

News bites

South Africa

Gauteng hospitals face supply shortage

Budgeting and administrative incompetence at several provincial tertiary hospitals got so bad this March that unpaid equipment suppliers and frustrated clinicians threatened to withdraw services unless urgent solutions were found.

One of the worst affected was the sprawling 2 800-bed Chris Hani Baragwanath in Soweto where non-payment shortages range from clean bed linen and food to life-saving surgical equipment. Surgeons reached the end of their tether in March when they were unable to order life-saving CT scans and were also forced to risk potentially life-threatening surgical procedures owing to the lack of repair, replacement or supplementation of surgical microscopes, aspirators and drills.

The Gauteng Shared Services Centre (GSSC) failed to respond to allegations of a R10 million payment backlog. Dozens of suppliers refused to deliver food or service equipment to Gauteng hospitals because they claimed they have not been paid for months. The Hospital has apparently not had fish or chicken to serve to its patients for more than 3 months.

GSSC CEO Mike Maile announced his resignation in early March when he admitted to daily newspapers that skills in audit, finance and IT 'remain a challenge'.

A supplier more forthrightly accused provincial officials of being 'incapable of basic reconciliations' between orders, deliveries and invoices.

The Democratic Alliance's Jack Bloom said this was unacceptable and the government should be held accountable. 'The GSSC is completely inefficient and companies are loosing out. What's happened is they've run out of money towards to end of the financial year. So they won't get paid until next month if at all,' claimed Bloom.

Free State- we can't pay for ARV needs

A broken central government promise to augment its HIV/AIDS budget forced the Free State's fatal 4-month moratorium on new ARV patient enrolment, rendering its world-class ART delivery platform helpless to save more lives.

That is according to both the province's head of HIV/AIDS, STIs and Communicable Diseases and an independent doctor in charge of the ground-breaking newly adopted nurse-led ART delivery platform.

With R52 million needed to maintain the 16 200 surviving and adherent patients enrolled since 2004, plus the 1 200 AIDS patients the province is capable of adding each month, only R33 million was budgeted for the financial year ended this March.

Said Portia Shai-Mhathu, the province's head of HIV/AIDS, STIs and Communicable Diseases, 'we were hoping they'd prop us up in the September adjustment budget but that didn't happen'.

Their new overall health budget promises nothing different, with National Treasury's allocation towards the province's HIV and AIDS expenditure for the 2009 - 2010 financial year falling R83 million short.

The bulk of the shortfall will hit the province's ART programme.

The province's head of health is already talking about again restricting access to ARVs. 'Maybe this time, in order to avoid the challenges we've had, we must just work out what the quotas are in terms of numbers and stick to those numbers. If you come and we've said only 20 and you are number 21 in April, we tell you to wait for next month, said Professor Pax Ramela, head of the Free State Health Department. He added that the lack of quotas on treatment access in the financial year ending this March was the reason there was over-subscription of the ARV programme, which led to last November's moratorium to not allow new patients to access treatment. We should actually have staggered the intake of patients from the beginning of the year,' he said.

Pretoria pupils treated for hysteria

Up to 25 pupils at a high school in Pretoria were treated for hysteria on 26 March, paramedics said. 'It appeared that several of the patients were hyperventilating and some even appeared to be having seizures,' said Netcare 911 spokesperson Nick Dollman. The 20 - 25 pupils were aged between 14 and 15 and most were girls. Dollman said that 10 of the pupils were more serious than the others and were separated from the rest. A battery of

tests found them to be 'medically stable.' 'The police were also called to the scene and approximately 10 learners underwent drug testing. All the results were negative,' said Dollman. Neither paramedics nor teachers could determine the cause of the hysteria. A trauma counsellor visited the pupils several times.

This was the third instance of hysteria among pupils in March. On 11 March, 90 pupils were hospitalised in Ladysmith, KwaZulu-Natal. Provincial health department spokesperson Leon Mbangwa said the 90 pupils, most of them girls, were 'screaming, jumping and (acting) hysterically'. On 23 March, 51 pupils at a junior school in Lusikisiki, Eastern Cape, were hospitalised over a 3-day period because they were behaving, according to their principal, as if they were 'possessed by demons'. In both of these incidents, as was the case on 26 March, most of the hysteria victims were young women.

Party loyalty beats professionalism in the Free State

Despite a health crisis in the Free State caused by a funding shortage, the provincial health department granted 160 health workers who are members of the ANC-aligned National Education Health and Allied Workers' Union (NEHAWU) paid leave for 6 months to do election campaigning for the ANC.

Free State head of health, Professor Pax Ramela, approved the leave after it was requested by NEHAWU in early February.

Ramela now denies that the 160 shop stewards were released to do election work for the ANC. Instead, he said that they were doing 'union work' but has failed to explain what 'union work' they were doing. However, the NEHAWU memorandum addressed to MEC Sakhiwo Belot asking for leave for its members is explicit in its request, saying: 'The Congress of South African Trade Unions and its affiliates, NEHAWU included, took a decision to actively and practically participate in the 2009 election campaigns for a decisive victory of our glorious movement, the African National Congress.'

'To achieve this, NEHAWU in particular is tasked to facilitate and secure political release of shop-stewards to be deployed in various strategic workplaces and towns

for the same purpose. It is on this basis that NEHAWU requests your office to facilitate the release of attached comrades to perform the above-mentioned task until Election Day.'

Attached to the memo were names of 160 employees from health facilities across the province – from the Motheo district to Clocolan.

Ramela approved NEHAWU's request on 16 February 'on condition that the release is for six months whilst we evaluate the impact of service delivery; that at any given point and time 50 per cent of shop-stewards are available to provide contractual obligations for the institutions; and activities must as far as possible be within the institutions.'

Meanwhile, the Democratic Alliance in the province has condemned the release of the 160 personnel and said it would be seeking legal advice on the matter.

Africa

Eliminating malaria in many parts of the world where risk of the disease is high may be less difficult than previously thought, international researchers said last month. Using data collected from nearly 8 000 local surveys of infection rates, the team built a global map pinpointing areas where malaria remains the biggest threat. They found that in many areas transmission rates are below the level at which controlling the disease with things such as bed nets is a real possibility, Simon Hay of Oxford University in Britain, who led the study, said. 'In Africa, surprisingly, we found that about half the 660 million people at risk live in areas where technically you should be able to have a very substantial impact and could bring transmission down to near zero,' Hay said.

The map showed that more than half of the people at risk in Africa – about 350 million – live in areas where transmission rates are below 40 per cent. This is the cut-off at which it is technically possible to eliminate and control the disease.

International

New surgery for heart failure proves ineffective

A surgical procedure called ventricular reconstruction that doctors hoped would improve symptoms in people with heart failure does not seem to work, a new study has found. The hope was that by isolating the damaged part of the left ventricle – the chamber of the heart that pumps blood to the body – people would see an improvement in symptoms and exercise capacity, and there would be fewer deaths and hospitalisations.

'There has been interest among certain proponents in using a surgical approach to treat ventricular remodelling that can occur after heart attacks through left ventricular volume reduction surgery,' said Dr Gregg C Fonarow, a professor of cardiology at the University of California, Los Angeles, who was not involved in the study. 'However, evidence of safety and efficacy for this surgical approach was lacking.' But the new study findings 'demonstrate that the addition of surgical ventricular reconstruction to standard coronary artery bypass surgery does not result in any clinically meaningful improvement in outcomes,' he said. 'The use of this type of surgery, which has become common in certain [medical] centers should, with few exceptions, now cease.'

The findings were reported online 29 March in the *New England Journal of Medicine*, to coincide with a presentation of the study at the American College of Cardiology annual meeting in Orlando, Florida.

Hot tea ups throat cancer risk

People who drink their tea piping hot run a higher risk of throat cancer than counterparts who prefer a cooler cuppa, according to an investigation published by the *British Medical Journal*. Cancer of the oesophagus is linked especially to smoking and alcohol abuse but hot beverages have also been considered a risk factor, possibly because of damage to throat tissue.

Interested in finding out more, Iranian researchers went to Golestan province, which has one of the highest rates of oesophageal cancer in the world. Inhabitants there sip large quantities of hot black tea – typically drinking more than a litre (1.8 pints) per day per person – but also have a low incidence of tobacco and alcohol use.

A team led by Reza Malekzadeh of the Digestive Disease Research Centre at Tehran University of Medical Sciences looked at 300 people who had been diagnosed with a throat tumour and a matched group of 571 healthy people who lived in the same area. Those who drank hot tea (between 65 and 69 degrees Celsius) were twice as likely to develop throat cancer compared with those who drank warm or lukewarm tea, of which the temperature was 65°C or less. Drinking very hot tea (at least 70°C, 158°F) was associated with an eightfold increased risk compared with warm or lukewarm tea.

CHRIS BATEMAN

Single suture

Bowel gene linked to autism

People with autism have an unusually high risk of bowel disorders. A gene variant has now been found that may explain the link.

A large proportion of people with autism have problems such as chronic constipation, diarrhoea or food intolerance. The *MET* gene, which has been linked to autism, is known to play a role in the repair of damaged gut tissue. A team led by Daniel Campbell of Vanderbilt University looked at whether or not this gene was involved.

They found that in 118 families in which at least one child was affected by both autism and gut disorders, a particular variant of the *MET* gene was more common in the child with autism than in the parents. This suggests that the gene plays a role in the child's autism. By contrast, this was not the case in 96 families where the children with autism did not have gut problems, suggesting that their autism had a different cause.

New Scientist 7 March 2009: 15.