



Mobile apps often provide erroneous STI information

Venus was shocked to read a review of 87 mobile digital apps about sexually transmitted infections (STIs) which found only one that provided fully accurate and comprehensive information on chlamydia. Indeed one-third of the apps reviewed actually contained potentially harmful information. Given that young people are avid users of technology, that STIs are stigmatised, and that the privacy of mobile apps may be appealing, poor-quality apps really risk undermining the potential benefits of an e-Health approach in this area.

Sex Transm Infect 2017;93:240–246. doi:10.1136/sextrans-2016-052690

Patient-centred approach essential in LARC provision

Long-acting reversible contraception (LARC) has, it seems, overtaken the oral contraceptive in worldwide uptake. In fact according to a recent *BJOG* commentary, LARC uptake is now double that of the pill, and is also used twice as often in the developing world as in the developed world. Health advisors appear to be accepting its use for both first-time pregnant women and postpartum use to a greater extent, and price lowering helps. But LARC requires expert input, is invasive, and not all women want it. The commentator argues that a patient-centred approach to contraceptive care is fundamental to women's autonomy, and that the promotion of LARC over and above other contraceptive methods could lead to coercive practice.

BJOG Epub ahead of print 22 April 2017. doi:10.1111/1471-0528.14699

Meningitis vaccine offers protection against gonorrhoea

If you think meningitis vaccine is remote from sexual health, think again. A New Zealand study shows that meningitis vaccine protects against *Neisseria gonorrhoeae*. The retrospective case control study included 1241 individuals with gonorrhoea and 12 487 controls (patients diagnosed with chlamydia only), of whom 1002 had both diagnoses. Meningitis-vaccinated individuals were significantly less likely to be gonorrhoea cases than were controls (41% vs 51%, aOR 0.69, 95% CI 0.61–0.79, $p < 0.0001$). Having the meningitis vaccine reduced the incidence of gonorrhoea by about 31%. The results provide proof of principle that will inform future vaccine development not only for gonorrhoea but also for meningitis.

Lancet Online First 10 July 2017. doi:10.1016/S0140-6736(17)31449-6

Digital pregnancy decision aid may benefit epilepsy sufferers

Women with epilepsy are often anxious about starting a family because of concerns about seizures during pregnancy, the teratogenic effects of anti-epileptic medication and the challenges of parenting in the context of poorly-controlled seizures. So a digital decision aid, such as that trialled by an Australian team in a randomised study, might be a handy support tool. The tool contained balanced evidenced-based information about options, risks and benefits, and the investigators found that women with epilepsy who used it had significant improvements in knowledge and reduced decision conflict, compared with the control group.

Med Decis Making 2017;37:589–599. doi:10.1177/027298×17697304

AMH screening may identify women at risk of premature ovarian insufficiency

Can we predict which women are at greatest risk of premature ovarian insufficiency, and who should therefore consider freezing their eggs? A retrospective study in Irish fertility clinics reviewed clinical histories and anti-Müllerian hormone (AMH) levels to identify women most at risk of premature ovarian insufficiency. Of 490 women aged ≤ 35 years, 40% had AMH levels < 10 pmol/L, 19% were < 5 pmol/L and 4% were < 1 pmol/L. Significantly lower AMH levels were seen in women with risk factors such as endometriosis, ovarian surgery or a family history of premature ovarian failure; however, 57% of women with low AMH levels had no clinical risk factors. The researchers conclude that universal AMH screening should be considered.

Int J Gynecol Obstet 2017;138:37–41. doi:10.1002/ijgo.12167

Laboratory studies can predict potential sperm damage

And on the subject of freezing gametes, laboratory-based studies may have limited ability to predict treatment efficacy, but they can highlight technical deal-breakers, such as sperm which do not survive freezing. A study of how well frozen sperm samples thaw out included 55 men who were involved in intracytoplasmic sperm injection cycles for infertility. The main outcome measure was cases in which no sperm were found post-thaw – happily an infrequent event, occurring only after thawing of rare or very low concentrations of cryopreserved sperm.

Fertil Steril 2017;107:1300–1304. doi:10.1016/j.fertnstert.2017.04.016

Etonogestrel-releasing implants do not affect infant growth

Etonogestrel-releasing implants can be used in the immediate postpartum period. Researchers investigating the growth of breastfed infants whose mothers had inserted an early implant designed an open, randomised controlled trial (RCT) which included 50 women who had been implanted up to 48 hours' postpartum, and 50 women implanted at the conventional time of 6 weeks' postpartum. The children were weighed up to 360 days of age. There was no difference in infant weight at 360 days between the two groups, and growth curves, height, and head and arm circumferences did not differ between the cohorts.

Obstet Gynecol 2017;130:100–107. doi:10.1097/AOG.0000000000002092

Young women living with HIV need preconception counselling

A qualitative North American study found that despite adequate reproductive knowledge, most young HIV-infected women were not using contraception. Those women who had become HIV-positive through risky sexual behaviour were more likely to have been pregnant before and had more knowledge about contraception and family planning than did perinatally infected women. Given the consequences of presentation of advanced HIV during pregnancy, the need for interventions to support adherence to treatment and preconception counselling is essential, and the interventions regarding counselling methods are potentially transferrable between populations.

AIDS Care 2017;29:372–377. doi:10.1080/09540121.2016.1220483

Acupressure reduces nausea and vomiting in pregnancy

Venus, who doesn't suffer nausea gladly, was drawn to a study of acupressure to alleviate severe nausea and vomiting in pregnancy. In this double-blind RCT of 120 women with low-risk singleton pregnancies admitted to hospital for hyperemesis gravidarum, participants received an acupressure band or an identical non-stimulating wristband for 12 hours a day for the first 3 days of admission. Nausea and vomiting scores were significantly lower in the treatment group, who also had less ketonuria, and required fewer admission days. Red wrists were the only reported side effect.

J Obstet Gynaecol Res 2017;43:662–668. doi:10.1111/jog.13269