where they have been shown to reduce IPV recurrence and improve maternal and infant outcomes.\textsuperscript{6,7} This work needs to be developed and tested in other settings. The WEAVE study shows that uptake of counselling interventions is often disappointing, and research is needed to identify and overcome barriers. Future work could also take into account men’s role in IPV. There has been little consideration of screening for IPV perpetration by men and offering men interventions to improve their relationship skills and stop their use of violence. The role of family health services in this deserves to be explored.

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I declare that I have no conflicts of interest.


The \textit{Wakley Prize, 2013: true stories}

What does today’s doctor have in common with his or her forebears? The tools of the trade have changed. The expectations of the patient have changed. Even the social position of the doctor has changed. There is perhaps only one constant thread over the centuries of medical practice, and it is this: doctors deal in stories. The doctor puts together a patient’s version of events, the objective signs of disease, and his or her own knowledge to construct a narrative. From this first story, others soon follow—the choice of treatment, the relationship between physician and patient, the advances, and the setbacks. The science with which the doctor started her journey might have been superseded or forgotten at the end of her career. The stories, however, remain. As Oliver Sacks said in a recent interview with The Lancet, “Certainly when I look back on my own medical student days in the 1950s, I can hardly remember any of the lectures that were given, but I do remember all of the patients.”

This year, The \textit{Lancet} invites health-care practitioners to share true stories from their careers for the final issue of 2013. We’re looking for accounts of the doctor-patient relationship that inspire, make us think, or even make us laugh. Stories that prove Sir Arthur Conan Doyle—creator of Sherlock Holmes and \textit{Lancet} author—correct: “for strange effects and extraordinary combinations we must go to life itself, which is always far more daring than any effort of the imagination”.

Essays of no more than 2000 words should be submitted via the journal’s electronic submission system by Oct 21, 2013, with “Wakley Prize” selected as the publication type. Essays should not contain any information that might identify individual patients. Entries will be anonymised, and judged by The Lancet’s editors. The winner will receive £2000, and the essay will be published in The Lancet and feature in our podcast. So go ahead: tell us a story.

Niall Boyce, Joanna Palmer, Pia Pini

The Lancet, London NW1 7BY, UK

\begin{itemize}
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