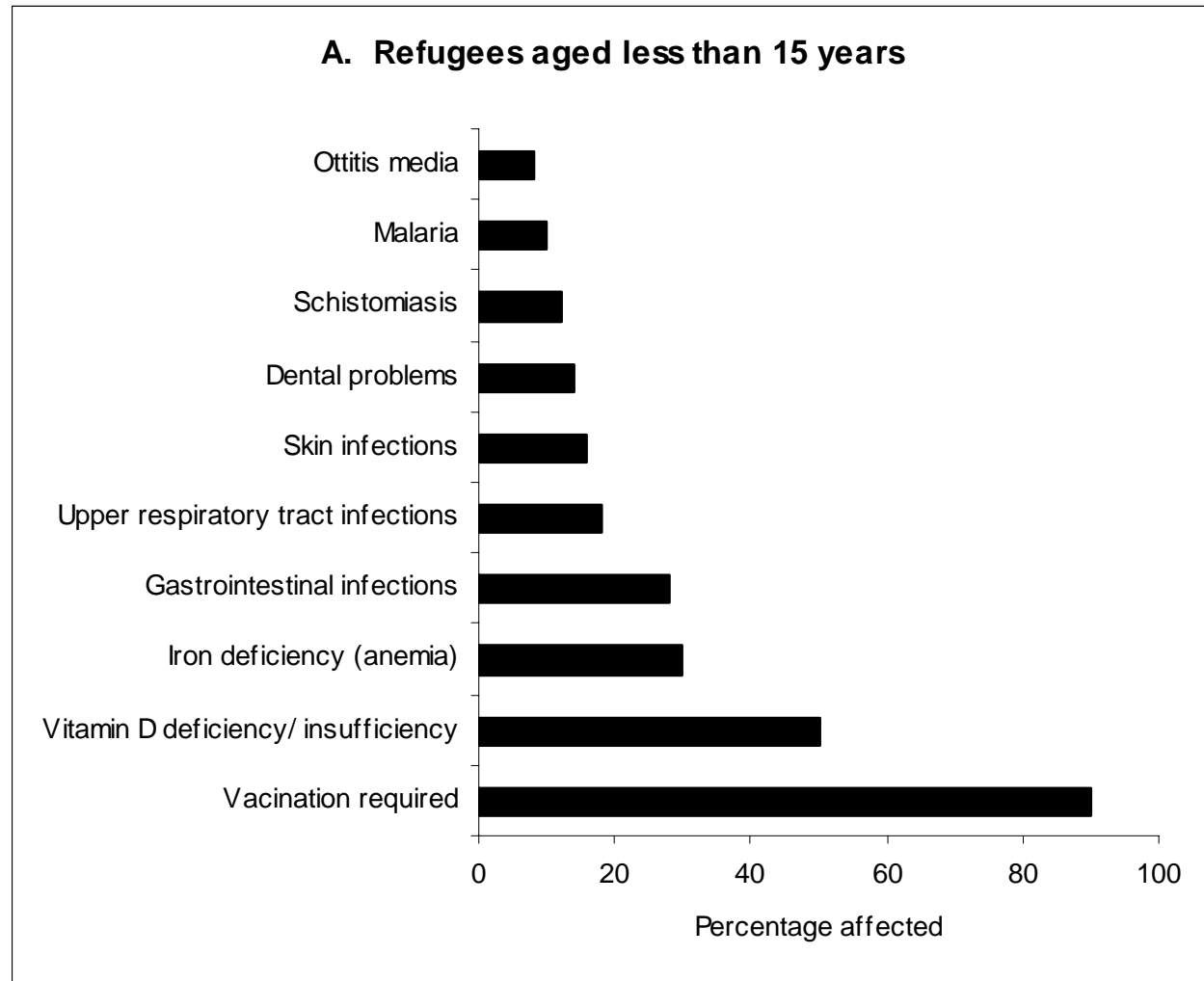




A Thai-Burma border camp

- **Ban Mai Nai Soi** camp
- First refugees 1991
- Population 19,918 (Feb 2009)
 - ethnic minorities from Burma: Karenni, Karen
 - 49% under 18
- 2km from border - vulnerable
 - shelling
 - attacks by Burmese army
 - landmines near the camp

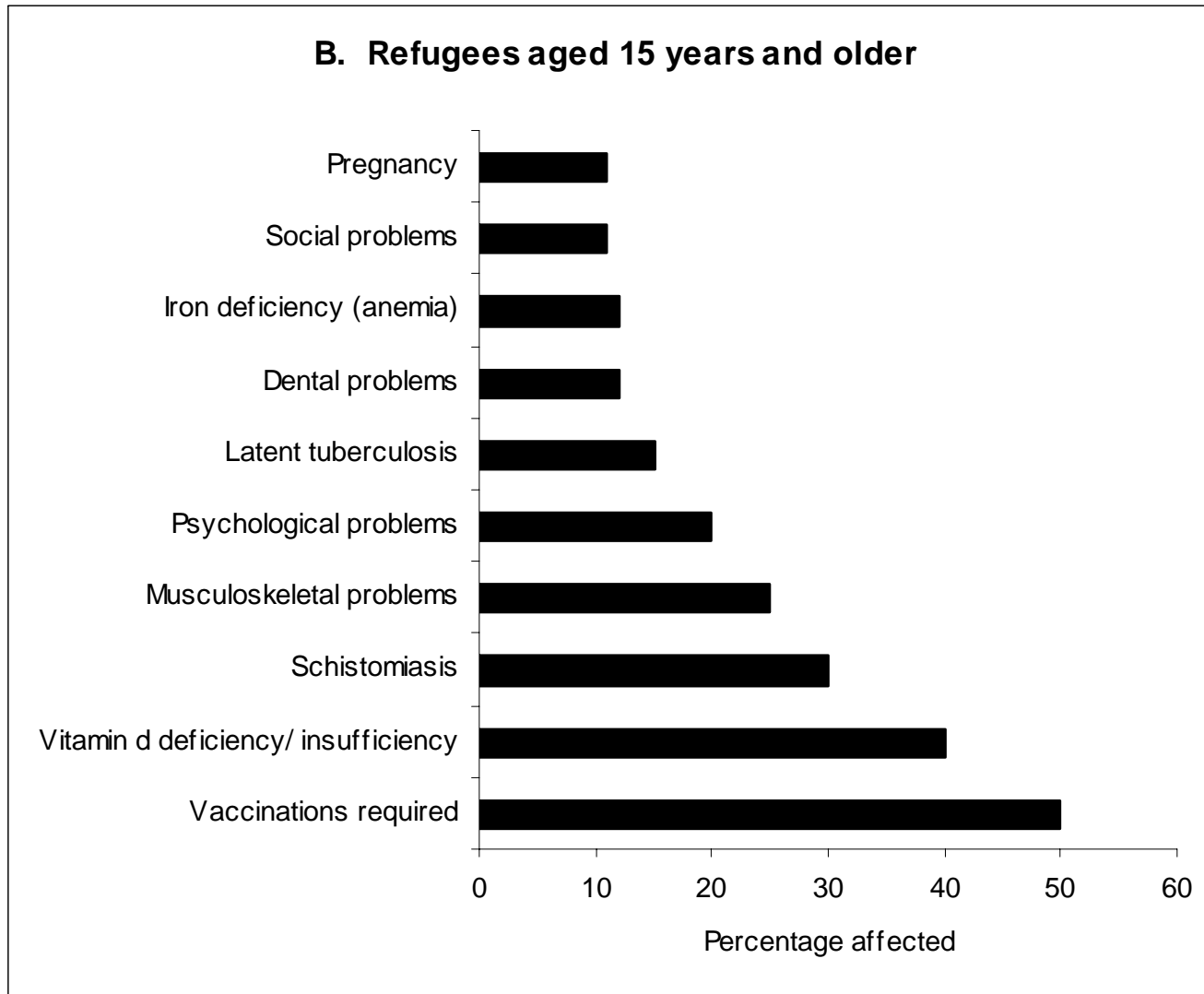
Most common problems identified by GPs in newly arrived African refugees - Melbourne, 2005



Source: Tiong ACD, Patel MS, Gardiner J et al. (2006). Health issues in newly arrived African refugees attending general practice clinics in Melbourne. Medical J Australia, 185(11/12); 602.

● ● ●

Most common problems identified by GPs in newly arrived African refugees - Melbourne, 2005 (ii)





ASID guidelines

- Focus on those ex-Africa

- FBC
- Malaria Ag & films

- Hep B
- Hep C
- HIV
- Schistosomiasis
- Strongyloides
- Syphilis

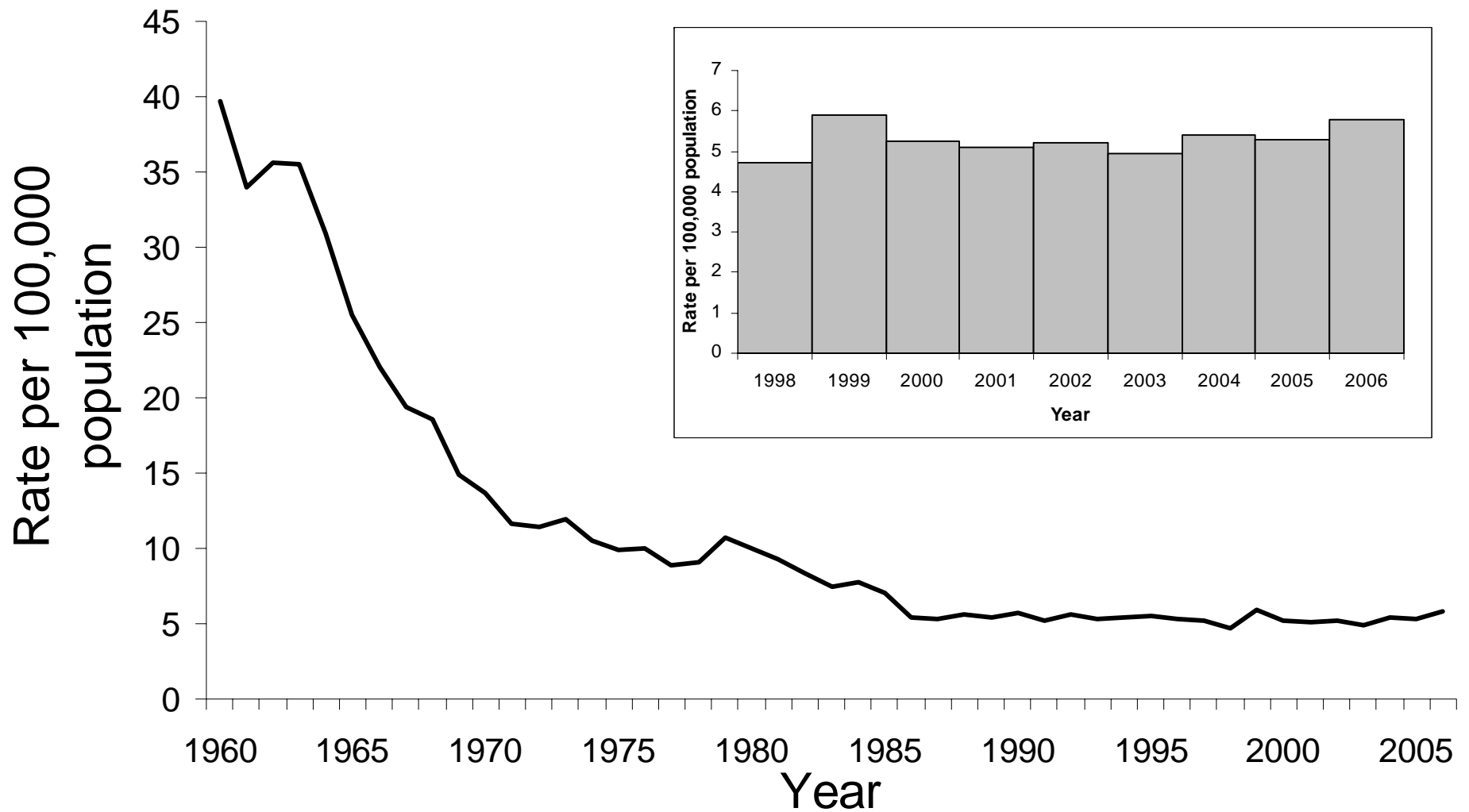
- Chlamydia & gonorrhoea

- Latent TB infection

- Other issues

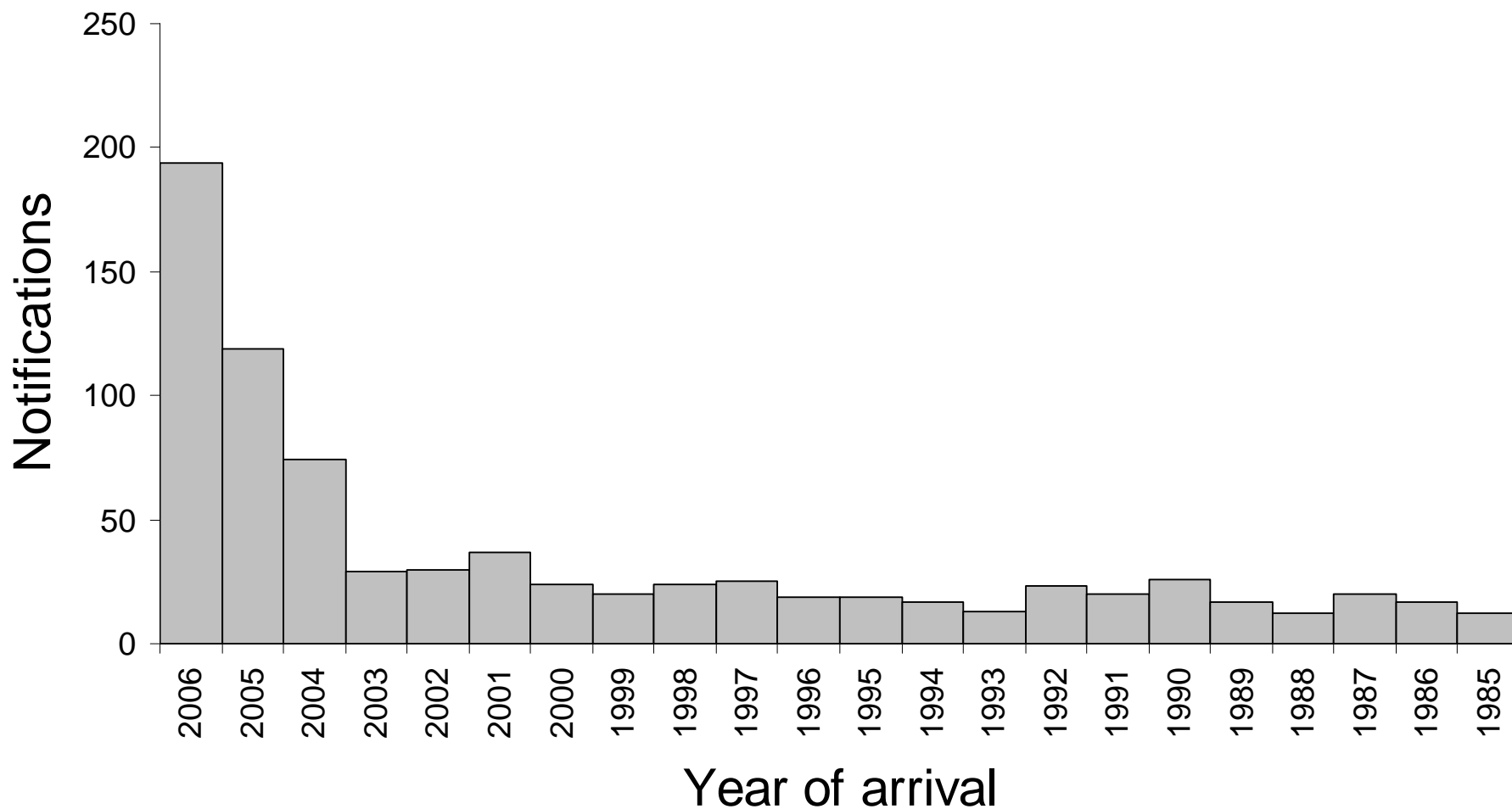
- H.pylori
- Under-immunity

Incidence rates for tuberculosis notifications, Australia, 1960 to 2006





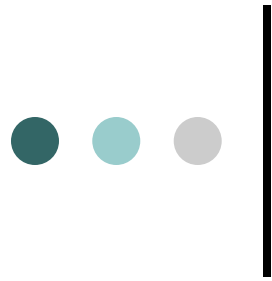
Tuberculosis in the overseas-born population, Australia, 2006, by year of arrival in Australia





High-risk country of origin Notifications of TB in Australia, 2005

Country of birth	Total cases	Rate per 100,000 population
India	141	102
Vietnam	117	66
Philippines	79	61
China	60	31
Indonesia	44	67
Sudan	38	160
PNG	27	103
Somalia	26	479
<i>Australia</i>	149	0.7



Health Undertakings for migrants & refugees

- “A person must be free from active tuberculosis (TB) to meet the health requirement for a visa.”
- Active TB: treated
- Old TB or other abnormality on CXR:
 - Follow up after arrival may be required
 - “Health Undertaking” signed
 - Linked into local TB service



Tuberculosis

- 400 new cases per year in NSW
- 85% overseas born
- “Think TB”
 - sputum & CXR
- Chest Clinic: expertise & free care
- Note stigma, fear of deportation



Hepatitis B

- High prevalence in many regions esp Asia-Pacific
- Surface Ag pos
 - chronic hep B
 - LFTs, monitor
 - vaccinate h/hold & sexual contacts
 - avoid liver insults
- “Isolated core Ab”
 - core Ab pos
 - surface Ab neg
 - ? DNA test



Schistosomiasis

- Serology doesn't inform past vs present disease
- Microscopy of stool or urine for eggs
- Rx Praziquantel (Biltricide*) 40mg/kg in 2 divided doses
- Serology can remain positive for 2 years after treatment



Vitamin D deficiency

○ Prevention

- moderate sun exposure
- adequate dietary intake of Vit D (e.g. breakfast cereals, margarine, sardines) & calcium;
- supplements to pregnant women, and children at risk

○ Treatment

- Cholecalciferol
 - Recommended totals: 100,000-500,000 IU
 - e.g. Ostevit-D*, 5 caps then daily x 3 months
- Sunshine!



Psychological issues in refugees

- Depression
- Anxiety
- PTSD
 - Hyper-arousal
 - Intrusive thoughts
 - Avoidance
- Adjustment disorders
- Child behavioural problems
- Interventions
 - Usual approaches
 - Contextual & cultural considerations
 - Specialised referral services eg STARTTS,
 - TMHC 1800 648 911



Travel Health: “VFRs”

- “Visiting Friends & Relatives” group ~ 25% of Australian travellers
- VFRs
 - are at increased risk of travel-related illnesses:
 - hepatitis A, typhoid, cholera, malaria, TB, dengue
 - are less likely to access pre-travel health advice
 - are less likely to adhere to pre-travel health advice
- Ideally, pre-travel advice should be in culturally familiar environment, utilising bicultural & bilingual staff



Some consultation issues

- Language
 - TIS : 1300 131 450
 - Hands-free phone..
- Cultural beliefs & practices
- Trust
- Unfamiliarity with
 - family doctors & ongoing/preventive care
 - appointments, referral
 - medical procedures
 - confidentiality, consent

Resources for GPs

- Michele Greenwood...
- Local agencies eg STARTTS
- Statewide services
e.g. Refugee Health,
Transcultural Mental Health
- RACGP website:
 - on-line booklets
 - eg Desktop guide
 - Aust Family Physician
articles 2007

