

Editorial

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Goodeve Medal

Details of the 2007 award of the Goodeve Medal appear below in a statement by John Ranyard, our predecessor as editor of this journal. Congratulations to the authors of this paper. It is good to see in the citation recognition for OR's contribution to work in the health sector.

The news of the award of this medal gives us the opportunity to mention that there is annually a special opportunity for recognition of authors' work when they publish in *Journal of the Operational Research Society* as their papers will be considered for the prestigious Goodeve Medal. This opportunity is in addition to the more obvious ones of high visibility that the journal also provides. As editors we are always seeking outstanding OR papers. The possibility of winning a medal is something that we hope authors will take into account when considering where to aim to publish.

Terry Williams and John Wilson (Joint Editors)

Winner of Goodeve Medal 2006

The winner of the 2006 Goodeve Medal is the paper by D Evendon, PR Harper and SC Brailsford of Southampton University and V Harinda of St Mary's Hospital, Portsmouth, entitled Improving the cost-effectiveness of chlamydia screening with targeted screening strategies, *JORS* (2006) **57**:1400–1412.

Chlamydia is the most common sexually transmitted infection in the UK and constitutes a major public health problem. The UK Department of Health is phasing in a national chlamydia screening programme but there is concern that blanket screening of the entire at risk population will simply add extra burden to the already overstretched health economy. This paper demonstrates that certain high-risk sub-groups within the general population are critical in the infection dynamics. Improved targeting of these high-risk populations will achieve greater cost-effectiveness.

Statistical risk-group clustering techniques have been used to identify indicators that are strong predictors in determining high-risk status. Geomapping techniques visually display prevalence geographically across the Portsmouth region, thus identifying high prevalence postcode clusters. This informs public health planners where to target intervention and screening strategies. A system dynamics simulation model has been used to capture the infection dynamics and measure the cost-effectiveness of the intervention strategies. The model incorporates risk-group behaviour, as identified by the above geomapping and statistical analysis components of the research. The judges were impressed with the combined use of computer simulation, statistical analysis and geomapping methodologies to provide a unique holistic view of the problem.

The work has enabled staff in a health region to plan a more cost-effective screening programme and the approach is applicable to other areas and to other infectious diseases (such as HIV/AIDS) as data become available.

Chair of the ORS Awards Panel John C Ranyard