



Sex and the city...

...may produce a pattern of infections different from that in rural or remote Australia, according to the latest instalment of the *MJA Practice Essentials – Infectious Diseases* series. Bowden and colleagues (page 551) describe the diagnosis and treatment of sexually transmitted infections. Testing for many of these has been revolutionised by new technologies, and is now much easier for patients and clinicians.

Woing big business

It's Medical Research Week in Australia (3–9 June) and time to celebrate local scientific innovation. Yet, is Australia missing out on the biotech revolution? Apart from the odd scientific and commercial success (such as the “bionic ear”), have we failed to seize opportunities for creating wealth and further innovation from our research? Moses and colleagues (page 543) describe the successful collaboration between academia and industry in the United States, and urge us to act now to create the ethical and legislative foundation for such unions here.

Going it alone

The opioid antagonist naltrexone is intended for the treatment of alcohol dependence within a comprehensive program that includes psychosocial therapy. The reality is that only a modest level of the latter is often available. So, is naltrexone effective on its own? To find out, Latt and colleagues (page 530) conducted a randomised controlled trial of naltrexone v placebo in a medical outpatients clinic.

A fiery issue

World Environment Day falls on 5 June and it's fitting that this issue includes reports on an ecological hazard (foreign fire ants) and an ecological study (bushfires and asthma).

The Red Imported Fire Ant may be tiny, but could pose a large ecological and medical threat, say McCubbin and Weiner in their editorial (page 518). Owing to the fire ants' venom and aggressive group territorial defence, their stings are more likely to cause anaphylaxis than those of native ants, as Solley and colleagues (page 521) report in a **Notable Case** from Brisbane.

Meanwhile, what do we know about the effect of bushfire pollution on health? A study conducted in the Darwin bushfire season by Johnston and colleagues (page 535) makes a strong case for a link between bushfire smoke and asthma. Lewis and Corbett's editorial (page 517) examines the implications for public health policy of this and other studies.



Bug trek: the next generation

Third-generation cephalosporins can be life-saving — when used appropriately. Their inappropriate use, however, is driving the rise of resistant bacteria. This makes prescribing habits and their concordance (or lack thereof) with guidelines a matter of concern, as Robertson et al (page 524) showed in their survey of Victorian hospitals. Watson's editorial (page 513) outlines the 12 action steps for hospital doctors to prevent antibiotic resistance, and the exciting role of informatics in facilitating good antibiotic prescribing practice.

Oils ain't oils

Not all saturated fats are bad and not all polyunsaturated fats are equal is the message of the Supplement accompanying this issue, **Essential role of fats throughout the lifecycle**. Read about the renaissance of fat, watch fat myths being busted, and astound your patients with tales of healthy, low-cost, evidence-based dietary interventions!

Testing times

“Are you at risk of kidney disease?” is the theme for Kidney Awareness Week (3–9 June). Cass's editorial (page 515) answers this very question by discussing who we should be screening for proteinuria to detect chronic renal impairment and prevent progression to end-stage renal failure.

Smear campaign

The Pap smear is not something women look forward to. Not even when it's two-yearly instead of yearly. So, is Dickinson's suggestion (page 547) — that it's now time to change to *three*-yearly intervals — a matter for rejoicing? Read the pros and cons in **For Debate** and make up your own mind.

Fundholding anniversary

In the second article of our series on fundholding, Wilkin (page 539) describes the UK experience over the past 10 years. The pace of change has been breathtaking, with new reforms following before earlier ones had been fully implemented.

Another time ... another place ...

Venereal diseases “exist today not because we are unable to control them on account of lack of knowledge, but because we have not dared to attempt to control them in a business-like manner”.

MJA1936; 1: 685-686 [editorial]