Lack of Professional Neuropsychological Training in South Africa Impedes Diagnosis, Treatment and Compensation for Brain-Compromised Patients

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Emerging Diagnoses of Brain Diseases/Injuries

DEVELOPMENTAL

TRAUMA

NEUROLOGICAL DISEASE
Increased Medical Burden in SA

- Trauma: MVA, Falls or Violence
- Age Spectrum
- Medical sophistication of diagnoses
- Increasing incidence across categories
- Medical specialization: Neurologists (e.g., Epilepsy; CVA etc.)
Psychological Training to Date

- Generic
- Short period
- Variable types of preparation
- Diverse needs of society
Increasing Burden of CNS-related Disease

Head trauma very high in South Africa due to:

- MVAs
- Interpersonal Violence
- Falls/Sporting
- Infections
- Aging
- Developmental Problems
Inadequate Preparation: Why?

- Basic foundations of CNS and human behaviour not compulsory
- Emerging trends of diagnostic models such as DSM weigh biological processes
- Neuropsychology affords opportunity to provide cutting edge, 21st Century diagnosis and treatment
- Age spectrum demands neurological knowledge of life-span development
Pathology in CNS Diseases/Trauma

Differential patterns

Prenatal problems leading to childhood difficulties such as ADHD

Each disease has common and variable patterns

Evolving or static lesions

Psychological and behavioural outcomes
Understand different Radiological Methods

Understanding scans

Differentiating types of scans and data

Limitations of scans
Issues of Compensation

- MVA outcomes
- Claimants are heavily favoured according to demographics
- Use of inappropriate sciences to determine compensation
- Use of gross and insensitive psychological measures
Medication Monitoring

- Seizures
- Psychotropic medication
Predicting Outcome of Neurosurgical Interventions

Critical areas of brain
Preserved function
Compromised function
Outcomes determine education, work
Neuropsychological Training in SA

No formal neuropsychological training for all aspects of CNS problems

Training has been at a theoretical level

Practitioners lack direct experiences combined with appreciation of existing literature

Mentorships from experienced, neuropsychologists trained at advanced level not using Western-based models.
Differences from Traditional Psychological Training

Traditional—relies on patient responses, reflection and cooperation

Neuropsychologists have more active engagement

Not necessarily time-based—dependent on nature of presenting patient
Why not 21st Century Neuropsychology for South Africans

21st century: South African citizens have more than primary health-care needs.

Neuropsychologists provide opportunity for diagnosis of neurologically-based syndromes.

Neuropsychologists provide opportunity for real-life, outcome-based interventions that are practical.

Neurological conditions impact individuals, families and ultimately societies.
Urgent Recommendations: Independent Board? NHI

- From first year--applied biological, microbiological, pharmacological data relating to CNS functioning and neuropsychological accompaniments.
- Parallel general medical practitioner training-focused on behavioural and psychological outcomes.
- Foundation for prescribing medications.
Established to regulate health care needs of South African Population.

Chapter 1: Section 15: Establishment of professional boards:

(1) The Minister shall, on the recommendation of the council, establish a professional board with regard to any health profession in respect of which a register is kept in terms of this Act, or with regard to two or more such health professions” (p.20).
Use this conference to initiate processes to start an independent Board of Neuropsychological Practitioners Appropriate for ALL South African
THANK YOU FOR YOUR ATTENTION!!!