

# News around the office



### Dr. Maja Markovic

Maja recently returned from Russia where she accompanied the Under 19 Australian Women's National Basketball Team competing in the FIBA 2015 World Cup. The Gems had a very successful tournament, taking home the bronze medal.

Maja also travelled to Iceland in 2015, where she trekked the famous Landmannalaugar volcanic Iceland Highlands.



### Natasha O'Kane

Natasha travelled to New Zealand to compete for NSW in the Australasian Gaelic Football Championships.

Sponsored by St Vincent's Sportsmed, the Football team won the championships for the 4th time in a row.

Natasha also represented NSW in the Camogie championships, with another win for NSW in the final!

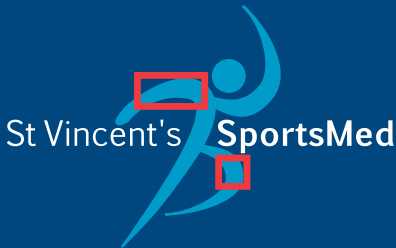
### Annika Hughes

We welcome Annika to the reception team at St Vincent's Sportsmed. With a strong background in customer service and her engaging personality, we are sure she will fit well with the Sportsmed team.



Associate Professor Simon Tan teaching arthroscopic shoulder surgery to overseas surgeons in Shanghai.

Go to [www.stvincentssportsmed.com.au](http://www.stvincentssportsmed.com.au) if you are interested in finding out more about our procedures or information regarding many sports or orthopaedic conditions.



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# St Vincent's SportsMed

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## St Vincent's Sportsmed welcomes Dr. David Samra



### St Vincent's SportsMed is delighted to welcome Sports Medicine Registrar, Dr. David Samra to the practice.

Dr David Samra is a medical doctor who is also a trained physiotherapist, having completed both degrees at the University of Sydney. Dr. Samra is currently a senior specialist registrar in the field of Sport and Exercise Medicine.

He is currently working with the Sydney Swans, having completed a 2-year fellowship with the club, as well as 3 years as a doctor for Sydney University Rugby.

### Teaching and Research

Dr Samra instructs Advanced Life Support courses for doctors, nurses and paramedics, and is actively engaged in research into innovative biological therapies such as Platelet-Rich Plasma (PRP). He has a research affiliation with the University of Sydney, and has published research on high ankle injuries and platelet-rich plasma injections.

### Services Provided

Dr Samra utilises ultrasound-guided injections for the management of difficult musculoskeletal conditions. These include:

- Corticosteroid Injections
- Platelet-rich plasma therapy
- Viscosupplementation agents including Synvisc and Durolane
- Polidocanol and Dextrose (tendon neovessel sclerotherapy)
- Saline and lignocaine trigger point injections

He works collaboratively to integrate evidence-based nutritional, environmental and exercise medicine as a part of an overall management plan to better metabolic health. Special interests include osteoarthritis and tendinopathies.

He is currently working with the Sydney Swans, having completed a 2-year fellowship with the club, as well as 3 years as a doctor for Sydney University Rugby.

# Altitude sickness

Dr. Maja Markovic

## What is Altitude Sickness?

Altitude Sickness refers to the group of illnesses due to exposure to high altitude, especially those consequent to exposure to reduced oxygen pressure, (hypobaric hypoxia). The incidence and severity of illness increases with altitude and the symptoms largely reflect the various organs response to inadequate oxygen supply. The main systems affected are the lungs and the brain.

## What are the main types of Altitude Sickness?

The commonest form is known as Acute Mountain Sickness, AMS, which is usually a benign illness occurring at altitudes beyond 2000-2500 meters. This is characterized by headache, insomnia, tiredness and mild shortness of breath and is generally self limiting, acclimatisation occurring in 2-5 days with resolution of symptoms. AMS occurs in about 40% of individuals ascending rapidly to 3000m and 75% of those rapidly ascending to 4500m.

Severe forms of altitude sickness occur at higher altitudes. High Altitude Cerebral Oedema, HACE, occurs in 1-2% of short-term travellers to 3-5000m and is characterized by progressive cerebral dysfunction, ataxia, confusion and unusual behaviour and can lead to coma and death. High Altitude Pulmonary Oedema, HAPE, occurs in 2% of climbers to 6000m and is the commonest cause of fatal altitude sickness. Symptoms include shortness of breath, a cough and blood stained sputum.

## What are the treatments for Altitude Sickness?

The treatment of all forms of altitude sickness is primarily rest, oxygen and descent. For AMS, rest, fluids and simple analgesics is usually adequate to allow acclimatisation. Sedatives should be avoided. Oxygen is occasionally required and descent considered if symptoms persist.

Dexamethasone has a role in the treatment of HACE and nifedipine is used to treat HAPE.

## Who gets Altitude Sickness?

Anybody may be at risk of altitude illnesses. Males and females of all ages are equally affected and illness occurs in children as the same in adults. However, symptoms can be harder to recognize in children. General fitness is not preventative. Having altitude illness previously, is pre-disposing to repeat illness.

## Is there prevention for Altitude Sickness?

All travellers to altitude should be warned about the potential for altitude illnesses especially AMS. Rapid ascent increases the risk, so planning itineraries with gentle ascent is helpful. Allow one night for each rise at 500m above 2000m.

Drinking plenty of water, avoiding alcohol, high carbohydrate diet and moderate exercise is helpful to assist acclimatisation. Acetazolamide can be used to speed acclimatisation in some individuals.

## Other problems with Altitude

Ultra violet injuries (sunburn), occur as well as cold injuries. Thrombosis of the legs occurs at higher rates. Accidents are more common. Retinopathies can occur at very high altitudes.

## Who should not go to Altitude?

The only major medical problems that would be severely compromised by exposure to altitude are individuals with moderate to severe chronic obstructive airway disease, those with congestive cardiac failure, those with pulmonary hypertension and individuals with sickle-cell anaemia.

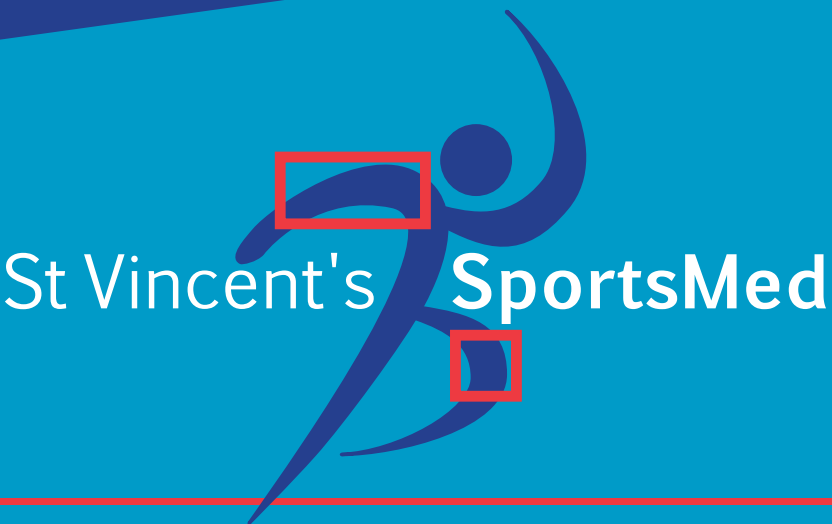
Care should be taken by individuals with epilepsy, underlying arrhythmias or severe sleep-apnoea.

Pregnant woman should not ascend beyond 3500m. Asthma, diabetes, old age or previous cardiac bypass surgery are not contra-indications to going to altitude.



### Altitude Sickness - Travellers Rules

- Climb High, Sleep Low.
- Better to walk than fly to >3000m.
- If you are unwell, assume it is AMS until proven otherwise.
- If you have AMS symptoms, don't go higher.
- If you feel unwell and are unsteady of gait, descend.
- Anyone with symptoms of AMS must be accompanied.



## specialises in:

- Arthroscopy
- Sports Medicine
- Knee Ligament reconstruction
- Shoulder Reconstruction
- Meniscal/cartilage repairs
- Orthopaedic Trauma

# Research and Education

The doctors of St Vincent's Sportsmed remain committed to teaching on all levels. They continue to learn and grow in their own knowledge through research projects and high-level conferences. They also share their expertise and time in the teaching of other medical professionals.

This year, Sportsmed welcomes its new Orthopaedic fellow, Dr. Dante Valenzuela. Dr. Valenzuela is a trained orthopaedic surgeon from the Philippines who has come to St Vincent's Sportsmed to study and conduct research with A/Professor Simon Tan and Dr. Warren Kuo. He will be involved with ongoing research projects and will refine his skills in sports arthroscopic surgery over the next 6 months.

St Vincent's Sportsmed has also become an accredited training provider for the College of Sports Physicians. This year we welcome our first sports medicine registrar, Dr. David Samra. Dr. Samra will consult twice a week at St Vincent's Sportsmed.

Medical students from the University of Notre Dame will still continue to rotate through St Vincent's Sportsmed and will spend time learning about orthopaedics and sports medicine.

A/Professor Tan continues his role as head of orthopaedic training at St Vincent's Hospital and Dr. Kuo continues as head of training at Nepean hospital.

# Working in the community

## Dr. Sarah Hornery

St Vincent's SportsMed and the local Hornsby community have continued to supply the Hornsby women's shelter throughout the year. Regular collections of pantry items and toiletries have kept the shelter stocked all year. The shelter continues to play an important role in the local community. St Vincent's Sportsmed will continue to support the local women's shelter throughout 2016.

