

Health and society intertwined

The article featured on the cover of this issue of the *MJA* describes an important approach to eliminating hepatitis C, a disease predominantly transmitted in developed countries through injecting drug use. Given the advent of highly effective and well tolerated direct-acting antiviral (DAA) therapies, the Australian Government has adopted elimination of hepatitis C as a feasible objective. A major challenge, however, is getting the treatment to individuals with hepatitis C in a timely and appropriate way. As MacIsaac and colleagues note in their research article, "Engaging people who inject drugs with hepatitis C testing and treatment will be crucial to elimination". They describe the experience in the first supervised injecting facility in Victoria, which opened in 2018 in inner metropolitan Melbourne. The results are encouraging and suggest that providing treatment in this type of facility is effective and offers hope for the future. The authors report that "DAA treatment was prescribed for 126 of 143 HCV RNA-positive clients" and that "41 of 54 with complete follow-up data were cured" (doi: [10.5694/mja2.51885](https://doi.org/10.5694/mja2.51885)).

A research letter and editorial examine the investigation of sudden unexpected death in infancy (SUDI) in Australia. Jeffery and colleagues note that although "SUDI requires thorough investigation according to international standards and guidelines", before their study it was unknown how well these standards were implemented in Australia. Their survey of all eight Australian jurisdictions found that most Australian investigations are police-led and rely on the limited histories collected by the police. The authors recommend that the process of investigation of SUDI in Australia be upgraded to international standards: "every family has the right to have their child's death properly investigated" (doi: [10.5694/mja2.51833](https://doi.org/10.5694/mja2.51833)). In a linked editorial, Goldwater agrees, arguing that "SUDI investigations should be led by coroners, supported by experienced paediatric pathologists" (doi: [10.5694/mja2.51884](https://doi.org/10.5694/mja2.51884)).

Also published this week in an *MJA* supplement is a substantial body of work from Matthews and colleagues: the Australian Child Maltreatment Study (ACMS). This is the first national survey in the world to study in detail the experiences and associated health and social outcomes of the five types of child maltreatment: emotional abuse, physical abuse, sexual abuse, neglect, and exposure to domestic violence. The study, which was



representative of the Australian population, surveyed a sample of more than 8000 Australians aged 16 years and over on their experiences of child maltreatment. The findings documented in the supplement are shocking: "the majority (62.2%) of Australians have experienced maltreatment in childhood. Most experienced multi-type maltreatment, defined as the exposure to two or more of the five child maltreatment types" (doi: [10.5694/mja2.51867](https://doi.org/10.5694/mja2.51867)). Other articles in the supplement show that risks of severe and persistent health problems, such as depression, alcohol use disorder and self-harm, and increased health service use are attributable to child maltreatment. In the concluding article, Matthews and colleagues state that the ACMS "has uncovered the past, discovered the present, and indelibly stamped an imperative to transform the future". They end with a call to action: "Reducing child maltreatment poses formidable challenges but is a moral imperative and an economic necessity" (doi: [10.5694/mja2.51872](https://doi.org/10.5694/mja2.51872)). The findings documented in the supplement are a stark reminder that health and society are inextricably linked. ■

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