



Volume 8
Issue 2
August
2007

Call

House

Editorial

Pre schoolers can't wait to be as old as their next birthday and they are well equipped to learn and see and experience as much of the world as they can. At the other end of the spectrum our way of experiencing the world can diminish if we do not take care of the simple things. Dr Jim Turner addresses this issue in 'Healthy Ageing'

Now that Gardasil, the vaccine to prevent cervical cancer, is available for young women up to the age of 26 – free of cost, it is important to herald the fact to our daughters and friends. We hear from the Illawarra Black Dog institute who have appointed Tim Heffernan as their ambassador. He is available to give his first hand experience of managing mood disorder, to consumers, carers and health professionals. Consumers benefit from the information about HOME Hospice and IECC's Dementia Information Kit.

There are times when medical expenses can be overwhelming. The Medicare Safety Net helps those families with large medical expenses, by reducing costs after a financial threshold has been reached. A tax offset is also available for people with large medical and ancillary bills - including dental, pharmacy, and optical expenses.

Lactivist – a person who strongly promotes breast feeding - is a new word being added to the latest Collins Dictionary. It is so relevant today when by six months 80 per cent of Australian babies are receiving infant formula; some occasionally, most as their main food source which adds up to enormous profits for the billion-dollar manufacturing industry (Barker R. smh August 22nd 2007).

Patricia Noferi, Editor, House Call

Healthy Ageing

The baby boomers are becoming headlines again. This time in connection with the increase in our aging population and the impact this is going to have on our economy. It seems that compulsory retirement is no longer age related. The seeking of reemployment of baby boomers after their retirement is now being discussed. Unfortunately this raises the spectre of a lot of the impaired trying to find meaningful employment.

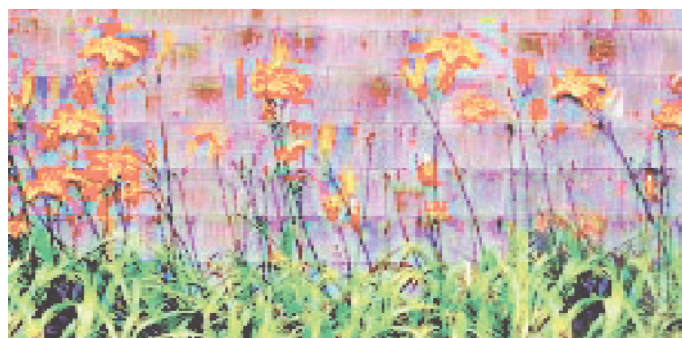
We have had successful programs for the major killers of heart disease, some cancers and at present a great campaign for diabetes. But the simple things of normal ageing with regard to vision, hearing taste and smell, have been put on the backburner. There has been some work done on this but public awareness is minimal. Likewise the uptake of modern medical management of these problems is lacking.

Visual impairment leads to mobility problems and a drop in standards of activities of daily living – shopping, housekeeping, and food preparation. Hearing impairment leads to poor communication, personality disorders, lack of emotional interaction and in some cases when combined with poor vision, lack of enjoyment of television viewing. These deficiencies, especially in combination can result in isolation and loss of independence. Loss of taste and smell creates a loss of enjoyment of eating, difficulty discerning whether food has 'gone off', and the inability to smell gas or smoke, which can be life threatening.

A lack of stimulation and normal social activity and experiencing difficulties with managing normal every day activities, often marks the onset of ill health and/or dementia in an individual. Lack of concern and inaction about fixing the impairments that mar our enjoyment of the so-called 'simple things of life' can markedly increase our growing pool of dependent dementia people

Increasing awareness in the general public and intervention, early in the above areas can be of great community benefit. There has been much publicised research that can be used to give a prolonged youth rather than a prolonged old age. These issues are very relevant to all of our cultural communities. So see your GP early.

Dr. Jim Turner GP



Multicultural Dementia Information Kits

Illawarra Ethnic Communities Council (IECC) has used funding from the Department of Health & Ageing to develop a Dementia Information Kit. It is to be used to raise awareness of early intervention strategies for dementia among the Italian, Greek, Macedonian, Polish, Spanish and Portuguese communities

Barriers to disseminating information about dementia exist in all communities and include stigma and low levels of literacy. 1,700 bilingual Dementia Information Kits were produced and distributed to Community Groups, Multicultural Health, Aged Care Services and Wollongong Hospital.

The kits which contain fact sheets are bilingual – being in English and each of the second languages. They include the following:

- 'Worried about your memory'
- 'Memory Changes'
- 'Diagnosing Dementia'
- 'Early Planning'



Black Dog Illawarra

In April of this year the Black Dog Institute launched its Ambassadors program. Based in various areas around NSW, the ten Ambassadors have personal experiences of mood disorders as either consumers or carers. By speaking about the Institute and their own 'stories' at community events and to smaller groups of consumers and mental health professionals the Ambassadors aim to raise awareness of, and de-stigmatise, mood disorders.



BLACK DOG INSTITUTE

Wollongong's Black Dog Ambassador is Tim Heffernan, a former high school teacher who currently works as a carer for intellectually disabled adults. Tim has lived with Bipolar¹ Disorder since the early 1980's and after twenty years of wellness he again felt the bite of his illness in 2005. Since then Tim has sought to become more proactive in his approach to mental illness through his association with the Black Dog Institute and through his own creative writing.

- 'Taking a break'
- Calendar promoting IECC Dementia Link
- Magnet with number to call for help

200 Multilingual DVD's titled 'Understanding Dementia', are an additional resource which addresses the problem of low levels of literacy. It has been distributed to community group coordinators and local libraries.

Audio cassettes titled 'Caring for a person with Dementia' are available in Polish, Italian, Greek and English. All of these educational resources can also be obtained by contacting:

Liz Arroyo
Multicultural Dementia Carer Support Coordinator
T 42 764364
E-Mail: liza@iecc.org.au

For a range of fact sheets and more information about Alzheimers see:
www.alzheimers.org.au

Articles for House Call

Readers are invited to submit suitable articles to House Call, a news letter of the Community Consultative Committee of the IDGP.
E-mail ccc@idgp.org.au or Fax: 4226 9485

So far Tim has spoken at the team meeting of the SESIAHS Rehabilitation Service at the Fernhill Rehabilitation Centre and as guest speaker to the Northern Illawarra Community Mental Health Team. He hopes that this audience will soon expand to consumer and carer groups.

The Black Dog Institute is located on the Prince of Wales Hospital campus in Randwick, but it is instantly accessible online at www.blackdoginstitute.org.au with a rich web site that offers information on depression and Bipolar Disorder tailored to the needs of consumers, clinicians and the general community. Particularly powerful tools are the downloadable fact sheets and the online Bipolar Disorder Program.

Researchers at the Institute have recently been awarded a \$60,000 grant by the Australian Rotary Health Research Fund (ARHRF) to develop a program that enables people with Bipolar Disorder to manage their illness with help from the web.

Tim would welcome any opportunities to speak in his capacity as Black Dog Institute Ambassador. He can be contacted through the Institute on (02) 93824530 or directly at tkheffernan@bigpond.com.

Gardasil and the importance of having regular Pap smears

The number of women who have regular Pap smear tests has declined from 46.7 per cent in 1997 to 25.3 per cent in 2004¹. SESIAH Director Katherine Brown says that it is extremely important for women to have a series of Pap smears over their lifetime. It is important to be able to compare the results to indicate differences. Many women who get cervical cancer have not had a recent Pap smear².

Dr Gerry Wain explains the advantages of the new vaccine Gardasil which is available to all females aged up to 26, over the next two years. This is the catch-up part of an on-going school based program that will provide free vaccination to all girls aged 12 – 13 years. The vaccine shots – three over a six month period – are available from your GP. Gardasil is not registered for women older than 26 years. For these women the best form of prevention is to continue with cervical screening through regular pap smears³.

Cervical cancer is caused by certain strains of the human papilloma virus (HPV). Infection with the HPV is common – about seven out of ten women will be infected with HPV during their lifetime. In most cases, HPV infection clears without symptoms or treatment. Gardasil has been shown

to be effective against HPV types 6, 11, 16, and 18 which are responsible for 70 per cent of cervical cancer cases and 90 per cent of genital warts. Women can still benefit from the vaccine if they are sexually active or have had an abnormal Pap smear.

Women who are aged 27 – 45 years of age and are interested in receiving a vaccine to help protect against cervical cancer can now receive the vaccine "Cervarix". Cervarix is available as a private script from your GP. Cervarix is priced at around \$150 per dose – and a three dose schedule is required at zero, one and six months.

Most importantly, women should always continue with regular Pap smears, whether they have been vaccinated or not³.

More about cervical cancer, treatment and staging: www.abc.net.au/health/library/cervoca;caner_ff.htm

1 Australian Institute of Health and Welfare
2 Trenwith C. "Drop-off in pap tests a concern" Illawarra Mercury June 25th 2007
3 Dr. Gerry Wain, Director of Gynaecological Oncology, Westmead Hospital Sydney

HOME Hospice: HOME is where the Heart is

One person dies every 4 minutes in Australia. 90 per cent of people will have expressed their wish to die at home. Most of us want to die at home. Sadly only 10-20 percent will have achieved this wish.

HOME Hospice CEO Melanie Greblo-Rhodes says that at HOME Hospice we have a dream that death and dying become a social event again, an event that communities of family, friends and neighbours are engaged in, to re-claim their caring role. By bringing the dying home, where they belong, where their heart is they are living in their own environment. And we are caring for them until their very last breath – 'a gift to us all', says Melanie.

HOME Hospice and The Cancer Council NSW have joined together to help achieve this dream. This is done by engaging the community through volunteer mentors to provide much needed support to the carers of people in the terminal phase of their illness to die at home. The mentor acts as a "knowledgeable friend" supporting and when necessary educating the carer about the dying process. The HOME Hospice mentor works alongside existing health services and GP care and is complimentary to those essential services.

How can you help?

Over the next 6 months HOME Hospice is expanding its services across N.S.W. We are looking to recruit volunteer mentors and create community awareness so that families can access HOME Hospice.

HOME Hospice is currently inviting expressions of interest from people who would like to become volunteer mentors and who have the ability to engage and empower the carer to fulfil the caring role to the very end.

Our mentors come from all walks of life. They are teachers, nurses, health workers, administrators and business people. An interview, training and support is part of the process. If you are interested in becoming a HOME Hospice mentor please contact 1800 132 229 or to learn more about HOME Hospice go to www.homehospice.com.au

'Living Our Dying' Conference

This day-long conference on Wednesday 21 November is specifically for Health Professionals and GPs. For more information please phone 1800 132 229.

Kristina Dodds

Program Manager – HOME Hospice



Medicare Safety Net

If you need to see a doctor or have tests regularly you could end up with high medical costs. The Medicare Safety Net is designed so that once you reach a safety net threshold, visits to your doctor or having tests may end up costing you less.

It is necessary for a family or couple to register for this benefit.

Medicare will contact you when you are nearing the threshold, which is \$519.50 if you are receiving a Concession and/or the Family Tax Benefit; otherwise the threshold is \$1039.

You can also register; and check your Medicare Safety net balance:

- Online – visit the Online Services Section of www.medicareaustralia.gov.au and download a form or visit the 'Online Services' section and register online.
- Over the phone – call 132 011
- In person – visit your local Medicare office.

An example of the benefits:

After the safety net threshold has been reached and you visit your doctor who charges you \$55, you will receive your benefit of \$31.45. You will also receive 80 per cent of your out of pocket costs, giving you an extra \$18.85 in your pocket. So in this example it will cost you \$4.70 to go to your doctor. An out-of-pocket cost is the difference between the Medicare benefit and what your doctor charges you

Medicare Tax Offset

You can claim a tax offset of 20 per cent on your net medical expenses (what you have paid in expenses minus any refunds you got from Medicare and your private health insurer) over a \$1,500 threshold.

For example if the total of you expenses is \$5,500, subtract \$1,500 leaving \$4,000. 20 per cent of this is \$800 and becomes the tax offset (which is a tax rebate and comes off your tax payable).

The key to making claims for the tax offset is to keep all of your receipts relating to health including optical, orthodontic, and pharmacy.

For more information and to obtain a Medicare financial tax statement, see www.ato.gov.au



Newsletter of the Community Consultative Committee of the Illawarra Division of General Practice (IDGP). The IDGP is an organisation which supports and represents General Practitioners. It was developed to provide opportunities for GPs to work with their local colleagues, consumers and other health or community services. It aims to achieve wider health improvements in the community.



Ever had trouble remembering to take your medicines?

It has been estimated that in developed countries only 50% of patients who suffer from chronic diseases adhere to treatment recommendations.

Here are some hints to help you remember your medicines:

Medication organisers

Storing your medicines in a pill box with labeled compartments for each day of the week will help ensure that you take the right medicine at the right time. Pharmacists sell a variety of medication dosing aids or dosettes, so check out your pharmacy for the one that best meets your needs.

Reminders

Reminders can be as simple as a note on the bathroom mirror, fridge or television. Also, taking your medicines as part of your daily routine by linking them with daily activities, such as eating breakfast, brushing your teeth, or going to bed, may be useful.

Medicines timetable

Make a list of all your medicines and the times they should be taken, and post it in a prominent place. If you prefer, ask your GP to compile the timetable on their computer. Use it to remember which medicines should be taken when.

Streamline your medicines timetable

It's much easier to remember to take your medicines if you take them once or twice a day rather than several times a day. Talk to your doctor about the possibility of streamlining your timetable so you take your medicines less often.

Mark off a chart

Use a chart to tick off each medicine as you take it, so you can check later whether you've remembered it.

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