

In this month's *Bulletin*

Primary health care and drugs industry reform (pp. 322–324)

Marcos Cueto argues in the leading editorial that primary health care and the notion of “health for all” still command global worldwide appeal and hold immense potential. He revisits the meaning, funding and implementation of primary health care as well as the culture created by “restricted top-down” versions of it. In another editorial M.N. Graham Dukas argues that the Priority Medicines for Europe and the World initiative, launched in 2004, is an important starting point to a “desperately needed” reform of the drugs industry, so that R&D addresses more neglected diseases of the poor.

Impact of HIV pandemic on measles control (pp. 329–337)

HIV infection can make measles vaccination less effective. R.F. Helfand et al. sought to gauge the impact of HIV infection on children who had been vaccinated against measles. They first conducted a literature review to estimate key parameters and then incorporated these into a simple model which is applicable to regions with high HIV prevalence. Their findings indicate that the HIV pandemic could result in a 2–3% increase in the proportion of infants susceptible to measles at birth but that this is not an insurmountable barrier to measles control. The authors conclude that the results of their study help explain the success in eliminating measles in parts of southern Africa with high HIV prevalence.

New method for gauging burden of pneumonia (pp. 353–359)

The leading cause of childhood death in developing countries is acute lower respiratory tract infection, primarily pneumonia. The latter results in 1.9 million deaths a year globally. But attempts to measure the burden of pneumonia and the proportion of it

that is vaccine preventable have failed since there is no clear definition of the condition. A WHO working group has developed a standardized method for identifying radiological pneumonia based on the analysis of 222 chest X-rays over the period 1998–2000. In their paper, Thomas Cherian et al. conclude that this method would be useful in trials of pneumonia vaccine.

Integrated child health care doesn't necessarily cost more (pp. 369–377)

The Integrated Management of Childhood Illness (IMCI) is associated with better quality of care for children but also with claims that it costs more than conventional approaches. In their study, Taghreed Adam et al. looked into whether IMCI really costs more. They compared the cost of child care in two Tanzanian districts where IMCI has been implemented with costs in two neighbouring districts in the United Republic of Tanzania where it had not and found that IMCI was not more expensive in these settings.

Dilemma over bird flu and environmental threats (pp. 325–326)

Sarah Jane Marshall reports from London on the dilemma governments face over whether to commit scarce public health funds to combating a potentially catastrophic outbreak of avian flu among humans that may occur in future. In this month's *Bulletin* interview, Kerstin Leitner, Assistant Director-General of WHO's Sustainable Development and Healthy Environment cluster of departments, talks about environmental threats to public health, medical ethics and other aspects of her team's work.

Curbing the future spread of HIV/AIDS (pp. 378–383)

Accurate forecasts of the future scale of the HIV/AIDS epidemic are essential to curbing the spread of the

HIV virus. In their policy and practice paper, Nicholas C. Grassly & Geoffrey P. Garnett propose a number of alternative risk assessment approaches which they argue would provide more accurate forecasts. One is surveillance of high-risk behaviour and another is mapping the geographical distribution of such behaviour. Commenting on their paper, John Stover argues that more frequent use of these techniques could result in greater success in curbing the HIV/AIDS epidemic in future.

Prohibitive cost of health care for children in Nepal (pp. 338–344)

People in developing countries often fail to utilize health services because they have to pay part or all of the costs. Subhash Pokhrel et al. examined the effect of user fees on the uptake of services in Nepal. According to the 1996 Nepal Living Standards Survey of 2847 households, families reported that 9.7% of children had been sick or injured over a one-month period and that 71.8% had sought care mainly from public health-care providers. In their paper, the authors conclude that fee increases would lead to modest declines in utilization of children's health-care services in Nepal.

Rabies in Africa and Asia (pp. 360–368)

There is little political commitment to tackling rabies partly due to a lack of accurate epidemiological data about the disease. Darryn L. Knobel et al. sought to quantify the public health and economic burden of endemic canine rabies in Africa and Asia by analysing rabies data from these continents and using their results in a set of epidemiological and economic models. In their paper, they estimate that human mortality from endemic canine rabies amounts to 55 000 deaths per year and that 1.74 million disability-adjusted years of life (DALYs) are lost. They conclude that rabies remains a neglected disease in developing countries that disproportionately affects the poor. ■