about prison health worldwide. We have identified four major shortcomings of the guidelines that jeopardise its comprehensiveness.

First, screening and treatment of alcohol use are omitted from the guidelines. Alcohol use is a strong risk factor for HIV, HBV, and HCV infection, and is a behaviour common in prisoners around the world.4 Lowered inhibitions combined with impulsivity and poor decisions that discount the consequences all increase engagement in high-risk behaviours, such as unprotected sex.4 Alcohol use also reduces HIV treatment adherence,3 a major element of antiretroviral treatment that is necessary for its efficacy. We believe that updated guidelines should add the regulation of alcohol use to the other elements of the current intervention package.

Second, screening and treatment of psychiatric disorders, which are overrepresented in prison populations5 and increase the risk of engaging in high-risk behaviours, such as unprotected sex and sharing drug injection equipment,2 are also omitted. Universal screening of prisoners would identify individuals in need of a more detailed evaluation, which might reduce their high-risk behaviours and enhance their compliance with treatment for infections.

Third, we believe that leaving the sexual partners of prisoners out of the sexually transmitted infection testing protocols is a costly mistake for any measures that aim to reduce transition of infections from prisons to society. Not only are partners and spouses of prisoners more likely to be at risk of infections, they also more commonly engage in sex work for money or drugs and are more likely to have multiple sex partners.4 Sex with prisoners through conjugal visits makes their partners a vehicle for transmission of a wide range of sexually transmitted infections from prisons to the community. Hence, offers of testing and treatment for partners should be added to the intervention package.

Finally, overcrowding and poor ventilation are among the major environmental risk factors of tuberculosis transmission in prison,6 but are not addressed by the guidelines. The guidelines are exclusively behaviour-oriented and don’t emphasise higher level structural barriers to the same degree. Conditions of the physical environment of the prison should not be overlooked in the next iteration of the guidelines.

To maximise the efficacy of strategies to reduce the burden of infectious diseases in prisons, the existing guidelines should be updated. A new version should go beyond drug use and include evaluation of prisoners for alcohol use and psychiatric disorders and comprehensive sexually transmitted infection testing. This protocol should also incorporate evaluation of sexual partners of the prisoners. Without these elements, interventions will be suboptimal and will not fulfil Sustainable Development Goal 3’s aim of leaving no one behind.

We declare no competing interests.

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Department of Error

Yousof H, Narula J, Zuwelslaut P-P, et al. Using entertainment to improve lifestyles and health. Lancet 2019; 394: 119–20.—In this Correspondence, the country in which the movie based on the 11th season of Spangalang will be distributed in has been changed from Germany to the Netherlands. This correction has been made to the online version as of July 15, 2019.

Evidence for Contraceptive Options and HIV Outcomes (ECHO) Trial Consortium. HIV incidence among women using intramuscular depot medroxyprogesterone acetate, a copper intrauterine device, or a levonorgestrel implant for contraception: a randomised, multicentre, open-label trial. Lancet 2019; 394: 303–13.

In this Article, in the second paragraph of the Discussion, the last sentence should have said “Although this trial had low statistical power to detect an increase in HIV incidence of less than 30%, for individual women at very high HIV risk, we acknowledge that even a relatively small effect might be important in contraceptive and HIV prevention decision making.” This correction has been made to the online version as of June 13, and the printed version is correct.

Nosten FH, Pyar Phyo A. New malaria maps. Lancet 2019; 394: 278–79.—In this Comment, the spelling of author Aung Pyae Phyo’s name was incorrect. This correction has been made to the online version as of (July 1, 2019), and the printed version is correct.