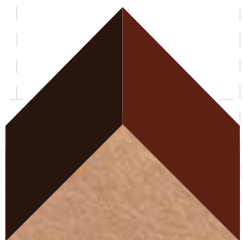
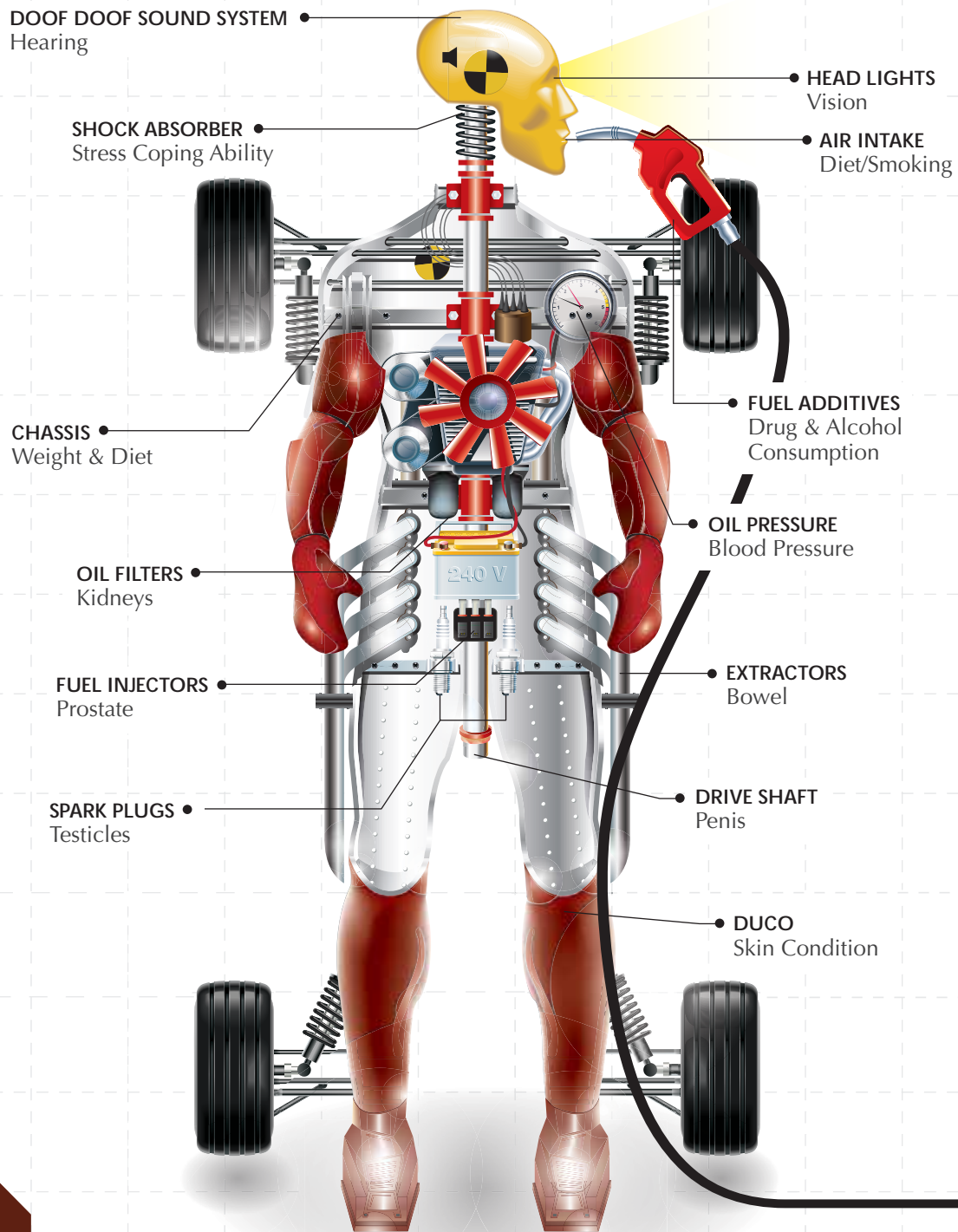


SPANNER IN THE WORKS?

WHEN WAS YOUR LAST SERVICE?



Australian
Men's Shed
Association
SHOULDER TO SHOULDER



MEN'S HEALTH TOOL BOX



Australian Men's Shed Association

SHOULDER TO SHOULDER

"Spanner in the Works?" 2013 – a Men's Health initiative by the Australian Men's Shed Association.

Many of us blokes are not very good at looking after ourselves physically or emotionally. Physically, if we have an ache or pain, our attitude is often that of "I'll battle through this" or "I'll wait a while and see if this gets better by itself". For most of us we get away with this most of the time. Only when the aches or pain are overpowering us do we make the decision to do something about it and get it checked out by a doctor or other Health Professional.

Likewise, emotionally, we may also take the wait and see attitude. Only when the situation becomes emotionally overwhelming do we seek some help.

Yet while we are doing this, while we are waiting and seeing, the problem can get worse. We may then end up taking out our frustration on our loved ones and friends. And, by waiting and seeing, we also run the risk of the problem becoming harder and harder to treat.

Health is complex - we can tend to become overwhelmed with information about our health. "Spanner in the Works" is an attempt to provide some key health messages to us men in a form that is understandable and achievable. "Spanner in the Works?" is not about telling you what to do but sets out some things that you can do (or not do) to improve your health and your chances of a longer and happier life. It gives you the opportunity to make adjustments as you see fit. Often minor adjustments can have a major impact on your health, relationships with loved ones and friends and your work.

Many of us look after our machines better than we look after ourselves. If our machines are not regularly serviced and maintained, if they do not have preventative maintenance carried out then mechanical and performance problems start to occur. If we neglect our health in any area it will catch up with us in the same way.

I encourage you all to take on board the recommendations from your health check and the information in this booklet. Your GP or Health Professional are valuable sources of information - use them!

If there is an area that you are concerned about then I also encourage you to seek further information from the organisations mentioned in the booklet – go to the website, ring them – they will be more than happy to provide further and more detailed information.

Gary Green
Community Engagement Coordinator
Australian Men's Shed Association
gary@mensshed.net or 0428 133 546

THE AUSTRALIAN TYPE 2 DIABETES RISK ASSESSMENT TOOL (AUSDRISK)

1. Your age group:

- Under 35 years ☐ 0 points
 35 – 44 years ☐ 2 points
 45 – 54 years ☐ 4 points
 55 – 64 years ☐ 6 points
 65 years or over ☐ 8 points

2. Your gender

- Female ☐ 0 points
 Male ☐ 3 points

3. Your ethnicity/country of birth:

a. Are you of Aboriginal, Torres Strait Islander, Pacific Islander or Maori descent?

- No ☐ 0 points
 Yes ☐ 2 points

b. Where were you born?

- Australia ☐ 0 points
 Asia (including the Indian sub-continent),
 Middle East, North Africa, Southern Europe ☐ 2 points
 Other ☐ 0 points

4. Have either of your parents, or any of your brothers or sisters been diagnosed with diabetes (type 1 or type 2)?

- No ☐ 0 points
 Yes ☐ 3 points

5. Have you ever been found to have high blood glucose (sugar) (for example, in a health examination, during an illness, during pregnancy)?

- No ☐ 0 points
 Yes ☐ 6 points

6. Are you currently taking medication for high blood pressure?

- No ☐ 0 points
 Yes ☐ 2 points

7. Do you currently smoke cigarettes or any other tobacco products on a daily basis?

- No ☐ 0 points
 Yes ☐ 2 points

8. How often do you eat vegetables or fruit?

- Everyday ☐ 0 points
 Not everyday ☐ 1 point

9. On average, would you say you do at least 2.5 hours of physical activity per week (for example, 30 minutes a day on 5 or more days a week)?

- Yes ☐ 0 points
 No ☐ 2 points

10. Your waist measurement taken below the ribs (usually at the level of the navel, and while standing):

Waist measurement (cm) _____

For those of Asian or Aboriginal or Torres Strait Islander descent:

Men

- Less than 90 cm ☐ 0 points
 90 – 100 cm ☐ 4 points
 More than 100 cm ☐ 7 points

Women

- Less than 80 cm ☐ 0 points
 80 – 90 cm ☐ 4 points
 More than 90 cm ☐ 7 points

For all others:

Men

- Less than 102 cm ☐ 0 points
 102 – 110 cm ☐ 4 points
 More than 110 cm ☐ 7 points

Women

- Less than 88 cm ☐ 0 points
 88 – 100 cm ☐ 4 points
 More than 100 cm ☐ 7 points

Add up your points

Your risk of developing type 2 diabetes within 5 years*:

5 or less: Low risk

Approximately one person in every 100 will develop diabetes.

6 – 11: Intermediate risk

For scores of 6 – 8, approximately one person in every 50 will develop diabetes. For scores of 9 – 11, approximately one person in every 30 will develop diabetes.

12 or more: High risk

For scores of 12 – 15, approximately one person in every 14 will develop diabetes. For scores of 16 – 19, approximately one person in every seven will develop diabetes. For scores of 20 and above, approximately one person in every three will develop diabetes.

* The overall score may overestimate the risk of diabetes in those aged less than 25 years.

What can I do now?

If you scored 12 or higher on the above test and live in Victoria, you may be eligible to enter the *Life!* program. *Life!* shows you how to adopt a healthier lifestyle to decrease your risk of developing type 2 diabetes, heart disease and stroke. For more information call 13 RISK (13 7475) or visit www.life!program.org.au. If you live outside of Victoria discuss your score with your doctor or call Diabetes Australia on 1300 536 588.



Fuel Injectors

International Prostate Symptom Score (IPSS)

Answer the following questions to see if you may have a problem with your prostate (water works)

	Not at all	Less than 1 time in 5	Less than ½ the time	About ½ the time	More than ½ the time	Almost always	Your score
Incomplete emptying - Over the past month, how often have you had the sensation of not emptying you bladder completely are you finish urinating?	0	1	2	3	4	5	
Frequency - Over the past month, how often have you had to urinate again less than two hours after you finished urinating?	0	1	2	3	4	5	
Intermittency - Over the past month, how often have you found you stopped and started again several times when you urinated?	0	1	2	3	4	5	
Urgency - Over the last month, how difficult have you found it to postpone urination?	0	1	2	3	4	5	
Weak stream - Over the past month, how often have you had a weak urinary stream?	0	1	2	3	4	5	
Straining - Over the past month, how often have you had to push or strain to begin urination?	0	1	2	3	4	5	
	None	1 time	2 times	3 times	4 times	5 times or more	Your Score
Nocturia – Over the past month, how many times did you typically get up to urinate from the time you went to bed until the time you got up in the morning?	0	1	2	3	4	5	
Total IPPS score 0-7 = Mildly symptomatic 8-19 = moderately symptomatic 20-35 = severely symptomatic							
Quality of life due to urinary symptoms	Delighted	Pleased	Mostly satisfied	Mixed	Mostly dissatisfied	Unhappy	Terrible
If you were to spend the rest of your life with your urinary condition the way it is now, how would you feel about that?	0	1	2	3	4	5	6



Coping Skills

This quiz is to determine the quality of your shock absorbers.

How does your vehicle travel the road of life?

Do you have a good set of shock absorbers that help you cope with the bumps in the road?

Below is a list of symptoms and complaints that most people have at some time in their life.

Check the list and rate yourself.	Almost never	Rarely	Some times	Quite often	Most of the time
I feel low in energy and slowed down	1	2	3	4	5
I have difficulty falling asleep or staying asleep because I worry or stew over things	1	2	3	4	5
I have temper outbursts that I can't control	1	2	3	4	5
My heart sometimes pounds or races	1	2	3	4	5
I feel hopeless about the future	1	2	3	4	5
I am easily annoyed or irritated	1	2	3	4	5
I feel trapped or stuck	1	2	3	4	5
I have lost interest in things I usually like (food, sex, recreation, socialising etc)	1	2	3	4	5
I feel shaky inside and anxious or panicky	1	2	3	4	5
I am unable to get rid of bad thoughts and ideas	1	2	3	4	5

How do your shock absorbers perform?

- If you scored 1's and 2's, your Shock Absorbers are in good order. Keep cruising!
- If you scored some 3's your Shock Absorbers are a bit dodgy; you've got a bit more stress than you need. Talk to someone.
- If you scored any 4's or 5's, you're in danger; your Shock Absorbers need replacing now! Talk to your GP!

Change the Mix: Ten Tips

Choose a healthy mix and try our ten tips to change your drinking habits.

- 1** Don't drink on an empty stomach—eat before and during drinking.
- 2** Set a limit to your drinking time and the amount you want to spend on alcohol.
- 3** Start with a juice or soft drink to quench your thirst.
- 4** Choose light beer or other low-alcohol drinks.
- 5** Drink slowly and don't top up drinks.
- 6** Refill your own glass.
- 7** Have water or other drinks in between alcoholic drinks.
- 8** Pace your drinking to someone who drinks less than you do.
- 9** Do something else while you drink—have a meal; play a game of pool or cards.
- 10** Have regular alcohol-free days each week.

For more information visit www.therightmix.gov.au

Phone **1800 555 254** from regional Australia
or **133 254** metro



Australian Government
Department of Veterans' Affairs

ARE YOU **AT RISK?**

1 IN 3 AUSTRALIANS IS AT INCREASED RISK OF KIDNEY DISEASE

WHAT IS KIDNEY DISEASE?

Kidney disease occurs when the nephrons inside your kidneys, which act as blood filters are damaged. This leads to the build up of waste and fluids inside the body.



AM I AT RISK OF KIDNEY DISEASE?

You are more at risk of kidney disease if you:

- Have diabetes
- Have high blood pressure
- Are obese (BMI of 30 or more)
- Smoke
- Have a family history of kidney disease
- Are of Aboriginal or Torres Strait Islander origin
- Are over 60 years of age
- Have established heart problems (heart failure or past heart attack) and/or have had a stroke



WHAT ARE THE SIGNS OF KIDNEY DISEASE?

It is not uncommon for people to **lose up to 90% of their kidney function before getting any symptoms.**

The first signs may be general and could include:

- High blood pressure
- Changes in the appearance of urine
- Blood in the urine
- Changes in the amount and number of times urine is passed

90% LOSS

of kidney function without symptoms.



WHAT IS A KIDNEY HEALTH CHECK?

Ask your GP for a kidney health check. This will involve a blood test, a blood pressure test and a urine test.



CAN EARLY DETECTION HELP?

If kidney disease is found early, medication, dietary and lifestyle changes can increase the life of your kidneys and keep you feeling your best for as long as possible.

WHAT ARE THE TREATMENT OPTIONS FOR END STAGE KIDNEY FAILURE?

There is no cure for kidney failure. The treatment options include:

Peritoneal Dialysis

A tube is permanently inserted into the abdomen. Special fluids are then introduced regularly to draw impurities from the body.

Haemodialysis

This involves connecting to a haemodialysis machine either at home or in hospital at least 3 times a week for around 5 hours at a time to cleanse your blood.



Transplant

If you're suitable for a transplant you can wait on average between 4 – 7 years for a kidney to become available.

Conservative Treatment

Without transplant or dialysis to replace kidney function, progression to end of life will occur. Treatment for symptoms is maintained for patient comfort.

www.kidney.org.au

1800 4 KIDNEY
5 4 3 6 3 9

KIDNEY[®]
HEALTH
AUSTRALIA



Heart
Foundation

Protect your heart - what men should know

In Australia, more than 45,000 men and women die from heart disease (including heart attack) every year – that is **one person every 12 minutes**.

Australian men are three times more likely to have a heart attack than women.

Heart disease can be prevented. There are a number of things you can do to reduce your chance of developing heart disease and having a heart attack.

There is no single cause of heart disease but there are risk factors that increase your chance of getting this disease.



Are you at risk of heart disease?	How to get a healthy heart
<p>Do you have?</p> <ul style="list-style-type: none">• high blood pressure• high cholesterol• Type 2 diabetes• a family history of heart disease including heart attack <p>Are you?</p> <ul style="list-style-type: none">• overweight or obese• not exercising regularly• a smoker or exposed to other peoples smokes <p>Do you?</p> <ul style="list-style-type: none">• eat food with too much fat and salt• suffer from depression, social isolation or lack of social support	<ul style="list-style-type: none">• Have a heart health check – a good start is to visit your doctor. The Heart Foundation encourages all men aged 45 and over to visit their doctor for a heart health check.• Manage high blood pressure and cholesterol – medicines can help with this.• Get rid of the gut – maintain a healthy weight and avoid drinking too much alcohol.• Give up the smokes - after one year of stopping smoking, your risk of getting heart disease is halved compared to those that continue to smoke.• Get moving – find 30 minutes a day to do an activity you enjoy.• Manage your diabetes – talk to your doctor about the best way to manage this.

For further information on heart health, call the Heart Foundation's Health Information Service on **1300 352 787** or visit the website at **www.heartfoundation.org.au**

Painful or stiff joints?

Take control - we have the tools to help you



Sore joints may be osteoarthritis

Osteoarthritis (OA) is a condition that affects the joints. In a normal joint, the ends of the bones are covered by a layer of cartilage. Cartilage helps the joint move smoothly and cushions the ends of the bones. In OA, the cartilage breaks down and becomes thin. This leaves the ends of the bones unprotected, and the joint loses its ability to move smoothly. OA mainly affects people over the age of 45, but it can develop in younger people. Osteoarthritis is different to osteoporosis which is a condition where the bones become fragile and brittle, causing them to break more easily.

What are the symptoms?

The symptoms of OA vary from person to person. Your symptoms will also depend on which joints are affected. OA tends to come on slowly, over months or even years. The most common symptoms are pain and stiffness of the joints, which usually worsen after resting or not moving the joint for a while. These symptoms may affect your ability to do normal daily activities, such as walking, climbing stairs and opening jars.



How to take control

- Visit www.MyJointPain.org.au
- Learn about OA and play an active role in your treatment
- See your doctor for diagnosis and advice
- Learn ways to manage pain
- Stay active; exercise is key
- Have a healthy diet; weight control is vital
- Acknowledge your feelings & seek help
- Phone the Arthritis Helpline for support



ARTHRITIS HELPLINE:

1800 011 041

ARTHRITIS INFORMATION SHEETS:

www.arthritisaustralia.com.au

Arthritis
AUSTRALIA



Incontinence – talk about it

Incontinence is a loss of bladder or bowel control that results in unwanted leakage of urine or faeces. It is one of the biggest health issues within our community, affecting one in four Australians, but it's something we rarely talk about.

Incontinence can leave men feeling frustrated, ashamed and embarrassed, and lead to feelings of anxiety and isolation. Yet, the Continence Foundation of Australia estimates that most cases can be cured or better managed.

Did you know?

Prostate problems are the biggest cause of urinary incontinence in men. Common symptoms are:

- trouble starting the flow of urine
- slow urine stream once started
- the need to pass urine more often, leaking between visits to the toilet
- an urgent need to pass urine
- burning sensation or pain when passing urine, or blood in urine
- feeling that the bladder is not fully empty after going to the toilet

If you are experiencing any of these symptoms, or are avoiding physical exertion, sexual contact, or social situations for fear of an accident, it's time to take control.

Talk to your doctor or phone the National Continence Helpline on **1800 33 00 66**. The Helpline, an Australian Government initiative, is a free service staffed by continence nurse advisors who can provide advice, resources and referrals to local continence clinics. It is staffed 8am–8pm AEST Monday to Friday.

View online National Continence Helpline coordinator Steve Marburg discussing men's continence problems at www.continence.org.au/men

For more information about bladder and bowel health, go to continence.org.au or phone the

National Continence Helpline 1800 33 00 66



strokefoundation

The signs of stroke

Learn the FAST message



What is a stroke?

A stroke is not a heart attack. A stroke happens when the supply of the blood to the brain is suddenly interrupted.

When blood stops flowing, the brain does not receive the oxygen it needs, and therefore brain cells in the area die and permanent damage may be done. Some strokes are fatal while others cause permanent or temporary disability.

Recognising signs of stroke

More men than women have a stroke and men are more likely to suffer a stroke at a younger age.

That is why it is important to recognise the signs of stroke. The FAST test is an easy way to remember and recognise the signs of stroke. FAST stands for Face, Arms, Speech and Time to act.

Using the FAST test involves asking these simple questions below:

Stroke is a medical emergency and time is critical. If you see any of the signs of stroke, call 000 immediately. Getting fast treatment can be the difference between death or severe disability and a good recovery.

Strokes are preventable

The chance of having a stroke can be reduced by:

- Keeping your blood pressure and cholesterol low
- Exercising and eating a healthy diet
- Limiting alcohol consumption
- Not smoking

For more information:

Visit: www.strokefoundation.com.au

Call: StrokeLine **1800 STROKE** (787 653)

How do you know if someone's having a stroke? Think...

F.A.S.T.

FACE

*Check their FACE.
Has their mouth
drooped?*

ARMS

*Can they lift both
ARMS?*

SPEECH TIME

*Is their SPEECH
slurred?
Do they
understand you?*

*TIME is critical. If
you see any of these
signs, call 000 now!*

Think F.A.S.T. Act FAST! CALL 000



Lung Health

Being breathless is not a normal part of getting older...

Coughing?

- Have a new or persistent cough – does it wake you at night?
- Cough up mucus, phlegm or blood?

Breathless?

- Struggle to keep up with others your age or doing your normal activity?
- Get tight in the chest or wheeze?

Not feeling so good?

- Keep getting chest infections?
- Have chest pain, fatigue or sudden weight loss?

**Have you had
your flu shot?**

If you answered yes to any of the above, your lung health may be at risk, particularly if you are a smoker or ex-smoker, or have worked in a job that exposed you to dust, gas or fumes.

Speak with your doctor about your symptoms and take this checklist along with you to your appointment; it will help start the conversation.

When you can't breathe...nothing else matters™



**Asthma
Australia**

To find out more about asthma
contact your local Asthma Foundation

1800 ASTHMA (1800 278 462)
asthmaaustralia.org.au



*"When you can't breathe...
nothing else matters"™*

To find out more about lung disease
call Lung Foundation Australia

1800 654 301
or take an on-line lung health checklist at
lungfoundation.com.au

Time to quit smoking?



One in two long term smokers will die from their addiction, usually 10-15 years earlier than non-smokers.

The strain put on your body by smoking often causes years of suffering and chronic illness before a premature death.

It's never too late to quit. You will feel the benefits of quitting straight away as your body repairs itself.

So why quit?

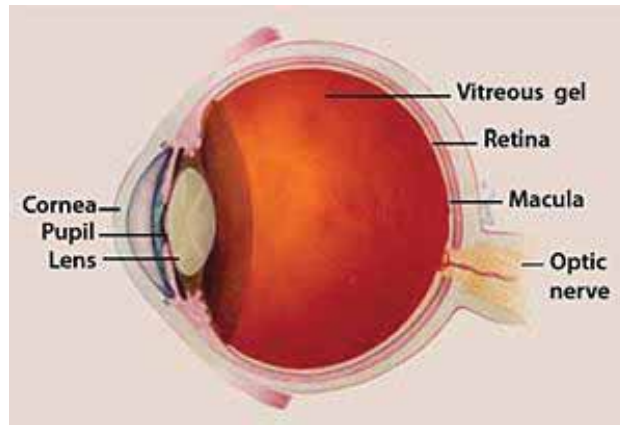
Save cash

If you give up a pack a day habit, you save a packet (and your health). The average packet of 20 cigarettes costs you about \$14.00. If you stopped smoking for a year, you would have saved \$5,100 – enough to reduce debt, buy a second hand car or treat your family to a holiday!

Need support?

Many people quit without assistance, but there's lots of support available:

- Call Quitline on **13 78 48** for advice and support
- Visit quit.org.au for information and resources
- Download the My Quit Buddy app
- Speak to your doctor or a health professional – nicotine replacement therapy like patches may be an option.



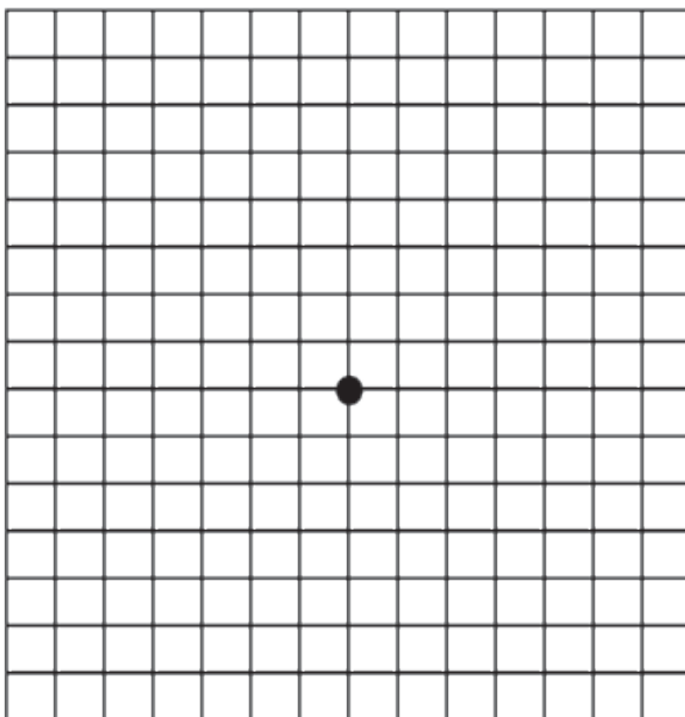
Macular Degeneration (MD)

- Macular Degeneration (MD) is a degenerative eye disease that causes loss of central vision – the vision we need to read, drive and recognise faces.
- MD is the leading cause of vision loss for people over 50yo in the Western world.
- MD is often related to ageing.
- Early detection is crucial as this offers eye care specialists the opportunity to discuss forms of treatment, rehabilitation and support services.

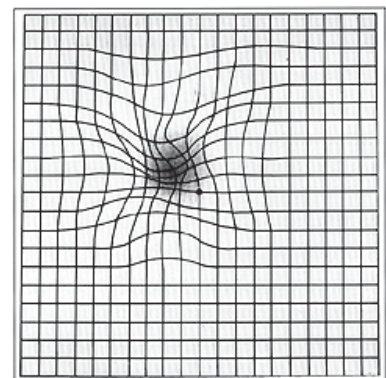
Take the Amsler Grid Eye Exam!

Directions:

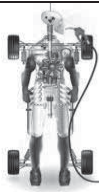
1. Do not remove glasses or contacts that you normally wear for reading
2. Stand about 33cm (13 in) from the grid in a well lit room
3. Cover one eye with your hand and focus on the centre dot of the main grid with your uncovered eye
4. Repeat with the other eye
5. If any grid lines appear wavy, broken or distorted OR if any part of the grid is blurred or missing areas please contact your eye care provider **IMMEDIATELY** as you may have symptoms of Macular Degeneration (see right figure)



Normal Vision



Possible Macular Degeneration

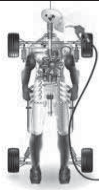


SPANNER IN THE WORKS?

SCREENING RESULTS

Original – leave in booklet!

Name:		Age:	GP Name:
Men's Shed/Screening Location:		State:	GP Location (town/suburb):
Cardio Vascular Disease – Heart Disease and Stroke			<i>Recommendation</i>
Blood Pressure <i>Ideal = less than 120/80</i> <i>High/normal = <140/90</i>	Result:		
Waist Measurement <i>Ideal = <94cms</i> <i>Overweight = 94-103cm</i> <i>Obese = >103cm</i>	Result:		
Cholesterol Blood Testing <i>Ideal = annual after 45 years</i> <i>OR</i> <i>Annual for high risk</i>	Last Tested:		
Exercise <i>Ideal = >30 mins/day, 5 days/week</i>	Amount done:		
Diabetes (AUSDRISK)		<i>Recommendation</i>	
Result:			
<p><i>6-11 points = May be at increased risk of type 2 diabetes. Discuss with GP. May need lifestyle changes to reduce risk.</i></p> <p><i>>11 points = May have undiagnosed type 2 diabetes. See your GP for further blood testing.</i></p>			
Prostate Enlargement/BPH (IPPS)		<i>Recommendation</i>	
Result:			
<p><i>0-7 = mild symptoms</i> <i>8-19 = moderate symptoms – discuss with GP</i> <i>20-35 = severe symptoms – discuss with GP</i></p>			
Coping Skills Shock Absorber Check List		<i>Recommendation</i>	
Result:			
<p><i>1s & 2s = good</i> <i>Some 3s = talk to someone</i> <i>Any 4s or 5s = talk to your GP</i></p>			
Other	<i>Recommendation</i>		
Skin Checks?	Annually by GP?		
Prostate Cancer?	Baseline PSA at 40. Annual DRE & PSA 50 to 70?		
Eyesight?	Annually after 40?		
Bowel Cancer?	FOBT every 2 years after 50?		
Smoking?	QUIT line Ph 13 7848?		
Immunisation?	Tetanus if last vaccine longer than 10 years ago? Flu Vaccine – annually after 65yo or high risk?		
4 Key Recommendations			

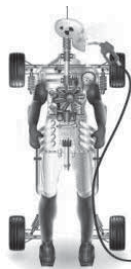


SPANNER IN THE WORKS?

SCREENING RESULTS

Copy – Health Worker to keep!

Name:		Age:	GP Name:
Men's Shed/Screening Location:		State:	GP Location (town/suburb):
Cardio Vascular Disease – Heart Disease and Stroke			<i>Recommendation</i>
Blood Pressure <i>Ideal = less than 120/80</i> <i>High/normal = <140/90</i>	Result:		
Waist Measurement <i>Ideal = <94cms</i> <i>Overweight = 94-103cm</i> <i>Obese = >103cm</i>	Result:		
Cholesterol Blood Testing <i>Ideal = annual after 45 years</i> <i>OR</i> <i>Annual for high risk</i>	Last Tested:		
Exercise <i>Ideal = >30 mins/day, 5 days/week</i>	Amount done:		
Diabetes (AUSDRISK)		<i>Recommendation</i>	
Result:			
<p><i>6-11 points = May be at increased risk of type 2 diabetes. Discuss with GP. May need lifestyle changes to reduce risk.</i></p> <p><i>>11 points = May have undiagnosed type 2 diabetes. See your GP for further blood testing.</i></p>			
Prostate Enlargement/BPH (IPPS)		<i>Recommendation</i>	
Result:			
<p><i>0-7 = mild symptoms</i> <i>8-19 = moderate symptoms – discuss with GP</i> <i>20-35 = severe symptoms – discuss with GP</i></p>			
Coping Skills Shock Absorber Check List		<i>Recommendation</i>	
Result:			
<p><i>1s & 2s = good</i> <i>Some 3s = talk to someone</i> <i>Any 4s or 5s = talk to your GP</i></p>			
Other	<i>Recommendation</i>		
Skin Checks?	Annually by GP?		
Prostate Cancer?	Baseline PSA at 40. Annual DRE & PSA 50 to 70?		
Eyesight?	Annually after 40?		
Bowel Cancer?	FOBT every 2 years after 50?		
Smoking?	QUIT line Ph 13 7848?		
Immunisation?	Tetanus if last vaccine longer than 10 years ago? Flu Vaccine – annually after 65yo or high risk?		
4 Key Recommendations			



SPANNER IN THE WORKS?

CONSENT FORM

Thank you for taking this opportunity to participate in a Men's Health Check.

The "Spanner in the Works?" project aims to encourage you to undertake regular "maintenance" and "servicing" of yourself to increase the chances of staying fit and well and helping to prevent illness.

'Spanner in the Works?' is a brief health check and should not be regarded as a replacement for a consultation or full health check carried out by a doctor/GP - all of us should have a complete health check by our doctor at least annually. We encourage you to take these health check results and discuss them with your doctor.

If you agree to participate in this health check at your own risk then please fill in the details below:

Personal Details

Name:

Date of Birth: Age:

Address:

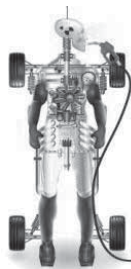
Town: State: Postcode:

Your GP:

Town: State:

- I give permission for the health workers involved to administer the "Spanner in the Works?" health check.
- I give permission for my results to be recorded for statistical purposes (results will be de identified).
- I give permission for my results to be sent to my General Practitioner – details above.
(Cross out those which do not apply)

Signature: Date:



SPANNER IN THE WORKS?

CONSENT FORM

Thank you for taking this opportunity to participate in a Men's Health Check.

The "Spanner in the Works?" project aims to encourage you to undertake regular "maintenance" and "servicing" of yourself to increase the chances of staying fit and well and helping to prevent illness.

'Spanner in the Works?' is a brief health check and should not be regarded as a replacement for a consultation or full health check carried out by a doctor/GP - all of us should have a complete health check by our doctor at least annually. We encourage you to take these health check results and discuss them with your doctor.

If you agree to participate in this health check at your own risk then please fill in the details below:

Personal Details

Name:

Date of Birth: Age:

Address:

Town: State: Postcode:

Your GP:

Town: State:

- I give permission for the health workers involved to administer the "Spanner in the Works?" health check.
- I give permission for my results to be recorded for statistical purposes (results will be de identified).
- I give permission for my results to be sent to my General Practitioner – details above.
(Cross out those which do not apply)

Signature: Date:



Physical Aspects of Health

We can tend to be overwhelmed by the amount of health information available. Below are 10 Tips for Better Health which will make it easier:

- Have red meat 5 times or less per week. Have fish at least 3 times per week
- Limit alcohol to 2 cans/stubbies mid strength 5 days per week
- Do physical activity at least 3 hours per week (30 minutes on 6 days)
- No smoking
- Eat 2 serves of fruit and of vegetables daily
- Choose margarine not butter
- Drink low fat milk
- Keep the waist measurement less than 100 cm
- Reduce salt intake. Never add salt to food at the table
- Don't try to tackle all these things at the one time – change one thing at a time

WHY BE MEDICINEWISE?

Each week around 70% of Australians take at least one prescription or non-prescription medicine. And every year around 190,000 people are hospitalised due to issues with medicines. Just as medicines have benefits, they also come with risks, and these risks are heightened when people don't understand what a medicine is, what they're taking it for and how it could affect them.

3 simple steps to being medicinewise

Know it's a medicine

Medicines don't just come on prescription — they include over-the-counter medicines from the pharmacy or supermarket, as well as herbal remedies, vitamins and other supplements, and they come in many forms including tablets, lotions, drops and inhalers.

Find the active ingredient

Knowing the active ingredient in your medicine will help you to avoid confusion and mistakes, such as accidentally double dosing if you use different brands with the same active ingredient, or taking a medicine that you're allergic to.

Ask the right questions

By asking questions to get the information you need from trusted sources, you can get the most out of your medicines and make better informed decisions.

Keep a Medicines List

If you regularly take medicines, make sure you keep a written list of all the medicines you are taking. Show this list to your doctor, pharmacist or other health professional before starting any new medicine and whenever your medicines routine changes. They will check for potential interactions, side effects or other reasons for why you shouldn't take a medicine.

Top 5 questions for when you're taking a medicine

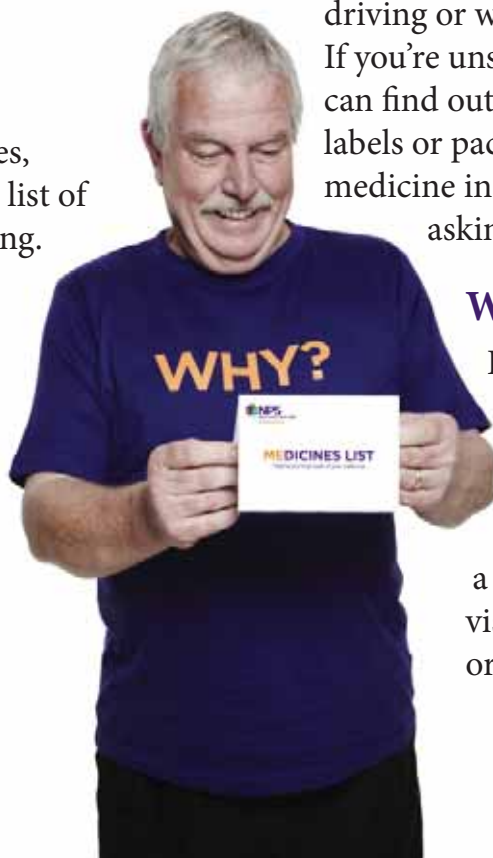
- ▶ What is the medicine for?
- ▶ What is the active ingredient?
- ▶ How do I take or use this medicine correctly?
- ▶ What are the possible side effects and what can I do about them?
- ▶ What should or shouldn't I do while taking this medicine?

Sometimes medicines and machines don't mix

Some medicines can cause side effects like dizziness, drowsiness, or impaired coordination, which can affect your ability to participate in certain activities. If you're experiencing these side effects, then avoid driving or working with tools or machinery. If you're unsure about your medicines, you can find out more by reading the medicine labels or packaging, or the consumer medicine information (CMI) leaflet, or by asking your doctor or pharmacist.

Where can I find out more?

Find out more about being medicinewise at nps.org.au/bemedicinewise or call NPS Medicine Line on 1300 633 424 (1300 MEDICINE). For a free copy of the NPS *Medicines List* visit nps.org.au/medicineslist or call (02) 8217 8700.





Matching your fuel intake to your engine needs

If your panels are bulging then you may need to adjust the fuel mix to the engine needs. With some tinkering and recalibration those bulges can be straightened out

Fuel Tune up

- Reduce your food intake – match your food intake to your calorie needs
- Eat plenty of fibre – bread, cereals (wholegrain is best), vegetables and fruits
- Reduce saturated fat in your diet – this means cutting down on fast foods (includes meat pies), removing the visible fat from meat before cooking, reading the label to choose the product with the lowest saturated fat
- Start exercising – walking the dog or kicking the footy. Bicycle riding or swimming. The important thing is to do it
- Limit your alcohol intake – swap to a low alcohol beer

Check your waist with a tape measure – ideally for blokes 94 cm (or less) around the belly button. (over 103 cm is entering the danger zone of obesity!)

MEN ARE MORE LIKELY TO GET TYPE 2 DIABETES.

**THE GOOD NEWS IS YOU
CAN PREVENT IT.**

Diabetes is Australia's fastest growing chronic condition, with around 275 Australians developing diabetes every day. Diabetes has no known cure and affects the eyes, kidneys, heart and nervous system.

HOW DO I KNOW IF I'M AT RISK?

People who are most likely to get diabetes often have these main risk factors:

- **Gender—males are more likely to develop diabetes**
- A family history of diabetes
- Age—as you get older your risk increases
- Ethnicity—ethnicities including Aboriginal or Torres Strait Islanders, Melanesians and those from the Indian and Chinese subcontinent have a higher risk
- Being overweight
- High cholesterol
- Smoking
- Being physically inactive.

You can have type 2 diabetes and not know it because there may be no obvious symptoms.

You can greatly lower your risk by being active, choosing healthier food options and being a healthy weight.

But changing your lifestyle is not easy to do on your own.

The **free** *Life!* program (VIC only) teaches you how to adopt healthy behaviours and a more active lifestyle to reduce your risk of type 2 diabetes, as well as heart disease and stroke. Funded by the Victorian Government and managed by Diabetes Australia–Victoria, the *Life!* program works with you to develop a **free** tailored plan to help you achieve your goals and live a healthier life. Delivered as either a group course or through telephone health coaching, the *Life!* approach is **accessible, practical** and **proven** to work.

If you live in Victoria and want to find out more about the free *Life!* program call 13 RISK or visit www.lifeprogram.org.au.

If you live in a state outside of Victoria, visit our website and take our online risk test to see if you're at risk. If you score 12 or higher, talk to your doctor about options available in your state, or **call Diabetes Australia on 1300 136 588.**

It's okay to talk.

Talk it over
**Mens
Line**
AUSTRALIA

1300 78 99 78
mensline.org.au

MensLine Australia is a free, professional telephone and online support service for men available 24/7 throughout Australia.

- Telephone counselling for the cost of a local call
- Free online text and video counselling at mensline.org.au
- An ongoing call back service for longer term support
- Specialising in family and relationship concerns
- Confidential and Anonymous



facebook.com/menslineaus

 on the line



Australian Government
Department of Families, Housing,
Community Services and Indigenous Affairs

Have you had your skin checked lately?



Did you know...

- Australian men have a 1:14 risk of developing melanoma - the deadliest skin cancer.
- Nearly 1,500 Australians die annually from melanoma, yet if detected early 90% of all melanoma can be successfully treated with surgery.
- For men over 60 years of age, the death rate from melanoma is increasing by 0.5% annually.

By undergoing a routine skin check with your treating doctor and monitoring your skin for any changes (such as itchy sores, skin lesions, lumps, unusual growths and changes to moles) you can dramatically reduce your risk of developing advanced melanoma.

Melanoma Patients Australia can visit your Shed and talk with you about melanoma and deliver our Danger Sun Overhead education workshop.

For further information contact
Melanoma Patients Australia

Phone **1300 88 44 50**

Email **info@melanomapatients.org.au**

Web **www.melanomapatients.org.au**

Melanoma Patients Australia ("MPA") is the only patient driven non profit organisation in Australia that offers a national network of support and information to patients, their families, carers, and friends, about melanoma prevention, diagnosis, management and treatment.



"A Community of Support in a Time of need"

1300 88 44 50 | www.melanomapatients.org.au

Factsheet > Prostate problems

Page 1 of 2

The prostate is a small gland in the male reproductive system. Its main role is to make fluid that protects and feeds sperm.

In young men, the prostate is about the size of a walnut (20g) and gets bigger as men get older.

It sits underneath the bladder and surrounds the top part of the urethra, the tube which urine passes through on its way from the bladder to the penis.

As the prostate is located near the rectum (back passage), growth of the prostate can be checked by a rectal examination where a doctor places a gloved finger into the rectum.

Prostate problems include:

- benign prostatic hyperplasia (BPH or prostate enlargement)
- prostatitis
- prostate cancer.

What is BPH?

BPH refers to benign prostatic hyperplasia, or non-cancerous enlargement of the prostate. BPH is the most common prostate problem in men.

As the prostate is positioned around the urinary tract, the enlargement of the prostate makes the urinary tract narrow and puts pressure on the base of the bladder.

This can affect the passing of urine in a number of ways, such as:

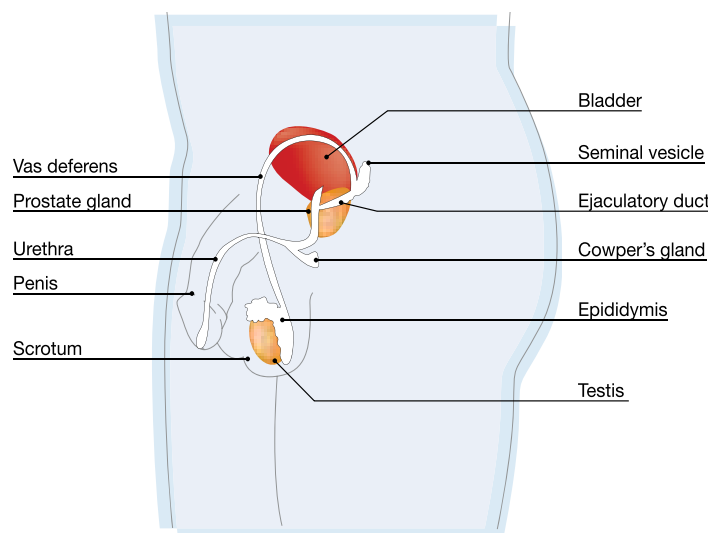
- weak or poorly directed stream
- urgent need to urinate
- need to pass urine more than twice a night.

How common is BPH?

BPH can start after the age of 40 and becomes more common as men get older. It affects nearly all men,

Talk to your GP about any urinary symptoms.

though some men do not have any symptoms. BPH usually becomes more of a problem over time, with symptoms getting worse if they are not treated.



What is prostatitis?

Prostatitis is an inflammation of the prostate gland, which means the area can feel sore and irritated. Prostatitis is not a life-threatening condition but it can be very painful and have a major effect on quality of life.

How common is prostatitis?

Prostatitis can affect men at any age. About one in every six men may have prostatitis at some stage during their lives.

What can cause prostatitis?

Prostatitis is most often caused by a bacterial infection.

Some sexually transmitted infections can increase the risk of bacterial prostatitis.

Other cases of bacterial prostatitis can be caused when the muscles of the pelvis or bladder do not work properly and urine flows back from the urethra into the prostate, causing infection or inflammation.

Also, bladder outlet obstruction (BOO, blockages from the outlet of the bladder), such as stones or tumours can lead to prostate inflammation.

What is prostate cancer?

In prostate cancer, cells within the prostate grow and divide abnormally so that a tumour forms.

Prostate cancer cells can grow very slowly and may not cause any problems or symptoms or become life-threatening.


However, less commonly, the cancer cells grow more rapidly and may spread to other parts of the body.

It is not known why some cancers grow at different rates and why some tumours spread to other parts of the body.

How common is prostate cancer?

Excluding some forms of skin cancer, prostate cancer is the most common type of cancer in Australian men, with more than 19,000 cases diagnosed each year.

It is more common in men aged over 50 years.

 For more information, visit www.andrologyaustralia.org, call 1300 303 878, or speak to your doctor.

Erectile dysfunction is when a man is unable to get and/or keep an erection that allows sexual activity with penetration. It is not a disease, but a symptom of some other problem, either physical, psychological or a mixture of both.

Erectile dysfunction should not be confused with low libido (little interest in sex) or the inability to reach an orgasm or ejaculate. Premature (too early) and retrograde ejaculation (into the bladder) are also different problems that need a different approach to diagnosis and treatment.

Occasional erectile dysfunction is normal. There is no need to worry about the occasional failure to get or keep an erection. Some of the causes of occasional erectile dysfunction include excessive intake of alcohol, anxiety and tiredness. One of the most common causes of erectile dysfunction in middle-aged men is lack of sleep.

How common is erectile dysfunction?

Erectile dysfunction is very common and becomes even more common in older men. An Australian survey shows that at least one in five men over the age of 40 years, increasing to about two in three men over the age of 70 years, often experience erectile problems, and about one in ten men are completely unable to have erections. With each decade of age, the chance of having erectile problems increases.

What causes erectile dysfunction?

Many factors can interfere with getting an erection and often two or three are present at one time. Sometimes there can appear to be

no obvious cause for the erectile dysfunction; but most cases of erectile dysfunction have physical causes.

There are many diseases that interfere with how the penis functions by either reducing blood flow or affecting the nerves. Importantly, when the first signs of erectile dysfunction happen, there is often an unknown underlying cause

When a man experiences erectile dysfunction he should see his local doctor, whether or not he wants to have sex.

such as diabetes, hypertension or high cholesterol.

Only about one in 10 cases of erectile dysfunction is caused by psychological factors. A man's sex drive (libido) can be affected by stress such as problems at work or financial worries.

Is erectile dysfunction a part of getting old?

There is no doubt that the ageing penis has less responsive muscle cells, which interfere with good erections. Arousal can take longer, it may take much longer before a second erection happens, and usually the erection is not as firm.

Where can help be found?

When a man experiences erectile dysfunction he should see his local doctor, whether or not he wants to have sex. The reason for this is that erectile dysfunction may be a symptom of underlying medical conditions. It is important to talk openly to a doctor about any problems with sexual functioning. Diagnosis of erectile dysfunction does not need complicated tests.

How is erectile dysfunction treated?

Usually there will not be a specific treatment that will lead to the cure of erectile dysfunction. However, there are treatments that will allow erections to happen and can enable sexual activity to take place.

Can erectile dysfunction be prevented?

At the present time there are no proven ways to prevent erectile problems developing, however keeping general good health may help lower the chance of having these problems.

Regular exercise and a sensible diet will reduce the risk of obesity, diabetes, high blood pressure and high cholesterol, therefore making erectile dysfunction less likely. For some men, seeking treatment early can stop erectile problems from getting worse.

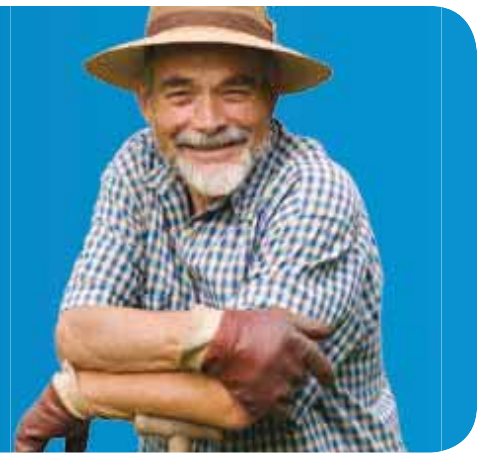
Does seeing a counsellor help?

Relationships are complicated and many factors cause tensions, which can affect sexual relations. For some men, problems can become ongoing and it can help to talk through the issue with a skilled counsellor. Improved sexual function may be delayed by failing to deal with the psychological side. Being open and honest with your partner will encourage a good understanding of the problem and couples can work together to bring about a positive result for their relationship.

For more information, visit www.andrologyaustralia.org, call 1300 303 878, or speak to your doctor.



Early detection of bowel cancer – what blokes need to know



Bowel cancer, also known as colorectal cancer, occurs in the colon or rectum. Bowel cancer is the third most commonly diagnosed cancer in Australia after non-melanoma skin cancer and prostate cancer. In 2007, nearly 8000 Australian men were diagnosed with bowel cancer and nearly 2200 died from the disease.

If bowel cancer is detected early, the chance of successful treatment and long-term survival improves significantly.

What are the symptoms?

Not all bowel cancers show symptoms, however you should see your doctor if you notice:

- Bleeding from the back passage or any sign of blood after a bowel motion.
- A change in usual bowel habit, such as straining (constipation) to go to the toilet or loose motions (diarrhoea).
- Abdominal pain or bloating.
- Weight loss for no obvious reason, or loss of appetite.
- Symptoms of anaemia – including unexplained tiredness, weakness or breathlessness.

Experiencing any of the symptoms listed does not necessarily mean you have bowel cancer. Any unusual or persisting symptoms should be reported to your doctor immediately.

Who is at risk?

Everyone is at risk of developing bowel cancer; however the risk greatly increases with age.

Some people may be at a greater risk of developing bowel cancer, including those with:

- A previous history of polyps in the bowel.
- A previous history of bowel cancer.
- Chronic inflammatory bowel disease (eg. Crohn's disease).
- A strong family history of bowel cancer.
- Increased insulin levels or type 2 diabetes.

People who are at an increased risk of developing bowel cancer should discuss possible surveillance options with their doctor.

Detecting bowel cancer – Faecal Occult Blood Test

The Faecal Occult Blood Test (FOBT) is a simple screening test that looks for hidden traces of blood in a bowel motion. It can help detect bowel cancer in its early stages, before symptoms occur. An FOBT can be done at home by taking tiny samples from two bowel motions using a test kit. People should have an FOBT every two years from age 50 years.

Watch a short video (5:53 mins) for more information about bowel screening at <http://bit.ly/cancercouncilbowelscreen>.

How much does bowel screening cost?

An FOBT from your doctor or pharmacist should cost you between \$30 and \$40.

What else can I do to reduce my risk?

Bowel cancer is one of the most preventable cancers. Many lifestyle risk factors may contribute to bowel cancer. Your most effective protection against bowel cancer is to:

- Be screened for bowel cancer every two years if aged 50 and older.
- Get 30 to 60 minutes of moderate to vigorous intensity exercise per day.
- Maintain a healthy body weight.
- Eat a well balanced diet.
- Avoid processed and burnt meat. Limit red meat intake to three to four times per week.
- Avoid or limit your alcohol intake.
- Quit smoking.

Remember, if you have any concerns or questions, contact your doctor.

Where can I get reliable information?

Cancer Council Helpline 13 11 20

Information and support for you and your family for the cost of a local call anywhere in Australia.

Cancer Council Australia website

(with links to state and territory Cancer Councils)

www.cancer.org.au

Hearing loss & age

Hearing loss is a common health issue in the community, currently affecting 60 per cent of Australians aged over 60 and 70 per cent over 70.

It is a part of the natural ageing process; as we get older our hearing is more likely to deteriorate.

Because hearing loss generally occurs gradually, many people don't realise their hearing is declining and it's often family or friends who notice it first.

YOU MAY HAVE A HEARING LOSS IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS:

- Do you have trouble hearing people unless they are facing you?
- Do others complain your TV is too loud?
- Do you have trouble hearing the phone ring?
- Do you find it difficult to follow conversations in noisy places?

If you are concerned about your hearing, a simple 15 minute hearing check is the first step you should take.

If you are found to have a hearing loss, Australian Hearing will guide you through what next steps you may have to take.

Tinnitus

If you have ever heard a buzzing, ringing, whistling, hissing or pulsing sound in your ears, then you probably experienced tinnitus.

Tinnitus refers to noises which are heard 'in the ears' or 'in the head' which don't come from an external source.

It is extremely common, with most people experiencing it at some point. It usually lasts for a short period of time, but around 10 per cent of the population experience persistent tinnitus and one per cent are severely bothered by it.

What can be done?

- An audiologist can test your hearing and provide more information about tinnitus, if you have a hearing loss, hearing aids can help you ignore it
- Many people find they can manage their tinnitus better by learning relaxation techniques and reducing stress in their lives
- Tinnitus is always more noticeable when it's quiet. Try and introduce low-level, unobtrusive sounds to help mask the tinnitus
- There are tinnitus support groups, including the Australian Tinnitus Association (www.tinnitus.asn.au) in most Australian States.



Your Hearing Check with Australian Hearing



A hearing check is a simple way to learn more about your hearing and what can be done to help.

Before we start, we'd like to ask you a few simple questions:

ARE THERE ANY SITUATIONS YOU HAVE TROUBLE HEARING IN?

ON A SCALE OF 1-5, (WHERE 1 IS EXCELLENT AND 5 IS POOR), HOW WOULD YOU RATE YOUR HEARING?

ARE YOU INTERESTED IN FINDING OUT ABOUT PRODUCTS AND SERVICES THAT COULD HELP YOU IN THOSE SITUATIONS?

WHO IS AUSTRALIAN HEARING?

Australian Hearing has 65 years' experience in providing the community with the best hearing care.

We are the largest provider of hearing services for children, young adults, pensioners, veterans and Indigenous people in Australia.

With more than 110 permanent centres and over 330 visiting sites around Australia, it's likely Australian Hearing has a location near you.

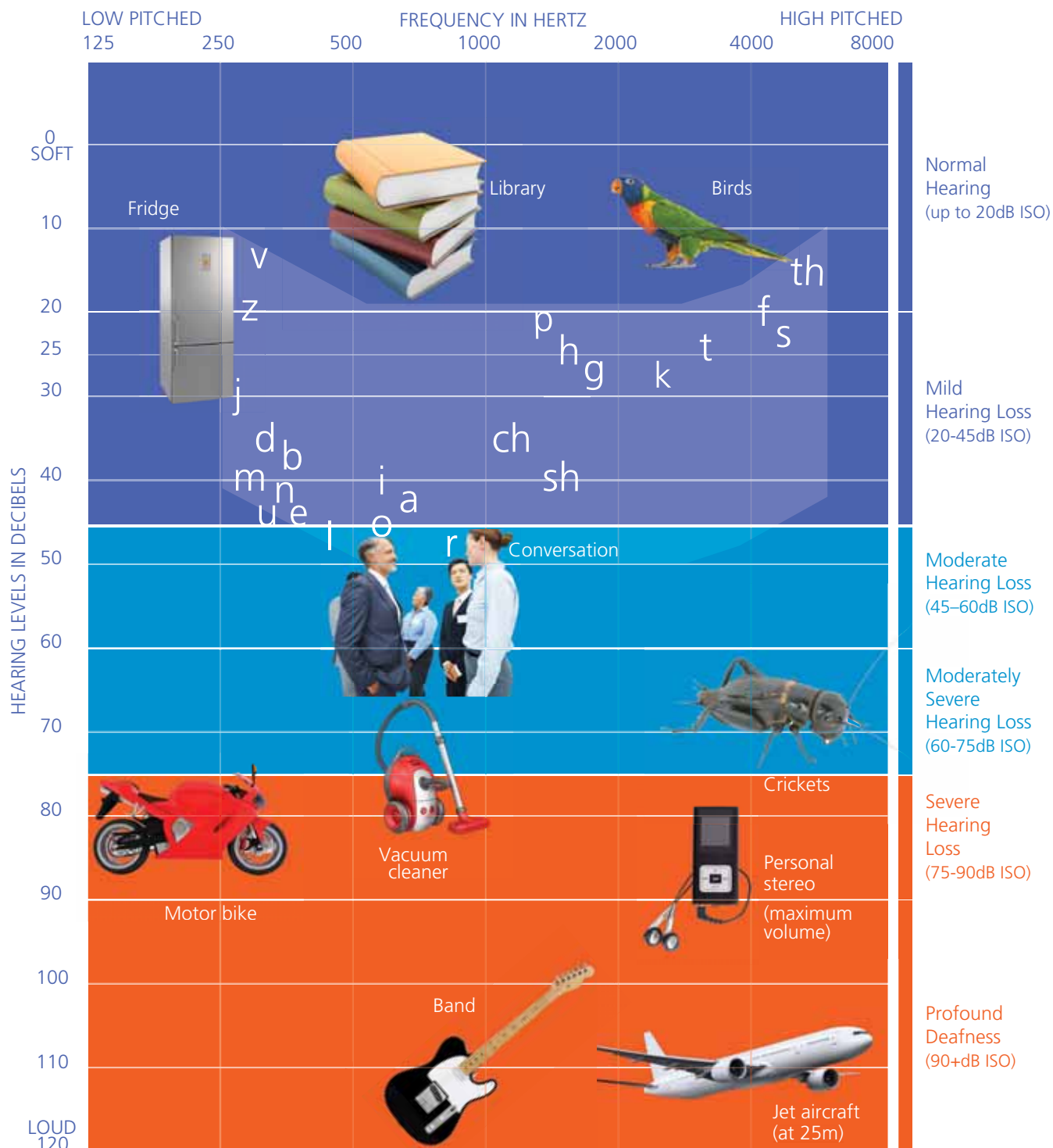
For more information call 131 797 or visit www.hearing.com.au

Australian Hearing provides subsidised hearing care for eligible people, including pensioners and most veterans.

Your hearing check results

Date of hearing check

Left ear ____1000 ____2000 ____4000 Hearing in your left ear: X
 Right ear ____1000 ____2000 ____4000 Hearing in your right ear: O



The team at Australian Hearing will go through your results and let you know the next steps recommended for your hearing.

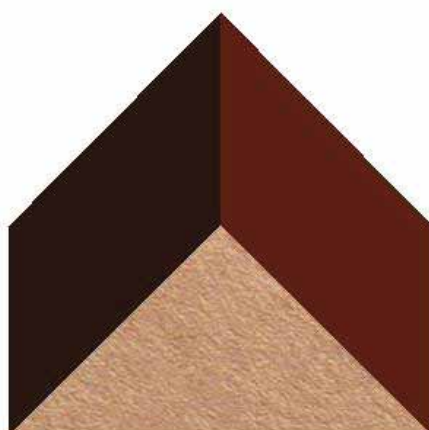


Australian Men's Shed Association
SHOULDER TO SHOULDER

“Spanner in the Works?” 2013 – a Men’s Health initiative by the Australian Men’s Shed Association.

The Australian Men’s Shed Association wishes to thank the following organisations who have contributed towards this booklet and/or the project “Spanner in the Works?”. Without them, this project would not have been possible.

- Andrology Australia
- Asthma Australia
- Australian Lung Foundation
- Australian Hearing
- National Prescribing Service
- The Department of Veteran Affairs – Peer Education Program
- Stroke Foundation
- Heart Foundation
- Cancer Council Victoria
- Cancer Council Australia
- Diabetes Australia - ‘LIFE’ program VIC
- Continence Foundation of Australia
- Wheatbelt Men’s Health Inc – WA
- On the Line – Mensline
- Australasian Men’s Health Forum
- Arthritis Australia
- Kidney Health Australia
- Melanoma Patients Australia



**Australian
Men's Shed
Association**
SHOULDER TO SHOULDER

Phone 1300 550 009

www.mensshed.org