

**FREE!!**  
TAKE ME HOME



**YOUR  
DOCTOR** 

**JANUARY 2017**

## GLEN FORREST MEDICAL CENTRE



4 Hardey Road  
Glen Forrest 6071

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W: [www.gfmc.com.au](http://www.gfmc.com.au)

**Dr Frank Kotai**  
MBBS (WA)

**Dr Liz Wysocki**  
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**Dr Carol McGrath**  
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**Dr Alina Harriss**  
MBBS

**Dr Mark Daykin**  
MB ChB(UK) MRCGP (UK) FRACGP

**Dr Siobhain Brennan**  
MBBS

### 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.

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 surgery 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.



## A PICTURE TELLS A THOUSAND WORDS

Childhood is an important stage of life for learning and development.

It's the time when habits, both good and bad, are formed, and attitudes towards different aspects of life are developed. Parents and caregivers play a substantial role in influencing a child's development. This is particularly relevant when it comes to food and mealtimes.

Children can be notoriously fussy when it comes to eating healthy foods, particularly vegetables, and it is up to parents to encourage these healthy behaviours and attitudes early on in life. Parents' jobs are made more difficult by the wide array of junk food advertising children are exposed to through television, movies and social media. It is difficult to control exposure to this marketing, therefore it's up to parents to come up with creative ways to combat this.

Time and knowledge can be two factors limiting parents' ability to encourage their children to make the best choices when it comes to food. This has led researchers to look into other ways that children can be exposed to and encouraged to form positive and healthy food attitudes. One such approach that has been investigated is through children's picture books, looking at whether these can help model positive food habits and behaviours.

Researchers analysed a selection of picture books published between 2000 and 2016. The books were all targeted to children aged between four and eight years old. Each book was analysed for any themes and patterns relating to dietary behaviours.

They found that half of the books featured a specific type of eating behaviour.

Around 20% featured lifestyle and eating patterns and 20% featured food-related sensations and emotions. Table manners were a theme in 9% of the books. The eating patterns featured involved nutritional variety and balance, overall health and mindfulness. Other themes include unhealthy eating, weight management and special diets for different allergies.

The researchers concluded that while dietary behaviours are common in children's books, those promoting healthy eating are in short supply. They also found that the stories often involved an adult and child interacting over food behaviours and that some books contained outdated and factually incorrect information.

Children's books are not a substitute for parents in shaping healthy behaviours in children. They can, however, play a helping hand in getting the message across in an engaging way that children are likely to respond to. Just ensure that the books are factually correct and up to date before reading them to your child.

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Reference: Matvienko O. Qualitative analysis of dietary behaviors in picture book fiction for 4- to 8-year-olds. *Journal of Nutrition Education and Behavior* 2016;48:602-608.

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## DID YOU KNOW? YOU CAN FIGHT THE 'OBESITY GENE'

Overweight and obesity are largely lifestyle driven, promoted by lack of physical activity and 'Western' diets high in salt, sugar and saturated fats.

There is a genetic component to obesity, but this is often overstated, and does not doom someone to a life of overweight or obesity. Nearly 100 gene variants have been linked to changes in body weight, with one standing out as having a stronger association with changes in weight. This gene is called the FaT mass and Obesity-associated (FTO) gene and it explains the largest amount of genetic variation in obesity traits over a person's lifetime.

A person who has two copies of the FTO gene has about 70% increased likelihood of becoming obese compared to someone without the gene. This has left some people with this gene wondering if weight loss will be close to impossible. A European research team tested this assumption.

The team analysed eight weight loss trials that involved around 10,000 people. These studies included the FTO status of each person. At the beginning of the weight loss intervention, participants with the FTO gene were on average 1kg heavier than those without it. Following that, however, the analysis showed that the ability to lose (or not lose) weight over the course of the intervention was not related to whether or not someone had the FTO gene. The researchers highlighted that the successful strategies used in these studies would help people lose weight in the long term regardless of whether or not they had this gene.

This research suggests that it's environment, not genetic predisposition, that's likely to have the largest impact on a person's ability to lose weight. Even those with a higher genetic risk of overweight and obesity were able to lose weight when following interventions correctly. The hardest part of weight loss, the researchers highlighted, was the ability to stick to the healthy lifestyle changes for the long-term.

This does not mean that weight loss is easy – it's not – but it does mean that regardless of your genetic predisposition you can get fit and healthy with hard work and long-term adherence.

Reference: Livingstone K et al. FTO genotype and weight loss: systematic review and meta-analysis of 9563 individual participant data from eight randomised controlled trials. *BMJ* 2016;354:i4707.

## FLU VACCINE: A WORTHWHILE PRECAUTION

The Australian Government recommends that the annual seasonal influenza vaccination be given to "any person aged six months and over who wishes to reduce the likelihood of becoming ill with the flu".

Seasonal flu comes with a substantial health burden increasing risk of illness and death, particularly in vulnerable populations such as the elderly or diseased. For example, influenza may hasten vascular events in patients with heart disease.

Despite this increased risk, there remains some uncertainty around the degree to which flu immunisation can protect groups at high risk of infection. Furthermore, concerns have been raised about giving the flu vaccine to groups such as the elderly or those with chronic conditions, which might impair the immune response to the vaccine. Given that this group may be particularly vulnerable to the negative health outcomes associated with flu infection, more research is needed to investigate vaccine efficacy in this group.

Researchers analysed the effectiveness of the seasonal flu vaccine against a range of outcomes in people with type 2 diabetes. Records were analysed for adults

with type 2 diabetes. Outcomes included hospital admissions for heart attack, stroke, pneumonia, heart failure and all-cause death. Nearly 125,000 people with type 2 diabetes were included in the study.

Seasonal influenza vaccine uptake ranged from 63 – 69% in the study population. The results showed that flu vaccination was associated with significant reductions in all these outcomes during the flu season. Immunisation was also associated with lower rates of most outcomes during the pre and post-flu seasons.

This study suggests that the flu vaccine might be a useful precaution for people with type 2 diabetes to reduce risk of hospitalisation due to a variety of events. Further research is required to assess whether these results apply for other chronic conditions.

Talk to your doctor about what conditions you have should you be concerned about getting vaccinated.

Reference: Vamos, E et al. (2016). Effectiveness of the influenza vaccine in preventing admission to hospital and death in people with type 2 diabetes. *CMAJ*. DOI: 10.1503/cmaj.151059.

*Clever*  
**CROSSWORD**

ANSWERS CAN BE FOUND IN THIS  
EDITION OF YOUR DOCTOR.  
SOLUTION IS ON THE BACK PAGE.

**DOWN**

- Provides free and confidential support.
- Research suggests that this is likely to have the largest impact on a person's ability to lose weight.
- Athletes use them as fuel for competition.
- A national youth mental health foundation.
- It can reduce the likelihood of becoming ill with the flu.
- It tells a thousand words.
- If you experience mental health issues it's important that you don't suffer in this way.

**ACROSS**

- Extract of this is extremely popular on the shelves in your local pharmacy.
- A type of rice noodle.
- An important stage of life for learning and development.
- May hasten vascular events in patients with heart disease.
- High job insecurity was associated with an increased risk of this.

## NUTRITION

# GI NOT THE STAR FACTOR FOR SPORTS PERFORMANCE

Athletes have long turned to carbohydrates to provide them with fuel for competition.

Particularly for endurance athletes, carbohydrates act as a fuel source for hard working muscle. Advice for athletes has long been to 'carb load' pre-race as well as post-race. Pre-race carbohydrate fuelling ensures that body stores are optimal and can be called upon during the race.

Not all carbohydrates have the same fuelling capacities and nutrient content. This is where the concept of Glycaemic Index (GI) has attracted attention. High GI foods are digested and absorbed quickly and the glucose from the food is more rapidly available in the bloodstream. High GI foods include mashed potato, jasmine rice, bananas and cornflakes.

Low GI foods do the opposite and include foods like red lentils, muesli and yoghurt. In theory, eating low GI foods before competing would be a good thing, providing a slow-releasing form of glucose into the body that can be used during the race. Low GI carbohydrates can also prevent rapid peaks and falls in blood glucose and insulin. While this is good in theory,

researchers have put low GI foods to the test in real-world experiments to see if they really do translate to improved performance for athletes.

Researchers looked at 19 trials involving nearly 200 active and fit regular exercisers. They found no clear benefit in participants consuming low GI meals pre-exercise for performance in endurance sports. There was a small benefit associated with consuming a low GI meal pre-exercise if no carbohydrates were consumed during the race, however, this was not statistically significant.

This research suggests that the GI content of a food isn't the miracle worker that it is sometimes portrayed to be when it comes to fuelling athletes for endurance sports. Results from this analysis suggest that the GI content of a meal should come secondary to choosing foods that an athlete is comfortable with and are practical to consume pre, during and post race.

Reference: Burdon CA et al. Effect of glycemic index of a pre-exercise meal on endurance exercise performance: a systematic review and meta-analysis. Sports Medicine Epub online September 28, 2016. doi: 10.1007/s40279-016-0632-8.

## MYTH VS FACT

# IS JOB INSECURITY A RISK FACTOR FOR DIABETES?

Economic instability is often followed by an increase in unemployment rates.

Downsizing in companies along with redundancies leads to an increase in unemployment and in the prevalence of temporary workers and casual contractors.

Job insecurity can have a profound effect on a person's economic and social circumstances and can increase risk of mental ill health like anxiety and other mental health conditions. Research has found that job insecurity is associated with negative physical health outcomes like heart disease.

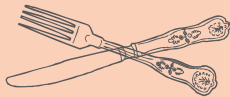
Type 2 diabetes is largely a lifestyle driven condition, which has become increasingly common in recent years. Known risk factors for type 2 diabetes include poor diet and lack of physical activity. Job insecurity has been found to be associated with increases in body mass index (BMI), which is a strong risk factor for diabetes, and this has led some researchers to hypothesise that there may be an association between job insecurity and type 2 diabetes.

Researchers analysed data from 19 studies that included a combined total of more than 140,000 people. Job insecurity was measured at the beginning of all studies, with some studies also asking about levels of insecurity, satisfaction with job security and fears of unemployment.

The primary outcome was the incidence of diabetes. High job insecurity was associated with an increased risk of diabetes compared with low job insecurity. The rates of job insecurity ranged between 6.3% to 40.3% across the studies. The results of this analysis suggest that job insecurity may be a risk factor for diabetes. Being insecure about ongoing employment and associated financial concerns, can also have detrimental effects on overall quality of life.

If you are finding yourself worried about your work on an ongoing basis, to the extent that it's interfering with your everyday life or health, don't suffer in silence. Talk to your employer or a healthcare professional for support.

Reference: Ferrie, J et al (2016). Job insecurity and risk of diabetes: a meta-analysis of individual participant data. CMAJ DOI: 10.1503/cmaj.150942.



## Good Health on the Menu

### VEGETARIAN RICE PAPER ROLLS

*Try this deliciously fresh, low GI snack that's perfect for summer entertaining.*

#### Ingredients

- 80g Vermicelli rice noodles
- 1 carrot, finely grated
- 1 cucumber, finely sliced
- ½ red capsicum, finely sliced
- 1 cup shredded Chinese cabbage
- Coriander leaves – whole
- Mint leaves – whole
- Rice paper wrappers



#### Method

- Place Vermicelli rice noodles in a bowl of boiling water for 5 minutes or until soft.
- Drain noodles, and cut them into shorter lengths – approximately one third of their original size.
- Place noodles, vegetables and herbs in a bowl and toss to combine.
- Place 1 sheet of rice paper in warm water until it softens.
- Place softened sheet of rice paper on a board.
- Spoon 1/3 cup of vegetable filling horizontally across the lower part of the sheet.
- Fold the bottom end of the sheet over, followed by the sides, then roll up tightly.
- Repeat for remaining sheets and mixture.

For extra flavour, serve with a small bowl of reduced salt soy sauce for dipping.



Dr Norman Swan  
**A MATTER OF HEALTH**



## CRANBERRIES FOR YOUR BLADDER?

A glance around the shelves in your local pharmacy will tell you that cranberry extract is extremely popular.

It's mostly used by women when they have cystitis or a urinary infection, but a recent randomised trial suggests you might be best saving your money. The history of cranberry is quite old and stems from North America where Native Americans used cranberries for a variety of sources for thousands of years.

When it comes to urinary infections, there is little evidence that cranberry extracts can get rid of the germs but they may help to relieve some of the symptoms while antibiotics attack the cause.

That leaves the question for women who have recurrent cystitis of whether cranberry extract can help to prevent future infections and that's what this recent trial tried to answer.

The active ingredients in cranberries are called proanthocyanidins and they used extract at a dose of 72mg per day in the year long study. Unfortunately the extract didn't prevent urinary infections.

This doesn't mean that women who find that cranberry extracts help, should stop using them, but it does mean that if you have cystitis then you need to see your doctor.

## A HELPING HAND AT HEADSPACE

Headspace is a national youth mental health foundation designed to improve the mental health and wellbeing of young people in Australia.

Headspace began in 2006 with 10 centres around Australia and has grown to around 93 centres. It offers a variety of services designed to provide early assistance and treatment to young people with mental health conditions or at risk of developing mental disorders. **headspace** services are provided either free or at a very low cost.

Services provided include Cognitive Behavioural Therapy (CBT) – a type of psychotherapy that assists people in developing self-help strategies to change unhelpful and unhealthy habits, behaviours and ways of thinking – interpersonal psychotherapy, psychoeducation, mindfulness-based therapies, and access to good quality evidence-based information and a range of healthcare professionals. Researchers evaluated the effectiveness of **headspace** services in reducing psychological distress and improving psychosocial functioning in its clients.

People presenting at **headspace** were assessed before their 1st, 3rd, 6th, 10th and 15th visits and at their follow up appointment. The primary concern that they initially presented with was recorded, in addition to the treatment services they received and the outcomes in terms

of psychological distress and overall psychosocial functioning.

The most common mental health problems people presented with at their initial visit to **headspace** were depression and anxiety. The most common treatments received were CBT, supportive counselling and psychoeducation. The results showed that psychological distress was significantly reduced in more than a third of people for whom data was available. Clinician ratings of psychosocial functioning suggest that psychosocial functioning was improved in more than a third of people.

The results of this study suggest that **headspace** is effective in improving mental health outcomes in young people with mental health conditions. Other research has found that this service is acceptable to young people. Early intervention in mental health has the potential to improve long-term outcomes and quality of life, and reduce the risk of long-term mental health related disability.

If you experience mental health issues it's important that you don't suffer in silence. There are good quality, affordable treatments available for young people through services like **headspace** that you can access to help you get back on track. Visit the website [www.headspace.org.au](http://www.headspace.org.au) for more information.

If you are experiencing mental health problems, Lifeline provides free and confidential support, phone 13 11 14.

Reference: Rickwood, D et al. (2015). Changes in psychological distress and psychosocial functioning in young people accessing headspace centres for mental health problems. MJA, 10, 537 – 543. doi: 10.5694/mja14.016696.



## 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](http://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.

## CROSSWORD SOLUTION

- Down  
1. LIFELINE 3. ENVIRONMENT 4. CARBOHYDRATES 5. HEADSPACE  
6. VACCINE 8. PICTURE 10. SILENCE
- Across  
2. CRANBERRY 7. VERMICELLI 9. CHILDHOOD 11. INFLUENZA  
12. DIABETES