



# TRANSACTIONS

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Admission Ceremony May 2011



# TRANSACTIONS

Volume 55(2): July - December 2011



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In support of contemporary Zulu telephone wire baskets

Artist: Dudu Cele, Port Shepstone, Kwazulu-Natal

Photographer: William Raats

Dudu's work is well described as being full of riotous colors and oozing individual expression. She had a passion for celebrating life and occasion in her work, and her baskets showcase images of soccer championships and other such events. Her artwork is available from the BAT Shop, Durban, Tel: (031) 332 9951, E-mail: [batcraft@mweb.co.za](mailto:batcraft@mweb.co.za)

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## Fees and Charges

(Applicable 1 June 2011 to 31 May 2012)

### PAYABLE BY MEMBERS OF THE CMSA:

#### Annual Subscriptions

##### Local:

Associate Founders, Associates, Fellows, Members and Certificants	R 670.00
Diplomates (local)	R 390.00
Overseas (all categories of members)	R 670.00
Retired members	R 75.00
<b>Joining Fee</b> : Fellowship by Peer Review	R 1 000.00
<b>Registration Fee</b> : Associates	R 650.00
Fellows, Members, Certificants and Diplomates	R 450.00

*(The registration fee for F, M C and D forms part of the examination fee)*

##### Purchase or Hire of Gowns and Hoods

*(The charge for the hire of gowns by new Fellows, Members, Certificants and Diplomates is included in their registration fees)*

<b>Occasional hire:</b> Gown and hood	R 180.00
Gown only	R 120.00
Hood only	R 80.00
<b>Purchase of hoods</b>	R 280.00
<b>Cost of Past Examination Papers</b> (per set of 6 papers)	R 50.00

### PAYABLE BY THE CMSA:

**Subsistence Allowance** *(paid in addition to accommodation) per day or part thereof, actually spent on CMSA business*

Senators, examiners and staff <i>(local)</i>	R 286/day
CMSA delegates <i>(overseas)</i>	\$ 215/day

##### Honorarium *(local subsistence)*

Local examiners : R276 per day less PAYE of R71.50	R 214.50
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<b>Remuneration for Setting FCS(SA) Part I Papers</b>	R 340.00
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##### Remuneration for Invigilating

*(not applicable to salaried personnel of the CMSA)*

Per session	R 225.00
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##### Remuneration for Secretarial Assistance

*(not applicable to CMSA staff)*

The following sliding scale applies:

Hours worked	Remuneration	Hours worked	Remuneration
Up to 8 hours	R 50 per hour	26 – 30 hours	R 1 130.00
08 – 10 hours	R 460	31 – 35 hours	R 1 260.00
11 – 15 hours	R 660	36 – 40 hours	R 1 400.00
16 – 20 hours	R 860	41 – 45 hours	R 1 500.00
21 – 25 hours	R 1 000	46 – 50 hours	R 1 580.00

There is a ceiling of R1 580 as persons providing secretarial assistance to the CMSA at examination time already receive a full-time salary. Claims in respect of secretarial assistance rendered have to be supported by a special recommendation for payment signed by the examination Convenor.

##### Remuneration (hourly) to Laboratory Technologists/Technicians/nurses and interpreters Enrolled Nurses (off duty)

Laboratory technologists/technicians	R 115.00
Enrolled nurses (off duty)	R 115.00
Nurses (on duty)	R 90.00
Interpreters	R 90.00

Claims for reimbursement of laboratory technologists/technicians who assist during CMSA examinations also have to be supported by a special recommendation for payment signed by the examination Convenor.

##### Travel Reimbursement Rondebosch

*(prescribed by the Minister of Finance)*

R 3.05/km

## Editorial



Dear colleagues,

On 11 August 2011, Dr Aaron Motsoaledi, the Health Minister, launched the Green Paper on the National Health Insurance (NHI) during a post-cabinet media briefing in Pretoria. The NHI is expected to be an innovative system of healthcare funding in which the following issues will

be addressed: access to appropriate, efficient and quality health services; and provision of opportunity for all South Africans to affordable, quality health care regardless of the socio-economic status.<sup>1</sup> He was clear in his briefing that the timeline for this project is 14 years. The first five years will focus on building and preparation. He stressed that the cornerstone of the proposed NHI is universal coverage, with a financing system that will ensure provision of essential health care to all citizens of South Africa (and legal long-term residents) regardless of their employment status and ability to make a direct monetary contribution to the NHI Fund.<sup>2</sup>

The 2009/2010 annual report of the Council for Medical Schemes (CMS) states that R7.5 billion was spent on administration in 2009 – a growth of 11.2% from R6.8 billion in 2008, while the total non-healthcare expenditure, i.e. administration fees, fees for managed health care, broker fees, impairments, and commercial reinsurance) grew by 11.1% from R9.0 billion (2008) to R10.8 billion (2009).<sup>3</sup> The reserves of the CMS grew by 3.5% from R27 billion (2008) to R28 billion (2009). In December 2009, there were 110 registered medical insurance schemes (33 open and 77 restricted schemes) with a total membership of 8 068 505 members (3 488 009 principal members and 4 580 496 dependents), which accounts for 16.2% of South Africa's population.<sup>3</sup>

The implication of this health funding model is that the remaining 83.8% of South Africa's population depends on the public health system. South Africa spends 8.3% of its GDP on health as follows: 4.1% in the private sector which covers 16.2% of the population, who are largely on medical schemes, while the remaining 4.2%

is spent on the remaining 83.8%. The public sector is definitely under-resourced relative to the size of the population it serves and the quadruple burden of disease.<sup>4</sup> Therefore, the NHI seeks to ensure that all South African citizens and legal residents benefit from healthcare financing on an equitable and sustainable basis.

So what should be the CMSA's role in the implementation of the NHI? The first step is to support and embrace this bold initiative by the government aimed at providing universal health coverage to all South Africans. Secondly, we need to study the Green Paper and give constructive input to the Ministerial Advisory Committee on NHI on or before the extended deadline of 30 December 2011. It is expected that in 2012, the department of Health will start piloting NHI so as to finalise how the service benefits can be designed, how the population will be covered, and how the services will be delivered. A special conditional grant will be provided in the 2012 budget to fund the pilot projects.

The first five years of NHI will include pilot studies and strengthening the health system in the following areas:

management of health facilities and health districts; quality improvement; infrastructure development; medical devices including equipment; human resources planning, development and management; information management and systems support; and establishment of an NHI Fund.<sup>5</sup> The NHI *Shosholaza* train is on the move! The CMSA must be part of this progressive move for a better health system in South Africa.

**Prof Gboyega A Ogunbanjo**

Editor: Transactions

Email: gao@intekom.co.za

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1. Department of Health. Policy on National Health Insurance. National Health Act No. 61 of 2003, Section 3; Number 657: 12 Aug 2011 [homepage on the Internet]. c2011. Available from: <http://www.doh.gov.za/docs/notices/2011/not34523.pdf>
2. Medical Chronicle Minister. Motsoaledi releases NHI green paper [homepage on the Internet]. c2011. Available from: <http://www.medicalchronicle.co.za/minister-motsoaledi-releases-nhi-green-paper/>
3. Council for Medical Schemes. Annual Report 2009-2010 [homepage on the Internet]. c2011. Available from: [http://www.medicalschemes.com/publications/ZipPublications/Annual%20Reports/CMSAR2009\\_2010.pdf](http://www.medicalschemes.com/publications/ZipPublications/Annual%20Reports/CMSAR2009_2010.pdf)
4. Coovadia H, Jewkes R, Barron P, et al. The health and health system of South Africa: historical roots of current public health challenges. *The Lancet*. 2009;374(9692):817-834.
5. Department of Health, South Africa. National Health Insurance [homepage on the Internet]. c2011. Available from: <http://www.doh.gov.za/ist.php?type=National Health Insurance>

# Instructions to Authors

## 1. Manuscripts

- 1.1 All copies should be typewritten using double spacing with wide margins.
- 1.2 In addition to the hard copy, material should also, if possible, be sent on disk (in text only format) to facilitate and expedite the setting of the manuscript.
- 1.3 Abbreviations should be spelled out when first used in the text. Scientific measurements should be expressed in SI units throughout, with two exceptions; blood pressure should be given in mmHg and haemoglobin as g/dl.
- 1.4 All numerals should be written as such (i.e. not spelled out) except at the beginning of a sentence.
- 1.5 Tables, references and legends for illustrations should be typed on separate sheets and should be clearly identified. Tables should carry Roman numerals, thus: I, II, III, etc. and illustrations should have Arabic numerals, thus 1,2,3, etc.
- 1.6 The author's contact details should be given on the title page, i.e. telephone, cellphone, fax numbers and e-mail address.

## 2. Figures

- 2.1 Figures consist of all material which cannot be set in type, such as photographs, line drawings, etc. (Tables are not included in this classification and should not be submitted as photographs). Photographs should be glossy prints, not mounted, untrimmed and unmarked. Where possible, all illustrations should be of the same size, using the same scale.

- 2.2 Figures' numbers should be clearly marked with a sticker on the back and the top of the illustration should be indicated.
- 2.3 Where identification of a patient is possible from a photograph the author must submit consent to publication signed by the patient, or the parent or guardian in the case of a minor.

## 3. References

- 3.1 References should be inserted in the text as superior numbers and should be listed at the end of the article in numerical order.
- 3.2 References should be set out in the Vancouver style and the abbreviations of journals should conform to those used in Index Medicus. Names and initials of all authors should be given unless there are more than six, in which case the first three names should be given followed by 'et al'. First and last page numbers should be given.
- 3.3 'Unpublished observations' and 'personal communications' may be cited in the text, but not as references.

### Article references:

- Price NC. Importance of asking about glaucoma. *BMJ* 1983; 286: 349-350.

### Book references:

- Jeffcoate N. Principles of Gynaecology, 4th ed. London: Butterworths, 1975: 96.
- Weinstein L, Swartz MN. Pathogenic properties of invading micro-organisms. In: Sodeman WA, Sodeman WA, eds. Pathologic Physiology: Mechanisms of Disease. Philadelphia: WB Saunders, 1974: 457-472.

## Lost Members

The CMSA office in Rondebosch is eager to establish the whereabouts of the following "lost members", some of whom may be deceased. Any information that can be of assistance must please be e-mailed to Mrs Naomi Adams at [members@colmedsa.co.za](mailto:members@colmedsa.co.za)

**Bennett**, Margaret Betty (College of Radiologists)

**Block**, Sidney (College of Family Physicians)

**Breen**, James Langhorne (College of Obstetricians and Gynaecologists)

**Gibson**, John Hartley (College of Obstetricians and Gynaecologists)

**Hirschowitz**, Jack Sydney (College of Obstetricians and Gynaecologists)

**Hlatshwayo**, Ndabuko Hamilton (College of Pathologists)

**Hunidzarira**, Lloyd (College of Family Physicians)

**Kok**, Hendrik Willem Lindley (College of Neurologists)

**Mandima**, Patricia Fadzayi (College of Family Physicians)

**Ndimande**, Benjamin Gregory Paschalis (College of Anaesthetists)

**Phillips**, Grant David (College of Surgeons)

**Phillips**, Kenneth David (College of Family Physicians)

**Raubenheimer**, Arthur Arnold (College of Obstetricians and Gynaecologists)

**Richmond**, George (College of Physicians)

**Trabelsi**, Omar (College of Ophthalmologists)

**Van Coller**, Beulah Mariè (College of Paediatricians)

**Van Greunen**, Johannes Petrus (College of Obstetricians and Gynaecologists)

**Van Zyl**, Hendrik Adriaan (College of Anaesthetists)

*Information as at 13 September 2011*



## Admission Ceremony 19 May 2011

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The admission ceremony was held in the Great Hall, Main Campus of the University of the Witwatersrand.

At the opening of the ceremony the President, Professor Anil Madaree asked the audience to observe a moment's silence for prayer and meditation.

Dr Veejay Ramlakan South Africa's Surgeon General and Lieutenant General in the South African National Defence Force delivered the oration. His speech was most topical, but also reminded graduates of the history of medical education in South Africa.

Honorary Fellowships of The Colleges of Medicine of South Africa were awarded by the President to Professors EL Mazwai and AA Stulting. Professor Mazwai's citation was written and read by Professor ZM van der Spuy and Professor Stulting's citation was written and read by Professor D Meyer.

Two Fellowships by Peer Review were conferred. One was by the College of Forensic Pathologists and the other was by the College of Pathologists.

Ten medallists were congratulated by the President on their outstanding performance in the CMSA examinations. Medals were awarded in the following fellowship disciplines: Dermatology, Ophthalmology, Psychiatry, Radiology and Urology. Medals were also awarded in the following diploma disciplines: Allergology and Emergency Medicine.

The President announced that he would proceed with the admission to the CMSA of the new Certificants, Fellows and Diplomates.

The new Certificants were announced and congratulated.

The Honorary Registrar - Examinations and Credentials, Professor Mike Sathekge announced the candidates, in order, to be congratulated by the President. The Honorary Registrar – Education, Professor Jamila Aboobaker individually hooded the new Fellows. The Honorary Registrar – Finance and General Purposes, Professor Dhiren Govender handed each graduate a scroll containing the Credo of the CMSA.

The new Diplomates were announced and congratulated.

All in all the President admitted 30 Certificants, 256 Fellows and 202 Diplomates.

The Rand Girls School choir performed before the ceremony started and then again at the end when the National Anthem was sung, whereafter the President led the new graduates out of the hall. Refreshments were served to the graduates and their families.

## Protector or Perpetrator: The Naked Choice

I am honoured and humbled to have been asked to deliver the oration at this auspicious occasion. I wish to express my sincere gratitude to The Colleges of Medicine of South Africa (CMSA) for this invitation; but importantly, I also wish to offer my heartiest congratulations to the graduands of the College. Over the years, South Africa has produced scholars who have become world-renowned: from Chris Barnard performing the first heart transplant, Max Theiler developing a vaccine against yellow fever, Allan McCormack co-developing the CT scan and Sydney Brenner contributing to the discovery of DNA, to the medical doctors of the 1947-Doctors' Pact, namely Dr AB Xuma, Dr Monty Naicker and Dr Yusuf Dadoo, whose vision of a unified, non-racial country has been achieved in the new South Africa. We have also produced a number of Nobel Laureates.

We applaud these sons of South Africa. Equally, we recognise and applaud the unsung heroes and 'sheroes', our sons and daughters for serving the health needs of people in remote parts of our country, and our soldiers for serving in clinics and on our borders, and those posted all over the world.

We live in an exciting country with many challenges, including ethical dilemmas. The Surgeon General of the South African National Defence Force (SANDF), like military doctors worldwide, is in a unique position regarding one such apparent dilemma. This concerns being a doctor on the one hand, whose job it is to save lives, whilst on the other, being a soldier whose task it is to engage in acts of war to defend the sovereignty of his or her country – a dilemma that is not easily resolved.<sup>1,2</sup>

President of the Colleges of Medicine, Sir, kindly permit me as Surgeon General to take this opportunity to share with you our experiences during the labour unrest brought about by South African healthcare workers during the past four years. Our call to staff and our running of the public hospitals during public service strikes encapsulate, in part, one of our obligations – that is to support the initiatives of National Government at "a moment's notice". It also derives from the general role of the military in a democratic dispensation as a provider of last resort for the state machinery.

The struggles of health workers are not new in, nor confined to, South Africa. Doctors and healthcare professionals have been involved in strikes in countries such as Canada and the UK in the early 1970s, and in Israel in the 1980s. Just this week, dozens of healthcare professionals walked off the job in Saskatchewan, Canada. And closer to home, the government of our neighbour, Botswana, sought a court intervention after a strike that involved 50 doctors at the country's biggest public hospitals and the closure of 27 clinics across the country. Earlier this year, health workers in Nigeria went

on a two-week strike to demand better conditions of service and additional allowances.

While health struggles have been waged in our country over many decades, the motivation, opportunity and manner in which we now embark on industrial action have changed contextually. This is the central theme of my discussion.<sup>3</sup>

To refresh our minds, allow me to take you back to the dramatic media coverage of the 2010 public service strikes, in which our public healthcare workers were also involved. Media headlines and spectacular television footage showed scenes of red-shirt clad, toyi-toying, placard-waving protestors; water cannons (sans purple dye); burning barricades; locked gates; rubber bullets; police in full riot regalia; stones being thrown at the police; and protestors being hospitalised as a result of the ensuing violence.

For those of you who are old enough, you will be forgiven for thinking that you were back in the mid-1980s during the states of emergency in our country in the apartheid era. But these dramatic scenes were playing themselves out 25 years later, and in a thriving democracy.

### South African Military Health Service (SAMHS) in support of National Government

During one of the earlier health workers' strikes in June 2007, I was part of a high-level delegation visiting Kalafong Hospital near Tshwane. The strike had just entered its second week and we were deploying about 100 members of the SANDF as healthcare workers and support personnel at the hospital. These sons and daughters of South Africa were called upon to assist the vulnerable and the frail. Most of the younger members of this group had only recently joined the SAMHS, and had to contend with corpses purposefully being hidden behind rubbish bins by striking healthcare workers and the cries of a mother giving birth at the gates, amongst other things. Our military members were tired and under constant physical and emotional threats from the striking workers, but their motivation and resolve as military members remained high.

From talking to the abandoned patients in the wards, it became clear that all the sick were afraid of their erstwhile caregivers and would have unhesitatingly fled the hospital if it were at all possible, given their health state. They were happy to see the military, not only because we were attending to their healthcare needs, but more importantly, because we were protecting them from the strikers.

As our delegation exited the hospital towards our vehicles, the health workers gathered outside were singing "our" revolutionary songs of the past. As an activist and as part of the country-wide reactivation



of anti-apartheid forces in civil society in the 1980s, I remember singing those same songs against the apartheid health system. But not once did we, as doctors, engage in strike actions that would have compromised the lives of our patients. As you are aware, some of our colleagues, like former medical-student activist, Steve Biko, and Drs Haffejee and Neil Aggett, paid the ultimate price for taking a stand against the then legislative inequities, including the lack of proper health care that pervaded our country.

Was this the outcome of the sacrifices made all those years ago? For me, emotionally, this was very difficult, for sadly our protectors had turned into perpetrators of violence.

Strikes have not always been about poor salaries. An unprecedented strike in 2004 – in the democratic era – by our Cape Town colleagues saw them take to the streets, in their lunch hour or at peak traffic times, to express their concerns about government decisions that had an adverse effect on patient care, amongst which was the chronic underfunding of public facilities.<sup>4</sup> These doctors sought to preserve the rights and health of the general public, and to make the authorities more responsive to the needs of healthcare workers and their patients. During these lunchtime and afternoon protests, patients were managed, albeit on a reduced basis, for the duration of the demonstration. They made that choice because they believed that the future of the health service and of our nation was at a crossroads.

During the winter of 2007, our democracy saw the first of what was later to become a series of annual strikes by the public service, including healthcare workers. This strike prompted the then President of South Africa, as the Commander-in-Chief of the SANDF, to deploy the SAMHS to ensure that hospitals affected by the strike continued to provide a basic service.

The SAMHS was the lead service for Operation BATA, as the operation was designated, and within three hours of the Presidential order, our first batch of nurses and doctors was deployed to hospitals in KwaZulu-Natal and Gauteng, and within 24 hours we were deployed in six of our nine provinces. The rest would follow in good time. At the height of the operation, a total of 5 094 SANDF members were deployed at 89 healthcare installations across South Africa. This deployment comprised 2 946 SAMHS members supported by 1 909 SA Army, 179 SA Air Force and 60 SA Navy members.

Similar situations were experienced during the winters of discontent of 2008 and 2009, but to a lesser degree than previously. However, our true test was awaiting us, as our public service colleagues in health care went on a national strike shortly after the 2010 FIFA World Cup.

As a supporting health service, our planning for the World Cup had begun soon after the announcement that South Africa would be the host country. This entailed a wide range of medical support – from the anxiety attack masquerading as a heart attack to national disaster. We were ready for anything and everything. Fortunately, our security was so good that the World Cup went off without any hitches.

Having been deployed from May to the end of July 2010 as part of the health support to the World Cup, SAMHS members were looking forward to returning to "normality" when the public service healthcare workers went on strike in August 2010. Again, the SAMHS

was the lead service, this time for Operation PROSPER, and at the apex of the strike, the SAMHS was supporting 74 hospitals in nine provinces with a total of 2 822 members, of whom 1 266 were healthcare practitioners – truly a remarkable feat! Furthermore, with the infrastructure developed for the World Cup, we as the SAMHS were able to monitor all nine provinces more closely and offer timeous and appropriate responses to ensure that our hospitals continued to function.

## Discussion

Prof Madaree, distinguished guests, we take cognisance that a strike by public health workers has a critical distinction from other public service strikes in that, in order to protect life as enshrined in the Constitution,<sup>5</sup> the quality of the healthcare service has to be assured.<sup>6</sup> Juxtaposed to this position, the right of workers to strike,<sup>7</sup> which is also enshrined in the Constitution, must be protected. It is thus inevitable that there will be conflict when labour disputes arise within the public health sector.

These two Constitutionally-protected and sometimes opposing rights, however, may be limited.<sup>8,9</sup> It is clear that those members who participated in the unlawful hospital strikes for better remuneration negated their Constitutional obligations and breached their profession's time-honoured ethics.

Also, no matter how tempting it may be to use the curtailment of medical personnel to resolve labour disputes, such action only serves to exacerbate a deep-seated resentment. The acrimony displayed confirmed the resolve of healthcare workers to unite more closely than ever before and a significant portion was prepared to bring the public health service to a standstill; or at best, to force doctors to resort to other tactics such as "non-cooperation with management", "work to rule" and "go-slow",<sup>10</sup> in which the indigent and vulnerable are the hardest hit.

This is not to say that public service healthcare workers, including doctors, should not have the right to bargain for their salaries as all other public employees do. Rather, the violence witnessed in the 2010 public service strike is akin to the idiom, an eye for an eye, which Gandhi is reported to have wryly said, "will only end up making the world blind". Doctors need to find methods of bargaining other than strikes, whether protected or not.

Forty years ago, during the Canadian Doctors' Strike, it was suggested that, while governments were not blameless, the profession had nonetheless been called upon not to act as adversaries.<sup>11</sup> This advice still holds true. From my perspective, the right to life supersedes the right to strike; a position that must surely also be considered in terms of ethical obligations that govern our profession.

Immanuel Kant said, "In law, a man is guilty when he violates the rights of others....but in ethics, a man is guilty if he only thinks it...."<sup>12</sup>

I wish to contend that ethical issues themselves usually become crystal clear when one imagines oneself, or a close family member, being the victim.

Having taken the Hippocratic Oath<sup>13</sup> at the ceremonies where we graduated as general medical practitioners, it seems appropriate to remind ourselves of the Oath's primary injunction – to "first do no harm".



President of the Colleges of Medicine, and all present here tonight, it is within the context of this part of the Hippocratic Oath that I now wish to focus the rest of my address.

In 1985/1986, the then 30-year old Freedom Charter still outlined the vision for health and social services in South Africa, stating amongst other things that all should have access to health care. Most, if not all of you here today, share our collective experiences of wanting to improve the health services of our country. I can recall that whilst I was incarcerated on Robben Island in the 1980s and early 1990s, we used to receive sporadic news of civil unrest that involved eminent scholars of our profession from the various institutions of higher learning who had taken up the cudgels of liberation – demanding freedom and equitable health for all.

In 2010, we were still striking, but the difference was that the strikes were now taking place in a democratic South Africa. Unlike the ethical and moral strikes of 25 years ago, we now lock out the hospitals, blocking access even to emergency ambulances and preventing anyone from entering, including sick patients needing critical care. Whatever has happened to Clause 27 of the Bill of Rights: “No one may be refused emergency medical treatment” and “everyone has the right to access health care”?

Hospitals are expected to provide good medical and health-related care and to ensure the safety of their clients. Respect for the “sanctity and preservation of life” at healthcare facilities is considered a *sine qua non*, not only during periods of war and civil unrest, but also during unrest in peacetime. Our public hospitals in particular serve mainly the poor and vulnerable of our society and that should be considered reason enough why they should not be used as weapons to wage a battle.

## Conclusion

President of the Colleges of Medicine, the University fraternity, representatives of the Department of Health and the Health Professions Council, specialist medical graduands and guests, allow me to conclude with the following:

1. Strike actions by healthcare professionals, especially in the essential services, are not only illegal, but against the basic ethical principles of the profession.

When healthcare workers choose to strike, they wilfully participate by omission of care in the possible demise and certain suffering of their fellow human beings, whom they undertook to serve. A strike is a deliberate “denial of service”.

2. Such actions cannot, and should not, be tolerated at the expense of human life and should not be allowed to continue.

We, as the health profession, need to regain the same respect and trust of the public that we once had.

3. We may have all the right laws and ethical principles regulating the profession, but if there is no sanction when these laws and ethical principles are transgressed, it breeds a cadre of doctors who disregard the moral and ethical pillars on which our profession stands.

The reality is that we have to make a conscious choice as one of the world’s leading democracies: are we going to allow the sick and

vulnerable to be used as bargaining chips in the labour relations process?

Finally, allow me to once more offer my heartfelt congratulations to the graduands. Among you is another Chris Barnard, another Steve Biko and another Yusuf Dadoo.

Thank you.

## References

1. The sentiments expressed herein do not necessarily represent the official views of the Department of Defence.
2. Gibson, BR (2007) *Doctors With Borders: The role of health professionals in war and human rights*. Available at <http://www.medscape.org/viewarticle/553271>
3. This paper has drawn liberally from two papers that originated from the SAMHS, and which have been published. The first, “Strike at all costs and be damned”, from which I have substantially borrowed for this paper, formed one of the original discussion papers in the SAMHS under the guidance of the Surgeon General. This was later published in *Timeslive* (26 August 2010) by two senior members of the SAMHS from the Office of the Surgeon General. It can be accessed at <http://www.timeslive.co.za/iLIVE/article624083.ece/Strike-at-all-costs-and-be-dammed--Readers>. Copyright is hereby acknowledged. The second paper is referenced later.
4. Taken from “Healthcare facilities are not part of the battlespace”, from which I have liberally drawn information and which also formed one of the original discussion papers in the SAMHS under the guidance of the Surgeon General. This was later published by Col LCD Naidoo, a member of the SAMHS, in *The Thinker* (2011; 27: 20-22). Copyright acknowledgements to *The Thinker* and Vusizwe Media, Johannesburg.
5. Republic of South Africa, Constitution of the Republic of South Africa, 1996.
6. Sec 27 of the Constitution of the Republic of South Africa, 1996, reads as follows:
  - i. Everyone has the right to have access to -
    - a. healthcare services, including reproductive health care;
    - b. sufficient food and water; and
    - c. social security, including, if they are unable to support themselves and their dependants.
7. Sec 23 of the Constitution of the Republic of South Africa, 1996, reads as follows:
  - i. Everyone has the right to fair labour practices.
  - ii. Every worker has the right -
    - a. to form and join a trade union;
    - b. to participate in the activities and programmes of a trade union; and
    - c. to strike.
8. Sec 36 of the Constitution of the Republic of South Africa, 1996, reads as follows:
  - i. The rights in the Bill of Rights may be limited only in terms of law of general application to the extent that the limitation is **reasonable and justifiable in an open and democratic society based on human dignity, equality and freedom, taking into account all relevant factors** (my emphasis), including -
    - a. the nature of the right;
    - b. the importance of the purpose of the limitation;
    - c. the nature and extent of the limitation;
    - d. the relation between the limitation and its purpose; and
    - e. less restrictive means to achieve the purpose.
  - ii. Except as provided in subsection (i) or in any other provision of the Constitution, no law may limit any right entrenched in the Bill of Rights.
9. Also legislatively authorised by the Labour Relations Act, No 66 of 1995, Sec 71, with specific reference in subsection 8 to those services published as essential in *Government Gazette* 18267 dated 21 September 1997 and *Government Gazette* 18761 dated 27 March 1998.
10. Chadwick R, Thompson A. Professional ethics and labor disputes: medicine and nursing in the United Kingdom. *Cambridge Quarterly of Healthcare Ethics*. 2000;9:483-497.
11. MacGregor M (1971) Strike and the Physician. *JCMA*, 1971;105:1141.
12. Immanuel Kant born 22 April 1724 in Prussia Western Philosophy interested in ethics, logic, metaphysics and epistemology.
13. Widely used modern version of the traditional oath was penned in 1964 by Dr. Louis Lasagna, former Principal of the Sackler School of Graduate Biomedical Sciences and Academic Dean of the School of Medicine at Tufts University.

## HONORARY FELLOWS

### Colleges of Medicine of South Africa



Prof Lizo Mazwai



Prof Andries Stulting

## MEDALLISTS



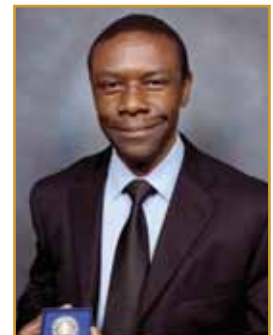
**Peter Gordon-Smith Medal and book prize:**  
Vanessa Lapiner  
FC Derm(SA) Part II



**Neville Welsh Medal:**  
Lara Sandri  
FC Ophth(SA) Part I



**Novartis Medal:**  
Catherine Muringi Kariuki  
FC Paed(SA) Part I



**Rhone-Pulenc Rorer Medal:**  
Temba Christopher Sikwila  
FC Rad Diag(SA) Part I



**Lionel B Goldschmidt Medal:**  
Amir David Zarrabi  
FC Urol(SA) Final



**Eugene Weinberg Medal:**  
Debbie Ann White  
Dip Allerg(SA)



**Walter G Kloeck Medal:**  
Anna Margaretha Carstens  
Dip PEC(SA)



**Campbell Mcfarlane Medal:**  
Bianaca Maria Visser  
Dip PEC(SA)

## CITATION: Prof Ebden Lizo Mazwai

### Honorary Fellowship of The College of Medicine of South Africa

Professor Ebden Lizo Mazwai graduated MBChB from the University of KwaZulu-Natal in 1968. His undergraduate career saw him awarded several merit bursaries during his studies and a scholarship to study an elective in Obstetrics and Gynaecology at the University of Oxford. Following graduation and internship at McCord Hospital in Durban, he worked as a medical officer at Rietvlei Hospital and then spent five years in general practice in Lusikisiki in the Eastern Cape. The connections he established then have lasted to the present day and undoubtedly his input in that very underserved area has been important to the community.

He returned to the University of KwaZulu-Natal in 1977 to specialise in General Surgery and graduated with the Fellowship of the Royal College of Surgeons of Edinburgh in 1980. In 1979 he joined an exchange registrar programme which involved him working at Glasgow Royal Infirmary in Scotland and the links he established there continue today. Following the completion of his surgical training he moved into private practice as consultant surgeon at St Elizabeth and Holy Cross Hospitals in Lusikisiki. In 1990 he was appointed Professor of Surgery at Walter Sisulu University and the following year became the Head, Chairman and Chief Specialist of the Department of Surgery, a post he held until 2009.

In 1994, in addition to heading the Department of Surgery, he was appointed Dean of the Faculty of Health Sciences at Walter Sisulu University and continued in this appointment until 2007. He has been passionate about developing WSU and has always demonstrated a commitment to providing competent doctors for rural settings. His professional interests concentrate on trauma, ethics and surgery in Africa.

This does not, however, begin to describe his input into our profession in South Africa and further afield. He has had numerous important government appointments and these have included being a member of the Medical and Dental Professional Board of the HPCSA, a member of the Moodley Commission which reviewed academic health service complexes and Deputy Chair of a Ministerial Committee on National Health Research Ethics. He has contributed to the Essential Drug List Committee, the National Health Resource Planning Committee and the National Health Steering Committee on Postgraduate Education and Training. He has been involved in planning of internship and community service and has been on the Advisory Board of the NHLS. He currently serves on the Health Sciences Review Committee of the Department of Education and,

most recently, has been appointed Chair of the Board of the Medical Research Council.

He has contributed significantly to the discipline of surgery in our country and has been involved in all the organisations within surgery in South Africa.

He served on the Council of the College of Surgeons of SA from 1995-2010. He was a member of the CMSA Senate from 1995-2010, served as Senior Vice President of the CMSA from 2002-2004 and was unanimously elected as President of the CMSA for the triennium 2004-2007. He has served the CMSA with considerable distinction, bringing to the challenges facing us his enormous experience in academia, in government institutions in resource planning and in professional bodies. During his term as Immediate Past President he contributed significantly to the College Project and continues to do so. His contributions to medicine have been recognised by colleagues abroad and he has been awarded several Honorary Fellowships.

As a registrar he was awarded the Ethicon Prize for the best Registrar dissertation and in 1993 he had the opportunity of pursuing his interests in Biomedical Ethics in Swansea, Wales, after being awarded an Ernest Oppenheimer Chairman Fund Scholarship. He is a wise counsellor, an extremely experienced clinician and member of academia and a superb mentor. His insights are valuable and with his vast experience, he has led the CMSA in difficult times and provided superb leadership. He has earned the respect of his colleagues through his management and insightful understanding of the issues with which we are grappling – staff shortages, challenges in training, the need to build comprehensive services for the whole of South Africa and the need to maintain standards.

The CMSA has been privileged to have him as an innovator within our institution and we are indeed grateful that he continues in this role. His interest in College affairs and his ongoing contributions are highly valued. He has been ably supported by his wife, Thuli, who also has an extraordinary record of community service.

Lizo Mazwai is undoubtedly a leader, an example to all of us of clinical commitment to under-resourced areas, a knowledgeable advocate for health care within South Africa and into Africa and a generous mentor. It is entirely appropriate that the CMSA recognises his contributions with our highest award of an Honorary Fellowship.

**Prof Zephne M van der Spuy**

## CITATION: Prof Andries Andriessen Stulting Honorary Fellowship of The College Medicine of South Africa

It is an honour to nominate Prof Andries Andriessen Stulting for the award of an Honorary Fellowship of The Colleges of Medicine of South Africa.

Andries Stulting is one of South Africa's most distinguished academic ophthalmologists. He obtained the MBChB degree from the University of Pretoria in 1973 and the MMed (Ophth) (cum laude) from his alma mater in 1981. In 1989, he received the Fellowship of the Royal College of Ophthalmologists of the United Kingdom, and in 1993, the Fellowship from the College of Surgeons (in Ophthalmology) from The Colleges of Medicine of South Africa by examination. This was unique in as much as he had the courage to sit for the examination after having been examiner himself for eight years! He was recently awarded the Honorary Fellowship of the Eastern African College of Ophthalmologists (FEACO) in 2009.

In 1982 Prof Stulting was appointed Head of the Department of Ophthalmology at the University of the Orange Free State, a position he still holds. During this period, 43 Ophthalmologists qualified under his leadership with the MMed degree.

Andries Stulting has served The Colleges of Medicine of South Africa illustriously in various capacities since 1985 when he started his College career as an examiner. This was followed by his election as Councillor, Senator and later member of the Executive Committee for 12 years (1995-2007). His election as Junior Vice President in 1998 was followed by that of senior Vice President in 2004. He served as Vice President for nine years from 1998-2007. He was concurrently the President of the College of Ophthalmologists for the same period, and since 2008, Secretary of the College of his discipline. Andries will probably be remembered by historians most significantly for his dedication and sterling leadership as Chairman of the Transformation Task Team for eight long and challenging years between 1999-2007.

Prof Stulting is a member of various national and international organisations. He was elected as President of the Ophthalmological Society of South Africa for two terms, from 1989 - 1991 and again from 1997 - 1999. He has served as Secretary of the same society for 16 years. He is a Founder member of the Southern African Society for Cataract and Refractive Surgery and has served on their Executive Committee for 21 years. He is currently the President.

Andries was the Vice Chairman of the South African Medical Association (SAMA) from 2001 - 2003 and member of the Executive Committee of SAMA (2001-2006). He was the President of the Free State Branch during 1995, 2001 and 2003 and is currently the Vice President.

He has served on the Medical and Dental Professions Board of the Health Professions Council of South Africa (HPCSA) from 1998 - 2010. He currently also is a member of the Executive Committee of the South African Glaucoma Society and is the Vice-President of that Society.

Internationally, he is member of the Leadership Management Group of the International Council of Ophthalmology (ICO) and board member of MEACO (Middle East and Africa Council of Ophthalmology).

Prof Stulting has been very active in Outreach Programmes since 1982. He actively supported the Bureau for the Prevention of Blindness by doing cataract surgical tours himself in Namibia, Transkei and in the Free State, and inspired registrars and consultants alike to assist with tours countrywide. Cataract surgery outreach programmes in Zimbabwe, Mozambique, Malawi, Namibia and Lesotho have been carried out with the help of other NGOs. He was involved in the formation of EACO (Eastern African College of Ophthalmologists) and was a member of the Review Committee, who visited Kenya, Tanzania and Uganda in July 2008.

He was the Organiser of the Annual Congresses of the Ophthalmological Society of South Africa in 1985, 1991, 1997 and 2003. For the 2008 Congress, he was a member of the Organising Committee responsible for the Scientific Academic Programme and Fundraising. He is a Former President of the South African Vitreo-retinal Society of South Africa.

Prof Stulting delivered more than 400 scientific papers at national and international congresses and symposia, i.e. in Portugal, India, Morocco, Mexico, Egypt, Libya, Tunis, Malawi, Zimbabwe, Nigeria, Botswana, England, Ghana, Hungary and Germany. He has delivered 11 Eponymous lectures, notably the DJ Wood Memorial Lecture of the Ophthalmological Society of South Africa and the Hennie Snyman Pro Medica Lecture at the University of Pretoria. He serves on the Editorial Board of many journals and is the Founder Editor of the South African Ophthalmology Journal.

Andries Stulting's contribution to society as a citizen was recognised by the city of Bloemfontein where he resides, when in 1997 he received the Bloemfontein of the Year Award. He is the recipient of the Distinguished Service Gold Medal in Ophthalmology from the International Academy for Advances in Ophthalmology, Mumbai, India. He received the Centenary Medal from the University of the Free State in 2004 and the Loyalty Medal from the SA Medical Association in 2007. He is also a recipient of the prestigious Paul Harris Fellowship from Rotary International.

He has been married to Lemainé, a Forensic Pathologist, since 1973 and they have two daughters. The elder daughter, Lizette is a journalist in Cape Town, and the younger, Liesl, a beautician in Bloemfontein. His hobbies include ophthalmology, reading, writing, classical music, photography and travelling.

Mr President, it is truly an honour to present to you Professor Andries Andriessen Stulting for admission to Honorary Fellowship of The Colleges of Medicine of South Africa.

**Prof David Meyer**



## Lectureships

### Arthur Landau Lecturer for 2011

Professor Y Veriava was appointed as the Arthur Landau lecturer for 2011 and he will give his lectures during the second half of 2011. The title of his lecture is "A Pressurised Journey – Despair or Hope?"

### Francois P Fouché Lecturer for 2011

Professor JA Shipley from Bloemfontein has been nominated as the Francois P Fouché Lecturer for 2011. He will deliver his lecture on 5 September 2011 at the SA Orthopaedic Congress being held at Sun City.

### JC Coetzee Lectureship in Family Medicine KM Seedat Memorial Lecture

A Family Practitioners Congress is not being held in South Africa during 2011. An appointment for both a JC Coetzee Lecturer and a KM Seedat Lecturer will be made for 2012.

### Margaret Orford Memorial Lecture

An appointment will be made for 2012.

### The JN Jacobson and WLS Jacobson Annual Lecture

No lecturer was appointed for 2011.

### SCHOLARSHIPS AND AWARDS

KM Browse Scholarship 2010/2011:

Dr K Bateman: Study: "A prospective, observational cohort study of tuberculous meningitis in South African adults in Cape Town."

Dr D Devchand: Study: "Prospective evaluation of phantom limb sensations and phantom limb pain in a third world setting."

The award was split equally between the two applicants.

### YK Seedat Research Project

Interest is being allowed to accumulate for a further year before a call for applications is made.

### CPD ACCREDITATION

For the year under review, income from CPD accreditation amounted to R17 785.00.

### MAURICE WEINBREN AWARD IN RADIOLOGY 2011

The award, which consists of a Medal and Certificate, is offered annually (in respect of a calendar year) by the Senate of The Colleges of Medicine of South Africa (CMSA) for a paper of sufficient merit dealing either with radiodiagnosis, radiotherapy, nuclear medicine or diagnostic ultrasound.

The closing date is **15 January 2012**. The guidelines pertaining to the award can be requested from the CEO at 17 Milner Road, Rondebosch, 7700. Tel: (021) 689-9533, Fax: (021) 685-3766 and e-mail: bernise.ceo@colmedsa.co.za

### R W S CHEETHAM AWARD IN PSYCHIATRY 2011

The award is offered annually (in respect of a calendar year) by the Senate of The Colleges of Medicine of South Africa (CMSA) for a published essay of sufficient merit on trans- or cross-cultural psychiatry, which may include a research or review article. **All family physicians registered and practising in South Africa qualify for the award which consists of a medal and certificate.**

The closing date is **15 January 2012**. The guidelines pertaining to the award can be requested from the CEO at 17 Milner Road, Rondebosch, 7700. Tel: (021) 689-9533, Fax: (021) 685-3766 and e-mail: bernise.ceo@colmedsa.co.za

## List of Successful Candidates: March 2011

### Fellowship

#### Fellowship of the College of Anaesthetists of South Africa: FCA(SA)

ASH Simon Alistair	WITS
BHETTAY Anisa Zeenat	WITS
BUYS Willem Frederik	US
CLOETE Willem Francois	WITS
CORREIA Michele Rosemary	WITS
DU PREEZ Ledine	UP
DUBE Sandile Siphosomuzi	WITS
ERNST Adalbert Henry	UCT
FOWLER Gareth David	UKZN
FREEMAN Michael Leonard	UP
GANGAT Naeem	UKZN
GER Anthony Joel	UCT
GOGA Saaliha	UKZN
HENNESSY Claire Lucia	
KHAN Noshina	UCT
KROG Colleen	UP
LAWSON Richaard Barry	WITS
LEE William George David	UCT
MOODLEY Kamanthree	WITS
MORGAN Robert Graham Mathew	WITS
MOSTERT Estie	WITS
MUDELY Magevaran	UKZN
MUSHONGA Justice	UCT
NAIDOO Krishnee	UP
NAIDOO Megandree	UKZN
NAIDOO Ashan	UKZN
NAIDOO Rubeshan	UKZN
NAIDU Sailuja	UKZN
NIKSCHTAT Otto Franz Alfred	
ODENDAAL Willem Johannes	WITS
OOSTHUIZEN Alexis	WITS
ORTEGA GONZALEZ Maria del Carmen	WITS
POORUN Rohith	WITS
RAJAH Chantal	UKZN
RAMKLASS Ramona	US
ROSSOUW Elfrieda	US
SADZIK Jakub	UCT
SCHEEPERS Michelle	UFS
SCHWABE Wilfried Jakobus	US

SHAIKH Mohmed Iqbal	WITS
SITHEBE Zanele Constance	WITS
SMITH Oliver Ivan	WITS
TAYLOR Jenna Leigh	UKZN
TIMMERMAN Kerry Jane	UCT
VATHARAJH Yogashree	UKZN
VENTER Stephen Jonathan	WSU
VENTER Magdeleen	UFS
WAGNER Janine Louise	WITS
WAGNER Warren James	UKZN

#### Fellowship of the College of Dentistry of South Africa – Orthodontics: FCD(SA) Orthod

SINGH Shivani	UL
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#### Fellowship of the College of Dermatologists of South Africa: FC Derm(SA)

KHOZA Nokubonga Fredericka	UKZN
PILLAY Lushen	WITS

#### Fellowship of the College of Emergency Medicine of South Africa: FCEM(SA)

CREDE Andreas	US
FISH Sharon Jane	UCT
HODSDON Lesley Anne	UCT
MAHARAJ Roshen Chathram	UCT
MOOLLA Muhammed	WITS

#### Fellowship of the College of Forensic Pathologists of South Africa: FC For Path(SA)

LUKHOZI Zwitwabu Sharon	UP
MAISTRY Sairita	UCT
NKONDO Tinyiko Zelda	WITS
VERSTER Janette	US

#### Fellowship of the College of Maxillofacial & Oral Surgeons of South Africa: FCMFOS(SA)

JOSÉ Veruschka Melissa	WITS
MABASO Elias Tinyiko	WITS
VAN STRATEN Cornelia	UP

#### Fellowship of the College of Neurologists of South Africa: FC Neurol(SA)

LANDMANN Alexander Marius	WITS
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#### Fellowship of the College of Neurosurgeons of South Africa: FC Neurosurg(SA)

MUBALLE Kadhaya David	UKZN
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SSENYONGA Peter Kato	UCT
STEYN Jacobus Malan	UP

#### Fellowship of the College of Nuclear Physicians of South Africa: FCNP(SA)

ANKRAH Alfred Otoe	UP
HOLNESS Jennifer Lyn	US
ONIMODE Yetunde Ajoke	WITS

#### Fellowship of the College of Obstetricians & Gynaecologists of South Africa: FCOG(SA)

ADAM Sumaiya	UP
BALOYI Shisana Mac-Antony	UP
BANDA-CHIPUNGU Ennet	UCT
BONONGWE Phyllos Peter Masikini	UCT
CLUVER Catherine Anne	US
DLAKAVU Welekazi Fuziwe	WITS
ELLIOTT Catherine	UCT
GUZHA Bothwell Takaingofa	ZIM
HASSIM Taheera	WITS
KABIR Ferdousi	WITS
MATLHAGA Gaontebale Onthatile	WITS
MAZIBUKO Bongani	UKZN
PETSE Uviwe	UP
PHAKOE Pontso	WITS
RAMATSOSO Nkhohola Selina	WITS
RICHARDSON Katherine Jane	UCT
SHERWOOD Kerry Anne	UCT
SULIMAN Sultana	UP

#### Fellowship of the College of Ophthalmologists of South Africa: FC Ophth(SA)

APHANE Maduoe	UP
ASVAT Akiel	WITS
BIDDULPH Shelley Jane	WITS
BOTHA Louis Martin	WITS
DE JAGER Helen	UL
MOABELO-MONARENG Tebogo Thato	UL
MSUTWANA Simanga Elias	UL
RAUTENBACH Robyn Marie	US
STEENKAMP Margot	US

#### Fellowship of the College of Orthopaedic Surgeons of South Africa: FC Orth(SA)

BHAT Sunil Kumar	WITS
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BILA Khetani Solly	UL	<b>Fellowship of the College of Paediatric Surgeons of South Africa: FC Paed Surg(SA)</b>	MOTALA Naseem Ebrahim	
DE WET Jacques Bertram	UKZN		MTHIYANE Sizwe Derrick	UKZN
MAFEELANE Seleka Kenneth	UL	D'HONDT Beelke Virginie Alfonsa Hilda	NAIDU Kershlin	WITS
MARITZ Mark Frans	UKZN	<b>Fellowship of the College of Pathologists of South Africa – Anatomical: FC Path(SA) Anat</b>	NEL Robert Etienne	
MASONDO Thabani Xolani	UKZN		RAJKARAN Michele	UKZN
MATUKANE Lunghile Donald	WITS	MQADI Buhle	SEBASTIAN Sajith	US
MAYET Ziyaad	WITS	NEL Carolina Elizabeth	SHOUL Evan Garth	WITS
MCCOLLUM Graham Antony	UCT	TOMOKA Tamiwe Monica	SINCLAIR Lindy	WITS
MOODLEY Leon Paul	UKZN	VAUBELL Jalaludin Imran	STANLEY Alan Michael	
NCUBE Sonwabo Sbusiso	UKZN	VORAJEE Naseema Ismail	TARR Gareth	WITS
PUDDU Alberto	UKZN	<b>Fellowship of the College of Pathologists of South Africa - Clinical Pathology: FC Path(SA) Clin</b>	TSABEDZE Nqoba Israel	WITS
REDDY Luren	UKZN		VALKOVA Vanelia Vesselinova	WITS
RYAN Paul Vincent	UKZN	HAUMANN Carel Eduard	VAN WYK Gavin	UCT
STEYN Rian	UP	VISSER Adele	XANA Andile	WITS
TER HAAR Michiel	UKZN	Fellowship of the College of Pathologists of South Africa – Haematology: FC Path(SA) Haem	<b>Fellowship of the College of Plastic Surgeons of South Africa: FC Plast Surg(SA)</b>	
VAN DER SPUY Dirk Jurgens	US	WALKER Bryony Lynn	BALAKRISHNAN Theogren	UKZN
WHITE Clive David	UCT	<b>Fellowship of the College of Pathologists of South Africa – Microbiology: FC Path(SA) Micro</b>	FURAHA Charles	WITS
<b>Fellowship of the College of Otorhinolaryngologists of South Africa: FCORL(SA)</b>			MIA Sayed Mohamed Ridwan	WITS
EBRAHIM Abdul Kader	US	SAMUEL Catherine Mary	<b>Fellowship of the College of Psychiatrists of South Africa: FC Psych(SA)</b>	
KUHN Warren Paul	UKZN	SOOKAN Lisha	BALLYRAM Theona	UL
NYAMAREBVU Cameline Timaani	UCT	<b>Fellowship of the College of Pathologists of South Africa – Oral Pathology: FC Path(SA) Oral</b>	FREEMAN Carla Patricia	UCT
PEER Shazia	UCT	BUNN Belinda Kathleen	GROENEWALD Engelina	WITS
SCHLEMMER Kurt Denton	UKZN	<b>Fellowship of the College of Pathologists of South Africa – Virology: FC Path(SA) Viro</b>	JEENAH Fatima	WITS
<b>Fellowship of the College of Paediatricians of South Africa: FC Paed(SA)</b>			KHAMISSA Nazmeera	UP
ABBOTT Salome	UP	SAMUEL Reshmi	LOUW Kerry-Ann	UCT
AWOTEDU Oladayo Ibiidola	WSU	<b>Fellowship of the College of Physicians of South Africa: FCP(SA)</b>	MALAN Jacques	UCT
CHIMALIZENI Yamikani Francis Gaveta	MALAWI	ABRAHAM Shinu	MALAN Jacques	UCT
DE GAMA René Yvette	UP	BISETTY Pumeshen Deenadayalu	MANIKKAM Liane Camilla	UKZN
GOVENDER Thareshee	UKZN	BLACK John Maule	MAYNARD Fiona Olivia	WITS
HAUPTFLEISCH Marc Peter Kedzlie	WITS	BOCCHINO Loredana Maria	MOLOKOMME Molokashe Meriam	WITS
KAWAZA Kondwani Mbwani Dominic	UCT	BOTHA Christoffel Francois	MOODLEY Thliosshinee	UKZN
KERAAN Qaunitah	UCT	BUTLER India Lucy Claire	NAIDU Kalaivani	UP
KHAN Riaz Rashid	WITS	CHHIBA Mukesh	NYANDU Thuthukile Thembeke	WITS
KOCK Celeste	UP	DLAKANE Siphokazi Priscilla	TARAJA Farzana	WITS
LAMB Greg	UP	DLAMINI Thandiwe Angela Lerato	YOUNG Merryn Elizabeth	UCT
LEDGER Michael Ryan	UCT	DRAPER Robin Gerald	<b>Fellowship of the College of Public Health Medicine of South Africa: FCPHM(SA)</b>	
LELAKA Salome Mpho	WITS	GANGAT Zakaria	MENDES Jacqueline Faria	WITS
MASHOKO Vongai	ZIM	GOVENDER Yuvashnee	MOODLEY Nishila	WITS
MOKGALE Moffat Mmusi		INGRATTA Argentina Maria	MOODLEY Kalavani	UKZN
MORAR Deksha Faye	WITS	KOTZÉ Dirk Daniël Joubert	NADESAN-REDDY Nisha	UKZN
MORARE Mamotshabo Rebecca	WITS	LAHER Zaheer	<b>Fellowship of the College of Diagnostic Radiologists of South Africa: FC Rad Diag(SA)</b>	
MUSASA Mudibo	UL	LUTHULI Nkosinathi Dennis	AHMED Anisa	
NAGAR Bhavisha	WITS	MOETHILALH Sachin	CADER Shaheen	
NJOBENI Sithandiwe Noluyolo	UKZN	MOOSA Jameel	ELS Hein	US
O'RYAN Samantha	UCT	MOROKA Kgomotso Nontsikelelo	HO-YEE Ruschka Farrah	UCT
PILLAY Thirisia	UKZN	MOSES Portia Aurelia	KHAN-PATEL Mohseen	UL
SALLOO Asma	WITS		MACINGWANE Nwabisa Busiswa Hilary	
SMITH Sarah Jane	UFS		MAYDELL Arthur Thomas	US
STRÓBELE Silvia	US		MLOTSHWA Zanele Grace	WITS
TALAKGALE Kwena Tilly	UL			
THELETSANE Joseph Daniel Thapelo	UCT			

SCHULZE Otto Carl US  
VAN WYK Matthys Johannes WITS

**Fellowship of the College of Radiation Oncologists of South Africa: FC Rad Onc(SA)**

CASSIMJEE Saleem UKZN  
NEL Henriette  
STOPFORTH Laura Wendy UKZN

**Fellowship of the College of Surgeons of South Africa: FCS(SA)**

BRAND Martin WITS  
BROEZE Nadine WITS  
CASSIMJEE Ismail WITS  
DU PLESSIS Leonel Mark  
GILDENHUYS Christiaan Gerhardus  
GOGA Riaz UKZN  
GOMES VARELA Carlos UCT  
JAYAKRISHNAN Radhakrishan WSU  
LAING Grant Llewellyn UKZN  
MALHERBE Gideon Francois UCT  
MARAIS Pieter Jacobus Andries WITS  
MONZON TORRES Barbaro Ignacio WITS  
MTHETHWA Musa Rodney UKZN  
QUAYSON Francis William UCT  
ROSIC Todor WITS  
SHAM Shailendra UKZN  
THOMSON David Alexander UCT  
TSOTETSI Sabatta Christopher  
VAN DER MERWE Renier US

**Fellowship of the College of Urologists of South Africa: FC Urol(SA)**

BUGWANDIN Santosh UKZN  
DOVEY Zach Seth  
MATHABE Kgomotso Minah WITS  
SATHIRAM Ronisha UKZN  
SMIT Shaun Garrick US  
VAN DER WALT Christiaan Lourens Erasmus US  
VERMEULEN Lodewikus Petrus UFS

### Certificates

**Certificate in Cardiology of the College of Physicians of South Africa: Cert Cardiology(SA) Phys**

DAWOOD Riaz Suleman WITS  
GONCALVES Ricardo Miguel da Silva WITS  
MILELA Mongezi Godfrey UFS  
MKHWANAZI Makhosini Lancelot WITS

**Certificate in Child Psychiatry of the College of Psychiatrists of South Africa: Cert Child Psychiatry(SA)**

SALE Shehu

**Certificate in Critical Care of the College of Anaesthetists of South Africa: Cert Critical Care(SA) Anaes**

BRANNIGAN Liam Barrett WITS  
NGUBANE Thubelihle WITS  
RODSETH Reitze Nils

**Certificate in Critical Care of the College of Paediatricians of South Africa: Cert Critical Care(SA) Paed**

DEMOPOULOS Despina WITS

**Certificate in Endocrinology & Metabolism of the College of Physicians of South Africa: Cert Endocrinology & Metabolism(SA) Phys**

MOHAMED Nazeer Ahmed WITS

**Certificate in Gastroenterology of the College of Paediatricians of South Africa: Cert Gastroenterology(SA) Paed**

WALABH Priya UCT

**Certificate in Gastroenterology of the College of Physicians of South Africa: Cert Gastroenterology(SA) Phys**

BUHEL Otto Carl  
MARAIS Monique US  
RAJABALLY Muhammad Naayil UCT

**Certificate in Gastroenterology of the College of Surgeons of South Africa: Cert Gastroenterology(SA) Surg**

MARUMO Thomas Kekgatleope  
NAIDOO Noel WITS

**Certificate in Gynaecological Oncology of the College of Obstetricians and Gynaecologists of South: Cert Gynaecological Oncology(SA)**

HERBST Unine UP

**Certificate in Infectious Diseases of the College of Paediatricians of South Africa: Cert ID(SA) Paed**

DRAMOWSKI Angela US  
DU PLESSIS Nicolette Marie UP

**Certificate in Infectious Diseases of the College of Physicians of South Africa: Cert ID(SA) Phys**

BOTHA Philip Rudolf US  
STACEY Sarah Lynn WITS

**Certificate in Neonatology of the College of Paediatricians of South Africa: Cert Neonatology(SA)**

BHoola Roopesh Nagin UKZN  
NGETU Thandeka Judith UKZN

**Certificate in Nephrology of the College of Physicians of South Africa: Cert Nephrology(SA) Phys**

ALAGBE Stella Chinyelu UCT  
BAGWANDEEN Michelle Charlene UKZN  
MASHILOANE Bernard WITS  
NAIDOO Balram UKZN

**Certificate in Paediatric Neurology of the College of Paediatricians of South Africa: Cert Paediatric Neurology(SA)**

NAKWA Firdose Lambey WITS

**Certificate in Pulmonology of the College of Physicians of South Africa: Cert Pulmonology(SA) Phys**

RAY Roanne WITS

**Certificate in Rheumatology of the College of Physicians of South Africa: Cert Rheumatology(SA) Phys**

DUBULA Thozama UKZN

### Part I, Primary and Intermediate Examinations

**Part I of the Fellowship of the College of Anaesthetists of South Africa: FCA(SA) Part I**

CASEY Michelle Elizabeth UCT  
DE BRUIN Nicolaas Johannes Hendrik WSU  
DINGEZWENI Sithandiwe WSU  
DU PREEZ Irene Ada WITS  
GOKAL Prashant UKZN  
HALUMAN Nirasha WITS  
KABAMBI Kasandji Freddy WSU  
KELLY Eugene Hamerton WITS  
MITCHELL Colin Guy UKZN  
MOODLEY Dhesan WITS  
MOODLIAR Hashanti UKZN  
MORGAN Gwen WITS  
NOBBS Gareth Robert WITS  
PICKEN Guy UCT  
RAMSAMY Trisha UKZN  
RYMER Darren Robert WITS  
SINGH Khamini WITS  
SOORAJ Nayandra Runveer US  
SYED Muhammed Ridwaan WITS  
TELLIER Lara Roseanne

**Part I of the Fellowship of the College of Dermatologists of South Africa: FC Derm(SA) Part I**

AGABA Elisah WITS  
BONTHUYS Anita UCT  
MATHOBELA Charlotte Matete US  
NAIDOO Levashni UKZN  
NDUMO Mamello Leah UKZN  
NEL Lenice Christine UKZN



**Part I of the Fellowship of the College of Emergency Medicine of South Africa: FCEM(SA) Part I**

BARNETSON Brenda Kathleen	US
DELPORT Carline Delene	UCT
DUFOURQ Nicholas James	WITS
FIANDEIRO Daniel	UKZN
HINDLE Lucy Elizabeth	UCT
HOLLONG Bonaventure Garoua	UCT
LEMKE Franz Gustav	UCT/US
MAKALENG Boledi Mydah Agilaide	UCT
MARK-JOHNSON Nseabasi Lilian	UCT
MUGANDA Paul	US
MYNHARDT Annelize Kat	WITS
NDEBELE Nontobeko Fortunate Menzi	US
RAMRAJ Pranesh	UKZN
ROMAN Bronwen William	UCT
SINGH Swasthi	US

**Part I of the Fellowship of the College of Family Physicians of South Africa: FCFP(SA) Part I**

IGBOJIAKU Okoroma John	UKZN
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**Part I of the Fellowship of the College of Forensic Pathologists of South Africa: FC For Path(SA) Part I**

AFONSO Estevão Bernardo	UCT
NTSELE Sibusiso Johannes	

**Primary Examination of the Fellowship of the College of Maxillofacial & Oral Surgeons of South: FCMFOS(SA) Primary**

NGCWAMA Yanga	US
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**Part I of the Fellowship of the College of Neurologists of South Africa: FC Neuro(SA) Part I**

KATHAN Puendran Shanti Prakash	WITS
MAHARAJ Karishma	
YUDELOWITZ Bradley Joshua	WITS

**Part I of the Fellowship of the College of Obstetricians & Gynaecologists of South Africa: FCOG(SA) Part I**

ALLAN-GOULD Heather Derwent	WITS
ARCHARY Paversan	UCT
ARNOLD Mogamad Armien	UCT
BLIGNAUT Quinton Craig	WSU
BRANCH Susan Jennifer	WITS
FOSU-AMOA Daphney Rebone	UP
GIYOSE Nwabisa	UCT
JACOBSON Hayley	WITS
LEKALA Matsiane Lucia	UL
LUKHAIMANE Tshimangadzo Abigail	WITS
MABUZA Kwenzekile Makungu	UP
MAHARAJ Atisha	UKZN
MAKULANA Takalani	UP

MASANGA Einstein Genesis	ZIM
MASHAIRE Godknows Kudzanayi	
MASWIME Tumishang Mmamolatsi Salome	WITS
MAUWA Ernest Tsaruakanayi	
MBONGOZI Xolani Bethwell	
MOSE Simpiwe	WITS
NAICKER Strinivasan	UKZN
NAIDOO Kumesha	
NASCIMENTO FONSECA Sandra Marques	WITS
NOËL Carolyn Joyce	WITS
ONWUGHARA Chidebere Edwin	
ONYANGO Paul Jasper	WITS
OOSTHUIZEN Lizle Joann	
PIEK Dalene	UP
PILLAY Rochelle Charmaine	UKZN
POONYANE Thabane	
PULE Palesa	WITS
RAS Lamees	UCT
SIBANDA Emanuel	WSU
SINEKE Chamlake Vuyo	
TIMMAL Shaun	UKZN
VAN DER MERWE Elrike	US
ZUNGU Mondl Shasha	US

**Part I of the Fellowship of the College of Ophthalmologists of South Africa: FC Ophth(SA) Part IA**

ABOOBAKER Shaheer	UFS
BOAUOD Hamza MA	UKZN
BONI Anthonia Olaomaju	
COETZEE Ingrid Daniela	
CURTIS Elizabeth Louise	
HANN Mignon Chin-Ae	
HÖLLHUMER Roland	WITS
JAYA Yevukai Aquillina	ZIM
KHAN Monawwar	UKZN
LETSOALO Harold Lesego	UP
MALHERBE Lodewicus Francois	
MAPHAM William Eric	
MOKWATLO Peter Noko	
MUSTAK Sayeed Hamzah Muhammed	
PAULSEN Angelette Persefene	UKZN
PUPUMA Noluthando	UKZN
VAN WYK Daniel Jacobus	

**Primary Examination of the Fellowship of the College of Otorhinolaryngologists of South Africa: FCORL(SA) Primary**

BIPATH Rishan	UKZN
UYS Hendrik Kendal	UKZN
YAKOBI Akhona	WSU

**Part I of the Fellowship of the College of Paediatricians of South Africa: FC Paed(SA) Part I**

AKHALWAYA Shehnaaz Yunus	UCT
AMBARAM Priya Ramanlal	WITS

BASSIER Mardeyah	US
BAU Steffen	
COMLEY Vanessa	UKZN
KESHAVE Amith	WSU
LAURENCE Craig	
MABUA Ingrid Kelebogile	
MAKREXENI Zongezile Masonwabe	WSU
MATLOGA Moyagabo Patrick Emmanuel	WITS
MOODLEY Kumaran	UKZN
NAIDOO Yugashnee	UKZN
NAIDOO Thanusha	UKZN
NAIDOO Gitanya Davina	UKZN
NAIR Nadia	
NDOU Tanyah Ginah	WITS
NDZAMELA Nozibongo	UKZN
NGAMBE Tharcisse	WITS
OOSTHUIZEN Karlien	WSU
PARBHOO Kaajal	
RAMSUNDHAR Nerica	
RUGAMBA Gilbert	WITS
SEOPA Matshelane Rose	UKZN
SINGH Roshika	UKZN
SOTOBÉ Nandipa Mizpa	WSU
TIAM Modinat Mayowa	WITS
TRIKAMJEE Thulja	UKZN
WEBSTER Irwin Eugene Hugo	
WESSELS Amanda Jean	WSU

**Part I of the Fellowship of the College of Pathologists of South Africa – Anatomical: FC Path(SA) Anat Part I**

CRAUSE Christine	UP
FASSOM Delerise Deborah-Lee	WITS
KAAGA Mmaphuti Dorothy	WITS
MCALPINE Ewen David	WITS
OTTO Michael Johannes	UCT
THOBEJANE Maphopholetse Baatseba	WITS
WRIGHT Glenda	WITS

**Part I of the Fellowship of the College of Pathologists of South Africa – Haematology: FC Path(SA) Haem Part I**

MANJATI Thandiwe Sibulele	US
MASHIGO Nomusa	US
MUTEMA Leonard	US
PHILLIPS Lee-Ann	UCT
SWART Luhan	UCT

**Part I of the Fellowship of the College of Physicians of South Africa: FCP(SA) Part I**

ALTEER Mohamed A	US
ARRUJ Mohamed Rajab Salem	UKZN
AVILA-DANQUILLECOURT Nuria	
BANDERKER Ismail Abbas	UCT
BIZAARE Maresce Kerry	UKZN
CASSIMJEE Zaheera	US
CHEN Min Shien Jerry	UP

COETZEE Ankia	US	<b>Part I of the Fellowship of the College of Psychiatrists of South Africa: FC Psych(SA) Part I</b>	DICKINSON Gwyneth-Ashley			
COETZER Susan Franci	WITS		DOUGLAS-JONES Paul	WSU		
COOPER Robert	US		DUBE Goodwill Qedusizi	UKZN		
DATAV Mohammed Ishaq	UCT	LOUW Albertus Wynand	UL	GOUNDER Morgan	UKZN	
DAWEHR Serajedden A Ahmed	UKZN	SEFALA Gabariel Sephodi	UL	HANEEF Surayah	UKZN	
DE VILLIERS Maryke	UP	<b>Part I of the Fellowship of the College of Diagnostic Radiologists of South Africa: FC Rad Diag(SA) Part I</b>	HARILAL Shamaman	UKZN		
DEOSARAN Sarika	UKZN		HIDDEMA Willem Bouke			
DUDGEON Kate	WITS		HILTON Thomas Laurence			
DUZE Ntando Peaceman	UKZN	ALLY Zain	UKZN	HORN Hugo	UFS	
EAGLES Valencia Estalita	UCT	BROWNING Nicola		JACOBS Leslie	WITS	
ELASIR Haitham	UCT	GANI Raumeen Suliman	WITS	JUGUNANAN Gourisha		
FAREED Waarisa		GUGUSHE Matseliso Magdalena	UL	KADER Mohamed Imran	UKZN	
FREETH Timothy Xolani Stanton	UCT	HAINES Mario Michael Linsy	UKZN	KADWA Mohamed Haroun	UKZN	
GINA Ntombenhle Phindile		KEATING Kathryn Mary Louise	WITS	KAJEE Afsana		
GONDWE Lillian Matolase	UCT	KHUMALO Zonah Sylvia	UCT	KALOIANOVA Maria Simeonova		
GOUNDEN Sivakumar Marimuthu	UKZN	MABUSELA Zukisa	WSU	KANJI Karim Husseinali	WITS	
GOVENDER Laliitha Arumugham	UKZN	MAGWAI Mokgadi Granny	WITS	KARANJA Susan Wanjiru	UKZN	
HURTER Gideon Stephanus	UFS	MALEK Liat		KHAN Humza	UKZN	
JANSEN VAN RENSBURG Marius	WITS	MASANGO Mlindeli Antony	UKZN	KHAN Faraaz	UKZN	
KOOVERJEE Sadhna Ravindra	WITS	MAZIBUKO Zakithi Silindile	UKZN	KHAN Nabil Ali	WITS	
KORB Anneli	WITS	MODISE Mmusakgotla Theron	UL	LELUKA Mahlomola Daniel	WITS	
KOTU Mary Lesego		MOTSHUDI Thapelo Montgomery	WITS	LWAMBA Kayuba	WITS	
KRAUS Sarah Mignon	UCT	PALLIAM Samantha	WITS	MAHOKO Mosadi	US	
LAHER Ziyaad		RAMDASS Deepa Arhana		MAINA Anne Wanjiru	WITS	
LUTAAYA Leonard Edgar		RATTAN Bishun	UKZN	MARAIS Eben Slabbert	UKZN	
LUTCHMAN Rohan Laljee	UKZN	REINDERS Antoinette	UFS	MBEBE Dalina Thembisile	UKZN	
MADITSI Maletswai Dennis	UKZN	SEGWE Aobakwe Seipati		MCPHERSON Deidre Estelle Kathleen		
MAGUBANE Alexia Gugulethu	WITS	SEWCHURAN Tanusha	WITS	MEINTJES Catharina Margaretha	UFS	
MAHABAL Aveen Jiten Ramdukhi	UKZN	TALLAPANENI Vijaya Sekhar	UKZN	MISEER Sanesh	UKZN	
MKANDAWIRE Mercy Juliet	WITS	UDARAJH Kavistra	UKZN	MNCUBE Phelele Desiree	UKZN	
MOKONE Thomas Modise	UL	ZULU Zinhle Nosipho	UKZN	MOFOKENG Peeloe Theophilus	WITS	
NAIDOO Pranusha	WITS	<b>Part I of the Fellowship of the College of Radiation Oncologists of South Africa: FC Rad Onc(SA) Part I</b>	MOSADI Bakang			
NAYIAGER Endresen	UKZN		ASMAL Hasinah	UKZN	MOYDIEN Mahammed Riyaad	UCT
NEL Jeremy Stephen	WITS		CHIRANJAN Nirasha	WITS	MSUKU Sandress Chankhulu	WITS
NEL Debbie	UCT	MWALE Maurice	WITS	MUKENDI Ilunga Valerien	UKZN	
PEMA Mitesh Kanthi	UCT	NAIDOO Komeela	WSU	MUNYAI Marubini Armstrong	UP	
PEYA Bukiwe Sharon		SUMAIDA Abdul Rahman	UCT	MUNYIKA Akutu Appollos	ZIM	
PILLAY Ashegan Kandasamy	UKZN	VAN JAARVELD Adriaan Zacharias Albertus	UCT	NAIDOO Natasha	UKZN	
PILLAY-LUNGOOMIAH Kesval		<b>Primary Examination of the Fellowship of the College of Surgeons of South Africa: FCS(SA) Primary</b>	PHAKATHI Boitumelo Precious	UP		
PRETORIUS Jan St Elmo	US		ABUGHALYA Mohamed Salem	UKZN	PHAKULA Martin Lahlwiwa	UL
PRETORIUS Christel	UFS		ACKERMANN Hilgard Michiel	UCT	PHALENG Samson Nare	
PROMNITZ Geoffrey Craig	WITS	ADKINS Ronaldo		PHOLOSI Mohau Chantell		
RADINGOANA Lemoga Delicia Mmahlabine	UKZN	ADU-PARKO Lulekwa Leah	WSU	PIETERSE Barend Hermanus	WITS	
ROSSOUW Pieter	US	ALBIBI Khalid Abdulsalam		RAMDAS Yashveer		
SEBESHO Mpho	WITS	ALHEREK Abdalhamed Eisa		RAMGHULAM Sherwin		
SIBANDA Joshua	WITS	BHIKA Sharmel		RASMENI Ntobeko	UL	
SINGH Kamalika		BISMILLA Muhammed Naadir	WITS	SAQU Thokozisa	WSU	
SWART Margaretha Evangelena	US	BOOI Zuko	WITS	SCOTT Iwan	WITS	
THEMISTOCLEOUS Andreas Constantinos	WITS	BRINK Johannes Albertus	US	SHEIKH Rizwan Usman	WITS	
TREDoux Pierre	US	DE VOS Corne	US			
VAN HEERDEN Tersia	UFS					
WOSU Ifeanyichukwu						
ZORGANI Abdurraouf Esseid						

SINGH Nertisha	UKZN
SINGH Kiyasha	WITS
SISSING Janice Miranda	WSU
SIVNARAIN Amith Hiralal	
STRYDOM Andrew	
THIART Gerhard	WSU
THOMPSON Eddison	
TLADI Thato Cathrine	WITS
TWIER Khaled Ibrahim	WITS
UZONWA Godson Obiora	
VAN DEN BERG Bianca	UKZN
VERMEULEN Abraham Jacobus	UFS
VILJOEN Andrew John	UKZN
WIESNER Frederick Jacobus	

**Primary Examination incl Neuroanatomy of the Fellowship of the College of Surgeons of South: FCS(SA) Primary - Neuroanatomy**

ALBIBI Khalid Abdulsalam	
BUTHELEZI Thamsanqa Petros	
JUGUNANAN Gourisha	
KAJEE Afsana	
KARANJA Susan Wanjiru	UKZN
LACHMAN Samesh Samraj	UKZN
MANKAHLA Ncedile	UCT

**Primary Examination of the Fellowship of the College of Urologists of South Africa: FC Urol(SA) Primary**

MAMITELE Wisani Craig	
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**Intermediate Examination of the Fellowship of the College of Maxillofacial & Oral Surgeons of South: FCMFOS(SA) Intermediate**

GELDENHUYS Barry	WITS
KARACHI Nadeem	WITS

**Intermediate Examination of the Fellowship of the College of Orthopaedic Surgeons of South Africa: FC Orth(SA) Intermediate**

DANIEL Koshi Memuriyil	UCT
MARAIS Christoff de Villiers	
MATEKANE Katlemo Motseki	WITS
PAPAGAPIOU Charalambos	WITS
PILLAY Jaytsh	WITS
VAN ZYL Willem Jacobus	WSU

**Intermediate Examination of the Fellowship of the College of Surgeons of South Africa: FCS(SA) Intermediate**

AGYEN-MENSAH Kwasi	US
ALLY Ahmed	UKZN
BISCHOF Kirsten Emma	WITS
DANNATT Russell de Martini	
DOMAN Nicolaas Jacobus	UP
GREYVENSTEYN Gerhardus Andries	UP
JACKSON Brandon Spencer	UP

KEYSER Zamira	US
MAHLANGU Curnick Siyabonga	UL
MAKHAMBENI Wilheminah Hendrkia	WITS
MILLER Eloise Juliet	WITS
MKHONZA Mfundo Felix	UP
MONAISA Letlhogonolo Brian Andrew	WITS
MOTHAIE Sibonqile Joalane	UKZN
MOYENI Nondabula	UKZN
MULIRA Solomon	WITS
MUREKO Alfred Uriapehe	UCT
OSHUN Nathaniel	UKZN
OYOMNO Meryl Dache	WITS
RAMDIAL Shaal	UKZN
RAYAMAJHI Shreya	UCT
ROYTOWSKI David	UCT
SHANGASE Thobekile Nomcebo	UKZN
VAN HEERDEN Hester Margaretha	US
VAN ZYL Willem Jacobus Smit	UL
WASL Hisham	UCT
XOAGUS Elizabeth Alexia	UCT

**Intermediate Examination of the Fellowship of the College of Urologists of South Africa: FC Urol(SA) Intermediate**

ADOFO Charles Kwame	UP
BOSOMTWI Boateng	UP
HAYDEN Rudiger	UFS

**Higher Diploma in Internal Medicine of the College of Physicians of South Africa: H Dip Int Med(SA)**

GOVENDER Preesha	UKZN
MASHITISHO Boitumelo Gladness	UL
NKWANE Mosimanegape Ernest Combie	UCT
PATEL Farouk	

**Higher Diploma in Orthopaedics of the College of Orthopaedic Surgeons of South Africa: H Dip Orth(SA)**

BERTIE Julia Diana	UKZN
GREY Barend Christiaan	UKZN
HARIPARSAD Rikesh Dhuneshwar	UKZN
HIJAZI Mohammad Shafiq	WITS
HOUSEN Mahomed Reechard Essop	UKZN
KARIEL Firoz	UKZN
MABASO Nkosinathi Lucas	UKZN
MARÉ Pieter Herman	UKZN
MKHIZE Dumisani Sihle Magnificent	
NAIDOO Keegan	UKZN
SEEVSAGATH Ashwin	UKZN
SONJANI Siyabonga	

**Higher Diplomas**

**Higher Diploma in Surgery of the College of Surgeons of South Africa: H Dip Surg(SA)**

AMIN AKM Ruhul	
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PANDA Kitela Ghislain	WITS
TSHISOLA Kapenda	UKZN

**Diplomas**

**Diploma in Anaesthetics of the College of Anaesthetists of South Africa: DA(SA)**

ADAMS Samantha Claudine	UKZN
ASGHAR Adam Konrad	UKZN
BANTU KAPAJIKA Dieudonne	UKZN
BODA Tasneem	UP
BOEKE Jeannette	UCT
BURGER Natalie	WITS
BURTON Glen	
DU PLESSIS Naomi	
EBERSOHN Annemarie Cornelia	
EKSTEEN Hendrik Johannes	UCT
FERREIRA Anneke	
GELDENHUYS Jacques	UFS
GORDON Katherine Georgina	WSU
HADDOW Emma Jane	UKZN
HAMANN Craig Warren	UP
HARRIS Roy Gordon	WITS
HOOLE Lynne	
HUMAN Lizelle	UFS
JAGLAL Prenika	UKZN
JORDAAN Esther	
JOUBERT Andries Thomas	
JUNGE Marina	UKZN
LE GRANGE Michel	UFS
LEVE Pindele	UKZN
LINDEQUE Christa	US
MAHARAJ Dyuti	WITS
MAHMOUDI Masoud	
MAYAT Yasmin Mahomed Saleem	UL
MICHIE Graeme Aidan	US
MOKAE Pulane Michelle	UL
MOTOLWANA Thandiswa Thenjiwe Sibongile Lumka	UP
MPHAHLELE Maria Kattlego	UL
NAIDOO Kamini	UKZN
NKONGOLO Kabwe Kegels	
NKUNA Amanda Vutomi	UL
OSA-IZEKO Orobosa	UKZN
PADAYACHEE Navaravan Shanmugam Yagambaram	
PIEK Madel	
PILLAY Vianca	UKZN
PLAATJES Adam	WSU
PORTER Angela	UP
POTGIETER Danielle	
PRETORIUS Johanna Jacomina	UP
PRETORIUS Tania	UFS
RABIE Pierre Jacques	UFS
RANDOLPH Ramiro	UKZN

RAPULENG Aletta Moitoi	WITS	BANTOBETSE Mpho Lesego		<b>Diploma in Obstetrics of the College of Obstetricians and Gynaecologists of South Africa: Dip Obst(SA)</b>	
RAVID Nadav Binyamin	WITS	BARNARD Yolanda	US	BHENGU Busisiwe Siphumelele	UKZN
SEGAL Craig	WITS	BARTH Carmen	UKZN	BLAKENEY Jeremy	UKZN
SIKHAKHANE Sebenzile Zamathuta	UKZN	BASSA Ayesha Cassim		BOOYSEN Lelani	
SITTMANN Friederike	UCT	BOLON Jonathan Graham	WITS	DEALL Tracey Caroline	UKZN
STEENKAMP Willie	US	BOTES Maria Christina	US	DIOLE Elias Lesego	
STEYN Francois Petrus Rossouw		BROWN Nicolette	UFS	EKRON Bianca	US
TRACEY Ralph Patrick		BUNGANE Gcobisa Pumza		EZEKWE Celestine Tooohukwa	
VAN DER ELST Zane Tony	US	CHATORA Tsitsi Vimbayi		FRANS Vusumuzi Sakhele Esau	
VAN TONDER Willem Theodorus	UL	CHIBONDA Shirley		GOOLAM AMOD Nadia	WITS
VAN VREEDE Joseph James	UCT	CHIKANDIWA Admire Takuranenhamo		JAFTA Pelisa Glodean Roberta	WSU
WELLINGTON Lara-Lyn	WITS	CHOEU Benny Mashegoanyane		KALASA Sifa Mamisa	UKZN
<b>Diploma in Child Health of the College of Paediatricians of South Africa: DCH(SA)</b>		DINTWE Mmabatho Ngoananoka Portia		KASONGA John Tshimbalanga	UKZN
CASSIM Aadila		ESSACK Gadija	US	LANGA Bezile Mawande	
CHETTIAR Melissa Lavina	UKZN	FIRTH Judy Jennifer	WITS	LEVITT Annelize Julia	US
EBRAHIM Hassina	UKZN	GAMA Joseph Zama		MLANDU Yandisa Philiswa	US
GESAMI-STEYTLER Lilian Moraa	WITS	GARVEY James Patrick		NWOSU Jude Chukwunonso	UKZN
HISCOCK Colleen Jean Bradfield	UCT	GATLEY Elizabeth Marguerite		ONUBEZE Francis Onyeka	UKZN
HUTTON Hayley Kathryn		GAUNT Charles Benjamin		ONWUKIKE Stanislaus Chukwudi	UKZN
KHAN Safiya		GAUNT Taryn Lea		OWOLABI Sunday Olusola	WSU
LEBEA Mamaila Martha		GORDON Chivaugn	UCT	SMIT Nelis	
MACLOU Simone Nicole	US	HENRY Shireen		TSHIKOVHI Lusani Bridgette	
MAKIWANE Nonqaba Cecilia		IGBOGIDI Uzezi Raymond Graphwell		UDUJIE Ebenezer Ikuo	WSU
MBATHA Nontobeko Fundiswa		KALONJI Njiba		VAN DEN BERG Gabriel Jacobus	UCT
MCALPINE Alastair Kenneth		KEELING Kathryn Helen		VAN SCHALKWYK Tharina Michelle	UFS
MKHASIBE Pretty Zamagubudu	UKZN	KOCHSIEK Ulrich		ZONDO Leod	
MKHIZE Anele Nolwazi Lynette	UKZN	LINDY Merusha		<b>Diploma in Ophthalmology of the College of Ophthalmologists of South Africa: Dip Ophth(SA)</b>	
MOREMI Makoma Dietsa	UL	MAKHAKHE Lehlohonolo Blessing		BHIKA Raquel	
MTESHANA Phindile Zandile	UKZN	MALULEKE Thembisile Ralph		JANSE VAN RENSBURG Ernestus	WSU
NAIDOO Bhavani	UKZN	MASEDI Cyprian Thero		JANSEN VAN RENSBURG Julia	
TAIT Carol Louise		MCLACHLAN Iréne	US	LUYT Daniel Frederick	WITS
THOMSON Mairi	WITS	MESANI Linda		NARAINSWAMI Neeran	US
TSHABALALA Donald	WSU	MOTIA Tseliso France		SHARIF Asher	WSU
VAN STADEN Nadia		MUDENHA Enesia		VAN DER WATT Sharne	
VAN VELDEN Mia		NAWAB Faeza	WITS	<b>Diploma in Primary Emergency Care of the College of Emergency Medicine of South Africa: Dip PEC(SA)</b>	
VATHER Ashaylan	UKZN	NHLAPO Lerato Ashford	WITS	HARRIS Rhodri	
WEAR Lara Jayne		NZIMANDE Sikhumbuzo Khayelihle		PROUD Alastair	
<b>Diploma in Forensic Medicine of the College of Forensic Pathologists of South Africa – Path: Dip For Med(SA) Path</b>		ODAYAR Jasantha		ROBERTSON Caroline Helen	
DE VAAL Celeste Joannette	US	PAXTON Juliet Emily		SANDERS Megan	
DU PLESSIS Marna	UL	PROXENOS Charles John		SMITH Corné	
KOLODI Molefe Isaac	UL	RAMAGAGA Serwalo Marion		WALL Shelley Lynn	
LETEBELE Maleka Samuel	UL	ROSSOUW Lindie		<b>Fellows by Peer Review</b>	
MAKHOBABA Musa Aubrey	UP	SELLO David Gaotingwe		Dr Lorna Jean MARTIN	
MATLALA Kwena Selaki	UL	SOKHELA Simiso Mandisa		College of Forensic Pathologists	
MWALUDINDI Dixon Mchana	NAIROBI	SUTHERLAND Sandra Lee		Dr Shabnum MEER	
SEFANYETSO Mogolelwe Maria	UL	THOMAS Eileen		College of Pathologists	
<b>Diploma in HIV Management of the College of Family Physicians of South Africa: Dip HIV Man(SA)</b>		ZIKI Brian			
AMEER Saranna Amina Murad		<b>Diploma in Mental Health of the College of Psychiatrists of South Africa: DMH(SA)</b>			
ANNAMALAI Medeshni	UKZN	DOUBELL Philippe Myburgh			
		LAPORTA James Clive Hurwitz	UCT		
		MALHERBE Petrus Jacobus	UP		
		MNGADI Sithembisile Nondumiso	UKZN		
		RAMOUTHAR Reyanta			
		SCHROEDER Annemé			



## Annual Report of the Senate of The Colleges of Medicine of South Africa for the period 2010 – 2011

The last Annual Report of the Eighteenth Senate gives an account of the activities of Senate during the financial year 1 June 2010 to 31 May 2011.

The report will be presented in three sections:

- The financial statements and matters related to the appreciation of the state of affairs of the CMSA, its business and profit and loss appear on the web page. Hard copies are provided upon request.
- The annual reports of constituent Colleges, covering activities during the period under review, form part of this report, but appear as a section on its own as an extension of the report.
- A general account of the activities of Senate during the past year, which are recorded below.

### IN MEMORIAM

During the past year the President and Senate, with regret, received notification of the death of the following members:

#### Honorary Fellows

BOULTER, Patrick Stewart  
GILLINGHAM, Francis John  
HANLON, C Rollins

#### Founder

BURTON, Dudley Walton

#### Associate Founders and Associates

CORT, Alexander  
DALL, Desmond Meiring  
GRUSINER, Wolf  
HENSON, Salomon  
LE ROUX, Desmond Raubenheimer  
SEEDAT, Mohamed Ahmed  
STERN, Ferdinand

#### Fellows

CAIN, Michael Frank  
CHRYSTAL, Vivien  
CLOETE, Johannes Hermanus  
COETZEE, Louis Frederik  
CRONJÉ, Pieter Paulus  
ENGELBRECHT, Jacobus Adriaan  
GILDENHUYIS, Hein Jacobus

GOVENDER, Visvanathan  
KOTZÉ, Johannes van Zyl  
MODIBA, Mphako Charles Martin  
MOHLOMI, Mokoena Joseph  
MOTALA, Cassim  
PENZHORN, Herbert Otto  
TRUSCOTT, Andrew Garside  
WHITFIELD, Leslie Edwin  
WILLIAMS, Bryan Leonard

#### Diplomates

MVENG, Martin Biyo'o  
VELIOTES, George Demetrios

Senate extend condolences to relatives and friends who lost their loved ones.

### NEW COMPANIES ACT

The new Companies Act, 2008 replaced the Companies Act, 1973 when it came into force on 1 May 2011. Companies, including the CMSA, will be allowed two years to adapt their Constitutions, which will no longer consist of a Memorandum of Association and Articles of Association, but will now consist of a Memorandum of Incorporation (MOI) and Rules of the Company (previously the By-laws, which now become optional).

It is too early at this stage to assess the full impact that the new Act will have on the CMSA, but some important provisions that will have an effect are the following:

- The CMSA will retain its existing name, but will have to end the name with the suffix "NPC", i.e. non profit company.
- Non-profit companies will be able to choose whether they wish to have their financial statement audited or independently reviewed.
- Non-profit companies do not have to file annual financial statements with their tax returns to the Commissioner.

The College attorneys and auditors are assisting with preparation for the implementation of the provisions of the new Act, some of which will have a significant effect on certain areas of the governance of the CMSA.

### ELECTIONS FOR THE TRIENNIUM 2011 TO 2014

The first phase of the triennial elections for constituent College Councils commenced in February 2011 when nomination papers

were posted to all active members in the 28 Colleges. Nomination papers had to be returned by 22 April 2011, but the date was extended in view of the spate of public holidays at that time.

Ballot papers were posted by 31 May, with the deadline for return being 22 July 2011. The votes will be counted by scrutineers on 23 July 2011, after which the results will be announced.

The following statistics are recorded:

- Elections took place in 16 Colleges, viz:
  - College of Anaesthetists
  - College of Cardiothoracic Surgeons
  - College of Clinical Pharmacologists
  - College of Emergency Medicine
  - College of Family Physicians
  - College of Forensic Pathologists
  - College of Maxillo-Facial and Oral Surgeons
  - College of Medical Geneticists
  - College of Neurosurgeons
  - College of Obstetricians and Gynaecologists
  - College of Paediatricians
  - College of Paediatric Surgeons
  - College of Physicians
  - College of Psychiatrists
  - College of Public Health Medicine  
(also in the Division of Occupational Medicine)
  - College of Urologists
- The required number of candidates was nominated in seven Colleges, which meant that there was no election and the candidates nominated will be declared elected. The Colleges are:
  - College of Dermatologists
  - College of Nuclear Physicians
  - College of Ophthalmologists
  - College of Orthopaedic Surgeons
  - College of Plastic Surgeons
  - College of Radiologists
  - College of Surgeons
- An insufficient number of candidates was nominated in five Colleges. The candidates nominated will be declared elected and additional persons will be co-opted to fill the vacancies. These Colleges are:
  - College of Dentistry
  - College of Neurologists
  - College of Otorhinolaryngologists
  - College of Pathologists
  - College of Radiation Oncologists
- Regarding the Diplomate representatives on constituent College Councils, it is recorded that there will be an election only in the College of Forensic Pathologists where four candidates were nominated and two need to be elected.

There will be no election for Diplomate representatives in the following Colleges as either an insufficient number of candidates was nominated, or no nominations were received at all. The

candidates nominated will be declared elected and where there is a void, candidates will be co-opted to make up the required number of two. The details are as follows:

College of Anaesthetists	one nominee
College of Dentistry	no nominee
College of Emergency Medicine	two nominees
College of Family Physicians	no nominee
College of Forensic Pathologists	four nominees
College of Obstetricians and Gynaecologists	two nominees
College of Ophthalmologists	no nominee
College of Orthopaedic Surgeons	no nominee
College of Paediatricians	one nominee
College of Physicians	one nominee
College of Psychiatrists	no nominee
College of Surgeons	no nominee

The following step will be the election of constituent College presidents, secretaries and representatives on the CMSA Senate. This will take place by confidential ballot.

### **CMSA PROJECT: STRENGTHENING ACADEMIC MEDICINE AND SPECIALIST TRAINING**

Prof Zephne van der Spuy, Chairman of the Project Committee, reported that an Action Plan had been put in place with the termination of Dr Brigid Strachan's contract at the end of February 2011 and the appointment of Prof Tuviah Zabow as Project Administrator.

A second objective of the Action Plan was Advocacy and Partnership. Meetings were held with the Committee of Medical Deans, the Department of Higher Education through the Health Sciences Review Committee chaired by Professor William Makgoba, the National Department of Health, including the Minister and the Director General, and with representatives from the Treasury. In addition, there were meetings with individuals in the private sector, and in particular, those who were involved in the main hospital groups, medical services and medical schemes. There was also ongoing communication through the constituent Colleges of the CMSA with societies and associations related to various specialities.

A considerable amount of time and effort was spent on planning how to move forward in terms of the supply of specialists and sub-specialists. It was recognised that while South Africa trained doctors, they were lost for the service platform for a variety of reasons. Meetings had been taking place with the Minister of Health and other role players, where it was pointed out that unfilled registrar and sub-specialist training posts needed to be filled as a matter of urgency whilst assuring that Faculties would retain the core training staff and facilities which were assessed by the HPCSA. This would form the core of research done by the Project in the future.

Prof van der Spuy further reported that the Committee attempted to look at governance issues, that health information systems were reviewed and that Life Choice had been contracted to assist in this endeavour. This was ongoing research and ultimately a system would have to be developed for information gathering which would be universal and comparative between hospitals and provinces within South Africa.

### **HIV Project funded by Futures, through UNAIDS**

It was agreed that there would be two projects for the year. One was to develop a core curriculum and this had been accomplished with a meeting held in Durban on 15 October 2010, where Dr Catherine Orrell presented. She is currently modifying the core curriculum.

The second project was a series of HIV educational workshops for medical and healthcare colleagues around South Africa. The first workshop was arranged by the Education Committee and took place in Durban on 15 November 2010. The attendees enjoyed the interactive sessions, appreciated the update review and the input from Professor Slim Abdool Karim was very well received.

Future workshops are scheduled to take place in Cape Town, Johannesburg, Bloemfontein, Port Elizabeth and Polokwane in the coming year.

### **INTERACTION WITH THE NATIONAL DEPARTMENT OF HEALTH**

#### **Meetings**

The ongoing meetings that took place between representatives of the CMSA and representatives of the National Department of Health during the year under review, were alluded to above.

#### **Representation on the Ministerial Advisory Committee on Health Technology**

The Minister appointed the Chairman of the Education Committee, Prof Anu Reddi, to serve as a member of this Committee with effect from 1 March 2011 and in terms of the provision of the National Health Act, the appointment will be for a period of five years. No meetings took place during the review period.

### **INTERACTION WITH THE NATIONAL DEPARTMENT OF HIGHER EDUCATION AND TRAINING**

A College delegation attended a further meeting with the Health Science Review Committee under the Chairmanship of Prof William Makgoba, on 23 July 2010 and again emphasised the critical situation in relation to vacant registrar posts.

### **INTERACTION WITH THE HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA**

The CMSA is represented on a number of Boards and Subcommittees. The names of the representatives appear hereunder:

Medical and Dental Professional Board (MDPB): The President, Prof Anil Madaree.

Standards Generating Board: The President.

Postgraduate Education and Training Subcommittee (Medical) (PETM):

The Chairman Examinations and Credentials Committee, Prof Arthur Rantloane.

Postgraduate Education and Training Subcommittee (Dental) (PETD): Prof Kürt Butow, member of Senate.

As a reciprocal arrangement, the President of the Health Professions Council is invited to attend Senate meetings and other activities of the CMSA. The newly elected President, Prof Sam Mokgokong, who is also a Fellow of the CMSA in the College of Neurosurgeons, attended the Senate meeting in Johannesburg in May 2011.

### **ESTABLISHMENT OF A CMSA AUDIT, RISK AND IT COMMITTEE**

Senate is in the process of establishing an Audit, Risk and IT Committee that will undertake ongoing risk identification, assessment and monitoring across all the operational areas of its functions. The Committee will be accountable to the Executive Committee of Senate in the first instance and ultimately to Senate.

In executing its mandate, the Audit, Risk and IT Committee shall in all instances refer to and be guided by the standing policies and guidelines of the CMSA.

### **CAPACITY BUILDING AND SUCCESSION PLANNING IN THE COLLEGE OFFICES**

#### **Cape Town Office**

The permanent post of Deputy to the CEO was created in the Cape Town office. The post was developed with the understanding that the incumbent would be the understudy to the CEO and would eventually take over the position of CEO. This will ensure that there is capacity building and succession planning. Mrs Lize Trollip has been appointed to this position and commenced duties on 1 October 2010.

#### **Johannesburg Office**

The post of Senior Examinations Officer was created in the examinations office, as an understudy to the Examinations Office Manager. The creation of this additional post will ensure continuity at the top level of the examination administration. The post will be filled with effect from 11 July 2011.

In order to allow for proper planning with the enlarged staff component that the national professional examination will bring about, a five-year plan for staff will be prepared for the Johannesburg office.

#### **Durban Office**

The same principle was adopted for the Durban office, where the post designation of the Administrative Secretary was changed to that of Office Manager and a new, additional post was created that would be termed Administrative Secretary. The post was created with the understanding that the incumbent would be the understudy to the Office Manager and would in due course take over that position. The new post will also be filled early in the coming year.

### **EXAMINATION AND EDUCATION-RELATED MATTERS**

#### **The National Professional Examination**

Final confirmation is still awaited from the HPCSA that the CMSA will be the agent running this examination but in the interim, planning in terms of increasing the capacity of the administrative and other support services has commenced. A task team has been constituted

and will be looking at some of the implications of administering the national professional examination.

Quality assurance of CMSA examinations has been evaluated and the current guidelines and regulations have been revisited to ensure that the high examination standards are maintained. As part of the exercise, it has been confirmed that College examinations are inclusive in terms of participation of examiners from the different academic complexes. The recommendation is that the Deans of the Faculties of Health Sciences of the Universities be invited to attend standing committee meetings, but in particular, meetings of the Examinations and Credentials Committee, in order to participate in the development of policy.

### Selling of Property in Johannesburg and Developing new Examinations Office

The Johannesburg properties consist of three adjacent buildings – No 27 Rhodes Avenue, which is the current office block, No 25 which is rented out, and No 23 which has just been sold for R2.2 million. The latter was historically purchased for future development, but after enquiring about rezoning, it was discovered that it was a heritage site (a Frank Emily house), and that its current character had to be preserved.

Office space in the current examinations office will become inadequate with the introduction of the new professional examination, and with this in mind, Senate agreed that some of the money that will become available from the sale of No 23 Rhodes Avenue will be used to renovate and refurbish No 25, the house next to the College office block, so that it can be used as an examinations office. It is envisaged that the existing examinations office will be used as a skills laboratory.

### Fellowships awarded by Peer Review

Fellowship without examination (by peer review) is offered in exceptional cases only to carefully selected candidates. It is only awarded, *by invitation by the Senate*, to a person who:

- Holds a degree or diploma which entitles him/her to registration with the Health Professions Council of South Africa, and who is in fact so registered in the same discipline of medicine or dentistry as that in which he/she has been nominated for Fellowship by peer review.
- Has been active in the discipline for at least 10 years.
- Is resident in South Africa at the time of the award.
- Has been subjected to peer review by a formally appointed peer review sub-committee according to strict criteria determined by Senate.

The candidates listed below, were successfully considered for Fellowship by peer review during the period under review:

### College of Forensic Pathologists

MARTIN, Lorna Jean

### College of Maxillo-Facial and Oral Surgeons

BOUCKAERT, Michael Maurice Romain

KARIEM, Gilmie  
MORKEL, Jean André

### College of Pathologists

BEUKES, Catherine Anne  
MEER, Shabnum

### College of Public Health Medicine

NAIDOO, Shan

### Successful candidates, by examination

The names of candidates who pass the biannual CMSA examinations appear in each issue of *Transactions*. The results are also published on the web page.

### Dishonesty in Examinations

We are beginning to see a trend of contravention of examination regulations, and with this being on the increase, Senate adopted certain measures that will assist in curtailing the problem and protecting the integrity of CMSA examinations.

There was general agreement at Senate that the constituent Colleges wished to see sterner sanctions being imposed on candidates who were found guilty of transgressing examination regulations and when a candidate was recently caught using a personal digital assistant (PDA) which contained data that would have assisted him in the examination, the candidate was barred from writing any CMSA examination for a period of five years.

### Medal Recipients

Recipients of medals during 2010/2011 were:

Durban: 14 October 2010

**Abbott Medal:** FCA(SA) Part I  
Natasha Amod

**Hymie Samson Medal:** FCA(SA) Part I  
Gareth David Fowler

**Janssen Research Foundation Medal:** FC Derm(SA) Part I  
Mahendran Perianathan Moodley

**Neville Welsh Medal:** FC Ophth(SA) Part I  
Sadiah Goolam  
Yavini Reddy

**Rhône-Poulenc Rorer Medal:** FC Rad Diag(SA) Part I  
Matthew Goodier

**Walter G Kloeck Medal:** Dip PEC(SA)  
Swasthi Singh

Johannesburg: 19 May 2011

**Peter Gordon-Smith Medal and Book Prize:** FC Derm(SA) Part II  
Vanessa Lapiner

**Neville Welsh Medal:** FC Ophth9SA) Part I  
Lara Sandri



**Novartis Medal:** FC Psych(SA) Part II

Catherine Muringi Kariuki

**Rhône-Poulenc Rorer Medal:** FC Rad Diag(SA) Part I

Matthew David Goodier

Temba Christopher Sikwila

**Lionel B Goldschmidt Medal:** FC Urol(SA) Final

Amir David Zarrabi

Bradley Ryan Wood

**Eugene Weinberg Medal:** Dip Allerg(SA)

Debbie Ann White

**Walter G Kloeck Medal:** Dip PEC(SA)

Anna Margaretha Carstens

As medallists are allowed to receive their awards at subsequent ceremonies, some of the recipients listed above may have been award winners from an earlier year.

**College of Paediatric Surgeons Founders Medal**

The medal was endowed by the South African Association of Paediatric Surgeons in honour of Professors Michael Dinner, Sidney Cywes and Robert Mickel, the first Professors of Paediatric Surgery in South Africa and will be awarded to candidates who achieve outstanding results in the final Fellowship examination of the College of Paediatric Surgeons of South Africa.

**Accreditation of Training of Foreign Candidates**

Senate agreed in principle that the Part I examinations of the CMSA would be open to all foreign candidates, not only South Africans (particularly looking at the African Colleges). For organisations outside South Africa there would have to be an accreditation process commencing with a formal application to the CMSA. The individual constituent Colleges would have to review the relevant programmes which, in the first instance, should include both documented evidence curricula, training programmes, facilities and a site visit. Accreditation would last for four years, after which the institute would need to be re-accredited.

Depending on the strength of the training programmes, four years of training would be accepted. Conversely, foreign candidates whose training was not fully up to standard would need to train in a South African institution for a further two years. Foreign graduates would be required to meet the respective College regulations.

**Accreditation of Hospital Posts**

The following hospital posts were accredited during the past year:

**Dip HIV Man(SA):**

George Regional Hospital

**Dip PEC(SA):**

Bloemfontein Medi-Clinic

Cape Town Medi-Clinic

Ceres Hospital

Constantiaberg Medi-Clinic

Durbanville Medi-Clinic

Hoogland Medi-Clinic

Howick Private Hospital

Kimberley Medi-Clinic

Knysna Provincial Hospital

Medforum Medi-Clinic

Milnerton Medi-Clinic

Nelspruit Medi-Clinic

Pietermaritzburg Medi-Clinic

Sandton Medi-Clinic

Trichardt Medi-Clinic

Vergelegen Medi-Clinic

Windhoek Medi-Clinic

Worcester Hospital

**H Dip Surg(SA):**

Polokwane/Mankweng Hospital Complex

**Approved sub-specialty Regulations****College of Paediatricians:**

Cert Dev Paed(SA)

Cert Cardiology(SA)

Cert Pulmonology(SA)

Cert Nephrology(SA)

Cert Critical Care(SA)

Cert Neonatology(SA)

Cert Paediatric Neurology(SA)

Cert Gastroenterology(SA)

Cert Clin Haem(SA)

Cert Rheumatology(SA)

**College of Emergency Medicine:**

Cert Crit Care(SA)

**Examiners' Workshops**

As alluded to in the previous report, workshops, with Prof Cees van der Vleuten as speaker, were held in November 2010 in Cape Town, Durban and Johannesburg. Topics covered were: "How can we improve the assessment of clinical skills, knowledge and attitudes for specialist qualification?" and "The validity of work-based assessment lies in its users: a workshop on work-based assessment procedures".

As suggested at these workshops in November, the topic of the next workshops (scheduled for September 2011 in Johannesburg, Durban and Cape Town) will be "Standards setting", run by Dr Katharine Boursicot, Reader in Medical Education and Head of Assessment at St George's University London (SGUL). Her main research interests are standard setting, the assessment of clinical competence and professionalism.

**CMSA WEBSITE**

The upgraded and modernised College website <http://www.collegemedsa.ac.za> will go live soon and will, amongst other improved technologies, allow candidates to enrol for College examinations online.

## SCHOLARSHIPS AND AWARDS

### Phyllis Knocker/Bradlow Award: 2010

Dr Carla Kotzé (FC Psych(SA) 2007) was awarded the prize for her research into "Homicide-suicide: Contributing psychiatric factors based on psychological autopsies."

### YK Seedat Research Scholarship

In 2009, Professor Y K Seedat graciously donated the proceeds from the sale of his property situated at 10 Glastonbury Place, Umbilo, to the CMSA for a research scholarship. Interest will be allowed to accumulate for a further year before a call for applications is made to medical scientists, registrars, senior registrars and junior consultants under the age of 50 years, with the proviso that the research will be undertaken in an appropriate department at a South African medical university. One person only will be awarded the Scholarship at any given time.

Submission of a full budget for the funding required for the project will be a prerequisite, and preference will be given to an applicant whose protocol has been approved for a doctoral thesis. Consideration will be given to renewing the Scholarship in part, or in full, depending on the success of the research accomplished and on funds available.

### K M Browse Scholarship: 2010/2011

A full account of the award winners was given in the previous report. No award will be made in the immediate future to allow for funds to accumulate.

### Maurice Weinbren Award in Radiology: 2011

No application was received despite extensive advertising of the availability of the award.

### R W S Cheetham Award: 2011

Similarly, no application received.

### M S Bell Scholarship: 2010

In future, the scholarship will be awarded annually for the best presentation by a registrar or registrars at a national psychiatric congress. The award will be presented at a national congress of psychiatry and the magnitude of the award will be decided by the Honorary Treasurer and Finance and General Purposes Committee, depending on the annual interest accrued.

The recipient of the 2010 award was Dr Carina Marsay.

## RESEARCH

It is envisaged that the CMSA will become more involved in clinical research and Prof Bongani Mayosi, member of the Senate who is involved in the Academy of Science of South Africa, and who is currently also Chairperson of the National Health Research Committee, will be heading this initiative.

## EDUCATIONAL PROGRAMMES

### MPS Workshops

These "Mastering your risk" workshops, targeted at family physicians and consultants, are run under the auspices of MPS. The presenters

are family physicians or consultants who have a specific interest in communication skills and have undertaken formal communication skills training with MPS. The outcome of the workshops in other parts of the world have led to a substantial decrease in litigation.

The first pilot workshop was held in Durban on 17 February 2011 and will be followed by workshops in Johannesburg and Cape Town.

### Educational Development Programme in Mthatha

The last two scheduled visits for 2010 were unfortunately cancelled but were rescheduled for 2011, as follows:

#### 10-12 February 2011

Neurology and Anaesthesia Update 4

Professor Dali Magazi, University of Limpopo, presented updates in Neurology and Dr Sudha Bechan, UKZN presented on Anaesthesia.

### Robert McDonald Rural Paediatric Fund

No applications were received for funding. The College of Paediatricians is urged to make use of this fund for their educational programmes.

## Lectureships

### Arthur Landau Lecturer for 2010

Professor Sarala Naicker delivered her lecture "The changing epidemic of chronic kidney disease" in Johannesburg, Pretoria, Durban and Mthatha during the second half of 2010.

### Arthur Landau Lecturer for 2011

Professor Yosuf Veriava was appointed as the Arthur Landau lecturer for 2011 and he will give his lectures during the second half of 2011. The title of his lecture will be "A pressurised journey – despair or hope?"

### Francois P Fouché Lecturer for 2010

Dr Clive Duncan from Canada lectured on "Just a thought: but see it through" on 30 August 2010 at the SA Orthopaedic Congress held in Port Elizabeth.

### JC Goetsee Lectureship in Family Medicine and KM Seedat Memorial Lecture

A Family Physicians Congress will not be held in South Africa during 2011. An appointment for both these lectureships will consequently be made for 2012.

### Margaret Orford Memorial Lecture

A lecturer was not appointed due to lack of funding.

### The JN Jacobson and WLS Jacobson Annual Lecture

Similarly, no lecturer was appointed for 2011.

## CPD Accreditation

Income from CPD accreditation amounted to R17 785.00 during the 2010/2011 financial year.

## J C Coetzee Projects (Obstetrics and Gynaecology)

### University of Cape Town

#### East London and Port Elizabeth

The Department of Obstetrics and Gynaecology, University of Cape Town, continued with their existing outreach activities to the Eastern Cape with visits by Departmental consultants on various occasions. These visits involved presentations, meetings and ward rounds. Details of the lecturers and topics covered, are summarised below:

2 – 4 June 2010

Dr T Mitande: Gynae snippets

25 – 27 August 2010

Prof Z van der Spuy: Postpartum collapse  
Ongoing dilemma for the obstetrician

Dr L Schoeman: Foetal distress – an update

29 September – 1 October 2010

Dr N Mbatani: Gynaecology case presentations

Dr A Muse: Thyroid disease in pregnancy

20 – 22 October 2010

Dr T Horak: Group A strep

Dr L Walmsley: Prophylactic oophorectomy

17 – 19 November 2010

Prof S Fawcus: Surgical management of post partum haemorrhage

Dr V Stefan: Foetal monitoring in labour: We need a paradigm shift

### Zithulele Hospital

Prof G B Theron visited Zithulele Hospital in a deep rural area of the Eastern Cape from Monday 21 September to Friday 1 October 2010. Daily ward rounds were conducted, followed by educational discussions with all the resident doctors and registered nurses working in maternity wards. Discussions included recent perinatal and maternal deaths. A perinatal death meeting was also attended at the neighbouring Madwaleni Hospital. Help was provided on management of complicated cases and demonstration of surgical techniques.

### George Hospital

Dr N Mbatani, Dr S Jeffery and Dr L Rodgers visited George Hospital during June and August 2010.

### University of Pretoria

Lecturers from the University of Pretoria were involved in three refresher course meetings which were attended by a total of 80 family physicians.

The details of these meetings are:

#### Polokwane

3 June 2010

Prof L Snyman: Contraception in the older woman

Dr Z Sheik: Obstetric emergencies  
Post partum sexuality  
Dr Z Abdool: Post menopausal hormone therapy  
Prof G Dreyer: ARV therapy in pregnancy  
Dr Z Sheik: The vulva as a medico-legal witness  
Prof L C Snyman: Overactive bladder  
Dr Z Abdool: Cervix cancer and vaccination  
Prof G Dreyer: Informed consent

#### Rustenburg

12 August 2010

Dr P S Pillay: Recurrent miscarriages  
Vitamin supplementation in pregnancy

Prof L Snyman: Breast cancer screening  
The vulva as a medico-legal witness:  
breaking bad news

Prof P Macdonald: HIV update  
Millennium development goals:  
how are we doing?

Dr R Makwela: HPV vaccines and treatment of CIN lesions  
Abnormal uterine bleeding

#### Bronkhorstspuit

14 October 2010

The following topics were presented by Prof L Snyman, Dr E-M Farrell and Dr R Joubert respectively:

First trimester screening for congenital abnormalities  
Abnormal Alfa-feto protein  
Dopplers in pregnancy  
Breast cancer screening  
The vulva as a medico-legal witness  
Breaking bad news  
Investigation of amenorrhoea  
Poly Cystic Ovarian Syndrome  
Infertility: What the GP should know

#### Nelspruit

3 May 2011

An ultrasound workshop was presented by Drs H Lombaard and N du Plessis, with Dr L Pistorius visiting from The Netherlands as a guest presenter. The programme for the day was as follows:

L Pistorius: Basics: technical aspects and first trimester  
H Lombaard: Biometry, evaluation of placenta, umbilical cord and amniotic fluid  
N du Plessis: Foetal anatomy and common anomalies  
L Pistorius: Doppler ultrasound, intra-uterine growth restriction and foetal anaemia

There were hands-on sessions in which the 22 doctors who attended, participated.

### CMSA MEMBERSHIP

Statistics on the active membership of the CMSA appear in the annual financial report, but as a matter of interest, the number of

members who registered since registration of the first Founder, the late Dr Solomon Abel in 1952, totalled 17 414 as at 31 May 2011.

### Honorary Fellowship

Election to Honorary Fellowship is the highest honour the CMSA can bestow and the award is made:

- To recognise achievement of the highest order in fields of endeavour within the ambit of, and contributory to the objectives of the CMSA.
- To honour through the person of a Senior Office Bearer, a foreign Sister College or equivalent institution with which the CMSA has a mutually beneficial association.
- To acknowledge services to the CMSA of an exceptionally high order.
- To recognise achievement of the highest order in their fields of endeavour by persons in South Africa or globally.

Three persons were admitted to Honorary Fellowship during the year under review:

#### October 2010

Prof Alan Maryon Davis: College of Public Health Medicine (CMSA)

#### May 2011

Prof Lizo Mazwai and Prof Andries Stulting were both admitted to Honorary Fellowship of The Colleges of Medicine of South Africa for the exceptional roles that they played in the CMSA for many years.

### Fellowship *ad Eundem*

Fellowship *ad eundem* is intended as a rare honour to medically or dentally qualified persons who may or may not be Fellows of the CMSA, but who merit very special recognition for contributions different from those of an Honorary Fellow. The award is intended to recognise and acknowledge:

1. Exceptional contributions to the CMSA and/or to one of the constituent Colleges.
2. Exceptional attainments in the medical or dental professions especially in the discipline in which the Fellowship *ad eundem* is to be awarded.

Prof Jack Moodley received admission to Fellowship *ad eundem* of the College of Obstetricians and Gynaecologists.

### Associates

Associateship of the CMSA is offered to medical or dental practitioners whose professional standing and interest and activities are considered to be of such nature that it will strengthen the CMSA and the constituent College concerned. The incumbents must be registered with the Health Professions Council of South Africa and hold a degree or diploma considered comparable to a Fellowship of the CMSA.

In the situation where new Colleges are established, temporary Associateship is considered for those nominated to form the Council of the new College, until such time (within 24 months) as their registration has been regularised with the HPCS. At that point they will become full Associates.

The following registered as Associates during the year under review:

#### College of Clinical Pharmacologists

COHEN, Karen  
MUGABO, Pierre

#### College of Pathologists

HARDIE, Diana Ruth (Virology)

#### College of Public Health Medicine

VAN ZYL, Nicolaas Rudolph Johannes

### Lost Members

Despite ongoing efforts to trace "lost members", there are still persons whose whereabouts are unknown. Information that can assist the office will be appreciated and must be e-mailed to members@colmedsa.co.za

## CMSA PROPERTIES

### Development of Durban Property

As reported earlier, the fundraising drive that was launched to develop the College property in Durban has not met with the anticipated success. The aim was to raise R10 million to commence building operations, but pledges amounting to approximately R3.5 million only have been received. The architect has now been approached with the directive to submit draft plans and a cost structure that would allow the first stage of building operations to commence with the money currently available. As more funds become available, building operations could move into the second and third phase. A functional office complex was identified as the first priority.

### Cape Town Property (Rondebosch)

The City Council credited the rates account of the CMSA with R80 138.31 as a rebate for the year 2010/2011.

## COLLABORATION AND CO-OPERATION WITH SISTER COLLEGES AND ACADEMIES

### African Colleges

There was overwhelming support for the increase of dialogue between the CMSA and African Colleges, as initiated by the CMSA President, Prof Anil Madaree. Moving into the next phase, it was agreed that there should be a clear plan, formulating objectives and setting timeframes.

A summit of Presidents of Colleges in Africa was proposed which would provide a clear framework for co-operation to guide the respective colleges in their interactions. In order to prepare for this, the CMSA asked its standing committees to identify the various areas of co-operation.

### International Colleges and Academies

There was also very positive feedback to a letter addressed by the President to the Presidents and Masters of International Colleges and Academies, expressing the wish to foster closer links. The President thought it would have significant mutual benefit in helping the



institutions align themselves to international standards and trends and, in his letter, alluded to areas of interaction which included: training and syllabi, examination format and assessment, medical and healthcare standards, attendance at meetings and graduation ceremonies, joint meetings, etc.

The enormous support received in response to both these initiatives of Prof Madaree, culminated in the CMSA planning to host a joint meeting of College and Academy Presidents, including the Presidents of African Colleges, during the first quarter of 2012.

### **College Attendance at Meetings of Sister Colleges and Academies**

The following international meetings were attended by representatives of The Colleges of Medicine of South Africa or its constituent Colleges:

#### **International Liaison Committee of Presidents of Colleges of Pathologists (ILCP) held in Hong Kong in September 2010**

Representative: Prof Simon Nayler, President College of Pathologists.

#### **Royal College of Physicians and Surgeons of Canada: International Conference on Residency Education held in Ottawa, Canada, from 23 – 25 September 2010**

Representative: Prof Anil Madaree, President (CMSA)

#### **American College of Surgeons: 96th Annual Clinical Congress, Washington, DC: 3 – 7 October 2010**

Representative: Prof Anil Madaree, President (CMSA)

#### **West African College of Physicians Scientific Conference held from 6 – 12 November 2010**

Representative: Prof Gboyega Ogunbanjo, Senior Vice President.

#### **Hong Kong Academy of Medicine, Academy of Medicine of Malaysia and Academy of Medicine, Singapore: First Tripartite Congress held in Hong Kong from 12 - 14 November 2010**

Representative: Prof Anil Madaree, President (CMSA)

#### **COSECSA (College of Surgeons of East, Central and Southern Africa): 11th Anniversary and Meeting held in Kampala, Uganda from 1 – 3 December 2010**

Representatives: Prof Anil Madaree, CMSA President and Prof Del Kahn, President - College of Surgeons

College of Surgeons, as invited examiner

#### **Royal Australasian College of Surgeons: Annual Scientific Congress held in Adelaide from 3 – 6 May 2011**

Representative: Prof Anil Madaree, President (CMSA)

#### **Global Pediatric Education Forum held in Frankfurt, Germany from 11 – 14 May 2011**

Representative: Prof Haroon Saloojee, President College of Paediatricians.

### **MEETING IN SOUTH AFRICA**

#### **College of Surgeons Meeting/Session held during the Association of Surgeons Meeting in Cape Town in April 2011**

There was a joint meeting with the South African Hepato-Pancreatic-Biliary Association of South Africa and European Hepato-Pancreatic-Biliary Association where a session was allocated to the College of Surgeons (CMSA). Presidents from sister Colleges in Europe, America and Africa were invited to participate.

#### **Joint Conference College of Physicians (CMSA) and Royal College of Physicians of London to be co-hosted by Durban and Bloemfontein in 2013**

The date of this proposed joint meeting, to be hosted by the College of Physicians, was postponed to 2013.

### **ACKNOWLEDGEMENTS**

As this is the final report of the Eighteenth Senate, it is fitting that the key role played by honorary officers, examiners, trustees, Councillors of constituent Colleges and committee and sub-committee members be acknowledged.

Participants in the various educational projects of the CMSA during this tenure of office of Senate are also thanked for devoting of their valuable time to this important aspect of College activities.

Finally, it is always a great pleasure for Senate to acknowledge the essential role that the full-time staff play in the day-to-day running of the College. This is recorded with much appreciation.

**Bernise Bothma**  
CEO

# Annual Reports of the Constituent Colleges

## 2009 – 2010

### COLLEGE OF ANAESTHETISTS

It is my pleasure to report on the activities of the College of Anaesthetists for the year under review. This being the last report from this council's term of office, I wish to take the opportunity to thank fellow Councillors for their service to our College in this triennium ending October 2011. Challenges were many and varied, but Council could always be relied on to find a resolution.

The following are highlights.

#### Activities

The College held its third Annual General Meeting on the back of that of the South African Society of Anaesthesiologists (SASA) held on 27<sup>th</sup> February 2011 at the Sandton Convention Centre in Johannesburg. This arrangement reflects the continued and close cooperation between our College and the SASA. Two issues in particular arising from the President's report were discussed at length. One involved the options for growing membership of our College and the Australian model was supported as worth considering. The second addressed the vexed question of recompense for examiners and convenors of examinations. The idea of a subscription fee remission was proposed as an option to be investigated, and this will be passed on to the next College Council.

#### Examinations

The October 2010 examinations were in some respects a huge cause for concern, and this was especially true of the FCA(SA) Part Two examinations which returned a pass rate of 43%. The results were subjected to an extensive analysis and review, the likely problems identified and remedies prescribed. That notwithstanding, the primary examinations still had outstanding performances and medal recommendations and awards were made.

#### Examiner Updates

Workshops were held for FCA(SA) I and II examiners and trainers, with the focus mainly to align current teaching and assessment with the CMSA's revised examination policies and the HPCSA's new regulations for specialist registration. Feedback from both these activities was extremely positive.

#### Policy Decisions

In line with recommendations of the Examinations and Credentials Committee on reciprocity of examinations, the Council of the College of Anaesthetists resolved at its October 2010 meeting to accept the MMed Primary examination for entry to the FCA(SA) Part II

examination. This dispensation will however be applicable only to candidates who commenced specialist training on 1 January 2011.

#### Honorary Awards

The latest nominee to Honorary Fellowship of the College of Anaesthetists is Prof John Sear from Oxford. He will receive his award at a future date to be confirmed.

Lastly, our task as council would have been significantly more difficult if it were not for the assistance and support of the different offices of the CMSA. Thanks and appreciation to everyone.

**Prof L J A Rantloane**

**PRESIDENT**

### COLLEGE OF CARDIOTHORACIC SURGEONS

For the College of Cardiothoracic Surgeons the year June 2010 to May 2011 was distinguished only by refinements in the format of the Fellowship examination. The customary clinical examination of patients was replaced by 'real life' case scenarios from prospective or past actual case records. Put plainly, patients were not used – a major advantage for very obvious reasons. Furthermore, accurate blue-printing of the syllabus was made simply possible. Rather than evaluating history-taking and examination technique, i.e. the eliciting of symptoms and signs, interpretation of clinical data and management strategies were tested, making objectivity and uniformity an easier and simpler process.

On another matter, it was brought emphatically to the attention of Councillors (including Heads of academic units) that trainees entering programmes as of January 2011 will require three components for registration as specialists with the HPCSA :

- Formative assessment
- A scientific dissertation
- A final summative examination by the CMSA, and in our case, the FC Cardio(SA).

The weighting, sequence and nature of the acquisition of these components require further deliberation.

**Prof A Reddi**

**PRESIDENT**

### COLLEGE OF CLINICAL PHARMACOLOGISTS

HPCSA supported the application for Clinical Pharmacology to be accepted as a specialty, but concerns were raised by the Director

General of Health on the possibility of scope of practice for Clinical Pharmacology encroaching on that of the Pharmacists. An explanatory letter was compiled (7 February 2011) to comment on these concerns. We understand that the minister has signed approval and we are awaiting promulgation of this in *The Government Gazette*.

### Membership

Prof M R Jobson (Faculty of Pharmacy, Rhodes University) was nominated as Associate of the College of Clinical Pharmacologists.

### Examiners Workshop

The workshop in Johannesburg was attended by Prof E Osuch.

### Annual General Meeting

The AGM of the College of Clinical Pharmacologists was held on 5 of October 2010, during the Annual Congress of the South African Society for Basic and Clinical Pharmacology (SASBCP) and the Toxicology Society of South Africa (TOXA) in Cape Town. The meeting was attended by Profs G Maartens (President), E Osuch (Secretary), B Rosenkranz, O Greeff and A Walubo.

The following matters were discussed:

#### *Registration of Clinical Pharmacology as Speciality (MMed) and Registrar Posts*

The only way that the discipline will grow is to get registrar posts for Pharmacology. UCT have three registrar posts filled and approval for three more. HPCSA have already approved registrar post allocations for Stellenbosch University, Department of Medicine, Division of Pharmacology. The Department of Pharmacology and Therapeutics, Limpopo University, Medunsa Campus is in the process of obtaining accreditation from HPCSA to approve registrar posts and to be recognised as a teaching department for the purpose of specialist education and training in Clinical Pharmacology. Currently, two MO (Clinical Pharmacology) posts in the Dr G Mukhari Hospital are filled, but they are still waiting for the number from HPCSA for these to be converted into registrars posts.

#### *Portfolio and Syllabus*

The portfolio for registrars was proposed and is on the website. The syllabus is considered to be sufficient by CMSA, but an HIV syllabus needs to be included.

#### *Training of Registrars*

An exchange programme needs to be developed so that the students can have exposure to different activities such as the Poisoning Centre at Tygerberg Academic Hospital.

#### *"Grandfather Clause"*

There are a number of medical practitioners with appropriate experience and training to allow registration as a specialist clinical Pharmacologists. It is necessary that this process be facilitated in order to develop the discipline. The sub-committee of the HPCSA will decide on registration, hopefully with input from CCP. The window of registration under the grandfather clause will be five years.

**Prof E Osuch**  
**SECRETARY**

## COLLEGE OF DENTISTRY

During the past year, the College of Dentistry has continued with their efforts to refine the postgraduate dental curricula and to gain feedback from all four of the teaching universities to try to standardise all of the courses offered. The proposed diploma course in Implantology is presently being revised to encompass only the restorative aspects of Implantology as the College of Maxillo-Facial and Oral Surgery is planning to introduce their own diploma course in the surgical aspects. This is to ensure that there will be a clear distinction between the two diplomas on offer.

During 2010, there was a concerted drive to increase the membership of the College, both by proposing names of suitable colleagues to become Associates, and by encouraging postgraduate students to write the College examinations. This has allowed us to increase our pool of examiners and to ensure that they are representative of all four universities. It is hoped that the newly elected examiners will bring a fresh approach to the College and stimulate more candidates to register in the future. As this first group of Associates are all attached to a university teaching post, the Council plans to continue with their membership drive and to include specialists from the private sector as well. The aim is to include specialists from all the disciplines and regions in South Africa to ensure that all the branches of dentistry are more fully represented in the future. Nine new specialists were appointed as Associates.

One candidate successfully passed the FCD(SA) in orthodontics.

There were problems with nominating names of members who were willing to stand in the upcoming elections. We were not able to meet the minimum required number of candidates and as such, no elections will take place in 2011. I hope that with the addition of the new Associates this situation will improve in the next round of elections in 2014.

**Prof L M Sykes**  
**PRESIDENT**

**Dr R A Chamda**  
**SECRETARY**

## COLLEGE OF DERMATOLOGISTS

### Examinations

Since the last annual report we have had the following successful candidates in the FC Derm(SA) examinations.

#### August/October 2010

##### Part I

Dr Petunia Dhlamini  
Dr Nomphele Gantscho  
Dr Mantlekoane Francinah Monyemangene  
Dr Claudia Khensani Ngobeni

##### Part II

Dr Sarvesh Jaikarun  
Dr Vanessa Lapiner  
Dr Keneiloe Elsa Mathekga  
Dr Rakesh Newaj  
Dr Lehlogonolo Nkosi

The Peter Gordon-Smith medal was awarded to Dr Vanessa Lapiner for her excellent results in the FC Derm(SA) Final.

### March/May 2011

#### Part I

Dr Elisa Agaba  
 Dr Anit Bonthys  
 Dr Charlotte Matete Mathobela  
 Dr Levashni Naidoo  
 Dr Mamello Leah Ndumo  
 Dr Lenice Christine Nel

#### Part II

Dr Nokubonga Khoza  
 Dr Lushen Pillay

A portfolio (logbook) for Dermatology trainees has been posted on the CMSA Website. All new Registrars will have to fill in the details of all their teaching and learning activities in the portfolio. Our college has not yet decided on a uniform way to use this portfolio. Each university department will modify and use it to train their Registrars and will use it to decide when the Registrar is eligible for the FC Derm(SA) final examination. Currently, only a **Registrar who has been in a training post for a minimum of six months** will be permitted to write the FC Derm (SA) Part I.

It is now widely accepted that all Registrars will have to pass the FC Derm(SA) Part II **plus** get an MMed from their individual Universities to be registered as specialist Dermatologists. As there is no mutual recognition of the primary MMed (university based) examinations and FC Derm(SA) Part I examinations, all Registrars will have to pass the full MMed(Derm) from each individual university to get exemption for Part I of the FC Derm(SA).

The universities that did not have an MMed examination will have to urge their Registrars to conduct research and get an MMed degree from their university to practice as Dermatologists in South Africa. All specialities have to abide by these HPCSA rules.

### Council Election for the Triennium 2011 to 2014

Sufficient nominations for the new Council were received.

#### Nominees:

ABOBAKER, Jamila  
 KGOKOLO, Cordelia Mokganxetsi  
 LEHLOENYA, Rannakoe Joseph  
 MOCHE, Mohlabé John  
 MODI, Deepak  
 MOTSWALEDI, Mojakgomo Hendrick  
 SINGH, Rajendrakumar  
 TODD, Gail

Since this is the number required, there will be no election. However, the new Councillors will be required to elect their President, Secretary and Senate representatives in due course.

### Prof J Aboobaker PRESIDENT

## COLLEGE OF EMERGENCY MEDICINE

As the current College triennium draws to a close, it is a great privilege to present the seventh Annual Report of the College of Emergency Medicine. The discipline of emergency medicine continues to grow from strength to strength, as reflected in the following activities and achievements.

### Elected Councillors (2008 – 2011)

Dr Walter Kloeck (President and Senate Representative)  
 Dr Roger Dickerson (Secretary)  
 Dr William Lubinga (Senate Representative)  
 Dr Michael Wells  
 Dr George Dimopoulos  
 Dr Caryn Frith (Diplomate Representative)  
 Dr Nicola Rains (Diplomate Representative)

### University Representation

Six South African Medical Universities offer post-graduate registrar training in emergency medicine. Representatives of all six Universities were elected or co-opted onto the Council of the College of Emergency Medicine during the 2008 – 2011 triennium:  
 Professor Lee Wallis – Universities of Cape Town and Stellenbosch  
 Professor Efraim Kramer – University of the Witwatersrand  
 Professor Andreas Engelbrecht – University of Pretoria  
 Dr William Lubinga – University of Limpopo  
 Dr Pravindas Hargovan – University of KwaZulu-Natal

The University of Botswana has recently established a post-graduate emergency medicine training programme. This programme is currently being evaluated by our College, with a view to assisting in the training and evaluation of their candidates.

Our College actively pursues a policy of close co-operation and consensus between all major academic institutions involved in the training and provision of emergency care, a goal which is essential for the uniformity and development of our relatively new specialty.

### Diploma in Primary Emergency Care (DipPEC(SA))

To date, a total of 531 candidates have successfully obtained the Diploma in Primary Emergency Care (Dip PEC(SA)) qualification since the CMSA first introduced the examination in 1986.

The Regulations for the Dip PEC(SA) have been revised, allowing the Diploma examination to be more accessible to all medical practitioners with an active interest and involvement in emergency care, and not only those based in selected casualty and emergency departments. Doctors based at any hospital that is accredited by the HPCSA for intern training, as well as numerous private hospitals, are now able to submit a comprehensive "Portfolio of Learning" in support of their application to write the examination.

The syllabus for the Diploma has also been revised, with less emphasis on basic sciences and greater emphasis on clinical and environmental aspects of emergency care. A formal resuscitation skills assessment has been added to the OSCE component of the examination, further enhancing the practical competence of successful candidates.



Many thanks are extended to our Diplomate representatives, Dr Caryn Frith and Dr Nicky Rains, for revising and updating this exciting Diploma.

Congratulations are extended to the following two medal recipients for the Dip PEC(SA) examination in 2010:

Dr Bianca Visser - Campbell MacFarlane Medal for the best candidate in the practical component of the Dip PEC(SA) examination

Dr Anna Carstens - Walter Kloeck Medal for the best overall candidate in the Dip PEC(SA) examination

### Higher Diploma in Emergency Medicine

The College of Emergency Medicine will be introducing a Higher Diploma in Emergency Medicine. The Higher Diploma will be open to candidates who have held the Diploma in Primary Emergency Care (or equivalent) for at least two years, and is intended to empower medical practitioners actively involved in the practice of emergency medicine to supervise and train junior doctors in the skills and procedures required to practise safe and effective acute medical care.

### Fellowship of the College of Emergency Medicine (FCEM(SA))

The College of Emergency Medicine now has 21 candidates who have successfully passed the FCEM(SA) Part 2 Examination and are registered as specialists in emergency medicine. In addition, 50 candidates have successfully completed the FCEM(SA) Part 1 examination. We wish them well as they prepare for the finals!

Congratulations are extended to Dr Ian Symons, being the first recipient of the MacFarlane Memorial Medal for the best overall candidate in the FCEM(SA) Part 1 examination. Well done!

Training in emergency ultrasonography has become a compulsory entry requirement for candidates attempting the FCEM(SA) Part 2 examination as from July 2010, in line with international trends advocating the importance of this valuable diagnostic tool in emergency care. Dr Mike Wells and Dr Stevan Bruijns are thanked for the extensive preparatory documentation provided in this regard, and for agreeing to co-ordinate training programmes and certification in emergency ultrasonography countrywide.

### Sub-Specialty in Critical Care

It is pleasing to note that the Specialty of Emergency Medicine has been accredited by the HPCSA as a base specialty for sub-specialist training in Critical Care.

The College is pleased to announce that Dr Roger Dickerson, Head of the Emergency Department at Chris Hani Baragwanath Academic Hospital, is the first Emergency Medicine Specialist in South Africa to obtain the Sub-Specialty Certificate in Critical Care of the College of Emergency Medicine.

### Sub-Specialty in Paediatric Emergency Medicine

In order to raise the standard of emergency care for children presenting to Emergency Departments in South Africa, the College is in the process of proposing the creation of a Sub-Specialty in Paediatric Emergency Medicine, in line with international trends in this regard.

### Emergency-Related Short Courses

A comprehensive and updated list of emergency-related short

courses offered in South Africa is available on the CMSA Website to assist candidates in their preparation for College examinations, as well as providing a useful resource for all post-graduate doctors practising in South Africa.

As a membership benefit, a discount of R100.00 is offered to all paid-up members of the CMSA on many of the listed courses. The College extends its appreciation to all these training organisations for their continued support, and encourages College members to take advantage of this offer.

### Emergency Medicine Society of South Africa

It is very pleasing to note that many recipients of the Dip PEC(SA) have joined the Emergency Medicine Society of South Africa (EMSSA), adding strength to the growing voice of Emergency Medicine in South Africa. Medical practitioners with an interest in emergency medicine are encouraged to join EMSSA and benefit from the wide range of activities, practice guidelines, congresses, courses and learning opportunities that EMSSA has to offer. Details are available from the EMSSA website [www.emssa.org.za](http://www.emssa.org.za).

### African Federation of Emergency Medicine

Several Universities in other parts of Africa, such as Botswana, Malawi and Ghana are developing formal emergency medicine training programmes and have established an African Federation of Emergency Medicine. Our College is fully supportive of this venture and is actively involved in assisting in this regard.

### Membership of the College of Emergency Medicine

Following the establishment of the College of Emergency Medicine of South Africa in May 2004, we are pleased to report significant growth in all our membership categories (43 Fellows, nine Associates and 531 Diplomates).

### Registered Emergency Medicine Specialists in South Africa

The geographical location of HPCSA-registered specialists in emergency medicine was analysed by our College, as part of the CMSA's project to strengthen academic medicine and specialist training in South Africa. Our findings indicate a desperate shortage of specialist care in many parts of the country:

- Western Cape – 30
- Gauteng – 26
- KwaZulu-Natal – five
- Mpumalanga – two
- Limpopo – one
- Northern Cape – one
- Eastern Cape – 0
- Free State – 0
- Northwest – 0
- Overseas – six

The College of Emergency Medicine is proud of all medical practitioners who strive to raise the practice of emergency care in our country, and is pleased to be able to honour and reward colleagues who achieve excellence in this vast discipline.

**Dr W G J Kloeck**  
**PRESIDENT**

**Dr R Dickerson**  
**SECRETARY**

## COLLEGE OF FAMILY PHYSICIANS

A strategic decision was taken in 2009 to include representatives of the eight Departments of Family Medicine in South Africa on the CFP Council. This decision has paid dividends and has contributed to substantial progress in all matters relating to postgraduate training programmes and assessments in Family Medicine.

Family Medicine was gazetted as a specialty on 17 August 2007. Since then all eight Departments of Family Medicine have participated in the formal four-year Registrar training programme. We therefore eagerly await our first Graduates and Fellows from this programme in 2012.

During the period 1 June 2010 to 31 May 2011, the Council met once, on 17 May 2011. Deliberations during the year focused mainly on blue-printing the FCFP(SA) examinations and preparations for forthcoming examinations, as well as finalising the templates for the proposed Higher Diploma in Family Medicine. It is anticipated that the first examination for this Higher Diploma will take place in 2012. Additional discussions focused on the Fellowship by peer review, which may be offered by invitation by the CMSA Senate.

The CFP also participated in the CMSA Forum discussions on various matters related to the many disciplines within the CMSA as well as strategic national initiatives to optimise training and increase critical mass of specialists in the country.

The CFP will meet at least twice a year from now onwards, and these meetings will be synchronised to run concurrently with the dates for future College examinations. The meetings will reflect on the immediate previous examinations as well as preparing examination scripts for forthcoming examinations in our College.

Finally, the current College President, Prof Gboyega Ogunbanjo, was awarded the Fellowship of the West African College of Physicians, in the Faculty of Family Medicine, at the 34th Annual General and Scientific Meeting of the West African College of Physicians, Freetown Sierra Leone in November 2010. During the same conference, he was one of the plenary speakers in which he made a presentation on assessment titled: "The long case: is it still reliable for assessing our residents?"

**Prof G A Ogunbanjo**  
**PRESIDENT**

**Prof S S Naidoo**  
**SECRETARY**

## COLLEGE OF FORENSIC PATHOLOGISTS

The College of Forensic Pathologists will soon be entering the new 2011-2014 triennium with a newly elected Council. The outgoing Council has been very active during the last triennium, during which a number of changes were made to our regulations and examination formats. These changes, which were successfully implemented during the past two sets of CMSA examinations, included the removal of the oral examinations and the addition of a written paper in our FC For Path(SA) Part I examinations; the addition of an autopsy examination as a compulsory component (during the practical/oral CMSA examination week) of the FC For Path(SA) Part II examinations; and the running of both the FC For Path(SA) Part I and

II histopathology slide practical examinations in the various relevant University Departments around the country, during the week of the written examinations. The general responses from examiners and candidates about these changes have thus far been quite positive and, in our belief, the objectives of these changes towards more valid, reliable and fair assessment processes and outcomes, have largely been achieved.

Towards the end of 2010, our College Council also managed to finalise the mammoth task of completing the FC For Path(SA) Registrars' portfolio requirements and documentation. Full implementation of this portfolio started in January 2011, aligned with the HPCSA's "New requirements for the registration of specialists in South Africa".

Apart from the significant contributions by individual Council members, the successes of this outgoing Council can no doubt also be attributed to the fact that we were able to "physically" meet twice during this past triennium for full Council meetings, the last of which was held in October 2010. As one of the "smaller" Colleges of the CMSA, we are very grateful to the CMSA for their financial support towards these meetings, without which our Council meetings could not have taken place.

Our College graduated a high number of Specialists and Diplomates during the past two CMSA examinations, including one Diploma candidate from Kenya. We wish to extend our warmest congratulations and welcome to all these new CMSA members:

**FC For Path(SA) II Graduates:**

Dr Thakadu Arnold Mamashela, Dr Itumeleng Jacobeth Molefe, Dr Moshibudi Juliet Selatole, Dr Marianne Tiemensma, Dr Zwitabu Sharon Lukhozi, Dr Sairita Maistry, Dr Tinyiko Zelda Nkondo, Dr Janette Verster.

**Dip For Med(SA) Path Graduates:**

Dr Celeste Joannette De Vaal, Dr Marna Du Plessis, Dr Molefe Isaac Kolodi, Dr Maleka Samuel Letebele, Dr Musa Aubrey Makhoba, Dr Kwena Selaki Matlala, Dr Dixon Mchana Mwaludindi, Dr Mogolelwe Maria Sefanyetso.

**Dip For Med(SA) Clin Graduates:**

Dr Genine Ann Josias

On behalf of our Council, I would like to express my sincere thanks to Mrs Ann Vorster and Mrs Bernise Bothma, as well as their administrative staff for their ongoing support, advice and assistance.

As outgoing President of our College, I wish to thank everybody on our Council for their unwavering support during the past triennium, as well as their substantial and invaluable contributions towards strengthening and improving all aspects of our College's mandate, with our ultimate goal being achieving excellence in academic and examination standards and assessment processes.

**Prof J Vellema**  
**PRESIDENT**

## COLLEGE OF MAXILLO-FACIAL AND ORAL SURGEONS

It is a privilege to present the annual report of the College of Maxillo-Facial and Oral Surgeons for the period 1 June 2010 to 31 May 2011.

Two meetings of the Council of the College of MFOS were held on 13 October 2010 and 17 May 2011.

The Regulations for the Fellowship in Maxillo-Facial and Oral Surgery are being reviewed and suggestions of the Education Committee of the CMSA have been considered.

As a result of the African Initiative that started in 2009, contact was established between the College of Maxillo-Facial and Oral Surgeons and the Division of Oral and Maxillo-Facial Surgery, Faculty of Dentistry of the National Postgraduate Medical College of Nigeria, as well as the West African College. A Memorandum of Understanding between the College of Maxillo-Facial and Oral Surgeons and these Colleges was drafted and circulated. This has been approved by the Senate of the CMSA, but we are still waiting for a response from the Nigerian and West African Colleges.

The establishment of a Diploma in Oral Surgery within the College of MFOS and areas of subspecialisation is being explored. The regulations for this Diploma examination has been approved by the CMSA and is soon to be submitted to the Health Professions Council of South Africa for approval.

The College of MFOS, through the CMSA, was successful in gaining representation for Maxillo-Facial and Oral Surgery on the Postgraduate Education and Training Sub-committee (Dental) (PETD) of the Health Professions Council of South Africa.

There were two successful candidates in the final examinations in October 2010 and three in May 2011.

The Council of the CMFOS is also looking at effective ways of communicating with the Fellows and members of this College. A summary of the minutes of the meeting held in October 2010 was circulated.

The CMFOS donated R1000.00 from our Levy account to the CMSA as a gesture of goodwill for assistance throughout the year and this was received with much appreciation.

On behalf of the College of Maxillo-Facial and Oral Surgeons, I would like to thank the Council, and the Staff of the Cape Town, Durban, and Johannesburg offices of the CMSA for their ongoing support.

**Dr S Singh**  
**SECRETARY**

## COLLEGE OF MEDICAL GENETICISTS

The College of Medical Genetics was established in 2008, as training in the new full specialty of Medical Genetics is now offered.

The first FCMG(SA) Part 1 examinations were written in August 2010, and all three candidates were successful. An additional three Registrars are now in training, one in Bloemfontein, one at UCT and one at Tygerberg.

The serious shortage of consultant medical geneticists and the difficulties in obtaining training posts for registrars are severely limiting our ability to train and threatening the survival of the specialty. There is a desperate need for a national plan with consultant post and training post creation.

**Prof A Krause**  
**PRESIDENT**

## COLLEGE OF NEUROLOGISTS

The Council of the College of Neurologists met in Johannesburg on 18 February 2011. We confirmed that all registrars who started their training after March 2010 would maintain a portfolio documenting experience and assessments during the training period and that the portfolio should be submitted before sitting the FC Neuro(SA) Part II.

Concerns were raised about the FC Neuro(SA) Part I questions and it was agreed that we should move towards multiple choice questions which would ensure more objective marking and the inclusion of more topics. For the OSCE component of the FC Neuro(SA) Part II, we agreed that the examination would consist of 20 questions, of which 10 would be EEG, five Radiology and five Nerve Conduction-Electromyography questions.

The regulations for the Diploma in Sleep Medicine (DSM(SA)) were updated, trainees were appointed and the first Diploma was awarded.

Two KM Browse Research Scholarship awards of R15 000 each had been made in the current year and Prof Dali Magazi presented talks on common neurology topics in Mthatha.

We were pleased to note that progress had been made in improving the governance of academic centres, the central (rather than provincial) funding of Registrar posts and the new HPCSA specialist registration requirement that would include the College Fellowship and University MMed research component.

We extend our good wishes to the new Council of the College of Neurologists that will take office after elections in 2011.

**Prof B M Kies**  
**SECRETARY**

*(Senate regrettably received the news of the untimely death of Prof Kies shortly after receipt of this report)*

## COLLEGE OF NEUROSURGEONS

The following activities of the College of Neurosurgeons are reported:

1. Examinations: August to October 2010 and March to May 2011.
2. College Council meeting held at Emperor Palace, Johannesburg, at the time of the Society of Neurosurgeons biennial congress.
3. Election of a new Council of the College of Neurosurgeons for the triennium 2011–2014.

Dr S Nadvi ably assisted by Dr E Kiratu hosted the FC Neuro(SA) Final at the Department of Neurosurgery, Albert Luthuli Academic Hospital, in Durban over the period August to October 2010. Six candidates wrote the examination, three were invited to the clinical and oral examination, and all passed. There were no recommendations for the **Rowland A Krynauw Medal**.

Prof P Lekgwara hosted the FC Neuro(SA) Final at the Department of Neurosurgery, Medunsa over the period March to May 2011. Six candidates wrote the examination and three were invited to the oral and clinical part of the examination. The latter three passed and there was a recommendation for the **Rowland A Krynauw Medal**.

Generally speaking, the overall success rate in the FC Neuro(SA) Final over the past 10 years is 42.3%, with 44 out of 104 candidates who sat for the examinations, being successful. The cause of such

poor results is probably multifactorial and will be discussed at the Heads of Neurosurgical Departments meeting in August 2011.

This College sets its own Neuro-anatomy examination and we thank Dr E Kiratu (UKZN) for being the convener of the examination over the past year. He has been ably assisted by Dr J Ouma (Wits) as well as Dr A Figaji (UCT). Over a period of 10 years, out of a total of 129, 54% of the candidates who wrote the examinations, passed.

On 20 September 2010, at the time of the Society of Neurosurgeons Biennial Congress, the annual meeting of the Council of the College of Neurosurgeons (CMSA) was held. All heads of training departments were present and all council members attended. The meeting was fruitful and matters on the decision (although not official at the time) by the HPCSA to appoint the CMSA as official examiner for specialist examinations, were discussed. The implications are that the HPCSA would only register holders of the College Fellowship as a specialist as from January 2012.

Other matters of importance were:

1. That the format of the FCS(SA) Part 1B examination (Surgical Intermediate) would possibly change in the next 12 months. Further information on this was awaited.
2. The research component that was an absolute requirement for specialist registration with the HPCSA, pertaining to registrars registering as from 1 January 2011. The CMSA felt that this should be administered by the accredited training institutions and this was agreed to by the College of Neurosurgeons.
3. The update of the webpage of the College of Neurosurgeons has been done.

We would like to thank all Councillors for their active participation in matters of the College of Neurosurgeons and last, but not least, an enormous thanks go to the Convenors of examinations and examiners who generously give of their precious time to assist with the examining of our candidates.

The election/re-election of nominated candidates of our College Council for the next triennium 2011–2014 is underway and I hope that all neurosurgeons who are affiliated to the CMSA will take part in this election process.

**Prof H B Hartzenberg**  
**PRESIDENT**

**Prof P L Semple**  
**SECRETARY**

## COLLEGE OF NUCLEAR PHYSICIANS

The College of Nuclear Physicians would like to thank all the Colleagues and Sister Colleges for their support during the first African and South African Congress of the World Federation of Nuclear Medicine and Biology (WFNMB). The Congress was one of the best and contributed to Benchmarking of Quality. This has also demonstrated that Nuclear Medicine is a pillar to knowledge-based health care and is an integral part of evidence-based medicine.

The Council of the CNP and the Academic Heads of University Departments would like to invite all nuclear physicians to actively participate in re-shaping nuclear medicine. Of importance at hand

is the following:

1. To continue or discontinue with the Oral examinations for the FCNP(SA) Primary (the discussion is stimulated by the fact that almost all the Colleges have discontinued the oral examinations for primaries).
2. To implement a Certificate in PET/CT Imaging as an additional qualification and not as a subspecialty (based on the fact that hybrid imaging is irreversible, currently the Department of Health is not planning on a post-structure for a subspecialty in PET/CT and that training for such might have to be flexible to accommodate those in private practice, provided they have fulfilled the portfolio).
3. The role of Nuclear Medicine in therapy, i.e. beyond thyroid cancer and hyperthyroidism.

Responses should be emailed to ae1@sun.ac.za and mike.sathekge@up.ac.za.

The CNP would still like to reiterate the importance of expanding nuclear medicine service to secondary hospitals, as this will improve access to health care and better patient management.

**Prof A Ellmann**  
**PRESIDENT**

**Prof M M Sathekge**  
**SECRETARY**

## COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

The COG maintained its activities and participation in all matters of the CMSA.

The COG Council met this year and continues its reworking of the examination process to be both cutting edge and also as inclusive as possible. COG has before created committees responsible for the various examinations. All these committees also met during this year. Of note is that all eight medical schools are represented in the FCOG(SA) Part II committee, a fact of great importance for inclusivity.

In addition to the FCOG(SA) Part I, Part II and Dip Obst(SA) examinations, all three certificate examinations in Obstetrics and Gynaecology have now been offered with successful candidates in all. These are: Cert Gynaecological Oncology(SA), Cert Maternal and Foetal Medicine(SA) and Cert Reproductive Medicine(SA). Furthermore Obstetrical and Gynaecological candidates may take part in the Cert Critical Care examinations as well. The conveners for the past two Part II examinations were Prof J Bagratee and Prof F Guidozzi.

The COG was satisfied with the outcomes of the FCOG(SA) Part II, Dip Obst(SA) and Certificate examinations, but less so with the outcomes of the FCOG(SA) Part I. This is no different from other colleges as discussed at the most recent Senate meeting.

The COG is prepared for its expanded role in the new single exit examination dispensation.

Thanks go to all members of Council, committee chairpersons, convenors, examiners and indeed to all Fellows, Certificants, Diplomates and other members for contributing to a successful year.

**Prof B G Lindeque**  
**PRESIDENT**



## COLLEGE OF OPHTHALMOLOGISTS

In their enthusiastic support of the principle of a national unitary exit examination, the Councilors of the College of Ophthalmologists (now representative of all the eight Faculties of Health Sciences in South Africa) have worked hard toward creating unity in our College over the past year.

### New Curriculum

The new regulations for the FC Ophth(SA) took effect on 1 January 2011 and the new regulations for the Dip Ophth(SA) have been in effect since 2010. The most significant changes to the Fellowship curriculum are the following:

- Clearly indicated objectives, essential clinical experience, mandatory competence and desirable clinical experience for each of the sub-sections of the FC Ophth(SA) Part II syllabus.
- The introduction of an Intermediate Examination comprising two modules, one in Pathology and the other in Clinical Optics. During the practical examination of the latter a clinical refraction will form part of the assessment of the candidate.
- Support of the new HPCSA requirement of evidence of a completed postgraduate research project in the discipline prior to granting eligibility for registration as a specialist.
- A portfolio as a required document to be handed in at the final examination for assessment by the examiners. The portfolio will contain a full record of all learning activities during the candidate's Registrarship including surgical record, clinical rotations, outreach activities, academic lectures/workshops attended or presented, academic ward rounds attended, research/publications, etc.
- Adjustment to the format of the examination whereby written examinations may consist of a combination of long, essay-like, short and MCQ type questions, with sub-minimums of 50% in each section of the examination.

The College Council has also with gratitude agreed to the acceptance of an endowed medal for the newly created Part 1B of the Fellowship examination. The donor is the Ophthalmological Society of South Africa (Western Cape Branch).

On a national level, the College of Ophthalmologists is dedicated and geared to support all initiatives to achieve the goal of producing the best specialist ophthalmologists for all the people of South Africa.

**Prof D Meyer**  
PRESIDENT

## COLLEGE OF ORTHOPAEDIC SURGEONS

The College Council had its biannual meetings during the past year, as well as the AGM at the annual South African Orthopaedic Association congress held in Port Elizabeth in 2010.

The College now runs its own Intermediate examination, and although the failure rate still remains relatively high, this is starting to improve. A lot of the universities are now running courses specifically directed at the Intermediate examination, which should help candidates to get a better idea of what is required in the examination. There is still no unanimity between the Heads of Department as to whether the Intermediate examination should be an entrance examination for Registrars, or should be written after the candidate has been a Registrar in Orthopaedics for one year.

Concern was raised at the last Council meeting that the examination of the Higher Diploma in Orthopaedics was being written as a practice run for the Fellowship examination. A suggestion was made that the Diploma should be made an exit examination and that candidates should then not be allowed to write the final examination for a number of years in order to discourage this. This was raised at the meeting of the Examinations and Credentials Committee in June 2011 and all present shared the opinion that candidates could enter and write any examination that they were eligible for.

The Edelstein medal is now being awarded on an annual basis and the candidate who does best in both examinations held during the year is awarded the medal.

The Francois P Fouché lecture for 2011 will be delivered by Professor JA Shipley, past President of the SAOA and Head of the Department of Orthopaedics, University of the Free State.

### Mombasa Meeting

The East Central and Southern African Orthopaedic Association meeting was held at the Sarova Whitesands Hotel, Mombasa, from 21 to 22 October 2010. The theme of the meeting was "Orthopaedic infections and bone tumour in a limited resource setting". Seventy-five delegates attended this meeting, three of whom were registrars from South Africa.

The College Council wishes to thank Mrs Bernise Bothma, the CEO and Mrs Ann Vorster, the Academic registrar and their staff for their efficient and hard work during the past few years.

**Prof A Schepers**  
PRESIDENT

## COLLEGE OF OTORHINOLARYNGOLOGISTS

The year ending 31 of May 2011 saw the ORL College doing business in the usual fashion. However, we are constantly aware that there is always room for improvement and this remains a priority.

Historically we have witnessed some landmark changes that have taken place, none more so than the HPCSA appointing the CMSA as the National postgraduate examining body in medicine for the next five years.

Les Ramages and I will be downing tools at the end of this session. We have represented our College on Senate and it has been a privilege working with Les. I would like to take this opportunity to thank him for his outstanding contribution not only to our discipline, but also to The Colleges of Medicine of SA. His clear thinking and business talent has made him an invaluable asset to our College. He has become a dear friend to me and our association in College will be missed by me.

As retiring president of the college of ORL, I would like to thank the CMSA for the opportunity to serve in this capacity and also to thank Les and the other members of the ORL council for their support.

**Prof A J Claassen**  
PRESIDENT

## COLLEGE OF PAEDIATRIC SURGEONS

The College of Paediatric Surgeons of South Africa was established during the year and held its first Council meeting on 2 September 2010 at the CMSA in Rondebosch.

Councillors present were Profs PG Beale (Chair), GP Hadley, SW Moore, AJW Millar (member of Senate), C Lazarus (Secretary), Drs EW Müller and SM le Grange. The Council was assisted at its first meeting by Prof Heinz Rode and by both the CEO and the Academic Registrar of the CMSA, Mrs Bernise Bothma and Mrs Ann Vorster.

At the meeting, the Constitution of the College of Paediatric Surgeons, the structure of the FC Paed Surg(SA) Final examination, the guidelines for the examination and regulations for admission to the FC Paed(SA) were considered and approved and examination panels for the 2011 examinations were appointed.

Council resolved to establish a Founders Medal in honour of Profs Michael Dinner, Sidney Cywes and Robert Mickel, the first three Professors of Paediatric Surgery in South Africa. The South African Association of Paediatric Surgeons has been asked to endow the medal, which will be awarded to candidates who achieve outstanding results in the final Fellowship examination.

Successful candidates in the FC Paed Surg (SA) final examination during the year were:

Dr Richard John Wood  
Dr Christopher James Westgarth-Taylor  
Dr Beelke D'Hondt.

**Dr C Lazarus**  
**SECRETARY**

## COLLEGE OF PAEDIATRICIANS

This has once again been a busy, but productive year for the College.

### Examinations

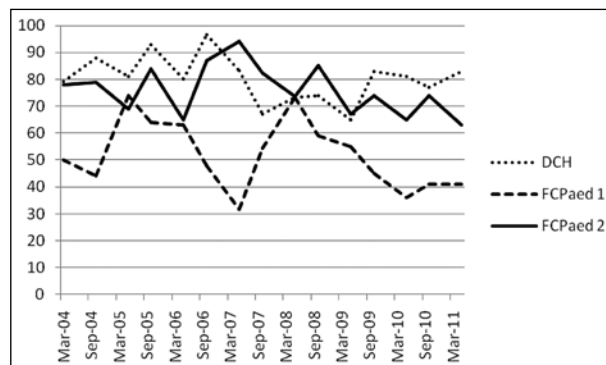
The primary focus of the Council is to ensure the conduct of fair, valid and reliable postgraduate examinations that incorporate the best current educational pedagogies related to assessment. Activities such as blue-printing, standard setting, marking memoranda and pre-and post-examination review are routine.

The College is concerned about the low success rates in recent FC Paed(SA) Part I examinations. Multiple reviews of the structure and conduct of the examination, with subsequent revisions, have not substantially changed candidate pass rates. We believe that a focus on training programmes and candidate preparation is warranted. The mean pass rate for the past fifteen examinations are: DCH 80%, FC Paed(SA) Part I 52%, FC Paed(SA) Part II 76% (Figure 1).

A recent positive development has been the entry of increasing number of Botswana and Malawian candidates into the FC Paed(SA) examinations.

### Certificate (Sub-Specialty) Examinations

Candidates encountered the new, standardised assessment and examination system in March 2011. The revised guidelines, curricula and details about Certificate examinations are available on the CMSA website.



**Figure 1. Success rates (as a %) in Paediatric College examinations, 2004-2011.**

### Examiners' Panels

Three years ago, the College introduced a system inviting Fellows and Diplomates to volunteer to be examiners. Entry was through completion of an application form. The call was met with an overwhelmingly positive response. The Council collectively selected examiners for forthcoming examinations, following a screening process. The system has worked very well. During this three-year period, the DCH(SA) examination has involved 29 different national examiners (11 first timers), the FC Paed(SA) I, 30 examiners (19 first timers) and the FC Paed(SA) II, 30 examiners (12 first timers). Invitations to Fellows and Diplomates to join the examiners' panels, and for existing panel members to retain membership, will next be distributed in November 2011.

### Global Paediatric Education Consortium (GPEC)

As previously reported, the Paediatric College has joined 17 other Colleges internationally in a consortium exploring ways in which child health care can be transformed by improving the quality of training and assessment of paediatricians. During the past year, GPEC has been engaged in drafting a standard curriculum for postgraduate training in general paediatrics. It embodies the core elements that are representative of paediatric competency and inclusive of worldwide best practices.

### Training the Paediatrician of 2015 initiative

The College appreciates its premier position in influencing paediatric training and in ensuring that paediatric trainees acquire the competencies required to meet the needs of South African children. The broad aim of the Training the Paediatrician of 2015 initiative is to better define the competencies required by the graduating paediatrician in 2015, and to lead the review and possible re-organisation of Registrar curricula and training programmes nationally to ensure that these competencies are achieved. A broad College-wide consensus developing meeting is planned for later in 2011.

### College website

Prof Alan Rothberg has continued to develop the Paediatric College's website (<http://www.collegepaeds.ac.za/>) and ensured that the site provides up to-date and relevant information. The website offers excellent continuing medical education for Fellows and Diplomates, as well as examination related support material. Nestlé are thanked for their ongoing sponsorship of the website.

## College Council

The current triennial term of the members of the Paediatric College Council ends in October 2011. I would like to express my thanks to all the members who guaranteed that this was a productive and energetic Paediatric Council, viz. Dr Sharon Kling (Secretary), Prof John Pettifor (Senator), Prof Steve Brown (UFS), Prof Alan Davidson (UCT), Prof Robin Green (UP), Dr Louis Heyns (US), Dr Gary Reubenson (Wits) and Prof Sithembiso Velaphi (Wits).

Our thanks also to the various examiners who so willingly and enthusiastically offer their services to the College and contribute to ensuring the delivery of high quality examinations.

Finally, a word of thanks to the CMSA staff at all three regional centres for their efficient support and assistance of the College in the various activities we undertake.

**Prof H Saloojee**  
**PRESIDENT**

## COLLEGE OF PATHOLOGISTS

The College of Pathologists Council meeting was held at the FSASP congress in September 2010 in Cape Town. There are currently no changes in the conduct of the examinations and in the examination rulings of the Fellowship.

A number of candidates were successful in the Fellowships and Certificate examinations in the past 12 months. Our pass rates are in line with previous years and the general trends within the CMSA. We wish to congratulate and welcome these new members of the pathology fraternity. No Honorary Fellowships were conferred by the College of Pathologist in the year under review. Dr Shabnum Meer, Department of Oral Pathology, University of the Witwatersrand, was awarded the FC Path(SA) (Oral Pathology) by peer review.

Efforts to establish memoranda of understanding between the College of Pathologists of the CMSA and counterparts in Africa are ongoing. A final draft memorandum of understanding is presently with the President-Elect of the Royal College of Pathologists for finalisation and will be signed this year.

The President attended the ILCP meeting in Hong Kong with other Presidents of Colleges of Pathologists and again embarked in fruitful discourse regarding the practice of Pathology and the role of Pathologists and Colleges of Pathologists worldwide. The next meeting will be in San Francisco in October 2011 and will hopefully be attended by the incoming President.

As the current triennium of office comes to an end, we wish to thank all Councillors and examiners of the College of Pathologists for their continued commitment to uphold the standard of training and practice of the various disciplines of pathology. We extend our gratitude to Mrs Bernise Bothma, Ann Vorster and all their dedicated staff for their tireless work and efficiency in assisting with the smooth conduct of the examinations and the business of the CMSA.

**Prof S J Nayler**  
**PRESIDENT**

**Prof J N Mahlangu**  
**SECRETARY**

## COLLEGE OF PHYSICIANS

The College of Physicians is in good financial health. The balance of the levy account in March 2011 was R183,441.50 (R191,073.90 in March 2010).

The major activities in the period under review were the implementation of the new MCQ format of the FCP(SA) Part I examination; the formation of a national Objective Test Committee; the proposed alignment of the sub-specialist examinations to the standards of the CMSA; the review of the role and training requirements of the Higher Diploma in Internal Medicine; and the formation of a task team to review the future role, training and career path of the general physician in the South African health system.

Profs Vanessa Burch and Bilkish Cassim have done a wonderful job of convening regular national workshops to develop the banks of questions for the Part I examination and the Objective Test, respectively. This national approach has improved the standardisation of these components of the examination, and generally helps to streamline the setting up of the examination by the local centres. It will be important for the Council to develop a mechanism for succession for national convenors of the Part I and the Objective Test and to prepare for an MCQ component of the Part II examination.

There has been less progress in our quest to align the sub-specialist examinations to the requirements for blue-prints of examination questions, moderation of examinations, and general quality of assurance of the CMSA. It is clear that the process of review and alignment of the Sub-specialist examinations will be facilitated by the appointment of a national Sub-specialist Convenor for each Sub-speciality who will be accountable to the Council of the College of Physicians. The national Sub-specialist Convenor, who will be encouraged to form a committee, may be elected by peers for the term of the Council. The national Sub-specialist Convenor will be required to report to the Council on the conduct of the examination on a six-monthly basis. The National Sub-specialist Convenor will also assist the Council in its work of aligning all the examinations to the minimum standards of The Colleges of Physicians of South Africa.

The review of the purpose and duration of training of the Higher Diploma in Internal Medicine will be finalised during the Council meeting of May 2011. This diploma is aimed at career medical officers in district hospitals and others who wish to improve their knowledge and skills in general internal medicine. It should also be marketed to aspirant Dermatology and Neurology trainees who will benefit from a strong grounding in general Internal Medicine. The other groups who should be targeted are supernumerary Registrars and Doctors from other parts of Africa who wish to upgrade their skills and knowledge of Internal Medicine.

Finally, a task team has been established to review the role, training and career path of General Physicians in South Africa. There is a need to ensure that the Generalist Physician is well positioned, not only to deliver a quality service, but to play a leadership role in health care in our country and beyond.

**Prof B M Mayosi**  
**PRESIDENT**

## COLLEGE OF PLASTIC SURGEONS

The AGM of the College of Plastic Surgeons (C PLAST) was held on 17 October 2010 at Maropeng in Gauteng.

Traditionally, the CMSA has only been an examining body. In line with new initiatives by the CMSA, the C PLAST has decided to promote education to try and improve a below-average pass rate in the discipline ( $\pm 30\%$  pass rate), and the pass rate in the last 18 months has increased to a satisfactory level. The University of Pretoria hosted a very successful national flap dissection course. The annual Registrar Symposium was hosted by the University of KZN and was once again a tremendous success.

There is a general feeling within the College that the changes to the FC Plast Surg(SA) implemented over the last year have been well received. The current format now provides a more balanced assessment of the candidates' knowledge. Of the 14 candidates to participate in the FC Plast Surg examination in the last year, nine passed.

Keeping of logbooks will become compulsory in 2011. The Educational Subcommittee of ASSAPS will be meeting to review sample logbooks from the various teaching departments.

**Prof P F Coetzee**  
**PRESIDENT**

**Dr R D Nicholson**  
**SECRETARY**

## COLLEGE OF PSYCHIATRISTS

### Examinations

The Council is satisfied with the recently introduced Neuropsychiatry OSCE which replaced the Neurology clinical examination. The OSCE is more appropriate in terms of testing candidates' knowledge in situations they will face in an everyday Psychiatric clinical practice.

The high failure rate in the FC Psych(SA) Part I is a reason for concern and various potential solutions are currently being investigated. These may include a clarification of specific aims and outcomes as well as formulation of a well circumscribed curriculum. The role of Psychiatrists in the Part I examination may also need to be expanded. The regulations for passing Part I examinations were adjusted and now allow candidates to be exempted from rewriting subjects that they previously passed with a minimum of 60%.

The Council is generally satisfied with the pass rates for the DMH(SA) of 46%, with six candidates obtaining the diploma, and 15 candidates obtaining the FC Psych(SA) Part II (65% pass rate) during the May 2011 examinations.

### Workshops

A weekend workshop for final-year Registrars was hosted on 5 and 6 February 2011, in preparation for the FC Psych(SA) Part II examinations. The workshop, hosted by Servier through an unrestricted educational grant, covered aspects of examination technique and format of the examinations, as well as a wide array of "hot" and refresher topics presented by experts in the field. Approximately 65 Registrars, examiners and Council members from all over the country were invited to attend. Overall, the feedback

was very positive, and Registrars found the workshop valuable, informative, well-rounded and a good preparatory exercise for the examinations. The College of Psychiatrists has, therefore, decided to host another weekend workshop on 8 and 9 October 2011 for both registrars (third-year Registrars) and examiners.

### Portfolio of Learning and Training

A more user-friendly "Portfolio of Learning", which incorporates the previous Psychotherapy Logbook, has been placed on the web page. The previous requirement of submission of the logbook has been replaced by a "Certification of Training" form which is signed off by the Heads of Departments and must be submitted as a requirement for entry to the FC Psych(SA) Part II examinations. The Portfolio's of Learning must be kept for a minimum period of two years in the respective Departments for possible auditing.

The Council decided to implement a system where candidates involved in the DMH(SA) are required to complete a document that contains information on their exposure to Psychiatric patients and relevant supervision during their period of training. The form needs to be signed off by the hospital CEO and supervisor, and is then submitted to the President for approval. The previous system that required accreditation of specific hospitals beforehand has become outdated and impossible to monitor effectively.

### Sub-specialities

The three sub-specialities (Forensic Psychiatry, Neuropsychiatry and Old Age Psychiatry) that were submitted by the College of Psychiatrists to the Health Professions Council of South Africa in 2008, have been gazetted and are expected to be implemented soon. Two other sub-specialities (Addiction Psychiatry and Consultation-Liaison Psychiatry) have yet to be evaluated by the Medical and Dental Professions Board.

**Prof PJ Pretorius**  
**SECRETARY**

## COLLEGE OF PUBLIC HEALTH MEDICINE

The Officers and Councillors of the CPHM who retire in October 2011 are: S Naidoo (President and Representative on Senate); S E Knight (Secretary); M B Kistnasamy (Representative on Senate); N A Cameron (US); D J Coetzee (UCT); R I Ehrlich (DOM)(UCT); M Kawonga (Wits); G M C Louwagie (UP); J M Moorman (Wits); M F Jeebhay (DOM)(UCT); W J Kruger (FS) and R Naidoo (DOM)(UKZN). Some may serve again in the 2011–2014 triennium. (DOM stands for the Division of Occupational Medicine).

The College of Public Health Medicine welcomes the renewed recognition that significant change is needed to meet challenges facing the health sector, and the wider window of opportunity for PHM Registrars and Fellows to influence positively the way the health system develops in the period towards the achievement of the 2015 Millennium Development Goals. The new regulations are aimed at producing graduates with the attributes needed to help measure and meet the health challenges of the next decade or so of the 21st century. We were assisted by the President of the UK's Faculty of Public Health, Professor Alan Maryon-Davis, who visited us in October 2010 and was awarded an Honorary Fellowship by our College.



Prof Shan Naidoo, our President, received a Fellowship by peer review from the Royal College of Public Health in the UK.

The College welcomed the following Fellows who successfully passed the FCPHM(SA):

October 2010

Dr N Singh (UKZN)

Dr T Chetty (UKZN)

Dr M Davies (UP)

Dr A.S De La Querra (Wits)

Dr Davies received the Gluckman Medal for 2010.

May 2011

Dr J F Mendes (Wits)

Dr K Moodley (UKZN)

Dr N Moodley (UCT)

Dr N Nadesan-Reddy (UCT)

The Division of Occupational Medicine convened a national workshop in October 2010 organised by Profs Mohamed Jeebhay and Rajen Naidoo. This followed a national survey of 36 occupational medicine specialists in the country (72% responded) on the exit competencies of graduates with a review to revising the existing regulations, new portfolio requirements and developing a scope of practice in the light of current needs by various stakeholders. The workshop also proved very useful in reviewing the content of training programmes across the country at the various academic institutions and some guidelines on achieving greater alignment of the teaching programmes.

Overall there have been exciting achievements and developments for the College over the past year.

**Prof S Naidoo**  
**PRESIDENT**

### COLLEGE OF RADIATION ONCOLOGISTS

The College of Radiation Oncologists at last entered a new phase of examinations with the start of the new primary examinations. This new examination appears to be working well, but will have to be reviewed on a regular basis.

It is essential that we train new examiners on a regular basis and to facilitate this, we have in the past year been inviting suitable persons to observe the FC Rad Onc(SA) Part II examinations and take an active role in the FC Rad Onc(SA) Part I under the guidance of senior examiners.

There is still some difficulty in getting all Councillors involved in matters that affect the College, but this will hopefully be resolved with the election of a new Council for the 2011-2014 triennium.

**Prof L Goedhals**  
**PRESIDENT**

### COLLEGE OF RADIOLOGISTS

Two successful examinations were held during the past year. The last examination was the result of quite a few years' work and planning which culminated in a total digital clinical examination. Prof Zarina Lockhat, as the Convenor of the examinations, set an example of what could be done. Unfortunately, the College of Radiologists

depends heavily on the resources of the host institution for each examination, especially concerning digital imaging resources. This will probably seriously handicap future digital examinations as not all host institutions have the same level of digital imaging equipment and Information Technology support. We may have to look into the possibility of an external Information Technology company supplying these resources in the future.

We managed to stabilise the quality control issue with a consistent and experienced moderator at each examination, and by having experienced examiners from previous examinations present at the next set of examinations.

At this stage, we are still pursuing the issue of sub-speciality registration with the Health Professions Council of South Africa and providing the sub-speciality examinations. The curricula have been drawn up, pending approval by the HPCSA.

**Prof C S de Vries**  
**PRESIDENT**

### COLLEGE OF SURGEONS

The Council has over the past year or two reviewed the process of the various examinations in the College of Surgeons. For example, the written component of the FCS(SA) Intermediate examination will change from essay questions to a multiple-choice question format. A working group has met to establish a bank of MCQ questions. The new format will be implemented in May 2012. Similar refinements in the FCS(SA) Final examination have also taken place, with the introduction of an examination matrix and the appointment of an examination moderator. A working group has also been established to review the FCS(SA) Primary examination and to enlarge the bank of questions.

The College also hosted an Inter-Collegiate session during the joint Association of Surgeons of South Africa/European Hepato-biliary Association Meeting in Cape Town in April 2011. There was representation from the American College of Surgeons, the Australasian College of Surgeons, the West African College of Surgeons, the College of Surgeons of East, Central and Southern Africa, and the Ghana College of Physicians and Surgeons. There were interesting presentations about current problems facing surgeons in the various regions, and a commitment to hold a similar meeting in the future.

The relationship between the College of Surgeons (CMSA) and the Association of Surgeons of South Africa continues to prosper.

The primary function of the College continues to be an examining body. In this regard the College continues to review this function to ensure that standards are maintained.

**Prof D Kahn**  
**PRESIDENT**

### COLLEGE OF UROLOGISTS

A general meeting of the Fellows of the College of Urologists was held on 17 November 2010 during the South African Urological Association's biennial Congress in Durban. The meeting was chaired by the President, Prof C F Heyns. In the absence of the Secretary, Prof M Haffeejee, the minutes were taken by Prof R D Barnes.

The meeting discussed the Registrars' portfolio, which would be compulsory for Registrars who started their training in 2011. The portfolio would be updated at least six-monthly by discussion between the Registrar and the Head of the Department and/or the Consultant under whose supervision the Registrar had worked. Prof S W Wentzel explained that the portfolio was intended to obtain regular input from the Registrars, as well as Consultants, with regard to the process of training. Prof A M Segone raised the issue of the "gatekeeper" function of the portfolio. It was agreed that the examiners would have the prerogative to debar a candidate from the clinical examination if the portfolio of training was not acceptable. Also, the portfolio could be taken into consideration when the marks were discussed after the clinical examination to decide whether a marginal candidate should pass or fail. Professor Wentzel emphasised that the portfolio (as in the case of the logbook) should be submitted at least three months prior to the clinical examination so that it could be scrutinised by the convenor and moderator of the examination. If there was any doubt about the acceptability of the candidate's training, the logbook or portfolio would be circulated to the examiners, who would have the prerogative to debar a candidate from the clinical examination or to fail the candidate if the logbook or portfolio was not acceptable.

The research component of registrars' training was discussed. In view of the fact that research was a compulsory requirement for the MMed in Urology, and that completion of the MMed was a requirement for payment of the full subsidy for postgraduate students provided to universities by the Department of Education, it was proposed that the FC Urol(SA) should not be awarded until the research component of training had been completed. The standard of research and the format of the dissertation required for the MMed(Urol) would be determined by the universities.

There was discussion on the country-wide shortage of opportunities for Registrars to obtain operative experience due to insufficient bed numbers and limited theatre time. Dr S Mutambirwa suggested that the problem could be alleviated by increased usage of simulators. It was felt that serious consideration should be given to increasing the

required period of training before admission to the FC Urol(SA) Final examination, also in view of the fact that the training period for the MMed(Urol) at most universities was five years.

There was also discussion of the problem that certain provincial health departments were offering Registrars a four-year service contract, after which they had to vacate the post regardless of whether they had passed the final examination. There was unanimous opposition to the HPCSA proposal that the ratio of Registrars to Consultants be increased from 2:1 to 3:1.

It was agreed that the role of the moderator during examinations should be expanded. This would include perusing the logbooks/portfolios before the examination; checking the questions submitted by the examiners before the papers for the written examination were finalised by the convenor; and an increased role in the clinical examination, as well as the primary and intermediate examinations.

Written guidelines for awarding the Goldschmidt Medal for Urology were established. It was decided that the Medal could be awarded every year, provided the candidate met the required standard of excellence. It would not be necessary for the candidate to obtain 75% in the examination. The logbook or portfolio could also be used to help with the decision. The recommendation would be made by the examiners at the particular examination, and retrospective recommendations would not be accepted.

The College of Urologists is greatly indebted to those Fellows and Associates who sacrifice their valuable time to serve as examiners or as members of the College Council. Maintaining and improving the standard of Urology in South Africa depends on the quality of training provided by full-time specialists at the academic teaching hospitals and by colleagues in private practice, as well as the standard of the examinations offered by the College of Urologists. For this reason, all practising Urologists in South Africa have a vested interest in the activities of the College of Urologists.

**Prof C F Heyns**  
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## Common work-related musculoskeletal strains and injuries

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### Abstract

Muscles, tendons, joints and nerves are susceptible to injury when stressed or traumatised repetitively, or over an extended period of time. Regardless of the nature of the work, a large proportion of the working population's time is spent engaged in repetitive movements and maintaining postures for extended periods of time. The reported incidence of work-related back and neck pain, and carpal tunnel syndrome, is between 15-60%,<sup>1-3</sup> indicating that a high proportion of the working population is at risk of developing one or more work-related musculoskeletal disorders. The parts of the body that are most commonly affected are the lower back, neck and shoulder girdle, and upper limbs. Based on current literature, we shall discuss conditions affecting these areas in order to gain a better understanding of the conditions, as well as their prevention.

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### Introduction

Work-related musculoskeletal disorders (WMSDs) affect the muscles, tendons, joints and nerves when they are stressed, or traumatised on a repetitive basis over an extended period of time.<sup>4</sup> As can be seen from the following data, WMSDs represent a common and ever-increasing problem. Back problems affect millions of people worldwide, i.e. 70-80% of people during their lifetimes.<sup>2</sup> International statistics indicate an increasing incidence.<sup>5</sup> Neck pain occurs in between 15-44% of the general community, but is reported as affecting between 50-60% of office workers.<sup>1</sup> Carpal tunnel syndrome (CTS) is one of the most common and disabling WMSDs,<sup>6</sup> affecting up to 25% of active workers.<sup>3</sup>

The first published literature regarding diseases of workers was by Bernardino Ramazzini in 1700. His work is extensively cited in a recent article by Franco,<sup>7</sup> who states that Ramazzini recognised that workers are susceptible to certain illnesses, and also noted that poor posture, repetitive movements and muscular loads contributed to certain disorders. Ramazzini established the potential of psychological stress as a factor in these conditions, and recommended the moderation of activities to avoid risks.<sup>7</sup>

Risk factors associated with the development of WMSDs include static work postures (trunk and neck twisting, stooping and deep sideways trunk bending), whole-body vibration, shock, physical work demands such as walking, pulling and lifting, climatic conditions, and psychosocial factors.<sup>2,8,9</sup> Obesity and decreased physical activity have also been associated with the development of WMSDs.<sup>10,11</sup>

WMSDs can affect virtually all parts of the body, but the back, neck and shoulders and upper limbs account for more than 50% of cases.<sup>12</sup>

Gender studies of musculoskeletal injuries in the workplace show that women desk workers are at higher risk than men, while male assembly workers are at higher risk than their female counterparts.<sup>13</sup>

### Low back pain

Non-specific low back pain (LBP) is one of the most common and expensive disorders affecting people in industrialised countries. It is estimated to affect 15-44% of the general population in one year.<sup>14-19</sup> More than 10% of those suffering from LBP experience symptoms that persist for longer than one year.<sup>14</sup>

In 2004, of the 1.2 million non-fatal occupational injuries and illnesses in the USA resulting in loss of time from work, 22% were related to LBP.<sup>20</sup> The indirect cost of occupational back injuries in the USA in 1996 was \$18.5 billion, with an average cost per injury of \$5 000. Less than five per cent of back claims which resulted in disability of longer than one year, accounted for 65% of the costs.<sup>20</sup> Thirty thousand South Africans suffer from neck or back pain annually, with 10% of them becoming chronic sufferers.<sup>2,21</sup>

Occupational LBP may occur as a result of traumatic injury, repetitive use, or other factors. Traumatic injury of the lower back is diagnosed and treated uniformly, whether its cause is occupational or not. Therefore, this article will concentrate on non-traumatic causes of occupational LBP. Ninety per cent of all people purporting to suffer from LBP have non-specific LBP.<sup>22</sup> It may occur as a single episode, be recurrent, or develop into a severe chronic burden.<sup>22,23</sup>

Factors that contribute to the development of LBP include a combination of individual, biomechanical and psychosocial factors.<sup>19,20,23-25</sup> High body

mass index (BMI), a low level of exercise, and weak back strength, are examples of individual factors that can contribute to the development of back pain.<sup>11,25</sup> Biomechanical factors include non-neutral static posture, frequent bending and twisting, as well as whole-body vibration.<sup>19,23-25</sup> Psychosocial factors, such as low social support in the workplace and low job satisfaction, have not only been associated with causing LBP, but have also been shown to be the most powerful predictor of progression to chronicity.<sup>19,23,25,26</sup>

Deviation from upright posture generates increased force on the lumbar spine, with the disc fibre layers being most heavily loaded.<sup>24</sup> Any work situation requiring repetitive flexion and/or twisting for long periods, or sustained bending, is therefore at risk of causing LBP in workers. In heavy equipment vehicle operators, LBP has been associated with steady-state whole-body vibration, as well as mechanical shocks induced by tough rides and high accelerations.<sup>8</sup>

According to the Euro Back Unit Project, short-term LBP is back pain that affects the individual for less than 30 days in a year.<sup>23</sup> Methods used to treat acute LBP include medical, physiotherapeutic and/or chiropractic care. The latter is as effective as medical or physiotherapeutic methods.<sup>12</sup> In the small percentage of cases that progress to chronic LBP, other intervention strategies are needed to prevent long and costly periods of morbidity.<sup>12,14,23</sup> It is also essential to predict which cases of LBP are likely to become chronic, to treat these patients effectively from the outset, and in so doing, prevent chronic LBP from developing.

X-rays and other forms of imaging such as magnetic resonance imaging (MRI) scans are poor predictors of long-term disability in most cases of back pain. Imaging is effective in making diagnoses such as fractures, metastatic cancers and disc and spinal cord pathology, which are associated with poor outcomes, but only account for approximately five per cent of incident cases.<sup>20</sup>

Self-reported factors that are of value in determining the outcome of back pain include radiation of pain and high level of functional disability.<sup>20</sup> According to Baldwin et al back pain intensity is not generally accepted as a reliable predictor of long-term outcome.<sup>20</sup> However, Gheldof et al reported that severe pain and radiation of pain to the feet and ankles were associated with progression to chronic pain.<sup>23</sup> More important than severity of pain is workers' ability to function following the pain, and their capacity to adapt to it.<sup>20</sup>

General health status and psychosocial stress are other validated predictors of work disability. Interventions aimed at reducing the chronic stooped posture of sewage workers pushing large amounts of waste matter through pipes have been ineffective, indicating that the cause of their LBP is not purely posture related, but multifactorial. Biomechanical factors are significantly confounded by psychosocial factors.<sup>24</sup>

Effective intervention strategies for the treatment and prevention of LBP include exercise therapy, behavioural therapy and back school programmes.<sup>14</sup> Multidisciplinary biopsychosocial rehabilitation programmes are advocated in most clinical guidelines for the treatment of subacute and chronic LBP.<sup>15,23</sup> Workplace interventions incorporating

principles of workplace ergonomics, have been shown to be effective on return-to-work outcomes, whereas exercise programmes alone were not effective, or were even counterproductive.<sup>15,16</sup>

This is thought to be due to the two effects that these programmes cause. Firstly, they reduce physical and mental stress, and secondly, the involved mediation process between worker, supervisor and an ergonomist changes the perceptions of both the worker and the supervisor, with regard to the worker's capabilities and the workplace environment. Therefore, a possible reason for failure of LBP medical treatments is the failed social transaction required to achieve modified work, rather than the medical condition of the worker.<sup>15</sup>

Participatory workplace ergonomics involve an ergonomist and occupational physician co-ordinating return to work by identifying injured workers and workplace barriers to achieving this, and then meeting with the worker at the workplace to resolve these barriers.<sup>16</sup> An example of a workplace intervention is a standing aid. The device provides a rest anterior to the lower leg, allowing the worker to kneel on it, thereby decreasing the need to bend forwards. It was tested on kitchen staff working at a nursing home, and was found to be effective in preventing low back pain in taller kitchen workers.<sup>27</sup> Other common examples include adjusting the height and lumbar support of chairs, and changing the position of computer screens.

Treatment of occupational LBP needs to be a multidisciplinary approach that addresses the physical elements of the pain, as well as the ergonomic and psychosocial causes, in order to prevent recurrence and the development of chronic LBP.

## Neck and shoulder pain

Depending on the outcome measure that is used, various studies have estimated that neck and shoulder pain affect between 6-76% of the working population annually. Women are more frequently affected than men.<sup>18,28</sup> The associated cost of treating neck and upper limb conditions is rapidly approaching that of LBP.<sup>29</sup> Recent increases in the incidence of these disorders are attributable to better disease recognition, increased use of computers, and improvements in the manufacturing process, resulting in faster speeds and shorter work cycles.<sup>30</sup> Unfortunately, the increased use of computers has not been accompanied by appropriate changes in the machine and people interface.

Diagnoses of neck and shoulder pain include tension neck syndrome, cervical syndrome, cervicobrachial fibromyalgia and rotator cuff syndrome.<sup>31</sup> Workers are predisposed to these conditions when sustaining awkward, constrained or static postures, such as cervical and thoracic spine flexion, shoulder elevation and abduction, as well when performing forceful or repetitive precision tasks.<sup>30,31</sup> Rotator cuff syndromes in the workplace include impingement, tendinosis, and rupture of the tendons. They are associated with high static or repetitive loads, particularly in combination with abduction, rotation and flexion.<sup>29</sup>

The role of psychosocial factors in neck and shoulder complaints is unclear, although a number of studies have demonstrated a correlation



between poor job satisfaction, perceived stress, poor relations with colleagues, a low level of support from co-workers, and neck pain.<sup>28,32-34</sup>

The posture associated with computer work, described as “forward head posture”, is a combination of extension of the upper cervical spine and flexion of the lower cervical spine. This posture is believed to be associated with an increased risk of neck and shoulder pain. Arvidsson et al cited several studies which investigated neck posture and trapezius muscle activity among office and manual workers, and found conflicting results with respect to neck pain syndromes.<sup>1,35</sup> Interventions such as adjusting seat height and curved seat pan chairs have been effective in preventing neck and shoulder pain in seated manual workers.<sup>31</sup>

Other ergonomic interventions may also be of value in preventing neck pain and upper limb conditions.<sup>18,30</sup> In designing tools and workplaces, attention to human factors can prevent many injuries. However, these ergonomic changes usually occur in response to injuries, rather than as a measure to prevent them.<sup>30</sup>

### Upper extremity conditions

One-third to half of all disability claims are related to hand, wrist or upper extremity cumulative trauma.<sup>30,36</sup> In the USA in 1999, the cost of upper extremity cumulative trauma disorders was between \$15-20 billion. Of these disorders, 78% was ascribed to CTS, making it one of the most significant and costly healthcare problems to affect the working population.<sup>30,37</sup> While current, and South African data on the costs related to CTS are not available, other recent studies indicate that the incidence of CTS is remaining static, while the incidence of WMSDs is decreasing. It has also been reported that CTS disability time is significantly longer than that of other WMSDs.<sup>38-40</sup> Since nearly 80% of workplace-related upper limb complaints are attributable to CTS, the authors of this article have decided to focus their discussion entirely on it. Other common WMSDs that affect the upper limbs are listed in Table 1.

**Table 1:** Common work-related musculoskeletal disorders that affect the upper limbs<sup>41</sup>

Disorder	Symptoms	Causes
Carpal tunnel syndrome	Numbness of middle fingers, especially at night	Repetitive wrist flexion
Myofascial pain of the neck	Heaviness and aching in the shoulders, upper back and neck	Overhead work and work with extended arms Computer posture Stress reaction
Shoulder bursitis	Shoulder pain and stiffness	Repetitive shoulder movements
Rotator cuff tendinosis	Shoulder pain and stiffness	Repetitive shoulder movements with twisting and overhead activities
Lateral epicondylitis	Lateral elbow pain, especially with extended wrist	Lateral elbow pain, especially with extended wrist
Trigger finger	Locking of fingers in flexion	Repetitive hand grip

CTS occurs in 2.1% of males and 3.0% of females,<sup>42</sup> and has been reported as presenting in 1-10% of the general population.<sup>38</sup> It is

primarily associated with workers who use their hands,<sup>3,30,42</sup> and 34-79% of CTS patients attribute the condition to their work.<sup>42</sup>

In women, it occurs more frequently in office, than manual, workers (19% vs. 24%), while in men, 50% of cases occur in manual workers.<sup>37</sup> Keogh et al reported that 27% of cases were worked in the manufacturing sector, while 25% were engaged in “keyboarding”.<sup>30</sup> One in ten CTS sufferers remains permanently disabled as a result of the condition, while 12% of workers receive workman’s compensation 30 months after diagnosis.<sup>39,42</sup> It is believed that factors other than CTS itself may be responsible for the long recovery periods. Suggested influences include economic incentives, amount of sick leave available, and physical and psychosocial demands in the workplace.<sup>39,42</sup> Patients requiring surgery often require up to seven weeks of sick leave to recover fully, but surgical intervention is associated with better recovery of earning potential.<sup>39,42</sup> The delay in time between diagnosis and surgical treatment is also cited as a reason for prolonged recovery periods.<sup>39</sup>

In medical literature, CTS definitions vary greatly. The presence of symptoms in the median nerve distribution is neither sensitive, nor specific, for a CTS diagnosis. Similarly, electrodiagnostic techniques are only modestly sensitive and specific, and show poor correlation with clinical signs.<sup>43</sup> The non-specific nature of CTS signs and symptoms often makes electrophysiological testing a more reliable diagnostic indicator than clinical signs alone, and the combination of the two is more specific and sensitive than either in isolation.<sup>42,43</sup>

Median mononeuropathy (MN) is defined as prolongation of the median sensory-evoked potential across the wrist, when compared to the ulna nerve.<sup>3,43</sup> CTS is the clinical syndrome that occurs as a result of MN. Clinical symptoms include pain, parasthesia, weakness and altered temperature or dryness of the hand.<sup>42</sup> It affects people performing intensive work with their hands. MN is reported to be present in up to 25% of active workers, but more than half of patients are asymptomatic.<sup>3</sup>

CTS has been regarded as a significant cause of hand and arm complaints since the 1960s. Studies that relied on clinical CTS symptoms in the 1980s postulated an association between occupational hand use and CTS. However, more recent studies that combine electrophysiological signs, as well as clinical findings, have demonstrated a less consistent association.<sup>43</sup> Years of work experience correlate negatively with the incidence of CTS, and increased physical activity does not increase the risk of its development.<sup>43</sup> The increased incidence of CTS has been demonstrated to be associated with increased BMI, increased wrist index (“square wrist”) and medical conditions such as gout, thyroid disorders and diabetes mellitus.<sup>36,43</sup> Diabetics have a higher risk of MN than non-diabetics, but with CTS, tend to be less symptomatic. This is thought to be due to mild peripheral neuropathy, that masks CTS symptoms.<sup>3</sup>

A higher degree of electrophysiological change in median nerve conduction is associated with a trend to report CTS symptoms more frequently. The trend is not as significant as would be expected. Asymptomatic workers with documented MN only have a 10% likelihood

of developing CTS symptoms in two years. This is no different from the incidence in age-matched and sex-matched controls with normal nerve conduction.<sup>3</sup>

Psychosocial factors have not been found to be discriminatory as to who experiences CTS symptoms. In contrast to LBP, workers with a higher level of job satisfaction have been found to be more likely to report CTS symptoms. It is believed that a worker who is more satisfied with his or her job, may feel that he or she is able to make such a report, without fear of jeopardising his or her job security. Higher work stress and lower job satisfaction are not associated with a higher level of reporting CTS.<sup>3</sup> However, workers with a lower education level, lower income, low job control, low job social support and high psychological job demands are less likely to return to work six months after CTS surgical treatment.<sup>6,40</sup>

Ergonomic risks pertaining to the development of CTS include a high level of repetitive hand movements, awkward wrist posture, higher forces at the hand and wrist, and the use of hand-held vibratory tools at work.<sup>3,42</sup> Ergonomic interventions in symptomatic workers have resulted in the reduction of CTS surgical treatment.<sup>30,42</sup> Following the identification of CTS, changes in the workplace environment include safety evaluations, engineering adaptations (change of equipment, tools or work set-up), change of employee duties, and change of work pace.<sup>30</sup>

Up to 50% of CTS could be avoided if effective intervention programmes were implemented in the workplace.<sup>37</sup> These interventions should include management of all CTS development risks, including diabetes and high BMI. Since only a small percentage of workers develop CTS, it is recommended that, rather than change the workplace environment of all workers, implementation of essential changes is made for symptomatic workers. This is to decrease the incidence of surgery, as well as assist in recovery.

## Conclusion

Repetitive movements, static and stressful postures, obesity, lack of physical activity and psychological stressors predispose workers to WMSDs. Many of these conditions occur at the interface between workers and machines, whether in manufacturing or the office. They can often be prevented or modulated by addressing the ergonomics of the workplace.

When treating any WMSD, the clinician should accurately diagnose the condition and treat it appropriately, but should also look for predisposing factors and address these with the worker and employer to facilitate a more rapid return to work. This will also prevent recurrence. The clinician must consult with an occupational therapist and the employer to address the risk factors for each individual. Ergonomic interventions can then be introduced to prevent recurrence. The interaction with the employee and employer should be used as an opportunity to educate both regarding the factors that contribute to WMSD, so that strategies may be implemented to prevent similar injuries in other employees.

In many instances, ergonomic interventions can be introduced as a preventative measure in the workplace prior to the occurrence of injury.

Unfortunately, clinicians do not usually have the opportunity to educate workers about these injuries until they have already occurred. When seeing patients with any of the abovementioned conditions, clinicians should be vigilant as to whether or not the patient is presenting with early signs of a WMSD. If there is suspicion of an early WMSD, an occupational therapist should be consulted, and the opportunity used to discuss the circumstances with both the employer and employee.

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## Honorary Fellows The College of Medicine of South Africa As at 12 September 2011

\* Deceased

* <b>Abrahamse</b> Leonard George (CMSA) (1991)	Cape Town, SA	<b>De Laey</b> Jean-Jacques (C OPHTH) (2000)	Gent, Belgium
* <b>Acquaye</b> Joseph Kpakpo (CP) (2004)	Accra, Ghana	* <b>Denny-Brown</b> Derek Ernest (CP) (1971)	Boston, USA
<b>Adams</b> Aileen Kirkpatrick (CA) (1987)	London, UK	<b>Deschênes</b> Luc (CS) (1998)	Quebec, Canada
<b>Adamson Fryhofer</b> Sandra (CP) (2003)	Atlanta, USA	<b>De Swiet</b> Michael (COG) (2004)	London, UK
<b>Akande</b> Oluwole (COG) (2002)	Ibadan, Nigeria	<b>Deutman</b> August (C OPHTH) (2000)	Nijmegen, Netherl.
<b>Alberti</b> Kurt George MM (CP) (1998)	London, UK	* <b>De Villiers</b> Henri Paul (CMSA) (1993)	Johannesburg, SA
* <b>Anderson</b> Edward William (C PSYCH) (1964)	Frant, UK	* <b>Dewar</b> Frederick Plummer (C ORTH) (1982)	Ontario, Canada
<b>Arulkumaran</b> Sabaratnam (COG) (2005)	London, UK	* <b>Dewhurst</b> Christopher John (COG) (1978)	London, UK
* <b>Asmal</b> Kader (CMSA) (2003)	Cape Town, SA	* <b>Dickson Wright</b> Arthur (CS) (1960)	London, UK
* <b>Atkins</b> Hedley John Barnard (CS) (1968)	London, UK	* <b>Diederichs</b> Nico (CMSA) (1977)	Pretoria, SA
* <b>Azubuike</b> Jonathan C (C PAED) (2005)	Enugu, Nigeria	<b>Dinsdale</b> Henry B (CP) (1996)	Ontario, Canada
<b>Baird</b> David (COG) (2009)	Edinburgh, UK	* <b>Donald</b> Ian (COG) (1967)	Essex, UK
* <b>Ballantyne</b> John Chalmers (C ORL) (1989)	London, UK	* <b>Dott</b> Norman McOmish (CS) (1957)	Edinburgh, UK
* <b>Baltzan</b> Richard (CP) (2001)	Saskatoon, Canada	* <b>Douglas</b> Donald MacLeod (CS) (1972)	Dundee, UK
* <b>Barlow</b> Charles Sydney (CS) (1970)	Johannesburg, SA	<b>Douglas</b> Neil James (CP) (2005)	Edinburgh, UK
<b>Becklake</b> Margaret R (CP) (1994)	Montreal, Canada	* <b>Doyle</b> J Stephen (CP) (1994)	Dublin, Ireland
<b>Benatar</b> Solomon Robert (CP) (2001)	Cape Town, SA	* <b>Drake</b> Charles George (CS) (1972)	Ontario, Canada
<b>Bird</b> Alan Charles (C OPHTH) (2006)	Cape Town, SA	<b>Drife</b> James Owen (COG) (2002)	Leeds, UK
* <b>Blaisdell</b> F William (CS) (1986)	London, UK	* <b>Dubb</b> Asher (CP) (1998)	Johannesburg, SA
* <b>Bortz</b> Edward L (COG) (1957)	California, USA	<b>Dudley</b> Hugh Arnold Freeman (CS) (1987)	London, UK
<b>Bothwell</b> Thomas Hamilton (CP) (1994)	Pennsylvania, USA	* <b>Duff</b> Francis Arthur Joseph M (CS) (1972)	Dublin, Ireland
<b>Bouchier</b> Ian Arthur Dennis (CP) (1992)	Johannesburg, SA	* <b>Dunlop</b> Derrick (CP) (1978)	Edinburgh, UK
* <b>Boulter</b> Patrick Stewart (CS) (1961)	Edinburgh, UK	* <b>Du Plessis</b> Daniel Jakob (CS) (1982)	Johannesburg, SA
<b>Boix-Ochoa</b> José (CS) (2006)	Cumbria, UK	* <b>Du Toit</b> Guillaume Tom (C ORTH) (1982)	Johannesburg, SA
* <b>Bradlow</b> Emanuel Percy (CMSA) (1980)	Barcelona, Spain	<b>Elkington</b> Andrew R (C OPHTH) (1997)	Hampshire, UK
* <b>Brain</b> Walter Russell (C NEUROL) (1957)	Johannesburg, SA	* <b>Elliott</b> Guy Abercrombie (CP) (1968)	Cape Town, SA
* <b>Brebner</b> Innes Wares (CS) (1961)	London, UK	<b>English</b> Terence Alexander H (CS) (1991)	London, UK
<b>Breen</b> James Langhorn (COG) (1984)	Halfway House, SA	<b>Fabb</b> Wesley Earl (CFP) (1975)	Victoria, Australia
* <b>Brock</b> John Fleming (CP) (1973)	New Jersey, USA	<b>Farooqui</b> Muhammad S (CP) (2001)	Karachi, Pakistan
<b>Brown</b> Thomas C K (Kester) (CA) (2002)	Cape Town, SA	<b>Fitzpatrick</b> John Michael (C UROL) (2002)	Dublin, Ireland
<b>Browse</b> Norman (CS) (1996)	Victoria, Australia	<b>Foëx</b> Pierre (CA) (2007)	Oxford, UK
* <b>Bruce</b> John (CS) (1962)	London, UK	* <b>Forman</b> Frank (CP) (1970)	Tel Aviv, Israel
<b>Burger</b> Henry (CP) (1984)	Edinburgh, UK	<b>Foulds</b> Wallace Stewart (C OPHTH) (1992)	Glasgow, UK
<b>Burgess</b> John H (CP) (1991)	Victoria, Australia	<b>Fritz</b> Vivian Una (FCP) (1972)	Johannesburg, SA
* <b>Byrne</b> Patrick Sarsfield (CFP) (1975)	Westmount, Canada	<b>Galasko</b> Charles S B (C ORTH) (2003)	Cheshire, UK
<b>Calder</b> Andrew (COG) (2005)	Manchester, UK	* <b>Gear</b> James Henderson S (CMSA) (1990)	Johannesburg, SA
<b>Calnan</b> Charles Dermot (C DERM) (1970)	Edinburgh, UK	* <b>Goldenhuyts</b> Frans Gert (COG) (1987)	Pretoria, SA
<b>Cameron</b> Donald Patrick (CP) (1998)	London, UK	<b>Genest</b> Jacques (CP) (1970)	Montreal, Canada
<b>Caruso</b> Vincent (C PATH) (2005)	Queensland, Australia	* <b>Gillingham</b> Francis J (C NEUROS) (1981)	Edinburgh, UK
<b>Chalmers</b> Iain Geoffrey (COG) (2001)	NSW, Australia	<b>Gill</b> Geoffrey Victor (CP) (2007)	Wirral, UK
* <b>Chisholm</b> Geoffrey Duncan (C UROL) (1990)	Oxford, UK	<b>Gilmore</b> Ian Thomas (CP) (2007)	London, UK
* <b>Clark</b> Douglas Henderson (CS) (1979)	Edinburgh, UK	<b>Giwa-Osagie</b> Osato O F (COG) (2005)	Lagos
* <b>Clayton</b> Stanley George (COG) (1975)	Glasgow, UK	* <b>Gluckman</b> Henry (CP) (1983)	Johannesburg, SA
<b>Clewlow</b> Warren (CMSA) (2006)	Surrey, UK	* <b>Gordon</b> Isidor (C FOR PATH) (1984)	Durban, SA
<b>Collin</b> John Richard Olaf (C OPHTH) (2007)	Sandton, SA	* <b>Gordon-Smith</b> Derek Peter (CMSA) (1993)	Johannesburg, SA
<b>Conti</b> Charles Richard (CP) (1991)	London, UK	<b>Greenberger</b> Norton J (CP) (1991)	Massachusetts USA
<b>Courtemanche</b> Albert Douglas (CS) (1991)	Florida, USA	<b>Guillebaud</b> John (COG) (2004)	Oxford, UK
<b>Couture</b> Jean (CS) (1979)	Ottawa, Canada	<b>Hamilton</b> Andrew M P (C OPHTH) (2001)	Middlesex, UK
* <b>Cowley</b> John Godfrey (CMSA) (1989)	Quebec, Canada	<b>Hamilton</b> Stewart (CS) (2005)	Alberta, Canada
<b>Cox</b> John (C PSYCH) (2000)	Johannesburg, SA	* <b>Hanlon</b> C Rollins (CS) (1988)	Chicago, USA
* <b>Craib</b> William Hofmeyer (CP) (1974)	London, UK	<b>Hanrahan</b> John Chadwick (CS) (1992)	Peppermint Gr. WA
* <b>Crichton</b> Eric Cuthbert (COG) (1963)	Somerset East, SA	* <b>Harrison</b> Donald F N (C ORL) (1988)	London, UK
* <b>Cunningham</b> Anthony Andrew (CA) (2004)	Cape Town, SA	* <b>Harwood-Nash</b> Derek C (C RAD) (1991)	Toronto, Canada
<b>Cywes</b> Sidney (CS) (1998)	Dublin, Ireland	<b>Hederman</b> William Patrick (CS) (1992)	Dublin, Ireland
* <b>Dacie</b> John Vivian (C PATH) (1973)	Cape Town, SA	<b>Hennessy</b> Thomas Patrick J (CS) (1997)	Dublin, Ireland
* <b>Dall</b> George (CMSA) (1989)	London, UK	* <b>Hoffenberg</b> Raymond (CP) (1999)	Queensland, Austr.
* <b>Dart</b> Raymond Arthur (CMSA) (1984)	Cape Town, SA	<b>Hollins</b> Sheila (C PSYCH) (2005)	London, UK
* <b>Daubenton</b> François (Snr) (COG) (1986)	Johannesburg, SA	<b>Hudson</b> Alan Roy (C NEUROS) (1992)	Ontario, Canada
* <b>De Beer</b> Johannes (CMSA) (1978)	Cape Town, SA	<b>Hume</b> Robert (CS) (1992)	Glasgow, UK
<b>De Klerk</b> Frederick Willem (CMSA) (1994)	Pretoria, SA	<b>Huskinson</b> Ian Douglas (CMSA) (1997)	Cape Town, SA
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**Idezuki** Yaso (CS) (1992)  
 \* **Illingworth** Charles Frederic W (CS) (1965)  
 \* **Jaffe** Basil (CFP) (2007)  
 \* **Jansen** Ernest George (CP) (1959)  
 \* **Janssen** Paul Adriaan Jan (CMSA) (1989)  
 \* **Jeffcoate** Thomas Norman A (COG) (1972)  
**Joubert** Peter Gowar (CMSA) (1999)  
 \* **Kathrada** Ismail (CMSA) (1998)  
 \* **Kay** Andrew Watt (CS) (1972)  
**Keogh** Brian (CP) (1998)  
**Kerr** David Nicol Sharp (CP) (1992)  
**Keys** Derek Lyle (CMSA) (1993)  
 \* **Kirsch** Ralph Emmanuel (CMSA) 2009  
 \* **Knocker** Phyllis Amelia H (CMSA) (1988)  
 \* **Kok** Ordino Victor Steyn (CA) (1975)  
 \* **Krige** Christiaan Frederik (COG) (1966)  
**Kuku** Sonny F (CP) (2001)  
 \* **Landau** Arthur (CP) (1981)  
**Langer** Bernard (CS) (2001)  
**Leffall** LaSalle D (CS) (1996)  
**Lemmer** Johan (CD) (2006)  
 \* **Leon** Alan Henry (CMSA) (1978)  
**Levett** Michael John (CMSA) (1999)  
**Levin** Lawrence Scott (C PLAST) (2006)  
 \* **Loewenthal** John (CS) (1972)  
**Looi** Lai Meng (C PATH) (2005)  
**Lorimer** Andrew Ross (CP) (2004)  
 \* **Louw** Jan Hendrik (CS) (1980)  
 \* **Luke** Egerton M F (CP) (2001)  
**Luntz** Maurice Harold (C OPHTH) (1999)  
**MacKay** Colin (CS) (1998)  
 \* **MacKenzie** Walter Campbell (CS) (1975)  
**Maryon-Davis** Alan (CPHM) (2010)  
**McDonald** John W David (CP) (2004)  
**McLean** Peter (CS) (1998)  
**MacLean** Lloyd Douglas (CS) (1996)  
**MacSween** Roderick N M (C PATH) (1998)  
**Mandela** Nelson Rohlihlala (CMSA) (1995)  
**Maran** Arnold George D (CS) (1998)  
**Mazwai** Ebden Lizo (CS) (2011)  
**McKenna** Terence Joseph (CP) (2005)  
**Meakins** Jonathan Larmonth (CS) (2004)  
**Mensah** George A (CP) (2005)  
 \* **Mercer** Walter (C ORTH) (1956)  
**Meursing** Anneke Elina Elvira (CA) (2003)  
 \* **Middlemiss** John Howard (C RAD) (1975)  
**Mieny** Carel Johannes (CMSA) (1996)  
**Mokgokong** Ephraim T (COG) (2006)  
**Molteno** Anthony C B (C OPHTH) (2001)  
**Morrell** David Francis (CMSA) (2004)  
**Mortimer** Robin Hampton (CP) (2004)  
 \* **Murley** Reginald Sydney (CS) (1979)  
 \* **Mushin** William Woolf (CA) (1962)  
 \* **Myburgh** Johannes Albertus (CMSA) (1991)  
**Myers** Eugene Nicholas (C ORL) (1989)  
 \* **Nel** Cornelius Johann C (CMSA) (1998)  
 \* **Newman** Philip Harker (C ORTH) (1982)  
**Ngu** Victor Anomah (FCS) (2008)  
**Norman** Geoffrey Ross (FCM) (2003)  
 \* **O'Brien** Bernard McCarthy (C PLAST) (1992)  
**O'Donnell** Barry (CS) (2001)  
**Ogilvie Thompson** Julian  
**Oh** Teik Ewe (CA) (2003)  
**O'Higgins** Niall (CS) (2005)  
 \* **Oliver** Thomas Keyser (Jnr) (C PAED) (1980)  
 \* **Ong** Guan-Bee (CS) (1976)  
**Opie** Lionel Henry (CP) (2008)  
 \* **Oppenheimer** Harry Frederick (CP) (1968)  
 \* **Organ** Claude H (Jnr) (CS) (1986)  
**Pasnau** Robert O (C PSYCH) (1988)  
**Patel** Naren (COG) (1997)  
 \* **Peel** John (COG) (1968)  
 \* **Petrie** James Colquhoun (CP) (1998)  
**Pinker** George (COG) (1991)  
 \* **Platt** Harry (CS) (1957)
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 Saitama, Japan  
 Glasgow, UK  
 Cape Town, SA  
 Pretoria, SA  
 Beerse, Belgium  
 Liverpool, UK  
 Johannesburg, SA  
 Durban, SA  
 Glasgow, UK  
 Dublin, Ireland  
 London, UK  
 Johannesburg, SA  
 Cape Town  
 Johannesburg, SA  
 Pretoria, SA  
 Johannesburg, SA  
 Lagos, Nigeria  
 Cape Town, SA  
 Ontario, Canada  
 Washington, USA  
 Sandton, SA  
 Cape Town, SA  
 Cape Town, SA  
 North Carolina, USA  
 NSW, Australia  
 Kuala Lumpur, Malaysia  
 Glasgow, UK  
 Cape Town SA  
 Merseyside, UK  
 New York, USA  
 Glasgow, UK  
 Alberta, Canada  
 London, UK  
 Ontario, Canada  
 Dublin, Ireland  
 Quebec, Canada  
 London, UK  
 Johannesburg, SA  
 Edinburgh, UK  
 Mthatha, SA  
 Dun Laoghaire, Dublin  
 Oxford, UK  
 Georgia, USA  
 Edinburgh, UK  
 Blantyre, Malawi  
 London, UK  
 Pretoria, SA  
 Medunsa, SA  
 Otago, New Zealand  
 Kenton on Sea, SA  
 NSW, Australia  
 London, UK  
 Wales, UK  
 Johannesburg, SA  
 Pennsylvania, USA  
 Bloemfontein, SA  
 Suffolk, UK  
 Cameroon
- Victoria, Australia  
 Dublin, Ireland  
 Johannesburg, SA  
 Perth, West Australia  
 Dublin, Ireland  
 North Carolina, USA  
 Mid-Lev. Hong Kong  
 Cape Town, SA  
 Johannesburg, SA  
 California, USA  
 California, USA  
 Dunkeld, Scotland  
 Salisbury, UK  
 Edinburgh, UK  
 London, UK  
 Manchester, UK
- \* **Porritt** Arthur (CS) (1962)  
**Prys-Roberts** Cedric (CA) (1996)  
**Ramphela** Mamphele Aletta (CMSA) (2005)  
**Reeve** Thomas Smith (CS) (1991)  
**Retief** Daniel Hugo (CD) (1995)  
 \* **Rhoads** Jonathan Evans (CS) (1972)  
 \* **Rice** Donald Ingram (CFP) (1975)  
**Richmond** John (CP) (1991)  
 \* **Rickham** Peter Paul (CS) (1992)  
 \* **Robson** Kenneth (CP) (1969)  
 \* **Rosenheim** Max Leonard (CP) (1972)  
**Rosholt** Aanon Michael (CMSA) (1980)  
 \* **Roth** Martin (C PSYCH) (1973)  
**Rudowski** Witold (CS) (1990)  
 \* **Rupert** Antony Edward (CP) (1968)  
 \* **Rutledge** Felix Noah (COG) (1990)  
 \* **Saint** Charles Frederick Morris (CS) (1967)  
**Salter** Robert B (C ORTH) (1973)  
**Salyer** K Everett (C PLAST) (2007)  
**Saunders** Stuart John (CMSA) (1989)  
**Schulz** Eleonora Joy (C DERM) (2006)  
**Seedat** Yackoob Kassim (CMSA) (1998)  
**Segal** Anthony Walter (CP) (2008)  
 \* **Sellers** Thomas Holmes (CS) (1972)  
**Sewell** Jill (CP) (2005)  
 \* **Shaw** Keith Meares (CS) (1979)  
**Shear** Mervyn (CD) (1999); (C PATH) (2004)  
 \* **Shields** Robert (CS) (1991)  
 \* **Shires** George Thomas (CS) (1979)  
**Siker** Ephraim S (CA) (1983)  
**Sims** Andrew C Peter (C PSYCH) (1997)  
**Slaney** Geoffrey (CS) (1986)  
**Smith** Edward Durham (CS) (1990)  
**Smith** John Allan Raymond (CS) (2005)  
 \* **Smith** Marlow Rodney (CS) (1976)  
 \* **Smythe** Patrick Montrose (C PAED) (1988)  
**Soothill** Peter William (COG) (2004)  
**Sparks** Bruce Louis W (CFP) (2006)  
**Spitz** Lewis (CS) (2005)  
 \* **Stallworthy** John Arthur (COG) (1964)  
 \* **Staz** Julius (CD) (1989)  
**Steer** Phillip James (COG) (2004)  
 \* **Straffon** Ralph A (CS) (1992)  
**Strong** John Anderson (CP) (1982)  
**Strunin** Leo (CA) (2000)  
**Stulting**, Andries Andriessen (C OPHTH) (2011)  
 \* **Swart** Charles Robberts (CP) (1963)  
**Sweetnam** Sir Rodney (CS) (1998)  
**Sykes** Malcolm Keith (CA) (1989)  
**Tan** Ser-Kiat (CS) (1998)  
**Tan** Walter Tiang Lee (CP) (2001)  
 \* **Taylor** Selwyn Francis (CS) (1978)  
 \* **Te Groen** Lutherus Johannes (COG) (1963)  
**Terblanche** John (CMSA) (1995)  
**Thomas** William Ernest Ghinn (CS) (2006)  
**Thomson** George Edmund (CP) (1996)  
**Tobias** Phillip (CMSA) (1998)  
**Todd** Ian P (CS) (1987)  
 \* **Townsend** Sydney Lance (COG) (1972)  
 \* **Tracy** Graham Douglas (CS) (1979)  
**Trunkey** Donald Dean (CS) (1990)  
**Tucker** Ronald BK (CMSA) (1997)  
**Turnberg** Leslie Arnold (CP) (1995)  
**Turner-Warwick** Margaret (CP) (1991)  
**Underwood** James C E (C PATH) (2006)  
 \* **Van der Horst** Johannes G (CP) (1974)  
**Van Heerden** Jonathan A (CS) (1989)  
**Vaughan** Ralph S (CA) (2003)  
 \* **Viljoen** Marais (CMSA) (1981)  
**Visser** Gerard (COG) (1999)  
 \* **Walt** Alexander J (CS) (1989)  
**Wijesiriwardena** Bandula C (CP) (2005)  
 \* **Wilkinson** Andrew Wood (CS) (1979)
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 Bristol, UK  
 Cape Town, SA  
 NSW, Australia  
 Alabama, USA  
 Philadelphia, USA  
 Ontario, Canada  
 Edinburgh, UK  
 Altendorf, Switzerl.  
 London, UK  
 London, UK  
 Johannesburg, SA  
 Cambridge, UK  
 Warsaw, Poland  
 Stellenbosch, CT  
 Texas, USA  
 Cape Town, SA  
 Ontario, Canada  
 Texas, USA  
 Cape Town, SA  
 Pretoria, SA  
 London, UK  
 Durban, SA  
 London, UK  
 Victoria, Australia  
 Dublin, Ireland  
 Cape Town, SA  
 Liverpool, UK  
 Nevada, USA  
 Pennsylvania, USA  
 Leeds, UK  
 London, UK  
 Victoria, Australia  
 Sheffield, UK  
 London, UK  
 Durban, SA  
 Bristol, UK  
 Parktown, SA  
 London, UK  
 Oxford, UK  
 Cape Town, SA  
 London, UK  
 Ohio, USA  
 Edinburgh, UK  
 London, UK  
 Bloemfontein, SA  
 Brandfort, SA  
 London, UK  
 Oxford, UK  
 Singapore  
 Singapore  
 London, UK  
 Pretoria, SA  
 Cape Town, SA  
 Sheffield, UK  
 New York, USA  
 Johannesburg, SA  
 London, UK  
 Victoria, Australia  
 NSW, Australia  
 Oregon, USA  
 Cape Town, SA  
 Johannesburg, SA  
 London, UK  
 Sheffield, UK  
 Cape Town, SA  
 S Carolina, USA  
 Cardiff, UK  
 Pretoria, SA  
 Utrecht, Netherlands  
 Michigan, USA  
 Kalubowila, Sri Lanka  
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## CMSA Life Members As at 4 October 2011

\* Deceased

<b>Aaron</b> Cyril Leon	<b>Becker</b> Ryk Massyn	<b>* Brown</b> Helen Annan	<b>Combrink</b> Johanna Ida Lilly
<b>Abdulla</b> Mohamed Abdul Latif	<b>* Bedford</b> Michael Charles	<b>Brown</b> Raymond Solomon	<b>Comfort</b> Peter Thomas
<b>* Abel</b> Solomon	<b>* Beemer</b> Abraham Mayer	<b>Bruceckner</b> Roberta Mildred	<b>* Conradie</b> Marthinus T Steyn
<b>Abell</b> David Alan	<b>Benatar</b> Solly Robert	<b>Bruinette</b> Hendrik van Rensburg	<b>Cooke</b> Paul Anthony
<b>* Abrahams</b> Abduragiem	<b>Benatar</b> Victor	<b>Bruk</b> Morris Isaac	<b>Cooke</b> Richard Dale
<b>Abrahams</b> Cyril	<b>Benjamin</b> Ephraim Sheftel	<b>Bruwer</b> André Daniel	<b>Cooper</b> Cedric Kenneth Norman
<b>Abramowitz</b> Israel	<b>Bennett</b> Margaret Betty	<b>Bruwer</b> Ignatius Marthinus Stephanus	<b>Coote</b> Nigel Penley
<b>Ackermann</b> Daniel J Joubert	<b>Bennett</b> Michael Julian	<b>* Buch</b> Julius	<b>Coovadia</b> Hoosen Mahomed
<b>Adam</b> Anvir	<b>* Bensusan</b> Arthur David	<b>Buchan</b> Terry	<b>* Coxon</b> John Duncan
<b>* Adams</b> Edward Barry	<b>Bérard</b> Raymond Michael Francis	<b>* Bull</b> Arthur Barclay	<b>* Cort</b> Alexander
<b>Adhikari</b> Mariam	<b>Berk</b> Morris Eli	<b>Burger</b> Thomas Francois	<b>Cowie</b> Robert Lawrence
<b>* Adler</b> David Ivan	<b>* Berkowitz</b> Hayman Solomon	<b>Burgess</b> John Digby	<b>* Cowley</b> John Godfrey
<b>* Adler</b> Max	<b>Berkowitz</b> Leslie	<b>Burgin</b> Solomon	<b>* Cowley</b> Ronald
<b>Adno</b> Jacob	<b>Berson</b> Solomon David	<b>Burns</b> Derrick Graham	<b>* Cowlin</b> John Albert
<b>Africa</b> Benjamin Jakobus	<b>Bernstein</b> Alicia Sheila	<b>* Burton</b> Dudley Walton	<b>* Cox</b> Herbert Walter
<b>Ahmed</b> Yusuf	<b>* Bernstein</b> Henry	<b>* Butcher</b> Nigel Ross	<b>Coxon</b> John Duncan
<b>Aitken</b> Robert James	<b>Bethlehem</b> Brian H James	<b>Butler</b> George Parker	<b>Craig</b> Cecil John Tainton
<b>Alderton</b> Norman	<b>Beukes</b> Hendrik Johannes Stefanus	<b>Butt</b> Anthony Dan	<b>Crewe-Brown</b> Heather Helen
<b>* Alexander</b> Louis Leonard	<b>* Bezuidenhout</b> Daniel Johannes J	<b>Buys</b> Anna Catherina	<b>Crichton</b> Eric Derk
<b>Allan</b> John Cameron	<b>Bezwoda</b> Werner Robert	<b>Byrne</b> James Peter	<b>Crosier</b> James Herbert
<b>* Allen</b> Colin E Lewer	<b>Beyer</b> Elke Johanna Inge	<b>* Cain</b> Michael Frank	<b>Crosley</b> Anthony Ian
<b>* Allen</b> Keith Lewer	<b>Biddulph</b> Sydney Lionel	<b>Caldwell</b> Michael William	<b>Croucamp</b> Petrus C Hendrik
<b>* Allen</b> Peter John	<b>Biebuyck</b> Julien Francois	<b>Caldwell</b> Robert Ian	<b>Cullis</b> Sydney Neville Raynor
<b>Allie</b> Abduraghiem	<b>Binnewald</b> Bertram R Arnim	<b>Campbell</b> Derek Gilliland	<b>Cumes</b> David Michael
<b>Allison</b> John Graham	<b>* Bird</b> Allan Vivian	<b>Carim</b> Abdool Samad	<b>Cywes</b> Sidney
<b>Allwood</b> Clifford William	<b>Blair</b> Ronald Mc Allister	<b>Carim</b> Suliman	<b>* Dall</b> George
<b>Allwright</b> George Tunley	<b>Blaylock</b> Roger Selwyn Moffat	<b>Catterall</b> Robert Desmond	<b>Dalrymple</b> Desmond Ross
<b>* Anderson</b> Donald Frederick	<b>* Blecher</b> John Aubrey	<b>Catzel</b> Pincus	<b>Dalrymple</b> Rhidian Blake
<b>* Anderson</b> Joan	<b>Bleloch</b> John Andrew	<b>Cavadas</b> Aikaterine	<b>Danchin</b> Jack Errol
<b>Anderson</b> Mary Gwendoline	<b>Bloch</b> Cecil Emanuel	<b>Chaimowitz</b> Meyer Alexander	<b>* Dando</b> Raymond Victor
<b>Anderton</b> Edward Townsend	<b>Bloch</b> Hymen Joshua	<b>Chait</b> Jack	<b>Daneel</b> Alexander Bertin
<b>Andre</b> Nellie Mary	<b>* Block</b> Joseph	<b>Charles</b> David Michael	<b>Daniel</b> Clive Herbert
<b>Andrew</b> William Kelvin	<b>Block</b> Sidney	<b>Charles</b> Lionel Robert	<b>Danilewitz</b> Daniel
<b>Appleberg</b> Michael	<b>Blum</b> Lionel	<b>* Charlewood</b> Godfrey Phillips	<b>Darlison</b> Michael Tatlow
<b>Archer</b> Graham Geoffrey	<b>* Blyth</b> Alan George	<b>Charlton</b> Robert William	<b>Daubenton</b> François
<b>* Armitage</b> Bernard Albert	<b>Bock</b> Ortwin A Alwin	<b>* Charmock</b> Frederick Niven	<b>* Daubenton</b> François (Snr)
<b>* Arndt</b> Theodore C Heinrich	<b>* Bodenstab</b> Albert TBH	<b>* Cheetham</b> Richard W Spencer	<b>Daubenton</b> John David
<b>Asmal</b> Aboobaker	<b>* Bok</b> Louis Botha	<b>* Chenik</b> Gerald Samson	<b>Davey</b> Dennis Albert
<b>* Baigrie</b> Robert D Hutchinson	<b>* Booth</b> John Vivian	<b>* Chetty</b> Dhevaraj Vasudeva	<b>Davidson</b> Aaron
<b>* Bailey</b> Michael John	<b>Borchers</b> Trevor Michael	<b>* Chitters</b> Max	<b>Davies</b> David
<b>Baillie</b> Peter	<b>Bosman</b> Christopher Kay	<b>* Chouler</b> Florence Joan Gordon	<b>Davis</b> Michael Ross Quail
<b>Baines</b> Richard E Mackinnon	<b>* Botha</b> Daniel Johannes	<b>* Cilliers</b> Leon	<b>Davis</b> Charles Pierre
<b>Baise</b> Gershan	<b>Botha</b> Jan Barend Christiaan	<b>Cilliers</b> Pieter Hendrik Krynauw	<b>* Davis</b> Meldrum J Fimmamore
<b>Baker</b> Graeme Cecil	<b>Botha</b> Jean René	<b>Cinman</b> Arnold Clive	<b>Dawes</b> Marion Elizabeth
<b>Baker</b> Lynne Wilford	<b>* Botha</b> Louis Johannes	<b>Claassen</b> Hermanus JH	<b>* Daynes</b> William Guy
<b>Baker</b> Peter Michael	<b>Bothwell</b> Thomas Hamilton	<b>Clausen</b> Lavinia	<b>De Beer</b> Hardie Alfred
<b>Barbezat</b> Gilbert Olivier	<b>Bouille</b> Trevor Paul	<b>* Cluver</b> John Arthur	<b>De Klerk</b> Daniel Johannes Janse
<b>Barday</b> Abdul Wahab	<b>Bowen</b> Robert Mitford	<b>Clyde</b> Jack Howard	<b>* De Kock</b> Johannes Hendrikus
<b>* Barlow</b> John Brereton	<b>Bowie</b> Malcolm David	<b>Coetzee</b> Daniël	<b>* De Kock</b> Machiel Adriaan
<b>* Barnard</b> Christiaan Neethling	<b>* Bradlow</b> Bertram Abraham	<b>Coetzer</b> Hendrik Martin	<b>De Villiers</b> Jacques Charl
<b>Barnard</b> Philip Grant	<b>Braude</b> Basil	<b>Cochrane</b> Raymond Ivan	<b>* De Villiers</b> Jan Naude
<b>* Barnard</b> Pieter Melius	<b>Bremer</b> Paul MacKenzie	<b>Cohen</b> Brian Michael	<b>De Villiers</b> Pieter Ackerman
<b>Barnes</b> Donal Richard	<b>Bremner</b> Cedric Gordon	<b>Cohen</b> David	<b>De Wet</b> Jacobus Johannes
<b>Barnetson</b> Bruce James	<b>* Brenner</b> Dietrich Karl	<b>Cohen</b> Eric	<b>Dean</b> Joseph G Kerfoot
<b>* Barrett</b> Carl T Herzl	<b>Briedé</b> Wilhelmus M Hendrik	<b>Cohen</b> Harvey	<b>* Denis-Lester</b> Leslie
<b>* Barron</b> David	<b>Brink</b> Andries Jacob	<b>Cohen</b> Leon Allan	<b>Dent</b> David Marshall
<b>Barry</b> Michael Emmet	<b>Brink</b> Garth Kuys	<b>Cohen</b> Michael	<b>Dennehy</b> Patrick J Pearce
<b>* Baskind</b> Eugene	<b>Brink</b> Stefanie	<b>Cohen</b> Michael	<b>Derman</b> Henry Jack
<b>* Batchelor</b> George Bryan	<b>Brits</b> Jacobus Johannes	<b>Cohen</b> Morris Michael	<b>De Zeeuw</b> Paul
<b>Bax</b> Geoffrey Charles	<b>Brock-Utne</b> John Gerhard	<b>Cohen</b> Philip Lester	<b>Dhansay</b> Jalaluddin
<b>Bean</b> Eric	<b>Brokensha</b> Brian David	<b>Coller</b> Julian Somerset	<b>Dhansay</b> Yumna
<b>Beatty</b> David William	<b>Broude</b> Abraham Mendel	<b>Combrink</b> Johanna Elizabeth	<b>* Dickie-Clark</b> William Findlay
<b>Becker</b> Herbert	<b>* Brown</b> Alexander Annan		<b>Diers</b> Garth Ruben

- Digby** Rodney Mark  
**Distiller** Lawrence Allen  
**Docrat** Rookayia  
 \* **Domnisse** George Frederick  
**Donald** Peter Roderick  
**Dornfest** Franklyn David  
**Douglas-Henry** Dorothea  
**Dove** Ephraim  
 \* **Dove** Jechiel  
 \* **Dowdle** Eugene B Davey  
**Dower** Peter Rory  
 \* **Dreyer** Cornelis Jan  
**Dreyer** Wynand Pieter  
 \* **Dubb** Seymour  
 \* **Duckworth** William Calvert  
**Duncan** Harold James  
**Dunning** Richard Edwin Frank  
 \* **Du Plessis** Daniel Jacob  
**Du Plessis** Dionisius Johann  
**Du Plessis** Hendrik Pienaar  
**Du Plessis** Hennie Lodewia  
 \* **Du Plessis** Hercules Gerhardus  
 \* **Du Plessis** Willem Hendrik  
**Durham** Francis James  
 \* **Du Toit** Guillaume Tom  
**Du Toit** Johan Jakob  
**Du Toit** Johan Loots  
**Du Toit** Pierre F Mulvihl  
**Duursma** Rienk Willem  
**Duys** Pieter Jan  
 \* **Dykman** Cornelis Derksen  
 \* **Eales** Lennox  
**Eathorne** Allan James  
**Edelstein** Harold  
 \* **Edelstein** Wolfe  
**Edge** Kenneth Roger  
 \* **Edge** William E Basil  
**Ehrlich** Hyman  
**Eksteen** Jurgen Kotze  
 \* **Engelbrecht** Jacobus Adriaan  
**Enslin** Ronald  
 \* **Enslin** Theophilus Benedictus  
 \* **Epstein** Edward  
**Erasmus** Frederick Rudolph  
**Erasmus** Philip Daniel Christoffel  
**Essack** Maimona  
**Esterhuysen** Stephen Philip  
**Etellin** Pierre Anthony  
**Evans** Warwick Llewellyn  
 \* **Evans** William Benjamin David I  
 \* **Eyre** Jane  
 \* **Faiman** Israel Osseer  
 \* **Fainsinger** Maurice Haig  
**Fanarof** Gerald  
**Fehler** Boris Michael  
 \* **Feldman** Max Bernard  
**Fergusson** David J Guillemard  
**Fernandes** Carlos Manuel Coelho  
**Findlay** Cornelius Delfos  
**Fine** Julius  
**Fine** Leon Arthur  
**Fine** Stuart Hamilton  
 \* **Fischer** Gustav Fichardt  
**Fisher-Jeffes** Donald Leonard  
**Fleishman** Solomon Joel  
**Flynn** Michael Anthony  
**Fontein** Batholomeus T Petrus  
 \* **Foord** Charles John  
**Forman** Robert  
**Förtsch** Hagen E Armin  
**Foster** Nathaniel E George  
**Foster** Patrick Anthony  
 \* **Fourie** Christian F Gilsen  
**Frankel** Freddy Harold  
**Frank** Joachim Roelof  
 \* **Franks** Maurice  
**Freedman** Jeffrey  
 \* **Freeman** Arthur Arnold  
**Freiman** Ida  
 \* **Friedberg** David  
 \* **Friedland** Benjamin Percival  
 \* **Friedman** Isidore  
 \* **Friedman** Sydney  
**Friedmann** Allan Isodore  
**Fritz** Vivian Una  
 \* **Frost** Cyril  
**Froese** Steven Philip  
 \* **Fuller** Denis Norden  
 \* **Futeran** Gerald  
**Galatis** Chrisostomos  
**Galloway** Peter Allan  
**Gani** Akbar  
**Garb** Minnie  
**Gardner** Jacqueline Elizabeth  
 \* **Gasson** Charles H Reginald  
**Gasson** John Edward  
**Gaylis** Hyman  
 \* **Geere** Jacobus Johannes  
 \* **Geerling** Rudolf  
 \* **Geffen** Heime  
 \* **Geldenhuis** Frans Gert  
**Gentin** Benjamin  
 \* **Gerber** Johan Abraham  
**Gersh** Bernard John  
**Gibson** John Hartley  
**Gildenhuys** Jacobus Johannes  
**Gillis** Lynn Sinclair  
 \* **Gillmer** Ralph Ellis  
 \* **Ginsberg** Hilde  
 \* **Girdwood** Donald Hampden  
**Glazer** Harry  
 \* **Glen** Alan Murray  
 \* **Gluckman** Jonathan  
**Glyn** Thomas Raymond  
**Goeller** Errol Andrew  
 \* **Goetz** Robert Johannes  
 \* **Goldberg** Solomon  
 \* **Goldblatt** Nochem  
**Goldin** Martin  
**Goldschmidt** Reith Bernard  
**Goldstein** Bertie  
 \* **Gollach** Benjamin Leonard  
**Goodley** Robert Henry  
**Goodman** Hillel Tuvia  
**Goosen** Felicity  
 \* **Gordon** Grant M Cameron  
 \* **Gordon** Isidor  
**Gordon** Robert John  
 \* **Gordon** Vivian Nathan  
 \* **Gordon** Walter  
 \* **Gordon-Smith** Derek Peter  
**Gorvy** Victor  
**Govender** Perisamy  
 Neelapithambaran  
**Govind** Uttam  
 \* **Gowans** Ronald  
 \* **Graham** John Donald  
**Graham** Kathleen Mary  
 \* **Grant** John F Cardross  
**Grave** Christopher John Hadley  
 \* **Grayce** Isaac  
 \* **Greik** Isaac Joseph  
**Greyling** Jacobus Arnoldus  
 \* **Grieve** James Muir  
**Griffiths** Joan McElwee  
**Griffiths** Seaton Bythyl  
**Grimbeek** Johannes Fredericus  
**Grobbelaar** Nicolaas Johannes  
**Grobler** Johannes Lodewikus  
**Grobler** Marthinus  
**Grotepass** Frans Willem  
 \* **Grundill** Wilfrid  
 \* **Grusiner** Wolf  
 \* **Haarburger** Oswald Maximilian  
 \* **Hacking** Edgar Bolton  
**Haffejee** Ismail Ebrahim  
 \* **Hamelberg** Henri Jacques  
 \* **Hamilton** Clarence Gawn  
 \* **Hamilton** Donald Graham  
 \* **Hamilton Ritchie** Douglas Archibald  
**Hammer** Alan John  
**Hangelbroek** Peter  
**Hansen** Denys Arthur  
**Hansen** John D Lindsell  
**Harper** Peter James  
**Harris** Ian Michael  
 \* **Harris** Michael  
 \* **Harrison** Derek Haddrell  
 \* **Harrison** Gaisford Gerald  
**Hartdegen** Richard Gerhardus  
**Hartley** Patricia Staunton  
**Hartman** Ella  
**Hassan** Mohamed Saeed  
 \* **Haupt** Frank Johannes Groot  
**Hawthorne** Henry Francis  
 \* **Haynes** Donovan Russell  
**Hayward** Frederick  
**Head** Mark Stephen  
**Heese** Hans de Villiers  
**Heitner** Rene  
**Hefer** Adam Gottlieb  
 \* **Helfet** Arthur Jacob  
**Helman** Isaac  
**Henderson** Linda Grantham  
**Henderson** Rex Scott  
 \* **Hendrix** Robert J Maria  
 \* **Henning** Alwyn J Harvard  
 \* **Henson** Solomon  
 \* **Hersch** Sidney Julius  
 \* **Hersman** Doris  
 \* **Heselson** Jack  
 \* **Heymann** Seymour Charles  
**Heyns** Anthon du Plessis  
**Hift** Walter  
**Higgs** Stephen Charles  
**Hill** John William  
**Hill** Paul Villiers  
**Hillock** Andrew John  
 \* **Hilson** Don  
**Hirschowitz** Jack Sydney  
**Hirschson** Herman  
**Hitchcock** Peter John  
**Hockly** Jacqueline Douglas Lawton  
**Hoffmann** David Allen  
**Hoffmann** Vivian Jack  
 \* **Hofmeyr** Francis Edward  
**Hofmeyr** Nicholas Gall  
**Holdsworth** Louis David  
**Holland** Victor Bernard  
**Holloway** Alison Mary  
**Horak** Lindley Rousseau  
**Horowitz** Stephen Dan  
 \* **Hossy** Sidney Charles  
**Hovis** Arthur Jehiel  
**Howell** Michael E Oram  
**Howes** Neville Edward  
**Hugo** André Paul  
 \* **Hugo** Pierre Andre  
 \* **Human** Randolph Russell  
**Hundleby** Christopher J Bretherton  
**Hurwitz** Charles Hillel  
**Hurwitz** Mervyn Bernard  
**Hurwitz** Solomon Simon  
**Huskisson** Ian Douglas  
**Hyslop** Robert James  
**Immelman** Edward John  
**Ichim** Camelia Vasilica  
**Ichim** Liviu  
 \* **Ingle** Pauline Cornwell  
**Isaacson** Charles  
**Ismail** Khalid Hajee  
 \* **Ismail** Mahomed Hoosen Hajee  
**Israelstam** Dennis Manfred  
 \* **Jacob** Hilderbrand Hamilton  
**Jacobs** Daniel Pieter Sydney  
**Jacobs** Miguel Adrian  
**Jacobs** Peter  
 \* **Jacobson** Isaac  
 \* **Jaffe** Basil  
**Jammy** Joel Tobias  
**Jan** Farida  
**Janse van Rensburg** Johan Helgard  
 \* **Janse van Rensburg** Lucas Carl  
**Jansen** van Rensburg Martinus  
**Jassat** Essop Essak  
**Jasön** Peter Michael Constantine  
**Jedeikin** Leon Victor  
**Jeena** Hansa  
**Jeffery** Peter Colin  
 \* **Jeppé** Carl L Biccarrd  
**Jersky** Jechiel  
**Jöckel** Wolfgang Heinrich  
 \* **Joel-Cohen** Sidney  
**Joffe** Leonard  
**Joffe** Stephen Neal  
**Johnson** Sylvia  
 \* **Jones** Cecil Stanley  
**Jonker** Edmund  
**Jooste** Edmund  
**Jooste** Jacobus Letterstedt  
**Jordaan** James Charles  
**Jordaan** Johann Petrus  
**Jordaan** Robert  
**Joubert** James Ratray  
**Kaiser** Walter  
 \* **Kalley** Harold Aaron  
**Kane-Berman** Jocelyne Denise  
 Lambie  
**Kaplan** Cyril Jacob  
 \* **Kaplan** Harry  
**Kaplan** Neville Lewis  
**Karlsson** Eric Lennart  
 \* **Karstaedt** Abraham Lemel  
 \* **Katz** Arnold  
 \* **Katz** Hymie  
**Kaufman** Morris Louis  
 \* **Kay** Sholem  
 \* **Keen** Edward Norman  
**Keet** Marie Paulowna  
**Keet** Robert Arthur  
**Keeton** Godfrey Roy  
**Kemp** Donald Harold Maxwell  
**Kenyon** Michael Robert  
**Kernoff** Leslie Maurice  
 \* **Kerr** Edward Matson  
**Kessler** Edmund  
**Kew** Michael Charles  
**Key** Jillian Jane Aston  
**Kieck** Charles Frederick  
**King** Jennifer Ann  
**King** John Frederick  
**Kinsley** Robin Howard  
 \* **Kirsch** Ralph Emmanuel  
 \* **Kisner** Cyril David  
 \* **Klein** Herman  
**Klein** Hymie Ronald  
 \* **Klenerman** Pauline  
**Klevansky** Hyman  
**Kling** Kenneth George  
**Klopper** Johannes Frederick  
 \* **Kloppers** Philippus Johannes  
**Klugman** Leon Hyam  
**Knobel** John  
 \* **Knocker** Phyllis A Hendrika  
**Knoetze** Gerald Casparus  
 \* **Knox** Lance O'Neil  
**Kok** Hendrick Willem Lindley  
**Koller** Anthony Bruce  
 \* **Koopowitz** Joseph Ivan  
 \* **Kornell** Simon  
**Kotton** Bernard  
 \* **Kotzé** Johannes van Zyl  
**Koz** Gabriel  
 \* **Kramer** Michael Sherman  
**Krengel** Binioimin  
 \* **Kretzmar** Noel

- Kriel** Jacques Ryno  
 \* **Krige** Christiaan Frederick  
**Krige** Louis Edmund  
 \* **Kriseman** Michael Maurice  
 \* **Krogh** Lex  
**Kussel** Jack Josiah  
**Kussman** Barry David  
**Labuschagne** Izak  
**Lachman** Anthony Simon  
 \* **Lachman** Sydney Joshua  
**La Grange** Jacobus Johannes Christiaan  
**Laing** John Gordon Dacomb  
**Lake** Walter Thomas  
**Lallo** Maneklal  
**Lamont** Alastair  
**Lampert** Jack Arthur  
**Landsberg** Pieter Guillaume  
 \* **Landsman** Gerald Bernard  
**Lantermans** Elizabeth Cornelia  
 \* **Lapinsky** Gerald Bert  
**Large** Robert George  
**Lasich** Angelo John  
**Latif** Ahmed Suliman  
**Laubscher** Willem M Lötter  
**Lautenbach** Earle E Gerard  
 \* **Lawrence** Henry Martin  
**Lawson** Hugh Hill  
**Leary** Peter Michael  
**Leary** William P Pepperrell  
**Leask** Anthony Raymond  
**Leaver** Roy  
 \* **Lebona** Aaron David  
**Leeb** Julius  
 \* **Leeming** John A Lamprey  
 \* **Leigh** Werner E Julius  
**Lejuste** Michel JL Remi  
 \* **Lemmer** Eric Richard  
**Lemmer** Johan  
**Lemmer** Lourens Badenhorst  
**Le Roex** René Denysen  
 \* **Le Roux** Desmond Raubenheimer  
**Le Roux** Petrus A Jacobus  
**Lessing** Abraham J Petrus  
**Levenstein** Stanley  
**Levin** Joseph  
**Levin** Solomon Elias  
**Levy** Ernest Ronald  
**Levy** Reginald Bernard  
**Levy** Wallace Michael  
**Levy** Walter Jack  
**Lewin** Arthur  
 \* **Lewin** Ethel  
 \* **Lewis** Henry Montague  
**L'Heureux** Renton  
 \* **Liebenberg** Nicolaas Dreyer  
**Linde** Stuart Allen  
**Lipper** Maurice Harold  
 \* **Lipschitz** David  
 \* **Lipschitz** Robert  
 \* **Lipsitz** Max  
 \* **Lipworth** Edward  
**Lissoos** Irving  
**Lloyd** David Allden  
**Lloyd** Elwyn Allden  
**Lochner** Jan de Villiers  
**Lodemann** Heide Katharina  
**Loening** Walter E Karl  
**Lombard** Hermanus Egbertus  
**Loot** Sayyed M Hosain  
**Loots** Petrus Beaufort  
**Losken** Hans Wolfgang  
**Losman** Elma  
**Lotzof** Samuel  
**Loubser** Johannes Samuel  
 \* **Louw** Adriaan Jacobus  
 \* **Louw** John Xavier  
**Macdonald** Angus Peter  
**MacEwan** Ian Campbell
- \* **MacGregor** James MacWilliam  
**MacKenzie** Basil Louis  
**MacKenzie** Donald Bernard  
**MacLeod** Ian Nevis  
**MacPhail** Andrew Patrick  
 \* **Maggs** Roderick Frank  
**Maharaj** Ishwarlal Chiranjilal  
**Mahomed** Abdullah Eshaak  
**Mair** Michael John Hayes  
**Maitin** Charles Thabo  
**Malan** Atties Fourie  
**Malan** Christina  
 \* **Malan** Gerard  
**Maliza** Andile  
 \* **Malkiel-Shapiro** Boris  
**Mangera** Ismail  
 \* **Mangold** Fritz Theodor  
**Mankowitz** Emmanuel  
 \* **Mann** Noël Myddelton  
**Mann** Solly  
**Marais** Ian Philip  
**Marais** Johannes Stephanus  
 \* **Marchand** Paul Edmond  
**Maresky** Abraham Leib  
 \* **Maresky** Leon Solomon  
**Marivate** Russell  
**Margolis** Frank  
**Margolis** Kenneth  
**Marivate** Martin  
**Markman** Philip  
**Marks** Charles  
 \* **Masey** George R Frederick  
 \* **Mason** Eric Ivor Henry  
 \* **Massey** Patricia J Helen  
**Matisonn** Rodney Earl  
 \* **Matus** Szejma  
**Mauff** Alfred Carl  
**May** Abraham Bernard  
**Maytham** Dermine  
**McCosh** Christopher John  
**McCutcheon** John Peter  
**McDonald** Robert  
 \* **McIntosh** Robert Roy  
**McIntosh** William Andrew  
**McKenzie** Malcolm Bett  
 \* **McPhee** Michael Henry  
**Mears** Jasper W Walter  
**Meer** Farooq Moosa  
**Meeran** Mooideen Kader  
**Melville** Roger Laidman  
**Melville** Ronald George  
**Mervis** Benjamin  
 \* **Mendel** Sonnie Ivan  
 \* **Mendelow** Harry  
 \* **Mendelsohn** Leonard Meyer  
**Meyer** Antonie Christoffel  
**Meyer** Bernhardt Heinrich  
 \* **Meyer** Cornelius Martinus  
**Meyer** David  
**Meyer** De Bruto Laporta Cavalier  
 \* **Meyer** Eric Theodore  
 \* **Meyer** Jan Abraham  
**Meyer** Julius  
**Meyer** Roland Martin  
**Meyers** Anthony Molyneux  
**Meyersohn** Sidney Jacob  
**Meyerson** Louis  
 \* **Michael** Aaron Michel  
**Michaelides** Basil Andrew  
**Michaels** Maureen Jeanne  
**Michalowsky** Aubrey Michael  
**Michelow** Maurice Cecil  
**Midgley** Franklin John  
**Miény** Carel Johannes  
**Miles** Anthony Ernest  
**Millar** Robert Norman Scott  
 \* **Miller** Samuel  
**Milne** Anthony Tracey  
**Milne** Frank John
- Milner** Selwyn  
 \* **Mirkin** Wilfred Hyman  
**Misnuner** Zelik  
**Mitchell** Peter John  
**Mokhobo** Kubeni Patrick  
**Molapo** Jonathan Lepoqa  
 \* **Möller** Carl Theodorus  
**Molteno** Christopher David  
**Moodley** Jagidesa  
**Moodley** Thirugnanasumburanam  
**Moosa** Yousoof Mahomed  
**Moosa** Abdool-Sattar  
**Morley** Eric Clyde  
**Morrell** David Francis  
**Morris** Charles David Wilkie  
 \* **Morris** Derrick Ryder  
**Morris** Ediel  
**Morrison** Gavin  
**Moti** Abdool Razack  
**Movsowitz** Leon  
**Mullan** Bertram Strancham  
 \* **Muller** Hendrik  
**Mulligan** Terence P Simpson  
 \* **Mundy** Raymond  
 \* **Murray** Neil Laird  
 \* **Myburgh** Johannes Albertus  
**Myers** Leonard  
**Naidoo** Balagaru Narsimaloo  
**Naidoo** Lutchman Perumal  
**Naidoo** Neetheanathan  
**Naidoo** Premilla Devi  
**Nair** Gonasegrie Puckree  
**Nanabhay** Sayed Suliman  
**Nash** Eleanor Scarborough  
**Naude** Johannes Hendrik  
 \* **Naylor** Aubrey Chalkley  
**Neifeld** Hyman  
**Nel** Elias Albertus  
**Nel** Jan Gideon  
**Nel** Jacques Bernadus Anton  
**Nel** Pieter Daniel  
 \* **Nel** Rhoderic William Arthur  
**Nel** Wilhelm Stephanus  
**Neser** Francois Nicholas  
**Nestadt** Allan  
**Newbury** Claude Edward  
 \* **Nicholson** John Campbell  
**Nicholson** Melanie Eugene  
**Noble** Clive Allister  
**Noll** Brian Julian  
**Norman-Smith** Jack  
 \* **Norwich** Isadore  
**Novis** Bernard  
**Nurick** Ivan James  
**Obel** Israel Woolf Promund  
**Odendaal** Hendrik Johannes  
**Okreglicki** Andrzej Michael  
**Olinisky** Anthony  
**Oliver** Johannes Andries  
**Omar** Yusuf  
 \* **Opie** William Henry  
**Orelowitz** Manney Sidney  
**Osler** Henry Ingram  
**Ospovat** Norman Theodore  
**Padayatchi** Perumal  
**Palmer** Philip Edward Stephen  
**Palmer** Raymond Ivor  
**Pantanowitz** Desmond  
 \* **Paradisgarten** Hymie Charles  
**Parkes** John Ryan  
**Parsons** Arthur Charles  
 \* **Pascoe** Francis Danby  
**Pasco** Michael Danby  
**Patel** Prabhakant Laloo  
**Pather** Runganayagum  
**Pearlman** Theodore  
**Peer** Dawood Goolam Hoosen  
 \* **Penn** Jack  
 \* **Penzhorn** Herbert Otto
- Pelser** Frank Bignaut  
 \* **Pein** Nathaniel Kemsley  
 \* **Perdikis** Phoebus  
 \* **Perk** David  
**Peters** Ralph Leslie  
**Pettifor** John Morley  
**Philcox** Derek Vincent  
**Phillips** Gerald Isaac  
**Phillips** Keith Radburn  
**Phillips** Louisa Marilyn  
 \* **Piesold** Gerald A Ferdinand  
 \* **Pieterse** Holland Frederik  
**Pillay** George Permall  
**Pillay** Govindasamy Sokalingum  
**Pillay** Rathinasabapathy Arumugam  
**Pillay** Thiagarajan Sundragasen  
**Pillay** Veerasamy K Govinda  
**Planer** Meyer  
**Plit** Michael  
**Polakow** Everard Stanley  
 \* **Polakow** Raphaely  
**Politzky** Nathan  
**Pollak** Otilie  
**Polley** Neville Alfred  
**Pompe van Meerdervoort** Hjalmar Frans  
**Porteous** Paul Henry  
**Porter** Christopher Michael  
 \* **Posel** Max Michael  
**Potgieter** Hermanus Jacobus  
 \* **Potgieter** Louis  
**Power** David John  
**Prentice** Bernard Ross  
**Pretorius** David H Schalk  
**Pretorius** Hendrik Petrus Jacobus  
**Pretorius** Jack  
**Pretorius** Johannes Adam  
**Pretorius** Johannes Jacobus  
**Pretorius** Johannes Lodewikus  
 \* **Price** Samuel Nathaniel  
**Prinsloo** Simon Frederik  
**Prinsloo** Simon Lodewyk  
**Procter** Desmond S Collacott  
**Prosser** Geoffrey Leslie  
**Prowse** Clive Morley  
**Przybojewski** Jerzy Zbigniew  
**Pudifin** Dennis James  
**Quan** Tim  
**Quantock** Owen Peter  
**Quinlan** Desmond Kluge  
**Quirke** Peter Dathy Grace  
 \* **Rabinowitz** Albert  
 \* **Rabinowitz** Leslie  
**Radford** Geoffrey  
**Raftopoulos** Paris  
**Raghavjee** Indira Vaghjee  
**Raine** Edgar Raymond  
**Rankin** Anthony Mottram  
**Ransome** Oliver James  
**Rayman** Ashley  
**Rebstein** Stephen Eric  
**Redfern** Michael John  
**Reichman** Leslie  
**Reichman** Percy  
 \* **Reid** Frederick Payne  
**Reidy** Jeremy Charles  
**Reif** Simon  
**Reinach** Werner  
**Renton** Maurice Ashley  
**Retief** Daniel Hugo  
 \* **Retief** Degenes Jacobus  
**Retief** Francois Jacobus  
**Retief** Francois Johannes Petrus  
**Retief** Francois Pieter  
**Reynders** Johannes Jurgens  
**Reyneke** Philippus Johannes  
**Rice** Gordon Clarke  
 \* **Richey** Allan Frank Whitfield  
**Richards** Alan Trevor



- Richmond** George  
**Ritchken** Harry David  
**Roberts** William A Brooksbank  
 \* **Roberts** William Michael  
 \* **Robertson** Thomas Chalmers  
**Robinson** Brian Stanley  
**Rode** Heinz  
**Rogan** Ian MacKenzie  
**Roediger** Wolf Ernst Wilhelm  
**Roelofse** Hendrik Johannes  
**Roman** Horatius E Hereward  
**Roman** Trevor Errol  
**Rome** Paul  
**Roos** Charles Phillipus  
**Roos** Nicolaas Jacobus  
**Roose** Patricia Garfield  
**Rosenberg** Basil  
**Rosenberg** Edwin Robert  
 \* **Rosenthal** Elijah  
 \* **Rosin** Isodore Roland  
 \* **Ross** Bremner Lloyd  
**Rousseau** Theodore Emile  
**Rossouw** Dennis Pieter  
 \* **Rossouw** Johan Tertius  
 \* **Rothschild** Emil E Aaron  
 \* **Roux** Daniel Jacobus  
**Rudolph** Isidore  
 \* **Russell** John Tait  
 \* **Rutovitz** Isaac Jacob  
**Ryan** Raymond  
 \* **Sacks** Selig  
 \* **Sacks** Sidney  
**Sacks** William  
**Safro** Ivor Lawrence  
**Salant** David John  
 \* **Salkinder** Joe  
**Samson** Ian David  
**Samson** John Monteith  
**Sandeman** John Charles  
 \* **Sanders** Eric John  
**Sanders** Hannah-Reeve  
**Sandison** Alexander Gorrie  
 \* **Saner** Robert Godfrey  
**Sapire** David Warren  
 \* **Sarkin** Theodore Leonard  
 \* **Sartorius** Kurt Honbaum  
**Saunders** Stuart John  
**Saxe** Norma Phyllis  
**Schaetz** Albrecht Eberhard  
**Scallan** Michael John Herbert  
**Schepers** Anton  
 \* **Schepers** Nicolaas Jacobus  
**Scher** Alan Theodore  
**Schneider** Cecil Max  
 \* **Schneider** Tobias  
**Schneider** Felix Theodore  
**Scholtz** Roelof  
**Schutte** Philippus Johannes  
**Shuttleworth** Richard Dalton  
**Schwär** Theodor Gottfried  
**Schwarz** Kurt  
**Scott** Bruce William Haigh  
 \* **Scott** James Graham  
**Scott** Neil Petrie  
**Scott** Quentin John  
 \* **Scott** Walter Fleming  
**Scragg** Joan Noelle  
**Seaward** Percival Douglas  
**Sedgwick** Jerome  
**Seedat** Yackoob Kassim  
**Sellers** Sean Liam  
**Senior** Boris  
 \* **Sesel** John Ruby  
**Shapiro** Benjamin Leon  
 \* **Shapiro** Max Phillip  
 \* **Shapiro** Norman  
**Sharpe** Jean Mary  
**Shear** Mervyn  
**Sher** Gerald
- Sher** Geoffrey  
**Sher** Joseph Norman  
**Sher** Mary Ann  
**Sher** Rickard Charles  
**Shété** Charudutt Dattatraya  
**Shulman** Louis  
**Shweni** Phila Michael  
**Siew** Shirley  
**Silberman** Reuben  
**Silbert** Maurice Vivian  
**Simons** George Arthur  
 \* **Simonsz** Christiaan G Adolph  
 \* **Simpson** Thomas Victor  
**Simson** Ian Wark  
**Singer** Martin  
 \* **Sischy** Benjamin  
 \* **Skinner** Donald Pape  
**Skudowitz** Reuben Benjamin  
**Sliom** Cyril Meyer  
 \* **Smalberger** Johannes Marthinus (Snr)  
**Smit** Wilhelm Michiel  
**Smith** Alan Nathaniel  
 \* **Smith** John Alaister  
 \* **Smith** Lionel Shelsley  
**Smith** Michael Ewart  
 \* **Smith** Petrus Nicolaas  
 \* **Smulian** Hubert Godfrey  
 \* **Smythe** Patrick Montrose  
**Sneider** Paul  
**Snyman** Adam Johannes  
**Snyman** Hendrick G Abraham  
 \* **Solomon** Herman Israel  
**Somera** Satiadev  
**Sonnendecker** Ernest W Walter  
**Sparks** Bruce Louis Walsh  
**Spies** Sarel Jacob  
**Spilg** Harold  
 \* **Spitz** Mendel  
**Stein** Aaron (Archie)  
**Stein** Abraham  
 \* **Stein** Leo  
**Stein** Lionel  
**Stein** Mannie  
 \* **Stern** Ferdinand  
**Stewart-Wynne** Edward George  
 \* **Steyn** Dora Nell  
**Steyn** Gerbrandt  
**Steyn** Izak Stefanus  
**Stronkhorst** Johannes Hendrikus  
**Styger** Viktor  
**Suliman** Abdoorahaman Ebrahim  
**Sur** Monalisa  
**Sur** Ranjan Kumar  
 \* **Sutin** Gerald Joseph  
 \* **Suzman** Moses Myer  
**Svensson** Lars Georg  
**Swanepoel** André  
 \* **Swart** Barend Hermanus  
**Swart** Johannes Gerhardus  
**Swartz** Jack  
**Swift** Peter John  
**Tang** Kenneth  
**Tarboton** Peter Vaughan  
**Taylor** Robert Kay Nixon  
**Te Groen** Frans Wilhelmus  
 \* **Te Groen** Lutherus H Treub  
 \* **Teeger** Arnold  
**Terblanche** John  
**Terespolsky** Percy Samuel  
**Thaning** Niels-Otto  
 \* **Thatcher** Geoffrey Newton  
**Theron** Eduard Stanley  
**Theron** Francis  
**Theron** Jakobus L Luttig  
**Tinker** John  
**Thomson** Alan J George  
**Thomson** Morley Peter  
**Thomson** Peter Drummond
- Thompson** Michael Wilson Balfour  
**Thompson** Roderick Mark McGregor  
**Thorburn** Kentigern  
**Thornington** Roger Edgar  
**Thorp** Marc Alexander  
 \* **Tobias** Ralph Lulu  
**Toker** Eugene  
 \* **Tomlinson** John R Dacomb  
**Treisman** Oswald Selwyn  
**Trichard** Louis C G Lennox  
 \* **Trope** Robert Allan  
 \* **Trott** Edmund Lorimer  
 \* **Trubshaw** William H Daines  
 \* **Tucker** Robert D St George  
**Tucker** Ronald B Kidger  
**Turner** Peter James  
**Underwood** Ronald Arthur  
**Ungerer** Matthys Johannes  
**Utian** Hessel Lionel  
**Vahed** Abdul Khalek Ahmed  
**Valjee** Ashwin  
**Van Coeverden de Groot** Herman A  
**Van Coller** Beulah Marie  
**Van den Berg** Andries D Petrus  
**Van den Bergh** Cornelius Jacob  
**Van den Ende** Jan  
**Van der Merwe** Christiaan  
**Van der Merwe** Gideon Daniel  
**Van der Merwe** Hendrik Johannes  
**Van der Merwe** Jan Abraham  
**Van der Merwe** Pieter-Luttig  
**Van der Merwe** Schalk W Petrus  
**Van der Meyden** Cornelis Hendrikus  
 \* **Van der Riet** John Werendly  
 \* **Van der Riet** Ryno le Seur  
**Van der Spuy** Johan Wilhelm  
**Van der Walt** André  
 \* **Van der Walt** Johannes Joachim  
**Van der Walt** Pieter Johannes  
**Van der Wat** Jacobus JH Botha  
 \* **Van Dongen** Leon G Raymond  
**Van Drimmelen** Bertha  
**Van Drimmelen** Pieter  
**Van Gelderen** Cyril Jack  
**Van Graan** Nico Jacobus  
**Van Greunen** Francois  
 \* **Van Hasselt** Carel Hugh  
**Van Helsdingen** Jacobus O Tertius  
 \* **Van Huyssteen** Hendrik Roelof (Snr)  
**Van Leenhoff** Johannes Willem  
**Van Niekerk** Christopher  
**Van Niekerk** Christoffel Hendrik  
**Van Niekerk** Gilbert André  
**Van Niekerk** Johannes Philippus de Villiers  
 \* **Van Niekerk** Willem Abraham  
 \* **Van Rooyen** Adriaan J Louw  
 \* **Van Schalkwyk** Colin Henri  
**Van Schalkwyk** Derrick  
**Van Schalkwyk** Herman Eben  
**Van Schouwenburg** Johan Andries Michiel Heyns  
**Van Selm** Christopher Denys  
 \* **Van Selm** Justin Leander  
**Van Wyk** Chris  
**Van Wyk** Eugene Muller  
**Van Wyk** Frederick A Kelly  
 \* **Van Zyl** Jakobus J Wynand  
**Van Zyl-Smit** Roal  
**Velzeboer** Sally Jane  
**Venter** Pieter Ferdinand  
 \* **Victor** Arthur  
**Viljoen** Ignatius Michael  
 \* **Viljoen** Theunis Gabriel  
**Visser** Daniel  
 \* **Vogelpoel** Louis  
**Von Varendorff** Edeltraud Mathilde  
**Von Wielligh** Gysbertus Johannes  
 \* **Vooght** Terence Edward
- Vorster** Carl Theodorus  
 \* **Vosloo** Arnoldus Johannes  
**Wade** Harry  
**Wahl** Jacobus Johannes  
**Waller** David Anthony  
**Walker** Dennis Hamilton  
**Walker** John Douglas  
 \* **Walker** Lindsay Hamilton  
**Walls** Ronald Stewart  
 \* **Walsh** James Clifford  
 \* **Warren** George St Leger  
 \* **Watson** Ian France  
 \* **Wayburne** Samuel  
**Webber** Bruce Leonard  
**Weich** Dirk Jacobus Visser  
**Weinberg** Eugene Godfrey  
 \* **Weingartz** Felix Kruger  
**Wellsted** Michael Dennis  
**Welsh** Ian Bransby  
**Welsh** Neville Hepburn  
 \* **Welsh** Robert I Hepburn  
 \* **Wessels** Cornelius Johannes  
**Westaway** Joan Lorraine  
**Weston** Neville Anthony  
**Whiffler** Kurt  
 \* **White** Ian William Craig  
**Whitfield** Leslie Edwin  
**Whiting** David Ashby  
**Whittaker** David Ernest  
**Wickens** Johannes Tromp  
**Wienand** Adolf Johann  
**Wiggelinkhuizen** Jan  
**Wilkinson** Lynton Dallas  
**Willems** Pieter  
**Willems** Petrus Salmon  
**Williams** Margaret Ethel  
**Williams** Robert Edward  
**Wilson** Peter James  
**Wilson** Timothy Dover  
**Wilson** William  
**Wilton** Thomas Derrick  
**Wingreen** Basil  
**Winship** William Sinclair  
**Wise** Roy Oliver  
**Wittenberg** Dankwart Friedrich  
 \* **Wium** Peter Pet  
**Wolfsdorf** Jack  
 \* **Wood** Frank Henry  
**Wootton** John Barry Leif  
**Wranz** Peter Anthony Bernhard  
**Wright** Ian James Spencer  
**Wright** Michael  
**Wunsh** Louis  
 \* **Wykerd** Hermanus Claassens  
 \* **Wylde** Ronald Burns  
**Yakoob** Hamid Ismail  
 \* **Youngleson** John Henry  
**Yudaken** Israel Reuwen  
**Zaacks** Philip Louis  
**Zaaijman** John du Toit  
**Zabow** Tuviah  
**Zent** Clive Steven  
**Zent** Roy  
**Zieff** Solly  
**Zion** Monty Mordecai

## Fellowship *ad Eundem* As at 12 September 2011

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<b>Bowie</b> Malcolm David (C PAED) (2007)	Knysna
* <b>Breytenbach</b> Hermanus (CMFOS) (2001)	Stellenbosch
<b>Cleaton-Jones</b> Peter Eiddon (CD) (2005)	Johannesburg
<b>Corder</b> Robert Franklin (CEM) (2007)	Maryland, USA
<b>Davey</b> Dennis Albert (C PAED) (2008)	Bergvliet, Cape Town
<b>Davies</b> John Carol Anthony (CPHM) (2007)	Johannesburg
<b>Gear</b> John Spencer Sutherland (CPHM) (2005)	Still Bay
<b>Gevers</b> Wieland (CP) (2001)	Rosebank, Cape Town
* <b>Hansen</b> John D Lindsell (C PAED) (2007)	Plettenberg Bay
<b>Heese</b> Hans de Villiers (C PAED) (2007)	Rondebosch
<b>Keet</b> Marie Paulowna (C PAED) (2007)	Cape Town
<b>Levin</b> Solomon Elias (C PAED) (2007)	Johannesburg
<b>Lemmer</b> Johan (CD) (2003)	Johannesburg
<b>Makgoba</b> Malegapuru W (CP) (2003)	Durban
<b>Moodley</b> Jagidesa (COG) (1975)	Durban
<b>Ncayiyana</b> Daniel JM (CMSA) (2002)	Durban
<b>Odendaal</b> Hendrik Johannes (COG) (2009)	Cape Town
<b>Padayachee</b> Gopalan N (CPHM) (2004)	Cape Town
<b>Philpott</b> Hugh Robert (COG) (2008)	Durban
<b>Price</b> Max Rodney (CPHM) (2004)	Cape Town
<b>Saffer</b> Seelig David (C NEURO) (2004)	Johannesburg
<b>Sutcliffe</b> Thomas James (C PSYCH) (2008)	Cape Town
* <b>Van Reenen</b> Johannes F (C DENT) (2003)	George
* <b>Van Selm</b> Justin Leander (C OPHTH) (2005)	Plettenberg Bay
<b>Welsh</b> Neville Hepburn (C OPHTH) (2006)	Lydenburg

\* Deceased

## THE NATIONAL TISSUE BANK



UNIVERSITEIT VAN PRETORIA  
UNIVERSITY OF PRETORIA  
YUNIBESITHI YA PRETORIA  
Denkeleers • Leading Minds • Dikgopolo tša Dihalefi

# Tissue donation- Restoring quality of life

Thousands of South Africans await organ and tissue transplants and due to the critical shortage, donors are constantly sought. As with organs such as the heart, liver and kidneys, the demand for bone, tendons, skin, corneas and heart valves far outweighs the supply of these type of tissue. Through the advancement of modern technology, tissue transplants are becoming more prevalent as life-enhancing procedures for many. Your decision to become a tissue or organ donor can help save and drastically improve a life.

Tissue transplants can be both life-saving and life-enhancing. Skin for burn victims and heart-valve replacements are examples of life-saving transplants. Corneal transplants for visual impairment and bone transplant for limb reconstruction improve and restore quality of life. Transplants have become so successful that many people can be considered for this kind of treatment. Unfortunately, more and more critically ill patients are added to the waiting list daily, and this is happening faster than tissue becomes available. As a result, many individuals who could have lived through a transplant are dying.

One donor can help multiple patients, and no tissue compatibility is necessary with certain types of human tissue transplants. It is for this reason that The National Tissue Bank of the University of Pretoria needs to increase public awareness on the critical need for tissue by using various channels to address and educate the public on the subject matter.

As an ISO 9001- and ISO 13485 accredited human tissue bank, the Tissue Bank oversees and implements the entire process of human tissue donation and distribution, insisting on the highest standards in its policies, procedures and technological operation.

All potential donors are screened to determine donor suitability. This includes serological screening, and testing for infectious and transmittable diseases. Informed consent is always obtained from the next-of-kin, as is the donor's medical and social history.

Even if one is not a registered donor, donation is still possible, and one can always have a choice regarding the tissue or organs to be donated.

For more information about tissue donation, contact the National Tissue Bank toll-free at 0800 87 2663. Alternatively, visit the National Tissue Bank's website at [www.tissuebank.co.za](http://www.tissuebank.co.za).





## Presidential Newsletter



In this Presidential foreword of the *Transactions* of the Colleges of Medicine of South Africa (CMSA), I would like to focus on two aspects. The first is not taught at medical school or in postgraduate training, but is crucial in self-fulfilment. It would best be described by the words passion and inspiration.

When one critically analyses individuals that have made phenomenal advancements in whatever field, be it sports, politics, medicine, science, music, art, literature or any other arena, the question of ‘why’ arises. These individuals must surely have an innate ability and penchant for their particular fields. In his book “Outliers”, Malcolm Gladwell talks about the 10 000-hours rule. However I feel that to reach the true pinnacle, serving time is not the only prerequisite. You must also have the passion. You have to be excited about your field and it should stimulate you to make it seem as if your brain cells are on a continuous caffeine drip. This passion will drive you and propel you to greater heights. The obvious next question is – where does this passion come from? Sometimes it could be acquired from personal experience and circumstances. It could sometimes be innate. The third source could be inspiration by someone, something or events. You often read about truly remarkable achievements under adverse

circumstances. Imagine people like Christopher Columbus, Sir Edmund Hillary and Tensing, Neil Armstrong, and you will instantly recognise the mindset and mental strength of these individuals. It shows you that although the body has physical limitations, the strength of the mind is boundless.

Not all of us will be able to achieve great heights, as perceived by society or other parameters. However, each one of us has the ability to achieve, although this may vary from individual to individual. I strongly believe that the majority of the population achieves a small fraction of what their potential and capability allows them to. This is because people place limitations on themselves and accept a comfort zone. One must challenge boundaries, question accepted reasoning, remove limitations, set goals and welcome challenges. One must allow the mind to expand and set goals that, once achieved, will bring a euphoric sense of achievement and fulfilment.

The second aspect which I want to discuss is that of medical research, and how to raise that bar in this regard. There are several things that one can do and various steps that one can implement to help further research. In South Africa, I believe that a single step will help to propel medical research to new heights. The world leader in medical research is the USA. If one strives to emulate them, one needs to analyse why they are so successful. The obvious reasons are the funds allocated, and the infrastructure. I believe that another crucial factor is the creation of fellowship positions in the USA. A significant proportion of research there is undertaken by individuals that hold fellowship positions. These are individuals who have just completed their speciality residency and are newly appointed specialists. These are people who are very current with the most recent literature and state of the art in that particular speciality. Because of this, this group of people are the ones who are best positioned to conduct research projects. In addition they

are keen and enthusiastic. They are ripe for this task and one should not lose them at this stage to private practice or other endeavours. These fellows will obviously be guided by the director and other seniors of the unit.

For this reason, I believe that the creation of fellowship positions in South Africa will greatly enhance medical research. One will need to identify the specialities and sub-specialities that warrant fellowship positions.

Once these positions are created, individuals who complete fellowships will become senior researchers and mentor new fellows. Moreover, it will have a positive effect and create a sustainable cascade and environment to ensure that research is promoted and ongoing. This is a challenge to the Departments of Health and Education.

Finally I would like to thank all the Senators, Exco members, my Vice-Presidents and the various officers for their dedication and sterling effort in contributing to the smooth running of the CMSA.

I wish to thank the following people for their support, hard work and advice in ensuring that the CMSA continues to function in an impeccable manner, and also grows in all dimensions:

- Bernise Bothma (CEO) and the Cape Town office staff
- Ann Vorster (Academic Registrar) and the Johannesburg office staff

- Anita Walker and the Durban office staff
- Prof Del Kahn (Chairman), Prof Dhiren Govender (Registrar) and members of the Finance and General Purposes Committee
- Prof Arthur Rantloane (Chairman), Prof Mike Sathekge (Registrar) and members of the Examinations and Credentials Committee
- Prof Anu Reddi (Chairman), Prof Jamila Aboobaker (Registrar) and members of the Education Committee
- Prof Tuviah Zabow (Treasurer)
- Members of the Executive Committee
- My Vice-Presidents, Prof Gboyega Ogunbanjo and Prof Jeanine Vellema
- Dr Warren Clewlow (Chairman) and the Board of Trustees of the CMSA
- Examiners of the College.

I would like to thank the retiring President, Secretaries and Council Members of the various Colleges and wish to welcome the new ones.



**Prof Anil Madaree**  
President