

Media Release

Public Health Association of Australia

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Eliminating rheumatic heart disease is within our grasp

The biennial [Communicable Diseases Conference being held in Canberra](#) has heard that rheumatic heart disease (RHD) continues to be the clearest example of the disparity in health outcomes between Aboriginal and Torres Strait Islander people and non-Indigenous Australians.

“The fact RHD persists in a country as wealthy as Australia is a national shame,” said Pat Turner, CEO of the National Aboriginal Community Controlled Health Organisation (NACCHO).

RHD is the most important cause of acquired cardiovascular disease in children and young adults. Virtually non-existent in most of Australia, it predominantly affects Aboriginal communities.

The average age of death for people with RHD, a chronic disease, is 41. It starts with a skin sore or sore throat. There is no cure but sufferers have to have painful monthly penicillin injections for at least ten years.

“Without urgent prevention, another 10,000 Aboriginal children will develop the disease before 2031. We cannot let it happen... Community driven work is key. Our communities are rising and demanding support,” Ms Turner said.

The conference being run by the Public Health Association of Australia (PHAA) got a sneak preview on an end game strategy to rid Australia of RHD - a detailed report that is due for formal release early next year.

The blueprint identifies primordial prevention, primary prevention like vaccines, secondary prevention and tertiary care – medical and surgical care for severe cases. It has five priority areas:

- **Indigenous Leadership;** bringing together existing and new agencies to offer technical support, training and education and monitoring data, as well as delivering funding
- **Community control;** resourcing place-based and co-designed solutions that empower Aboriginal and Torres Strait Islander communities to deliver services
- **Environmental health and infrastructure determinants;** improve environmental health and reducing the negative impacts of overcrowding so disease transmission is less likely
- **Preventing skin sores, scabies and sore throats** which are the reasons why rheumatic fever is prevalent
- **Guaranteeing best possible care for people living with RHD**

“It’s a strategy that relies on partnerships and empowering Indigenous people,” said Professor Jonathan Carapetis, Executive Director, Telethon Kids Institute

“The time has never been better for us to control this disease.”

Researchers are looking at new formulations so that sufferers don’t have to have monthly penicillin injections for years. “An implant is being worked on,” Professor Carapetis said.

“For 25 years we’ve all been looking at silver bullets and not seeing improvements but we should have hope as we now pull together all we know especially the environmental determinants.”

“We should be able to reduce RHD prevalence by 70 percent,” Professor Carapetis said.

“It’s complex but not overwhelming. It involves multiple sectors and a comprehensive response.”

“The Australian Government is funding the development of a Strep A vaccine. There is progress in the field as we move towards a trial. But that won’t result in a vaccine for our kids for a decade.”

Professor Carapetis and Pat Turner shared the podium at the PHAA’s Communicable Diseases Control Conference to deliver the Aileen Joy Plant Oration.

Pat Turner told delegates, “There is no simple fix. But we got involved because it is hard.”

“We are fighting to prevent the needless suffering and for people already living with the disease.”

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For further information/to arrange an interview:

Toni Hassan: 0426 207 726 thassan@phaa.net.au