Easter and I finally get time to write this. I got a fortnight's break February-March thanks to the kindness of Dr Lance O'Sullivan who stepped in for me as there are no locums. Hopefully that will help build some resilience reserves again, and as expected it was fullon coming back.

The New Zealand Pain Conference over three days from Friday 21st March was interesting. It's a rare medical conference in the attendance of all the allied professions, physio, occupational therapy, health psychologists [yes, our local group Crossroads were in full attendance], specialist nurses as well as the doctors from the Chronic Pain groups in all the hospitals. This conference was light on new medical information about the brain, but there were some great presentations from Otago's Dr Hemakumar Devan [physio originally], Sydney's Dr Claire Ashton-James [Health psychologist] and our very own Papakura born Assoc Prof at AUT Gwyn Lewis [Physio] who is working with the North Shore Chronic Pain clinic. All were about trying to make Pain Clinics more accessible and relevant to different cultures. One presentation from North Sydney by Dr Bernadette Brady [Physio] was from a very thoughtful OT who worked with their Pain Service trying to reach out to the refugees settled in their Liverpool Hospital catchment area and trying to understand over 200 cultures! Dr Devan has been working with Kokiri Marae in Lower Hutt and with their lovely and highly competent CEO Cheryl Davies [Raukawa, Wehiwehi, Mutunga] presented on their successful attempt to set up a Marae based Pain Clinic. It would be wonderful if Papakura Marae could do the same.

There have been changes of staff. We have sadly lost Ana to Australia and are hunting for a new receptionist. Jane who is a very experienced nurse has joined us, and so now with Rachael and Paulette there are two nurses on every day. Dr Daniel Lowe has settled in well bringing a very good up-to-date training in hospital medicine, but has adapted very fast to general practice: having a dad and an aunt as Auckland GPs obviously has helped. Dr Dominic Smith promises not to break his leg this soccer season. I think I need an emoji for 'fingers crossed' to insert in here.

Monday, Tuesday and Friday have three doctors working the whole day. Wednesday and Thursday have two fulltime doctors. We are working hard but finding patients want longer times that the 15 minutes allocated. Sometimes especially when something serious crops up unexpectedly it is difficult to allow for, but if the consultation does go over the 15 minutes we will have to charge for it as it is getting way out of hand with patients often presenting two or three major issues and expecting them to be dealt with within 15 minutes. That risks a superficial assessment and missing important symptoms and signs. It limits time for explanations and questions. It is not the good medicine we strive to do for our patients. Please book a double appointment if needed: the alternative is being asked to come back another time is not as convenient, but better for the patient waiting in the waiting room if you end up intruding on their appointment time and making them wait or late for another engagement. If we all stick to times it is better for us all. I realise some consultations unexpectedly take more time. For instance consultations trying to arrange admissions with busy hospital doctors for instance, especially when it's not clear which speciality and which hospital is the right place to go – it often takes as many as 3 or 4 phone calls. Consults for

depression are always hard for the patient to arrange and then to talk about. But we have to do better than we have been so please expect stricter timekeeping from me especially. I would like a break at lunchtime. Lately I seem to work nearly right through so that lab results and other paperwork gets done in my evenings and weekends.

We are having to consider joining all the other surgeries in charging for nurses time. Wages have gone up and so have all our costs and we are trying to avoid increasing fees further when we know it is hard out there for many patients. I know it is usual in most other surgeries who often charge for health assistants time too. I would like to get feedback from patients about this, so please write or email admin@tiakinateora.co.nz or talk to any one of us if you have views on this. The question is whether it would be fairer to spread the costs over other services [?which services] rather than just load them against consultations with doctors and repeat prescriptions.

Influenza vaccinations are here: free for those with chronic illnesses, Maori and Pasifika over 55 yrs and everyone over 65yrs. The new covid vax is at the pharmacists but we havent got ours yet due to all the rigmarole surrounding it still. It is 50% the old vax [in case of new different variants arriving over the border] and 50% Omicron variant. It is safe to have them both at once- but different arms. Influenza is already out there. I have put two different patients with pneumonia caused by current Influenza in hospital already. It is covered in the latest fluvax, along with three other variants current in Australia and round the world. The best protection from influenza is to build up a 'library' of influenza memories in the immune system, and annual fluvax is the way to do it. In 2009 the swine flu in NZ did not affect people over 55 yrs probably because they had already had a similar H1N1 influenza previously. There is a H1 N1 Influenza A variant 'Victoria' in this years fluvax, also with a H2N1 ['Darwin'] and two Type Bs, 'Phuket' and 'Austria'. It is good to remember it was not a coronavirus pandemic we were expecting over this last 6-8 years but an influenza one, and this could still happen. Good worldwide surveillance, prompt vaccine development and good uptake of vaccination is the only reason it has not, yet.

To finish. "I'm good at losing my phone, my keys, at times I worry about losing my mind. So why can't I lose weight so easily?" [from Noom, the weight loss app]
Be well, be safe from Jacqueline and all the staff at Tiakina