



Fewer vaccines for children in developing countries

“Children in developing countries have access to fewer vaccines, increasing the ‘vaccination gap’ between developed and developing countries,” said Professor Gregory Hussey, FHS Deputy Dean of Research, at the opening of the Sixth Annual African Vaccinology Course that took place in Cape Town on 8 November 2010.

Attended by 76 participants from a total of 18 African countries, the course aims to build capacity amongst Africans in various disciplines associated with vaccinology. Participants ranged from Expanded Programme on Immunisation managers, medical doctors, nurses, public health practitioners, academics, to scientists who work in the field of vaccinology from mostly countries in sub-Saharan Africa.

In its sixth year, the course has been conducted in Ethiopia, Ghana, Namibia and South Africa, and focuses on vaccine development, immunology, microbiology, clinical trials, safety, ethics, advocacy, economics, evidence-based medicine and immunisation delivery.

It is hosted by the Vaccines for Africa Initiative (VACFA), based at UCT’s Institute for Infectious Diseases and Molecular Medicine (IIDMM), in partnership with VACFA stakeholders.

VACFA is a partnership of concerned individuals and organisations who have come together with the express purpose of increasing awareness of and promoting uptake of vaccines on the African continent. Professor Hussey



emphasised that vaccines were different to drugs in that they target healthy people, particularly children.

He further highlighted the advantages of vaccines compared with pharmaceutical drugs, including cost-benefits (the relatively lower economic investment required in order to maximise public health), the fact that the vaccine need only be given once or very few times, and that vaccines have a higher safety profile.

Although there was an increase in the number of vaccines included in the routine immunisation programmes, Professor Hussey noted that there remained concerns that the ‘vaccination gap’ between developed and developing countries was

increasing, with children being the most affected. Consistent with the United Nations Convention on the Rights of the Child (Article 24), increasing access to immunisation programmes can stop unnecessary deaths from infectious diseases that are preventable, and have a huge impact on the health of a nation.

The course continues until 12 November 2010, with expert presentations from the World Health Organisation (WHO), the South African Department of Health, academics and industry representatives. For more information about vaccine advocacy in Africa, visit the Vaccines for Africa (VACFA) website at <http://www.vacfa.com>.

Amit Makan

DEANERY CORNER: Transformation and our students—Associate Professor Gonda Perez

The issue of student admissions is never off the Faculty’s agenda, whether it’s reviewing existing structures to ensure that we are meeting our mandate for redress and ensuring a diverse and representative student body, or responding to yet another media query about how we select our students.

A recent visit by a group of journalists, including a reporter from the New York Times, really served to highlight not only how far we have come as a Faculty, but also how far our students have come—sometimes literally, but more often in terms of the difficulties that they have overcome in order to study at UCT, and more importantly, to flourish as a student in the Faculty.

We were able to gather together a small group of students, of different races, economic backgrounds and geographical origins, to spend a few hours with a selected cohort of journalists

from a range of media, both print and electronic.

Some of the stories we heard were truly inspiring—I hesitate to name names as I would not like to embarrass anyone, but a final year student explained how he had come from a township school in Gauteng and was woefully ill-prepared for university life and the rigours of the MBChB. He pointed out that were it not for UCT’s admission policies, he would not have been accepted to study medicine. And yet, almost six years later, he is preparing to graduate, having been an active member of his class and student governance.

A fourth-year student, who has been through the Faculty’s Intervention Programme (IP), echoed these sentiments. He added that although he realised that he was intellectually on a par with the rest of his class; having completed high school in an under-resourced school, he was not educationally well-prepared for the MBChB programme. It was

recommended that he join the IP and this gave him the step up that he needed in order to be able to compete with his fellow students who had come from some of the top schools in the country. He spoke of the support he received from his lecturers that enables him to continue to succeed despite a difficult start.

It is this support that we offer students that makes our faculty unique and gives students from all backgrounds a fair opportunity to succeed. We have the Student Development and Support Committee that identifies students who are having difficulty whether it is academic or non-academic and dedicated academics who give of their time to assist struggling students to overcome the difficulties they face. This is what enables the faculty to be what UCT’s mission statement states: “flexible on access, active in redress and rigorous on success”.

SA's children poorer and sicker

Young paediatricians working at the Red Cross Children's Hospital are outraged that children are getting poorer and sicker in modern-day South Africa, and they have expressed a need for guidance on advocacy tools to promote improvements in child health outcomes.

These sentiments were expressed at a presentation on the *South African Child Gauge 2009/2010*, which focuses on the theme of child health, to health professionals attending the Wednesday morning lecture at the School of Child and Adolescent Health.

Published by the Children's Institute, a multi-disciplinary research institute in the Health Sciences Faculty, the *Child Gauge* annually reviews the situation of children in the country. Key findings from the fifth issue make sobering reading: despite putting in place a comprehensive range of laws, policies and programmes, South Africa is failing to translate children's constitutional rights to health into positive health outcomes for children.

Estimates by the Actuarial Society of South Africa show that the under-5 mortality rate has increased from 66 out of every 1 000 live births in 1990, to 73 live births in 2006. This suggests that it is highly unlikely that South Africa will achieve the Millennium Development Goal target of 20 deaths per 1 000 live births by 2015.

Commissioning editor Lori Lake explained that the leading causes of under-5 mortality are mostly preventable: HIV, which contributes to 35% of these deaths, neonatal causes, and childhood infections. Malnutrition is also a contributing factor in young child deaths, while injuries are the leading cause of deaths among older children.

The presentation showed that solutions require interventions both within and outside



of the health care system. Poor health outcomes have their roots in poverty, poor living conditions and poor access to services. Two-thirds of children are living in households with a monthly per capita income of R570 per person. This means government departments and other duty-bearers need to work together to ensure that all children have access to adequate housing, water and sanitation, as well as access to health care facilities and sufficient nutritious food and social assistance when care-givers are too poor to provide for them sufficiently.

But there are other important interventions that can improve child health. Prof Louis Reynolds, a *Child Gauge* contributor, stressed

the importance of community-based health services to strengthen responses to maternal, neonatal and child health at a local level. He also pointed to a lack of leadership within the public health care system and the need for 'activist' paediatricians to advocate for a strengthened health care system and collective action to address the broader social determinants of health.

The *2009/2010 Child Gauge* team was led by Marice Kibel, Emeritus Professor of Child Health. Visit www.ci.org.za to download or order a copy, or to sign up for the Institute's Child Rights and Child Law course for Health Practitioners.

Charmaine Smith

Congratulations to...

... UCT, who scooped five accolades at this year's Marketing, Advancement and Communication in Education (MACE) conference in Johannesburg in October—and two of these were in the Faculty of Health Sciences.

The Students' Health and Wellness Centres Organisation (SHAWCO) took home a first place in the social responsibility category and Allison Stevens, a communication officer with the Health Economics Unit, finished second in the same category for her information sheets campaign.

... Assoc Prof Laurie Kellaway, who has been appointed as the Chair of the SA Society of Neurosciences.

... Prof Alastair Millar, who has been appointed to the Board of the World Federation of Associations of Paediatric Surgeons.

... Professors Bongani Mayosi and Gregory Hussey, who have been appointed to serve on

the Department of Health's National Health Research Committee.

... Professors Roland Eastman and Zephné van der Spuy, who will receive their Distinguished Teacher Awards at the December 2010 graduation ceremony.

... Associate Professor Helen Wainwright, principal specialist in the Division of Anatomical Pathology, who has been elected President of the International Paediatric Pathology Association.

... Dr Andrea Rother, who has received the 2010 Vice-Chancellor's Social Responsiveness Award from UCT for her work in pesticide risk control. It will be presented at the graduation.

... Professor Tim Noakes, UCT's Discovery Health Professor of Exercise and Sports Medicine, who recently racked up 10 000 citations, according to *Web of Knowledge*.

Upcoming events

Emergency Medicine Symposium

The EMSSA 2010 Symposium takes place on **20 and 21 November 2010**. For more information, visit: www.2010.emssa.org.za

GSB lunch-time research seminar

Influence of Burnout on Skills Retention of Junior Doctors, by Mark Stodel.
24 November 2010, 13h00 - 14h00
Boardroom 1, GSB, Portwood Rd, Green Point

Faculty mourns the loss of one of its own

The Health Sciences community of UCT was shocked by the sudden death of Professor Cassim Motala on 10 November 2010 in Singapore.

Professor Motala was born on 6 July 1947, in Ventersdorp, Gauteng. He matriculated in 1964 from Stanger High School on the KwaZulu Natal north coast. He graduated with a MBChB from the University of Natal in 1970 and did his internship at King Edward VIII Hospital in Durban. He worked as a general practitioner in Vryburg, North West, for five years before joining the Red Cross War Memorial Children's Hospital as a Senior House Officer in 1979 to pursue his desire to specialise in paediatrics.

He often told colleagues that he had learned more by being a GP in an impoverished community than in any other setting and his time there had imbued him with a sense of compassion and desire to "look after" people.

In 1983, he qualified as a specialist paediatrician and, in 2001, obtained a Fellowship of American College of Allergy, Asthma and Immunology, having been the first South African recipient of an International Distinguished Fellowship in Allergy and Clinical Immunology in recognition of outstanding achievements and contributions in clinical Allergy and Immunology from the same organisation in 1998.

In January 2004, he was appointed co-director of the Allergy Division in the School of Child and Adolescent Health. Prior to this, he contributed towards developing and implementing the Diploma in Allergology examination under the auspices of the College of Medicine of South Africa, and also contributed to the successful submission to the Health Professions Council to have Allergology recognised as a sub-specialty.

He wrote numerous papers for publication and contributed to several books on

Allergology. He was also frequently invited to give presentations at international conferences, symposia and workshops.

Prof Motala held several leadership positions within the University and Faculty, ranging from Senate and the Physical Planning Committee, to running the general paediatric programme and serving as Director of Clinical Services.

In addition to his busy workload at UCT and the Red Cross War Memorial Children's Hospital, Prof Motala also served on the boards of several organisations, chairing the SA Childhood Asthma Working Group and twice serving as President of the Allergy Society of SA. From 2000 to 2007, he was the first South African to serve on the board of the World Allergy Organisation.

Prof Motala is described by colleagues as "very caring, and extremely compassionate to people as individuals". Emeritus Professor Dave Beatty described him as humble, and a gentleman, and spoke of occasions where Prof Motala would bring a cake to a meeting if he thought things would "become difficult". Emer Prof Beatty called him a "peacemaker, who was loveable and much-loved by everybody".

Dr Tony Westwood said: "Cas has been a central pillar of the School of Child and Adolescent Health at UCT as well as the Department of Paediatrics at Red Cross War Memorial Children's Hospital, and, of course, a major leader in paediatric Allergy in this province and the country and internationally. He was very recently promoted to the rank of full professor in the Faculty of Health Sciences, UCT - a singular achievement and honour. He will be sorely, sorely missed."

He is survived by his wife Farieda, a paediatrician at Red Cross War Memorial Children's Hospital, and son, Mikhail, who is a student at UCT. We extend our sympathy and condolences to his family and friends.



Prof Cassim Motala.

Pioneering heart researcher dies in NZ

Willem Lubbe, an exemplary physician-scientist, recently died at the age of 72 on his farm in New Zealand.

He was born on 30 October 1938 and qualified as MBChB at the University of Cape Town in 1962 and MD in 1969. He passed the FCP (SA) in April 1971. He was active in SHAWCO and was associated with Smuts Hall and Kopano student residences. After his internship, he worked in the United States and returned to the Department of Medicine as a registrar in 1969. In 1971, he was appointed as acting Physician and subsequently to the full-time staff as a Specialist, and then Senior Specialist. In 1977, he became a Principal Specialist and *ad hominem* Associate Professor.

As a physician he was highly competent, hardworking and conscientious. He was an outstanding clinician and a popular teacher at both undergraduate and postgraduate levels. His major interest was in hypertension and he headed the Hypertension Clinic. He was responsible for the organization of the annual postgraduate course for physicians from all over South Africa in 1975. He also organized the final examinations for the UCT MBChB. He carried out all these responsibilities with his characteristic thoroughness and care. He will be remembered as an outstanding member of the Department of Medicine; loyal, hardworking and committed. He could be somewhat authoritarian and did not suffer fools gladly, but he was admired by all.

As a research worker in the Heart Laboratory, his work, together with that of Tim Noakes and Thomas Podzuweit, was absolutely crucial in ensuring our local and international recognition for our molecular heart attack hypothesis (cyclic AMP as the noxious beta-adrenergic messenger). His dedication to research inspired others in the laboratory. His crucial paper, published in the highly rated Journal of Clinical Investigation, was widely regarded as a significant advance in the prevention of sudden cardiac death and was even cited in the Japan Times of 1976.

We lost him to New Zealand in 1978, when he emigrated to take up a senior lectureship at the highly reputable Green Lane Hospital, University of Auckland. He briefly returned for two sabbatical visits to Cape Town in 1982 and 1991. He retired to take up serious sheep farming. When visited by one of us (Prof Opie) a few years later, he was absolutely at home shearing the sheep and proudly showing off his highly honed farming skills. He died suddenly while tending his cows in the fields of his farm with his last moments in the greenery of nature, and on his beloved farm.

Stuart J Saunders, Lionel H Opie

Inaugural Lecture Reminder:

Professor Andrew Argent of the Department of Child and Adolescent Health will present his inaugural lecture, entitled: **Paediatric Critical Care—Working on Sacred Ground** On Wednesday 24 November 2010 at 17h30 in the Student Learning Centre Lecture Theatre, Anatomy Building, Faculty of Health Sciences, UCT.

Guests to be seated by 17h15.

Refreshments will be served after the lecture.

Please RSVP to: Centre for Extra-Mural Studies,
Tel: 021- 650 2888 • Fax: 021- 650 2893 • Email: ems@uct.ac.za

Congratulations!!!

2010 *Ad Hominem* promotions

Professor



Willem Hanekom



Cassim Motala



Trevor Sewell

Associate Professor



Lillian Artz



Andrew Boule



Susan Cleary



Aqiul Dalvie



Alan Davidson



Eve Duncan



Mark Hatherill



Dirk Lang



Helen McIlleron



Graham Meintjes

Senior Lecturer



Kishor Bugarith



Lester Davids



Lester John



Lebogang Ramma

Senior Research Officer



Stephanie Rohrs