

# In this issue

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## AUSTRALIAN CHILDREN UNSAFE IN CARS

Legislation in Australia is sadly lagging behind the evidence when it comes to child restraints and seatbelts, and many parents are unaware that their children are at risk. But major legislative change is imminent, say Reeve et al (*page 635*). Among other things, new laws will mandate the use of a restraint with an in-built harness for children up to the age of 4 years and a booster seat to age 7.



## CLINICAL TRIALS REGISTRATION: FORGING AHEAD

Clinical trials registration has taken off in the 2 years since the International Committee of Medical Journal Editors (ICMJE) initiated its policy that unregistered trials would not be published in ICMJE member journals. With a proliferation of potential registries, the World Health Organization has stepped up to the mark with its International Clinical Trials Registry Platform, which is seeking to identify, gather, de-duplicate, and search trials from registries around the world, and provide a one-stop clinical trial search portal. We hear from the ICMJE, which met in Sydney earlier this year, on *page 612*.



MJA staff hosting the ICMJE in Sydney, April 2007.

## CARE REQUIRED WITH ANTISEPTIC BATH OIL

A collection of three cases on *page 652* (Moyle et al) illustrates that antiseptic bath oils can cause acute contact dermatitis or, if not adequately diluted, burns. The authors recommend that the possibility of acute contact dermatitis should be considered if hyperpigmentation and desquamation complicate eczema, that these oils should always be diluted and rinsed off, and that they should not be used in cool compresses or wet wraps.



## CHILDHOOD FOOD ALLERGY ON THE INCREASE

Based on an audit of his private practice, Canberra-based immunologist and allergist Mullins (*page 618*) says it is likely that there has been a marked increase in food allergies in young children and that we now need coordinated, systematic epidemiological studies to ascertain risk factors and guide public health policy. Between 1995 and 2006, Mullins treated 1489 children aged 0–5 years, 697 (47%) of whom had food allergy (175 anaphylactic). Over the 12 years there was a fourfold increase in the number of children presenting each year; children with allergic rhinitis, urticaria or atopic eczema formed steady proportions of the total and the proportion of children with asthma decreased. However, the number (and proportion) with food allergy increased markedly from 11 children (20%) in 1995 to 138 children (57.5%) in 2006. Mullins also noted similar trends in hospital admission rates for anaphylaxis in children aged 0–4 years — from 39.3 to 193.8 per million population over the same period.

## PHYSIOS STREAMLINE ORTHOPAEDIC CLINICS



Experienced physiotherapists have high rates of therapeutic concurrence with orthopaedic surgeons for patients with musculoskeletal pain, and can also appropriately manage many of these patients. So say Oldmeadow et al (*page 625*), after trialling a musculoskeletal screening clinic staffed by physiotherapists at a Melbourne teaching hospital. Seven of 38 patients who completed the study were eventually listed for surgery, and seven required management by the surgeon, such as injections or imaging, while the remainder could be appropriately managed without the surgeon's input. The physiotherapists identified the same management plans as the surgeon for all but 10 of these patients, and most patients were satisfied with the care received. McPherson and Reid respond to the trial on *page 614* with a caution that, while waiting times and patient satisfaction are important, more research is needed to determine the effect of such clinics on the full range of patient outcomes.

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## ANOTHER TIME ... ANOTHER PLACE

What would it be like in a radiologist's shoes? To spend most of my day dealing with images of people: plain black-and-white x-ray images ... all without speaking to a patient.

*Abraham Verghese, My own country (1994)*