
EDITORIAL

The final months of 2023 are marked by not one but two World Cup tournaments. The Rugby and Cricket World Cups, happening in France and India respectively, again provide South African sports fans the hope of our teams bringing these honours home. In this issue of the journal, we feature *'Initiating or switching to IDegAsp in a real-world South African population with type 2 diabetes- a cohort analysis from the ARISE study'* in which Kok and colleagues report on the results of the South African cohort from this multi-centre observational study. Although the study did demonstrate a significant decrease in HbA1c from baseline, it is concerning to note that less than one-fifth of patients reached their HbA1c targets by the end of the study.

Pezeshki, et al conducted a prospective case-control study to evaluate the *'Effect of an educational intervention based on the Theory of Planned Behaviour in type 2 diabetic patients at a foot and eye care practice'*. They show a significant improvement in several parameters including HbA1c in the Iranian patients who received a structured educational programme compared to the control group and further demonstrated that the improvement was sustained at three months. Although the outcome is not surprising, it does underscore the crucial role of education in managing type 2 diabetes. Given the importance of early detection of diabetes and diabetes prevention strategies, Mothiba et al explored the *'Feasibility study on the use of the modified Finnish Diabetes Risk Score in South African context: a case of home-based carers'*. Although the vast majority of

participants were "moderately competent" in the use of the risk assessment tool, it is worrying to note that no participants were "fully competent". This may reflect, as the authors suggest, the need for further training. However, it may also highlight the difficulty in using methods validated in first-world countries to sites in sub-Saharan Africa.

In a retrospective record review, Noeth and colleagues describe the characteristics of a cohort of Turner's syndrome patients managed at a single centre. Interestingly, they have showed a high prevalence of mosaicism, with over 60% of patients having a mosaic karyotype. A small study from Cameroon by Boli et al evaluated the use of detecting macroprolactin in a low-resource setting. Finally, Greenstein, et al report on *'A case of hyponatraemia secondary to Vitamin D deficiency'* in an older patient. Although hyponatraemia is frequently encountered in the elderly, this case study highlights a rare cause of the disorder.

A short while ago, the 56th annual SEMDSA Congress took place in Johannesburg. The congress, as always, was an excellent opportunity for learning and connecting within the endocrinology community. The editorial team would like to congratulate the newly elected SEMDSA ExCo. We hope the congress has rekindled interest and enthusiasm for JEMDSA, and we once again urge you to contribute meaningfully to the journal. Happy reading!

Jeff Wing and Nasrin Goolam Mahyoodeen