29 May 2013

AHPRA
GPO Box 9958
Melbourne, VIC, 3001

guidelinesconsultation@ahpra.gov.au

Re: Consultation on Guidelines for advertising

Please accept this letter as a submission to your call for input into AHPRA’s proposed revisions to the Guidelines for advertising.

We believe that significant uncertainty in relation to the definition of the word ‘testimonials’ in reference to advertising and commentary of ‘regulated health services’.

On the one hand optometrists, as professional health service providers, are encouraged to promote timely utilization of their health services to prevent the onset of avoidable conditions and diseases in the public interest yet on the other hand such promotions can at times be criticized for potentially being in breach of section 133(1) of the Health Practitioner Regulation National Law (National Law) for unreasonably encouraging the unnecessary use of such regulated health services or for using testimonials about a regulated health service or business.

Good news stories of how an optometrist was able to avert the onset of a very serious eye disease to illustrate the benefit of timely utilization of optometric health services can be construed as a testimonial aimed at unreasonably encouraging consumers to utilize the services of that optometrist.

We enclose a selection of media stories which illustrate the point. Each of the enclosed stories can be criticized on the above basis. The National Law must be amended, or the Guidelines should include, a definition of ‘testimonial’ to avoid ongoing uncertainty in relation to the prohibition of testimonials. It would be useful for the guidelines to provide examples of ‘mock’ testimonials to illustrate what is and what isn’t acceptable.

We further believe that consideration needs to be given on how testimonials, regardless of how this is defined, are treated in various media such as advertisements, PR, public interest announcements, general marketing material, social media in particular in relation to uninvited as opposed to invited testimonials. With the advent of social media such as Facebook and Twitter, it is unrealistic to expect anyone to monitor, let alone vet, all interactions and comments, some which could be classified as testimonials, on such media.
The above conundrum applies equally to all 14 National Boards and needs to be addressed to avoid ongoing uncertainty and anxiety.

Yours sincerely,

Dr Stretch Kontelj OAM
Legal Director – Asia/Pacific
Seeing is believing

By FELICITY HARROLD

LEBBING ophthalmologist Dimitri Yellachich gave an Atwell resident the perfect Christmas present – what is believed to be an Australian first operation that has saved his eyesight.

Just two weeks before Christmas, Bruno Golub (68) was driving his taxi during the middle of the day when his right eye blacked out and he could not see a thing.

“He thought it was due to exhaustion and a lack of sleep so he went home to sleep it off,” his daughter-in-law Tatiana Golub said.

“When he woke up he still could not see so we called our local optometrist, where we read him straight down for tests.”

OPSM Gateways optometrist Bjorn Russell said he realised the injury had to be serious when Mr Golub had gone blind in a matter of minutes.

“I did some tests straight away and could see he had had a stroke in the eye,” he said.

“A clot had lodged in the main artery that supplies blood to the retina, and to my knowledge there was nothing that could be done about it.”

Mr Russell said he contacted his good friend and specialist Dr Yellachich to check, who had then organised immediate surgery for that evening at the Fremantle Hospital.

The operation, called retinal artery embolotomy, took just over an hour.

Dr Yellachich said the surgery involved going into the main chamber of the eye and then removing the blood clot.

“The surgery is not very frequent because it is very rare a patient can present in time for an operation like this to occur,” he said.

Mr Russell said the fact that surgery happened within hours of the clot was what saved Mr Golub’s eyesight.

For Mr Golub and his family, the surgery had been “simply a miracle”.

“It is unbelievable and when we think of what could have happened – the clot was right next to his brain and he could have had a stroke and died on the spot, or become blind forever,” Mrs Golub said.

While there is still an investigation to find out where the clot came from, Mr Golub, a heavy smoker with high cholesterol, has now reduced his cholesterol levels and stopped smoking.

He is recovering at home and hopes to get back to taxi driving next year.

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Go to www.rrgazettown.com.au

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Bruno Golub, whose vision was restored by the operation, is seen here with a clot in his eye.

[Image of Bruno Golub with a clot in his eye]
Eye scan offers an early insight

The Sunday Mail
SUELEN HINDE,
17 July 2011,
356 words,
English,
SNDMAL,
38,
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STATE-of-the art technology that can detect a range of diseases from a scan of your eye is now available in Queensland.

Digital retinal scanners offer patients a potentially fast, easy and painless means of picking up early warning signs of many eye conditions, as well as detecting hypertension, cardiovascular disease, multiple sclerosis and some cancers.

"One of the good things about the scan is a picture is worth a thousand words," said OPSM director of eyecare Grant Fisher.

"We hope the scanners will raise awareness of the need for eye health."

In less than five minutes, the digital retinal scanner takes a photo of the inside of the eye, allowing the optometrist to thoroughly study images of the retina, optic nerve and blood vessels.

It is the health of these parts of the eye that aid in the early detection and management of serious conditions.

Mr Fisher said health professionals examining the scan could identify, manage and compare changes that were happening in the blood vessels behind the eye. For instance, if you have high blood pressure the blood vessels will be restricted, and if you have diabetes the blood vessels will be bleeding. Both of these conditions can be treated far more effectively if found early.

"Optometrists can work with your GP to monitor conditions such as diabetes and blood pressure to determine whether diet or medication is working," he said.

A recent case involved a 61-year-old female visiting the optometrist for a routine eye test, when a white mass was found behind one eye using the scan.

She was immediately referred to a specialist who diagnosed a tumour.

"The great news is that she's receiving treatment and the benign tumour is reducing, which probably saved her sight," Mr Fisher said.

He said with cancers a small freckle or spot was noticed at the back of the eye.

"But because the back of the eye doesn't have any nerve endings, you are not going to associate any pain or sensation unless you are getting your eyes tested regularly," he said.
Keep an eye on your health

Illawarra Mercury
KYLIE MATTHEWS,
20 July 2011,
922 words,
English,
ILM,
28,
© 2011 Copyright John Fairfax Holdings Limited.

Zest HEALTH

The ability to scan and record the condition of our retina may well change the way many illnesses are diagnosed, writes KYLIE MATTHEWS.

Have you been keeping an eye on your health lately?

While it has always been in our best interests to have our eyes tested regularly, retinal eye scan technology makes habitual checks even more important.

Retinal imaging has the potential to change the way many health conditions can be detected, including hypertension, cardiovascular disease, some cancers and even multiple sclerosis.

The scan is painless, accurate, takes less than five minutes and has the potential to pick up serious health issues early on.

Melissa Lee, managing optometrist at OPSM in Wollongong Central, says that she perceives the use of digital retinal scanners to be the way of the future.

"I believe retinal eye scans will become an important part of everyone's lives when it comes to staying healthy," she says.

A standard eye examination can be bulk-billed through Medicare every two years. However, the cost of a retinal eye scan is not covered by Medicare.

Some health funds will cover the cost of the scan which, at OPSM, is $30.

While the additional cost may be off-putting to some, Lee says the benefits of the scan over time outweigh the expense.

"Having a standard eye examination without a retinal eye scan is like having half a blood test, really," she says.

"We consider it to be the highest standard of care to provide our patients with both an examination and a scan so I guess you need to ask yourself - how much is your health worth?"

The retina is a light-sensitive tissue lining the eye's inner surface. Its purpose is to capture light, which then launches chemical and electrical effects to trigger nerve impulses back to the brain through the optic nerve.

Getting visual access to this part of the eye is how optometrists, using digital retinal scanners, can recognise various changes in blood vessels in the retina, which can be early indicators of illness.
In fact, retinal arteries are the only ones in the body that can be viewed directly without requiring invasive surgery, ultrasound or CT scan, which is what makes this technology such a remarkable advancement in health care.

Lee says that optometrists are fully qualified to analyse retinal eye scans and to identify potential health problems.

"We study eye health for four or five years and are fully qualified to be able to identify certain irregularities in blood vessels and the optic nerve," she says.

She says optometrists make an initial assessment of the patient based on their age and the types of health issues common to their age group.

"We also take into account a patient's general medical history when making the assessment and ask them if they are taking any medications, which may be affecting the health of the eye," she says.

She says that if a scan does reveal a potential health concern, optometrists are able to advise their patients to go to their GP for further testing and medical advice or to refer them to an ophthalmologist.

"I recently did a retinal eye scan on a man in his 30s, who told me that although his general health was good, his work had him feeling very stressed," she says.

"When I did the scan on his retina, I could see the effects that the stress was having on his health - his blood vessels were wavy, or what we call 'torturous', which is an indication that his blood pressure was extremely high."

She advised the patient to go to his doctor immediately to seek treatment for high blood pressure, which may have potentially saved him from conditions like heart attack or stroke.

Like our fingerprints, our retinas are unique to each of us.

For this reason, the technology for digital retinal scans was first thought to have been a great advancement for its use in identification and security.

However, it failed to take off because, unlike fingerprints, our retinas can change over time according to our health and age.

But for optometry, these changes in the retina and the record of information the scan provides are fundamental in keeping track of a person's overall health.

"In the past, we had to rely on the optometrist taking notes and sketching a picture of the retina to put in the files for another optometrist to try and decipher at the next examination, which meant the accuracy was dependent on how well the optometrist could draw," she says.

"With the retinal eye scan, we are able to maintain accurate records by comparing exact photos of the retina and tracking changes over time."

As with the standard eye examinations, all retinal eye scans are covered by the data protection act and are stored in strict confidentiality.

The Wollongong CPSM store has had a digital retinal scanner in-store since 2007.
Just last week OPSM rolled out the scanners to all their stores around the country, making the technology accessible to all Australians.

Lee says the benefits of the technology are for everyone, not just for older people who are more susceptible to certain diseases.

"I've met a lot of young people who, if we hadn't diagnosed a potential problem through a retinal eye scan early on, it might not have been picked up until the symptoms had become very serious," she says.
Your vision is vital
MINOR CHANGES CAN MEAN A SERIOUS THREAT TO EYESIGHT

Laura Tricote

ALDO Taloni has worked for Vision Australia for many years but he never thought a small irritation in his eye would cause him to nearly go blind himself.

Remembrance Day last year turned out to be a memorable one for the Winston Hills resident when he decided to find out what was wrong with his left eye.

"I just started to get little floatings in my eye," he said. "Then it started to feel like I might have had a slight conjunctivitis."

When he thought the cause might have been a hair in his eye, a trip to the doctor revealed there was one lodged in there.

But when the irritation did not go away after the hair was removed Mr Taloni decided to visit Specsavers Winston Hills to see if his prescription needed to be changed.

It was there that optometrist John Boveman told him that he had a detached retina.

"He said: 'You've got two hours to get to the eye hospital!'" Mr Taloni said.

A quick operation saved Mr Taloni's eye from a much worse fate.

"I've worked with people at Vision Australia who have had detached retinas and went totally blind."

"There's no rhyme or reason why it happens. It happens to young people." Mr Taloni's eye is now back to normal. He is telling his story to encourage people to have their eyes checked if they notice changes.

EDUCATION & JOBS

Vision Australia provides support to people who are blind, sighted or have low vision.

The organisation's services help in areas including education, employment, recreation and mobility.

Details: 1300 847 466.
No detached view on eyes

OPTOMETRIST GAVE ALDO JUST TWO HOURS

Laura Trieste

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"I've worked with people at Vision Australia that have had detached retinas and went totally blind," he said. "There's no rhyme or reason why it happens. It happens to young people."

Mr Taloni's eye is now back to normal.

He tells his story to encourage people have their eyes checked if they notice any changes, big or small.

Mr Borozan said blindness is a high possibility for untreated detached retinas.
EYE ON THE BALL: Gwen Poulton-Dixon is back on the golf course after a regular eye check discovered a tumour.

Back on course

TOM BENNETT
GOVT

GIVEN golfer Gwen Poulton-Dixon is hitting her drives straighter than ever thanks to her local optometrist.

Mrs Poulton-Dixon, 73, from Hamlyn Heights, recently experienced what seemed like a minor eye irritation and thought she better have her checked out.

Little did she know her condition was so serious that without prompt treatment she would have gone blind.

She went to local optometrist Tony Nguyen and what he saw set alarm bells ringing.

Mrs Poulton-Dixon had a tumour growing on the surface of her right eye.

Mr Nguyen, who runs Speechers Optics, immediately referred her to an ophthalmologist, who diagnosed the growth as carcinoma.

Mrs Poulton-Dixon was prescribed chemotherapy drops and, due to early detection, the tumour was suppressed and she will not have to undergo surgery.

"I was playing golf when I noticed that my eye was irritated," she said.

"I wasn't due for my two-year appointment but thought it would be best to get my eye checked anyway."

Mrs Poulton-Dixon said she knew she had made the right decision when the optometrist told her she had to seek specialist treatment immediately or risk losing her sight.

"My sight is back to almost 100 per cent again," she said.

"I am much, much improved and have no pain."

Her story serves as an important reminder to have eye examinations regularly and certainly whenever an abnormality occurs.