

PUBLIC HEALTH ABSTRACTS

Professor James S. Lawson, Professor and Head of the School of Health Services Management at the University of NSW, has prepared the following public health items from the literature.

BRAIN DAMAGE AND SHEEP DIP

Sheep dip commonly contains organophosphate compounds which in repeated low doses may result in damage to the nervous system. A study of British farmers has demonstrated that they performed significantly worse than controls in tests to assess sustained attention and speed of information testing.

Stephens R, Spurgeon A, Calvert IA et al. Neuropsychological effects of long-term exposure to organophosphates in sheep dip. *Lancet* 1995; 345:1135-1139.

SMOKING INCREASES RISK OF BREAST CANCER

It has been suggested that cigarette smoking may reduce cancer of the breast. This hypothesis is based on alterations to hormone levels associated with smoking. But there appears to be a direct carcinogenic effect on the breast associated with smoking. This has been confirmed by a Danish-based study, which shows there is a pronounced increased risk of breast cancer in women who have smoked for more than 20 years (odds ratio 1.6).

Bennicke K, Conrad C, Sabroe S et al. Cigarette smoking and breast cancer. *Br Med J* 1995; 310:1431-1433.

EATING FRUIT AND VEGETABLES – HOW MUCH?

Health information should be clear and unambiguous. Advice to eat more fruit and vegetables gives consumers no indication of the quantities involved. If advice is being given that say five portions of fruit and vegetables are good for you, these portions need to be defined. A portion might equal a cupful of berries, two spoonfuls of beans, two apples and a small bowl of salad. On the other hand, a couple of slices of tomato in a sandwich or a few mushrooms on a piece of chicken should not count as a portion.

Williams C. Healthy eating: clarifying advice about fruit and vegetables. *Br Med J* 1995; 310:1453-1455.

FOLIC ACID AND PREVENTION OF NEURAL TUBE DEFECTS

The evidence appears conclusive that an increase in the intake of folic acid among women planning pregnancy will prevent most neural tube defects. Some are recommending a population approach to this issue. It is proposed that folic acid be added to common foodstuffs such as flour, in the

same way that white flour is commonly fortified with vitamins and minerals. Such an approach might substantially reduce the problem. About 350 infants with neural tube defects are born in Australia each year.

Wald NJ, Bower C. Folic acid and the prevention of neural tube defects. *Br Med J* 1995; 310:1019-1020.

SUICIDE IN OLDER AUSTRALIANS

Recent concern about the increase in youth suicide has overshadowed the fact that suicide rates remain highest in men aged 75 years and over. More than 90 per cent of such victims have a mental disorder, predominantly depression (75 per cent). Most of those with depression are inadequately treated. Early recognition and treatment are priorities.

Draper BMJ. Prevention of suicide in old age. *Med J Aust* 1995; 162:533-534.

FIREARM CONTROL IN QUEENSLAND REDUCES SUICIDE

Most firearm deaths are suicides and most homicides due to firearms are triggered by personal distress. More than 85 per cent of 587 firearm deaths in Queensland between 1980 and 1989 were associated with personal distress as opposed to crime or accidents. In January 1992 a new Weapons Act took effect. The essential feature of the Act is a 28-day "cooling off" period between applying for and receiving approval to buy a weapon. Although the evidence is preliminary, there appears to be a statistically significant reduction in suicides due to firearms of about 35 per cent. However, there was little change in rural areas.

Cantor CH, Slater PJ. The impact of firearm control legislation on suicide in Queensland: preliminary findings. *Med J Aust* 1995; 162:583-585.

THE VALUE OF GERIATRIC INTERVENTIONS

Ten years ago Rubenstein et al reported the astonishing effectiveness of a geriatric evaluation and assessment unit. Two recent US studies produced conflicting results. One study confirmed the value of geriatric assessment and rehabilitation, while the other showed no difference to standard care. The authors argued that the lack of a difference in the second study was due to general physicians now possessing the special skills of geriatricians. Their overall conclusion was that specialised geriatric programs are of real value.

Caplan EW. The value of geriatric interventions. *N Engl J Med* 1995; 332:1376-1377.