



## Message from the BLMA President

*Dr Hasthika Ellepola*  
*MBBS MD FSLCOG FRANZCOG*

Welcome to this, the first edition of Synapse for 2023. We hope you enjoy the contents and I look to receiving feedback from you.

The Brisbane Local Medical Association had a very busy year in 2022 hosting a number of high level events for our members and which I will recap. Unfortunately, it was necessary to postpone our February 2022 event due to the Omicron surge that we were experiencing at that time. Our first event of the year was held in late March 2022 in conjunction with our Annual General Meeting. We had further educational meetings in May, July, September and November with engaging topics in the specialties of Urology, Obstetrics and Gynaecology, Innovations in Medicine, PET and CT scans and Fertility.

My thanks and gratitude go to all of our speakers and presenters who have made our meetings interesting and educational:  
Dr Anojan Navaratnam, Dr Phillip

Hall, Dr Paul Scott, Dr Anubhav Sarikwal, Dr Zubair Kahn, Dr Christoph Lehner, Dr Tiarna Ernst, Jessica Morris; Dr Stephen Elgey and Dr Maria Boulton. Thank you also to the hard working Management Committee that I am privileged to work with, to our numerous sponsors and to Renee O'Brien, our Secretariat. They do an amazing job promoting the BLMA and ensuring we secure interesting topics and sponsors for our member educational meetings.

In 2022, we also held two workshops that tailored to the needs of our growing Doctors in Training members. In March 2022, we held a basic laparoscopic workshop at the Clinical Skills Development Centre at Herston. This was followed by another Doctor in Training workshop focusing on Leadership skills in May 2022. We look forward to holding more workshops for our Doctor in Training members this coming year, so watch this space!

Our end of year educational dinner meeting was held in November 2022 at The Greek Club, South Brisbane. The event was well attended to near capacity! Thank you to City Fertility for their sponsorship and presentations on fertility by Dr Stephen Elgey, Dr Tiarna Ernest and Jessica Morris, Senior Embryologist. We also extend thanks to the AMA Queensland President, Dr Maria Boulton, who once again provided our members with an update on State and Federal AMA Advocacy.

2023 will prove to be another year of growth for the BLMA as we strive to continue to connect Doctors from the greater Brisbane area, holding our meetings on both sides of the river in turn. Should you have any colleagues who would like to be a member, please direct them to the website ([Brisbanelma.org](http://Brisbanelma.org)) or contact the Treasurer, Dr Andrew Cronin on 0401 200 896.

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Many thanks to QML Pathology couriers for distributing our newsletter throughout Brisbane.



Visit our website  
[brisbanelma.org](http://brisbanelma.org)

Keep up to date with latest news and BLMA events at your fingertips!

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## Issue 7 | 2023 Newsletter

**Deadline will be Monday 15 May 2023**

- ▶ Would you like to comment or suggest articles to be published?
- ▶ What would you like to see in the newsletter?

Our circulation via email, post and online reaches medical practitioners all over Brisbane!

**Contact:** Dr Dilip Dhupelia  
**Email:** dhupelia@bigpond.com



## Are You a Member?

If you are not a member, please complete the application available on our website:

**brisbanelma.org**

**Enquiries:** Andrew Cronin  
 dr.andrew.cronin@gmail.com

Are you listed on the Members Only Directory on our website? Are your details correct?

**Directory form available on the website.**

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BLMA membership entitles you to:

- ▶ Attendance at our bi-monthly education events, incorporating dinner and great networking opportunities, and featuring speakers to inform on the latest advances in medicine or policy and advocacy updates that affect our members
- ▶ Ensuring high quality topics that qualify for CPD requirements;
- ▶ Attending educational workshops for Doctors in Training for clinical skills and knowledge upskilling;
- ▶ Our newsletter 'Synapse' which is circulated six times per year, including free classified advertisements for members, as well as a password protected listing in the online BLMA Member's Directory for ease of referrals to colleagues and for networking.

The 2023 BLMA Annual General Meeting was held on Tuesday 28 February 2023 at the Sofitel Brisbane Central just prior to our first Members Educational event of the year. Thank you to the membership for re-electing me as President. We have yet another experienced and motivated management committee with whom I look forward to working with this year. Our new Management team is listed on Page 2 of this edition.

The AGM was followed by engaging presentations on "Common ENT conditions in General Practice" from AMA Queensland, Immediate Past President, Professor Chris Perry and Dr Matthew Remedios on "Plugging in the Gaps in Endoscopic Haemostasis."

Lastly, my aim as President of BLMA is to ensure that we are bringing our readers of Synapse topics of interest. If you have any suggestions for topics that you would like to see featured in future Synapse editions, please email us at [info@brisbanelma.org](mailto:info@brisbanelma.org).

Thank you once again to our authors and advertisers who make our newsletter the success that it is. We welcome articles and advertisements from our BLMA members. We are now accepting contributions to our next edition of Synapse.

Renee will be going on maternity leave at in late March. In her absence, her colleague Megan Mylne, will be the newsletter coordinator contact. Should you wish to submit an article or advertise in this edition, please contact our newsletter coordinator, Megan Mylne ([info@brisbanelma.org](mailto:info@brisbanelma.org) or [m.mylne@amaq.com.au](mailto:m.mylne@amaq.com.au)).



**Dr Amelia Sah**  
BLMA Committee Member

## Meet the BLMA Committee

### Committee Member – Dr Amelia Sah

Dr Amelia Sah graduated with her MD from Griffith University in 2019 after completing a BSc (Hons) at UQ. She is currently a PHO in Obstetrics and Gynaecology at Logan Hospital. She has an interest in advocacy for doctors in training as well as all things women's health. In her spare time she loves cooking and spending time at the beach with friends and family.

## REDCLIFFE LOCAL MEDICAL ASSOCIATION NEWSLETTER

Redcliffe LMA produces a similar newsletter.  
For full details re advertising go to their website: [www.rdma.org.au](http://www.rdma.org.au)  
Email: [RDMAnews@gmail.com](mailto:RDMAnews@gmail.com)



**phn**  
BRISBANE SOUTH

An Australian Government Initiative

## The power to change a child's life

To break cycles of systemic inequity and inequality, children and families in Brisbane south need strong and sustainable early childhood development supports. Our First 2000 Days approach has the power to change a child's life, through health, education and community working together.

In Brisbane south, children from less-advantaged communities are at higher risk of developmental issues and the ongoing impacts of systemic inequity and inequality, because of reduced access to the health care system. They are less likely to access the services that they need and the result is that many children start school not ready.

With what we now know about early childhood development, systemic inequity and inequality cannot be allowed to continue.

In a significant new initiative, Brisbane South PHN, education and health partners, alongside Logan community leaders have collaborated on a First 2000 Days approach to early child development.

'The value is around how we collaborate effectively as partners to

look at the whole child; particularly between health, education and our community partners,' explained Rebecca Minter, Manager Early Years Improvement, Early Childhood Education and Care, Queensland Department of Education.

**'We are not just looking at children from an individual lens; we are looking at how we support children holistically,' she said.**

'Initiatives within the First 2000 Days approach provide a soft entry point to have conversations about early childhood development with families,' Rebecca added.

With strong emphasis from both levels of Government—including the Federal Government's *Early Years Strategy* and Queensland Government's *Advancing Queensland Priorities – A Great Start for all Children* whole of government strategy—philanthropic and research partnerships have also sought to improve policy, systemic responses and investment into integrated early childhood development supports that work.

'A First 2000 Days approach enables us to work together in ways that

are so much bigger than what we could achieve individually,' explained Fran Bugden, Manager, Child and Youth Program Development and Coordination, Brisbane South PHN.

'If we wait until children turn up at school to identify developmental issues, we've missed a really critical period in the early years to support their brain development.'

She continued, 'to see long-term meaningful change, we have put our strategies, policies and research together into action, to ensure children can do as well as possible when they reached school. This isn't achievable through individual programs alone.'

Essentially within the project we are supporting families to identify concerns and to approach their GP to discuss these concerns. The GPs can then write any referrals that need to be actioned. Resources have been created to support GPs to learn more, and feel more confident, about referral pathways. Philippa Calabro is our human resource who is available to speak with GPs and liaise with practice staff around Child Health Pathways.



**Dr James Collins**  
BLMA Committee Member



## GP Liaison Officer Update: Brisbane North PHN & Metro North HHS

*By Dr James Collins, General Practice Liaison Officer, Metro North HHS & Brisbane North PHN*

Contact: [mngplo@health.qld.gov.au](mailto:mngplo@health.qld.gov.au)

### Virtual Emergency – an alternative to emergency and supporting GPs

[Virtual Emergency](#) is available to support GPs who need to talk with a dedicated emergency physician to provide an alternative to attending the emergency department. It's available 7 days a week until late. For more information go to the link above.

### My Health Record – Access to your patient's public & private results in one place

Over 90% of patients have a My Health Record (MHR) in Queensland. MHR is a central repository of all health information from the public hospitals, private pathology & radiology providers which are accessible to GPs, private specialists and the patient.

[Queensland Health \(My Health Records\)](#) have been automatically uploading public hospital pathology

& radiology results, discharge & emergency department summaries and discharge medication record for a number of years.

Now community pathology providers are uploading results (automatically at QML & Mater Pathology) as soon as the results are available (your patient can access after 7 days). If using Sullivan Nicolaidis Pathology (SNP) please reach out to arrange [SNP e-orders](#) to upload if not already signed up.

GPs and private specialists can upload a patient's shared health summary or event summary to make caring for patients easier.

My Health Record have a [Health Professionals Page](#) or visit [My Health Record Resources](#) on how to use MHR and set it up for both GPs and private specialists

Anyone can access their own My Health Record by going online or even easier view using an approved app listed.

If you need help with signing up contact Admin Integration at Brisbane North PHN **administration**. [integration@brisbanenorthphn.org.au](mailto:integration@brisbanenorthphn.org.au)

### Have GPs moved to/from your practice in the past 12 months?

To help improve timely communication, it is important that Queensland Health hospitals are aware if a GP has moved practice but also if your practice is able to receive electronic communication with Medical Objects, Health Link etc.

The STS address book form is the Queensland Health GP Address Book, used to know where GPs are based so that information is sent to the correct practice. This is especially important at the start of the year when GP registrars may be moving to other practices. It also allows you to update your preferred electronic communication method.

# Partnerships the key to deliver community health and wellbeing outcomes for Logan

It's no secret that the City of Logan is booming. It's forecast that by 2036, its population will soar to some 522,000 and be home to 53,000 new jobs.

It's also the centre of the Queensland Government's \$134 billion investment in Southeast Queensland.

But this investment must be targeted not just on hard infrastructure – like road and rail – but also the critical social and health infrastructure.

Because as Logan continues to boom, the health and community facilities that provide essential services for its day-to-day activities become increasingly important.

We know the best-planned communities comprise a thriving mix of residential homes, schools, shopping centres, businesses and health precincts, and recreational facilities. And Logan is no different.

But the government can't – and shouldn't – do it all.

Instead, ensuring our communities have access to critical services and infrastructure is a collective responsibility of government, community, and industry.

But to get there, we need a collaborative approach because today's economic, demographic, and workforce challenges pose new questions and require new ways of thinking and working.

First, healthcare infrastructure requires partnerships with private operators.

Across the country, as demand for services continues to surge, healthcare infrastructure and services spending increases yearly.

As a result, there is a clear opportunity for private partners and operators to work with the government in the funding, development, and delivery of these critical services.

It's already happening, but we can do it better.

Australia's private healthcare providers currently perform two out of three elective surgeries in Australia, nearly half of all heart surgeries, three out of five acute surgeries, and three in four eye surgeries.

At Australian Unity, we're proud of our role in financing and delivering private healthcare across Australia.

Our \$3.36 billion Healthcare Property Trust – launched in 1999 – owns a portfolio of 97 high-grade hospitals and medical clinics.

And in Logan, we're proud to invest \$150 million in Meadowbrook Private Hospital. The hospital's first stage will consist of between 60 and 90 inpatient beds, up to nine operating theatres, 60 specialist consulting suites, onsite pathology, and a large imaging centre.

Meadowbrook Private Hospital will be situated opposite Logan Hospital and will be operated by Matilda Health Care - a developer and operator of best-in-class boutique Australian private hospitals that provides premium in-patient care



and day programs that foster health and wellbeing in a "hotel-like" health care setting.

Second, hospitals need clinical partnerships beyond the acute setting.

We understand the determinants of health are social, economic, physical, and environmental, and we know that for hospitals to deliver the best outcomes, they need to be integrated with a variety of primary care providers.

It's why, months before officially opening, the Meadowbrook Private Hospital team is embedded in



the community, building strong relationships across the Local Health District and with the Brisbane South Primary Health Network.

Last, we need partnerships that support clinicians.

Good healthcare delivery is not just about bricks and mortar and flashy hospital buildings. Instead, healthcare infrastructure delivers the best results when buildings, services, and the workforce are in sync.

The strongest healthcare outcomes come from the best clinicians working across multidisciplinary teams. Recruiting and retaining

these clinicians is a key priority for Meadowbrook Private Hospital.

It's why we're focused on forging long-term relationships with local health and training institutions – such as Griffith University – to ensure we have a strong pipeline of emerging talent.

And, we're investing in developing the surrounding medical ecosystem beyond the hospital - like onsite retail and childcare - to ensure that our 400 staff will have the supports they need to do their job, have an enjoyable lifestyle, raise their families, and remain part of the community long-term.

Through working together, we can ensure all Queenslanders have access to the vital healthcare infrastructure our growing communities need.

*Dr Harry Pannu is Principal of Matilda Health Care and Tim Atkin is the Project Leasing Manager at Australian Unity. [drharrypannu@matildahealthcare.com](mailto:drharrypannu@matildahealthcare.com); [tatkin@australianunity.com.au](mailto:tatkin@australianunity.com.au)*



## *Invitation*

# Three leading doctors share their insights on palliative care

**'It's the personal dimension that is going to affect the way our patient approaches death'**

With the introduction of Voluntary Assisted Dying (VAD) in Queensland, mounting workforce pressures, and the Royal Commission into Aged Care Quality and Safety, the question of how to deliver quality at-home palliative care has never been more pertinent for primary care providers.

To provide GPs, practice nurses

and managers with up-to-date knowledge, three leading physicians with specialist knowledge in palliative care are sharing their valuable insights at an information evening for primary care teams on supporting palliative care patients at home.

Dr Kylie Norris, General Practice Liaison Officer at Brisbane North

PHN and Metro North Hospital and Health Service is MC at the event taking place during National Palliative Care Week in May.

"As GPs, we are privileged to be able to provide care throughout a patient's whole life journey," said Dr Norris. "End-of-life care at home is one of the more challenging areas of work in

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BRISBANE NORTH  
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primary care, requiring co-ordination and support from other services.”

Although primary care teams are fundamental to the delivery of at-home palliative care, with over 34 palliative care projects currently active in the Brisbane North PHN region, it can be difficult for primary care professionals to keep abreast of the services and supports.

Brisbane North PHN is hosting the event to bring GPs, practice nurses and managers up to speed on ways to support their palliative care patients.

Dr Sue Colen is medical lead at Karuna Hospice and will host an interactive case study and discussion about working together in palliative care.

“Your patients need you,” says Dr Colen. “Your patients have been navigating a changing and bewildering landscape where they are confronting their mortality and often diminishing functionality. They are coming to terms with a life limiting condition. You as their GP are so important to their support.”

Delegates will be engaged through these expert presentations and peer-learning activities over a three-course meal. Key topics will be explored to raise awareness and build networks so primary care teams feel supported to deliver palliative care for their patients.

One of Australia’s leading experts in palliative care Prof Liz Reymond, Director of QVAS Support Services is the first speaker and will talk specifically about VAD in the context of palliative care.

Director of Metro North Health Community Palliative Care Service Dr Bill Lukin is a dual specialist in palliative care and Emergency Medicine. Dr Lukin will talk about the Specialist Palliative Care in Aged Care project (SPACE) model which aims to improve access to specialist end-of-life care for aged care residents.

“While as medical professionals we deal with the ‘patient’, we also deal with the ‘person,’” says

Dr Colen. “What does it mean when palliative care doctors refer to including a spiritual dimension in our care for patients who are dying? It’s how we deal with the person. It’s the personal dimension that is going to affect the way our patient approaches death.”

The event, funded through the Greater Choice for At Home Palliative Care measure, will provide delegates with opportunities to network and meet representatives from key services in the region. An online delegate pack will provide links and resources to support practice beyond the event.

“I look forward to improving my knowledge of specialist Palliative Care services available in my area- to enhance my ability to provide optimal end-of-life care to my patients and their loved ones,” said Dr Norris.

**The Brisbane Local Medical Association is excited to be supporting and be associated with this important event hosted by Brisbane North PHN and encourage members to register.**

Registration is now open and is free for primary care professionals.

**Date:** Wednesday 24 May 2023

**Time:** 5.45pm – 9pm

**Location:** Marquee, Victoria Park, Herston QLD 4006

**To register, go to [www.eventbrite.com.au/e/palliative-care-for-primary-care-tickets-565929328857](http://www.eventbrite.com.au/e/palliative-care-for-primary-care-tickets-565929328857)**



*RACGP and APNA CPD recognition is to be confirmed.*

For more information, please contact project lead, Caroline Irle, at [Caroline.Irle@brisbanenorthphn.org.au](mailto:Caroline.Irle@brisbanenorthphn.org.au).



**Dr Bill Lukin**  
Director of Metro North Health  
Community Palliative Care Service



**Dr Kylie Norris**  
Brisbane Nth PHN



**Professor Liz Reymond**  
Director of QVAS Support  
Services



**Dr Sue Colen**  
Karuna Community Palliative

## SESSIONAL ROOMS AVAILABLE

### Sessional rooms available at Bowen Hills Medical Specialist Centre located at 16 Thompson Street, Bowen Hills.

Modern practice suite offers:

- spacious waiting area
- meet & greet reception staff or BYO
- fully furnished
- free onsite car parking
- access to WiFi and power
- kitchen and boardroom access
- radiology, pathology, physiotherapy, GP practice and cafe located on site
- easy transport links to Brisbane's private and public hospitals

These suites would suit specialists or surgeons and are available for half or full day sessions on Wednesdays (other days may be available).



### Sessional rooms available at Evan Thomson Building, Wesley Hospital, Auchenflower.

Modern practice suite offers:

- comfortable waiting area
- fully furnished
- free onsite car parking
- access to WiFi and power
- kitchen access
- direct access to Wesley Hospital facilities
- picturesque views

These suites would suit specialists or surgeons with availability for half or full day sessions Monday to Friday.

**For further information or to arrange an inspection, contact Mark Higginbotham at [info@brizbrain.com.au](mailto:info@brizbrain.com.au).**

# Metro South Health GP Liaison Team

## Data-led engagement promoting safe clinical handover in Metro South Health

The Metro South Health General Practice Liaison Officers (MSH GPLOs) are focused on continual improvement of clinical handover and safe transfer of care between primary care and our hospitals and health services. Our program's unique engagement model uses a data-driven approach to identify opportunities for improvement relating to clinical handover, and coordinate integration with relevant stakeholders to optimise safe patient outcomes.

One aspect of safe clinical handover is the secure transmission of patient information. The MSH GPLO Program provides advice

and support in the use of GP Smart Referrals (GPSR) in primary care, as a streamlined electronic pathway for referrals to Queensland Health outpatient services. Our team also prioritises regular maintenance of the Secure Transfer Service (STS) address book to ensure timely and secure distribution of clinical handover from inpatient and outpatient services to primary care.

The GPLO Program's purpose is to strengthen partnerships between primary and hospital care, improve access to outpatient services and promote greater health outcomes in the community. Our team provides a conduit to relevant resources for

primary care clinicians to support the clinical management of patients, such as the Health Provider Portal and SpotOnHealth Health Pathways. Additionally, our team is placed in a prime position at the interface of primary and hospital care to welcome GP feedback on all aspects relating to clinical handover. Engaging with GPs and practice staff and collaborating with teams of shared priorities such as Primary Health Network (PHN) and hospital outpatient departments, enables the MSH GPLO Program to investigate and escalate key feedback at various state-wide and local HHS committees and projects.

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## 11 top tips for Healthy Travel

By Orbit World Travel



Ros Chillingworth  
Orbit World Travel

Nothing is worse than being bedridden on your holiday.

You look outside and the sun is shining on a beautiful city or town that you've probably never seen before. The streets are filled with new sights, sounds, people and adventure, and here you are feeling just not yourself, or dare I say in a bed, feeling the worse for wear!

No, thanks.

Although getting sick is sometimes a part of life, there are certainly ways that one can help avoid this situation. Holidays can be a difficult time to stay healthy. You're outside the comforts of routine and habit, you don't know where to go to get healthy food and staying physically fit can be challenging, depending on where you are.

To assist you, here are **11 top tips** to help you stay on top of your health, no matter where you are in the world.

### ***Before you leave, store up some fitness.***

A few days before you go, try to get in some good workouts. Also, consider tightening up your diet, as well as eliminating cheat meals. Working hard on your health before you go will give you some wiggle room for times when it might be more difficult to maintain a healthy existence.

### ***Do some research before you get there.***

Get on the computer before your holiday and learn a little about the area you're traveling to. Find out if your hotel has a gym. What outdoor activities are offered? What local gyms or exercise classes are in the area? Find some areas to walk and jog that are safe and scenic. And prepare the same way in terms of nutrition. Scout out healthy eateries in the vicinity, before you reach your destination.

### ***Pack your own gym.***

Even if your hotel has a gym, it could be crowded, closed during certain hours, and possibly not have the equipment your workout calls for. That's why it pays to bring your own "gym". Some easy to travel with equipment like training bands can be useful. However, the best way to keep fit anywhere is to learn some great bodyweight exercises. Push ups and squats can go a long in keeping your central nervous system active and healthy and can be done anywhere anytime! There are so many great apps that you can download and use while you are away.

- ▶ Sworkit – comes in a free version or a nominal fee for custom programs
- ▶ MapMyRun – If you're a runner can help you plan a local run, even enabling the inclusions of special interests e.g "Art Run"

### ***Don't leave it to chance.***

Instead of always having to resort to fast food or something from a vending machine, prepare your snack food before you head out. Particularly important if travelling with kids. Head to the local markets to get some great local produce. It will also open you up to some local delicacies. Nuts and fruit are great healthy snacks that can easily come with you wherever you go. Just remember to leave any leftovers behind before returning home.

I love trying new food while I am travelling. It amused me on a trip many years ago to Morocco that the English tourists would eat a steak and chips with a fried egg for every single meal. But keep in mind with eating while you are away, for example, if you don't ever eat spicy food at home trying a super-hot Nasi Goreng while travelling is probably not a smart move.

### ***Get outside and enjoy yourself.***

Instead of just lying on the beach all day soaking up rays or heading to the bar with your travelling companions (although, this is all certainly part of a vacation), it's also good to try and be active on your holiday. Not only do you have a chance of doing something out of the ordinary, you'll be getting in some exercise, as well! E-scooters and E-bikes are available in so many places these days,



### ***Drink water and stay hydrated***

One of the easiest things to forget about when traveling is hydration. Carrying a water bottle and drinking lots of water ensures that you will stay hydrated and energized throughout the day. I can definitely correlate the effects of jetlag to the amount of water I have had during the flight. Try to drink at least a cup of water for every hour that you're flying, as well as increasing water intake on the days before and after flying. Of course, experts say to avoid alcohol on flight or at best to minimise alcohol intake.

### ***Respect your body***

Travelling is physically and mentally exhausting and it's important to take care of your body. Make sure you get plenty of sleep, and make sure to include in your itinerary a good balance of active and relaxing activities, to ensure your body is well rested throughout your holiday.

### ***Travel Vaccinations***

Since COVID, the topic of vaccination has been on everyone's lips. Every country has their own requirements. The majority will now allow non-vaccinated people to travel based on certain criteria, so still important to check. But, there have been vaccination recommendations and requirements for travel for many years. These protect against diseases such as hepatitis, typhoid or cholera.

In fact, some countries legally require travellers to have certain vaccinations, such as yellow fever. Make sure you check with your Doctor or Travel Clinic well in advance to ensure you are well prepared. Our team are also available to provide or seek the necessary requirements for you.

### ***Prepare for your flight***

Think about it before you even book! If typically you don't sleep on long flights, see if there is a flight that arrives late so you can go straight to bed as soon as you arrive at your destination. If that isn't possible and you arrive early in the morning, TRY YOUR HARDEST not to go to bed straight away on arrival. It's best to acclimatise with the local time zone as soon as you can.

While on-board be comfortable. Dress in comfortable clothes. a good idea is to pack a tracksuit to change into on-board. Some airlines offer travel packs, even though they are becoming more scarce these days, so take your own earplugs and eyeshades to block out the inflight noise and light. If you plan to sleep, minimise the use of smartphones, tablets and laptops, as the blue light omitted restrains the production of melatonin.

### ***Medications***

Bringing us back to the image we started with, picture yourself sick in bed in a foreign country. Do you

really want to be finding a pharmacy and having to deal with uncommon brands and languages. I always travel with a small emergency pack of medications with which I am familiar. Better to have it and not need it, than the alternative. Just keep in mind that some countries do have restrictions with Opioids (Codeine), so please check this before arrival. It's a good idea to get a letter from your GP listing all the medications you are carrying with you, both prescribed and over the counter medications.

### ***Hygiene***

COVID has thought us the importance of frequent hand washing, carrying sanitiser with us, avoiding handling things you don't need to; keep us this practice when you are abroad.

Many airlines, countries, cities, venues etc around the world are still at times implementing the wearing of masks. Make sure you take some KN95 masks with you and keep one handy in your hand bag or pocket.



**Contract Ros at Orbit World Travel  
on 1300 262 885 or email  
[ros.chillingworth@orbitworldtravel.com.au](mailto:ros.chillingworth@orbitworldtravel.com.au)**

# Radiotherapy for Non-melanoma skin cancer

By Dr Gail Tsang, Radiation Oncologist



**Dr Gail Tsang**  
Radiation Oncologist

There is a high incidence of non-melanoma skin cancer in Queensland, including Basal Cell Carcinoma (BCC) and Squamous Cell Carcinoma (SCC). The standard treatment is surgical excision. However, in areas where surgery is contraindicated or when surgery can result in significant cosmetic or functional deficit, radiotherapy offers an alternative option to treat the skin cancer and preserve organ function. Radiotherapy may be used after surgery in cases where there are positive margins or perineural invasion. It can be used in palliative setting to stop bleeding or pain due to tumour progression.

Radiotherapy for non-melanoma skin cancer can be lesion based or region based. Lesion based treatment targets the individual non-melanoma skin cancer. Region based or wide field skin radiotherapy targets the region where multiple non-melanoma skin cancers may be present in a field change from extensive sun exposure.

Different types of radiotherapy may be used to treat non-melanoma skin cancer, depending on the size and depth of the target field. Superficial radiotherapy, electron or brachytherapy can be used to treat small, superficial lesions. Wide field skin radiotherapy uses Volumetric modulated arc therapy (VMAT) or Intensity Modulated Radiotherapy (IMRT) which can conform the dose to the irregular skin contour, treating the skin to high dose while sparing the deeper normal tissue.

Radiotherapy treatment is tailored to the individual patient, based on the type of skin cancer, location, size, thickness of the lesion and the general condition of the patient. Standard fractionated radiotherapy for non-melanoma skin cancer is delivered daily, 5 days per week over six weeks. Treatment can be modified to complete in shorter duration or less than one week for palliative cases.

Potential acute side effects of radiotherapy may include skin erythema, dry or moist desquamation. These may require dressings, but they usually settle in two to four weeks' time. Late side effects may include skin telangiectasia, subcutaneous fibrosis, hypopigmentation and alopecia in treatment field. Patients will be monitored regularly by the Radiation Oncologist, together with the skin doctor and General Practitioner after completion of treatment.

*Dr Tsang works at GenesisCare Wesley and Chermside. She consults at Wesley Hospital, St Vincent's Private Hospital Northside, St Andrew's War Memorial Hospital and Sunnybank Private Specialist centre.*

*Photos courtesy of GenesisCare.*



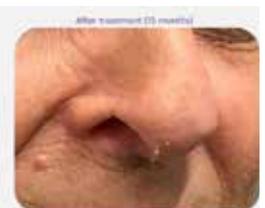
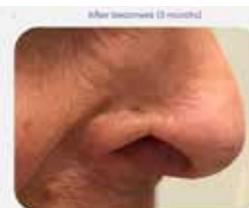
*BCC lower lip, before treatment*



*After radical radiotherapy*



*BCC R nose*



*Before radiation therapy*



*8 weeks post radiation therapy*

*Multiple SCCs and BCCs over R arm*



*Pre radiation therapy*



*Week 4, #18*



*Post radiation therapy*

*Multiple SCCs over scalp*



**Dr James Collins**  
BLMA Committee Member

## Metro North HHS VAD resources

### Voluntary Assisted Dying in Queensland – available resources

As of 1 January, the Voluntary Assisted Dying (VAD) Act is now in effect in Queensland.

A range of resources have been developed for healthcare workers. These include:

- ▶ Queensland Health's [Voluntary Assisted Dying website](#) with [important resources](#) including [legal obligations](#) for all medical practitioners under the Act.
- ▶ the [consumer VAD website](#)
- ▶ a recording of the recent Brisbane South PHN's Voluntary Assisted Dying webinar – [The Role of Primary Care](#). This has relevance for all Brisbane North healthcare workers.

Localised Brisbane North VAD resources are also available and include:

- ▶ [Brisbane North Voluntary Assisted Dying HealthPathways](#), which have been developed to assist GPs with information about VAD

- ▶ [Voluntary Assisted Dying \(VAD\) – information for Brisbane North GPs](#) also details information about where to get phone support, useful resources for GPs and how to refer a patient.

### Conscientious objection

*Medical practitioners can [choose not to participate](#) in the voluntary assisted dying [process](#), but all medical practitioners have obligations under the [Voluntary Assisted Dying Act 2021 \(the Act\)](#).*

### Interested in becoming a VAD practitioner or need more help?

Medical and nurse practitioners who wish to become an authorised VAD practitioner in Queensland should review this [information pack](#) from Queensland Health and then [submit an application to become a VAD practitioner](#).

### QVAD-Support

The Queensland Voluntary Assisted Dying Support Service (QVAD-Support) provides voluntary assisted dying advice and support to all people and healthcare workers in Queensland. You can contact **QVAD-Support** by phone on **1800 431 379**, Monday to Friday from 8.30am to 4.00pm.

Metro North VAD Support Unit is available via email at [MetroNorth\\_VAD@health.qld.gov.au](mailto:MetroNorth_VAD@health.qld.gov.au), Monday to Friday from 8.00am to 4.00pm. Practitioners are asked not to send patient identifiable information via unsecured email.



## AMA Queensland update [qld.ama.com.au](http://qld.ama.com.au)

MARCH 2023



**Dr Maria Boulton**  
AMA Queensland President



**Dr Brett Dale**  
AMA Queensland CEO



AMA Queensland is continuing to secure wins for members and the Queensland community, with the state government heeding our calls on drug law reform, vaping, and an “amnesty” on payroll tax for private practitioners.

The North Queensland pharmacy prescribing pilot appears to have been further delayed and we continue to call on the Queensland government for complete transparency about how this dangerous experiment will be conducted.

We are also well and truly in the swing of our events schedule, with a highly successful Super Saturday of the Medical Careers Expo and Private Practice Conference on one day. Nominations for AMA Queensland leadership positions are now open and election results will be announced at our AGM on 26 May, which will be followed by the Dinner for the Profession.

### Drug law reform

The Queensland Government has acted on the recommendations of our 2021 Drug Law Reform Roundtable, introducing legislation to expand the Police Drug Diversion Program (PDDP) to first-time offenders caught with minor amounts of all drugs, not just cannabis.

Our roundtable brought together medical, legal and law enforcement professionals, academics and people with lived experience of substance use. The overwhelming consensus was that substance use should be treated as a health issue, not a criminal issue, and where possible early offenders should be diverted away from the criminal system and toward support services.

This does not apply to those who manufacture or sell illicit drugs – just those who are found with a small amount for personal use.

Premier Anastacia Palaszczuk last month introduced legislation to expand the PDDP, in a move supported by Queensland Police, the Alcohol and Drug Foundation and the Queensland Network of Alcohol and other Drug Agencies (QNADA).

This move is too important to be politicised. We are proud to have spearheaded this change. It is predicted that 17,000 people will access the program in its first year. We hope this means 17,000 fewer people will end up in more trouble with the law or with potentially life-threatening addictions.

You can read more [here](#).



### Tobacco and vaping

Last year, it was our unhappy duty to accept the Dirty Ashtray Award from the AMA and the Australian Council on Smoking and Health (ACOSH) for the Queensland Government’s failure to act on protecting young people from the dangers of vaping.

We wrote to the Health Minister and Attorney-General at the time, and displayed the Dirty Ashtray at Parliament House.

This month, the Queensland Government announced new laws around the licensing of nicotine sales and a parliamentary inquiry into vaping.

This is a great win for community health and comes as a result of strong AMA Queensland advocacy.



Read more [here](#).

### Payroll tax

We are continuing to advocate for GPs and private practitioners to be exempt from payroll tax. While we welcome the pause in audits of GPs until mid-2025, calling this an amnesty implies there has been wrongdoing.

GPs have been complying with tax laws and their legal and accounting advice – the Queensland Revenue Office has changed the way it interprets the law following a New South Wales tribunal decision.

We know most practices will have no option other than to pass this new tax on to patients, or close their doors.

When a patient goes to a public hospital, that service is payroll tax-exempt for a very good reason – healthcare is an essential need. Patients deserve to have access to their GPs in the same way.

This new tax is shortsighted. It will deter new practices from opening and will force existing practices to end bulk billing altogether. More patients will end up in hospital emergency departments.

We need a sensible, sustainable national solution.

[Read more](#) about our advocacy, including our correspondence with the State Treasurer and the Queensland Revenue Office.



**AMA QUEENSLAND**

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**AMA QUEENSLAND AGM  
&  
DINNER FOR THE  
PROFESSION**

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FRIDAY 26 MAY 2023  
AGM 6PM | DFP 6.30PM

CUSTOMS HOUSE  
399 QUEEN STREET, BRISBANE

[AMA.COM.AU/QLD/EVENTS/DFPAGM](http://AMA.COM.AU/QLD/EVENTS/DFPAGM)

**BUY TICKETS TODAY**

### Pharmacy prescribing

Guidelines for the North Queensland pharmacy prescribing pilot have been released and it appears the first pharmacists taking part will not complete their training until late this year.

While it is unclear whether they will be able to start autonomously prescribing before passing their course, it is another welcome delay to the start of this dangerous experiment with North Queenslanders' health, which was originally due to start in mid-2022.

The number of conditions covered has also been cut from 23 to 17.

Unlike trials proposed in New South Wales and Victoria, where state governments have pledged to reimburse patients, pharmacists in the North Queensland trial will charge patients between \$20 and \$55 for consults and there are no patient subsidies from Medicare or the Pharmaceutical Benefits Scheme.

It is essential the Queensland government is transparent with the community about this scheme. When the urinary tract infection (UTI) pilot began, no information was given to doctors on how to report any adverse outcomes for patients.

We are working with our colleagues nationally to fight these proposals as they emerge in every state and territory.

### Council Communique

The AMA Queensland Council met on 2 March 2023. We received updates on federal campaigns on Medicare, maternity services and payroll tax, and an update on the work of the Opioid Stewardship Roundtable, the Committee of Consultant Specialists, and the International Medical Graduate Working Group.

[Read the communique in full.](#)



### New CDT Chair

The Committee of Doctors in Training has a new chair – Cairns-based PGY4 Dr Elise Witter. You can read more about her [here](#).



We'd like to thank outgoing chair, Dr Rob Nayer, for his hard work in the role, particularly around the *Resident Hospital Health Check*.

### Private Practice Conference and Medical Careers Expo

We held our two biggest events of the year – the Medical Careers Expo and the Private Practice Conference – on a super Saturday at the Brisbane Convention and Exhibition Centre.

It was great to see so many members turn up to hear about the importance of cyber security and how artificial intelligence will be used to support healthcare in the future, and to network and contemplate their careers.

Our next major event is Dinner for the Profession, which is being combined with the annual general meeting on 26 May.

Register [here](#).



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ANNUAL CONFERENCE

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Our AMA Queensland International Annual Conference has a long and proud history of bringing doctors together to discuss key issues facing the profession while immersed in unique tourism destinations. After a long three years onshore, we are thrilled to hold our international 2023 event in Lisbon, Portugal, with support from our corporate partner Orbit World Travel.

Portugal is a country of culture, colours and character. As the oldest-formed European country, this historic powerhouse has so much to offer. Visitors are drawn to Portugal's breathtaking mix of cultural and natural landscapes including 17 World Heritage-listed convents, monasteries, cities and regions. People flock to Portugal for its food and wine experiences. Lisbon hosts a cosmopolitan community bustling with restaurants, cafes and roof-top bars. **Join us at this much-anticipated conference destination.**

\* For more details please visit our website  
[ama.com.au/qld/events/annual-conference/lisbon](http://ama.com.au/qld/events/annual-conference/lisbon)

# Event Wrap Up

28 February 2023

Thank you to our sponsor 3D Matrix Medical Technology Pty Ltd and the informative presentations from our guest speakers Dr Chris Perry “Common ENT Conditions in General Practice” and Dr Matthew Remedios “Plugging the Gaps in Endoscopic Hemostasis.”

