



FREE TO TAKE HOME!

FEBRUARY - MARCH 2022 EDITION



School refusal in children



Mobile phone use in kids



Ross River Virus



Plantar Fasciitis – heel pain

● PRACTICE DOCTORS

Dr Mark Rikard-Bell - GP
MBBS, DipCOG(SA), FRACGP, FACRRM,
Dip Skin Cancer College
Anaesthetics, Diving Medicals, Gynaecology & Skin
Clinics

Dr Peter Brown - GP
MBBS, DRCOG, DRACOG
Anaesthetics, Travel Medicine & Yellow Fever

Dr Philip Watson - GP
BScMed, MBBS, DRANZCOG, FRACGP, FARGP
Obstetrics, Anaesthetics & Minor Procedures

Dr Delma Mullins - GP
MBBS, DCH, FRACGP, FACRRM
Women's Health, Paediatrics, Travel Medicine &
Yellow Fever

Dr Sanjay Verma - GP (Surgeon)
MBBS, FRACGP, FARGP (Surgery)
Skin Clinics, General Surgical Procedures,
Endoscopies, Hernia Repair, Carpal Tunnel,
Vasectomy & Appendectomy

Dr Siv Rajeev
MBBS, FACRRM

Dr Raj Swamy
MBBS, AMC

Dr Clifton Washaya - Surgeon
MBChB, FCS(Coseca) FCS(SA), FRACS

Dr Nitin Trasi
MBBS, DGO, MD (O&G), AMC Cert, Adv. DRANZCOG
Women's Health, Antenatal & Postnatal Care, Sexual
Health, Family Planning, Conception & Infertility

Dr Andy Woods
MBBS, MRCOG, FRANZCOG

Dr Raviraj Kugapiriyar Registrar

Dr Mustafa Hafiz Registrar

Dr Kavita Kasana - GP

Dr Ismat Emu Registrar

Dr Aparna Sharma Registrar

Dr Daniel Garces Registrar

● PRACTICE MANAGER
Kristen Seymour

● SURGERY HOURS

Monday-Friday (Appt) 8.30am–5.30pm
Saturday (No Appt) 9.00am–11.30am

● AFTER HOURS & EMERGENCY

Phone **6543 1222** to speak with a Doctor -
often attending at the Hospital
(phone **6542 2000**).

In case of a medical emergency, dial **000**
and ask for an ambulance.

● SPECIAL PRACTICE NOTES

Muswellbrook Skin Cancer Clinic. Perhaps it's time to come in for a skin cancer check. All of our doctors can do this for you. If specialist attention is needed to any spots that look suspicious, we have several doctors & surgeons who can take the appropriate action.

● OTHER SERVICES OFFERED

- Obstetrics & Ante-natal Care
- Spirometry
- Sports Medicine Hearing tests
- Casualty & Emergency
- Anaesthetics
- Pathology Laboratory
- Home Visits when necessary
- Medicals – Sporting, Pre-Employment, Superannuation & Diving
- Lady Drs available – Women's Health, Contraception & Menopause
- Free immunisation clinics: 11am – 12md Tues, Wed, Thurs & Fri or at any time by appointment with your GP.
- X-ray & CT Scanning
- Diabetics Care
- Ultrasound
- Surgery
- Cardiograph
- Skin Cancer Check
- Flu Clinic Seasonal

Diabetes Educator: Annabel Thurlow comes with 25 years' experience in diabetes and is a Diabetes Nurse Practitioner, Credentialed Diabetes Educator and Certified Insulin Pump Trainer. She sees those with Type 1 and Type 2 Diabetes, women with gestational diabetes and people at risk of diabetes (pre-diabetes). GP referral is required; appointments Tuesdays and Wednesdays.

Muswellbrook Diagnostic Imaging. Brook Medical Centre has state of the art imaging services at the rear of the building. Ultrasound and X-ray also available on referral from your doctor. Appointments may be made on 6543 3427.

Blood tests with pathology. Laverety Pathology is at the rear of the building if your doctor has ordered pathology tests for you.

● BILLING ARRANGEMENTS

The account is to be settled at the time of consultation. Payments can be made by cash, cheque, Credit Card or EFTPOS. **Item 23- \$87.** A Fee of **\$5** will occur if the account is not paid on the day.

If you cannot attend your appointment please advise reception as soon as possible, otherwise a fee for non attendance may be charged.

● HAVING YOUR OWN DOCTOR

When you phone for an appointment please ALWAYS ask for your regular doctor or backup doctor before accepting an appointment with another doctor.

It will be easier to get an appointment with your preferred doctor for regular checkups or prescriptions if you make your appointments well in advance.



YOUR NEXT APPOINTMENT:

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

▷ Please see the Rear Cover for more practice information.

School refusal in children and adolescents

This is where children experience severe emotional distress at having to go to school, which can lead to considerable absence from school, impacting education and job prospects.

It is completely different to truancy, where the child pretends to go to school but does not and is not associated with anti-social behaviour. School refusal is also entirely different from normal anxiety that may precede exams or school camps.

There is no specific known cause. The child may have various underlying worries about schoolwork, friendships, bullying, social isolation, conflicts with teachers, parental separation, or family grief or trauma. There may be no apparent underlying issue.

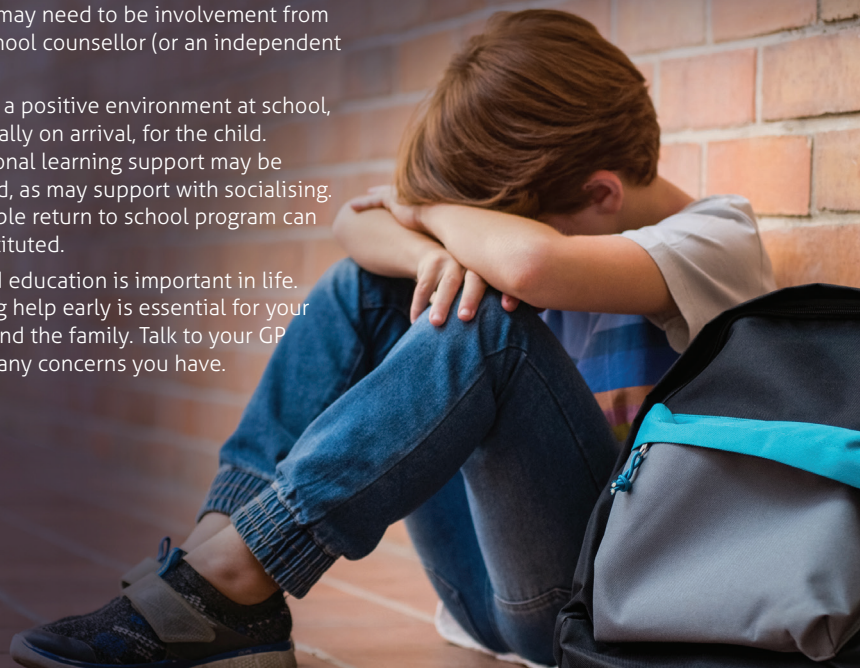
Symptoms include tearfulness before school, frequent complaints of somatic symptoms like headaches, tummy pains or dizziness before school but not on weekends through to tantrums before school.

A general medical check by your GP is important to ensure there are no other underlying medical issues. It is vital to manage the problem early. Parents,

teachers, the school and sometimes education bodies have a role. The family, as well as the child, will need support. There may need to be involvement from the school counsellor (or an independent one).

Create a positive environment at school, especially on arrival, for the child. Additional learning support may be needed, as may support with socialising. A flexible return to school program can be instituted.

A good education is important in life. Getting help early is essential for your child and the family. Talk to your GP about any concerns you have.



 <https://headspace.org.au/friends-and-family/understanding-school-refusal/>

Mobile phone use in kids

It is hard to believe that the ubiquitous mobile phone only became widely used in the 1990s and smart phones just this century.

Managing their use in children is something previous generations of parents did not have to contend with. There is a view that children should not use mobile phones, but you cannot rewind the clock. Certainly, there is research showing that too much total screen time is an issue in children, as they tend to exercise less, impacting sleep. Plus, the issue of social media access via mobile phone anywhere anytime.

Like all parenting, setting simple rules and sticking to them is key. This is also age-related. The notion of the "electronic babysitter" used to apply to TV but now can apply to phones. But handing a small child the phone as a way to keep them quiet is not a great idea on a regular basis. For primary school children, it can be useful to have a phone to ring parents. This can be an old-fashioned type that only makes phone calls and does not access the internet. Much like TV time can be restricted by parents, total screen time, including phones, can also be. Ensure phones are not kept in children's



bedrooms and are recharged in the kitchen or living room. In older children, ensure a net filter is installed. Lead by example, and don't be permanently attached to your own phone.

Most importantly, don't be afraid to set boundaries and be "the worst parent ever". The objections will settle, and your children will be better for it.



Changes in prescribing of medicinal cannabis

In November, the Therapeutic Goods Administration (TGA) introduced changes to how applications for medicinal cannabis are made and dispensed.


Medicinal Cannabis was legalised for use in Australia in 2016. It can be prescribed in conditions where the TGA accepts there is evidence for its use and where other treatments have failed to help or caused unacceptable side effects. The medications are unregistered, and thus far, applications have needed to specify the exact product by name and manufacturer. Approvals for use have grown from 3000 for the calendar year 2018 to over 100,000 in 2021 as of November.

The changes mean that doctors can apply for a type of medicinal cannabis based on amounts of cannabidiol (CBD) and tetrahydrocannabinol (THC). There are five categories. To switch between brands will not require new approval. This can be helpful

for all involved; however, pharmacists may dispense a medication other than what your doctor has prescribed. Generic prescribing works well where bio-equivalence studies have been done and medications have the exact same strength. These studies are not done with medicinal cannabis, and there can be significant differences between different formulations even when strengths are similar. In turn, this could lead to side effects or poorer control of symptoms if products that are similar but not the same are substituted.

Problems can be avoided. Your doctor can tick the "do not substitute" box on prescribing, and you can insist that you are dispensed that which you have been prescribed.



 <https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/ross-river-virus-disease>

Ross River Virus

This is a viral infection spread by mosquitos. It typically causes joint inflammation, muscle pain and fatigue.

Symptoms generally start between three and 21 days after being bitten. Other symptoms can include rash and enlarged lymph glands. Some people do not even know that they have it, as it can be no more than a flu-like illness.

It is common in most areas of Australia, particularly at inland waterways and coastal regions. Outbreaks can occur if high rainfall or floods lead to increased mosquito breeding.

Like a virus, there is no specific treatment. Symptomatic measures such as rest, maintaining hydration, and simple analgesics are recommended. With no specific features, diagnosis is by blood testing. Whilst everyone makes a recovery, some people are left with intermittent aching symptoms for a year or more. You cannot pass it on to other people.

You can reduce your chances of getting Ross River virus by avoiding mosquito bites; wear long, light-coloured, loose-fitting clothes, especially when in mosquito prone areas. Use effective insect repellents as per the manufacturer's instructions. If possible, avoid being outside in mosquito prone areas at dusk and dawn. If camping, use insect nets or fly wires. Reduce the number of potential mosquito breeding grounds around your home by getting rid of stagnant water. Ensure your pool or spa is well chlorinated, and don't let containers of water remain stagnate.

Plantar Fasciitis – heel pain

A common cause of heel pain, plantar fasciitis, is an inflammation of the tissue (plantar fascia), which runs along the sole of the foot, connecting the heel to the toes creating the foot's arch.

Risk factors include age, being overweight, sports that stress the heel (e.g. running) and spending long periods on the feet.

The main symptom is pain under the heel. It can be dull or sharp. It is often worse first up in the morning, after prolonged sitting or after intense activity. Diagnosis is largely based on history and examination. X rays generally do not show anything. Some changes in the fascia may be seen on ultrasound or MRI.

Treatment is a mix of improving symptoms and preventing further aggravation. Analgesics or anti-inflammatory medications may help

in the short term but are not a cure. Avoid activities that aggravate the situation. Wear shoes with good arch support and cushioning. Purpose made insoles may be helpful as can be stretching, as advised by a podiatrist or physiotherapist.

In more severe cases, cortisone injections may be recommended. Surgical treatment is viewed as a last resort.

Treatment is a medium-term proposition, so do not expect immediate results nor get frustrated. Perseverance with treatment is important, and most cases will improve with time.



● **SPECIAL PRACTICE NOTES**

Repeat prescriptions. The issue of repeat prescriptions generally requires a visit to the doctor. In rare circumstances, the doctor may write one without a consultation. (A \$15.00 script fee is payable when picking up your script at the surgery). It is helpful if we have at least 24 hours notice to deal with any request.

Referrals. Doctors in this practice are competent at handling common health problems. When necessary, they can use opinions from Specialists. You can discuss this openly with your doctor, including potential out of pocket expenses.

Patient Feedback. We welcome your comments or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer, you can contact the Health Care Complaints Commission on: 1800 043 159.

Despite our best intentions, we sometimes run late! This is because someone has needed unexpected urgent attention. Thank you for your consideration.

Communication. A doctor is available during normal surgery hours for emergency advice. Our staff are experienced in deciding the appropriate response to any phone request.

Patient Privacy. This practice protects your personal health information to ensure it is only available to authorised staff members for the intended purposes and to comply with the Privacy Act. To obtain a copy of our Privacy Statement or your medical records, please ask.

Reminder system. Because our practice is committed to preventive care, we may send you an occasional reminder regarding health services appropriate to your care. If you wish to opt out of this, please let us know.

Test Results. Results are reviewed by the doctors and acted on in a timely manner, with your health in mind. We will contact you if necessary.

Bring your Medicare Card. For all services it is important to bring your Medicare card with you when attending the doctor.

Interpreter Service Available. Please enquire at Reception



RHUBARB & ONION CHUTNEY

Ingredients

- 500 grams rhubarb, roughly chopped
- 1 onion (medium) chopped
- 200 grams caster sugar
- 200ml cider vinegar
- 30 grams of fresh grated ginger
- ½ tablespoon of cloves

Directions

STEP 1: Put the rhubarb, onion, caster sugar, cider vinegar, ginger, cinnamon stick and cloves in a preserving pan or large heavy-based pan. Bring to the boil, then cook over a medium heat for 1½ hours until the rhubarb has broken down and the mixture is jammy.

STEP 2: Leave to cool in the pan for 10 minutes

STEP 3: Divide between two sterilised jars while still hot. Seal and label.

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