

TURNING IT OFF THEN ON AGAIN

Hormonal male contraceptive regimens are not only effective but also reversible, according to an extensive data re-analysis. Australia-based researcher Liu and colleagues examined data from 1549 healthy men, aged 18 to 51 years, who had taken part in a total of 30 studies of male contraception with various androgen or androgen-progestagen regimens conducted between 1990 and 2005. Routes of administration varied and included oral, intramuscular, transdermal and subcutaneous routes. Overall, the average time to recovery to a fertile threshold of 20 million sperm per mL of semen was 3.4 months; with 90% recovery within 1 year and 100% within 2 years. Liu and colleagues say their findings increase the promise of new contraceptive drugs, allowing men to share more fairly “the satisfaction and burden” of family planning.

Lancet 2006; 367: 1412-1420

FURTHER, FASTER, LONGER

A small trial conducted in Melbourne has suggested that the angiotensin-converting enzyme inhibitor ramipril may substantially improve the symptoms of intermittent claudication in some patients with peripheral arterial disease. Ahimastos and colleagues compared 10 mg ramipril daily with placebo in 40 people, mainly men, with stable intermittent claudication due to superficial femoral artery stenosis or occlusion and who did not have diabetes. After 6 months of treatment, ramipril was found to have improved the pain-free and maximum walking times over placebo by about 4 minutes and 7 minutes, respectively. Distance walked, speed of walking and the ability to climb stairs also improved. The researchers said ramipril may improve blood flow to the lower extremities via vasodilatation, angiogenesis (collateral formation) and atherosclerotic regression.

Ann Intern Med 2006; 144: 660-664

TO WET OR NOT TO GET WET?

North Queensland researchers have found that, at least in their tropical climate, allowing a wound to get wet in the first day or so after a minor skin excision will make no difference to the incidence of subsequent infection. Heal and colleagues ran a randomised controlled trial involving 857 general practice patients allocated to either keep their minor wounds dry and covered for 48 hours post-suturing or to remove the dressing and wet the wound within the first 12 hours. The infection rate in both groups was around 8% to 9%.

BMJ 2006; 332: 1053-1056

CHOOSING THE DARK SIDE?

Belonging to the Goth subculture — a genre of punk with a dark and sinister aesthetic — is a strong predictor of self-harm and suicide attempt in teenagers, according to a small Scottish study. The study followed 1258 youngsters from the age of 11 to 19 years, seeking information about personal characteristics, including identification with any of various youth subcultures, such as heavy metal, grunge, skater and hip-hop, as well as asking about any self-harm and suicide attempts. Identifying with the Goth culture was the single, best predictor of either self-harm or suicide attempt, and was even stronger than prior depression. Researchers said their data suggested that young Goths either modelled their behaviour on that of their peers and sub-cultural icons or, more likely, were attracted to this subculture because they already had a propensity to self-harm.

BMJ 2006; 332: 1058-1061



HEALTH AND DRUG ALERT

Women taking selective serotonin reuptake inhibitors (SSRIs) in the latter half of their pregnancy may have an increased risk of their offspring developing persistent pulmonary hypertension of the newborn (PPHN), warns a health and drug alert in the *CMAJ*.¹ The alert was based on a case-control study which found a dramatic sixfold increase in relative risk;² however, the absolute risk of having a child with PPHN still remained low, rising from 0.1% to 0.6%, an absolute increase of 0.5%.

1. CMAJ 2006; 174: 1555-1556

2. N Engl J Med 2006; 354: 579-587

TRIMMING THE NOT-SO-FAT

Pioneering Australian researchers have deliberately crossed one of the usual thresholds for bariatric surgery (a BMI of 35 kg/m² or more), with sizeable results.¹ In a randomised controlled trial, they compared laparoscopic adjustable gastric banding with an intensive medical program in 80 adults with only a mild-to-moderate degree of obesity, that is, a BMI of 30 to 35 kg/m². The medical program involved the use of behavioural modification, a very-low-calorie diet and pharmacotherapy with orlistat. Although at 6 months the two interventions had led to identical weight loss (13.8% of initial weight), at 2 years the surgical group had gone on to lose a total of 21.6% of their initial weight whereas the medical group had regained some weight. Four study participants in the surgical group required laparoscopic revision for prolapse of the posterior gastric wall through the gastric band. US editorialists hoped the study would not cause doctors and their patients to overlook the positive health benefits of a 5% to 10% weight loss achieved with lifestyle modification.²

1. Ann Intern Med 2006; 144: 625-633

2. Ann Intern Med 2006; 144: 689-691

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