

Elective reflective piece  
Catherine Rees

ORTHOPAEDICS



**What are the most prevalent orthopaedic conditions in South Africa and how do they differ from the UK?**

South Africa has much higher rates of trauma than in the UK Trauma TB related joint and bone disease with death from injury being 120/100,000 compared to just 26 in the UK (see fig 1). This is reflected in the orthopaedic workload with a much higher proportion of trauma cases.

There are also much higher rates of TB related bone and joint disease- a reflection of South Africa's escalating problem with TB (Both HIV and Non HIV related).

There is also a slightly higher rate of death from cancers, which reflects in orthopaedics as greater proportion of bone disease related to cancer metastases.

All orthopaedics is further complicated by South Africa's HIV/AIDS epidemic, with many patients infected. This complicated thing for patients and staff who are at much higher risk of infected from sharps injuries than in the UK

**How are orthopaedic service organised and delivered? How does this differ from the UK?**

In South Africa both private healthcare and government health care exist. They work alongside each other. Most of the population receives their

## **Elective reflective piece**

### **Catherine Rees**

healthcare from the government. Unfortunately this is both underfunded and understaffed to a must greater degree than in the UK.).

There is often cross over between private and government healthcare for example I have seen a patient whose x-rays were done privately but who's treatment was delivered by the government hospital. I also saw another patient who was facing length wait for knee arthroplasty but this could be shortened if she funded the prosthesis herself.

Private health care is a bigger industry than in the UK and represents 58.1% of south Africa's total spend on healthcare compared to just 12.6% in the UK (see fig 1). Consequently around around 79% of doctors in SA work in the private sector (1).

Government spending in SA is limited and although is greater percentage of the GDP (8.6 compared to 8.4) than the UK the actual government spend per capita is around 30% of that in the UK (fig 1)

The structure in which orthopaedic services are delivered in government hospital are based on the system in the UK, with the exception that a lot of referrals come from 'day hospitals' which are free at point of access. Rather than from GPs for which patients would have to pay. The training structure is more or less identical to our older system with house officers, senior house officers, registrars and consultants

### **How do general health concerns of patients differ from my experiences in the UK?**

South Africa has much lower life expectancy than the UK, with the average age at death being 51 compared to 79 (see fig 1). This vast difference being predominantly due to HIV/AIDS. Higher rates of infectious diseases especially HIV and TB (HIV related and unrelated). Rate of death from HIV being around 70 times as high as in the UK, incidence of TB around 60 times as high as in the UK, as HIV co-infection is common. Non HIV related TB is also on the rise with an increasing prevalence of drug resistant strains. There are also higher cancer death rates and much higher rates of death from cardiovascular disease (fig 1). The most striking issue next to issue of HIV IN SA is the

## Elective reflective piece Catherine Rees

amount trauma. And around five times the rate of death from injury than the UK!

Maternal and child health is also much poorer and Infectious diseases such as diarrhoeal disease, typhoid and hepatitis A are prevalent

### How has my time in South Africa influenced my career aspirations?

My time in South Africa was very interesting and had given me a lot of 'food for thought'. I can better see now what a challenging job surgery is. Orthopaedics in particular is very physically demanding with strength need to reduce fractures and wear lead aprons for long time periods of time. I don't think I had fully appreciated this beforehand and I found is very physically tiring. Overall I found the experience very rewarding and will definitely consider orthopaedics as a careers choice

Fig 1

Indicator	South Africa	United kingdom
Percentage of total spent on private hospitalisation	58.1	12.6
Expenditure on healthcare as percentage of GDP	8.6	8.4
Per capita government spending on health (PPP int \$)	364	2434
Per capita spending in health (PPP int \$)	869	2784
Cancer rate of death per 100,000	154	143
Cardiovascular death per 100,000	410	182
Death from injury per 100,000	120	26
Death due to HIV/AIDs per 100,000	675	<10
Death due to TB among HIV negative people per 100,00	84	1
Death due to TB among HIV positive people per 100,00	134	0
Incidence of TB per 100,000 per year	940	15

**Elective reflective piece  
Catherine Rees**

Life expectancy	51	79
WHO detailed database search cited	April	16 <sup>th</sup> 2012
<a href="http://apps.who.int/whosis/data/Search.jsp">http://apps.who.int/whosis/data/Search.jsp</a>		

(1) Ataguba, John Ele-Ojo. "Health Care Financing in South Africa: moving toward universal coverage." Continuing Medical Education. February 2010 Vol. 28, Number 2.