

In this month's *Bulletin*

Preventing HIV in infants, and how researchers can gain public trust (p. 482–484)

In the leading editorial, Adetokunbo O. Lucas discusses the risks of international collaborative research projects between partners from a developed and a developing country. Lucas concludes that such projects should be monitored to ensure compliance with ethical standards and that a balance of power is maintained between partners. In another editorial, Charles Gilks & René Ekpini discuss the need for potent antiretroviral prophylactic regimens to prevent HIV infection in infants. In a third editorial, Desmond Avery proposes how scientific researchers can gain more public trust.

Let the people set their own health priorities (pp. 485–488)

In the News, Theresa Braine reports on initiatives in Peru and Brazil that encourage public participation to form health policies and set health-research priorities. WHO News summarizes the main resolutions adopted at the World Health Assembly and other recent news. Entries for a WHO photography competition on the theme of disability are published in a photo essay.

Preventing mother-to-child HIV transmission in South Africa (pp. 489–494)

In this month's leading research paper, David Coetzee et al. describe the evolution of the Prevention of Mother-to-Child Transmission (PMTCT) of HIV programme in the Cape Town township of Khayelitsha in South Africa. The study describes the health care received by mothers and infants and assesses overall effectiveness of the programme. The PMTCT programme in Khayelitsha has entered its sixth year of operation, and continues to be characterized by high levels of acceptance.

Quality of care for rape survivors in South Africa (pp. 495–502)

Rape is a major public health and human rights concern in South Africa, where

concerns have been voiced as to how it is managed in the public health sector. In their paper, Nicola J. Christofides et al. report where the best services for rape survivors are provided nationally and who provides the best clinical care. They found that there are many weaknesses in facilities and in care of rape patients. Few staff are trained. The best clinical care is provided by older staff with a higher case-load who are working in a facility with management guidelines and who believe rape to be a serious medical problem.

Auditing the quality of data on immunization (pp. 503–510)

The Global Alliance for Vaccines and Immunization provides financial rewards to 48 developing countries based on an increase in the number of children immunized. In their study, O. Ronveaux et al. assess the quality of immunization coverage data. The authors measured the quality of 27 country audits conducted from 2002–03. They conclude that producing and using data to guide programme actions remains a major challenge and that corrective efforts should be made by district and health units.

Study collaboration on disease in Africa (pp. 511–517)

Poor countries need support to perform necessary research. However the association between international collaboration and the local relevance of the research performed has been debated. George H. Swingler et al. compared randomized controlled trials performed in Africa on diseases of specific African importance with African trials of 'global' and 'Western' importance in terms of differences in non-African collaboration and funding. They conclude that there was no detrimental association of international collaboration with local importance, but that studies with a South African corresponding author and studies with funding from industrial sources were negatively associated with African importance.

Progress towards elimination of iodine deficiency (pp. 518–525)

Efforts to provide universal salt iodization have reduced iodine deficiency worldwide. The goal of iodine deficiency elimination has been adopted by the World Health Assembly with universal salt iodization as the recommended strategy. In their article, Maria Andersson et al. provide estimates on iodine status of the population worldwide and report on the global progress towards this goal. The number of countries where iodine deficiency is a public health problem has decreased by half over the last decade. Nevertheless, 54 countries are still iodine deficient.

New test for schistosomiasis in China (pp. 526–533)

A novel method has proved effective in screening for schistosomiasis japonica in field settings. Non-experienced health workers can effectively identify villagers with *Schistosoma japonicum* infection in field settings through the use of a recently developed rapid test, a colloidal dye immunofiltration assay (CDIFA). Xiang Xiao et al. compared CDIFA used by primary health-care workers in China with a standard method. They found that the CDIFA is a specific, sensitive and reliable test for the rapid screening of schistosomiasis.

The ethical implications of rationing antiretroviral treatment (pp. 541–547)

In their paper, Sara Bennett & Catherine Chanfreau review the eligibility and targeting criteria used by Mexico, Senegal and Uganda at different points in the scale-up of antiretroviral therapy, to draw lessons on the ethical approaches to rationing such treatment. In their study, the authors identify and discuss different types of explicit rationing criteria. They conclude that explicit rationing criteria should reflect societal values, which should be achieved through open debate and consultation. ■