

## From the Editor-in-Chief

**T**his volume of *World Health & Population* presents papers which have recently been published online by *WHP* and are selected here as representative of the diversity and focus of the journal. The papers in this issue include four from Africa, one on Afghanistan, and a book review

In the first paper in this issue, Henry Okeri and Efe Okeri, respectively members of the Faculty of Pharmacy and Faculty of Law at the University of Benin in Nigeria, present an overview of product liability issues with regard to pharmaceuticals. Such issues are important from many dimensions, and demonstrate the intersection of health care with the social and legal structure of countries. First, in many resource-constrained economies pharmacists and compounders fill the health manpower gap by becoming prescribers as well as fillers of prescriptions. What should be the proper role and liabilities associated with such responsibilities? The second major issue is the ongoing and quite visible concern about conduct of multinational clinical trials in developing countries. There are a number of pressing ethical issues, most importantly including informed consent, which is a concept that needs strong cultural adaptation and validation before blindly applying the forms and procedures developed for trial sites in North America or Europe.

Akinwale and colleagues provide a short clinical note in our second paper, also from Nigeria, on a study examining urine samples for cell abnormalities associated with schistosomiasis infection. Schistosomiasis is second only to malaria among parasitic diseases affecting people in developing countries, and it is hyper-endemic in Nigeria. Beyond the significant primary morbidity caused by the disease, however, schistosomiasis is linked to serious long-term sequelae such as bladder cancer. This note describes field research necessary to better understanding the indicators and linkages.

Sociologist Ezebunwa Nwokocha from the University of Ibadan is the author of the third paper from Nigeria presented in this issue of *WHP*. Nwokocha examines the role of traditional medicine in Nigeria, in the context of “introduced”, or 21st century medicine brought on initially by colonization, but now made more accessible through the forces of the information age and globalization. The article describes six functions and modalities of Nigerian traditional medicine, and offers several theoretical models for understanding the choice of traditional medicine, including the well-known Health Belief Model. Nwokocha notes an uptake of interest in traditional medicine in Nigeria, and argues for the better integration of traditional medical approaches, along with introduced approaches, for the improved health of the population.

The fourth paper in this issue, by Jossy van den Boogaard and colleagues in Netherlands and Lukulu, Zambia, presents an interesting study on the choice by mothers of skilled birth attendants (SBAs) versus traditional birth attendants (TBAs) in a rural African community. The UN Millennium Development Goals specifically target reduction of maternal mortality by 75% by

the year 2015 (MDG Goal #5). Due to the overall shortages of health care providers, and SBAs in particular, it is critical to identify the appropriate continuing role of TBAs in addressing this goal. The authors point out important socio-cultural issues, as well as the training and access (transportation) issues, involved in the choice of a birth attendant. Policy implications include the allocation of scarce training resources for training of TBAs, versus excluding them from training in favor of more formally-educated and trained skilled birth attendants.

The only manuscript outside of Africa in this issue is from Shannon Doocy and colleagues from Johns Hopkins University, the University of California at San Diego, and the International Rescue Committee in Kabul. This team of researchers took on the very difficult task of updating tuberculosis (TB) prevalence rates and annual risk of TB infection in Afghanistan, which has reportedly the highest number of TB cases in Asia. Doocy et al. apply rigorous population-based survey sampling techniques under extremely challenging circumstances, with apparent reasonable success. Interestingly, their results show a substantially lower TB prevalence rate and annual risk of infection than the previous, very outdated 1978 data upon which WHO estimates have been based. Rates and risks are higher in rural areas than urban, and in provinces still experiencing the greatest violence and political unrest. As the health care system in Afghanistan struggles to recover, continued efforts need to be made to strengthen data and information on disease prevalence, to guide priority setting in this terribly resource-constrained country.

Finally, this issue includes a book review prepared by *WHP* Associate Editor Amir Khaliq, PhD, from the University of Oklahoma Health Sciences Center. Khaliq reviews Sandra Lane's 2008 book "*Why are our babies dying? Pregnancy, birth and death in America.*" Although outside the typical focus of *WHP*, the book's examination of factors impacting infant mortality in the U.S. sounds remarkably familiar with circumstances in other resource-constrained and challenged areas in the world. Views of affected U.S. populations after Hurricane Katrina could have easily been from the most impoverished areas of sub-Saharan Africa as from Mississippi or Louisiana, and the "socio-economic inequities" driving differential infant mortality in the U.S. are distressingly similar. Dr. Khaliq identifies and reviews an important book for our consideration, regardless of the geographic focus of our research or interests.

In summary, we hope that you find these articles and the book review of interest and value, and that you will additionally consult other papers recently released online at [www.worldhealthandpopulation.com](http://www.worldhealthandpopulation.com). *WHP* remains committed to its mission to provide a forum for researchers and policy makers worldwide to publish and disseminate health- and population-related research, and to encourage applied research and policy analysis from diverse international settings. As announced in the previous printed issue of *WHP*, we are also extremely pleased that the journal is now indexed on MEDLINE and accessible through PubMed. The reach and impact of *WHP* will be greatly enhanced, and we look forward to continued strong submission for consideration and publishing. Finally, the editors and publishers of *WHP* are always interested in any comments or suggestions you might have on the articles or journal. Please feel free to write or e-mail us.

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