



**Issue: 9
November
2006**

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Update from AGPN's Lifescrpts Coordinator

What an exciting time it has been to begin working at the 'Australian General Practice Network' as we are now known. My first two months as Lifescrpts Coordinator has seen the introduction of the new MBS item 717 – the 45 year health check, the start-up of work to develop 'Pregnancy Lifescrpts' resources, the release of the second edition of the RACGP Green Book and of course attendance at the Australian General Practice Network Forum... phew!

The enthusiasm of the Network to ensure we are prepared to respond to general practices needs in implementing the '45 year health check' has meant that a medical director template, and supporting 'how to' wall chart were available within the first week of November. The Department of Health and Ageing also developed a fact sheet, Q&A document and checklist to support use, while the RACGP developed further supportive resources. Congratulations everyone, now to the exciting part - supporting use of the item, and in doing so, further utilisation of the Lifescrpts resources to enable early intervention and prevention in the general practise setting.

AGPN in partnership with SA Divisions of General Practice, Queensland Divisions of General Practice, General Practice Divisions Victoria, the Parent-Infant Research Institute, the Australian College of Midwives and Davidson Consulting have been working to develop 'Pregnancy Lifescrpts' in the areas of smoking, diet and alcohol. These resources will be pilot tested in early 2007 and a 'proposed implementation strategy' will be provided to DoHA including the consortium recommendations for the future of these resources. We will be sure to keep you updated on progress. Further to this, the request for tender for 'adaptation of Lifescrpts resources for use with indigenous patients' has been released by the Department of Health and Ageing, meaning the process for development of these resources is beginning.

The 'RACGP Red Book – Guidelines for preventative activities in general practice' was posted to all GPs in the country earlier this year, while the 'RACGP Green Book – Putting prevention into practice' will be distributed to all General Practitioners this week. I would encourage you all to look at these documents on the RACGP web site www.racgp.org.au as they provide evidence based advice to guide general practice in their delivery of preventative health care, and link perfectly with Lifescrpts.

The AGPN Forum was a successful event with prevention, early intervention being a major focus. It was excellent to see the exposure Lifescrpts received throughout the Forum proper and the pre-forum population health workshop.

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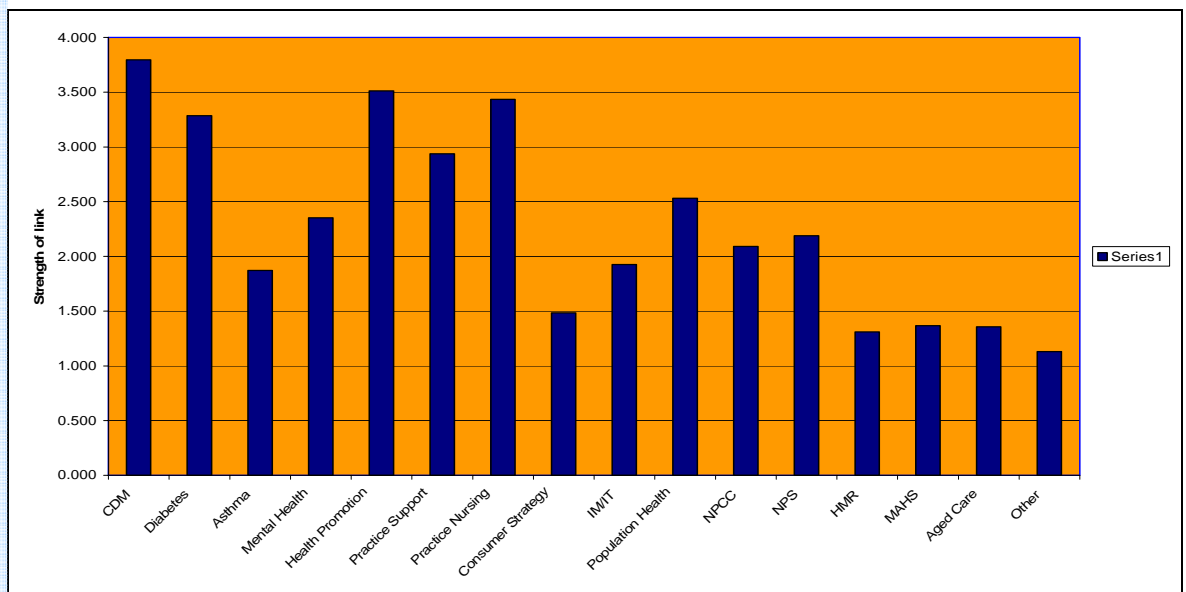
Focus on: Lifescrpts Implementation

Lifescrpts implementation data collection - results

I would like to thank all Division staff who recently took time to complete the 'Lifescrpts implementation data collection form'. This survey had a response rate of 72% of all Australian divisions or 88% of all divisions that expressed interest in being involved with the Lifescrpts initiative.

Results clearly indicated that the flexibility of the Lifescrpts resources, and the relevance of lifestyle risk factor modification to a wide range of division program areas has allowed divisions to implement Lifescrpts through a variety of innovative and effective models. Congratulations everyone!

Some highlights from the report showed that divisions have been extremely effective in integrating Lifescrpts to existing program areas to 'value add' to existing work. The strongest links with Lifescrpts were with chronic disease, health promotion and practice nursing programs, however as figure below clearly illustrates, Lifescrpts has been effectively linked with the majority of division program areas.



These results suggests that the flexibility and lack of *prescriptive* implementation advice provided in development and roll out of the Lifescrpts suite of tools and resources has enabled divisions to use Lifescrpts in a locally relevant manner.

For the full report, please contact your SBO or Aimee Black at AGPN.

Articles of Interest

Indigenous people more likely to have heart attacks, less likely to receive medical procedures

Mathur, S. Moon, L. Leigh, S. 2006, Aboriginal and Torres Strait Islander people with coronary heart disease, Cardiovascular disease series no. 25. Cat. No. CVD 33. Canberra: Australian Institute of Health and Welfare.

A report by the Australian Institute of Health and Welfare (AIHW) highlights disparities between Aboriginal and Torres Strait Islander people and other Australians in the health status and treatment of CHD. Compared with most Australians, Aboriginal and Torres Strait Islanders generally have a poorer health status. There is a higher prevalence of established risk factors for coronary heart disease (CHD) in Indigenous Australians than other Australians. They are much more likely to die from CHD than non-Indigenous Australians, and are also more likely to be hospitalised for CHD.

The report builds on existing data and focuses on four key areas:

- Incidence of major coronary events
- Case fatality from major coronary events
- Use of coronary procedures in hospital
- Case complexity in hospital.

For the first time, information on the incidence of major coronary events and resulting case fatality, as well as hospital procedure rates have been compiled and reported for Indigenous Australians, which until this study have only been reported for the total Australian population.

The key findings outlined in the report were that compared with other Australians, the Indigenous population had three times the rate of major coronary events, and 1.4 times the out-of-hospital death rate from CHD. When in hospital, Indigenous Australians had more than twice the in-hospital CHD death rate, a 40% lower investigatory angiography rate, a 40% lower rate of coronary angioplasty or stent procedures, and a 20% lower rate of coronary bypass surgery.

The full text of the AIHW statement is at <http://www.aihw.gov.au/mediacentre/2006/mr20060927.cfm>

The Economic Costs of Obesity

This report by Access Economics Pty Ltd for Diabetes Australia indicated that in 2005, 3.24 million Australians were estimated to be obese. The direct financial cost of obesity was estimated at \$3.767 billion and includes not only health care but, productivity, carer, welfare, other government payments as well as indirect costs. We are reminded to consider that this is only the cost of obesity, not that of overweight.

This report can be found at:

http://www.diabetesaustralia.com.au/lib/doc_pdf/reports/obesity/Economic_Costs_of_Obesity.pdf

Men's health: what's a GP to do?

Mark F Harris and Suzanne McKenzie.
Med J Aust 2006; 185 (8): 440-444.

General practice can play an effective role in identifying, assessing and managing some of the major health problems faced by men. Priorities should be set according to the impact of the conditions being focused on, the availability of effective interventions and the patient's own views. Barriers to effective preventive care for men in general practice include not only barriers to patients attending the practice but also barriers to GPs providing the best care — especially for patients from low socioeconomic backgrounds who have an increased burden of disease. Overcoming these barriers to men's health requires specific attention at both the practice and policy levels. Preventive care will certainly be greatly aided by the introduction of a Medicare item number for a routine comprehensive health assessment at age 45–55 years for all men, as this group is both less likely to present for preventive care and more likely to be at risk of disease.

http://www.mja.com.au/public/issues/185_08_161006/har10079_fm.html

It's not all about diet. Weight loss by any means appears beneficial in this context.

Diabetes Prevention Program (DPP) participants randomised to an intensive lifestyle intervention (ILS) had significantly reduced risk of diabetes compared with placebo participants. The contribution of changes in weight, diet, and physical activity on the risk of developing diabetes among ILS participants were explored.

A total of 1,079 participants were aged 25–84 years (mean 50.6 years, BMI 33.9 kg/m²). Weight loss was the dominant predictor of reduced diabetes incidence (hazard ratio per 5-kg weight loss 0.42 [95% CI 0.35–0.51]; P < 0.0001). For every kilogram of weight loss, there was a 16% reduction in risk, adjusted for changes in diet and activity. Lower percent of calories from fat and increased physical activity predicted weight loss. Increased physical activity was important to help sustain weight loss. Among 495 participants not meeting the weight loss goal at year 1, those who achieved the physical activity goal had 44% lower diabetes incidence.

Data from this study indicates interventions to reduce diabetes risk should primarily target weight reduction.

[Diabetes Care](#) 29:2102-2107, September 2006 (doi: 10.2337/dc06-0560).

Exercise for overweight or obesity

The results of this review support the use of exercise as a weight loss intervention, particularly when combined with dietary change. Exercise is associated with improved cardiovascular disease risk factors even if no weight is lost.

<http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD003817/frame.html>

Media

Inherited bad diets

Herald Sun, 16/10/2006 - Shaun Phillips

INCREASING numbers of Victorians are eating themselves to an early grave. People need to shake themselves from a lifetime of unhealthy and often unconscious habits, says state public health nutritionist Veronica Graham. The sins of the father were being visited on children who knew nothing other than fat-filled diets.

<http://www.news.com.au/heraldsun/story/0,21985,20586727-2862,00.html>

Binge of warnings cranked up

Sydney Morning Herald, 16/10/2006

LONDON: All bottles of wine sold in Britain are likely to carry tobacco-style health warnings from next year under government plans to crack down on binge drinking. British officials are in discussions with the alcohol industry to agree a new labelling regime for beer, spirits and wine that will highlight the dangers of drinking too much.

<http://www.smh.com.au/news/world/binge-of-warnings-cranked-up/2006/10/15/1160850814588.html>

Salt at heart of health crisis

Herald Sun, 15/10/2006 - Suellen Hinde

SALT and "hidden" salt in takeaway and restaurant meals is killing us, a heart disease expert says. High levels of salt in the body lead to high blood pressure, the biggest single cause of cardiovascular disease, accounting for 62 per cent of stroke and 49 per cent of heart disease victims.

<http://www.news.com.au/heraldsun/story/0,21985,20580049-2862,00.html>

Govt to restrict high fat food sales in school tuckshops

ABC News Online, 16/10/2006 -

New rules will make foods such as lamingtons a rare treat for Victorian schoolchildren. From the start of next year, the State Government will restrict the sale of high fat foods in school tuckshops to eight times a year, or twice a term. This includes foods such as hot chips, ice creams and lamingtons. Foods such as sausage rolls and full fat dairy foods will be sold more often, but not daily. Healthy foods such as fruit and wholegrain bread rolls will be made available every day. Under the policy, a ban on sugary drinks will also be extended to include some sports drinks and mineral waters. Foods will be categorised as "every day", "occasional" or ones that should be "selected carefully". The new

policy comes into effect from the start of next year.

<http://www.abc.net.au/news/newsitems/200610/s1765350.htm>

Go outside and play

Courier Mail, 18/10/2006 - Steven Wardill

PREMIER Peter Beattie has warned parents against relying on schools to provide enough physical activity to combat their children's bulging waistlines. Launching a new grants program to tackle obesity, Mr Beattie said yesterday that parents too often allowed children to play computer games or talk on the phone after school. Mr Beattie said technology now posed a threat to a child's healthy lifestyle, and schools should not be relied on as the only outlet for outdoor activity.

<http://www.news.com.au/couriermail/story/0,23739,20600169-5003426,00.html>

Australians urged to improve lifestyle to avoid infertility

ABC News Online, 23/10/2006 -

The Fertility Society of Australia is encouraging people to make big lifestyle changes to increase their chances of having children. The society is using its 25th anniversary to warn of the dangers of unhealthy living.

<http://www.abc.net.au/news/newsitems/200610/s1770825.htm>

Chef Luke Mangan has recipe for healthy living

Media Release, 26/10/2006 - Tony Abbott

Luke Mangan will join sporting stars Harry Kewell, Cathy Freeman and Kieran Perkins in the Commonwealth Government's campaign to tackle Australia's obesity problem. As a Healthy Active Ambassador, Luke will bring an expert perspective to promoting good nutrition, particularly among young people. "I am pleased to be involved with this initiative. It is so easy to eat junk food but what's even easier is to eat healthy food and live a healthy lifestyle," Luke said.

Preventive Healthcare and Strengthening Australia's Social and Economic Fabric.

The Commonwealth Government has announced \$9.7 million in funding for eight innovative projects focusing on social, economic and environmental factors impacting on the health and wellbeing of Australians.

The National Health and Medical Research Council grants meet the National Research Priority goals of Preventive Healthcare and Strengthening Australia's Social and Economic Fabric.

Areas covered by the research will include wellbeing in early childhood, breaking cycles of poor health and disadvantage, practical ways of reducing obesity and socio-economic and environmental factors on disease prevention.

The grants have been made to:

- The University of Queensland will research the integration of prisoners after release to reduce the risk of re-offending.



- Deakin University will investigate the causes of increased obesity risk among socioeconomically disadvantaged women and children.
- Monash University will look at a regulatory approach to obesity prevention.
- The Royal Prince Alfred Hospital and Sydney South West Area Health Service will trial an early intervention regime to prevent childhood obesity in a disadvantaged population.
- Flinders University will research the impact of changing forms of employment and unemployment on health.
- The University of Sydney will explore the impact of social, economic and geographic disadvantage on the health of middle aged and older Australians.
- The Murdoch Children's Institute at the Royal Children's Hospital, Melbourne will investigate reducing early language delay that can lead to later behavioural problems.
- The University of New South Wales will examine ways of improving social and emotional wellbeing among Indigenous Australians in three rural communities, and breaking the cycle of violence and mental health problems.

More information can be found at:

www.nhmrc.gov.au/funding/funded/outcomes/index.htm

Useful resources

Tools/resources to support the 45 year old health check

As of the 1st of November, the 45 year health check, item 717, has been available for use by general practice. The aim of this health check is to assist with the prevention of chronic disease and to enable early intervention strategies to be put in place where appropriate. The health check is available to people between 45 and 49 years of age (inclusive) who are at risk of developing a chronic disease.

The following resources detailing information on the 45 year health check - item 717, are now available on the DoHA website:

<http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-epc-45check>

- Fact sheet
- Questions & Answers
- Checklist - designed to be a sample checklist that may assist GPs and health professionals in the practice in undertaking the 45 year old health check.

The MBS item descriptor is available from the MBS online website:

<http://www9.health.gov.au/mbs/fullDisplay.cfm?type=item&q=717&qtype=item>

The following resources are available on the RACGP website:

<http://www.racgp.org.au/clinicalresources/45>





- Presentation – explaining the 45 health check and what GPs and their teams need to do
- Checklist – based on the Red Book, providing an evidence-based summary of the key factors to be assessed
- Template letters to patients
- Patient practice prevention survey – taken from the Green Book
- MBS item descriptor

The North East Valley Division has created a template for use in Medical Director that can be found at www.nevdgp.org.au

To support effective use of the template and the item number, AGPN has created a wall chart of 'how to' tips. This chart is available from your SBO and soon to be on the AGPN web site

Alcohol treatment guidelines to help Indigenous Australians

New treatment guidelines that would help health practitioners manage alcohol-related problems experienced by their Indigenous patients were launched on 6 November in Cairns.

To view the full media release, click on the link below:

<http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2006-cp-pyn073.htm>

RACGP Red Book and Green Book

The Red Book – guidelines for preventative activities in General Practice and the Green Book – Putting prevention into practice are both available from the RACGP web site www.racgp.org.au, in the 'clinical resources' section.

Diary dates

December 2006

1st World AIDS Day - International - AIDS Council 03 9865 6700
www.worldaidsday.org

December 2006

3rd International Day of Disabled Persons - International - United Nations Information Centre 02 9262 5111 www.un.org.au

December 2006

5th Thank A Volunteer Day - Nationwide - NSW Health Department

December 2006

10th International Human Rights Day - United Nations Information Centre 02 9262 5111 www.un.org.au

December 2006

18th International Migrants Day - International - United Nations Information Centre 02 9262 5111 www.un.org.au



December 2006

25th Christmas Day - Nationwide - Public Holiday

December 2006

26th Boxing Day - Nationwide - Public Holiday

Contact the editor

To subscribe or unsubscribe to the Lifescrpts Newsletter or to submit an article please contact Aimee Black at ablack@agpn.com.au or by telephone on: (02) 6228 0829.

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