GP Connect

Keeping GPs informed in the changing primary health landscape







8 May 2025

A message to GPs on the critical role of vaccination in preventing measles from the Australian Chief Medical Officer

Professor Anthony Lawler, Chief Medical Officer, Australian Government Department of Health and Aged Care

With ongoing measles outbreaks overseas, we have seen a recent increase in confirmed cases across Australia, most commonly in unvaccinated and undervaccinated adults aged 20 to 49 years. It is important to remember that measles is a vaccine-preventable disease.

I am concerned by declining vaccination rates, which currently sit below the target of 95 per cent required for herd immunity. I urge you to remind your patients that vaccination is the best protection against measles.

Measles is a very serious and highly transmissible disease. In an unvaccinated or under-vaccinated population, a single contagious person can potentially infect up to 18 other people.

Measles can cause complications in up to one in three unvaccinated people. Significant complications include brain swelling, pneumonia, pregnancy loss, and lasting disability such as deafness, seizures, and serious movement problems. A small number of people die from progressive brain inflammation many years after their initial infection.

"We know that a positive recommendation from a trusted health professional is an important factor in people deciding to accept vaccination."

People are also more likely to catch other illnesses such as influenza, chickenpox or whooping cough after recovery from measles, even if they only had mild illness. Loss of immune memory can cause people to become more ill, more often, from diseases they were previously immune to. This means people could require repeat immunisation.

Adults can also spread measles to babies and young children, who are more likely to suffer serious complications from measles.

I want to take this opportunity to emphasise the critical role of vaccination in preventing measles. Vaccination is safe and highly effective in protecting against infectious diseases. In Australia, two doses of measles vaccine offers 99 per cent protection against illness and serious complications.

The combination measles vaccine is recommended for:

- children aged 12 and 18 months
- adolescents and adults born since 1966 who have not received two doses of a measles-containing
- infants aged 6 months to less than 12 months who may be travelling overseas or to high-risk areas.

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A message from the Australian Chief Medical Officer (cont)

Vaccination is important for adults with higher risk of exposure, particularly:

- people travelling, or returning from, overseas
- healthcare workers
- · childhood educators and carers
- people who work in long-term care and correctional facilities.

The measles vaccine is available for free for eligible children under the National Immunisation Program (NIP). Eligible people under 20 years of age and humanitarian entrants or refugees of any age can also get free NIP catch-up vaccinations. The measles vaccine can also be purchased privately by patients who are not eligible for a free vaccine under the NIP.

I urge you to speak with your patients about being vaccinated to protect themselves against measles. We know that a positive recommendation from a trusted health professional is an important factor in people deciding to accept vaccination. I strongly encourage you to check that your patients are up to date with their immunisations and provide any catch-up vaccinations that may be required.

Thank you for your assistance in preventing the spread of measles, and in safeguarding the health of our communities.



Key information for WA clinicians

At 8 May 2025, Western Australia has recorded 17 measles cases since 19 March 2025.

For immunocompetent individuals, the MMR and MMRV vaccines can be administered at the same time as <u>other vaccines</u> such as the influenza vaccine or routine vaccinations, using separate syringes and injection sites.

Funded measles vaccines:

- Measles combination vaccine is provided at no cost under the <u>National Immunisation</u> <u>Program</u> for children aged 12 months and 18 months.
- A <u>state funded adult measles vaccination</u>
 <u>program</u> is available for Western Australians
 born after 1965, who have not already
 received two doses of a measles-containing
 vaccine.
- Free catch-up immunisations are available through the <u>National Immunisation Program</u> for:
 - people who are aged under 20 years without evidence of two doses of a measles-containing vaccine
 - refugees and humanitarian entrants of any age.
- NEW: WA Department of Health has expanded the Measles Immunisation
 Program to include funded measlescontaining vaccines for infants aged six months to 12 months who are travelling overseas to countries where measles is endemic or circulating (after an individual risk assessment), or to infants between six and 12 months of age if they have recently been exposed to someone with measles while they were infectious. Available through GPs and travel clinics only.

Refer to the Measles Chapter in the <u>Australian</u> <u>Immunisation Handbook</u> for detailed advice, vaccine dosage and contraindications.

Read the full <u>Metropolitan Perth and South West</u> <u>measles alert - 30 April 2025</u>

Hospital Liaison GP Updates

New postnatal intervention program at Women and Newborn Health Service -Mental Health Service

Adjustment to motherhood can be a difficult period, with significant changes to routines, lifestyle and relationships, and these experiences can lead to poorer mental health and mother-infant relationship difficulties. Given the high prevalence of anxiety and depression during the perinatal period, with perinatal depression and anxiety affecting one in five mothers in Australia¹, access to effective and accessible services is crucial. Early identification and intervention of those who are experiencing difficulties in adjusting to a new baby can reduce distress and protect against further deterioration of the mother's mental health, thereby supporting overall wellbeing and positive experiences with their baby.

GPs play a vital role in identifying, supporting and managing individuals at-risk of perinatal adjustment and/or mental health difficulties, often being the first point of contact for these women. GPs can also facilitate prompt referral to specialised evidence-based psychosocial treatments.

New Beginnings is a community-based group intervention for postnatal mums who are experiencing difficulties adjusting to a new baby and/or experiencing mild to moderate mental health difficulties. The program is currently offered in the northern suburbs of Perth by clinicians from the Women and Newborn Health Service - Mental Health Service. Email the referral form to WNHS.MHS.NewBeginnings@health.wa.gov.au. Once the referral has been reviewed you will be contacted and informed of the outcome.

Community-based interventions can reduce barriers to care for new parents, such as travelling distance, and can also reduce social isolation. Community-based psychological group interventions for new parents have proven efficacy in improving mental health symptoms, preventing common postpartum psychological disorders²⁻⁴ and supporting the quality of the mother-infant relationship⁵⁻⁷.

Survey for eligible patients

Women and Newborn Health Service is seeking the support of GPs to share their lived experience of postpartum mental health via an <u>anonymous online survey</u>.

The survey is key to the ongoing review and improvement of the design of the New Beginnings program, as well as ensuring that it is locally relevant. By consulting with and incorporating feedback from patients, the goal is to make the revised New Beginnings program available to postpartum women across the state who may find it beneficial.

Direct your survey queries to the coordinating principal investigator who can be contacted at www.www.www.www.www.www.www.memors.new-Beginnings@health.wa.gov.au or 6458 1521.

Dr Sarah Smith Hospital Liaison GP, Womenand Newborn Health Service King Edward Memorial Hospital KEMH_HLGP@health.wa.gov.au

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Emergency department summaries secure messaging rollout – Royal Perth, Perth Children's and Peel Hospitals

Royal Perth, Perth Children's and Peel Hospital emergency departments (EDs) are scheduled to begin secure messaging of ED discharge summaries on Wednesday 25 May 2025.

During the first few hours of the transition, some summaries may be duplicated and sent by secure messaging and fax. Printed summaries will continue to be given to patients and faxed to practices not registered for secure messaging.

To update your secure messaging details or current GP list, or to register to receive public hospital discharge and outpatient summaries by secure messaging, contact the tertiary hospital your adult patients most commonly attend:

- Fiona Stanley Hospital: Email
 <u>FSH.HIMSHISS@health.wa.gov.au</u> or see <u>Fiona</u>
 <u>Stanley information for GPs</u> on the Fiona Stanley
 Fremantle Hospitals Group website.
- Royal Perth Hospital: Email <u>RPH.GPN.Coordinator@health.wa.gov.au</u>, telephone 9224 3673, fax 9224 2348 or see <u>Communication</u> on the Royal Perth Hospital website
- Sir Charles Gairdner Hospital: Email
 <u>SystemsSupportMailbox.SCGH@health.wa.gov.au</u>,
 telephone 6457 3331 or fax 6457 3067.

Once updated, your new practice contact details will be available to other public hospitals in WA excluding some public-private hospitals which use different systems.

Quit Centre resources for health professionals

Supported by funding from the Australian Government Department of Health and Aged Care, the Quit Centre is a national online resource developed by health professionals for health professionals. At Quit Centre you will find clinical guidelines, online training and education and events to support you in delivering smoking and vaping cessation care in general practice. Tailored resources and information for general practice are available here.

Consider offering vaccines as a package this winter

At the recent WA Primary Health Alliance (WAPHA) Learning immunisation webinar (10 April 2025), presented by Professor Paul Effler and Professor Christopher Blyth*, WA GPs were encouraged to consider the co-administration of vaccines for influenza, COVID-19, pneumococcal and RSV.

View the updated guide on co-administration of vaccines for adults from the National Centre for Immunisation Research and Surveillance here.

*Prof Effler is the Senior Medical Advisor at the WA
Department of Health Communicable Disease Control
Directorate and Prof Blyth is head of the Wesfarmers
Centre of Vaccines and Infectious Diseases at the
University of Western Australia and an Infectious
Diseases Physician at Perth Children's Hospital.
Watch the video of the Immunisation - Winter Wellness
webinar here.

Four cases of meningococcal disease reported to WA Health

WA Department of Health <u>reported</u> four cases of meningococcal infection in the week preceding 24 April 2025; three are serogroup B and typing is pending on the fourth.

Two cases are children from the same household, while the other two cases are adults with no links to the children or to each other. All individuals are recovering in hospital.

A total of five cases of invasive meningococcal disease have been reported in 2025 (13 in 2024).

Meningococcal infection is a notifiable infectious disease in Western Australia and all cases must be reported urgently by telephone to local <u>public health units</u>.

Visit the WA Department of Health website for more information on <u>Meningococcal infection</u> and <u>Meningococcal immunisation</u>.

Introducing the WA Mobile Radiology Pilot Project

The <u>WA Mobile Radiology Pilot Project</u> will enable people living in residential aged care homes to receive x-ray and ultrasound services in the comfort of their residence with no out-of-pocket costs. This initiative, launched in partnership with the Australian Government Department of Health and Aged Care, began in March 2025 and will initially run for 18 months.

GPs affiliated with in-scope residential aged care homes can make referrals online and are invited to register for the referral portal. Further information on the Pilot, including service availability, registration and referral processes and resources, can be found on the <u>WA Mobile Radiology Pilot Project web page</u>.

Download the information flyer here.

National Lung Cancer Screening Program Launching July 2025

To help improve patient outcomes through the earlier detection of lung cancer, free, biennial, low dose CT scans for <u>eligible</u> individuals aged between 50 and 70 will be available under the National Lung Cancer Screening Program (NLCSP) from July 2025.

Assessment and referrals will be managed by GPs, and <u>practice software integration</u> is available through the National Cancer Screening Register standardised interface.

To facilitate accurate eligibility assessments and help identify patients who may benefit from smoking cessation support, practices can prepare for the NLCSP launch by completing a patient smoking status audit to ensure your patient records are up to date. See the <u>Get</u> your practice ready for the NLCSP checklist.

More information and resources for health professionals is available on the <u>Australian Government Department of</u> Health and Aged Care website.



This year's National Palliative Care Week (11-17 May), asks a simple, yet powerful question, "What's your plan?" It's a direct approach to Australians and their loved ones to talk about what matters most at the end of life and to make a plan that empowers and respects their choices during the last years, months and days of life. It is important that GPs are familiar with their patients' values and end-of-life wishes. Visit the Palliative Care Australia website to access resources and education.

The Greater Choice for At Home Palliative Care measure

The Greater Choice for At Home Palliative Care measure being implemented by Primary Health Networks across Australia, aims to improve access to quality palliative care at home. At the heart of this program being implemented by WA Primary Health Alliance are two main goals:

- Promote choice about what matters most to people who are approaching the end of their lives by improving awareness of advance care planning and palliative care.
- To develop a model of care which acknowledges the work of GPs in the care of people at the end of their life.

Visit the WAPHA website to learn more about this initiative's four key streams and access recommended websites, education, training, and other resources to support GPs in delivering quality palliative care. Visit www.wapha.org.au/palliative-care

New handbook of tools to support medicine management in multimorbidity and polypharmacy

A number of tools are now available to support GPs and other health professionals to manage concurrent use of medicines (common in patients with multimorbidity) and reduce the risk of harm.

The Australian Government Department of Health and Aged Care commissioned the University of South Australia to develop a handbook to collate examples of these tools across the spectrum of factors where problems with medicine use can develop. Download the handbook from the <u>Australian Government Department of Health and Aged Care website</u>.

Breast screening resources for Aboriginal patients



The Australian Government Department of Health and Aged Care has developed new resources for BreastScreen Australia to increase Aboriginal women's awareness of, and participation in, breast screening.

The resources include posters, brochures, animated videos, social media tiles and fact sheets, and include bespoke artwork by proud Gomeroi artist Caitlin Trindall.

Visit '<u>Screen With Your Sistas</u>' to download and share these resources through your practice channels. Practices are encouraged to use these resources with all audiences, but particularly when promoting the importance of breast screening to Aboriginal patients.

More information on the campaign is available from <u>CancerScreeningCommunications@health.gov.au</u>

New WA service supporting hepatitis B management in primary care

To better support primary health care professionals to monitor, treat and manage patients diagnosed with chronic hepatitis B, GPs and nurse practitioners can now access direct clinical support, education and the latest advice on managing patients living with this viral infection.

Launched in January 2025 as a joint initiative between the WA Department of Health and Royal Perth Hospital (RPH), the statewide hepatitis B service is monitored Monday to Friday with a two-business day response time, with advice provided by either email, phone/video call or an in-person visit.

Access the service by emailing <u>HepBHubWA@health.wa.gov.au</u>

Free mobile liver scans (Fibroscan®) are also available via outreach clinics in metropolitan general practices/health services. Contact RPH hepatology nurse practitioner, Adam Gregson adam.gregson@health.wa.gov.au for further information.

Access the latest data and insights on chronic hepatitis B and C in Australia

The ASHM Viral Hepatitis Mapping Project aims to improve understanding of chronic hepatitis B (CHB) and C (CHC) in Australia by examining regional variations in prevalence and care uptake.

Accompanying the recent release of the <u>project's latest</u> <u>national reports</u> ASHM has also published a tailored and <u>easy to use supporter kit</u> containing information and resources from the latest viral hepatitis mapping, including social media tiles using data specific to Perth North, Perth South and Country WA Primary Health Networks for practices to download and share.

Hospital Liaison GP Updates

Supported by WA Primary Health Alliance

Depression management and suicidality education courses from Black Dog Institute

Advanced Training in Suicide Prevention

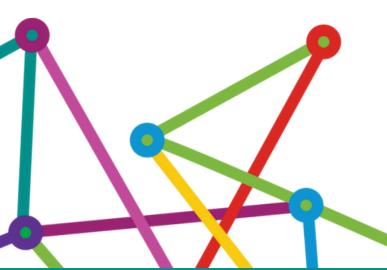
This workshop aims to increase skill and confidence in taking a detailed suicide history and developing a collaborative management plan to increase the safety of people planning suicide and reduce the risk of suicide. Provides practical tools for health professionals managing the full spectrum of suicide risk presentations including the acute suicidal crisis, care after a suicide attempt and assisting families experiencing suicide bereavement.

- 26 June 2025
- 10 August 2025
- <u>18 July 2025</u>

Talking About Suicide in Practice

An online workshop that will help increase health professionals skills and confidence in recognising presentations where suicide risk is high, undertaking a detailed risk assessment, and management planning using a collaborative, team-based approach.

- <u>17 June 2025</u>
- <u>13 September 2025</u>
- <u>6 November 2025</u>



WAPHA GP LEARNING GP Telehealth Networking Event The use of telehealth in primary care from different perspectives. DETAILS Thursday 8 May 6:30pm registrations, 7pm to 8:30pm Alice Ross-King Care Centre, 2 Bull Creek Dr, Bull Creek FIND OUT MORE AND REGISTER SPEAKERS Dr Rhion Moss Specialist GP Booragoon Medical Centre Dr Anastasia Isakova Specialist GP Soge Medical Consulting Dr Anastasia Isakova Specialist GP Soge Medical Consulting Dinne Piper Clinical Nurse Consultant Southern Cross Core

Hepatitis C treatment and the role of the GP

Wednesday 28 May| 7:00 PM - 8:00 PM | Online | RACGP | 1 RACGP EA CPD hour

Hepatitis C virus (HCV) infection continues to result in significant morbidity and mortality in Australia. Even with direct-acting antivirals, eradication of HCV remains a challenge with many patients unaware of their infection.

Hosted by RACGP WA Co-Deputy Chair and GP Dr Mariam Bahemia, this webinar is delivered in partnership with WA Health and explores the GP's role in treating HCV including:

- identifying at risk populations
- appropriate screening and testing
- signs and symptoms
- managing patients, surveillance and follow-up
- · when to refer
- what's new in this space.

Participants will have an opportunity to ask questions during the Q&A and may submit in advance when registering.

Register

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