

saundersstreetclinic

37 Jackson Street, Wynyard, TASMANIA.

Phone 6442 1700

Newsletter Jan-Feb 2024

Opening hours

Monday - Thursday	9am-1230 pm, 2pm-5 pm
Friday	9am-1230 pm, 2.30pm-5 pm
Saturday, Sunday, Public Holidays	closed

Doctors:

Jim Berryman	MBChB, FRACGP, FARGP	Bradley Williams	MBBS, FRACGP
Allison Johnson	MBBS, FRACGP	Michaele Rawson	MBBS,
Sarvin Randhawa	BPharm, MBBS, FRACGP (on leave 2024)	Stephanie Hey	MBBS, FRACGP, CertAviationMed
Jess Andrewartha	MBBS, FRACGP, DCH	James Tan	MBBS
Tim Andrewartha	MBBS, FRACGP-RG, Dip Palmed	Noora Albakkaa	MBChB

Nurses:

Fiona Munday RN	Belinda Townsend BNurs, RN.
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After hours arrangements

Please phone the surgery number, you will be given the number for Health Direct which is a phone triage service providing advice by the Federal Government. This service will contact the doctor on call at Saunders Street if necessary, following assessment by a registered nurse and in some cases by a doctor. If your concern is about **a medical emergency** call the ambulance service on **000**-there is no charge for ambulance callouts in Tasmania.

If the matter is urgent but not an emergency call **Health Direct 1800 022 222**. A registered nurse using triage protocols will take your call. If necessary, the call will be transferred to a GP at GP Assist in Hobart and if that GP thinks a call out or house call is warranted a GP from this clinic will be contacted.

Prostate Specific Antigen (PSA) testing

Potential benefits:

1. For every 1000 men tested, two men will avoid death from prostate cancer before they reach 85. This benefit might be greater for men at high risk, such as those with a strong family history of the disease.
2. For every 1000 men tested, two men will avoid metastatic prostate cancer.

Potential harms:

1. For every 1000 men tested, 28 will have prostate cancer diagnosed, many of whom would have remained asymptomatic for life (ie, they are overdiagnosed).
2. For every 1000 men treated, 25 will have surgery or radiation because of uncertainty about which cancers need to be treated — many would do well without treatment.
3. Seven to 10 of these 25 men will develop persistent impotence and/or urinary incontinence, and some will develop persistent bowel problems as a result of treatment.

Benefits of vaccines

For all the medical miracles and scientific breakthroughs, and the babies who have benefited so much from modern medicine they will outlive us all, it is hard to say a bad word about vaccines. Vaccines save lives.

Yet some people do say bad things about vaccines, usually on internet forums, planting seeds of doubt into the minds of parents who fear for their children and are open to conspiracy theories about their health. So their over-protected kids go unprotected. For others, it is not so much the misinformation spread by anti-vaxxers that is the issue but a lack of awareness, time or sometimes just proper record-keeping that has kept their children or themselves from being immunised. Of course (and this shouldn't have to be said in 2018), going unvaccinated puts you and others in danger. It allows once banished diseases to make a comeback. It diverts precious resources from the health system. And it is an insult to the clinicians and researchers who should be looking to add new vaccines to our arsenal, not chasing up people refusing those injections already shown to work.

You may have heard about preventive health, and how better diet and more exercise can keep you well for longer, but did you know vaccines could prevent a third of disease cases in Australia?

According to the latest data from the National Notifiable Diseases Surveillance System, 37 per cent of disease notifications in 2014 were for vaccine-preventable diseases. There is a time lag in the data, meaning the next update won't be available until next year, but this gives some indication of what is at stake.

The number of potentially preventable cases in 2014 was 70 per cent higher than the year before because of a bad flu season. This emphasises the need for authorities to get the vaccination strategy right and for people, especially in high-risk groups, to heed the warnings.

This week the federal government announced the composition of the four-strain flu vaccine for next season and announced two new vaccines would be available from April to provide increased protection for people aged 65 and older.

Most parents do the right thing by their children.

The latest data shows that, among children 12 to 15 months old, the immunisation rate in 2016-17 was 93.8 per cent, up from 90.4 per cent three years earlier. Among those aged about five, the national rate was 93.9 per cent. The best performing region was previously shown to be western NSW and the worst the north coast of NSW. But among preschool children, those aged 24 to 27 months, the result last year was only 90.9 per cent, marginally better than the year before but still below the target of 92.0 per cent. That was partly because of changes in the definition of fully immunised. However, authorities continue to look at geographic areas and community groups where more work can be done.

If you missed out as a child, talk to your doctor about immunisation, what you can do to protect yourself and help provide herd immunity to others. This is especially true if you plan on travelling overseas (and don't plan on bringing, say, measles or hepatitis A back with you).

A surge in invasive meningococcal cases — 382 last year, more than double the number of cases in 2015 — has prompted authorities to add a quad-strain vaccine to the national immunisation program.

The new vaccine will cover against the A, C, W and Y strains, not just the C-strain vaccine currently given to infants at 12 months. The Pharmaceutical Benefits Advisory Committee will also look at making the quad-strain vaccine available free to adolescents.

Last year there were 28 deaths associated with meningococcal.

<https://www.theaustralian.com.au/life/health-wellbeing/vaccines-the-best-form-of-disease-prevention/news-story/d7f36fe642e194ebba9f7a2d29fa4fc5>

Overcoming pain without opioids

Michael Nicholas, director of pain education and management programs at the Royal North Shore Hospital in Sydney, says opioids have “very limited utility” for chronic pain, which is pain that has lasted for more than three months.

It is not wise to take these drugs long-term because there often are adverse side effects, he says, and the opioids’ usefulness diminishes over time: “Drugs don’t deal with the cause or the generator of that pain. They may dull it, but they dull you too.”

There are other answers, he says. “The problem is that people are often using them (opioids) to the exclusion of anything else.

“So what we’re saying is that there are a lot of other ways of managing pain, some of these are behavioural.”

According to the TGA discussion paper, pharmaceutical opioid deaths in Australia are double heroin deaths, in a reverse of the proportions seen in the 1990s. Picture: AP

These may include pacing activities throughout the day, so pain remains manageable; using massage, heat and cold packs; and carrying on with useful and purposeful things. Patients may have to accept a certain amount of pain is inevitable, he says, and they should talk to an expert who can help work out other ways to live that don’t involve trying to avoid or escape from pain.

“Unfortunately, you have to accept living with pain,” Nicholas says. “When you first take them (opioids), they might help a bit, but as you go on your body adjusts. Then people might say they need more, and start escalating the dose.”

Nicholas says there are certainly valid uses for opioids — after surgery, for instance — but long-term use can cause problems.

“We all do this, we want a short-term solution for a long-term problem,” he says. “At our clinic we spend just about all our time trying to help people come off opioids and learn alternative, non-pharmacological ways of coping with their pain and getting on with functional, meaningful lives.”

<https://www.theaustralian.com.au/news/inquirer/fine-line-between-relief-and-craving-in-opioid-war/news-story/ea9eb054551aa0a9e4ef2faf4b18d8f7>