

# Correspondence

## Elephant hunting calls for local experts

The government's decision in Botswana to lift its ban on wildlife hunting could reintroduce the contentious trophy hunting of elephants. This controversy has highlighted the need for the voices of local experts.

Foreign conservationists and animal-welfare groups condemn Botswana's policy shift, advocating the use of non-lethal methods to control elephants (see A. D. Wallach *et al. Conserv. Biol.* **32**, 1255–1265; 2018). However, local communities welcome it as a means to protect human life, subsistence-farmed crops and livestock (J. E. Mbaiwa *S. Afr. Geogr. J.* **100**, 41–61; 2018).

Local ecologists would be better placed to understand the tensions, but this specialist expertise is scarce. As a result, expert engagement is dominated by foreigners (see, for example, [go.nature.com/2jkyefb](http://go.nature.com/2jkyefb)). This has robbed the discussion of a much-needed local perspective and generated a mistrust of the science produced by international experts and of the motives behind it. Correcting this scarcity would command international respect and be a great service to the people and wildlife of Botswana.

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## China fortifies its marine conservation

As China's coasts have become more severely affected by climate change, the country has launched a scheme to step up the protection of its designated marine areas. Similar measures could potentially be applied to marine conservation worldwide.

China has more than 270 marine protected areas (MPAs), comprising about 5% of its national waters ([go.nature.com/2kn9htm](http://go.nature.com/2kn9htm)). Until June this year, local governments with limited scientific knowledge were responsible for designing and planning MPAs, and this led to opportunistic development of these areas. A lack of monitoring and enforcement made the MPAs ineffective for remediating habitat degradation and the overexploitation of resources.

China's planned improvements include organizing national guidelines and a management institution by 2020; forming a comprehensive regulatory framework by 2025; and establishing a systematically planned and effectively managed MPA system by 2035.

To achieve these aims, whether in China or worldwide, clear science-based criteria for designating MPAs are necessary. All stakeholders need to be involved in the planning stages. Effective monitoring programmes and strict enforcement are essential. And institutional and learning systems should unite individual MPAs into an ecologically coherent network.

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## Test more men for BRCA genes

Our experience bears out the importance of renaming hereditary breast and ovarian cancer (HBOC) as King syndrome (C. C. Pritchard *Nature* **571**, 27–29; 2019). National and international guidelines urgently need to extend their criteria for *BRCA* testing to include males with a family history of prostate or pancreatic cancers. Examples include those issued by the European Society for Medical

Oncology and the UK National Institute for Health and Care Excellence.

Men carrying mutations in *BRCA1* and/or *BRCA2* can develop melanomas or cancers of the breast, pancreas or prostate. At the European Institute of Oncology, we tested far fewer men than women for mutations in these genes (357 versus 4,728 since 2001). Seventy-three of those men were probands, the first in their family to test positively for such mutations; the other 284 were involved in cascade screening, which is the testing of blood relatives of people with specific genetic mutations. Compared with women, the overall testing ratio is 1 in 13, or 1 in 53 for probands only. Most of the male probands (63 out of 73) had breast cancer; 8 had only non-breast tumours (11%). Notably, 40% of patients with prostate cancer had a *BRCA* mutation.

The most recent guidelines from the US National Comprehensive Cancer Network recommend *BRCA* testing for men with metastatic or advanced prostate cancer and a family history of the disease ([go.nature.com/2jk6fwb](http://go.nature.com/2jk6fwb)). Broader genetic data on males will improve patient diagnosis and management, and increase treatment and clinical-trial options.

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## Study what makes games addictive

The World Health Organization now includes 'Gaming disorder' in the 11th revision of its International Classification of Diseases. We need more independent research into design features that can contribute to addictive and harmful gaming, particularly with respect to technological innovations such

as machine learning and in-game purchasing ('microtransactions').

Players' vulnerability, along with social and environmental factors, influences the onset, progression and recurrence of harmful gaming. Games are unregulated products designed to capture users' attention and promote endless play.

Companies often engineer and fine-tune games to deliver constant and immediate rewards, complex narratives, immersive virtual environments and social reinforcement. Game technologies can monitor and learn from gamers' behaviour, and adapt their content accordingly. Monetized mobile games use behavioural tracking to alter in-game conditions to incentivize continuous spending and persistent playing.

Studies have so far focused on the likes of massively multiplayer online role-playing games (*World of Warcraft*, for example). But these have now been outpaced by the multiplayer online battle arena (typified by *League of Legends*), and the battle royale genre (*Fortnite* and the like). Researchers must rethink how to map the effects of gaming on children and adolescents.

Understanding dangerous player–game interactions should promote more-ethical game designs and so help people for whom gaming has become a problem.

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### CONTRIBUTIONS

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