

HEALTH MATTERS **FREE** Ezempilo

EDUCATE || INFORM || EMPOWER EDITION 4



health

Department:
Health
PROVINCE OF KWAZULU-NATAL



HOW HIV/AIDS CAN SPREAD

HIV lives in body fluids such as blood, semen and the vaginal fluids of people infected with HIV. The virus is spread when these fluids get into the body of another person.

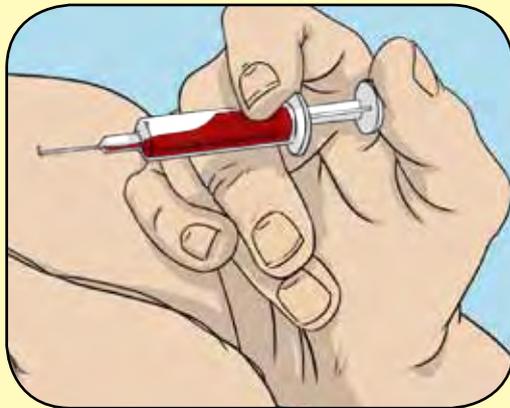


Unsafe sex with someone who has the virus. high risk - use a condom!

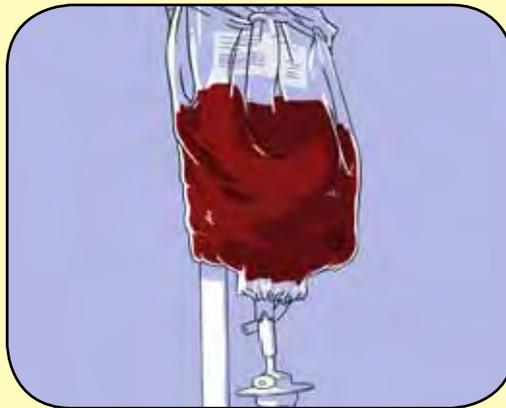


An infected mother to her baby through pregnancy, delivery or mixed bottle and breast feeding. Exclusive breastfeeding is best!

REGULAR CHECK UPS DURING PREGNANCY AND AFTER DELIVERY CAN MINIMISE THE RISK OF TRANSMISSION TO BABY



Unclean needles or syringes, or any tool that pierces or cuts the skin.



Blood transfusions, if the blood has not been tested to be sure it is free from HIV/AIDS



Infected blood that gets into cuts or an open wound of another person.

HOW HIV/AIDS IS NOT SPREAD

HIV does not live outside the human body for more than a few minutes. It cannot live on its own in the air or in water. THIS MEANS THAT YOU CANNOT GIVE OR GET HIV IN THESE WAYS:



Touching, kissing or hugging.



Caring for someone with HIV/AIDS.



Sharing a bed.



Sharing food or utensils.



Sharing or washing clothes, towels, bed covers or toilets.



From insect bites.



health

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PROVINCE OF KWAZULU-NATAL

Fighting Disease, Fighting Poverty, Giving Hope

Message from...



KZN HEALTH, HEAD OF DEPARTMENT DR. SIBONGILE ZUNGU

It's Easter, and our province is once again filled with holiday makers and school children heading for the beaches and all that we have to offer. It's also the time of the year when our health resources including ambulances, hospital and clinic staff face the burden of added pressure as accidents happen more frequently on the roads due to congestion, over tired drivers travelling long distances without a break, drink driving and alcohol abuse at home during the holiday period, leading to more domestic violence. Sadly, these are all consequences which can be avoided. Accidents on the road leads to dozens of hospitalisations, emergency department visits and many doctors' appointments – not to mention the loss of life, limbs and earnings due to time off work. While KZN Health spends around R800 per person per day in a hospital, it spends around R10 000 for victims of trauma and violence who require intensive care as a result of accidents and domestic violence – all of which can be avoided. The incidence of violence and drink driving around this time of the year places a greater burden on the Department's ability to deliver an equitable health care service as it reduces the resources available - both human and financial from other services such as maternity and medical care. KZN Health would therefore like to urge all residents and visitors to our province to be cautious around this period. By being responsible with our health, we would all benefit from a more effective health service. Here's wishing all residents and visitors a safe and healthy Easter!



DR MUSA GUMEDE, DEPUTY CITY MANAGER, HEALTH AND SOCIAL SERVICES, ETHEKWINI MUNICIPALITY

As holiday makers arrive in our friendly sunshine province in droves this month to celebrate the Easter holidays, our roads are once again congested, overwhelmed with the burden of extra traffic. Our beaches are filled to capacity with everyone soaking up the holiday atmosphere, and drinking is the favourite indulgence. However, as eThekweni Municipality, we are appealing to people to drink responsibly. Our appeal throughout the year to take responsibility for your health remains constant, but even more so over the Easter period when many lives are lost due to reckless drinking, driving and over indulgence. Please, please, remember and consider those around you. It is all too easy to forget the consequences of our behaviour until it is too late. As a city we are noted for our hospitality, warmth and our weather. But let us also set an example by becoming noted for safety on the roads. Enjoy the festivities and party atmosphere in our city over Easter, but let us do so responsibly. eThekweni Municipality wishes all our residents and visitors to our city a safe and blessed Easter. Remember, prevention is cure - don't drink and drive, it could save your life!

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With thanks from the following contributors:

KZN DEPARTMENT OF HEALTH
ETHEKWINI MUNICIPALITY HEALTH UNIT

Zohra Mohamed Teke (Editor)
Liz Clarke (Associate Editor)

Write to us...
P O Box 25439
Gateway
4321

WRITERS

Coliwe Zulu
Derick Matsengarwodzi
Siphilile Shelembe
Elmarie Kruger
Dudley Viall (Cartoonist)

EMAIL:
editor@ezempilohealthmatters.co.za

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BE A REAL MAN



Get tested and know your HIV status

“The only way to encourage men to get tested for HIV is by giving out more information about the benefits of knowing one’s status and to let them know their life is their own responsibility,” says Thabo Gwala, an HIV/Aids counsellor in Pietermaritzburg. He also says that the majority of people who get tested and end up on Anti-retroviral treatment at the City Central Clinic are women. Ezempilo Health Matters spoke to 25 year old Msizi Mchunu, about why he was afraid of going for an HIV test and how he overcame it.

Msizi: I have always wanted to know my status but felt that it was not a male thing to do. But I realised that our province has a high rate of HIV and was encouraged by my girlfriend and our leaders. I want to stay healthy.

Ezempilo: Generally men do not want to get tested or do not want to be recognised when they do so. What do you think is the problem?

Msizi: This is true because there is still a belief that men are better placed in a relationship and are brave, if they are seen at clinics they are labelled as weak. When someone is infected the first one to be blamed is always the person’s wife or girlfriend, not the man himself.

Ezempilo: Do you believe this is true from your experience?

Msizi: Unfortunately no, but most people believe it and it needs a lot

of education to help men out there to know that this is not the case and they are wrong in their belief.

Ezempilo: How would you encourage your friends to get tested?

Msizi: I have tried to take them with me but it all comes down to self-discipline and how much you value your own life as an individual and being responsible with your health.

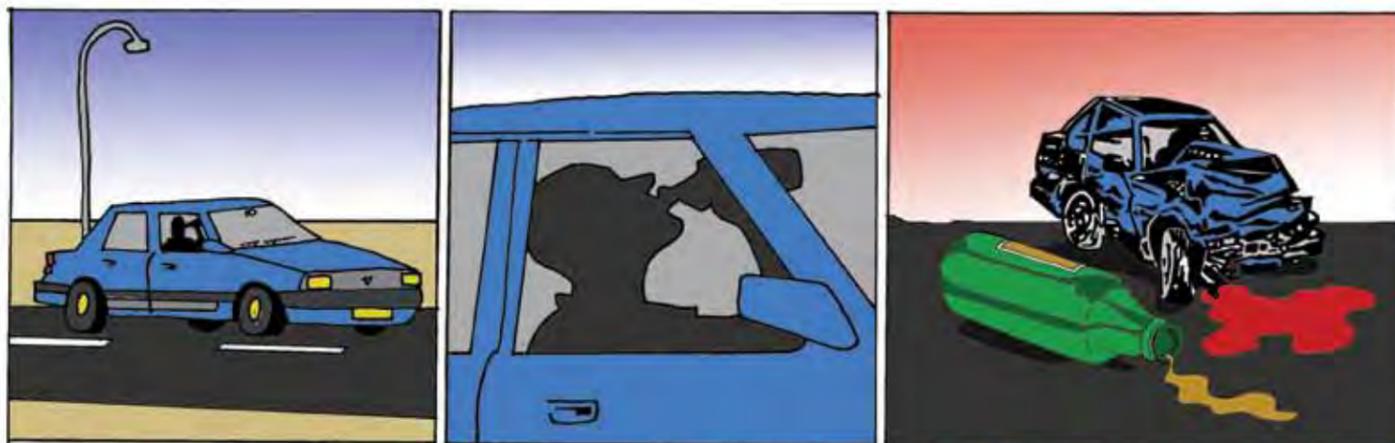
Ezempilo: How can men overcome these barriers?

Msizi: We need to accept that HIV/Aids is real. Secondly, we need to get the correct information about the disease and its causes. Finally, we need to value other people’s lives in a relationship and make sure that our own actions do not affect them as well. If you know your status you can make better decisions about your life. Education is the key.

Ezempilo: Do you know your HIV/Aids status?

Msizi: Yes, I recently got tested last year. I know my status and also that the results were negative.

Ezempilo: How did you get the courage to visit a testing centre after not wanting to do it?



ARRIVE ALIVE - DON'T DRINK ON THE ROAD

HIV AND AIDS —

Education is power, use it to protect your health



HIV is a very frightening virus and we've all heard about it. Yet many of us still refuse to know the facts, because we fear it. We can only protect ourselves if we understand what AIDS is. Once you have been tested and know your status, you can have peace of mind and deal with the way forward – whatever the result.

Correct information is your best friend. Did you know for example that people with HIV that are not on treatment can go up to 10 years without a single symptom. So let's look at some of the key facts you need to know...after that important test

What Exactly Is HIV?

In simple terms, it's a very small germ, called a virus that you cannot see. AIDS is a disease that develops later, after a person has been infected

with HIV, the AIDS virus. When a person becomes infected with HIV, the virus attacks the immune system – the part of your body that fights infection. Because HIV takes many years to make someone sick, most people with HIV feel healthy and don't even know they have it.

Important:

You can pass HIV to others as soon as you are infected, even though you look and feel healthy. You cannot tell from just looking at someone that they have HIV or AIDS. The only way to know if you are infected is by getting tested!

What To Do First?

If you test positive, visit your local health worker or clinic and they will advise you on where to receive treatment and advice. It is important to educate yourself about HIV/AIDS – there are many things that are often said about the disease that are not

true, so get the facts first - education is power, use it to protect your health.

Medication:

The decision of when to take HIV medication depends on the results of two blood tests taken by a doctor. The first is a viral load test to see how much HIV is in the bloodstream, and the second is a CD4 cell count, which determines how strong your immune system is – your body's ability to fight the disease. It's important to take care of your health especially if you have HIV/AIDS, as most people with AIDS die from diseases their bodies are no longer strong enough to fight.

Know your status, get tested today!

What Do I Pay?

HIV medication is offered free at hospitals where the government rollout treatment plan is in place.

How Often Must I Go For Check Ups?

It is advised that HIV positive patients should visit their doctor every three to six months for a checkup to find out if the HIV is progressing, pregnant mothers more often to monitor the health of both mom and baby.

When To Start Treatment

You will need to consult your health worker who will decide this, depending on your CD4 count.

Once you start your treatment, it will have to be continued daily for life. Interrupted treatment can cause the virus to worsen and become resistant to drugs, which means your body will not be able to fight diseases any longer.

Breast Feeding If You Have AIDS:

HIV is sometimes passed to babies in breast milk. Nobody knows yet how often this happens or why it happens to some babies and not others. To protect their babies, some mothers find a friend or relative who are not HIV positive and who can breastfeed their baby for them, which is the safest choice. But, even if you

are HIV infected, it is usually better to breastfeed than to use other milk or formula. In many cases, the risk of diarrhoea and malnutrition from other milks are greater than the risk of HIV, especially in baby's first six months of life – so breast feeding is best!

If you choose breastfeeding, do not mix breast milk and formula feeds, or any other solids, as mix feeding may cause transmission of the virus when breastfeeding.



A smile and caring attitude makes all the difference to a sick person



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Planning a baby when you are HIV positive

If you and your partner are HIV positive and regularly use condoms during sex, how would you ever start a family?

A few years ago, it would have been unheard of, but today things are changing. If, as a responsible HIV positive couple, you would like to have a healthy baby, there are choices, and hope.

“The first step is for the couple to visit their nearest primary health clinic to determine what stage of HIV they have. This is crucial in order to begin the assessment. It would not be responsible if a couple who has HIV just starts fertility treatment without treating their HIV or considering their risks of infecting their unborn child. They need to discuss their ARV treatments with a health worker, and once this is done, the health worker will provide them with the different options they have to start a family,” – Jacqueline Ngozo, KZN Health Acting Manager, HIV/AIDS.

Treatment:

One of the ways you can still have a healthy HIV free baby, even if you are HIV positive, is to allow a fertility clinic to process your donated sperm and egg to make sure that your baby is fit and healthy.

Hope:

For the first time it offers HIV-positive people an equal chance to have healthy babies. “HIV is no longer seen as a death sentence but a chronic disease, and people with chronic diseases are entitled to have fertility treatment. There is hope of delivering an HIV-negative child and, with the right treatment, the parent can live a long life”, says one doctor.

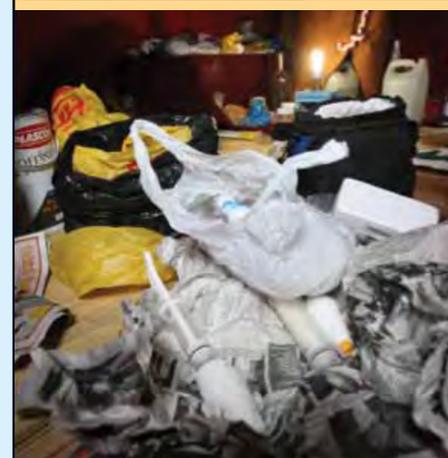
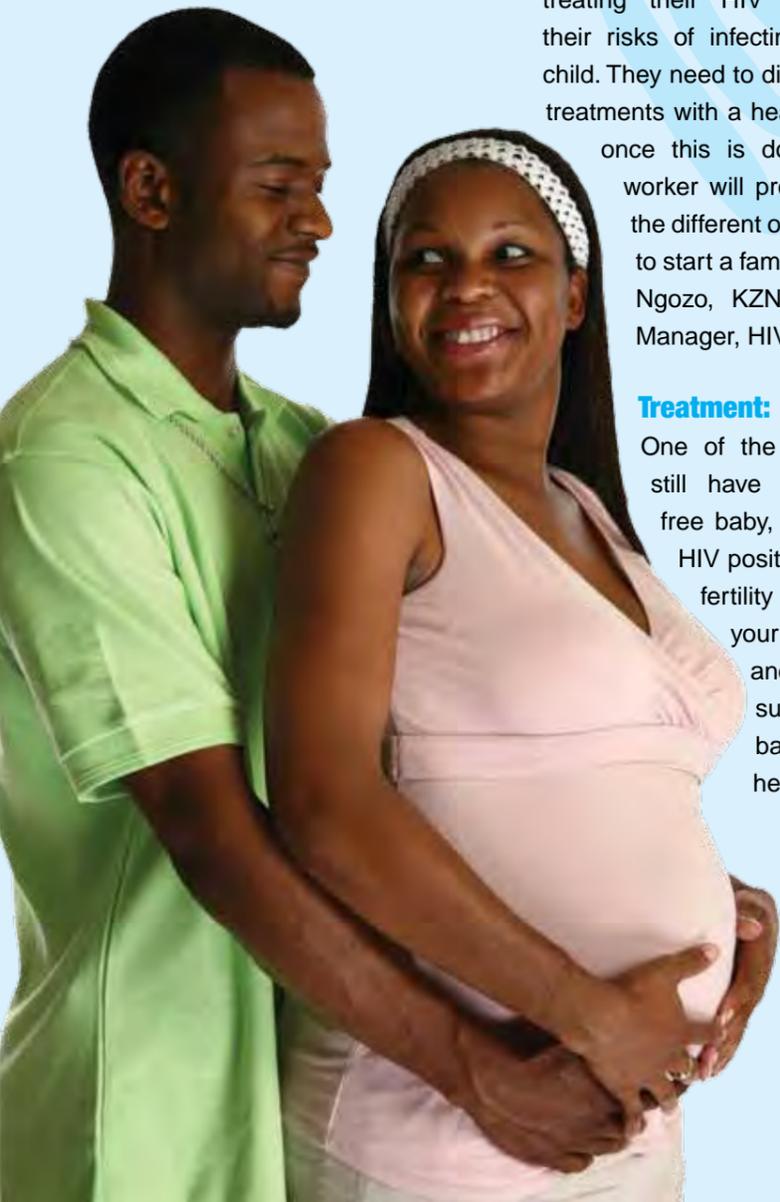
How is this done?

In cases where both partners or only the woman is HIV-positive, doctors make use of artificial insemination, which means taking the man’s sperm and injecting it into the woman. Once pregnant, the HIV-positive mother-to-be’s progress is monitored by an HIV specialist. The pregnant mother must continue taking antiretroviral medication, and will deliver the child by C-Section, instead of normal delivery, to reduce the risk of passing on the HIV virus to the baby.

If only the man is HIV-positive, the sperm undergoes a procedure where it is “washed” to separate the fluid which has most of the cells carrying the virus. Once cleaned the woman can then be injected with the sperm.

Antenatal care:

All pregnant women attending antenatal care clinics are offered voluntary counseling and testing (VCT) on their first visit. Women who test HIV-negative are offered a follow-up test at 34 weeks into their pregnancy. Those who test HIV-positive are offered a viral load test at the time of their HIV-positive diagnosis to check the level of infection and an opportunity to discuss their choices.



BACK STREET ABORTION -

Don't put your life at Risk

Zanele looked nervous as the young man led her up a dark stairway in a building in Durban. She did not want to end her pregnancy, but felt she had no choice. She was 17, pregnant by her boyfriend who promised her a better life if she had unprotected sex with him. But, after falling pregnant, he left her. Scared of what would happen if her family found out, she decided to come to Durban after seeing an advert in the paper, offering cheap and quick abortions.

“The room in this building was filthy, it had needles, cotton wool and a dirty cloth on the floor which I had to sleep on. It looked like someone had been killed there. There was blood all over the place. I was very scared. I had to give them my cell phone and ID as security for payment, so I couldn’t run away, even if I wanted to,” explains Zanele.

After being given a mixture to drink which they called ‘tea’, a man calling himself “Dr Momo” started the abortion.

“It was like having my heart cut out, it was so painful. He shoved an instrument inside me to pull out my baby’s body in pieces – a tiny hand, a foot..it was terrible, I cried but there was nothing I could do to stop it, it was too late. After the abortion he handed me a plastic bin bag to get rid of the baby’s body.”

Zanele was left bleeding, with a serious infection which she is still trying to treat, and scars for life – both emotional and physical. She was told to return with the money if she wanted her ID and cell phone back and had to leave. That was that. No counseling and no follow up examination.

Don’t make the same mistake. Speak to a professional if you really have made up your mind about having an abortion. Visit your nearest clinic or hospital - they provide counseling, appropriate medical advice and referral where necessary.

BACK STREET ABORTION – WHY TURN AWAY

- Back street abortions are dangerous because the person performing the procedure may not be trained.
- Unsterilised instruments could be used – putting you at risk of serious infection.
- Parts of your body could tear on the inside if it’s not done properly.
- By law the person performing the abortion MUST be a doctor, nurse or midwife.
- Abortions can only be performed at a facility authorised by the Minister of Health.
- By law, you must be provided with counseling, before and after the procedure.

STOP CHILD ABUSE!

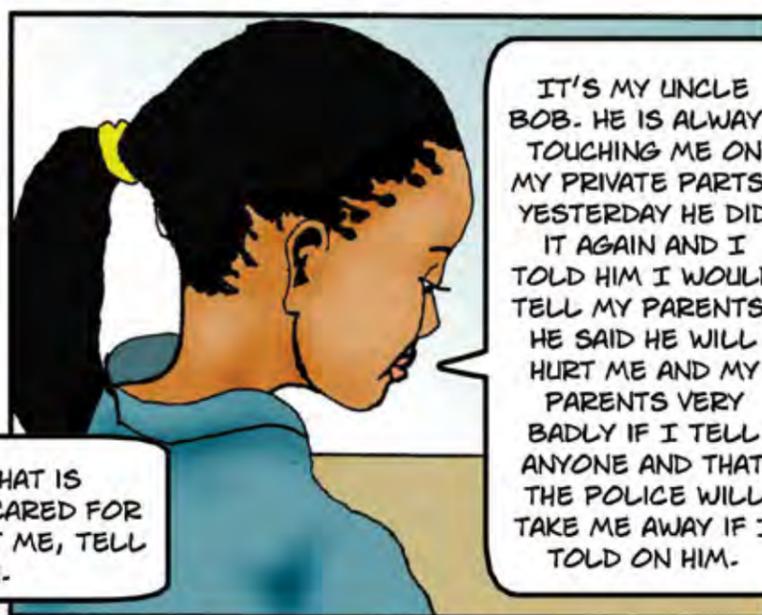


HEY THANDI, WHY DO YOU LOOK SO SAD? YOU'RE SO QUIET. IS THERE SOMETHING WRONG?

I CAN'T TALK ABOUT IT...I MEAN, I'M TOO SCARED TO TALK ABOUT IT.



SCARED? YOU MUST TELL ME WHAT IS HAPPENING. YOU SHOULD NOT BE SCARED FOR ANYTHING. YOU KNOW YOU CAN TRUST ME, TELL ME WHAT'S WORRYING YOU.



IT'S MY UNCLE BOB. HE IS ALWAYS TOUCHING ME ON MY PRIVATE PARTS. YESTERDAY HE DID IT AGAIN AND I TOLD HIM I WOULD TELL MY PARENTS. HE SAID HE WILL HURT ME AND MY PARENTS VERY BADLY IF I TELL ANYONE AND THAT THE POLICE WILL TAKE ME AWAY IF I TOLD ON HIM.



I DON'T LIKE HIM TOUCHING ME, BUT I'M SCARED TO SAY ANYTHING.



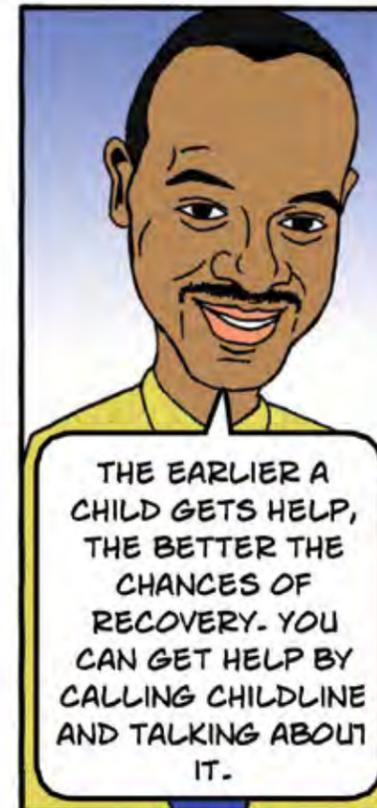
IT IS GOOD YOU TOLD ME. YOUR UNCLE BOB MUST NOT GET AWAY WITH THIS. IT IS IMPORTANT TO SPEAK TO SOMEONE YOU TRUST LIKE YOUR PARENTS. IF YOU DO NOT, THE ABUSE WILL BECOME WORSE. YOU HAVE TO SPEAK OUT, HE IS JUST TRYING TO THREATEN YOU, SO YOU DON'T SPEAK OUT.

CHILDREN MUST SPEAK OUT SO THAT CHILD ABUSE CAN STOP. IF WE CHANGE THE WAY WE THINK ABOUT HURTING CHILDREN, WE WILL BREAK THE CYCLE OF ABUSE. THERE ARE FOUR TYPES OF CHILD ABUSE AS YOU CAN SEE BELOW...



THERE ARE DIFFERENT FORMS OF CHILD ABUSE:

- PHYSICAL** - Shaking, hitting, beating, burning or biting.
- SEXUAL** - Forced sexual activity, exposure to sexual stimulation.
- PSYCHOLOGICAL** - Blaming or putting a child down, shouting or shaming.
- NEGLECT** - Failure to provide for a child's physical and emotional needs.



THE EARLIER A CHILD GETS HELP, THE BETTER THE CHANCES OF RECOVERY. YOU CAN GET HELP BY CALLING CHIDLINER AND TALKING ABOUT IT.



YOU LOOK MUCH HAPPIER TODAY.



I SPOKE TO MY MOTHER. EISH SHE WAS SO ANGRY, SHE IS REPORTING HIM TO THE POLICE AND HE IS BEGGING MY MOTHER FOR FORGIVENESS BUT WE WANT HIM REPORTED SO OTHERS CAN LEARN IT'S GOOD TO SPEAK OUT. THANK YOU SINDI, YOU ARE RIGHT, CHILDREN MUST SPEAK OUT.

CONTACT CHIDLINER FREE ON 0800 055 555 IF YOU NEED TO SPEAK TO SOMEONE ABOUT CHILD ABUSE, OR CONTACT YOUR NEAREST HEALTH WORKER OR CLINIC.

MALARIA

UNDERSTANDING THE BASICS

Is Malaria Serious?

- Malaria is a killer disease, if not treated on time.
- It is passed on to humans by the bite of an infected female mosquito.

Who Is Affected?

- All age groups
- All genders
- All races

The following people are more vulnerable to malaria and its complications:

- Children under 5 years
- Pregnant women
- People with HIV
- Chronically ill patients
- Adults over 65 years of age

Remember!

Anyone can get malaria from the bite of an infected mosquito which can be deadly if not treated early.

Signs and symptoms of mild malaria:

- Fever (common but maybe absent)
- Persistent headache
- Chills
- Sweating
- Nausea / vomiting
- Muscular pains
- Tiredness / weakness

Signs and symptoms of severe malaria:

- High fever
- Diarrhea
- Jaundice
- Anemia
- Sleepiness
- Shock
- Convulsions
- Respiratory distress

- Unconsciousness / coma
- Cerebral malaria

What to do

- A person with any Malaria symptoms should consult the nearest clinic or health professional immediately within 24 hours.
- Fever is a very common symptom and can be caused by many illnesses besides malaria, such as ear infection, intestinal infection, measles and pneumonia. A diagnosis is therefore needed to confirm malaria.
- Seek immediate medical attention if you have any "flu-like" symptoms for up to six months after leaving a Malaria area.

How To Prevent Mosquito Bites

- Sleep under a bed net.
- Make sure there is no stagnant water near your house for mosquitoes to breed in. They also love empty cans.
- Avoid being outside between sunset and sunrise.

- If you have to be outside between these times wear long-sleeved clothing.
- Use repellants.
- Burn mosquito coils.
- Close doors and windows before sunset.

When Visiting A Malaria Area:

- Take anti-malaria tablets a week or two before entering a malaria prone area and continue as advised by a health professional.
- Pregnant women should avoid malaria areas.

It is important that treatment for malaria is completed so that all parasites in the blood stream are killed and that tablets are kept for future use or passed on to somebody else in the family!



**Keep mosquitoes out
- use a bed net**

National Polio Eradication Week: 4 – 10 April 2011

The national polio campaign is being led by the Department of Health to raise awareness on immunisation and to prevent polio.

Dangerous childhood diseases such as polio and measles can be prevented through immunisation - especially in small children. The Department of Health recommends that a baby gets vaccinated at birth against polio with follow up treatment at the ages of 6 weeks, 10 weeks, 14 weeks and 18 months. This is necessary because polio mainly affects children under the age of 5 years, and while there is no cure for polio, it can be prevented.

Cause of polio:

Polio is an infectious disease caused by a virus. It invades the nervous system and can cause total paralysis in a matter of hours. People usually get the virus from polluted food or water. Symptoms include fever, tiredness, headaches, vomiting, stiffness in the neck and pain in the limbs. Most people who are infected with polio never have any symptoms. In South Africa the last case of polio was reported in 1989. As long as there are still cases of wild polio viruses anywhere in the world, polio can still be spread, which is why it is important to prevent it through regular immunisation of babies and children.



eThekweni health's Dr Gumede on the anti polio campaign.



Polio can leave children crippled if not treated. Prevention is key, immunise your child.

**PREVENTION IS CURE, MAKE SURE YOU HAVE YOUR CHILD
IMMUNISED AT REGULAR INTERVALS.**



ALL ABOUT CATARACTS

At first, 52 year old Ntokosa Dube thought it was just something in her eye and that it would go away on its own. Her eyes felt a bit sandy, and her vision was blurred.

“My eyes were cloudy and I couldn’t see properly. I ignored it, and as time went by, it got worse, and I thought it was just old age and that I couldn’t do anything about it. I was sad and very scared because I could no longer work in the house properly. Cooking became a problem, and I couldn’t even see my granddaughter’s face anymore. Eventually I went to the clinic and they sent me to hospital for an operation which took less than half a day. It was like a miracle! I tell you, I felt like I was reborn. I could see clearly again after many years of suffering in silence! I thank God for my sight now and wish I had done something about it earlier.”

What is it?

Ntokosa suffered from a common problem facing many older people – cataracts in the eyes, which is a milky like film covering the eye, which does not go away by wiping. The result is that people with cataracts are unable to see clearly.

Help for cataracts:

There is a very successful operation that is quick and easy, with excellent results. Millions of people have the procedure done worldwide and in most cases, it is freely available at a state hospital.

How can I find out more?

Go to your local clinic where a referral to a hospital that provides this service can be arranged for you.

How long will I be in hospital?

Believe it or not, it is usually done as an outpatient service. After a short recovery time you’ll be allowed to go home and should feel little or no discomfort.

The Procedure:

It’s a simple operation with local anaesthetic. First drops are put in the eye to numb it before a tiny cut is made in the eye. The surgeon then inserts an instrument, about the size of the tip of a pen. After this, the cloudy lens is then removed, and replaced with an artificial lens which works just like your old, healthy lens, used to.

After surgery:

You’ll be given a short time to rest and on the very same day, you can go home. Within the next 24 hours, your doctor will probably want to see you for a quick check up. Drops will be prescribed to guard against infection and help your eyes heal. For a few days, you may need to wear an eye shield, especially at night, to prevent you from rubbing your eye.

YOUR EYES ARE YOUR VISION TO THE WORLD, DON’T NEGLECT THEM.

World Autism Awareness Day – April 2



Thembi Mkhize is the mother, grandmother and caregiver of seven children living in the Valley of a Thousand Hills area, near Bothas Hill.

Recently she took the brave step of attending a health workshop, for the first time, where she described the mental problems some of her children faced.

Barely able to hold back her tears, she said that for many years, she had struggled to cope with difficult behaviour, frequent tantrums, strange repetitive behaviour and the children’s inability to communicate. “I knew that there was something wrong,” she said. “But nobody could help me. The clinic told me not to worry, that they would grow out of it. I knew they were wrong. I felt so alone and isolated. I was very scared to come to this workshop, but I knew it was important for me and for the children.”

One of Mkhize’s children, a six-year-old boy is part of an important study of the health, developmental and mental needs of children and their caregivers in communities affected by HIV/AIDS.

Since the workshop Thembi says she has learnt to understand and care for the children. She now knows that they have a syndrome called Autism, which affects their behaviour. She is also receiving professional advice on how best to deal with her problems.

“I don’t feel I’m carrying this big burden alone any more,” she says. “I understand now what is wrong with them. Sometimes it is difficult to be patient when there is so much going on, but I know that I have got to encourage them to communicate. They must also feel that I love them.”

What is autism?

Autism is a general term, which deals with certain types of brain disorders. These children often live in a world of their own.

What is the cause?

The cause of Autism is not fully known. There are some symptoms like a baby not smiling by six months, not having many facial expressions, no pointing or reaching for objects like toys or no words being spoken by 16 months.

What should I do if I think my child is autistic?

Ask your local clinic for advice. There are a number of tests that can be done, but they are done over time. There is no quick fix solution and you need to be patient to deal with an Autistic child.

**REMEMBER AUTISM IS NOT YOUR FAULT AS A PARENT.
AN AUTISTIC CHILD IS STILL A CHILD WHO NEEDS
YOUR PATIENCE AND UNDERSTANDING.**

Immunisations:

All you need to know to protect your child from childhood diseases



Every mom wants their child to be healthy, full of energy and free from life-threatening diseases. But the only way to make sure that your baby is going to start out on the road to good health, is to ensure that he or she gets all their childhood vaccinations needed.

Why vaccinate?

Vaccines are important tools that prevent diseases and deaths in babies and children. Remember that your child will need various vaccines at different ages, some of which will need to be topped up – otherwise known as 'boosters'.

It is important to note which ones are required, or contact your nearest clinic for guidance and advice on the different vaccines your child will need. It's also really important that you take your Road to Health Chart along, which the Department of Health will issue you with and which is also freely available at clinics which will help you keep track of your child's vaccinations. Make sure you stick to the dates recommended! The following will also be a useful guide for you to cut out and keep as a reference tool:

Immunisation Guide

AGE	VACCINE NEEDED	PROTECTS AGAINST
Birth	BCG* (Injection right arm) Polio (Drops by mouth)	Tuberculosis (TB) which can lead to death if left untreated Polio is a very serious disease that can leave young children crippled
6 weeks	Polio (Drops by mouth) Rotavirus (Liquid by mouth) Hib(1) (Injection combination) IPV(Injection combination) DTaP 1 (Injection combination) PCV 1(Injection right thigh) Hepatitis 1 (Injection right thigh)	Polio Watery diarrhoea and vomiting that can be dangerous A blood infection that can damage the body Inactivated Polio vaccine Diphtheria, Tetanus, Whooping cough – all serious diseases for young children that can be prevented Fights off harmful bacteria that can cause a number of serious illnesses Acute infection of the liver
10 weeks	Polio DTaP/IPV-Hib (2) Hib Hepatitis	Boosters
14 weeks	Rotavirus Polio DTaP/IPV-Hib (3) Hib Hepatitis PCV (2)	Boosters
9 months	Measles (1) PCV (3)	One of the worst of all childhood diseases and can lead to serious complications Booster
18 months	Polio DTaP/IPV-Hib (4) Measles (2)	Boosters
6 years (both boys and girls)	Td Vaccine	Tetanus and lower strength of Diphtheria vaccine
12 years (both boys and girls)	Td Vaccine	Booster

* BCG must NOT be given to a baby that has HIV/AIDS

* Rotavirus Vaccine should NOT be administered after 24 weeks

APRIL: Awareness Days



April 2: World Autism Awareness Day

This is an important day for South Africa because there are many children in the country who are not being diagnosed or treated for the condition. With proper care, children with Autism can continue to lead rewarding lives, and even fully recover. The Awareness Day aims to get the message across that Autism is not a no-hope problem. Autism is not a curse – it is a difference. Your loved one CAN still be a happy, calm and productive person.

April 4-10: National Polio Eradication Awareness Week

These days polio is not heard of very much, but anyone who has suffered from it, knows what a terrible disease it is, leaving many unable to walk and can even lead to death. The National Polio Eradication Week in South Africa is a campaign led by the Department of Health to raise awareness on immunisation and the prevention of polio.

It's up to parents and care givers to make sure that all children under the age of five are immunised against polio and most common childhood diseases. With effort many childhood diseases like polio can be prevented.

April 7: World Health Day

Every one of us is responsible for our own health. While hospitals, clinics, doctors, and nurses are there for treatment and advice, it is ultimately up to us to take control of our bodies. If we don't take our pills and medication correctly, and

don't care much about what we eat, our body will not want to take care of us. Many medications are also becoming less effective as our immune system becomes weaker, which is why it is important to eat correctly and stick to treatments when fighting off diseases.

April 17: World Haemophilia Day

Haemophilia is lifelong bleeding disorder affecting men. It causes dangerous bleeding inside the body, the joints and the muscles. The condition needs costly medical and social attention and is not curable. The good news is that effective treatment is available due to scientists finding out more. South Africa has made haemophilia an awareness priority and the Health Department encourages blood donation to help deal with the shortage of blood.

April 25: Africa Malaria Day

It's difficult to believe that a small insect like a mosquito can cause such a huge amount of disease. But thanks to efforts in South Africa, the Department of Health in all provinces has managed to bring it under control. But that doesn't mean that vigilance must stop, in fact it must be stepped up to make sure the mosquito does not cause havoc again. 25 April is a day to commemorate global efforts to control malaria. The aim is to work towards zero malaria deaths by 2015.

World Malaria Day is a chance for all of us to make a difference. Help mark this year by highlighting your

progress and count the strides we collectively make towards eventually eliminating malaria. Make the lives of every man, woman and child count.

EASTER HOLIDAYS – GO EASY ON THE DRINKING – YOUR LIFE DEPENDS ON IT!

Easter is a time of celebration. Our province comes alive with a party atmosphere, the beaches are full, and everyone is in a happy mood.. and so the beer flows. Unfortunately it's also a time when road accidents increase, family fights as a result of too much of drinking cause hurt, break-ups and serious injuries. Death is often the result of our over indulgence at this time of the year.

Last year Easter road accidents claimed 105 lives, including 28 drivers, 48 passengers and 29 pedestrians. Many of the innocent victims included young children, moms and breadwinners. Families were left without support, when this could easily have been avoided. Many of these accidents are caused by people driving too fast, not obeying the rules of the road, taking too many chances – and sometimes being drunk behind the wheel or walking while under the influence along the highway.

Maybe this is the year to change things for the better. Remember, if you are caught in a roadblock you can't refuse to take a breathalyser test. **THAT'S THE LAW.** On a public road nobody can drive a vehicle or get into a driver's seat of a motor vehicle, of which the engine is running, while under the influence of liquor or a drug.

DON'T DRINK AND DRIVE. THINK AND ACT RESPONSIBLY. REMEMBER YOUR DECISION COULD SAVE OR TAKE A LIFE!

COMMUNITY in action



← eThekweni health's Dr Gumede and HOD, KZN Health Dr Sibongile Zungu on the anti polio campaign.

✓ Take my hand – MEC Dhlomo reaching out to mother and child



Here u go - service with a smile from the MEC. ➤



▲ MEC lending a hand as a doctor.



✓ I like to move it, move it! – MEC Dhlomo part of the team at Sboniso Clinic



▲ United we stand.

Through the keyhole



Dr Victor Fredlund - not your average Doctor on call

Mseleni District Hospital, on a sandy windswept hill, between Sodwana Bay and Kosi Bay in the far-flung north eastern part of Zululand, might not be the number one choice for many newly qualified doctors...

However, medical manager, Dr Victor Fredlund will tell you that after 30 years, he has never once regretted the decision to leave England with his family and settle in Africa “enjoying a simple and basic lifestyle” far away from the comforts of a European life.

“As a young Christian missionary with medical skills, I always knew that my calling would be to work with poorer communities to try and improve the quality of care they received. When the chance came for me to work in the Mseleni Hospital, I said, yes, right away.”

It's been a tough and challenging journey, he'll tell you that – but he refuses to give up. Mseleni is the only place in the world where people suffer from a mystery joint disease

known as MJD, which often leaves those affected by it crippled and in wheel chairs. The area also has a high number people living with HIV/AIDS and tuberculosis.

It was here that Fredlund decided to start a treatment programme for HIV, at the hospital and clinics in the area, servicing a population of around 87 000. “Today at our hospital we can operate on patients with advanced MJD improving their quality of life and allowing people to walk again. We also have more than 7000 patients on ARVs and can now treat as many as 240 000 patients annually in our hospital and eight clinics. The government grants have also made a noticeable difference.”

However, Fredlund won't tell you that everything is right. “There is still a huge amount to do in the area of primary health, AIDS awareness, behaviour change and reduction of poverty levels. Of course you want everything of the best for your patients. And yes, it is sometimes very frustrating when there are chronic staff shortages.

Sometimes I am critical, but you have to be if you want things to improve.” What sets him apart though, is rather than just complain, he has tried to come up with solutions – a characteristic KZN's Department of Health respects and appreciates. These include the extension of the hospital's water pipes – a project that Fredlund undertook after he became frustrated with the number of diseases he had to treat which were caused by dirty water and a lack of proper sanitation. The first extended pipe went to the local school and then further afield.

He is proud of the doctors born and raised in the area, who have come back to share their skills in Mseleni.

“Isn't that fantastic?” he says with a broad smile. “It's good things like this, that tell me I have done the right thing to stay. When I hear that 3000 lives have been saved and a mother comes back from near death, and is able to smile and hug her child, that tells me I'm in the right place.”