

YOUR DOCTOR



DECEMBER 2016

GLEN FORREST MEDICAL CENTRE



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MBBS FRACGP FARGP DCH Grad Dip FM

Dr Alina Harriss

MB BS

Dr Mark Daykin

MB ChB(UK) MRCPG (UK) FRACGP

CLINIC STAFF

Nursing: Sinead, Karen, Lisa, Cheryl, Fiona and Roz

Reception: Colleen, Ellen, Janet, Virginia, Kirsten, Sue and Debbie

Practice Manager: Maria

SURGERY HOURS AND SERVICES

Consultations are by appointment.

Christmas/New Year Hours

Saturday 24 December 2016	Open
Boxing Day	Closed
Tuesday 27 December 2016	Closed
Saturday 31 December 2016	Open
Monday 2 January 2017	Closed

GP After Hours Clinic – Midland available at St John of God Midland Public Hospital Ph 1300 706 922
Mon - Fri 6pm to 10pm, Sat noon-10pm
Sun & Pub Hols 10am – 10pm

GP After Hours – Mount Lawley Ph 9370 4200
Mon-Fri 7pm - 11pm, Sat 2pm – 10pm,
Sun and Pub Hols 10am – 10pm

For all emergencies please present to St John of God Midland Public Hospital, 1 Clayton St, Midland Ph 9462 4000.

Urgent medical problems are always seen on the same day. For Home Visits, please telephone the surgey as early as possible after 8.15am. For After Hours emergency medical problems Monday-Saturday, please call 9298 8555 up until 11.00pm for the practice duty doctor.

EXERCISING AWAY SEDENTARY BEHAVIOUR

In an increasingly busy world, sedentary behaviour – that is sitting for long periods of time – has become common.

People often work long hours at their desk and wind down with time spent in front of the TV. Furthermore, commuting via car is common so people may transfer from the car, to the office desk, back to the car and then home to the couch in a day with very little physical activity in between. Lack of physical activity and increased time spent sitting has been found to increase the risk of a number of chronic diseases and the risk of premature death. It's known that increasing levels of physical activity can improve health outcomes and reduce the incidence of many chronic diseases. What's less known, however, is whether or not increasing levels of physical activity can counteract the detrimental effects of large amounts of time spent sitting. Researchers reviewed the evidence around the association between sedentary behaviour and physical activity levels and risk of death from all causes.

Researchers looked at studies that recorded physical activity levels, time spent sitting and cause of death, as well as disease-specific death rates. Sedentary behaviour was measured in daily sitting time and TV-viewing time. Physical activity levels were assessed in the studies via self-reported questionnaires. Researchers compared the data from those who had different amounts of sitting times and varying levels of physical activity.

The results showed that, in those people with the highest levels of physical activity, there was no significant association between time spent sitting and premature death. In this group, however, an association remained, albeit reduced a little, for those who had high levels of TV-viewing time. For those with moderate levels of physical activity there was still an association between sitting time and premature death, however this was reduced according to the level of physical activity undertaken compared with those in the least active group.

The findings of this review suggest that high levels of physical activity, which was about 60 – 75 minutes per day at moderate intensity, significantly reduced the increased risk of death associated with long periods of time spent sitting. While this level of physical activity may be unattainable, the good news is that lower levels of physical activity still lowered the risk. These findings add further weight to the benefits of getting up and active throughout the day. Even incidental exercise can help increase your daily physical activity levels. So take the stairs instead of a lift; walk, cycle or catch public transport to work instead of driving; and try to get up out of your chair at regular intervals at work throughout the day so that you don't spend the whole day seated.

Reference: Ekelund, U et al. (2016). Does physical activity attenuate, or even eliminate, the detrimental association of sitting time with mortality? A harmonised meta-analysis of data from more than 1 million men and women. *Lancet*, 388, 1302-10.



DID YOU KNOW?

COFFEE CONSUMPTION MAY RUN IN THE FAMILY



Coffee is a widely consumed beverage around the world and people drink coffee for a number of reasons.

The most common reason may well be for its perceived ability to help fight fatigue and stimulate us for the day ahead. Many people come to rely on coffee in their daily routine. Coffee consumption is also a social activity with people often using a 'coffee date' as a chance to catch up with friends and family. In addition to these reasons for drinking coffee, researchers have begun questioning whether there may be a genetic component to coffee drinking habits.

To investigate whether coffee drinking patterns may be influenced by a person's genes, researchers asked more than 1000 people in Italy about their coffee drinking habits. Detailed genetic information was available for all participants.

The results showed that people with a gene variant called PDSS2 drank on average one less cup of coffee per day compared to people who didn't have the variant. This gene codes for an enzyme (a protein that helps complex reactions occur) that is essential to the production of coenzyme Q10. Coenzyme Q10 is an important protein in mitochondria, which are important for energy production.

The hypothesis put forward by researchers to explain the association between this gene variant and coffee consumption involves how coffee is metabolised. PDSS2 is thought to play a role in the expression of genes involved in caffeine metabolism, therefore people with this variant may have reduced capacity to metabolise caffeine. Metabolising caffeine at a slower rate would translate to it being in the body for longer, so perhaps less coffee is needed for these people to get the same caffeine 'hit'.

More research is needed in this area to confirm a genetic influence relating to caffeine consumption but it may be that the perceived need for coffee is a combination of habit, social influence and our genes.

Reference: Pirastu N et al. Non-additive genome-wide association scan reveals a new gene associated with habitual coffee consumption. *Scientific Reports* Epub online August 25, 2016. doi: 10.1038/srep31590.Do, Catasdam rem elabus ente patum atem. Vis

WORD SEARCH

Y Q A D K Z C M T G C R O H M X O C Z A Y F P Z O V G R K I J U C C L J T O J Q
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ACTIVITY	CERVIX	FRESH	INFLAMMATION	SEDENTARY
ATHEROSCLEROSIS	CONSUMPTION	FRUIT	INSULIN	SITTING
BENEFITS	CONVENIENCE	GENETICS	MODERATE	SUGAR
BLOOD	COOKING	HEALTHY	NUTRITION	TELOMERES
CAFFEINE	DIABETES	HEART	PHYSICAL	VEGETABLES
CANCER	DISEASES	HOME-COOKED	PROCESSED	WATERMELON

A BUSINESS DIET: BAD FOR THE HEART

The corporate world often involves a barrage of back-to-back meetings, social networking and interstate and overseas travel. With such a varied schedule, routine is often not possible, and therefore the ability to maintain a regular exercise regime and diet plan can be challenging.

Sourcing healthy meals on the road can be difficult, particularly when you're expected to 'wine and dine' clients. A typical Western diet, high in saturated fat and often accompanied by alcohol, is known to contribute to an increased risk of heart disease. What's lesser known is whether a 'business diet' could be even worse.

Researchers in Spain analysed how different dietary patterns are associated with early stage atherosclerosis (where plaque builds up in the arteries causing heart attacks and strokes). To do this, they reviewed the diets of more than 4000 adults between the ages of 40 and 54 and looked at how they related to different measures of heart disease.

40% of people in the study were found to be following a Mediterranean style diet and another 41% were eating a more Western diet, high in red and processed meats, butter, cheese and refined grains. A different pattern of eating was observed in the remaining 19% of people. Termed

the 'social business eating pattern' by researchers, this diet was high in red meat, takeaway foods, alcohol, and sugary soft drinks, and involved numerous occasions of dining out.

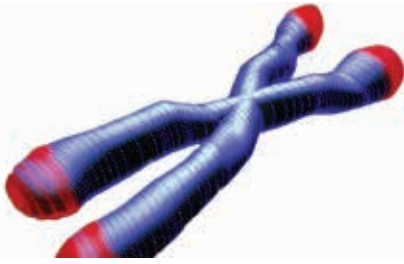
The results showed that people following the social business eating pattern had a considerably worse heart risk profile compared to those following other diets. This increased risk remained after adjustments were made for other potential heart risk factors including age, levels of physical activity, smoking status and other lifestyle factors. The study participants were middle to high income office workers, not low income, which may limit applicability to the broader population.

The results of this study suggest that more attention is needed to come up with viable healthy diet and exercise solutions for people in the business world who are often on the road. A business deal doesn't necessarily require alcohol, steak and indulgent dessert to be successful so it may be time for companies to think about healthier and more sustainable ways to look after their employees and make healthier options easier to select when they're on the road.

Reference: Peñalva JL et al. Association between a social-business eating pattern and early asymptomatic atherosclerosis. *Journal of the American College of Cardiology* 2016;68:805-814.

MYTH VS FACT

ARE DIET, TELOMERES AND AGEING RELATED?



Telomeres are caps at the end of chromosomes that offer protection to chromosomes. Research has identified an association between telomeres and ageing, in that as we age, telomeres become shorter and have less coating.

This has led researchers to suggest that as telomeres shorten, cells are less able to reproduce safely, which may cause our tissue to deteriorate and eventually die. People have thus begun to search for things that might slow the process of telomeres reducing in length, with the intent of potentially being able to slow down the ageing process.

Researchers have investigated the relationship between lifestyle and telomere shortening over time. Inflammation and oxidative stress are two factors associated with increased rates of telomere shortening. This has led researchers to hypothesise that lifestyle factors, such as specific dietary patterns, that act to reduce inflammation and oxidative stress might positively influence telomere length.

Researchers reviewed studies that collected information on both dietary patterns and telomere length. From the 17 studies that they reviewed, researchers found that both a Mediterranean style diet and diets high in fruits and vegetables were associated with longer telomere length. Conversely, diets high in refined grains, processed meats and sugar-laden beverages were associated with shorter telomere length.

The body of research into telomeres is constantly growing. A Mediterranean diet and a diet high in fruits and vegetables is the cornerstone of many dietary guidelines. More research is likely required to confirm whether a healthy diet can improve telomere length however, in the meantime, there are many other health benefits to be gained from adhering to a healthy and nourishing diet.

Reference: Rafie N et al. Dietary patterns, food groups and telomere length: a systematic review of current studies. *European Journal of Clinical Nutrition* Epub online July 17, 2016. doi: 10.1038/ejcn.2016.149.

NUTRITION:

NOT JUST WHAT YOU COOK BUT HOW YOU COOK IT

The way that food is cooked can affect a number of things. It can change the flavour and chemical composition, reduce the risk of bacterial contamination and even affect how we digest some nutrients.

While some of the effects that arise due to the way in which a food is cooked are positive, there are also unwanted negative outcomes associated with some cooking methods. Advanced Glycation End-products (AGEs) arise when food is heated to the point of browning or charring. AGEs are what gives roasted food its flavour and aroma and bread its brown crust. The typical Western diet, with overly processed prepared foods, is high in AGEs.

The accumulation of AGEs in the body can promote oxidative stress and inflammation and has been associated with insulin resistance, which can lead to diabetes. There has been some research that shows that people with type 2 diabetes show signs of reduced inflammation after switching to a low AGE diet however there is minimal research into whether or not a low AGE diet can actually reduce the risk of type 2 diabetes developing in the first place.

That's why a study investigated the association between a low AGE diet and the risk of developing type 2 diabetes. It involved 138 people who were allocated

to either follow a diet with a typical AGE content or a low AGE diet. People on the low AGE diet were instructed to avoid frying, baking or grilling foods and were advised to instead boil, steam or stew foods. They were also advised to use longer cooking times and lower temperatures. The control group was instructed to cook as they normally would. People involved in the study were at high risk of developing type 2 diabetes, and having high blood fat levels, high waist circumference or elevated fasting blood sugar levels.

Researchers found that, after one year, markers of inflammation and insulin resistance were reduced further in the low AGE group. It's also important to note that people in the low AGE cooking group received more advice and guidance from a dietitian, which may have contributed to this result.

In addition to potentially reducing the risk of diabetes, a low AGE diet is in line with other healthy eating guidelines including consuming higher amounts of fresh fruits and vegetables and minimal processed foods, and baked and fried foods.

Reference: Vlassara H et al. Oral AGE restriction ameliorates insulin resistance in obese individuals with the metabolic syndrome: a randomised controlled trial. *Diabetologia* 2016;59:2181-2192.

Good Health on the Menu



WATERMELON MINT SMOOTHIE

This refreshing smoothie is filled with sweet juicy melon that is high in cancer-fighting lycopene and vitamins, and has zero fat and cholesterol.

Ingredients

- 1-2 cups seedless watermelon chunks
- 1 tablespoon honey
- 1 tablespoon fresh mint leaves, or to taste
- 1 cup lemon yoghurt
- Dash of cinnamon



Method

1. Puree watermelon, honey and mint in a blender or food processor quickly - do not over blend.
2. Pulse in yoghurt and cinnamon- just until smooth.
3. Pour into a chilled, tall glass.

Serves 1 - 2.



Dr Norman Swan **A MATTER OF HEALTH**

END OF THE PAP SMEAR

Women over the age of 25 should take note that screening for cervical cancer will change quite radically from next year.

The cervix is the neck of the womb (the uterus) and cancer there can be very nasty and hard to treat, so it's good that



THE BENEFITS OF A HOME COOKED MEAL

Dining out is becoming increasingly common. Whether it's for convenience, cost or social reasons, cooking at home with the family is a much less common occurrence than it was in previous generations.

The convenience of eating at a restaurant, picking up fast food or having pre-prepared meals delivered to the doorstep has become more and more popular. While dining out and takeaway food are convenient and may save time, they often come at the expense of good nutrition, with meals prepared out of home often being high in energy, salt and fat, and low in essential micronutrients like vitamin C, iron and calcium. Conversely, home cooked meals enable you to control what goes into the dish and portion size. While home cooking has been associated with lower sugar and reduced fat intake, there is little research on whether eating home cooked meals is linked to lower rates of lifestyle-driven diseases. Researchers investigated this, looking at the association between consuming midday and evening meals that have been prepared at home and the risk of type 2 diabetes.

Data was analysed from two large studies: the Nurses' Health Study (NHS), which has been following the health of more than 120,000 female registered nurses for many years, and the Health Professionals Follow-Up Study (HPFS), which consists of over 50,000 male health professionals.

cervical cancer is preventable through screening. Until now that's been by having a Pap smear every two years from the age of 18-20. A Pap smear involves a spatula scraping the surface of the cervix and the cells looked at down the microscope to see if they are turning cancerous.

The problem with the Pap smear is that it can miss cancerous changes. The new screening program still uses a sample from the cervix, but instead of looking for rogue cells, they test for Human Papilloma Virus (HPV), which causes the vast majority of cervical cancers. In addition, they will only test once every five years with an invitation

Participants were given a food frequency questionnaire at the beginning of the study in 1986 and every four years thereafter. The questionnaire assessed their habitual diet including how often their midday and evening meals were prepared at home. Diagnoses of type 2 diabetes were also recorded.

For both men and women, increased consumption of meals prepared at home was associated with a lower risk of type 2 diabetes. Men and women eating more meals prepared at home also consumed more fruits, vegetables, red meats, dairy products and whole grains. Frequent consumption of meals prepared at home was associated with slower weight gain and lower risk of developing obesity.

These results suggest that there is a benefit to preparing meals at home when it comes to weight control and risk of type 2 diabetes. Cooking at home enables you to control what goes in to the meal and portion sizes. If you're time-poor, there are a number of chefs who specialise in quick, simple recipes that are nutritious and delicious. Preparing meals at home is also a great way to get the family together and socialise with loved ones.

Reference: Zong, G et al. (2016). Consumption of Meals Prepared at Home and Risk of Type 2 Diabetes: An Analysis of Two Prospective Cohort Studies. *PLoS Med* 13(7): e1002052. doi: 10.1371/journal.pmed.1002052.

going out to women to remind them to have the test when it's due and the program won't begin for a woman until she's 25.

Some people have worried that this might put younger women (20-24) at risk since they will be excluded from the programme. Research by the Cancer Council NSW has shown that this is not the case because firstly they weren't helped at all by the existing screening and secondly, most of them will be at least partly protected by having been immunised against HPV in adolescence.

Researchers estimate that cervical cancer rates will fall by a further 20% when the new five yearly HPV screening is in place.

PRACTICE UPDATE

REPEAT SCRIPTS

Repeat prescriptions will not be issued without a prior consultation. Patients seeking repeat prescriptions must see their doctor. This is to ensure proper management.

REFERRALS

A re-referral may be requested by telephone. New referrals require that the patient be seen by the doctor. Referrals cannot be back-dated. Referrals have a currency of twelve months, please check with your specialist to see if your referral is still current.

ETHICS

This practice abides by the AMA Code of Ethics at all times. A copy of the code is available on request.

LONG CONSULTATIONS

Long consultations are available on request for all Doctors if required. We recommend the following, **Dr C McGrath** requires 30 mins for a "Well Woman's Check". **Dr F Kotai** requires 60 mins for an Aviation medical. All Health Assessments require 30 mins. Failure to attend appointments will attract a fee of \$30.00.

ONLINE APPOINTMENTS

Online appointments can be made any time of the day at www.gfmc.com.au click on "Make a booking".

BILLING

We are a private practice and payment is made on the day. A discount of \$5.00 is given for payment on the day. We can claim your rebate immediately from Medicare using Easyclaim onto your cheque or savings card or Online Claiming where Medicare deposits direct to your bank account within 48 hrs. Questions related to fees can be dealt with by the receptionist. If you have difficulty paying your account, please feel free to discuss this matter with your doctor.

FEEDBACK

We would like to know of any concerns you may have about the care you receive.

Please feel free to talk to the doctor or our Practice Manager. However, if you feel there is a matter you wish to take up outside, you can contact the Health and Disability Services Complaints Office (HaDSCO): GPO Box B61, Perth WA 6838. Tel: 9323 0600.

PHONES CALLS

Doctors in this practice may be contacted by phone during surgery hours. A message will be taken if the doctor is with another patient.

MISSED APPOINTMENTS

If you miss an appointment and fail to advise us at least 2 hours beforehand you will be charged a Failure to Attend Fee. This fee applies to everyone and cannot be claimed back at Medicare.

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.