

St. Luke's Trust

Newsletter July 2006

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A note on distribution:

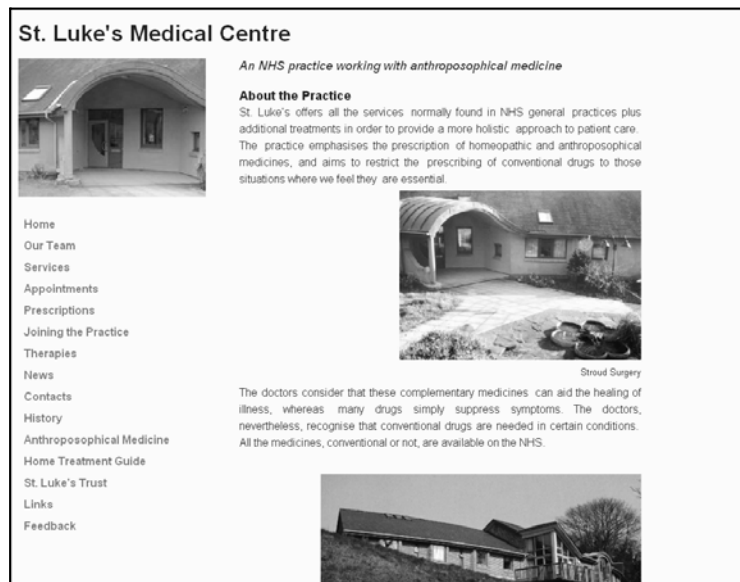
This Newsletter is for patients of the St. Luke's Medical Centre as well as friends of St. Luke's Trust. In an attempt to avoid sending more than one copy to each family registered with us, we have asked the Health Authority to supply us with only one label per household. They can only do this by printing for the oldest male in the household. We do not mean to cause offence....

Adam Beard
Editor

St. Luke's Goes On-Line

www.stlukesmedicalcentre.org

St. Luke's Medical Centre now has a website. This has information about the practice such as who we are, where we are and what we do, as well as general information about anthroposophical medicine and the therapies practiced at St. Luke's.



View of the Homepage

While the site is still fairly basic, I hope that over time it will become a useful link to the practice and a source of relevant information.

The site is arranged with links to different pages on the left hand side. Included in these are pages on the history of the practice, and the Home Treatment Guide, which is also for sale through the surgery in booklet form (see back page).

As well as information about the practice, the site provides a way for people to register their wish to receive the electronic version of our newsletter (see page 7). I also plan to use the News page to provide links to other relevant articles I come across.

If you have any ideas as to how the website could be improved, or suggestions for further content, I would be very happy to hear from you; please use the feedback form on the site.

Adam Beard
Practice Manager

Focus On: District Nursing

The District Nursing team for St. Luke's (Stroud) is based at Beeches Green Health Centre. For 'off-duty' purposes we are teamed with the District Nurses who work with the Swindell practice at Beeches Green, and we share weekend cover. We also work with the wider community nursing teams. So, if a patient lives some distance away from Stroud we are likely to refer that patient to the District Nursing team nearest to them. All District Nursing referrals should come to us in the first instance.

Our hours of duty are from 08.30-16.30, 7 days a week. Messages can be left for us on our answer machine: Telephone 01453 768111. If we are needed urgently please call the surgery.

To contact us at weekends and bank holidays, call the Out of Hours service on 08454 220220 or call the surgery and you will be redirected.

The Twilight District Nurses work from 18.30-23.00 daily. They can be contacted via the Out of Hours service as above.

Anyone can refer to the District Nursing service. The main referral criteria are that the patient is housebound and unable to attend the surgery. Exceptions are made where the treatment being offered is better suited to being done at home, for example bowel care or the flushing lines of patients receiving intravenous chemotherapy.

Examples of home based nursing care provided by the District Nursing service are;

- Management of patients during acute illness
- Wound care
- Leg ulcer assessment and management
- Continence assessment and management
- Bowel care
- Assessment of equipment related to nursing need
- Support for pre operative admissions
- Teaching patients/carers to be independent
- Support for Carers
- General nursing management of long term health conditions

- Public health initiative for the house bound e.g. falls prevention, vaccinations
- Assessment of patients' health needs on behalf of Social Services

We value referrals to the District Nursing service and we believe that patients benefit from early referral, especially people newly diagnosed with cancer and chronic diseases.

These people may not be house bound but we can assess them, make them aware of available services and refer them to other professionals and organisations as required. If they require no direct nursing care they can still benefit because they will have met us, have our contact details and can call us if they wish, so although some of these patients are not housebound, early contact with our service can be beneficial for them and their families.

We work closely with the Macmillan Team and Cotswold Care Hospice. The Macmillan team offer expert advice on many issues around palliative care including symptom control, benefits advice and psychological support.

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Families known to the Macmillan team can receive bereavement support.

The Cotswold Care Hospice based in Minchinhampton offers day care and support services to people and their families with life threatening illnesses. Patients and their families can make use of the day centre facilities and 'out patients' services such as complementary therapies, family support, counselling and bereavement services. The Hospice telephone number is 01453 886868. Referrals can be

made by the patients themselves or by any other professionals.

We make use of the Hospice at Home service which offers a nurse or care assistant to stay with a patient during the night. This service can be a 'one off' in order to offer respite for the family or it can be used towards the end of the patient's life. The Hospice always endeavours to be able to provide a nurse/carer when asked but unfortunately this is not always possible.

This service is free to the patient but the Hospice is a charity and welcomes donations.

Referral to this service is made by the District Nurses or GPs.

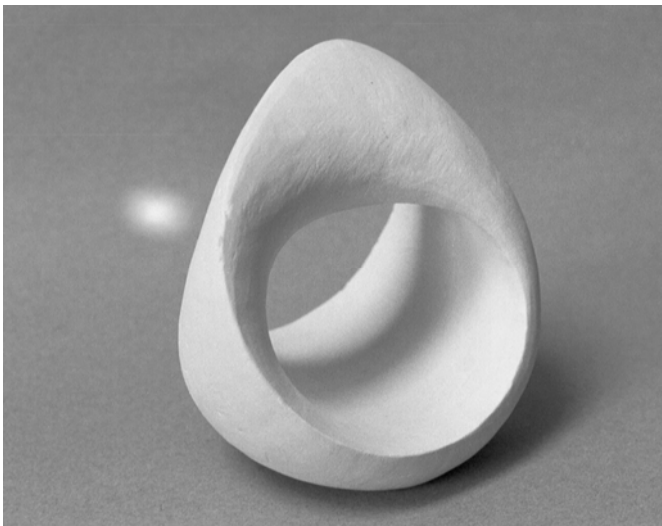
We have good relationship with Social Services staff, home care organisers, occupational therapists and other organisations.

Deborah Harbott
District Nurse

Oasis Programme 06/07

The new Oasis programme will start on Monday the 25th September.

Oasis is a support group for people who are struggling with their lives, either as a result of chronic illness or life questions, or simply because of a lack of meaningful company through whom one can explore deeper questions to do with the meaning of life. We run both a morning and an afternoon group of 3 hours each with a coffee/tea break in the middle. We share conversation, laughter and tears, deep questions and insights, deep bonds have been formed, participants have helped each other through difficult times, and we have rejoiced in each others pleasures and successes. Together we embark on an artistic journey to accompany our themes throughout the year.



Clay sculpture

The groups are facilitated by Melanie Taylor, who comes from Stourbridge every week, where she works as a counsellor, and Karin Jarman, one of the art therapists at St. Luke's.

We are both experienced in this work, this being our third year of running Oasis together. We have also given Oasis workshops in various venues in this country and even one abroad, in Barcelona.

We have been fortunate in getting some financial help from the 'Lottery Awards for All', from the local Hermes Trust and from individuals as well as from St. Luke's Trust itself which provides the premises free of charge. We do ask each participant to make a financial donation according to their means if at all possible, the level of which will be discussed at the beginning. No one will be turned away for financial reasons.

If there is a wish and a need we are also proposing to set up a special Oasis group for the over-70's. This age group often suffers from isolation and increasing incapacities that can be very difficult to come to terms with. Oasis has the possibility to address these issues quite directly and provide some soul and spiritual nourishment. There will also be artistic exercises, particularly veil painting, which is a meditative form of water-colour painting particularly suited to these themes.

If you want to get in touch and have some more information you are warmly invited to get in touch with me on 01453 757436

Karin Jarman
Oasis Facilitator

Homeopathy and Anthroposophical Medicine

At St Luke's we work out of an anthroposophical perspective, prescribe anthroposophical remedies and refer patients to anthroposophical therapies. Yet the word homeopathy is often used in conjunction with our practice and we are often asked what the difference is. As I have a diploma in homeopathy I was given the daunting task of attempting to outline these two different complementary directions.

Homeopathy

Perhaps it is good to start at the beginning with Dr Samuel Hahneman (1755-1843), a disillusioned medical doctor who found the then current practices of blood-letting and purging barbaric; weakening the human being rather than healing, and wanted an alternative.

It was whilst translating a script that he stumbled on a principle for which he is now famous: Like cures like. A substance that gives a particular symptom when taken in large dosages (e.g. arsenic poisoning gives diarrhoea) can also be used to cure an illness which has similar symptoms when taken in very small dosages. Through experiment and experience he found that by using the remedy in highly diluted forms it can cure and does no harm. He thus diluted a substance many times, with each dilution taking one part of the liquid and adding it to either 10 or 100 parts water. The diluted liquid was then shaken. The term potentised was used to describe the resultant remedies.

Not a molecule of
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substance can be
found

The remedies are potentised to the point that not a molecule of the original substance can be found, hence the conventional medical professions scepticism about their effectiveness.

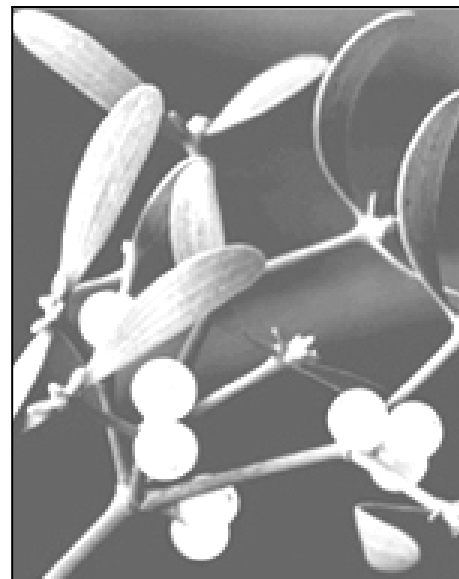
Dr Hahneman did not know how these remedies worked, although he wrote extensively in his later life about the "vital force" - a hypotheses of a dynamic force in the body that was influenced by

potentised remedies in a harmonising way. A therapist trained in classical homeopathy takes an extensive look at the patient and forms a picture of all the symptoms the patient may have, and out of this picture will find a mineral, plant or animal remedy picture that "matches".

The Birth of Anthroposophical Medicine

Now we move on a few years to Rudolf Steiner (1861—1925).

Dr Steiner had a different level of insight than Dr Hahneman in that he had an understanding of a spiritual world. It is out of this understanding that anthroposophical doctors work, and our consultations include the question of how the spiritual part of man plays a role in illness and healing. Conventional medicine assumes that the human being has only the physical body, and whether a doctor believes in a spiritual world or not does not have any influence on making a diagnosis or prescribing treatment.



Mistletoe, used for the treatment of cancer

The birth of anthroposophical medicine was due to a very close collaboration between Dr Steiner and a medical doctor, Dr Ita Wegman. She was trained in the conventional understanding of illness and Dr Steiner augmented this with a picture of the spiritual aspects of the human being. This "spiritual" understanding extended to the natural world and the forces at play within plants and minerals. He worked closely with pharmacists to

find the best methods of extracting the healing elements from a substance and used a wide array of alchemical methods to do this, including potentised (homeopathic) remedies, depending on the type of substance. There are therefore many types of remedies, some of which are classed as herbal rather than homeopathic. Remedies were also combined in a particular way to harmonise certain organ systems when imbalances had created illness. Remedies are not only given by mouth but also by injection and topical applications (e.g. compresses) depending on what needs to be addressed.

Different underlying understanding of the human being

Classical homeopathy recognises an underlying "force" at play but does not try to understand the spiritual aspect of illness. It is very good at recognising phenomena and has many well described and detailed remedies. It finds a holistic picture and then tries to match it with one single remedy. Homeopathy is undergoing a radical change and many homeopaths (e.g. Rajan Sankaran) are seeking a relationship between the different plant families, the different animal types (e.g. spider and snake remedies) and the minerals in the periodic table. The purpose of studying classical homeopathy is to gain a detailed understanding of these many remedies. There are both medical homeopaths (medical doctors with a postgraduate training) and lay homeopaths (no

He described the human being as not only a physical being but also a spiritual being.

medical training). They have separate faculties and organisations.

Anthroposophical medicine takes into account an extended understanding of the interaction between the spiritual and physical in the human being. Illness often occurs when an imbalance occurs. By understanding this dynamic one would use various remedies from the natural world to help restore balance and harmony to this dynamic

interplay. The training in anthroposophical medicine includes developing the ability to observe the manifestations of the spiritual world in phenomena of illness and the constitution. One has to be a medical doctor in order to train in anthroposophical medicine, to ensure a thorough grounding in the "physical world" before moving on the spiritual. As one is trying to understand something that is not visible, it requires many years to gain some feeling for this. Most of us who practice view ourselves as "working out on an anthroposophical perspective" rather than calling ourselves "anthroposophical doctors", which can still seem so far away. To further help the spiritual being relate to the physical body we also use art therapy, eurythmy therapy and massage, and all our therapists are trained in the same understanding, which enable us to communicate about illness and healing in a meaningful way.

The Patient's Understanding

Just as one can see a conventional doctor without agreeing with the conventional understanding of man or understanding how prescribed drugs work, the patient does not need to have any understanding of or agreement with the ideas underlying anthroposophical medicine or homeopathy in order to benefit from them. Neither of these two perspectives are more "correct" than the other: They are different lenses that different doctors use to make sense of what meets them in the consulting room. What is important is that the patient finds the outcome beneficial.

The anthroposophical approach is one that our practice utilises and is a perspective that we find meaningful. We also believe that each patient needs to engage with and find their own path to healing. The anthroposophical perspective is a particular tool that may or may not be useful in a patient's particular struggle. We encourage the journey and are therefore happy if patients meet and explore with therapists that work from other perspectives.

Conclusion

This is merely a "bare-bones" overview and I am aware of many aspects that I have not even mentioned. Perhaps in future editions of the newsletter other aspects of this theme can be looked at.

Dr. Madeleine Müller
General Practitioner

Events:

Sponsored Walk for the Patient Therapy Fund

Saturday 7th October 06, from Stroud to Tuffley



The Patient Therapy Fund helps people who are referred to the therapies practiced at St. Luke's by our doctors but who are unable to meet the full cost. This fund does not have a regular income, but relies on donations and patient's willingness to pay back into it at a later date when their circumstances allow it. From time to time it is necessary to fundraise in order to replenish the fund.

I would therefore like to organise a sponsored walk for the fund. I also thought it would be good to link our two surgeries in Stroud and Tuffley together, particularly with the ever more pressing need to move the Tuffley surgery. So far it has been a very frustrating exercise to find new premises, not through lack of trying on our part, but largely because of bureaucracy and the slow-moving mills of officialdom.

The distance between the two places is about 8 miles by road, but there are some splendid footpaths which can be used. The whole way can be walked almost exclusively on paths which will make the distance about 10 miles, but more enjoyable. People with less stamina may be willing to wait at strategic points with their vehicles to ferry the footsore back home.

Anyone who would like to support this idea is invited to get in touch with me. I will print some sponsor form nearer the time and distribute them. I have chosen the autumn as it is often very beautiful and mellow in the Cotswolds then, with such splendid colour on the beech trees.



Karin Jarman
Art Therapist and Walker

St. Luke's Day

Wednesday 18th October 7.30 pm in Stroud

We would like to invite you to join us to celebrate St. Luke's Day and the 10th anniversary of the laying of the foundation stone for the Stroud surgery building.

We will begin the evening with refreshments, and would like to invite you to bring a contribution and to enter our St. Luke's Day biscuit competition! To take part in the competition, bring your own home-baked 'St. Luke's Biscuits'* to be shared and judged.... The winning biscuit baker will receive a prize of a free therapy session and a bag of Weleda goodies. Juice will be provided....

Following this there will be artistic presentations by members of the team and a talk on St. Luke by Dr. Michael Evans.

*It is up to the bakers to decide why they are St. Luke's biscuits.....

The Future of the Newsletter:

We will no longer automatically send newsletters to all our patients.

Thank you to all those who took the time to respond to the article in the last edition about the future of the St. Luke's Trust Newsletter.

We received 112 replies from the 2000 copies sent out.

Of these, an overwhelming majority (95%) said that they valued the newsletter and would like it to continue. It is, of course, not so clear what the other 94% of recipients think!

Many people expressed a willingness to collect a copy from the surgery. While this would save on postage, I have also become aware that there are practical problems that make this difficult, not least of which is knowing when the newsletter would be ready for collection.

A large number of respondents said we could e-mail it to them. Once the initial job of creating the mailing list is done, this would save a lot of time, money and paper.

Having considered the responses and looked at the options, we have decided to change the way we distribute the newsletter. Starting with the next edition, we shall only send it to those who tell us they would like to receive it. You have two options for how you would like to receive the newsletter; by post, as at present, or by e-mail. We hope that this will reduce the cost and the amount of work involved in producing the newsletter, as well as the environmental impact, while ensuring that those who wish can continue to receive their copy.

It is therefore important to inform us how you would like to receive your copy:



If you would like it sent to you, please fill in the form below and return it to the surgery. These forms are also available at the surgery.



If you would like to receive it by email, please log on to www.stlukesmedicalcentre.org, go to the 'News' page and follow the instructions.

or send an e-mail to newsletter@stlukesmedicalcentre.org with 'subscribe' as the subject

Newsletter request:

I would like to receive future editions of the Newsletter by post. If at any time I change my mind I can tell the surgery and will stop receiving the Newsletter.

Name.....
BLOCK CAPITALS PLEASE

Please return to: St. Luke's Medical Centre, 53 Cainscross Road, Stroud. GL5 4EX

The posted Newsletter is only available to patients registered with the practice

Patient Survey

At the end of last year we carried out our second annual survey of how patients experienced the practice.

Compared to the previous years results, there were no significant changes, except for the overall satisfaction with the practice, which increased to 85%, seven percent above the national average.

Overall satisfaction
with the practice
increased to 85%

The main area that stands out for criticism is again over waiting times for appointments. This has been extensively discussed in the practice, and it was recognised that this is a problem, but also that patients appreciate the time they get to spend with the doctor, which is significantly longer than in other practices. We are trying to balance the wish to maintain 15 minute appointment times, which so many people clearly appreciate, and which the doctors feel gives them the time to understand the patients situation properly, with the need meet the demand for appointments, while staying within our budget.

It was also noted that on some days a significant

number of patients fail to attend their appointments, which are then wasted.

Action Points:

It was decided to start to record the number of patients who do not attend without canceling, in order to give us a clearer picture of how big the problem is, and to raise awareness with the patients.

Since starting this we have seen a drop in missed appointments from a high of 14 with the doctors and 8 with the nurses in one week, to two with the doctors and 5 with the nurses.

In an attempt to make telephone access to the surgery easier we have been trialing having two phone lines open for patients in the mornings.

We have also decided to run a few trial surgeries with short appointments where we will be able to see a greater number of patients, but only deal with individual complaints rather than complex issues.

It was also noted that the comments submitted with the surveys showed a high level of appreciation for the surgery and our approach to patient care. The Tuffley surgery was justifiably criticised. The replacement of this building is an ongoing project.

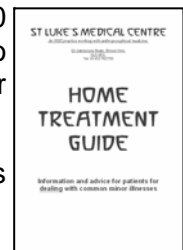
Adam Beard
Practice Manager

Home Treatment Guide

Over the past few months we have put together a 'Home Treatment Guide'. This 50 page booklet compiled Dr. Madeleine Müller with help from a number of people, to gives guidance for those looking after the sick and injured at home, with a particular emphasis on the anthroposophical approach as practiced at St. Luke's.

Sections include How to deal with a fever, Minor ailments and Minor injuries as well as information on the use of compresses and other home treatment methods.

Available from the Stroud Surgery for £2.00 or free online (see page 7)



Member of the Association of
Camphill Communities in Great Britain

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