



**THE ROYAL AUSTRALIAN COLLEGE OF  
GENERAL PRACTITIONERS**

**Inquiry into Therapeutic Goods Amendment (Repeal of Ministerial  
responsibility for approval of RU486) Bill 2005**

**Submission from the RACGP**

January 2006

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## 1. **Introduction**

The Royal Australian College of General Practitioners (RACGP) (the College) welcomes the opportunity to make a submission regarding the Inquiry into Therapeutic Goods Amendment (Repeal of Ministerial responsibility for approval of RU486) Bill 2005.

## 2. **Background to the RACGP**

The RACGP is the acknowledged body which defines the nature of general practice, sets and maintains the standards for high quality Australian General Practice, leads the education, training and assessment processes, advocates on behalf of the discipline, and supports this country's general practitioners in meeting the primary medical health care needs of all people in Australia.

The RACGP has over 11,600 financial members including over 3,200 rural general practitioners, and over 95% of all general practice registrars. Approximately 22,000 medical practitioners participate in the College's Continuing Professional Development and Quality Assurance Program and the College's publication, Australian Family Physician, is distributed to over 33,000 medical practitioners each month.

Since its foundation in 1958, the RACGP has demonstrated its commitment to improving standards in general practice through the development of our Fellowship exam, the RACGP Training Program and our Quality Assurance and Continuing Education Program. These programs have been concerned with the quality of individual general practitioners. However, quality in general practice depends on more than the performance of each general practitioner working in isolation. Efforts to assess and enhance the quality of the structure and organization of general practice have been addressed through the development of standards for general practices.

The mission of the RACGP is to improve the health and wellbeing of all people in Australia by supporting both current and future general practitioners and their general practices in the pursuit of clinical excellence and by ensuring high quality clinical practice, education and research for Australian general practice. The RACGP advocates on any issue that affects the ability of general practitioners to deliver a high quality service to the people who trust us for their medical care and advice. High level clinical practice is supported by the development and publication of guidelines and manuals such as our *Guidelines for*

*Preventive Activities in General Practice (Red Book)*. It is also supported in the review and endorsement of a wide variety of preventive and management guidelines produced by other health organisations.

### **3. Comments on RU-486 (Mifepristone) - Medical Termination**

Termination of pregnancy is a controversial and sensitive area of practice. In recent years however, safe surgical terminations have been widely available in Australia. Any consideration of the method of termination of a pregnancy should be placed in a broader context of ongoing whole patient care. General practitioners are trusted members of the health care community who are well placed to provide advise on options available to women contemplating a termination and management of a termination, counselling, ongoing care and contraception.

The Royal Australian College of General Practitioners National Standing Committee Quality Care has considered the literature and debate on RU-486 (Mifepristone). The RACGP believes that decision-making around the registration of RU-486 in Australia needs to be based on a rigorous review of the evidence of safety and effectiveness. The RACGP has confidence in the ability of the Therapeutics Goods Administration (TGA) to under such a review and urges the Minister for Health to provide ministerial approval so that an evaluation can occur.

The RACGP is committed to the provision of primary, continuing, comprehensive whole-patient care to individuals, families and the community. In complex and often distressing situations, the role of the general practitioner is pivotal in providing support, evidence based information and options for patient consideration and decision-making. With a termination, a woman should be able to choose what appears to be the most acceptable method of treatment for her individual circumstances.

High quality care must be provided before, during and after a termination. The woman's general practitioner is well placed to provide this ongoing support.

The College's National Standing Committee on Quality Care believes that a preliminary review of the published evidence suggests that RU-486 in combination with prostaglandins can be used in a medical setting with equal effect compared to other methods of termination. If a woman chooses a medical termination, this service should be

provided in accordance with evidence based guidelines and protocols, when the risk to the woman is small.

Many women internationally have chosen medical terminations, especially those who want to avoid anaesthetics or surgery.

The RACGP has confidence that Australian general practitioners have adequate training and capacity to care for patients, including support for women who choose a medical termination if this becomes available in the future.

Australia's general practitioners are committed to the delivery of safe, high quality patient-centred care.

### **Further Details**

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