

EARS, NOSES AND THROATS

Reversing the decline in ENT services



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The focus of this edition of *CME* is on ENT topics that should be of interest to the general practitioner and to the medical officer stationed in a general outpatient department. The authors represent some of the recently qualified ENT specialists in South Africa, both in state and in private practice.

ENT services have not escaped the severe financial cutbacks imposed on state health services by government in recent years. The Western Cape has one of the better health systems in South Africa. Yet, waiting lists in some parts of the province for tonsillectomies are as long as 5 years. Cities and large towns such as Port Elizabeth and George have no specialist ENT services. The prevalence of sensorineural hearing loss is 1:100, and of conductive hearing loss > 1:5 (children > adults). However, in the Western Cape there is only one audiologist in state employ outside the tertiary hospitals, and there is no budget for paediatric hearing aids. There is also no screening programme for neonatal deafness, despite the proven cost-effectiveness of early (< 6 months) intervention for hearing loss. It is alarming that many children never realise their full potential owing to uncorrected hearing loss, simply because they were never screened for deafness or did not have access to a hearing aid or to a pair of grommets.

Compounding the problem of inadequate ENT services is the impact of HIV. In this journal Dr Lubbe points out that up to 90% of patients with HIV will at some point in their disease manifest with ENT problems.

How do we reverse this decline in ENT services in South Africa?

- Increase government spending on ENT services at all levels of health care.
- Level 2 hospitals: Many ENT problems can be managed effectively outside the tertiary/level 3 hospitals. An important focus should be to establish ENT, speech and audiology services at second-tier hospitals. This would improve accessibility to ENT health care and make services more affordable.
- Level 1 hospitals and clinics: Introduce ENT services at primary care level. Train medical officers and nurses to diagnose and manage common ENT problems and to recognise serious ENT disease that requires referral to specialists.
- Screen for hearing loss in the newborn.

The provincial government of the Western Cape has recognised the poor state of ENT services in the province and has, as part of its Health Care 2010 programme, agreed to develop ENT specialist, speech and audiology services at level 2, and then to establish outreach specialist services to level 1.

The key to the success of ENT services at levels 1 and 2 are ENT-trained medical officers. Hence, I am pleased that this issue of *CME* has been devoted to ENT-related disease.