



## Highlights from this issue

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Jackie A Cassell, *Editor in Chief*

Over the past month, I have been reading an enthralling book about the diagnosis and care of leprosy, long before germ theory and the formalisation of modern approaches to diagnosis.<sup>1</sup> Carole Rawcliffe explores both familiar 19th century segregation approaches to infectious diseases, and the radically unfamiliar approaches of the mediaeval period and their evolution. The strangeness of leprosy, and its complex challenges to theories of disease from the humoral, through miasmatic to modern germ theory, should give us pause for thought as we consider candidates for status of emerging STIs which potentially need control and containment. This month we publish a meta-analysis of *Mycoplasma genitalium* prevalence in which the authors conclude that 'low estimated prevalence of *M. genitalium* in the general population, pregnant women and asymptomatic attenders at clinics does not support expansion of testing to these groups'.<sup>2</sup> An accompanying editorial by Tucker and colleagues<sup>3</sup> explores the implications of this important summary of the evidence, emphasising the importance of vigilance about antibiotic resistance.

It seems likely that human papilloma virus (HPV) vaccination, and the prevention of HPV related disease, will be with us for a long time to come. The distribution of serotypes,<sup>4</sup> school-based access to vaccination,<sup>5</sup> vaccination uptake in clinic populations of men who have sex with men<sup>6</sup> and population prevalence rates<sup>7</sup> continue to present challenges for implementation science in a complex global picture.

For those of us attending the recent British Association for Sexual Health and HIV (BASHH) and British Association for Sexual Health (BHIVA) conference in Edinburgh, the emergence and increasingly sophisticated development of e-health pathways was striking. The experience of patients is central to

modernisation of care pathways, and we are delighted to publish a qualitative study of patient experience in a study by Aicken *et al.*<sup>8</sup> This nicely accompanies a report by Tanton *et al.*<sup>9</sup> from the latest Natsal study, which describes the characteristics of attenders and non-attenders at sexual health clinics. Constant vigilance as to who is at risk of falling out of effective care will be increasingly important as the digital turn reconfigures our services. While it is indisputable that health services are years if not decades behind other sectors in digital opportunities for clients and customers, the potential for exacerbating inequalities should stay at the front of our minds.

The detection of chlamydia and gonorrhoea is another theme this month, with a study by Chow *et al.*<sup>10</sup> of sampling techniques and another of pooled samples.<sup>11</sup> Together with Tisla-Sala's report on non-compliant prescribing<sup>12</sup> these reflections provide perspective on growing concerns about antimicrobial resistance (AMR).

Finally this month's research offering includes an important report on a high HIV incidence population of men who have sex with men in the United States<sup>13</sup> and an exploration of Australian MSM views on biomedical approaches to prevention.<sup>14</sup>

**Handling editor** Jackie A Cassell

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