

OUR DOCTORS

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and Rebecca

CONSULTATION TIMES

Monday to Friday	8 am – 8 pm
Saturday	8 am – 5 pm
Sunday & Public Holidays	9 am – 1 pm

DARLEY MEDICAL CENTRE

147 Gisborne Rd P: (03) 5367 5000
Darley, VIC 3340 F: (03) 5367 7510

HOURS

Monday to Friday 8.30 am – 5 pm

MADDINGLEY MEDICAL CENTRE

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HOURS

Monday to Friday	8am – 8pm
Saturday	8am – 5pm
Sunday & Public Holidays	9am – 1pm

YOUR DOCTOR

JANUARY 2021

FREE!

This month we talk about...



WHY HAVE A
HEALTH CHECK?



ATOPIC
DERMATITIS



CARE FOR BABY
IN THE HEAT



WHAT IS
PCOS?

Being smart about salt

Taking a closer look at the salt you get in your diet might surprise you. If you don't keep track of your sodium intake, it could be time to start.

Salt, also known as Sodium chloride or NaCl, is a chemical compound which is found in our foods. Both of the components of salt – the sodium and the chloride – are essential for health. Our bodies use it to absorb and transport nutrients, maintain blood pressure, maintain our fluid balance, transmit nerve signals, and contract and relax muscles.

Too little or too much salt can be harmful to your health, however most people get too much in the modern diet, which can contribute to some of our most common and serious diseases.

LOW SODIUM

A low sodium level can also cause serious health problems. It's known as hyponatremia and occurs when water and sodium are out of balance – so there's either too much water or not enough sodium in your blood. However it's uncommon and usually only seen in people with certain pre-existing medical conditions. Other causes can include severe vomiting or diarrhoea, and certain drugs such as antidepressants and pain medications.

HIGH SODIUM

High sodium intake is closely linked with hypertension (high blood pressure), which is a risk factor for cardiovascular diseases and kidney disease. The link between high sodium intake and stroke is very clear, prompting campaigns to encourage people to check their salt intake.

The Australian and New Zealand Governments now recommend a suggested dietary target of 2000mg of sodium per day for adults (one teaspoon of salt contains 2,300 mg of sodium). Consuming half of this amount would still give most people more than they need. The current average sodium intake in Australia is about 3600mg a day.

WHERE WE GET SALT IN OUR DIETS

- The most obvious source is salt we add to our food. Even salting the water to boil pasta or potatoes can add a surprising amount.
- Processed meats such as hamburgers, sausages and ham often have an astounding amount of salt.
- Pre-prepared foods can contain a lot of salt and sometimes very high levels of fat and sugar too. Salt can even be found added in unexpected foods such as cereal, bread, and effervescent vitamins or medications.

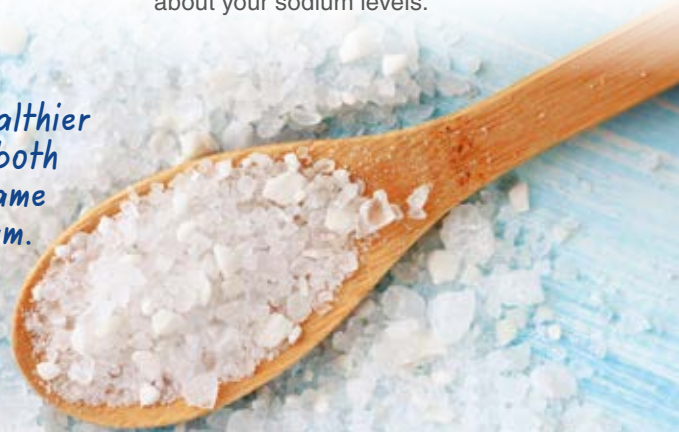
Salt occurs naturally in many foods, and a balanced diet will contain enough without having to add any.

HOW TO REDUCE SALT INTAKE

We easily get used to adding salt to our diet, so when we start to cut back food may taste bland – gradually reducing your intake may help you to adjust slowly. Get used to checking food labels, eat fewer takeaways and processed foods, and liven up your home cooking by using a mix of herbs and spices instead of salt.

Check with your doctor if you are concerned about your sodium levels.

Sea salt may sound healthier than table salt, but both contain about the same proportion of sodium.



Our newsletter is free! You can take a copy with you.

WORD SEARCH

ALLERGEN
ANDROGENS
ATOPIC
BMI
CANCER
CHLORINE
CYST
DEHYDRATION
DERMATITIS
DIABETES
ECZEMA
FERTILITY
FOLLICLE
FONTANELLE
HIRSUTISM
HORMONE
HYPERTENSION
HYPONATREMIA
KIDNEY
LIVER
MENOPAUSE
OSTEOPOROSIS
OVARIES
PCOS
POLLEN
SALT
SODIUM
STROKE
WEIGHT

I A V Z Z E N I R O L H C Z H I R S U T I S M K J
Z O S T E O P O R O S I S D P H Q D P T U W C T J
W C L G H D O L R N Y B Y T I L I T R E F Q N W Q
U T T S P E V D Y K F L H J J E K J Q S E B H X V
J J T E Z H O Q G K C I P O T A W K A O F Y H S V
K I C L Y Y N J E H Y P O N A T R E M I A A W H Z
D K K C S D E W V T H R U A V X H I P E N E H B X
K C A I I R G N J B J H K O V Y G Q Z D I B C W X
J T T L V A R V X U K I U N P T U M R G T H M K I
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V C S V U O O W T R Y O K W H V L U I Y I U N O V
A M E H S N W N M X M F G O J S E N D F Y G J N A
R I E G I A O A E R P Z L W R V G H M R H C S E J
I M C M V F T V O Q Q F Z M R T U X S W X X Y M K
E Y Q Y U I W H T O H Z R T I N S Q U A R B Q S V
S U E G T B M O X N E L L O P Y Y T M E R O R S T
F B X I O Z T Y A K T A P G I W G S V Z X O F H I
N R S W C X D D W G S I D B D F T I A A X V I D M
P E H O K I C O K K J Z J W K Q L I E C Z E M A R

Why are health checks important?

There are many ways that we can become unwell, and some of them can't be predicted. Others, however, can be screened for, and managed well when caught in the early stages. Government-led health screening programmes have had enormous success in the early diagnosis and treatment of certain cancers, including breast, cervical, prostate and bowel cancers.

In addition to screening programmes for single diseases, regular general health checks are recommended, even if you feel healthy. These visits can check more broadly for diseases like diabetes, high blood pressure, and cardiovascular disease.

Each person's risk is different – your doctor can assess your risk of future medical issues, and tell you how often you need to be seen.

WHAT'S A ROUTINE CHECK-UP?

A routine check-up involves an appointment with a healthcare professional. It may be a doctor or nurse who takes these routine health check clinics. They usually check blood pressure, heart rate, weight and height. You'll also be asked questions about your health, family history for disease, and your lifestyle – including smoking, exercise, and alcohol intake. They can also update vaccinations and advise on maintaining a healthy lifestyle.

Blood tests at a routine screening may include tests for cholesterol, kidney and liver function, and diabetes. You may be required to have further tests if there are any concerns, or if you fall into an at-risk category. These tests may involve screening for osteoporosis (brittle bones), an ECG – a test that detects heart abnormalities, hearing or eye tests. Your doctor may also refer you to a specialist for diagnosis and treatment.

TARGETED SCREENING

Some disease risk changes over the course of a lifetime, so screening programmes are targeted at those most at risk. Cervical cancer screening is routinely offered to women between the ages of 25 and 74, as this is the age bracket most likely to have treatable pre-cancerous findings.

outine mammography – the breast cancer screening programme, and checks for prostate cancer begin later in life as they are more common as we age.

Having regular health checks, especially as you get older, can prevent many potential health issues. It's also a time to discuss any concerns, and assess your lifestyle to ensure you will maintain optimal health and wellbeing.



Polycystic ovarian syndrome (PCOS)

Polycystic ovarian syndrome (PCOS) is a fairly common condition in girls and women of reproductive age. Overall, PCOS affects approximately 12-21% of women in Australia and can cause significant distress.

WHAT IS PCOS?

During ovulation, a fluid-filled sac or follicle forms on one ovary to hold a maturing egg. These have a 'cyst' like appearance. When the egg is released, the 'cyst' reduces and disappears. Some people, however, develop many of these follicles in their ovaries – 'poly-cystic ovaries' – this is the finding that gives the syndrome its name.

It isn't completely clear why some people get PCOS, but it sometimes runs in families, and there is a link to other hormonal problems such as type 2 diabetes.

SYMPTOMS AND DIAGNOSIS OF PCOS

Diagnosis of PCOS can be difficult because there is a wide range of symptoms, and there isn't a simple test for it. Many women don't know they have it – up to 70% of women with PCOS remain undiagnosed.

Most of the symptoms experienced by people with PCOS are caused by hormonal changes that come with the condition.

People with PCOS have higher levels of androgens – the 'male' hormones, so one of the most visible traits of PCOS is excess body hair – commonly on the face, neck, chest and back. These male hormones also mean that some women find the hair on their head thinning or receding.

Oily, spotty skin is common in PCOS, and so is weight gain. People with PCOS typically gain weight easily and find it more difficult to lose weight than most people do.

It's one of the leading causes of infertility – people with PCOS may have irregular, unpredictable periods, or sometimes no periods at all.

There may be other conditions a doctor will consider, or they may make a diagnosis of PCOS based on the symptoms alone. You may be asked to have blood tests to check hormone levels, or an ultrasound scan to detect the tell-tale multiple egg follicles in the ovaries.

Some symptoms of PCOS tend to disappear at menopause, but not all. Getting individualised advice from a healthcare professional is useful for managing any ongoing symptoms.

LIVING WITH PCOS

Hormonal medications such as the contraceptive pill may help to get irregular periods under control.

Many women with PCOS are able to get pregnant, but may require fertility treatments that improve ovulation.

Losing just a little weight can bring a huge improvement in all of the PCOS symptoms. Excess body hair and thinning hair on the scalp, acne and oily skin, menstrual and fertility problems – all seem to improve with weight loss.

Taking care of your baby in the heat



Babies aren't as good at balancing their body temperature as adults, so it's important to take extra care on hot, sunny days.

Avoid direct sunlight, and stay indoors during the hottest part of the day. If it can't be avoided, use a parasol or sunshade to make sure that the baby isn't exposed to strong direct sunlight. Ensure that there's still good, cool air circulation under the sunshade. Staying in cool places is best if possible, and never leave a baby in a car.

Babies can be sensitive to sunblock, so it's better to avoid the sun, or to cover up with light loose clothing than to put sun cream on. Heat rash is common when babies get too hot. It's not dangerous but can be uncomfortable and make a baby very distressed.

Dehydration is a particular concern on very hot days. Babies up to six months should be fed with infant formula or breastmilk,

and they may need more frequent feeds to stay hydrated. Breastmilk adapts to ensure that the baby has an adequate mix of hydration and nutrition even in hot weather. Babies who are weaning can have some cooled boiled water as well as their usual milk and foods. A baby who is dehydrated may have a sunken fontanelle (soft spot on the top of their head), and will pass less urine – it will also be darker coloured.

Get urgent help if you're worried that your baby is becoming unwell from heat or sun exposure, this can easily become a medical emergency. They may be sunburned, panting, have a very dry mouth or eyes, pass little or no urine, or develop severe heat rash.

If the baby seems very unwell – for example if they become floppy or unresponsive, call for emergency services immediately.

MOROCCAN CHICKEN SALAD

This is not your average salad. It's amazing – tender spiced Moroccan chicken, sweet apricots, couscous and a delicious citrus dressing. Easy to make – so it's perfect for summer entertaining.

SPICE RUB

- 1 tsp ground ginger
- 1 tsp cumin
- ½ tsp cinnamon
- ½ tsp cayenne or paprika
- ½ tsp allspice

DRESSING

- ¼ cup orange juice
- Zest of half an orange
- 2 Tbsp cider vinegar
- ¼ cup mild olive oil
- 1 tsp runny honey

METHOD

1. Combine spice rub ingredients. Massage onto chicken and leave to rest while preheating the oven to 180°C.
2. Place chicken on baking paper and cook for 25 minutes, or until cooked through. Remove from oven, cover and allow to rest for 10 minutes before slicing.
3. While the chicken is in the oven, prepare the couscous as per packet instructions. Drain and rinse in cold water.
4. Add all the dressing ingredients into a jar together and shake well.
5. Gently toss all the ingredients together in a large bowl. Serve and enjoy!

Try decorating the salad with mixed seeds, microgreens, fresh coriander or mint leaves just before serving.



Atopic dermatitis (eczema)

Eczema is a very common skin condition which can affect people of any age. It's most common in early childhood, and many people grow out of it. Occasionally, people develop eczema later in life.

Eczema is an itchy, painful condition where the skin may become thickened, dry, red, scaly and easily cracked. It may also 'weep' and crust over when scratched and become infected. It can appear anywhere on the body.

Severe itching tends to be the most troubling symptom; and it can be bad enough to disturb sleep, or cause people to scratch until they bleed. Unfortunately, the more we scratch, the more we damage the already dry and painful skin, making it itchier – this 'itch-scratch' cycle is hard to break.

WHY DO WE GET ECZEMA?

The most common form of eczema is 'atopic dermatitis' which appears to be closely linked to a family history of eczema, asthma or hay fever. There is no known single cause for eczema, but there are known triggers that can make symptoms worse.

TRIGGERS

People with eczema may find that they have periods of relatively trouble-free skin, with intermittent flare-ups. It's not always possible to pinpoint the cause of a flare-up.

Some common triggers are:

- Temperature – some people get worse on hot humid days, or in cold dry conditions.
- Allergens – food, alcohol, dust mites, grasses, pollens or animals.
- Fabrics – wool or synthetic fabrics.
- Some chemicals – washing products or swimming pool chlorine.
- Stress or illness.
- Damage to the skin – even a graze can start that itch-scratch cycle.

LIVING WITH ECZEMA

As a chronic condition, many people who live with eczema develop good ways of managing it. Some of the best advice is:

- **Know your triggers** – so you can avoid them.
- **Prepare for the flare!** – It's not always possible to predict a flare-up, so keep treatments handy.
- **Watch what you put on your skin** – find out which fabrics, detergents, and cosmetics suit you.

Having an initial assessment with your doctor means that you'll get the right treatment. The goal is to heal the skin and prevent and minimize flare-ups. It's also important to see a doctor if your eczema becomes infected or hard to manage.

PRACTICE UPDATE

GENERAL CONSULTATION POLICIES

Longer consultation times are available, so please ask our receptionists if you require some extra time

HOME VISITS

Home and other visits are available for regular patients of this practice whose condition prevents them from attending the surgery

AFTER HOURS

If you get sick at night or on the weekend, please ring 5367 3333 for advice. We look after our patients 24 hours a day, 7 days a week.

APPOINTMENTS

Please ring 5367 3333 for an appointment. Patients attending without a booking will be fitted in at the earliest available time.

Emergencies will always be seen quickly – simply notify the receptionist

PHONE CALLS

Your regular doctor may arrange to phone you under particular circumstances. Unfortunately we are not able to connect telephone calls to our doctors routinely, as the interruption caused to the patients they are seeing can be harmful. Our staff will usually be able to pass on a message to your doctor.

FEES

Fees are payable at the time of consultation by cash, cheque, Mastercard or Visa. The GPs at this practice bulk-bill pensioners, Health Care Card holders and children under 16. Veterans may sign the service voucher.

An increased fee applies on Sundays and public holidays.

SMOKING POLICY

This practice has a no smoking policy.

SERVICES AVAILABLE

- General family medicine
- Check-ups, medical examinations
- Family planning
- Pap smears, pregnancy tests
- Antenatal care, obstetrics
- ECG, heart check
- Counselling
- Vaccination: children and travel
- Blood tests / pathology
- Minor surgery: stitching cuts, removing moles, skin cancers
- Liquid nitrogen (freezing) therapy for sunspots and warts
- Acupuncture
- Weight control, nutrition advice
- Treatment of fractures
- Dietitian available onsite

Discuss your concerns with the doctor

It's a good idea to think about what you'd like to discuss before your visit. This form can help you organise your thoughts. After you make an appointment, take a minute to write down the doctor's name and appointment details. Then use this form to make a list of your concerns.

DOCTOR'S NAME	DATE	TIME

1.
2.
3.
4.
NOTES:

Disclaimer: The information provided in this newsletter is for educational purposes only, and is not intended as a substitute for sound health care advice. We are not liable for any adverse effects or consequences resulting from the use of any information, suggestions, or procedures presented. Always consult a qualified health care professional in all matters pertaining to your physical, emotional and mental health.

Our newsletter is free! Take a copy with you.