

GP Connect

Keeping GPs informed in the changing primary health landscape



12 September 2024

The reemergence of mpox – clinical challenges, recommendations and resources for GPs

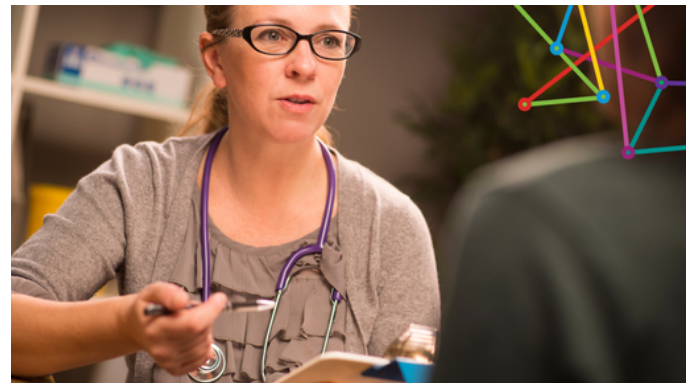
Communicable Disease Control
Directorate, WA Department of Health

Mpox (formerly monkeypox) has recently reemerged in Australia, with more than 500 cases reported since April 2024, mostly in Victoria and New South Wales. Two cases have been reported in Western Australia in the year to date. Unlike the 2022 outbreak which was strongly associated with recent overseas travel, most cases in the current Australian outbreak have acquired their infection locally.

The clade I and clade II outbreaks are different

On 14 August 2024, the World Health Organization (WHO) declared a Public Health Emergency of International Concern for an mpox clade I outbreak in Africa, which appears to be associated with greater severity in illness compared to clade II. To date, only two cases of the clade I strain of mpox have been detected outside of Africa, and all mpox cases in Australia have been the clade II strain.

The clade II mpox outbreak in Australia continues to disproportionately affect men who have sex with men. Although most cases have been sexually acquired, mpox can also spread through other skin-to-skin contact, respiratory droplets in prolonged face-to-face contact, or contact with contaminated surfaces or items such as towels or bedding.



Mpox may be difficult to recognise

Symptoms of mpox can occur up to 21 days after exposure, but usually appear within 7-14 days. Common prodromal symptoms are similar to other viral infections and include fever or chills, lymphadenopathy, headache, myalgia, arthralgia, sore throat and fatigue.

A rash or lesion(s) typically affects the genital or perianal areas but may appear on any part of the body (including inside the mouth). The lesions may appear as macules, papules, vesicles, pustules, ulcers or scabs as they progress through different stages. Refer to the [WHO Atlas of mpox lesions](#) for clinical images.

Other symptoms may include pain on urination (urethritis) or rectal pain, bloody stools or diarrhoea (proctitis). Breakthrough infections can occur in fully vaccinated individuals, but symptoms may be atypical or mild (e.g. a solitary lesion).

[What should I do if I suspect mpox?](#)

Continued page 2

The reemergence of mpox – (cont)

What should I do if I suspect mpox?

Test for mpox in men who have sex with men (and their sexual partners) who present with a clinically compatible illness, irrespective of travel history or in patients with a recent travel history to Africa who present with a clinically compatible illness. A [quick guide](#) has been developed to support primary health care providers. Remember to:

1. Wear personal protective equipment, including a surgical mask (or P2/N95 if patient has respiratory symptoms), gloves, disposable fluid resistant gown and eye protection.
2. Consider also testing for syphilis, varicella, herpes, molluscum contagiosum or bacterial infection if there is a clinically compatible presentation.
3. Notify the pathology laboratory of an arriving specimen so that it can be handled appropriately.
4. Advise the patient to stay home and limit contact with others while awaiting results, and to cover lesions with dressings or clothing if needing to leave home for essential activities. Provide them with the [What to do following a test](#) factsheet.
5. Clean and disinfect surfaces with a viricidal agent after the patient has left the room.
6. Notify confirmed or highly suspicious cases within 24 hours to your local [Public Health Unit](#) (or call 9328 0553 if after hours).

Seek infectious diseases or clinical microbiology advice if unsure about mpox testing or management.

A free vaccine is available for high-risk groups
Eligibility for the WA government-funded JYNNEOS® vaccine has been expanded, and the following people are now recommended to be vaccinated against mpox:

- all sexually active gay, bisexual or other men who have sex with men (including cis and trans)
- sex workers, particularly those with clients at risk of mpox exposure
- people living with HIV, if at risk of mpox exposure
- sexual partners of the people above
- laboratory personnel working with orthopoxviruses
- health care workers at risk for mpox, such as those working at sexual health clinics.

Mpox vaccination is currently not recommended as a travel vaccination unless the above eligibility criteria are met. Post exposure vaccination may also be offered to contacts of a mpox case, as determined by public health.

Two vaccine doses are required for optimal protection

Two doses of JYNNEOS® given at least 28 days apart will ensure optimal protection against infection and severe symptoms. Primary health care providers are encouraged to identify and recall at-risk patients who are eligible for mpox vaccination, or who have only received one dose. Booster doses are not currently recommended.

Subcutaneous injection is now the preferred route of administration and has a reduced risk of scarring compared with intradermal injection.

GPs and other primary health care providers in WA can order JYNNEOS® vaccine on the [Onelink](#) ordering platform. Visit the WA Department of Health [Mpox immunisation page](#) for further information. Further information:

WA Department of Health:

- [Mpox \(monkeypox\)](#)
- [Mpox \(monkeypox\) quick guide for primary healthcare workers](#)
- [Mpox resources - communications toolkit](#)

ASHM:

- [Mpox resource toolkit](#)

Australian Immunisation Handbook:

- [Mpox \(previously known as monkeypox\)](#)

ATAGI:

- [Interim statement on the use of vaccines for prevention of mpox in 2024](#)

Hospital Liaison GP Updates

Perth Children's Hospital

Feeding Assessment and Support Team at Perth Children's Hospital

The Perth Children's Hospital (PCH) Feeding Assessment and Support Team (FAST) provides multidisciplinary, time-responsive, and family focused services for infants and children with tertiary feeding difficulties.

The outpatient service comprises a consultant paediatrician, clinical nurse, dietitian, speech pathologist, and occupational therapist. This multidisciplinary team (MDT) works in collaboration with the family of children with paediatric feeding disorder (PFD) and other feeding difficulties to identify and overcome barriers to safe, sustainable, and developmentally appropriate feeding/mealtime engagement.

What type of referrals will FAST accept?

FAST will accept referrals for infants and children who have a [PFD](#) and who are at risk of hospitalisation or critical incident due to:

- Malnutrition or [faltering growth](#)
- Clinical signs of dysphagia e.g. aspirating, poor chest health, aspiration pneumonia
- Coexisting morbidities affecting feeding - respiratory difficulties, cardiac, prematurity, airway issues (laryngomalacia) etc
- Enteral feeding
- Significant food aversion and/or distress during feeding.

Available FAST services:

- Provide a combined dietetic and/or occupational therapy and/or speech pathology assessment of the infant/child's feeding and family mealtimes (as indicated)
- Work with the family to set and support feeding goals.
- Where appropriate, liaise with the clinical nurse specialist and/or consultant paediatrician. Please note not all children are seen by the consultant paediatrician.
- When tertiary feeding concerns are resolved but developmental feeding difficulties continue, refer on to appropriate community services.
- Work collaboratively with the infant/child's GP/paediatrician and handover care when appropriate.

Note: FAST eligibility is reviewed periodically dependent on client need and goals. Current referral criteria and information on how to refer is available [here](#). For more information on feeding difficulties, see the [PCH website](#).

GPs can contact the FAST team on email PCH.FAST@health.wa.gov.au or through the PCH Switchboard on 6456 2222.

Clinical Updates

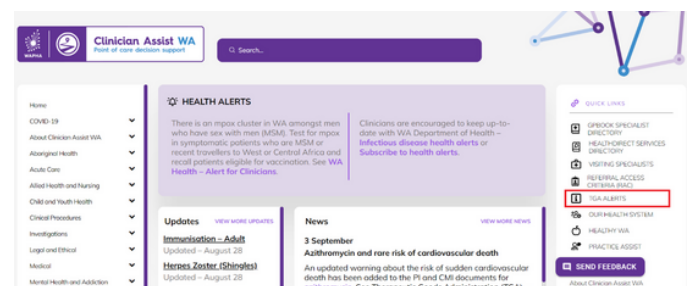
Resources for talking to patients about MyMedicare

The Australian Government Department of Health and Aged Care (DHAC), has developed a [collection of resources](#) in multiple languages to support conversations with patients and carers about the benefits of MyMedicare including:

- [MyMedicare – What it is and how to sign up](#) – Easy read.
- [Introducing MyMedicare](#) – Video
- [Registering in MyMedicare](#) – Video

More information is available on the [Practice Assist website](#).

Staying abreast of medication safety - TGA Alerts on Clinician Assist WA



The Therapeutic Goods Administration (TGA) regularly issue medication safety and availability updates via their [Safety Alerts](#) and [Safety Updates](#) (aimed at health professionals) pages.

Prescribers can also subscribe to TGA [email updates](#) and [RSS feeds](#). The TGA Alerts can also be accessed by clicking on the TGA Alerts button on the [Clinician Assist WA](#) homepage.

New resource to support the delivery of quality end-of-life care

caring@home has released the Prompts for End-of-Life Planning (PELP) Framework for health professionals across all care settings in Australia.

The PELP Framework guides proactive, high-quality end-of-life care to assist GPs and other health professionals in delivering person centred care during the last 12 months of life.

Developed with the guidance of GPs, palliative medicine specialists, nurse practitioners and nurses, the Framework includes prompts that can support:

- Identification of patients suitable for a palliative approach to care.
- Identification of four clinical end-of-life processes:
 - Advance care planning and person-centred care based on need (at risk of dying)
 - Transition focus of care needs from restorative to palliative (likely to die soon)
 - Terminal care needs (dying)
 - After-death care (bereavement).

caring@home is National Palliative Care Project funded by the Australian Government.

Visit the [caring@home project website](#) for information and to download a copy of the framework .

New travel vaccination FAQs from the NCIRS

The National Centre for Immunisation Research and Surveillance (NCIRS) has launched a new resource on travel vaccines.

These [frequently asked questions](#) are designed to be used by both health care providers and patients planning to travel internationally who may need additional vaccines to protect against infectious diseases they may be exposed to while overseas.

ACCRM Tele-Derm service for rural GPs and practices

Funded by the Australian Government, the Australian College of Rural and Remote Medicine (ACRRM) Tele-Derm service offers fast, expert dermatology consultations for rural and remote communities.

The service provides ACRRM members and non-members in [Modified Monash Model areas 3 to 7](#) with practical dermatology advice and education from experienced industry experts, including dermatologists, a plastic surgeon, and a vascular surgeon.

Dermatology educational resources, including real patient cases with answers, recordings of past webinars, and video demonstrations of common skin procedures are also available.

[Download the flyer](#) or find out more and register on the [ACCRM website](#).

Subsidised psychological support for vulnerable patients impacted by perinatal loss

Access to training and supervision for interested GPs on culturally safe engagement is also available.

A new Australian Government funded program is now accepting referrals to provide culturally safe support to patients and families from higher risk populations who are impacted by perinatal loss.

Rural Health Connect provides telehealth sessions with psychologists who are trained in perinatal loss and have experience working with people that can be at higher risk. Bulk billed and reduced fee sessions are available with a mental health treatment plan.

Higher risk populations include Aboriginal people, people from multicultural and refugee communities, people in rural and remote areas and women under 20 years of age.

Visit the [Rural Health Connect website](#) for more information on [Psychologist Supervision for GPs](#) and [referral options](#) or [patient flyer](#).

Contact Rural Health Connect Director, Megan Gomez on 0427 692 377 or info@ruralhealthconnect.com.au.

Expert advisory group appointed to protect nation's health from climate change

The Australian Government has established an expert advisory group to provide advice on reducing the impacts of climate change on the nation's health.

The Climate and Health Expert Advisory Group will also support implementation of Australia's first National Health and Climate Strategy.

Members include Australia's Chief Medical Officer and Head of the Interim Australian Centre for Disease Control, Professor Paul Kelly and RACGP President, Dr Catherine Pendrey.

Read the full DHAC announcement [here](#).

New study exploring suboptimal vaccine rates among toddlers in country WA

A new study from researchers from the University of Western Australia has explored the facilitators and barriers to routine childhood vaccine uptake in two year olds living in regional and remote WA.

Although at the time of the study (2021), overall vaccine uptake in all WA children aged < 60 months had increased to above the 95 per cent target, uptake declined from 12 months (92.3 per cent in Aboriginal children and 85.75 per cent non-Aboriginal children).

Key immunisation stakeholders participating in the study described previous efforts used to improve vaccine uptake, and felt that better access to vaccine clinics, building capacity of Aboriginal health workers, and vaccine reminders would improve uptake.

Read the study published in BMC Health Services Research [here](#).



Watch part two of this WA Primary Health Alliance video series with Dr Walid Jammal from Hills Family General Practice as he shares his thoughts on the importance of multidisciplinary team care.

Every practice is different and there is no single answer that will work for all, however the need for multidisciplinary care is clear. Working as a team, with a common purpose and vision, can improve the care of patients and the sustainability of the practice.

Dr Jammal also highlighted that teamwork can be built across sites, not just under the same roof. Practices should focus on what multidisciplinary team-based care means to them and put enablers in place to build trust and improve workflows.

[Watch the video.](#)

Lancet report on public health strategies to address the digital determinants of children's health and wellbeing

A recent Viewpoint from the Lancet argues children's use of digital technologies and engagement in digital environments should be recognised as important determinants of their health and that a public health approach is required to protect children from digital harms.

[Three groups of public health interventions](#) are proposed to help delay media use among very young children, reduce digital media use among children of all ages, and mitigate any harmful consequences of children's digital media use.

Read the full article in September edition of [The Lancet](#).

AIHW report on health service use among young people hospitalised due to family and domestic violence

Recognising children and young people as victim-survivors of family and domestic violence (FDV) and the need to establish supports and services that will meet their safety and recovery needs; a new AIHW report has focused on children and young people who have experienced FDV, and their health service interactions (both FDV- and non-FDV-related).

Key findings included:

- Every day, on average, one child has an FDV-related hospital stay.
- Males were typically younger than females at first FDV hospital stay.
- Of those with repeat FDV related hospital stays, most were female.
- Parents were the most common perpetrator recorded.

Read the summary findings on the AIHW website [here](#).

New research confirms health benefits of high-impact interval training for truck drivers

A new study from Heart Foundation Vanguard Grant recipient, Associate Professor Nicholas Gilson demonstrates high intensity interval training, consisting of three weekly sessions over a 12-week period is enough to significantly improve the cardiorespiratory fitness of truck drivers.

Short bursts of high intensity exercise, requiring as little as four minutes, three times a week make a promising health intervention for people working in time-poor occupations. Read more in the August edition of [Heart Lung and Circulation](#).

ASHM Roundtable Report seeks end to congenital syphilis in Australia

The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) and the Australian Government Department of Health and Aged Care, recently convened a national roundtable to address congenital syphilis in Australia.

Guided by a steering committee of relevant experts, the key areas of focus identified during the roundtable were the need to:

- Enhance access to health services and remove barriers to timely and appropriate care to prevent congenital syphilis for all pregnant people.
- Invest in, support and strengthen the health workforce to effectively prevent and respond to congenital syphilis.
- Cultivate alignment and ensure that systems are supporting the elimination of congenital syphilis.

Read more in [Towards the Elimination of Congenital Syphilis in Australia: Building Consensus for Priority Actions Roundtable Report](#).

Information on the WA syphilis outbreak response is available on the [WA Department of Health website](#).

Help your patients speak to their children about the harms of vaping



The Australian Government Department of Health and Aged Care (DHAC) has developed a range of resources for parents and carers to start conversations with young people about the harmful impacts of vaping and help them on their journey to quit for good.

Resources include:

- a conversation guide and factsheet
- FAQs about vaping
- a series of short, animated videos.

Direct patients to the [DHAC website](#).

Lifeline WA online support group for survivors of suicide attempts – next intake 18 September

Eclipse is a free online support group from Lifeline WA, for adults who have survived one or more suicide attempts. It offers a safe space to connect with people who have had a similar lived experience and learn valuable skills to increase coping responses in relation to suicidal thoughts.

The next eight-week Eclipse program commences 18 September, with sessions on Wednesday mornings.

Find out more and register on the [Lifeline WA website](#)

Support patients to move more with a Heart Foundation walking program

The Heart Foundation is offering a free, structured, and supportive walking program to supplement your patient care. The program offers peer and motivational support and can help your patients understand the benefits of walking. Whether your patients want to walk on their own or walk in a group, the free program has been developed to help them meet the national physical activity guidelines.

Find out more [here](#) and order promotional flyers for patients [here](#).

Contribute to improving 13YARN service delivery

If you treat Aboriginal people, the Australian Government Department of Health and Aged Care would like to understand your awareness of the national, [13YARN](#) crisis support line, your likeliness to refer to 13YARN and any suggestions you may have for integration or delivery. The evaluation will help to assess the service's cultural appropriateness, awareness, efficiency, accessibility, and effectiveness, with the goal of forming recommendations for service delivery improvements. [Download the flyer](#) or [complete the 5 to 10 minute survey](#) by 20 September 2024. Contact the project team by emailing 13YARN@scyne.com.au.

New video to help Aboriginal families understand the importance of childhood immunisation



The Australian Government Department of Health and Aged Care has launched new advertising for Aboriginal parents and carers on the importance of childhood immunisation to keep their children and the community safe from serious diseases.

The Super Kids ad shows how being up to date with vaccinations means little ones can become superheroes who can help protect the entire community.

This advertisement will be shown throughout Aboriginal Medical Services and on social media as a reminder to get children vaccinated. Download a copy to share through your practice channels [here](#). More childhood immunisation resources for Aboriginal people are available [here](#).

Lifeline WA free bereavement counselling

The Lifeline WA counselling team provides free, individual and group support for people across WA dealing with separation or bereavement from a loved one.

Available flexibly through face-to-face sessions, via Zoom or over the phone, the service provides practical support and assistance in up to 12 counselling sessions (over a maximum of 12 months).

Access the [referral form](#) or visit the [Lifeline WA website](#) for more information. Enquiries can also be made by phone 9261 4498 or by emailing counselling@lifelinewa.org.au.

GP Education and Events

Looking for a 2024 Measuring Outcomes CPD activity?

Completion of an Advance Care Planning (ACP) and Advance Health Directive (AHD) mini-audit activity will earn GPs six Measuring Outcomes CPD hours.

Developed by the WA Department of Health End of Life Care Program, in consultation with the RACGP, the mini audit will help GPs review whether opportunities to introduce ACP or AHD conversations into consultations, assessments and care plans are being adequately undertaken and recorded, and to identify actions that practice teams can collectively take to increase effective ACP and AHD conversations.

To learn more about the use of the mini-audit activity and the role of GPs in supporting patients with ACP, [view the recording](#) on the RACGP website. GPs will be able to claim one hour of CPD via quick log.

For more information about ACP and AHDs:

WA Department of Health:

- [Advance care planning](#) including [ACP training and resources](#)
- [Advance Health Directives](#)

Clinician Assist WA:

[Advance Care Planning \(ACP\)](#) clinical pathway.

Weighing In: Unpacking new evidence in managing obesity and cardiovascular diseases

[Webinar | On demand](#)

Chaired by Professor Garry Jennings, and joined by an expert panel, the latest health professionals clinical webinar from the Heart Foundation weighs in on the profound relationship between obesity and cardiovascular diseases.

Watch webinar recording [here](#).

Diabetes Connect for Country WA – webinar series

18 September - 15 October 2024 | Online

With explosion in new treatments and research outcomes, it can be tough for health care providers to navigate all the different options, services, and PBS subsidies available. This discussion with Diabetes WA will cover common challenges and show how getting timely advice can support GPs to provide evidence-based care.

[Download the flyer](#) or register [here](#) for various dates in September and October.

Rural Health West webinar - Streamlining visa and sponsorship for GPs

Monday 16 September | Online | 1.00pm

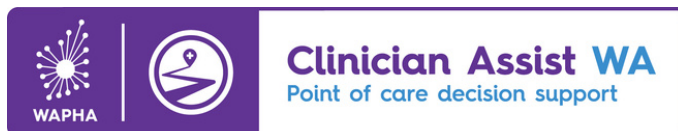
Navigating the complexities of visas and sponsorship nominations can be challenging for employers, especially with the ever-changing regulations. To simplify this process, Rural Health West has partnered with migration specialists at EasiVisa to develop a straightforward four-step approach to guide you through the application process.

The new WA Designated Area Migration Agreement from the WA Government can also enable regional practices to recruit and sponsor experienced health care professionals, who would typically be ineligible for permanent residency due to their age.

For more details, join Rural Health West's recruitment team and EasiVisa for a webinar on Monday 16 September at 1.00pm.

Register for the webinar and submit your questions by emailing recruit@rurahealthwest.com.au

2024 WA Addictions Symposium



Saturday 12 October | 9.00am - 4.15pm | UWA or Online

The RANZCP WA Faculty of Addiction Psychiatry presents an all day symposium for GPs and other health professionals on novel psychoactives and the new frontier in addiction.

Attend in person or online. CPD certificates of attendance available upon request.

Cost:

- In person - \$148.50 (Fellow/affiliate), \$126.50 (trainee)
- Online - \$132 (Fellow/affiliate), \$121 (trainee)

[Find out more and register](#)

Paid GP training

The Initial Assessment and Referral Decision Support Tool guide to mental health referrals

September - October | Online

The Initial Assessment and Referral Decision Support Tool (IAR-DST) helps general practitioners and clinicians to recommend the most appropriate level of care for a person seeking mental health support. It is designed to be used alongside a comprehensive, holistic mental health assessment to gather information and guide referrals. GPs and GP registrars who attend the two workshops in one online session will be remunerated \$300* and CPD/PDP hours are available.

[Find out more and register](#)

Live demonstration

Understanding and using Clinician Assist WA

Tuesday 24 September | 12.30pm – 1.15pm | Online

Clinician Assist WA has replaced HealthPathways WA and provides access to the same trusted local guidance, features and functionality and remains available at no cost.

The Clinician Assist WA team will run online demonstrations facilitated by a GP clinical editor monthly until November 2024 to support users. These sessions will demonstrate how to maximise integration of Clinician Assist WA into your clinical practice.

[Find out more and register](#)

Additional dates:

- [Tuesday 22 October](#)
- [Thursday 14 November](#)

Upcoming changes to chronic disease management items webinar

Wednesday 9 October | 5.00pm – 6.00pm (AWST) | Online

Ahead of the [major changes to the Medicare Benefits schedule items for chronic disease management](#) commencing from 1 November, the RACGP invites GPs, practice managers and other members of the general practice team to attend an online information session on upcoming changes to chronic disease management items.

Speakers:

- Imogen Colton - Director of the General Practice Section in the MBS Policy and Review Branch at the Department of Health and Aged Care
- Louise Riley - Assistant Secretary of the MBS Policy and Review Branch of the Australian Government Department of Health and Aged Care

[Find out more and register](#).