good-quality evidence of the economic results of substituting nurses for doctors. While systematic reviews of the effects of interventions are valuable for making good health care decisions, they are not sufficient. Policymakers who wish to institute programmes for moving the tasks of highly qualified workers to those with shorter training would need to consider local conditions, needs, values, costs and the availability of resources. Such changes to the delivery of care should be preceded (or accompanied) by standardised protocols, appropriate training, regular supportive supervision, and meaningful career development opportunities. However, given the complexity of ARV drugs and the highly specialised nature of care for HIV/AIDS patients, the need exists for a systematic review of the evidence for the effectiveness of nurse-led management of HIV/AIDS patients. Should the evidence be lacking, policymakers need to consider programmatic shifts in HIV/AIDS care to be evaluated in the context of RCTs.

Charles Shey Wiysonge
Idowu Dele Araoyinbo
South African Cochrane Centre
South African Medical Research Council
Cape Town
charles.wiysonge@mrc.ac.za

The blight of bureaucracy

To the Editor: I recently retired from active practice as a private gynaecologist, moving to the rural heart of the Great Karoo, where I still run a small ‘office gynaecology’ practice. A few months after settling in, I was requested by an administrative head of the primary health care clinics in the area to do some clinics for them. I thought this would be a good way of ploughing something back into the community where I had grown up, so I lodged the required application as requested. I heard nothing, not even acknowledgement of receipt, for the best part of six weeks. Eventually, the same officer phoned and informed me that I needed also to produce my matric certificate, despite having produced proof of registration as a specialist with the Health Professions Council of South Africa. I had written matric some 46 years ago, and could no longer produce the required proof of my matriculation qualification. Another high-rank official from the same office later phoned to stress to me that my ‘application could not be processed’ unless I produced that matric certificate; it was an absolute requirement. Unfortunately, that was also the end of our negotiations. So everyone potentially concerned missed out on a nice opportunity to do something worthwhile for the community where, according to local newspapers, there is a serious shortage of doctors, especially so-called ‘scarce-skills’ personnel.

I thought the SAMJ letters column would be a good forum for drawing the attention of other professionals to the need to hold on to those matric certificates, whatever you do. I remain stunned by this demonstration of a morbidly bleak and blighted mentality.

J du T Zaaijman
Middelburg, E Cape
zaaij@adsactive.com