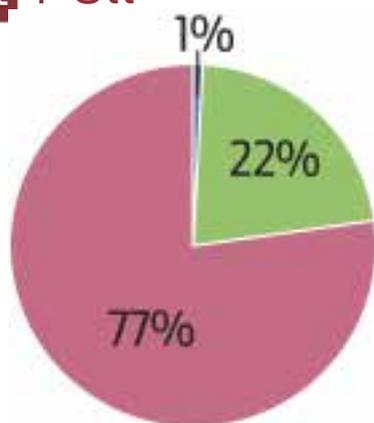


MJA InSight Poll

How often do you test for Vitamin D deficiency?

Total respondents: 132

- Only for patients with high-risk factors
- If I suspect it
- Every time I order blood tests



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

MJA Podcasts



Dr Terence Chong, a psychiatrist and research fellow at the Academic Unit for Psychiatry of Old Age, Department of Psychiatry at the University of Melbourne, and **Professor Nicola Lautenschlager**, chair of Psychiatry of Old Age at the University of Melbourne and director of Research



at Northwestern Mental Health, discuss their co-authored editorial on therapeutic advances and risk factor management in dementia, published in this issue.

Podcasts are available at www.mja.com.au/multimedia/podcasts and from iTunes. Also available as videos at www.mja.com.au/multimedia

Top 5 MJA articles online

since 6 January 2016

1. *Perspective*: [Electronic cigarettes: what can we learn from the UK experience?](https://doi.org/10.5694/mja15.00725)
doi: 10.5694/mja15.00725
2. *Short report*: [Vitamin D testing: new targeted guidelines stem the overtesting tide](https://doi.org/10.5694/mja15.00497)
doi: 10.5694/mja15.00497
3. *Case report*: [Fulminant liver failure and transplantation after use of dietary supplements](https://doi.org/10.5694/mja15.00816)
doi: 10.5694/mja15.00816
4. *Editorial*: [Lung cancer screening in Australia: progress or procrastination?](https://doi.org/10.5694/mja15.01109)
doi: 10.5694/mja15.01109
5. *Research*: [Reporting of health practitioners by their treating practitioner under Australia's national mandatory reporting law](https://doi.org/10.5694/mja15.00710)
doi: 10.5694/mja15.00710

Meanwhile, in MJA InSight ...

1. Ken Harvey and Malcolm Vickers: [Chiropractic board in firing line](https://www.mja.com.au/insight/2016/1/ken-harvey-and-malcolm-vickers-chiropractic-board-firing-line)
<https://www.mja.com.au/insight/2016/1/ken-harvey-and-malcolm-vickers-chiropractic-board-firing-line>
2. [Supplement vitamin D rather than test](https://www.mja.com.au/insight/2016/1/supplement-vitamin-d-rather-test)
<https://www.mja.com.au/insight/2016/1/supplement-vitamin-d-rather-test>
3. [Evan Ackermann: MAS a push for drug sales](https://www.mja.com.au/insight/2016/1/evan-ackermann-mas-push-drug-sales)
<https://www.mja.com.au/insight/2016/1/evan-ackermann-mas-push-drug-sales>



Dunia Sibomana, 8, who was attacked 2 years ago by a chimpanzee in his village in the Democratic Republic of Congo, rides on a toy car at Stony Brook Children's Hospital in Stony Brook, New York. Doctors successfully performed a series of extensive facial reconstructive surgeries on Sibomana.

Picture: Shannon Stapleton/Reuters/Picture Media

Texting in the dark affects teens' sleep patterns

A study published in the *Journal of Child Neurology*, and reported by **ScienceDaily**, has linked “nighttime instant messaging habits of American teenagers to sleep health and school performance”. The researchers distributed surveys to three New Jersey high schools and evaluated the 1537 responses contrasting grades, sexes, messaging duration and whether the texting occurred before or after lights out. They found that “students who turned off their devices or who messaged for less than 30 minutes after lights out performed significantly better in school than those who messaged for more than 30 minutes after lights out”. “Students who texted longer in the dark also slept fewer hours and were sleepier during the day than those who stopped messaging when they went to bed. Texting before lights out did not affect academic performance,” the study found. “The effects of ‘blue light’ emitted from smartphones and tablets are intensified when viewed in a dark room. This short wavelength light can have a strong impact on daytime sleepiness symptoms since it can delay melatonin release, making it more difficult to fall asleep — even when seen through closed eyelids.”



Is it time to show everyone your data?

The **International Committee of Medical Journal Editors (ICMJE)** has proposed that research authors must share “deidentified individual-patient data (IPD) underlying the results presented in the article (including tables, figures, and appendices or supplementary material) no later than 6 months after publication” as a condition of publication in ICMJE’s member journals. Published in the *Annals of Internal Medicine*, the ICMJE’s proposal included the requirement that “authors include a plan for data sharing as a component of clinical trial registration”. “This plan must include where the researchers will house the data and, if not in a public repository, the mechanism by which they will provide others access to the data ... Sharing data will increase confidence and trust in the conclusions drawn from clinical trials. It will enable the independent confirmation of results, an essential tenet of the scientific process. It will foster the development and testing of new hypotheses. Done well, sharing clinical trial data should also make progress more efficient by making the most of what may be learned from each trial and by avoiding unwarranted repetition. It will help to fulfill our moral obligation to study participants, and we believe it will benefit patients, investigators, sponsors, and society.”

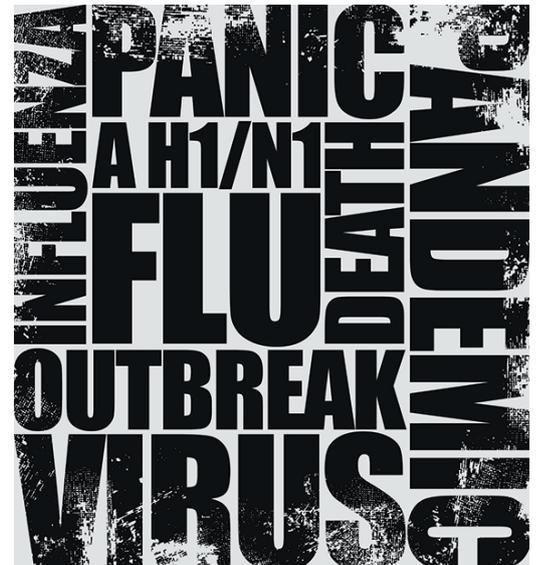


Zika infections reported in 22 countries, territories

The US **Centers for Disease Control and Prevention** reports that Brazil’s Ministry of Health estimated that between 440000 and 1300000 suspected cases of Zika virus infection occurred in Brazil in 2015 alone. By 20 January 2016, cases had been reported to the Pan American Health Organization from Puerto Rico and 21 other countries or territories in the Americas, including in French territories, St Martin and Guadeloupe. The *New York Times* reports that pregnant women and newborns should be tested for Zika infection if they have visited or lived in any country experiencing an outbreak. “The new guidance applies only to infants of mothers who reported symptoms of Zika virus infection — rash, joint pain, red eyes or fever — while living abroad in an affected country or within 2 weeks of travel to such a destination.” Australian virologists have confirmed that Zika has already been discovered in Australia in travellers returning from South America, according to the **ABC**. “However, for the virus to spread, it would need the right species of mosquito to act as a vector. So far only one such mosquito is present in Australia — the *Aedes aegypti* mosquito — which is found only in far north Queensland.”

Mass media can slow progress of an epidemic

Medical News Today reports that a new study in the *Journal of Theoretical Biology* has found that mass media coverage about an epidemic can help slow the spread of the disease. The research, a joint project between Chinese and Canadian authors, studied the effect of mass media coverage on the H1N1 epidemic in the city of Xi’an in the Shaanxi province of China. “They compared the number of hospital visits with the number and duration of news reports about the epidemic. Their results show that more news reports resulted in fewer hospital visits and vice versa ... The researchers now plan to take the time lag between the media coverage and changes in newly reported cases into account, to find out how this factor affects epidemics.”



Cate Swannell doi:10.5694/mja16.n1502