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Bacterial cystitis in women

Dear Editor

Thank you for your excellent journal, and thank you to Amanda Chung et al for the article 'Bacterial cystitis in women' (*AFP* May 2010).

I would like to add some personal observations from general practice that may be of interest to other GPs.

First, noninfective urinary symptoms are common and becoming more so, often as part of a fibromyalgia symptom complex of muscle pain and tenderness, irritable bowel symptoms, fatigue and urinary urgency and frequency. Urgency and frequency are also not uncommon in stress related problems.

Second, as a preventive measure in recurrent cystitis, postcoital voiding may be worth a try. However, I believe that the decades old recommendation of wiping from front to back has no proven validity, and perpetuates the myth that urinary tract infections are somehow related to poor personal hygiene.

Dipstick testing has been quite adequate for test of cure in at risk groups of women. With the current prevalence of chlamydia infection, especially in the younger sexually active population, I have found it can be a good idea to suggest a urine polymerase chain reaction (PCR). It is possible to obtain a first pass urine and a midstream sample at the same time. A chlamydia PCR is also worth doing in those occasional instances of sterile pyuria.

I appreciate the mention of alkalinizing agents and yoghurt as preventive measures. A long term alkalinising diet and a high quality probiotic supplement can be even more helpful, especially where there is a history of antibiotic use and recurrent infections.

Anthony Balint
Yarra Junction, Vic

General practice research

Dear Editor

I heartily endorse the need desirability for general practice research (*AFP* May 2010).¹ Research

allows us to know:

- What we do – Australian GPs do far more than they realise
- How we do it – Australian GPs have more skills than they realise
- Who we do it for – each GP's practice is different, sometimes significantly different, from their colleagues' practice population
- When we do it – effective use of time is an important general practice skill and often it is not the short, one-off intervention but long term treatment, advice and support that improves people's lives.

By measuring what we do, it allows us to constantly improve to meet evolving challenges with developing resources.

General practice computerisation is one of the amazing success stories of Australia but its potential is vast and underutilised. Analysing and understanding the incredible store of data locked away in general practice systems would significantly advance the science and art of general practice.

I believe this would be a major contribution that could be undertaken by our students and registrars as part of their learning and understanding.

Chris Hogan
Sunbury, Vic

Reference

1. Magin P, Pirotta M, Farrell E, Van Driel M. General practice research – training and capacity building. *Aust Fam Physician* 2010;39:265.

Rural generalist

Dear Editor

I would like to reassure Dr Tomas (*AFP* March 2010) that the rural generalist is alive and well and only 90 minutes down the road from him! In our town we provide general anaesthesia, deliver babies (including forcep and caesarean sections) and provide significant in-patient and emergency care. And we're not that 'old' (I'm in my mid 30s)! There's plenty of satisfying work if he's interested!

Glenn Pereira
Forbes, NSW

Publishing standards

Australian Family Physician notes that the editors of *Canadian Family Physician* have retracted an article 'Common colds. Causes, potential cures, and treatment', by Dr H Saroea, published in 1993, because it was found to be substantially similar to an article by Professor Chris Del Mar 'Managing viral upper respiratory tract infections', published in *Australian Family Physician* in 1991.^{1,2}

We would like to thank the *Canadian Family Physician* editor, Dr Nicholas Pimlott, for his efforts in carrying out an investigation into concerns of plagiarism and taking this appropriate action in accordance with the Committee on Publication Ethics (COPE) guidelines. *Australian Family Physician* is a member of COPE, and follows COPE guidelines when dealing with issues relating to the contravention of publishing ethics. Information about COPE and publishing ethics can be found at <http://publicationethics.org/about>.

Jenni Parsons
Editor in chief

Australian Family Physician

References

1. Saroea HG. Common colds. Causes, potential cures, and treatment. *Can Fam Physician* 1993;39:2215–20.
2. Del Mar C. Managing viral upper respiratory tract infections. *Aust Fam Physician* 1991;20:557–61.

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