

GP LINK Lunches |

Dr Soo Wei Foo

Dr Kenneth McCroary, Chair of Sydney South West GP Link, hosts a series of meetings with clinical/political/regional individuals or organisations to discuss issues and solutions for GPs working in South Western Sydney.



Dr Soo Wei Foo



Dr Ken McCroary

Ken McCroary - One of the main goals of Sydney South West GP Link is educating our local GP and wider primary health community and we do this with various methods. We do this as a group of dedicated GPs but we also work closely and collaborate with other helpful organisations such as the Primary Health Network and the Local Health District. Our recent collaboration involved a webinar on long COVID and through these collaboratives we contact other dedicated health professionals including one of my co-presenters, Dr Soo Wei Foo.

Dr Soo Wei Foo is a respiratory and sleep physician and currently the head of the department of respiratory and sleep medicine at Campbelltown Hospital. She is a physician with 15 years of experience in the field of respiratory and sleep medicine. Starting work at Campbelltown Hospital about 15 years ago as a young consultant.

Through the years she has had the pleasure and the opportunity to participate in leading the growth of the Department of Respiratory and Sleep Medicine. She took over this role back in 2020. She considers the role as Director as having enabled her to extend her expertise in the areas of training, education and leading her teams through good times and difficult times such as the height of the COVID-19 pandemic.

One of her passions is to serve the community she works in, specifically improving access to respiratory and sleep health related services. Soo also has a broad experience as a private practitioner in the community, and in addition, continues to serve as a VMO at Concord Repatriation General Hospital where she is able to use her linguistic skills to assist the Chinese community. She continues to have a small private practice in the Concord area.

Area of main interests include COPD and COPD exacerbation, asthma, viral respiratory infection, mycobacterial infection such as tuberculosis and atypical mycobacterial infections. Soo also has a keen interest in performing in the performing arts, particularly piano and dance. She has a diploma of performance in piano from Trinity College of music in London. She also has significant community commitments in leading and supporting local church-based organised activities and support groups such as leading the alpha team, which is geared to exploring life, faith and meaning with support and speaking at outreach community services.

I really valued Dr Soo Wei Foo's contribution and support locally, particularly the early stages of the COVID pandemic and the cooperation and the leadership she showed during the coordination throughout the district. It is great that you could be here and join us today Soo and welcome.

Ken McCroary - Soo tell us about Campbelltown Respiratory and Sleep Department?

Soo Wei Foo - The department was set up when I first started at Campbelltown, which is probably around 2007 or 2008. There were four of us, now there are about 11 of us. We have grown over the last few years. Most of us are part-timers, we provide relatively comprehensive service from general respiratory to more specialised into IOD Pulmonary hypertension and more lately a rapid access clinic for lung cancer management and diagnosis.

Ken McCroary - Wow it has certainly grown. I remember when I started in Campbelltown there was one respiratory position on the general take, so it certainly developed and has grown and now with the expansion I hear that you guys are opening a lung lab down the track as well for sleep etc?

Soo Wei Foo - Yes we have capacity now to do some and still in a growing phase we have a wonderful lung function scientist to do lung function testing and we can cater for some urgent if they need an operation or if they need lung cancer treatment we can accommodate lung function testing urgently. We also in terms of a sleep lab we are still in the planning phase it hasn't translated into full service per say, but we have the infrastructure to do so but we still in the planning phase in terms of actually starting the service.

Ken McCroary - It is very exciting. I hear you have got the machines and you have the space we just need to get the funding for staffing, and I think it's going to be a great addition to our local region having the ability to have you provide the full Pulmonary therapy studies and in patients as well.

Soo Wei Foo - I think our interest is mainly to cater to the community needs to bring care close to home because prior to that they would have to travel all the way to Liverpool Hospital or sometimes further before the Liverpool sleep lab to have any sort of sleep therapy or detailed sleep studies. We hope to bring it close to home and also to reduce the carbon footprint that patients having to travel in their cars.

Ken McCroary - That's a good point with the significance of the environmental impact on our health particularly locally isn't it, and again particularly respiratory wise. I guess that's an opportunity to discuss that out here in southwest Sydney the environmental impact on our lungs. What can you tell me about that?

Soo Wei Foo - I think firstly there are some simple things we can do in terms of in the community, in terms of healthcare. I think firstly we do have one of the highest rates of smoking. I am not talking directly about other non-smoking related, so I think those are things that are low hanging fruit, and we can have a better messaging out there.

That can be done at the community level all the way to the hospital level. I think there is public messaging, and we certainly would be very supportive of anyone who wants to have more input into smoking cessation. And that goes all the way out to school children.

I don't have the pollution data or the pollen data in terms of the environment, but I think it demonstrates with the bushfires that were just before COVID, the significant amount of pollution, the smoke that it is around the Campbelltown area is quite significant. We saw a lot of respiratory illnesses exacerbations that has a significant impact on our patients with chronic lung disease. We are yet to see what the chronic exposure is like if this is a recurring event, what it will have an impact on the growing lungs of children to adults, and so it that is left to be seen. I think there are things we can do as a community in terms of bushfires, I think that it will be a community and the public health effort and an environment effort that if not looked after well will have a significant impact with bushfires and significant climate changes.

Ken McCroary - You mentioned the community needs, and I guess here in South Western Sydney, we have the common challenges, we have more unique challenges with our interesting population groups and our significant disease burden. You mentioned the cigarettes and that is incredibly disappointing still, but we are also seeing high instances of people dying from preventable respiratory diseases not related to smoking like asthma and things like that. Young women taking up more cigarettes and it is something that is not seen as much on other areas of the state either. Do we have any special challenges as a population out here?

Soo Wei Foo - I think education and health literacy will go a long way, and also, I think asthma has improved remarkably, but most of the time the people I have seen come in have smoking related asthma exacerbation. There are a lot of advances in asthma management so if they qualify for biology there certainly can make a significant difference into their health in terms of asthma management.

Other specific respiratory challenges we see in relation to respiratory failure in with morbid obesity. We do have the one of the highest rates of obesity in South Western Sydney and there ore it is one of the challenges. I think prevention is better than what respiratory physicians or sleep physicians are trying to do in terms of managing that, but we work closely with the metabolic clinic at Campbelltown in terms of managing obesity, so their respiratory issues are secondary to obesity which is the preventable disease.

Other preventable disease would be smoking where you get lung cancer, but we are also seeing a growth of lung cancer that is unrelated to smoking. Certainly not preventable but there are still a proportion of lung cancers that can probably be prevented if they had not smoked.

Ken McCroary - You mentioned the changes and the growth in the department, and we can see that as the buildings expand and the services that are offered are increasing. Now being the director it must be an interesting time for you, what have been the challenges of being the director of a growing department in a high use region?

Soo Wei Foo - I think the challenge for me is to maintain the moral of the team. First of all the workload is very high to maintain. We work well within the team, and the workload in not significantly high in terms of it being well distributed and well supported. One of the challenges is to keep up with the changes as they are occurring. A number of processes and systems have to be in place for me personally and the team work well together to manage this.

We have had very enthusiastic young physicians who are interested to provide a tertiary level of respiratory sleep services so in that regards and last week the group of people who I am working with, so it's really really been helpful. It has been hard with COVID we were not able to roll out a number of things we hope that when now we have got into the swing of things we are able to roll a few things out as well.

Ken McCroary - Yes, speaking of COVID, you and I collaborated on some webinars. Are you able to give us a bit of a summary of what it was like being the head of the Respiratory Department in South Western Sydney during those crazy times of lockdown and uncertainty with the infection and where we were going, what was that like living through that?

Soo Wei Foo - I think we, myself have learnt to be more kind to ourselves. I think there is a learning phase for me and also for my team. I think we, I have learnt to be more flexible and open to changes and just happy to learn new things as we go along because the information provided keeps changing and the rapid knowledge expansion keeps changing.

What we are using three weeks ago may not apply three weeks later and even the hospital response could change from day-to-day, hour-to-hour so we just learn to be flexible and to be open to changes and move what we have in our hands and do the best we can. One of the challenges is again maintain moral, I was really, really pleased to see that people, actually it's a whole hospital response, it was not just respiratory, so I was pleased to be able to work with the Director of Medicines very supportive the EMS was very supportive the hospital management was very supportive and the rest of the hospital staff are generally very supportive.

It can be quite frightening particularly when we didn't have any vaccines and were not sure of what sort of protection PPE we have or not enough, but I have to say at Campbelltown we have always been very well supported with all our PPE. There we know there may be shortage, but I didn't feel we had shortage at Campbelltown at all we were well supported with our masks and our PPE. In that regards we managed to pull through it, it was a lot of work but I think what the beauty of it was the just the nature of how we worked it out as a team as a hospital people will volunteer to help out so that's good.

Ken McCroary - Yeah and support is often a two-way thing and I know you are keen to help support the local GPs in managing their respiratory and sleep patients, how can you guys offer support to us and how do we best access the services you guys are providing?

Soo Wei Foo - I think this is something I am more than happy to discuss further but my thoughts are there are a lot of sleep and respiratory health services so communication or webinars are a way we can communicate anything that needs a bit of knowledge sharing we would be more than happy. We used to have some GP rounds that were a forum where we can contribute and we used to have GP meetings. I think it's just been restarting again so it's good. I think that's one forum. The forum I am talking to you now is one way of sharing what we can offer and what serving for pathways and to have dialogs to see if this is working out for you guys or not working so those are the things I hope we can create in the next few years I think keep more user friendly for both GPs and communities and for us.

As you know I think a lot of work has really been put in by GP out in the communities, so we are seeing the you know the one end of the spectrum where things are needed a bit of extra testing and need a few help in that regards.

Ken McCroary - Yeah developing the cooperative relationships is important you have had some achievements too with your tenure as director in terms of the lung function lab, the fast-track lung cancer clinic and the sleep outpatients, can you just talk to us a bit about those three achievements?

Soo Wei Foo - So the last few years the achievement has been getting the full lung function lab running five days a week, it's a fully fledged lung function lab we hope to get some cardiopulmonary exercise testing on the next six to 12 months.

So that's a fully-fledged lung function lab the growth will be depend over the next five years to see the increase to more patients than we currently have. So what was the other question, the lung function that's sleep, so in sleep, one of our team members has an interest in respiratory failure and he has commenced once a month respiratory failure clinic for those patients with neuromuscular disease as a district base in a new service coming on board where they serve a wider population out in the community. It will be a multidisciplinary team servicing this specific population where they have newer degenerative disorders, so comprised of allied health nursing like physio, OTs, palliative care nurse who have specific interest in these areas so as a district at a local level will be participating in this district service so that's for the failure respiratory, failure in terms of sleep there will be have one sleep clinic running once a week just to cater for those whose are not able to be seen out in the community as you know we do have physicians out in the community who can manage slightly more complex sleep disorders so if they cant get to those services they end up with the sleep clinic.

Ken McCroary - And what about the fast track lung cancer clinic?

Soo Wei Foo - The fast track lung cancer clinic is a referral you can access from the internet, I think if you click I can send you the links, but essentially it's run once a week, we run it on the Friday. It basically has certain criteria for GPs who refer, patients will be seen within two weeks as per the optimal pathway KPIs stipulated by optimal pathway which is an article that stipulates the KPI recommended to be met. So the aim is from referral to treatment we hope to get it all done within two months. So usually the referral will include a fax with a particular number and or you can email it to the Campbelltown Outpatients Clinic and mark as urgent.

Ken McCroary - Excellent thank you so much. Now one of our interests is trying to support local GPs with wellbeing etc and I notice you've got an obvious concentration on supporting your team as well and you've got some fairly interesting outside interests with the piano, the dance the community and your church. Have you got any words of wisdom about doctor wellbeing?

Soo Wei Foo - I think having a balance, I have to say I struggle with this, it's a learning, it's a continually learning journey for me. I think having a party that is set up right and I think always work is work and family is very important. My partner and my husband is very important so having the right parties I think my faith in God and Jesus has put me in good steed so you know that has always given me a lot of comfort. And just having friends you can talk to on any particular issues. I think that is really, really a good space to be in particularly during the COVID season. My extra curricular activities are of course always helpful so I think on the piano when I have spare time which I don't have a lot I do a lot of walking which really is quite enjoyable particularly walking with friends and my husband.

Ken McCroary - Yeah, that's great and wise advice I think. Now our other interest is collaboration between the services in breaking down the silos between the primary and tertiary and secondary care and the positions and the wider teams involved to improve patient outcomes generally because we've all got the same goal and that is to improve the health of our community so any advise as well how we can further improve the collaboration?

Soo Wei Foo - I think it's bi-directional so I would been keen to hear what you have got to say and that's why as I advise I have dialogues in that way I can, we can, see where the gaps are. I think communicating post discharge might help that. Some of the things we are still doing is having community outreach that can support GPs if required. I don't think it's necessary for all patients but some patients may need that extra support offered to you and the patient so for example someone with chronic lung disease that's continually coming into hospital with that business sometimes it can be due to anxiety or panic attacks or sometimes it's truly an exacerbation and sometimes they just need a bit of management assistance in terms of to direct the patient to yourself or to us in terms of management. So those are the things that I hope to we can improve on.

Ken McCroary - Exactly, excellent yeah me too. Now one final question now I'm asking you to sort of put your future glasses on at the moment and just I'm interested in your thoughts about the future with our region but with COVID but also with the further development of the respiratory department and the services and our outcomes moving forward?

Soo Wei Foo - So, I am only speaking for the adult section cause respiratory illnesses encompasses both adults and paediatrics, in terms of the future, I think hopefully we will get to more of a tertiary level hospital in terms of service provision for respiratory and sleep. That will take time to grow of course. We hope to be at least able to provide a base. I think we are already providing relatively quite comprehensive general respiratory. I hope to have a little bit more, some specialised care available to the community so they didn't have to travel that far to receive care.

I can see our numbers are going to grow so we are going to grow in numbers just because the number of patients and population in Campbelltown, Macarthur region is going to grow so it's going to double looking at the statistics. I'm just looking at some of the projections that it's going to double so we will have more patients and we will have to cater for these patients so our number of physicians will grow. Our facilities will probably will have to expand in terms of the number of cases we need to put through so mainly numbers in growth and the new service that can be developed into the future will be our sleep services that will take about a couple of years I think.

Ken McCroary - Wonderful, so Dr So Wei Foo I'm really glad you had some time to spare and chat with us today and thanks so much and look forward to working together with sleep and respiratory disease in the region. Thanks so much.

Soo Wei Foo - Thankyou

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