



# 1<sup>ST</sup> EDITION NEWSLETTER 2023

## WHO CAN BE A DEPENDANT ON YOUR MEMBERSHIP?

If you are the main member of Engen Medical Benefit Fund, you can add dependants to your membership. You can add children or adults to your membership as long as they meet certain criteria. Let's delve deeper into who you can add to your membership.

### You can add your children who are under the age of 21

The children you can add to your membership include both biological and adopted children.

### How long can your child dependant stay on your membership?

When your child is a student and 21 years or older, may stay on as a **child dependant** up to their 25th birthday, if they meet certain criteria.

You must send us proof:

- That your child is a registered student
- Of income for dependants who are 21 to 25 years old

### What happens when your child is older than 21 years and financially dependant on you?

When a child is aged between 21 to and 25 years old, they are no longer seen as a child dependant. They may then remain on your membership if they meet certain criteria and, if they qualify, they will now pay an **adult dependant** contribution.

You must send us the child's:

- Affidavit confirming financial dependency
- Proof of income.

### You can add your spouse or life partner

When you apply to add your spouse or partner to your membership, you would have to add some supporting documents to your application. The most important documents would be your marriage certificate to add your spouse, and an affidavit confirming your relationship if you're adding your partner.

### You can also add your parents to your membership

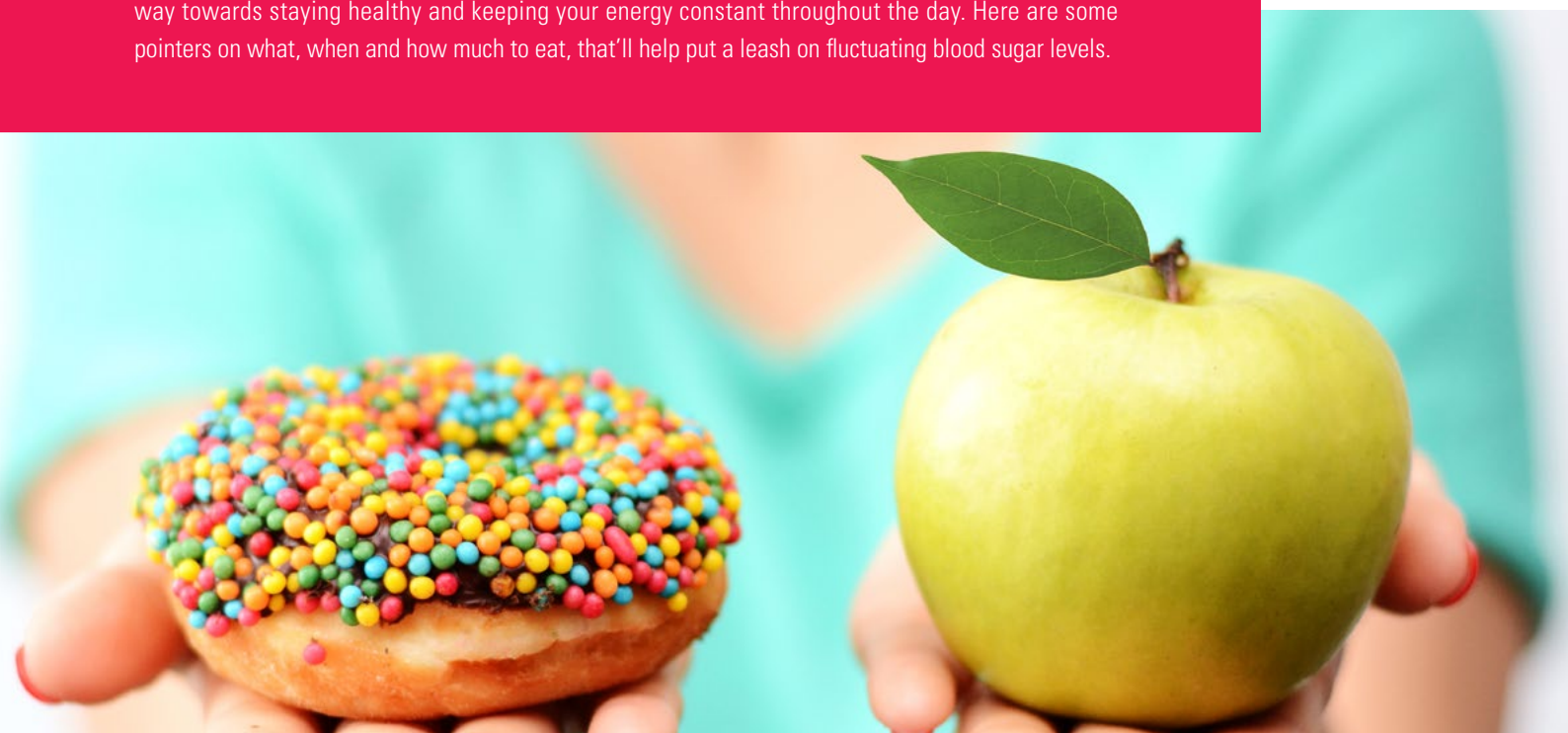
Adding your parents to your membership can be done if you're able to prove that they are financially dependent on you.

### Other family members

As with many other dependants you can add to your membership you would need to prove that your family members are financially dependent on you. These include grandchildren and siblings of the main member.

# TAKE CONTROL OF YOUR BLOOD SUGAR LEVELS WITH A HEALTHY EATING PLAN

If you a person living with diabetes or are diagnosed as being pre-diabetic, eating right can go a long way towards staying healthy and keeping your energy constant throughout the day. Here are some pointers on what, when and how much to eat, that'll help put a leash on fluctuating blood sugar levels.



Did you know that not smoking, following a balanced diet, and maintaining a healthy weight reduces risk of diabetes by 90%? That's a hefty percentage - and shows how far implementing healthy lifestyle habits can go to help you manage your condition.

As you likely already know, there are two types of diabetes:

- In type 1 diabetes, the body directly attacks insulin-producing cells.
- In type 2, the body's tissues gradually become less sensitive to insulin. This causes beta cells in the pancreas to work harder and eventually break down.

Type 1 diabetes affects about 5% to 10% of the population with diabetes, but most people with this condition have type 2 diabetes. While type 2 diabetes is also genetic, it's often triggered by lifestyle factors, making it preventable. In particular, if a person is inactive or overweight, the pancreas battles to produce enough insulin to control rising blood sugar levels.

## Three components that affect blood sugar levels

There are three basic nutrition components that affect blood glucose levels:

1. **The types of foods we eat and what we drink:** High-fibre foods with a low glycaemic index (GI), such as whole grains, fresh fruit and vegetables, should make up the bulk of your diet. A quarter of your plate should be filled with whole grains, a quarter with lean proteins and half with a variety of vegetables. At least five portions of fruit and vegetables are recommended daily.
2. **The timing of meals and snacks:** Three meals a day with snacks in between is the best way to keep blood glucose (sugar) levels steady.
3. **The quantities consumed:** Portion sizes depend on a person's weight, activity levels, the type of medication used, gender, age, and level of glycaemic control (blood sugar control). A dietitian can calculate a practical, nutritionally balanced eating plan for you by considering all these factors.

## Losing weight can help manage rising sugar levels

Having a healthy eating plan is especially important, as being overweight is a major risk factor for developing type 2 diabetes. The World Health Organization defines these body mass index (BMI) ranges for adults:

- Healthy weight a BMI of 18.5 to 24.9
- Overweight is a BMI greater than or equal to 25 to 29.9
- Obesity is a BMI of 30 or higher

The main cause of obesity and being overweight is an energy imbalance between the kilojoules consumed and kilojoules spent – so, to lose weight, you need to stay active and use up more kilojoules than you consume. It's well worth the effort: Studies show that losing just 7% of your body weight can increase insulin sensitivity by 57%!

But not all diabetes cases are linked to weight. As mentioned earlier, genetics also comes into play. If you have family members who live with diabetes, you are at higher risk. For them, even two or three extra kilograms of body weight can start a dangerous cycle leading to the disease. This makes weight loss (or maintenance when the ideal weight is reached) an important goal for those with type 2 diabetes.

## Getting your sugar intake down can work wonders

Globally, there has been an increased intake of fizzy drinks and fruit juice. These drinks are energy-dense (high in kilojoules) and low in nutrition, so it's easy to have too much. This is dangerous to your health, because a 330 ml can of carbonated, sweetened soft drink contains about 40 g of sugar, and the same size container of sweetened fruit juice close to 45 g of sugar!

A review of research published in the journal *Diabetes Care* indicated that people who had one to two servings of soft drinks a day had a 26% greater risk of developing type 2 diabetes than those who had no soft drinks or less than one a month.

So – less sugar, smaller portions and healthy meals at well-timed intervals all play a part in maintaining steady blood glucose levels. Managing diabetes takes more than measuring your blood glucose; the condition comes with many challenges. To make sure you can meet these challenges, the Fund offers a Diabetes Care Programme. This programme gives members with diabetes who join the programme more benefits and tools than only registering for diabetes on the Chronic Illness Benefit.

## The Diabetes Care Programme

The Diabetes Care Programme, together with your Premier Plus doctor, will help you actively manage your diabetes. The programme gives you and your Premier Plus doctor access to various tools to monitor and manage your condition, and to ensure you get high-quality coordinated healthcare for the best outcomes.

You and your doctor can track progress on a personalised dashboard, displaying your unique Diabetes Management Score. This will help to identify the steps you should take to manage your condition and stay healthy over time. The programme also unlocks cover for valuable healthcare services from healthcare providers like dietitians and biokineticists.

## How to register on the Diabetes Care Programme

If you are registered on the Chronic Illness Benefit for diabetes, you can join the Diabetes Care Programme.

To access the [Diabetes Care Programme](#):

- Book a consultation with your Premier Plus doctor, and ask to be registered on the programme. Access the [Find a Provider tool](#) on [www.engenmed.co.za](http://www.engenmed.co.za) to find a Premier Plus doctor in your area.
- Email [Members\\_DCP@engenmed.co.za](mailto:Members_DCP@engenmed.co.za) with 'Register me' in the subject line. Please remember to include your name, surname, and membership number in the body of the email.

Call us directly 0860 444 439 to speak to one of our care navigators.

# DAY SURGERY PROCEDURES

Treatment and care for a procedure included in this [list](#) must be received as a day surgery procedure. To ensure the Fund will cover the cost of the procedure without a co-payment, you must use a provider or facility in the Fund's Network of Day Surgery providers. You can find the nearest provider to you on the website, by using the MaPS tool.

We apply a clinical exceptions process to all complex cases, or procedures that might require an extended stay at the facility. Where necessary, we will transfer you to the appropriate facility.

You will have to pay a deductible of R6 300 to the facility if you use a facility that is not on the Day Surgery Network to undergo one of the listed procedures.



# CELEBRATING MORE THAN 200 YEARS OF VACCINES

African Vaccination Week takes place from 24 to 30 April; we look back at the history of vaccines and how they have protected against several life-threatening diseases.

The first official vaccine was developed more than 200 years ago, in 1796, by British physician Edward Jenner. He used cowpox material to create immunity to smallpox. The vaccine changed over the years, and eventually led to the eradication of smallpox.

However, there is evidence that the Chinese may have used a smallpox inoculation more than 1,000 years ago. Since then, several vaccines have been developed, including ones for rabies, diphtheria and tetanus.

## Many severe diseases wiped out by vaccines

Dr Noluthando Nematswerani, Head of the Centre for Clinical Excellence at Discovery Health, points out that many serious conditions, such as smallpox, polio, and whooping cough, have been largely eradicated because of vaccines.

“My brother was born with polio 50 years ago. We saw many children with polio in Mthatha, where I grew up. They wore orthopaedic shoes, had one limb shorter than the other, or used callipers to stand upright, because their muscles were weak,” she says.

“We don’t see devastation from diseases such as polio anymore because they’ve been almost eradicated by vaccines. These days, when we do see an outbreak of diseases such as measles, it usually comes from unvaccinated children.”

## Important vaccinations for childhood and beyond

Vaccines play an important role in protecting people from getting seriously ill or dying from infectious diseases. Most of these vaccines are given during infancy and childhood.

South Africa’s Department of Health’s expanded programme on immunisation (EPI) has a schedule of the vaccines that children should have from birth until the age of 12. Some of the diseases these vaccines protect against are polio, rotavirus, diphtheria, tetanus, hepatitis B and measles.

Dr Nematswerani advocates for children to get vaccinated in line with the EPI schedule. "Childhood vaccinations are so important because they protect our children from infectious diseases and give them the best chance to live a healthy life," she says.

She also recommends that the human papillomavirus (HPV) vaccine is given to young girls to reduce their risk of getting cervical cancer.

Pneumococcal vaccines, which reduce the chances of getting pneumonia and certain other respiratory infections, are given to babies and the elderly. These two groups are particularly vulnerable to becoming severely sick from these respiratory illnesses.

Other vaccines that Dr Nematswerani recommends are the herpes zoster vaccine, which protects against shingles in the elderly, and travel vaccines such as yellow fever for people who are travelling to high-risk countries.

### Is it a cold, the flu or COVID-19?

This is a question that runs through our heads these days the moment we have a sore throat, cough or runny nose.

Flu season is around the corner. And it's highly likely that this year's season will coincide with another wave of COVID-19 infection. This makes it difficult to know what's making us sick, because the symptoms of colds, the flu and COVID-19 are so similar.

And, while many people feel a bit 'vaccinated-out', there's no denying that the flu vaccine saves lives. It is especially important for children, the elderly, pregnant women, and people with chronic conditions.

"There's data to show that once people with underlying chronic conditions are immunised against the flu, their outcomes are much better than those who are not immunised," says Dr Nematswerani.

## Deadly flu kills 11,000 people in South Africa each year

Flu season hasn't been particularly bad in the past two years. This is because COVID-19 lockdown restrictions helped prevent the spread of viruses. However, Dr Nematswerani cautions that lab reports from January 2023, show an increase in respiratory illnesses and common cold viruses.

"These infections are returning to pre-COVID-19 levels, which means that this flu season could see a notable number of infections, and we need to prepare for that," she says.

Although the flu took a backseat during the height of the COVID-19 pandemic, Dr Nematswerani warns that it is still a potentially fatal illness. "Before COVID-19, we were losing around 11,000 people in South Africa to the flu every winter. Globally, just over half a million people were dying from flu-related complications each year."

### Get vaccinated against the flu and COVID-19 at the same time

The flu vaccine is the best way to prevent serious illness from the flu. [The National Institute for Communicable Diseases \(NICD\)](#) explains that the influenza virus changes constantly, which is why a new vaccination is made available each year.

The vaccine offers protection two to three weeks after you get it, so it's best to get your shot in March or April, well before the flu season starts. However, the NICD notes that it is never too late to vaccinate.

People with certain chronic conditions are at higher risk of becoming very sick from the flu, and Dr Nematswerani points out that they should prioritise getting the flu vaccine. This includes people with diabetes and those with kidney, heart, and lung diseases. The flu vaccine will also protect pregnant women and their unborn babies from serious flu. The babies will benefit from the antibodies passed to them from their mothers. Babies can get the flu vaccine when they are six months old.

She also encourages everyone who qualifies to get vaccinated for both the flu and COVID-19 to do so, to avoid getting seriously ill over winter.

"The good thing is that the flu and COVID-19 vaccinations can be taken at the same time, just in different arms," she says. This means that those who still need to be vaccinated against COVID-19, or get their booster shot, can do so at the same time they get their flu vaccination.

