





"mechanical back pain" which arises from structures in and around the

spine including the vertebrae, discs and surrounding soft tissues. Mechanical back pain can be managed with pain medication, gentle activity and physiotherapy.(1,2) Most cases of mechanical back pain are temporary and will usually resolve within 2 to 6 weeks.(1,2)

If someone is experiencing back pain for the first time, has been injured while working or has significant pain or disability, it is important to seek an in-person assessment from their primary care provider (PCP) as soon as possible. Most mechanical back pain can be diagnosed by a PCP and does not require any initial diagnostic imaging, such as x-rays or MRIs.(1, 2)



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A PCP can monitor symptoms and help guide patients through pain management towards recovery. If the back pain has not improved in the expected timeframe, it is important to seek follow up with a PCP to ensure there is no underlying medical issue or more serious cause for the pain.

People may feel anxious if they have been reading about causes of back pain from sources on the Internet. It may be reassuring to know that less than 2% of people with symptoms of back pain have a serious underlying condition that would require surgery or medical intervention.⁽¹⁾ However, patients experiencing acute back pain and **Red Flag** symptoms should be seen within 24 to 48 hours.^(1,2)





Red Flags include:

- fever with or without symptoms of a urinary infection;
- a health condition or medication that weakens the immune system;
- a history of cancer, with or without new and unexplained weight loss, sweating or pain that gets worse when lying down, especially at night;
- patients under the age of 45 who feel a lot of stiffness in their back or body in the morning that lasts more than 30 minutes and does not get better with activity;
- pain that started after fall or injury, especially if there is a history of osteoporosis or broken broken bones from previous falls; or recent or regular use of intravenous drugs.

Patients who experience sudden or worsening back pain that is accompanied by loss of control of their bladder or bowel, numbness to their groin or limb weakness should proceed immediately to their nearest Emergency Department for assessment.^(1, 2)

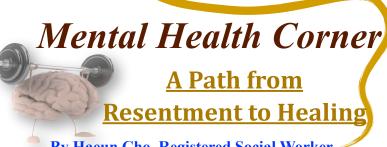
For those who have back pain, it is important to speak with your health care team about how to prevent back pain in the future, as many people will experience more than one episode of back pain in their lifetime. To help keep a healthy and strong back, consider these tips:



References:

- 1. Toward Optimized Practice. (2017). Evidence-informed primary care management of Low back pain clinical practice guideline, (3rd ed.). https://actt.albertadoctors.org/CPGs/Lists/CPGDocumentList/LBP-guideline.pdf
- 2. Centre for Effective Practice [CEP]. (2016). Clinically organized relevant exam (CORE) back tool. https://cep.health/media/uploaded/CEP_CORE_Back_2016.pdf





By Haeun Cho, Registered Social Worker

W hat is Resentment?

Resentment is a complex and multilayered emotion. It contains a combination of emotions such as anger, disappointment, fear, bitterness and hurt. Resentment often arises when there is a perception of unfairness. The origin of the word "resent" consists of "sentire," which means "to feel" in Latin, and "re-," which means "again." When someone experiences resentment, the repetitive replay of an emotion that involves an underlying sense of being wronged or mistreated persists.

The Burden of Resentment

Unresolved resentment can cause an increased level of stress and an excessive physiological burden which results from storing and replaying painful emotions in the body. It can also lead to physical symptoms such as headaches, abdominal pain and muscle aches. No doubt that this is a difficult emotion that people want to resolve and release.

Strategies to Move from Resentment Towards Healing

Understand the function of resentment. It is important to understand resentment as a symptom that is related to self-preservation. Resentment is the understandable emotional response to a suffered wrong, insult or injury. Resentment can be used as a defence system to help humans protect themselves from pain, discomfort and difficult feelings. Resentment, like all emotions, also provides information. It may be a sign that there are wounds in self and/or relationships that need to be repaired, such as by establishing boundaries and practicing assertive communication. Resentment may reveal a need to regain self-esteem and a sense of control. It may be helpful to ask, "from what wound or injury does the resentment stem?"

Explore thinking patterns. Unresolved resentment is painful and it can be maladaptive. While resentment may reveal underlying problems or needs, it may also lead to distorted thinking that keeps people stuck in feelings of resentment or helplessness. Resentment often narrows a person's perspective. It is common to experience all-ornothing thinking, as the painful feelings that underly resentment can lead to extreme and rigid thoughts. It is also common to engage in confirmation bias - the tendency to cherry-pick evidence to validate certain points while overlooking information from opposing views. It may be helpful to acknowledge the self-protective nature of these thoughts while also accepting that they can cloud the path to healing. Making a conscious effort to engage in self-reflection can allow one to mindfully evaluate their own perceptions and experience growth. Learn more: https://positivepsychology.com/cognitivedistortions/



Engage in self-compassion. The practice of self-compassion involves mindfully acknowledging one's own suffering, accepting that suffering is a part of the human experience and then offering kindness and compassion to oneself. Experiencing pain, unfairness and feelings of resentment is a part of common

humanity. When one can identify resentment within themselves, they can actively practice accepting that it is a difficult emotion that comes with unmet needs and unresolved pain. It is then possible to intentionally practice extending warmth, understanding, kindness and compassion to oneself. Learn more: https://self-compassion.org/

References:

Miceli, M., & Castelfranchi, C. (2011). Forgiveness: A cognitive-motivational anatomy. Journal for the Theory of Social Behaviour, 41(3), 260–290. $\frac{https:}{doi.org/10.1111/j.1468-5914.2011.00465.x}$ Otis, L. (2022). The Meaning of Resentment. Psychology Today. Retrieved November 21, 2022, from $\frac{https:}{doi.org/to.1111/j.1468-5914.2011.00465.x}$ www.psychologytoday.com/ca/blog/rethinking-thought/202107/the-meaning-resentment

WebMB Editorial Contributors. (2020). Signs of Resentment. WebMD. Retrieved November 21, 2022, from https://www.webmd.com/mental-health/signs-resentment

WHAT'S HAPPENING AT TADDLE CREEK

By: Sherry Kennedy, Executive Director

his column lets you know about Taddle Creek Family Health Team (TC FHT) events, program updates and announcements.



Patient Care Survey

The 2022 Patient Care Survey results are in; TC FHT received 1826 survey responses (12% response rate) between November 22 and December 23, 2022. A sincere thank you to those who completed the survey.

Quality of Care Provided

The last time a patient spoke/interacted with their primary care provider (physician or nurse practitioner),

- 96% felt their primary care provider completely or mostly understood the importance of their visit
- 95% were very satisfied or satisfied with the discussion
- 93% were very satisfied or satisfied with the quality of care provided during a virtual visit

For any type of appointment/interaction,

- 97% always or often felt they had the opportunity to ask questions about recommended treatment
- 97% always or often felt they were involved in decisions about their care and treatment
- 94% always or often felt they had enough time with their doctor, nurse practitioner or someone else for any type of appointment/interaction

For the After Hours Clinic

• 85% were very satisfied or satisfied with this service

Access

- 62% were able to see their primary care provider either on same or next day
- 72% indicated that in the past 12 months they never opted to visit a walk-in clinic rather than contacting/visiting TC FHT
- 63% indicated that in the past 12 months they never opted to visit an Emergency Department rather than contacting/visiting TC FHT

Quality of Care by Provider Type

- 97% rank care received by a physician or nurse practitioner as excellent/good
- 93% rank care received by a physician assistant as excellent/good
- 93% rank care received by a pharmacist as excellent/good
- 93% rank care received by a dietitian as excellent/good
- 84% rank care received by a social worker as excellent/good
- 84% rank care received by a registered nurse as excellent/good
- 83% rank care received by a diabetes education provider as excellent/good



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Quality of Service

- 91% always or often indicate that the practice followed up on any serious problems (down 2% from 2020)
- 90% always or often have a positive experience with reception
- 93% always or often feel wait time in office is reasonable
- 87% always or often had their messages returned in a timely manner
- 77% always or often could easily contact the office by telephone

Strategic Planning

In May 2022, TC FHT wanted to identify both strategic priorities and key strategies to achieve them. TC FHT is delighted to present the culmination of this work in the Strategic Plan below. The planning process included an analysis of internal and external factors affecting the FHT, surveying staff and conducting focus groups with staff and the Patient and Family Advisory Committee. Telephone interviews with key external stakeholders were also conducted. Please take a moment to read the Strategic Plan.

<u>Click here for Taddle Creek Family Health Team Strategic Plan 2023-2026</u> <u>Click here for Taddle Creek Family Health Team – Strategic Plan Infographic</u>

Personnel Announcements

I am excited to announce TC FHT hired two new Social Workers who started in January 2023.



Nokha Dakroub comes to us with a Master of Social Work from York University (2012) and four years of social work experience at Trillium Health, one year with the Center for Addictions and Mental Health and two years as a family violence counsellor.

Kimberley Sedore comes to us with a Master of Social Work from Wilfrid Laurier University (2019) and has been community-orientated in her social work. This includes work on the following:

- Social Worker at Toronto Counselling Centre for Teens (two years);
- Program Director for Street-to-Trail (one year);
- Social Worker and Pre-Employment Coach at St. Stephen's Community House (two years); and
- Health and Well-Being Program Worker at George Herman House (one year).

Welcome aboard!

Taddle Creek DIABETES DIGEST

Understanding Diabetes Canada's Position Statement on Cannabis Use in Adults & Adolescents with Diabetes

Ramona D'Mello, Registered Nurse and Certified Diabetes Educator



Since recreational cannabis has been legalized in Canada in 2018, there have been many questions regarding the effects and safety of cannabis for people with diabetes. Diabetes Canada has released a position statement regarding cannabis use in adults and adolescents with diabetes in order to answer some of these questions.

Diabetes Canada is clear in its recommendation that the "use of recreational cannabis is not recommended for adolescents or adults with diabetes" as "the safety of recreational cannabis use has not been demonstrated." Furthermore, "regular cannabis use is associated with worsening glycemic control, more diabetes-related complications and poorer self-care behaviours, such as adequate glucose monitoring, adherence to medications and compliance with dietary and physical activity recommendations for people living with both type 1 and type 2 diabetes."(1) Diabetes Canada also cautions against the use of recreational cannabis for patients with type 1 diabetes due to the increased risk of diabetic ketoacidosis (DKA). DKA occurs when the body cannot use sugar for energy and turns to fat for a fuel source, resulting in a dangerously high acidic level.(1)

In a study of 138 college students with type 1 diabetes in North America, students who smoked cannabis more frequently experienced higher A1C (three-month blood sugar average) and were less likely to meet blood sugar targets.⁽²⁾ In another study of people with type 2 diabetes, cannabis use was associated with increased blood vessel blockages, heart attacks and kidney disease.⁽²⁾

Diabetes Canada ecommends that healthcare professionals offer to review the general risks of cannabis use with people with diabetes. Short-term effects of cannabis use include anxiety, fear or panic, confusion, dizziness or fainting, lower ability to concentrate or remember things, lower ability to react quickly, higher heart rate (and higher risk of heart attack for those with heart conditions), paranoia, delusional thoughts and driving impairment.⁽²⁾ Long-term effects include an increased risk of addiction, concentration and decision-making problems and developing psychosis or schizophrenia.⁽³⁾

Chronic neuropathic pain can be a complication of unmanaged diabetes. Cannabis use has been shown to reduce the debilitating burning and tingling sensations of chronic neuropathic pain by 30%.⁽²⁾ Thus, cannabis use in some people with diabetes may have to be balanced between the risks with use and the benefits in treating chronic neuropathic pain.

Finally, any recommendation needs to be modified to each individual's situation. A conversation with one's healthcare team is the best way to figure out how Diabetes Canada's guidelines on cannabis can be adjusted for the individual and their life. Your primary care provider and the Diabetes Education Program are available to discuss questions and concerns about cannabis use and diabetes.

References

- 1. Diabetes Canada Position Statement: Cannabis use in adults and adolescents with diabetes https://www.diabetes.ca/advocacy---policies/our-policy-positions/cannabis-use-in-adults-and-adolescents-with-diabetes
- 2. Waterloo Wellington Diabetes Presentation on Cannabinoids in Diabetes: Taking a Look at the Evidence https://www.waterloowellingtondiabetes.ca/userContent/documents/Professional-Presentations/5.%20Cannabinoids%20Presentation%20TRFHT%20(1).pdf
- 3. Health effects of Cannabis https://www.ontario.ca/page/health-effects-cannabis

Bacterial Meningitis: Are you at risk?

By: Shauna Sturgeon, Nurse Practitioner



Meningitis is an infection of the protective membranes surrounding the brain and spinal cord (meninges). Meningitis can affect anyone, but is most common in babies, young children, teenagers and

young adults. Some people are at increased risk of meningitis, including those with a weakened immune system due to a health condition or medication, as well as children, teens or young adults who are unvaccinated or have missed scheduled doses of publicly funded vaccinations.

What causes bacterial meningitis?

Meningitis can be caused by several different types of bacteria or viruses. Viral meningitis is the most common and least serious type. Bacterial meningitis is rare, but can be very serious and even fatal if not treated quickly. Thankfully, there are safe and effective vaccines available to help protect against the bacteria *Neisseria meningitidis*, which is responsible for most serious cases of meningitis.

How is Neisseria meningitidis spread?

Neisseria meningitidis spreads through close, direct contact with saliva from the mouth or mucus from the nose of someone who is infected or carries the bacteria.

Bacteria causing meningitis can be spread by:

- kissing, coughing or sneezing;
- sharing food, drinks, toothbrushes, cigarettes or e-liquid products, lipstick or other things that have been in the mouth of a person with the disease; or
- having prolonged close contact with someone who is sick or infected with meningococcal bacteria such as living in the same residence.

A person who carries *Neisseria meningitidis* bacteria may have no symptoms and may not become sick. However, those who are infected or carry the bacteria can spread *Neisseria meningitidis* to others up to 7 days before developing any symptoms.

What are the symptoms of meningitis?

- Headache
- Stiffness and limited or painful movement of the neck
- Sensitivity to light
- Fever
- A purplish rash on the skin that is spreading
- Very low energy, difficulty staying awake or confusion
- Nausea or vomiting

Infants and young babies may not have these symptoms. Instead, they may feed poorly, be very irritable, hard to comfort or sleepy and hard to wake up.

https://kidshealth.org/en/parents/meningitis.html

Can Neisseria meningitidis infections be prevented?

Due to effective childhood immunization programs across Canada, the incidence of bacterial meningitis has been significantly reduced. Following public health recommendations for meningitis vaccination is the best way to prevent infections. When cases of Neisseria meningitidis do occur, they can spread quickly between close contacts and in high-risk settings like college and university campuses. If you have been in contact with someone who becomes sick with meningitis or you are experiencing symptoms concerning for meningitis, it is important to see a health care provider right away. Bacterial meningitis can be treated with antibiotics, but it is very important to start treatment as soon as possible to avoid complications and prevent spreading of meningitis to others. All cases of *Neisseria meningitidis* are reported to Public Health to help identify and treat close contacts of an infected person as soon as possible and to reduce the spread of disease.

Meningitis vaccines: Key facts

- Many early childhood vaccines provided by the Ontario Immunization Program protect against different infections that can cause meningitis, so it is important to follow the recommended schedule.
- The recommended vaccines for *Neisseria meningitidis* are safe, effective and offer protection against several different strains of the bacteria, including C, A, Y and W-135.
- You cannot get meningitis from the vaccines and it is safe to have the vaccines at the same time as

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other vaccines.

- Vaccination against meningitis for strains A, C, Y and W-135 are required by public health to attend public schools in Ontario
- A vaccine for meningitis B strain is also recommended for those at high risk of infection.
 Parents can also choose to pay out of pocket for this vaccine and can discuss the risks and benefits of vaccination with their primary care provider.
- Depending on the year you or your child were born, you may not have received vaccination against meningitis and could be at risk.

Free vaccine catch-up programs for those at risk

Due to a recent outbreak of meningitis in Toronto, Public Health is recommending that adults aged 20 to 36 years get a booster dose of meningitis ACYW-135 vaccine if:

- they have not had a meningococcal vaccine before or are unsure of their vaccination status; or
- they had meningitis vaccine as a baby or young child but did not have a booster dose as a teen.

Vaccine appointments are offered at city-run

vaccine clinics and can be booked online at *TPHBookings.ca* or by calling 1-833-943-3900. The vaccine is safe and free – even if you do not have OHIP, health insurance or immigration status.

Toronto Public Health has resumed school immunization programs for grade 7 and 8 students. Catch-up clinics for grade 9 and 10 students who missed their vaccines due to the COVID-19 pandemic are also being offered. Please contact your child's school for more information. Students can also be vaccinated at city-run vaccine clinics by booking online at <u>TPHBookings.ca</u> or by calling 1-833-943-3900.



For more information, visit:

https://www.toronto.ca/community-people/health-wellness-care/diseases-medications-vaccines/meningococcal-disease-fact-sheet/?accordion=vaccine-eligibility

Patient and Family Advisory Committee Letter



January 25, 2023

Dear Taddle Creek Family Health Team (TC FHT)

As a patient of TC FHT and a member of the Patient and Family Advisory Committee (PFAC), I am writing on behalf of the PFAC to thank all TC FHT staff for their contributions that resulted in the exceptionally positive feedback received in this year's 2022 Patient Care Survey. The results reflect a strong commitment by ALL TC FHT staff towards EXCELLENCE in care delivery! It is an honor for PFAC to be associated with such an effective, compassionate team of healthcare providers and associates.

Our congratulations are underscored by the recognition that this sustained exceptional level of care and service was delivered during a very challenging period. Challenging for all of us. Resource availability, delivery of care models, patient awareness and expectations were all factors that brought significant challenges to quality of care. Indeed, there were some bumps along the way, but the 2022 Patient Care Survey results demonstrate TC FHT's commitment to buoy us through these challenging times and to continually support quality care.

Every single member of TC FHT contributed to this success. Every. Single. Person. On behalf of the PFAC, we congratulate and thank-you for this exceptional work.

Our sincere Best Wishes for health and happiness in 2023!

– PFAC –

Taddler Tips

A list of helpful resources about:

Well-Being

for the...

Mind

The Science of Well-being Course: https://www.coursera.org/learn/thescience-of-well-being Mindfulness:

https://www.mindful.org/ Mindshift CBT App: https://www.anxietycanada.com/

resources/mindshift-cbt/

Body

Body Image Resources:

https://sidebysidenutrition.com/body-image

Mindful Eating Course:

https://www.udemy.com/course/mindful-

eating-healthy-eating-weight-loss/

Toronto Green Spaces:

https://www.toronto.ca/explore-enjoy/parks-

gardens-beaches/

Soul

Self-Compassion Resources:

self-compassion.org

10% Happier Podcast:

https://www.tenpercent.com/podcast

We Can Do Hard Things Podcast: http://wecandohardthingspodcast.com/ **Attention Asthma Patients!**

Taddle Creek Family Health Team (TC FHT) has teamed up with eAMS (electronic Asthma Management System). If you have asthma, prior to your next appointment with your physician/nurse practitioner, you will receive an appointment reminder via email requesting you register with eAMS. Registering with eAMS can increase the efficiency and productivity of your asthma appointment. You can also register on your own anytime. Once you register and complete a simple asthma questionnaire, information from your questionnaire is securely sent to your MD/NP with tailored recommendations to improve your asthma management. These recommendations are in line with the latest asthma research and guidelines. By registering you will also be able to view your personalized selfmanagement asthma action plan and benefit from asthma educational material.







IF YOU HAVE ASTHMA PLEASE CONSIDER **REGISTERING TODAY.**

IF YOU NEED SUPPORT REGISTERING CALL 416-260-1315 AND REQUEST THE eAMS

REGISTRATION GUIDE -HTTPS://WWW.EASTHMA.CA/PATIENTS.HTML

THE TADDLER

A publication of Taddle Creek Family Health Team 790 Bay Street, Suite 306 Toronto ON M5G 1N8 416-260-1315

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DISCLAIMER

The information presented in The Taddler is for educational purposes only and should not be used as a substitute for the professional advice, treatment or diagnosis from your health care provider. Contact your physician, nurse practitioner or other qualified health care professional if you have any questions or concerns about your health.

The purpose of the TC FHT Newsletter, "The Taddler" is to provide:

Education on varied health-related topics Regular communication about what is happening at TC FHT Information on issues that impact TC FHT and its patients A means for patients to get acquainted with TC FHT team members We hope you enjoy reading it!

*The Taddler is not for private marketing purposes



Taddle Creek Family Health Team March 1, 2023 - Jun 1, 2023 Groups/Workshops/Drop-In Offerings

Groups/Clinics are open to Taddle Creek Family Health Team patients
Additional information is available on the Programs and Services drop down menu,
see website: https://taddlecreekfht.ca/
Dates are subject to change

Event	Date(s)	Time	Learn About/Assistance With
CBT for Insomnia Group Virtual Call 416-260-1315 Note: MD referral required	May 9 - Jun 6, 2023	Tuesdays 5:00 - 7:30 pm	 How cognitive behavioural therapy (CBT) is used when treating insomnia Techniques to help you get quality sleep that will promote good physical and mental health How our minds and thoughts contribute to insomnia Practicing mindfulness to reduce stress and help you get to sleep
Mindful Nutrition Group Virtual Call 416-260-1315 to register for the group	Feb 8 - Apr 12, 2023 7 Sessions to complete	Wednesdays 5:30 - 7:00 pm	 Increase in mindful eating practices Healthier relationship with food and your body Adoption of intuitive eating principles Decrease in emotional eating episodes
Intuitive Eating Group Virtual Call 416-204-1256	Apr 20 - Jun 2, 2023 7 sessions to complete	Thursdays 2:30-5:00 pm	 Creating a healthy relationship with food, mind and body Getting in touch with your body's signals of hunger, fullness and satisfaction Mindful meditation and relaxation exercises Strategies to cope with anxiety, depression, stress, fear and guilt around managing diabetes
Blood Sugar Management Workshop Virtual Call 416-204-1256	Mar 8, 2023 (Part 1) Mar 15, 2023 (Part 2) Mar 23, 2023 (Part 1) Mar 30, 2023 (Part 2) Apr 5, 2023 (Part 1) Apr 12, 2023 (Part 2) Apr 20, 2023 (Part 2) May 3, 2023 (Part 1) May 10, 2023 (Part 2) May 18, 2023 (Part 2) May 18, 2023 (Part 1) May 25, 2023 (Part 2)	Wednesdays 9:00 - 11:00 am 9:00 - 11:00 am Thursdays 5:00 - 7:00 pm 5:00 - 7:00 pm Wednesdays 9:00 - 11:00 am Thursdays 5:00 - 7:00 pm 5:00 - 7:00 pm 5:00 - 11:00 am Thursdays 5:00 - 7:00 pm 5:00 - 11:00 am 9:00 - 11:00 am	An introductory two-part series designed to help individuals living with prediabetes or diabetes. Workshops will be held over Zoom. Part 1: Getting Started