

## **The Anaesthetist Midlife Check-Up**

*Ross Warring, Ashburton Hospital, Canterbury, New Zealand*

All doctors are encouraged to have their own General Practitioner (GP). Having a GP means that your medical history is being tabulated and accumulated at one site and one Medical Practitioner has oversight of your medical care.

Information from Specialist Consultations, operations, procedures, results from investigations, past medical history and family history can then be correlated to your advantage and accessed when needed.

Medical Registration Authorities are currently recommending against self prescribing and against treating family members. It is currently only considered appropriate to self prescribe a continuing medication when the use of that medication has been recommended by and is being supervised by another practitioner. Psychotropic medication and any pharmaceutical that could be considered open to misuse should never be self prescribed.

When you have a designated provider for your primary care it is much easier to access care in emergencies or out of normal hours.

Doctors who have a GP are more likely to seek earlier medical assessment and be under surveillance for health protection.

Everyone is encouraged to visit their GP at around age 45 to undergo a 'wellness health assessment'. This involves answering questions on your past medical history and family history. A brief examination is performed to assess BP, weight, height, abdominal circumference and involves abdominal, cardiovascular, respiratory and breast or prostate examination. A 'care plan' is formulated for your ongoing health surveillance.

Screening tests such as renal function, glucose and lipids are recommended and specific individual surveillance needs can be formulated.

There is a great advantage of being aware of your family medical history especially with regard to age and cause of death of first and second degree relatives. If you are aware of a particular condition that has occurred in your family at an early age then presentation to your GP when your age is at least five years younger is advised.

Screening programs are up and running for breast cancer, cervical dysplasia and colonic cancer. Many other conditions have diagnostic or surveillance tests available. For example: prostatic cancer, Ischaemic heart disease; lung cancer and tuberculosis; ovarian and endometrial cancers; abdominal aortic aneurysm; hepatic tumors; oesophageal and stomach cancer; skin cancers.

Many conditions have a genetic or familial predisposition and a consultation with a GP for your "midlife check up" can only be to your advantage.