



YOUR HEALTH™

healthy advice from your family doctor

Winter 2022 Edition 102

Seasonal Affective Disorder	1
Children's Health: Eating Disorders	2
Men's Health: Testicular Cancer	2
Women's Health: Fertility Treatment	3
Learn about Hypothyroidism	4

LOCATION

Ballarat Community Health has four GP clinics located at:

12 Lilburne, Street, Lucas

Dr Jennifer CELESTINO
Dr Padma BHASKAR
Dr Fatin HANNA
Dr Muhammad HANIF
Dr Kevin CHOY
Dr Kemi FREEMAN

1042 Howitt Street, Wendouree

Dr Dilhani WITHANAGE DONA
Dr Shaun MOHAMMADSAEDI
Dr Kevin CHOY

260 Vickers Street, Sebastopol

Dr Arezoo KESHAVARZ
Dr Sumudu WARNAKULASURIYA

19 Heales Street, Smythesdale

Dr David ANDERSON

Telephone: 03 5338 4585
Facsimile: 03 5336 1613
Email: gpclinic@bchc.org.au
Web: www.bchc.org.au

HOURS

Our reception hours are 8.30 am to 5.00 pm Monday to Friday.

Appointments are scheduled 9.00 am to 5.00 pm Monday to Friday.

APPOINTMENTS

To make an appointment, you can call us on 5338 4585 or you can book online. Go to our website at www.bchc.org.au/service/doctors-clinic/

FEES

Patients with a current concession card and people under 16 will be bulk-billed. Non-concession card holders are private patients and need to pay their accounts on the day of the appointment. Cash and EFTPOS payments are welcome. Some procedures/services may attract a small additional fee. These fees will be discussed with you. If you don't have a Medicare card you will need to pay the full fee before you see the Doctor or Nurse on the day.

TELEHEALTH SERVICES

Telehealth services are available to all patients who have been seen in clinic over the last 12 months. If you have not had a face-to-face appointment within the last year, you will not be able to consult using telehealth services.

YOUR COPY — FREE TO TAKE HOME

Mental Health: Do you have the winter blues?



Seasonal affective disorder (also known as SAD) is a type of depression that comes and goes according to the season. Most people affected by SAD have winter-pattern SAD, where symptoms develop in autumn and winter and go away during spring and summer. However, a smaller number of people have summer-pattern SAD where they experience depressive symptoms during the warmer months.

The signs and symptoms of SAD are the same as those experienced by people with major depression, including feeling sad or down most of the time, losing interest in activities you previously enjoyed, having low energy levels, experiencing changes in appetite and weight, having difficulties concentrating, feeling hopeless, worthless or guilty, and having thoughts of no longer wanting to live.

Additional symptoms specifically associated with winter-pattern SAD include oversleeping, overeating and craving carbohydrate foods, weight gain and social withdrawal (wanting to 'hibernate'). Symptoms more commonly seen with summer-pattern SAD include difficulties sleeping, poor appetite and weight loss, restlessness and agitation and anxiety.

We are not yet sure of exactly what causes SAD. However, it is thought to be related to changes in sunlight at different times of the year which can lead to disruptions to the body's circadian rhythms (body clock) and changes in the production of melatonin and serotonin, hormones which affect our sleep and mood.

SAD is more common in women than men and in younger adults than older adults. It is also more common in those who live further from the equator, because of longer days of sunlight in summer and shorter days of sunlight in winter. Our temperate climate in Australia means we are less likely to develop SAD compared to people living in many other parts of the world. Having a history of major depression or bipolar disorder, and/or a family history of depression, may increase the risk.

If you have symptoms of SAD, it is important to see your doctor, who can help you with developing a treatment plan. Treatments may include:

- ▶ Light therapy, which involves being exposed to bright light from a special bright light box for a period of time (usually 30-60 minutes) in the morning
- ▶ Psychotherapy (counselling)
- ▶ Antidepressant medications
- ▶ Vitamin D supplements if you have low vitamin D levels

There are also things you can do yourself, including getting outside as much as possible, exercising regularly, making your house as light as possible during autumn and winter and sitting close to windows when you can.

• For more information visit: www.healthdirect.gov.au/seasonal-affective-disorder



Recipe

Creamy vegetable soup

Serves:	Preparation time:	Cooking time:
6	10 mins	20 mins

Healthy and warming, this creamy vegetable soup recipe is a delicious winter vegetarian meal option. It's a cholesterol and dairy free twist on the classic vegetable soup that will be a winner for busy families.

Ingredients

- 2 small carrots
- 2 celery stalks
- 1 red capsicum
- 1 small brown onion
- 2 cloves garlic
- 45g margarine
- 1/3 cup plain flour (50g)
- 1 tsp dried thyme
- 1/2 tsp dried oregano
- 2 cups water
- 3 tsp reduced salt vegetable stock powder
- 3 cups So Good™ Almond Unsweetened
- 1 cup small broccoli florets
- 1 cup whole corn kernels
- 1 cup frozen peas

Instructions

1. Finely dice carrots, celery, capsicum and onion. Crush garlic.
2. Melt margarine in a large non-stick saucepan on medium-heat, until bubbling. Add carrots, celery, capsicum, onion and garlic. Cook until tender (approximately 5 minutes). Stir in flour, thyme and oregano and cook for 30 seconds. Gradually whisk in water to form a thick sauce.
3. Whisk in stock powder and almond milk. Bring to a simmer, then add broccoli, corn and peas. Simmer gently for 10 minutes, stirring frequently, until broccoli is tender.
4. Season soup with salt and pepper to taste. Ladle into warm serving bowls.

Nutrition

PER SERVE: Energy 814kJ (195Cal), Protein 7.0g, Fat 9.0g (Saturated 3.0g), Carbohydrate 19g (Sugars 6.0g), Fibre 6.9g, Sodium 430mg, Potassium 404mg, Calcium 212mg, Iron 1.9mg.

© Recipe and image kindly provided by Sanitarium Health & Wellbeing Company.

Children's Health: Eating disorders in children — what to look out for

Eating disorders are a complex mental issue which also impact physical health. They can develop at any age, but most commonly begin during adolescence. While eating disorders are more common in girls, boys can develop them too and they often take longer to be diagnosed.

There are many types of eating disorder including anorexia nervosa, bulimia nervosa, binge eating disorder and avoidant restrictive food intake disorder (ARFID). Some children and teens may have disordered eating which doesn't fit any of these diagnoses, but this can still be serious and needs treatment or it may develop into an eating disorder.

While eating disorders are serious at any age, in young children, they can have long-term impacts on growth and development. They can also be a sign that a child is experiencing issues such as depression, teasing, bullying, or abuse. The eating disorder can be a way for a child to feel more in control of what is happening in their life.



Signs that your child might have an eating disorder include:

- preparing food for others, but not eating it themselves
- eating in private and avoiding eating with other people
- restricting food intake, including reducing portion sizes and cutting down on certain foods or excluding major food groups
- changes in clothing style (e.g. wearing baggy clothes)
- fluctuations in weight
- mood changes, including appearing anxious or irritable, especially around mealtimes
- avoiding social activities, particularly if they involve food
- going to the bathroom straight after meals
- overexercising, including while alone in their bedroom
- lacking energy or being tired all the time
- complaining about being cold, even in warmer weather
- irregular or absent periods in your daughter
- fainting or dizziness
- being sensitive to comments about body image, weight, eating and exercise habits

If you are worried about your child's eating habits, take them to see a GP or mental health professional as soon as possible. Early diagnosis and intervention increases the chance of successful and complete recovery. As a parent, it is also important to model healthy and balanced attitudes towards food, exercise, and body image.

Men's Health: What you need to know about

Testicular cancer is cancer that develops in one or both testicles. In most cases, only one testicle is affected. It is estimated that 980 Australian men were diagnosed with testicular cancer in 2021, making up about 1.2% of all new cases of cancer diagnosed in men. It most commonly occurs in men aged 25–40 years.

Most (more than 90%) of testicular cancers start in germ cells, the cells that develop into sperm. There are two main types of germ cell tumours: seminoma and non-seminoma. Seminoma tumours tend to develop more slowly than non-seminoma cancers, and usually in men aged 25 to 45 years. Non-seminoma tumours usually develop more quickly and are more common in the late teens and early twenties. Stromal tumours are much less common and start in the cells that make up the structural and hormone-producing tissue of the testicles. They are usually benign and are removed by surgery.

Risk factors for testicular cancer include:

- ▶ Undescended testicles as an infant
- ▶ Family history of testicular cancer in your father or brother
- ▶ Infertility
- ▶ HIV and AIDS
- ▶ Certain congenital defects, including hypospadias and inguinal hernia



Women's Health:

Understanding Fertility Treatment

Around one in six Australian couples have problems with fertility. Infertility is diagnosed when a couple has been unable to fall pregnant after having regular unprotected intercourse for a year.

There are many causes of infertility, including problems with ovulation (the release of an egg from a woman's ovary), fertilisation by a man's sperm and implantation of the fertilised egg into the lining of the woman's uterus.

Both men and women can optimise their fertility by aiming for a healthy weight, eating a healthy well-balanced diet, exercising regularly, avoiding alcohol and not smoking (including passive smoking) or taking recreational drugs.



However, if you have had unprotected sex for over 12 months without getting pregnant, talk to your doctor about having further investigations. This might include a pelvic ultrasound (to check the health of the ovaries, uterus and fallopian tube) and blood tests (to check hormone levels) for women, and a semen analysis (to check the number and health of sperm) for men.

Depending on the results of investigations, there are several options available to increase your chances of becoming pregnant. Fertility treatment might also be an option if you are in a same sex relationship or if you are single and would like a child.

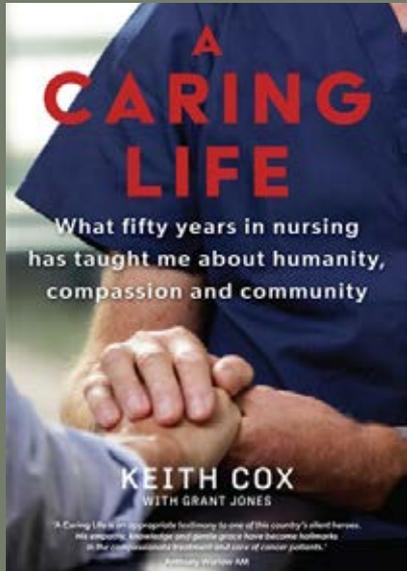
Fertility treatment options include:

- Ovulation induction using medications to improve ovulation. This is often the first line of treatment for women with polycystic ovary syndrome (PCOS) who have irregular or absent periods.
- Surgery to treat blocked or damaged fallopian tubes, endometriosis or fibroids.
- Intrauterine Insemination (IUI) which is also sometimes also called Artificial Insemination. This can be done using a partner's sperm or donor sperm, and involves inserting the sperm into the woman's uterus.
- IVF (in vitro fertilisation) involves removing eggs from the ovary, mixing them with sperm (from a partner or donor) and allowing the embryos to grow for a few days before transferring one into the woman's uterus. You can also freeze extra embryos to use in future IVF cycles. IVF can be used to help with many different fertility issues.
- Intracytoplasmic Sperm Injection (ICSI) can be used as part of an IVF treatment cycle and involves injecting a single sperm into each egg to assist with fertilisation. It is used when there is a problem with a man's sperm.

Dr.LoL:)



COMPETITION



Win a copy of *A Caring Life* courtesy of Pan Macmillan.

As a nurse for nearly fifty years, Keith Cox provided expert care and comfort to countless people facing the unimaginable.

With insight and sensitivity, *A Caring Life* takes us behind the scenes of his remarkable nursing career and the moving stories of hope, determination and loss that underpinned it. Along the way, he shares lessons gained from a career spent confronting mortality, from finding joy in difficult circumstances to understanding that true strength comes in thinking of others and being part of a community.

To enter visit us online at win.yourhealth.net.au

Competition opens 1st June 2022. The winning entry will be selected on 1st September 2022 and notified by email.

Testicular cancer

Symptoms of testicular cancer may include:

- ▶ swelling or a lump in a testicle, which is usually painless
- ▶ a change in the size or shape of a testicle
- ▶ a feeling of heaviness in the scrotum
- ▶ a feeling of unevenness between the testicles
- ▶ pain in the lower abdomen, back, testicle or scrotum
- ▶ enlargement or tenderness of breast tissue



Sometimes there are no symptoms at all. There are many other possible causes for these symptoms, but if you notice any lumps or changes in your testicles, it is important to see your doctor for further investigations. Early detection is the key to successful treatment, so self-checking your testicles regularly and seeking advice if you find any abnormalities is important.

Treatment for testicular cancer will depend on the type and stage of cancer (whether it is only in the testicle or has spread to other parts of the body). In some cases, surgery to remove the testicle may be all that is needed, while in other cases this may need to be followed by chemotherapy and/or radiation therapy. In most cases, testicular cancer can be successfully treated and it has the highest survival rates of any cancer, other than common skin cancers.

For instructions on how to do a testicle self-check visit: www.cancer.org.au/cancer-information/types-of-cancer/testicular-cancer

Children's Health

Hypothyroidism: symptoms, causes and treatment

Hypothyroidism, or an underactive thyroid, occurs when your thyroid gland doesn't make enough thyroid hormone.w

Your thyroid gland is found in your neck, at the base of your throat. It produces hormones (called triiodothyronine and thyroxine, or T3 and T4 for short) that help to regulate many of the body's metabolic processes.

Common symptoms of hypothyroidism include:

- feeling weak, tired and fatigued
- increased sensitivity to the cold
- unexplained weight gain
- brittle hair and nails
- thinning hair
- dry, rough and/or cold skin
- pale appearance
- joint and/or muscle aches and pains
- constipation
- poor concentration or memory
- a slow heart rate
- in women, irregular or heavier than normal periods
- low mood or depression
- having a hoarse voice
- goitre (an enlarged thyroid gland)

Many of these symptoms can occur for other reasons, so if you are experiencing symptoms of hypothyroidism, it is important to see your doctor so they can organise further investigations, including blood tests, to check your thyroid hormone levels.

In Australia, the most common cause of hypothyroidism is an autoimmune condition called Hashimoto's disease, which develops when the body's immune cells attack the thyroid gland. Other causes include surgery to remove the thyroid, radiation therapy, treatment for hyperthyroidism, certain medications and not having enough iodine in the diet. Secondary hypothyroidism is caused by problems with the pituitary gland, whose role is to produce thyroid-stimulating hormone (TSH) to signal the thyroid to produce thyroid hormones.

Hypothyroidism is treated with lifelong thyroid replacement medication. This is a synthetic (man-made) form of thyroid hormone (called thyroxine) given to replace the hormone your body is no longer producing. The dose needs to be carefully monitored and may need regular adjustment at the start of treatment to ensure the dose is right. Ongoing monitoring of your thyroid hormone levels is also important.

For more information, visit www.healthdirect.gov.au/hypothyroidism

DR KEMI FREEMAN, GENERAL PRACTITIONER

Dr Kemi Freeman received her doctor of medicine from St Matthew's University in Cayman Islands, 2009. She started practicing medicine in Australia at Latrobe Regional Hospital in 2015, and eventually transitioned into General Practice in 2017 at Manor Lakes Medical Centre. She has also worked as a psychiatry Medical Officer at Werribee Mercy Hospital.

Dr Kemi's special interests are:

- Women's health including Pap smear and Implanon insertion and removal immunization and Children's health.
- Mental health
- Preventative Counseling
- Chronic Disease Management
- Minor procedures like cryotherapy, Ear Syringing etc.

Appointments with Dr Kemi are now available at our Lucas site. To make a booking, please call us on 5338 4500.

