



Local boost

Acellular pertussis vaccines have reduced the rate of adverse systemic effects, such as convulsions. However, local reactions may be more frequent, especially with booster shots. Gold and colleagues (*page 191*) confirm this with data from childhood vaccinations in South Australia, but their data also offer reassurance to parents.

Working capital

It's no secret that Australia may be headed towards a shortage of doctors in the not too distant future. What's driving this shortage, and is there anything that can be done about it? Brooks and colleagues, members of the team that reviewed the Australian Medical Workforce Advisory Committee, enlighten us on *page 206*.

Jagged little pills

Baby Johnny needs 8 mg per day of a medication that comes only in a 40 mg tablet. The maths is not that hard but there's plenty of room for error from manufacturer to bemused parent. If the drug is not registered in Australia for use in children, it may also be expensive. The parents have to hope the doctors know what they're doing . . .

As shown by Tan et al's survey of *MIMS* (*page 195*) the foregoing scenario is not that unusual in Australia: many believe this amounts to discrimination. Hopefully, help is on its way with a recent Therapeutic Goods Administration initiative to encourage sponsors to register medicines for use in children.

Who owns that gene?

Monopolies are not just for media moguls or board games. A company with the patent for the breast cancer gene *BRCA1* may limit testing of this gene to a few laboratories, taking the public healthcare system out of the game. Walpole and colleagues (*page 203*) extend a caution about such licences and advocate measures to avoid unreasonable commercial exploitation.

Nicol's editorial (*page 181*) outlines how legislation might balance commercial patent rights and public interest, an area on which the Australian Law Reform Commission is conducting an inquiry.

Other new frontiers of human genome science are explored in Mattick's article (*page 212*) as part of our *New Genetics* series.



Communities controlling CSOM

Chronic suppurative otitis media (CSOM) is a big problem in Aboriginal children, whose rates of CSOM and, indeed, deafness exceed those of children in many less developed nations. The randomised controlled trial of Couzos et al (*page 185*) demonstrates greater efficacy of one treatment for this condition over another. Importantly, it also shows the benefits of making sure that the communities involved "own" the research.

Along came a spider . . .

The white-tail spider's fearsome reputation as a cause of necrotic lesions is squashed in this issue by Isbister and Gray (*page 199*). White's editorial (*page 180*) describes how the myth arose and exhorts readers to consider necrotising arachnidism as a diagnosis of last resort.

Women under pressure

The good news in Brown's editorial (*page 182*) for Pre-eclampsia Awareness Week (August 17–23) is that, in Australia, mothers with pre-eclampsia and their babies usually do well. Recent data have also led to changes in management and to an appreciation of the need to guard against long-term consequences.

The art of mimicry

Try your hand at solving the cases in this issue's *Lessons From Practice* (*page 209*) and *Snapshot* (*page 211*). In the former, Le and Gonski present four patients plagued by symptoms of skin infestation, while the *Snapshot* by Catanchin and Ebeling describes an unusual complication of myxoedema.

Knee peeps

Refractory osteoarthritis of the knee is often treated with arthroscopic surgery to stave off more drastic surgery. Yet recent randomised controlled trials have thrown the effectiveness of arthroscopy into doubt. So before recommending an arthroscopy, turn to the editorial by Chapman and Feller (*page 179*).

Another time . . . another place . . .

*I am deaf
That is why I cannot hear you
But I run and laugh just as you do
So why do you turn me away
Deep down you know I am like you
Even though I'm deaf*

Richard Cavlovic (9 years), student
East Kimberley, WA