

In this issue

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FOUR SUICIDES

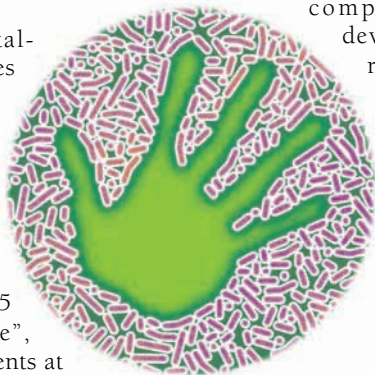
“Four of you will commit suicide”, said a medical school dean in the 1970s to a group of about 200 medical students. One of these students, Jenkins (*page 435*), remembers this statement as their only education about doctors’ health. Thirty years later, four of her then colleagues have, indeed, taken their own lives and greater attention is now paid to doctors’ health concerns. Recently, Markwell and Wainer (*page 441*) and Heredia and colleagues (*page 445*) surveyed doctors-in-training, finding high rates of low job satisfaction, burnout and compassion fatigue. Jenkins says that while the stresses of the previous generations may be modified (eg, with safer working hours), they don’t disappear and new ones are added.

A PAIR OF OX EYES

Primary congenital glaucoma is rare but, if unrecognised and untreated, it results in blindness. Rudkin and colleagues (*page 466*) describe a recent case affecting both eyes. Elevated intraocular pressure in an immature eye results in buphthalmos (“ox eye”). Earlier clinical signs include blepharospasm, photophobia and excessive tearing.

FIVE KEY MOMENTS

The crusade against hospital-acquired infections continues with the launch of the National Hand Hygiene Initiative (*page 420*). As with NSW’s recent *Clean hands save lives* campaign (*page S1-S31*), the national program has adopted and adapted the World Health Organization’s “5 moments for hand hygiene”, which defines five key moments at which hand-cleaning is required during patient care. It’s all been a long time coming: according to Pittet (*page S5*), Semmelweis, the “first crusader”, paved the way a mere 162 years ago.



IF NUMBERS ARE TO COUNT

Recent controversy over the manipulation of elective surgery waiting lists in some public hospitals — to make things look better than they really are — has brought to our attention several other limitations of these lists. Are the data collected valid? Are they reproducible? Perhaps even more importantly, can they tell us anything about the quality of care received? Curtis and colleagues (*page 423*) say that inadequate attention to the quality of waiting list data has compromised the important function of providing accurate information to guide service provision.

ONE SIZE WON’T FIT ALL

National registration for health professionals is scheduled to begin on 1 July 2010, and a draft of *Health Practitioner Regulation National Law 2009*, known as Bill B, has been released for public consultation. In a Viewpoint (*page 464*), published first online, Breen outlines concerns with this legislation, including inappropriately regarding substandard performance and impairment as less serious categories of misconduct. Breen says this “one size fits all” draft legislation has the potential to wind back important improvements to the professional regulation of doctors implemented in Australia over the past two decades. In light of the

complexity involved in developing best-practice regulation, Breen says that our health ministers would be wise to “hasten slowly” and extend the timeline for commencement of national registration.

A TRIO OF ELEPHANTS?

In its recently released report *A healthier future for all Australians*, the National Health and Hospitals Reform Commission has only tangentially discussed three “elephants in the room” in hospital sector health care, according to Scott (*page 450*). The elephants are: the need to prioritise hospital interventions; private health insurance subsidisation; and ongoing state responsibility for running hospitals. This article and others by Penington (*page 446*) and Kidd (*page 448*) are part of the MJA’s current Health Care Reform series, published first online.

NINE MONTHS ARE NOT ENOUGH

The obesity epidemic creates havoc when it comes to having babies, as excessive maternal weight has a deleterious effect on conception rates, pregnancy and fetal wellbeing. Although pregnant women are motivated to protect their babies from harm, Keirse (*page 421*) says the 9 months of pregnancy is too short a time for much to be achieved weight-wise, especially for those women at greatest need. He comments on studies by Callaway and colleagues (*page 425*) and Jeffries and colleagues (*page 429*) which respectively found that pregnant women are often unaware of their (over)weight status and that self-measurement of weight during pregnancy may limit excess weight gain in overweight but not obese expectant mothers. Keirse says our attention to weight needs to shift much earlier, even before preconception care, to contraception care.

Dr Ann Gregory, MJA

ANOTHER TIME ... ANOTHER PLACE

The introduction, or even the purification, of a municipal water supply may require millions ... To wash the hands before eating and after the toilet costs nothing.

Charles V Chapin, 1917