



Greetings everyone! Hope you are all doing well. Thank you to all those attending the 42nd SASOG Congress held at the Century City Convention Centre in Cape Town on the 5-8th of August 2026. Thanks to the University of Stellenbosch and the entire the LOC of the Congress for their massive work and effort in staging a world class, fantastic Congress featuring a strong International Faculty augmented by wonderful and strong local speakers, academics and researchers. The academic content was brilliant characterised by great discussions, exchange of views and superb networking. The Congress also featured a packed social programme that everyone enjoyed. The feedback from delegates has been fantastic - full of praise for this wonderful and inspiring Congress.

I have decided to share with you my Presidential address that was delivered on the 6/08/2026 at the Congress, as my **August 2026 From the President's Desk Newsletter**, to benefit those who may not have been able to attend the Congress or those who may not have attended the session.

SASOG Presidential Address -42nd SASOG Congress: 06/08/2026

Prof Ismail Bhorat

Introduction

I would like to warmly welcome all of you to the 42nd SASOG Congress here in beautiful Century City Convention Centre and great big thanks to the University of Stellenbosch, the entire LOC of this Congress and in particular the chairs Prof Hennie Botha and Prof Stefan Gebhardt for making this Congress a reality. We appreciate and recognise your hard work and endurance. We have an amazing sold-out congress for you with a fantastic international panel and Plenary sessions, parallel sessions, trade sponsored symposia and workshop events to cater for everyone, super-subspecialists, subspecialists and generalists in addition to a packed social programme. The theme of SASOG 2026: From Data to Dignity: transforming Woman's Health through Research and Advocacy is indeed an inspiring theme. Remember being here is not only about learning, teaching and academics but much about networking, reigniting old relationships and of course making new ones. It is also important to step and look back



where we were 4-5 years ago in the midst of Covid and although it seems a distant memory let us appreciate being able to be together in-person at these meetings which we often take for granted.

We also hosted a most successful FIGO Congress here in Cape Town in October 2025. By all the feedback received internationally and from FIGO HQ it was regarded arguably as one of the most successful FIGO congresses ever. I want to give a big shout out to all the LOC members for the work dedication and commitment shown over the 2 years in organising this event – huge thank you to Prof Greta Dreyer and Dr Haynes van der Merwe the co-chairs and members Prof Priya Soma Pillay, Dr Peter de Jongh, SAATOG members Dr Janse van Rensburg and Dr Nacy Kazadi and yours truly. Well done LOC you have made SA proud.

At last night's President's Dinner, we honoured colleagues with Lifetime Achievement and Meritorious Awards. Lifetime Achievement Awards were presented to Prof Justus Hofmeyr for his globally recognised contributions to women's health, teaching, and innovation in low-resource settings; we honored Dr Johannes van Waart, SASOG Past President, for major organisational reforms, the establishment of a programme that had a major impact on the practice of obstetrics the BetterObs, and his impact on the country's medicolegal landscape; and Dr Phila Michael Shweni for more than 50 years of distinguished clinical service and teaching. We acknowledge their dedication, scientific excellence, and lasting inspiration to younger colleagues. Meritorious Awards were presented to the FIGO LOC for hosting the highly successful FIGO congress, Dr SP Moodley for his contribution to menopause and sexual medicine over the last 40 years and Dr BN Naidoo for his extensive service to O&G in KZN including teaching students and registrars and uplifting women's health for over 50 years and incredibly still active in practice. Congratulations to all these worthy recipients.

It is indeed an honor and privilege to have been elected to lead you now for 2 and a bit years. I stood here 2 years ago (actually in Sun City) when I was just 3 months into the Presidency. Much has been achieved in the last 2 years and I will present some of our accomplishments. I also want to pay tribute to all the past presidents who pushed the envelope in some way in this organisation that has contributed immensely to the



progress of women's health since its inception and served as a guiding light and protector of the profession even during periods of some stormy waters.

I am happy to report that the SASOG vision and agenda is being well and truly realised through a dedicated and committed Exco and Council and I want to give a big shout out to the entire current SASOG leadership for the wonderful and fantastic work and effort and dedication to the cause of improving women's health and being its custodian and safeguarding the interests of our membership.

Private Practice Business Unit

One of the most consequential structural reforms taken by SASOG in its 76year history was the formation of the PPBU in October 2024 which represents the private practice arm of SASOG, since our separation from GMG. As you may remember SASOG formally split from GMG in October 2024. The reasons have been articulated ad-nauseam in the last 2years through our various platforms and I will not re-engage with all the reasons suffice to say this gave SASOG an opportunity to forge a new path and enabled SASOG which I would like to call the new SASOG a new vision. By bringing private practice directly into SASOG as a dedicated business unit, the organisation has assumed clear responsibility and accountability to its members on matters affecting private practice. Under the astute leadership of Dr Sagie Naidu and Dr Peet Potgieter, the PPBU has strengthened stakeholder engagement, expanded support for coding queries through SAPPF and Healthman, introduced twice-monthly webinars, and advanced initiatives focused on **practice sustainability, fair remuneration, innovation, professional development, and digital transformation**. We have also embarked on comparative analysis with other medical and surgical disciplines and Identification of **undervalued procedures** and opportunities for tariff revision.

SASOG has supported SACHI (South African Classification of Healthcare Interventions), a new coding framework aimed at improving fairness, clinician input, and alignment between coding, funding, and clinical practice. Coding affects sustainability, professional autonomy, and appropriate care. SASOG has also rejoined SAPPF and



continues to advocate on tariff regulation, NHI, and draft obstetric regulations, ensuring our profession is represented in key policy discussions.

Protection and Medicolegal Strategy

SASOG Protection Fund (SPF): another innovative project reflecting and enforcing this new vision of SASOG in terms of how it sees itself as this representative organization in the future.

The development of our in-house Protection Fund is a response to years of medicolegal strain on the obstetric and gynaecological community and what I often refer to as “litigation abuse”. That strain has brought reputational harm, stress, and serious financial pressure. Our aim is to change that trajectory, promote ethical practice, and build a fund that truly serves the best interests of the O&G community.

This matters because it gives us greater control over our future. Compliance with SASOG practice guidelines and a strong claims history could be recognised through a dynamic subscription model, while any surplus could be retained to strengthen the fund or returned to members through lower future premiums. The aim is to reward good practice and reduce risk.

We are removing the profit motive (in the region of 25% in current insurance arrangements) and replacing it with a risk management motive – this will lead to better patient outcomes and savings to members.

The establishment of the SASOG O&G Protection Fund Trust has taken time but has progressed steadily. We have formally registered the Trust at the Master Office and we have all the regulatory aspects in place. While not yet operational, we are now in the final stages of the process.

A provisional **Membership Acceptance Criteria** document has been reviewed and provisionally accepted by the trustees. This document sets out the framework by which the fund will evaluate membership applications and communicates to applicants the factors that will be considered during the review process.



This is a major undertaking, and I thank the team for driving it forward. Our research suggests that litigation has declined significantly, in part because of the work of the Expert Opinion Panel and BetterObs, especially around cerebral palsy criteria, cord pH, placental histology, improved T21 screening protocols, and NIPT. Yet subscriptions remain high and data sharing remains limited. That is exactly why SASOG must build its own fund, develop its own data, and create a dynamic model that gives us greater control over our future.

As far as the SASOG Protection Fund goes the initial response to any claim or summons will be through a mediation process (contrary to current insurer's modus operandi) which is in fact favoured by the courts. The fund will insist on the use of a premediation clause in consent forms for adverse event consultation. SPF will not only result in better clinical practice, better patient outcomes, promote and reward ethical practice but deal with adverse outcomes in an alternate dispute resolution environment, in effect a whole new approach and strategy to the medicolegal question.

Public Leadership and National Advocacy

I commend SASOG and its daughter societies for responding swiftly and effectively to national crises. During public concern about endocrine-disrupting chemicals (EDCs) in sanitary pads and pantyliners, the Department of Health and the Minister of Health sought SASOG's input to shape a clear, evidence-based response. SASOG's review found no causal link between EDCs in sanitary products and adverse outcomes. This message was shared widely across media platforms, helping to reassure the public and demonstrating effective collaboration across SASOG's subspecialty societies. SASOG applied the same evidence-driven approach through SOOMSA in responding to concerns about autism spectrum disorders and paracetamol/Tylenol, finding no evidence linking the two.

SASOG issued a press release on the disconnect between private midwives and obstetricians/gynaecologists, following the Pretoria trial's wider systemic concerns. While supporting appropriately trained midwives and midwife-led care for low-risk pregnancies, SASOG raised concerns about unsafe midwife private practices, including



home deliveries without specialist or institutional backup. Emergency transfers without adequate documentation or clinical history create clinical and medicolegal risk for receiving doctors. SASOG called for meaningful engagement, stronger regulation, accreditation, and further input from the Nursing Council.

Robotic Society

We also launched a Robotic Society. At the last Council meeting, we proposed the exploration of a Robotic Society which was accepted. Robotic surgery is at a similar stage to laparoscopy 20 years ago and has the potential to transform gynaecological practice through greater precision, minimally invasive techniques, shorter recovery times, and improved patient outcomes. Although still niche, its use is expected to grow significantly over the next 5–10 years, making early guidance, accreditation, and regulation important. SAGRA was launched on 09/05/2026, with Prof Leon Snyman elected to lead the EXCO and a constitution adopted. SAGRA will become a SASOG daughter society and form part of the SASOG Subspecialty Affiliate Committee, enabling it to set practice guidelines, address accreditation and regulatory issues, and promote inclusive, accessible development of robotic surgery.

Subspecialty Engagement

SASOG has created the SASOG Subspecialist Affiliates Committee (SSAC).

The objectives of SSAC are to:

- Identify and address **unique challenges faced by subspecialists.**
- Strengthen collaboration and unified representation between SASOG and the subspecialties.

Align PPBU initiatives with subspecialty needs.

SSAC will support subspecialty societies with shared administrative functions, including accounting, financial management, website development, and logistics, while preserving their independence and academic focus. By strengthening interaction



between our subspecialties and affiliated societies, SSAC will reduce silos, improve alignment, and strengthen SASOG's collective representation.

BetterObs and BetterGynae

SASOG protects and maintains standards for members via many platforms through BetterObs and BetterGynae guidelines, clinical benchmarks, congresses, CPD meetings, the *BetterObs Matters* monthly publication, PPBU support, and PPBU webinars. These initiatives also support the prospective Protection Fund. BetterObs recently updated all 33 guidelines and firmly establishing BetterObs as SASOG's obstetric scientific arm. The updated guidelines will be uploaded to the website and app. Work is also underway to update the BetterGynae guidelines. These guidelines promote excellence in clinical practice, and members are encouraged to use them.

AI in OBGYN:

SASOG encourages members to adopt AI tools that improve practice efficiency and reduce administrative time. Practices that have incorporated AI report meaningful gains in efficiency. SASOG is working to promote responsible AI use in members' practices and has developed an association with Heidi Health, which is offering SASOG members 10% off annual Heidi Health Clinician subscriptions and 15% off annual Heidi Health Practice tier subscriptions for 2026. SASOG will continue engaging with other providers to expand member options over time.

Update of Membership

Membership has grown to 917, the highest in SASOG's history, reflecting strong confidence in the organisation's leadership, direction, and expanding role across academic practice, private practice, policy engagement, crisis response, innovation, and subspecialty coordination. Growth of this kind is not only a positive metric; it is also a signal that members increasingly see value in a society that is visible, relevant, and



active on the issues that matter. It gives SASOG a stronger mandate and a stronger platform from which to lead.

In summary, these developments reflect an organisation that is becoming more strategic, more coordinated, and more influential. SASOG is strengthening its foundations while also positioning itself to respond to future challenges with greater authority and coherence. I believe this is a positive trajectory for our society and for the profession we serve.

I wish you all a wonderful Congress and hope you have the most fantastic experience.

Prof Ismail Borat

President of SASOG