



Aylesbury Surgery Health & Engagement Forum

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Pursuit of Happiness

Shake off the winter blues, imagine and delight in freshness of spring. Spring is all about change. So, why not take this opportunity to add a tinge of spring freshness in your life. As spring stirs feelings of anticipation for what's to come. What better way start with spring cleaning and decluttering not just what is around you but inside you too.

How can I do this one might ask? It is simple by basic mindfulness. It can give you a boost of calm, focused, natural energy and awakening your inner spark as you launch into spring. One of the most foundational aspects of mindfulness is the ability to calm and focus the mind.

In mindfulness practice, you might often hear the term "natural awareness." By natural awareness, we mean the awareness that simply comes with being a human being. It's free from judging and characterizing—it's just noticing and sensing the world

To connect more deeply with others, we must face the one person that we keep on the shortest leash: ourselves. We often reject other people's care or attention when we believe we don't deserve it—but there's nothing special you must do to deserve love. It is simply because you exist.

Often we will ponder on the things we regret or mistakes we've made, , try not to be to harsh on yourself, instead try redirecting your attention to the goodness within. When you recognize and reflect on even one good thing about your-

self, you are building a bridge to a place of kindness and caring.

There is nothing wrong with seeking happiness. Often we judge ourselves and think we don't deserve to be happy or do not know where and how to find genuine happiness and so make the mistakes that cause suffering for ourselves and others. But have you ever asked yourself, what really is true happiness?

True happiness needs to be based on something true and omnipresent. If this is the case, we need to move away from thinking of happiness as fulfilling momentary desires and move towards deriving happiness from lasting values, namely compassion.

As we act through compassion, we see the suffering of others lessen. As we see others' suffering lessen, we feel a sense of warm-heartedness, we develop meaningful connections with others, and we can help make the world a more kind, caring, and happy place.

Compassion and happiness go hand in hand without one it is hard to find the other. True happiness is when you care about how you feel and find the peace with in yourself.

By connecting to your inner you, your inner self- that is always wanting you to be happy, you claim responsibility for your own happiness, and step into being in charge of how you feel and how you want to feel.

you deserve happiness and ease—no more and no less than anyone else. Be true to yourself that's where you will find the peace within and happiness.

Mr Rajash Mehta



**Mr Rajash Mehta—Chairman
of The Aylesbury Surgery
Health & Engagement Forum**

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General Practice: 30 Years of Change – From Stability to Crisis

For the past 30 years, I have witnessed first-hand the transformation of general practice in England. When I first started, being a GP was both fulfilling and stable, with a strong focus on patient-doctor relationships and continuity of care. The General Medical Services (GMS) contract provided clear guidelines for remuneration, while cost rent schemes ensured that even practices in deprived areas could thrive. It was a time of stability, autonomy, and high patient satisfaction.

But since the 1990s, a series of political reforms, regulatory changes, and increasing bureaucracy have fundamentally reshaped general practice. What was once a relationship-driven profession has become overburdened with paperwork, performance targets, and unrealistic expectations. Morale among GPs has plummeted, and the future of the profession is now at a critical crossroads.

The First Major Shift: Internal Market Reforms and Fundholding (1990s)

The 1990 GP contract and the introduction of the internal market marked the first major shift in primary care. GP fundholding was introduced, allowing practices to manage their own budgets and commission services. While this was meant to improve efficiency, it created inequalities between practices, with some thriving



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while others struggled. Eventually, the fundholding system was abandoned, but it set the stage for more top-down control over GP services.

The Shipman Inquiry and the 2004 GP Contract: The End of Small Practices?

The Harold Shipman scandal (1998-2000) shook public trust in single-handed GPs. While Shipman was an anomaly, the government responded by increasing regulation and oversight, making it financially and administratively easier to work in large multi-GP practices. Many small

practices were forced to merge, not always because they wanted to, but because of mounting pressures.

The 2004 GP contract brought further changes. The biggest shift was the removal of out-of-hours care from GP contracts, which led to fragmented services and increased pressure on hospitals. The introduction of the Quality and Outcomes Framework (QOF) meant that GPs were now paid based on clinical targets, rather than just patient care. While this boosted income, it also introduced an administrative burden and shifted the focus to tick-box medicine rather than patient-centred care.

The Health and Social Care Act (2012): More Bureaucracy, Less Autonomy

The Health and Social Care Act 2012 reshaped the GP landscape again by replacing Primary Care Trusts (PCTs) with Clinical Commissioning Groups (CCGs). While this aimed to give GPs a greater role in commissioning services, in reality, it increased bureaucracy and fragmented services. The involvement of private providers further complicated care delivery, while the burden of administrative work continued to grow.

The Digital Transformation: Efficiency at a Cost

From 2010 onwards, technology started reshaping general practice. The introduction of electronic health records (EHRs), e-prescribing, and online consultations was meant to improve efficiency. While these tools have undoubtedly made prescribing and record-keeping easier, they have also increased GP workload. The

constant flow of online patient queries and the expectation of instant responses have led to longer working hours and rising stress levels.

The COVID-19 Pandemic: A Breaking Point

The COVID-19 pandemic (2020-2021) was a catalyst for rapid change in general practice. Within weeks, GPs had to shift almost entirely to remote consultations via telephone and video appointments. At the same time, GPs played a crucial role in delivering the COVID-19 vaccination programme, helping to protect millions of people.

Yet, instead of recognition, GPs faced mounting criticism over reduced face-to-face access. The media fuelled public hostility, painting GPs as reluctant to see patients in person, despite the enormous challenges posed by the pandemic. This period saw a rise in patient frustration, verbal abuse, and declining GP morale.

The Workforce Crisis and Declining Morale

One of the biggest issues in general practice today is the sheer workload pressure. The number of GP consultations has risen dramatically, yet the number of full-time equivalent GPs has not kept pace. Many GPs now work 12-hour days, struggling to keep up with the overwhelming volume of patient demand, paperwork, and administrative tasks.

1. Unrealistic Government Targets

The government's push for more face-to-face appointments post-COVID has failed to address the underlying workforce

shortages. Many GPs feel unfairly blamed for system-wide problems beyond their control. Constant policy changes and unattainable targets create a sense of instability and frustration.

2. Hostile Media and Public Perception

Negative media coverage has further demoralised GPs, portraying them as unwilling to see patients. This has damaged trust between GPs and patients, leading to a rise in verbal abuse, stress, anxiety, and early retirement. The erosion of trust has also made general practice a less attractive career choice for new doctors.

3. Financial Pressures and Underfunding

Despite rising demand, funding for general practice has not kept pace with inflation and patient needs. Many practices struggle with staff recruitment, maintaining premises, and investing in new technologies. GPs are often expected to do more with fewer resources, leading to burnout and frustration.

4. Increased Bureaucracy and Loss of Autonomy

Many GPs feel they have lost control over their work, as strict protocols, CQC inspections, and excessive data reporting have become the norm. The shift from patient-centred medicine to a bureaucratic, target-driven system has left many older GPs feeling disillusioned with the profession.

A Profession at a Crossroads

General practice has evolved from a relatively independent, patient-focused profession to one deeply embedded in NHS bureaucracy and political decision-making. While digital advancements and new care models have brought some benefits, the overall picture is one of increasing pressure, declining morale, and a growing workforce crisis.

General practice once thrived on strong patient-doctor relationships and continuity of care, but these foundations are now under threat. If policymakers want to prevent a collapse of primary care, they must take urgent action to:

- Increase funding to support GPs, staff, and premises.
- Reduce administrative burdens, allowing GPs to focus on patient care.
- Rebuild trust between GPs, the media, and the public.
- Create flexible working arrangements to improve GP retention.

Without these changes, general practice risks losing even more doctors, further weakening an already overstretched NHS. The profession is at a critical turning point, and the decisions made today will shape its future for decades to come

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THE



APPROACH

The Importance of Wellness at Work and Home

In today's fast-paced world, maintaining wellness both at work and home is more important than ever. Stress, long hours, and constant pressure to be available on phones and screens can take a toll on our physical and mental health, leading to burnout, reduced productivity, and even chronic illnesses.

Reiki, a gentle energy healing practice, is an effective tool to support both mental and physical well-being. It promotes relaxation, reduces stress, and helps restore balance to the body and mind. Scientific studies have shown that Reiki can help alleviate anxiety, improve sleep, and boost overall energy levels. Incorporating Reiki into your wellness routine—whether through guided sessions or quick, mindful practices—can provide the reset you need to thrive in your daily life. At work, short Reiki sessions can enhance focus, reduce stress, and improve team well-being. At home, Reiki can be a wonderful way to unwind, recharge, and create a calming environment for you and your loved ones.

Wellness isn't just about avoiding illness;

it's about thriving in all aspects of life. By investing in your well-being, you're not

only enhancing your own quality of life but also inspiring those around you to do the same.

Ready to prioritise your well-ness?

Discover how *The 111 Approach* can help you and your team thrive with Intuitive Reiki and 1-minute wellness practices. Whether you're looking for workplace wellness sessions for your business or personalised treatments for you or your loved ones, we've got you covered. Visit www.the111approach.com or contact us at info@the111approach.com 07700 104 111 to book your session today.

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ASTHMA

Asthma

The environment around us and change in weather heavily impacts our overall health. When we move from winter to spring, the shift in temperatures from cold to warm provides an opportunity for viruses and bacteria to flourish, which can then increase the spread of colds and flu's not to forget Allergies, due to pollen. Seasonal allergies are a common problem, thanks to budding trees, bushes and plants that release pollen into the air

The best way to stay healthy in the spring is to practice preventative health measures to boost your immune system and reduce your chances of getting sick. This includes washing your hands regularly, avoiding touching your nose, mouth and eyes, eating healthy, exercising regularly and keeping up with your vaccinations.

This can be a challenging time for those suffering from Asthma. As spring can cause an increase in your triggers for the symptoms. Springtime asthma triggers include:

- Insect repellents
- Pollen
- Temperature changes
- Yard fertilizers

"Often if asthma is worse in the spring, it's because of underlying allergens contributing to symptoms or because individual is increasing their activity levels

Asthma can usually be diagnosed from your symptoms and some simple tests.

A GP / asthma nurse will probably be able to diagnose it.

The GP may ask:

- what symptoms you have
- when they happen and how often
- if anything seems to trigger them
- if you have conditions such as eczema or allergies, or a family history of them
- They may suggest doing some tests to confirm if you have asthma.

These cannot always be done easily in young children, so your child may be given an asthma inhaler to see if it helps relieve their symptoms until they're old enough to have the tests.

Tests for asthma

The main tests used to help diagnose asthma are:

FeNO test – you breathe into a machine that measures the level of nitric oxide in your breath, which is a sign of inflammation in your lungs

Spirometry – you blow into a machine that measures how fast you can breathe out and how much air you can hold in your lungs

Peak flow test – you blow into a handheld device that measures how fast you can breathe out.

After you're diagnosed with asthma, you may also have a chest X-ray or allergy tests to see if your symptoms might be triggered by an allergy.

Asthma attacks

Asthma can sometimes get worse for a short time – this is known as an asthma attack. It can happen suddenly, or gradually over a few days.

Signs of a severe asthma attack include:

- wheezing, coughing and chest tightness becoming severe and constant
- being too breathless to eat, speak

- or sleep
- breathing faster
- a fast heartbeat
- drowsiness, confusion, exhaustion or dizziness
- blue lips or fingers
- fainting

With treatment, most people with asthma can live normal lives. There are also some simple ways you can help keep your symptoms under control.

Things you can do

If you have asthma, things you can do to help include:

- using your inhaler correctly –ask a nurse or GP for advice if you're still not sure
- using your preventer inhaler or tablets every day – this can help keep your symptoms under control and prevent asthma attacks
- not smoking –reduces the severity and frequency of the symptoms.
- exercising regularly – exercise should not trigger your symptoms once you're on appropriate treatment;
- eating healthily – most people with asthma can have a normal diet

- getting vaccinated – it's a good idea to have the annual flu jab and the one-off pneumococcal vaccination
- Regular check-ups. -You'll have regular contact with the asthma nurse to monitor your condition.

These appointments may involve:

- talking about your symptoms – for example, if they're affecting your normal activities or are getting worse
- a discussion about your

medicines How to use and side effects.

- breathing tests
- It's also a good chance to ask any questions you have or raise any other issues you want to discuss.
- You may be advised to check your peak flow if you think your symptoms may be getting worse.

Cold weather and asthma

Cold weather is a common trigger for asthma symptoms.

There are things you can do to help control your symptoms in the cold:

- carry your reliever inhaler with you at all times and keep taking your regular preventer inhaler as prescribed
- if you need to use your inhaler
- more than usual, speak to your doctor / nurse about reviewing your treatment
- keep warm and dry – wear gloves, a scarf and a hat, and carry an umbrella
- wrap a scarf loosely over your nose and mouth – this will help warm up the air before you breathe it
- try breathing in through your nose instead of your mouth – your nose warms the air as you breathe

Your personal action plan should say what to do if your symptoms get gradually or suddenly worse. Contact your doctor or asthma nurse if you're not sure what to do.



BOWEL CANCER

Bowel cancer

Causes of bowel cancer

Bowel cancer is a general term for cancer that begins in the large bowel. Depending on where the cancer starts, bowel cancer is sometimes called colon or rectal cancer.

Cancer can sometimes start in the small bowel (small intestine), but small bowel cancer is much rarer than large bowel cancer.

Bowel cancer is one of the most common types of cancer diagnosed in the UK. Cancer occurs when the cells in a certain area of your body divide and multiply too rapidly. This produces a lump of tissue known as a tumour.

Most cases of bowel cancer develop inside clumps of cells on the inner lining of the bowel first. These clumps are known as polyps. However, if you develop polyps, it does not necessarily mean you will get bowel cancer. Exactly what causes cancer to develop inside the bowel is still unknown. However, research has shown several factors may make you more likely to develop it.

Who's at risk?

Age

Your chances of developing bowel cancer increase as you get older. Almost 9 out of 10 cases of bowel cancer in the UK are diagnosed in people over the age of 60.

Family history

Having a family history of bowel cancer can increase your risk of developing the condition yourself, particularly if a close relative (mother, father, brother or sister) was diagnosed with bowel cancer below the age of 50.

Diet

A large body of evidence suggests a diet high in red and processed meat can increase your risk of developing bowel cancer.

There's also evidence that suggests a diet high in fibre could help reduce your bowel cancer risk.

Smoking

People who smoke cigarettes are more likely to develop bowel cancer, other types of cancer, and other serious conditions like heart disease.

Alcohol

Drinking alcohol is associated with an increased risk of bowel cancer, particularly if you regularly drink large amounts.

Obesity

Being overweight or obese is linked to an increased risk of bowel cancer, particularly in men.

Inactivity

People who are physically inactive have a higher risk of developing bowel cancer.

Digestive disorders

Some conditions affecting the bowel may put you at a higher risk of developing bowel cancer. For example, bowel cancer is more common in people who have had severe Crohn's disease or ulcerative colitis for many years.

Having regular check-ups to look for signs of bowel cancer from about 10 years after your symptoms first develop.

Check-ups will involve examining your bowel with a colonoscopy. This is a long, narrow flexible tube that contains a small camera that's inserted into your rectum.

Signs and symptoms

The 3 main symptoms of bowel cancer are:

- blood in the poo
- changes in bowel habit – like more frequent, looser poo
- abdominal (tummy) pain

However, these symptoms are very common and most people with them do not have bowel cancer. For example, blood in the poo is more often caused

by haemorrhoids (piles), and a change in bowel habit. Abdominal pain is usually the result of something you have eaten.

As almost 9 out of 10 people with bowel cancer are over the age of 60, these symptoms are more important as people get older. They are also more significant when they persist despite simple treatments.

Most people who are eventually diagnosed with bowel cancer have one of the following combinations of symptoms:

- a persistent change in bowel habit that causes them to go to the toilet more often and pass looser poo, usually together with blood on or in their poo
- a persistent change in bowel habit without blood in their poo, but with abdominal pain
- blood in the poo without other haemorrhoid symptoms, like soreness, discomfort, pain, itching or a lump hanging down outside the back passage
- abdominal pain, discomfort or bloating always brought on by eating, sometimes resulting in a reduction in the amount of food eaten and weight loss
- The symptoms of bowel cancer can be subtle and don't necessarily make you feel ill.

Diagnosing bowel cancer

Read about the symptoms of bowel cancer, and when you should see your GP to discuss whether any tests are necessary.

Your doctor will probably carry out a simple examination of your tummy and bottom to make sure you have no lumps.

They may also arrange for a simple blood test to check for iron deficiency anaemia. This can indicate whether there's any bleeding from your bowel that you haven't been aware of.

In some cases, your doctor may decide it's best for you to have a simple test in hospital to make sure there's no serious cause for your symptoms.

Make sure you return to your doctor if your symptoms persist or keep coming back after stopping treatment, regardless of their severity or your age.

Bowel cancer screening

Bowel screening is offered to men and women aged 50 to 74 across Scotland to help find bowel cancer early when it can often be cured.

Bowel screening involves taking a simple test at home every 2 years. The test looks for hidden blood in your poo, as this could mean a higher chance of bowel cancer.

Treatment

Bowel cancer can be treated using a combination of different treatments, depending on where the cancer is in your bowel and how far it has spread.

The main treatments are:

- surgery – the cancerous section of bowel is removed
- chemotherapy – where medication is used to kill cancer cells
- radiotherapy – where radiation is used to kill cancer cells
- biological treatments – a newer type of medication that increases the effectiveness of chemotherapy and prevents the cancer spreading

As with most types of cancer, the chances of a complete cure depends on how far it has advanced by the time it is diagnosed

Why the NHS offers bowel cancer screening

The NHS offer screening to try and find signs of bowel cancer at an early stage when there are no symptoms. This is when treatment can be more effective.

Sometimes cells in the bowel grow too quickly and form a clump known as a bowel polyp. Polyps are not cancers but can develop into cancers over time. Finding polyps means they can be removed.

Regular screening reduces your risk of getting and dying from bowel cancer.

BOWEL CANCER

Who is invited for bowel cancer screening?

People aged 54 to 74 years are invited for bowel cancer screening every 2 years. A bowel cancer screening home test kit may be offered to you. The programme is gradually expanding to make it available to eligible people aged 50 and over.

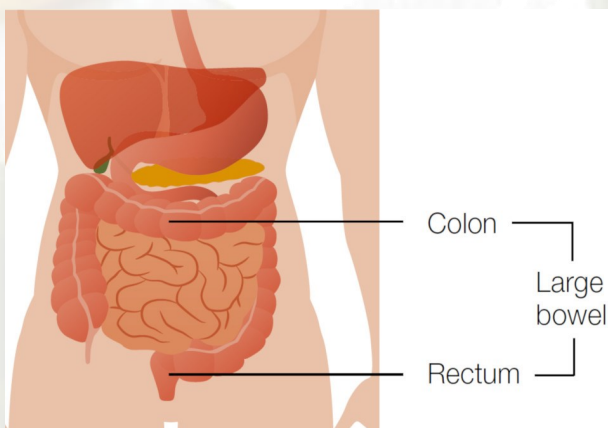
You must be registered with a GP and live in England to be invited. Your GP surgery gives us your contact information. Please make sure they have the correct details, including your:

- name
- date of birth
- address
- phone number
- email address.

If you are 75 or over, you can still take part in bowel cancer screening every 2 years, but you will not be invited. Phone our free helpline on **0800 707 60 60**.

What is the faecal immunochemical test (FIT).

The faecal immunochemical test (FIT)



FIT detects small amounts of blood in stool samples using antibodies specific to human haemoglobin.

FIT for screening is quantitative and the threshold for an abnormal result is set locally. For further information see the sections on the NHS bowel cancer screening programme in England, Scotland, Northern Ireland, and Wales.

The screening process

An invitation letter (including information on possible benefits and risks of screening) followed by a FIT test kit is sent to the participant's home address.

Participants unscrew the cap of the test, dip the end of the stick into a single bowel motion, replace the stick in the tube, screw the lid shut and return the sample in the prepaid envelope provided.

Results are sent by letter to the person's home address within 2 weeks of the lab receiving the completed kit.

The person's GP is informed of the result electronically.

How to do a bowel cancer screening home test (FIT kit)

You can do the bowel cancer screening test at home. Your test kit (FIT kit) should include a sample bottle, an envelope, and instructions on how to do the test.

To do the FIT kit:

- Write the date on the sample bottle.

Use a clean container to catch your poo. Do not let your poo touch the toilet water. This can be a bit difficult, and you may need to try a few times.

- Open the sample bottle and remove the lid, which has a sample stick attached.
- Gently scrape the end of the sample stick along your poo until all



HOW BOWEL CANCER SCREENING WORKS

the grooves are covered. Only a small amount is needed.

- Put the sample stick back into the sample bottle and close the lid tightly.
- Wash your hands.
- Check you've written the date you did the sample on the sample bottle.
- Put the sample bottle in the envelope included in your test kit and seal it.
- Post the envelope with your sample as soon as you can. Postage is free and you do not need a stamp.

Your poo sample will be tested to check if it contains blood. Having blood in your poo may be a sign of bowel cancer.

The lab checks the sample for tiny amounts of blood. This is because polyps and bowel cancers sometimes bleed. After this, most people will not need any further tests.

If there is blood in your poo sample, you may need further tests to find what is causing the blood and an appointment to talk about having a colonoscopy will be offered to you. A colonoscopy looks at the inside of your bowel.

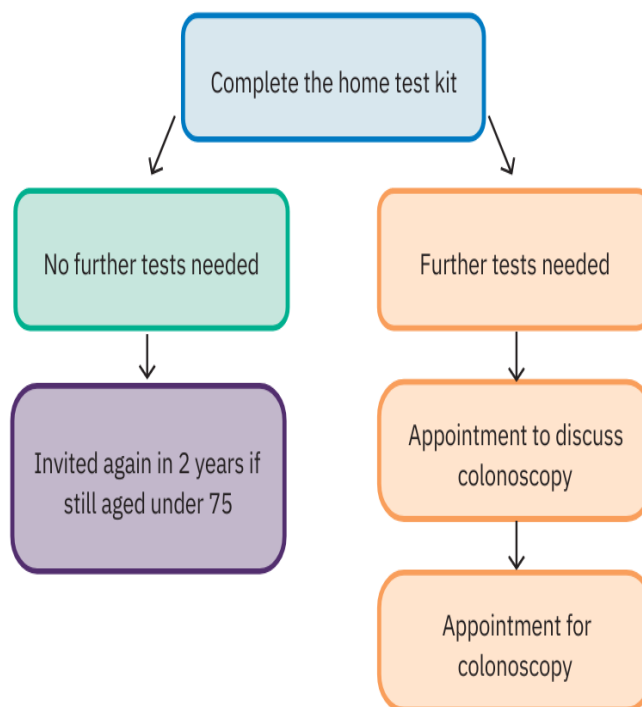
Getting the results of your bowel cancer screening home test

You'll usually get the results of your bowel cancer screening home test (FIT kit) within 2 weeks after sending your poo sample. Sometimes it can take longer. You will get a letter telling you the results.

Sometimes you may be asked to do the test again. This is usually to make sure the test has been done properly and gives the correct result.

Most people receive a letter that says 'no further tests needed at this time'. This doesn't completely rule out cancer. So it's important to know your body and what is normal for you. Contact your GP surgery if you have changes that don't go away.

If your letter says 'further tests needed' this means that blood was found in your sample. This can be caused by other medical conditions and does not necessarily mean cancer. But if it is cancer, finding it at an



early stage means treatment is more likely to work

If you do not get your results within 2 weeks, you can call the free bowel cancer screening helpline on 0800 707 6060.

Anxiety

Anxiety disorder is one of the most common mental health disorders. Unlike normal anxiety, the symptoms of anxiety disorders don't go away easily. They even grow worse as time passes that small triggers can easily prompt an anxiety attack. Anxiety is a feeling of unease, like worry or fear, that can be mild or severe.

Generalised anxiety disorder

GAD is a long-term condition. It causes you to feel anxious about a wide range of issues, rather than 1 specific event. affecting your daily life causing you distress

Everyone has feelings of anxiety at some point in their life. For example, you may feel worried and anxious about sitting an exam, or having a job interview.

During times like these, feeling anxious can be perfectly normal. But some people find it hard to control their worries. Their feelings of anxiety are more constant and often affect their daily lives.

Anxiety is the main symptom of several conditions, including:

- panic disorder
- phobias
- post-traumatic stress disorder (PTSD)
- social anxiety disorder (social phobia)

The information on this page is about a specific condition called generalised anxiety disorder (GAD).

Symptoms of generalised anxiety disorder

GAD can cause a change in your behaviour and the way you think and feel about things. It can also cause physical changes. This results in symptoms like:

- restlessness
- a sense of dread
- feeling constantly "on edge"
- difficulty concentrating
- irritability
- dizziness
- tiredness
- a noticeably strong, fast or irregular heartbeat (palpitations)

- muscle aches and tension
- trembling or shaking
- dry mouth
- excessive sweating
- shortness of breath
- stomach ache
- feeling sick
- headache
- pins and needles
- difficulty falling or staying asleep (insomnia)

Your symptoms may cause you to withdraw from social contact to avoid feelings of worry and dread.

You may also find going to work difficult and stressful and may take time off sick. These actions can make you worry even more about yourself and increase your lack of self-esteem.

Anxiety triggers

However, if you have GAD, it may not always be clear what you're feeling anxious about. Not knowing what triggers your anxiety can intensify it. You may start to worry that there'll be no solution.

Causes of generalised anxiety disorder

- The exact cause of GAD is not fully understood. It's likely that a combination of several factors plays a role, like:
- overactivity in areas of the brain involved in emotions and behaviour
- an imbalance of the brain chemicals serotonin and noradrenaline, which are involved in the control and regulation of mood
- the genes you inherit from your parents – you're estimated to be 5 times more likely to develop GAD if a close relative has it
- having a history of stressful or traumatic experiences, like domestic violence, child abuse or bullying
- having a painful long-term health condition, like arthritis
- having a history of drug or alcohol misuse

- However, many people develop GAD for no apparent reason.

For people who experience trauma, anxiety is a way that the brain and body has reacted to the traumatic experience – sometimes as a protective measure. When we're feeling attacked it makes sense to be on guard and not trust others. For people who have been through trauma, those thoughts and protective behaviours continue even when danger is gone.

Finding ways to feel safe, re-teach your body and mind to readjust to feelings of safety, and working through bad experiences can help.

Types of Anxiety Disorders

Generalized Anxiety Disorder: Chronic, exaggerated worry about everyday routine life events and activities, lasting at least six months; almost always anticipating the worst even though there is little reason to expect it. Accompanied by physical symptoms, such as fatigue, trembling, muscle tension, headache, or nausea.

Obsessive-Compulsive Disorder: Repeated, intrusive and unwanted thoughts or rituals that seem impossible to control.

Panic Disorder: Characterized by panic attacks, sudden feelings of terror that strike repeatedly and without warning. Physical symptoms include chest pain, heart palpitations, shortness of breath, dizziness, abdominal discomfort, feelings of unreality, and fear of dying.

Phobia: Extreme, disabling and irrational fear of something that really poses little or no actual danger; the fear leads to avoidance of objects or situations and can cause people to limit their lives.

Post-Traumatic Stress Disorder: Persistent symptoms that occur after experiencing a traumatic event such as war, rape, child abuse, natural disasters, or being taken hostage. Nightmares, flashbacks, numbing of emotions, depression, and feeling angry, irritable, distracted and being easily startled are common.

Social Anxiety Disorder: Fear of social situations in which the person is exposed to unfamiliar people or to possible scrutiny by others. The individual fears that he or she will act in a way (or show anxiety symptoms) that will be embarrassing and humiliating, often times leading to avoidance of social situations and severe distress when participation in social situations can't be avoided.

Treating anxiety disorder

GAD can have a significant effect on your daily life. There are several different treatments available that can help. These include:

- talking therapies – like [cognitive behavioural therapy \(CBT\)](#)
- medication – like a type of antidepressant called selective serotonin reuptake inhibitors (SSRIs)

There are also many things you can do yourself to help reduce your anxiety, like:

- trying a self-help course
- exercising regularly
- stopping smoking
- cutting down on alcohol
- drinking less caffeine

With treatment, many people are able to control their levels of anxiety. However, some treatments may need to be continued for a long time. There may be periods where your symptoms worsen.

Referral to a specialist

Ask your GP about local support groups for anxiety in your area. Or search our support service directory for mental health information and support services near you. Your GP will ask you about your symptoms and your worries, fears and emotions.

If treatments you've tried aren't helping, you may want to discuss with your GP whether you should be referred to a mental health specialist.

You'll usually be referred to your community mental health team. These teams include a range of specialists, including:

- psychiatrists
- psychiatric nurses
- clinical psychologists
- occupational therapists
- social workers

Anxiety disorders, however, are illnesses that cause people to feel frightened, distressed and uneasy for no apparent reason. Left untreated, these disorders can dramatically reduce productivity and significantly diminish an individual's quality of life.

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SPRING

Beginning of spring is just around the corner as seasons start to turn. Bringing with it the burst of spectacular display of colour as trees and flowers start to bloom, the sun is actually warm, it's almost as if the whole country starts coming out of winter hibernation.

Spring, brings with it a sense of renewal and rejuvenation it is an ideal time to prioritize your health and well-being. The change in seasons, the boost of fresh air, and longer hours of daylight as inspiration help to motivate us.

Getting active outdoors can greatly boost your mood and energy levels, whether it's running, biking, or simply walking. As you would take time out to declutter your home, take some time to declutter your health routine too. Revamp your diet, fitness, and self-care routines. After a long winter spent indoors, your body may be craving some vitamin D. spending time outdoors in the sunshine can increase your vitamin D levels, which is essential for immune function and overall health.

Spring is a time of growth, making it the perfect opportunity to connect with others. Whether it's joining a community group, gardening, walking, participating in outdoor group fitness classes, or simply spending time with friends and family outdoors, nurturing your social connections can have a positive impact on your mental and emotional well-being.

Spring is special because it symbolizes renewal, growth, and new beginnings. After a long winter, spring brings a sense of optimism and possibility, making it the perfect time to refresh your health habits so let's embrace the positive changes and take the first step to building a healthy life.

Mr Rajash Mehta

