

## **COMMITTEES**

### **Community Affairs Committee Report**

**Senator POLLEY** (Tasmania) (10.15 a.m.)—I seek leave to have incorporated in *Hansard* my speech on the Community Affairs Committee report entitled *A matter relating to the Positron Emission Tomography (PET) Review 2000*.

Mr Acting Deputy President, I rise today to speak on the report *A matter relating to Positron Emission Tomography (PET) Review 2000*.

Firstly though I should once again extend my thanks to Elton Humphrey and all the members of the Community Affairs Secretariat. They must surely rank as one of the busiest Committees in the Senate—I think there are currently five inquiries coming under their jurisdiction—and under that workload, the quality of their work is just staggering. They truly do an outstanding job.

PET is a technology that is widely used in the diagnosis of cancers and is now coming to also be used in investigating cardiac and other conditions. It has been in use in Australia for a number of years now, and during the course of this inquiry we visited the scanners at the Peter MacCallum Centre in Melbourne to see exactly how the technology works, and to meet patients for whom this technology has been extremely beneficial.

These stories were truly moving, and really gave those of us in the Committee an appreciation of the benefits of the technology.

Firstly I would like to commend the Rudd Government for listening to Tasmanians and setting aside \$3.5 million in the Budget for the establishment of a PET scanner in Tasmania at the Royal Hobart Hospital.

This is something that I pushed for repeatedly while we were in Opposition—to no avail unfortunately as the previous Government was too busy pork barrelling in short term solutions like the Mersey takeover to look into the long term health of Tasmanians.

Thankfully this situation has been resolved and Kevin Rudd and the Minister for Health, Nicola Roxon have come through with a PET scanner, which will save Tasmanians from having to fly to Melbourne to use this incredible diagnostic tool.

Of course this is just one of many initiatives that were put forward under the Government's Tasmanian Health Plan before the last election—a plan that has been delivered in full, as has every other election promise. A stark contrast to other administrations.

For those in this chamber who are unfamiliar with PET, it is probably appropriate that I explain a little bit about it. The way PET works is by producing a three dimensional map of what's going on inside the body, user a radioactive tracer that is introduced into the body.

From scans of the body after the tracer has been introduced, a three dimensional representation is recreated that allows doctors to locate tumours and other medical problems within the body.

The uses of this are many and varied—as I stated earlier, initially it has been used to help find cancers throughout the body, but I understand that in more recent times the usefulness of PET has been extended to include diagnosis of cardiac and other conditions. So it should be obvious to all just how useful this technology can be for doctors.

The Community Affairs Committee report gave me a good understanding of just what is possible using PET scans, and how it can be superior to other diagnostic tools that are out there.

That's why I'm proud that the Rudd Labor Government has come through on its promise of a PET scanner for Tasmania and, as I understand it, work on rolling this out will start in August this year. It can't come soon enough for Tasmanians.

I also understand that work on the Launceston Integrated Care Centre is also expected to start reasonably soon—another example of how seriously the Rudd Labor Government is taking the health of Tasmanians. After 11 long years of neglect, it appears that we now have a Federal Government that is serious again about health care, and investing in the health system.

Moving on to the reasons behind this inquiry, and the recommendation put forward by the Committee: we recommended that the Department coordinate a disclaimer notice with the Medical Services Advisory Committee and then able to circulate that disclaimer to all those who hold copies of the MSAC Assessment Report: Positron Emission Tomography or the Report of the Review of Positron Emission Tomography.

It is hoped that this disclaimer will clearly indicate which members of the Supporting Committee did not agree with that final report.

By doing this it will allow those members to ensure that their views are noted on the public record—which is extremely important as it will show that they did not necessarily agree with the views in the original report.

While there were allegations of political interference in the process it must be noted that the Committee did not find any evidence of this.

The passage of time since the 2000 Review has resulted in very strongly held views being formed and these were expressed in evidence. Committee members accepted these views and interpretations of events to differing degrees.

Often we were not assisted in our deliberations by the extant records and minutes of meetings at the time not recording actual decisions and discussions. These procedural issues really should have been handled better at the time.

I do feel for Dr Ware who has spent such a long time on this issue, and who has at various points received unsatisfactory answers to his questions by the Department.

That's why I am glad that this inquiry has contributed in at least some small measure to ensuring that this situation will not happen again, and that those who do disagree with findings in the future will have a clear avenue to register that disagreement. Dr Ware has been exceedingly patient and I commend the determination of both him and Professor Hicks in this matter.

I think that we have all learned a lot during the course of this review—it has certainly been thorough and has been ongoing for two years.

I believe that it has been beneficial and that the issues raised by Dr Ware and Professor Hicks underline the importance of ensuring the independence of scientific and technical assessments of new medical technologies.

It's evident from the comments today the differing views of committee members.

I commend this report to the Senate.