



NO EVIDENCE THAT RECENT CASES OF TYPHOID FEVER ARE LINKED TO CONTAMINATED MUNICIPAL WATER IN ANY PART OF THE COUNTRY

There are numerous social media posts with false information about enteric (Typhoid) fever in South Africa that are attracting widespread attention and causing needless concern and panic at the moment. These posts allege either that there are currently cases of enteric fever in certain towns or provinces caused by contaminated municipal water, or that the bacteria causing enteric fever have been identified in certain municipal water sources.

These statements are factually incorrect. There is **no evidence** that recent cases of enteric fever are linked to contaminated municipal water in any part of the country, and there is **no evidence** that the bacteria causing enteric fever have recently been identified in municipal water sources anywhere in the country. This includes those districts in Western Cape and North West provinces in which the clusters (small localised outbreaks) have been identified.

Remember that you can protect yourself and your family from enteric fever and many other infections by following these important preventive measures:

Hand hygiene. Wash hands with soap and safe water:

- Before, during, and after preparing food
- Before and after eating food
- Before and after caring for someone at home who is sick (especially if they have diarrhoea or vomiting)
- After using the toilet
- After changing diapers/nappies or cleaning up a child who has used the toilet

Food safety practice. Follow the World Health Organization's five keys to safer food: keep clean; separate raw and cooked; cook thoroughly; keep food at safe temperatures, and use safe water and raw materials. Washing hands with soap and water before, during and after preparing food and before eating, is especially important.

Using safe water. When there is concern about the quality of water you are using for drinking and cooking, then it is recommended to treat the water first by boiling it (place water in a clean container and bring to a boil for 1 minute) or treating it with household bleach (add 1 teaspoon of household bleach (containing 5% chlorine) to 20-25 litres of water, mix well and leave it to stand for at least 30 minutes before use).

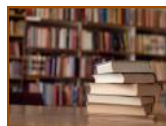


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Stavros Nicolaou recognised for his work fighting the pandemic



On 21 November, His Beatitude Theodoros II, Pope and Patriarch of Alexandria and All Africa, bestowed on Dr Stavros Nicolaou, the title of “High Commander of the Order of The Apostle and Evangelist Mark” of the Patriarchate of Alexandria.

Stavros is Chairman of the Health Workstream for Business for South Africa (B4SA). The award was in recognition of his tireless work during the Covid-19 pandemic and his contribution to the African Covid-19 response.



The PSSA Book Department

Do you know that the Book Department has a range of essential publications for pharmacists at preferential prices for members of the PSSA?

From overseas publications such as Martindale, Merck Manual and Dorland's Illustrated Medical Dictionary to local publications such as the Daily Drug Use, South African Medicines Formulary (SAMF) and the Scheduled Substance Register.

Ordering is as simple as 1, 2, 3.

1. Go to the PSSA website, www.pssa.org.za click on Membership and then Member Services.
2. Complete the order form and submit it.
3. Make payment via EFT.

Or contact Dinette at PSSA National Office on (012) 470-9559 or at dinette@pharmail.co.za



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SARCD A Africa 2022 will open its doors in March 2022

SARCD A Africa 2022 is scheduled to take place from Wednesday, 16 March – Friday 18 March 2022 at Gallagher Convention Centre. The **trade only** exhibition will be showcasing the latest in local and international gift, fashion, toy décor and design trends

The last SARCD A exhibition took place in March 2020, just weeks before the country went into lockdown. Two years later, we find ourselves starting afresh; we need to reinvent our exhibitions in this new normal and we are inviting buyers to join us on this exciting journey.

Our exhibitors are excited to be relaunching their businesses at the exhibition and to reconnect with existing buyers and meet new buyers.

We invite you to visit the exhibition to strengthen existing relationships with exhibitors, meet new exhibitors, and see the products that they have not been able to showcase over the past two years.

To register as a trade buyer, visit www.sarcd a.co.za. We look forward to seeing you at SARCD A Africa 2022.





SAVE THE DATE

WEDNESDAY, 16 – FRIDAY, 18 MARCH
09:00 - 17:00

Gallagher Convention Centre, Midrand
Hall 5

To apply to exhibit or register as a Trade Buyer
visit www.sarcda.co.za

**THE SARCA TEAM CAN'T WAIT TO SEE
YOU AT SARCA AFRICA 2022!**

SARCA 2021 & COVID 19 REGULATIONS



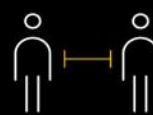
Wash & sanitise
your hands
regularly.



Face mask is
compulsory



Temperature
screening



Maintain social
distancing of at least
1.5m apart from
other people
at all times.

TRADE ONLY



**WEBSITE FOR MEDICINES - CURRENT
AVAILABILITY OR OTHERWISE, NEW AND
DISCONTINUED PRODUCTS, ETC.**

The website was first launched in 2011 as "Medical News & Events", which had over 600,000 pageviews. In 2019 we decided that a new "face" was required and we updated the website to [PharmaNews](https://pharmanews.co.za/), click on the link to view.

Our mission is to supply information that is fast, reliable, and accurate, regarding Scheduled products that directly impact on the medical and pharmaceutical professions, using push notifications.

A Healthcare Professional (Pharmacist, Pharmacist Intern, Community Service Pharmacist, Pharmacist's Assistant, Doctor, Intern, and Nurse) will be able to check on New Products as they are launched, the availability, should there be a supply problem, and the withdrawal of a drug for whatever reason. This is of particular interest to pharmacists in the Community Pharmacy Sector, and Locum pharmacists. We have seen an increase in readership since Covid restrictions on Company Representative visits.

In order to comply with the National Code of Marketing, the website is secure and the Healthcare Professional needs to register with their respective "P" Numbers. This prevents the consumer from seeing sensitive information. (The number you use is, e.g. "11585", without the "P". I cannot see your password, in terms of the POPI Act and you can generate a new one if so desired).

The log-in link is https://pharmanews.co.za/wp-login.php/?redirect_to=https://pharmanews.co.za/ and for those colleagues that want to register the link is: <https://pharmanews.co.za/register/>.



SAACP (SG)

South African Association of Community Pharmacists (Southern Gauteng Branch)

Visit our website: www.saacpsg.co.za

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View The Golden Mortar editions on our website.
Contact us at:

info@saacpsg.co.za

SAACP SG is a financial contributor to The Golden Mortar.



Deafinition is a registered Not for Profit Company (NPC) (Article 18A) offering a range of services and funding opportunities to promote equal access for the Deaf community.

Deafinition vision is: Supporting inclusivity and accessibility for the Deaf.

We have several services that include:

- Recruitment and Placement services
- Interpreter Services
- Accessibility (translating existing content into [SA Sign Language] video)
- South African Sign Language Training as well as our SASL app

According to the latest available census records it is believed that there are 2 million people in South Africa that fall into 3 categories: Deaf, deafened, and hard of hearing. There are believed to be at least half a million to 750,000 that communicate in SASL as their first language (which is more than some of the lesser spoken official languages in South Africa).



Shubnum Nabbi - Maharaj



There is a great need for those communicating in SASL to have more accessibility to resources and information. As a hearing person we can read and understand English, but for the Deaf to read in English is a great challenge as the sentences are written in English, and for many of the Deaf this is not understandable. For most of the Deaf communicating in SASL is the best way to communicate with them.

The Deaf do require accessible service in every industry, especially the medical and public service and protection industries. It is extremely challenging for a Deaf person using South African Sign Language (SASL) to communicate clearly to a Dr/nurse/pharmacist/police/municipality, etc., what his/her needs are and then in return to understand what their advice is.

We at Deafinition want to provide services to “bridge this gap” and to make this information and services more accessible to the Deaf. To have a closer look at the services we offer please visit: www.deafinition.co.za

This report was the topic of a recent PSSA SG online CPD Session

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SOUTH AFRICAN SIGN LANGUAGE

Communicate with Deaf customers, colleagues and friends





TRIBUTES TO DAVID BOYCE



On 15 December 2021 when David passed away, I lost a very dear and hugely respected friend and colleague, his wife Linda and the children lost a wonderful, caring and thoughtful husband and father, and Pharmacy lost one of its most important visionaries whose legacy will continue to impact positively on the profession for a long time to come.

David qualified as a pharmacist in 1971 having studied at the Pharmacy School at the Cape College for Advanced Technical Education where he had already started to display his leadership qualities in the Pharmacy Students Federation and served as the SAPSF President in 1972/3.

After registration David gained two years hospital experience in the Cape before moving to Gauteng and spending ten years in community pharmacy.

I met David when he assumed a permanent position with the Southern Gauteng Branch of the Pharmaceutical Society of South Africa in the early eighties and became a member of the Branch Committee, a committee on which he served for over twenty-five years – twice as its chairman.

At that time, I held a similar position in the Natal Coastal Branch, so it was inevitable that we would end up as colleagues with similar priorities and objectives for the profession and in particular for our members of the PSSA.

However, as far as the prescription claims processing offices of the PSSA were concerned, where we were merely attempting to improve existing systems, David was already way ahead of the rest of us and seriously considering “how to build a better mousetrap”. Our focus of attention was on benefiting our members, but David on the other hand saw more benefit in the bigger picture in which all the players – patients, insurers and providers all gained a benefit from the process, resulting in a win for all participants – and of course he was absolutely right in thinking this way.

This kind of visionary thinking and the ability to understand and create the various complex systems to make it all happen in an efficient and acceptable way for all participants is what enabled and drove David to achieve enormous success and recognition in the field of Pharmaceutical Benefit Management.

However, it wasn't all plain sailing by any means. He wanted to take advantage of personal computers for the efficiencies that they could bring, however they were only in their infancy, but improving almost on a daily basis. Many of the fundamental requirements necessary for such a system to function were simply not available in this country such as adequate electronic communications, standard product codes, standard file formats and so on, but David would not allow these irritations to slow things down – he simply went out and developed his own or found other ways of doing it. Older readers may remember some of these e.g., Healthnet terminals, radio pads, FAST format, NAPPI codes, and SuperScripts - a sophisticated and advanced computerised pharmacy management system.

We were all learning very quickly that David's vision was indeed a possibility despite a number of ‘*crinkles in the cable*’ and the excitement and the sense of achievement was palpable when it all started coming together. There had been doubt, cynicism, and strong opposition by many pharmacists to what David was wanting to achieve and he came in for some strong criticism from time to time. However, being the kind of gentleman that he was, he would calmly and confidently reassure his critics that “Rome wasn't built in a day” and that their patience would be well rewarded – and, as we know, before too long that proved to be the case.

To have worked closely with someone like David at this time, developing something this meaningful was exciting, stimulating and rewarding and an opportunity for which I will always be grateful. To have been in the position of having David for a very dear and highly respected friend was indeed a privilege.

Far from simply re-inventing Pharmaceutical Benefit Management in this country to a real-time on-line system capable of providing many technically advanced clinical benefits, such as, patient counselling, drug interactions, contraindications etc., David made many, many significant contributions to healthcare and the pharmaceutical profession in South Africa.

As is so often the case, the exposure that one experiences in a certain aspect of one's profession results in the exposure to many other opportunities and areas of interest.

.../ continued on page 9



Not surprisingly, this happened in David's case and his innate commitment to supporting and developing the pharmacy profession and healthcare industry led to many more successful and diverse endeavours, some of which include:

- Initiating the establishment of a Chair of Pharmacy at Wits.
- Developing Pharmacist Advised Therapy (PAT) – a medicine benefit accepted by medical schemes for its members for medicine provided by the pharmacist for minor ailments.
- Developing a national coding system for medicines (NAPPI) which is still the standard in use for prescription and OTC medicines and surgical appliances.
- Developing the TPS Drug Information Centre to support pharmacists with the latest drug information, and Tablident – a computerised tablet identification system.
- Launching a distance learning CPD Programme for pharmacists across the country.

Where David found the time to take part in all these different activities I never knew, but he was also the author of at least twenty publications, over forty

conference papers and posters and was often consulted to prepare reports and presentations for third parties, and just by the way, he was an Advisor to the Minister of Economic Coordination from 1988 to 1992.

David has been recognised by the Society with every honour and accolade that it has at its disposal and deservedly so. People like David whose dedication, knowledge, loyalty, ability and modesty don't come into our lives very often, must be acknowledged appropriately so that they and their selfless contributions and their wonderful legacy will never be forgotten.

David managed to have a private life in amongst all of this and I know he enjoyed reading and collecting books. I know also that he enjoyed music, movies and photography, and possibly much more. Time spent with David was always stimulating and interesting whether at work or at play. I appreciate hugely, and feel honoured to have been his friend, and I will miss him.

To Linda and the family, I offer my most sincere condolences.

Doug Gordon.
FPS



DAVID BOYCE
(03-12-1946 to 15-12 2021)

Geraldine Bartlett

Visionary. Pioneer. Colleague. Friend. A man who changed the face of community pharmacy. A dear friend who will be sorely missed.

David Boyce passed away in December a short time after his 75th birthday and, unsurprisingly, the news of his passing brought an avalanche of heartfelt condolences from the many colleagues and leaders in the profession and medical scheme industry who knew this extraordinary and much respected man.

I had the privilege of working with David from 1984, at TPS, when he had the vision of setting up a Medicines Information Centre to help keep pharmacists abreast of the latest information on medicines and their use in practice. Just one of many initiatives for the profession from this amazing man.

That would be the start of a long, highly productive and rewarding working relationship with David, and the start of a close and enduring friendship between the Boyce and Bartlett families.

David was a visionary. He always saw the bigger picture and what could be. He used this to move the pharmacy profession to a new level, to achieve major advancements that would not be possible otherwise, to re-shape the future not only of the profession but of the medical scheme industry too.

As early as 1984 when I first met him, he already had the firm belief that the pharmacy profession could (and should) advance from being an isolated transactional occupation to being patient-centric and a key member of the healthcare team - the expert in medicines and their use in clinical practice. To achieve this vision of what the profession should be, he devised and implemented many initiatives, each of which have been recognised as major advances. These include:

.../ continued on page 10

- Establishing a national committee to market the professional side of Pharmacy – the Pharmacy Professional Awareness Campaign (PPAC) which was operative from 1983 until 1998
- Developing and implementing the Pharmacist Advised Therapy (PAT) medicine benefit to enable pharmacists to claim from medical schemes for medicines supplied by pharmacists for the treatment of minor ailments
- Planning and developing a Medicines Information Centre to support pharmacists in keeping abreast of the latest medicines information and thus enhancing their professional role
- Developing a national Patient Counselling competition for pharmacy students to promote the clinical role of the pharmacist and which was later adopted by the International Pharmacy Students Federation (IPSF) for implementing in other countries
- Launching a distance-learning, clinical Continuing Education Programme for pharmacists with the aim of keeping pharmacists up to date with the latest clinical treatment guidelines
- Developing patient counselling messages to be embedded in dispensing systems to enhance the patient-centric role of the pharmacist
- Devising patient safety clinical rules and embedding these in claims processing systems and dispensing systems to alert the pharmacist to potential patient safety concerns, e.g., checks for drug-drug interactions, contraindications, therapeutic duplications, correct dosages
- Developing and implementing Tablident® – a computerised tablet identification system

In addition to his major contributions to advancing the Pharmacy profession and in particular the role of the community pharmacist, David's ability to shape the future also extended to the medical scheme industry, where his innovations are acknowledged as being 'game changers' in this industry. He conceived and implemented the NAPPI coding system for medicines, which has become the *de facto* standard for prescription and OTC medicines, hospital consumables, and surgical appliances in South Africa.

He also changed the face of claims processing by introducing real-time-on-line medicine claims processing in the mid-1990's - decades ahead of its time, and bringing significant benefit to both pharmacies and medical schemes by mitigating financial risk. Always looking to bring about advances, David developed the first medicine reference pricing system – the MMAP system – to promote affordable medicine through encouraging generic substitution by pharmacists. Adding to this, he introduced the idea of Medicine Formularies (based on science and not merely price) into the private healthcare sector and followed this shortly thereafter with developing and implementing the first Chronic Medicine Programmes which were based on preauthorisation and drug utilisation review, or DUR as it is now known.

Not stopping with advancing medicine management, David also pioneered Disease Management programmes in this country (which won an international award in 2004) and Hospital Utilisation Management where he introduced – once again, way ahead of its time - electronic hospital claims processing. There have been many more outstanding accomplishments in David's career which others who worked closely with him in those endeavours are more familiar with, and can speak to better than I.

I feel honoured and privileged to have been able to work with David for so many years and have great appreciation for all he has done for our profession and the healthcare industry. Working with him was incredibly stimulating and rewarding and he never ceased to amaze me with his ability come up with ideas and a clear vision of what could be. He was a quiet and modest man, avoiding the limelight and preferring to work quietly away in the background, putting his ideas into practice. I believe what drove him was a sincere desire to change and advance things for the better. It was never about himself. It was never about fame or fortune.

Working so closely with David turned into a close friendship between our two families which is as strong today as it has always been. Through this friendship and the times and holidays spent together, I saw the David that many might not know. The David who was modest, caring, generous, loyal, fun, diplomatic, and a gentleman to his fingertips. The man who was so well read and pursued his interests with the same zest as he showed for his profession. He enjoyed reading (ask his wife Linda how many books there are in the Boyce home!), music (he played the guitar), movies, art, photography, genealogy, and world affairs. There might be others I am not aware of. He collected war memorabilia, medals, coins and more. His home is filled with beautiful artefacts. He loved history and was an expert on Alexander the Great and Napoleon, to name but a couple of his 'deep-dive' interests. Spending time in David's company was always interesting, special, and valued. He will be sorely missed by me and my family.

David Boyce is a name that was and always will be on everyone's lips as one of the greatest visionaries of our profession. He will be remembered not only for his unparalleled achievements and contributions to the Pharmacy profession and healthcare industry, but for being a quiet, modest gentleman and loyal friend.

I am honoured to have been able to work with him and be his friend. May his soul rest in peace.



DAVID GEORGE BOYCE
3 December 1946 - 15 December 1921

Lorraine Osman

David Boyce will be remembered as a man of great integrity, honour and humility.

He studied pharmacy in Cape Town, during which time he was involved in student organisations at local, national and international levels. Having been the President of the South African Pharmaceutical Students Federation (SAPSF) and Chairman of Publications of the International Pharmaceutical Students Federation, he never lost his interest in pharmacy students, and played a significant role in the establishment of the Chair of Pharmacy at the University of the Witwatersrand.

Following his registration as a pharmacist, he spent time working in hospital, wholesale and community pharmacy practice, including owning and managing his own community pharmacy for ten years. David was ahead of his time in many ways – he firmly believed that the role of the pharmacist was both educational and clinical, with the patient as the focus. This influenced his continuing education initiatives in the PSSA.



He fully supported a patient-centric approach to pharmacy practice in order for pharmacists to add benefit to their communities. Having a continuously curious mind, he carried on studying, achieving a B.Com. with majors in Economics, Business Management and Computerised Information Systems. This served him well in his future career, and also benefited the PSSA immeasurably.

The Southern Transvaal branch of the PSSA (later to become the Southern Gauteng branch) recognised his knowledge and talents. At various stages, David was Chairman of the Branch, the Business Committee and Pharmaceutical Management Services. He was appointed to manage the financial and operational turnaround of its business entity, TPS. At that stage, there were a number of prescription checking offices in large PSSA branches. This eventually led to the creation of MediKredit, which changed and modernised prescription claims processing to medical schemes. Most of his working life was focused on pharmaceutical benefit management, health economics, pharmacoeconomics, computerised information systems, and managed health care.

His pioneer work in medical informatics included introduction of the first computerised community pharmacy dispensary management system. The NAPPI code system, which is still the standard for the coding of medicines, hospital consumables, and surgical appliances, was developed by him. David's introduction of the first online, real-time Claims Transaction Processing Facility in the South African medical scheme industry changed the way claims were submitted.

Since 2003, David evaluated the impact of the regulated dispensing fee on community pharmacy and was regularly consulted by the PSSA. He was responsible for unprecedented economic research in this arena. He also served on SA Pharmacy Council committees investigating managed health care, tariff and franchising.

The effect of David Boyce's knowledge and actions in the pharmacy world did not go unnoticed – he received many awards and accolades. He was a Fellow and Honorary Life Member of the PSSA, and was also an Honorary Life Member of the SAPSF. He was the first recipient of the JB Israelsohn Award, given by the Southern Transvaal Branch of the South African Association of Retail Pharmacists for services to community pharmacy, and the Alf Radis Award from the Cape Western Province Branch of the PSSA in recognition of the achievement of the establishment of the TPS Drug Information Centre. More recently, David received the William Paterson Memorial Award.

The PSSA's sincere condolences go to his wife, Linda, his sons and his daughter.



Passing of Fellow David Boyce

Dear Fellows

We regret to inform you of the passing of David Boyce, a Fellow of the Pharmaceutical Society of South Africa. David was also an Honorary Life Member of the Pharmaceutical Society of South Africa and was a recipient of the William Patterson Award.

David was a prominent innovator in the medical scheme administration arena, and a major contributor to the Society's engagements with government over the dispensing fee. David was also, for many years, a stalwart of the Names and Scheduling Committee of the Medicines Control Council (later the South African Health Products Regulatory Authority)."

Kind regards
Andy Gray
Chair of the Fellows Committee



TRIBUTE TO DAVID BOYCE



It was with much sadness that we heard of the passing of David Boyce, a Fellow of the Pharmaceutical Society of South Africa.

As emphasised in other tributes in this edition of The Golden Mortar (GM), David's efforts were concentrated on the improvement of the financial benefits and medicines' information for his chosen and beloved profession, by continually devising and developing the technology for the processing of claims to the medical schemes, for reimbursement to pharmacies of their dispensing expenses.

It was during this time that his innovations on our behalf became known and eagerly accepted; he transformed the existing Transvaal Pharmaceutical Society (TPS) organisation into an efficient claims processing entity, initially manual, but gradually improving the processes to a slick, computer-based operation, and he began to serve on the Branch Committee of the PSSA Southern Transvaal - as it was then - and where I first got to know him.

As an aside, on this topic, his team of ladies under a supervisor would capture electronically the details of the medicines dispensed and their respective prices from paper copies sent in weekly batches by local pharmacies, and on an invited visit this efficient operation was truly a wonder to watch.

The motto that David coined - even on their coffee mugs - was "TPIK" : The Pharmacist Is King ! - and further developments expanded these processes to private hospitals and medical practices, completely transforming the medical schemes industry.

My personal additional and important aspect was the embedded medicines' information provided by tear-off attachments on each script copy handed to patients or carers, promoting knowledge and safety regarding their medications.

David received recognition nationally and internationally for his innovations and numerous accolades and awards, including the William Paterson Award, the highest and most prestigious bestowed by the PSSA.

Sincere condolences and sympathies are extended to David's dear family, and shared with his many close friends.

Dave Sieff,
on behalf of the Editorial Board,
The Golden Mortar.



South African Association of Community
Pharmacists Southern Gauteng Branch
Committee members for 2022



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Mrs Winny Ndlovu



Vice-Chairperson
Mr Gary Kohn



Honorary Treasurer
Mr Richard Barry

Committee members

Ms Pumza Hlekane
Mr Frans Landman
Mr John Makhlouf
Mr Simon Mogafe

Mr Tshifhiwa Rabali
Mr David Sieff
Mr Arthur Tannous
Ms Patricia Tharage



Professional Indemnity Insurance

You should be aware that pharmacists in all spheres of Practice require Personal Indemnity Insurance. Not to have it is simply not an option – it is a requirement of the South African Pharmacy Council.

PSSA offers its members access to the essential cover at very competitive rates through the Professional Provident Society.



For further details please contact Nikita at the PSSA National Office on (012) 470-9557 or at Nikita@pharmail.co.za

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National Pharmacy Museum Artefacts



R360



R165



R40



R325



R285



R95

To start your very own collection, Please contact Virginia at 011 442 3615 / virginia@pssasg.co.za



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The Editor reserves the right to amend punctuation or text for correctness, and to summarise where necessary.

We welcome all contributions and as space permits, these will be published.

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Industrial Pharmacy:	Thavashini Pather
Academic Pharmacy:	Prof Yahya Choonara & Muhammed Vally

Contact them through the Branch Office: Tel: 011 442 3615

The Editorial Board acknowledges, with thanks, the contributions made by the SA Association of Community Pharmacists (SAACP) Southern Gauteng Branch, to the production of this newsletter.

