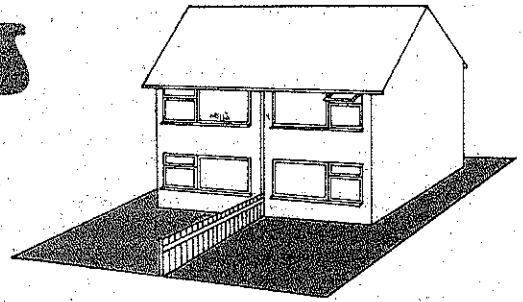


# Is the Grass Greener?



## General Practice in Australia

Paul Stillman

When, while still at school and trying to decide upon a career, the virtues of the medical profession were laid before me, my teachers failed to mention one important advantage of this vocation: namely that an English-speaking doctor could use his qualifications to travel, finding work with ease in many countries of the world.

Although in the intervening years the passing of some opportunities, such as Graduate Service Overseas with the government, extensive travel as an officer with Her Majesty's Forces, and, more recently, increasingly stringent entry requirements for doctors wishing to practise in some countries have considerably narrowed the field, it is still possible for doctors in many branches of medicine to use their talents to secure employment abroad.

### To Go...

For six months during the middle of last year I made use of this facility and entered into a private exchange arrangement with a fellow general practitioner working in Mackay, North Queensland, Australia. We were to act as each other's locum, exchanging not only our jobs but houses, cars and thus to some degree our lifestyles. My counterpart and I were already briefly acquainted: and he was a close friend of one of my partners, which went a long way to alleviate not only my own apprehensions, but also those of my practice.

So, with visions of a round-the-world trip at a low total cost and the chance to combine holidaying in exotic locations with working in a general practice very different from my own, my wife and I, with our two young children, embarked upon the arrangements necessary for the journey.

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### ...Or Not To Go

At this point the story very nearly ends. Despite having more than six months before our intended departure in which to complete the necessary formalities, we encountered almost insuperable delays and difficulties and came very close to having to abandon the project altogether.

Not that medical registration was a problem: in Australia registration is not made with any centralized body but with the medical board of the state concerned. This was accomplished fairly quickly and simply by obtaining the application forms and returning them to Queensland with photocopies of my degree and General Medical Council certificates, a certificate of good standing, and of course, the appropriate fee. However, it was slightly worrying to be accepted only provisionally on condition of a successful interview conducted by a member of the Board, and therefore not completed until I was actually in Australia. Fortunately, as in my case, this interview is almost invariably no more than a rather pleasant formality.

Much more difficulty was encountered with the Australian emigration authorities, both here at the London Consulate and in Canberra. While they fairly freely grant visitor's visas, they are much less willing to part with working permits, even temporary ones. The problem was to convince the various officials of the true nature of the scheme: that in undertaking it I was not depriving any native Australian doctor of his job and that, at the end of the exchange, I had every intention of leaving the country. Surprisingly, I learnt at this time that my Australian colleague was experiencing similar, if less acute problems himself with the British authorities, not in entering the country but in confirming his medical qualifications.

The delays so incurred dragged on way past the date

set for the start of our trip. Indeed at one time, when I was still embarrassingly without a visa, my partner, showing great optimism, had already left Queensland for Europe.

This proved well founded, for eventually our documents were secured and albeit in a rush, my family and I headed for the Antipodes.

### The Practice Area

Mackay is a moderately small town of about 25,000 people situated on the North-Queensland coast about 600 miles north of Brisbane, the State's capital, on a remarkably variable road. The only neighbouring townships of any size are Rockhampton, about 250 miles to the south, and Townsville, approximately the same distance to the north. In between there are numerous small settlements, both along the coastal road and inland in the bush. Mackay's community owes its prosperity, at least until the advent of tourism, to the sugar industry. Sugar is grown in great abundance and with great success in a stable climate ideally suited to it. This is tropical and thus is mostly dry except for three or four months in midsummer, beginning around December. At this time the temperature is very high, reaching 30° to 35°C, and the atmosphere is humid. When I was there, during the winter, the humidity was much lower and the temperature a very pleasant 20° to 25°C with almost continually blue skies and clear, if occasionally chilly, nights.

### Practice Structure

The structure of the practice is much the same as that at home, each having four full-time male partners and one part-time female assistant, who does not normally participate in the out-of-hours work. The premises (Figure 1) for this, and many other practices in the town are purpose-built and generally extremely well equipped. Each doctor has two large, well-appointed consulting and examination rooms, moving from one to the other between patients. There is an excellent reception and waiting area (Figure 2) and towards the back of the building a large treatment area with four more screened couches, facilities for minor surgical, orthopaedic and casualty procedures and a full-time practice nursing sister in attendance. Needless to say, the whole building is air conditioned.

The practice is a pleasant and most efficient place in which to work, and has an expensive air of prosperity about it. Appearances are important, this being, of course, an entirely private group practice in keen competition with the others in the town. A partner may

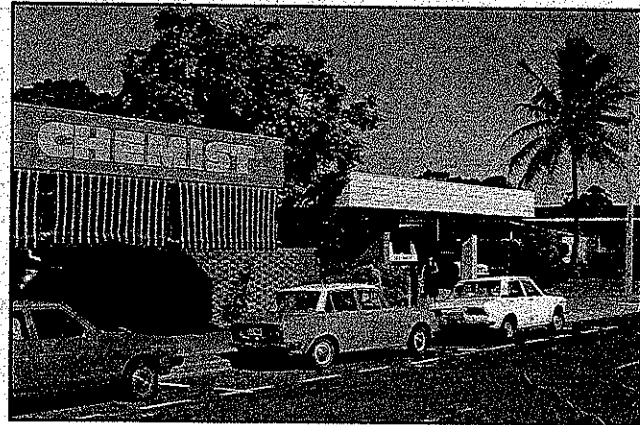


Figure 1. The surgery and pharmacy buildings, all owned by the practice, although the doctors are more discrete in their advertising. The surgery block is set back from the road behind a decorative wall and tree.

expect to earn more than twice that of his British equivalent in a society whose cost of living is now comparable with our own. But in order to do this he must also be prepared to work considerably longer hours, bending his appointment system frequently to accommodate all those who wish to see him with the very minimum of waiting. He has no prescribed list of patients registered with him or even with his group and any are therefore free to consult him, his partners, or even another practice at will. It is even possible for a patient to consult several general practitioners during one illness.

House calls are only rarely undertaken and by far the majority of patients will be expected to attend surgery using either their own transport (most own cars), or, if

Figure 2. Inside the reception area there is plenty of space for records and staff.



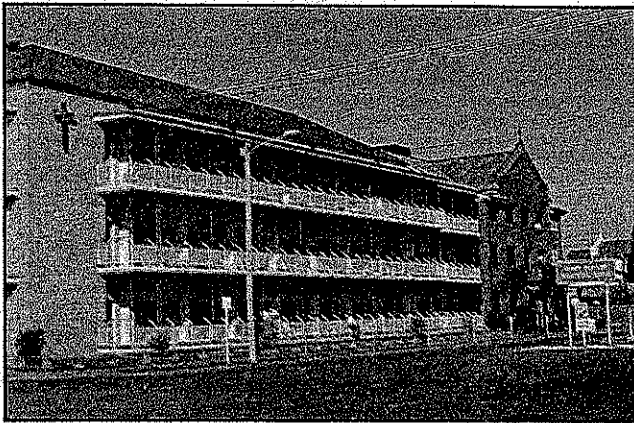


Figure 3. The Catholic-run but wholly private General Hospital.

necessary, the public ambulance service. The Australian general practitioner, at least in small self-contained communities like Mackay, expects to spend most of his working day, from about 8 a.m. to 5 or 6 p.m., in his consulting room or treatment area seeing patients at a rate similar to that in British practice. Surgery work is punctuated only by short trips to local hospitals to attend his patients, or the operating and maternity suites, occasionally to nursing homes and very, very

rarely to patients' homes. He will also be at his surgery for long periods when on duty out of hours.

It was our practice for the on-call doctor to hold a so-called 'night surgery' from 7 until 9 p.m. during weekdays and at intervals throughout weekends, and then be prepared either to sleep in a room at the practice or to return to it when required in between.

### Medical Facilities in Mackay

As well as the reasonably numerous general practices throughout the town there are three hospitals, a small modern 30-bed private unit with an excellent operating suite, a larger 200-bed private general hospital (Figure 3), of a chain throughout Australia administered by an order of Roman Catholic nuns, and another large public hospital, one of those peculiar to the State of Queensland. In Queensland alone the State Government proudly boasts a number of free hospitals where, provided they are prepared to face the long queues associated with government-funded hospitals almost anywhere, any person may be treated for any condition free of charge.

Various specialists also have rooms in the town. They practise alone or in groups, take referrals—mostly from general practitioners but occasionally directly—and

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#### PRESCRIBING INFORMATION

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##### Dosage and Administration

Usual Adult Dosage: 15-60mg per day taken as a single dose before retiring or in divided doses. For many patients a daily dosage of 30mg may be appropriate.

Children: Not recommended. Elderly: Reduced dosage initially until tolerance and efficacy have been assessed. Patients undergoing therapy with Anxon should be periodically reviewed.

**Contra-indications, Warnings, etc.** Precautions: Anxon may potentiate other centrally acting drugs. Patients should be warned to exercise care when driving or operating heavy machinery.

Usage cannot be recommended during pregnancy, but Side-effects: Anxon is well tolerated. In clinical trials, the incidence of side-effects was no greater than observed. Daytime drowsiness has been reported. Overdosage: Symptomatic treatment only is required may be useful if performed soon after ingestion.