

melomag

Free Health Guide

Issue 36 | 2019



GIVE-AWAY
Win a TV with Tafelberg
Furnishers

PETS ARE WELCOME!

10 Pet friendly stays

SUMMER FRUIT FUN

Delicious nectarine popsicles
and granola bars

KNOW IT ALL

Headaches



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PRIVATE HOSPITALS

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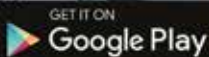
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HEALTH BYTES
PUBLISHING

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HEALTH NEWS & VIEWS

VITAMIN D LOWERS RISK OF CANCER DEATH



Supplementing with **Vitamin D** may lower the risk of cancer death by **16%**, according to new research published in the British Medical Journal.

Vitamin D is an essential nutrient, critical to overall health, and yet most people do not get enough of it. Vitamin D deficiency may be an underlying cause of a wide range of infections and illnesses. Studies have shown that supplementation may:

- help cut flu risk
- prevent winter anaemia while boosting white blood cell count
- reduce risk of HIV infection and slow down HIV progression in infected individuals
- help relieve the symptoms of Irritable Bowel Syndrome (IBS)

Source: www.hpasa.co.za

Health Tip:

Three Ways to reduce your heart disease risk

- Exercise to maintain a healthy weight
- Avoid and/or stop smoking
- Manage high blood pressure and bad cholesterol



What does a heart attack feel like?

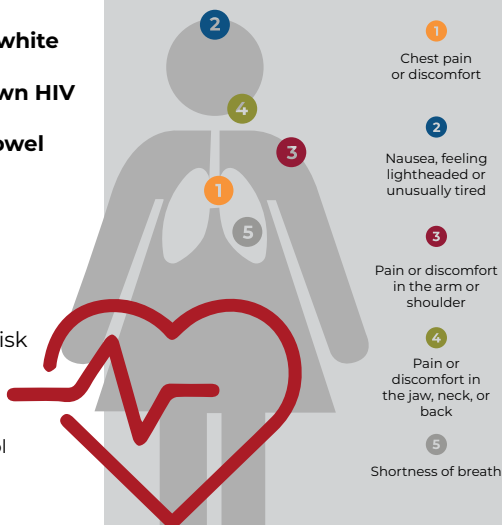
Recognise the warning signs and symptoms. It might save your life.

Not all of these signs need to be present during a cardiac episode; however, common signs include:

- **chest pain or discomfort (not always)**
- **pain or discomfort in the upper body (jaw, shoulder, arm, stomach, back)**
- **nausea**
- **sweating**
- **feeling faint, light-headed or unusually tired**
- **shortness of breath**

Remember that **heart attack signs aren't always severe and sudden, especially in women.**

Source: www.cdc.gov



Saving memories

They may forget... but never let them be forgotten.



Dementia is a debilitating brain disorder and greatly impacts the affected person as well as their family and/or caregivers. Not only does it take away precious memories, it disrupts the person's life in numerous ways.

Alzheimer's disease is the most common form of dementia. Cipla is helping to raise awareness of the disease with a unique campaign. "We are focussed on finding meaningful ways of sharing educational information to help destigmatise the condition," says Cipla CEO, Paul Miller. **Although there is no treatment or cure that can reverse the disease,**

medication along with activities, such as building puzzles, can help to slow the decline.

"Research has found that people can potentially reduce their risk of cognitive decline, **by making healthy lifestyle choices for example, proper nutrition, quitting smoking, reducing stress levels and regular exercise,**" says neurologist, Dr Johan Smuts.

Studies have shown that **starting treatment for patients living with Alzheimer's disease as early as possible may help them remain independent for longer.** In particular, some

combinations of medicines are proven to reduce patients' rate of decline in cognition and function.

As part of the awareness campaign, Cipla Medpro launched a microsite (<https://www.cipla.co.za/alzheimers/#>) which includes information about dementia and Alzheimer's disease.

The microsite also includes a feature that allows families to upload memorable photographs to be converted into puzzles (limited quantities available) for the family, an aging relative, or for someone living with Alzheimer's disease.

Source: press release MSL group, www.cipla.co.za

MELOMED RICHARD'S BAY GRAND OPENING!



The Biennial United South African Neonatal Association (USANA) conference was held in September at the Boardwalk International Convention Centre in Port Elizabeth.

Melomed congratulates Dr S Raban (Paediatrician & Neonatologist at Melomed Gatesville & Tokai) on his appointment to the executive committee of USANA for the next two years.



Melomed congratulates Dr Ajmal Ikram, Orthopaedic Surgeon at Melomed Gatesville on his appointment as President of the Hand Society of South Africa, SASSH.

High Tea Fundraiser



Dementia VS Alzheimer's

Dementia is a term applied to a group of symptoms that negatively impacts memory. **Alzheimer's** is a progressive disease of the brain that slowly causes impairment in memory & cognitive function.

Alzheimer's is the most common cause of dementia and with Alzheimer's memory loss or other signs are much harder to recognise.

MOST COMMON THINGS PEOPLE WITH DEMENTIA STRUGGLE TO DO:



KEEPING TRACK OF WALLET/PURSE



REMEMBERING APPOINTMENTS



PAYING BILLS



PLANNING & PREPARING MEALS



TRAVELLING OUT OF THE NEIGHBOURHOOD



PROBLEMS WITH SHORT TERM MEMORY



Dementia is caused by damage to brain cells, which affects the ability of these brain cells to communicate. This can affect a person's *feeling, behaviour and way of thinking.*

If these following causes are eliminated it may improve memory & thinking abilities:

• Depression • Medication side effects • Excess use of alcohol • Vitamin deficiencies



47.5 million
people live with dementia



1 new case of dementia is diagnosed every 4 seconds

7 TYPES OF DEMENTIA

Vascular Dementia | Dementia with Lewy Bodies | Parkinson's Disease | Frontotemporal Dementia | Creutzfeldt-Jakob Disease | Wernicke-Korsakoff Syndrome | Mixed Dementia

How is the brain with Alzheimer's disease different?

The Healthy Brain

- Made up of 100 billion cells called neurons
- Neurons connect to each other at *synapses* where neurotransmitters *pass signals between cells*
- Transfer *electrical and chemical impulses* from our memories, thoughts and feelings



The Alzheimer's Brain

- The disease *disrupts electric signals and the activity of neurotransmitters*
- The *cortex shrivels up*
- *Fluid-filled spaces grow*
- *Twisted strands of protein called tangles appear*
 - Naturally occurring *beta-amyloids clump together to form abnormal plaques*

Alzheimer's is a slow disease that progresses in **THREE** stages:



1. A pre-clinical stage with no symptoms,



2. A middle stage of cognitive impairment,



3. and a final stage of full dementia.

FAST FACTS



Nearly **TWICE** as many women as men have Alzheimer's. Alzheimer's also progresses more rapidly and severely in women.



German and French researchers have found that **caffeine and coffee consumption** may have a positive effect on slowing memory decline.

MELObabes


M E L O M E D
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For more information regarding the support group in your area, contact info@melomed.co.za.

HEADACHE

By Dr Jean-Paul Kanyik

*Internal Medicine Specialist
at Melomed Mitchells Plain*

Headaches are a common complaint; whether it's a mild ache in the temples or a literal blinding paroxysm, people experience the familiar pain of headaches for a wide variety of reasons. Anything from caffeine and stress to a head injury can cause a headache, but sometimes headaches are symptoms of a more serious, underlying disorder or disease.

What is a headache?

A headache is pain in any region of the head or neck. It may result from injury, inflammation, infection, spasm or distension of structures inside or outside the brain.

Who gets a headache?

Anyone, but most often adults between 18 and 65. It can be very severe and affects various aspects of life such as work, lifestyle and relationships.

Types and causes of headaches

There are more than 300 types of headaches, but only about 10% of headaches have a known cause (secondary headaches). The rest are called primary headaches of which the causes are unknown.

PRIMARY HEADACHE

- ***A tension headache*** is the most common type of headache, but not well understood. It is precipitated by emotion and anxiety and manifests as a dull, tight or pressure like pain. A tension headache is often described as a "tight band" around the head, or feeling like the head is "in a vise".



- ***Migraine*** is a benign and recurrent syndrome which is associated with headache, nausea and/or vomiting and other varying neurological dysfunctions (numbness, tingling, speech or visual disturbances which can precede headache).

Migraines start before middle age, and is more prevalent in females than males. The cause is unknown, and it is often hereditary. Sometimes it is associated with warning symptoms (preceding symptoms). Triggers can be chocolate, cheese, contraceptive pills, caffeine, alcohol, anxiety, traveling and exercise.

- ***Cluster headaches, also called suicide headaches, are less common than migraine and more prevalent in men.*** Typical scenario: A man in his 30's is a smoker and heavy drinker. His headaches start at the same time every day and continues for weeks. It is an excruciating unilateral (one sided) headache, lasting 30 minutes to 3 hours. This may be associated with one-sided running nose, redness or tearing of an eye.

SECONDARY HEADACHE

A secondary headache, which is caused by other factors or illnesses such as head injuries, bleeding of the brain, meningitis, glaucoma, temporal arteritis, is serious. Less than 5% of all headaches are secondary and although infrequent, there are over a hundred types of secondary headaches. This type of headache is dangerous and requires urgent treatment.

How do I know if my headache is serious?

- New onset headache
- Associated symptoms like fever and neck stiffness
- Deep and dull headache which disturbs sleep
- Changing in the character of the headache

It is important for patients to see a doctor right away if they have new headache symptoms or ongoing headache symptoms.

What will the doctor do?

Take a detailed history and establish whether there is secondary cause or not. They may use a scoring system to establish the difference between a tension headache and a migraine.

Do I need blood tests or a CT brain scan?

Depending on your doctor's assessment. Investigations are done to exclude secondary causes. Brain haemorrhage or brain tumour will easily be seen on a CT scan. For meningitis, although a CT scan may be required, the key investigation is a lumbar puncture.

What is the treatment for a headache?

Tension headache: *counselling, physiotherapy for muscle relaxation and amitriptyline for prevention.* In this category, overuse of pain killers, can worsen headaches, leading to a vicious cycle.

Migraine: *Identifying triggers and exacerbating factors will help to prevent attacks.* Pain killers usually provide some relieve. Many drugs can be used, but caution should be taken with medication overuse. Research is being done for new drugs (e.g. Rimegepant) that promises better control and prevention of migraine for millions of people.

Cluster headache: *Acute attacks can be treated with sumatriptan or 100% inhaled oxygen.* Migraine therapies are ineffective in treating a cluster headache.

quick facts

Migraine pain can take up to 1 to 2 hours to build up. Migraine pain typically starts out as a dull ache. It can take an hour or two to build into a full-blown headache. Some people can feel an oncoming migraine a day or two before it starts.

Because most migraine medicines work best when taken early, it's a good idea to take medicine as soon as you feel a headache coming on.

Everyone has different migraine triggers.

Some common ones are:

- Strong smells, like perfumes and detergents
- Hormonal changes (menstruation, pregnancy, and ovulation)
- Bright or fluorescent lights
- Stress or fatigue
- Too much or too little sleep
- Some medications, like birth control pills
- Weather changes
- Cold triggers like ice cream
- Certain foods

MIGRAINE MYTHS AND FACTS

Do you know the painful truth about migraine headaches? Test your knowledge about migraines with this quiz.

True or False?

1. If you don't see flashing lights, or an "aura," it isn't a migraine.

FALSE: "Aura" is a broad term for how a migraine affects your senses before or during a headache. Not everybody experiences this. Those who do might see flashing lights, spots, or wavy or jagged lines. Auras can also make your ears ring, change the way things taste, smell, feel or just give you an overall funny feeling. They usually last from 15 minutes to an hour.

2. You typically feel a migraine on only one side of your head.

TRUE: Unlike most other headaches, migraines usually strike on one side of your head. But they don't always stay still. The pain can move from one side of the head to the other. Most people describe the pain as throbbing or pounding. They can last 4 hours or longer.

3. Women are more likely to get migraines.

TRUE: About 3 of every 4 people who get migraines are women. In fact, the only time migraines are more common in men is when they're young - before the onset of puberty.

4. You are likely to have fewer migraines as you get older, and they won't hurt as much.

TRUE: For most people, migraines peak between 35 and 40, then taper off and weaken after that. This may not be the case if you're a woman going through perimenopause. If hormones are a trigger, you could have more headaches during this time.

5. If a family member has migraines, you're more likely to get them.

TRUE: There's a good chance you can blame your family. About 4 out of 5 people with migraines have a relative who gets them too. If one of your parents have them, you have a 50% chance of getting them. If both parents have them, you have a 75% chance.

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All About Bone Marrow, Stem Cell Donation and Leukaemia*

By Dr Shahroch Nahrwar

Clinical Haematologist at Melomed Tokai



Every year, more than **one hundred thousand South Africans are diagnosed with cancer (globally 14 million people) of which 60% survive**. Globally cancer kills more people than TB, AIDS and Malaria combined. Although leukaemia*, lymphoma* and myeloma* are relatively uncommon cancers and feature last in the top ten of all cancer deaths in South Africa (**4% of all cancer deaths**). They are potentially curable with chemo* and radiotherapy* even when wide-spread at diagnosis, which is very unusual for other types of cancers.

Leukaemia, myeloma and lymphoma survival rates have more than doubled over the past thirty years in stark contrast with dismal survivals of oesophagus, stomach, lung, pancreas and brain cancer. **Leukaemia, myeloma and lymphoma are also frequently treated with high dose chemo- and radiotherapy followed by blood stem cell transplants**, especially for high risk of relapse*. **Allogeneic* stem cell transplants* are mostly performed for acute* leukaemias and should ideally only be done if the patient is in remission*** after initial treatment with chemotherapy.

For more than 20 years, blood, rather than bone marrow, is most often used. The stem cells are being harvested by an apheresis machine (cell separator) which separates these stem cells from the blood (returned to the body) after stimulating the donor's bone marrow with subcutaneous* injections of white cell growth factor for 4 to 5 days, infused thereafter to the patient.

The blood stem cell transplant procedure

- When a suitable donor is found the diseased cancer cells are killed by a combination of high doses of radiation and cytotoxic drugs.
- The replacement cells of the donor are then administered into the bloodstream. The cells know where they belong and settle in the bone marrow.
- The blood forming stem cells then fills the cavities of the larger bones, such as the femur, and start producing normal blood cells.

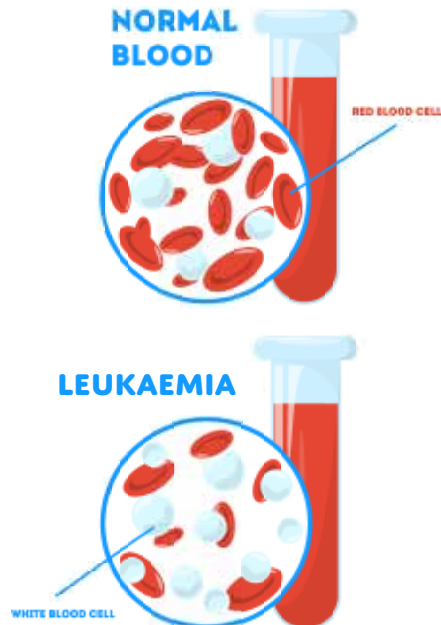
Full sibling* donors have a 1:4 chance to be a full tissue match with the patient.

They are still the best donors for stem cell transplants compared to voluntary, unrelated or related haplo-identical* donors.



To find an unrelated donor is difficult (less than 1:100 000 chance per donor) for black and mixed-race patients (compared with 1:10 000 chance for white patients) because of complex ethnicity*. Complex genes cause a wide variety in tissue types, in contrast with white donors who are genetically more identical and have a much higher chance of tissue matching another white patient fully. *There is a 97% chance to find a (white) unrelated donor for a white patient. This is a very costly process (roughly R500 000 per transplant) and since more than 80% of all South Africans do not have medical insurance, it is difficult to finance.*

For over a decade, haematologists have developed the haplo-identical transplant for half-matched family donors which makes it possible to perform a transplant on almost all patients in need of a bone marrow/blood stem cell transplant since almost everyone has got either a living parent, a sibling or child.



FAST FACTS

- Leukaemia is a group of cancers, which affects the blood and bone marrow. It starts in blood-forming tissue, usually the bone marrow and the lymphatic system. It leads to the over production of abnormal leucocytes (white blood cells). White blood cells are involved in the fight against infection in the body.
- Each year, thousands of South Africans learn that they have leukaemia.
- Most of them are children and young people under the age of 25.
- There is roughly a 30% chance of a sibling being a bone marrow match, meaning that there is a 70% chance that someone will need a transplant from a non-related donor.
- As opposed to a few different blood types, there are millions of different types of cell tissue.
- The success of a patient's transplant depends on finding a match, otherwise their body will reject it.
- A bone marrow or cord blood transplant is a process to replace unhealthy bone marrow with healthy bone marrow.

These stem cell transplants are more difficult to perform because of higher rejection rates (compared to full sibling transplants), but they are much cheaper and easier to access than unrelated stem cell donor transplants.

Therefore they are more accessible to patients who might face financial challenges.

The success of a stem cell transplant is measured initially in terms of engraftment* and recovery of both neutrophils* and platelets* which should exceed 500 neutrophils per ml and 20 000 platelets per ml of blood.

**Bone Marrow, Stem Cell Donation and Leukaemia awareness month is commemorated annually from 15 August to 15 October.*



medical dictionary:

Acute: Rapidly growing, **Allogeneic:** Tissue from another person, **Chemotherapy:** Chemicals that kill (cancer) cells, **Complex Ethnicity:** Belonging to a social group that has a common national or cultural tradition, **Engraftment:** Blood-forming cells you received on transplant day start to grow and make healthy blood cells, **Full Sibling:** Related brother or sister from same parents, **Haematologist:** Doctor who cares for and treats patients with diseases of the blood and blood-forming organs (blood, bone marrow, lymph tissues), **Haplo-identical:** Half-matched (50% identical), **Leukaemia:** Blood and bone marrow cancer usually arising from white blood cells, **Lymphoma:** Lymph (gland) cancer, **Myeloma:** Bone marrow cancer arising from plasma cells (type of white blood cell that produce antibodies) **Neutrophils:** Type of white blood cells that are the first to fight infections, **Platelets:** Cell fragments that start the process to stop bleeding, **Radiotherapy:** Invisible, high energy waves that kill (cancer) cells, **Relapse:** Disease coming back after treatment, **Remission:** Disease free after treatment, **Stem Cell Transplants:** Transferring bone marrow cells from one person to another, **Subcutaneous:** Under the skin

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MELOMED MITCHELLS PLAIN REVAMPED AND UPGRADED.

On the 22 October 2019, we had the honour of hosting the Premier of the Western Cape, Alan Winde, as well as the Provincial Minister of Health, Nomafrench Mbombo, for the official ribbon cutting ceremony to mark the opening of the revamped and upgraded Melomed Mitchells Plain.

The hospital was revamped and upgraded in order to increase its patient capacity and improve the services it provides to the surrounding community. The revamp included the medical ward, emergency unit, Intensive Care Unit and an easily accessible reception area.

Melomed Mitchells Plain. Symphony Walk, Town Centre. T 021 392 3126.



HOW TO TREAT INSULIN SHOCK

KNOW SOMEONE WHO HAS DIABETES? AS A FRIEND OR LOVED ONE OF SOMEONE WITH DIABETES, IT'S IMPORTANT TO KNOW THE SIGNS OF SEVERE HYPOGLYCAEMIA IN CASE YOU EVER NEED TO ASSIST.

Living with diabetes requires daily vigilance — **counting carbs, exercising regularly, checking blood glucose throughout the day and more.**

But even with a proactive approach, situations can arise when a person's blood sugar level drops dangerously low (or reach dangerously high). **Severely low blood sugar can cause someone to become confused or even unconscious.**

Diabetes makes a person's body unable to produce enough – or any – insulin. Insulin is a hormone which enables the body to convert and use glucose (sugar) from food as fuel. As a result, their blood sugar level is too high.

Insulin dependent diabetics take insulin to help keep their blood sugar at safe, lower levels. But if someone doesn't eat enough carbohydrates for the amount of insulin they've taken, or if they exercise more than usual without adjusting their insulin dosage, they can experience too low blood sugar — **called hypoglycaemia.**

The following signs and symptoms of low blood sugar can indicate that someone's experiencing hypoglycaemia:

- *Shakiness*
- *Dizziness*
- *Weakness, having no energy*
- *Sweating, chills and clamminess*
- *Confusion and disorientation*
- *Hunger*
- *Fast heartbeat*

If action isn't taken quickly to raise their blood sugar, it can progress to severe hypoglycaemia (informally called insulin shock or diabetic shock), which may cause:

- *Muscle weakness*
- *Difficulty speaking*
- *Blurry vision*
- *Confusion*
- *Convulsions or seizures*
- *Unconsciousness*

A person going into a "low" can appear to be drunk. They can sweat, talk incoherently, become disoriented, stumble, become aggressive, even "feisty," sometimes obscene, or pass out. But they're NOT drunk and they are definitely not having fun.

It can happen to people with Type 1 or Type 2 diabetes and is especially challenging for people who experience what's called hypoglycaemia unawareness.

As people have diabetes for longer and longer and they have more and more low blood sugar levels, their body will get used to being at that low level. Their bodies won't display typical symptoms. There can also be cases where people don't act on their initial symptoms – for example, young children may not be able to describe their symptoms, so no action is taken to get their blood sugar back up. It then continues to get lower until their blood sugar is so low that they will lose consciousness.

A hypoglycaemic event is an emergency, and intervention is necessary. Respond quickly. So what can you do if you're ever with someone who's experiencing severe hypoglycaemia?

1. If a person is alert, or disoriented but still conscious, help them **find something to eat or drink that contains about 15 grams of fast acting carbohydrates. Sweets like chocolate bars and cookies have carbs, but they also contain fat, which delays the absorption of carbs,** so they are not ideal for this situation. Instead, choose:
 - Half a cup of fruit juice (apple or pineapple) or regular soda.
 - Three or four glucose tablets.
 - Hard glucose candies e.g. five Life Savers candies or jellybeans.

2. Wait for 15 minutes. **Within 15 minutes, the symptoms of low blood sugar should be improving.** During this time, ask the person to rest. Reassure the person as much as possible.
3. If the symptoms abate, ask the person to keep resting for a while. **This has been an emergency situation and the person needs to take it easy.** Follow up with a sandwich and a banana/cookies, or similar food that takes a longer time to digest. This will stop the energy crash that can occur after eating lots of sugar.
4. If the person is or becomes unresponsive or unconscious, or is having seizures, call an ambulance. Don't try to give them anything to eat, as they may choke on it. However, they may have a glucagon rescue kit with them that contains a dose of injectable glucagon that can bring up their blood sugar. If no one who's been trained to use a glucagon rescue kit is around, stay with the person and wait for emergency responders to arrive.

Talking to your friend or loved one about their experiences with hypoglycaemia can help you be aware and prepared to help in an emergency situation. And if their behaviour ever seems off, or they don't seem well, don't be afraid to ask if they're okay. Since low blood sugar can make a person confused or disoriented, friends or loved ones might be the first to recognize that action is needed.



medical dictionary:

Insulin Shock

Insulin shock refers to the body's reaction to too little sugar – **hypoglycaemia** – often caused by too much insulin. **Diabetic coma** refers to a victim of high blood sugar – hyperglycaemia – who becomes confused or unconscious.

Sources and references consulted: www.health.clevelandclinic.org, www.livestrong.com, www.diabetes.org.



Melomed 24-hour Trauma Units:

Melomed Gatesville Trauma Unit: 021 637 8100
Melomed Bellville Trauma Unit: 021 948 6535

Melomed Mitchells Plain Trauma Unit: 021 392 3126
Melomed Tokai Trauma Unit: 021 764 7023
Melomed Richards Bay Trauma Unit: 035 791 5301



TIPS FOR LIVING WITH CHRONIC KIDNEY DISEASE

Being diagnosed with chronic kidney disease (CKD) may come as a shock and may seem unmanageable to you. Continuing with normal functions in your life will depend on YOU! Taking things one step at a time may help.

TIPS TO HELP YOU COPE AND ENJOY A GOOD QUALITY OF LIFE:

- Learn all you can about kidney disease and especially your own illness. Work with your healthcare team to find out how the information applies to you.
- There are people and resources available to help you become a partner in your care and to live well despite being diagnosed with CKD.
- Learn about your medications, their proper dosages, names, side effects, the route and the purpose of each one.
- Track your lab test values over time and learn what they mean. While your healthcare team knows a lot about kidney disease, you are the expert on your body.
- If you do not understand something, or if something seems wrong, speak up. Talk with your doctor. Ask questions. Find out what you can do to improve your health.
- Work with your healthcare team and dietician to determine renal dietary options specifically designed for you.
- Exercise regularly and safely.
- Stay employed. Even if you have to take some time off work to adjust to a new situation, try to

work part-time or full-time. Speak to your doctor and healthcare team about different treatment options and decide together what will suit your needs the best. Then discuss your illness and your treatment options with your employer.

- Find out what your target blood pressure should be and work with your doctor and your healthcare team to do what you must to keep it there.
- If you have diabetes, control your blood sugar. It will help prevent potential complications.
- Be aware of the possible complications of chronic kidney disease, including anaemia, metabolic acidosis, bone disease,

cardiovascular disease, fluid overload, high potassium, phosphorous and others. All of which can be detected with the appropriate tests. You can avoid complications, but only if you manage your illness and learn how to prevent these complications.

- You are welcome to visit one of our dialysis units. You will find the necessary contact details at the end of the article.
- If you are on dialysis, make sure you understand the importance of adherence to your dialysis script and the risks to your health if you reduce your treatment time or skip a treatment.

- If you have a transplant, take all your medications on schedule. Look out for any signs of infection, rejection, or other illness.
- Take care of yourself. Pay attention to your emotions. Give yourself time to adjust and feel in control again. You may be dealing with uncertainty about the future or with changes in your lifestyle and relationships—these are normal feelings.
- Seek help if you feel you are not coping. Talk to your family and friends, to other kidney patients, to your doctor and your healthcare team.
- Cultivate an appreciation of life; do those things that are most meaningful and bring you the most joy.



MELOMED RENAL CARE (MRC): For more information on the services offered by Melomed Renal Care, please contact any one of our three-dialysis units.

Melomed Gatesville: Unit Leader: Cynthia Smith | Telephone: +27 21 637 1702
 Melomed Mitchells Plain: Unit Leader: Timothy Mpako | Telephone: +27 21 391 0816
 Melomed Tokai: Unit Leader: Florina Hartnick | Telephone: +27 21 712 5860



We're all going (flying) on a summer holiday! Preparing for happy flying with babies and toddlers

By Margaret Davison*

Going on holiday with little ones can be daunting, but the more prepared and proactive you are, the calmer everyone will be and the experience will be so much better for you! After all, you deserve the break just as much as everyone else in your family. If you create your own guidelines for planning and packing, you will be quite experienced in no time!

Here are a few hints and tips to get you going...

One of the most important things that most moms concur with, is to **take all your own requisites and products** that you are familiar with and not rely on anybody to provide additional nappies, wipes, creams, formula, disposable nappy bags etc. Moms often require something urgently when the airline crew are at their busiest and you can't ask your little one to wait. **Keep it all handy and pack your bag well so that you know where everything is.**

If your little one is on solids, take whatever food they are very familiar with and will eat happily – don't try and introduce something into their diet for the first time or something they may choke on.

It is a MUST to take spare clothing for baby and for yourself in case of an emergency

– have fun and make up little packs of, say, a vest, babygrow, socks, jersey or top. Place the small garments on the babygrow and roll it up so that you have a few "rolls" of clothing. Should you need to change, just take a roll out of your bag.

Take a good supply of disposable bags for wet and soiled nappies and clothing.

Perhaps take a few cheap, light supermarket shopping bags which you can throw away if soiled, wet or something else untoward happens to them - as discarding a designer nappy bag can be devastating for mom! Moms find it easier to wear loose clothing that does not crease so that they feel comfy and at ease.

Extra facecloths or small towels come in handy for changing baby.

A little muslin or receiving blankets have a multitude of uses as they can also be used to change baby on, wrap baby in, throw over your shoulder or be rolled up for a pillow if need be. They dry quickly too. **Taking a few special and familiar toys, blankets, and dummies will go a long way in soothing your little one** so that they recognize their own possessions in a very unfamiliar environment.

You may enjoy something light like a newspaper, magazine or a word game book for yourself that you could just pick up and put down or pass on to others. You may just have a little gap and want to do something for yourself too!

If you are doing a long haul flight with a little one, book a bassinet well ahead of your flight and confirm nearer the time as so many babies fly these days, they get fully booked very quickly and on some flights there just aren't enough for all the babies.

Distracting a baby or toddler with some fun items is a great idea. Obviously they should be age related, but could be something like **finger or hand puppets, a little soft mobile that could be hung on the tray table, material or light weight books, fun stickers or a book with interesting themes you can chat about.**

These can also be bought quite inexpensively and if they get lost or left behind somewhere, it isn't the end of the world!

If you feel you may need **something to keep you or your little one calm and peaceful, speak to your clinic sister or medical practitioner beforehand.**

Once you are packed and ready to go, **get to the airport well ahead of time and avoid a last minute rush.** Simplify arrangements and make things as easy for yourself as possible.

Your holiday can start with the actual journey if you plan ahead and get organised. Chat to other moms who have recently been on a trip, as their ideas can be invaluable. **Make it calm, fun and enjoyable for all while creating memories for a lifetime!**

*Margaret Davison is a social worker with many years of child care and peri-natal support.



Melomed is giving away a brand new 32" Panasonic TV in collaboration with Tafelberg Furnishers.

What is the emergency number for Melomed24 ambulance? (Page 17)

To stand a chance to qualify, email your name, contact number and answer to: melomag@melomed.co.za with **Melomag36** in the subject line. Competition closes **25 November 2019**.

Give-away term and conditions: **Prize sponsored by Tafelberg Furnishers. The lucky winner of the TV to collect it at the nearest Tafelberg store. THE WINNER MUST HAVE A VALID TV LICENSE. Employees of Melomed Private Hospitals are not eligible to enter this competition.** The winner will be the first correct entry drawn after the closing date. In the event of the judges not being able to get a hold of the winner on details supplied, an alternative winner will be selected. The judges' decision is final and no correspondence will be entered into. The winner must be prepared to be photographed for publicity purposes. The prize is not transferable and may not be converted into cash. Prize may differ from picture. Image is for visual purposes only.





OSTEOPOROSIS

Love your bones. Protect your future.

by Dr. Zaraina Solomons

Specialist Physician at Melomed Gatesville

At least one in three women over the age of 50 will suffer a fracture caused by weak bones, and it is estimated that osteoporosis affects about 200 million women globally. This is according to the International Osteoporosis Foundation, and with no cure for the disease, prevention is the best form of treatment.

Bones are organs that consist of calcium and other minerals. Bone is constantly being renewed or turned over.

This process occurs from childhood into young adulthood and the body is able to replenish the cells that die, hence bones remain strong. Millions of people worldwide suffer from osteoporosis which is a disease characterized by bone breakdown or loss due to bone breaking down quicker than it can be replaced.

According to the World Health Organization (WHO) this systemic disease results in low bone mass and deterioration of the architecture of

bone which increases the risk of developing fractures. **Osteoporosis thus causes bones to become brittle and weak** – so weak that coughing too hard or sitting down too quickly can result in a painful fracture. **These fractures tend to involve the wrists, spine, hips and pelvis.** Osteoporosis should not be confused with osteoarthritis. The latter is a form of arthritis where there is wear and tear of the cartilage resulting in joint disease. **Osteoporosis affects both men and women** but is more commonly diagnosed in women over the age of 50. It is the leading cause for fractures in post-menopausal women and the elderly.

Women are more likely to suffer from osteoporosis because they:

- Have inherently smaller and thinner bone structure compared to men.
- Lose bone mass with age due to increased longevity
- Lose bone mass naturally following menopause with decreased levels of oestrogen which acts in a protective capacity for bone.

- **The other major associated risk factors for the development of osteoporosis are:**

- Dietary insufficiencies such as lack of calcium and Vitamin D which has been implicated in the development of weak bones. Certain conditions that result in lack of nutrient intake such as anorexia nervosa, confers a higher risk for osteoporosis.
- A lack of exercise or an inactive lifestyle can predispose to osteoporosis. High impact exercises can help build and maintain bone mass.
- Cigarette smoking and excessive alcohol consumption can increase the risk of osteoporosis. Chronic alcoholism is associated with low bone density, impaired bone cell activity and issues with metabolism that reduce bone health.
- Medications used for chronic conditions such as steroid therapy, certain epileptic medication and anti-cancer medication can predispose to development as well.

Symptoms and signs

Osteoporosis is often called the 'silent disease' as bone loss occurs without any warning signs. Most patients are unaware that they have the disease as they remain symptomless until they have a fracture.

Fractures affecting the vertebra can result in serious problems and results in the following symptoms:

- Sloping of the shoulders with a curve in the spine resulting in a hunched posture.
- Height loss
- Back pain

These fractures can happen during day-to-day activities like climbing stairs, lifting objects, or bending forward. In addition to the above symptoms your doctor will consider screening you for osteoporosis if the following criteria are met:

- Over the age of 65
- Younger than 65 with multiple risk factors.

Diagnosis and treatment

The diagnosis of osteoporosis can easily be made via a DEXA scan which specifically looks at your bone density. This imaging modality uses low doses of radiation and is a fast and painless procedure.

If the diagnosis of osteoporosis is made, your doctor will recommend a combination of bisphosphonate therapy with calcium and Vitamin D supplementation, with yearly monitoring to escalate therapy based on repeated bone scans.

Prevention is key

Building strong bones during childhood and teen years is important to prevent osteoporosis. To ensure this, one needs to address risk factors individually. **Your twenties are the most critical age for building strong, healthy bones which reach their peak strength and density between the ages of 25 and 30.** After this, your bone mass stops growing and all you can do thereafter is maintain the bones you have.

ABOUT THE AUTHOR



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TAIL WAGGIN' ON THE WEST COAST

10 pet-friendly stays

They say that for every 'human year,' a dog ages seven. So, though your annual holiday might always seem too short to you, for Fido, who is pining for you at home, it seems like an eternity. That's why TravelGround has a list of ten beautiful West Coast stays where you and your best (furry) friend are welcome!*



WEST COAST LUXURY TENTS

Between Elands Bay and Dwarskersbos from R1100 for 2 guests

These self-catering en-suite tents, huddled behind a dune, just a short walk from the ocean, sleep two guests each. A private braai will ensure cosy evenings at the fireside with your toes in the sand. A 4x4 is recommended and the nearest shop and fuel station is 35 kilometers away.



BEACH HOUSE ON FAIRWAY

Langebaan from R1545 for 6 guests

This self-catering, six-sleeper beach house has a swimming pool and is right next to a golf course with a view of the lagoon. If that's not enough luxury, Wi-Fi, DSTV, air-conditioning and no less than three braais are available on the premises.



BUFFALO DRIFT - CAPTAINS CABIN

Yzerfontein from R8300 for 26 guests

If you're looking for a getaway for the whole family or a group of friends, this 26-sleeper self-catering house is the perfect fit. It offers private beach access, and your pet is welcome too at an extra fee.



STAY IN HOCUS POCUS COTTAGE

Paternoster from R1350 for 4 guests

Stay in this white-washed house just a short walk from Paternoster's beach. It has a view from the balcony, a fireplace, braai, Wi-Fi, DSTV and sleeps four so you can bring the entire family. You can even book a spa treatment and massage at the establishment and Buddy is welcome too if he is well socialised.



SWEPT AWAY GUESTHOUSE

Yzerfontein from R749 for 2 guests

If your pet is well-behaved, he is welcome at extra cost. From self-catering units to romantic guest rooms, this guesthouse has something for everyone - even for Spot since the garden is fenced to provide a safe play area. Enjoy the beautiful ocean view and luxuries like DStv and Wi-Fi.



BLOUHUISIE

Britannia Bay from R3000 for 8 guests

This beautifully decorated, convenient family home for eight comprises three bedrooms and is nestled behind a dune with direct beach access. It boasts a braai, a large deck, where all fresco meals can be enjoyed, and there is even an outside shower to wash off the sea sand after a day in the sun.



DUNSTONE BEACH HOUSE

Jacobs Bay from R6500 for 8 guests

Open the patio doors and walk out onto the deck of this eight-sleeper beach house to breathe the fresh sea air. The house has DStv, a braai and air-conditioning, so guests can enjoy their stay to the fullest.



STAY AT EMILY IN PATERNOSTER

Paternoster from R910 for 2 guests

With its blue shutters, this typical fisherman's house paints a quaint picture. It comprises three units which sleep between two and four guests and Bek Bay is just down the street. Free Wi-Fi, a braai, DStv and safe parking ensures a convenient stay.



MONTSERRAT OCEANFRONT BEACH VILLA

Sandy Point from R4000 for 8 guests

You won't get closer to the ocean than this modern, four-sleeper house located on an estate in St. Helena Bay. The deck melts seamlessly into the surroundings and the house boasts conveniences like free Wi-Fi, a braai, safe parking and DStv.



SUGAR SHACK

Paternoster from R2900 for 6 guests

If you'd like to smell the sea breeze while reading your book in a hammock, this six-sleeper self-catering house is perfect - both for you and for your dog who'd love the short stretch to the beach. There's a braai, safe parking, DStv and 24-hour security to ensure you sleep soundly.

*Please note: Though these establishments allow pets, but guests still have to arrange to bring their dog(s) along so preparations can be made.



**MELOMED 24
EMERGENCY
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Each emergency unit at the hospitals within the Melomed Group boasts a fully equipped ambulance and response vehicle manned with highly skilled and specialised paramedics. Our emergency units therefore have the capabilities to deal with any emergency 24 hours a day.

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MISSION IS TO PROVIDE A FULL SPECTRUM
OF MEDICAL SERVICES TO THE COMMUNITY.**

**For more information and to enquire
about Melomed emergency standby
services for events **please contact
Melomed 24 on 0800 786 000 or
email melo24admin@melomed.co.za****

STONE FRUIT FUN *for The Kids*

Delicious, candy-like peaches, plums and nectarines are in season now. Here are just two scrumptious kid-friendly recipes - and once you say the words 'popsicles' and 'golden syrup', they'll be keen to know what you're about to serve up, that's for sure.



NECTARINES, MAPLE & YOGHURT POPSICLES

METHOD

1. Place **3 nectarines (chopped)**, juice of **½ orange** and **2 T maple syrup** into a pot, then simmer until the nectarines are soft
2. Place into a blender and puree until smooth
3. Spoon nectarine puree **⅓ full** into the lolly moulds
4. Whisk together **250 ml full cream plain yoghurt**, **100 ml milk**, **1 t vanilla**, **orange zest (finely grated)** and **¼ cup maple syrup**, then carefully spoon into the moulds onto the fruit mixture, leaving space for the cookie mixture
5. Mix together **100 g crushed ginger biscuits** and **4 T butter**, then add as the final layer in the lolly moulds
6. Carefully push the lolly sticks through, then freeze until completely set before unmoulding.

CRUNCHY OAT, NUT PLUM & NECTARINE BARS

METHOD

1. Heat the oven to **175°C**. Grease and line a **18 cm x 28 cm x 4 cm** deep baking tin
2. Heat **250 ml light brown sugar**, **60 ml golden syrup** and **160 g butter** together in a saucepan over low heat until the butter is melted
3. Stir in **625 ml rolled oats**, **125 ml pecan nuts (chopped)**, **125 ml cranberries** and **80 ml sunflower seeds** until well combined
4. Spoon half the mixture into the prepared baking tin. Arrange **2 fresh South African nectarines** (stoned and thinly sliced) on top overlapping them slightly.
5. Spoon the remaining oat mixture on top and spread out evenly. Use the back of a spoon or a potato masher and press down firmly
6. Bake for **35 - 40 minutes** or until golden. Leave to cool completely before cutting into bars using a sharp knife.



HOUSECALL

MEET ONE OF OUR DEDICATED SPECIALISTS

DR JEAN-PAUL KANYIK

He is an Internal Medicine Specialist at Melomed Mitchells Plain



1. Where is your favourite place to eat, and why? I like seafood. Ocean Basket was my favourite place, but for many years, I haven't eaten there because I have young children and they prefer Spur and John Dory's for entertainment.

2. What's the most fun you've had this year? In March, my family and I had an enjoyable experience at Gathlana Holiday Resort which is a 4 hour drive from O.R. Tambo airport. They have wild animals like kudu, zebra and monkeys roaming freely in the resort. The children were not bored because there were multiple activities to keep them busy.

3. What's the best present you've ever received, and from whom? My best presents always come from my wife. Last

year she bought a pulse oximetry, which is useful in the medical practice. It measures pulse rate and oxygen saturation.

4. What's your worst habit? Going to bed late - I am trying hard to change that.

5. Can you play any instruments, or what would you play if you could? I used to play the flute, but I haven't done so in years.

6. What celebrity would you like to be for a day, and why? Barack Obama or Bill Gates, because despite being successful, they remain humble.

7. If you could speak another language, which would it be and why? I speak French and Swahili. Although I know a few

Afrikaans words, I would like to be fluent, because it will improve my interaction with my patients.

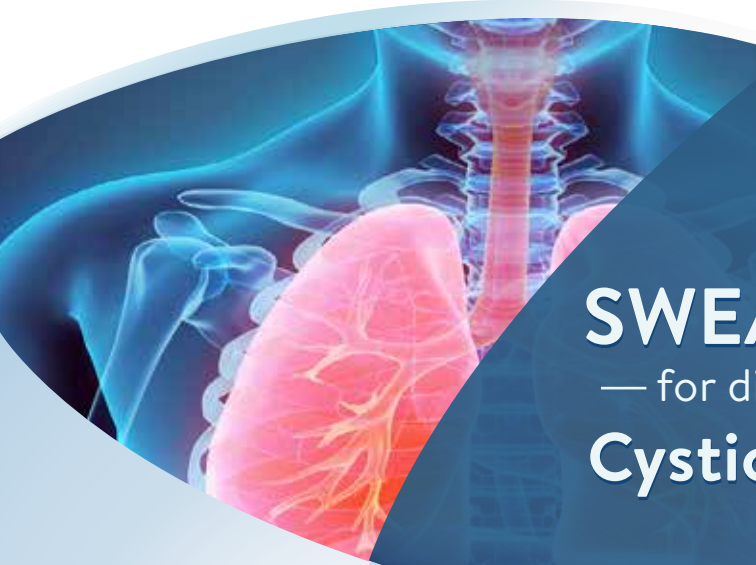
8. If you could only keep five possessions, what would they be? My cellphone (keep me in touch with my family and friends), wallet (contains my driver's license, bank cards), toothbrush, hair clipper and my wedding ring.

9. Who would you want with you if you were stranded on a deserted island? My wife, because we can work together to find a solution.

10. Where do you most want to travel, but have never been? Egypt, but there are many other places that I would like to travel to with my family.



TIME IS
SUBJECTIVE,
BUT OURS IS
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SWEAT TEST

— for diagnosing —

Cystic Fibrosis



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Cystic Fibrosis (CF) is a disease that causes mucus build-up in the lungs and other organs. It damages the lungs and makes it difficult to breathe. CF also causes frequent infections and malnutrition. It is an inherited disease, hence it can be passed on from parents to children by way of DNA.

SYMPTOMS OF CF MAY INCLUDE:

- ▶ Salty-tasting skin
- ▶ Frequent coughing
- ▶ Frequent lung infection (bronchitis or pneumonia)
- ▶ Difficulty in breathing
- ▶ Poor weight gain
- ▶ Greasy bulky stools

CF has no cure, but there are treatments available that will reduce the symptoms to improve the quality of life for the patient.