



NEW KNOWLEDGE ON PERENNIAL PROBLEMS SYMPOSIUM

SPEAKER PROFILES

Prof. Campbell Murdoch, Head of the Rural and Remote Medicine and Head of the School of Primary, Aboriginal and Rural Health Care in the University of Western Australia, Kalgoorlie. He has been an academic in generalist disciplines since 1977 in Scotland, New Zealand, the United Arab Emirates, Malaysia and Australia. His research interests are in Rural Medicine and Education, Down's syndrome, health of the elderly and Chronic Fatigue Syndrome. He holds an MD from the University of Glasgow on Down's Syndrome and a PhD from the University of Dundee on the care of the elderly. In 2002 he published a monograph with Harriet Denz-Penhey entitled "Chronic Fatigue Syndrome: a patient centred approach".

Presentation: *Fatigue is one of the most common presentations in primary care and there are many possible diagnoses down the track, some of them with fatal outcomes even in young people. There are few scenarios which challenge our clinical acumen more but the vast majority end in a negative outcome. "The doctor said there was nothing wrong with me", should be a reassuring statement but for many it is unfortunately the introduction to a life of chronic morbidity. This presentation will not provide any stock answer to this difficult problem but will discuss ways in which we can approach the problem in a way which will both avoid missing the unusual tragedy and setting the scene for a more healing approach to one of the most common chronic health problems.*

Assoc. Prof. Allan Need, Department of Medicine, Institute of Medical and Veterinary Science, Adelaide. Allan is a physician and chemical pathologist who has worked in the Osteoporosis Clinic of the Royal Adelaide hospital for 30 years. He is a founding council member of the Australian and New Zealand Bone and Mineral Society and Associate Professor at the University of Adelaide. He has published over 150 papers on bone density measurement, fractures, calcium metabolism, vitamin D and age-related bone loss in men and women. His current interests are in calcium nutrition and vitamin D action.

Presentation: *Calcium balance studies indicate that the calcium requirement rises at the menopause to 1300 mg/d but the mean intake is still only about 800 mg/d. Randomised controlled trials show that calcium can slow or prevent bone loss after the menopause and probably reduce fractures but the latter has been found only by "per protocol" analysis and not by "intention to treat". In the elderly vitamin D has been found to reduce fractures when combined with calcium and clearly can prevent falls. Vitamin D may also have other benefits, e.g. prevention of colon, breast and prostate cancer.*

Assoc. Prof. Mimi Tang, Director of Allergy and Immunology, The Royal Children's Hospital, Melbourne. She is a member of anaphylaxis working party of Australian Society Clinical Immunology and Allergy (ASCIA) and is the Paediatric representative on ASCIA council. She is also on the Medical Advisory Board of Anaphylaxis Australia Inc (AAI) the patient support organisation for individuals with food allergy and anaphylaxis. She is actively involved in clinical patient care, teaching and research.

Presentation: *Rates of allergic disease have risen dramatically in recent decades. Australia has one of the highest rates of allergic disease worldwide, and allergy problems represent the commonest chronic illnesses affecting our children. With rising prevalence there has been rising concern particularly regarding anaphylaxis. Prof. Tang will discuss anaphylaxis management and guidelines/policies.*

Assoc. Prof. John Daubenton, Department of Paediatrics, Royal Hobart Hospital. Professor Daubenton moved to his present position in Hobart in April 2005. He underwent Undergraduate training at Witwatersrand University in Johannesburg in 1977, Postgraduate training at the Red Cross War Memorial Children's Hospital/University of Cape Town (UCT)-Fellowship in Paediatrics in 1984, Doctorate (MD) by research thesis-graduated in 1989. Ad Hominem promotion to Associate Professor, Department of Paediatrics, UCT in 1999. Consulted at the Red Cross Children's Hospital in Cape Town from 1985 to 2005 with the latter part of my clinical career spent in the Paediatric oncology service. Professor Daubenton had sabbatical leave that was spent as a senior fellow at the Sydney Children's Hospital from March to December 2006 working in the Paediatric oncology service to gain experience in particular in bone marrow transplantation.

Presentation: *An overview of the common malignancies in childhood and a reminder of the "red flag" warning signs for cancers in children.*

Dr Tim Greenaway. Tim completed his undergraduate studies at the University of Sydney and training in Endocrinology at the Royal Prince Alfred Hospital. He was awarded a NHMRC Postgraduate Medical Scholarship to undertake doctoral studies into insulin resistance within the Faculty of Medicine at the University of Sydney. He is currently the Director of Clinical Endocrinology at the Royal Hobart Hospital and a Clinical Associate Professor in the School of Medicine, Faculty of Health Sciences, University of Tasmania. Tim is actively involved in undergraduate and postgraduate medical education and clinical research.

Presentation: *There is convincing evidence that treatment which achieves near normal levels of glycaemia in patients with type 2 diabetes significantly reduces microvascular complications of the disease in particular and is cost effective. However, the importance of self-monitoring of blood glucose (SMBG) by type 2 diabetic patients is less well established and is currently the subject of debate. A recent systematic review¹ which suggested that SMBG in patients with type 2 diabetes not treated with insulin was associated with a reduction in HbA1c has been criticised on methodological grounds and recent cross-sectional² and prospective³ studies have not shown glycaemic benefit from SMBG in such patients. This issue will be discussed in detail in the general context of our current approach to the management of patients with type 2 diabetes.*

1. *Welschen LMC et al.: Self-monitoring of blood glucose in patients with type 2 diabetes who are not using insulin. Diabetes Care 28: 1510-1517, 2005*
2. *Davis W et al.: Is self-monitoring of blood glucose appropriate for all type 2 diabetic patients? Diabetes Care 29: 1764-1770, 2006*
3. *Farmer A et al.: Impact of self monitoring of blood glucose in the management of patients with non-insulin treated diabetes: open parallel group randomised trial. BMJ 335(7611): 132, 2007.*

Dr Katherine Marsden, Katherine Marsden is a haematologist who is Director of Pathology at Royal Hobart Hospital. Honorary Research Associate in the Menzies Research Institute and Clinical Senior Lecturer in Pathology at University of Tasmania. She is also the Chair of the Haematology Quality Assurance Program of the Royal College of Pathologists of Australasia. Her current interest and research collaborations include strategies for improving management of oral anticoagulant therapy, improving blood transfusion practice, external quality assurance programs in haematology and genetic investigations in familial leukaemias and lymphomas.

Presentation: *Poor anticoagulant control is still a common cause of adverse drug reactions (ADR) and of hospital admissions due to ADR. A perennial problem for optimal anticoagulant control is the need for regular INR tests. A number of Point of Care (POC) INR devices are now available to facilitate more convenient INR testing, for example in hospital clinics, medical practitioner surgeries or patient homes. INR monitoring with these can lead to anticoagulant control equivalent to or better than traditional laboratory monitoring. In addition patient self-monitoring programs have been established, particularly overseas which have led to improved INR control for suitable patients. This presentation will review the use of POC INR devices and some recent innovative local programs which have been undertaken to assess their role.*

Dr Maree O'Sullivan, Director of the Sexual Health Service of Tasmania. She has previously worked in general practice and as a Senior Medical Officer in Sexual Health at the Gold Coast Sexual Health Clinic. Her areas of clinical interest include HIV medicine, genital dermatology and transgender management.

Presentation: *Dr. O'Sullivan will present an update in recent developments in the management of sexually transmissible infections including preventive measures such as vaccination and circumcision. She will also provide an overview of the epidemiology of Chlamydia infections within the state of Tasmania.*

Dr Udayan Ray, Director of Chemical Pathology, Royal Hobart Hospital and Clinical Associate Professor of Pathology, University of Tasmania. Udayan has worked in O&G, General Practice, Occupational Medicine and Clinical Pathology in India. With community support he used to run a community hospital for women and children in Calcutta from 1980 till 1991 and here he used to clinically manage the destitute single mothers of the Mother Teresa's Missionaries of Charity. With WHO Fellowship in Workers' Health he had travelled to UK, Germany, South Korea and Singapore in 1990. He was a Staff Specialist and Lecturer in Chemical Pathology and Coordinator of Pathology Services in Port Moresby General Hospital, University of Papua New Guinea from 1991 to 2001. He was a registrar in Haematology on his sabbatical in Canterbury Hospital in Christchurch. Since arriving in Hobart in 2003 he has been an enthusiastic educator of both undergraduate Medical Students and postgraduate Scientific Staff. In his doctoral works he has been working on insulin, nitric oxide, and platelets and their role in cardiac metabolism and ischaemic cardiac disease.

Presentation: *Day to day clinical cases in Evidenced Based Practice in Medicine.*

Each individual is genetically unique and disease expression results from the interaction between the disease agent and their genotype.

In our day to day practice we come across of lot of patient scenarios either of similar expression but dissimilar diagnosis or dissimilar expression with similar diagnosis. A few clinical cases from various corners of clinical practice will be presented here for discussion.

Dr Stephen Raymond, Staff Specialist, Department of Obstetrics and Gynaecology, Royal Hobart Hospital. Steve Raymond graduated in medicine from the Otago University Medical School, Dunedin, New Zealand. Specialist training followed in Bristol, England, gaining Membership of the Royal College of Obstetricians & Gynaecologists, London in 1977. From there he returned to New Zealand to be a specialist in O & G to Rotorua Hospital with a busy private practice. He changed direction after 13 years and moved to South Africa to a large semi-rural hospital where he rose to be Principal Specialist and Head of O & G in the Empageni/Ngwelezana Complex in Northern KwaZulu Natal. In 2005, he started as a Locum Staff Specialist at the Royal, and was appointed Staff Specialist in January this year. He has particular interest in perinatal medicine and infertility.

Presentation: *Menopausal symptoms and their treatment have undergone a dramatic rethink in the last few years owing to the WHI and the Million Women studies from the US and the UK. This presentation attempts to put into a succinct form current understanding and recommendations for managing the post menopausal woman. It is no longer acceptable for these women to take HRT for extended periods or for its alleged prophylactic effect on bone density and cardiovascular disease.*

Assoc. Prof. George Razay, Director, Dementia Research Centre, Launceston General Hospital.

Presentation: (To be advised)

Prof. Sankar Sinha, Department of Surgery, Royal Hobart Hospital. Sankar Sinha was born and received his initial surgical training in India. Subsequently he travelled to UK on a Commonwealth Fellowship, USA with the International Guest Scholarship from the American College of Surgeons, Singapore by a Fellowship from the World Orthopaedic Concern and Australia through a Travelling Fellowship from the Royal Australasian College of Surgeons. In between he did work in different regions in India, Zambia and Papua New Guinea and finally in Hobart, which he now considers as his home. He is the recipient of the prestigious Teaching Excellence Award from the University of Tasmania, Winston Churchill Fellowship and in 2005 he was awarded the Order of Australia Medal for his contribution to medical education and wound care in Tasmania.

Presentation: *Management of chronic wounds is a significant problem in the community. Chronic leg ulcers are the most common clinical presentation among the chronic wound cases. In Australia it is estimated to be 1.1 per 100 of the population. In-patient treatment of these patients are expansive and hence the Wound Clinic was established at the Royal Hobart Hospital in March 2004.*