

Why publish? Why publish here?

In tertiary education, students are exhorted to become lifelong learners so as to be able to adapt and function successfully in an ever-changing environment. It stands to reason that the script for lifelong learning must also change continually in line with developments in knowledge or technology and changes in interpretation and focus.

Journals play an important part in shaping these changes and developments through the reporting of recorded experiences and of studies showing differing or new ways of seeing and solving problems. And like the *South African Journal of Child Health*, each journal contributes through specific focus on its particular context and environment.

Our specific focus is on matters pertaining to child health in Africa and the developing world. If your experience leads you to solving particular clinical problems in an innovative and demonstrably effective way, we should like to encourage you to share it. Given our requirement of scientific rigour and honesty, we will publish material that can be deemed to contribute to improvements in clinical practice and that support lifelong learning by readers.

The 'Hot Topics' contribution and the short study reported in the 'Letters' section of this issue are a case in point. Dehydration is a major killer of children with acute diarrhoea. When oral rehydration has not been successful, many clinicians resort to parenteral rehydration. Dr Westwood makes the point that nasogastric infusion of oral rehydration fluid is much simpler than an intravenous drip and is safe and effective. It is also cheaper, can be set up faster, and has a much larger safety margin in cases of erroneous volume calculations. Westwood and colleagues have introduced a policy of nasogastric drip rehydration in the Red Cross Hospital drip room, with certain specified exceptions. This has helped to save many lives in other centres, and should certainly be emulated elsewhere in this country and beyond.

If material is worth being published, it is also worth being read! *SAJCH* had more than 10 000 readers from 152 countries last year. The journal is now fully accredited with the South African Department of Higher Education for subsidy purposes and is listed on the directory of open-access journals. We are preparing an application for listing on PubMed Central. Accordingly, we can confidently assure intending authors of a good platform for dissemination of their data and insights.

The present issue of the *Journal* again has interesting contributions from far and wide. The survival of patients with homozygous thalassaemia has been improved by a blood transfusion policy to maintain haemoglobin levels in the range 9 - 11 g/dl, accompanied by chelation therapy. Dewan *et al.* remind us through their study that patients on long-term desferrioxamine therapy have an increased risk of ocular complications.

Childhood hepatitis B infection is a major problem in many parts of Africa and not yet fully conquered by immunisation. Sadoh *et al.* show that co-infection with HIV is frequent in their part of Nigeria. This can have a significant impact on the occurrence of chronic liver disease and influence the outcome of antiretroviral therapy. In another study from Nigeria, Adegoke and Oginni highlight the increasing role of trauma in child deaths in the developing world, quoting data to suggest that mortality from trauma will equal that from infectious diseases within 10 years. They identify a number of predictors of mortality in children admitted with injuries.

We again publish a few case reports reminding us of interesting cases and rare associations. Mackay and Davies had a case of severe fetal haemorrhage arising from umbilical ulceration associated with intestinal atresia, and Geel *et al.* describe a case of Gorlin syndrome, a dominantly inherited anomaly with an increased sensitivity to radiation and risk of malignancies.

The *Handbook of Paediatrics* from the University of Cape Town has just been published in an updated improved 7th edition. It will undoubtedly be as popular as its predecessors.

Publication of experience and reason, as books or as journal articles, develops the habit of lifelong learning in researcher and reader alike. The ultimate aim after all must be to contribute to an improved overall outcome in child health.

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Editor



Warmest South African congratulations to the Cape Town editorial team on the publication of the newest edition of the *Handbook of Paediatrics*!