

## 

## Department: Health PROVINCE OF KWAZULU-NATAL SEPTEMBER 2017 PROFESSIONAL NURSE ED FOR BIRTH OF **ADRUPLETS**





BIRTH OF QUADRUPLETS PAGE 04



BEWARE OF THE SILENT KILLER THAT IS KIDNEY DISEASE PAGE 06



HAVE FUN BUT PREVENT UNPLANNED PREGNANCY PAGE 08



Facebook - KwaZulu-Natal Department of Health



Twitter - @kznhealth



Instagram - kznhealth



KZN Department of Health

### PATIENT RIGHTS

### 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

### 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

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

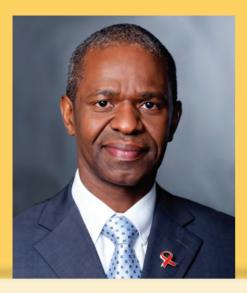
or email him on; mboneni.bhekiswayo@kznhealth.gov.za

or call him on 033 395 3275.

The Department of Health also has a 24 hour call center.

**DIAL 0800 005 133** 

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



## MESSAGE FROM THE MEC FOR HEALTH

Dr SM Dhlomo

WE are pleased to commemorate the first anniversary since we started implementing the new Universal Test and Treat (UTT) policy, in September 2016. In line with this approach, anyone who tests positive for HIV after being counselled is immediately initiated on treatment, without having to wait until their CD4 count drops to a certain level.

It will be remembered that until a year ago, people were initiated on antiretroviral (ART) only once their CD4 Count had dropped to 500. Prior to that, the threshold was 350 and previously 200. The new Universal Test and Treat government policy approach is in line with the World Health Organisation's guidelines which stipulate that urgent commencement of treatment for people who are HIV positive – regardless of their CD4 Count – is extremely beneficial.

Indeed, this "Test and Treat" approach is an extremely significant milestone in our ongoing journey to improve access to antiretroviral treatment and curb the spread of HIV infection across the country. It will contribute to the National Development Plan goal of increasing life expectancy to at least 70 years by 2030, because people diagnosed with HIV can also live long and healthy lives once they are on ARV medication.

September also gives us an opportunity to create public awareness about Albinism. This reminds us about the importance of relating to those living with Albinism as we would to anybody else. We must forget about all the myths and stereotypes surrounding the condition once and for all. We need to remember that any one of us – or our children – could have been born with Albinism.

I am also very excited that World Palliative Care Day is being commemorated in September. I am quite passionate about this discipline in the field of healthcare as it affords us as medical professionals an opportunity to lessen the pain and suffering that the sick and injured go through. We hope that partnerships that we have formed with organisations such as the Hospice Palliative Care Association of South Africa will strengthen our efforts to integrate Palliative Care into the mainstream healthcare system.

Palliative care advocates the provision of good care to people with advanced illness and ensures management of pain and other distressing symptoms. It entails provision of comfort, peace and dignity to both the patient and family members as it emphasises living, encourages hope and helps people to make the most of each day.

It is something we all need to promote and support.





## MESSAGE FROM THE HEAD of HEALTH

Dr ST Mtshal

September is welcomed with smiles as the cold weather makes way for the warmth that our province is known for. However, as we celebrate the dawn of spring, let us remember to exercise caution when we expose ourselves to the sun. Although the sun is responsible for life on this earth, the change of seasons, the flourishing of vegetation and warm days at the beach, it can also be harmful.

I would like to especially draw attention to the plight of those living with Albinism, since Albinism is one of the health topics that the global health community is commemorating in September. Albinism in humans is a congenital disorder characterised by the complete or partial absence of pigment in the skin, hair and eyes. Albinism is associated with a number of vision defects, such as photophobia, nystagmus and amblyopia. Lack of skin pigmentation makes for more susceptibility to sunburn and skin cancers. Albinism may be associated with deficiencies in transportation of melanin granules.

Melanin acts as a barrier between the skin and the sun and therefore the less melanin a person has, the less protected they are from the sun. Therefore, I urge the people of KwaZulu-Natal of all colours, but particularly those with albinism, to protect themselves from the sun's harmful rays.

Additionally, we are concerned by reports of witchcraft-related killings, whereby people living with Albinism are targeted.

### Myths about people living with albinism include that:

- Drinking the blood of a person with albinism gives extra magical powers
- Body parts of persons living with albinism make potent charms that can make people rich and successful.
- Albinism is a punishment from God or ancestors for wrongs done in the family
- People with albinism cannot see during the day but see well at night.
- A person with albinism cannot have regularly pigmented children.

Of course all of this is ridiculous and needs to be rejected with the contempt that it deserves, as people living with albinism are normal, fully-fledged human beings who should be allowed to live their lives free and enjoy their right to life as enshrined in the Constitution.

We should all take it upon ourselves to refute myths and other dangerous notions that exist about albinism. We urge those who might have information of any illegal activities in this regard to contact the authorities.

## BIRTH OF QUADRUPLETS

### KZN HEALTH MEC HAS PRAISED THE PROFESSIONAL NURSE WHO ASSISTED A WOMAN TO GIVE BIRTH TO QUADREPLETS

A Professional nurse Ms Simphiwe Nomali Buthelezi from Vryheid hospital has received a pat on the back for her instrumental role in what has been described as a "miraculous" delivery of quadruplets.

A 30 year-old mother, Jabulile Sangweni, gave birth to quadruplets – three girls and a boy - without complications recently. Ms Sangweni, who is originally from eDumbe - near Vryheid, was brought in by an ambulance from home with labour pains. She had been attending antenatal-classes at eDumbe mobile clinic.

Ms Sangweni was pleasantly surprised at the birth of her four (4) babies as she was only expecting one (1). "I honestly didn't know I was carrying four babies. I was surprised when the nurses told me I was carrying more than one child. I was really not expecting it. I didn't know what to say. I was shocked, but I'm excited now."

She is recovering well and her four babies are receiving medical attention from the Vryheid Hospital medical team.

The first baby was male and was delivered at 08:00, weighing 1370g. The second baby was delivered at 08:05, weighing 880g. The third baby was delivered at 08:10, weighing 940g and the last female baby was delivered at 08:25, weighing 1100g.

Describing how the babies were born professional nurse Ms Simphiwe Nomali Buthelezi, says: "When I arrived in the ward, we examined the mother and discovered that indeed there might be more than one baby in her. We then helped her deliver the second baby. We were quite surprised to learn that there was a third baby still coming. We then helped her deliver once more. Now, according to our training, triplets are far more common than quadruplets, so it would have been easy to assume that the third baby was the last, and that she had had triplets. But when we checked, we discovered a fourth baby. We were truly, truly surprised."

KwaZulu-Natal Health MEC, Dr Sibongiseni Dhlomo, said, "I would like to congratulate and thank Ms Simphiwe Nomali Buthelezi and her team for the sterling job. A surprise of quadruplets in a district hospital being so well-managed is a miracle. We wish both the mother



and the babies a good life."

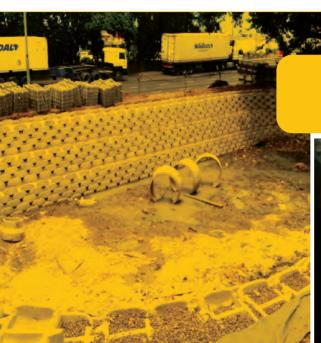
The MEC, however, issued an appeal to all pregnant mothers in the province to start ante natal care early for optimal care of mothers and their babies.

"It is a miracle that the mother was able to deliver the quadruplets without incident," Dr Dhlomo said.



## INFRASTRUCTURE

## WILL ELIMINATE THE MOSQUITO PROBLEM AT KING EDWARD VIII HOSPITAL



The KZN Department of Health is investing millions to upgrade the storm water, sewer, waste and parking area at King Edward VIII Hospital in Durban.

The drainage system of the 80 year old hospital had dilapidated with time, resulting in water leaks. The leaks had created water ponds which were a breeding place for mosquitoes and created an unhygienic environment for the hospital. The repairs, which commenced on the 1st of June 2016, are costing the Department more than R70 million.

The project will guarantee the increased lifespan of the ageing infrastructure at the King Edward VIII hospital. Contractors are still on site and hard at work with maintenance and repairs, especially of the water systems and control valves to buildings. The transformation of the hospital has had to be implemented



without shutting down the facility so that healthcare services would not be compromised.

Much has already been accomplished with the project progress at 80%; the valves in the ring main have been replaced which allows for sectional isolation of the hospital to cater for maintenance and repairs. In addition, individual building valves will be installed to critical buildings to allow for isolation. This is vital because previously the hospital was forced to shut down the main municipal water feed in order to do any repairs since the isolation valves were dysfunctional.

The upgrade will usher in a new system which will allow the isolation of valves to different buildings in order to prepare for future maintenance programmes that will not necessitate a complete shutdown of the main municipal water feed when there are repairs.

The Department is pleased with the progress to date and envisages that it will be completed as expected on the 2nd of April 2018. This is one of the major infrastructure upgrades the Department is doing this financial year and the repairs will ensure that its buildings have a longer life span.



### KIDNEY

## WARNING FROM MEC DHLOMO: BEWARE OF THE SILENT KILLER THAT IS KIDNEY DISEASE

Kidney Awareness Week, which was commemorated during the first week of September, is one of the most important dates in the health calendar. This global awareness drive once again afforded the KwaZulu-Natal Department of Health an opportunity to remind the public about the importance of looking after their kidneys.

Kidneys play an important role in a human body, by purifying blood and filtering out toxins. An unhealthy kidney therefore means that dangerous toxins can be retained in the body, potentially causing serious health complications which may lead to morbidity or death. A poor, unbalanced diet, being overweight or obese, as well as smoking and consuming alcohol, is among the risk factors for kidney-related ailments. According to the South African Government website, www.gov.za, it is estimated that out of a million South Africans, 500 suffer from end stage kidney disease. This translates to around 25 000 South Africans per year.

KwaZulu-Natal Health MEC, Dr Sibongiseni Dhlomo, has called on each and every individual to be responsible and take care of their own kidneys. "Our kidneys perform a very important task in our bodies – cleanse and get rid of all the unwanted substances that are not good. But the kidney, unlike the nose and the lung, does not sneeze or cough. Therefore, we all need to be highly vigilant to be able to pick up any signs of kidney-related problems in their early stages. We have a duty to take care of our kidneys so that they will also take care of us."

Unlike many diseases, kidney disease often has no symptoms until it is very advanced.

"It is therefore very important for people to be aware of the risks associated with kidneys, as well as what they can do to keep their kidneys healthy for a long time. That is why it is important to get tested," he said.

#### Testing for kidney disease entails:

- •Measuring the level of serum creatinine in the blood; and
- Measuring the level of protein in the urine (increased levels of protein show that kidneys are not working right).

### How to take good care of your kidneys:

- Stay hydrated. Drinking plenty of fluids will help your kidneys function properly
- Watch your blood pressure
- Don't smoke or drink alcohol
- Keep slim and exercise

According to a joint initiative between the International Society of Nephrology and the International Federation of Kidney Foundations (IFKF), these are some of the golden rules that we need to follow in order to keep our kidneys healthy.

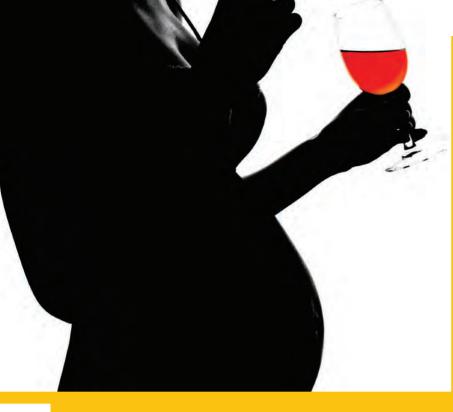
#### These are:

- Maintain a healthy fluid intake. Although clinical studies have not reached an agreement on the ideal quantity of water and other fluids we should consume daily to maintain good health, traditional wisdom has long suggested drinking 1.5 to 2 litres (3 to 4 pints) of water per day:
- Keep regular control of your blood sugar level. 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;
- Reduce your salt intake. The recommended sodium intake is 5-6 grams of salt per day (around a teaspoon). In order to reduce your salt intake, try and limit the amount of processed and restaurant food and do not add salt to food:
- Do not smoke. Smoking slows the flow of blood to the kidneys. When less blood reaches the kidneys, it impairs their ability to function properly. Smoking also increases the risk of kidney cancer by about 50 percent; and
- Do not take over-the-counter pills on a regular basis. Common drugs such non-steroidal anti-inflammatory drugs are known to cause kidney damage and disease if taken regularly.

Possible symptoms to watch for:

- A reduced amount of urine
- Swelling of your legs, ankles, and feet from retention of fluids caused by the failure of your kidneys to eliminate water waste.
- Unexplained shortness of breath.
- Excessive drowsiness or fatigue.
- Pain or pressure in your chest.
- Seizures





# DRINKING WHILE PREGNANT CAN HARM YOUR BABY

World Foetal Alcohol Syndrome (FAS) Day is commemorated each year at nine minutes past nine on the ninth day of the ninth month (September) to draw attention to the fact that women should not drink alcohol for nine months while pregnant. The day exists to highlight the dangers of drinking alcohol while pregnant because the alcohol the mother drinks enters the unborn baby's bloodstream, causing damage to the foetus. Such damage is permanent and irreversible. FAS children will have physical and intellectual problems.

According to the World Health Organisation (WHO), FAS is the biggest cause of mental retardation in some countries, including South Africa. The highest reports of foetal alcohol syndrome cases in South Africa are in the Western Cape Province, and this is believed to be as a result of the 'Dop' system; a criteria by which wine manufacturers pay workers with alcohol.

FAS and other spectrum disorders (mental disorders that include a range of linked conditions) affect children differently. Symptoms can range from mild to severe. They can include:

- Problems with the heart, kidney, and/or bones
- Learning disabilities and low IQ
- Trouble with memory, coordination, and attention
- Hyperactivity
- Problems with sleep and suckling as an infant

The symptoms of FAS tend to get worse as a person grows up.

### **Alcohol and Pregnancy**

There is no "safe" amount of alcohol that pregnant women can drink. And there is no time during pregnancy when it's considered safe to drink alcohol, either. In the womb, a baby does not have a fully developed liver that can process alcohol, so it can easily damage the baby's organs. Some of the most severe problems happen when a pregnant woman drinks in the first trimester, when the baby's brain starts to develop. But the second and third trimesters are not safe either. The brain is still developing at that time, and this process can be interrupted by even moderate amounts of alcohol.



# HAVEFUN BUT PREVENT UNPLANNEDPREGNANCY

World Contraception Day is celebrated worldwide on the 26th of September with the objective of improving awareness of contraceptive methods and to empower young people to make informed choices on their sexual and reproductive health.

KwaZulu-Natal Health MEC, Dr Sibongiseni Dhlomo, urges all parents and guardians to speak openly with children about the risks of unprotected sex, such as unplanned pregnancies and HIV infection. MEC Dhlomo says that contraceptives help to reduce the risk of unsafe abortions and give women the option to wait until they are financially able to care of a child. They also allow women to pursue educational and employment goals without worrying about the financial burden of an unplanned pregnancy.

Family planning also reduces the risk of unplanned pregnancies among women living with HIV, resulting in fewer infected babies and orphans.

According to the World Health Organisation (WHO), early child-bearing increases the risks of morbidity and mortality for both mothers and their new-borns, especially babies born to mothers under the age of 20.

It is important for women to have access to contraceptives and fertility care services and information to help them plan their families and protect themselves from various sexual diseases. Healthcare workers must ensure that young people feel welcomed when visiting public healthcare facilities. This will avoid unplanned pregnancies or complications arising from unsuccessful backstreet abortions.

Women and young girls are encouraged to visit their nearest clinics, not only for health screening, but to also get more information about the following methods of family planning which are available freely at public health clinics:

- Sub-dermal contraceptive implant. (Implanon) effective for 3 years;
- CopperIUD. Loop (non -hormonal effective for 10 years);
- Hormonal injection. (2 or 3 monthly is available);
- Oral contraception pills. (Daily);
- Male and female condoms:
- Vasectomy for men who have reached their desired family size;
- Voluntary female Sterilisation.



# POWER YOUR LIFE TAKE CARE OF YOUR HEAR

September 29 is World Heart Day, a day to promote heart health awareness and a reminder to all adults to lead healthier lifestyles and undergo screening for basic cardiovascular risk factors such as blood pressure and cholesterol levels.

### The theme for this year is 'Power Your Life'.

The focus is on lifestyle choices and risk behaviours that are adjustable, such as diet, exercise, weight and tobacco use. Each of these factors has the power to influence our heart health independently.

According to the World Health Organisation (WHO), half of all strokes and 40% of heart attacks can be attributed to high blood pressure. Over half of South Africans are unaware of their high blood pressure, and even those who know, barely adhere to their treatment.

The WHO recommends a daily salt limit of five grams a day, which equates to roughly a teaspoon of salt from food or added to food. With a significant reduction in salt intake, blood pressure can be expected to drop by as much as 5mm to 10mm.

The aim of this campaign is to improve health globally by encouraging people to make lifestyle changes and promoting education about ways of taking good care of the heart.

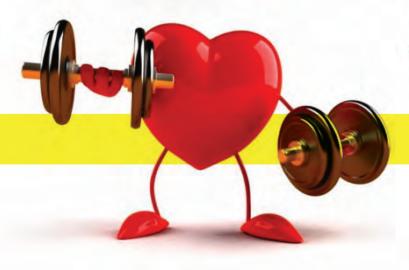
Heart problems can be reduced by practising a healthy lifestyle which includes:

- Promotion of good health through diet
- Increased physical activity such as walking and engaging in sporting activities
- Refraining from smoking and drinking

### Signs to watch for:

- Shortness of breath
- Palpitations (irregular heartbeats)
- A faster heartbeat
- Weakness or dizziness
- Nausea
- Sweating

MEC Dhlomo calls on the public to have their blood pressure checked yearly and urges them visit health care facilities regularly.





### ETHICS TALK

### **CONDUCTING BUSINESS WITH AN ORGAN OF STATE (part 2)**

Last month we talked about Conducting Business with an organ of state and indicated that there are exclusions to this, in other words there are certain instances that are not defined as conducting business with the state and are as follows:

### ACTIVITIES BY EMPLOYEES NOT CONSTITUTING CONDUCTING BUSINESS WITH AN ORGAN OF STATE

- 1. Participation in marking, training, teaching or lecturing at public educational institutions.
- 2. Appointment to an audit committee contemplated in section 77 of the Public Finance Management Act, 1999 (Act 1 of 1999) or section 166 of the Municipal Finance Management Act, 200. (Act 56 of 2003).
- 3. Appointment as a member of the Reserve Police Service in terms of section 48(2) of the South African Police Service Act, 1995 (Act 68 of 1995).
- 4. Appointment as a member of the Reserve Force in terms of section 53 of the Defence Act, 2002 (Act 42 of 2002).
- 5. Activities undertaken as part of continued professional development.
- 6. Official activities undertaken on a part time basis, either temporarly or permanently to a number of Departments in terms of an employee's employment.
- 7. Employees supporting the independent Electoral Commission as voting staff during elections.
- 8 Appointment as member of a school governing body, museum body, university board, or any other State controlled instituition that has a public function.
- 9. The use of an employee's property or facility for public functions by Government (for example farm schools).

However, even though these are considered as exclusions, any employee who engages as above must apply for ORWOPS.

### What happens if it is discovered that I have a company that is doing business with the state?

A letter will be written to you and then you will have two choices

- 1) Resign your Directorship of the company or
- 2) Resign from the Public Service if you want to continue to be part of the company that is registered on the Central Supplier Database of National Treasury.

### How will the Department find out if I am linked to CSD?

Every potential supplier of goods and services to the state must be registered on the CSD database. A print out is attached to the tender or bid document. One of the items that is indicated is Directorship of Public servants, in that company. The system is sophisticated enough to pick up on the ID the employment link.

Furthermore, when the Public Service Commission also conducts and inspection, through this process, the list is sent to each Department for the Department to take the necessary action.

### If I am a sessional employee will this apply?

National Health and DPSA are looking into this to implement a sector specific determination as far as sessional doctors are concerned. We will update on this.

Please consult your HR office or the DPSA website or The Ethics Office for more information .

## 

### Philandoda for Men

A health facility catering to the needs of men has recently been opened in the main taxi rank of Eshowe, Kwa-Zulu Natal. The health facility, Philandoda, is a partnership between the Kwa-Zulu Natal Department of Health, Umlalazi Municipality and Doctors Without Borders (MSF). MSF's Deputy Field Coordinator, Musa Ndlovu, explained the idea behind the facility, "When the participants in our survey were asked what would encourage them to come to the facility, more than 86% said they would consider doing so if it was a male-only site. Large proportions of respondents also said they would visit if it was conveniently situated near a taxi rank and if the facility provided quick service." The facility will offer treatments for minor ailments as well as STI and HIV treatment and prevention mechanisms.

Duures: The Dem Aye

A male
nurse from the
Eastern Cape has
received praise for
heroically saving a
drowning woman. Ayanda
Sitela, a nurse from Zithulele
hospital, was off duty when he
saw a car swerve into a nearby
river. Realizing that the driver was
stuck in her vehicle, he rushed to
assist her.
Source: Ilanga newspaper

**Nurse Saves Drowning Woman** 

### Cannabis Guidelines Pending

The Medicines Control Council (MCC) is simplifying the legal framework that will permit doctors to prescribe cannabis, more commonly known as marijuana.

These developments mean that doctors will soon be able to prescribe medication containing cannabis as soon as they are registered by the MCC.

Source: Business Day

## PHOTO GALLERY

Women In Management Conference





## PHOTO GALLERY

Health Screenings





#### **HEAD OFFICE**

Natalia Building, 330 Langalibalele Street, Pietermaritzburg, 320 Tel: 033 395 2111 | Fax: 033 342 0429 | Web: www.kznhealth.gov.za



Facebook - KwaZulu-Natal Department of Health



Twitter - @kznhealth



Instagram - kznhealth



**KZN** Department of Health

#### **ENQUIRIES:**

Agiza Hlongwane: 033 395 2211, E-mail: agiza.hlongwane@kznhealth.gov.za

### **EDITORIAL TEAM**

- Mr Sam Mkhwanazi
- Mr Agiza Hlongwane
- Ms Ncumisa Mafunda
- Mr Sibongiseni Mkhize
- Ms Samke Khumalo (Intern)
- Ms Xoliswa Dlamini (Intern)
- Ms Sikhululiwe Khoza (Intern)
- Mr Phumlani Sikhakhane (Intern)

### **GRAPHICS**

Mr Senzo Gumede Ms Nonhle Hadebe (Intern) Mr Joash Naidoo (Intern)

### **PHOTOGRAPHS**

Mr Themba Mngomezulu Mr Mondli Mwandla