

Real Life

The unnecessary medical treatments doctors want banned

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👤 Sue Dunlevy National Health Reporter Herald Sun



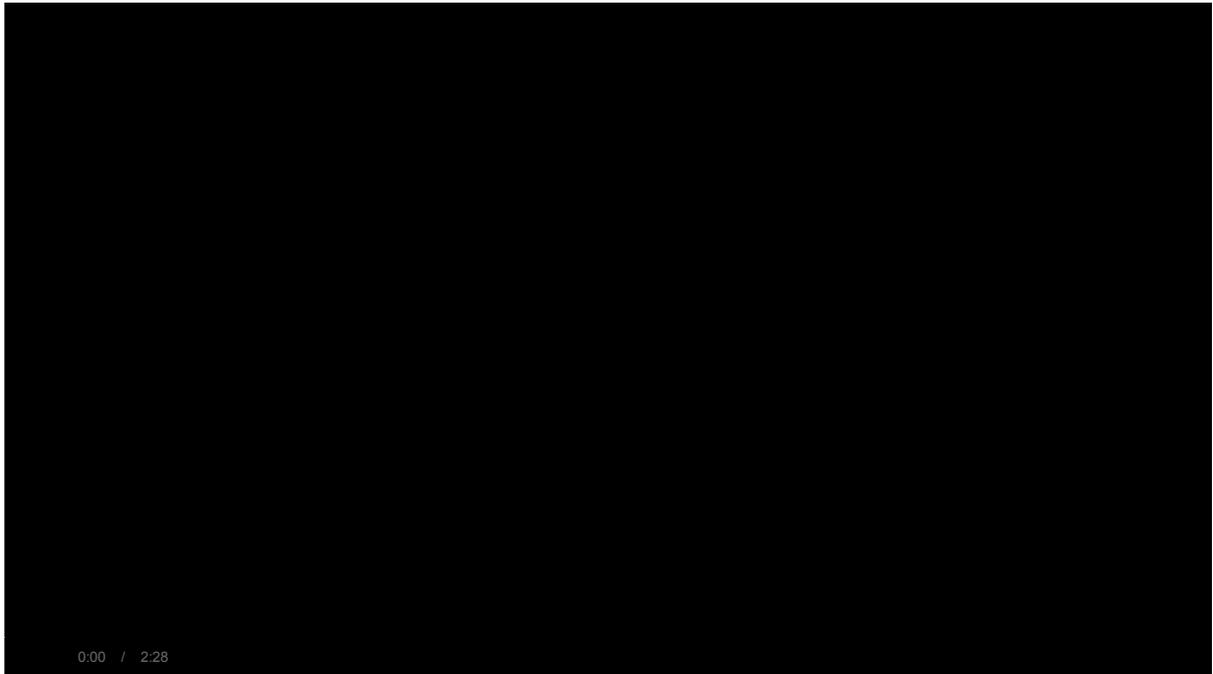
The Australian College of Nursing recommends not giving kids paracetamol or ibuprofen to bring down their temperature when they are ill. Picture: iStock

CHILDREN with ear infections will be refused antibiotics and parents are being told they shouldn't give pain relievers to reduce a fever under a crackdown on unnecessary medical treatment.

Everything you thought you knew about treating common ailments is being turned on its head after doctors reviewed the medical evidence for 61 of the most commonly sought medical treatments.

Fourteen prestigious medical colleges have nominated areas of waste and inappropriate treatment as part of the [NPS Choosing Wisely campaign](#) in a bid to rein in health costs and improve medical practice.

In a decision that will be confronting for mothers whose children are screaming with pain from an ear infection, they recommend against routine use of antibiotics for ear pain in kids aged two — 12.



What to Know About Childhood Ear Infections

"Regardless of whether one or both eardrums are red or bulging, antibiotics do not reduce pain at 24 hours," the [Royal Australian College of General Practitioners](#) says.

Instead, parents should use paracetamol or ibuprofen to control the pain, antibiotics should only be given if the child has a fever, is vomiting or lethargic says the Royal Australian College General Practitioners' president Dr Frank Jones.

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Dr Frank Jones, President of the Royal Australian College of General Practitioners, says routine use of antibiotics for children with an ear infection has to end.

Parents are also likely to balk at a recommendation by the [Australian College of Nursing](#) not to give kids paracetamol or ibuprofen to bring down their temperature when they are ill.

"The benefits of fever in slowing the growth and replication of bacteria and viruses are well documented," says the Australian College of Nursing.

Medicine should only be used to reduce fever if the child is uncomfortable or distressed the college says.

The Choosing Wisely campaign also calls for the practice of prescribing antibiotics to infants with a fever to stop because it is not only 'low value' but "can be dangerous, in delaying presentation to hospital by inappropriately reassuring patients".

One in 14 kids have side effects from antibiotics and their overuse is fuelling the rise of antibiotic resistant infections.

Medical colleges are also calling for a stop to X-rays of most foot and ankle injuries as part of the campaign.

The review has found routine CT scans for some cancers and appendicitis can be dangerous delivering unnecessary radiation.

And they warn some people can die from the complications of routine colonoscopies so faecal testing for bowel cancer is less costly and safer.

Thirteen per cent of those 50-75 years of age were over-screened using a colonoscopy which costs \$3,000 per procedure, the review found.

Doctors are also being told to stop prescribing antibiotics for upper respiratory infections and to refuse chest X-rays for uncomplicated bronchitis cases.

Chest X-rays are the imaging tests most frequently ordered by Australian GPs even though they do not affect outcomes in adults or children and may lead to false positives, further investigations and unnecessary radiation.

The campaign also calls for doctors to think twice about ordering thyroid ultrasounds, ultrasounds for groin hernias, endoscopies for gastric band patients and imaging for non-specific low back pain.

It says doctors should not order multiple blood tests for people suffering from fatigue.

Palliative care rather than expensive intensive care solutions should be used as people come to the end of their life, the review found.

People near the end of their life should be taken off medications that are used to prevent disease and people with dementia should not be fed through tubes.

Surgeons are being urged not to operate on hernias but to watch and wait.

Antibiotics should not be for more than seven days without review and anti-inflammatory drugs like ibuprofen should not be used by the elderly for more than two weeks, the review says.

Dr Frank Jones says he hopes the list of unnecessary test and procedures will help kick start a conversation between patients and their doctor.

"I think it will change the perception of what patients require from their doctor," he said.

The Government has set up its own review of all 5,700 items on the Medicare Benefits Schedule.

In eight months it has only identified 23 mostly obsolete items that should be removed from the Medicare benefits schedule, a measure that would save the government just \$7 million from its \$29.5 billion Medicare spend.



Minister for Health Sussan Ley has only been able to identify 23 mostly obsolete items from the Medicare Benefits Schedule that will save about \$7 million a year. Picture: AAP / Mick Tsikas

The savings from the Choosing Wisely campaign would be far greater.

[Australian Medical Association](#) president Professor Brian Owler said the Choosing Wisely campaign acknowledged the role of doctors as stewards of the health system.

"We've looked at the evidence and come up with recommendations that certain practices are not providing the best value," he said.

TESTS, SCANS AND MEDICINES NOW BANNED BY DOCTORS



Routine prescriptions of antibiotics for a child's sore ear is now a no-go. Picture: Supplied



Changing everything you think you know about health care.
Artwork: Daniel Murphy

PARENTS MUST LISTEN TO DOCTORS' ADVICE

While many parents might find the recommendations confounding, for mum of three Lou Pollard, the advice stacks up.

Working as a clown doctor for sick children at hospitals across Sydney, she said she saw children who had built up a resistance to antibiotics which made it harder to fight things such as staph infections.



Lou Pollard with the youngest of her three daughters, Sienna, 11. Picture: Richard Dobson

She said she rarely gave her daughters, now aged 11, 13 and 18 paracetamol and took the advice of their family GP, who advised against prescribing antibiotics for them unless absolutely necessary.

"When my kids were babies and young kids I would hold off medicating them," she said.

"I think, they're doctors, they've studied the science, they're researching this and it's something they are experts in, they're not saying this lightly and they're not going to put kids in danger."

Ms Pollard said she could appreciate why some parents would opt for pain medication for late night fevers, especially if they have work the next day. But said she believes it's better for their immunity long term to fight it naturally.

"It's hard to see them in pain. And there's a lot of sleep deprivation on the parent's part, because they get incredibly clingy when they're sick. So for the parents to have a rest if they have work the next day it's easy to use pain medication, because then they sleep and the parents can go to bed."

"It's much more hands on parenting, because you have to keep them cool, bathe them in a tepid bath. It's exhausting but part and parcel of having young kids. It's a phase of their life, getting sick and picking things up from other kids."

— Naomi White

LITTLE JOHN WON'T GIVE UP THE FIGHT

MOST babies spend their days feeding and sleeping. As one of Australia's youngest kidney patients, tiny John Dixon is forced to endure 10 hours a day hooked up to a dialysis machine.

He has known little else since entering the world four months ago — born with two undersized kidneys that were first spotted in an ultrasound at 20 weeks gestation.

"We were completely surprised. We had two very healthy children and no family history of kidney problems so it was quite a shock and made for an anxious pregnancy," says his mum Clare Dixon.



Clare Dixon with her four-month-old son John Dixon — one of the nation's youngest kidney patients who is hooked up to a dialysis machine 10 hours a day — as he sleeps. Picture: John Appleyard

After such a rough start, baby John faces a hard road to stay alive. He will need a kidney transplant, but any operation must wait until he weighs at least ten kilograms — a milestone normal babies reach at around eight months.

Previously the youngest kidney transplant patient at The Sydney Children's Hospital, where John is being treated, was ten months old.

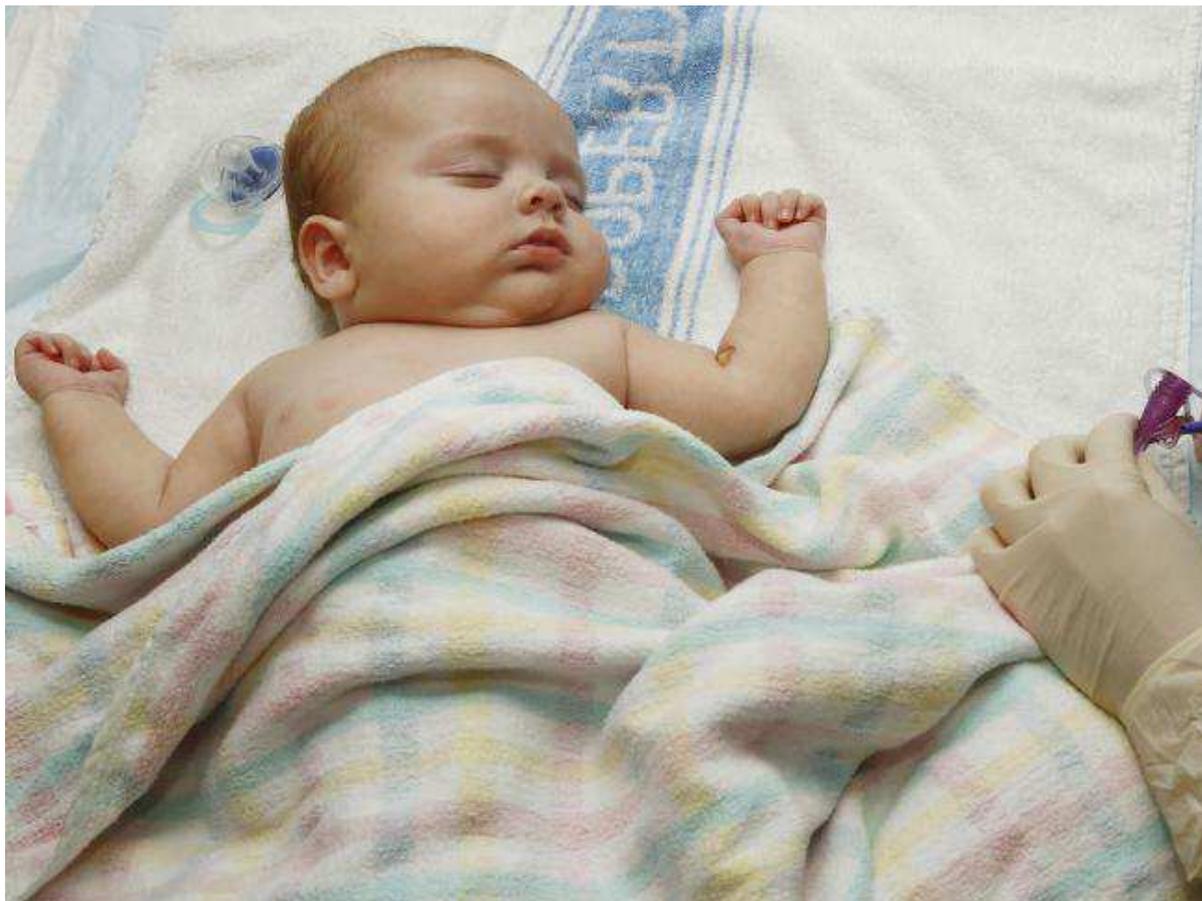
Then there is the problem of finding a matching donor, but the one ray of light is that, counterintuitively, an adult's kidney could be used.

In fact, researchers at Stanford University have found that adult-to-children kidney transplants produced the best survival rates of any transplanted organ in any age group.

Mrs Dixon is hoping that she, or her husband Rob, can be the donor. If not, her baby, born five and a half weeks prematurely, may have to spend at least two years a public waiting list.

"We were warned by the doctors that it was possible our child would need to have a transplant down the line, we just didn't envisage that he'd need it quite so soon," she said.

"It's a great gift that people can give. The message is to talk to your family and let them know you're willing to be an organ donor — if something were to happen you can save someone's life," Mrs Dixon said.



Four-month-old John Dixon's kidney failure requires dialysis for up to 10 hours a day. Picture: John Appleyard

Head of the Nephrology Department at Sydney Children's Hospital Dr Sean Kennedy said of the approximately 25 children under the age of 10 who start dialysis in Australia each year, only two or three have John's condition.

The Sydney Children's Hospital has administered dialysis to a baby girl in the first couple of weeks after birth and she is now a healthy 13 year old.

Dr Kennedy said an adult kidney would take up most of one side of a baby's abdomen.

"Then they grow into it." If all goes well, a transplanted kidney should last for 20-30 years before another is needed.

A major problem for little children is the risk of infection caused by anti-rejection drugs which suppress their immune system.

But he said one of the greatest medical advancements for young kidney patients was the improvement of dialysis equipment.

"John has been lucky enough to not need dialysis until now, but if he needed it from birth, 20 years ago we definitely wouldn't have been able to do that," Dr Kennedy said.

"We can never have too many resources or funding put into kidney health and research. In order to keep one person alive, like John Dixon, it takes more than a village."

While the rates of mortality associated with many chronic diseases including some cancers is stable and even declining, deaths related to kidney disease remain unchanged.

More than 20,000 people will die with a kidney-related disease each year.

— **Cassandra Briedis**

Originally published as [Doctors bid to ban bad medicine](#)

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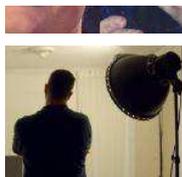


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