**saundersstreetclinic**

**37 Jackson Street, Wynyard, TASMANIA. Phone 6442 1700**

**Newsletter March 2017**

**Opening hours**

Monday - Thursday 9am-1230 pm, 2pm-5 pm ( Dr’s in teaching session until 2.30 pm Thurs)

Friday 9am-1230 pm, 2.30pm-5 pm

Saturday, Sunday, Public Holidays closed

**After hours arrangements**

Please phone the surgery number, you will be given the number for Health Direct which is a phone triage service providing advice by the Federal Government. This service will contact the doctor on call at Saunders Street if necessary, following assessment by a registered nurse and in some cases by a doctor. If your concern is about **a medical emergency** call the ambulance service on **000**-there is no charge for ambulance call-outs in Tasmania.

 If the matter is urgent but not an emergency call **Health Direct 1800 022 222**. A registered nurse using triage protocols will take your call. If necessary the call will be transferred to a GP at GP Assist in Hobart and if that GP thinks a call out or house call is warranted a GP from this clinic will be contacted.

**Flu vaccine (available from April)**

* Annual vaccination is the most important measure to prevent influenza and its complications.
* Annual influenza vaccination is recommended for any person ≥6 months of age who wishes to reduce the likelihood of becoming ill with influenza.
* Recent evidence suggests protection against influenza may start to decrease from 3 to 4 months following vaccination and early vaccination needs to be balanced with this. While influenza continues to circulate, it is never too late to vaccinate.
* Only quadrivalent influenza vaccines (QIV) formulations are available in Australia in 2017. Age restrictions apply according to vaccine brand
* QIVs are funded on the National Immunisation Program (NIP) in 2017 for the following groups:
	+ Aboriginal and/or Torres Strait Islander children aged 6 months to <5 years
	+ Aboriginal and/or Torres Strait Islander persons aged ≥15 years
	+ All persons aged ≥65 years
	+ All persons aged ≥6 months who have certain medical conditions which increase the risk of influenza disease complications; for example, severe asthma, lung or heart disease, low immunity or diabetes
	+ Pregnant women (during any stage of pregnancy).
* Influenza vaccination is also strongly recommended, but not funded, for other groups who are at increased risk of influenza and its complications (*refer to Table 3 footnote*).
* Persons with egg allergy, including anaphylaxis, can be safely vaccinated with influenza vaccines. Persons with a history of anaphylaxis to egg can be vaccinated with a full vaccine dose in medical facilities with staff experienced in recognising and treating anaphylaxis.

Source: http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/ATAGI-advice-influenza-vaccines-providers

**Medicinal Cannabis**

**22 February 2017**

This guidance is for consumers, health professionals and [sponsors](https://www.tga.gov.au/role-sponsor) that are involved in providing appropriate patients with access to medicinal cannabis products as an unapproved drug through the Special Access Scheme (SAS) or Authorised Prescriber Scheme.

The term 'medicinal cannabis products' covers a range of cannabis preparations intended for therapeutic use, including pharmaceutical cannabis preparations, such as oils, tinctures and other extracts.

The Australian Government is facilitating access to medicinal cannabis products to appropriate patients for medical conditions where there is evidence to support its use. However, to fully achieve this, a number of legislative and regulatory changes have been made or are in the process of being implemented (see the [Medicinal cannabis factsheet (pdf,342kb)(link is external)](http://www.health.gov.au/internet/ministers/publishing.nsf/Content/546FB9EF48A2D570CA257EE1000B98F2/%24File/Medicinal-cannabis-factsheet.pdf) for further information). Additionally, the rules relating to medicinal cannabis products may vary between states and territories and could affect access in those jurisdictions.

Commonwealth Department of Health regulates medicinal cannabis products through the TGA and the [Office of Drug Control (ODC)(link is external)](https://www.odc.gov.au/medicinal-cannabis).

Medicinal cannabis products are regulated as medicines in Australia. Generally, medicines imported into, supplied in, and exported from Australia must be entered in the [Australian Register of Therapeutic Goods (ARTG)](https://www.tga.gov.au/australian-register-therapeutic-goods), which is administered by the TGA. However, there are other mechanisms for approval (or exemption). Medicinal cannabis products supplied in Australia will use these alternative supply pathways while evidence to support registration is gathered through clinical trials.

Legislation came into effect on 30 October 2016 to allow legal cultivation, production and manufacturing of medicinal cannabis products in Australia. This scheme is administered by the ODC. This legislation is designed to make available medicinal cannabis products and works together with the therapeutic goods legislation and state and territory legislation to make medicinal cannabis products [available to certain patients](https://www.tga.gov.au/access-medicinal-cannabis-products#accessing).

For further information about legislation and regulation that applies to medicinal cannabis products see our '[Medicinal cannabis products: overview of regulation](https://www.tga.gov.au/medicinal-cannabis-products-overview-regulation)' web page.

Source: <https://www.tga.gov.au/access-medicinal-cannabis-products>

Note; GPs in Tasmania CAN NOT prescribe this product! The State Government will need to pass legislation in relation to the use of medicinal cannabis and it is then likely that specialists (including pain specialists) may be able to prescribe this, but there is currently no indication that GPs will be included as prescribers.

**Skin cancers**

The majority of skin cancer can be prevented by careful [sun protection](http://www.dermnetnz.org/treatments/sun-protection.html), including [sunscreens](http://www.dermnetnz.org/treatments/sunscreens.html), from an early age. Taking [nicotinamide](http://www.dermnetnz.org/treatments/nicotinamide.html) (vitamin B3) can reduce the numbers of nonmelanoma skin cancers.

Skin cancers are detected early by regular [self skin examination](http://www.dermnetnz.org/procedures/self-skin-examination.html) and skin checks by a trained health practitioner. [Mole mapping](http://www.dermnetnz.org/procedures/mole-mapping.html) and [dermoscopy](http://www.dermnetnz.org/procedures/dermoscopy.html) may be of benefit to those with many or [atypical moles](http://www.dermnetnz.org/lesions/atypical-naevi.html).

People who have had a nonmelanoma or keratinocyte skin cancer (BCC or SCC) are at increased risk of further skin cancer, melanoma and internal cancers in the future. This risk is particularly marked in younger people and in people that have any form of immune deficiency or immune suppression.

  Basal Cell cancers

  Squamous Cell cancers

  Melanoma cancers

**Immunisation**

Immunisation is a simple, safe and effective way of protecting people against harmful diseases that can cause serious health problems in the community. Immunisation not only protects individuals from life-threatening diseases, but also dramatically reduces transmission in the community. The more people who are vaccinated, the fewer opportunities a disease has to spread. The Australian Government’s Immunise Australia Program implements the [National Immunisation Program (NIP) Schedule](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/nips), which currently includes vaccines against a total of 16 diseases. These include routine childhood vaccinations against diseases that were once widely fatal, such as measles, diphtheria and whooping cough (pertussis), as well as more recently developed vaccines, such as Human Papillomavirus (HPV) and the meningococcal C vaccine.

Source: <http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/about-the-program>

Currently we are offereing government sponsored shingles vaccine to people aged 70-79 years. People on immune suppression therapy should NOT have this vaccine.

In the news… One Nation leader Pauline Hanson apologises for controversially suggesting there are tests available to see if children will have an adverse reaction to vaccinations, but still insists immunisation is a "personal decision". And… Prime Minister Malcolm Turnbull writes to state and territory leaders urging them to ban unvaccinated children from childcare centres.

Source: <http://www.abc.net.au/news/health/>

**Specialist fees**

* Most specialties bulk-billed between 30 and 42 per cent of visits
* The highest rates of bulk-billing were in haematology, 60 per cent, and medical oncology, 53 per cent
* The lowest was in geriatric medicine, 17 per cent
* Doctors in the Northern Territory bulk-billed 76 per cent of visits, a greater proportion than anywhere else
* Bulk-billing rates in New South Wales and South Australia were just above 40 per cent
* Western Australia was the only state with a rate below 20 per cent
* Within each specialty, the average range of charges varied by over 70 per cent

Note. We do not know what specialists charge in Tasmania. However, if we refer patients to specialists privately then there will always be a gap fee, patients are encouraged when they receive an appointment to check the list of fees before the appointment.

Source: [http://www.abc.net.au/news/2017-03-06/patients-payments-can-vary-massively-among-specialists:-report/8326686](http://www.abc.net.au/news/2017-03-06/patients-payments-can-vary-massively-among-specialists%3A-report/8326686)