



QRC: 3364

Price

One Day : \$462 inc. GST

Two Days: \$715 inc. GST

Date

01 - 02 Nov 2018

Venue

Oaks On Collins

480 Collins St , Melbourne, VI, 3000

CPD Hours

11 Hours | 0 Mins

Party Drugs Conference - Melbourne 2018

2 Day Conference for all Nurses, other Health Professionals and Teachers Working with Adolescents

Need for Program

No matter where a health professional works, they may encounter the impact of “party drugs”. They are cheap and accessible yet illegal and appear to be gaining popularity. However, their impact can be fatal due to the unknown and harmful composition of these substances. Nurses and other health professionals, as well as teachers, need to be able to identify and rapidly respond to people affected by these emerging modern drugs. Increased awareness of the nature of these drugs will assist in the prevention and effective minimisation of harm and, thereby, improve health outcomes.

Purpose of Program

The purpose of this conference is to inform health professionals and teachers about the risks associated with the use of “party drugs” and strategies to minimise harm, particular among adolescents and young adults.

Learning Outcomes

At the conclusion of this program it is expected that the participants will be able to:

- Appropriately assess a person in your care for symptoms associated with the use of party drugs
- Provide effective management and supportive care to a person affected by party drugs
- Explain the risks of toxicity and the associated medical implications of party drugs
- Appropriately encourage harm reduction strategies for users of party drugs

Program Schedule

Day One

8:30AM Registration for Day One

9:00

Welcome and Introduction

9:05

Associate Professor John Fitzgerald

It's Party Time...

Party drugs continue to grow in popularity. Australians appear to be engaging in this type of drug taking as a part of recreational activities. But what is the health impact? This introductory session reviews:

- What is a “party drug”?
- Is the use of party drugs on the rise?
- Who is most likely to be affected and what are the consequences for society?
- Who is supplying people with party drugs and where are they coming from?

9:45

Dr Shaun Greene

The Pharmacology of Party Drugs

Youths are commonly taking MDMA, ketamine, and ecstasy as party drugs as they leave the person feeling drunk without the consequences of a “hangover” or the costs associated with alcohol. This session looks at the common drugs that are seen in clubs, at parties, festivals, and other events and how they are changing the way health care is provided. It includes:

- What types of substances are found in party drugs?
- What are the common immediate effects associated with party drugs?
- How do party drugs affect different body systems and how do they clinically manifest?

10:45 Morning Tea

11:15

Dr Shaun Greene

Emergency Department - When a Good Night Turns Bad...

The emergency department is the frontline for drugs that cause untoward effects. However, there are many impacts to be considered. These include:

- A look at how we correlate the symptoms and presentation of party drugs with management in emergency departments
- Missing or misinterpreting the signs of poisoning
- Reversing the effects of party drugs

12:15

Dr Robyn Brown

Pleasure, Addiction, and Party Drugs - Inside the Brain

Clearly, party drugs have a euphoric impact on the mind of a person ... but how does it actually affect the brain to cause these feelings? In this session, we will look at the neurobiological effects of party drugs and why they can lead to addiction in some people. It includes:

- What are the neurobiological effects of party drugs?
- Are party drugs addictive?
- Are some people more vulnerable to their addictive effects?
- How is brain function and behaviour impacted?
- Can these damages be reversed?

1:15PM Lunch and Networking

2:15

Dr Jennifer Power

Chemsex: What it is and What it is Not

“Chemsex” is a term that refers to a specific type of drug use. Alarming, it appears to be on the increase and is associated with a range of risks, such as sexually transmitted diseases like HIV and Hepatitis C. In this session, you will find out about:

- What is triggering chemsex?
- What common substances are associated with chemsex?
- What are the public health risks?
- What is the duty of care of health professional towards those who engage in chemsex?
- How can we promote harm minimisation?

3:15 Afternoon Tea

3:45

Adele O’Hehir

Drug-Facilitated Sexual Assault

Adolescents who are under the influence of party drugs and other mind altering substances are often susceptible to drug facilitated sexual assault (DFSA). It is essential that nurses, other health professionals and teachers who are in a position to connect with adolescents understand how to recognise, discuss and prevent these non-consensual acts from occurring. This crucial session discusses:

- Are certain party drugs more commonly associated with DFSA?
- How may a perpetrator take advantage of a victim?
- How do we assess the symptoms of DFSA?
- What do health professionals need to know about preserving evidence?
- What next? – A look at resources and referrals that are most useful when connecting with adolescent

4:30 Close of Day One of Conference

Day Two

9:00AM Commencement of Day Two

9:00

Dr Martin Jackson

Party Drugs and Alcohol - A Match Made in Hell?

Alcohol is commonly used in combination with illicit drug use, in particular, with drugs such as cocaine. This session will look at some of the short- and long-term harms that occur when party drugs are mixed with alcohol. It also revisits the drug of most concern in our society – alcohol.

Topics include:

- Are people turning to party drugs because of the cost of alcohol?
- Are certain party drugs, such as cocaine, more dangerous when mixed with alcohol?
- When might we see a fatal tipping point if the two are combined?
- What are the long-term effects?
- Is substance-related brain injury reversible?

10:00

Dr Sarah Trobe

Eating Disorders and Party Drugs

Substance misuse, including the use of party drugs, may be associated with eating disorders in adolescents and may begin before or during an eating disorder or even after recovery. Up to 50% of individuals with eating disorders abuse alcohol or illicit drugs, a rate five times higher than the general population. People with eating disorders may use stimulants to control appetite and to provide energy for exercise and, consequently, dependence can develop. Particular personality traits, such as impulsiveness or obsessionality, have been connected to both eating disorders and drug use and research has demonstrated that there are several similarities between the physiological conditions and mechanisms of eating disorders and substance abuse, including shared brain pathways, low self-esteem, anxiety, depression, and social pressures. This session will cover:

- Are eating disorders and illicit drug use linked?
- Why is it important to recognise comorbidities in an adolescent with an eating disorder?
- How can you recognise disordered eating and substance use behaviours occurring concurrently?
- What interventions may assist to support harm minimisation and promote recovery?

10:45 Morning Tea

11:15

Representative from the Crime Prevention Unit, Victoria Police

The Police Response to Party Drugs

Police have an integral role in protecting the wider community and their relationship with health professionals is very important in this regard. This session will shed light on:

- How is Victoria Police working to reduce the supply of party drugs?
- How does Victoria Police approach party drug-taking behaviours?

- What search powers do police have if they suspect a person is under the influence of party drugs?
- When should a health professional involve the Police?

12:00

Dr Karen-Ann Clarke

The “Pill Testing” Debate

In a recent trial at a popular festival, 128 participants used a drug-checking service. Half of the pills assessed were found to have contained paint, toothpaste, and lactose and two pills were found to be potentially deadly. Is this novel approach to harm reduction effective or encouraging use? Let's debate:

- What is “Pill Testing”?
- How accurate are they?
- After the testing – what happens next?
- What are the arguments for and against it?
- Are we promoting drug use by making it safer?
- Is it helping make more informed decisions?

1:00PM Lunch and Networking

2:00

Dr Karen-Ann Clarke

Party Drugs - A Tipping Point for Mental Illness?

What is the relationship between party drugs and mental illness? Is party drug use intended to act as a coping mechanism for social anxiety and depression? Or is it triggering symptoms of mental illness to present? This session includes:

- Are party drugs the new social lubricant?
- Can party drug use trigger psychosis?
- How might they influence mental health?
- What is a “comedown”?
- How to distinguish a comedown from a depressive episode?

3:00 Afternoon Tea

3:30

Dr Karen-Ann Clarke

Peer Pressure, “Schoolies”, and Party Drugs

This final session will highlight the impact of peer pressure on drug taking in adolescents. With a focus on harm reduction, particularly during high-risk social events, such as music festivals and end-of-year celebrations, such as schoolies, it will include practical strategies on how to conduct difficult conversations. It includes:

- Types of events linked with party drug use in adolescents
- Strategies most likely to work to prevent the use of party drugs in adolescents
- Talking about party drugs – conducting difficult conversations with adolescents
- How to engage and promote harm reduction – a therapeutic approach

Presenters

Karen-Ann Clarke

Dr Karen-Ann Clarke is a Registered Nurse and a specialised mental health nurse, with 30 years' experience of working with individuals and families impacted by the experiences of mental illness. Using a feminist narrative methodology, her PhD research explored the way in which women diagnosed with depression made decisions and meanings about receiving electroconvulsive therapy. As a lecturer in nursing at USC, Dr Clarke is responsible for the coordination of mental health curricula across multiple undergraduate and post-graduate programs. Teaching in excess of 900 undergraduate students each year, she is passionate about the value that immersive mental health simulation can bring to student's learning and clinical skills, and the way that it can safely bring to life theoretical concepts related to mental health care. Dr Clarke currently supervises a number of honours, masters, and PhD students and is part of numerous research projects involving visualisation and simulation, mental illness, suicide prevention and the inclusion of people with lived experience of mental illness into the teaching and learning space.

John Fitzgerald

John Fitzgerald is an expert in Alcohol and Drug Policy. He is an associate professor at the University of Melbourne. He was previously acting CEO of VicHealth and a board director at Victoria's Northern Hospital. He has a PhD in pharmacology (on the drug ecstasy) and a second PhD in English on the discourse and language used to understand psychoactive substances. His research ranges across the policing of illicit drugs, the lived experience and cultural significance of psychoactive substance use, ranging across hallucinogenics, to stimulants, injectable opiates and alcohol. He is currently completing a book on drugs and pain.

Shaun Greene

Dr Shaun Greene is a clinical toxicologist and emergency medicine physician who works at Austin Health in Melbourne. He is currently medical director of the Victorian Poisons Information Centre and director of the Austin Hospital Clinical Toxicology Service. Shaun trained as a clinical toxicologist in the United Kingdom where he developed a keen professional interest in recreational drugs. His research interests include novel psychoactive substances and pharmaceutical opioid harm reduction.

Robyn Brown

Dr Robyn Brown is an Addictions Neuroscientist and a National Health Medical Research Council (NHMRC) Peter Doherty Fellow, at Florey Institute of Neuroscience & Mental Health, Melbourne Brain Centre, University of Melbourne.

Martin Jackson

Dr Martin Jackson has worked as a clinical neuropsychologist for 30 years in acute hospitals, rehabilitation, and community settings, as well as in tertiary education and private practice. His areas of expertise include alcohol and other substance-related brain injury, traumatic brain injury, stroke and other forms of acquired brain injury, rehabilitation (especially behaviour management) following brain injury, the neuropsychological and cognitive consequences of mood disorders (depression, anxiety, PTSD, etc), and assessment of decision-making capacity (e.g. financial management, lifestyle decisions, testamentary capacity, fitness to plead and stand trial). Martin is a consultant to the Department of Health (Victoria), the Victorian Transport Accident Commission (TAC), and Workcover (Victoria). He has a strong research background and has twice been invited to the Oxford University Round Table (drug and alcohol). Martin is an endorsed clinical neuropsychologist with the Psychology Board of Australia and a registered Supervisor. He also regularly conducts workshops and training in alcohol and other substance-related brain injury, head injury, and behaviour management and provides supervision to other clinical neuropsychologists. Martin now works full-time in a medicolegal private practice, providing assessments for insurance companies, statutory bodies (AHPRA), medicolegal companies, and solicitors.

Adele O'Hehir

Adele O'Hehir is a forensic nurse coordinator at the Victorian Institute of Forensic Medicine (VIFM) in Melbourne, where she oversees a team of more than 50 forensic nurse examiners. She became fascinated with forensic evidence and supporting victims some years ago and, in 2008, after many years working in emergency health and critical care, Adele completed postgraduate qualifications in forensic nursing.

Sarah Trobe

Dr Sarah Trobe is a registered clinical psychologist with experience in both the public and private sectors, predominantly in working with children and adolescents presenting with complex mental health difficulties. Sarah holds a bachelor of arts (Hons), a PhD in clinical psychology, and is a member of the Australian Psychological Society. Sarah is passionate about setting up strong treatment networks and collaborations throughout the state, with skills in service development and multidisciplinary care and coordination. Outside of The Centre of Excellence in Eating Disorders (CEED), Sarah's current clinical work is focused on supporting young people with overweight and obesity. She is completing her masters in nutrition. These clinical and research pathways underlie Sarah's interest in the link between physical health and mental health and current care structures in this field.

Representative from the Crime Prevention Unit Victoria Police

The Crime Prevention Unit of Victoria Police aims to prevent common crime and ensure the safety of the community.

Jennifer Power

Dr Jennifer Power is a senior research fellow at the Australian Research Centre in Sex, Health and Society at La Trobe University. Her research focuses on sexuality and sexual health, with a particular focus on HIV. She has recently published work on the use of crystal methamphetamine among gay and bisexual men who are living with HIV.

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