



This Issue in the Journal

Screening for prostate cancer: a survey of New Zealand general practitioners

J Durham, M Low, D McLeod

The National Health Committee advises against screening for prostate cancer. In spite of this advice there has been a large increase in the identification of new cases of prostate cancer. The results of this study suggest that this increase is due to a majority of general practitioners continuing to screen for prostate cancer. It suggests that most New Zealand general practitioners support a screening programme with no proven benefit and the potential to cause considerable harm.

Prostate cancer screening: knowledge, experiences and attitudes of men aged 40–79 years

B Arroll, S Pandit, S Buetow

A telephone survey of 120 men in Auckland reported that 81% of them felt it was necessary to screen for prostate cancer in men without concerns or symptoms. This is in spite of the New Zealand Cancer Society not recommending such an activity. It is still not known if treatment of screen-detected prostate cancer is effective; this information is expected in the next few years from current research trials.

Smoking behaviour and expectations among Auckland adolescents

J McCool, L Cameron, K Petrie, E Robinson

A survey that provides evidence of early smoking initiation and daily smoking behaviour was conducted with Form Two and Form Six students in Auckland. By age 12 years, 29% of adolescents had already experimented with tobacco and 5% were daily smokers. Daily smoking rates increased by 25% between Form Two and Form Six. The study highlights the role of developmental, demographic, and attitudinal factors in adolescence, which have implications for smoking prevention policy and initiatives.

Nurse-led dyspepsia clinic using the urea breath test for *Helicobacter pylori*

A Fraser, S Williamson, M Lane, B Hollis

Gastroscopy is the most useful investigation of 'indigestion' but resources are limited. Testing for the bacteria *Helicobacter pylori* can identify patients at higher risk of peptic ulcer. Patients referred for a gastroscopy were assessed by a 'test-and-treat' approach in a nurse-led clinic. Good symptom relief was seen for patients with *H. pylori* infection treated with antibiotics. Patients with a negative test were reassured and referred back to their GP. Nearly half the patients had a positive breath test for *H. pylori* (reflecting a mixed ethnic background). After three years' follow up only 24% of patients needed gastroscopy.