

giz Health, Education, Social Protection News & Notes 05/2015

*A bi-weekly newsletter supported by GIZ
(Deutsche Gesellschaft für Internationale Zusammenarbeit)*

08 March 2015



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http://www.health.bmz.de/en/services/newsletters/HESP_News_Notes/index.jsp



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Germany's commitment to health and social protection

[Training multidisciplinary medical teams in emergency obstetric care](#)

International Women's Day: [Why social protection for women pays off](#)

More at: <http://health.bmz.de/>

BOOKS

Health in All Policies: Training Manual

by Ilona Kickbusch, Callum Brindley, Vivien Stone et al.
World Health Organization, 25 February 2015



271 pp. 4.0 MB:

http://apps.who.int/iris/bitstream/10665/151788/1/9789241507981_eng.pdf



This manual is a training resource to increase understanding of the importance of Health in All Policies (HiAP) among health and other professionals. The material will form the basis of 2- and 3-day workshops, which will: build capacity to promote, implement and evaluate HiAP; encourage engagement and collaboration across sectors; facilitate the exchange of experiences and lessons learned; promote regional and global collaboration on HiAP; and promote dissemination of skills to develop training courses for trainers.

* * *

The African Regional Health Report 2014

The Health of the People - What works

by Derege Kebede, Delanyo Yao Tsidi Dovlo, Francis Chisaka Kasolo et al.

World Health Organization, Regional Office for Africa, 2014



170 pp. 8.6 MB:

http://whqlibdoc.who.int/afro/2006/9290231033_rev_eng.pdf?ua=1



This report uses a wide range of data to show that the overall health of the people living in the Region has improved considerably in the past decade. Some of this has been due to demographic and economic change and to improved political stability. But much has also been due to sustained efforts to prevent illness and maintain good health, improve access to treatment when illness does occur, and find ways to deliver a better level of health care in the African context.

* * *

Paying for performance in health care: Implications for health system performance and accountability

Edited by Cheryl Cashin, Y-Ling Chi, Peter Smith et al.
European Observatory on Health Systems and Policies Series, 2014



312 pp. 11.1 MB:

http://www.euro.who.int/_data/assets/pdf_file/0020/271073/Paying-for-Performance-in-Health-Care.pdf?ua=1

Pay for performance (P4P) has been identified as an innovative tool to improve the efficiency of health systems but evidence that it increases value for money, boosts quality or improves health outcomes is limited. Using a set of case studies from 12 OECD countries (including Estonia, France, Germany, Turkey and the United Kingdom), this book explores whether the potential power of P4P has been over-sold, or whether the disappointing results to date are more likely to be rooted in problems of design and implementation or inadequate monitoring and evaluation.



* * *

Facets of public health in Europe

Edited by Bernd Rechel and Martin McKee
European Observatory on Health Systems and Policies Series, 2014



320 pp. 8.4 MB:

http://www.euro.who.int/_data/assets/pdf_file/0003/271074/Facets-of-Public-Health-in-Europe.pdf?ua=1



In the last two centuries, public health has reduced the impact and prevalence of infectious diseases, but much remains to be done to reduce non-communicable diseases, such as heart disease and cancer, which comprise the bulk of the disease burden on the WHO European Region. This book takes a broad but detailed approach to public health in Europe and offers the most comprehensive analysis of the Region available. It considers a huge range of key topics in public health and uses examples from a diverse range of countries to illustrate different approaches to public health.

* * *

Hepatology 2015

A Clinical Textbook - Sixth Edition

by Stefan Mauss, Thomas Berg, Jürgen Rockstroh et al.
Associate Editor: Bernd Sebastian Kamps; Flying Publisher



655 pp. 9.6 MB:

<http://pdf.flyingpublisher.com/Hepatology2015.pdf>



The book has been substantially updated to reflect the latest medical progress. In particular, treatment advances for hepatitis C, but other aspects such as the aetiology of non-alcoholic liver disease or recent advances in liver transplantation as well. Because of the annual revisions it remains an up-to-date reference for all aspects of clinical hepatology.

* * *

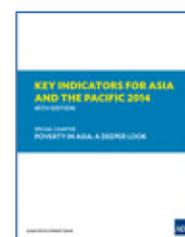
Key Indicators for Asia and the Pacific 2014

45th Edition

by Douglas H. Brooks, Guanghua Wan, Jacques Silber et al.
Asian Development Bank, 2014



352 pp. 23.8 MB(!):



http://www.adb.org/sites/default/files/publication/43030/ki2014_0.pdf

The 45th edition of this series, includes the latest available economic, financial, social, and environmental indicators for the 48 regional members of the Asian Development Bank. It presents the latest key statistics on development issues concerning the economies of Asia and the Pacific to a wide audience. Part I of this issue is a special chapter - Poverty in Asia: A Deeper Look. Parts II and III are composed of brief, nontechnical analyses and statistical tables on the Millennium Development Goals and eight other themes. The publication is supplemented by the fourth edition of the Framework of Inclusive Growth Indicators.

* * *

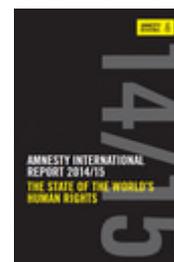
Amnesty International Report 2014/15: The State of The World's Human Rights

Amnesty International, February 2015



424 pp. 1.8 MB:

<https://www.amnesty.org/download/Documents/POL1000012015ENGLISH.PDF>



The Amnesty International Report 2014/15 documents the state of human rights in 160 countries and territories during 2014. Some key events from 2013 are also reported. This report also celebrates those who stand up for human rights across the world, often in difficult and dangerous circumstances. It represents Amnesty International's key concerns throughout the world, and is essential reading for policymakers, activists and anyone with an interest in human rights.

* * *

Making Development Sustainable: The Future of Disaster Risk Management

Global Assessment Report on Disaster Risk Reduction

Editor: Christopher J. Anderson

United Nations Office for Disaster Risk Reduction (UNISDR), 2015



316 pp. 72.7(!) MB:

http://www.preventionweb.net/english/hyogo/gar/2015/en/gar-pdf/GAR2015_EN.pdf



The report explores the large potential losses from disasters currently face by many countries - especially those which can least afford to invest in future resilience and the cost and benefits of disaster risk management (DRM). It emphasizes as well the close link between disaster risk and sustainable development and explores prospective, corrective and compensatory risk management approaches as a way to integrate it in development activities, in order to avoid risk generation and accumulation. The report aims to promote the integration of Disaster Risk Management into development by raising the awareness that managing risks cost less than managing disasters.

* * *

ONLINE PUBLICATIONS

Global Health

Bulletin of the World Health Organization – Vol. 93, Nr. 3, March 2015

<http://www.who.int/bulletin/volumes/93/3/en/>

Highlights from the [March 2015 issue](#):

The struggle to [reduce maternal deaths](#) in the USA

Interview: [new UN special envoy on tuberculosis](#)

[Electronic drug procurement](#) catches on

[Child maltreatment estimates](#) in China

Bringing [rapid diagnostic malaria tests](#) to market in Uganda

Chile embraces reciprocity in [organ donation](#)

[Patient satisfaction with primary care](#) services in 34 countries



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BRICS: Emergence of Health Agenda

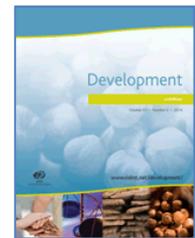
by M. Larionova, M. Rakhmangulov, A. Sakharov et al.

Development (2014) 57(2), 141-146



6 pp. 308 kB:

<http://iorj.hse.ru/data/2014/12/26/1103993997/BRICShealth.pdf>



To explore how Brazil, Russia, India, China and South Africa (the BRICS) contribute toward global health governance, this article first considers BRICS cooperation (its institutionalisation, discourse and engagement with other international institutions) with a focus on health issues. It then looks into the members' national health systems, challenges and goals. It concludes with expectations of the future BRICS health agenda and its implications for global governance.

* * *

A Wake-up Call: Lessons from Ebola for the world's health systems



by Simon Wright, Luisa Hanna, Mathilde Mailfert et al.

The Save the Children Fund, 2015



50 pp. 1.7 MB:

<http://www.savethechildren.org.uk/sites/default/files/images/A-Wake-Up-Call.pdf>

There is general agreement that the Ebola crisis was not quickly contained in Guinea, Liberia and Sierra Leone because their national health systems were dangerously under-resourced, understaffed and poorly equipped. A Wake-up Call argues that we must learn the lessons of this crisis not just for the three countries but for the many other developing countries whose services are similarly weak. Failure to do so risks future infectious disease outbreaks that, in our interconnected world, have the potential to lead to global pandemics, including conditions even more infectious than Ebola.

* * *

Risking Repetition: Are we ignoring Ebola's lessons?

International Rescue Committee (IRC), March 2015



3 pp. 206 kB:

http://www.rescue.org/sites/default/files/resource-file/IRC_EbolaBrief_20140302.pdf



Nearly a year after the World Health Organization reported the Ebola outbreak, missteps in the global response have become clearer. Intervention was not only too slow, but overly focused on medical treatment at the expense of prevention; local communities did not trust responders, which made outside interventions less effective; and support and protection for health workers and other local responders was grossly inadequate. Governments, donors and the humanitarian aid community can learn from these missteps and improve how we respond to, and even prevent, future outbreaks. If we fail to heed Ebola's lessons, however, the world will remain unnecessarily and inexcusably vulnerable to future public health catastrophes.

HIV - AIDS - STI

HIV research for prevention – huge potential but no 'magic bullet'



by Chris Bateman
S Afr Med J 2014;104(12):838-839



2 pp. 779 kB:

<http://www.ajol.info/index.php/samj/article/download/113892/103601>

HIV research for prevention has so far produced a mixed bag with no magic bullet, but results for an anti-retroviral (ARV)-infused vaginal ring that stays in place for 30 days, potentially offering women up to 50% (or more) protection against HIV and theoretically saving millions of lives over time, will be reported in 2016.

* * *

Estimating the hypothetical dual health impact and cost-effectiveness of the Woman's Condom in selected sub-Saharan African countries

by Mercy Mvundura, Neeti Nundy, Maggie Kilbourne-Brook et al.
International Journal of Women's Health, Vol. 7, pp. 271-277; 5 March 2015



7 pp. 771 kB:

<http://www.dovepress.com/getfile.php?fileID=24027>

Female condoms are the only currently available woman-initiated option that offers dual protection from pregnancy and sexually transmitted infections, including HIV. The "Woman's Condom" is a new female condom designed to provide dual protection and to be highly pleasurable and acceptable. The authors conclude that this was a first and successful attempt to estimate the impact of dual protection of female condoms. The health impact is greater for the use of the Woman's Condom as an HIV prevention method than for contraception. Dual use of the Woman's Condom increases the overall health impact. The Woman's Condom was found to be very cost-effective in all 13 countries in their sample.

* * *

Scoping Report on Interventions for Increasing the Demand for Voluntary Medical Male Circumcision

by Eric Djimeu Wouabe and Annette N. Brown
International Initiative for Impact Evaluation, February 2013



55 pp. 414 kB:

http://www.3ieimpact.org/media/filer_public/2013/03/22/white_paper_vmmc.pdf



This report, which reviews the literature of barriers and facilitators of male circumcision (MC) and then presents evidence about the effectiveness of the interventions, finds that peer pressure can facilitate MC, even when the pressure is negative. The most commonly found intervention was social and behavioural change communication (SBCC). The document compares and contrasts programme designs with the SBCC standard elements, analysing what key messages address, whether they reach relevant groups, which communication channels show promise, what is the level of exposure and influence in uptake of SBCC messages, and what trends in MC were evident during the implementation of the strategies.

* * *

The relationship between HIV and prevalence of disabilities in sub-Saharan Africa: systematic review

by Lena Morgon Banks, Maria Zuurmond, Rashida Ferrand et al.
Tropical Medicine & International Health, Vol. 20, Issue 4, pp. 411–429,
April 2015



19 pp. 141 kB:

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.12449/epdf>



HIV is widespread in sub-Saharan Africa and the evidence suggests that it is linked to disabilities, affecting a range of body structures and functions. More research is needed to better understand the implications of HIV-related disability for individuals, their families as well as those working in the fields of disability and HIV so that appropriate interventions can be developed.

Sexual & Reproductive Health

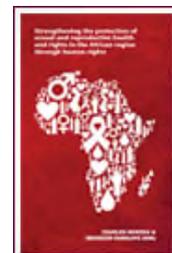
Strengthening the protection of sexual and reproductive health and rights in the African region through human rights

Editors: Charles Ngwena and Ebenezer Durojaye
Pretoria University Law Press, (PULP) 2014



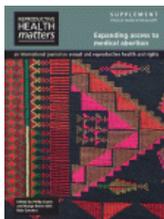
365 pp. 2.1 MB:

http://www.pulp.up.ac.za/pdf/2014_14/2014_14.pdf



The book addresses some of the serious sexual and reproductive health challenges the African continent is currently facing. More importantly, the book provides insightful and useful discussions on how these challenges can be overcome. It is the first of its kind in the region and addresses emergency obstetric care; HIV/AIDS; adolescent sexual health and rights; early marriage; and gender-based sexual violence.

Expanding access to medical abortion: challenges and opportunities



Reproductive Health Matters, Vol. 22, Issue 44, Supplement 1, p1-143; February 2015

Access all 15 studies for free at:

<http://www.rhm-elsevier.com/issue/S0968-8080%2815%29X0002-4>

Most of the studies featured in this supplement were part of a research initiative on social science and operations research to expand access to medical abortion that was supported by the UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP) from 2009–2014 via a grant from an anonymous donor. These studies were selected competitively from among research proposals that aimed to address a significant gap in their contexts and had the potential to result in programmatic or policy change. Findings from studies in this research initiative have also been reported in numerous other publications as well.

* * *

Working in communities matters! Results from postabortion clients in Zambia

Ipas Research Brief, 2014



2 pp. 183 kB:

http://www.ipas.org/~media/Files/PubsManual/CEIZMBE14%20pdf.ashx?utm_source=resource&utm_medium=meta&utm_campaign=CEIZMBE14%20pdf



In Zambia, Ipas has partnered with local organizations near 13 health centers and hospitals to disseminate information on abortion availability to women in these communities. Messages focused on prevention of unplanned pregnancy, the dangers of unsafe abortion, the abortion law in Zambia, and where to access safe services. This Ipas research brief analyzes interviews with more than 600 postabortion clients in these areas. One key finding is that engaging local, community-based organizations in disseminating information about abortion is an effective strategy for improving women's knowledge about the availability of safe, legal services.

* * *

Reproductive Health and Economic Well-Being in East Africa



by Elizabeth Gay and Marlene Lee
Population Reference Bureau, February 2015



8 pp. 180 kB:

<http://www.prb.org/pdf15/poppov-reprohealth-econ-eastafrika-brief.pdf>

Empowering the most vulnerable women with access to reproductive health care is an important part of improving their health, quality of life, and economic status. Increased availability of safe, quality reproductive health care will especially help the most vulnerable women avoid unplanned pregnancy, achieve their desired family size, and protect their health. These women are then better able to achieve higher levels of education, engage in the labour force, earn income, and invest in their families. Government prioritization of efforts that reach the poorest and least-educated women could initiate a cycle that promotes health and economic well-being among these women and their families.

Strategies toward ending preventable maternal mortality (EPMM)



Department of Reproductive Health and Research, World Health Organization, 2015



52 pp. 775 kB:

http://apps.who.int/iris/bitstream/10665/153544/1/9789241508483_eng.pdf?ua=1

Maternal health stakeholders strongly support the continued need for a specific target for maternal mortality reduction in the post-2015 development framework, with the ultimate goal of ending all preventable maternal deaths. To achieve this goal, progress needs to be accelerated as well as concerted national/global efforts and global targets are needed to reduce disparities in maternal mortality between countries. Within countries, national targets and plans must also address disparities among subgroups to help achieve both national and global equity, and a “grand convergence” in maternal survival.

* * *

Critical Maternal Health Knowledge Gaps in Low- and Middle-Income Countries for Post-2015: Researchers' Perspectives

by Tamil Kendall

Women and Health Initiative Working Paper No. 2, January 2015



34 pp. 845 kB:

http://wordpress.sph.harvard.edu/mhtf-2/wp-content/uploads/sites/32/2015/02/Knowledge_gaps_MH_post2015.pdf



Between June and October 2014, the Maternal Health Task Force (MHTF) consulted 26 international maternal health researchers to gather perspectives on the most critical and neglected areas for knowledge generation to improve maternal health in low- and middle-income countries. These interviews yielded responses that can shape the landscape of maternal health over the next decade.

* * *

Community Case Management Essentials: Treating Common Childhood Illnesses in the Community

A Guide for Program Managers

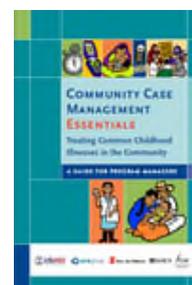
by David Marsh, Ashley Aakesson, Kechi Anah et al.

CORE Group, Save the Children, BASICS and MCHIP, 2nd Edition 2012



232 pp. 3.7 MB:

<http://www.coregroup.org/storage/documents/CCM/CCMEssentialsGuide/cmbbook2012-online.pdf>



Known as “Community Case Management of Sick Children” (CCM), this approach sends community-based health workers out to find, diagnose, and successfully treat sick children, in partnership with their families. Inspired by the classic “Immunization Essentials”, this guide methodically documents what is known about CCM and how to make it

work. First, health program managers are introduced to the basics. Then, CCM Essentials walks its readers through the process of designing and managing a high-quality CCM program. The ultimate result: lives of newborns, infants and children saved around the world.

* * *

Care Seeking Behaviour for Children with Suspected Pneumonia in Countries in Sub-Saharan Africa with High Pneumonia Mortality

by Aaltje Camielle Noordam, Liliana Carvajal-Velez, Alyssa B. Sharkey et al.
PLoS ONE 10(2): e0117919 (February 23, 2015)



14 pp. 393 kB:

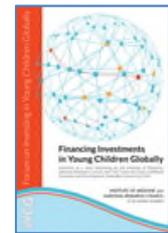
<http://www.plosone.org/article/fetchObject.action?uri=info:doi/10.1371/journal.pone.0117919&representation=PDF>

Pneumonia is the leading cause of childhood mortality in sub-Saharan Africa (SSA). Because effective antibiotic treatment exists, timely recognition of pneumonia and subsequent care seeking for treatment can prevent deaths. For six high pneumonia mortality countries in SSA the authors examined if children with suspected pneumonia were taken for care, and if so, from which type of care providers. The study suggests that it is crucial to understand country-specific care seeking patterns for children with suspected pneumonia and related determinants using available data prior to planning programmatic responses.

* * *

Financing Investments in Young Children Globally

Summary of a Joint Workshop by the Institute of Medicine, National Research Council, and The Centre for Early Childhood Education and Development, Ambedkar University, Delhi



Rapporteurs: Deepali M. Patel and Charlee M. Alexander



109 pp. 1.8 MB:

http://download.nap.edu/cart/download.cgi?&record_id=18993

Speakers of the workshop reflected on the big picture of financing early childhood development. They described the various elements of the financing puzzle, including donors and recipients, contextual factors such as demographics and the political climate, and assessments of value. They highlighted challenges and opportunities; gaps in policy making, program development, and financing; and mechanisms for utilizing funds in efficient and valuable ways.

Malaria

Combating malaria: research, prevention and treatment

<http://www.biomedcentral.com/bmcmed/series/Malaria>

BMC Medicine Collection published: 14 August 2014
Last updated: 3 March 2015



This collection of 12 articles in BMC Medicine aims to highlight recent progress in all ar-

eas of malaria research, including vaccine development, investigations into new antimalarial agents, vector control and disease epidemiology.

* * *

Management of severe paediatric malaria in resource-limited settings

by Kathryn Maitland
BMC Medicine 2015, 13:42 (3 March 2015)



28 pp. 2.4 MB:

<http://www.biomedcentral.com/content/pdf/s12916-014-0263-6.pdf>



This review highlights the spectrum of complications in African children with severe malaria, the therapeutic challenges of managing these in resource-poor settings and examines in-depth the results from clinical trials with a view to identifying the treatment priorities and a future research agenda.

* * *

Dried-leaf Artemisia annua: A practical malaria therapeutic for developing countries?

by Pamela J Weathers, Melissa Towler, Ahmed Hassanali et al.
World J Pharmacol. 2014 December 9; 3(4): 39-55



18 pp. 1.5 MB:

<http://www.wjgnet.com/2220-3192/pdf/v3/i4/39.pdf>



Human trial data showed that when delivered as dried leaves, 40-fold less artemisinin was required to obtain a therapeutic response compared to pure artemisinin. Artemisinin combination therapies (ACTs) are still unaffordable for many malaria patients, and cost estimates for *A. annua* dried leaf tablet production are orders of magnitude less than for ACT, despite improvements in the production capacity. Considering that for > 2000 years this plant was used in traditional Chinese medicine for treatment of fever with no apparent appearance of artemisinin drug resistance, the evidence argues for inclusion of affordable *A. annua* dried leaf tablets into the arsenal of drugs to combat malaria and other artemisinin-susceptible diseases.

* * *

President's Malaria Initiative Strategy 2015-2020

February 25, 2015



26 pp. 16.4 MB:

<http://www.pmi.gov/docs/default-source/default-document-library/pmi-reports/president%27s-malaria-initiative-strategy-2015-2020.pdf?sfvrsn=4>



The U.S. President's Malaria Initiative, led by the U.S. Agency for International Development and implemented together with the Centers for Disease Control and Prevention (CDC), launched its next six-year strategy to further reduce malaria deaths and substantially decrease malaria illness, toward the long-term goal of elimination. This updated President's Malaria Initiative Strategy (2015–2020) takes into account the progress over the past decade and the new challenges that have arisen, setting forth a vision, goal, objectives, and strategic approach for PMI through 2020, while reaffirming the longer-term goal of worldwide malaria eradication.

The impact of providing rapid diagnostic malaria tests on fever management in the private retail sector in Ghana: a cluster randomized trial

by Evelyn K Ansah, Solomon Narh-Bana, Harriet Affran-Bonful et al.
BMJ 2015;350:h1019 (Published 04 March 2015)



12 pp. 1.6 MB:

<http://www.bmj.com/content/350/bmj.h1019.full.pdf+html>

Most patients with fever in Africa present to the private sector. In this trial, providing rapid diagnostic tests for malaria in the private drug retail sector significantly reduced dispensing of antimalarials to patients without malaria, did not reduce prescribing of anti-malarials to true malaria cases, and appeared safe. Rapid diagnostic tests should be considered for the informal private drug retail sector.

* * *

Quality assurance of malaria rapid diagnostic tests used for routine patient care in rural Tanzania: microscopy versus real-time polymerase chain reaction

by Irene M Masanja, Meredith L McMorrow, Mussa B Maganga
Malaria Journal 2015, 14:85 (19 February 2015)



7 pp. 383 kB:

<http://www.malariajournal.com/content/pdf/s12936-015-0597-3.pdf>

The WHO recommends parasitologic confirmation of suspected malaria cases before treatment. Due to the limited availability of quality microscopy services, this recommendation has become scalable following increased use of antigen-detecting malaria rapid diagnostic tests (RDTs) in many malaria-endemic countries. This study was carried out to monitor quality of RDT performance in selected health facilities using two quality assurance (QA) methods: reference microscopy and detection of parasite DNA by real-time quantitative polymerase chain reaction (qPCR) on dried blood spots (DBS). The authors conclude that overall there was limited agreement among the three diagnostic approaches and neither microscopy nor qPCR appear to be good QA options for RDTs under field conditions.

* * *

A critical review of traditional medicine and traditional healer use for malaria and among people in malaria-endemic areas: contemporary research in low to middle-income Asia-Pacific countries

by Dwi L Suswardany, David W Sibbritt, Sudibyo Supardi et al.
Malaria Journal 2015, 14:98 (1 March 2015)



22 pp. 452 kB:

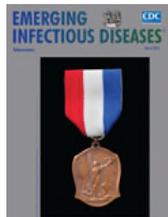
<http://www.malariajournal.com/content/pdf/s12936-015-0593-7.pdf>

This paper presents the first critical review of literature on the use of traditional medicine/traditional healer (TM/TH) for malaria prevention and treatment in low- to middle-income countries in the Asia-Pacific region. The authors conclude that the review has provided crucial insights into the prevalence and profile of TM/TH use for malaria. Those managing and providing conventional programmes, treatment and care for malaria in the Asia-Pacific should remain mindful of the possible use of TM/TH amongst communi-

ty members and patients.

Tuberculosis

Multidrug-Resistant Tuberculosis in Europe, 2010-2011



by Gunar Günther, Frank van Leth, Sofia Alexandru et al.
Emerging Infectious Diseases, Vol. 21, No. 3, March 2015



8 pp. 507 kB:

<http://wwwnc.cdc.gov/eid/article/21/3/pdfs/14-1343.pdf>

Drug-resistant *Mycobacterium tuberculosis* is challenging elimination of tuberculosis (TB). The authors evaluated risk factors for TB and levels of second-line drug resistance in *M. tuberculosis* in patients in Europe with multidrug-resistant (MDR) TB. They conclude that previous treatment for TB was the strongest risk factor for MDR TB. High levels of primary transmission and advanced resistance to second-line drugs characterize MDR TB cases in Europe.

* * *

Long-term mortality assessment of multidrug-resistant tuberculosis patients treated with delamanid

by Charles D. Wells, Rajesh Gupta, Norbert Hittel et al.
European Respiratory Journal (ERJ) - Published online on February 19, 2015



3 pp. 256 kB:

<http://erj.ersjournals.com/content/early/2015/02/19/09031936.00176314.full.pdf+html>



Delamanid is a novel anti-TB agent that has recently been approved for the management of multidrug-resistant tuberculosis (MDR-TB) patients. Treatment of MDR-TB patients with delamanid in combination with an optimised background regimen for 2 months significantly improved 2-month sputum culture conversion (SCC) by ~50%, in comparison to treatment with placebo plus an optimised background regimen. The results of this study support important conclusions regarding 2-month SCC and the treatment of MDR-TB patients with delamanid.

* * *

The Movement of Multidrug-Resistant Tuberculosis across Borders in East Africa Needs a Regional and Global Solution

by Kevin P. Cain, Nina Marano, Maureen Kamene et al.
PLoS Med 12(2): e1001791 (February 24, 2015)



7 pp. 1.0 MB:

<http://www.plosmedicine.org/article/fetchObject.action?uri=info:doi/10.1371/journal.pmed.1001791&representation=PDF>

In East Africa, a large number of patients from Somalia with multidrug-resistant tuberculosis (MDR TB) crossed the border to Kenya seeking treatment. While diagnostic capacity for MDR TB exists in Somalia, treatment capacity does not. The solutions must be

regional and global. Control of an infectious disease, such as MDR TB, must be focused at its source to be successful. Its control cannot depend on the existing capacity of the country in which it happens to occur.

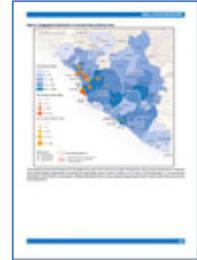
Ebola / Other Infectious Diseases

WHO Ebola Situation Report - 4 March 2015



16 pp. 1.7 MB:

http://apps.who.int/iris/bitstream/10665/154189/2/roadmapsitrepsitrep4Mar2015_eng.pdf?ua=1



A total of 132 new confirmed cases of Ebola virus disease (EVD) were reported in the week to 1 March, an increase on the previous week (99 new cases). Liberia reported no new confirmed cases this week, the first time since the week of 26 May 2014. The weekly number of confirmed cases has increased in both Sierra Leone and Guinea. Transmission remains widespread in Sierra Leone, which reported new confirmed cases in 8 districts during the week to 1 March. In Guinea, Forecariah and Conakry reported a marked increase in case numbers compared with the previous week.

* * *

Transmission of Ebola Viruses: What We Know and What We Do Not Know

Michael T. Osterholm, Kristine A. Moore, Nicholas S. Kelley et al.
mBio, Vol. 6 Issue 2, March/April 2015



9 pp. 297 kB:

<http://mbio.asm.org/content/6/2/e00137-15.full.pdf+html>

Available evidence demonstrates that direct patient contact and contact with infectious body fluids are the primary modes for Ebola virus transmission, but this is based on a limited number of studies. In this review, the authors address what we know and what we do not know about Ebola virus transmission. They also hypothesize that Ebola viruses have the potential to be respiratory pathogens with primary respiratory spread.

* * *

Six challenges to stamping out Ebola

by Declan Butler
Nature, 26 February 2015

Read online at:

http://www.nature.com/news/six-challenges-to-stamping-out-ebola-1.16964?WT.mc_id=TWT_NatureNews



More than a year since the start of one of the worst public health crises in recent history, Ebola cases have been tumbling in West Africa. But the epidemic is far from over: the risk of flare ups and further geographical spread will remain until there are no new cases. Highlighting the precariousness of the current situation, on 20 February, the officials leading the United Nations' Ebola response efforts warned that the gains of the past few months risked unravelling. The article outlines six of the biggest challenges to stamping out Ebola.

Confronting the Gender Impact of Ebola Virus Disease in Guinea, Liberia, and Sierra Leone

UNDP Africa Policy Note, Vol. 2, No. 1, 30 January 2015



9 pp. 433 kB:

http://reliefweb.int/sites/reliefweb.int/files/resources/RBA%20Policy%20Note%20Vol%202%20No%201%202015_Gender.pdf



According to this study, Women need to be at the centre of all efforts to help Guinea, Liberia and Sierra Leone recover from the Ebola crisis. The epidemic has affected women disproportionately because of the essential role they play as caretakers, health personnel, farmers and small traders. Ebola response and recovery, and national development strategies must be gender-sensitive in addressing the associated negative impacts on women and girls.

* * *

Efficacy and safety of albendazole plus ivermectin, albendazole plus mebendazole, albendazole plus oxantel pamoate, and mebendazole alone against *Trichuris trichiura* and concomitant soil-transmitted helminth infections: a four-arm, randomised controlled trial

by Benjamin Speich, Said M Ali, Shaali M Ame et al.
Lancet Infect Dis; March 2015; 15: 277–84



8 pp. 296 kB:

[http://www.thelancet.com/pdfs/journals/laninf/PIIS1473-3099\(14\)71050-3.pdf](http://www.thelancet.com/pdfs/journals/laninf/PIIS1473-3099(14)71050-3.pdf)



Existing anthelmintic drugs (e.g., albendazole and mebendazole) have low efficacy against the intestinal nematode species *Trichuris trichiura* and the drug pipeline is exhausted. In this study the head-to-head comparison of three combination chemotherapies showed the highest efficacy for albendazole plus oxantel pamoate for the treatment of infection with *T. trichiura*. Further studies should investigate the combination of albendazole plus oxantel pamoate so that it can be considered for soil-transmitted helminthiasis control programmes.

* * *

Assessing the Epidemiology of Soil-Transmitted Helminths during a Transmission Assessment Survey in the Global Programme for the Elimination of Lymphatic Filariasis

by Antonio Montresor, David Addiss, Molly Brady
World Health Organization, 2015



41 pp. 280 kB:

http://apps.who.int/iris/bitstream/10665/153240/1/9789241508384_eng.pdf?ua=1



The aims of this manual are to propose a standardized approach for collecting data on Soil-Transmitted Helminths (STH) when a Transmission Assessment Survey (TAS) is conducted in the context of a programme for the elimination of lymphatic filariasis; and to provide guidance, on the basis of the data on STH obtained, on whether drugs for STH should continue to be administered regularly to the at-risk populations living in the area.

* * *

Effects of Land Use on Plague (*Yersinia pestis*) Activity in Rodents in Tanzania



by Douglas J. McCauley, Daniel J. Salkeld, Hillary S. Young et al.
Am J Trop Med Hyg 2015 14-0504 - Published online February 23, 2015



36 pp. 6.5 MB:

<http://www.ajtmh.org/content/early/2015/02/16/ajtmh.14-0504.full.pdf#page=1&view=FitH>

Understanding the effects of land-use change on zoonotic disease risk is a pressing global health concern. Here, the authors compare prevalence of *Yersinia pestis*, the etiologic agent of plague, in rodents across two land-use types - agricultural and conserved - in northern Tanzania. The results suggest that land-use change could affect the risk of local transmission of plague, and raise critical questions about transmission dynamics at the interface of conserved and agricultural habitats. These findings emphasize the importance of understanding disease ecology in the context of rapidly proceeding landscape change.

* * *

Community Effectiveness of Copepods for Dengue Vector Control: Systematic Review

by A. Lazaro A, W.W. Han, P. Manrique-Saide et al.
Tropical Medicine & International Health - doi: 10.1111/tmi.12485



36 pp. 412 kB:

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.12485/pdf>

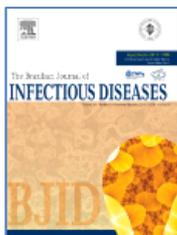


Vector control remains the only available method for primary prevention of dengue. Several interventions exist for dengue vector control, with limited evidence of their efficacy and community effectiveness. This systematic review compiles and analyses the existing global evidence for community effectiveness of Copepods for dengue vector control. There is evidence that Cyclopid Copepods (*Mesocyclops* spp.) could potentially be an effective vector control option, as shown in five community effectiveness studies in Vietnam. There are very few studies, and more are needed in other communities and environments. Clear best practice guidelines for the methodology of entomological studies should be developed.

* * *

Impact of human schistosomiasis in sub-Saharan Africa

by Abiola Fatimah Adenowo, Babatunji E. Oyinloye, Bolajoko I. Ogunyinka et al.
The Brazilian Journal of Infectious Diseases - Available online 27 January 2015



10 pp. 1.5 MB:

<http://www.sciencedirect.com/science/article/pii/S1413867015000264/pdf?md5=f553a071d41bb1930ee457c2447c1c9e&pid=1-s2.0-S1413867015000264-main.pdf>

Schistosomiasis, a neglected tropical disease of poverty ranks second among the most widespread parasitic disease in various nations in sub-Saharan Africa. This enervating disease has been successfully eradicated in Japan, as well as in Tunisia. Morocco and some Caribbean Island countries have made significant progress on control and management of this disease. Brazil, China and Egypt are taking steps towards elimination of the disease, while most sub-Saharan

countries are still groaning under the burden of the disease. This review is an exposition of human schistosomiasis as it affects the inhabitants of various communities in sub-Saharan African countries.

* * *

Integrating Data and Resources on Neglected Tropical Diseases for Better Planning: The NTD Mapping Tool



by Rebecca M. Flueckiger, Birgit Nikolay, Huub C. Gelderblom et al.
PLoS Negl Trop Dis 9(2): e0003400 (5 February 2015)



9 pp. 380 kB:

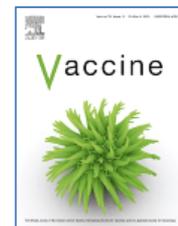
<http://www.plosntds.org/article/fetchObject.action?uri=info:doi/10.1371/journal.pntd.0003400&representation=PDF>

In this article, the authors describe the creation of an innovative neglected tropical diseases (NTDs) mapping tool (www.ntdmap.org) developed by a consortium of research and program partners for use particularly by program implementers. Its functionality and accessibility have been designed specifically to meet the needs of national programs and international partners. This tool provides an online resource allowing users to visualize and manipulate geographical data on a range of variables for the planning and managing of integrated NTD programs.

* * *

Assessing the economic benefits of vaccines based on the health investment life course framework

by Dagna Constenla
Vaccine - Available online 18 February 2015



14 pp. 1.2 MB:

<http://www.malariainexus.com/common/updateable/files/articles/635606377455431022.pdf>

Economic evaluations have routinely understated the net benefits of vaccination by not including the full range of economic benefits that accrue over the lifetime of a vaccinated person. Broader approaches for evaluating benefits of vaccination can be used to more accurately calculate the value of vaccination. The intent of this paper is to stimulate discussion on how existing and new methodology can add to knowledge regarding the benefits from investing in new and underutilized vaccines.

Non-communicable Diseases

The epidemiology of cancer in Angola - results from the cancer registry of the National Oncology Centre of Luanda, Angola



by António Armando, Mary Clarisse Bozzetti, Alice de Medeiros Zelmanowicz et al.
ecancer 2015, 9:510 (17 February 2015)



10 pp. 1.2 MB:

<http://ecancer.org/journal/9/pdf/510-the-epidemiology-of-cancer-in-angola-results-from-the-cancer-registry-of-the-national-oncology-centre-of-luanda-angola.php>

Knowledge of the epidemiological profile of cancer is a key step in planning national cancer policy. The main objective of this study was to characterize the epidemiological profile of cancer in Angola based on cases of cancer registered at the National Oncology Centre (NOC) of Luanda, the only Angolan hospital to specialize in cancer treatment and diagnosis. The study consisted of a cross-sectional historical review of cases treated at the NOC between 2007 and 2011. In the absence of a population-based cancer registry, this study constitutes a reasonable assessment of the epidemiological profile of cancer in Angola.

* * *

Appraising the quality of sub-Saharan African cancer registration systems that contributed to GLOBOCAN 2008: a review of the literature and critical appraisal

by Tim Crocker-Buque and Allyson M Pollock
Journal of the Royal Society of Medicine; 2015, Vol. 108(2) 57-67



11 pp. 188 kB:

<http://jrs.sagepub.com/content/108/2/57.full.pdf+html>



The authors critically appraise the quality of sub-Saharan African cancer registration systems that submitted data to GLOBOCAN 2008 with respect to population coverage using publicly available information. They conclude that GLOBOCAN 2008 estimates are based on data drawn from poor quality cancer registration systems, with limited or no population registry coverage. Development organisations and the World Health Organization need to take a more cautious approach when using these data to determine priorities and allocating resources.

* * *

Make Listening Safe

World Health Organization, 2015



12 pp. 1.1 MB:

http://www.who.int/pbd/deafness/activities/MLS_Brochure_English_lowres_for_web.pdf?ua=1



1.1 billion teenagers and young adults are at risk of developing hearing loss due to the unsafe use of personal audio devices and exposure to damaging levels of sound in noisy entertainment venues. Under the theme "Make Listening Safe", WHO draws attention to the rising problem of noise-induced hearing loss due to recreational exposure to loud sounds. Quality of life can decline among affected people, while health care costs for society can increase. Noise-induced hearing loss is preventable.

Food & Nutrition

Global infant formula: monitoring and regulating the impacts to protect human health

by George Kent
International Breastfeeding Journal 2015, 10:6 (23 February 2015)



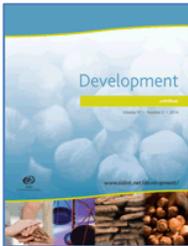
23 pp. 303 kB:

<http://www.internationalbreastfeedingjournal.com/content/pdf/s13006-014-0020-7.pdf>

This study suggests a path toward achieving better control of infant formula and other baby foods to ensure that infants and young children everywhere are well nourished. The negotiation of a new Optional Protocol on Children's Nutrition, to be linked to the most relevant human rights treaty, the Convention on the Rights of the Child, would bring the major issues relating to infant formula and other baby foods to the attention of the global community and all national governments.

* * *

Tackling the Nutrition Challenge: A food systems approach



by Jomo Kwame Sundaram
Development (2014) 57(2), 141–146



6 pp. 90 kB:

<http://www.palgrave-journals.com/development/journal/v57/n2/pdf/dev201463a.pdf>

Experience shows that special government efforts are needed to achieve rapid progress in the eradication of hunger, malnutrition and undernutrition. Reviewing how different countries have responded to the food security challenges they face, three main priority areas for public interventions stand out: social protection; raising the net incomes of small-scale agricultural producers; and using special instruments to address nutritional deficiencies in mothers and children under five years of age.

Essential Medicines

Supplying medicines to refugees: a logistical nightmare

by Elizabeth Sukkar
The Pharmaceutical Journal, 28 February 2015, Vol. 294, No. 7851



Read online at:

<http://www.pharmaceutical-journal.com/news-and-analysis/features/supplying-medicines-to-refugees-a-logistical-nightmare/20067972.article>

During conflicts, humanitarian bodies not only face the obvious security risks of reaching people in need, they also have to deal with the growing bureaucracy involved in getting medicines to them. They are seeing increased red tape around the supply of medicines in countries hosting refugees. These bodies prefer to source medicines centrally in cost-effective terms on the international markets. However, the bureaucracy around importing their medicines, as well as complying with local country requirements, is adding to the complexity of providing much needed medicines to refugees in and around conflict zones, restricting humanitarian organisations to purchasing medicines on local markets. The quality of the locally bought medicines, however, cannot always be assured, and there can be limited supplies and drug shortages.

* * *

Post-Trial Access to Treatment: Corporate best practices

by I. Schipper

Centre for Research on Multinational Corporations (SOMO), February 2015



20 pp. 270 kB:

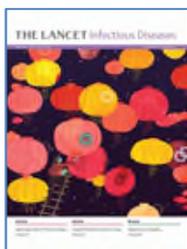
http://www.somo.nl/publications-en/Publication_4169/at_download/fullfile



Medicines for the European market are increasingly being tested on clinical trial participants in low- and middle-income countries (LMICs), where most participants are poor and have limited access to health care. Against this backdrop, the entitlement to Post-Trial Access to Treatment (PTA) after the trial has ended becomes increasingly important to avoid the exploitation of vulnerable participants. The problem is that patients are being enrolled onto clinical trials in the full knowledge of the trial sponsors that they will not have access to the continuing treatment they may need once the trial has finished. This practice is unethical.

* * *

The expanding role of co-trimoxazole in developing countries



by James A Church, Felicity Fitzgerald, A Sarah Walker et al.
The Lancet Infectious Diseases, Vol. 15, No. 3, pp. 327–339, March 2015



13 pp. 347 kB:

[http://www.thelancet.com/pdfs/journals/laninf/PIIS1473-3099\(14\)71011-4.pdf](http://www.thelancet.com/pdfs/journals/laninf/PIIS1473-3099(14)71011-4.pdf)

WHO guidelines recommend long-term co-trimoxazole prophylaxis for adults and children in settings with a high prevalence of malaria or severe bacterial infections. Co-trimoxazole prophylaxis is recommended for HIV-exposed infants from age 4-6 weeks; however, the risks and benefits of co-trimoxazole during infancy are unclear. Co-trimoxazole prophylaxis reduces anaemia and improves growth in children with HIV. Ongoing trials are now assessing the ability of adjunctive co-trimoxazole to reduce mortality in children after severe anaemia or severe acute malnutrition. In this Review, the authors discuss the mechanisms of action, benefits and risks, and clinical trials of co-trimoxazole in developing countries.

* * *

Hepatitis C and Drug Pricing: The Need for a Better Balance

amfAR, The Foundation for AIDS Research, February 2015



12 pp. 749 kB:

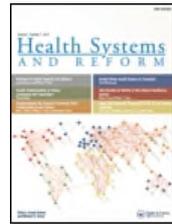
http://amfar.org/uploadedFiles/amfarorg/Articles/On_The_Hill/2015/amfAR%20HCV%20Issue%20Brief%20Feb%202015.pdf



Despite important price reductions for some low- and middle-income countries, the exorbitant drug pricing of breakthrough treatments for hepatitis C (HCV) infection will inevitably limit access to the drugs, leading to unnecessary loss of life. While the new drugs have made curing HCV easier and more effective, the report finds that the aggressive pricing of the treatments will place an unjustifiable and unsustainable burden on healthcare systems in the U.S. and around the world, with potentially devastating consequences for people living with HCV.

The Long Road to Universal Health Coverage: Historical Analysis of Early Decisions in Germany, the United Kingdom, and the United States

by Jesse B. Bump
 Health Systems & Reform, 1:1, 28-38, 14 January 2015



12 pp. 140 kB:
<http://www.tandfonline.com/doi/pdf/10.4161/23288604.2014.991211>

Over the last several years the once-obscure idea of Universal Health Coverage (UHC) has blossomed into a movement embraced by leading authorities in global health. Using an analysis of historical literature, this paper examines the development of the two common mechanisms for providing financial risk protection: national social health insurance as developed in Germany, and general tax revenue as used by the United Kingdom to launch the National Health Service. The paper concludes with some reflections from this analysis for low- and middle-income countries attempting to move toward UHC.

* * *

Social Franchises: The Bridge between Private Healthcare Providers and National Insurance Programs

Lessons learned from two initiatives in the Philippines



by R. Viswanathan and Anton L. V. Avanceña
 The Global Health Group, Global Health Sciences, University of California, San Francisco, February 2015



33 pp. 5.7 MB:
<http://jointlearningnetwork.org/uploads/files/resources/SF-bridge-between-private-national-PHL.pdf>

This is a case study report on how social franchises are linking private providers to the national health insurance program in the Philippines. These programs have stimulated and leveraged developments in national health insurance policies in the Philippines - a country that has been home to social franchising programs for nearly 20 years - in order to ensure their networks and clients could benefit from them. The authors also investigate if and how the franchisor agencies were able to benefit from the linkages, and if this has implications for their sustainability plans.

* * *

Health insurance for the poor: myth or reality

by Hugh Waddington, Howard White, Christelle Chapoy et al.
 International Initiative for Impact Evaluation 3ie, November 2009



3 pp. 111 kB:
http://www.3ieimpact.org/media/filer_public/2012/05/07/Healthinsurance%20Nov%20EQ12.pdf

A growing evidence base suggests that health insurance in poor areas can improve people's access to health care. But the poorest in these areas do not seem to benefit much. Health insurance programs, generally, have not helped in reaching out to the

poorest or improving their health care use. And whether insurance improves health outcomes among the poor remains to be established.

* * *

Cash, vouchers or in-kind? Guidance on evaluating how transfers are made in emergency programming



by Simon Levine and Sarah Bailey
Humanitarian Policy Group, Overseas Development Institute, February 2015



27 pp. 380 kB:

<http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9456.pdf>

When people in emergencies need material support, aid agencies have to choose whether to provide help through the use of cash transfers, vouchers or in-kind aid (such as food rations and shelter materials). This choice is often referred to as the 'transfer modality'. The guidelines cover how to assess the quality of the decision making (i.e. what was reasonable without the benefit of hindsight) before looking at issues such as effectiveness, impact, cost-effectiveness, gender and protection concerns and risk management.

* * *

Financing and Access to Health Care in West Africa: Empirical Data, Cartoons and Received Ideas

by Ludovic Queuille, Valéry Ridde and Damien Glez
University of Montreal, School of Public Health, January 2015



19 pp. 3.0 MB:

http://www.equitesante.org/wp-content/uploads/2015/01/Album_HFAccess_HELP-CHUM_2014_En_Screen.pdf



The project "Access to healthcare for vulnerable groups in West Africa" with the Help NGO produces publications in order to make research results and knowledge more accessible. The authors have worked for 10 years on producing and applying scientific knowledge about healthcare access and financing in Africa and aim to share their observations by experimenting with using satirical cartoons as a knowledge sharing tool. Made by the designer Glez, this series of cartoon focuses on preconceived ideas that people can have about the implementation of free health care and health insurance coverage in Sub-Saharan Africa.

Water, Sanitation & Hygiene

Preventing Diarrhoea through Better Water, Sanitation and Hygiene

Exposures and impacts in low- and middle-income countries

by Jamie Bartram, Sandy Cairncross, Thomas Clasen et al.
World Health Organization 2014



48 pp. 3.8 MB:

http://apps.who.int/iris/bitstream/10665/150112/1/9789241564823_eng.pdf?ua=1&ua=1



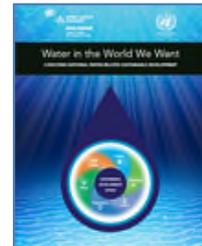
This document outlines the latest research on the burden of diarrhoea related to inadequate water, sanitation and hygiene (WASH). It is based on a series of articles published in the scientific literature. In bringing together current evidence on exposure to unsafe drinking-water, inadequate sanitation and hygiene, alongside the most up-to-date analysis on the health impacts of interventions, this document contributes to informed policymaking and targeting of resources. It underscores how further progress can be achieved in this unfinished global water and sanitation and health agenda.

* * *

Water in the World We Want

Catalysing National Water-related Sustainable Development

by C.J. Schuster-Wallace, R. Sandford, S.K. Dickin et al.
United Nations University Institute for Water, Environment and Health,
2015



94 pp. 4.8 MB:

<http://inweh.unu.edu/wp-content/uploads/2015/02/Water-in-the-World-We-Want.pdf>

The report warns that without large new water-related investments many societies worldwide will soon confront rising desperation and conflicts over life's most essential resource. The report provides an in-depth analysis of 10 countries to show how achieving water and sanitation-related Sustainable Development Goals (SDGs) offers a rapid, cost effective way to achieve sustainable development. But lack of water-services progress due to corruption and extreme weather could prevent countries from meeting the SDGs.

Human Resources

'Deep down in their heart, they wish they could be given some incentives': a qualitative study on the changing roles and relations of care among home-based caregivers in Zambia

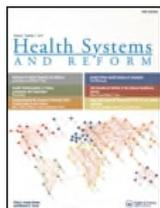
by Fabian Cataldo, Karina Kielmann, Tara Kielmann et al.
BMC Health Services Research 2015, 15:36 (28 January 2015)



10 pp. 405 kB:

<http://www.biomedcentral.com/content/pdf/s12913-015-0685-7.pdf>

While the balance of professional and lay tasks in HIV caregiving has been significantly altered due to changing skills requirements and task-shifting initiatives, little attention has been given to the effects of these changes on health workers' motivation and existing care relations. As their responsibilities and working environments are rapidly evolving, caregivers' motivations are changing. It is essential to identify and address the growing tensions between an idealized rhetoric of altruistic volunteerism in home-based care, and the realities of lay worker deployment in HIV care interventions that not only shift tasks, but transform social and professional relations in ways that may profoundly influence caregivers' motivation and quality of care.

New Journal: Health Systems & Reform, Volume 1, Issue 1, 2015

Free download of all articles at:

<http://www.tandfonline.com/toc/khsr20/1/1#.VPAxy5cB-4>

A new journal - Health Systems and Reform (HS&R) - seeks to fill the gap between knowledge generation and translation for health systems and reform. The journal's mission is to create a global platform for sharing cutting-edge analysis, methods, and lessons in health systems and reform and to provide thought-provoking articles for leaders, researchers, and students looking for new ideas and lessons in how to improve health systems and reform processes. Each issue of HS&R will include research articles and commentaries on crucial issues in health systems and reform, along with a policy reflection from a healthcare leader, such as a current or recent minister of health or a leader in industry or the non-profit sector.

* * *

Current scientific evidence for integrated community case management (iCCM) in Africa: Findings from the iCCM Evidence Symposium

Journal of Global Health (JOGH) Vol. 4, Issue 2, December 2014



216 pp. 7.3 MB:

http://jogh.org/documents/issue201402/JOGH_Vol4_Iss2_FULL.pdf

In March 2014, over 400 individuals from 35 countries in sub-Saharan Africa and 59 international partner organizations gathered in Accra, Ghana for an integrated Community Case Management (iCCM) Evidence Review Symposium. The objective was 2-fold: first, to review the current state of the art of iCCM implementation and second, to assist African countries to integrate lessons learned and best practices presented during the symposium into their programmes. Based on the findings from the symposium this supplement includes a comprehensive set of articles that provide the latest evidence for improving iCCM programs and ways to better monitor and evaluate such programs.

* * *

What are effective policy options for governments in low- and middle-income countries to improve and regulate the quality of ambulatory care?

Policy Brief Vol. 4, No. 1, 2015 - Quality of Care

by Prarthna Dayal and Krishna Hort

Asia Pacific Observatory on Health Systems and Policies, 2015



71 pp. 2.4 MB:

http://jointlearningnetwork.org/uploads/files/resources/WPRO_Quality_of_Care_Brief_2015-02.pdf

This Policy Brief examines the problem of Quality of Care (QOC) in ambulatory care services; reviews evidence on strategies to address QOC at the ambulatory care level, and provides guidance for policy-makers in low- and middle-income countries (LMICs) in the Asia Pacific region on actions that governments can take to improve and regulate QOC in ambulatory care services.

* * *

The Primary Care Innovator's Handbook: Voices from Leaders in the Field

by Komal Bazaz Smith, Trevor Lewis, Tricia Bolender
The Center for Health Market Innovations (CHMI), February 2015



 72 pp. 6.7 MB:
http://healthmarketinnovations.org/sites/default/files/Primary%20Care%20Innovators%20Handbook_CHMI.pdf

The Handbook is an attempt to share knowledge between innovators in an open and informal way, and to encourage more conversations of this style among the community of innovators working to improve primary care. The Handbook is unique in that it is co-written by implementers themselves, showcasing reflections from leaders in CHMI's [Primary Care Learning Collaborative](#) on their experiences, and including concrete tools they have employed in their work. The Handbook reflects what these organizations have learned from their experiences thus far, and is intended to leave the reader with ideas, tools, and inspiration, that they can then immediately test, implement, or adapt to their own work.

* * *

The Health Literacy Toolkit for Low- and Middle-Income Countries

A series of information sheets to help empower communities and strengthen health systems

Editors: Sarity Dodson, Suvajee Good and Richard Osborne
The WHO Regional Office for South-East Asia, 2015



 146 pp. 6.1 MB:
http://apps.searo.who.int/PDS_DOCS/B5148.pdf?ua=1

This series of information sheets introduces health literacy, its relevance to public policy, and the ways it can be used to inform the promotion of good health, the prevention and management of communicable and non-communicable diseases, and the reduction of health inequities. It provides information and links to further resources to assist organizations and governments to incorporate health literacy responses into practice, service delivery systems, and policy.

Information & Communication Technology

Medical Wikis Dedicated to Clinical Practice: A Systematic Review

by Alexandre Brulet, Guy Llorca, Laurent Letrilliant et al.
J Med Internet Res 2015;17(2):e48



Read online at: <http://www.jmir.org/2015/2/e48/>

Wikis may give clinician communities the opportunity to build knowledge relevant to their practice. The only previous study reviewing a set of health-related wikis, without specification of purpose or audience, globally showed a poor reliability. The 25 medical wikis the authors studied present various limitations in their format, management, and collaborative features. Professional medical wikis may be improved by using clinical cases, developing more detailed transparency and editorial policies, and involving postgraduate and continuing medical education learners.

Investment for education in emergencies: A review of evidence

by Susan Nicolai and Sébastien Hine
Overseas Development Institute (ODI), February 2015



105 pp. 2.2 MB:

<http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9450.pdf>



This report reviews questions important to 'making the case' for investment in education in emergencies. The authors look at evidence concerning community prioritization, disruption, costs to the economy and financing sources. A series of 10 recommendations offer suggestions on further research that could help to secure and target investment for the sector more effectively.

* * *

Are Schools Safe and Equal Spaces for Girls and Boys in Asia?

by Nandita Bhatla, Pranita Achyut, Hemlata Verma et al.
Plan International and the International Center for Research on Women's Asia Regional Office, February 2015



24 pp. 542 kB:

http://www.icrw.org/sites/default/files/publications/SRBVAsia_ICRW_Plan.pdf



The report details the shockingly high rates at which children in Asia experience school-related gender-based violence (SRGBV), with 84 percent of students in Indonesia reporting they have experienced violence. In a survey of students, teachers, parents and other stakeholders in Cambodia, Indonesia, Nepal, Pakistan and Vietnam, the report describes physical and sexual abuse, emotional violence and the threat of violence as endemic in these countries. Research shows that violence is perpetrated by teachers and school staff, among students themselves and by family members. The report also includes specific recommendations, including school-based programming to change behaviour and attitudes regarding gender and violence.

Harm Reduction & Drug Use

Casualties of War: How the War on Drugs is harming the world's poorest

by Catherine Martin
Health Poverty Action (HPA), February 2015



28 pp. 955 kB:

<http://www.healthpovertyaction.org/wp-content/uploads/downloads/2015/02/Casualties-of-war-report-web.pdf>



The global war on drugs - led by wealthy countries - is having a devastating impact on development in poor countries. Afghanistan's crackdown on opium and heroin traffickers, for instance, has destabilized the central government, while Colombia - one of the world's biggest cocaine producers - continues to spend US\$ 35.7 billion a year on failed drug policies, diverting resources away from health and education. A revision of the UN

conventions could take the pressure off national governments and open up at least the possibility of legalization of some drugs in some areas.

* * *

Understanding the U.S. Illicit Tobacco Market: Characteristics, Policy Context, and Lessons from International Experiences

Editors: Peter Reuter and Malay Majmundar
Institute of Medicine; National Research Council, February 2015



209 pp. 2.7 MB:

http://download.nap.edu/cart/download.cgi?&record_id=19016



Tobacco use has declined because of measures such as high taxes on tobacco products and bans on advertising, but worldwide there are still more than one billion people who regularly use tobacco, including many who purchase products illicitly. Taxes comprise a substantial portion of the retail price of cigarettes in the United States and most other nations. Large tax differentials between jurisdictions increase incentives for participation in existing illicit tobacco markets. In the United States, the illicit tobacco market consists mostly of bootlegging from low-tax states to high-tax states and is less affected by large-scale smuggling or illegal production as in other countries.

* * *

Mortality among drug users in Europe: new and old challenges for public health

European Monitoring Centre for Drugs and Drug Addiction
Publications Office of the European Union, Luxembourg, 2015



21 pp. 682 kB:

http://www.emcdda.europa.eu/attachements.cfm/att_234798_EN_TDAU14010ENN.pdf



More than 6,000 drug users die of overdose each year in the European Union, and most of these deaths occur among problem drug users and involve opioids. In addition, many deaths related indirectly to drug use occur each year. To gain a clearer picture of the overall number of lives lost due to drug use in Europe, this paper builds on the results of an earlier work that looked at all-cause mortality among problem drug users.

Sustainable Development Goals

The Millennium Development Goals in Europe and Central Asia

Lessons on Monitoring and Implementation of the MDGs for the Post-2015 Development Agenda, based upon Five Illustrative Case Studies

United Nations Development Group for Europe and Central Asia, 2015



95 pp. 2.2 MB:

http://www.unece.org/fileadmin/DAM/sustainable-development/MDG/RCM_MDG_full_report_final.pdf



Before we embark on the most ambitious development agenda ever as expressed by the proposed Sustainable Development Goals (SDGs), we must learn from the past. The experience with implementing and monitoring the Millennium Development Goals (MDGs) holds many lessons for the SDGs. These lessons are highlighted in this new report by the UN system in Europe and Central Asia that is launched in Geneva.

* * *

Social Watch Report 2014: Means and Ends

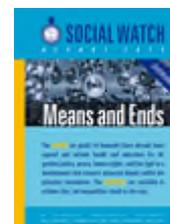
by Roberto Bissio, Karen Judd, Ana Zeballos et al.
Social Watch, 2014



44 pp. 1.4 MB:

Overview: http://www.socialwatch.org/sites/default/files/Social-Watch-Report-Overview2014_eng.pdf

For the full report see: <http://www.socialwatch.org/report2014>



The ends (or goals) of humanity have already been agreed and include health and education for all, gender justice, peace, human rights, and the right to a development that ensures universal dignity within the planetary boundaries. The means are available to achieve this, but among the many obstacles identified by Social Watch coalitions around the world, inequalities and its associated symptoms of inequity and injustice clearly emerge as the main reason why the common aspirations of humanity are not being achieved.

Development Assistance

Financing for development: lessons from Development Progress case studies

by Gideon Rabinowitz and Annalisa Prizzon
Overseas Development Institute (ODI), February 2015



36 pp. 1.4 MB:

<http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9459.pdf>



Evidence of the role and effectiveness of development finance in achieving the Sustainable Development Goals is scarce. This synthesis paper attempts to fill this gap by drawing on lessons from 20 country case studies to explain how finance has been one of the main factors contributing to development progress across these countries.

* * *

Aid Transparency Index (ATI) 2014

by Bill Anderson, Neissan Besharati, Laurence Chandy et al.
Publish What You Fund, October 2014



32 pp. 599 kB:

http://ati.publishwhatyoufund.org/wp-content/uploads/2013/10/ATI-2014_Final-report.pdf



The 2014 ATI results follow the trends observed in previous years. A lead group of organisations are making significant and continuous improvements to the information they publish on their current aid activities – and many others have taken steps towards improving their publication in 2014 – but the majority have not made significant progress and continue to lag behind. The average score for all organisations still sits disappointingly low at 39%, and there is an increasing gap emerging between the organisations at the top and those at the bottom of the ranking.

* * *

WHO guideline on the use of safety-engineered syringes for intramuscular, intradermal and subcutaneous injections in health-care settings



by Selma Khamassi, Laura Pearson, Lisa Hedman et al.
World Health Organization, 2015



32 pp. 620 kB:

http://www.who.int/injection_safety/global-campaign/injection-safety_guidline.pdf?ua=1

Use of the same syringe or needle to give injections to more than one person is driving the spread of a number of deadly infectious diseases worldwide. Millions of people could be protected from infections acquired through unsafe injections if all health-care programmes switched to syringes that cannot be used more than once. Safety syringes are well-established and available in global markets. Reuse prevention and needle-stick injury protection syringes, especially in curative services, are the focus of the recommendations contained in this document, along with provision of sharps waste management equipment.

Others

Syrian Medical Voices from the Ground: The Ordeal of Syria's Healthcare Professionals

by Katherine Footer, Leonard Rubenstein, Zaher Sahoul et al.
Center for Public Health and Human Rights (CPHHR) and Syrian American Medical Society (SAMS), February 2015



28 pp. 1.0 MB:

https://www.sams-usa.net/foundation/images/PDFs/Syrian%20Medical%20Voices%20from%20the%20Ground_F.pdf



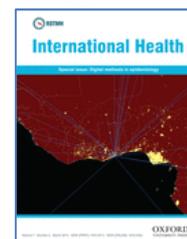
The publication recounts the experiences of 27 physicians and other health workers in Syria who struggle to provide trauma care and health services to a population under assault. The goal of this report is to go beyond statistics and offer a ground-level view of the daily experiences and insights of Syrian health workers in opposition-controlled areas. The deprivations and dangers of medical practice in opposition-controlled areas of Syria help explain why the vast majority of doctors and other health professionals have left. Those who remain have shown enormous courage and resilience, but they and the people they treat continue to face brutal assaults. The door for the international community to engage, support, and protect healthcare workers and civilians in Syria is still open.

ELECTRONIC RESOURCES

International Health - Special issue: Digital methods in epidemiology

Volume 7, Issue 2, March 2015

<http://inthehealth.oxfordjournals.org/content/current>



Modern society has been transformed by the digital revolution through cellular phones for communication, remote sensing of weather and other terrestrial data, cheap and plentiful digital computation and data storage, genomic sequencing and analysis, GPS for geolocation and navigation, and many other marvels. These advances have been concurrent with major changes in the burden, dynamics and distributions of diseases. In this special issue of "International Health", the authors illustrate both the ways in which modern digital methods are already being applied to these current challenges in epidemiology and also the opportunities for even greater impact.

INTERESTING WEB SITES

Midwives4All

<http://midwives4all.org/>



Poor maternal health, including devastating consequences such as stillbirth and newborn death, is an urgent issue to tackle. Midwives4All is an initiative of the Swedish Ministry of Foreign Affairs to spread knowledge about the benefits of midwives and evidence-based midwifery. We believe in the power of networks to achieve change. With midwives4all we want to spark engagement and greater discussion on the benefits of investing in the midwifery workforce as well as highlighting the benefits of evidence-based midwifery.

TRAINING OPPORTUNITIES

Advanced course: Analysing Disrupted Health Systems in Countries in Crisis

15 - 26 June 2015, Amsterdam, The Netherlands



KIT | Health

Jointly organised by Royal Tropical Institute (KIT), Centres for Disease Control (CDC), International Rescue Committee (IRC), Merlin, and the World Health Organisation (WHO).

The application deadline is 15 April 2015.

The course is intended for health professionals working in or on countries in crisis: health personnel in government institutions, NGOs, UN agencies and other humanitarian organizations.

More information and registration ADHS course:

<http://www.kit.nl/health/training/analysing-disrupted-health-systems/>

* * *

Monitoring and Evaluation of Malaria Control Programs Workshop

8-19 June 2015, Accra, Ghana

The School of Public Health, University of Ghana, in collaboration with MEASURE Evaluation



This workshop aims to increase regional capacity for Monitoring and Evaluation (M&E) of malaria. Participants will acquire knowledge of M&E fundamentals as they specifically relate to malaria programs and gain hands-on experience in designing M&E plans. This workshop is targeted for national and sub-national level malaria personnel, especially those responsible for gathering, analyzing, and using program-related data, and NGO and USAID Mission personnel responsible for oversight of malaria programs, especially in the areas of reporting, monitoring and evaluation. Country teams are encouraged to apply.

Applications are due no later than 3 April 2015.

[Brochure](#)

[Applicant Reference](#)

[Application](#)

<mailto:M.E.Malaria@gmail.com> for more details.

* * *

14th International Dengue Course

10-21 August, 2015



Organized by the PAHO/WHO Collaborating Center for the Study of Dengue and its Vector, Institute of Tropical Medicine/MINSAP, the Cuban Society of Microbiology and Parasitology, the Cuban Ministry of Health and PAHO-WHO

During the course, dengue epidemiological situation will be updated as well as the main scientific advances in vaccine and antiviral development, new vector control tools, genetic of the individual, the vector and the agent, clinical management, emergency control, as well as the new international initiatives for dengue control and prevention among other interesting and important topics.

Two mini courses on the topics of Mathematical Models for Dengue prognostic and Vaccinology of Dengue will be organized.

More information and application online:

<http://instituciones.sld.cu/ipk/14thdenguecourse/>

CONFERENCES

Global Forum on Research and Innovation for Health 2015

“People at the Center of Health Research and Innovation”

24-27 August 2015, Manila, Philippines

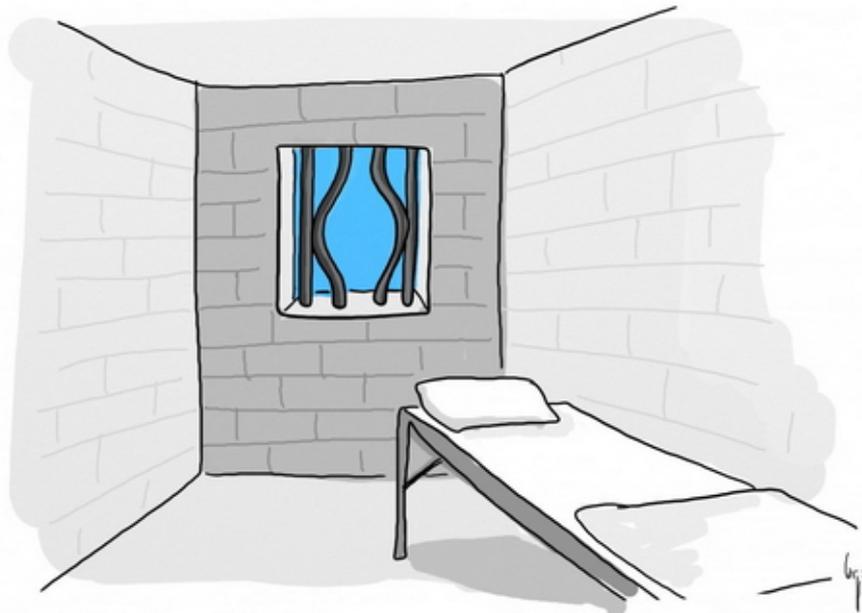


The Council on Health Research for Development (COHRED), in partnership with the Philippine Department of Health and Philippine Department of Science and Technology

As world leaders shift their focus to the post-2015 Sustainable Development Goals, increased understanding of the impact of research and innovation on health is of critical importance. Scientific research and innovation has transformative effects on not only health outcomes, but also on national economic growth and sustainable development. Forum 2015 provides a platform where low and middle income countries take prime position in defining the global health research agenda, in presenting solutions and in creating effective partnerships for action.

For more information see: <http://www.forum2015.org/>

CARTOON



Billy R. - 3 years jail for doping

TIPS & TRICKS

When was that web page updated?

Have you ever gone to a Web site and wondered how current the information was? Maybe it was yesterday, maybe it was three months ago, maybe it was two years ago! If you have ever wanted to find out when a site was updated, this tip will help you.

To find out when a particular web page was last updated, go to the page and after it has loaded type (or copy and paste) the following line into your address bar:

```
javascript:alert(document.lastModified)
```

Be aware, when copy and pasting the 'javascript:' part is sometimes stripped from the paste and you have to add it manually. (Note: your browser must have javascript enabled in order to do this little trick).

* * *

Accent Characters in MS Office

Typing accented letters can be a chore and a mystery, especially for those of us unaccustomed to languages with the 'extra' letters. The keyboards don't show accented letters and it's not obvious how to type them.

It's good to get a name or word exactly right, if only as a courtesy to the reader. Office and Windows let you enter most any character.

Copying

The real easy way, especially with names, is to copy the word (with accented characters) from some source document or incoming email. This ensures you get it right and saves having to work out the keyboard shortcuts to make an accent letter.

Autocorrect

Sometimes you don't have to do anything! Office may add some accented characters for you automatically using the in-built AutoCorrect list. In English language versions of Office you'll probably see some of these:

Type cafe and Office will change it to café, same with fiance becoming fiancé

Shortcuts

Common accents have shortcuts in Office generally (WORD and Outlook which uses WORD as its email editor). The shortcuts have been there for a long time and the main four are quite logical. An easy way to remember them is ...

... you hold the Ctrl and Shift keys down while pressing the character that represents the type of accent you want. For example pressing Ctrl and Shift plus ^ (caret, usually above the 6 key) then the letter 'a' will produce an a with caret above it e.g. â .

The same shortcut works for the accent and grave using the apostrophe and grave (usually on top left of the keyboard, below the ~ tilde).

Similarly, press Ctrl + Shift + : (colon) then either a, o, A, u, O will produce that letter with a umlaut above it e.g. ä, ö, Ä, ü, Ö .

Best regards,

[Dieter Neuvians MD](#)