

### A TIME FOR EVERYTHING

Ziegler and Graves (*page 124*) tell us why we should be screening all pregnant women in Australia for HIV infection, given that we can now prevent virus transmission to the baby.

Williamson and colleagues (*page 125*) observe the UK controversy over identified data appearing in cancer registries without patients' knowledge. They believe the time has come for registry guidelines that safeguard patient privacy and consent, while still allowing for data to be used in research and quality improvement.

And the time for birth may be very early indeed for extremely low birth weight infants. Doyle (*page 136*) gauged how frequently such babies were born in high-risk perinatal centres in Victoria between 1979 and 1997, and how well they fared.

### BLAME THE ROMANS

The Romans are said to have introduced rigid class distinctions to British society centuries ago. According to our latest *Postcard from the UK* (*page 128*), little has changed, and healthcare in the UK is still a class act, and one that's perpetuating health inequities.

### CAM AND THE ART OF ETHICOLEGAL MAINTENANCE

What are the ethics of referring patients to a complementary medicine practitioner? Would such a referral be considered negligent in the eyes of the law? Sometimes, say Kerridge and McPhee (*page 164*), as demonstrated by a case in the latest of our *Complementary and Alternative Medicine* series. Even more contentiously, they ask, can it ever be unethical or negligent *not* to refer or inform patients about alternative therapies?

In the US, merely referring patients to complementary practitioners doesn't leave you open to a malpractice suit, says Cohen (*page 168*), but there are exceptions to this rule. His commentary also gives an ethical framework to work with when conventional care seems to conflict with a patient's interest in CAM.

### DARK SIDE OF ADOLESCENCE

Deliberate self-harm may be related to suicidality but doesn't necessarily arise from it. We know very little about this behaviour, but it does appear more common in young people. As part of an international collaboration, De Leo and Heller (*page 140*) surveyed 4000 high school students on Queensland's Gold Coast to find out how many had deliberately harmed themselves and what factors were associated with this behaviour.



Photo courtesy of Dr Nathan Lawrentschuk

### DANGEROUS DROPOUT?

Dropping out of a conversation while on a mobile phone can be annoying, but that's nothing to the possibility of medical equipment dropping out due to mobile phone use in hospitals. That's why most hospitals have signs asking visitors to turn off their mobiles. But what's the evidence that their use affects the clinical function of medical devices? Lawrentschuk and Bolton (*page 145*) conducted a systematic review to find out.

### HEADING OFF THE RURAL DIVIDE

In the past few years we've published several articles on the tyranny of distance when it comes to the health of Australians in rural and remote areas. In this regard, a study by Harradine et al, on the outcomes of rehabilitation after traumatic brain injury (*page 130*), should be of interest to anyone trying to provide equitable services for people living in the country, as well as anybody who wants to hear about an Australian program that is working!

### A SNAPP-Y APPROACH

Tip number 4 for teaching on the run, by Lake and Ryan (*page 158*), discusses the pros and cons of bedside teaching, and shares their "one-minute teacher" approach.

### WELD-EARNED

Australians all do rejoice in our sunny climes but not in our high rates of skin cancer (or drought). However, there are other risk factors for skin cancer apart from sun exposure, ultraviolet radiation from arc welding being one possibility. Dixon and Dixon (*page 155*) review the evidence for this claim and its significance for professional welders.

### SERIOUS CHICKENPOX

For anyone who thought that chickenpox was a trivial childhood ailment, this issue's *Lessons from Practice* will make you think again. A 33-year-old woman presents to the emergency department with a 10-day history of chickenpox and 12 hours of dyspnoea and facial swelling. She dies within 44 hours, despite intensive treatment. This sobering report from Stride et al (*page 160*) is a case in point for vaccination.

### IT'S ALL IN THE LEGS

Did you know that having peripheral arterial disease puts someone at much higher risk of cardiovascular death? Norman and colleagues (*page 150*) not only enlighten us on the prognostic significance of this condition, but also how best to prevent serious vascular events in these patients and the role of the ankle-brachial pressure index as a screening tool.

### ANOTHER TIME ... ANOTHER PLACE

Pressing home a seeming advantage, the sceptical youth asks pointed questions about the values his mentors hold so dearly. His parents react, perhaps, by tightening the rules and by demanding behaviour more circumspect than they ask of themselves.

Nurcombe B. *Adolescence in a changing society*  
Med J Aust 1970; 2: 1225-1229