



# KZN HEALTH MEC STILL CONCERNED BY PEOPLE UNKNOWINGLY LIVING WITH TB

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KwaZulu-Natal Department of Health



kznhealth



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KZN Department of Health

# PATIENT RIGHTS

1

## IT IS YOUR RIGHT TO BE RESPECTED 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

## PATIENT AND FAMILY RESPONSIBILITIES

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

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

**IT'S FREE**  
from Telkom.

4

If calling from a cellphone, you can call the number and ask to be called back.

5

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



# KZN HEALTH MEC STILL CONCERNED BY PEOPLE UNKNOWINGLY LIVING WITH TB



URGES PEOPLE TO GET SCREENED IF THEY HAVE TB SYMPTOMS AS GOVERNMENT WILL NOT WIN TB FIGHT ALONE



**ALTHOUGH KwaZulu-Natal has made significant progress in improving the rate of curing people who have TB, there are still far too many new TB infections, and too many people who are unknowingly living with the disease. All of this is making KwaZulu-Natal Health MEC Dr Sibongiseni Dhlomo extremely concerned.**

On 27 March 2018, MEC Dhlomo embarked on the third massive TB awareness campaign in under a week, at Eshowe, on the north coast of KwaZulu-Natal. This follows a high profile World TB event held in Durban on 22 March 2018 and another awareness campaign held on World TB Day at KK Hostel, Clermont, on 24 March 2018.

Accompanied by the Department's TB ambassador, Prince Nhlanganiso Zulu, MEC Dhlomo handed out pamphlets with TB information at an Eshowe taxi rank and also engaged with taxi operators and commuters about how to prevent TB, how to spot its signs and symptoms as well as the importance of adhering to the correct treatment schedule in order to prevent Drug-Resistant TB.

KwaZulu-Natal has made steady progress in the fight to curb the spread of TB. In 2016 there were a total of 62 790 new confirmed TB cases which translated to 580 cases per 100 000 population. This signifies a decrease from 73 318 TB cases in the previous year. The Districts with more than 700 per 100 000 population TB notification rate are ILembe, UGu and eThekweni

respectively.

Despite the high burden of TB and high TB and HIV co-infection rate of 65%, the provincial treatment outcomes have progressively improved from 55% in 2005 to 88.6% in 2016 which surpasses the target of 85%.

However, eThekweni, Amajuba and UMgungundlovu did not meet this target and have to revive strategies which were previously implemented which led to a reduction in the defaulter rate, which is patient education, tracking and tracing of patients.

In a bid to fight TB head-on, TB screening is now standard practice at all health facilities in the province, which was enforced by a circular in 2014. The circular states that all attendees regardless of the reason for the visit should be screened for TB.

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Speaking at Eshowe, MEC Dhlomo said: "We have now decided that the fight against TB is bigger than one MEC, one Department, or one Government. It needs all of us. Therefore, the clarion call by His Majesty King Goodwill Zwelithini that all traditional leaders, traditional healers and priests should get involved in the fight to curb the spread of TB is an extremely important one. TB, from time immemorial, has been killing people. And it continues to do so.

In KZN, the figures are enormous. We are told that if you have 250 new TB infections per 100 000 people, that is considered by the WHO as an epidemic. We in this province are four to five times more. We are sitting with up to 800 new TB infections.

So, you therefore can see how big the problem is. Unless and until KZN puts a strong fight on TB, whatever efforts are being made in the whole country are not going to have any impact. Hence our appreciation for the leading role that His Majesty is playing to call upon all of us to continue in the fight against TB.

Yes, TB and HIV are twins. HIV comes in and lowers your immunity so much, that TB becomes an opportunistic infection and affects a person who would otherwise not have been affected.

We are at Eshowe now, but we will intensify this campaign through the province. Our Minister happens to be a Stop TB chairperson in the world. We have to stop the spread of TB and eliminate it in KwaZulu-Natal."

**MEC Dhlomo says he is extremely concerned by people who do not finish their TB treatment as this provides fertile ground for the diseases to become drug-resistant TB, which is complicated and takes longer to treat.**

"It is really a big problem. If you don't complete your treatment, you place yourself at risk of having complications. We urge our people to finish medication for six months.

"The most dangerous TB (including MDR-TB) patients are the ones that we don't know about. Undiagnosed TB and MDR-TB patients are all around us. We have to find and diagnose these TB and DR-TB patients before we can stop transmission.

"That is why we are accelerating this campaign. We want to see these people in our clinics and hospitals. If they have any of these signs, they must really come forward."



# HELLO? CAN YOU HEAR ME?



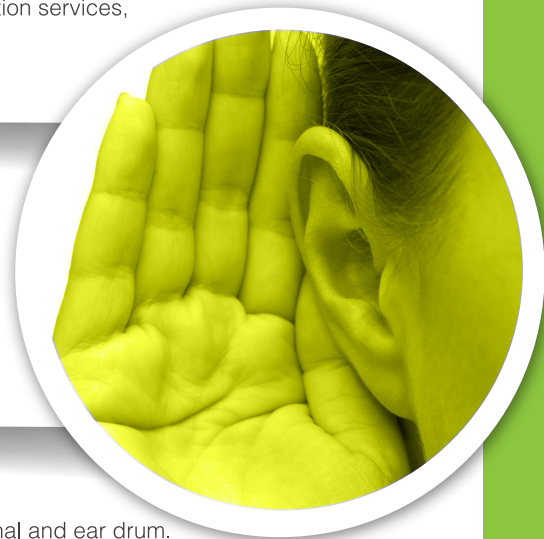
Earlier this month, on 03 March 2018, World Hearing Day was commemorated globally to raise awareness on how to prevent deafness and hearing loss and promote ear and hearing care across the world.

This year's World Health Organisation theme was **"Hear the Future"**, supported by key messages that will highlight:

- The expected rise in prevalence of hearing loss globally over the coming years.
- That committed efforts are required to prevent hearing loss.
- The need to ensure that people with hearing loss have access to the required rehabilitation services, communication tools and resources that they require.

## What you need to know about hearing Loss

- Hearing loss is a major public health issue that is the third most common physical condition after arthritis and heart disease.
- Gradual hearing loss can affect people of all ages.
- Congenital hearing loss means you are born without hearing.
- Hearing loss is an invisible condition;
- In adults, the most common causes of hearing loss are noise and aging.



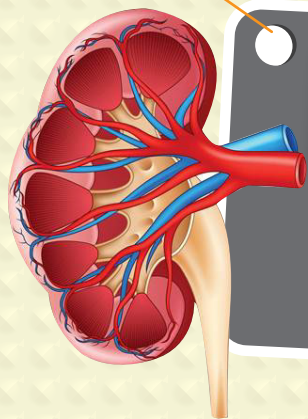
## Three Types of Hearing Loss

- Conductive hearing loss - when hearing loss is due to problems with the ear canal and ear drum.
- Sensorineural hearing loss (SNHL) - when hearing loss is due to problems of the inner ear, also known as nerve-related hearing loss.
- Mixed hearing loss - refers to a combination of conductive and sensorineural hearing loss. This means that there may be damage in the outer or middle ear and in the inner ear or auditory nerve.

## Signs that you may have hearing loss

- You have trouble hearing on the telephone.
- You have trouble following a conversation when people are talking at the same time
- When your TV is always too loud
- You are tired from straining to hear conversations
- You have trouble hearing in noisy environments.

# YOUR KIDNEYS & YOUR PREGNANCY



## Did You Know?

CKD is the 8th leading cause of death in women, with close to 600,000 deaths each year

-WorldKidneyDay.org

Since World Kidney Day falls on the second Thursday in March, this year it coincided with International Women's Day, 8 March 2018. Aptly so, as Chronic Kidney Disease (CKD) affects approximately 195 million women worldwide according to the World Kidney Day organization. With 14 % prevalence in women, it affects 2 % more women than men.

Although both genders should be proactive in preventing CKD from developing in their bodies, women in particular should be even more cautious of their lifestyle choices as CKD can have adverse effects on pregnancy and reduce fertility

Women who have CKD are at increased risk for negative outcomes for the mother and the baby. Pregnancies in women with advanced CKD are most challenging with high rates of hypertensive disorders and preterm births. They may have reduced fertility but conception is possible, even if infrequent, on dialysis. On dialysis, results improve with intensive (daily or nearly daily) dialysis treatment, thus calling for dedicated programs for women of childbearing age [10].

In successfully transplanted women, fertility can be restored and chances of successful birth increase. However, as complications are observed more often than in the general population, preconception medical counselling should always be sought. There is a clear need for higher awareness on CKD in pregnancy, to timely identify CKD in pregnancy, and to follow-up women with CKD during and after pregnancy. In this respect, pregnancy may be also a valuable occasion for early diagnosis of CKD, thus allowing planning of therapeutic interventions. -WorldKidneyDay.org

## TIPS ON HOW TO TAKE CARE OF YOUR KIDNEYS

- Drink water regularly; don't wait until you are thirsty.
- Lower your sugar intake. About half of people who have diabetes develop kidney damage, so it is important for people with diabetes to have regular tests to check their kidney functions;
- Monitor your blood pressure; high blood pressure is the most common cause of kidney damage;
- Eat healthy and keep your weight in check. This can help prevent diabetes, heart disease and other conditions associated with CKD;
- Do not take over-the-counter pills on a regular basis. Common drugs such as non-steroidal anti-inflammatory drugs are known to cause kidney damage and disease if taken regularly.

# HOW MUCH DO YOU KNOW ABOUT SALT?



## THE WORLD HEALTH ORGANISATION (WHO)

recommends that adults  
consume less than 5g  
(a leveled teaspoon)  
per day.



**1.** High salt consumption leads to an increased risk of ; heart disease, stroke and high blood pressure.

**2.** Fruits and vegetables contain potassium which can help reduce blood pressure.

## How You Can Reduce Your Salt Intake

- Not adding salt during the preparation of food
- Not having a salt shaker on the table;
- Limiting the consumption of salty snacks
- Choosing products with lower sodium content



# THUMBS UP

## FOR KWAMASHU CHC MATERNITY WARD FOR SUCCESSFUL DELIVERY OF TWINS IN BREECH POSITION



**KwaZulu-Natal Health MEC Dr Sibongiseni Dhlomo has congratulated the maternity department of KwaMashu Community Health Centre for the successful natural birth of twins who were in a breech position.**

Ms Ziphi Precious Ndlovu, 26, recently delivered her twin girls Ziyanda and Azande Mtshali at KwaMashu CHC, with the assistance of advanced midwife Sr Doreen Nontlahla Ndawonde and her team. They were born 35 minutes apart, weighing 2.3kg and 2.5kg respectively. Both were in a breech presentation during birth, which is when a baby's head does not move closer to the birth canal a few weeks before birth. In such cases, the baby's buttocks and/or feet are positioned to be delivered first. Speaking to the KZN Department of Health, Sr Ndawonde said: "Delivering a breech is within my scope, but it is a challenging situation, especially when it is twins. You may never know the outcome. That is why they are usually not delivered at clinics because things can get

complicated. I did what I could, and am happy that it all went well." Dr Neil Moran, the Head of Clinical Department: Obstetrics and Gynaecology in the KZN Department of Health, says that in South Africa twin pregnancies occur on an average rate of 1 in 50 pregnancies. And about 15% or these will have both babies in the breech presentation at the time of delivery. "These days the great majority of breech presentations would be delivered by caesarean section, and so it is quite unusual for both twins to be delivered vaginally. Well done to the midwives involved for a professional job done." He adds that twins in general are higher risk than singleton pregnancies both for the mother and for the babies – and that unusual presentation of the babies at birth is more common.

"For the mother, a particular risk around the time of delivery is an increased risk of post-partum haemorrhage (heavy bleeding after the delivery of the baby). The mother is more likely than usual to go into preterm labour than with a singleton pregnancy, which means that the babies are more likely to suffer complications of prematurity. Malpresentations of the babies at are also more common, which can lead to difficult or traumatic delivery if no one with advanced skills in conducting delivery is present."

When asked what complications could have typically arisen in a case like this, Dr Moran said: "As the babies were smaller than average newborns, the mother was probably a little bit preterm and had gone into preterm labour. If the mother had arrived in time at the hospital, when she was still early in labour, the doctors would have probably chosen to do a caesarean section because both twins were breech. In less skilled hands breech deliveries by the vaginal route can be problematic as the baby can get injured or stuck during delivery. This could lead to injury or even death of the baby."

Dr Moran adds that all doctors and midwives who work in maternity should

be taught how to deliver breech babies and conduct twin deliveries. This, he says, is part of the standard Essential Steps in the Management of Obstetric Emergencies (ESMOE) course that is used to improve and sustain skills of doctors and midwives working in maternity.

"ESMOE is one of the important skills that all Advanced diploma midwives should be competent in. Fortunately, the attending midwife in this case was an advanced midwife. She obviously applied what she had been trained to do and successfully conducted the breech deliveries without any complication. In the end it was a better outcome than having a caesarean section. Also, the mother recovered well without excessive bleeding."

The twins' mother, Ms Ndlovu, thanked the maternity team at KwaMashu CHC and said the two week old babies are healthy.

"They are doing well, and growing slowly. I am very pleased with the way I was treated at the health facility. I was extremely worried, and had doubts that my babies would live because I was told that the breech presentation is very risky. I am extremely grateful to the nursing staff at KwaMashu CHC." She says that although the father of the babies is unemployed and she is looking after the twins herself at KwaMashu Hostel, where she lives, she is planning to register the babies with the South African Social Security Agency so that she can receive a child support grant.

Reacting to the uneventful birth of these twins, MEC Dhlomo says: "We wish to congratulate all the midwives involved in the delivery of these babies. It is always touching to see our healthcare professionals succeeding in complex clinical situations. This is once again testimony that we have among us people who are highly skilled, committed and dedicated to their work. We are extremely proud of them, may they continue working hard."



# SPOTLIGHT ON DOWN SYNDROME



World Down Syndrome Day has once again been commemorated globally, on Wednesday 21 March 2018. Down syndrome is a type of mental retardation caused by extra genetic material in chromosome 21. Regardless of the type of Down syndrome a person may have, all people with Down syndrome have an extra, critical portion of chromosome 21 present in all or some of their cells. This additional genetic material alters the course of development and causes the characteristics associated with Down syndrome.

You may be a parent, sibling, grandparent or a caregiver of someone with Down syndrome. Helping a child/person with special needs can be hard at times. When you feel like you're burnt out or your patience is running low, get help.

When your child has Down syndrome, one of the most useful things you can do is learn as much about it as you can. You might search online for programs and resources to help your child.

You can also talk with other parents whose kids have Down syndrome so you can learn tips and find out what to expect. And, as your child grows, you can work with doctors, therapists, teachers, and other specialists.

Beyond these big-picture tasks, it can also help to know what you can do day to day. Not only to support your child, but to take care of yourself, too.

Every family has their joys, stresses, and challenges, but when you have a child with Down syndrome, things look a little different. Besides juggling school, music lessons, sports, and jobs, you typically have a lot of extra visits with doctors and therapists as well.

That makes it even more important to accept help when it's offered and to pay attention to your own needs.



## Here are a few ideas:

- Build a support system. Invite your friends and family to take part in caregiving. They can let you have a little time to yourself to walk, read a book, or relax. A break, even a small one, can help you be a better parent and partner.
- Talk about your challenges. People want to help, but don't always know how. A simple, "It's hard to get a healthy dinner on the table with all these appointments," opens a door and gives them ideas of what they can do.
- Keep a list of things you need. And don't be afraid to use it. Next time someone says, "Just let me know how I can help," you'll be ready.
- Find time for friends. Even if it's just a small moment after the kids go to bed, friends can help you laugh and recharge after a long week.
- Go easy on yourself. Everyone needs a break. You might also think about seeing a therapist. They can help you work through your feelings and give you tools to handle everyday stresses.
- Take care of your health. Exercise and eat well, even when you feel burnt out. Try to make a plan and stick to it as best you can.

# ETHICS TALK

## VALUES THAT DRIVE ETHICAL BEHAVIOUR IN A PUBLIC SERVICE CONTEXT

### OPENNESS AND TRANSPARENCY

Openness and transparency concern the extent to which the functioning of government institutions is open to public scrutiny. It requires mechanisms to ensure that all public processes and programmes are transparent and open to the public.

#### • Representation

From a South African perspective, the Constitution (Section 195 [1]) stipulates that public institutions must reflect the composition of the population in management positions and in other occupational groups. Representation as a value requires that public institutions represent their clients (the public), empathise with them, and view problems from their perspectives.

#### • Legitimacy

Legitimacy is the perception among citizens that the government and its actions are legally and morally correct and acceptable. It is important that the actions of political representatives and public officials contribute to the acceptance of government decisions, programmes, and policies.

#### • Accountability

In its broadest sense, accountability is an obligation to expose, explain, and justify actions. Public accountability demands that the actions of public institutions be publicized to encourage public debate and criticism.

### Prescribed Guidelines (within which we work)

In terms of ethical governance the following prescribed guidelines can be identified:

- Legal rules: every action of public institutions must be within (intra vires) the limits of enabling acts and regulations as binding documents.
- Fundamental rights: Chapter 2 of the Constitution lists the fundamental rights that are binding on all public institutions.
- Codes of ethics: the Public Service Act, Act 103 of 1995, set out rules governing conduct. It reflects the honest desire of public employees to serve their respective clients with dignity and integrity.
- Administrative justice: apart from the normative guidelines of public management, Section 24 of the Constitution provides for specific guidelines in adherence to administrative justice:
  - discretionary powers must not be abused;
  - no financial resources should be wasted, and effective work
  - performance must be maintained at all times
  - the actions of a public official may not benefit or wrong any individual; and
  - the actions of public officials should be such that the effectiveness of public institutions is absolutely above suspicion

**When all is said and done it boils down to;**  
***“Government actions must always be fair and reasonable towards every citizen, irrespective of race, religion, or language group. Must not be in conflict with any legislation, must be fair and reasonable and performed with the necessary authority”***



**health**

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