News

People do morning exercises on a polluted day in Jiaozuo, in China’s Henan province. China’s environment minister told a news conference that the country cannot relent on efforts to tackle pollution, though a rapid turnaround should not be expected.

**From the NHMRC**

**Survey identifies key dementia research priorities**

The National Health and Medical Research Council (NHMRC) National Institute for Dementia Research has identified diagnosis, prevention and interventions to reduce risk as the key priorities for dementia research.

Australian scientists are world leaders in dementia research and, over the coming decades, would have found treatments for dementia. However, this timeline is too slow for the economic and social pressures of an ageing population. Therefore, the federal government moved to accelerate research discoveries with a $200 million investment to boost dementia research in the 2014–15 Budget.

A survey and interviews of consumers (people with dementia, families, personal carers), researchers (new and established), medical practitioners and aged care providers identified three top priorities.

For professional care providers, senior investigators, researchers and medical practitioners, the priority is to identify effective interventions to reduce the risk and prevent the incidence of dementia.

For people with dementia, timely, accurate and supported diagnosis is paramount, with prevention the second priority — a reminder of the importance of accurate and sensitive diagnosis and support for people with dementia and their families.

For personal carers, the priority is to develop effective interventions to support their opportunity and capacity to provide care, which are currently quite variable; again, prevention is their second priority.

The priorities form a key element of the government’s commitment to supporting dementia research. The NHMRC National Institute for Dementia Research will target, coordinate and translate dementia research, guided by the priorities.

The NHMRC report states: “The priority for prevention indicates a consensus and confidence that research into risk and preventative factors will have an impact in reducing the incidence of dementia and is the first priority for Australian research.”

The NHMRC Dementia Research and Translation Priority Setting Project was prepared by ThinkPlace consultants and released on 27 January 2015 at http://www.nhmrc.gov.au.

**Popular herbicide potentially carcinogenic: WHO**

The popular herbicide glyphosate, sold as Roundup by Monsanto, has the “potential to cause cancer in humans”, reports the *Wall Street Journal*. The International Agency for Research on Cancer, a subsidiary of the World Health Organization, cited studies of occupational exposure to glyphosate in the US, Canada and Sweden, which, they wrote, showed “increased risks for non-Hodgkin lymphoma along with a positive trend for some ailments in mice in separate studies”, the *WSJ* reports. Although there was “limited evidence” that glyphosate was carcinogenic in humans, the researchers classified it as “probably carcinogenic”. The use of glyphosate is on the rise in the US, where it is the most popular herbicide, because genetically modified crops have proven to be able to withstand the chemical. “Herbicide-tolerant biotech plants were grown on 94% of US soybean fields and 89% of US corn fields last year, according to the US Department of Agriculture.”

**Superbugs and surgical devices: changes needed**

*Wired.com* reports that since 11 people in Los Angeles became infected with the superbug carbapenem-resistant Enterobacteriaceae (CRE) following surgery with a duodenoscope, there have been calls for a “category-wide redesign” of such devices. The US Food and Drug Administration recently released new guidelines for sterilising medical devices and, in the process, revealed that it had not been “reviewing manufacturers’ tests to ensure that the gadgets could be cleaned and disinfected between patients”, *Wired.com* reports. “Now, the FDA says it’s correcting that oversight; the agency will ask manufacturers to prove that cleaning procedures can eliminate the effluvia that get into their scopes’ nooks and crannies.” Two of the 11 Los Angeles CRE-infected patients died, adding to the list of more than 20000 Americans who die each year from antibiotic-resistant infections.

**Need to ramp up vaccination in Ebola-affected countries**

Increased focus on prevention of Ebola virus disease has seen a significant reduction in vaccination coverage in Guinea, Liberia and Sierra Leone, increasing the risk of outbreaks of measles, whooping cough and other vaccine-preventable diseases, the *World Health Organization* reports. Around 24000 people have been infected with Ebola, with approximately 10000 deaths across the three countries. “We are calling for the intensification of routine immunization services in all areas, and for mass measles vaccination campaigns in areas that are free of Ebola transmission”, Dr Jean-Marie Okwo-Bele, director of Immunization, Vaccines and Biologicals at WHO, says. WHO has called for an “urgent scaling up” of vaccination programs. “Any disruption of immunization services, even for short periods, will result in an increase in the number of susceptible individuals, and will increase the likelihood of vaccine-preventable disease outbreaks.” Measles is one of the leading causes of death among young children globally; some 145700 people died from measles in 2013 – mostly children under the age of 5.

*Cate Swannell* doi: 10.5694/mja15.n0406

John McCallum
Research Translation Group,
National Health and Medical Research Council
media@nhmrc.gov.au
doi: 10.5694/mja15.00248
Top 5 MJA articles online since 9 March 2015

1) **Perspective:** Should we continue to isolate patients with vancomycin-resistant enterococci in hospitals?
New research on how enterococci become drug resistant suggests that hospital practice should evolve in line with our new insights
doi: 10.5694/mja14.00672

2) **Perspective:** Knowing when to stop antibiotic therapy
doi: 10.5694/mja14.01201

3) **Research:** Better access to mental health care and the failure of the Medicare principle of universality
doi: 10.5694/mja14.00330

4) **Research:** The rise of targeted HIV oral rapid testing in Australia
doi: 10.5694/mja14.01292

5) **Perspective:** Implementing telehealth as core business in health services
doi: 10.5694/mja14.01021

Meanwhile, in MJA InSight …

“We are trying to attract young doctors into rural practice and unless we make it a viable business model we won’t be able to recruit” — Professor Dennis Pashen, president of the Rural Doctors Association of Australia

**High cost of rebate freeze**

“As a consumer, you’re far more worried about having a small lump that might turn into a big lump rather than risks of overdiagnosis” — Sally Crossing, chair of Cancer Voices NSW

**Screening needs “balance”**

“Perhaps the most disappointing aspect of these recent comments is the effect that they must have on young women and men considering a career in surgery” — Associate Professor Kate Drummond, deputy chair of the Women in Surgery committee of the Royal Australasian College of Surgeons

**Kate Drummond: Surgery support**

MJA Comments

The best Comment each month will receive $50.00
Email a 100-word comment on any health-related topic to: comments@mja.com.au

**Send us your thoughts on this issue’s suggested topic:**
**What should be done to ensure a future for the PCEHR?**

The forgotten community of testosterone users

There is potential harm to female-to-male transgender patients when testosterone is no longer accessible to general practitioners in April 2015 without specialist referral. I argue that a proportion of endocrinologists, sexual health physicians and urologists would not have experience in transgender medicine and this could lead to inappropriate referrals, particularly for psychiatry. This would further decrease the pool of available specialists to refer to within a particular state, and be compounded outside urban centres. The new model would also increase patient expenditure and costs to the Medicare Benefits Schedule. There must be provisions to ensure that these changes to not adversely affect this community by having a new Pharmaceutical Benefits Scheme indication for testosterone.

**Sean Atkinson**
General Practice Registrar, VIC

Inappropriate pathology ordering and pathology stewardship

What an excellent article by Denis Spelman (doi: mja14.00814) in your January edition! When are you going to publish a comparable article on diagnostic imaging and the current epidemic of VOMITs (victims of modern imaging technology)?

**Graeme J Dennerstein**
Obstetrician and Gynaecologist, VIC

Public speaking — the use of tricks, especially humour

Many professional speakers exploit the element of surprise to gain audience attention, affection or even resentment at the start of a presentation. Skilfully timed, tested and devoid of gimmickry this may prove to be a valuable ploy, setting the seal of memorable success on the whole presentation. Generally, it may only be used once and then with strict relevance to the occasion or with lateral zany irreverence which causes the listeners to take pleasure in having, or not having, been conned. Sex and sexual allusions are a cheap, dangerous and risky no-no. On the other hand, gentle humour relevant to the moment and its content, seemingly spontaneous or contrived, can enhance almost every presentation. A short bodyline with a sharp, terminating punch is the best alarm clock in the hall.

**Alex Cohen**
Retired Clinical Professor, WA

Global challenges of infectious diseases

*The Guardian* reported late last year that syphilis has recorded its highest levels ever in Australia. Those of us trained in Africa and other developing countries would readily recognise the early manifestations of the disease. Today’s graduates have probably never seen a case, nor, in all probability, has their generation of teachers. Are our medical schools abreast of this problem?

**Peter Arnold**
Retired General Practitioner, NSW

Congratulations: Associate Professor Guy Eslick from NSW will receive $50.00 for his comment Applying for NHMRC project grants = insanity (MJA p229, 16 Mar 2015).


Poll

Are you concerned about the move away from dietary advice to reduce saturated fat consumption?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes – it’s dangerous</td>
<td>49%</td>
</tr>
<tr>
<td>Maybe – evidence is changing</td>
<td>25%</td>
</tr>
<tr>
<td>No – it fits current evidence</td>
<td>26%</td>
</tr>
</tbody>
</table>

Total respondents: 101

Take part in next week’s poll on: www.mja.com.au/insight