December is a useful time to pause and reflect on another year’s passage, with milestones reached, hurdles overcome and lessons learned. This year has witnessed several notable editions of the *Southern African Journal of HIV Medicine* (*SAJHIVMED*). The March edition focused on the 10-year anniversary of public sector antiretroviral therapy (ART) provision in South Africa – an anniversary worth celebrating. The June and September editions continued the Journal’s tradition of publishing some of the best research from across the region, including some particularly insightful pieces from local clinicians on the ground, and discussing the shortcomings of existing management strategies or the challenges of providing care under difficult circumstances. The contributions from local clinicians – particularly those working outside tertiary academic medicine – are often the most widely read contributions to the Journal, and we look forward to seeing more submissions in this category.

September’s issue accompanied the second national conference of the Southern African HIV Clinicians Society in Cape Town. The meeting was an all-round success, with local and international speakers of the highest quality, debates and discussion aplenty, and some of the best local scientific research presented. The top peer-reviewed abstracts from the conference are published in this edition of the Journal, and we look forward to seeing more indepth presentations of many of these data in the coming months.

Also in this month’s Journal are articles exploring aspects of HIV medicine that may, at least at first glance, appear off the beaten track. An unusual case report from Govender et al. reports on a disseminated fungal infection in an HIV-infected international traveller. Arowolo et al. present a unique study on the practice of ‘double-gloving’ by surgeons to reduce HIV transmission risk – a widespread technique that is a source of discussion but for which there has been, until now, few data. Finally, Morsheimer et al. present an analysis of the decentralisation of paediatric HIV services in Cape Town; there are surprisingly few studies of patients’ outcomes across different service platforms, and the integration of clinical and health systems perspectives provides useful insights.

Lastly, this edition of the Journal contains a holiday present of sorts. *SAJHIVMED* is valued by its readership in part for its publication of the Society’s clinical guidelines, which are frequently invaluable tools for supporting the local practice of HIV medicine. Here, Meintjes et al. present the latest revision to the adult ART guidelines, synthesising a diverse and complex body of evidence with grace and without losing critical nuance. In outlining the current state of knowledge for specific issues, the authors distinguish points supported by strong evidence from issues where there is room for debate and disagreement. In addition to its value in informing the clinical management of individual patients, these guidelines will be important reading for policymakers, public health programmers and researchers alike.

Happy reading.

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References