## Message from the President

## Orthopaedic research in South Africa – The unstable pot

R esearch is one of the three pillars of academic medicine, but the balance of our local orthopaedic three-legged cooking pot is threatened by its precarious research leg. The problems we experience are many: lack of resources in public hospitals, administrative support, funding and motivation, to name a few.

There is no shortage of subjects for research, although many of them are of mainly local or continental interest. These should not be dismissed as unimportant as we have a duty to help develop orthopaedic strategies suitable for the whole African continent. Another consideration is that we have many problems in common with India and the Far East, not to mention South America. All these regions have the same mix of developed and developing world pathology and medical services that we have, and interchange of research and ideas is potentially very rewarding. (Yet how often do we attend each other's congresses?)

HIV/Aids is probably the area in which we can contribute the most to world knowledge. Sadly the output from South Africa has been minimal, largely due to the unrealistically strict regulation of HIV testing. The Minister of Health was recently quoted as saying that HIV should be treated as any other public health problem, and not singled out for special consideration, and I for one agree. Opportunities to collect valuable information on orthopaedic problems associated with HIV/Aids, of possible benefit to millions in this country, have been squandered due to individual resistance to testing and official denial of the epidemic. With a new outlook from the government, now is the time to tackle this problem again with new enthusiasm.

Academic orthopaedics is battling to keep its head above water in South Africa, and it is easy to use this excuse to neglect research in favour of service and teaching. Staff shortages at specialist, nursing and secretarial levels are compounded by chaotic record systems and hinder prospective and retrospective studies, especially where long-term follow-up is needed. Cash-strapped patients are unwilling to come for follow-up unless reimbursed, and overspent provinces frown on expensive investigations that do not contribute to patient care. These problems can be overcome to some extent; for instance money to cover basic costs of a research project is available from the SAOA – but only a few applications for research grants are received each year. I believe the real underlying problems are lack of a research ethic in our medical schools, lack of motivation in the individual and lack of recognition (not only financial) for the effort and inconvenience involved in research.

Possible solutions are multi-centre studies to accumulate large numbers of cases over a short period and spread costs, or university-funded posts in each department to promote research. Co-operation with private surgeons or inclusion of RWOPS (remunerated work outside the public service) patients will broaden the spectrum of pathology and surgery for investigation. Costs of medical care are escalating beyond inflation and no nation can afford this unbridled rise in health care expenditure: we are not alone in the painful and controversial process of developing a national health care system. We should be in the vanguard of researching and developing cost-effective orthopaedic care systems for countries with diverse populations such

as ours, especially in the fields of trauma and infections. Outcomes of the sophisticated procedures that are only affordable in the private sector must be investigated to see if they are justified and not merely fashionable or lucrative. And here the private healthcare sector must also become involved, not for short-term profit, but for long-term commitment to the health of our people, and because they have the skills and resources to do this effectively.

We are fortunate in one respect; the *South African Orthopaedic Journal* is an ideal forum for our results to be published. I urge our readers to submit as many high quality papers to the journal as possible, because international accreditation will follow, with the attendant recognition for our hard work in difficult circumstances.



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