

Comment Komentaar

Communication

Primary medicine encompasses a vast field and general practitioners have the opportunity of finding a niche in the most fascinating ways throughout our country. The sophisticated society doctor and the lonely missionary have in common a single aim. That is to be the best doctor in the circumstances in which they find themselves. To be the trusted confidant and guide to someone in need of care.

For many years practitioners belonging to this subset of medicine were isolated individuals and had to contend singlehandedly with problems that in fact were being experienced by other doctors throughout the country and even throughout the world. Not being able to communicate effectively, however, each practitioner sought his own answers without the benefit of pooled knowledge and experience.

This isolation was steadily overcome by the valiant efforts of our colleagues, many of whom now serve on our honorary editorial board. They have served General Practice in many ways. Some represent the group on the authoritative bodies that control the training and practice of medicine in our country. Others started academic institutions pertaining to general practice and primary care, while yet others fought the battle to secure the economic survival of the family practitioner.

Medicine owes much to these people. Most of them are unknown to other practitioners. The Medical Association of South Africa, and more especially, the National General Practitioners Group, the Faculty of General Practice of the College of Medicine of South Africa, and the various departments of Family Medicine in Universities throughout the country have all contributed much to make the profession of family medicine one to be proud of.

Polarity within the groups still exists and is inevitable because of the different requirements that have to be met in our country, but

the common bonds are so great that the group will never be torn apart.

What is necessary at this stage is better communication between all primary doctors in an effective way. Although various newsletters and periodicals do in part satisfy this need, the necessity for a journal serving the broad requirements of the whole group is apparent.

This has now been made possible by the good offices of the publishers who join me in urging you to make full use of this, the first real vehicle to promote general practice in our country.
George Davie

Jogging Doctors

The enormous growth in the popularity of jogging is partially related to the perceived physiological benefit of such regular physical activity. Jogging popularity can be gauged by the recent SABC TV road race in which 10 500 registered participants took part with and among other unregistered runners.

In response to the modern stresses of today, jogging is a valuable measure in the prevention of possible Coronary Artery Disease. The benefits of regular jogging are difficult to assess, but definite benefits are experienced in the cardiovascular, respiratory and skeleto-muscular system as well as an improvement in the individual's psychological climate, for jogging gives one a feeling of general well-being.

Clinical observations refute any claims that jogging can endanger the healthy human heart and there are many cardiologists who believe that mild jogging is in fact beneficial to a damaged heart. For prospective joggers a monitored exercise programme based on graded exercise tests are essential. Exercise sessions of 3-5 days a week are then begun and increased to daily and for longer periods and then gradually commencing to jog for about 20 minutes. A complete physical examination with resting and effort electrocardiographs plus a battery of blood tests to assess

the various body functions are essential previous to embarking on an intense jogging programme.

Heat disorders are the most common complications of jogging, but the liberal intake of water before, during and after a jog usually overcomes this problem. The intake of NaCl and K tablets is questionable. Over-dressing is a hazard in our warm climate. Correct fitting shoes and the liberal use of petroleum jelly prevents injury to feet and other joints.

To be a jogger one requires a certain amount of dedicated motivation — it is a means for you, the doctor, to get away from it all and relax. It is also a time when you can meditate and ponder on your daily problems. It enables you to come to terms with yourself and assists you to overcome the stresses and strains of practice.



In the final analysis it makes you a far more acceptable individual and a better doctor; after all, how can you advise your patient to participate actively in the Health Year without being a participant yourself?

So doctor, take up jogging. It can be of benefit to you and your patients!

Boz Fehler

Comment Kommantaar

Soos in die vooruitsig gestel is, het die nuusmedia toe die onlangse verhoging in die mediese tariewe opgeblaas tot 'n Frankenstein-monster. Dat die huidige Minister van Gesondheid in die slagyster beland het deur mee te doen aan die verguising van die mediese beroep op 'n tydstip toe kalme beredenering aangewese was, is 'n groot jammerte. Hy, die Minister, het deur sy ondeurdagte optrede nie alleen sy eie aansien geskaad nie, maar ook die dokter/pasient verhouding verder onnodig vertroebel.

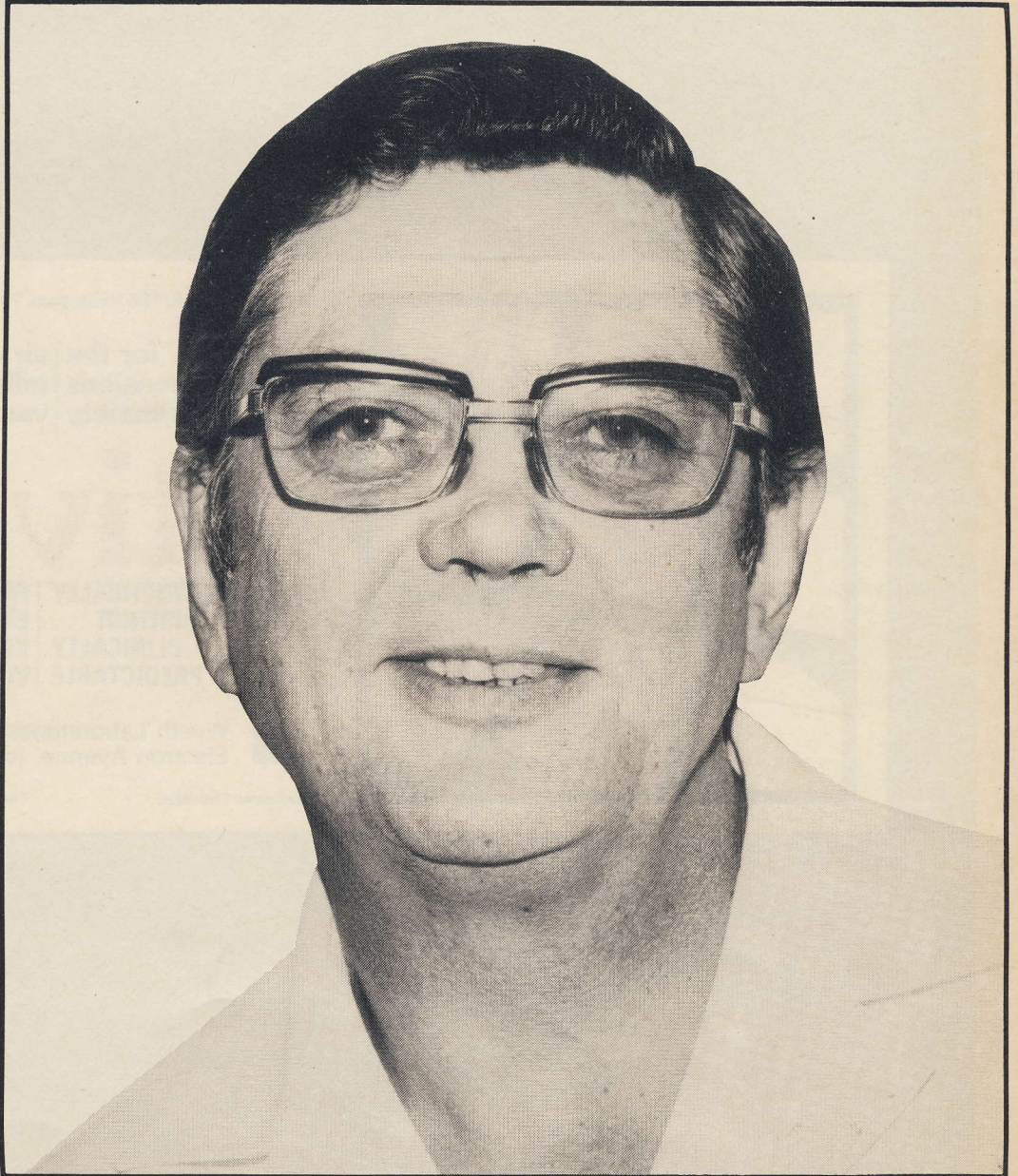
Gelukkig het die massa-histerie oor die verhoogde gelde voorlopig 'n tydelike dood gesterf. Die rekenkundige verhoging van 37,5 persent het egter 52 persent gebly sonder dat enigiemand die moed gehad het om ordentlikheidshalwe melding te maak van die feit dat sekere behandelings se kostes verlaag is. Dit is opvallend dat die waarheid deesdae nie nuuswaardig is nie.

Die waarheid is natuurlik die feit dat die Eerste Vergoedingskommissie fouteer het deur 'n voorkeurtarief van die Mediese Vereniging te omskep in die eerste statutêre tarief en die daaropvolgende Kommissies het op hierdie foutiewe uitgangspunt voortgeploeter. Dit is bekend dat hierdie voorkeurtarief gemiddeld 30 persent laer was as die gewone destydse tarief. Die rede hiervoor was dat die Mediese Vereniging hierdeur die laerbesoldigde lede van die bevolking instaat wou stel om 'n vrye keuse van dokter te kan uitoefen. Hierdie groep van pasiënte het op daardie stadium hoogstens 20 tot 25 persent van die privaat geneesheer se werk verteenwoordig. Vandag word verwag dat die dokter 85 persent van sy pasiënte teen 'n verminderde voorkeurtarief moet behandel. In alle redelikheid moet tog erken word dat die ekonomies onmoontlik is, veral omdat die privaat geneesheer se oorhoofse kostes nie 'n voorkeur lae styging getoon het die afgelope dekade nie. Intendeel is dit bewys dat die privaat praktiserende huisarts se koste styging in baie gevalle meer was as die styging in die Verbruikersprysindeks.

Die hele bohaai is dus nie gegrond op gesonde onbevooroordeelde denke en beskikbare feite nie, want hierdie selfde groep wat eis om teen 'n ewigdurende verlaagde voorkeurtarief hulle

essensiële primêre mediese dienste te bekom, is sonder teenstand bereid om veel meer te betaal vir hul tabak of sterk drank wat hulle gesondheid benadeel. Dit kom dus daarop neer dat die beroep die siektetoestande wat mense vrywilliglik en onbedagsaam ten spyte van waarskuwings van hul geneesheer, op hulself bring teen enorme bedrae indien dit uitgedruk word as volksuitgawes jaarliks, moet behandel

hou om nie self oor 'n saak te besin nie, sal weer lustig en listig kan saamskreeu. Hierdie meelopers (netsoos die meelopers van die terroriste), besef egter nie dat hulleself in die kruisvuur kan beland nie, want indien dit so maklik kan gebeur dat die Mediese beroep gesosialiseer kan word, is dit seker ook moontlik dat ander beroepe die prooi van sosialisme kan word — dit alles ten spyte van die Eerste Minister se erkenning dat die privaatsektor in eie inisiatief 'n rol te vervul het om die ekonomie van die land uit te bou. Die vraag ontstaan waarom die mediese beroep



Dr. Willie Pietersen

teen 'n spesiale lae voorkeurtarief. Word dit besef dat die bevolking jaarliks meer spandeer aan haarkappers en skoonheids-salonne as aan geneeskundige dienste?

Die nuwe konsepwetgewing van die Minister van Gesondheid sal natuurlik weer die vure laat opvlam en diegene wie daarvan

uitgesonder word vir nasionalisering.

Ons kan net die hoop uitspreek dat reg en geregtigheid tog uiteindelik sal seëvier en dat emosioneelbelaaide aksies vir die toekoms tot 'n absolute minimum beperk sal word. En hierby word die medici van die hele land by ingesluit en nie net die politici nie!