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Medroxyprogesterone and risk of breast cancer

Few drugs have provoked more controversy than the injectable contraceptive medroxyprogesterone (Depo-Provera). Used widely in many developing countries and some developed ones, it is still not approved for contraceptive use in the United States, the country responsible for its manufacture. One reason for concern about the drug is that it caused malignant mammary tumours in beagles. Several expert groups, including the Committee on Safety of Medicines, have concluded that the beagle is an unsuitable model for predicting the effects of long term use of progestogens on the human breast, although the grounds for this view have been disputed by a public board of inquiry established by the United States Food and Drug Administration. There have been few studies of medroxyprogesterone and breast cancer in women. On p 759 Paul *et al* report the largest to date—a national case-control study from New Zealand. The overall results were reassuring, with a relative risk of 1.0 for using the drug; but findings in certain subgroups suggested that it might increase the risk of breast cancer in young women. The relation between hormonal contraceptives and breast cancer continues to be uncertain, and some may argue that the beagle should not yet be laid to rest.

Salmonella enteritidis food poisoning

The food poisoning epidemic in England and Wales caused by *Salmonella enteritidis* phage type 4 has been linked with intact fresh shell eggs and food products containing them. The first national case-control study in England, comparing eating of suspect food items in the three days before the onset of symptoms in confirmed sporadic cases of the infection with that in matched controls, is reported by Cowden *et al* (p 771). Their results support previous findings, that raw eggs and egg products and lightly cooked eggs are associated with *S enteritidis* phage type 4 infections. There is no evidence to suggest that the increasing incidence of infection is due to declining standards of domestic food hygiene; public health education and reduction in the contamination of shell eggs and infection of poultry with *S enteritidis* seem to be the best approach.

Outcome of elective prostatectomy

At least a tenth of men undergo prostatectomy, usually for symptoms of outflow obstruction. The operation is safe, but the success rate varies between 70% and 80%. Neal *et al* (p 762) set out to assess whether the outcome might be improved by selecting men by urodynamic criteria and in particular whether men with low voiding pressures had a worse result. They studied 217 men having elective prostatectomy mainly for symptoms of outflow obstruction and a low urinary flow rate

(<15 ml/s) before and after their operation by symptom scoring and urodynamic assessment, the results of which were not available to the urologist. The men with a poor outcome after operation (about a quarter) were classified into two broad groups: those with urgency and urge incontinence, who were significantly more likely before operation to have had urge incontinence and detrusor instability, and those with persistent symptoms of poor urinary flow, who were significantly more likely before operation to have had a small prostate, a low voiding pressure, and a low urethral resistance. Preoperative urodynamic measurements, however, did not predict outcome with sufficient precision to be useful clinically, and there is still a need to identify before operation those who do not benefit greatly from this procedure.

Weight and hypertension

The relations among blood pressure, body weight, and weight changes are well established. A weight reducing diet is generally accepted as the first choice of treatment for moderate hypertension in obese patients. Our understanding of the nature of this association, however, remains poor. A major question is whether the changes in blood pressure induced by changes in body weight are predictable from the relation between blood pressure and attained body weight. On p 767 Sonne-Holm *et al* report results of a study of adult men weighed twice with an interval of four to 40 years. They showed that changes in body weight have a great influence on the prevalence of arterial hypertension independently of the effect of the attained weight, particularly in obese subjects. This suggests that obesity shares causal factors with arterial hypertension rather than leading to the disease.

Maternal reinfection with rubella

As with other naturally acquired and vaccine induced viral infections, reinfection with rubella may also occur. If reinfection occurs early in pregnancy it may cause fetal damage. Unless clear criteria for reinfection are defined, however, reinfection may be diagnosed on inadequate grounds, thereby casting unnecessary doubts on the value of rubella vaccination. On p 773 Best *et al* recommend criteria that should be established before confirming a diagnosis of reinfection and describe five cases of maternal reinfection resulting in intrauterine infection that fulfil these criteria. Two women had therapeutic abortions and the infants of the three who continued to term had clinical features of the congenital rubella syndrome. Though Best *et al* have set up a prospective study to measure the risks associated with maternal reinfection, the implementation of the recently introduced measles, mumps, and rubella vaccination programme should reduce the circulation of rubella in the community and therefore reduce even further the substantial risk to the fetus associated with a primary maternal infection and the very small risk associated with reinfection.