

BEST PUBLICATIONS LISTING

The following is a list of “the five best publications over the past five years”, as supplied by members of the School of Public Health. We believe it is an impressive record, with helpful annotation provided by authors of why the papers are important. It demonstrates the breadth of public health topics that researchers within the SPH are involved in.

Where provided, the impact factor of the journal is included in square brackets after the listing, along with the current citations rate. Publications are listed alphabetically by first author, with SPH authors highlighted in bold.

Askie LM. Appropriate levels of oxygen saturation. *Acta Paediatrica* Suppl 2004; 444:26-28.

Invited submission summarising presentation given at the UK Neonatology Hot Topics conference. This conference invites high profile speakers from around the world to discuss “hot topics” in the specialty.

Askie LM on behalf of the PARIS Collaboration. Antiplatelets for the prevention of pre-eclampsia: a systematic review and individual patient data meta-analysis [trial protocol]. *BioMed Central Pregnancy and Childbirth* 2005; 5:7

Protocol for first perinatal individual patient data review ever undertaken. The project addressed a question with worldwide public health implications.

Askie LM, Henderson-Smart DJ, Irwig L, Simpson JM. Oxygen-saturation targets and outcomes in extremely preterm infants. *N Engl J Med* 2003; 349(10): 953-961. [IF 38.57]

First randomised trial ever to address this question. Has now spawned 5 further trials addressing the question and a prospective meta-analysis collaboration. Published in highest impact factor general journal with large and wide audience.

Askie LM, Henderson-Smart DJ, Jones R. The management of infants with chronic lung disease of prematurity in Australasia. *Early Human Development* 2005; 81:135-142.

Invited submission as part of series of articles addressing the management of chronic lung disease in newborns around the world.

Askie LM, Tin W. The use of oxygen in neonatal medicine: half a century of uncertainty. *NeoReviews* 2003; 4(12): e340.

Invited submission to summarise the evidence relating to this important aspect of neonatal care.

Barnett A, **Smith B**, Lord S, Williams M, **Bauman, A**. Community-based group exercise improves balance and reduces falls in at-risk older people: a randomised controlled trial. *Age and Ageing* 2003; 32: 407-414.

While exercise interventions are known to be effective in preventing falls injuries among the elderly, few studies have evaluated models for implementing falls preventing programs using existing health and community services. This RCT shows that GP referral to community based exercise programs can be effective in preventing falls.

Barratt AL, Howard K, Irwig L, Salkeld G, Houssami N. A model of the outcomes of screening mammography: information to support informed choices *BMJ* 2005; 330: 936-8 (23 April 05) [IF 7.038, citations 4]

This is the first model to provide comprehensive and age-specific estimates of the benefits and harms of screening mammography. The paper demonstrates Alex's expertise in presenting evidence in formats which can be readily used by patients, doctors and policy makers.

Barratt A., Trevena L.T., Davey H., McCaffery K.J. (2004) Making informed choices about screening: the implications of differences between screening and treatment decisions. *BMJ*. 329: 507-510. [IF 7.038; citations 2]

This was the first paper published in a high impact medical journal about the challenges faced in supporting informed choice in screening decisions. It marked STEP and Sydney Health Decision Group as leaders in the design of screening decision aids. It has been used in the development of new International Patient Decision Aid Standards (IPDAS).

Barratt A, Wyer PC, Hatala R, McGinn T, Dans AL, Keitz S, Moyer V, Guyatt G. Tips for learners of evidence-based medicine: 1. Relative risk reduction, absolute risk reduction and number needed to treat. *Canadian Medical Association Journal* 2004; 171: 353-358 [IF 5.941, citations 14] (Plus series introduction: Wyer PC, Keitz S, Hatala R, Hayward R, Barratt A, Montori V, Woollorton E, Guyatt G. Tips for learning and teaching evidence-based medicine: introduction to the series. *Canadian Medical Association Journal* 2004; 171: 347-348). [IF 5.941, citations 8]

Teaching clinicians basic evidence based medicine (EBM) skills has proved challenging. This paper was the first to target both teachers and clinician learners of EBM principles, and it highlights Alex's support of the broad implementation of evidence based practice through teaching.

Beard J, Birden H; The role of the public in the management of public health risks *Australian and New Zealand Journal of Public Health*, 2004;28(5): 415-417.

This paper is even more relevant in light of current heightened activity in the area of influenza pandemic preparedness. On an issue characterised by scientific uncertainty and risk of losing trust and credibility, public health practitioners must be aware of the importance of appropriate risk communication techniques. As the 1976b Swine Flu

fiasco in the US and the Cryptosporidia outbreak in Sydney demonstrated, the game can be won or lost on the strength of the public image.

Berry A, **Barratt AL**. Meta-analysis of prophylactic antibiotics in TURP. *Journal of Urology* 2002;167: 571-577. [IF 3.71, citations 12]

This meta-analysis revealed that antibiotic prophylaxis significantly decreases the risk of bacterial complications in low risk candidates undergoing transurethral prostatic resection. This evidence has been invaluable in guiding relevant clinical practice and policy development.

BIG 1-98 Collaborative Group: Thürlimann B, Keshaviah A, **Coates AS**, Mouridsen H, Mauriac L, Forbes JF, Paridaens R, Castiglione-Gertsch M, Gelber RD, Rabaglio M, Smith I, Wardley A, Price KN, Goldhirsch A (Writing Committee). Adjuvant letrozole reduces the risk of relapse in postmenopausal women with receptor- positive early breast cancer compared with tamoxifen: first results of the BIG 1-98 trial. *New Engl J Med* 2005, 343, 2747 – 2757. [IF 38.57]

Led by the International Breast Cancer Study Group.

Birden, H; "West Nile Virus", *Environmental Health*, 2001;1(4):28-33

This is an emerging infectious disease that as yet has not affected Australia, but is expanding and will become global.

Birden H, Page S. Teaching by videoconference: a commentary on best practice for rural education in health professions. *Rural and Remote Health* 5 (online), 2005: 356. Available from: <http://rrh.deakin.edu.au>

Videoconferencing is a recent development that enhances educational opportunity, especially in rural Australia. Through the School of Public Health and the two UDRHs that are part of it, USyd has been on the leading edge of demonstrating the potential and capability of this technology. This paper presents a design for optimal use of videoconferencing tools pioneered by USyd, and is instrumental as a primer for those seeking to become involved.

Booth ML, Bernard D, Quine S, Kang M, Usherwood T, Alperstein G, Bennett DL. (2004). Access to health care among Australian adolescents: Young people's perspectives and their socio-demographic distribution. *Journal of Adolescent Health*, 34, 97-103.

Access to primary health care is problematic for adolescents with the result that they will often fail to seek care for serious health concerns. This paper represents the first comprehensive study of the factors that influence adolescents' decisions to seek professional health care.

Booth ML, Chey T, Wake M, Norton K, Hesketh K, Dollman J, Robertson I. (2003). Change in prevalence of overweight and obesity among young Australians, 1969-1997. *American Journal of Clinical Nutrition*, 77, 29-36.

This was one of the first papers to report on secular trends in the prevalence of overweight and obesity among young Australians. Overweight and obesity is recognized as one of the most significant threats to the health of the Australian population.

Booth ML, Okely AD, Chey T, Bauman AE. (2004). Patterns of activity energy expenditure among Australian adolescents. *Journal of Physical Activity and Health*, 1(3), 246-258.

This paper presents data on the ways in which young Australians are physically active and how they expend energy through physical activity participation. The information has been very useful in the development of programs and policies intended to promote physical activity.

Bossuyt PM, Reitsma JB, Bruns DE, Gatsonis CA, Glasziou PP, Irwig LM, Lijmer JG, Moher D, Rennie D, de Vet HCW. Towards complete and accurate reporting of studies of diagnostic accuracy: the STARD initiative.

Published in:

BMJ 2003; 326: 41-4 [IF 7.209, citations 34]
Ann Intern Med 2003; 138: 40-44 [IF12.427, citations 17]
Clinical Biochemistry 2003; 36: 1-7 [IF 1.825, citations 1]
Am J Clin Pathol. 2003; 119(1): 18-22 [IF 2.858, citations 1]
Clin Chem. 2003; 49(1): 1-6 [IF 5.538, citations 30]
Lancet (correspondence) 2003; 361: 71. [IF 18.316]
Radiology. 2003 ;226(1): 24-8 [IF 4.815, citations10]
Academic Radiology 2003; 10: 664-8 [IF 1.409, citations 1]
Clin Chem Lab Med 2003; 41(1):68-73 [IF 1.523, citations 5]
Ned Tijdschr Geneeskd 2003; 147(8): 336-40
Croatian Medical Journal 2003; 44(5): 635-8 [IF 0.943, citations 1]
Clinical Radiology 2003; 58(8): 575-580 [IF 1.270, citations 2]
American Journal of Roentgenology 2003; 181(1): 51-5 [IF 2.474, citations 1]
Annals of Clinical Biochemistry 2003; 40: 357-363 [IF 1.242, citations 1]

This widely cited paper, published simultaneously in many journals together with the background justification, sets the standard for the conduct and reporting of diagnostic accuracy studies for researchers, clinicians and journal editors.

Britt H, Knox S, Miller GC. *Changes in pathology ordering by GPs in Australia 1998-2001.* Canberra: Australian Institute of Health and Welfare; 2003. Available from: <http://www.aihw.gov.au/publications/gep/cpogpa98-01/index.html>

A definitive study of trends in pathology test ordering by GPs in Australia.

Britt H, Miller GC, Knox S, Charles J, Pan Y, Henderson J et al. *General practice activity in Australia 2004-05.* Canberra: Australian Institute of Health and Welfare; 2005. Available from: <http://www.aihw.gov.au/publications/index.cfm/title/10189>

This is the most detailed report to date of changes in general practice activity in Australia reflecting changes in the workforce and in government policy.

Britt H, Miller GC, Knox S. *Imaging orders by general practitioners in Australia 1999-00*. Canberra: Australian Institute of Health and Welfare; 2001. Available from: <http://www.aihw.gov.au/publications/gep/iogpa99-00/index.html>

This book presents the findings of the first major study of diagnostic imaging ordering by general practitioners and the compliance of practitioners with guidelines for imaging orders.

Britt HC, Valenti L, Miller GC. Determinants of consultation length in Australian general practice. *Med J Aust* 2005; 183: 68-71.

Time spent in consultation affects GP supply. This paper identifies the GP and patient characteristics and the morbidity that impact independently on length of consultation. For the first time, the independent impact of the changing GP workforce, the aging population and their changing morbidity patterns, can be measured in modelling future GP workforce needs. This is first large scale study of measured consultation length in Australian general practice and the effect of patient demography and morbidity on GP time allocation.

Britt H, Valenti L, Miller GC, et al. Determinants of GP billing in Australia: content and time. *Med J Aust* 2004; 181: 100-104.

This paper is the first to investigate the extent to which the Medicare payment system for a combination of time spent with the patient, and the complexity of the consultation, is applied by general practitioners. It suggests some under-, rather than over-charging to government for some Medicare paid services.

Cameron ID, Cumming RG, Kurrle SE, Quine S, Lockwood K, Salkeld G, Finnegan T. A randomised trial of hip protector use by frail older women living in their own homes. *Injury Prevention* 2003; 9: 138-141.

This was the trial of external hip protectors among people living in the community. In contrast to studies done in nursing homes, hip protectors were not effective in this population. This finding has since been confirmed by others.

Chapman S. Advocacy in public health: roles and challenges. *Int J Epidemiol* 2001;30:6:1226-32.[citations11]

Simon Chapman has been a leading exponent of public health advocacy for nearly 30 years. In this paper, he reviews the interface between advocacy and epidemiology, urging epidemiologists to "get out more" and advocate for the implications arising from their work. The paper asks what the purpose of research is, if not to be useful to society, and argues that because most research is unread and uncited, authors have a special responsibility to publicise their research and advocate for its contributions to be considered by policy makers.

Chapman S, McLeod K, Wakefield M, Holding S. Impact of news of celebrity illness on breast cancer screening: Kylie Minogue's breast cancer diagnosis. *Med J*

Aust 2005; published on-line Aug 7

http://www.mja.com.au/public/issues/183_05_050905/cha10589_fm.html

When singer Kylie Minogue was diagnosed with breast cancer, there was massive news publicity about this around the world. This paper examines changes in mammographic screening rates for age-eligible women in the 8 weeks after that publicity, finding there was a 101% increase in previously unscreened women coming forward for mammograms. The paper is a perfect illustration of the power of news to change behaviour.

Charles J, **Britt H**, Valenti L. The evolution of the general practice workforce in Australia, 1991-2003. *Med J Aust* 2004; 181: 85-90.

This paper describes the changing characteristics of the GP workforce over a decade. Much of the data reported are not available from other sources such as Medicare statistics.

Choi BCK, Pang T, Lin V, Puska P, Sherman G, Goddard M, Ackland MJ, **Sainsbury P**, Stachenko S, Morrison H, Clotey C. Can scientists and policy-makers work together? *Journal of Epidemiology and Community Health*, 2005, 59, pp 632-7. doi: 10.1136/jech.2004.031765.

Describes some of the reasons why researchers and policy-makers have difficulty working together and suggests some strategies for improving working relationships between the two tribes so that policy is more evidence-informed and research is more policy relevant.

Cholesterol Treatment Trialists' (CTT) Collaborators (includes **Keech, AC**). Efficacy and safety of cholesterol-lowering treatment: prospective meta-analysis of data from 90 056 participants in 14 randomised trials of statins. *Lancet* 2005; 366: 1267–1278: [IF 21.713]

This paper provides the definitive current information about the role of statin treatment for patients at risk of cardiovascular disease. It is also an important demonstration project of the rules for prospective meta-analysis. It is one of the first prospective meta-analysis planned in the world and is now widely referenced as it contains all the data from all the published trials to that point and provides the most reliable estimates of the value of treatment.

Clemson L, **Cumming RG**, Kendig H, Swann M, Heard R, Taylor K. The effectiveness of a community-based program for reducing the incidence of falls among the elderly: A randomized trial. *Journal of American Geriatrics Society* 2004; 52: 1487-1494.

This trial makes an important contribution to knowledge and practice in falls prevention, as it was the first study to show that an appropriately designed education program could lead to a significant reduction in falls risk.

Clough AR, Lee KSK, Cairney S, O'Reilly B, d'Abbs P, **Conigrave KM**. Changes in cannabis use and its consequences over three years in a remote indigenous population in northern Australia. In press: *Addiction*. [IF 3.006]

This study was the first longitudinal study on cannabis use in an indigenous population. While the subjects still had persistent very high rates of cannabis use at 3 year follow-up (70% of males), there was a significant reduction in levels of use and associated harms from 2001 (82% of males). The data highlight the great need for more collaborative work with indigenous communities, and in particular interventional studies. The feedback of these results to the communities involved has led to ongoing discussions on methods to reduce the impact of cannabis.

Cole BF, Gelber RD, Gelber S, **Coates AS**, Goldhirsch A. Polychemotherapy for early breast cancer: an overview of the randomised clinical trials with quality-adjusted survival analysis. *Lancet*, 2001, 358, 277 – 286. [IF 13.251]

Brings together the meta-analytic skills of the Oxford Overview group with the quality adjusted survival analysis techniques developed in the International Breast Cancer Study Group to summarise the benefits of systemic adjuvant therapy for early breast cancer in various patient groups.

Concha-Barrientos M, Nelson D, **Driscoll T**, Steenland K, Punnett L, Fingerhut M, Pruess-Ustun A, **Leigh J**, Tak SW, Corvalan C, Selected Occupational Risk Factors Chapter 21 in: *Comparative Quantification of Health Risks. Global and Regional Burden of Disease Attributable to Selected Major Risk Factors*. Volume 2. Geneva, WHO (2004) p 1651- 1802.

The most detailed published account of the massive WHO Comparative Risk Assessment project of occupational risk factors in the global burden of disease and injury. Includes statistical data likely to be of use for many years. Will be followed by journal articles on subsets of data, to appear in late 2005.

Conigrave KM, Saunders JB, Hall W. The AUDIT questionnaire: choosing a cut-off score. *Addiction*, 1995; 90: 1349-1356. [IF3.006, citations 107]

This paper shows that an inexpensive and widely available 10 item screening questionnaire can be a valuable aid in diagnosis and prognosis for alcohol use disorders. This paper demonstrates that the recommended cut-off score of 8 on this World Health Organisation has real relevance. People scoring above that threshold experience higher rates of alcohol related harm, and are more likely to experience persistent hazardous or harmful alcohol use over the coming 3 years.

Conigrave, K., Degenhardt, L., Whitfield, J. B., Saunders, J. B., Helander, A., Tabakoff, B. and on behalf of the WHO/ISBRA study group. CDT, GGT and AST as markers of alcohol use: The WHO/ISBRA collaborative project. *Alcoholism: Clinical and Experimental Research*. 2002; 26, 332-339. [IF 2.508, citations 50]

This paper was important because it provided a large multi-centre evaluation of blood tests for alcohol use against a comprehensive validated questionnaire. The subjects

studied included the entire range of drinking levels. This paper showed that the newer marker, CDT (carbohydrate deficient transferrin) was more specific than the best of the traditional markers, the liver enzyme GGT (gamma glutamyltransferase), but unlike early reports, was only marginally more sensitive. This is probably because early reports compared extreme ends of the spectrum (alcoholics versus controls) and/or used manual laboratory methods which were more accurate than the commercially available kits. As CDT and GGT detect different (risky) drinkers there is likely value in combining them.

Because CDT is significantly more expensive than GGT, and is being commercially promoted, delineating its role was important. The other importance of this paper is that it confirms that a blood test (using standard cut-offs) detects no more than 70% of those who already admit to an alcohol problem in an interview. In persons under the age of 30 there was virtually no association between blood test and drinking level. Blood tests are more sensitive in the heaviest drinkers than in those who drinking just over the limit, but it is in the less obvious cases where a diagnostic tool is most useful. Hence simply taking a good alcohol history remains one of the most powerful tools in the assessment of alcohol problems.

Coombes RC, Hall E, Gibson LJ, Paridaens R, Jassem J, Delozier T, Jones S, Alvarez I, Bertelli G, Ortmann O, **Coates AS**, Bajetta E, Dodwell D, Coleman RE, Fallowfield LJ, Mickiewicz E, Andersen J, Lønning PE, Cocconi G, Stewart A, Stuart N, Snowdon CF, Carpentieri M., Massimini G, Bliss JM for the Intergroup Exemestane Study. A randomized trial of exemestane after two to three years of tamoxifen therapy in postmenopausal women with primary breast cancer. *New Engl J Med*, 2004, 350, 1081 – 1092. [IF 38.57]

Alan Coates is the Australian Chair of this large international clinical trial, one of several which have conclusively demonstrated the superiority of a new class of endocrine therapy in selected patients with early breast cancer.

Craig CL, Marshall AL, Sjostrom M, **Bauman AE**, **Booth ML**, Ainsworth BE, Pratt M, Ekelund U, Yngve A, Sallis J, Oja P. (2003). International Physical Activity Questionnaire: 12-Country Reliability and Validity. *Medicine and Science in Sports and Exercise*, 35(8), 1381-95.

This study reports on the validation across 12 countries of a physical activity question recommended for international use. Michael Booth led the process of international consultation and development over 8 years. The IPAQ questionnaire is now widely used.

Crivellari D, Price K, Gelber RD, Castiglione-Gertsch M, Rudenstam C-M, Lindtner J, Fey M, Senn H-J, **Coates AS**, Collins J, Goldhirsch A for the International Breast Cancer Study Group (IBCSG). Adjuvant endocrine therapy compared with no systemic therapy for elderly women (age 66-80) with early breast cancer: 21 year results of International Breast Cancer Study Group Trial IV. *J Clin Oncol* 2003, 21, 4517 – 4523. [IF 10.854]

Large clinical trial groups take years to establish, but generate data over decades. I am the Co-Chair of the scientific committee of the International Breast Cancer Study Group, which was responsible for this mature report of one of its early clinical trials.

Cumming RG, Mitchell P, Smith W. Diet and cataract: the Blue Mountains Eye Study. *Ophthalmology* 2000; 107: 450-456.

This study found that higher dietary intakes of some antioxidant vitamins reduce the risk of cataract. The study was widely reported in the lay press.

Darlow BA, Hutchinson JL, **Simpson JM**, Henderson-Smart DJ, Donoghue DA, Evans NJ. Variation in rates of severe retinopathy of prematurity among neonatal intensive care units in the Australian and New Zealand Neonatal Network. *Br J Ophthalmol.* 2005; 89: 1592-6.

The journal recognized the importance of this paper by accompanying it by an editorial.

Davey E, Barratt A, Irwig L, Chan SW, Macaskill P, Mannes P, Saville M. Effect of study design and quality on unsatisfactory rates, cytology classifications and accuracy in liquid-based versus conventional cervical cytology: a systematic review. *Lancet* 2006; 367: 122-132. (Editorial comments by Obwegeser J & Schneider Von pages 88-89).

Accuracy in cervical cancer screening is essential. This systematic review has already generated much discussion and comment, and has prompted further consideration of the arguments for adopting liquid based cytology.

Deeks JJ, Macaskill P, Irwig L. The performance of tests of publication bias and other sample size effects in systematic reviews of diagnostic test accuracy was assessed. *Journal of Clinical Epidemiology*, 2005; 58(9): 882-893.

This methodology paper points out the major pitfalls in generalizing methods used to test for publication bias in the meta-analysis of clinical trials, to the meta-analysis of diagnostic studies. It builds on our earlier paper (2001), to provide a valid and more rigorous method for systematic reviews of diagnostic studies.

Driscoll T, Harrison J, Steenkamp M. Alcohol and drowning in Australia. *Injury Control and Safety Promotion*, 2004; 11(3):175-181.

One of the first detailed uses of National Coroners Information System data to address an important public health issue. It showed the great potential that the NCIS has a source of public health data, highlighted some areas for improvement, and also provided the first Australian data-based assessment in several decades of the important role of alcohol in drowning in Australia.

Driscoll TR, Mitchell RJ, Hendrie AL, Healey S, Mandryk JA, Hull BP. Unintentional fatal injuries arising from unpaid work at home. *Injury Prevention*, 2003; 9:15-19.

The most detailed study of fatal injury resulting from unpaid work in the home environment published in any country.

Driscoll TR, Mitchell RJ, Mandryk JA, Healey S, Hendrie AL, Hull BP. Coverage of work-related fatalities in Australia by compensation and occupational health and safety agencies. *Occupational and Environmental Medicine*, 2003; 60:195-2000.

Provided the first comprehensive estimate of the significant extent to which the standard data sources in Australia under-report work-related fatal injury.

Driscoll TR, Mitchell RJ, Mandryk, JA, Healey S, Hendrie AL, Hull BP. Work-related fatalities in Australia, 1989 to 1992: an overview. *Journal of Occupational Health and Safety – Australia & New Zealand* 2001; 17(1):45-66.

The most thorough and comprehensive study of work-related fatal injury conducted anywhere in the world.

Driscoll T, Takala J, Nelson DI, Steenland K, Corvalan C, Fingerhut M. Review of estimates of the global burden of injury and illness due to occupational exposures. *American Journal of Industrial Medicine*, 2005: 48(6):491-502.

Presented a critical appraisal of the many claims regarding the global burden of work-related exposures, and provided guidance for future work in the area.

Drope J, **Chapman S**. Tobacco industry efforts at discrediting the science of environmental tobacco smoke: a review of internal industry documents. *J Epidemiol Community Health* 2001; 55; 588- 94. [citations 31]

The global tobacco industry has spent hundreds of millions of dollars over decades to discredit the science underpinning restrictions on public smoking. This paper was one of the first to be published which drew on hitherto private internal tobacco industry documents. It showed the concern in the industry to halt restrictions which were dramatically eroding sales, and the way the industry recruited malleable scientists to try and discredit the science.

Eastman C and **Li M**. Tibet. in Hetzel B, Delange F, Dunn J, Ling J, Mannar V and Pandav C eds. *Towards the global elimination of brain damage due to iodine deficiency.* /Oxford University Press/ 396-407, 2004.

This paper looked at the IDD situation in Tibet in the context of the global elimination of brain damage due to iodine deficiency.

Flood V, **Webb K**, Smith W, Mitchell P, Bantick J, **MacIntyre R**, **Sindhusake D**, **Rubin G**. Folate fortification: potential impact on folate intake in an older population. *European Journal of Clinical Nutrition*. 2001; Vol 55:793-800.

This article reports on a computer simulation of the potential impact of folate fortification on older Australians, should the food regulation authority decide to make folate fortification mandatory for selected food industries. It follows an interim evaluation (by Webb et al for the Commonwealth Dept of Health and Aging) showing

that the voluntary folate fortification policy in Australia had not been implemented as intended, and few foods were fortified under this legislation.

Flood VM, Webb KL, Smith W, Rochtchina E, Mitchell P. Prevalence of low serum folate, red cell folate, serum vitamin B12 and elevated homocysteine in older Australians. *Asia Pac J Clin Nutr.* 2004; 13(S): S85

This article describes markers of folate and b12 nutrition among nearly 2000 older Australians participating in the Blue Mountains Eye study. The prevalence of low serum vitamin b12 is substantially higher than expected.

Fuller J and Edwards J. (2004) Data, circumstance and politics: reflections on regional mental health planning. *Australian Health Review*, 27(1): 93-102.

Description of the messiness of primary health care planning.

Fuller J, Edwards J, Procter N and Moss J. (2000) How definition of mental health problems can influence help-seeking in rural and remote areas. *Australian Journal of Rural Health.* 8: 148-153. [citations, 15]

The first of a series of journal articles on specific issues for rural mental health service delivery.

Fuller J, Edwards J, Martinez L, Edwards B and Reid K. (2004) Collaboration and local networks for rural and remote primary mental health care in South Australia. *Health & Social Care in the Community.* 12(1): 75-84.

Article that has laid the foundation for a longer term research program in models for rural mental health services.

Fuller J (2003) Intercultural health care as reflective negotiated practice. *Western Journal of Nursing Research.* 25(7): 781-97. [IF 0.551]

Culmination article from my PhD that proposes a general mode of operation for health care workers in cross cultural contexts.

Fuller J, Martinez L, Muyambi K, Verran K, Ryan B and Klee R. (2005) Sustaining an Aboriginal mental health service partnership. *Medical Journal of Australia.* 183(10):S69-S72 [IF 2]

A case study that used an action research methodology to both elucidate the factors that lead to sustainability of primary health care programs whilst also contributing to service improvement over the period of the research. Hence applied research that had both immediate service relevance and also generalisable knowledge.

Garne D, Watson M, Byrne F, Chapman S. Environmental tobacco smoke research published in the journal *Indoor and Built Environment* and associations with the tobacco industry. *Lancet* 2005; 365:804-9. [citations:2]

This paper is a forensic examination of the connections with the tobacco industry of

the editorial board of a peer reviewed public health journal, and authors who published papers in that journal over a decade on passive smoking. The paper demonstrates that there is a strong association between having had a tobacco industry affiliation (consultancy, expenses met etc) and the likelihood of publishing a paper which concludes that the association between passive smoking and negative health outcomes is weak or "requires more research".

Gillies MC, **Simpson JM**, Luo W, Penfold P, Hunyor ABL, Chua W, Mitchell P, Billson F. A randomized clinical trial of a single dose of intravitreal triamcinolone acetonide for neovascular age-related macular degeneration: one-year results. *Arch Ophthalmol* 2003; 121: 667-673.

This paper was recognised by the Archives as one of their best 5 papers of the year. Well conducted RCTs are not common in ophthalmology.

Godden, Judith and Forsyth, Sue (2003) Historical Methods, *Nursing Research Methods, Critical Appraisal and Utilisation*, (eds.) Z. Schneider, D. Elliott, G. LoBiondo-Wood and J. Haber, 2nd edition, Harcourt Australia, Melbourne, pp.154-62.

This chapter is notable as its senior author is an experienced historian of medicine and therefore provides genuine insight and practical tips for health sciences students thinking of including history in their research. It is published in a key text for nursing research students.

Godden, Judith 2004, Bathsheba Ghost, Matron of the Sydney Infirmary 1852-66: A Silenced Life, *Labour History*, no. 87, November, pp.49-63.

This article is published in a leading refereed historical journal in Australia. It is notable as the first research report into the nursing and management personnel of Sydney Infirmary (Hospital) before the introduction of trained nursing. As such it busts the myths that abound about that era and Matron Ghost, and allows us to question the nature of the changes introduced by Nightingale style nursing.

Godden, Judith and Helmstadter, Carol 2004, Women's Mission and Professional Knowledge: Nightingale nursing in colonial Australia and Canada, *Social History of Medicine*, vol.17, no.2, August, pp.157-74. [IF 0.279]

This article is notable as the first published comparison of the introduction of Nightingale nursing in Canada and Australia. The two countries were the only ones where teams of nurses were sent for that specific purpose. It explores the concept of women's mission as it applied to nursing and specially argues that, while much of the attention was on the character of the nurses, the success of Nightingale nursing was due to its nurses' clinical competence.

Godden, Judith 2003, Matching the ideal? The first generation of Nightingale nursing probationers, Sydney Hospital, 1868-84, *Health and History*, 5:1, pp.22-41.

This refereed journal is the key journal in the history of medicine with a focus on Australia and the Pacific region. The article is notable in that it is the first published analysis of the detailed data about the nurses trained under the first Nightingale

matron in Australia, Lucy Osburn. The article is also notable in that the information analysed is highly relevant to understanding the labour history of women during the mid nineteenth century.

Godden, Judith 2001 A 'lamentable failure'? The founding of Nightingale nursing in Australia, 1868-84, *Australian Historical Studies*, 32:117, pp.276-91.

This journal is the premier refereed journal for Australian history. The article busts one of the main myths about nursing in Australia. That myth is that, after Florence Nightingale and the Nightingale Fund sent Lucy Osburn and her team of nurses to Australia, they considered she had successfully implemented the Nightingale system of nursing in this country. On the contrary, the article demonstrates that Florence Nightingale and her circle condemned Osburn as a failure, and continued to privately denigrate her for decades, and provides some reasons for this harsh reaction.

Harris E, Nutbeam D & Sainsbury P, Does our limited analysis of the dimensions of poverty limit the way we seek solutions? In Eckersley R, Dixon J & Douglas R, editors. *The Social Origins of Health and Well-being*. Cambridge University Press, Oakleigh, Vic., 2001.

Questions whether the ways we conceptualise, measure and analyse poverty inadvertently limit our capacity to find solutions both to poverty and to the poor health associated with it. Suggests five strategies to improve the situation: more appropriate research methods and models of understanding; more research emphasis on interventions; developing researcher, practitioner, community partnerships; health workers becoming more effective advocates for change; and judging success by narrowing the health gap between rich and poor.

Henderson D, Roedelsperger K, Woitowitz HJ, Leigh J, After Helsinki: a multidisciplinary review of the relationship between asbestos exposure and lung cancer, with emphasis on studies published during 1997-2004. *Pathology* 36: 517-550 (2004).

Major comprehensive review article on the asbestos/lung cancer relationship. Highly relevant to compensation/litigation/preventive policies on asbestos.

Henderson DW, Jones ML, de Klerk N, Leigh J, Musk AW, Shilkin KB, Williams VM, The diagnosis and attribution of asbestos-related diseases in an Australian context: Report of the Adelaide Workshop on Asbestos-related Diseases. October 6-7 2000. *Int J Occ Env Health* 10: 40-46 (2004).

Very influential document providing guidelines for compensation criteria for asbestos related diseases in Australia.

Hersey P, Coates AS, McCarthy WH, Thompson JF, Sillar RW, McLeod R, Gill G, Coventry BJ, McMullan A, Dhillon H, Simes RJ. Adjuvant immunotherapy of patients with high risk melanoma using vaccinia viral lysates of melanoma. Results of a randomized trial. *J. Clin. Oncol*, 2002, 20, 4181 - 4190. [IF 9.868]

Sydney Melanoma Unit is the largest melanoma treatment centre in the world. I was its research director, and was also the trial statistician for this large multicenter randomised clinical trial which failed to confirm the value of what had been a promising vaccine.

Holden CA, McLachlan RI, Pitts M, **Cumming RG**, Wittert G, Agius P, Handelsman DJ, de Kretser DM. Men in Australia, Telephone Survey (MATEs) I: A national survey of the reproductive health and concerns of middle aged and older Australian men. *Lancet* 2005; 366: 218-224.

This survey of nearly 6000 men was the first national survey of male reproductive health conducted anywhere in the world. The importance of the study is reflected in its publication in *The Lancet*.

Hughes AM, Armstrong BK, Vajdic CM, Turner J, Grulich AE, Fritschi L, Milliken S, Kaldor J, Benke G, **Kricker A**. Sun exposure may protect against non-Hodgkin lymphoma: A case-control study. *International Journal of Cancer* 2004; 112(5):865-71. [IF 4.416, citations 6]

The study was the first to show that sun exposure in individuals has a potentially beneficial effect on risk of cancer: risk of non-Hodgkin lymphoma was reduced in people who had higher levels of recreational sun exposure. We believe that vitamin D might be the explanation for these findings.

Investigators (includes **Keech, AC**) Effects of long-term fenofibrate therapy on cardiovascular events among 9795 people with type 2 diabetes mellitus (the FIELD study): a randomised controlled trial. *Lancet* 2005; 366 (9500): 1849–1861 [IF 21.713]

This is the largest trial of any treatment strategy in diabetes worldwide to date and by far the largest trial evaluating the role of improving HDL and triglycerides levels using a fibrates drug to prevent cardiovascular events. As such it is a landmark study internationally which is been much anticipated worldwide.

Irwig L, Bossuyt P, Glasziou P, Gatsonis C, Lijmer J. Designing studies to ensure that estimates of test accuracy are transferable. *BMJ* 2002; 324: 669-71. [IF: 7.209, citations 13]

Even if studies of diagnostic accuracy are of high quality, there are questions about how transferable the results are to other populations. This paper and the longer version in a book set out an approach to thinking about this issue.

Irwig, L, McCaffery KJ, Salkeld G, Bossuyt P (2006) Informed choice for screening: implications for evaluation. *BMJ* 2006; 332: 1148-1150.

This paper is the first to propose 3 values-based principles for decisions concerned whether screening should be introduced and once introduced, how it should be evaluated. The principles are new and likely to be controversial and the paper is positioned in the Education and Debate section of the BMJ. We believe it will raise much debate around the way screening is considered by both the public and providers.

Ivers RQ, Cumming RG, Mitchell P, Peduto AJ. Visual risk factors for hip fracture in older people. *Journal of American Geriatrics Society* 2003; 51: 356-363.

This was the first study of risk factors for hip fracture that included comprehensive measures of vision and eye diseases. The study found that poor vision was among the strongest risk factors yet identified for hip fracture, suggesting that improving access to eye care would help prevent this serious fracture.

Knox S, Britt H, Pan Y, Miller GC, Bayram C, Valenti L et al. *Locality matters: The influence of geography on general practice activity in Australia 1998-2004*. Canberra: Australian Institute of Health and Welfare; 2005. Available from: <http://www.aihw.gov.au/publications/index.cfm/title/10171>

This is the first detailed report of the characteristics of GPs, their patients and their work in metropolitan and rural areas, with the power to differentiate general practice activity between each level of rurality. The findings have implications for workforce planning, GP payment systems and population health care needs.

Kricker A, Haskill J, Armstrong BK. Breast conservation, mastectomy and axillary surgery in New South Wales women in 1992 and 1995. *British Journal of Cancer* 2001, 85: 668-73. [IF 3.742, citations 6]

We used routinely collected data in population health datasets to examine trends in surgical management of breast cancer in the whole NSW population. The only alternative method for measuring changes in breast cancer management is by time-consuming and expensive surveys of health practitioners; whole population coverage is particularly difficult to achieve in such tailored surveys.

Kricker A, Vajdic CM, Armstrong BK. Reliability and validity of a telephone questionnaire for estimating lifetime personal sun exposure in epidemiological studies. *Cancer Epidemiology Biomarkers Prevention* 2005 14: 2427-2432 [IF 4.5]

We have produced an extensive body of research on the adverse effects of sun exposure in causing melanoma and non-melanocytic skin cancer, despite the acknowledged complexity of measuring sun exposure. This paper sets out the methods used in the past 10 or more years in the course of developing quantitative, questionnaire-based methods to measure individual sun exposure that have been used in many studies worldwide.

Leeder SR, Corkhill RT, Irwig LM, Holland WW & Colley JRT. Influence of family factors on the incidence of lower respiratory illness in the first year of life. *Brit J Prev Soc Med* 1976; 30:203-212.

Concerns about the effects of parental smoking on the respiratory health of young children were increasing when this paper established for the first time the independent dose-response relationship between smoking in the home and respiratory illness in children aged 0 to 5 years in London. It lent additional weight to health promotion efforts to diminish exposure to second-hand smoke.

Leigh J, Davidson P, Hendrie L, Berry D, Malignant mesothelioma in Australia, 1945-2000 *Am J Ind Med* 41:188-201(2002).

Major documentation of mesothelioma incidence in Australia, based on complete national ascertainment. Relates incidence to asbestos exposure and provides predictions of future incidence. Widely cited in drawing attention to risks of asbestos nationally and internationally and in compensation, litigation, and preventive policies.

Leigh J, Driscoll T, Malignant Mesothelioma in Australia 1945-2002
Int J Occ Env Health 9:206-217 (2003).

Updated version of above but with more detail, including risk estimates in occupational / industry classes. Also widely cited in drawing attention to risks of asbestos nationally and internationally and in compensation, litigation, and preventive policies.

Leigh J, Robinson BWS The History of Mesothelioma in Australia 1945-2000 In: Mesothelioma (Robinson BWS, Chahinian P eds) London, Martin Dunitz (Taylor and Francis) (2002).pp 55-86.

Comprehensive review of the asbestos/mesothelioma problem in Australia as a whole, with Wittenoom as a special case. Sets Australian asbestos problem in world context and emphasises that Wittenoom only a small part of total problem. Major international textbook.

Li M, Eastman C. Working with funding agencies in the delivery of healthcare in the Asia Pacific region. *Med. J Aust.* 178(1): 13-16, 2003.

This paper discussed and reviewed Australians' experiences in working with funding agencies in the delivery of health services and combating major public health problems in our region.

Li M, Eastman CJ, Waite KV, Ma G, Zacharin M, Topliss DJ, Harding PE, Walsh JP, Ward LC, Mortimer R, Mackenzie E, Byth K and Doyle Z. Are Australians iodine deficient? The results of the Australian National Iodine Nutrition Study. *Med J Aust;* 184: 165-169, 2006.

This paper showed about half of the Australian school children were iodine deficient, which has become a major public health concern. The paper calls for mandatory iodine fortification of edible salt in Australia to protect our future generations from goitre and the more devastating consequences of iodine deficiency.

Li M, Ma G, Guttikonda K, Boyages S and Eastman C. The Re-emergence of Iodine Deficiency in Sydney, Australia. *Asia Pacific J of Clin. Nutr.* 10(3):200-203, 2001.

This paper sounded the alarm that Australian population could be iodine deficient. It also prompted the National Iodine Nutrition Study.

The LIPID Study Group (includes **Keech AC**). Long-term effectiveness and safety of pravastatin in 9014 patients with coronary heart disease and average cholesterol levels: the LIPID trial follow-up. *Lancet* 2002; 359: 1379-1387. [IF 21.713]

This paper is a demonstration paper of the value of long term follow up beyond completion of a randomised controlled trial. This demonstrates persistent advantage for patients randomised to active therapy during a cholesterol lowering trial over five years beyond the completion of the study. This is important as cancer and other safety events may occur in the long term but not during short term studies, it also demonstrates that the true cost effectiveness of treatment is far more favourable than that which would be assessed solely during the randomised phase of a trial.

Lloyd DM, Alexander HM, Callcott R, Dobson AJ, Hards GR, O'Connell DL & **Leeder SR**. Cigarette smoking and drug use in schoolchildren. III - Evaluation of a smoking prevention education programme. *International Journal of Epidemiology* 1983;12 :51-58.

When we conducted the trial of a school-based anti-smoking education program, enthusiasm was running high. We showed that the package that we tested did more harm than good. This added to a growing body of literature showing that such efforts need to be located within a comprehensive tobacco control strategy to be useful.

Loy C, **Irwig L**. Accuracy of diagnostic tests read with and without clinical information. A systematic review. *JAMA* 2004; 292: 1602-9.

This recently published systematic review of an important clinical question answers many questions about how subjective diagnostic tests should be read, and outlines an approach to the issue and further research directions that should be pursued. [IF 21.455]

Macaskill, P Empirical Bayes estimates generated in a hierarchical summary ROC analysis agreed closely with those of a full Bayesian analysis. *Journal of Clinical Epidemiology*, 2004, 57: 925-932.

This paper shows how the hierarchical summary ROC model can be fitted in a more straightforward manner, thereby making it more accessible to meta-analysts. This approach is being incorporated into the new Cochrane handbook for the systematic review of diagnostic studies.

Macaskill, P., Walter, S., **Irwig, L**. Assessing the gain in diagnostic performance when combining two dichotomous tests. *Statistics in Medicine* 2002; 21: 2527-2546.

The methods derived in this paper are starting to be adopted by researchers who wish to assess the gain in using two diagnostic tests in combination. The method takes account of conditional dependence between tests and also takes account of the effect on both sensitivity and specificity.

Macaskill P, Walter SD, **Irwig L**. A comparison of methods to detect publication bias in meta-analysis. *Statistics in Medicine* 2001; 20: 641-654.

This paper has been highly influential in identifying major deficiencies in the routinely used test for publication bias. The alternative test that we suggested has changed practice and stimulated further research, including our own further work on publication bias for diagnostic test accuracy studies. At present, it is the most highly cited paper published in this prestigious journal in 2001.

Marshall AL, **Booth ML**, **Bauman AE**. (2005). Promoting physical activity in Australian general practices: a randomised trial of health promotion versus hypertension management. *Patient Education and Counselling*, 56(3), 283-290.

This paper tested a novel approach to promoting physical activity in general practices, which had not been trialled previously.

McCaffery K.J, **Barratt A.**, (2004) Assessing psychosocial / quality of life outcomes in screening: how do we do it better? *Journal of Epidemiology and Community Health*, 58: 968-70. [IF: 2.836]

This paper highlights the methodological weaknesses in the design of studies to assess psychosocial / QOL outcomes of screening interventions. It is one of the first to draw attention to the need to assess psychological/QOL outcomes in the short, medium and long term among both the intervention and control arm by intention to treat.

McCaffery, K., Forrest, S., Waller, J., Desai, M., Swarewski, A., Wardle, J., (2003) Attitudes towards HPV testing: a qualitative study of beliefs among Indian, Pakistani, African Caribbean and White British women in the UK. *British Journal of Cancer*; 88(1):42-6. [IF: 3.742]

This was the first paper internationally to investigate a community sample's attitudes to HPV testing as part of cervical cancer screening and explore the potential psychological sequelae to testing positive for HPV. The study was also the first to include perspectives of women from contrasting ethnic minority groups.

Meiser B, Butow P, Friedlander M, **Barratt A**, Schnieden V, Watson M, Brown J, Tucker K. Psychological impact of genetic testing in women from high-risk breast cancer families. *European Journal of Cancer* 2002; 38:2025-2031. [3.302, 11]

This was the first study to provide data on the long-term outcomes of genetic testing at familial cancer clinics, showing that non-carriers of breast-cancer-associated genes derive psychological benefits from genetic testing. This has provided important evidence to aid the decision-making process regarding genetic testing.

Melchreit R, et al, **Birden H**; Prevalence of Hepatitis C Virus Infection Among Clients of HIV Counseling and Testing Sites - CT, 1999, *Morbidity and Mortality Weekly Report*, 2001;50(27);577-581.

Sexual risk factors for Hepatitis C had not been adequately evaluated or quantified at the time this research was undertaken. This paper contributed to the knowledge base by reporting that sexual activity alone does not seem to be an important risk factor in transmission of HCV.

Miller G, Britt H, Pan Y, et al. Relationship between general practitioner certification and characteristics of care. *Med Care* 2004; 42: 770-778.

This is the first international study of the relationship between general practitioner certification and the quality of subsequent care delivered to patients.

Mukamal KJ, Conigrave KM, Mittleman MA, Camargo Jnr C, Stampfer M, Willett W, Rimm EB. A prospective study of alcohol consumption and coronary heart disease in men: the role of drinking pattern. *New England Journal of Medicine*. 2003; 348. [IF 38.570, citations 132]

This paper reported for the first time the importance of pattern of drinking (not just total alcohol consumption) on the risk of ischemic heart disease in a cohort of 50,000 health professionals followed second yearly for 12 years. It was the first study to show that as little as one standard drink four times per week is associated with lower risk of ischaemic heart disease. In contrast to past findings of a linear association between alcohol consumption and reduced risk of ischemic heart disease, there was no increased benefit in drinking more than 30g per day. Episodic drinkers showed no evidence of a reduced risk of ischemic heart disease.

This paper is important in public health practice, because it is a topic of wide public interest and its publication has provided considerable opportunity to communicate with the public via the media, not just at the time of publication, but nearly every New Year since! Many members of the public, and also health and research professionals, see alcohol problems as an all-or-nothing phenomenon, as something that can only happen to "drunks" or those with weak characters. It allows the opportunity to explain the fine line between responsible (and potentially beneficial) drinking and hazardous or harmful drinking. Media liaison also allows communication of NHMRC guidelines on drinking, and in particular the real size of standard drinks which is poorly understood.

Oakes W, Chapman S, Balmford J, Borland R, Trotter L. "Bulletproof skeptics in life's jungle": which self-exempting beliefs about smoking most predict lack of intention to quit? *Prev Med* 2004;39: 776-82. [citations 2]

Simon Chapman coined the term "self-exempting beliefs" in a much cited paper published in 1994 for the range of common excuses smokers voice, despite often accepting that smoking causes harm. In this paper, he and his research colleagues extend this research, looking at how these beliefs cluster in three broad factors: "I am bulletproof" beliefs; "I don't believe the evidence" beliefs; and "Life is a jungle full of risks -- so why bother" beliefs.

O'Halloran J, Miller GC, Britt H. Defining chronic conditions for primary care with ICPC-2. *Fam Pract* 2004; 21: 381-386.

This is the benchmark paper defining chronic care in the community for the statistical study of management of patients in primary care.

Pacella Norman R, Urban M, Sitas F, Carrara H, Sur R, Hale M, Ruff P, Patel M, Newton R, Beral V. Risk factors for oesophageal, lung, oral and laryngeal cancers in

black South Africans. *British Journal of Cancer* 2002; 86: 1751-1756.

Provided contemporary data on the relative importance of smoking, alcohol and environmental factors in South Africa.

Parkin DM, Ferlay J, Hamdi-Cherif, **Sitas F**, Thomas J, Wabinga H, Whelan SL. *Cancer in Africa: Epidemiology and Prevention*. IARC Scientific Publications No. 153, International Agency for Research on Cancer, Lyon, 2003.

The book on cancer in Africa has compiled almost all the published and unpublished data from the continent.

Peat JK, Mhrshahi S, Kemp AS, Marks GB, Tovey ER, **Webb K**, Mellis CM, **Leeder SR**. Three-year outcomes of dietary fatty acid modification and house dust mite reduction in the Childhood Asthma Prevention Study *Journal of Allergy and Clinical Immunology* 2004;114:807-13.

The randomised trial of fish-oil and house dust mite abatement in the prevention of asthma among over 500 children who are at high risk of asthma is a landmark study. This is the report of results at three years. Findings showed no significant or clinically important effects of the interventions on respiratory outcomes at this approximate mid-point in the trial. A five-year follow-up will be published in late 2006. Much preventive strategy depends on the outcomes.

Pfeffer MA, **Keech AC**, Sacks FM, Cobbe SM, Tonkin A, Byington RP, Davis BR, Friedman CP, Braunwald E. Safety and tolerability of pravastatin in long-term clinical trials. *Circulation* 2002; 105: 2341-2346. [IF 11.164]

This paper reports the safety of cholesterol lowering treatment from another perspective meta-analysis on over 19,000 individuals. The safety of statin treatment is important as it is often permanent therapy in patients who have suffered from a cardiac event, and patients may be exposed to it for more than 40 years. This paper is most complete safety paper in the literature to date.

Phongsavan P, Olatunbosun-Alakija A, Havea B, **Bauman A**, **Smith BJ**, Galea G, **Chen J**, Members of the Health Behaviour and Lifestyle of Pacific Youth Survey Collaborating Group and Core Survey Teams. Health behaviour and lifestyle of Pacific youth surveys: a resource for capacity building. *Health Promotion International* 2005; 20:238-248.

This international collaborative study, involving UNICEF, the Australian Centre for Health Promotion and numerous government and non-government agencies, collected data for the first time on psychosocial and behavioural factors contributing to health needs among adolescents in the South Pacific. A unique feature of this project was its emphasis upon involving young people in the planning and implementation of population surveys.

Purdue MP, From L, Kahn HJ, **Armstrong BK**, **Kricker A**, Gallagher RP, McLaughlin JR, Klar NS, Marrett LD. Etiologic factors associated with p53

immunostaining in cutaneous malignant melanoma. *International Journal of Cancer* 2005 117: 486-93. [IF 4.416]

Queensland colleagues had proposed that sun exposure causes melanoma by 2 different pathways; their proposal was limited by the small numbers in their original study. Our findings in this paper are consistent with the Queensland study and extend their idea.

Qian M, Wang. D, Watkins WE, **Gebbski V**, Yan YQ, **Li M** and Chen ZP. The effects of iodine on intelligence: a meta-analysis of the studies conducted in China. *Asia Pacific J of Clin. Nutrition*, 14(1): 32-42, 2005.

This paper demonstrated the effect of iodine deficiency on the intellectual development and the benefit of iodine supplementation. It revealed the results of a meta-analysis of 37 research reports of total more than 12, 000 children from China that there were 12.45 IQ points lost of children exposed to severe iodine deficiency. Iodine supplementation to the mothers before or during pregnancy could recover 8.7 IQ points of the children.

Quine S. Health concerns and expectations of Anglo and ethnic older Australians. *Journal of Cross-Cultural Gerontology*, 1999, 14: 97-111.

Australia is a multicultural society in which the most rapidly aging groups are immigrants, many of whom can not speak English well. Minimal research has been conducted to identify ethnic variation in health concerns and expectations of older Australians from non-English speaking backgrounds, necessary to facilitate culturally appropriate services. This paper presents findings from a qualitative study of 12 focus groups (4 Anglo, 3 Italian, 2 Chinese, 2 Arabic, 1 Greek) with older (60+) Australians. Common areas of concern were inadequate medication information, labelling and instructions. Anglo participants differed from ethnic participants in their use of herbal remedies, language, relationship with pharmacist and doctor, and awareness of health rights. Other concerns and expectations were specific to a particular ethnic group. The findings should increase health professionals' awareness of the similarities and differences which exist between mainstream Anglo and ethnic Australians, and also between different ethnic groups, thereby avoiding the use of a blanket approach when communicating with, or planning policies for, ethnic older Australians.

Quine S., Morrell S. Food insecurity in community-dwelling older Australians. *Public Health Nutrition*, 9(2) 2006: 219-224.

Findings from an analysis of nutrition data collected in a large scale (n=8881) population survey of older people (65+) conducted by the epidemiology branch of the NSW Health Department. The analysis identified the proportion (2%) of older people in NSW who ran out of food in the last 12 months and were unable to afford to buy more, and their characteristics. The discussion highlights how older people living in the community on low incomes may go hungry in order to pay rent and bills, and that the prevalence of this form of food insecurity is likely to be under-reported in an elderly cohort.

Quine S., Kendig H. Stakeholders in policy research for older Australians. *Hallym International Journal of Ageing*, 1999, 1(2): 16-25.

This paper reports Australian experiences on ways in which universities and advocacy groups can bring the voices of older people to policy development. While government initiated consultancies have more commonly informed policy development, collaborative research by academic and advocacy stakeholders potentially can effectively represent the less powerful and less visible interest of vulnerable older people. A review of Australian applied research experiences, including 3 case studies, illustrates the interest and capacities of the stakeholders in conducting and using applied research. The power of the research funders, the timetables for and openness in the research process, and communication among stakeholders, are key influences on the body of knowledge available for policy development. Whoever sets the research questions in the funding process has the major influence on the eventual findings of studies. Recommendations are made to facilitate collaborative research, which is both meaningful and beneficial to older people.

Quine S., Kendig H., Touchard D., Russell C. Health promotion for socially disadvantage groups: the case of homeless older men. *Health Promotion International*, 2004, 19(2): 157-165.

This paper examines the scope and relevance of health promotion for one disadvantaged minority with extensive health needs: homeless older men living in an inner city. Observations and semi-structured interviews were conducted. in an ethnographic study of 32 older men (50+) living on or below the poverty line. Findings highlight the extent to which these men lack the basic requirements for healthy ageing, notably adequate incomes and housing. However within the constraints of the lifestyle they lead, they are motivated to maintain their health and independence. While there are limits to what can be achieved for such people at a local level of service delivery, it is possible to identify feasible health promotion goals and service strategies.

Raymond SU, Greenberg HM, Leeder SR. Beyond Reproduction: Women's Health in Today's Developing World *International Journal of Epidemiology* 2005; 34:1144-1148.

Traditionally, concerns for women's health have been restricted to infectious and obstetric causes of death. These conditions account for a relatively small proportion of mortality and morbidity in women of reproductive age. This paper advances evidence to redress this unbalanced emphasis and will prove to be highly controversial and probably unpopular as it challenges prevailing orthodoxy.

Robotin M. Evaluation of the Australian CJD surveillance system. *Commun Dis Intell.* 2002; 26(2):265-72.

Recommendations were made for improving the sensitivity and timeliness of reporting and explored issues around making CJD a notifiable disease (which occurred subsequently).

Robotin MC, Copland J, Tallis G, Coleman D, Giele C, Carter L, Spencer J, Kaldor J, Dore G. Surveillance for newly acquired hepatitis C in Australia, 1997-2001. *J Gastroenterol Hepatol* 2004; (19): 283-288.

Found that only a very small proportion HCV cases were identified as newly acquired and recommended the implementation of enhanced surveillance procedures in order to effectively monitor recent patterns of transmission.

Robotin MC, Law M, Milliken S, Garsia R, Goldstein D, Dolan G, Grulich A. Clinical characteristics and determinants of survival following AIDS- NHL in a population-based cohort in Sydney, *Australia HIV Medicine* 2004; (5): 1-8.

Found a marked improvement in survival and a changed clinical picture for systemic Non-Hodgkin's lymphoma (NHL) during the era of modern therapy, in contrast with the unchanged clinical picture and poor outcome for primary central nervous system NHL in people infected with HIV.

Russell, R.C. Ross River virus: Ecology and Distribution. *Annual Review of Entomology* 2002, 47: 1-31. [IF 6.887]

Has been widely accessed and cited.

Sainsbury P, Guest Editorial. The pursuit of happiness: the politics of mental health promotion, *Australian e-Journal for the Advancement of Mental Health*, 2003, 2, 1, <http://auseinet.flinders.edu.au/journal/vol2iss1/Sainsbury.pdf>

Places mental health promotion (the generation of happiness, wellbeing, etc.) in a social and political context. Invites readers to examine 'what sort of society do we want to live in?' and presents some challenges for the public health workforce if it is to influence the social and political issues that influence individuals' and communities' mental health.

Sainsbury P, Australia-United States Free Trade Agreement and the Australian Pharmaceutical Benefits Scheme, *Yale Journal of Health Policy, Law and Ethics*, 2004, IV, 2, pp 387-99.

Presents a description and analysis of the negotiations and public statements regarding the Australian Pharmaceutical Benefits Scheme during the development of the Australia-United States Free Trade agreement in 2003-04. Describes some lessons for 'public health' and makes a call for broadening the skills of public health workers if they wish to engage in the development of health promoting government policy, particularly where it involves international relations.

Salkeld G, Cameron ID, **Cumming RG**, Easter S, Seymour J, Kurrle SE, **Quine S**. Fear of falling and hip fracture related quality of life - measuring the preferences of older women: a time trade-off study. *British Medical Journal* 2000; 320:341-346 .

This paper on quality of life post hip fracture has been cited 61 times and was the first paper in the area to comprehensively measure quality of life amongst older women participating in a hip fracture prevention trial.

Salkeld G, Quine S, Cameron I. What constitutes success in preventive health care? A case study in assessing the benefits of hip protectors. *Social Science and Medicine*, 2004, 59: 1593-1601.

This health economics paper outlines the nature of the ex ante and ex post perspective in evaluating benefits and the presence of process utility and the utility of gambling in individual's utility function for preventive health care. Using the example of wearing hip protectors, we argue that the utility associated with adherence to the intervention is an important issue for preventive health policy. From the view point of applied welfare economics, evaluation of preventive health programs should allow for both process and outcome utility when assessing benefits. In this context, success might be viewed as maximising the opportunity for individuals to make an informed choice.

Salkeld G, Solomon M, Butow P and Short L. Patient preferences for the surgical management of colorectal cancer: discrete choice experiment. *British Journal of Surgery* 2005, 92:742-747.

This paper is the first to apply a benefit estimation technique, discrete choice experimentation (DCE), to the management of colorectal cancer.

Schofield, Deborah (2000), Public Hospital expenditure: How is it Divided Between Low, Middle and Upper Income Groups? *The Australian Economic Review*, vol. 33, no.4, pp. 303 316.

While this paper has only been cited once in a peer-reviewed journal it and others have been influential in parliamentary deliberations. For example, Bills Digest No. 13, 1999-2000 National Health Amendment (Lifetime Health Cover) Bill 1999, cited the paper to show how the value of community rating of private health insurance: "community rating was not only protecting people in poorer health from the high cost of risk-rated premiums, it was also redistributing benefits from low-risk groups to high risk groups. In addition, the study found that community rating had produced a redistribution of resources from the wealthier members of health funds to the poorer members, with members in the lowest income group receiving about three times the benefits of members in the highest income group. This occurred both among young and older members".

Schofield Deborah, Beard John (2005), Baby boomer doctors and nurses: demographic change and transitions to retirement, *The Medical Journal of Australia*, vol 183, no. 2, 18 July, pp 80-83.

This paper received widespread media coverage and is now influencing governments' approach to policy. For example, it has been used by for the NSW Health Futures to 2025 project, the Productivity Commission health workforce inquiry, a submission to COAG on the health workforce and the North Coast Area Health Service. The MJA has an impact factor of 2 and the paper and press release are the second and third sites

respectively found on a google search on "nurse baby boomer retirement" or "doctor baby boomer retirement".

Schofield, Deborah and George Rothman (2006) Projections of Commonwealth Health Expenditure in Australia's First Intergenerational Report, Ed Harding et al., International Symposium of Economic Theory and Econometrics series, North Holland (in press).

The Intergenerational report (IGR) has fundamentally altered the way the Australian Government plans policy expenditure, especially for health care. Early work in preparation for the IGR was reported by the OECD and the IGR has influenced the approach to long-term estimates of health spending and budgetary pressures in OECD countries. The Intergenerational Report has been referred to by the Treasurer as a landmark budget paper and by the Prime Minister as the most influential publication to come out of government in recent years.

Simpson JM, Evans N, Gibberd RW, Heuchan AM, Henderson-Smart DJ. Analysing differences in clinical outcomes between hospitals. *Qual Saf Health Care* 2003; 12: 257-262.

This paper reports on new methods for examining differences in outcomes using empirical Bayes methods to allow for sampling variation.

Sitas F, Pacella-Norman R, Carrara H, Patel M, Sur R, Jentsch U, Hale M, Rowji P, Saffer D, Connor M, Bull D, Newton R, Beral V. The spectrum of HIV-1 related cancers in South Africa. *International Journal of Cancer*, 2000; 88: 489-492.

The largest study on HIV and cancer in Africa.

Sitas F, Urban M, Bradshaw D, Kielkowski D, Bah S, Peto R. Tobacco attributable deaths in South Africa. *Tobacco Control* 2004; 13:396-399.

The first study to measure tobacco attributable mortality by inserting questions on smoking on the national death certificate.

Sitas, F et al. International Collaboration of Epidemiological studies on Cervical Cancer. Carcinoma of the Cervix and Smoking: Collaborative reanalysis of individual data on 13,541 women with carcinoma of the cervix and 23,017 women without carcinoma of the cervix from 23 epidemiological studies. *Int J Cancer*. 2005. In Press.

One of the largest data sets came from the South African study I set up, contributing about 10% of all international data.

Smith B, Bauman A, Bull F, Booth M, Harris M. Promoting physical activity in general practice: a controlled trial of written advice and information materials. *British Journal of Sports Medicine* 2000; 34: 262-267.

The findings of this study, concerning the impact of minimal interventions to increase physical activity in primary care, have informed several systematic reviews of this

area of research. This includes the recent US Preventive Services Task Force Review on behavioural counselling to promote physical activity.

Smith BJ, Cheung NW, **Bauman AE**, Zehle K, McLean M. Post-partum physical activity and related risk factors among women with recent gestational diabetes mellitus. *Diabetes Care* 2005; 28: 2650-4.

Women with a history of gestational diabetes are at elevated risk of developing type 2 diabetes later in life and can be identified through antenatal screening. This article, published in a high impact journal, is one of the first to present the post-partum risk factor profile of this group, providing a foundation for appropriate diabetes prevention strategies.

Smith BJ, Marshall AL, Huang N. Screening for physical activity in family practice: evaluation of two brief assessment tools. *American Journal of Preventive Medicine* 2005; 29: 256-264.

This article presents a comprehensive evaluation of brief physical activity assessments that are an important tool for chronic disease prevention in primary care. One of the assessments evaluated in this study has been adopted in the medical software programs used by Australian GPs.

Sniderman AD, Furberg CD, **Keech AC**, Roeters van Lennep JE, Frohlich J, Jungner I, Walldius G. From plasma lipids to lipoprotein lipids to apoproteins: Time to extend the paradigm. *Lancet* 2003; 361: 777-780. [IF 21.713]

This paper has been widely regarded. It challenges the current evaluation of lipid profiles in patients at risk and demonstrates that other lipoproteins in the blood are better predictors of risk than cholesterol and LDL cholesterol. Whilst it maybe ahead of its time I suspect that in years to come the markers proposed to be measured routinely will be adopted world wide.

Spencer J, Dore G, **Robotin M**, Correll P, Kaldor J. Outcomes from the first two years of the Australian hepatitis C surveillance Strategy. *Commun Dis Intell.* 2002; 26(1):14-22.

Discussed challenges and opportunities arising from early experience with the implementation of the HCV surveillance and identified some of the barriers to implementation.

Taylor LK, **Simpson JM**, **Roberts CL**, Olive E, Henderson-Smart DJ. Risk of complications in a second pregnancy following caesarean section in the first pregnancy – a population based study. *Med J Aust.* 2005; 183: 515-9.

This article was given much media coverage when it appeared. It shows that women should consider the possible implications for subsequent pregnancies when they make the decision to have their first baby delivered by caesarean section.

Trevena LJ, Clarke RM, Self-directed learning in population health - A clinically relevant approach for medical students, *Am J of Preventive Medicine*, 22 (1): 59-65, 2002. [IF 3.256, citations 7]

Has helped to inform the further development of the USydMP curriculum and has been cited by US and UK educators in the public health area. It has also led to educational consultancy with NSW Health Public Health Officer training program.

Trevena LJ, Davey HM, Barratt A, et al. A systematic review on communicating with patients about evidence, *J of Evaluation in Clinical Practice*, 2006, 12 (1): 13-23. [IF 1.562]

Has generated discussion with NHMRC Health Advisory Committee working group on same topic.

Trevena L, Sainsbury P, Henderson-Smart C, Clarke R, Rubin G, Cumming R. Population Health Learning Outcomes for Medical Students: A curriculum framework for tomorrow's doctors. *American Journal of Preventive Medicine*, 2005, 29, 3, pp234-39. [IF 3.256]

Describes aspects of the development of the teaching program for the Community and Doctor Theme in the University of Sydney's Graduate Medical Program. Emphasis is given to the presentation of population health in a clinically relevant and engaging manner, the clear articulation of learning outcomes and the development of eight essential questions that students use to learn about population health. Has generated discussion with International Network of Public Health Educators via American Medical Association.

Vagg R, Chapman S. Nicotine analogues: A review of tobacco industry research interests. *Addiction* 2005;100: 701-12. [citations 2]

This paper was produced after reviewing internal tobacco industry documents concerning the development of "nicotine analogues" by the tobacco industry. One of the purposes of this research was to anticipate possible government regulation of nicotine. Artificial nicotine-like substances added to tobacco would be one way of circumventing such regulation, while allowing the industry to keep smokers addicted.

Vajdic CM, Krickler A, Giblin M, McKenzie J, Aitken J, Giles GG, Armstrong BK. Sun exposure predicts risk of ocular melanoma in Australia. *International Journal of Cancer*. 2002, 101:175-82. [IF 4.416, citations 19]

Previous studies examining sun exposure and ocular melanoma have produced inconsistent results. We studied this association in a population-based case-control study nationwide in Australia and established, in this paper, that sun exposure increases the risk of ocular melanoma in Australia.

Vineis P, Alavanja M, Buffler P, Fontham E, Franceschi S, Gao YT, Gupta PC, Hackshaw A, Matos E, Samet J, Sitas F, Smith J, Stayner L, Straif K, Thun MJ, Wichman HE, Wu AH, Zaridze D, Peto R, Doll R. Tobacco and cancer: recent epidemiological evidence. *Journal of the National Cancer Institute* 2004; **96: 99-106.**

Amassing all the evidence on smoking and cancer since 1986: A paper based on the most recent International Agency for Research on Cancer Working Group findings.

Wallace C, **Leask J**, **Trevena LJ**. A web-based decision aid pilot improves parental attitudes to MMR vaccination. *British Medical Journal* 332 (7534): 146, 2002. [IF 7.209]

Major international journal, now a spin-off collaborative project with UK researchers in Leeds.

Waller, J., **McCaffery, K.**, Forrest, S., Wardle, J., (2004) Human papillomavirus (HPV) and cervical cancer: issues for biobehavioural and psychosocial research. *Annals of Behavioural Medicine*. 27 (1): 68-79.

This was the first review paper to draw together the literature on the psychosocial issues of HPV infection. It raised the potential difficulties faced by cervical cancer screening providers, the urgent need for information to inform women about HPV and highlighted key areas for further research.

Webb K, Hawe P and Noort M. Collaborative intersectoral approaches to nutrition in a community on the urban fringe. *Health Education and Behaviour*; special issue on Policy and System Level approaches to health promotion in Australia. 2001; 28(3) 45-50.

This article describes the development, implementation and reflections on a 10 year, award winning health promotion project to alter the food and nutrition environment in the Penrith Community.

Webb K, Lahti Koski M, Rutishauser I, Knezevic N, Gill T, Peat J, **Leeder SR**. The consumption of 'extra' foods (energy-dense, nutrient-poor) in the diets of Australian children from western Sydney aged 16-24 months. *Public Health Nutrition*. In press.

This article describes a unique analysis of detailed dietary assessment (weighed food records) of over 400 toddlers, a group on whom few dietary data are available. The article reports that snacks and other extra foods and sweetened beverages supply nearly one-third of the daily energy of this group, in contrast to the recommendation to limit such foods to 10% of energy intake. The article is relevant to the issue of addressing childhood obesity.

Yach D, **Leeder SR**, Bell J, Kistnasamy B. Global chronic diseases *Science* 2005;307:317. [IF 23.872]

The emerging role of chronic disease as the major threat to global health is presented, clearly and powerfully, in this paper. Conversations about global health are moving slowly to incorporate this perspective.