

# Highlights from this issue

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The *British Medical Journal* has for many years run a Christmas special, in which doctors and researchers vie to publish content from the bizarre to the seasonal. This year, we are emulating our 'big sister' with the inaugural edition of a Winter Special to coincide with the astrological sign of Capricorn.

Our first theme is the history of the specialty, seen through the eyes of a young historian reading our journal for the first time. As you may know, our archive runs back to 1925 when we began as the *British Journal of Venereology*. Early editions advertised the names and addresses of venereal disease attendants, healthcare assistants of the distant past and displaced from their profession by the cessation of hostilities, now seeking new posts. We asked Huw du Boulay to explore representations of the great, stigmatised diseases of the past century in the journal, for the light this would shed on clinical worlds past. Huw has written an editorial and five fillers about the experience of reading our journal as a historical and professional outsider—we hope you will find it interesting, and that it will lead into our archive.

Our regular content begins with a report from Australia on the near-disappearance of genital warts in younger women within a clinical population<sup>1</sup> accompanied by a podcast on the clinical and policy implications of this dramatic reduction. While clinical diagnoses are an important form of human papilloma virus surveillance, they sample a limited population. Sinka *et al*<sup>2</sup> report a feasibility study of postal self-sampling for monitoring the impact of human papilloma virus vaccination, concluding that low uptake is likely to limit its utility.

Two papers address testing in men who have sex with men (MSM). A paper from London by Harte *et al*<sup>3</sup> reports that two-thirds of men diagnosed with a bacterial sexually transmitted infection could be rescreened, but the authors acknowledge that we need to know more in order to assess the impact on transmission. Debate on rapid HIV testing continues, with a report from Wilson *et al* in Australia<sup>4</sup> concluding that rapid tests would have a marginal—some would say negligible—effect on transmission of HIV

under the assumption of unchanged testing frequency.

Our limited ability to draw conclusions from the data and indicators currently available about chlamydia risk, control activities and outcomes is the subject of two research papers. Bender *et al*<sup>5</sup> present a cross-national study of the relationship between chlamydia, pelvic inflammatory disease, ectopic pregnancy and infertility, making a case for the need for further development and validation of indicators. Trent *et al*<sup>6</sup> explore health utilities of parents and adolescent girls for pelvic inflammatory adolescents perceived lower health-related quality of life than their parents.

Concerns about the psychosocial disadvantages of herpes simplex virus type 2 testing are largely dismissed in the view of Ross *et al*<sup>7</sup> in a systematic review of the literature.

A mini-supplement within the journal presents papers on the future of AIDS, as we reach the 30th year of the epidemic—what are the prospects for the next 30 years?

We were interested to receive the paper by Willms *et al*, exploring the means by which faith communities can be engaged in HIV prevention through theological engagement and critique.<sup>8</sup> The authors explore a specific process of engagement, termed a 'conceptual event', with diverse local faith leaders in Malawi to explore and develop often competing religious imperatives in relation to HIV presentation. This paper gives some insight into challenges to those working with religious leaders.

Bohl *et al*<sup>9</sup> and Yun *et al*<sup>10</sup> explore sexual mixing in the contrasting settings of racial mixing for American MSM, and bisexual mixing among Chinese MSM. Both highlight vulnerable populations, needing renewed prevention interventions. So it is heartening to see Pinho *et al*<sup>11</sup> report a success story among truck drivers in Brazil, for HIV infection though hepatitis B remains a problem.

We end with the interaction between education and HIV progression in a Spanish cohort,<sup>12</sup> and missed diagnosis of Kaposi's sarcoma in a man with high CD4 count and low viral load.<sup>13</sup>

Finally, thanks to Jessica Stockdale for artwork on the front cover to mark our historical special issue.

**Provenance and peer review** Commissioned; internally peer reviewed.

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