

Abstracts

Folic acid supplementation does not reduce cardiac risk in high-risk women

According to a study published in the *Journal of the American Medical Association*, B-vitamin supplementation does not reduce the combined end-point of total cardiovascular events among high-risk women, in spite of significant reduction in homocysteine levels.

The rationale behind the study is that homocysteine levels have been associated with cardiovascular risk in observational studies, and daily supplementation with folic acid, vitamin B₆, vitamin B₁₂ or a combination has been shown to reduce homocysteine levels to varying degrees in intervention studies. The objective of this study was to test whether or not a combination of folic acid, vitamin B₆ and vitamin B₁₂ lowers the risk of cardiovascular disease (CVD) among women with and without pre-existing disease.

A total of 5 442 women who were US health professionals aged 42 years or older, with either a history of CVD or 3 or more coronary risk factors, were enrolled in a randomised, double-blind, placebo-controlled trial to receive a combination

pill containing folic acid, vitamin B₆, and vitamin B₁₂ or a matching placebo, and were treated for 7.3 years from April 1998 through July 2005. The authors found that, compared with placebo, 796 women experienced a confirmed CVD event (406 in the active group and 390 in the placebo group). Patients receiving active vitamin treatment had a similar risk for the composite CVD primary end-point, as well as for the secondary outcomes including myocardial infarction, stroke, and CVD mortality. In a blood substudy, geometric mean plasma homocysteine level was decreased by 18.5% in the active group over that observed in the placebo group, for a difference of 2.27 µmol/l.

Albert CM, *et al.* *JAMA* 2008; 299: 2027-2036.

Uptake of human papillomavirus vaccine by schoolgirls in Manchester

From September 2008, schoolgirls in the UK aged from 12 or 13 years will routinely be offered vaccination with one of two licensed vaccines against human papillomavirus (HPV) – a quadrivalent vaccine (Gardasil; Merck, Pa., USA) or a bivalent vaccine (Cervarix;

GlaxoSmithKline, Rixensart, Belgium). In women who are not yet infected, both vaccines effectively prevent HPV-16 and HPV-18-associated cervical intraepithelial neoplasia, which is responsible for about 70% of cancers. Two studies of parents' attitudes to the vaccine have suggested that uptake would be between 70% and 80%, but no studies have been carried out of generalised acceptability.

In this study, published in the *British Medical Journal*, Loretta Brabin and colleagues looked at the feasibility of delivering HPV vaccine to adolescent girls. Their participants were 2 817 schoolgirls aged 12 or 13 from 36 schools in Manchester. Vaccine uptake was 70.6% for the first dose and 68.5% for the second dose. Uptake was significantly lower in schools with large ethnic minorities or a higher proportion of girls entitled to free meals – a measure of socioeconomic status. The main reason for refusal was parental concern about lack of information about the vaccine and its long-term safety.

Although uptake was good, success of the vaccination programme depends on high uptake of the third dose – which has yet to be examined.

Brabin L, *et al.* *BMJ* 2008; 336: 1056-1058.

BRIDGET FARHAM

Single suture

Poor child care as damaging as sexual abuse

Poor child care can apparently trigger aggression in later childhood, making it as dangerous as sexual or physical abuse. This is according to Jonathan Kotch and colleagues, who studied 1 318 children from birth to the age of 8. Records from child protection services were taken to indicate how children had been treated during their first 2 years of life. Aggressiveness at ages 4, 6 and 8 was established by using face-to-face interviews with the child's caregiver.

Neglect was defined as failure to provide for basic needs, such as food and shelter or emotional support, or if they are left unsupervised or in the care of an inappropriate guardian. This research showed that this was just as important a contributing factor to later aggression as other forms of maltreatment. And this form of abuse accounts for two-thirds of all cases – far more than sexual or physical abuse.

Could this be part of the cause of our violent society?

Kotch J, *et al.* *Pediatrics* 2008; 121: 725-731.