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PATIENT REBATES MUST RISE OR AUSSIE CHILDREN WILL MISS OUT ON VITAL EYE SURGERY

The Australian Society of Ophthalmologists (ASO) and The Royal Australian and New Zealand College of Ophthalmologists (RANZCO) have combined efforts to call for urgent increases to Medicare rebates for paediatric ophthalmology services.

The two groups warn that hundreds of Australian children will miss out on vision correcting surgery if rebates are not improved.

The ASO and RANZCO say funding neglect is rendering paediatric ophthalmology a dying medical specialty, with less than 25 doctors nation-wide currently working predominantly in the field.

Delivery of ophthalmology services to children is generally more methodical and time consuming than the delivery of ophthalmology services to adults. However, at present the Medicare rebates provided to paediatric patients who require ophthalmic care are significantly less than those provided to adult patients.

Patients cannot afford the out-of-pocket expenses that go with this care and doctors cannot afford the overhead costs of delivering it, according to the ASO and RANZCO.

“The result is that doctors are being forced to turn away from practicing paediatric ophthalmology, leaving our hospitals with only dwindling numbers of specialists who can provide this vital care,” ASO President Dr Brad Horsburgh said.

“Two decades ago children made up between 10-15% of the average workload of all ophthalmologists. There certainly hasn’t been a drop in the need for ophthalmology services for children but there is now clearly a severe shortage of trained ophthalmologists to see them,” Dr Horsburgh said.

RANZCO President Dr Richard Stawell said the College’s training figures over the past 15 years clearly reflected the growing rejection of paediatric ophthalmology as a speciality by training ophthalmologists.

“We have seen a 75% decrease in those choosing to undertake postgraduate training and specialise in paediatric ophthalmology,” Dr Stawell said. Meantime, the ASO said ophthalmologists across the board were now choosing not to treat paediatric patients. Traditionally many ophthalmologists have treated both adult and paediatric patients.

Department of Health and Ageing statistics reflect in 2003 50% of all ophthalmologists treated paediatric patients under the age of 9 years. By 2009, however, this figure had reduced to 25%, representing a 50% reduction in the amount of ophthalmology services available for children under the age of 9 within a six year period.

“Australian doctors are deserting paediatric ophthalmology in droves because it is not financially viable for them to work in this field,” ASO President Dr Bradley Horsburgh said.

“MBS (Medicare) rebates relating to paediatric ophthalmology cases simply do not reflect the cost of the care they are delivered to cover,” he said.

“Paediatric ophthalmology consultations take longer, they are often very complex, they carry a medico legal risk for 21 years, and the rebates fall well short of overheads,” Dr Horsburgh explained.

“In comparison with adult eye cases the rebates won’t even cover the cost of consultations, let alone surgery,” he said.

RANCO President Dr Stawell said the situation was so bad that senior hospital positions for paediatric ophthalmologists were sitting unfilled around the country.

“State health departments can’t recruit for positions because there are no doctors with the specialty skills to fill them,” Dr Stawell said. “Guaranteeing paediatric ophthalmology services in metropolitan areas is hard enough but trying to deliver these services in rural and regional communities is currently impossible,” he said.

“The situation is dire.”

ASO President Dr Horsburgh said the very small number of doctors currently working in the field cannot carry the load.

“Services cannot meet demand,” Dr Horsburgh said.

“We need a commitment from both sides of Government that this issue will be addressed before Australians go to the polls on 21 August,” he said.

“Rebate increases are a must. Without them, the sight of too many Australian children will suffer.

Both organisations said rebate shortfalls are evident across the medical sector. A recent report in *The Australian Financial Review* highlighted a drop in consultation rates for general practice each year since 2004. The reason given for the drop was increasing out-of-pocket expenses to patients when they visit a GP.

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