

Staff retention key to rural health care

Nick O'Donoghue

MONEY spent on recruiting health care workers in rural areas could be better used by providing current staff with incentives to stay, a new report revealed.

The research carried out by the Australian Primary Health Care Research Institute (APHCRI) at the Australian National University said the high levels of staff turnover in remote areas was a major financial burden on the health service.

The study, led by APHCRI network researchers Professors John Humphreys and John Wakeman, investigated the pattern of workforce retention for small rural and remote primary health care services.

It found that the money spent on recruiting new staff can be better used on retention



packages that prevent existing staff from leaving. The report recommended adapting retention packages to suit the geographic location and local health needs of staff.

Professor Humphreys, head of rural health research at Monash University in Bendigo, said the costs of replacing staff, conservatively estimated, equated to: \$20,000 for a nurse, \$74,000 for a doctor, \$22,000 for an allied health professional, \$14,000 for an Indigenous health

worker and \$30,000 for a health service manager.

"High workforce turnover also results in significant indirect costs such as loss of skills and experience, restricted access to health services and compromised quality of care," he said.

"Increasing the length of service for rural and remote health workers through financial incentives alone is unlikely to adequately address the problem."

Report co-author, Professor Wakeman, director of the Centre for Remote Health in Alice Springs, said a comprehensive workforce strategy is needed.

"Appropriately targeted incentives such as paid housing could result in a greater length of service for health workers and consequently improved patient care without additional cost to health services," he said.

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Cheap clotting agent could save lives

Nick O'Donoghue

A WIDELY available and easy to use drug could save the lives of tens of thousands of patients with serious bleeding an international study revealed.

The results of the CRASH-2 trial published in *The Lancet* showed the early administration of tranexamic acid (TXA) to patients with recent, severe bleeding injuries saved lives.

More than 20,000 patients in 40 countries, including Australia, were randomly assigned either TXA or a placebo within eight hours of injury.

Previous trials of TXA have shown the drug was successful in reducing bleeding in surgeries, Dr

Ian Seppelt from the University of Sydney, who coordinated the Australian arm of the study said.

"It is the first trial of TXA in injured patients, although smaller trials have shown that it reduces bleeding in surgical patients.

"The drug helps by reducing clot breakdown. Although this would be advantageous in patients with severe bleeding, doctors were worried that TXA might increase the risk of complications, such as heart attacks, strokes and clots in the lungs.

"But the results of this trial show that TXA reduces death from bleeding without any increase in these complications," he said.

The study found the drug reduced the chances of death due

to serious blood loss by about one sixth.

Researchers concluded TXA could also help to reduce the number of deaths among women who suffer post-partum haemorrhage, the leading cause of maternal mortality.

"TXA could be given in a wide range of health care settings and safely reduced the risk of death in bleeding trauma patients in our study.

"The option to use TXA should be available to doctors treating trauma patients in all countries, and this drug should be considered for inclusion on the World Health Organization's List of Essential Medicines," the study said.

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Avandia under increasing scrutiny

Nick O'Donoghue

REPORTS from the US about a study carried out by a senior Food and Drugs Administration (FDA) official have raised questions over the safety of diabetes drug Avandia (rosiglitazone).

The as yet unpublished study by Dr David Graham, has reportedly said there is "no rationale for its (Avandia) continued availability on the market", due to evidence linking the drug to increased risk of cardiovascular events and death.

A spokeswoman for the Therapeutic Goods Administration (TGA) has told *Pharmacy eNews* no decision has been made regarding the future availability of the drug, produced by GlaxoSmithKline (GSK).

"The TGA continues to monitor the safety of rosiglitazone and all medications available in Australia and as part of this ongoing monitoring will review the study following publication.

"The product information for rosiglitazone already contains significant warnings in regard to cardiovascular disease including a boxed warning," she said.

The Wall Street Journal reported Dr Graham's study retrospectively examined the health records of more than 227,000 patients over 65 between 1999 and June 2009 who were treated for diabetes using either rosiglitazone or an alternative treatment.

Dr Graham's findings, are expected to be presented to a meeting of the FDA next month, revealed more than 48,000 patients using the GSK drug experienced "excess complications" as a result, *Thompson Reuters* reported.

The research found rosiglitazone increased the risk of both stroke and heart attack by 25 per cent.

A GSK spokeswoman questioned the validity of Dr Graham's retrospective research.

"This is a draft manuscript of an observational study that was made available through a media report.

"It is important to note that there are inherent limitations with retrospective observational studies, including variables that were not considered nor corrected for when conducting the study, which can significantly impact the validity of the data," she told *Pharmacy eNews*.

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BRIEFS

SOFTWARE EXPERIENCE

Students are taking the opportunity to learn how to use the latest specialist pharmacy software to boost their chances of gaining employment as graduates.

The Mirixa Australia University Program has seen Griffith University pharmacy students learn to use Mirixa Australia software and deliver the clinical service by working on "dummy cases".

The intent of the university program was to produce graduates who would be familiar with the software systems used in pharmacies when they leave university.

HOOPER SIGMA'S NEW CEO

Sigma Pharmaceuticals has announced the appointment of former chief financial officer Mark Hooper as the company's new chief executive.

Having left Sigma in 2006 to join paper merchant Paperlinx as chief financial officer, Mr Hooper is expected to return in September.

Sigma also announced today that Brian Jamieson will become the company's new chairman.

DRUGS ACTION WEEK

The Australian Government has provided \$50 million for projects to combat binge drinking as part of **Drugs Action Week 2010**.

The initiative is a week of activities held nationally to raise the awareness about alcohol and other drugs issues in Australia.

Since the 2007 Drugs Action Week, the number of events being held around the country had quadrupled with more than 650 events registered for this year.

COMMONWEALTH PHARMACY DAY

Pharmacists across the Commonwealth are celebrating 40 years of the Commonwealth Pharmacy Association (CPA) today.

Founded as part of the Commonwealth Foundation's drive for professional associations across the member countries, the CPA marks the birthday of its first president Albert Howells.

The CPA has facilitated a range of events where pharmacists have been able to share experience, knowledge and educational materials over the years.

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