

Questions from Spotlight and Daily Maverick (for CEO)

1. How do you respond to the suggestion by SAMA, the Progressive Health Forum and others that there is “management” dysfunction at the NHLS?

There is no management dysfunction at the NHLS. The management team and staff have been outstanding in responding to this epidemic. They have been working tirelessly and with dedication to ensure that the NHLS is capacitated to contain the epidemic.

I am not certain how the Progressive Health Forum has reached this conclusion, but would welcome them contacting me to make any suggestions that would strengthen the fight against CoVid 19.

2. How do you respond to the suggestion by SAMA, the Progressive Health Forum and others that the NHLS preparedness for COVID-19 has been lacking despite ample warning?

The NHLS preparedness for COVID 19 has not been lacking, but in fact has been rapid and effective despite many challenges. The NHLS has been gearing itself up since January, 2020 when the NICD informed them of the need. This was done through the rapid procurement of new equipment and test kits. When the instruction was issued by NICD, the NHLS was immediately able to start testing.

Currently, the NHLS has the capacity and test kits to do 15,000 tests in 24 hours. Our preparedness is demonstrated by the fact that we assisted the private sector when they had a backlog in testing. NHLS does not determine how many tests are carried out – this is determined by the number of samples sent to it by the various provincial health departments. The NHLS has proactively acquired 60 mobile labs to increase accessibility for those who are referred for sampling. These mobiles are being deployed where the need is the greatest, ensuring that people do not have to go to clinics and hospitals to be sampled.

The NHLS has also secured supplies to maintain this demand over the next three months and further if required.

3. How do you explain the fact that the private sector has done so many more tests than the NHLS? Don't they face the same constraints regarding the reagents?

The private sector has done more tests as the case definition previously included international travel as a criteria for testing. Most of this group are on private medical aids and go to the private sector for testing. The private laboratories do also face similar constraints and there is constant liaison between the private laboratories and the NHLS. Both the NHLS and private laboratories assist each other when there are shortages or challenges as we are of the view that this is for the good of the country.

4. Can you provide concrete details regarding how the NHLS will expand its testing capacity in the coming weeks?

Report attached

5. How do you respond to the suggestion that the NHLS's existing laboratory and scientific capacity is being under-utilised in the fight against COVID-19?

The NHLS is fully utilising all its laboratory capacity and expertise and all staff have been requested to volunteer to assist in the campaign. The NHLS is also collaborating with other academic and research laboratories to increase capacity if needed.

If you are aware of any capacity that is being under-utilised please let me know, as the NHLS will welcome whatever support it can get.

6. Why are academic labs not being roped in to help with COVID-19 testing?

Academic and other laboratories have been contacted to utilise capacity that they have. The NHLS will also fully utilise its own capacity and complement it with capacity from other laboratories.

7. How many of the new mobile GeneXpert units are operational and what are the blockages in this regard? (A News24 article suggested that only few are in use.)

325 GeneXperts in 166 sites are available for use. The GeneXpert test kit was approved by the FDA on 20 March, 2020. The NHLS had contacted the company prior to this to get the test kits into South Africa. The test kits are expected this week for validation and once validated it will be utilised. The NHLS has pre-ordered the test kits and South Africa will be one of few countries where it will be made available. There are none in use until the test kits are validated. The NHLS has moved very fast as it is less than a month since the test was approved.

8. Can you explain the NHLS's plans regarding serological testing, given that most experts seem to agree that PCR testing is the preferred method for COVID-19 testing and that there are questions regarding the sensitivity and specificity of available serological tests? (We understand the UK has now withdrawn serological tests altogether.)

The NHLS only uses PCR tests for testing of COVID 19.

The rapid serological tests have to first be registered with SAHPRA. SAHPRA will decide on who validates the tests, to review the sensitivity and specificity.

The serology test is an antibody test which shows if a person has been infected. It is not utilised for assessing when the person is infectious.