



Hamba kahle Tata



LET'S MAKE KZN SAFER TOGETHER THIS SEASON

THE FESTIVE SEASON HAS STARTED and while many of us are preparing to spend time with our loved ones, it also means more danger both on and off the roads as many people over-indulge, putting both their own and others' lives at stake. Here's how you can play it safe this season so that you don't end up with any regrets in the New Year...

Driving

Last year's festive season saw 1400 South Africans lose their lives on the roads. These deaths were attributed to driving under the influence, speeding, dangerous overtaking, not wearing seatbelts and unroadworthy vehicles. Don't become a fatal statistic. Do the right thing this season and carry out these basic checks before you hit the road:

- Make sure that your vehicle is roadworthy.
- Check that your car licence disk, drivers licence and motor vehicle insurance policy are valid.
- Plan your route in advance.
- Always wear your seatbelt and ensure all passengers with you buckle up too.
- Schedule frequent stops to rest, refresh and change drivers if possible.
- Maintain a following distance of three to four seconds- increase this to six seconds in dark or wet conditions.
- Drive with your headlights on to promote visibility.

When using public transport:

- Go for a bus company with good reputation and safety history.
- If a minibus taxi looks unroadworthy, or if the driver appears to have been drinking, don't get in!

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PRIMARY HEALTH CARE NOW A REALITY



Have wheels, can deliver! That's the innovative idea behind buses that are being converted into state of the art mobile clinics which will be used to deliver crucial health services across KwaZulu-Natal.

eThekweni has already become the first district to be handed the clinic on wheels, with 10 more to be rolled out within the next six months. "Every district will have a bus which will travel to mainly rural and informal areas to ensure that health services are accessible to all. These buses are able to travel to difficult terrain and are divided into three sections on the inside. The first is optometry where we will carry out eye tests and so on, the middle section deals with HIV testing, counselling and reproductive health and the third has a dentist's chair where dentistry services will be provided. The patient walks in, gets a full medical check before exiting at the back of the bus," explained KZN Health Head, Dr Sibongile Zungu.

Buses are also being customised to carry out health care services catering for pupils across schools in the province while another will be used to facilitate maternal and child

health care. "These buses are an innovative way we came up with to ensure nobody is denied access to health care because of budget or resource constraints. We were also faced with the challenge that a clinic cannot be built in every single area due to a number of reasons which includes difficult terrains, lack of land and costs involved. Through this approach, we are taking the clinic to a number of areas so are able to reach people on a much wider scale than even a fixed clinic would do in a particular area. It's far more cost effective in the long term and demonstrates how primary health care is being implemented by taking services to the people. It's an exciting chapter in health care delivery," added Zungu ■

'NO WOMAN SHOULD DIE WHILE GIVING LIFE'

MORE THAN 20 'LODGER MATERNITY HOMES' throughout KwaZulu-Natal have begun operating – with more to come, as part of plans by the Department of Health in KZN to reduce the number of women dying whilst giving birth.

But, says KZN Health MEC, Dr Sibongiseni Dhlomo, these efforts can only be successful if pregnant women register their pregnancies early at their health facilities. "The lodger home is a form of a residential unit within a health facility where pregnant women close to labour who live far from hospitals can stay until they are due to give birth. However we need to ensure that the health of mother and baby is monitored from an early stage to ensure labour is less complicated and that any health risk is addressed," says Dhlomo, adding that every health facility in the province will be equipped with a maternity waiting home to ensure that pregnant women do not risk their labour due to travel or long distance issues.

With around 500 pregnant women dying during labour each year in KZN alone, Dhlomo has made maternal health a top priority in his Department and has already intensified efforts to increase the number of community health workers and midwives in rural areas to raise more awareness of health care during pregnancy. Research shows that most maternal deaths are caused by non-pregnancy related infections, bleeding during pregnancy, delivery and after birth and hypertension.

The lodger homes form part of an African wide initiative launched

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HOLIDAY SAFETY

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Drinking

Many of us will enjoy a few celebratory drinks, but it's important that we know our limits. Too much alcohol can not only poison our bodies but plays a dangerous role in motor vehicle and other accidents, inter-personal violence and risky sexual behaviour.

Never:

- ✗ Drink and drive – appoint a designated driver or take a taxi
- ✗ Drink until you pass out – alcohol poisoning can kill you!
- ✗ Walk home alone when you've had too much to drink – you could stumble in front of an oncoming car or be an easy target for criminals.
- ✗ Leave a friend alone if s/he has passed out – turn them over onto their side and take them to the nearest emergency room for medical attention.

Always:

- ✓ Stick to the recommended daily alcohol intake to remain healthy – two units for women

and three units for men (and only if you're not driving!)

- ✓ Carry condoms in case you are involved in a random sexual encounter due to lowered inhibitions

✓ Take away the bottle from a friend who has drunk too much and is getting out of hand.

REMEMBER: The legal limit for drinking and driving is a breath alcohol content of 0.24mg per 1000ml, or a blood alcohol limit of 0.05g per 100ml.

Domestic Violence

The increase in domestic violence over the festive season is closely linked to increased alcohol and drug intake, financial pressures and family conflict at this time. To minimise the incidence of abusive situations:

- Limit the time you spend with an abusive person and avoid being alone with him or her.
- Learn to walk away from

explosive or confrontational situations

- Always have sufficient airtime for an emergency call.
- Have a 'safe contact' (person to call in the event of an emergency) on speed dial.
- Decide on a 'code word' to use in an emergency call or text, so that your safe contact knows that they must come to your aid.
- Have an escape plan in case you need to get away in a hurry.

Domestic Safety

Criminal activity increases during the festive season, so it's imperative that we take extra precautions to ensure that our homes remain safe and secure:

- When relaxing at home, always ensure that your security doors are locked to prevent a home invasion.
- Make sure that your security system is functioning correctly and that all doors, windows and security gates lock properly.

Cut out and keep...

EMERGENCY NUMBERS

KZN HEALTH EMS	10177
POLICE FLYING SQUAD	10111
DURBAN METRO FIRE.....	031-361 000
SEA RESCUE SERVICES	031-361 8567
NSRI, DURBAN (STATION 5).....	082 990 5948
THE OPEN DOOR CRISIS CENTRE	084 409 2679
GOODFELLAS	0861 433 552

MATERNAL HEALTH

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earlier this year, the Campaign on Accelerated Reduction of Maternal and Child Mortality (CARMMA), which aims to reduce maternal deaths by 75% by 2015. "It is a formidable challenge but one that needs to be addressed, despite the constraints. Yes we are faced with budget and resource limitations, but that does not mean we fold our arms and do nothing whilst women are dying during labour. We do our best, we come up with initiatives, and we innovate as South Africans dealing with a South African challenge. We cannot build hospitals and clinics in every area if the terrain will not allow for this and it's beyond our mandate. But we can work around it which is what we try to do. We provide mobile clinics and have now gone a step further in providing lodger homes



Saving mothers and children a key priority.

so that those women in hard to reach areas can be transported to a facility where they can stay until they go into labour. That reduces their health risks around it which is what we try to do. We provide mobile clinics and have now gone a step further in providing lodger homes

Criteria for admission to the Maternity Lodger Homes include:

- Ante natal women who are diagnosed as having "False Labour" may be accepted rather than sent home.
- Stable pregnant women who are at full term.
- Pregnant women with no reliable transport from home when they go into labour.
- Referral by the Ante Natal Clinic which monitored the pregnancy. ■



Nelson Mandela was named Dalibunga following his circumcision at age 16. His tribal name, Madiba, is used as a sign of respect and affection.



A Note from KZN Health MEC, Dr Sibongiseni Dhlomo

South Africans and the world have been left stunned and with an indescribable sense of sadness by the untimely passing of our beloved Tata Madiba – despite the realisation by our nation in recent months that he was close to leaving us. It was the ultimate finality of it all which came when we least expected it. The unprecedented outpouring of grief which transcended nations, colours and religion bore testimony to all that Tata stood for – a world united.

As South Africans, the baton of Tata's legacy has been passed on to each and every one of us. It is a responsibility that we must embrace with honour and determination to continue building on the dream of Madiba's vision for our country.

We are a great nation and we have the potential to be the greatest, if we come together, work together and focus on building a better life for all South Africans.

It is a time of reflection, reconciliation and most importantly, reaffirmation of the ideals that Tata stood for. As MEC for Health in KZN, I am particularly mindful of Tata's passion in driving health transformation in the country and his determination to remove the stigma around HIV – going as far as openly declaring in 2005 that his son had passed away from an AIDS related illness. It was a bold and commendable move which began breaking down society's AIDS denial and ignited an awareness of knowing one's HIV status. It is poignant that Tata's passing came during World Aids month as he aspired to live to see an AIDS free generation.

As we begin a new chapter in South Africa, I would like to extend a hand to all South Africans to join me in making this a great province where our health system delivers to expectations – if not better.

There will be mistakes and challenges along the way, but this will never deter us from trying and trying again, until we achieve a better life, a better health system and a better province which we can all be proud to call home.

God bless and have a safe and peaceful festive season!

Crack down on bogus medical claims

The Department of Health has vowed to crack down on bogus healers promising quick fix cures to vulnerable patients who turn to them in desperation.

This comes amid the alarming rise in unregistered sellers on the streets and online claiming to have cures to diseases. "This is having a disastrous effect on our patients because many are desperate for a cure and when they turn to these so-called healers, they are advised that they would no longer have to take their conventional medications from their clinics or hospitals. Sadly many then disregard their medications in favour of these illegal medicines only to discover later down the line that their disease has progressed and the bogus medication has not worked. Their system also then becomes resistant to the conventional medication due to the spread and it's then too late to save them. There are claims of faith water, cures for AIDS, Cancers and so on. We must be clear about this:

There is no medical or scientific evidence to support the so-called healers' claims and if anyone claims to have a cure then they must bring the evidence. This is not just someone saying they have been cured, we need to see the medical and scientific evidence of their claims.

Until such time we are going to crack down and prosecute those making bogus claims of cures without evidence. We are also appealing to people not to fall victim to pamphlets and press advertising and, most importantly, not to give up their conventional medication: this can be very dangerous," says KZN Health MEC, Dr Sibongiseni Dhlomo.

HOW BOGUS HEALERS WORK

To find out exactly how bogus cures are promoted, our team went under cover and visited some of those so-called healers advertising cures for diseases like HIV and Cancer etc. Their modus of operation involved mainly advertising their services through the classified sections of local newspapers and pamphlet distribution on the streets. Our investigations uncovered the following:

One healer was a young man claiming to be a doctor who practises in Pietermaritzburg. He claims to have a cure for cancer and other diseases and runs a poorly lit office where consultations are

done in hushed tones. We had to send a sms before an appointment could be scheduled. The self-proclaimed doctor is barely twenty five and prefers not to engage in a lengthy discussion about medical matters. Instead, when told we needed something to treat cancer, he says: "I will give you medicine to be taken three times daily for R300. This medication is strong enough to clear the cancer in a month and you don't need to take any other medication." A quick conversation with other patients revealed that nobody had been cured since visiting him yet they kept coming back because they were advised to continue taking his 'treatment'.

Another so-called healer in Durban claims she was cured of cervix cancer. The medicine, she refers to, is a dark brown herbal mixture in a plastic bottle. The label describes it as a cure for all chronic diseases. However, there are no directions for use, name or details of the manufacturer or list of ingredients – information that is required by law according to the Medicines and Related

Substances Control Act. Without such information, the so-called medication is ILLEGAL as it claims have not been verified or substantiated through due processes.

Faith water was advertised as a cure for AIDS. Challenged on the phone if their water was registered with the Department of Health, the 'healer' asked not to be contacted again and put the phone down.

The tragedy of bogus medical claims is devastating both for the person affected and the family as it often means the loss of a breadwinner. Thirty two year Sihle from northern Zululand is one example. He already looks 50 and his once fit body is now frail as he struggles to speak, lying in bed. He stopped taking his ARV medication for his HIV condition after buying something from someone who claimed to have a cure for HIV. "I have a family to support and I was getting tired of going to the clinic every time because I had to take time off work. A few months ago, I read an advert in the newspaper from some healer

LEGAL HEALERS CRITICISE BOGUS OPERATORS



Registered traditional healers have also strongly criticised bogus medical claims and operators, saying it undermined the critical role played by legal traditional healers. "These people are giving us a bad name and should be stopped. We cannot claim to have a cure for diseases when everyone knows there are no cure for certain diseases like AIDS. These people who sell all sorts of things in bottles like faith water and so on without any proof of a cure are exploiting people's emotions and discrediting genuine traditional healers like ourselves. As healers we should lead by example and tell people the truth when we are consulted. We can assist with pain relief, counselling and encourage them to remain positive but we should NEVER give them false hope and tell them to stop their medication. That is dangerous and illegal. Registered healers are

all listed with the Department of Health in the province and we cannot allow bogus healers to destroy the good work we are doing for our people," said several registered healers when approached for comment.



An orchid, spider and a sub-atomic particle are some of the things that have been named 'Mandela' in his honour.

ILLEGAL MEDICINES



saying they could cure AIDS so I decided to visit him. He told me I will be cured in three months and I had to pay R400 for a mixture which I had to drink every day. I stopped taking my usual medication and at first I thought his drink was working because I didn't feel sick. But after a while I started getting very sick and things got worse. I now also have TB because I am told that my immunity became weak and because I stopped taking my ARVs which I really regret. I don't know how much longer I will live and I want to warn others not to make the same mistake," Sihle explains sadly.

ONLINE CLAIMS ALSO DANGEROUS

While the proliferation of illegal healers is a growing problem, the Department of Health has also warned of the increase in online sites also offering cures without any medical evidence. A European conference in Germany this month on cancer revealed that there are currently more than half a million internet sites promoting cancer cures – with most of the claims turning out to be false, according to Professor Edzard Ernst, the world's first Professor of Complementary Medicine at Britain's University of Exeter. "The cures for cancer were all bogus and anyone who thinks there is an alternative cancer cure must suppose all oncologists are sadists because they know about it and are keeping it secret," the professor told the conference.

DON'T GIVE UP YOUR CONVENTIONAL MEDS

Having a serious disease can affect a person's ability to work and leave you feeling desperate. But stopping your chronic

medication and believing someone has a cure without any proof is putting your health and life in danger. Before stopping your medication speak to your trusted health professional and learn about your condition, treatment, cure and options for management. It's your life, your health. Don't gamble with it.

WHERE THE LAW STANDS

The Medicines Control Council (MCC) is responsible for approving the use of medicines in South Africa through the Medicine Act. Before a medicine or any product can be sold for health benefits, it MUST go through the proper registration process and once complete a registration certificate is issued. Many bogus healers don't have registered certificates (if in doubt over this, always check the authenticity with the Department of Health). Unfortunately many newspapers and other media do not verify products or sellers before allowing them to advertise. The Department of Health is now putting together a plan so that all stakeholders, including the media, will be made aware that they too are breaking the law by allowing the advertising of illegal medicines. ■

The fact is bogus healers prey on the sick to make money. DON'T LET THEM USE YOUR HEALTH AS A GET RICH QUICK SCHEME. Help us put a stop to bogus claims and save more lives.



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

Fighting Disease, Fighting Poverty, Giving Hope

HOW PREVENTING HEART DISEASES CAN ADD YEARS TO YOUR LIFE



Adam is in his late 40's, happily married with three children. He works as a manager for a national courier company and has an average but stressful life like most working class South Africans. Dinner is usually take aways a few nights a week and weekends a stop to a fast food restaurant is a must as a 'treat' for the kids. But all that changed three months ago when Adam collapsed while having breakfast with the family one Sunday morning. This is his story...

"I was rushed to hospital and turns out I had a heart attack. I had to undergo surgery and have a stent put in. We were all shocked because I'm not overweight, and drink in moderation. I do smoke although I am trying to cut back, but due to my lifestyle it's difficult to maintain healthy eating habits and exercise.

I would go and swipe my card at the gym just to keep my membership going even though I didn't have the time for a workout myself.

I'm just so sorry it took a heart attack for me to stop and think about what I was doing to my body when I could easily have avoided the heart attack. Now I worry about what would happen to my family if I could no longer work and we are trying desperately to maintain a healthier lifestyle and teach the children the value of good eating habits and regular exercise. It's a pity that it took my heart attack for us all to realise just how much we take our health for granted."

Simple healthy lifestyle adjustments can add 10 years or more to your life!

THE STATS

Adam is one of the lucky ones – he has lived to tell his story. But the tragedy is that four out of five deaths in South Africa are a result of chronic lifestyle diseases, which can be avoided. KZN Health MEC Dr Sibongiseni Dhlomo has made lifestyle diseases a key focus in his health plans for the province, more especially as recent figures reveal a growing increase in heart disease particularly among low to mid-income groups. Unfortunately, as the number of people who are experiencing heart disease related to lifestyle continues to climb, it will become increasingly challenging to accommodate them within a healthcare system which focuses primarily on curative care. With a worldwide skills shortage of cardiologists, many countries, including South Africa, are switching to a preventative

care approach to disease – the cornerstone of the new National Health Insurance plan which will be phased in over the next 15 years. It makes sense, more especially as not only will preventing heart disease add years to your life, but it will allow you to have a better quality of life and save you money. Here's why:

Curative versus preventative care

Traditionally, heart disease is tackled by treating or curing the symptoms – known as **curative care**. Depending on the precise heart condition, specific drugs can be prescribed to manage it – all costing money which would need to be budgeted for over a long period, often a lifetime, along with the major implications of any surgical interventions that may be needed. Think about these costs which you would never have in-

currred if you had taken a more preventive approach:

- Money on medicine, perhaps every month for the rest of your life
- Finding out you have heart disease and undergoing surgical procedures can be a traumatic event for you and your family
- In the event of a lengthy recuperation after surgery, you may be forced to take unpaid leave from work if you run out of paid sick leave
- If you're a casual worker or self-employed, any time off work is money lost
- Regardless of whether you use public or private transport, travelling to and from medical appointments and treatments sessions is an expense
- If you get too sick to work anymore, who will provide for you and your family?

And it costs the country, too! Take a look at the bigger picture:

- It costs the state R8-10 billion per year to treat heart diseases
- Of that figure, about 42% is attributable to direct costs (curative care), i.e. R3.36 billion
- About 25% of these costs is shouldered by the public health care system (R2-2.5 billion)
- The Heart and Stroke Foundation of South Africa (HSFSA) points out that over half of all deaths from chronic diseases, including heart disease, occur in individuals below the age of 65 – these premature deaths impact

on the workforce and economy of the country

- Lifestyle-related heart disease is affecting people at a younger age and premature deaths of people of working age are set to increase dramatically in years to come, with the resulting negative economic impact
- Curative costs for the public healthcare system will rise, as more and more people seek treatment and, at the same time, the tax base (from where the Treasury draws its funds) will shrink, placing pressure on the State coffers and, ultimately, healthcare funding.



Now we know that it's far more beneficial and cost-effective – to individuals, families, communities and the country at large – if we put our collective energies towards the prevention of heart and other lifestyle diseases like diabetes than it is to rely on a curative care approach. Whilst it's still important to offer high levels of curative care to patients, it's equally important to understand that, rather than simply relying on health care professionals to treat us once we are sick, we all share a responsibility to insure that we keep ourselves as healthy as we possibly can.

Prevention is your responsibility

Preventative care has often been described as 'adding years to your life and adding life to your years'. Making the right lifestyle choices will not only help you live longer – potentially adding more than 10 years to your – but will improve your quality of life as well. Still in doubt? Consider these proven stats on how you can increase your longevity...

- Two to three years by eating right
- Three to four years by exercising twenty to thirty minutes daily
- Three years by maintaining your BMI within normal limits
- A whopping seven years from having a good, supportive network of friends!

What you can do now

The first step to preventing heart and other lifestyle diseases is to know the state of your current health. Visit your nearest clinic regularly for the following checks:

- Blood pressure – although blood pressure varies with gender and age, a normal blood pressure reading is considered somewhere around 120/80
- Blood glucose level – this blood test determines how much of a sugar called glucose is present in your blood. The normal range is 4.4 to 6.1 mmol/L.
- Blood cholesterol – this blood test measures the amount of fatty substances in your blood. The desirable level is 200mg/dL or below.

Plan ahead, know the risk factors

Risk factors increase our chances of developing chronic lifestyle diseases, which include the following:

- An unhealthy diet, particularly one high in saturated fats, trans fats and salt which can lead to arteriosclerosis (or the build-up of plaque in your blood vessels often referred to as 'clogged arteries').
- Smoking – the chemicals in tobacco smoke damage blood cells and greatly increase your risk of arteriosclerosis
- Being sedentary – recent research shows that a lack of exercise is as bad for your cardiovascular health as smoking
- Drinking too much alcohol – raises blood pressure, which is implicated in heart disease
- High stress levels – contribute to an elevated blood pressure
- Being overweight or obese – in fact, as body mass index (BMI) rises, so too does your risk for heart disease.

MAKE THAT CHANGE!

Now that you've read the writing on the wall, it's never too late to stop a bad habit and start a good one! Get everyone in your family started today with this kick-start guide to get you moving:



- Eat a low-fat, high-fibre diet, including five servings of fruit and vegetables a day and incorporating omega-3 fatty acids, like those found in oily fish

- Do at least half an hour of moderate cardiovascular exercise (like walking, cycling or swimming), three to four times a week – exercise not only gets your heart rate going but helps maintain a healthy weight and lowers stress levels

- Drink plenty of water – it's great for promoting overall good health



- Quit smoking – doctors say it's the single most important behaviour modification you can make!

- Enjoy a glass (no more!) of red wine with your evening meal – red wine contains a powerful antioxidant called resveratrol which helps guard against heart disease.



HOW KZN HEALTH IS IMPROVING CURATIVE CARE



While primary health care is about prevention, the Department of Health is aware that facilities still need to deliver on curative care. With this in mind, this October, at a cost of nearly R13million, The Kwa-Zulu-Natal Department of Health unveiled another CATH Unit at Pietermaritzburg's Grey's Hospital to complement the one already in use at Inkosi Albert Luthuli Hospital. The machine will operate Monday to Friday servicing 15 specialised procedures per week including:

- Coronary angiography which entails mapping the heart and blood vessels for abnormalities.
- Coronary interventional procedures where the cardiologist operates on the heart's blood vessels without having to perform open surgery.
- Insertions of pacemakers and screening of mechanical heart valves and leads.
- Insertion of balloon pumps into the heart's blood vessels to improve blood flow.

- Diagnosis and repair of abnormalities in blood vessels through minimally invasive surgery. ■

For help on the service, contact:

Inkosi Albert Luthuli Central Hospital:
The CATH Unit has a 24-hour emergency service
☎ 031-240 1000

Grey's Hospital:
The CATH Unit offers services Monday to Friday
☎ 033-987 3000



Madiba's first gainful employment was as a nightwatchman at a gold mine in 1941.



He took up ball room dancing while studying at Fort Hare University and was also a boxer and long distance runner.



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

Fighting Disease, Fighting Poverty, Giving Hope

NHI UPDATE

All on track in KZN

WHILE MANY SOUTH AFRICANS seem removed from the work in progress on the country's National Health Insurance, which is being phased in over the next 15 years, there is plenty of excitement and determination to ensure its success from those hard at work behind the scenes. KZN has three pilot sites for the NHI, Amajuba being the third, after being chosen by the provincial leadership due to its positioning as both an urban and rural district. MEC Dhlomo spent much time recently assessing the three pilot sites and reports on their progress.



Amajuba

- Around 53 managers and operational managers in Primary Health Care facilities have received training as part of Capacity Building and Management training ahead of the full scale implementation of the NHI. The District has also commenced with Mobile Pharmacy Services where more than 1200 patients are now able to collect their medication from nearby Sukuma Sakhe War Rooms.
- School Health Teams: 12 teams have been appointed and are already servicing 4 232 Grade 1 learners at 98 schools on disease prevention.
- The District has also appointed a Clinical Specialist Team consisting of one Advanced Midwife and a Primary Health Care Nurse. In addition, the procurement of essential equipment for health facilities and replenishment of linen is currently underway.

Umzinyathi

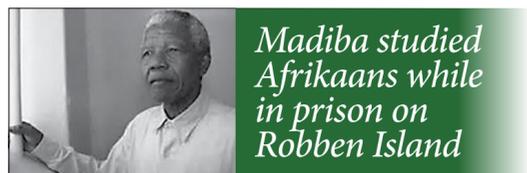
All CEO's and District Management have undergone training in Leadership and Advanced Management Programmes. All CEO posts in the hospitals have also been filled with the exception of Church of Scotland Hospital where the post has been advertised. Remarkable progress on Infrastructure has been made particularly at Charles James Memorial Hospital including the construction of a Nursing College which is now complete as well as new kitchen and laundry facilities nearing completion. A new Paediatric and TB wards under construction. Other infrastructure developments include:

- A new Pharmacy at Greytown Hospital at 68% completion.
- A Pomeroy Community Health Centre being built.

- Manxii TB Voluntary and Counselling Unit and Elandsdraal Clinic complete as well as Thathezakhe and Zamimpilo Clinics nearing completion.
- District Clinical Specialist Teams including Clinical Manager Obstetrics and Gynaecology; Advanced Midwife and Advanced Primary Health Care Nurse have been appointed.
- The District has also established a Forum between Public Medical Staff and Private General Practitioners and conducted training sessions for the latter, entailing TB management, Hypertension and Diabetes. These GP's will be contracted into the Primary Care Clinics closer to the patients.

UMgungundlovu

- Family Health Teams numbering 14 in total are in place.
- Mobile schools vehicles have been purchased: Dental Vehicle, Eye Care Vehicle and a General vehicle to be used by the 20 School Health Teams appointed to cover all municipalities serving the Quinton 1 and 2 schools. School health teams are already undertaking regular school visits for screening including: oral, vision, hearing, nutrition status, impairments, fine and gross motor development, communicable diseases and psychosocial issues.
- New Pharmacy Assistants appointed to monitor Drug Stock and Chronic Scripts. Previously Municipal run clinics at East Boom, Bruntville, Richmond and Imbalenhe have been given basic equipment and are prepared to provide maternity services.
- Sessional Doctors have also been appointed to offer medical care at Primary Health Care facilities. ■



INNOVATION IS KEY AS CAREGIVERS BECOME NURSES

IN A FIRST FOR SOUTH AFRICA, more than 320 community caregivers have graduated as nurses in KZN and have already begun their services across public health facilities in the province.

Welcoming the new recruits into the public sector, KZN Health MEC, Dr Sibongiseni Dhlomo said the graduates surpassed expectations when given the opportunity to study nursing in 2010, especially considering many had not been in a classroom environment for several years. "We expect these new nurses to continue to implement the same excellent approach and attitude that they displayed during their time as community caregivers. I trust that they will also go a long way

in assisting us to improve progress in achieving the National Core Standards – our 'Make Me Look Like a Hospital' campaign, as we have termed it in this province," said Dhlomo, adding that the training up of community caregivers into nurses was aimed at bolstering efforts to reduce the risk of Mother to Child Transmission of HIV (MTCT) in the province to less than 1.4% by 2016. There has already been a substantial reduction in transmission from 22% in 2005 to 2.8% in 2011.

Staff attitudes must change, says Dhlomo

Despite KZN doing better than many other provinces in meeting core national health care standards, Dhlomo warned that staff attitude in public health facilities remained a growing concern. "Bad staff attitude has seen us grappling with medical legal cases, poor press coverage and complaints from members of the community. It is my wish that the experience and compassion that has been the nature of the Community Care Givers' work will alter this situation and lead to our people to be treated with the dignity and respect they deserve," stressed Dhlomo. ■

Key areas for National Core Standards in health facilities:

- ✓ Cleanliness
- ✓ Reduced waiting times both at Outpatients and dispensaries
- ✓ Availability of medicines
- ✓ Improvement in staff attitude
- ✓ Safety of staff and patients
- ✓ Managers to walk about to identify and address problems timeously.

KEEPING MADIBA'S LEGACY ALIVE

KZN Children's Hospital delivers



FIVE-YEAR OLD LANGAMSO NGEMA'S name will forever be etched in the history of the KZN Children's Hospital as he is one of the first young patients to be treated by the hospital's Neurological Assessment Centre.

His mother, Umlazi resident Bahle Masinga admits to being frustrated and helpless after several visits to other hospitals for help with her son's autism proved futile. "Most of the time we would get there but the occupational or speech therapist wouldn't be available or it was very difficult to get an appointment to see them. There was no way I could afford private care and I was getting so desperate because my son was starting school and I needed a letter from a specialist recommending him to a special needs school so that he can start grade R. Someone in my church advised me to try the new KZN Children's Hospital and I managed to get a letter of referral to the hospital to be seen because they don't provide a walk in service. I was so happy I can't describe how I felt about my child finally being seen by a specialist and it was not about how much money I had to get the treatment. The experience and service was wonderful and I am very grateful that they are helping me with my son's treatment," she says.

How children with special needs benefit

The centre which forms part of the Children's Hospital, provides a comprehensive trans-disciplinary assessment, counselling and referring children with special needs, including intellectual development delays, autism, ADHD and child psychiatry disorders. It also offers services for physical disabilities such as cerebral palsy, post Guillain-Barre syndromes; multiple handicaps, genetic syndromes and other conditions. With the Centre having opened its doors just five months ago, there are already 104 patients undergoing complicated assessments for such challenges – all treated by a staff compliment of neuropaediatric specialists, physiotherapists, occupational therapists, psychologists, audiologist and dieticians.

Making a difference

For mothers like Masinga, the Children's Hospital is a life saver and for KZN in particular, the only hope of securing targeted treatment for children's health care. "How

would I have been able to afford a dietician and an occupational therapist? I don't have that kind of money. The Children's Hospital is a government hospital so it benefits the poor. The paediatrician there said she would also write a letter for me for my son's school and he is being treated by the dietician and also receiving speech and occupational therapy and they explain everything to me so that I understand what is being done," Masinga adds, her face brimming with excitement.

Health care is a right, not a privilege

The KZN Children's Hospital is being planned as the country's leading Children's Hospital, providing specialist health care for all children in KwaZulu-Natal regardless of their socio-economic backgrounds. The revamp of the hospital is far from complete as it's being done in stages as donations come in, but it's a positive start and one that keeps Madiba's legacy alive as he remained committed to improving the health care of children long after his retirement from the political arena, prompting him to say "a children's hospital will be a credible demonstration of the commitment of African leaders to place the rights of children at the forefront. Nothing less will be enough".

KZN Children's Hospital Naming Rights Offer

At a cost of R400m for the revamp, donations are desperately needed to complete the work as quickly as possible to ensure the hospital is able to offer all services. And one of the sponsorship options is the incredible opportunity to be part of history and get one of the hospital wards, clinics, or even the beautiful old clock tower, named after you or your business. So whether you are an individual donor or big business, why not make a difference and leave behind a legacy worth investing in? If you are excited about the project but don't personally have money to donate, you can still get involved by becoming a volunteer at the hospital to assist with fundraising and other activities. For further information visit the website: www.kznchildrens.hospital.org.za ■

For EFT donations, please note the following details:

BANK NAME	Investec Bank Limited
ACCOUNT NAME	KwaZulu-Natal Children's Hospital Trust
ACCOUNT NUMBER	10011437579
ACCOUNT TYPE	Current
BRANCH CODE	580105

"A children's hospital will be a credible demonstration of the commitment of African leaders to place the rights of children at the forefront. Nothing less will be enough". – Nelson Mandela

PARTNERSHIP IN DELIVERING HEALTH CARE



CLICKS HELPING HAND TRUST – lending a helping hand to moms and babies in need

CLICKS HELPING HAND TRUST provides free primary healthcare services at selected Clicks Clinics on Thursday afternoons between 13:30 and 17:00 to mothers whose babies were born in a state hospital, and who have no medical aid. Services include baby vaccinations, family planning medication and nutritional advice from Clicks' qualified nursing sisters.

Young mom Nosopho with nine month-old Thabathanani is one of the many beneficiaries and says she is happy with the level of care she gets. "The nurse has helped me so much as a first time mother. I heard from a friend about the free services that Clicks offer and I haven't looked back. My baby girl is growing up with no illnesses and she's rarely sick. Only one time I was worried because she was irritable with a blocked nose and seemed like she

had a fever. I rushed to the clinic and the nurse said she was teething and advised me how to soothe her," says Nosopho.

Vaccinating your child can be stressful. "Lots of mothers tell me how much they appreciate the care I give them, and the privacy of my clinic. Many of my customers work full time, so they enjoy the convenience of making an appointment and not having to stand in a queue," says Clicks nursing Sister Asanda Mbovane.

Here are some answers to common questions relating to vaccines and vaccinations.

Q Why do I need to vaccinate my child?

A Vaccinations are designed to protect children against many childhood illnesses – some of which are highly dangerous, even fatal. These range from polio and measles, to mumps, hepatitis, diphtheria and whooping cough.

Q Which vaccinations do I need to give my child and when?

A Speak to your Clicks nursing sister regarding which vaccination needs to be given and at what

age. She can also explain how the vaccine is administered (that is, orally or intramuscularly) and where (leg or arm, for example).

Q Are there any side effects of vaccinations, and if so what are they, and how do I treat them?

A Like any medication, vaccines may cause side effects. Mostly, they are minor and typically last only one or two days. Side effects may include soreness or swelling where the shot was given, general irritability, or even a mild fever. Serious reactions are very rare. ■

To make an appointment, contact your nearest Clicks clinic.



For more information, call 0860 254 257 or visit www.clicks.co.za

What causes mastitis?



Breastfeeding your newborn is the best start a mother can give a baby. Sometimes though, this means moms have to go through some pain and discomfort along the way, as breastfeeding can sometimes lead to mastitis which is when the breast becomes infected during breastfeeding. Learn more about this condition with our helpful guide below so that you and baby get the best out of breastfeeding.

Mastitis is often caused by the milk getting blocked in the ducts of the nipple during feeding. It's a condition some new moms experience during the first three months of breastfeeding and can make the breasts painful during feeding. It's important to treat the infection urgently to prevent an abscess from forming, so if your breasts feel a little hard during breastfeeding, your first course of action is to:

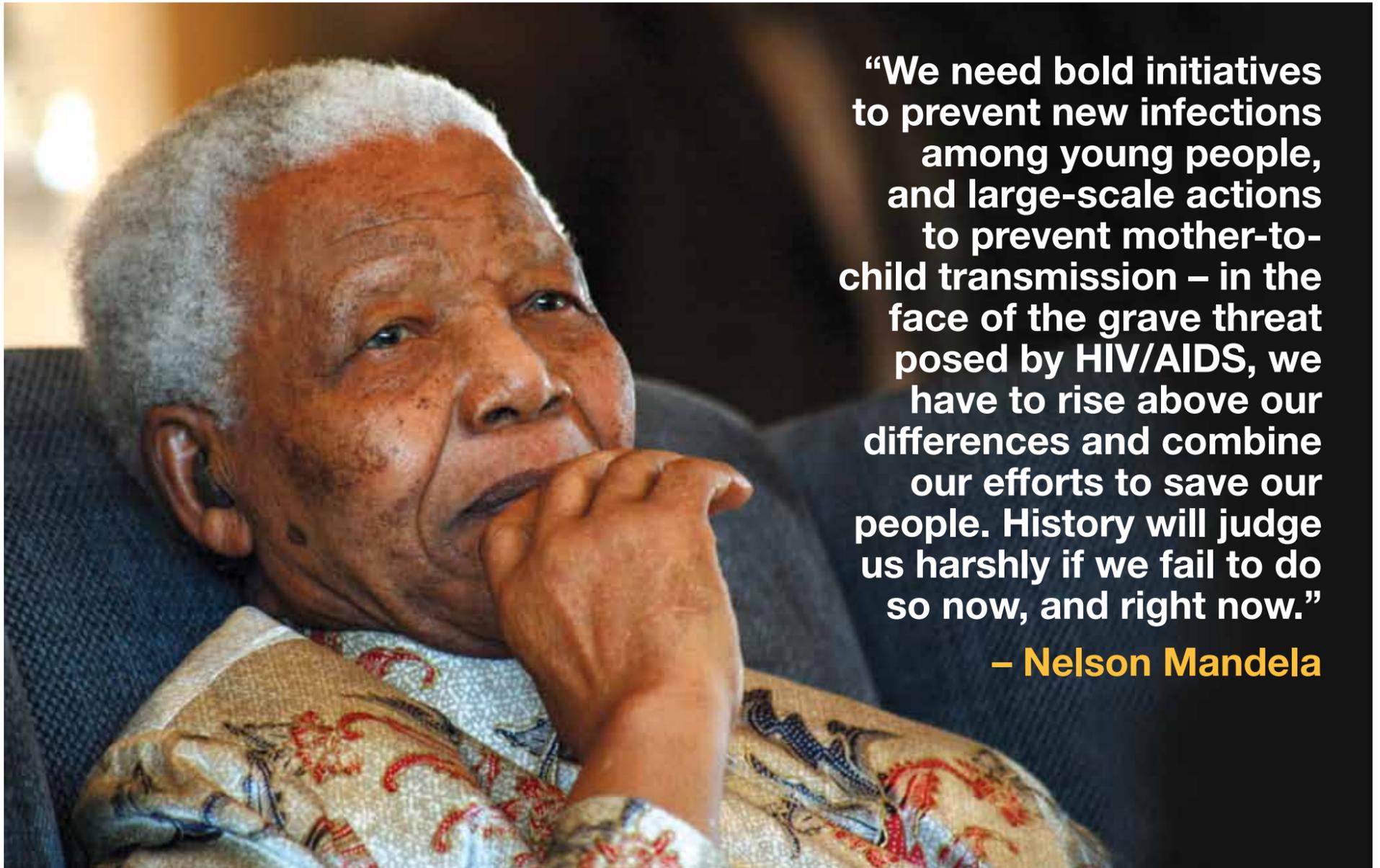
- 1 Continue breastfeeding and start with the breast that has tenderness – there is no danger for baby as any bacteria in your milk is destroyed by the baby's digestion.
- 2 Try to position baby's chin over the area of redness. This will help drain the blocked duct.
- 3 Massage gently towards the nipple while you are feeding.
- 4 Express any milk that's still remaining from your breasts after baby has had a full feed (ask your health worker to show you how to express milk).

If you develop the following symptoms, visit your clinic immediately as you will need medical treatment:

- A hard lump or tenderness in the breast and the infected breast turning red and hot to touch
- Fever
- Tiredness and weakness
- Muscle aches and pains
- Flu like symptoms
- Tearfulness.

The most likely treatment for mastitis will include:

- Antibiotics prescribed by your doctor. If you do take antibiotics you need to be aware of the possibility of thrush developing on your
- nipples. This feels like needles piercing your nipple, especially during and after breastfeeding. Contact your clinic if this happens.
- Use of painkillers is recommended. Paracetamol and ibuprofen are suggested.
- Heat your breast with a hot cloth before feeding. Start feeding from the infected side and try to position baby's chin over the affected area.
- Use an ice pack wrapped in a cloth to cool down your infected breast after breastfeeding. Fully drain your breasts after each feed.
- Drink plenty of fluids (no alcohol) and REST, REST, REST!



“We need bold initiatives to prevent new infections among young people, and large-scale actions to prevent mother-to-child transmission – in the face of the grave threat posed by HIV/AIDS, we have to rise above our differences and combine our efforts to save our people. History will judge us harshly if we fail to do so now, and right now.”

– Nelson Mandela

Dr Kelly Gate voted Best Public Service Leader 2013

“I am a firm believer in Madiba’s values of putting other people first” That was the response of Bethesda Hospital Medical Manager, Dr Kelly Gate two weeks ago when asked how he felt about winning the Overall Batho Pele Award and gold award for Best Public Service Leader of the Year.



It is a touching reminder of how Madiba has influenced others to achieve greatness with humility.

KZN Department of Health salutes you, Dr Kelly, and all staff at Bethesda Hospital for service excellence! Well done!

Together, we can continue Madiba’s legacy in our service delivery across all our health facilities. ■

It is in our hands to make a difference...

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Department:
Health
PROVINCE OF KWAZULU-NATAL

How much do you know about MMC?
Which of these are true about Medical Male Circumcision?

• Sex is just as good: MMC has no effect on sexual desire, performance or satisfaction	TRUE	FALSE
• A circumcised penis is easier to keep clean	TRUE	FALSE
• Medical circumcision reduces the risk of becoming HIV infected	TRUE	FALSE
• A woman is less likely to get the STI linked to cervical cancer if her partner is medically circumcised	TRUE	FALSE

If you answered TRUE for all of the above, you already know first prize is to CIRCUMCISE!

The KZN DoH and a number of PEPFAR-supported NGOs offer free MMC in KZN. The KZN DoH offers MMC in all public health facilities. To find out where else you can access MMC in KZN, send a free "please call me" to **082 371 7775**.



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