



The Desborough & Hazlemere Surgery NEWSLETTER

June 2017

www.desborough.gpsurgery.net



@desandhazgp

Your Doctors

Dr.N.Reidy
Dr.P.Luque
Dr.R.Chaudhry
Dr.A.Ivanova
Dr.N. Thevarkad
Dr.T.Ngo

Practice Manager

Philip Traynier
01494-526006

Deputy Practice Manager

Anthony Hari

Reception Opening Times

8.30 to 6pm
Monday to Friday

Out Of Hours

Call 999 in an emergency. Chest pains and / or shortness of breath constitute an emergency.

NHS 111 service if you urgently need medical help or advice but it's not a life-threatening situation.

'Patient Experiences'

The NHS is always striving to measure patient feedback. This enables them amongst other things to know what is working and what is not. If you could take a moment to visit one or ideally both the websites below and leave us some feedback (good, bad, constructive etc.) it would be most appreciated.

www.nhs.uk/Service-Search/GP/LocationSearch/4
search by location for Hazlemere or Desborough GP surgery

www.iwantgreatcare.org/reviews/search

search by location or surgery name for Hazlemere or Desborough GP surgery

Government using GPs as scapegoats instead of taking responsibility for crisis in NHS

Responding to calls from the prime minister, Theresa May, for more seven-day GP access, Dr Chaand Nagpaul, BMA GP committee chair, said:

"GPs deliver care 24-hours a day, seven days a week, and all GP practices must have measures in place for out-of-hours patient care. Many GP practices already offer evening and weekend appointments, and there are examples where extended opening has been abandoned due to lack of demand

1. Government funding for extended opening has also been halved in some areas.

"The current crisis in the health service extends well beyond A&Es, with all parts of the NHS, including GP surgeries, working as hard as they possibly and safely can to keep up with demand. Much of the pressure on A&E has nothing to do with general practice: it has to do with seriously ill patients for whom seeing a GP would not prevent a hospital admission. These patients are facing delays in being admitted to hospital because of a chronic shortage of beds, as well as delays in discharging elderly patients due to a funding crisis in community and social care.

"This crisis, which was both predictable and avoidable, is the culmination of a decade of underfunding, and a recruitment crisis that has left one in three GP practices unable to fill vacancies

2. GPs are now delivering up to 340m consultations a year and can see up to 60 patients a day. The resulting pressures have led to hundreds of surgeries closing last year because of staffing and funding shortages, and eight in 10 GPs saying they are unable to provide safe patient care because workloads are so great³.

"This is not the time to deflect blame or scapegoat overstretched GP services, when the fundamental cause of this crisis is that funding is not keeping up with demand. This is evidenced by the fact the UK spends less on health and has fewer doctors and beds per head than other leading countries, as highlighted by the head of NHS England, Simon Stevens. Rather than trying to shamelessly shift the blame onto GPs, the government should take responsibility for a crisis of its own making and outline an emergency plan to get to grips with the underlying cause, which is the chronic under-resourcing of the NHS and social care."

10 things you need to know about your back

1. Your back is stronger than you may think

Most people worldwide will experience back pain during their lifetime. It can be disabling and worrying but it is very common and rarely dangerous.

The spine is a strong, stable structure and not easily damaged so in most instances it is a simple sprain or strain.

In these cases – 98 per cent, according to research – people recover reasonably quickly, and many do so without treatment.

Some people experience repeat episodes, which can be distressing, but again these are rarely dangerous.

2. You rarely need a scan and it can do more harm than good

This is because seeing perfectly normal changes to their spine can cause people to avoid the activities they should be doing to get better, such as exercise and movement in general.

In very rare cases, there may be something more serious or underlying that requires medical advice.

A scan may help with your diagnosis and symptoms to be aware of are at the bottom of this page.

However, these account for just two per cent of cases so if your physio or GP does not send you for one, you should take it as a good sign that there is nothing concerning going on.

3. Avoid bedrest, stay in work and gradually resume normal activities

Scientific studies now indicate prolonged rest and avoidance of activity for people with low back pain actually leads to higher levels of pain, greater disability, poorer recovery and longer absence from work.

In the first few days of a new episode of low back pain, avoiding aggravating activities may help to relieve pain.

However, staying as active as possible and returning to all usual activities gradually is actually important in aiding recovery – this includes staying in work where possible.

While it is normal to move differently and more slowly in the first few days of having back pain, this altered movement can be unhealthy if continued in the long-term.



4. **You should not fear bending or lifting**

Bending and lifting are often portrayed as causes of back pain and while an injury can occur if something is picked up in an awkward or unaccustomed way, it's most likely to just be a sprain or strain.

The important thing is to practice and get your body used to carrying different loads and weights in a way we find comfortable and efficient. We all run differently, and it's perfectly normal for us to find our own technique for lifting.

5. **Exercise and activity reduce and prevent back pain**

Exercise is shown to be very helpful for tackling back pain and is also the most effective strategy to prevent future episodes.

Start slowly and build up both the amount and intensity of what you do and don't worry if it's sore to begin with – you won't be damaging your back.

No one type of exercise is proven to be more effective than others so just pick an exercise you enjoy, that you can afford to maintain in the long-term and that fits in with your daily schedule.

6. **Painkillers will not speed up your recovery**

there is no strong evidence on the benefits of painkillers and they do not speed up recovery.

They should only be used in conjunction with other measures, such as exercise, and even then just as a short-term option as they can bring side effects.

Exercise, which is safer and cheaper, is considered the preferred option.

7. **Surgery is rarely needed**

There are some uncommon back conditions where there is pressure on the nerves that supply the legs and the patient gets leg symptoms, such as pain, pins and needles or numbness.

For these conditions, surgery can help the leg symptoms but it is important to understand that it is not always required.

You also need to know that on average, the results for back surgery are no better in the medium and long term than non-surgical interventions, such as exercise.

So a non-surgical option, which includes exercise and activity, should always come first.

8. **Get good quality sleep**

The importance of sleep in tackling back pain has become increasingly clear in recent years.

This is because it reduces stress and improves your overall feeling of wellbeing, making you less susceptible to the triggers of pain in the first instance and helping you to cope when it does occur.

Aim for 7.5-8 hours a night and try to aim for a regular routine, as far as possible.

It is also very important to know that there is no best position or type of mattress – whatever feels most comfortable for you is best.

9. **You can have back pain without any damage or injury**

Many physical or psychological factors can cause back pain and often a combination of these are involved.

Many factors can cause back pain and often a combination of these are involved.

They could be

- **Physical** factors, such as ‘protecting’ the back and avoiding movements, or a simple strain.
- **Psychological** factors, including a fear of damage or not getting better, feeling down or being stressed.
- More **general health and lifestyle** factors, like being tired and rundown, not getting enough good quality sleep, being overweight or not getting enough physical activity
- **Social** triggers, such as difficult relationships at work or home, low job satisfaction or stressful life events, like a family death or illness.

Crucially, it’s important to know that all pain is 100 per cent real and never ‘all in your head’, even when factors like stress or mood are involved.

Each of the factors can turn up the volume on your pain and gaining a greater understanding of when that can happen puts you in a stronger position to recognise them and learn how to turn down the dial again.

10. **If it doesn’t clear up, seek help but don’t worry**

If your back pain does not clear up after 6 – 8 weeks, make an appointment to see your GP or physiotherapist

Physiotherapists provide expert advice, guidance and treatment for back pain.

This is to help reduce your chances of future episodes, while improving your overall health and wellbeing.

Symptoms to be aware of:

These symptoms are very rare but you should contact a doctor if you experience any of them:

- ❖ Difficulty passing urine or having the sensation to pass water that is not there
- ❖ Numbness/tingling in your genitals or buttocks area
- ❖ Loss of bladder or bowel control
- ❖ Impaired sexual function, such as loss of sensation during intercourse
- ❖ Loss of power in your legs
- ❖ Feeling unwell with your back pain, such as a fever or significant sweating that wakes you from sleep



IT Humour



Hazlemere Runners



HAZLEMERE RUNNERS

NEW! 0-5K BEGINNERS COURSE

7 pm 3 JULY 2017

Our Mission:
"Providing safe and supportive running coaching to improve the health and wellbeing of our local community"

“ THE JOURNEY OF A THOUSAND MILES BEGINS WITH ONE STEP. ”

LAO TZU

We meet on Monday evenings (except Bank Holidays) at 7 pm and support four groups:

- Beginners** – a planned programme of walking and running to get you up to 5K over 10 weeks
- Stickers** – Those that complete the beginners course and wish to continue to run 5K routes
- Improvers** – another course to get you gently and safely from 5 to 10K over 10 weeks
- 10k Graduates** - runners who have completed both courses and wish to improve speed and distance

0-5K BEGINNERS COURSE

MONDAY, 3 JULY 7-8 pm

FREE to attend – simply turn up and join

Meeting at Holmer Green Sports Club

Gently takes you from couch to 5K with small increases in activity each week

10 week course

Led by qualified running coaches and leaders

Suitable for all – over 18's only

HOLMER GREEN SPORTS ASSOCIATION, WATCHET LANE, HIGH WYCOMBE,

Alcoholism in the over-50s: tips to cut back

Many of us can't imagine a good night out (or in) without a glass or two of wine. Worryingly, the fastest growing group of 'hazardous' drinkers is women in their mid-40s to mid-60s. More worrying still, many don't know they have a problem until it's too late.

Lots of patients believe that a glass of wine is a single unit - think again. A 'standard' wine bar serving of 175 ml is just over two units, and a 'large' glass of wine, at 250 ml, has about three units - there are nine units in a bottle of wine. A single measure of pub spirits is one unit and a pint of 'normal' beer is about two, although some beers and lagers are much stronger.

What are the recommended alcohol limits?

New alcohol guidelines were launched by the Chief Medical Officer last year. They now recommend not more than 14 units a week - spread over several days - for men or women. The government defines 'binge drinking' as a woman drinking more than six units, or a man more than eight, in a single day. There are lots of risks linked with binge drinking - as well as the risk of accidents (and more), it increases your risk of stroke in the short term. You may be alcohol dependent if you can't do without a regular drink; you can drink more than you could without feeling 'drunk'; and you know you should cut down (or feel guilty about your drinking).

Women and the rise of 'drunkorexia'

Across the UK, there were over one million hospital admissions related to alcohol last year. That's 7% more than three years ago and nearly a third more than a decade ago. One in four women has drunk over six units in a day over the previous week. And many, conscious of the hefty calorie count in alcohol, are choosing to skip meals and 'save' their calories for alcohol - so-called 'drunkorexia'.

The good news about alcohol trends

Overall, there are some positive trends as far as alcohol related harm is concerned; 39% of 11- to 15- year-olds have drunk alcohol, down from 61% just a decade ago. Teenagers may feel all grown up, but their brains are still developing and they're much more vulnerable to harm. Young people have had a bad reputation in the past for binge drinking, but the numbers doing that has fallen by over a third.

The latest annual figures suggest that spending on alcohol drunk in the home has fallen by 5.7% in three years, and spending on alcohol outside the home has dropped by 13.4%. Now that's not great news for publicans, and no-one wants to see neighbourhood pubs all go out of business. In an interview recently on national radio with a publican, and complaining about the fact that non-alcoholic drinks in pubs cost almost the same as alcoholic ones, despite the extra tax the publican pays on alcohol. He admitted that publicans make much more money on non-alcoholic drinks. Maybe if prices were fairer they'd have more business - and we'd all be healthier!

Along with your liver, alcohol can damage your heart, your gut, your bones - and increase your risk of cancer (especially breast cancer). If you drink daily, you'll become tolerant of the short term effects of alcohol - but not the long term risks.

Tips to help you cut back

There are lots of ways to help yourself and have more fun than ever:

- ✓ Try totting up your alcohol intake for a week - you might be shocked.
- ✓ Then have a couple of alcohol-free days a week
- ✓ Alternate alcohol with soft drinks if you're out
- ✓ Try drinking only with a meal
- ✓ Team up with a friend and give up alcohol for a month

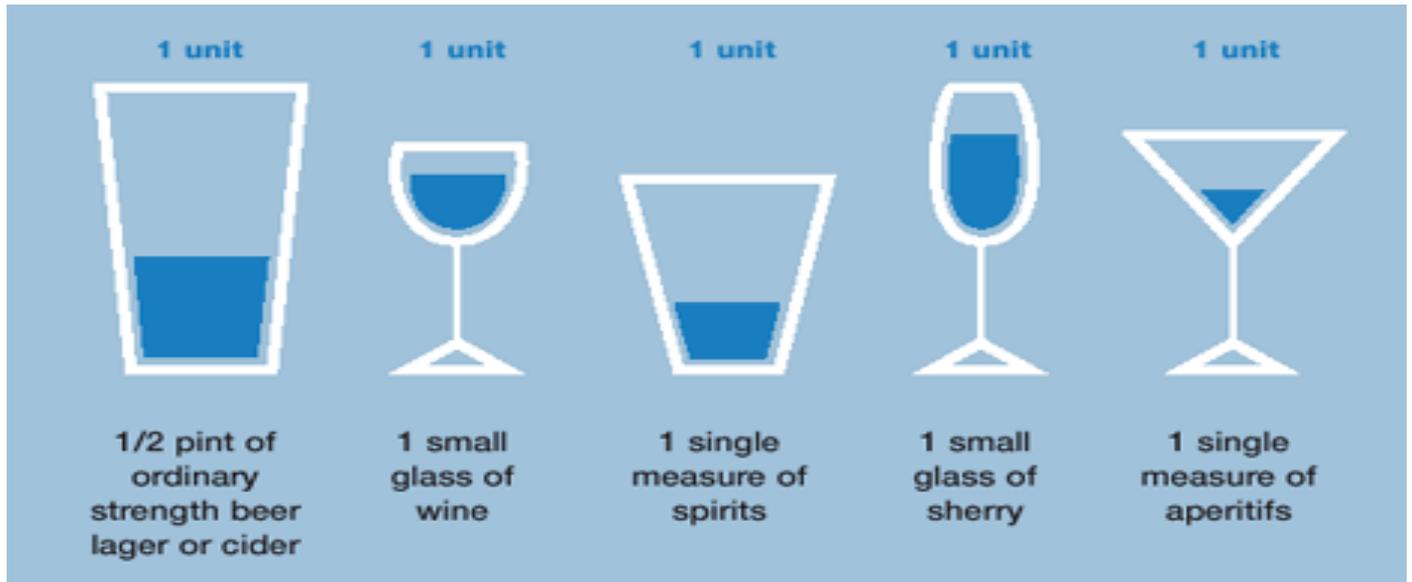
If you're keen to cut down on alcohol, speak to your GP. There's lots of support available. If you're tech savvy, try downloading the Drinkaware unit calculator to your phone so you can keep tabs - **but don't cheat!**

What are the long-term health risks associated with drinking alcohol?

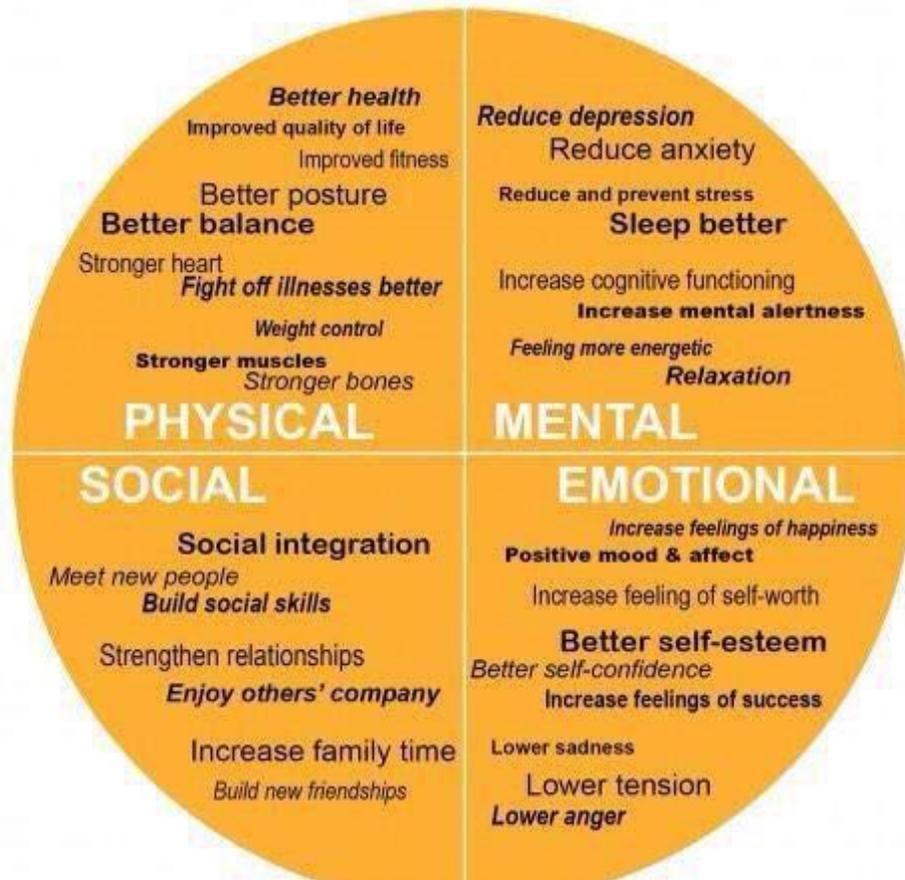
Along with your liver, alcohol can damage your heart, your gut, your bones - and increase your risk of cancer (especially breast cancer). If you drink daily, you'll become tolerant of the short term effects of alcohol - but not the long term risks.

You'll soon notice the changes - you'll sleep better, have more energy, lose some weight - and do your liver a favour at the same time!

This is one unit of alcohol...



Why exercise



PPG Awareness Week 19th ~ 24th June 2017

PPG Awareness Week aims to promote the role and benefits of PPGs to patients, the public and health professionals, to create more understanding of the value of true patient participation



Dr Phil Hammond, GP turned hospital doctor, journalist and broadcaster supporting Patient Participation Awareness Week had this to say.....

“Patients and carers are the smoke alarms for the frontline of the NHS. They are often first to spot poor care and also have great ideas about how to make care better. They need to be involved in decisions not just about their care, but in designing better care for others. Patient Participation Groups are a crucial way of harnessing the voice of the patient in primary care, and have much to contribute in driving up quality”

The first ever Patient Participation Group was set up by a GP in 1972 and many general practices in England now have a PPG. Generally made up of a group of volunteer patients, the practice manager and one or more of the GPs from the practice, they meet on a regular basis to discuss the services on offer, and how improvements can be made for the benefit of patients and the practice.

The beauty of a PPGs is that there is no set way in which they work - the aims and work of each group entirely depends on local needs - but they all have the aim of making sure that their practice puts the patient, and improving health, at the heart of everything it does.

After our successful “Meet the GP’s” event in February the first physical meeting of the PPG took place in April and from these 7 issues have been highlighted for discussion and action. In addition to the enthusiastic physical PPG we have a group of patients that form our virtual PPG. Already there have been a number of initiatives including reducing Do Not Attends and increased promotion of Patient On-Line services.

PPGs are about implementing real, positive change in their communities. Patients have long valued the relationship with their GP and general practice. However the dynamics of this relationship have changed over recent years – patients today rightly want more say in their own healthcare, they are better informed and expect to be treated as whole people, not just as a condition or ailment.

If you have something to contribute or would like to be asked for your opinions by becoming a member of the virtual PPG, please email desborough.surgery@nhs.net with your contact details.

My Life, My Memories

Tackling memory concerns together

Worried about your memory?

- **Memory loss** - can you remember past events more easily than recent ones?
- Do you find it hard to **concentrate**? Do you have difficulties in following conversations or TV programmes?
- Do you find you feel **anxious, depressed or angry** about memory loss? Or confused, even when in familiar environments?

What to do?

If you have memory concerns, contact the **Memory Support Service** on **01296 331749** (details below) or your **GP surgery**.

The Memory Support Service can also advise people worried about a friend or relative with memory concerns.

Patient benefits of a timely diagnosis

Signs that could indicate dementia are outlined above.

- Early diagnosis means someone with dementia can often **live independently in their own home for longer**. This avoids early or unnecessary hospital or care home admissions, and can improve quality of life.
- **Symptoms are treated sooner** - and early treatment can be more effective.
- **Getting early help and advice** lets people be more confident when planning for the future and arranging financial benefits and entitlements (for instance, disability living allowance and council tax reduction).
- **People can get support sooner**, from, for example, social services, day centres, respite care, community mental health teams, occupational therapists, carer support groups and the Alzheimer's Society.

20 TIPS TO BUILD YOUR RESILIENCE

LOOK AFTER YOURSELF

LEARN FROM MISTAKES

BUILD POSITIVE RELATIONSHIPS

KEEP CHALLENGING YOURSELF

FORGIVE YOURSELF

LEARN TO PROBLEM SOLVE EFFECTIVELY

DEVELOP A STRONG SOCIAL NETWORK

NEVER GIVE UP

CHALLENGE THOSE NEGATIVE THOUGHTS

PUT THINGS INTO PERSPECTIVE

LEARN FROM DIFFICULT SITUATIONS

DON'T BE AFRAID TO FAIL

DON'T BE AFRAID TO TAKE RISKS

WORK ON YOUR STRENGTHS

PAY ATTENTION YOUR OWN NEEDS

BE OPTIMISTIC

SET GOALS YOU CAN ACHIEVE

BE CONFIDENT IN YOURSELF

SPEND TIME REFLECTING

PAY ATTENTION TO YOUR FEELINGS