

**FREE TO TAKE HOME!**

**AUGUST-SEPTEMBER 2018 EDITION**



**Not a dry eye ...**



**Febrile fits in kids**



**Emphysema**



**Managing hayfever**

**YOUR NEXT APPOINTMENT:**

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**ENJOY THIS FREE NEWSLETTER**

Please remember that decisions about medical care should be made in consultation with your health care provider so discuss with your doctor before acting on any of the information.  
[www.healthnews.net.au](http://www.healthnews.net.au)

**● PRACTICE DOCTORS MILDURA**

**Dr John Dyson-Berry** MBChB, FRACGP, FACRRM, DCH, DipFP, DipObst RACOG, CertAvMed, DME (RCPI)

**Dr Robert Meyer** MBBS, FACRRM

**Dr Kenneth Neville** M.D.

**Dr Daniel Edge** MBBS, FRACGP, Dip CH, JCCA (Anaesthetics)

**Dr Amna Salman** MBBS

**Dr Mandeep Kaur** MBBS

**Dr David Fang** MBBS

**Dr Amarnath Bhat** MBBS FRACGP

**Dr Lucy Haymes** MBBS

**● PRACTICE STAFF MILDURA**

**Practice Manager:** Hana Zoch

**Office Manager:** Esther

**Reception Staff:** Bronwen, Michelle, Tanya, Meridith, Joanne, Joanne G & Holly

**Nursing Staff:** Lisa, Pam, Cherie, Melissa, Melanie, Dianne, Julie & Jill

**● SURGERY HOURS MILDURA**

Monday – Friday ..... 8am – 5pm

Saturday Surgery ..... 9am – 11am

**● BILLING ARRANGEMENTS**

We expect the account to be settled at the time of consultation. If it is not, a normal account fee is added.

A small fee may be charged for procedures, to cover costs.

Payment can be made by cash, cheque, credit card or EFTPOS.

We are not a bulk-billing practice and the fees for a Standard Consultation are:

**Private..... \$79**

**Health Care Card Holders..... \$70**

**Pensioners ..... \$59**

For further information on the pricing of services within our Practice please enquire at Reception

**● ALLIED HEALTH AT LIME MEDICAL CLINIC**

**Lynette Flavel, Diabetes Educator** is available for consultation on Wednesdays at our Mildura Clinic.

**Psychology at Lime.** We are now fortunate enough to have two psychologists consulting at our Mildura Clinic for referred patients. These are Dr Mirabel McConchie and Dr Steven Carr. For more information please speak to your GP or enquire at Reception.

**● APPOINTMENTS**

**Consultation is by appointment.** Urgent cases will be seen on the day.

**Home Visits.** If you wish your doctor to make a home visit, please call the surgery first thing in the morning.

**Booking a long appointment.** If you want an insurance medical, review of a complex health problem, counselling for emotional difficulties, or a second opinion, please book a longer appointment. Please bring relevant letters and test results from other doctors.

If more than one person from your family wishes to see the doctor at the same time, please ensure a separate appointment is made for each family member.

**Telephoning your doctor.** Although most problems are best dealt with in consultation, a doctor will always be available during normal surgery hours for emergency advice. Our staff are experienced in helping you decide whether the matter requires appointment, a return phone call from the practice, or urgent advice.

**Follow up of Results.** Patients are advised by their Doctor at the time of their consultation to follow up their test results by phoning the Clinic.

**● PRACTICE DOCTORS WENTWORTH**

**Dr John Dyson-Berry**

MBChB, FRACGP, FACRRM, DCH, DipFP, DipObst RACOG, CertAvMed, DME (RCPI)

**Dr Robert Meyer** MBBS, FACRRM

**Dr Amna Salman** MBBS

**Dr Kenneth Neville** MD

**Dr David Fang** MBBS

**● PRACTICE STAFF WENTWORTH**

**Practice Manager:** Hana Zoch (Off-site)

**Reception Staff:** Jo-Anne

**Practice Nurses:** Emma & Jill

**● SURGERY HOURS WENTWORTH**

Monday & Tuesday ..... 8.30am – 4.30pm

Wednesday..... 8.30am - 1.00pm

Thursday..... 8.30am - 2.00pm

Friday..... 8.30am - 1.00pm

**● AFTER HOURS**

Phone the clinic on 5023 5122.

You will receive a message advising of the "on-call" doctor and a contact number.



▶ **Please see the Rear Cover for more practice information.**

# Not a dry eye ...

The eyes need constant lubrication which is provided by the tear glands. Eyes become dry for two main reasons. Firstly, tears can evaporate too quickly. This can be on aeroplanes, in air conditioning, in dry air or smoky conditions. It is temporary and is improved by use of lubricant drops and removing yourself (where possible) from the situation. Secondly, it can be due to reduced tear production. This can be because of advancing age, various medical conditions (e.g. diabetes, lupus, Sjogren's syndrome, scleroderma), certain medications (e.g. antihistamines, antidepressants, blood pressure tablets) and tear gland damage through trauma.

Other risk factors include being female, use of contact lenses and having low vitamin A levels.

Symptoms are a burning, itching, stinging or dry feeling in the eye. The eyes may become red and sensitive to light. Blurry vision can follow.

Diagnosis is largely on symptoms and a thorough eye examination. Blood tests would be done to rule out underlying conditions. You may be referred to an ophthalmologist.

Complications include eye infections and damage to the eye surface. Fortunately these can be mostly avoided.

Treatment depends on cause. In most cases you will be recommended eye drops to keep the eyes moist. These may be used multiple times a day.

Avoiding situations where dryness would be aggravated (where practical) is important. Try staying inside on windy days or when there is smoke in the air. Wear sunglasses when



outside. Take breaks when using screens for long periods of time and position your screen below eye level so you tend to look downwards. This can reduce evaporation.

## Breathless with emphysema

Emphysema is a form of chronic obstructive pulmonary disease (COPD). Inheritance plays a part, however, most cases are related to smoking or long-term exposure to dusts or pollutants which damage the air sacs in the lungs where oxygen enters the blood stream.

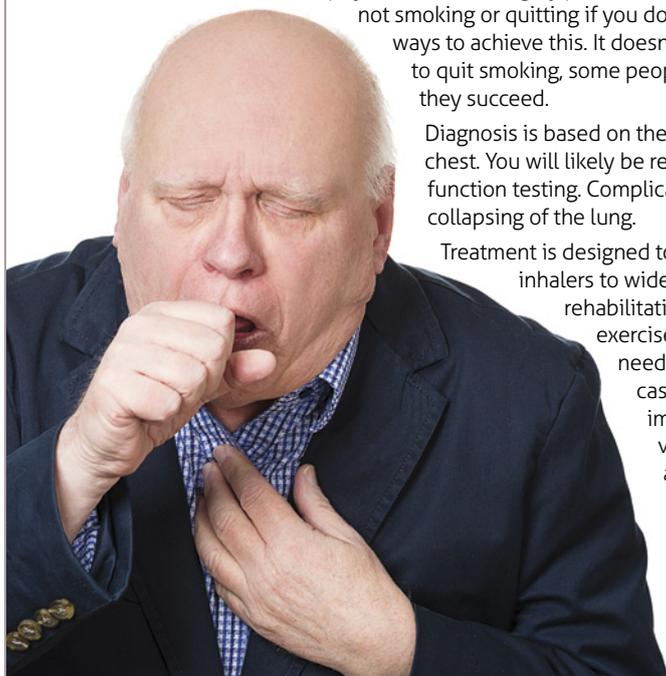
The symptoms develop slowly and include shortness of breath, fatigue, cough and phlegm and recurrent chest infections. In more advanced cases there can be cyanosis (a blue colouration) of the skin. There is no cure for emphysema but it is largely preventable, the most important one being

not smoking or quitting if you do smoke. Talk to your doctor about ways to achieve this. It doesn't matter if you have tried and failed to quit smoking, some people need multiple attempts before they succeed.

Diagnosis is based on the history and examination of the chest. You will likely be referred for chest imaging and lung-function testing. Complications include pneumonia and collapsing of the lung.

Treatment is designed to minimise symptoms. This includes inhalers to widen airways and reduce sputum, lung rehabilitation programs, quitting smoking, exercise to increase lung capacity (this needs to be gentle) and in advanced cases oxygen may be helpful. It is important to have an annual flu vaccination and to see your doctor at the first sign of any respiratory infection.

It is worth restating that while there is no cure for emphysema it can be largely prevented by not smoking. Your doctor can help you in your campaign to quit.



 [Weblinkhttp://healthywa.wa.gov.au/Articles/F\\_1/Febrile-convulsions](http://healthywa.wa.gov.au/Articles/F_1/Febrile-convulsions)

## Febrile fits in kids

These are seizures in children (generally between six months and five years) due to a rapid rise in temperature. Up to one in 20 children will experience these. While frightening to watch, they do not cause brain damage and are not a prelude to epilepsy.

The exact cause is unknown but is thought to relate to the young brain being more sensitive to fever and rapid rise in temperature. The underlying infection does not need to be severe. There are no specific preventative measures but the vast majority of children who have had one will not have another.

Typical symptoms are brief loss of consciousness, jerky movements and possibly redness of the face. Febrile fits usually last a few minutes and stop by themselves. Your child will likely be sleepy and irritable. If a fit continues for over five minutes you must call an ambulance.

Immediate treatment is to lay your child on their side and remain calm. Do not try to restrain the child or place them in a bath while fitting. Other treatments are directed to lowering the fever with ibuprofen or paracetamol. Tepid bathing or sponging can help. Get your child checked by your GP to find the underlying cause of the fever. If, as is common, it is due to a virus then no antibiotic will be needed.



## Managing hayfever – why, what & how

Runny or blocked noses, sneezing, congestion, watery eyes and headache are just some of the symptoms of allergic rhinitis (hayfever) which affects nearly one in five Australians. It is not necessarily caused by hay and you don't get a fever. The symptoms can range from mild to severe and can last days or months.

It is caused by a reaction to atmospheric allergens. Some people are able to identify specific triggers like grass or dust, others are not.

There are numerous treatment options. Avoiding triggers is helpful if you can identify them but, even then, it's not always practical. However, if grass sets you off, then mowing the lawns is best avoided. Don't sweep the garage if you are sensitive to dust.

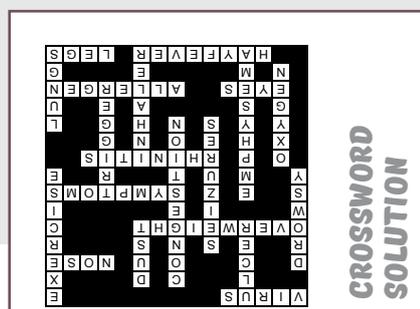
Antihistamine medications can ease the symptoms. While some can make you drowsy, others do not. Corticosteroid-based nasal sprays do not work as quickly but have a preventative effect and last longer. Talk to your doctor about treatments that might suit you.

Decongestants are best avoided as they dry the nose but wear off quickly and can even worsen the situation. If your allergy is severe, talk to your GP about referral for allergy testing.

For some people, a course of desensitising injections (where you are 'immunised' against what affects you) is beneficial. Be aware that the treatment can go on for two years but can also last a lifetime.

Fortunately for most of us, hayfever is a transient inconvenience in spring which can be treated until it passes.

Weblink <https://www.allergy.org.au/patients/allergic-rhinitis-hay-fever-and-sinusitis/allergic-rhinitis-or-hay-fever>



## V is for varicose veins

Widened, often twisted, veins near the skin surface are called varicose veins. They are most common on the lower legs.

Risk factors include advancing age, being female, a positive family history, being overweight, pregnancy and prolonged sitting or standing. They will appear as blue, twisted cords on the legs.

Whilst often painless, they can cause aching and a heavy feeling in the legs. Itching and skin rash (varicose eczema) can also occur. If ruptured there can be significant bleeding. In more severe cases there can be ulceration.

However, they are not associated with deep vein thrombosis.

Treatment depends on severity. There are no specific medications, though Painkillers may ease symptoms but should not be relied on.

Previously formal surgical stripping was performed and this required some days in hospital. Surgical treatments have advanced and most commonly they are now injected to close down the vein. When varicose, the vein is no longer working effectively so it is not a problem to remove or close it. This can be done as an outpatient and recovery is quite rapid.

People seek treatment either for cosmetic reasons or due to symptoms. Talk to your doctor about what might be the best option for you.

To help avoid developing varicose veins, maintain a healthy weight, do regular exercise and change position regularly.



Weblink <https://www.healthdirect.gov.au/varicose-veins>



## ZUCCHINI, FETA & MINT FRITTATA - SERVES 4

### Ingredients

- Olive oil
- 2 medium zucchini - grated
- Handful of fresh mint plus some for garnish
- 1 medium onion - finely chopped
- 8 medium-large eggs
- 60gms feta - crumbled
- Cayenne pepper
- Fresh chilli to serve if desired

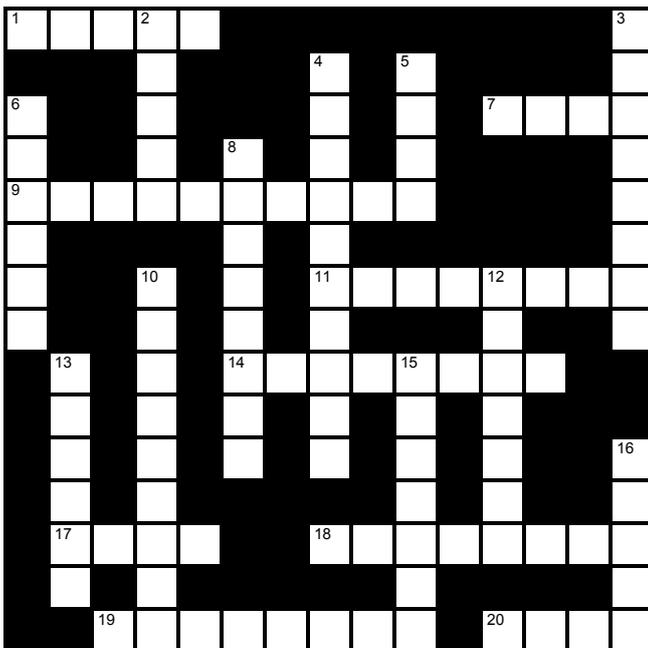
### Method

Combine zucchini, mint, onion and seasoning. Heat a large frypan with a little olive oil. Cook zucchini, mint and onion until softened.

In a mixing bowl, add eggs, cayenne pepper and a little seasoning and beat. Add about 2/3 of the crumbled feta to mixture. Pour into the pan, letting the egg flow evening through the zucchini mixture. Cook for 4-5 minutes on med-high heat – until the egg begins to just set on the base. Then put under the hot grill and cook until just cooked through and golden. Garnish with the remaining crumbled feta, mint leaves and thinly sliced fresh red chilli if desired. Serve with a Greek salad or fresh garden salad



## CROSSWORD



### Across:

1. A ..... is the cause of the common 'cold' (5)  
 7. We smell with it (4)  
 9. Obese (10)  
 11. ....clues to an illness (8)  
 14. Inflammation of the mucous membrane inside the nose (8)  
 17. Used to see with (4)  
 18. An allergy trigger? (8)

19. An allergic reaction to pollens (8)  
 10. Varicose veins are most commonly found in the .... (4)

### Down:

2. A slow-healing sore generally found on the legs (5)  
 3. Necessary to maintain good health (8)  
 4. Blocked nose (10)  
 5. A common allergen (4)  
 6. Sleepy (6)  
 8. Febrile fits (8)  
 10. Lung disease worsened by smoking (9)  
 12. Stimulus that sets off an action (7)  
 13. Odourless gas that gives life (6)  
 15. Device used to breathe in medicine (7)  
 16. Breathing organs (5)

*lime*

MEDICAL CLINIC

### ● SPECIAL PRACTICE NOTES

Despite our best intentions, we sometimes run late! This is because someone has needed unexpected urgent attention. Be assured when it comes your turn the doctor will give your problem the time it deserves. Thank you for your consideration.

### Our Community Practice Nurse.

The Lime Medical Clinic offers the service of a Community Practice Nurse who can make home visits in coordination with your Doctor for Health Assessments, GP Management Plans, as well as Comprehensive Medical Assessments within Aged Care Facilities.

**Pap Nurse Clinic.** Our Mildura Clinic is running **Pap Clinics** every Thursday morning. One of our Practice Nurses will conduct these clinics. Please ask at Reception if you wish to make an appointment.

**Your medical record is a confidential document.** It is 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 staff members. The Privacy Act from the 12th of March 2014 requires our Practice to abide by the 13 Australian Privacy Principles and these are on display within our Reception areas and can be provided to you in hard copy at your request.

**Complaints** are immediately directed to the practice manager – who will try to sort out the problem. If this is not satisfactory, the Doctors will speak to the person, and hopefully come to a satisfactory outcome to suit all parties involved. If preferred in writing to the Doctors – who will treat this confidential and act accordingly. If there is no satisfactory outcome or if you prefer you can write to the Health Services Commission.

For our Mildura Clinic in Victoria: Health Services Commissioner, Level 26, 570 Bourke Street, Melbourne VIC 3000 Ph 133 582 113

For our Wentworth Clinician NSW: Health Care Complaints Commission, Locked Mail Bag 18, STRAWBERRY HILLS, NSW, 2012. Ph: 02 9219 7444