

Honey Glazed Salmon with Browned Butter Lime Sauce

- 4 (6 oz) salmon fillets
- 8 tsp flour, divided
- 8 tsp honey, divided
- 2 Tbsp extra virgin olive oil
- zest of 2 limes

Browned Butter Lime Sauce

- 6 Tablespoons Butter
- 3 Tbsp fresh lime juice
- 1 tsp honey
- 1 clove garlic, minced
- 1/2 tsp salt
- 1/2 tsp pepper

*Season salmon with salt and pepper, to taste. Dredge each salmon fillet with 1 tablespoon flour and drizzle with 1 tablespoon honey.

*Heat olive oil in a large oven-proof skillet over medium high heat. Working in batches, add salmon to the skillet and sear both sides until golden brown, about 1-2 minutes per side.

*Place into oven and bake until completely cooked through, about 8-10 minutes.

*While salmon is cooking, make the sauce – heat the butter in a small saucepan. Swirl the butter occasionally until it has turned a light brown colour and is fragrant. Remove from heat and whisk the garlic, lime juice, honey, salt and pepper into the sauce.

Serve immediately over salmon, with lime zest (if desired).



Our Country Practice

Swift Street Medical Centre

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(9am to 5pm - Monday to Friday)

2015

is now well and truly with us and we welcome you all back after the celebrations of Christmas and wish each of you a very Happy New Year.

With a new year comes change and we would like to take this opportunity to introduce you to our two new doctors and wish our departing doctors all the very best. As Dr Ana Phillis, Dr Rowshon Jahan and Dr Zahraa Sadeq have now moved on, we would like to extend a very warm welcome to Dr Jihan Nitu and Dr Nazmul Hossan.



Both Dr Nitu and Dr Hossan have settled in and many of you have already met them. They are both very approachable doctors and will be more than happy to help you in any way they can. We know you will be as happy to have them looking after you, as we are to have them both on the Swift Street team.



Meniere's Disease

Meniere's disease affects the inner ear, which is the centre of hearing and balance. During an attack, the person experiences vertigo – a sensation that they or the world around them is moving. They feel dizzy and sick, their hearing is dominated by a hissing or roaring sound (tinnitus), and one or both ears feel full to bursting point. Meniere's disease may develop slowly over time, with a gradual loss of hearing, or suddenly with a vertigo attack. Attacks can last from 10 minutes to several hours. After an attack, the person might experience mild deafness and feel unsure of their footing. As the disease progresses, the episodes of vertigo become less frequent and the deafness more severe.

The inner ear – balance and hearing: The inner ear contains a series of canals filled with fluid. These canals are at different angles. When your head is moved, the rolling of the fluid inside these canals tells your brain exactly how far, how fast and in what direction your head is moving. Information from these canals is passed along to the brain via the vestibular (balance) nerve. If your brain knows the position of the head, it can work out the position of the rest of your body. The cochlea is the snail-shaped hearing organ in your inner ear, which is also filled with fluid. This fluid moves in response to sounds. Messages are passed along the hearing nerve to the brain to tell you what you are hearing. The build up of fluid associated with Meniere's disease disturbs the hearing nerve endings, causing hearing fluctuation and eventually permanent damage.

Causes of Meniere's disease: It is thought that Meniere's disease is caused by a build-up of fluid inside the inner ear. This interrupts messages to the brain from both the balance and the hearing nerves, causing loss of control of these functions.

Symptoms of Meniere's disease: The symptoms of Meniere's disease include:

- Loss of clear • Loss of balance • Noises in the ear (tinnitus) • Hearing loss
- Ear fullness – a sensation that the ear is under pressure and close to bursting
- Sensitivity to noise

Diagnosis of Meniere's disease: A diagnosis of Meniere's disease includes vertigo, hearing loss, tinnitus and a feeling of pressure. Many of the symptoms of Meniere's disease can also be caused by other conditions, so diagnosis of the condition often involves first ruling out other medical possibilities. There is no specific test for Meniere's disease, but doctors use a range of tests in combination to help diagnose the disorder.

Treatment for Meniere's disease: There is no cure for Meniere's disease. Treatment generally focuses on managing symptoms and preventing or decreasing the number of attacks. Where possible, the aim is to conserve hearing and reduce balance problems. Non-surgical options include: • Medication • Lifestyle changes • Pressure pulse devices • Chemical ablation. If you are experiencing severe attacks of vertigo and medical treatments don't help, surgery may be considered as a last resort.

Management of Meniere's disease: Your doctor can help you to find ways to manage your symptoms and help reduce the frequency and severity of attacks associated with Meniere's disease. Some suggestions include: • Recognise the warning signs of an attack – sit or lie down immediately when you feel dizzy • Rest during and after attacks • If you experience balance problems between attacks vestibular rehabilitation therapy may be helpful • Avoid triggers that make your symptoms worse, including sudden movement, bright lights, watching television or reading. • Beware of losing your • Avoid driving a car or operating heavy machinery • Eat regular meals • Reduce your salt • Avoid caffeine and • Quit • Join a support group.

