The Cathartic is the alumni magazine of the Faculty of Health Sciences and has a history dating back to 1921.

3. Dean shares long-term vision for the Faculty

6. World First for Professor Heather Zar

18. Alumnus Dr Bill Gild talks about giving back

20. Golden Jubilee reunion for medical class of '63
Dear Alumni

This is a special occasion, being my first opportunity as Dean of the Faculty of Health Sciences to welcome our thousands of alumni to this edition of Cathartic.

Since taking up my appointment in August last year, I am now even more committed to continuing the excellent work of my predecessors, all of whom have provided inspiring leadership in steering the Faculty to the academic and teaching heights for which it has become world renowned. I wish to extend a special thank you to recently retired former dean Prof Marian Jacobs, who will be remembered with much fondness, and for the strong relationship she had with students.

It is a privilege and honour to be at the helm of the top African Faculty of Health Sciences, which is also ranked at number 53 in the world, according to Times Higher Education 2013 global ratings. Most of you would not know that although I hail from across the Liesbeek, where I completed my undergraduate MBChB and postgraduate MMed and FCP (SA) at Stellenbosch University, I later spent two years at UCT in Medical Biochemistry, so indeed consider myself an alumnus as well! You are welcome to check my subsequent career activities on our website www.health.uct.ac.za/fhs/about/management/dean.

Many of you have maintained strong links with us, and over the years have attended reunions, reconnecting with your classmates, and reminiscing about unforgettable experiences while students here. I attended all the reunions last year, including the Centenary gala dinner in New York hosted by the Vice-Chancellor Dr Max Price. I was struck by the strong affinity that our alumni have for UCT. As you will see in some of the stories published, we especially appreciate those who contribute financially to our Faculty’s educational and research missions.

Now 102 years old, the UCT ’Medical School’ (as many so refer to our Faculty) is very different from what you will remember. Like all medical schools in South Africa, we face challenges in expanding our capacity and infrastructure to absorb the demands of increasing our student intake to address the national shortage of doctors. By 2016, our planned intake will be 300 first year students. To accommodate this, we are calling on even greater support from our alumni to assist us in continuing and sustaining our proud legacy.

Finally, as we celebrate our achievements at our June 2014 graduations, I should share with you the wonderful news that in the past two years, from June 2012 to June 2014, our Masters graduands have almost doubled (from 56 to 101) and Doctoral graduands have almost trebled (from 10 to 29), a clear signal that our investment in postgraduate training and research is paying dividends.

I invite you to share some of the recent achievements of our Faculty and alumni - I am tremendously proud of you all.

Regards,

Wim de Villiers

Dean visits Canada to strengthen ties in health sciences

Dean Professor Wim de Villiers visited Vancouver in early May 2014 to meet with practitioners and role-players in the medical industry of British Columbia (BC) to discuss capacity building collaborations. Faculty alumnus Alan Rabinowitz (MBChB 1983) put together a grueling itinerary for the Dean. He visited institutions such as the Centre for Health Education Scholarship, the University of British Columbia Departments of Medicine and Pharmaceutical Sciences, the BC Cancer Agency, the BC Centre for Disease Control, the BC Centre for Excellence in HIV/AIDS, the Brain Research Centre, and various industry role-players to discuss process automation and analytics.

Prof. de Villiers also addressed the “Life Sciences BC McCarthy Spotlight Speaking Series” on Health Innovation South Africa and the Continent at a breakfast where he presented the work, focus, and accomplishments of the Faculty. The Dean’s visit ended with a dinner for Alumni and friends, where the floor was opened for lively discussion on collaborations, standards, and the will to work together in achieving a closer relationship with the Faculty.

2000 - the number of FHS alumni in Canada
Dean Prof Wim de Villiers shares his long-term vision for Faculty

"If you cannot measure it, you cannot analyse it," a by now familiar phrase from new Dean Professor Wim De Villiers. The occasion was his presentation to staff on his State of the Faculty of Health Sciences Report and Vision 2025, underlining his hands-on approach to developing the Faculty and guiding it to meet its developmental objectives through tangible deliverables.

Reviewing the key strategic areas impacting on the Faculty in 2014, the Dean reported on the 2013 undergraduate graduation statistics and course pass rate and throughput. He proudly pointed out that the MBChB programme typically had the highest overall undergraduate pass rate at UCT; the average pass rate for courses over the period 2010-2012 was 96%, with the lowest pass rate being in the first year (93.16%) and the highest in the sixth (final) year (99.39%). The throughput rate was also relatively high: seventy-nine percent of MBChB students who had entered in the 2007 cohort had graduated by 2013. National demands to increase our student numbers dramatically over the next few years would have a major impact on infrastructure, including the need to expand our teaching platform beyond our current one.

Identifying a gap in the teaching system, the Dean proposed the need for the creation of a Department of Health Sciences Education for the Faculty to oversee undergraduate teaching (curriculum, pedagogy, assessment); postgraduate training; a clinical skills programme; the various undergraduate intervention programmes; admissions policy and selection; continuing education and continuing professional development; and possibly medical ethics.

Research remained a key driver of the Faculty's growing status as the top African health sciences institution. Turning to contracts and grants funding, Prof de Villiers analysed the growth of research income over the past five years. He showed that there had been a 17% increase in the Faculty's research income since 2012. This amounted to more than 55% of UCT research income, and was generated primarily by the IDM, the Department of Medicine, the Department of Paediatrics & Child Health and the Department of Public Health & Family Medicine. Income from local sources added up to 25% of all research income; income from foreign sources came to another 75% of these, contract research income amounted to 33%.

He also spoke about initiatives to encourage and reward research in the Faculty during this time. The Young Investigator Best Publication Awards had been introduced, as had been new postgraduate publication incentives and awards. Postdoctoral fellowships had been increased, and MMed project funding had been made available to departments to support research. Clinical research supervisor workshops had been offered and undergraduate and postgraduate research days held.

This has borne fruit in our research output, through a 20% increase (comprising 40% of UCT output), with key contributors being the Departments of Medicine, Clinical Laboratory Sciences, Paediatrics & Child Health and Public Health and Family Medicine.

"The need for a comprehensive Faculty strategy to take us up to 2025 is critical for our growth and sustainability," said the Dean, adding that strategic marketing and fundraising would be key to attracting the major funding required for this. He emphasised the importance of strengthening our partnerships with key stakeholders, highlighting the significant role our alumni can play in sustaining our global reputation for health research, teaching and training. This culture of giving back to your alma mater was very strong in North America, and the Dean indicated his commitment to engaging with alumni on this.

The Faculty strategy for 2025 also provides an opportunity for significant organisational change to respond to the changing environment," said the Dean, referring to a SWOT analysis that had been completed and stakeholder participation in the process. Further consultation would take place in the second and third quarter and it would be completed by the end of the third quarter.

"The ingredients for the Faculty's future success are curiosity, energy, courage, persistence, focus and discipline," he concluded.

### About student numbers in the Faculty

**2009-2013**
- a growth in undergraduate and postgraduates
- in 2013 postgraduate student numbers exceeded undergraduate
- the biggest spike in postgraduate numbers was for master's and doctoral graduates in 2013
- the number of postdoctorates almost doubled in the past five years

**2014 (June)**

**Undergraduates:** 1937
**Postgraduates:** 1829 (registrations ongoing - final figures by end of October)
**Postdoctorates:** 94
Faculty honours Madiba’s legacy

Hamba Kahle
Nelson Rolihlahla Mandela
1918 - 2013

Madiba leaves legacy for health

Along with the rest of the nation and the world, the University of Cape Town’s Faculty of Health Sciences mourns the passing of our beloved Madiba.

We also celebrate the privilege to have had him as our first democratically elected leader. During his Presidency, he laid the foundation for an accessible and equitable health system. One of the first changes introduced impacted tremendously on the heath of women and children. He was passionate about the heath of our people, and made public his personal experience of TB and HIV/AIDS to raise awareness. Released in 1990 after 27 years of for challenging South Africa’s racist policy of apartheid, he is a global icon, with the ability to mobilise people across the world to act for social and political justice. For this he was awarded the Nobel Peace Prize (1993), received more than 250 awards that are in every way honourable, keys to cities, and honorary degrees. Known for his sense of humour, honesty and humility, his love of children is legendary. The Nelson Mandela Children’s Fund and Nelson Mandela Foundation continue the work he began.

To view the Faculty’s commemorative Madiba brochure click here

Acknowledgements:
Research, Writing, Editing, Proofreading, Layout and Design: Linda Rhoda, Charl Linde, Joan Tuff
Contributions: UCTCMD, Helen Swingler, all faculty colleagues, students and alumni who submitted information and images
In celebration of its 10th year, the Institute of Infectious Disease and Molecular Medicine (IDM) will host a symposium ‘Driving Research for Human Health in Africa’ from 2 to 4 November 2014. Established in 2004 as a trans-faculty postgraduate research institute based within the University and located within the Faculty of Health Sciences, the IDM opened its doors with the completion of the award-winning steel and glass structure joining the two Wemben and Beit Buildings. In line with its vision to be an international centre of excellence where world-class scientists work together to tackle diseases of major importance in Africa, the IDM has grown rapidly into a global leader in infectious disease research, in particular tuberculosis, HIV/AIDS and HIV-associated TB.

The Institute covers research from the basic sciences to clinical and public health, with the aim of translating its findings into policy and practice. In its short ten years, the IDM has gone a long way in achieving its mission - to conduct research that is leading-edge and relevant to the needs of African people; to develop indigenous scientific capacity in biomedical, clinical and public health research; to influence health policy and practice by translating scientific discoveries and applying them in our communities; and to build partnerships with other Institutes and Centres in South Africa and elsewhere.

The IDM has much to celebrate - among its Members are accomplished academics and international leaders in their respective fields, across more than 20 research groupings of varying size, scope and type. Four of its Members are coveted A-rated scientists - in South Africa, the highest rating in the country awarded by National Research Foundation (NRF) - including its current Director, Professor Valerie Mizrahi. Among its laboratory and clinical trial facilities are some of the most cutting-edge technologies in Africa. The IDM now raises approximately ZAR 250 million in research income each year from mostly international funders, equating to half of the Faculty’s and a fifth of UCT’s research income.

“The IDM also serves as a major training hub for postgraduate students and postdoctoral fellows, and we are committed to encouraging international students to return to their home countries to continue their work,” says Mizrahi, who is the second Director of the Institute. “In 2013,” she adds, “the number of students housed in the IDM complex totalled 200 including 110 PhD students; with 68 postdoctoral fellows (constituting more than half of those registered in the Faculty; 50% were South African and the remainder mostly from other African countries.”

Members contribute significantly to UCT’s journal productivity, with 300 papers in 2013 in mostly international peer-reviewed journals. Through the Member groups, the IDM has established a vast network of partnerships and collaborations with researchers and research institutions across the world including colleagues at 36 institutions in 21 other African countries.

The programme for the 10th Anniversary Symposium will look back on the major achievements of senior members of the IDM and others within the Faculty of Health Sciences in the fields of infectious disease and molecular medicine – focusing on areas of leadership, comparative advantage, and impact – and look forward through the lens of the next generation of researchers. The opening session of the Symposium is on Sunday 2nd November, and will be followed by the keynote Wolfson Memorial Lecture by Professor Mark Davis from Stanford University, USA. His ground-breaking research on the immunology of infectious diseases has particular relevance in the South African context. This lecture will be open to the public and is expected to attract significant interest.

**Associate Professor Emeritus Naude honoured with prestigious award**

**Premier research entity the IDM celebrates ten-year anniversary**

In celebration of its 10th year, the Institute of Infectious Disease and Molecular Medicine (IDM) will host a symposium ‘Driving Research for Human Health in Africa’ from 2 to 4 November 2014. Established in 2004 as a trans-faculty postgraduate research institute based within the University and located within the Faculty of Health Sciences, the IDM opened its doors with the completion of the award-winning steel and glass structure joining the two Wemben and Beit Buildings. In line with its vision to be an international centre of excellence where world-class scientists work together to tackle diseases of major importance in Africa, the IDM has grown rapidly into a global leader in infectious disease research, in particular tuberculosis, HIV/AIDS and HIV-associated TB.

The Institute covers research from the basic sciences to clinical and public health, with the aim of translating its findings into policy and practice. In its short ten years, the IDM has gone a long way in achieving its mission - to conduct research that is leading-edge and relevant to the needs of African people; to develop indigenous scientific capacity in biomedical, clinical and public health research; to influence health policy and practice by translating scientific discoveries and applying them in our communities; and to build partnerships with other Institutes and Centres in South Africa and elsewhere.

The IDM has much to celebrate - among its Members are accomplished academics and international leaders in their respective fields, across more than 20 research groupings of varying size, scope and type. Four of its Members are coveted A-rated scientists - in South Africa, the highest rating in the country awarded by National Research Foundation (NRF) - including its current Director, Professor Valerie Mizrahi. Among its laboratory and clinical trial facilities are some of the most cutting-edge technologies in Africa. The IDM now raises approximately ZAR 250 million in research income each year from mostly international funders, equating to half of the Faculty’s and a fifth of UCT’s research income.

“The IDM also serves as a major training hub for postgraduate students and postdoctoral fellows, and we are committed to encouraging international students to return to their home countries to continue their work,” says Mizrahi, who is the second Director of the Institute. “In 2013,” she adds, “the number of students housed in the IDM complex totalled 200 including 110 PhD students; with 68 postdoctoral fellows (constituting more than half of those registered in the Faculty; 50% were South African and the remainder mostly from other African countries.”

Members contribute significantly to UCT’s journal productivity, with 300 papers in 2013 in mostly international peer-reviewed journals. Through the Member groups, the IDM has established a vast network of partnerships and collaborations with researchers and research institutions across the world including colleagues at 36 institutions in 21 other African countries.

The programme for the 10th Anniversary Symposium will look back on the major achievements of senior members of the IDM and others within the Faculty of Health Sciences in the fields of infectious disease and molecular medicine – focusing on areas of leadership, comparative advantage, and impact – and look forward through the lens of the next generation of researchers. The opening session of the Symposium is on Sunday 2nd November, and will be followed by the keynote Wolfson Memorial Lecture by Professor Mark Davis from Stanford University, USA. His ground-breaking research on the immunology of infectious diseases has particular relevance in the South African context. This lecture will be open to the public and is expected to attract significant interest.

**Associate Professor Emeritus Johan Naude**

From UCT’s Division of Urology has been awarded the Albert Schweitzer International Teaching Award from the Societe Internationale d’Urologie. Assoc Prof Naude was head of the Division of Urology from 1993 until 2002, and since then, Associate Professor Emeritus in that department, with ongoing postgraduate teaching commitments. The award ceremony will be held in Glasgow, in October this year.
Paediatric pulmonologist Prof Heather Zar has just been awarded the 2014 World Lung Health Award in recognition of work that has "the potential to eliminate gender, racial, ethnic, or economic health disparities worldwide". What work has warranted this international acclaim?

Respiratory illnesses like asthma, pneumonia and tuberculosis (TB) are global issues. The burden of these diseases, however, falls in large part on Africa and other low-and-middle-income countries, a significant portion of whose populations are under the age of 17 years.

That's why it is particularly important that the World Lung Health Award – given out every year by the American Thoracic Society – is going, for the first time, to someone from Africa and someone specialising in childhood health. Prof Heather Zar, head of the Department of Paediatrics and Child Health at the Red Cross War Memorial Children's Hospital, received this award at a ceremony in San Diego in May.

"This award was given to me, but it reflects a lot of work done by a lot of people, and strong collaborations with excellent colleagues," says Zar. "My hope is that it helps shine a spotlight on this relatively under-resourced area of research. Children are so seldom prioritised on the health agenda. There's a lack of knowledge about the burden of childhood illnesses – even though children make up 37% of the population in South Africa, and 50-60% in other African countries."

Her expertise has long been locally and internationally acknowledged: The past president of the South African Thoracic Society and the current president of the Pan African Thoracic Society, Zar is set to become the next chair of the Forum of the International Respiratory Societies. Her career highlights are many and varied.

After finishing her postgraduate training in the United States specialising in paediatric pulmonology, Zar returned home and applied for the only available position at Red Cross – as a medical officer. "Day after day, I saw children and mothers coming for asthma, and they were being given oral treatment, theophylline," recalls Zar, "which is really not great and has lots of side-effects. Why? Because asthma spacers (the chamber you attach to an asthma inhaler, allowing children to breathe in their medication more easily over a number of breaths) were too expensive, and the hospital couldn't afford it. That's how I got started, thinking about a homemade spacer."

Zar and her team pioneered the use of what others might think of as waste: an empty 500ml plastic cooldrink bottle. "It's a good example of using the sophisticated resources of an institution like this [UCT and the Red Cross Children's Hospital] to improve care, to do something that is low-cost and impactful on child health." Zar's team ran nuclear medicine scans on the bottles, to test how much medicine had been deposited in the lungs, as well as clinical studies in which its effectiveness in treating children was tested compared to other regular spacers.

Thanks to their low-budget solution and rigorous testing, theophylline and its side-effects are a thing of the past, and the use of cooldrink bottles as asthma spacers is now included in guidelines from the Global Initiative for Asthma and the World Health Organisation (WHO).

Zar's research projects and the training programmes have involved significant capacity building, not only in the care of patients but also in clinical research, ensuring the development of the next generation of African leaders in child health. Story by Judith Browne, Photo by Michael Hammond
Five UCT Faculty of Health Sciences researchers have been selected as finalists for the prestigious NSTF-BHP Billiton Awards for 2013/2014.

The national awards celebrate outstanding contributions to Science, Engineering, Technology and Innovation (SETI) in South Africa. “With 11 UCT academics out of a total of 56 finalists, this is an excellent showing for our academic community,” says Prof Danie Visser, Deputy Vice-Chancellor for Research at UCT.

Visser believes the nominations reflect the strength and depth of UCT’s research, as well as the exceptional commitment of our researchers. “It is very pleasing for our researchers to be recognised for the significant work they do in pushing forward the frontiers of their fields. Their research has a substantial impact on a wide range of local and global issues, from solving some of Africa’s most intractable health problems to developing technologies that contribute to our economy and put South Africa on the map internationally. “It is also notable how many of our top researchers devote their energies to growing the careers of younger researchers, blazing a trail while ensuring that others can continue for generations to come.”

The winners will be announced at the NSTF-BHP Billiton Awards Gala Dinner on 3 July 2014.

CATEGORIES AND FACULTY FINALISTS

To an individual for an outstanding contribution to science, engineering and technology (SET) over a lifetime

ERIC BATEMAN is Emeritus Professor in the Department of Medicine and director and founder of the UCT Lung Institute.

VALERIE MIZRAHI is Professorial Director of the Institute of Infectious Disease and Molecular Medicine at UCT. She also directs the MRC/NHLS/UCT Molecular Mycobacteriology Research Unit, leads the UCT node of the DST/NRF Centre of Excellence for Biomedical TB Research, and is a Senior International Research Scholar of the Howard Hughes Medical Institute (USA).

TW Kambule NRF-NSTF Awards (To an individual for an outstanding contribution to SET through research and its outputs over the last 5-10 years)

KEERTAN DHEDA is Professor and Head of the Division of Pulmonology, Department of Medicine. He has made seminal contributions to understanding the pathogenesis, diagnosis, management and control of drug-resistant TB in South Africa.

PROF VALERIE MIZRAHI (see above) is also a nominee in this category.

TW Kambule NRF-NSTF Awards (To an emerging researcher for an outstanding contribution to SET through research and its outputs over a period of up to six years after award of a PhD or equivalent in research)

Thomas Scriba is Associate Professor and Departmental Director of Immunology, SA Tuberculosis Initiative.

Dr Grant Theron is Senior Research Officer at the Department of Medicine.
Inaugural Lectures 2013 - 2014

Prof Trevor Sewell
A Journey into Inner Space: A view of biology from the atomic perspective
Sound: Full speech (16.1 mb)
Write-up: Trevor Sewell on molecular biology

Prof Keertan Dheda
Back to the Future: Advances in pulmonary medicine and TB control
Sound: Full speech (15.7 mb)
Write-up: Keertan Dheda on TB

Prof Mike Lambert
The Science of Exercise Performance: Translation into practice: Novo prospectus
Sound: Full speech (20 mb)

Prof Malcolm Collins
Understanding Biological Mechanisms of Sports Medicine: An unexpected journey
Sound: Full speech (21.5 mb)

Prof Jonathan Blackburn
Discovery and Innovation in Chemical Biology: Biosynthesis, microarrays, mechanisms and diagnostics
Write-up: Jonathan Blackburn on healthcare

Prof Jacquie Greenberg
A Journey Along the Double Helix: Around the Human Genome in 42 Years
Sound: Full speech (45 mb)
Write-up: Jacquie Greenberg on stem cells

Prof Sandie Thomson
Gastroenterology: Awakening the Dormant Rolls Royce
Sound: Full speech (20 mb)

Prof Lauriston Kellaway
Neurons, Cells and Circuits: The roadmap to understanding brain function
Sound: Full speech (23.5 mb)
Write-up: Lauriston Kellaway on the brain

Prof Lee Wallis
Shifting Focus: Addressing the neglected pandemic
Read the write up
Listen to the audio (44.9 mb)
Outstanding intellect, character, leadership, and a commitment to service - these are the qualities that have won two UCT Faculty of Health Sciences graduates Rhodes Scholarships to conduct postgraduate study at the University of Oxford. The two, among a tally of 11 South African recipients for 2014, are Simon Mendelsohn (Bachelor of Medicine and Bachelor of Surgery, 2011) and Vuyane Mhlomi (Bachelor of Medicine and Bachelor of Surgery, 2011). They are among a broader annual class of 83 scholars for 2014, selected from institutions around the globe.

Established in 1903 under the will of Cecil Rhodes, the Scholarship is the oldest – and one of the most prestigious – international graduate scholarship programmes in the world. Rhodes Scholars are chosen for their potential to become 'leaders for the world's future' able to ‘fight the world's fight' and promote international understanding and peace.

Vuyane Mhlomi

Won the Kerry Capstick-Dale Memorial Scholarship, the Ackerman Family Foundation Award for outstanding leadership, and the Most Outstanding Student Leader Award in Undergraduate Faculty Council for his role as chairperson of the Health Sciences' Faculty Council. In June 2013, he featured in the Mail & Guardian Top 200 Young South Africans and South African Medical Association–Bonitas Young Leaders Award. He is founder and managing director of the MH Foundation – an organisation that enables disadvantaged children to fulfil their potential. He is keen to change the face of cardiovascular medicine, and provide a more practical approach to healthcare challenges in South Africa.

Simon Mendelsohn

Was awarded the university's premier award for student leadership and community service: the Vice-Chancellor's Student Leader Award. He is completing his medical internship in Nelspruit, Mpumalanga. While at UCT, he devoted six years to the Students' Health and Welfare Centres Organisation (SHAWCO), which runs free primary health care clinics, as well as skills development and education programmes in underserved communities around the Cape peninsula. His previous research has explored the role of situated learning – learning outside the classroom – in medical education. Mendelsohn intends pursuing a career in public healthcare management and policy, with a focus on equality and access.
UCT is debating its admissions policy for 2016 and beyond – the crux of which concerns whether race is a good proxy for disadvantage, or whether a more nuanced index of disadvantage is required. Vice-Chancellor Dr Max Price explains what is being proposed and how it differs from the current model.

Transformation – centred on values of redress, diversity, inclusiveness and the recognition of African voices – is an explicit component of UCT’s strategic plan. This commitment to transformation has specific components that speak to the demography of the student body. Specifically, the university aims to have “the full diversity of South Africa represented at UCT, weighted towards the disadvantaged communities of the Western Cape”.

UCT feels this is important – firstly, as a way to redress apartheid injustices; and secondly, because the university feels it is necessary “to create the critical diversity of perspectives that will produce new insights and a healthier education environment, promote inclusiveness within the university, and prepare students for a multicultural world of work”.

The admissions policy is one mechanism the university uses to ensure this diversity among the student body, and the current admissions policy has helped ensure greater racial diversity on campus. But the university aspires also to socio-economic diversity: it feels it would be doing better in terms of redress and equal opportunity, if it could recruit the most talented but disadvantaged students.

How does the current admissions process work?

UCT’s current admissions policy is based on the principle that talent is randomly distributed in the population, regardless of race, class, gender or other demographic variables – but that it wishes to acknowledge and redress the great disadvantage at which many people were placed based on their race, as defined by the apartheid government. It uses race as a measure of this disadvantage.

How it works is that the university first sets aspirational targets for each population group in each programme. Targets are adjusted each year based on two considerations: the pool of applicants with the appropriate results in the appropriate subjects for a particular programme, and the university’s aspiration to increasingly reflect the demography of the Western Cape and South Africa.

The university then starts to make applicants offers for the limited number of places at UCT, in order to meet these targets, by placing students in separate baskets according to their legacy apartheid population group (black, white, Indian or coloured), ranking them academically within their own group, and selecting the top few percent from each list – depending on the number of places targeted for each group.

How is the proposed admissions policy different?

Changes to the proposed admissions policy centre on the debate about whether race is still a good proxy for disadvantage in South Africa or not; and as such, whether it’s the best available basis for university policies of redress and transformation.

What is being proposed, and how does that differ from the current model?

Transformation – centred on values of redress, diversity, inclusiveness and the recognition of African voices – is an explicit component of UCT’s strategic plan (about which you can read more under ‘About the university’ on the UCT website).

This commitment to transformation has specific components that speak to the demography of the student body. Specifically, the university aims to have “the full diversity of South Africa represented at UCT, weighted towards the disadvantaged communities of the Western Cape”. UCT feels this is important – firstly, as a way to redress apartheid injustices; and secondly, because the university feels it is necessary “to create the critical diversity of perspectives that will produce new insights and a healthier education environment, promote inclusiveness within the university, and prepare students for a multicultural world of work”.

The admissions policy is one mechanism the university uses to ensure this diversity among the student body, and the current admissions policy has helped ensure greater racial diversity on campus. But the university aspires also to socio-economic diversity: it feels it would be doing better in terms of redress and equal opportunity, if it could recruit the most talented but disadvantaged students.

For detailed information about the proposed admissions policy please click here.
“We want to attract the most talented students. Because many such students will have gone to poor schools and have lower marks, they would not be selected if the selection process only considers marks.

Yet we know that, given the opportunity, they will achieve well.”

UCT Deputy Vice-Chancellor Prof Crain Soudien

Circumstances in South Africa and at UCT are changing in four key ways:

1. Increasing numbers of black applicants, often from wealthy families, are coming out of excellent schools with very good National Senior Certificate (NSC) results - and these students can get into UCT in the general open competitive pool.

2. The old apartheid correspondence of race and class has been shifting over the last 20 years. It's no longer accurate to assume that all black students are economically disadvantaged, nor that all economically disadvantaged students are black. UCT aspires not just to racial diversity, but also to greater socio-economic diversity - in the interests of fairness, and equal opportunities - and feels it would be doing better in terms of redress if it could recruit the most talented but disadvantaged students.

3. UCT, in line with the South African Constitution, aspires to a future non-racial society that does not always view the world through racial lenses. Apartheid's racial constructs were used to distribute power, to create divisions in society, to promote ethnic loyalties, and to signal superiority and inferiority. One of the main goals of the post-1994 South Africa is to transform society into one which does not privilege people or deny them opportunities on the basis of race. However, there's general support for the view that the path to that goal requires an interim period of redress, of conscious structuring of opportunities to undo apartheid's legacy of racial inequality. If we can achieve the racial diversity we aspire to for UCT, while moving away from a dependence on using race classification to do so, we believe this would be a positive contribution towards non-racialism.

4. Another concern is the current dependence on applicants self-identifying their ‘race’. On principle, some students - including disadvantaged students of colour - do not want to declare their ‘race’ (even when they should rightly benefit from the redress policy). Other students wilfully misclassify themselves in relation to the old categories. Since there is no legislated way of classifying people, this puts UCT admissions officers in the untenable position of having to decide how such applicants should really be classified.
May is Africa Month at UCT. What does this mean, and why do we celebrate? Deputy Vice-Chancellor Professor Thandabantu Nhlapo - who's responsible for UCT's African and international connections - shares his vision for the celebrations, and highlights for 2014.

"The celebration of Africa Month at UCT is important because it influences perceptions of the continent among members of our community," says Deputy Vice-Chancellor Professor Thandabantu Nhlapo. "We see our place in Africa as a place in a vibrant, dynamic and progressive continent with a wealth of future prospects. Africa Month is our antidote against Afro-pessimism."

The university-wide Africa Month Steering Committee coordinated a wide range of activities across UCT during May. For the first time, in addition to popular sporting events such as the mini-Africa Cup for soccer, we featured indigenous games (yes, stick-fighting and morabaraba) and popular township games in which everyone was able to participate. There were no fewer than three concerts. The tradition of scholarly engagements in the form of lectures, seminars, workshops, roundtables and debates also continued.

Highlights included the 20 Years of Freedom celebration concert on Upper Campus and the Africa Day Alumni concert at the Baxter Theatre. The Faculty of Health Sciences held its own events to mark Africa Month. This included an Africa Month theme pub quiz, as well as a traditional African drumming event where students and staff, including the Dean, joined in to learn some authentic African beats.

The Institute of Infectious Disease & Molecular Medicine also organised a discussion on what it means to be African-based and at UCT. Senior PhD students discussed their transition to UCT, as well as how they think they can improve Africa with the skills they acquired in the faculty. The discussion was facilitated by Dr Hlumani Ndlovu, co-author of Dikakapa Everyday Heroes - African Journeys to Success, a recently published book for a project by post-doc students to inspire youth to study the sciences at university.
A Childsafe Research and Educational Centre will be the first of its kind in Africa and play the central role in making South Africa safer for children.

Approximately 80% of injuries to children occur in or around the home. The Woolworths Childsafe Research and Educational Centre, which officially opened its doors on Thursday, 15 May 2014, will address this devastating statistic. This new centre, fundraised for by the Children’s Hospital Trust, will accommodate the staff and activities of Childsafe South Africa – a non-profit organisation that advocates for child safety nationally.

Childsafe has grown so rapidly that they require increased infrastructure to accommodate their training and educational programmes. Their previous modest office space at the Red Cross War Memorial Children’s Hospital in Cape Town has greatly limited their activities. Since 1978, Childsafe has been conducting research, implementing educational programmes and campaigning for child safety. Their advocacy work has had a significant and positive influence on legislation for children’s safety.

The Children’s Hospital Trust raised the funds needed to build a free-standing centre for staff to continue their educational and skills training programmes for child safety, and included in this building is a ‘Demonstration Room’ for the general public to learn how to safeguard their homes to prevent avoidable injuries to children. This new Centre is on the premises of the Red Cross War Memorial Children’s Hospital thus easily accessible by patients’ caregivers, especially those who have had their children treated at the Trauma Unit due to household accidents, with the intent to teach them how to avoid such accidents in future.

“As part of the educational purpose, the centre will incorporate the interior of a house demonstrating child safe designs and furnishing,” says Professor Sebastian van As, Head of the Trauma Unit at the Red Cross Children’s Hospital and President of Childsafe South Africa.

According to van As, the global burden of childhood injuries is unequally distributed, with Sub-Saharan Africa being the worst affected. The large and growing toll of child injury death, the progressive nature of childhood injuries and the frequently long-lasting effects of injury on children gave rise to the creation of Childsafe South Africa.

The Childsafe Centre will facilitate safety educational tours for teachers and learners once a month with the aim to spread awareness of keeping safe, to introduce educational posters as teaching tools at schools and to provide learners with safety activity booklets.
Formaldehyde exists as a liquid, formalin, in cosmetic products and is unstable in its gaseous state.

The study was published in the Journal of the American Academy of Dermatologists in February 2014. It was led by Associate Professor Nonhlanhla Khumalo in the Division of Dermatology. Dr Mbulelo Maneli did the laboratory work and was assisted by Associate Professor Peter Smith of the Division of Pharmacology.

Brazilian keratin treatment (BKT) and similar hair-straightening products fix and retain a straight shape even when the hair is wet and their popularity is increasing worldwide. A Brazilian mortician is said to have invented the method.

The researchers tested seven brands sold in South Africa at the time of the study. All seven products were advertised as international brands, but the study was unable to confirm that all the tested products were imported from Brazil.

The maximum safe concentration of formaldehyde set by the US Cosmetic Ingredient Review Expert Panel and by most countries, including South Africa, is less than 0.2%. Of the seven commercial BKT brands studied, six had formaldehyde levels that ranged from 0.96% to 1.4%. That is five times higher than the legal limit and these included five brands that were labelled “formaldehyde-free”.

"The concentration of formaldehyde in the products we tested confirms recent international data, this in spite of much media attention and regulatory concern," the authors say.

They add: "Heat straightens hair by breaking down temporary hydrogen bonds found between keratin filaments, but the effect is lost when the hair gets wet. The convenience and popularity of long-lasting straight hair has resulted in a flood of products. These brands are known by various names."

Writing in the South African Medical Journal, Associate Professor Khumalo said formaldehyde is associated with eye and skin reactions and adverse pregnancy outcomes. "It is classified as a carcinogen (or cancer-causing agent). Chronic exposure to high concentration is associated with respiratory and blood cancers such as leukaemia and lymphomas."

According to the researchers, high concentrations of formaldehyde, for example in the wood industry, are permitted under strict air control regulations. This is not the case in most hairdressing salons where BKT products are used daily.

The authors say that the study is limited, as they have not been able to include all internationally available BKT products.

"However, the false labelling of products as formaldehyde-free exposes unsuspecting consumers and hairdressers to adverse effects," the authors add. "Industry monitoring is needed to improve compliance and protection of hairdressers and consumers."
Rugby fans were left with an overwhelming sense of 'joie' as UCT claimed the 2014 FNB Varsity Cup trophy in surreal circumstances.

The Ikey Tigers came back from eighteen points down to claim a 39-33 victory over NWU-Pukke with a converted try in the dying seconds of the final at the Fanie du Toit Stadium in Potchefstroom.

Vice Chancellor Dr Max Price said in a statement: “This is only the second time UCT has won since Varsity Cup Rugby was launched in 2008 (the first time was in 2011). This is a joyous victory for UCT and we are very proud of our team”.

Story by Yusuf Omar

UCT Surgical Society drives inaugural international symposium

The student-driven UCT Surgical Society is spearheading an initiative to forge international connections with other surgical societies. In July, it will host the Inaugural International Association of Student Surgical Societies (IASSS) Symposium in July at UCT. This symposium follows on the society’s efforts to bring together and establish similar societies at medical schools in the country and the rest of Southern Africa, with the inaugural Southern African Student Surgical Societies (SASSS) Symposium at the University of the Witwatersrand last year.

“Through the activities and events of the society at UCT, we provide members with opportunities, skills and encouragement to facilitate their future surgical careers with activities and experiences that will enhance their development and interest in all aspects of surgery, medical research and leadership,” says Tinashe Chandauka, its President. Its core objectives aim to encourage and foster interest in surgery in undergraduate medical students, promote a culture of medical and surgical research among students, provide a kick start in surgical education and skills, set up relationships with students and faculty in the department of surgery, provide information about a career in surgery, assist in setting up other student run surgical societies both locally and internationally.

“Events are held throughout the academic year, including monthly lectures delivered by leading surgeons, forums on non-surgical topics, monthly surgical skills courses, quarterly anatomy workshops, an outreach portfolio, and a shadow programme to integrate students with the Faculty,” says Chandauka.
Few people know that the Faculty Coat of Arms is the work of alumnus and heraldic enthusiast, Dr Michael du Preez (MBChB 1958).

In 1956, during his fourth year, while serving as photographic editor of student magazine Inyanga - as well as being on the UCT Medical Students Council (MSC), he was approached to design a Coat of Arms for the Medical School. By then, he had built a reputation for his heraldic skills - having already designed a tie for Groote Schuur Hospital, which proved popular, as well as a coat of arms for the Red Cross War Memorial Children’s Hospital, which was also used on a tie. Subsequently the design of the Medical School coat of arms was used on ties and as a blazer badge.

“All male students at the time were required to wear a collar and tie and be properly dressed, as a matter of courtesy and respect to the patients whom they saw in the hospitals,” explains Dr du Preez, now retired.

Heraldry had been an interest of du Preez from his school days. He explains that the science evolved in Europe about 1000 years ago (900-1100 AD), and countries differed in their interpretations and designs. One can see how much of the symbolism used evolved from Greek and Roman mythology. The staff of Aesculapius (God of Medicine in Classical mythology), a rod around which a single serpent is entwined, or the caduceus, a winged staff around which two snakes appear and generally carried by Mercury, the messenger of the Gods, both survive to this day as symbols of the medical profession in heraldry - the caduceus particularly so in the United States. “The coat of arms for our Medical School has the caduceus symbolising doctors (and now all health professionals) going out as messengers (of health) into the community,” says Dr du Preez.

Explaining the colours used in the Faculty coat of arms, du Preez says that: “blue and silver (represented as white in heraldry) depict our UCT colours. The red with three gold annulets (rings) is derived from the ancient coat of arms of the City of Cape Town in use at the time. Red, itself, identified with blood is an appropriate colour for medical symbolism, and features on our gowns when we graduate,” he adds.

In terms of the development of the coat of arms, Dr du Preez recalls that he designed and presented a number of acceptable variations on the design to the MSC, and they settled on the one which today features on some of the marketing material of the Faculty of Health Sciences. The original drawings are now displayed in a frame in the Dean’s Suite. The name of the Faculty was eventually changed to the Faculty of Health Sciences in recognition of its increased range of scientific, clinical and non-clinical health-related activities.

Alumnus’ design for Faculty coat of arms endures

Dr du Preez is a keen photographer who collected many hundreds of clinical transparencies during his long career as a doctor, first in the former Rhodesia, and subsequently, from 1960 to the 1990’s as a House Surgeon, Registrar and Consultant Urologist at Groote Schuur and the Red Cross Hospitals, as well as overseas. Currently, he is working on his book, a biography of Dr James Barry, a 19th century British Army doctor who worked here at the Cape between 1816 and 1828. Dr Barry rose to high rank in the army, and achieved fame for fighting a duel, and for performing the first Caesarean section with survival of mother and child recorded in the English speaking world - right here in Wynberg. But Barry became most famous, notorious even, for the fact that while his body was being laid out after death, the mortal remains were found to be those of a woman!

Dr du Preez has attended several alumni reunions since graduating and served on the Committee for his 50th reunion in 2008.
Alumnus establishes bursary fund to boost nursing studies at UCT

"Your financial support will open many opportunities for advanced nursing practitioners and midwives in the country."

Postgraduate nursing studies at UCT received a major boost with a bursary fund worth R1 million established by alumnus Noel McIntosh (BSc Eng).

McIntosh and his family were honoured with the Chancellor's certificate of award and the Chancellor's Gold Circle Giving Pin - bestowed on UCT's biggest donors - on 7 July 2013. The Marjorie McIntosh Postgraduate Bursary in Child Nursing and Midwifery will support two postgraduate students per year.

McIntosh's late mother practised as a nurse and "had a long history of helping people in Africa, and she had a great passion for it," he said.

It was that legacy that the family wished to continue, said the senior McIntosh.

"Nurses do an incredible job," he said. "It's a calling."

And the McIntoshs were not content with merely dropping the money and leaving, suggesting an annual dinner where they could meet the sponsored students.

Associate Professor Sinegugu Duma, head of UCT's nursing and midwifery division, thanked the donors for their "generous support" of what is a prized medical skill in the country.

"Your financial support will open many opportunities for advanced nursing practitioners and midwives in the country," said Duma. "It will enhance their academic progress without the stress that's always associated with having limited funds. We know that is especially the case when it comes to nurses who come to the postgraduate programmes at a later stage [in life] when they have other responsibilities; they have families and kids that are already at school.

"This will really go a long way towards enhancing their academic progress," she emphasised, adding that limited funding was a distraction from the academic tasks. The bursary would also have many positive spin-offs, said Duma.

"Your contribution will also go a long way to helping this country meet its Millennium Development Goals, including empowering women - while noting that nursing is not an exclusively female profession - reducing the child mortality rate, improving maternal and child health."
The Dean and Deputy Dean of Student Affairs Associate Professor Gonda Perez met with Dr Gild to discuss, and thank him for his generous donations to our Students in Distress Fund. Dr Gild visited the Faculty while on holiday in Cape Town recently and Cathartic asked him a few questions.

Tell us about yourself... I was born in 1948 and raised in Cape Town, attended SACS (as did many of my family), following which I entered UCT Medical School from which I graduated MBChB in 1972. For mainly political reasons, I left South Africa in early 1973. I then lived in the United States from 1976 through 1994 and completed Residencies (registrarships) in Paediatrics, Paediatric Critical Care and Anaesthetics. I returned to Cape Town in April 1994, during which time my two sons were born (both are currently at high school here). I worked part-time at primary care clinics in Khayelitsha and Somerset West, completed Pupillage at the Cape Bar and practiced briefly as an Advocate. I returned to the United States in 2002.

What do you do now? For the last four years I have worked for the US government at a Veteran’s Affairs hospital. I visit my sons in Cape Town quite frequently.

Do you miss South Africa? Of course I do. Notwithstanding the fact that the bulk of my adult life has been spent in the United States, I am instantly at home with the sights, smells, accents and “culture” when I land on one of my frequent visits. I intend spending a lot of time here when I retire.

What are your best memories of being a student at UCT? It was a slog to be honest. Not being super-bright I had to work hard to get by. I felt incredibly privileged and honoured to be studying at UCT, and enjoyed the clinical years best.

What is your view of the current Faculty, how has it changed since your years as a student? Virtually all the faculty of my student days have retired, emigrated or passed away. I am not familiar with current faculty, but did meet your new Dean, who seems committed and energetic about maintaining UCT Faculty of Health Sciences in its long-standing position of excellence. Joan Tuff, of the alumni office, whom I have had the privilege of knowing for a number of years, is doing a fabulous job in maintaining alumni links. You ought to feel very privileged and fortunate having her in that position.

Why did you decide to donate to the Faculty? Do you have anything you would tell potential donors? I regard my attendance at UCT Medical School a great privilege; in my day, an example of White privilege, thankfully no more. In that sense, I feel an obligation, a duty, to support the students of the Faculty of today. My education enabled me to work and earn productively, and my strong belief is that it is a debt that needs settling, most especially on the part of my generation (and others) who benefitted so handsomely from our “accident of birth”.

What initiatives do you think would boost fundraising from alumni? Alumni and alumna are actively sought out and solicited in the States, the process being finely honed to access as many as possible. By way of example, I attended law school in the US in the mid-eighties, and, notwithstanding that I never practiced law, belonged to any Bar Association, or published anything legally related, they “found” me 10 years ago, and solicit via e-mail, regular mail and mobile phone several times a year. UCT needs to develop similar “tracking” processes for the thousands of UCT graduates living and working in the US (and other countries) as well as South Africa. Given that my generation of UCT alums will begin dying out in the not too distant future, I regard the “search and solicit” process with some degree of urgency.

Do you have any advice for medical students in terms of their careers or study? Do the best you possibly can; behave, at all times, with integrity. Identify someone (a faculty member, or one of your peers) who you believe is a good role model - learn from that person. Treat colleagues and patients with respect, kindness and honesty - become a role model yourself! Do not allow the “business” of medicine to subvert the highest ideals of being a physician - above all, “do no harm”. Becoming a physician is a tremendous privilege and honour - use it wisely.
DR GILD HAS CONTRIBUTED TO THE STUDENTS IN DISTRESS FUND (SID)

The Students in Distress (SID) fund is for student emergencies and was set up by members of the Faculty deanery to raise money to financially assist students for urgent relief and so facilitate the continuation of their studies.

Explaining the need for the fund, Deputy Dean of Student Affairs Assoc Prof Gonda Perez says, "We come across students in the course of our work who are struggling with debts to the university or who struggle academically because they have to have part-time jobs to cover their expenses. We recommend that they apply to the Students in Distress fund for assistance for basic necessities'.

Instances of need include assisting with payment of academic fees if there’s been a change in the domestic financial circumstances of a student (illness or death of a family provider) that could prevent a student from continuing with his or her studies. The fund further assists students with expenses such as accommodation, text books, transport and necessities such as food and toiletries. In 2014 two students have been assisted with the costs associated with emergency medical treatment and medicine.

Providing more information about the fund’s governance, Prof Perez explains that the money is managed by the Faculty Finance Manager who reports to the Dean and the Finance Director of UCT. The funds are invested in Portfolio 3 (like a money market deposit and one can use both capital and interest). Invested Funds are managed by the UCT Investment Committee.

A committee, consisting of people in the Student Development and Support (SDS), the Academic Administration management and the Deputy Dean: Student Affairs, make decisions about who to support from these funds. The Health Sciences Students Council (HSSC) also brings to the attention of SDS those students who are struggling financially when the students themselves have difficulty in doing so. The HSSC also raise funds for the SID fund.

Each case is ultimately reviewed on merit, with input from staff that are acquainted with the circumstances of the students. There is no maximum amount allocated to students, because allocation is entirely dependent on need.

‘What is heart-warming, says Prof Perez, is that students who have benefitted from the fund are encouraged, and want to, “pay back” once they graduate. Many now regularly contribute to the fund.

The Faculty regularly appeals to alumni, through the Alumni and Bequest Officer Joan Tuff, who raises awareness of the fund to prospective donors. Major donors in 2013 were the Faculty Class of 2011, Life Healthcare Foundation, members of the Deaneary and Dr Gild.

Dr Gild’s donation to the SID fund helped a promising 4th year MBChB student to continue her studies. She thanked him in this heartfelt letter (see below) which the student agreed could be published in The Cathartic. Name withheld for confidentiality.

Dear Dr Gild

My name is [...] and I am a 4th year medical student. Thanks to your generous donation I am now able to continue with my studies. I would like to extend my deepest gratitude to you for your kindness. You have afforded me the opportunity to fulfil a lifelong dream, without even knowing who I am. I know how lucky I am to study medicine especially at a top university such as the University of Cape Town, you have given me the opportunity to one day, not far from now, be able to contribute to the benefit of people from my hometown and beyond.

I feel extremely privileged to be writing this letter, I pray and hope that others are able to have the same privilege of following their dreams in spite of financial struggles, because of generous people like yourself. There are no shortcuts to any place worth going, you have made a difference to my journey.

Albert Schweitzer wrote:’ At times our own light goes out and is rekindled by a spark from another person. Each of us has cause to think with deep gratitude of those who have lightened the flame within us.” I hope to one day pass on the gift you have given me to someone else. Your generosity has totally overwhelmed me and I thank you from the bottom of my heart.

Yours sincerely

[...]

Name withheld for confidentiality.
Golden Jubilee reunion for medical class of '63

They came from across the globe - the United Kingdom, Australia, Canada and Israel - 50 years after graduating from UCT as young doctors in 1963.

Of the 97 who graduated that year, 46 made their way back to the medical campus for a reunion weekend in early December, the highlight of which was a Golden Jubilee 'regraduation' ceremony in the Wolfson Pavilion.

The attendees represented over 55% of the surviving class, and just under half of the original class. And 22 of these medical alumni were from abroad.

There were many other familiar faces at the regraduation. Presiding over events was Master of Ceremonies, Emeritus Professor Marian Jacobs, and special guests included four former teachers of the Class of '63: Emeritus Professor Lynn Gillis (psychiatry), Dr Cecil Craig (obstetrics and gynaecology), Dr Stuart Saunders (medicine), and Emeritus Professor Sid Cywes (paediatric surgery).

Another special guest was Dr Donna Stokes, CEO of New Somerset Hospital. The hospital has a special place in the memories of the Class of '63. Founded in 1862 and Southern Africa’s oldest hospital, Somerset Hospital was UCT’s first teaching hospital in 1920, until Groote Schuur Hospital opened in 1938. Importantly, it offered a training ground for students of colour who were otherwise restricted at Groote Schuur Hospital.

The reunion was also attended by Vice-Chancellor Dr Max Price and new Dean of Health Sciences, Professor Wim de Villiers, who both addressed the medical alumni.

But as they stood in silence to remember those classmates who had died in the years after graduating, they also remembered former President Nelson Mandela who died on 5 December, on the eve of the reunion.

Price reminded the gathering that 50 years ago, the historic Rivonia Trial had taken place, with Mandela and other leaders of the ANC in the dock. It was a momentous time in the country's history to be a young doctor, he said.

Even then, many of the new graduates went abroad to work, starting a brain drain that was to accelerate in the decades that came, said organiser Dr Ashley Robins, one of the Class of '63.

"So it's gratifying that so many people were prepared to come all this way," added Robins who retired in 2005 but has remained active at UCT as an honorary senior lecturer in the Department of Medicine.

In regraduating, the group reaffirmed the oath they took 1963.

Faculty celebrates PhD graduates at cocktail function

A celebratory cocktail function was held at the Faculty of Health Sciences to acknowledge and congratulate candidates graduating with doctoral degrees in June 2014. The function has become a popular bi-annual event and is hosted by the Postgraduate team.

The function is attended by graduates, their partners, supervisors and mentors.

Lorraine McDonald from the Postgraduate Academic Administration office handed over gifts to graduates.
Alumni reunions in photographs

Upcoming Reunion dates:

Upcoming Reunions for 2014

14-16 November - Class of 1999
21-23 November - Class of 1974
28-30 November - Class of 1964
5-7 December - Class of 1989

Upcoming Reunions for 2015

13-15 November - Class of 2000
20-22 November - Class of 1975
27-29 November - Class of 1965
4-6 December - Class of 1990
Senior alumni meet the new Dean

The new Dean hosted an alumni event in September 2013 for alumni who had graduated more than 50 years ago. “Themed ‘Meet the Dean’, this was the first in what we hope will be an annual get-together of our senior alumni,” says Joan Tuff, Alumni Officer for the Faculty, who organised the event.

She explained that as the Faculty did not organise reunions for classes after their 50th year reunion, it was felt that the Faculty should have an annual on-campus event for all senior alumni to keep them updated on developments in the Faculty.

Prior to introducing the Dean, former Head of Medicine and UCT Vice-Chancellor Emeritus Professor Stuart Saunders welcomed the alumni and thanked them for their excellent contributions to medicine in our country. Also present were the Faculty Deputy Deans. Alumni asked questions about transformation, the admissions policy, gender equity/women in medicine, and health professionals leaving the country.

The event was well attended and very positive feedback was received not only about the new Dean, but also about the opportunity to come back to campus.

Comments from alumni included: ‘It was an inspiring and informative morning leaving us feeling confident that ‘Health’ is in very capable hands. It was such a privilege to be enlightened by the very people who strive to maintain the excellent standards’.

Class members welcome Cyril Karabus back home

The MBChB class of 1957 held a luncheon for their classmate Cyril and his wife Jenny following his return to South Africa. Prof Karabus had been the centre of world media attention following his arrest and detention in Dubai (while en-route from Canada for the alleged murder of a young patient more than 12 years earlier. At the welcome event, held at the home of classmate Jill Waynik in June 2013, Prof Karabus gave an account of his nine-month ordeal.

Nineteen class members and their partners attended – the same number as attended their 55th reunion in 2012.

Prof Karabus recently launched a book on his experience (see p. 25)

Alumni mingle at the event

Alumni Senior alumni meet the new Dean

Prof Cyril Karabus
After nearly 20 years of dedicated service to UCT and the Faculty of Health Sciences, Alumni Officer Joan Tuff retires at the end of the year. Joan is currently organising her final set of reunions for ‘her’ doctors. She has significantly grown the Faculty reunions over the past few years and has worked tirelessly to ensure the success of each event. She will be sorely missed and will no doubt be called upon in future for her wealth of experience and institutional knowledge. Cathartic sat down with Joan and asked her about her future plans, best memories and much more.

When did you start working at UCT? I commenced employment at the university in April 1995 in a half-day administrative position. I started off administering “Looking on into the Future” which was a fundraising campaign for the medical faculty. I have always been involved with the Faculty of Health Sciences and moved to the actual Faculty buildings permanently in November 2000.

What does your job entail? My job is very varied. On a daily basis I do a lot of networking trying to find alumni to add to our database. I also keep track of medical school history in response to alumni queries; in this regard I am often also a first port of call for any university-related queries our alumni may have.

My main responsibility however is organising class reunions, of which there are four per year – 15, 25, 40 and 50 years. The reunions consist of a three-day programme which include an academic event, a hospital tour, a cocktail reception, and the main function, which is a gala dinner in Smuts Hall on Upper Campus. On the Sunday there is usually a mountain walk followed by a picnic in Kirstenbosch Gardens. I also assist with the doctoral cocktail events and am actively involved with the production of Cathartic.

What trends have you noticed in alumni connections with the Faculty and each other? Well, we used to do reunions for 25, 40, 50 year classes, but we wanted to pull in the younger classes. We then held a 10-year reunion, but found that doctors were busy specialising and starting families at that stage of their lives so we moved it to a fifteen-year reunion. It’s quite challenging to remind young doctors to keep in touch with the faculty. We get our committees on board and track down classmates via email. Reunions are very well attended.

What has the growth been in reunions? When I started with the reunions in 2001, attendance figures stood at between 25-30 doctors. They have now grown to between 50 and 60 doctors per reunion, with a record Class of 1979 attendance in 2004 of 75 doctors. This record still stands!

What is your fondest memory of working at the university? I love my job and ‘my’ doctors and I have made personal friends with many of the doctors over the years. There are so many memories to be honest but probably going to New York last year for the Faculty’s centenary dinner was the highlight. It was the first time that I travelled abroad for an alumni event.

Tell us about your family life... I have been married to Des for 38 years and have three grown-up children, Shereen, Kerith and Aiden. Kerith is married. Aidan lives in Salzburg, Austria and Shereen is in Cape Town. I have two dogs, a Labrador, Phoebe and Bailey, a little daschund.

So you are quite the multi-tasker, are you just as busy at home? I don’t find it easy to switch off. In the week I relax and walk the dogs after work. I enjoy socialising with friends and going out for meals and having the children over.

What are your plans for retirement? I am not sure exactly, and hope I won’t be bored! I might start learning to play golf and bridge and take some lessons. Oversea travel is high on the agenda. I enjoy gardening and tapestry, as well as walking our dogs. I hope to reconnect with a lot of my friends and hopefully have a few grandchildren to keep me busy! I also enjoy visiting our holiday house in Pearly Beach. I will be sad to leave as the doctors have become very much part of my life. I hope to keep in touch with some of them. I will also miss my UCT colleagues.
Alumnus wins Woman of the Year Award

“I am not doing only a doctor’s job, I can be a nurse, a social worker, or psychologist or a friend”

Dr Florentina Ureche was recently nominated, and won, the prestigious “Woman of the Year Award” in the Government category of the competition, for her commitment and service to children in the Paediatric Oncology wards at the Dora Nginza Hospital in Port Elizabeth. Dr Ureche is said to go way beyond the call of duty and is intimately involved in all aspects of the care of her patients, including the support of family members. Many of her patients reside in the remote areas of the Eastern Cape and Dr Ureche has collaborated with Childhood Cancer Foundation South Africa to assist with transport arrangements for these children. She has also formed links with the Wings & Wishes organisation that sponsors flights from Port Elizabeth to Cape Town for children requiring treatment at the Red Cross Hospital. She is also involved with the Reach for a Dream organisation and is in regular contact with most of the Eastern Cape hospices.

Dr Ureche’s training in Paediatric Oncology was sponsored by the CK Harris Memorial Foundation which enabled her to undergo her training at Red Cross Children’s Hospital. She has maintained strong links with Red Cross and is proud of her association with the hospital and with UCT.

Referring to her studies at UCT, Dr Ureche says “I am proud that I was able to bring to completion and submit my master’s degree dissertation. Doing research and working full-time is a demanding task which requires discipline and commitment. I was very grateful to the Chief Rabbi CH Harris Foundation which sponsored my training in the Department of Paediatric Oncology at Red Cross Children’s Hospital in Cape Town - which is a unit of high international standards well respected and recognised worldwide. It is the biggest oncology department on the African continent.”

Dr Julia Ambler runner-up for national Lead SA Hero of the Year

The regional 2013 Lead SA Hero of the Year, Dr Julia Ambler (MBChB 1998) from KwaZulu Natal, was one of the runners-up in the national Hero of the Year award held in August last year and received R150 000 for charity courtesy of the Dis-Chem Foundation. She tells us about her organisation, Umduduzi, which deals with palliative care.

Read Dr Ambler’s full story, click here

Story from Lead SA website
Physiotherapist Helen Millson has worked with national sports teams, including rugby, cricket, hockey and the South African Surf Lifesaving team. She also provided physiotherapy cover for two All Africa Games, two Commonwealth games and for the SA team at the Maccabi Games in Israel.

In 2004, she completed an M (Phil) in Sports Physiotherapy under Professor Tim Noakes at the University of Cape Town.

Referring to her job, Millson says: “My work is challenging and most enjoyable... it has been amazing how one networks globally in a short space of time. I am continuously being asked to give presentations and workshops around the country and internationally.”

Her specialties include medicolegal ethical issues, objective criteria for RTP, proprioception and neuro-motor control and groin and hip quandaries. Millson also gives keynote addresses on topics such as The Life of the Sportsman, Being on Top of your Game in Sport Business and Excellence in Sport Life.

Physiotherapist Helen Millson has worked with national sports teams, including rugby, cricket, hockey and the South African Surf Lifesaving team. She also provided physiotherapy cover for two All Africa Games, two Commonwealth games and for the SA team at the Maccabi Games in Israel.

In 2004, she completed an M (Phil) in Sports Physiotherapy under Professor Tim Noakes at the University of Cape Town.

Referring to her job, Millson says: “My work is challenging and most enjoyable... it has been amazing how one networks globally in a short space of time. I am continuously being asked to give presentations and workshops around the country and internationally.”

Her specialties include medicolegal ethical issues, objective criteria for RTP, proprioception and neuro-motor control and groin and hip quandaries. Millson also gives keynote addresses on topics such as The Life of the Sportsman, Being on Top of your Game in Sport Business and Excellence in Sport Life.
The inaugural Ralph Kirsch Golden Pen Award, honouring the former University of Cape Town Head of the Department of Medicine after whom it is named, was presented at a dinner with Dr Nkosazana Dlamini-Zuma, South Africa’s former health minister and current African Union Chairperson, as guest-speaker.

“The late Professor Kirsch was a ‘giant in the field of medicine’, “ says Head of Department of Medicine Professor Bongani Mayosi fondly of his predecessor, “and this award is a celebration of his exceptional contributions to the field of medicine in South Africa.” During his colourful career, Professor Kirsch edited 6 books, wrote chapters in 47 other books and authored 174 abstracts and 32 listed publications; his work also contributed to the formation of the South African Medical Association (SAMA), of which he was president at the time of his passing.

Dr Dlamini-Zuma concluded her keynote address on the status of health on the continent by speaking about Professor Kirsch’s contribution to medicine, referring to him as not only a doctor, but a researcher, a scientist and above all, a mentor. Dr Dlamini-Zuma was among the first ministers of health from developing countries to introduce routine Hepatitis B vaccinations, based on advice from Professor Kirsch and other liver specialists in South Africa.

The South African Medical Journal (SAMJ) Ralph Kirsch Golden Pen Award, introduced by SAMJ Editor, Prof Janet Seggie, was established to recognise the journal’s most cited publication in the preceding 3 years. The first recipient is Prof Mike Sathekge of the University of Pretoria, who had the most cited article published in the SAMJ from 2009 to 2012.

The event, at the Marimba Restaurant, Cape Town International Convention Centre, was attended by the leadership of both Groote Schuur Hospital and UCT, as well as family, friends and colleagues of Prof Kirsch.
Joseph Baron

The Faculty’s oldest known living graduate at the time of its centenary in 2012, respected alumnus Dr Joe Baron, passed away on 26 June 2013, two weeks short of his 102nd birthday. Dr Baron will be remembered by many for the delightful interviews held with him as part of our centenary celebrations, UCT Alumni News and the Faculty’s centenary film, ‘The Faculty of Health Sciences at 100 years’. Born in Bulawayo, Joseph Baron excelled academically, racking up six As in the London Matric Exam in 1928.

He came to UCT on a Beit Scholarship, having come first in Rhodesia in the Scholarship examination. He was awarded a Rhodesia Government scholarship and a UCT scholarship to attend UCT (a total of 100 Pounds per annum was adequate to cover all his tuition and residence fees). He obtained a first class in every subject in his first year and was always top of his class. Dr Joe Baron graduated with an MBChB in December 1934.

Aurelio Bergamasco

Dr Aurelio Bergamasco (MBChB 1948) practised in Rondebosch until 1983 and then in Kent in the UK until he retired in 2000. He devoted his free time to constructing many things, among them a BD-4 aeroplane (in which he flew all over South Africa), a model traction engine and 5 skeleton clocks. He passed away, aged 90, in Oxford on 1 November 2013.

John Cassidy Ewart Kaufmann

Professor Kaufmann was born in Umtata in 1924 and graduated MBChB from UCT in 1947 as did his future wife, Suzanne (née Hins). After working in the pathology department at UCT as well as the Government laboratory in Orange Street, he joined the SAIMR in Johannesburg. He specialised in neuropathology and in 1972 emigrated to Canada to take up the Chair in Neuropathology at the University of Western Ontario where he remained until his retirement in the early 1990s.

His interest in and love of Africa endured and he was intrigued by his wife’s family life in the Congo, Rwanda and Burundi, and acquired a considerable collection of central African art. He also collected Africana literature.

Professor Kaufmann was widely acknowledged in his field and loved by his students. He was a Renaissance man and a true gentleman and his inquiring mind, attentiveness and humour was appreciated by all who knew him. Pre-deceased in 2010 by Suzanne, he passed away in London, Ontario, Canada on 2 February 2013.
**Ivan Nurick**

Dr Ivan Nurick was born on 25 August 1934 in Queenstown, after which his family moved to Indwe in the Eastern Cape.

Ivan enrolled at UCT and moved into Driekoppen residence and later into Medical Residence. Upon graduation in 1957, he spent 2 years at Edendale Hospital. He returned to Cape Town working in general practice but went on to specialise as an anaesthetist at Groote Schuur Hospital. He practised as a specialist anaesthetist until he retired in 2008.

Always interested in the running of his alma mater, he achieved a variety of positions on committees. He was elected to the Student Representative Council (SRC) and the Medical Students Council (MSC), as well as the National Union of South African Students (NUSAS). He had the honour of being awarded the Abe Bailey Scholarship in 1957 which took him to the UK along with other recipients of the award from other universities in South Africa.

Ivan had an amazing memory. He knew all the initials and the full names of his class of 1957 (and those of all the directors and CEO’s of share companies on the Johannesburg Stock Exchange, one of his great interests).

He was a keen facilitator of his class reunions. He enjoyed playing detective, tracing classmates wherever they were in the world, taking great pride in tracking them down, becoming somewhat annoyed if he received a poor response to his letters.

He was a keen sportsman, attending virtually every 1st Team UCT rugby game for more than 50 years. He wrote two books on the history and personalities of UCT rugby, and was also an ardent supporter of UCT cricket. He was a keen long distance runner and ran the Medical 10 race a number of times. Ivan passed away on 29 November 2013.

**Raoul de Villiers**

Professor Raoul de Villiers was born in Stellenbosch in 1927; he graduated BSc from Stellenbosch University in 1946 and MSc from UCT in 1948. He then enrolled at UCT as a medical student, graduating MBChB in 1952. He spent 4 years as a GP in Port Elizabeth and then returned to UCT as a registrar for Prof Jannie Louw at Groote Schuur Hospital to train as a surgeon. In 1961 he qualified as a surgeon and attained a Master of Surgery degree due to his thesis on the Aortic Valve.

In 1962, he, with his wife and baby son of one month went to the USA on a Cecil John Adams Scholarship to be a Research Fellow for Dr Adrian Kantrowitz at the Maimonides Hospital in Brooklyn, New York. Returning to Groote Schuur Hospital, he worked as a full-time consultant with Chris Barnard in cardiac surgery.

Raoul was then appointed to the newly established Medical Faculty at the University of the Orange Free State as the first Professor of Surgery and Head of Division. His later years saw him return to Groote Schuur Hospital as consultant surgeon and Associate Professor. He officially retired in 1992 and continued working part time at GSH and in limited practice in association with Dr Charles Simonsz. His last seven years were spent bravely enduring Merkel cell cancer, which battle he lost in April 2014.

---

**UCT Legacy Society hosts alumni in London**

FHS alumnus, Dr Santilal Parbhoo, joined 25 fellow UCT alumni who gathered in London in May 2014 for a lunch hosted by UCT’s Legacy Society. Charles McGregor, Trustee of the University of Cape Town Trust, a UK registered charity, gave a UCT update, and René Note of UCT’s Development and Alumni Department encouraged guests to consider leaving a bequest to their alma mater.
Useful information

How to access your academic records

Verification of past training in the Faculty of Health Sciences

The verification of the undergraduate training of UCT graduates is done by the Faculty Office of Health Sciences. The verification of postgraduate medical training is done by individual departments but coordinated by the Faculty Office. Foreign professional boards have different requirements for the registration of South African health sciences graduates in those countries. Verification fees at the UCT Faculty of Health Sciences depend on the complexity of the documentation to be completed, availability of information and the required form of transmission (e.g. by registered airmail or by courier, within or outside Southern Africa).

The usual period of preparing verification documentation is 6 to 8 weeks.

If an applicant requires the documentation in (c) or (d) sooner, an additional R 250 should be added to the fees below.
If documents are to be sent by express courier, an additional R200 should be added to the fees.

(a) Basic verification of qualification and of graduation date, to be mailed to an address within Southern Africa .............................................. No charge
    If a copy of an academic transcript is to be included ........................................... R 50
(b) Basic verification of qualification and of graduation date or completion of basic documents, to be mailed to an address outside Southern Africa ................................................................. R 200 – R 350
    If a copy of an academic transcript is to be included add ..................................... R 50
(c) Completion of forms requiring detailed course information from 1990 to 2010 ....................................................................................... R 500 – R 850
    If a copy of an academic transcript is to be included add ..................................... R 50
(d) Completion of forms requiring detailed course information before 1990 ......................................................................................... R 1,100 – R 1,500
    If a copy of an academic transcript is to be included add ..................................... R 50

Requests for the verification of UCT Faculty of Health Sciences graduates may be sent to the Faculty Manager: Academic Administration, Dean’s Office, Barnard Fuller Building, Faculty of Health Sciences, Anzio Road, Observatory, 7925, South Africa, or faxed to 021-4478955 (for attention: Faculty Manager, Academic Administration, Faculty of Health Sciences). Please include e-mail contact details in all requests.

Do you remember past and present UCT Vice-Chancellors?

<table>
<thead>
<tr>
<th>Sir John Camuthers Beattie</th>
<th>1918-1938</th>
</tr>
</thead>
<tbody>
<tr>
<td>AW Falconer</td>
<td>1938-1947</td>
</tr>
<tr>
<td>TB Davie</td>
<td>1948-1955</td>
</tr>
<tr>
<td>RW James (acting)</td>
<td>1956-1957</td>
</tr>
<tr>
<td>J P Duminy</td>
<td>1958-1967</td>
</tr>
<tr>
<td>Sir Richard Luyt</td>
<td>1968-1980</td>
</tr>
<tr>
<td>Stuart Saunders</td>
<td>1981-1996</td>
</tr>
<tr>
<td>Mamphela Ramphele</td>
<td>1997-2000</td>
</tr>
<tr>
<td>Njabulo S Ndebele</td>
<td>2000-2008</td>
</tr>
<tr>
<td>Max Price</td>
<td>2008-</td>
</tr>
</tbody>
</table>