

FOURTH EDITION OF 2022

Welcome to the fourth edition of TransCare for **2022**

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Principal Officer's note

Petrus Wassermann Principal Officer

> Welcome to the fourth edition of TransCare for 2022. Unbelievably, we seem to be nearing the end of yet another year.

Whether you are traveling, enjoying leisure time at home or spending time with family and friends, it is important to remember to take care of yourself and your family.

If you are going on a road trip, buckle up, do not drink and drive, keep a safe following distance and, if you feel tired or restless, pull over at a safe stop and rest a little while.

Before moving on, it is my sad duty to inform you that earlier in 2022 we had to bid farewell to two of our member-elected Trustees, Mr T Campher and Mr W Goosen, who passed away. Their contribution on the Board of Trustees will be dearly missed.

In this edition we cover adjustment disorders, a group of conditions that can occur when you have difficulty coping with a stressful life event. We also share articles on tinnitus and protecting your hearing.

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

As this is the last newsletter for 2022, we wish you a healthy, happy festive season. May the new year be filled with blessings, happiness, joy and health.

Should you wish to give us feedback, please do not hesitate to do so by sending an email to: suggestions@ transmed.co.za.

Warm regards

Petrus Wassermann Principal Officer

ADJUSTMENT DISORDER

Adjustment disorders occur when someone has difficulty coping after a stressful event. It can cause psychological and physical symptoms that may need treatment like therapy or medication.

Understanding adjustment disorders

Adjustment disorders are a group of conditions that can occur when you have difficulty coping with a stressful life event. These can include the death of a loved one, relationship issues or being fired from work. While everyone encounters stress, some people have trouble handling certain stressors.

The inability to adjust to the stressful event can cause one or more severe psychological symptoms and sometimes even physical symptoms. There are six types of adjustment disorders, each type with distinct symptoms and signs.

Adjustment disorders can affect both adults and children.

These disorders are treated with therapy, medication or a combination of both. With help, you can usually recover from an adjustment disorder quickly. The disorder typically does not last more than six months unless the stressor persists.

Recognising the symptoms of adjustment disorder

The mental and physical symptoms associated with adjustment disorder usually occur during or immediately after you experience a stressful event. While the disorder lasts no longer than six months, your symptoms may continue if the stressor is not removed. Some people have just one symptom. Others may experience many symptoms.

ADJUSTMENT DISORDER CONTINUES>>

The mental symptoms of adjustment disorders can include:

- · rebellious or impulsive actions
- anxiousness
- feelings of sadness, hopelessness or being trapped
- crying
- withdrawn attitude
- lack of concentration
- loss of self-esteem
- · suicidal thoughts.

There is one type of adjustment disorder that is associated with physical symptoms, as well as psychological ones. These physical symptoms can include:

- insomnia
- muscle twitches or trembling
- fatigue
- body pain or soreness
- indigestion.

Types of adjustment disorder

The following are the six types of adjustment disorders and their symptoms:

1. Adjustment disorder with depressed mood

People diagnosed with this type of adjustment disorder tend to experience feelings of sadness and hopelessness. It is also associated with crying. In addition, you may find that you no longer enjoy activities that you formerly enjoyed.

2. Adjustment disorder with anxiety

Symptoms associated with adjustment disorder with anxiety include feeling overwhelmed, anxious and worried. People with this disorder may also have problems with concentration and memory. For children, this diagnosis is usually associated with separation anxiety from parents and loved ones.

3.Adjustment disorder with mixed anxiety and depressed mood

People with this kind of adjustment disorder experience both depression and anxiety.

4. Adjustment disorder with disturbance of conduct

Symptoms of this type of adjustment disorder mainly involve behavioural issues like driving recklessly or starting fights. Teens with this disorder may steal or vandalise property. They might also start missing school.

5. Adjustment disorder with mixed disturbance of emotions and conduct Symptoms linked to this type of adjustment disorder include depression,

anxiety and behavioural problems.

6. Unspecified adjustment disorder

Those diagnosed with unspecified adjustment disorder have symptoms that are not associated with the other types of adjustment disorder. These often include physical symptoms or problems with friends, family, work or school.

What causes adjustment disorders?

A variety of stressful events can cause an adjustment disorder. Some common causes in adults include:

- · death of a family member or friend
- relationship issues or divorce
- major life changes
- illness or a health issue in you or someone you are close to
- moving to a new house or place
- sudden disasters
- financial troubles or fears.

Who is at risk of developing an adjustment disorder?

Anyone can develop an adjustment disorder. There is no way to tell who out of a group of people experiencing the same stressor will develop one. Your social skills and methods for coping with other stressors may determine whether you develop an adjustment disorder.

How are adjustment disorders diagnosed?

In order to be diagnosed with an adjustment disorder, a person must meet the following criteria:

- experiencing psychological or behavioural symptoms within three months of an identifiable stressor or stressors occurring in your life
- having more stress than would be ordinary in response to a specific stressor, or stress that causes issues with relationships, in school or at work, or experiencing both criteria
- the improvement of symptoms within six months after the stressor or stressors are removed
- symptoms that are not the result of another diagnosis.

How are adjustment disorders treated?

If you receive an adjustment disorder diagnosis, you will probably benefit from treatment. You may require only short-term treatment or may need to be treated over an extended period. Adjustment disorders are typically treated with therapy, medication or a combination of both.

How to prevent adjustment disorders

There is no guaranteed way to prevent an adjustment disorder. However, learning to cope and be resilient can help you deal with stressors. Being resilient means being able to overcome stressors. You can increase your resilience by:

- developing a strong network of people to support you
- looking for the positive or humour in hard situations
- living healthily
- establishing good self-esteem.

It can be helpful to prepare for a stressful situation in advance if you know you will need to confront it. Thinking positively can help. You can also call your doctor or therapist to discuss how you can best manage especially stressful situations.

Build up your support system: Engage your family, friends and groups you are in to support you and uplift you in troubled times.

Do self-care regularly: Spend time taking care of yourself. Take a hot bath, read a book, write in a journal, go for a walk or play with your pets. Take time for yourself. Do things that make you feel better and make you happy. Set a regular schedule for `me time.'

Source: https://www.healthline.com/health/ adjustment-disorder



TINNITUS

Tinnitus is when you experience ringing or other noises in one or both of your ears. The noise you hear when you have tinnitus is not caused by an external sound and other people usually cannot hear it. Tinnitus is a common problem. It is especially common in older adults. Tinnitus is usually caused by an underlying condition, such as age-related hearing loss, an ear injury or a problem with the circulatory system. For many people, tinnitus improves with treatment of the underlying cause or with other treatment that reduces or masks the noise, making tinnitus less noticeable.

Symptoms

Tinnitus is most often described as a ringing in the ears, even though no external sound is present. However, tinnitus can also cause other types of phantom noises in your ears, including:

- buzzing
- roaring
- clicking
- hissing
- humming.

Most people who have tinnitus have subjective tinnitus, which is tinnitus only you can hear. The noises of tinnitus may vary in pitch from a low

A blockage can change the pressure in your ear, causing tinnitus.'

roar to a high squeal and you may hear it in one or both ears. In some cases, the sound can be so loud that it interferes with your ability to concentrate or hear external sound. Tinnitus may be present all the time or it may come and go.

In rare cases, tinnitus can occur as a rhythmic pulsing or whooshing sound, often in time with your heartbeat. This is called pulsatile tinnitus, which is an objective form of tinnitus, since your doctor may be able to hear your tinnitus when he or she does an examination.

Causes

A number of health conditions can cause or worsen tinnitus. In many cases, an exact cause is never found.

Common causes of tinnitus

In many people, tinnitus is caused by one of the following:

• Hearing loss: There are tiny, delicate hair cells in your inner ear (cochlea) that move when your ear receives

sound waves. This movement triggers electrical signals along the nerve from your ear to your brain (auditory nerve). Your brain interprets these signals as sound. If the hair inside your inner ear are bent or broken – this happens as you age or when you are regularly exposed to loud sounds – they can 'leak' random electrical impulses to your brain, causing tinnitus.

- Ear infection or ear canal blockage: Your ear canals can become blocked with a build-up of fluid (ear infection), earwax, dirt or other foreign materials. A blockage can change the pressure in your ear, causing tinnitus.
- **Head or neck injuries:** Head or neck trauma can affect the inner ear, hearing nerves or brain function linked to hearing. Such injuries usually cause tinnitus in only one ear.
- **Medication:** A number of medicines may cause or worsen tinnitus. Generally, the higher the dose of these medicines, the worse tinnitus becomes. Often the unwanted noise disappears when you stop using these medicines.



Other causes of tinnitus

Less common causes of tinnitus include other ear problems, chronic health conditions and injuries or conditions that affect the nerves in your ear or the hearing centre in your brain. These may include the following conditions:

- **Meniere's disease:** Tinnitus can be an early indicator of Meniere's disease, an inner ear disorder that may be caused by abnormal inner ear fluid pressure.
- Eustachian tube dysfunction: In this condition, the tube in your ear connecting the middle ear to your upper throat remains expanded all the time, which can make your ear feel full.
- Ear bone changes: Stiffening of the bones in your middle ear (otosclerosis) may affect your hearing and cause tinnitus. This condition, caused by abnormal bone growth, tends to run in families.
- Muscle spasms in the inner ear: Muscles in the inner ear can tense up (spasm), which can result in tinnitus, hearing loss and a feeling of fullness in the ear. This sometimes happens for no

explainable reason, but can also be caused by neurologic diseases, including multiple sclerosis.

- Temporomandibular joint (TMJ) disorders: Problems with the TMJ, i.e. the joint on each side of your head in front of your ears, where your lower jawbone meets your skull, can cause tinnitus.
- Acoustic neuroma or other head and neck tumours: Acoustic neuroma is a noncancerous (benign) tumour that develops on the cranial nerve that runs from your brain to your inner ear and controls balance and hearing. Other head, neck or brain tumours can also cause tinnitus.
- Blood vessel disorders: Conditions that affect your blood vessels – such as atherosclerosis, high blood pressure or kinked or malformed blood vessels – can cause blood to move through your veins and arteries with more force. These blood flow changes can cause tinnitus or make tinnitus more noticeable.
- Other chronic conditions: Conditions including diabetes, thyroid problems, migraines, anaemia and autoimmune disorders, such as rheumatoid arthritis and lupus, have all been associated with tinnitus.

Risk factors

Anyone can experience tinnitus, but these factors may increase your risk:

- Loud noise exposure: Loud noises, such as those from heavy equipment, chainsaws and firearms, are common sources of noise-related hearing loss. Portable music devices, such as MP3 players, can also cause noise-related hearing loss if played loudly for long periods.
- **Age:** As you age, the number of functioning nerve fibres in your ears declines, possibly causing hearing problems often associated with tinnitus.
- Sex: Men are more likely to experience tinnitus.
- **Tobacco and alcohol use:** Smokers have a higher risk of developing tinnitus. Drinking alcohol also increases the risk of tinnitus.
- Certain health problems: Obesity, cardiovascular problems, high blood pressure and a history of arthritis or head injury all increase your risk of tinnitus.

Complications

Tinnitus affects people differently. For some people, tinnitus can significantly affect quality of life. If you have tinnitus, you may also experience:

- fatigue
- stress
- sleep problems
- trouble concentrating
- memory problems
- depression
- anxiety and irritability

- headaches
- problems with work and family life.

Treating these linked conditions may not affect tinnitus directly, but it can help you feel better.

Prevention

In many cases, tinnitus is the result of something that cannot be prevented. However, some precautions can help prevent certain kinds of tinnitus:

- Use hearing protection. Over time, exposure to loud sounds can damage the nerves in the ears, causing hearing loss and tinnitus. Try to limit your exposure to loud sounds. And if you cannot avoid loud sounds, use ear protection to help protect your hearing.
- **Turn down the volume.** Long-term exposure to amplified music with no ear protection or listening to music at a very high volume through headphones can cause hearing loss and tinnitus.
- Take care of your cardiovascular health. Regular exercise, eating healthily and taking other steps to keep your blood vessels healthy can help prevent tinnitus linked to obesity and blood vessel disorders.
- Limit alcohol, caffeine and nicotine. These substances, especially when used in excess, can affect blood flow and contribute to tinnitus.

Source: https://www.mayoclinic.org/ diseases-conditions/tinnitus/ symptoms-causes/syc-20350156

PROTECT YOUR HEARING

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As we go about our day-to-day lives, we are bombarded with a steady stream of sounds that are sometimes so loud that they can damage our hearing. The key to keeping your hearing healthy is understanding just how much damage loud sounds can cause and what measures to take to avoid exposure to them. Repeated exposure to loud sounds – like those sometimes made by machinery and music – over a long period of time can gradually take its toll on your hearing without you even noticing. This type of damage is likely to be permanent.

The intensity of sound is measured in decibel (dB) and regular exposure to sounds at 85 dB or above, where 70 dB or below is considered safe, can affect your hearing on a more permanent basis. It is therefore important to know that you can protect your hearing with simple but effective preventative measures.

What can you do to protect your hearing?

The important thing to remember is that you can take preventative measures to protect your hearing:

- Try to reduce the length of time you are exposed to high noise levels.
- Turn the volume down on personal music devices and use sound-excluding headphones or earbuds.
- Avoid using too many noisy appliances at the same time at home.
- When purchasing new products, check the intensity of sound in dB; the lower the better.
- Move further away from any source of loud sounds.
- Wear hearing protection when working with noisy equipment like lawnmowers.

Source: https://www.amplifon.com/uk/ recognising-hearing-loss/prevention

Trans flash



In case of a medical emergency when an ambulance is required, please contact:

Europ Assistance 0800 115 750

IMPORTANT CONTACT DETAILS

WHO TO CALL TO GET IN TOUCH WITH THE FUND

| Services | Contact numbers | |
|---|-----------------|-----|
| Customer service department (general queries) | 0800 110 268 | 100 |
| Chronic medication application | 0800 122 263 | |
| Hospital and major medical pre-authorisation | 0800 225 151 | - |
| Optical services (PPN) | 0861 103 529 | |
| Dental services (DENIS) | 0860 104 941 | |
| HIV/AIDS | 0860 109 793 | |
| Ambulance authorisation | 0800 115 750 | |
| Fraud hotline | 0800 000 436 | |
| WhatsApp | 0860 005 037 | |

E 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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