

Growing up in Humansdorp in the Eastern Cape, Mani Chiliwe, due to qualify as a paediatrician in 2020, vowed he would one day help his severely under-served community where child illnesses and premature mortality were ubiquitous.

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"There were so few doctors where I came from. In fact, few professionals of any sort. Those that we saw were either teachers or, less often, doctors – but the few GPs I did see inspired me because they helped people so much," says Mani.

He decided he also wanted to make such a difference. Matriculating from the Lungiso High School in Kwanomzamo in Humansdorp, he enrolled to study medicine at the Walter Sisulu University in Mthatha, qualifying in 2011.

After completing his internship and Community Service in the Port Elizabeth (PE) Hospital Complex, he settled in as a medical officer at the Dora Nginza Hospital in PE, where he saw the full extent of child disease and death, much of it avoidable.

"I saw a lot of diarrhoea in HIV-positive kids, prolonged and complicated by dehydration and malnutrition. They tended to die more often than other children," he says.

DR MANI CHILIWE

Rural Individual Fellowship Award

Walter Sisulu University
Family Medicine

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Taking action

By the time he'd began his four years of registration towards paediatrics, he was convinced that this set of presenting symptoms, with patients often presenting tragically late, cried out for further investigation.

That is when he applied for a Discovery Foundation Rural Fellowship Award. His study, which will hopefully help him and his fellow physicians tailor more appropriate treatment to various cohorts of child patients, is entitled; "The outcomes of children less than five years of age, admitted to Dora Nginza Hospital with diarrhoeal disease; HIV positive versus HIV negative children."

"Most of the kids admitted with HIV tend to also have TB or vice versa. It seems that many of the kids with HIV/TB have prolonged diarrhoea and end up staying in hospital for longer. Children who do not have HIV seem to stay for up to half the time. But we now need to prove that with data," he adds.

The intention, through a retrospective comparative cohort review of inpatient folders of children in the two eight-bed gastro-intestinal wards over 12 months, will hopefully uncover the causes relating to prolonged hospital stays and enable Mani and his colleagues to reduce deaths and improve outcomes.

"There are compounding factors like malnutrition and other co-morbidities that lengthen hospital stays, so we'll have to take those into account," he adds.

He emphasises that, while they treat many children with diarrhoea, very few actually require admission, the specific exceptions being those who are severely dehydrated.

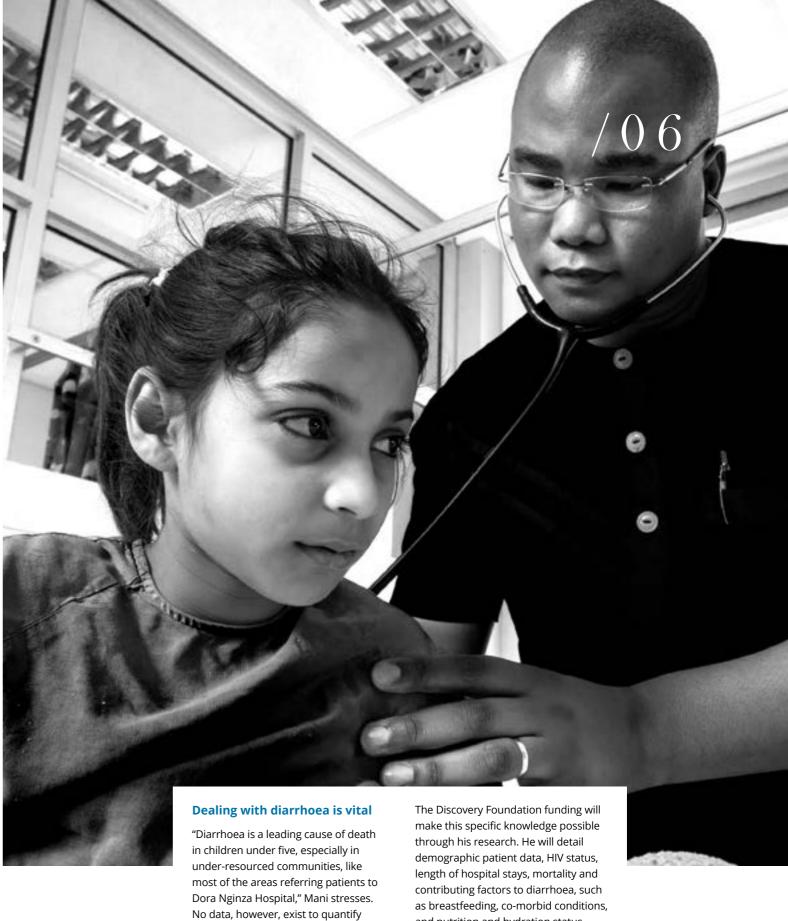
The SA childhood diarrhoea context

Existing South Africa studies confirm prolonged in-hospital stays of HIVinfected children suffering from diarrhoea and complicated by dehydration and malnutrition. Alarmingly, global literature also links diarrhoea with an eleven-fold increase in mortality.

Mani is married to Zikhone, a first year Medical Officer at the same hospital, and they have a five-month-old son, Xhanti. He says that with being on hospital call while specialising, and domestic child-minding duties, he does not find much leisure time. However, he does manage to watch the occasional soccer or rugby match on television.

"I support the Kings and the Sharks, and PE's Chippa-United and Kaiser Chiefs in the PSL. I'm also a former Manchester United fan," he chuckles, alluding to the popular side's mixed fortunes.

Most of the time, however, he will continue to fulfil his childhood ambition of making a difference in under-resourced communities.



the relation between diarrhoea and HIV infection in children seen at Dora Nginza Hospital.

and nutrition and hydration status upon admission.

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