

# melomag

Free Health Guide!

Summer 2017 | Issue 25



**EARACHES  
AND EAR  
INFECTIONS**

**A SILENT  
KILLER  
BRAIN  
ANEURYSMS**

**LIFE'S LITTLE TREASURES  
BORN TOO SOON**

**All-year's  
RESOLUTIONS  
for your family**

**ANNUAL  
SCREENINGS  
FOR MEN  
AND  
WOMEN**

**GETTING  
ENOUGH  
ZZZZZ's?**



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| UPFRONT |

M E L O M E D  
PRIVATE HOSPITALS

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**GIVE-AWAY!**

*Eternal Child* is giving away a  
Serenity Pamper Package to one  
lucky reader worth R2200!  
See page 3 for details!

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## Rooibos Tea

**SIGNIFICANTLY  
LOWERS RISK OF  
TYPE 2 DIABETES**



Rooibos tea – already considered one of South Africa’s favourite beverages – has the potential to delay and prevent the onset and progression of type 2 diabetes (T2D).

In a recent study, just completed by Prof Christo Muller and his team of researchers, Rooibos extract achieved significant glucose-lowering results in diabetic non-human primates, which has been described as a breakthrough discovery. These results will be published this year and human trials have been earmarked for 2018.

**“Diabetes is amongst the most prevalent diseases of lifestyle of our time, with about one in 14 South Africans between the ages of 21 and 79 suffering from the condition. Currently more than 3.5 million South Africans suffer from diabetes.**

“Our research found that an aspalathin-enriched extract of green Rooibos effectively lowered raised blood glucose levels in diabetic rats.

“Aspalathin is a unique phenolic compound (an element produced

by the plant to help protect itself from negative environmental factors), found only in the Rooibos plant (*Aspalathus linearis*), which has been shown to contribute significantly to the biological benefits of Rooibos,” explains Prof Christo Muller, chief specialist scientist at the SA Medical Research Council (SAMRC).

**“Rooibos is a unique South African plant, which offers almost limitless health benefits. The plant’s medicinal properties continue to astound scientists. I believe we’ve only just scratched the surface of Rooibos’ incredible healing potential,”** he remarks.

**Here are some of the benefits that may be derived from drinking Rooibos tea:**

- Improved insulin sensitivity
- Reduced risk of developing type 2 diabetes
- Reduced risk of developing type 2 diabetes-associated cardiovascular disease
- Maintaining healthy blood pressure
- Preventing blood clots

## SOME LIKE IT HOT... and live happily ever after.

There has been much evidence showing the benefits of eating spicy foods, including a reduced risk for certain types of cancer. It’s believed the health benefits come from a substance called capsaicin, which is found in hot chillies.

Now, a new study further strengthens this earlier research. For this study, a food frequency questionnaire was used to determine the consumption of hot red chillies over the past month in 16 179 adults over the age of 18 who took part in the National

Health and Nutritional Examination Survey III between 1988 and 1994. Researchers found that those who ate hot red chilli peppers had a 13% lower risk of mortality from all causes compared to those who did not consume the chillies.

**According to researchers, eating hot red chilli peppers was most strongly associated with a reduced risk of death from cardiovascular diseases, including heart attack and stroke.** More studies are needed to determine how pepper consumption extends lifespan.



Source: MNT



## BENEFITS FROM EATING WELL

Need another reason to bother with eating well? There’s increasing evidence a good diet doesn’t just prevent disease, but may help ward off mental health problems too.



## BIG LESSONS in Grade One FOR PARENTS OF ADHD PUPILS

**For any parent, watching their child scuttle off to the classroom in their new, too-big uniform on the first day of school is exciting and overwhelming.** It marks the beginning of a new phase in the child’s life and the start of a future full of possibilities. It’s for this reason both parents and teachers should be acutely aware of the symptoms of ADHD to ensure they don’t go unnoticed – and untreated.

**•FIRST-TIMER FRUSTRATION**  
Child psychiatrist and author Dr Brendan Belsham says Grade One is a time when children with ADHD display the symptoms of ADHD

more obviously than in previous years. “The three clusters of ADHD symptoms – inattentiveness, hyperactivity and impulsivity – become more apparent when greater demands are placed on the child’s capacity to self-regulate.”

**•BEYOND THE CLASSROOM**  
ADHD symptoms teachers will recognise quickly in the classroom are: the child being easily distracted and forgetful, and prone to blurting out answers and not following instructions fully. There are, however, other consequences of undiagnosed ADHD for first-time school-goers, outside the classroom.

“Children with ADHD often unintentionally antagonise their peers because they battle to take turns and adhere to rules, which are both basic functions of child’s play,” describes Belsham. **“They’re alienated by their peers as a result and act out in a desperate attempt for attention, which further pushes their peers to exclude them even more. This makes it difficult for them to form friendships in their new class.”**

**•LONG-TERM IMPACT**  
Parents and teachers should both be on the lookout for symptoms of ADHD in the early grades of school, to avoid damage to the academic foundation

and self-esteem of the child. If teachers pick up symptoms of undiagnosed ADHD, they should immediately consult with the child’s parents and give information at an observational level – but avoid trying to diagnose the child themselves, says Belsham. “It’s much more common for teachers to detect symptoms of ADHD, as they’re exposed to behaviours that exacerbate these symptoms.

“Parents, on the other hand, don’t always witness their child’s struggles with concentration, as the child isn’t under pressure to focus for extended periods of time at home,” says Belsham.

**•FIRM FEEDBACK**  
Teachers should be sensitive, respectful and firm in their approach to relaying their concerns to parents. “Parents of newly diagnosed ADHD children need to know it’s not a reflection of bad parenting or a condition that has to fundamentally interfere with the functioning of the child. ADHD is highly treatable and, with the right treatment from the early school years, children with ADHD can thrive throughout their school careers,” concludes Belsham.

*For more information about ADHD, visit [myadhd.co.za](http://myadhd.co.za).*

ENTER TODAY & WIN

**Eternal Child is giving away a Serenity Pamper Package to one lucky reader!**



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Back scrub, Full body massage, Indian Head massage, Deep cleanse facial and Foot soak & scrub. A gift and a snack for you and your partner.  
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To stand a chance to qualify, email your name, contact number and answer to the following question to: [melomag@melomag.co.za](mailto:melomag@melomag.co.za) with **Melomag 25** in the subject line. Competition closes 31 March 2017.

**Babies are termed premature if they are born alive before ? completed weeks of pregnancy. (See page 17.)**

Prize sponsored by Eternal Child. Contact: 072 159 4721 | [www.eternalchild.co.za](http://www.eternalchild.co.za)  
Give-away terms and conditions: The winner will be the first correct entry drawn after the closing date. In the event of the judges not being able to get hold of winners on details supplied, alternative winners will be selected. The judges’ decision is final and no correspondence will be entered into. The winners must be prepared to be photographed for publicity purposes. The prize is not transferable and may not be converted into cash.



# YOUR CHECKLIST FOR HEALTH SCREENINGS BY AGE

Most people know to visit the dentist once every six months, but when was the last time you were screened for skin cancer? If you can't prevent a disease, catch it early. Use our guide to check what tests to discuss with your doctor at each stage of your life.

20s

**SKIN EXAM**  
**TESTICULAR EXAM**  
**EYE EXAM**  
**BLOOD PRESSURE SCREENING**  
**HEARING TEST**

Yearly  
Yearly  
Every 1-2 years  
Every 2 years  
Every 10 years



20s

**SKIN EXAM**  
**PELVIC EXAM**  
**EYE EXAM**  
**BLOOD PRESSURE SCREENING**  
**PAP SMEAR**  
**HEARING TEST**

Yearly  
Yearly  
Every 1-2 years  
Every 2 years  
Every 3 years  
Every 10 years



20s

**BLOOD GLUCOSE TEST**  
Tests risk for diabetes

**BLOOD PRESSURE SCREENING**  
Tests risk for heart conditions

**BONE DENSITY TESTING**  
Tests for signs of osteoporosis

30s

**SKIN EXAM**  
**TESTICULAR EXAM**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**CHOLESTEROL SCREENING**

Yearly  
Yearly  
Every 2 years  
Every 5 years  
Every 5 years



30s

**SKIN EXAM**  
**PELVIC EXAM**  
**BLOOD PRESSURE SCREENING**  
**THYROID STIMULATING HORMONE**  
**PAP SMEAR**  
**BLOOD GLUCOSE TEST**  
**CHOLESTEROL SCREENING**

Yearly  
Yearly  
Every 2 years  
Every few years  
Every 3 years  
Every 5 years  
Every 5 years



30s

**CHOLESTEROL SCREENING**  
Tests risk for heart disease

**COLONOSCOPY** - Tests for colorectal cancer, or precancerous polyps

**CORONARY SCREENING**  
Tests for heart disease

40s

**CHOLESTEROL SCREENING**  
**SKIN EXAM**  
**TESTICULAR EXAM**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**PROSTATE EXAM**

Yearly  
Yearly  
Yearly  
Every 2 years  
Every 3 years  
If high risk of prostate cancer



40s

**CHOLESTEROL SCREENING**  
**MAMMOGRAM**  
**PELVIC EXAM**  
**SKIN EXAM**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**BONE DENSITY TESTING**  
**OVARIAN SCREENING**  
**PAP SMEAR**

Yearly  
Yearly  
Yearly  
Yearly  
Every 2 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years



40s

**EYE EXAM** - Tests for vision, glaucoma, and macular degeneration

**FECAL OCCULT BLOOD TEST**  
Tests for early signs of colon cancer

**HEARING TEST**  
Tests ear function

50s

**CHOLESTEROL SCREENING**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**COLONOSCOPY**  
**TESTICULAR EXAM**  
**PROSTATE SCREENING**

Yearly  
Every 2 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years



50s

**CHOLESTEROL SCREENING**  
**CORONARY SCREENING**  
**FECAL OCCULT BLOOD TEST**  
**MAMMOGRAM**  
**PELVIC EXAM**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**BONE DENSITY TESTING**  
**OVARIAN SCREENING**  
**PAP SMEAR**  
**COLONOSCOPY**

Yearly  
Yearly  
Yearly  
Yearly  
Every 2 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 10 years



50s

**HERPES BOOSTER**  
Prevents shingles

**MAMMOGRAM**  
Tests for signs of breast cancer

**OVARIAN SCREENING**  
Tests for signs of ovarian cancer

**PAP SMEAR**  
Tests risk for cervical cancer

**PELVIC EXAM**  
Checks for signs of cancer

60s +

**CHOLESTEROL SCREENING**  
**CORONARY SCREENING**  
**BLOOD PRESSURE SCREENING**  
**BLOOD GLUCOSE TEST**  
**COLONOSCOPY**  
**HEARING TEST**  
**PROSTATE SCREENING**  
**TESTICULAR EXAM**  
**HERPES BOOSTER**  
**PNEUMONIA**

Yearly  
Yearly  
Every 2 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Once  
Once



60s +

**CHOLESTEROL SCREENING**  
**CORONARY SCREENING**  
**FECAL OCCULT BLOOD TEST**  
**MAMMOGRAM**  
**PELVIC EXAM**  
**BLOOD PRESSURE**  
**BONE DENSITY TESTING**  
**BLOOD GLUCOSE TEST**  
**COLORRECTAL SCREENING**  
**OVARIAN SCREENING**  
**PAP SMEAR**  
**COLONOSCOPY**  
**HERPES BOOSTER**  
**PNEUMONIA**

Yearly  
Yearly  
Yearly  
Yearly  
Yearly  
Every 2 years  
Every 2-3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 3 years  
Every 5 years  
Once  
Once



60s +

**PNEUMONIA**  
Protects against pneumonia

**PROSTATE EXAM / SCREENING**  
Tests for prostate cancer

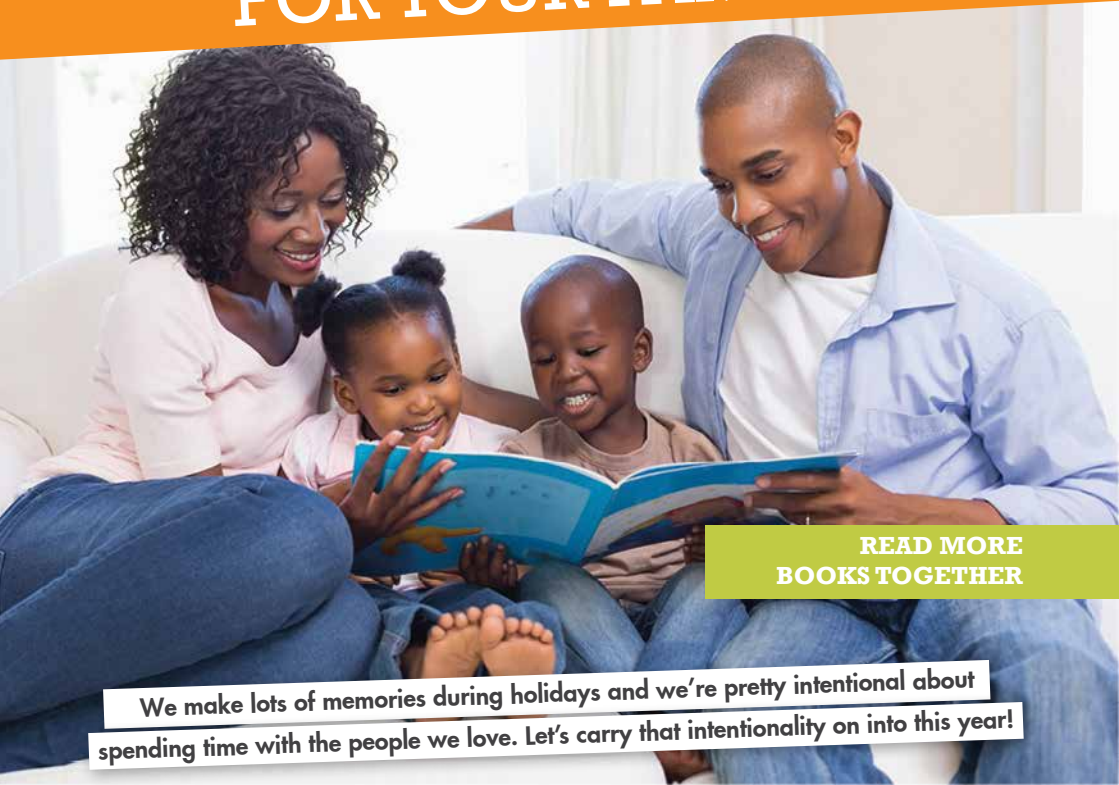
**SKIN EXAM**  
Tests for signs of skin cancer

**TESTICULAR EXAM**  
Tests for signs of testicular cancer

**THYROID STIMULATING HORMONE TEST**  
Tests for underactive or overactive thyroid

Disclaimer: This is an approximate timeline, and does not represent a complete list of possible health screenings. The age and frequency of screenings may change based on your personal health risks and family history. Talk to your doctor to determine which medical tests are right for you.

# ALL-YEAR'S RESOLUTIONS FOR YOUR FAMILY



READ MORE BOOKS TOGETHER

We make lots of memories during holidays and we're pretty intentional about spending time with the people we love. Let's carry that intentionality on into this year!

## DON'T OVERWHELM YOURSELF AT THE BEGINNING – RATHER SET UP ALL-YEAR RESOLUTIONS OR GOALS FOR YOUR FAMILY.

Many people make New Year's resolutions or goals come January. Your list of resolutions looks like a tall order, but you think this is the year you're definitely going to follow through with them all.

Before you know it, it's the middle of January and half of them have been justified into oblivion. It starts with "I don't really need to do that" for the first half, then it turns to "I just don't have time" for the rest of the list. We have all gone through it. **The key is to start slowly – one resolution at a time...**

## IF YOU HAVEN'T DECIDED ON ANY OR GIVEN MUCH THOUGHT TO ALL-YEAR'S

## FAMILY RESOLUTIONS, HERE IS A LIST OF 20 POSSIBILITIES:

- 1 **Begin or end the day with a family devotion.**
- 2 **Start a weekly ritual:** have a family movie or game night.
- 3 **No devices.** No phones, tablets and other devices at mealtime. Connect by disconnecting.

- 4 **Read more books together –** start a family book club.
- 5 **Exercise and play** together – make it fun, goal-oriented and preferably outside. Train for a 5k run together or aim to complete a particular hike in your area.
- 6 **Practice hellos and goodbyes.** It is really important giving family members warm greetings and farewells. Instead of waving a quick "bye" when you or your loved ones rush out of the house in the morning, take a little time to give a hug or a kiss and a genuine, "I love you. Have a great day!" Same goes for when you greet each other at the end of the day.
- 7 Have more (healthy) **family meals around the table** and let your kids help with preparing dinner.
- 8 Go on **regular dates** with your spouse and each of your kids.
- 9 **Leave love notes** in your kid's lunchbox or on your spouse's mirror.
- 10 **Acquire** fewer things.
- 11 Keep on top of **family photos:** find a system for digital files and hard-copy prints.
- 12 **Volunteer as a family:** at their school, church or with a charitable organisation.
- 13 **Teach your kids about money:** start a chore system or help them make small financial decisions, like how to spend their birthday money.
- 14 Save up for a **family vacation.**
- 15 **Have weekly family meetings** about "The Good, The Bad and The Ugly" of a week in the life of the (insert surname) family.
- 16 **Take a "duvet day"** from school and work – just once! – and spend the day together. Whether you just stay home in your pajamas all day, go see a movie, or plan a trip to the beach, it'll make it that much more exciting knowing you're sort of breaking the rules together.
- 17 **Help save the environment.** Take steps to become more eco-friendly as a family. Get your children involved in recycling, teach them to always turn off the water while they brush their teeth, and make sure everyone switches off the lights when they leave a room.
- 18 Keep things **tidy.**
- 19 **Learn new skills or try new activities** together.
- 20 **Tuck your kids into bed** and snuggle with them, even when you're exhausted and just want to collapse on the couch. Remember that someday they won't want you to anymore.

## JUST TAKE IT SLOWLY – NO RUSH TO TICK OFF THE WHOLE LIST BY END OF JANUARY! YOU CAN MAKE CHANGES AND ADD THINGS TO YOUR LIFE SLOWLY!

Look back at your list of resolutions and pick one or two things to focus on for January, and then February and so forth.

Build systems to help you achieve those two things – let's say you want to drink more water and start going to bed earlier. Systems that help you drink more water are: carrying a water bottle with you most of the time, buying flavoured water until you adjust to regular water, writing post-its in places that will remind you, etc. Systems to help you get to sleep earlier are: setting an alarm for when it's time for you to start preparing for bed, having a ritual that relaxes you, reading a favourite book each night, etc.

## SYSTEMS ARE THE KEY TO ACHIEVING GOALS WHEN LIFE GETS A LITTLE HECTIC, AS IT ALWAYS DOES.

As you achieve these two goals, you'll start having success and seeing results. Once these things start to become habits and you feel comfortable with them, add a couple other goals from your list. Slowly as the year progresses, you'll have more and more goals incorporated into your everyday lifestyle, not causing you stress and leaving you overwhelmed. ■

# GETTING ENOUGH ZZZZZZZ'S TO BRING YOUR A GAME

**Getting enough sleep is arguably one of the best things you can do for your health. How can you make the most of it? Sleep is just as vital to our growth and development as breathing air. No matter what age you are, sleep plays a role in helping your body reset, repair, and regenerate.**

A good night's sleep is incredibly important for health. Lab rats deprived of sleep die within a month, and people who inherit the rare disease fatal familial insomnia meet the same fate, but on a longer timescale. We still don't know why. But while the fundamental reasons for sleep remain a mystery, the many ways it affects our well-being are frequently in the news.

**Lack of sleep can take a toll on nearly every part of your life.** Research links sleep deprivation to car accidents, relationship troubles, poor job performance, job-related injuries, memory problems and mood disorders. Increasingly, a lack of sleep is implicated in mental health problems including depression, bipolar disorder and schizophrenia, and neurological conditions like Alzheimer's disease. Recent studies also suggest sleep disorders affect your immune system and appetite and

may contribute to heart disease, obesity, and type 2 diabetes.

**But just as we are learning that sleep is vital for so many facets of good health, it seems we are also failing to get enough of it.**

A recent report says we get an hour less than we need each night. We sleep on average 7 hours in stead of 8 hours per night. To reap the benefits of a good night's rest, there are three things you need to consider: how much you sleep, how well, and when. Carving out the time to visit the land of nod is one thing, but guaranteeing good quality rest can be beyond our control.

**A FEW FACTORS THAT MIGHT IMPACT ON THE "HOW WELL" YOU SLEEP:**

### THE "FIRST-NIGHT EFFECT"

People often sleep poorly their first night in a new place. This may be an evolutionary adaptation, keeping part of your brain alert to

make sure the new environment is safe.

### SOUNDS AND NOISE

Even in a familiar environment, sounds like your partner snoring, a snuffling dog or planes overhead can interfere with sleep, whether you're aware of them or not. They may force us to transition out of a deeper stage of sleep. If they wake you up, you may not realise it was a noise that roused you.

### TEMPERATURE

Studies show that people with sleep disorders who wake up a lot during the night can benefit from wearing a suit that slightly warms the skin. Counter-intuitively, this helps the body to release more heat. The cooling effect reduces the number of awakenings and also leads to more restorative slow-wave sleep. Taking a hot bath before bed can help achieve the same thing.

### SCREEN TIME

The blue light given off by computers, smartphones, tablets, and TV prevents the production of melatonin which helps the body become sleepy. That makes the effects of blue light on our body clocks particularly insidious – it affects sleep quality as well as quantity.

A recent study compared the sleep patterns of those who read a book on an iPad before bed with those who read print. After a few days, those using the electronic devices were getting less REM sleep, not only because it took them longer to nod off, but because their circadian rhythms also shifted about an hour and a half later. Something similar happens when you have to get up unusually early.

### MEDICATION

Mental health problems such as

depression, anxiety, and post-traumatic stress disorder can also cause insomnia. Unfortunately, some of the medications used to treat these conditions can also cause sleep problems. If you think you're losing ZZZs and your medication is to blame, talk to your doctor about adjusting your treatment.

### WHEN IS THE BEST TIME TO GO TO BED?

The earlier the better? 11 PM? Sundown? Sleep experts say it's not that simple. But there is a time range you should shoot for if you're questing for a perfect night's sleep. **The more sleep cycles we go through, the longer the duration of REM sleep in each cycle.**

REM sleep is crucial for incorporating things we've learned into our existing



knowledge, for regulating our emotions, and might also play a critical role in brain development. The bulk of REM sleep tends to happen in the hours just before we get up. That's because more builds up in the second half of the night.

**When it comes to bedtime, there's a window of several hours – roughly between 8 PM and midnight – during which your brain and body have the opportunity to get all the non-REM and REM shut-eye they need to function optimally.**

Your genes dictate whether you're more comfortable going to bed earlier or later within that rough 8-to-midnight window. ▶▶



Sources: newscientist.com, ariannahuffington.com, time.com, nhs.uk



**39%**  
OF PEOPLE

in the US use their  
cellphone when trying  
to get to sleep

### THE SLEEP TRICK

To pinpoint the exact time, the easiest way is to go backwards. Figure out what time you need to wake up and subtract seven to eight hours, adding about 15 minutes for your body to fall asleep. Do this for about 10 days, suggests the sleep specialists, and you should start naturally waking up a few minutes before your alarm sounds.

### HOW MUCH SHUT-EYE DO YOU NEED?

GENERAL GUIDELINES ARE:  
(it varies from person to person)

- 12-15 hours for infants
- 11-14 hours for toddlers (ages 1-3)
- 10-13 hours for preschoolers (ages 3-5)
- 9-11 hours for schoolchildren (ages 6-13)
- 8-10 hours for teens (ages 14-17)
- 7-8 hours for adults

Keep in mind that some adults need 5 hours, while others need as many as 10.

### HERE ARE 5 REASONS WHY GOOD SLEEP IS IMPORTANT.

#### 1. POOR SLEEP CAN MAKE YOU FAT

IT TAKES **5** MINUTES

for you to fall asleep if you are sleep deprived - the ideal is 10-15 minutes

Poor sleep is strongly linked to weight gain. In fact, short sleep duration is one of the strongest risk factors for obesity. Studies show that sleep deprived individuals have a bigger appetite and tend to eat more kilojoules.

#### 2. GOOD SLEEP CAN IMPROVE MENTAL AND PHYSICAL PERFORMANCE.

Cognition, concentration, productivity and performance are all negatively affected by sleep deprivation. Poor sleep has been shown to impair brain function. **Good sleep can maximise problem-solving skills and enhance memory and athletic performance. In a study on basketball players, longer sleep was shown to significantly improve speed, accuracy, reaction times, and mental wellbeing.**

#### 3. POOR SLEEPERS HAVE A GREATER RISK OF CHRONIC DISEASES.

We know that sleep quality and duration can have a major effect on many risk factors believed to drive chronic diseases. Sleeping less than 7-8 hours per night is linked to an increased risk of heart disease and stroke. Sleep deprivation can also cause pre-diabetes in healthy adults, in as little as six days.

**1.2**  
MINUTES

is the sleep lost per night for each cigarette you smoke during the day

Many studies show a strong link between short sleep duration and type 2 diabetes risk.

#### 4. LACK OF SLEEP AFFECTS MENTAL HEALTH AND SOCIAL INTERACTIONS.

Mental health issues, such as depression, are strongly linked to poor sleep quality and sleeping disorders. **It has been estimated that 90% of patients with depression complain about sleep quality.** Lack of adequate sleep affects mood, motivation, judgment, our perception of events, and reduces our ability to interact socially. One study found that people who had not slept had a reduced ability to recognise expressions of anger and happiness.

#### 5. SLEEP IMPROVES YOUR IMMUNE FUNCTION

Even a small loss of sleep has been shown to impair immune function. One large two-week study monitored the development of the common cold after giving people nasal drops with the virus that causes colds.

**They found that those who slept less than 7 hours were almost three times more likely to develop a cold than those who slept 8 hours or more. ■**

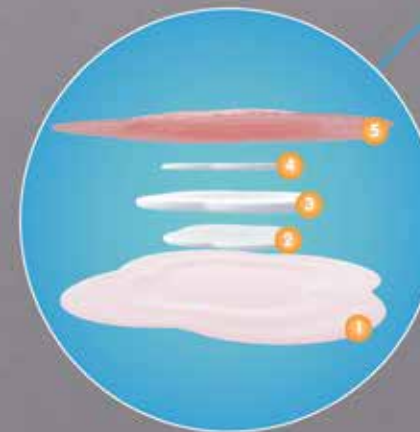
**98%**

of clinicians would recommend ALLEVYN Life for use in their practice.<sup>1</sup>

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**ALLEVYN**<sup>®</sup>  
Life

Designed for people who happen to be patients

ALLEVYN Life contours the human body for a secure fit and allows patients to shower<sup>2,3</sup>.



1. Silicone adhesive
2. Hydrocellular foam
3. Hyper absorbent lock-away core
4. Protective masking layer
5. Highly breathable film<sup>4</sup>

[www.allevyn.com](http://www.allevyn.com)

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# EAR INFECTIONS AND EARACHE

Summer is the perfect time for swimming, surfing and pool parties and many of us will be taking part in various water sports and activities. This is also the perfect time to discuss ear infections which are often caused by exposure to water.

ALTHOUGH EAR INFECTIONS ARE EXTREMELY COMMON THERE IS A GREAT DEAL OF MISUNDERSTANDING REGARDING DIFFERENCES BETWEEN DIFFERENT TYPES OF EAR INFECTIONS. HOPEFULLY THIS ARTICLE WILL GIVE SOME CLARITY ON THE SUBJECT AND PROVIDE TREATMENT GUIDELINES.

There are two types of ear infections depending on the site of origin. An outer ear infection or **acute otitis externa** (AOE) is an infection of the tube connecting the outer ear and eardrum and a middle ear infection or **acute otitis media** (AOM) is an infection of the parts of the ear behind the eardrum.

Both types of ear infections are very common causes of earache.

## WHAT IS OTITIS EXTERNA?

Otitis externa, also known as "**swimmer's ear**", is the inflammation and infection of the skin of the entire outer ear canal. The infection can be localised and then forms an abscess or furuncle. Acute otitis externa can affect any gender and age and is caused by bacteria. Occasionally, a fungal or yeast infection can occur, especially if antibiotic ear drops are used too often and for prolonged periods of time.

## CAUSES OF ACUTE OTITIS EXTERNA

- **Excessive cleaning** of the ear canal with ear buds or finger nails will remove the protective layer of wax.
- **Frequent exposure** to water, in regular swimmers.
- **Weather** – hot and humid climates encourage growth of bacteria in the ear canal.
- **Skin conditions** such as eczema and psoriasis may affect our ear canals and cause otitis externa.
- **Chemicals** including soaps, shampoo, hair sprays and dye might cause ear irritation and infection.

## SYMPTOMS OF ACUTE OTITIS EXTERNA

- Patient presents with **pain, fullness or pressure** in the ear and a watery or purulent, foul-smelling ear **discharge**.
- As the **condition worsens** pain may become severe and the ear canal may become completely occluded because of swelling and debris causing hearing impairment.
- Ear is **extremely painful** on touching or when chewing.

## TREATMENT FOR ACUTE OTITIS EXTERNA

- The treatment goal is to **cure the infection** and to return the ear canal to a healthy condition.
- When the **infection is very mild** and in the **initial stages**, simply refraining from swimming or washing hair

for a few days can get the infection under control.

- However if the **infection becomes severe** with severe pain and ear discharge it is recommended to seek medical care.
- In some cases the **drainage** in the ear canal builds up, and the infection won't clear until the debris and pus is removed. Referral to an otolaryngologist (an ear, nose, and throat (ENT) specialist) may be required.
- **Once the ear is clean**, the infection will be treated with antibiotic ear drops or combined antibiotic and steroid drops. The antibiotic will help to fight the infection, and the steroid will reduce inflammation and swelling. The infection will resolve within a few days.
- In a few cases when the ear canal is very swollen and ear drops will not penetrate the ear canal the physician will insert a wick saturated with antibiotic ear drops for a few days.
- **Pain medication** either OTC or prescription is often needed for a few days until the infection is under control.
- Although acute otitis externa will resolve within a few days with local antibiotic ear drops, the complete return of hearing and production of normal wax will take a few more days.
- **The ear canal should be kept dry** during treatment. An

earplug or small cotton ball can be used during bathing to keep water out.

- Only in a few cases if the infection extends to the pinna or the face, an oral or systemic antibiotic might be prescribed, or in severe cases admission to a hospital, where intravenous antibiotics can be administered, is necessary.

**If the infection persists and there is a poor response to the antibiotics one has to exclude other causes of otitis externa such as:**

- A fungal or yeast infection. **Treatment:** In case of fungal otitis externa, the ear canal must be cleaned and anti-fungal drops or ointment inserted.
- A localised infection causing an abscess or furuncle. **Treatment:** An abscess of the ear canal, if not responding to systemic or oral antibiotics, must be drained by a doctor.

## PREVENTION OF ACUTE OTITIS EXTERNA

- **Keep your ears dry.** Dry your ears after swimming or showering.
- Avoid swimming in **polluted water**.
- Use well-fitted and clean **ear plugs**.
- **Avoid** the use of cotton buds. Your ears have a self-cleaning mechanism.
- **Treat skin conditions** such as eczema and psoriasis. ➤



## WHAT IS OTITIS MEDIA OR MIDDLE EAR INFECTION?

Otitis media is an infection of the middle ear that causes inflammation (redness and swelling) and a build-up of fluid behind the eardrum.

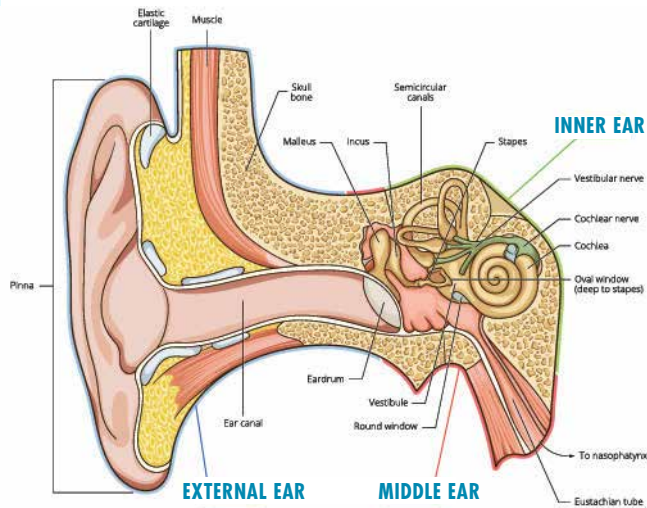
Acute otitis media is often seen in children between three to six years old and only sometimes occurs in adults.

Younger children are more prone to middle ear infections because of the shape and size of their Eustachian tube, which is the passage connecting the middle ear to the throat. Under normal circumstances this passage remains open and allows unwanted fluids and debris to drain from the ear to the back of the throat.

**Most middle ear infections occur when an infection such as a cold, leads to a build-up of mucus in the middle ear and causes the Eustachian tube to become swollen or blocked.** This means mucus can't drain away properly, making it easier for an infection to spread into the middle ear.

### CAUSES OF ACUTE OTITIS MEDIA

- Ear infections often originate from *viral colds*.
- *Children who are exposed to other children* such as in day care settings are at higher risk of catching common colds and thus ear infections.



- Exposure to *cigarette smoke*.
- *Allergies* to pollen, dust, etc.
- *Bottle-feeding*, if being fed while lying down, causes the collapse of the Eustachian tube and can lead to middle ear infection.
- *Enlarged adenoids* obstructing the eustachian tube and preventing drainage of fluid from the middle ear.

### SYMPTOMS OF ACUTE OTITIS MEDIA

- Acute otitis media usually starts with a *common cold*.
- The child presents with a localised *mild earache* which becomes severe as the infection progresses.
- *This is associated with* hearing impairment, fever and generally not feeling well.

### SIGNS IN YOUNG CHILDREN

As babies are unable to communicate the source of discomfort, it can be difficult

to tell what's wrong with them. Signs that a young child might have an ear infection include:

- *Pulling, tugging or rubbing* their ear
- *Irritability*, poor feeding or restlessness at night
- *Coughing*, or a congested or runny nose
- *Diarrhoea*
- *Unresponsiveness* to quiet sounds or other signs of difficulty hearing, such as inattentiveness
- *Loss of balance*
- Purulent ear *discharge*.

### TREATMENT FOR ACUTE OTITIS MEDIA

Most ear infections clear up within three to five days and don't need any specific treatment.

### HOWEVER, SEE YOUR GP IF YOU OR YOUR CHILD HAVE:

- *symptoms* showing no sign of improvement after two or three days

- *persistent fever* and lot of pain
- *a discharge* of pus or fluid from the ear.

After being assessed by the doctor the child might be treated with a systemic, oral antibiotic and medication for pain and fever. Most children respond well to the treatment.

If there is no response to the antibiotic the child should be referred to an ENT specialist for possible drainage of the middle ear infection.

### COMPLICATIONS OF ACUTE OTITIS MEDIA

- *Perforation* of tympanic membrane, ear drum.

- *Glue ear* or serous otitis media.

### PERFORATION OF THE EAR DRUM

In some children with acute otitis media, if the infection was not diagnosed and treated adequately, in time perforation or rupture of the ear drum may occur.

**In most cases it will heal spontaneously, especially with the help of antibiotics.**

In some children however, perforation in the ear drum becomes permanent causing hearing impairment and chronic ear discharge and will require surgical treatment.

### "GLUE EAR" OR SEROUS OTITIS MEDIA

Glue ear is caused by accumulation of sterile fluid in the middle ear after a bacterial infection was treated with antibiotics. Sometimes this fluid is not absorbed or drained via the swollen or blocked eustachian tube and does not respond to treatment with antibiotics. As a result, the child might develop hearing impairment, slow speech and poor motor skills.

**To prevent this, drainage tubes called "grommets" are inserted in the middle ear to drain fluid.** This procedure is done under general anaesthetic by an ENT specialist. ■



**Younger children are more prone to middle ear infections because of the shape and size of their Eustachian tube which is the passage connecting the middle ear to the throat.**



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## LIFE'S LITTLE TREASURES BORN TOO SOON

Hearing the words, "You are pregnant", can, for some, be the best day of their lives, but others meet the news with, 'Oh no!' Whether the pregnancy is planned or unplanned, it is an absolute miracle.

**THE 'BORN TOO SOON' REPORT** states that 15 million babies are born too soon each year, and that premature birth rates are rising. About ten per cent of South Africa's babies are born prematurely.

However, the possibility of delivering prematurely is something that barely crosses the minds of expectant parents as they dream and excitingly plan for their perfect, healthy bundle of joy.

Suddenly and unexpectedly, your baby arrives much earlier than anticipated; you are no longer dreaming of your baby, the miracle is right in front of you, much smaller and fragile than you

could ever have imagined.

**The unexpected premature arrival of your baby can be a nerve-wracking and frightening experience.**

**IN THIS ARTICLE, WE LOOK AT WHY YOUR PREMATURE BABY IS SPECIAL AND WHAT YOU MAY ENCOUNTER WITH YOUR LITTLE TREASURE, BORN TOO SOON.**

**Babies are termed premature if they are born alive before 37 completed weeks of pregnancy.** Of these, 83 per cent are moderate to late premature (32 to <37weeks), ten per cent are very premature

(28 to <32 weeks) and five per cent are extremely premature (<28 weeks).

**THE REASONS FOR PREMATURE BIRTH ARE VARIED.** Known factors that may increase the risk of premature birth include having had a previous premature baby, a pregnancy with twins or more, problems with the uterus, cervix or placenta, smoking, alcohol and other recreational drug abuse during pregnancy, infections of the amniotic fluid and lower genital tract, high blood pressure, diabetes and physical injury or trauma. In certain cases the cause is unknown. ▶▶

**Avoiding premature birth is dependent on the cause.**

Medical conditions presenting before or during pregnancy must be managed well by the obstetrician or other appropriate specialist.

**WHERE AND WHO WILL CARE FOR MY BABY?**

Depending on the premature baby's age, weight and specific needs, the baby may need to be taken to the neonatal intensive care unit (NICU).

**This is the best place for your baby to receive the support and care he or she requires.**

It is normal to feel anxious about your baby's stay in NICU. Don't be afraid to ask questions of the doctors and nurses so that you understand your baby's condition, the various equipment and alarms. This will allow you to feel more relaxed.

**IT IS PREFERABLE THAT PREMATURE BABIES BE MANAGED BY A NEONATOLOGIST.**

A neonatologist is trained to handle the most complex and high-risk situations involving newborn health problems, especially those related to premature babies. Neonatologists – the best care for newborns.

**WHAT TO EXPECT**

Sometimes, babies are born before their bodies are ready to leave the womb.

**These are some of the complications that may be encountered:**

- + **THE SKIN IS IMMATURE,** resulting in an inability to control body temperature.
- + **PREMATURE BABIES ARE PLACED IN PLASTIC BAGS,** with only the face exposed, to keep them warm till they are stabilised in a warm incubator in the NICU.
- + **THE LUNGS OF PREMATURE BABIES** lack a substance called surfactant, which results in breathing problems. There are various ways the lungs can be supported while they continue to mature.
- + **PREMATURE BABIES CAN ALSO HAVE APNOEA,** which is long pauses in their breathing.
- + **THE TWO MOST COMMON PROBLEM WITH THE HEART IS PATENT DUCTUS ARTERIOSUS (PDA),** which is a persistent opening between the major blood vessels leading from the heart. Usually, the ductus arteriosus closes spontaneously but, occasionally, it remains open, making it difficult to wean the baby off a ventilator or oxygen.

In these cases, the PDA has to be closed either medically or surgically. The other problem is low blood pressure, which needs to be corrected.

- + **PREMATURE BABIES, LESS THAN 32- WEEK GESTATION, ARE AT RISK OF BRAIN HAEMORRHAGE AS THEIR BRAINS ARE IMMATURE AND SOFT.** Most bleeds are mild and resolve without any impact on brain development. Larger bleeds can cause permanent brain damage.
- + **FEEDING IS A CHALLENGE IN PREMATURE BABIES.** All mothers must endeavour to provide breast milk for their babies. It protects the baby from infection, especially necrotising enterocolitis (NEC).
- + **PROVIDING BREAST MILK FOR YOUR BABY IS THE BIGGEST CONTRIBUTION TO YOUR BABY'S WELLBEING!** The sucking and swallowing reflex only develops at 35 weeks, till then the baby is fed via feeding tube placed in the stomach.
- + **PRETERM BABIES ARE VULNERABLE TO INFECTION.** The most cost-effective method to protect them from infection is hand washing and providing breast milk.

You can also assist by doing **Kangaroo Mother Care (KMC), also known as skin-to-skin,** which is essential for good bonding, promotes better growth, temperature regulation and breast feeding. KMC can commence while your baby is in NICU.

Remember, the NICU management of a premature baby and weight gain is a slow and steady process.

Premature babies are ready to go home when they can breathe on their own, maintain their body temperature, have reached a certain weight and are able to feed well.

**THIS IS A BIG DAY! BE WELL PREPARED.**

**Remember that premature babies are at risk for developmental problems.**

Always attend your follow-up visits with your clinic sister, paediatrician or neonatologist.

You have been blessed with a little miracle, remain positive on this journey, embrace it, love your little bundle, and let your baby and this experience of parenthood shape you as a person/couple as much as you will shape your baby's future.

**GIVE HOPE, GIVE LIFE, GIVE MILK! ■**

*This article was first published in Muslim Views.*



**You have been blessed with a little miracle, remain positive on this journey.**



## MAKE AHEAD BREAKFASTS

### MORNING MEALS MADE EASY

With the leisurely holidays long forgotten, it's time to fall back into our mealtime routines for the hectic year. These more-ish, make-ahead recipes for the most important meal of the day will make sure you always have a healthy breakfast.

#### Why is breakfast so important?

Eating breakfast comes with numerous health benefits. Breakfast eaters are shown to have higher nutrient intakes and are more likely to maintain a healthy weight than those who skip breakfast.

A study of working adults found eating breakfast was associated with lower stress and fewer cognitive problems and accidents at work.

A wholesome breakfast (that isn't from a package) doesn't have to take hours of preparation. For the weekday rush and casual weekend entertaining, these dishes are speedily prepared the night before, doing the work for you while you sleep.

Children and teens who eat a healthy breakfast are shown to have enhanced concentration and physical performance at school. For some children, consistently eating breakfast can even help with math grades! If they're not hungry first thing, send them with a breakfast sandwich or jar of muesli to eat on their way to school.

Enjoying a healthy, protein-rich breakfast limits overeating at the next meal, curbs cravings, and prevents unnecessary snacking, all helping to maintain energy levels and a healthy weight.



## Overnight Yogurt and Oat Muesli with Berry Chia Jam

**SERVES 5** Muesli is the original make-ahead morning meal. Oats are soaked with fruit, yogurt, and nuts, "cooking" while you sleep. Here, it's paired with a jam made with the thickening power of chia seeds – no cooking required! This creamy, sweet-tart breakfast will keep you going until lunchtime.

**TAKE IT ON THE ROAD** Build parfaits in small glass canning jars for a week's worth of breakfasts to go.

#### Ingredients

- + 1 cup plain yogurt or nondairy plain coconut yogurt
- + 1 cup water
- + 2 tbsp + 2 tsp lemon juice
- + 2 tbsp honey, divided
- + 1 ml vanilla or almond extract
- + 1 apple, skin intact, cored and grated
- + 2 cups large flake organic rolled oats (not instant)
- + 1 cup chopped blanched almonds

- + 1 ml salt
- + 2 cups fresh or frozen berries (defrosted if frozen)
- + 2 tbsp chia seeds

#### Method

1. In large bowl, combine yogurt, water, 2 tbsp lemon juice, 1 tbsp honey, extract, and apple.
2. Stir in oats, almonds, and salt.
3. Cover and refrigerate for at least 8 hours or overnight.

4. Place remaining 2 tsp lemon juice, 1 tbsp honey, berries, and chia seeds in food processor. Blend until smooth.
5. Transfer to reusable container and refrigerate for at least 6 hours or overnight.
6. In the morning, give both muesli and jam a stir.
7. Scoop muesli into bowls and top with a swirl of jam. Or, layer muesli with jam in glasses to create breakfast parfaits.



## Baked Berry Banana French Toast

#### SERVES 6

This decadent French toast can be made for a crowd without having to clean up a big mess or standing over a hot stove. With this recipe, entertaining at breakfast involves minimal hands-on time or kitchen cleanup. The cinnamon aroma that will welcome your guests as they walk in the door is a bonus.

#### ENDLESS FRUIT OPTIONS

Bananas and blueberries can be replaced with equal amounts of any seasonal soft fruit. Try sliced peaches with raspberries in the summer or diced pear with cranberries in winter.

#### Ingredients

- + 2 tsp unsalted butter or coconut oil, room temperature
- + 8 large free-range eggs
- + 3 cups milk or unsweetened plain almond or soy milk
- + 2 tbsp maple syrup, plus more for serving
- + ½ tsp ground cinnamon
- + 1 ml salt
- + 8 thick slices whole grain or gluten-free bread, cut into 2.5 cm cubes (preferably day-old)
- + 2 bananas, peeled and sliced
- + 1 cup fresh blueberries or blackberries
- + 1/2 cup chopped nuts

#### Method

- + Grease a 23 x 33 cm glass or ceramic dish with butter or oil.
- + In a large bowl, beat eggs.
- + Whisk in milk, maple syrup, cinnamon, and salt.
- + Place half of bread cubes in greased dish, followed by banana slices and berries. Top with remaining bread. Slowly pour egg mixture over top. Cover and refrigerate overnight.
- + In the morning, preheat oven to 180°C. Uncover French toast, sprinkle with nuts, and bake for 50 minutes to 1 hour, until it is browned and centre is set. Slice and serve hot with additional maple syrup if desired. ▶▶

# Homemade Freezer Breakfast Sandwiches



## MAKES 6

Skip the drive-thru and make your own breakfast sandwich. Stored in the freezer, these make a great grab-and-go option for egg lovers. Heat one up while you're

getting ready for work or school and wrap it back up in parchment to enjoy on your commute – just don't forget a napkin and thermal mug of tea or coffee!

## SWITCH IT UP

Spinach can be replaced with chopped steamed kale or diced red bell pepper, and eggs can be livened up with your favourite herb, spice, or hot sauce.

## Ingredients

- + 8 large free-range eggs
- + 2 cups baby spinach, finely chopped
- + ¾ cup milk or unsweetened plain soy milk
- + 6 whole grain or gluten-free English muffins
- + ½ cup grated cheddar cheese

## Method

1. Preheat oven to 180°C. Line a 23 x 33 cm glass or metal dish with parchment paper, leaving some overhang.

- In large bowl, beat eggs. Whisk in spinach and milk. Pour into prepared pan.
- Bake for 20 to 25 minutes, or until toothpick inserted in centre comes out clean. Cool eggs completely. Leave oven on.
- Place English muffin halves on large baking sheet, cut-side up. Toast in oven for 5 minutes. Turn oven off.
- Remove eggs from pan using parchment overhang. Using cookie cutter or rim of a glass roughly the same size as English muffin, cut 6 egg rounds.

- Top 6 English muffin halves with 1 egg round per half, sprinkle cheese on each, and top with other half of muffin.
- Tightly wrap each sandwich in parchment paper and place in single layer in reusable container.
- Freeze overnight, or for up to 1 month.
- To reheat, preheat oven to 180°C. Place 1 or more frozen sandwiches on baking sheet. Bake from frozen for 25 to 30 minutes. Or, reheat in microwave for 1 to 2 minutes. ■

Source: [alive.com](http://alive.com)



[www.bentley.global](http://www.bentley.global)



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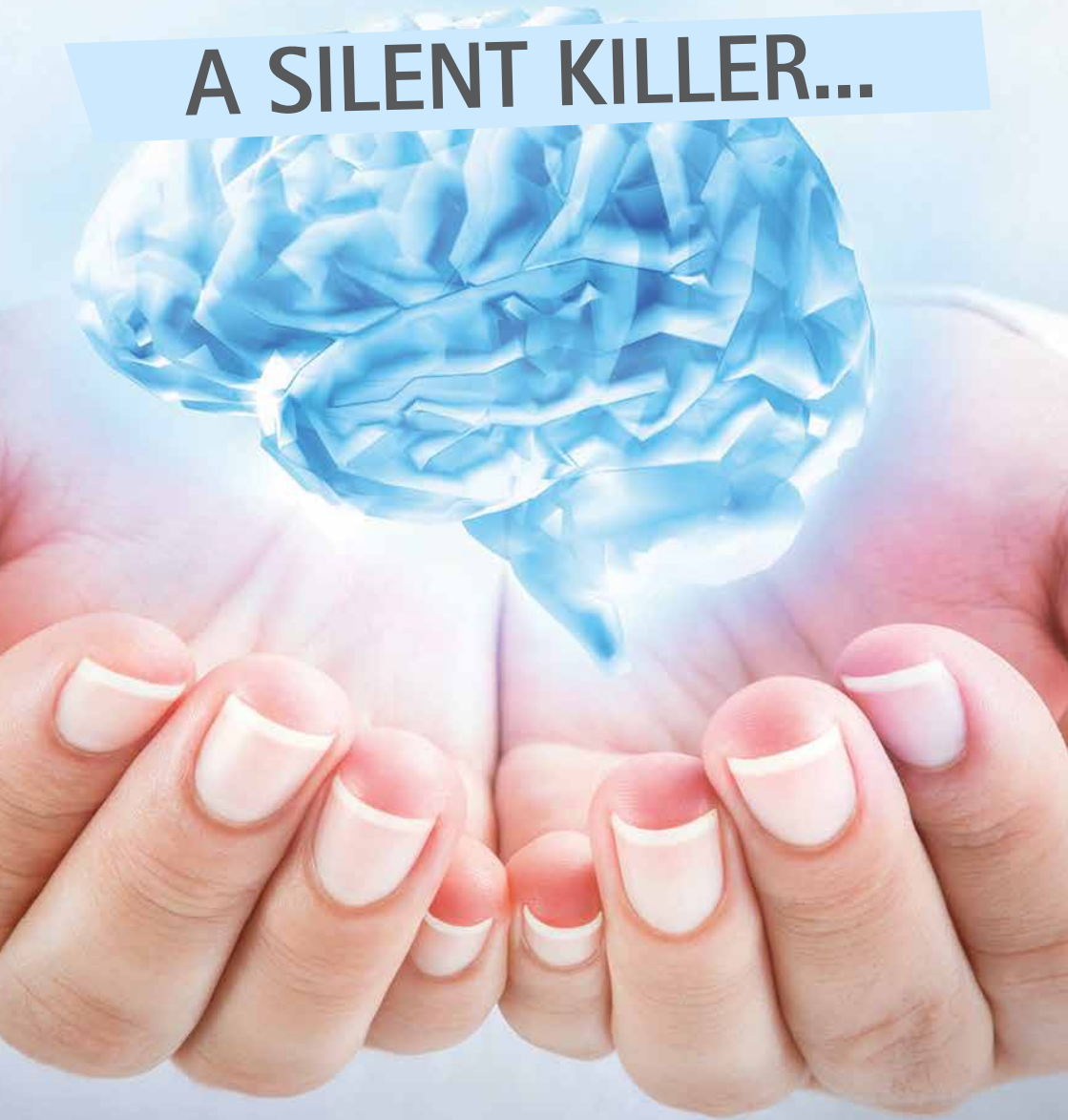
**Less trauma, faster procedures** through low profile (6F compatibility for all sizes)





## HOW TO SPOT A BRAIN ANEURYSM BEFORE IT'S TOO LATE...

# A SILENT KILLER...



Linda\*, a mother of two young children and a respected primary school teacher, was experiencing the worst headache of her life.

"She said it felt like her head was going to explode," recalls her husband, Tiaan\*. Along with her awful headache, she had a stiff neck, a tingling sensation in her face, and sensitivity to light. "The headache would last a couple of hours, and then it would subside for a day or two," Tiaan says. "We talked about her getting it checked out, but she didn't feel like she had time, so we dismissed it."

That decision, tragically, would prove fatal when in February 2016 – three weeks after her headaches first began – Linda suffered a ruptured aneurysm.

"One thing that has haunted me more than anything else is, how could we not have known?" Tiaan says. "The more I looked into aneurysms, the more I found that there's no one out there talking about them, and there's very little public education about the warning signs."

### ANEURYSM BASICS

**WHAT IS A BRAIN ANEURYSM?** It's a weakness in the wall of one of your brain's blood vessels. As blood flows through your brain, that weakness allows the wall of the vessel to push outward, forming a bulge. Like an over-inflated balloon, that bulge can rupture, which allows blood to leak out into the surrounding brain tissue.

But many aneurysms don't rupture, so we never realise we have one. Even if an MRI or other imaging scan stumbles onto an aneurysm, some doctors don't even recommend treatment unless it is above a certain size, or a person has a family history of ruptured aneurysms.

### WHAT CAUSES BRAIN ANEURYSMS?

Although researchers have made advancements in understanding how brain aneurysms develop, it is unclear as to what exactly causes the disease. A number of factors can contribute to weakness in an artery wall and increase the risk of a brain aneurysm.

Brain aneurysms are more common in adults than in children and more common in women than in men. Some of these risk factors develop over time; others are present at birth.

### RISK FACTORS THAT DEVELOP OVER TIME:

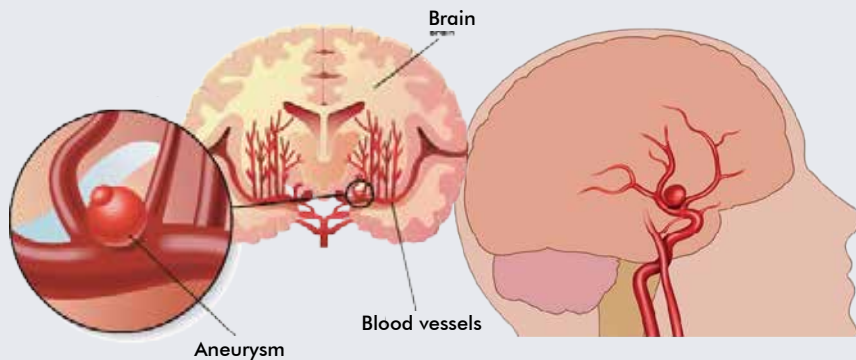
- Older age
- Smoking
- High blood pressure (hypertension)
- Hardening of the arteries (arteriosclerosis)
- Drug abuse, particularly the use of cocaine
- Head injury
- Heavy alcohol consumption
- Certain blood infections
- Lower oestrogen levels after menopause

### RISK FACTORS PRESENT AT BIRTH

- Family history of brain aneurysm, particularly a first-degree relative, such as a parent, brother or sister
- Inherited connective tissue disorders, such as Ehlers-Danlos syndrome, that weaken blood vessels
- Polycystic kidney disease, an inherited disorder that results in fluid-filled sacs in the kidneys and usually increases blood pressure
- Abnormally narrow aorta (coarctation of the aorta), the large blood vessel that delivers oxygen-rich blood from the heart to the body
- Cerebral arteriovenous malformation (brain AVM), an abnormal connection between arteries and veins in the brain that interrupts the normal flow of blood ▶▶



“ Until a rupture or leak occurs, many people are walking around with an aneurysm and don't know it. How many? Some data we have suggest 6% to 9% of the population have one.” ”



### WHAT HAPPENS DURING A RUPTURE

It's not like blood is just squirting out. That might happen for a few seconds, but usually a little platelet plug forms almost immediately.

Some patients, like Linda, may suffer very small leaks in the days or weeks leading up to a major rupture. But even small amounts of blood are "very irritating" to your brain. The leaked blood increases the pressure inside your cranium. Also, leaks or ruptures divert blood from brain regions and tissues that require a steady supply. Both the pressure and the lack of sufficient blood caused by a ruptured aneurysm can lead quickly to unconsciousness and death. About 30 to 50% of sufferers will die as soon as an aneurysm ruptures.

### WHAT TO LOOK FOR

Unruptured brain aneurysms are typically completely asymptomatic. These aneurysms are typically small in size. However, large unruptured aneurysms can occasionally press on the brain or the nerves stemming out of the brain and may result in various neurological symptoms.

Brain aneurysm symptoms may vary by person and when present, symptoms may be similar to those of some other conditions.

Here is a list of symptoms that may be signs of an aneurysm. Any individual experiencing some or all of these symptoms, regardless of age, should undergo immediate and careful evaluation by a physician.

- Localised headache
- Dilated pupils
- Blurred or double vision
- Pain above and behind eye
- Weakness and numbness
- Difficulty speaking
- Thinking or processing problems
- Fatigue

Ruptured brain aneurysms usually result in a subarachnoid haemorrhage (SAH), which is defined as bleeding into the subarachnoid space. When blood escapes into the space around the brain, it can cause sudden symptoms.

The most common symptom is the worst headache of your life, or the "W-H-O-L".

This headache could be anywhere or all over, but patients usually describe it as being focused behind the eyes.

### SEEK MEDICAL ATTENTION IMMEDIATELY IF YOU ARE EXPERIENCING SOME OR ALL OF THESE SYMPTOMS:

- WHOL – Sudden severe headache, the Worst Headache Of your Life
- Loss of consciousness
- Nausea and vomiting
- Stiff neck
- Sudden blurred or double vision
- Sudden sharp pain above or behind the eye or difficulty seeing
- Sudden change in mental status/awareness
- Sudden trouble walking or dizziness
- Numbness and tingling in facial area
- Sensitivity to light (photophobia)
- Seizure
- Drooping eyelid
- Perceived "gun shot" noise or extremely loud "BOOM"
- Confusion or change of mental status

### TREATING A BRAIN ANEURYSM

The two main options for treating unruptured or ruptured brain aneurysms are endovascular treatment (which is performed through catheters inserted into arteries under x-ray guidance) and

open surgical techniques.

Which option is best depends on many factors: aneurysm location, size, patient condition, patient preference, and local expertise.

This decision has to be made on an individual basis. Endovascular (catheter-based) treatments continue to evolve so that more and more aneurysms are now amenable to durable treatment. On the other hand, certain aneurysms are still best treated with open surgery.

The goals of treatment once an aneurysm has ruptured are to prevent further bleeding and potential permanent brain damage. Treatment and monitoring during the three weeks immediately following the haemorrhage are important, since that is the period when complications are most likely to occur.

Medication and sedatives may be prescribed and total bed rest is necessary. If an aneurysm hasn't ruptured, treatment will typically centre on preventing an initial rupture using either endovascular techniques or open surgery. ■

\*Names changed.

### KNOW THE FACTS

- At least 1 out of every 50 people have a brain aneurysm.
- Every 18 minutes a brain aneurysm ruptures.
- There are almost 500,000 deaths worldwide each year caused by brain aneurysms and half the victims are younger than 50.
- Ruptured brain aneurysms are fatal in about 40% of cases. Of those who survive, about 66% suffer some permanent neurological damage.
- 4 out of 7 people who recover from a ruptured brain aneurysm will have disabilities.
- Brain aneurysms are most prevalent in people ages 35 - 60, but can occur in children as well. The median age when a brain aneurysm occurs is 50 years old and there are generally no warning signs in many instances. Most aneurysms develop after the age of 40.
- 10 - 15% of patients diagnosed with a brain aneurysm will harbour more than one aneurysm.
- Most aneurysms are small and an estimated 50 to 80% of all aneurysms don't rupture during the course of a lifetime.

Sources: bafound.org, ilcfound.org, brainaneurysm.com



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## HOUSE CALL

MEET ONE OF OUR  
DEDICATED SPECIALISTS:

**Dr Jashira Naidoo**  
Nephrologist at Melomed Tokai Private Hospital



**1 What is your definition of happiness?**

Happiness is a world without war, a world where every human being has a home and the basic necessities that ordains one's existence. Happiness is putting the needs of others before your own.

was abuzz with chocolate - that is what happens when your dad has a supermarket. I had access to free goodies as far as the eye could see.

and visiting scenic vineyards.



**2 What is your dream travel destination?**

Amsterdam would be high on my list of memorable travel experiences. Definitely not motivated by the beer, I love the bike trails, architecture, vibrant night life and the society itself.

**5 How do you think people will remember you?**

I am not sure how people will remember me, but I would like to be remembered as someone who was honest with those around them, selfless and loving. This will probably get done when I am not on call... Work in progress.

**9 What is your most embarrassing moment?**

I remember imitating a teacher in class once and much to my embarrassment she was standing at the window looking in. I can never live that down.

**3 What accomplishment are you most proud of?**

When I look into my parents' eyes and they acknowledge my achievements. In my eyes my parents' happiness and blessings are my accomplishments. And being a mum to my two gorgeous furry babies, Jake and Jemma.

**6 Who is your biggest fan?**

I think it would definitely be my dogs - I can do no wrong in their eyes. They are ever loving and to come home after a long day, to wagging tails and licks - what more can a girl ask for?



**10 If you could possess one super-human power, what would it be?**

I would love to have x-ray vision - it would make diagnosis a whole lot easier.

**4 What is your happiest memory?**

I have lost two brothers in my life most tragically, so in my mind's eye, I forever treasure the many happy memories we spent together as a unit. It really is a toss up between that and having a childhood that



**7 Whose biggest fan are you?**

Everyone says their parents, I have to say mine are. But my patients are also my idols, when I see them and the amount of courage and strength they have - it is incredible. They surprise me every day, their mindsets and positivity make my work that much easier.

**11 What is your greatest fear?**

I can often be very serious and clinical and have been accused of working to a point of no end. I fear missing the moments in life that lead to great memories. I fear waking up and not spending enough time with loved ones.



**8 What do you like to do in your spare time?**

I am drawn to the outdoors. I love biking, hiking trails with my dog

**12 What is your greatest hope?**

I want to be able to treat my good days and bad days the same, to understand that I need the bad days to enjoy and treasure the good ones. That complete acceptance and equilibrium still evades me.



# FIRST AID

## Food Poisoning

There are several forms of food poisoning. All foods naturally contain small amounts of bacteria. But poor handling of food, improper cooking or inadequate storage can result in bacteria multiplying in large enough numbers to cause illness. Salmonella is one of the most common culprits and is found in many farm products such as eggs and chickens. Toxic (potentially lethal) food poisoning such as botulism can be due to poisons caused by bacteria in certain types of food, including honey and fish. Parasites, viruses, toxins and chemicals also can contaminate food and cause illness.

Signs and symptoms of food poisoning vary with the source of contamination, and whether you are dehydrated or have low blood pressure.

**GENERALLY THEY INCLUDE:**

- + Diarrhoea
- + Nausea
- + Abdominal pain and cramps
- + Vomiting
- + Dehydration

WITH SIGNIFICANT DEHYDRATION, YOU

**MIGHT FEEL:**

- + Lightheaded or faint, especially on standing
- + A rapid heartbeat

Whether you become ill after eating food that is contaminated depends on the organism, the amount of exposure, your age and your health.

**HIGH-RISK GROUPS INCLUDE:**

- + **Older adults.** As

you get older, your immune system may not respond as quickly and as effectively to infectious organisms as it once did.

- + **Infants and young children.** Their immune systems haven't fully developed.
- + **People with chronic diseases.** Having a chronic condition, such as diabetes or AIDS, or receiving chemotherapy or radiation therapy for cancer reduces your immune response.

### FOOD POISONING TREATMENT

#### 1 Control Nausea and Vomiting

- + Avoid solid foods until vomiting ends. Then eat light, bland foods, such as salty crackers, bananas, rice, or bread.
- + Sipping liquids may help avoid vomiting.
- + Don't eat fried, greasy, spicy, or sweet foods.
- + Generally, anti-diarrhoea medications should be avoided because they may slow elimination of organisms or toxins from your system. If in doubt, check with your doctor about your particular situation.
- + Infants or young children should not be given anti-diarrhoea medications because of potentially serious side effects.

#### 2 Prevent Dehydration

- + Rest and drink plenty of liquids (clear fluids), starting with small sips and gradually drinking more.
- + If vomiting and diarrhoea last more than 24 hours, drink an oral rehydration solution.

#### 3 When to Call a Doctor

Food-borne illness often improves on its own within 48 hours. Call your doctor if you think you have a food-borne illness and your symptoms have lasted longer than two or three

days. Call immediately if blood appears in your stools.

CALL A DOCTOR IMMEDIATELY IF SYMPTOMS LAST MORE THAN 3 DAYS AND INCLUDE:

- + Severe belly pain
- + Fever
- + Bloody diarrhoea or dark stools
- + Vomiting that is prolonged or bloody
- + Signs of dehydration, such as dry mouth, decreased urination, dizziness, fatigue, or increased heart rate or breathing rate

SEEK EMERGENCY MEDICAL ASSISTANCE IF:

- + You think the food poisoning may be from seafood or mushrooms.
- + The person is severely dehydrated.
- + The person belongs to a high-risk group.
- + You suspect botulism poisoning. Botulism is a potentially fatal food poisoning that results from the ingestion of a toxin formed by certain spores in food. Botulism toxin is most often found in home-canned foods, especially green beans or tomatoes. Signs and symptoms of botulism usually begin 12 to 36 hours after eating the contaminated food and may include headache, blurred vision, muscle weakness and eventual paralysis. Some people also have nausea

and vomiting, constipation, urinary retention, difficulty breathing, and dry mouth. These signs and symptoms require immediate medical attention.

### LIFESTYLE AND HOME REMEDIES

Food poisoning often improves without treatment within 48 hours. To help keep yourself more comfortable and prevent dehydration while you recover, try the following:

- + **Let your stomach settle.** Stop eating and drinking for a few hours.
- + **Try sucking on ice chips or taking small sips of water.** You might also try drinking clear soda, clear broth or non-caffeinated sports drinks. You're getting enough fluid when you're urinating normally and your urine is clear and not dark.
- + **Ease back into eating.** Gradually begin to eat bland, low-fat, easy-to-digest foods, such as soda crackers, toast, gelatine, bananas and rice. Stop eating if your nausea returns.
- + **Avoid certain foods and substances until you're feeling better.** These include dairy products, caffeine, alcohol, nicotine, and fatty or highly seasoned foods.
- + **Rest.** The illness and dehydration can weaken and tire you. ▶▶



## PREVENTION AT HOME

**+ Wash your hands, utensils and food surfaces often.** Wash your hands well with warm, soapy water before and after handling or preparing food. Use hot, soapy water to wash utensils, cutting boards and other surfaces you use.

**+ Keep raw foods separate from ready-to-eat foods.** When shopping, preparing food or storing food, keep raw meat, poultry, fish and shellfish away from other foods. This prevents cross-contamination.

**+ Cook foods to a safe temperature.** The best way to tell if foods are cooked to a safe temperature is to use a food thermometer. You can kill harmful organisms in most foods by cooking them to the right temperature.

**+ Refrigerate or freeze perishable foods promptly** – within two hours of purchasing or preparing them. If the room temperature is above 32°C, refrigerate perishable foods within one hour.

**+ Defrost food safely.** Don't thaw food at room temperature. The safest way to thaw food is to defrost it in the refrigerator. If you microwave frozen food using



the "defrost" or "50 per cent power" setting, be sure to cook it immediately.

**+ Throw it out when in doubt.** If you aren't sure if a food has been prepared, served or stored safely, discard it. Food left at room temperature too long may contain bacteria or toxins that can't be destroyed by cooking. Don't taste food that you're unsure about – just throw it out. Even if it looks and smells fine, it may not be safe to eat.

**Food poisoning is especially serious and potentially life-threatening for young children, pregnant women and their fetusses, older adults, and people with weakened immune systems.** These individuals should take extra precautions by avoiding

the following foods:

- + Raw or rare meat and poultry
- + Raw or undercooked fish or shellfish, including oysters, clams, mussels and scallops
- + Raw or undercooked eggs or foods that may contain them, such as cookie dough and homemade ice cream
- + Raw sprouts, such as alfalfa, bean, clover and radish sprouts
- + Unpasteurised juices and ciders
- + Unpasteurised milk and milk products
- + Soft cheeses, such as feta, Brie and Camembert; blue-veined cheese; and unpasteurised cheese
- + Refrigerated patés and meat spreads
- + Uncooked hot dogs, luncheon meats and deli meats ■

Source: mayoclinic.com; WebMD

# EMERGENCY MEDICAL CARE RIGHT ON YOUR DOORSTEP

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- Cardiac ICU
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# Pregnancy Checklist

## Congratulations on your pregnancy!

This is such a special time for you as a mom-to-be. PathCare wants to support you during and after your pregnancy by offering you our recommended screening tests. These tests will give you peace of mind about any underlying conditions that all moms & babies should be tested for.

Here are some tests that you can expect:

- Bloodgroup (ABO and RH) and screen for red cell antibodies
- Sexually transmitted disease, hepatitis, rubella (preferably prior to conceiving)
- Urine analysis for protein and glucose
- Down syndrome screening between 8w - 13w6d or 15w - 20w6d  
(speak to your clinician about screening test)
- Blood test for neural tube defects or open spina bifida
- Non Invasive Pre-natal test (Harmony or Panorama test)
- Amniocentesis  
(obtaining amniotic fluid from the uterus for generic studies, if any abnormalities are detected)
- Hypertension and diabetes
- Various other tests can be done either to exclude conditions or to monitor treatment

### Postnatal:

- Cord blood for a thyroid test
- Newborn baby screening test

For more information on Prenatal Pathology Testing, please contact your physician