

The CPD programme for SAMJ is administered by Medical Practice Consulting.
CPD questionnaires must be completed online at www.mpconsulting.co.za.

True (A) or false (B):

SAMJ

Mortality analysis of people with severe mental illness transferred from long-stay hospital to alternative care in the Life Esidimeni tragedy

1. There is an association between severe mental illness and mortality, which is not commonly recognised.
2. The burden of disease due to mental illness is most commonly due to disability.

Neonatal listeriosis during a countrywide epidemic in South Africa (SA): A tertiary hospital's experience

3. *Listeria monocytogenes* (LM) is a food-borne pathogen that causes a range of clinical syndromes including self-limiting gastroenteritis, bacteraemia and central nervous system disease.
4. In immunocompetent hosts, the disease profile is usually mild and self-limiting.

Appendicectomy in private practice in KwaZulu-Natal Province, SA

5. Acute appendicitis is a common surgical disease that should have minimal morbidity if diagnosed early and treated appropriately.
6. Disparities in outcome [for this procedure] between different patient cohorts are unlikely to represent differences in the quality of healthcare available to these groups.

Preoperative serum sodium measurements and postoperative inpatient mortality: A case-control analysis of data from the South African Surgical Outcomes Study

7. An estimated 40% of non-cardiac surgical patients in the European Surgical Outcomes Study (EuSOS) were reported to have had an abnormal preoperative sodium measurement.
8. Studies suggest that not only is dysnatraemia common in hospitalised patients, but it is also independently associated with poor outcomes.

Retrospective case-series analysis of haematological malignancies in goldmining areas of SA

9. SA has high levels of environmental contamination of mine tailings from uranium and its decay products.
10. Distances between mine tailings and residential areas are no cause for concern.

CME

Acute severe headaches in pregnancy are a 'red flag':

A review based on case reports and key messages for healthcare practitioners

11. Of headaches in late pregnancy, 50 - 79% have a primary benign cause.
12. Persistent headache in pregnancy is a 'red flag' and warrants a neurological opinion.
13. Headache is only present in 56% of patients with eclampsia.
14. Severe headache in the third trimester, associated with other signs such as vomiting and visual disturbance, may be associated with pre-eclampsia.
15. New onset of headache in the third trimester of pregnancy or atypical headache at any stage of pregnancy should alert a health professional to the likelihood of a secondary cause.

Spontaneous liver haematoma rupture associated with pre-eclampsia in a low- to middle-income country: Lessons to be learnt from maternal death assessments

16. Spontaneous hepatic rupture is usually associated with severe pre-eclampsia and/or with haemolysis, elevated liver enzymes and low platelet count (HELLP) syndrome.
17. Diagnosis is suspected based on symptoms such as epigastric pain, right upper-quadrant abdominal pain and nausea and vomiting in patients with pre-eclampsia and/or HELLP syndrome.
18. In a haemodynamically stable patient with suggestive symptoms, ultrasound and/or a computed tomography scan can be used to confirm the diagnosis.
19. Tenderness or a mass in the liver area in a haemodynamically stable patient is suggestive of liver haematoma.
20. Diagnosis in a haemodynamically unstable patient with abdominal pain is usually made on laparotomy.

Readers please note: Articles may appear in summary/abstract form in the print edition of the Journal, with the full article available online at www.samj.org.za

A maximum of 3 CEUs will be awarded per correctly completed test.

INSTRUCTIONS

1. Read the journal. All the answers will be found there, in print or online.
2. Go to www.mpconsulting.co.za to answer the questions.

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