# PUBLIC HEALTH ABSTRACTS

Professor James S. Lawson, Professor and Head of the School of Health Services Management at the University of NSW, has prepared the following public health items from the literature.

### **AIDS MINUS HIV**

Laurence and colleagues have reported that five people from the New York City area have presented with clinical evidence of immunodeficiency but no evidence of human immunodeficiency virus (HIV). Other scientists at major HIV centres in Europe and America have described similar patients. This development raises a number of questions. Does a new virus causing a syndrome similar to HIV infection exist? Why are all these cases from disparate locations appearing now?

Laurence J, Siegal FP, Schattner E et al. Acquired immunodeficiency without evidence of infection with human immunodeficiency virus types 1 and 2. Lancet 1992; 340:273-274. Editorial: AIDS minus HIV. Lancet 1992; 340:280.

#### **ASPIRIN IN ISCHAEMIC HEART DISEASE**

In the past decade it has been shown that platelet aggregation and the formation of thrombi are important in the development of ischaemic heart disease. As a result, aspirin is being widely used both for patients with ischaemic heart disease and subjects without clinically apparent disease. Willard and colleagues have reviewed the evidence in support of aspirin for patients with ischaemic heart disease and have made the following conclusions:

Among patients with ischaemic heart disease, the use of low-dose aspirin is recommended.

Among patients without clinically apparent

Among patients without clinically apparent ischaemic heart disease, the haemorrhagic complications associated with routine aspirin use may outweigh its benefit unless the subjects have risk factors for atherosclerotic cardiovascular disease.

Willard JE, Lange RA and Hillis LD. The use of a spirin in ischemic heart disease. New Engl J Med 1992; 327:3:175-181.

## **CONTAMINATION OF OBSTETRIC STAFF**

Midwives and obstetricians often come into contact with human body fluids that are known means of transmitting several diseases including hepatitis B and HIV. A British experience has shown that some contamination with body fluids occurred in more than one-third of midwives and obstetricians. Of particular concern was that 23 per cent of the staff had broken skin and 35 per cent were not wearing gloves. It was concluded that practices aimed at preventing contamination are inadequate.

Kabukoba JJ and Young P. Midwifery and body fluid contamination.  $Br\ Med\ J$  1992; 305:226.

#### **HEPATITIS C VIRUS IN SYDNEY BLOOD DONORS**

Hepatitis C virus has recently been identified. Blood containing hepatitis C is highly infectious. A survey of first-time Sydney blood donors has shown the incidence to be 1 per cent among donors. Hepatitis C antibodies can be detected by a screening test and accordingly blood donations carrying the virus hepatitis C can be readily identified and discarded.

Archer GT, Buring ML, Clark B, Ismay S et al. Prevalence of hepatitis C virus antibodies in Sydney blood donors.  $Med\ J\ Aust\ 1992;\ 157:225-227.$ 

#### **ANTENATAL CARE BY MIDWIVES**

A Westmead Hospital study has shown that when midwives, instead of medical practitioners, conducted antenatal clinics for low-risk obstetric patients there was a 28 to 68 per cent salary cost saving, with an improvement in quality of care as measured by appreciation for the continuity of care and information given at the clinic. The experience gained high patient acceptance.

Giles W, Collins J, Ong F and MacDonald R. Antenatal care of low-risk obstetric patients by midwives.  $Med\ J\ Aust\ 1992;\ 157:158-161.$ 

## TYPHOID VACCINATION OF DUBIOUS VALUE

Typhoid fever is perceived as being sufficiently serious to travellers for there to be three different types of vaccine available. But in reality typhoid is a rare disease in travellers. For example, only 6.1 cases per million American travellers were experienced in the early 1980s. There was a higher incidence for travellers to the Indian sub-continent and parts of South America (about 150 cases per million travellers). Despite these marginal risks of infection, millions of travellers continue to be vaccinated. There are significant side-effects of vaccination, including local and more rarely general reactions to the injection. Accordingly it is recommended that before embarking on the vaccination ritual, travellers and their health care providers should consider carefully the necessity of these vaccinations.

 $Editorial: Typhoid vaccination: weighing the options. \textit{Lancet}\, 1992; 340:341-342.$ 

## **PSYCHOACTIVE DRUGS IN GERIATRIC PATIENTS**

There is a high level of use of psychoactive drugs among elderly residents of nursing homes. The use of such drugs continues to be a source of concern because they have substantial adverse side-effects in the elderly. In an American study, active education programs targeted to physicians, nurses and aides have been shown to reduce the use of psychoactive drugs without adversely affecting the overall behaviour and level of functioning of the residents.

Avorn J, Soumerai SB, Everitt DE et al. A randomised trial of a program to reduce the use of psychoactive drugs in nursing homes. New Engl J Med 1992; 327:168-173.

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 $The\ editor\ is\ Dr\ George\ Rubin,\ Director,\ Epidemiology\ and\ Health\ Services\ Evaluation\ Branch,\ NSW\ Health\ Department.$ 

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