EMSSA NEWSLETTER JULY 2014

EMSSA newsletter

July 2014



Feedback from conferences

Drs Holt, Stander, and Stephen give us some feedback from their recent travels and international conference experiences. Above picture from opening ceremony at ICEM Hong Kong 2014

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The Emergency Medicine Society of South Africa are very glad to bring you another edition of our newsletter. We have shifted the focus slightly and in this edition you will find less academic material and more interest pieces written by our members. This year we have chosen to focus on international collaboration and hear more about what our EMSSA members have been up to in the last year.

We are still a small society, made up of dedicated emergency care practitioners working in both prehospital and inhospital fields, covering a range of settings from small rural settings, to large academic hospitals to private emergency care. We really would like to expand our membership base and hope that this newsletter gives you a better idea about the benefits of membership and the ways you can get involved in EMSSA related activities.

Several EMSSA members have contributed to this years' newsletter and I am very grateful for their contribution. We have included several pieces with feedback from overseas conferences and hope that these will inspire you to travel and meet fellow EM enthusiasts! EM is still a young and growing specialty in this country and we feel that international collaboration and networking are very important.

The next big date on the EMSSA calendar is EMSSA 2014 – the

Integrated Acute care Symposium in November which will be jointly with the Trauma Society. This symposium in Durban promises to highlight the very best of KZN's vibrant emergency medicine community.

We have included some information regarding the ongoing seed funding project that EMSSA runs, as well as some information about how to access the amazing A-Full database which is one of the benefits of EMSSA membership.

This newsletter is meant to excite, inspire and entertain you. I would like to hear from you with any feedback, questions or comments regarding any of the articles. Please email me at annebsmith@gmail.com or connect via twitter @annestir. You can also contact me if you are not yet an EMSSA member and would like to get involved.

Looking forward to hearing from you!

Anne

 Emergency medicine is
the most interesting fifteen minutes of every other specialty' – Dan Sandberg, Sweden 2014



Social media? For education?

Dr Oosthuizen explains the ins and outs of FOAMed, how Twitter is more than what you got up to this weekend, and why you should get online sooner rather than later

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Looking for more information about EMSSA and what we do? Interested in the EMSSA practice quidelines?

Visit us as www.emssa.org.za

EMSSA 2013

Dr Melanie Stander

EMSSA was once again proud to welcome local, national and international delegates to the International Conference that was held at the Cape Town International Convention Centre from 5-7th November 2013. Over 600 delegates were able to participate in the numerous preconference workshops and well as attend the excellent lectures over the 3 days. Thank you to the local organising committee under the leadership of Professor Wallis who worked many long hours putting the conference together. There was also excellent support from the trade and we wish to extend our thanks to all the companies that took part as their partnerships with us help to ensure that this biennial event remains the biggest emergency medicine conference in Africa.

I would like to extend our congratulations to the following colleagues for their sterling achievements: - **Best Emerging Speaker**: Dr Juma Mfinanga

- **Best South African Research**: Dr Mohammed Dalwai, "Assessing the SATS in Pakistan" -

Best African Research: Dr Upendo George, "The SIRS response as a predictor of mortality amongst febrile children"

- **Best Overall Oral Presentation**: Dr Caroline Delport, "Foreign Body Ingestion in Children"
- 2013 Swiss AeroMed Africa Research Award: Mr Lloyd Christopher, "The role of Aeromed in Maternal Mortality"

Last but certainly not least, thank you to all the delegates who joined us in the Mother City. We value your feedback about how the next conference can be even better and we appreciate your involvement in improving the access to and provision of emergency medical care for all our patients..









EMSSA SEED FUNDING

Dr Melanie Stander

Are you looking for funding for a community initiative?

Do you have a project that you want to start but you are lacking the start-up funds?

Do you know about the EMSSA Seed Fund?

The EMSSA promotes the development of emergency care in the South Africa (and sub-Saharan Africa); in support of this aim, the EMSSA offers seed funding for projects that it deems have the potential to improve emergency care,

particularly those projects which are community-based. Any fully paid up members of the EMSSA are eligible to apply and where collaborative projects are undertaken, the applicant for the seed funding should be a fully paid up member of the EMSSA

Funding is limited to **R15 000** maximum, and is offered for up to two projects per year.

To access the application documentation have a look at www.emssa.org.za under Policies.

ICEM 2014

Dr Melanie Stander (@EMStander)

Hong Kong was the beautiful host city of this year's 15th International Conference on Emergency Medicine that was held from 11th-14th June 2014 at the Hong Kong Convention and Exhibition Centre.

2300 delegates from all continents gathered to experience a world showcase of international emergency medicine leaders who presented workshops, lectures and research and poster presentations. EMSSA was well represented with a stand in the exhibitors' area where we were advertising the 19th World Congress on Disaster and Emergency Medicine (which is being co-hosted by EMSSA and WADEM) from 21-24 April 2015 as well as the 16th International Conference on Emergency Medicine (co-hosted by EMSSA and IFEM) from 18th-21st April 2016. Both of these prestigious conferences will be held in Cape Town.



There was tremendous interest expressed by international delegates to travel to South Africa for these conferences and we expect the next 3 years to be an excellent opportunity for the Society to promote emergency medical care in our country.

Social Media was alive and well during the conference and EMSSA was proud to have 2 related Twitter accounts in the 10 Ten Influences by Mentions and 3 in the Top 10 by Tweets for #ICEM2014. This way of disseminating and sharing information during a conference has proven to be very successful and we will

be engaging in a very vibrant Social Media strategy for #ICEM2016.

The International Federation for Emergency Medicine held its AGM during the conference and EMSSA was well represented in current leadership positions in IFEM. Professor Lee Wallis (EMSSA past-president) was elected as President-elect of IFEM and will take up his presidency at the ICEM 2016 conference in Cape Town. Dr Melanie Stander (current EMSSA president) was elected onto the IFEM Board as the representative for Africa and she is the chair for a new IFEM Special Interest Group that will focus on gender-specific issues and disparities in Emergency Medicine.

We are looking forward to hosting the emergency medicine world in our own backyard when ICEM comes to Africa for the first time in April 2016.



smaccGOLD 2014

Dr Victoria Stephen (@drvictorias)

I attended the Smacc Gold conference on Emergency Medicine and Critical Care in March 2014. It was held on the Gold Coast, in Queensland, Australia. It wasn't just a conference, it was an experience. Here are a few reasons why South Africans in EM should be at SmaccUS in 2015:

It's Inspirational

South African Emergency Medicine as a specialty is only ten years old. We are definitely still in the "proving the benefit

of our existence "phase. At times, it can be downright discouraging as we face cynicism from other specialties. Any mistake we make is often highlighted. It is tempting to be on the defensive, ready to snap at the surgeon who won't take a patient over, or at the med reg who raises an eyebrow and says: " so you really think this is a STEMI? " Conversations with fellow registrars often revolved around complaining about how negatively we are often treated, and what's our future going to be like. Before heading out to Oz I knew attending smaccGOLD was going to leave me energised, motivated and inspired, and I just wished I could have brought all my colleagues along.

It has a lasting impact:

SmaccGOLD has certainly had a lasting effect on me. The same problems, difficulties and challenges of delivering emergency medicine in a resource limited, even austere environment remain, but my ability to cope with them has improved. My job satisfaction improved. I have a passion for EM again.

<u>It's an opportunity to meet amazing people:</u>

At previous conferences I have been to, one seldom meets more than a handful of new people. SmaccGold was a social explosion! Whether it was in the talks, over lunch, on the street, in the queue for cappuccinos, at the Gala Dinner, over a glass of wine or beer, or on the #smaccRun, one was able to meet passionate, intelligent, interesting, likeminded, warm and open minded people. I commend the Australians on being so welcoming,



For encouraging this ethos and for creating the fun, relaxed atmosphere for us to thrive in.

It was educational:

As you will soon see as the talks come out over podcasts, the talks were truly educational, cutting edge and practice changing. You know how after conferences you can feel even more confused about what's right for your patient, and what you should be doing? Where numbers and stats and tables are thrown around? Well, that didn't happen at Smacc. Controversies did exist, but you never felt bewildered and confused by the different opinions. The talks were practical, relevant and useful to our daily practice.

South African EM has a role to play:

South African Emergency medicine definitely has a role to play, especially in aiding the development of EM in the rest of Africa. It is a privilege to work in South African Emergency Medicine; we see incredibly interesting and challenging cases often on a daily basis. We have a mix of "First world" and "Third world" pathologies, sometimes in the same patient. We get to perform many critical procedures throughout our careers, and to be experts at them. However, it's also often challenging, frustrating and sometimes downright depressing as we struggle to deliver care to our patients in our resource constrained setting. I hope that the more South African EM physicians can attend SMACC, the more we can do for our patients at home and the more we can do for Emergency Medicine as a whole. We have benefited from FOAMed and can give a lot back to it too.

Finally the challenge:

I know the lack of South African EM represented at SmaccGOLD wasn't due to lack of interest but due to our dismal foreign exchange rate. It's really expensive to travel overseas for us. What can we do about it? Firstly SmaccUS is 6 months away, so there's lots of time to save. There's also sponsorship, if we are prepared to be proactive. Don't get me

wrong, you will get a huge amount from the podcasts alone; but being there in person is a different experience altogether.

Here's to South African EM, and to seeing more South African EM at SmaccUS!

IEMC 2014

Dr Steve Holt

I was invited to attend the 1st Intercontinental Emergency Medicine Congress held in Antalya, Turkey from the 15th – 19th of May 2014. Antalya is a small seaside resort town in Southern Turkey and the resort where the Congress was held was located a few kilometres outside the town. Antalya is a well known conference town and is located on the Mediterranean.



The conference was well attended by emergency medicine delegates from all over Europe. The biggest difficulty for me was the language as very little English was spoken, making it difficult to communicate with many of the delegates. That said there was a wonderful real time translation service that allowed you to listen to talks in your home language. I did meet up with interesting colleagues from Spain, Canada and Turkey and spent a lot of time discussing the commonalities of emergency medicine the world over. Interestingly Europe shares a lot of our problems and the opportunity and desire to collaborate is strong.



I delivered a talk on "Emergency Medicine Architecture – A South African Perspective" which was well received. I also chaired a session on Respiratory diseases. I think that EMSSA and South Africa have a lot to offer Europe on many aspects of emergency care and it would be good to see more SA delegates at the next IEMC.

The most interesting feature for me was the number of poster presentations and abstracts that were submitted. Some 1300 of these were presented at the congress and it highlights the degree of academia that is currently going on in Europe.



For a uniquely African perspective in EM, why not come to AfCEM in November? There are so many exciting developments in EM across Africa!

For more info:

www.afcem2014.com

TO GET YOU STARTED IN FOAMED...



Lifeinthefastlane.com

The original and the best! Tons of great cases, ECG library and a weekly literature round up that is invaluable in keeping up to date.



Aliem.com

Academic Life in EM, headed up by Michelle Lin – this is a great site that covers a range of clinical and non clinical topics, as well as a free resource of PV cards – fantastic short notes on common conditions and treatments.



Emcrit.org

A weekly podcast from Dr Scott Weingart about all things critical care and EM related. Great talks on critically ill patients – if you interested in resuscitation this one is a must!



Don't Forget The Bubbles

Dontforgetthebubbles.com

A blog run by Dr Tessa Davis focussing on peadiatric emergency care with clinical cases and great advice.



Using social media and free online resources (eg blogs) as educational tools is explained in the article below

What is FOAMed?

Dr Almero Oosthuizen

FOAMed is free open access medical education. It is also the future of how we will learn medicine and keep up to date in our respective fields. To understand why this is, we should look at how it came about.

The past few decades have brought massive changes to society. The primary drivers of these changes have been two fields of technology: communication and the internet. Easy, cheap and instant communication, and access to any information, anywhere, at any time has dramatically changed how we live, work and learn.

Traditionally, universities functioned as the creators (research), curators (libraries, experts) and disseminators of knowledge. Students were defined as people with access to universities, and educators as those with a university affiliation. This was great for people at university, but awful for those without access to it.

The group of people who would most obviously be disadvantaged by this status quo would be people without the money or opportunity to access good institutional education. But another important consequence was that it was very difficult for qualified professionals to stay up to date with the latest developments in their field. A young doctor working in a rural hospital simply does not have the time to go to university again every time he/she needs

to know something new. Life happens, and too often our lifelong journey of learning suffers.

But then, around the 1990's, as the internet and communication became easy, cheap and accessible, things started to change. Distance learning courses using email became the rule, rather than the exception,

and institutions slowly started using online formats to teach. This partly addressed the problem of access, but formal institutional education remained an exclusive club for those who could afford and access these new ways of teaching.

Enter social media and blogging. During the late 1990's and early 2000's, more and more university and non-university based educators started to share what they knew using blogs or social media platforms like Facebook and Twitter. One of the most prominent proponents

of the use of social media in medical education was (and remains) Dr Mike Cadogan, an Australian Emergency Physician and co-creator of the



fantastic site, Life In The Fast Lane.

Suddenly, it was possible for a medical student in Peru to take part in a twitter conversation with international experts, using a cheap computer in his home. Social media became the 'water cooler' of the EM world, with ideas and opinions flowing between experts, colleagues and students faster than ever before.

Soon, many excellent educators (some of whom had no formal university affiliation) started volunteering their time and expertise to set up websites with excellent, free educational material, available for anyone with an internet enabled device.

What is FOAMed?

The shift from social media only to social media and online hosting of fantastic, free educational resources got a name in 2012 when Mike Cadogan and a few friends coined the term FOAM (free open access meducation) over a pint of Guinness in a pub in Dublin during ICEM 2012.

Today, #FOAMed (free open access medical education) is a global network of teachers and students who create, host and share excellent educational content that is free to use, for anyone. landscape of education is fundamentally changing. It is now possible for a young community service doctor in the rural Northern Cape to access (and take part in!) conversations with the top experts in any field, to listen to or watch the best lectures or conferences, and to read the most up to date materials, all for free. Any device with internet access (like a smartphone) becomes a window into a world of knowledge.

For people wanting to use FOAMed, the task may seem daunting. What social media should I use? (Twitter). Which websites should I frequent? (LITFL, ALIEM) How does it work?

A great place to begin is with the people who started it all: Life in the Fast Lane. Head over to www.lifeinthefastlane.com/foam for a great primer on the future of learning using FOAM. Then get a Twitter account, and the (medical) world is your oyster. Once you start actively participating in the global network of people who make up the FOAMed community, you'll wonder how you ever learnt before: good luck!

GET IN TOUCH!

We would love to hear from you. Let us know about EM related activities in your hospital or academic institution, let us know about your upcoming conference or symposium, or let us know if you have questions regarding EMSSA and their activities throughout the year. Contact us via email or get in touch via twitter!

Melanie Stander (EMSSA president): melaniestander@sun.ac.za or @EMStander

Roger Dickerson: EMSSA Vice president: roger.dickerson@wits.ac.za or @rogerdickerson

Mande Toubkin: Secretary: mande.toubkin@netcare.co.za

Anne Smith: Communications and Membership annebsmith @gmail or @annestir



A-FULL ACCESS FOR EMSSA MEMBERS

Dr Anne Smith

This is reminder to all EMSSA members that through the EMSSA website you have exclusive access to the A-FULL library.

We all face the same challenges of staying up to date with new developments in EM and other fields of interest.

A-FULL is an AHC media product - a digital library which provides access to current and archived publications which cover a wide range of topics in emergency medical care and health care in general. See below for more detail:

Description and Benefits:

- Digital library that offers electronic access to all of AHC Media's current and archived publications from 1997 to current date (see attached sheet for titles and descriptions)
- ✓ Full access to all of AHC Media's healthcare-themed publications' content that keeps medical practitioners and management up to date on critical healthcare topics
- Saves your department money by allowing your facility access to all of AHC Media's publications versus ordering and paying for individual publications

How does A-FULL work?

After purchasing A-FULL, you and your library will receive the following benefits:

- On-line access in a searchable database, as well as data order format, to all AHC Media publications with archives dating back to 1997 (or since inception)
- Emailed PDFs of AHC Media's issues upon request
- Option to set up IP authentication that provides instant access for in-house computers
- ✓ Ability to set up a universal company login with a username and password of your choosing from any remote or personal computers or if IP authentication is not used
- Permission to post issues to your library portal

To access the A-FULL library: Go to www.emssa.org.za. On the left hand side, click on AHC Media: AFULL library. Log in with your unique EMSSA login and password. If you have forgotten your login or password, please email Mande Toubkin: secretary@emssa.org.za

EMSSA MEMBERS AT WORK AND PLAY



ICEM 2014

Dr Melanie Stander receives the IFEM banner at ICEM 2014 in preparation

for IFEM 2016 – to be held in our beautiful mother city, Cape Town.



First EMSSA awards ceremony

Dr Cleeve Robertson and Prof Lee Wallis were awarded the first 'Order of EMSSA'

awards for a lifetime of service to EMS in this country at EMSSA 2013.



Sonogames at EMSSA 2013

Team 'No Probe-lemo' take home the R5000 prize at the very first Sonogames

held at EMSSA 2013. Well done to Dr Lara Goldstein (@drlaragoldstein) and her team!

UPCOMING CONFERENCES

If the articles in this newsletter have inspired you to travel to an Emergency medicine conference, why not consider one of these? If you do attend, let us know about your experiences – you could find yourself writing for the next newsletter!

AFCEM 2014: Addis Ababa, Ethiopia: 4 -6 November <u>www.afcem2014.com</u>

EUSEM 2014 Amsterdam: 28 September – 1 October: www.eusem2014.org

EMSSA2014: Integrated Acute care Symposium held in conjunction with the Trauma Society of South Africa. Durban, South Africa: 15 – 16 November 2014. www.emssa2014.webs.com

ACEP Scientific Assembly 2014: Chicago, USA. 27 – 30 October 2014. www.acep.org/za

4th Eurasian Congress on Emergency medicine: Antalya, Turkey. 13 – 16 November 2014. <u>www.eacem2014.org</u>

Emirates Society of Emergency Medicine Scientific Conference: Dubai, UAE. 5 – 9 December 2014 <u>www.esem2014.com</u>

Society for Academic Emergency Medicine Annual Meeting: San Diego, USA. 12 – 15 May 2015. <u>www.saem.org</u>

SMACC Chicago: Chicago, USA. 23 – 26 June 2015. www.smacc.net.au

CAEP 2015: Edmonton, Canada. 30 May – 3 June 2015. <u>www.caep.ca</u>

ICEM 2016, Cape Town South Africa. 18 – 21 April 2016

EMSSA special interest groups

Within the larger body of EMSSA, there are several special interest groups and one sub group which are focused on specific aspects of emergency care.

PECSA, or Peadiatric emergency care South Africa, is headed up by Dr Baljit Cheema, our only peadiatric emergency medicine specialist. This group works to ensure that emergency care for children in SA is up to standard and that children are treated appropriately and timeously at emergency centres around South Africa.

The Triage special interest group works to train and educate emergency care practitioners about Triage - both practical training and research into triage methods. This group are headed by Dr Michele Twomey and have recently produced an app version of the South African Triage Score that is available as a free download on the Play store and the iStore (search SATS TOMPSA).

The Ultrasound special interest group is headed by Dr Mike Wells from Johannesburg. Level one Emergency Point of Care Ultrasound (POCUS) courses are run twice a year by EMSSA and so far over 1000 people have been trained in Emergency Ultrasound.

ARREST is a group specifically concerned with resuscitation and the management of critically ill patients. Headed up by Dr Martin Botha, this small group continues to provide support and educational resources to those interested in resuscitation.

Emergency centre nursing staff are the backbone of any well run Emergency Centre and in South Africa we are priveliged to have some of the most experienced emergency nurses in the world. Tanya Heyns heads up ENSSA, the Emergency Nurses Society of South Africa, a sub group which focuses on CME activities and educational resources specifically for nurses interested in Emergency care.

If you would like to get involved or find out more about any of these subgroups, please email the relevant people below:

PECSA: baljit21@gmail.com

TRIAGE: Michele@emssa.org.za

ARREST: mbotha@vodamail.co.za

ULTRASOUND: mike@casualty.co.za

ENSSA: Tanya.heyns@up.ac.za



Dr Stander and Prof Dickerson meeting one of the greats in Emergency Medicine: Prof Judith Tintanelli. They were invited to the first Global Emergency Medicine Meeting in China (GEMM 2014), which afforded an opportunity to access to the knowledge and expertise of global experts in emergency medicine.

. "We are truly grateful for the opportunity and humbled by the invitation, " said Melanie. Roger's cheesy grin in this picture on meeting one of his professional heroes says more than words ever could.