


A WHOLE NEW BALL GAME

HEALTH ADVICE FOR
AUSTRALIAN MEN
ISSUE 9 // MAY 2009

- 
- 1** Jim Stynes
 - 2** Visiting the GP,
easier than you think!
 - 4** New Drinking
Guidelines
 - 8** When someone
close to you has a
drinking problem



QUESTIONS FOR THE QUACK

with Associate Professor Gary Richardson

International Men's Health Week is just around the corner, so look out for events and activities you can be a part of in your local community. We all know that we should have a regular check up with the GP, and International Men's Health Week is a great time to do it, and may be a trigger to remind you each year. So go on, make that call and book an appointment now!

Thanks for sending in your questions. Here are a couple that have come through, that I thought might be relevant to our readers.

Rob 47 asks: I am a very large man with type 2 diabetes and I have had a very long-term problem with excessive sweating, longer than I have had diabetes. I find it very embarrassing, and it is worse when I am in heated environments or anxious about something. Can you tell me why I sweat so much, and what I can do about it?

Sweating is the way your body controls your temperature, and is normal when you are hot or if you are exercising. It is also important when you have a fever to cool you down. Obese people have plenty of insulation, which allows the core body to overheat, and can cause an increase in sweatiness.

Sweating is regulated in an automatic way by part of the nervous system, and sometimes other things, particularly anxiety, can set this off. The amount people sweat when anxious can be very variable. Sometimes this part of the nervous system can be wrongly adjusted and extreme sweating occurs. Like every other part of the body, things don't always work the way they were meant to!

Sometimes the nerves are affected by diabetes. Other medical problems like an overactive thyroid and low testosterone can cause sweating and should be checked out.

Treatment ranges from simple measures to reduce the triggers for sweating, such as creams and lotions to inhibit sweating. But sometimes for severe underarm sweating, the removal of the sweat glands can be considered. It is very important to follow up with your GP, and to discuss any treatment options you would like to take further.

Peter 57 asks: I had a go at your online health check and was surprised to find that I had a risk for lung cancer. I don't smoke, and my parents have never smoked either. I don't have any form of cancer, and as far as I know I have never been exposed to asbestos and have not worked in the mining industry. Are you able to tell me why I was assessed as having a risk for lung cancer?

This is a really good question, as it highlights the importance of knowing what risk factors you have so that you know what you can do to reduce them! I suspect that the trigger you activated for lung cancer is that you don't eat five or more serves of fruit and vegetables each day. Here are the risk factors for developing lung cancer from the Harvard School of Public Health Disease Risk Index (www.diseaseriskindex.harvard.edu):

1. Diagnosed with a cancer
2. Family history of lung cancer
3. History of smoking pipes, cigars or cigarettes
4. Lived with a smoker
5. Exposed to asbestos
6. Worked in: mining, iron or steel founding, chrome plating, aluminium or coke production, plastics production or coal gasification
7. Eating less than five serves of fruit and vegetables each day

Take care of yourself.
Live long and live well.

ASSOCIATE PROFESSOR
GARY RICHARDSON
CHAIRMAN, FOUNDATION 49

LIVE LONG. LIVE WELL.
WWW.49.COM.AU

Foundation 49 is funded through your donations and special events. The magazine is generously supported by beyondblue. For more information or to make a donation, please call (03) 9508 1567 or visit www.49.com.au

Foundation 49 is an initiative of Cabrini Health. Thanks to Cabrini for its ongoing support.

This magazine contains general health information and does not take the place of regular medical advice and treatment from a GP. We recommend all men consult a doctor or health professional for a thorough personal examination on a regular basis.

© For permission to reproduce pages from this magazine, please contact Foundation 49 at admin@49.com.au. Foundation 49 may authorise the reproduction of pages from this magazine for personal and educational use only. Commercial copying, hiring or lending will not be permitted.

Patron: The Governor of Victoria
Professor David de Kretser AC





The low-down on big Jim

Jim Stynes has had an amazing football career. He has many records and awards to his name, and was Victorian of the Year in 2003. He won the Brownlow Medal in 1991, and was Melbourne Football Club Best and Fairest in 1991, 1995, 1996 and 1997 equaling the club record. One of his greatest achievements was to play 244 consecutive games between round 17 in 1987 and round 4 in 1998 when his hand was broken. This was yet another record for Jim! Here we chat with Jim and find out a bit about the past, and what he is up to these days.

Can you share a bit of family history with us?

Sure, I was born in Dublin, Ireland and the oldest of six children, three boys and three girls. The great thing is that now we all live in Australia.

How did you end up in Australia?

The Melbourne Football Club recruited me during a clinic in Dublin back in October 1984. They chose two of us from a group of 24 18yr olds. We were young blokes from around the country who had played Gaelic football at representative level that year.

When did you first pick up a football and why Aussie Rules?

At that clinic in 1984 was the first time I ever handled an Aussie rules ball. One of the Melbourne Football Club scouts invited me to attend the clinic, and I suppose I was lucky I wasn't doing anything else that weekend as I was only asked the week before!

How hard has it been transitioning from being a top level player, into presidency of a footy club?

I finished my playing career in 1998. It has been full on since I stepped into the role, I have been learning a lot on the move, it has been amazing how many first time moments I have experienced since last June. Many have been a lot of fun and many extremely intense. The hardest part is the scrutiny the media have on every word you speak no matter where you are or who you are speaking to. I have had to learn to keep a very intimate counsel along the way.

How do you manage a healthy work / life balance in such a high profile and demanding role?

With difficulty but I try to plan out my weeks so there is balance in there, and say no when it looks like the balance will be out of whack. Trusting others to step in is very important in keeping balance.

Do you carry any footy injuries from your playing days?

Yes, a back and ankle that prevents me from any exercise that means running or walking more than 100meters.

Do you have any other interests on top of the Melbourne Football Club?

I coach my daughter's under 7's basketball team, and the work I do with young people, as part of the Reach Foundation, is another major passion of mine.

What do you do to stay fit and healthy these days?

I go to the gym twice a week and do some weights and pilates.

When was the last time you had a check up with your GP?

I am fortunate to have the club doctor regularly keeping an eye on me.

Where to from here?

I am looking forward to seeing the young players start to mature, and Melbourne winning games of football.

Visiting the GP – easier than you think!

Many men don't want to bother a doctor with trivial or potentially embarrassing problems and just keep putting off a visit to a GP. Don't be one of them! Don't bury your head in the sand – delaying treatment or ignoring symptoms can lead to serious and preventable conditions developing.

Planning ahead will help you make the most of your visit to the GP, and here are a few pointers to make your visit as useful, easy and quick as possible.

Booking the appointment

Find a GP you are comfortable talking to. If you don't have one, ask a friend or family member to recommend one. If that doesn't work, have a look at www.healthengine.com.au to find one in your local area. If you are not happy with your GP, don't give up, try another one. Book a long consultation if you have a number of things to cover with your GP, so you are not rushing through your visit. You might want to find one with after hours opening times so it doesn't conflict with work commitments.

On the day of the appointment

Call ahead to see if your GP is running on time. Take all your medications with you to the GP, including herbal remedies and vitamins. Write down a list of things you would like to discuss with the GP, this will help you cover the essentials in your visit.

At the appointment

If you take drugs such as marijuana or heroin, it is important to let your GP know. These drugs can interfere with other medications you may need, and your GP can make sure you get help to quit if you want to.

Start your appointment with the thing that is most important to you, or causing you the most concern, you won't want to find you have run out of time before you get to cover off on your major issue. Be really honest with your GP, the best way they can help you is if all the facts are out in the open. There is nothing your GP hasn't heard before, no matter how strange it sounds to you.

Tell the GP about your family history of disease and illness. That means your parents, brothers and sisters, and any condition that effects other family members. Ask about any screening tests you should be having, such as for bowel, prostate and skin cancer. This is also the time to tell your GP if you have been feeling down or depressed, your GP can help with a referral to a counsellor.

Ask all the questions you want, this is the time to get the information you need from a 100% reliable source.

After the appointment

If you need a follow up appointment, make it on the way out, otherwise it can be easy to forget. Book in as soon as you can for any blood tests, x-rays, scans etc that the GP has ordered for you, same as before, they can be easy to forget!! And make sure you follow up the results of these tests with your GP.

Keep all your results in one place so they are easy to find. Keep a record of any readings, such as blood pressure and cholesterol.

Have an annual check up

It is a great idea to have an annual check up at the same time each year. Maybe around your birthday or Father's Day, these dates could be a trigger for you. At this appointment talk to your GP about lifestyle choices that will maximise your health, such as weight control, quitting smoking, blood pressure, cholesterol and glucose readings.

Remember this is your time and your health, so at your appointment be confident, honest and open, the doc is there to help and support you.



Please take a minute to
answer these 15 questions
as truthfully as you can!

1 minute men's health check!



	Yes	No
Have you had your blood pressure checked in the last 6 months?	<input type="radio"/>	<input type="radio"/>
Have you had your cholesterol checked in the last year?	<input type="radio"/>	<input type="radio"/>
Have you had your blood sugar checked in the last year?	<input type="radio"/>	<input type="radio"/>
Have you spoken to your doctor about prostate cancer?	<input type="radio"/>	<input type="radio"/>
Do you deliberately limit the amount of fats in your diet?	<input type="radio"/>	<input type="radio"/>
Have you spoken to your doctor about bowel cancer?	<input type="radio"/>	<input type="radio"/>
Are you happy in general, and not too stressed?	<input type="radio"/>	<input type="radio"/>
Are you a non-smoker?	<input type="radio"/>	<input type="radio"/>
Do you have satisfying sex?	<input type="radio"/>	<input type="radio"/>
Do you do 30 minutes of moderate exercise 5 days per week?	<input type="radio"/>	<input type="radio"/>
Do you have at least 3 alcohol free days per week?	<input type="radio"/>	<input type="radio"/>
Do you eat 5 or more serves* of fruit and vegetables per day?	<input type="radio"/>	<input type="radio"/>
Have you had your skin checked in the last year?	<input type="radio"/>	<input type="radio"/>
Have you ever been for a general men's health check up when you were not sick?	<input type="radio"/>	<input type="radio"/>
Do you feel ok about getting help when you feel down or blue?	<input type="radio"/>	<input type="radio"/>

If you answered "No" to any of these questions, it is important for you to follow up that question or questions with your regular GP. If you don't have a regular GP, you can look one up in the phone book, or ask a friend to recommend one, or go to www.healthengine.com.au to find a GP in your local area.

You might like to take these questions to your next visit to the doctor and discuss them with your GP.

*A serve of fruit is:

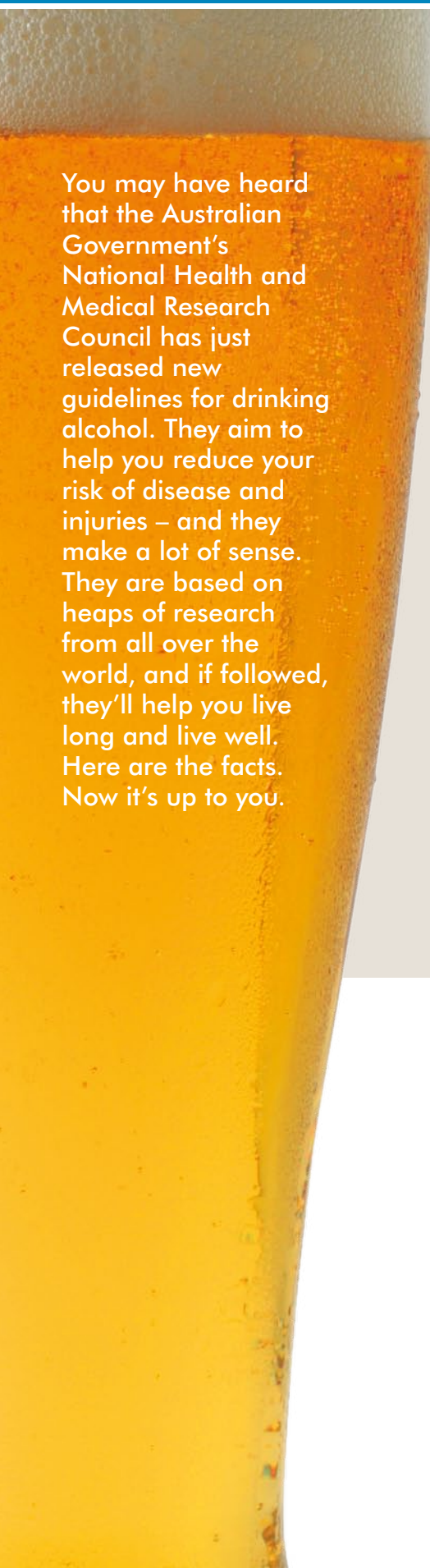
1 medium piece, eg, apple, banana, orange, pear
2 small pieces, eg, apricots, kiwi fruit, plums
1 cup diced pieces or canned fruit or 1/2 cup juice
Dried fruit, eg, 4 dried apricot halves,
or 1 1/2 tablespoons sultanas

*A serve of vegetables or legumes is:

75g or 1/2 cup cooked vegetables
75g or 1/2 cup cooked dried beans, peas or lentils
1 cup of salad vegetables
1 potato

(*Aust Government Dept Health and Aging 2005)

New drinking guidelines



You may have heard that the Australian Government's National Health and Medical Research Council has just released new guidelines for drinking alcohol. They aim to help you reduce your risk of disease and injuries – and they make a lot of sense. They are based on heaps of research from all over the world, and if followed, they'll help you live long and live well. Here are the facts. Now it's up to you.

How do you measure up?

Guideline 1

Reducing the risk of alcohol-related harm over a lifetime

The lifetime risk of harm from drinking alcohol increases with the amount consumed. For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.

Guideline 2

Reducing the risk of injury on a single occasion of drinking

On a single occasion of drinking, the risk of alcohol-related injury increases with the amount consumed. For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion. Each drinking occasion also contributes to the lifetime risk of alcohol-related harm.

Guideline 3

Children and young people under 18 years of age

For children and young people under 18 years of age, not drinking alcohol is the safest option.

A Parents and carers should be advised that children under 15 years of age are at the greatest risk of harm from drinking and that for this age group, not drinking alcohol is especially important.

B For young people aged 15–17 years, the safest option is to delay the initiation of drinking for as long as possible.

Guideline 4

Pregnancy and breastfeeding

Maternal alcohol consumption can harm the developing foetus or breastfeeding baby.

A For women who are pregnant or planning a pregnancy, not drinking is the safest option.

B For women who are breastfeeding, not drinking is the safest option.

Further issues to consider

There are a number of additional factors that influence the risk of alcohol related harm, including:

- specific situations where alcohol has the potential to endanger life; for example, when drinking is combined with activities such as driving, operating machinery or supervising children
- groups that can be at increased risk if they drink alcohol; for example, young adults (18–25 years), older people (60+ years), people with a family history of alcohol dependence, and people who use drugs illicitly
- people who may need to seek professional advice about drinking; for example, people taking medication, people with alcohol-related or other physical conditions, and people with mental health conditions.

For more information about the new guidelines, go to

http://www.nhmrc.gov.au/publications/synopses/_files/ds10-alcohol.pdf

Australian Guidelines To Reduce Health Risks from Drinking Alcohol March 2009, Copyright Commonwealth of Australia reproduced by permission. For more information about drugs and alcohol, go to The Australian Drug Foundation www.adf.org.au

out now!

What's a standard drink?



1.1

285ml
Full Strength
4.8% Alc. Vol



0.6

285ml
Low Strength
2.7% Alc. Vol



1.6

425ml
Full Strength
4.8% Alc. Vol



1.4

375ml
Full Strength
4.8% Alc. Vol



0.8

375ml
Low Strength
2.7% Alc. Vol



1.6

150ml
Average Restaurant
Serving of Red Wine
13.5% Alc. Vol



1

100ml
Standard Serve
of Red Wine
13.5% Alc. Vol



1.4

150ml
Average Restaurant
Serving of White Wine
11.5% Alc. Vol



1.4

150ml
Average Restaurant
Serve of Champagne
12% Alc. Vol



7.5

750ml
Bottle of Champagne
12.5% Alc. Vol



1

30ml
High Strength
Spirit Nip
40% Alc. Vol



22

700ml
High Strength
Bottle of Spirits
40% Alc. Vol



1.8

330ml
High Strength
RTD
7% Alc. Vol



1.5

375ml
Full Strength
Pre-mix Spirits
5% Alc. Vol



2.1

375ml
High Strength
Pre-mix Spirits
7% Alc. Vol



An ex-police officer's story:

My battle with booze and depression

Paul Walshe had a policing career to which many aspire. During 17 years in the police force, he developed policing policy, worked with the American FBI, headed up taskforces and made the rank of Detective-Sergeant.

Midway through Paul's career – in the mid 1990s – he developed mental health problems. Instead of confiding in someone, he attempted to block out these feelings with alcohol. In 2002, he was diagnosed with Obsessive Compulsive Disorder and severe depression. This is his story.

When did you first notice something was not right?

It was about mid-1998. I knew something was going on because I was feeling extremely angry. I would get home to my wife and two-year-old son and because there were toys lying around, I would shout things like 'what the hell have you been doing all day?'

Why did you begin drinking more?

Back then, in the police force, there was much more of a drinking culture. Pretty soon it started every night. As the drinking escalated, so did the anger. I didn't see the alcohol as an issue – I justified it as being social with the blokes from work.

How did the alcohol and anger affect your home life?

I'd come home sometimes drunk at 6.30pm and fall asleep on the couch. I'd be sitting in the lounge and my young son was just being a normal two-year-old playing noisily on the floor boards and I would have clenched fists and be boiling up inside and seriously thinking I was going to do something to him. I started staying away from home which involved more drinking.

When did your mental illness really start to take hold?

I wasn't sleeping. Almost every night, I'd wake at 4am and there were times when I would slip out and go to work. I seriously contemplated suicide because I felt like someone else was controlling me. I was offered antidepressants, but I said no because I thought of them as 'a weakness drug', whereas alcohol was more of a 'bloke drug'.

When was your lowest point?

At the height of it, I spent nine weeks on a mixture of medications in a mental health facility. My most serious suicide attempt was at the end of January 2004. In the end, I began a course of antidepressants that worked for me and resigned from my position with the police under a medical disability Work Cover claim in September 2007. Since finishing up work, it's like the world has gone from black and white to colour. The relationship I have with my sons, who are 9 and 12, is just incredible. Life in general is like I never ever thought it could be.

Looking back, what would you have done differently?

If I'd have sought help early rather than reaching for a cold bottle, it would not have gone on for as long and wouldn't have become as bad as it did. People were bending over backwards to help me but I didn't fully embrace it until I was very close to taking my own life. Not to mention the damage the alcohol had done to my life along the way.

Alcohol and depression: what is the link?

It is no secret that Australians love a drink. The Australian Health and Welfare Institute estimates 1.3 million Australians indulge in a tipples every day. The World Advertising Research Centre research shows the average Australian drinks 7.8 litres of alcohol per year.

The facts

- It is common for men to attempt to cover up the symptoms of depression with alcohol and/or drugs.
- Latest research from the Australian Bureau of Statistics shows men are twice as likely as women to have a substance use disorder.
- Research shows up to half of those who commit suicide have a high amount of alcohol in their bloodstream.
- Alcohol is linked with a high prevalence of social phobia, anxiety disorders, bipolar disorder and schizophrenia.
- If you have an alcohol problem, you are twice as likely to have depression as well.
- If you have depression, you are four times more likely to abuse alcohol.
- One in 10 people with depression and alcohol problems report not being able to function at all for an average of seven days a month.

Sources: ABS National Survey of Mental Health in Australia 2007, *beyondblue: the national depression initiative*, National Health and Medical Research Council's *Australian Guidelines to Reduce Health Risks from Drinking Alcohol* 2009.

Over the past decade, awareness that prolonged, heavy drinking can cause liver and brain damage, has grown substantially. While these consequences of alcohol use are well-known, there is another potential serious outcome of drinking too much, too often: depression.

Clinical Adviser to *beyondblue: the national depression initiative*, Associate Professor Michael Baigent, says that if you have an alcohol problem, you are twice as likely to have depression as someone who drinks responsibly. If you have depression, you are almost four times more likely to have a drinking problem.

"It's common for men to use alcohol to try to make themselves feel better, but if they're depressed, drinking can make a bad situation worse," he said. "Intoxication and depression can be a very dangerous combination which puts a person at increased risk of suicide.

Research shows half of the people who die by suicide have measurable amounts of alcohol in their bodies."

Dr Baigent said the best first step to addressing a drinking problem or depression – or both – is having a chat to your doctor about it.

"When talking to a doctor, men need to be frank and honest about how much they drink," he said. "Response rates to depression treatments improve if alcohol dependence is also treated. Both conditions can be, and ideally should be, addressed at the same time."

To find out more about depression, anxiety and substance use disorders visit www.beyondblue.org.au or call the *beyondblue* information and referral line on 1300 22 4636 (cost of a local call from a landline). You can download, or order, *beyondblue* Fact sheet 9 – Reducing Alcohol and Other Drugs.



When someone close to you has a drinking problem

What Can I Do?

Family and friends are often the first to recognise problems arising from someone's alcohol use, but may not know what to do about it. While everyone's situation is different, here are some ideas that may help.

Maintain open and honest communication

There is no easy way to start talking about drinking problems but one of the most important steps in bringing about change is to acknowledge what is going on and to explain how you feel to the person with a drinking problem.

- Choose an appropriate time to talk. Try to remove any distractions, such as the telephone and avoid talking about alcohol use while the person is under the influence of alcohol.
- Try to remain calm and logical and stick to the point you wish to get across to them. Refuse to be drawn into an argument.
- Be clear and honest about your feelings. It is important that a person hears your concerns. Give concrete examples of how their drinking is affecting you. Let them know that it is not them as a person that you don't approve of, but particular behaviours.

- Use "I" statements instead of "you" statements. For example, try "I'm really worried about..." instead of "You should..." or "You must...". This may help prevent a defensive response from the other person by indicating that they are your feelings.
- Use open questions to allow a person to explore their thoughts and feelings. For example, ask for their thoughts on their alcohol use, if they see any problems or potential risks and how they think these can be addressed.
- Listen carefully and actively without being judgemental. Allow and encourage the person you're concerned about to speak in full sentences and to finish what they have to say without interruption. After they have finished speaking, repeat to them what you have heard and allow them to clarify any misunderstandings.

Be informed

Gaining as much information as you can will help you to better understand and cope with the issues involved. It will also help you to decide what assistance you can provide and what other assistance is available.

- Having an open and honest discussion with the person with the drinking problem can help you to understand whether they see their drinking as a problem. Do they want to change their behaviour? Do they want help? What type of help do they want? What type of support do they find the most helpful?
- While gaining as much information as you can it is also important to respect a person's privacy. For example, is it worth searching through someone's room or belongings if it means potentially losing their trust?
- Learn more about the effects of alcohol and what to expect when a person who is dependent on alcohol cuts back or stops drinking.
- Investigate treatment options and what support services are available. A combination of treatments is often recommended including withdrawal treatment and follow-up counselling.

Your local alcohol and drug information service can provide you with information, counselling, advice, support or referral to services.

Learn more about the effects of alcohol and what to expect when a person who is dependent on alcohol cuts back or stops drinking.



Support and encourage positive behaviour

Supporting and encouraging positive behaviour can be more effective than focussing on negative behaviours.

- Encourage the person to develop supportive networks and to place themselves in positive environments.
- Congratulate them when they achieve their goals. If they slip up, look on it as a temporary setback and encourage them to keep going. Withdrawal may not be successful with the first attempt. With each attempt a person learns more about themselves and their relationship with alcohol, which can be used to help a person progress with future attempts.
- Help them to maintain motivation by regularly reviewing their achievements and the reasons that they are trying to change their drinking patterns.

Negotiate and set guidelines

As well as maintaining open and honest communication about how you are feeling, it is also important to talk to the person with the drinking problem about what you expect from each other.

- What level of support and commitment are you willing to provide? Can they call you at any time to discuss issues or are there certain times when they can't call you? What about financial support?
- Agree on the behaviours that are acceptable and those that are not. You may agree that your house will be an alcohol-free zone or that if a person is driving they will not drink any alcohol.

You may also agree on consequences if these guidelines are broken. It is important that consequences are enforced.

- Sometimes family and friends try to protect the person who is drinking from the consequences of their behaviour by making excuses for them, paying their bills, or apologising for them. Explaining to the person that while you will support them, you will not support their alcohol use and won't be making excuses for them anymore, can help them face up to the consequences of their drinking.

For more information and advice call 1300 368 186 for Family Drug Support. Or the Australian Drug Foundation helpline 1300 85 85 84.

1 in 5 people in Australia will experience depression in their lifetime.

If it's not you, maybe it's someone you know.

Find out about depression, what to do about it and how to help someone at www.beyondblue.org.au or phone 1300 22 4636.

For counselling or urgent assistance call Lifeline on 13 11 14 or Mensline Australia on 1300 789 978



Fast facts

- Foundation 49 is an initiative of Cabrini Health
- It aims to help all men over 20 years of age – of all cultures and socio-economic backgrounds
- Widespread screening and health promotion are key goals
- We believe supporting men to take control of their health is vital.

Men at work

Call us to find out about a straightforward and practical health assessment program catering for *all men* in the workplace. We provide individuals and employers with valuable feedback on health risks, recommendations on well-being initiatives and useful health information. Each participant receives an individual health report. Call Simon on 0430 387 744.

Foundation 49.
Promoting Health
Awareness in Men

183 Wattletree Rd,
Malvern, 3144

Tel: 03 9508 1567
Fax: 03 9508 1071
Email: admin@49.com.au
Web: www.49.com.au

Foundation 49
a Cabrini Health Initiative



This magazine is sponsored by
*beyondblue: the national depression
initiative* www.beyondblue.org.au
Info line 1300 224 636



beyondblue
the national depression initiative
www.beyondblue.org.au

Five minutes with... Tommy Hafey footy legend!



Tommy Hafey is a football legend. He has been involved in football for over 40 years, and at 77 he is still fit and more active than many people decades younger than him. The teams Tommy coached made it to 10 grand finals and four premierships. In his first year coaching Collingwood, he took the team from the bottom of the ladder to the grand final – a great achievement!

What can you tell us about your coaching career?

I have coached four AFL teams: Richmond, Collingwood, Geelong and Sydney Swans. I am one of only three coaches to have coached over 500 VFL/AFL games.

What has been your own greatest sporting achievement?

Being connected with a game I love for over 40 years, in playing, coaching and commentating. I am mad about people playing sport, and it is a great way to make friends and stay active.

Do you have an interest in health?

Yes, I have always wanted to be healthy. I have never had an alcohol drink or smoked cigarettes. Fitness is so important to health and I have a check up with my GP twice a year.

Is keeping healthy a priority for you?

Always. I exercise every day. My daily routine is to run 7 – 8 kilometres, swim, do 200 push ups and 700 sit ups. Doesn't matter what the weather is, 365 days of the year I exercise.

The best health tip you have been given?

Be a "do-er" not a "gun-er"! No excuses, just do it.

Have you had any health challenges?

I have been really lucky; I have only had a couple of things when I was younger, like rheumatic fever when I was a teenager. I haven't had much in the way of footy injuries, I got through my footy career pretty well really! Nothing much troubles me these days from my footy days.

What do you do with yourself these days?

I do lots of speaking engagements. I encourage people to look after themselves, to be active and to be a good role model for others, especially adults for the kids, I try to motivate people. I speak at about 100 schools and 30 men's health nights each year.

How do you de-stress?

I like to spend time with my kids and grand kids, we go to the footy together. I also like to use my wave rider in the surf, that is a great way to relax.

Favourite meal?

I love breakfast! A big bowl of cereal, I put five or six different cereals and fruit in a big bowl and I just love it.

Favourite drink?

Cup of tea, the best drink around, seriously.