DR PIXLEY KA ISAKA SEME MEMORIAL HOSPITAL

Pixley Edition no. 002

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We appreciate All the women at DPKISMH











From the CEO's Desk

Welcome to Pixley News!

It has been a busy few months at Dr Pixley Ka Isaka Seme Memorial Hospital (DPKISMH) with the phasing in of services such as Surgical, Anaesthetics, Orthopaedics, Dental services & Psychiatry to name a few being in motion. We are proud to tell you all about it in this newsletter.

We are grateful to report that as DPKISMH we have managed to achieve great success in clinical care despite not having the full complement of staff. As management, we recognize the hard work and dedication from staff and wish to convey our deepest gratitude.

In the past quarter, our sister hospitals such as Addington & Mahatma Ghandi Memorial Hospital have really felt the impact of DPKISMH, with gradually alleviating some of the burden on the health system. We are proud to have achieved:

- Inpatients seen 392
- Outpatients seen 2407
- Theatre Cases done 412

Radiology Services per Modality:

- MRI's 219
- Ultrasound 255
- X Ray 1536
- CAT Scans 685
- Mammography 50
- Fluoroscopy 41

This contribution further extends to successfully migrating Internal Medicine from Mahatma Ghandi Memorial Hospital in the beginning of October.



This transition was made possible by the excellence of our multidisciplinary team led the clinicians as well as the Senior Medical Manager.

We have grown as an institution, as of the 01st of October we have a staff compliment of more than 1000. Once again, we welcome each one of the new staff. You have made it through a rigorous process and it is now time to set in stone what you have been trained for, as the month of August was dedicated for trainings. Thanks to our Human Resource Directorate for implementing an orientation training programme.

In the upcoming months, we look forward to commissioning services such as the Emergency Department followed by Paediatrics, Obstetrics and Gynaecology at a later stage.

As a new facility, a lot lies on our shoulders to ensure that we commission the hospital successfully. It is both stretching and exciting times. As the CEO and the Senior Management Team it is a privilege to walk through this milestone with each one of you.

The journey has not been without challenges, but with teamwork, dedication and commitment we will conquer. Let us continue to uphold our hospitals motto, which is "Aiming for excellence."









LOCAL HEALTHCARE WORKERS REAP THE BENEFITS OF HEARING RARE BREAST CANCER PREVENTION AND TREATMENT MESSAGE

BREAST cancer is one of the leading causes of death in South Africa, and across the globe – but, in fact, this need not even be the case, as this type of cancer is relatively easy to treat if detected early.

According to the National Cancer Registry (2017), one in 26 women in South Africa are at risk of developing breast cancer; while 16% of cancer deaths are attributed to breast cancer.

"Being aware of the symptoms and seeking treatment early is key."

This was the single defining message that characterized a breast cancer management lecture held recently, at the Dr Pixley Ka-Isaka Seme Memorial Hospital.

The lecture took place as part of breast cancer awareness month, which is a yearly campaign to educate the public on the importance of breast cancer prevention, early diagnosis and treatment.

Sadly, breast cancer is detected too late in a number of women, and this may be due to a number of factors, including, but not limited to: socio-economic status, age, menopause, type of tumour, and inadequate breast selfexamination.

This year a Multi-Disciplinary Team (MDT) of healthcare from DPKISM professionals delivered a breast cancer management lecture to educate health care workers in the Phoenix, Inanda, Ntuzuma and KwaMashu (PINK) communities.

Its key focus was the holistic treatment of breast cancer, as well as to unpack the different roles played by the MDT in the patients' journey to recovery. Surgery Specialist, Dr. Prashti Harichunder unpacked the role of a surgeon in breast cancer care, which is a central role as they are the first point of contact with a patient. "We take the history of each patient, do physical examination and a biopsy. We facilitate staging investigations, then send each patient to the breast oncology MDT, which is an integral part of optimising and personalising breast cancer care."

Dr. Harichunder says surgical options include mastectomy (surgical operation to remove the breast), breast conservation surgery (where only the part of the breast that has cancer is removed), axillary clearance (relating to the armpit or a corresponding part), and sentinel node biopsy (a procedure to determine whether cancer has spread beyond a primary tumor into the lymphatic system). She adds that surgical plans are individualised to the patient and the patient's tumour.

"I always call the surgeon the 'super-glue' that holds together the management of breast cancer patients while they navigate the complexities of their treatment," she added.

The surgeon will then refer the patient to a Radiologist to confirm or exclude cancer. The Radiologist will then do a series of tests using specialised scans, which include mammography (specialised X – Ray machine for breast), ultra sound and MRI. The Radiologist analyses the pictures of the breast from these specialised machines, and if there are suspicious findings, they proceed to take a biopsy (taking a small tissue sample using a small biopsy needle) from the suspicious area.

"Being aware of the symptoms and seeking treatment early is key."













Another specialist, the Pathologist, will then examine the tissue sample under a microscope for cancer cells. The results may confirm or exclude a cancer. If a cancer is confirmed, the MDT will formulate a tailormade plan for the patient. This will now involve a doctor who specialises in treating patients with chemotherapy and hormonal therapy, otherwise known as an oncologist. Eventually the MDT, guided by the breast and plastic surgeon, decides on whether to operate on the patient or not, as well as the type of operation to be done.

Throughout the journey, the patient is referred to various specialised health care professionals including the Psychologist for emotional support as well as the Social Worker to ensure a supportive home and social environment conducive to treatment compliment.

SYMPTOMS OF BREAST CANCER:

There are a number of symptoms that may signal the onset of breast cancer, including: a new lump in the breast or underarm (armpit); thickening or swelling of part of the breast; irritation or dimpling of breast skin; redness or flaky skin in the nipple area or the breast; pulling in of the nipple or pain in the nipple area; nipple discharge other than breast milk, including blood; any change in the size or the shape of the breast; and pain in any area of the breast.

If you present with any of these signs, it is vital that you visit your nearest Primary Healthcare Clinic as a matter of urgency, so that you will be referred accordingly for further care and management.

HOW TO CONDUCT SELF-EXAMINATION FOR BREAST CANCER:

Step 1

Place your hands at your sides and look at your breasts for any changes in colour, size, shape, dimpling or texture of the skin

Step 2

Now raise both your hands above your head. Check if both breasts rise together Step 3

Place your hands around your waist, pressing waist, shoulders and elbows forward. Bend forward and check if both breasts fall forward together

Now raise your left arm. With the flat part of the fingers if your rights hand, carefully examine your left breast. In a circular pattern, start from the outer top, pressing firmly enough to feel the tissue beneath. After one full circle, move in towards the nipple a few centimeters and circle again, continuing until you reach the nipple. Check the area above the breast, especially the armpit area, for lumps or hard knots. Repeat on right breast. Breast self examination should be done once a month. Report any changes or irregularities to your doctor or primary health care clinic.

Visit your clinic is you find:

- any lumps
- bleeding or discharge from nipple
- dimpling of skin
- change in the shape, or size or skin texture of your beast or nipple.





















In February 2001 Regional Internal Medicine services was established at Mahatma Ghandi Memorial Hospital (MGMH), a 350-bedded level 1 hospital, to serve a growing need of specialist care. However, the intention had always been to build a level 2 hospital where Internal Medicine will be permanently situated.

With the establishment of Dr Pixley Ka Isaka Seme Memorial Hospital (DPKISMH), the communities of Phoenix, Inanda, Ntuzuma and KwaMashu (PINK) have the privilege of benefiting from specialised services in one roof, utilising state of the art equipment by a multi-disciplinary team, bringing regional services to the community.

DPKISMH has been working hard to commission regional services since August 2021, changing people's lives for the better starting with Radiology services. Since then, DPKISMH has commissioned General Surgery, Orthopaedics, Critical Care, Anaesthetics, Dental and Allied services. As of the beginning of October, services were extended to Internal Medicine.

This service migrated from MGMH to DPKISMH. This department looks after the population with non-communicable diseases such as diabetes, asthma, stroke, heart diseases, hypertension, epilepsy and infectious diseases. Patients will still receive internal medicine services at MGMH, however at a district level. Level 2 Internal Medicine services will now be available at DPKISMH on a strict referral basis.

At DPKISMH, we aim to provide safe, timely, effective, efficient, equitable and patient centred regional care services. Ensuring that we grow KwaZulu – Natal together.







While you're looking after others, we're looking after you.



INVESTEC LAUNCHES DOCTORS COURTYARD



Investec, a distinctive bank and wealth manager known for providing financial products and services to a select client base officially launched the Doctors courtyard at Dr Pixley Ka Isaka Seme Memorial Hospital (DPKISMH).

Doctors play an imperative role in the care and safety of patients, and while they are looking after patients, Investec ensured to looking after them. This was proven on July 8, 2022 in the official handover of the fully furnished courtyard situated at the Administration block, second floor – Block A.

"Our doctors work tirelessly in serving the communities of eThekwini and It's easy to get caught up in the day to day activities in a hospital, thanks to Investec Bank Doctors can now have a space to relax and have a breather whilst they are still in the building" said Dr. Mthethwa, Chief Executive Officer at DPKISMH. "We are all excited and deeply appreciative to Mr. Uvay Beosumbar for identifying DPKISMH as one of the hospitals to benefit from their Corporate Social Investments projects"

"Investec Private Banking has been partnering with medical professional for 40 years and we are honored to be a small part of the new building and its dedicated team.," Said Uvay Beosumbar, The Doctor's courtyard will be a space dedicated for doctors, the space can be used for departmental functions such as birthdays, Christmas parties, farewell parties etc.



















AWARENESS - WORLD HAND HYGIENE DAY

Hand hygiene awareness campaign, a World Health initiative aimed at preventing the spread of microorganisms, was launched by the Minister of Health, Dr. A. Motsoaledi on 24th November 2014 with the aim of "raising awareness on the importance of washing hands with soap as a key approach to disease prevention and to mobilize communities and healthcare facilities to wash hands with soap".

WHO Calls to Action:

- Quality and Safety Leaders: working with IPC colleagues to support hand hygiene improvement.
- Policy-makers: prioritizing resources, programmes and trainings on hand hygiene.
- Facility Managers: promoting a quality and a safety culture to ensure clean hands.
- Health Workers: leading by example and encouraging others to clean their hands.
- IPC Practitioners: engaging health workers to be part of new hand hygiene initiatives.
- People who use healthcare: getting involved in local campaigns and hand hygiene activities



























AWARENESS - PHARMACY WEEK



The 01st to 08th of September is declared as Pharmacy week.

Pharmacy week provides pharmacists the opportunity to engage in detail with staff and the public on significant health care matters.

This year the Dr Pixley Ka Isaka Seme Memorial Hospital Pharmaceutical Services department rolled out a series of awareness campaigns in celebration of this week.

In line with this year's theme "women and youth health", through the series of campaigns the Pharmaceutical services team visited Ngabakazulu High School to educate learners on matters relating to mental choices health, career well as reproductive health. The team further hosted a yoga session for staff in promotion of a healthy lifestyle. The week was closed off with an awareness campaign in the facility this was to raise awareness for patients as well as staff on the vital role pharmacists play in the healthcare team.

Your pharmacist is easily approachable and can be your source of information on:

- ·Health and healthy lifestyle including smoking cessation
- ·Healthy weight, exercise and substance abuse
- ·What to expect when you take your medicines
- ·Monitoring chronic health conditions such as diabetes, high blood pressure or asthma













Health Corner with Dr Zuzile Zikalala HCU: Radiology



October is breast cancer (CA) awareness month.

Breast CA is the commonest cancer in females. One in every 27 females will develop breast cancer in their lifetime in SA (CANSA). Males get breast cancer too, 0.5-1% of breast cancers occur in men.

Risk factors for breast cancer

Females, age>40 years, obesity, harmful use of alcohol, family history of breast cancer, history of radiation exposure, reproductive history (such as age that menstrual periods began and age at first pregnancy), tobacco use and postmenopausal hormone therapy. Certain inherited "high penetrance" gene mutations greatly increase breast cancer risk, the most dominant being mutations in the genes BRCA1, BRCA2 and PALB-2. (WHO)

Signs and symptoms

- a breast lump or thickening;
- alteration in size, shape or appearance of a breast;
- dimpling, redness, pitting or other alteration in the skin;
- change in nipple appearance or alteration in the skin surrounding the nipple (areola); and/or abnormal nipple discharge.
- Sometimes no symptoms

Behavioral choices and related interventions that reduce the risk of breast cancer include:

- prolonged breastfeeding;
- regular physical activity and weight control;
- avoidance of harmful use of alcohol and tobacco smoking
- avoidance of prolonged use of hormones

What else can you do?

- Examine your breast at least once a month to look for sign and symptoms
- Some breast cancers hide and there are no signs and symptoms. Screening mammogram can pick up breast cancer early. This is recommended from the age of 40 years for all females.
- Present early to your health care center if you see signs and symptoms.

What happens when you have signs and symptoms?

- Remember, not all abnormal breast signs and symptoms turn out to be cancer
- Seek help early
- You will be referred to a breast surgeon for further assessment
- You might be sent for tests (mammogram, US and biopsy) to assess and confirm if the lump etc. is a cancer.
- If cancer is confirmed, you will be referred to a multidisciplinary team who will further treat you with surgery/operation, chemotherapy, radiotherapy and mostly a combination of treatments.
- Remember, the earlier you present, the better the treatment and long survival outcomes.

All must remember:

- The fight against breast cancer is for all.
 Make her/his fight your fight
- As health care workers learn more about Breast CA to offer the best treatment to patients
- Spread the word about Breast CA. Use every opportunity to educate about breast cancer

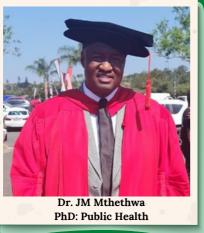


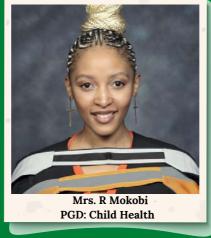


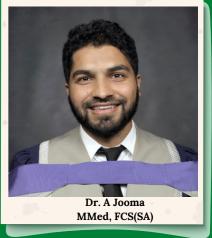


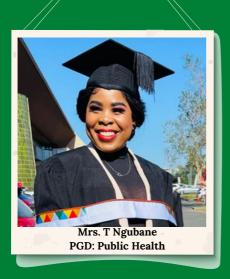












Dongrafulations











NEW APPOINTMENTS





Mrs. G Buthelezi HR DD



Dr T Kisten HCU: ICU



Dr M Qoboshiane Dentist



Dr K Zondo Medical Officer



Mr. Siyabonga Mpungose Supervisor: Patient Admin



Ms. G Gigaba Psychologist



Ms. Z Bhuleni HR



Mr. B Mdunge EAP



Ms. G Naidoo Medical Technologist

- Cleaning Services 207
- Security 87
- Handyman 8
- Porters 16

- Switchboard 3
- Transport 4
- Nursing 306
- Mortuary 5
- Transport 4
- Nursing 306
- Mortuary 5
- Admin Clerks 75







RESIGNATIONS



Sr. Bilenge OM: O&G



Dr. N Kalafatis HCU: Critical Care



Mr. T Bhengu Supervisor: Patient Admin



Mr. C Ngcobo Supervisor: Patient Admin

In Loving Memory of

Mr. Bhekumuzi Dlamini



Gone but not forgotten...













































AKNOWLEDGEMENTS



Ms. Nosipho Ndaba **Public Relations Officer**

EDITORIAL TEAM

CHIEF EDITOR Dr. JM Mthethwa

SUB EDITOR, WRITER, DESIGNER & PHOTOGRAPHER Ms. Nosipho Ndaba

PRO'S MESSAGE

Greetings from the PRO's Office.

As the year folds, I hope the last couple of weeks treat you well and everything you had set out to accomplish this year comes to play. It is with great joy to have put together this issue for all our readers for reminiscing and appreciation to the contribution of various departments. It has been an amazing year with all the milestones we have experienced as a facility.

I hope you enjoyed the second edition of Pixley News, remember this newsletter was created with you in mind. With that being said, help us make it the best it can be. I therefore, encourage all departments to share their newsworthy stories for a feature in our next issue.

Until next time, Danko means Thank you



Dr Pixley Ka Isaka Seme Memorial Hospital













