Restrictive immigration policies may harm migrants' health

A systematic review and meta-analysis, **published in *the Lancet Global Health***, has found that restrictive entry and integration policies are having an adverse effect on the health of migrants in high income countries. The authors found that international migrants facing restrictive policies such as temporary visa status, detention, and limited access to welfare are less likely to use general health services (with consequences for both individual and public health) and are at greater risk of poor mental health and dying prematurely than other people in their new countries. The authors wrote that efforts to improve the health of migrants would benefit from adopting a "health in all policies" perspective that takes into account the health effects of all migrant-related policies, and embracing a human rights framework that emphasises the rights of migrants under international law. The investigators isolated the effects of different public policy types (that is, whether access to health-promoting resources and opportunities was generous, restrictive, or inclusive) at several stages of the migration process (entry, integration, exit) on health outcomes for international migrants. They included all quantitative studies examining the impact of non-health-related public policies on migrant health relative to populations not exposed to these policies between January 2000 and September 2017. They analysed data from 46 studies in high income countries that focused on the health impacts of integration (37 articles) and entry policies (nine articles). Pooled estimates from 19 articles were included in the meta-analysis. The results indicated that more restrictive entry policies, including temporary visa status and detention, were associated with increased levels of poor mental health among migrants including psychological distress, depression, and anxiety. Compared with groups exposed to less restrictive integration policies (particularly those related to welfare eligibility and documentation requirements), international migrants were more likely to report poor general health and have a greater risk of poor mental health and adverse birth outcomes, and were at higher risk of premature death. The mortality disadvantage was particularly striking in "exclusionist" settings, such as Denmark, where some groups of migrants were twice as likely to die prematurely, compared with comparable groups of migrants in "inclusive" settings, such as the Netherlands.

http://www.thelancet.com/journals/langlo/article/PIIS2214-109X(18)30560-6/fulltext

Vegan fasting diets relieve bowel disease symptoms in mice

Research from the University of Southern California has found that a fasting-mimicking diet (FMD) changes the gut microbiota and reduces inflammatory bowel disease (IBD) pathology. The FMD includes only vegan, plant-based foods for several days, inducing the body to enter a period of fasting. In mice, the FMD has previously been shown to help reduce the symptoms of chronic illnesses such as multiple sclerosis and diabetes. **Published in *Cell Reports***, the researchers first induced IBD symptoms and pathology by feeding mice dextran sodium sulfate (DSS), which causes gut inflammation in mice. Markers of IBD pathology included gut leakiness, infiltration of the immune cells into the gut, reduced length of the gut, and blood in the stools. The mice were then subjected to repeated FMD cycles of several days each, receiving only human-grade vegan foods. Another group of DSS-treated mice underwent water-only fasting. Intestinal inflammation was reduced in the mice receiving the FMD, their stem cell numbers were increased, protective gut microbiota were stimulated, and the intestinal pathology caused by DSS was reversed. In contrast, water-only fasting increased regenerative and reduced inflammatory markers, but did not reverse IBD pathology. Many of the ingredients in the FMD foster the growth of certain bacterial populations as prebiotics. The researchers found that transplants of *Lactobacillus* or fecal microbiota from DSS- and FMD-treated mice reversed DSS-induced colon shortening, reduced inflammation, and increased colonic stem cell numbers.

https://www.cell.com/cell-reports/fulltext/S2211-1247(19)30181-0%20

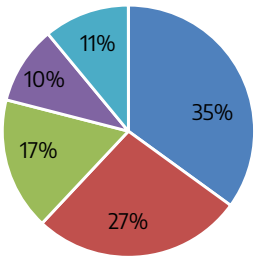
Cate Swannell

doi: 10.5694/mja2.50064

InSight+ Poll

Racism exists in medical education

Total votes = 133



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MJA PODCASTS

Professor Basil Donovan is Head of the Sexual Health Program at the Kirby Institute, UNSW. He discusses early initiation of antiretroviral therapy for people newly diagnosed with HIV infection, to accompany his co-authored research published online on 25 March 2019.

Professor Caroline de Costa is Professor of Obstetrics and Gynaecology at James Cook University in Cairns. She talks about the restrictions surrounding medical abortions, to accompany her co-authored perspective published in this issue.

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