From the Editor’s Desk

THE HEART OF THE MATTER

When should you call the heart clinic? When you are over 40? When you are overweight? When you are a smoker? When your blood pressure and cholesterol are too high? When your chest is tight? When your breathing is short? When your heart beats irregularly?

While your heart beats … before you have a heart attack, not after.

This advertisement, played incessantly on commercial radio, targets the “worried well” and invites them to make contact with a heart check clinic for potential cardiac and vascular testing. Given the commercialisation of medicine, self-referral clinics are to be expected. Medicare provides a reliable revenue stream, and aggressive advertising is the key to throughput and success.

Indeed, the business of heart clinics must be booming. In the past 2 years, Medicare statistics reveal an unprecedented doubling in claims for vascular testing. In turn, the federal Minister for Health is considering instituting a ban on radio advertising for heart testing, noting: “I am far from convinced that [they are] a good thing, on public policy grounds.”

Herein lies the rub. Direct advertising to the public by pharmaceutical firms and doctors is either illegal or unprofessional. In contrast, advertising by commercial concerns is relatively laissez faire, as ads for erectile dysfunction, prostate problems, and attention deficit hyperactivity disorder choke the airwaves.

But more fundamental issues are at stake. Firstly, self-referral clinics usurp the traditional “gatekeeper” role of general practitioners. Secondly, the Medicare Benefits Schedule (MBS) provisions for health screening are readily exploitable.

The solutions are simple. The analysis of Medicare payments needs to be more rapid and focused. More importantly, the MBS provisions for health screening need to be reviewed urgently by informed professionals.

It’s time to get to the heart of the matter.

Martin B Van Der Weyden

LETTERS

Priorities for reducing the burden of injuries in sport: the example of Australian football
321 Belinda J Gabbe, Caroline F Finch, Peter A Cameron

Folate and vitamin B12 in older Australians
321 Victoria Flood, Paul Mitchell

Exposure to environmental tobacco smoke in cars increases the risk of persistent wheeze in adolescents
322 Peter D Sly, Marie Deverell, Merci M Kusel, Patrick G Holt

Immunisation coverage in refugee children
323 Kylee J Parsons, Maggi Osbourn, David N Durrheim, Murray T Webber

Mistakes and misconduct in the research literature: retractions just the tip of the iceberg
323 Alison Poulton

In the wake of hospital inquiries: impact on staff and safety
324 Gavin H Mooney
324 Geoffrey J Dobb
325 James A Dunbar, Prasuna Reddy, Bill Beresford, Wayne P Ramsey, Reginald S A Lord

Hendra virus infection in a veterinarian
325 Paul Prociv

The Australian Health News Research Collaboration
326 Simon Chapman, Ross MacKenzie

The adventures of an alienist
326 Bruce H Peterson
326 John H T Ellard

Characteristics of Australian women who test positive for HIV: implications for giving test results
327 Carol A Hopkins, Rosey A Cummings, Tim RH Read, Christopher K Fairley

Prisons: mental health institutions of the 21st century
327 Gordon RW Davies

Patient privacy and Latin: my father’s story
328 Katherine A Haley

SNAPSHOT

Pulmonary artery aneurysm
314 Zubair Ahmad, Imrana Masood, Saurabh K Singh

OBITUARY

Cyril Charles Julius Minty
314 by Thomas F Sandeman

Cover: Stages of macular degeneration. Courtesy of Associate Professor Robyn Guymer, Macular Research Unit, Centre for Eye Research Australia, University of Melbourne, VIC, Australia.

IN THIS ISSUE

IN OTHER JOURNALS

274