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MEDIA RELEASE

AGEING POPULATION NEEDS IMPROVED PRIMARY CARE

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GENERAL practitioners and other primary care providers are best placed to deliver quality health care to older Australians, according to the authors of a Perspective published today in the *Medical Journal of Australia*.

The Australian Institute for Health and Welfare estimates that by 2057 there will be 8.8 million Australians aged 65 years and over, representing 22% of the population.

“In 2017, one-fifth of all presentations to emergency departments was for people aged 65 years and over, but multiple inpatient and outpatient hospital attendances are clearly not an effective way to deal with this growing challenge,” wrote the authors, Professor Dimity Pond, professor of General Practice, and Dr Catherine Regan, a Conjoint Senior Lecturer, both at the University of Newcastle.

“Primary care providers, with their potential to focus on primary and secondary prevention, their ability to identify disease at an early stage, their knowledge of the patient including their social context and their capacity for ongoing chronic disease management are vital for the health care of this group.

“Moreover, primary care has been shown to be cost-effective, an important consideration in a society where taxpaying workers are a shrinking proportion of the population.”

In order to maximise the effectiveness and access to primary care for older Australians, changes and improvements need to be made, the authors wrote.

“Primary care is well placed for the care of older people. It has ... the potential to relieve health system strain due to the demographic transition [to an older population],” Pond and Regan wrote.

“For this to be achieved, policy and practice (including education) should focus on what primary care does well and could do better.

“This should include consideration of the recent Medicare Benefits Schedule Review, in particular those items that pertain to older people and chronic disease, revision of guidelines for the 75+ health assessment, and care planning and policies that encourage better coordination between multiple primary care health and social services and the hospital system.

“Any changes should be assessed for factors such as continuity of care discussed above and known to affect the health and wellbeing of older people,” they concluded.

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