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MEDICAL FUND

THIRD EDITION OF 2024



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Welcome to the third edition of TransCare for 2024

# Principal Officer's note



**Petrus  
Wassermann**  
*Principal Officer*

## Welcome to the third edition of TransCare for 2024.

In light of Eye Care Awareness Month in September, we provide information about dry eye. It is important to take care of your eyes and simple eye care habits can help you keep your eyes healthy: Follow a healthy, balanced diet, wear sunglasses, avoid smoking, wash your hands well before you put in or take out contact lenses and give your eyes a rest from time to time to reduce eyestrain.

In this edition, we cover basal cell carcinoma, which is a type of skin cancer. Basal cell carcinoma begins in the basal cells – a type of cell within the skin that produces new skin cells as old ones die off. Basal cell carcinoma often appears as a slightly transparent bump on the skin, though it can take other forms. Basal cell carcinoma occurs most often on areas of the skin that are exposed to the sun.

Transmed hosted its annual general meeting (AGM) in July. The Fund would like to extend a special word of thanks to all members who were able to attend the AGM. Your presence was very much appreciated.

If you have an email address and you have not updated the information, please contact the customer service department on **0800 110 268** or send an email to **[membership@transmed.co.za](mailto:membership@transmed.co.za)**. Please include your membership number on all correspondence to the Fund.

We hope that you will take the time to read this newsletter.

We welcome any suggestions that you may have on articles or member benefits you would like to see published in future newsletters. Please send your suggestions to **[suggestions@transmed.co.za](mailto:suggestions@transmed.co.za)**.

Happy reading.

Warm regards

**Petrus Wassermann**  
*Principal Officer*

# Basal cell carcinoma

## What is basal cell carcinoma?

Basal cell carcinoma is a type of skin cancer that begins in the basal cells, which produce new skin cells. It often develops on sun-exposed areas and can look like a bump, a lesion or a patch.

## Symptoms

Basal cell carcinoma usually develops on sun-exposed parts of your body, especially your head and neck. Less often, basal cell carcinoma can develop on parts of your body usually protected from the sun, such as the genitals.

Basal cell carcinoma appears as a change in the skin, such as a growth or a sore that won't heal. These changes in the skin (lesions) usually have one of the following characteristics:

- A shiny, skin-coloured bump that's translucent, meaning you can see a bit through the surface. The bump can look pearly white, pink, brown or glossy black. Tiny blood vessels might be visible. The bump may bleed and scab over.
- A brown, black or blue lesion or a lesion with dark spots with a slightly raised, translucent border.
- A flat, scaly patch with a raised edge. Over time, these patches can grow quite large.
- A white, waxy, scar-like lesion without a clearly defined border.

If accompanied by nasal allergies, you may also have a stuffy, itchy nose and sneezing. You can also have a headache, an itchy or sore throat or coughing.

## Causes

Basal cell carcinoma occurs when one of the skin's basal cells develops a mutation in its DNA.

Basal cells are found at the bottom of the epidermis – the outermost layer of skin. Basal cells produce new skin cells. As new skin cells are produced, they push older cells toward the skin's surface, where the old cells die and fall off.

### Where skin cancer develops

Skin cancer begins in the cells that make up the outer layer (epidermis) of your skin. Basal cell carcinoma begins in the basal cells, which make skin cells that continuously push older cells toward the surface. As new cells move upward, they become flattened skin cells known as squamous cells, where a skin cancer called squamous cell carcinoma can occur. Melanoma, another type of skin cancer, arises in the pigment cells (melanocytes).

The process of creating new skin cells is controlled by a basal cell's DNA. The DNA contains the instructions that tell a cell what to do. The mutation tells the basal cell to multiply rapidly and continue growing when it would normally die. Eventually the accumulating abnormal cells may form a cancerous tumour – the lesion that appears on the skin.

## Ultraviolet light and other causes

Much of the damage to DNA in basal cells is thought to result from ultraviolet (UV) radiation found in sunlight and in commercial tanning lamps and tanning beds. But UV exposure doesn't explain skin cancers that develop on skin not ordinarily exposed to UV radiation. Other factors can contribute to the risk and development of basal cell carcinoma and the exact cause may in some cases not be clear.

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## Risk factors

Factors that increase your risk of basal cell carcinoma include:

- **Chronic sun exposure:** A lot of time spent in the sun – or in commercial tanning beds – increases the risk of basal cell carcinoma. The threat is greater if you live in a sunny or high-altitude location, both of which expose you to more UV radiation. Severe sunburns also increase your risk.
- **Radiation therapy:** Radiation therapy to treat acne or other skin conditions may increase the risk of basal cell carcinoma at previous treatment sites on the skin.
- **Fair skin:** The risk of basal cell carcinoma is higher among people who freckle or burn easily or who have very light skin, red or blond hair or light-coloured eyes.
- **Increasing age:** Because basal cell carcinoma often takes decades to develop, the majority of basal cell carcinomas occur in older adults. But it can also affect younger adults and is becoming more common in people in their 20s and 30s.
- **A personal or family history of skin cancer:** If you've had basal cell carcinoma one or more times, you have a good chance of developing it again. If you have a family history of skin cancer, you may have an increased risk of developing basal cell carcinoma.
- **Immune-suppressing drugs:** Taking medication that suppress your immune system, such as anti-rejection drugs used after transplant surgery, significantly increases your risk of skin cancer.
- **Exposure to arsenic:** Arsenic, a toxic metal that's found widely in the environment, increases the risk of basal cell carcinoma and other cancers. Everyone has some exposure to arsenic, because exposure occurs naturally, but some people may have higher exposure if they drink contaminated well water or have a job that involves producing or using arsenic.
- **Inherited syndromes that cause skin cancer:** Certain rare genetic diseases can increase the risk of basal cell carcinoma, including naevoid basal cell carcinoma syndrome, also known as Gorlin-Goltz syndrome, which involves defects in body systems such as the skin, nervous system and eyes, and *xeroderma pigmentosum*, a disorder that causes the skin and tissue covering the eye to be extremely sensitive to UV light.

## Prevention

To reduce your risk of basal cell carcinoma you can:

- avoid the sun during the middle of the day
- wear sunscreen year-round
- wear protective clothing
- avoid tanning beds
- check your skin regularly.



**Source:** <https://www.mayoclinic.org/diseases-conditions/basal-cell-carcinoma/symptoms-causes/syc-20354187>

# Dry eye

## What is dry eye?

Dry eye happens when your eyes don't make enough tears to stay wet or when your tears don't work correctly. This can make your eyes feel uncomfortable and may in some cases even cause vision problems.

## What are the symptoms of dry eye?

- A scratchy or gritty feeling, like there's something in your eye
- Stinging or burning feelings in your eye
- Red eyes
- Sensitivity to light
- Blurry vision

## Risk factors for dry eye

The risk factors are divided into two groups, namely non-modifiable and modifiable risk factors.

### Non-modifiable factors

- **Age:** Mostly people who are 50 years of age or older
- **Gender:** Mostly women
- **Meibomian gland dysfunction:** When the Meibomian glands – tiny oil glands that line the margin of the eyelids – do not secrete enough oils into the tears
- **Connective tissue diseases:** Such as rheumatoid arthritis
- **Sjögren syndrome:** An immune disorder that causes insufficient moisture production in certain areas of the body

### Modifiable factors

- Computer use
- Wearing contact lenses
- Hormone replacement therapy
- Hematopoietic stem cell transplantation
- Environmental factors, such as pollution, low humidity and sick building syndrome
- Medication, such as antihistamines, antidepressants, anxiolytics and isotretinoin

### Sources:

<https://www.nei.nih.gov/learn-about-eye-health/eye-conditions-and-diseases/dry-eye>  
<https://dryeyedirectory.com/dry-eye-statistics/>

## What is the treatment for dry eye?

Treatment for dry eye usually depends on what is causing your symptoms. There are a few different types of treatment that can ease your symptoms and help keep your eyes healthy:

- over-the-counter eye drops
- prescription medicines
- lifestyle changes
- tear duct plugs
- surgery.

## Preventing dry eye

If you experience dry eyes, pay attention to the situations that are most likely to cause your symptoms. You can help prevent symptoms of dry eyes in the following ways:

- Try to avoid smoke, wind and air conditioning.
- Use a humidifier to keep the air in your home from getting too dry.
- Limit screen time and take breaks from staring at screens.
- Wear wraparound sunglasses when you're outside.
- Drink plenty of water; aim for eight to 10 glasses every day.
- Get enough sleep – about seven to eight hours a night.







# Your smile is in your hands: **Practise a daily oral hygiene routine**

Taking care of your oral health is your responsibility. Although it is recommended that you visit your dental healthcare professional every six months or at least once a year for a dental check-up and professional cleaning (i.e. scale and polish), it is even more important to practise a good daily oral hygiene routine.

## **Follow these healthy habits to help prevent the development of tooth decay (caries) or gum disease:**

- Make it a habit to rinse your mouth with water after every meal or snack.
- Brush your teeth with fluoride toothpaste for two minutes every morning and every night. Use a small to medium-sized, soft-bristled toothbrush.
- When you brush, pay attention to your tongue as well.
- After brushing your teeth at night, do not eat or drink anything other than water before you go to bed. During the day, bacteria and plaque build up on your teeth and gum line. The longer plaque remains on your teeth, the more likely it is to cause cavities. If you brush your teeth before bedtime, it will help to prevent bad breath, gum disease, tooth decay and cavities.

- Keep your toothbrush clean. Rinse your toothbrush after every use and allow it to dry.
- Replace your toothbrush at least once every four months or if the bristles are worn out.
- Floss to clean between your teeth. Do this once daily or a minimum of three times a week.
- Limit sweets, sugary foods and sugar-filled drinks – make water your main drink.
- If you smoke or vape, try to quit. Speak to your dentist about smoking cessation options.

Consider going to a dental healthcare professional that is part of the DENIS Dental Network to avoid unexpected payments. These practices will not charge you more than the Transmed tariffs for conservative dental treatment. This means that if you have the benefits available for the treatment, you will not have to pay any money out of your own pocket.

Go to the DENIS website at [www.denis.co.za](http://www.denis.co.za) and click on *Find a Network Provider* to search for a practice by suburb or phone the DENIS contact centre on **0860 104 941**.

**denis**

**Source:** DENIS



## Third-party consent

If you are unable to contact us directly and need someone else to speak to us on your behalf, we will need you to complete a **member consent form** before we can accept instructions from, or share your information with, anyone else. This measure is in place to protect you against people who may try to access your information without authorisation.

You can find the form on the Fund's website at [www.transmed.co.za](http://www.transmed.co.za). Alternatively, contact the customer service department on **0800 110 268** to obtain the form. Complete it electronically or print it out.



## IMPORTANT CONTACT DETAILS

### WHO TO CALL TO GET IN TOUCH WITH THE FUND

Services	Contact numbers
Customer service department (general queries)	0800 110 268
Chronic medication application	0800 122 263
Hospital and major medical pre-authorisation	0800 225 151
Optical services (PPN)	0861 103 529
Dental services (DENIS)	0860 104 941
HIV/AIDS	0860 109 793
Ambulance authorisation	0800 115 750
Fraud hotline	0800 000 436
WhatsApp	0860 005 037

### IMPORTANT EMAIL ADDRESSES

Services	Email addresses
Enquiries	<a href="mailto:enquiries@transmed.co.za">enquiries@transmed.co.za</a>
Banking details and membership	<a href="mailto:membership@transmed.co.za">membership@transmed.co.za</a>
Compliments	<a href="mailto:compliments@transmed.co.za">compliments@transmed.co.za</a>
Complaints	<a href="mailto:complaints@transmed.co.za">complaints@transmed.co.za</a>
Appeals	<a href="mailto:appeals@transmed.co.za">appeals@transmed.co.za</a>
Claims	<a href="mailto:claims@transmed.co.za">claims@transmed.co.za</a>
Ex gratia	<a href="mailto:exgratia@transmed.co.za">exgratia@transmed.co.za</a>
Suggestions	<a href="mailto:suggestions@transmed.co.za">suggestions@transmed.co.za</a>

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