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**Transcript:** Chair of AMA Council of General Practice, Dr Richard Kidd, ABC News 24, *Mornings with Joe O'Brien*, Thursday, 3 October 2019

**Subject:** Codeine

**JOE O'BRIEN:** Sales of codeine painkillers and the number of reported overdoses have dropped by half in Australia since they were made prescription-only 18 months ago. For more, I'm joined by Dr Richard Kidd. He's the chair of the AMA's Council of General Practice.

Richard Kidd, welcome. So, what was the problem with codeine consumption in Australia before this regulatory change?

**RICHARD KIDD:** Hi, Joe. Thank you. It's a huge relief to see this happening. We had had years of coroners all along the eastern border of Australia, and the western, expressing grave concerns about the numbers of people who were dying from overdoses of codeine-containing compounds, and that these were, at that time, available over the counter. And so the coroners raised the alarm. Groups like the AMA, ScriptWise, NPS, TGA, worked together to try and come up with a solution, which was up-scheduling anything that contains codeine. And -

**JOE O'BRIEN:** [Interrupts] And so what was the extent of the problems there with addiction and overdoses? There were some extraordinary figures comparing Australia to the US.

**RICHARD KIDD:** That's right. We're very, very close to the US in a per capita sense, and much higher than just about anywhere else in the world. And the problem with the codeine-containing compounds is that it was an insidious kind of entry into addiction without people even knowing it was happening. They were buying it over the counter and they didn't realise that the codeine was giving them a bit of a hit. And they were thinking that they were getting headaches or other pains and the codeine-containing compounds were helping, not knowing that as the codeine withdraws, it actually gives you a headache and can give you other pain.

So they're taking more and more of it and then getting poisoned by, quite often, the other thing that was in it, whether it was paracetamol or an anti-inflammatory. So, people were destroying their livers, their kidneys, their stomachs.

**JOE O'BRIEN:** So what have been the outcomes of this ban on over-the-counter sales?

**RICHARD KIDD:** Well, it's a great relief to see that there's been a dramatic reduction in the number of overdose calls being made to the New South Wales Poisons Information Centre. They reported over a 79 per cent reduction in the calls about overdoses with weaker codeine-containing compounds and half for the slightly stronger ones. So, it's a big change. And a lot of people have not had preventable deaths or preventable terrible injuries to their organs.

**JOE O'BRIEN:** What about people who have a legitimate need for codeine who are going without it now because it's too expensive to go through a GP?

**RICHARD KIDD:** Well, as a GP who tries to provide quality care, I'd argue that it's not too expensive to go to a GP. Access in Australia is very good. I think less than 6 per cent of Australians have reported not going to a GP because of cost. And in a lot of places, they have got the options of bulk billing doctors if they want to do that. I'm a private-billing doctor. I think that's not a real reason. And we've found from these figures that in actual fact there's been a big improvement in health for

many Australians. So I think this is a great result. And I don't believe that there are a significant number of people where the cost would be an issue.

**JOE O'BRIEN:** But I was speaking to one of those people this morning. What would you suggest a person who has a real need for it do if they find it too frustrating to go through a GP and have to pay the fee of going to a GP to get the medication?

**RICHARD KIDD:** Well, they have got other options but I would say in the first place, they should have a heart-to-heart talk with their GP. It's very, very important for every Australian to see a GP that they know and trust, that they can trust with their lives, literally. And a GP is the best placed person to help them with this. And it depends a bit on what they want to do about it. If they've got genuine pain, there are actually much better medications than codeine. So, one of the things there would be improved management of their pain if they actually saw their GP.

**JOE O'BRIEN:** Right. Okay. Are some people still over-using, though? And is real time monitoring needed?

**RICHARD KIDD:** Real-time prescription monitoring is absolutely needed. This is the next big step in quality, patient-centred care. Sadly, there are still doctor shoppers who, because of their addictions, are going from doctor to doctor and getting prescriptions - quite often jumping back and forth across State borders - and we're still seeing deaths from that kind of behaviour. And we know from where real-time prescription monitoring has been in place, like it was in Tasmania for some time, dramatic reduction in deaths from that kind of behaviour. And these people are people who've got genuine medical problems and need medical help.

So, real-time prescription monitoring will identify those people who need help and hopefully in most, if not all, cases, will be able to give them the help that they need and help them live really good quality lives. Living with chronic pain, there are lots of options that a GP can help navigate a person through that can help them manage their pain and have a good quality of life.

**JOE O'BRIEN:** And sorry, Richard Kidd, just very quickly, what's the progress of the discussion around real-time monitoring?

**RICHARD KIDD:** Well, we've got it being introduced in Queensland, Victoria, and it's already in place in Tasmania and I think it'll be coming online in NSW quite soon. And what we really need is a national seamless integration, so that when people are jumping back and forth across borders, we can see it in all the States where that's happening.

**JOE O'BRIEN:** Yeah. Okay. Richard Kidd, thanks so much for talking to us this morning from Brisbane.

**RICHARD KIDD:** Thank you.

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