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WELLNESS brought to you by

ATTHER MIND HEATTHER FOOD HEATTHER BODY (HEATTHER WORLD

WELGOME TO THE ATEST ISSUE OF OUR WELLESS MAGAZINE



As we bid farewell to summer and the nights start drawing in, we're pleased to welcome the new season with the latest issue of our Wellness Magazine.

The autumn edition covers a wide range of topics relating to our mental and physical health, and what we can do to minimise our environmental impact.

Whether you're looking for information relating to one of the many health awareness initiatives happening over the next three months, different ideas to celebrate occasions such as Halloween or Diwali, or planning your autumn planting activity in the garden, we hope you enjoy reading!

Wishing you all a great autumn from the ESS team!

goo hi

Scott Freeman Culinary Director – ESS

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COCKING UP ASTORM

NATIONAL BRUNCH WEEKEND: 7TH - 8TH OCTOBER 2024 INTERNATIONAL CHEF'S DAY: 20TH OCTOBER 2024

Brunch is a meal that combines breakfast and lunch, typically eaten during the late morning to early afternoon.

It originated as a leisurely weekend meal and is known for featuring a mix of sweet and savoury dishes. Popular brunch foods include eggs, pancakes, salads, pastries and sometimes cocktails like mimosas or Bloody Marys. Brunch is often enjoyed socially as a popular gathering for friends and family. The flexibility of the meal allows for a wide range of dishes, catering to different tastes and preferences.

The UK brunch market has seen remarkable growth, driven by

changing dining habits and social trends. Brunch has become a significant part of the hospitality industry, with bookings for breakfast and brunch increasing by 65% in recent years, making it one of the fastest-growing segments in the dining industry.

This surge in popularity is largely fuelled by millennials and Gen Z, who are drawn to weekend brunches both for social gatherings and the 'Instagrammable' appeal of visually stunning dishes. Brunch in the UK is no longer just a meal, it's an event that combines food, socialising and digital culture.^{1,2}

Brunch spots have evolved into popular weekend destinations, often requiring reservations due to high demand. Restaurants are capitalising on this trend by offering innovative and customisable brunch menus, while also leveraging data and technology to optimise customer experiences and operations.^{1,3}



Simon Coulter, Group Executive Chef – ESS, takes us through the sourdough recipe he prepares during the week to enjoy over brunch with his family at the weekend.

TOASTED SMOKED CHEDDAR & JALAPENO SOURDOUGH Topped with Romesco Sauce & Poached Duck Eggs



SOURDOUGH RECIPE

Starter

Prepare approximately a week in advance and then a feed a day or two before using.

Day 1

50g strong organic stoneground flour, it can be white, wholemeal, spelt or rye. Each adds a slightly different character to your sourdough.

50g (ml) of water, if your tap water - if your tap water is hard, bottled still water works well.

Place into a large pop jar/plastic container of your choice and mix well to form a loose mixture. Leave out at room temperature for 24 hours.

Days 2-5

Repeat the process around the same time every day until day 5. Feeding 50g of flour and 50g of water each time and stirring it well. Once fed on day 5, leave it for another 24 hours.

Day 6

You will now have 500g of active starter. At this point, discard approximately 400g of the young starter and replace with 150g strong white flour and 150ml water, mix well.

After about 6 hours at warm room temperature, it will bubble up, be fully active and have a fruity scent with mild acidic notes.



BREAD DOUGH Makes 1 large loaf

Ingredients:

- 400g strong white bread flour
- 100g strong wholemeal / rye / mixed grain
- 350ml room temp water
- 150ml active sourdough starter
- 7.5–10g (a teaspoon) of salt
- Additional Ingredients
- 200g smoked cheddar, grated
- 100g jalapenos, chopped.

Method:

- 1 Pour the water into a bowl and decant 150g of the sourdough starter into the water, this will confirm the starter's readiness to use.
- 2 Active starter will be bubbly, full of air and rise quickly to the top.Next, decant half the flour mix into the wet mix and stir well.
- 3 Cover the bowl containing the sourdough sponge and leave in a warm location for an hour to activate.

- 4 Add the remaining flour mix and salt, kneed for 5 minutes, dust lightly with flour, roll into a tight ball and return to the bowl.
- 5 Cover and leave at warm room temperature for 45 mins.
- 6 Coat your hands with water so that they are wet, quickly run your hands around the edge of the bowl, releasing the dough from the edges.

Pull and stretch the dough, sprinkle on some of the grated cheese and chopped jalapenos, return the dough and twist the bowl to the left 20 degrees.

Repeat the stretching process until all the cheese and chilli mix is incorporated and a full turn of the bowl is completed, each time wetting your hands slightly to prevent sticking.

7 Remove the dough and tuck into a tight ball and return to the bowl, folds tightly tucked in towards the bottom. Cover and leave at warm room temperature for 30 mins.

Repeat this process 3 more times.

- 8 Pre-heat the oven to 180°C. Dust the base of a heavy bottom casserole dish or 'Dutch oven'. Place the dish in the oven and pre-warm for 5 minutes.
- 9 Wet your hands once again and remove the dough, give a final tuck to the dough, dust with any of the flour, score the top with a sharp knife and place in the dish.
- 10 Place the lid on the pot, allow to sit for a further 15 minutes and then place into the pre-heated oven for 40 minutes. Remove the lid and return to the oven for a further 15 minutes until the perfect crust has formed.
- **11** Allow the bread to rest for an hour before carving. During this time, prepare the romesco sauce.



SIMPLE ROMESCO

Ingredients:

- 100g skinned hazelnuts
- 200g roasted peppers in brine (from a jar)
- 1 tsp smoked paprika
- Clove of garlic or 1 tsp garlic granules
- 1 tsp sea salt
- 1 tbsp sherry vinegar (if you don't have this, cider or red wine vinegar will be fine)
- 50ml olive oil
- 1 tsp tomato paste.



Method:

- 1 Lightly toast the skinned hazelnuts in a hot oven until golden. If you can only find skin on hazelnuts, toast for a little longer until the skins are dark brown, tip into a clean tea towel and rub away the skins.
- 2 Add the nuts along with the olive oil to a food processor and pulse to a grainy paste. Add the remaining ingredients and blitz to a purée.

Add a little of the pepper brine if the mix is too thick, it should be the consistency of a loose pesto.

3 Put a pan of water (1 litre) on to boil, add 1 tbsp of vinegar and 1 tsp of salt, and turn down to a gentle simmer.

Crack your duck eggs into the water to poach, 2 per portion, this should take approximately 3-4 minutes.

- 4 Once the eggs have formed a white, not translucent exterior and whilst retaining a soft centre to the touch, use a perforated spoon to remove the eggs to a plate covered in a clean tea towel, jay cloth or kitchen paper to soak up any remaining water.
- 5 Cut a thick slice of the sourdough and toast. Once it's crunchy and golden, spread 8g of butter, allowing it to melt into all the bubbly craters.

Move the toast to a serving plate, coat in a generous amount of romesco sauce, then top with your duck eggs and season with a sprinkle of sea salt.

Totally optional, but my absolute favourite way to finish this dish is with a hearty drizzle of *Frank's Hot Sauce*!

Serve with a strong brew and enjoy!

UNDERSTANDING THE BODY'S RESPONSE TO ALLERGENS

ANAPHYLAXIS WEEK: 1st - 6TH OCTOBER 2024

Anaphylaxis is a life-threatening reaction which happens extremely quickly, when your body has a serious reaction to something you are allergic to.





Food isn't the only cause

You've probably heard that severe allergies to foods like peanuts, milk or sesame seeds can cause anaphylaxis, but there are lots of other possible allergies which can be the cause. Allergic reactions to medicines like antibiotics or non-steroidal antiinflammatory drugs (NSAIDs) such as ibuprofen can cause anaphylaxis. Penicillin is another common medicine allergy which can result in anaphylaxis. When in hospital, you will always be asked if you have any allergies and they will usually mention penicillin as antibiotics containing it are some of the most commonly prescribed. Individuals can also be allergic to anaesthetics.

Insect strings such as wasps and bees can result in anaphylaxis too. While insect bites or stings are not normally serious and will heal in a few days, some can become infected and lead to illness or cause a serious allergic reaction.

People can also be allergic to latex which is a type of rubber found in some rubber gloves, condoms, dummies, swimming caps and elastic in clothing and underwear. Natural rubber latex comes from a tropical tree called Hevea brasiliensis and it's the proteins in this plant which cause the allergic reactions. In the 1990s, latex was the most common cause of allergic reactions but these are less frequent now due to the increased availability of latex and powder free products.

In some cases, it is not known what has caused an anaphylactic reaction. This is called idiopathic anaphylaxis.

Signs of anaphylaxis

A person experiencing anaphylaxis might show one or more of the following symptoms:

- Swollen tongue, difficulty swallowing, tight throat
- Difficulty breathing, tight chest, persistent coughing or wheezing
- Fainting, loss of consciousness
- Pale and floppy (in small children and babies).



Treatment

Adrenaline is used to treat anaphylaxis. It helps to quickly reverse the symptoms by reducing swelling, opening airways and improving blood pressure. Adrenaline is administered through an injection into the thick thigh muscle from an adrenaline autoinjector (AAI). One brand you might have heard of is EpiPen[®].

AAIs are specifically prescribed to individuals at risk of having a severe allergic reaction. Individuals are advised to carry two AAIs on them in case the first doesn't work and they still require the adrenaline. As soon as adrenaline has been administered, an ambulance must be called by dialling 999 as the individual will require further observation and treatment in hospital.

Raise awareness

An individual may decide to wear an allergy bracelet which clearly states what they are allergic to in case they are unable to speak for themselves.

Allergy UK produces plastic and digital allergy travel cards which individuals can use while on holiday or out and about to tell people about their allergies. They are available in a range of different languages to help make travelling abroad easier.



MY ALLERGIC REACTION

When you think of medication, you usually see it as a tool to relieve pain and improve wellbeing, which is true for most people, including me—until I had my little girl.



Leanne King, Head of Nutrition and Wellbeing – ESS

During pregnancy, your body undergoes many changes and I learned that fluctuating hormone levels can significantly impact dental health. Around 50% of pregnant women experience gum inflammation, which was my experience.¹

My sweet tooth had already led to a few fillings, one of which began causing severe pain towards the end of my pregnancy. This eventually required a root canal and crown after Gwendolyn was born.

Since the dentist couldn't perform the necessary procedures while I was pregnant, I was prescribed a standard antibiotic containing penicillin and advised to take it only after giving birth if possible. I followed this advice.

After Gwendolyn's birth, I began taking the antibiotic, which I was supposed to take three times a day. Amid the excitement of a new baby and frequent visitors, I struggled with maintaining a regular schedule.



As a result, I started developing an itchy, blotchy rash on my legs that would subside intermittently. I initially thought it was a heat rash or something similar, but the rash became more severe with each dose of the antibiotic.

Concerned, I visited the pharmacist, who suggested trying some cream. However, the rash continued to worsen and spread, and I started feeling a lump in the back of my throat. In the middle of the night, feeling unwell, I called 111 for advice and was eventually directed to A&E. Living in London without family support, my husband Brett stayed home with our newborn while I went to the hospital. After a short wait, the doctor, unsure of the exact cause, investigated further and discovered that my symptoms were likely due to a new allergic reaction to penicillin. Despite having taken this common antibiotic before, my body had developed an allergy, exacerbated by the hormonal changes from pregnancy.

Fortunately, because I hadn't taken the antibiotic as regularly as prescribed, the reaction wasn't as severe as it could have been.

This experience gave me a deeper appreciation for those who suffer from allergies, especially food allergies, and highlighted how allergens can develop at any point in life—something that deserves more attention.

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MODERN DAY MALNUTRITION

MALNUTRITION AWARENESS WEEK: 14TH-20TH OCTOBER 2024

Malnutrition in the modern era is a multifaceted issue affecting both developed and developing nations but highlighting a global contrast.



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On one side, millions of individuals endure undernutrition, battling food insecurity and lacking access to essential nutrients. On the other side, there is a rising challenge of overnutrition and obesity, fuelled by the overconsumption of unhealthy, caloriedense, but nutrient-deficient foods.

Today, malnutrition goes beyond simple food scarcity. It is intricately tied to the quality of food available, accessibility, healthcare systems, education and socio-economic conditions. It presents itself in several forms.

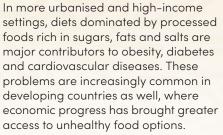


Undernutrition continues to severely affect low-income regions, particularly in parts of Africa, South Asia and Latin America. This type of malnutrition leads to issues like wasting, stunting and heightened vulnerability to infections, especially in children. Long-term malnutrition can result in lifelong physical and cognitive challenges, which further perpetuate cycles of poverty.

In areas where caloric intake is sufficient, deficiencies in key vitamins and minerals – such as iron, iodine and vitamin A – remain prevalent. These 'hidden hungers' are often overlooked but can have serious consequences, including stunted growth, weakened immune systems and developmental delays.







The factors driving contemporary malnutrition are varied. Economic inequality plays a significant role, as poverty limits access to both quality food and adequate healthcare. Additionally, climate change and conflict disrupt food production and distribution, intensifying hunger in vulnerable areas. Furthermore, global dietary trends shaped by urbanisation, marketing and globalisation have led to a dependency on inexpensive, processed foods.

Education is also a critical factor. A lack of nutritional knowledge, combined with cultural and social influences, contributes to unhealthy eating behaviours. In urban areas, food deserts - where access to fresh, nutritious food is limited - exacerbate these issues. The consequences of malnutrition are severe, impacting health, economic productivity and social stability. Addressing malnutrition today requires a holistic approach. Solutions range from reforming food systems and supporting sustainable agricultural practices to advancing public health education.

Strategies like food fortification with essential nutrients and targeted feeding programmes in schools and vulnerable communities are vital. Additionally, tackling rising obesity rates involves public policies that regulate food marketing, improve labelling and encourage healthier eating habits.

Ultimately, addressing malnutrition requires recognising the full spectrum of issues—from hunger and nutrient deficiencies to overnutrition and lifestyle diseases. Coordinated global and local efforts are essential to build food environments that promote health and wellbeing for everyone.









STIRRING UP A TREAT

STIR UP SUNDAY: 24TH NOVEMBER 2024



Lottie Jones, Nutrition & Wellbeing Officer - ESS

Everyone has their own Christmas traditions and stir-up Sunday is definitely one of ours. Even when I was at university, I'd time my trip home in the first term to come and stir our Christmas pudding!

Stir-up Sunday is a centuries old tradition where individuals spend the last Sunday before Advent 'stirring-up' their Christmas pudding. Every member of the family will stir the pudding and make a wish. Traditionally, it was stirred from east to west, to resemble the wise men that visited baby Jesus in the Nativity story.

In its modern form, Christmas pudding is a dried fruit-based dessert. Previously it would have been wrapped in cloth and boiled, with the cloth eventually giving way to basins which are a lot easier to use.

Christmas puddings are also known as plum puddings in America. The first

reference dates back to the early 15th century where 'plum pottage' was a meat-based dish eaten at the beginning of the Christmas meal.

By the end of the 16th century, dried fruit was more readily available in England and plum pudding made the switch from savoury to sweet. By the 19th century, the ingredients were more or less standardised into what you can see in the recipe below.

Another well-known tradition comes on Christmas Day when people put a sprig of holly in the top of the pudding. This is to represent the crown of thorns Jesus wore on the cross. Some people also pour over warm brandy and set it alight before serving with brandy butter or brandy cream.



CHRISTMAS PUDDING RECIPE



Scott Freeman, Culinary Director – ESS, has shared a Christmas pudding recipe for you to follow.



Ingredients:

- 100g vegetarian suet
- 50g plain flour
- 100g raisins
- 100g sultanas
- 50g currants
- 50g mixed peel
- 5g nutmeg
- 5g mixed spice
- 100g dark brown sugar
- 25g ground almonds
- 100g fresh white breadcrumbs
- 2 eggs
- Pinch of salt
- 60ml milk
- ½ can of Guinness
- 200ml brandy
- 1 lemon zest and juice
- 1 orange zest and juice.

Method:

- 1 Soak all of the dried fruit in the brandy, with the juice and zest from both the orange and the lemon. Set aside overnight.
- 2 Mix all dry ingredients together.
- 3 Add the soaked dried fruit.
- 4 Add the Guinness and the milk.
- 5 Mix really well and then leave in a fridge for two days.
- 6 Place the pudding mixture into a suitable (pre-greased) steaming bowl. Cover with greaseproof paper and foil and then steam for 6-8 hours (you can also do this in a slow cooker overnight which is far more economical).



SUICIDE MONEY

WORLD SUICIDE PREVENTION DAY: 10TH SEPTEMBER 2024

INTRODUCTION

Suicide is a challenging topic to think about, but it's important we know about suicidal feelings, how to deal with them ourselves, where to seek help and how we can help others. Suicide is the act of intentionally taking your own life. Suicidal feelings can mean having thoughts about ending your life or feeling that people would be better off without you. You might feel unable to cope or like you can't go on living the life you have. Suicidal feelings can be caused by difficulties including mental health problems, bullying, bereavement, money problems, loneliness and many more.

People who are feeling suicidal may find it hard to believe that there is a solution, however it's important to remember there is always support available. Suicidal feelings can affect anyone of any age, gender or background, at any time.



HOW CAN I HELP MYSELF AND OTHERS?

Help yourself

The earlier you let someone know how you're feeling, the quicker you'll be able to get support to overcome the feelings. It's important to remember that you deserve help, you are not alone and there is support out there.

Challenge your thoughts and think about your reasons to live. You may feel like the world will be better off without you, but this is never the case. Learn to manage difficult feelings and develop coping strategies that work for you.

Help others

If you're worried about someone, the best thing you can do is talk to them. Don't skirt around the topic. Direct questions about suicide like 'are you having suicidal thoughts?' can help someone talk about how they're feeling. This may not feel like the right thing to do, but many people feel relieved and less isolated when they are asked. Encourage them to talk about their feelings and offer emotional and practical support to help them to seek treatment. Ask open questions and give them time to answer. While you might feel shocked, upset or frightened, try not to judge. Show compassion, listen to them and remain calm.

HOW DO SUICIDAL THOUGHTS AND FEELINGS IMPACT MY WORK?

If you or someone you know feels suicidal, it can impact your daily life. You might feel hopeless, desperate, in pain or physically numb.

These feelings can lead to poor sleep, a change in appetite leading to weight gain or weight loss, avoiding others, low self-esteem or urges to self-harm.

How long suicidal feelings last is different for everyone, however it's important to remember there is treatment and support available.

TIPS TO HELP YOU DEAL WITH CARING FOR SOMEONE WITH SUICIDAL THOUGHTS

- 1 Look after your own wellbeing when caring for someone else, you might find you think a lot about their wellbeing and not your own. Take care of your own mental and physical health.
- 2 Take time for yourself to be able to care for someone else, you need to look after yourself too.
- 3 Be kind to yourself and find support- it can be hard to accept that someone close to you feels suicidal. Do not blame yourself and it might help to talk to someone about your feelings.

TIPS TO HELP YOU DEAL WITH CARING FOR SOMEONE WITH SUICIDAL THOUGHTS

If you are experiencing suicidal feelings, you might feel as if there's nothing that could help, but remember there's always support available:

Support from your GP: This can include talking therapies, medication or specialist services.

Helplines and listening services: These are confidential and judgement free:

- Samaritans: Support available 24/7, you can call 116 123 (free) or email jo@ samaritans.org
- Mind helpline: Available Monday to Friday 9am – 6pm, call 0300 102 1234

- NHS 111: For non-emergency medical help, call **111**.
- Shout: 24/7 confidential text service offering support if you are in crisis and need immediate help, text 85258 or visit www.giveusashout.org
- Peer support can bring people together who have had similar experiences. Togetherall (www. togetherall.com) offers community support and Side by Side (Home -Side by Side (mind.org.uk) is Mind's online community.

LOOKING AFTER YOUR FINANCIAL WELLBEING

UK SAVINGS WEEK: 9TH-15TH SEPTEMBER 2024

Money and mental health are closely linked, with each influencing the other in significant ways.

Financial difficulties, such as debt, unemployment or insufficient savings, can lead to high levels of stress, anxiety, poor sleep, depression and even reduced physical health. Persistent financial stress can contribute to emotional distress and a sense of helplessness.

Building savings enhances one's sense of control over the financial future. Savings can help to alleviate stress from unexpected expenses, enable preparation for the future and support people to avoid high-interest debt through a reliance on credit cards and loans.

Savings act as a buffer, fostering a sense of security that reduces anxiety, depression and feelings of helplessness, allowing individuals to focus on other aspects of their lives, potentially increasing their feelings of purpose and self-esteem, and enhancing their overall wellbeing. Effective management of personal finances also supports a more stable lifestyle, which decreases stress and its negative effects on mental health. It offers people the freedom to pursue personal interests and activities that bring joy, such as travel or hobbies, which can significantly enhance life satisfaction and mental health.

The process of saving money often involves setting and achieving goals, which reinforces positive behaviours and routines. Engaging in goal setting and reaching financial milestones can boost confidence and provide a sense of purpose.

Thinking about saving can be daunting for many, especially those who are struggling with their day-to-day finances, but the tips below may help, whatever your starting point.







TIPS ON HOW TO TAKE CONTROL OF YOUR FINANCES AND RELIEVE MONEY RELATED STRESS

Create a budget

Record all sources of income and all expenditure to understand your financial situation. Next allocate funds for essentials like housing, food and utilities, and set limits for discretionary spending.

Reduce debt

Focus on paying off high-interest debt first. It may also be worth consolidating multiple debts into one with a lower interest rate. If you are really struggling, consider contacting creditors to see if any lower interest rates or more manageable payment plans are available. Set up direct debits to remove the risk of late payment fees.

Build an emergency fund

Start small here. Aim to save whatever you can afford initially, and gradually build up to a pot of three to six months' worth of living expenses. If practical, set up automatic transfers to a separate savings account.

Cut unnecessary expenses

Cancel unused subscriptions or memberships. Reduce dining out and prepare meals at home. Use vouchers, buy in bulk and take advantage of sales for essential items.

Stay organised and maintain records Keep organised records of all financial documents, including receipts and statements. Use apps for budgeting, tracking expenses and managing investments.



Set long-term and short-term goals A short-term goal might be saving for a holiday or Christmas presents. A long-term goal could be saving for a new car, a deposit for a house or retirement. Separating savings into different pots may help to motivate you as you see each pot grow and get closer to reaching your goals.

Seek support

While it's an uncomfortable topic to talk about, it is important to discuss financial concerns with trusted friends or family. If you don't feel able to do this, you could seek support from outside organisations such as Citizens Advice.

Engage in mindfulness practices like meditation and deep breathing exercises to reduce anxiety

This may help to clear your head and establish the right path to take in relation to your finances.



GET AHEAD AND START PREPARING FOR CHRISTMAS

Saving for Christmas can help alleviate financial stress and allow you to enjoy the festive season without worrying about overspending.

Here are some tips to help you save for Christmas:

- Make a monthly savings plan. Divide your total estimated costs by the number of months left until Christmas and set aside that amount each month.
- Consider taking on a part-time job, freelance work or selling unused or unwanted items online.
- Open a savings account and set up automated monthly transfers.
- Take advantage of sales and discounts. Buy gifts and decorations during off-season sales, clearance events or major discount events such as Black Friday.

- Create personalised, handmade gifts to save money and add a personal touch.
- Agree with family members to set spending limits or only buy for children.
- Keep a list of people you need to buy for and what you plan to get them.

UNDERSTANDING DYSLEXIA AND DYSPRAXIA AND THEIR IMPACT ON MENTAL WELLBEING

DYSLEXIA WEEK: 7TH-13TH OCTOBER 2024 DYSPRAXIA WEEK: 13TH-19TH OCTOBER 2024

Dyslexia and dyspraxia are specific learning difficulties, but they impact individuals in distinct ways.

Dyslexia primarily affects reading and writing skills, while dyspraxia, also known as developmental coordination disorder (DCD), affects motor coordination and planning. Both conditions present significant challenges and can have a profound impact on an individual's daily life.

DYSLEXIA

Dyslexia primarily manifests through difficulties in reading and writing. Individuals with dyslexia struggle with decoding words, which involves breaking down words into their constituent sounds, making fluent and accurate reading a challenge. Comprehension problems are common, as understanding and retaining what has been read can be difficult.

Memory problems also play a significant role in dyslexia. Issues with working memory can make it hard to hold and manipulate information in the mind, affecting tasks like mental arithmetic or following multi-step instructions. Short-term memory problems further complicate things by making it difficult to remember sequences, such as phone numbers or instructions.



Language processing is another area where dyslexia creates challenges. Individuals may have difficulty finding the right words or articulating thoughts clearly, a problem known as verbal fluency. Additionally, the slower processing speed makes it harder to keep up with verbal and written information. Organisational skills are often impacted as well.

Time management can be problematic, with individuals struggling to estimate how long tasks will take and to meet deadlines. Planning and prioritisation can also be difficult, making it challenging to organise thoughts and tasks efficiently.

The emotional and social impact of dyslexia can be profound. Repeated academic failures can lead to low selfesteem and feelings of inadequacy. Anxiety and stress are common, particularly the fear of reading out loud or being called on in class. Social isolation can occur due to difficulties in social communication, leading individuals to withdraw from peers.





DYSLEXIA

A complex condition that affects more than just reading and writing.

It encompasses a wide range of mental challenges, including memory problems, language processing issues, organisational difficulties and significant emotional and social impacts.

Addressing these challenges requires comprehensive support and tailored interventions to help individuals with dyslexia succeed in various aspects of their lives.

10% of the UK population has dyslexia, with 4% being severely affected.¹

DYSPRAXIA

A complex condition that affects motor coordination, perceptual-motor integration and executive functioning.

It has significant emotional and social impacts, making everyday tasks and interactions challenging.

Addressing these challenges requires comprehensive support and tailored interventions to help individuals with dyspraxia succeed in various aspects of their lives.

DYSPRAXIA

Dyspraxia impacts motor coordination and planning. Individuals with dyspraxia often face significant difficulties with gross motor skills, which involve large muscle movements.

Tasks such as running, jumping or riding a bike may be difficult to master, often appearing as clumsiness. Fine motor skills, which require precision and control of smaller muscles, are also affected. Activities like writing, tying shoelaces or using utensils can be frustratingly difficult.

Perceptual-motor integration is another area where dyspraxia presents challenges. Problems with spatial awareness are common, leading to difficulties understanding spatial relationships and appearing as clumsiness.

> Dyspraxia is four times more common in males than females.²

Hand-eye coordination is also impacted, making activities that require precise movements, such as playing sports or using tools, more challenging.

Executive functioning skills are often compromised in individuals with dyspraxia. Planning and sequencing tasks can be particularly difficult, leading to frustration and incomplete activities. Estimating time and staying on schedule are also challenging, which can result in difficulties with time management and meeting deadlines. The emotional and social impact of dyspraxia can be profound. Frequent failures in physical tasks can erode self-confidence and lead to low self-esteem.

The stress and frustration from struggling with everyday tasks can contribute to anxiety. Social difficulties are also common as participating in sports or group activities can be challenging, often leading to social isolation.



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MIND

While dyslexia and dyspraxia affect different areas of functioning, both require understanding and support to help individuals manage their challenges and achieve their potential.

Dyspraxia affects up to 6% of the population, with severe cases accounting for up to 2%.²

HOW TO MAKE WORKPLACES MORE INCLUSIVE

Implementing the strategies below will support employees with dyslexia and dyspraxia, fostering a more inclusive, productive and positive work environment.

Workplace design and arrangements

- Adjustable desks, comfortable chairs and tools to minimise physical strain.
- Organised workspaces with easily accessible items.
- Flexible work arrangements where practical.
- Adjusted working hours to accommodate individual needs where practical.





Supportive technology

- Allow speech-to-text and text-tospeech tools to assist with writing and speaking tasks.
- Provide voice recorders for recording and revisiting verbal instructions or meetings.
- Use task management apps to help with organising and prioritising tasks.
- Use dyslexia-friendly fonts and backgrounds to improve readability.
- Provide audio formats for important documents.
- Give support with proofreading and editing documents.

Task management

- Provide clear, step-by-step instructions with visual aids.
- Schedule regular breaks to reduce fatigue and improve focus.
- Enable flexible deadlines to accommodate different working speeds.
- Provide and confirm verbal instructions, repeating or rephrasing if necessary.

2. Dyspraxia | Foundation for People with Learning Disabilities

• Ensure instructions and expectations are clear.

Training and support to encourage a more inclusive environment

- Provide professional support for effective task management.
- Encourage a supportive team environment which may mean providing training on dyslexia or dyspraxia to help foster a better understanding.
- Pair colleagues with mentors for guidance and support.
- Promote awareness of learning differences and encourage open discussion.
- Encourage open communication and provide positive reinforcement.

Regular reviews and feedback

- Schedule frequent check-ins to review progress and adapt strategies.
- Provide constructive feedback focused on strengths and improvements.

CHOOSE RESPECT IN THE WORKPLACE

ODD SOCKS DAY: 12TH NOVEMBER 2024 ANTI-BULLYING WEEK: 11TH-15TH NOVEMBER 2024 WORLD KINDNESS DAY: 13TH NOVEMBER 2024

Fostering respect is key to preventing bullying and creating a positive workplace.

Workplace bullying remains a serious problem in the UK. In 2023, nearly 23% of UK employees reported experiencing bullying or harassment at work, and 15% had reported incidents over the previous three years.¹

The financial toll is estimated to be around £18 billion annually due to lost productivity and turnover, highlighting the need for stronger anti-bullying measures in the workplace. 2,3

A 2017 study published in the BMJ (British Medical Journal) found that individuals who are bullied at work are at increased risk of developing depression, anxiety and cardiovascular problems, highlighting the serious mental and physical health consequences.⁴

Respect is the foundation of healthy workplace relationships. Encouraging respectful behaviour leads to better teamwork, communication and collaboration. This, in turn, enhances productivity and reduces conflicts, creating a more harmonious work environment. Respect in the workplace is a choice. By treating colleagues with kindness, listening to different perspectives and embracing diversity, employees contribute to an environment where everyone feels valued and safe. This proactive approach helps reduce workplace bullying, harassment and toxic behaviours.

Employees and leaders should be empowered to address bullying when it occurs. Creating clear antibullying policies and providing training helps people to recognise bullying behaviours and gives them the tools to report or intervene when necessary.

A culture where people are encouraged to stand up against mistreatment makes the workplace safer for everyone. Employers and leadership teams are key to fostering a respectful culture.

Regular training, clear communication and leading by example are essential. Management should demonstrate respect in their actions and ensure that all employees are aware of the organisation's stance against bullying.

One in three workers experience bullying at some point in their careers, with public sectors like healthcare and education being particularly affected.³ By embedding respect, empathy, understanding and inclusivity, businesses can build environments where respect is expected and bullying is not tolerated.

Respect goes beyond compliance - it's about nurturing a positive workplace culture that benefits employee wellbeing and overall business success. This ensures people are motivated to perform at their best, feel secure in expressing themselves and support one another, fostering long-term success and satisfaction for both individuals and the organisation.

> Companies that actively foster employee wellbeing and engagement experience up to 16% higher productivity and 10% higher profitability compared to those with less focus on these areas.⁵











TIPS FOR SHOWING KINDNESS AT WORK

- Listen actively: Pay full attention when others speak, showing that their thoughts matter.
- Help others: Offer assistance when colleagues are overwhelmed or need support.
- Show gratitude: Regularly acknowledge and appreciate others' efforts.
- **Be inclusive**: Involve everyone in conversations and activities.
- **Provide positive feedback**: Give constructive advice gently, focusing on growth.
- Be patient and empathetic: Understand others' challenges and offer kindness during tough times.
- Celebrate success: Recognise and celebrate small and big wins.

RED FLAGS FOR IDENTIFYING AND ADDRESSING BULLYING IN THE WORKPLACE

- Frequent unfair criticism: Persistent, harsh feedback without constructive advice.
- Exclusion: Being left out of meetings or social interactions.
- Blame shifting: Consistently targeting one person for issues.
- Overloading or Undermining: Assigning unmanageable tasks or setting someone up to fail.
- Hostile behaviour: Repeated insults, threats or public humiliation.
- Micromanagement: Excessive control or withholding resources needed for work.
- **Spreading rumours**: Gossiping or damaging someone's reputation.

PREGNANCY DOSS NEVER FORGOTIEN

BABY LOSS AWARENESS WEEK: 9TH- 15TH OCTOBER 2024

The loss of a baby is an unimaginable grief that profoundly affects families and communities.

Each year, thousands of parents experience the heartbreak of miscarriage, stillbirth or neonatal loss, yet many suffer in silence, burdened by stigma or a lack of support.

Baby Loss Awareness Week seeks to bring visibility to this oftenhidden sorrow, offering a space for collective remembrance and understanding. Through awareness campaigns, personal stories and commemorative events, Baby Loss Awareness Week aims to break the silence surrounding this topic, fostering empathy and providing vital support for those grieving.

By raising awareness, we not only honour the lives lost but also work towards better support systems and understanding for those navigating this challenging journey. Two of our colleagues, Maria and Jennie, share their experience and grief in the hope of helping others who may be going through something similar.





Jennie Moseley, Catering Manager – ESS

I was 32 when I discovered that I was pregnant for the first time.

This finally ended years of speculation from family and friends wondering if we would ever have children. I remember inviting both sets of parents for dinner and making an announcement - shrieks of happiness, all of us filled with the expectation of what this baby would bring, how it would look, what it would be like, who would help.

Over the next few months the excitement grew, and a large pile of baby purchases towered in our bedroom waiting for the nursery to be finished - that same excitement building for our little arrival.

About four and half months into the pregnancy, I had felt a slight discomfort in my tummy – a stitch sensation that we put down to normal gestational aches and pains. A week and a half later, I experienced a stronger pain and some fluid loss. Another week passed and we were at the 20 week scan – my mum had joined us and we were so excited to find out the sex of our baby.

When the sonographer started the scan, I couldn't wait any longer: "What is the sex?" I asked. She paused and said she would need a closer look, but she was confident it was a baby girl, however she then left the room and entered with another member of staff.

They both asked questions: "have you experienced any blood loss?", "have you felt any discomfort?", "have you been ill?". They confirmed the scan had shown that there were fluids missing from around the baby and told us someone would be in touch.





Still full of expectation, I decided to stay positive and, on the way home, predicted that a doctor would be calling to book another scan or advise a care plan in a few days.

We did not even make it onto our drive before a consultant had called to ask me to return to another hospital so that they could speak with us. The journey back felt flat.

The obstetrician took us to a room at the bottom of the labour ward and explained that they needed to do some tests as they needed to know why there was hardly any fluid surrounding the baby.

Those tests confirmed I had had an internal infection and it had caused a premature rupture of the membrane - I will never forget those words. The chances of our baby surviving were less than 20%.

Over the next four weeks, I either attended the hospital for check-ups and injections to help the baby grow or I stayed at home resting. Then one night, I knew our luck had gone and the pregnancy had come to an end. The trip to hospital that night was probably one of the worst, we knew the outcome but endured a doppler...no heartbeat, and then a scan confirmed that we had lost our little baby.

At six months, I gave birth to a stillborn baby girl we named Isabel. I gave birth on the same ward as all the other mums delivering that night, listening to other mothers giving birth, the staff rushing and, worse than anything, the cries of newborn babies. The baby I cradled in my arms that evening was silent, small and beautiful, and her little face will always stay imprinted in my memory.

That was 15 years ago.

We now have two beautiful children – Olivia, 14, and Alex, 12, – and, as they're teenagers (or almost), we complain about them often! But, in reality, we could not feel more blessed.

We brought them up knowing about their sister Isabel, and every year on the 12th of July we celebrate her birthday together – not only to remember her but to celebrate our family.

Baby loss, no matter what gestation stage, not only shatters your expectations but gives you the cruel realisation that you may never have the opportunity again.

For anyone that has gone through this or knows someone who needs help with baby loss, Sands helped us through a very painful period in our lives. Tommy's is another great charity to reach out to for miscarriage, still birth and premature birth.

www. sands.org.uk www.tommys.org Those we have held in our arms for a little while, we hold in our hearts

orever





PREGNANCY LOSS APERSONAL ACCOUNT



Maria Rosato, Regional Operational Excellence and Projects Manager – Compass One

In 2019, after being with my partner for four years, we decided we wanted to start a family.

Reading articles online about trying to conceive said it takes time and normally doesn't happen straight away.

As you can imagine we were incredibly surprised to find out we had fallen pregnant in the first month we had started trying. We were both flooded with emotions, but in all honesty, we were mostly shocked, and we just couldn't believe it.

We decided to book a private scan as seeing was believing, and to this day seeing that tiny little baby on the screen with his heart flickering away meant we just fell in love with something so perfect that we had created. We were besotted and talked about names and what our future would bring. Roll on to 12 weeks and it was time to see our little baby again. After sitting in the waiting area, we were called in and the nurse took our dates so she could plot our baby's due date.She began to scan me and, as I watched her, I remember like it was yesterday her faced changed. She was no longer smiling, just staring so hard at her screen. After some time, another doctor came in and both were staring at the screen. I asked if everything was ok and she said she wanted a second opinion, but said no more and I knew something wasn't right.

I lie there confused and scared, not knowing what was going on. The second doctor then turned to me and said she was sorry but she was unable to find a heartbeat. The doctor explained to me that I had suffered a missed miscarriage. It's when the baby dies but your body still believes you are pregnant so you have no symptoms.



They handed me some paperwork and sent me on my way to come back a week later. I walked out heartbroken, confused and numb. I just didn't understand. My baby was still inside me, so maybe they had got it wrong?

The following day we booked a private scan in the hope they had got it wrong. The sonographer confirmed there was no heartbeat and showed me my baby on screen, but this time with no flicker.

It's something you know happens, but you never imagine it will happen to you!

A week later I came back and was sat next to all the expectant mothers who were excited, happy and couldn't wait to meet their babies, while I knew I would never meet mine.

My way of coping was throwing myself into work and pretending that it never happened.

I didn't want to talk about it or have people feel sorry for me. I'd see pregnant women and it was a constant reminder that I'd lost my baby. I blamed myself and felt that my body couldn't do something women were made to do. Maybe I would never have kids?

I fell pregnant again four months later, only to lose my baby again.

In the UK, the NHS will only investigate why you lose your baby after you've miscarried three times. Pregnancy after loss is not spoken about enough. There is an overwhelming fear of losing your baby again and history repeating itself. Any woman who has experienced 'PAL' (Pregnant After Loss) will know that there is no guarantee you'll have your rainbow baby, up until you hold them in your arms.



Happily, a year and a half later, we were blessed with the safe arrival of our daughter Adelina and, just a year after that, our sweet boy Matteo.

THE IMPACT OF OCD ON DAILY LIFE

Obsessive compulsive disorder (OCD) is a mental health condition characterised by unwanted, intrusive thoughts (obsessions) and repetitive behaviours or mental acts (compulsions) performed to reduce the distress caused by these obsessions.

OCD can significantly interfere with daily functioning and quality of life.

OBSESSIONS

Obsessions are persistent, intrusive thoughts, images or urges that cause significant anxiety or distress. Common themes include:

- Fear of germs, dirt or illness
- Fear of harm or making a mistake, such as worrying about whether the oven was left on
- Intense need for things to be symmetrical, orderly or arranged in a particular way
- Unwanted, taboo or disturbing thoughts involving harm or inappropriate behaviour
- Fears related to religious or moral beliefs (scrupulosity).

COMPULSIONS

Compulsions are repetitive behaviours or mental acts performed to neutralise the anxiety caused by obsessions. They are often performed according to rigid rules. Common compulsions include:

- Excessive washing of the hands, body or items
- Repeatedly checking locks, appliances or safety measures
- Engaging in certain behaviours a specific number of times
- Repeating words, phrases or actions multiple times
- Organising objects in a particular order or symmetry
- Silent prayers, counting or repeating phrases in the mind.

OBSESSIONS AND COMPULSIONS CAN MANIFEST IN VARIOUS WAYS IN REAL LIFE

- A person might feel compelled to wash their hands repeatedly due to a fear of germs, leading to raw, chapped skin.
- They may constantly check if doors are locked or appliances are turned off, often multiple times, to prevent feared disasters.
- Another manifestation is arranging items in a specific order or symmetry, feeling extreme discomfort until everything is 'just right'.
- There can also be difficulty discarding items, regardless of their value, due to fear of needing them in the future or attachment to their memories.
- Individuals may also avoid situations that trigger obsessions, such as not touching public surfaces or avoiding certain social interactions.

OCD is a leading cause of disability in terms of mental health, ranking among the top 10 most disabling illnesses by the World Health Organisation.







THE IMPACT OF OCD ON HEALTH

OCD profoundly impacts an individual's mental, emotional and physical health, extending beyond obsessions and compulsions.

Persistent obsessions cause significant anxiety and distress, often leading to time-consuming compulsive behaviours that exacerbate stress levels. This chronic stress can result in heightened anxiety and feelings of hopelessness and depression. Studies show that individuals with OCD are at a higher risk of developing major depressive disorder, as the relentless nature of the condition can lead to a sense of lost control, despair and sadness.

> Around 1-2% of the UK population is thought to have OCD.

Constantly battling intrusive thoughts and compulsions can lead to feelings of inadequacy and low self-worth. The stigma and internal shame associated with OCD exacerbate these feelings, leading to isolation and misunderstanding. Fear of judgment can cause individuals to withdraw from social interactions. while avoidance behaviours contribute to loneliness and a lack of support. further impacting mental and emotional wellbeing. Interpersonal relationships can suffer as the need for constant reassurance and avoidance behaviours create tension and distance.

OCD also affects physical health. The effort required to manage obsessions and compulsions can lead to significant fatigue and sleep disturbances, affecting overall energy and daily functioning. Repetitive behaviours, like excessive hand washing, can cause skin damage, muscle pain and other chronic physical injuries. Obsessions with food contamination can result in restrictive eating habits, leading to malnutrition and nutritional deficiencies. As a result of this, OCD can reduce productivity and focus at work or school.

Decreased work performance or the inability to work can lead to financial strain, making the cumulative costs of managing OCD a significant burden for individuals and their families. The cost of ongoing treatment, therapy and medication can also have a financial impact.

OCD often begins in childhood or adolescence, with about 50% of cases starting before the age of 20. The average age of onset is around 19 years.





TREATMENT

Understanding OCD and its manifestations is crucial for recognising the disorder and seeking appropriate treatment. Early intervention and support can significantly improve the quality of life for those affected. Effective treatments include:

- Cognitive Behavioural Therapy (CBT): Specifically, Exposure and Response Prevention (ERP), which involves gradually exposing individuals to feared situations while preventing the compulsive response.
- Medication: Selective serotonin reuptake inhibitors (SSRIs) are commonly prescribed to help reduce symptoms.
- Mindfulness and Acceptance Strategies: Techniques that help individuals accept and live with their intrusive thoughts without engaging in compulsions.

Addressing OCD through effective treatment strategies and support from mental health professionals is crucial for mitigating these impacts and improving overall wellbeing. Treatment can help individuals manage their symptoms, reduce the burden of the disorder and enhance their quality of life.





MENTAL HEALTH IS A UNIVERSAL HUMAN RIGHT

WORLD MENTAL HEALTH DAY: 10TH OCTOBER 2024

This year, World Mental Health Day is focusing on the theme "Mental health is a universal human right", aiming to highlight the importance of ensuring fair access to mental health care and resources for every individual, regardless of background, nationality or economic status.

It advocates that everyone has the right to live with mental wellbeing, free from barriers such as discrimination, stigma or unequal access to care¹. Below are the core points supporting this:

Equality and Fairness:

Mental health care should be regarded as a basic human right, just like physical health care.

Access to mental health services must be universal, free from discrimination based on factors like race, gender, age or financial situation.²

> One in four people in the UK experience a mental health problem each year.⁶



WHO - Mental Health is a Universal Human Right
 UN - Human Rights and Mental Health
 Mental Health Europe - Stigma and Human Rights

In 2022, mental health issues cost UK employers £34.9 billion annually due to lost working days.⁷

Reducing Stigma and Promoting Awareness:

Viewing mental health as a fundamental right helps combat stigma and encourages societies to treat mental wellbeing with the same importance as physical health.

This shift is crucial in fostering safe environments where people feel empowered to seek help.

Comprehensive Health Approach:

True health includes a balance of physical, mental and social wellbeing.

Acknowledging mental health as a human right underscores the idea that health is incomplete without addressing mental wellbeing.³

Addressing Global Inequities:

In many regions, mental health care remains inadequate.

Elevating mental health to a universal right calls for global policy shifts, urging governments worldwide to invest in mental health care systems.⁴

Human Dignity:

This concept recognises that mental health is central to human dignity.

Everyone deserves to live with dignity, which includes access to appropriate mental health care and support.⁵

Positioning mental health as a universal human right urges policymakers, organisations and communities to prioritise mental wellbeing in their agendas, ensuring that mental health care is available, accessible and affordable for all.¹

One in eight adults with a mental health issue are currently receiving treatment.⁸

WHAT IS MENTAL HEALTH?

Mental health encompasses a person's emotional, psychological and social wellbeing, affecting how they think, feel and behave.

It influences stress management, relationships and decision-making.

More than just the absence of illness, mental health involves coping with life's challenges, working productively and contributing to society. Shaped by genetics, experiences and environment, mental health can change over time, highlighting the importance of recognising when support or treatment is needed.

 WHO - The Importance of Integrating Mental Health in Universal Health Coverage
 The Lancet Commission - Global Mental Health and Sustainable Development

6. Mind Mental Health Facts and Statistics
 7. Deloitte - Mental Health and Employers Report 2022
 8. Mental Health Foundation - Mental Health Statistics





NATIONAL STRESS AWARENESS DAY: 6TH NOVEMBER 2024

There are many different reasons why we might feel stressed including deadlines at work, financial pressures or personal relationships.

Sometimes stress can be useful in helping to motivate us, but otherwise it can have a negative impact. This negative impact could leave us feeling unable to cope which can affect our mental and physical health. We might feel overwhelmed, anxious or irritable, with physical symptoms including headaches and migraines. Stress can also lead to increased blood pressure, causing heart problems.

When we're feeling stressed, it is important to step away and make some time for ourselves. Try to remember what you like to do and get enjoyment from. Rest and recuperation will also help you to switch off and reset. These activities might help you to slow down, bring you back into the moment and de-stress:

- Reading a book
- Going for a walk
- Taking a bath
- Catching up with friends
- Engaging in a hobby, e.g. painting
- Listening to music or watching a film
- Baking.



other habits you can build into your daily life to help you manage stress more effectively. **Recognising stress:**

As well as trying to switch off, there are

Before you tackle it, you need to be able to identify it. Are you more forgetful, short tempered or accident prone, experiencing headaches, nausea, loss of humour or generally feeling and looking exhausted? If yes, you may be stressed!

Acceptance:

It's okay not to be okay!

If you are feeling physically, mentally or emotionally unwell, make sure you take the time to recover. If not, you could prolong your symptoms, or even make them worse.

Breathe[.]

Controlling your breath can really help to calm you down and put things into perspective. Give your brain a generous helping of oxygen. Take a slow deep breath through your nose, hold for five seconds and slowly exhale through your mouth.

Repeat five times.

Aim for good quality sleep:

Poor sleep leads to stress, stress can lead to insomnia and insomnia leads to more stress. It's a vicious cycle! Aim to get between seven and nine hours sleep each night.

Get into a good bedtime routine whether that be reading, listening to music or watching TV.

Let's get physical:

Research shows that exercise relieves the emotional intensity of stress. It doesn't need to be really strenuous and going for a brisk walk or doing some gentle stretching is a great way to clear your head.

What's more, exercise produces endorphins (happy hormones) which make us feel good!

Make a list:

Feeling overwhelmed with your workload? Make a list, prioritise and delegate if possible. Break big tasks down into manageable chunks and then set achievable targets for each section. This will help with motivation and putting workload into perspective.





GROW YOUR MO

WORLD SUICIDE PREVENTION DAY: 10TH SEPTEMBER 2024 MOVEMBER: NOVEMBER

Men will die on average four years earlier than women.

Movember is an annual event which takes place in November, involving the growing of moustaches to raise awareness of men's health. This includes prostate cancer, testicular cancer and suicide prevention.

Women can get involved and support too by raising awareness and fundraising.



Movember began in Australia in 2003, when a group of friends decided to grow moustaches to raise money for charity. They encouraged friends, family and colleagues to get involved and donate to their effort.

Since it was founded, Movember has raised over £400 million which has been donated to a variety of charities.

PROSTATE CANCER

The prostate gland is a walnut-sized gland located just below the bladder and in front of the rectum in men. It forms part of the male reproductive system, producing a fluid that nourishes and helps to transport sperm.

Prostate cancer occurs when cells in the gland start to grow uncontrollably, forming a malignant tumour. If not detected and treated early, these cancerous cells can spread to other parts of the body. The cancer tends to grow slowly and often remains confined to the prostate gland, meaning it may not become lifethreatening in many cases.

While the exact cause of prostate cancer is not fully understood, risk factors include:

- Age (it is more common in older men)
- Family history of the disease
- Race (African American men have a higher risk)
- Certain genetic mutations.



Early-stage prostate cancer may not show any symptoms, but as the disease progresses men may experience symptoms such as:

- Difficulty urinating
- Weak or interrupted urine flow
- Blood in the urine or semen
- Erectile dysfunction
- Pelvic pain.

If any of these symptoms are present, it is important to see a doctor for a proper evaluation.

Regular check-ups and early detection are essential for better treatment outcomes as prostate cancer can be more effectively treated when detected in its early stages.

Prostate cancer is one of the most common types of cancer in men, with 52,000 men being diagnosed in the UK each year and one in eight men being diagnosed in their lifetime.



TESTICULAR CANCER

The testicles are the male reproductive glands, responsible for producing sperm and the hormone testosterone.

Testosterone is crucial for male development during puberty and contributes to overall physical and mental wellbeing as it helps to maintain bone density and muscle mass.

Testicular cancer is one of the most curable forms of cancer and has one of the highest survival rates, especially when diagnosed and treated early. In many cases, treatment can still be effective even if the cancer has spread.

The exact causes of testicular cancer are unknown, but certain risk factors may increase the likelihood of its development:

- Undescended testicles at birth (cryptorchidism)
- Family history of testicular cancer
- Previous history of testicular cancer (increased risk in the other testicle)
- Abnormal testicular development
- It is also more common in young white men.

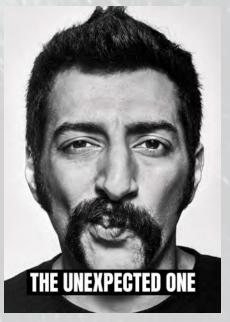
Symptoms:

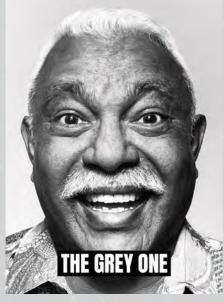
- A lump or swelling in one or both testicles
- Pain or discomfort in the testicles or scrotum
- Heaviness or aching in the lower abdomen or groin area
- Changes in the size or shape of the testicles
- Back pain (if the cancer has spread to the lymph nodes or other parts of the body).

Regular self-examination of the testicles is essential for early detection, and any concerning symptoms should be evaluated promptly by a healthcare professional.

> Globally, testicular cancer is the most common cancer amongst young men.







UROLOGY, SEXUAL HEALTH AND HYGIENE

UROLOGY AWARENESS MONTH: SEPTEMBER SEXUAL HEALTH WEEK: 9TH-15TH SEPTEMBER 2024 NATIONAL HYGIENE WEEK: 2ND-8TH OCTOBER 2024

Urology specialises in the diagnosis, treatment and management of diseases and conditions affecting the urinary tract and the male reproductive system.

The urinary tract includes the kidneys, ureters, bladder and urethra, while the male reproductive system includes the testes, prostate and penis.

Urologists are medical specialists trained to treat a wide range of urological conditions, from urinary infections to complex surgical procedures like kidney transplants.

Urology covers:

- Kidney disorders such as kidney stones, kidney infections and chronic kidney disease.
- **Bladder conditions** including urinary incontinence, bladder infections (cystitis) and bladder cancer.
- Prostate issues such as benign prostatic hyperplasia (BPH), prostatitis and prostate cancer.
- Urethral and ureteral problems including urethral stricture and ureteral stones.
- Male reproductive health including erectile dysfunction, male infertility and Peyronie's disease.

WHAT IS PEYRONIE'S DISEASE?

The development of fibrous scar tissue (plaques) inside the penis, which can cause it to bend or curve during erections.

While urology predominantly deals with male sexual health, some urologists specialise in female urology (urogynaecology) and address conditions like urinary incontinence, pelvic organ prolapse and sexual dysfunction in women.

ERECTILE DYSFUNCTION

Erectile dysfunction (ED) is a common condition treated by urologists.

It involves difficulty achieving or maintaining an erection sufficient for sexual intercourse.

Causes can include cardiovascular disease, diabetes, hormonal imbalances, neurological conditions and psychological factors.

UROLOGY AND SEXUAL HEALTH

Sexual health is closely linked to urology, particularly in men, due to the overlap between the urinary tract and the reproductive system. Therefore, urological conditions can directly impact sexual function and reproductive health. Urologists often address conditions that affect sexual function, reproductive health and overall sexual wellbeing.

They also treat male infertility, which can result from issues such as low sperm count, poor sperm motility, varicoceles (enlarged veins in the scrotum) and hormonal imbalances.

Diagnostic tests and treatments, including surgery and assisted reproductive technologies, fall within the urologists' expertise.

Urologists provide both medical and surgical treatments to manage symptoms and improve sexual function. According to a 2021 study published in BJU International, ED now affects up to one in five men across the country – a total of approximately 4.3 million men.

The same study found that ED has become more common than heart disease and cancer among men aged 40-70 in the UK.¹

The prostate gland plays a significant role in male sexual health, contributing to the production of seminal fluid. Conditions like BPH (benign prostatic hyperplasia) and prostate cancer can impact sexual function. Treatments for these conditions, such as surgery or medication, can also affect sexual health.

Hormonal imbalances, such as low testosterone levels, can affect libido and sexual performance. Urologists address these issues with hormone replacement therapy and other treatments.



Sexually transmitted infections (STIs) are another area where urologists play a crucial role. They diagnose and treat STIs, which can impact both urinary and reproductive health. Early detection and treatment are crucial for preventing complications.

Using condoms and practicing safe sex can prevent STIs, which are a significant concern in both sexual health and urology.

The incidence of poor sexual health in the UK is a growing concern, with recent data highlighting significant increases in sexually transmitted infections (STIs). In 2022, there were 392,453 reported cases of STIs in England, marking a 24% rise from the previous year. Specific increases include a 50% rise in gonorrhea and a 15% rise in syphilis cases.^{1,2}

UROLOGY AND HYGIENE

Good hygiene is essential in maintaining overall urological and sexual health. Regular cleaning of the genital area helps prevent infections and conditions such as balanitis (inflammation of the glans penis) and urinary tract infections (UTIs). For men, this includes proper care of the foreskin in uncircumcised individuals.

Women should maintain proper vulvar hygiene to prevent conditions like bacterial vaginosis and yeast infections. Washing hands before and after sexual activity or contact with genital areas can reduce the risk of spreading infections.

- GOV.UK
- Terrence Higgins Trust
- UK Parliament Publications
- Terrence Higgins Trust.

Maintaining good sexual health involves a combination of practices and lifestyle choices that promote overall wellbeing:

- **Practice safe sex**: Consistently using condoms during vaginal, anal and oral sex reduces the risk of STIs, including HIV.
- Regular STI testing: This is crucial for those with multiple partners. Early detection and treatment prevent complications and reduce transmission. Encouraging sexual partners to get tested helps maintain healthy sexual relationships and prevent infections.
- HPV vaccine: Protects against strains of HPV that cause genital warts and cervical cancer.
- Communication and consent: Discussing sexual health, boundaries and STI status with partners fosters trust. Ensure all sexual activities are consensual, involving mutual agreement without pressure.

DID YOU KNOW...?

- Urinating after sexual intercourse can help flush out bacteria from the urethra, reducing the risk of UTIs, especially in women.
- Wearing clean, breathable underwear and avoiding tight clothing can prevent moisture buildup and reduce the risk of fungal infections and irritations.
- Acute UTIs affect 50% of women.⁴

- Avoid risky behaviors: Excessive use of alcohol and drugs can impair judgment and lead to risky sexual behaviour.
- Education: Being informed about sexual health, STIs, contraception and healthy relationships empowers safe choices. You can utilise sexual health clinics, online information and community health services for guidance and support.
- Healthy lifestyle: This supports healthy sexual function and overall wellbeing.
- Mental health: Addressing mental health issues and reducing stress can improve sexual health.



KNOW YOUR NUMBERS

BLOOD PRESSURE AWARENESS WEEK: 2ND-8TH SEPTEMBER 2024 NATIONAL CHOLESTEROL MONTH: OCTOBER NATIONAL FITNESS DAY: 18TH SEPTEMBER 2024 WORLD HEART DAY: 29TH SEPTEMBER 2024

BLOOD PRESSURE

One in three adults in the UK have high blood pressure.

Blood pressure is the pressure of blood in your arteries. Your arteries are the vessels which carry blood from your heart to your brain and the rest of your body. A certain amount of pressure is required to get the blood moving around your body. Blood pressure fluctuates throughout the day and increases when you're moving around. However, if your blood pressure is high all the time, even when resting, this is when action must be taken.

Normal range: 90/60mmHg – 120/80mmHg

- The first number is the systolic pressure: This is the highest level your blood pressure reaches when your heart beats, forcing blood around your body.
- The second number is the diastolic pressure: This is the lowest level your blood pressure reaches as your heart relaxes between beats.

Around 50% of heart attacks and strokes are associated with high blood pressure. Six million people in the UK have high blood pressure and don't know it.

Hypertension or high blood pressure: 135/85mmHg or higher

With high blood pressure, your arteries are no longer as stretchy, meaning they become stiff and can narrow. This narrowing can make it easier for fatty material to build up. This can damage the arteries leading to your heart or brain and can increase your risk of a heart attack or stroke. In the majority of cases, there isn't a specific reason for the cause of high blood pressure, but you might be more at risk if you:

- Smoke
- Have a poor diet, consuming lots of salt and not enough fruit and vegetables
- Are over the age of 65
- Don't do enough exercise
- Drink too much alcohol or coffee
- Are overweight, especially around your waist.

Every day, 350 people in the UK have a stroke or heart attack which could have been prevented.

Hypotension or low blood pressure: 89/59mmHg or lower

Your blood pressure can vary depending on the time of day, but what you're doing and how you're feeling can also affect it. There are lots of potential causes of low blood pressure. It could be because you're fit and healthy, inherited from your parents, are pregnant or caused by a medical condition such as diabetes.

Most people with low blood pressure do not have noticeable symptoms. However, in some people it may increase the risk of fainting, feeling weak or sick and dizzy. Staying hydrated, getting up slowly from sitting to standing, eating small, frequent meals and lying down or sitting still for a while after eating can help minimise the symptoms.

If re-occurring, see a doctor to check for potential underlying medical conditions.

HOW TO CHECK YOUR BLOOD PRESSURE

How?

Where?

Your GP surgery or some pharmacies.

It's usually measured using a blood pressure monitor. This is an electric monitor connected to an inflatable cuff, wrapped around your upper arm.

When?

If you're a healthy adult aged 40 to 74, it is advisable to get your blood pressure checked every five years.

CHOLESTEROL

60% of adults are affected by high cholesterol in the UK.

Cholesterol is a fat-like waxy substance which helps your body to form cell membranes, hormones and vitamin D. It is made in the liver and found in some foods. We all need cholesterol, but too much can clog up your blood vessels and lead to health problems.

There are two types of cholesterol, high-density lipoproteins or HDL (good cholesterol) and non-HDL (the difference between total cholesterol and HDL). HDL cholesterol transports the cholesterol you don't need back to the liver, where is it broken down and removed from your body. Non-HDL cholesterol is what can build up and narrow blood vessels.

Healthy range:

Total cholesterol: Below 5mmol/L

HDL: Above 1.0mmol/L for men or above 1.2mmol/L for women

Non-HDL: Below 4mmol/L

CARDIOVASCULAR DISEASE

Cardiovascular disease (CVD) is an overarching term for conditions affecting the heart or blood vessels. There are lots of different types of CVD – the four main types are described below.

CVD is one of the main causes of death and disability in the UK.

1 Coronary Heart Disease

Coronary heart disease (CHD) happens when the oxygen rich blood travelling to the heart muscle is blocked or reduced. This can cause:

- Angina
- Heart attacks
- Heart failure.

2 Strokes and Transient **Ischaemic Attack**

A stroke occurs when the blood supply to part of the brain is cut off and can cause brain damage and possible death. A transient ischaemic attack (TIA) is similar, but the blood flow is only temporarily disrupted.

High cholesterol is when your blood contains too much cholesterol. This can block your arteries and increase your risk of heart issues or a stroke. Although it usually doesn't cause symptoms, high cholesterol is linked with high blood pressure due to the cholesterol causing your arteries to become hard and narrow. This causes a strain on your heart to pump blood through your arteries, raising your blood pressure.

High cholesterol is usually caused by foods high in fat, lack of exercise, being overweight, smoking and drinking alcohol. It can also run in families. Cholesterol levels can rise during pregnancy and menopause.

High cholesterol is also affected by things we can't change:

- Getting older the chances of having higher cholesterol increase with age
- Males biological sex males are more likely to have high cholesterol
- Ethnic background those from a South Asian background are more likely to have high cholesterol.

In England, high cholesterol leads to 7% of all deaths.

Individuals can lower their cholesterol by eating a healthier diet, avoiding high fat foods and exercising more.

HOW TO CHECK YOUR BLOOD CHOLESTEROL

Where?

Your GP surgery or some pharmacies (you may have to pay).

How?

There are two ways of having a cholesterol test, either by taking blood from your arm or through a finger prick test.

When?

If you're over 40 and overweight or high cholesterol or heart problems run in your family.

The main symptoms can be identified and remembered with the word FAST which stands for:

Face – sometimes the face may droop on one side, meaning the person is unable to smile

Arms – the person may not be able to lift both arms and keep them there due to weakness or numbness in one arm

Speech – speech may be slurred or garbled, meaning they are unable to talk, or you cannot understand what they are saying

Time – time to call 999 immediately if you see any of these signs or symptoms.

3 Peripheral Arterial Disease

Peripheral arterial disease happens where there is a blockage in the arteries which go to the limbs, usually the legs. This can lead to:

- Cramping leg pain which gets worse when walking
- Hair loss from the legs and feet
- Numbness or weakness in the legs.
- **4** Aortic Disease

Aortic diseases are a collection of conditions which affect the aorta, the biggest blood vessel in the body that

carries blood from the heart to the rest of the body. An aortic aneurysm is one of the most common diseases and causes the aorta to bulge outward when it's weakened. Usually there are no symptoms, but there is a chance it could burst which can cause lifethreatening bleeding.

Causes and Prevention of CVD

- Both high blood pressure and high cholesterol can increase your risk of developing CVD.
- Smoking is also a factor as tobacco can damage and narrow your blood vessels.
- Lack of exercise will increase your likelihood of being overweight and having high blood pressure and high cholesterol which leave you at an increased risk of developing CVD.

If you're over 40, you will be invited to a health check every five years by your GP.

Leading a healthy lifestyle can help you have a healthy heart. Ensure you eat a balanced diet, low in saturated fat, salt and sugar and with plenty of wholegrains and fruit and vegetables. Exercising regularly can help you maintain a healthy weight and to lose weight if you are overweight or obese. Cutting down on alcohol is also advisable and you should be consuming no more than 14 units a week.

Low blood pressure - BHF

High cholesterol - symptoms, causes & levels - BHF What is cholesterol? | What are lipids? | Heart UK-The Cholesterol Charity Cardiovascular disease - NHS (www.nhs.uk)

NATIONAL FITNESS DAY

18TH SEPTEMBER 2024

National Fitness Day steps in to remind us of the importance of physical activity to help us lead healthier lifestyles.

It is recommended that we do **150 minutes of moderate intensity activity** (brisk waking, a leisurely bike ride or dancing) or **75 minutes of vigorous activity** (jogging, a fast bike ride or jumping rope) a week, plus strength activities twice a week. Keeping fit does not always mean heading to the gym, especially if you don't enjoy it – no one wants to do something they hate! You'll get the most out of being active if you enjoy it as you will keep going back for more.

THERE ARE PLENTY OF WAYS TO KEEP ACTIVE:



Walking or running These are easy and accessible exercises.



Take the stairs

An oldie but a goodie, taking the stairs instead of an escalator or lift is great for working the major muscle groups in the legs and glutes.



Hula hooping

Hula hooping was a bit of fun as a kid, but as an adult it can be a serious workout. Bonus points if you use a weighted hula hoop!



Housework

While this doesn't seem an obvious form of exercise, vacuuming and dusting increases your steps and overall movement.



Build your own workout

If getting to a gym class, or paying for one, is putting you off working out, don't worry, you can get the same benefits from a home workout. Check out the NHS website or YouTube for some free workouts!



Dance

How long has it been since you had a dance to your favourite music? Let your hair down, draw the curtains (if you've got particularly nosy neighbours!), put on your favourite tunes and get moving.



Play a team sport

Playing sport as part of a team can help you get active while making friends and feeling part of your community.



Shopping

You might not think of it as a physical activity, but shopping can add a lot of steps to your day, not to mention carrying those heavy bags (which counts as a strength activity)! Bonus points if you park your car further away from the entrance or walk to and from the shops. If you want to try a new activity or look to start your personal fitness journey for the first time, there are plenty of free opportunities for you, your friends, family and colleagues. Check out this activity finder **HERE** to see what's going on in your local area.

HEALTHIER BODY

STOPTOBER: OCTOBER

Stoptober is a government campaign which launched in 2012 to encourage people to stop smoking for 28 days during the month of October.

Research shows that if you manage 28 days smoke free, you're five times more likely to quit for good.

Smoking harms almost every organ in your body, can increase your risk of developing certain diseases and reduces your general health. Most smokers want to stop because they know the risks to their health, but many keep smoking because they are addicted to nicotine and use the habit to relieve stress.

Stopping smoking can be really challenging, but there is lots of support available online and in person to help you through. If you've decided to take the first step in your journey to quitting smoking, well done! Follow the tips below to help you:

- 1 Write down the reason you are quitting, e.g. to be healthier and live longer for your family. This will help to remind you why you've made the decision when it gets hard.
- 2 Let people know you may find other friends or family who want to give up too and you can support each other.
- 3 Find a local stop smoking service these involve one-to-one or group sessions led by a specialist to help you break your habits. You are four times more likely to successfully quit with expert help and advice.
- 4 Explore different medicines or treatments, such as nicotine replacement therapy, patches, tablets, gum, nasal spray and e-cigarettes.
- 5 Distract yourself during periods of cravings and urges – take part in a physical activity like going for a walk and leave your cigarettes at home, or something different like relaxation techniques or listening to your favourite music.

When you quit smoking, you will notice almost immediate improvements to your health. Below is a timeline of what happens once you've quit smoking.

WHAT HAPPENS ONCE YOU QUIT SMOKING?

20 minutes

Your heart rate and blood pressure return to normal

1 year

Your risk of having a heart attack is half that of a smoker

3-9 months

Any coughs, wheezing or breathing problems will be improving as lung function increases by up to 10%

2-3 days

• Your sense of smell and taste improve

2-12 weeks

Exercise becomes easier as your circulation will have improved and blood can pump through to your heart and muscles much better

After 10 years, your risk of death from lung cancer is half that of a smoker's.

The benefits of giving up smoking are not just physical – there are mental health benefits too!

Evidence shows that once you are past the withdrawal stage, your levels of stress, anxiety and depression will decrease and your mood is likely to increase. It is thought that you will feel these benefits within six weeks of quitting.



After 15 years, your risk of having a heart attack falls to the same level as someone who has never smoked.

Many people choose to stop smoking due to friends and family.

Stopping smoking allows you to spend more time with and support your loved ones, as well as being physically and mentally healthier in their future lives. Being a smoke-free role model also means the people around you are less likely to take up smoking.

Teens with parents or carers who smoke are four times as likely to take up smoking.

Quitting smoking means you'll also be better off financially.

Saving the money you previously spent on cigarettes allows you to spend more on hobbies, save for a holiday or put money into savings.

The average smoker can save around £38 a week by quitting, adding up to £2,000 a year.

Other support available for giving up smoking includes:

Quit smoking - Better Health - NHS (www.nhs.uk)

Find Your Local Stop Smoking Service (LSSS) – Better Health – NHS (www.nhs.uk)



THE DECISION OF CONTROL OF CONTRO

WORLD ALZHEIMER'S DAY DAY: 21^{SH} SEPTEMBER 2024

Alzheimer's is the most common cause of dementia which affects memory, thinking and behaviour, accounting for 60–80% of all dementia cases.

It is a degenerative brain disease caused following cell damage due to complex brain changes.

Alzheimer's is most common in people over 65 and affects one in 14 people over 65 and one in six people over the age of 80. About one in 13 people with Alzheimer's are under 65 and this is known as early or young-onset Alzheimer's disease.

One in three people born in the UK today will develop dementia.

The exact cause of Alzheimer's disease is not fully understood, but there are a number of factors which can increase your risk of developing it. Increasing age is the largest known risk factor and having a family history of the condition is another. Having an unhealthy lifestyle and conditions linked with cardiovascular disease can also increase your chances of developing the disease. Although there is no known way to prevent Alzheimer's, the following measures may reduce your risk. They will also help to improve your overall mental health, maintain a healthy weight and lower your risk of cardiovascular disease:

- Stopping smoking and reducing alcohol intake
- Eating a healthy, balanced diet including adequate protein and minimal processed foods high in fat, salt and sugar
- Keeping fit and doing regular exercise (150 minutes of moderate activity a week)
- Staying mentally active by learning a new skill, playing board games or doing a crossword.

Alzheimer's is progressive which means that the individual's condition gets worse gradually over time and becomes more severe. In the early stages of the disease, having trouble remembering new information is one of the most common symptoms. This is because it impacts the part of the brain which is associated with learning first. An individual may struggle to remember the names of places or objects, as well as forgetting about recent events. Further symptoms that may develop include:

- Confusion and disorientation
- Difficulty planning or making decisions
- Problems with speech
- Changes in personality e.g. aggressive, demanding, suspicious of others
- Low mood or anxiety.

THE IMPACT OF A DEMENTIA DIAGNOSIS:

A dementia diagnosis can trigger a range of emotions including grief, anger, loss, shock, fear and even relief. Some people may struggle with these emotions, and they may trigger depression and anxiety. There can sometimes be positive reactions as the individual knows the causes of their symptoms and can plan ahead.

Everyone will have different emotional reactions and ways to cope with them, but it is important that the person receiving the diagnosis and those around them are able to express their feelings. Changes in emotional responses can be common in people with dementia, so try to look past words and behaviours to understand what the person might be trying to express. If a person makes a mistake, try to be as supportive as possible.

Dementia may also cause people to feel insecure and lose confidence in themselves and their abilities. This can be due to them feeling they are no longer in control and unable to trust their own judgement. These changing circumstances can affect finances, employment status and relationships with others which can have a negative impact on self-esteem.

OF LESS OF LES

ORGAN DONATION WEEK: 23RD-29TH SEPTEMBER 2024

Organ donation is when you give one of your organs to someone else to save or transform their life.

The individual's unhealthy organ is removed by doctors and replaced with a donor's healthy organ in a process called a transplant. Organ donation usually happens once the donor has passed away, however it's possible to become a living donor.

There is no age limit on who can be an organ donor after death, but donors need to die in hospital in specific circumstances. Each case is different, and a specialist healthcare professional will decide whether a person's organs and tissue are suitable for donation.

Children can register themselves, or a parent or guardian is able to register them. In Scotland, children under 12 and those under 18 in the rest of the UK will require their parent or guardian's permission for a donation to take place.

Certain illnesses or medical conditions may prevent individuals from being an organ donor, such as active cancer and HIV. However, individuals are assessed on a case-by-case basis prior to donation.

WHAT CAN YOU DONATE?

You can choose what to donate, and also opt out of donating certain organs too. The most common organs which are donated include:

- Heart
- Lungs
- Kidneys
- Pancreas
- Liver
- Small Bowel

You can also be a living donor and donate a kidney or part of your liver whilst still alive.

A healthy individual can live with only one functioning kidney and can therefore donate the other one to someone in need of a kidney transplant.

Donating part of your liver can be lifesaving in patients with end stage liver disease. You can also be a living tissue donor and donate bone or part of your placenta. This opportunity arises when you have a planned hip operation or give birth by elective caesarean section.

HOW DO YOU REGISTER TO DONATE?

BOD

IEALTHIER

Laws are slightly different across the UK, but all nations are now 'opt out' which means that, unless you have recorded a decision not to donate or you are in an excluded group, you will be considered to have agreed to be an organ donor.

You can go online to:

- 1 Register to donate
- 2 Register to not donate
- 3 Amend your registration

It is important to let your family and friends know your decision so they can support if the situation arises. Once you have registered to be a donor, you can carry a donor card with you so people are aware of your decision.

WHY SIGN UP?

In the UK, more than 3,000 lives are saved or improved each year by organ transplants.

Every organ donor has the potential to save up to nine lives.



BLOOD CANCER

BLOOD CANCER AWARENESS MONTH: SEPTEMBER

In the UK, 40,000 people are diagnosed with a blood cancer each year.

WHAT IS IT?

Blood cancer is a type of cancer which affects the blood cells. The most common types are leukaemia, lymphoma and myeloma, as well as myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN).

You might have heard of Hodgkin lymphoma or chronic lymphocytic leukaemia which are both specific types of blood cancer. Blood cancers can be described as acute or chronic. Acute is the term given to those which are faster growing and chronic is for those which grow more slowly.

WHAT ARE THE CAUSES?

There are no specific known causes of blood cancer, but there are some things which we know might affect the risk of developing it. These include age, sex, ethnicity, family history and radiation or chemical exposure. However, the risk will depend on the type of blood cancer.

WHAT ARE THE SYMPTOMS?

Individuals with blood cancer may experience a range of symptoms which can include, but are not limited to:

- Unexplained weight loss
- Unexplained bruising or bleeding
- Breathlessness
- Night sweats
- Unexplained fever (temperature above 37.5°C)
- Pain in bones, joints or stomach area
- Tiredness which doesn't improve with sleep or rest.

WHAT IS THE TREATMENT?

There are lots of different treatments for blood cancer and individuals may have one or a combination depending on which blood cancer they have. Common treatments include:

- Chemotherapy
- Immunotherapy
- Radiotherapy
- Stem cell transplants.

SUPPORT

- Understanding Blood Cancer | Leukaemia UK
- Leukaemia Care The UK's leading leukaemia charity
- Blood Cancer UK | We're here to beat blood cancer
- Blood cancer | Macmillan Cancer Support.

BREAST CANCER

BREAST CANCER AWARENESS MONTH: OCTOBER

Around 56,400 women and 390 men are diagnosed with breast cancer each year in the UK.

WHAT IS IT?

Breast cancer occurs when abnormal cells grow within the breast and divide uncontrollably, eventually forming a growth (tumour). The most common area for breast cancer to start is in the cells which line the milk ducts of the breast.

Secondary breast cancer is when the cancer has spread to another part of the body such as the bones.

Breast cancer is the most common cancer in the UK. It mainly affects women, but men can get it too.

WHAT ARE THE CAUSES?

There aren't any known specific causes, but it is thought that being overweight or obese can increase the risk of developing breast cancer.

Other factors thought to increase this risk include alcohol consumption, ageing, family history and inherited genes. Around 5 - 10% of breast cancers are caused by an inherited faulty gene.

WHAT ARE THE SYMPTOMS?

One of the first symptoms of breast cancer that people notice is often a lump or thickening of the tissue in their breast or armpit. Other common symptoms to look out for are:

- Change in the size, shape and feel of the breast
- New puckering, dimpling, a rash or redness on the skin of the breast
- Fluid leaking from the nipple (in a woman who isn't breastfeeding or pregnant)
- Changes in the position of the nipple (one nipple might turn in or sink into the breast).

WHAT IS THE TREATMENT?

Treatment for breast cancer can depend on several factors, including the location and size of the tumour and the individual's general health. Most people will begin their treatment for breast cancer with surgery. This can be breast conserving surgery (lumpectomy) or surgery to remove the breast (mastectomy).

Individuals may also have surgery to remove the lymph nodes in the armpit where cancer cells have broken away from the breast tissue. Other main treatments include:

- Chemotherapy
- Radiotherapy
- Hormonal therapy
- Targeted cancer drugs and immunotherapy.

SUPPORT

Breast cancer | Cancer Research UK

EALTHIER BODY

- CoppaFeel! | Check Your Chest | Breast Cancer Awareness Charity
- Breast Cancer Now Forum
- Breast cancer information and support | Macmillan Cancer Support.

The symptoms of blood and breast cancer are often caused by other medical conditions, but it's important to make an appointment to see your GP if you are experiencing any of them.

DIETARY TIPS TO PREPARE AND SUPPORT YOUR BODY THROUGH MENOPAUSE



Dr Laura Wyness, a registered nutritionist and author of *Eating Well for Menopause*, specialises in supporting women to make positive dietary changes during midlife and menopause. With nearly 20 years of experience working as a nutritionist, Laura translates complex science into clear practical steps, to help women have a smoother menopause transition.

MENOPAUSE AWARENESS MONTH: OCTOBER

MENOPAUSE LINGO LOW-DOWN

The term 'menopause' is generally used to describe the whole transition of hormones changing until periods finally stop. However, menopause is actually a specific point in time – defined as not having had a menstrual period during the previous 12 months. Perimenopause is the time around menopause when hormone levels fluctuate and symptoms often occur. This phase can last several years before reaching menopause.

In the UK, the average age of menopause is 51 years, but it can occur naturally anywhere between 40-60 years.

The average age of menopause is lower in Afro-Caribbean (50 years) and south Asian women (47 years). Early menopause can run in families or be a side effect of some treatment, for example chemotherapy or surgery to remove the ovaries.

Being well-informed about menopause can help you feel more confident with your dietary choices to prepare and support your body through the menopause transition.

Optimising your nutrition can help support your body in terms of bone health, heart health and can help manage weight and menopausal symptoms. Following are some key nutrition considerations and dietary tips to support your body around this life stage.



PROTEIN

Protein is vital for helping reduce age-related muscle loss and the risk of osteoporosis. Adults lose 3-8% of their muscle mass every decade from age 30. This loss speeds up after 50 years, and particularly during the menopause transition. Protein is also key for maintaining healthy bones as it forms the mesh within bones which is strengthened by minerals (such as calcium) attaching to it. Women are at much greater risk of osteoporosis - half of all women over the age of 50 will suffer a fracture due to poor bone health compared to 20% of men. Protein helps satisfy appetite, stabilise blood sugar and may help reduce cravings which can be helpful in maintaining a healthy weight. Protein is also needed to make serotonin and other neurotransmitters important to mood and brain function.

Include a variety of protein foods across the day

In the UK, we tend to get enough protein in the diet. What we don't do so well at is spacing out our protein intake. The body uses protein more efficiently when intake is spread out across the day. Aim to include some protein at each meal. Visually, the protein component of a meal should make up a quarter to a third of your plate. Snacks such as yoghurt, hummus or a handful of nuts, will also add some protein. Include a variety of protein foods such as lean, unprocessed meats, fish, beans, peas, lentils, eggs, dairy foods, tofu, mycoprotein (Quorn[™]) and some nuts and seeds.



FIBRE-RICH PLANT FOODS

Including plenty of plant foods such as fruits, vegetables, whole grains, beans, peas, lentils, as well as some nuts and seeds, and using herbs and spices will provide beneficial fibre for your gut microbes. In the UK, only 6% of women (aged 19-64y) meet the 30g a day fibre recommendation.¹

Including a wide variety of plant foods will help increase the diversity of microbes in the gut. A healthy and diverse gut microbiome can help balance hormone levels.

However, the natural decline in oestrogen during perimenopause has a direct effect on the gut microbiome and seems to decrease the diversity of gut microbes. This can lead to digestive issues such as bloating and constipation.

Eating well to support your gut microbes may help alleviate some menopausal symptoms. The majority of the body's serotonin ('the happiness hormone') is produced by gut microbes, so a healthy and diverse gut microbiome will help support mood and may help manage anxiety, leading to a better night's sleep.

What to eat to support your gut microbes

Aiming to include at least 30 different plant foods in a week is a great way to increase your fibre and diversity of gut microbes. Opting for fibre rich foods, such as whole grains, vegetables, fruits and legumes, will help digestion and provide fuel to feed your beneficial bacteria.

Including some fermented foods such as natural yoghurt, kefir, kombucha and sauerkraut provides probiotics (beneficial bacteria) to your gut.

Including berries, nuts, seeds, vegetables, herbs and spices is useful as these are rich in polyphenols. These are plant compounds that act as prebiotics in the gut to feed your microbes.



DIETARY PHYTOESTROGENS

Phytoestrogens (plant oestrogens) are naturally found in a variety of plant foods, particularly soya. They have a mild oestrogen effect in humans when consumed regularly. Some women find including dietary phytoestrogens useful in relieving menopausal symptoms, particularly hot flushes. Interestingly, 70-80% of women in the USA experience menopausal hot flushes, compared with 10-20% of Asian women, where soya intake is much higher.²

What foods provide phytoestrogens?

Soya foods and drinks are uniquely rich in isoflavones (a type of phytoestrogen). There are a variety of ways to include soya in the diet. Most common are soya drinks, tofu, soya meat alternative products and edamame beans (the young, green soya beans).

Fermented soya products include: miso, natto, tempeh and soya alternatives to yoghurt. Other foods that provide some phytoestrogens include flaxseeds, lentils, chickpeas, broccoli, dried apricots and sesame seeds.

HEART HEALTHY FOODS

Heart disease is often thought of as something that affects men more, but actually it's something that women, especially peri- and post-menopausal women, should think about.

You may be surprised to hear that 77% of women aged 45 to 64 years have raised cholesterol. The figure for men in this age group is 67%.³

High cholesterol is a significant risk factor for cardiovascular disease. As high cholesterol doesn't usually have any notable signs or symptoms, it's important to get a cholesterol check and know your numbers.

Heart healthy dietary habits

A Mediterranean or plant-rich diet is beneficial for heart health.

Swapping saturated fats (e.g. butter, ghee and coconut oil) and foods high in saturated fats (e.g. pastries, cakes and biscuits) for unsaturated fats (e.g. olive or rapeseed oil) and oily fish, nuts and seeds is a useful change to help lower cholesterol. Oats and barley are particularly useful for lowering cholesterol as these contain beta-glucan which is a type of soluble fibre that helps lower cholesterol. Including a daily handful (about 30g) of nuts has been shown to help reduce total and LDL (the bad) cholesterol.4

VITAMIN D

Vitamin D is an important nutrient around menopause. As well as being a key nutrient supporting bone health and muscle function, evidence suggests it may have an important role supporting immune function, sleep, mood and energy levels. The main source of vitamin D is sunlight. However, we only get enough of the right kind of sunlight for our bodies to make vitamin D in the summer months, mostly between 11am and 3pm. As very few foods provide vitamin D, a supplement is recommended.

Top tip for taking a vitamin D supplement

As vitamin D is a fat-soluble vitamin, it's best absorbed when taken with food containing fat. Therefore, take your vitamin D supplement along with a meal.

SOME COMMON MENOPAUSAL SYMPTOMS

- Hot flushes or night sweats
- Difficulty sleeping
- Feeling tired
- Muscle and joint pain
- Dry or itchy skin
- Thinning hair
- Anxiety
- Changes in mood
- Brain fog
- Loss of interest in sex
- Headaches
- Needing the toilet more often
- Loss of confidence
- Heart palpitations.











PERSONAL EXPERIENCES OF MENOPAUSE A Q&A WITH CLAIRE SWIFT



Claire Swift, Group Manager – ESS

What has been your experience with the menopause?

I was initially diagnosed with menopause symptoms when I was 39. I started my periods aged 10 and my mum had the menopause around a similar age, so it wasn't a complete surprise.

My symptoms included hot sweats, being very feisty and having a short fuse, something which was quite out of character for me. This lasted until I was about 45, and then between the ages of 45 and 49 I was fine and had no symptoms.

From 50 onwards they've come back again, including periods and hot sweats and I feel part of my razorsharp brain has left me. I've learnt to cope with the hot flushes, but the hot sweats are awful. After heavy bleeding I have now had a coil fitted and been given HRT. I struggle with the constant hot body temperature and feel like a furnace burning away. My poor husband hates it at night when I am just radiating heat. Another part I don't enjoy is the lack of sleep. Being someone who used to be such a heavy sleeper getting 10 hours a night, I'm lucky if I get five hours now. This has a knock-on effect to my mood and sometimes I feel stuck in this cycle of poor sleep, bad mood, struggling to get to sleep and so on. My brain fog can be quite bad too and I struggle to remember things if I haven't written them down.

Did you experience any challenges in the workplace?

I'm quite an open person so don't struggle to talk to my female colleagues about when I am having a hot flush or need to pop out to the toilet and take a moment for myself. I find it very embarrassing if I am in a client or a male-dominated meeting and having hot sweats or a hot flush as people find it awkward to talk about and don't know what to do.

I'm in a good place now and I just accept that it's happening. I know it's not a man's fault if they don't understand. I just try to make a laugh and a joke out of the situation.

Has the menopause impacted any of your relationships, either at work or at home?

No, luckily it hasn't. I have a good support network including my manager who understands what I'm going through. This makes me feel more comfortable and less worried about being at work.

How aware were you before?

I was very aware as my mum was 40 when she went through it. As an only child, we were very close and talked openly so I knew what to dread, sorry expect!

Have you got any advice for younger women?

Be prepared to accept that it's going to happen and, when it does, talk to people that have been through it to help you understand.

Oh, and remember: you're not going mad, it's normal!



MY EXPERIENCE AS A PARTNER OF SOMEONE GOING THROUGH THE MENOPAUSE



John Anderson, Chef Man<mark>a</mark>ger - ESS

This is an account of my personal experience with my partner going through menopause.

My partner suffered a lot with hot flashes and sweats which she found really embarrassing as in her job she has to meet clients and hold management meetings.

Being a director of sales, she has regular meetings with the other directors and the CEO. She knows her job inside out, but sometimes now brain fog kicks in, her concentration goes and she can't remember what she was going to say. This has made her feel embarrassed and affected her confidence. This has led to her feeling anxious and depressed and she has had to speak to her GP regarding this. Other things have been night sweating, restless legs, itching, aches and pains and a change in skin. She was put on HRT patches, but we found out that there was a shortage of these and ended up having to go to several pharmacists to get them, sometimes having to wait weeks. These ended up not really helping and now she has a rub to put on which seems to help somewhat.

It is a really difficult and emotional time for women and we can just be there and be supportive. I personally think the more it is spoken about and the more it is put out there, the better understanding people will have of the menopause and how it can make a woman feel.



THE PANCREAS AND ITS ROLE IN THE DIGESTIVE PROCESS

PANCREATIC CANCER AWARENESS MONTH: NOVEMBER WORLD DIABETES DAY: 14TH NOVEMBER 2024

When we think of our digestive system, we think of the stomach, intestines (both large and small), maybe even chewing or our bowel movements – we don't tend to think of the pancreas!

However, the pancreas plays a crucial role in maintaining both digestive and endocrine functions in the body.

Located in the abdomen behind the stomach, this vital organ has two main functions: exocrine and endocrine. The exocrine function of the pancreas involves the production and secretion of digestive enzymes, which are essential for breaking down food in the small intestine. These enzymes include amylase, which breaks down carbohydrates into simple sugars; lipase, which breaks down fats into fatty acids and glycerol; and proteases, such as trypsin and chymotrypsin, which break down proteins into amino acids.

Additionally, the pancreas secretes bicarbonate ions into the duodenum, neutralising stomach acid and providing an optimal environment for digestive enzymes to function effectively.

On the endocrine side, the pancreas is responsible for producing and releasing hormones that regulate blood sugar levels. Insulin, produced by the beta cells in the islets of Langerhans, lowers blood glucose levels by facilitating the uptake of glucose into cells and promoting its storage as glycogen in the liver and muscles.

Conversely, glucagon, produced by the alpha cells in the islets of Langerhans, raises blood glucose levels by promoting the breakdown of glycogen to glucose in the liver and releasing it into the bloodstream.

The pancreas also produces somatostatin, which regulates the secretion of both insulin and glucagon and inhibits the release of other hormones and digestive enzymes, and pancreatic polypeptide, which regulates the secretion of pancreatic digestive enzymes and affects hepatic glycogen levels and gastrointestinal motility.

Maintaining the proper function of the pancreas is critical for overall health. When the pancreas does not function correctly, it can lead to several serious conditions such as:

Diabetes mellitus

Here the regulation of blood sugar is impaired. Type 1 diabetes is an autoimmune condition where the immune system attacks and destroys insulin-producing beta cells, leading to high blood glucose levels. Type 2 diabetes is characterised by insulin resistance and relative insulin deficiency, often associated with obesity and lifestyle factors.

Pancreatitis

Inflammation of the pancreas, which can be acute or chronic and is caused by factors such as gallstones, excessive alcohol consumption and certain medications.

Cystic fibrosis

A genetic disorder affecting the exocrine glands. Leads to thick, sticky mucus that can block the pancreatic ducts, impairing digestion and nutrient absorption.

Pancreatic cancer

A malignant tumour that can arise in the exocrine or endocrine cells of the pancreas. It is often diagnosed at a late stage due to the lack of early symptoms.





PANCREATIC CANCER

As already described, pancreatic cancer can be broadly classified into two main types: exocrine tumours and endocrine tumours (also known as pancreatic neuroendocrine tumours or NETs).

Exocrine tumours are the most common form of pancreatic cancer, with adenocarcinoma being the predominant type. Adenocarcinoma originates in the cells lining the ducts of the pancreas and accounts for about 90% of all pancreatic cancers.

Another type of exocrine tumour is acinar cell carcinoma, which arises from the enzyme-producing cells of the pancreas. Additionally, there are intraductal papillary mucinous neoplasms (IPMNs), which are tumours that grow within the pancreatic ducts and can be benign or malignant.

Endocrine tumours, though less common, originate from the hormoneproducing cells of the pancreas. These tumours include insulinomas which produce excessive insulin, glucagonomas which produce excessive glucagon, gastrinomas which secrete excessive gastrin and somatostatinomas which produce excessive somatostatin.

Each year around 10,500 people are diagnosed with pancreatic cancer in the UK. It is the 10th most common cancer in the UK.^{2,3}

More than 45% of people with diagnosed with pancreatic cancer are 75 or older.¹

The symptoms and treatment approaches for pancreatic neuroendocrine tumours can vary significantly depending on the type of hormone they produce and the extent of their growth and spread.

Understanding the distinctions between exocrine and endocrine pancreatic cancers is crucial for diagnosis and treatment, as they differ in their biological behaviour, symptoms and therapeutic responses.

Pancreatic cancer often goes undetected until it has advanced. Common symptoms include:

- Abdominal or back pain
- Unintended weight loss
- Jaundice (yellowing of the skin and eyes)
- Loss of appetite
- Nausea and vomiting
- New-onset diabetes or worsening existing diabetes
- Blood clots
- Fatigue.

These symptoms can be subtle and vary depending on the tumour's location in the pancreas. If you experience persistent symptoms, it's important to consult a healthcare professional for further evaluation. Early detection and treatment are crucial for better outcomes.

Pancreatic cancer is uncommon in people under 40 years old.²

In summary, the pancreas is responsible for both digestion and the regulation of blood glucose levels.

Its dual roles make it a critical organ for maintaining metabolic balance and overall health, and dysfunctions in the pancreas can lead to significant health challenges.



ZERO WASTE WEEK: 2ND-6TH SEPTEMBER 2024

The UK throws away around 9.5 million tonnes of food each year¹.

Loving your leftovers is a great way to waste less food and save some money. You can make them into tomorrow's lunch by getting creative and reinventing them, e.g. adding leftover vegetables or meat to make fried rice, an omelette or soup.

You must ensure you store your leftovers correctly, so they don't grow bacteria and make you ill. Follow these tips so your leftovers are safe to eat:

- Cool food rapidly to prevent bacterial growth. To do this, divide large amounts into smaller portionsized containers.
- Cover, wrap them in airtight packaging or seal them in storage containers. This helps keep bacteria out, moisture in and prevents them picking up odours from other foods.
- Keep for no longer than three to four days in the fridge or three to four months in the freezer.
- If you freeze leftovers, ensure to thaw using a refrigerator, cold water or microwave.
- When reheating, check the temperature in several places with a food thermometer to make sure food is piping hot.

The average household spends £470 a year on food that ends up in the bin.¹

Repurposing meals from one day to the next not only helps use up your leftovers but also prevents you from needing to have the same meals for days in a row.

Have you tried any of the below?

- Turn it into a pie by adding a pastry or potato top to a stew or curry
- Make a burrito by adding leftovers to a wrap
- Turn spaghetti Bolognese into chilli con carne by adding chilli powder and kidney beans, serving with rice or a jacket potato
- Slice up your leftover Sunday roast and make a stir fry
- Use up those scraps of cheese at the back of the fridge in a pasta bake
- Add leftover meats to a sandwich
- Blitz vegetables and make a bubble and squeak
- Add unused egg whites to scrambled eggs
- Cut up any leftover vegetables and make an omelette.

If you don't like leftovers, try to avoid having excess food in the first place by cooking less.







In the UK, it is estimated that 70% of wasted food could have been eaten.¹

SUSTAINABLE HOT BEVERAGES

WORLD'S BIGGEST COFFEE MORNING: 27TH SEPTEMBER 2024

Your Guide to a Climate Friendly Cuppa

The World's Biggest Coffee Morning was set up by Macmillan in 1990 and has raised over £310 million for cancer support. Individuals are encouraged to attend or host a coffee morning to help raise awareness and money for those living with cancer. The coffee mornings take place all over the country and give people the opportunity to come together for a good cause. Around 98 million cups of coffee are consumed every day in the UK and recent reports suggest it has now overtaken tea as the nation's favourite hot drink (British Coffee Association). With their popularity growing, it becomes increasingly important that our favourite hot drinks are produced and served with people and the planet in mind. There are several awareness campaigns coming up that help us shine a light on how you can make your hot drink as sustainable as possible.

MAKING SUSTAINABLE CHOICES

FAIRTRADE FORTNIGHT: 9TH-22ND SEPTEMBER 2024

Fairtrade is a well-known certification that we see on products in our cafés, supermarkets and high street stores, but what does it mean?

Fairtrade ensures farmers and workers receive fair prices and upholds production standards and practices to allow producers to secure sustainable and ethical livelihoods. This is particularly important as coffee, cocoa and tea producers have historically received low incomes and become disadvantaged by global trade.

The Fairtrade mark certifies that products and ingredients have met social, economic and environmental standards throughout the supply chain. The organisation also carries out other activities within farming co-operatives and industry advocacy. There are other certification schemes applicable to hot beverages, such as Rainforest Alliance.

Fairtrade and Rainforest Alliance share a commitment to high standards across social, economic and environmental criteria, but their





Both schemes are worth looking out for when choosing your hot drinks and are a great way to drive change.



PROS AND CONS OF DIFFERENT MILKS FOR THE ENVIRONMENT

Milk is a key component of most hot beverages and there has been a steep increase in the plant-based alternatives on offer, with soy, oat, almond, rice and coconut being the most popular.

Plant-based milks not only cater for dietary needs such as vegan diets or allergies, but also have a lower environmental impact than their dairy counterparts. This has led to them being popular even among those who do not follow a strictly plant-based diet, with 62% of shoppers now choosing alternative milks more often (Which).

However, it is important to note that dairy milk contributes several vital nutrients to our diet and not all plantbased alternatives are fortified, so it's always worth checking the label for key nutrients like iodine, calcium and vitamin B12.

What about taste?

- **Oat**: mild, smooth and buttery, great in coffee
- Soya: sweet and creamy, closest to cow's milk
- Almond: nutty and darker in colour, well suited to tea
- **Coconut**: thick and rich with subtle coconut flavour.

TAKEAWAY CUPS AND CHOOSING TO REUSE

NO DISPOSABLE CUP DAY: 4TH OCTOBER 2024 RECYCLE WEEK: 14TH-20TH OCTOBER 2024

Around 7 million coffee cups are thrown away in the UK every day.

Around 80% of people who visit coffee shops do so at least once a week and 16% visit daily. Unfortunately, these drinks are often served in takeaway cups which are difficult to recycle.

The UK wastes 30,000 tonnes of coffee cups per year - enough to fill the Royal Albert Hall - and 2.5 billion takeaway cups go to landfill every year in the UK (Source: House of Commons Environmental Audit Committee 2017-2019). You can help by recycling your used coffee cups in designated areas, however recycling rates of these items are extremely low and it is far more impactful to use a reusable cup at every opportunity.

This can simply mean asking for a mug or glass when drinking in or investing in a travel cup – many cafés offer discounts on reusables so you can start saving money straight away!

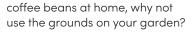
USING LEFTOVER COFFEE GROUNDS

ZERO WASTE WEEK: 2ND-8TH SEPTEMBER 2024

Continuing the theme of being resourceful, even leftover coffee grounds can go to good use.

They make a great garden fertiliser as they are relatively high in nitrogen and contain potassium and phosphorus, as well as being a source of organic matter. You can either add the coffee grounds to your compost containers or worm bins as the used grounds will rot down well or add them directly to the soil, but do so with care.

Some coffee outlets have their own redistribution routes and some give grounds away to customers. If you use



Another idea is to cook with coffee grounds as they create a great dark chocolate flavour when roasted. Our favourite dishes include banana and coffee ground muffins, brownies and granola to spice up your breakfast bowls. Follow these granola and muffin recipes to try out the flavour yourself.

COFFEE GRIND GRANOLA

Ingredients:

- 100g skinned hazelnuts
- 200g rolled oats (gluten free, if desired)
- 100g chopped raw pecans
- 100g nibbed almonds
- 2 tbsp coffee grinds

Method:

- Preheat oven to 180°C.
 Combine the oats, pecans, almonds, dates, and coffee grinds in a large mixing bowl.
- 2 In a small pot on the stove, over medium low heat, combine the coconut oil, maple syrup, vanilla extract and salt.

Whisk until smooth. If the mixture seems too thick, add additional water 1 tbsp at a time until pourable.

3 Pour the liquid mixture over the oat mixture. Stir really well to ensure all the dry ingredients are moistened.

- 25g coconut oil
- 200g chopped dried dates (pitted)
- 75ml maple syrup
- 1 tsp vanilla extract
- 1/2 tsp sea salt.
- 4 Spread the mixture in a fairly even layer onto a rimmed baking sheet, but with very little, if any, space between the ingredients. This is how you'll get the nice big clumps of granola!
- 5 Bake for 25-28 minutes, shaking the pan and flipping the mixture over as best you can about halfway through.
- 6 The granola will continue to crisp up as it sits, so don't over-bake or it will burn.

Allow to cool before eating. Store any leftovers in an airtight container to keep them fresh!



OVERRIPE BANANA & COFFEE GRIND MUFFINS

Ingredients:

- 2 large overripe bananas
- 75g melted butter
- Pinch salt
- 250g self-raising flour
- 1 tsp baking powder
- ½ tsp bicarbonate of soda
- 115g caster sugar
- 20g rolled oats
- 2 tsp coffee grinds
- 2 free range eggs
- 125ml milk
- 1 tsp vanilla extract.

Method:

- Heat the oven to 190°C (fan oven 170°C). Melt the butter and allow to cool.
 - Mash the bananas.
- 2 Sift the flour, baking powder, bicarbonate of soda and salt together in a large bowl, add caster sugar and mix.
- 3 With a whisk, beat together the eggs, vanilla extract, melted butter and milk in a second bowl.
 - Add the mashed banana and stir through.

- 4 Make a well in the centre of the dry ingredients and add the egg mixture, stirring roughly until it is a lumpy paste.
- 5 Set the paper muffin cases into the moulds and spoon in the mixture until almost full.
 - Top with the oatflakes.
- 6 Bake for 20–25 minutes. Rest the muffin tray on a wire rack for 5 minutes, then remove the muffins and leave on the rack for another 5 minutes before serving.

https://www.which.co.uk/reviews/food-and-drink/article/ plant-milks-whats-best-for-your-health-and-the-environmentarPlg7layCwi https://ourworldindata.org/environmental-impact-milks

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CARVING OUT SOME FUNON HALOWEEN

HALLOWEEN: 31st OCTOBER 2024

The tradition of Halloween originates from the ancient Celtic festival of Samhain, which celebrated the harvest at the end of summer. People would light bonfires and wear costumes to ward off the ghosts.

of September, it can encourage us to

buy new things to help us celebrate

Halloween, but often this all gets

thrown away on November 1st.

Today, Halloween is a fun occasion where people, especially children, dress up, decorate their houses and go trick or treating. With shops selling decorations from the middle



COSTUMES

Four in ten costumes are only worn once

- Swap with friends and repurpose outfits from previous years.
- Buy second hand clothes from websites such as Vinted and eBay.
- Make an outfit remember the good old sheet over the head to be a ghost?
- Keep t-shirts with holes in and let kids get creative with permanent markers to design their own outfits.



DECORATIONS

- Bats and cats use spare cardboard, e.g. cereal boxes, and cut out the shapes of bats and cats, paint them black, attach some string and hang them in the front porch or window.
- Use old tights to create spider-webbing.
- Look in charity shops for second-hand decorations or items which can be decorated.
- Carefully pack away your decorations at the end of the celebrations to be reused next year.

TREATS

- Sweets in mini card boxes, e.g. Smarties.
- Fruit, e.g. satsumas.
- Buy loose sweets and repackage into small paper bags.

The following tips will help to make your Halloween a more sustainable one: WORLD

ALTHIE



PUMPKINS

18,000 tonnes of pumpkins get thrown away each year in the UK after Halloween.

There's more you can do with your pumpkin after you've carved it! As well as using the flesh to make a delicious pumpkin pie and roasting the seeds to make your own pumpkin seed snacks, you can also try:

- Pumpkin houmous roast pumpkin with garlic and olive oil, blitz in a food processor with lemon juice, tahini paste and chickpeas.
- Pumpkin pasta (like gnocchi, but using pumpkin instead of potato).
- Pumpkin soup.
- Pumpkin muffins.

When you're finished, make sure you try to compost or put your pumpkin into a food waste bin.

You could also ask your local allotment if they want some too.



SHINING A LIGHT ON A SUSTAINABLE DIVAL

DIWALI: 31ST OCTOBER-1ST NOVEMBER 2024

Diwali is the Hindu festival of light symbolising the victory of light over darkness. It is one of the most cherished and widely celebrated festivals in India and amongst Indian communities across the world.

Diwali is a time where families and communities come together and it's an opportunity for people to decorate their home, enjoy parties, feast and share gifts.

- Reuse products for Diwali decorations – avoid needing to buy new decorations each year by safely storing them at the end of the celebrations so you can reuse them.
- **Transform** add a lace trim to the edge of old cushion covers or table runners to give them a new life.
- Repurpose add fabric or thick wrapping paper to a wooden tray and place a clear plastic sheet on top to protect the paper and plastic.
- Create use old cushion covers or decorative spare material to put into frames to create new pictures to hang in your house.
- Firecrackers opt for low-noise or eco-friendly firecrackers which emit fewer harmful chemicals and reduce the impact on the environment.
- **Gift** gift plants or organic exotic sweet baskets to loved ones.

Recently, the brilliance of Diwali celebrations has led to air and noise pollution, as well as increased waste. Going into Diwali 2024, the tips below will help to minimise the environmental impact of the festival.

- Change instead of paper plates, serve welcome drinks in kulhad (clay tea cups) and food in banana or bamboo leaves.
- Switch use recycled candles or ones made from soy or beeswax over paraffin wax as they are biodegradable and emit fewer toxins.
- **Transition** use energy efficient LED lights that consume less energy.
- Reduce share excess food or donate it to local charities. Try not to cook excess amounts which contribute to food waste.



I hope everyone is keeping well and has had the opportunity to spend plenty of time outside this summer – even better if you managed to get into the garden and grow a bit of produce.



Janet Thomas Head Gardener - ESS

The Market Garden is overflowing with colour and abundance

at the moment and, all in all, it has been a pretty good year!

As always, there have been some failures: our beetroots have been nowhere near as successful as they were last year - I'm assuming the dry summer we've had here in Oxfordshire has not been to their liking, and the aubergines were significantly set back by the cold spring - I doubt they'll have the time to produce any great quantity now. On the other hand, most of our other crops have excelled themselves!

Worthy of special note were the seemingly endless spring onions earlier in the year and our beautiful raspberry canes which are currently overflowing with juicy ruby red berries.

This time of year always takes me a little by surprise. I find late July and August always seem to give a little reprieve in the gardener's calendar. With most things in the ground and growing beautifully, other than harvesting and a bit of general weeding and tidying, I get to sit back and survey the fruits of my labour!

So, there I am, just enjoying the summer, when bam! it's September and we're off again, straight into what I personally think is the busiest time in my gardening calendar.

Not only do we have tonnes of produce to harvest, but as the plants start to reach the end of their productivity, they need clearing to make space for winter crops. These winter crop seeds need sowing, beds need preparing or covering to protect the soil over winter, the compost heap is overflowing with the garden waste we are producing and, as always, the grass and the weeds still keep growing and the general maintenance of the garden carries on.

For me, autumn always brings with it a desire to prepare for the colder months ahead. We have all this beautiful produce now, but in a couple of months it'll be sprouts and turnips all day long.



Not that I mind either of these vegetables, but I do get frustrated in winter when I have to resort to supermarket veg. The shelves are filled with out of season produce from all over the world and I'm left wishing I'd been better at storing my homegrown crops! In days gone by, everyone would have stockpiled for winter. Lots of methods were used for preserving homegrown produce - jamming, canning and fermenting to name but a few, and while I've turned my hand to all of these over the years, I do love the freezer. I'm going to say it's because in my opinion it preserves more nutrition in the veg, but in all honesty it's just that it's quicker and I'm always running short of time!

A really good idea for using everything up is a tomato based general purpose sauce...

You can basically throw whatever you've got in here: tomatoes (obviously), onions, peppers, aubergines, French beans or whatever else is ready on the garden or sitting in the bottom of your fridge – cook it up, portion it out and freeze. This gives you quick and easy bases for curries, pasta dishes, soups or anything else really.

Onions and peppers also freeze really well, as do courgettes (and let's face it there's always an excess of those!). Chop them up and pop them directly into bags or tubs and freeze ready for use. The same with summer and autumn berries which are delicious in breakfast smoothies and to give you a little winter reminder of sunny summer days gone by and yet to come again.

Working outdoors amongst nature really does highlight the changes in the season. We are so lucky here on our beautiful little island to have such clear and distinct seasons. While I do sometimes wish winter was a little shorter, I'm grateful of the time to rest and plan ahead.











Anyway, enough of my seasonal musings...

For you hard core growers out there who are willing to tackle the slightly more complex but very rewarding winter veg garden, here's a few things we are getting on with now.

You'll need to be quick if you haven't sown seeds already, but for those of you with cover, such as poly tunnels, greenhouses or even hoop tunnels (a really low-cost way of growing overwintered veg which we've had huge success with, especially using Thermatex fleece to cover), there may still be time to get some cauliflower, purple sprouting broccoli and winter lettuce/salad leaves in. As always, we start them off in modules – depending on the weather, a little heat from a mat may help. We always do well with Skywalker cauliflower and are also trying a variety called Medallion this year. We have a number of winter lettuces ready to go, including varieties called Brighton, Rouge D'Hiver and Winter Density, and we will be sowing Oriental mustard, which is a lovely frilly mustard leaf which adds variety to the salad mix.

I'm also hoping to get another sowing of radish in the poly tunnel next week and some coriander which loves the cooler temperatures. This all needs doing by mid-September at the latest really and after that we are just left with the garlic in October. Why not give it a try? I promise you'll be glad you did when you have fresh greens through winter and gorgeous early caulis and broccoli.

If all that sounds too much, don't fret! Just remember to cover your beds with compost, mulch, green manure or even a layer of leaves, so that they are protected from the winter elements and ready to start again in the spring.

Keep on growing!

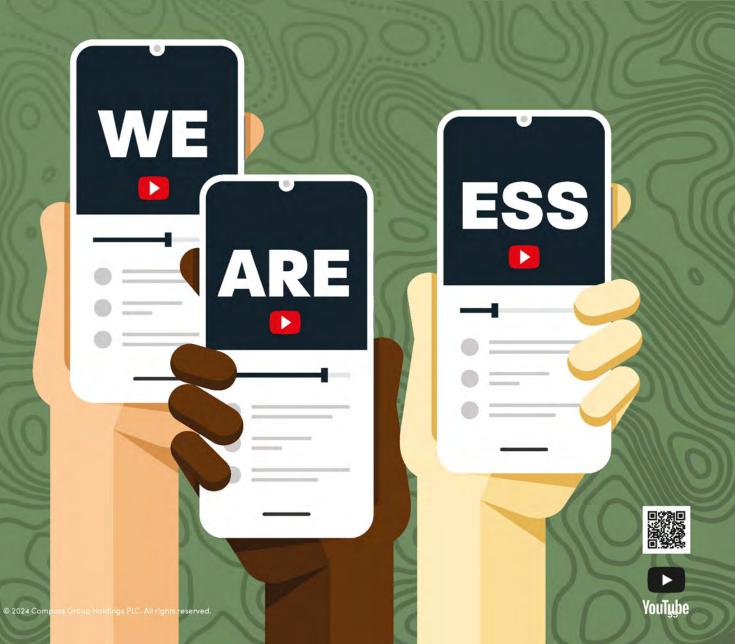
Janet





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WELLNESS

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