Good Old Health

A teaching resource to help non-English-speaking carers and elderly residents understand age-related health issues
An initiative of the Multicultural Health Service
in partnership with The Carers’ Program
Sydney Local Health District
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Methodology and Teacher notes</td>
<td>2</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>3</td>
</tr>
<tr>
<td>Unit 1: Depression in older people</td>
<td>4</td>
</tr>
<tr>
<td>Unit 2: Osteoporosis</td>
<td>10</td>
</tr>
<tr>
<td>Unit 3: Dementia</td>
<td>15</td>
</tr>
<tr>
<td>Unit 4: Urinary tract infections</td>
<td>19</td>
</tr>
<tr>
<td>Unit 5: Incontinence</td>
<td>25</td>
</tr>
<tr>
<td>Unit 6: Blood pressure and hypertension</td>
<td>32</td>
</tr>
<tr>
<td>Unit 7: Cholesterol</td>
<td>37</td>
</tr>
<tr>
<td>Unit 8: Arthritis</td>
<td>41</td>
</tr>
<tr>
<td>Unit 9: Reflux</td>
<td>45</td>
</tr>
<tr>
<td>Unit 10: Back pain</td>
<td>49</td>
</tr>
<tr>
<td>Unit 11: Healthy eating</td>
<td>55</td>
</tr>
<tr>
<td>Unit 12: Foot care</td>
<td>59</td>
</tr>
</tbody>
</table>
Introduction

It is estimated that by 2056 one in four people living in Australia will be over the age of 65 and 1.8 million will be over 85.¹

Given this statistic, the importance of promoting and maintaining good health in our elderly population is essential. Our ageing population also has major implications for the provision of informal care. There is a strong likelihood that the burden of caring will increasingly fall on our elderly, with co-caring (family members providing care for each other) becoming the norm.

In NSW there are already 857,200 carers – 12 per cent of the NSW population. There are 2.7 million carers Australia-wide.² We already know that the demand for informal carers is increasing and the supply decreasing as more women join the workforce and people nearing retirement either choose to continue working or feel forced to do so through economic necessity.

Parallel and current concerns about health literacy levels in our English-speaking population emphasise the need for health literacy to also be addressed among our cultural and linguistically diverse residents. Assistance and resources will help both ageing residents, people in the aged care industry and ageing carers to increase their competence and confidence in understanding and managing their health and the health of those they care for, as they age.

*Good Old Health* is about providing non-English speaking carers and elderly residents with resources, language and skills to communicate with doctors and other health staff.

Angela Manson
Manager, Multicultural Health Service, Community Health, SLHD

Tony Phiskie
Manager, The Carers’ Program, SLHD

¹ COTA.
² Taken from Carers NSW website, citing Survey of Disability, Ageing and Carers 2012.
Methodology

The health topics developed into lessons in *Good Old Health* are age-related health issues. Consultations were conducted with the District’s Aged Care and Rehabilitation Service, Multicultural Health Workers, English as a Second Language (ESL) providers and carers’ groups. The material has been technically reviewed by experts in the relevant health field. The lessons have been piloted and evaluated with ESL teachers and students.

Teacher notes

This resource seeks to improve the health literacy of carers and aged residents particularly in relation to aged-related illnesses. Each section begins with vocabulary and related activities dealing with key terminology and a description of symptoms and problems. This is followed by listening practice featuring short exchanges between health workers and patients or carers. These can also be applied to speaking practice and provide basic models for health worker and patient interactions. Sound files for listening exercises can be downloaded for each section. Further content includes tasks that frame advice for preventive health strategies and treatment, information and contact details of relevant services.

Copies of the resource can be made by teachers but no changes can be made to the content.

For further information please contact: Multicultural Health Service on 9562 0500.
Acknowledgements

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In partnership with:

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Images for *Good Old Health* were sourced from [www.freedigitalphotos.net](http://www.freedigitalphotos.net)
Unit 1: Depression in older people

1 Definition

Depression in adults over 65 years is sometimes difficult to recognise, as the symptoms are often similar to the problems of ageing but depression is not a normal part of ageing.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Word</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>chronic</td>
<td>not able to sleep</td>
</tr>
<tr>
<td>insomnia</td>
<td>a legal document in which a person names who will have his/her possessions after he/she has died</td>
</tr>
<tr>
<td>constipation</td>
<td>keeping too many possessions, often in secret</td>
</tr>
<tr>
<td>will</td>
<td>when stools (slang: poo) are passed less often and are hard and dry</td>
</tr>
<tr>
<td>hoarding</td>
<td>continuing for a long time</td>
</tr>
<tr>
<td>firearms</td>
<td>health worker who studies how humans think and behave</td>
</tr>
<tr>
<td>cholesterol</td>
<td>guns</td>
</tr>
<tr>
<td>remember</td>
<td>a spinning head and to feel like falling</td>
</tr>
<tr>
<td>dizzy</td>
<td>think of again</td>
</tr>
<tr>
<td>shoplifting</td>
<td>a waxy fat-like substance that is made by the liver</td>
</tr>
<tr>
<td>psychologist</td>
<td>taking things from a shop without paying</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Word</th>
</tr>
</thead>
<tbody>
<tr>
<td>chronic</td>
</tr>
<tr>
<td>insomnia</td>
</tr>
<tr>
<td>constipation</td>
</tr>
<tr>
<td>hoarding</td>
</tr>
<tr>
<td>will</td>
</tr>
<tr>
<td>firearms</td>
</tr>
<tr>
<td>----------</td>
</tr>
</tbody>
</table>

### 2.3 Put possible causes of depression in correct category (some fit into two categories)

Loss of home – loss of lifestyle – no close family – loss of culture – pain from arthritis – not able to join in the local community – death of friends and family – no longer independent – no longer healthy

<table>
<thead>
<tr>
<th>physical ill-health</th>
<th>loneliness and isolation</th>
<th>loss</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

### 3 What’s the problem?

#### 3.1 Talking to the doctor

**Listening 1: Audio** Write the dialogue number next to the correct topic

**Topics:**

- ___ can’t remember
- ___ wife has strange behaviour
- ___ father depressed
- ___ aching and insomnia
1
Psychologist: Good morning – how are you today?
Elderly patient: I feel like I am aching all over.
Psychologist: That is terrible – anything else?
Elderly patient: Yes, I can’t sleep.

2
Doctor: Hi, how are you feeling today?
Patient: Well actually I am dizzy and losing a lot of weight.
Doctor: Do you have any idea why this is happening?
Patient: Not really because I can’t remember anything.

3
Carer: Hi doctor, I am worried about my old dad.
Doctor: Why are you worried?
Carer: He won’t leave home and he won’t eat.
Doctor: Oh dear that’s not good, he might be depressed.

4
Doctor: Good morning, how are things going?
Carer: Actually not very well. My wife is behaving quite strangely.
Doctor: OK, what is she doing?
Carer: She keeps things from her childhood even though we are trying to clean out the house and is always talking about changing her will.
Doctor: OK. Anything else?
Carer: Yes . . . she has been shoplifting.

5
Doctor: Good morning, how are things?
Carer: Not good. My husband is drinking a lot and gave away his car.
Doctor: That is worrying.
Carer: Also doctor . . . he is suddenly interested in firearms and talks about death all the time.

Listening 2: Audio Listen again and fill in the gaps

1
Psychologist: Good morning – how are you today?
Elderly patient: I feel like I am ______ all over.
Psychologist: That is terrible – anything else?
Elderly patient: Yes, I can’t sleep.

2
Doctor: Hi, how are you feeling today?
Patient: Well ______ I am dizzy and losing a lot of weight.
Doctor: Do you have any ______ why this is happening?
Patient: Not really because I can’t remember anything.
3
Carer: Hi doctor, I am worried about my old dad.
Doctor: Why are you ____?
Carer: He won’t leave home and he won’t eat.
Doctor: Oh dear that’s not good, he might be ____.

4
Doctor: Good morning, how are things going?
Carer: Actually not very well. My wife is ____ quite strangely.
Doctor: OK, what is she doing?
Carer: She keeps things from her ____ even though we are trying to clean out the house and is always talking about changing her will.
Doctor: OK. Anything else?
Carer: Yes . . . she has been ____.

5
Doctor: Good morning, how are things?
Carer: Not good. My ____ is drinking a lot and gave away his car.
Doctor: That is worrying.
Carer: Also doctor . . . he is suddenly interested in firearms and talks about ____ all the time.

4 Looking after your health

4.1 Preventive health strategies: Circle yes if it is a good strategy and no if it is not a good strategy to promote good mental health

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>reduce blood pressure</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>stop cigarette smoking</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>reduce cholesterol</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>decrease physical exercise</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>maintain appropriate weight</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>eat fish, grains and greens</td>
<td>yes</td>
<td>no</td>
</tr>
</tbody>
</table>

4.2 Talking to the doctor

Listening 3: Audio Write the dialogue number next to the correct topic

Topics:
_____ lose weight
_____ blood pressure check
cholesterol check
more exercise
stop smoking
eat healthy food

6
Carer: How can I help my husband feel happier?
Doctor: Does he smoke?
Carer: Yes.
Doctor: Encourage him to stop smoking.
Carer: I will try – what else can I do?
Doctor: Bring him to have his blood pressure and cholesterol checked.
Carer: OK, I will make an appointment.

7
Doctor: Your elderly mother must do more exercise.
Carer: Why?
Doctor: This will make her feel more cheerful especially if she does it while socialising. It may also help her lose weight. Is she eating healthy food?
Carer: What do you mean?
Doctor: She should be eating fish, grains and vegetables.

Listening 4: Listen again and fill in the gaps

6
Carer: How can I help my ______ feel happier?
Doctor: Does he smoke?
Carer: Yes.
Doctor: Encourage him to stop ______.
Carer: I will try – what else can I do?
Doctor: Bring him to have his blood pressure and cholesterol checked.
Carer: OK, I will ______ an appointment.

7
Doctor: Your ______ mother must do more exercise.
Carer: Why?
Doctor: This will make her ______ more cheerful especially if she does it while socialising. It may also help her lose weight. Is she eating healthy food?
Carer: What do you mean?
Doctor: She should be eating fish, ______ and vegetables.
5 Find out more

beyondblue
www.beyondblue.org.au
Lifeline call 13 11 14

Black Dog Institute
www.blackdoginstitute.org.au
Suicideline: 1300 651 251

This Way Up Clinic
https://thiswayupclinic.org

mindhealthconnect
www.mindhealthconnect.org.au

myCompass
www.mycompass.org.au

MindSpot Clinic
www.mindspot.org.au

MoodGYM
https://moodgym.anu.edu.au

NSW Multicultural Health Communication Service
www.mhcs.health.nsw.gov.au

NSW Mental Health Crisis Line
Call 1800 011 511

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 2: Osteoporosis

1 Definition

Osteoporosis develops when bone density decreases, leading to fragile, brittle bones that can be easily fractured. (www.bodyandsoul.com.au)

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Word</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>fracture</td>
<td>thickness</td>
</tr>
<tr>
<td>density</td>
<td>easily broken</td>
</tr>
<tr>
<td>fragile</td>
<td>easily broken</td>
</tr>
<tr>
<td>calcium</td>
<td>break</td>
</tr>
<tr>
<td>brittle</td>
<td>an important mineral which makes bones strong</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

fracture
density
fragile
brittle
calcium

3 Risk factors for developing osteoporosis

People have a higher risk of developing osteoporosis if they have many risk factors. Risk factors are put into two groups: those that can be changed and those that can’t be changed.

Choose the risk factor from the list below and put in the correct columns, i.e. if it is a risk factor that can be changed or a risk factor that can’t be changed.

- being a female aged late 40s to early 50s
- a family history of osteoporosis and fractures
• poor diet – low in calcium
• lack of vitamin D
• smoking
• drinking more than two standard drinks of alcohol per day
• early menopause
• lack of exercise
• taking some medications for a long time

<table>
<thead>
<tr>
<th>risk factors you can change</th>
<th>risk factors you can't change</th>
</tr>
</thead>
</table>

4 Looking after your health

4.1 Match the words to the correct pictures

| stop smoking | 1 |
| regular exercise – especially bone-strengthening forms | 2 |
| limiting alcohol | 3 |
| increasing your exposure to the sun to boost vitamin D | 4 |
| eating a healthy diet rich in calcium | 5 |
4.2 Talking to the health worker

Listening 1: Write the dialogue number next to the correct topic

Topics:

1. how to strengthen bones?
2. osteoporosis risk factors
3. what food provides calcium?
4. how much sunshine do I need?

1
Health worker: Good morning – how can I help you today?
Elderly woman: I am worried because I think I will develop osteoporosis.
Health worker: Why do you think that?
Elderly woman: Two reasons. My mother had it and she broke both her hips and I am 40 and have passed menopause already.
Health worker: Yes, you do have the risk factors for osteoporosis but there are things you can do to prevent it.

2
Health worker: Good morning – how are you today?
Patient: OK but I need advice. I have heard that exposure to sunshine is good if I want to avoid getting osteoporosis. How much sun do I need?
Health worker: Good question. You are right, you do need sunshine to get vitamin D. In summer, six to eight minutes a day on most days. In winter, it should be half an hour most days. You need to have only 15 per cent of your body exposed – arms, hands and face – to get this exposure. Dark-skinned people need up to six times more.
Patient: OK but I am afraid I will get skin cancer.
Health worker: Everyone should use sunscreens and wear sun-protective clothing at times of peak sun exposure. You shouldn’t be exposed between 10 am and 2 pm. And don’t get sunburnt.

3
Health worker: Good morning.
Carer: Hi, I think my dad needs to do more exercise to keep healthy.
Health worker: Yes, exercise is important for good health.
Carer: OK but please tell me which exercise is best to keep his bones strong.
Health worker: Weight-lifting will help him to keep his bones strong.

4
Health worker: Good morning – how can I help you?
Elderly woman: Please tell me, I know I need to eat calcium because I am post-menopausal. Which food has calcium?
Health worker: Milk, yogurt and cheese are the main sources of calcium.
Elderly woman: OK, thanks. Anything else – which vegetables provide calcium?
Health worker: Broccoli, Chinese cabbage and grains all contain calcium.
Listening 2: Listen again and fill in the gaps

1
Health worker: Good _____ – how can I help you today?
Elderly woman: I am worried because I think I may _____ osteoporosis.
Health worker: Why do you think that?
Elderly woman: Two reasons. My mother had it and she broke both her ____ and I am 40 and have passed ____ already.
Health worker: Yes, you do have the ____ factors for osteoporosis but there are things you can do to prevent it.

2
Health worker: Good morning – how are you today?
Patient: OK but I need advice. I have heard that exposure to ____ is good if I want to avoid getting osteoporosis. How much sun do I need?
Health worker: Good question. You are right, you do need sunshine get vitamin D. In _____, six to eight minutes a day on most days. In winter, it should be half an hour most days. You need to have only 15 per cent of your body _____ – arms, hands and face – to get this exposure. Dark-skinned ____ may need up to six times more.
Patient: OK but I am afraid I will get skin cancer.
Health worker: Everyone should use ____ and wear sun-protective clothing at times of peak sun ____. You shouldn’t be exposed between 10 am and 2 pm. And don’t get sunburnt.

3
Health worker: Good morning.
Elderly man: Hi, I think my dad needs to do more ____ to keep healthy.
Health worker: Yes, exercise is important for good health.
Elderly man: OK but please tell me which exercise is best to keep his ____ strong.
Health worker: Weight-lifting will help him to keep his bones strong.

4
Health worker: Good morning – how can I help you?
Elderly woman: Please tell me, I know I need to ____ because I am post-menopausal. Which food has calcium?
Health worker: Milk, yogurt and ____ are the main sources of calcium.
Elderly woman: OK, thanks. Anything else – which ____ provide calcium?
Health worker: Broccoli, Chinese cabbage and grains all contain calcium.
5 Find out more

Osteoporosis Australia
www.osteoporosis.org.au (search on ‘translated fact sheets’)

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 3: Dementia

1 Definition

Dementia describes the symptoms of a number of illnesses that affect the brain. The most common cause is Alzheimer’s disease.

2 Vocabularly

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Memory Loss</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Memory Loss</td>
<td>No feeling or emotion</td>
</tr>
<tr>
<td>Confusion</td>
<td>Thoughts, feelings and behaviours that make a person unique</td>
</tr>
<tr>
<td>Personality</td>
<td>Not able to think as clearly or quickly as you normally do</td>
</tr>
<tr>
<td>Apathy</td>
<td>Unusual forgetfulness</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Skill to be able to do something</td>
</tr>
<tr>
<td>Behaviour</td>
<td>Common form of dementia</td>
</tr>
<tr>
<td>Ability</td>
<td>Not being involved</td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td>The way a person acts</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Memory Loss</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Confusion</td>
<td></td>
</tr>
<tr>
<td>Personality</td>
<td></td>
</tr>
<tr>
<td>Apathy</td>
<td></td>
</tr>
<tr>
<td>Withdrawal</td>
<td></td>
</tr>
<tr>
<td>Behaviour</td>
<td></td>
</tr>
<tr>
<td>Ability</td>
<td></td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td></td>
</tr>
</tbody>
</table>
3 Early symptoms of dementia

The early symptoms of dementia are subtle and may not be immediately obvious.

3.1 Match the common early symptoms of dementia with what the person is saying

<table>
<thead>
<tr>
<th>progressive and frequent memory loss mainly for things that happened recently</th>
<th>‘my old father is so bad-tempered now – he was always very cheerful before’</th>
</tr>
</thead>
<tbody>
<tr>
<td>confusion</td>
<td>‘my mum’s memory is getting worse and worse’</td>
</tr>
<tr>
<td>personality changes and behaviour changes</td>
<td>‘my old mum can’t even make a cup of tea anymore’</td>
</tr>
<tr>
<td>loss of ability to perform everyday tasks</td>
<td>‘my grandfather never knows what day it is’</td>
</tr>
</tbody>
</table>

3.2 Talking to the doctor

Listening 1: Write the dialogue number next to the correct topic

Topics:
  ____ progressive and frequent memory loss
  ____ confusion
  ____ personality changes and behaviour changes
  ____ loss of ability to perform everyday tasks

1
**Doctor:** Good morning. How are things going?
**Carer:** Not very well really, doctor.
**Doctor:** Why not?
**Carer:** My husband who has dementia is becoming aggressive towards me.

2
**Doctor:** Hi, how are you managing?
**Carer:** I am doing my best to look after my husband but . . .
**Doctor:** Is there a problem?
**Carer:** Yes, my husband can’t even shave now – he doesn’t seem to know what to do with a razor.

3
**Doctor:** Hello, I hope you are looking after yourself as well as your wife.
**Carer:** When I have time, yes – but my wife is so forgetful.
**Doctor:** Is this a problem?
**Carer:** Yes, she lets the porridge boil dry almost every day. She is ruining all our saucepans.
4

Doctor: Good morning. How are you today?
Young woman: A bit worried, actually.
Doctor: Why are you worried?
Young women: Sometimes my father is so confused. Yesterday he thought I was my mother-in-law. She died 10 years ago.

Listening 2: Listen again and fill in the gaps

1
Doctor: Good ____. How are things going?
Carer: Not very well really, doctor.
Doctor: Why not?
Carer: My husband who has ____ is becoming aggressive towards me.

2
Doctor: Hi, how are you managing?
Carer: I am doing my ____ to look after my husband but . . .
Doctor: Is there a problem?
Carer: Yes, my husband can’t even ____ now – he doesn’t seem to know what to do with a razor.

3
Doctor: Hello, I hope you are ____ after yourself as well as your wife.
Carer: When I have time, yes – but my wife is so forgetful.
Doctor: Is this a problem?
Carer: Yes, she lets the porridge ____ dry almost every day. She is ruining all our saucepans.

4
Doctor: Good morning. How are you today?
Young woman: A bit worried, actually.
Doctor: Why are you ____?
Young woman: Sometimes my father is so confused. Yesterday he thought I was my ____-in-law. She died 10 years ago.

4 Looking after your health

At present, there is no prevention or cure for most forms of dementia. Support is vital for people with dementia, and the help of families, friends and support services/care workers can make a positive difference to managing the condition.

The earlier help is found, the better the family and person with the condition will be able to manage and cope.

It is important to follow the advice below
4.1 Match the advice in column 1 with the advice that means the same in column 2

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td><strong>2</strong></td>
</tr>
<tr>
<td>ask for medical advice</td>
<td>while the person with dementia can still legally sign documents, get enduring powers of attorney to manage financial affairs, medical decisions and guardianship</td>
</tr>
<tr>
<td>put the affairs of the person with dementia in order</td>
<td>be informed and so have more control</td>
</tr>
<tr>
<td>organise practical help</td>
<td>ask the doctor what a diagnosis of dementia means and how you can help the person</td>
</tr>
<tr>
<td>get information – find out about dementia and what is going to happen to the person</td>
<td>set up help in the home, respite care, day trips and stays at day centres</td>
</tr>
</tbody>
</table>

5 Find out more

Alzheimer’s Australia  
[www.fightdementia.org.au](http://www.fightdementia.org.au)

My Aged Care (Australian Government information site)  
[www.myagedcare.gov.au](http://www.myagedcare.gov.au)  
Call 1800 200 422

Commonwealth Respite Centres (Australian Government)  
24-hour service  
Call 1800 052 222

National Dementia Helpline 24-hour service (users who are deaf or have a hearing or speech impairment can phone the National Relay Service on 133677)  
Call 1800 100 500

Dementia Behaviour Management Advisory Service (DBMAS)  
Call 1800 699 799 for 24-hour service

Carers NSW  
[www.carersnsw.org.au](http://www.carersnsw.org.au)  
Freecall: 1800 242 636

Carers Australia  
Freecall: 1800 242 636

Get Healthy  
Call 1300 806 258

NSW Multicultural Health Communication Service  

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 4: Urinary tract infections

1 Definition

Urinary tract infections (UTIs) are very common in the elderly. Infection can target the urethra, bladder or kidneys. The doctor may prescribe antibiotics to treat them.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>bladder</th>
<th>two kidneys, ureters, the bladder and the urethra</th>
</tr>
</thead>
<tbody>
<tr>
<td>infection</td>
<td>one of the bones of the pelvis</td>
</tr>
<tr>
<td>urinary tract</td>
<td>it stores urine from the kidneys</td>
</tr>
<tr>
<td>pubic bone</td>
<td>germs that enter a weak part in the body and multiply and cause disease</td>
</tr>
<tr>
<td>thrush</td>
<td>between the lower ribs and pelvis</td>
</tr>
<tr>
<td>urine</td>
<td>a drug that stops some kinds of infections</td>
</tr>
<tr>
<td>antibiotic</td>
<td>tube used to drain urine</td>
</tr>
<tr>
<td>catheter</td>
<td>fluid excreted from bladder (slang: pee)</td>
</tr>
<tr>
<td>loin</td>
<td>a type of infection</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>bladder</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>infection</td>
<td></td>
</tr>
<tr>
<td>urinary tract</td>
<td></td>
</tr>
<tr>
<td>pubic bone</td>
<td></td>
</tr>
<tr>
<td>thrush</td>
<td></td>
</tr>
<tr>
<td>urine</td>
<td></td>
</tr>
<tr>
<td>antibiotic</td>
<td></td>
</tr>
<tr>
<td>catheter</td>
<td></td>
</tr>
<tr>
<td>loin</td>
<td></td>
</tr>
</tbody>
</table>
3 Risk factors for developing UTIs

Some people are at greater risk than others of developing UTIs.

3.1 Match the types of people who are at greater risk of developing UTIs with the correct reason

<table>
<thead>
<tr>
<th>people with catheters</th>
<th>a swollen prostate gland makes it difficult for men to empty their bladders</th>
</tr>
</thead>
<tbody>
<tr>
<td>people with diabetes</td>
<td>people who can’t empty their own bladder so must use a tube</td>
</tr>
<tr>
<td>men with prostate problems</td>
<td>diabetics get infections more often</td>
</tr>
</tbody>
</table>

4 Symptoms of UTI

4.1 Talking to the doctor

Listening 1: Audio Write the dialogue number next to the correct topic

Topics:

_____ blood in urine
_____ wanting to use the toilet too often
_____ pain above the pubic bone

1
Doctor: Good morning. How are you today?
Patient: Not well, actually. I feel like I want to go to the toilet all the time.
Doctor: Right. And is it OK when you go?
Patient: No, when I go it’s only a few drops, and it really burns.
Doctor: Sorry to hear that.

2
Doctor: How can I help you this morning?
Patient: When I go to the toilet I still feel full – like I want to go again but I can’t.
Doctor: And is there any pain?
Patient: Yes, there is pain just above my pubic bone.
Doctor: OK, you may have an infection.

3
Patient: I am worried because I have blood in my urine.
Doctor: OK. Anything else?
Patient: Well, when I go to the toilet it still feels very painful.
Doctor: Right, I will see if I can help you.
Listening 2: Listen again and fill in the gaps

1
Doctor: Good ____. How are you today?
Patient: Not well, actually. I feel like I want to go to the ____ all the time.
Doctor: Right. And is it OK when you go?
Patient: No, when I go it’s only a few ____ and it really burns.
Doctor: Sorry to hear that.

2
Doctor: How can I help you this morning?
Patient: When I go to the toilet I still feel full – like I ____ to go again but I can’t.
Doctor: And is there any pain?
Patient: Yes, there is pain just ____ my pubic bone.
Doctor: OK, you may have an infection.

3
Patient: I am worried because I have ____ in my urine.
Doctor: OK. Anything else?
Patient: Well, when I go to the toilet it still ____ very painful.
Doctor: Right, I will see if I can help you.

Listening 3: Write the dialogue number next to the correct topic

Topics:
_____ pain in loin and back
_____ feeling hot and shivering

4
Doctor: Good morning. How are you today?
Patient: Not well, actually. I feel like I want to go to the toilet all the time.
Doctor: Right. And is it OK when you go?
Patient: No, when I go it’s only a few drops, and it really burns.
Doctor: Oh dear – is there anything else I should know about?
Patient: Also, I feel very hot yet I’m shivering.
Doctor: You may have a kidney infection – so it is good you came to see me.

5
Patient: I am worried because I have blood in my urine
Doctor: Yes, we will have to check this out. Anything else?
Patient: Well, when I urinate it feels very painful.
Doctor: OK, I will see if I can help you.
Patient: Also, doctor, I have pain here in my loin and back.
Doctor: These are the symptoms of a kidney infection – I am glad you came to see me.

UTIs may develop into kidney infections if they are not treated
Listening 4: Listen again and fill in the gaps

4
Doctor: Good morning. How you today?
Patient: Not well, actually. I feel like I want to go to the _____ all the time.
Doctor: Right. And is it OK when you go?
Patient: No, when I go it’s only a few ____ and it really burns.
Doctor: Oh dear – is there anything else I should know about?
Patient: Also, I feel very hot yet I’m ____.
Doctor: You may have a kidney infection – so it is good you came to see me.

5
Patient: I am worried because I have blood in my urine.
Doctor: Yes, we will have to check this out. Anything else?
Patient: Well, when I urinate it feels very ____.
Doctor: OK, I will see if I can help you.
Patient: Also, doctor, I have ____ here in my loin and back.
Doctor: These are the symptoms of a kidney ____ – I am glad you came to see me.

5 Looking after your health

5.1 Talking to the doctor

Listening 5: Write the dialogue number next to the correct topic

Topics:
____ don’t delay going to the toilet
____ drinking plenty of water
____ good hygiene
____ thrush

6
Doctor: How is your elderly father at the moment?
Carer: OK at the moment but can you tell me how to help him to avoid getting a UTI?
Doctor: Yes, he must make sure he drinks plenty of water and this will flush out the urinary system.
Carer: OK, I will do that.

7
Doctor: So how can I help this afternoon?
Elderly woman: Well, my sister and I keep getting UTIs – how can I avoid it and help her to avoid it?
Doctor: Practise good hygiene.
Elderly woman: But what does that mean?
Doctor: Wipe yourself from front to back when you use toilet paper and wash your hands after using the toilet.
Elderly woman: OK, that makes it clearer. Thanks.
8
**Elderly man:** I know it’s good to drink plenty of water but then I want to use the toilet more frequently.
**Doctor:** Drinking enough water will help keep your bladder healthy.
**Elderly man:** Right, OK.
**Doctor:** This will help you avoid developing a UTI.

9
**Elderly woman:** I think I may have thrush.
**Doctor:** OK, I will check it for you.
**Elderly woman:** Thanks, doctor.
**Doctor:** You are right to come to see me as soon as you have any vaginal infection – then we can stop it spreading to become a UTI.

**Listening 6: Audio** Listen again and fill in the gaps

6
**Doctor:** How is your elderly father at the moment?
**Carer:** OK at the _____ but can you tell me how to help him to avoid getting a _____?
**Doctor:** Yes, he must make sure he drinks plenty of water and this will flush out the urinary _____.
**Carer:** OK, I will do that.

7
**Doctor:** So how can I help this afternoon?
**Elderly woman:** Well, my _____ and I keep getting UTIs – how can I avoid it and help her to avoid it?
**Doctor:** Practise _____ hygiene.
**Elderly woman:** But what does that mean?
**Doctor:** Wipe yourself from front to back when you use toilet _____ and wash your hands after using the toilet.
**Elderly woman:** OK, that makes it clearer. Thanks.

8
**Elderly man:** I know it’s good to drink plenty of water but then I want to use the toilet more frequently.
**Doctor:** Drinking enough water will help keep your bladder healthy.
**Elderly man:** Right, OK.
**Doctor:** This will help you _____ developing a UTI.

9
**Elderly woman:** I think I may have thrush.
**Doctor:** OK, I will _____ it for you.
**Elderly woman:** Thanks, doctor.
**Doctor:** You are right to come to see me as soon as you have any vaginal _____ – then we can stop it spreading to become a UTI.
6 Find out more

Kidney Health Australia Information Line
Call 1800 454 363

Continence Foundation of Australia
NSW Resource Centre
www.continencensw.org.au
Call 8741 5699

Continence Helpline
Call 1800 330 066

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

Talk to your doctor.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 5: Incontinence

1 Definition

Incontinence is any accidental or involuntary loss of urine from the bladder (urinary incontinence) or bowel motion, faeces from the bowel (faecal or bowel incontinence).

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Word</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>faeces</td>
<td>part of the urinary system – it stores urine from the kidneys</td>
</tr>
<tr>
<td>bladder</td>
<td>to dirty with faeces</td>
</tr>
<tr>
<td>wind</td>
<td>when faeces (slang: poo) comes out of the anus less often and is hard and dry</td>
</tr>
<tr>
<td>constipation</td>
<td>gas which comes out of the anus</td>
</tr>
<tr>
<td>soil</td>
<td>waste from the body that comes out through the anus (slang: poo)</td>
</tr>
<tr>
<td>bowel</td>
<td>watery, yellowish fluid which is released from the bladder</td>
</tr>
<tr>
<td>strain</td>
<td>part of the large intestine</td>
</tr>
<tr>
<td>urine</td>
<td>force muscles</td>
</tr>
<tr>
<td>leak</td>
<td>muscular tube from the stomach to the anus</td>
</tr>
<tr>
<td>intestines</td>
<td>accidental loss</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

faeces
bladder
wind
constipation
soil
bowel
strain
3 What’s the problem?

3.1 Talking to the doctor

Listening 1: Write the number of the statement next to the correct topic

Topics:

____ leaking
____ straining
____ leaking when dancing
____ not fully emptying bladder
____ leaking when changing position
____ rushing to the toilet
____ waking up in the night
____ soiling
____ planning routine around toilets
____ losing control
____ leaking when lifting

1 Patient: I sometimes feel I have not fully emptied my bladder.

2 Patient: I have to rush to use the toilet.

3 Patient: I am frequently nervous because I think I might lose control of my bladder or bowel.

4 Carer: My mother wakes up twice or more during the night to go to the toilet.

5 Patient: Sometimes I leak before I get to the toilet.

6 Patient: Sometimes I leak when I lift something heavy.
Patient: Sometimes I leak when I dance or play sport.

Patient: Sometimes I leak when I change from a seated or lying position to a standing position.

Patient: I strain to empty my bowels.

Carer: Sometimes my husband soils his underwear.

Carer: I plan my father’s daily routine around where the nearest toilet is.

Listening 2: Audio Listen again and fill in the gaps

1 Patient: I sometimes feel I have not ____ emptied my bladder.

2 Patient: I have to rush to ____ the toilet.

3 Patient: I am frequently nervous because I think I might lose control of my ____ or bowel.

4 Carer: My mother wakes up twice or more during the ____ to go to the toilet.

5 Patient: Sometimes I ____ before I get to the toilet.

6 Patient: Sometimes I leak when I lift ____ heavy.

7 Patient: Sometimes I leak when I ____ or play sport.

8 Patient: Sometimes I leak when I change from a seated or lying position to a ____ position.

9 Patient: I strain to ____ my bowels.

10 Carer: Sometimes my husband ____ his underwear.

11 Carer: I plan my father’s daily routine around where the nearest ____ is.
4 Looking after your health

4.1 Put each strategy for preventing incontinence in the correct category

<table>
<thead>
<tr>
<th>a healthy diet</th>
<th>good toilet habits</th>
<th>other strategies</th>
<th>drink well</th>
</tr>
</thead>
</table>

- eat nuts and seeds
- exercise pelvic floor muscles regularly
- open bowels
- eat vegetables
- avoid constipation
- eat legumes
- don’t get into the habit of going to the toilet ‘just in case’ – only go when you need to
- drink six to eight cups of water a day
- exercise for 30 minutes most days
- spread drinks evenly throughout the day
- be active
- drink more fluids (preferably water) if the weather is hot or if exercising
- cut down on alcohol, fizzy drinks and drinks which have caffeine
- eat cereals and cereal products, and fruit
- stop smoking
- eat multi-grain or whole-grain breads
- do not be overweight
4.2 Talking to the doctor

Listening 3: Audio Write the dialogue number next to the correct topic

Topics:

_____ a healthy diet
_____ good toilet habits
_____ how to remain positive
_____ how to drink well

1
Carer: Can you advise me on how to prevent my father becoming incontinent?
Doctor: Yes, make sure he drinks well.
Carer: Can you please explain what you mean?
Doctor: He must aim to drink six to eight cups of water or liquids a day. He must drink regularly throughout the day and drink more fluids – water is best – if the weather is hot or if he is exercising. He must cut down on alcohol, fizzy drinks and drinks that have caffeine in them as they irritate the bladder.
Carer: OK, thanks. That helps a lot.
Doctor: One more thing. Don’t let him drink less if he has a bladder control problem, as this will concentrate his urine and make the problem worse.

2
Carer: Can you tell me what my husband should be eating to keep healthy and help his incontinence?
Doctor: He must eat a healthy diet.
Carer: What is a healthy diet?
Doctor: Plenty of fibre. Fibre is in foods such as multi-grain or whole-grain breads, cereals and cereal products, fruit, vegetables, legumes, nuts and seeds. Eat two servings of fruit, five servings of vegetables and five servings of cereals and breads each day.
Carer: OK. Anything else?
Doctor: Yes, a high-fibre diet means he needs to drink plenty of fluid as the fibre needs water in order to bulk up his stools.

3
Carer: I am caring for my wife – how can I help her remain positive especially since she has incontinence?
Doctor: Yes, it is a challenge. Make sure she does not get overweight. Does she smoke?
Carer: Yes.
Doctor: Smokers may cough a lot and this weakens the pelvic floor muscles – so she may have bladder control problems. Encourage her to stop smoking.
Carer: OK, I will try. Anything else?
Doctor: Get her active. Aim for her to exercise for 30 minutes most days and encourage her to exercise her muscles regularly.
Patient: I know I should practise good toilet habits to avoid incontinence – but what are ‘good toilet habits’?

Doctor: Good question. Go to the toilet when you get the urge to open your bowels, avoid constipation. Don’t get into the habit of going to the toilet ‘just in case’ to pass urine – only go when you need to.

Patient: OK, that makes sense. Thanks, doctor.

Doctor: And visit me as soon as you suspect a urinary tract infection!

Listening 4: Listen again and fill in the gaps

1
Carer: Can you ___ me on how to prevent my father becoming incontinent?

Doctor: Yes, make sure he drinks well.

Carer: Can you please ___ what you mean?

Doctor: He must aim to drink six to eight cups of water or liquids a day. He must drink regularly ___ the day and drink more fluids – water is best – if the weather is hot or if he is exercising. He must cut down on alcohol, fizzy drinks and ___ that have caffeine in them as they irritate the bladder.

Carer: OK, thanks. That helps a lot.

Doctor: One more thing. Don’t let him drink less if he has a ___ control problem, as this will concentrate his urine and make the problem worse.

2
Carer: Can you tell me what my husband should be eating to keep healthy and help his incontinence?

Doctor: A healthy diet.

Carer: What is a healthy ___?

Doctor: Plenty of fibre. Fibre is in foods such as multi-grain or whole-grain breads, cereals and cereal products, fruit, vegetables, legumes, nuts and ___. Eat two servings of fruit, five servings of vegetables and five servings of cereals and breads each day.

Carer: OK. Anything else?

Doctor: Yes, a high-fibre diet means he needs to drink plenty of fluid as the fibre needs ___ in order to bulk up his stools.

3
Carer: I am caring for my wife – how can I help her remain positive especially since she has incontinence?

Doctor: Yes, it is a ___. Make sure she does not get overweight. Does she smoke?

Carer: Yes.

Doctor: Smokers may cough a lot and this weakens the ___ floor muscles – so she may have bladder control problems. Encourage her to stop smoking.

Carer: OK, I will try. Anything else?

Doctor: Get her active. Aim for her to exercise for 30 minutes most days and encourage her to exercise her ___ floor muscles regularly.
4

Patient: I know I should practice good toilet habits to avoid incontinence – but what are ‘good _____ habits’?

Doctor: Good question. Go to the toilet when you get the urge to open your bowels, avoid constipation and don’t get into the _____ of going to the toilet ‘just in case’ to pass urine – only go when you need to.

Patient: OK, that makes sense. Thanks, doctor.

Doctor: And visit me as soon as you _____ a urinary tract infection!

5 Find out more

Continence Foundation of Australia
NSW Resource Centre
www.continencensw.org.au
Call 8741 5699

Continence Helpline
Call 1800 330 066

Bladder and bowel information (Government)
www.bladderbowel.gov.au

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

Ask for help from your doctor, physiotherapist or continence nurse.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 6: Blood pressure and hypertension

1 Definitions

**Blood pressure** is the pressure of the blood in your arteries as it is pumped around the body by the heart.

**Hypertension** is when the blood pressure is higher than recommended to be healthy. If hypertension is not treated, it can lead to serious health problems. It is a major risk factor for developing cardiovascular disease.

**Cardiovascular disease** means problems with your heart and/or blood vessels. It can be any of:

a) **Arteriosclerosis**: also called hardening of the arteries, arteriosclerosis means the arteries become thickened and are no longer as flexible.

b) **Atherosclerosis**: a build-up of cholesterol and fat that makes the arteries narrower so less blood can flow through. These build-ups are called plaque.

c) **Angina**: people with angina feel a pain in the chest that means the heart isn’t getting enough blood.

d) **Heart attack**: when a blood clot or other blockage cuts blood flow to a part of the heart.

e) **Stroke**: when part of the brain doesn’t get enough blood due to a clot or a burst blood vessel.
2 Vocabulary

2.1 Match the words to the meanings

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>hypertension</td>
<td>illness linked to the heart and the blood vessels</td>
</tr>
<tr>
<td>cardiovascular disease</td>
<td>when a blood vessel in the brain bursts</td>
</tr>
<tr>
<td>stroke</td>
<td>strength of blood moving through body</td>
</tr>
<tr>
<td>blood pressure</td>
<td>high blood pressure</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>hypertension</td>
</tr>
<tr>
<td>cardiovascular disease</td>
</tr>
<tr>
<td>stroke</td>
</tr>
<tr>
<td>blood pressure</td>
</tr>
</tbody>
</table>

3 Symptoms

High blood pressure (hypertension) rarely gives warning signs and can be a silent killer. Many people do not know they have high blood pressure. It is important to have your blood pressure checked by your doctor.
4 Looking after your health

4.1 Match the strategy for looking after your health with the correct picture

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>exercise more</td>
<td>No</td>
</tr>
<tr>
<td>B</td>
<td>stop smoking</td>
<td>No</td>
</tr>
<tr>
<td>C</td>
<td>increase your potassium intake by eating a wide variety of fruit, vegetables, plain unsalted nuts and legumes</td>
<td>No</td>
</tr>
<tr>
<td>D</td>
<td>decrease your salt/sodium intake</td>
<td>No</td>
</tr>
<tr>
<td>E</td>
<td>lose weight</td>
<td>No</td>
</tr>
<tr>
<td>F</td>
<td>reduce alcohol</td>
<td>No</td>
</tr>
</tbody>
</table>

4.2 Now put the statement number next to the correct strategy for looking after your health

1 ‘I will walk to the shops every day instead of going by bus’
2 ‘I will eat a piece of fruit every day and fresh vegetables with my supper’
3 ‘I will not add salt to my food’
4 ‘I will stop smoking’
5 ‘I am going to lose weight’
6 ‘I will not drink any alcohol three days of the week’
4.3 Talking to the doctor

Listening 1: Write the dialogue number next to the correct topic

Topics:
- my husband may have high blood pressure
- ways to lower high blood pressure
- asking for a blood pressure test

1
Doctor: Good morning. How can I help you today?
Patient: Please can you test my blood pressure?
Doctor: Yes, you should have your blood pressure checked regularly.
Patient: What is a good blood pressure reading?
Doctor: Normal blood pressure is less than 120/80. After your blood pressure is more than 140/90 you may have to start taking medicine to help stop you getting cardiovascular disease.
Patient: Thanks, doctor.

2
Doctor: Good morning. How is your husband at the moment?
Carer: I think he may have high blood pressure. How can I tell?
Doctor: There are no symptoms for high blood pressure. The only way we can find out if he has high blood pressure is to test it.
Carer: OK, I will bring him in to have his blood pressure checked.

3
Carer: My father has been told he has high blood pressure. How can I help him?
Doctor: Well, you can help him to develop a healthy lifestyle.
Carer: How can I do that?
Doctor: Help him to lose weight and to exercise more. Make sure he drinks less alcohol, stops smoking and don’t let him eat fried food but eat plenty of fruit and vegetables.
Carer: OK. Thanks, doctor. I will try to help him do this.

Listening 2: Listen again and fill in the gaps

1
Doctor: Good ____. How can I help you today?
Patient: Please can you test my blood ____?
Doctor: Yes, you should have your blood pressure checked regularly.
Patient: What is a good ____ pressure reading?
Doctor: Normal blood pressure is less than 120/80. After your blood pressure is more than 140/90 you may have to start taking ____ to help stop you getting cardiovascular disease.
Patient: Thanks, doctor.
2

Doctor: Good morning. How is your _____ at the moment?
Carer: I think he may have high blood pressure. How can I tell?
Doctor: There are no _____ for high blood pressure. The only way we can find out if he has high blood pressure is to test it.
Carer: OK, I will bring him in to have his blood pressure checked.

3

Carer: My father has been told he has high blood pressure. How can I help him?
Doctor: Well, you can help him to develop a _____ lifestyle.
Carer: How can I do that?
Doctor: Help him to lose weight and to exercise more. Make sure he drinks less alcohol, stops smoking and don't let him eat _____ food but eat plenty of fruit and vegetables.
Carer: OK. Thanks, doctor. I will try to help him do this.

5 Find out more

The Heart Foundation
www.heartfoundation.org.au/your-heart/how-it-works
www.heartfoundation.org.au/your-heart/cardiovascular-conditions

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

Talk to your doctor.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 7: Cholesterol and triglycerides

1 Definitions

Cholesterol and triglycerides are substances in your blood. They can been called ‘blood fats’, or your doctor may call them ‘blood lipids’.

Cholesterol is a type of fat that is made by your body. You also get cholesterol from some foods. It is used for many different things in your body, but when there is too much in your blood it can increase your chance of having a heart attack or stoke.

There are two types of cholesterol.

Low-density lipoprotein (LDL) is known as ‘bad’ cholesterol because it can build up in your arteries and increase your chance of having a heart attack or stroke.

High-density lipoprotein (HDL) is known as ‘good’ cholesterol as it helps protect you from having a heart attack.

It is best to aim for lots of HDL and low LDL in your blood.

Triglycerides are also made in your body and found in foods. They are found in your blood and stored as fat in your body. You need some triglycerides but high levels are bad for you and increase your chance of having a heart attack or stroke.

2 Vocabulary

2.1 Match the words to the meanings

| metabolic | a block in blood vessel leading to the brain |
| cholesterol | chemical and physical changes which happen in the body tissue |
| deposits | a waxy fat-like substance made by the liver |
| arteries | illness |
| disease | material that sinks to the bottom of a liquid |
| stroke | the big tubes that carry blood from the heart to other parts of the body |
2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>metabolic</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>cholesterol</td>
<td></td>
</tr>
<tr>
<td>deposits</td>
<td></td>
</tr>
<tr>
<td>arteries</td>
<td></td>
</tr>
<tr>
<td>disease</td>
<td></td>
</tr>
<tr>
<td>stroke</td>
<td></td>
</tr>
</tbody>
</table>

3 Effects of high cholesterol levels

Too much cholesterol circulating in your bloodstream leads to fatty deposits developing in the arteries. This causes the vessels to narrow. They can eventually become blocked and cause a heart attack and/or a stroke.

3.1 Symptoms

Many people do not know they have high cholesterol and triglycerides. Your blood lipids (cholesterol and triglycerides) can be high and you can still feel well. It is important to have your ‘blood lipids’ measured by your doctor. If they are not in the normal range, there are many changes you can make to your life and diet that will help you reduce your chance of having a heart attack and stroke.

4 Looking after your health

4.1 Talking to the doctor

Listening 1: ♩Audio Write the dialogue number next to the correct topic

Topics:

_____ smoking and exercise and cholesterol
_____ drinking and cholesterol

1

Doctor: Good morning. How can I help you?
Carer: I want to know how I can reduce my husband’s cholesterol.
Doctor: Does he drink alcohol?
Carer: Yes, he does.
Doctor: Well, he should only drink one or two drinks a day and he should not binge drink.
2
Carer: OK. Is there anything else I need to know?
Doctor: Yes, he definitely should not smoke.
Carer: That’s good as he has given up already.
Doctor: And he needs to exercise at least 30 minutes a day. Is this possible?
Carer: Yes, I will make sure he does – he can swim.

Listening 2: Listen again and fill in the gaps

1
Doctor: Good morning. How can I _____ you?
Carer: I want to know how I can reduce my _____ cholesterol.
Doctor: Does he drink _____?
Carer: Yes, he does.
Doctor: Well, he should only drink one or _____ drinks a day and he should not binge drink.

2
Carer: OK. Is there anything else I need to know?
Doctor: Yes, he definitely _____ not smoke.
Carer: That’s good as he has given up already.
Doctor: And he _____ to exercise at least 30 minutes a day. Is this possible?
Carer: Yes, I will make sure he does – he can _____.

4.2 Dietary tips to avoid high cholesterol: Write the correct food into the correct column

If you should increase the amount you eat, put it in the increase column.

If you should decrease the amount you eat, put it in the decrease column.


<table>
<thead>
<tr>
<th>increase</th>
<th>decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4.3 Lifestyle tips to cut cholesterol: Write the correct word in the correct column

If you should increase activity/substance, write it in the increase column.
If you should decrease activity/substance, write it in the decrease column.
If you should stop altogether, write the word in the stop column.

smoking – alcohol – exercise – excess weight – blood sugar

<table>
<thead>
<tr>
<th>stop</th>
<th>reduce</th>
<th>increase</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5 Find out more

Dietitians Association of Australia
www.daa.asn.au
Call 1800 812 942

Heart Foundation (cholesterol information)
www.heartfoundation.org.au/your-heart/cardiovascular-conditions/Pages/high-cholesterol.aspx

Heart Foundation (Health Information Service)
Call 1300 36 27 87

Stroke Recovery Association NSW 2011
info@strokensw.org.au
www.strokensw.org.au
Freecall: 1300 650594

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

Talk to your doctor.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 8: Arthritis

1 Definition

Arthritis is pain in the joints or muscles of the body.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Word</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>pain</td>
<td>enlargement</td>
</tr>
<tr>
<td>swelling</td>
<td>tiredness</td>
</tr>
<tr>
<td>joint</td>
<td>unpleasant feeling</td>
</tr>
<tr>
<td>fatigue</td>
<td>the place where two bones make contact</td>
</tr>
<tr>
<td>osteoarthritis</td>
<td>heat and swelling</td>
</tr>
<tr>
<td>rheumatoid arthritis</td>
<td>difficult to bend/rigid</td>
</tr>
<tr>
<td>stiffness</td>
<td>cartilage breaks down and the bones rub together – the joint then loses its shape and alignment</td>
</tr>
<tr>
<td>inflammation</td>
<td>the lining of the joints becomes inflamed, swells and there is joint damage</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Word</th>
<th>Translation Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>pain</td>
<td></td>
</tr>
<tr>
<td>swelling</td>
<td></td>
</tr>
<tr>
<td>joint</td>
<td></td>
</tr>
<tr>
<td>fatigue</td>
<td></td>
</tr>
<tr>
<td>osteoarthritis</td>
<td></td>
</tr>
<tr>
<td>rheumatoid arthritis</td>
<td></td>
</tr>
<tr>
<td>stiffness</td>
<td></td>
</tr>
<tr>
<td>inflammation</td>
<td></td>
</tr>
</tbody>
</table>
3 Symptoms of arthritis

3.1 Talking to the doctor

Listening 1: Write the dialogue number next to the correct topic

Topics:

____ sore knees
____ stiff elbows and shoulders
____ painful hands

1
Doctor: Good morning. How can I help you today?
Patient: I have pains in my hands, doctor.
Doctor: OK, sorry to hear that. Anything else you want to tell me about your hands?
Patient: Yes, the joints are a bit swollen.

2
Doctor: Good morning. How are you?
Patient: Not very good, doctor. I feel tired and unwell.
Doctor: Do you have any other problems?
Patient: Yes, my knees are sort of red and warm.
Doctor: They may be inflamed.

3
Doctor: Hi, how are you?
Patient: A bit worried.
Doctor: Why is that?
Patient: My elbows and shoulders feel really stiff and I can’t move them properly.

Listening 2: Listen again and fill in the gaps

1
Doctor: Good ____ , How can I help you today?
Patient: I have pains in my hands, doctor.
Doctor: OK, sorry to hear that. Anything else you want to tell me about your ____ ?
Patient: Yes, the joints are a bit swollen.

2
Doctor: Good morning. How are you?
Patient: Not very good, doctor. I feel ____ and unwell.
Doctor: Do you have any other problems?
Patient: Yes, my ____ are sort of red and warm.
Doctor: They may be inflamed.
Doctor: Hi, how are you?
Patient: A _____ worried.
Doctor: Why is that?
Patient: My elbows and shoulders feel really ____ and I can’t move them properly.

4 Management of arthritis

There is no cure for arthritis. Management options can include medical treatment and medication, physiotherapy, exercise and self-management techniques.

4.1 Your arthritis healthcare team

A range of health professionals are able to help you manage your arthritis. These may include your doctor and those mentioned in the table below.

Match the arthritis health care professionals with their role

<table>
<thead>
<tr>
<th>physiotherapist</th>
<th>doctor who treats arthritis and problems in joints, muscles and bones</th>
</tr>
</thead>
<tbody>
<tr>
<td>dietitian</td>
<td>health worker who helps patients to move properly after injury, an accident or operation</td>
</tr>
<tr>
<td>podiatrist</td>
<td>health worker who makes and sells medicines</td>
</tr>
<tr>
<td>rheumatologist</td>
<td>health worker who looks after people’s feet</td>
</tr>
<tr>
<td>occupational therapist</td>
<td>health worker who advises about food and nutrition</td>
</tr>
<tr>
<td>pharmacist</td>
<td>health worker who helps people who have problems with day-to-day tasks</td>
</tr>
</tbody>
</table>

4.2 Managing arthritis

There are many things you can do to manage your arthritis, including the following in the table below.

Match what is said with what you can do to manage your or your caree’s arthritis

<table>
<thead>
<tr>
<th>stay active</th>
<th>‘I will visit the doctor to find out which healthcare workers can support me in caring for my husband.’</th>
</tr>
</thead>
<tbody>
<tr>
<td>do not be overweight</td>
<td>‘I will make sure my husband eats fresh fruit and vegetables every day’.</td>
</tr>
<tr>
<td><strong>eat healthily</strong></td>
<td>‘I will organise to see an occupational therapist with my dad who will help him to protect his joints.’</td>
</tr>
<tr>
<td><strong>watch your diet</strong></td>
<td>‘I will stop eating cakes to lose weight.’</td>
</tr>
<tr>
<td><strong>protect your joints</strong></td>
<td>‘I will go to the doctor for advice on how to manage my arthritic pain.’</td>
</tr>
<tr>
<td><strong>work closely with your healthcare team</strong></td>
<td>‘I will join a gentle exercise class.’</td>
</tr>
</tbody>
</table>

### 5 Find out more

**Arthritis Australia**  

**Arthritis & Osteoporosis NSW**  
[www.arthritisnsw.org.au](http://www.arthritisnsw.org.au)  
Call 9857 3300

**Arthritis Infoline**  
Call 1800 011 041

**NSW Multicultural Health Communication Service**  

**Carers NSW**  
[www.carersnsw.org.au](http://www.carersnsw.org.au)  
Freecall: 1800 242 636

**Carers Australia**  
Freecall: 1800 242 636

**Get Healthy**  
Call 1300 806 258

**To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).**
Unit 9: Reflux

1 Definition

Reflux occurs when stomach acid moves up from the stomach and into the oesophagus (food pipe). Acid refluxing into the oesophagus is a normal bodily function, but it becomes a problem when it leads to symptoms that affect a person’s well-being or quality of life.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>word</th>
<th>meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>oesophagus</td>
<td>when stomach acids move up from the stomach to the oesophagus</td>
</tr>
<tr>
<td>reflux</td>
<td>broken area in the stomach which can bleed and cause pain – has pus, dead tissue and is often inflamed</td>
</tr>
<tr>
<td>heartburn</td>
<td>fluid with sour taste</td>
</tr>
<tr>
<td>regurgitation</td>
<td>difficulty swallowing</td>
</tr>
<tr>
<td>dysphagia</td>
<td>when stomach acids come back up into the mouth and make a nasty sour taste</td>
</tr>
<tr>
<td>ulcer</td>
<td>food pipe</td>
</tr>
<tr>
<td>acid</td>
<td>a burning pain in the chest</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>word</th>
</tr>
</thead>
<tbody>
<tr>
<td>oesophagus</td>
</tr>
<tr>
<td>reflux</td>
</tr>
<tr>
<td>heartburn</td>
</tr>
<tr>
<td>regurgitation</td>
</tr>
<tr>
<td>dysphagia</td>
</tr>
<tr>
<td>ulcer</td>
</tr>
<tr>
<td>acid</td>
</tr>
</tbody>
</table>
3 What’s the problem?

3.1 Match the statements in the first column with the statements in the second column which have the same meaning

| ‘I have a burning chest pain’ | ‘I may be regurgitating my food’ |
| ‘I often have an unpleasant sour taste in my mouth’ | ‘I may have dysphagia’ |
| ‘I am having difficulty swallowing’ | ‘I have heartburn’ |

4 Symptoms

Listening 1: Write the dialogue number next to the correct topic

Topics:
- ____ difficulty swallowing
- ____ burning chest
- ____ sour taste in mouth

1
Doctor: Good morning. How are you today?
Patient: Not very well, actually.
Doctor: OK, what is the problem?
Patient: After I eat, my chest feels like it’s burning.
Doctor: Oh dear – that may be reflux.

2
Doctor: Hi, how can I help you today?
Patient: Well, sometimes I get a very unpleasant sour taste in my mouth.
Doctor: Right. Can you tell me more about it?
Patient: Well, it’s as if what I swallowed is coming back into my mouth.
Doctor: OK, it sounds like you are regurgitating.

3
Doctor: Good morning. How are you today?
Carer: Well, my father is having difficulty swallowing his food.
Doctor: OK, that may be dysphagia and there are things you can do to help him.
Carer: Oh good, doctor. It’s very distressing to see him choking on his food.
Listening 2:  Audio Listen again and fill in the gaps

1
Doctor: Good ____. How are you today?
Patient: Not very well, actually.
Doctor: OK, what is the ____?
Patient: After I eat, my chest feels like it’s ____.
Doctor: Oh ____ – that may be reflux.

2
Doctor: Hi, how can I help you today?
Patient: Well, sometimes I get a very ____ sour taste in my mouth.
Doctor: Right. Can you tell me more about it?
Patient: Well, it’s as if what I swallowed is ____ back into my mouth.
Doctor: OK, it sounds like you are regurgitating.

3
Doctor: Good morning. How are you ____?
Carer: Well, my father is having difficulty ____ his food.
Doctor: ____ , that may be dysphagia and there are things you can do to help him.
Carer: Oh good, doctor. It’s very distressing to see him ____ on his food.

5 Looking after your health

5.1 Match the end of the sentence to the correct strategy for avoiding reflux

| stop smoking | because alcohol irritates your stomach and relaxes the muscles around your oesophagus |
| lose weight | with something strong such as telephone books |
| reduce how much alcohol you drink | because tobacco smoke irritates your digestive system and makes your symptoms worse |
| eat smaller more frequent meals | three or four hours before you go to bed |
| eat your evening meal | such as coffee, chocolate, tomatoes or fatty or spicy foods – also citrus foods such as oranges and lemons |
| don’t eat things that make your reflux worse | instead of three large meals a day |
| raise the head of your bed by 20 cm | if you are overweight |
6 Find out more

Gastroenterological Society of Australia (GESA)
www.gesa.org.au

Gastroenterological Nurses College of Australia (GENCA)
www.genca.org

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Dietitians Association of Australia
www.daa.asn.au
Call 1800 812 942

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

Talk to your doctor.

Talk to a dietitian.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 10: Back pain

1 Definition
Back pain is a common problem – 80% of adults will complain of back pain at least once in their lives with many saying it happens several times. Back pain most often comes from muscles, ligaments, joints and discs. It may be caused by poor posture, injury, inflammation, tension and spasm or muscle imbalance.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>muscles</td>
<td>these connect bones or hold organs in place</td>
</tr>
<tr>
<td>hunch</td>
<td>body tissue made of cells that causes movement</td>
</tr>
<tr>
<td>ligaments</td>
<td>where two bones meet</td>
</tr>
<tr>
<td>joints</td>
<td>to stand, sit or walk in a bent posture</td>
</tr>
<tr>
<td>injury</td>
<td>strain or stress</td>
</tr>
<tr>
<td>inflammation</td>
<td>sudden movement of muscle or group of muscles which you have no control over</td>
</tr>
<tr>
<td>tension</td>
<td>damage or hurt to the body</td>
</tr>
<tr>
<td>spasm</td>
<td>redness, swelling and fever in part of body, often with pain</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>muscles</td>
</tr>
<tr>
<td>hunch</td>
</tr>
<tr>
<td>ligaments</td>
</tr>
<tr>
<td>joints</td>
</tr>
<tr>
<td>injury</td>
</tr>
<tr>
<td>inflammation</td>
</tr>
<tr>
<td>tension</td>
</tr>
<tr>
<td>spasm</td>
</tr>
</tbody>
</table>
3 Lifestyle factors contribute to back pain

Most cases of back pain are made worse by lifestyle factors.

3.1 Match the reason for back pain with what you can do to prevent it

<table>
<thead>
<tr>
<th>Reason</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>lack of exercise</td>
<td>‘I will lose weight’</td>
</tr>
<tr>
<td>being overweight or obese</td>
<td>‘I will not sit hunched over my iPhone’</td>
</tr>
<tr>
<td>sitting for long periods</td>
<td>‘I am going to start meditation so I can feel more relaxed because my muscles are tense all the time’</td>
</tr>
<tr>
<td>poor posture</td>
<td>‘I will not lift the milk crate alone but I will get help’</td>
</tr>
<tr>
<td>stress</td>
<td>‘I will stand up and walk around the office every half an hour and do stretches’</td>
</tr>
<tr>
<td>bad work practices</td>
<td>‘I will exercise half an hour every day’</td>
</tr>
</tbody>
</table>

4 Looking after your back

4.1 Talking to the doctor

Listening 1:  🎧 Audio Write the dialogue number next to the correct topic

Topics:

___ stop smoking
___ lose weight
___ strengthening back
___ take a break from sitting
___ good lifting
___ bending and twisting
___ carrying baby
___ do not hunch
___ choose a good mattress
Doctor: Good morning. How can I help you today?
Carer: Good morning – I have a question for you. How can I strengthen my back? I have to lift my mum a lot and I want to ensure I look after myself or I will not be able to look after her properly.
Doctor: To strengthen your back you must exercise it regularly.
Carer: OK, what exercise is good for my back muscles?
Doctor: Swimming a variety of strokes (especially backstroke) is good for your back and also using exercise bikes and walking.
Carer: OK, thanks doctor.

Doctor: Good day. How are you?
Carer: Good day – actually I am worried because I lift my old dad a lot and it hurts my back.
Doctor: Yes, take care when you lift your dad – always bend your knees and hips when you lift him.
Carer: OK.
Doctor: And remember, never bend your back when lifting him.
Carer: OK, I will bend my knees and take care not to bend my back.

Carer: Is there anything else I should do or should not do when I am lifting my dad?
Doctor: Yes, never twist and bend at the same time. This is very important!
Carer: Why?
Doctor: That is very bad for your back and will damage it.

Patient: Hi, doctor. Not good – I have a very sore back. What can I do as I have to carry her?
Doctor: Always lift and carry your baby close to your body. In fact always carry every thing close to your body when possible.
Patient: OK, do you have any other advice about carrying?
Doctor: Yes, when you carry your shopping, for example, try to carry it in a rucksack on your back, and avoid sling-bags over your shoulder.

Doctor: Hi, how are you today?
Patient: Hi, doctor. Not good – I have a very sore back.
Doctor: Oh dear. Do you sit a lot at work?
Patient: Yes, I sit all the time at my desk.
Doctor: OK, try not to slump in your chair or hunch over your desk. Try and get up from the chair regularly for a short walk at least once an hour.
Patient: OK, I will try. Anything else?
Doctor: Yes, also when you walk try not to hunch your shoulders.
Patient: How should I sit at my desk when I am at work then, doctor?
Doctor: Use a chair with a backrest. Sit with your feet flat on the floor or on a footrest.
Patient: OK, anything else?
Doctor: Get up regularly from the chair – every 15 minutes if your back feels bad.
Patient: OK, I will try to do that.

Doctor: How are you this morning?
Patient: Doctor, I have a sore back – what can I do?
Doctor: Firstly, please tell me. Do you smoke?
Patient: Yes.
Doctor: Then you must quit smoking.
Patient: Quit smoking?! How can quitting smoking help my back?
Doctor: Smoking reduces the blood supply to the discs between the vertebrae in the back, and this may lead to these discs degenerating the back.
Patient: I didn’t know that.

Doctor: Good morning. How can I help you today?
Patient: Hi, doctor. I have a very sore back
Doctor: I recommend that you lose weight.
Patient: Lose weight? Will that help my back?
Doctor: Yes, being overweight puts extra strain on your back.

Doctor: How are you today?
Patient: Not good. When I wake up I can hardly get out of bed – my back is so sore!
Doctor: OK, you must choose a good mattress.
Patient: What is a good mattress?
Doctor: A mattress that suits your height, weight, age and sleeping position. This will help your back.

Listening 2: Listen again and fill in the gaps

Doctor: Good morning. How can I _____ you today?
Carer: Good morning – I have a question for you. How can I strengthen my back? I have to _____ my mum a lot and I want to ensure I look after myself or I will not be able to look _____ her properly.
Doctor: To strengthen your back you must exercise it regularly.
Carer: OK, what exercise is good for my back muscles?
Doctor: Swimming a variety of strokes (especially backstroke) is good for your back and also using _____ and walking.
Carer: OK, thanks doctor.
2
Doctor: Good day. How are you?
Carer: Good day – actually I am worried because I lift my old dad a lot and it hurts my back.
Doctor: Yes, take care when you lift your dad – always _____ your knees and hips when you lift him.
Carer: OK.
Doctor: And remember, never bend your back when lifting him.
Carer: OK, I will bend my ____ and take care not to bend my back.

3
Carer: Is there anything else I should do or should not do when I am lifting my dad?
Doctor: Yes, never ____ and bend at the same time. This is very important!
Carer: Why?
Doctor: That is very bad for your back and will damage it.

4
Doctor: Good morning. How are you?
Patient: Good morning, doctor – not good. I have a sore back from carrying my ____. What can I do as I have to carry her?
Doctor: Always lift and carry your baby close to your body. In fact always carry every thing close to your body when possible.
Patient: OK, do you have any other advice about carrying?
Doctor: Yes, when you carry your shopping, for example, try to carry it in a rucksack on your back, and avoid ____ over your shoulder.

5
Doctor: Hi, how are you today?
Patient: Hi, doctor. Not good – I have a very sore back.
Doctor: Oh dear. Do you sit a lot at work?
Patient: Yes, I sit all the time at my ____.
Doctor: OK, try not to slump in your chair or hunch over your desk. Try and get up from the chair regularly for a short walk at least once an hour.
Patient: OK, I will try. Anything else?
Doctor: Yes, also when you ____ try not to hunch your shoulders.

6
Patient: How should I sit at my desk when I am at work then, doctor?
Doctor: Use a chair with a backrest. Sit with your feet ____ on the floor or on a footrest.
Patient: OK, anything else?
Doctor: Get up regularly from the chair – every ____ minutes if your back feels bad.
Patient: OK, I will try to do that.

7
Doctor: How are you this morning?
Patient: Doctor, I have a sore back – what can I do?
Doctor: Firstly, please tell me. Do you smoke?
Patient: Yes.
Doctor: Then you must ____ smoking.
Patient: Quit smoking?! How can quitting smoking help my back?
Doctor: Smoking reduces the blood supply to the discs between the vertebrae in the back, and this may lead to these discs degenerating the ____.
Patient: I didn’t know that.

8  
Doctor: Good morning. How can I help you today?  
Patient: Hi, doctor. I have a very sore back  
Doctor: I recommend that you ____ weight.  
Patient: Lose weight? Will that help my back?  
Doctor: Yes, being overweight puts ____ strain on your back.

9  
Doctor: How are you today?  
Patient: Not good. When I wake up I can hardly get out of ____ – my back is so sore!  
Doctor: OK, you must choose a good mattress.  
Patient: What is a good mattress?  
Doctor: A ____ that suits your height, weight, age and sleeping position. This will help your back.

Remember, staying active plays an important role in management and prevention of back problems.
Remember, your back is designed to move.
Go to the doctor if any warning signs exist.

5 Find out more

Safe Work Australia
www.safeworkaustralia.gov.au

Carers NSW
www.carersnsw.org.au  
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au  
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au  
Call 1300 806 258

Talk to your doctor or seek a consultation with the physiotherapy department at your local hospital.

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
# Unit 11: Healthy eating

## 1 Definition

Eating healthy food in a balanced diet is very important to help you get the energy you need, maintain good health and have strong bones and muscles.

## 2 Vocabulary

### 2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Word</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>calcium</td>
<td>feeling that things around you are moving round and round and you feel you will fall down</td>
</tr>
<tr>
<td>vitamins</td>
<td>‘fuel’ given to the body by food and used up by exercise</td>
</tr>
<tr>
<td>dehydration</td>
<td>evenly spread</td>
</tr>
<tr>
<td>energy</td>
<td>when the body does not have as much water as it should</td>
</tr>
<tr>
<td>balanced</td>
<td>a mineral found in food that is needed for strong bones and teeth</td>
</tr>
<tr>
<td>dizzy</td>
<td>substances found in food that your body needs to grow and develop normally</td>
</tr>
</tbody>
</table>

### 2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Word</th>
</tr>
</thead>
<tbody>
<tr>
<td>calcium</td>
</tr>
<tr>
<td>vitamin</td>
</tr>
<tr>
<td>dehydration</td>
</tr>
<tr>
<td>energy</td>
</tr>
<tr>
<td>muscles</td>
</tr>
<tr>
<td>balanced</td>
</tr>
<tr>
<td>dizzy</td>
</tr>
</tbody>
</table>
3 Calcium and vitamin D

Put the food in the correct column, i.e. if the food contains vitamin D put it in the vitamin D column and if the food contains calcium put it in the calcium column (some have both calcium and vitamin D).


<table>
<thead>
<tr>
<th>calcium</th>
<th>vitamin D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4 What’s the problem?

4.1 Talking to the doctor

Listening 1: Write the dialogue number next to the correct topic

Topics:

___ eating between meals
___ dizzy and weak

1
Doctor: Good morning. How is everything going for you and your mum?
Carer: I am a little worried about my mum – she seems dizzy and weak.
Doctor: Is she drinking enough fluids?
Carer: How much is ‘enough fluid’?
Doctor: She should drink at least eight glasses of fluid a day, preferably water. Otherwise she will get dehydrated and dizzy.
Carer: OK, I will make sure she drinks more.

2
Doctor: How are you and how is your father?
Carer: We are both well but my dad is always hungry and I don’t want him to eat biscuits and cakes between meals as he will get fat – though I know he needs certain food. What shall I offer him?
Doctor: Give him fresh or dried fruit, cheese and nuts if he is hungry between meals – these give him the calcium he needs and a glass of milk with added calcium each day will make up the rest.
Carer: OK doctor. Why does he need calcium?
Doctor: To keep his bones and teeth healthy.
Listening 2: Audio  Listen again and fill in the gaps

1
**Doctor**: Good ____. How is everything going for you and your mum?
**Carer**: I am a little worried about my mum – she seems ____ and weak
**Doctor**: Is she drinking enough fluids?
**Carer**: How much is ‘enough ____’?
**Doctor**: She should drink at least eight glasses of fluid a day, preferably water. Otherwise she will get dehydrated and dizzy.
**Carer**: OK, I will make ____ she drinks more.

2
**Doctor**: How are you and how is your father?
**Carer**: We are both well but my dad is always hungry and I don’t want him to eat biscuits and cakes ____ meals as he will get fat – though I know he needs certain food. What shall I offer him?
**Doctor**: Give him fresh or dried fruit, cheese and nuts if he is hungry between meals – these give him the calcium he needs and a glass of milk with added ____ each day will make up the rest.
**Carer**: OK doctor. Why does he needs calcium?
**Doctor**: To keep his ____ and teeth healthy.

5 Looking after your health

Listening 3: Audio

1
**Carer**: Doctor, can you please tell me what would be a good diet for my 80-year-old mum?
**Doctor**: For breakfast she can have porridge or muesli plus a tub of yoghurt and perhaps a glass of milk.
**Carer**: OK, and what about lunch?
**Doctor**: For lunch she could have a wholemeal sandwich with cheese, chicken and salad or egg and salad.
**Carer**: Sounds very nice! And dinner?
**Doctor**: And for dinner perhaps she could have pasta or rice with tinned salmon or tuna and vegetables such as peas, broccoli and carrots and some fruit.
**Carer**: OK. Thanks, doctor – is there anything else I should know?
**Doctor**: Yes and it’s important. She must drink eight glasses of fluid every day.
**Carer**: Does it all have to be water?
**Doctor**: Water is best but it can be tea, coffee, fruit juice or milk.
**Carer**: OK, that sounds like how much she has anyway. Thanks, doctor.

2
**Doctor**: Good morning, how can I help you today?
**Carer**: Someone told me that if you eat too much salt your body does not absorb calcium – is this correct?
**Doctor**: Yes, also if you eat a lot of meat and drink alcohol and soft drinks the same thing happens.
**Carer**: OK. I will choose carefully what I give my mother to eat.
Listening 2: Listen again and fill in the gaps

1
Carer: Doctor, can you please tell me what would be a good diet for my 80-year-old mum?
Doctor: For breakfast she can have _____ or muesli plus a tub of yoghurt and perhaps a glass of milk.
Carer: OK, and what about _____?
Doctor: For lunch she could have a _____ sandwich with cheese, chicken and salad or egg and salad.
Carer: Sounds _____! And dinner?
Doctor: And for dinner perhaps she could have _____ or rice with tinned salmon or tuna and vegetables such as peas, broccoli and carrots and some fruit.
Carer: OK. Thanks, doctor – is there anything else I should know?
Doctor: Yes and it’s ____. She must drink eight glasses of fluid every day.
Carer: Does it all have to be water?
Doctor: Water is best but it can be _____, coffee, fruit juice or milk
Carer: OK, that sounds _____ how much she has anyway. Thanks, doctor.

2
Doctor: Good morning how can I help you today?
Carer: Someone told me that if you eat too much _____ your body does not absorb calcium – is this correct?
Doctor: Yes also if you eat a lot of meat and drink _____ and soft drinks the same thing happens.
Carer: OK. I will choose carefully what I give my mother to eat.

6 Find out more

Flinders University

NSW Multicultural Health Communications Service
www.mhcs.health.nsw.gov.au (search on ‘Food safety’)

NSW Refugee Health Service

Good Food for New Arrivals
http://goodfood.asetts.org.au

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

To speak in your own language, call a telephone interpreter on 131 450 (the cost of a local call).
Unit 12: Foot care

1 Definition

Good foot health is very important for people of all ages. People with diabetes are more likely to develop serious foot problems.

2 Vocabulary

2.1 Match the words to the meanings

<table>
<thead>
<tr>
<th>Calluses</th>
<th>health worker qualified to diagnose and treat foot problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corns</td>
<td>when the sides of the toenail grow into the skin and are very painful</td>
</tr>
<tr>
<td>Ingrown toenails</td>
<td>painful thick skin with a hard centre that often appears on top of the toes and soles of the feet</td>
</tr>
<tr>
<td>Podiatrist</td>
<td>painful areas of thick skin that appear on the soles of the feet</td>
</tr>
<tr>
<td>Injuries</td>
<td>piece of leather which makes the back of a shoe or boot</td>
</tr>
<tr>
<td>Infections</td>
<td>bump filled with fluid that looks like a bubble on the skin caused by rubbing</td>
</tr>
<tr>
<td>Heel counter</td>
<td>damage to the body</td>
</tr>
<tr>
<td>Blister</td>
<td>germs enter the body, multiply and cause disease – and make it hot and red with swelling and pus</td>
</tr>
<tr>
<td>Bruises</td>
<td>foot support made to be worn inside a shoe</td>
</tr>
<tr>
<td>Stress fractures</td>
<td>burning feeling under the long arch of the foot</td>
</tr>
<tr>
<td>Arch pain</td>
<td>small crack in a bone which happens because it is used too much</td>
</tr>
<tr>
<td>Insert</td>
<td>dark area of skin that happens because it has been injured</td>
</tr>
</tbody>
</table>

2.2 Now write the meanings in your own language

<table>
<thead>
<tr>
<th>Calluses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corns</td>
</tr>
</tbody>
</table>
3 What’s the problem?

3.1 Talking to the podiatrist

Listening 1: Write the dialogue number next to the correct topic

Topics:

_____ cutting toenails
_____ cuts and scratches that will not heal
_____ nerve damage in feet
_____ itchy skin and painful arches

1
Podiatrist: Good morning. How are your feet feeling today?
Elderly lady: Not good at the moment – the arches of my feet ache.
Podiatrist: Oh dear. Any other problems?
Elderly lady: Yes, I have a lot of itchy skin on my feet as well.

2
Carer: Good morning. I want to talk to you about my father – he is having trouble looking after his feet.
Podiatrist: He may not be able to reach his toes and he may not even be able to see them properly.
Carer: Yes, you’re right.
Podiatrist: So you must ask someone to cut your father’s toenails.
Carer: OK. The nails are very thick and deformed so it’s difficult for me to cut them for him.
Podiatrist: Exactly, but it is very important that someone cuts them.
3
Doctor: Good morning.
Carer of elderly diabetic woman: Good morning. I want to talk to you about my mum. She has cuts and scratches on her feet which won’t heal. I am worried.
Doctor: Sorry to hear that. Is she a diabetic?
Carer of elderly diabetic woman: Yes.
Doctor: This is very common for diabetics. She has less blood flowing to her feet which means the cuts and scratches are slow to heal.

4
Doctor: Good morning. How can I help you today?
Elderly diabetic man: I was working in my garden and I dropped a brick on my foot. It didn’t hurt but when I took my shoes and socks off to go to bed I was shocked when I saw that my foot was very badly cut and bruised.
Doctor: Yes, it does look badly hurt. Are you a diabetic?
Elderly diabetic man: Yes.
Doctor: That explains it. Diabetes causes nerve damage in the foot so you didn’t feel the pain.

Listening 2: Listen again and fill in the gaps

1
Podiatrist: Good morning. How are your feet _____ today?
Elderly lady: Not good at the moment – the arches of my feet _____.
Podiatrist: Oh dear. Any other problems?
Elderly lady: Yes, I have a lot of _____ skin on my feet as well.

2
Carer: Good morning. I want to talk to you my father – he is having trouble _____ after his feet.
Podiatrist: He may not be able to reach his _____ and he may not even be able to see them properly.
Carer: Yes, you’re right.
Podiatrist: So you must ask someone to cut your _____ toenails.
Carer: OK. The nails are very thick and deformed so it’s _____ for me to cut them for him.
Podiatrist: Exactly, but it is very important that someone _____ them.

3
Doctor: Good morning.
Carer of elderly diabetic woman: Good morning. I _____ to talk to you about my mum. She has cuts and _____ on her feet which won’t heal. I am worried?
Doctor: Sorry to hear that. Is she a diabetic?
Carer of elderly diabetic woman: Yes
Doctor: This is very common for ____. She has less blood flowing to her feet which means the cuts and scratches are slow to heal.
4

**Doctor:** Good morning. How can I help you today?
**Elderly diabetic man:** I was working in my _____ and I dropped a brick on my foot. It didn’t hurt but when I took my shoes and _____ off to go to bed I was shocked when I saw that my foot was very badly cut and bruised.
**Doctor:** Yes, it does looks ____ hurt. Are you a diabetic?
**Elderly diabetic man:** Yes.
**Doctor:** That explains it. Diabetes causes nerve damage in the foot so you _____ feel the pain.

4 Looking after your feet

4.1 Pick the right shoes for your feet!

Podiatrists can advise about how to choose good shoes for your feet. People who spend long periods of time on their feet, or those with arthritis, may have special footwear needs.

**Match** the beginning of the sentence with the correct end of the sentence that describes the characteristics of good shoes

<table>
<thead>
<tr>
<th>A firm heel counter…</th>
<th>…which are individually made shoe inserts.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enough depth and width at the toes…</td>
<td>…which is soft and is less slippery than leather.</td>
</tr>
<tr>
<td>An upper made from a natural material…</td>
<td>…that fits closely around the back of the foot to avoid slipping during walking.</td>
</tr>
<tr>
<td>A sole made from a material like rubber…</td>
<td>…so that there is a short space between the tip of the longest toe and the end of the shoe.</td>
</tr>
<tr>
<td>Podiatrists sometimes prescribe orthotics…</td>
<td>…such as leather, which allows the foot to ‘breathe’.</td>
</tr>
</tbody>
</table>

4.2 Looking after your feet as a diabetic

**Match** the correct advice for diabetics with what the diabetic says he will do

<table>
<thead>
<tr>
<th>Have at least one foot check-up a year with a podiatrist</th>
<th>‘If I have any problems with my feet I will go to the podiatrist.’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check your feet daily for cuts, blisters, bruises or signs of injury, which they may not have felt happening</td>
<td>‘Now that I am a diabetic I will have to visit the podiatrist annually to have my feet checked.’</td>
</tr>
<tr>
<td>Seek advice or treatment from a podiatrist before trying to manage foot problems (such as corns, calluses or ingrown nails) themselves</td>
<td>‘I will ask my carer to check my feet every night for cuts or injuries.’</td>
</tr>
</tbody>
</table>
5 Find out more

SLHD Podiatry Central Intake Office
Call 9767 5221 or 9767 7395
e-mail podiatry.slhd@sswohs.nsw.gov.au

Canterbury and Marrickville Community Podiatry
Call 9911 9939

Carers NSW
www.carersnsw.org.au
Freecall: 1800 242 636

Carers Australia
www.carersaustralia.com.au
Freecall: 1800 242 636

Get Healthy
www.gethealthynsw.com.au
Call 1300 806 258

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Good Old Health

Unit 1: Depression in Older People
Unit 2: Osteoporosis
Unit 3: Dementia
Unit 4: Urinary Tract Infections
Unit 5: Incontinence
Unit 6: Blood Pressure
Unit 7: Cholesterol
Unit 8: Arthritis
Unit 9: Reflux
Unit 10: Back pain
Unit 11: Healthy Eating
Unit 12: Foot Care