Reducing morbidity and mortality from traditional male circumcision in the Eastern Cape

Traditional circumcision is a well-established practice among the amaXhosa in the Eastern Cape. However, the traditional practice has been associated with high morbidity and mortality. Nwanze and Mash designed, implemented and evaluated a project in a rural Xhosa community that aimed to improve the safety of traditional circumcision. The study design involved the formation of a safe circumcision team comprising health workers, community leaders and traditional surgeons. During the study period, only two minor complications were documented (out of 92 circumcisions), compared with 10 admissions, two amputations and two deaths that took place the previous year (pre-intervention). The success of this project was anchored on its participatory nature with various stakeholders and strong community support. Replication of this project is worth pursuing in other communities in South Africa that face similar circumcision morbidity and mortality challenges.

How children access antiretroviral therapy at a district hospital

In 2007, only 20% of eligible children were commenced on antiretroviral therapy (ART) at Kgapani district hospital, Limpopo. Ralton and Mash aimed to improve access to this programme by exploring the factors that facilitated or obstructed access to ART. They used both quantitative and qualitative research methods to collect data. Factors associated with poor attendance included younger age, higher cluster of differentiation 4 count, lack of income and participation in the prevention of mother-to-child transmission programme. The main identified factors from the qualitative data were lack of transport money, poor social support, mothers who struggled to accept the diagnosis, poor understanding of human immunodeficiency virus (HIV) and strong traditional beliefs. They concluded that the identified factors were serious barriers to ART access for children at this district hospital. They recommended that addressing these factors would go a long way towards improving the situation. This would involve strategies to alleviate poverty, reduce HIV stigma and educate mothers about HIV/acquired immune deficiency syndrome.

Pain as a reason for primary care visits: a cross-sectional survey

Pain is an important reason to utilise health services. Its prevalence in the general population ranges from 10-50%. The authors conducted repeated cross-sectional surveys to determine the prevalence of pain in primary care and to characterise pain among adult patients who attended services at a rural and periurban clinic. They used the Brief Pain Inventory and Pain Disability Index, which is a validated tool for pain assessment to collect data. The prevalence of pain in this study ranged from 32.1-61%. Approximately three quarters of patients visited health services because of pain, with a female: male ratio of 2:1. In terms of pain localisation, most participants complained of head pain, followed by back and chest pain. A very high number reported pain in more than one site. The study provided valuable basic epidemiological information on pain occurrence in the primary care setting, although at only two sites. It is crucial to repeat similar studies within South Africa to obtain a more accurate prevalence of pain in the general population.

Family suicide and personal suicidal behaviour among youths in KwaZulu-Natal

Studies have shown that for every suicide death, a minimum of six individuals are affected. Vawda explored the associations between the suicide of a family member and personal suicidal deaths in grade 8 students in KwaZulu-Natal province. The study recorded high scores of depression, perceived stress and feelings of hopelessness in those who had a family member who had committed suicide. In addition, family suicide was associated with personal suicidal ideation, suicidal plans and suicide attempts. The author proposed that family practitioners should play an important role in the early identification of youths who are at risk of suicidal behaviour and the prevention thereof. This requires the necessary knowledge and skills on how to deal with this increasing public health problem.

References