

Dear CPD client,

We wish to take this opportunity to thank you for your continued support through the completion of our online CPD questionnaires as well as to share some exciting news with you. HMPG's journal CPD questionnaires will be moving to the Medical Practice Consulting (MPC) CPD platform (www.mpconsulting.co.za) as part of a strategy to consolidate all South African Medical Association (SAMA) members' CPD certificates and history.

All SAMA CPD certificates (whether for annual conferences, branch meetings or workshops) are already available online on the MPC CPD platform and moving all active HMPG online CPD questionnaires to the same platform will mean that all SAMA member CPD certificates will be issued in one central, convenient location – resulting in less admin for our CPD clients.

An additional benefit is that the MPC CPD manager can complete your IAR form on your behalf (no more countless hours of reconciling CPD records before a compliance audit) and submit your CPD history to the HPCSA once you have approved it and are happy with the results. All that is required of you, when you are ready, is to click a single button to submit your CPD Activity Record to the HPCSA. Nothing will, of course, ever be submitted without your prior approval and consent.

The MPC system also adds additional functionality to the CPD questionnaires and the system has been set up to make the process as easy to follow as possible.

The South African Medical Association (SAMA) board has concluded that the CPD services associated with the *South African Medical Journal* (incorporating Continuing Medical Education) and the *South African Journal of Bioethics and Law* will only be offered to registered and fully paid-up SAMA members, as per the SAMA member benefit schedule; therefore, you will be required to register a profile on the MPC CPD system (if you do not already have one – if you already have one, login as usual) and to supply your SAMA membership number. You will be required to do this only once. Your membership will be validated in real-time and you will be able to access the journal CPD questionnaires. This once-off registration should not take more than 2 minutes and you will be on your way to completing the CPD questionnaires.

Below are some questions and answers that will assist you in getting started.

When will the CPD questionnaires move to MPC?

All HMPG-issued journal CPD questionnaires will move to the MPC CPD platform from February 2014 onwards. This will include all prior CPD questionnaires that are still active.

What website do I access to complete the HMPG questionnaires?

www.mpconsulting.co.za

Who is MPC?

Medical Practice Consulting (MPC) is a group company of SAMA. MPC has historically hosted CPD at SAMA's annual conferences, issued all SAMA member CPD certificates and has hosted SAMA's online branch elections. By moving active HMPG journal CPD questionnaires to the MPC system, SAMA members will have all their CPD certificates in one central, convenient location. MPC has also been supplying the Foundation for Professional Development distance learning courses online for the last 2 years and has hosted some of the largest online training initiatives in the South African healthcare industry.

What do I need to register a profile on the MPC CPD system?

MPC does not retain any confidential information on their database, so you will not be requested to share your telephone number, practice or home address. All that is required for registration is your name, surname, specialty, SAMA membership number and HPCSA number (which is included on your CPD certificate to comply with HPCSA CPD requirements).

How long will registration take?

Completing registration should take no longer than 2 minutes – please remember to have your HPCSA (MP Number) and SAMA membership number at hand.

What about my historic CPD certificates on the www.cpdjournals.co.za website?

If you register on the MPC CPD platform with the same email address as you were using on the www.cpdjournals.co.za website, MPC will import all your CPD certificates for the last 36 months into your MPC CPD manager for you. Alternatively you can still login to www.cpdjournals.co.za and save any CPD certificates that are still valid (remember that CEUs have a 24-month shelf life and expire after 24 months).

What happens if I run into technical difficulties?

Simply complete an online contact form and MPC will assist you with your technical problem. If your SAMA number for some reason does not match that in the SAMA membership database, MPC will assist with rectifying the problem. MPC's contact details are available online: www.mpconsulting.co.za/contact-us

Sincerely,
Gert Steyn
CEO, Health and Medical Publishing Group (HMPG)

True (A) or false (B):**Regarding HIV and testing in KwaZulu-Natal:**

1. The current rate of mother-to-child transmission of HIV in South Africa is <3%.
2. The quoted current overall prevalence of HIV among pregnant women attending for antenatal care in KwaZulu-Natal is 39.5%.
3. In a reported study by Wanyenze *et al.* (2008) from Uganda, 98% of patients offered provider-initiated counselling and testing volunteered to be tested.
4. The rate of HIV positivity in Uganda quoted in the 2008 Wanyenze paper is 10%.

Regarding induction of labour in KwaZulu-Natal:

5. For the purpose of this study, failed induction of labour was defined as failure to achieve vaginal delivery. The Royal College of Obstetricians and Gynaecologists defines failure of induction of labour as failure after one attempt.
6. In the HYPITAT study (2012), the numbers recruited were too small to resolve the issue of whether induction of labour for mild hypertension is beneficial or not.

Regarding asymptomatic bacteriuria:

7. Asymptomatic bacteriuria occurs in up to 6% of antenatal patients.
8. Up to 5% of women with asymptomatic bacteriuria will develop symptomatic infection.
9. The Griess nitrite test relies on some bacteria reducing nitrite to nitrate in urine.
10. If the urine culture is taken as the gold standard, the sensitivity of any additional test is calculated by the number identified by

that test who were culture-positive divided by the total number of positive cultures in the study group.

11. If the relative risk of something happening is 1.54 in group A compared with it happening in group B, then the event is one and a half times more likely to happen in group A than in group B.

Regarding postpartum anal incontinence:

12. Anal incontinence is defined as involuntary loss of faeces or flatus.
13. The majority of anal incontinence reported by women in this study at the 6-week postnatal assessment was still present at 6 months.

Regarding Call-Exner bodies:

14. Call-Exner bodies appear in 90% of granulosa cell tumours.
15. Call-Exner bodies occur exclusively in granulosa cell tumours.
16. Although she was an American, Louise Call's work on Call-Exner bodies was carried out in Vienna and published in German.

Regarding uterine artery embolisation:

17. Uterine artery embolisation was first described in the *Lancet* in 1982.
18. Before treating fibroids, it is important to exclude other pathology that may have similar clinical presentations such as malignancy, adenomyosis or polyps.
19. In embolisation, the use of microcatheters reduces the need for bilateral femoral puncture and reduces arterial spasm.
20. Regarding shrinkage of uterine volume by embolisation, the normal uterine volume is approximately 50 cm³.

**Effective in 2014, the CPD programme for SAJOG will be administered by Medical Practice Consulting:
CPD questionnaires must be completed online at www.mpconsulting.co.za
A maximum of 3 CEUs will be awarded per correctly completed test.
Accreditation number: MDB001/010/01/2014 (Clinical)**