“Most journals avoid publishing reviews and case studies unless these offer unique and/or paradigm shifting options in enhancing clinical practice” – this was part of my editorial comment in March 2020.

As it happens, I should be more accurate and acknowledge that often original research is suboptimal (for many reasons) and many submissions are consequently rejected (sadly for the researchers). As such a default option is applied (perhaps regrettably so) and the “best” case reports (that are somewhat more immune to the challenge in study design, methodology, sample size, statistical analyses and other basic errors in research undertaking), are successful. This is perhaps a realisation that academic departments should take heed of the diagnosis and offer treatment by re-igniting original research of a higher quality. Perhaps this is also a call to the SEMDSA Executive to lead this process and perhaps initiate and coordinate more collaboration and research in the country/subcontinent.

The three case reports are nonetheless most instructive – devastating neurological fallout occurs with a delay in the diagnosis of insulinoma (Dire Z, et al.), lysosomal storage diseases are rare, allude to the better understanding of lipid pathways and are manageable in the long term (Angamia Z, et al.) and rare neuro-endocrine disease may cause even more rare “orbitopathy” (Hoenck H, et al.).

“Thus during the ensuing 12 months some 5.1 million additional human deaths will be attributed to diabetes, roughly one death every seven seconds” – this was also part of my editorial comment (a perspective to the current focus on COVID-related mortality) in March 2020 and I questioned how we, in South Africa, inadvertently contribute to this high number. An instructive, longitudinal study (Hoosen M, et al.) provides part of this answer – their audit tracts improved glycemia control in 58 patients with T1 diabetes during a 10-year period of follow-up (a well-deserved pat on the back), but the ideal target HbA1c of 7% or less was achieved and sustained in less than 10% of patients with a resultant increase in the incidence of complications (so this pat is withdrawn).

Happy reading, do more studies and fewer case reports and stay safe.

Jeff Wing