

Kathrine Scholtz

I graduated with a PhD in Reproductive Biology from the University of the Witwatersrand in 2010, after which I completed a post-doc at the University of Limpopo in cancer genetics. In 2013, I joined the then Department of Medical Sciences at the University of Limpopo as the head of the Genetics Unit. The Genetics modules at the institution had been dormant for about 10 years and I was tasked with reviewing and reviving both the 3rd year Introductory Genetics course and 4th year Advanced Genetics curricula. At the beginning of my academic career, I was involved in a number of Genomics and Bioinformatics projects and initiatives, including serving on the H3ABioNet Bioinformatics Education Committee as a committee member, a three-month research visit to the JCVI in San Diego, H3ABioNet Curriculum Development Workshops, serving on the Southern African Human Genome Programme (SAHGP) core committee and various genomics and bioinformatics workshops. With Prof Phillip Venter as my mentor and friend up until his retirement, I developed an interest in congenital birth defects and genetic counselling, leading me to complete the occasional courses in Medical Genetics and the Principles of Genetic Counselling at the University of Cape Town in 2015 and 2016. In 2019, I registered for the MMedSci in Genetic Counselling at the University of Cape Town, which I am hoping to complete by the end of 2021. In 2020, I resigned as an academic at the University of Limpopo to concentrate on research and bringing medical genetic services to the province, and now serve as a research associate within the Department of Pre-Clinical Sciences. Over the past few years, the focus of the majority of my research projects is genetic disorders within the Limpopo Province, and an attempt to better understand the current situation in the province with regards to congenital disorders and the need for medical genetic services. The Limpopo Province, while being one of the largest provinces, is one of the most under-resourced provinces with regards to genetic services and genetics capacity. We need to strengthen our participation in the province through patient and care-giver support groups, genetic counselling services, clinical geneticists, genetic diagnostic services, and research. My ultimate goal is to be the driving force behind the inclusion of medical genetic services, within the provinces' health care system, both in the public and private sectors.