

news, views and research

Local surgery delays

The organisation representing community doctors and nurses is warning patients to expect growing delays in getting appointments at their local surgery.

The Independent Practitioners Association Council (IPAC) says GP and practice nurse numbers are falling as the population grows and more local surgeries are struggling to meet demand.

IPAC – which represents more than 800 community-based medical practices throughout the country – says Tauranga is the latest region where workload pressure has forced local practices to close their books to new patients.

Patients are facing similar problems in the Hutt Valley, Kapiti Coast, Manawatu and parts of Christchurch as a national workforce crisis hits local surgeries.



IPAC chair Dr Bev O'Keefe (pictured left) says patients in many urban areas are now experiencing the access difficulties which used to be mainly limited to isolated rural regions.

The situation looks set to get much worse – over four doctors and nurses a week are set to leave general practice as retirement and more attractive career options cut numbers further.

Dr O'Keefe says IPAC welcomed all new moves to boost GP training and recruitment but patients need to know the situation will get worse long before it gets better.

Changing focus

The fight against obesity and Type 2 diabetes in New Zealand focuses too much on nutrition and not enough on physical activity.



Both are equally important, according to John White (pictured left) of Fight the Obesity Epidemic (FOE) in his report *A back seat for physical activity* posted on the Living Streets website.

The report says Parliament's Health Select Committee

Inquiry into Obesity and Type Two Diabetes in New Zealand, and the Government, put too much emphasis on healthy eating, despite the majority of submissions calling for a more 'whole of society' approach.

John White's report says the importance of making increased physical activity a part of everyday life – a

point strongly made in many submissions – was ignored in the committee's report.

He says there is consensus that both healthy action and healthy eating are important, and both must be addressed to reverse the trend towards higher rates of obesity (section 8.1).

A major issue identified in submissions for increasing physical activity in the New Zealand population involves creating built environments that encourage people to engage in active transport (mainly walking and cycling) and active leisure.

Flu immunisation

People with diabetes are being urged to get their free influenza immunisation as soon as possible to improve their defence against the serious illness.

This year's seasonal influenza immunisation campaign began in March and the National Influenza Strategy Group (NISG) is advising people to get their immunisation from their family doctor or nurse before the influenza season hits.

Influenza immunisation is free for New Zealanders at high risk of complications – people aged 65 and over and people of any age including children, with long-term health conditions such as diabetes, asthma, heart disease, stroke, respiratory disease, kidney disease and most cancers. It is available free to these groups until June 30.

NISG virologist spokesperson Dr Lance Jennings says the influenza virus changes each year so annual immunisation is essential for best protection from this serious illness.

Between 10 and 20 per cent of the population are infected with influenza each year. In 2007, there were 347 hospital admissions in New Zealand for influenza.

"Immunisation is our best protection. Being fit, active and healthy does not protect you against influenza – it's easily spread and anyone can catch it," explains Dr Jennings.

Even when immunised one should practise good hygiene to prevent the infection spreading. Cover your mouth when coughing or sneezing and then wash your hands. Always use disposable tissues and stay at home when sick.

Further information: www.influenza.org.nz or www.moh.govt.nz or call 0800 IMMUNE 0800 466 863.

Priorities for action

Key recommendations to deal with both Type 1 and Type 2 diabetes in New Zealand are made in a report *Diabetes in New Zealand: Priorities for Action*.

Diabetes New Zealand commissioned Professor Emeritus Robert Beaglehole, a former Professor of



Professor Beaglehole



Associate Minister of Health Damien O'Connor and Diabetes New Zealand president Mike Smith with the report.



Diabetes New Zealand publications on display at Congress. Staff at the stand are, from left, Bronwyn Bannister, communications manager; Alison Pask, dietitian; and Heather Conland, operations manager.



Labour chief whip Tim Barnett presents the report at the launch of Parliamentarians for Diabetes in the Western Pacific Region.

Community Health at the University of Auckland, who has also worked for the World Health Organisation (WHO) where he directed the Department of Chronic Disease and Health Promotion, to help identify priorities and actions needed on diabetes.

The prime audience for this paper is policy and decision-makers concerned with diabetes, especially Members of Parliament.

"The scale of the challenges presented by diabetes, raised blood glucose levels and other chronic conditions are such that they constitute a national health emergency."

The report says diabetes in New Zealand is responsible for a major burden on individuals, families, health services and the national economy and is a major contributor to health inequalities.

Type 2 diabetes is a major uncontrolled, but largely preventable, epidemic in New Zealand; interventions are required at all stages of life and especially early in life.

"Despite its importance to New Zealand, diabetes has not received the urgent attention and action it deserves."

Seven key recommendations for parliamentarians are to:

- Ensure strategic assessment of current policies and actions
- Provide funding for coordination of policies and actions
- Implement the Parliamentary Health Select Committee's Report which followed the committee's inquiry into obesity and Type 2 diabetes
- Improve early detection
- Extend the 'Get Checked' programme
- Establish a national Type 1 diabetes register
- Improve the long-term management of Type 1 diabetes.

Overarching recommendations

The report concludes that urgent action is needed now in three specific areas:

1. Strategic assessment of current policies and actions for the prevention and control of diabetes and other chronic diseases and their common risk factors.
2. Implementation and funding of a mechanism for coordinating policies and action on the prevention and control of diabetes and action on other chronic diseases and their common risk factors.
3. Agreement on policies and programmes with timed targets and clearly identified responsibilities for all engaged groups and agencies.

"Action in these areas will ensure the best chance of reducing the adverse consequences of diabetes on individuals, families and the health service."

The publication has been circulated among MPs in the Diabetes Parliamentary Support Group and created considerable interest among delegates to the IDF Congress as it was available at the Diabetes New Zealand stand.

letter to the editor

On going backwards

You're lying in bed, waiting for sleep to overtake you. Suddenly you wonder whether you really had that bedtime injection or whether, not for the first time, you'd forgotten it.

In the good old days – before the NovoPen 3 replaced NovoPen 2 – all you had to do was nip out of bed (you were younger in those days) and look at the last dose recorded on the dial. Not today though; the designer of the NovoPen 3 apparently assumed that a dial which automatically reverted to zero was more advanced than one which didn't.

The NovoPen 3 lets us down in another way too – it doesn't have that finger-hole in its container which was so useful in helping our arthritic fingers to lift the syringe out of its comfortable bed.

Loss of memory and arthritic hands/fingers afflict many elderly people, including diabetics. And it would be nice to be assured that, when the time comes, the designer of NovoPen 4 will be required to reinstate these two much-missed features of the old NovoPen 2.

J Gordon Rodger
Whangarei

A Novo Nordisk spokesperson responded: "We will pass Mr Rodger's feedback to our head office and in the meantime he might want to talk to his healthcare provider about the best device for him. Alternatively, he could call our Customer Care Centre on 0800 733 737 to see if we can be of any further help to him."