

## KZN HEALTH MEC HUMBLLED AND EXCITED BY TRADITIONAL HEALERS' OVERWHELMING SUPPORT FOR NATIONAL HEALTH INSURANCE (NHI)



**KWAZULU-Natal Health MEC Ms Nomagugu Simelane-Zulu has thanked traditional healers in the province for the enormous progress that they have made to popularise the National Health Insurance (NHI) programme in their communities.**

During the MEC's first-ever meeting with traditional healers, at Grey's Hospital in Pietermaritzburg, it emerged that many had not only endorsed and started familiarizing themselves with NHI, but they are also

encouraging their clients to fill in their submissions in support of the NHI Bill that is in the process of being developed into law.

This comes as KwaZulu-Natal prepares for a round of public

hearings on NHI, which are set to take place in four districts on the weekend of 22 – 25 November 2019.

During today's meeting, which attracted more than 200 healers from around the province, MEC Simelane-Zulu also spoke about her plans to work with abelaphi bendabuko and turn them into ambassadors for the Department.

She wants them to be given the capacity to be able to detect the basic symptoms of certain ailments so that they can refer their clients to Primary Healthcare Clinics for further treatment.

"It was a very exciting engagement," said MEC

Simelane-Zulu, reflecting on the meeting.

"The most important thing is that the traditional healers are on board for NHI. They are very excited, and the surprising part is that they themselves, outside of the Department, had started engaging among themselves about what NHI is. They are, on their own, making contributions towards the bill, on what they want. One of the issues that they raised is that NHI must talk to the role that they must play. We said, that is their prerogative, they need to write their submissions. But other than that, they are more than happy to have NHI, and they are welcoming it."

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The MEC also revealed for the first time that from next year onwards, there would be an annual conference where the Department would meet with traditional healers to discuss matters of mutual interest, and strengthen their working relationship.

Speaking to the healers, she said: "I wish to assure you that you are truly valued as a very important stakeholder without whom we will not succeed. We are essentially serving the same client. We recognise and appreciate your

stature as a sector of society that our fellow compatriots have full belief and confidence in. We believe that, as part of our integrated approach to service delivery, and with the right kind of support, you can be our force-multiplier.

"We want to get to a point where every registered Traditional Healer is able to spot some of the obvious signs and symptoms of ailments such as TB, and HIV/AIDS. We want to get to a stage where, while you dispense your medicine, you also advise

these clients – in a dignified manner - to also visit their local healthcare facility. It therefore makes perfect sense to bring you on board, train and convert you into ambassadors for health.

**"Furthermore, nothing should stop you from advocating for some of our programmes, such as:**

- Advising those who present to you with symptoms of cancer thinking that they have been bewitched, to consider getting screened

and tested for cancer instead;

- Encouraging young people to use condoms;
- Urging them to undergo Voluntary Testing and Screening for HIV; and
- Medical Male Circumcision; and general health screening.

This way, you will be helping us expand testing access, while improving linkage to care."

## NHI PUBLIC HEARINGS IN KZN ARE SCHEDULED AS FOLLOWS

Friday	22 November 2019 – Umkhanyakude District Municipality	at 16H30 – 20H30
Saturday	23 November 2019 – Ethekewini Metro Municipality	at 10H00 – 15H00
Sunday	24 November 2019 – Harry Gwala District Municipality	at 10H00 – 15H00
Monday	25 November 2019 – Umzinyathi District Municipality	at 16H30 – 20H30.

Details on the exact venues will be announced in due course.



# MEC SIMELANE-ZULU CALLS FOR LIFESTYLE MODIFICATION TO LOWER THE RISK OF TYPE II DIABETES



**AS Diabetes Awareness Month begins to gain momentum during November, KwaZulu-Natal Health MEC Ms Nomagugu Simelane-Zulu is calling for citizens to make a few lifestyle adjustments that could lower their risk of developing this silent killer disease.**

Speaking during a well-attended community outreach programme – which saw 423 people being screened for various diseases in one day - at Umzumbe, Ward 6, on the Lower South Coast yesterday, MEC Simelane-Zulu said the prevention of diabetes and/or its early detection could help reduce the number of people who die or have their limbs amputated unnecessarily each year.

This, she said, could result in a better quality of life; save Government a lot of limited resources and ensure that they are channelled where they are needed most.

Diabetes is the second deadliest

disease in South Africa after Tuberculosis (TB). (While TB accounted for 29,513 deaths in 2016, 25,255 people died from diabetes).

According to a report from Statistics SA, no fewer than 3.5million people, or 6% of the population, suffer from diabetes in South Africa. A further 5 million are said to have pre-diabetes, while many others are yet to be diagnosed.

## WHAT IS DIABETES?

Diabetes is a condition where a person has high blood sugar (glucose) level in the body. You develop diabetes when your body doesn't produce enough insulin. Without insulin your body cannot

get the energy it needs from your food. Normally, a gland called the pancreas makes insulin which carries the sugar in the blood into the cells. In diabetes, the pancreas fails to supply enough insulin, or the insulin doesn't work properly.

## CAUSES AND TYPES OF DIABETES:

The causes of diabetes may vary depending on a person's genetic make-up, health, family history, ethnicity, lifestyle choices and other environmental factors.

There are two major types of diabetes: Type I, commonly called juvenile diabetes, and Type II, commonly called adult on-set diabetes. Both have similar symptoms but very different causes.

Type I diabetes, usually diagnosed in childhood, is a disease whereby the body's own immune system attacks and kills the cells in the pancreas which produce insulin, leaving a person's body without insulin, and unable to regulate its blood sugar levels.

Type II diabetes is a disease that results when the body's cells become resistant to insulin. In Type II diabetes, unlike in Type I,

insulin is still produced by the body; it just isn't used appropriately. Type II Diabetes is avoidable though. It's a self-made illness, due to poor diseases and lack of exercise.

## LIFESTYLE MODIFICATION:

MEC Simelane-Zulu said: "When it comes to Type II diabetes, it is extremely important that everyone – young and old – watches what they eat. We should always strive to lower our intake of foods that have too much sugar, fat or salt. We must also ensure that we embrace a more physically-active lifestyle. Even taking regular walks can make a big difference. We also encourage our fellow compatriots to get screened and tested for diabetes, so that it can be detected early, and the necessary interventions made if needs be.

"So, as we start Diabetes Awareness Month and beyond, our message is: let us lower the risk factors of developing Type II Diabetes. We can also do this by reducing or stopping alcohol intake, smoking and all other bad habits that are not good for the body."

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## RISK FACTORS AND SYMPTOMS OF DIABETES INCLUDE:

Age, obesity, genetics, physical inactivity, impaired glucose tolerance. The symptoms are constant thirst, increased hunger, urinating more than usual, numbness/tingling in fingertips and toes, tiredness, unexplained weight loss, blurred vision/visual disturbance, skin infection due to slow healing wounds and constant tiredness.

MEC Simelane-Zulu says:

“Unfortunately, there is no cure for diabetes, but with careful monitoring and commitment, diabetics can avoid complications and enjoy a long, productive life. It is especially important to control weight, blood cholesterol and blood pressure, to do regular exercise, and to avoid smoking.”

## THOSE ALREADY LIVING WITH DIABETES ARE ADVISED AS FOLLOWS:

Attain and maintain a healthy body weight;

Eat small, regular meals, including snacks and do not skip any meals;

Include plenty of fibre rich carbohydrates such as whole wheat products, dry beans, vegetables and fruit;

Give preference to unrefined carbohydrates and include at least 5 portions of fruit and vegetables in your diet every day;

Limit fat intake, especially saturated fats (animal fats) and remove all visible fat from meat (skin off chicken) before cooking;

Use healthier cooking methods such as steaming, baking in the oven, microwaving, boiling, braai over the fire – instead of deep frying in oil or adding fat;

Drink at least 6-8 glasses of water

per day. Do regular physical exercise for a minimum of 30 minutes at least 3 times per week. Any exercise programme should be initiated with the permission of a doctor.

Let us all create a Healthy KZN –

In this month of November I am led to remind the citizens of this Province of our motto as a Department that says: My health, Our health, a healthy KwaZulu-Natal

To turn this motto into a reality, it is imperative to draw our attention to the ravaging effects the diseases of lifestyle or non-communicable diseases are making to mankind. I am propelled to do this because 14th of November is designated as the World Diabetes Day.

We need to be honest with one another and agree that Non-Communicable Diseases including Diabetes are self-made and can be prevented. They are actually diseases of lifestyle. These we invite by being comfortable in our Obesity, Physical inactivity; Unhealthy diets; Abuse of alcohol and drugs as well as presenting ourselves late for disease detection, diagnosis and treatment.

The time has come for all of us to understand that tackling Diabetes is not the sole responsibility of health care professionals but of communities, families as well as individuals. We all have a responsibility to internalise the value of health and make concerted efforts to learn mechanisms to ensure disease prevention, and also steer away from risk factors.

Currently, the scariest thing about diabetes is that more than 50% of all people with diabetes are



unaware of their condition. With high prevalence of TB and HIV in our Province the situation is dire because diabetes is a common comorbidity in people with TB. It is thus very critical for all of us to start acknowledging that we have a Diabetes problem in South Africa. Let us not fool ourselves; Diabetes can affect any person whether rich or poor and worse now, even children in early childhood are also vulnerable. We have to caution that undetected and advanced Diabetes eventually leads to horrible consequences that include renal failure; limb amputation; cardiovascular diseases; stroke as well as blindness, amongst others. Indeed, most chronic diseases including diabetes are hereditary but many lifestyle and environmental factors such as inappropriate diet and sedentary lifestyle are known to increase the risks.

Small but well planned and coordinated efforts like engaging in physical exercises do delay the onset of most of the non-communicable diseases including Diabetes. What is more remarkable is that those who already have such diseases can delay the onset of the complications caused by such diseases if they exercise and in some cases, people find themselves reducing the treatment they use, because their bodies and systems get rejuvenated if they exercise. This then supports the notion that having diabetes does not mean the end of a normal healthy life. Indeed, Diabetes is the type of condition that is largely

preventable through early detection and learning how to manage it.

There are usual tell-tale signs through which this silent killer manifests itself; such as frequent urination; excessive thirst; slow healing cuts and bruises; numbness in hands and feet; extreme hunger; unexplained weight loss; increased fatigue; irritability as well as blurry vision. One biggest concern for our country is the increasing obesity rate amongst our children. According to the South African Youth Risk Behaviour Survey, more leaners have been found to be overweight. This is attributable to the sedentary behavior, with statistics showing that 1 in 4 learners watch television for 3 hours or more per day and that more than 1 in 3 do not participate in sufficient physical activities.

**As 2020 approaches, let us commit to cut on tobacco use; harmful consumption of alcohol and unhealthy diets and physical inactivity.**

**Let us use the health facilities built close to our homes for disease screening and testing, so that we may receive treatment early if needs be.**

**TAKE CARE OF YOUR HEALTH. IMPILO!**



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# ALLEGED RAPE OF A NURSE: KZN HEALTH MEC CONDEMNS INCIDENT AT NKONJENI HOSPITAL

**KWAZULU-Natal Health MEC Ms Nomagugu Simelane-Zulu is outraged and demanding answers from both management of Nkonjeni Hospital in Mahlabathini and the hospital's contracted security company for their failure to apprehend a suspect who allegedly raped a nurse in an internal clinic's consulting room.**

It is alleged that the unknown suspect entered the hospital yesterday, around 5pm, under the pretext of seeking medical attention.

He proceeded to a consulting room, where he allegedly overpowered the nurse and raped her.

It is unclear how the alleged rapist was able to leave the hospital premises undetected.

By the time police got to the scene, the suspect could not be located.

The nurse has subsequently received emergency medical attention, and arrangements have

been made for her to be seen by a psychologist.

She is said to be "coping" under the circumstances.

Reacting to the incident today, MEC Simelane-Zulu said: "I am extremely outraged, and completely shocked and concerned that a nurse who left her home to provide care and hope to the sick could end up being sexually violated in the workplace in such a horrendous way. The act itself is grossly disgraceful and inhumane.

It is also completely unacceptable and extremely concerning that the alleged perpetrator was able

to get away without being apprehended.

"It raises serious questions about security arrangements at this hospital. If we are going to be paying for security and this happens, it means we are not paying for a service. Our responsibility is to take care of our nurses and everyone who works in the Department.

"I have now demanded a full report from management of the district concerned, as well as from our security unit at Head Office on how such a thing happened. It just cannot be allowed, and sends the wrong message in terms of

the safety of our own staff and patients themselves, which is paramount to us.

"Therefore, I want to know what is going to be done to prevent a recurrence of such an incident, so that our staff can rest assured that they are safe."

**The MEC has wished the affected nurse a speedy recovery, and has directed that she be given all the clinical and psychological support that she needs. "It really is the least we can do," she said.**



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# SADC MALARIA WEEK

**Malaria is one of the most common tropical diseases. It is a serious disease and may be fatal if not diagnosed and treated at an early stage. SADC Malaria Week started on 04 to 08 November 2019. Malaria is caused by parasites called Plasmodium, which are transmitted by some species of Anopheles mosquitoes. The parasites attack the live cells and red blood cells and may cause blockage of the small blood vessels in the human body. These blockages can result in complications such as cerebral malaria, which is frequently fatal.**

## How is Malaria spread?

- The mosquito sucks up the parasite when feeding on the blood of an infected person.
- The parasites multiply in the stomach of the mosquito and after a few days move to the mosquito's salivary glands.
- When the mosquito feeds again, parasites are released into the blood stream where they develop and may cause malaria.
- There is also a slight possibility of contracting malaria in other areas if infected vector mosquito are accidentally brought in by motor car, taxi or train.

## Prevention

Remember the A, B, C, D and E of malaria prevention

### A Awareness of malaria risk.

- Going somewhere? Find out whether there is a risk of getting Malaria in that particular place.
- The risk of getting malaria is lower during cold and dry seasons

### B Avoidance of mosquitoes

- Take precautionary measures to prevent mosquito bites in the risk area

## Distribution of Malaria

- Malaria always occurs in the low altitude areas of Northern KwaZulu-Natal - this is known as the endemic areas
- Malaria occurs sporadically in the southern part of the Northern KwaZulu-Natal sugar belt - this is known as the epidemic areas.

- If possible, remain indoors between dawn and dusk (mosquito carrying malaria bite at night)
- Wear long-sleeved clothing, trousers and socks when going out at night
- Sleep under a mosquito-proof bed net, preferably one that has been treated with approved insecticide
- Apply and insect repellent to exposed skin at night
- Spray inside with an insecticide spray after closing windows and doors
- Install gauze in on the outside of doors and windows of a house
- Burn mosquito coils or use mosquito mats indoors
- Continue with the medication while in the area and for 4 weeks after leaving the area

## D Detection of malaria

- The majority of deaths and cases of complicated malaria result from delayed diagnosis and/or inappropriate treatment
- Seek immediate medical attention if you have any "flu-like symptoms" for up to 6 months after leaving a malaria area e.g., fever, headache, chills, muscular pain
- A blood test or rapid malaria test will confirm if you have malaria

## E Effective treatment

- Malaria must be treated as a medical emergency
- The sooner effective treatment if started, the better the prognosis
- Medication
- Prophylactic medicine must be taken at least 24 hours before entering a malaria endemic area, then for the duration of the stay in the area and for 4 weeks after leaving the area
- If possible, pregnant women must not visit a malaria endemic area.
- A pregnant woman must consult her doctor before taking prophylaxis.

## C Compliance - Take your medicine correctly

- There is no prophylaxis that is 100% effective, but correct medicine will reduce your risk of severe illness
- Take only the medicine recommended by a health professional.
- Start taking the medicine before entering the malaria risk area
- Take the medicine at the same time every day (or week, for weekly medication) with plenty of water after a meal



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# KZN INTERVENTIONS IN THE FIGHT AGAINST MALARIA

**The Provincial Malaria Programme is hard at work with its key Malaria Control, Prevention and Elimination Strategies or Interventions to Raise Awareness and Vector Surveillance including Promoting Partnerships in the fight against malaria as a killer disease. Malaria is mainly endemic in districts of UMkhanyakude, King Cetshwayo and Zululand.**

The province has managed to reduce and sustain the malaria burden to the lowest level to date through the following initiatives.

- Community Mobilization through Health Promotion or Information, Education and Communication for early signs and symptoms recognition, medical or treatment seeking behaviour, prompt diagnosis and treatment including use of Personal

Protective Measures. The afore mentioned activities are conducted at both community and health facility levels where the public is tested and treated accordingly.

- Indoor Residual House Spraying (IRHS). The Programme involves conducting House Spraying within the identified malaria endemic areas. All targeted households are visited,

re-educated and spraying of houses with safe and recommended and approved Insecticides applied by trained departmental Malaria Surveillance Agents.

The above are but not limited to efforts committed to Eliminate Malaria as per recently Launched Malaria Elimination Strategic Plan for South Africa 2019 - 2023 by the National Minister of Health, Dr ZL Mkhize.

## USE ANTIBIOTICS WISELY



**Each November, World Antibiotic Awareness Week (WAAW) aims to increase global awareness of antibiotic resistance and to encourage best practices among the general public, health workers and policy makers to avoid the further emergence and spread of antibiotic resistance.**

**Since their discovery, antibiotics have served as the cornerstone of modern medicine. However, the persistent overuse and misuse of antibiotics in human and animal health have encouraged the emergence and spread of antibiotic resistance, which occurs when microbes, such as bacteria, become resistant to the drugs used to treat them -WHO**

In South Africa drug resistant tuberculosis (TB MDR and TB XDR) is unfortunately all too common. These severe types of TB developed overtime due to patients defaulting (stopping or being inconsistent) on their treatment. Drug resistant strains of illnesses are an example of the effects of misusing antibiotics.

### What you can do to be part of the solution

- Practice good basic hygiene to decrease the chances of infection. Less infections mean less usage of antibiotics
- Complete the full treatment prescribed to you by your doctor, even if you feel better before that period ends
- Never share antibiotics
- Do not self-prescribe antibiotics. Only use when prescribed by a medical professional

## THE ART OF RADIOGRAPHIC IMAGING

**World Radiography Day is an annual celebration held on the anniversary of the date of discovery of X-Rays by Wilhelm Conrad in 1895. The international initiative is intended to raise awareness and interest in radiography as a career. The radiographers use this day to create public awareness about diagnostic imaging (using images from within the body to diagnose a patient) and radiation therapy. This is also to promote the vital role radiographers play in radiation protection of our patients.**

Radiographers work closely with doctors, nurses, physicists and other members of the oncology team to treat patients with cancer. They locate the area to be treated and work out the exact dosage required with doctors.

The most common types of diagnostic radiology exams include:

- Computed tomography Scan (CT)
- Magnetic resonance imaging (MRI) and magnetic resonance angiography (MRA)
- Mammography
- Nuclear medicine, which includes such tests as a bone scan, thyroid scan, and thallium cardiac stress test
- X ray
- Ultrasound Scan

Interventional radiologists are doctors that use imaging such as CT, ultrasound, MRI, and

fluoroscopy to help guide procedures. The imaging is helpful to the doctor when inserting catheters, wires, and other small instruments and tools into your body. This typically allows for smaller incisions (cuts). Doctors can use this technology to diagnose or treat conditions in almost any part of the body instead of needing to directly look inside of your body through a scope (camera) or with open surgery. Interventional radiologists often are involved in treating cancers or tumours, blockages in the arteries and veins, fibroids in the uterus, back pain, liver problems, and kidney problems.

The doctor will make no incision or only a very small one. You rarely need to stay in the hospital after the procedure. Most people need only moderate sedation (medicines to help you relax)



# WENTWORTH HOSPITAL RAISES R12 000 FOR CANSA

Wentworth Hospital commemorated Breast Cancer Month last month by embarking on an awareness drive that resulted in more than R12 000 being raised for the Cancer Association of South Africa (CANSA).

The awareness drive was held at the Out Patients Department where a number of activities took place such as offering pink hairstyles for a R50 donation and selling various eats. Educational talks and reading material was distributed to attendees.



## WHO SAID WHAT THIS WEEK?



President Cyril Ramaphosa says the Springboks' victory in the 2019 Rugby World Cup in Japan is "a great outcome". "The boys have outshone everyone in the world. They are the best; they are the best team. When I spoke to them hours before the match, I could see in their eyes that they were really determined, and they have delivered a great victory. It was really go Bokke."

"We are the champions; indeed, we are the champions of the world,"

KZN Health MEC Ms Nomagugu Simelane-Zulu Condemns Incident At Nkonjeni - "I am extremely outraged and completely shocked and concerned that a nurse who left her home to provide care and hope to the sick could end up being sexually violated in the workplace in such a horrendous way. The act itself is grossly disgraceful and inhumane."

## INVENTIONS THAT SHAPED THE WORLD: THE BLOOD TRANSFUSION:

In 1818, British obstetrician James Blundell performed the first successful human blood transfusion. Prior to this, other transfusions had taken place, notably by Jean-Baptiste Denis in 1667, but were between animals or between animals and humans.

James' experiment involved transferring blood between a patient who had, unfortunately, hemorrhaged during childbirth. Over the years Blood Transfusion has saved countless lives across the World. The South African National Blood Service has also provided an essential service

within South Africa and is rated amongst the best in the world in the provision of blood and blood products.

Source: <https://interestingengineering.com/15-medical-inventions-and-discoveries-of-the-1800s-that-have-come-to-define-modern-medicine>



# KZN HEALTH IN PICTURES

MEC'S FIRST-EVER MEETING WITH TRADITIONAL HEALERS, AT GREY'S HOSPITAL IN PIETERMARITZBURG



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# KZN HEALTH IN PICTURES

WENTWORTH HOSPITAL COMMEMORATED BREAST CANCER MONTH LAST MONTH BY EMBARKING ON AN AWARENESS DRIVE THAT RESULTED IN MORE THAN R12 000 BEING RAISED FOR THE CANCER ASSOCIATION OF SOUTH AFRICA (CANSAS).



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Department:  
Health  
PROVINCE OF KWAZULU-NATAL

**COMPILED BY:**

**CORPORATE COMMUNICATIONS**  
(KWAZULU-NATAL DEPARTMENT OF HEALTH)

TEL: 033 395 2547 OR 033 395 2653 | FAX: 033 342 9477

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