

**Australian Medical Association Limited**

ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604  
 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499  
 Website : <http://www.ama.com.au/>



**Transcript:** AMA Past President, Dr Michael Gannon, Sky News Live, *AM Agenda with Laura Jayes*, Monday, 17 June 2019

**Subject:** Male obstetricians; opioid prescribing

---

**LAURA JAYES:** Welcome back to *AM Agenda*. Well, an article at the weekend may have caught your attention. The headline was: *Is it really a job for a man?* Why do male gynaecologists and obstetricians choose their profession, the article asks. What's their motivation to specialise in the most intimate of arenas?

The article went on, and it was quite disparaging of male obstetricians and gynaecologists, and it certainly caught the attention of the former President of the AMA, Michael Gannon. He joins me live from Perth this morning. He too is an obstetrician and a gynaecologist.

Dr Gannon, thanks so much for your time. What bothered you most about this article?

**MICHAEL GANNON:** Good morning Laura. Thanks for the opportunity to respond. I thought it was 500-odd words of nastiness and ignorance, and they can't even be credited as provoking an important debate. It was not a helpful article, it was harmful to those of us who care for women, and harmful to those patients who should be entitled to have every possible confidence in those looking after them.

**LAURA JAYES:** What motivates you to do your job? Because that's what was being questioned in this article.

**MICHAEL GANNON:** Yes, this idea full of homophobic slurs and other bits of nastiness posed the question: why would a man want to have an expertise in women's health? I love my job. I feel I'm very fortunate to have it. I think of those colleagues that I work with, that have taught me, and our patients, most of us are blind to the gender of people providing the care.

To the fact that there are clear differences between men and women and how they perform, how they act, how they do the job - that diversity in the job is healthy. This idea that everyone who looks after women's health should be female is wrong. We should be aiming for diversity in all healthcare professions, in all parts of health care.

This was an ignorant article, which failed to acknowledge the outstanding services enjoyed by Australian women and girls, and what they've enjoyed over a long period of time.

**LAURA JAYES:** And it's about delivering healthy babies in the end and keeping mothers safe, I guess, and that is your central motivation. Look, I guess there are some bad apples, like in every profession, that give the rest of you a bad name. Are they largely weeded out?

**MICHAEL GANNON:** Well, that would have been a much better article to write. To talk, perhaps openly, about the system of medical education, of regulation, is the Medical Board fit for purpose, how is it performing?

But to pick out one or two examples, egregious examples of people who have undoubtedly harmed significant numbers of women, and to slur the thousands of male gynaecologists for

that, to slur the obstetricians, whether they be specialists or GPs, and the work they do, and by inference to slur the plastic surgeons, the general surgeons - any element of medicine you might care to name where people have to ask very intimate questions and perform intimate examinations, hopefully, near invariably, with great care, great sensitivity, and great professionalism.

**LAURA JAYES:** Yeah. I mean no one's arguing, Dr Gannon, that female doctors shouldn't at all be involved in any aspect of men's health.

**MICHAEL GANNON:** Well, that's exactly right. And also put in this article - where we see a false and really inappropriate sexualisation of women's health care - is implied an assertion that same sex attracted women shouldn't be obstetricians, shouldn't be gynaecologists, shouldn't be midwives or nurses. So, this article was poorly researched, it was divisive, and served no purpose. I think an apology would be the least that we would demand of Ms Gemmell.

**LAURA JAYES:** Okay. We'll see. Dr Gannon, in my experience, not being a doctor of course but having a child, there is nothing sexy about the whole process, I've got to say. Just on a lighter note, you'll probably agree with me there.

But, look, while we've got you, you are the former head of the AMA, and I wanted to ask you about this plan that the Government's looking at - a better way to treat pain. Not just reaching for pain killers and for opioids. Do you welcome that?

**MICHAEL GANNON:** Yes. So, look, I don't know too much about the proposal, but I welcome any measure which looks at treating pain outside the pharmacological approaches to pain. Laura, you'll recall that the AMA, when I was President, was very supportive of the up-scheduling of codeine. There's a lot of people with chronic [audio skips]- Very simply, medication's not the answer.

So, whether it's exercise, whether it's rehabilitation, whether it's behavioural techniques, psychological techniques - so we need to move away from the idea that drugs are the answer to chronic pain. From what I know of the proposal, I'm warmly supportive of it.

**LAURA JAYES:** Dr Michael Gannon, appreciate your time this morning, very early from Perth.

**MICHAEL GANNON:** Thanks Laura.

---

17 June 2019

**CONTACT:** John Flannery 02 6270 5477 / 0419 494 761  
Maria Hawthorne 02 6270 5478 / 0427 209 753