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Curricula, polio, and NCDs: a panoply of potential progress

News of significant funding to review Africa's medical school curricula and initiate reforms to improve their relevance is highly encouraging. The truth is, in many countries, universities have been graduating students who have really not had the quality of teaching or breadth of clinical exposure to equip them for the challenges faced. Whilst curricula are constantly evolving and updating in other parts of the world, many in Africa have remained rigidly inflexible for decades with inevitable results. A significant review leading to a reorientation of training to make it more relevant to tackle Africa's disease burden is to be welcomed.

Will polio finally be vanquished? Another synchronised immunisation campaign is underway to try to finally eradicate the virus. Small outbreaks springing up in different countries mean it needs to be a programme of military precision, involving thousands of health vaccinators and millions of vaccines. It can only remind us of what might have been had misunderstandings not arisen in Northern Nigeria in 2002, when global eradication was so nearly achieved before vaccinators were ejected from Northern states when rumour spread that they were part of a conspiracy to make the people infertile and/or infect them with HIV. The cost of those rumours, both human and capital, has been unbelievably high, and with cases starting to crop up again in places where it had previously been thought to have been eradicated, the current campaign holds huge importance. The hope now must be that finally, the virus can be contained. It

would be a remarkable achievement in such a mobile world.

And as another year draws to a close, once again it is time to start reflecting and looking forward. This year has very much been the year of the mother and child. Backed by a superb advocacy campaign, significant funds have been mobilised to address the scandal of Africa's maternal mortality rates. Next year it looks like being the turn of the Non-Communicable Disease community to put forward its equally compelling case for increased funding and broader and better initiatives to address diabetes, asthma, cancer, and cardiovascular disease, to name but four areas. One wonders whether new money is being found, or whether in reality as each new campaign gains momentum, so we rob Peter to pay Paul as funding is redirected from some other now unfashionable cause. It remains a shame that people have to campaign in such a vertical way. Healthcare ought to be deliverable across a broad spectrum as needs demand without having to champion specific causes. But alas with finance at a premium, we remain entrenched in a war of priorities.

Best wishes

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