

ZAMBIA COLLEGE OF PHYSICIANS NEWSLETTER

DECEMBER, 2021



VISION



Training physicians to deliver the highest quality care to patients



Building, protecting and strengthening the values of the profession

MISSION



Lead the delivery of quality medical care, by setting standards for practice and promoting clinical excellence



Provide leadership, support and advocacy for the membership



Support physicians with CPD programmes and internationally recognised assessments



Continually raise clinical standards by developing guidelines and conducting audits

Physicians of the highest calibre ensuring the best standard of medical care



Message from the President



Compliments of the season to you all.

As I reflect on the year 2021, leadership and resilience springs to mind. Amidst the ongoing COVID-19 pandemic ZACOPH has continued delivering on its core objectives, demonstrating resilience. This could not have been achieved without the participation and dedication of the membership. On behalf of the Executive Committee I wish to express our sincere gratitude to all of you for your great fortitude and resilience during the past year.

Looking ahead I wish to echo the words of ZACOPH founding President Prof. Njelesani during the ZACOPH 2021 AGM on the need for the membership to participate in building long-term resilient healthcare systems by ensuring that the leadership gains made during times of certainty are not eroded during uncertain times like the current COVID-19 pandemic and other future emergencies.

May you all have a safe festive season!

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Dr. Edna Chikoye – Kasolo
President ZACOPH

1. ZACOPH ACTIVITIES UPDATE

1.1 2021 Annual General Meeting

The 2021 AGM and scientific conference under the Theme: COVID-19 Waves: “Building long term resilience by harnessing lessons learnt” was successfully held on the 27th of November 2021. The meeting was held in a blended format of a virtual and physical meeting at Sarovar hotel in Lusaka.

In her welcome remarks ZACOPH President called on the members of ZACOPH to take their rightful place as leaders in healthcare as in uncertain times everyone is a leader.

The meeting was opened by the founding President Prof. Evarist Njelesani who discussed health leadership in uncertain times. Highlights of his presentation included key thematic areas to guide leadership in responding to the COVID-19 pandemic namely: policy and strategic guidance, governance structure, identification of resources, partnership and stakeholder engagement, ensuring the continuation of essential health services, social accountability, integrity and public confidence, review of the legal and regulatory mechanism and paying special consideration to the wellbeing and safety of healthcare workers.



AGM Room



AGM Participants

As we face the fourth and probably more waves, Prof. Njelesani emphasised the need to ensure that the essential health services were not disrupted and also the need to give special consideration for the wellbeing and safety of healthcare workers-an important pillar in the COVID-19 pandemic response. He concluded that as physicians we can build long term resilient healthcare systems by ensuring that the leadership gains made during times of certainty are not eroded during uncertain times like the current COVID-19 and other future emergencies.

The scientific conference was very informative and generated engaging discussions from the membership. The presentations made are as outlined below;

Name	Topic
Prof. Lloyd Mulenga	Circulating Sars-Cov-2 variants and 4 th wave projection models
Dr Aggrey Mweemba	COVID-19: Lessons and opportunities for clinical practice
Dr Kondwelani Mateyo	Post-Covid Respiratory Sequel: when survival opens a Pandora's box
Dr Patrick Lungu	Vitamin D status in Covid-19 and its implications on severity: The Zambian experience
Dr Maria Akani	Mental health for care givers
Moderators: Dr Brown Kamanga, Dr Patrick Lungu	
Director of Programme: Dr Dominique Chimanuka	

The main outcome of the discussions during the scientific session was the need for ZACOPH to initiate local research to generate new knowledge to inform practice by applying for grants amongst others and the need to review the medical training curriculum to align it with the future healthcare needs.

The Executive Committee wishes to sincerely thank Prof. Njelesani, all the presenters, moderators, the membership, secretariat and the pharmaceutical companies for their participation which ensured the success of the AGM and scientific conference.



Senior Physicians
Dr. D Kasonde & Prof. Nejelesani



AGM Sponsors

1.2 AIDS Health Foundation (AHF) Grant

ZACOPH successfully obtained a grant from Aids Health Foundation (AHF) to conduct an outreach programme at Chilenje and Kanyama first level hospitals in the management of patients at high risk of HIV progression through clinical mentorship and project ECHO. With permission granted by the Ministry of Health (MOH) the project commenced in October with weekly ward rounds being held at the two health facilities by a consultant assisted by a final year specialist physician trainee.



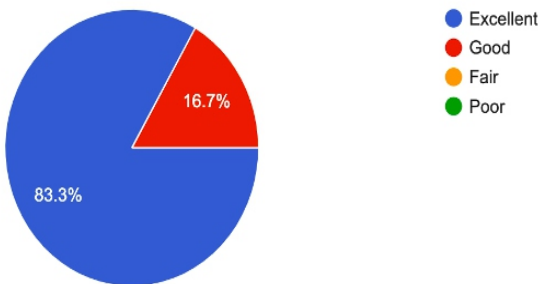
Outreach Participants
at Kanyama hospital

1.3 Trainee Mini-conference

We are pleased to inform you that the first trainee mini-conference was successfully held in August in partnership with Novonordisk under the theme 'Obesity more than meets the eye- A look at the cardio-metabolic syndrome and obstructive sleep apnoea'. The sessions were facilitated by two content experts from ZACOPH and Novonordisk and moderated by two final year physician trainees as part of capacity building. Our sincere thanks go to all who participated and ensured the success of the conference as per results of the post conference survey. We look forward to strengthening our partnerships and increasing the number of trainee mini-conferences in the new year.

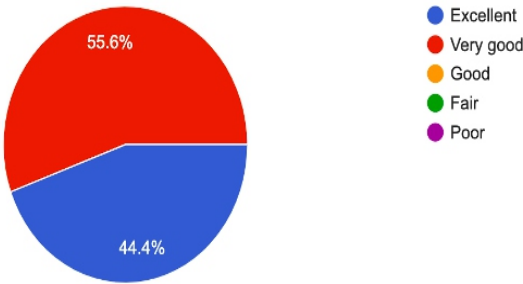
How would you rate the session 1 presenter?

18 responses



How would you rate session 1 of the conference?

18 responses



1.4 Participation in ECHO Programme

In partnership with MOH, Johnson and Johnson, ZACOPH continues to participate in the ECHO programme in building capacity for the management of HIV by providing content experts and in the curriculum development.



1.5 ECSACOP Training Programme

The second FCP part one examinations were successfully held in July. However, Zambia did not enrol any trainees for academic year 2021/2022.

1.6 Participation in the Virtual 6th ECSACOP Annual Scientific Conference

The 6th ECSACOP annual scientific conference under the theme: Building resilience in health systems and exploring frontiers beyond the COVID-19 pandemic was held virtually on the 17th and 18th December 2021. Dr Kondwelani Mateyo participated as a member of the scientific committee and also presented a paper on COVID-19 and TB: A case of two peas in a pod?. Dr Violet Kayamba made a presentation on functional gastrointestinal disorders. Zambia had further representation from Dr Deana Saylor who presented a paper on building resilience in training: Neurology training during COVID-19 and beyond.

GUEST SPEAKERS:

Dr. Bruce Kirenga
Founding Director, Makerere University Lung Institute, Makerere University

Dr. Ambrose Talisuna
Regional Advisor, IHR & Global Health Security, WHO

Dr. Noela Owarwo
Deputy Head of PCT Programme, IDI- Makerere

Dr. Philip Gothard
Associate Global Director for Sub-Saharan Africa, RCP London

Friday 17th December (5.00pm - 7.00pm EAT)
Saturday 18th December (8.30 am - 4.15 pm EAT)

The 6th Annual ECSACOP Scientific Conference
Building resilience in health systems and exploring new frontiers beyond the COVID-19 pandemic.

Register virtual attendance at www.ecsacop.org

Reflections of a Trainee Specialist Under Zambia College of Medicine and Surgery (ZACOMS).



Dr Webster Chishamabala Chewe
MBChB; MPH

Recognising the need for access to specialist doctors, the Zambia Ministry of Health (MOH) in 2017, introduced the Specialist Training Programme (STP) under the Zambia College of Medicine and Surgery (ZACOMS). Historically, the training model for specialist doctors in Zambia was through an established local academic institution e.g Master of Medicine (MMed) from the University of Zambia (UNZA) or Copperbelt University (CBU) or professional training from abroad e.g member and fellowships from Colleges of Physicians.

This local model of training limited the number of specialists graduating each year and could not match the growing need of specialists in the Country. It was out of this observation that a new model of training medical specialists which would soon shape the medical practice in Zambia was born. Learning from programmes such as the College of Surgeons of East, Central and Southern Africa (COSECSA) and East, Central and Southern Africa College of Physicians (ECSACOP) and Colleges of Medicine of South Africa, a competence-based model of training specialists was developed.

The STP commenced in 2018 with 137 trainees enrolled. However, due to a number of reasons, some trainees had to withdraw and opted to pursue other personal endeavours such that by the end of the first four years of training in 2021, only 98 trainees were able to sit for the exit examinations.

I was privileged to be part of the first cohort and the founding President of ZACOMS Student Association (ZACOMSSA). As a student association, we had the huge task of facilitating regular interactions with MOH, ZACOMS and the trainees to ensure that the STP was implemented to the expected standards. I must add that it wasn't an easy task as most of the anticipated promissory words given before the programme started remained unfulfilled.

During our four years as trainees, we faced challenges such as failure by MOH to create registrar position for the trainee specialists in various hospitals and failure to give each trainee an annual education allowance of K5000.00 under its proposed sponsorship scheme as outlined in the study leave advisory. On the other hand, ZACOMS was chronically underfunded by MOH as majority of the trainees were under the MOH sponsorship scheme making it difficult for the college to fulfil its mandate.

The student association worked very closely with the Registrar of ZACOMS to ensure that all statutory requirements from Health Professional Council of Zambia (HPCZ), Higher Education Authority (HEA) and Zambia Qualification Authority (ZAQA) were met. Additionally, universities like Levy Mwanawasa Medical University (LMMU) were engaged to ensure that those who may wish to pursue MMed training programme would be admitted upon completion of ZACOMS STP.

Lastly, from the trainee's perspective, there were other numerous challenges such as inadequate trainers and supervisors as well as inadequate teaching aids in some training sites. Despite the aforementioned challenges, all the hospitals with STP trainees have appreciated the presence and services that specialist trainees are rendering to various communities around the training health facilities.

Going forward, my dream is to have a competitive STP in all the fields of medicine and a well-funded and effective ZACOMS with incentivised trainers to ensure motivated trainees and trainers and the production of highly trained specialists. Indeed, the future of STP is bright.

Patient and Public Involvement in Clinical Governance



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In her own words.

“I pray and hope one day our Government can give diabetes the same attention as HIV/AIDS receives”

· Annique Matipa

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MY JOURNEY WITH DIABETES

Sometime in 1994 I started having a terrible sound in my head which was very difficult to explain even to doctors and I lived with this sound in my head until one day while driving, I had a minor accident and passed out. I was taken to the nearest clinic where the doctor diagnosed me with High Blood Pressure and prescribed me medications.

However, as time went on, my situation never improved and I trotted from one doctor to another with no solution. My body and hair was thinning away, my complexion changed and my energy started to deplete. I was actually so scared thinking I had contracted HIV/AIDS and so I made a decision to go to South Africa for treatment. Upon arriving there I was diagnosed with a sugar reading of 30+ confirming my type 2 Diabetes and was immediately started on insulin. The next day after the medication I felt so much better though could not stomach the fact that I had to take insulin for the rest of my life and went into depression. This led to me being prescribed anti-depressants. I received a lot of counseling about how to manage my life henceforth and was later taken off insulin and put on tablets. I was informed I had been diabetic for more than 3 years without knowing so.

I came back to Zambia and continued seeing our local endocrinologist who eventually put me back on insulin to better manage my condition. I must emphasize that this was actually the best management for my Type II Diabetes and since then I have never looked back.

In 2004 I made a trip to Canada Ontario (Charles H Best Centre) being the man who invented insulin and familiarized myself on how best to manage my condition and have followed my 6 Golden rules to date, them being: Follow my healthy eating plan, measure my blood sugar, take my medications, be active, brush and floss my teeth and check my feet regularly.

It has been a journey of 30 odd years and through determination I have persevered as well encouraged others along the way.

The challenges we face are the high cost of strips as well as insulin and I pray and hope one day our Government can give diabetes the same attention as HIV/AIDS receives with free medication.

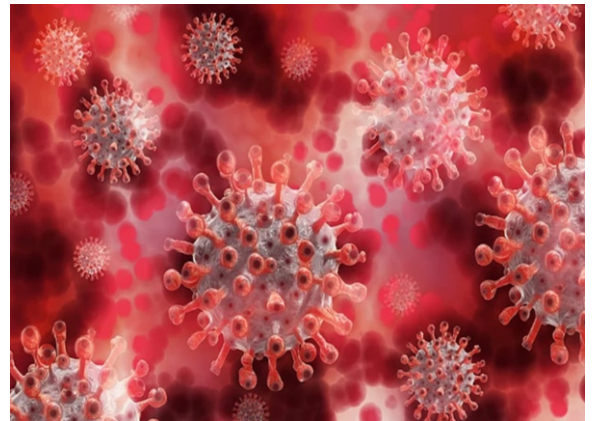
Medical Updates: COVID-19 PANDEMIC

COVID 19 PANDEMIC: TWO YEARS ON THE PANDEMIC UNCERTAINTIES PERSIST

The Covid 19 pandemic has now been with us for 2 years with over 277 million cases and 5.3 million deaths globally.ⁱ

Zambia Experiencing the Fourth Wave

In Zambia, as of 22nd December a cumulative total of 221,880 cases and 3,685 deaths have been reported. The Country has also entered the fourth wave of the pandemic with a high number of daily cases being reported from across the country.ⁱⁱ

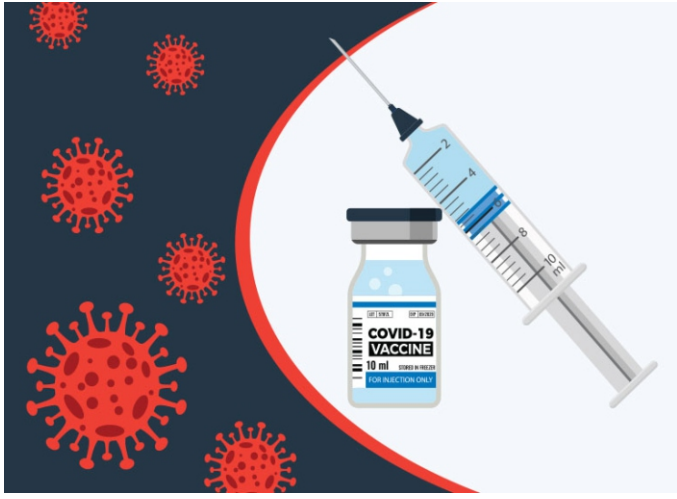


New Variants Continue to Emerge

Over the 2 years of the pandemic, several COVID-19 variants of concern have evolved namely: alpha, Beta, Delta, Gamma and recently the Omicron. The latter variant was first reported in South Africa and has since been detected in over 106 countries globally and counting. The Omicron variant has shown dozens of changes in the part of the virus targeted by the vaccine- the spike protein. Preliminary studies suggest that because of the changes in the spike protein 2 doses of available vaccines may not be enough to induce adequate protection against this variant.^{iii,iv} Vaccines are still effective against the Omicron variant although comparatively less so than against the delta variant. Because of the lower effectiveness of COVID-19 vaccines against the Omicron, recently, several countries have introduced booster doses for all the common COVID -19 vaccine including a second dose for the J and J vaccine.^v

In addition, recent data from South Africa^{vi} and the UK^{vii} suggests that although the Omicron variant is comparatively more transmissible than the Delta variant, people infected with the Omicron variant are up to 45% less likely to be admitted to hospital relative to those infected by the Delta variant. Although this may be the case, the sheer numbers of cases generated by the Omicron variant would be capable of overwhelming the hospitals services in most countries including Zambia. That is why we should all continue observing the key public health measures of masking, washing of hands, physical distancing, nasal etiquette and being vaccinated.

In Zambia approximately 13 % of the eligible persons have been fully vaccinated, far less than the 70% plus that is thought to generate Covid 19 herd immunity.^{viii} We therefore need to continue advocating for more people to get vaccinated. As healthcare professionals, we should take advantage of every opportunity to educate our patients on the importance of COVID-19 vaccination.



Vaccine Mandates are Expanding Globally

Several of our neighboring Countries and indeed developed Countries have introduced vaccine mandates for their populations. This will have consequences on Zambians traveling across borders for various reasons. Some of these mandates require that travelers are vaccinated with vaccines approved by local regulatory authorities. It is therefore

important that travelers are well informed about the vaccines that are approved in the Country of destination. Furthermore, as part of the vaccine mandates unvaccinated person in those Countries will not be permitted to enter public buildings and spaces. In addition, major government institutions and industry will only allow fully vaccinated persons to report for work.

Preventive Measures Remain the Same

Since the last newsletter, the COVID-19 preventive measures remain the same and therefore as a Country we need to strengthen adherence to these measures in addition to ensuring that as many of the target population are fully vaccinated.

STAY SAFE AND GET VACCINATED!

References

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- ^{viii} Covid-19: How Much Herd Immunity is Enough? - The New York Times (nytimes.com)
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