



# 3RD EDITION NEWSLETTER 2024

# MENTAL HEALTH AWARENESS IS VITAL ALL YEAR ROUND

July is Mental Health Awareness Month. As the theme suggests, the month is about creating awareness about mental wellness to help save lives and break the stigma around mental illness.

#### There are many types of mental illnesses, such as:

- Anxiety disorders
- Depression and bipolar mood disorder
- Eating disorders
- Personality disorders
- Post-traumatic stress disorder (PTSD)
- Psychotic disorders, such as schizophrenia



#### **SOME SYMPTOMS OF MENTAL ILLNESS**

Because there is a variety of mental illnesses, symptoms may differ depending on the condition and circumstances.

#### Here are a few examples of symptoms:

- Dramatic sleep and appetite changes
- Decline in personal care
- Rapid or dramatic shifts in emotions
- Withdrawal from social activities that the person previously enjoyed
- A change in performance at school, work or social activities that is out of the ordinary
- Problems with concentration, memory or logical thought and speech that are hard to explain
- Heightened sensitivity to sights, sounds, smells or touch
- Loss of initiative or desire to participate in any activity
- A vague feeling of being disconnected from oneself or one's surroundings; a sense of unreality
- Unusual or exaggerated beliefs about personal powers to understand meanings or influence events; illogical or 'magical' thinking typical of childhood in an adult
- Fear or suspiciousness of others
- Uncharacteristic behaviour
- Suicidal thoughts

#### WHAT CAUSES MENTAL ILLNESS?

Although there are several factors that can contribute to mental illness, there is no single cause for it.

### These are some of the factors that can contribute to mental illness:

- Your genes and family history
- Your life experiences, such as stress or a history of abuse, especially if they happen in childhood
- Biological factors such as chemical imbalances in the brain
- A traumatic brain injury
- A mother's exposure to viruses or toxic chemicals while pregnant
- Use of alcohol or recreational drugs
- Having a serious medical condition like cancer
- Having few friends and feeling lonely or isolated

## WHEN TO SEE A DOCTOR OR SUPPORT A LOVED ONE

It is best to seek professional help if you notice any symptoms of mental illness or have suicidal thoughts. You can, for example, see your GP and if needed, they can then refer you to a specialist for further treatment. Mental illness may get worse if it is left untreated, so taking action as early as possible is vital.

If you notice symptoms of a mental illness in a loved one, it's best to have an open discussion with them about your concern. Although you might not be able to force them to get professional care, you can still offer them support and encouragement. You can also help them to find a qualified mental health professional and make an appointment. You can even offer to go along with them to the appointment.

Take your loved one to a hospital or call for help if they have harmed themselves or are considering doing so.

#### **PREVENTION TIPS**

Although there's no way to prevent mental illness, it's possible to take steps to control your symptoms if you have been diagnosed with a mental illness. These include controlling stress, increasing resilience and boosting low self-esteem.

Keep an eye out for warning signs, learn what your triggers are and make sure you know what to do if symptoms present themselves. It's always best to ask your doctor and therapist for guidance and advice in this aspect. Make sure that you get help when symptoms appear as it could be harder to treat if you wait until the symptoms are bad.

Remember to take good care of yourself: get enough sleep, eat healthily and exercise regularly. If you have any problems with any of these or if you have questions, see a professional to get the help you need to take control of your health.

#### **TEEN MENTAL HEALTHCARE**

Mental illness starts quite young, with 50% of mental health conditions starting by age 14, according to the World Health Organization (WHO). Despite this, it largely goes undetected and untreated.

According to the South African Depression and Anxiety Group (SADAG), 9% of all teen deaths are caused by suicide. SADAG points to a major link between depression and suicide, particularly where the signs of depression are not recognised and treated.

#### **World Health Organization data further shows that:**

- Depression is the fourth leading cause of illness and disability among adolescents aged 15 to 19, while anxiety is the ninth leading cause.
   Suicide is the third leading cause of death in this age group.
- 90% of adolescent suicides take place in the world's low-income or middle-income countries.

#### **OUR MENTAL HEALTH CARE PROGRAMME**

Actively manage major depression with our Mental Health Care Programme, together with your Premier Plus GP. This programme gives you and your Premier Plus GP access to tools and benefits to monitor and manage your condition, ensuring you get high quality and coordinated care.





## **DAY SURGERY NETWORKS**

#### **DAY SURGERY PROCEDURES**

If you need a Day Surgery Procedure, go to a provider in the Fund's Network. Use the MaPS tool on our website to find the nearest provider: <address>.

For complex cases or procedures needing a longer stay, a clinical exceptions process will apply. Members will be moved to the right facility if needed.

If you use a provider outside the Network, you'll have to pay a deductible.

#### Procedures that must be performed at a facility in the Day Surgery Network



#### **Biopsies**

 Skin, subcutaneous tissue, soft tissue, muscle, bone, lymph, eye, mouth, throat, breast, cervix, vulva, prostate, penis, testes



#### **Breast procedures**

- Mastectomy for gynaecomastia
- Lumpectomy (fibroadenoma)



#### Ear, nose and throat procedures

- Tonsillectomy and adenoidectomy
- Repair nasal turbinates, nasal septum
- Simple procedures for nosebleed (extensive cautery)
- Sinus lavage
- Scopes (nasal endoscopy, laryngoscopy)
- Middle ear procedures (mastoidectomy, myringoplasty, myringotomy and grommets)



#### Eye procedures

- Cataract surgery
- Corneal transplant
- Treatment of glaucoma
- Other eye procedures (removal of foreign body, conjunctival surgery [repair laceration, pterygium], glaucoma surgery, probing and repair of tear ducts, vitrectomy, retinal surgery, eyelid surgery, strabismus repair)



#### **Ganglionectomy gastrointestinal procedures**

- Gastrointestinal scopes (oesophagoscopy, gastroscopy, colonoscopy, sigmoidoscopy, proctoscopy, anoscopy)
- Anorectal procedures (treatment of haemorrhoids, fissure, fistula)



#### **Gynaecological procedures**

- Colposcopy with LLETZ
- Diagnostic dilatation and curettage
- Diagnostic hysteroscopy
- Diagnostic laparoscopy
- Endometrial ablation
- Examination under anaesthesia
- Simple vulval and introitus procedures: Simple hymenotomy, partial hymenectomy, simple vulvectomy, excision Bartholin's gland cyst
- Suction curettage
- Vaginal, cervix and oviduct procedures: Excision vaginal septum, cyst or tumour, tubal ligation or occlusion, uterine cervix cerclage, removal of cerclage suture
- Uterine evacuation and curettage



#### Incision and drainage of abscess and cyst

 Subcutaneous tissue, soft tissue, bone, bursa, mouth, tonsil, pilonidal, ovary, Bartholin's gland, vagina



#### Nerve procedures

 Neuroplasty median nerve, ulnar nerve, digital, nerve of hand or foot, brachial plexus



#### **Orthopaedic Procedures**

- Arthroscopy, arthrotomy (shoulder, elbow, knee, ankle, hand, wrist, foot, temporomandibular joint), arthrodesis (hand, wrist, foot)
- Minor joint arthroplasty (intercarpal, carpometacarpal and metacarpophalangeal, interphalangeal joint arthroplasty)
- Tendon or ligament repair, muscle debridement, fascia procedures (tenotomy, tenodesis, tenolysis, repair/reconstruction, capsulotomy, capsulectomy, synovectomy, excision tendon sheath lesion, fasciotomy, fasciectomy). Subject to individual case review
- Repair bunion or toe deformity
- Treatment of simple closed fractures or dislocations, removal of pins and plates. Subject to individual case review



#### Removal of foreign body

 Subcutaneous tissue, muscle, external auditory canal under general anaesthesia



#### Simple superficial lymphadenectomy skin procedures

- Debridement
- Removal of lesions (dependent on site and diameter)
- Simple repair of superficial wounds



#### **Urological procedures**

- Cystoscopy
- Male genital procedures (circumcision, repair of penis, exploration of testes and scrotum, orchiectomy, epididymectomy, excision hydrocoele, excision varicocele vasectomy)



## **DIABETES CARE**

#### **FIVE MYTHS ABOUT DIABETES**

The number of people with type 2 diabetes is increasing in every country, and the World Health Organization predicts that diabetes will be the seventh leading cause of death worldwide in 2030. Chances are relatively high that you could be pre-diabetic or already suffer from the condition. Here are five common myths about diabetes:



#### 1. TYPE 2 DIABETES IS 'NOT SO BAD'

A common myth about diabetes is that type 1 is the 'bad' kind of diabetes and that type 2 is the less serious or 'good' kind. It's not clear where this idea started, but it could be our fear of needles. People with type 1 diabetes need insulin injections to control their blood sugar while people with type 2 diabetes can usually control their blood sugar with oral medicine and lifestyle changes, or even by lifestyle changes alone.

However, some people with type 2 diabetes also have to inject themselves with insulin as diabetes can worsen over time. Both types of diabetes can lead to serious health complications, such as heart disease, stroke, blindness, kidney failure, and nerve damage that can result in having to amputate limbs.

## 2. SLENDER PEOPLE CAN'T GET TYPE 2 DIABETES

Being overweight is a major risk factor for developing type 2 diabetes. Being even slightly overweight increases diabetes risk by up to five times, according to research done by Professor Walter Willett from the Harvard School of Public Health.

But being overweight is not the only major risk factor for type 2 diabetes. Genetics are just as important. People with a family history of diabetes are at higher risk for both type 1 and type 2 diabetes. Smoking also increases the risk of diabetes and cardiovascular diseases.

On the 'supply side' of the healthcare system, a major driver of costs is the rapid emergence of new medicines and medical technologies. Unlike information technology, new technology in healthcare comes at a typically much higher cost. In 2016, Discovery Health Medical Scheme paid out more than R1.5 billion for high-cost medicines, up from R400 million in 2008. In 2016, 89 members requiring very high-cost medicines claimed an average of R1.4 million each, and the number of members requiring these high-cost medicines has increased sevenfold since 2008.

# 3. PEOPLE WITH DIABETES HAVE TO EAT SMALL, FREQUENT MEALS

If you have low blood sugar, you have to eat frequently to keep your blood sugar stable. It's easy to assume that anyone with diabetes has to eat small meals and snacks to keep them going. Unfortunately, it's not that simple.

Both high blood sugar (hyperglycaemia) and low blood sugar (hypoglycaemia) are common in people with diabetes. If there is too much glucose in a person's blood, frequent snacking will only make the condition worse. Each person with diabetes has to have their own eating plan that works for their bodies. This can involve anything from regular small meals to fasting.

#### 4. EATING SOMETHING REALLY SWEET WILL 'GIVE YOU' DIABETES

Type 1 diabetes is genetic and type 2 is influenced by genetics and other factors. About 80% of cases of type 2 diabetes are linked to lifestyle factors. But if you don't have diabetes and only eat something ridiculously sweet every now and then, the sugar won't automatically 'give you' diabetes.

This doesn't give you a free pass to indulge. People who had one to two servings of soft drinks a day had a 26% greater risk of developing type 2 diabetes than those who had no soft drinks or less than one a month. This is according to a review of research published in the journal *Diabetes Care*.

## 5. YOU CAN'T GET TYPE 2 DIABETES IF YOU LEAD A HEALTHY LIFESTYLE

Since 80% of type 2 diabetes is triggered by lifestyle factors, it's easy to assume following a healthy eating plan and exercising regularly means you're immune. Unfortunately, there are other factors that can prevent the pancreas from producing enough insulin or prevent the body from responding to insulin normally.

Some medical conditions, such as polycystic ovarian syndrome (PCOS), increase the risk for type 2 diabetes because it's related to insulin resistance. In PCOS, cysts form in your ovaries, and one possible cause is insulin resistance. You could also develop diabetes if you are involved in an accident that damages your pancreas.

So don't rely on assumptions instead of facts. Seek out reputable sources for health information.

# HOW TO REGISTER ON THE DIABETES CARE PROGRAMME

Any member registered on the Chronic Illness Benefit for diabetes can join the Diabetes Care Programme.

#### To access the Diabetes Care Programme:

- Book a consultation with your Premier Plus doctor and ask to be registered on the programme. Access the Find a Provider tool to find a Premier Plus doctor.
- Email Members\_DCP@engenmed.co.za with 'register me' in the subject line. Please include your name, surname and membership number in the body of the email.
- Call us directly on 0860 444 439 to speak to one of our carew navigators



## **2024 TRUSTEE ELECTION**

The Board of Trustees manages the Fund on behalf of all members, they must protect the future sustainability of the Fund and ensure good governance. We have successfully

completed the process to elect four new Trustees to serve on the Board of the Fund and the results were announced at the Annual General Meeting, which was held on 27 June 2024.

#### We welcome and congratulate the following persons to the Board of Trustees of the Fund:

Mr. Reagan Marchant Ms. Nomsa Rabochene (re-elected)

Mr. André Williams Mr. Thabani Dlamini

The newly elected Trustees will serve a 3-year term, from 1 July 2024 to 30 Jun 2027.

We'd like to thank you for your participation in the election process, nominating and voting for the candidates.





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