

In other journals

21 JANUARY

GOOD FATS FIGHT DIABETES

Dietary intake of omega-3 fatty acids appears to be associated with a reduced risk of pancreatic islet autoimmunity (IA) in children who have an increased genetic susceptibility for type 1 diabetes. In a US longitudinal observational study, 1770 children at risk of developing diabetes were followed to a mean age of 6.2 years. Autoantibodies against islet components were measured, and dietary intake of polyunsaturated fatty acids from the age of 1 year was assessed. Omega-3 fatty acid intake seemed to be associated with a decreased risk of IA. The association was independent of caloric intake. A smaller case-cohort study also showed that a high level of omega-3 fats in erythrocyte membranes was inversely associated with the risk of IA. The authors conclude that their results are highly suggestive of the benefit of such fatty acids, and that dietary supplementation could become an important part of early intervention to prevent the development of type 1 diabetes.

JAMA 2007; 298: 1420-1428

CHLAMYDIA DIAGNOSTIC TOOL PASSES THE TEST

A rapid point-of-care test for *Chlamydia trachomatis* using vaginal swab specimens has potential to be an effective diagnostic and screening tool for *Chlamydia* infection in women. In a UK study, 1349 women were assessed using the immunoassay-based test, which provides a same-day result. Findings from self-collected vaginal swab specimens and clinician-collected specimens were compared. Results were also compared with those from a traditional polymerase chain reaction diagnostic tool. The rapid test was found to correlate well with the other test in terms of sensitivity, specificity, and positive predictive value. There appeared to be no significant difference between self-collected and physician-collected swabs. The high acceptability and convenience of the test, conclude the researchers, make it a useful alternative to current forms of diagnosis.

BMJ 2007; 335: 1190-1194

OVERWEIGHT KIDS AT RISK

A higher body mass index (BMI) in childhood is associated with a greater risk of coronary heart disease (CHD) in adulthood, according to Danish researchers. The study followed a cohort of over 250000 adults with available records of weight and height from their childhood. Information about CHD events was gathered and correlated. Among boys, the risk of a CHD event in adulthood increased significantly with rising BMI between the age of 7 and 13 years. A similar but lower risk was found in girls. The authors comment that, despite some limitations, the large size and population-based nature of the study give it sufficient power to make the results significant. The findings are of particular concern given the current "epidemic" of obesity among children.

N Engl J Med 2007; 357: 2329-2337

NOSE KNOWS BEST

If you are wondering about the best treatment for your patients with acute sinusitis, you might like to consider no treatment at all, say British researchers. In the face of high antibiotic prescribing rates and controversy surrounding management options, the group conducted a double-blind, randomised, placebo-controlled trial of 240 adults with acute non-recurrent sinusitis. Patients were placed into four groups receiving combinations of amoxicillin, a nasal steroid (budesonide) and placebo forms of both treatments. The main outcome measures were the proportion clinically cured at 10 days and duration and severity of symptoms. Neither the antibiotic nor the nasal steroid appeared to be effective as a treatment for acute non-recurrent sinusitis in the general practice setting. The only qualifying situation was in the milder cases, where the nasal steroid had an apparent positive effect on outcome.

JAMA 2007; 298: 2487-2496

THE COST OF HUMAN LIFE

What price to save a life? Not a great deal it seems, according to an international study on the cost and prevention of chronic diseases. Almost 14 million deaths worldwide could be prevented over a period of 10 years by reducing dietary salt intake and controlling tobacco usage, say researchers who analysed modifiable risk factors for common chronic diseases and estimated the cost of interventions. Eighty per cent of the burden of chronic disease is felt in a small number of low- and middle-income countries. Using the results of meta-analyses on the long-term health effects of reduction of salt intake, the researchers modelled the effect of a 15% reduction in salt consumption on blood pressure on populations in these countries. They also estimated the benefits of the reduction in tobacco usage that would result from implementation of the interventions from the World Health Organization Framework Convention on Tobacco Control. Collaborators in the study estimated that most deaths prevented by these measures would be from cardiovascular disease, respiratory disease, and cancer. And the cost of implementing the two interventions and averting 13.8 million deaths? Less than US\$0.40 per person per year in low-middle-income countries. The authors conclude that the numbers of deaths potentially prevented, although large, still account for only a small percentage of the burden of mortality resulting from chronic disease.

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