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Teenagers' attitudes to breast feeding

Breast feeding has received publicity recently from both health professionals and health ministers. There has been some increase in the incidence of breast feeding, but many women breast feed their infants for less than six weeks. In Liverpool few women attempt breast feeding. It has been suggested that infant feeding should be part of health education in schools, which may encourage future generations to breast feed. To explore the attitudes to breast feeding of Liverpool's future parents Jacqueline Gregg carried out a questionnaire survey of 400 pupils aged 14 and 15 (p 147). This showed the difficulties the pupils had separating the concept of breasts as sexual objects from their physiological role. Although they believed breast feeding to be healthier and natural, most pupils thought that breast feeding should be confined to the privacy of the home.

Role of supplemental drugs in side effects of treatment with morphine

Side effects are fairly common in patients receiving high doses of morphine to relieve pain caused by malignant disease, but there have been few studies of these effects. On p 150 Potter *et al* report their study of 19 patients who received morphine as the main analgesic. Thirteen of the patients had important side effects: 12 of them developed myoclonus and one hyperalgesia of the skin. A greater proportion of the patients with side effects were taking antidepressant or antipsychotic drugs as antiemetics or adjuvant agents than those without side effects. The authors conclude that some supplemental drugs interact with opiates to cause myoclonus and recommend that different adjuvant agents be used if symptoms develop.

Clinical course of primary HIV infection

Factors that may predispose to or promote the development of symptomatic disease in patients with HIV infection are unknown. As the primary infection with HIV may be asymptomatic or associated with quite severe illness Pedersen *et al* (p 154) investigated the relation between the clinical course of the primary HIV infection and the subsequent risk of disease progression in 86 men who became positive for HIV antibody. Subjects who had a longlasting primary illness had a significantly higher risk of developing symptomatic HIV infection, a more rapid loss of CD4 lymphocytes, and recurrence of HIV antigenaemia. The course of the primary infection may determine the subsequent course of the infection, and a delineation of the early events may help define the differences in clinical outcome among patients with HIV infection.

Risks of AIDS among workers in the "sex industry" in Edinburgh

Prostitution, drug abuse, and AIDS frequently coexist. Thomas *et al* (p 148) interviewed 205 male and female workers in Edinburgh's "sex industry" about their risk behaviours and HIV states. A fifth of the group had used intravenous drugs, and virtually all of these injectors had shared their needles and syringes with others. One in 12 reported being HIV positive. One in four stated that they would engage in unprotected sex with clients for more money, and a similar proportion said that they sometimes failed to seek medical advice even if they had genital or anal symptoms. The authors discuss what these findings imply for AIDS prevention and conclude that those who buy and sell sexual services should be priority targets for health education and strategies to minimise harm.

INSTRUCTIONS TO AUTHORS

The BMJ has agreed to accept manuscripts prepared in accordance with the Vancouver style (BMJ, 6 February 1988, p 401) and will consider any paper that conforms to the style. More detailed and specific instructions are given below.

The following are the minimum requirements for manuscripts submitted for publication.

Manuscripts will be acknowledged; letters will not be unless a stamped addressed envelope is enclosed.

Authors should give their names and initials, their posts at the time they did the work, and one degree or diploma. All authors must sign their consent to publication.

Three copies should be submitted. If the manuscript is rejected these will be shredded.

Typing should be on one side of the paper, with double spacing between the lines and 5 cm margins at the top and left hand side of the sheet.

Abbreviations should not be used in the text.

SI units are used for scientific measurements, but blood pressure should continue to be expressed in mm Hg.

Statistical procedures should be described in the methods section or supported by references.

References must be in the Vancouver style and their accuracy checked before submission. They should be numbered in the order in which they appear in the text.

Letters to the editor submitted for publication must be signed personally by all authors, who should include one degree or diploma.

The editor reserves the customary right to style and if necessary shorten material accepted for publication and to determine the priority and time of publication.

Detailed instructions are given in the *BMJ* dated 7 January 1989, p 40.