



Highlights from this issue

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It's nearly a decade since I began as Editor in Chief of *Sexually Transmitted Infections*, and it is still a treat to put together a new issue. Since I began the world of medical publishing has transformed the mission of a professional journal like this, which primarily exists to serve and to educate a community of healthcare practitioners while reaching out to a global audience. Yet still, as I put together an issue aimed at the (mainly) BASHH community who look forward to the thud of the journal on their doormat, the process of choosing and ordering material for an issue is an important opportunity for connexion with our readers. Nearly all our content—with the exception of letters and fillers—is published online well before it reaches the print journal. With the help of our Twitter and Facebook accounts, it reaches readers across the world on the day of publication. So what is the role of the printed journal?

This month's issue is perhaps more varied than many, covering a range of emerging challenges in policy and practice. After a first wave of PREP utopianism, it is sobering to see Shang *et al*'s review which demonstrates lower adherence in younger and female individuals.¹ Like all biomedical interventions, PREP will create social structures of exclusion and vulnerability which we will need to address beyond the communities that have so effectively advocated for PREP. Two other studies explore HIV transmission risk within populations already diagnosed with HIV. Stirratt *et al* explore risk behaviour among patients in HIV care with a viral load >1500 copies/mL,² while Deuba report a multi-country study of condom use among people living with HIV in the Asia-Pacific region.³

With *Trichomonas vaginalis* (TV) we are also seeing a restructuring of vulnerability in developed countries through the impact of new approaches to cervical cancer screening, which is nicely explored in Rönn *et al*'s editorial.⁴ The authors reflect on a mathematical modelling study by Hui *et al*⁴ and explore the interactions between technological, social and biological determinants in the context of reduced detection through cervical screening. While this month's Natsal-3 report by Field *et al*⁵ confirms that rates of TV are very low in the UK

population, both TV and cervical screening uptake vary markedly within population groups and serious consideration needs to be given to ensuring detection in women at greatest risk. And Wynn's study of antenatal women in Botswana is a reminder that TV remains a major challenge in most regions of the world.⁶

We have two studies on the immune response to syphilis this month. Kenyon *et al*⁷ compare the immune response in repeat *vs* initial infection, while Post's team report on sex differences in immunoassay results.⁷ Talking to rheumatologist colleagues, I'm struck by their envy of the personalised approaches we can take to HIV treatment through viral resistance testing, rather akin to emerging longitudinal and personalised approaches to the treatment of cancer. It's nevertheless surprising that syphilis—the first identified and classical form of vasculitis—attracts so little attention among immunologists as a paradigm case of infection triggered autoimmunity. There must surely be space for new, paradigm shifting collaborations in this interdisciplinary field of basic science.

Point of care tests (POCTs) are as usual an important topic. A Canadian study by Johnson *et al*⁸ explores the populations accessing POCT for HIV, while Bartelsman *et al* explore the potential impact of gonorrhoea POCT at population level in MSM in a modelling study.⁸ Self-testing for HIV is explored in a study of home use by Saunders *et al*.⁹

The sexual health needs of transgender people in Australia is explored by Bellhouse *et al*,¹⁰ and the correlates of HPV detection in urine by Aung *et al*.¹¹ And as always you will find much of interest in the Clinical Roundup by Emily Chung and in this month's letters.

So to come back to our question—in an age where guidelines are produced and published online, what does a printed professional journal add? This month's research and editorial includes good examples of how emerging, preliminary research—on PREP, on TV and on syphilis—shows us where the next challenges are leading us. Our Educational articles (of which we always want more) seek out the places where guidelines do not yet reach. And we really do look to you all,

our readers, for ideas on what else we can cover. Do get in touch.

Handling editor Gwenda Hughes

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