



Dr Mitchell will complete the final surgical module on nose and lower limb next Feb 2018 to attain the Advance Diploma in Skin Cancer Surgery. Doing a double Masters has become logistically impossible, so the Masters In Skin Cancer Medicine will be completed after the Public Health and Tropical Medicine one!!

The visiting dermatologists and surgeons at the Alice Springs Hospital are aware of what we can offer and in no way are we trying to replace that service. It has become apparent though that some patients just want a referral to those specialities, without really wanting to listen to alternative options or utilise our surgical abilities on site.

I would think that perhaps any GP in town could do such a referral in a single appointment and both you, the patient and us here would be less frustrated by how the skin cancer clinic appointments are being used. They are designed to be a full top-to-toe physical check looking at your entire skin and please remember wearing makeup (in particular mascara and eyeshadow) makes it really hard to see any subtle solar keratosis or other skin damage.

We are auditing our surgical excisions through ClinPath as part of upskilling, as well as ensuring appropriate management is offered rather than just cut for the sake of it; currently at 90% accuracy.



Susie is so close now to finishing her mentor year to fulfil requirements for being given her own Medicare provider number. Thus other GPs and clinics can refer their patients to her next year for diabetes management advice, so if you know other patients with this condition who use different clinics, feel free to let them know about Susie if you have found she has helped you better manage this chronic condition!!

PRE-TRAVEL CONCEPTS

- ◆ Pre-travel preventative health planning
- ◆ Vaccinations
- ◆ Malaria
- ◆ Arthropod Borne Disease
- ◆ Animal Zoonoses: Rabies
- ◆ Travellers illnesses including traveller's diarrhoea and accidents
- ◆ Travelling by Air, Sea, Land - Special Travel: Children or the Elderly Travellers, Women and pregnancy, Expedition, diving, trekking
- ◆ Safety and security • Post-travel assessment



NEWSLETTER

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DOCTORS

Dr Deb Mitchell

PRACTICE NURSE/DIABETES EDUCATOR

Susie Leister RN

PRACTICE NURSE

Tammy McCormack RN

ADMINISTRATIVE TEAM

Practice Manager—Susie Leister

Receptionist—Lynlee Sleep

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WHAT'S NEW?

Alice Specialised Medicine is excited to announce that we have successfully recruited a new practice nurse Tammy who starts mid August 2017. The plan is to better utilise Susie as a diabetic educator, as she will have her own provider number next year, and transition her away from routine "Team Care Arrangements" for patients with chronic diseases, including ECGs and spirometry.

This extra pair of hands means we will be better able to offer appropriate chronic disease care when appropriate, and annual health checks, which perhaps have slipped through the cracks while we have been so busy with limited staff. The hope is also to involve Tammy in the Travel Medicine consults, not only as a resource for immunisations after an initial GP visit, but also for general education on prevention of various travel ailments. We are excited about the opportunities to provide more holistic and thorough travel advice.

We will be trialling a new travel form for all travel consultations that should hopefully streamline both the consult, and any intended follow up vaccination schedule or chemoprophylaxis for malaria. Our rationale is to promote the best travel advice so you enjoy your well deserved holiday, or corporate business trip, without the unintended minor medical ailments that can really "stuff a holiday".

RABIES & why should a traveler think about it?

Presently, 3.11 billion people are living in 15 countries in Asia and the Western Pacific that are endemic for dog rabies. A person dies from Rabies somewhere in the world every 15 minutes .

Globally: 60,000 plus human cases per year

- India: +/- 20-30,000 deaths/yr, 5 mill post expos. treats/yr but 1:6 receives appropriate PEP

- Africa: 24,000 deaths/yr (2010)

- Thailand: approx 6% dogs in Bangkok are rabid, equating to 1:10 strays. Backpackers in Thailand, staying 30+ days the incidence of being bitten or licked – 6.9 and 36 per 1000 individuals. It is estimated that 1 Million of the total Thai pop of 65 Million are bitten by dogs each year. Injury caused by animals occurs in about 1-6% of tourists visiting these areas.

There is a recent study showing the monthly incidence of potentially rabid animal bite: 0.1 per 1000 . The monthly incidence of potentially rabid animal licking: 0.3 per 1000 . This same study shows that 54% of exposures in SE Asia took place within the first 10 days of being in the country.

Rabies is an acute, progressive, incurable viral encephalitis—it is 100% fatal if not vaccinated against (which gives you time to get the next Rx) with immediate post-exposure treatment. The commonest mode of transmission is being bitten by an infected dog, although some bats also transmit this Lyssa virus (the type we have in Australia), and in particular bites on the hands and face carry high risk. Think of toddlers, and young kids in particular!



Alice Travel Medicine

Dr Mitchell has just returned from an intensive module as part of her Masters in Public Health and Tropical Medicine, which focused on "Travel Medicine". We are starting to implement the recommended changes, and it was interesting to be reminded that over 50% of Australians who travel overseas do not seek any travel advice prior to their departure. Statistics for 2016 stated over 1.1 billion people travelled globally (crossed a country's border) in 2016.

Patients, travel agents and insurance companies seem to think the most important thing about a travel consult is whether vaccinations are mandated—ie. Yellow fever restrictions in various countries in West Africa, and South America.

Yet infectious disease is only a small part of a good travel consult and now that we have an extra practice nurse on board ASM—ATM plan to trial better ways to safely educate and help patient's better plan and understand their risk assessment for their particular trip.

Skillful and up to date global information about your intended place of travel, taking into consideration your general health, length of time and intended activities while in that country, will mean less unnecessary expense on vaccines not required, versus less adverse events from common traveler's diarrhea and accidents which are way more common.