



CMEFS WEEKLY NEWSLETTER

FRIDAY 30-10-2020

Hello. I do hope that this week's edition of our newsletter finds you and your family as well as can be.

On the Covid-19 front, it has been a week of both good and bad news.

The good news is that a certain Dr. Emmanuel Taban, a pulmonologist born in South Sudan now resident and practicing in SA, has broken entirely new ground in so far as treatment protocols for critical patients requiring ventilation is concerned.

Although there is some dispute around the actual death rate of those patients requiring ventilation, the latest figure being 1/3 of all those requiring ventilation, it was heartening to see on Carte Blanche that Dr. Taban has thus far had a 100% survival rate using the technique he has developed to treat these critically ill patients.

Not being a medical person, I can only describe what he found and has done in layman's terms.

Although the World Health Organisation officially discourages the practice of taking a camera and feeding it down into the lungs bronchial tubes to see why it is that patients' oxygen levels continue to drop even whilst they are being ventilated, Dr. Taban decided to ignore this advice and did exactly that.

What he found was that the entrance to the patients' bronchial tubes had become clogged with so much phlegm that it was simply impossible for the oxygen being administered to reach the inside of the lungs, resulting in the patient's ultimate death.

He then took this finding and pioneered a procedure whereby this excess phlegm is quite literally sucked out to allow the oxygen to once again enter the patient's lungs and to do the job that it needs to do.

The results of this procedure have been nothing short of miraculous and even better than this the success rate attaching to this procedure is thus far 100%.

The patient that was interviewed on Carte Blanche who had just recently undergone this procedure was basically already dead when he entered the hospital with (under other circumstances) little to zero chance of survival.

His wife agreed to have him undergo the procedure and now there he was, as right as rain, feeling as good as he had ever felt before contracting the virus and being admitted at death's door to the emergency section of the hospital.

I can only hope that this procedure will be quickly taken up by all pulmonologists both countrywide and world-wide as it seems it is indeed a life-saving procedure.

So well done to Dr. Taban on developing this ground-breaking procedure.

And now for the bad news part of our Covid-19 discussion this week.

It seems that despite all our very best efforts worldwide, we just do not seem to be able to get on top of this thing.

Europe is experiencing a second wave of infections that are worse in some parts than the first wave.

The US, it seems, has not even gotten past the first wave.

And right here back at home in SA, although it is early days yet, under level one lockdown, infections seem to be on the rise once again.

And as I write this, there seems to be STILL no effective treatment in sight, or even on the near horizon.

Even though much has been said about a few drugs that may "assist" in the speed-up of recovery from the virus, none of them is an actual treatment in and of itself.

And there seems to be STILL no vaccine in sight, although so very many of them are in trial, none yet seem to have made it to market.

And if and when they do, the latest news is that they may not actually even then be very effective as those who have already had Covid-19 and recovered from it seem only to be immune from re-infection for a month or two or three at the maximum, after which they once again become vulnerable to re-infection from the virus. Ugh!

This is bad news from the vaccine front as these findings are also saying to us that once vaccinated, if the vaccination works, it is not likely to work for any prolonged period. Ugh! Again!

When I think about it, it is almost (if not actual) common knowledge that there is no cure for the common cold due to the virus mutating year after year after year.

Similarly with the flu, although we do have a flu vaccine, we all know that we need to be vaccinated against the new strain every year to stay ahead of the virus.

And even then this does not offer complete protection. If I recall, at best the flu vaccine is only around 60% effective,

It, therefore, strikes me that what we are trying to do with Covid-19, which at the end of the day is just another cold/flu virus albeit that is entirely new to our immune system, is what we have not been able to do forever, and that is to find a cure for the common cold or find a "once-off" flu vaccine.

But maybe I am wrong in this as again I am not an epidemiologist and I have little in-depth knowledge of such things.

I certainly hope that I am wrong!

If not, then maybe we need to do a major re-think on the virus itself and accept that our lives are going to be forever changed in learning how to live with it until an answer is found, which will hopefully be sooner, rather than later.

And yes, Covid-19 fatigue is a very real thing. For just how long can we avoid physical contact with one another? The handshakes, the hugs, the kisses, and the embraces? Certainly not forever. For just how long can we avoid getting together in crowds to watch our favourite sport, to celebrate a special occasion, or to go to those pubs and clubs we love/d to frequent? Certainly not forever. For just how long can the elderly and vulnerable keep themselves under lockdown away from their families and loved ones? Certainly not forever. For just how long can we wear our masks when we go out or go to work? Certainly not forever.

And right now it seems that we have already been doing these things forever and have now grown very tired of it. We NEED to be able to touch one another. It's who we are. It's what we are. We are social. There is just no substitute for bodily contact or the comfort it brings being close to those we care about.

We need to be able to see an end to all of this, failing which it will only be a matter of time before we all give in to the fatigue and allow nature to take its natural course, wherever that might take us.

If nothing else, this virus has humbled us and should serve as a stark reminder to all of us that in the very end, we have no control over mother nature, and in accepting this, learn to respect her and learn to live with her in harmony, peace, and acceptance.

I trust you enjoyed the read. Nine sends love and thoughts to all, as always. Until next time then, from all of us at CMEFS, do take good care of yourselves. Kind regards. Charles.

Name	Division	Cell Number	Detail
Alicia	Wealth	063 434 8074	Learner. Servicing attaching to the following classes of business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Andrew	Wealth	063 321 7399	Intern. New business and servicing. Medical Aids & GAP Cover. In the process of migrating across to the Wealth Division.
Andrisha	Wealth	063 378 1473	Representative. New business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Bernelee	Tax	078 708 4536	Administrator providing admin support to Geraldine and understudy to Geraldine.
Brady	Wealth	071 843 3933	Representative. New business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Felicia	Risk	071 880 9576	Learner. Servicing attaching to Short-Term insurance, assisting Stella. Starting to obtain some exposure to Medical Aids, GAP Cover and Life Insurance.
Geraldine	Tax	083 754 1699	Head of tax division.
Jamie	Wealth	071 850 1389	Learner. Core responsibility being to produce and send out the monthly investment statements and to handle any queries connected to them. Satellite responsibility to assist where possible in the Wealth Division.
Luh	Bookkeeping	063 102 3313	Head of Bookkeeping Division. Professional Accountant (SA) SAIPA 30345
Nadean	Tax	063 026 1351	Intern. Administrator providing admin support to Bernelee and understudy to Bernelee.
Siso	Risk	060 376 6605	Learner. Starting to obtain some exposure to Short-Term insurance Medical Aids, GAP Cover and Life Insurance.
Stella	Risk	078 784 6462	Head of Short-Term Insurance Division.
Terisha	Books	071 858 3373	Intern. Bookkeeping Division. Data Capture and other functions relating to the bookkeeping Division.
Thabo	Risk	078 004 3864	Learner. Starting to obtain some exposure to Short-Term insurance Medical Aids, GAP Cover and Life Insurance.