Get ready to be counted

As a result of rising food prices, an economic crisis, and South Africa failing to reach the finals in the Rugby World Cup, 2011 was a tumultuous year.

In South Africa, last year was marked by the fact that a census was undertaken again. As we all know, in a similar vein to the drug trials that we read about, this cannot be successful if everyone is not counted.

I quote from the census speech: “Perhaps the greatest risk is that people do not voluntarily participate in being counted. They shut the doors, let out the dogs, and turn out the lights when the enumerators approach. Actually, the only reason why people might respond in this manner is that we haven’t taken the time to allay their fears, and to explain to them that participation in the census, apart from being a statutory obligation, is directly and unashamedly in their own best interests”.

As the Diabetes Education Society of South Africa (DESSA), we have a role to play as educators, by trying to allay our patients’ fears about their diabetes. We coach them to understand that it is in their own best interests to learn more about their disease.

2011 was also the year of the National Health Insurance (NHI) green paper. Education should be statutory in the NHI that us being planned by the government. The NHI will offer all South Africans and legal residents access to a defined package of comprehensive health services. The state is committed to offering as wide a range of services as possible. Although the NHI service package will not include everything, it will offer care at all levels, from primary health care, to specialised secondary care, as well as highly specialised tertiary, and quaternary, levels of care.

The provided benefits will cover preventive, promotive, curative, and rehabilitative health services. Emphasis will be placed on prevention of disease and promotion of health. The present healthcare system places undue focus on the curing of disease, and adherence to performance of procedures once people have developed complications.

Another quote comes to mind:
“Mainstream medicine would be way different if it focused on prevention, half as much as it focuses on intervention.”
- Anonymous.

In the NHI green paper, one exclusion is very prominent. It reads as follows: “....diagnostic procedures outside the approved guidelines and protocols as advised by expert groups”. This indicates that the NHG is going to work according to guidelines. This makes the work to revise the diabetes guidelines, carried out in 2011, by the Society for Endocrinology, Metabolism and Diabetes of South Africa (SEMDSA); DESSA; the Department of Health; and the pharmaceutical companies, all the more important.

We took the opportunity to amend what we thought was important in the old guidelines, and to create new improved recommendations by using evidence-based data. No part of the guidelines was neglected. Even exercise was comprehensively covered.

A quote that is often used by Andrew Heilbrunn, biokineticist, comes to mind:
“Those who think that they have no time for exercise, will sooner or later have to find time for illness”. - Edward Stanley.

DESSA, under the leadership of Dr Larry Distiller (now proudly Professor Larry Distiller), was responsible for the education revision, as well as for inserting the nutrition section. We included more information on preconception, as well as education, for the family and caregivers who live with people with diabetes. The nutrition section was designed with the help of a knowledgeable dietician, who passed her Glamorgan postgraduate diploma with a distinction.

Generally, everyone who was involved with the new guidelines had the health and well-being of the patient in mind, while the funding was the responsibility of the medical funders and government. I would like to quote Mark Noble, director of the Stem Cell and Regenerative Medicine Institute at the University of Rochester (New York) School of Medicine. He said: “I don’t care if what we do makes a profit. I care whether we get somebody out of a wheelchair”. This was the attitude that we had regarding the guidelines: “It doesn’t matter what it costs, it must be the best for the patient!”

On the subject of education, nine of the DESSA members who sat for the Glamorgan postgraduate diploma examinations, passed with distinctions. The Cardiff results are not yet available. The South African students took top honours for the Glamorgan course results. Currently, two of these students are working as tutors for the next course. So well done!

We hosted a very successful DESSA meeting in Bloemfontein last year. This year, the Capetonians will take on the challenge of improving on the set standard. We know that they will give of their best to do so!

The good news is that the second part of the DESSA course is in the final stages of receiving SEMDSA approval. DESSA is considering appointing a permanent person to facilitate the training for the DESSA course nationally. This will ensure that our course is used to full capacity, and that the training can be disseminated as far as possible.

Our motto for 2012 is: “We will stand up and be counted!”

Jeannie Berg
Chairperson, DESSA