of the Internet as a means for meeting sexual partners and acquiring syphilis (Journal of the American Medical Association, 2000, 284: 447–449). In a case–control study, infected individuals were almost four times as likely to have met their sexual partners in an Internet chat room, an electronic forum which allows the exchange of messages via computer, compared to a non-infected control group of homosexual men who presented to a clinic.

The study highlights some important points that need to be considered for public health interventions amongst risk groups with access to the Internet. Since the outbreak occurred amongst homosexual men who met their partners through a chat room partner information was in most cases limited to fictitious “screen names”. For potential legal and privacy reasons, the Internet Service Provider refused to release the names of the individuals using the chat room without a legal order. To circumvent this, an awareness campaign was initiated with the cooperation of the Internet Service Provider.

For two weeks, a San Francisco marketing firm accessed the chat room by sending electronic messages giving advice to persons with sexual contacts to seek medical evaluation. The San Francisco Department of Public Health also sent messages to the screen names to notify partners of their possible exposure to syphilis. The syphilis control efforts during late July 1999 resulted in an 18% increase in the number of homosexual men evaluated at the San Francisco Department of Public Health City Clinic in early August compared to the month of July. Seventy one per cent of individuals who responded to a questionnaire thought that the awareness campaign was appropriate.

Dr Jeffrey Klausner, head of the Sexually Transmitted Diseases Unit of the San Francisco Department of Health and one of the coauthors of the study, informed the Bulletin: “The Internet has become a valuable source of information on health and disease for individuals and a new opportunity for health promotion and disease prevention activities. Ultimately, the balance between increased social connectivity and disease transmission versus health promotion and prevention activities will dictate the effect the Internet has on public health.” He added: “In locales where Internet use is common, those who are engaged in improving public health should assess Internet use and collaborate with local Internet Service Providers to promote health and prevent disease.”

Barry Whyte, Bulletin

**New fly trap may reduce prevalence of blindness from trachoma**

Home-made fly traps using old plastic bottles and faces may significantly reduce the prevalence of trachoma, a disease that is a major cause of blindness in the developing world. Results of tests of the devices in Kenya have shown the traps can reduce household fly populations by almost half, and the numbers of cases of trachoma by more than one-third.

According to the World Health Organization, which three years ago launched a programme to eliminate trachoma by 2020, the disease has resulted in blindness in around six million people in the world. Trachoma is a bacteria-related infection that is one of the world’s leading causes of blindness. Cumulative attacks by *Chlamydia trachomatis* result in local tissue inflammation and a sticky mucous is produced. This can lead to a tightening of the eyelid, making it bend inwards, and the eyelashes may damage the surface of the cornea. In some cases, this may lead to eventual blindness.

The latest technique, the development of which was supported by the Royal College of Surgeons in Ireland, is based on an original idea from Professor David Morley, a retired specialist in tropical child health at the Institute of Child Health in London, and Dr Michael Elmore-Meegan of the International Community for the Relief and Development of Starvation and Suffering (ICROSS). The device uses two transparent drink bottles, mounted one above the other, to create a fly trap and exploits the concept that once they have had a meal, flies almost always fly upward and towards the brightest available light.

In the trap, the flies are first lured through the fly ‘ports’ into the bottom bait bottle, which is covered with mud so that it is dark on the inside, or with dark paint poured in and distributed evenly by twisting the bottle. The bait in this lower bottle is early morning breastfed baby’s stool and urine or milk that has gone sour. After eating, the flies move up through a tube attracted by the light emitted from the transparent bottle above which must be small ventilation slits or holes. Once in the upper bottle, the insects will stay until they die of exhaustion.

After a year long trial of the traps in 300 Maasai homes in Kenya, researchers reported that the fly population decreased by 40%. At the same time, the number of cases of trachoma decreased by 36%.

One big advantage of the traps, if they do prove to be effective in the long term, is that they are cheap to produce. According to Professor Morley, Maasai children were able to make the traps as part of a homework project at very low cost.

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**Correction**

In Vol. 78, No. 8, on pages 1062–1063, several errors occurred in the news item Deficiencies in immunization campaigns highlighted in new UNICEF report, for which we apologize.

The corrected sentences are given below:

Page 1062, first paragraph: The impression was given that efforts exist to eradicate diphtheria, pertussis, and tetanus. The first sentence should read: “... immunization programmes aimed at the control of diphtheria, pertussis, and tetanus and the eradication of poliomyelitis are still failing to reach many children, leaving them at risk of catching these diseases”.

Page 1062, second paragraph: Vaccination efforts were mistakenly attributed solely to UNICEF. The second sentence should read: “… is still lagging behind the goals of the organization and its partners…”.

Page 1063, first paragraph: Poliomyelitis eradication efforts were mistakenly attributed solely to UNICEF. The first sentence should read: “... Among its efforts, UNICEF and partners have set about an ambitious agenda to eradicate poliomyelitis... Despite these efforts, the report makes clear that these and similar tasks will not be easily achieved”.

Page 1063, paragraph 4: The text mistakenly indicates that diphtheria, pertussis, and tetanus vaccine is administered to mothers. The second sentence should read: “... while diphtheria, pertussis, and tetanus vaccine can be easily administered by immunizing children, the vaccine...”.

Page 1063, fifth paragraph: Vaccination efforts were mistakenly attributed solely to UNICEF. The first sentence should read: “UNICEF and partners have set a goal of immunizing 90% of children in all countries...”.

Page 1063, paragraph 7: The timing of the administration of diphtheria, pertussis, and tetanus vaccine is incorrect. The second sentence should read: “… administered at the ages of 6,10 and 14 weeks…”.

Page 1063, paragraph 10: The value of US$ 750 is incorrect. The sentence should read: “...the commitment of US$ 750 million by the Bill and Melinda Gates Foundation...”.

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Roger Dobson, Abergavenny