

In this issue

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NEVER TOO EARLY?

If early referral for specialist palliative care was an expensive new drug, it would be marketed as a major advance in improving the care of patients with incurable cancer. So says Haines (*page 107*), who presents impressive results from two randomised studies of such care conducted recently in the US. To enable more frequent early referral in Australia, attention will need to be paid to our services, recently described by Queensland senator Sue Boyce as an “under-resourced shambles”.

STROKES OFF-COURSE

In this week's issue, two research papers report different difficulties in implementing best stroke management. In a tertiary hospital setting, Sanders and colleagues (*page 135*) found that the ABCD² score (age, blood pressure, clinical features, duration and diabetes) was only poorly predictive of stroke within 90 days of a transient ischaemic attack (TIA). They say hospital admissions policies may be better dictated by suspected stroke mechanism or the presence of crescendo TIA. And, in a state-based study, Leyden and colleagues (*page 111*) report that less than 2% of patients with an ischaemic stroke are being administered thrombolysis, because of poor access to acute stroke units.

POLICIES AND INDUSTRY

Medical students have been shown to be vulnerable to the influences of industry despite the fact most believe they are personally immune. Medical school policies can help students maintain a degree of independence from industry bias. However, Mason and Tattersall (*page 121*) report that many Australian medical schools fall far short of the mark when it comes to the adequacy of their policies for managing potential conflicts of interest with the pharmaceutical industry. The authors suggest our medical schools beef up their self-regulation of conflicts of interest, as failure to do so could result — as in the US — in the imposition of legislative controls.

SAY NO TO “RITUAL NICKS”

Australian doctors should not accede to any request to perform any form of female genital mutilation (FGM) including pricking, nicking and incising, advises Mathews (*page 139*). FGM is illegal in Australia — every jurisdiction has legislation that prohibits a person from performing any type of FGM, defined as including clitoridectomy, excision of any other part of the genitalia, infibulation, and any other mutilation of the genitalia, on a child or an adult. Instead, Mathews says, doctors need to sensitively provide advice and support.

ADD ANOTHER SEROTYPE?

In January 2005, the 7-valent pneumococcal conjugate vaccine became part of the childhood immunisation program for all Australian children. Now, Williams and colleagues (*page 116*) present evidence not only that the incidence of invasive pneumococcal disease (IPD) has dropped markedly, but also that there has been a subsequent rise in the incidence of IPD caused by a serotype not covered by the vaccine — serotype 19A. They suggest adding this serotype to conjugate vaccines could further improve the impact of the immunisation program.

COMING TO LIGHT

Aboriginal Australians are likely to have a poorer vitamin D status than non-Indigenous Australians, according to Vanlint and colleagues (*page 131*). These researchers measured serum hydroxyvitamin D levels (and related biochemical variables) in adults from two Aboriginal community-controlled health services. Although novel, their findings are not so surprising — melanin filters incident ultraviolet B light, so darker-skinned individuals are likely to synthesise less vitamin D than paler-skinned individuals.



TOXIC TEETHING

Did you know that enthusiastic use — say two to three tubes per week — of over-the-counter salicylate-containing teething gels in infants can lead to inadvertent, subtle but potentially life-threatening chronic salicylate intoxication? Further, that the clinical manifestations of such intoxication are protean, including failure to thrive. Williams and colleagues (*page 146*) describe two cases of unsuspected chronic salicylate intoxication; thankfully, both infants made a full recovery. The authors say that all salicylate-containing products should have an appropriate warning label.

Dr Ann Gregory, MJA

ANOTHER TIME ... ANOTHER PLACE

A curiously moralistic attitude — probably Scottish in origin — makes tractotomy morally acceptable and heroin morally wrong for the treatment of intractable pain in carcinoma.

Henry George Miller, 1968