

# Keeping Well?

The Newsletter of the Nuffield Patient Group

Spring Issue 8

## *Spring is here!*

All of a sudden, the days are drawing out, the clocks have gone forward and the birds are singing. It must be Spring! So it's time for a new edition of *Keeping Well?*, the newsletter from the Nuffield Practice Patient Participation Group.

In the spirit of springtime, we have positive news and some helpful updates to keep us all well. These include:

- an inspiring article on dealing with anxiety and depression (this page)
- our own original cartoon from 'Tim' (page 2)
- news on NHS health checks (page 3)
- a reminder of the rural world just on our doorstep (page 4)
- a word from the Cochrane Collaboration on the menopause and HRT (page 5)
- an update on the national shingles vaccination programme (page 6).

And, please don't forget that we would still like to recruit some more members for our Patient Participation Group, so if you think you might be able to spare us just a little time to enhance the practice, do please get in touch with Catherine Simonini, our Practice Manager.

## *Finding light in the darkness*

*Anthony Hagen shares his inspiring experience of anxiety and depression*



The fifth of February 2015 was a very important day for me. It was Time To Talk Day. A day designed to raise awareness of mental health and break the stigma that is associated with it.

For over 20 years I have suffered from depression and anxiety. I have no knowledge of why it started, I just knew that dark clouds were growing. I tried various pills and therapies with varying degrees of success. However, in the summer of 2013, things went downhill very fast.

At that point I had to make a decision. If I was going to live, I had to have a life. On 9 September 2013 I went to see my GP. She was excellent, not just 'have some pills and come

*Continued overleaf*

back in a month'. She talked to me and helped me to work out what was best for me. Pills and therapy will do so much but I began to realize how important self-belief and the desire to change would be for me to progress. I had to want it as well.

When you are so low, making what seems to be that giant leap is so very hard. Life is full of 'cannot' rather 'can do'. You feel very alone, full of doubt and fear. I was very lucky – as well as my

GP and my CBT (cognitive behavioural therapy) therapist, I have great family and friends. I didn't know at the time just how much they wanted to support me and help me get 'better'.

More than 17 months on, I was able to attend the Time To Talk Day as somebody who has been through it and come out on the other side.

Mental health is tough on all. The sufferer, the friends and family, they all need help, hope and support. I hope that my positive experience shows that, with all the darkness, there is light as well.

### Healthy body, healthy mind

Much is made of 'a healthy mind comes from a healthy body'. They are spoken as if they work as one. The dark nights of winter can also make us feel a little more down than up.

Busy lives, work and family commitments all seem to swallow time and before we know it we are on the sofa exhausted just from the day. The thought of getting out for a bike ride, a run or just a walk is hardly appealing.

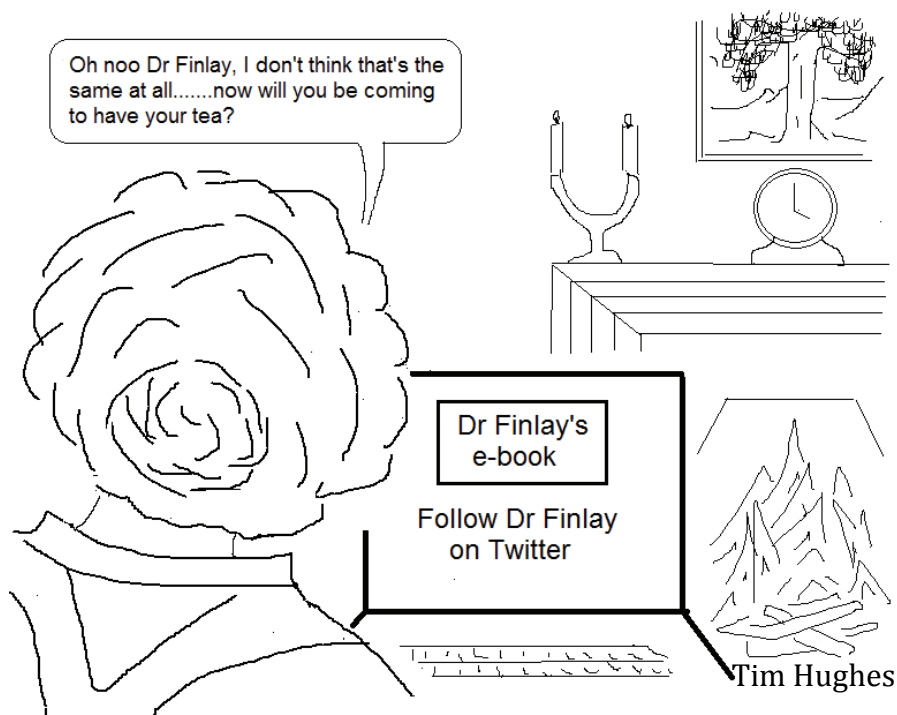
Well that was certainly my view, but my doctor and mental health team said "Try it – what harm can it do?"

So I dusted down the kit and off I plodded. Very slowly and not very far. Hated getting ready for it, hated doing it, but I felt so much better every time I did. Every day I went for a walk at least and as the mornings and evenings became lighter I ran a little more.

I was going further and faster and with every small improvement it gave me a lift. Sleep improved, anxiety dropped and I felt more confident about myself. Rather foolishly, I was persuaded to enter the OX5 run around Blenheim. I did it, and then a few more, and finally the Oxford Half Marathon.

That might be too much for some and I thought it was for me. When I dusted off that kit and did my first plod, I would never have imagined entering, let alone running a half marathon. I came full circle on the weekend of the 29th March when I was back running at Blenheim.

Getting out for a walk or a run, getting the heart pumping, swimming or gardening, pilates or yoga: it matters not but it really does help body and soul. It might be a hassle or an inconvenience, but the rewards are yours and they do make a difference.



## NHS Health Checks

*Practice Manager Catherine Simonini updates us on the NHS Health Check programme, which aims to help to prevent certain diseases*

Everyone between the ages of 40 and 74 years who has not already been diagnosed with heart disease, stroke, diabetes, kidney disease or certain types of dementia will be invited every 5 years to have a check to assess their risk of developing one of these conditions. If they are found to be at high risk, they will be given support and advice to help them to reduce or manage that risk.

### How do I get an NHS Health Check?

If you're in the 40–74 years age group without a pre-existing condition, you can expect to receive a letter from the Practice inviting you for a free NHS Health Check. Don't worry if you haven't got your invitation yet, as you will be invited over the next few years.

*“The NHS Health Check is free and should not be missed,” says Sir Muir Gray, Chief Knowledge Officer of the NHS. “It will give you the knowledge you need to take control of your health.”*

### Why should I get checked?

As we get older, we have a higher risk of developing something dangerous such as high blood pressure, heart disease or type 2 diabetes. Your NHS Health Check can spot early signs and help to prevent these happening to you, which means you'll be more likely to enjoy life for longer. Think of the NHS Health Check as a midlife MOT. It is not only an opportunity to put right emerging problems, but to get personalized advice on keeping yourself healthy and active in the future.

The NHS Health Check is based on the best scientific evidence from Britain and around the

world and can transform people's lives. It provides a rare opportunity to sit down with a health professional and talk about your health requirements. Afterwards, you will be more confident about your health and know more about it. You should also receive a wellness plan, tailored specifically to your needs.

### Learn your vital stats

The NHS Health Check gives you an overall score that you can keep track of and improve over time. Some think of this as their 'heart age'. This single figure is calculated from up to 20 other snippets of information about you, but there are three important statistics that you should know and, from time to time, should monitor: blood pressure, body mass index (BMI) and cholesterol count.

*“The NHS Health Check gives you an overall score that you can keep track of and improve over time.”*

### Get an action plan

As important as the NHS Health Check is, the action plan for health improvement that comes with it is the real game changer.

Some people end up with an NHS Health Check score that is better than normal, and for these people no changes will be necessary. But for most of us, some change will be recommended. For example, you may be advised to be more physically active or cut down on the amount of fat, salt or sugar in your diet.

If your NHS Health Check suggests you are at higher risk, you might also be offered medicines to control your blood pressure or lower your cholesterol, along with help to take action with losing weight or stopping smoking.

More information is available from [www.nhs.uk/Conditions/nhs-health-check/Pages/NHS-Health-Check.aspx](http://www.nhs.uk/Conditions/nhs-health-check/Pages/NHS-Health-Check.aspx)

## *Walking in the Lower Windrush Valley*

*Even if you don't have a lot of mobility, you can still enjoy the Lower Windrush Valley, explains Jane Bowley, Lower Windrush Valley Project Officer*

The Lower Windrush Valley lies to the south east of Witney in West Oxfordshire, and it is an area that has been extensively modified by mineral extraction over the last 60 years.

There are several places to walk in the valley, some along the River Windrush, others around lakes created from gravel pits. They all afford a wonderful opportunity to get outside and enjoy the countryside and the wildlife.

Walking from the town centre, Witney Lake and Country Park offer a gateway to the valley. There are surfaced paths around the lake and rougher paths through fields, providing a rich variety of walking experiences on the doorstep of the historic market town of Witney.

About two miles from the centre of Witney, at Rushy Common Nature Reserve and Tar Lakes, on Stanton Harcourt Road, there is a free car park (nearest postcode OX29 6UJ). The nature reserve

can be viewed, in part, from the footpath, but better views can be had from the bird hide, which requires the purchase of a key from the Lower Windrush Valley Project office. Tar Lakes has open access, with a gravel-surfaced path around one lake that is suitable for wheelchair users and grassy paths around other lakes that link into the wider network of rights of way.

For more energetic walkers there is a selection of footpaths, with some circular routes and two sections of the linear Windrush Path, which is being developed in stages so that it eventually joins Witney to the Thames Path National Trail at Newbridge. The northern section of the Windrush Path, from Witney to Hardwick, uses a permissive path along the bank of the western arm of the River Windrush and the southern section runs along public footpaths from Standlake to Newbridge.

### **For leaflets about walks**

Visit the Lower Windrush Valley Project website (<https://www.oxfordshire.gov.uk/cms/public-site/lower-windrush-valley-project>)

or

contact the project office (Tel: 01865 815426; e-mail: [lwvp@oxfordshire.gov.uk](mailto:lwvp@oxfordshire.gov.uk)).

### **Walkers at Tar Lakes**



## *Evidence Matters by Sarah Chapman*

*I work for Cochrane UK, the UK hub of an international network of people working together to help people make informed decisions about health care. It does this through doing systematic reviews, which bring together the results of clinical trials to answer questions about what helps or harms in health care.*

### **The menopause: a 5-minute guide**

It's unthinkable that we wouldn't tell girls about periods, but women are arriving at the menopause largely unprepared. It's just not talked about much, yet 1 in 4 women say their symptoms affect their quality of life and 1 in 10 still have problematic symptoms after 15 years.

The menopause happens with the final menstrual period, but this is only known with certainty after a year. The time before this, when the first signs of the approaching menopause appear, is called the 'peri-menopause', during which time periods may become heavy and/or infrequent.



As well as the natural change in hormone levels after the final menstrual period, treatment to destroy or remove the ovaries may induce the menopause. The menopause affects women in different ways but common symptoms are hot flushes, night sweats, mood changes, memory problems, headaches and insomnia.

### **Hormone replacement therapy (HRT) - should you be worried about the scare stories?**

HRT risks are to do with blood and cancer. New Cochrane evidence on HRT and heart health hit

the headlines recently. It showed that women starting HRT close to their menopause or aged younger than 60 may have a slightly lower risk of heart disease and a slightly higher risk of blood clots and stroke.

Like any treatment, HRT has potential risks and benefits, which you'll need to weigh up. Talk to your GP about the risks and benefits so you can make an informed choice.

### **Do alternative therapies work?**

We don't know. Cochrane has looked for the best evidence on acupuncture, the herb black cohosh and phyto-oestrogens, but there's a lack of reliable evidence on whether these are helpful and safe.

### **The menopause can affect your sex life**

Hormonal changes can affect your sex drive and how you feel about yourself, as well as causing physical changes from vaginal dryness to urinary problems, including incontinence and infections. Communication with your partner is important and talking to your GP might be helpful. If you find this embarrassing, try writing a list of points to discuss.

### **If you have type 1 diabetes, the menopause can affect your blood glucose levels**

After managing your diabetes perfectly well, you may find that it is suddenly going a bit haywire. There's very little reliable information about the menopause and diabetes; a Cochrane review on HRT in this context found only one small trial. You may need to review your diabetes management with your nurse or GP.

### **Where can you get reliable information?**

The Evidently Cochrane website has a special series of blogs on the menopause, with women's stories and the bottom line on the available evidence for different treatments, including those mentioned here. You'll find them at [www.evidentlycochrane.net/?s=menopause](http://www.evidentlycochrane.net/?s=menopause)

There's also a brilliant online resource at [www.Healthtalk.org](http://www.Healthtalk.org) that provides information on menopause topics, accompanied by women sharing their experiences through video, audio and text.

## Shingles vaccination

The Department of Health has introduced a shingles vaccination programme for people aged 70-79 years to help to protect those who are most at risk from shingles and its complications.

Shingles is most common and usually most severe in people aged over 70 years. The shingles vaccination programme is being phased in over the next few years, so not everyone will be eligible for the vaccine this year. If you are eligible for the vaccination, we will contact you and ask you to book an appointment, or you can book your appointment yourself.

### Who will get the vaccine?

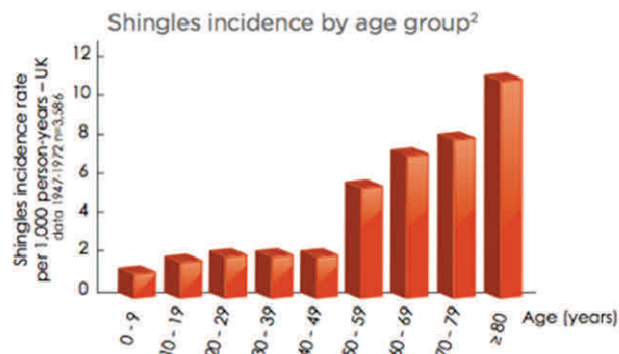
People aged 70, 78 or 79 years on 1 September 2014 are eligible. If you were aged 71 years on this date and have not yet received the shingles vaccine you may also be eligible.

People aged under 70 on this date will be offered the vaccination in the year following their seventieth birthday; people aged 80 years and over are not part of the national programme.

If you were born on or between 2 September 1942 and 1 September 1943, please call your GP to ask about the vaccination.

### What is shingles?

Shingles, also known as herpes zoster, is a condition that is caused by the reactivation of the chickenpox virus. After people have chickenpox – usually as a child – the virus travels up a nerve root and lies dormant near the spine. Later in life the virus can reactivate and cause shingles. The reasons for reactivation are not completely known. Reaching an older age or having conditions that affect the immune system makes the virus much more likely to reactivate. Shingles tends to



occur more frequently in older people and is usually characterized by a painful rash on one side of the body.

### What happens if I develop shingles?

Most people do not have any long-term effects, but for some people shingles can cause complications. The long-term nerve pain that some people experience is known as post-herpetic neuralgia (PHN). This can be a severe, unpleasant, long-term nerve pain that is often described as burning, stabbing or throbbing. This can last weeks, months or, for a few people, even years. PHN can affect quality of life, and the majority of sufferers say they have less enjoyment of life and find their sleep, work and social life disrupted. The older you are, the more likely you are to have long-lasting nerve pain.

Sometimes shingles can develop in the eye and/or affect the skin of the eyelid. This can cause severe pain and lead to decreased vision or, rarely, permanent blindness in the affected eye. Shingles can also lead to other complications like scarring, skin infections or, rarely, hearing loss.

### How likely am I to develop shingles?

Around one in four adults in the UK develops shingles during their lifetime. It is not fully understood why the shingles virus reactivates in some people and not in others, but the immune system weakens with age and this may be why the chance of developing shingles increases as we get older.

*For further information about this newsletter, please contact:*

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