



GP Obstetrics Shared Care Newsletter

Winter 2016 – Issue 2

The GP Obstetrics Shared Care Newsletter is produced by GP partners Australia, to provide GPs participating in the GP Obstetrics Shared Care program with news of interest and information to support you. We welcome your feedback or suggestions for additions by phone 1300 303 409 or email info@gppaustralia.org.au.

Educating Women on Herpes Simplex Infections and Delivery

Dr. Michelle Emmerson, General Practitioner, GP Advisor to the Obstetric Shared Care Program

Not all Herpes Simplex Virus (HSV) infections, or history of infection, mean the women's only choice is a Lower Segment Caesarean Section (LSCS). With the correct management and if there are no active lesions at the time of delivery, vaginal delivery is usually quite safe.

This is now reflected in a revision of the SA Perinatal Practice Guidelines (SAPPG) located under [Genital Herpes Simplex \(HSV\) Infection in Pregnancy](#).

Recurrent genital HSV infection: The overall risk of transmission is < 1% . If HSV is detected in the genital tract at delivery, risk of transmission is 1-3% . The risk is greater for recurrent HSV type 1 (15%) compared to recurrent HSV type 2 (0.01%). Careful speculum examination is needed in early labour. If no active lesions can be seen, the patient is suitable for vaginal birth.

LSCS will be offered to women who have had a primary HSV within 6 weeks of the expected date of delivery and is very highly recommended for women with active lesions.

Am I Indemnified to Provide Shared Care?

"To be indemnified for the practice of obstetric shared care, the appropriately qualified GP must adhere to the requirements of their insurance provider."

This quote is directly from our SA GP Obstetric Shared Care Protocols 2015.

We have had some questions raised by GPs recently about level of cover needed to provide obstetric "Shared Care". We have had email confirmation from all of the current insurance indemnity companies that state "Non Procedural" standard general practice coverage is adequate for GPs registered within the State wide South Australian Obstetric Shared Care Program. **There is no need to purchase extra cover.**

Fetal Dopplers – Now an Expected Service in Practices

Expecting mothers may feel disempowered to ask a busy GP to hear their baby's heartbeat. Reassurance for your client can easily be achieved by purchasing and using an inexpensive Fetal Doppler at **each** appointment. The benefits are significant to the mother's wellbeing and will meet their expectations of an antenatal appointment.

A stethoscope only is inadequate! Fetal movements alone are inadequate!

A fetus in trouble can still move. It is not compulsory (according to protocol) to have a Fetal Heart Doppler in rooms as a shared-care GP, however it is strongly recommended. Although a Pinard Stethoscope for an experienced user is adequate, expecting mothers feel comforted and connected hearing their baby's heart beat at each visit. We encourage our providers to allow expecting mums to have this basic and expected experience.

There have been cases where babies have survived because a GP had detected a serious bradycardia with a fetal doppler that has saved a baby's life.

A Sonoline B Fetal Heart Doppler can be purchased on line and will cost less than \$100.00.

Alcohol gel is an adequate sound conductor.



Education

On Wednesday the 20th of July, we had a very informative education session at the new GP Partners headquarters on Greenhill Road. Dr Simon Khoury from Adelaide Dermatology Partners, presented a talk on pregnancy related dermatoses and Sue Bulluss a Senior Physiotherapist provided an update to a room full of captivated GPs.

Some take home messages from each of the presentations:

Physiotherapy:

Sue Bulluss strongly advised we promote attendance of antenatal classes to our clients to learn basic pelvis protection. Maximising problem solving early in the pregnancy can prevent future presentations. At the WCH the *Pelvic Pain in Pregnancy*, physiotherapy information sessions are run in groups which are useful as women see there are other women in similar situations managing their pain and physical limitations. This is a free service and bookings can be made by phoning (08) 8161 7579.

Dermatology:

History goes a long way. Always check for history of skin rashes. In many cases the rash the pregnant woman is experiencing is something from her past that has been reactivated. There are 4 eruptions to watch for the presentation of:

- Cholestatic Pruritus
- Atopic Eruption of Pregnancy
- Pruritic Urticated Papules and Plaques of Pregnancy PUPPS (Pruritic Eruption of Pregnancy)
- Pemphigoid Gestationis

Pictures of the above can be viewed [here](#)

GP Registration

All GPs are welcome to register for this OSC program. Please complete the [registration form](#) and return it to fclapham@gppaustralia.org.au or fax it to 08 8227 2220.

Upcoming Events

Please be advised the triennium ends December 2016 and your accreditation in the GP Obstetrics Shared Care program is required. Detailed below are our final GP OSC events held this year.

Date	Time	Title	Location
16th August	6.30pm—9.00pm	Continence Matters in Pregnancy 4 OSC Points, 4QI & CPD points (Category 2)	Adelaide CBD
10th September	8.30am—4.00pm	Obstetrics Shared Care Refresher Day 12 OSC Points, 40 QI & CPD points (Category 1)	Grange Golf Club
22nd October	8.30am—4.00pm	Accreditation Seminar 12 OSC Points, 40 QI & CPD points (Category 1)	Education Centre, Hindmarsh
8th November	6.30pm—9.00pm	Pregnancy Diagnosed – What next? 4 OSC Points, 4QI & CPD points (Category 2)	Mt Barker (Rural)

For further information and booking details visit www.gppaustralia.org.au/events.

Additional CPD events are in the planning stage. We welcome your suggestions for topics of interest by email to fclapham@gppaustralia.org.au or phone 1300 303 409.

The GP OSC team would like thank you for your ongoing participation and support in this important program.