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Dr Tian Tu MBBS

Dr Guenter Oechsle started consulting during 1985 and has been a partner at Casey Medical Centre for many of these years. We are sad to say that Guenter is retiring on the 31st of August. He has been a great mentor and friend for all doctors and staff. We all wish him the very best in his retirement.

BULK BILLING

CHILDREN UNDER 16 BULK BILLED AT ALL TIMES, including after hours, weekends and public holidays. Health Care cardholders will be bulk billed Monday – Friday until 7pm, fees apply thereafter, weekends and public holidays.

PELVIC FLOOR REHABILITATION THERAPY

Innovative incontinence treatment for both male and female patients – speak to your doctor for more information.

NEW SERVICE

Dr Jason Ha now offers specialised photographic mole mapping and skin cancer checks, book in with reception.

SURGERY HOURS AND SERVICES

Weekday opening hours change

CONSULTATIONS by appointment:

Monday to Friday	8am–8pm
Saturday and Sunday	9am–5pm
Public holidays	As posted

FOR AFTER-HOURS please attend the Emergency Department of either Dandenong Public Hospital, David Street, Dandenong, OR Frankston Hospital, Hastings Road, Frankston, OR The Valley Private Hospital, cnr Police and Gladstone roads, Mulgrave, OR Casey Hospital, Kangan St., Berwick. For regular patients of Casey Medical Centre a doctor may be reached by phoning 1902 213 035. Charges for this call will be at a rate of \$5.50 per minute charged to your phone account.

HOME VISITS during surgery hours can be arranged for emergencies or if a patient is unable to travel. Please contact the centre before noon if possible to make appropriate arrangements.

YOUR DOCTOR

FREE!!
TAKE ME HOME



JULY 2017

Antibiotic resistance

Antibiotic resistance seems to be an increasingly common topic for news items and discussion. But what is it, why does it matter, and (perhaps most importantly) what can we do to limit it?

Since the accidental discovery of penicillin by Alexander Fleming in 1928, antibiotics have been the keystone of our treatment of antibiotic infections in humans and animals. Unfortunately, with repeated exposure, bacteria can change their genetic code and become resistant to the drugs. As a result, the antibiotic no longer kills the bacteria – in some cases their growth may be slowed, in others the medication no longer has any effect. Until recently this problem has been tackled by scientists modifying existing treatments and developing new medications to side-step the bacteria's defences. This is increasingly difficult and in 2016 an American woman died from infection caused by a strain of bacteria resistant to all known antibiotics.

There is no doubt that overuse of antibiotics encourages bacterial resistance, with studies demonstrating a clear link between the number of prescriptions and the rate of rise of resistance. Tackling overuse is difficult, and several approaches have been taken. In the UK the Chief Medical Officer has urged doctors to stop prescribing antibiotics for colds and flu, whilst in New Zealand the government announced a multi-agency approach to tackle the problem.

We can all help. Firstly, reducing the spread of infection with good hand hygiene will help reduce the need for antibiotics. This is particularly important around those who are unwell or at risk (for example the elderly or frail).

Secondly, we should simply remember not to ask for an antibiotic prescription for a cold or flu. Statistics show that antibiotic prescriptions increase over the winter period when these illnesses are at their height. Requesting antibiotics for a cold or flu may be tempting as we're keen to find any way to help us feel better. However, they simply won't work as the illnesses are caused by viruses which are unaffected by antibiotics. The best advice is rest, trying to limit the spread by staying away from others, and not asking the doctor for an antibiotic prescription.

Lastly, if we are given a prescription for a true bacterial infection, it is vital to complete the course. Incomplete treatment encourages and allows the bacteria to develop resistance.

Antibiotic resistance is a big problem and is making illnesses we have come to regard as minor increasingly difficult to treat. Scientists the world over are working on developing novel solutions to tackle the problem, but in the meantime we can all do our part to help.

The **benefits** of getting out into **nature**

Many of us will recognise the feeling of relaxation and well-being that comes from a day spent outside the city; perhaps a walk in the countryside, a visit to the beach or simply a day playing with our kids in the local park.

However, few of us will realise that being able to experience these things on a regular basis is actually good for our health.

A March 2017 report from the European Union brought together multiple sources of evidence to highlight the health benefits of access to nature and green spaces. From conditions as diverse as depression and cardiac health and for people at all stages of life from the unborn baby right through to the elderly, the benefits are numerous. For example, the report found that babies born to mothers living within 300m of green spaces had higher birth-weights and children within 2-3km of forests or traditional farms were less likely to suffer with allergies. The benefits were most marked for people living in deprived areas. Doctors in areas with more roadside trees prescribe fewer anti-depressants and middle-aged men in deprived areas who have access to green spaces have a 16% lower annual risk of



death, whilst those living more than 1km from green spaces are more likely to be obese.

City planners need to take note of this information, and perhaps try to emulate Oslo, whose aim is to ensure all their residents live within 300m of a green space.

It seems that getting out into the countryside and experiencing nature not only makes us feel better but can also benefit our health in the long-term. Perhaps this is something we should all consider when trying to decide what to do at the weekend.

Bronchiolitis

Not many people will have heard of bronchiolitis, yet it is the most common cause of severe respiratory illness in children up to one year of age. The condition is more common in the winter months, when babies develop rapid breathing, wheeziness and cough.

Bronchiolitis is caused by a virus (the respiratory syncytial virus) and is very easily passed from one baby to another. The good news is that most infants suffer from a mild illness and recover without any need for treatment. A small proportion of children need care in hospital, and for a tiny fraction the disease can be really serious.



There are some things to look out for if you think a baby might have caught bronchiolitis. In general, if the baby is managing to take their feeds normally, and is having a normal number of wet nappies, (a good sign that they are well hydrated) then they are probably coping OK. If, however, the baby becomes drowsy or so short of breath they struggle to suck effectively then they may need some extra help. If in any doubt, getting the advice of a doctor is always sensible.

Treatment for bronchiolitis is usually aimed at making sure the baby gets enough fluids and oxygen while their body fights off the virus. Interestingly, it seems that really simple treatments might help. A 2014 study in the Journal of the American Medical Association showed that giving the baby a mixture of simple salty water and oxygen to breathe through a 'nebuliser' may reduce the likelihood they need admitting to hospital, and may even shorten the length of the illness.

There is no doubt that having an unwell baby can be frightening, particularly if they are struggling to breathe. However, most babies recover very quickly from bronchiolitis and simple treatments can help even those who need hospital care. Above all, if you are concerned, talk it over with a doctor.

PRACTICE UPDATE

DOCTOR'S LEAVE 2017

Dr Tom Everitt 28 June to 16 July
Dr Justin Curran 7 July to 16 July
Dr Amanda Osborne 24 June to 8 July

Dr Tian Tu will be finishing his rotation on the 4th of August, all staff wish him the best for his future.

BEAUTY SERVICES

Casey Medical Centre's Beauty Therapy room provides the following services:

- Facial rejuvenation – Anti-wrinkle injections
Dermal Fillers
- Facial treatments and products
- Waxing
- Eyebrow & Eyelash Tinting
- Eyelash Extensions
- IPL hair removal, skin pigment and vascular treatment

GIFT VOUCHERS, Beauty Services brochure and pricelist are available for all Beauty Services from reception or check our website.

WEBSITE

Please visit us at www.caseymedical.com.au and you can meet our medical staff, find out the latest news, learn about the history of CMC and our Beauty Room. Like or follow us on facebook for clinic updates and health information.

Online appointment booking 24hrs a day, 7 days a week through My Health 1st mobile app or through our NEW WEBSITE. Its quick simple and its free.

FEES

Our fee for a standard consultation is \$70, the Medicare rebate is \$37.05. For HCC holders bulk billing will be available weekdays from 8am to 7pm only. Fees apply thereafter, weekends and public holidays.

Children under 16, Aged Pensioners and Veterans Affairs card holders will be bulk billed at all times.

Workcover & TAC patients: Non card holders will be charged an out of pocket fee of \$20. After hours fees for non card holders \$30, and card holders \$20. Patients will need to settle account on the day of service. The account is not claimable from Medicare, Workcover or TAC.

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.

RESULTS, REFERRALS & PRESCRIPTIONS

Test results (provided only if medically appropriate) can be organised between Mon-Fri, 9am-5pm. Ongoing specialist referrals requested without an appointment may attract a \$10 fee. There will be an administration fee of \$2 if these need to be faxed or mailed. Repeats of most ongoing scripts require an appointment. Please mention to the receptionist that it is only for an ongoing script from your doctor as the visit will then be bulk billed.

Take me home to complete our PUZZLE – check inside!

Mental health – 'It's OK to say'

Mental health has been receiving a lot of press recently, and perhaps rightly so. With members of the British Royal Family spearheading a charity campaign in the UK, and recent data from Australia revealing suicides at an all-time high, there has never been a better time to talk about mental health and what can be done to protect it.

It is a sad fact that in 2015 over 3000 people took their own lives in Australia - where suicide is three times more common in men than women, and most likely in the young. Similar tragic statistics are found in New Zealand where around ten kiwis take their own life every week. It is startling to realise that more than twice as many people in Australia and New Zealand take their own lives than die from road traffic accidents.

Of course suicide represents the final stage in an often long and agonising journey which affects both the individual and their loved ones.

The good news is that some very simple things can make a huge difference. The most crucial of these seems to be talking about mental health, particularly for men. Many of us find this extremely challenging and prefer to present a facade of well-being. However, hiding emotions only perpetuates problems. As highlighted by the UK royals, 'it's OK to say'. Recognising

signs of depression, offering a friendly ear or pointing someone in the direction of professional help may also be all that is needed to prompt a loved-one to seek the help they need.

As individuals, sleeping enough, eating healthily and getting regular exercise are key to maintaining mental health. Alongside this, trying to regulate stress and, of course, taking the time to talk to someone about how we are feeling are all known to help.

Depression and mental health may continue to have a stigma associated with them, but we are a long way from hard-hitting anti-depressants being the only possible treatment. Psychological interventions such as cognitive behavioural therapy, and even exercise therapy may be just as effective – especially in the early stages. A 2016 study published in the Journal of the American Medical Association showed that an internet-based self-help programme was effective at preventing depression deteriorating.

With mental issues becoming increasingly common, and suicides at alarmingly high levels, perhaps we should all think about our own state of mind, and that of our friends and family. Talking about how we feel is key to dealing with problems, and simple interventions can help prevent issues escalating.

Vietnamese Chicken Pho



INGREDIENTS

Serves 4

Pho base

- 5 C quality chicken stock
- 1t coriander seeds
- 1t chopped garlic
- 1T grated fresh ginger
- 1 x star anise
- 1 cinnamon stick
- ¼ t cracked pepper
- 1t brown sugar
- 1t fish sauce
- Pinch of chilli

- 500g chicken meat - thinly sliced
- Fresh coriander
- Rice noodles
- Limes

Optional extras

- Mung beans, bok choy, other asian greens, finely sliced chilli

METHOD

1. Put the pho base ingredients into a pot. Allow to come to a boil and simmer for 20 mins. Strain, leaving just the liquid. Adjust the flavour as you prefer.
2. Meanwhile, heat a pan with a little oil and cook the chicken pieces.
3. Add noodles to a pot of boiling water. Cook until al dente.
4. To serve: in a high-sided bowl add the noodles, chicken and pho base. Sprinkle on fresh coriander, mung beans and a wedge of lime.

Protecting long-term bone health

Dietary pressures on the young seem to increase daily – with magazine images and social media combining to exert influence and present unrealistic targets.

A recent survey of 2000 young adults by the National Osteoporosis Society in the UK found that up to 70% had been on some kind of a diet. With many being influenced by online chat forums or vloggers, diets excluding complete food groups – so-called 'clean eating' were especially common. One in five of the respondents had tried a dairy-free diet – with many seeing dairy as high in fat and up to half describing themselves as dairy intolerant.

So, are there any risks from dairy exclusion in the young? Sadly the short answer to this is 'yes'. Dairy is a major source of calcium for most people, and calcium is essential for creating bone density. By far the majority of bone mass is created before the age of 25 – making young adulthood a crucial time. In later life, low bone density can have huge effects; thin bones – or osteoporosis - is experienced by up to half of women and one in five men over the age of 50. Osteoporosis can result in multiple fractures and back pain when vertebrae collapse.

Adequate calcium intake in young adulthood is essential to try and prevent this. Dairy foods are particularly rich in calcium, although it can also be found at high levels in



green vegetables such as spinach, and salmon among others. For people following a vegan diet or excluding dairy for medical reasons, food needs to be carefully planned to ensure calcium intake is protected. For the rest of us, a sensible balanced diet should provide what we need. Discussing the issues with young people and informing them of the importance of bone development should help them make sensible choices to protect their bone health in later life.

A quick and easy meal that is delicious and nutritious!

Should we get the flu vaccination?

We are increasingly confronted by publicity encouraging us to have the 'flu vaccine'. Flu, or to give it its full name influenza, is a virus known to us all. However, most of us do not realise how serious it can be.

In the US flu is estimated to cause up to 50,000 deaths per year, with up to 700,000 people hospitalised annually. Whilst anyone can catch flu, people most at risk of serious illness are those with other health problems, the elderly and pregnant women.

Flu is hugely more common during the winter season. Flu vaccination is available, but many see it as inconvenient and unnecessary – particularly as it needs to be given every year. So,

what are the facts, who should get vaccinated and how effective is the jab?

The influenza virus subtly changes its structure as it follows the winter around the globe. This means that the specific 'strain' of flu which is going to affect people each year changes.



This is the main reasons why the flu vaccine needs to be given each year. Scientists predict (by tracking the strains of flu most recently causing illness) which strain is going to most problematic over the coming winter. This information is used to produce the vaccine for the upcoming flu season.

This constant altering of the flu virus structure is also the reason why it's still possible to get the flu even after you've had an immunisation; if the virus you're infected with is different from the one in the vaccine, you can still get sick.

So, how effective is the vaccine and how important is it to get immunised? Although it's not perfect, a 2014 study from the US found that having the vaccination resulted in 75% fewer 'flu-related admissions to children's intensive care between 2010-2012. The more people are immunised in a population, the more difficult it is for the virus to spread, so by having the jab, we are not only helping ourselves but also those around us.

In Australia and New Zealand, free vaccinations are available for those groups most at risk of severe illness. Others may have to pay a small amount.

Speak to your GP about what options are available to you.

Rib Ticklers



I once worked in a health food store once when a guy came in and asked, "If I melt dry ice, can I take a bath without getting wet?"

You know you're getting old when you are cautioned to slow down by your doctor instead of the police.

People can be divided into three groups; those who make things happen, those who watch things happen, and those who wonder what happened.

There is always something to be thankful for. If you can't pay your bills, you can be thankful you are not one of your creditors.

An application form I was filling in said, "In Case Of Emergency Notify"; I wrote "My doctor" - what's my mother going to do?

Source: www.onelinerz.net

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WORDSEARCH

PUZZLE

TALK	IMMUNISATION
STATISTIC	RESPIRATORY
GENETIC	INFLUENZA
EXERCISE	RELAXATION
STIGMA	PROBLEM
WINTER	EMOTIONS
THERAPY	DEPRESSION
HYGIENE	ANTIBIOTIC
MENTAL	SCIENTISTS
PENICILLIN	RESISTANCE
BRONCHIOLITIS	SLEEP
PRESCRIPTION	STRESS
VACCINATION	ILLNESS
INFECTION	STRAIN
INTERVENTION	VIRUS