

FACULTY OF HEALTH SCIENCES, UNIVERSITY OF CAPE TOWN

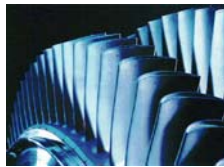
NEWSLETTER April 2006

Power cuts

The problem: The Western Cape consumes 3200MW daily, and 75% is drawn from the grid and 25% from the Koeberg Nuclear Power station. No new power sources had been established nationally for over a decade, while power had been increasingly made available. In addition there had been uncertainty since 1998 about whether ESCOM would be



privatised or not, and major upgrading had not taken place. Koeberg 1 had a bolt dropped into the turbine, and the rotor would have to be replaced, rendering the turbine inactive until mid July. To compound this problem, Koeberg 2 needs refuelling, which would necessitate down time. Power cuts predicted for many months. The power cuts would thus impact on a wide range of activities within the Faculty.



FHS response: The University has constituted a high level committee, powerMAG to respond to the problem. After a faculty meeting a FHS Management Action Group [FHSpowerMAG] was formed: members of the Dean's Office, and certain subcommittees: Venues and curricula [Education and venues committee], Research [Professor Iqbal Parker and his appointed committee], Health & Safety [Reece Brooks], IT [Ernie Dudley]. A plan of all venues, together with information whether they had daylight for teaching was circulated.

People in the news:

Sean Kaliski



Sean Kaliski is Editor of *Psycholegal Assessment in South Africa*, seen here holding the latest edition of his book. He is Head of the Forensic Psychiatry Unit at Valkenberg Hospital. "Many professionals like psychiatrists, occupational therapists and social workers testify in South African courts daily on a host of issues, from

dangerousness to contractual capacity, curatorship, child abuse and insurance claims. They have to make decisions on human behaviour, yet there is no defining work to guide them." His book fills this gap. As editor of and contributor to the book, Kaliski has chosen each of the 22 authors for their niche areas of expertise. Many are fellow UCT academics. Together they map sometimes precipitous territory: how to conduct various assessments, interpret clinical findings and communicate these to the courts. [From Monday Paper]

Thabang Mokgethi



Thabang Mokgethi is a Master's student in the Institute of Infectious Disease and Molecular Medicine (IIDMM) where she has been investigating the medicinal efficacy of four new indigenous plants. She remembers well the thin-leaved bush that grew wild outside their home in Delareyville in the North West Province. Her father used it to treat bouts of 'flu.

The master's student didn't know then it was *Artemisia annua*, an indigenous plant that gives us artemisinin, renowned for its infectious disease-fighting properties, particularly for malaria. The Chinese have used an infusion of *qinghaosu* (the traditional name for artemisinin) for two thousand years, especially to reduce fevers and other symptoms associated with malaria. Mokgethi's master's thesis investigates

indigenous plants as possible sources of compounds for a new arsenal of anti-tuberculosis drugs.

Alan Flisher

Congratulations to Alan Flisher, who was presented in March with the Alan Pifer Award for 2005. This is the Vice Chancellor's annual prize "in recognition of outstanding welfare-related research, made to one or more top researchers at UCT who are engaged in medical, economic, scientific, engineering or social research which has demonstrated relevance to the advancement and welfare of South Africa's disadvantaged people". In Alan's case the award was made for his exceptional psychiatric work in adolescents, including unique studies on risk taking in this group. Previous recipients from this Faculty have been Lyn Denny, Leslie London and Johnny Myers



Derek Hellenberg

He has been selected by the Trustees of Society of Teachers of Family Medicine Foundation to be their International Scholar, and to visit the United States of America, attend Congresses as well as visit various centres. Derek Hellenberg holds the important post of Head of Family Medicine in the University of Cape Town. This is particularly important with the Faculty resolution the education be community based, and have the primary health care approach.



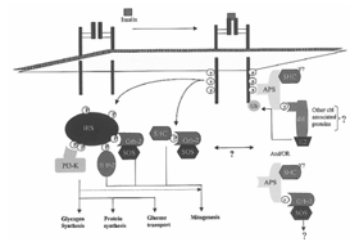
Tahir Pillay

He has been appointed Professor and Head of the Division of Chemical Pathology. Professor Pillay is a distinguished international scientist, who will no doubt obtain a high NRF rating in due course. He has performed major research on the regulation of the insulin receptor, and the regulation of the functions of insulin. He holds a patent on this. He has also performed significant research on cell signaling and cell adhesion. He has many international publications, and chapters in books. Editorial advisor to many international journals, grant reviewer for the Wellcome Trust, the British MRC, British Heart Foundation

He qualified in KZN, and then spent time in Cambridge

[where he obtained his PhD], at Hammersmith, where he spent several years in Chemical Pathology, and at the University of California, San Diego, where he was Fellow in Endocrinology and Metabolism. He was most recently a Wellcome senior fellow and consultant at Nottingham. Wellcome back after all these years. Its been a long time since you were an intern here!

We were unable to get a photograph of him, and include, instead, a diagram of his construct of the insulin receptor from one of his publications.



Tim Noakes

In the news again, Tim Noakes has been appointed Visiting Professor in the Division of Neuroscience and Biomedical Systems at the University of Glasgow, Scotland, for the next five years. What the posting does is allow Noakes to test his central-governor model - that, in a nutshell, argues that it is the brain and not the muscles that regulate fatigue - on the best possible models, the many Kenyan athletes who have become the final word in long-distance running in the world today. Noakes has just co-edited a book on the Kenyan phenomenon with a longstanding collaborator at Glasgow, Dr Yannis Pitsiladis. At the same time, Pitsiladis is bringing together a glittering corps of scientists, like Noakes, under the banner of the International Centre for East African Running Science.



Dean's Corner

In the past month, one of the areas of focus for the Faculty has been research. Following a successful meeting on research in teaching and learning, the MRC meeting with clinicians at the end of February generated an interesting discussion on revitalising clinical research in the Faculty. There is broad agreement that activity in this area has declined over time, and needs a new set of strategies. Some areas for attention are seeking ways of promoting interest in research from the undergraduate years; reviewing the options for an intercalated year towards a research degree; supporting research opportunities for clinicians; and providing more funding in all these areas.

On the clinical service front, we continue to explore options for expanding the reach of our services, and transfer of joint posts to the district level will help greatly – to enhance our service and to strengthen the platform on which we our students learn. But, in the spirit of being an African University, our reach has gone even further, onto the continent, where several of our clinicians and researchers continue to enjoy close collaborations with colleagues across the continent. In the middle of March, we hosted the African Paediatric Nephrology Association Conference. 130 delegates from 9 African countries participated in a three day meeting which helped to consolidate our existing links and to identify new areas for co-operative work. This connection with Africa has also taken the form of support of offering clinical training through supernumerary appointments here and in-country on request, across most disciplinary fields.

These are just two priority areas for the Faculty's attention. For the latter, a work group is being established towards developing a plan and action to strengthen and develop clinical sciences. For an African Faculty of Health Sciences, a first step will be to conduct an inventory of work already being undertaken with colleagues and institutions in Africa - in research, teaching and service. I have no doubt that such a mapping exercise will not only identify new opportunities, but will also reveal that, in practice, our Faculty is far ahead of many others who are still grappling with understanding the University's mission. *Marian Jacobs,*

Dean

IT & Health Sciences: update

The MED.MAIL server is in its second year of its three year cycle and is in reasonable condition. The uninterrupted power supply (UPS) and generator are synchronised to automatically provide continuous power to all systems in the data centre when a power outage takes place. By the end of this year the new redesigned network with some measure of redundancy will be implemented campus wide. The high speed link from Health Sciences to Bremner and to Upper Campus has been completed. A new mail system will be implemented later this year. The new mail system will be based on a six server cluster, split between the Upper Campus and the newly commissioned Bremner data centre. The mail system will be connected to a Storage Area Network (SAN). The SAN has been delivered and is due for installation in a fortnight or so. The mail system architecture has been specifically designed with failsafe and redundancy in mind so that very high levels of measurable uptime can be guaranteed in a service level agreement with the campus community. The entire mail system will be based on the latest high quality technology from HP. The mail service will be set up to deliver seamless remote access for staff. The strategy recommendations approved by Council excludes public holidays but includes Saturday and Sunday morning monitoring of the IT infrastructure.



Education Research day

An enthusiastic group of approximately 40 participants attended the Faculty's first Education Research Day on 16 March. The overarching theme was Transformation in Education. Gonda Perez, Deputy-Dean Education, opened the day with a paper that focused on progress made and challenges that lie ahead in curriculum transformation at the undergraduate level in the Medical as well as Health and Rehabilitation Programmes. Eight papers, several posters and three workshops explored various facets of transformation and change in areas of education such as curriculum methodology; assessment of students; recruitment, selection and placement of students; and students' perceptions and experiences. The day ended with Directors of Schools and HODs in Adult Medicine briefly presenting their Visions on Health Sciences' Education over the next 10 Years. Sessions were facilitated by Medical and Health and Rehabilitation Sciences' staff. One of the sessions was facilitated by the Deputy-Dean Education at Stellenbosch University, Prof Marietjie de Villiers. Lively debate and challenging questions were posed in all sessions. These will be taken up in various Faculty fora throughout the year and shape the planning for 2007. The Education Research Day will be an annual event. Funding for the event was provided by the Dean's Office. We thank the Organising Committee: Nadia Hartman, Elmi Badenhorst, Sine Duma, Dorothy Apalasy.

Medical evidence

Oliver Wendell Holmes, 1860

A pseudo-science consists of *nomenclature* with a self-adjusting arrangement, by which all positive evidence, or such as favours its doctrines, is admitted, and all negative evidence, or such as tells against it, is excluded. It is invariably connected with some lucrative practical application.

Arthur Conan Doyle, 1891

I have no data yet. It is a capital mistake to theorise before one has data. Insensibly one begins to twist facts to suit theories, instead of theories to suit facts.

Archibald Leman Cochrane, 1972

The oldest, and probably still the commonest, form of evidence proffered [for the value of a treatment] is clinical opinion.... Its value must be rated low, because there is no quantitative measurement, no attempt to discover what would have happened if the patients had had no treatment, and every possibility of bias affecting the assessment of the result. It could be described as the simplest (and worst) type of observational evidence.

Quiz for book voucher

Answer for March: Steph Steiner in HUB got it : Werner Forsmanm was the first person to catheterise the heart. In 1926, at the age of 25, while performing the equivalent of internship at a small hospital in Eberswald, he catheterised his own heart. This was dismissed as stupid and dangerous, but the long memory of the Nobel committee awarded him the prize in 1956, together with Courmand and Richards.

Question for April: Which two people are the rings and the staff related to? Answer to: dmndent@uctgsh1.uct.ac.za

