



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

IZWI LETHU

'Reaching you across the fields & Mountains of Our Land!'

NKANDLA HOSPITAL

NEWS

HEALTH AWARENESS ON BREAST

STAY INFORMED

April-June 2018

Nkandla hospital conducted a breast cancer awareness. The main objective of the awareness is to make the clients have knowledge on breast cancer, how to do breast cancer examination and to discuss about signs and symptoms of breast cancer.

WHAT IS BREAST CANCER

Most breast cancer occurs in the upper outer quadrant (upper part of the breast closest to the arm). A woman may not be able to feel slow growing breast tumor by touch for up for up to eight years until it is 1cm in diameter. It may spread by way of lymphatic system or blood stream to the lungs, bones and other organs. It mostly occurs to women of 35 years to 54, it is rare in males.



Above: Mrs. Majola, OM at staff clinic addressing some of the staff members about breast cancer.

Below: some of the staff members who participated in the breast cancer awareness.



FIGHTING DISEASE, FIGHTING POVERTY, GIVING HOPE

TYPES OF BREAST CANCER.

1. DUCTAL CARCINOMA IN SITU (DCIS)

This is breast cancer in its earliest stage. It is confined to the ducts (milk passage), nearly 100% of a women at cancer stage can be cured.

2. INFILTRATING (INVASIVE) DUCTAL CARCINOMA (IDC)

This starts in a duct then breaks through the duct wall and invade the fatty tissue of the breast. This type accounting for nearly 80% of cases.

CAUSES OF BREAST CANCER

The primary cause of breast cancer is not known. Higher incidents in women suggest that destrogen is a cause or distributing factor. Women who are at increase risk increase those who:

1. have a family history of breast cancer
2. Have a long menstrual history (began menstruating at an early age or experiencing menopause late.
3. Have never been pregnant
4. Were first pregnant after the age of 31
5. Have had cancer in one breast
6. Have had endometrial or ovarian cancer
7. Were exposed to low-level ionizing radiation



Below : This lady was part of the demonstration on how to check breast cancer.





Above: The group of staff members who were part of the breast cancer awareness day at Nkandla hospital.

Below: These two ladies were listening attentively to what ever was said.



BREAST SELF EXAMINATION (BSE)

- Perform self examination one week after.
- Stand before the mirror, compare both breast noticing the shape and size. It is not unusual for one breast to be larger than the other.

SIGNS AND SYMPTOMS

Warning signs

1. A lump or mass in the breast
2. Change in symmetry or size of the breast
3. Change in the skin such as thickening or dimpling scaly skin around nipple or orange peel-like appearance or ulcer.
4. Change in skin temperature or colour (a warm, hot or pink arear)
5. Unusual drainage or discharge from the breast.
6. Change in the nipple such as itching, burning and retraction.
7. Swelling of the arm.
8. Pain with an advance tumor.

Check for nipple, puckering, dumpling, scaling of the skin or change in size or shape. Look at the same things with your arms in different positions.

- Raise your left arm, using pads of three fingers of your right hand, feel your left breast firmly, carefully and slowly.
- Begin at outer edge, pressing in small circle moving slowly around breast.
- Be sure to cover to the entire breast.
- Be sure to examine from your armpit to the color bone, as well as below your breast.
- Gentle squeeze the nipple and check for any discharge.
- Repeat step 2 and 3 on your right breast.
- Repeat step 2 and 3 on both breast while lying down. You should lie flat on your back, with your arm over your head and a pillow or folded towel under the shoulder or the breast that you are examining.
- Practical examination of breast examination

Male and Female reproductive organs

Hast took an initiative to educate our clients about different disease that may take place in our reproductive organs. The causes of those disease and curative measures . They were educated about different signs and symptoms of STI's.

There are sometimes signs and symptoms which may suggests that a person has a sexually transmitted infection. Treatment should be sought if a poison has any of the signs and symptoms. Some STI's has no visible symptoms, and some STI's have symptoms only when a person has been infected for a long time. People who have no symptoms can pass the infection onto their partners through having unprotected sex



Symptoms for women

- Swollen glands in the groin.
- Unusual vaginal discharge which may smell bad.
- Swelling and or itching around the genitals.
- Pain in the lower abdomen, sometimes accompanied by a high fever
- Pain during sex.
- Rash around and in the genitals.
- Sores or blisters around the genitals.
- A burning feeling when urinating.

Symptoms for men

- Itching around the genitals.
- Burning sensation while urinating.
- Discharge from the penis.
- Sores or blisters around the genitals.
- Swollen testicles.
- Swollen glands in the groin.
- Rash around the genitals which may spread to the rest of the body.

Urethral discharge in men

There is a discharge from the penis . The color, amount and the nature of the discharge will vary from client to client depending on the specific virus, bacteria or fungi that have caused it . A urethral discharge in a man is always abnormal, except for semen during ejaculation.

Abnormal vaginal discharge

Women may complain that the discharge ha an offensive smell and or is an abnormal color. There may be a large number of discharge. The discharge may be accompanied by itchi-ness, irritation or a burning sensation around vaginal areas. The color, amount and the nature of the discharge will vary from client to cli-ent on the specific cause.

Genital sores in men and women

Sores may present as ulcers, blisters or warts.

Genital ulcers.

Genital ulcers can be found anywhere in the genital area. In women they may be hidden in the folds of the lips, on the walls of the vagina, in the anal area or in the cervix. In men they may be found on the shaft of the penis or under the foreskin or in the anal area.

Blisters

Blisters are caused by herpes virus . This viral infection presents with single or multiple, small very painful tiny blisters any where in the genital area in both men and women.

Genital warts

Genital warts appear as a single or multiple le- sions, which vary in size and appearance. They can be found anywhere in the genital ar- ea in men and women including cervix. Genital warts are also known as cauliflower.

Common STI's

Chlamydia, Trichomonas, Gonorrhoea, Herpes,

Male and Female condoms

Male condom

Many people believes that all men know how to use condoms correctly. Incorrect use is common and is a major cause of condom failure. Things you need to remember:

Do not use grease, oils or lotions to make condoms slippery. Use only water lubricants like KY jelly. One round one condom, use a new condom each time you have sex, store a condom in a cool dry area and do not use old or damaged condoms. You must also not use the condom if the package is broken, the condom is dry, the color has changed and the condom is unusually sticky. Before having sex with your partner, check the expiry date then open the packet carefully. If you are not circumcised, pull back the foreskin and put the condom at the end of the end of the hard penis. Pinch the tip of the condom to squeeze out the air, roll on the condom until it reaches the base of the penis. check to ensure that the condom is not broken, after ejaculation, hold on to the condom at the base of the penis, keeping the condom on, pull the penis out before it gets soft and slide the condom off without spilling inside and dispose of the used condom in the bin.

Female condom

The female condom is put inside the woman's vagina to prevent pregnancy and disease. It is made of a very strong , thin plastic called polyurethane. It is open at the end and closed at the other and is held in place by two rings which can bend. It can be used only once. It is put in before having sex. The condom stays in place during sex and catches the man's sperms .

How to use a female condom.

- Open the package by tearing at the arrow.
- Remove the condom from the package and rub the sides of the condom together to spread the lubrication inside.
- The inner ring helps to keep the condom in position.
- To insert the condom, you can either stand, squat or lie down.
- Put your finger inside the condom and push the inner ring between our fingers so that it lies behind the pubic bone.
- After sex, take the condom out, wrap it and throw it away in rubbish , do not flush down the toilet, it will cause blockage

On the right : Hast Unit team member demonstrating on ho to insert the female condom.



Above: Hast unit team: N. Mlambo, S.V. Maphumulo, VV Bhengu and Z.C Shange. Below : Miss. N. Malambo demonstrating on how to insert the female condoam.



Cervical Cancer Week

Nkandla hospital conducted a cervical cancer week. The motive behind was to educate the staff member from all codes about the primary causes of cervical, how it can be treated and the importance of screening. 69 women were screened in one week at Nkandla hospital. They were led by the Nurse manager herself.



Above: Mrs. S.J. Nguse , Nurse manager at Nkandla hospital, was the first to do cervical cancer screening.

Below: Nkandla staff members listened to the call of their manager to do cervical cancer screening. They were all prepared to be part of this event.



WHAT IS A CERVICAL CANCER.

Cervical cancer is one of the most cancers diagnosed in women in South Africa. The main cause of cervical cancer is infection of the cervix by Human papillomavirus (HPV), of which strains 16 and 18 are the most common types associated with the development of cervical cancer. Cervical cancer is relatively unique cancer in that it has a long precursor phase, during which risks and abnormalities can be detected by screening. Screening can now be done using either cytology, SVA (single visit approach) or by detection of persistent infection with high risks types of HPV. If a positive screening is left untreated, a woman is at high risk of developing a cervical cancer over a 5-30 year period. Once these abnormalities are detected and treated, progression to invasive of the cervix can be prevented.

Screening in progress



Factors contributing to the high cervical cancer.

Socio economic factors: women who live in rural areas are disadvantaged regarding access to appropriate information and access to services.

Educational level: The default messaging strategy is through written material, and the medium of communication is English, which excludes most of the women in rural areas whose first language is not English.

Social arrangement of the family: Women in some communities are largely not decision makers in relations to health seeking patterns, especially for sexual and reproductive issues due to their economic reliance on their male partners.

Access to services: the shortage of specialists such as oncologists, radiation oncologists, appropriately trained surgical specialists and nurses trained in oncology deny patients to access services.

Health care worker skills: Weak health care worker competencies attributable to inadequate training contributes to a delay in diagnosis and referral to the next level of care for the definitive treatment.

Stigma: Due to the stigma associated with cervical cancer, patients tend to delay seeking treatment early or even disclosing the condition.

Primary prevention

Primary prevention of cervical cancer entails preventing the acquisition of HPV infection and the development of cellular changes in the cervix. Effective strategy. Prevention of smoking, improved nutrition and sexual health all impact on the risks of incidents and persistent HPV infection, and the risks to develop precursor lesions on the cervix. Health education and services, eg sexual education to certain age group, providing contraceptive counseling and services including condoms, prevention of tobacco use and support for cessation may be employed within the package of primary prevention.

Secondary prevention

Screening is the testing of women without symptoms to detect risk. The main goal is to detect persistent **HPV** and cancer precursor lesions so that they can be treated in time. Well organised screening programmes have been shown to effectively reduce the incident of and mortality from cervical cancer. Effective screening programme including targeting the correct age group, high coverage of population at risk using the screening test with the excellent sensitivity and good predictive value, effective treatment of women with abnormal screening tests, reliable laboratory services, a functional follow-ups and referral systems and effective communication between the different aspects of the screening programme. Co-ordination, careful monitoring and quality control are all essential.

Launch of HPS programme at Ngomankulu Primary



On the 9th of May 2018, Ngomankulu Primary School launched the Health Promoting School Programme. Inkosi B.S Shezi was amongst the dignitaries who were part of the ceremony. On the picture above the chief was captured congratulating the school for achieving this charismatic status. He further thanked the school principal and her colleagues as well as the school governing body for putting this school on the map, he said this put the whole of Ngomankulu in the KZN map and the whole of South Africa. He then welcomed everyone who was part of the event and requested them to feel at home. The chief was so overwhelmed by happiness. He said this was a beginning of good things for the community of Ngomankulu and the surroundings.

On the right: Mrs. B.O Shange, manager for Health Promoting School at King Cetshwayo District, was captured here addressing the people about the purpose of the day. Today we are here to launch HPS for this school. This programme is more precisely about health education, hygiene and healthy lifestyle. It is a cooperation between the department of health and the department of education. She then asked other schools not to run away from the programme, because its achievable. She then addressed the guest speaker from the head office, Mrs. Rasie



On the right: Mrs. Rasie from head office PMB was the guest speaker of the day. She greeted everyone and then congratulated the people of Ngomankulu for a good healthy life they are having, she said geographically, people of this area are living pure life, this area has a lot of mountains and hills, visiting your neighbor is a training on its own. She then informed the people that in order to leave a healthy lifestyle, they must avoid eating a lot of sugar, salts and cold drinks like Cocacola. She then advise people to do a lot of training and drink water instead of cold drinks.



On the right: Mayor A.T. Ntuli and ward 11 Councilor, Mr T Ntombela , were part of HPS ceremony at Ngomankulu. The Mayor congratulated the School for achieving this award. He said that, "You can achieve everything wherever you are, you don't need to go to the cities to get better things. I wish our pupils can be supported with school transport because they are travelling long distances to and from school. He also expressed his wish to see educators being provided with decent accomodations. The mayor was so happy to see the school from deep rural area achieving this award."

Below: Hand over of a certificates of achievement from head office and district.



SPORTS BULLETIN



Above and below: Ladies netball team, presenting their trophy and a netball kit they won at Melmoth tournament. CEO Congratulates the ladies, keep it up.

These are ladies in sports, our super stars. They don't look promising, but put them in the field of play, it is when you will know them better. They were presenting some of the trophies and a kit they won from one of the tournaments. They told the CEO who is in the middle and Mrs. Mdlalose from HRD that, this is a beginning, there is still more to come. We congratulate our girls hoping that our boys will also wake up and makes us proud. Sports is the source of togetherness at Nkandla hospital and that results for us knowing each other well and love each other always.



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