to detect the problem as early as possible, to be able to start treatment with as little damage to the vision as possible.

Although anyone can get glaucoma, some people have a higher risk, those with

- a family history of glaucoma
- diabetes
- migraine
- short sightedness (myopia)
- long sightedness (hyperopia)
- eye injuries
- blood pressure
- past or present use of cortisone drugs (steroids)

People in these groups should have their first eye check no later than the age of 35. For most people, it is recommended to have an eye check for glaucoma by the age of 40. If no glaucoma is found, the NHMRC (2010) Guidelines recommend regular eye health checks for Caucasians over the age of 50 & for those of African & Asian descent regular checks over the age of 40 years, because of the higher prevalence in the latter groups. Talk to your GP today if you have any concerns about your vision or if you want to arrange a full check up.

Red Bow Annual Appeal

RED BOW DAY 2017 – FRIDAY 3rd MARCH

Show your support this Red Bow Week and help raise vital funds for Queensland families living with muscular dystrophy & other neuromuscular conditions.



World Glaucoma Week

World Glaucoma Week is held in March each year to increase awareness of Glaucoma.



Leukaemia Foundation

**WORLD'S
GREATEST
SHAVE™**

Arthritis Awareness Week

Arthritis awareness week is held in March each year to increase awareness of a range of musculoskeletal conditions. Patients may benefit from a GP Management Plan.

Arthritis
AUSTRALIA

www.arthritisaustralia.com.au

April No Falls

Hope Island and Homeworld Helensvale Medical Centres will be participating in April No Falls Day activities. Patients are invited to discuss their risks with their GP as part of their usual consultation. From there your GP may undertake osteoporosis screening, consider bone mineral densitometry, discuss exercise, discuss your feet and footwear and discuss your eyes and glasses. Your GP may suggest you see an allied health professional.

Did you know?

- One out of three adults aged 65 and older falls each year
- Falls account for 25% of Hospital Admissions
- Most falls occurred at home (58%)
- Fractures were the most common type of fall-related injury (30%)

Falls prevention

- Physical activity (incorporate balance and strength exercises)
- Talk to your GP
- Stay active and healthy
- Have your feet and footwear assessed
- Annual eye and spectacle reviews
- Bone Mineral Densitometry

Risk Factors

- Increased age
- Low levels of physical activity
- History of falls
- Chronic conditions
- Multiple Medications
- Women have increased risk

Have you had a fall in the past 6 months?

Do you take many medications?

Do you take sleeping tablets or antidepressants?

Do you do less than 30 minutes physical activity a day?

Do you have foot pain when walking or swelling in your feet?

Do you have challenges with your vision?

Do you have problems with your heart, blood pressure or circulation?

Do you get dizzy or have "funny turns" ?

Do you have to rush to the toilet?

If you answer YES to one or more of the questions above you may be at risk of falling. Please discuss with your GP or our practice nurse .

You can take steps to stay active, maintain your independence and mobility and decrease your risk of falling

