

Cancer Clinical Trials

The *Primary Care Collaborative Cancer Clinical Trials Group* – already referred to as PC4 (for obvious reasons!) – is now in existence, thanks to funding from Cancer Australia under its *Boost Cancer Research* initiative.

Led by Prof Jon Emery, PC4 will spend its money to bring together researchers, practitioners and consumers across Australia to develop and conduct studies in primary care that will provide the evidence on how to improve health outcomes for cancer patients.



We offer assistance with protocol development, from concept to application for funding; access to biostatistical advice on trial design and analysis; advice on incorporating health economic and/or pharmaco-economic studies into cancer clinical trials; a peer review process for publications; links to the wider research community; and access to research training workshops and events.

Our Executive Group has a wealth of expertise, goodwill – and existing funding for specific projects, which PC4 will build on and develop further. Current and planned research activities cover a broad spectrum of the cancer journey, with the uniting focus being primary health care. In cancer prevention and screening:

- web-based decision tools for cervical cancer and for prioritising preventative health activities ('My Health Check')
- a phase II study of non-endoscopic screening for Barrett's oesophagus in Australia

In cancer diagnosis:

- a novel imaging device (Molemate) for assessment of pigmented skin lesions

In cancer care in the community:

- a national survey of medicine use, to be analysed for adverse reactions and interactions between complementary medicines and pharmaceuticals;
- aggregating multiple single patient trials to gain a population estimate of the efficacy of methylphenidate in the management of fatigue in patients with advanced cancer;
- screening tools for the early detection of lymphoedema;
- a GP-based intervention to support carers and reduce hospital admissions of patients with advanced cancer due to fatigue;
- a decision-making tool for rural patients to redress delay and improve outcomes.

Julia Fallon-Ferguson

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President's Message

'Towards a National Primary Health Care Strategy' (AAAGP Submission)

Many of you will be aware of the Discussion paper '*Towards a National Primary Health Care Strategy*' released by the Commonwealth Department of Health and Ageing in November 2008. This is part of the development of a national primary health care strategy, which some might say is well overdue in Australia. Following lengthy debate about the Discussion paper by the AAAGP Executive Committee, informed by comments received from several AAAGP members, we were pleased to submit our response on behalf of the AAAGP. We deliberately chose to focus on the sections in the Discussion paper about education and research.

We expressed concern that the paper appears to conflate primary care research solely with quality improvement. We therefore reinforced that primary care research has much broader relevance to improving the health of Australians than this and that high quality descriptive and intervention research is required in primary care in addition to work on quality improvement. There was considerable emphasis in the

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Discussion paper on the use of primary care data to inform models of payment for performance. However, we believe it is premature to enforce such models before we have clinical software systems that enable systematic recording of primary care activity and outcomes. We also question whether current indicators are adequate to measure performance of quality generalist care. Our submission also discussed the importance of maintaining the PHCRED funding stream, reintroducing additional NHMRC funding specifically for primary care, and supporting primary care academic career pathways and a national primary care practice-based research network.

In terms of education we reiterated the need for better means of building capacity to deliver high quality learning experiences in primary care. This means both physical infrastructure and better systems of remunerating primary care educators, particularly those involved in undergraduate medical education. We continue to promote hub-and-spoke models and the establishment of community clinical schools as an approach to meet these needs, particularly in relation to the new GP Super Clinics.

A list summarising all our recommendations in the submission is in the Table. For those interested in reading our submission, it will be available shortly on the AAAGP website.

**Jon Emery, AAAGP President
University of WA**

Recommendations from the AAAGP submission on 'Towards a National Primary Health Care Strategy'

- Continuation of the Primary Health Care Research, Evaluation and Development (PHCRED) funding stream.
- Expansion of funding to support academic primary care pathways.
- Reinstitution of an additional source of NHMRC funding for highly ranked primary care project grants.
- Establishment of a national primary care practice-based research network, modelled on the Cancer Australia national cooperative clinical trials groups.
- Implementation of a minimum set of standards for clinical software systems to support systematic recording of healthcare data in practice.
- Establishment of a taskforce to identify relevant primary care outcome measures.
- The GP Super Clinics, or other similar primary care sites, contribute to the development of community clinical schools, particularly in outer metropolitan areas applying hub-and-spoke arrangements.
- Create an environment which values highly trained practice nurses and provides opportunities for them to utilise and further develop their skills to compliment the work of GPs in providing high quality chronic disease management.
- AAAGP strongly discourages national alignment of funding and management of clinical training between undergraduate and postgraduate training.
- Establish a Medicare item for teaching consultations or, at the very least, increase the teaching PIP by a minimum of 50%.

EDITORIAL

Welcome to the first newsletter of 2009. A lot has happened so far this year and it is still only March! Those of us involved in PBRNs will find the lead article describing the new PC4 interesting. It is exciting to see the establishment of new opportunities and networks to support primary care research. There have been several changes in senior roles for members of the AAAGP and Tasmania is in the spotlight.

The AAAGP have a busy timetable planned for the GP&PHC conference in July are detailed including the dinner, see page 6 for all the details. Thank you to the dedicated restaurant research team in Melbourne for their careful testing of suitable dinner venues!

Finally, if you have exiting news that you would like to share with the AAAGP membership please e-mail me at s.dennis@unsw.edu.au

Sarah Dennis



AAAGP Name Change

Last year it was suggested that the AAAGP might consider changing its name to reflect the changing face of academic primary care. Other health professionals and non-GP academics make up a large proportion of the general practice academic community and there is interest in other countries such as New Zealand – but this is not reflected in the name AAAGP. Do we want to broaden the name to reflect this?

The name AAAGP was chosen in 1987 after 2 years of discussion, Charles Bridges Webb suggested the abbreviation of A3GP in 1991 and in 1995 there was an unsuccessful attempt to change the name to the Society of Teachers and Researchers of General Practice (STARGP). You can Prof Max Kamien's history of the AAAGP on our website.

An e-mail and Facebook discussion has been underway to canvass opinion from the membership and suggest options for a new name. Early on it was clear that the AAAGP membership were not embracing Facebook, in fact many on the executive had to admit to being dinosaurs. The discussions from the Facebook site were therefore also circulated by e-mail. Overall, it was felt that 'Australia' needed to be in the name especially if we want to lobby. In terms of 'general practice' and or 'primary care' there were mixed views. Some acronyms suggested were almost sentences themselves but finally three have been proposed in addition to no name change.

- The Australian Association for Academic Primary Care (AAA-PC)
- The Australian Association for Academic General Practice and Primary Care (AAAGPPC)
- The Australian Association for Research and Teaching in Primary Care (AART-PC)
- AAAGP

It was also suggested that a by-line to the effect of '*Representing education and research in Australian general practice and primary care*' could be added. **A vote on the name will be held at the AGM during the GP & PHC conference in July.**

Attention Members

As a member of AAAGP, you have access to a wealth of information from amongst over 160 members! Anytime you have information to share or a question to ask, just email: members@aaagp.org

Spotlight on Discipline of General Practice, University of Tasmania

The Discipline of General Practice (DGP) sits within the School of Medicine and is affiliated with the Primary Health Research Group at the Menzies Research Institute. The DGP contributes strongly to teaching and learning at an undergraduate and postgraduate level. Staff members are responsible for the planning and co-ordination of GP training in the 5 year MBBS program. This includes a 9 week Primary Care rotation in 3rd year with a 2 week rural GP placement. This complements the rural weeks in Years 1 and 2. There are also placements in various community organisations to give students a broader view of Primary Care. At the Hobart Clinical School in Year 4 there is an 8 week General Practice

rotation which includes 2 weeks in an urban or rural practice. Year 5 students have a 4 week GP placement which involves 3 weeks in an urban or rural placement. Students are actively involved in developing research proposals and health promotion ideas.

Members of the Discipline have wide involvement in general practice and primary care affairs both at a state and national level. Staff work closely with the University Department of Rural Health, as well as the Primary Health Care Research Evaluation and Development (PHCRED) program which is situated within the department.

Research is undertaken in a number of areas with particular expertise in cardiovascular and

preventive medicine, qualitative research, respiratory medicine, stress management/ self-care and medical education. Examples of projects include: a large multinational RCT looking at aspirin primary prevention in the elderly, an RCT of a general practice based behavioural intervention, developing a greater understanding of the role of smoking post AMI, in patients with COPD and in pregnancy, a feasibility study of using the ankle brachial index in GP, mindfulness in medical students and looking at predictors of regional retention in GP training.

Dr Faline Howes
GP registrar, RDP Fellow

Profile of Dr Emma Warnecke, MB,BS (Hons.), FRACGP, Dip

What do I do?

I am a Senior Lecturer in General Practice at the University of Tasmania. This involves coordination of all General Practice teaching to the medical students. I lecture in self care across all year levels. I am involved with promoting research and health promotion projects for medical students and am also involved in my own research around stress management and medical education. I also work in General Practice in Hobart. I am a level 2 mental health GP and my particular interest is in mindfulness integrated CBT and solution orientated therapies. I enjoy being the Tasmanian Representative of the Australasian Integrative Medical Association (AIMA). I strongly believe in the importance of a holistic, patient centred approach. My focus in practice is on treating the whole person with an emphasis on preventative medicine, health enhancement and counselling.

What attracted me to teaching and research?

After many years working in General Practice I began teaching medical

students at Monash University in the Health Enhancement Program run by Craig Hassed. This is an innovative program teaching medical students about stress management and healthy lifestyle. Later I began also teaching in the patient based learning (PBL) program and then began training the tutors and editing the cases on an annual basis. I moved to Hobart 2 years ago and took up my position at UTAS. I love teaching medical students as they are keen and interested and so open to new ideas and new ways of looking at the world. It makes me excited about the future of medicine seeing how these medical students are developing their patient centred approach. Research I have also found to be exciting as it expands my ideas and gives a sense of possibility. There is so much great literature out there. You could spend your lifetime reading and still barely touch the surface. It is a joy to be able



to search and add to literature, particularly around my areas of interest of stress management and medical education.

Do I have any tips for others?

My main tips are be kind to yourself, take the time to look after your self, know yourself and be open to change.

Dear Members

I expect by now many of you will know that I have resigned from my position as the AAAGP secretariat. I found it necessary to streamline my work activities.

I'm confident the new skills I have acquired will continue to be well utilised at the Newcastle Discipline of General Practice, especially those involving Graphic Design and database management. It's also very useful to have developed skills in 'pulling all sorts of things together' as our department always has lots of projects on the go at any one time!

During the past four years as AAAGP secretariat, I have redesigned the website and the corporate logo, implemented the MYOB accounts system and re-established the newsletter to be a vital link within our network. I have also had the opportunity to work with many of you on various projects and been very active in helping to 'raise our profile'.

I have enjoyed my time with AAAGP immensely and appreciate all the wonderful support I received from members. Thank you everyone for your well wishes and for the lovely bunch of flowers I received on behalf of AAAGP during our department's Christmas celebrations. I wish Kitty Novy all the best in her role as the new secretariat.

Debbie Mutton



The 2009 RACGP Research Foundation Grants Round is NOW OPEN!

Developing a strong research culture in general practice

Applications for the 2009 RACGP Research Foundation Grant round are now opened. Applications will be received until **COB Wednesday 15 April 2009**. Application forms and detailed information on each award are available via the Research Foundation website at www.racgp.org.au/researchfoundation.

Up to \$120,000 in scholarships, grants and awards will be offered in 2009 by the Research Foundation to encourage more general practitioners to conduct research. New and emerging researchers are encouraged to apply. The Research Foundation aims to promote research capacity within general practice by offering grants, scholarships and awards for researchers in the field of family medical care, indigenous health, motor vehicle trauma, integrative medicine and more.

GPs interested in academic general practice are invited to apply now. For more information please visit www.racgp.org.au/researchfoundation or contact Ana Lucia da Cruz, RACGP Research and Grants Program Administrator by email on research@racgp.org.au or telephone 03 8699 0481.

International Primary Care Conferences Dates for your diary

WONCA Asia Pacific Regional Conference

4th - 7th JULY 2009 in Hong Kong, at the Hong Kong Convention and Exhibition Centre. Unfortunately deadline for abstracts has passed (31st Dec)

The Society for Academic Primary Care

8th - 10th July 2009 in Dundee / St Andrews, Scotland. Unfortunately deadline for abstracts has passed (6th March)
<http://www.sapc.ac.uk/09/ASM09.pdf>

15th Wonca Europe Conference

16th-19th September 2009, Basel, Switzerland <http://www.congress-info.ch/wonca2009/home.php>

GP'09, The conference for General Practice

1st-4th October 2009, Perth. Abstract submission closes in April 2009 <http://www.gpconference.com.au/>

37th NAPCRG Annual Meeting

14-19 November 2009 in Montreal, submission deadline is April 20 2009
<http://www.napcrg.org/pdfs/CallForPapers09.pdf>

5th World Conference of International Primary Care Respiratory Group

26th-29th May 2010, Toronto <http://www.ipcrg-toronto2010.org/>

PROFESSORS ON THE MOVE

Siaw-Teng Liaw



Teng was Professor of Rural Health and Health Informatics at the University of Melbourne before moving, in 2009, to UNSW as Professor of General Practice

and Director of the SSWAHS General Practice Unit based at Fairfield Hospital. Personally, it was timely as Gladys and Teng had just become “empty nesters”, when their son Sean graduated in B Comp Sc, LLB from the University of Melbourne. Professionally, it was a return to Teng’s general practice roots with a focus on his passion in primary and integrated care informatics to improve the safety and quality of health care. As Director of the SSWAHS GP Unit, Teng works with the area hospital and community health services, general practice and a range of stakeholders in the region to develop, implement and evaluate models of integrated care in southwest Sydney. The Unit is an accredited GP training practice, running the UNSW undergraduate program as well as involvement with intern and Registrar training programs. It provides clinical services to health services staff, patients triaged from Fairfield Hospital Emergency Department and drop-in patients. The comprehensive mix of research, teaching and health practice provides good training opportunities as well as provide a well-grounded base to contribute to the vision of information-enhanced integrated care where the patients, clinicians, teachers and researchers are well-connected and well-informed. The medium term objective is an electronic practice-based research network doing ongoing clinical and translational research to improve safety and quality of care and systems.

Elizabeth Farmer



Congratulations to AAAGP member Professor Liz Farmer who has recently been appointed to the Roberta Williams Chair of Medicine (General Practice) at the University of Wollongong in addition to her appointment as Dean in 2008. This is a new Chair of Medicine at the Graduate Medical School and has been made possible by a donation to the university from Mr Marsden (Mick) Williams founder of the Allied Group of Companies. The Chair of Medicine (General Practice) is important because it recognises the value of the role of general practice in delivering health care.

Michael Kidd



Congratulations to AAAGP member Professor Michael Kidd who has recently been appointed as Executive Dean of the Faculty of Health Sciences at Flinders University which includes the Schools of Medicine and Nursing and Midwifery. He moved to Adelaide in January 2009 from The University of Sydney where he has been Professor of General Practice for the past 13 years. In addition to his many other scientific and professional roles Michael was also recently elected to the position of Chair of Doctors for the Environment Australia (DEA). One of the roles of DEA is to harness clinical and scientific skills of its members to educate and influence governments, industry and the wider community about the impact of environmental damage on health and disease. Michael is also a member of the executive of the World Organization of Family Doctors (Wonca) and represents Wonca at the World Health Organization.

Bridges-Webb Medal

To strengthen our commitment to fostering and supporting career development in academic general practice, AAAGP has created the Bridges-Webb award. This award is to recognise AAAGP members who have made and will continue to make international standard teaching and/or research contributions to academic activities in the general practice environment.

One award will be made annually, selected by a panel of 3 (at least one member from the executive) appointed by the President. If the nominees are deemed by the panel not to meet the criteria or be of sufficient standard then they are at liberty not to make an award. The award for 2009 will be presented at the AAAGP Annual Dinner at the GP & PHC conference in Melbourne.

Financial members will be called to nominate potential awardees through email distribution list at least 6 weeks before the Medal is due to be awarded. The nomination should include a statement outlining how the nominee meets the prize criteria. Nomination is via online at http://www.aaagp.org/BridgesWebb_medal.htm and will close on 29 May 2009 .

Driving Change

GP & PHC Research Conference

Melbourne 15–17 July 2009

AAAGP Distinguished Papers

AAAGP will again be selecting two distinguished papers to be presented during the AAAGP plenary session. Because of the brevity of the abstracts in past years, the Committee has had difficulty assessing the methodological rigour of the projects. This year we have decided to trial a different process. If you wish to be considered for the AAAGP Distinguished Paper 15 minute oral presentation (for completed projects only), you will need to submit a longer abstract (400 words) than the standard one which asks for more details of your research methods **in addition** to the usual GP&PHC conference abstract.

For more information please visit <http://www.phcris.org.au/conference/2009/index.php>. The call for abstracts closes April 3 and early bird registration closes May 29.

First Time Presenters Awards

We will also be awarding the Best First Time Presenter with book vouchers to the value of \$250. **Judges are needed!**

AAAGP Poster Reception

AAAGP have sponsored the poster reception on Wednesday from 5 –7pm. Join us for drinks and nibbles as you view posters and chat with the authors .

AAAGP AGM

Our AGM will be held at 5.30pm on Thursday 16th. One of the most important items to be discussed will be the proposed AAAGP name change (see article on page 2 in this newsletter). All members are encouraged to attend.

HOD Breakfast Meeting

All HODs of General Practice are invited to attend a breakfast meeting on Thursday 16th July, 8am. Agenda items will be requested.

AAAGP Plenary

9:30–11am Thursday 16 July. The AAAGP Distinguished Papers will be presented during this plenary session.

Post Doctoral Lunch

Wednesday 15 July organized by Parker Magin.

AAAGP Special Skills Lunch—Influencing Policy

Friday 17 July organized by Sarah Dennis.

Bridges-Webb Award

The winner of this prestigious award will be presented at our Gala Dinner. Nominations (members only)

Annual Dinner

Will be held on Wed 15 July, 7.30pm at Walter's Wine Bar, a modern bistro style bar and restaurant in a stunning location a short walk along the river from the conference.

Cost: Members \$100

Non-members \$120

www.walterswinebar.com.au

Mission & Goals

Formed in 1983, AAAGP aims to promote & develop the discipline of general practice through:

- Encouraging originality, questioning & exploration of ideas within teaching & research environment.
- Providing a forum for exchange of information & ideas.
- Encouraging shared academic activities.
- Fostering & supporting career development in academic general practice.

The AAAGP newsletter is published in Mar, July & Nov each year and welcomes letters to the editor and also articles about issues of general interest to the membership.

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Visit our website:

www.aaagp.org