



PSV News

POLIO SERVICES VICTORIA

A Department of Human Services Program
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P O L I O
S E R V I C E S
V I C T O R I A

ISSUE 17

PSV Hotline Toll Free 1800 030 324

June 2008

PSV TEAM 2008 (INCLUDING DAYS OF WORK & CONTACT DETAILS)

JANE HENDERSON
Service Coordinator and Physiotherapist
Monday – Friday 9288 3900

DARREN PEREIRA
Orthotist
Monday – Wednesday 9288 3838

MARGARET PETKOFF
Occupational Therapist
Monday & Thursday 9288 3900

DR PENELOPE SMITH
Medical Specialist
Tuesday clinics only 9288 3900
(Locum from July 2008)

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PSV CLINICS FOR 2008

Regional

| | |
|-------------------------|------------|
| Wed 2 nd Jul | Swan Hill |
| Wed 3 rd Sep | Shepparton |
| Wed 5 th Nov | Bendigo |

Metropolitan

Clinics are held on most Tuesday afternoons at St Vincent's Hospital Melbourne. The waiting list is generally up to 5 months long. Reviews may be scheduled with PSV's allied health staff only (ie. no medical specialist present) with a much shorter wait to appointment.

PSV STAFF CHANGES

Farewell Dr Genevieve Kennedy

It is with sadness that this month we farewell Dr Genevieve Kennedy, the PSV Rehabilitation Physician who has been with the service since its inception in 1998. Genevieve's expertise and dedication have been invaluable to PSV over the past 10 years. We wish her all the best with her new position at the Peter James Centre.

Thank you Priya Davis

Priya Davis has been working with PSV to reduce our waiting list for orthotic management. This fixed-term position unfortunately finishes at the end of June 2008.

We thank Priya for her wonderful contribution to PSV and we keep our fingers crossed that she will join PSV again in the future.

Welcome Dr Penny Smith

Dr Penny Smith commences in PSV in July 2008. She will attend the metropolitan PSV clinics on Tuesday afternoons. Penny has worked in the medical specialist position with PSV on a previous occasion when Genevieve was on long service leave. We welcome penny back to PSV and thank her for supporting the service whilst recruitment for a permanent PSV medical specialist is underway.

PSV ONLINE

If you have an email address and would be happy to receive this newsletter electronically, please email your email address to: psv@svhm.org.au.

If you are online, don't forget to check out the PSV website at: www.psv.svhm.org.au. You may wish to recommend it to relevant friends, family or health professionals.

PSV'S RELATIONSHIP WITH DHS

Since it was established, Polio Services Victoria was funded by the Disability Services Division of the Department of Human Services (DHS).

In March 2008, PSV was transferred to be funded by the Metropolitan Health and Aged Care Services Division of the DHS. PSV is better suited to this division because PSV provides a health service, not a disability service.

PSV sought this change in divisions because the Disability Services Division was not familiar with the model of service provided by PSV, nor the resources required to provide the service. It is hoped that our relationship with our new division of the DHS will be one of greater understanding.

MEDICARE BILLING

PSV introduced Medicare billing for PSV Clinics in September 2007. PSV Clients will have no out-of-pocket expenses for clinic appointments, because all assessments and consultations will be bulk billed. This means the cost will be covered by Medicare.

What do you need to do?

1) You now need a referral from your general practitioner (GP) to attend the PSV Clinic. Please ensure it includes the name, address and provider number of your GP. Please ask your GP to address the referral letter to: Polio Services Victoria

St Vincent's Hospital Melbourne
P.O. Box 2900, Fitzroy, Vic. 3065
OR fax it to: (03) 9288 3808

2) Please bring your Medicare card to your appointment.

LYMPHOEDEMA MANAGEMENT

Some of you may have experienced localised swelling, not caused by trauma, which becomes an impediment to movement and function. This may be localised oedema (temporary swelling) or lymphoedema (swelling due to problems with the lymphatic system), both of which can be assessed and managed to some extent.

Lymphoedema explained

Lymphoedema is characterised by swelling of certain parts of the body. Any part of the body can be affected by lymphoedema, but it tends to target the arms and legs. Lymphoedema is caused by problems with the lymphatic system.

Normally, fluid and proteins move into the body tissues regularly from the blood. This tissue fluid bathes the cells, supplies their nutritional needs and receives back the products of their metabolism. The lymphatic system manages the fluid levels in the body. The lymphatic system is a network of tubes throughout the body that drains this fluid (called lymph) from tissues and empties it back into the bloodstream. It also filters out bacteria, and houses types of white blood cells crucial to the body's ability to fight infection. Muscular movements and contractions of the larger lymph vessels pump the lymph through the network of tubes. One-way valves in the vessels prevent the lymph from travelling backwards. The lymph is cleared of micro-organisms in glands of tissue called lymph nodes, located around the body.

Primary lymphoedema occurs when the lymphatic system is injured or obstructed and there are many causes for this.

Secondary lymphoedema is caused by obstructions in the lymphatic drainage. Secondary lymphoedema may affect polio clients because it can be caused by a lack of movement. Muscular contractions are required to help pump the lymph through the vessels. A lack of movement allows the lymph to pool, particularly in the legs.

This is made worse by immobility and leg dependency, such as when you are seated in a wheelchair or scooter for prolonged periods, because of the effects of gravity.

Symptoms of lymphoedema:

- The affected area feels heavy.
- The skin feels tight, close to bursting.
- The skin of the affected part is hotter.
- Aching.
- Pins and needles.
- Darting pains.
- Painful joints.
- Swelling.

Diagnosis

Lymphoedema is diagnosed with a number of different tests, including:

- Physical examination – taking into account a person's medical history.
- Special x-rays – CT scans and lymphoscintigraphy (which gives a picture of the lymphatic system).
- Bioimpedance – to detect fluids.
- Perometry – to detect limb volume and circumference changes.
- Tonometry – to detect changes in the toughness (fibre) of the limb.

Treatment

Lymphoedema can be treated in a number of ways, including:

- Complex physical therapy (CPT) – combines compression, lymphatic draining, special exercises and skin care techniques.
- Compression bandages – to promote lymph flow.
- Lymphatic drainage massage – to manually move the lymph to a previously cleared, unaffected area and increase what drainage is present in the limb.
- Special exercises – muscular movement helps to pump lymph.
- Medications – such as benzopyrones (Paroven) to help remove excess proteins and associated fluid from the tissues.
- Massage – the person or their carer can be taught massage techniques.
- Low-level laser therapy – which can soften fibrotic tissue and help stimulate poorly functioning lymph vessels.
- Electrical stimulation – of the muscular elements of the lymph vessels and surrounding musculature.
- Various forms of vibratory massage – all of which in some way vary the tissue pressure and encourage uptake of fluids and their contents into the lymph vessels.

Self-help

Areas of the body affected by lymphoedema are prone to infection. Included suggestions for management of lymphoedema:

- Pay particular attention to skin care to reduce the risk of infection.
- Avoid cuts, abrasions or other tissue injuries in the affected area.
- Don't allow your skin to be sunburned.
- Avoid direct heat (ie hot baths, saunas, sunbathing).
- Don't wear tight clothing or jewellery.
- If you have to sit down for long periods of time, elevate the affected limb.
- Take regular and gentle exercise.
- Avoid carrying heavy loads for any length of time, as this does not allow good lymph fluid clearance from tissues.

Where to get help

- Your local doctor
- Nurse on Call Ph: 1300 606 024
- Lymphoedema Support Groups through the Lymphoedema Association of Victoria Inc.: Ms. Mary D'Elia, P.O. Box 2412, North Ringwood, Vic, 3134, Ph: 1300 852 850, e-mail: info@lav.org.au, website: www.lav.org.au.
- Financial assistance for pension holders and low income earners is available for people who need to purchase lymphoedema compression garments through the Lymphoedema Compression Garment Program. Ph: (03) 8458 4988, website: www.mercy.com.au.
- Lymphoedema compression garments are subsidised through the Victorian Aids & Equipment Program. Contact your local Aids and Equipment issuing centre.



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