We also have intensive contacts with the South African Police Child Protection Unit in order to identify the most efficient methods of collecting medical evidence. The current overall conviction rate of approximately 7% indicates where our society is failing the children.

Newspapers and magazines are full of sensational reports regarding child sexual abuse. Proper reporting on the real facts surrounding child sexual abuse, such as that the majority of child offenders are family, neighbours or close friends of the patient, might actually open the eyes of currently inactive witnesses. Anybody who has ever been confronted with a patient suffering from detrimental after-effects after being sexually abused as a child will agree that creating as much awareness as possible is justified.

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Mass hysteria with possible pseudoseizures at a primary school

To the Editor: It was with extreme interest that I read the article by Mkize and Ndabeni on mass hysteria in the September issue of SAMJ.

In early August 2002, 27 children at a local primary school in Stanger, KwaZulu-Natal, collapsed. Ten pupils collapsed in the assembly area while another 22 later collapsed in their classes. The first children who collapsed did so during a talk on eye care in the assembly area where the children were standing. A man who had recently injured an eye was speaking of his personal experience. He was wearing an eye patch. The principal of the school initially thought that some of the pupils found him frightening.

The children collapsed and were unconscious for a few minutes. Some also complained of stomach cramps and tight chest pains, and seemed to be shivering. The principal thought they were experiencing seizures. Paramedics, health inspectors and parents rushed to the school.

The children were taken to the local hospital. No abnormality could be found on examination. I also saw two children who had collapsed and were experiencing stomach cramps. On examination, I again found no abnormality. I have known these children all their lives and they are not epileptic. Paramedics and local health inspectors were called in. They suspected a gas leak, but their investigations revealed no such thing. The health inspectors called this an idiopathic episode.

The children were separated and sent home. The next day at school they were all back to normal with no residual health problems.

The principal of the school was glad to have a copy of the article by Mkize and Ndabeni — the fact that this problem has been recorded previously is comforting.

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CPD requirements — non-clinical registration

To the Editor: I have recently received notice from the Registrar of the Health Professions Council of his intention to proceed to de-register retired doctors who have opted not to seek CPD status, and to place them in a non-clinical category which will preclude the right to prescribe even for themselves. Opting not to seek CPD status is obviously based on certain financial implications, e.g. the cost of attending seminars and conferences.

Correspondence with the Medical and Dental Professions Board and SAMA has proved fruitless.

In essence my correspondence has pleaded for an ongoing strictly limited right of practice or at least freedom to prescribe for oneself, perhaps in an ‘emiritus’ capacity, which provides for this very limited freedom. This obtains in all other learned professions, which have inalienable lifelong university degree status. If one has survived a working life in practice without flagrant breach of ethics or professional skill standards there must be some degree of merit in that, which should be recognised. For those retired persons whose intellectual discipline is solely in the medical sciences, the CPD issue is plain. For those with more wide-ranging interests, before ‘the years condemn’, the issue of CPD should not apply but they should be entitled at least to retain the right to prescribe for themselves and their immediate family members.

A qualified plumber or electrician, for example, would not be precluded from doing repairs or installations at his own home irrespective of age, new technology or the introduction of available new materials!

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