

## Upcoming Events

### End of year Member Educational Dinner

**Date:** Friday 29 November 2024

**Time:** 6.30pm for drinks  
7pm Dinner and educational presentations

**Venue:** Factory 51, Holdsworth Street, Coorparoo

**Dress:** Smart casual

**RSVP:** Wednesday 20 November 2024



Reserve a spot

[brisbanelma.org](http://brisbanelma.org)



## Message from the BLMA President

*Dr Hasthika Ellepola*

Welcome to Issue 13 of SYNAPSE. Thank you to Perrigo for sponsoring our September Educational Event at Victoria Park Function Centre. Guests were engaged by Dr Joel Lewin's presentation "Gallstone Disease: It's not all Rock and Roll." If you missed his presentation, please turn to page 7 for his article. We then heard from Greg Richards about the extraordinary work achieved by Queensland Aboriginal and Islander Health Council (QAIHC). It was wonderful to include the topic of Indigenous health at our event.

Your Management Committee has been extremely active and is busy with several issues which I would like to highlight.

Firstly, plans are now advanced for our **END of the YEAR** education function. This is always a great way to finish off our successful year. Please mark your diaries as the event is now confirmed for **Friday 29 November at 6pm**. We are excited to announce that we are trying out a new venue for our function which is Factory 51 in Coorparoo. Eventbrite bookings will open soon on our website, so please get in early as it is sure to be a sell out. In addition to our usual educational presentations, BLMA members will have the opportunity to meet and mingle with our special guest, AMA Queensland President Dr Nick Yim, who will be providing

us with his vision as President and their recent wins, including what the post-election environment looks like.

Secondly, the committee are working on fixing all the 'bugs' on our website and hope that registering for membership, events, access to the members-only page etc will be much more seamless. Your feedback will be welcome if there are any ongoing issues.

Finally, the Management Committee is currently working on an expanded 2025 program with at least six high calibre educational dinner events plus three events designated for our Doctors in Training cohort. It is an ambitious plan and we are in advanced stages of negotiation with several new partners which I am hoping we will be able to announce soon. With this expansion, we will be able to increase our membership, so feel free to encourage doctors within your practices and departments to sign up on our website. We especially would like to see more non-GP specialists and GP Registrars added to our membership as well, so that we represent and develop collegiality with a broad spectrum of doctors on both sides of the river. Please also let any new doctors who have commenced practice in the Brisbane area to join our group - a good opportunity for them to meet other established Brisbane doctors.

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## CONTACTS

**President:**  
Dr Hashhika Ellepola

**Vice President:**  
Dr Gail Tsang

**Treasurer:**  
Dr Manoj Bhatt

**Secretary:**  
Dr Felicity Jensen

**Committee Member and Newsletter Editor:**  
Dr Dilip Dhupelia

**Committee Member and Website/Social Media Editor:**  
Dr Janet Draper

**Committee Member:**  
Dr Jennifer Schafer

**Committee Member:**  
Dr Andrew Cronin

**Doctor in Training Committee Member and Co-Newsletter Editor:**  
Dr Herjot Gill

**Doctor in Training Committee Member:**  
Dr Leanne Comino

**Doctor in Training Committee Member:**  
Dr Bruce Wang

For general enquiries and all editorial or advertising contributions and costs, please contact:

**Renee O'Brien**  
**Email:** info@brisbanelma.org  
**Phone:** 07 3872 2248

The Brisbane Local Medical Association welcomes contributions from members, especially **Letters to the Editor**.

**Please address all correspondence to:**  
**Dr Dilip Dhupelia**  
**Email:** info@brisbanelma.org

## Issue 14 | 2024 Newsletter

**Content Deadline:**  
**Friday 15 November 2024**

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

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

**Contact:** Dr Dilip Dhupelia  
**Email:** info@brisbanelma.org



## Are you a member?

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



**brisbanelma.org**

**Enquiries:** Dr Manoj Bhatt  
 drmkbhatt@yahoo.co.uk

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

**Directory form is available on the website.**

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Synapse: Newsletter dates 2024

Newsletter Month	Content Due	Distribution
November	Friday 15 November	Early December

Synapse: Newsletter dates 2025

Newsletter Month	Content Due	Distribution
February	Monday 17 February	Late March
May	Monday 5 May	Late May
July	Friday 4 July	Late July
September	Monday 1 September	Late September
November	Monday 3 November	Late November



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## Payroll tax decision a win for patients

Both major parties have now confirmed general practice will be exempt from the new payroll tax interpretation when the current amnesty ends next year. “We now call on all parties to extend this exemption to all private medical practices, in the same way that public hospitals and most private hospitals are exempt from payroll tax. Every other state and territory government should follow Queensland’s lead.” - AMA Queensland President Dr Nick Yim.

Labor’s commitment to exempt general practice from payroll tax is a significant win for patients, ensuring the new tax will not be imposed no matter who wins the 26 October state election.

“AMA Queensland has been calling for this sensible decision since a change in the interpretation of tax laws in late 2021,” President Dr Nick Yim said.

“We welcomed the government’s amnesty and Public Ruling that payments made directly by a patient to their GP would not incur payroll tax.

“But we were concerned that this ruling would be affected when federal MyMedicare payments are implemented next year, when funding for eligible patients would be tied to practices, not individual doctors.

“We raised our concerns with the Minister and we are pleased that the government has listened.

“This decision to exempt general practice puts an end to uncertainty for these practices and their patients and is a great announcement.

“GPs were concerned that they would be audited when the amnesty ends on 1 July next year.

“General practices would have had no choice but to pass this new tax on to patients. We are in a cost-of-living crisis and now is not the time to make patients pay more to see their doctor.

“We would much prefer to be employing nurses and caring for patients.

“We now call on all parties to extend this exemption to all private medical practices, in the same way that public hospitals and most private hospitals are exempt from payroll tax.

“Every other state and territory government should follow Queensland’s lead.

“We also welcome the announcement of the stage two expansion of Redlands Hospital. Redlands is one of the priority areas identified in our Surgical Wait List Roundtable Action Plan released last month.

“We are also calling on the federal government to urgently increase Medicare rebates for patients. The Medicare rebate is woefully low and has not kept pace with cost-of-living for decades.”

The payroll tax exemption is part of AMA Queensland’s Election Priorities 2024, which lays out a blueprint for all political parties for reform of the Queensland healthcare system.



# The Role of the Australasian Society of Breast Physicians in Supporting GPs with Specialised Training in Breast Medicine

By Dr Lea Freeman

*B.Sc. (MELB), M.B.,B.S. (QLD), FRACGP, FASBP*

*ASBP Vice President*

The Australasian Society of Breast Physicians (ASBP) has long been recognised for its crucial role in providing additional training and expertise to general practitioners (GPs), specifically in the field of Breast Medicine. As the demand for specialised healthcare continues to grow, the need for GPs with comprehensive knowledge and experience in breast health has become more important than ever. The ASBP has taken significant strides to address this need by offering structured educational programs, workshops and clinical training that equip GPs with advanced skills to manage and diagnose a wide range of breast-related conditions.

## The Importance of Specialised Breast Medicine Training for GPs

Breast health is a critical area in women's healthcare, encompassing everything from breast cancer diagnosis to benign conditions and preventative care. GPs, as the first point of contact for many patients, play a pivotal role in early detection, patient education, and timely referrals to specialists. However, breast conditions can often be complex, requiring a level of expertise beyond basic medical training.

The ASBP has recognised that GPs with an interest in women's health and breast care can significantly enhance their practice by gaining further specialisation in Breast Medicine. This specialisation enables GPs to offer enhanced diagnostic accuracy, manage treatment pathways, and support patients with ongoing care, especially those with a higher risk of breast cancer. By filling this vital gap, the ASBP has created opportunities for GPs to build competence and confidence in this specialised field, ensuring that patients receive more timely and thorough care.

## The Structure and Focus of ASBP Training

The ASBP offers an educational pathway designed to provide GPs with both theoretical knowledge and practical experience in Breast Medicine. Through the ASBP's programs, GPs can access training modules on breast anatomy, pathology, diagnostic imaging, clinical examination techniques, and management of both benign and malignant breast diseases. The training not only focuses on diagnosis but also emphasises patient communication, psychological support, and collaboration with

multidisciplinary teams, ensuring a holistic approach to patient care.

Moreover, the ASBP's workplace based allow GPs to hone their skills in a clinical setting, learning from experienced breast physicians and radiologists. By combining evidence-based learning with real-world clinical exposure, the ASBP ensures that GPs are well-prepared to manage complex breast conditions with expertise and care.

## Recent Accreditations and Recognition

The ASBP's program has recently achieved important milestones in accreditation, reflecting the quality and value of the training provided. Queensland Health has formally accredited the program, recognising its alignment with state healthcare priorities and its role in enhancing the skills of healthcare professionals in managing breast health. Additionally, BreastSurgANZ (Breast Surgeons of Australia & New Zealand), the leading organisation for breast surgeons, has endorsed the program, highlighting the collaboration between surgical specialists and GPs in providing comprehensive patient care.

### Application for membership

For GPs and other medical professionals looking to expand their expertise in Breast Medicine, the ASBP offers membership pathways that support continued learning and professional development. Individuals can apply as an Associate Member (AM) or an Associate Member on Pathway to Fellowship (AM-P), depending on their career stage and experience. Membership provides access to specialised training, workshops, and ongoing support from a network of experts in the field.

The Australasian Society of Breast Physicians plays a vital role in enhancing the capacity of GPs to manage breast health effectively. By offering specialised training that is now accredited by Queensland

Health and BreastSurgANZ, the ASBP ensures that GPs can provide high-quality, specialised care to their patients. As the healthcare landscape continues to evolve, the ASBP remains committed to supporting GPs in delivering expert care in Breast Medicine, contributing to better health outcomes for women across Australia and New Zealand.

To learn more or to apply for membership, visit the official ASBP website at [www.breastphysicians.org.au](http://www.breastphysicians.org.au) and navigate to the membership section.

Applications to register in the training program for 2025 on 1 October 2024 and close on 14 January 2025. For information on how to register, please contact [asbp@amaq.com.au](mailto:asbp@amaq.com.au).



Dr Lea Freeman, ASBP Vice President, Dr Katrina Tiller, ASBP Chair of Education and Dr Lauren Arnold ASBP President



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"I just wanted to write to express my enormous gratitude to the board members of the MBAQ. I received stage 3 cancer diagnosis at the age of 30 in May 2023. It turns out that cancer is incredibly expensive, and added to that your income goes down significantly whilst your outgoings increase. If it was not for the generosity of the MBAQ I would not even have been able to afford grocery shopping by this point. This grant has helped enormously with easing some of the financial stress associated with cancer and has allowed me to focus my energy on myself and my treatment, rather than financial worries. Thank you so much!"

ANONYMOUS



## Mater's Dr Joel Lewin encourages early detection and treatment of gallstone disease

*By Dr Joel Lewin, MBBS, BSC FRACS*

Mater General Surgeon Dr Joel Lewin presented to the attendees at a recent Brisbane Local Medical Association meeting, outlining the critical role correct diagnosis and treatment of gallstone disease can play in positive patient outcomes.

Dr Lewin said while the disease can have the classical features of pain after a fatty meal, it can also be difficult to diagnose, with many patients unaware their symptoms are due to gallstones, mistaking them for reflux or musculoskeletal pain.

"This pain can vary from severe pain in the right upper abdomen to radiating to the back, shoulder, central abdomen or cause nausea and vomiting," he said.

"If patients do present for medical care, misdiagnoses can lead to delayed referrals, which can worsen outcomes, especially in older patients or those who go on to suffer from complications like gallstone pancreatitis.

"It's essential GPs have gallstone disease on their radar when patients are presenting with abdominal symptoms and ensure they are sent for blood tests and an ultrasounds as early as possible."



**Dr Joel Lewin**  
Hepatic, Pancreatic  
and Biliary Surgeon

Dr Lewin said early diagnosis and treatment can significantly reduce the risk of complications such as acute cholecystitis, obstruction from bile duct stones and pancreatitis.

"As subspecialty trained surgeons at Mater Private Hospital Brisbane we can safely offer technically challenging laparoscopic bile duct exploration for bile duct stones at the same time as cholecystectomy," he said.

"Having the right experience with these types of procedures means not only do we see excellent outcomes for patients with a faster recovery and shorter hospital stay, it also avoids the need for further procedures."

Dr Lewin said the medical community needs to raise awareness and encourage early detection and surgical referral of patients with gallstone disease, so patients can be well informed, have elective surgery when indicated and avoid potential complications.

**GP Invitation:**  
NSW, Gold Coast and Brisbane

# Annual Mental Health GP Masterclass

 **Saturday, October 26 2024**  
8.15 am (registration),  
9.00 am – 4.30 pm

Cocktail Networking Function:  
4.30 pm – 5.30 pm

 **Sheraton Grand Mirage Resort, Gold Coast**  
71 Seaworld Drive Main Beach,  
QLD 4217



**Aurora Health, Australia’s largest private network of specialty mental health and rehabilitation hospitals, invites you to our Annual Mental Health GP Masterclass. This event will be presented by three of our leading local hospitals: Currumbin Clinic, Robina Private and Belmont Private Hospitals.**

## Topics

### Novel Treatments - What's new in 2024 and 2025

Outline the latest advancements in psychiatric treatments, including the therapeutic use of psychedelics, adult ADHD management, and ketamine for treatment-resistant depression.

### Trauma, Addictions, and Mood Disorders

Analyse case studies on PTSD, addictions, and mood disorders to compare different treatment approaches, and evaluate effective strategies for managing these complex mental health conditions.

### Older Persons Psychiatry

Identify late-life mental health disorders and determine when patients could benefit from neurocognitive treatments or rehabilitation.

### Women’s and Perinatal Mental Health

Identify the impact of hormonal changes on women’s mental health and evaluate treatment approaches for perinatal mood disorders as well as hormonal or menopause-related mental health issues.

**Limited Spaces Available. First come, first served.**



Educational Activities	Reviewing Performance	Measuring Outcomes
03	03	04
hours	hours	hours

Activity (975966) (pending approval): 9 activity hours including: 3 Educational Activity (EA), 3 Reviewing Performance (RP), and 4 Measuring Outcomes (MO) points.

### Accommodation

#### Sheraton (10% off)

Promo Code: L6C

Please contact reservations to reserve  
E: [reservations.goldcoast@sheraton.com](mailto:reservations.goldcoast@sheraton.com)  
P: 07 5577 0000 (Monday to Friday, 9am-4pm).

*\*Subject to availability. T&C's apply.*

#### Meriton Suites Southport (2.3km away)

Booking code: 22000341

(available at any Meriton)

Book directly: [Meriton Suites Southport - Reservations - Suite Availability](#)

*Aurora Health has negotiated discounted rates at the facilities listed. However, please note that we do not endorse or take responsibility for these hotels. Kindly contact the hotel directly to make your reservation.*

## RSVP

Please RSVP before  
20 October 2024  
via our QR Code

[aurora.eventbrite.com.au](http://aurora.eventbrite.com.au)



For more information, contact:

Alix Irby, National Business

Development Manager and GP Liaison

Aurora Health | M: 0431 725 429

E: [alix.irby@aurorahealth.com.au](mailto:alix.irby@aurorahealth.com.au)

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# New general practice accreditation certificate number

## Article taken from Brisbane South PHN

Accredited general practices will have received an email from their accreditation provider, outlining the new standardised accreditation certificate number requirement. This requirement is effective as of 1 September 2024. The relevant information and next steps for accredited general practices, are detailed below.

### What is an accreditation certificate number?

Standardised accreditation certificates have been introduced to ensure consistency across all accredited general practices and facilitate easier verification of accreditation status.

The Department of Health and Aged Care, in collaboration with The Australian Commission on Safety and Quality in Health Care (ACSQHC) and Services Australia, require a new certificate number be allocated to all general practices with current accreditation. This update is purely administrative and has no impact on a practice's accreditation status.

### Where can I find our practice's accreditation certificate number?

Your new accreditation certificate number will be distributed by your accreditation provider. If you have not yet received your new certificate number, please contact your accreditation provider.

### Next steps for general practices

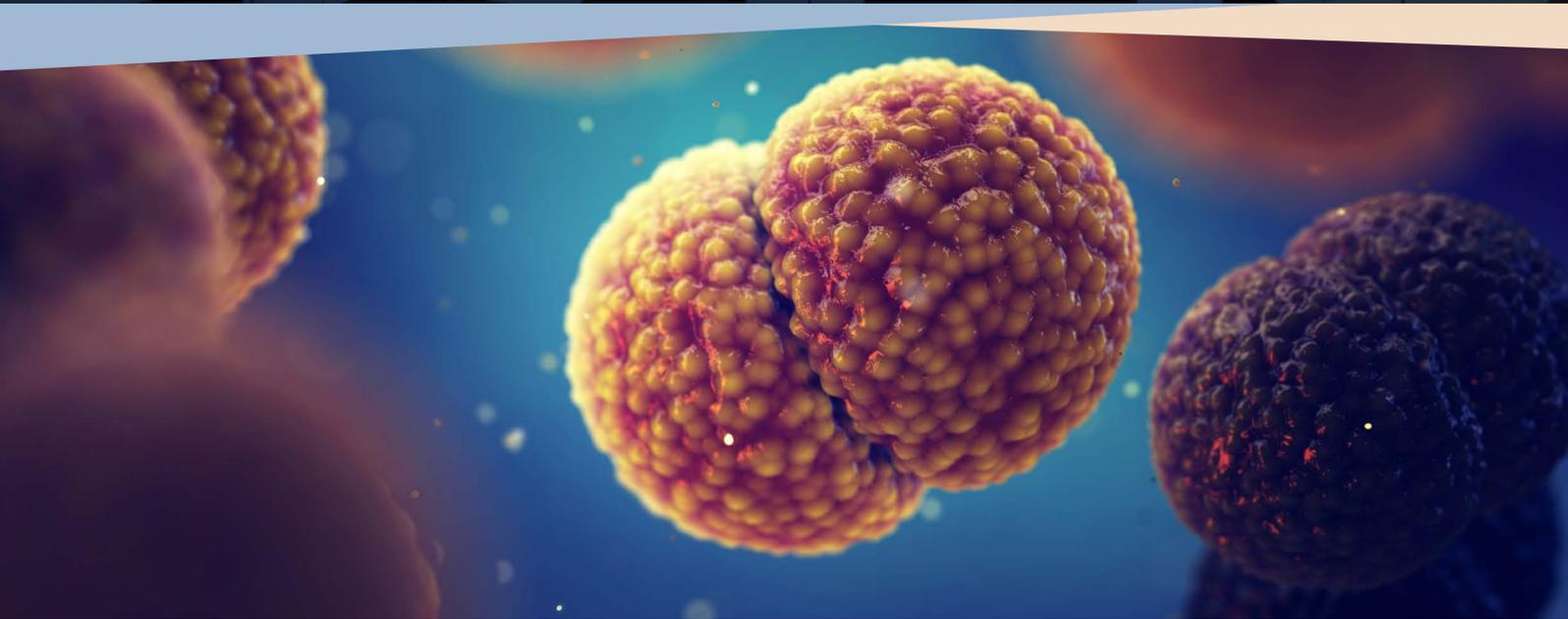
To maintain MyMedicare eligibility, it is important that your practice has the correct accreditation information on the Organisation Register. This includes adding your new accreditation certificate number. Practices are encouraged to review and update their accreditation information on the Organisation Register by 6 October 2024.

To add your new accreditation certificate number on the Organisation Register:

1. Log in to PRODA.
2. Select Go to Service on the Health Professionals Online Service (HPOS) tile.
3. Select the Organisation Register tile.
4. Select the Associated Sites tab and click on the ID for your site. This will direct you to the practice's Organisation Site Record.
5. Select the Accreditation tab and select Amend, in the Action column.
6. Add your Accreditation Certificate Number (this should be located in an email from your accreditation provider).
7. Select Submit and then Save to finalise your update.

**phn**  
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## Meningococcal Update August 2024

### **Meningococcal ACWY0 vaccine update**

*From 1 July 2024, the MenACWY vaccine MenQuadfi® will be funded under the NIP for:*

- ▶ adolescents aged 14 to 16 years (year 10 cohort)
- ▶ people aged 15 to less than 20 years on catch-up schedules.
- ▶ For these cohorts, MenACWY immunisation using MenQuadfi® will be delivered by school immunisation programs from 2025 as well as other routine providers such as GPs, community pharmacies, and community immunisation clinics.
- ▶ There is no change to NIP-funded the meningococcal ACWY vaccine used for any other cohort. Children aged 12 months and people with specified medical conditions will continue to receive the MenACWY vaccine Nimenrix®.
- ▶ Please continue using stock on hand of Nimenrix® vaccine for

all age groups. QHIP is working to deplete existing stocks of Nimenrix® before re-stocking with MenQuadfi® for the 14–19 year old cohorts.

- ▶ SIP programs are to continue to use Nimenrix® in 2024 programs.
- ▶ It is mandatory to report all meningococcal ACWY vaccines you have administered to the Australian Immunisation Register (AIR).

### **Meningococcal B vaccination reminder**

- ▶ All young children under 2 years of age, and all adolescents and young adults aged 15-19 years (< 20 years) are eligible for funded menB (Bexsero®) vaccine.
- ▶ The peak incidence of meningococcal disease occurs in 18-20 year olds and young adults are thought to play an important role in the transmission of the bacteria in the community.
- ▶ The MenB vaccine has also shown effectiveness in preventing gonorrhoea amongst adolescent

and young adults. This is because gonorrhoea and meningococcal B are caused by similar types of bacteria.

- ▶ Advice regarding menB revaccination has been updated as below on the Queensland Meningococcal B Vaccination Program website and associated factsheets.

### **Are people already immunised against menB eligible for immunisation via the Queensland MenB Program?**

If a child or young person has already received a valid and complete menB immunisation course of Bexsero® vaccine, there is no current recommendation to repeat the course, however they remain eligible to receive a funded menB immunisation course when aged between 15 and less than 20 years.

There is no contraindication to repeating a menB immunisation course, as long as the interval between courses is at least 8 weeks.

# MONKEY POX



## Mpox cases are rising in Australia: What you need to know

Article taken from Australian Government: Australian Centre for Disease Control

The World Health Organisation recently declared the mpox outbreak a public health emergency of international concern. As a result, Australia's Chief Medical Officer, Professor Paul Kelly, has activated the National Incident Centre for mpox. This will allow the Australian Government to continue to monitor the increase in international cases and enhance coordination of response activities domestically.

As part of the response to the mpox outbreak, priority groups should get vaccinations.

### About Mpox

Mpox is a viral zoonotic disease that historically occurred mostly in tropical rainforest areas of Central and West Africa and has spread to other regions.

The mpox virus is part of the same family of viruses as variola virus, which causes smallpox. It is a rare viral illness that can become serious. For most people, symptoms will clear up on their own after 2 to 4 weeks.

Since May 2022, there has been a global increase in mpox infections in multiple countries where the illness is not usually seen. Mpox was first reported in Australia May 2022.

The World Health Organization (WHO) declared the mpox outbreak a public health emergency of international concern (PHEIC) on 14 August 2024.

### Signs and symptoms

Mpox illness is usually mild, and people typically recover within a few weeks. Symptoms begin 5 to 21 days after exposure to the virus. Signs and symptoms of mpox infection can include:

- ▶ a distinctive rash like lesions
- ▶ swollen lymph nodes
- ▶ fever
- ▶ headache
- ▶ muscle aches
- ▶ joint pain
- ▶ back pain
- ▶ chills
- ▶ exhaustion.

### Mpox rash

The rash changes and goes through different stages, before forming a scab and falling off. It can appear as lesions, like pimples, blisters or sores, which can then burst to form ulcers or scabs. These can vary in size and number with as little as a single lesion to several thousand. The lesions look like chickenpox, but larger.

The rash may occur on any part of the body, including the:

- ▶ face and inside the mouth
- ▶ torso
- ▶ arms and hands
- ▶ legs and feet
- ▶ genital and perianal regions.

Some people have reported a rash appearing in the genital and perianal regions without spreading to other areas of the body. Some only experience this rash or pain in their mouth or anus with no other symptoms. The rash can be painful, especially if the lesions join or appear in the mouth or rectum.

**Transmission**

A person with mpox is thought to be infectious from the time they develop any symptoms until all scabs have healed and a fresh layer of skin has formed. This may take several weeks. Transmission between people can occur through:

- ▶ close contact with rashes, blisters or sores on the skin
- ▶ body fluids, including respiratory droplets from coughing or sneezing
- ▶ contaminated objects such as linen and towels.
- ▶ Can pass to the foetus via the placenta during pregnancy.

**Who is at risk**

- ▶ People who have had close physical contact with an mpox case
- ▶ Australian travellers returning from, or going to, countries with confirmed cases

If infected, infants, young children, pregnant women and people who are immunocompromised are at higher risk of becoming severely unwell.

**Prevention**

There are measures people can take to help prevent infection:

- ▶ People who have mpox should isolate from others until the sores fully clear.
- ▶ Household members should avoid physical contact with the infected person. This includes any objects such as linen or towels that have been in contact with an infected person.
- ▶ Careful hand and respiratory hygiene are recommended for the infected person and everyone in the household. Wash hands with soap and water or use an alcohol-based hand sanitiser.
- ▶ If an infected person cannot isolate alone, they should wear a face mask when around other people.

**Isolation**

People with probable or confirmed mpox should immediately isolate until all blisters or sores have healed and a fresh layer of skin has formed to prevent further spread of the disease.

Healthcare providers with inpatients in acute settings with confirmed or probable mpox should isolate them in a room with a private bathroom.

**Treatments and vaccines**

Most people require no, or only supportive, treatment for mpox. This may include simple pain relief. Antiviral treatment may be needed in patients with more severe disease. Guidance on the use of treatments for mpox in Australia is available in the Monkeypox treatment guidelines.

Vaccines can be given either before or after a person is exposed to the virus, but before exposure is recommended for the best protection.

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# Christmas Appeal

For the 3.8 million Australian adults who reported experiencing physical and/or sexual family and domestic violence since the age of 15, there are so many more who have suffered abuse that has never been reported.

With statistics like these, the AMA Queensland Foundation's Christmas Appeal is raising money for domestic and family violence support services.

Please donate by 31 December 2024.  
All donations over \$2 are tax deductible.

[amaqfoundation.com.au/donation](https://amaqfoundation.com.au/donation).

Yes, I want to give a  
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Donate online

For more information about the AMA Queensland Foundation or to make a donation visit [amaqfoundation.com.au](https://amaqfoundation.com.au) or call the Foundation office on **07 3872 2222**.



## Immerse yourself in South Africa

*By Orbit World Travel*

South Africa is the gateway to Africa, offering a rich tapestry of heritage, culture, lifestyle, relaxation, and a vibrant fusion of urban and cosmopolitan energy. It's a destination where unforgettable experiences await.

Whether you're travelling for leisure, conventions or incentives, South Africa boasts world-class hotel accommodations ranging from luxurious five-star resorts to exotic lodges. The warm hospitality of its people ensures that you arrive as a visitor and leave as a friend.

With nine provinces, South Africa is a mosaic of cultures, featuring 11 official languages and a national anthem sung in five of those languages. Among the diverse cultures, the Xhosa people, to which Nelson Mandela belonged, are known for their language that includes 15 distinct click sounds and their tradition of wearing blankets dyed with red ochre, earning them the nickname Red Blanket People.

The history of South Africa is vividly represented through the life of Nelson Mandela, an international hero whose lifelong fight against oppression won him the Nobel Peace Prize, the presidency, and a multiracial democracy for his country. In Johannesburg, a visit to Soweto and the Nelson Mandela Museum offers a profound insight into his legacy and the enduring spirit of the South African people.

From wining and dining at Lekgotla in Mandela Square to exploring the stunning Cape Winelands, a taste of South Africa is an experience like no other. The country's wine region produces 3.1 per cent of the world's wine and is home to over 500 wineries. Unique to South Africa is Pinotage, a blend of Pinot Noir and Cinsaut, making up seven per cent of the South African wine market.

South Africa's wildlife and scenery are unparalleled, offering the greatest diversity of wildlife, the world's richest floral kingdoms, breathtaking landscapes and vibrant marine life, from whales to great white sharks. The landscape ranges from pristine coastal plains and bushveld to tropical forests, semi-deserts, magnificent wetlands, scenic winelands and majestic mountains. Nature lovers will find endless opportunities for adventure,



including hiking, bird watching, fishing, canoeing, sailing, swimming with dolphins, whale watching, tree-top canopy tours and thrilling encounters with sharks. Not to mention, some of Africa’s best game viewing can be found here, home to the big five: lion, leopard, elephant, buffalo, and rhino.

From the vast spaces of Tsitsikamma National Park in the Eastern Cape to the renowned Kruger National Park spanning Limpopo and Mpumalanga provinces, or the North West province’s Pilanesberg National Park and Madikwe Private Game Reserve, South Africa offers incredible game viewing experiences. The country’s hotels and game lodges frequently earn prestigious international awards for excellence, luxury and service, ensuring top-notch hospitality.

A standout attraction is South Africa’s golf scene. The diversity of courses, often set against majestic backdrops, adds a unique appeal. It’s not unusual to spot warthogs or giraffes on the green in game-country. Several world-renowned championship courses, designed by legends like Jack Nicklaus and Gary Player, can be found here.

South Africa’s beauty lies in its diverse offerings, showcased through a variety of accommodations, all officially graded by the Tourism Grading Council. Combined with the capacity of its international convention centres and an array of tourist experiences, South Africa promises a life-changing adventure.

With the Australian Dollar performing well against the South African Rand, travelling to South Africa is both affordable and enticing.

For more information on your next (or first) trip to South Africa, contact an Orbit World Travel Advisor.



**Ros Chillingworth**  
Orbit World Travel



## Event Wrap Up

4 September 2024

Thank you to everyone that joined us for our second last BLMA Education Dinner for the year on 4 September at Victoria Park. The event was possible thanks to event sponsor Perrigo Australian and our platinum sponsor Mater Health.

The evening started with John Underwood from Perrigo Australia giving us an update on PV progesterone and short cervical length. This was followed by our first speaker Dr Joel Lewin, a General Surgeon with subspecialty training in hepatobiliary and pancreatic surgery from Mater Hospital. He's talk on "Gallstone Disease: its not all rock and roll" was a great refresher for everyone, along with fascinating video clips from his surgeries. Our last speaker for the night was Gregory Richards, General Manager of Sector Development, from QAIHC (Queensland Aboriginal and Islander Health Council) who



presented on Indigenous Health, and he was accompanied on the night by Lee Yeomans, Preventative Health Officer QAIHC.

Our next and last Educational Dinner Event for the year will be held at Factory 51 Coorparoo on Friday 29th of November, so keep an eye out for the ticket link in your emails and get in quick to avoid missing out, as we have had sold out events this year! We look forward to seeing you at our final event of the year!

### GALLSTONE DISEASE IT'S NOT ALL ROCK & ROLL

**Joel Lewin**

HPB & General Surgeon

Mater Private / Public & Greenslopes Private Hospitals





Dr Nick Yim  
AMA Queensland President



Dr Brett Dale  
AMA Queensland CEO



[ama.com.au/qld](https://ama.com.au/qld)

## AMA Queensland

# President and CEO update

September 2024

Health is proving to be a major campaign issue as the October state election nears and AMA Queensland is carefully monitoring and analysing policies for their potential impact on our healthcare system.

We continue to work with all sides of politics to improve health services and guarantee patient safety.

## Surgical Wait List Roundtable final update

After seven meetings and countless hours of research and strategising, AMA Queensland's Surgical Wait List Roundtable has now concluded ahead of the state election.

To guide its work, the Roundtable identified the current key barriers to regional elective surgery access as flawed structural and governance arrangements, and the inadequate investment in the regional health workforce.

The result is the *Surgical Wait List Roundtable Action Plan* detailing a series of solutions to inequitable elective surgery wait times for regional and rural Queensland patients for implementation by the Queensland Government.

The solutions have been developed for implementation in both short-to-medium and medium-to-long terms.

Stronger, more capable regional and remote healthcare will reduce interhospital transfers and free up tertiary hospital beds. Thriving regional health services create system efficiencies, improve patient satisfaction and strengthen our valuable communities.

AMA Queensland urges Queensland Health to implement these recommended strategies in collaboration with its dedicated regional health workforce and offers to work with the Department to support that aim.

Read the full Action Plan here:

<https://www.ama.com.au/qld/campaigns/surgical-waitlist-roundtable-action-plan>

Read the media release:

<https://www.ama.com.au/qld/news/Funding-reform-needed-to-fix-regional-surgical-services>

## Patient Care Facilitators

AMA Queensland called for the introduction of Patient Care Facilitators (PCFs) in our *Ramping Roundtable Action Plan* which are now being trialled in locations across Logan and Ipswich.

We commend Health Minister Shannon Fentiman and the Queensland Government for taking up our recommendation as a long-term strategy to reduce stress on hospital emergency departments.

We know from studies that if patients see their GP within two days following hospital discharge, they are 32 per cent less likely to bounce back into hospital in the first week.

We also know how important it is for patients to have access to a regular GP for continuity of care.

PCFs will work with the hospital-based discharge coordinator (HDC) to identify eligible patients, review their patient information and ensure discharge summaries are received.

The program is a significant investment for general practice that will ensure patients are supported following hospital discharge and we hope to see it rolled out statewide.

Read more:

<https://www.ama.com.au/qld/news/Patient-Care-Facilitator-trial-in-motion>

## Payroll tax

AMA Queensland is calling on all political parties to eliminate the patient tax by publicly committing to exempt all private medical practices from payroll tax.

This follows a parliamentary debate on the second last sitting day before the 26 October election, where both sides of politics agreed that imposing payroll tax on GPs would have a devastating impact on patients' access to primary care.

While the amnesty and Public Rulings provide a solution for eligible general practices, they are administratively burdensome, costly and do not extend to all medical practices.

Every private practice must be given the same certainty so Queenslanders can continue to access medical care from their GPs and other specialists.

This patient tax will affect the most vulnerable in our community, reduce access to medical care and must be eliminated before the current amnesty ends in June next year.

Read the media release:

<https://www.ama.com.au/qld/news/PayrollTaxExemption>

## Whooping cough

AMA Queensland and Minister Fentiman recently joined forces to urge Queenslanders to take advantage of free vaccinations.

GPs and our emergency departments are on the frontline as respiratory illnesses sweep through our communities.

This year we are repeatedly seeing concerned parents present with young children suffering severe symptoms from whooping cough while vaccination rates remain low.

2024 alone has seen more than 7,000 confirmed cases of whooping cough compared to just 104 in the same period last year.

While childhood vaccination rates for whooping cough remain above 90 per cent, the proportion of pregnant Queenslanders taking up the free vaccine under the National Immunisation Program (NIP) has fallen to 70.7 per cent.

Immunisation during pregnancy is crucial to protect newborn babies and this 6.5 per cent decrease over the past two years is concerning.

Doctors know cost can be a barrier to accessing healthcare, especially preventive health.

We encourage all practitioners to talk to expecting parents about getting their free vaccination.

Read our media release:

<https://www.ama.com.au/qld/news/FreeWhoopingCoughVaccine>

Read more:

<https://www.ama.com.au/qld/news/FreeVaccines>

## Pharmacy ownership laws

A newly established Pharmacy Business Ownership Council has taken over the power to issue, change, suspend and cancel pharmacy business licences from Queensland Health.

Originally proposed to comprise members with expertise in law, accounting and business management, and members representing the pharmacy sector and the community, instead, nearly all members appointed have conflicts of interest as pharmacists or pharmacy owners.

Queensland already has the most anti-competitive pharmacy ownership laws in the country, and this council will only further reduce competition, meaning Queenslanders will be forced to pay more for medicines.

The council has been established against the advice of the Productivity Commission, the Queensland Aboriginal and Islander

Heath Council, the RACGP, and AMA Queensland.

Estimated to cost Queensland taxpayers \$9.8 million for the next four years, it is unnecessary, anticompetitive and expensive. AMA Queensland continues to advocate against this decision for the sake of all Queensland patients and communities.

Read our media release:

<https://www.ama.com.au/qld/news/PharmacyBusinessOwnershipCouncil>

## Physician's assistants

RDMA members may remember from our last update that we were in the process of preparing a response to the Queensland Health proposal to employ more physician's assistants (PAs) in our public hospitals.

We have since provided feedback, focussing our concerns on Queensland's critical shortage of doctors, nurses, paramedics and other specialists across the health system.

Band-aid fixes, such as creating new and unproven roles like PAs, has the potential to worsen this crisis and reduce patient safety.

There is also the risk that PAs will threaten our future medical workforce pipeline by reducing the opportunities available for junior doctors that are essential for career development.

As PAs are not registered under AHPRA, competency standards are still unclear, raising concerns about patient safety.

To ensure ongoing and high-quality health care for all Queensland patients we instead need long-term solutions to attract and retain our existing health workforce.

Read more:

<https://www.ama.com.au/qld/news/Concerns-remain-around-physician-assistant-proposal>

### UnitingCare ending its contract with AHSA

UnitingCare has ended its contract with the Australian Health Service Alliance (AHSA), leaving more than 2 million policy holders, including over 500,000 Queenslanders, in the lurch from 20 November 2024.

Private hospital groups are at loggerheads with private insurers over contractual agreements, but it is policyholders who are set to suffer the consequences.

These disputes undermine the confidence that Australians have in private health insurance arrangements, particularly as we have seen continued and significant premium increases alongside rising cost of living pressures.

AMA Queensland is calling on both parties to get back to the negotiating table for the sake of patients and the future of private hospitals.

Read more:

<https://www.ama.com.au/qld/news/Further-negotiations-needed-to-protect-patients>

### Satellite hospitals

Queensland Health data continues to show seriously ill patients are presenting to satellite hospitals expecting emergency treatment, only to be transferred to an ED to receive the care they need.

This not only causes a lot of distress for patients and their families but puts additional pressures on our health workforce and facilities.

Added to this confusion are urgent care clinics and nurse-led clinics which further stretch our overburdened workforce.

Following media reports, Health Minister Shannon Fentiman promised to work with AMA Queensland to improve public education about the facilities.

AMA Queensland will collaborate on an education campaign with the Government. However, it won't fix the root cause of the problem – gross underinvestment in general practice and our public health system.

We will continue to advocate for greater investment in best practice health care across all levels of government.

Read more:

<https://www.ama.com.au/qld/news/SatelliteHospitalConfusion>

Read the media transcript with Minister Fentiman:

<https://www.ama.com.au/qld/news/MinFentimanSatelliteHospitals>

### Foundation Charity Gala

Oh, what a night! The AMA Queensland Foundation raised \$140,000 for family violence support services thanks to its generous donors and annual Charity Gala held on Saturday 17 August.

Guests gathered at the *Boom Boom Room* in Brisbane City for a night of drinks and heart-warming stories where they were invited to bid on auctions to support the cause.

Her Excellency the Honourable Dr Jeannette Young AC PSM, Governor of Queensland was in attendance to present the Foundation's Medical Student Scholarships and award the GPTQ Bursary recipients for 2025.

See the event wrap-up:

<https://www.ama.com.au/qld/news/Gala24wrapup>

**AMA QUEENSLAND**

**MEMBER NETWORKING EVENT**

**BRISBANE**

**THURSDAY 21 NOVEMBER 2024**

**5.30PM – 7.30PM**

**AMA QUEENSLAND OFFICES**

**Free MEMBER EVENT**

**HILLHOUSE legal partners**

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The Brisbane Local Medical Association’s Newsletter Synapse is a bi-monthly publication.

## DISTRIBUTION

- ▶ Circulated to specialists, GPs, Private and Public Hospitals, allied health workers, practice managers, retired doctors, Public or Private Sector Doctor, Doctors in Training and GP Registrars throughout the Greater Brisbane Region.
- ▶ All newsletters are uploaded to the BLMA website which attracts strong traffic – brisbanelma.org

## NEWSLETTER

- ▶ Electronic and printed copies are distributed.
- ▶ Each edition is between 20 and 28 pages.
- ▶ All content is to be approved by the editor.
- ▶ Advertising guidelines apply.
- ▶ Please see Newsletter for frequency for content due deadlines and distribution dates.

If you are interested in advertising in SYNAPSE please contact:

**Renee O’Brien**  
**Phone** 07 3872 2248  
**Email** info@brisbanelma.org

## NEWSLETTER EDITOR

**Dr Dilip Dhupelia**  
**Email** info@brisbanelma.org

## NEWSLETTER FREQUENCY 2024

Month	Content Due	Distribution
November	Friday 15 November	Early December

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- ▶ Word count no more than 120 words.

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