



## Police: Death and injury

South Africa has awful statistics of violence, a significant blot on our otherwise proudly transforming society. And our police are literally and figuratively in the firing line. Like police forces elsewhere in the world there are among them more heroes than horrors. We need them to operate effectively, and they need our support and appreciation. Plani, Bowley and Goosen from the Department of Surgery at the University of the Witwatersrand report on their review of injured South African Police Service (SAPS) members at a trauma centre over several years (p. 851).

The high levels of crime and interpersonal conflict in South Africa have been described as a 'malignant epidemic of trauma'. The SAPS are in the front line, their official website listing a roll of honour of 127 SAPS members who lost their lives in 2001 alone. In this study there were 134 SAPS personnel admitted over a 9-year period. Ninety-two (69%) were injured by firearms, more than 70% of gunshot wounds being to the torso, and 31 (23%) had been in motor vehicle accidents.

The authors conclude that feedback concerning the effectiveness of body armour and information from members on its comfort and ease of use will enable design improvements to be made, furthering acceptance of protective equipment. Use of front and back seat restraints should be mandatory in police cars, especially during high-speed pursuits. Ongoing attention must be paid to the psychological support of officers and their families.

## Contraception and dual protection

A trilogy of articles addresses differing but related topics of vital importance to the protection of sexually active women in South Africa.

Kleinschmidt and colleagues (p. 854) report on statistical analyses of responses by sexually active women from the South African Demographic and Health Survey. Dual protection against sexually transmitted infections (STIs) and unintended pregnancies is a health issue of particular importance in South Africa, not only because of the high rates of STIs, including HIV, but also because a large proportion of women use long-acting effective hormonal contraceptive methods and therefore have little incentive for using barrier methods for contraceptive purposes. Of all sexually active women aged 15 - 49 years, 10.5% used a condom at last sex and 6.3% used a condom as well as another contraceptive method. They conclude that there is an urgent need for targeted programmes that increase dual protection with condoms.

Addressing the topic of 'failed' contraception in a South African rural population, Van Bogaert (p. 858) notes that although access to termination of pregnancy is an integral component of women's reproductive health and rights, it is surely more desirable to avoid unwanted pregnancies. Not using contraception is one of the main causes of unwanted

pregnancy. Better education of both service providers and users is needed to improve use, compliance and perseverance with contraception.

Injectable progestogen-only contraceptives (IPCs) are typically administered to women immediately after delivery in South Africa. Hani *et al.* (p. 862) examined women's preferences regarding timing of postpartum IPC initiation, as well as their contraceptive and breast-feeding behaviours and pregnancy risk in the early postpartum period. They conclude that it is important to include informed choice in postpartum IPC guidelines.

## The Alcohol Injury Fund

Ethyl alcohol may be 'a social lubricant, a sophisticated dining companion, a cardiovascular health benefactor or an agent of destruction'. Sebastian van As, Charles Parry and Mark Blecher, a trio from diverse medical backgrounds, join forces on p. 828 to argue convincingly for the establishment of an 'Alcohol Injury Fund', to address the negative effects of alcohol consumption on South African society.

Trauma is the leading cause of admission to hospitals in all South African provinces and the leading cause of childhood deaths. Over half of all patients presenting to trauma units were victims of violent injuries, and across sites between 35.8% and 78.9% of patients tested positive for alcohol. Deaths due to transport-related incidents, firearm-related deaths and deaths due to other assaults are alcohol-related in a large proportion of cases. Alcohol is also an important co-factor for risky sexual behaviour and HIV transmission, violent crime, and a wide range of social problems. Estimated health and other social costs associated with alcohol abuse in South Africa are R9 billion per year!

The authors make recommendations concerning varying increases in taxes for alcoholic beverages. From this additional income they propose the establishment of an Alcohol Injury Fund for victims of alcohol-related trauma to provide a broader base of funding of victims as well as for needed equipment for beleaguered trauma units.

## Vaccines and immune responses in poor countries

Some reasons for the differences in immune system responses to antigens between individuals in developed and poor countries are addressed by Miles Markus (p. 834). Reduced exposure to infectious diseases in developed countries in modern times, for example, has led to an increased prevalence in atopy compared with that in developing countries. Deficiency of zinc in the diet, widespread in underdeveloped regions, is responsible for a defective T-helper cell type 1 (Th1) response. Anthelmintic treatment before vaccination has been shown to enhance the post-immunisation response to vaccines against more than one bacterial disease.

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