In this month’s *Bulletin*

**WHO 60th anniversary commemorative volume**

Every month in 2008, the cover of the *Bulletin* features a classic public health poster with a commentary on the topic illustrated. This month’s issue is dedicated to the importance of health information, and one of WHO’s first statistical texts is highlighted in the lead editorial (162). In a second editorial, Sanjoy Bhattacharya (163) proposes some strategies for breaking down the divide between advocates of “vertical” and “horizontal” public health programmes. In an interview, Sally Stansfield, executive secretary of Health Metrics Network, (170–171) says it’s time for the world to shift the ownership of health information to countries instead of letting donors and disease-specific programmes run the agenda.

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**Japanese encephalitis surveillance**

Tom Solomon et al. (178–186) assess the field-test version of the new WHO Japanese encephalitis surveillance standards, with some advice for amendments.

**Breast may still be best**

Anna Couroucedis et al. (210–214) suggest that exclusive breastfeeding by HIV-infected mothers may still be the best option for child survival in low-income countries.

**Global equity in renal replacement therapy**

Sarah L. White et al. (229–237) present a range of strategies for improving access to treatment for the world’s poorest sufferers of end-stage kidney disease.

**Acute pesticide poisoning**

Thundiyil et al. (205–209) propose an international standard for classifying cases of pesticide poisoning.

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**Canada and the United States of America**

**International Health Regulations**

Kumanan Wilson et al. (215–220) suggest how federal countries might implement the regulations.

**India**

**Immunization savings**

Chutima Suraratdecha et al. (221–228) find that supportive supervision of immunization programmes results in major cost savings.

**China, India and the Russian Federation**

**The methadone fix**

Even 40 years after their introduction, substitution therapies such as methadone are still the most promising method of reducing drug dependence, but getting access to treatment is a global problem, writes Patralekha Chatterjee (164–165).

**Singapore**

**Rise in dengue fever**

Joseph R Egger et al. (187–196) propose that mosquito control in Singapore has resulted in decreased herd immunity in older age groups.

**Bangladesh**

**Stillbirth linked to arsenic**

Nicola Cherry et al. (172–177) determine the link between high levels of arsenic in water supplies and an increase in stillbirths.

**Fiji**

**A broken dream**

Johnety Jerety (166–167) reports how primary health care programmes have stalled across Fiji due a shortage of health workers and funds.

**Kenya**

**Treatment turmoil**

Post-election violence in Kenya disrupted the complex systems for delivering HIV/AIDS treatment in rural areas, reports Peter Mwaura (168–169).

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**Europe**

**Towards elimination of measles**

Nick Andrews et al. (197–204) urge countries to step up vaccine coverage and call for catch-up campaigns for older age groups.

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