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Winter 2018 Newsletter

Cardiopulmonary resuscitation (CPR)

A skill everyone should learn

Always call triple zero (000) in an emergency.

- Cardiopulmonary resuscitation (CPR) combines mouth-to-mouth resuscitation and cardiac compressions to deliver oxygen and artificial circulation to an unresponsive person until medical help arrives.
- Cardiac or chest compressions are the priority in CPR. If you don't want to do mouth-to-mouth, chest compressions alone may still be life-saving.
- **CPR is a life-saving skill that everyone should learn.**

Please Remember: Serious emergencies belong in an emergency department. This clinic does not have the equipment or specialised skills to provide treatment in a serious emergency

Flu Vaccine 2018

This has been an unprecedented year for flu vaccinations.

At this date (mid June) we still have stock of :-
*Quadrivalent Private Flu Vaccine,
*Limited stock of free Flu Vaccine for those with chronic disease, pregnancy, ATSI, & under 5 years of age.
Paediatric Flu Vaccine (children under 3 years)

*Our stock of free Flu Vaccines for the 65+ age group are now almost at an end. The Health Department have informed us (14/6/2018) there are now no more supplies of these vaccines (FluZone & FluAd) available. Once the last of our vaccines has been given we can only offer the quadrivalent (standard dose) vaccine for patients in the 65+ age group.

Measles

Summary

- Measles is a very contagious viral illness that causes a skin rash and fever.
- Measles can cause serious, sometimes fatal, complications including pneumonia and encephalitis. Measles is rare in Australia because of the widespread use of the measles vaccine but vaccination is important because people coming from overseas can carry

Symptoms of measles

The signs and symptoms of measles may include:

- fever
- general discomfort, illness or lack of wellbeing (malaise)
- runny nose
- dry cough
- sore and red eyes (conjunctivitis)
- red and bluish spots inside the mouth (Koplik's spots)
- red and blotchy skin rash that appears first on the face and hairline, and then spreads to the body.

Complications of measles

Possible complications of measles include:

- otitis media – inflammation of the middle ear
- diarrhoea and vomiting – may cause further complications such as dehydration
- respiratory infections – such as bronchitis, croup or laryngitis

- pneumonia – a type of lung inflammation that causes about 60 per cent of measles deaths
- pregnancy problems – if a pregnant woman contracts measles, she risks miscarriage or premature labour
- encephalitis – or brain inflammation, affects about one person with measles in every 1000. About 10 to 15 per cent of people with encephalitis die and 15 to 40 per cent of survivors have permanent brain damage to varying degrees
- subacute sclerosing panencephalitis (SSPE) – occurs in about one in every 100,000 cases of measles. SSPE is an extremely rare progressive inflammation of the brain that causes brain degeneration and is always fatal. SSPE usually begins about seven years after the measles infection.

The Australian Government is expanding My Health Record for all Australians in 2018.

By the end of 2018, a My Health Record will be created for every Australian unless they choose not to have one.

Every week, the Australian Digital Health Agency publishes a range of statistics about how My Health Record is being used by healthcare provider organisations and consumers. The statistics include information about registrations, document uploads and prescription/dispense documents being recorded.

How can I opt out?

If you decide that you don't want a My Health Record created on your behalf, you will have the opportunity to tell us during a three-month period.

This period will run from 16 July to 15 October 2018. It's not possible to opt out of having a My Health Record before this period starts on 16 July 2018.

My Health Record Statistics
as at 10 June 2018

Australian Government
Australian Digital Health Agency

My Health Record

Consumer Statistics

5,855,667 Consumers registered

Demographic Breakdown	54% are female			46% are male			

Age Range	Aged 19 or less	Aged 20-39	Aged 40-64	Aged 65 or higher
% of total registrations	36%	24%	25%	15%

State	ACT	TAS	SA	NT	NSW	VIC	QLD	WA
% of population	27%	24%	22%	25%	25%	19%	31%	20%

Approximately 24% of Australia's population is registered for a My Health Record

Provider Organisation Statistics

12,476 Healthcare provider organisations registered

Organisation Type*	Count
General Practice Organisations	6,422
Public Hospitals and Health Services	802
Private Hospitals and Clinics	178
Pharmacies	2,974
Aged Care Residential Services	186
Pathology and Diagnostic Imaging Services	52
Other categories of healthcare providers including Allied Health	1,510
Organisations with a cancelled registration	352

*Organisation type based on Healthcare Provider Organisation (HPI-O) data, except for Hospital provider data which is based on jurisdictional reported facilities that are connected to the My Health Record system.

My Health Record Usage

Clinical Document Uploads	6,070,748
Shared Health Summary	1,814,267
Discharge Summary	1,912,434
Event Summary	583,997
Specialist Letter	83,208
eReferral Note	74
Pathology Reports	1,542,021
Diagnostic Imaging Report	134,747

Prescription and Dispense Uploads	20,230,322
Prescription Documents	15,811,801
Dispense Documents	4,418,521

Consumer Documents	175,076
Consumer Entered Health Summary	111,005
Consumer Entered Notes	44,764
Advanced Care Directive Custodian Report	17,178
Advance Care Planning Document	2,129

Medicare Documents	707,721,172
Australian Immunisation Register	2,323,743
Australian Organ Donor Register	620,078
Medicare/DVA Benefits Report	417,058,020
Pharmaceutical Benefits Report	287,719,331

Gas heating - health and safety issues

Summary

- Have your gas heater serviced by a licensed gas fitter at least once every two years.
- If you have your heater serviced regularly and use it correctly, it should be safe.
- When using a gas heater, always follow the operating instructions on the appliance or in the manual, if you have one.
- Health problems that seem to be worse or only occur when the heating is on may be caused by carbon monoxide from a faulty gas heater.

Gas heaters need to be professionally installed and properly looked after by a qualified gasfitter. An unsafe heater can cause a house fire or pollute your home with dangerous fumes. If you have your gas heater regularly serviced and use it correctly, it should be safe to use.

Some gas heaters have been identified as posing a serious health risk. The Department of Health and Human Services Victoria advises that you do not use a Vulcan Heritage or Pyrox Heritage gas heater in your home until they are tested by a qualified gasfitter.

Meningococcal Disease

- Meningococcal disease is uncommon but serious.
- It usually takes the form of a blood infection (septicaemia) or infection of the membranes covering the brain and spinal cord (meningitis).
- Immunisation against meningococcal bacteria provides good protection against meningococcal disease.
- Meningococcal vaccines are available to protect against disease strains A, B, C, W and Y.
- A free meningococcal C vaccination program is provided on the National Immunisation Program schedule for all babies at 12 months of age. A free catch-up dose is available for unimmunised people under 20 years of age.
- In Victoria, a free, time-limited meningococcal ACWY vaccination program for men who have sex with men commenced on 11 December 2017 and ends on 31 December 2018.
- In Victoria, a free, time-limited meningococcal ACWY vaccination program is available for secondary school students in Year 10 (or age equivalent not attending school) and ends 31 December 2018.

Meningococcal disease is caused by a bacterium called Neisseria meningitidis (also known as meningococcal bacteria). These bacteria are divided into 13 strains or 'serogroups' designated by letters of the alphabet such as A, B, C, W and Y.

Some people have meningococcal bacteria living naturally in their nose and throat. In a small number of people, a dangerous strain of the bacteria can become invasive and move through the lining of the throat, causing meningococcal disease (or 'invasive meningococcal disease').

Meningococcal disease usually takes the form of a blood infection (septicaemia) or an infection of the membranes covering the brain and spinal cord (meningitis). These infections can develop quickly and can cause serious illness or death. Early diagnosis and treatment with antibiotics are vital. Other less common forms of meningococcal disease include pneumonia, arthritis, epiglottitis, pericarditis and conjunctivitis.

Meningococcal vaccines are available to protect against disease strains A, B, C, W and Y.

Immunisation against meningococcal C is available for free in Victoria as part of the National Immunisation Program schedule for children at 12 months, and as a 'catch-up' vaccine for children from 13 months up to and including 19 years of age.

Until 31 December 2018, free meningococcal ACWY vaccinations are available in Victoria for:

- men who have sex with men
- secondary school students in Year 10 (or age equivalent not attending school).

The ACWY vaccine and the meningococcal B vaccine are also available for purchase and are recommended for people who are at high risk of these bacterial strains

Overview of meningococcal disease

Meningococcal bacteria live naturally in the back of the nose and throat in about 10 per cent of the population without causing illness. In a small number of people, a particular strain of the bacteria gets through the lining of the throat, enters the bloodstream and causes meningococcal disease.

The infection can develop very quickly. If infection is diagnosed early enough and the right antibiotics are given quickly, most people make a complete recovery. Even with antibiotic treatment, invasive meningococcal disease causes death in about five to 10 per cent of cases.

Most cases occur suddenly and are unrelated to any other cases. Outbreaks where more than one person is affected are rare. Although everyone is a carrier at some time, carriers are most common among young adults and people who smoke.
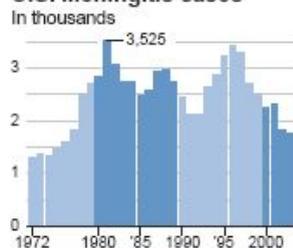
If you would like to discuss the vaccinations for meningococcal disease with one of our nurses, they would be please to assist and outline the various vaccines available and which ones are funded for each age group.
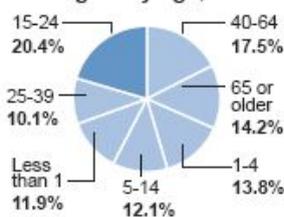
US data Graph from 2003

Meningitis cases

On average meningitis affects only thousands of people nationwide each year. People between the ages of 15-24 account for one fifth of all cases.

U.S. Meningitis cases
In thousands

Meningitis by age, 2003

15-24 — 20.4%
40-64 — 17.5%
25-39 — 10.1%
65 or older — 14.2%
Less than 1 — 11.9%
5-14 — 12.1%
1-4 — 13.8%

NOTE: 21 patients did not give their age

SOURCE: Centers for Disease Control and Prevention   AP


FRIDGEWATCHER.COM
we are what we eat

Food safety and storage

- Keep high-risk food at 5 °C or below or above 60 °C to avoid the temperature danger zone.
- Store raw foods below cooked foods.
- Store food in suitable, covered containers.
- Avoid refreezing thawed foods.
- Check and observe the use-by dates on food products.
- Take special care with high-risk foods.
- If in doubt, throw it out

Food poisoning is frequently caused by bacteria from foods that have been incorrectly stored, prepared, handled or cooked. Food contaminated with food-poisoning bacteria may look, smell and taste normal. If food is not stored properly, the bacteria in it can multiply to dangerous levels.
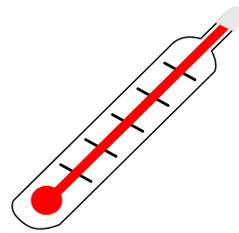
Beware of the temperature danger zone

Food-poisoning bacteria grow and multiply fastest in the temperature danger zone between 5 °C and 60 °C. It is important to keep high-risk food out of this temperature zone.

Take special care with high-risk foods

Food-poisoning bacteria can grow and multiply on some types of food more easily than others. High-risk foods include:

- raw and cooked meat, including poultry such as chicken and turkey, and foods containing them, such as casseroles, curries and lasagne
- dairy products, such as custard and dairy-based desserts like custard tarts and cheesecake
- eggs and egg products, such as mousse
- smallgoods such as hams and salamis
- seafood, such as seafood salad, patties, fish balls, stews containing seafood and fish stock
- cooked rice and pasta
- prepared salads like coleslaws, pasta salads and rice salads
- prepared fruit salads
- ready-to-eat foods, including sandwiches, rolls, and pizzas that contain any of the food above.
- Food that comes in packages, cans and jars can become high-risk foods once opened, and should be handled and stored correctly.

Your fridge temperature should be at 5 °C or below. The freezer temperature should be below -15 °C. Use a thermometer to check the temperature in your fridge.

Freezing food safely

When shopping, buy chilled and frozen foods at the end of your trip and take them home to store as quickly as possible. On hot days or for trips longer than 30 minutes, try to take an insulated cooler bag or icepack to keep frozen foods cold. Keep hot and cold foods separate while you take them home.

When you arrive home, put chilled and frozen foods into the fridge or freezer immediately. Make sure foods stored in the freezer are frozen hard.

Storing cooked food safely

When you have cooked food and want to cool it:

Put hot food into shallow dishes or smaller portions to help cool the food as quickly as possible.

Don't put very hot food into the refrigerator. Wait until steam has stopped rising from the food before putting it in the fridge.

Be a smart shopper

When grocery shopping, make sure to pick up dry foods and household goods first (e.g. canned foods, grains, cereals and personal items), next fruit and veggies, then finally any perishables – hot and cold items (e.g. meat, dairy, seafood). At the check-out, keep hot and cold foods in separate bags.

Hint: take cooler bags with ice bricks or an esky to store cold food while travelling home.

Curry - potato, pea and cauliflower

Ingredients:

- ☐ 1 tablespoon olive oil
- ☐ 1 chopped onion
- ☐ 2 cloves peeled and crushed garlic
- ☐ 2 teaspoons curry powder
- ☐ 1 teaspoon ground tumeric
- ☐ 1 teaspoon chilli paste
- ☐ 1 teaspoon ground coriander
- ☐ 1 cored and chopped green apple
- ☐ 500 g peeled and diced potatoes
- ☐ 1 cup fresh shelled peas
- ☐ 100 ml coconut milk
- ☐ 350 ml (1 cup) reduced salt vegetable or chicken stock
- ☐ 1/2 chopped into small florets head cauliflower
- ☐ Pepper and salt, to taste

☐ Add all ingredients

Add to shopping list

Cooking method:

1. Heat the oil in a saucepan over a medium heat and cook onion, garlic, curry powder, turmeric, chilli paste, and coriander together until onion is soft and the mixture is fragrant - about 2 minutes.
2. Add the apple, potato, peas, coconut milk and stock.
3. Reduce heat and simmer for 10 minutes.
4. Add the cauliflower and simmer for a further 5 minutes until sauce has reduced.