

GUEST EDITORIAL

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Professor Steve Reid is a family physician and rural doctor, founding member of Rudasa, and medical academic now based at UCT. He is also a musician and a cyclist, is married to Dr Janet Giddy and has 4 children. He is interested and involved in medical education for rural practice, human resources for health, community-oriented primary care and the development of an appropriate model of family medicine in Africa.

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In August 2010, the annual conference of the Rural Doctors Association of Southern Africa (Rudasa) was held for the first time outside of South Africa, in Swaziland. The articles in this edition of *CME* are based on presentations made at that conference.

Rudasa was formed in 1997 and aims to inspire others towards rural health. It strives for the adequate staffing of rural health services by appropriately skilled medical staff and to be a voice for the rural doctor regarding training and working conditions. The annual conference has grown in attendance as well as in the quality of the presentations, and this was the 14th such meeting. Held at the Royal Villas, Ezulwini Valley, Swaziland, it was jointly organised by Rudasa and Médecins sans Frontières, with the theme 'Inspiration without borders'. The positive spirit and inspirational values of the rural doctors collectively are tangible at a meeting such as this, as delegates exchanged stories and perspectives from dozens of isolated locations, 'from Tristan da Cunha, to Taung, to Mqanduli, to Ingwavuma, to Siteki'. Largely out of sight and out of mind of the rest of the world, the work of rural health is based on the commitment and social responsibility of countless health workers in these rural hospitals and clinics, whose stories are seldom told. And so this edition brings to a wider audience something of the special spirit of rural health in southern Africa, for those who were unable to attend the conference.

Bernhard Gaede and Neil McKerrow examine the consultant visit in some detail, and propose a model that has been working well in KwaZulu-Natal for some years. Jenny Nash uses her experience in providing antiretroviral therapy to patients in rural areas to highlight the key issues in chronic care, Kevin Makadzange and Bethabile Dolamo report the findings of an interesting qualitative study of the care of HIV orphans by elderly women in Swaziland, and Steven Miller gives useful tips for hand injuries. I have put forward the arguments for rural medicine as a specialty in its own right, which is sure to make some waves in the family medicine community. The concept of social entrepreneurship inspired Will Mapham and Saul Kornik's audience to persuade them to write their address down. Finally, from Swaziland itself, Thea Litschka-Koen and David Williams contribute a useful description of snakebite antivenoms, and Jonathan Pons gives very practical information for dealing with trauma to the eyes. Although most of these topics are not exclusive to rural areas, they are practical and totally appropriate to our diverse practice: 'any patient, with any problem, anytime and anywhere'.

Enjoy your reading!



Part of the Wild Coast patient catchment area for Zithulele and Madwaleni Hospitals, the former whose dedicated team have turned it into a widely acknowledged – but unofficial – best rural practice model. Picture: Ben Gaunt.