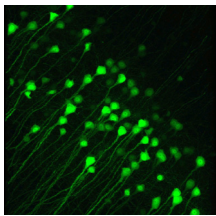


Cutting Edge Facility Launched

The Department of Human Biology launched its new **Advanced Microscope Imaging Facility** on **28 January**. The facility was established through the joint efforts of more than 20 co-applicants and with funding from the NRF National Equipment Programme, the Cancer Research Trust and UCT.

One of the key pieces of equipment is the **Zeiss LSM510 Confocal Microscope**, which is capable of performing a multitude of functions required in cutting-edge cell biology and biomedical research. Here is a confocal scan through a mouse brain, showing neurons expressing green fluorescent protein.



This imaging facility is not only for the benefit of the scientists here at UCT. It is both a national and a regional asset, and will be available to all interested scientists, whether they are from academia or industry.

70th Anniversary of Groote Schuur Hospital

The Faculty is proud to be associated with Groote Schuur Hospital (GSH) and the celebration of the 70th anniversary of its opening on 31st January 1938. We are inextricably involved with GSH, an involvement that extends to almost all of its activities, and which has generally been mutually beneficial.

The first involvement is historical, and relates to land. The land currently occupied by the Faculty had been ceded to the University from the Groote Schuur [Rhodes] Estate, in terms of the University of Cape Town Act of 1916. In 1926 the University granted part of this land to the Cape Hospital Board, for the establishment of a hospital, which was to become the Groote Schuur Hospital. The lease was to be for 99 years, and the rental £1 per annum. The arrangements *inter alia* were that "...professors, lecturers and students...shall have access to the said hospital..." This University land contains the old GSH Hospital and all the buildings beside and above it, and in a sweep, the upper part of the new GSH. While the original GSH was opened in 1938, the Medical School preceded it at the Observatory site, having left its original medical buildings in Orange Street in 1928 and taken over the new Faculty Buildings.

The second involvement relates to staff and finances. To date there have been two Joint Agreements between the University and the Cape Provincial Administration which took over responsibility for the hospital in 1950, and a third agreement is currently being evolved. In its simplest form such an agreement would ask that health care be paid for by the Province and Department of Health, and medical education by the University, and the Department of Education.

The final aspect of the mutual involvement relates to the activities of the staff. Unlike most service hospi-



tals, academic hospitals like GSH are called upon to teach medical students and registrars. They also teach nurses, physiotherapists, occupational therapists, and speech therapists. They are, in addition, called upon to perform research. There is no question that this academic umbrella facilitated the many innovations such as heart and fallopian tube transplantation, the development of the CT scanner, and discoveries like the cause of kwashiorkor. These would not have happened were GSH to have been merely a service hospital, and not related to the University.

[David Dent]

Gender and Health Initiative

Our Faculty is supporting an initiative aimed at promoting a greater awareness of gender issues in health and health care among clinicians, researchers, students and other practitioners. The initiative is being led by the Women's Health Research Unit (WHRU) in the School of Public Health and Family Medicine. This is in collaboration with Professor Lesley Doyal, professor of Social Medicine at Bristol University in the UK and an honorary professor at UCT. The WHRU and Professor

(Continued on page 2)

DEAN'S CORNER

This year has started on an exciting note with the award to the Faculty of a large grant from the national Department of Education.

Behind the award lies an interesting history, and years of hard work – initiated by Gonda Perez and the late Nico du Bois in our Faculty in 2003. They recognised that increasing service demands were placing significant pressures on clinicians' time to deliver adequate quality teaching. This, combined with the additional financial requirements of a community-oriented curriculum, meant that our clinical teaching capacity was rendered particularly vulnerable.

A national meeting involving health, sci-

ence and technology, finance and higher education sectors – with representation from Ministerial and national executive levels, provincial health departments, health sciences faculties and other interested parties – resulted in a set of recommendations for increased financing for clinical training.

This triggered a series of meetings of Vice-Chancellors with health and education ministries, of the Finance and Fiscal Commission with health and education representatives, of planning, protocols and proposals and of many, many consultations in our Faculty and University.

That hard work has now paid off with the

receipt of funding sufficient to strengthen clinical teaching across the board, and to provide adequate support for such teaching to be conducted efficiently, in sites from community to hospital level, and by a range of teachers in all the major disciplines.

We are proud that our Faculty kick-started a national process of such great importance, that our UCT team achieved a successful outcome, and that we are set to provide a teaching platform that will be even better than ever.

Thank you to everyone who helped to make this happen, and best wishes to those who are charged with implementation over the next few years!

Publication of the Month

The HIV Vaccine Development Group, under the leadership of the Williamson sisters, Anna-Lise and Carolyn, has announced that human clinical trials of two vaccines developed here in Cape Town are just months away from moving to human clinical trials. The two vaccines, SAAVI DNA-Cs and SAAVI-MVA-C, have been put forward for safety or "tolerability" trials in South Africa and the United States. These will target HIV 1 subtype C, the strain that accounts for most HIV infections in South Africa.

Already tested on mice, rabbits and non-

human primates, the vaccines have been designed to be used in tandem. This is one of the group's key publications:

Burgers WA, van Harmelen JH, Shephard E, Adams C, Mgwebi T, Bourn W, Hanke T, Williamson AL, Williamson C, "Design and pre-clinical evaluation of a multigene human immunodeficiency virus type 1 subtype C DNA vaccine for clinical trial", *Journal of General Virology*, 87(2): 399-410, 2006.

"Scientists have shown that for some vaccines there is a better immune response if the immune system is 'primed' with one type of vaccine and then 'boosted' with another," Anna-Lise said. Speaking from Geneva, Williamson told a journalist: "This is a phase one trial, which is mainly about safety. To determine if a vaccine is effective in preventing HIV infection or AIDS, phase 3 trials are needed. It's going to take a significant amount of time to reach this part of the journey, as well as considerable resources".

[Helen Théron]

Reno Morar joins the Dean's Team

The Faculty welcomes Dr Reno Morar as dean's advisor: health services. He is a public health specialist physician with post-graduate qualifications in health management and financing and executive coaching. He also has extensive experience: in health service management, as a medical superintendent at Groote Schuur; as director of health services for the clothing industry; and of service in local, provincial and national government policy structures.



Monthly Quiz

Groote Schuur Hospital celebrated its 70th anniversary last month. What date was the foundation stone laid for the *new* hospital and who was the Chief Medical Superintendent at the time? Send your answers to: kit.vaughan@uct.ac.za

Answer to last month's quiz:

There are two medical doctors on the National Executive Committee of the ANC: Nkosazana Dlamini-Zuma, who earned her medical degree at Bristol, and Manto Tshabalala-Msimang, who trained at Leningrad. Nobody sent in the correct answer. Come on, you can do better!

(Continued from page 1)

Doyal (seen below), who is an internationally recognised WHO consultant, have collaborated over the past decade in conducting teaching and training in Gender and Health at UCT.



In the last quarter of 2007, the WHRU brought together research groups within its own school and representatives of departments from Faculties across the University who had expressed an interest in participating in discussions to advance this initiative. These included: the Department of Obstetrics and Gynaecology, the Department of Psychiatry, the Gender, Health and Justice Unit, the Institute of Ageing, the School of Health and Rehabilitation, the Faculty transformation portfolio, the African Gender Institute, the Centre for Social Science Research and the Departments of Sociology and Social Anthropology.

Professor Doyal is currently visiting Cape Town as a guest of the WHRU and the HSF. She will hold the following three introductory seminars in the Health Sciences Faculty as part of the launch of this initiative:

- [1] "Sex and gender in health and health care": Thursday, 14 February at 12h00 - 14h00; venue: Barnard Fuller Conference room 3.
- [2] "Sex, gender and health research": Thursday, 21 February, 13h30 - 15h30; venue: Barnard Fuller Conference room 3.
- [3] "Gender sensitivity and gender politics in health care" - Wednesday, 27 February, 14h00 - 16h00; venue: Barnard Fuller Conference room 1& 2.

[Di Cooper]

Open Access Gains Traction

Open access (OA), the idea of providing free online access to information, including full-text, peer-reviewed journal articles arising from taxpayer-funded research, is a growing phenomenon in the Health Science field around the world. Apart from the higher visibility of their research and the value of disseminating health-related publications in a timelier manner, the main reason authors seem to make their articles openly accessible, is to maximize their research citation impact.

The OA citation impact advantage found that in 2001 articles in computer science which were openly accessible on the Web were cited substantially more than those that were not. A comparison of OA and non-OA articles in the same journal and/or year, found that OA articles garnered consistently more citations. Another study found that OA articles were twice as likely to be cited in the first 4-10 months after publication.

The NIH's Public Access Policy, until now voluntary, is set to become mandatory following President Bush's approval of the latest NIH appropriations bill on 26 December 2007. This bill requires scientists funded by the NIH to submit copies of their peer-reviewed journal manuscripts to NIH's online archive, PubMed Central, in order for the article to be made publicly available no later than 12 months after the official date of publication.

In South Africa, we have no such Open Access policy as yet. At UCT, a Shuttleworth Foundation-funded project, OpeningScholarship, is investigating these issues for UCT academics and would be interested in your thoughts. You can access their blog at <http://blogs.uct.ac.za/blog/openingscholarship> and add your comment or find out more about Open Access.

[Eve Gray and Cheryl Hodgkinson-Williams]

