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Your Health

Autumn Edition



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Welcome to our Autumn issue including a collection of
articles from our team.

We hope you enjoy reading them!

If you would like to get involved or have any feedback, please email us at
tamaritabiyat@gmail.com or message us on our socials @tamaritabiyat.

The intricate dance of the body and the mind

by Dr Yashvi Vijh MBBS, MRCGP
General Practice - East London

In years gone by, we have always thought about the mind and body as two separate entities. But now, research shows how interconnected they are.

Have you ever felt your heart race before a big meeting or an interview? Have you ever had so many things going on in your life that you get a headache? Have you ever woken up after a weekend of being too busy, staying up late and not looking after yourself?



Many, if not all of us, will be familiar with this. What is happening in our mind can show up in our body, and it is a normal human experience unanimous to us all.

Stress has become unfortunately very common in today's modern society. Our phones, social media, it all has a part to play.

Sometimes we can experience so much stress within our minds that it is too much for us to handle, and it needs somewhere else to go. The excess stress can present in so many different ways - not only in mental health conditions such as anxiety and depression but also in physical health conditions e.g. skin rashes, hair loss or aches and pains. These can last for months or years and become what's called "chronic" or long-term pain.

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Your Health

The intricate dance of the body and the mind

by Dr Yashvi Vijh MBBS, MRCGP
General Practice - East London

Stress can manifest in the human body in almost any way. In fact, we now have an epidemic (much like COVID-19) of “Medically Unexplained Symptoms” that are exactly due to this.

My message to you today is - I urge you not to see the mind and the body as two separate entities, but one and the same. They are in one beautiful, confluent dance together. The body's symptoms are always trying to send us a message, to help us understand what the mind cannot.

Next time you get a headache or a stomachache, ask yourself, how is my day going? What is happening for me right now? Is my body trying to tell me something? You might just get an answer that is more than you bargained for.



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Your Health



Written by
Dr Yashvi Vijh

Breast Cancer Awareness

by Dr Sonam Gadhvi BMBS BSc
GP Resident Doctor - East London

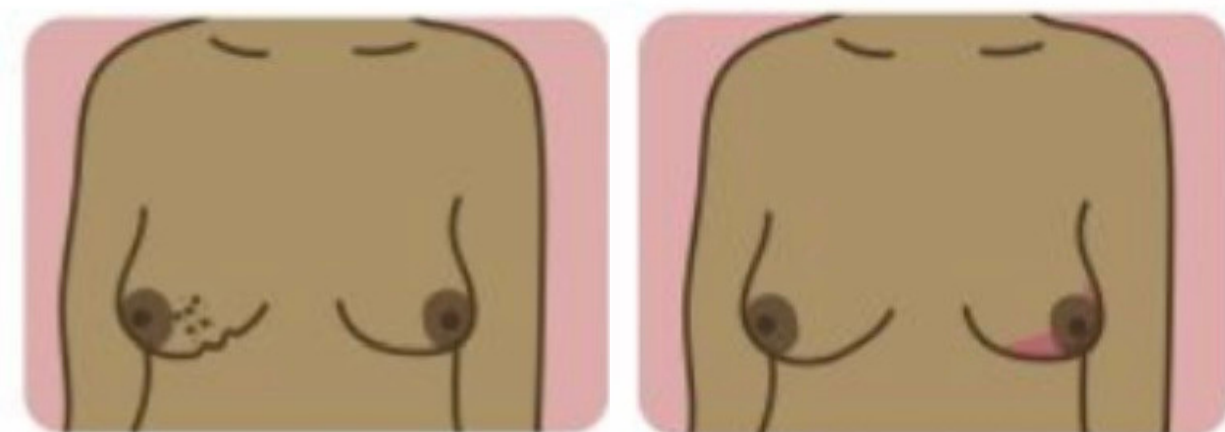
October was Breast Cancer Awareness month so what does this mean?

This means all women (and for that fact men - men can also get breast cancer!) should have an awareness of the signs and symptoms to look out for, to detect early evidence of breast cancer. In this way, they'll be investigated early and early intervention will lead to better outcomes, less likely to spread to the rest of the body and less deaths.

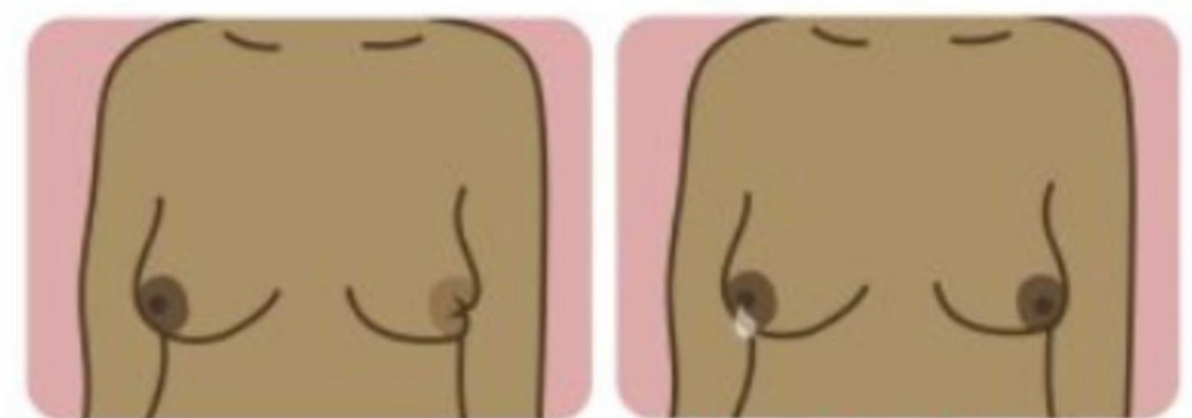
How can you spot the signs of possible breast cancer?

LOOK

Skin changes - puckering that looks like an orange, dimpling, or colour change (redness)



Nipple changes - discharge including bloody discharge, pulled in (inverted nipple)



Changes in shape of your breasts



FEEL

Any new lumps - especially if hard, rapidly growing

Painful breasts - new, unusual or continuous pain in the breasts

Breast Cancer Awareness

by Dr Sonam Gadhvi BMBS BSc
GP Resident Doctor - East London

Checking breasts regularly in the following steps:

1. Undress and **look** in the mirror for your normal/symmetrical breasts and for skin changes
2. Put your hands behind your back and then behind your head to **check** for dimpling of the skin
3. Use 3 or 4 fingers together from the opposite hand to **press** against your chest, starting from the armpit to the top corner of the breast tissue, and going around the breast in a circular motion towards the nipple
4. Use 2 fingers to press on either side of the nipple
5. Do the same to the other side

This should be done ideally **every month**

If you notice any of these changes, please see your GP as soon as possible. They may refer you to a breast clinic for further tests and assessment.

If you have a family history of breast cancer, you could also be eligible for genetic testing to see if you have a gene that increases your risk.

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Written by Dr Sonam Gadhvi

Type 2 Diabetes

by Dr Christian Asante-Baah MD, BSc (Hons)
Acute Medicine – Princess Alexandra Hospital

What is Type 2 diabetes?

Type 2 diabetes is a long term condition that occurs when you have persistently high blood sugar levels - this is known as hyperglycaemia. It can affect your everyday life and you may need to change your diet, take medicines and have regular check-ups.

Type 2 diabetes may occur when your pancreas doesn't make enough insulin (a hormone), your body doesn't use insulin properly, or both. This is different from Type 1 diabetes, which happens when an autoimmune attack on your pancreas results in a total lack of insulin production.

In the UK over 4.4 million people live with diabetes, over 90% of people with diabetes have type 2 diabetes.

Symptoms and Causes

Symptoms of Type 2 diabetes tend to develop slowly over time. They can include:

- Increased thirst
- Urinating more frequently
- Increased appetite
- Fatigue
- Slow healing of cuts or sores
- Tingling or numbness in your hands or feet
- Blurred vision
- Unexplained weight loss

If you have these symptoms, it's important to see your healthcare provider. Simple blood tests can diagnose type 2 diabetes.

Type 2 Diabetes

by Dr Christian Asante-Baah MD, BSc (Hons)
Acute Medicine – Princess Alexandra Hospital

The main cause of Type 2 diabetes is insulin resistance. This happens when cells in your muscles, fat and liver don't respond as they should to insulin. Insulin is a hormone your pancreas makes that's essential for life and regulating blood sugar levels.

Several factors can contribute to insulin resistance, including:

- Genetics
- Excess body fat
- Physical inactivity
- Eating highly processed, high-carbohydrate foods and saturated fats frequently.
- Long-term steroid use.
- Stress



People of Asian (including Indian, Pakistani, Bangladeshi) Chinese, Black African and Black Caribbean ethnicities have been found to be two to four times more likely to have diabetes.

Type 2 Diabetes

by Dr Christian Asante-Baah MD, BSc (Hons)
Acute Medicine – Princess Alexandra Hospital

How is type 2 diabetes diagnosed and treated?

Your GP will arrange a blood test to check your blood sugar levels and if they are raised, the GP will explain the test results and what will happen next. If you're found to have blood sugar levels above the normal range, but not high enough to be diagnosed with diabetes, you may be offered a referral to your local NHS Diabetes Prevention Programme.

Usually, the following things happen after your diagnosis:

1. You'll usually need to make changes to your diet and be more active
2. The GP may prescribe medicine
3. You'll need to go for regular type 2 diabetes check-ups
4. You'll be given advice about certain signs to look out for, to avoid other health problems
5. You may be advised to join a free course to learn more about type 2 diabetes

Most people need medicine to control their type 2 diabetes. This helps keep your blood sugar level as normal as possible. You may have to take it for the rest of your life, although your medicine may need to change over time. There are many types of medicine for type 2 diabetes. It can take time to find a medicine and dose that's right for you. You'll usually be offered a medicine called Metformin first but you may need to take extra medicine or a different medicine if this isn't suitable for you.



Knocked out Teeth

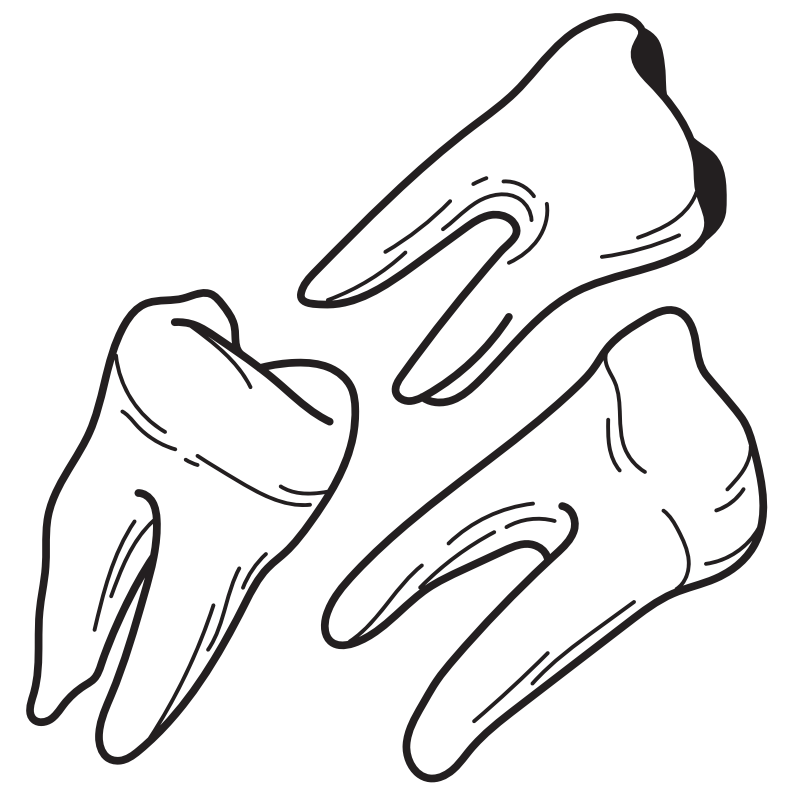
by Dr Nikita Thanki BDS
Associate Dentist - Ilford

If you or someone you know has the unlucky experience of a tooth being knocked out, it can be very stressful! But knowing the right steps can make a big difference in saving that tooth and restoring your smile. This guide will walk you through what to do immediately after an accident to give you the best chance of keeping that tooth in place and avoiding a permanent gap.

ASSESS:

Any head injury, loss of consciousness, uncontrolled bleeding, large swelling - means you need to go to A+E as soon as possible

Check if the tooth is an adult tooth or a baby tooth



ACT - IF IT IS AN ADULT TOOTH:

- Pick the tooth up by the crown (the white part - that would usually stick out of the gum) - avoid touching the root
- If the tooth is dirty then clean it in milk or the person's own saliva
- Whilst still holding the tooth by the white part, place the tooth back into its socket - look at the neighbouring teeth so see which way it goes and to match the height to place it at
- Bite down on gauze/a napkin/handkerchief to keep the tooth in place
- See a dentist immediately

If it is a baby tooth - do NOT put the tooth back in - you could damage the developing new tooth beneath it by doing this. If it is a baby tooth then assess if you need to go to A+E and if not then go see a dentist as soon as possible.

Adult teeth are GENERALLY larger and less white/more yellow than baby teeth, but if you are unsure if a tooth is a baby or adult tooth, or if you cannot replant it for any reason then store it in milk, saliva, saline (or in the worst case, water - AVOID leaving it dry) and go straight to see a dentist.

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Your Health



Written by Dr Nikita Thanki

Delirium

by Dr Adam Gadhvi, MBBS
Psychiatry Resident Doctor - East London

Delirium is a sudden and temporary condition that affects the brain, causing confusion and problems with awareness and focus.

There are three types:

- Hypoactive: This is the most common type. People may seem sleepy, have low-energy, and move less than usual.
- Hyperactive: People may seem irritated, restless, agitated, and even aggressive.
- Mixed: People may show a combination of both the hypoactive and hyperactive symptoms.

Features to look out for:

- Disorganised thinking
- Emotional changes
- Difficulties with speech
- Hallucinations, delusions or illusions
- Disrupted sleep pattern
- Unable to focus
- Disorientated
- Poor memory



If you notice any of these symptoms in someone you know, please either call 999 or attend A&E as soon as possible.

Risk factors for delirium:

- Older age (65+)
- Male
- Dementia
- Frailty
- Ongoing illnesses
- Kidney problems
- Recent surgery
- Previously experienced delirium

Delirium

by Dr Adam Gadhvi, MBBS
Psychiatry Resident Doctor - East London

Common causes for delirium to lookout for are (PINCHME):

Pain

Infection

Nutrition - poor diet

Constipation

Hydration - dehydration or over-hydration can impact the kidneys and electrolytes

Medication - new tablets can have such side effects

Environment - change in surroundings can be disorientating

Delirium is usually managed in hospital.

Treatment:

The underlying cause needs to be treated.

People experiencing delirium require plenty of reassurance, regularly informing them of where they are and what the time and date is. Seeing a familiar face frequently such as a family member or friend will be very comforting.



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Written by Dr Adam Gadhvi

We hope this has helped!
Tame 100 varus na sukhi thav - May you live
happily to 100 years!

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Tamari Tabiyat - Your Health