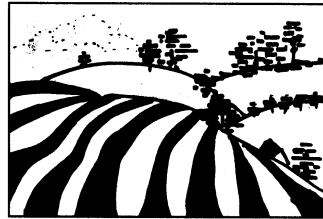


DOWNLAND UPDATE



Notes from the Downland Practice

Issue number 37

Spring 2010

All Telephone Calls : 01635 248251

The busy time for calls is up to 11.00 a.m.

Please avoid this time unless your call is urgent

Fax : 01635 247261

Website : www.downlandpractice.co.uk

Local Hospital Numbers

West berkshire 01635 273300

Royal Berkshire : 0118 3225111

John Radcliffe : 01865 741166

North Hants : 01256 4732902

Great Western : 01793 604020

Asthma

When a person with asthma comes into contact with something that irritates their airways (could be cats, horses, pollens, cold air, damp air, etc) the muscles around their airways tighten so that the airways become narrower and their lining becomes inflamed and starts to swell. This can cause shortness of breath, a cough or a wheeze.

There are many medicines for asthma but the main ones fall into two main groups:

'Reliever' inhalers, usually blue in colour, work quickly to relax the muscles enabling them to make the airways wider. Blue inhalers can be felt to work in 10-15 minutes and their effect lasts for 4-5 hours.

'Preventer' inhalers can be brown, red, orange or purple in colour. They work by controlling the swelling and inflammation in the airways, stopping them from being so sensitive and helping to prevent severe asthma attacks.

'Preventer' inhalers do not give quick relief but need to be taken twice a day for at least 4-6 weeks to really 'get a grip'. Some chest physicians would give them much longer. If you need your blue inhaler more than 4-5 times a week then you should be using a 'Preventer' inhaler.

After you start to use an inhaler your doctor or asthma nurse will want to see you quite soon so that your medication can be increased or decreased depending on how you are. After that, if you are well, you should be seen annually if you are just using a blue inhaler or every 6 months if using a preventer.

When you visit the doctor or nurse you will be asked to blow into a Peak Flow Meter to check if you are blowing the correct amount for your age and height. This will help us to know if your asthma is well controlled. They will also make sure that you are able to use your inhalers correctly and have a general chat to discuss any concerns that you may have and check that your asthma inhalers are right for you and your lifestyle.

Di Mesbah
Asthma Nurse

Charity Bike Ride

Last year our Charity of the Year was Great Ormond Street Children's Hospital. We needed to raise some money so I decided that a sponsored bike ride might be fun. We all agreed on a distance of 46 miles from Newbury to Pewsey Warf and return. It didn't seem that far, that was until the training started! On Sunday mornings at the crack of dawn you could catch a few of us cycling to Hungerford and then beyond to build our strength and stamina and to get the feel of the distance we would be undertaking.

The day of the bike ride came and Mary, Leslie, James, Christina, Lynette, Claire, Matthew and Phil were on our merry way. Of course it was raining but what else could we expect at 7.30am on a cold October morning!

We all took off and got to Marsh Benham where 4 riders decided to go on the road route and the rest of us carried along the canal. We would all meet up at certain places and of course met for lunch.

Our journey home wasn't quite as wet, but we were all extremely muddy and didn't really care at that point. We all met up for the last 2 miles home; after a few nibbles we were on our way.

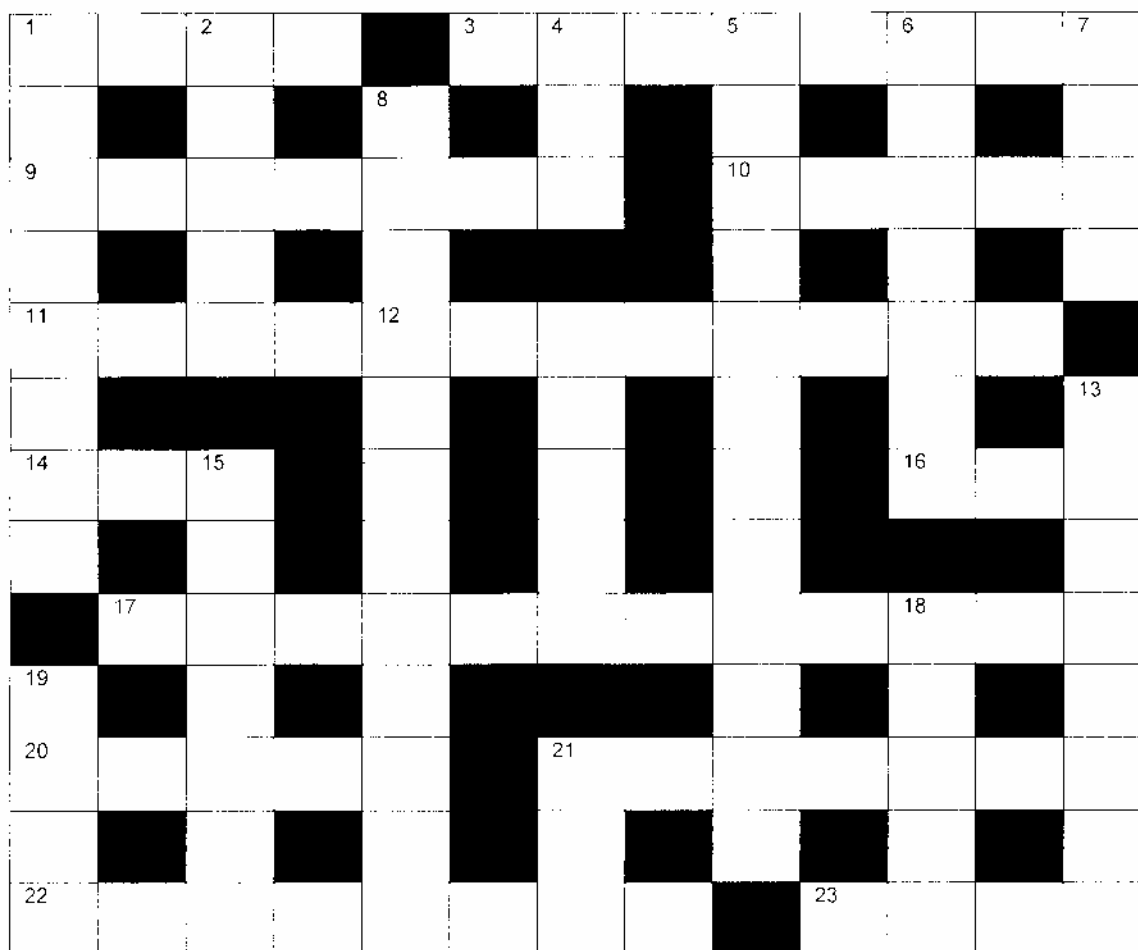
As we drew nearer to Newbury seeing the sights like going under the A34 and St Nicholas Church you could feel the relief that we had made it. The time now being 4.45pm it was a very long day. All of us feeling exhausted we had our photo taken and then went our separate ways to recover.

It was a great feeling knowing that we had done this for charity and knowing the children would benefit. We raised a grand total of £1,247.50 a great achievement for everyone who took part.

Claire

Future Event

Our Charity this year is Help for Heroes and we are planning another sponsored event, possibly a bike ride/walk, in the summer. We will be letting the Parish Councils know as soon as more details are available and posters will go up in the Practice. Please keep an eye out for further information.



Across		Down	
1.	Torture instrument, display frame (4)	1.	Remainder – derail us (8)
3.	Type of saw – scots cur! (8)	2.	Blokes, leather riding leggings (5)
9.	Plant in body of water (7)	4.	Colour (3)
10.	Indian coin (5)	5.	Between the troposphere and mesosphere (12)
11.	Thesis – disorients at! (12)	6.	Plenty of (7)
14.	Small, long-eared quadruped (3)	7.	Woody plant (4)
16.	Hot spring (3)	8.	Trading post, stocking top soldier (7,5)
17.	Local search (5-2-5)	12.	Harass with persistent criticism or carping (5)
20.	Declare as sacred or forbidden (5)	13.	Lower ground floor (8)
21.	A moulding between ceiling and the wall (7)	15.	Drool – or blebs! (7)
22.	Seep through (8)	18.	Bring together (5)
23.	Shut up, confined – could be emotions? (4)	19.	A short distance sees pets turn round! (4)
		21.	Slice, the first being the deepest? (3)

Hello and Goodbye

Dominika left the dispensary team and Sam Clarkson joined.

Dr Lucy Dugmore is our current F2 who will be with us until April, 2010.

Cate from dispensary will be leaving us for a while on maternity leave.

Two of our Practice Nurses have left; Rikki Davies and Miriam Wardle and Sarah Denness will be leaving us in March.

We have a new nurse starting in March, Becky Crisp and are looking to appoint another in the near future.

Practice Developments

As some of you may have noticed we are building a new room above the main consulting corridor at Chieveley. This will be an office for the District Nurses which will enable us to turn their existing office into another consulting room.

So far work on this has been taking place at weekends but will now need to be during the week as well; so please bear with us as there will inevitably be some noise and dust until work is completed.

We are also planning to redesign the reception desk area at Chieveley. This will provide more privacy for patients needing to speak the receptionist and also give more space in the waiting room.

A FREE HEALTH BOOST

By a patient.

There's a free health "additive", available almost immediately and at little cost. If it could be converted into a pill it would be hailed as a wonder drug. It's called regular walking exercise.

Most people know that exercise is beneficial to health; however, gym workouts, jogging, or aerobics are not convenient --or indeed suitable—for everyone. At the same time, perhaps the full health value to be gained from regular walking may be underestimated--or more would be doing it. If coupled to healthy eating, these are some of the benefits which might well be achieved:-

- a reduction in the levels of obesity
- a slowing in the development of osteoporosis
- a reduction in the number of coronary heart disease cases
- lowering of high blood pressure
- improved strength of hip and knee joints
- lower levels of diabetes
- improved resistance to cardiovascular disease
- better sleeping patterns
- increased resistance to some cancers

People living in our Downland villages have an invaluable, free local amenity on their doorstep. That is the abundance of parish paths and beautiful walking routes. Many parish councils have produced a local walks leaflet; it's also worth contacting West Berks. Council's Countryside Dept. (01635 519627) who will know about any regular walks programme run in the various parishes. Try to walk for at least 30 minutes twice a week --more often if you can find the time.

Hints & Tips

Always warm up the muscles gently by setting off at an easy pace for the first 10 minutes. Next, speed up for 10 minutes at your optimum pace ; you can find out what this is by increasing speed until you almost break into a jog, then reduce speed by up to 10%. This should feel definitely quicker than your easy walking pace but if you are panting or drawing deep breaths it's still too fast. It's about right when you can't easily indulge in continuous conversation. It helps to increase walking speed if you swing your arms with elbows close to the body. Walking on grass or mud uses up more energy (and up hills much more) so you should automatically slow down a little. The final 10 minutes should also be at a more leisurely, "winding down" pace. Some people like to use a stick to assist balance over rough ground. Also useful is a small bottle of water in case you get a dry throat -- the body's signal to avoid dehydration; and if the weather is sunny, don't forget hat and sunscreen.

Finally, if you don't normally take much exercise, or have a medical condition, consult your GP before embarking on a regular walking programme.

Restless Legs

If you have an irresistible urge to move your legs because otherwise they may feel uncomfortable or unpleasant, you may have Restless Legs Syndrome (RLS). This is sometimes known as Ekbom's Syndrome, named after the doctor who first described it. The symptoms can be worse in a confined place such as sitting in a theatre or when first resting, eg while lying in bed. Indeed it is usually worse at the end of the day or only felt then. The feelings are relieved by moving the legs. They can be accompanied by jerks in many cases and these can disturb sleep. Tiredness, unfortunately a generally vague symptom can also be part of the picture.

It has been estimated that 1 in 10 people will get RLS at some stage. Of these, 3 in 4 will also get jerks. It is unfortunately not known what causes RLS but occasionally there can be a disturbance of brain chemicals or neurotransmitters as they are known, eg dopamine. It has also been noticed in pregnancy, anaemia, kidney failure, diabetes, underactive thyroid and Parkinson's disease. Tests can be done to rule out these conditions and if they are all negative, there is no special test to confirm the diagnosis.

Treatment hinges upon the cause, of course. For example in iron deficiency anaemia, the patient can take iron. If the cause is not known, treatment is more general. Distractions, exercise and avoiding caffeine and alcohol may help. Rarely medication may be tried, eg ropinirole or pramipexole which are two new drugs also used in Parkinson's disease. These are very expensive and so are definitely not first line! Other medications sometimes tried include carbamazepine, gabapentin, benzodiazepines and strong painkillers.

A useful website for further information is www.rlsuk-esa.org.uk which is that of the RLS-UK/Ekbom Syndrome Association.

Dr Mary Dyson

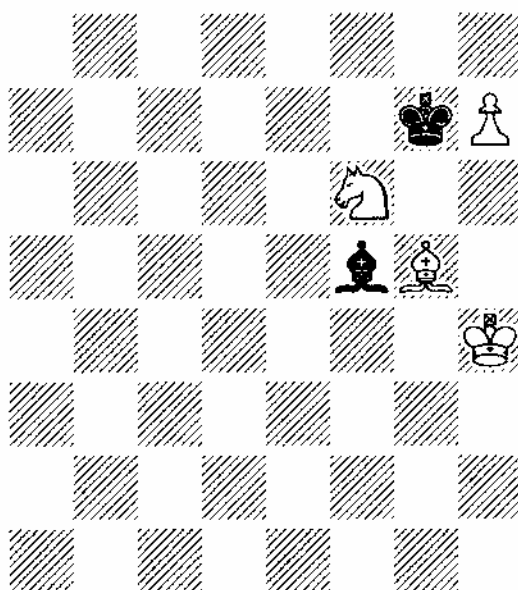
Chess by Weak Square

Last quarter's problem seemed to fox everybody! Even the reliable Mick Marlow, having correctly found the first move, lost his way. The full solution is that Tal should play Kd6. This forces the reply ... Re2, but then white has the killer Rg4!! Threatening mate on g8. Black is forced to move ti jubg ti c8, and then after Rg1 ! black has no good moves – he will have to sacrifice his rook to stop the e-pawn while white's rook on g1 stops the two black passed pawns.

Another endgame this time – bishop and knight alone cannot normally force a win as they do not co-ordinate well enough, so in this position white's trump card is clearly his extra pawn..... but it is threatened with inevitable capture! White to play and win. First 2 moves please.

Good luck.

Andrew Wardle



Patient Representation Group

As with most GP surgeries at The Downland Practice we have a Patient Representation Group (PRG). Unlike most other surgeries ours is made up of a representative of each of the Parish Councils in our Practice area.

These representatives bring queries to the Practice from patients and are also responsible for feeding back to patients, mainly through their newsletters, any changes at the Practice or ongoing matters that may need support from patients.

The group meets quarterly at the Chieveley surgery and notes from these meetings are available on our website (currently being updated!!)

Contact can be made with the representatives through the Parish Clerks for each Council. These are as follows:

Beedon	janet.haines@the-wolds.co.uk
Brightwalton	swannpj@yahoo.co.uk
Chaddleworth	cpc@ackrills.freemove.co.uk
Chieveley	Chieveley.pc@btinternet.com
Compton	comptonparish@googlemail.com
East Ilsley	eastilsley-pc@btconnect.com
Frilsham	01635 200945
Hampstead Norryes	clerk@hampsteadnorreys.org.uk
Hermitage	billgoude@aol.com
Leckhampstead	a.es@virgin.net
Peasemore	alex@loch-erracht.demon.co.uk
West Ilsley	01635 281705
Yattendon	kenmee@btinternet.com

Contact details taken from West Berkshire Council website and correct as at 1st March, 2010. Please check website for up to date contact details:

www.westberks.gov.uk

Lost Property

Listed below are items which have been left in the surgery over the past few months. Please ask at reception if you wish to claim them.

Black sunglasses
Black hairbrush
Handheld fan
Receipt
Buggy book
Small plastic lorry
Water bottle
Childs book
Red bus
Blue hat

Soft bunny
Blackberry phone case
Red umbrella
Black/white umbrella
Brown hood
Grey glove
Black phone holder
Black back support
Beige gloves

Round me at twilight come stealing
Shadows of days that are gone,
Dreams of the old days revealing
Memories of love's golden dawn.

Memories, dreams of love so true,
Over the sea of memory I'm drifting back to you.
Childhood days, wild wood days,
Among the birds and bees.
You left me alone, but still you're my own
In my beautiful memories.

Sunlight may teach me forgetting,
Noonlight bring thoughts that are new;
Twilight bring signs and regretting,
Moonlight means sweet dreams of you.

Brenda

CROSSWORD SOLUTION

ACROSS: (1) Rack (3) Crosscut (9) Seaweed (10) Rupee (11) Dissertation (14) Ass (16) Spa (17) House to House (20) Taboo (21) Cornice (22) Permeate (23) Rent

DOWN: (1) Residual (2) chaps (4) Red (5) Stratosphere (6) Copious (7) tree (8) General Store (12) Taunt (13) Basement (15) Slobber (18) Unite (19) Step (21) Pent