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Simulated hospital and patients make medicine safer

Clinical simulation experts professor Mathys Labuschage (right) and Dr Riaan van Wyk (left) attend to a human-patient simulator that can sweat, bleed, have a heart attack and be resuscitated.

Victoria's contractions speed up under the student's hand as he helps deliver her baby. The newborn with a steady heartbeat gives a cry, just before Victoria begins to haemorrhage, soaking the sheets with blood. The new father at the bedside yells at the student who is trying to stop the bleeding.

Unlike real life, this is not a crisis but a hands-on learning experience in a simulated hospital in the School of Biomedical Sciences, at the University of the Free State campus in Bloemfontein.

Clinical Simulation and Skills Unit head Prof Mathys Labuschagne says: "We are creating a safe environment to train medical professionals, to allow them to make mistakes and learn from their mistakes.

"The students can also do procedures which they would not be allowed to do in a hospital, like handling an anaesthetic emergency, yet when they graduate, we expect them to do that."

Victoria is one of the unit's 16 "human patient simulators", that can be attached to monitors, sedated with anaesthetic drugs or have a caesarean delivery, while mimicking a range of body functions. The distraught husband was an actor coached for his role.

The University of the Free State was one of the first medical schools to set up a dedicated Clinical Simulation and Skills Unit, unattached to any department, and this year it celebrates its 10th anniversary.

The unit has trained about 2,000 medical students and other health professionals over the decade. The UFS has two more simulation units, one for the school of nursing and one for the School for Health and Rehabilitation Sciences.

The more realistic the conditions in the simulated hospital, whose equipment includes monitors, ventilators and an ultrasound machine, the better the learning experience. We (can) allow them to make mistakes and learn from their mistakes.

"SimMan 3G Advanced" is one of the more sophisticated human-patient simulators, says Dr Riaan van Wyk, head of technical and IT support for the unit, which also has two medical officers, an emergency care practitioner and a registered nurse on the staff.

SimMan can sweat, bleed, have a heart attack, be resuscitated with defibrillators and react to injected substances.

Victoria and her baby are advanced models that can mimic real-life bodily functions, such as birthing complications, convulsing, bleeding and shock, and the infant can cry and become cyanotic.

The unit has other less sophisticated models, and torsos, and a cupboard full of infant manikins to practice procedures on.

"Simulation is not just the manikins, we use actors as 'simulated patients', for example, if the student needs to tell a patient they have cancer," says Van Wyk.

"For our last assessment, we had two students from the drama department who were taught to portray psychosis and depression. They were so good that not even a psychiatrist would have known they were actors."

A ward, labour ward and intensive care unit are at the heart of the "hospital", along with observation and debriefing rooms.

"With simulation, you can fast forward or slow down a scenario," says Labuschagne, for example, condensing a three-hour operation into 15 minutes.

Prof Mathys Labuschagne demonstrates how the laparoscopic simulator allows doctors a chance to practice surgical procedures, such as removing a gallbladder.

Debriefing is a key step in the training, after students have managed a simulated scenario on their own, with a lecturer or in a group.

"That is where the students learn the most. They identify their mental frame and why they did something (for example, 'I saw a doctor do this in hospital') and they discover the gaps in their knowledge," says Labuschagne, an ophthalmologist with a PhD in clinical simulation education.

Safety, efficiency and ethics are high on the learning agenda — and communication is central to all of them. Simulated patients and human patient simulators must be treated with the same standard of care as real-life patients, Labuschagne insists.

"Students do simulation in teams to prepare them for when they do community healthcare in Trompsburg. They learn a lot with, from and about each other and how to work in an interprofessional team," he says.

This type of clinical simulation made a difference during the pandemic, when hospital staff were trained in intubation, ICU care and the donning and doffing of personal protective gear at the unit. A course for doing endoscopic procedures, such as gastroscopes and colonoscopies, was recently offered at the unit on a virtual reality simulator. In two hours, the group had done the equivalent of 30 patient biopsies.

Health professionals from across SA, and other African countries, come to the unit for short courses, for example, in paediatric anaesthetics and simulation education (to train the trainers).

Universities with medical schools, like Wits, UCT, Stellenbosch, Walter Sisulu, Nelson Mandela, Sefako Makgatho Health Sciences University and the University of Pretoria all have clinical simulation units.

In a discussion on the future of clinical simulation, Labuschagne calls for training to extend beyond curricula "to an emphasis on knowledge management and communication".

"How would you like to be on a plane and the pilot welcomes you, saying it is the first time he is flying the plane. This is what we expect from doctors, to do a procedure which has never been done before," says Labuschagne. "We offer a safe in-between step between theory and practice."

Chinese Embassy Visit Strengthens UFS International Collaboration in Research and Health

The African Medicines Innovations and Technologies Development Platform (AMITD) within the Department of Pharmacology at the University of the Free State (UFS) hosted a delegation from the Chinese Embassy in Pretoria, led by the Minister-Counsellor of the People's Republic of China. The aim of the visit was to cement the collaborative relationship between the UFS Indigenous Knowledge System (IKS) and the Beijing University of Chinese Medicines (BUCM).

The visit of the Minister-Counsellor, Mr Shen Long, and his staff in Science and Technology on Friday (19 May 2023) was to also gain support for the application for two projects between the UFS and BUCM, said Prof Motlalepula Matsabisa, Director of Pharmacology at the UFS and Head of AMITD.

"First is the innovation project that we are spearheading in order to be recognised as a Presidential project, the signing of which will be witnessed by both the presidents of South Africa and China during the BRICS Summit in August."

"The second project is that of the UFS driving the establishment of the BRICS Natural Medicines Institute, supported by the Department of Science and Innovation (DSI), the National Department of Health (DoH), and the Department of International Relations and Cooperation (DIRCO). The UFS has been earmarked to head this institute. All the BRICS countries' scientists support the UFS' idea of a BRICS Natural Medicines Institute," said Prof Matsabisa.

The UFS Pharmacology IKS also made a presentation during a virtual meeting with the natural products scientists in the BRICS countries for support and adoption of the concept on the BRICS Natural Medicines Institute.

The Chinese delegation also got to tour FARMOVS and the new AMITD laboratories.

Collaboration and Co-creation

Prof Francis Petersen, Rector and Vice-Chancellor of the UFS, said he would like to see how the relationship between the UFS and BUCM can be strengthened and how it can be fed into the China-South Africa bilateral.

According to him, the university is open to supporting such initiatives, and hopefully this indigenous knowledge hub can become a critical focal point within such a potential institute under BRICS.

"It is important to see how different contexts play out in research and development. Collaboration and the whole aspect of co-creation is quite important, and I think there is a good relationship between the UFS and the BUCM that started some years ago; this is a good illustration of how important collaboration is." He further wished to see the collaboration between BUCM and the UFS go beyond IKS to other aspects of research, health, and teaching.

The basis of the relationship between BUCM and the UFS, specifically in the Department of Pharmacology and this IKS group, is built on collaboration and co-creation. The question now, according to Prof Petersen, is how to expand and strengthen that relationship. He said that without any support from funding agencies, governments, and support through structured programmes such as bilateral agreements, this programme and collaboration engagement would not be possible.

BUCM and UFS can Play an Important Role in Traditional Medicine

Mr Shen said several collaboration projects already exist between China and South Africa in the area of science and technology. He said, "We also want to promote collaboration between the two sides in the area of biotechnology, including agricultural, medical, as well as traditional. We also promote collaboration on traditional medicine; in China, our traditional medicine has helped to fight the COVID-19 pandemic. Here in South Africa, you are only starting with traditional African medicine. You want to develop your own standards, while in China we have already developed teaching about this, so we would like to cooperate in this area. You can learn a lot from China, and we can learn from South Africa as well."

According to him, China can help South Africa collaborate with partners to develop its own traditional medicine and the whole value chain in traditional medicine, from the medical plants to clinical trials to manufacturing. "BUCM and the UFS can play a very important role in this particular area".

Prof Xu Anlong, President of BUCM, pledged his support for this collaboration between the two institutions via Zoom. He said he hoped it would be successful and fruitful and hopefully they can train some of the UFS students at BUCM.

UFS to Host BRICS Institute

Prof Matsabisa, who was previously awarded a Visiting Professorship at BUCM in Beijing, China, further said he hoped the collaboration can be strengthened and expanded to other disciplines in terms of research and health.

"The complete value chain of traditional medicine and medicinal plant development is something of interest to us, especially the UFS, because we are going down that route. The UFS has been asked by the DST and the South African Health Products Regulatory Authority (SAHPRA) to lead a team of experts to assist and advise government on how we can contribute to the amendment of the Medicines Act and how we can propose a regulatory framework for traditional medicine products for SAHPRA to regulate".

"This is something that has been driven by the UFS in the context of developing South African traditional medicines – developing all value chains to include commercialisation. This also means medium- to long-term development of curricula that will pave the way for the integrated health system in South Africa".

Prof Matsabisa is already thinking of a pilot programme for integrated health facilities or clinics, where medical doctors and trained traditional health practitioners could work side by side in the same facilities and attend to the same patients. He will also convene two meetings of BRICS scientists as part of a proposed BRICS Institute for Training, Research and Innovation in Natural Medicines hosted by the UFS.

UFS staff leading the charge with WHO initiatives

Prof Champion Nyoni, Senior Researcher in the Schoozl of Nursing at the University of the Free State (UFS), has been appointed to the World Health Organisation (WHO) Academy Standing Advisory Quality Committee – making him the only representative from Africa to serve in this academy.

Another UFS staff member, Prof Motlalepula Matsabisa, an expert on African traditional medicine and Head of the African Medicines Innovations and Technologies Development Platform (AMITD) within the Department of Pharmacology, has also been appointed to serve on a WHO initiative – the WHO Global Centre for Traditional Medicine Editorial Board/Evidence Task Force. His appointment will be effective until the end of December 2023.

Prof Matsabisa will also attend the first WHO Traditional Medicine Global Summit in India in August 2023, after being invited to serve as a member of the Summit External Advisory Group for the WHO Traditional Medicine Global Summit ('Advisory Group').

Prof Motlalepula Matsabisa, an African traditional medicine expert and Head of the African Medicines Innovations and Technologies Development Platform (AMITD) within the UFS Department of Pharmacology.

The appointment of Prof Nyoni, who is the current Chairperson of the Board of Directors for the Africa Interprofessional Education Network (AfrIPEN), and Deputy Chair of the Board for Interprofessional Global – a global confederation of interprofessional networks based in the Netherlands – will be effective for two years.

The WHO Academy is a priority initiative of the WHO transformation agenda and will support accelerated learning and skills recognition of staff and external stakeholders to advance the implementation of the WHO's strategic plan and 'triple billion' goal: ensuring that by 2023, an additional one billion people benefit from universal health coverage; one billion more are afforded better protection in health emergencies, and one billion more enjoy improved health and well-being.

Work and Contribution Being Recognised

"I feel thrilled about this exciting adventure. I think this is an exciting opportunity in my career to be recognised by an organisation such as the WHO to serve in the capacity of adviser. I think this is a huge feather in my cap, our School of Nursing, and the faculty. My work and contribution are being recognised and this is a good thing. I am hoping to make an impact in this committee and to also learn from it," says Prof Nyoni.

Even though there is a bit of pressure representing the whole continent, Prof Nyoni believes his experience with global organisations will come in handy. He is ready to take on the challenge, give it his best, and leave a legacy of excellence.

"Due to the complexity of health professions education in our context, our different cultural, geographical, and socio-economic issues, it is truly an interesting concept to actually think of representing an entire region. I have worked in and continue to work in many countries in Africa through various research projects and postgraduate students, which gives one some insight into what is happening in the region, but often one needs to know more."

Global Knowledge Centre for Traditional Medicine

For Prof Matsabisa, who is also the chairperson of the WHO Regional Expert Advisory Committee on Traditional Medicine (REACT), it is always thrilling to be recognised by serving in such world bodies.

The WHO Global Centre for Traditional Medicine (WHO-GCTM) was established in 2022 as a global knowledge centre for traditional medicine to harness the potential of traditional medicine from across the world through modern science and technology in order to improve the health of people and the planet.

"I look at myself most of the time and ask myself what I am doing right to be given such recognition globally. I am, however, always ready and prepared to take such responsibilities and challenges. I feel happy and great knowing that my expertise and experience is recognised so far from home. I will do my best and try not to fail anyone. I will give it my all and put my whole heart into this task," says Prof Matsabisa.

He looks forward to seeing the WHO develop tools and guidelines that will promote the institutionalisation of traditional medicine and to come up with positive resolutions on how to take traditional medicines forward.

World Takes Traditional Medicine Seriously

According to Prof Matsabisa, the world is now taking traditional medicines seriously. The developed world is now serious about using traditional medicines for their daily health needs and consumption. The world is accepting the positive and important role that traditional medicine is playing in our healthcare needs and how it is contributing to the health and well-being of people.

"It is unfortunate that, at home, we have sceptics and people still living in the past who are blind to the importance of traditional medicines. The WHO is now seriously taking the lead in giving advice and guidelines on traditional medicines. It makes me very happy to see these significant movements around traditional medicines."

Africa, Prof Matsabisa concludes, still has its natural resources and its indigenous knowledge as the main remaining tools to get the continent into development and economic freedom. If strategic decisions could be made around developments based on the natural resources for local beneficiation and moving away from the 'thinking about resources' to a knowledge-based economy, we could take the continent out of poverty, famine, and wars, and redirect resources to development, technical skills development, and wealth generation for all.

Prof Champion Nyoni, Senior Researcher in the School of Nursing at the University of the Free State (UFS).

The Link Between Childhood Cancer Survival and Access to Food

Many children in South Africa diagnosed with childhood cancer have a poorer overall survival rate and are more likely to abandon their treatment because they experience high poverty and food insecurity at home.

This is according to findings from a new study that Prof Jan du Plessis, Head of the Paediatric Oncology Unit at the University of the Free State (UFS), was part of. The study, titled 'Prevalence of Poverty and Hunger at Cancer Diagnosis and Its Association with Malnutrition and Overall Survival in South Africa', was recently published in the journal Nutrition and Cancer.

It found a high prevalence of poverty and hunger among South African children diagnosed with cancer. Food insecurity was associated with treatment abandonment and poorer overall survival.

The research was conceptualised by Judy Schoeman, dietitian at the Steve Biko Academic Hospital, as part of her PhD study. Prof Du Plessis and departmental dietitian Mariechen Herholdt, who recognised the importance and value of this study, enrolled patients, collected data, and critically reviewed the manuscript. Five different paediatric oncology units throughout the country participated.

Prof Jan du Plessis is Head of the Paediatric Oncology Unit at the University of the Free State.

Stunting as indicator of Chronic Malnutrition

Prof Du Plessis says stunting is an indicator of chronic malnutrition, and causes tissue damage, reduced function of neurotransmitters, and decreased overall development of all factors. Stunting is also associated with reduced lung growth and -function, which can influence the prevalence of pulmonary infections, have an impact on morbidity, and increase the risk of mortality. It also affects cognitive development, with poorer academic achievement and reduced economic productivity for children and adults affected by stunting.

"Our study found that South African children with malnutrition at cancer diagnosis often experienced food insecurity at home, underscoring the need to address primary rather than secondary malnutrition. This observation was especially apparent among children from rural provinces," Prof Du Plessis says. "Many children in our study experienced high poverty and food insecurity risk at diagnosis; thus, nutritional counselling targeting dietary intake in the home setting should be a priority for these patients."

High-quality diet may have protective effect

Recent literature has found that a high-quality diet may have a protective effect against some treatment-related toxicities of cancer treatment. Hunger at home was significantly associated with increased risk for treatment abandonment and risk of death.

Prof Du Plessis states, "According to the South African census (2015), 30 million people live on less than R84.11 (US$5) per day, and 55% of South African children live below the ultra-poverty line (R800/month or US$45.81/month).

"In a previous South African study of children with germ cell tumours from families with higher socioeconomic status (household income of US$191/year or US$6/day), they have experienced significant improvement overall survival (OS) at five years. Indonesian children from low-income families diagnosed with acute lymphoblastic leukaemia have also experienced significantly lower event-free survival two years or longer after diagnosis than those from higher-income families."

Prof Du Plessis says nutritional intervention should be implemented from diagnosis to improve patients' nutritional status and survival.

Enhance Collaborations to Enhance Outcomes

The study further illustrated that children with stunting and malnutrition at cancer diagnosis were more likely to live in poverty, thereby highlighting a group of children needing social services and support networks over and above the existing structures available to South African children with cancer.

The study underscores the need for medical centres to enhance collaboration with organisations that provide financial and/or other support to families throughout treatment to enhance outcomes.

The study came about as poor nutritional status in children with cancer has been associated with poorer cancer outcomes. Identifying modifiable risk factors that lead to poor nutrition in children with cancer is an understudied area, especially in a country such as South Africa, explains Prof Du Plessis.

"Understanding the scope of poverty and hunger and its association with nutritional status among children undergoing cancer treatment is needed. As half of South Africans experience chronic poverty over time, food insecurity will be affected; we investigated the prevalence of poverty and food insecurity at cancer diagnosis, their association with malnutrition at the time of diagnosis, and overall survival at one year post-diagnosis.

"Malnutrition is a modifiable prognostic risk factor. The findings underscore the importance of incorporating an assessment of the risk of living in poverty and/or with food insecurity at diagnosis – and potentially throughout therapy – to ensure that families are referred to appropriate support networks. Evaluating sociodemographic factors at diagnosis is essential among South African children to identify at-risk children and implement adequate nutritional support during cancer treatment," Prof Du Plessis concludes.

This research aligns with the UFS's Vision 130 – to not only be a university that cares and is sustainable, but also to be a research-led, student-centred, and regionally engaged university that contributes to development and social justice. This knowledge will assist in efficiently allocating hospital resources and establishing support networks to ensure that the most vulnerable children are supported with proactive nutrition interventions while undergoing cancer treatment.

UFS co-hosts first African conference on Crimean-Congo haemorrhagic fever virus

Prof Felicity Burt of the UFS and Prof Ali Mirazimi of Sweden's Karolinska Institutet have collaborated for many years on the Crimean-Congo haemorrhagic fever virus, and conceived the idea of hosting the first CCHFV Africa Conference, which allowed participants from low-resource countries in Africa to attend.

The University of the Free State (UFS), in partnership with Sweden's Karolinska Institutet, recently hosted the first CCHFV Africa Conference, at which experts from 16 countries – including 12 African countries – discussed Crimean-Congo haemorrhagic fever virus (CCHFV).

The conference was held in early May in Cape Town and included attendees from Benin, Burkina Faso, Cameroon, Central African Republic, France, Gabon, Kenya, Mozambique, Senegal, South Africa, Sweden, Tanzania, Tunisia, Turkey, Uganda, and the United States.

Keynote lectures were presented by experts in the field from South Africa, Sweden, the USA, and Turkey. Representatives of the USA's Defence Threat Reduction Agency (DTRA) and the European Research Infrastructure on Highly Pathogenic Agents (ERINHA) also attended the meeting.

Prof Felicity Burt, an expert in arbovirology from the UFS's Division of Virology in the Faculty of Health Sciences and the National Health Laboratory Service (NHLS), organised the conference in partnership with Prof Ali Mirazimi of the Karolinska Institutet, the Public Health Agency of Sweden, and the National Veterinary Institute in Sweden. Profs Burt and Mirazimi have collaborated for many years on the CCHF virus and conceived the idea to host a conference, which would allow participants from low-resource countries in Africa to attend.

First of its Kind

Prof Burt said the CCHFV Africa 2023 Conference was the first of its kind, and aimed to create a platform for African researchers to showcase their research while establishing contact and collaboration with colleagues to further preparedness for CCHFV outbreaks in Africa.

"We allowed for a total of 60 participants and were delighted with the enthusiastic response," Prof Burt said. "We had a full house. The meeting would not have been possible without the support of the DTRA, who partnered with the UFS in supporting CCHF research and bio-surveillance efforts in South Africa, the region, and the African continent."

Crimean-Congo haemorrhagic fever virus is a tick-borne zoonosis (disease that can be transmitted from animal to human) found in Africa, Asia, eastern and southern Europe, the Balkans, and the Middle East.

The virus is listed as one of the priority pathogens for research and vaccine development by the World Health Organization (WHO) due to significant public health implications and the absence of effective treatment.

"The distribution of CCHFV correlates with that of the primary vector of the virus, ticks belonging to the genus Hyalomma," Prof Burt added. "The distribution of these ticks has, in recent years, expanded to regions where conditions are favourable for the species to establish endemnicity. Hence there is growing concern that this virus has the potential to emerge and spread to new geographic regions."

Cases detected annually in South Africa

Humans become infected with CCHFV via tick bites or from contact with infected blood or other livestock or human tissue. Human infection is usually characterised by febrile (high-fever) illness, which can progress to a haemorrhagic state with a fatal outcome.

Cases of CCHFV are detected annually in South Africa, with a fatality rate of approximately 24%. Although the number of cases that occur in South Africa is low, CCHFV infections are a significant public health concern due to the lack of specific treatment and risk to healthcare workers. Currently, there is limited data available regarding the distribution and occurrence of cases in many other countries in Africa where the vector is known to occur.

Oral presentations from conference participants provided substantial evidence of the virus circulating in multiple countries, with potential to cause human infections.

"The presence of this virus emphasises the urgent need to build diagnostic and surveillance capacity for CCHFV and other arboviral disease with potential to cause outbreaks throughout Africa," Prof Burt said.

Prof Johannes Fagan – The Colleges of Medicine of South Africa (CMSA) open a new branch in Bloemfontein

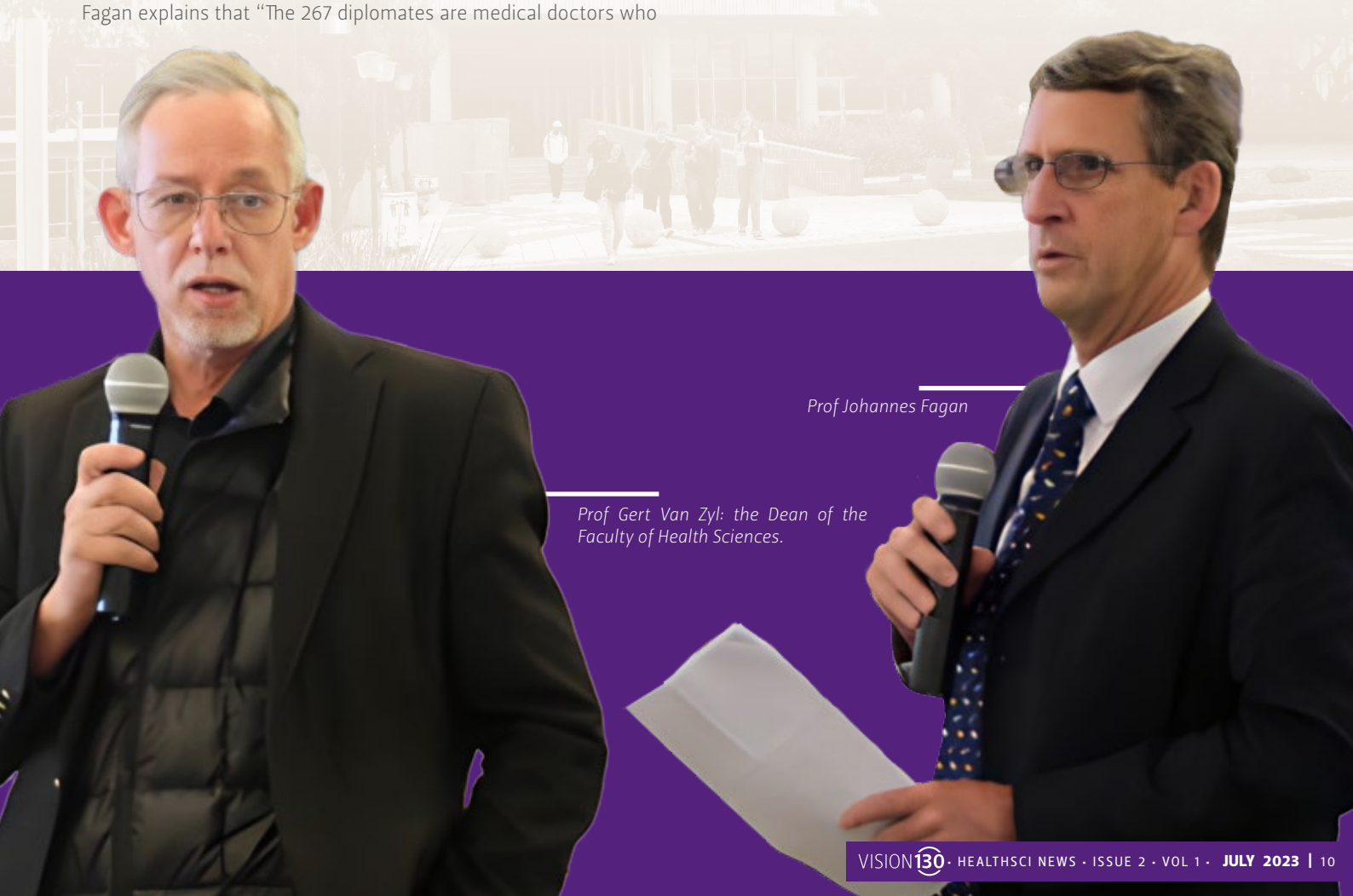
The Colleges of Medicine of South Africa (CMSA) expanded its branch as they opened a new office in Bloemfontein at the University of the Free State on 14 June 2023. The CMSA is an institution of approximately 10 000 medical and dental specialists whose purpose is to promote the highest degree of skill, efficiency, ethical standards, and professional conduct for the benefit of humanity and to promote the honour of the medical and dental profession.

With the key function of acting as a national examining body for medical professions in South Africa, the CMSA is unique in that it embraces 29 constituent Colleges that represent all the disciplines of medicine and dentistry.

Apart from offering Fellowships and Certificates to medical specialists and sub-specialists and in pursuit of its commitment to advance the standards of medical practice in underserved areas, the CMSA offers postgraduate diplomas. Prof Johannes Fagan explains that "The 267 diplomates are medical doctors who want to improve their practice capability by completing one of our Diploma examinations, e.g., the Diploma in Anaesthetics." "This is especially important for doctors working in rural hospitals where the qualifications enable them to improve on the standard and quality of care."

During the opening, the president of CMSA, Professor Johannes Fagan, stated, "It was not an easy journey for us, but we were given a good space in the heart of the campus, and we were welcomed by the Dean, Prof Gert van Zyl and his team". He further mentioned that opening a branch in Bloemfontein was well thought and thanked the Faculty of Health Sciences again.

The Dean of the Faculty of Health Sciences, Prof Gert van Zyl, stated, "Equality, diversity and inclusion in healthcare are top priorities in all our work. It was challenging, but we managed to make it. We are looking forward to working with you on this new journey, and congratulations to all professionals who will be admitted tonight".



Prof Johannes Fagan

Prof Gert Van Zyl: the Dean of the Faculty of Health Sciences.

International Nurses Day: Celebrating the Unsung Heroes of Healthcare

OUR NURSES.
OUR FUTURE.

International Council of Nurses

International Nurses Day
12 May 2023

The School of Nursing at the University of the Free State (UFS) will be celebrating International Nurses Day on 12 May 2023, commemorating the anniversary of the birth of Florence Nightingale, the founder of modern-day nursing. The theme for this year's celebration day is: "Our Nurses. Our Future" as announced by the International Council of Nurses (ICN). The theme of the international global campaign focuses on nursing in the future in order to address global health challenges and improve global health for all.

Nurses are on the frontline, and are pillars of healthcare systems, spending 24 hours with patients. The future of the nursing profession is mainly dependent on the quality of education offered by nursing education institutions. The School of Nursing trains nurses as clinical specialists and researchers to improve quality patient care.

"The sacrifices and selfless work done by the nurses during the pandemic displays the values of their contribution towards the health of the society. Thus, protection, support and respect for nurses should be promoted to retain and invest in them. The school believes it is not too late for the lessons learnt from the COVID-19 pandemic to be translated into actions for the future, which is the core message of the theme by ICN for 2023," says Dr Jeanette Sebaeng, Head of the School of Nursing.

Day of Activities

In joining the world to celebrate Nurses Day, the school has invited stakeholders and partners in health from both the public and private sectors. The audience will be addressed by, among others, Prof Mokgadi Matlakala, the Academic Chairperson of the Department of Health Studies at UNISA and the Deputy Chairperson of the Forum for University Deans in South Africa (FUNDISA). There will be several activities taking place during the day that include the Amazing Race, outdoor events, and a tree-planting to commemorate those nurses who lost their lives during the pandemic. It also aims to envision the future of nursing.

The outdoor activities will be held concurrently with the main event from 9:00 to 13:00, with stalls portraying nursing services in various contexts, for example, at private hospitals, Kovsies and in the community. Those who wish to donate blood can visit the South African National Blood Services stall. Basic screening tests such as blood pressure and blood glucose checks will be provided for free to the university community.

Nursing Students

Nursing Staff

Dr William Mhundwa First UFS Graduate to Receive Prestigious Suzman Medal

Dr William Mhundwa, Senior Registrar in the Department of Internal Medicine at the University of the Free State (UFS), has become the first candidate from the institution to be awarded the prestigious Suzman Medal as the top student in the 2022 examinations of the Fellowship of the College of Physicians (FCP).

Candidates from all medical schools in the country as well as other African countries wrote this examination in January and July 2022. Dr Mhundwa came out on top and was awarded the medal by the Senate of the Colleges of Medicine of South Africa (CMSA), which oversees the examinations.

"I congratulate Dr Mhundwa on his outstanding performance," commented Prof Nicholas Pearce, Head of the School: Clinical Medicine at the UFS. According to him, this is a prestigious award, and given that it is the first time that a candidate from this university has been awarded this medal, it is extra special for us as a department, faculty, and institution.

Dr Mhundwa was born in Harare, Zimbabwe, to subsistence farmers and is the eldest of four boys. He immigrated to South Africa nearly ten years ago and started studying medicine as a way to fulfil his parents' dreams. He eventually found his calling in internal medicine, specifically nephrology (kidney disease), and would like to obtain further qualifications in this field at the university.

"My achievements are the result of dedication to teaching internal medicine consultants. I am indebted to the Free State Department of Health for the opportunity to train and work under them. I hope to see great academic achievements within this province," says Dr Mhundwa.

He graduated in April 2023 with a Master of Medicine, cum laude. His thesis was about The Prevalence of Chronic Kidney Disease Among Type 2 Diabetes Mellitus Patients in central South Africa.

Dr Mhundwa believes "that kidney disease is a scourge in modern society. Early diagnosis is necessary to prevent patients from requiring kidney transplants and dialysis and to improve the quality of life of my patients".

Prof Thabiso Mofokeng, Head of Department: Internal Medicine, said, "This achievement represents the UFS' high academic standards on a national front. We hope this is the first of many."

Prof Thabiso Mofokeng, Head of Department: Internal Medicine, and Dr Busiswa Bisiwe, Head of the Unit: Nephrology and Dr William Mhundwa's supervisor, congratulate him on his great achievement.

Student Voice: Mia Coetzee

I am Mia Coetzee. I am originally from the North-West but spent most of my life in Bloemfontein in the Free State, where I matriculated from Sentraal High School in 2022. I am currently a first-year medical student at the University of the Free State (UFS). Studying at the UFS has been wonderful, and I am certain I will continue to enjoy it. I find the content of my modules challenging but exciting. Studying at the UFS these past few months has not only allowed me to expand my knowledge but has also given me the opportunity to make good and lasting friendships.

Earlier this year, I received a call informing me that I had been selected for the 2023 NSTF Brilliants Programme based on my matric results for Maths and Physical Science, as well as my choice of studies. I also received an email explaining what the programme entails. Only about 18-26 students are selected each year – at least two from each province. We were acknowledged at an Awards Gala that took place on 13 July 2023. We also went on a tour from 09 to 13 July. Some of the places that we visited include the Sterkfontein Caves and Walter Sisulu Botanical Gardens.

I did not expect the call and was quite shocked to hear that I had been selected.

In High School, I always enjoyed Maths and Physical Science and committed to doing well in both. I wanted to be accepted to study medicine at the UFS. Having this goal helped me to work hard to achieve good marks. Before every exam, I would pray and ask that I answer the questions to the best of my ability. I always try to give my all in everything I do and want to complete a task knowing I did the best I could. Having this mindset and love for the two subjects were two core reasons for my results.

When asked what advice I would give those who would like to follow in my footsteps, I thought to keep it short and straight to the point – There is no beating around the bush and no shortcuts. Always try and give your best. Hard work leads to success.

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