



An “ear” is seen growing on the arm of a patient who lost his right ear in an accident, at the first affiliated hospital of Xi’an Jiaotong University, in Xi’an, Shaanxi province, China. The growing “ear”, which will be transplanted onto the patient’s head in an upcoming surgery, was taken from the patient’s rib cartilage, cut into the shape of an ear and placed under the skin flap of the arm.

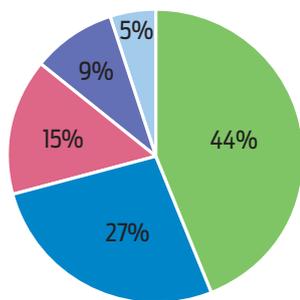
Picture: China Daily/Reuters/Picture Media

MJA InSight Poll

I support the concept of voluntary euthanasia for people with terminal or chronic diseases

Total votes = 171

- Strongly agree
- Strongly disagree
- Agree
- Disagree
- Neutral



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



Ice use in rural Australia outstrips the city

Researchers from Flinders University have found that “lifetime and recent methamphetamine and recent crystal methamphetamine use were significantly higher among rural than other Australians”, according to their study published in the *Australian Journal of Rural Health*. Dr Anne Roche and Dr Alison McEntee, from the National Centre for Education and Training on Addiction, analysed data from the last three National Drug Strategy Household Surveys and corresponding Alcohol and Other Drug Treatment Services National Minimum Data Sets. They found that “significantly more rural men and employed rural Australians used methamphetamine than their city, regional or Australian counterparts”. “Rural Australians aged 18–24 years and 25–29 years were significantly more likely to have used methamphetamine in their lifetime than city or Australian residents. Rural Australians aged 18–24 years were significantly more likely to have recently used crystal methamphetamine,” the researchers wrote. They concluded that the findings were “specially concerning given pre-existing health and social vulnerabilities of those living in rural Australia”. “Interventions tailored to address the specific and unique circumstances of rural settings are required to reduce and prevent methamphetamine use.”

Twinking food pricing policy in Indigenous communities

Researchers from the Menzies School of Health Research, the University of South Australia, and Monash University have found that four different strategies for offering discounts on grocery products, fresh

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fruit and vegetables and diet soft-drinks in 18 Indigenous community stores had “no discernible effect” on percentage of grocery sales to total food and beverage; fruit and vegetable sales; and diet soft-drink sales. In a study published in the *Australian and New Zealand Journal of Public Health*, the researchers wrote that despite “strong support for the use of food pricing policy in nutrition improvement” in Indigenous communities, the strategies were ineffective because of “poor communication with store owners, staff and customers in relation to promotion of the discount”. They concluded that: “This evaluation highlights that for food pricing policy to be effective in this context: i) magnitude (including ‘price threshold’), duration and promotion must be considered in design; ii) customers, store owners and staff should contribute to design to ensure it is valued; and, iii) monitoring of implementation should occur ... There is an opportunity to make a difference through collaborations that support well-designed and evaluated strategies or intervention studies, particularly in such a complex environment to service such as remote Australia.”

Cate Swannell doi: 10.5694/mja16.n1212