

# PORT MELBOURNE *Medical*



45 - 49 Year Old  
**Health Check**

Health Alerts

Port Melbourne Medical welcomes  
**Dr Clare Lax**

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## Port Melbourne Medical Magazine

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# Welcome

Dear Patients,

Welcome to the Winter Edition of our magazine. Whilst it feels cold, the ski bunnies amongst us certainly aren't complaining. Whilst life in the clinic has found a more balanced rhythm, we are still managing COVID, influenza, RSV and other common cold viruses.

Importantly, right now the big push is on to ensure all patients are up to date with sound medical screening to prevent illness, and management of existing illnesses to avoid complications. During the heavy COVID-19 times many patients stopped or reduced their regular screening and emerging evidence highlights preventable and screened cancers detection rates are falling. We have chosen to profile a particular Medicare item number for people aged 45-49 years of age – a thorough health assessment and check-up.

We welcome a new doctor, Dr Clare Lax, who will be consulting from Port Melbourne Medical, initially Tuesdays and Saturdays and include information about her.

We understand many people are back in the office and very busy, however it is so important to see your GP and our nurses where necessary. We unfortunately see preventable conditions when screening and care isn't kept on top of – and want to prevent you having medical problems! Studies have shown that having a regular GP, who knows you well, will actually improve your health. GPs don't just treat medical conditions – they like to prevent it occurring in the first place. It is also worth noting the clinic is open on weekends, so doctors can give their patients increased after hours access to excellent medical care.

The Victorian Department of Health has recently released some health alerts, which we have covered in this edition:

- **Measles case in Melbourne**
- **Meningitis cases**
- **Recall of some ayurvedic medicines containing lead or other poisons.**

We also have an article to discuss the emerging “trend” or adult ADHD diagnosis. Clinical Director Dr Sarah Lewis has authored an informative article which explains the rise in diagnosis, why women are often missed, and information regarding receiving a diagnosis and treatments.

We are delighted with the response we have had with opening Dr Ferghal Armstrong's and Dr Anne Saunders' appointments in the pain & addiction clinic. The clinic has been well received in the local community. Dr Ferghal and Dr Anne are available for appointments in this clinic on Fridays between 2-5pm.

We speak about the high rates of influenza around at the moment, and welcome the recent changes to the Covid vaccines, stating you can have a booster vaccine if it has been more than 6 months since your last booster or infection. Online bookings are available for this.



**Travel:**

It is still a novelty to be allowed to leave the country and explore the world!

It is worth remembering that many popular tourist destinations like Bali, Malaysia and Thailand pose risks to travellers from diseases not commonly found in Australia. If you are heading overseas, we encourage you to attend for a travel consultation.

This will review what vaccinations are required (ideally attend at least 4 weeks prior to travel) as well as considering other specific requirements:

- **Malaria**
- **Other mosquito borne disease**
- **Altitude sickness**
- **Cholera or other food and water safety concerns**
- **Specific requirements for travelling when pregnant**
- **Management of your medications or medical conditions**
- **Other prescriptions you may need**

Vaccinations commonly prescribed are stocked in the clinic for your convenience.

**Everybody's Safety in the clinic:**

It is great we have been able to reopen the waiting room. Please remember there are still health risks for many people should they catch Covid or other viruses.

To ensure you, other patients (particularly the many who are vulnerable) and our staff don't continually catch one of the viruses going around, we require all patients to wear a mask on entering the clinic. The masks are free and we thank you for helping us keep everybody safe.

We kindly request that to protect those with illnesses that means they have to visit the doctor, if you have any cough or cold symptoms, you do not wait in the waiting room. We recommend you call ahead to let us know, so we can advise you on the process.



# 45 - 49 YEAR OLD HEALTH CHECK



Approaching 50 years of age can bring on its own set of health challenges. Those who are in the 45–49-year-old age group, and have a risk factor for developing a chronic disease, are eligible for a Medicare subsidised health assessment.

I like to refer to this health assessment as ‘the before 50 check’. This health assessment allows us to detect risk factors, and mitigate or avoid progression to a disease.



## Which 45–49 year olds are eligible for this check?

Any person (with a Medicare card) in this age group who has a risk factor for a chronic disease (defined as a health condition that will last longer than 6 months, such as heart disease, diabetes and many more) is eligible.

Risk factors that your GP may consider, but are not limited to include:

- **Lifestyle factors such as smoking, physical inactivity, poor nutrition, or alcohol use**
- **Biomedical risk factors, such as high cholesterol, high blood pressure, impaired glucose metabolism, or excess weight**
- **Family history of chronic disease**

## What is the health assessment?

The health assessment is a comprehensive review of your medical history, family history, medications, examination findings and tests. This allows the doctor to determine your risk of a chronic disease and helps target lifestyle changes (or medication or other interventions if necessary) to prevent or delay your risk of disease.





# What does the health assessment involve?

Typically, you will spend around 30 - 45 minutes with the nurse, then 15-30 minutes with your regular GP.

As part of the health assessment, your GP might ask you about the following:

- Lifestyle (diet, exercise, smoking, and alcohol).
- Signs of skin cancer
- Mental health conditions
- Your past medical history
- Family history of chronic disease

They may also perform the following:  
Measure:

- Weight, height, and waist circumference
- Blood pressure
- Cholesterol and sugar testing

Assess the need for:

- Cervical screening test
- Mammogram
- Contraception
- Menopause health
- Immunisations
- Prostate assessment
- Medication review

Calculate:

- Risk of diabetes
- Cardiovascular risk.
- Risk of fracture related to osteoporosis (women 45+ years)

# What happens after the health assessment?

Your doctor will make an overall assessment of your health and offer interventions as appropriate.

You may be offered other services such as:

- Referral to a pharmacist for medication review
- Chronic disease GP management plan and team care arrangement for those with an existing chronic medical condition





## What will it cost?

Generally, health assessments are charged with a small or no gap fee following assignment of the Medicare rebate. Your doctor can advise further on their charges. People are eligible for one health assessment while they are 45-49 years old\*.

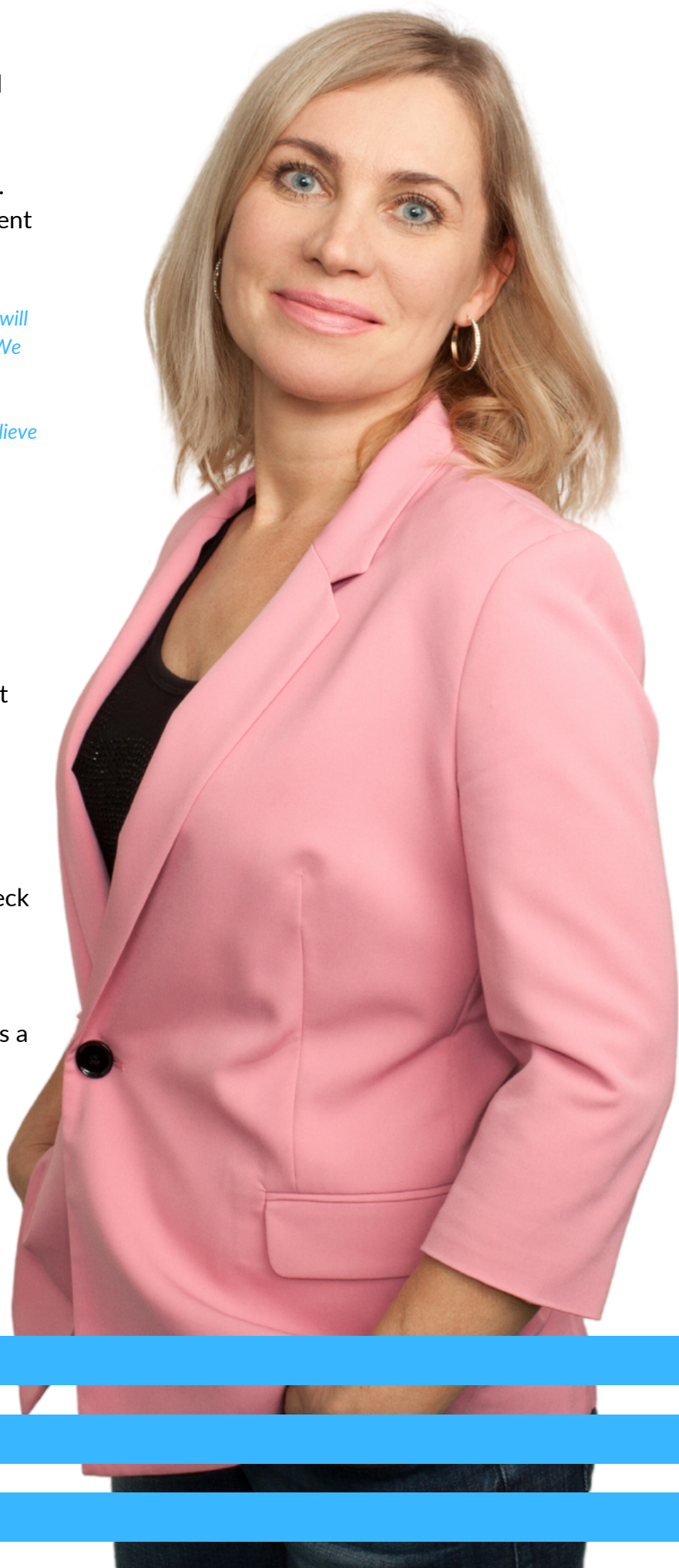
*\*If you have had this elsewhere since turning 45, you will not be eligible for a Medicare rebate for this service. We can check your eligibility at the time of booking. In addition, some people may be eligible for additional assessments – you can speak to your doctor if you believe this may apply to you.*

Your doctor may recommend this to you directly, or may request that you are contacted and offered this health assessment, in which case one of the administrative or nursing staff may contact you.

There is of course no obligation to participate, and choosing not to will not affect your relationship with your GP. It does, however, allow a more thorough check up of many areas, much more than can be covered in a regular GP visit. Given many people are still behind on check ups and preventative care since the lockdowns, it is a helpful and proactive way to keep your health on track.



by Dr Caroline Anderson



A portrait of Dr. Clare Lax, a woman with long, wavy brown hair, smiling warmly. She is wearing a dark top. The background is a plain, light grey.

Getting to Know  
**DR CLARE LAX**

Welcome Clare. We would like to get to know a little about you.

**Q: What is your favourite part of being a GP?**

When I was preparing for my entry interview for medical school, I was told 'Don't say you want to help people'. I'm still not sure why that was, but I have to say that for me, and I'm sure for many in the healthcare sector, this is the thing that is the most rewarding about being a GP, and it has only become more apparent over the past almost 20 years since that interview. I am also a bit of a science nerd so I also love learning, keeping up to date with developments in evidence-based medicine and helping patients access the best available care.

**Q. What do you find rewarding?**

Often, things are not straightforward and I enjoy working through complex problems. I understand that it can be difficult living with symptoms without a diagnosis, and I find it rewarding when I can listen, understand, explore and really help people get to the bottom of their frustrating and worrisome symptoms.



## **Q: You have an interest in menopause - what is a fact that many people may not know?**

This may sound very obvious but it really struck me when recently, due to her own experiences and speaking out on social media, I heard Oprah say “You cannot outrun, out-earn or out-exercise the big M. The menopause train is coming no matter what.”.

But how many of us ask specifically about menopause in our busy consulting days? How many women don't raise it thinking it's just something that will not affect them or that they need to bear silently? Do we even think of it as a health issue?

From midlife (or before), every person with ovaries experiences perimenopause and then menopause as our ovaries reduce and eventually cease oestrogen production. We then spend the rest of our lives in menopause. Not everyone has symptoms, but they do affect 80%, and for 1 in 3, symptoms are severe enough that they have to seek help from a doctor. Symptoms last on average for over 7 years. And even if there are no symptoms, we then spend over one third of our lives with low oestrogen which places us at higher risk for cardiovascular, bone and mental health. All when we are often at the busiest time of our career and family life!

This is a time of transition and there is so much we can do to help people through this time, and restore life to the way it was meant to be.

## **Q: What have you learned since becoming a parent?**

I suppose I have learnt how little I know, that I keep learning every day. That sleep is important! And that every family is unique. I can definitely empathise with parents at different stages of their journey and really enjoy working in this space, more so now than ever.

## **Q: What do you enjoy on the weekends / free time?**

I love spending time with my family and getting outdoors, exploring new places, cooking and eating from local markets, dabbling with growing vegetables, and attempting to swim in the ocean despite the chill.

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**Dr Clare provides kind, compassionate and thorough care, with a focus on complete wellness and care for the individual. She looks forward to meeting you.**

**Dr Clare will be available to provide care to patients from Port Melbourne Medical on:**

- **Tuesday's 10am-3pm**
- **Some Saturdays/Sundays**



# INFLUENZA CASES Victoria

If you look around you, many people are coughing, blowing their nose, or absent from work. We commonly see a rise in various viruses during winter time – something we're all aware of after the pandemic! – and influenza ("the flu") is no different.

When we were having to diagnose Covid infections by sending swabs to the lab, we were frequently testing for other respiratory viruses at the same time. This helped with surveillance of influenza and other viruses. These days, swabs are more limited to those who are sick enough to come to the doctor.







Despite a reduction in “base-line swabbing”, we continue to see many cases of laboratory diagnosed influenza. Victoria has reported more than 22,500 cases of flu this year, and almost half of these have been in children under 15 years of age. However, this year’s vaccination rate for influenza in this group is less than 20%.

Although the overall number of cases reported decreased slightly in the fortnight ending 9/7/23, there has been an increase in influenza B cases in children. It is expected that rates will rise, due to children returning to school after the holidays.

Queensland has just announced a free flu vaccination program, to help protect people from the spike they’re seeing in influenza B cases across Queensland. We do not know if this will be offered in Victoria this season.

Having the flu can also increase the risk of rare infections such as meningococcal infection, so having the influenza vaccination can help reduce this risk. Have you had your flu vaccine? Flu vaccines are recommended for everyone aged 6 months and over, and are given annually. The National Immunisation Program provides the vaccination for free for certain people who are at higher risk of more severe disease.

**You are safe to have your Covid vaccination and Influenza vaccination at the same time.**

## The Influenza Vaccination is provided free under the National Immunisation Program for:

- Aboriginal and Torres Strait Islander people aged 6 months and over
- Children aged 6 months to under 5 years
- Pregnant women at any stage of pregnancy
- People aged 65 and over
- People aged 6 months or over who have medical conditions that means they have a higher risk of getting serious disease, such as certain...
  - Cardiac diseases
  - Chronic respiratory conditions
  - Chronic neurological conditions
  - Immunocompromising conditions
  - Diabetes
  - Kidney disease
  - Some other conditions

*Whilst the vaccination itself is provided free for certain conditions or age groups, nurse fees may apply.*

Children under 9 years old having their first influenza immunisation will need 2 doses, spaced by a minimum of 1 month.

**It is not too late in the season to have your vaccination.**

If you have not had your influenza immunization this year, you can book

**HERE**







**BOOK A  
SKIN  
CHECK  
HERE**

## Port Melbourne Medical Skin Cancer Clinic

For many people, winter and cold weather does not prompt consideration of a skin check! Skin cancer can appear at any time of the year, and is not always related directly to recent sun exposure.

In addition, detection is easier in winter when the skin is not tanned. We encourage all patients with an increased risk of skin cancer\* or anyone who has noticed a change in or a new mole, to book in with Dr Jeet. You can have a skin check and can also request a Total Body Photography session so your skin health can be baselined.

*\*Increased risk of skin cancer includes those with fair skin, those who grew up in Australia, history of severe sunburn at a young age, significant occupational sun exposure, previous skin cancers, multiple naevus syndrome or a family history of skin cancer.*



# HEALTH ALERT

Some Ayurvedic medicine containing  
scheduled poisons





On 10/7/23, the Department of Health put out a health alert regarding some Ayurvedic medicines containing ingredients – including lead – that are scheduled poisons. Some of the ingredients contained in these medication are prohibited for supply and use in Australia, due to the dangers they pose to humans.

In Australia, if the packaging includes “AUST R” or “AUST L” number, they have been approved for supply by the TGA (Therapeutic Goods Administration). They have advised that anyone who is using Ayurvedic medicines purchased or imported from overseas, or purchased in Victoria where the product does not have this number should immediately cease using this produce.

Some of these products contain heavy metals (including lead), and other ingredients, including Azadirachta indica (may be identified as “neem” or “Veppilai”) and Acorus calamus (may be identified as “Ghodbach”, “Vacha”, “Vasambu” or “Vat Jata”).

Lead poisoning is a serious issue and diagnosis can be difficult due to having vague symptoms. If you have concern that you may have lead poisoning, please speak to your doctor about this.

Symptoms of short-term but higher exposure may include:

- Abdominal pain
- Constipation
- Fatigue
- Headache
- Nausea and Vomiting
- Seizures

Symptoms of longer term but lower dose exposure may include:

- Irritability
- Fatigue
- Loss of appetite
- Difficulties with memory and concentration
- Behavioural problems
- Raised blood pressure
- Poor coordination

Other products may have different symptoms – so if you have been using any products or have any concerns, please speak to your doctor. Bring any products you may have ingested to your appointment.





HEALTH ALERT

# MEASLES

Measles is not a condition we hear about commonly these days in Australia, but it is a very infectious virus that can have serious complications, such as pneumonia and inflammation in the brain. Pregnant women, young children and those with a reduced immune system are at higher risk.

Measles had largely been eradicated in Australia due to the measles vaccination program. However, there have been 9 cases in Victoria since January 2022. A health alert was issued on 17/7/23, when a new case of measles was reported in QLD, in a returned traveller who transited through Melbourne airport on Monday 3/7/23 while infectious.



There was another case in a returned overseas traveller in June as well.

Symptoms of measles include fever, severe cough, sore or red eyes and runny nose, followed by a rash that has both raised and flat parts. The rash usually starts on the face before spreading down to the rest of the body. People with measles can be infectious from 5 days before, to 4 days after the rash appears. Symptoms may not occur until 7-18 days post exposure.

Whilst the measles vaccination was introduced in Australia in 1969, it was initially only for children, and only became a 2-dose course in 1992. Thus, any person born during or since 1966 who does not have documented evidence of receiving 2 doses of a measles vaccine, or doesn't have documented evidence of immunity, is at risk, and is eligible for a free vaccination (the vaccine itself is provided by the Government, but no additional funding to administer this, so fees for nurse or doctor appointments may apply).

The measles vaccination is a live vaccine, and should not be given to pregnant women or people who are immunocompromised. It is funded for children from 6 -11 months who are travelling overseas. There have been outbreaks recently reported in Asia, including Indonesia and India, Africa, Europe and USA.

**If you think you may have been exposed to measles, or have measles, and need to see a doctor, please call ahead to discuss and plan - we will need to see you in a separate area, which cannot be used for 30 minutes afterwards due to the highly infectious nature.**



**CLICK HERE TO SEE  
THE LIST OF  
EXPOSURE SITES IN  
MELBOURNE**



# Repeat Scripts & Referral Requests



We are constantly looking for ways to improve convenience and access, whilst still maintaining the highest standards, and without compromising safety.

Each of the “tenant doctors” consulting from here can choose to have different workflows that they find best to provide timely and high quality care for their patients- so depending on your doctor’s preferences, when you submit a script or referral request online, it will either be approved immediately, or you will be contacted by reception to book in for a script/referral consult.

Online script requests are \$35, and if your doctor requires a “script-only telehealth consult”, this will have a gap of \$35.



A telehealth consult may be required if your doctor needs to review your recent health, recommend a blood test related to the medication, consider safety issues, or anything else that is relevant to the request.

In order to be eligible for a Medicare rebate for a telehealth appointment, you must have been seen face-to-face at this clinic in the last 12 months (some exceptions apply).

In some circumstances, depending on the type of medication you are requesting, you may be required to attend the clinic for a face-to-face appointment, in order for your doctor to be able to prescribe it safely for you.



## TO REQUEST A SCRIPT:



Visit the clinic website  
[www.portmelbournemedical.com.au](http://www.portmelbournemedical.com.au)

**BOOK ONLINE**

In the top right-hand corner, click on the red book online tab

Repeat Prescription

Repeat Referral

You will now see all of the available doctors' appointments in the clinic as well as the Repeat Prescription and Repeat Referral tabs.

**I Agree**

When you click on Repeat Prescription or Repeat Referral, read through the terms and conditions and click 'I Agree'. Select how you would like to receive your script or referral, then select your doctor, and fill in the required fields relating to your request.

*Funds will be requested at the time of submitting the request, but you will not be charged until the doctor has approved the request.*



## HEALTH ALERT

# Meningococcal Disease

A health alert has been issued by the Victorian Government, as there have been 7 cases of meningococcal disease in Victoria this year – including 2 deaths. Most of the cases noted in the health alert were due to meningococcal bacteria, strain B.

Although uncommon, meningococcal disease can be very serious. People can become very unwell within a few hours and it can lead to death or disability, including problems such as seizures, brain damage, hearing loss or other disabilities. Early diagnosis and treatment are vital.



## Risks

The highest risk age group are those under 2, and adolescents/young adults aged 15-24. However, also at risk are people who smoke, people with a weakened immune system, close contacts of people with meningococcal disease, people with recent respiratory infections such as flu/covid and those who are not vaccinated against meningococcal disease. It is reported that this year, most cases have been in people aged between 15-20, but included a 1-year-old and a person in their 90s.

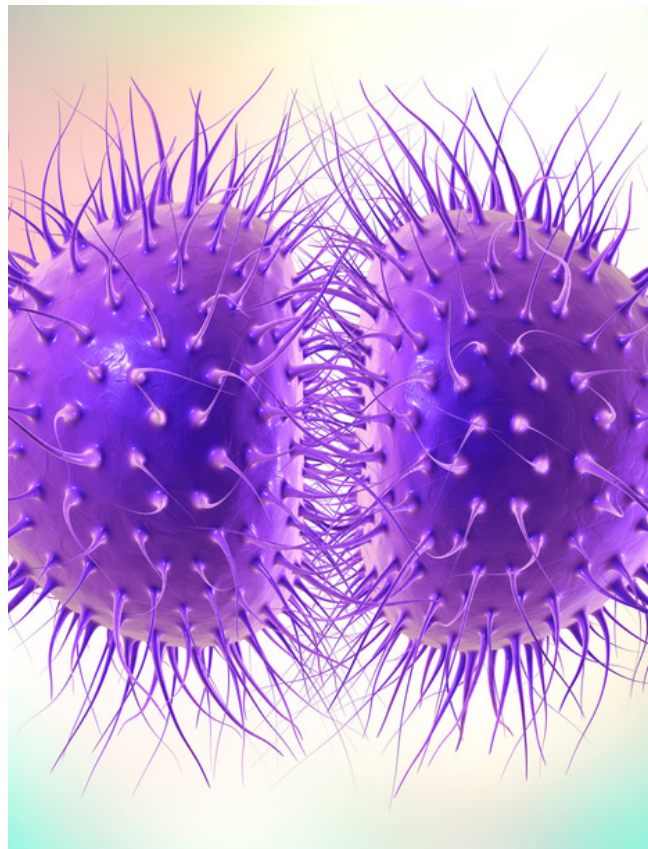
## What meningococcal vaccinations are available?

There are 2 main meningococcal vaccinations available, one covering strains A, C, W and Y, and one covering strain B.

Meningococcal ACWY (covering strains A,C,W & Y) vaccination is provided at 12 months of age as part of the 12 month vaccinations (though can be given from 8 weeks of age to protect babies), to adolescents aged 14-16 (given through the school based program), and is also funded for people of all ages with asplenia, hyposplenia, complement deficiency and those receiving treatment with eculizumab.

Meningococcal B (covering strain B) vaccination is available free to Aboriginal and Torres Strait Islander children up to age 2, as well as people of all ages with asplenia, hyposplenia, complement deficiency and those receiving treatment with eculizumab. Whilst not funded, it is recommended for infants, children, adolescents and young adults, as well as anyone else at risk of severe disease.

If you do not qualify but would like the vaccination, you may still choose to have them with an out-of-pocket cost. Some private health funds may cover some of the costs.



**Speak to your GP about whether this vaccine is something that would benefit you or your child/ren. These vaccinations are stocked at Port Melbourne Medical to have available for those who would like it.**

Why is there so much in the media about

# ADHD?



Attention Deficit Hyperactivity Disorder (known as ADHD) has received a lot of media attention in recent times, and is a condition that GPs are increasingly being asked about and diagnosing. ADHD is a common neurodevelopmental disorder that begins in childhood, though may not be detected until adulthood.



ADHD can be primarily the Inattentive Type, the Hyperactive-impulsive Type, or mixed.

### **Inattentive type:**

May have trouble paying attention to details, difficulty concentrating, easily distracted, trouble organising or completing tasks, may forget routine jobs such as paying bills, often losing things, making careless mistakes, struggles with time management.

### **Hyperactive:**

Impulsive type: Fidgeting and squirming more than others, talks non-stop and interrupts, reacting quickly to situations without considering the consequences, looking for stimulation, inability to sit still.

### **Mixed:**

Both hyperactivity-impulsive and inattentive symptoms.

Girls and women are more likely to internalise, rather than externalise their symptoms, and more frequently are the inattentive subtype. This means that they are less disruptive in the classroom, and whilst they may be labelled as daydreamers or scatterbrained, if they are not at the bottom of the class, their diagnosis may not be as obvious. Compared to boys, girls with ADHD are more likely to go undiagnosed until adulthood.

It is important to note that it is normal to have times where people are restless or distracted, and people without ADHD will experience some of the symptoms listed above. However, if it is frequent and impacting your life, school/work, relationships or other areas, you can discuss this with your doctor.



*In Australia, ADHD affects around 1 in 20 Australians – which is over 1.2 million people. Contrary to popular belief, is a condition that is under-diagnosed, particularly in females.*



Although there is a lot of stigma attached to ADHD, there can be many benefits. People with ADHD are often creative and can be problem solvers. People with ADHD can also have hyper-focus in certain areas, which can be a “super power” of sorts. Famous people with ADHD include Richard Branson, Jim Carrey, Jamie Oliver, Will Smith, Ryan Gosling, Michael Jordan and many more.



# So, what causes ADHD and how is it treated?

Although many things are known about ADHD, there is still a lot more research that is required. We know there is a strong genetic link, and that it is likely a mix of the genetic factors, as well as environment factors, that contributes to ADHD occurring. In fact, often the genetic component is very strong, and it is often recommended that family members be screened for this if a family member receives the diagnosis. There are many adults who have only realised they may have ADHD and been diagnosed because their child has received an ADHD diagnosis.

It is also known that certain neurotransmitter levels in the brain (dopamine and noradrenaline, required for organisation, focus and impulsivity control) are reduced. The stimulant medications, which are the first line treatment for ADHD, helps the brain produce these neurotransmitters – which in turn helps people to ignore distractions, control behaviour and pay attention.

In addition, there are strategy and skills training that can benefit people with ADHD immensely.

Many undiagnosed adults with ADHD have developed strong coping mechanisms to manage, and many have had successful careers. Many people who receive such a diagnosis do not fit the stereotype of the disruptive or “naughty” child.



The journey from suspicion of ADHD to diagnosis and treatment can be prolonged due to the demand on the system currently. If you suspect that you or your child have ADHD, speaking to your GP is the first step. Booking a 30-minute consultation is recommended, as there are many things to consider and discuss.

*Your GP will ask you questions and likely complete an ADHD questionnaire to assess you (or your child's) likelihood of having ADHD.*

There are other medical and psychological/psychiatric conditions that can cause symptoms similar to ADHD too, and this will also be considered. If your GP thinks ADHD is the likely diagnosis, they will discuss the next steps with you, which will likely include a referral to a psychiatrist for formal diagnosis and a treatment plan.

In most states in Australia, including Victoria, there is strict legislation around prescribing stimulants. In Victoria, a GP can only prescribe stimulant medication for a patient under a permit – this can be obtained after the patient has seen a psychiatrist, who has formally recommended the GP commences this. Only once the psychiatrist has made this written recommendation, the GP can apply for a permit, and can only write the first script once the permit has been approved.





The permit is doctor and patient specific. Even if your GP has many patients with ADHD, they will need to apply for a separate permit for each individual they are prescribing for. This means that you cannot get a new script from a different doctor interstate or at another GP clinic, even if you are stable on your medication.

Unfortunately, with the rising awareness of ADHD, finding a psychiatrist with an interest in ADHD and open books is becoming harder and harder, and there are very long wait times (often over 1 year). Now, the more common way to speed up the process is to arrange a comprehensive review with a psychiatrist (using a Medicare code called a 291 referral) for an assessment, diagnosis and management plan. Access to this is usually much faster than finding a psychiatrist who will be able to provide regular reviews. The cost for this assessment is usually around or over \$800, with a Medicare rebate of around \$400. For adult diagnoses, there is no public service available in Victoria.

If your GP thinks a diagnosis of ADHD is likely, they may want to arrange some blood tests, and an ECG (heart trace) before you commence medication. Whilst stimulant medication is the recommended first line treatment, it is not suitable or safe for everyone, and other options may be discussed.

An ADHD diagnosis can evoke a range of emotions. There can be relief knowing you aren't "naughty" or "lazy", and understanding the challenges you have experienced. There can also be anger or grief, over the delayed/missed diagnosis, and loss of what could have been achieved. A common feeling is that of hope or excitement, about what can be achieved in the future. As with all life experiences and medical conditions, everyone has their own unique journey and emotions, and your GP can help support you through it.



by Dr Sarah Lewis, Clinical Director



\*References: [Adhdaustralia.org.au](http://Adhdaustralia.org.au);  
[www.healthdirect.gov.au/attention-deficit-disorder-add-or-adhd](http://www.healthdirect.gov.au/attention-deficit-disorder-add-or-adhd)

