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essential for scientific research to proceed, but they should not be regarded as immutable.

Theories in medicine change from decade to decade.

Books on Western pharmacology and therapeutics have changed face almost completely with each decade over the past century. In no other system as in Western medical science, has one decade rejected so decisively the therapy of a previous decade not only as useless but as even being harmful.

The precise action of many drugs such as aspirin are still obscure but we continue to use them because they are effective. Acupuncture is simple, safe, effective and an economical method of therapy.

The scientific basis of its action is being clarified to a considerable extent by modern research and its value in clinical medicine is today beyond any reasonable doubt. There is every reason why we should use it in our daily medical practice either alone, or to supplement the deficiencies of modern medicine. □

Letter to the editor

Dear Sir,

Your February issue contained two articles about retirement.

Both Dr Botha and Mr Spring failed to make the point that where options exist in retirement finding, the doctor, or anybody else, for that matter, must at the time view his options after a very careful medical examination and assessment.

A patient of mine died from Malignant Hypertension one month after opting for the bigger pension — he received one increment!

Yours faithfully,
Midland Medical Plan

Dr J J du Toit
Managing Director

Hypertension — a major problem in the black population

“High blood pressure is a smouldering killer disease in Southern Africa’s black people but it could be prevented.”

The Minister of Health for Bophuthatswana, Dr KP Mokhobo, was speaking at a press conference which followed the screening of the film, “A Community at Risk — Perspectives on Managing the Black Hypertensive.”

The film, the first on the worsening problem of high blood pressure in Black people in Southern Africa, was sponsored by Smith Kline & French Laboratories — a pharmaceutical company. It was premiered at the recent congress of the Southern African Hypertension Society in Johannesburg.

Dr Mokhobo said that hypertension had become a major problem — “and it has come to stay”.

“The crippling disease is with us and it will be with us for some time to come. Hypertension has reached epidemic proportions and affects an estimated 7 to 25% of the population. In its extreme form the disease can lead to stroke, kidney and heart failure and even death.”

“Hypertension is a treacherous disease which has no reliable symptoms. This is why screening is important. We must identify it early and treat it as soon as possible. There is no clear cut answer to what causes the disease.”

“It is speculated that diet refined foods, modern life styles, and new pressures; excessive use of salt are contributory to the increase of the disease. Furthermore genetic predisposition may be a factor.” The Minister added: “We must stir the hornet’s nest. We must provoke a public response through widespread appeal for routine medical check-ups amongst healthy people who walk around with symptomless high blood



Dr KP Mokhobo

pressure.”

“I wish to stress that hypertension is a preventable disease. Too often we diagnose the disease when it has reached an advanced stage — when irreparable damage has already been done. Health education will control the incidence of the disease.”

The film underscored the fact that today’s urban Black people faced a paradox — a traditional way of life in a 20th century environment. They were people on the move to a modern society but were finding adaptation an ongoing process.

The scenario for the year 2000 looks bleak. By then about 75% of all South African Blacks would be living in urban areas and hypertension and its sequelae might become South Africa’s most important health problem.

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Searle is giving out special stickers to doctors and chemists, with medication reminders to improve patient’s compliance.

Please contact your local Searle representative.

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