

**NINETEENTH ANNUAL REPORT OF THE
VICTORIAN CYTOLOGY (GYNAECOLOGICAL) SERVICE
FOR THE YEAR ENDING 30TH JUNE, 1984**

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Board of Management:

In the previous report the resignation of Mrs. A.M. Prytz was recorded after eighteen years of membership of the Board. She has been succeeded by Mrs. Delys Sargeant. Mrs. Sargeant has spent most of her professional life in the field of Social Studies and she is currently Director of the Social Biology Resources Centre which, although situated within the University of Melbourne, is an autonomous community health project. She has had, and continues to have, a very extensive involvement in a wide variety of community activities with a major interest in educational matters, family planning, and sexual counselling. With this background it is anticipated that she will make a significant contribution to the deliberations of the Board.

Members of the Board were saddened by the death of one of the Trustees, Mr. A. Gordon Hoadley. Mr. Hoadley had been a Trustee of the Service since its inception in 1964. During the eighteen years that he served in this capacity he maintained an extremely active interest in all the affairs of the cytology service and was one of the most enthusiastic supports of these activities.

Diagnostic Activities:

From July 1st, 1983 to June 30th, 1984 the Service received 275,643 specimens. This represents a decrease of 7,627 or 2.7 per cent. on the number of specimens received in the previous financial year. This is only the second time that the number of smears received has fallen in two successive years.

"Major abnormalities" were detected in 728 women. As previously explained the term major abnormalities embraces all those conditions that are believed to immediately precede invasive carcinoma, usually referred to as severe dysplasia and carcinoma in situ, as well as all cases of invasive or established cancer. Major abnormalities, as defined in this way, have been detected in 10,723 women since the inception of the Service in January, 1965.

The total number of specimens received since the Service commenced its diagnostic activities is 3,586,893.

Financial Aspects:

For the year ending 30th June, 1984 the maintenance or operating cost of the Service, on an accrual basis, was \$1,522,552. As in previous reports, expenditure on additional and replacement equipment amounting to \$12,300 has been excluded. In comparison with the previous financial year, the operating costs have increased by \$166,757 or 12.3 per cent. Salaries and wages represented the major component of these costs accounting for \$1,088,860 or 71.5 per cent. of the total. The increased expenditure on salaries and wages, as compared to the previous financial year, was \$63,458 or 6.2 per cent.

Using the method applied in previous years the cost per specimen for the year under consideration was \$5.12. Compared to the previous financial year the cost per specimen examined has risen by \$0.37 or 7.8 per cent.

Staff:

The staff ceiling imposed in 1978 continues to cause considerable stress. Expressed as equivalent full-time (EFT) the level of staffing remained virtually constant comprising 53.31 EFTs at 30th June, 1984 and consisting of:

Technical Staff:

Full-time	-	2	Computer Scientists
	-	16	Cytotechnologists and Technicians
Part-time	-	25	Cytotechnologists and Technicians

Clerical Staff:

Full-time	-	1	Secretary
	-	1	Receptionist
	-	1	Clerical Supervisor
	-	1	Computer Clerk
	-	6	Typist/Clerks
	-	6	V.D.U. Operators
Part-time	-	3	Mail Clerks
	-	1	Filing Clerk

In addition to these staff members 1.75 equivalent full-time pathologists, representing the total medical staff of the Service, and 1 Administrative Assistant, are seconded from the staff of Prince Henry's Hospital the salaries being recouped by the hospital from the funds of the Service. Finally an additional 1.55 equivalent full-time staff members are employed using money derived from educational and research activities. Currently considerable problems are being encountered with respect to occupationally related illness. A number of members of both clerical and technical staff have developed stress related disabilities, teno-synovitis being the most common. These illnesses

are related to the rapid and repetitive movements involved in the operation of the V.D.U.'s and similar movements involved in prolonged microscopy. A number of remedial measures have been taken.

Problems Relating to Space, Staff and Equipment:

As reported previously the Cytology Service faces serious and increasing problems concerning space. The building, originally designed in 1965 and occupied in 1968, is now coping with a far greater volume of work and consequently is employing many more staff members.

Major difficulties are also being experienced with the operation of the computer. A submission has been made to the Health Commission for the purchase of a new computer system and it is believed that permission will be granted for such a system to be acquired.

There is no doubt that the inadequate staff numbers, working with unreliable equipment, in insufficient space is leading to a serious breakdown in the quality of service provided to the Community. There is also no doubt that this deterioration in quality is reflected in the decreased work load of the Service referred to above, this decrease resulting from the dissatisfaction of many of the medical practitioners who use the Service. The most serious manifestation of the problems being experienced by the Service is the delay in issuing diagnostic reports that has become the norm rather than the exception. Although there are no easy solutions it is absolutely essential that the Cytology Service be adequately housed and staffed if it is to continue to provide the quality of service for which it has become world renowned.

Teaching, Research and Other Activities:

A highlight of the activities of the Cytology Service since its inception has been the vigorous teaching programme. Virtually all technologists working in cytology throughout Victoria, both within the hospital system and in private laboratories, have received training in the School of Cytotechnology operated by the combined laboratories of the V.C.(G.)S. and the cytology department of Prince Henry's Hospital. Many pathologists have also taken advantage of the teaching facilities. Training has been provided for pathologists and technologists from the other States of Australia, from New Zealand, and from a number of South East Asian countries. As indicated in previous reports, the entire cytology component of the Bachelor of Applied Science course, conducted by the Royal Melbourne Institute of Technology, is provided by the Cytology Service and Prince Henry's Hospital.

The Service continues to participate in the New Zealand Contraception and Health Study, a major research project involving the observation of approximately 12,000 women over a period of ten years. Other lesser projects are concerned with gynaecological infections, particularly those caused by the human papilloma or wart virus and chlamydia, and endometrial abnormalities associated with intra-uterine contraceptive devices and tubal ligation.


Assistance from Other Organizations:

Since the inception of the Service members of the Floral Group of Prince Henry's Hospital Auxiliaries have made a major contribution to the activities of the Service by packing, on a voluntary basis, the kits of materials used by medical practitioners throughout Victoria for smear collection. This assistance, carried out cheerfully and unobtrusively, is acknowledged with very sincere gratitude.

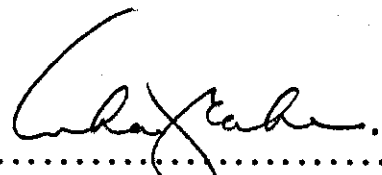
Tribute is paid to the Anti-Cancer Council of Victoria which has always supported the work of the Service and appreciation is expressed for the assistance given by many staff members of Prince Henry's Hospital.

Conclusion:

Expressions of concern regarding the problems facing the Service have been a feature of all Annual Reports in recent years. That the Cytology Service continues to operate economically despite these problems is a tribute to all staff members but, as indicated in this report, the quality of the service provided is now being affected. As also indicated the problems could be overcome with relatively modest additional support. But it is essential that they are overcome if the achievements of almost twenty years are to be preserved.



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PROF. R.J. PEPPERELL
Chairman



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DR. M. DRAKE
Director