

In this month's *Bulletin*

Lessons from the Field

(p. 2)

Research papers published by scientific journals often fail to address one of the key issues in public health: how can scientific findings be applied in the field? In the leading editorial, *Bulletin* editor Hooman Momen introduces a new rubric called Lessons from the Field. Articles in this section will focus on how to translate knowledge and experience into practice and on the practical solutions authors have found to public health problems.

Ivermectin to combat scabies (pp. 34–42)

In the first contribution to Lessons from the Field, Gregor Lawrence et al. assess the effects of a three-year scabies control programme on children in the Solomon Islands. The authors found that the prevalence of scabies fell dramatically after each of 541 children were treated once or twice every two weeks with ivermectin. They also found that ivermectin was effective and practical in controlling streptococcal skin disease and concluded that integrating community-based control of the two diseases with programmes to control filariasis and intestinal nematode infections could be practical and beneficial to public health.

Schistosomiasis in China (pp. 43–48)

Schistosomiasis has long been a major public health problem in China. In their paper, Chen Xianyi et al. report the results of a study to gauge the impact of a 10-year World Bank Loan project to help control the disease. They conclude that large-scale chemotherapy applied in eight Chinese provinces from 1992 to 2001 led to a substantial decrease in the incidence of and deaths from schistosomiasis.

Mental health in acute emergencies (pp. 71–76)

In their round table base paper, Mark van Ommeren et al. argue that consensus is emerging on what constitutes good practice in mental health care for people in poor countries during and after acute emergencies. Public health

experts remain divided on how to treat post-traumatic stress disorder but agree on the merits of both social and mental health interventions. Derrick Silove comments that the best therapy for acute stress is often social, such as providing safety and work opportunities, and reuniting families. The other discussant, Derek Summerfield, agrees that there is widespread recognition of acute stress in emergency situations and that Western mental health care often pays too little attention to social interventions for promoting mental health.

Childhood pneumonia in Pakistan (pp. 10–19)

Every year 1.9 million people globally die from lower respiratory infections, primarily pneumonia, according to WHO estimates. Zeba. A. Rasmussen et al. conducted a randomized controlled trial in Pakistan to compare the clinical efficacy of twice-daily cotrimaxazole, the WHO-recommended first-line treatment, using either standard dosage or double dosage, for non-severe pneumonia in children. The study was conducted among 1143 children aged 2–59 months between October 1995 and July 1996. In their paper, the authors conclude that the double dosage was no more effective than standard dosage.

Improving child survival in Ethiopia (pp. 27–33)

Ethiopia has one of the highest mortality in infants under 12 months and children under five years. Mohammed Ali et al. studied a random sample of 4000 children aged under five years in two districts in northern Ethiopia to assess the effect of community-based health promotion activities on child mortality. The authors visited the districts every six months from December 2000 to November 2002 to document the deaths of children there. After one year, communities in one district were educated about good childcare and caring for sick children. The communities in the other district received this information at the end of the trial. In this paper, the authors find that the community-based public health interventions helped to reduce childhood mortality.

Latin Americans' pharma rules (pp. 64–70)

An increasing number of pharmaceutical products are available in developing countries. Núria Homedes & Antonia Ugalde surveyed 10 Latin American countries in June 2003 to document their pharmaceutical policies on generic and branded drugs as well as the cost and time needed to register different types of pharmaceuticals. The survey included a questionnaire sent to health ministries by email. In this paper, the authors report that different countries use the terms "bioequivalence" and "generic" in different ways. They conclude there is a need to harmonize definitions and technical concepts to ensure that products are of high quality.

Health workers and other reports (pp. 4–9)

WHO's Director Designate for the African Region, Dr Luis Gomes Sambo, outlines his priorities in an interview with the *Bulletin*. Clare Nullis reports that government officials meeting in Abuja, Nigeria, warned that a shortage of health workers could derail development goals. Theresa Braine reports from Mexico City on the summit that spawned proposals to strengthen malfunctioning health systems. The *Bulletin* reports on developing countries, such as Cuba and India, that have produced innovative drugs.

Selective feeding programmes in emergencies (pp. 20–26)

Coverage indicators for selective feeding were included in the Sphere Project's humanitarian guidelines for the first time in 2003. Mark Myatt et al. report the results of a survey method for estimating the coverage of such programmes. They used a stratified design with strata defined using the centric systematic area sample method. The method is simple and rapid to implement and allows overall and per-quadrat coverage to be estimated. They conclude that the new method should be used to estimate the coverage of selective feeding programmes in preference to the WHO Expanded Programme on Immunization or EPI-derived survey methods. ■