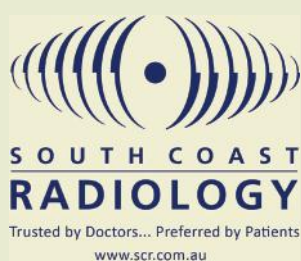


the medical link

Issue 134 | March — April 2021



THE OFFICIAL PUBLICATION
OF THE GOLD COAST MEDICAL ASSOCIATION INC.
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A message from the **GCMA President**

Dear Colleagues,

The GCMA is 'up and running' in 2021! We had our first Thursday evening meeting in February. A packed audience (well, as much as Covid restrictions allow) listened to our three speakers on 'Travel in the Covid-19 era'.

Dr Simon Thatcher gave a medical review of what will be needed for travel including vaccines and other precautions when considering local and international travel. Mr Chris Mills, CEO of Queensland Airports spoke about commercial aviation challenges and the opening of regional 'travel bubbles'. Mr Andy Von Zeppelin spoke about the potential

reopening of cruising and international travel and travel insurance arrangements.

I was pleasantly surprised with the optimism of the speakers about international travel resuming, at least to regional destinations (New Zealand, Pacific Island nations, Singapore, Taiwan, South Korea, Hong Kong for example) in the second half of 2021. We shall see. I guess it will all depend on the rollout of the vaccinations in Australia and international destination countries.

Talking about vaccination, it seems that the vaccination needs of our local specialist medical practitioners and their



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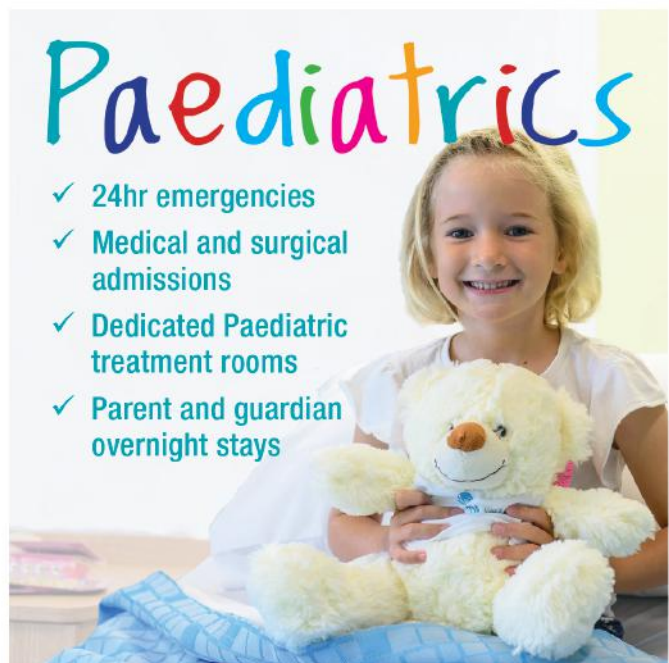
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practice staff, as well as other community health workers not attached to general practices or Queensland Health, has been overlooked, at least for the moment. All these individuals will be classified as '1b' in the vaccination priority list. But advice or guidelines about when these health workers will be vaccinated in the 1b rollout is not clear.

On further investigation, it seems that these individuals will have to pursue several different strategies to get vaccinated against Covid-19. They may approach their general practitioner for vaccination. Or, arrange to visit a respiratory clinic (there are four on the Gold Coast) to be vaccinated. Or, take advantage of the Queensland Health Hospital and Health Service vaccination program focusing on immunising health workers more broadly in the community when this service becomes available. Or, finally, asking for vaccination through local private hospitals they might be affiliated with. I hope as vaccine supplies improve and more locations for vaccination become available that our medical colleagues and their staff can be immunized as soon as possible.

This month (March) is the GCMA Annual General Meeting and Annual Dinner. The meeting will be held on 18 March at Southport Golf Club. The dinner will have a South Pacific Island theme with three speakers talking about health service and medical education partnership opportunities

for the GCMA in the South Pacific. The menu and beverages will have a Pacific Island theme too. And a Polynesian Duo singing traditional and popular Pacific Island songs will entertain us. I look forward to seeing you there.

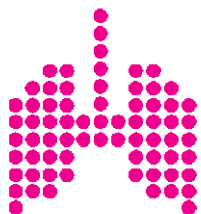
The next meeting in April will cover the health of Indigenous and First Nation Peoples. This dinner meeting will be on Thursday 22 April. Please make a note in your diary to reserve the date. You will be very welcome.

Please remember memberships of the GCMA are now due for renewal. Please go to the GCMA website to renew your membership, or send us your membership subscription by electronic funds transfer (EFT) to our GCMA General Account at our Westpac Ashmore bank branch, BSB 034-230, account number 203845. Make sure you put your identification on the transaction so we can send you a receipt.

Please encourage your medical colleagues to join the GCMA! It is very easy – go to the GCMA website membership form section at www.gcma.org.au/becoming-a-member.

Best wishes,

Professor Philip Morris AM
President GCMA



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Phone (07) 5532 7655
(for all appointments)
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Email: seeleymedical@bigpond.com
Web: www.drgregseeley.com.au

His particular areas of interest are:

- Leukaemia
- Lymphoma
- Myeloma
- Venous Thrombosis
- Pregnancy Associated Haematology

He is the Senior Visiting Medical Officer - Haematologist at the Gold Coast University Hospital thereby providing clinical inpatient/outpatient treatment at both public and private hospitals.

Greg has a dedicated history of providing an efficient, comprehensive and patient focused Clinical Haematology service for Gold Coast and Tweed/Northern Rivers patients & their families.

Please contact Greg by either phone on 0419 667943 or via Medical Objects for any haematology advice.

DR GREG SEELEY

MBBS Hons. (1st Class) (QLD),
FRACP, FRCPA

CLINICAL HAEMATOLOGIST



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Dr Brent McMonagle
MBBS, PhD, FRACS (ORL)

Dr Brent McMonagle is an ENT surgeon on the Gold Coast with sub-specialty training in otology, neurotology, sinus and skullbase surgery. He has strong research and teaching interests at Griffith and Bond Universities.

He has just commenced work on olfactory cell transplants in spinal cord repair, continuing the pioneering work of Prof Alan Mackay-Sim, Australian of the Year 2017, as well as further research in peripheral nerve repair and regeneration.

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Keeping the medical community informed

The Medical Link enriches the Gold Coast medical community by uniting the voice of its doctors.

Here you will find insightful stories and the latest trends in field research conducted abroad, and of course, right here on the Gold Coast. Keep informed of new health services, developments in the medical profession, and general interest items.

We invite you to submit your company updates, new recruits and promotions to info@themedicallink.com.au

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Contents

The official publication of the Gold Coast Medical Association

16 Grace Private Patients to Benefit from Expanded Services

19 Frontline in the Eye World

22 Architectural Design Trends for 2021

29 Australia's First MRI AIR Tech Installed at SCR Smith Street



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Presenters

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Medical Oncologist

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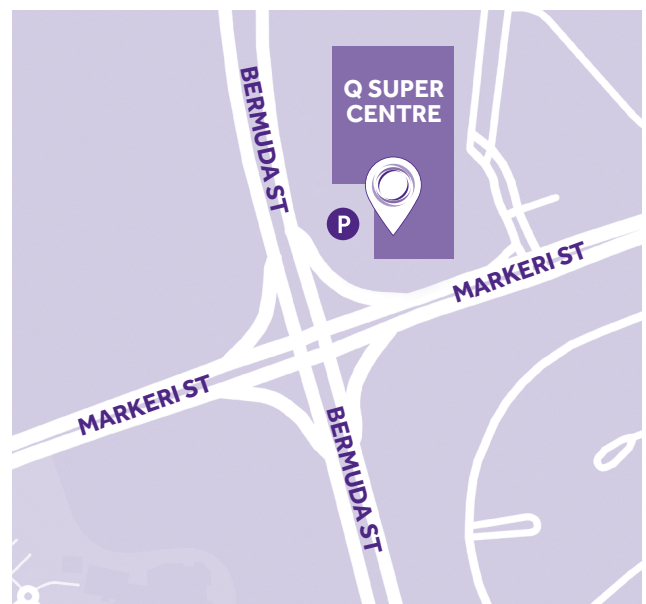
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Dr Robert Bourke Retinal & Cataract Surgeon Macula, Vitreous, Retina & General Ophthalmology

Dr Bourke is one of very few ophthalmologists who manage all complexities of cataract, macular and vitreoretinal eye surgery. After completing his Bachelor of Medicine and Bachelor of Surgery in 1984, Dr Bourke furthered his experience by completing two Vitreoretinal-Macular-Cataract Fellowships at Moorfields Eye Hospital (London) and St Paul's (Liverpool UK) between 1991-95. Dr Bourke is a fellow of RANZCO and has authored several peer-reviewed journal articles and has been a guest lecturer at both national and international conferences. Dr Bourke has served the Gold Coast community since 1996 specialising in complex cataract, macular and vitreoretinal diseases.



Dr Lewis Lam Retinal & Cataract Surgeon Macula, Vitreous, Retina & General Ophthalmology

Dr Lam is a vitreoretinal specialist with a special interest in cataract surgery. While he underwent his vitreoretinal fellowship in NZ, he also undertook a diploma in laser refractive and cataract surgery with the University of Sydney. In addition to managing routine cataracts, he is adept at managing complex surgeries of the globe. In terms of general ophthalmology, he deals with macular degeneration, retinal vascular diseases, diabetes, uveitis, glaucoma, pterygium, trauma, and lid surgeries. Dr Lam also offers **evening clinics on Thursdays** till 8 pm and emergency weekend clinics. He is fluent in English and Mandarin and is happy to consult in either language as needed.



Dr Sharon Morris Cataract, Oculoplastics & General Ophthalmology

Dr Morris is an accomplished and friendly Eye Specialist and Oculoplastic Surgeon. After completing her training in the United Kingdom, she worked as a consultant at Moorfields Eye Hospital, a world leading eye hospital in London before relocating with her family to Australia. She is a Fellow of RANZCO and ANZSOPS and is actively involved in training future ophthalmic surgeons in her part time position at the Gold Coast University Hospital. She has published a number of medical articles, presented internationally and written a book chapter on orbital conditions.

Dr Morris provides comprehensive eye care in General, Cataract, and Oculoplastic eye conditions.



Dr Heather Russell Cataract, Strabismus, General & Paediatric Ophthalmology

Dr Heather Russell is a general ophthalmologist specialising in cataract, minimally invasive glaucoma surgery, double vision and strabismus, and paediatric ophthalmology. She also uses muscle-relaxing injections for blepharospasm, hemifacial spasm, and for non-surgical management of strabismus.

Heather trained in the UK and New Zealand before relocating to Australia to take up a position at GCUH where she continues as Senior Staff Specialist. She is a fellow of both RANZCO and RCOphth(UK). Heather has published widely, is actively involved in training doctors and medical students, and regularly presents both locally and nationally.



Dr Alan Hilton General Ophthalmology, Paediatric Ophthalmology & Strabismus

Dr Hilton has worked in private practice since 1970. He has worked in a number of Hospitals in Queensland and has also been the chairman of Ophthalmology Assessment Tribunal for Q Comp. In conjunction, Alan has been a lecturer and examiner at a number of Universities and Medical Institutions in Australia. As well as General Ophthalmology, Alan has a special interest in paediatric ophthalmology and strabismus.

Dr Hilton is a Fellow of the RANZCO and member of a number of colleges and associations, including the Royal College of Surgeons Edinburgh and Royal Society of Medicine London.

Floppy Eyelid Syndrome

Do you snore or have congestive airway disease and are your eyes gritty, dry and irritable? Do your eyes water? Have you tried a number of drops and treatments but your eyes still feel the same? **Chances are, you have Floppy Eyelid Syndrome.** This condition is very under-recognised, yet is often the cause for eye discomfort, watery eyes, gritty eyes, droopy eyelids, puffy lower eyelids and lid malposition.

Pathophysiology

Floppy eyelid syndrome (FES) is a horizontal loosening of the eyelids, both upper and lower. This usually occurs in people with obstructive sleep apnoea (OSA), but can occur in obesity, other congestive airway diseases, chronic sinus disease, allergic disease, keratoconus and Down's syndrome.

Mechanically, if the eyelids are loose on the horizontal vector then the natural blink tone of the lid is altered and this causes roughness or irritation to the eye surface. I liken it to a "raggedy wind-screen wiper on the car windscreen".

The inside linings of the eyelids become irritated and inflamed and the quality of the eye tear film is reduced. There may be a mild mucous production.

When the eyes are irritated on the surface they often present with sudden bursts of tearing spilling down the cheeks. Sometimes the eyelids are so stretchy that they easily evert/turn inside out! Sometimes they lift open by themselves during the night and the eye gets exposed or rubs on the pillow!

Potential consequences

The eyelids are the first defence to the eye – compromise of this protection and the eye is exposed to abrasions, infections and blindness of the eye. This patient has marked looseness of the upper eyelid tone such that a simple sideways distraction of the lid will reveal the inside lining tarsal conjunctiva. The conjunctiva is reddened and inflamed.



Potential consequences

Patients with floppy eyelid syndrome have loss of elastin in the eyelid but the pathophysiological processes behind this are not fully understood. Over time, chronic obstruction of the airways causes 'back-pressure' around the orbit, orbital fat and eyelid skin. This also causes the lids to puff out or become full and sometimes the lids will have festoons – pockets of fluid that fluctuate with position.

The lid skin stretches and they become heavy. Commonly the change in the tone leads to ptosis (droopy lids), excess skin and lower lid ectropion (lids displaced downwards or outwards).

Treatment

Treatment is multifactorial. Unfortunately, there is not one quick fix to solve the symptoms. Firstly, the underlying cause needs to be assessed for otherwise the disease process will perpetuate. OSA is associated with increased risk of stroke and death, as well as glaucoma. Driving ability can be severely compromised during the day due to daytime somnolence from poor sleep patterns. Treatment depends on the level of severity of the airway obstruction and may simply need weight loss or a change in sleeping position. Sleep studies assess the disease and, if severe, usually a C-PAP or BiPAP breathing device is recommended. The masks and fit around these are very important as a poorly fitting mask will often escape air onto the eye surface damaging the eye further and the pressure of a tight large mask can increase the fluid fill of the eyelid. However, treatment of OSA is crucial to reduce the life-threatening risks.

Secondly, the ocular inflammation and poor tear film needs to be addressed. I usually start patients on a preservative free lubricant 4 times daily with a night-time gel tear substitute as a baseline treatment. This will improve the quality of the base tear film and reduce the sudden reflex hyper-tearing responses. It will also start to reduce the inflammation from the mechanical abrasion effect. If a patient presents with a marked papillary inflammation of the tarsal conjunctiva, I will add in a low dose steroid drop twice daily eg. FML. Some patients with notable eversion of the eyelid at night may wish to tape their right and then left eyelids

closed on alternate nights to prevent exposure or use a gel foam dressing to occlude the eye. Switching sleeping positions to the opposite side from the worst eyelid features is beneficial.

Finally, if the simple conservative and supportive methods of the tear film do not improve the overall symptoms, then surgery should be considered. Surgery is usually staged as all four eyelids usually need to be addressed. The lower and upper lids need horizontal tightening, usually with lateral canthal tendon plication or wedge resections. Often the upper lid will override the lower lid margin due to the laxity until the upper lids get fully corrected too. Once healed, the secondary ptosis or excess skin can be addressed. These surgical techniques usually dramatically improve the comfort and blink of the eye and reduce the ongoing need for eye drops. However, most patients will require some form of ongoing lubrication to the eyes and if the underlying cause goes unchecked the features will reappear with time.

Research is currently exploring whether cross-linking techniques (riboflavin tissue soaks irradiated with UV light) will stiffen the elastin deficient tarsal plates of the eyelid, thereby reversing some of the features of floppy eyelid syndrome and improving the long-term stability of the eyelid.

Restoration of the eyelid function is critical to protect the eye. Treatment of the underlying cause can be life-saving. Look out for the floppy eyelid!

Grace Private Patients to Benefit from Expanded Services

With increasing demand for women's healthcare, Grace Private has welcomed gynaecological oncologist Helen Green to its growing team of obstetricians, gynaecologists and allied health professionals.

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Dr Green specialises in the diagnosis and treatment of women with cancerous or precancerous gynaecological conditions with a specific interest in minimally invasive surgery.

Further rounding out Grace Private's extensive list of women's health services, Dr Green joins Dr Bridget Gilsean and founding specialists Dr Tina Fleming, Dr Tania Widmer and Dr Adriana Olog in consulting from Grace Private's boutique suites at Gold Coast Private Hospital.

Grace Private is the only integrated women's healthcare practice on the Gold Coast offering a full range of gynaecology and obstetric services in one location, including fertility, maternal fetal medicine (MFM), care for high-risk pregnancy, ultrasound, endocrinology and gynaecological oncology.

With a focus on holistic care, Grace patients are supported by the practice's onsite physiotherapists, psychologists, dietitian, midwives, sonographers and nurses.

Dr Fleming said Grace Private was designed by women, for women.

"At Grace, we believe every woman deserves to live her best life," said Dr Fleming.

"Our multi-disciplinary team is driven and passionate in delivering optimal outcomes for all our patients while empowering and supporting every Grace woman on her individual health journey.

"We aim to take the stress out of visiting the doctor by providing excellence in care in a boutique friendly environment.

"Our rooms at Gold Coast Private are welcoming and luxurious and fitted out with the latest equipment and ultrasound scanners."

Dr Fleming said in addition to services provided in Grace Private's rooms, patients also benefited from the state-of-the-art facilities at Gold Coast Private Hospital, its highly skilled team of nurses and its co-location with the Gold Coast University Hospital.

"Gold Coast Private is a world-class hospital with modern amenities and comforts that feel more like a hotel than a hospital," she said.

"Being able to provide so many services under one roof ensures continuity of care and creates familiarity, which is very reassuring for patients.

"Working with the hospital means we can be confident that our patients will receive the best care and service available."

For more information contact:

Grace Private, 14 Hill Street, Southport
Suite 5, Ground Floor, Gold Coast Private Hospital
P: (07) 5594 7632
F: (07) 5574 4812
E: reception@graceprivate.com.au
W: www.graceprivate.com.au



Gynaecological oncologist Dr Helen Green (top right) has joined the all-female team at Grace Private including (from left) Dr Adriana Olog, Dr Tina Fleming, Dr Bridget Gilsean and Dr Tania Widmer.



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Frontline in the Eye World

We have been privileged to have been involved in frontline research in the eye world. Of interest to the readership are the two latest medical innovations emerging:

Dr Frank Howes

MBChB MMed FCS FRCS FRCOphth FRANZCO
Ophthalmic Surgeon / Director Eye & Laser Centre Gold Coast
(07) 5555 0800 | admin@eyeandlasercentre.com.au | www.eyeandlasercentre.com.au

1. Extended Depth of Field Intra-Ocular lens (EDoF IOL) for use in cataract & lens surgery:

Eye & Laser Centre Gold Coast took part in the Global pivotal study for this IOL. The mission in the development of this Lens was to provide to patients - vision as clear as possible, across the focal points that us Human Beings use 99% of the time – clear and unencumbered distance vision (driving, television, movies etc), good and useful intermediate vision (computers, phones, ipads, cooking, eating etc) and reasonable near vision (reading shopping texting knitting sewing etc), all with very little assistance from spectacles.

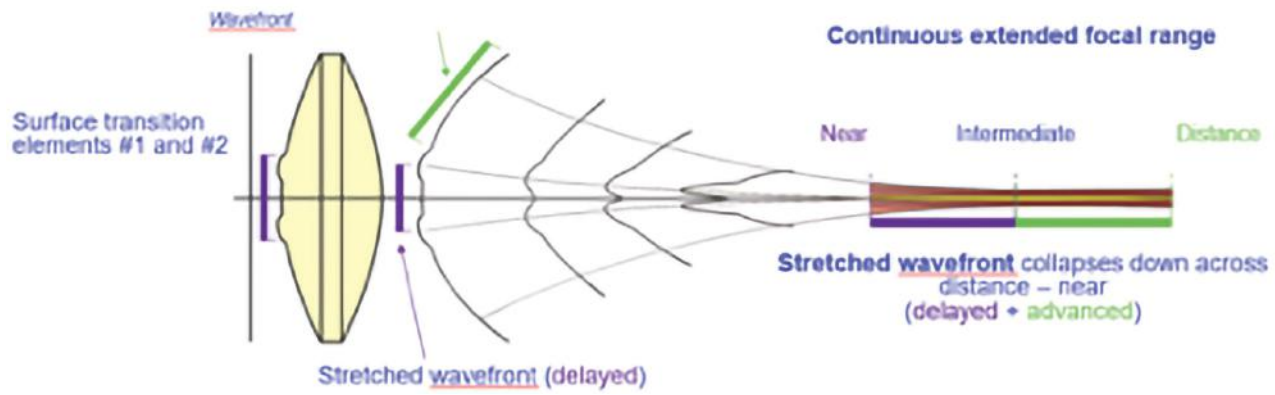
While we have had similar technology for some time, it did not come without some compromise like halos, glare or starburst to produce the multifocal effect. These effects came from what is called in the majority of the lenses available – “diffractive optics” (which is actually an array of circular prism type ridges concentrically placed on an IOL, of different powers to produce the multifocal effect). Most people got used to these side effects and learnt to use the benefits while ignoring the side effects (habituation). The research mission was to discover a technology which could produce a similar multifocal effect but without the side effects discussed – enter EDoF technology!

We were all taught at school that light travels in straight lines, could be bent by light landing obliquely on a clear medium of different density (water glass etc) but would continue in straight lines thereafter and be directed into a single focal point. We now

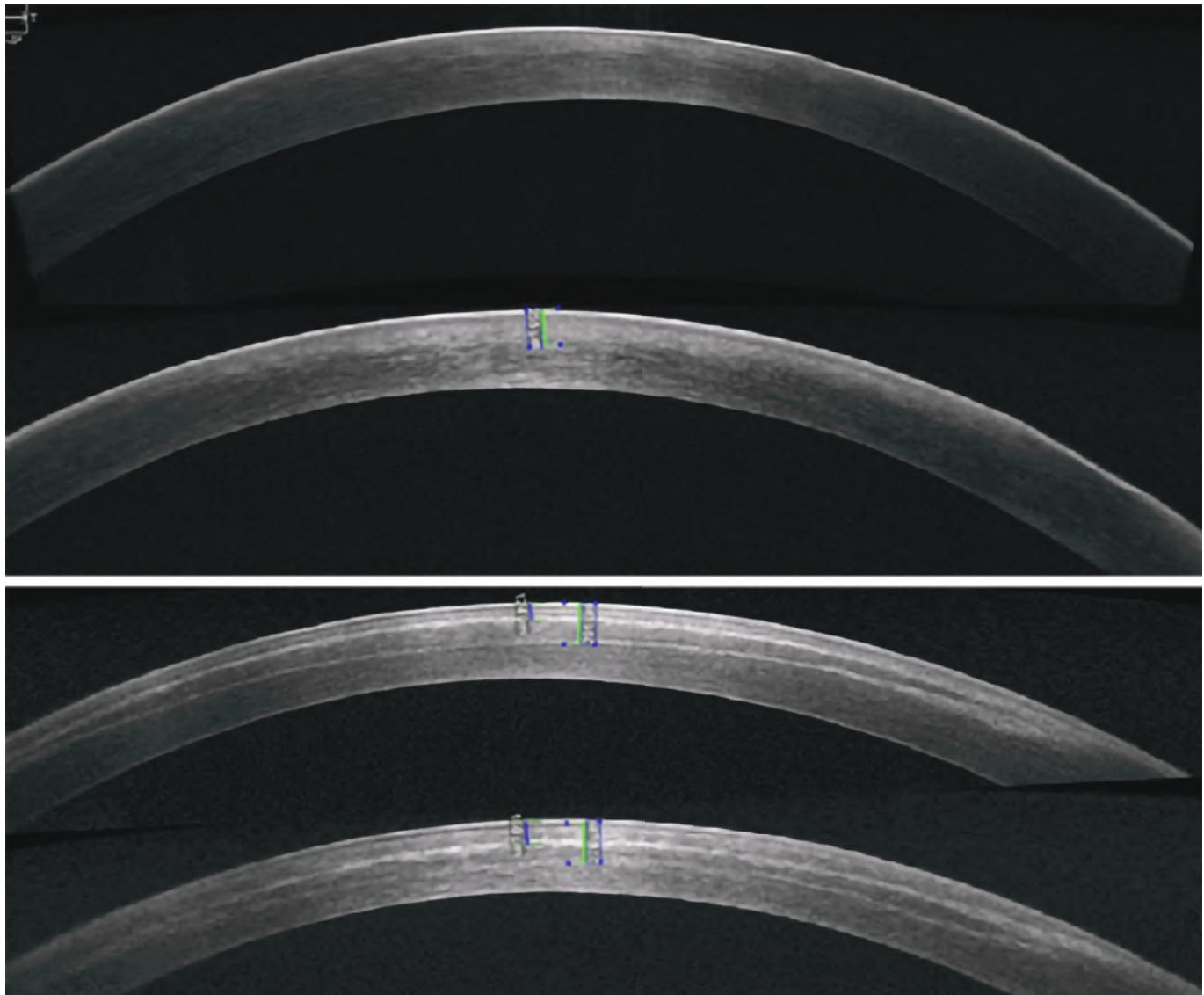
know that we can manipulate light so that focal points can be “tube like” extending a focal point into what we now call EDoF - Extended Depth of Focus (or Field) and this is done by “wavefront shaping” (all light, regular and otherwise can be described in wavefront form – beyond the scope of discussion in this article). By employing this phenomenon we can provide a distance, intermediate and near focus for people who have high refractive error or cataracts, by removing the lens of the eye and replacing it with one of these IOLs without the necessity of the side effect discussed above. Some Caveats apply but this new technology is nevertheless very exciting.

2. Pulsed Accelerated O2 boosted Epithelium On Corneal Collagen Crosslinking

The other area of exciting research with positive outcome is the ability to stabilise and in some instances improve the vision in people suffering from progressive keratoconus. Keratoconus is principally a disease of the young (12yrs to 30yrs of age in the majority but controllable if prevented from getting worse by early intervention). The treatment is called Corneal Collagen Crosslinking (CXL). This treatment has matured over the last 10 years from the very painful, slow to recover Epithelium Off treatment, through a number of iterations, to the latest form of treatment with the long name above. A much safer, much less painful, very effective treatment, stabilizing the corneal changes and indeed in some instances improving the ectatic corneal shape induced by the keratoconus, preserving precious vision!



Animated ray tracing of IOL and Wavefront shaped light emerging from IOL — producing an Extended Depth of Focus.



Anterior segment high definition Optical Coherence Tomography (OCT) – increasing histological demarcation lines within a human cornea from Day 0 to postop Day 30 demonstrating crosslinking, strengthening the corneal stroma of a patient with keratoconus treated with oxygen boosted epithelium on CXL, all while maintaining corneal transparency.

Theranostics is now available at GenesisCare Gold Coast



Theranostics is an innovative, personalised approach to cancer medicine that brings together therapy and diagnostics. It allows the doctor to combine a fast and accurate diagnosis with precisely targeted therapy.

Most evidence to date is in metastatic castrate resistant prostate cancer and advanced neuroendocrine tumours (NETs).

Theranostics is not suitable for all patients but may be an option in metastatic disease unresponsive to or unsuitable for conventional therapies.

How does it work in prostate cancer?

Treatment involves the injection of a radioactive drug which destroys prostate cancer cells throughout the body by delivering radiation in a highly targeted way. The radioactive drug used to treat prostate cancer is specifically designed to bond to PSMA (prostate specific membrane antigen) protein on prostate cancer cells. Most of the radioactivity that does not bind to tumour cells is rapidly excreted from the body following the procedure.

This targeting maximises radiation dose to the cancer while minimising chance of injury to other tissues. The presence of treatable PSMA proteins and cancer cells is confirmed using a PSMA PET/CT scan prior to treatment.

Access for patients is via the TGA Special Access Scheme.

Theranostics is provided to patients on the Gold Coast through a partnership between GenesisCare, Australia's largest provider of oncology services and South Coast Radiology, the leading imaging provider in South East Queensland.



Dr David Macfarlane
Nuclear Medicine Physician

**John Flynn Private Hospital,
Nuclear Medicine & Therapy Cent**
42 Inland Drive, Tugun QLD 4224

Contact us

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Architectural Design Trends for 2021

Architectural trends tend to evolve relatively slowly. There is no seismic shift in design styling that suddenly occurs when the clock ticks past midnight on 31st December every year. Unless of course there is a major disruptive global event that significantly affects our lives in the way that COVID-19 has done. Consequently, in addition to existing trends already developing, there will be definite new design influences emerging in 2021 as a result of this pandemic.

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Architectural Design Styles

The desire for more space in our homes because of this unexpected home isolation is epitomised by the trend towards Industrial style homes. Familiar to most of us from watching movies featuring trendy converted New York loft apartments, this style offers the benefits of large voluminous open plan spaces with excellent natural light and ventilation.

Whilst in the past many old warehouses in former industrial areas of our inner cities have been adapted for residential use, this style is now being replicated in more flexible and intimate ways in new buildings. Characterised by sharp building lines and flat roofs with expansive panoramic windows, the finishes often incorporate rustic natural building materials.

Mid Century modernist styling also continues to be popular. It shares similar design traits to industrial styling, in particular the use of large expanses of floor to ceiling glass and rectilinear building forms.

A modern twist is the use of glass walls surrounding “fishbowl” living spaces seeming to effortlessly support a larger overhanging second storey above. Reflecting a readiness to adopt more adventurous engineering principles in our homes, this design concept has the added benefits of providing improved protection from sun and weather penetration into the interior of the home.

In distinct contrast to these industrial and modernist design principles, softer organic curves are also being adopted in both plan form and elevational treatments. Simple unadorned neo classical arches are becoming feature façade elements to entry porticos and colonnaded verandas, often painted white evoking a return to Mediterranean styling and influences.

Biophilia also continues to come to the fore.

Describing our innate appreciation of nature, the large expanses of glass utilised in both industrial and modernist building styles blur the distinction between internal spaces and external gardens. This allows us to connect more directly with the natural environment, a welcome relief after our recent experiences of extended confinement within solid walls.

Planters are also being applied to building facades, supporting lush greenery at all building levels, no longer confined to just ground level gardens.

Internal gardens, whether incorporated in a courtyard or placed vertically on walls within rooms continue this trend.

Materials & Finishes

Natural materials like timber and stone are continuing to be extremely popular.

In another nod to the modernist design style, many new houses are now incorporating feature internal or external walls clad in random “crazy pave” stone.

Bricks are also having a renaissance, especially in multi coloured combinations, or utilising rough recycled product for a rustic effect.

Often numerous building materials and finishes are combined in an eclectic blend defined as “boho chic”, a style drawing reference from various bohemian and hippie influences.

An example of maximalism, this style is replacing the previously popular minimalism.

Boho is currently having a resurgence since it’s heyday in the early “noughties” and is heavily driven by the photogenic



opportunities it offers for posting to social media sites like Instagram and Pinterest.

COVID-19 has also made us much more conscious of the impact materials and internal finishes can have on hygiene. Some materials like stainless steel have been shown to harbour the virus for extended periods, whilst other antimicrobial materials such as metallic copper will kill the bacteria. Selecting kitchen finishes in 2021 will involve making decisions beyond a simple choice between laminate and stone.

Colour

Simple external colour palettes incorporating predominantly black (dark charcoal greys) or white are being used in conjunction with natural building materials.

Internal colour trends always vary considerably from year to year, and often repeat in cycles. They are influenced by numerous sources

including trend setting companies like Pantone who nominate their preferred colour or colour combination every year.

This year's colours are a different take on a popular colour combination from the 1980's, pairing grey with yellow, rather than the previous salmon pink and grey.

Interior Planning

The biggest influence the COVID-19 pandemic has had on design trends is in the future layout of our homes.

Suddenly spaces that were only ever intended for limited afterwork use were being used for extended periods every day, and they often proved unsuitable for the new functions expected of them.

Consequently, multipurpose spaces will become much more important in new home designs. Additional areas will also be required for certain functions previously undertaken in shared public spaces, and other rooms will take on either increased or lesser significance because of the ongoing changes to our lifestyles.



Passive Design

The importance of sustainability in our daily lives has been reinforced during this pandemic. Passive design principles are no longer considered solely the preserve of “greenies” who choose to live in Eco-cabins in the bush, they are being adopted on a large scale by more homeowners who appreciate the cost savings and environmental benefits that passive design offers.

A passive house considers many design factors including careful site selection and building orientation to maximise natural lighting and ventilation. Designs also incorporate practical material specifications and construction techniques that reduce heat load/loss and create a comfortable living environment - even more important when spending extra time living in our homes.

Smart Home Technologies

Until recently, many smart home technologies were primarily adopted as time saving devices to reduce our daily household chores, or to control the quality of the living environment by monitoring temperature, light, air quality and security. Post COVID-19, touchless technologies will become integrated into more building components, from sensor operated taps to audio-controlled devices. Home automation will begin to play a much larger role in the design of homes in 2021 and beyond.

To find out more about how you can incorporate any of these latest design trends into your next project, contact us for an obligation free meeting.

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Robina Private Hospital welcomes two new consultant psychiatrists to the team

Robina Private Hospital is a 90-bed private hospital with three specialist wards along with consultancy, outpatient, mental health day programs, day surgery general medical and rehabilitation services. It is the only private hospital in the Robina Health Precinct and within close proximity to the precinct's existing, extensive public services.

Robina Private offers 80 mental health beds and services which includes:

- Older persons mental health
- Adult mental health
- Adolescent and young adult mental health
- Eating disorders

– Mood disorders

- A private Repetitive Transcranial Magnetic Stimulation (rTMS) to enable higher acuity mental health treatment.

For further information or to arrange a referral, please contact Robina Private Hospital on 1800 707 581.

MEET OUR TWO NEW CONSULTANT PSYCHIATRISTS



Dr Zoran Radovic is a consultant psychiatrist in private practice at Robina Private Hospital.

Born in Serbia, Dr Radovic finished school and completed his specialist training in psychiatry in 1992. Following a successful career in a renowned state hospital in Serbia, he decided to move internationally and practice for a number of years in Cyprus and Europe.

In 2004 Dr Radovic relocated to Australia where he worked in private practice on the Sunshine Coast before moving to Victoria in 2015. During this time he pursued a career in public mental health, leading acute interventions clinical teams.

In 2020, Dr Radovic was promoted into the role of clinical director of mental health at the Warrnambool Mental Health Service before commencing at Robina Private Hospital.

Dr Radovic specialises in general adult psychiatry, PTSD, mood disorders, psychotherapy and ECT. He also holds a special interest in VVA and DVA consumers with PTSD.

When he isn't practicing psychiatry, Dr Radovic's personal interests extend to sports, tennis and traveling.



Dr Nayan Soni B.PHTY, MBBS, FRANZCP, is a holistic consultant psychiatrist in private practice at Robina Private Hospital.

After developing his health science background from physiotherapy, Dr Soni completed his medical degree at Griffith University on the Gold Coast. Dr Soni's curiosity of human expression provided the ideal foundation for psychiatric specialisation.

Since 2011, Dr Soni has trained and worked in a variety of medical and psychiatric settings across Australia. He aims to inspire hope and a growth-mindset in patients and their dear ones to achieve optimal recovery and quality of life.

Dr Soni's special interests are perinatal psychiatry that includes the family's mental health, neuro-stimulation, and integrative health and wellness to consolidate recovery and prevent relapse.

He is presently completing further training in addiction psychiatry, and is involved in teaching and research.

To arrange an appointment or referral with Dr Radovic or Dr Soni, please contact Robina Private Hospital's Admission and Assessment team by phoning 1800 707 581.

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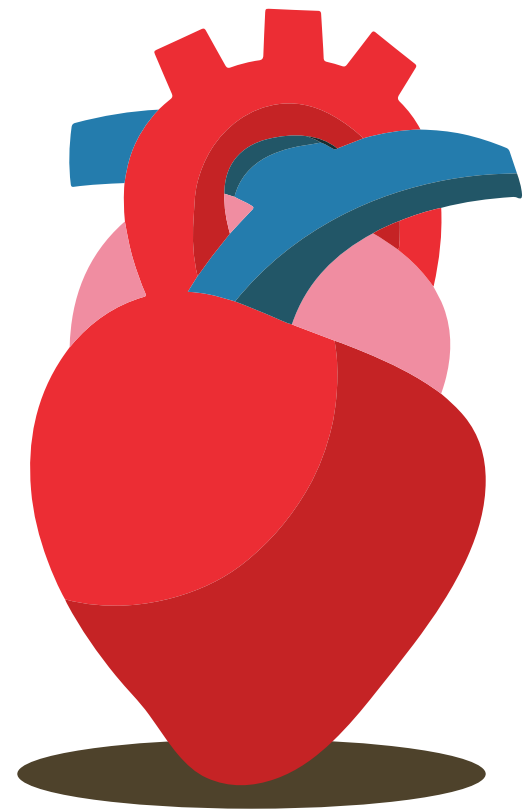


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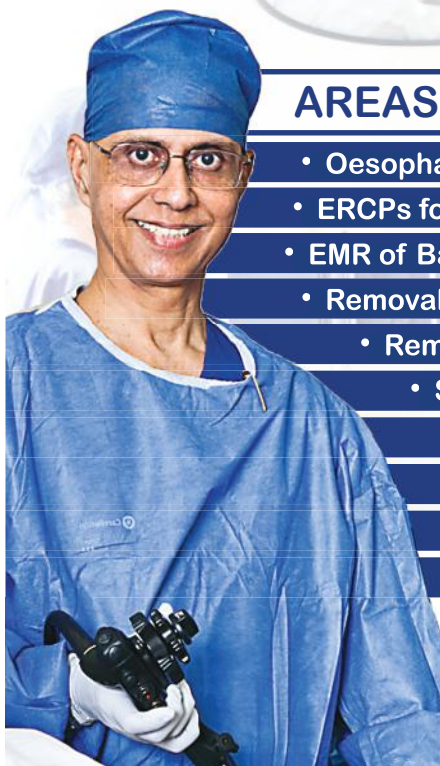
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Until now, there has been an inherent balance in MRI between image quality vs. length of scan time. With the new MRI AIR Tech, clinicians have perfect harmony between quality and duration.

What started with an engineering breakthrough has led to a chain of innovation which has transformed the entire MRI experience.

MRI AIR Tech will soon become the gold standard for diagnostic MRI.

MRI AIR Tech is now servicing patients at SCR Smith Street.

This installation marks the 5th addition to South Coast Radiology's MRI fleet, expanding access to MRI services on the Tweed and Gold Coast. Our dedicated MRI bookings team will schedule your MRI at the most appropriate location relative to your referred imaging requirements.

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From little things ... how one practice is changing the face of women's healthcare on the Gold Coast

Gone are the days of 'just seeing a doctor',
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That was the philosophy of three specialists who dreamed of creating a contemporary, boutique women's health practice that catered for women of all ages.

Six years later, Grace Private is one of the leading women's health medical practices on the Gold Coast offering a full range of obstetrics, gynaecology, fertility and ultrasound services, all under one roof.

Grace founding directors - Dr Tina Fleming, Dr Tania Widmer and Dr Adriana Olog – designed Grace based on the high level of healthcare they would expect for themselves.

"Grace Private brings a fresh approach to caring for women on the Gold Coast," said **Dr Tina Fleming**. "We believe in the principle of bringing care to the woman, rather than the woman to the care so our services encompass all the possible realms of women's health, in one location.

"It's about providing the highest quality of specialist care in a safe and nurturing environment.

"It's an honour and a privilege when our Grace patients entrust us with their health and surgical care."



Dr Tania Widmer



Designed by women for women, the Grace Private team also includes physiotherapists, psychologists, dieticians, midwives, nurses and an endocrinologist to further support the holistic care of each patient.



Dr Tania Widmer said a collaborative multi-disciplinary approach was central to the Grace philosophy.

"At Grace we believe every woman deserves to live her best life," said **Dr Widmer**.



Dr Tina Fleming (right) with Grace baby London and patient Sam.



Grace founding specialists Dr Tina Fleming, Dr Adriana Olog and Dr Tania Widmer.

“Grace started almost as an ‘on the fly’ idea many years ago when we were working at the public hospital. We always had a vision of working in a group practice with the three of us aligned philosophically to create something very unique that didn’t exist on the Gold Coast.

“I love being able to collaborate with my colleagues and share ideas. Being able to debrief, give and receive advice and support from each other is very fulfilling professionally and certainly translates directly into improved care for our families.

“ Grace Private is also home to the Gold Coast’s only Maternal Fetal Medicine Specialist who is also a practicing obstetrician, **Dr Adriana Olog**.

“Maternal Fetal Medicine is a very specific, highly specialised area of pregnancy care, ” said Dr Olog.



Dr Adriana Olog

“We deal with the rare complexities of pregnancies where there may be concerns with the baby or mum.

“Our focus is on identifying, diagnosis, further investigation, counselling and support as part of their pregnancy management.

“Most importantly, these services are provided onsite at Grace which means any issues can be looked into immediately so parents leave with confidence and certainty about the next steps in their pregnancy care.

“Having a multidisciplinary team including tertiary level sonographers and psychologists is vital to ensuring the best outcomes for our more complex pregnancies.”

Grace Private is conveniently located at the Gold Coast Private Hospital, Southport offering:

- ◆ Fertility and obstetrics including Maternal Fetal Medicine and care for high-risk pregnancies.
- ◆ Gynaecology including minimally invasive and complex surgeries, endometriosis and PCOS.
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