



24 hour moisture, no harsh chemicals
Available from leading pharmacies

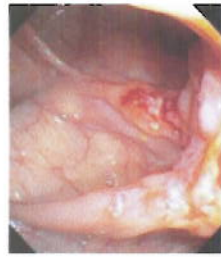
Pure therapy by Pharm

Home This Week's Issue Jobs Education Video Contact Us

Login

Search:

Go



How to treat Inflammatory bowel disease

Download PDF

Archive

Earn CPD Points

services

Education

Classifieds

Subscriptions

GP Textbooks >

Competitions

resources

Never let the facts get in the way

Editorial by Medical Editor Dr Linda Calabresi

YOU will no doubt by now have received that annual glossy publication -- the *Report to the Professions* from the Professional Services Review -- a detailing of cases referred to the PSR that reminds us we are being watched.

But you knew it was coming, didn't you?

It was hard to miss the story in newspapers around the country about what doctors are doing wrong. Yes, the press love a doctor-bashing story and the PSR writes a mean press release.

So what have we been up to? This year, according to PSR director, Dr Tony Webber, we're handing out benzos and antibiotics willy-nilly. God, we're a

shifty lot.

Now it's not as though I don't believe we need a watchdog body. In so many ways we are lucky having a doctor-driven organisation that can understand medical issues when evaluating whether there is a case to answer with regard to inappropriate practice.

But the problem arises in relation to this annual report, and the publicity surrounding it. Only 50 cases were referred to the PSR in one year. Yes, just 50 -- out of the more than 60,000 doctors practising in this country. Less than .0001% of the medical population. Actually less than that, as five of the

27-Apr-2009

Subscribe to our daily newsletter

Email Address Here



Take the plunge
without taking the plunge...

To order your FREE EVALUATION DVD go to:
www.bpssoftware.com.au
E: sales@bpssoftware.com.au
or T: (07) 4155 8800

Best Practice
An evolution in GP software

cases investigated were optometrists.

The reality is that most doctors are referred to the PSR for suspected over-servicing, in particular C and D consults, pathology ordering and now enhanced primary care items.

But repeating that every year would never make page three of the *Sydney Morning Herald*.

In this latest release, Dr Webber focused his concern on "the number of practitioners referred for inappropriate prescribing of narcotic analgesics and benzodiazepine drugs".

Reading through the report, it would appear just two of the seven most serious cases involved drugs of addiction, and among the 26 doctors with whom an agreement was entered into with the PSR, five were found to be inappropriately prescribing these drugs. Grand total: seven out of 60,000 doctors. That isn't mentioned in the press release.

Then there are the antibiotics. Dr Webber points out that inappropriate antibiotic prescribing has been an issue in "a number" of referrals, in particular the prescribing of antibiotics for simple URIs. Again, no real numbers mentioned.

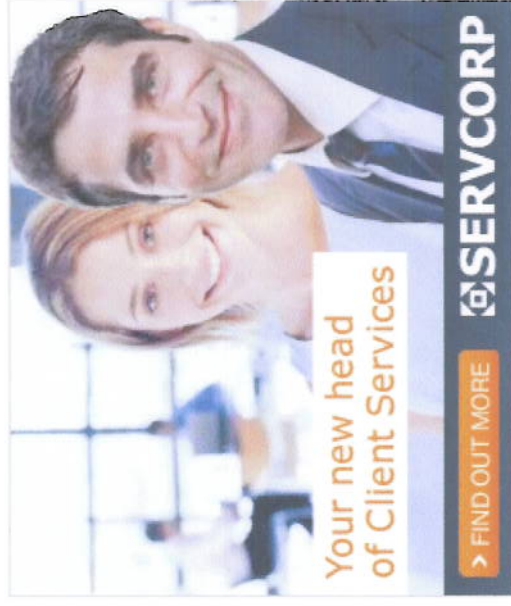
However, the handful of cases is enough to prompt Dr Webber to advise practitioners to seek out evidence-based prescribing advice. But what about the NPS evidence that shows antibiotic prescribing is declining in Australia, or any acknowledgement at all that the overwhelming majority of doctors in Australia take decisions about prescribing of all drugs very seriously?

But no. Dr Webber, in his Director's Report, then says: "Practitioners should not base their prescribing decisions solely on the recommendations of drug company representatives."

Where the hell did that come from? Where is the evidence to even suggest this was the reason for inappropriate prescribing?

Each year since Dr Webber's appointment as director, the PSR has published this expensive little publication and distributed it to doctors. Why? Is the 'name-and-shame' exercise supposed to act as a warning for those who might be considering doing the wrong thing? With the number of referrals to the PSR almost doubling in the past year, and a significant proportion of cases being repeat offenders, the report seems a bit of a dead loss as a deterrent.

And why the general media release? How does it help the profession to have the public told by such an authoritative body as the PSR that they are concerned about doctors' inappropriate prescribing practices?



Your new head
of Client Services

> FIND OUT MORE

SERVcorp



Pure
therapy
in hair™

24 hour moisture,
no harsh chemicals
Available from leading pharmacies

Where does Dr Webber get off creating such a negative impression about doctors based on such a miniscule, non-representative sample?

But of course, the PSR are really only concerned about our welfare.

In the final paragraph of his report Dr Webber implies many of the doctors he sees work very hard. Actually what he says is that many doctors are unable to achieve an appropriate work-life balance, hence the final word of advice from our kindly PSR director: "Life is too short to neglect family and friends." Thanks, Uncle Tone!

Latest Comments

[Read all 4 comments](#)

Can Dr Webber please give us the POSITIVES as well, rather go on a tirade of doctor bashing. It would be appreciated if he also practiced evidence based reporting.

Posted by **leslie mpala** 1/05/2009 10:40:37 PM

We need to publish a PSR Review, already almost completed by Linda Calabresi. It remains to add that Dr Webber's report is careless, biased and incomplete, and disappointing as a serious document.

Posted by **David Garrett** 29/04/2009 8:47:30 PM

The Glossy PSR document was nice to present at the recent registrar meeting, just to worry the Newbies. But in reality what a trite bit of fluff it is. There are so many issues in modern general practice that warrant more attention and advice on Best Practice, where money would be better spent, and GPs better supported. Ah what the heck I'll just close the practice and get a life instead, blow the patients!

Posted by **Ewen** 28/04/2009 6:49:27 PM

What else can we expect from PSR? Dr Webber has to justify

his and his underlings' jobs who in today's climate would be on the streets in view of the GFC.

Gordon Brown would have kicked them out of the NHS, but not our dear Nicola. She must keep them so we have a whip over us.

I hope some paper can expose the inadequacies of PSR but that is expecting too much. We live in a Labocracy, a cross between the dictatorial views of Labour and an ancient Greek view of Democracy.

Make sure I get a steak on my VIP flight.

Posted by **dr deepak malhotra** 27/04/2009 2:28:13 PM

Submit your feedback here:

Full name: Email address:

Email address is used for verification only, we will not publish it.

Your comments:

Security Code:

Please tick here if you do not want your comment to be considered for publication in the print edition

Remember my details

(So you don't have to retype your details each time you send feedback.)

Actions

[Email to a friend/colleague](#)

[Print this article](#)

Related Articles - General practice - morale, future etc

- ▶ [Beyond practice \(9/8/2011\)](#)
- ▶ [How times have changed \(5/8/2011\)](#)
- ▶ [GP charges patients \\$100 to stay on books \(3/8/2011\)](#)
- ▶ [The big issues \(28/7/2011\)](#)
- ▶ [GPs' earnings fail to keep pace \(20/7/2011\)](#)

[Home](#) | [News](#) | [How to Treat](#) | [Special Reports](#) | [Archive](#) | [Education](#)
[Contact Us](#) | [Disclaimer](#) | [About Us](#) | [Privacy Policy](#)

Australian
Doctor.