

Canberra Gives Podiatric Surgery Greater Recognition

Representatives of the Federal Health Minister, the Federal Parliament, Australasian College of Podiatric Surgeons (ACPS) and the APodC attended a ceremony on 15th April at Queensland University of Technology to mark the passing of two important pieces of legislation in the Federal Parliament in the last 12 months.

The legislative changes were:

The National Health Act 1973, including *Podiatric surgery and other matters 2004* and the *National Health Amendment (Prostheses) Bill 2005*.

The first of these amendments listed Fellows of the ACPS within the "Professional Attention" classification. This classification places podiatric surgeons in the same provider category as medical practitioners, maxillo/facial surgeons, dentists and midwives in that it allows health funds to pay for hospital costs when a podiatric surgeon admits a patient.

Additional federal recognition was achieved in March this year with the passing of *National Health Amendment (prostheses) Bill 2005* which removes any legal barrier to the private health insurance industry providing a rebate for podiatric surgery, theatre fees and prosthetic implants. The legislation has been structured to facilitate these health insurance reforms by listing Fellows of the ACPS as "Accredited Podiatrists".

Terry Barnes, Senior Advisor to the Health Minister, Tony Abbott, congratulated the College and in particular, Mark Gilheany, ACPS president, on the persistent and thorough way the College had presented the case for legislative change.

Invited speaker, Claire Moore, Labor Senator for Queensland, who participated in the senate review committee which considered proposals from all stakeholders affected by the then pending prostheses legislation, was able to provide a light-hearted insight into this unique legislative change, indicating a number of members on this committee had had some previous experience of podiatric surgery.

Importantly the prosthetic amendments have also given authority to the Federal Private Health Insurance Ombudsman to report on any evidence of discrimination against accredited podiatric surgeons by private health insurance agencies.

The APodC was a significant contributor to the early stages of this lobbying program, both as the writer of the key submissions to the Federal Government and in the early meetings with the then Federal Health Minister Dr Michael Wooldridge and key Health Department officials. The APodC also provided some financial assistance for the lobbying campaign. •

Workplace Takes a Toll on Feet

If your job requires that you stand for more than a few hours a day, it could be contributing to foot and postural problems, according to a recently completed APERF study.

Researchers Lloyd Reed, Professor Beth Newman and Dr Diana Battistutta, of Queensland University of Technology, found that people who are required to stand for long periods (more than two hours) in the workplace are likely to experience increased foot discomfort.

"The literature has identified prolonged standing and walking as risk factors for work-related foot and lower limb discomfort," says Mr Reed, "and that foot discomfort may decrease a person's sense of balance, which could lead to higher risk of falls or injury."

Mr Reed says his pilot study was designed to assess changes in foot discomfort throughout the day, as indicated by VAS (visual analogue scale) discomfort scores. In addition, changes in the sensitivity of the foot, indicated by foot discomfort thresholds, were measured by algometer. The study also assessed changes in body balance, indicated by postural sway, using some of the parameters described by Lord, Menz and Tiedemen (2003)*.

The pilot study was used to establish a methodology for a larger clinical study on hospital-based nurses, which will explore the relationships between the physical characteristics of the foot, footwear features, foot health status, body balance and work-related foot and lower limb discomfort.

Twenty-two subjects (12 males and 10 females) participated in the pilot study. Subjects were selected on the basis that they were required to stand for more than two hours per day as part of their job and had no history of foot disorders or disease processes associated with foot discomfort, such as diabetes or arthritis. Also, the participants had no known medical or musculoskeletal disorders affecting their feet or that were likely to impair body balance.

Participants attended the QUT Podiatry Clinic for testing 50 minutes prior to their work shift commencing and within 30 minutes of completing their work shift.

Key findings include:

- small but significant increases in foot discomfort occur in individuals who stand for more than two hours per day as part of their work;
- females experienced larger changes in foot discomfort than males;
- changes in foot discomfort, measured with a VAS, showed no differences between three sites beneath the foot (heel, ball, arch);
- quantitative assessment, using an algometer, revealed a gradient in foot discomfort thresholds, with the foot being more sensitive beneath the ball of the foot compared to the heel and most sensitive beneath the arch of the foot;
- foot discomfort thresholds were lower in females than in males and foot discomfort thresholds were lower after work;
- there was a trend for females to exhibit greater levels of postural sway than males.

The results from this study will be presented at the 2005 Australasian Podiatry Conference. •

*Lord SR, Menz HB, Tiedemann A. (2003). A physiological profile approach to falls risk assessment and prevention. *Physical Therapy* 83:237-252.

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