

*From the President's Office
Dr Kean-Seng Lim*



**Medical Services Advisory Committee
Australian Government Department of Health
MDP 960
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Canberra ACT 2601**

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Re: Application No.1344.1 – Podiatric Surgeons for access to a range of MBS numbers for surgery of the foot and ankle

Dear HTA,

Thank you for the opportunity to supplement our response to the Consultation Survey on Medical Services Advisory Committee (MSAC) Application 1344.2.

AMA (NSW) is a medico-political organisation that represents more than 9,000 doctors-in-training, career medical officers, staff specialists, visiting medical officers and specialists and general practitioners in private practice in NSW.

We do not support the Application 1344.2 from the Australasian College of Podiatric Surgeons (ACPS) which seeks to allow registered podiatric surgeons to access MBS item numbers for surgical treatment of the foot and ankle.

We would like to highlight that Application 1344.2 is a resubmission of Application 1344.1 and Application 1344. Upon consideration of both applications, MSAC's advice to the Minister was that it did not support public funding of podiatric surgeons to access a range of MBS numbers for surgery of the foot and ankle. In relation to both applications, MSAC found there was a lack of evidence for comparative safety and effectiveness in relation to comparable services, and the clinical need remained uncertain.

AMA (NSW) considers this advice to still be valid in relation to Application 1344.2.

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AMA (NSW) has significant concerns about providing access to MBS items which are currently only accessible by medical practitioners, to non-medically qualified providers. Allowing podiatric surgeons access to MBS items for foot and ankle surgery sends a message to patients that podiatric surgeons are comparable to orthopaedic surgeons in training, safety and effectiveness. There is already patient confusion around the title 'podiatric surgeon,' which is misleading in that it suggests they are medically trained.

Orthopaedic surgeons are medically trained doctors, who are experienced in medical and surgical care of musculoskeletal conditions. Podiatric surgeons are podiatrists who have undergone additional postgraduate training and have completed the requirements for admission to the Australasian College of Podiatric Surgeons (ACPS) or who have completed the Doctor of Podiatric Surgery degree through the University of Western Australia. They are not required to have medical degrees, and therefore are not recognised as medical practitioners.

AMA (NSW) does not consider the training and education of podiatric surgeons to be of the same standard as orthopaedic surgeons. The AMA has previously stated the Podiatry Board of Australia (PBA) should not be responsible for setting specific accreditation standards for training and education programs for podiatric surgery, arguing that the Australian Medical Council was the most appropriate body to accredit the education and training programs for podiatry surgery. The AMA has previously warned there are risks to having individual areas of specialty covered by different standards.

Without the same level of medical knowledge and training as medically trained doctors, podiatric surgeons are ill-equipped to provide surgical services to patients with simultaneous medical conditions. This is particularly important, given that the ACPS's Application seeks to address foot problems associated with chronic conditions, such as diabetes or obesity. Patients with multiple system disease are complex cases that require a high degree of medical knowledge. Podiatric surgeons are not able to provide the same level of pre- and post-operative care, which may be necessary to manage patient complications.

There continues to be a lack of evidence for comparative safety and effectiveness in relation to comparable services between podiatric surgeons and orthopaedic surgeons in Australia. In considering published data from international contexts, AMA (NSW) advises that there is a difference in training requirements for podiatric surgeons overseas as compared to Australian podiatric surgeons. Podiatric surgeons in Australia are not trained to the same standard as podiatric surgeons in the US. Podiatric surgeons in the US are highly regulated by the Council on Podiatric Medical Education.

Yet, despite a higher level of training in the US, there is evidence which suggests patients who underwent foot and ankle surgery with podiatric surgeons had poorer outcomes.^{i, ii}

The Podiatry Board of Australia's 2017/18 annual report advised there were 35 surgical podiatrists constituting 0.6% of the population of podiatrists. There were 61 notifications

lodged with AHPRA about podiatrists; 7 of the 61 notifications were made regarding podiatric surgeons - 11.4% of total complaints.

AMA (NSW) challenges the ACPS's assertion that podiatric surgeons are needed in relation to meeting unmet need. The Podiatry Board of Australia's Registrant data indicates there is a small number of registered podiatric surgeons within Australia (the PBA's Report Registrant Data reporting period from 01 July 2019 to 30 September 2019 listed 35 podiatric surgeons. AMA (NSW) notes ACPS figures, which listed 20 fully accredited podiatric surgeons, as of 8 Nov 2019)ⁱⁱⁱ.

This compares to 1,286 orthopaedic surgeons in Australia,^{iv} which includes 80 members of the Australian Orthopaedic Foot and Ankle Society (a professional society orthopaedic surgeons who have a special interest in foot and ankle conditions).

The number of medical students graduating has doubled between 2006 and 2013. Modelling produced by HealthWorkforce Australia in 2014 identified bottlenecks in the medical training system. There is a significant gap in the number of students graduating medical school and the number of vocational training places available. Insufficient workforce planning has had downstream effects for fully trained specialists. And whilst it is true that there is a rising prevalence of diabetes and obesity in Australia, and subsequently there is potential for increased foot and ankle problems, it must be noted that we are not facing a shortage of orthopaedic surgeons but rather there is a shortage in public hospital positions. State governments need to open more positions in public hospitals to meet patient needs.

Yours sincerely,



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President, AMA (NSW)

ⁱ Chan, J., et al.,. *Surgeon Type and Outcomes After Inpatient Ankle Arthrodesis and Total Ankle Arthroplasty: A Retrospective Cohort Study Using the Nationwide Premier Healthcare Claims Database*. The Journal of Bone and Joint Surgery, 2019. 101(2): p. 127–135.

ⁱⁱ Chan, J., et al.,. *Lower complication rate following ankle fracture fixation by orthopaedic surgeons versus podiatrists*. [J Am Acad Orthop Surg.](#), 2019. Aug 15;27(16): p. 607-612.

ⁱⁱⁱ https://eeb1c2a7-9923-45d4-96de-129d1ee5a85a.filesusr.com/ugd/198d53_4e1fc25b2ef04662bbca0816e837839f.pdf

^{iv} The National Health Workforce Dataset (NHWDS): Medical Specialties 2016