

WOLFSON INSTITUTE OF POPULATION HEALTH NEWSLETTER ISSUE 79: 3 July 2025

In this issue of our Wolfson Institute of Population Health Newsletter, we celebrate the achievements and work of staff and students in the second half of June.

FROM OUR DEPUTY DIRECTOR

Dear Colleagues

I hope you are keeping cool! With conference season in full swing, take a moment to read about the fantastic diversity of WIPH research this month. We are sharing important findings, at conferences in Aarhus, Oslo, Newport, East Anglia and at home in East London (congratulations to Maria Turri for another fantastic Mad hearts festival!), and from Priya Bhide's work on IVF, the secret life of the spleen, renal function in covid, impact of pay on performance, to institutional racism in inpatient care, eco-anxiety, and clinical pharmacist perspectives on dementia care.

Congratulations to Veline L'Esperance, who attended the Windrush Day Reception at 10 Downing Street; Peter Sasieni, Jo Waller, Matejka Rebolj, and Laura Marlow, on the news that HPV self-sampling is to be offered under new NHS 10-year Health Plan, Jack Cuzick for the CRUK Outstanding Achievement in Cancer Prevention Research Award, and to all those whose important, impactful work you can read about here.

With best wishes

Claudia



MEET WIPH

MEET – PRIYA BHIDE (Clinical Reader, CPHP)

How would you describe your roles and responsibilities?

I am a medical doctor, obstetrician and gynaecologist (O+G), now working exclusively in in-vitro fertilisation and reproductive medicine in my clinical role (~50%) and as a clinical reader in my academic role (~50%). I enjoy both research and teaching: I co-lead the O+G module for the MBBS programme and supervise clinical trainees and PhD students, and am involved in research related to women's health, specifically fertility. I am also a member of the international editorial board for AOGS, the Scandinavian journal of O+G.

What has been your greatest professional achievement?

As a clinical academic I am proud to have led and completed an international multi-centre IVF RCT, that was then published in the Lancet.

What aspects of your role do you enjoy the most?

I truly enjoy the academic conversations, stimulating discussions, methodological intricacies, disagreements, healthy arguments and (sometimes) adrenaline fuelled submission deadlines that form a part of any research project!

What would be your second choice as a profession?

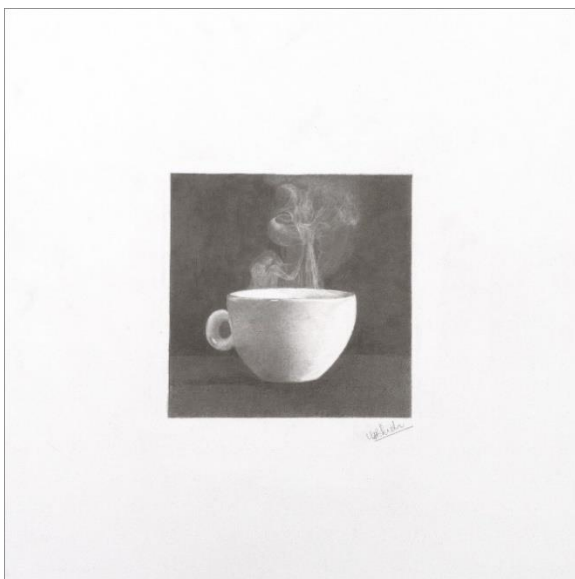
I chose to study medicine because it was considered a good choice for a student with good academic ability at the time and place (Mumbai, India). I loved it and will never regret this choice - but I enjoyed languages and art very much! I think I would have loved to also be an artist or a journalist. A downside: my husband said he may not have married me if I was a journalist - he thinks them to be too nosy!!

What do you enjoy doing outside work?

I enjoy artwork - graphite, charcoal and paints. I also enjoy a good novel, am an experimental gardener, experimental creative cook, and a chocoholic!

Something most people don't know about you?

I joined a degree in architecture for a few months - then I found it hard to refuse an offer from one of the best med schools in India.

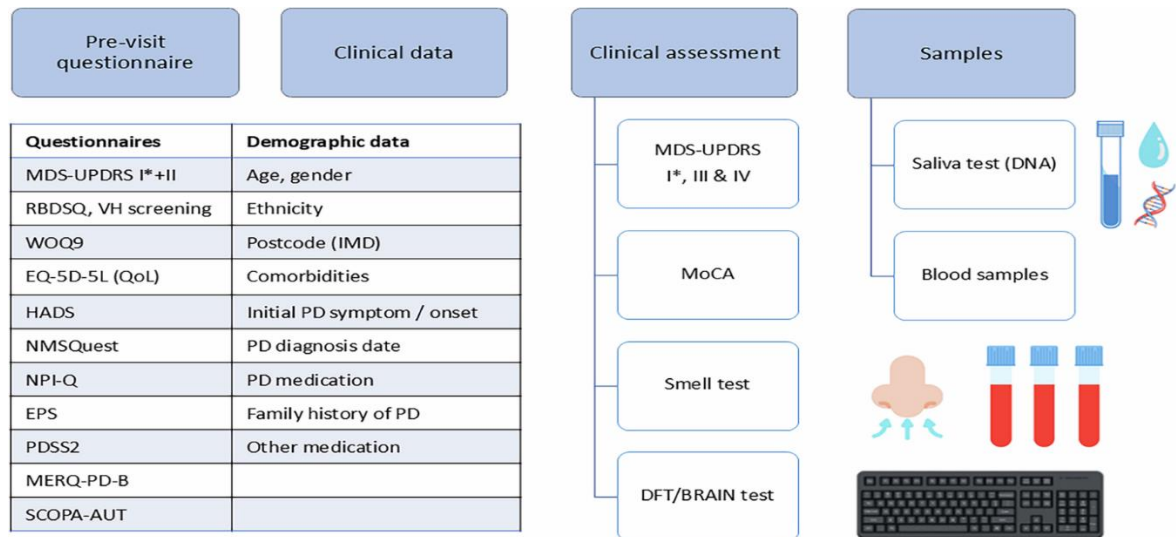


GENERAL INSTITUTE NEWS

The East London Parkinson's disease project

17 June (Alexandra Zirra, Kamalesh Dey, Ellen Camboe, Sheena Waters, Tarina Haque, Brook Huxford, Harneek Chohan, Natalie Donkor, Cristina Simonet, Charles Marshall, Alastair Noyce. Centre for Preventive Neurology)

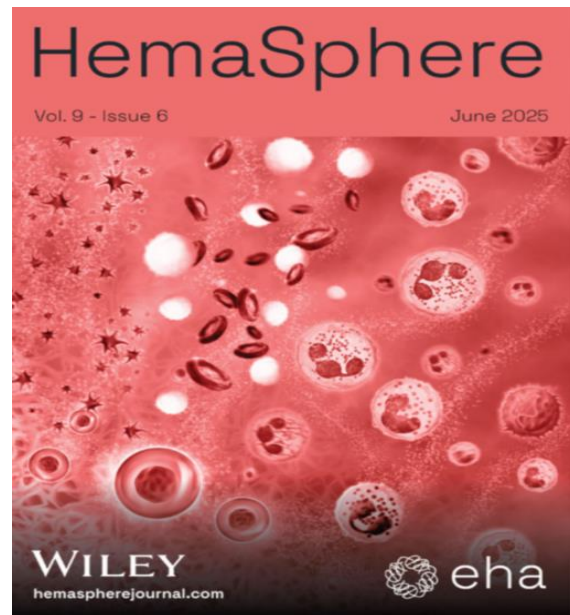
To understand clinical manifestations and determinants of Parkinson's Disease in a diverse population, the E. London Parkinson's Disease project collected data on clinical features in 218 PD patients and 90 controls, in which 50% and 64% respectively identified as South Asian or Black. Results showed that S. Asian and Black patients had significantly worse motor scores than White patients, and cognitive impairment was more prevalent in S. Asian and Black patients than in White patients.



The secret life of the spleen in sickle cell disease

17 June (Stephen Hibbs. Centre for Primary Care)

The role of the spleen in sickle cell disease is complex, with hyposplenism commonly observed, but also paradoxically co-existing with features of hypersplenism, splenomegaly, and acute splenic sequestration. In an article in HemaSphere, authors survey the established and emerging roles of the spleen, current methods of assessing splenic function, and why these assessments could be valuable in the management of SCD, particularly in resource-constrained settings. They conclude that development of better tools for splenic function measurement would offer significant value.



Impact on recruitment of a shortened participant information leaflet

18 June (Laura Miller, Thomas Hamborg, Clare Relton. Centre for Evaluation and Methods)



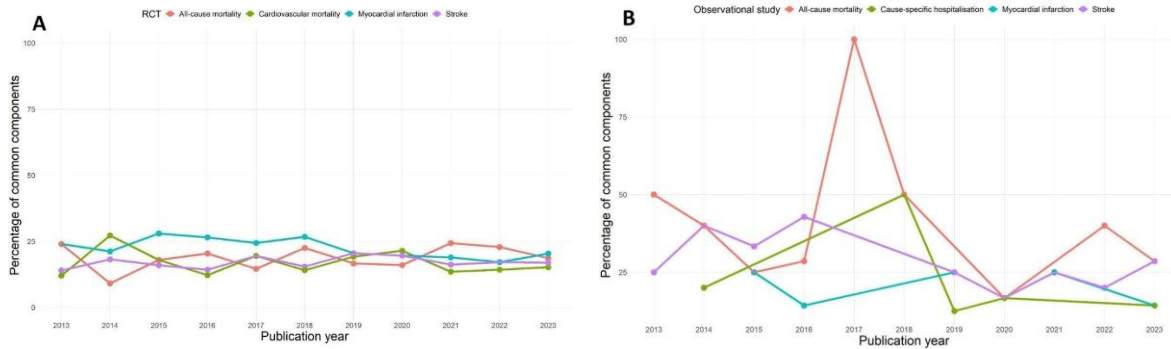
Investigating whether increasingly lengthy and complex participant information leaflets (PILs) may deter research participation, a two-arm study within a trial was embedded in a host RCT (IBD-BOOST). In 4201 randomised participants, researchers found no significant difference between RCT recruitment and retention rates in either arm, but suggest that a comparison of written PILs with other methods of conveying information may be useful.

Outcome measures for CVD studies published in major clinical journals

18 June (Jianhua Wu. Centre for Primary Care)

A review of 386 cardiovascular phase III/IV RCTs and multicentre observational studies of cardiovascular diseases finds an expansion in the use of primary composite and secondary outcome measures. In NEJM, Lancet or JAMA studies published 2013-24, representing >10 million participants, 51% investigated coronary heart disease, 22% cardiomyopathy/heart failure, 15% heart rhythm disease, 11% valvular heart disease and 1% other CVDs. The most frequently reported primary outcome measure was a composite (63%), the most frequent component of which was myocardial infarction (58%). Use of composites as primary outcome measure increased from 49% of studies in 2013 to a peak of 85% in 2018. Authors say increased use of composite outcome measures, number of secondary outcome measures employed per study, and variation in primary outcome measures and

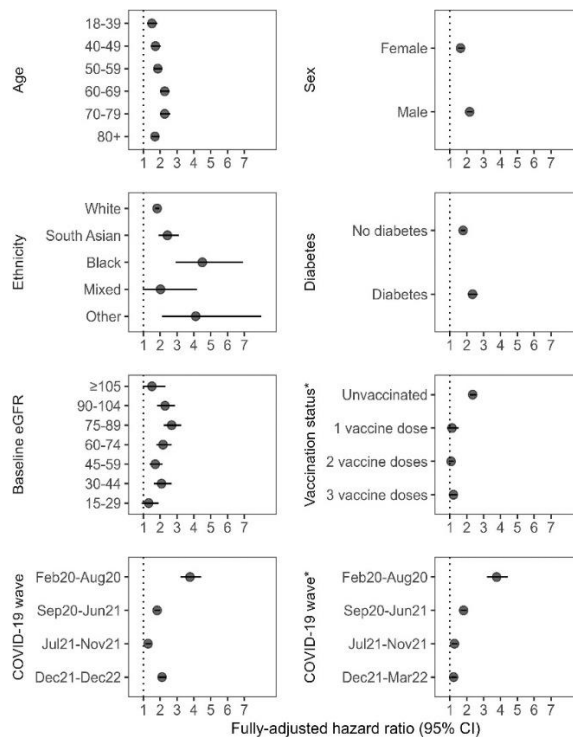
definitions contribute to biases, and that standardised outcome measure definitions for cardiovascular studies are needed to improve clinical research quality.



Long-term kidney outcomes after COVID-19

18 June (Rohini Mathur, Centre for Primary Care)

A matched cohort study investigating whether COVID-19 leads to long-term kidney outcomes uses primary and secondary care English e-health records to identify kidney failure, kidney function reduction, and death in people with and without COVID-19. All outcomes increased after COVID-19, with hazards of kidney failure greatest after hospitalisation and remaining increased >180 days of follow-up. There was no evidence of increased risk in those not hospitalised. Increased kidney failure was more pronounced in people of black v white ethnicity. The results suggest that strategies to minimise severe COVID-19 should continue to be optimised among vulnerable groups, and that kidney function should be proactively monitored after hospital discharge.



International Cancer Screening Network Biennial Conference

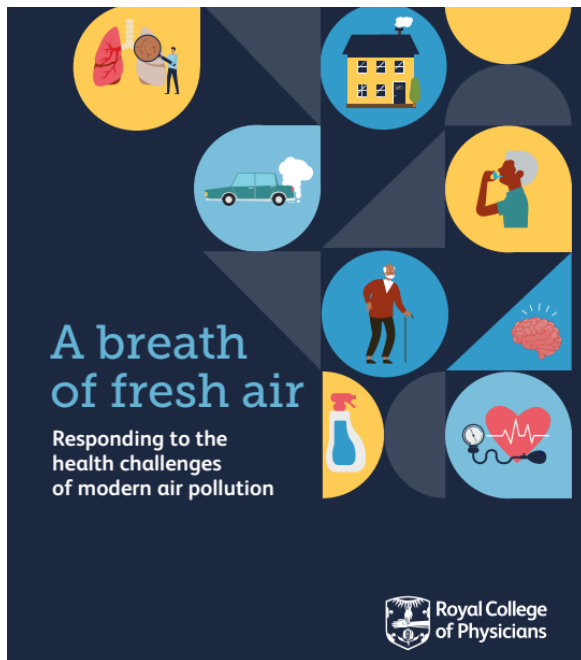
18-20 June (Tahania Ahmad, Soumya Arun, Adam Brentnall, Amanda Dibden, Rhian Gabe, Emily Lane, Joy Li, Laura Marlow, Judith Offman, Peter Sasieni, Jo Waller. Centre for Cancer Screening, Prevention and Early Diagnosis/Evaluation and Methods)

A strong WIPH team presented their work at this year's International Cancer Screening Network Conference in Aarhus, Denmark. Day 1 speakers included Tahania Ahmad on adding serum hormone measurement to improve the Tyrer-Cuzick breast cancer risk model in postmenopausal women, and Joy Li on the effect of direct telephone reminders on breast screening attendance. Day 2 presentations included Peter Sasieni on the NHS-Galleri Trial, Laura Marlow on patient

experiences of diagnostic investigation following a positive multi-cancer early detection screening test, Joy Li on results from the Dutch Colorectal Cancer Screening programme correcting for lead time bias in estimating the effect of FIT-based screening on colorectal cancer survival, Amanda Dibden on all-cause mortality as the endpoint in evaluating the long-term effectiveness of the UK breast screening programme, Emily Lane on the utility of predicted mortality as a surrogate endpoint in 6 lung cancer screening trials, and Adam Brentnall on analysis methods to inform evaluation of potential surrogate endpoints for cancer screening trials. Posters were presented by Jo Waller on the acceptability of using artificial intelligence in breast screening and on a survey of non-attenders to understand barriers to breast screening, Judith Offman on effects on NHS breast screening attendance of different combinations of open invitations and timed appointments, Soumya Arun on a review evaluating external validation studies of artificial intelligence models for detecting lung cancer from digital pathology images, and Rhian Gabe on the TRANSFORM trial of prostate cancer screening.



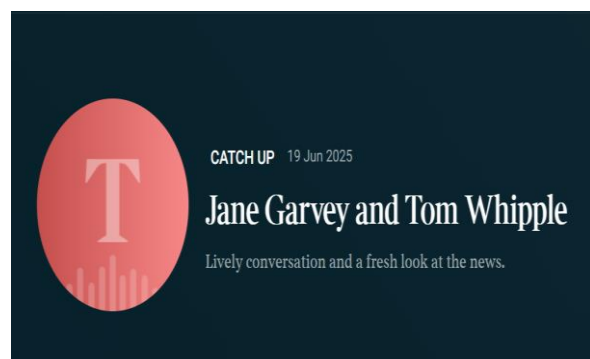
New RCP report: 'A breath of fresh air'
 19 June (Chris Griffiths, Jessica Mitchell. Centre for Primary Care)



A new Royal College of Physicians report on the effects of air pollution highlights evidence from the last decade showing links between air pollution and almost every organ in the body, and calls for air quality to be treated as a public health issue. Compiled with assistance from over 30 clinical and academic experts, the report sets out 19 recommendations. WIPH researchers Chris Griffiths and Jessica Mitchell, with collaborators, co-wrote Part 2 of the report, on 'Health inequalities and economic impacts of outdoor and indoor air pollution'. Around 30,000 deaths a year in the UK are estimated to be attributed to air pollution, at a cost of £27 billion.

NICE: Benefits of new Alzheimer’s treatments too small to justify costs
 19 June (Charles Marshall. Centre for Preventive Neurology)

In an interview with Times Radio, Charles Marshall told Tom Whipple that while not wonderdrugs, the new Alzheimer’s treatments (donanemab and lecanemab) do slow down progression of the disease, and nothing has done that before. He noted that trial results so far only cover 18 months of treatment, so whether the slowing progresses is unknown, but conceded that the drugs are very expensive for fairly modest benefit. Costs are high because of required high quality diagnosis and monitoring that our NHS dementia services cannot provide, but he said that NICE has a duty to consider what is a good use of finite NHS resources. He concluded that these drugs have been “a tremendous source of hope”, and that “We have seen with other diseases that, once the first drugs come through the pipeline, more drugs follow, and become more effective and more safe with time.”



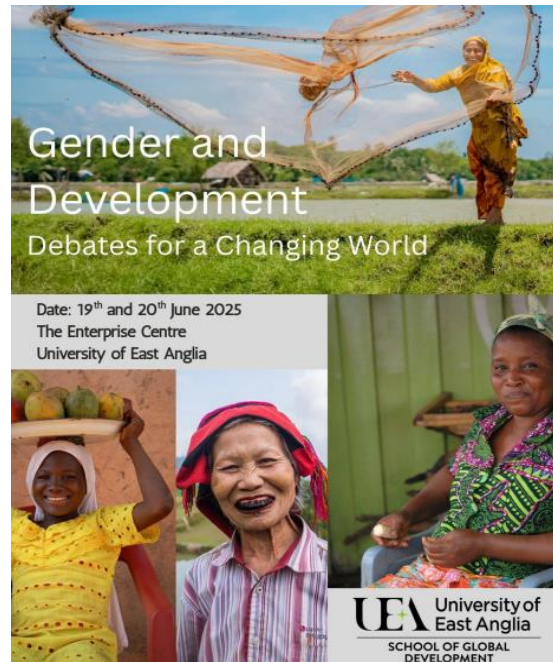
Happiness and Nervousness fluctuations in young people in Latin America
 19 June (Catherine Fung. Centre for Psychiatry and Mental Health)



A study using data gathered via a mobile app to examine how mood status scores (happiness and nervousness) vary as a function of having/not having symptoms of depression or anxiety in 154 15-24 year olds in Buenos Aires, Bogotá, and Lima finds that depressive or anxiety symptoms were not significantly associated with increased variability in mood scores. Males exhibited greater variability in happiness and nervousness scores than females, and young adults showed higher variability in nervousness and higher average happiness than adolescents.

Gender and Development Conference 2025: Debates for a Changing World 20 June (Fiona Samuels. Centre for Public Health and Policy)

Fiona Samuels presented a paper on the role of social and gender norms in driving mental health in S/SE Asia at this conference organised by the University of East Anglia. Her presentation, focusing on young people in Nepal and Vietnam, explored the complex interaction of biological, social and environmental factors that shape and drive mental health experiences, and how these drivers are intricately bound up with social and gender norms. Fiona discussed approaches for addressing youth mental health, taking into account gendered norms, and considering innovative, co-designed approaches, including a school-based programme in Vietnam.



Global collaboration sets future research agenda for PTSD in older adults 20 June (Sedi Zabihi. Centre for Psychiatry and Mental Health)

THE LANCET **Healthy Longevity**

To establish consensus-based research priorities, members of the *On Traumatic Stress and Ageing: A Global Network* reviewed 142 publications to evaluate the current state of research on post-traumatic stress disorder (PTSD) in older (≥ 60 yrs) trauma survivors. Evidence was synthesised across 4 clinical domains: ageing mechanisms, assessment,



treatment, and care. Findings highlighted the urgent need for high-quality research across all four domains on older trauma survivors. The collaborators conclude that future studies should focus on older under-represented groups, such as women, individuals with multiple comorbidities, and populations in low- and middle-income countries. Using standard diagnostic instruments, establishing clinically meaningful functional outcomes, and engaging people with lived experience should be prioritised to be applied in future research.

Mad Hearts 2025

20 June (Maria Turri. Centre for Psychiatry and Mental Health)

This year's Mad Hearts event, held on the Mile End Campus, was an enormous success, with three plenary and six parallel sessions. The ≈70 attendees included six mental health service users, who contributed as panellists to a plenary session, and people with both visible and invisible disabilities, some of whom led sessions. Five of the workshop convenors and speakers were students or alumni of the MSc in Creative Arts and Mental Health, and other attendees included QM PhD and current WIPH MSc students. Organiser Maria Turri said: "There was a lot of joy, conversation, creativity, sharing, laughter, solidarity!"



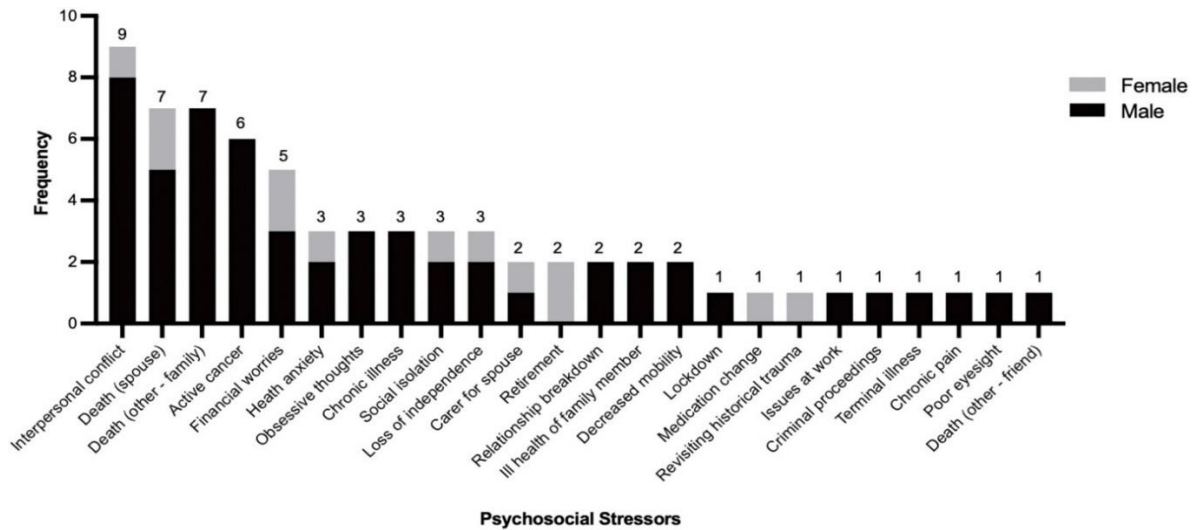
Photography: Siân O'Connor | @sian_o

Traumatic Self-Harm in Older People

21 June (Liz Sampson. Centre for Psychiatry and Mental Health)

A retrospective analysis of data on 60 people aged ≥ 65 attending a major trauma centre in London investigates demographics, injury mechanism and outcomes in older people admitted with self-inflicted injury. Self-inflicted injury represented 1.5% of trauma admissions aged ≥ 65 (80% male). Most females and over half of men had a psychiatric history, with depression the most common psychiatric comorbidity. The most common injury mechanism was self-stabbing amongst males, and a jump from height amongst females. The most common discharge destination was psychiatric

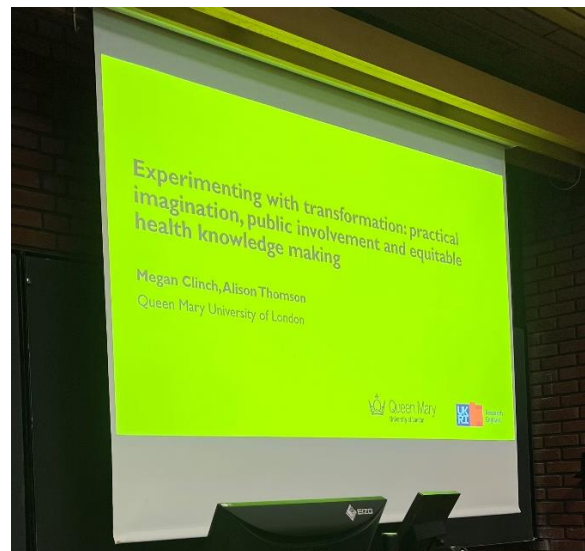
admission. This study is the first UK-specific analysis of older trauma patients presenting with serious self-harm.



Findings from the ‘Mapping Practices of Participation’ project

22 June (Alison Thomson, Megan Clinch. Centres for Preventive Neurology/Public Health and Policy)

In a presentation entitled ‘Experimenting with transformation: practical imagination, public involvement and equitable health knowledge making’, Alison Thomson and Megan Clinch presented findings from the Research England-funded ‘Mapping Practices of Participation’ project at the European Conference on Social Medicine in Oslo. Building on practices from socially engaged performance and speculative design, they sketch ways to reconfigure involvement, so that the public and academics might collaborate in more prefigurative and generative ways.



Windrush Day Reception at 10 Downing Street

22 June (Veline L’Esperance. Centre for Primary Care)



Celebrating the contribution and achievements of the Windrush generation and their descendants, Veline L'Esperance joined the Prime Minister and members of the cabinet at 10 Downing Street for this year's Windrush Day Reception. Veline discussed the work of Black Health Legacy, a genetic health research study for, and led by, Black African and Black Caribbean people in the UK, which aims to find better ways to prevent, diagnose, and treat health conditions for future generations.

Use of the Health Survey for England in policy-making and monitoring

23 June (Lola Oyebo. Centre for Public Health and Policy)

Having presented the keynote speech on 'The use of the Health Survey for England in policy-making and monitoring' at the Health Studies User conference on 23 June, Lola Oyebo was surprised to find that the next presentation, on the future of the Health Survey for England by Paul Niblett and Tim Vizard, included the announcement that the survey will be discontinued. The conference chair has urged health population survey data users to email directly, to give feedback or express interest in being involved in a possible steering group on this topic. future.health.surveys@ons.gov.uk

A purple-themed slide for the UK Data Service Health Studies User Conference 2025. It features the UK Data Service logo at the top left. The main title is 'Health Studies User Conference 2025'. Below this, it says 'Keynote' followed by 'Oyinlola Oyebo', 'Professor of Public Health and Lead of the Centre for Public Health and Policy, Queen Mary University of London'. To the right of the text is a small portrait of Oyinlola Oyebo. Below the text, it says 'The use of the Health Survey for England in policy-making and monitoring.' The bottom right corner has a decorative pattern of light purple hexagons.

Capsule sponge test could replace endoscopy for over half of patients monitored for oesophageal cancer

23 June (Peter Sasieni. Centre for Cancer Screening, Prevention and Early Diagnosis)

A new, far less invasive test to detect early signs of cancer could safely replace the use of regular endoscopies for over half of all patients with Barrett's oesophagus, a known precursor to oesophageal cancer. A study published in the *Lancet* shows that the capsule sponge test is easier to administer and could be carried out by nurses and at GP practices, reducing the burden on NHS resources. Over 900 Barrett's oesophagus patients from 13 UK hospitals underwent both capsule sponge and endoscopy tests. The capsule sponge test result showed low risk for 54% of patients, and successfully identified patients with potential early cancer signs, allowing prioritisation of these patients for a confirmatory endoscopy and treatment. Only 0.4% of these patients were found to be at higher risk from an endoscopy. Co-

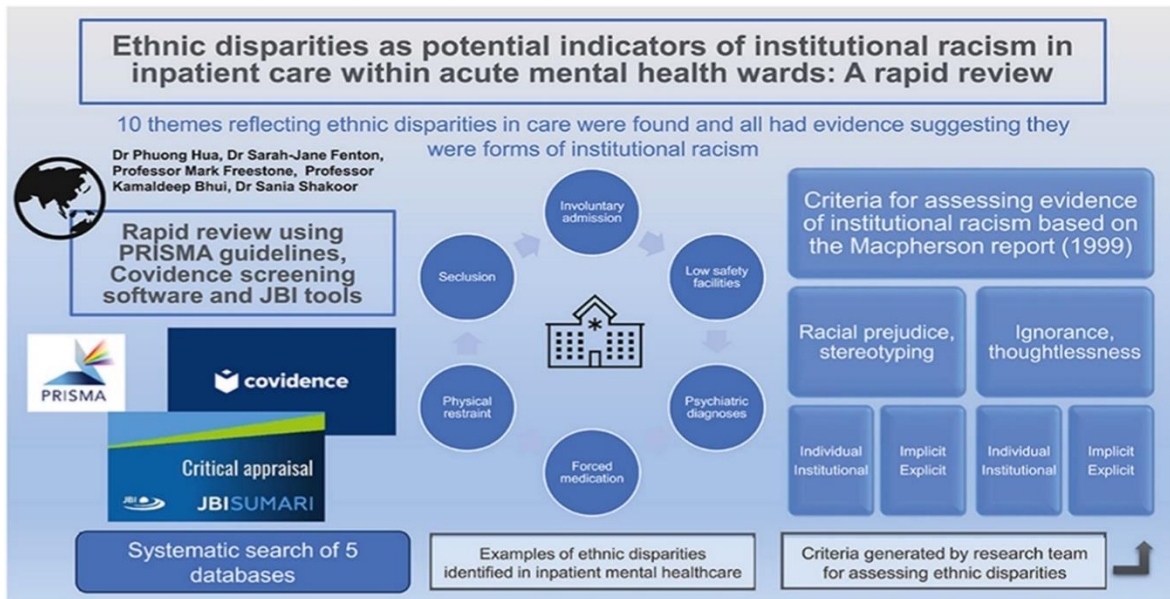
author Peter Sasieni said that the capsule sponge test could help stratify patients with Barrett's oesophagus by risk, and that half of them will fall into the low-risk group: "Given that the risk of these individuals progressing to dysplasia and then to oesophageal cancer is so low, it should be safe to replace their annual endoscopy with the capsule sponge."



Ethnic disparities: potential indicators of institutional racism in inpatient care?

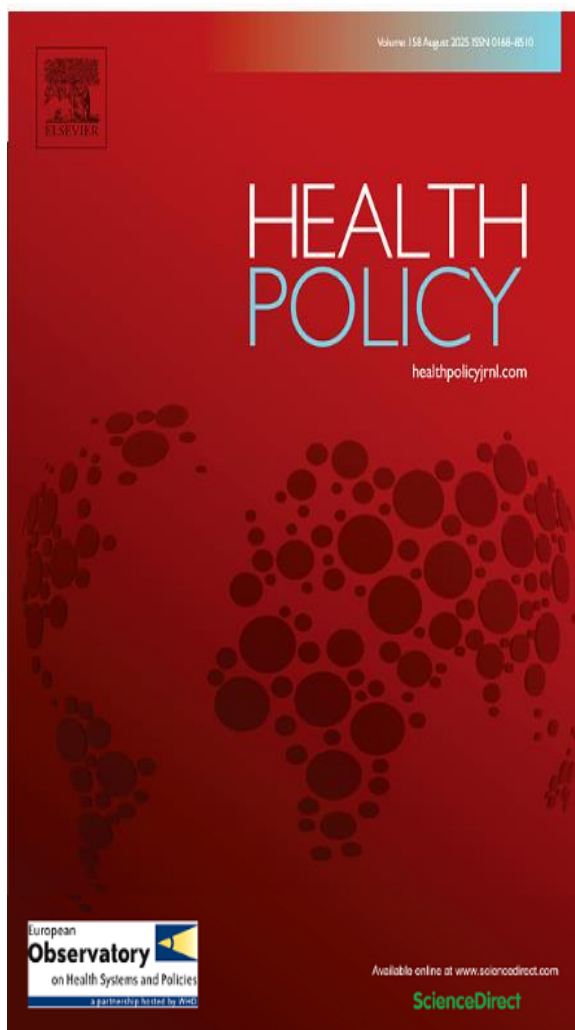
23 June (Sania Shakoor. Centre for Psychiatry and Mental Health)

A review of 34 quantitative studies aims to identify ethnic disparities in acute adult mental health care and explore to what extent these provide evidence of institutional racism. Results reveal ethnic disparities in involuntary admission, psychiatric diagnoses, forced medication, physical restraint, seclusion, length of stay and access to appropriate services/facilities. Qualitative data revealed experiences of disempowerment, confusion and loss of autonomy. The findings mapped onto components identified as underlying institutional racism as defined by the Macpherson report. Authors hope the results can be used to enable better target intervention or change management to address issues, but say further research is needed to verify whether ethnic disparities in inpatient services and treatment *reflect* or are themselves *exacerbated or contributed* to by institutional racism.



Does pay for performance affect socioeconomic inequalities in access

23 June (Yan Feng. Centre for Evaluation and Methods)

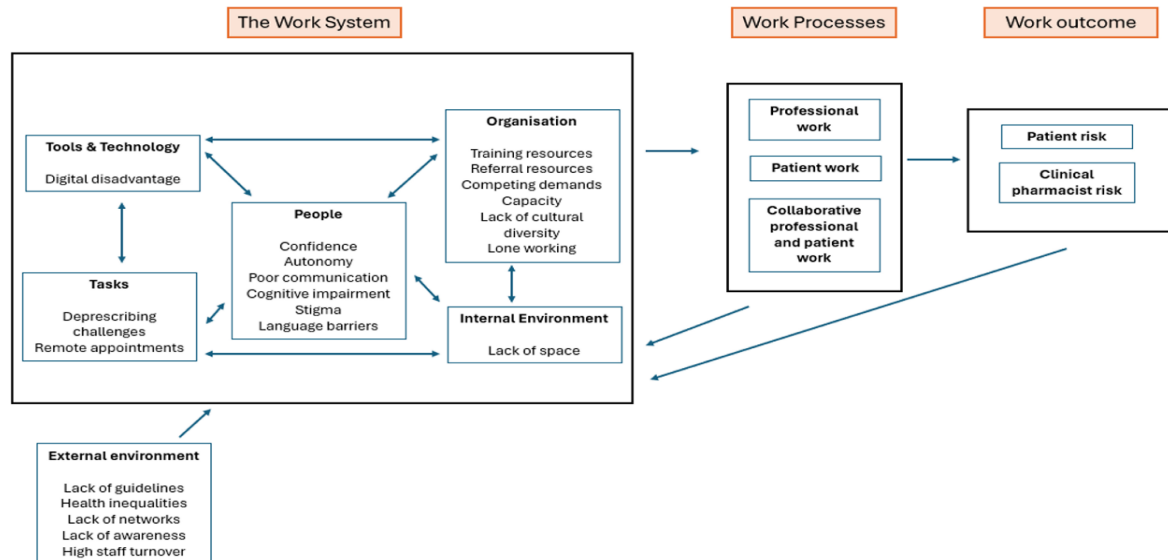


Pay for performance (PfP) aims to improve quality and efficiency in the health sector. Investigating how PfP for specialised hospital care in England affects socioeconomic inequalities in access, authors consider 2 schemes: trauma care aiming to reduce delayed discharges from adult critical care, and internal medicine aimed at reducing in-hospital waiting time and length of stay for patients requiring urgent coronary bypass grafting. Comparing hospitals that did and did not adopt the schemes, results showed that for trauma care the scheme widened inequalities by reducing delays that favoured more patients in the least income-deprived quintile than in the most income-deprived quintile. No effect or socioeconomic differences were found in outcomes for patients requiring an urgent coronary bypass. Authors say scope exists to further refine the design of PfP schemes that include equity considerations, and that it is important that scheme evaluations assess the effect, not only on the average performance, but also across different socioeconomic groups.

Insights from clinical pharmacists on identifying risks in dementia care

24 June (Abi Woodward, Liz Sampson, Victoria Vickerstaff, Nathan Davies. Centres for Psychiatry and Mental Health/Evaluation and Methods)

Using semi-structured interviews with clinical pharmacists, a study investigating the safety of dementia care in the community find key risks, including variations in pharmacist expertise, communication barriers, limited resources, and systemic challenges. The researchers conclude that a proactive, multifaceted approach addressing training, interprofessional collaboration, and system-level adaptations is crucial to mitigate these risks and enhance patient safety in dementia care.



AI translation in UK public services contexts: A regulatory Wild West?

24 June (Stephen Hibbs. Centre for Primary Care)

Speaking to the All Party Parliamentary Group for Modern Languages at the House of Lords on 24 June, Stephen Hibbs gave a presentation on translation in a healthcare context with patients who have limited English Proficiency, drawing on the *Translate Myeloma* project to argue that good quality translations of critical documents (eg: chemotherapy consent form) provide anchors of stability in a sea of communication chaos. The meeting was convened to discuss 'AI translation in UK public services contexts: A regulatory Wild West?'

The All-Party Parliamentary Group on Modern Languages



HPV self-sampling to be offered under new NHS 10-year Health Plan

24 June (Peter Sasieni, Jo Waller, Matejka Rebolj, Laura Marlow. Centre for Cancer Screening, Prevention and Early Diagnosis)

Home testing kits for lifesaving checks against cervical cancer

Government to offer home testing kits as part of the cervical screening programme under the upcoming 10 Year Health Plan.



The Department of Health and Social Care has announced that home test kits will be offered to people overdue for screening as part of the cervical screening programme in the upcoming 10 Year Health Plan. Cervical cancer screening participation is currently 68.8%, with >5 million women in England not up-to-date with routine check-ups. Non-attendance can be due to barriers like pain and embarrassment, and difficulty in attending traditional screening among those from diverse and underserved populations. WIPH researchers have led work to test the feasibility and acceptability of HPV self-sampling, showing that self-sampling kits provide a very good alternative to nurse-collected samples, and that under-screened women are willing to provide self-samples, contributing to the decision to include self-sampling in the NHS Cervical Screening Programme in England. This simple change could help an additional million people participate in cervical screening regularly.

Royal College of Psychiatrists International Congress 2025

25 June (Georgina Hosang, Erin Lawrence. Centre for Psychiatry and Mental Health)

Georgina Hosang and Erin Lawrence presented on the theme of 'Multimorbidity in psychosis: developing programme theories for premature mortality and interventionist practice' at the RC Psych 2025 International Congress in Newport, Wales. Georgina discussed multimorbidity patterns in bipolar disorder and depression, and Erin presented the findings of her PhD research on the psychosocial risk factors, including social isolation, vulnerability and exploitation, and cultural background, contributing to physical multimorbidity. The findings offer insights into modifiable risk factors for physical multimorbidity and provide actionable recommendations to inform ELFT service provision, with the goal of reducing health inequalities for people with severe mental illness.



Challenges in pathways to cancer diagnosis in Southern Africa

25 June (Kirsten Arendse, Suzanne Scott, Valerie Sills, Fiona Walter. Centre for Cancer Screening, Prevention and Early Diagnosis)



An interview study explores experiences, barriers and facilitators in managing patients with symptoms of possible breast, cervical or colorectal cancer among healthcare workers (HCWs) in South Africa and Zimbabwe. Perceptions of patient-level factors influencing the diagnostic interval included financial limitations, patients' absence and delays in attendance. Healthcare provider and system factors included challenges with referral and feedback systems, training needs, low awareness of protocols and guidelines, inappropriate and suboptimal clinical assessments, and broader socioeconomic factors and resource limitations. Authors say that to improve the timely diagnosis of breast, cervical and colorectal cancer in Southern Africa, targeted strategies that address patient-related, provider and health-system delays are needed.

BMJ Journals

BMJ Open



Eco-anxiety in primary school children in East London

26 June (Imogen Hensler, Khushi Patel, Julia Michalek, Callum Ritchie, Francois van Loggerenberg, Dennis Ougrin, Jennifer Lau. Centre for Psychiatry and Mental Health)

Addressing a paucity of data on eco-anxiety (negative feelings around climate change, associated with distress and concern about the future) in pre-adolescent children, researchers measured worries, knowledge and commitment to action in primary school-aged children in East London, an area characterised by high child poverty levels and ethnic diversity. Around half of the children worry about and are aware of global warming. The study found a correlation between worries and knowledge, and between worries and taking action. Authors call for greater engagement of pre-adolescent children in discussions around climate change.



Eco-anxiety, knowledge and action in primary school-aged children in East London

Imogen I. Hensler , Khushi Patel, Julia Michalek , Callum Ritchie, Francois van Loggerenberg , Dennis Ougrin, Jennifer Y.F. Lau 

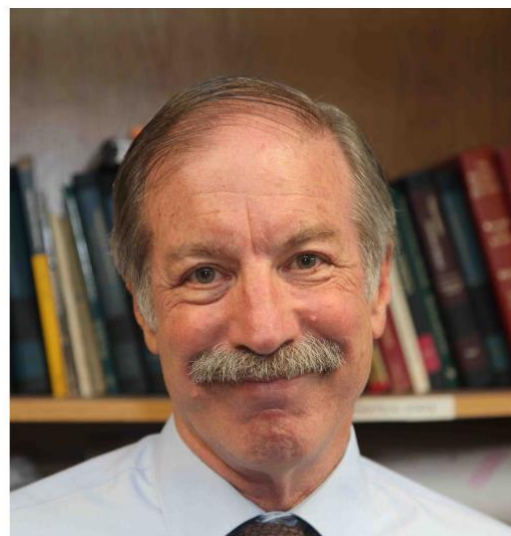
CRUK Outstanding Achievement in Cancer Prevention Research Award

26 June (Jack Cuzick. Centre for Cancer Screening, Prevention and Early Diagnosis)

Congratulations to Jack Cuzick, who received the Outstanding Achievement in Cancer Prevention Research Award at the CRUK Cancer Prevention Research Conference in London. The award honours exceptional and sustained contributions to the field of prevention research, recognising a leader whose work has profoundly advanced the understanding, implementation or innovation in cancer prevention. Jack has been recognised for his significant lifetime contribution to the cancer prevention field, leading to clinical impact.

Outstanding Achievement in Cancer Prevention Research Award

Professor Sir Jack Cuzick



Universal newborn genetic screening: the wrong focus for population health

27 June (Trevor Sheldon. Centre for Public Health and Policy)

A BMJ opinion piece questions the lure of new health technology that claims it can transform health services and improve health, suggesting instead that more attention should be paid to upstream prevention. On the recent announcement of a plan for every newborn in England to undergo whole genome sequencing, authors say we must seek evidence that this programme will yield “a revolution in medical science”, and details of the negative consequences and costs. They reflect that the UK National Screening Committee makes recommendations on screening programmes based on rigorous appraisal against Wilson and Jungner’s criteria, protecting the public from many unfounded and potentially harmful testing schemes and saving the NHS time and resources. The 20 year gap in life expectancy between the richest and poorest in society is not explained by our genes, and while our genome combines the promise of new technology with the hegemony of individualism, our exposome highlights the lived experience of complex, whole systems and unequal exposures. “While politicians cannot alter our genetic code, they can tackle systemic societal inequalities”.



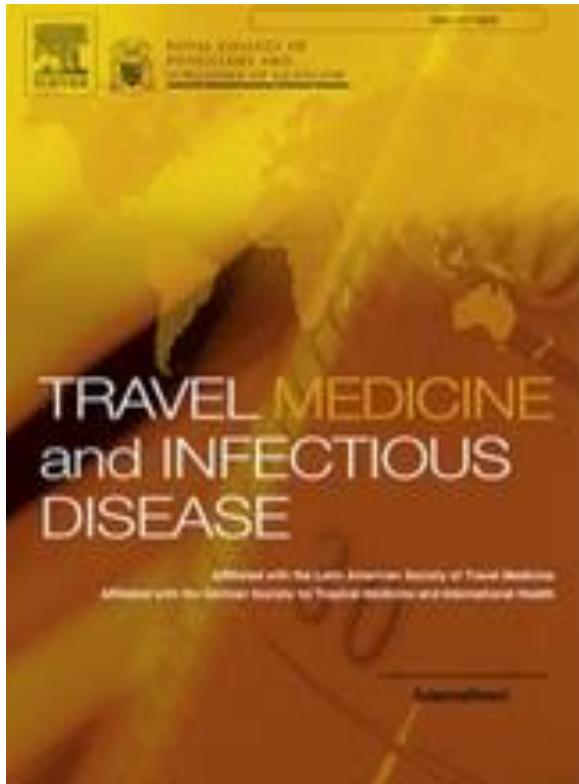
From genome to exposome: universal newborn genetic screening is the wrong focus if we want to improve population health

We should pay more attention to upstream prevention, which is vital for the nation's health, write Trevor Sheldon and John Wright

Trevor Sheldon,¹ John Wright²

TB in migrant populations in the middle East and North Africa

27 June (Dominik Zenner. Centre for Public Health and Policy)



A systematic review of 57 studies synthesising evidence on TB burden, clinical outcomes, and epidemiological characteristics among >3.5 million migrants in 12 countries in the Middle East and North Africa finds that TB incidence was consistently higher in migrants than non-migrants. While migrants had lower TB-related mortality, treatment success rates were consistently below the 90% WHO-recommended threshold. Migrant TB patients were younger and predominantly male. Drug-resistant TB was more common (though not always statistically significantly) among migrants. Authors say their findings underscore the urgent need for tailored TB prevention and treatment services in the region to ensure health equity, but that substantial evidence gaps - particularly the absence of North African data - must be addressed.

Supermarkets to be fined if healthy eating targets are not met

28 June (Sonia Pombo. Centre for Public Health and Policy)

Ahead of the release of the forthcoming 10yr health plan, the Department of Health and Social Care has foreshadowed a new policy under which supermarkets could be fined if they do not sell healthier food. The “healthy food standard” policy will introduce mandatory health targets for retailers while giving them flexibility in how to meet them, such as by tweaking recipes, running price promotions on healthier items, or redesigning store layouts. Supermarkets will also be required to report sales data, with those that fail to hit targets facing financial penalties. Sonia Pombo, quoted in The Independent, said that the policy “will help shift the responsibility away from individuals and toward a food system that truly supports healthier choices”.



Supermarkets could be fined if they fail to hit new healthy eating targets

The 'Healthy Food Standard' will apply to major retailers in England as part of a new government plan to tackle obesity.

Ted Hennessy • Tuesday 01 July 2025 05:09 EDT



Many thanks to all who so enthusiastically contribute. Please send any news items for the next newsletter to j.a.mackie@qmul.ac.uk

