

# MEDI BRIEF

NOVEMBER 2019

## Stay safe in the sun

Summer is in full swing and we are spending more time outdoors and in the sun. We all know how important it is to protect our skin against UV radiation, yet most of us don't do enough to look after our skin. South Africans have the highest rate of melanoma skin cancer in the world and within AMS's population, one third of all tumours are skin tumours.

### SPOT skin cancer

The Cancer Association of South African (CANSA) emphasises that people don't pay enough attention to marks and spots on their skin and claims that people are more worried about marks on their car. To prove their point, stickers looking like melanomas with the words "Would a spot on your own body worry you as much?" were stuck on people's cars. The campaign reached 78 000 people that were then invited for a free check-up at a CANSA stand close by, and 169 suspicious spots were identified which turned out to be melanomas. The early detection of the melanomas ensured that they didn't develop into advanced cancer. "Skin cancer is one of the most preventable cancers, but yet people often die from it," a CANCA representative stated during the campaign.

Check your skin regularly (preferably monthly) and if you notice any of the below mentioned warning signs, see a doctor or dermatologist!

### Warning signs for skin cancer (ABCDE)

- A: Asymmetry** – moles with one half unlike the other (not symmetrical). Common moles are round and symmetrical
- B: Border irregularities** – scalloped, with poorly defined edges. Common moles are smooth and have even borders
- C: Colour changes** – tan, black, brown, red, white, bluish. Common moles are usually a single shade of brown or black



**D: Diameter** – larger than 6mm

**E: Evolving** – evolving/growing bigger and becoming more prominent

Of course it is better to prevent damage to the skin in the first place and to adhere to these Golden Rules:

- Avoid direct sunlight between 10am and 3pm
- Wear sunglasses with UV400 rating, a sunhat and UV protective clothing at all times
- Apply sunscreen (20–50 SPF) 20 minutes before going outside and reapply every 2 hours
- Take special care to protect children. 80% of sun-induced skin damage occurs before the age of 18. No direct sunlight for babies under one-year old
- Avoid sunbeds – your tan is not worth dying for

You don't have to hide completely from the daylight though; being outdoors and in the sun also has its benefits. As always, it's about the right balance. Having exposure to enough sunlight can lift your mood and make you feel calm and focused, as your brain will react to the sunlight by releasing a hormone called serotonin. The UV radiation also triggers the creation of vitamin D, which is important for healthy bones. The right level of sunlight might also help with the improvement of certain skin and other conditions. All you need is 5 to 15 minutes of sunlight on your arms, hands and face 2–3 times a week. So, be smart and stay safe in the sun.

## Have you received your 2020 Benefit Guide?

Your copy of the 2020 Benefit Guide was posted to you in the first week of November. If you have not received your Benefit Guide yet, please call us on 0860 222 633 to ensure that we have your correct postal address. In the meantime, access the Benefit Guide on [www.angloms.co.za](http://www.angloms.co.za) > Info Centre > Find documents and forms. If you are considering changing your plan, please speak to us as soon as possible. Your plan change request needs to be submitted to your HR or Pension Office by 13 December 2019. But more importantly, make sure you have considered all the financial implications, such as available benefits and payable contributions, as you cannot change your plan again until next year.

# What is considered a medical emergency?

You might have read the phrase “in the case of an emergency” in our Benefit Guide or on our website, referring to conditions covered by the Scheme, when a co-payment is required, or what to do to obtain benefits.

If you or a loved one gets hurt or if you have a health concern, it might feel like the biggest emergency; and it might even be the biggest emergency that *you* have ever experienced. If a small child falls off a bicycle and her face is scraped, bleeding and swelling up – this does sound like an emergency to many. Or if you go for a walk and are attacked by a dog, it is traumatic and you might need to go to a doctor immediately. Both cases, however, might not be considered a medical emergency according to the Scheme Rules, which define “emergency medical condition” based on the Medical Schemes Act.

The Medical Schemes Act 131 of 1998 defines an emergency medical condition as “the sudden and, at the time, unexpected onset of a health condition that requires immediate medical or surgical treatment, where failure to provide medical or surgical treatment would result in serious impairment to bodily functions or serious dysfunction of a body organ or part, or would place the person’s life in serious jeopardy”.

This means that the following factors must be present before an emergency can be concluded:

- The onset of the health condition must be sudden and unexpected. It can’t be a concern you have had for weeks, or as a result of another condition that might cause you pain that one could expect.
- The health condition must require immediate treatment (medical or surgical). If you don’t get treatment right away, but wait until next week, it would not be regarded as an emergency. An example would be in the case of a motor vehicle accident where you sustained head injuries or a possible leg fracture which would necessitate immediate admission to a hospital and surgery.
- If not treated immediately, one of three things would result: serious impairment to a bodily function – in other words long-term consequences, serious dysfunction of a body part or organ – for example, resulting in a damaged heart or lung, or death.

In some cases, only the diagnosis can clarify if your case is a medical emergency. This would be the case, for example, if you rush to hospital thinking that you are having a heart attack, only for the doctor to confirm that your pain is luckily only caused by heartburn. At the time, you would have to, of course, seek medical advice immediately. And this is the reason why it is so important to know your facts, to know your benefits and where to go in which situation. If in doubt, call the Call Centre on **0860 222 633** to get clarity.

*MediBrief articles are not a substitute for professional medical advice, diagnosis or treatment. Seek the advice of a qualified healthcare provider if you believe that you might be suffering from a medical condition.*

## Pilot project: WhatsApp as a servicing tool for our members

WhatsApp is the most-used messenger app in the world today. Messaging is not only the preferred communication tool globally for the largest consumer group on the planet (Millennials), it has clearly embedded itself into our daily life in South Africa.

WhatsApp holds an 88% market share, far above all other social and messaging platforms across all age groups in South Africa. You, our members, asked us to include WhatsApp as a servicing tool. Sending and receiving messages to/from our service team via WhatsApp could be an alternative to calling the Call Centre. And why not? WhatsApp is an easy-to-use, private and secure channel, which will enable our members to chat to our service team in real time.

If you are interested in being a participant in this pilot project, please apply via email to [member@angloms.co.za](mailto:member@angloms.co.za), using ‘WhatsApp Pilot’ in

the subject line, and the service team will consider including you in the pilot project. You are an ideal candidate if:

- you are in possession of a smartphone with data access (at your cost)
- you are experienced in using WhatsApp
- you have a certain frequency of claims and/or communication needs with the Scheme
- you are interested in helping us improve Scheme communication and have patience and understanding that this pilot is not a final, proven communication process yet.

We cannot promise that the Scheme will roll this communication tool out for all members in the future, as it depends on the success of the pilot and your participation and interest in it, but we are certainly listening to your requests and are very excited about this new initiative.

**Visit [www.angloms.co.za](http://www.angloms.co.za) to learn more about your Scheme and benefits.**

Find all previous MediBrief editions in the Info Centre > Knowledge Library.

**Member Queries:**

**Value Care Plan:** 0861 665 665, [anglo@primecure.co.za](mailto:anglo@primecure.co.za)

**Standard and Managed Care Plan:** 0860 222 633, [member@angloms.co.za](mailto:member@angloms.co.za)

**Claims:** [claims@angloms.co.za](mailto:claims@angloms.co.za)