

## NEWS

### ITANA 2002 CONGRESS

*By Professor D Labadarios, President*

The conference, the first of its kind in Africa, recently took place at the Intercontinental Hotel in Nairobi. A total of 291 participants were registered from 38 African countries, seven European countries as well as delegates from Australia, Bangladesh, Canada, Iran and the USA.

The programme comprised 32

plenary lectures, 21 workshops (coverage including various IT and web-based applications) and 60 poster presentations.

The conference was opened by the President of Kenya, Daniel Arap Moi and Mrs Kofi Annan sent a welcome address to the delegates.

The proceedings of the conference are available at [www.itana2002.org](http://www.itana2002.org). The plenary, oral presentation and poster abstracts were published in the July issue of the SAJCN.



*The newly elected ITANA Council comprises (l-r): Dr Judith Waudo (Kenya); Ms Fatima Ouattara (Vice President, Mali); Dr Moussa Ouedraogo (Burkina Faso); Ms Chrissie Chuwanje (Malawi); Professor Demetre Labadarios (President, South Africa); Ms Mofor Teugwa (Cameroon); Professor Prisca Tuitoek (Treasurer, Kenya); Dr Delana Adelekan (Secretary, Nigeria) and Mr Ridha Mokni (Tunisia).*

### CPD NEWS

*By Renée Blauw and Debbi Marais, CPD Committee*

The committee expressed thanks for participants' patience during financial changes to the CPD system. The payment of the once off yearly handling/administrative fee should considerably streamline management.

#### Payment of CPD fees

The CPD office received about R2 000 that cannot be traced to payees. This occurred because about 17 practitioners made payments without providing details to the CPD office or gave the wrong DT number. They are requested to contact Mrs E Wentzel-Viljoen at (082) 379 0023.

In future, practitioners are requested to fax proof of payment to the CPD office at (053) 433 1192. It is essential to indicate the invoice number as the reference number on the bank deposit slip when making payments.

#### Cross accreditation

The HPCSA recently approved the principle of cross-accreditation so that professionals could earn points through multi-disciplinary CPD activities. The Dietetics Accreditor will acknowledge the same number of CPD points awarded at any medical-accredited event (or through a journal programme). Participants should ensure that they receive a certificate of attendance with relevant accreditation and registration DT numbers.

#### ADSA cross-accreditation guidelines

- The dietician needs to forward the relevant information to the ADSA CPD office after attending any activity accredited for another health profession (to be received within two months). This includes a completed Form CPD3-DT with the attendance certificate and DT number.
- The application will not be reassessed and a new number will not be allocated. Points will be used as such in the same category as indicated on the attendance certificate.
- No direct feedback will be given to show application receipt. It will be reflected on the yearly point update.
- Point allocation may differ between various accreditors. Those allocated by the primary accreditor will be the final accepted points.

#### Quality of activities

The Dietetics Accreditor and CPD committee strive to accredit activities that are directly related to dietetics/nutrition, beyond entry level, applicable and implementable. They do however depend on the information submitted by activity providers as indicated in the guidelines. These expect all providers to ensure scientific accuracy and monitor attendance.

#### CPD management offers

Several firms now offer the management of CPD portfolios for a fee. The Professional Board's CPD Committee has neither approved nor condoned any such initiatives, but practitioners are free to use any of these services.

#### Free internet CPD points

- [www.sun.ac.za/nicus](http://www.sun.ac.za/nicus)
- [www.nnia.co.za](http://www.nnia.co.za)
- [www.allergyadvisor.com/Educational/index.html](http://www.allergyadvisor.com/Educational/index.html)

### SA GLYCAEMIC INDEX

*By Gabi Steenkamp and Liesbet Delport*

This glycaemic index (GI) guide has been published by GIFSA (Glycaemic Index Foundation of South Africa) as a computer CD and soft cover reference book.

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The contents of the GIFSA Guide include a short chapter explaining the GI concept including methods of GI determinations; a brief section on how to use the GI concept in practices; and four Glycaemic Index lists of foods commonly consumed in South Africa. The latter four lists include a bar graph representation; foods listed in order of GI; professional alphabetical, and foods listed in the low, intermediate and high GI categories.

Further information is obtainable from Gabi Steenkamp, GIFSA Gauteng Manager, 15 Wayne Ave, PO Box 1394, Randpark Ridge, 2156. Fax: (011) 476 3261, cell: (082) 774 3555, email: [gabist@mweb.co.za](mailto:gabist@mweb.co.za). Alternatively, visit the website at [www.giffoundation.com](http://www.giffoundation.com).

### IMPROVING GLOBAL FOOD STANDARDS

The Food and Agriculture Organisation (FAO) and the World Health Organisation (WHO) recently launched their first joint evaluation of the international food code, including the *Codex Alimentarius*, and its standard-setting mechanisms.

The world has changed dramatically since the *Codex Alimentarius* Commission was established 40 years ago. Public concern over food safety issues is now widespread. The World Trade Organisation has also recognised Codex standards as the reference point for trade in foodstuffs.

'In both developed and developing countries, the number and variety of food safety threats are on the increase. We need to ensure that international food standard work responds to the challenges, and we therefore welcome this timely review,' said Dr Gro Harlem Brundtland, WHO Director-General. Dr Jacques Diouf, FAO's Director-General, said 'every day food safety and quality issues vary dramatically from country to country. National capabilities to use and apply food standards must be enhanced if global food safety is ever to be realised. I am pleased that this timely evaluation will be looking at the wider aspects of

applying food standards at a practical level.'

Evaluation of the FAO/WHO food standards programme is being carried out by an independent evaluation team and a panel of experts.

The evaluation process began in April 2002 and is scheduled for completion in early 2003. The final report will include recommendations for consideration by the governing bodies of both FAO and WHO.

To produce the report, the evaluation team will conduct the widest possible consultations with member countries and other stakeholders. In addition to a formal questionnaire distributed through official channels, the evaluation process will include country visits, in-depth interviews, literature reviews, etc. The organisations have requested public comment.

### ACRYLAMIDE IN FOOD

The Swedish National Food Authority recently published the first report conclusively showing that acrylamide, a known carcinogen in animals, is present in high levels in some starch-based foods cooked at high temperatures.

Since then, the British and Norwegian national food agencies have published similar findings. However, the limited data available do not provide an adequately full picture regarding the formation of acrylamide in food or of the consequences to human health.

Therefore, WHO and the FAO have called an expert consultation to examine the state of the evidence and make recommendations to consumers and researchers in the area. About 27 experts, including scientists, doctors and public health specialists from around the world will form part of the consultation.

### TEXAS CONGRESS

Join A.S.P.E.N. for its 27th annual clinical congress in San Antonio, Texas, during Nutrition Week, 18-22 January 2003. More details available at [www.nutritioncare.org](http://www.nutritioncare.org).

### ONE JOINT JOURNAL FOR NUTRITION COMMUNITY

The *SAJCN* is now the official journal of SASPEN, ADSA and the NSSA. The signing of the joint agreement took place recently at Tygerberg, University of Stellenbosch. This historic event will undoubtedly contribute to the further development of the journal, which has served sections of the nutrition community since 1988. It enlarges the journal's scope and membership and will serve the entire SA nutrition community.



Signing the agreement were (from l-r): Professor Demetre Labadarios (Editor); Mrs Janicke Visser (Editorial Assistant); Mrs Liesbet Koornhof (ADSA); Professor Trevor Winter (SASPEN) and Dr Ali Dhansay (NSSA).

# SAJCN

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**CHRISTOPHER  
PENNINGTON**

The world of clinical nutrition will be greatly saddened to learn of the recent death of Chris Pennington.

Chris was born in 1946, the only son of a Welsh Methodist minister and grew up in Wales.

He studied medicine at the University of Manchester graduating in 1970, followed by an MD in 1977. In the interim, he gained his MRCP (UK) in 1972. He became an FRCP (Edinburgh) in 1983 and was elected FRCP (London) in 1993.

His early career encompassed junior positions in Manchester, Dundee and Aberdeen. He returned to Dundee in 1979 to become a consultant physician and gastroenterologist, and went on to become Professor of Medicine in 1998.

During a very active career he held many different posts, including Clinical Group Director for Medicine in the Tayside University Hospitals Trust. He performed extremely well during a period of great organisational change - being feared by a few, loved by many and respected by all. He also was a long-time member of the British Society of Gastroenterology and the Nutrition Society.

Chris had a wide range of professional interests including the management of inflammatory bowel disease, the detection and management of disease-related malnutrition, and the use of artificial nutritional support. Most

recently he was key in establishing the Managed Clinical Network for patients on home parenteral nutrition in Scotland.

He contributed to several seminal textbooks, and had much of his research published. Of particular note was a landmark publication in a *BMJ* of 1994, which is heavily cited, in support of the need for better hospital systems to detect malnutrition.

One of his major talents lay in teaching and lecturing - he was a widely sought-after guest speaker and his presentations epitomised clarity and comprehensibility. Although highly critical of his own abilities, he revelled in sharing information and had particular skills in encouraging others to contribute to discussion.

His broad yet practical understanding of nutritional issues, together with the high regard of his colleagues, inevitably led to his being elected as chairperson of the British Association for Parenteral and Enteral Nutrition (BAPEN). He brought to that body a new sense of direction with emphasis on the multidisciplinary nature of all aspects of treatment of disease-related malnutrition, including putting the patient at the centre of the decision-making process.

His contributions to BAPEN were consistent and significant, especially in producing task force reports on various aspects of practical provision of nutritional support.

It therefore came as no surprise when he was asked to take responsibility for organising the forthcoming ESPEN Congress in Glasgow. He threw himself wholeheartedly into this enormous task, thereby gaining further respect and admiration from his European

colleagues. He defined the objectives for the congress and single-mindedly pursued them, with a clear vision for the programme and with typical attention to detail. The success of the meeting will be largely due to him.

He demanded a great deal from his colleagues - but far less than he was prepared to contribute himself. He valued all equally, regardless of status and, despite his significant achievements, he retained an inquisitive mind, an unshakeable belief in the truth, an impish sense of humour and fundamental humility. These qualities generated respect and admiration from everyone who had the good fortune to work with him.

In South Africa, we have come to know and respect Professor Pennington as an exemplary dedicated professional, who was very eager to share knowledge and experience, contribute to constructive development, and strongly support our efforts on the cost-effective practice of clinical nutrition.

Besides work, Professor Pennington and his wife enjoyed good holidays, particularly in Africa. He played tennis vigorously at local club level and had an extensive knowledge of steam engines. The last few months of his illness were lightened by his interest in photography and his passion for listening to classical music.

The field of clinical nutrition has lost a leader with vision; a colleague with compassion; a mentor with time and a friend who cared.

He will be greatly missed and our sympathy is extended to his wife, Jane, and their daughter Susan.

**Simon Allison, Pat Howard and  
Alan Shenkin**