

GP Community Briefs

Keeping you up to date with the activities of the Northern Rivers Division of General Practice

August 2003

GPs return to Nimbin and Wardell

The opening of two new general practices to serve the communities of Nimbin and Wardell is great news in a region that has experienced difficulties in recruiting GPs to many of its smaller towns.

The practices have been established by the division, which recently received \$194,000 in State government funding to help establish GP services in a number of small community centres in the district.

"Many GPs have been discouraged from providing services in small towns because of the management and administrative burden of setting up practice," Dr Sue Page, GP executive manager of the division, said.

"We are delighted that both Wardell and Nimbin have general

practice services again. In Wardell, it has been seven years since the community last had a doctor practicing there."

Nimbin GP Dan Oxlee, who has worked

in the area for eight years, closed his practice at the end of May because of the permanent on-call and the burdens and expense of running a general practice alone where there were once three doctors.



Nimbin's surgery is back. Pictured on the verandah are Dr Dan Oxlee, practice manager Janet Carthew, practice nurse David Tibby and Dr Oscar Serrallach.

Dr Oxlee is pleased to be back in his old practice, this time without the stress of having to run the business. He joins colleagues Dr Jacqueline Boustany and Dr Oscar Serrallach. The Nimbin Medical Centre, 39 Cullen Street, is open Mon-Fri.

The Wardell Medical Centre opened in the Wardell Community Access Space at 9 Sinclair Street in July and a GP, currently Dr Ian Kingston, and practice nurse are available every Thursday.

The GP entity project is a result of a collaborative partnership

between the division, Northern Rivers Area Health Service, Ballina and Lismore councils and the community.

Bowl Cancer Over raises more than \$8000!

Bowl Cancer Over (BCO), launched last November and held in bowling clubs throughout the Northern Rivers, has raised more than \$8,000 for 11 of the region's cancer support groups.

The cancer support groups intend to use their share of the money to pay for items such as transport, operating and insurance expenses, education and promotion programs, and the general support of people struggling with their illness.

"Bowl Cancer Over has been a huge achievement – not only has it increased the profile of cancer support groups in the region, but the number of groups has also grown," Sara Hurren, cancer coordinator for the Priority Health Care Program, which coordinated BCO, said at the lunch presentation.

"We are very grateful for the support of the local bowling clubs and hope Bowl Cancer Over will grow to become an annual fundraising event in bowling clubs across the region."

The fundraising drive is an initiative of the regional Priority Health Care cancer team, which is based here at the division, and local cancer communities, which are part of the umbrella group, Supporting Our Cancer Communities.

Local GPs love their jobs

"I think it's a ripper of a job," says long-time Alstonville GP, Paul Earner, of his 30 odd years in general practice. "Most people are friends. They come in with a puzzle and you are the detective. They trust you and help you to solve it. It's a real privilege."

Paul Earner has gamely agreed to spruik general practice during July's Family Doctor Week and chats between his morning phone calls to patients and health professionals.

Mondays are the busiest days in most general practices and this practice in Alstonville is no exception. So when he takes another call, his colleague Tony Lembke chips in with his views of general practice and its role in the life of a small community.

"We appreciate it's a privilege to be part of people's lives and to share their problems," Dr Lembke says. "It's interesting – you never know what someone's going to

have, whether it's marriage or work problems, cancer or pain. There is enormous variety. It is all about communication and advice and it is much more a partnership than it used to be."

Dr Earner takes up the thread enthusiastically, saying that people are now more receptive to making lifestyle changes such as stopping smoking and eating well. "We've seen a move into the general check-up with a preventative bent. People come when they are well to affirm that they are well and what steps they should take to keep well."

It also means that potential problems can be picked up early before they become harder to treat and fix. Which is why having a family doctor is so important because the doctor will get to know a patient's health and family history. This knowledge helps doctors to treat effectively the whole person, physi-



Fernleigh resident Win Weaver, who has been visiting the same practice for more than 20 years, during her general health check-up with Dr Paul Earner.

cally and mentally.

Both Dr Earner and Dr Lembke agree that they have never had any regrets about choosing a career in general practice.

And living in the country and being a part of a close-knit community is definitely something they wouldn't swap with their city cousins.

Diabetes: Prevent, delay or control it.

One year ago Patrick Smith, who is well known around Lismore as the owner of Choppers Music Store, went to his GP for treatment for the flu. Instead, he found himself attending a Professor Trim's weight loss program that same night. After all, as his doctor said, there was nothing much that could be done for the flu, but plenty for the borderline diabetes that had recently been diagnosed.

Patrick Smith is 52 years old and he has type 2 diabetes. Last year he was overweight, unfit and ate too much high fat food. Today he is 33 kilos lighter, has developed a passion for walking, cut high fat food from his diet and is still losing weight. His diabetes is controlled. His blood pressure and cholesterol are excellent.

In short, Patrick Smith reckons the changes he has made to his lifestyle and the small amount of medication he takes for his diabetes will lead to a healthy and extended old age.

"You tend to put things in the too hard basket, but it's not too hard at all. We are great at making excuses," Patrick said.

"Before losing the weight I would wake up tired no matter how much sleep I had. Now I don't."



Patrick and Narelle Smith

tance. Now it is nothing to him to walk the 10 kilometres home to Goonellabah after work, something he does every day in the warmer months. He also uses Nordic walking poles, which take some of the pressure off his knees. The poles were particularly valuable in the early days when his excess weight put tremendous pressure on his knee joints.

Once Patrick had completed the weight loss course, his doctor referred him and Narelle to a nine-week program run by the SCU school of exercise science and sports management. This individually tailored exercise program had just been established for overweight or obese people with metabolic problems such as high blood pressure and diabetes, mechanical problems such as such as sore knees, hips and back, and motivational problems.

Patrick and Narelle have now incorporated low key weight training and stretching exercises into their daily routine, as well as completely changing their diet.

As Patrick Smith's case demonstrates, type 2 diabetes is a disease that can be controlled. The good news is that in many cases, it can actually also be prevented. So says Dr David Guest, Patrick's GP and a spokesperson for the Northern Rivers Division of General Practice.

"Being more active and making appropriate food choices can delay and even prevent the development of type 2 diabetes. It also improves the health of people who already have diabetes," Dr Guest said.

Who is at risk?

Older than 50 years with one or more of the following risk factors:

- Obesity
- Close relative with type 2 diabetes
- High blood pressure

Aboriginal/TSI people and those from the Pacific Islands, the Indian subcontinent or from a Chinese cultural background who may have adopted a western diet and lifestyle have a high risk of developing the disease from 35 years.

People with one or more of the following risk factors are also at risk:

- Older than 65 years
- History of diabetes during pregnancy
- Heart disease
- Women with ovarian cysts (polycystic ovary syndrome) who are also obese.

"At least 30 minutes of exercise a day is a great start. The exercise can be accumulated in short sessions of 10 minutes or so. We also need to eat a variety of nutritious foods, choose foods that are lower in fat, particularly saturated fat, and eat plenty of breads, cereals, fruit and vegetables, which are good sources of fibre."

Dr Guest encourages people who are at risk to have a simple test when they next see their GP.

Some of the complications of the world's fastest growing disease:

HEART DISEASE

KIDNEY FAILURE

BLINDNESS

LIMB AMPUTATION

IMPOTENCE

About one in two people with diabetes do not know they have the disease. Diabetes is the seventh leading cause of death in Australia.

Patrick made the changes with the support of his wife Narelle, who although she did not have diabetes, had high blood pressure and was also overweight. She has lost about 17 kilos.

He started slowly, walking one kilometre a day and gradually increasing the dis-

SPIKE SAYS
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FAXBACK FEEDBACK: We value your feedback. If you would like to make the division aware of any ideas for possible health projects, or if you have comments on any of our current projects, please fill out and fax this form to 6622 3185, email media@nrdgp.org.au, or phone 6622 4453.

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