



Magazine

Summer 2011

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members

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Affiliated to the British Heart Foundation and
Arrhythmia Alliance - The Heart Rhythm Charity

POOLE HEART SUPPORT GROUP

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Last date for articles to Editor is 10th day of month before publication.

Chairman's Letter

Here we are with our Summer issue. Lets hope we haven't already had everything summer has to give already with our glorious April and early May. I've been able to get out on my bike a lot but otherwise as one who exercises on Mondays and Fridays my schedule has been a bit disrupted of late with all these public holidays!



Our Spring lunch was a great success. The meal, the dancing and the band were just right. Its not fully discussed or decided but we are seriously considering moving what is effectively our annual dinner to the Spring next year. There is so much going on at Christmas and moving to March would make for lighter evenings and better weather. Your committee are open to your views on this, so if you have strong opinion either way then please do let us know.

That leads me on to an important point. This Magazine does print letters from members when we get them, its just that we don't get many . . . any. Why not put pen to paper sometime? Something that has happened to you or occurred to you in the group, funny or serious, we'd love to know about it.

We have had a number of entries from members for the "Name this Magazine" competition. Many were duplicates. Many were similar to other publications. The committee is not convinced by any of them and so we are holding entries open for a while. We are looking for that unique and surprising entry. Of course if it doesn't come then the alternative is to do nothing, after all, PHSG Magazine says it all really.

Bob Ormiston joins with the team in editing this edition, and he has joined the committee now to help do that. Welcome Bob.

Medicine and Cardiology News from Poole Hospital NHS Foundation Trust

Dear friends,

I hope this article finds you all well and ready for the summer ahead, which I hope will bring good weather and plenty of leisure time for everyone to enjoy.

We have emerged from the winter period in the Hospital in good shape after many changes due to the restructuring of services and the financial constraints in the present economic climate. The 18 week referral to treatment target remains and with regard to the cardiology targets we are achieving all of these. Our new heart failure day service on the medical investigations unit (MIU) is proving very successful and allows patients to be treated as a day case and return home that evening rather than stay overnight in the hospital. We now also have an entirely nurse led cardioversion service run by our cardiac nurse practitioners, this takes place in day theatres however we are not looking to clerk and prepare patients for this in the MIU in the future.

At this time of great change in the NHS it is now more than ever that we need your support in letting us know what went well and what not so well. The quality service group is your voice and please do not hesitate to speak to your representative regarding this.

I myself will be going to the annual Florence Nightingale Services this May, first the one in East Wellow on the 9th May by her grave and then the Florence Nightingale service run by the Foundation of which I am Vice-Chairman at Westminster Abbey on the 11th May. Both services are held on the Sunday for Wellow and Wednesday for the Abbey nearest to her birthday of the 12th May. This is an opportunity not only to celebrate the life and achievements of the founder of modern day nursing but the profession as a whole. It is also an opportunity to discuss issues about nursing in the present climate. On the day of the Abbey service the Foundation runs a student day at St Thomas's Hospital where the school of nursing was founded by Florence Nightingale. Students from universities all over the UK are invited and they have a panel discussion in the morning with senior nurses and academics, I am also on this panel representing the operational side of nursing. They then have lunch and visit the Nightingale museum which is on the site of St Thomas's, something well worth seeing if you are in London. This is followed by tea and then they visit the Abbey before the service at 18.30, which this year yet again is sold out with almost 2000 people, and will be attended by our patron Princess Alexandra. It is so good that that we maintain the teaching and promotion of the history of nursing to our new up and coming colleagues, it is very important to remember our heritage.

Well please have a safe and healthy summer, there are difficult times ahead but, 'Together we can make a difference'.

Geoffrey Walker OBE JP RGN, Matron Cardiology and Medicine.



Dr Boos is away at the moment on an exotic adventure of some endurance. We hope that he will write of his experiences in the next issue.



FROM YOUR PHARMACIST

In 2001, 587 million prescription items were dispensed in primary care in England at a net cost of £6.1bn. Although most patients derive benefit from medicines, some do not. Harm caused by medicines and wastage of prescribed drugs is probably greater than is realised. In 2004, the DoH encouraged both Primary & Secondary care to set up systems to reduce waste, improve health outcomes and help patients get the best from their medication. Now “medicines management” is an important role for pharmacists in both local & hospital pharmacies and includes prescription review, medication monitoring, management of repeat prescribing and patient education.

I’m sure most of you have regular monthly prescriptions, probably for several items. It is important that not only do you know what you are taking and what it is taken for, but also to keep an up to date record. The easiest way to do this is probably to use the “copy” part of the repeat prescription from your GP. Alternatively, your GP will print a list or speak to your regular pharmacy to ask for a list especially if there have been any recent changes to your medicines. Only order what you need each month, especially for items you only use occasionally. If you have any questions about your medication, your GP or your pharmacy should be able to help you.

But what happens when you need to come into hospital? If you know you are coming in for an elective or pre-planned admission, you may be seen at a pre-clerking appointment where the planned procedure will be explained and the doctor or nurse will discuss your usual medicines with you. You will also be told if there are any medicines you should stop before your admission e.g. some people may need to stop aspirin or diabetic medication. Usually, people come into hospital on the day of an operation and will be told which medicines they should take on the day of admission. It is important to bring your medicines into hospital with you including inhalers, eye drops of anything bought over the counter as the ward pharmacy team will review your medicines with you on admission and discuss when & how you normally take them when you are at home or if you have any problems. If necessary, order a repeat prescription in good time before admission so you have a supply of medicines as the hospital pharmacy does not keep everything! It is also a good idea to have a complete list with you in case something has been missed from your drug chart... the ward pharmacist can then check if this is deliberately on hold e.g. aspirin and when it should be re-started. If it has been missed by mistake, it can be added to your drug chart so doses of

important medicines are not missed. If you think something is missing or you have forgotten to bring something with you, then discuss this with the pharmacy team or the nurses who will be able to check; sometimes the ward tablets may look different or something has been changed whilst in hospital e.g. having an injection to prevent blood clots instead of taking warfarin. Your own tablets will be kept safely in an individual medication locker & nurses may use these tablets or some from the hospital supply when it is time for you to receive your dose. Don't worry, you will not go home without any medication'– either your own if there is enough or an additional supply from the hospital pharmacy. Having to stay in hospital is also a good time to think about stopping smoking as you won't be able to smoke within the hospital. Discuss this with your GP before admission as they can prescribe nicotine replacement therapy and direct you to help & support. Alternatively, discuss it with the ward team and ask to be referred to a smoke-stop team. It is also a good idea to have some basic pain relief at home ready for your discharge e.g. paracetamol and ibuprofen if these are suitable & safe for you.

Of course, not everyone knows they are going to come into hospital. If at all possible, carry an up to date medication record and make sure a member of your family knows where it is. Don't worry if this is not possible as we can obtain a record from your GP but this can be difficult in the evenings or weekends and important medication may be missed. As soon as possible, the doctor or pharmacist will prepare a drug chart so the nurses are able to give your medication. Once you feel well enough, it might be a good opportunity to discuss any concerns with the pharmacist and as for elective admissions, a good time to think about stopping smoking.

When it is time to go home, the doctors will write a discharge prescription and the pharmacist will check again that this is complete and contains all medicines which are to be continued. This might be long term or just for a few days e.g. pain killers or antibiotics. If you have regular medication at home, then this will be taken into account so medication is not duplicated. If anything has been stopped or changed, this will be explained to you. A copy of this summary will be given to you and sent to your GP so they can issue your next prescription.

Linda Porter.

**Medicines Information, Formulary & Antimicrobial Pharmacist.
Poole Hospital**

Proposed cuts to the National Health Service.

The British Medical Association has weighed in on the new Prime Minister David Cameron's health care proposals.

The Allergists voted to scratch it, but the Dermatologists advised not to make any rash moves.

The Gastroenterologists had a sort of a gut feeling about it, but the neurologists thought the Administration had a lot of nerve.

The Obstetricians felt they were all labouring under a misconception.

Ophthalmologists considered the idea short-sighted.

Pathologists yelled, "Over my dead body!" while the Paediatricians said, "Oh, Grow up!"

The Psychiatrists thought the whole idea was madness, while the Radiologists could see right through it.

The Surgeons were fed up with the cuts and decided to wash their hands of the whole thing.

The ENT specialists didn't swallow it, and just wouldn't hear of it..

The Pharmacologists thought it was a bitter pill to swallow, and the Plastic Surgeons said, "This puts a whole new face on the matter...."

The Podiatrists thought it was a step forward, but the Urologists were p****ed off at the whole idea.

The Anaesthetists thought the whole idea was a gas, but the Cardiologists didn't have the heart to say no.

In the end, the Proctologists won out, leaving the entire decision up to the A***eholes in London.

Lost Members - An Appeal from your Membership Secretary

Every year we lose members who simply never send back their renewal forms, at renewal time in 2010 we lost over 100 members and in 2009 we lost almost 125.

Now it is renewal time again, I would like to make an appeal to anyone who is thinking of terminating their membership, will you please let us know what we needed to do to keep you?

For many people, the exercise groups are the most vital part of PHSG, including 'Hearts on Seats' where the less able can still make the effort to keep their hearts pumping. Even if you decide to leave the group, remember that we are always here. You can rejoin in the future if you find other forms of exercise are more difficult to keep up, or maybe just too expensive.

The 'chat stops' are proving quite popular, with people dropping by for a cuppa and a chat. Some of us stay the whole time but others just drop by, have a look at Jan's book stall and move on after a while. Come along and have a look if you've not been to one, details come out in David Anderson's newsletter or you can always contact a committee member or the office if you don't have Internet access.

The monthly talk attendances vary, which is a pity as Gary has arranged some excellent speakers over the years he has been involved. There is always plenty of room at the postgraduate centre at Poole Hospital and there is always plenty of parking available alongside Poole Park with a short walk to the centre. If you know anyone who does a good talk or presentation, which you think other members may enjoy, why not put forward your suggestions as new ideas are always welcome.

The computer club closed because attendance was very low, the average was less than three over the period I ran the meetings but if there was a real interest they could be restarted. There are so many computer groups around the area that I assume people attend those or simply don't see the computer as anything unusual these days.

The walking group continues to be successful with organised walks scheduled throughout the summer and walks arranged by members through the winter months as well. Great exercise and a very friendly group where you can amble and chat at the same time. Details in the magazine or on the website. *Continued on page 16*

EXERCISE VENUE NEWS

from Robin Pringle

As reported at the A.G.M. we feel we have had another successful year. There are 25 weekly sessions at 8 different venues, all of which are covered by our 7 BACR qualified trainers. Some of our sessions appear to be bursting at the seams whilst others still have space available to accommodate newcomers and also any of our existing members who may be considering a return to classes.



Cardiac Exercise makes very good sense. We are all aware that without a central heating pump our homes would be very cold places in the winter. So it is with our own hearts. They are after all, the muscles which ensure that our blood flows around our bodies.

There are changes afoot at Lytchett Minster where Angie Hoare has decided to cut back on her workload for personal reasons. We are very grateful to Jayne Frank who has stepped in to take over the two classes which are held on Tuesdays and we have temporary cover for the next two months from Lesley Bradshaw and Livvy Inglis, who will cover the Friday classes. Livvy is a trainer at Blandford. We do appreciate all the good work Angie has done for us for many years.

We would like to pay tribute to all our trainers, thanking them for their commitment to PHSG and to their flexibility at times covering for each other during sickness and holidays. Thanks too, to Roger for overseeing the running of our venues in the Purbecks and to those who help with the collection of subs and the management of the equipment at all our other venues.

We also owe a great deal of thanks to the Rehab Nursing Team. They are a group of dedicated nurses and physios who see patients through the 8 week Phase 3 and are keen to work with PHSG in the hope that as many as possible keep up their exercising at PHSG Phase 4. .

At present we cannot see the need for further expansion of our existing exercise program but we are hoping to assist the Rehab Dept by providing a Step Down Class for Poole Hospital's Heart Failure Group. We have the trainers and could possibly assist but would need some sort of grant to cover the expense. To this end we have been in discussion with the BHF and will be applying for a "Help a Heart Grant" in the very near future.

Exercise venues on page10

Exercise Venues

Canford.....Mondays, Tuesdays, Thursdays and Fridays.

Wareham....Mondays and Thursdays

Lytchett Minster....Tuesday and Friday evenings

Swanage.....Tuesdays

Images,Lower Parkstone....Wednesdays and Fridays

Hearts on Seats, BroadstoneThursdays

Ashdown,Canford |Heath ...Mondays, Tuesdays and Fridays

Ferndown....Mondays and Wednesdays

ROMANCE

An older couple were lying in bed one night. The husband was falling asleep but the wife was in a romantic mood and wanted to talk. She said: "You used to hold my hand when we were courting." Wearily he reached across, held her hand for a second and tried to get back to sleep. A few moments later she said: "Then you used to kiss me." Mildly irritated, he reached across, gave her a peck on the cheek and settled down to sleep. Thirty seconds later she said: "Then you used to bite my Neck." Angrily, he threw back the bed clothes and got out of bed. "Where are you going?" she asked.

"To get my teeth"



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BE KIND TO OLD FOLK

Remember to be kind to old folk, they are worth a fortune. They have Silver in their hair, Gold in their teeth, precious Stones in their kidneys, Lead in their feet and Gas in their stomachs.

Now that I am one of the old folk, a few changes have come into my life. Frankly, I have become a frivolous old girl! I see seven gentlemen every day.

I wake up with Will Power who helps me out of bed, then I have to visit * John. Next, it's time for Scott Oats followed by Earl Grey. When they have gone Arthur Ritis shows up and stays with me for the rest of the day. He likes to keep on the move so he takes me from joint to joint.

After such a busy day I'm really tired and glad to go to bed with Johnny Walker. What a life! Oh, yes I almost forgot, I'm also flirting with Al Zheimer!

JIGSAW PUZZLE

A blonde calls her boyfriend on the telephone and says " Please come over here and help me, I have a very difficult jigsaw and can't even figure out how to get it started." Her boyfriend asks "What is it supposed to be when it's finished?" The blonde says "The picture on the box is a tiger." Her boyfriend decides to go over and help. She shows him where the pieces are spread all over the table. He studies the pieces for a moment and then looks at the picture on the box. "First of all," he says, "no matter what we do, we're not going to be able to assemble these pieces into anything like a tiger." He takes her hand and says, "Secondly, I want you to relax. Let's have a nice cup of tea and then we'll put all these Frosties back into the packet."

Do you have computer problems?

We can resolve your problems for you. Are you unsure what you are doing, do you need assistance, a helping hand or training? We can assist with home PC security, internet connection problems, advice and installation of Broadband, PC networks and supply and/or installation of secure wireless networks in your house. We undertake virus, spyware and ad-ware removal and can supply or install security programs to make your PC safe. Is your old PC slow, is it worth upgrading? We provide impartial advice and can perform upgrades or help with any new PC purchase and accessory quotes. We supply new PCs, install, configure your system and can transfer your existing data. Why not give us a call! Contact Efficiency Solutions —

Jeff on 01202 855949 Mobile 07736 275190.

**Report for the Jan 2011 meeting/talk given by Richard Tipney
(supported by Frances Aviss).**

It was good to see the return of Frances Aviss who headed up a presentation on the revision of emergency response times in Dorset about a year ago. She explained that she was not directly involved in mental health provision in Dorset but keeps in close touch as she started her career some years ago in mental health. Frances then introduced Richard Tipney, the business manager for IAPT (Increased Access to Psychological Therapies) working for the Dorset Healthcare NHS Foundation Trust.

Richard explained that IAPT has been in operation for several years and is now wishing to expand it's services to the public at large. It's objective is to help people with the minor forms of mental health, mainly depressive, through one to one sessions. Some 40 professionals are involved in providing the help and advice to alleviate the debilitating effects, and overcome the stigma surrounding mental health problems. Using a set of charts and illustrations Richard described the various forms that the expression of depression can take, lethargy, repetitive washing etc – some dozen or so categories, followed by the simple step function approach to achieving better life expectancies without the use of medication. Using relaxed and varied techniques, at 6 or so levels depending on severity, it is expected that help can be given to many people with lesser but continuing problems. Referrals into the system can be by either a GP or self-referral. By expanding the awareness of the facility of IAPT via GPs and talks such as that to PHSG members it is hoped to help many of the 1 in 10 people who have problems of this sort.

The discussion session at the end of the presentation was followed by refreshments, in the usual way.

Gary Lee

Social Events

Financial Advisor Wanted

I'm looking for a financial advisor.

I want them to be capable, successful and to have faith in their own ability.

To prove that faith, I want them to take their fees from the profit they make for me.

If I make a loss, I expect them to be willing to reimburse me.

If you know such a financial advisor, please let me know.

ATRIAL FIBRILLATION

Atrial Fibrillation, universally called AF by Cardiologists, is one of the commonest abnormalities of heart rhythm. It is caused by disruption of the normal pathways in the atria, the upper chambers of the heart, so that the electrical impulse which drives the heart beat, the pacemaker current, becomes fragmented. Multiple regions in the atria then begin to form little surges of current themselves. This disrupted and fragmented electrical activity then travels towards the centre of the heart and reaches the Atrioventricular node (AV node). The AV node is the linking 'cable' which allows the impulse to reach the main pumping chambers of the heart, the ventricles. The spread of electrical excitation over the membrane surfaces of the individual muscle cells triggers the inrush of calcium ions (charged atoms) into the cell, which is what allows the proteins in the muscle to contract. I hope you are with me so far!



The AV node performs a remarkable safety function in that it both slows the electrical impulse, and acts as a 'governor', only allowing a certain number of impulses through to the ventricles. Depending on age, the amount of adrenaline present, and some other factors, the maximum heart rate that can filter through the AV node is around 120 to 180 beats per minute. Even so, the shock of somebody who develops AF on appreciating that their heart rate is suddenly not its regular 75 beats per minute, but an irregular 130 beats per minute, is quite considerable.

One thing that we still understand imperfectly is that some patients have a fast rate in AF, say 130 or more, and some do not, and although irregular, their heart rate may be only 80 or 90. We also don't fully understand why some people are completely unaware that they are in AF.

What causes AF? In some it is a general deterioration of the atrial tissue with age, and it's true that the older you are, the more likely you are to have AF. About 10% of people over the age of 80 are in AF and most of them are unaware of it. Without writing a textbook on the subject, the common causes are: high blood pressure; excessive alcohol intake; heart valve disease (particularly the mitral valve); thyrotoxicosis; coronary artery disease (especially if there has been significant damage to the heart in the past P14

such as a heart attack); and underlying abnormalities of the heart muscle. You may be surprised if I term AF a 'benign' heart rhythm disorder. But generally, particularly if the heart rate is controlled by some extra medication (such as a beta-blocker, digoxin, verapamil), most people are not particularly bothered by it. The main risk of the condition is that in view of the irregular, rather spasmodic, blood flow through the atria, eddies and vortices of flow can lead to stagnant regions of blood flow, particular in the region of the appendage of the left atrium. When this happens, the blood can form a clot, and such a clot can build up and suddenly break free from the atrium, passing into the circulation. In view of the large amount of blood which flows to the brain, clots often arrive there first, causing stroke. This risk is minimized by taking warfarin. In a few people, aspirin may be an adequate anti-thrombosis drug. The risk of stroke is increased by several factors: age of 75 or more; high blood pressure; heart failure; diabetes; and previous stroke or TIA. We score one point for any of these factors, and two for the last one. In general, anybody with a score of more than one should take warfarin. If the score is zero or one, then aspirin may be adequate, though it is reasonable to debate it.

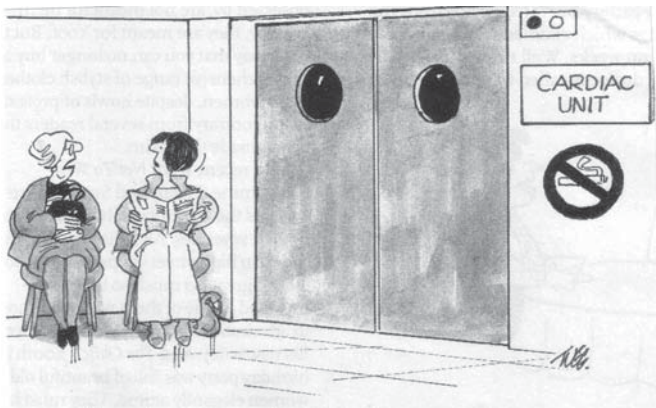
Finally, there are drugs which suppress or prevent AF. These include sotalol, flecainide, propafenone, and amiodarone (I've listed these in increasing order of side effects!). In a few people, there are keyhole surgery techniques (ablation) which may prevent AF developing. This is applicable to only a minority of people with AF, it has risks (including stroke), and it is still an imperfect treatment, though it is developing and improving with time.

Andrew McLeod, MD

Consultant Cardiologist, Poole and Royal Bournemouth Hospitals; Advisor in Cardiology to CAA



We are affiliated to the Arrhythmia Alliance and they contacted us recently to tell us that they were updating their website. They have put in a page on the site listing all their affiliated groups and offered each a page for our own information. Check it out on <http://www.theheartrhythmcharity.org.uk/>



"I blame the press! He was lifting the Sunday papers off the doormat"



Please send us some letters



OPEN DAY AT THE DRAX ESTATE

Sunday 29th May 2011

2:30pm until 5:00pm

Charborough Park
Entrance from A31

Proceeds in aid of the
British Heart Foundation



FOR SALE AND WANTED

FOR SALE

PHSG Shirts. They are grey marl, with our logo (as on the front cover of this magazine) on the left hand side breast pocket area.

Sizes: Small, Medium, Large, and Extra Large

Styles: T-Shirt £6, Polo Shirt £10, and Sweatshirt £12

Available from me; George O'Leary TEL: 01202 743978 or george@poolehsg.org.uk

WANTED

A very big thank you to all who have flooded me out with your old greetings cards. One half of my garage is almost full of them. Please do not send me any more for at least the summer, if that ever comes! I am sure you can find another way to recycle them but please keep the used postage stamps and postcards coming. Thank you again.

George O'Leary TEL: 01202 743978 or george@poolehsg.org.uk

The cycling group has rides - only in dry weather - where you are guaranteed not to be "left behind" by the other members. You do need to make sure you are fit enough to join the group so if your trusty steed hasn't seen the light of day for years, you may want to get that serviced and checked over - and have a talk with your doctor - before talking to Keith about joining the group. But cycling is a good exercise option if you think it may be for you.

The occasional meals at Escoffier have always been well attended but do you know of other restaurant venues which would be able to provide such excellent food and such good service for a crowd. Could you organise such an event as I'm sure these things don't all have to be run by committee members and their helpers. Obviously the Christmas party is an annual one-off but with that and Escoffier always being popular events, should we do more of these? Would it persuade you to stay with the group?

If there are other things that you think PHSG should do, then pass your suggestions onto one of the committee members or contact me directly by phone or e-mail, my details are in the front of the magazine.

Here's looking forward to your renewal or please send the form in with your comments if you decide not to renew, let us know what would have kept you with us.

Also, if you are still in contact with members who left us in the past, remind them that they are always welcome to rejoin, we would love to have them back. Derek Pope

The Penny Black by Phil Latterly



The “Penny Black” is the world’s first stamp and its fame spreads beyond stamp collecting. Great Britain invented the postage stamp and unified postage as one old penny and because of that, as long as we have the Monarch’s head on our stamps we do not have to put the name of our country. Brought out in 1840 they were only used for about a year which makes the “Black” quite a scarce stamp, but not exactly a rare one.

You could own a little bit of your country’s history, a talking point too perhaps, and heirloom for your Grandchildren. I’d hesitate to recommend it as an investment; the gap between dealers selling price and buying price is too wide, but the possibility is there as prices are rising quite well at the moment. Surprisingly, new Chinese collectors are snapping up Victorian stamps as fast as they can go and forcing prices up.

So, how to go about it? Prices at the moment are anything from £65 for a rubbish copy to about £200 for a fine specimen. As always, condition is everything. Visit one of the many stamp fairs that are held at the local community centres and seek out a dealer who specialises in Victorian GB. They will be reputable, they will not rip you off, but do look for the PTA (Philatelic Traders Association) logo. Simply say what you are looking for and be guided by the dealer. The descriptions will be accurate and candid and you’ll be able to pick a stamp that you like the look of and balance price against quality. You’ll find the items are all priced, and they are not made up on the spot.

If you do buy one, then always keep any dealer’s description that comes with the stamp. This can be more technical than you’ll be interested in but will be invaluable when the stamp is resold. When you close the deal, always offer 10% less than the asking price. Don’t worry, cash talks, the dealer will go for it!

Postage in 1840 was one old penny, and inflation is probably in excess of 100 times that now. So in today’s value, that makes it about 40 to 50p which puts today’s postal rate into some kind of perspective, pretty much about the same really!

Phil

PHSG SPRING DINNER



A happy gathering of PHSB members



Rita gets a thankyou bouquet from Jennie

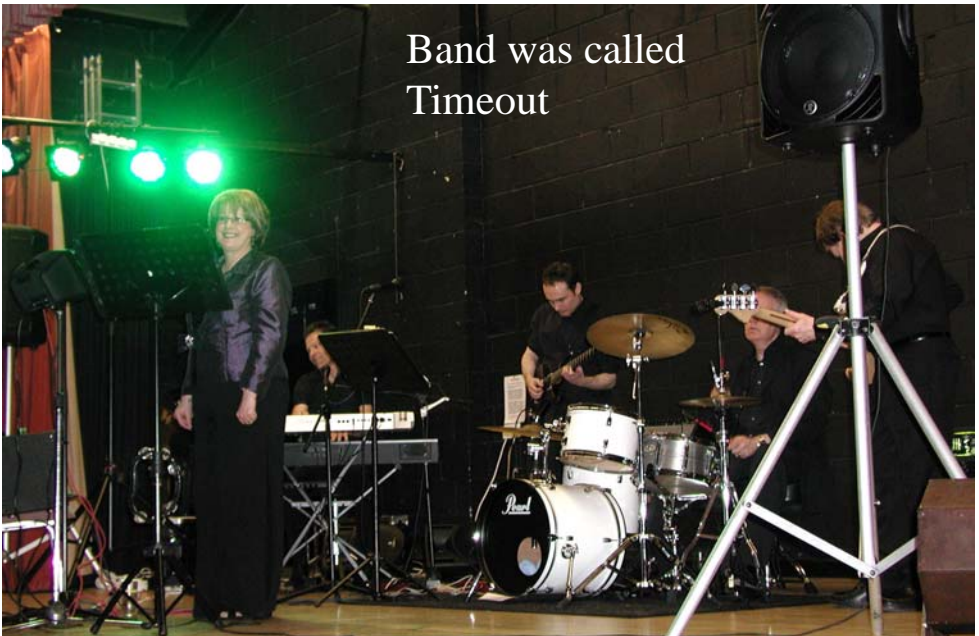
Robin and Maggie caught on camera



Jean presented a bag of goodies from Emma



Lesley cuts a rug



Band was called
Timeout



PHSG Cycling Club

2011 Rides

An activity of the Poole Heart Support Group - ALL STARTS at 10:00am

Sunday 26nd Jun Meet Broadstone Leisure Centre. Upton & Lytchett Wander (15m)

Sunday 24th July Meet Wareham Quay. Purbeck Pedalling (20m)

Sunday 21st Aug Meet Shore Road Sandbanks. Oil Roads Special (20m)

Rides are 15 to 20 miles long, the rides are open to all members of the PHSG as long as your doctor approves. For help, advice, weather check and bike maintenance call Keith Matthews on 01202 855001

Regularly updated details on www.poolehsg.org.uk and www.bournemouthctc.org

On Sunday 17th April at 10:00 am eight riders gathered in the car park of Upton Country Park for a ride billed as "Squarely Round Holes" a planned 15 mile ride."David Anderson (PHSG Secretary), David Curtis, Mike Smith, Alec, Alan Pounds, Alan Jeffries, Keith Mathews and myself Alan Griffiths (the new recruit). It has been suggested there are too many Alan's, a sentiment that I find difficult to agree with!

The fine warm weather had encouraged the wearing of shorts, thus providing an early outing for a very fine display of pale knees. Luckily this did not seem to disturb too many passing motorists or pedestrians.

The route started using the off road tracks from Upton country park round to the far side of Holes Bay. Reaching the roads we found our way to the very picturesque Hamworthy beach hutswith a very inviting cafe close by. Unfortunately any thoughts of an early rest stop were dashed as we sailed past.

We continued on through Hamworthy and across Poole bridge to Poole quay where we did finally stop at the old Custom House for a very welcome break and a cup of coffee (no cakes as we were trying to be good).

Leaving our rest stop behind we continued along Poole quay to Baiter and the along the path beside the harbour. Leaving Baiter we headed off for Lilliput and Parkstone - this was achieved via a seemingly random route with a few gentle inclines!

We returned to Poole and the harbour and thence via the cycle track running alongside Holes bay back to Upton Country Park. The end. Not quite, as we had all been very keen and had cycled to the start of the ride there was no alternative but to cycle our differing routes home.

In conclusion, what could be better than exercise in the open air with great scenery and shared with a pleasant group of people who have a common interest in cycling. I am sure we are already looking forward to next month.

Alan Griffiths



PHSG Cycle Group enjoying themselves not cycling.



NUTS NUTS NUTS

Packet of nuts a day 'can reduce cholesterol levels'

Eating a small packet of peanuts a day can cut cholesterol levels reducing the risk of hearty disease, researchers have found.

They recommend consuming nuts regularly to keep cholesterol levels healthy.

The fatty substance can clog arteries and increase the risk of suffering a heart attack.

But researchers found that those who ate plenty of nuts, of all varieties, had lower cholesterol levels than those who rarely ate them.

Nuts are rich in so-called "healthy" fats, as well as fibre and vitamin E. The latest research, a comprehensive review of 25 studies involving 583 people, found that those who ate an average of 67g of nuts a day had "bad" cholesterol levels that were seven per cent lower than those who hardly ate the snacks.

"Increasing the consumption of nuts as part of an otherwise prudent diet can be expected to favourably affect blood (cholesterol) and have the potential to lower coronary heart disease risk.

"Dietary interventions to lower blood cholesterol concentrations are the cornerstone of prevention and treatment plans for coronary heart disease." this advice was echoed by the British Heart Foundation (BHF).

Ellen Mason, a senior cardiac nurse with the BHF, said: "Apart from salted peanuts at the pub, nuts in sugary cereals or the traditional Christmas selection, nuts have been largely lacking in our diets in the UK.

"What we eat is extremely important to our overall health, and adding nuts back into our diet in place of saturated fats could help to improve cholesterol levels for many people.

It reduces your risk of developing heart disease-

However, too much salt isn't good either, so go for unsalted nuts in small amounts.

FUTURE TALKS:

June 15th – (*NB* - **WEDNESDAY – NB**) - a talk on Mongolia – by David Daniels

Against a background of slides David Daniels, who is a dentist, gives an account of his experiences in Mongolia. He now supports a charity that helps in the survival of wild horses on the plains of Mongolia which have been decimated by very severe winters in recent years. The fees gained from his talks go to this end. A story with a difference!

July 21st – a talk on the history of the Lulworth Ranges – by Steve Hayhurst
Steve is a member of PHSG. When working as a Ranger on the Lulworth Ranges he compiled a collection of photographs and other information related to the occupation of the ranges by the Army. He is keen to tell us about these important years of local history.

August 18th – a talk on Discovering Dorset – by the Rev. Stuart Timbrell
No, this is not a religious sermon! The Reverend moved to Dorset some years ago. In the early years he spent much of his spare time exploring and investigating the history and topography of this lovely county. Consequently he has many anecdotal and humorous tales to tell from his early days in the county.

September 15th – tales of “Disasters” – by John Slow
Those of you who experienced “Court in the Act” from last year will understand that this talk is likely to become a laugh a minute. John returns to tell us of some of the “Disasters” that occurred while he was Clerk of the court for Wimborne Magistrates Court.

October 20th – a talk on “Smuggling in Dorset and Hampshire” – by Bonny Sartin

Some of you will know Bonny Sartin as a member of the Yetties folk band. But in his spare time Bonny has gained a reputation as a raconteur telling stories which occasionally sung in parts. So he comes to tell us about the 18th century industry of smuggling, in and around Dorset & Hants, maybe with a “yo ho ho and a bottle of rum” thrown in!

November 10th (*NB* - the 2nd Thursday) – How have the Carrots grown?
- by Geoffrey Walker OBE

Matron Geoffrey Walker returns to give us an update on his “Nightingale Project” and other improvements to nursing under his control in Poole Hospital.

CHAIRMAN'S ANNUAL REPORT 2010/11

Membership has remained stable and is currently 607 paid up subscriptions with 39 honorary members, in addition there are 200 "partners" registered. 96 new members joined in the last year, and there are 131 lapsed members, members who have died or moved away or simply not renewed.

Funding for Poole Hospital rehabilitation classes is always under threat, and last year we stepped in to help out with the Phase 3 class at Poole Hospital. This year NHS funding has been found so that it still continues. We have been talking to the Poole rehabilitation team about collaborating with a "step down" class at QE School for heart failure people and this is looking promising and we are looking at a "Help a Heart Grant" from BHF. Otherwise funds coming in have been worthwhile with a few donations and an award from the Waitrose monthly draw.

The office that we run at Poole Hospital has continued with 13 voluntary helpers under the coordination of Jan Mesher and Betty Ellsmore. We have been using some of the office time to contact members who have not appeared for a while at exercise class, and to check on lapsed members.

David Curtis makes regular presentations at Poole Hospital during the rehabilitation programme (Education Day) each month. Robin Pringle and Tony Wilkinson follow this up at the end of the Phase 3 rehabilitation by offering the opportunity of membership and continued support.

We offer a vote of thanks to our almoner, Mavis Terry, who regularly sends out cards and good wishes to members who have suffered illnesses and we find that these are really appreciated by the recipients and helps them realize that they have not been forgotten. Mavis asks that if anyone knows of a member who is ill, that you inform her of it.

Gary Lee has done an excellent job as Social Secretary providing a full programme of monthly meetings and social activities. Unfortunately, Gary wishes to stand down this year to reduce his work load but I'm sure we will all thank him for all his effort. The Christmas Dinner and Party would have been the usual great success except for the weather! It metamorphosed into the Spring dinner, and thanks to the goodwill of the Hamworthy Social Club and the Band we did not lose any deposit money at all. Rita ended up having to do all the work twice though which she did seamlessly and p33

uncomplainingly, we owe her all our thanks too. The committee are in discussion as to what to arrange next time, should we have a Christmas Dinner or should we move the event to the Spring, especially as 2012 is PHSG's 20th anniversary. Christmas Fun and Games at Canford School were also affected by the icy weather but those of us that were there enjoyed the fun. Thanks are due to George and Millie and helpers for making sure the refreshments were available after our exertions. Max Smith continues to edit and publish the club website and we thank him for this. He also maintains the list of insurance companies offering to cover pre-existing conditions and this is consulted regularly. Alan Bristow our Magazine editor has been unwell for most of the past year and the Magazine has been produced by other people standing in. Unfortunately, Alan does not show any signs of return to health but he wishes to remain on the committee. Bob Ormiston has agreed to join the Magazine editorial team. The work of the PHSG continues with our popular programme of gentle physical exercise classes, and the walking and cycling groups which cater for different sections of our membership. Cyril Martin cannot be with us tonight but reports good attendances on the walks and he would like to offer his thanks to all his helpers. Thanks too to Pam and helpers for their hard work in providing tea and coffees, and George for the raffles and the other George for organising the club branded clothing. So many people work on behalf of the PHSG and I have tried to mention them all here and hope most sincerely that no names have been left out. But if so, it is not intentional and lets have a good round of applause for everybody.

Keith Matthews 15th April 2011

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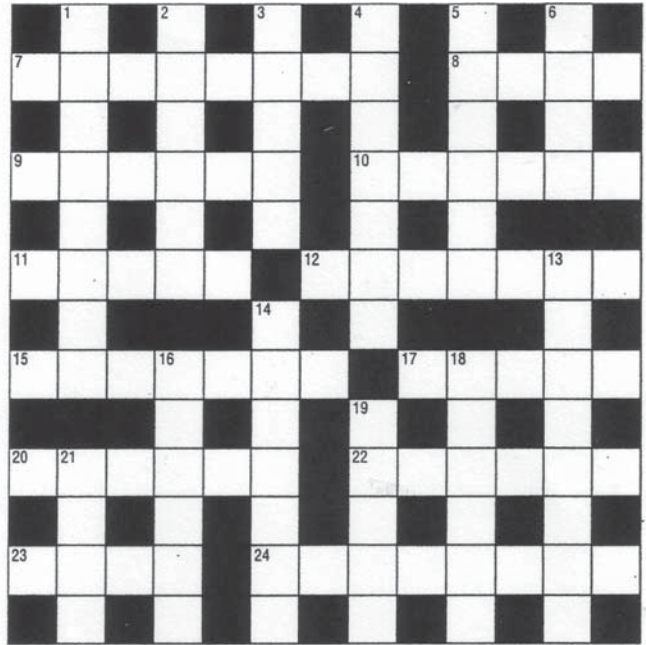
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Crossword

Answers
page 30



ACROSS

- 7 Watched (8)
- 8 Position taken up for a photographer (4)
- 9 Younger (6)
- 10 Australia's largest city (6)
- 11 Hard alloy (5)
- 12 Student (7)
- 15 Noel - - -, *House Party* host (7)
- 17 South African province (5)
- 20 Lasso (6)
- 22 Former English county, now split into two (6)
- 23 Get out of bed (4)
- 24 Opportunity (8)

DOWN

- 1 Kidnapped (8)
- 2 Purify (6)
- 3 Turn away (5)
- 4 Epic Greek poem (7)
- 5 Eight-legged creepy-crawly (6)
- 6 Land encircled by water (4)
- 13 Evita? (3, 5)
- 14 Issue (7)
- 16 Actor, - - - Tobias (6)
- 18 Offer help (6)
- 19 Children's charity (5)
- 21 The largest continent (4)

Report for the March 17th talk given by Laura Hemmings Waste & Re-cycle Management.

A relatively small audience of 18 members attended on a pleasant March evening to hear how Poole Borough currently deals with the waste collected in the Borough and the materials that can be re-used and re-cycled. Ms Hemmings brought a display of the household items that are re-cycled, from paper and card, to bottles & plastics, to clothing items and vegetable green waste. She also displayed items made from re-claimed materials, including a fashionable suit made from a plastic fibre. Her presentation is given to all ages from primary school children, to youth groups and adult groups of all ages. The young children are usually most interested in the possibility of using the items displayed in a direct way as demonstrated by Blue Peter, but happily our group had no desire to do this. The extraction of the various materials was explained in a graphical way. Also the relative value of the extracted materials, where aluminium cans are most prized as they are reprocessed in the UK. In the main other materials such as paper, card and plastics (including plastic bottles) are bailed up and exported to countries such as India and China who are prepared to reprocess them for packaging and fibre production etc.. Green waste is chiefly used for compost.

Ms Hemmings went into landfill and incineration and the associated charges made on the local authority by government for the volumetric use of landfill, and explained that most landfill sites are now owned by private companies. Also the levies charged, (tax?), are continually reviewed and raised and the percentage of re-cycled waste from collections is expected to increase in line with European directives, with specific targets being set and the threat of fines if these targets are not achieved.

Comments were made that there is no consistency for collection, bin colours etc for the local authorities in the UK and that some national directives should be imposed.

Judging by the questions and answers the audience found this presentation very interesting and certainly not a *waste* of time!

Gary Lee Social secretary

For those who are interested in the Walking Group, we walk every 10 days on Wednesdays and Saturdays from 2 to 5 miles. Some of us round off the day's walk with a Pub lunch – Pleasure after pain! If you require more information or the Walking Book (£3) please contact me on 01202-733956.

Cyril - Walks Co-ordinator.



Holiday travel tips and travel insurance

This article is taken from the BHF web-site. BHF do not recommend the insurance companies in the list, which has been compiled from feedback received from heart patients. For the complete list of travel insurance companies, see the BHF web-site.

Able2Travel 08707506711	Single Trip (max 45 days) Age limit 79 years. Annual Multi Trip (max 31 days any one trip) Age limit 69 years.
AllClear Travel Insurance 08712 088 579	Single Trip No Age limit. Severe conditions covered. Annual policies Age limit 70 years.
Bradford & Bingley 0800 169 4078	Age limit 80 years. Medical screening.
Brunsdon Insurance 01452 623623	Age limit 80 years. No patients on waiting list.
Bupa Travel Cover 0800 0010 22	Age limit 79 years. Medical screening. Will only accept within 3 months of travel date.
Direct Travel 0190 381 2345	Single policies up to 75 years. Annual policies up to 65 years.
Flexicover Direct 0870 990 9292	Age limit 80 years. Medical screening.
Freedom Insurance Services 0870 774 3760	For people with pre-existing conditions. Age limit 85 years. Mostly Medical screening. Will only accept within 6 months of travel date.
Getmy.com Travel 0845 0262441	Single policies Age limit 85 years. Annual policies Age limit 79 years.
Global Travel Insurance 01903 203933	Covers pre-existing conditions. Single Trip Age limit 90 years. Multi Trip Age limit 75 years.
Holiday Services 01623 407321	No upper age limit for Single Trip, will be based on individual circumstances and health. Annual policies Age limit 69 years. Pre-existing conditions considered.
Insuremore Travel Insurance 0870 054 0162	Age limit 65 years. Excess varies. Patients must be stable for 12 months and not on waiting list. Medical screening.

BOOK REVIEW

A lady called Libbie Johnson contacted us recently to say that when her partner had suffered a heart attack she was moved to write an e-book to collect up her experiences and stories of some others too. It is called "Life After A Loved One has a Heart Attack" and she is offering it for sale at £4.95 on her website here: <http://www.afteraheartattack.co.uk>

I found the opening a bit slow and it took quite a number of pages to get to the meat of the work. This could try patience but the message is there after a while. It is a personal view and very much written from a woman's perspective, a bit "Heart on Sleeve" maybe for male taste. Some medical points may not be strictly accurate, the section on medication would in my view be better left out, it is stated not to be medical advice but it comes uncomfortably close at points.

Read it if you'd like to share Libby's experiences. A portion of the fee goes to the BHF.

Bookworm

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WALKING GROUP by Judith

The walking group goes from strength to strength with ever more people joining, boosting numbers all the time. On a good day we can have over 30 walkers and ironically it is this success that has brought its own problems. We never know until the day how many people will turn up or more importantly, how many will be staying for lunch. It is getting increasingly difficult to find places that can accommodate so many people at short notice.

The only other problem we have encountered over the past twelve months has been the weather, which put paid to one or two of the winter walks and more importantly, affected the annual picnic (normally held on the same date every year). This prompted me to write the following:

We met in the New Forest had a very pleasant walk,
and ended up at a local pub for coffee and a talk.
The sky by now was cloudy with dampness on the breeze,
so we formed our picnic circle in the shadow of some trees.
We sat around in rainwear – intrepid girls and fellas,
until the downpour started and we reached for our
umbrellas.
“We must be English” someone said, “water’s trickling down my
neck.”
then Alan said “I’m going home I’ve had enough by heck.”
Earlier that morning we had packed our cars with care,
but now we scooped the whole lot up and crammed it
anywhere.
We headed home in steamed up cars as fast as we were able
And finished off our picnic lunch around the kitchen table.
By now the sun was shining in an almost cloudless sky
So we spread our soggy picnic gear out in the sun to dry.
We sat indoors and roundly cursed the English weather.
We’d played no games and made no plans for the evening
get-together.
However we’re a cheerful bunch who don’t bemoan their fate,
Just one request before next year, “PLEASE CYRIL, CHANGE
THE DATE.”

MEDICAL CLINICAL CARE GROUP

Practice Development Unit for Cardiology and Medicine



Quality Service Group Meeting

PHSG has a voice on this group representing its members. This exciting group, under the very capable chairmanship of Geoffrey Walker, OBE, Matron Cardiology and Medicine, really gets things done! Positive changes are made to hospital procedures, as a result of patient feedback given to PHSG patient representatives. All PHSG members can feed back information to Poole Hospital in complete confidence about their treatment.

So if you want to say anything good or bad about your experience in Poole Cardiac Unit, or its related departments including the ambulance service, please forward your comments.

You can contact me by e-mail (preferred), letter, or telephone. All information will be treated in strictest confidence. Looking forward to hearing from You.

In order to keep member up-to-date with some of the problem areas, the following are a few of the current points raised by members and which I have raised at the Quality Service Group Meetings.

Comment Reported

“ Noisy Waste Bins”

C4 Cranborne Ward. The Doctors and Nurses were excellent as was the treatment I received, but I do have one complaint. Noisy waste bins. It's the noise they make while trying to rest. There was an incident on my second day. As I was just drifting off, when someone must have pressed the pedal very hard, the lid came up with a loud crashing sound to be followed by an even louder crash coming down. I did see a man in a black suit fleeing down the corridor in a hurry.

Raised at meeting 15th March. Comments, some do have plastic lids or dampers but it is being looked into and will report back.

Comment Reported

“Delays on discharge”

Raised at meetings. Lot of internal work has been processed on this problem by staff in Poole I'm pleased to say I have had two members report back in one case discharge in ONE hour, second just over one hour.

Comment Reported “Concern re Cleaning”

Each time she is treated well by the staff . Its the cleaning staff which give us both more concern in A&E, there was dried blood around the rim of the bedside equipment table. In Anstey ward the patient phone line rep touched each beds equipment without wiping, before continuing to the next bed.

Raised at meeting 15th March. Comments. Very concerned and will be looked into.

Comment Reported “Electronic Service”

Why can't Poole and Bournemouth hospitals get the results of all blood test on their computers-it should be automatic no matter where the blood test is done. (This also applies to test results ie if you see a consultant and they need the results)

Raised at meeting 15th March. Comments. Will report back at next meeting but this service is not 100% up and running yet.

Please understand the above notes on the different comment reported are very much abbreviated and on most actions at the meeting the points are discussed at some length.

If you would like to add your experiences to any points raised please make contact with me so I can add them on it would help to emphasize that situation.

Looking forward to hearing from You

Jim Waine Vice President Poole Heart Support group

Jim.waine@tiscali.co.uk



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THE PRESIDENT'S TALK – February

In February, we were pleased to receive what we hope will become an annual address from our President, Dr Andrew McLeod. His talk entitled “Common Misconceptions in Heart Disease” was made to a well attended meeting in the Lecture theatre at the Post Graduate Centre in Poole Hospital.

Covering what Pacemakers can and cannot do, myths about smoking, wrong thoughts about heart attacks, observations on atrial fibrillation aspirin and warfarin there was plenty of food for thought.

Thank you Mr President, we look forward to hearing from you again next year.

How many psychiatrists does it take to change a lightbulb

Only one, but the lightbulb must really want to change...

Cardiac Rehabilitation is just like that - you really have to want to get your self right.

Recovery is a multi faceted activity

- The patient is #1
- Lifestyle change
- Smoking cessation
- Dealing with anxiety
- Work related issues
- Partner/Spouse related issues
- Medication - understanding it and taking it
- Exercise - is it safe to be short of breath?

Above are two slides from his talk, and he has elaborated on AF in his article published in this issue on page13.

**The New Meals
On Wheels!**

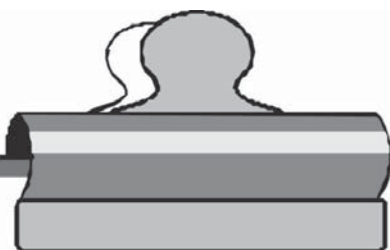
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We deliver to customers in Puddletown in the west and Corfe Mullen in the east taking in Hamworthy and Poole town centre. We offer freshly home cooked meals (chilled) 5 days a week with a frozen option for the weekend. All our meal served on china bowls and plates. Our drivers will in most cases heat the meal and make a cup of tea and while the kettles boiling have time for a chat. If you require more details in regard to our tailored personal service, please call our friendly attentive staff on 01202 692680. We will be delighted to hear from you.



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Poole Heart Support Group operates under the umbrella of the British Heart Foundation who rely on voluntary help for fund-raising events.

BHF urgently need a Treasurer- can you help please?

We also need occasional supporters for fundraising.

Please contact:
Pam Bailey BHF Rep.
4 Knighton Heath Close
Bearwood BH11 9PP.
Telephone
01202 574944

We would be pleased to hear from any members who would be prepared to play a more active role in the Poole branch of BHF. We meet once a month at Poole Hospital to plan forthcoming events.

**Volunteers wanted
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per month**



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We're there just after lunch.

If you need some information,
Exercise or walking club,
(Cyril says they ramble
and then end up at the pub!).

We distribute magazines
and sign in each new member.
We are on the go all the time
from January to December

Jan Meshier
PHSG Office Co-ordinator.