<b>LETTER TO THE EDITOR</b> Response to this issue's editorial <b>102</b>
CONTINUING PROFESSIONAL DEVELOPMENT A guide for family practitioners - J Blitz & M de Villiers
ORIGINAL RESEARCH Antimicrobial sensitivities and causative organisms of urinary tract infections in a rural family practice - D O'Mahony
THERAPEUTICS Parkinson's Disease: Augmentative and Alternative Communication - J Bornman & E Alant
ORIGINAL RESEARCH Use of analgesic medication among black Africans in an urban general practice - RS Pillay & MH Cassimjee
WONCA NEWS Preparing for the 16th WONCA World Congress of Family Doctors
INFORMATION UPDATE Pint-size Panic
ORIGINAL RESEARCH Notification of pesticide poisoning: Knowledge, attitudes and practices of doctors in the rural Western Cape - L London & R Bailie
ON THE BOOKSHELF Books for the GP
PAEDIATRIC ISSUES The approach to the child with a febrile convulsion - DF Wittenberg
QI CORNER  Quality improvement in the care of people with diabetes in Khayelitsha, Cape Town - B Mash & NS Levitt
JOURNAL CLUB 1 Sore throat - M Wbitfield126
ACADEMY NEWS Application for membership

Member of the

Audit Bureau of

Member of

Official Journal of the South African

Academy of Family Practice/Primary Care

Amptelike tydskrif van die Suid-Afrikaanse

Akademie van Huisartspraktyk/Primêre Sorg

**INDUSTRY NEWS** 

Novartis announces award

for diabetes research . . .

Circulations of South Africa

Specialist Press Association

Journal of the South African Academy of Family Practice/Primary Care Amptelike Tydskrif van die Suid-Afrikaanse Akademie van Huisartspraktyk/Primêre Sorg

ISSN 1025-1979

Volume 20 • Number 1

January 1999

# A FAMILY MEDICINE RENAISSANCE IN SOUTH AFRICA

nyone even remotely involved in academic, organised or medico-political family practice will know that the proverbial "potjie" is cooking, transforming the firewood, ingredients, and spices into a new, hopefully very enjoyable, feast of a "family medicine" meal.

The firewood fuelling the fire of change and transformation comes from many sources. There were divisions in the past, some based on disagreements over monetary matters in the early eighties and some along political and/or racial lines. The meal ingredients were the many organisations in family practice, such as the South African Academy of Family Practice/Primary Care (SAAFP), the College of Family Practitioners (CFP), the National General Practitioners Group (NGPG), the Family Practitioners Association (FPA), and some others.

The spices of change are the harsh realities of our time: financial constraints, limited human resources and, especially, division in the face of a world "hostile" towards family practice. This has slowed down the development of academic family medicine at some of the universities and has resulted in a system of postgraduate vocational training which largely ignores the needs of family practice, almost introduced by the Interim South African Medical and Dental Council (ISAMDC).

Decay has also come on many fronts. The SAAFP faces severe financial constraints as a result of fierce competition in the advertising marketplace. This has led to the closure of its publication division and a declining membership. Similar fates awaited the NGPG and other groups, whilst family practitioners had to pay membership fees to several organisations in order to have their interests adequately served. The CFP was confronted by a weary academic community demanding greater unity since, with limited resources, its members were no longer prepared to support two fellowship exams in addition to their own university exams.

What followed during the past two-and-a-half years was a sometimes frustrating process of talking, lobbying and finally negotiating. The main players were the SAAFP and the CFP, with the university departments of family medicine acting as agreement-broker. Others like the NGPG, the FPA and others adopted a supportive and "wait and see" role. The process gained greater impetus with the formation of FaMEC during 1997, a consortium of university departments of family medicine now acting in greater unity.

> The cook was ready; the fire was burning; the ingredients were in the pot and the spices were working. Finally during September 1998, at the 11th Family Practitioners' Congress at Sun City, both the SAAFP and the CFP passed resolutions to merge and form an independent and unified College of Family Medicine (CFM). A period of 18 months was envisaged for negotiation with the College of Medicine of South Africa, the present home of the CFP, about a possible merger.

The new CFM will be open for general membership to all family practitioners and will set the standards for the discipline through a fellowship exam and a programme of accredited continuous professional development (CPD). A grandfather clause is envisaged in the early years to allow all family practitioners presently registered as family physicians with the ISAMDC to obtain fellowship of the CFM. It is envisaged that this new fellowship quali-

fication will in future be the entry qualification into registration as family physician and in years to come, independent family practice in South Africa. Prof P de Villiers, Guest Editor

## **GUEST EDITOR:**

Prof P de Villiers, Dept of Family Medicine, Stellenbosch University

### LAYOUT & DESIGN:

Angler Publications & Promotions cc Tel: (031) 52-2289

### REPRODUCTION:

Hirt & Carter Tel: (031) 203-3333

Robprint (Pty) Ltd Tel: (031) 700-3384

# SALES/ADMIN/ACCOUNTS:

Claire de Jongh PO Box 459, Umhlanga Rocks 4320 Tel: (031) 562-8509

# **EDITORIAL ADDRESS:**

PO Box 459, Umhlanga 4320

# SAFP JOURNAL WEBSITE:

http://www.kznsa.co.za/websites/safp

### SUBSCRIPTIONS:

R200 per annum R100 undergraduate students, interns and allied professions

# **EDITORIAL BOARD:**

Dr GK Brink (Managing) MBChB, MFGP(SA), MPraxMed

### **Book Review editor:**

Dr Laurel Baldwin MD, CCCFP, FCCFP

Prof PJT de Villiers. MBChB; MFamMed; DOM Stellenbosch

Dr DA Hellenberg

MBChB; MFamMed; DOM Stellenbosch

Prof LA Hiemstra MBChB; MPraxMed, Free State

Prof K Mfenvane MBChB; MPraxMed, UNITRA

Dr N Naidoo MBChB; MPraxMed; MFGP, DForMed New Hanover

Dr G Parr MBChB; MFGP Cape Town