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PROGRAM NAME: WOMANITY – WOMEN IN UNITY

GUEST NAME: DR. RADMILA RAZLOG – HEAD OF DEPARTMENT OF COMPLEMENTARY MEDICINE – UNIVERSITY OF JOHANNESBURG

SPEAKER	TRANSCRIPTION
DR. MALKA	Hello, I'm Dr. Amaleya Goneos-Malka, welcome to 'Womanity– Women in Unity'. The show that celebrates prominent and ordinary African Women's milestone achievements in their struggles for liberation, self-emancipation, human rights, democracy, racism, socio-economic class division and gender based violence.
DR. MALKA	Joining us on the line today from Johannesburg in South Africa is Dr. Radmila Razlog who heads up the Department of Complementary Medicine at the Faculty of Health Sciences at the University of Johannesburg. Welcome to the show!
<b>DR. RAZLOG</b>	<b>Thank you very much it is an absolute pleasure joining you today.</b>
DR. MALKA	Dr.Razlog, as I mentioned in the introduction, you head up the Department of Complementary Medicine, according to the school's website it describes the discipline as being a broad set of healthcare practices which are not part of the country's traditional or conventional medicine, but it can be used independently or alongside such therapies and that complementary medicine professions in South Africa consist of a diverse range of disciplines which include Phytotherapy, Homeopathy and Acupuncture. Please can you share some insight into the disciplines as well as the types of conditions that you treat?
<b>DR. RAZLOG</b>	<b>Okay sure, so if we speak about Complementary Medicine in South Africa, probably the easiest way to understand Complementary Medicine is to understand who regulates us and where we fit in within the healthcare scenario in our country. So Complementary Medicines are regulated by the Allied Health Professions Council of South Africa whereas mainstream medicines then are regulated by the Health Professions Council of South Africa or maybe other regulatory councils like for nursing or pharmacy, etcetera. So we are regulated by the Allied Health Professions Council of South Africa, so it is a statutory health body that looks after all Complementary Medicine professions and exactly like you said, there are many Complementary Medicines, maybe not all recognised and regulated in South Africa, globally there are many that people can turn to to use as a healthcare option, but in South Africa we have Aromatherapy, we have got Ayurvedic, we have got Chinese Medicine and Acupuncture, we have got Chiropractic, we have got Homeopathy, Naturopathy, Osteopathy, then Phytotherapy, which is your herbal medicine, Reflexology and then we have also got Therapeutic Massage Therapy and lastly Unani Tibb and those are all the Complementary Medicines that are regulated within South Africa so that you know there is a statutory body that looks after these professions and ensures the health, the wellbeing and the safety of the public that make use of these Complementary professions in our country. So, from our university, the University of Johannesburg where we offer certain Complementary Medicine professions, we the Department of Complementary Medicine, we offer an undergraduate qualification that includes the Homeopathy and the Phytotherapy, along with that you would also within the domain of Acupuncture and you can exit after four years as an Acupuncturist and then you go on into your masters year</b>

	<p>where you would then be able to register with the council as a registered practitioner either as a Phytotherapist or an Acupuncturist. We also offer post graduate diplomas in these fields, so these qualifications in Complementary Medicine can become available to other medical practitioners, so they have to be practitioners and probably the easiest way just to understand that is that we get a therapist and we get a practitioner, when we speak about a practitioner, a practitioner is someone that is able to consult with a patient, take an extensive case from the patient, examine the patient and arrive at a diagnosis, whereas the therapeutic Complementary Medicine therapies would not actually be able to diagnose the patient, they would just be able to offer their therapy to the patient that comes to see them.</p>
DR. MALKA	<p>That is such an extensive range of offerings and it is good to know also from a credibility point of view that you have got practitioners in place who are registered within an associated body and that they undergo a four-year qualification to become practitioners. Typically what would you say are some of the more common conditions or why would I go to a Complementary practitioner versus a traditional practitioner?</p>
DR. RAZLOG	<p>Yes, I've got you. So I think when we look at the different Complementary Medicine modalities that are made available to people, obviously the therapeutic practitioners, that usually is about a four-year study, so we have got the bachelor's which is four years, as soon as you become a practitioner you have to complete the masters to get registration, so that qualification in its entirety to exit as a professional in the field of Homeopathy or Phytotherapy is going to take you about six years and there is also an internship with that. So it is a long road to ensure that you are adequately equipped with all the necessary skills from a medical point of view, to be able to diagnose and evaluate your patient and do rigorous assessments and tests that you need to arrive at a correct diagnosis and then possibly the main difference there from a mainstream conventional approach is that Complementary Medicines use different medicines. So we might arrive at the same diagnosis as a profession where we are treating patients for medical conditions, but our treatment approach is different, so whichever Complementary Medicine, each of these disciplines that I have mentioned all have their own scope of practice and they all have their own treatment approach and they might also have their own medicines that form within their material medica/pharmacopoeia that they use to treat their patients. So if you are a practitioner, so that would relate to the domains of chiropractic, homeopathy, phytotherapy and when you are a registered practitioner you can treat any patient who comes to see you, provided obviously that your treatment approach is based on a best practice approach. So you feel that you are adequately skilled with the necessary expertise and the scope of practice to be able to help that patient and most of the time if the patient is coming to see you, whatever their complaint is, there will always be some treatment approach from a discipline point of view that we can offer the patient based on their presenting systems, based on what we have diagnosed and a lot of the time and a lot of the way that we teach is that it is not an alternative approach and we have moved away from the term Complementary and Alternative Medicine to Complementary because we see our disciplines and our approaches to healthcare and wellbeing and improving the health of individuals as an integrated approach, so we can offer something from a Complementary Medicine point of view but there might be other treatments or other approaches or other interventions that may be necessary at the same time. So it is an</p>

	<p><b>integrated approach, but I think from a Complementary Medicine point of view approach is that patients come and see Allied Health Practitioners is because they are looking for a more natural approach to managing their healthcare, they have possibly in some instances tried a whole lot of different interventions from the mainstream perspective or maybe even from another type of perspective and they have not got the relief of the outcome that they wanted from the care that they received. So a lot of the time I think patients do come in where they have had a complaint for many years, they are unable to resolve the issue and they are looking for a different approach and obviously hoping for a more favourable outcome.</b></p>
DR. MALKA	<p>And in terms of women's health in particular, are there any specific ailments that present which Complementary Medicine is almost more beneficial than a conventional?</p>
DR. RAZLOG	<p><b>So I think women in general seem to seek Complementary Medicine more so than males and I think this is more because of this willingness to identify and say like I really need the care and I need the help and I am not feeling better and I am hoping to get the kind of treatment that possibly is more natural in its approach, that I know is healthier for my body and allows me to take ownership of my health and healthcare. So a lot of the Allied Health Medicines and the Complementary Medicines, we offer supplementation, there are minerals, there is dietary advice and then there is obviously all the medicines, but most of the medicines do not have severe adverse or toxic side effects and I think just in society today people are seeking, particularly women I think, are seeking a treatment approach that speaks to that more specifically for them, where they are hoping to treat their healthcare issues and this can be a diversity of healthcare issues along their lifespan, you know, starting from as early as the start of menstruation and then into teenagehood and into then fertility and pregnancy and then obviously with PMS related kind of symptoms and into menopause, especially where a treatment approach or a medication or something has to be used more routinely and possibly more chronically, that you know you are taking something natural, you are hoping that this treatment approach is going to be beneficial and actually has no adverse or any side effects from the medication that you are taking.</b></p>
DR. MALKA	<p>So often people end up taking more medicine to counteract the effects of the side effects from the original prescription, but I wanted to ask you, you have already explained that the process of becoming a practitioner is four years, plus a masters, so effectively a six-year cycle; what made you decide to specialise in Complementary Medicine as opposed to choosing a more conventional route, because it is literally the same timeframe?</p>
DR. RAZLOG	<p><b>Yes, I think it was also to do with my upbringing and that, you know, with my origins, my parents, we really always had this natural medicine type of based approach to health and healthcare and really you allowed your body to heal itself, to go through the process of recovery and cure by using your natural resources and your natural herbs and your diet and your environment to assist you with it. So I think it was something that my parents always embraced, this whole concept of natural healthcare and it was just something that I had always loved, so my passion was always in medicine and health and wellbeing and empowering people to look after themselves and to understand their bodies and to make the right judgement calls when you need help and also not to just ignore these signs, you know, seek help when you need it. So my passion was always in medicine and then I think this love for more of a holistic natural approach</b></p>

	to healthcare was, it happened at the same time that in 1993 the university started offering the courses in Complementary Medicine and that is really where my interests lay. So yes I was obviously on board with it because it is something that really resonates with who I am what I really love.
	<b>AD BREAK</b>
DR. MALKA	Today we're talking to Dr. Radmila Razlog who heads up the Department of Complementary Medicine at the Faculty of Health Sciences at the University of Johannesburg. We would love to receive your comments on Twitter: @WomanityTalk.
DR. MALKA	You're teaching students, you are aware of the mix between both the conventional practice as well as the complementary side; what proportion of students are pursuing the complementary route as opposed to going the traditional route?
DR. RAZLOG	<b>So I think complementary medicine sometimes is misunderstood and I think particularly with students ending their matric year and they are faced with these two words that sound quite similar, maybe not sound similar but look quite similar, Complementary and Conventional medicine and obviously their approach, it's very different with what we are offering a conventional medicine point of view offers a completely different approach to the management of the condition from a drug based kind of discipline. I think in many instances there is a lot of overlap to the diagnosis to the investigation and possibly more the soft touch skills with regards to the care and the treatment, but the medicines are uniquely different and that is what really differentiates us. So I think students really have to understand that these disciplines are different from a point of view of the medicines that you are giving the patient and also one is not a hospital based kind of setting either, you know, so as a qualified practitioner, as a homeopath or phytotherapist or Chinese Medicine as in acupuncture, most therapists then will establish their own private practices and they will consult with patients that way, but at the end of the day we are treating ill or sick people that want to come and see us to improve their health and wellness and they are choosing us as opposed to any other type or form of medicine because they are hoping to get the relief that they are looking for. So we definitely have grown in popularity, our new qualification started in 2020 when we re-curriculated all our programmes, in the first year we had around about 1,500 to 2,000 applicants only to fill 40 positions, that doubled to close to 3,000 and this year over 7,500 applications to take 40 to 45 students. The demand is definitely there and I think young graduates, young matric students are looking for something that is, maybe just something a little bit different in healthcare, you know, something where it is not a traditional conventional route, but I can offer you that from a slightly different perspective.</b>
DR. MALKA	Mmm, that is really interesting I mean huge demand and a handful of positions being available. And in terms of gender ratios, what types of splits are you seeing with students coming in and going on to do their studies?
DR. RAZLOG	<b>So we have both males and females that are interested in the qualification, we are definitely more female predominant, we have far more females in the course than males and out of that group of 45 to 50 students that we accept into first year, we probably had about 40 females within that group. A lot of these degrees and I can speak from when I first started off my studies, especially chiropractic because both qualifications became available simultaneously and I think at that point it was definitely more male driven type of qualifications, but over the years we have definitely seen a transition and I think maybe chiropractic possibly also still more</b>

	<p><b>male driven, whereas complementary medicine when we think about it, I think it's this holistic kind of more natural approach to healthcare which I think really resonates and speaks to young women who are interested in healthcare and feel that they have the necessary qualities and values that they feel that they could practice as a homeopath or a phytotherapist or an acupuncturist.</b></p>
DR. MALKA	<p>One of the things that I appreciate about medicine and health and science in particular is the aspect that it is continuously developing, that there is always research happening, that there are always routes to being able to improve things and we also see that with the way that life expectancy is increasing across the world and part of that is an attribute to better health, which speaks to those advancements being made in the field. Can you tell us about some of the more significant collaborations or research outputs that you've been working on, both within the South African context and perhaps into the continent as well?</p>
DR. RAZLOG	<p><b>With the qualifications that we offer within Chinese medicine and acupuncture specifically but specifically the domain of acupuncture and in homeopathy and phytotherapy and with the re-curriculation now in the last couple of years, we have entered into a whole lot of interesting collaborative partnerships signed MOUs with China and Australia. Within China we have got MOAs with Fujian University, the [Baptist] University of Hong Kong and the Fujian Medical University and I suppose because the discipline of Chinese medicine and acupuncture is so established in China, the majority of the patients make use of Chinese medicine and acupuncture as a primary first line treatment, so Chinese medicine and acupuncture and conventional medicine are run parallel with each other and at the same time you will receive your Chinese medicine care and your acupuncture you would probably receive from your conventional medical care as well. So it is a well functioning university, all these universities within China that incorporate the Chinese medicine aspects in acupuncture and mainstream medicine and definitely with homeopathy a similar kind of scenario that we see in India where healthcare runs holistically and patients then have the choice to decide what they feel will be their best healthcare option in order to optimise their wellbeing.</b></p>
DR. MALKA	<p>Thinking about what's happening in other countries around the world, so India, China, Eastern Medicine, which they have brought in, Western medicine as almost the complement to the Complementary or Allied medicine to get that holistic healthcare perspective happening. Do you think there is a lack of awareness within the African context of what Complementary Medicine can do so that it could become a form of primary healthcare?</p>
DR. RAZLOG	<p><b>I definitely think there is a lack of an overall understanding of what complementary medicine can offer and I think with a lot of the research that we have been doing as a university, as a department, is to really look at this awareness and the knowledge and the experiences of patients that use these different complementary medicine modalities and really try understand their experiences and how we feel we can develop our practices in order to enhance what we offer to the public, to the community, to society in order to enhance wellbeing and that really is our key focus as an education institution is to really look, we are hoping with the National Health Insurance that complementary medicines could be incorporated in that so that we are able to assist in the burden of disease and we are able to contribute towards healthcare and that our modalities and treatments and medicine approaches become available to patients as</b></p>

	<p><b>other type of treatment options within the system. So, exactly like you said, I mean China has that in place already, India in place and we are hoping that this would obviously become an option for our South African community as well.</b></p>
DR. MALKA	<p>Before we move away from the discipline entirely, it really struck me on the popularity of the field, with you having a capacity of 40 students, but getting 7,000 odd applicants; how would you say that the school's teaching methods have changed in the face of the COVID-19 outbreak and with the possibility of perhaps being able to increase intake through different teaching methods that may be more blended than traditional face-to-face.</p>
DR. RAZLOG	<p><b>So I think we're really privileged as a department to be housed in the University of Johannesburg, an institution that is really striving towards achieving all the goals of 4IR and expanding our teaching to beyond just the classroom. So exactly like you say, of course we have got a blended teaching approach, I think a lot of it during COVID moved to online, especially the theoretical work that is related more to theory based knowledge, but where we did more practical and clinical orientated work, you still have to engage with the student and the student has to engage with the patient because those kind of skills are a little bit more difficult to learn virtually, but having said that, technology is phenomenal and we were able to do so many things online that we historically thought you could only do face-to-face and the advancement in the software that is available and the technology and the programmes where things are so virtually real that you can actually virtually you know almost touch, see and feel the patient while you taking their case, but they are not in front of you and obviously with regards to the profession and all Complementary medicine practitioners, the Allied Health Professions Council, I think we all realised that you have to move away from some degree to this face-to-face and I think mainstream, all forms of medicine realised that, you know, sometimes telemedicine is something that has to be considered and with COVID now it had to happen, the transition had to be made to move away from face-to-face and realise that some things can be done virtually. Technology is phenomenal and students are still able to learn, understand and comprehend really complex concepts and develop certain clinical skills without actually being in direct contact with the patient, but having said that, we still like the contact because as complementary medicine and especially in our fields of study, is that the student has to learn to engage and interact with the patient and that is part of the homeopathic and phytotherapeutic healthcare is you have to be able to connect with your patient and you actually have to be with your patient and feel your patient realistically, not virtually, in order to understand that. So our clinics, we were still fortunate, we were able to run them through COVID, obviously with hard lockdown levels we had to make adjustments there, but our patients were afforded the opportunity still to come in and see our students in our masters year in our clinics that we run and still have the benefit of face-to-face patient/practitioner care.</b></p>
DR. MALKA	<p>It's kind of forced us to innovate in different ways and to change and again, let's use the word, conventional approaches.</p>
DR. RAZLOG	<p><b>Yes, exactly, yes.</b></p>
	<p style="text-align: center;"><b>AD BREAK</b></p>
DR. MALKA	<p>Today we're talking to Dr. Radmila Razlog who heads up the Department of Complementary Medicine at the Faculty of Health Sciences at the University of Johannesburg. We would love to receive your comments on Twitter: @WomanityTalk.</p>

DR. MALKA	Dr. Razlog as a gender based programme we constantly focus on the importance of building female leadership capacity for the future women, both to our country and also to the continent and around the world. As a female doctor who has achieved a tremendous amount, how do you see female leadership in South Africa, whether it is in the medical field, political space, academic or professional arena?
DR. RAZLOG	<b>So I think female leadership within these domains has definitely grown over the years, I think women naturally would make good leaders in medicine, because of the values that many women would bring forward as a female doctor, as a caring healthcare practitioner. So I definitely think this pertains and I agree with you, from a medical point of view that in order to enhance, women have to be empowered to be able to be in those positions, that they are able to offer that benefit to the community and to the patients and to the people that they see.</b>
DR. MALKA	And as you head up your department, what types of leadership strategies have you found to be most effective?
DR. RAZLOG	<b>So I think commitment is very important and its commitment to yourself, it's commitment to your family, to your team, to your community, to your profession, to your patients. So it is about committing to this complex existence of everyone that works around you and leading them strategically in where you feel you want to direct your team and I think when you do this, this commitment that I speak about that has to consider everyone, is that you have to show empathy along the way and really have an emotional IQ because it is not about pushing your own leadership goals, it's about pushing and driving your team and then the accountability and the sincerity of your values, of what you want to achieve and why you want to achieve that for your team or the community or the patients, their needs and the needs of others that are immediately associated with them. I think you need confidence and confidence is not something that will happen automatically, that happens and grows and develops with you as you develop those skills and as you develop the commitment and as you develop the knowledge and the understanding and as you fail and as you decide, you have got to pick yourself up and carry on again, I think I can do it next time around, if I cannot do it the next time maybe I will able to do it the third time round. So obviously as a leader there are always challenges, there is always risk-taking, I think they have got to be fairly calculated though, because you are not only looking out for yourself you're looking out for your entire team and everyone around you, that you have to make sure that what you are trying to embark on will benefit everyone. So I think overall my understanding of leadership within the university as the head of department, with the team now of nine staff members altogether, I think it is really that we work as a team and we all have our own skills, we have all up-skilled ourselves, we empower each other to up-skill in order to move forward, so we do it collaboratively, we do it integratedly, even as a team within our department and we know that we are taking those steps together and in order to excel as a department my attempt is to lead us as a team where we all contribute to providing possibly what is in Africa, unique courses that aren't available anywhere else in Africa and possibly differently throughout the rest of Europe other than maybe what we're seeing in Australia and we're seeing in China and we are also a female driven department, we only have two males within our department and we have a whole lot of women that are really striving to enhance and develop Complementary Medicine within our university, within society and you</b>

	<b>know, offer these qualifications throughout our country.</b>
DR. MALKA	Thanks for sharing some of your leadership traits and styles and also the trajectory that you are working on with your team in the department. The trouble I have on this topic is the fact that there seem to be so few female leaders across different disciplines, particularly in the business environment. Given what you know now, what in your opinion can we do that would help benefit women and help more women get into leadership positions?
DR. RAZLOG	<b>So I think our qualification, the process to the qualification it is a six year qualification and I think a lot of the time when our students come in we adequately screen our students to know that, you know, have the academic skills and ability but also have the correct type of skills as a healthcare practitioner. So right from the start we see these students and particularly female students who are so committed to moving through the system to attaining the qualification so they can improve their lives and the lives of their family and the livelihoods of their community and particularly as a woman, because we find that many of our students, they have come from communities and families where they would be the first female to enter into university, even more than that, the first female that has had the opportunity even from certain types of funding or because of hard work in matric where they are actually pursuing their dream and I really think, you know, within our department, within the university, with our re-circulation we look at so many concepts of personal and professional development and even the understanding this as a young woman who has now taken on this qualification and moved away from their rural town and is now alone within the City of Johannesburg, to be able to empower them to make them feel safe and secure enough, not feel fearful of stepping outside their residence to attain their dream. So yes I think it's more just about increasing the number of students that enter into the qualification, but it is more about keeping them within the qualification and not allowing them to drop out because of financial obligations or because they have to come home to look after their younger siblings or because the parents have moved away and the granny is the only one at home, it's about trying to keep them within the system, because as young women and as future female doctors, they have so much to offer society once they're done, but they have to reach that end point. So there are so many confounding and so many factors along the way, especially with a long qualification, you know, it's not like you're in and out within a year with a certificate course or a bachelor's, I mean we're saying that you have to attain your masters degree at the end of the day to be registered as a practitioner who is able to legally practice within the country in order to eventually legally be able to practice. So it is a really complex scenario and I think socio-economic factors have a massive influence on that, so these are all factors that we do consider, but I think it has to happen beyond just what we can do in the classroom.</b>
DR. MALKA	Thinking about the aspect of journeys and we have talked about where you are today, but can you tell us about some of your pivotal moments in life growing up, which in a way helped direct you to this point?
DR. RAZLOG	<b>Most importantly it was always something that I wanted to do in health, you know, medicine and wellness was something that I was always in pursuit of, it was just in me from a young child and I think possibly the most pivotal moments were where, with my father specifically, but with other people in my family where they had got ill and they had sought a certain type of treatment approach and didn't get the outcome that they wanted from the care that they were receiving and specially with my</b>

	<p>father, he sought to see a homeopath for a chronic condition that he had suffered from for years and years and he received the care that he needed and the medicine, that was obviously well indicated from an individualised approach and he made such a phenomenal recovery and I think that is really and as a student as well, I remembered my years as a senior student working in the clinic and it's that experience of working with patients and realising what a phenomenal contribution you have made to someone's life that presented with this condition for so long and all I did was just listen to them and take their case and analyse it and decide this was your medicine that you needed and they would come back afterwards and say wow, just thank you so much, I cannot believe I feel so much better and I think those are the pivotal moments and remain today, when patients come back and say I really think you changed my life and thank you for that and we offered short learning programmes in fertility and pregnancy a couple of years back and I remember all those practitioners came back afterwards and said you cannot believe how many patients come back afterwards and are so grateful that they had this opportunity to pursue complementary medicine as part of their process in order to fall pregnant and are so grateful for that outcome. So I think those are pivotal moments for all complementary medicine practitioners where you know your care has had such a tremendous impact on someone and you've changed their life for the good.</p>
<p>DR. MALKA</p>	<p>It must be very rewarding seeing the success of your work and staying with this notion of success, one of the questions that I ask all my guests on the show is about what they consider have been contributing factors to their success. People speak about discipline, hard work, faith, a particular person in their life and what I find interesting is everybody's got a different story or a different set of ingredients; so could you share with us what have been some of the key drivers to your success?</p>
<p>DR. RAZLOG</p>	<p>So I think a lot of women do say that, but I really think my mom and grandmother also, you know, they always had those values and they wished to instil those values in the grandchildren and my mom and her daughters and I think those were the driving forces for us as well, in that we knew what skills we needed to attain what we wanted to and they supported us and encouraged and motivated us in order to achieve those goals and I can honestly say in the department that I work, the women that I work with are my role models, from my executive dean to all the management that work within the university, but my fellow colleagues within my department too and I think it is related to the teamwork and that we all realise we have so many values and benefits and talents that we can jointly contribute, that leadership is a very small part of it to me, it's about harnessing all those skills from everyone and making sure that wherever that talent lies is that we make sure that that person is contributing with regards to their talent and then I am very privileged to be working with Professor Heidi Abrahamse as my research co-supervisor for my own doctoral studies, she heads up the laser research unit at the University of Johannesburg and it's an absolute privilege working with her as a woman, as a female researcher who has done so much in research and development of laser research specifically and especially for me Prof Abrahamse has done a lot of research with laser and cancer research and I am really privileged to have her as my co-supervisor. She also just embraces all those concepts of a brilliant leader and through the years now that I have been working on my PhD she has also taught me so much as a woman leader, as a female leader.</p>

DR. MALKA	Yes, we were privileged to have her on the show a couple of years ago and the fascinating subject matter that she deals with. I would say part of my key takeouts from today's discussion is the aspect of holisticness and this view where the whole is greater than the sum of the parts, in everything that you've spoken about, the team dynamics, the contributions that people make from their different specialities to contribute and to make a greater effect. As we close out today's conversation could you please share a few words of inspiration or motivation that you'd like to pass onto girls and women who are listening to us?
<b>DR. RAZLOG</b>	<b>Thank you yes. I would just like to encourage all young girls who really have a passion and a care and this willingness to help people from a medical point of views, to do whatever they can to get there and we understand and we appreciate that the journey isn't an easy one, but hopefully you also have your leaders and your women and your female mentors that you can look up to to try and help you and guide you to achieve those goals and as a female in healthcare, I would really like to see more women who aspire to be female leaders within healthcare and hopefully promote complementary medicine, obviously it can go onto a whole new discussion of traditional medicine and bringing traditional and complementary medicine to the foreground that our society and our patients and our community have those options of healthcare available to them, but having said that, that those options are based on an evidence based medicine approach and to ensure your patients health and safety and wellbeing moving forward.</b>
DR. MALKA	Thank you very much it's been a pleasure to host you on the show.
<b>DR. RAZLOG</b>	<b>Thank you so much, thank you.</b>
DR. MALKA	<b>PROGRAMME END</b>