Threat of 'flu pandemic definite

An influenza pandemic of similar scale to those which plagued the planet in 1918, 1957 and 1968, is now a definite threat.

Speaking to media representatives in Johannesburg towards the end of May, world-renowned virologist, Prof John Oxford, said that the bird-transported H5N1 virus presented a far greater threat than the SARS virus which emerged in Asia a year or two ago.

"SARS, admittedly, reached epidemic proportions, but it was largely concentrated in one area and fortunately, due largely to the pre-emptive work by Urbani, was prevented from spreading.

"This new virus is different and has the potential of having the same impact as a tsunami or New Orleans in terms of disaster proportions," said Oxford, Professor of Virology at St Bartholomew's and the Royal London Hospital, Queen Mary's School of Medicine and Dentistry.

"Controlling SARS should be seen as a dress rehearsal for what every country will have to do now to prevent the spread of the H5N1 virus. Every country needs a plan and will have to be prepared," he said, adding that, unlike previous pandemics, the availability of medications such as Tamiflu would make a tremendous difference used both as a prophylactic and at first symptom stage.

"But this would only solve 80% of the problem," he added.

Docs, DoH, 'not miles apart' on dispensing fee

The Department of Health's Dr Anban Pillay is confident that arriving at a mutually acceptable dispensing fee for doctors will not be a drawn out affair as has been the case with the pharmacists' fee.

Pillay, who is director of pharmaceutical economic evaluations, said in a recent interview that all the medicines pricing committee really required now was "to get a good handle" on what operating costs were needed to give patients medicine in a dispensing practice.

"Basically all they (the dispensing doctors) should actually be covering is the cost of the medicine - what they pay for it - plus the operating costs needed to dispense that medicine. So we need to do a costing exercise, which shouldn't be too difficult.

Pillay explained that the dispensing doctors were asked provide the committee with similar data to that received from the pharmacists supporting why they felt the recommended R16/16% fee was inappropriate: "From this we found that the fundamental difference between them and the pharmacists is that they don't want a profit - a major statement! All they want to do is recover the cost."

To ensure that the process is transparent and inclusive for dispensing doctors, Pillay made the point that all stakeholders had to be informed that the committee was now considering the dispensing doctors fee and would be inviting comment in due course. "This will have to be *gazetted*," he said

Going on about nursing shortage not going to help...

Continually going on about the nursing problem at meetings and conferences isn't going to solve the problem, Netcare's nursing director, Eileen Brannigan, said during the recent Nursing 2006 convention at Emperors Palace, Johannesburg Airport.

Adding to this she said that nurses were suffering from analysis paralysis and should stop focussing on themselves, the profession. They should start focusing on patients instead.

"We might have to accept that we have a shortage of up to 40 000 to 45 000 registered nurses out of 90 000 of us, but talking about the problem isn't going to solve this problem. We have to find other ways of doing it," said Brannigan.

"We should be finding out what the patient wants because, if we don't deliver, nursing as a profession dies!"

Nurses can become threat to doctors...

Highly trained nurses can become a threat to the medical practitioners in the areas where they work and this tension should be recognized, delegates were told at the recent Nursing 2006 convention.

"In the long run, well-informed patients will decide how and where they receive the best value for money," Dr Edwin de la H. Hertzog, chairman of Medi-Clinic, said when discussing the nurse's healthcare delivery role from a business perspective.

Exemplifying his point, Hertzog alluded to the fact people born in the years immediately after the Second World War - so called 'baby boomers' in the USA - were becoming older and had more money available in their old age than in previous generations: "They want and can afford more personal and more sophisticated nursing care," said Herzog, adding that this implies a growth in the market demand for these services.

Pharmacists take exception to LIMS perceptions

The supply of medicines from the State Tender to low income medical scheme (LIMS) patients as referred to in the LIMS ministerial task team report to the minister, became the topic of some debate during the recent 61st conference of the Pharmaceutical Society of SA.

Favourable prices would be the main advantage, the report noted, adding: "There would be a fundamental logistical problem in the distribution of State Tender medicines to LIMS patients. One approach would be to require LIMS patients to collect their medicines from State facilities. However, this would defeat much of the service advantages and convenience that LIMS members would be seeking in joining LIMS schemes, and should thus be ruled out.

"An alternative," the report added, "would be for State Tender medicines to be distributed to retail pharmacy channels and dispensing doctors. However this would also pose arguably insurmountable logistical problems, since these outlets would now have to keep separate (and separately labelled) stocks of the same medicines for current and LIMS scheme members. This would obviously also pose substantial risks of fraud."

The pharmacists felt that these comments created doubts about the trustworthiness and competence of retail pharmacies.