

# THE B.P. MONITOR

EDUCATION AND RESEARCH IN THE FIGHT AGAINST HIGH BLOOD PRESSURE

Incorporating **SALT SKIP NEWS**

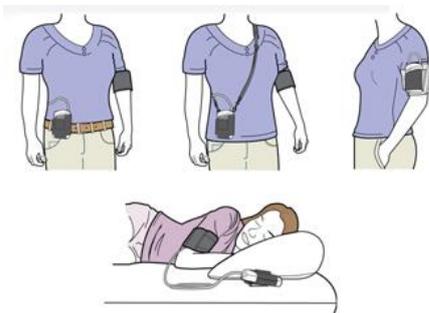
**JUNE 2021 NEWSLETTER – VOLUME 35, NUMBER 3  
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Congrats to QHA President, Professor Michael Stowasser! The Australian Federal Government has recognised the recent work, (2018 to date), Professor Stowasser and his submitting committee have made towards hypertension services with the provision of funding in the May 2021 Federal Budget. The Federal Government announced **\$40.5 Million** in funds, over 4 years, for services associated with ambulatory blood pressure monitoring to allow for improved diagnosis of hypertension. The QHA and our Members, very gratefully commend Professor Stowasser and his submitting committee, for this most welcome news. Read all about it in this edition of The B. P. Monitor.

## **Budget Announcement 2021: \$40.5 Million Over 4 Years for Ambulatory Blood Pressure Monitoring**

[Page 121](#) [Budget Paper No. 2](#)

The Australian Federal Government will provide \$186.5 million over four years from 2021-22 to implement changes to the Medicare Benefits Schedule based on the advice of the Medical Services Advisory Committee as well as to respond to sector feedback and issues identified during implementation of previous schedule changes. Funding includes: **\$40.5 Million** over four years from 2021-22 for services associated with Ambulatory Blood Pressure Monitoring to allow for improved diagnosis of hypertension.



Professor Stowasser

QHA Members and our industry partners warmly congratulate [Professor Michael Stowasser](#) and his Medical Services Advisory Committee colleagues from the High Blood Pressure Research Council of Australia for their achievements in guaranteeing access to ABPM medical services.

## **Taking Your Blood Pressure Medicine Is Important**

Taking your blood pressure lowering medicines, as prescribed by your treating doctor or GP has an important effect on your health outcomes.

**20%**

Patients with high blood pressure who take their medicine less than 20% of the time are twice as likely to be hospitalised as those who take their blood pressure lowering medicines as prescribed.

**#Hypertension = the silent killer**

## Our QHA Treasurer Needs Your Help Please

QHA's Treasurer, Mrs Bernadette Lynch, works hard to balance our audited books, reconcile the bank accounts and to pay our bills. Bernadette is also responsible for keeping QHA Membership records in compliance with the Australian Charities and Not For Profit Commission's ([ACNC](#)) strict guidelines.

The help needed is: figuring out who paid their membership/s and made a donation without providing any reference as to who it was that paid please!

Dates include:

11.02.21 funds transfer of \$50

18.03.21 bank deposit of \$25

If you recognise your payment – please let us know by

E: [info@hypertensionqueensland.com.au](mailto:info@hypertensionqueensland.com.au)

Or

T: Fran 041 7766 949

Thank you! Thank you also for the very kind donation ~ we'd like to send our Members QHA tax deductible receipts!

## Stick To Your Medicine Routine

Many people find their medicine routine difficult to stick to. Reasons why people have difficulty taking all of their medicines at the right time and dose include:

- Having to remember to take several medicines at once;
- Having a complicated medicine schedule;
- Having a chronic condition which means they need to take medicine/s for a long time;
- Sometimes forgetting to take their medicine;
- Their previous medicine/s may not have worked for them;
- They experienced unpleasant side effects or feelings;
- Their treatment may be constantly changing;
- They didn't see immediate benefits from the medicine/s they were taking;
- They 'felt better' and therefore decided they didn't need the medicine, or
- They may not have easy access to a doctor or pharmacist.

If you have questions or concerns about your medicines, speak to your doctor. Asking questions will help you get the information you need to make better decisions about your medicines. Source: [www.nps.org.au](http://www.nps.org.au)

## Managing Your Blood Pressure Lowering Medicines

### *Tips for managing your medicines*

- Take your medicine/s every day;
- Don't stop taking your medicine/s;
- Speak to your treating doctor or GP before you stop taking a medicine, and
- Keep a list of all of your medications.

Some people are concerned about taking medicine every day, even when they feel better. Alternative medicines may be available if you are experiencing side effects. Your doctor will be able to discuss these concerns with you.



### *Keep a list of all your medicines*

It can sometimes be difficult to keep track of all your medicines. A [medicines list](#) is a useful way to keep all the information about your medicines together. It may also be helpful if you need to see more than one doctor.

You can use a medicines list to record:

- all your medicines, including prescription, non-prescription and complementary medicines;
- what each medicine is for;
- how much of each medicine to take, and
- when and how to take each medicine.



Source: [www.nps.org.au](http://www.nps.org.au)

The QHA provides education and research in the fight against high blood pressure.

[info@hypertensionqueensland.com.au](mailto:info@hypertensionqueensland.com.au)

# Found



Out cruising in (Coles) supermarket, at the end of one aisle, I spotted Solomon's Matzo Meal Course. At 5mg of sodium per 100gm it had to come home with me! Now what to do with it? I could make Matzo Balls to add to soup or make Matzo Shortbread (recipes on the packet), use it to thicken stews and casseroles or even attempt Kosher for Passover if so inclined.

## Free Blood Pressure Check

Find out your blood pressure (BP) risk category by entering your age, sex and most recent blood pressure measurement into the free Health Engine Calculator.

Based on the National Heart Foundation's Guide to Management of Hypertension, the Calculator assigns your BP measurement to one of seven categories. Participants find out whether their blood pressure is normal, high or low, and how often they should have your blood pressure checked by your doctor.

Source: <https://healthengine.com.au/info/blood-pressure-calculator>

## Are You Eating Local, Healthy And High-tech?

Southern state high-end restaurants have remained quieter than some restaurateurs would have liked during the Covid19 pandemic but neighbourhoods across the nation are doing a thriving trade.

Local coffee shops, eateries, high streets – particularly butchers, grocers and independent outlets seem to be doing very well with diners showing a real love and appreciation for their local venues.

Eateries have joined ordering platforms developed in Australia, including HungryHungry and me&u, which are leading the way in contactless ordering technology.

With Australia opening up from Covid-19 before the UK or the US and now the rest of the world is eagerly watching what we're doing in the dining space – including the use of patrons using QR codes.

## What Are Quick Response (QR) Codes?

QR codes are similar to barcodes. They contain (e.g): [information](#) that can be read by the camera or another app on your smartphone, triggering your smartphone to perform an action such as:

- ✓ visiting a website;
- ✓ installing an app;
- ✓ joining a Wi-Fi network;
- ✓ adding someone's details to your contact list;
- ✓ dialling a specified phone number, or
- ✓ Sending a SMS/text message or an email to a specified recipient.

It would seem the move towards hi-tech dining is only going to gather pace.

Source: [www.goodfood.com](http://www.goodfood.com)

## Video And Phone Consultations Only Scratch The Surface Of What Telehealth Has To Offer

The COVID-19 pandemic has resulted in rapid changes to the way Australians access health care. We're now using telehealth more than ever and telehealth has become an important tool in managing our nation's health – it is much needed in our health system.

[Telehealth in lockdown meant 7 million fewer chances to transmit the coronavirus](#)

In March 2020, all Australians become eligible for funding of all telehealth services under the Medicare Benefits Schedule (MBS).

The MBS package covers phone and video consultations with GPs, specialists, nurse practitioners and allied health professionals - like physiotherapists, social workers and psychologists.

This has complemented existing MBS funding for medical video consultations for people in rural communities.

However, we now need to fully realise the potential of telehealth, we need to recognise it's more than just appointments via phone and video conferencing.

There are three main forms of telehealth: "real-time", "store-and-forward" and "remote patient monitoring".

**Real-time** is largely what we've got in place now — clinical consultations via phone and video conferencing.

During the pandemic, health professionals have heavily favoured telephone over video consultations. More than 91% of MBS-funded telehealth services are delivered by phone.



While telephone can be effective in some situations (for example, history taking, triaging or referrals), video conferencing can vastly improve the likelihood the clinician will make an accurate diagnosis.

Evidence shows video consultations can be as effective as in-person consultations, when it's appropriate to use telehealth, regardless of the type of clinician.

**Store-and-forward** is the collection of clinical information and the process of sending it online.

A common example is when a patient or their GP photographs a skin lesion sends the image to a dermatologist for an opinion and management advice.

Store-and-forward services exist in small silos in Australia. They often rely on hospital or commercial funding for support because they are not currently funded on the MBS.

Store-and-forward services are offered around the world for a variety of conditions. Evidence shows they make services more accessible and cost-effective, and clinicians are generally satisfied with them.

**Remote patient monitoring**, also called in-home monitoring or tele-monitoring, involves collecting disease-specific health information and watching how it changes over time.

We can monitor conditions such as high blood pressure or diabetes (that often don't have symptoms) using standard blood pressure machines or blood glucose monitoring devices that interact with apps or the internet.

If a patient's readings fall outside healthy limits, an alert can be sent to both the patient and their primary care team.

Regular feedback combined with education and support can enable people to better self-manage their condition. Remote monitoring is used internationally to manage chronic diseases, with good results.

A recent review showed it led to positive outcomes in 77% of studies, with more people staying well and out of hospital for longer.

**Source:** [Centaine Snoswell](#), Research Fellow Health Economics, [The University of Queensland](#); [Anthony Smith](#), Professor of Telehealth; and Director of the Centre for Online Health, [The University of Queensland](#); [Emma E Thomas](#), Research Fellow & Telehealth Consultant, [The University of Queensland](#); [Helen Haydon](#), Research Fellow, [The University of Queensland](#), and [Liam Caffery](#), Associate Professor in Telehealth and Director of Telehealth Technology, Centre for Online Health, [The University of Queensland](#). Read the [original article](#) published in The Conversation.

**QHA membership subscriptions and tax deductible donations are always very gratefully appreciated.**  
[www.hypertensionqueensland.com.au](http://www.hypertensionqueensland.com.au)

## Memory Bank Data

"The greatest glory in living lies not, in never falling, but in rising every time we fall."

~ **Nelson Mandela**

"The way to get started is to quit talking and begin doing." ~ **Walt Disney**

"Your time is limited, so don't waste it living someone else's life. Don't be trapped by dogma – which is living with the results of other people's thinking." ~ **Steve Jobs**

"If life were predictable it would cease to be life, and be without flavour." ~ **Eleanor Roosevelt**

"If you look at what you have in life, you'll always have more. If you look at what you don't have in life, you'll never have enough." ~ **Oprah Winfrey**

"If you set your goals ridiculously high and it's a failure, you will fail above everyone else's success." ~ **James Cameron**

"Life is what happens when you're busy making other plans." ~ **John Lennon**

[www.hypertensionqueensland.com.au](http://www.hypertensionqueensland.com.au)

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# Salt Skip News

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[www.hypertensionqueensland.com.au](http://www.hypertensionqueensland.com.au)

Use the **editorial address** when writing about the newsletter—see the panel on page 4.

## From Salted Pork To Vegemite: a potted history of salt in Australia

**“Is there enough salt?” is almost a universal culinary question if you are not a salt-skipper. Salt is a flavour enhancer and preservative that has influenced human civilisation, forged trade routes and even pops up in the English language. So what’s the story behind this savoury additive in Australia?**

### How the colony made salt

Salt was vital for British colonists and convicts who survived for months on salted or pickled pork and beef on the long journey to new shores, historian and gastronome [Dr Jacqui Newling](#) reveals in the May 2021 edition of the ABC’s [RN in The History Lesson](#).

"Meat needed to be salted to draw out the moisture ... preserving the food and making it safe to eat," Dr Newling says.

She describes the meats as "aggressively salty" to modern tastes.

"They all need to be salted to draw out the moisture ... preserving the food and making it safe to eat," Dr Newling says.

When imported salt rations ran short in Sydney in 1788, a rare letter from a female convict reveals her frustration at cooking without it.

From Sydney Cove she wrote that, "a scarcity of salt and sugar makes our best meals insipid".

Low supplies of salt with which to cure meats for soups or stews, or "pease" (pea and ham soup), came to a head in 1790, when a British store ship hit an iceberg off the Cape of Good Hope and never reached Australia.

### This forced the colonists to get resourceful...

They set up two big seawater boilers where the Sydney Opera House now sits at Bennelong Point. Other small salt works soon followed.

These boilers were intensively worked by convicts, but salt yields were still low.

When convict transportation stopped in the mid-1800's and men began to be paid for their labour, salt became a more expensive product.

The Romans had experienced this centuries earlier: the word "salary" is derived from the Latin word for salt – salarium. This was money given to Roman soldiers to buy salt.

With no natural salt source close to Sydney, colonists looked for other, less humid areas to find salt.

**Salt? No thanks**

## Salted Pork To Vegemite: a potted history of salt ~ Cont:

"Colonists were delighted to find a natural salt source for livestock in the native saltbush," author Dr Newling says.

In 1846, explorer Sir Thomas Mitchell wrote in his expedition journal, *In Search of a Route from Sydney to the Gulf of Carpentaria*, "in the salt plants on these plains, nature has amply provided for this taste of these large herbivora for salt".



### The perennial saltbush shrub provided fodder and flavour

Soon salt was being discovered across regional New South Wales and South Australia, with impacts extending beyond just the food-related.

"That (search for salt) pushed the perimeter of the colony much further into Aboriginal land and, as we know now, really changed the landscape and the ecology quite dramatically," Dr Newling says.

The search was on for shallow lagoons where salt could be scraped off the surface and dried by the sun – a technique known as solar evaporation that has been practiced for thousands of years.



In Australia, it was a manufacturing chemist from Manchester, Richard Cheetham, who saw the potential for the production of "solar salt".

The company he founded in the 1800's, Cheetham Salt, remains one of Australia's biggest producers of salt products.

Cheetham set up on the Victorian coast.

[Historian Peter Evans](#) says the process of making salt took several years.

"You had to keep taking in fresh water and moving it periodically through the sunning pans," Mr Evans says.

"Seawater is about 2.7 per cent salt. It would gradually concentrate in the sunning pans until it reached about 19 per cent. At about 25 per cent it was moved into special sand-lined, crystallising pans and you'd have large numbers of men who were shovelling up this salt into piles."

By the early 1900s Cheetham Salt was in every state in Australia, making salt not just for the table but for industrial uses as well.

It's estimated that only 2 to 3 per cent of salt produced globally is for culinary use. The chemical industry and weed killers also utilise salt, for example.

But that 2 per cent is everything in the kitchen, enhancing flavour and transforming our food.

### Saxa and the new competitors

Up until the 1990's Australian homes rarely featured more than one salt, often Saxa. But walk into a gourmet food store or market now and there's a rainbow of choice – from white to pink, to grey, to black. Colour in salt is often a result of small amounts of mineral impurities. For instance, beta carotene, which gives carrots their colour, can also turn salt pink.

### What About Vegemite?

[Dr Newling](#) says salty foods are entrenched in our culture. But there's one food product that blows out the salty scale.

"I do find it fascinating that our national food if you like, our iconic food, is one of the saltiest foods that people can imagine," she says.

"Other countries have Nutella or maple syrup. I think Australia's quite unique. You can always tell an Australian because they can palate that really intensely salty Vegemite. We've obviously got a taste for it," she says.

Source: [RN's The History Lesson](#)

**Skip The Salt**

## World Health Organisation Release Global Sodium Benchmarks

In May 2021, the World Health Organisation (WHO) released their Global Sodium Benchmarks, the first-ever globally harmonised set of benchmarks for more than 60 food categories that define the maximum levels of sodium that processed foods can contain. Categories include the leading contributors of salt to diets worldwide, such as:

- Bread;
- Cakes, sweet biscuits and pastries;



- Savoury snacks;
- Breakfast cereals;
- Cheese;
- Processed meat, and
- Plant-based meat alternatives.

Global benchmarks will help countries to set national policies and act as a basis for ongoing dialogue between WHO and the private sector at the global level. They were developed based on existing salt reduction targets from around the world and are therefore ambitious, but achievable.

Mhairi Brown, Programme Manager for World Action on Salt, Sugar and Health (WASSH), said: "This is a positive and ambitious step forward for salt reduction and we are hopeful that with WHO's leadership we can help to kick-start salt reduction efforts in countries that have so far struggled to implement a strategy. Governments, industry and even civil society, must all do more to lower salt intake and prevent the huge impact that salt has on health. Worldwide, everyone must commit to achieving these new benchmarks if we are to have any hope of reaching the recommended salt intake of less than 5g per day".

Resources: [Click here to see the new Global Sodium Benchmarks](#)

Source: [www.who.com](http://www.who.com)

## Salt Skippers Rule!

## How Much Junk Food Do You Eat?

Are you game enough to take CSIRO's new junk food challenge quizz? Just register your name and email and you are away! [Junk-Food-Analyser](#)



Source: <https://www.totalwellbeingdiet.com/au/health-tools/quizzes/junk-food-analyser/>

## Type Two Diabetes Australian Study: 50 Participants Needed

Type Two Diabetes could be 'reversed' in new Australian study set to replicate successful UK trial. The [Australian study is calling on patients to sign up](#), and hopes to also trigger cases of diabetes remission.

As part of the study, which is funded by Diabetes NSW and ACT, type two diabetes patients are required to adopt a strict diet for 12 months with fortnightly check-ins.

"There is potential to reverse the disease and keep it in remission with a maintained weight loss," Associate Professor Tania Markovic from the University of Sydney said.

Lead Researcher Kate Gudorf said: "While remission won't be possible for everyone - the study does offer participants a range of other health benefits - including lower blood pressure cholesterol - and a chance to reduce diabetes medications."

**Fifty Fifty Fifty Fifty Fifty Fifty**

There are 50 places still available in the study and [details are available here](#). Or T: Diabetes NSW & ACT 1300 342 238.

## Salt Skip News

Have you got a lifestyle tip, salt-free or low sodium recipe to pass onto other readers... Please email your tip or recipe to: [Malcolm.Riley@csiro.au](mailto:Malcolm.Riley@csiro.au)

## SALT SKIP NEWS

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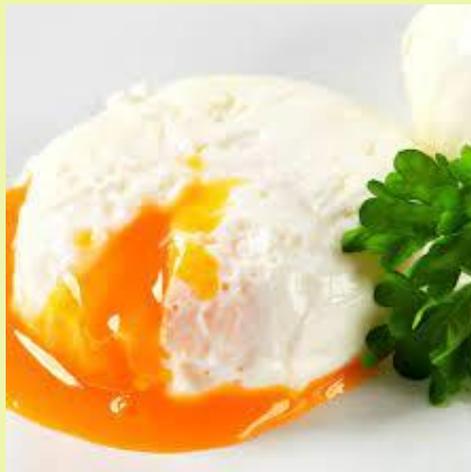
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print design websites

# Perfect Poached Eggs



Always wanted to create the perfect egg for Eggs Benny or for on top of salads, vegetables or whatever?

Serves 4. Prep 5 minutes. Cook 15 minutes.

### Ingredients:

1 tbs white vinegar (optional). *Vinegar? It's up to you. It helps set the egg whites faster, but once you've mastered poaching, you'll probably find you won't need it).*

4 free range eggs

Parsley to serve

### Method:

1. Fill a large, wide-based saucepan with hot water. Add vinegar (if using). Bring to the boil over medium heat. Reduce heat to medium-low so water is gently simmering. Crack an egg into a small cup or bowl. Produce a tight egg white by straining the raw egg with a fine mesh sieve This avoids wispy whites.
2. Stir hot water to create a whirlpool. Pour egg into the centre of the whirlpool. Cook for 3 minutes or until egg is cooked and egg yolk is soft. Using a slotted spoon, transfer egg to a paper towel-lined plate. Repeat with remaining eggs.
3. Use the paper towel to "roll" the eggs onto your plate. Enjoy!

Source: [www.woolworths.com.au/shop/recipes/perfect-poached-eggs](http://www.woolworths.com.au/shop/recipes/perfect-poached-eggs)



At Salt Skip News, we are always interested to hear from readers. Please send us your Salt Skip news, tips and salt-free or low sodium recipes... please email to [Malcolm.Riley@csiro.au](mailto:Malcolm.Riley@csiro.au)

*BP Monitor with Salt Skip News* is published every 2 months, from February to December (6 issues a year). This newsletter is not a substitute for health and medical advice. Readers should always seek the advice of a qualified health professional regarding their health or a medical condition.

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