

## KZN HEALTH CLOSER TO A PAPERLESS SYSTEM



**Kwazulu-Natal Health MEC Ms Nomagugu Simelane-Zulu paid a visit to the Department's IT unit this week and was pleased to find that the process of digitilising patient health records is now closer for the province, and more especially for Madadeni and Prince Mshiyeni Memorial Hospitals, which will be the first to pilot this system.**

IT Chief Director Mr Mbuyiselo Goduka explained how tirelessly the Hackathon team members (Group of IT Graduates who participated and won in the conceptualisation of the Department's Electronic System) were working to complete the task. He explained that the system would not only store patient

records safely but also ensure that these records are detailed, especially for records pertaining to maternity, pediatrics, psychiatry and intensive care since these areas were identified as the core of most medico-legal cases. In most cases, these records are often lost or difficult to retrieve.

The IT team has already completed computer literacy training for health professionals at Madadeni Hospital to prepare staff for the usage of this new system while training of staff at Prince Mshiyeni will soon follow.

MEC Simelane-Zulu said to the young team "You've proven me right. When you put young people together, something good can come out."





# SCHOOL HEALTH TEAMS ON THE GROUND DRIVING THE HUMAN PAPILOMA VIRUS (HPV) VACCINATION CAMPAIGN

## 11 FEBRUARY - 20 MARCH 2020



**The Human Papillomavirus (HPV) vaccination campaign commenced on the 11th February 2020, with all district school health teams hitting the ground and reaching out to young girls in public schools.**

Health Chat Bulletin caught up with MS Rani Manickum from the School Health Services Unit at Head Office to reflect on this significant work and preparations that go into making the campaign a success.

**Can you briefly explain the purpose of Human papilloma Virus Vaccine Campaign?**

The purpose of driving the HPV

Campaign every other year is to reduce the incidence of cancer of the cervix through the introduction of HPV vaccination to grade 5 girl learners 9 years and older, in Ordinary Public Schools and girls 9 years old going on to 10 years, in Public Special Schools

**What preparations go into putting this campaign together?**

Provinces are allocated HPV conditional grant each year. Then they are required to compile and submit a budget together with micro-plans and implementation plans, to NDOH. The Budget will cover all the costs related to the HPV Campaign Programme and should be directly linked to the

micro and implementation plans of the district. There after its plans for Procurement of Goods and services. Goods and services are procured at Provincial and District levels.

The main core items that we procure are Vaccines, Medical Consumables, Promotional Material, Hiring of vehicles and also accommodate Social Mobilization.

**Are you reaching all young girls in the Province or are you just limited by the consent forms that you receive?**

Yes we are, our target group for HPV Vaccine Campaign is limited to grade 5 girl learners (grade specific) 9 years and older, in Ordinary Public Schools and girls 9 years old going on to 10 years, in Public Special Schools.

**Is there any social mobilization that is done to encourage parents to agree to have their young girls vaccinated, besides placing adverts on media platforms?**

Yes

School Health Nurses, Ward Based Primary Health Care

Outreach Teams, Community Health Workers, NGO mobilize communities via the War Rooms. Then pamphlet, leaflets together with consent forms are distributed to learners. There are also Circulars from NDOH, DBE and DOE are circulated to schools and school Coordinators and school health teams notifying them of the HPV Campaign

**What do you do to keep track of clinical records in order to make sure that a girl child receives both vaccinations?**

Recording is done in the HPV

Vaccine registers, the weekly summary sheets as well electronically. Consent forms are filed at schools after the first dose of the vaccine. On completion of the second dose, consent forms are filed in the learner profile. Each learner has a learner card where the vaccine is recorded.

On completion of the 2nd dose, these cards are given to the learners to take back to their parent/caregiver/guardians for safe keeping together with the Road to Health Booklet/cards indicating that they have completed their two doses of the HPV Vaccine

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# WHAT WERE YOUR STATISTICS IN 2019

## 1ST DOSE COVERAGE 2019 (FEB-MAR)

SCHOOL COVERAGE		
Number of public schools	Number of schools visited	% Achieved for vaccination
4094	3973	97 %
LEARNER COVERAGE		
Number of learners in public schools	Number of learners vaccinated	% Achieved for vaccination
107338	71109	66.2%

## 2ND DOSE COVERAGE 2019 (SEPT – AUG)

SCHOOL COVERAGE		
Number of public schools	Number of schools visited	% Achieved for vaccination
4094	4033	99 %
LEARNER COVERAGE		
Number of learners in public schools	Number of learners vaccinated	% Achieved for vaccination
113 093	96744	86%



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# KNOW YOUR HEALTH PROFESSIONS: THE UROLOGIST



**A urologist is a physician who specializes in diseases of the urinary tract and the male reproductive system. Patients may be referred to a urologist if their physician suspects they may need treatment for a condition relating to bladder, urethra, ureters, kidneys, and adrenal gland.**

Urologists are trained to treat problems that affect the urinary tract. This is a system of muscles, tubes and organs, such as the kidneys. Urologists also treat problems with the reproductive system in both men and women.

Requirements  
At secondary level of education, generally a pupil must perform highly in Life

sciences, physical science and mathematics. Matric must be with a Bachelor's pass and meet the admission requirements (APS) set by the university.

## Qualification

The first four years of an aspiring urologist's training are spent in undergraduate school. Students can select any major for their degree program, as long as it meets the prerequisites for medical school.

Students learn to be physicians during the next four years, spent in a medical or osteopathic college. Typically, the first two years are spent in classroom and laboratory instruction. The third and fourth are devoted to clinical rotations.

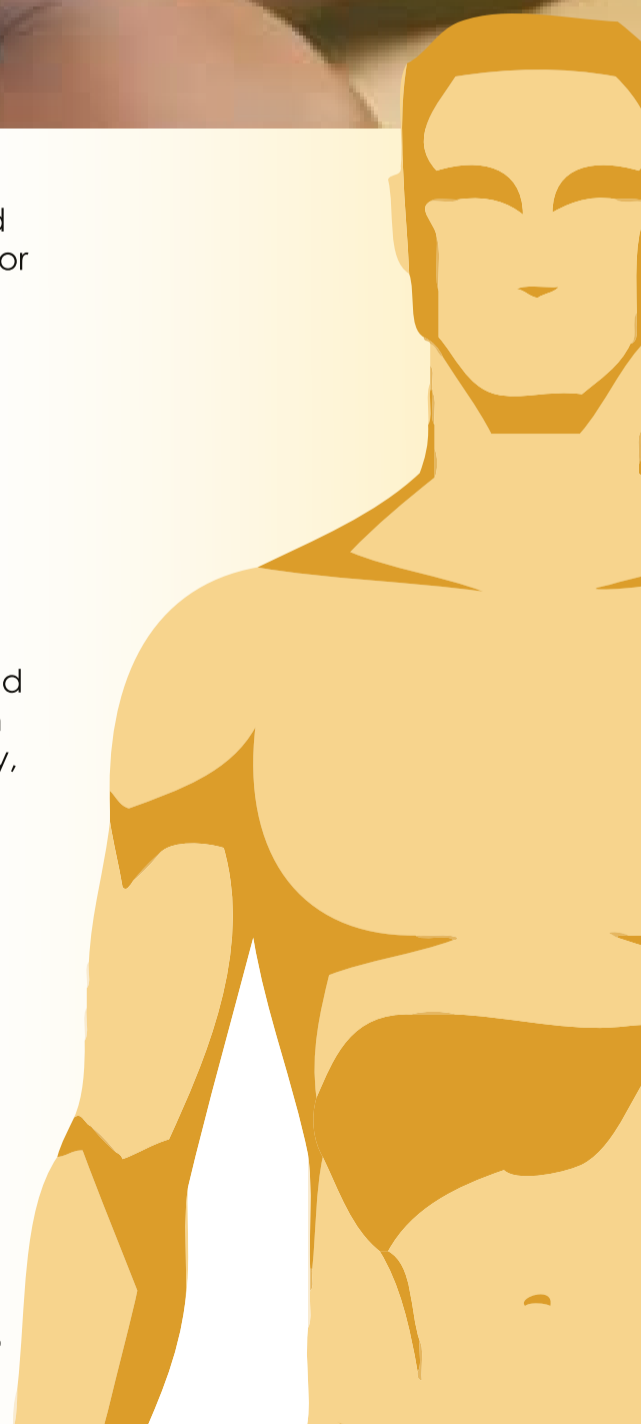
After graduating from medical school, new doctors become urologists by "matching" into a

residency program accredited by the Accreditation Council for Graduate Medical Education.

These are usually five years in length, though individual programs can be longer. The first year is spent in general surgery, learning basic clinical and surgical skills under close supervision. During the remaining four years, aspiring urologists learn to diagnose and treat common conditions such as kidney stones, male infertility, incontinence, congenital deformities and urological cancers.

## Personal Requirements

- pay attention to detail
- interested in helping people
- have excellent communication skills
- professional and ethical
- tactful and kind
- enjoy finding solutions to problems



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# UPCLOSE WITH DR RONISHA SATHIRAM

## A RESIDENT UROLOGIST AT GREYS HOSPITAL



### Health Chat Bulletin had an exclusive interview with Dr Ronisha Sathiram (40) who's the Head Clinical Unit Department of Urology at Greys Hospital.

She's been working for the Department of Health for 16yrs. She's passionate about her job and she loves her patients. She is encouraging patients to enquire and make use of the screening programs that the Department has, especially for clients who smoke, had bilharzia or have been exposed to river water, and patients that are working in chemical factories.

**Q: As the point of departure please state your name and designation, and a brief introduction about yourself?**

Ronisha Sathiram, Head Clinical Unit Department of Urology at Greys Hospital. I am 40 years old. I have worked for KZN DOH since January 2004 -16 years. I have lived in

Durban most of my life. I studied at University of Kwa Zulu Natal. I then went on to specialize in urology at UKZN. I have worked at the following hospital in Durban as an urologist: St Aidans, IALCH, King Edward and Prince Mshiyeni.

In addition to working at Greys I also run the urology services at Edendale Hospital as there is no urologist there and I assist the urology staff at Madadeni Hospital. I was the first female urologist to qualify in KZN. In addition to my work at Greys Hospital I am also an honorary lecturer at UKZN. I am solely responsible for the training and examining of medical students. I also train registrars who are specialising and studying towards

becoming urologists. I am involved in supervision of MMeds and I am assisting some students with their PhD. I am also an examiner at the College of Medicine of South Africa which is responsible for setting standards and examining the doctors that are studying to be urologists.

**Q: What ignited your passion for your career choice?**

I have always wanted to be a doctor. Whilst in medical school I have developed a passion for surgery. Urology is a discipline that allows you to perform open, endoscopic and laparoscopic surgery. I also enjoyed the delicate nature of the reconstructive surgery that is performed in urology. During my internship and medical school career, I found that many women were forced to go to a male urologist simply because there were no female urologists in KZN. Due to the intimate nature of the problems the females really appreciated having a female assist them. This made me realise that there was a desperate need to for a female to look after this part of our population.

**Q: What valuable lessons do you take away from your job on a daily basis?**

I am always humbled by the suffering that some of our patients go through. I have a family member who has been ill for most of his life and I think that this has definitely impacted on the way that I relate to patients. I feel that I understand their anxieties and their frustration more easily. It has also made me more empathetic to them. I love working in state, because I love being able to care for patients. Knowing that the majority of our population that do not have access to health care makes

me more determined than ever to ensure that they receive the best possible and most ethical healthcare. From work I have responsibility, patience and empathy. I have also learnt that no matter how little you have to work with, work to the best of your ability as you will make a difference in the life of someone.

**Q: What challenges have you encountered and how did you overcome them?**

The problem we are facing is that many doctors and health care providers do not have an adequate knowledge of urological conditions and therefore these patients are not managed properly or referred timeously. We strive to overcome this by being available for telephonic consults and we do telemedicine so that health care workers in remote areas can easily access our expertise. We also host regular training programs and lectures for GP's, nurses and the allied health care.

When I took over the undergraduate training I felt that the curriculum goals were not laid out clearly so I revised these and formulated notes for the medical students. We have also been working to formulate guidelines for the management and investigation of patients, which we hope that we will eventually be able to have on the department of health website so that it is accessible to all health care workers.

**Q: Are there any key messages that the public needs to understand when it comes to issues that are related to urology, what role can healthcare users play to**

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### assist the Department in dealing with the kind of ailments that you treat?

Many patients ignore certain important symptoms. I encourage patients who notice blood in their urine, difficulty passing urine, penile growths and testicular swellings to present urgently to their health care providers and not ignore these symptoms. I have also worked closely with certain occupational health clinics to set up screening guidelines for certain cancers.

I encourage patients to enquire and make use of the screening programs that we have, especially for clients who have smoked, had bilharzia or have been exposed to river water, and

patients that are working in chemical factories. We also work closely with other departments, to ensure that patients with risk factors for certain cancers and renal insufficiency are adequately educated.

### Please give us your closing comments Dr Sathiram?

I am proud to say that although we have an enormous patient load, we pay close attention to detail. The medicine that we practice at Greys Hospital is in line with what is regarded as first world medicine. We are always aiming to improve our knowledge to ensure that the patients who attend Greys Hospital urology get the best treatment available. We have

a good clinical governance program which ensures that our knowledge stays up to date and our management of patients is always audited against the accepted international treatment guidelines.

Our department is very friendly and we strive to be available to our patients and their family members. I feel that whether a patient has access private healthcare or not, they still deserve the best treatment available and I will continually strive to ensure that they get it. The urology teaching program has improved and KZN has one of the best post graduate teaching programs in the country. This is further evidenced by the fact that 100% of our candidates from

Greys Hospitals have passed their specialist exams.

We are also very happy to be part of a program where we train doctors from other African countries as urologists. These doctors are then able to go back to their country with an internationally recognised degree and serve the patients in their country. Thus far we have trained doctors from Libya, Ghana and Botswana.

# LIVE A HEALTHY LIFESTYLE AND LIVE LONGER

**The Department of Health is calling on all people of KwaZulu Natal (KZN) to take charge of their own health and be aware of the warning signs pointing to possible health risks. KZN people are requested to heed the call and join in the commemoration of Healthy Lifestyle Awareness Day which happens on the 21st of February every year.**

The Department continues to educate people about health benefits one enjoys from leading a healthy lifestyle as opposed to a sedentary lifestyle approach with no physical exercise that can fast alter our life expectancy margins.

This approach is largely prevailing amongst the youth and exposes them to obesity, diabetes and hypertension. Added to this, are multiple and other unnecessary challenges emanating from risky behavior that manifests health problems for young people.

A lot of people start the year with an impressive list of New

Year's resolutions, promising to eat more healthily, exercise more regularly and stop smoking. However, as the year progresses we tend to give up on these aspirations. However, the key to living longer and healthier is to maintain a healthy lifestyle.

According to 2018 World Health Organisation levels of insufficient physical activity. Globally, around 23% of adults aged 18 and over were not active enough in 2010 (men 20% and women 27%). In high-income countries, 26% of men and 35% of women were insufficiently physically active, as compared to 12% of men and 24% of women in low-income countries.

### WHO KEY FACTS

- Insufficient physical activity is one of the leading risk factors for death worldwide.
- Insufficient physical activity is a key risk factor for noncommunicable diseases (NCDs) such as cardiovascular diseases, cancer and diabetes.
- Physical activity has significant health benefits and contributes to prevent NCDs.
- Globally, 1 in 4 adults is not active enough.
- More than 80% of the

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world's adolescent population is insufficiently physically active.

- Policies to address insufficient physical activity are operational in 56% of WHO Member States.

- WHO Member States have agreed to reduce insufficient physical activity by 10% by

2025

The adoption of a healthy lifestyle is the best solution to halting the prevalence of non-communicable diseases such as hypertension,

diabetes, high blood pressure and some cancers, which have now reached epidemic proportions.

Although not all diseases are preventable, a large proportion of deaths, particularly those from coronary heart disease and lung cancer, can be avoided.

## There are five action areas for a healthy lifestyle

1. Good nutrition; cut down salts, fat and sugar intake.

2. Physical activity, engage in physical activity for 30-45 minutes at least 3-5 times a week. (Physical activities including activities such as walking, jogging, dancing, etc.)

3. Alcohol; avoid drinking

4. Tobacco control; stop or quit smoking. Do not use drugs

5. Practise safe sex; use condom every time you have sex.

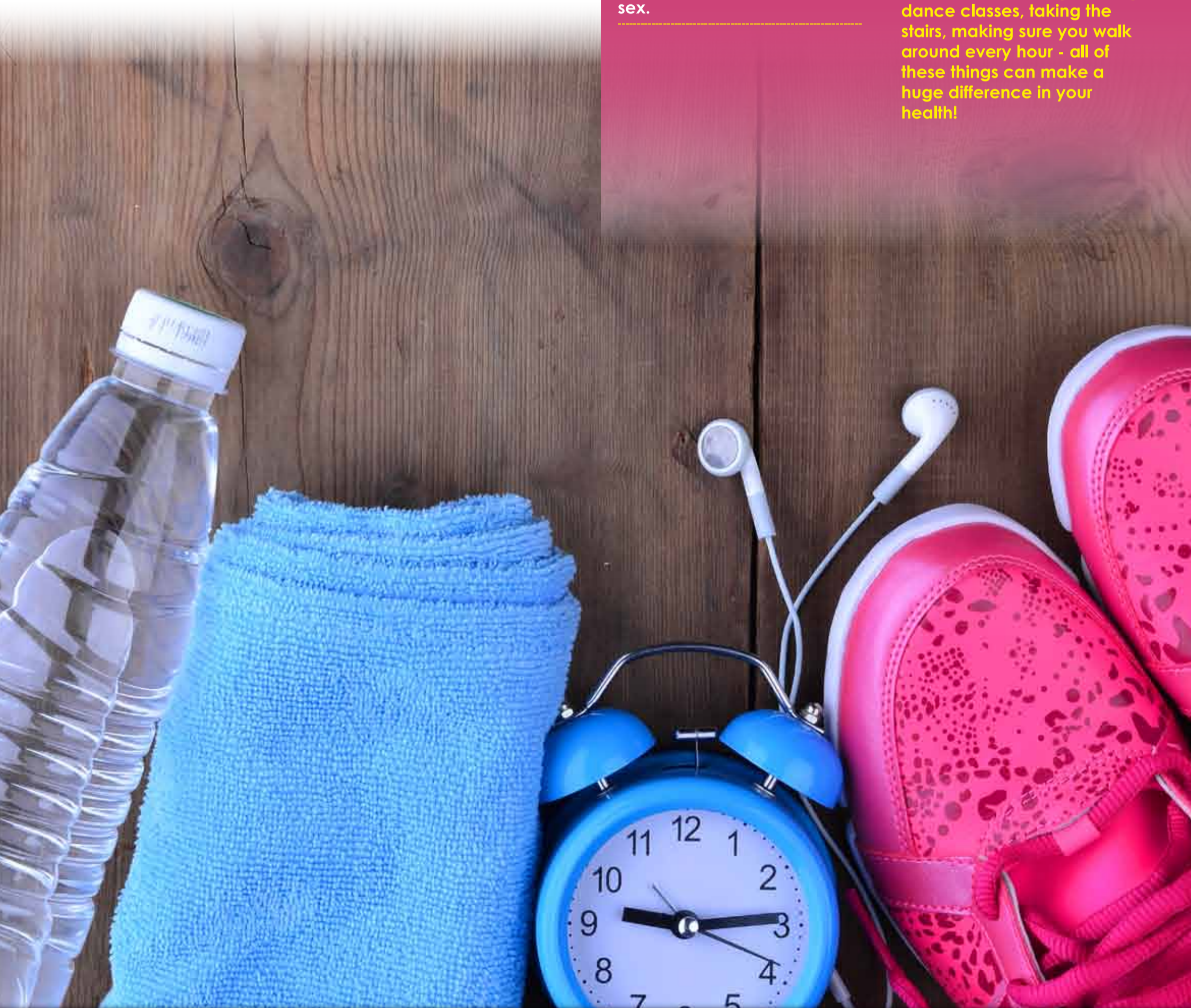
## Exercise - but make it fun!

- Movement is the key to living a healthy life. But this doesn't mean you have to spend hours in the gym every day.

- Research has shown that just working out for 30 minutes a day can increase your lifespan, prevent you from getting sick by strengthening your immune system and eliminate stress!

- That's right - exercise gets rid of stress and helps not only to keep you fit and healthy but sleep better too!

- The trick with exercise is to make it fun! Walking, cycling, dance classes, taking the stairs, making sure you walk around every hour - all of these things can make a huge difference in your health!



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# YOUR HEALTH IS YOUR RESPONSIBILITY



## NUTRITION

**┌ Nutrition is defined as the intake of food considered in the relation to the body's dietary needs. └**

Good nutrition – an adequate, well balanced diet combined with regular physical activity – is the basis for good health.

Poor nutrition can lead to reduced immunity, increased susceptibility to disease, impaired physical and mental development, and reduced productivity. Good nutrition is vital to good health, disease prevention, and essential for healthy growth and development of children and adolescents.

According to WHO (World Health Organization); nutrition is a critical part of health and development. Better nutrition is related to improved infant,

child and maternal health, stronger immune systems, safer pregnancy and childbirth, lower risk of non-communicable diseases (such as diabetes and cardiovascular disease), and longevity. Healthy children learn better.

People with adequate nutrition are more productive and can create opportunities to gradually break the cycles of poverty and hunger. Malnutrition, in every form, presents significant threats to human health.

Today the world faces a

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double burden of malnutrition that includes both undernutrition and overweight, especially in low- and middle-income countries. Good nutrition is an important part of leading a healthy lifestyle. Combined with physical activity, your diet can help you to reach and maintain a healthy weight, reduce your risk of chronic diseases (like heart disease and cancer), and promote your overall health.

It has been found that unhealthy eating habits may contribute to obesity, even for people at a healthy weight; a poor diet is associated with major health risks that can cause illness and even death. These include heart disease, hypertension (high blood

pressure), type 2 diabetes, osteoporosis, and certain types of cancer.

By making smart food choices, you can help protect yourself from these health problems. The link between good nutrition and healthy weight, reduced chronic disease risk, and overall health is too important to ignore.

By taking steps to eat healthy, you'll be on your way to getting the nutrients your body needs to stay healthy, active, and strong. As with physical activity, making small changes in your diet can go a long way, and it's easier than you think!

## TIPS ON HOW TO START ADDING NUTRITION TO YOUR LIFE:

### DON'T SHOP WITHOUT A LIST!

This way, you avoid buying junk or unnecessary and unhealthy food. To make sure you don't give in to your impulses, plan ahead and write down what you need beforehand.

### EAT EGGS:

preferably for breakfast. Eggs are incredibly healthy, especially if you eat them in the morning.

### INCREASE YOUR PROTEIN INTAKE:

Good sources of protein include dairy products, nuts, peanut butter, eggs, beans and lean meat.

### DRINK ENOUGH WATER:

Many studies have shown that drinking water may benefit weight loss, weight maintenance and even slightly increase the number of calories you burn daily.

### EAT YOUR GREENS FIRST:

A good way to ensure that you eat your greens is to eat them as a starter. By doing so, you will most likely finish all of your greens while you are the hungriest and be apt to eat less of other, perhaps less healthy, components of the meal.

### BECOME MORE ACTIVE:

Good nutrition and exercise often go hand in hand. Exercise has been shown to improve your mood, as well as decrease feelings of depression, anxiety and stress.

### GET A GOOD NIGHT'S SLEEP:

The importance of good sleep cannot be overstated. Sleep deprivation disrupts appetite regulation, often leading to increased appetite, which results in increased calorie intake and weight gain.

### CHOOSE HEALTHY OILS:

Swap these unhealthy oils for healthier alternatives, such as extra virgin olive oil, avocado oil or coconut oil.

### EAT SMALLER PORTIONS USING SMALLER PLATES:

Eating from a large plate can make your portion look smaller, while eating from a small plate can make it look bigger. Completely revamping your diet all at once can be a recipe for disaster. Instead, try to incorporate some of the small changes in this article to make your diet healthier. Some of these tips will help you keep your portion sizes reasonable, while others will help you add nutrients or adapt to something new.

The path to your healthier self is one that requires baby steps and not leaps, keeping in mind that overall health is not a destination but rather a journey.



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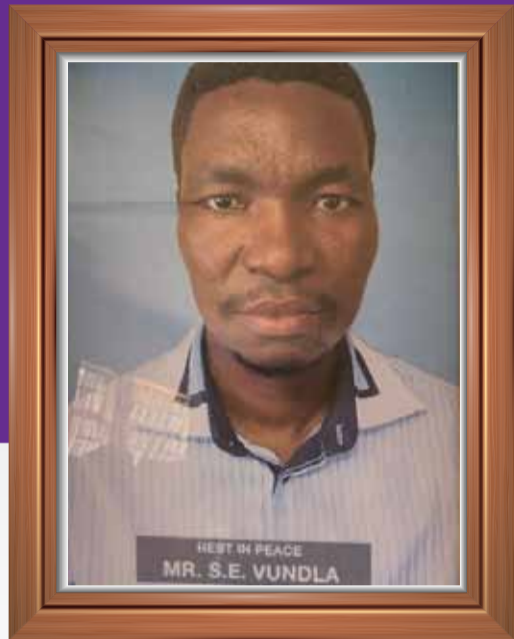


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# A WARM FAREWELL FOR TWO BELOVED SECURITY GUARDS



**Mr Sakhile Emmanuel Vundla and Mr Muziwemvelo Terrence Mtshali were bid farewell by their colleagues and families at a memorial last week held at Ngwelezane Hospital.**

Mr Vundla and Mr Mtshali sadly passed away after a car accident on Friday, 07 February 2020.

Mr Mtshali had previously worked at Ngwelezane Hospital but was appointed as the head of security at Queen Nandi Regional Hospital in 2015. He was known as a quiet mannered, intelligent man who was excellent at his administrative tasks at his workplace.

Mr Vundla joined the Department in 2015 from the Department of Correctional Services. He too was known as a quiet but friendly and important member of the Manguzi Hospital.

Mr Mathenjwa, who spoke on behalf of Mr Vundla's colleagues noted his diligence and said, 'He said to me, "You can even wake me at 12am, it's okay. He was always ready to help'.

The memorial was attended by employees of the Department, staff from Provincial Security Directorate at Head office led by Mr Linda Zondi and the Provincial Chaplain, Apostle Sgu Shangase who delivered a moving message of spiritual support on behalf of the management of the Department.



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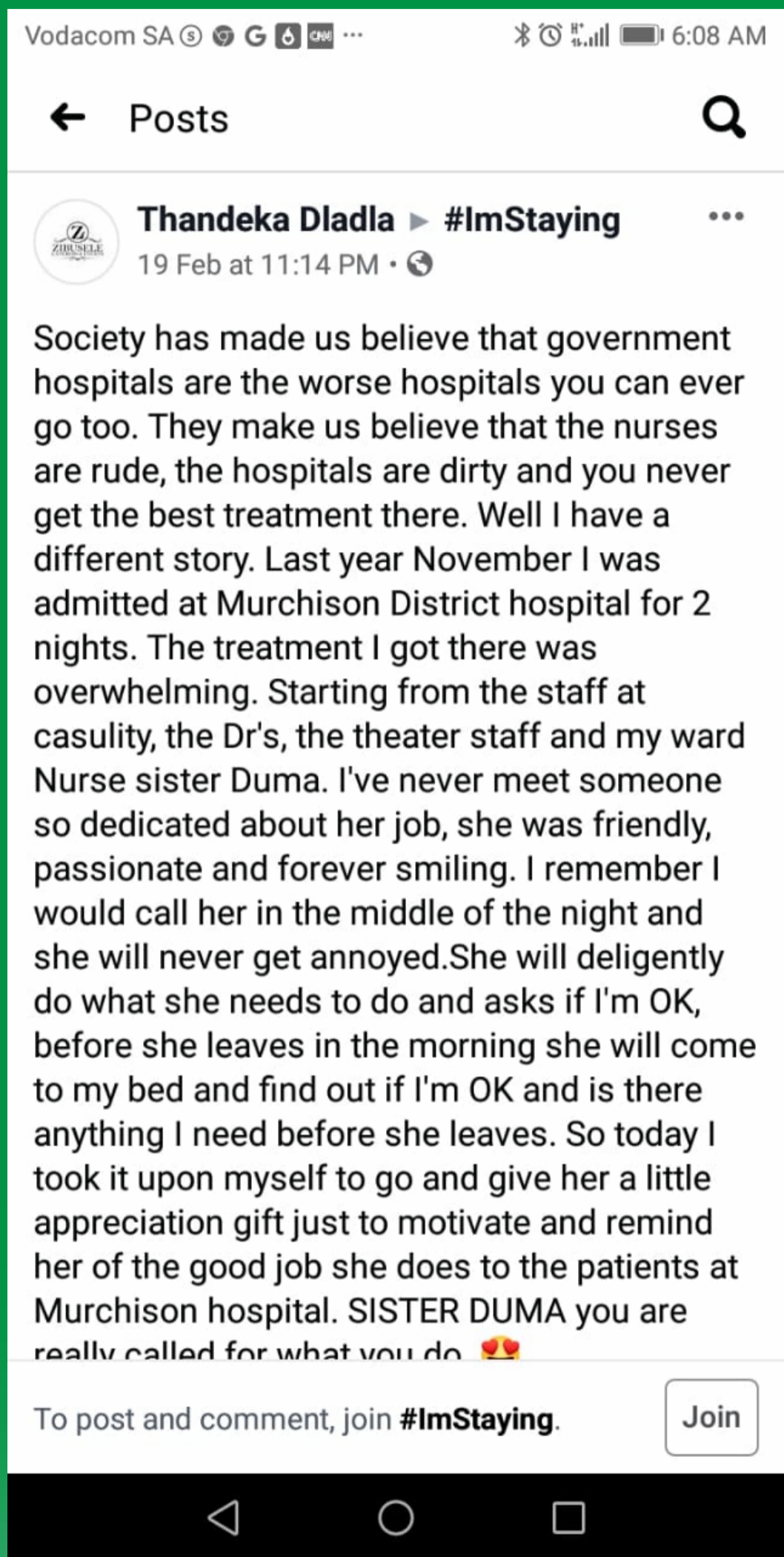
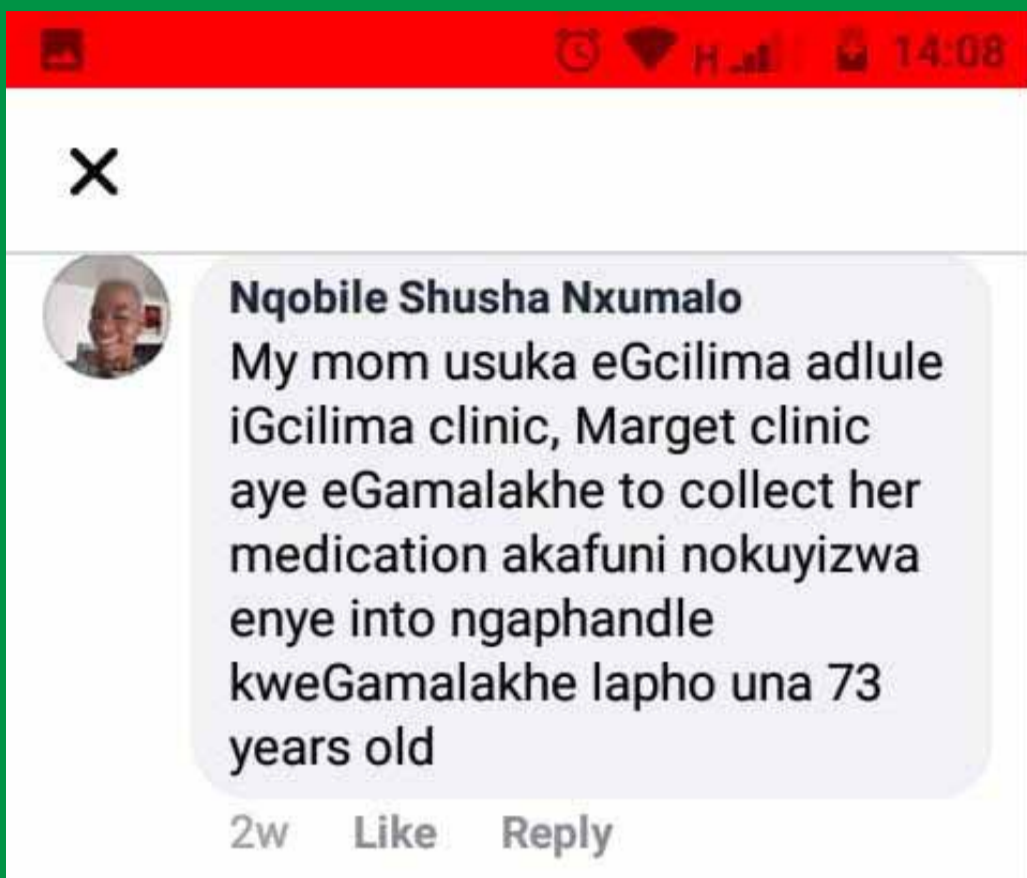
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# COMPLIMENTS



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# COMPLIMENTS

44 minutes ago

Ikhona iGender enjengo Professional Nurse Mbambo from Addington Hospital eyenza oku right. Asimncome esaphila. Uze aye kwiQuee esiza abantu. Siyakuthanda uyayazi into owayizela emsebenzini wakho. Uqhubeke ungakhathali Mageza.....

You, Khetiwe Dubazana and 1.6K others

**Fundiswa Mzobe Cwele**

Aibo izolo around 6pm sihambise umakhelwane wami at Gamalakhe clinic, siya lapha my attitude was bazongithola kahle make benza lokudakwa kwabo. By 8:15pm we were back home sebembhalisile selalisiwe embhedeni kwenziwe yonke into, ai bandla Gamalakhe clinic ngiyithulela isigqoko 🙏

2w Like Reply

**ZoeQwaberh Precious Gumede**

on mobile

I'd like to extend my gratitude to the department and the Stanger hospital in Stanger. I gave birth on 12 Feb having to come in on the 9th. Not knowing fate one always expect the worst but from the day I came in to the discharge date we got nothing but the best care from the night and morning team including doctors and nurses....

32 minutes ago · Sent from Mobile

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# COMPLIMENTS



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# PATIENT RIGHTS & RESPONSIBILITIES

1

## EVERY PATIENT HAS THE RIGHT TO:

- A healthy and safe environment
- Participation in decision-making regarding his/ her treatment
- Access to health care
- Knowledge of one's health insurance / medical aid scheme
- A choice of health services
- Be treated by a named and qualified health care provider
- Confidentiality and privacy
- Informed consent to assist in their decision making
- Refusal of treatment
- Be referred for a second opinion
- Continuity of care
- Complain about health services

2

## YOU HAVE THE RESPONSIBILITY TO:

- To provide accurate information pertaining the health of the patient
- To ensure the patient follows the medical recommendations given
- To respect other patients, visitors and health employees
- To understand that other patients and their families might need more attention than them
- To inform the health facility on a patient's information such as their address and contact details
- To ensure payment is made for the services

3

**The Department of Health urges patients and their families who have visited public health facilities and have not been serviced in a satisfactory manner to return to that health facility and file a complaint with the public relations officer (PRO), the CEO or operations manager.**

If you are still not satisfied, contact the KZN Health ombudsman, Mboneni Bhekiswayo, by writing to him at: 330 Langalibalele Street, Pietermaritzburg 3201 or email him on; [mboneni.bhekiswayo@kznhealth.gov.za](mailto:mboneni.bhekiswayo@kznhealth.gov.za)

**or call him on 033 395 3275.**

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**THE DEPARTMENT OF HEALTH ALSO HAS A 24 HOUR CALL CENTER. DIAL 0800 005 133**



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# WHO SAID WHAT THIS WEEK

"As of 17 February, 37 shipments of #COVID19 laboratory testing kits have been dispatched to 34 countries and three regional offices. In total, 56 countries will be receiving these kits."

**World Health Organization**

"WHO is working with an international network of statisticians & mathematical modelers to estimate key epidemiologic parameters

of #COVID19, such as the incubation period, case fatality ratio, serial interval"

**World Health Organisation**

"Drinking and driving is one of the main causes of road crashes .

Never drink and drive.#RoadSafety"

**World Health Organisation**

"Children's exposure to commercial marketing of junk

food and sugary beverages is associated with purchase of unhealthy foods and overweight and obesity, linking predatory marketing to the alarming rise in childhood obesity".

**World Health Organisation**



## INVENTIONS THAT SHAPED THE WORLD

### THE BAND AID aka "THE PLASTER"



Earle Dickson a young cotton buyer at Johnson & Johnson in 1920 took two Johnson & Johnson products – surgical adhesive tape and gauze – and invented the first ready-made adhesive bandage his wife could apply herself.

Earle took a strip of surgical adhesive gauze (or adhesive plaster, as it was called back then) 18 inch long and 3inch wide, and laid an 18inch long strip of gauze lengthwise down the middle.

He covered it with crinoline fabric and rolled it up. So when Josephine cut herself in the kitchen, she could take Earle's invention, unroll a bit and cut it straight across, giving her a ready-made bandage with gauze in the middle and adhesive plaster on both sides. Once the public realized how much it needed BAND-AID® Brand Adhesive Bandages, demand grew

exponentially. By 1924, Johnson & Johnson invented machinery to make them individually pre-cut. Today it is one of the worlds' most iconic and innovative consumer products.

Earle Dickson, the young cotton buyer who invented a new wound care product, was recognized for his invention, earning positions of increasing responsibility throughout his career and achieving the rank of vice president and member of the Johnson & Johnson Board of Directors.



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PROVINCE OF KWAZULU-NATAL

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