

The Healthy Male

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Newsletter of Andrology Australia – Australian Centre of Excellence in Male Reproductive Health

Understanding men's health issues

Health literacy is "a measure of a person's ability to understand health-related information and make informed decisions about that information".¹ However, men's health literacy and its impact on attitudes and behaviour have been largely missing from discussions about men's health.²

In a 2009 article in *Critical Public Health*, authors Peerson and Saunders said issues surrounding men's health literacy were beginning to become clearer through more research into men's help-seeking behaviour. However, men's health-related knowledge and behaviour in everyday life is still poorly understood.

The National Male Health Policy, released in 2010, has a focus on raising awareness about preventable conditions and on building the health literacy of Australian males as a key way to improve health outcomes.³ According to Peerson and Saunders, better information is needed about men's health literacy and its relationship to masculinity, health-related attitudes and behaviour.² This information is particularly important when developing targeted public health campaigns for men.

Andrology Australia's 2011 public health campaign *Talk about your tackle* is aiming to improve men's awareness and understanding of their reproductive health.

The national television, radio and online campaign features former AFL player Matthew Richardson and his father Alan Richardson. Focus testing of the campaign during its development found the strong points of the television commercial were the simple message and the realistic awkwardness of the scene.

In line with the National Male Health Policy, the message is consistent, targeted and positive, and aims to build on the strengths of men and family relationships to support men in looking after their health.

This campaign is once again underpinned by the quality and evidence-based resources freely available through Andrology Australia.

Andrology Australia's hope is that this campaign will provide further information about how men respond to public health messages, and have a positive impact on men's physical health and wellbeing for years to come.

1 McGraw-Hill Concise Dictionary of Modern Medicine.© 2002 by The McGraw-Hill Companies, Inc.

2 Peerson, A. and Saunders, M. 2009-09, Men's health literacy : advancing evidence and priorities, *Critical public health*, vol. 19, no. 3-4, pp. 441-456.

3 Australian Government Department of Health and Ageing (2010). National Male Health Policy. Canberra, Commonwealth of Australia.

From the Director


Welcome to the first edition of *The Healthy Male* for 2011, and what a dramatic start to the year it has been. Our thoughts go out to all those who have been affected by the recent natural disasters across the country including the widespread flooding in Queensland and Victoria, the fires in Western Australia, and the recent cyclones in northern Queensland. Our thoughts also go out to those who have experienced the tragedy of the earthquake in Christchurch, New Zealand.

In this edition we are talking about "tackle". Known by many names, those bits below the belt are very important to overall health and wellbeing – so we at Andrology Australia think it's about time men started discussing their reproductive health more openly. To address this, Andrology Australia is launching a national campaign featuring former AFL star Matthew "Richo" Richardson.

Through a very simple and light-hearted message, we are trying to highlight the seriousness of men staying silent on health issues.

Tackle is a consistent theme this year, and for International Men's Health Week we are focusing on fishing tackle. Our ambassador Merv Hughes, a keen fisherman as well as a former Test cricketer, features in all of our IMHW resources this year.

Finally, thank you to all those who completed the readership survey in the last edition of *The Healthy Male*. We had a wonderful response and will be doing our best to implement your suggestions during the course of the year.



Professor Rob McLachlan



Community education

Time to talk tackle with Merv Hughes

"Let's face it. Unless the subject is sport, men aren't always the best talkers. And we really struggle when it comes to talking about reproductive health." - Merv Hughes (Andrology Australia Ambassador)

Andrology Australia's theme for International Men's Health Week 2011 is "Time to Talk Tackle". The fishing-themed resources feature our Ambassador Merv Hughes and aim to get men to address their health issues by talking to their doctor.

International Men's Health Week takes place from June 13-19 in 2011. The increased publicity about men's health makes it a great time to think about holding a men's health event in your community.

For IMHW 2011, Andrology Australia is producing promotional posters and a fun booklet that can be ordered now for delivery in late-March/early April.

You can also sign up to a monthly men's health events e-newsletter. This monthly e-newsletter will focus on ways to make your community men's health event the best it can be.

To order free resources for your International Men's Health Week event or to sign up to the e-newsletter, visit www.andrologyaustralia.org or call 1300 303 878.



Research round-up

Klinefelter syndrome undiagnosed in 50 per cent of cases

Research by Andrology Australia and the Murdoch Children's Research Institute revealed that the genetic condition Klinefelter syndrome is going undiagnosed in about 50 per cent of cases.



Lead author of the Klinefelter syndrome study,
PhD student Amy Herlihy

The research paper titled, "The prevalence and diagnosis rates of Klinefelter syndrome: an Australian comparison" was published in *The Medical Journal of Australia* in January.¹

Lead author, PhD student Amy Herlihy said Klinefelter syndrome (KS) was a genetic condition affecting males, which was caused by an extra X chromosome. She said the condition had a range of features including infertility, small testes, testosterone deficiency and gynecomastia (enlargement of male breast tissue), and varying degrees of learning and behavioural difficulties.

The research found that KS may be occurring more frequently than had been previously reported, yet many cases remained undiagnosed.

Ms Herlihy said up to 85 per cent of males with KS would be testosterone deficient after puberty, which could have profound medical and psychosocial impacts.

She said early detection would allow for treatments which could alleviate many of the symptoms as well as reducing condition-related morbidity and mortality.

The birth prevalence of Klinefelter syndrome in Victoria is estimated to be one in 450 males.

"Increasing awareness about KS, educating health professionals, and providing appropriate resources for individuals and their families, will go a long way to helping people with this condition," Ms Herlihy said.

She said the risks and benefits of population-based genetic screening for KS should also be considered.

¹ Herlihy, A. S., J. L. Halliday, et al. (2011). "The prevalence and diagnosis rates of Klinefelter syndrome: an Australian comparison." *Med J Aust* 194(1): 24-28.



Focus on: Are men prepared to talk about

In this year's *Talk about your tackle* campaign, Andrology Australia is trying, through a very simple and light-hearted message, to highlight the seriousness of men staying silent on health issues. The main message is that by encouraging men to "talk about their tackle" it will help ensure that they get the right treatment and support for reproductive health and associated conditions.

It's really important that if men do have a concern about their reproductive health – they speak to their doctor. But what do men need to know before they do this?

Do men visit the doctor?

At various stages across the life-span men will need to engage with health services, whether it's for management of acute or chronic injury or disease, or for preventative health care. GPs represent the gatekeepers of the Australian healthcare system, being the primary point of contact to a range of health services.

Andrology Australia conducted the Men in Australia Telephone Survey (MATEs) which showed that 85 per cent of men over the age of 40 had visited their doctor in the 12 months prior to the study interview.¹

In comparison to women, however, men do visit the doctor less. The 'Bettering the Evaluation and Care of Health' (BEACH) report shows that men do not visit their GP as much as women do, they have shorter consultations and see the GP later in the course of their illness, and they tend to leave significant health issues unattended.²

What are the barriers for men visiting their local GP?

In many instances, physical barriers exist for men in accessing a GP, for example, health services in regional and remote areas are less accessible than in urban areas. There are also groups of men who may not visit the doctor as often due to certain circumstances. For example, men often work long hours, or shift work, which restricts them from visiting GP clinics during standard opening hours.

There is often a perception that GPs only provide services for treating an injury or filling prescriptions, and not for a holistic approach to health and wellbeing. Although general practitioners are well equipped to provide continuing and comprehensive care, some men may not visit their GP unless a specific health concern needs to be addressed.

Society places an expectation on men to be "manly", and this means that men are sometimes expected to be independent, tough, assertive and physically competent. It can also mean men are permitted by societal norms to engage in risky health behaviours, avoid health issues and to handle any health issues on their own.³

What importance do men place on their health?

It is often assumed that men don't think about their health and place little importance on it. Men often report that "my wife/partner kept pestering me to see you" when they visit their GP or healthcare provider. However, in the Florey Adelaide Male Ageing Study (FAMAS) it was shown that men are aware of, and have a genuine interest in, their health and wellbeing.⁴

Men don't just ignore the problem, but often think about, and actively self-monitor their specific health problem before they see a GP.⁴ Most men do seek help when they have not been able to fix the problem themselves.⁴

GPs should reinforce the need for men to be more proactive about their health, but GPs should also take the time to listen to the way men speak about their health and appreciate the key qualities men value when visiting their doctor.

How often should men go to the doctor?

More than 40 per cent of doctors' patients are men and men visit their doctor less from adolescence onwards.¹

There are no recommendations as to how often men should visit their GP and get a general health check as it depends on age, health and a whole range of other factors.

Your doctor will be able to advise how often or when your next appointment should be.

A new Medicare item was introduced in 2006 to encourage men and women between the ages of 45 and 49 who are at risk of developing a chronic disease to visit their GP for a health check.

The Australian Institute of Health and Welfare estimates that 94 per cent of males between the ages of 45 and 54 have at least one risk factor for cardiovascular disease.⁵ The free health check aims to help detect and prevent chronic disease, and encourage early intervention strategies.

Why is it important to know your doctor?

GPs are not just available for diagnosis and treatment of health issues – they are a complete health resource. There are many benefits to building a relationship with your GP. By regularly visiting the same GP, he/she will know your long-term medical history and have a better understanding of your health behaviours and needs. This then means that you can make the most of your consultation time when you are there.

You are also more likely to make an appointment for the important follow-up consultation. Developing trusting relationships can encourage men to visit the doctor, speak about their health, make positive changes to health behaviour, and make repeat visits for further health care.

If you haven't been to the doctor for a long time, or are new to an area, booking a long consultation for the first appointment will ensure that the doctor has time to take a full medical history.

And if your doctor can't help you directly with your health concern, he or she can refer you to someone else locally.



ut their "tackle"?



Are health services male-friendly?

There are suggestions that health services and systems are mostly targeted towards women, which may 'disengage' men from the health system.

The Royal Australian College of General Practitioners (RACGP) has a men's health policy that provides strategies for GPs to improve better access by men of their services.⁶ These include:

- Developing a style of consultation that better suits men
- Creating more male friendly environments
- Offering services in areas other than the GP clinic
- Marketing GP services to men

Although there is no evidence to suggest whether such interventions are effective, it is expected that such "good practice" changes will make men feel more comfortable and engaged when they attend.

Providing men with written health information is recommended by the RACGP as patients only remember three to four key messages from a consultation.⁸ There are many quality health brochures available from a range of organisations including health promotion programs, local community organisations and support groups, and resources from Andrology Australia available both in hard copy and online.

What questions should you ask your GP?

A number of guidelines are available for GPs to guide their health assessments. It can also help if men ask specific questions to get a better understanding of ways to maintain good health.

Suggested questions for men under the age of 40:

- What is a sexually transmitted infection and should I have a test?
- How much alcohol is okay?
- What will cigarette smoking and other drugs do to me?
- Can young people get cancer and how would I know if I have it?
- How does Medicare help me with the costs of care?
- Should I have private medical insurance?

Suggested questions for men over the age of 40:

- Am I at risk of developing any diseases and do I need tests?
- Is my family history important?
- What about my prostate – should I get it checked and what about the prostate blood test?
- Is my weight a problem?
- What about my cholesterol?
- Do I have diabetes?*

** Available to order as a health check card from the Andrology Australia website www.andrologyaustralia.org*

How do you discuss sensitive issues with your doctor?

Discussing sensitive health issues such as sexual dysfunction is a shared responsibility between patient and doctor.

Research has shown that GPs do consider sexual health important, but are often reluctant to discuss it with older individuals because of stereotyped views of sexuality and ageing.⁸ If a patient is reluctant to talk about sexual health with their doctor, then this can worsen these GP barriers by reinforcing assumptions about asexuality, especially later in life.

You can talk to your doctor about sexual health problems. It can be difficult to raise these issues, but many men are still sexually active in older age.¹ It is important to remember you are not alone. If it is difficult to bring up a specific topic such as erectile dysfunction, it may be easier to say that you are having problems "in the bedroom" or with your "sex life".

Sometimes it may be helpful to take information in that you've seen on the internet or in a brochure. GPs need to be comfortable to talk to their patients about sexual health problems and need to be proactive in these discussions. Asking about sexual health should be a routine part of taking a patient's medical history. It is important to normalise conditions and have the tools to deal with both the physical and psychological aspects of sexual health problems. It could also be helpful for GPs to nominate the conditions and indicate, for instance, that "many men with diabetes have problems getting an erection".

Where can you find a doctor in your area?

If you are a man who does not have a regular GP, your local Division of General Practice can give you a list of the doctors practising in your area. If you don't speak English and you would prefer a doctor from your cultural background, the Royal Australian College of General Practitioners can give you details of a doctor near you.

***This article was compiled by Andrology Australia.**

For a full list of references or to re-publish this article, please email sophia.browne@monash.edu

Upcoming events

Matthew "Richo" Richardson to star in men's health campaign

Andrology Australia will soon launch a national television, radio and online campaign featuring former AFL player Matthew Richardson.

The campaign, *Talk about your tackle*, aims to help Australian men understand the risks of ignoring issues with the bits below the belt, and takes a light-hearted approach to a serious issue.

The centrepiece of *Talk about your tackle* will be a Community Service Announcement (CSA) featuring recently retired AFL star, Matthew Richardson and his father Alan, who played in a premiership winning Richmond team in 1967.

The CSA, titled 'Nothing', highlights the awkward and uncomfortable silences between men when it comes to discussing important issues like personal health with each other and their doctors.

While the campaign takes a lighter approach, the issues it raises are important to men of all ages.

Among Australian men, about half will experience prostate problems, one in five over the age of 40 has erectile problems, an estimated one in 20 are infertile, and one in 200 will suffer from testosterone deficiency. Each year 680 men are diagnosed with testicular cancer, and this number is rising.

Andrology Australia is calling on Australian men, as well as the women in their lives, to take reproductive health problems seriously and begin talking to each other and their doctors.



Matthew Richardson and his father Alan Richardson will feature in Andrology Australia's new community service announcement.

Reproductive health issues can be an early warning sign for more serious health problems, so the sooner men start talking about it and seeing their doctors – the better.

The campaign will be launched on April 13 on television, radio and online at www.talkaboutyourtackle.org.

Professional education

Sex in the seventies and beyond

Not a lot is known about sexual behaviour in the older population, but a recent Western Australian study as well as Andrology Australia's own research is proving that older men still enjoy sex.



The 'Men in Australia Telephone Survey' (MATEs) conducted by Andrology Australia in 2005, found more than one third of men over 70 years were still sexually active.

This research has been supported by a paper published in the December 2010 edition of the *Annals of Internal Medicine*¹, which showed about half of men aged 75 to 95 considered sex important, and one third reported being sexually active.

Andrology Australia has anecdotally found that many doctors are not comfortable bringing up the topic of sexual health with their older patients because they often assume they are sexually inactive.

It also seems that older patients do not feel comfortable raising the topic with their doctor because they believe the doctor will think they're too old to be having sex. However, it's important for both doctors and seniors to be comfortable enough to discuss issues of sexual health during consultations.

More research in this area will help us gain a better understanding of sexual behaviour in the older population and will mean more appropriate health services can be created to allow sexual health issues to be better addressed.

¹ Hyde Z, Flicker L, Hankey GJ, Almeida OP, McCaul KA, Chubb SAP, et al. Prevalence of sexual activity and associated factors in men aged 75 to 95 years: a cohort study. *Ann Intern Med*. 2010;153:693-702.

In brief

BPH medicine added to the PBS

Men with prostate disease now have access to Dutasteride (Avodart®) to treat benign prostate enlargement as of February 1, 2011.

Federal Health Minister Nicola Roxon recently announced the cost of Dutasteride (Avodart®) would be subsidised through the Pharmaceutical Benefits Scheme (PBS).

Change of phone numbers

Due to a change in the telephone system, Andrology Australia staff members will all have new phone numbers from March 1, 2011.

There will be no change to the 1300 information line. To contact the office please call 1300 303 878 and you will be directed to the appropriate person.

Connect with Andrology Australia via social media

Andrology Australia has profiles on Twitter, Facebook and YouTube. Please "follow", "like" or "subscribe" to connect with us and stay informed on the latest happenings in men's health.



Annual Report Summary insert

It's that time of year again! Please find a copy of the Andrology Australia Annual Report Summary for 2010 enclosed with this edition of The Healthy Male. The report is also available online in a PDF or e-book format.

Donations

Donations to Andrology Australia will contribute to our community, professional and research programs in men's health.

To donate please fill in the form attached to the Annual Report Summary or visit www.andrologyaustralia.org for more details.

Latest news

The Healthy Male Readership Survey

We would like to thank all of the readers who participated in *The Healthy Male* readership survey. We received more than 700 responses and some fantastic suggestions for improving this publication.

We will be taking many of your suggestions on board over the next few months as we put together a revamped version of *The Healthy Male*. Some of the more common comments included making the text darker and larger and updating the photo of our Director, Professor Rob McLachlan! We will be looking to improve the format and design in line with the feedback we received.

In terms of the content of the newsletter, we are aiming to include more of your suggested topics in coming editions. We are planning to include a "Letters to the Editor" section, so if you would like to comment on an article you have read in *The Healthy Male*, please write to us or send an email to media@andrologyaustralia.org.

In the coming months we will also be updating our email bulletin "Male Briefs" so that it is more useful for health professionals and those working in men's health. If you would like to subscribe to this service, please visit the Andrology Australia website (www.andrologyaustralia.org) and click on the e-newsletter box.

Finally, the winner of the \$100 gift card is Brian Ellison from Bronte in New South Wales. Congratulations Brian, and thanks again for helping us to improve this newsletter.

The screenshot shows a survey form titled "The Healthy Male Readership Survey" from Andrology Australia. It includes questions about reading time, sharing the newsletter, and feedback. The form is partially filled out with checkboxes and handwritten answers.

1. How many minutes on average do you spend reading The Healthy Male?
☐ 0 ☐ 1-4 ☐ 5-9 ☐ 10-30 ☐ more than 30

2. How many other people (not including yourself) usually read/look through your copy?

3. What do you typically do with issues of The Healthy Male when you are finished?
☐ Pass it on to a friend/family member
☐ Pass it on to co-workers
☐ Pass it on to a GP or health professional
☐ Save as a reference for 1 - 5 months
☐ Save as a reference for 6 - 12 months
☐ Save as a reference for more than 12 months
☐ Throw it away

4. Have you ever accessed the electronic version of The Healthy Male?
☐ Yes ☐ No

5. Please rate the following:
Director's message ☐ 1-5
Front page article ☐ 1-5
Community education ☐ 1-5
Professional education ☐ 1-5
Recent events ☐ 1-5
Research round-up ☐ 1-5
In Brief ☐ 1-5
Latest news ☐ 1-5
Focus on ☐ 1-5

6. What other Focus
1.
2.
3.

7. Do you have any

Newsletter of Andrology Australia

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