

of psychiatric and neurological disorders and one questions the practice of prescribing an agent such as sulpiride for breastfeeding mothers.

Research has shown that several processes affecting brain structure such as myelination of axon fibres, arborisation of neurons and synaptogenesis occur after birth, and medical practitioners are therefore duty bound to warn breastfeeding mothers of the potential risk to the newborn infants when prescribing a psychotropic agent.

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- 1. Bazire S. Psychotropic Drug Directory. Salisbury, UK: Fivepin Publishing, 2003/04: 209-216.
- Stahl SM. Essential Psychopharmacology. 2nd ed. Cambridge: Cambridge University Press, 2002

High expenses for doctors

To the Editor: I refer to the letter by Dr Ger¹ in a recent issue of the *Journal*. Numerous educational studies have shown that memory retention among health care professionals is poor, and that practical skills deteriorate within months of training.¹ Indeed, as Dr Ger states, 'Knowledge ... is poor after one year – rewrite or lose your licence to practice' has been the policy in many leading international medical institutions for many years, particularly in the USA.

Although annual recertification in basic and advanced lifesupport skills may be optimal, the Resuscitation Council of Southern Africa has adopted the American Heart Association policy of recommending renewal in Advanced Cardiovascular Life Support (ACLS) and Paediatric Advanced Life Support (PALS) training every 2 years for health care professionals with a duty to respond to a cardiac or paediatric emergency.

ACLS and PALS courses offered by the Resuscitation Council of Southern Africa, recognised as being of the highest international standard and utilising simulators and equipment costing between $^1/_4$ and $^1/_2$ a million rands, are attended by doctors, nurses and paramedics from all over South Africa and worldwide, as they are being offered at a fraction of the price of similar overseas advanced life-support courses.

We note that Dr Ger would like his SAMA membership fee to cover the cost of his 'CPD points, congresses, and revision courses, plus protection fees'. Indeed, the acquisition of CPD points and attendance at congresses and revision courses would very likely lead to a reduction in medical protection fees.

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1. Ger SS. High expenses for doctors (Letter). S Afr Med J 2005; 95: 366.

 Berden HJJM, Willems FF, Hendrick JM, Pijls NH, Knape JT. How frequently should basic cardiopulmonary resuscitation training be repeated to maintain adequate skills? BMJ 1993; 306:1576-1567.

HPCSA – a voice from the other side

To the Editor: With regard to the letter in your May issue,¹ our CPD Manager Barbara van Staden (who incidentally is a woman, not a 'him' as referred to in the letter) has not received any enquiries from C D Karabus regarding his CPD points or any other matter, not have I been requested for a response to his letter as stated in the Editor's note below the letter (all media enquiries are referred to my office).

We are disappointed that the *SAMJ* has resorted to such tactics.

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1. Karabus CD. HPCSA - the sound of silence. S Afr Med J 2005; 95: 286.

Professor Karabus replies: After several abortive letters of request to the HPCSA I thought a letter of complaint to the *SAMJ* might be indicated and produce results. It has!

I am now told that Mrs B van Staden is the senior manager for CPD records and claims never to have received any letters from me. As my bona fides are called into question may I provide the following?

- 1. My 71-point 2002 CPD portfolio (posted to the HPCSA on 12 April 2003, full copy available) was not acknowledged.
- 2. My e-mail dated 21 January 2004 to Mrs Y Meintjies at the HPCSA (having been told in error that she was involved with CPD), together with her very prompt response of 22 January saying that she had forwarded my request to the CPD department.
- 3. My letter dated 24 March 2004 attached to my CPD portfolio for 2003.
- 4. My final letter dated 21 May 2004 to the so-called CPD manager requesting certification.

Copies of all the above have been sent to the Editor of the *Iournal*.

To put it mildly I am not impressed with the HPCSA.

Erratum

In the article entitled 'The cost of treating serious firearm-related injuries in South Africa' by D Allard and V C Burch, which appeared on pp. 591 - 594 of the August 2005 SAMJ, there were two errors in the second paragraph of the discussion. In the first sentence, 'US\$2.9 million' should have read 'US\$29 million', and in the third sentence '4% of the total' should have read '1% of the total'.

626