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## MEDIA RELEASE

Wednesday 2 October 2024

Interviews: ☎ 03 8699 0992 ✉ [media@racgp.org.au](mailto:media@racgp.org.au)

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### Research backs RACGP calls for ‘living’ long COVID guidelines

New general practice research has backed the Royal Australian College of GPs’ (RACGP) calls for guidance on long COVID, and is boosting GPs’ knowledge around RSV prevention and scabies diagnosis and treatment in light of [an ongoing scabies outbreak](#) in NSW.

The latest edition of the [Australian Journal of General Practice \(AJGP\)](#) focuses on infectious disease, with articles examining immunisation for RSV, an examination of how GPs responded to COVID-19, the need for up-to-date guidance on long COVID, and a clinical challenge to boost skills in treating and managing scabies in light of growing infections.

The RACGP has consistently [called for all states](#) to fund immunisation against RSV for babies to reduce hospitalisations.

#### RSV immunisation: Safe and effective

A [new paper by paediatricians Dr Ingrid Laemmle-Ruff and Professor Nigel Crawford](#) explored the safety of vaccines for seniors and pregnant people, and monoclonal antibodies for infants, against respiratory syncytial virus (RSV).

RSV infections cause over 6000 hospitalisations each year in Australia; [around half](#) of RSV notifications are of children under five, and infants under six months [are at greatest risk of hospitalisation](#).

“While no RSV vaccines are available for children, monoclonal antibody products give infants passive immunity. Overall, safety data have been very reassuring, with most infants tolerating immunisation well and reactions usually being mild and short,” Dr Laemmle-Ruff said.

“Across age groups, the range of emerging RSV prevention products presents an extraordinary opportunity to prevent significant morbidity and mortality. The challenge for policymakers is embedding them in a busy and complex immunisation schedule and supporting patients and parents to make informed decisions. GPs are central to that.”

#### Additional professional development for scabies diagnosis and management

The infectious disease focus of the October *AJGP* edition also includes [a clinical challenge to help GPs boost their ability to diagnose and treat scabies](#), by past *AJGP* Editorial Fellow Dr Laxmi Iyengar and Associate Professor Alvin Chong, Director of Dermatology Education at St Vincent’s Hospital Melbourne.

“Scabies is caused by a tiny mite, which lays eggs in a patient’s that lead to itchy rashes, especially near skin folds. With an incubation period of up to eight weeks, there’s a risk it spreads before a patient becomes aware of it.,” Dr Iyengar said

“The challenge as a GP isn’t just knowing the many conditions that share an intractable itchy rash as symptoms, it’s narrowing the possibilities to be able to make a differential diagnosis. That’s why it’s so important to see a medical professional with the training to make a diagnosis, a GP or dermatologist, as buying what could be an unsuitable treatment from a pharmacy may delay appropriate care and lead to scabies spreading amongst people close to you.

“Fortunately, treatment is straightforward via topical permethrin, and oral ivermectin among those who haven’t responded to topical treatment. The important thing is to ensure close contacts like family, housemates and partners are treated simultaneously to prevent further spread.”

#### Long COVID guidelines needed

Meanwhile, a [qualitative analysis of the challenges of diagnosing and managing long COVID](#) found GPs need accurate information and clear definitions to diagnose and manage long COVID, and [a research survey examined how GPs adapted their clinical practice](#) during COVID-19 lockdowns and safety measures in 2010-21.

RACGP President Dr Nicole Higgins said the former study backs the College’s [call for funding for continuously updated ‘living guidelines’](#) so GPs always have the latest evidence-based guidance.

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“GPs should always have access to the latest evidence-based guidance,” she said.

“The fact is, there is an enormous volume of medical research being published at all times, and GPs need to know which findings they should put into practice.

“Living guidelines, which are updated as important research is published rather than on a schedule, will help GPs support patients with conditions like long COVID. We called on the Government to [make this investment in the last budget](#), and this research makes it clear that living guidelines will support us to keep our patients safe and healthy.”

### **The general practice response to COVID -19**

Dr Higgins also said the [study of how GPs adapted their practice during the pandemic](#) showed their resilience throughout COVID-19 lockdowns, and that GPs must be part of preparation against future epidemics and pandemics.

“The fact is, GPs in all states pulled together to support our patients through COVID, and this research shows how GPs strived to keep supporting our patients during the lockdowns and despite the risk of infection,” she said.

“GPs enormously boosted their use of telehealth to ensure patients could still receive healthcare, including the preventive health and management GPs excel at – the need for this didn’t stop during COVID. Many preventive activities continued as normal, as did most women’s health like cervical cancer screening and contraceptive and reproductive health counselling. Most urgent care and care for higher risk patients could be delivered by telehealth and was postponed by less than 3% of the GPs who responded to the survey. For lower-risk conditions, GPs’ responses were driven by time sensitivity or options for safe telehealth. Compared to the recommendations given to UK GPs, GPs in Australia reported they continued significantly more essential care.

“The lack of clear national guidance was a challenge, as was the considerable difficulty GPs faced accessing Personal protective equipment, given government stockpiles were [preferentially channelled to hospitals](#). But this study makes it clear Australian GPs stepped up to the challenge, and that governments need to work with GPs as they plan against potential future pandemics to keep our communities safe.”

~ENDS

RACGP spokespeople are available for interviews: [03 8699 0992](tel:0386990992) / [media@racgp.org.au](mailto:media@racgp.org.au).

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## Media contacts

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## About the RACGP

The Royal Australian College of General Practitioners (RACGP) is the peak representative organisation for general practice, the backbone of Australia's health system. We set the standards for general practice, facilitate lifelong learning for GPs, connect the general practice community, and advocate for better health and wellbeing for all Australians.

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