



Memory Loss



Urinary Incontinence



How to manage stress



Drug-induced liver injury

● PRACTICE DOCTORS

**Dr Myrna Jover**  
MD, FRACGP  
Awarded GP of the Year 2012  
Illawarra/Shoalhaven Area

**Dr Neill Jover**  
MD, FRACGP

**Dr Verman De La Cruz**  
MD, FRACGP

**Dr Gary Fisher**  
MBBS, FRACGP D.(Obst), RCOG, Dip.RACOG

**Dr Michael Petinga**  
MBBS, FRACGP

**Dr Priya Shroff**  
MBBS

**Dr Jamie Mercado**  
MBBS

**Dr Michelle Medenilla**  
MBBS

**Dr Samia Shawkat**  
MBBS

● PRACTICE NURSES  
Beverley – Awarded Highly  
Commended Nurse of the Year 2012  
Margaret, Matthew, Cherry & Debbie

● RECEPTION STAFF  
Hannah, Krystal, Melinda, Mikayla,  
Vanessa, Cherry, Robin, Katie &  
Debbie

● SURGERY HOURS  
Monday – Friday..... 8am – 6pm  
Saturday ..... 8am - 12pm  
Sun & Public Hols..... Closed

● AFTER HOURS & EMERGENCY  
For after hours consultations call:  
Wollongong Radio Doctor:  
**4228 5522**

In case of an emergency dial: **000**

● BILLING ARRANGEMENTS  
**Mixed Biling Practice.**

Please bring your Medicare  
and concession cards to your  
appointment.

Private medicals are charged at AMA  
rates.

Payment at the time of consultation  
for non-Medicare card holders can be  
made by cash or EFT.

▶ Please see the Rear Cover  
for more practice information.

● SPECIAL PRACTICE NOTES

**Our practice philosophy** is to provide thoughtful medical care to families by keeping up-to-date with medical innovations and bringing you efficient personal service.

Our practice **has been selected by the** University of Wollongong's Graduate School of Medicine to help train senior (phase 3) medical students. Each July a new student will join our practice team for a 12 month placement. The student will participate in the delivery of care to consenting patients under supervision. For example he or she may conduct a consultation, prior to the doctor's arrival. The student may complete a pre immunization check on children, administer influenza vaccinations over 65 year olds, take part in patient education and health screening, and be an extra pair of hands in emergencies.

**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.

**Patient Feedback.** We would like to hear about your concerns, complaints or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer to make your concerns known outside the surgery, you can call the Health Care Complaints Commission on **(02) 9219 7444 or 1800 043 159.**

**Telephone advice.** Most problems are best dealt with in consultation. A doctor is available during normal surgery hours for **emergency** advice. Our staff are experienced in deciding the appropriate response to any phone request.

**Test results.** It is your responsibility to ensure you follow-up test results, particularly when practice staff or your doctor stress that you do this. Ask reception staff about the best way to go about it.

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

● APPOINTMENTS

**Consultation is by appointment.** Urgent cases are seen on the day.

**ONLINE APPOINTMENTS AVAILABLE.** Please visit our practice at [www.imsberkeley.com.au](http://www.imsberkeley.com.au) or the Hotdoc website.

**Home Visits.** Doctors at this practice make home visits at their discretion.

**Booking a long appointment.** This is important for more complex problems – insurance medical, health review, counselling, a second opinion. Please bring all relevant information. Please notify us if you are unable to attend an appointment, well in advance. If more than one person from your family wishes to see the doctor at the same time, please ensure a separate appointment is made for each family member.

**This is a family owned AGPAL Accredited Practice.**

**We provide a comprehensive family medical service – quality care in a friendly, relaxed atmosphere.**

**Practice doctors are experienced in a broad range of health problems affecting all age groups.**



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](http://www.healthnews.net.au)

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# Memory Loss

What worries most people about getting older is the prospect of memory loss. The good news is that while the total number of people with dementia is increasing, the percentage of the population is declining. Work over the last three decades shows that as each cohort gets older, fewer people are being diagnosed with dementia.

There are a number of causes. Alzheimer's Disease is the most common. Risk factors include family history, past trauma to the head (especially repeated concussions), smoking and alcohol consumption to excess. The condition generally comes on slowly. It is worth noting that, occasionally, forgetting where you put your keys is not the first sign. Diagnosis is largely on assessing mental state through a questionnaire. A CT or MRI scan may be done to assess the brain. Certain changes are typically seen in Alzheimer's.

Blood tests are done to rule out treatable conditions that can impact memory (e.g., underactive thyroid, certain infections, kidney or liver diseases). Any underlying secondary cause can be treated accordingly. There is no treatment as such for Alzheimer's. Medications available only slow progression and not always even that. The key is practical support for the individual and carers. Talk to your GP about available services and getting adequate support.

According to the WHO, certain lifestyle factors can reduce the chances of memory loss. Physical exercise, adequate sleep, a sensible diet keeping the brain active, avoiding smoking and consuming only moderate alcohol, and controlling blood pressure and blood sugar all help.



More info »

## Urinary Incontinence: Tips to manage the problem

The inability to control one's bladder is a silent problem; people do not talk about it. Yet it affects an estimated 13% of Australians, including 37% of women.

Stress incontinence is when urine leaks in relation to movement or any pressure in the pelvis. Urge incontinence is when you need to go quickly to the toilet on feeling the need. Few raise the issue with their GP due to either embarrassment, a belief that it is "a normal part of life", or that nothing can be done.

It is not a normal part of aging; you do not need to be embarrassed, and there are ways to prevent and manage it.

Risk factors include pregnancy, obesity, recurrent urinary infections, certain types of surgery (e.g. prostate), constipation and some medications. Step one is to raise it with your GP. Some tests may need to be done to rule out secondary (e.g. diabetes) medical causes. You may require referral to a urologist and/or be sent for urodynamic testing (testing the bladder function).

General preventative tips include spreading fluid intake (minimizing alcohol and caffeine) throughout the day, exercising regularly, and maintaining a healthy weight.

For women after childbirth, pelvic floor exercises are critical. Talk to your GP or physio about this. Bladder training is very effective once any secondary causes are excluded or treated. Programs are run through Continence Australia and some physiotherapists. In the short term, planning your day is helpful. There is also a range of products to get around the problem.

The first step is the most important- raise it with your GP.



More info »



# How to manage stress in a busy life

The last few years have been highly stressful for many people. Stress is regarded as the scourge of the 21st century. Everyone feels stressed at some stage. Relationships, money and work, are consistently shown in polling to be the big three.

Our body reacts to stress today like it did in caveman days. It goes into fight or flight mode by releasing hormones like adrenalin and cortisol, which were very helpful when the threat had a physical solution and would be over soon (for better or worse). It is not so helpful with the type of stressors we face today.

However, there is much we can do to manage stress. Regular exercise is a great stress beater. It can be as simple as going for a walk. Listening to calming music and doing slow, deep breathing or guided meditations can be helpful. There are many apps that are designed to help people deal with stress, and many are free. Drinking herbal tea helps some people, as does keeping a journal or writing things down. Drink mainly water and do not drink alcohol to excess. Try to minimise sugar in your diet. Taking a short break, if possible, may help.

Ultimately, dealing with what stresses you is the key. Remember, you don't always have to do this alone. For many, chatting with your GP or a counsellor can be beneficial, as can talking with trusted friends or family. Others may see solutions that you don't.

Stress can lead to mental health problems, so see your GP if you have any concerns.



## Drug-induced liver injury

The liver can be injured by many prescriptions, over-the-counter and herbal medications, as well as some dietary supplements. Usually, the damage is mild and reversible.

However, drug-induced liver damage accounts for 20% of liver transplants for liver failure in Australia.

There may be no symptoms. You may experience nausea, abdominal pain, itching or jaundice (yellowing of the skin). Blood tests will show the extent to which the liver has been affected.

It is vital to disclose to your doctor what medications you have been taking, including any non-prescription medications, supplements and herbal formulations. Sometimes, the combination is the problem. People with pre-existing liver disease are at greater risk, as are those with fatty liver, cirrhosis or alcohol-related liver damage.

Any new symptoms commencing after you start a new medication should be reported to your doctor. Though most side effects of medications are mild and self-limiting, not all are.

You may require testing, need to cease the medication and be advised to avoid that medication in the future. Some may require treatment with steroids.



## Gestational Diabetes

Gestational Diabetes is a condition where women without previously diagnosed diabetes have raised blood glucose (sugar) during pregnancy. Some are thought to represent previously undetected cases of type 2 diabetes. It is most common in the third trimester and affects an estimated eight to ten per cent of pregnancies.

There are generally no symptoms. It is diagnosed via a blood glucose tolerance test (GTT) between weeks 24 and 28.

Risk factors include being over 40, being overweight or obese, a family history of diabetes, gestational diabetes in a prior pregnancy and a history of polycystic ovarian syndrome.

The health of the mother and baby are improved by good sugar control. The key is lifestyle measures. This means controlled weight gain during pregnancy and eating a diet rich in vegetables and low in processed high-sugar foods. Regular exercise, such as walking, also helps control blood sugar. Some women may need oral medications or insulin to help control sugars.

After giving birth, breastfeeding seems to help reduce weight and blood sugar. All women with GDM are advised a follow-up GTT between six and 12 weeks after delivery. There is a 50% risk of developing type 2 diabetes in the pursuant 20 years, so regular testing is recommended.



More info »



## CHICKEN, BROCCOLI AND CASHEW STIR FRY

### Ingredients

- 450g pkthokkien noodles
- 1 tbsp peanut oil
- 500g Chicken breast, thinly sliced
- 1 large red onion, cut into wedges
- ½ red capsicum cut into 1 inch pieces
- 2 tsp minced garlic
- 2 tsp crushed ginger
- 1 head broccoli, cut into florets, stem halved lengthways and thinly sliced
- 1/3 cup (80ml) your favourite brand of oyster sauce
- 1/2 cup (75g) unsalted cashews, toasted

### Method

1. In a bowl marinate chicken pieces with 1 tablespoon oil, 1 tablespoon of cornstarch, 1 teaspoon of soy sauce and ½ teaspoon of sugar. Mix well and set aside for 30 minutes refrigerated.
2. Cook the rice following the directions on the packet and set aside.
3. Heat oil in a wok or large frying pan over high heat and stir fry the chicken. Do this in batches if necessary and transfer to a plate.
4. In the pan add oil, onion, capsicum, garlic, ginger and the broccoli and stir fry until broccoli is tender. Return chicken to the pan.
5. Add Oyster Sauce with ¼ cup water and cashews. Stir fry until heated through and the sauce starts to thicken. Serve with rice.

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LIFESTYLE  
DAMAGE  
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LIVER  
HEALTH  
BLOOD  
TEST  
HISTORY  
FAMILY  
OBESITY  
DRINK  
WATER  
MANAGE  
CAUSE  
DRUG  
DOCTOR

WORD SEARCH



### • OTHER SERVICES

- Accident & Emergency Care
- Antenatal Care
- Dietitian
- Berkeley Pharmacy next door
- Clinical Psychologist
- Podiatrist
- Women & Men's Health
- Mental Health
- Immunisation
- Medicals e.g. Driving, Seaman's
- Exercise Physiologist
- Psychologist
- Pathology on site
- Physiotherapist
- Minor Surgery
- Wheelchair access is available
- Skin Cancer Clinic – e.g. Mole check
- Aged Care Facilities – we visit the local nursing homes and hostels
- Travel Medicine (Accredited Yellow Fever Vaccination Centre)

### • SPECIAL PRACTICE NOTES

#### Medical record confidentiality.

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.

**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.

