

PREVENTION IS THE KEY



Encourage group activities. As little as three 10-minute walks each day can improve health.



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Health checks are an opportunity to assess risk, prioritise preventive strategies and reduce morbidity and mortality.

PREVENTIVE healthcare is a key component in effective patient management, and is a top priority worldwide. GPs are central to its successful implementation.

An estimated 40% of cancers and 80% of type 2 diabetes, strokes and premature heart disease can be prevented through early intervention.

The Organisation for Economic Co-operation and Development (OECD) reported Australia's adult obesity rates to be the fifth highest worldwide in 2015, a worrisome trend.

An Australian Institute of Health and Welfare (AIHW) report the previous year shows

more than 63% of adult Australians were overweight, 43% were not sufficiently active and 2.8 million smoked daily.

An estimated half of Australian women have two or three modifiable risk factors for cardiovascular disease, AIHW has found.

The RACGP's 8th edition of *Guidelines for Preventive Activities in General Practice* (the 'Red Book') is the gold standard for evidence-based advice for primary care.

Preventive strategies include incorporating recommended chronological health checks into practice, use of SNAP (Smoking, Nutrition, Alcohol and Physical Activity) risk-factor assessment, and a willingness to engage in patient education.

General health checks can be used as an opportunity to get to know patients better.

CLINICAL POINTERS

Cardiovascular disease: BP measurement, cholesterol and triglyceride blood tests, waist circumference and BMI in all women at high risk or older than 45, Aboriginal and Torres Strait Islander women over 35. Refer to

a dietitian if healthy eating is of concern.

Diabetes: Use the Australian type 2 Diabetes Risk Assessment Tool for women over 40 (Aboriginal and Torres Strait Islander women over 18), with assessment every three years. Annual fasting blood sugar level test for high risk individuals.

Physical activity: Regular physical activity improves mental and physical health. Advise all patients, especially those with sedentary lifestyles, that it can be as simple as three 10-minute walks each day. Encourage group activities, especially in older women or those at risk of social isolation.

Pap smear: All sexually active women should have one every two years (though this will change next year). The initial consultation before a Pap smear is a good opportunity to discuss sexual health in a non-judgmental way, if appropriate. Awareness of cultural factors is vital as some women may not feel comfortable having this discussion.

Sexual history: Discuss use of contraceptives, STI risk, including opportunistic testing for chlamydia, dyspareunia, chronic

pelvic pain or any discomfort during sex, vulvar symptoms, and any other concerns.

Reproductive health: Ask about menstruation, dysmenorrhoea, PMS symptoms, pregnancies and fertility status. Refer to a gynaecologist if needed.

Menopause: Inquire about symptoms and suggest referral to a specialist for an individualised treatment plan.

Breast health: Demonstrate how to conduct self-examination, and discuss breast awareness. Annual breast checks and two-yearly mammograms for at-risk individuals and women aged 50–74.

Mental health: Inquire about depressive symptoms, anxiety, stress and sleep. A simple "how are you feeling?" can reveal a lot. Awareness and a supportive manner are needed to encourage dialogue if domestic violence is a concern. Consultation with a GP may be the only opportunity for an at-risk individual to get help. All requests for antidepressants or sleeping tablets should be seen as an opportunity to discuss home circumstances.

Osteoporosis: Arrange a bone density scan for over-70s or those at risk.

Bowel cancer: Over-50s should have a faecal occult blood test every two years, and a colonoscopy every 3–5 years if there is significant past or family history.

Eyes and ears: Check for glaucoma at 40, or 35 if risk factors are present. Over-65s should have yearly eye and hearing tests.

Skin cancer: Advise self-examination three-monthly for at-risk individuals, and dermoscopy and photography yearly.

WELL-INFORMED PATIENTS

Patient education is key to instigating positive changes in behaviour. Adopting a supportive, patient-centred attitude and providing appropriate resources is essential.

Many women will make new year's resolutions to become healthier and seek GP advice. Direct them to evidence-based websites such as Better Health Channel, HealthDirect and Jean Hailes for Women's Health, which help patients make informed health decisions.

References at medobs.com.au

Jean Hailes for Women's Health is a national, not-for-profit organisation focusing on clinical care, innovative research and practical educational opportunities for health professionals and women. www.jeanhailes.org.au