

AFFILIATIONS

1. National Allergy Council, Sydney, Australia
2. Australasian Society of Clinical Immunology and Allergy, Sydney, Australia
3. The Children's Hospital at Westmead, Sydney, Australia
4. Cairns and Hinterland Hospital and Health Service, Queensland, Australia
5. The Royal Children's Hospital, Melbourne, Australia
6. Epworth Allergy Specialists, Melbourne, Australia
7. Port Macquarie Base Hospital, Port Macquarie, Australia
8. University of NSW Medical School, Sydney, Australia
9. The Children's Allergy Clinic, Leichhardt, Australia
10. Australian College of Rural and Remote Medicine, Brisbane, Australia
11. University of Western Australia, Perth, Australia
12. Allergy & Anaphylaxis Australia, Sydney, Australia



REACHING RURAL: HOW ALLERGY ASSIST® IS SUPPORTING GP'S WITH TIMELY ALLERGY ADVICE

ABSTRACT

Introduction: The Shared Care Project aims to improve access to quality allergy care, particularly for Australians living outside metropolitan areas. Asynchronous care refers to clinical interactions that do not occur in real time. This model offers greater flexibility for supporting patients locally and overcomes barriers with telehealth scheduling and health service boundaries. The Australian College of Rural and Remote Medicine (ACRRM) has successfully used this approach for 20 years through its Tele-derm service, supporting rural doctors in dermatology care.

Method: In February 2025, the National Allergy Council, in partnership with ACRRM, launched a 12-month pilot of allergy assist® – a secure online platform for asynchronous clinical advice and education. The service is supported by two adult and two paediatric clinical immunology/allergy specialists. Between February and July, free access was given to ACRRM members including general practitioners (GPs) and Rural Generalists as well as GPs working in rural areas (Modified Monash Model Areas MM2 to MM7). In August, access was expanded to all GPs across Australia including metropolitan GPs (MM1). Users can submit de-identified patient cases for advice to a moderated discussion board and receive a response from an allergy specialist within 48 hours. The platform also hosts interactive, case-based learning, educational modules and links to ASCIA resources to support CPD accredited professional development.

Results: As at August 2025, there are 448 GPs registered with the platform; 72% of these are ACRRM members. There have been 120 completions of an education quiz, and 15 requests for advice (67% of these were adult cases). Two webinars have been delivered with an average of 165 registrations per webinar. Partnership with ACRRM has enabled promotion to their 7000 members.

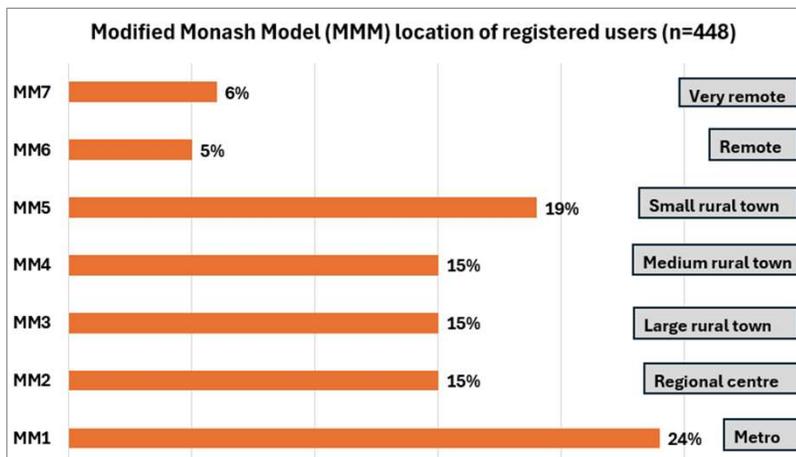
Conclusion: allergy assist® aims to empower rural doctors to confidently diagnose and manage patients with allergic conditions without unnecessary delays and support appropriate specialist referral. While this service does not replace in-person assessment by allergy specialists, it provides a means for local GPs to obtain interim clinical support. The pilot has ethics approval and is being evaluated.



allergy assist® webinars

Webinar 1:
173 registrations
99 attendees

Webinar 2:
156 registrations
62 attendees



How is allergy assist® being used?



Common topics for advice have been about food allergy, urticaria, and history of anaphylaxis



Cases submitted to the platform discussion board are visible for other registered users to learn from



There are 25 education cases on the platform with their topic searched through a condition index

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