

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, Radio 3AW, *Breakfast with Ross Stevenson and John Burns*, Monday 20 August 2018

Subject: Opioids and prescription monitoring, Caffeine and energy drinks

ROSS STEVENSON: So many medical stories in the newspapers today. We hardly know where to start, Dr Tony Bartone, President of the AMA. Doctor, good morning to you.

TONY BARTONE: Good morning, Ross.

ROSS STEVENSON: Are you happy for us to take questions- for you to take questions on a range of these medical matters in the paper this morning?

TONY BARTONE: Well, I'll try to comment on all of them for you, Ross.

ROSS STEVENSON: Right. Rising number of Australians are dying from accidentally overdosing on prescription drugs like morphine, codeine, oxycodone, and fentanyl. I've had Endone, that'd be one of those- it's an opioid, is it not?

TONY BARTONE: Correct.

ROSS STEVENSON: Right, because I had a back operation. I couldn't wait to stop using it. I didn't remember it giving me any high or any of that note. Is it different - these drugs - different if you don't have underlying pain?

TONY BARTONE: Well, this is part of the problem, Ross. They're prescribed usually in the first instance appropriately for certain severe pain, or a pain medication treatment, and then unfortunately because of pain and poor management, or unsupervised continuing reliance on them, they become dependent on them to try and manage that pain. And so sometimes it's a bit of a vicious circle, the pain is not being tolerated well. You reach for more, and you seek more, and you actually need to have more and it's a bit of a slippery slope. Otherwise...

ROSS STEVENSON: [Interrupts] So how do you get your hands on enough to kill you, if you're doing it accidentally?

TONY BARTONE: Well the thing is, it's actually because it's over time usually and it's in combination usually with other medications. Rarely is it one of these drugs in your system, there's usually a combination or a cocktail. And part of the reason behind the recent change in the way codeine was being dispensed at the chemist front section from S3 to S4 becoming script-only. Part of also some of the script monitoring and the script alert services that are coming into effect in various jurisdictions in Victoria, it's already being implemented. But around the country, it's still a bit of a slow process. But what that'll help to do is actually alert you if the patient in front of you has seen other doctors, obtained other scripts...

ROSS STEVENSON: [Talks over] That would be handy.

TONY BARTONE: ...So, we've been calling for this real-time prescription monitoring for the best part of the decade and it's taken as long as this because of various reasons, both State and Federal, but it's slowly being rolled out. And, as I say, Victoria's already leading the pack, Tasmania had a bit of a modified system in part of the State, but the rest of the country are still trying to do something in that space.

ROSS STEVENSON: Got you. Doc, kids are being targeted by supplement companies who've got caffeine-loaded supplements to help them stay awake playing video games. Do they work?

TONY BARTONE: Well, they do work in that, basically, they have these effects of giving them the energy rush and then the immediate desire to continue - the alertness, the mental stimulation. But, unfortunately, it becomes a vicious continuous thing, especially the way they're being marketed in terms of 12-hour marathon gaming sessions. Apart from the effects of the screen addiction, and the screen time, and all those things that come to mind when you talk about 12-hour marathon gaming stints, you also got the excessive amounts of caffeine, which hasn't really been monitored in children...

ROSS STEVENSON: [Interrupts] Does caffeine affect everyone the same way? I don't get any buzz from caffeine at all.

TONY BARTONE: Well, you've mentioned the amount of caffeine in these supplements and these drinks is beyond the cup of coffee amount of caffeine, and some people in our community are extremely sensitive to the effects of caffeine. Some people can't tolerate coffee at all and that's why they have a decaf coffee of that nature. But some of us can and especially if you...

ROSS STEVENSON: [Interrupts] Just as a matter of interest, Doc, have you had a coffee this morning?

TONY BARTONE: Not as yet, John- Ross, sorry.

ROSS STEVENSON: Gee whiz. I'd hate to hear you peaking after you've had a coffee [laughs]

TONY BARTONE: I've been to the gym.

ROSS STEVENSON: Are you talking about these energy drinks as well?

TONY BARTONE: Yes, of course. Basically, these energy drinks are the other side of the equation. If you've got both caffeine and sugar in high-concentrations in these drinks, not only are you getting the caffeine rush and the caffeine stimulation, but you're also getting the energy sugar rush, which leads to a high, and then almost immediately a low, so that you want to have more.

ROSS STEVENSON: Good on you, Doc.

20 August 2018

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