



MINISTRY
HEALTH
REPUBLIC OF SOUTH AFRICA

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Gauteng GP Collaboration- Engagement with Doctors and Health Professionals

Notes from Minister Dr. Zwelini Mkhize's Remarks

24 August 2020

The Moderator: Dr Dan Isreal

My Fellow Panelists

- **Prof Salim Abdool Karrim**
- **Prof Guy Richards**
- **Dr. David Jankelow**

My Fellow Colleagues in Health Care

Members of the Media

Thank you very much for the invitation to address my fellow colleagues and troops who have taken up arms in one of the greatest wars of our area- the battle with the unseen enemy- Coronavirus.

In a strange way, the COVID-19 crisis a kind of battle that has activated us not only through pain and anxiety but has bound us together not only in the spirit of love, but it has also made us more humane, more caring and brought up a sense of solidarity where we support each other and show empathy.

Today is about you, the frontline health care worker. The ones in the trenches who hold the human face and render the human touch to all the policies, regulations, science and academic research that has flooded the health service delivery space as we were confronted with

a virus for which we had no precedent and no formula. And so we had to learn as we traversed the path. No one had enough knowledge of this so we are all in this together as we navigate our pathway through uncharted territory

After all is said and done, it is the doctor who must look and speak with the patients, who must make a decision and broker trust as he gives the diagnosis and recommends the treatment pathway. It is the doctor that must examine, test, probe, reassess, worry and dedicate his abilities towards the management of life. This is important for us because it's the doctor must do this whilst having to grapple with his or her own uncertainties, rapidly evolving evidence, patient and community fear and anxiety and the added emotional burden of constantly worrying about one's own safety as well.

We appreciate the uncertainty under which you are working and the frustrations you face due to fear of knowing every time that the next patient could be the one that infects you and not knowing how your own body will respond to the virus.

Tonight I am here to talk with all of you and hear your thoughts, fears, aspirations and innovations. I am here to celebrate the health professional and to salute you all for the sheer tenacity and resilience you have portrayed that has positioned us as leaders in the global COVID-19 response.

This battle has not been without its casualties- over 27 000 of our colleagues have become infected with the virus and tragically it has robbed us of 240 of our talented health care workers. We mourn every soul lost to this enemy. It is our duty to honour their sacrifice by committing fully to the safety and wellbeing of our health care workers. This is currently a critical issue of contemporary interest as I am sure you have all seen some of the labour unrest in the media environment. For our part as government, no matter what happens, we will continue to endeavour to engage with structures representing health care workers as we seek to create a new culture of mutual understanding and respect.

In the best interest of our patients, it is imperative that we find one another as government and labour engage and robustly on the issues that are causing concerns for health care workers.

I have recently had serious engagements with a number of trade unions and I have said if there is any health worker that raises matters of safety, it must be taken seriously. The only way of knowing that the matter is resolved is when structures representing government and labour jointly verify the situation health care worker safety and ensure satisfactory resolutions. We have adopted the slogan: NO PPE, NO WORK.

On a personal note, I must express my deep appreciation to all health workers who have really been the most able champions in this fight. Your passion, commitment, diligence and love for science has not only made my job as Minister of Health so rewarding, but it has truly

been the highlight of my career to partner and learn from my esteemed colleagues in health care as I have observed South African expertise pushed to it's absolute cutting edge.

When everybody asked us what keeps us going it is the sheer courage and dedication of our health care workers despite all the difficult circumstances

Your messages of support, encouragement and optimism, even when we were in our darkest ours of the surge, gave me energy to keep going everyday, with the full knowledge and comfort of your backing.

Now, as we experience a trough in our epidemic, let us not relent or fall into the trap of complacency but rather ride the momentum so we can keep a flat curve and ensure our facilities, and yourselves, do not become overwhelmed.

We have now started to dismantle some of the field hospitals as we have concluded field hospital beds are no longer necessary and now we shift our focus to facility refurbishment and oxygen reticulation. We are also engaged in discussion to foster goo co-operation between private and public sectors. This discussion needs to continue as we have learnt through this pandemic is that we are all health service providers and the future will be much better for all South Africans if we continue to operate as a united front.

Moreover, let us use this crisis to advance the cause of Universal Health Coverage through the National Health Insurance. As we are unified now against COVID-19, let us not allow a disintegration of this fraternal cohesion that has been forged between clinicians, scientists, academics and government. It has been this commitment to collaborating together, public and private sectors, that has ultimately given hope to our people.

At this point if I may give an update on where we are with the latest numbers:

Province	Total cases for 24 August 2020	Percentage total
Eastern Cape	85240	14,0
Free State	35367	5,7
Gauteng	206525	33,8
KwaZulu-Natal	110102	18,0
Limpopo	12643	2,1
Mpumalanga	23163	3,8
North West	24371	4,0
Northern Cape	9322	1,5
Western Cape	104667	17,2
Unknown	50	0,0
Total	611450	100,0

As of today, a cumulative total of **611 450** confirmed COVID-19 cases in South Africa have been recorded with 1 677 new cases identified.

Testing Data

The total number of tests conducted to date is **3 564 065** with **10 640** new tests conducted since the last report

Sector	Total tested		New tested	
Private	2 013 886	57%	5 389	51%
Public	1 550 179	43%	5 251	49%
Total	3 564 065		10 640	

Total Deaths and Recoveries

Regrettably, we report **100** more COVID-19 related deaths: 14 from KwaZulu-Natal, 36 in Mpumalanga, 12 from Gauteng, 8 from Limpopo, 11 from Eastern Cape and 19 from Western Cape. This brings the total number of COVID-19 related deaths to **13 159**.

We extend our condolences to the loved ones of the departed and thank the health care workers that treated the deceased patients.

Province	Total Deaths	Total Recoveries
Eastern Cape	2800	80614
Free State	567	20678
Gauteng	3280	174248
KwaZulu-Natal	1962	92342
Limpopo	179	10661
Mpumalanga	296	21049
North West	224	17008
Northern Cape	106	6106
Western Cape	3745	93788
Total	13 159	516 494

Our recoveries now stand at **516 494**, which translates to a recovery rate of 84%

Antibody Testing

Today I am pleased to announce that the Director General for Health has issued guidelines for the use of SARS CoV 2 antibody tests and that SAHPRA announced its approval of several test kits, both lab based and point of care or bedside rapid tests.

I am sure this is a very welcome development and I would like to especially thank the Ministerial Advisory Committee on COVID-19 and the various members of the strategic management bodies in the department of health for all the hard work that has gone into ensuring that antibody tests are used appropriately and effectively as we continue to battle COVID-19

It will be important to understand the limitations of antibody testing. These include the following considerations:

- Antibodies are usually detected more than 10 days after onset of symptoms or even only during convalescence (recovery).
- A negative antibody test result does not reliably rule out prior SARS-CoV-2 infection. For instance, someone may not generate the antibodies or high enough titres for antibodies to be detected.
- A positive antibody test result does not reliably prove prior SARS-CoV-2 infection. There is known cross-reactivity with other viruses and there may be antibodies already existing in someone's system that look like COVID-19 antibodies.
- The detection of antibodies does not necessarily mean one is immune

For these and other reasons, the Department of Health has recommended the following use for antibody tests in the guidelines

- Diagnosis of COVID-19-associated multi-system inflammatory syndrome in children (in these children the PCR test can produce false negative results)
- To retrospectively diagnose COVID-19 individuals with occupational exposure to SARS-CoV-2 who have recovered from a COVID-19 compatible illness.
- Use of SARS-CoV-2-specific IgG antibodies for epidemiological purposes, that is to identify and track the transmission of certain geographical areas or populations- this will be a particularly useful application that will complement our surveillance strategies.
- Use of SARS-CoV-2-specific IgG, IgM and/or IgA antibodies as part of scientific studies and clinical trials

END