

Highlights of this edition

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A DIFFICULT JOB

Brigadier Alistair Macmillan reflects on 203 years of Director Generals (DGs) as the Army Medical Services gets used to not having a doctor at its helm. He charts the history of the post and highlights some of the giants who have served in that role over the years. The challenges faced by the DG in the past appear remarkably similar to those that are faced currently.

ARTHRITIS AND STILL SERVING

The review by Wg Cdr Bennett and colleagues at the Defence Medical Rehabilitation Centre (DMRC) at Headley Court is one of three offerings from that institution in this edition which reminds us that their work involves more than post-injury rehabilitation. Bennett reports the results of biological drug therapy in a small but important cohort of serving

soldiers and examines the issues regarding their safety and efficacy. Most importantly he records DMRC's success in maintaining what are often valuable senior soldiers in useful military employment.

RECRUITS SMOKE

Bray *et al* report what is now a largely historical cohort of military recruits. Whilst little can be inferred about current smoking habits an analysis of over 10 000 soldiers and the changes over time and correlations with social status represent important information for our current public health consultants. Perhaps it is no surprise that those with lower educational attainment and from more deprived backgrounds smoke more but the fact that most of those who 'start' smoking after recruitment were ex-smokers is of interest.

HELPING THEM TO HELP THEMSELVES

One of the hallmarks of the campaign in Afghanistan has been the investment in Personal Protective Equipment and the constant evolution that has occurred in

response to identified threats. Breeze identifies another area of concern, namely protection of the neck. He reports that less than one third of injured personnel were wearing their Under Body Armour Combat Shirt with the neck zipped up because of discomfort from the zip and getting too hot and proposes a novel modification to improve compliance and ballistic protection.

AND FINALLY ...

Accompanying this first edition produced by BMJ Journals, is a landmark supplement which examines the evidence- or lack of it—regarding the management of the typical devastating injury produced by Improvised Explosive Devices (IEDs) in Afghanistan. It contains contributions from urology, endocrinology, plastic surgery, psychology, rehabilitation medicine and others, all of whom contribute to the ongoing care of those with perineal trauma. I commend this supplement to anyone who has anything to do with the care of victims of IEDs.

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