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**HEALTH & SAFETY
NEWSLETTER**

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April 2022

Does alcohol cause cancer?

You quit smoking. You cover up in the sun. You cut out processed meat. You do these things to stay healthy and reduce your risk of cancer. Have you forgotten something?

Research by Cancer Council Victoria found less than one-fifth of people who drink alcohol identified it as a cancer risk. That's despite it being linked to at least seven types of cancer, including breast, liver, mouth, throat and bowel cancer – and despite evidence that alcohol consumption causes nearly 3,500 Australians to develop cancer each year.

Todd Harper, Cancer Council Victoria CEO, said the research highlights that we still have a long way to go in raising the awareness of the harms of alcohol, which the World Health Organisation classified as a group one carcinogen over 30 years ago.

Alcohol is a big part of our lifestyle, says Harper, and we tend to associate it with

memorable times and celebration, not with something that could endanger our health.

How alcohol increases your cancer risk

Alcohol does its damage in various ways. When you drink alcohol, your liver converts most of the ethanol into a toxic by-product called acetaldehyde.

If you drink too much alcohol, your body can't process the acetaldehyde fast enough. It builds up in your body and can cause irreversible DNA damage, which can lead to cancer.

Alcohol can also cause levels of the hormone oestrogen to rise. This increase could lead to breast cancer in women.

Specialist breast cancer surgeon, Dr Chantel Thornton, said the prevention message was extremely important.

"Every day I talk to my patients about the impact that alcohol, along with other factors like diet, exercise and cigarette smoking, can have on their health. They are

often surprised to learn that alcohol intake, particularly between first menstruating to first pregnancy, increases their risk of developing breast cancer later in life," Dr Thornton told smh.com.au.

How low should you go?

Even though alcohol at quite low levels will increase your risk of cancer, the less you drink, the lower your risk of harm. If you stick to the current alcohol guidelines, your risk drops dramatically.

There is no global consensus on recommended maximum intake for alcohol so the guidelines for safe drinking depend on where you are. In most cases, it is recommended to consume no more than two standard drinks on any day and to have several alcohol free days in a week. The definition of a 'standard drink' also differs from country to country, although it is generally a drink that contains between 10g and 12g of pure alcohol. ✕



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April 28 is Pay it Forward Day, a global initiative that aims to make a difference by creating a ripple of kindness across the world. This year's Pay It Forward Day is aiming to inspire over 10 million acts of kindness. What can you do? Pay for someone's coffee, help someone out in need, let others know about Pay it Forward Day, give blood, or donate to a worthwhile cause. For more information and ideas visit payitforwardday.com

3 common myths about bloating



Your clothes fit in the morning, but by lunchtime you have to let your belt out a notch or two. Is this bloating? And is it something you need to fix?

Bloating is that feeling of increased pressure in your intestines. Do you need to worry about it? Here we set you straight on three myths about bloating:

Myth 1. Bloating isn't normal. "Occasional bloating is totally normal, especially after a big meal or extra fibre," says Dr Megan Rossi, an Australian dietitian with a London-based practice specialising in gut health and author of *Eat More, Live Well*.

"In fact, a bit of bloating after a high-fibre meal is good — it's a sign of well-fed gut microbes (including good bacteria) just doing their thing. Continuous bloating, which is when you're always bloated with no fluctuations over the day, is less common and best reviewed by your doctor first."

Canadian dietitian Abby Langer agrees.

"The wellness industry tries to make us believe that all bloating is a problem, but it's unrealistic to believe that your stomach should be flat all the time," she says. "Just

eating a regular-sized meal can distend your stomach which may lead to complaints of bloating, when what you're really experiencing is a stomach full of food."

Myth 2. There's a simple cause. There are many different triggers for bloating, says Rossi. These include the volume of food and fluid you've eaten, a backlog of poop in the case of constipation, or simply the gas produced by your own gut microbiota.

Eating foods containing sugar alcohols (sugar replacements like sorbitol and xylitol) such as chewing gum will also contribute to bloating, as can wearing tight clothes all day and lack of movement.

Stress can also have very real effects on our gut, says Langer, including the feeling of bloating. The gut and brain are connected via nerves in what's called the gut-brain axis. When we're stressed the brain sends signals to the gut to slow down digestion in the 'fight or flight' response, which can trigger gut discomfort.

Rossi points out that whether you feel the bloating or not can be down to your intestine's sensitivity and how efficient your body is at absorbing the gas produced by

your unique gut microbiome.

Myth 3. You can fix bloating by cutting out [insert healthy food]. Don't cut out foods that are perfectly good for you before getting advice from a nutrition professional such as an Accredited Practising Dietitian.

There are many diet and lifestyle strategies that can help bloating, including checking for common food intolerances, splitting your food intake into smaller meals, and chewing well.

Unnecessarily restricting your diet can make your gut more sensitive, warns Rossi. That's because your gut bacteria adapt to the food that you eat, and when you feed it a diverse range of whole foods (including carbs) the gut microbiome can produce enzymes that break down all the fibres found in plants.

If you overly restrict your diet, you'll have a less diverse gut microbiome and lack many of the microbes needed to digest plant fibres efficiently. This can trigger gut symptoms such as bloating and excessive gas — the very things you want to avoid.

If your bloating is frequent and comes with pain and discomfort, speak to a dietitian or doctor for help. ✕

Does weight training burn fat?

We used to think that to shrink our fat cells we needed a brisk walk, run or cycle to burn up the excess calories. But the thinking has shifted. Working with weights may be an even better option for getting rid of unwanted fat.

Cardiovascular exercise will always be essential part of getting and staying fit. Amongst other benefits it strengthens your heart and reduces your blood pressure.

Our muscles need attention too. Including two sessions of resistance or strength training per week will increase muscle mass and strength and improve bone density. Evidence indicates that weight training can help us avoid an early death, diabetes, cardiovascular disease and obesity, and reduce our risk of cognitive decline and injury. It can also help with weight and fat loss.

What is resistance exercise?

Resistance training is when you make your muscles work against a weight or force. It involves using weight machines, exercise bands, hand-held weights or your own body weight (such as push-ups, sit-ups or planking) to provide your muscles with enough resistance that they can grow and get stronger.

The link between muscles and fat

Resistance training increases the size and tone of your muscles. This doesn't just look good, it also helps you control your weight in the long term. That's because muscle size is important in determining your resting metabolic rate (RMR), which is how many calories your body needs to function at rest. Studies show that weight training is more effective than aerobic exercise at increasing RMR.

Other studies have found weight workouts increased energy expenditure and fat burning for at least 24 hours afterwards. Even people who occasionally lift weights are far less likely to become obese than those who don't.

Now researchers have discovered why this might be happening. Examining studies done in both mice and humans, a study published in *The FASEB Journal* found that resistance training caused significant changes in the way fat cells operate.

In a process called mechanical loading, muscles get stressed through lifting, pushing, or pulling. In response to this, cells in the muscles release a substance that sends instructions to fat cells, prompting them to start the fat-burning process, explained study co-author Dr John McCarthy, associate professor of physiology at the University of Kentucky College of Medicine.

"We think this adds a new dimension to the understanding of how skeletal muscle communicates with other tissues," said Dr McCarthy. The results remind us, he said, that muscle mass is vitally important for metabolic health. ✕

Resistance training for beginners

- 1. Warm up first.** Do some light aerobic exercise such as walking, cycling or rowing for about five minutes.
- 2. Use proper technique to avoid injuries.** You can learn this from a registered exercise professional. Many gyms offer experienced personal trainers, or you could see a physiotherapist or exercise physiologist.
- 3. Start slowly.** New to weights? Then you may be able to lift only a few kilograms. As your body gets more used to the exercises you can start to progress. Once you can easily do 12 repetitions with a particular weight, gradually increase the weight.
- 4. Use your breath.** Breathe out when you are lifting or pushing; breathe in as you slowly release the load or weight. Never hold your breath while straining.
- 5. Be sensible.** Don't be so eager to see results that you risk injury by exercising too long or choosing too heavy a weight.
- 6. Rest.** Rest muscles for at least 48 hours between strength training sessions. If you've been sick, don't return to training until one or two days after you've recovered.

Is it depression? ...or a justified sense of despair about the world?

How do you know if your feelings of sadness, hopelessness and anger are a natural and healthy response to events, or a clinical problem that needs treatment?

"It's so depressing" we say. The pandemic that's going on and on. The future of our planet. The 24-hour news cycle, filled with outrage and doom.

It's normal to feel down about things sometimes. In fact, pretending to be upbeat all the time can be far worse for our mental health (this is called toxic-positivity).

And logically, we know that finding things depressing is very different from having clinical depression. But how can we tell the difference?

Let's start with the definitions

The American Psychological Association (APA) defines despair as: "the emotion or feeling of hopelessness, that is, that things are profoundly wrong and will not change for the better."

Depression, on the other hand, has physical and mental effects. APA defines it as:

"A negative affective state, ranging from unhappiness and discontent to an extreme feeling of sadness, pessimism, and despondency, that interferes with daily life. Various physical, cognitive, and social changes also tend to co-occur, including altered eating or sleeping habits, lack of energy or motivation, difficulty concentrating or making decisions, and withdrawal from social activities."

To be diagnosed with depression, specific symptoms need to last for more than two weeks.

Depression can hit without obvious reason. It's not always linked to a specific event or thought, but rather longer-term neurological patterns.

Despair has a reason. It may not be a "logical" reason to others, but it makes sense to the person experiencing despair who is convinced things will never get better.

Then there's clinical despair

Author and psychotherapist, Dr Stephen A. Diamond, says "Clinical despair can be conceptualised as a profound and existential hopelessness, helplessness, powerlessness and pessimism about life and the future."

"Despair is a common human experience," says Dr Diamond. "We may occasionally despair about our job, marriage, love life, family, finances, world events, etc. But typically this despair dissipates in time, and life goes on. At least till the next crisis."

"When despair doesn't dissipate but rather deepens, hunkers down, takes control, and becomes chronic, diminishing quality of life that impairs functioning and keeps us from moving toward our goals, dreams, and desires, it has become pathological or clinical despair."

So, how should we manage depression and despair, and when should we seek help?

If you think you have depression – if you've been struggling with daily functioning for two weeks or more – then see your doctor. You have many options for proven, effective treatment.

If you're feeling despair that seems to come from a loss of hope or meaning, there's much you can do.

Sean Grover, also an author and psychotherapist, says the first step is to "honour your despair".

"Please don't deny it. Don't push it away. When you acknowledge your despair, you take away some of its power over you."

His advice for managing despair includes:

- **Seek out fellowship:** find people who share your experience, so you don't feel so alone.
- **Avoid toxic positivity:** when you've lost all hope and meaning, and someone tells you, "look on the bright side", it can feel insulting. Try to ignore vacuous platitudes.
- **Take your despair for a walk:** at least once a day, get out for some fresh air. Walking boosts endorphins, (brain chemicals that can improve your



mood), shakes off tension and creates more headspace.

Finally, we can learn much from the words of trauma therapist and university lecturer, Jonathon Foiles:

"Hope can seem like a radical, even foolish, act. In times of despair, it can seem naive or dangerous to think that things may get better.

"But we fundamentally misunderstand hope if we take it to be an assertion that everything is going to work out in the end, sooner rather than later.

"To be hopeful is not to believe in the myth of continual human progress but to acknowledge that the future remains unwritten and we have the ability to play a part in its making.

"Despair closes off the future, making us feel assured that all of our attempts at building a more just and humane world are doomed. Hope holds the door open, if ever so slightly, to the chance that it could be different. Do everything you can to keep it cracked open." ✕

How to cope with uncertainty

"Uncertainty is the only certainty there is, and knowing how to live with insecurity is the only security." Mathematician, Professor John Allen Paulos.

If the last few years have taught us anything at all, it's that life is uncertain. As much as we want to, we can't control the events around us. We can only control our reaction.

Yet even when we know that, intellectually, we find the uncertainty can make us anxious and stressed. So how do we manage it?

Author and executive coach, Dr Christine Carter, says that our brains perceive uncertainty as a threat. When you feel uncertain, it's hard to focus. You've gone into survival mode. Dr Carter says the number one way to cope with uncertainty is to stop trying to resist it, and accept it.

"Ironically, resistance prolongs our pain and difficulty by amplifying the challenging emotions we are feeling."

"Acceptance is about meeting life where it is and moving forward from there."

And, the "most essential stress-reduction tactic": don't believe everything you think. Dr Carter says that even though it's normal to think about worst-case scenarios, too often we start to believe they will actually happen.

"We grieve for things that we haven't actually lost, and react to events that are not actually happening. This makes us feel threatened, afraid, and unsafe when we are simply alone with our thoughts."

"Instead of buying into every stressful thought, we can actively imagine the best possible scenario."

“That was a near miss!”

You're walking down the hallway, and find yourself slipping on a patch of water which hadn't been cleaned up. As you slip, you're thinking, “oh no, I'm going to break an arm which means an LTI (lost time injury) for my department, and time and expense for me”. But you're OK. You manage to stop your fall with the wall, and after catching your breath, you go on your merry way.

Should you report it? Nothing happened.

The clear answer is yes. A near miss is a reportable incident. Even if “nothing happened”.

By definition, a near miss is an occurrence

that might have led to an injury or illness, danger to someone's health, and/or damage to property or the environment.

A dangerous incident, according to the Work Health and Safety Act 2011, is “a workplace that exposes a worker or any other person to a serious risk to a person's health or safety emanating from an immediate or imminent exposure”.

However, reporting near misses can be a bit... hit and miss.

Without appropriate training and encouragement, employees can sometimes

be hesitant to report a near miss for fear of getting into trouble or “ruining the stats”.

In an organisation with a strong safety culture, employees report near misses in order to reduce actual injuries. It's part of a continuous process to identify and rectify issues.

A near miss indicates there's a problem: a lapse or a hazard in the safety measures. If you ignore a near miss, the problem still exists. By encouraging near-miss reporting, you are encouraging a healthy, proactive safety culture that prioritises people over statistics. ✕



Ask an expert about ...

Australian Competition and Consumer Commission (ACCC) says:

2021 was a big year for scams worldwide, with phone-based scams increasing.

In Australia, for example, more than half of all reports to ACCC Scamwatch were phone-related, and Australians lost \$63.6 million to scams involving unsolicited calls or text messages in 2021.

The ACCC says scammers usually call or text people and claim to be from well-known businesses or government bodies, to attempt to steal personal information.

“Scammers are pretending to be from companies such as Amazon or eBay and

Q I get so many scam texts on my phone. Why? And how do I avoid getting trapped?

claiming large purchases have been made on the victim's credit card,” says ACCC.

“When they pretend to help you process a refund, they actually gain remote access to your computer and steal your personal and banking details.”

In online shopping scams, scammers create realistic looking fake online stores selling items at heavily discounted prices, however the items are fake, or never delivered to buyers.

So what should you do?

ACCC says:

- Do not click on any links in messages that come to you out of the blue and never

provide any of your personal or banking details to someone you don't personally know and trust.

- To avoid online shopping scams, always do a search for the product or company name, plus “complaint” or “scam” to see what other people are saying.
- If you're aware of a dodgy message, report the apparent scams to your country's scam alert organisation. A web search should readily find the relevant site for you. Make sure it is a government accredited site.
- Also check out the Scamwatch website for the most recent scams, so you know what to watch out for.

News Bites

App
of the
month

BBC Good Food

Stuck for dinner ideas? There are plenty of food apps out there but for choice and quality you can't go past BBC Good Food. If you can name a dish, there's likely to be a recipe for it here. Most of the recipes listed have appeared in the pages of the Good Food magazine, and have been tested and approved by the pros. You can save your favourite recipes to a personal binder to access offline.

Available free from [iOS](#) and [Google Play](#).

Virtual reality may
make therapy easier

If you find opening up to a therapist a little daunting, you might soon have another option.

A study from Edith Cowan University found 30 per cent of people prefer to talk about negative experiences with a virtual reality (VR) avatar, rather than a person.

The researchers compared social interactions where people engaged in VR conversation versus face-to-face. They used technology to create a realistic motion avatar that closely mimicked their real-life counterpart, then analysed how people interacted with avatars compared to people.

Psychology and communication researcher Dr Shane Rogers said participants rated their experience on factors such as enjoyment, perceived understanding, comfort, awkwardness and extent that they felt they disclosed information about themselves.

"Overall people rated VR social interaction as similar to face-to-face interaction, with the exception of closeness, where people tended to feel a little closer with each other when face-to-face," said Dr Rogers.

Dr Rogers believes the technology may enable therapists to conduct therapy more effectively at a distance, as a person can be in the therapist room (in virtual reality) while seated in their own home. ✕

How meditation can
help your immune
system

Meditation is said to reduce stress, anxiety, and fatigue, and help alleviate depression and pain. It's also believed to support your immune system, and a recent study showed how it may do this.

In a study from the University of Florida, researchers analysed blood samples from 106 volunteers before and after they participated in an intensive eight-day meditation retreat.

They found increased expression of 220 genes tied to immunity but no change in inflammatory genes, suggesting that meditation might be beneficial for people with conditions involving weakened immunity. ✕

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Suite 3.06, 55 Miller Street Pyrmont NSW 2009 Australia
ACN 624 842 351 **Phone:** 1300 90 10 90

Website: www.healthworks.com.au

Editorial Team:

Editor: Jenny Boss MHumNutr

Deputy Editor: Kylie Singh

Subscriptions: Janelle Gibb

Email: well@healthworks.com.au

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10,000 steps? Not
necessary

Do you regularly check your smartphone or activity tracker to see how many steps you've taken? If you often fall short of the magic 10,000 steps, then researchers from the University of Sydney's Charles Perkins Centre have some good news for you.

Lead author Associate Professor Melody Ding and her colleagues wanted to create a target based on evidence. For their meta-analysis, published in the *Journal of Internal Medicine*, they looked at over 30,000 individuals whose steps and mortality outcomes were measured over the course of about nine years and across 10 studies.

They found the 'ideal' step count is closer to 7,500, a goal that may be more realistic for many of us. Everyone is so hooked on the idea of 10,000 steps, says Professor Ding, but whatever you do will be beneficial. "Ten thousand shouldn't be the obstacle that holds you back."

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THING YOU CAN DO TODAY



Change your smoke alarm battery

Smoke alarms are lifesavers. It can take as little as three minutes for a fire to take hold, and just two quick breaths of thick, black smoke to render someone unconscious. Smoke alarms provide a critical early warning, giving you and your family time to escape from the flames and smoke of a fire.

Most home fires happen at night, a time when you won't smell the smoke, says Fire and Rescue NSW. Taking the time to check and maintain your smoke alarms is the best way to prevent fatal fires in your home.

If your smoke alarm has a battery, you should replace it annually, recommends Fire and Rescue NSW. A good way to remember is to change it when you change your clocks at the end of Daylight Saving, or otherwise on 1 April. If your smoke alarm uses a lithium battery, it is inbuilt into the alarm and cannot be replaced.

How do you maintain your smoke alarms?

Every month: Test the alarm by pressing the test button, to ensure the battery and alarm work.

Every six months: Clean the alarm with a vacuum cleaner to remove any dust or particles that can prevent the smoke alarm from working properly.

Every 10 years: Replace your smoke alarm. They don't last forever and the sensitivity in all smoke alarms will reduce over time. ✕

EAT SMARTER

Why we crave chocolate

Whether it's dark, milk or white, in the shape of a bunny or an egg, many of us will be enjoying chocolate this Easter. And even if you don't celebrate Easter, chocolate is still a favourite for many people.

What's not to love? It tastes good, smells good, and that creamy, melt-in-your-mouth consistency stimulates feelings of pleasure on the tongue. It's the most commonly craved food in the world, and science may be able to explain why.

The whole experience of eating chocolate results in feel-good neurotransmitters, mainly dopamine, being released in the brain, says Amy Jo Stavnezer, a professor of psychology and neuroscience.

Dopamine is released when you experience anything that you enjoy – sex, laughing, or watching your favourite TV show. Dopamine helps you to remember positive experiences, explains professor Stavnezer, and will give you a little surge of anticipation when you see, smell or even just imagine chocolate.

Scientists originally thought that the compounds chocolate contains, such as theobromine and caffeine, could activate the dopamine system directly, like cigarettes and cocaine do. But experiments have shown that it's a combination of all the components of chocolate – the mouth-feel, the taste, the sugar and fat ratio, plus the effects of the many different chemicals – that drives the craving.

Now you know you're biologically driven to eat that chocolate, take your time with it. Choose quality chocolate, eat it slowly and don't feel guilty. ✕



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