

Blog: 26/9/2022, the day of Queen Elizabeth 11's memoriam .

It is lovely to be seeing patients face to face again. Well, 'kanohi ki kanohi' the Maori expression is more accurate as one often only sees the eyes much of the time over the mask! I am enjoying catching up with many I have only talked over the phone with for 2.5 years. There is a lot of catching up to do , even just those basics like recording blood pressures and weights, getting basic bloods for things like prostate checks and making sure immunisations, breast screening etc are up to date. We recently ran a whole day of free cervical screening just to catch up on that, and are open to running more. Paulette our nurse will be contacting people below 30 who have no evidence of having a third measles shot too this week.

On the subject of immunisations I am now encouraging our over 65's to have the shingles vaccinations. We have finally got Shinglevax this past month which is sooooo more effective than the old live attenuated one. The old one was 66% effective in the first year and by 4 years fell away to 4%. And the government only funds one for 65-80 year olds. This new one is a recombinant vaccine and over 96% effective. Even by 8 years down the track [the longest time we have large figures for] its 88%. It is a two phase vax: one now and one 2-6 months later but both are fully funded unless the Health Department has already funded one for you, an obvious inequity given its vastly increased effectiveness. Shingles is a painful miserable illness. It really does seem to be the reactivation of leftover and changed chicken pox virus particles left in the body usually from childhood illness. Normally the immune system keeps them locked down but stress, other illnesses and increasing frailty means they can break out, travelling down one of the nerves usually those coming out in pairs down the spine and comes out not only on the skin but affecting the muscles and organs run by that nerve. Intense burning along an band running from ½ way around the back to ½ way around the trunk or in an area of one arm or leg is the first sign and the ideal time to start valacyclovir, a 3x daily antiviral pill tailored to block this virus. If left to develop over the next few days clusters of watery red painful blisters develop and stay there typically a week, and can damage the affected nerve causing ongoing intense pain that can last many months if not years. I have seen patients onto their third episode of shingles, so having already had it doesn't stop you getting it again. But the vaccination will. I have seen shingles in recent surgical scars, especially caesareans, even a cholecystectomy scar. I am having mine this week. Just arrange it directly with nurses. If you don't qualify for a free one it will cost \$300 and needs a letter of complaint about the unfairness to the Minister of Health, the Hon Andrew Little [it can be emailed].

Some interesting reflections on the pandemic are starting to come through: I was always taught even in my day the best diagnostic tool in medicine is the retrospectroscope. I am still astonished at how well we were served by our scientists, the ESR genome trackers and the university based viral scientists. In a widely lauded article in The Atlantic in the States back in September 30 2021 that won him Pulitzer and other awards, the science journalist Zeynek Tufekci quoted our NZ scientist's

analysis of 50% of cases that had come over our border in the first six months, all 277 individual cases, and found only 19% of these separate introductions led to more than 1 other case. This was one of the first solid pieces of evidence of what we know now, that the spread of covid-19 is in clusters from what we now call a super-spreader event. And super-spreader events are indoors, poorly ventilated and have a lot of people talking loudly or singing and a low mask use. For instance remember the Daegu, South Korea super-spreader event where a woman went to a mega church and was thought to be ultimately responsible for over 5000 cases? Unlike influenza, covid-19 is what viral scientists call an overdisperser. It disperses fast in clusters, something like countries like Singapore, Japan, Korea and us caught onto quickly and good contact tracing not just forwards but backwards to the index case meant we could contain it. Unfortunately we do have to remember that Korean woman, the poor patient 31, to remind us a new variant could ramp up fast again. And we still not understand why some people are so infectious and others not.

As we return to a new normal please do wear face masks indoors especially if the ventilation there is poor or there are big crowds. Also around vulnerable people like when visiting rest homes or sitting in doctors waiting rooms. Outside there is always the NZ wind to blow the virus away.

Last week despite answering no to the simple questions from our receptionists and despite having the classic triad of sore throat fevers and cough, a family of three came into our surgery who were positive for covid-19. They were irresponsible and totally selfish, and sat near to vulnerable patients. The child did not have a mask. They are being spoken to firmly by me and if they choose to find another practice to look after them. If they can't be honest we will not be at all unhappy to see them go. If you do have upper respiratory symptoms, we can still see you, preferably after a RAT test in the carpark and even if positive we will see you down in the back surgery coming in and out by a separate entrance that does not take you through the waiting room. It is still a legal requirement to wear a proper mask, up over the nose, in a medical facility. If you don't have a mask, our staff will give you one: they are there on the desk at the door for those who want one.

Thank you all for allowing me a two week break. I finally had run out of steam. Weather was wonderfully lousy though warm, I slept when I wanted to, ate when I wanted to, and read 18 books, and did little else. A nice old dog called Buster kept me company – he had great manners- who ate most of the meat I purchased to cook [well he had lovely big brown eyes and there was definitely some labrador in his whakapapa] as I rarely went out. I would have bought him home if I could have and upset both of my stropky cats, the burmese and the tonkinese.

Dr Lance O'Sullivan who made this possible for me, and who some of you met, will be in and out of the practice working various days to give Dr Dominic breaks too, much deserved as he worked cheerfully alongside me throughout this tough time- even recently hobbling around in his moonboot with a broken lower leg- from when Dr Mick first got sick and Dr Latu left.

At least its spring, and maybe it won't rain as often now.

We are assembling quotes finally to fix that carpark lake after Christmas, Ma te wa, Drs Jacqueline, Dominic, Andrew, Ranche and Lance, nurses Paulette and Rachael, receptionists Ana and Jamie, and our redoubtable practice manager Meriana who holds us all together.