



Professional ethics and marketing of dietitians' services

The spirit of professional guidelines

Health care professions are based on a relationship of trust with patients. The term "profession" means "a dedication, promise or commitment publicly made". To be a health care practitioner requires a life-long commitment to good professional and ethical practices and an overriding dedication to the good of one's fellow humans and society. In essence, the practice of medicine, dentistry and the medical sciences is a moral enterprise. In this spirit the Health Professions Council of South Africa (HPCSA) presents the following ethical guidelines.

Ethical guidelines

Dietitians are registered as health care professionals. Being registered as a health care practitioner with the Health Professions Council of South Africa (HPCSA) confers on us the right and privilege to practise our professions. Correspondingly, practitioners have moral or ethical duties to others and society.

Guidelines for making professional services known

- 1.1 Health professions in this country have long accepted the convention that health care professionals should refrain from self-promotion, not least because the health care professional who is most successful at getting publicity may not necessarily be the most appropriate one to treat a patient. Furthermore, patients (and their families) experiencing health problems are often particularly vulnerable to persuasive influences via unprofessional advertising.
- 1.2 It is primarily to protect the fundamental rights of patients, and health care professionals themselves, that governance of notifications and advertisements is imperative.
- 1.3 Health care professionals are encouraged to approach their professional association or society for guidance if they have doubts as to the appropriateness and/or acceptability of an advertisement or notification.

Guiding principles

- 2.1 Patients are entitled to expect that health care professionals will give them comprehensive professional advice and guidance on alternative treatments and second opinions, where appropriate. Failure to respect these patient rights

can erode the dietitian/patient relationship on which good professional practice depends.

- 2.2 A health care professional is at all times responsible for his or her own professional conduct.
- 2.3 Patients are entitled to protection from misleading promotional advertising or improper competitive activities among health care professionals. Publications improperly drawing attention to the titles, professional attainments, personal qualities, superior knowledge or quality of service of a particular health care professional, or improperly drawing attention to his or her practice or best prices offered, may be construed as unprofessional conduct. In such cases account will be taken of -
 - 2.3.1 The motive of the health care professional concerned in arranging for or agreeing to such publication;
 - 2.3.2 The nature, content and presentation of the material;
 - 2.3.3 Whether the material seeks to suggest the health care professional has particular abilities as compared with other practitioners;
 - 2.3.4 Whether the material is published in a manner likely to attract patients to the health care professional, or to promote his or her professional advantage or financial benefit; or
 - 2.3.5 Whether the material is likely to encourage patients to refer themselves directly to a particular health care professional or organisation.
- 2.4 Advertising in an unprofessional manner or canvassing and touting for patients are regarded as unethical behaviour.

If it's about Nutrition, ask your Dietitian!

Nutrition is a Science and Dietitians are the recognised experts in the field of evidence-based nutrition. There are many unscientific health and nutrition publications, fad diets and nutrition gimmicks around – when you consult a Registered Dietitian, you are protected from misleading treatments and misinformation.



Should you need the details of a Registered Dietitian in your area or would like more information on Dietiticians contact ADSA on: 086100ADSA or 0861002372, visit www.adsa.org.za or email info@adsa.org.za



**“Let thy food be thy medicine and thy medicine be thy food.”
– Hippocrates (460–377 BC)**

ADSA Gauteng South Workshop: The Diet and Lifestyle Inflammatory Link with Chronic Disease

The new committee of the ADSA Gauteng South branch kicked off its first event on the 4th of September with a workshop sponsored by DSM Nutritionals. Ninety dietitians attended the workshop at Sportron House and had the opportunity to hear from well known dietitian Anne Till on the relationship between oxidative stress, inflammation and chronic disease.

There is increasing support, albeit still intensely debated, for the diet-lifestyle link to oxidative stress and inflammation. Nevertheless, the available evidence has created the need for dietary recommendations that can be applied to the nutritional management of non-communicable diseases such as cardiovascular disease, Alzheimer's and Parkinson's disease, diabetes, cancer, arthritis and ageing.

Oxidative stress and inflammation associated to diet occur primarily as postprandial inflammation. This can be affected by the energy value of a meal, glycaemic index, glycaemic load and the lipid profile of a meal. A higher energy meal with a high glycaemic load and rich in triglycerides and saturated fats are efficient triggers of postprandial inflammation. Polyunsaturated fatty acids (PUFAs) appear to be the most important modulators of the postprandial inflammatory response. The ratio of n-3 and n-6 PUFAs is important

as n-3 appears to suppress postprandial inflammation while n-6 appears to promote it.

Clinical evidence suggests that overproduction of free radicals linked to oxidative stress and inflammation may play an integral role in the development of insulin resistance, diabetes, cardiovascular disease and other chronic conditions. Inflammation can be accentuated and become chronic from a consistent overabundance of glucose and fatty acid accumulation within muscle, adipose tissue and pancreatic cells resulting from poor dietary habits and sedentary lifestyles. Diet and lifestyle factors remain central components of the prevention and management of chronic conditions resulting from chronic inflammation.

References:

1. Till A. ADSA Gauteng South Workshop, Johannesburg 4th September 2009.

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