Knowing how healthy you are

Categories: <u>Health talks with Dr Chireka</u>

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Knowing how healthy you are.

By Dr Brighton Chireka

I turned 40 recently and I received a letter from my own General Practitioner (GP) inviting me to come for a health check. I went and the outcome of that health check has made me to compile this article so that someone out there will benefit and also will not ignore the need for a general health check. In some countries like the United Kingdom the service is paid for under the National Health Service and there is no direct charge to the individual.

I know a lot of people say that they would rather not think about their health. My aim is to make sure that we think about our health on a daily basis, because we are what we eat and do after eating. I want to activate and motivate you to think about your health. Not only thinking, but also taking action that will promote your health and wellbeing.

Research has shown that 60 to 70 per cent of premature deaths are caused by behaviours that could be changed (Schroeder 2007), it is essential that patients and the general public become more engaged with adopting positive health behaviours. For this to happen you must be skilled, have knowledge and be confident to deal with your health issues. Let's start about a general health check.

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The results of your health check will give you and your General practitioner (GP) a clearer picture of your health, your risk of developing one of the vascular diseases (heart disease, kidney disease or stroke) and type 2 diabetes. Your risk of developing one of these diseases is never fixed. You can change it through your actions and I hope to call you to action by writing this article.

The health check cannot tell you with certainty that you will or will not develop one of these diseases in future. No health test can do that. The checks work out your risk as a percentage. This percentage is used to assess your likelihood of developing one of the vascular diseases. One example of the tools used is the cardiovascular risk score.

The cardiovascular risk score is made of many factors which tend to work together to increase your risk. Low risk is when the score is less than 10% and medium risk 10-19% whilst high risk is a score of 20% or more. Blood pressure, weight, cholesterol, smoking, alcohol intake and family history of vascular disease all contribute to the risk score. Taking action on some of these will help in reducing your risk of having a heart attack or stroke.

You must know your blood pressure and aim for it to be within normal limits of 90-140 /60-90mmHg. Blood pressure measures how strongly blood presses against the walls of your arteries (large blood vessels) as it is pumped around your body by your heart. Blood pressure is measured in millimetres of mercury (mmHg) and it is recorded as two figures: Systolic pressure: the pressure of the blood when your heart beats to pump blood out. Diastolic pressure: the pressure of the blood when your heart rests in between beats.

Let us look at the cut of point of blood pressure and discuss what it means. You may be told that your blood pressure is "140 over 90", or 140/90mmHg, it means you have a systolic pressure of 140mmHg and a diastolic pressure of 90mmHg. You have high blood pressure if readings on separate occasions consistently show your blood pressure to be 140/90mmHg or higher.

Another factor to look at is cholesterol (type of fat). High cholesterol is not a disease in itself, but it is important because of its link to blocked arteries. When arteries become blocked this can lead to a number of serious health problems such as heart disease and heart attack, stroke and kidney disease. High cholesterol is mainly caused by lifestyle factors that we can change.

Cholesterol is made by the liver from the fat in our bodies. That means that when we eat too much saturated fat we are more likely to have high cholesterol. Foods high in saturated fat include: meat pies and processed meats such as sausages and bacon, cakes, biscuits and pastries, red meat, hard cheese, butter, lard and cream.

Smoking is another factor and is not good for your health. It increases your risk of heart attack, stroke and cancer. Help is easily available if you want to stop smoking. If you do not smoke please do not start this terrible habit as you will regret in the near future.

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With the so-called good living of driving to work or wherever we want to go, we are now walking less and less and we are piling up kilos/pounds of weight. This type of lifestyle is now dangerous and I call you to act on your weight. Do you know your height and your weight? Do you know your BMI (body mass index) which is a measure of whether you are a healthy weight for your height. For most people, the ideal BMI is between 18.5 and 24.9. A BMI of 25 or more indicates that you are overweight. Clinical obesity is defined as BMI of 30 or more. A higher BMI means you have an increased risk of many serious health problems, including heart disease, stroke, type 2 diabetes and kidney disease.

What can you do if you are concerned after reading this article? I advise you to see your doctor and discuss your concerns further, but I will give you general advice here which you can start using from now going forwards. You need to eat a healthy diet taking appropriate calories and right portions as well as reducing foods high in saturated fats. You need to increase your physical activity. Getting started is easier than you think.

Changing a few daily habits can soon add up to a more active you. Be active every day. Every 10 minutes counts. If you don't think you can squeeze anything else into your day, see if you can reduce the time you spend sitting still and free up time to be active. Stop smoking if you do and also reduce your alcohol intake for those who drink.

Not taking any action about your health is a decision in itself and you will have no one to blame. This health blog is here to stay and it will continue to raise awareness to make sure that you do not lack knowledge. The ball is now in your court to take action and I hope you have and will be activated by this article.

This article was compiled by **Dr Brighton Chireka** who is a GP and a Patient Engagement Advocate (PEA) in Folkestone Kent in UK. You can contact him on **info@docbeecee.co.uk**

Disclaimer: This article is for information only and should not be used for the diagnosis or treatment of medical conditions. Dr Chireka has used all reasonable care in compiling the information but make no warranty as to its accuracy. Consult a doctor or other health care professional for diagnosis and treatment of medical conditions.

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