



Call

HOUSE

Newsletter of the Community Consultative Committee. Volume 9 Issue 3 September 2008

Editorial

Once again the opportunity arises for us to acknowledge the skill and support that our GPs give.

The exceptional services they provide that make us feel special, be it their prompt attention to serious health diagnoses, their continued support, care and knowledge about our families, and their high level of professional development which enables us to trust them with our lives. The Family Doctor Awards 2008 nomination information is in this issue.

New members for the Consumer Consultative Committee are appointed annually.

Helen Gapps tells her story about being a member and the work of the committee and its wide ranging involvement with the community, from interviewing prospective medical students at UOW to giving a community voice to government in the development of services such as headspace.

Iodine deficiency and its dire consequences for the intelligence of our children is an important public health issue that our committee member Dr Jim Turner has brought to our attention.

Changes in technology and eating habits have created less opportunity for us to ingest enough iodine from the iodine depleted environment of the east coast of Australia.

'In the End' is about letting your family know what your wishes would be for your medical treatment and care if you lost the mental capacity to do so, following an accident or serious illness.

Carpe diem 'seize the day'

Patricia Noferi
Editor

Illawarra Family Doctor Awards 2008

The Illawarra Division of General Practice, in consultation with its Community Committee, is running the Illawarra Family Doctor Awards (FDAs) again for 2008.

The FDAs provide an avenue for local GPs and Practices to be recognised for outstanding service to our community. It is a wonderful opportunity for our community to commend general practice and the general practitioners. The awards help raise awareness of the dedication, professional skills and caring approach of General Practitioners in the Illawarra.

Any member of the community can nominate their doctor or general practice for the Illawarra Family Doctor of the Year Award and/or the Illawarra Practice of the Year Award. Return completed nomination forms directly to the IDGP.

Nomination forms are available at www.idgp.org.au.

Nominations close on **Monday 29 September 2008**.

The winners will be announced at the IDGP's AGM on 23 October 2008.

CCC Membership

We are currently seeking Nominations for five positions for the CCC Committee, with Nominations closing Monday 10th November. A Nomination form is provided with this newsletter. Additional forms are available from the Illawarra Division of General Practice, phone 4226 7052 or visit the website: www.idgp.org.au.



CCC Profile

While a teacher in high schools and at university I was very aware of the need for good health to be able to learn and study effectively.

I was also aware of the value and empowerment of good information and knowledge when dealing with problems or issues.

Thus, it was easy and natural for me, after retirement, to join a committee which is concerned with providing sound information about health to the community. The main task of the Community Consultative Committee of the Illawarra Division of General Practice is effective liaison between consumers of health services and GPs, so that the best possible health outcomes are achieved for everyone.

As a Committee member and then as chairperson, I have participated in or lead several very worthwhile projects, eg the inaugural meeting for a local Dads in Distress branch

(to support recently separated fathers); and community forums on such topics as building youth resilience, childhood obesity, drug and alcohol problems, depression, and medicines - helpful or harmful; and regular community action/lobbying to support such ventures as the Division's innovative new youth clinic, headspace, and a new GP super clinic. I have spoken to several community groups about health issues.

When editor of House Call I researched many topical health areas and provided suitable articles. I also developed and conducted a survey to assess readers' needs.

Another project I helped develop is the Family Doctor Awards where the community annually recognises hardworking practices and individual GPs.

The number of people who nominate different doctors and practices has increased each year, showing growing interest for telling personal stories about exceptional care.

I have had the pleasure of

presenting the awards on behalf of the community at the Division's annual dinners.

Throughout the year we publish, with permission, various individual comments from the community nominations.

More recently, I have been very pleased to be involved in the University of Wollongong's Graduate School of Medicine, eg as an interviewer of applicants, and also in work as the community representative on various committees with South East Sydney Illawarra Area Health Service.

I try hard to ensure that the community's point of view and welfare are always considered at planning meetings and to provide communication back to consumers.

The partnership which the Division has developed between the media and its own doctor membership has been another very enjoyable and worthwhile community education project with which the Committee members and I have been involved.



Perhaps my most significant contribution has been the developing of a more effective collaborative group approach in the Committee - one which works in a systematic way to identify health problems and to find solutions.

We have kept our friendly discussion mode and our diverse representative views but now have a clear plan of operation which supports both current community needs and the Division's strategic direction.

I look forward to meetings as I feel we make a real contribution to improving communication and knowledge about health issues for the Illawarra community.

Helen Gapps, Chairperson

About the Community Consultative Committee

We are a group of community members who meet regularly with members of the Illawarra Division of General Practice (IDGP) and local GP representatives.

Our aim is to provide a link between the community and the IDGP. This then opens the lines of communication between the community and GPs and allows items of concern and/or interest to be discussed.

This is designed to foster understanding and goodwill

between the community (the users of medical services) and the medical fraternity (the providers of medical services).

This also allows for the consumers of health services to have a voice in the provision of health services.

What can we do for you?

We are your representatives and, like you, are interested in the provision of health services through general practice in the Illawarra.

If you have a concern with the provision of health services, or require information that will help with your understanding of the provision of health services, or can simply see a better way to provide specific services we can help you.

We can present your case or seek information for you at our regular meetings.

All this is intended to help in the provision of better medical services to you and to keep the

medical fraternity in touch with the needs of their consumers.

Email: ccc@idgp.org.au



Protecting the next generation

Iodine deficiency: Is Australia experiencing a brain drain with our children?

Bread manufactures will next year be required to add iodine to bread because of concerns among health authorities of a re-emergence of iodine deficiency diseases IDD.

The demands for iodine increase markedly during pregnancy and lactation. Worldwide IDD is the single greatest cause of preventable mental retardation.

Severe deficiency causes cretinism, stillbirth and miscarriage, but even mild deficiency can significantly affect the learning ability of children by up to 10-15 IQ points.

Iodine is a chemical element which is an essential micronutrient necessary for the production of the thyroid hormones that regulate growth – normal brain and physical development, and energy expenditure.

An adult only requires about a teaspoon of iodine over a life time, but it is not stored in the body and requires constant renewal.

It occurs naturally in many vegetables but eastern and southern Australian soils are poor in iodine.

The most potent sources of iodine are fish and sea-weeds, dairy foods and eggs.

In the past, milk became enriched with iodine because the dairy industry used iodine-

based disinfectants to clean milk bottles.

Interventions to address iodine deficiency in Australia have been instigated before.

In the 1920s iodised household salt was introduced and in 1947 tablets were provided free of charge as part of a goitre prevention programme. Public education was also part of these initiatives.

Today some table salt is iodised, but reduction in salt consumption for health reasons and greater use of commercial salt, sea salt and rock salt which do not contain added iodine mean that only 10% of salt consumed is fortified with iodine.

Changing habits have given rise to the hidden phenomenon of the re-emergence of IDD.

Science has alerted us to the need to treat not only the visible disease of goitre but the far more insidious outcome of brain damage in the next generation.

Most recently health authorities wanted to add iodine to a range of products but dieticians objected to the plan on the grounds that it would encourage consumptions of some foods that were high in fats and salt.

As a result it was decided to limit iodine fortification to bread but use a heavier concentration than would otherwise have been the case.

For some people who suffer from an over-active thyroid gland, iodine may need to be limited. Ingredients listed on packaged bread must identify the presence of iodised salt.

Organic bread will not be required to contain iodised salt.

Australian health ministers agreed in March that the iodine deficiency was serious enough to justify mandatory fortification but left the final decision to the board of Food Standards Australia New Zealand (FSANZ).

The timing of the change in October 2009 will coincide with the introduction of folic acid into bread.

The addition of this B complex vitamin is expected to prevent between 14 and 49 neural tube defects in pregnancies annually.

The dual introduction of these additives will require bread labels to be changed only once.

In the meantime it is important to ensure that we are all ingesting enough iodine by using iodised table salt and eating fish regularly.

Pregnant women, lactating women and children may need to take supplements. Education remains an important part of this public health measure.



In the end

Do your family know what your wishes would be if you suddenly became desperately ill by say trauma heart attack or stroke?

Most of us are aware of the importance of tying up our financial affairs with a will and even power of attorney.

A person appointed under an enduring power of attorney can make financial decisions on your behalf, for example operating your bank account or selling your house.

But more importantly have we made arrangements about our personhood – body and mind?

Who will make decisions about treatment if we are unconscious or have lost our cognitive ability, even temporarily?

Guardianship relates to decisions about a person's lifestyle and other personal matters such as where they live, what services they should receive, and what medical and dental treatment they receive.

Basic instruction can be incorporated in a guardianship document.

Appointing a guardian who knows what your wishes and values are can help ensure that you will receive the treatment and care that complies with your own ideas.

If loss of capacity becomes permanent then enduring guardianship needs to be established.



More detailed treatment plans including non-treatment options can be outlined in a separate document called an Advanced Care Directive.

ACDs can then be incorporated in the medical notes to shape treatment regimes.

It is important to have given some consideration to decisions about these issues with the help of your GP.

A useful site from which more information and documents can be downloaded is: www.ccdgp.com.au, click programs.

An excellent book 'My Health My Future My Choice' can be ordered from www.advancecaresdirectives.org.au

While the process of registering for organ donation is fairly straight forward, the matter of directing care for oneself at the end of life

requires attention and revision as levels of health, and circumstances change.

Organ donation

Successful organ and tissue donation has meant the possibility of a second chance of life and health for many people in our community.

Although some kidney donations can occur with living donors, most organ transplants are only possible when people generously decide that in the event of their death they would like to donate their organs and tissue to help others.

Under current legislation (NSW Human Tissue Act 1983), there is provision on your licence to register to become an organ and tissue donor.

Donor information is disclosed to

organ donation agencies. LifeGift NSW/ACT provides organ donation services, and is part of the Red Cross Blood Service.

Another way to register as a donor is through the Organ Donor Register, which is a national register for Australians and is held by Medicare.

Call 1800 777 203 or visit www.organdonor.com

If you have decided to become an organ donor it is important to tell your family of your decision.