

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 President, Dr Tony Bartone, SKY News, *with Ashleigh Gillon*, Monday, 17 September 2018

Subject: Aged Care, Pill Testing.

ASHLEIGH GILLON: Back home now, and more on this decision to call a Royal Commission into the country’s aged care sector. Let’s bring in live from Melbourne, Tony Bartone, he is the President of the Australian Medical Association. Appreciate your time, Dr Bartone. We’ve seen report after report highlighting the problems in aged care, does a lot of the solution come down to Federal funding? Are we simply not spending enough money to provide quality staffing in these facilities?

TONY BARTONE: Good morning, Ashleigh, and thank you. Look, the funding issue is a very central and very crucial issue in this whole discussion, but there are many other things: resourcing, labour force, labour availability of trained nursing staff and the list goes on. So, the Taskforce, the inquiries that we’ve had up to now have all demonstrated that it’s a multi-faceted and multi-pronged approach that is required to try and deal with the impending issues, the impending crisis that we’re hearing, and why the motivation behind the Royal Commission being announced.

ASHLEIGH GILLON: Are you backing this push we’ve seen for mandatory staffing ratios like we see in child care centres?

TONY BARTONE: Rather than specifically mandating a specific number of staff, what we’re saying is: let’s look at what the evidence and what the research is telling us. We know that it’s inadequately resourced at the moment; the number of staff, of trained staff, is too few to go around, especially in 24-hour availability aspects. So, we need to be clear that we need to increase the numbers, and we’ll work with the other stakeholders to try and ensure that the right number are adequately positioned into the solutions.

ASHLEIGH GILLON: You have pointed out that many residents can’t access nursing care after hours without making the journey into an emergency department. That, obviously, adds substantially to the cost burden of our health system. Are you arguing that all care facilities should be forced to offer 24-hour medical care; do you think that would go quite a way to reduce the pressure on the system overall?

TONY BARTONE: What we know is that if you have a coordinated approach to the provision of care inside the aged care facilities, you can minimise the number of out of hours or emergency visits to hospital. If you’ve got everything from telemedicine to having regular medical officers visiting those patients in those facilities, and having the coordination, having trained staff at the same time, with the right amount of resourcing, you’ll significantly reduce the number of ambulance transfers; that is a very expensive imposition on the system. And we can then use those funds to better provide for the care in terms of everything inside aged care facilities, but also in the number of aged care home packages; which is significantly short at the moment, and part of the solution to keeping Australians out of aged care facilities.

ASHLEIGH GILLON: Dr Bartone, we've seen some more alarming news for many older Australians today, coming in the form of a major study that's found that an aspirin a day will not prevent a heart attack, but is likely to increase risks of bleeding in older people. How have we got it so wrong, about aspirin, for so long?

TONY BARTONE: Look, it's not that we've got it so wrong. We've had some pretty good ideas that there was a dubious area in terms of primary prevention that is where you've got a healthy person, and they were taking it to try and prevent a situation. We know that the evidence for the use of aspirin in those patients, who already had heart disease or other circulatory issues, they can actually prevent secondary issues, secondary episodes of either heart attacks or strokes happening in those patients. But here, this study has been looking at primary, so in terms of people previously well, and the evidence has come in and clearly shown that there is no benefit, and in fact, it can create secondary other issues which are obviously of concern. So, this is a welcomed study, but everybody who is currently taking aspirin should obviously see their GP before making changes to their regime. And we welcome all those inquiries into our consultation rooms today.

ASHLEIGH GILLON: It is really confusing, isn't it, for patients? Because the message from you now is essentially: If you don't need aspirin, don't use it. But there is also a belief in some quarters, that aspirin could protect against some cancers. How does the average person try and navigate what is such conflicting advice in this space?

TONY BARTONE: And this points to always having a full and frank discussion with your treating GP or other specialist provider in this area. So, it's important to understand that evidence is being continually amalgamated and accumulated. Studies are going on, as we speak, everywhere, on various aspects. This is just another example of how it's important to be up to date with the information transfer, and health literacy; which is a key part of keeping all Australians well and that's part of the relationship with your family doctor.

ASHLEIGH GILLON: Just finally, Dr Bartone. Two people died, another three were left critically ill after suspected overdoses at a music festival in New South Wales over the weekend. Does the AMA support pill testing? Is that something that would save lives, in your view?

TONY BARTONE: We've got a clear approach on this area. Obviously, we can't have situations like what we've seen on the weekend. And we need to be clear that we have proper coordinated clinical trials to look at the evidence, to see if pill testing does have a role to play. So an innovative approach, under controlled circumstances, and look at the evidence and look at the outcomes, then make an informed decision. We can't continue to just use a law enforcement solution after what's happened on two episodes over the weekend. We have a serious problem, it is out of control, and we need to have a look at a raft of solutions in terms of dealing with these issues.

ASHLEIGH GILLON: So just shutting down the festival, as the New South Wales Government is planning to do isn't good enough, in your view?

TONY BARTONE: Look, shutting down the festival, obviously, will reduce the incidents like the weekend, but there'll be other opportunities, other venues, other occasions where pills of dubious origin will be taken by young and unsuspecting drug users. We need to have better education; we need to inform them of the harms. The actual episode of testing the pill is not just saying: "Oh, that's an okay drug. You can take that." It's about an opportunity to try and inform the person, or persons involved, about the dangerous consequences and try to get an opportunity to give them education and access to rehabilitation in terms of trying to reduce their drug dependency.

ASHLEIGH GILLON: Dr Tony Bartone, the President of the Australian Medical Association, appreciate you joining us live there from Melbourne, thank you.

TONY BARTONE: My pleasure, thank you.

17 September 2018

CONTACT: Maria Hawthorne 02 6270 5478 / 0427 209 753

Follow the AMA Media on Twitter: http://twitter.com/ama_media

Follow the AMA President on Twitter: <http://twitter.com/amapresident>

Follow *Australian Medicine* on Twitter: <https://twitter.com/amaausmed>

Like the AMA on Facebook <https://www.facebook.com/AustralianMedicalAssociation>