

# primary focus

Why gestational  
diabetes is on the rise

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**sMater** A learning community  
by clinicians for clinicians

The sMater podcast is designed by clinicians for clinicians who want practical, evidence-based insights to support patient care. Each episode features Mater specialists sharing updates on clinical guidelines, emerging treatments, and real-world case discussions. Tune in to stay informed, confident, and connected—so you can deliver the best outcomes for your patients.

### Reconciliation

In the spirit of reconciliation, Mater acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community.

We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander Peoples today.

Learn more about our Reconciliation Action Plan at [mater.org.au/rap](https://mater.org.au/rap)

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# Welcome to 2026: the start of our *new chapter*

**Every year brings new opportunities and challenges for the healthcare sector, and 2026 will mark an important new chapter for Mater with our recent acquisition of Gold Coast Private Hospital, which strengthens our network and enhances our capacity to meet Queensland's growing and evolving healthcare needs.**

With established strengths in maternity and obstetrics, cardiac care, intensive care and emergency services, the hospital is a natural fit within the Mater network, supporting our ongoing delivery of compassionate, high-quality care.

The acquisition also creates new opportunities for clinical collaboration, bringing together expertise to deliver more integrated, patient-centred care across the state.

**At the same time, we are full steam ahead at Springfield with the first services at our new hospital set to open in April.**

I am pleased to confirm Mater Private Hospital Springfield will also offer private maternity services, further enhancing healthcare services in the western corridor region. The GP Specialist community across Greater Springfield has already started referring women to maternity care with antenatal clinics opening in December last year.

Finally, I invite you to participate in Mater Foundation's International Women's Day Fun Run being held on Sunday 8 March. The Fun Run is Queensland's largest community participation event with nearly 30,000 people expected to take part this year. The Mater Chicks in Pink event is dedicated to raising awareness and funds for improving breast cancer care and research.

Thank you for your continued partnership and advocacy for patients.



*Julia Strickland-Bellamy*



## International Women's Day **funrun**

Presented by  QueenslandXRay

This March, join more than 29,000 people across Queensland in the iconic Sea of Pink, supporting breast cancer treatment and research at Mater. Be part of the wave of change!



# Masterclass in Ovarian Cancer

 Brisbane and virtual

**Date:** Wednesday 25 February

**Time:** 7pm–8.30pm (registration at 6.30pm)

**Venue:** In-person: Level 3, 14 Stratton Street, Newstead | Virtual via Teams

Explore the full clinical spectrum of ovarian cancer care—from initial presentation through to treatment and survivorship—with Gynaecological Oncologists Dr Nimitri Cabraal and Dr Nisha Jagasia, and Gynaecologist Dr Stacey Davie.

The session will outline practical, evidence-based approaches to assessing and managing ovarian masses, highlight current advances in treatment including the evolving role of genetic testing, and discuss survivorship needs and how GP Specialists can best support long-term health and quality of life.



## GP Maternity Shared Care Alignment—Seminar 1

 Brisbane

**Date:** Saturday 21 February

**Time:** 8am–1pm

**Venue:** Corbett Room, Level 1, Whitty Building, Annerley Road, South Brisbane

A multidisciplinary program for GP Specialists providing shared maternity care with Mater Mothers' Hospital, focused on best-practice pregnancy care in general practice.



## Central Queensland Urology Conference

 Rockhampton

**Date:** Saturday 7 March

**Time:** 8.30am–3pm

**Venue:** Salt Yeppoon, 32–34 Anzac Parade, Yeppoon  
Registered event with RACGP



## Age-Related Diseases and Pain Management

 Rockhampton

**Date:** Tuesday 10 March

**Time:** 6pm–8pm

**Venue:** Rockhampton Leagues Club, Cambridge Street, Rockhampton  
CPD hours—self record via quick log

## GP Pulse

### Why GP Specialist-hospital partnerships matter more than ever.

We have all heard the saying, 'it takes a village to raise a child'. The same is increasingly true for delivering healthcare to our communities, particularly as our population ages and multimorbidity rises. No single clinician or sector can meet this growing complexity alone.

Today, many patients often live with multiple chronic conditions, see several specialists and allied health providers, and move frequently between community and hospital care.

These transitions—especially from hospital back to the GP Specialist—can carry significant risk if communication falters. Clear, timely and comprehensive handover is critical for continuity of care, patient safety and optimal outcomes. Partnership also means ongoing shared learning.

**That is one reason I have greatly enjoyed co-hosting the sMater podcast—a clinician-led learning community offering practical, up-to-date insights on clinical topics, treatments and innovations across specialties, designed 'by clinicians, for clinicians'.**

This experience has deepened my understanding of Mater hospital-based care pathways, research and emerging practice.

During my time as AMA Queensland President, I strongly advocated for resourcing to improve clinical handover and communication between sectors, because better partnership isn't just good practice—it's essential. Yet funding and system support must keep pace with the increasing complexity of care.

Continued advocacy for these resources will strengthen collaboration and help sustain the invaluable role GP Specialists play across the health system.



*Dr Maria Boulton*

# Meet our new *specialists*

## Townsville



**Dr Firas Al-Nidawi**  
Neurology

07 4779 9266



**Dr Toby Hulf**  
General Surgery

07 4725 2833



**Dr Mangesh Jadhav**  
Paediatric Cardiology

07 4427 5817



**Dr Sophie Offen**  
Cardiology

07 4779 0199

**Dr Parul Sareen**  
Pain Medicine

07 4724 2592

**Dr Moohambika (Ambi) Srinivasan**  
Paediatric Medicine

07 4427 5817

## Rockhampton

## Mackay



**Dr Patrik Tosenovsky**  
Vascular Surgery

07 4725 2833



**Dr Shashank Desai**  
General Surgery

07 4922 8426



**Dr Chris Lewis**  
General Surgery

07 4922 8426



**Dr Michael Millar**  
Orthopaedic Surgery

0424 027 027

**Dr Michael Wagels**  
Plastic and  
Reconstructive Surgery

0483 876 368

**Dr Jay Wiper**  
Plastic and  
Reconstructive Surgery

0483 876 368

## South Brisbane

## Redland



**Dr Stacey Davie**  
Gynaecology

07 3844 9932



**Dr Sam Davies**  
Urology

07 3255 0311



**Dr Dan Winson**  
Orthopaedic Surgery

07 3050 3333

**Dr Sandun Abeyasundara**  
General Surgery

07 3186 6972

**Dr Ferdinand Ong**  
Colorectal Surgery and General Surgery

07 3107 4893



Supporting Queensland doctors,  
creating better health.

## Benefits of joining AMA Queensland



### Professional networking and events

Stay connected with colleagues and peers in the medical field. AMA Queensland events include an international conference, member networking and private practice events.



### Advocacy and representation

Advocacy for doctors of all specialties and at all stages of their career. Let us speak for you when you cannot speak out.



### Protection

Be protected and secure at work with the support of ASMOFQ to help doctors negotiate, resolve and challenge matters when you need.



### Workplace Relations support

Our Workplace Relations team offer a range of services for private practice in all areas of workplace compliance, relations and health and safety.



### Exclusive offers and discounts

Exclusive member service offers, discounts and benefits from our corporate partners across a range of areas including automotive, travel, legal and financial.

Join now

[amaq.com.au/membership](http://amaq.com.au/membership)

# Gestational diabetes on the rise



Christine Newton with baby Indiana

**Gestational diabetes mellitus (GDM) is now the most common medical complication of pregnancy, affecting up to 20 per cent of expectant mothers. With diagnoses rising by 70 per cent in the past five years, early detection and coordinated management remain essential to protecting maternal and neonatal health outcomes.**

First-time mum Christine Newton was diagnosed with GDM at 28 weeks and describes feeling shocked and scared.

**"I'd been eating really well and living what I thought was a healthy lifestyle, and I was wondering what I did to cause it," Ms Newton said.**

Like one in six Australian women now affected, she required close monitoring and a structured management plan. Using the Mother app, Christine recorded her glucose levels four times a day, allowing Mater dieticians to tailor diet and exercise recommendations in real time. This multidisciplinary approach supported a stable pregnancy and the safe arrival of her baby girl, Indiana.

Associate Professor Jo Laurie, Director of Obstetric Medicine at Mater Mothers' Hospital, says GDM significantly increases the risk of pre-eclampsia and can contribute to long-term cardiometabolic disease. "Heart disease is one of the leading causes of death in Australian women, and gestational diabetes can significantly increase a woman's future risk," she says. "If not well controlled, it can also affect babies through high birth weight, prematurity, jaundice, and respiratory issues."

The rising rate of gestational diabetes is linked to sedentary lifestyles, higher BMI and older maternal age, but even women with no risk factors can develop GDM. Updated criteria from the Australasian Diabetes in Pregnancy Society (ADIPS) estimates one in six pregnancies will be affected.

Associate Professor Laurie emphasises the importance of routine screening and ongoing support.

**"We want all women to be screened appropriately and supported with nutrition, exercise and glucose monitoring during pregnancy and after birth."**

## Guide for GP Specialists



**Screen all women at 24–28 weeks gestation**



**Ensure postpartum follow-up to assess cardiometabolic risk and reinforce healthy lifestyle habits**

## Continuity of care at the 4HER Clinic

Mater's 4HER Clinic provides dedicated post-pregnancy follow-up for women at increased long-term risk after conditions such as gestational diabetes, pre-eclampsia or pre-existing Type 2 diabetes.

**"We see women in the first year after pregnancy and work closely with their GPs to support long-term health," says Associate Professor Jo Laurie.**

**Eligibility:** Women who birthed at Mater Mothers' Hospital or Mater Mothers' Private Brisbane with GDM, hypertensive pregnancy disorders, or pre-existing Type 2 diabetes.

### The clinic offers:



Cardiometabolic risk assessment



Lifestyle and nutrition support



Education and long-term health planning

## Mater expands to the Gold Coast: strengthening private healthcare for *Queensland*

**A major milestone in Mater's statewide healthcare network was reached with the recent acquisition of Healthscope's Gold Coast Private Hospital.**

The acquisition marks a strategic expansion and reinforces our longstanding commitment to delivering high-quality, compassionate care to Queensland communities.

Mater Board Chair Patrick Brady said the purchase secures the future of private healthcare on the Gold Coast and provides long-term stability for Mater's 1,400 staff. He noted that the hospital's strong clinical profile—including maternity and obstetrics, cardiac surgery, intensive care and emergency services—closely aligns with services delivered at Mater hospitals.

**"Mater's exceptional healthcare has been trusted across Queensland for more than 120 years," Mr Brady said. "We are delighted to extend our Mission-driven services to the Gold Coast and look forward to caring for the community for generations to come."**

As Australia's largest maternity service, Mater delivers more than 11,000 babies each year. The addition of Gold Coast Private Hospital—where around 700 babies are born annually—ensures the long-term sustainability of private maternity care in the region at a time when many services face increasing pressure.

Mater Mothers' Hospital Brisbane is home to Queensland's largest Neonatal Critical Care Unit and a globally recognised Maternal Fetal Medicine centre, offering

specialist expertise that will complement services on the Gold Coast.

Mater is also a leader in women's cancer care, treating one in four Queensland women diagnosed with breast cancer and more than half of the state's gynaecological cancer patients. Integrating Gold Coast Private Hospital into the Mater network will strengthen access to these specialist pathways.

Mater Group Chief Executive Julia Strickland-Bellamy said Mater is committed to a smooth transition for staff, doctors and patients over the next six months.

## Menopause symptoms can mask ovarian cancer

**For many women approaching perimenopause and menopause, the earliest signs of ovarian cancer can be easily mistaken for normal hormonal change.**

Mater is urging GP Specialists to remain alert to subtle symptoms—bloating, fatigue, abdominal discomfort and weight fluctuation—that may indicate underlying cancer.

This was the experience of 49-year-old Mater social worker Jodie Roberts, who attributed six months of fatigue and abdominal weight gain to menopause. She presented to an emergency department on New Year's Eve and was diagnosed with stage 4 ovarian cancer the following day.

With no screening test and non specific symptoms, most women are diagnosed at an advanced stage. Common symptoms include abdominal bloating, pelvic pain, altered bowel habits, unexplained weight changes and excessive fatigue.

Dr Catherine Shannon, Senior Medical Oncologist at the Mater Cancer Care Centre emphasises the importance of early assessment.

"Ovarian cancer is most common in women over 60, but it can occur at any age. Women should know their bodies—if something feels different, it warrants review," said Dr Shannon.

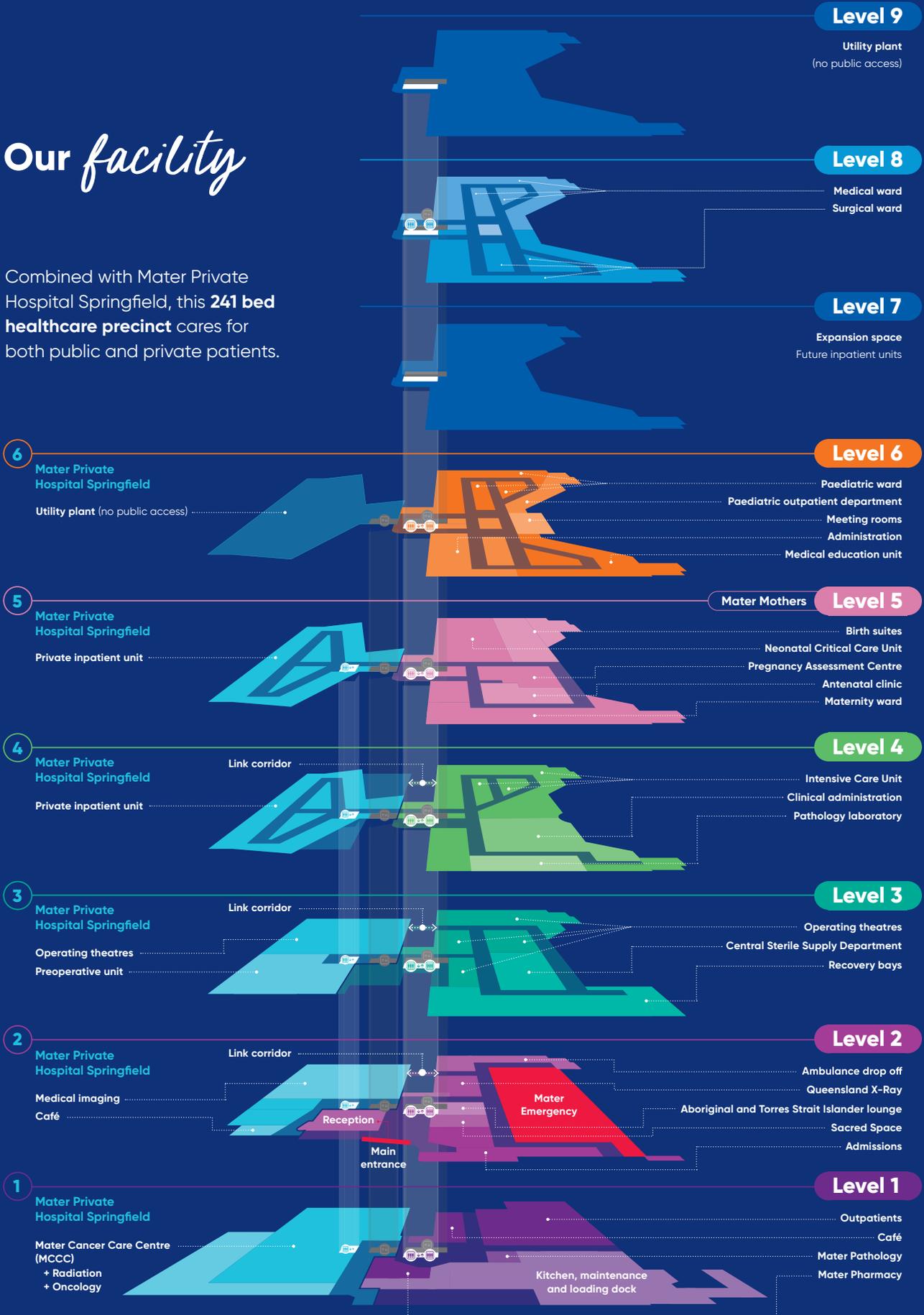
GP Specialists are encouraged to investigate persistent, unexplained symptoms early and discuss family history of breast and ovarian cancer.



Ovarian cancer survivor, Jodie Roberts.

# Our facility

Combined with Mater Private Hospital Springfield, this **241 bed healthcare precinct** cares for both public and private patients.



# Springfield's private clinical capacity to expand

## Specialists in Brisbane's western corridor will have greater access to acute care facilities and technology for private and public patients when the first stage of Mater Hospital Springfield opens from April 2026.

The facility will include a nine-bed Intensive Care Unit allowing for more complex and laparoscopic procedures. An Emergency Department is expected to open in June.

Mater Hospital Springfield General Manager Suzanne Hawksley said expanded services would benefit Springfield's existing private hospital in addition to the new facility.

"The additional services will expand Springfield's clinical capability from a level three to a level four accredited site,

allowing our clinicians to complete more complex procedures without referring patients to Brisbane or Ipswich," Ms Hawksley said.

### Private maternity services

Mater Mothers' Springfield will introduce private maternity services, with referrals open for babies expected from 25 May 2026.

Alongside the public maternity offering, private services will be part of Mater Mothers' Springfield which also includes a 24/7 Pregnancy Assessment Centre for emergencies and a Neonatal Critical Care Unit for critically ill and premature babies.

"We are excited to continue collaborating with our private specialists to ensure more patients can access high quality care close to home," Ms Hawksley said.

**"Mater Mothers' Springfield will feature six birth suites and is expected to deliver 1,700 babies annually."**

### Phased opening

More than 100 medical roles have already been recruited for Mater Hospital Springfield with clinicians set to start working at the new facility from March.

The majority of doctors will offer both public and private services with specialties ranging from urology, gynaecology and orthopaedics to paediatrics, gastroenterology and general surgery.

The first services opening on site from mid-April include antenatal and outpatient clinics, before operating theatres and the maternity unit open later in the month.

Mater Hospital Springfield will adjoin Mater Private Hospital Springfield and open in stages from April 2026.

Mater Hospital Springfield's foundation team—from clinical leads to GP Liaison midwives and educators—prepare to welcome patients ahead of the hospital's opening in April.



## Honouring a legacy, shaping the future: Dr Chris Pyke on the *next era* of breast cancer care

**After nearly four decades in Mater theatres and almost 25,000 operations, renowned breast and endocrine surgeon Dr Chris Pyke has performed his final procedure—marking the end of an extraordinary surgical career, but certainly not his commitment to enhancing breast cancer care.**

Now stepping back from the operating table, he continues as Mater's Chief Medical Officer and in a governance role with BreastScreen Queensland.

Reflecting on the future of breast cancer care, Dr Pyke emphasises that GP Specialists remain central to improving patient outcomes.

"Breast lumps are common—before menopause only around 10 per cent are cancer, but after menopause the likelihood is much higher. So early diagnosis depends on a strong relationship with your GP Specialist," he said.

For women undergoing treatment, the role of primary care is equally critical. "Treatment can involve up to 80 separate occasions of service in the first year. GP Specialists coordinate care, interpret specialist advice, manage treatment effects, and support patients emotionally. They're often the ones who get women through."

**Early detection remains the most powerful tool. With inherited cancers accounting for only about 10 per cent of cases, most women rely on timely screening and symptom recognition. "From age 40, breast screening should be considered alongside other key health milestones," Dr Pyke says.**

Advances in genetic testing and oncoplastic surgery are also reshaping care. Medicare subsidised genetic testing is enabling informed decisions around risk reduction, while modern oncoplastic techniques now allow breast conservation in up to 90 per cent of early stage cancers.

As survival rates rise, Dr Pyke believes the role of GP Specialists extends well beyond treatment completion.

"Long term survivorship is dominated by the effects of hormone deficiency and fear of recurrence. GPs are essential in managing symptoms, addressing sexual dysfunction, maintaining bone health and supporting psychological recovery for patients."

On the horizon, emerging tools such as circulating tumour DNA testing may soon support earlier diagnosis, monitor residual disease and help to predict relapse.

Reflecting on his career, Dr Pyke says "It has been an immense privilege to care for so many women, and I'm proud that Mater's multidisciplinary teams feel the same and will continue this important work for decades to come."

Dr Pyke's theatre farewell with Mater staff



# Cutting-edge breast cancer technology



Dr Wendela Schimmer with Savi Scout technology at Mater Private Hospital Mackay.

**Mater has introduced Savi Scout radar localisation technology across several Queensland hospitals, providing a highly accurate, wire-free alternative for detecting nonpalpable breast lesions.**

The technology streamlines the surgical pathway, improving comfort for patients and supporting surgeons to achieve precise margins and optimal outcomes.

A tiny reflector can be placed into the lesion days—or even months—before surgery, removing the need for same day wire placement and reducing anxiety and logistical challenges.

Breast Surgeon at Mater Private Hospital Mackay Dr Wendela Schimmer said the technology represents a major step forward for local patients.

**“We’re very lucky to have it in Mackay, because it’s very advanced technology,” she said. “It really helps patients by avoiding the extra stress of having a wire inserted on the morning of surgery.”**

The system is particularly valuable for nonpalpable lesions, including those that become nonpalpable after neoadjuvant chemotherapy. “The clip marker can be inserted into the lesion well in advance, and it sits there until surgery,” Dr Schimmer said. “For lesions that respond well to chemotherapy and are no longer palpable, the probe communicates with the marker in theatre, allowing us to retrieve the lesion accurately.”

Local access to Savi Scout reduces the need for patients to travel to metropolitan centres.

“We have the same technology being used in Brisbane—we’re doing exactly what the tertiary centres are doing,” she said. “Some patients still feel they need to travel, but we can absolutely provide comprehensive breast cancer care here in Mackay.”

Community support through Mater Foundation initiatives—including International Women’s Day Fun Run and Breasties Brunches—have helped bring Savi Scout technology to Mater patients.

## Rising breast cancer incidence in young women

**GP Specialists are urged to remain alert for breast cancer in women aged 20–39, with incidence continuing to rise across Australia.**

More than 1,000 young women are being diagnosed each year, many presenting with aggressive or advanced disease. Breast cancer has now become the leading cause of cancer-related death in Australian women under 40.

Mater Private Hospital Brisbane breast cancer surgeon Dr Ben Lancashire said the trend is concerning but is consistent with global patterns.

**“Earlier menstruation, later childbearing, delayed menopause and lifestyle factors—including alcohol use, smoking, obesity and inactivity—all contribute to increased risk,” he said.**

For mother-of-two Clemence Thompson, 35, the earliest signs were easy to dismiss.

The small lump she noticed felt like a blocked milk duct. Two months later she was diagnosed with stage three breast cancer. Her treatment has included chemotherapy, radiation, lymph node removal and mastectomy, with further reconstructive surgery at Mater.

GP Specialists are encouraged to reinforce breast awareness in younger patients and to investigate any persistent breast changes promptly.



Clemence Thompson and family.

# Research *breakthrough* targets 'bullseye' in aggressive breast cancers

Professor John Hooper, Chief Investigator and Head of Mater Research's Cancer Biology Research Group



**Mater is at the centre of a major Queensland breakthrough that could transform treatment for women diagnosed with the deadliest forms of breast cancer.**

Researchers from Mater Research and The University of Queensland have identified a potential molecular 'bullseye' on highly aggressive tumours: a receptor known as CDCP1.

Supported by a \$1.86 million NHMRC Ideas Grant, the team is developing a world-first strategy to target the CDCP1 receptor with precision.

These cancers—including triple negative, treatment-resistant HER2positive and metastatic ER positive—can recur even after apparent cure, and leave patients with limited treatment options. They are responsible for the highest mortality, particularly among younger women

## Taking a scan-first approach

Chief Investigator Professor John Hooper says CDCP1 may help to change this trajectory.

"These tumours can be resistant to current therapies and return even after patients are seemingly cured," he explains. "For many women, these diagnoses mean limited treatment options and poor survival rates."

The new approach combines PET imaging with targeted antibody therapy. Patients are first scanned to confirm CDCP1 expression, then treated with precision therapy directed specifically at the receptor-positive cells. In preclinical trials, the approach eliminated tumours when paired with existing therapies—a significant result for cancers that offer very limited options.

## What this means for patients

A pilot study will launch soon in Brisbane hospitals, testing the imaging technology in women with metastatic breast cancer. If successful, it could enable true precision oncology: identifying which patients will benefit before treatment begins. Early specialist referrals will remain critical.

## Patient trials to end post-operative endometriosis pain

**Women undergoing advanced laparoscopic surgery for endometriosis often experience significant postoperative pain, delaying recovery and increasing the risk of side effects including nausea, drowsiness, constipation, and in some cases ongoing opioid use.**

Mater clinician Dr Thomas Yeung, supported by a 2025 Betty McGrath grant, is leading a new clinical trial at Mater Mothers' Hospital to evaluate a simple but promising technique—a targeted nerve block (SHP).

Dr Yeung says persistent pelvic pain after surgery remains a major challenge.

"Pain is driven by several overlapping contributors and current medications don't target the neural pathways responsible for pelvic pain," he said.

The SHP block would numb the nerve bundle that transmits pain signals from pelvic organs—a focused approach that could reduce postoperative pain, limit opioid requirements and support earlier mobilisation for patients.

Although the technique has been used for chronic pelvic and cancer related pain since the 1990s, it has never been formally evaluated in laparoscopic endometriosis surgery.

**"If effective, it could be adopted quickly," says Dr Yeung. "It integrates easily into minimally invasive surgery and uses skills and medications already familiar to our teams."**

# Detecting endometriosis *early*

**Endometriosis remains one of the most complex and frequently delayed diagnoses in women's health, with symptoms often overlapping IBS, fibromyalgia and polycystic ovarian syndrome. Many women cycle through multiple diagnoses before reaching specialist care.**

Mater gynaecologist Dr Albert Jung said GP Specialists are pivotal in shortening this journey.

**"History-taking alone can give you a remarkably accurate picture," he says. "Cyclical pain, bowel or bladder disturbance, painful sex or infertility—particularly with a first-degree family history—should raise strong suspicion and generally indicates a high likelihood of endometriosis," he said.**

## Emerging treatment options

Botox and Dysport are increasingly used to manage persistent pelvic pain by relaxing overactive pelvic floor muscles—helping break the cycle of chronic muscle tightening and improving physiotherapy outcomes.

Ryeqo, the first TGA approved endometriosis medication in 13 years, offers another effective option for symptom control by suppressing cyclical oestrogen production while maintaining bone health.

**"It's not a first line medication," Dr Jung says, "but it's a valuable addition to our toolkit and provides women with more options which is always a great thing."**

## A breakthrough in early detection

The PromarkerEndo blood test is expected to become available in coming months, offering a non-invasive tool for detecting early-stage endometriosis. It may be particularly useful for women with classic symptoms but inconclusive imaging, or younger patients where invasive testing is less desirable. "It won't replace clinical judgement, but it will be a very useful tool—watch this space!" Dr Jung says.

## When to refer

Early referral is recommended when:

- First-line hormonal therapy has not improved symptoms
- Ultrasound suggests possible endometriosis
- Fertility planning is underway
- Symptoms are severe, persistent or escalating.

While laparoscopy remains the diagnostic gold standard, high-quality ultrasound performed by clinicians experienced in endometriosis imaging can provide valuable non-invasive insights. "It's not about the machine—it's about the expertise," says Dr Jung. "Specialist sonographers look for subtle markers like movement of the ovary, tenderness and soft signs that general scanning may miss."

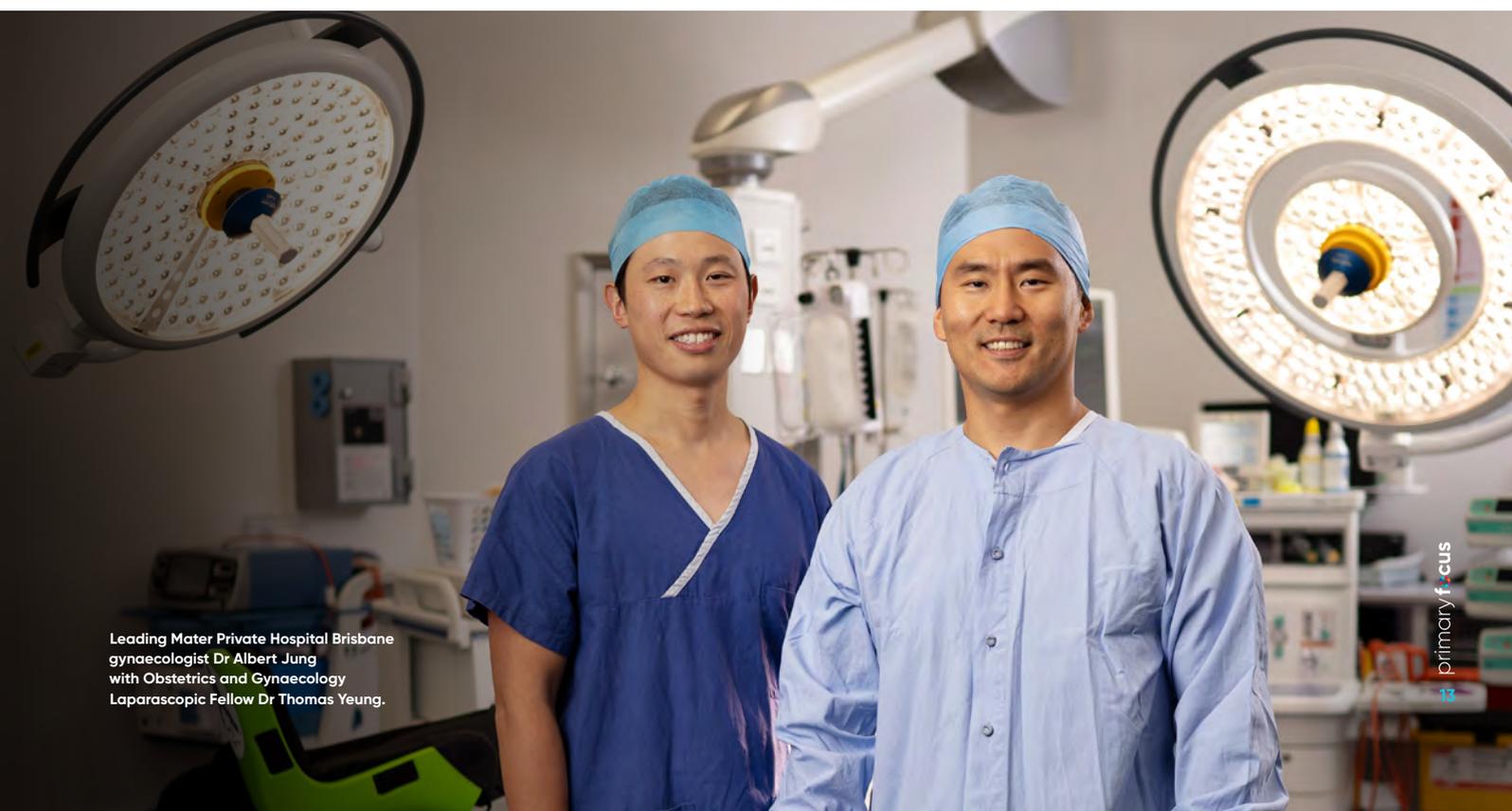
## ? How to refer

### Dr Albert Jung

 Referrals via Medical Objects

 (07) 3332 1999

 reception@evehealth.com.au



Leading Mater Private Hospital Brisbane gynaecologist Dr Albert Jung with Obstetrics and Gynaecology Laparoscopic Fellow Dr Thomas Yeung.

Infectious diseases expert  
Professor Paul Griffin.

## Fighting flu on the frontline

### Australia recorded its lowest influenza vaccination rates in children and older adults in 2025\*, a trend that Mater Infectious Diseases Director Professor Paul Griffin says must be reversed ahead of the 2026 flu season.

"We need to make a big effort this year. If we lift vaccination rates in Queensland and ensure timely use of antivirals—ideally within 48 hours—we're far less likely to see pressure on our healthcare system when flu is circulating widely," Prof Griffin said.

General Practitioners are being urged to proactively discuss influenza vaccination with patients, particularly families with young children. Uptake among children aged six months to five years has fallen to 25.7 per cent, the lowest level since before the COVID-19 pandemic.

A significant development for 2026 is the Queensland Government's introduction of the **Nasal Spray Flu Immunisation Program** offering free FluMist—a nasally administered influenza vaccine—to all children aged 2–4 years.

**The needle-free option, administered as a spray into both nostrils, has been used safely in the UK and USA for more than a decade and been shown to improve vaccination uptake.**

"It's a really positive step. It's well tolerated, provides good protection against influenza, and offers an excellent alternative for families where needle anxiety is a barrier to vaccination," Prof Griffin says.

For the 2026 season, Australia will revert to a trivalent influenza vaccine, which includes the new 'Super K' strain. Co administration with the updated COVID 19 vaccine remains safe and recommended.

\*NCIRS vaccination coverage data

# Choose Mater Emergency

 mater

primary focus



South Brisbane  
Rockhampton  
Mackay  
Townsville



**Open 7 days**  
365 days a year



**Minimal wait time**  
No referral needed



**Onsite Medical Imaging**  
and Pathology



**Specialist**  
treatment or referral

↗ For local  
opening  
hours



14

There is an upfront fee for private emergency presentations.

# A new era for maternity care in *North Queensland*

## Mater Mothers' Private Townsville will open its new purpose-built maternity unit on 24 February, marking a significant strengthening of maternity care for families across North Queensland.

The new unit is located adjacent to the main entrance of Mater Private Hospital Townsville at Pimlico, giving mothers and clinicians enhanced access to Mater's full suite of services, including the Intensive Care Unit, Emergency Department and specialist medical and surgical teams.

The relocation consolidates care capabilities and aims to provide a

more streamlined experience for mothers and babies.

Complementing the relocation is a new postnatal care option—Mater Moments at Ardo—offering mothers a calm, supported environment during the early days of parenting.

**The program allows mothers and babies to spend part of their postnatal stay at the five-star Ardo Hotel, while continuing to receive personalised care from Mater midwives.**

Mater Private Hospital Townsville General Manager Stephanie Barwick says the service is the first of its kind in regional Queensland and is already delivering exceptional outcomes for new parents.

## A calm, supported transition into *parenthood*

- Clinically stable mothers and babies can spend part of their postnatal stay at the five-star Ardo Hotel.
- Mater midwives provide in-room postnatal visits and 24/7 phone support.
- Families enjoy a quiet, private environment overlooking the water.
- Additional guidance available through Mater Mothers' Parenting Support Centre.
- Designed to enhance bonding, reduce stress and support maternal wellbeing.



## Building confidence from pregnancy to parenthood

### Mater Private Hospital Mackay offers a comprehensive, skills-focused antenatal education program designed to help expectant parents prepare confidently for labour, birth and early parenting.

The classes complement care provided by local private obstetricians and allow parents to learn in the same environment where they will give birth.

Clinical Educator Erin Attwood says the Mater program offers something unique: an immersive, tactile learning experience.

"It's all hands-on. Parents get to see, touch and try everything they may use during labour and birth," she says. "We cover breastfeeding, early parenting, bathing, changing nappies—everyone gets to have a go. They even hold and practise with their own baby dolls, which they absolutely love."

A practical orientation helps parents feel more comfortable, confident and supported when they arrive to give birth.

**"We take parents through birth suite and show them exactly what to expect—we even break the beds down and walk through how different equipment works," Ms Attwood says. "It helps reduce fear and build familiarity before the big day."**

**For class dates or bookings, call (07) 4965 5266.**



# Our Mater Network

Operating the largest for-purpose network of public and private hospital and healthcare services in the state, Mater brings together collective expertise across health, education, and research—supported by Foundation—with a shared vision of empowering people to live better lives through improved health and wellbeing.

**Mater Health** comprises all our hospitals and healthcare services across Queensland. These services combine to help Mater offer comprehensive healthcare which meets identified community need.

**Mater Education** is a nationally accredited, hospital-based independent Registered Training Organisation—the only one of its kind in Queensland. It offers a range of courses for students, through to highly experienced practising clinicians.

**Mater Research** is an internationally recognised leader in medical research, which connects its findings from bench to bedside—translating medical research into clinical practice to deliver better outcomes for our patients and the wider community.

**Mater Foundation** raises funds by engaging people and businesses to partner with Mater to improve health through a wide range of fundraising and philanthropy.



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Coming soon

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