



New anti-smoking drug to be listed on PBS

Michael Woodhead

A novel new smoking cessation drug, varenicline (Champix), has been approved for listing on the PBS as an alternative to Zyban (bupropion).

The drug is a partial agonist at nicotine cholinergic receptors in the CNS, where it is said to reduce the cravings for tobacco and help in quitting.

The Pharmaceutical Benefits Advisory Committee recommended that the drug be PBS listed as an authority



item for short term treatment in smoking cessation attempts on the grounds that it appeared to be as cost effective as current treatment Zyban. In the same meeting the PBAC also recommended that Seroquel (quetiapine) be PBS listed for

use as monotherapy in the treatment of bipolar disorder. For osteoporosis, the PBAC also recommended listing strontium ranelate (Protos) 2g sachets for woman aged 70 years or older with a bone mineral density (BMD) T-score of -3.0 .

Solarium cancer curbs

Stricter regulation of tanning salons is going to be extended nationally, with Federal health minister Tony Abbott urging the states to follow Victoria's lead in introducing safety measures for UV exposure.

On Friday we mentioned in *6minutes* how Victoria was to make the current voluntary code of practice for solariums into a legally enforceable regulatory code. Solariums that breach the recommended limits on UV exposure and use by young people will face financial penalties when the code is enacted.

On Friday, Mr Abbott said he was writing to all states to ask them to adopt similar measures.

GPs' ECG skills in question

Dr Kerri Parnell

We're not sure about GPs in Australia, but UK GPs' skills in ECG reading have been severely questioned by a study finding they miss atrial fibrillation in about one in five cases.

In fact, the GPs did not perform as well as an interpretative ECG machine, although they did better than a practice nurses.

Published in this week's *BMJ*, the study found that the GPs and nurses detected a similar proportion of AF cases on

ECG, but nurses had a lower specificity, ie they had more false positives.

Even so, a diagnosis of atrial fibrillation by a GP was less likely to be wrong than right, the study of 50 practices found.

However, the ability of individual nurses and doctors to detect AF varied widely.

Strategies to improve the diagnosis of atrial fibrillation in the community are needed, the authors say.

"Computer software performed much better, but still had an error rate sufficiently

high to mean that decisions on treatment cannot be based on diagnosis by computer alone, even when combined with interpretation by a general practitioner", they say.

BMJ Online First
Comment [here](#).



equipmed

DermLite 'Handheld Skin Examination Devices' from \$475.00 plus GST

- No-oil dermatoscope
- 10 x Magnification
- Fits in your pocket
- Powerful skin screening tool
- 5 Year Warranty



Call **1300 668 755**, email marketing@equipmed.com or visit our website www.equipmed.com

Advertisement removed

Lose weight, live longer

■ Dr Kerri Parnell

It's not news that we're in the midst of an obesity epidemic, nor that our expanding girths are a time bomb for diabetes and other life-threatening conditions. What is surprising however is that good evidence showing intentional weight loss improves lifespan has been missing – until now.

Two studies in this week's *NEJM* have addressed this question, and according to an accompanying **editorial**, "the answer is a resounding yes".

A prospective Swedish **study** of over 4000 obese patients found those treated surgically – with gastric bypass, vertical banded gastroplasty or gastric banding had weight losses of 25%, 16% and 14% respectively after ten years. The average weight change in a matched control group who received usual care was less +/- 2%.

Surgery was associated with a reduced mortality during a period of 16 years, with 129 subjects (6.3%) in the control group dying compared with 101 (5%) in the surgery group.

The reduction increased after adjusting for confounding variables.

The **second study** in the journal found that after gastric bypass, deaths from all causes were reduced by 40%, from diabetes by 92% and from heart disease by 56%.

According to the editorial, the findings are the missing link in obesity research and the message is simple – lose weight, live longer.

NEJM 2007; 357;741-52;753-761;818-20

Comment [here](#).

Pick a policy and WIN an iPod

We'd like to invite *6minutes* readers to send a message to Canberra – and win an iPod nano.

Tell us the one thing you'd like to see change after the election. Hospital closures? Medicare changes? Workforce solutions? Send us your message for health minister Tony Abbott or opposition health spokeswoman Nicola Roxon – and we will pass it on.

The most succinct, relevant and well argued plea will win an iPod nano. **Competition closes 24th September. Click Here**

Age shall not weary them ...

■ Dr Kerri Parnell

Sexually active people in their sixth to eighth decades have just as much sex as those in their younger years, despite about half reporting a "bothersome" sexual problem, a **study** shows.

A major barrier to an active sex life, especially for women, was the lack of a partner, the US study of people aged 57 to 85 shows. At any given age, women were less likely to be in a marital or other intimate relationship, say the authors of the study published in the *NEJM*, and this difference increased dramatically with age.

But though the likelihood of being sexually active declines steadily with age, over half of the sexually active group aged 75 to 85 had sex at least twice or three times a month, and 23% reported having sex at least weekly.

Not surprisingly, the likelihood of being sexually active was positively associated with good health.

Among men, the most prevalent sexual problems were erectile dysfunction, low libido, climaxing too quickly and performance anxiety. Among women, the most common problems were difficulty with



Older people stay sexually active

lubrication, anorgasmia, not finding sex pleasurable and pain.

Of the sample of over 3000 adults, 14% of men and 1% of women reported taking prescription or non-prescription products to improve sexual function in the previous year.

NEJM 2007; 357;762-74.

Comment [here](#).

The 6minutes team

Editor: Michael Woodhead: 02 0422 2732, michael.woodhead@6minutes.com.au
Executive Editor: Dr Kerri Parnell: 02 9422 2792, kerri.parnell@6minutes.com.au
Advertising Manager: Victoria Seymour 02 9422 2812, victoria@6minutes.com.au

6minutes is published three times a week by Reed Business Information.

COBRAM ON THE MURRAY THE PLACE TO BE!

A skilled General Practitioner is required to work in our busy, fully computerized, accredited and friendly practice, which is supported by a hospital that was awarded by the Premier of Victoria as the "Most Outstanding Rural Health Service 2006"

Our 5 doctor practice has a great mix of both male and female doctors with a strong commitment to the Cobram Medical Clinic Team.

Generous remuneration of 70% of your receipts

The region offers excellent schooling and child care services and if your partner requires employment, we are able to provide assistance.

Commonly known as the "Gateway to the Murray" Cobram has many attractive sandy beaches which are popular with swimmers and campers, while boating and fishing are common activities along the river itself. If golf is your thing, the Cobram region can offer some of the best golf courses in Australia.

A comfortable 3 hour drive to Melbourne or a 90 minute drive to the Albury Airport will ensure that you can get to Melbourne or Sydney for the weekend.

For more information please call Mrs. Lorna Gray, Practice Manager at Cobram Medical Clinic on (03) 5871 1433 or email Lorna : channel@inet.net.au

In the surgery

GP super clinics no health panacea



■ Dr Kerri Parnell

It's like some sort of trump card dragged out by pollies of all persuasions before each election – “GP clinics”. Now Kevin Rudd's promising us “GP super clinics”; “super-duper GP clinics” will probably be next.

While it's great that health, especially primary health, is so firmly on the agenda in the upcoming federal election, I can't be the only one with a sense of déjà vu. But while overall the clinics have much

to recommend them, what really troubles me about the promises, regardless of which side of politics is doing the promising, is the underlying muddy thinking.

To listen to Kevin Rudd you'd think “GP super clinics” are the panacea for all the health system's ills.

For instance, Mr Rudd says they will reduce the pressure on emergency departments and people will no longer have to go to A&E for every little thing. He's on thin ice here. For a start, GPs and emergency doctors agree on this one, only a minority of patients attending A&E are in the most serious categories. As well, the clinics are to be set up in the bush and outer suburbs, not necessarily where ED and hospital overcrowding is at its worst.

Nor will new clinics, whether super or not, fix the politicians' problem of patient demands for medical access 24/7 for non-emergency care.



Furthermore, according to reports most of the funds would go to infrastructure. But lovely as a large purpose-built clinic might be, the lack of them is not our main problem – which is a shortage of GPs willing to work in rural and outer metropolitan areas. The health system won't be improved significantly by clinics pinching the doctor

down the road.

On the other hand, some of the claimed benefits are real. True integrated, multidisciplinary care benefits patients with chronic illnesses, regardless of where they live. And such clinics would be great for training some of the upcoming flood of medical graduates, so long as they're in the right hands, which brings us to the need for quality assurance.

Funding issues are another unacknowledged stumbling block which needs to be overcome.

So bring on “GP super clinics”, but let's be very careful about expecting them to solve all our problems, and even more careful about how they're set up and by whom.

Comment [here](#).

Advertisement removed

To enquire about advertising in 6 minutes please contact our Advertising Manager: **Victoria Seymour** on 02 9422 2812 or advertise@6minutes.com.au



BURWOOD

Full time/part time Dr required for busy, well established, modern, accredited, fully computerised, mixed billing family practice with nursing support.

Excellent remuneration and no after hours or on call.

We can offer flexible working hours with scope to practice special interests and we are looking for someone genuinely dedicated to provision of high quality family medicine to join our friendly team of 6 doctors, nurses and admin staff.

Further information please contact Trent Brooks 0418 103 410 or email trent.brooks@guardianmedical.com.au

BRISBANE SOUTH

Only 20 mins from CBD FT VR GP.

- Required ASAP.
- OTD Can apply especially UK.
- Grads with MRCGP.
- Privately owned, Nurse support.
- Also Urgently needed DRS for AH.
- Weekends and Evening work.

Email: elizstmc@bigpond.net.au Ph: 07 3277 7500



The Australasian College of Cosmetic Surgery

Raising Standards, Protecting Patients
ACCS Dermal Fillers Workshop

DIPLOMA OF COSMETIC MEDICINE

Launched by ACCS

The ACCS has launched the first Diploma of Cosmetic Medicine course in Australia. The program will train doctors in the following:

- Skin Care • Scar Treatment
- Acne management strategies
- Wrinkle Treatments • Dermal Fillers
- Laser and Light based Therapies

Entry criteria: Candidates must have a minimum of 5 years experience as a medical practitioner post-graduation.

Upcoming Workshops Sep - Nov 2007

The Complete Correction, Hands On Esthesis, Juverderm & Botox, Laser Safety

For more information call 1800 804 781
www.accs.org.au

OPPORTUNITY AWAITS GP'S WITH A SPECIAL INTEREST IN SKIN CANCER WHO WANT TO WORK FOR A GROUP OWNED BY DOCTORS.

What you can expect

- Facilities located in great locations
 - Plenty of patients
- An excellent remuneration package
 - Attractive bonus system
 - Initial and ongoing training
- Assistance in obtaining the SCSA Certificate
 - A professional and friendly team
 - Work when you want to

CALL NOW

Janine Dale (02) 4954 6300 or Julie George 0403 344 188
Email : jdale@austskincancer.com.au



Australian Skin Cancer Clinics

Matrix
Healthcare
Pty Ltd

symbion
Medical Centres



GENERAL PRACTITIONER REQUIRED SOUTHPORT, GOLD COAST

A long established, extremely busy privately billing practice in the rapidly expanding area of Southport is seeking a full or part time GP. This well managed, progressive practice offers the right GP a high income potential.

The practice is ideally located on the basement level of the Australia Fair Shopping Centre on the northern end of the Gold Coast. The practice operating hours are 7.00am to 5.30pm Monday - Friday and 8.00am to 11.30am Saturday.

- Remuneration by negotiation with a possible upfront capital payment
- Fulltime clinical and EPC nursing staff
- Complete clinical autonomy
- Fully Computerised
- Accredited General Practice

For more details please contact Carla Mitchell on (07) 5532 3466 or email carla.mitchell@symbionmc.com

You said it...

Hurdles lowered for patient plaintiffs

I think that this concept of loss of chance demonstrates a lack of understanding of the natural history of disease, or of the nature of probability in general. To see what I mean, one needs only to put the term "unexpected remission" into the search line of PubMed. What if we were able to sue barristers on the same basis? After all there must be a finite chance that Ned Kelly could have been found innocent. What if his relatives had then decided to sue his defence barrister for loss of chance?

Guy Hibbins

Just to let you know how look forward to and enjoy *6minutes*. Having retired due to at advanced old age (now 84) I like many of us have been abandoned by the medical press that kept us abreast of medicine in our productive years. Thank you for keeping my mind alert and I wish you continued success with your venture

Dr William Sacks

GPs excel in skin cancer management

Recent published evidence (*MJA* 2007; 187(4): 215-220), shows that GPs and those that work in skin cancer clinics have similar accuracies in diagnosing skin cancers.

There is no doubt that there are "cowboys" operating some skin cancer clinics, and equally there are "cowboys" operating in general practice. Please do not insult those of us who are operating skin clinics with high clinical and ethical standards.

Nicholas Bostock-Ling

Coroners and confidentiality

I have never attended a coroners court hearing despite attending the morgue many times over the years for the purposes of identifying deceased patients. The role of the Coroner is to determine the identity of the deceased and the date, place, manner and medical cause of death of the deceased. In order to fulfil this role, the Coroner relies on information obtained from pathologists, police personnel, general practitioners and specialist physicians." I don't know how an American style Medical Examiner would do any better; except of course if some film director could turn it into a soapie!-- look out Columbo! Perhaps Coroners court proceedings should not be immediately open to the public as their findings may prejudice any potential prosecution or trial that may follow.

Dr C. Dassos

[Comment here.](#)

Obesity crisis to be solved by blunt forks

It's being promoted as the answer to the obesity problem in the US. The super **Fitness Diet Fork** (only \$8.95) reduces food intake because it has "shorter and dulled teeth inhibiting [the] user from grasping larger pieces of food at any one time". It also has an "uncomfortable grip compelling user to put fork down between bites, slowing the user's eating speed" and "smaller triangular shaped surface area allowing dieter to hold less food than many other forks."

Bu wait there's more: the Diet Fork will also boost your "chewing fitness". *6minutes* is reminded of the "low sodium"

salt shakers once trialled by researchers to try prevent hypertension. The salt dispenser had a tiny hole allowing only a few grains of salt to be shaken out each time. Unfortunately for the nation's BP levels, almost all users remedied this by widening the hole with their fork.

As for the Diet Fork, we suggest switching to chopsticks instead – they definitely make food harder to grasp!



New norovirus bug here

A new and virulent strain of norovirus is predicted to cause major outbreaks of gastroenteritis in Australia over the next few months, according to virologists.

The strain, norovirus 2006b, has already spread through Europe, is more contagious than previously encountered strains and has already been linked to

outbreaks of gastroenteritis in South Eastern states.

"We are seeing a wave of multiple outbreaks that is already spreading across Australia," said virologist Dr Peter White, from the University of NSW.

The virus is expected to hit childcare centres, nursing homes and hospitals, he said.



The Australasian College of Cosmetic Surgery
Raising Standards, Protecting Patients

• **ACCS Suturing Workshop**
1 September 2007
Venue: Rydges Hotel Parramatta •

The ACCS Suturing Workshop is an educational initiative of the Australasian College of Cosmetic Surgery designed for doctors working to enhance their suturing skills and techniques.

Course content and registration details can be downloaded from the ACCS Website www.accs.org.au or by calling 1800 804 781 or email: admin@accs.org.au

FT / PT VR GP required in Jerrabomberra.

Accred, computerised, private billing & RN Support. Also suit GP Registrars.

Please send emails to:
bernard_leung@optusnet.com.au

CASTLEMAINE

F/T VR GP req for busy rural practice. Currently 6 doctors (mix F/T, P/T) working from custom built premises less than 2 years old. AGPAL accredited

- Computerised
- 1.2 EFT nursing support
- Hospital VMO appointment

PH: (03) 54706144 (Office manager)
email: katrina@impulse.net.au