

WOMEN'S HEALTH

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Silke Dyer qualified at the University of Munich, Germany in 1985. She joined the Department of Obstetrics and Gynaecology at Groote Schuur Hospital in 1988. After obtaining her qualification as a specialist she furthered her interests in infertility and obtained sub-specialist registration in reproductive medicine. She is currently head of the Reproductive Medicine Unit at Groote Schuur Hospital.

In developing countries, among women of reproductive age, 36% of the total burden of disease is accounted for by reproductive ill health – in contrast with 12% among men. This reproductive ill-health includes maternal morbidity and mortality, perinatal deaths, unmet contraceptive needs and unsafe abortion. For this reason women's health has deservedly received considerable attention and has been regarded as a priority in the planning of health services in South Africa. Important legislation such as the Choice on Termination of Pregnancy Act of 1996 and the Confidential Enquiries into Maternal Mortality were landmarks in the care of women.

Despite many policies directed at improving women's health in South Africa, numerous challenges remain. The cervical screening programme, which potentially could reduce the mortality from cervical cancer, needs resources and trained personnel in order to have an optimal impact. Contraceptive services are inadequate, at times difficult to access and often not patient-centred. Termination of pregnancy should never be regarded as a substitute for the provision of good family planning services which should include consumer education and empowerment. Although about one in six couples suffer from involuntary infertility with its attendant psychological and social implications, many are unable to access appropriate care. During the reproductive years women carry a significantly higher burden of mental ill-health when compared with men. While the reasons for this discrepancy remain to be fully understood, interventions are required to address mental health problems in pregnant and non-pregnant women. Violence against women is an enormous concern and, despite many pressure groups and rising awareness, significant inroads into the horrific prevalence of rape, domestic violence and abuse are yet to be made.

These ongoing problems in the realm of women's health have been paralleled by a number of developments that have challenged conventional wisdom about women's care.

These include a series of studies that have resulted in a review of the role of HRT in the post-reproductive years, the AIDS pandemic that impacts on every aspect of women's health, and the potential of a vaccine against human papillomavirus infection that may reduce the prevalence of cervical malignancy which is a major cause of death among women in developing countries.

Unfortunately the high burden of disease often goes hand in hand with inadequate facilities, and it is frustrating to recognise that we could improve women's health considerably, given appropriate resources. It is also a challenge to try to provide the women of South Africa with state-of-the-art advances in medical care against this background. In this context the provision of good reproductive health services, in the first instance, depends on an excellent system of primary health care provision, particularly in the public health service. Primary health care plays a key role in the prevention of disease, diagnosis of pathology, management of ill-health and referral to specialist levels of care as appropriate. It is also recognised that as primary care improves there will be an increasing need for specialist services to deal with specific pathology – at least until such time as effective preventive measures may ultimately reduce the burden of disease. While some interventions – both preventive and curative – may have a fairly rapid impact on women's health, many others will take decades for their full effect to be realised.

All improvements in health care should include the education of the patient and the health worker. We hope that this edition of *CME* with the diverse contributions from colleagues throughout South Africa will provide important insights into some aspects of women's health.