





- Principal Officer's note
- Cholangiocarcinoma
- · Aortic aneurysm

- Cholecystitis
- The importance of a tobacco-free smile
- · Important contact details

Principal Officer's note

Welcome to the third 2023 edition of TransCare.

Petrus Wassermann *Principal Officer*

In this edition we cover cholangiocarcinoma, which is a type of cancer that forms in the slender tubes (bile ducts) that carry the digestive fluid bile. Also included is an article on aortic aneurysm, which is a bulge in the wall of your aorta, the main artery from your heart.

Remember to let the Fund know when your contact details have changed. If the Fund does not have updated contact details for you, we are unable to send you communication. If you have an email address and you have not updated the information, please contact the customer service department on 0800 110 268 or send an email to membership@transmed.co.za. Please include your membership number on all correspondence to the Fund.

We hope that you will take the time to read this newsletter and that you find it informative and helpful.

We welcome any suggestions that you may have on articles or member benefits you would like to see published in future newsletters. Please send your suggestions to suggestions@transmed.co.za.

Until the next edition, stay healthy and keep well.

Warm regards

Petrus Wassermann Principal Officer cholangiocarcinoma
is a type of cancer
that forms in the
slender tubes (bile
ducts) that carry the
digestive fluid bile.
Bile ducts connect
your liver to your
gallbladder and to
your small intestine.

CHOLANGIOCARCINOMA

Cholangiocarcinoma, also known as bile duct cancer, occurs mostly in people over the age of 50, although it can occur at any age.

Doctors divide cholangiocarcinoma into different types based on where the cancer occurs in the bile ducts:

- Intrahepatic cholangiocarcinoma occurs in the parts of the bile ducts within the liver and is sometimes classified as a type of liver cancer.
- Hilar cholangiocarcinoma occurs in the bile ducts just outside the liver. This type is also called perihilar cholangiocarcinoma.
- Distal cholangiocarcinoma occurs in the portion of the bile duct nearest the small intestine. This type is also called extrahepatic cholangiocarcinoma.

Causes

Cholangiocarcinoma happens when cells in the bile ducts develop changes in their DNA. A cell's DNA contains the instructions that tell a cell what to do. The changes tell the cells to multiply out of control and form a mass of cells (tumour) that can invade and destroy healthy body tissue. It's not clear what causes the changes that lead to cholangiocarcinoma.

Risk factors

Factors that may increase your risk of cholangiocarcinoma include:

- Primary sclerosing cholangitis: This disease causes hardening and scarring of the bile ducts.
- Chronic liver disease: Scarring of the liver caused by a history of chronic liver disease increases the risk of cholangiocarcinoma.
- Bile duct problems present at birth:
 People born with a choledochal cyst, which causes dilated and irregular bile ducts, have an increased risk of cholangiocarcinoma.

- Older age: Cholangiocarcinoma occurs most often in adults over the age of 50.
- Smoking: Smoking is associated with an increased risk of cholangiocarcinoma.
- Diabetes: People who have type 1 or 2 diabetes may have an increased risk of cholangiocarcinoma.
- Certain inherited conditions: Some DNA changes passed from parents to children cause conditions that increase the risk of cholangiocarcinoma. Examples of these conditions include cystic fibrosis and Lynch syndrome.

Prevention

To reduce your risk of cholangiocarcinoma, you can:

- Stop smoking. Smoking is linked to an increased risk of cholangiocarcinoma. If you smoke, stop. If you have tried quitting in the past and haven't been successful, talk to your doctor about strategies to help you quit.
- Reduce your risk of liver disease.
 Chronic liver disease is associated with an increased risk of cholangiocarcinoma. Some causes of liver disease can't be prevented, but others can. Do what you can to take care of your liver.

For instance, to reduce your risk of liver inflammation (cirrhosis), drink alcohol in moderation if you choose to drink. For healthy adults, that means up to one drink a day for women and up to two drinks a day for men. Maintain a healthy weight. When working with chemicals, follow the safety instructions.



An aortic aneurysm is a bulge in the wall of your aorta, the main artery from your heart. Aortic aneurysms form in a weak area in your artery wall. They may rupture (burst) or split (dissect), which can cause life-threatening internal bleeding or block the flow of blood from your heart to various organs.

What is an aortic aneurysm?

Your aorta is the largest artery in your body. It carries blood and oxygen from your heart to other parts of your body. It's shaped like a curved candy cane. Your ascending aorta leads up from your heart. Your descending aorta travels back down into your abdomen (belly).

An aneurysm can develop in any artery. An aortic aneurysm develops when there's a weakness in the wall of your aorta. The pressure of blood pumping through the artery causes a balloon-like bulge in the weak area of your aorta. This bulge is called an aortic aneurysm.

What are the different types?

There are two different types of aortic aneurysms. They affect different parts of your body:

- Abdominal aortic aneurysm (AAA):
 An abdominal aortic aneurysm develops in the 'handle' of your aorta that points down.
- Thoracic aortic aneurysm (TAA): A
 thoracic aortic aneurysm (heart
 aneurysm) occurs in the section
 that's shaped like an upside-down U
 at the top of your aorta. In people
 with Marfan syndrome (a connective
 tissue disorder), a TAA may occur in
 the ascending aorta.

What are the risk factors for an aortic aneurysm?

Both your family history and your lifestyle can play a role in your risk of developing an aortic aneurysm. Aortic aneurysms occur most often in people who:

- smoke
- are over the age of 65
- have a family history of aortic aneurysms
- have high blood pressure (hypertension).

What causes aortic aneurysms?

The causes of an aortic aneurysm are often unknown, but can include:

- atherosclerosis (narrowing of the arteries)
- inflammation of the arteries
- inherited conditions and especially those that affect connective tissue (such as Marfan syndrome and Ehlers-Danlos syndrome)

- injury to an artery
- · infections, such as syphilis.

Symptoms of a ruptured aneurysm come on suddenly and can include:

- dizziness or lightheadedness
- rapid heart rate
- sudden, severe chest pain, abdominal pain or back pain.

Finding an aortic aneurysm before it ruptures offers your best chance of recovery. As an aortic aneurysm grows, you might notice symptoms including:

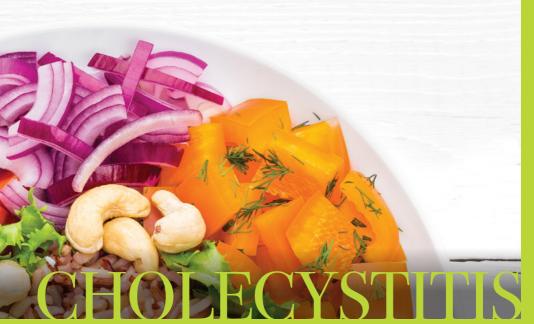
- difficulty breathing or shortness of breath
- feeling full even after a small meal
- pain wherever the aneurysm is growing (could be in your neck, back, chest or abdomen)
- painful or difficult swallowing
- swelling of your arms, neck or face.

Prevent an aortic aneurysm

Having high blood pressure, high cholesterol or using tobacco products increases your risk of developing an aortic aneurysm. You can reduce your risk by maintaining a healthy lifestyle. This includes:

- · following a heart-healthy diet
- getting regular exercise
- · maintaining a healthy weight
- quitting smoking and the use of tobacco products.

Source: https://my.clevelandclinic. org/health/diseases/16742-aortaaortic-aneurysm



Cholecystitis is caused by inflammation of the gallbladder.

The gallbladder is a small, pearshaped organ on the right side of the belly (abdomen) beneath the liver. The gallbladder holds a digestive fluid (bile) that's released into the small intestine.

In most cases, gallstones blocking the tube leading out of the gallbladder cause cholecystitis. This results in a bile build-up that can cause inflammation. Other causes of cholecystitis include bile duct problems, tumours, serious illness and certain infections.

If left untreated, cholecystitis can lead to severe, sometimes life-threatening complications, such as a gallbladder rupture. Treatment for cholecystitis often involves surgery to remove the gallbladder.

To lower your risk, choose a diet high in fruit, vegetables and whole grain.'

Symptoms

Symptoms of cholecystitis may include:

- severe pain in your upper right or central abdomen
- pain that spreads to your right shoulder or back
- tenderness over your abdomen when it's touched
- nausea
- vomiting
- fever.

Cholecystitis symptoms often occur after a meal, particularly a large or fatty one.

Causes

Cholecystitis is when your gallbladder is inflamed. Gallbladder inflammation can be caused by:

- Gallstones: Most offen, cholecystitis is the result of hard particles that develop in your gallbladder (gallstones). Gallstones can block the tube (cystic duct) through which bile flows when it leaves the gallbladder. Bile builds up in the gallbladder, causing inflammation.
- Tumours: A tumour may prevent bile from draining out of your gallbladder properly. This causes bile build-up that can lead to cholecystitis.
- Bile duct blockage: Stones or thickened bile and tiny particles (sludge) can block the bile duct and lead to cholecystitis. Kinking or scarring of the bile ducts can also cause blockage.

- Infection: AIDS and certain viral infections can trigger gallbladder inflammation.
- Severe illness: Very severe illness can damage blood vessels and decrease blood flow to the gallbladder, leading to cholecystitis.

Risk factor

Having gallstones is the main risk factor for developing cholecystitis.

Prevention

You can reduce your risk of cholecystitis by taking the following steps to prevent gallstones:

- **Lose weight slowly.** Rapid weight loss can increase the risk of gallstones.
- Maintain a healthy weight. Being overweight makes you more likely to develop gallstones. To achieve a healthy weight, reduce calories and increase your physical activity. Maintain a healthy weight by continuing to eat well and exercise.
- Choose a healthy diet. Diets high in fat and low in fibre may increase the risk of gallstones. To lower your risk, choose a diet high in fruit, vegetables and whole grain.

Source: https://www.mayoclinic.org/ diseases-conditions/cholecystitis/ symptoms-causes/syc-20364867



It is important for people who smoke or vape to visit their dental practitioner regularly to detect and treat any oral health problems and to check for signs of mouth cancer.'



Your lungs and gums agree on something that you should

have heard before: smoking is a very harmful habit. Tobacco use in any form, be it cigarettes, pipes, vaping or chewing tobacco, can have seriously negative effects on your oral health and particularly on your gums.

It is important for people who smoke or vape to visit their dental practitioner regularly to detect and treat any oral health problems and to check for signs of mouth cancer.

Smoking affects your teeth, gums and oral health

People who smoke have a higher risk of gum disease, tooth loss, complications after tooth removal, surgery in the mouth and developing mouth cancer. They are also more likely to get infections and do not heal as well as non-smokers.

The following are common oral problems that affect smokers:

- bad taste in the mouth and bad breath or halitosis
- decreased sense of taste
- gum disease
- oral cancer
- poor healing after mouth and gum surgery
- slow healing after tooth removal, which is also known as dry socket
- tooth loss
- whitening of the soft tissue in the mouth, which is called smoker's keratosis.

THE IMPORTANCE OF A TOBACCO-FREE

The risks of vaping

If you vape, make sure to tell your dentist.

Although vaping may seem less harmful than smoking regular cigarettes, this may not be the case for the health of your mouth. When you vape, you inhale vaping juices that include nicotine, heavy metals, volatile organic compounds (VOCs) and cancer-causing chemicals. The risk of vaping devices causing problems in your mouth is much higher if they contain nicotine.

Vaping may be seen as a way to quit smoking. Yet vaping may make it harder to quit smoking completely, which increases the risk of diseases associated with tobacco use, such as mouth cancer.



How to prevent teeth and gum problems

To avoid gum disease, a good oral hygiene routine must be a priority. If you are a smoker, there are some things you can do to prevent tooth and gum problems, including the following:

- If you smoke, try to quit. If you are finding it difficult to quit smoking, reduce
 the number of cigarettes you smoke to start off with. Quitting smoking reduces
 the risk of developing gum disease and mouth cancer and improves the
 person's response to gum treatment.
- When you use tobacco products, it may cause a dry mouth. This makes it
 easier for the bacteria in your mouth to stick to your teeth and gums. Drink
 plenty of water and opt for sugar-free gum to stimulate saliva flow.
- Use fluoride toothpaste and brush your teeth for two minutes every morning and every night.
- Floss every day to clean between your teeth.
- Visit your dentist every six to 12 months for a dental check-up and
 preventative care. Regular visits to your dental healthcare professional will
 help prevent the development of tooth decay (caries) or gum disease, as they
 are able to detect and treat early oral disease before it becomes more serious.

Source: https://www.betterhealth.vic.gov.au/health/healthyliving/smoking-and-oral-health





IMPORTANT EMAIL ADDRESSES

Services	Email address
Enquiries	enquiries@transmed.co.za
Banking details and membership	membership@transmed.co.za
Compliments	compliments@transmed.co.za
Complaints	complaints@transmed.co.za
Appeals	appeals@transmed.co.za
Claims	claims@transmed.co.za
Ex gratia	exgratia@transmed.co.za
Suggestions	suggestions@transmed.co.za

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