WHAT'S IN THIS ISSUE

Beyond FACTs/Statistics Revisited
Unfortunately there is no successor to FACT for this issue. We have had very positive feedback from readers about the self-directed learning approach of the FACT and its multiple-choice questionnaire (MCQ) and therefore we have decided to add an MCQ to the last of our series 'Statistics Revisited'. This final paper tackles the important topic of sample size under the intriguing title 'Size does matter'. The MCQ refers to all four papers in the series and is an opportunity for readers to see how much they took in first time round and to refresh their memories by revisiting previous journal issues. Remember, past issues are available online at the website **www.ffprhc.org.uk.**

Newer progestogens
This commissioned paper reviews the new progestogens and their relevance in new and future contraception – this is a 'must-read' paper.

Homeopathic treatment for premenstrual symptoms
Today we are witnessing a rise in interest in complementary therapies. Conventional treatment for premenstrual symptoms, including premenstrual syndrome, is often of limited efficacy and therefore an understanding of complementary alternatives is timely. This paper describes the use of homeopathic treatment for these conditions. There is a review of the evidence for the efficacy of complementary therapies and homeopathy in particular. Appropriate homeopathic drugs are described and two clinical case histories are given as examples of treatment.

Undiagnosed HIV in women attending a sexual health clinic for non-barrier methods of contraception
In some parts of sub-Saharan Africa HIV infection prevalence is in excess of 20–30%. About half of all new cases are now through heterosexual contact. Many of these infections are undiagnosed. A report of two HIV cases encountered at a family planning clinic reminds us to think about HIV. Genitourinary medicine clinics are successfully using opportunities to offer contraceptive services to those in need. We could learn from their experience and offer additional services, such as counselling and testing, to some of our patients who might not have otherwise considered HIV.

Intrauterine techniques: contentious or consensus opinion?
This survey looks at some of the contentious issues surrounding intrauterine device insertion. Wessex family planning doctors reported their practice using a questionnaire. Variation was demonstrated. The arguments for and against each contentious issue are given and a 'consensus opinion' formed. The paper challenges doctors to audit their work.

Who has chlamydia? The prevalence of genital tract *Chlamydia trachomatis* within Portsmouth and South East Hampshire, UK
The largest study for *Chlamydia trachomatis* carried out to date in the UK is reported and highlights the importance of opportunistic screening in primary care. An overall prevalence of 9.6% was recorded, this figure differing according to the health care setting and reason for attendance. This paper is essential reading for all of us working to meet the challenge of reducing morbidity from *C. trachomatis.*

Can the Internet be used to improve sexual health awareness in web-wise young people?
Looking to the future – a fascinating project in Nottingham used focus groups of 14–15-year-old students to assess the value of using the Internet for sexual health education in young people. Provided the information is incorporated imaginatively into websites that young people already use and enjoy, this looks like being a valuable medium for future sexual health awareness.

What's coming in April?
The new Clinical Effectiveness Unit (CEU) will be updating the guidelines on emergency contraception in the April 2003 issue of the Journal and this will be accompanied by an MCQ. The April issue will also see the start of a new series on 'Practising Evidence-based Medicine'.

Fran Reader, Anne Calder, Beccy Hobbs and Nick Manassiev
Editorial Team, Journal of Family Planning and Reproductive Health Care

FROM THE EDITOR

Succession planning
A new year, a new volume and time for me personally to move on and make way for new leadership. You will note that the post of Editor-in-Chief is advertised in this issue of the Journal (page 45). Working with the Journal has been challenging and exhilarating in turns. I have learnt new skills and worked with colleagues to whom I owe enormous gratitude. It has been rewarding to steer the Journal into working with our commercial publisher, PMH, and into the electronic medium with Ingenta. These advances have enabled the Journal to reach a broad church from primary, secondary and tertiary care in the UK and reach international health professionals. Hopefully there has been something of interest for everybody.

Brief reports have evolved into short communications
The short communication format would be ideal for audit reports or follow-up reports from previously published papers. It would also be ideal for communicating innovative service delivery ideas.

Research letters
Research letters of up to 600 words will be welcome in future. They will be peer reviewed and should be accompanied by statements on funding and competing interests.

Notes for contributors
Revised notes for contributors are available on page 46 of this issue. They are also available on the website at **www.ffprhc.org.uk** and will continue to evolve over time. The electronic notes for contributors are always the most up-to-date version.

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