

## Conclusion

Medical and dental practitioners need to be aware of the interrelationship between poorly controlled or undiagnosed diabetes mellitus and chronic gingivitis and periodontitis. This is particularly important because of the rising prevalence of diabetes in the Australian community.

## References

1. Soskolne WA, Klinger A. The relationship between periodontal diseases and diabetes: an overview. *Ann Periodontol* 2001;6:91-8.
2. Bjelland S, Bray P, Gupta N, Hirscht R. Dentists, diabetes and periodontitis. *Aust Dent J* 2002;47:202-7.
3. Mealy B. Position paper. Diabetes and periodontal diseases. *J Periodontol* 2000;71:664-78.  
<http://www.perio.org:80/resources-products/pdf/4-diabetes.pdf> [cited 2004 March]

*Conflict of interest: none declared*

Photographs courtesy of the author

## Self-test questions

*The following statements are either true or false (answers on page 51)*

3. Periodontitis may be the first presentation of diabetes.
4. Gingivitis precedes periodontitis.

# Introducing the Adverse Medicine Events Line 1300 134 237

Traditionally, only health professionals have reported adverse drug reactions to the Adverse Drug Reactions Advisory Committee (ADRAC). However, recent studies have shown that when consumers report adverse drug reactions, the reports are received more quickly, about a broader range of reactions and give a better account of the event. In addition, adverse reactions from complementary medicines are more likely to be reported by consumers.

Consumer reporting of adverse drug reactions has become a reality in Australia with the launch of a new telephone hotline called the Adverse Medicine Events (AME) Line. Operated by clinical pharmacists from Mater Health Services in Brisbane, the AME Line is a telephone service through which consumers can seek information about or report adverse events associated with medicines, including adverse drug reactions, errors and so-called 'near misses'.

The service, which is an initiative of the Australian Council for Safety and Quality in Health Care was launched in October 2003. It will operate from 9am to 6pm, Monday to Friday for an initial period of 18 months. Objectives of the AME Line are to:

- create a system for consumers to report adverse experiences with medicines

- promote openness and accuracy regarding adverse medicine events
- identify trends in adverse medicine events to know when, where and how things go wrong
- ultimately integrate the information into health systems, to improve safety and quality.

The pharmacists operating the AME Line can provide information or answer questions regarding medication-related adverse effects and ensure that adverse drug reaction reports satisfying specific criteria are submitted to ADRAC. Individuals are not named in these reports, but rather safety and quality issues within the system are identified. Medication errors and 'near misses' are reported to the Australian Council for Safety and Quality in Health Care. De-identified data will be collected and fed back to health professionals to assist in changing systems to help prevent the recurrence of these adverse events. Health professionals are encouraged to refer consumers to the AME Line, for information, advice and reporting of adverse medicine events. Further information about the line is available at: [www.safetyandquality.org.au](http://www.safetyandquality.org.au) or by contacting Geraldine Moses or Treasure McGuire on (07) 3840 8087.