After 10 years of planning, the Jewish cultural centre has opened on north London’s Finchley Road. Amid the cultural events, cinema, classes and art, there are two hospital consulting rooms, where the Wellington hospital, the largest of the HCA group, has partnered with JW to provide fast access to consultants and doctors, via private appointments. “The idea” says Jaclyn Lott of HCA Healthcare is “to enable local people to access a health professional in a place they feel at home and at ease”. For instance a parent dropping off a child at the centre’s nursery can make an appointment to see a doctor straight afterwards, before going to work, without travelling to another location.

The private GP surgery sees patients of all ages, including babies. There will also be a series of clinics by physicians such as endocrinologists and rheumatologists. Doctors are on hand for consultations and general blood tests.

Patients requiring diagnostic tests such as an MRI will be referred to the Wellington’s centre in Golders Green or the Platinum Medical Centre in St John’s Wood. If an urgent admission is needed, patients have access to the 24-hour acute unit in the main Wellington hospital – but the patient does not have to choose an HCA hospital. The GPs and physicians are independent; they are not employed by JW.

A private dialysis unit has opened at the Royal Free Hospital, Hampstead. Dialysis replicates some of the functions of the kidneys. It is used to treat chronic kidney disease (kidney failure or end stage renal disease). Around 30 per cent of the UK population has some degree of kidney disease, but only a small percentage ever develop kidney failure.

Untreated, the condition can prove fatal, but treatment has improved vastly over the past 60 years. In 1957 John Hopewell set up urological services at the Royal Free. He believed that urology should work alongside a renal unit with facilities to treat end stage renal failure, so a dedicated cubicle was built in the Lawn Road branch of the hospital.

By 1958, patients were being dialysed and today, The Royal Free London NHS Foundation Trust has around 700 patients on haemodialysis. Advances in treatment have led to longer lifespans and a much better quality of life. The average lifespan is now 20 years, but some people have been on dialysis for more than 30 years.

A multi-million-pound imaging department has opened at Highgate Private Hospital. The diagnostic suite will give patients access to advanced equipment and specialist services, such as computed tomography (CT), magnetic resonance imaging (MRI), 3D or 4D ultrasound (giving a 3D image and also showing the movement of the baby – that’s the fourth dimension), digital fluoroscopy and digital x-ray services.

Mark Lyons, director at Highgate Private Hospital, says: “ Patients will now be able to have their outpatient consultation and then walk through to the new imaging suite where, in many cases, they may be able to be scanned on the same day. Radiology reports will be sent to the referring doctor within 48 hours. Our aim is to tailor our services to fit in with people’s lifestyles, for example offering same day/flexible appointment times, longer opening hours and operating an on-call service to support local sporting clubs.”

Debbie Lang, a radiographer specialising in MRI, heads the new department. Two new radiographers have also joined the imaging team.

As well as supplying local GPs, physiotherapists and osteopaths with a reliable imaging service, the diagnostic suite will offer new screening services to complement the hospital’s existing well woman and well man packages.

One of the country’s top neurosurgeons, Mary Murphy, has joined the hospital to head its neurosurgical service. Her appointment means Highgate Hospital can now carry out neurosurgery in-house. “We can now diagnose, treat and rehabilitate disorders that affect any part of the nervous system,” says Mark Lyons, director at the hospital. “Patients can benefit from Mary’s expertise in major areas of neurosurgery, as well as specialist knowledge in neurological tumours, brain vasculature and awake procedures.”

Not all healthcare involves hi-tech equipment, however, writes Billie Joseph. You may think that, with summer on the way out, your skin is safe from over-exposure to the sun. Not so. Anna Silsby, clinical director of skincare clinic Waterhouse Young, points out that, while most people take sun safety precautions in summer, many people don’t realise the need to do so year-round – even indoors. Winter sun may be less intense, but the amount of ultraviolet solar radiation that reaches earth remains strong, says Ms Silsby.

Factor 30 sun screen is recommended, whatever the weather.
**A pick-me-up for parents in pain**

I have the bicep of a brick layer. Just one. The other arm is a more barmitzvah-winged specimen — as you would expect of a 40-something, sedentary-ish mother of two.

Five years lugging around one, then two toddlers have taken their toll. Holding my now-three-year-old on my hip has brought on the hard, sore bicep and numbness down to the ring finger of my right hand, plus neck tension. I constantly stretch out my arm and neck as if I have a strange tic. Over the years I have tried various therapies for strains caused by computer use, pregnancy, breastfeeding and carrying children. And osteopathy is the treatment that keeps me going when pain stops play.

I have a handful of registered osteopaths on speed-dial. Among them are Laura Godfrey and Shital Patel, both mothers themselves. They have each also suffered injuries which they treated and now manage with osteopathy.

“I had two whiplash injuries and suffered for years with my neck — and when my children were little I also had sciatica. The pain was horrendous,” says Laura. She visits a fellow osteopath monthly to remain pain-free.

Shital suffered a crippling back problem. “Two pregnancies in a short space of time left me with a lumbar disc prolapse — one disc popped out to the side. Surgery was advised, but that would have left me unable to care for my toddlers for months, so I manage the condition with osteopathy, pilates and a few steroid injections,” she says.

Osteopathy is holistic. “In a first consultation, I try to find out what a patient might be doing to cause the problem. More than 80 per cent of my patients are women and many have problems around babies and children because of the feeding and carrying,” says Laura.

Shital, who estimates that 65 per cent of her practice are women, will also establish a patient’s general health, background, previous injuries and lifestyle before carrying out a postural checkup and finally examining them on her treatment bed. “Understanding a patient’s stress levels is just as important, if not more so, than the physical examination,” she says.

Sometimes just one session of massage and manipulation is all it takes, but often, if you are not able to simply stop the cause of the pain — breastfeeding or carrying small and not so small children — you may need other therapies and/or tools. Other ongoing advice may be to use cooling gels and arnica, do certain stretches or adjust posture. “I ask a patient to show me how they sit at their desk or when breastfeeding,” says Shital. “You can have the most expensive chair in the world, but if you don’t sit correctly it will do no good.”

Both practitioners refer a patient to specialists in other fields — Laura might refer patients to a personal trainer for strengthening of core muscles, an acupuncturist or a nutritionist, if that is what they need. Patel’s practice offers complementary therapies — Pilates and yoga, hypnotherapy for anxiety (which can be a big source of pain), acupuncture and reflexology.

Even the pelvic and groin pains suffered by some women during pregnancy can be eased. “They may almost be wheelchair bound, but 90 per cent of the time I can help them and I can treat them right until the day before they give birth,” says Laura. Shital has had similar success: “You cannot go into labour with back pain, so I advise women approaching their due date to have a maintenance session which can hopefully reduce the chances of their having a Caesarean,” she explains.

As mums and carers, we all soldier on, but without osteopathy I doubt I would have made it this far.

www.theosteopathyclinic.co.uk
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You are invited to come and meet Mary Beaumont from Bridgefast who is joining us at Sunrise of Elstree to offer advice on selling your property anywhere in the UK.

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Don’t forget to take a guided tour of our community during the afternoon when you will see, first-hand, what makes Sunrise so special.
Wise move for women

Spire Bushey Hospital is starting Women for Women, a gynaecology service led by Nitu Bajekal and Moneli Golara, consultant gynaecologists with more than 50 years of experience between them. They provide out-patient consultations and treatment, alongside holistic care, including specialist advice on nutrition and lifestyle. Screening and treatment is offered for conditions including fibroids, heavy periods, abnormal smears, teenage health, prolapse, vascular problems and the menopause.

The two consultants specialise in minimally invasive keyhole surgery and undertake most of their surgical treatments as day cases or overnight stays. What makes the team stand out is their collaboration on all major cases; patients benefit from a second senior consultant at no extra cost and the arrangement provides cover for leave and a second opinion when needed.

Being female and the mothers of daughters, Mrs Bajekal and Miss Golara fully understand the impact gynaecological conditions can have on physical and mental wellbeing. Both are also passionate about patient education.

Their advice is especially useful for women with fibroids. Fibroids are benign growths on the womb which do not always need major surgery, but at some hospitals women may be offered surgery as the only choice. The Women for Women team provides personalised advice to help each patient find the right treatment. One option is embolisation – a non-surgical procedure that shrinks fibroids by blocking their blood supply – this is offered at Spire Bushey by consultant radiologist Dr Kevin Lotzod.

Also new is an out-of-hours GP service, in partnership with private GP provider JDoc. Patients can now visit a GP at Spire Bushey on weekday evenings (7pm to 10pm), Saturday afternoons and Sunday mornings.

Patients can now also benefit from the hospital’s newly appointed concierge, Sandra Drinkwater, who will visit patients in their rooms on a day-to-day basis and be on hand to help with requests, queries or problems.

In another new partnership, the hospital is working with kosher restaurant The Kanteen to provide an extra menu with requests, queries or problems. Patients can now also benefit from the hospital’s newly appointed concierge, Sandra Drinkwater, who will visit patients in their rooms on a day-to-day basis and be on hand to help with requests, queries or problems. In another new partnership, the hospital is working with kosher restaurant The Kanteen to provide an extra menu with requests, queries or problems.

Your friend on the ward: Spire Bushey’s concierge, Sandra Drinkwater

Focus on palliative care

Tuesday will see the formal launch of SweetTree’s palliative care services. SweetTree has been providing care to people in their own homes since 2002, often looking after those who are frail and elderly at the end of their life and enabling them to realise their choice of dying at home. Recently it has developed a specialised service supporting those who are at the end of their life for a range of reasons, not always due to age, but to life-threatening illnesses at all ages.

The launch event is focused on the local community, because, says SweetTree, “we have always believed that we work in the community, therefore we are a part of that community”. The event will bring together experts in end-of-life care and a panel will give a presentation and answer questions, opening up the debate on care at the end stages of life. There will also be an opportunity to talk one-to-one to the experts, for private and personal questions. The panel will be formed of representatives from the North London Hospice and Chai Cancer Care. SweetTree will donate to each charity.

With free admission and lunch provided, the event will be at the Britannia Hotel, Hampstead this Tuesday, 1pm to 5pm. Booking is strongly advised, as space is limited. Sandy Seymour, head of end-of-life care from SweetTree, will also be on the panel. She says: “We are dedicated to making the evident very community-focused and ensuring that everyone realises we have to work together through the difficult times for each person and their family. There are amazing services locally for people and our service can complement that by providing anything from two to 24-hour support at home, helping with personal care and more complex care needs. Our service also focuses on ensuring we add life to days, by supporting people to have meaningful activities in those days.”

Event details: Sandy Seymour or Nicki Bones on 0207 624 9944

sandy.seymour@sweettree.co.uk or nicki.bones@sweettree.co.uk

Sandy Seymour

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**PROMOTION**

**Women in England may be missing out on a potentially life-saving assessment**

Fundraising for the Ovarian Cancer Action Research Centre, the only UK scientific centre dedicated to this disease.

**The Angelina Jolie test**

The medical research charity Ovarian Cancer Action is calling for urgent new genetic testing for ovarian cancer patients and their families. Carriers of BRCA1 and 2 genes have up to 80 per cent lifetime risk of breast cancer – and there is a higher-than-average prevalence of BRCA mutation in the Ashkenazi Jewish community (2.5 per cent compared to 0.2 per cent in the non-Jewish population).

Some women at high risk (like Angelina Jolie) opt for a double mastectomy. This can lower the chance of developing breast cancer to around five per cent over a lifetime. Studies in Canada and Australia indicate that around 20 per cent of women with high-grade serious ovarian cancer have the BRCA gene and they are now routinely tested, but there is no routine testing in England (there is in Scotland). Ovarian Cancer Action recommends:

- All women with invasive non-mucinous ovarian cancer to be BRCA-tested
- All of these women should be BRCA-tested at point of diagnosis
- Clearer pathways to information from GPs and clinicians about family implications of BRCA

Gilda Witte, the charity’s chief executive, says: “Taking a genetic test to reveal the statistical chances of getting a disease is a frightening dilemma, but in the case of women who are diagnosed with ovarian cancer, we are failing to take advantage of one of the most important scientific discoveries that could help them to survive.”

If you would like to discuss genetic testing, contact your GP who can provide information on local genetics services and refer you to a specialist genetic clinic if appropriate. A directory of UK genetics centres is available on the website of the British Alliance of Genetic Medicine: www.bahsg.org.uk.

Testing can also be obtained privately. In June, Spire Bushey Hospital, in Hertfordshire, began to offer such testing in conjunction with Breast Health UK. The clinic is backed by leading private breast consultants, based at the Elstree Cancer Centre. Women have a one-hour session with a genetic counsellor, a saliva test and another hour of counselling with the results.

The hospital has seen a steady rise in the number of women seeking genetic counselling and gene testing.

In addition to the comprehensive BRCA 1&2 gene test, with results in six to eight weeks, Spire Bushey provides a special test for Ashkenazi women. This looks for three common mutations, found in specific locations in the BRCA genes. This is a faster test, with results usually available in two weeks.

For the counselling, Spire Bushey has teamed up with Breast Health UK’s eminent genetic counsellor Vicki Lyus, who says: “The opening of the genetic counselling and testing clinic at Elstree Cancer Centre is a really positive move at exactly the right time. The understanding of genetic testing is increasing rapidly among scientists, clinicians and the population in general, but very few clinics offer both the face-to-face counselling and state-of-the-art gene testing.” For women with an increased risk of breast cancer, Spire Bushey can offer a range of options, including surgical intervention with immediate breast reconstruction.

The private Ashkenazi Jewish mutation test costs £920, including two hours’ counselling, with results in two to three weeks. Single site mutation test (predictive testing) is £1200, including two hours’ counselling; results in two to three weeks. Genetic counselling costs £105 for the initial consultation if the client decides to proceed with the test. For further information on ovarian cancer, see www.ovarian.org.uk, or call 0207 380 1730

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**School helps kids cope with cancer**

When lessons are a welcome break from illness in the family, Chai can help

VeryChild wants to fit in and feel normal. When cancer affects a family, that normality can change. Home life is disrupted; regular activities are put on hold; children may witness the effects of treatment. When their lives can seem out of control, the firm boundaries, familiarity and camaraderie of school life can help children retain a sense of safety and normality. But because of what is going on at home, they may display disruptive behaviour, become withdrawn or act up in some other way at school.

“Chai in Schools” is an initiative designed to give teaching staff the strategies to support children going through this difficult time and explore ways of providing a secure, compassionate environment for the child.

Chai tailors its support to the type of request received. It may come from the school or from the family, at any point in the family’s cancer experience. Chai will act as a central point of contact between the school and the family co-ordinating the support needs of the child. Chai also offers teachers access to a counsellor as it can be a difficult time for them emotionally, too.

Steven Issacs, head teacher of Hertsmere Jewish Primary School, says: “I have worked in education for 17 years, yet having to manage a situation with a critically ill parent and be a support for the parent body, staff and children was the hardest situation I have ever had to deal with. Having Chai at the end of the line was a great relief, as a sounding board for questions or even just thoughts about basis process and crisis management. The service complements Chai’s 360-degree support for those affected by cancer. Martin Taubman, pastoral care co-ordinator for Hasmonean High School says his students have benefited greatly from Chai in Schools: “As long as this type of counselling is needed, it is good to know Chai is there.”
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Professor Goldstone is a pioneer in the field of treating blood disorders — but what is his absolute passion?

The importance of just ‘being nice’

Forty years ago I was recommended to go into haematology because it took the newest science to the bedside quickest. Happily it remains true 40 years on.

Professor Goldstone says that there has also been a change in the technology of a transplant itself. “We are now in the era of what is called either the mini transplant or the reduced intensity transplant.”

Professor Goldstone was one of the driving forces behind not only the current recently built hospital but also the new Macmillan Cancer Centre, nearby.

With UCH’s reputation as a world-class centre of excellence for the treatment of cancer, including blood cancers, it was natural that when plans were made for a major private patient unit, it had to be built to the highest standards.

Purpose-designed for haematology and transplant, it also has high-quality staff and is supported by access to a world-ranking intensive care unit and access to the best stem cell laboratories.

“I can get a sequence of things done on a patient in under a week, which in the best NHS circumstances, would take three weeks to roll out. So there’s an advantage to the style, speed and efficiency of treatment which you don’t get in the NHS,” he says.

“Strangely enough there has been an ethos, permeated in the NHS for a long time, that if you have got anything really seriously wrong with you, don’t go into the private sector — ‘they’ve not got the right cover at night and at weekends!’ So people are almost deliberately referred away from the private sector. It’s not true — and the standards of care are equally as good if not better in our private units.

“Personally, I am obsessed with speed and service. You cannot under-value defusing anxiety for patients, not keeping people waiting — or just being nice to people. It’s so important to put yourself in the patient’s perspective.

“Forty years ago I was recommended to go into haematology because it took the newest science to the bedside quickest. Happily it remains true 40 years on.

So what, after all these years, does Tony Goldstone feel most proud of? “The fact that it is possible to do high level NHS practice, academic practice and private practice all alongside each other. All it requires is no sleep!”

ordered a man who has recently been honoured by his peers with a prestigious lifetime achievement award, you would think it was time to take things a little easier at the age of 68.

But not so for Tony Goldstone, for weekday mornings at about 6.30am, he walks through the doors of University College Hospital in London and makes his way to his office on the 15th floor to start another day’s work. Professor Goldstone is medical director of the HCA International NHS Ventures Division and head of “Harley Street at UCH” — the joint private patient venture between HCA and UCH, based on the 15th floor of UCH.

After a distinguished 44-year career in the NHS, Professor Goldstone, one of the world’s leading experts in the treatment of blood disorders including leukaemias, lymphomas and myelomas, is still working a 12-hour day. He is also chairman of the Royal National Orthopaedic NHS Trust in Stanmore.

The professor, who has been married to Jennifer for more than 40 years, lives in north London and is a member and co-founder of the Radlett United Synagogue.”

He pioneered bone marrow transplantation at UCH in the 1980s and became known internationally for his innovation in the treatment of blood cancers. Over the years, treatment of blood disorders became more sophisticated but, as he explains, it is really over the past 10 to 15 years that major advances have been made.

“It used to be that very few people over the age of 50 could tolerate the morbidity and mortality risks of a stem cell transplant. They could use their own stem cells, but any kind of donor graft they couldn’t. This was a kind of mismatch to the demographics of the disease. Many of these leukaemias, lymphomas and myelomas are diseases found in particular over the age of 60. But now, using autologous stem cells, we treat people easily to the age of 70.

“Secondly, in terms of new drugs, both cytotoxic drugs and biological targeted drugs, there probably have been and still are more of them emerging in malignant haematology than almost anywhere else. The approach to leukaemias and lymphomas is now beginning to focus on a multiple gene abnormality in a particular patient, so it is one of the real areas for the initiation of personalised medicine.

Not only can you help people time and time again, but the use of the new drugs can take people into the area of eligibility for transplant.”

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If tummy trouble rules your life, Anthea Gerrie has a suggestion

HUMAN digestive machinery has its very own nervous system and research has shown strong links between conditions like irritable bowel syndrome, stress and depression.

Tears affects our ability to digest as surely as digestive problems affect our mood — and Jews, with a special relationship with food and family and a long history of hasty, indigestion-provoking flight from persecution, seem to feel this link instinctively. Our predisposition to heartburn and ulcers is actually a useful early-warning system to take better care of ourselves.

So there’s a particular reason to head for Grayshott Spa in Surrey, celebrating its half-century with its most serious health spa programme to date. The Grayshott Health Regime is a week-long mission to thoroughly educate clients about why gut health is everything and to encourage better eating habits.

This is no frivolous pick-and-mix health spa programme, but an odyssey to better digestion, which sees participants take most meals in their own private dining room. Here it’s clear from the outset that the therapists mean business, with probiotics on the table and a little dish of sauerkraut, which aids digestion, at every place setting.

If you have experienced the joys of really good digestion and learned to identify the foods which aggravate your system, you are unlikely to go back to bad habits.

Of various consultations, those with the nutritionist are helpful to thoroughly educate clients about how to take proper care of their digestive system.

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TOUCH is an important medicine that is overlooked, but an integral part of the therapies provided by The Disability Foundation. This is a charity based at the Royal National Orthopaedic Hospital in Stanmore, offering affordable complementary therapy, primarily to the disabled, their carers (paid and unpaid), NHS staff and those suffering and recovering from serious illness.

TDF’s complementary therapies are designed to work alongside medical treatment, bridging the gap between NHS and expensive private healthcare. The foundation works closely with medical professionals to make sure that there are no contra-indications for the treatments. It also provides an affordable chiropody service, with appointments whenever required, without waiting for a GP referral.

Complementary therapies on offer are remedial massage, soft tissue massage, aromatherapy massage, acupuncture, osteopathy, reiki, cranio-sacral therapy, Thai yoga massage, reflexology, counselling, hypnotherapy and chiropody. All are designed to relieve stress and tension. After treatment, many clients feel less pain and are able to control their disability, rather than the disability controlling them. Not all disabilities are visible — the foundation’s therapists can help with colitis, type one diabetes and depression, for instance.

Complementary therapies have also been successful in lessening some of the side effects of cancer treatments, giving patients a feeling of wellbeing and a general boost.

The Disability Foundation was established in 1998 and began with one therapist and one client. It has now grown to 26 therapists, working with more than 900 clients. Last year, it delivered more than 6,600 complementary therapies to disabled people and their carers — 81 per cent reported improved health, respite and relief from pain.

Its fully qualified and DBS certified therapists deal with all ranges of disability and health issues, including children’s health issues.

For more information or an appointment, call 020 8954 7373 or email info@tdf.org.uk. There is also a new website: www.tdf.org.uk.

The Disability Foundation is open from Monday to Friday, 9.45am to 5.15pm and the first Saturday of the month from 10am to 1pm and is hoping to start evening sessions in the near future.

Will today be a good day? We can help

Enjoying a relaxing reflexology session at The Disability Foundation

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*In National Mastectomy and Breast Reconstruction Audit 2011

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What is your view of mental health? By Dr Nikki Teper

T WAS nearly 50 years ago that Bob Dylan first brought the concept of change to our attention, inspiring the world to embrace new developments. More than a generation later, the tide of mental health is turning too — politically and socially — and I wonder if we are ready as a society to adjust our views of mental health.

"Mental illness" is a term that is thrown around, with the implication that one can contract a disease of being mentally unwell. While there is a great deal of research into mental health difficulties (eg depression, anxiety) most of us would acknowledge that we cannot test for depression in the same way that we might for diabetes, for example. Nor have we yet detected one definitive brain function or area that is always affected, says they feel depressed may have true characteristics, who receive the same diagnosis. And not everyone with depression, for example, reports feeling or functioning the same way. A person who says they feel depressed may have true feelings of deep sadness, but this can be very different from another person who cannot get out of bed in the morning because they are so low.

From time to time, we might all experience mental health difficulty — depression, anxiety, bereavement, eating disorder, obsessive compulsive disorder… For some, this may be fleeting, at a particularly dark time in our lives. For others, it may be more severe. But given how common it is for people to feel depressed or worried, why do so many still feel that there is a stigma attached to seeing a psychologist and why do so few seek help?

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OME shoes are made for walking — and others just cause problems. Fashion-conscious women are prone to foot ailments and may find that regularly wearing flat shoes (such as the trendy ballerina shoes) or badly fitting shoes just because they look nice, can cause corns, callouses, blisters and even ingrowing toenails.

These conditions are painful and can ruin the quality of your daily life. A quick scan at the shelves in a pharmacy brings up all sorts of treatments, but do they work?

Musculoskeletal podiatrist Kevin Bruce, from First Podiatry, says “they do, but sometimes they fall short. For instance, corn plasters will deal with the condition superficially. The only way to ensure it has been treated totally is to seek a professional.” He then cautions: “Diabetics should avoid corn plasters. Their feet are more vulnerable to infections and, as these off-the-shelf plasters are medicated, they could cause an ulcer.”

Kevin adds that anyone with an immune suppressed condition such as diabetes or rheumatoid arthritis should check their feet regularly, because they may not realise there is a problem until it is too late. “Something as simple as a blister could end up—in the worst-case scenario—as the loss of a leg.”

People who spend their days on their feet could overwork a tendon or muscles, or if they wear high heels all day they may suffer from chronically tight calf muscles. Over-use of muscles is common in hypermobile children, whose joints are more flexible than the norm and allow more movement than most. Muscles then have to work extra hard to produce spring and to stabilise the foot, leaving them with fatigue and pain. This is easily prevented or remedied by wearing a supportive shoe with an insole. This is tailor-made by the podiatrist, who first creates a plaster-of-Paris mould of the foot.

A bespoke sole is produced and wearing it will positively impact on a problem such as heel or ankle pain, forefoot (the ball), tendons and muscle pains.

So should we go for a completely flat shoe? Not at all, says Kevin: “it’s never ever good to wear a completely flat shoe. Not at all, says Kevin: “it’s never ever good to wear a completely flat shoe.” He recommends a brand called Hotter for women and Rockport for men. “Keep high heels to a minimum, too, if you can.”

Badly fitting shoes are also to blame for thickened nails. If you have had repetitive trauma — little bangs on the toes as they hit the end of a shoe — this affects nail growth, leading the nails to thicken. It’s not serious, but aesthetically it is not at all pleasing. The podiatrist can file the nails to the thickness they should be.

Most people will have suffered from the fungal infection of athlete’s foot. Again, this is not a serious condition, but it is unsightly and often very uncomfortable. It’s caused by moisture in a warm environment, generated by tight shoes or thick socks and trainers.

To minimise athlete’s foot, “always dry your feet thoroughly after a shower or bath,” says Kevin “and get into the habit of using talc. Wearing shoes with leather uppers — especially lace-ups — can help, as they breathe.”

Moisturise your feet on a daily basis to avoid hard skin, but “avoid the skin between the toes. That area does not need any more moisture.”

So, healthy feet are largely down to what you wear. If you can swap your Jimmy Choos for comfortable shoes when you need to be on your feet for long periods, you will be putting your best foot forward.

www.firstpodiatry.co.uk
Live-in care, or support at home — whichever you choose, you don’t have to compromise on your independence, says Billie Josephs

With friends and outings, life is rosy

Sunrise Senior Living in Elstree — one of 27 Sunrise centres in the UK — has achieved the Care Quality Commission’s Compliant Certification, the highest award from the care sector’s official regulator. Compliant status means that its services are acknowledged as meeting essential standards of quality and safety that respect the dignity of seniors and protect their rights.

The centre specialises in assisted living and dementia care, guided by six main principles — encouraging independence, enabling choice, preserving dignity, celebrating individuality, nurturing the spirit of clients and involving family and friends in the day-to-day life of the centre.

Sunrise of Elstree is in a rural area, but close to restaurants and shops which residents can visit and enjoy. The community also hosts at least five activities per day, from a bridge club to dancing, always a hit with residents,” says spokesperson Nick Albrow.

With a large proportion of Jewish residents, the community holds a Shabbat service every Friday and observes Jewish holidays.

Residents have a choice in all aspects of their lives. They are offered a selection of optional activities and can decide how their rooms are furnished. There is an array of room types and sizes, some suitable for couples and all with private facilities. There are also suites designed for a variety of special needs. These include Reminiscence, an assisted living community for clients suffering from Alzheimer’s and dementia.

Residents are encouraged to bring in their own furniture for use in their rooms and each room has a memory box outside, containing treasured items the residents have chosen and which they feel best represent them.

In a recent event, potential residents were given a complimentary day-long experience of life at Sunrise of Elstree. It began with coffee, followed by optional keep-fit. After lunch, prepared in restaurant style by the centre’s chefs, there was the opportunity to join in with popular activities or simply enjoy the company and soak up the atmosphere until an afternoon musical quiz, hosted by pianist Alan Poulton.

Sunrise has an in-house salon for pampering, grooming, hair styling and chiropody. There is also a busy complimentary bistro area for residents & their visitors. Pets are also welcome.

Forest Healthcare’s Village in Borehamwood is one of the largest independent care centres in the UK. It is designed to meet the wide variety of specialist needs of clients requiring long-term care and rehabilitation — and it is a very welcoming place to live. The 178 bedrooms all have ensuite facilities and are large enough to accommodate specialist lifting, monitoring or feeding equipment.

Physio and occupational therapies are key features of the Forest Care strategy for rehabilitation. There is a purpose-built physiotherapy suite, a gym, a music and sensory suite and sensory and courtyard gardens. Staff encourage clients to bring some of their own furniture and other treasured possessions, Pets, too, are welcome.

The Village is not just for senior citizens. It provides specialist care for anyone aged 18 to 100-plus. There are some double rooms, so couples can stay together. For Jewish clients, several of the homes provide kosher-style or meat-free food and Friday night services. Forest Healthcare has other centres in Jewish areas, including Belmont Lodge in Chigwell and the Cedars Care Centre in New Barnet.

If you prefer to be looked after in your own home, Penrose Care, in Hampstead, provides specialist services to elderly and non-elderly people with physical and/or learning disabilities, as well as specialist home care for dementia care and post orthopedic surgery re-employment. If a client keeps kosher, this can be maintained.

Penrose Care has been shortlisted as a finalist for the London regional event of the Great British Care Awards under the category of “The Care Employer Award.” The winners will be announced on November 2.

Personalised, “boutique” is the very essence of Care à la Carte, whose owner Penny Koormkinder-Stone visits each client at least once a year in their own home — more often if their needs change. Carers are carefully matched to clients and share their interests — for instance attending synagogue with the client and following the service in a transliterated siddur. Many carers enjoy attending Singing for the Brain sessions with their clients.

Knit one, run one, for Alzheimer’s

THEREWISE KNOWN as “the extreme knitting redhead”, Susie Hewer, 56, from East Sussex, has been raising money and awareness for Alzheimer’s Research UK since 2005. She has run 31 marathons for the UK’s leading dementia research charity, raised over £25,000 and beaten her own Guinness World Record for knitting the longest scarf while running a marathon.

Susie’s mum Peggy died with vascular dementia eight years ago. “My dear mum is my inspiration for running,” she says. “When Mum was 60 she had a series of mini strokes. She’d been living with us for some time, so my husband and I didn’t notice the gradual changes in her behaviour. But when she started seeing imaginary people, wandering out of the house and getting violent mood swings, we knew something serious was wrong.

“It was a terrible shock when I realised Mum didn’t recognise me as her daughter any more. My sweet-natured Mum turned into an angry and confused person, incontinent and unable to do anything for herself. I broke my heart when she had to go into care for the last months of her life. She died the day after her 89th birthday.

“Hundreds of thousands of people across the UK are living with dementia today, yet funding for research lags far behind other serious diseases. Alzheimer’s Research UK relies on public donations to fund its research and I will keep on running until prevention and new treatments are found.”

A fun way to raise funds is to host a Battle of the Brains quiz night. Every £20 raised will pay for one hour of pioneering research.

To find out more, or take on a fundraising challenge, call Alzheimer’s Research UK on 0300 123 3335 or visit www.alzheimersresearchuk.org and for a quiz pack, email battleofthebrains@alzheimersresearchuk.org

Event details:
• Live-in/Care from 4 hours - 24 hours
• Convalescent and Personal Health Care
• Compassionate and Affordable Service
• Professional, Qualified, Kind Care Staff
• Registered with the CQC and UKHCA

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