

Speaker Guest-1: Hello, Miss Jones. I'm. I'm Doctor Dalton. I think it's the first time we've met. Yes.

Speaker Guest-1: Good. What can I do for you today?

Speaker Guest-2: Umm, the specialist told me I needed to follow up with you.

Speaker Guest-1: OK, that makes that makes me frightened. What did the special, what did the specialist say to you?

Speaker Guest-2: Well, it was one of those bone specialists, the ortho guy, umm, he said that, umm, my bones were a bit on the thin side. And so he doesn't deal with thin bones, he only deals with broken ones. So he said I had to see my family Doctor Who's retired. So I'm seeing you.

Speaker Guest-1: OK, I guess he merits his retirement. Umm, I'm sorry to hear, umm, that you ended up in the hands of an orthopedic surgeon. Did you have some kind of accident or fracture or something?

Speaker Guest-2: Like that? No, it was really minor like.

Speaker Guest-2: I was just climbing down from the forklift truck that I drive and, umm, I kind of slipped a little bit on the last step and I, I reached out with my hand and I guess I put too much pressure, pressure on my wrist and I ended up with one of those. It's like, umm, a dog fracture, A collie, you know, And uh, so I put a, he put, I went to the emergency room and everything and they took an X-ray and my bone was broken or whatever. And they put a, a cast on and they sent me to this.

Speaker Guest-2: This ortho guy and he said that my bones like I, I also had to have a chest X-ray because my back was killing me by the time I was I got there and he said, yeah, your, your bones are kind of thin. You need to see a, a, your family doctor about it. So you know here.

Speaker Guest-1: I am well, when did all this happen?

Speaker Guest-2: Uh, gosh.

Speaker Guest-2: Six weeks ago, something like that, yeah, maybe a little bit longer.

Speaker Guest-1: Yeah. So it's it's kind of fresh now.

Speaker Guest-2: I've been F, I've been F, Is he afraid for ages? In the physiotherapist said it should have been fixed by now, but it's really not.

Speaker Guest-1: I can. It could take a while. I think what was concerning the orthopedic surgeon was that you ended up with a fracture there, which would normally maybe not happen with the kind of fall that you're describing. And did you say you also had a little fracture in your back as well?

Speaker Guest-2: Yeah, I did. Like, I, I mean, I didn't realize it, but my back was kind of killing me and, and he said it was like, you know, your spine bones, they kind of got squished a bit.

Speaker Guest-1: It sounds painful actually, you know.

Speaker Guest-2: Yeah, I mean I.

Speaker Guest-2: Don't need the ibuprofen anymore, so it's and it's much much better.

Speaker Guest-1: Since the pain pretty much under control, you know, his concern would be for something we call osteoporosis, and that's a thinning of the bones. And it happens to all of us with time, but sometimes it can happen a bit earlier in some people, and that's a bit of a worry in your family. Is there any history of thin bones or osteoporosis? Yeah.

Speaker Guest-2: Yeah, my mom.

Speaker Guest-2: Her hip like 2 years ago and my sister had a fall.

Speaker Guest-2: The messenger wasn't a big fall and she she broke her arm a couple of years ago too. So maybe, maybe we all have it. I.

Speaker Guest-1: Don't know. Oh, you, you might come by this naturally. Uh, how old are you? May I?

Speaker Guest-1: Ask 5757 and when did you have your, umm, menopause?

Speaker Guest-2: I had it kind of early. Uh, all of us have early menopause. I was around 40 ish when I, you know, started.

Speaker Guest-1: You know that that is quite early and it can also lead to thinning of the bones if it's happening pretty early like that.

Speaker Guest-1: Now, uh, you know, we will have to look into that. The orthopedic surgery is right.

Speaker Guest-1: There are some things that we look at in terms of lifestyle that can maybe also cause any of the bones. Do you take alcohol at all?

Speaker Guest-1: Do you drink?

Speaker Guest-2: Yeah, maybe, maybe a couple of beer a week. That's about it.

Speaker Guest-1: OK, uh, smoking.

Speaker Guest-2: Yeah, I do. Don't tell me to quit. I smoke about a pack a day and I have since, uh, I was like in my teens.

Speaker Guest-1: I'm gonna tell you to quit maybe maybe some other day, but we will talk about that. You know, umm, one of the other things that can sometimes 'cause it is, is a lot of caffeine uh use, but I don't think that's as important as some of the other things. Do you drink a lot of a lot of coffee you.

Speaker Guest-2: Do yeah, I love my coffee. I I have two or three.

Speaker Guest-2: Before I even go to work in the morning and then I have another two or three at work. So yeah, and. And you know it, it surprisingly doesn't bother bother my nerves, you know, like you think you'd be worried, but I'm wired up anyways you're.

Speaker Guest-1: Wired up anyways.

Speaker Guest-2: Yeah, I've, I've just feeling anxious all the time.

Speaker Guest-1: You know that you think that's because of this accident.

Speaker Guest-2: Well, you know, it's partly the accident. Uh, like, OK, so here's the thing. I love driving the forklift. I love it. And you, you know, you're zipping around the warehouse. It's so cool. I have all the friends and, you know, and I'm really good at it. I don't even want a prize, right. And, and since I've been off with this fracture, I guess it was longer than six weeks. Must be in a few months like I've been on this work.

Speaker Guest-2: Thing where the physiotherapist kind of gives you modified job, right? And that she's tied me to this frigging desk and it's awful. I hate it. And, and, and like I have to use a computer and stuff. And that just like totally freaks me out because I'm really not a computer person at all. And it's so frustrating because I want to get back.

Speaker Guest-2: And, and now she's, you know, she just last week she had me go through.

Speaker Guest-2: Like all these physio things where you try and steer and they have a practice gearbox and all that kind of crap. And, and like, I couldn't do it. I couldn't do it with my wrist. And so she's got this big meeting scheduled next week with like workman's comp and, and they're going to, and they're going to say, you know, I can't drive a forklift anymore. And, and they're probably gonna put me on a desk job and the only desk job.

Speaker Guest-2: Is is the receptionist. God help me if I have to do that job. It's like.

Speaker Guest-2: Like all computer work and booking program like booking products and and shipments and trap like that and I I'd lose my mind. I really would. It's it's gotta be drove. It really has.

Speaker Guest-1: I can't see, you know.

Speaker Guest-1: You know, I can hear the frustration in your voice. It really is difficult to look at something like this happening, an accident that could lead to you having to change jobs. And I guess that's what you're afraid of right now is it might be a permanent change.

Speaker Guest-2: Yeah, well, that's, I mean, that's just one thing that's on my mind for sure, but that's a big one.

Speaker Guest-1: Yeah, it would be. It would be, you know the.

Speaker Guest-1: That whole Workman workman's compensation thing is is.

Speaker Guest-1: A bit of a treadmill too. It can be, and it can be kind of difficult to sort all that stuff out. So, you know, if you can see a place where I can help you with that, you should let me know.

Speaker Guest-1: Yeah, go ahead.

Speaker Guest-2: No, I was just like hoping that maybe you could, you could make my bones better and then I, I, you know, then I would be able to do the physio test and then I.

Speaker Guest-2: Wouldn't have to take that job.

Speaker Guest-2: Right, thank you. It's certainly, we're gonna have to look at your phone, so we're gonna have to see what we can do to strengthen them. I think you're, you're absolutely right. Umm, do you take a lot of dairy products? Are you, uh, no.

Speaker Guest-2: No, don't take any.

Speaker Guest-1: Calcium, vitamin D. Do you take any? No, so you're taking is underneath.

Speaker Guest-1: Things for pain or do you take any other medications?

Speaker Guest-2: I don't take anything. I don't even need the the ibuprofen anymore. It's good.

Speaker Guest-1: Nothing else. You're not taking any medications over the counter? Nothing at all. OK, No, no. It gives us something to work with, I guess. You mentioned a couple times that it's one of the things making you anxious.

Speaker Guest-2: Man, I've just got so much going right now, like OK, so my youngest daughter just got her GED. That means that she's going out for this better job. So she.

Speaker Guest-2: Moved away now she got pregnant really early and there's two kids, right?

Two my 2 grandkids. They're you know, Billy is 10 and and Jeannie is like 9 and anyways, they're living with me right now. OK now they're great kids. It's not that's not the problem. It's it's all the school stuff that they have to do like I'm having to teach them their schoolwork and they're taking these tests all the time. It's like all the teachers do is like organize tests and I gotta tell you like.

Speaker Guest-2: I had a real problem with taking tests when I was a kid, like so much that I actually had to leave school early. Like I just couldn't do it. I would get myself up and not. And I just spend the whole time in the bathroom being sick. And now it's like this, it's all coming back. It's like it's crazy. I don't, I don't, I don't even know what to do. Like I, I break out into shakes and I'm.

Speaker Guest-2: I'm just all caught up in knots and I can't sleep and I'm.

Speaker Guest-2: Having nightmares and all because of like between the job, not being able to go back to the job I love and, and dealing with my grandkids, man, I, I, I just don't.

Speaker Guest-1: Know well, it's a lot all at once for sure you know, umm, uh, the idea of dealing.

Speaker Guest-1: With, you know, your, your grandchildren at home, having to tutor them, uh, combined with being off work and not sure what your future is going to be.

Speaker Guest-1: And the whole combination is certainly very stressful. I can understand that. It sounds like you do have a bit of a history of anxiety. Would I be fair in saying that?

Speaker Guest-2: Yeah, yeah. I mean, nobody ever gave me any drugs for it. I never saw a doctor for it. Maybe I should have when I was a kid, but man, I'm just, I'm so anxious now that I was just kind of hoping maybe you'd be able to.

Speaker Guest-2: Do something about that I I feel overwhelmed I I.

Speaker Guest-1: I gotta tell you, I feel anxious if I had to teach, umm, do homework with a 10 year old as well. Umm, So I, I don't think it's easy, you know, uh, getting back into that, it brings back some unhappy memories for you with that, it sounds like.

Speaker Guest-2: School was school wasn't the best time for you family? How long are the grandkids going to be with you?

Speaker Guest-2: They could be with me for another several weeks, I don't know. It's up to my daughter when she gets.

Speaker Guest-2: Settled in a new place and gets a new job. I mean, I hope it's not much longer, but you never know, right?

Speaker Guest-1: Mm-hmm. Is your daughter on her own or does she have, uh.

Speaker Guest-2: On her own, she's on her own.

Speaker Guest-1: She's on her own, so it is hard for her as well. She's lucky to have you. She's lucky to have you really to be able.

Speaker Guest-1: To look out for kids, you know, Yeah, thanks. So it's, it's, uh, it's a bit of a mess right now. Uh, you know that one of the things I would say though, from what I'm hearing is that.

Speaker Guest-1: Some of the things that are happening to you are time limited, right?

Speaker Guest-1: And the grandchildren are not going to be with you forever.

Speaker Guest-1: This work problem is going to have to get settled. It can't go on forever and ever. So, you know, the anxiety you're feeling now is it's going to come to an end. It's going to get, it's going to get better is what I'd like to say. You know, maybe we can help with that and give you some suggestions. But you know, in the long run, I think it's going to be OK. What kind of support do you have yourself?

Speaker Guest-1: With your husband.

Speaker Guest-2: You've got your minutes, you've got 3 minutes, yeah.

Speaker Guest-2: My husband's great. He's he's a long distance truck driver. So he's gone for, you know, 3-4 or five days at a time kind of thing. But he's, he's always been super supportive and, and so there's no problem there. And I'm, and I'm close to my family and stuff, you know, like it. It's not like I'm totally alone, but I'm not gonna ask my 80 year old parents to come and help with the grand, the great grandkids, you know?

Speaker Guest-1: Yeah. Are you thinking of retirement anytime soon or is this?

Speaker Guest-2: Oh God, I wish. But we've, we've looked at our finances and I've, I've got at least six or seven years that we both want to get.

Speaker Guest-2: A fair bit of money tucked away before we can. So yeah. No, no.

Speaker Guest-1: Whether you want to get back to your job. So, you know, in the interest of time, let's talk a bit about the osteoporosis situation that the thinning of the bones. It certainly sounds like you have that and there are tests we would do like a, a bone mineral density test to see how thin they are. But in fact, I can tell you already that you have osteoporosis just from what you've been telling me of these fractures, you know.

Speaker Guest-1: There are some things you can do without medication, like maybe cutting down on smoking. I know we don't want to go there. Calcium, vitamin D could help. Regular exercise, it's a good thing to do as well and it would also help with your anxiety, you know?

Speaker Guest-1: It may help sort of calm things down a bit. There are medications we use for osteoporosis. They're in a family called bisphosphonates, but we talk about that after we got these results back and saw what was going on.

Speaker Guest-1: That just helps the calcium get into the bones, you know, helps strengthen the bone.

Speaker Guest-1: The anxiety is a different issue. You know, it's fairly hard to think. I would say it's temporary. You know, a lot of what's happening too, is because of the situation, the Workman compensation Board, often there is a role for a doctor in that. And if you can see how I could help you with, you know, seeing, you know, she, we hope she'll improve. She's not ready to go back. Umm, she isn't suited for this particular job. Perhaps another job would be better. You know, there are things we can work with that. Yeah, Perhaps with an.

Speaker Guest-1: Social therapist as well, you know, I, I don't think medication is going to help you with anxiety. I don't think that's something you want to deal with, you know, especially since this anxiety, I'm pretty sure it's going to come to an end in the end once these things start start settling down. Yeah, yeah.

Speaker Guest-2: That would be great if you could help with that workers compensation meeting. That would be fabulous. Well.

Speaker Guest-1: You know, I just go in with the idea that the doctor is there if you need medical notes to help you with one decision or another.

Speaker Guest-1: So, you know, I'd certainly be there to help you with that. We're gonna have to meet again because our time is running out, but is that kind of a fair plan for where you wanna go with the?

Speaker Guest-2: Moment. That's a great plan. Actually, that's a great plan.

Speaker Guest-1: Thanks. Let me ask, you have your appointment with the Workbooks Compensation Board, we can see how that goes and we can also make those other plans for what's going on with the bone test. OK, thanks.

Speaker Guest-1: For meeting you and I look forward to seeing you again.

Speaker Guest-2: Bye.

Speaker Guest-2: Ah.