

# MONDAY CONVERSATION...

PHOTO: LUKE HEMER

## IS THERE A PAEDIATRICIAN IN THE HOUSE?

LUCAS SPEED HAS JUST MOVED INTO ECHUCA-MOAMA AND HUNG OUT HIS SHINGLE. ONE NOT SEEN VERY OFTEN IN THESE PARTS OF THE WORLD. IT READS 'PAEDIATRICIAN'. CHARMAYNE ALLISON CAUGHT UP WITH THE SPECIALIST WHOSE APPOINTMENT BOOKS ARE FILLING UP AT A DIZZYING PACE AND ASKED WHAT BROUGHT HIM TO TOWN AND WHAT WE CAN EXPECT

“The staff here already manages extremely well with the children under their care, we really need more doctors and nurses with paediatric experience, and we also need a dedicated ward”

PAEDIATRICIAN Lucas Speed is standing in the new nursery at Echuca Regional Health, dreaming of the future.

The doctor's elbow is propped on the edge of a baby-sized hospital bed, one of just two in the room, his face illuminated by the fluorescent theatre lights.

But as he speaks, it's clear his mind is already somewhere off in the future; he's seeing what will be, should be, more than what is in front of him right now.

Not the two tiny beds we have, but rows and rows of them.

Not just a nursery, but an entire ward.

And not just him – but a whole staff of paediatric specialists; doctors, nurses, admin, the lot, providing around-the-clock specialist care and treatment for children of all ages.

Above all, he's dreaming of a day when Echuca-Moama children will no longer have to

make the arduous trek to Shepparton or Bendigo (or Melbourne or Sydney) hospitals for lifesaving treatment.

When help will be – literally – just a few minutes and just a few streets away.

It's only been two weeks since Lucas took on his new role as ERH's first on-call paediatrician and that's enough to light up the eyes of just about every parent in the twin towns.

It also lights his up, especially when he starts talking about the future.

“I already have a three-month waitlist for outpatient clinics, so there's a huge demand for paediatric care and that's something the community recognises as a great need,” he said.

“I've started an audit on transfers out of the hospital after-hours because I feel there are a lot of acutely unwell children who would benefit from more paediatric input locally when they present to the emergency department.

“The staff here already manages extremely well with the children under their care, we really need more doctors and nurses with paediatric experience, and we also need a dedicated ward.”

This doctor's passion for paediatrics began in 1992, when he first started studying medicine at Melbourne University.

After graduation he immediately relocated to Sydney, completing most of his paediatric training at Sydney Children's Hospital, staying on as a consultant for several years.

During which he evolved into an alternating private practice – partly in Sydney and as a locum in regional areas; a journey of experience and discovery that took him from Mt Isa and Port Hedland to Bendigo and, eventually, Echuca-Moama.

As a paediatrician, Lucas has the awesome responsibility of holding children's lives in his hands.

From tiny prem babies to toddlers caught in horrific car crashes; of breaking the devastating news to teenagers they have cancer.

He's seen it all, heard it all, delivered it all to the ears of heartbroken and overjoyed parents and families.

There's no doubt paediatrics can be challenging, draining, even confronting, but for Lucas that is all outweighed by the good moments; that first breath of life, the recovery from injury or illness, catching something early enough to save a child to just patching up the normal wear and tear of toddlers to, occasionally, early teens.

“Paediatrics can be; is, very rewarding because in most cases children present with reversible illnesses you can actually treat and fix,” he said.

“When I was working at the intensive care of Sydney Children's there were two kids who were literally on death's door with severe cardiac conditions.

“But by the last day of my term I saw them in perfect health, kicking a ball around in the front foyer.

“Within a few weeks those kids had gone from touch and go in terms of their prognosis and their survival.

“So there's a real, palpable reward at being able to see children so much better because of the paediatric care they've received.”

Ticks like that in the win column certainly put a spring in your step but leaving the big hospital with its big budget and staff for stints in the bush would prove nothing short of an epiphany for Lucas.

When he agreed to a locum position in Queensland's mining towns he saw there was places that really needed paediatric support, any support.

In short, specialist care wasn't just a long drive or flight away; it seemed lost in the realm of the

most unlikely.

These were towns and communities desperate for specialist care.

“Australia-wide, there is a relative shortage of paediatric services in regional areas,” he said.

“And yet children are more susceptible to infections and other conditions that can cause a change in their status.

“So that's where having timely input and recognising risk factors early makes a huge difference.

“By having paediatric input early you can initiate more timely transfers to a big hospital for sub-specialty input and avoid children representing multiple times to the emergency department and ending up even sicker.”

Already, for many fortunate regional children, Lucas' keen specialist eye has been the difference between life and death.

“There was a 13-year-old girl I saw in Mt

Isa who probably would have died if she didn't receive aggressive asthma treatment,” he recalled. “If we hadn't transferred her quickly and I hadn't been there to maximise her therapies, she could have been stuck in a small regional hospital and may not have survived.

“I'm always encouraging doctors in regional areas to be more aggressive with asthma management because childhood asthma can be very episodic and can, so suddenly, become worse.”

Now, Lucas is bringing that priceless awareness to the twin towns.

Another address he agreed was also in desperate need of paediatric care.

“Department of Health data in 2016 showed the average number of paediatricians per children in the population was about one to every 2000 kids,” he said.

“There's a population of approximately 50,000

in our catchment area that may present to ERH, and usually about a fifth to a quarter of those are children.

“Which means there's probably somewhere around 10,000 children in the wider catchment that could potentially need help at Echuca.

“Paediatrics is very much underrepresented and underserved in the Riverine area.

“But thankfully improvements are already in the long-term plan for the hospital.

“I know I have been highly impressed by the commitment of the local executive to improve the service for paediatrics in Echuca.”

For Echuca-Moama to have a fulltime resident paediatrician is even more certain to impress the good doctor's new catchment area.