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Spring 2024

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SCHEDULED YOUR
MAMMOGRAM?

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CARDIAC ARREST VS
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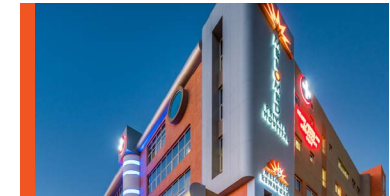
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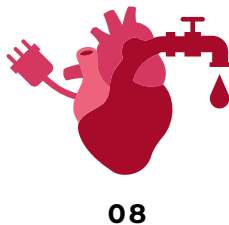
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PROTECT YOURSELF

AGAINST BREAST CANCER

Breast cancer is a malignant tumor that starts in the breast tissue. Breast cancer is the most common cancer in women of all races, with a lifetime risk of 1 in 26 in South Africa. The primary types include invasive carcinoma, ductal carcinoma in situ, infiltrating lobular carcinoma, and lobular carcinoma in situ. Visit a breast care center for regular check-ups and preventive care.

ESSENTIAL RISK FACTORS



Being female



Ethnic background



High breast density



Older age



Family history



Radiation exposure



Menstrual history

RECOGNIZING BREAST CANCER SYMPTOMS

Breast cancer often manifests through various symptoms, with the most common being a lump in the breast tissue. Early detection reduces the risk of cancer spreading. Key symptoms include:



Breast redness



Changes in breast size or shape



Nipple alterations or discharge



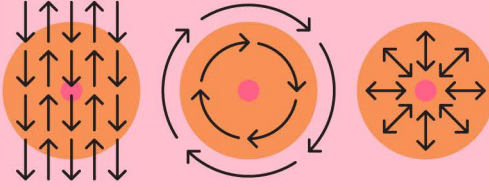
Swelling in the armpit area



Skin thickening or dimpling

HOW TO DO A BREAST SELF-EXAM

- 01 Place one hand behind your head.
- 02 Using your index, middle and ring fingers, examine the breast using one of the three patterns shown.

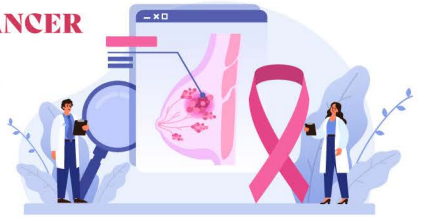


- 03 Use varying levels of pressure to feel all the breast tissue – from the tissue closest to the skin, to the tissue closest to the chest and ribs.
- 04 Repeat steps on your other breast.








TREATMENT OPTIONS FOR BREAST CANCER

Treatment for breast cancer varies based on its type and stage, often involving multiple approaches.



Conventional treatments

-  **Radiation therapy:** Uses high-energy rays to destroy cancer cells.
-  **Surgical procedures:** Removal of tumors through lumpectomy or mastectomy.
-  **Sentinel lymph node biopsy:** Identifies affected lymph nodes before surgery.
-  **Targeted therapy:** Utilizes drugs to specifically target and inhibit cancer cell growth.
-  **Chemotherapy:** Employs powerful drugs to kill rapidly dividing cancer cells.



Regular self-examinations and visits to a breast care center can aid in early detection and increase the chances of successful treatment. ■

SCHEDULED YOUR MAMMOGRAM?



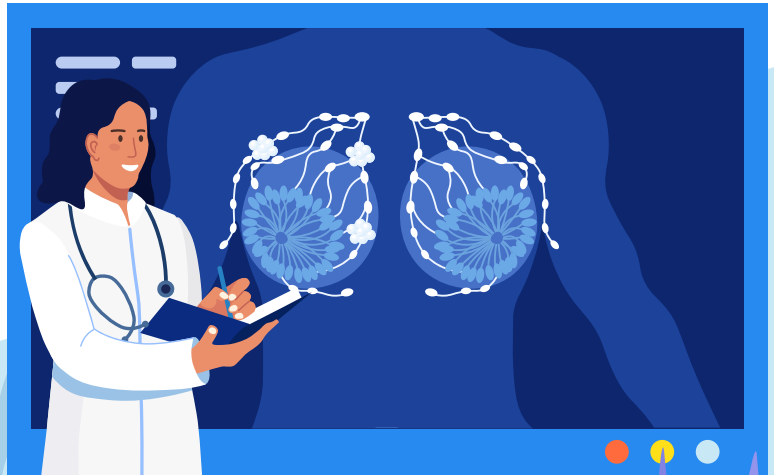
Your guide to a smooth screening experience.

A mammogram is an important breast cancer screening tool that uses low-dose X-rays to create images of breast tissue. It's designed to detect breast cancer early, often before any symptoms are noticeable. Mammograms can reveal breast lumps, calcifications, and other changes in breast tissue that may indicate cancer or other breast conditions.

By following these preparation tips, you can help ensure a smoother, more comfortable mammogram experience while maximizing the effectiveness of this important screening tool:

1. SCHEDULING:

- Schedule your mammogram for about one week after your menstrual period when your breasts are less likely to be tender or swollen.
- If you have breast implants, inform the facility when making your appointment, as you may need additional images taken.
- Consider scheduling your mammograms with a female friend or group of friends. Having a friend can make the entire mammography experience more pleasant.



2. ON THE DAY OF THE MAMMOGRAM:

- Don't wear deodorant, antiperspirant, powders, lotions, creams, or perfumes under your arms or on your breasts. These can appear as white spots on the X-ray.
- Wear a two-piece outfit, as you'll need to undress from the waist up for the procedure.

3. COMFORT CONSIDERATIONS:

- If you experience breast tenderness or pain during your menstrual cycle, schedule your mammogram for when your breasts are least tender.
- Consider taking an over-the-counter pain medication about an hour before your appointment if you find mammograms uncomfortable.

4. INFORMATION TO PROVIDE:

- Bring a list of the places and dates of mammograms, biopsies, or other breast treatments you've had before.
- Inform your doctor about any breast changes or problems you've noticed.
- Let your doctor know if you're pregnant or breastfeeding.

5. RELAXATION:

- Try to stay relaxed during your mammogram. Tensing up can make the procedure more uncomfortable. ■

Sources: Cancer.org; www.cancer.org/cancer/types/breast-cancer/mammograms





VARICOSE VEINS IN MEN:

CAUSES, SYMPTOMS & TREATMENT OPTIONS

By Dr Kennedy Mngoma

Varicose veins are a common condition that affects both men and women. While often associated with women, men can also develop varicose veins, especially as they age. In this article, we will explore the causes, symptoms, and treatment options for varicose veins in men.



SPIDER VEINS



**RETICULAR
VARICOSE VEINS**



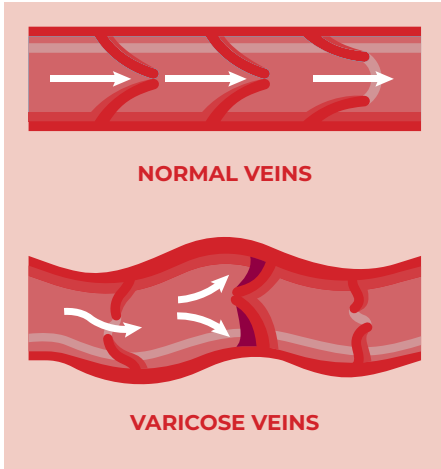
**VARICOSE
VEINS TRUNK**



**CHRONIC
VENOUS
INSUFFICIENCY**



**INSUFFICIENCY
TROPIC ULCERS**



CAUSES OF VARICOSE VEINS IN MEN:

- Genetics
- Age
- Obesity
- Prolonged standing or sitting
- Weak vein walls
- Blood clots
- Injury or trauma

SYMPTOMS OF VARICOSE VEINS IN MEN:

- Visible veins
- Bulging or lumpy veins
- Pain or discomfort
- Swelling Itching or burning sensation
- Restless legs
- Weakness in the affected limb

TREATMENT OPTIONS FOR VARICOSE VEINS IN MEN:

- Compression stockings
- Sclerotherapy
- Endovenous laser therapy (EVLT)
- Radiofrequency ablation (RFA)
- Surgery (vein stripping)
- Lifestyle changes (exercise, weight loss, elevating legs)



Varicose veins in men are a treatable condition. Early detection and intervention can alleviate symptoms, improve circulation, and enhance overall well-being. If you're experiencing symptoms or are concerned about varicose veins, consult a healthcare professional for guidance and treatment. ■

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CARDIAC ARREST

A heart attack is often confused with cardiac arrest. In fact, these are two distinctly different problems. We explain how sudden cardiac arrest differs from a heart attack.

WHAT IS CARDIAC ARREST?

Cardiac arrest is an “electrical” problem and occurs when the heart suddenly stops beating due to a malfunction in the heart’s electrical system. Cardiac arrest occurs when the heart malfunctions and stops beating unexpectedly. Cardiac arrest is triggered by an electrical malfunction in the heart that causes an irregular, chaotic heartbeat (arrhythmia). With its pumping action disrupted, the heart cannot pump blood to the brain, lungs and other organs.

WHAT HAPPENS

Cardiac arrest can occur without warning, but may be preceded by palpitations, dizziness, chest pain or shortness of breath. Seconds later, a person collapses, becomes unresponsive (unconscious), is not breathing or is only gasping. Death occurs within minutes unless emergency CPR is started, or if an AED (automated external defibrillator) is used on them.

WHAT TO DO

A person whose heart stops beating can be revived, but only if treatment starts quickly enough to ensure they don’t suffer from brain damage.

A CARDIAC ARREST IS AN EXTREME EMERGENCY!

Immediate cardiopulmonary resuscitation (CPR) and defibrillation is needed to have any chance of survival. You can increase the person’s chances of survival by calling for an ambulance and giving immediate CPR. If a defibrillator (an automated external defibrillator – AED for short), which restarts the heart by giving an electric shock, is available, use it as soon as possible. If two people are available to help, one should begin CPR immediately while the other calls an ambulance and finds an AED.

CPR is invaluable in keeping a person’s heart beating long enough until paramedics arrive and take over treatment.

Cardiac arrest is a leading cause of death.



RISK FACTORS

- Prior heart disease is a major risk for cardiac arrest.
- A family history of cardiac arrest in a first-degree relative is associated with an approximate two-fold increase in risk of cardiac arrest.

VS HEART ATTACK

WHAT IS A HEART ATTACK?

A heart attack is a “circulation” problem caused by a blockage in one or more of the heart’s arteries. A heart attack occurs when blood flow to the heart is blocked. A network of coronary arteries surrounds the heart muscle and supplies it with blood that is rich in oxygen. The heart needs this oxygen to function. These arteries can become clogged by a build-up of plaque (cholesterol and fatty deposits) on the inner walls of the arteries, a condition known as arteriosclerosis. This build-up of plaque can block the flow of oxygen-rich blood to the heart. When one or more of the coronary arteries are completely blocked, a heart attack may occur.

WHAT HAPPENS

Symptoms of a heart attack may be immediate and may include:

- Chest pain or intense discomfort in the centre of the chest; also described as a heaviness, tightness, pressure, aching, burning, numbness, fullness or squeezing feeling that lasts for more than a few minutes or goes away and comes back. It is sometimes mistakenly thought to be indigestion or heartburn.
- Difficulty breathing or shortness of breath.
- Sweating or “cold sweat.”
- Nausea or vomiting.
- Rapid or irregular heartbeats.
- Pain or discomfort in other areas of the upper body including the arms, left shoulder, back, neck, jaw, or stomach.
- Fullness, indigestion or choking feeling (may feel like “heartburn”).
- Light-headedness, dizziness, extreme weakness or anxiety.

More often symptoms start slowly and persists for hours, days or weeks before a heart attack. Unlike with cardiac arrest, the heart does not stop beating during a heart attack. But, the longer the person goes without treatment, the greater the damage. Women may have shortness of breath, nausea, vomiting and they can have back, neck or jaw pain.

WHAT TO DO

CALL AN AMBULANCE AND SAY YOU THINK SOMEONE IS HAVING A HEART ATTACK.

Emergency medical services staff (paramedics) can begin treatment when they arrive and to revive someone whose heart has stopped.

If you think someone is having a heart attack:



LOOK FOR THE FOUR Ps:

- 1. Pain** – a continuous pain in the chest, which could spread to the jaw, neck or arms
- 2. Pale** skin
- 3. Pulse** that is rapid or weak
- 4. Perspiration**/sweating >>

Help move them into the most comfortable position. The best position is on the floor leaning against a wall with knees bent and head and shoulders supported. This should ease the pressure on their heart and stop them hurting themselves if they collapse. Be aware that they may develop shock. Shock does not mean emotional shock, but is a life-threatening condition, which can be brought on by a heart attack.



KEEP CHECKING THEIR:



BREATHING



PULSE

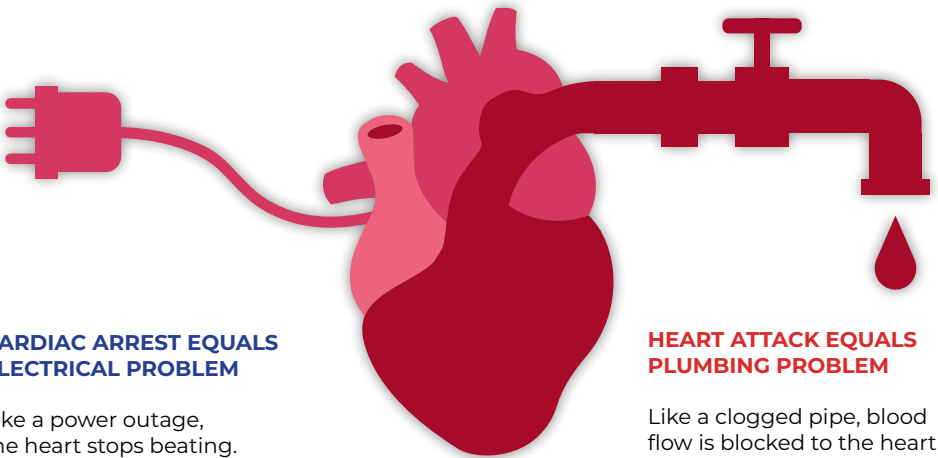


LEVEL OF RESPONSE

If they lose responsiveness at any point, open their airway, check their breathing, and prepare to treat someone who has become unresponsive. You may need to do CPR.

WHAT IS THE LINK?

Cardiac arrest may occur as a result of a heart attack, but everyone who suffers a heart attack does not have a cardiac arrest or need CPR.



CARDIAC ARREST EQUALS ELECTRICAL PROBLEM

Like a power outage, the heart stops beating.

HEART ATTACK EQUALS PLUMBING PROBLEM

Like a clogged pipe, blood flow is blocked to the heart. ■

Breast Reduction Surgery

A mammoplasty or breast reduction is a surgical procedure that reduces the size of large, heavy breasts by removing excess tissue, fat and skin. Typically, women who are candidates for this procedure have physical symptoms related to the weight or shape of their breasts. These symptoms include back pain, neck pain, headaches, rashes in the fold under the breast and bra strap grooves in the shoulders. Women with excessively large breasts may struggle to exercise, perform other daily activities or find clothing

that fits appropriately. These factors and symptoms may have a negative effect on their daily functioning, self-confidence and psychological well-being.

Breast reduction surgery can be performed at any age sometimes even as a teenager. However, if the breasts are not yet fully developed a second surgery may be needed later in life. It is recommended to postpone breast reduction surgery if a patient have certain future plans such as childbirth.

Breast reduction surgery is generally not recommended if a patient:



Smokes



Have conditions such as diabetes or heart problems.



Is very obese



Don't want scars on their breasts



Breast reduction surgery is performed under general anaesthesia and usually requires an overnight stay in hospital. The procedure will take about two to four hours, sometimes longer. The surgery involves performing a cut around the areola then down onto the breast in the form of a keyhole, and most time extending in the fold beneath the breast (inframammary fold). Extra skin, glandular breast tissue, and fat is removed, and the breast is repositioned to an aesthetically-pleasing position.

Breast Reduction (Reduction Mammoplasty) surgery is one of the most rewarding procedures as in some cases it can transform the lives of patients. Patients often comment that had they known what a difference it would make to their lives, they would have had it done sooner. ■

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CALLING ALL MEN

TOGETHER WE CAN BEAT PROSTATE CANCER!

By Dr Ziphozonke Mkhize

Early detection is key when it comes to treating prostate and testicular cancer.

The prostate gland is a small gland – normally the size of a walnut – found in men, and is located in the pelvis, in front the bladder. It is positioned around the urethra – the exit tube from the bladder, which runs through the penis, and carries urine to the outside world. Any growth in the prostate can therefore put pressure on this tube and disturb the normal flow of urine. The prostate gland produces seminal fluid, which along with sperm from the testicles, make up semen. It is therefore crucial for a man's normal reproductive function.

**” PROSTATE CANCER IS THE MOST COMMON MALE
CANCER AFFECTING MEN IN SOUTH AFRICA! ”**

Prostate cancer is the most common cancer among men globally and the number one cancer affecting all South African men (National Cancer Registry 2017), with 1 in 17 men being at risk for diagnosis in their lifetime. Prostate cancer affects one in six men over 50 and is most common after age 70. In South Africa there is a very high rate of late detection of advanced stage disease due to a lack of awareness. International and local research indicates that the risk for aggressive prostate cancer is higher in black African men.

MAIN RISK FACTORS

You have an increased risk of developing prostate cancer if you:

- are **OLDER** than 50: Almost 2 out of 3 prostate cancer cases are found in men over age 65
- have a **FAMILY HISTORY** of prostate or breast cancer: If your father or brother is diagnosed with prostate cancer you are 2½ times more likely to get it compared to someone with no family history of cancer.
- have an **African ancestry** (black ethnicity): International and local research indicates that the risk for aggressive prostate cancer is higher in black men.



UNHEALTHY LIFESTYLE RISK FACTORS

You have an increased risk of developing prostate cancer if you:

- Obesity
- Lack of physical activity
- Smoking
- Drinking more than 2 standard alcoholic drinks per day
- Unhealthy diet

**UP TO 50% OF MALE
CANCERS CAN BE
PREVENTED BY
MAKING HEALTHIER
DIET AND LIFESTYLE
CHOICES.**



SYMPTOMS

Symptoms are generally unnoticeable during early stages and appear only in advanced prostate cancer. Some symptoms are similar to those of benign prostate problems. Symptoms can be divided into storage symptoms, which means they occur when the bladder is full and when someone is not voiding (passing urine), as well as voiding symptoms, which occur when urine is being passed or the bladder is being emptied.



Storage symptoms:

- Frequent urination - especially at night (nocturia)
- Increased frequency - The need to urinate more often, both during the day and at night
- Increased urgency: A strong need to go as soon as the bladder feels full, making it hard to wait. This urgency means people often have to go 'immediately' to avoid an accident.



Voiding Symptoms:

- Difficulty starting and/or stopping to urinate. "Having to wait" before you can go.
- Weak, slow urine flow, lacking 'power'
- If urinating outside, it might only reach as far as your shoes, and you may have to strain to get a steady stream.
- Flow stops and starts (intermittency), and even after
- When finished urinating, you feel as if there's still some urine left in the bladder (incomplete voiding).

Other symptoms to look out for which can be associated but not specific to prostate cancer, are blood in the urine or semen, painful urination and ejaculation. >>

DIAGNOSIS – EARLY DETECTION IS KEY

Many patients will develop prostate cancer without experiencing any of these symptoms, which is why screening is so important. Regular screening results in early detection, and on-time diagnosis, enabling more effective treatment and a better chance of recovery:

The screening and diagnosis of prostate cancer has come a long way, but has become easier in recent years. While most men still dread the infamous digital rectal examination (finger test) that has long been associated with screening for this type of cancer, most of them will find comfort in knowing that this type of exam is rarely done these days, unless it is absolutely necessary.

Screening has become as simple as doing a blood test (PSA) at your local clinic or general practitioner who would then refer you to a urologist if your result comes back abnormal. The test is readily available and inexpensive.



A Prostate Specific Antigen (PSA) test - Blood is tested for PSA levels, a protein produced by the prostate. High levels may indicate inflammation of the prostate or even cancer. A blood test or finger prick test can establish if PSA levels are raised.

The following guidelines are recommended:

- Routine PSA testing, annually, from age 40 for all men at high risk of prostate cancer. This includes those men with more than one first-degree relative who had prostate cancer at an early age (younger than 65 years)
- Routine PSA testing, annually, as from age 45 for all males who are at risk of prostate cancer. This includes men who have a history of prostate cancer on either the mother or father's side, or with a first-degree relative (father, brother, or son) diagnosed with prostate cancer at an early age (younger than 65 years) and men of African descent (black men), because of their higher genetic risk.
- Routine PSA testing, annually or at least once every two (2) years, for all males from age 50

The urologist would normally proceed by taking a further history and doing clinical examination. Further tests such as an ultrasound scan, urine and additional blood tests form part if the clinical evaluation. These will then be followed by a prostate biopsy, which is tissue sampling of the prostate gland using a special needle. These tissue sample results will then confirm whether the patient has prostate cancer or not, since cancer is a tissue diagnosis.

Although the procedure may sound scary, in reality this a simple day procedure which can be done in an outpatient setting.

Once the diagnosis has been confirmed, the correct staging of the disease is determined using scans such as a bone scan or more recently a PET scan which is more accurate. Other staging modalities include a CT scan and MRI scan depending on the patient's disease profile and accessibility.

Once the correct staging has been obtained, usually a multidisciplinary discussion is held between the patient, the family, the treating urologist as well as an oncologist to discuss the best possible treatment plan for the patient.

Fortunately prostate cancer treatment has become easy these days with many treatment options especially for early disease. For most of these patients it is possible to achieve a 100% cure, which is why it is important to screen early to achieve early detection. Treatment options for early disease include hormonal therapy, surgery, radiotherapy which can be delivered from outside the body of directly into the prostate using radio-active seeds.

Even in patients with advanced disease, treatment options are plenty nowadays and they include hormonal therapy combined with systemic therapies such as chemotherapy and anti-androgens amongst others. These have been successful in providing symptomatic relief and prolonging survival even though the disease may already be at an advanced stage. Prostate cancer treatment is well tolerated nowadays and often the treatment with the best cancer outcome and with the least side effects will be chosen.

There are numerous patient support groups for patients already diagnosed with the disease including The Cancer Association of South Africa (CANSA) and The Prostate cancer foundation of South Africa where patients can get free support from professionals and other patients who have had the disease.

The take home message is that all men over the age of 50 years should screen for prostate and because of their higher genetic risk, men of African descent (black men), are recommended to screen from the age of 45 years. Patients who are at an even higher risk, i.e. patients who have a family history of breast or prostate cancer are recommended to screen from the age of 40 years. One annual PSA test is recommended.

Screening ensures early detection and early detection often equals a 100% cure. We need more awareness regarding the disease from the media, healthcare professionals, and mostly importantly fellow patients who have had the disease in order to remove the stigma and fears associated with it.

Working together we can beat prostate cancer! ■



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WHAT IS STEVEN'S JOHNSON SYNDROME?

By Dr Mari tte Mouton



Stevens-Johnson Syndrome (SJS) is a rare and severe skin and mucous membrane disorder, usually triggered by an adverse reaction to medication or infection. It is characterised by widespread skin necrosis, blistering and detachment, often accompanied by mucous membrane involvement.

Causes and Risk Factors:

- Medications: Certain antibiotics, anticonvulsants, and painkillers can trigger SJS.
- Infections: Bacterial, viral, or fungal infections can cause SJS.
- Genetic predisposition: Some individuals may be more susceptible to SJS due to genetic factors.

Complications and Prognosis:

SJS can lead to serious complications, such as:

- Respiratory failure
- Sepsis
- Organ failure
- Permanent scarring and disfigurement
- Mortality rate: 5-15% (higher in older adults and those with underlying health conditions)

Symptoms:

- Widespread skin necrosis and blistering
- Skin detachment, leaving exposed wounds
- Mucous membrane involvement (eyes, mouth, nose, genitals)
- Fever, fatigue, and general malaise
- Eye problems (conjunctivitis, corneal ulcers)
- Respiratory issues (coughing, wheezing)

Prevention:

- Careful medication monitoring and reporting of adverse reactions
- Avoiding known triggers (medications, infections)
- Genetic testing (if family history is present)

Early recognition, prompt treatment, and supportive care are crucial for managing Stevens-Johnson Syndrome and minimizing its potentially devastating consequences.

Treatment and Management:

- Immediate discontinuation of the triggering medication (if applicable)
- Wound care and management
- Pain management
- Infection control and prevention
- Supportive care (fluid management, nutrition)
- In severe cases, hospitalization in a burn unit or ICU may be necessary



DR MOUTON'S SERVICES INCLUDE BUT ARE NOT LIMITED TO:

- Excision Of Skin Cancer & Reconstructive Surgery
- Cancer Reconstructive Surgery
- General Traumatic Reconstruction
- Hand & Forearm Operations
- Cosmetic Procedures ■



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TOWN-HOPPING ON ROUTE 62



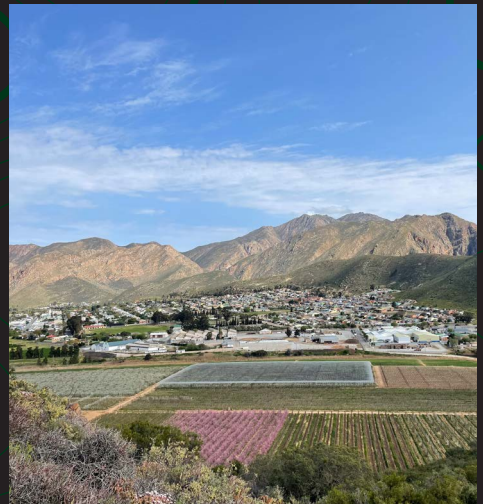
If your heart longs for stretched-out plains, rolling Karoo bushes and friendly local people, you should definitely plan a Route 62 road trip. Come and explore the villages this special tourism route offers and stay a while to recharge your batteries from the hustle and bustle of city life.

Route 62's majestic mountains, picturesque passes, rivers, vineyards, orchards, and the array of tourist attractions offer visitors an unforgettable journey full of adventure. The villages along the way offer something for every member of the family, from game reserves, caves and museums, to hiking and 4*4 routes, canoeing, horse riding and fishing. And to top it all off: excellent accommodation options ranging from self-catering cottages on farms, B&Bs in town and luxury lodges on game farms. All the activities, attractions and accommodation options, together with the beautiful landscapes on this route, make it the ideal road trip for young and old!

MONTAGU

We start in Montagu in the Langeberg Mountains, between the Keisie and Kingna Rivers. Montagu is a picturesque town that is particularly famous for the surrounding orchards, vineyards, rock formations and hot springs, and boasts 22 national monuments, fourteen of which can be seen in Long Street. The town was initially known as Agter-Kogmanskloof because you need to drive through Kogmanskloof, which connects Ashton with Montagu in the Klein Karoo. It was later named after John Montagu, the Colonial Secretary for the Cape Colony. Kogmanskloof was impassable at the time until Thomas Bain built the pass and the tunnel. The first pass was just a rough wagon track that followed the Kogmans River and crossed it several times until Bain and his team completed the new pass in 1887. The small tunnel through Kalkoenkrans on this pass is locally known as the gateway to the Klein Karoo and still boasts the ruins of a fort built on top of the cliff during the Second War of Independence.

Joubert House, which was built in 1853, is the oldest building in Montagu and its outbuilding was apparently the first prison in the town.





BARRYDALE

Back in the day, farmers were looking for fertile, arable land and they came across this valley where the climate is almost perfect for fruit. In 1858, someone proposed a pass so that the farmers could more easily transport their fruit to Port Beaufort at the Breede River Mouth (today Witsand). Once again, Thomas Bain was called closer and he moved into a lovely old farmhouse of Joseph Barry, a well-known merchant in the nineteenth century. (This old farmhouse can still be seen today at the foot of the Tradouw Pass and it still belongs to the Barry's.) The pass was officially opened in 1873 and soon after the farming community built a church near the northern end of the pass and the town that expanded around it was named after the Barry's.

Today, this village at the foot of the Langeberg Mountains is a popular rest place for travellers who want to have a bite to eat before they take on the long road again. One of the most popular choices in town is Diesel & Crème. This vintage roadside cafe and motel boasts the best milkshakes in the region. Here you will find all kinds of unique milkshake options such as Blonde Bombshell, Lady in Red and Morning Glory, but you will have to come and take a look for yourself to see what all these names mean! The roadside cafe also serves delicious breakfasts and lunches, and waffles and cakes for those with a sweet tooth. But apart from that, the ancient, unsophisticated decor and atmosphere are reason alone to pay a visit here!

LADISMITH

Ladismith is nestled in the shadow of Towerkop and the Klein Swartberg Mountain Range. Blue skies and picturesque mountains await you in this magical part of the country. Whether you come for hiking, cycling, 4x4 in the mountains, or wine and cheese tasting, one thing is certain – you will have to come and stay here.

The town was established in 1851 when a large part of the Elandsvallei Farm was bought, subdivided and developed. It was then named after Lady Smith, the wife of the then Governor of the Cape Province, Sir Harry Smith. Two towns in South Africa were named after her and to avoid confusion with the one in KwaZulu-Natal, the one in the Cape was changed to Ladismith in 1879.

The area had the ideal climate for apricots, peaches, plums, nectarines and grapes, but when the nineteenth-century ostrich feather boom hit the country, many of the fruit and vegetable crops were removed to make way for the ostriches. However, the ostrich feather market eventually collapsed, and the economy and prosperity of Ladismith went with it. The local farmers then returned to a traditional way of doing things and planted plums, apricots, peaches and grapes again and today, the area is known as the most important producer of apricots in the Southern Hemisphere. Cheese has been manufactured in Ladismith since 1940 and since its inception in June 1999, Ladismith Cheese has joined this proud tradition. Today a rich variety are of quality cheese, butter and milk powder products are available in supermarkets throughout the major centres of South Africa, securing the Company's position as a trusted household name for many South African consumers.

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CALITZDORP

At the beginning of the 19th century, the first cattle farmers and hunters discovered this area and the farm Buffelsvlei was awarded to the brothers JJ and MC Calitz in 1821. By the 1840s there were enough people to call this town a town. When you're driving through town, be sure to stretch your legs at Zamani Grill. It serves burgers, steaks, chicken dishes, pizzas and fish! The kids will love their gourmet milkshakes served in real ostrich eggs, so just make sure you reserve a seat ahead of time.

Nearby, at Hans and Erika Calitz's family farm, Living Waters, begins the popular Donkey Trail hiking trail. Die Hel in the Gamkaskloof Valley was only accessible on foot until 1963 when a road was built from the Swartberg Pass to this remote valley. Previously, a donkey track over the Swartberg Mountains from Calitzdorp was the only way to connect Die Hel with the outside world. This donkey track is now a walking trail of about 26 kilometres during which donkeys keep you company and carry your luggage. But don't worry, all these donkeys are rescues and are now well cared for, and the friendly animals, together with the guides, who like to share knowledge through anecdotes from the past, will make this walk unforgettable.



OUTDSHOORN

The main town of the Klein Karoo is nestled between the majestic Swartberg Mountains and the Outeniqua Mountains. The town originated on two farms and the first permanent building in the Klein-Karoo, a Dutch Reformed Church, was erected in 1839 near the banks of the Grobbelaars River. The town began to grow around this church and was named after Baron Pieter van Rhee de of Oudtshoorn, who was appointed governor of the Cape Colony in 1772.

Oudtshoorn is better known as the ostrich capital of the world. In the late 1800s, ostrich feathers were high fashion and royalty, emperors and costume makers all over the world wanted these feathers. A pair of ostrich feathers cost up to £1000 at the time! But, as we all know, fashion changes quickly and therefore the local economy collapsed, and most farmers returned to growing grain crops. Today, ostriches are used for their low-cholesterol meat, which is delicious and healthy, and ostrich skin is still popular for fashion items.

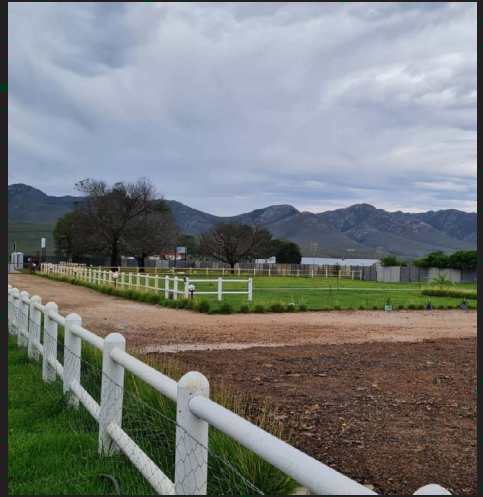
But the big bird is just one of the town's must-see attractions. The area also boasts the incredible Cango Caves. This cultural and natural landmark is a 20 million-year-old cave system, the largest show cave system in Africa, and the oldest tourist attraction in the country.

JOUBERTINA

Joubertina is a village between the Tsitsikamma– and Kouga Mountains in the heart of the Langkloof – one of the most famous regions for the cultivation of apples, pears and other soft fruits in South Africa. The village emerged mainly as a result of the fruit farming community when it was separated from the Uniondale congregation in 1907. However, the name was 'Jouberville', after which it was changed to Joubertina because the railway companies already had a Jouberville stop in the Karoo.

The Langkloof Valley was originally the home of Bushmen and their rock paintings and rock shelters are still abundant in the Kouga Mountains. Their paintings show that centuries ago herds of wild donkeys, wildebeest and elephants wandered here, and the Kouga mummy was excavated here – the only mummy ever found in Southern Africa.

The area has been cultivated for agriculture since 1760 and is the second-largest fruit-producing region in South Africa today, specialising in the cultivation of apples and pears. During the spring, the area around Joubertina is covered with a blanket of flowers and the Langkloof offers an unforgettable fragrant experience! The Langkloof Flower Festival is also held then, during which the country's biggest artists and entertainment stars entertain the festival-goers, and various agricultural exhibitions, stalls and children's entertainment attract visitors from afar. Make sure you don't miss the next Bloeiselfees!



KAREEDOUW

The village was founded in 1906 as a mission station for the Dutch Reformed Church, and the name is derived from the Khoi word !karegadaob! meaning 'road with many Karee (*Searsia lancea*) trees'. It is therefore no surprise that Kareedouw, which is surrounded by a mountainous area, boasts beautiful fauna and flora. The economy of Kareedouw is largely due to fruit farming and forestry and that is why a logger statue has been assembled in memory of the loggers in the town.

The town's popularity increased mainly due to its location on Route 62. Along with other small towns such as Hankey, Patensie and Joubertina, Kareedouw, which is situated at the entrance to the Langkloof, grew considerably with the increasing number of visitors. Today, the biggest attraction is the fact that it lies at the southernmost entrance to the Baviaanskloof – a World Heritage Site that attracts visitors from far and wide to visit the excellent 4x4 routes, hiking trails and camping sites.

The amount of history hiding on this popular route makes each of these villages definitely worth a visit. Book a break in your favourite small town and come and chat with the locals – that's how one truly discovers the anecdotes and treasures of the Klein Karoo! ■

PHARMA DYNAMICS LAUNCHES

HEARTY

– A CULINARY
COLLECTION
ROOTED
IN HEART
HEALTH WITH
SIGNATURE
DISHES BY SA
GOURMAND
AWARD
WINNERS



In a bid to revolutionise healthy eating and promote cardiovascular wellness, Pharma Dynamics, one of SA's leading pharmaceutical companies, has unveiled the Hearty collection (www.heartyfood.co.za), which contains exclusive gourmet recipes inspired by the Dietary Approaches to Stop Hypertension (DASH) diet.

The DASH diet has been extensively researched and its efficacy has been proven through numerous studies over the years. Originally developed by the National Heart, Lung, and Blood Institute (NHLBI) to combat hypertension

(high blood pressure), the DASH diet has demonstrated effectiveness not only in lowering blood pressure, but also in improving overall cardiovascular health and reducing the risk of chronic diseases.

Pharma Dynamics has been the country's leading provider of cardiovascular medicine for over a decade. Hearty stands as a testament to Pharma Dynamics' longstanding commitment to fostering healthier lifestyles and combating chronic diseases, beyond just providing medication.

The Hearty collection builds on the success of Pharma Dynamics' popular Cooking from the Heart cookbook collection, which has garnered acclaim for its focus on promoting heart health through mindful eating and living. With Hearty, Pharma Dynamics aims to expand its culinary offerings while continuing to champion the cause of preventive healthcare.

Hearty embodies the philosophy that good health begins with good food and one does not have to compromise on taste when making healthier choices.

NIÇOISE SALAD FOR SUMMER

Servings: 4-6

This classic French salad is a meal on its own, you don't need to serve anything else.

Ingredients

- 2 cups (400 g) fine green beans
- 12 baby potatoes, cooked in their skins
- 6 hard-boiled eggs (cook for about 6 minutes)
- 2 x 120 g tins tuna pieces in water, drained
- ½ cup packet black olives
- salt and freshly ground black pepper

Dressing

- clove garlic, finely crushed
- 1 tsp wholegrain mustard
- 2 tbsp white wine vinegar
- 1 tsp lemon juice
- ½ cup olive oil

Instructions

1. Blanch green beans in boiling water for about 4 minutes; they must still be crisp.
2. Cut potatoes and eggs into quarters.
3. Arrange all the ingredients for the salad on a serving platter.
4. Mix ingredients for salad dressing together well and pour over salad. Season with salt and pepper. Serve. ■

By Herman Lensing, one of SA's top food writers, TV cooking host and author of *Voorskoot, Nog 'n Voorskoot (In my Kitchen)*, *30, Dit Proe Soos Huis, Nostalgie and Home Cooking (Huisikos)*, *Herman se Kortpaaie, Air-fryer and 100 Best Biscuits*, is known for his expertise in healthy eating and offers a selection of dishes that are both wholesome and satisfying.



Sources:

Hearty Food Recipe book from Pharma Dynamics
<https://heartyfood.co.za>

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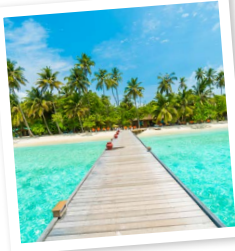
HOUSECALL

MEET ONE OF OUR DEDICATED SPECIALISTS

DR SEDICK CAMROODIEN



DR. CAMROODIEN IS A GYNAECOLOGICAL ONCOLOGIST, OBSTETRICIAN & GYNAECOLOGIST CURRENTLY PRACTICING AT MELOMED GATESVILLE.



WHAT IS YOUR DEFINITION OF "HAPPINESS"?

Happiness is achieved through contentment of the heart. We only need two ingredients for happiness... Good health and a loving supportive family.

WHAT IS YOUR MOST MEMORABLE TRAVEL EXPERIENCE?

Tropical Islands with my wife and 3 daughters.

WHO WOULD YOU WANT WITH YOU IF YOU WERE STRANDED ON A DESERTED ISLAND?

My wife Rumaana who has been my soul mate, my best friend and my everything.



WHAT IS YOUR HAPPIEST MEMORY?

My happiest memories are always when I'm with my family enjoying a scrumptious meal together while absorbing all nature's beauty that she has to offer.

WHICH CHILDHOOD MOVIE DO YOU STILL LOVE TODAY, AND WHY? The Shawshank Redemption... With every difficulty comes ease as no soul will be burdened with more than that which he/she can handle.



WHY DID YOU CHOOSE YOUR PROFESSION?

I would like to use my skill to better the quality of lives of women within our community. First prize would be to prevent cancer from developing. However if cancer has developed already I would want to manage these women to the best of my ability with the aim of curing them and providing them with the best chance of survival and to remain free of cancer for as long as possible.

CAN YOU PLAY ANY INSTRUMENTS, OR WHAT WOULD YOU PLAY IF YOU COULD?

I would like to play the Harmonium one day.



WHICH THREE SONGS WOULD YOU LISTEN TO FOR THE REST OF YOUR LIFE, IF YOU HAD TO PICK?

I have too many favourites songs to choose from but my favourite singers are Kumar Sanu, Jubin Nautiyal and Rahat Fateh Ali Khan. ■

EMPATHY, EXPERTISE, AND EXCELLENCE: Unveiling the **Leading Obstetric and Gynaecological Team at Melomed Tokai!**



Dr. Aneeqah Hendricks
Bringing New Life into the World

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✉ secretary@aneeqahhendricks.co.za

Meet Dr. Aneeqah Hendricks, a compassionate Gynaecologist and Obstetrician who finds immense joy in welcoming new life into the world. With a focus on achieving positive outcomes, Dr. Hendricks not only provides expert medical care but also connects on a personal level, drawing from her experience as a mother herself.

Dedicated to comprehensive patient care, Dr. Hendricks considers every aspect of her patients' well-being, including socioeconomic and cultural backgrounds. She takes the time to understand individual needs, offering clear explanations and support throughout the journey. Beyond the hospital walls, Dr. Hendricks enjoys exploring the world through travel, indulging in movies, and cherishing quality moments with her own family.

Specialising in vaginal surgery, adolescent gynaecology, hormonal disorders, and reproductive endocrinology, Dr. Hendricks is your partner in women's health at every stage. From family planning to menopause, she ensures her patients receive the best care, including surgeries, screenings, and personalized attention.



Dr. Matshidiso Agnes Tisane
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Introducing Dr. Tisane, a dedicated Gynaecologist and Obstetrician committed to the holistic well-being of women. As an Obstetrician, she brings vast experience in maternal and fetal care, guiding expectant mothers through the beautiful journey of pregnancy. Dr. Tisane believes in building strong patient relationships, ensuring effective communication, and providing comprehensive care with a personal touch.

Beyond her medical expertise, Dr. finds joy in the outdoors and values quality time with her own family. With a passion for helping mothers navigate the challenges of newborn care, she strives to make each patient feel heard and supported.

In addition, to her passion and expertise in Obstetrics, she also specialises in addressing gynaecological issues such as abnormal bleeding, infertility, and recurrent miscarriages. Dr. also conducts crucial screenings for cervical and breast cancer.



Dr. Tladiso Motsema
Nurturing Life with Expertise & Passion

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✉ drtmog@gmail.com

Meet Dr. Tladiso Motsema, an experienced Obstetrician and Gynaecologist dedicated to nurturing life with a blend of medical and surgical expertise. Dr. Motsema's journey in Obstetrics and Gynaecology started in 2011, driven by a passion for integrated patient care.

With a wealth of experience gained through a Diploma in Obstetrics and a fellowship in 2016, Dr. Motsema's commitment extends beyond clinical practice. He takes pride in teaching and guiding future healthcare professionals, ensuring the legacy of compassionate and knowledgeable practitioners.

Patient care and wellness are at the forefront of Dr. Motsema's priorities. From general obstetrics and gynaecology to contraception and family planning, he contributes to the community's health, emphasizing the importance of a healthy mother for a healthy baby.

Join Dr. Motsema on the journey of well-rounded women's healthcare.

Contact our Obstetricians for the best quality & service and most affordable price. Our Drs accept most medical aids.

Addiction vs. Misuse and Tolerance

Drug misuse is when you use legal or illegal substances in ways you shouldn't. You might take more than the regular dose of pills or use someone else's prescription. You may misuse drugs to feel good, ease stress, or avoid reality. But usually, you're able to change your unhealthy habits or stop using altogether.

Addiction is when you can't stop. Not when it puts your health in danger. Not when it causes financial, emotional, and other problems for you or your loved ones. That urge to get and use drugs can fill up every minute of the day, even if you want to quit.

Addiction is also different from physical dependence or tolerance. In cases of physical dependence, withdrawal symptoms happen when you suddenly stop a substance. Tolerance happens when a dose of a substance becomes less effective over time.

Signs of addiction

- Loss of interest in day-to-day activities
- Become moody, negative, cranky, or worried all the time
- Have trouble concentrating
- Lack of energy resulting in sleeping much more
- Aggressive behaviour that will lead to getting into fights, being argumentative
- Committing crime to feed the habit
- Red or puffy eyes
- Unexplainable weight gain or loss
- Frequent runny nose



Drug addiction isn't about just heroin, cocaine, or other illegal drugs. You can get addicted to alcohol, nicotine, sleep and anti-anxiety medications, and other legal substances.

The earlier you get treatment for substance use disorder the more likely you are to avoid some of the more dire consequences of the disease.

Get Help

For more information and assistance in fighting substance abuse, call the South African Depression and Anxiety Group (SADAG) 24 hour Substance Abuse Helpline on **0800 12 13 14**. You can also call the South African National Council on Alcoholism and Drug Dependence (SANCA) on **011 892 3829** or send a WhatsApp message to **076 535 1701**.

PathCare offers testing for Drugs of Abuse. Contact your doctor for more information.