

**Astrid - POP, tired and acne rosacea**

D - Come in.

P - Morning.

D - Hi Astrid.

P - You okay?

D - I'm well thank you.

P - Good.

D - Nice to see you.

P - It's only really a quick one; a repeat prescription of the pill that I had, and I'm always dead tired and really cold—it can be the hottest day and I'm quite cold. I don't know if it's because I've got a full-time job, working nine to five, thirty-seven hours a week or... because I have been tested for being anaemic and iron, quite a while ago, but it was fine, there was nothing there, and I've never really changed since then, so I don't know whether it's just...

D - Okay, any other theories?

P - No.

D - No, okay, so the tiredness has been going on for how long?

P - I'd say, just forever.

D - Always been there?

P - Yeah, because when I used to be at school, I used to come home from school, get into bed and go to sleep for an hour, then wake up have tea and whatever, do homework, then go back to bed.

D - Still capable of doing things?

P - Oh, yeah.

D - Activities, sports?

P - Yeah, god, yeah.

D - What sorts of things do you normally do?

P - Well I'm quite lazy, I don't really do any sports, but I'll take the dog for a walk and I work with kids - I'm a nursery nurse, so I'm running around with them and...

D - So you're still able to get out and do things and have enough energy for that, it's just that you're shattered afterwards?

P - Of course I am, it's just that I would come home on a night and be—

D - Is your sleep okay?

P - Yeah, nine times out of ten I would. My partner's in the army, so when he's away I don't sleep.

D - And where does he work?

P - He's based in Catterick, but he's just been to Kenley for seven weeks. And we've just bought a house, so I don't know whether it's just all of that that's making in worse at the minute.

D - Okay, where's your house?

P - Hetton, but we're not even in it yet.

D - Okay. So, a few changes going on then?

P - Yeah, so I don't know whether it's just that that's making me a little bit worse.

D - Sure.

P - Or not. You know, you've seen me before, so you know I worry a lot.

D - Yeah.

P - So I don't know whether it's just...

D - How's the worry at the moment?

P - It's alright...

D - ...ish?

P - Yeah.

D - Okay. Is it affecting the way you live your life at the moment?

P - Well, I had an abortion May last year, and since then, I haven't really wanted to do anything. Like, I still will go out and do stuff, but my whole... my whole look on life's changed - like, I don't want to go out and spend £50 to go out and drink, I'd rather save that fifty pounds and put it towards something else. So, I don't know whether my whole just—has just changed?

D - Yeah, okay.

P - If you know what I mean?

D - Yeah.

P - So, I'd rather just stay in.

D - How's your mood?

P - Alright...

D - ...ish, yeah. Okay, you're a bit upset talking about it aren't you?

P - Yeah. Sorry.

D - We checked your thyroid three years ago, it was normal, so this sensation of feeling cold is probably normal for you, isn't it?

P - Yeah, it is.

D - Your weight's okay, isn't it?

P - I think so, yeah, I never change weight, ever, I'm always exactly the same - I never put on, I never lose.

D - Yeah. If you were going to give me a mood score at the moment out of ten, on average in the last month, let's say - ten's perfect, nought's so bad you would kill yourself - where would you say you were?

P - Oh, god. Nine.

D - So, happy, no thoughts of self-harm?

P - Oh, no, not at all. It's just sometimes when I think about that, I get upset, which is normal.

D - For you, yeah, exactly.

P - Yeah, that's the type of person I am.

D - Any, kind of, residual guilt related to the termination?

P - Yeah.

D - Do you and your partner talk about that?

P - Yeah.

D - So, you're able to speak with your partner?

P - Oh, yeah, we're dead open about it.

D - But it was the right decision at the time?

P - Yeah, it was the right decision at the time.

D - But, just coming to terms with it is taking a bit of getting used to?

P - Yeah. Because it is a life-changing thing, it's a big decision to make.

D - Of course.

P - But at the time, it was the right decision.

D - And it still is the right decision?

P - Yeah.

D - Okay. What were you hoping I would do for you today? Apart from the pill.

P - Just sort of put my mind at rest that I'm alright.

D - Yeah, okay. There's probably not much point in doing additional blood tests, because your periods are fine, aren't they, on the pill that you're on.

P - I'm on the injection at the minute and I've got nothing. I got the injection at the walk-in centre, but I got told the last time that I was at the walk-in centre that I couldn't go back because of my age.

D - For the injection?

P - Yeah.

D - Hmm, okay. Well we give the injection here, if you decide to use it.

P - No, I'm fine with the pill.

D - So, what method would you prefer?

P - Well to be honest, we want to try for a family in the next....

D - So you don't want something that's going to delay your periods coming back, so it's probably better moving on from the injection, isn't it?

P - Yeah, to move to the pill.

D - In terms of the hormone in the injection, it suited you okay?

P - Yeah.

D - Okay, and you're not prone to clots in your legs or lungs or anything like that?

P - No.

D - Okay, have you used the mini pill before?

P - I've had something before, yeah.

D - Cerelle - and that suited you okay when you were using it, didn't have any major issues with it?

P - I think so yeah, just had a bit of a headache, but that was about it.

D - Okay, because you've got a history of migraines, we're a bit cautious about using the normal pill.

P - Yeah, I know, but I haven't had one of them for... forever, really, since the last time.

D - Okay. Well if you're getting bad headaches with the Cerelle we should think about it, but it's not prone to causing migraines or being a risky thing, so if you're happy—you're quite good at taking pills regularly. Should we do that for the contraception?

P - Yeah that's perfect.

D - So, I'll do your weight and your blood pressure today. Skin been okay?

P - Yeah, I got cream.

D - Did it work?

P - It has, and it hasn't.

D - Still getting pustules? It was acne rosacea, wasn't it, that you had before?

P - Yes, yeah, it's just on this side of the face that it would become quite red.

D - So it's a redness more than anything else?

P - Yeah, it's just red and I'm very self-conscious of it.

D - Sure, what makes it red?

P - I don't know, honestly don't know.

D - Who made the diagnosis that it was rosacea?

P - Dr Scott-Batey. He's the only other doctor I'll see; you and himself.

D - You do have underlying pustules related to that, but there may be some emotional component to the flushes, I guess. So, it's not alcohol related, or anything you've noticed?

P - No, I don't drink, really.

D - Right. Some people find that they can flush with red wine or...

P - Dr Scott-Batey said that, yeah.

D - But that's not you, from the sound of things?

P - No.

D - Let's check your weight, do your blood pressure; I'll offer you something else for your rosacea if you're interested.

P - Yeah, that's fine.

D - Kilograms is in red.

P - Oh, I can't see.

D - Okay, fifty-two.

P - Fifty-two. I think that's just the same as always, really.

D - Yeah. If I can just borrow one of your arms... Shall I give you six months' worth of the mini pill?

P - Yes, please.

D - I can give you more, if you need.

P - No, no, that should be fine.

D - Is that all right?

P - Yeah.

D - And is it worthwhile giving you a leaflet about preparing for pregnancy, at the moment?

P - Yeah, please. Because I know it can take a while when you've come off the injection, because it has to get out of your system.

D - So, this is an every-single-day pill, if you've not taken anything in the last twenty-four hours you've got, theoretically, no protection.

P - Yeah. This is still—my injection's still up until the eighteenth.

D - Let's overlap, just to get you used to taking it again.

P - Yeah. Was that alright?

D - Yes, your weight and blood pressure were perfect. Nothing's one hundred percent, but if you're using it regularly, it's pretty reliable. I'll give you a leaflet about preparing for pregnancy. Now, there is a new-ish treatment out for acne rosacea that seems to be quite effective; the rosacea may well be down to a sensitivity to a mite that's in the skin anyway - can't cure it, but oftentimes, there's a new cream that can get rid of this mite temporarily and make you much less prone to getting the pustules. So that might be helpful - still worthwhile avoiding anything that causes you to flush, because that can trigger your rosacea off. So, we'll give you an anti-mite treatment and see how you get on with that, if it's helpful, you can have it again if you need to.

P - Yep.

D - So, preparing for pregnancy leaflet, there you are. So, because it's a relatively new treatment, I haven't encountered anybody having any problems with it, let me know if it doesn't suit you.

P - Yep.

D - If you could let me know if you think it's helpful just so that I know for future reference.

P - Thank you.

D - You're welcome. It's not cheap, this stuff, so... I'd recommend that you put it on after your evening meal, just once a day. It'll take a couple of weeks before you start to see a response to it, potentially might irritate you in the first instance, but if it's majorly irritating, stop using it and let me know - it may take as long as three months before you see a response to it, if there's no response after three months, let me know.

P - No problem.

D - Have I missed anything?

P - No, I don't think so.

D - Do you need anything clarifying?

P - No, I'm fine I think, just that was...

D - So if the tiredness and coldness are getting on top of you more than usual, by all means come back, but I think they're probably normal-ish for you, aren't they?

P - Yeah, they are. It's just a few people said, 'You're always in bed, you always don't want to do anything', but some people don't know what's happened over the last year, so.

D - Yeah.

P - I think it's just that, really.

D - If your energy levels are getting in the way of you doing things, let me know, or if you're finding that your churning things over a bit too much, then let me know.

P - Okay, no problem, thank you very much.

D - You're welcome.