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Transcript: AMA President Dr Michael Gannon, ABC News, Monday 10 July 2017

Subjects: Medicare security review; over-prescription of antibiotics

KUMI TAGUCHI: The Federal Government has commissioned a review of how health workers can access a patient's Medicare details. The review will examine the security of an online portal after personal health information was found for sale on the dark web. The Australian Medical Association has backed this review. Its president, Dr Michael Gannon, joins us now live from Perth.

Dr Gannon, thank you so much for taking time out of your work day for talking to us, we really appreciate it. What are you hoping this review will achieve?

MICHAEL GANNON: Well, what I'm hoping this review will achieve is a balance between greater security and maintaining a system where up to 45,000 patients a day are able to see a doctor, to access Medicare, despite not bringing their Medicare card details. We need to strike that balance.

KUMI TAGUCHI: Is the problem here in this particular case the system, or is it to do with some culture within some organisations, some doctor's surgery for example, where someone themselves has decided to leak this information?

MICHAEL GANNON: Well, certainly we're concerned about the breaches, and they are a problem. But to put it in perspective, we're aware of something like just over 100 Medicare card details being available on the dark web. When you take that in a system that has seen every day 45,000 times this system is used, every day there's one million Medicare services - this system is facilitating the care of roughly 4 per cent of people who turn up to a doctor's surgery and making sure they get seen in a timely way.

We don't want to throw out that timely access, but we might need to look at tightening up the security aspects.

KUMI TAGUCHI: Dr Gannon, let's talk about that - you mentioned 45,000 a day? I understand that around 200,000 doctors can access those details. Is that correct or are there other people within a surgery or within a clinic that can access that information?

MICHAEL GANNON: Well, as the system currently exists, the practice staff - receptionists, practice managers - can access that data. And in fact it's far more likely to be the doctor's staff requesting these numbers than the doctors themselves.

We warmly welcome Minister Tudge and the Government's action on this. I'm very happy to participate in the review. We need to strike the balance between tightening up the security around the Medicare numbers, but making sure that we don't restrict in any way the access of people to getting health care.

KUMI TAGUCHI: So in terms of your input into the review, what would that tightening up of security look like?

MICHAEL GANNON: Well, I won't presage what's going to be involved in the review, and certainly I'm not the person who will bring IT expertise to this. But what we will be making a case for is that this is a system that is used by nearly 200,000 patients every week, facilitating their care.

It would be a shame to throw out that system because one or maybe only two people have taken advantage of a system for criminal advantage.

KUMI TAGUCHI: Is it right that medical records can be accessed with just knowing someone's date of birth and their name? Like there's no other private system - your bank account for example, your driver's license - where it's so easy to try and get that information. Is this the area where you're talking about striking a balance? These are incredibly important and personal records.

MICHAEL GANNON: Well, the original assertions made last week is that with Medicare card details you could access someone's electronic health record. I've sought and been given reassurances, both by the relevant Minister and the head of the Australian Digital Health Agency, that that's not the case. There are a number of extra bits of information that are required to access the health records.

Equally, it's really important that we tighten up access to Medicare numbers because people might use those details fraudulently as well.

KUMI TAGUCHI: Dr Gannon, I might just tap your brains on one other story that's making the rounds today. This is about antibiotic use, and a study by the *Medical Journal of Australia* saying that in some cases they're being prescribed at over nine times the recommended rate. What's your input on to that? What's your view on that?

MICHAEL GANNON: What I would say is that proper stewardship of antimicrobials is not only good practice, it's actually ethical medicine. We need to be conscious of the issues around antimicrobial resistance, the cost of these medications, we need to look in hospitals, in the community, to try and get that balance right between proper treatment of infection, but taking judicious care when prescribing antibiotics.

KUMI TAGUCHI: So in this case, and I don't want to put you on the spot in terms of this particular study, but in 85 per cent of cases of chest colds and acute bronchitis, patients were given antibiotics for things that they didn't need to be given them for.

To you, does that say that some doctors aren't aware of what they should prescribe antibiotics for, or is there some kind of pressure by companies that sell antibiotics to sell them on to patients, or - third option - are patients going to doctor's surgery and saying 'I want some antibiotics, that's what's going to fix my problem, just prescribe them to me please?'

MICHAEL GANNON: Well to pick up on your latter point, I think that happens a lot of the time. A doctor in good faith will spend time with a patient explaining that antibiotics are no use when it comes to dealing with viral infections, but a patient will demand it for themselves or their child.

So, the response to this needs to be better stewardship in hospitals, better education for GPs, but perhaps most importantly better education for people in the community for them to understand when antibiotics are not only not required, but they're potentially dangerous or risky.

KUMI TAGUCHI: But don't people go to the doctor to get information from the doctor that they might think they need antibiotics, but the doctor's there to say 'no you don't? I'm not going to prescribe them to you'.

MICHAEL GANNON: Yeah. Well certainly it's the responsibility for doctors to consider the risks and benefits of any individual prescription, whether that's for antibiotics, other medication, the risks of tests, interpreting tests, that's the skill and expertise of a doctor is to decide where things are indicated and yeah sure, sometimes you give patients news that they're not particularly happy about.

KUMI TAGUCHI: AMA President, Dr Michael Gannon, do appreciate your time. I know you've had a lot of clients today and jumped out of your surgery, so thank you so much.

MICHAEL GANNON: Pleasure Kumi.

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