

BEST PRACTICE

THE LATEST IN BEST PRACTICE AT ST ANDREW'S WAR MEMORIAL HOSPITAL

Summer 2016

St Andrew's emergency centre ranked number one

Gynaecological oncology service welcomed

Multidisciplinary specialist care for women's health

TAVI program grows from strength to strength

Update



Welcome to the last edition of *Best Practice* for 2016. It has certainly been a busy year for St Andrew's! It's been 12 months since I commenced as Director of Medical Services and I have enjoyed

getting to know our General Practitioner (GP) and Visiting Medical Practitioner community through our continuing professional development program, hospital events and shared clinical care of patients during this time.

The hospital continues to innovate and grow our clinical services celebrating 12 months of the TAVI program and adding to the range of interventional endoscopy on offer. We've seen the opening of St Andrew's Medical Imaging (SAMI) and welcomed several new VMPs to the St Andrew's family.

Our commitment to excellence in patient outcomes continues and was recently recognised at the UnitingCare Health Innovation and Excellence Awards for cardiac surgery and 2016 Press Ganey patient satisfaction survey for our Emergency Centre.

We proudly launched our Mindfulness Colouring Book, which now forms part of our breast care package for patients undergoing treatment for breast disease and we continue to strengthen our community links through our consumer committee, Primary Healthcare Network Collaborative and GP representation on our Medical Advisory Committee.

As this year draws to a close, I thank you for your support of St Andrews and wish you and your families a safe and happy holiday period. We look forward to reconnecting with you in the New Year.

Dr Mellissa NaidooDirector of Medical Services
St Andrew's War Memorial Hospital

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Kidney health





Cirque du St A

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VMP Profile Updates



Dr Dihan Aponso
MBChB FRACS (Orth) FAOrthA
Spinal & Orthopaedic Surgeon
T 07 3278 2662

Dr Dihan Aponso is a specialist in Spine and Orthopaedic Surgery and offers a comprehensive private practice in all aspects of spinal disorders. Dr Aponso has a public appointment at the Princess Alexandra Hospital and offers spinal surgery services at St Andrew's War Memorial Hospital and The Wesley Hospital.

Originating from New Zealand, Dr Aponso completed his MBChB from the University of Auckland. He undertook orthopaedic surgery training, obtaining his fellowship from the Royal Australasian College of Surgeons in 2013, and subsequently completed Foot and Ankle Surgery subspecialty training in Melbourne. During his fellowship he was appointed and worked as a consultant orthopaedic surgeon at The Alfred.

In 2015, Dr Aponso undertook a clinical Spinal Surgery

fellowship at the Princess Alexandra, Lady Cilento Children's and Wesley Hospitals in Brisbane. He gained extensive experience in the management of both adult and paediatric, elective and trauma spine disorders.

Dr Aponso offers a comprehensive approach in treating spine problems. He utilises a unique blend of his expertise in open spine techniques and minimally invasive procedures, together with a patient centred approach to offer his patients' the best outcome. His clinical practice is evidence based and he is well read and abreast of advancing techniques and technology in spine surgery. Dr Aponso's special interests are cervical and lumbar degenerative and deformity conditions and in utilising innovative techniques in addressing common spinal problems.



Dr Ben Dodd BSc MBBS MSc FRCS FRACS General Surgeon T 07 3367 1126

Dr Ben Dodd is a General Surgeon with subspecialty interest in laparoscopic Upper Gastrointestinal (oesophagogastric) and Bariatric surgery. After growing up in Brisbane and completing a Bachelor of Science degree, Ben graduated in Medicine from the University of Queensland in 2001. He subsequently completed his specialty training in the UK and Ireland, obtaining his Fellowship of the Royal College of Surgeons (FRCS) in 2013.

Ben then returned to Brisbane to undertake 2 and half years of further fellowship training in complex laparoscopic Upper GI cancer and Bariatric surgery at the Princess Aelxandra and Royal Brisbane and Womens' Hospitals. He also completed the Australasian Fellowship exam and was awarded Fellowship of the Royal Australasian College of Surgeons (FRACS) during this time.

During these years of post-Fellowship training with world experts in their fields, Dr Dodd has obtained expertise in the management of:

- upper GI (oesophagus and stomach) cancer
- reflux disease and hiatus hernia
- bariatric (weight loss) surgery, including complex revisional
- evidence based dietary weight loss advice
- biliary (gallstone) disease
- hernia surgery

Ben is an active supervisor of surgical registrars and regularly teaches medical students through his academic appointment as lecturer with the University of Queensland. He is a member of RACS, RCS Edinburgh, ANZGOSA and OSSANZ.

Dr Dodd has presented and published during his training, and completed a Masters of Science (MSc) degree in 2010. He is passionate about minimising surgical complications and optimising the patient experience through enhanced recovery programmes, laparoscopic surgery and robust clinical governance and audit practices.



Dr Roland Hilling-Smith
MBChB FRACP
Interventional Cardiologist
T 07 3016 1111

Dr Roly Hilling-Smith is an associate with Queensland Cardiovascular Group. He studied medicine at Edinburgh University, Scotland. He trained in general medicine at Fremantle Hospital and cardiology at the prestigious MonashHeart in Melbourne.

Roly has undertaken two interventional fellowships, firstly locally at Princess Alexandra Hospital in Brisbane. He was then awarded the Chamberlain Scholarship in Advanced Coronary and Structural Intervention at the world renowned Royal Sussex County Hospital, England. During his time there Roly was involved in many international trials and several first-in-man developments.

Roly's main interest is in clinical cardiology with a focus on coronary and structural intervention. Unusually for an

interventional cardiologist, Roly is also trained, accredited and performs cardiac CT giving a unique perspective in the diagnosis, investigation and management of cardiovascular diseases.

Roly performs a wide range of percutaneous interventional procedures including coronary stents, rotablation and chronic total occlusion revascularisation. He performs the full range of structural interventions including TAVI, PFO / ASD closure, percutaneous treatments of aortic and mitral valves, left atrial appendage occlusion and renal denervation amongst others.

Roly recently joined St Andrew's War Memorial Hospital and is also a proud member of the Heart of Australia project providing cardiovascular care to regional Queensland.



Dr Elizabeth Hodge BSc MBBS FRACS ENT Surgeon T 07 3831 5294

Dr Elizabeth Hodge is a Queensland-trained ENT surgeon and treats both adult and paediatric patients for a wide-range of ENT concerns. Her special interests are in voice concerns, paediatric otolaryngology, laryngeal hypersensitivity, chronic cough, swallowing disorders, and head and neck malignancy.

Following the completion of her Australian training, and the awarding of her Fellowship from the Royal Australasian College of Surgeons in Otolaryngology and Head and Neck Surgery, she has completed two further sub-specialty fellowships. The first of these was in Head and Neck Surgery at the Royal Brisbane and Women's Hospital. Secondly, she completed the Royal College of Surgeons "North Thames Laryngology Fellowship" in London. She was a recipient of

the Morgan Travelling Scholarship from the Royal Australasian College of Surgeons for the Laryngology and Airway Fellowship.

As well as practicing privately at St Andrew's, she also holds an appointment as a Visiting Medical Officer with the Metro North division of Queensland Health in Brisbane.

Dr Hodge is a member of the Australian Society of Otolaryngology, Head and Neck Surgery (ASOHNS), the Laryngology Society of Australasia, and the Australian Medical Association (AMA). She is currently the RACS Younger Fellows Representative to the Royal Australasian College of Surgeons Oueensland State Committee.



Dr Jason Huang
MBBS BMedSci FRACP
Gastroenterologist
T 07 3193 0877

Dr Jason Yan-Lin Huang is an Australian trained Gastroenterologist with extensive post graduate fellowship experience in advanced endoscopy. He graduated from the University of Melbourne with a double degree in medicine and biomedical science. His general gastroenterology training took place at the Royal Brisbane and Women's Hospital, Princess Alexandra Hospital and the Gold Coast Hospital.

Jason was admitted as a fellow of the Royal Australasian College of Physicians in 2012. Jason subsequently underwent intensive postgraduate training in procedural gastroenterology. He completed his first advanced endoscopic fellowship year at the Royal Brisbane Hospital which was followed by a second and third fellowship year at the world renowned H.H Chao Comprehensive Digestive Diseases Center at University

of California, where he held a faculty position as a clinical instructor.

Jason is experienced in new technologies such as use of the OverStitch device for endoscopic suturing in bariatric endoscopy and novel endoscopic anti reflux treatment yet to be available in Australia. He was also involved in the development and innovation of novel endoscopic devices/technologies and diagnostic/therapeutic endoscopic techniques. Jason also has extensive experience in colonoscopy, polyp detection and removal of large or difficult polyps.

Jason has particular interests in general gastroenterology, colonic, esophageal and gastric cancer prevention, comprehensive management of reflux, pancreatic/biliary diseases and bariatric endoscopy.



Dr Kowsi Murugappan MBBS FRACS Breast and Endocrine Surgeon T 07 3226 3800

Dr Kowsi Murugappan is a Breast and Endocrine Surgeon and recently commenced her private practice at St Andrew's War Memorial Hospital.

Dr Murugappan developed a passion for health care while growing up in northern country Victoria and seeing the impact of a dedicated medical professional. This passion took her to completing a medical degree at Monash University in 2004, followed by General Surgical training at the Austin Hospital and Monash Health between 2006-2012.

During training, she developed a strong interest toward breast cancer management. She pursued and completed three years of

Breast and Endocrine fellowships at Nepean Hospital – Sydney, Christchurch Hospital and RBWH. At the end of her Fellowship at RBWH she accepted her current role as staff specialist in Breast and Endocrine surgery.

Over the years, she has broadened her experience in her field including a special interest in oncoplastic and reconstructive breast surgery. She also has a strong academic focus with active involvement in breast cancer research through University of Queensland Centre for Clinical Research.

Dr Murugappan will be consulting through Specialist Services Medical Group at St Andrew's.





Dr Philip Robinson
MBChB PhD FRACP
Rheumatologist
T 07 3084 3583

Dr Philip Robinson is a Rheumatologist, a doctor who specialises in the treatment of arthritis and connective tissue diseases. Philip recently commenced private practice at St Andrew's and also works as a staff specialist at the Royal Brisbane and Women's Hospital and as a Senior Lecturer at the University of Queensland.

Philip trained in rheumatology in New Zealand. He graduated in Medicine from Otago University and qualified as a fellow of the Royal Australasian College of Physicians in 2010. He is a member of the Australian Rheumatology Association and the American College of Rheumatology.

Philip is actively involved with training being a supervisor for the Royal Australasian College of Physicians, sitting on the Advanced Training Committee for Rheumatology for the Royal Australasian College of Physicians and being the Northside Pathway Coordinator for the Queensland Basic Physician Training Scheme.

Philip has a strong research background having completed a PhD and post-doctoral fellowship at the University of Queensland and has published his work in numerous peer reviewed journals.



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St Andrew's TAVI program grows from strength to strength

St Andrew's became the first private hospital in Queensland to offer this revolutionary aortic valve surgery in July 2015.

Now more than one year on, the program has successfully treated more than 70 patients with TAVI and over 150 with valvuloplasty. The program has quickly established itself as a top 10 high volume centre in the country. With the average patient age over 85, most report an improvement in the quality of their daily lives and those with serious comorbidities find that an improvement in their cardiac health improves their overall wellbeing.

TAVI program coordinator Wendy Keegan says patient referrals for this procedure have doubled since the start of the program. "We started off doing two cases a month, but with increased referrals to our service resulting in a rise in the number of suitable cases, we are currently doing at least four cases a month to cope with demand."

"Our Heart Valve Team consisting of highly experienced interventional cardiologists, cardiothoracic surgeons, general cardiologists, intensivists, anesthetists and geriatricians has assessed over 150 patients, with over 70 successful procedures to date," Ms Keegan said. "Our extensive screening plays an important part in the success of the TAVI program at St Andrews."





Our Heart Valve Team consisting of highly experienced interventional cardiologists, cardiothoracic surgeons, general cardiologists, intensivists. anesthetists and geriatricians has assessed over 150 patients. with over 70 successful procedures to date

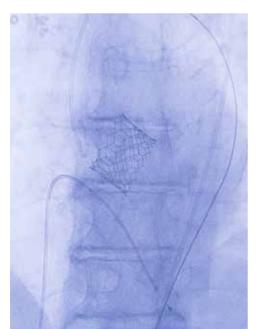
Having led the way in the TAVI arena in the private sector, the St Andrew's team achieved many "firsts" in the state of Queensland: first surgical TAVI, first valve-in-valve TAVI, first to perform over 50 cases in a year and first to introduce several valve choices for patients.

As the program expands there are now more options available for patients requiring valve replacement who have poor femoral access. The new generation of delivery systems have a reduced sheath size, as low 14Fr, enabling most of the TAVI cases to utilise the Trans Femoral approach. However, we have now performed 2 Trans Aortic cases (access via a hemi-sternotomy through the ascending aorta), in patients with reduced femoral diameters or unsafe femoral access.

TAVI technology has also allowed us to implant a TAVI valve within the existing prosthetic device, obviating the need for re-do open heart surgery, referred to as "Valve in Valve" and at St Andrew's we have been successful in using this technique in 3 cases within this first year.

The team has been meticulous in maintaining best in class results and St Andrew's contributes outcome data to the TAVI Registry.

The St Andrew's team will continue to lead the way forward in offering first class, comprehensive and innovative cardiac care for the people of Queensland and beyond.



Screen shot via medical imaging of implanted TAVI

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Our extensive screening plays an important part in the success of the TAVI program at St Andrew's



Dr Alex Incani and Dr Karl Poon



TAVI team in action



Valve preparation - valve crimper and loaded valve



TA\/I

For more information or to make a referral please contact:

Wendy Keegan St Andrew's TAVI Coordinator T 07 3834 4444 (ext. 4838) wendy.keegan@uchealth.com.au standrewshospital.com.au/tavi

St Andrew's launches Mindfulness colouring book as part of Breast Cancer Awareness Week

St Andrew's War Memorial Hospital has created a mindfulness colouring book as part of the breast care support package to be provided to patients undergoing treatment for breast disease at the hospital.



Dr Mellissa Naidoo and Kay McGrath

The book entitled *Companion*, features original artwork by Rebecca Cullum-Brown who was diagnosed with breast cancer in December 2015 and quotes from patients and their loved ones.

Since 2011, St Andrew's has responded to the increased breast care needs of patients launching the Breast Care Nursing Service in 2014.

Director of Medical Services, Dr Mellissa Naidoo, said "A breast cancer diagnosis can be an incredibly confronting and isolating experience and support with emotional and practical issues during treatment can make all the difference to patients."

"Our breast care package is individually tailored to support patients during their treatment for breast disease. *Companion* will now form part of this package."

Our specialist breast care nurses provide a coordinated individualised and holistic approach to care, supporting patients from diagnosis through to surgery and subsequent treatments.

Companion was launched at St Andrew's annual breast cancer morning tea on Tuesday 25 October in front of around 45 invited guests, including current and former patients.

Channel 7's Kay McGrath, an advocate for breast cancer awareness, and UnitingCare Queensland Chief Executive Officer Anne Cross were among the guest speakers at the event at Spring Hill's Hotel Grand Chancellor.

"As part of the team, St Andrew's specialist breast care nurses support our patients with care tailored to their needs," Anne said.

St Andrew's breast care program sees 170 patients per year with one quarter coming from regional and remote areas of Queensland.

Learn more about the individualised care and support available at www.standrewshospital. com.au/services/breast-surgery

As part of the team, St Andrew's specialist breast care nurses support our patients with care tailored to their needs







Kay McGrat



You don't need to know anything about art to become completely immersed in colour, or to be able to express through it.



Rebecca Cullum-Brown

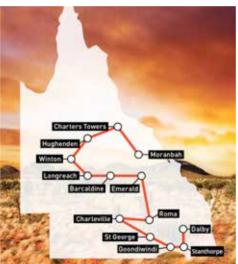
St Andrew's Emergency Centre ranked nation's best



The Emergency Centre at St Andrew's War Memorial Hospital has been given the highest rating in patient satisfaction for emergency services in Australia. More than 6000 patients from 67 public and private hospitals across Australia and New Zealand were involved in the 2016 Press Ganey patient satisfaction surveys. St Andrew's Emergency Centre outranked its peers for having the shortest wait times, the best pain management for patients, informed delays, the shortest wait times for radiology tests and staff friendliness to patients and their families. Patient satisfaction results also rated very highly for doctors at the hospital. Read more at standrewshospital.com.au

Heart bus takes off on national TV





A July episode of ABC's Australian Story featured the inspiring tale of Dr Rolf Gomes, founder of the "heart bus" mobile clinic. Dr Gomes, via his Heart of Australia program, delivers vital cardiac services to rural and regional areas of Queensland from the back of a 25m-long semi-trailer. St Andrew's is proud to be an official sponsor of this Australian-first program that takes capital-city levels of care to about 12 regional and remote communities across Queensland. Learn more about this service at www.heartofaustralia.com View Dr Gomes' inspiring tale at: www.abc.net.au/austory/content/2015/ s4418731.htm



UCH Innovation and Excellence Awards

St Andrew's takes pride in its reputation for research and innovation and this was recently recognised at UnitingCare Health's Innovation and Excellence Awards.

The annual event, held on Monday 31 October celebrates the innovative projects and initiatives being delivered across all four UnitingCare Health hospitals.

A number of outstanding finalists were shortlisted and presented their initiatives, across six different categories at the Innovation and Excellence Awards ceremony with several winners and finalists from St Andrew's.

Group Executive UnitingCare Health, Arthur Yannakou said that the nominations received this year and the outstanding initiatives that have been implemented are second to none.

St Andrew's was particularly proud to see our work in optimising blood management during cardiac surgery recognised – well done lan Smith, Senior Advisor, Physical Sciences & Clinical Outcomes Analysis. Also, congratulations to Dr Mark Dalton, one of our Emergency Centre doctors nominated and highly commended for achievement in excellence in living values.

The nominations received this year and the outstanding initiatives that have been implemented are second to none

The winners and finalists for St Andrew's were as follows:

Excellence in Patient Outcomes

Winner: Optimising blood management during cardiac surgery

Outstanding Service to Others

Winner: Achieving Outstanding Service and Patient Outcomes through Malnutrition Benchmarking, TWH & SAWMH

Finalist: Implementation of Periop Tracking Boards,TWH, SAWMH, TSCPH and SSH

Living Values

Highly Commended: Dr Mark Dalton, SAWMH, Dr David Coman, TWH

Finalists: Emily Shrapnel, SAWMH



L-R: Bruce Moore, Ian Smith, Emily Shrapnel, Anne Cross



Dr Mark Dal

Gynaecological oncology service welcomed at St Andrew's



Professor Andreas Obermain

After operating his highly regarded private practice in gynaecological oncology and pelvic surgery from Greenslopes for over 10 years, Professor Andreas Obermair has embarked on a new professional challenge with the recent opening of his new consulting suite at 490 Boundary Street, Spring Hill.

Professor Obermair is a leading gynaecological oncologist, specialising in surgery for gynaecological cancers, including ovarian, uterine, cervical, vulval and vaginal, as well as complex gynaecological conditions. He is passionate about transforming the landscape of gynaecological cancer in Queensland by pioneering world-leading research as Director of Research at the Queensland Centre for Gynaecological Cancer (QCGC) and cofounding the Cherish Women's Cancer Foundation to raise funds to find more effective, less invasive and gentler treatment options.

Through his research endeavours, Professor Obermair offers patients up to date care that is safe, sound and in line with current literature. Professor Obermair offers total laparoscopic hysterectomy to his patients, a method proven to minimise surgical complications and costs, and significantly reduce recovery time.

Professor Obermair's LACE study comparing laparoscopic with open hysterectomy has changed the way endometrial cancer is treated in Australia. When the trial first began in 2005, only 10 gynaecological oncologists were willing and able to do the procedure while today, almost half of the 50 gynaecological oncologists offer laparoscopic hysterectomy to their patients.

In addition to improving quality of life for his patients, Professor Obermair is committed to preserving women's fertility by exploring



The Hon Leeanne Enoch MP with Professor Obermain

alternative treatments to hysterectomy in the early stages of gynaecological cancer. He also operates a successful surgical software company, SurgicalPerformance, and was recently awarded a \$100,000 grant to further develop software that will help 600 surgeons across Australia gain access to clinically meaningful data to enhance their services.

Professor Obermair and his team pride themselves on putting patient care first, and strive to continually improve the quality of their service to meet the needs of patients. They understand that it can be unsettling to be waitlisted for an appointment, especially if patients are traveling to Brisbane, and for that reason aim to see all patients within four to five working days.

Referrals can be made via the following pathways: T 07 3847 3033
F 07 3847 3088
E rooms@obermair.info
Medical Objects

The central location of Professor Obermair's new independent private practice will not only ensure that patients can easily access high quality care, regardless of where they live, but also allow him the autonomy to host information events and seminars for patients, carers and other healthcare professionals. Professor Obermair and his team look forward to keeping you updated on these developments and welcoming you to the practice in the near future.

To keep up to date with Professor Obermair's new research developments and events, follow www.obermair.info or www.facebook.com/drobermair.

Laser treatment to tighten vaginal tissue

St Andrew's Pelvic Medicine Centre offers the Lumenis Laser procedure to treat vulvovaginal atro-phy, a common and underreported condition linked with decreased oestrogenisation of the vaginal tissue.

Pelvic Medicine Centre Gynaecologist Dr Caron Forde says the condition occurs when there's oestrogen withdrawal from the body usually caused by menopause or treatments for breast cancer

"Up until now, the only treatment for the condition has been oestrogen replacement," Dr Forde said.

"There are women who cannot take oestrogen i.e women with breast cancer. Some women have trouble with the application of oestrogen cream for example because of arthritis, limited mobility, flexibility and the elderly," Dr Forde said.

"There are women who just don't want to use a vaginal cream daily or weekly because it is messy and gooey."

"Women who had laser treatment reported that their mild stress incontinence improved and

there are a number of studies to support this."

The Lumenis Laser procedure takes about 10 to 15 minutes. At first, women need three treatments about four weeks apart and then a top-up every 9 -12 months.

"The vagina treatment is well tolerated, a bit like a Pap smear, but the vulvar treatment can be a bit painful so we use local anaesthetic cream on the vulva," Dr Forde said.

"Some vaginas are so tender that the women may require a general anaesthetic for the first or second procedure."

Dr Forde says although most women are embarrassed to mention the problem, it can present as low libido, marriage problems, recurrent itch or irritation, urinary incontinence and depression.

"This is a revolutionary treatment for vulvovaginal atrophy. It is simple and effective,' she said.

The procedure is performed within the Pelvic Medicine Centre and is easily done as ar outpatient appointment.

П

This is a revolutionary treatment for vulvovaginal atrophy. It is simple and effective

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McGrath

Kidney health: 10 things you need to know about Diabetic Kidney Disease



Professor Keshwar Baboolal St Andrew's Sessional Suites

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Diabetes is the most common cause of end stage kidney disease (ESKD) in Australia.

Diabetes remains the leading cause of end stage kidney disease in Australia. Approximately "5000 Australians receive renal replacement therapy (RRT) as a consequence of diabetes" (1.1). For every diabetic patient receiving RRT, there are approximately "50 diabetic patients with earlier stages of diabetic kidney disease" (1.1).

2. Diabetic nephropathy is heralded by the onset of proteinuria.

Classical diabetic nephropathy is defined by the onset of proteinuria (>300mg/day). In the early stages of diabetic nephropathy (incipient nephropathy) micro albuminuria is present (≥ 30 mg/day - <300mg/day). Without specific interventions, micro albuminuria will progress over time to diabetic nephropathy, which heralds the onset of a progressive decline in renal function. Actions to slow down the progression of diabetic renal disease including, blood pressure and blood glucose control, are important treatments to reduce the incidence of ESKD.

3. Diabetic kidney disease represents a heterogeneous group of diseases.

Classical diabetic nephropathy is not the only cause of diabetic kidney disease. Irreversible kidney disease can result from ischaemic damage to the kidneys as a consequence of repeated episodes or persistent reduction in renal blood flow as found in conditions such as heart failure, renal artery stenosis and hypertension (3.1). Ischaemic nephropathy can coexist with classical diabetic nephropathy. In addition patients with diabetes may have other causes of renal disease including other glomerular diseases and obstructive uropathy. (3.2)

Proteinuria and impaired renal function are strong predictors of developing renal failure, cardiovascular morbidity and mortality.

Proteinuria and GFR are each significant predictors of ESRD in T2DM, and the combination of proteinuria and GFR is significantly better than either measure alone ^(4.1). Proteinuria and impaired renal function are also well-recognized predictors of increased cardiovascular risk and mortality in diabetes ^(4,2,4,3,4,4). The magnitude of proteinuria predicts an increased likelihood of cardiovascular events. In the RENAAL study, baseline proteinuria was found to be the strongest predictor of heart failure with "an almost linear relationship between the two such that an increase of 1.0 g/day proteinuria was associated with 26% risk for HF" ^(4,5)

5. Patients with diabetic kidney disease are susceptible to acute kidney injury (AKI).

Patients with diabetic kidney disease are at higher risk of developing acute kidney injury compared to patients with diabetes alone. The more severe the kidney disease, the greater is the risk of AKI ^(5.1). Potential insults to the kidney include "cardiovascular disease, heart failure, medications such as antihypertensive agents, diuretics, episodes of sepsis, and increased exposure to surgical procedures or iodinated contrast agents. Patients with diabetic kidney disease are often exposed to multiple events that lead to AKI" ^(5.1)

6. Recurrent episodes of AKI in diabetic kidney disease result in progressive chronic kidney disease (CKD).

Approximately 30% of diabetic patients with an episode of AKI will experience another AKI episode ^(6.1). Each episode of AKI doubles the risk of progressive diabetic kidney disease and



increases the risk of developing advanced stages of CKD. The effect of AKI is independent of other major risk factors of kidney disease progression ^(6.1)

7. Heart disease is common in diabetic kidney disease. Diabetic kidney disease worsens diabetic heart failure; heart failure worsens diabetic kidney disease.

"The kidney and the heart regulate extracellular fluid volume, BP, cardiac output, naturesis and GFR. Kidney and cardiac dysfunction frequently coexist, reflecting common factors in their aetiology including diabetes, hypertension, atherosclerosis and left ventricular hypertrophy" (7.1). The cardio-renal syndrome describes the bidirectional relationship between the heart and kidneys whereby dysfunction in either may cause a deterioration in the function of the other (7.1, 7.2, 7.3).

8. Glycaemic control and blood pressure control help reduce the development and progression of both diabetic kidney disease and heart disease.

Good glycaemic and blood pressure control reduces the development and progression of diabetic nephropathy (8.1, 8.2). There is a continuous relationship between glycaemic exposure and the development of heart failure (HF), such that for each 1% reduction in HbA1c, there was an associated 16% decrease in hospitalization for HF (8.1), "Tight" BP control (achieved BP 144/82 mmHg) was associated with a 56% reduction in the risk for heart failure compared with less tight control (achieved BP 154/87 mmHg) (8.2, 8.3). In patients with diabetic nephropathy systolic blood pressure and heart failure hospitalization were directly related such that achieving a 20mmHg lower systolic blood pressure was associated with a 25% reduction in heart failure events (8.4)

9. ACEI and angiotensin II receptor blockers (ARB) are useful in diabetic nephropathy and diabetic heart disease.

A large body of evidence supports the use of ACEIs and ARB to treat diabetic nephropathy and diabetic heart failure (9.1, 9.2, 9.3). Pivotal trials have reported a 20-30% reduction in the incidence of progressive renal disease, end stage kidney disease, and the rate of first hospitalization for new-onset HF in patients who had overt nephropathy and had received ARB compared to standard BP control. This protection is despite similar BP control between ARB and standard BP treatment.

10. Preparation for ESKD requires careful planning.

Many patients with diabetic kidney disease will require renal replacement therapy. To reduce the risk of developing ESKD requires multi disciplinary care across primary and secondary care. Care is aimed at optimizing blood pressure, glycaemic control and reducing other risk factors associated with progressive renal and cardiac disease. Specific attention to minimize the risk of acute kidney injury is essential to preserve renal function in diabetes. Despite effective clinical care many patients develop ESKD. Ideally ESKD should be anticipated such that the most appropriate form of treatment can be planned for and implemented (10.1)

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Expanding the interventional repertoire of St Andrew's endoscopy services with the OverStitch procedure

Endoscopic suturing is the next big thing in procedural gastroenterology

The breadth of interventional endoscopic capabilities are constantly expanding, with St Andrew's War Memorial Hospital now offering endoscopic suturing. The current endoscopic interventions on offer at St Andrew's include: resection or radiofrequency ablation of precancerous and early cancerous lesions of the digestive tract (oesophagus, stomach, duodenum and colon), ERCP for treatment of benign and malignant pancreaticobiliary conditions, luminal stenting and treatment of complex intraabdominal fistulas. The *OverStitch* procedure introduces the new concept of endoscopic suturing which has a wide variety of applications and will further extend the current repertoire of therapeutic endoscopic interventions. Currently the most common indications for the OverStitch are related to bariatric endotherapy. It is generally aimed to help patients lose excess weight. This could be either primary endoscopic sleeve gastroplasty (ESG) or, more commonly, endoscopic intervention for excess weight regain post bariatric surgery e.g. Transoral outlet reduction (TORe) in patients post Roux en Y gastric bypass. ESG is an option in patients who may not be suitable or qualify for bariatric surgery. This device can also be used in the non-bariatric population for closure of resection related

The TORe procedure aims to achieve a loss of excess weight of approximately 10kg and ESG procedure can achieve an excess weight loss of over 50%. This is generally a very successful procedure, however it is, as always, just one component of the armamentarium for weight loss. A team approach to weight loss is key

to successful and sustained weight loss. The outcome generally is restoration of the feeling of fullness or satiety which complements the multidisciplinary approach towards sustainable weight loss.

This technique is relatively safe, however, as with any intervention, there are risks. Complications are infrequent and include abdominal pain (4%), bleeding (3%) and nausea (2%).



Images courtesy of Apollo

This procedure is suited for patients who have experienced weight regain post gastric bypass surgery or are otherwise unsuitable or ineligible for bariatric surgery.

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Terrace
Spring Hill QLD 4000
T 07 3193 0877

mucosal defects and fistulas.

Specialist care for women's health



Symposium delegates

St Andrew's War Memorial Hospital provides a multidisciplinary and comprehensive health service for women living in Brisbane and in rural and regional Queensland. The hospital's women's health specialists include breast and endocrine, gynaecology, gynaecological oncology, radiology, pain medicine, IVF and gastroenterology.

Earlier this year, St Andrew's hosted a Women's Health Symposium at Sofitel, Brisbane. The event showcased the innovation and holistic hub of women's health medicine at the hospital. Check out some photos from the symposium here.



Dr Glenn Sterling



Dr David Molloy



Dr Philip Hal



Symposium delegates



Natasha Keir, Breast Care Nurse



The aim is to try and re-contextualise some of the meaningless, mundane and harsh noises that staff are exposed to into something more aesthetically pleasing

My creative practice explores how sound concepts and experiences can be expressed through visual art. I work in different mediums (e.g. painting, sculpture, installation) depending on the type of sound that the art expresses. For my residency at the hospital I have the opportunity to spend time recording soundscapes from different areas of the hospital, such as waiting rooms, wards and operating theatres. In these spaces a variety of noises occur which I will translate into collage drawings and

paintings. The aim is to try and re-contextualise some of the meaningless, mundane and harsh noises that staff are exposed to into something more aesthetically pleasing and meaningful through works of art to be exhibited in the hospital.

As part of the residency I was invited to attend the CPD conference in late October to learn more about the innovative procedures and facilities on offer at St Andrews hospital. This helped me to connect some of the

sounds I recorded with specific tools and procedures used during the operations

I have witnessed so far. I found the presentations given by Professor Peter Silburn and Associate Professor Terence Coyne fascinating as I have a strong interest in sensory perception and neuropsychology. During their presentations I learned about the presence of noise and frequencies in brain of Parkinson patients, which is something that I hope to investigate while at the hospital and further during the psychology degree that I start at University of Queensland next year.



House of God author inspires Brisbane audience about human connections







St Andrew's War Memorial Hospital and The Wesley Hospital were delighted to host famed author of The House of God, Samuel Shem at an exclusive event on 15 October bringing together VMPs, from both hospitals and our GP community.

Shem, pen-name of American psychiatrist Dr Stephen Bergman spoke to over 200 guests about his personal and professional life journey and successes.

Ranked number 2 on the list of 10 Best Satires of All Time, The House of God has also been described by the Lancet as "one of the two most significant novels of the 20th Century."

Since his bestselling classic, The House of God, was published in 1978, Shem continues to highlight the danger of isolation and the healing power of good connections. Dr Shem was in Brisbane as the keynote speaker for the Royal Australasian College of Medical Administrators Conference where he spoke on staying human in medicine.

The evening culminated in a book signing and opportunity for the medical fraternity to meet the author.



Hand, Upper Limb & Microsurgery Oncall Service - 1300 263 463

Orthopaedic Upper Limb surgeons at St Andrew's continue to offer a comprehensive upper limb trauma service and now have a direct phone number for the referral of acute upper limb conditions.

The service covers all acute presentations ranging from the acute management of upper limb fractures to hand flaps / reconstruction, microsurgery and re-implantation.

The oncall upper limb surgeon can now be contacted directly for advice and referrals on acute upper limb conditions on 1300 263 463 (1300 BNE HND).

"This number will be answered by the oncall surgeon and will enable referring practitioners to discuss and refer patients with one phone call," Dr McEniery said.

Where appropriate this will facilitate timely admission to St Andrew's for surgery.



Dr Steven Frederiksen

This number will be answered by the oncall surgeon and will enable referring practitioners to discuss and refer patients with one phone call

Practice contact details

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Dr Steven Frederiksen

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St Andrew's Place 284/33 North Street, Spring Hill T 07 3831 7606 F 07 3832 7179 E reception@paulmceniery.com



L-R: Dr Paul McEniery, Dr Chris Blenkin and Dr Trevor Gervais

Real estate tied up in knots:

New red tape for Aussie property transactions

As of 1 July 2016, property transactions with a market value of \$2 million or more became much more complex. Both buyers and sellers of property should understand the new rules before entering into a contract.

The new law is called "Foreign Resident Capital Gains Withholding." However its application is much broader than the name implies.

At first glance it is assumed that these rules only impact "foreign resident investors". This is not the case. It applies to every transaction related to real property with a value of \$2 million or more.

Where the withholding tax is applicable, 10% of the property's market value will be payable to the Australian Tax Office (ATO). Care is therefore needed surrounding these rules in relation to sales, purchases or other transfers of property.

If not applied correctly those involved in a transaction may end up out-of-pocket. For instance:

- Sellers may only receive 90% of the purchase price
- Buyers run the risk of paying an extra 10% over the purchase price
- Advisors (such as real estate agents and lawyers) could face adverse action as a result of poor advice

In addition to buying and selling of property, these new rules also affect matrimonial settlements and deceased estates. If the sale or transfer of a property valued at more than \$2 million part of a divorce settlement or will then the same rules apply.

What action needs to be taken?

If you are buying or selling a property valued at more than \$2 million, a valid clearance certificate must obtained from the ATO. This process should be managed by your accountant and lawyer.

Pilot Partner's tax team has followed this law closely. Our lead tax partner, Murray Howlett has spoken extensively to Brisbane's legal and property community about these new changes. We recommend speaking to us to ensure the appropriate steps and correspondence with the ATO is taken

Pilot Partners is a full-service chartered accounting firm. Our medical services division is led by Kristy Baxter and Angela Stavropoulos. They are committed to providing specialised business, tax and advisory services to the medical community. Please call (07) 3023 1300 or go to pilotpartners.com.au to learn more.

As of 1 July 2016, property transactions with a market value of \$2 million or more became much more complex.



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St Andrew's Gala Dinner 'Cirque du St A'

Saturday 12 November, Brisbane Convention & Exhibition Centre





Cirque troupe

Dr Sharyn Van Alphen



Rush Band





Staff and doctors perform as part of Cirque du St A



Susan Walsh and Beth Sewell





David Clark, Barbara Taylor, Sharyn Van Alphen and Damien Petersen



Staff and doctors perform as part of Cirque du St A



Arthur Henderson, Rosie White, Mellissa Naidoo and Andrew Barron



Alex Ritchie, Kate Ritchie, Sunny Lee and Nerida Thorpe



Emergency Centre	07 3834 4455
Linergency Certife	07 3834 4433
GP Hotline	07 3834 4490
Rehabilitation	
Inpatient Services	07 3834 4391
Day Patient Services	07 3834 4285
StAMPS	07 2024 4205
St Andrew's Multidisciplinary Pain Service	07 3834 4285
Pelvic Medicine Centre	1300 698 699
Day Infusion Centre	07 3834 4493
Sleep Centre	1800 155 225
Business Unit	07 3834 4371



Quality in Health ISO 9001+ Core Stds

St Andrew's War Memorial Hospital's quality management system has received ISO 9001 certification ensuring the hospital's safety and quality system meets the highest international and national standards.

St Andrew's earned ISO 9001:2008 and Core Standards for Safety and

Quality in Health Care certification in October 2012 after a very successful audit.

St Andrew's War Memorial Hospital's certification is aligned with international best practice and complies with the 10 standards set by the Australian Commission on Safety and Quality in Health Care.



EMERGENCY

BOUNDARY STREET

NORTH STREET (OFF BOUNDARY ST) SPRING HILL.

