In this month’s *Bulletin*

In the editorial section, Alastair Ager et al. (378) call for health systems research in fragile settings. Sascha Knauf et al. (379) discuss the implications of the Nagoya protocol for research on pathogenic microorganisms.

Gary Humphreys (382–383) reports on the inclusion of gaming disorder in the *International statistical classification of diseases and related health problems*. Otto Cars talks to Gary Humphreys (384–385) about the lack of progress on antimicrobial resistance over the past twenty years.

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**Treatment for HIV and/or tuberculosis**
Christopher Dye and Brian G Williams (405–414) study factors associated with declining tuberculosis incidence.

**Improving outcomes for people with low back pain**
Adrian C Traeger et al. (423–433) ask if health systems can adjust their approach.

**Hospitalizations for severe pneumonia**
Fiona M Russell et al. (386–393) measure the impact of a change in case definition.

**Universal health coverage and primary care**
Kanitsorn Sumriddetchkajorn et al. (415–422) weigh policy options.

**Which medicines are essential?**
Nav Persaud et al. (394–404) compare national lists in 137 countries.

**Mapping universal health coverage stakeholders**
David Clarke et al. (434–435) consider the implications of private sector care provision.

**Healthy urban environments**
J Mark Noordzij et al. (436–437) outline research questions for age-friendly cities.

**Women and girls, water, sanitation and hygiene**
Georgia L Kayser et al. (438–440) argue for better measures of disproportionate impact.