

Health &
Well-being

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Dr Gill's Blog



The sick man of Europe – are we?

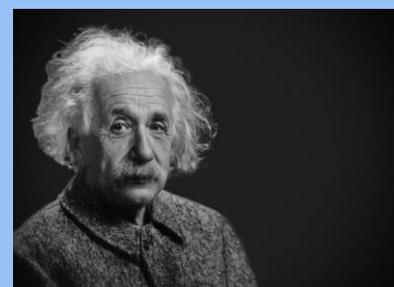
This phrase was originally used in the mid-19th Century to describe the Ottoman Empire and was political not health related. This September it has been used to describe the health of the UK. Sir Michael Marmot, Director of the Institute of Health Equity at UCL sees emerging evidence that, after steadily increasing life expectancy for many years, it has now stalled.

If you look at actual life expectancy across Europe, the range is 72-80 for men and 79-86 for women. The UK is equal second at 79 for men with France and Denmark and equal third at 83 with Denmark, Ireland and the Netherlands for women- which is not actually too bad. The issue being raised is the rate of improvement which begs a number of questions:

1. Can we continue to increase life expectancy indefinitely or does it reach a point where we cannot really live longer, which research seems to suggest may be 110-115.
2. Are we stalling in the UK for economic reasons as Sir Michael would suggest.
3. Are we stalling for problems associated with wealth.

Before continuing, let me say that the part that really worries me is the wealth gap – generally rich people live longer. By comparison with world populations, the UK is a wealthy place so this must be taken in context.

A study done by the Albert Einstein College of Medicine in New York showed that survival (average) steadily increased as we overcame issues with child mortality in the 1900s but that we are now at a point of diminishing gains and that the average lifespan probably cannot exceed 100 with the maximum individual span being 115.



One recorded French Woman lived to 122 but this is an outlier and not a realistic maximum. We are also faced with deteriorating health and deteriorating cognitive health with age so the challenge may perhaps not be how many years we can live but how many healthy years.

With 50% of 50 year olds having two or more chronic health conditions and rapidly rising obesity, diabetes, cancer and heart disease, I believe the more interesting challenge is what we do about how we live, not how long.

The fact that an economic divide does align to different life expectancies suggests there may be some truth that the less well-off live fewer years but I do question why. Is it about education and support for a healthier lifestyle and about mental health and the impact that has on behaviour rather than actual wealth? Should we be addressing this through education and control of the food, tobacco and alcohol industries? I think so.



My final question: are we stalling because of wealth? Was a little tongue in cheek but we are a nation that can afford to be fat, can afford alcohol and cigarettes and labour saving devices. We have cars and transport. People are inactive.

I don't think this is a simple issue.

Looking after your Lifestyle

It only takes one (flu) shot

As we're fast approaching those colder months, our minds will be focusing on coats, gloves, scarves, crisp mornings, open fires, warm drinks... and lots of people coughing and sneezing in close proximity.

If you're wondering how you can protect yourself from those seasonal nasties, read on!

Influenza, or more commonly known as the 'flu', is much more serious than a case of the sniffles or a cold. It can be very dangerous, causing serious complications such as pneumonia, septic shock, meningitis and even death.

In the UK, flu leads to hundreds of thousands of GP visits, tens of thousands of hospital stays a year, and on average 600



Recent studies have shown that the flu vaccine can reduce the risk of flu by up to 60%. Having the vaccination won't 100% stop you from getting the flu as it can't protect against every possible type of flu virus, but it will stop you from getting the main viruses. Flu vaccinations for those with diabetes reduce hospital admissions by up to 80% and up to 52% for those with chronic lung disease.

people die from complications (although this fluctuates and can rise significantly some years).

It's important to protect yourself against flu as- not only is this keeping you fit and healthy, it's preventing you from transmitting flu to those more vulnerable; such as children, the elderly, pregnant women and those with weakened immune systems.



You should have the flu vaccination every year as the viruses that cause flu will change each year. The best time to have the flu vaccine is in the autumn as it takes up to two weeks to build up immunity after receiving the vaccine.

The vaccination helps protect women against flu during and after pregnancy. It can also protect a baby after birth as the antibodies are passed on during pregnancy. Other ways to help prevent catching and spreading flu:

- Wash your hands regularly using hot water and soap
- Use a tissue to cover your mouth/nose when sneezing or coughing
- Dispose of tissues in a bin as soon as you have used them
- Keep surfaces, keyboard, phone, doorhandles etc clean with antibacterial wipes as the virus can live for around 24 hours on surfaces

If you are unlucky enough to catch the flu, make sure you get enough rest, take in lots of fluids, eat lots of protein to keep your strength up, take paracetamol to reduce fever and vitamin B and C.

For more information on how we can support your flu programme, please contact the [Client Relations Team](#)

Doctors Corner

Dear Doctor,

I have just returned from a great holiday but getting back to work is a struggle. Are holidays really any good for us?

Many of us can sympathise with this. Sometimes that post-holiday buzz seems to leave us refreshed, energised and raring to go but even if when it does it often doesn't seem to take very long before the glow dissipates and we can be left feeling tired and low.

These benefits seem to happen despite that 'race to the line' we sometimes encounter trying to complete work, tying up loose ends and handing over before we go. It is quite a common experience for people to be working much longer hours in the days before a vacation trying to

'clear the decks' but nonetheless the knowledge that we are soon to be on holiday generally bolsters us through in positive mood.



Once we get away there appears to be a mix of pros and cons from a health perspective. There are inevitable health issues with travel and not surprisingly these tend to be more marked with exotic holidays to countries that are very different in terms of culture, climate and time zone.

Studies report illness rates of between 35% and 65% of travellers although most illness is relatively mild. No surprise perhaps that diarrhoea seems to be the predominant problem with respiratory illnesses as the next most common issue. That is not including other holiday miseries of insect bites and despite all health warnings, peeling skin.

However, even for those staying closer to home there are health hazards associated with holidaying. It has been demonstrated that the risks of having a heart attack are significantly raised in the first two days of a holiday and the groups at most risk are those driving and staying in a tent or caravan. Another issue that hits in the first day or two specifically will be familiar to migraine sufferers, many of whom experience 'relief-of-stress' headaches as a regular miserable start to their break.

Nonetheless most of us do feel happier while we are away although it often takes a bit of time for that 'feel good' to hit. Getting over the last few days of longer hours, the travel phase and just 'general adjustment' can mean that during the first part of our holiday we are not in quite such good spirits as we would hope. However on average by about 10% of our way through our mood is lightening and mostly stays up for the next 70% of our time away.

As we approach our return towards the end of the holiday we see a common mood dip, but there is evidence to suggest that this actually corrects just before we return and that for most of us, we do come back feeling at least initially brighter.

Generally, despite the risk of holiday ills there also seems to be an improvement in our physical state by the time we get back. However the overall well-being benefits in terms of rest and recuperation seem to vary with the types of activity we engage in while away. Recuperation is facilitated by free time for ourselves, sunnier locations, exercise, good sleep, and making new acquaintances. Looking at photos and videos afterwards also seems to help prolong that holiday feeling.

Sadly the bad news is that on return almost all studies seem to demonstrate that the benefits seem to dissipate rapidly with most showing a rapid return to our baseline within a few days and some showing a short dip below it for a brief period. Although we gain benefit when we are away we don't seem to maintain it; so should we bother? The workaholic contingent might be minded to skip their annual leave but evidence cautions against it.

Even though it would seem the health and psychological benefits of vacations are short lived,

research seems to clearly indicate that those who decline to take their leave are worse off. Over time non-holiday takers appear at increased risk of depression, poorer physical health and possibly even have a higher mortality rate.

So overall it would seem holidays are indeed good for us however short term the immediate benefits. But given the transience of the holiday effect (which seems unrelated to the holiday duration) the best advice appears to be to take more frequent shorter breaks. Ideally aim for warm locations that are not too far away.



Good planning to limit holiday hassles and exercise, sleep and pleasurable social activities all help maximise benefits. So if you've just got back and are feeling low, putting a well organised long weekend in the diary might be just the ticket. Oh yes and one final thing as you go through the packing list if you can..... do try to avoid taking the laptop !

This months Doctor's Corner was provided by Roodlane GP Dr Karen Lindall.



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