

Newly-qualified Cardiothoracic Surgeon Dr Khaye Ngcobo wants South Africans to exercise and follow a Healthier diet to live longer

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Newly-qualified cardiothoracic surgeon Dr Khayelihle Ngcobo, from Inkosi Albert Luthuli Central Hospital, wants to see South Africans leading more active and healthier lifestyles. He says this could help reduce the prevalence of diseases such as diabetes, hypertension, high blood pressure and heart disease. In this interview, Dr Ngcobo, who also plays a musical instrument in church, reveals what it has taken for the child of a domestic worker to scale the heights in the medical profession.

Congratulations on qualifying as a cardiothoracic surgeon. How have you managed to come this far?

It's been obviously life changing. I was lucky to arrive while our department had many experienced surgeons and hence learnt from all of them. The ethos of cardiothoracic surgery was embroidered in me during all the years spent as a registrar in our department. The journey for a Black man is never easy for some reason. Nonetheless, the victory is mine now and I have run a great race. I came to the department quite matured. That is, not straight from community services, but years after and for me that is what contributed to my victory. Registrar life is not easy, no matter what specialty one is doing. So, your mindset plays a big role in whether you will survive or succumb to different pressures during your training. My mindset was valuable in my success no matter who I interacted with.

Please tell me more about yourself.

I turned 42 on Friday, which was 'Black Friday'. The young ones call me 'Malume' (uncle) in our department. I was born in Durban and grew up in Umzumbe, Fairview mission with my father's family as Khayelihle Mzelemu. I was a farm boy for 12 years, and I thoroughly enjoyed it. That was a great family that shaped my future. I'm still their son to this day. Due to cultural customs that I would not like to expand upon in this interview, I had to return to my mother's family the Ngcobos, as my parents were never married. I kept the Mzelemu surname for a long time. I completed matric and undergraduate training as a doctor as Khayelihle Mzelemu. I worked as Dr Mzelemu until 2005 but that year I changed back to my mother's surname and became Dr Ngcobo.

Tell me about your family and the kind of impact that your parents have had on your life?

My late father Bhekuyise Mzelemu inspired me to be the best in what I do, especially my school grades. My late mother, Nontuthuzelo Muriel Ngcobo, was a rock of my life. I would not be where I am without her. She was amazing and many praises should be directed at her. My mother did not have much but did everything she could for me and my siblings. I'm a seventh child of my mother's ten children. Needless to say, we grew up in poverty and under difficult circumstances. I'm a Christian because of my mother and I thank her very much for that because that gave me purpose and direction in life. I'm married to the beautiful Nompumelelo Ngcobo for 7 years now, and have a six year-old son Melokuhle. They had a rough time during my training but stood by me and I can't thank them enough.



Dr Khayelihle Ngcobo with MEC Dhlomo, Acting HOD Dr Musa Gumede, Dr Lindiwe Sidali, and Dr Rajhmun Madansein, HOD and Chief Specialist, Cardiothoracic Surgery at IALCH



Dr Khayelihle Ngcobo with MEC Dhlomo, Dr Lindiwe Sidali, and Dr Rajhmun Madansein
Tell me about your school life and your undergraduate studies?

I matriculated at Pinetown Boys High school in 1993. My mother was a domestic worker and her boss, the late Brian Goss, had a son Rowan Goss who was the same age as me, and we always used to play together. Brian Goss fought for me to be in a white school in 1991 when black and white children were not allowed to be in the same school. So I started my standard eight in a model C school and matriculated in 1993. I did my undergraduate training at the University of Natal from 1995 to 2000.

What sparked your interest in medicine in general, cardiothoracic surgery in particular?

For as long as I can remember, I wanted to be a doctor. Even from the age of five, I remember always telling people I would become a doctor whenever they asked me. I rotated through almost all the medical disciplines as a young doctor and only later on did I realise Cardiothoracic surgery was what I wanted to specialise in. I wanted cardiology (I was inspired by Dr Brian Vezi, whom I met as a medical student at Wentworth hospital), but I was a surgeon at heart so I combined my love for surgery with my dream of cardiology. Years went by while I was not sure I wanted to be another Black man tortured in the registrar program, but my friend Basil Enicker, a neurosurgeon,

was always in my ear. At the age of 37, I then began my cardiothoracic surgery training. I believe it was by chance, given what was going on in my life then. And the rest is history.

What would you say has helped you come this far as a person?

It's the determination to succeed and not allow people to tell you what you can do or can't do. I knew myself well enough when I came to cardiothoracic surgery and I was willing to learn. I was prepared for hard work and putting in long hours, so it never affected me. My relationship with my son suffered slightly during my training as he was almost one year before I started the registrar programme, so training took over my life.

What kind of patients would need your services as a cardiothoracic surgeon?

Those who have acquired heart valvular conditions, coronary artery disease, congenital heart disease, and aortic aneurysm, as well as those with lung cancer and inflammatory lung diseases such as TB in thoracic surgery to mention a few.

What do you wish South Africans could change about themselves to avoid heart-related ailments, and make your job easier?

Diet and regular exercise to control our weight and Body Mass Index can help a lot. It can help protect us from diabetes and hypertension. I wish people could also stop smoking as it is bad for the heart and lungs. What you do as a youngster catches up with you in your middle and old age as far as smoking is concerned. TB and HIV prevention and treatment have been regarded as being in the forefront of diseases affecting South Africans, but there is always more that can be done. Lung cancer screening can be improved upon. Congenital heart conditions can be diagnosed very early in first world countries and so we should strive for this

Why do you think it has taken this long for SA to have your colleague, Dr Sidali, as the first African female cardiothoracic surgeon in the country?

Cardiothoracic surgery is a male-dominated world. Not only that, but very few Black South Africans have passed the exams since Madiba's release from prison. Lastly, not many Black African females enter the program. Cardiothoracic surgery demands long hours in theatre and life is about cardiothoracic surgery only for four to 5 years. There is also no exposure to cardiothoracic surgery at undergraduate level. So, Dr Sidali sacrificed a lot to be where she is.

Please describe yourself in five words?

Honest, Hardworking, Empathetic, Punctual and Disciplined.

What would people be surprised to find out about you?

I'm very religious and cultural. I play the Tuba in a church band.

Where to from now for you?

Serving my community, teaching more cardiothoracic surgeons, ensuring a conducive environment for them and being the best at my field. Staying humble is the key for me because arrogance is a big problem in this field.

Any words of advice to those who wish to follow in your footsteps?

Nothing is impossible. If others can do it, why not you? However, I would advise that if you want to become a cardiothoracic surgeon, it is important to get a feel for yourself before deciding to pursue this discipline.