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technology innovation
A G E N C Y

Ethics discussion – Newborn Screening

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Newborn Screening Status in South Africa

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Ethics - Guiding policies

1. South African constitution
 - Equal before the law
2. UN convention on the rights of the child
 - Equal protection and benefit
 - No discrimination, stigmatization or marginalization
3. African charter on the rights and welfare of the child
 - Highest attainable standard of health
4. UN convention on the rights of persons with disabilities
 - Family environment
 - Happiness love and understanding

Ethics – Guiding economic models

- Immediate implementation (WHO)
 - More effective, less costly
 - More effective, equal cost
 - Equal effectiveness, less costly
 - $CUA \leq GDP/Capita$ (SA \approx \$7 000 \approx R90 000)

Some costs and other stats

	Public Health Care	Private Health Care	Total
	(Per annum)		
Births	980,000	170,000	1,150,000
Affected by NBS condition	490	85	575
Cost of Screening	R 782M	R 209M	R 991M
Cost of not screening	R 722M	R 714M + R 17M	R 1453M
Cost of implementing NBS	R 60M	R 192M	R 252M
Budget	R 168B	R 140B	R 308B
NBS as % of Budget	0.04%	0.14%	0.08%
Average principle member contribution		R 36,000	
Increase to cover NBS		R 48	
% Increase		0.13%	

What about cost utility analysis

	Public Sector	Private Sector	Weighted Average
No screening	38,000	189,000	68,000
Screening	23,000	35,000	25,000

Cost of care - Financial support/insurance

- Income < R 180 000 (single) or < R 360 000 (married)
 - < 18yrs □ Care dependency grant R 1 510
 - > 18yrs □ Disability grant R 1 510
- Higher income (? On medical aid)
 - No support from government or scheme
 - Apologies to Discovery Health and Camaf

Why are we not screening our children?
(like the rest of the developed and developing world)