

IN RESPONSE TO: From PIP to DC-CIK to the Sorcerer's Apprentice: a medico-political minefield by Prof Andrew Burd

BY LUCIE MICHAEL

I am a consultant musculoskeletal physiotherapist of 20 years and I hold (2002) a masters accredited diploma in injection therapy (steroid and local anaesthetic injection techniques) as well as certificates to advanced level in cosmetic injection – dermal filler and botox. I am a former beauty therapist who specialised in electrolysis for hair removal.

I have battled for recognition with the Independent Healthcare Advisory Services (IHAS) in the field of cosmetic injection since training the year 2005. In spite of providing evidence of the same training as doctors, dentists and nurses in the field of cosmetic injection, and evidence of my qualifications in musculoskeletal medicine, I have been repeatedly told I am not allowed to be placed on a register that deems me 'safe to practise' on the basis, not of qualification, training and event free practise of injection for a 12 year period, but BECAUSE I AM NOT A

DOCTOR, DENTIST OR NURSE BY PROFESSIONAL TITLE.

I have suggested to the IHAS that it is dangerous to discriminate on job title, that their register is not one keeping the public 'safe', simply one directing them solely into the hands of three 'chosen' professions.

It has now become impossible for anyone outside the 'prescribing remit' (unless a nurse!) to train in cosmetic injection.

Hamilton Frase have been prevented, much to their displeasure due to my unblemished record, from continuing to insure me to practise, thanks to the IHAS. I now have to pay 'more' to get my insurance so have been exploited here too.

I suggested to the IHAS that in order to regulate and claim 'safe' practise for the general public, they bring in an exam for all – an accredited exam, just as for the orthopaedic medicine exam in injection therapy.

I learn that this is now being proposed but that (lo and behold) the only people able to take training and the exam will be doctors, dentists, nurses and prescribers – even pharmacists are deemed more capable in the 'art' of injection it seems than a musculoskeletal specialist with a masters accredited injection therapy qualification.

It is anti-competitive in the extreme, causing restraint of trade and loss of livelihood. It is a case of greed and 'jobs for the boys' and in the true interest of public safety must be challenged.

I thoroughly enjoyed your article and hope to read many more in this vein.

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