

## Imprisonment and torture of doctors in Bahrain

**To the Editor:** During the months of February and March 2011, as part of the 'Arab Spring', protest action and demonstrations took place in Manama, capital of the Kingdom of Bahrain. When the authorities sought to put down the action, many protesters were injured and some died of their injuries. Those who were injured were admitted to Salmaniya Medical Complex, the main government hospital in Bahrain.

That 48 health care workers at the hospital, in keeping with the Hippocratic Oath, cared for the protesters as they would for any patient was sufficient cause for the arrest, imprisonment and torture of these workers.<sup>1</sup> The group includes Dr Mahmood Asghar, a paediatric surgical colleague known to members of our Association.

After the health care workers had been imprisoned for 6 months without trial, a military court sentenced them to 15 years' imprisonment. Following an international outcry, this decision was set aside. Unfortunately these workers still face trial in a civilian court, and while awaiting trial are not able to return to work, or to leave the country.

The South African Association of Paediatric Surgeons wishes to express its abhorrence of the sanctioning by the government of Bahrain of these actions against our colleagues, and urges the South African Medical Association and medical colleagues around the world to add their voice in condemnation of these actions of the government of Bahrain.

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1. <http://physiciansforhumanrights.org/issues/persecution-of-health-workers/bahrain/>

## SAMA speaks out about the victimisation of doctors in Bahrain

**To the Editor:** Saunders and London<sup>1</sup> correctly highlight the unjust punishment of doctors in Bahrain who treated people wounded during and after political demonstrations in that country. They have been unjustly subjected to military courts and been meted out sentences that are viciously disproportionate to their supposed infractions. The entire issue is clearly one where a state is abusing its authority and violently crushing any hint of rebellion. Similar incidents have now been reported in Syria, where doctors are being punished for treating so-called opposition rebels. Compounding this trend are reports, emanating from several sources, of doctors being tortured while in detention and women doctors even being threatened with rape while in detention. The issue of state-sponsored torture of doctors is reminiscent of our all-too-painful past in South Africa. The question correctly posed by the authors is why there has been so little outcry from South Africa, with its history of doctors subjected to political abuse. Unfortunately, this is where our agreement with the authors ends. Several statements have been made regarding the alleged inaction by the South African Medical Association (SAMA) on this issue. We need to set the record straight about SAMA's response to date, as follows:

1. A SAMA press statement was released in October 2011 that wholly condemned the actions by the Bahraini Government.
2. A Medigram in this respect was released in October 2011 to members, highlighting the issue.
3. SAMA is a co-signatory on the World Medical Association statement condemning the behaviour of the Bahraini Government in October 2011.

4. SAMA is a co-signatory to the demand by the group called Physician's for Human Rights to the Bahraini King to stop trials and punishment of doctors in Bahrain.

5. In January 2012, the Executive Committee of SAMA discussed the issue and agreed to approach the South African Government via the Department of International Affairs and Co-operation to intervene in this matter, if possible. This approach is ongoing.

SAMA would welcome advice on what further action we could take in this regard, but feels that the assertion that we have done very little is unfair and without foundation. Furthermore, we call on doctors to be aware of such alleged abuses being perpetrated against our colleagues and to condemn them.

**Mark Sonderup**

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1. Saunders S, London L. Health professionals should be speaking out about the victimisation of doctors in Bahrain. *S Afr Med J* 2012;102(3):112.

## Legal imperatives for consent for children participating in research

**To the Editor:** Concerning 'consent for children participating in research', I wish to make readers aware that my previous statement<sup>1</sup> that s71 of the National Health Act of 2003<sup>2</sup> was not in force, is no longer the case. A statement from the National Health Research Ethics Council (NHREC) Chairperson Professor D du Toit informs all stakeholders that s71 of the National Health Act was proclaimed with effect from 1 March 2012.<sup>3</sup> Professor du Toit makes the point that s71 introduces new requirements for health research, 'including (1) written consent (2) consent from a parent or guardian for research with children (3) "therapeutic research" should be in a child's best interest and (4) consent from the Minister must be obtained for "non-therapeutic research" with children.' He further elaborates that 'regulations are yet to be issued providing greater detail and operational guidance to RECs, particularly for the latter requirement'. I deduce that the Minister will probably soon delegate the consent for non-therapeutic research on children to an appropriately defined body such as the NHREC. The ethical imperatives<sup>4</sup> that I raised in my previous letter are now legal imperatives in our country.

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1. Naidoo S. Consent for children participating in research. *S Afr Med J* 2012;102(3):110.

2. National Department of Health. The National Health Act 61 of 2003. Pretoria: Government Printer, 2003.

3. Statement from the Council on Proclamation of s71 of National Health Act. Pretoria: National Health Research Ethics Council, Department of Health, 2012.

4. National Department of Health. Ethics in Health Research: Principles, Structures and Processes. Pretoria: Government Printer, 2006.

## Stem cell therapy and amyotrophic lateral sclerosis

**To the Editor:** We have been made aware of several patients with neurological diseases attending stem cell therapy centres, and in particular individuals with amyotrophic lateral sclerosis (ALS). The opening of stem cell clinics in South Africa has led to an increased