

**Submission
No 11**

COSMETIC HEALTH SERVICE COMPLAINTS IN NEW SOUTH WALES

Organisation: The Royal Australian and New Zealand College of
Ophthalmologists (RANZCO)

Name: Dr David Andrews

Position: CEO

Date Received: 6 April 2018

6 April 2018

Adam Crouch
Chair, Committee on the Health Care Complaints Commission
Parliament of New South Wales
Via email: hccc@parliament.nsw.gov.au

Dear Mr Crouch,

RANZCO submission to HCCC RE: Inquiry into Cosmetic Health Service Complaints in NSW

The Royal Australian and New Zealand College of Ophthalmologists (RANZCO) welcomes the opportunity to submit our perspective to the NSW Committee on the Health Care Complaints Commission (HCCC) Inquiry into Cosmetic Health Service Complaints in NSW. Our letter has been informed by the Australia and New Zealand Society of Ophthalmic Plastic Surgery (ANZSOPS), a RANZCO Special Interest Group.

RANZCO understands that cosmetic health services are expanding in an unregulated manner, which may represent an increased risk to the community. Along with other medically trained surgical specialists, ophthalmology is one of the most educated and regulated sectors working in this area. Given our unique positioning, we are willing to further assist this inquiry.

RANZCO's mission is to drive improvements in eye health care in Australia, New Zealand and the Asia Pacific Region through continuing exceptional training, education, research and advocacy. Underpinning all of the College's work is a commitment to best patient outcomes, providing contemporary education, training and continuing professional development, evidence-based decision making, collaboration and collegiality.

Cosmetic surgery in the region of the eye, eyelids and orbit requires a thorough familiarity with the complex anatomy of the region, and the varied functions of these parts, including the possible loss of vision as a consequence of derangement of these parts. In addition, surgeons operating in this region must have competence in early recognition and management of potential complications, including threats to the eyeball, eye movements, and optic nerve.

For example, interference with eyelid closure can result in corneal ulceration, and any surgery requiring entry into the retroseptal space of the orbit, including eyelid fat reduction, can be associated with orbital haemorrhage or infection, both of which can threaten optic nerve function and, subsequently, vision. The treating surgeon must be competent in the earliest possible detection, and emergency management, of these, and related, events.

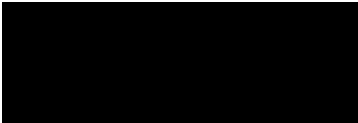


RANZCO, and in particular, the Australia and New Zealand Society of Ophthalmic Plastic Surgery, would like the opportunity to submit and be represented in this important inquiry once more detailed terms of reference are available.

For any queries about this matter, please contact RANZCO Policy Manager Guy Gillor on



Yours sincerely,



David Andrews
RANZCO CEO