



Speech by

## Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

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Hansard 31 May 2000

### NEEDLE EXCHANGE PROGRAMS

**Miss SIMPSON** (Maroochydore—NPA) (6.48 p.m.): The Queensland National/Liberal coalition is calling on the State Government to follow the lead of the New South Wales Government to help provide free syringes to insulin-dependent diabetics. I applaud the New South Wales move and believe that it sets an example for this State Government to follow to help ease the burden of people with this chronic illness. Despite the subsidies available to insulin-dependent diabetics, there is still a considerable cost burden, particularly for those who may have to use up to six needles per day. As has been mentioned by previous speakers, the costs also associated with appropriate disposal and the use of sharps containers.

Currently, the Commonwealth Government subsidises the treatment for diabetic patients to an amount in excess of \$180m per year for insulin, diagnostic strips and syringes and pen needles. Needles and syringes under the federally funded National Diabetic Services Scheme cost registered diabetic concession holders \$5 per hundred syringes or, for non-concession holders, \$8 per hundred. As for insulin, which is listed on the pharmaceutical benefits scheme, a concession holder pays \$3.30 for a prescription and a non-concession holder pays \$20.60. The actual cost for each prescription is between \$100 and \$250, the balance of which is paid for by the Federal Government.

In New South Wales, the Carr Labor Government announced earlier this month that it would pick up the tab for the shortfall in the needle subsidy so that needles would be available completely free of charge for diabetics for the first time. The Queensland State coalition supports the move for more funding from both the Federal and State Governments to assist diabetics, be it through equipment to administer medicine or in other treatments, in early diagnosis and research, or in health promotion and education. Health promotion is also a fundamental part of the National Diabetes Strategy which was developed and launched in August 1999 by all Health Ministers.

This motion tonight addresses the issues of insulin-dependent diabetics, or type 1 diabetics, of whom there are currently about 22,000 registered in Queensland. The known registered non-insulin-dependent, or type 2 diabetics, in Queensland number about 43,000. However, we know that there are many people who are still yet to be registered because they are yet to be diagnosed. That is why proper promotion and education is so important.

Diabetes is one of Australia's deadliest diseases—in fact, it is our sixth deadliest killer. It disproportionately affects indigenous Australians. Indigenous Australians suffer the fourth highest rate of type 2 diabetes in the world, and available data suggests that the overall prevalence rate among adults is between 10% and 30%—that is, at least two to four times that of non-indigenous Australians.

Diabetes is a serious condition. When undiagnosed and untreated, diabetes can lead not only to a substantially increased risk of blindness but also to heart disease, stroke, kidney failure and diabetic foot disease, which in turn can lead to gangrene and amputation if not properly managed. If diabetes is detected and treated early these complications can be prevented.

I commend to the House the Federal Health Department web site which outlines the National Diabetes Strategy for Australia and key initiatives which are being implemented in recognition of diabetes being declared a national health priority area in 1996. The address is [www.health.gov.au/hsdd/nhpq/diabetes/keyinit.htm](http://www.health.gov.au/hsdd/nhpq/diabetes/keyinit.htm).

It is inappropriate for insulin-dependent diabetics to be told that they can obtain free needles from a needle exchange. It is inappropriate because these people—some of them have children who need to access needles to appropriately administer insulin— quite rightly say that it is not an environment into which they want to take their children. They do not choose to have this chronic disease.

Whilst we want to assist people with chronic drug habits to get off drugs and ensure that they do not contract contagious diseases, there are needle exchange programs which provide clean needles. It is hoped that this program will prevent contagious diseases being spread in the community.

It is an inequity that insulin-dependent diabetics do not have access to free needles. I applaud the New South Wales move. I believe that there are more things that can be done at the Federal and State level. Already \$180m is being spent by the Federal Government in helping to subsidise these treatments.

Time expired.

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