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June 2001

Health in the news

This is a longer issue of *Health Insight* than usual, reflecting the importance that healthcare has assumed in the run up to the election – see ‘Health to the fore in general election’. Not surprisingly, the government has chosen this particular time to announce funding for a number of new health programmes – see ‘Money for the NHS’, ‘Boost for dentistry’, and ‘New menu for NHS’.

Yet, even without the election campaigning, May was indeed a busy month in healthcare. The Royal College of Nursing held its conference and the retiring General Secretary departed with a powerful speech – see ‘Nursing leader bows out with a warning’. But Britain’s most unhappy health workers at the moment would appear to be the nation’s doctors – see ‘Doctors are discontented’. They do, however, agree, in theory, that there should be a new system for the ‘revalidation’ of doctors; the General Medical Council is making progress towards this end – see ‘GMC moves towards doctor revalidation’.

Senior managers too have been unhappy; they say they were not consulted before the Secretary of State for Health introduced some of his new reforms – see ‘New changes take managers by surprise’.

It is sometimes forgotten how important a role is played by over-the-counter medicines. We have two stories on this aspect of healthcare – ‘High Street medicines’ and ‘Painkiller restrictions pay off’.

Amongst the many other developments over the last month, the announcement that the Royal College of General Practitioners is piloting a new international examination may not have hit the headlines but will be of particular interest to *Health Insight* readers – see ‘Royal College launches international examination’.

Health to the fore in general election

Healthcare has consistently emerged from the opinion polls as a priority issue. For example a Guardian/ICM poll found that voters’ leading concerns were health (eighty-nine per cent), law and order/crime (eighty-two per cent), and education (eighty-one per cent). In contrast, only forty per cent cited as their main concern ‘Europe’, although the Conservatives have made this a focal point of their campaign – along with asylum, tax and crime. Labour has throughout put much more emphasis on health, and the Liberal Democrats have stressed the need to improve all public services.

One notable difference between Labour and the Conservatives on health is the intention of the Conservatives to restore the ‘internal market’ system within the NHS. This has been criticised by, amongst others, the British Medical Association, which says it would further reduce the resources available to hospitals in deprived areas. Another particularly controversial topic has been the question of free personal care for the elderly and the long-term sick, as recommended by a Royal Commission last year. Both the government and Conservatives have said that personal care will not be free, but many Labour backbenchers, campaign groups, the Liberal Democrats and others back free care.

Labour has made much of new figures showing further falls in hospital waiting lists in England and apparently indicating that targets for waiting list cuts set four years ago had been met. Opposition parties queried the accuracy of the figures, pointing out for example that figures for Wales, where waiting lists have grown, had not been included.

All the parties are promising an expansion in services available, with the Lib Dems setting the highest targets – including 10,000 more beds, 27,5000 more nurses and 4,500 more doctors.

A useful summary of the health priorities of the three main parties may be found on pages 14–15 of the *Health Service Journal* 24th May – www.hsj.co.uk. The intentions of the parties in Scotland, Wales, and Northern Ireland are examined in the *BMJ* 26th May. The SNP’s main focus is free personal care for elderly, and Plaid Cymru wants big spending increases for Wales plus the abolition of NHS trusts, which it says are ‘the last remnant of the internal market’.



VIVENDI
UNIVERSAL
PUBLISHING
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Although Labour has said little in its manifesto about a significant expansion of collaboration between the NHS and the private sector, media commentators seem convinced that this is what the party has in mind, should it be returned to power. The issue has been the subject of heated public debate.

• *Guardian* 12th, 30th May, *Health Service Journal* 24th May, *BMJ* 26th May, BBC Online, and other media reports

Nursing leader bows out with a warning

Speaking at the Royal College of Nursing annual congress, retiring General Secretary Christine Hancock warned that without more nurses and extra money, health service modernisation would fail. Ms Hancock said, 'Elderly people lying on trolleys in corridors overnight, in the country with the fourth largest economy in the world, is nothing short of a third world service which we should be ashamed of.' She also warned that nurses would oppose any privatisation of the health service. She made a number of criticisms of private sector health care, provoking an angry response from the Independent Healthcare Association, which described her comments as 'an insult to the 660,000 nurses and care workers employed in the independent nursing and residential care sector.' Ms Hancock also condemned the government's refusal to fund free long-term personal care for the elderly.

Delegates at the conference opposed the planned return of matrons to hospitals wards. Both the Labour and Conservative parties have committed themselves to re-introducing the role, saying the public wants an authority figure on the wards. Nurses, however, say it is an outdated notion which brings back memories of 'Hattie Jacques-style hospitals'. They also voted to oppose mixed-sex wards, despite hearing claims that these might speed up patients' recovery, and that nurses get broader experience by working on wards where both men and women were cared for.

The congress narrowly backed a motion condemning the policy of recruiting foreign nurses to plug chronic shortages in the NHS. Nurses spoke out against the practice and called for an ethical code of conduct to regulate it. Thousands of nurses have been recruited to the UK from countries such as the Philippines and Zimbabwe. International Development Minister Clare Short told the conference there would be a continuing need to recruit from overseas but that it was important that the shortage of nurses in the NHS did not lead to the draining of 'scarce, precious, crucial expertise from developing countries.' She said the government had introduced a code of conduct

stipulating that the NHS should not recruit nurses from countries with a shortage of expertise, but that commercial agencies were not abiding by that guidance.

A debate featuring health minister John Denham, Conservative health spokesman Dr Liam Fox, and Liberal Democrat peer Lord Clement-Jones brought booing and jeering at the conference. Nurses showed disapproval of Labour's views on nursing pay and recruitment, private sector involvement in the NHS, and nursing care for the elderly in particular. However, they appeared to have no more enthusiasm for Tory politics.

• BBC Online

The changing face of nursing

Nurse-led pilot schemes have achieved a great deal, according to a report from the King's Fund think tank. In 1998 nine nurse-led sites were launched in England, as part of the first wave of personal medical services pilots. The pilots were designed to maximise the use of nursing skills, and to allow nurses to exercise leadership within the primary care team. Many of the pilots aimed to serve vulnerable populations often poorly served by general practice, such as refugees or homeless people. However, according to the report, the new model of care created some local controversy. Most hostility came from doctors when nurses tried to offer services to the mainstream population rather than to disadvantaged groups.

Meanwhile, health minister Lord Philip Hunt has announced training plans that will mean more nurses being able to prescribe a wider range of medicines and treatments for a broader range of medical conditions. The first nurses are likely to complete training in Spring 2002 and a total of around 10,000 nurses are expected to have undergone training by 2004. It is hoped that this move will offer real scope to reduce GPs' and hospital doctors' workload.

• *BMJ* 12th May, Press release (DoH)

Midwives meet

At the annual meeting of the Royal College of Midwives, midwives debated the possibility of industrial action. They say staff shortages mean they are unable to provide the necessary level of care to mothers, and low morale is leading to many midwives leaving the NHS. Health Secretary Alan Milburn, in a speech to the conference, outlined the government's plans to improve maternity care. The

government admit the NHS needs forty-four per cent more midwives by 2010. There are currently 36,000 working in the health services. Delegates at the conference also called for a comprehensive NHS home birth service for those women who want to have their baby at home, and debated the increased use of epidural pain-relief injections.

- The Royal College of Obstetricians & Gynaecologists is to undertake an audit of Caesarean sections in collaboration with the Royal College of Midwives, the Royal College of Anaesthetists, and the National Childbirth Trust. A spokeswoman said, 'This will look at how many Caesarean sections are taking place, how the decisions to proceed with this type of delivery are being made, and women's view in relation to the mode of delivery.' The result of the audit will be published in October. It is thought that the Caesarean rate in the UK is more than double that recommended by WHO.

- BBC Online

Physicians (RCP) believes that new shift patterns worked by specialist registrars in acute medicine are damaging patient care. Specialist registrars are doctors who are on five to six year higher specialist training programmes to become consultants. Many are training in both their chosen speciality and general internal medicine, which involves seeing patients with medical emergencies, not just those with a problem related to one particular specialist. It is these registrars who are experiencing the most problems with the shift system. Dr Fiona Gordon, chair of the RCP Trainees Committee, said, 'The shift systems were introduced to reduce junior doctors' hours of work, but they have now started to have a detrimental effect on patient care and our training. We must act quickly now to alter these shifts before they reverse the benefits which come from shorter working hours.'

- BBC Online, *BMJ* 5th, 12th, 19th May, Press release (RCP)

Doctors are discontented

On 1st May an estimated 1000 GPs took part in a one-day programme of industrial action, to protest at their heavy workload. Activities ranged from closed surgeries to dressing up and putting up posters to raise awareness of the crisis affecting general practice. However, the DoH dismissed the protest – organised by the journal *Doctor* – as a 'publicity stunt'.

A BMA survey of a hundred GPs across the UK published in May found that emergency patients, including paediatric and cardiac cases, have waited up to eight hours for a hospital bed. Other patients have waited months or years after being referred by their GPs for hospital treatment. Dr John Chisholm, Chairman of BMA's GPs' Committee said, 'First-rate family doctors feel their patients get a second rate NHS service – or worst. Many doctors say they are planning to retire early or leave the profession, rather than go on with the intolerable burdens of paperwork, bureaucracy, and the frustration they feel from fighting to get appropriate treatment for their patients.' Government targets – including a maximum forty-eight hour wait to see a family doctor – would be impossible to meet unless more GPs were recruited and more funds made available. 'Crisis in care: A GP dossier' is accessible on the BMA's website – www.bma.org.uk.

In May the BMA began balloting all 36,000 GPs in the UK over whether they would be prepared to resign from the NHS if new contracts were not agreed on by next year. The results are expected just before the general election on 7th June.

The Trainees Committee of the Royal College of

GMC moves towards doctor revalidation

The General Medical Council is to ask the government to introduce legislation to ensure five-yearly 'MOTs' for doctors. If the government agrees, the 'revalidation' tests will begin in 2004 and by 2009 all doctors will have been tested. The proposed revalidation scheme, which involves each doctor compiling a folder about his or her work, has already been tested in a pilot study. Two hundred and fifty doctors volunteered to compile folders, which they found a relatively easy task taking 6 hours on average. Eighty folders were selected for inspection by panels made up of doctors and lay people. Although certain problems arose – some doctors did not include enough information – it was decided that the 'folder and appraisal' system performed successfully.

The British Medical Association says it supports the GMC's call for legislation but BMA council chairman, Dr Ian Bogle, has criticised many aspects of the GMC's approach to revalidation as not having been 'fully thought through.' A one-day consultative conference will take place shortly that will allow the BMA and other critics to put forward their views.

Meanwhile, GMC President Sir Donald Irvine has said he will step down from the job six months early. During the six and a half years he has been at the helm, the GMC has had to face up to considerable controversy, with several high-profile cases involving doctors (notably the Bristol, Alder Hey, Shipman and Ledwood affairs) that have led to calls for tighter checks on the profession. Sir Donald said he had been elected to the job on a reform ticket and he

had now taken the council as far as he could. He has throughout advocated the establishment of a revalidation scheme.

- BBC Online, *BMJ* 5th, 19th, 26th May

New changes take managers by surprise

Senior managers in the NHS are reported to have been shocked by many of the new reforms planned for the health service, which were unveiled by health secretary Alan Milburn at the end of April. Mr Milburn said there would have to be 'major structural changes' (see *Health Insight* May) but senior managers have since said they were unhappy that such a sweeping public announcement should have been made ahead of any prior notification for NHS staff.

In particular, the managers are worried about plans to abolish the NHS Executive and reduce the number of health authorities, which will lead to job losses and, they say, could make it difficult to monitor the performance of primary care groups and trusts. Some managers do approve in theory of the reduction in the number of authorities but are concerned with the practical details; they feel the authorities that remain will be under-resourced.

The *Health Service Journal* and the King's Fund have conducted a survey of NHS managers as the election approaches. Most are broadly in favour of the targets in the government's NHS plan and around half intend to vote Labour – forty-eight per cent as compared with fifteen per cent Conservative and fourteen per cent Liberal Democrat. However, most respondents were concerned about the increase in their workload because of the rate at which new changes were being introduced and the number of directives issued by ministers. The majority of managers also doubt whether the targets in the NHS are feasible given the resources available.

- *Health Service Journal* 3rd May

Worrying cervical cancer screening audit

An audit of cervical cancer screening in Leicestershire has shown that one in three women may be given an incorrect result. The audit was carried out last year by an internal team of experienced clinicians at the Leicester Royal Infirmary. They studied 403 women who had been diagnosed with cervical cancer between 1993 and last year. The study showed that inaccurate smear tests led to

unnecessary suffering for many women, and the deaths of fourteen. Another sixty-four women, also given the all-clear, required more radical treatment – such as a hysterectomy – than might have otherwise have been needed if their smears had been analysed accurately. The government's 'cancer czar', Professor Mike Richards, insisted that the findings do not show that the screening programme is deeply flawed. He said no system could ever be a hundred per cent accurate. He also stressed that quality standards for smear tests had been improved since many of the women in the study were examined.

Despite 'scare stories' like this, the NHS cervical screening programme is generally regarded as a major success. Women are encouraged to go for smear tests at regular three to five-year intervals. Nearly 4.5 million smears are examined by pathology laboratories each year and are estimated to prevent up to 3,900 cases of cervical cancer a year. Death rates have fallen dramatically over the last decade, with about forty per cent fewer women dying from the disease compared with 1979.

– As if mirroring the Leicester experience, a major character in the soap opera *Coronation Street* is dying from cervical cancer. Alma Baldwin had a misdiagnosed cervical smear, and by the time she was re-called for a follow-up smear the cancer was irreversible.

- *BMJ* 12th May, BBC Online

Identifying child health problems early

Two new screening initiatives in newborn babies have been announced by public health minister Yvette Cooper. Subject to advice from the National Screening Committee, cystic fibrosis screening will be offered to all parents of new babies. New evidence from the US shows early screening can have significant benefits in diagnosis, treatment and quality of life for those babies who have the condition.

The first of twenty universal neonatal hearing screening pilot sites started in March; further sites will start shortly. Children screened by the pilot projects will benefit from having hearing impairments identified quickly and accurately; this allows parents access to support services and information earlier. In addition, a new network of counsellors is being set up to provide support and information for pregnant women and their partners about screening during pregnancy. This will ensure that expectant parents can make informed choices about which tests to have. New quality standards are being developed in screening for HIV, hepatitis, Down's syndrome, rubella, and syphilis.

- The charity Contact A Family (CaF) says a third of children with rare medical disorders are waiting more than two years to be diagnosed correctly. CaF's survey of twenty support groups in the UK, representing more than 3,000 families, was published to mark the launch of Rare Disorders Awareness Week. CaF chief executive Francine Bates said, 'Rare disorders are simply not given a high enough priority on the public health agenda. For many of these disorders there are treatments available which could at least alleviate, if not cure, the condition. Not to provide this is both shortsighted and more costly in the long term.' More than sixty children in the UK are born with a rare disorder every day and four million children and adults suffer from rare disorders, which are often chronic, progressive and disabling, and sometimes life-threatening.

- Press release (DoH), BBC Online

High Street medicines

A price war in the £1.6bn over-the-counter drug market is expected after the decision of the High Court in a case brought by the Office of Fair Trading (OFT) last October. OFT challenged the UK's last surviving example of resale price maintenance, arguing that it allowed drug companies to keep branded products artificially high. The Community Pharmacy Action Group (CPAG) had campaigned to keep RPM, claiming its abolition would lead to the closure of 12,000 local pharmacies. It argued High Street chemist shops would lose business and be forced to close if the supermarkets launched price-cutting wars.

The court found there was insufficient evidence that a significant number of pharmacies would close, and ruled that RPM was against the public interest. Tesco has already cut up to 40% from the price of some medicines; Asda and Sainsbury's have announced similar cuts. Shares in Boots, the biggest chain of pharmacies in the UK, fell 4.5% on the news. A spokesman for Boots said he was 'disappointed' with the court's decision and estimated the move would knock £15m off a full year's profits.

- BBC Online

Painkiller restrictions pay off

The restriction on the number of painkillers than can be bought at UK supermarkets and chemists has led to a big cut in fatal overdoses. Legislation introduced in 1998 limited the number of tablets in packets of common

painkillers such as paracetamol, and salicylates such as aspirin. Packets of paracetamol sold in supermarkets can now contain only sixteen tablets; those from chemists a maximum of thirty-two. Any purchase of a hundred or more tablets requires a prescription. Previously there was no limit on the number of tablets sold by chemists, while supermarkets could sell a maximum of twenty-four.

A team from the Centre for Suicide Research at Warneford Hospital in Oxford studied the impact of the change in the law in the first year after its introduction. They found that the number of deaths from paracetamol poisoning fell by twenty-one per cent and from aspirin by forty-eight per cent. The number of liver transplants performed as a result of paracetamol poisoning also fell by two-thirds. Dr Geoffrey Brandon, of the Paracetamol Information Centre, said, 'This is a soundly based and thorough study which confirms earlier brief reports of the reduction in self-harm following the introduction of smaller maximum pack sizes.' Before the new laws, overdoses of paracetamol accounted for 40,000 hospital referrals a year and between 100 and 150 deaths. Aspirin overdoses accounted for about 5,000 hospital annually and about 60 deaths.

- BBC Online

University's grant goes up in smoke

The furore created by Nottingham University when it accepted £3.8m from British American Tobacco (BAT) has continued, with the resignation of the university's Honorary Professor of Medical Journalism – *BMJ* Editor Dr Richard Smith.

Dr Smith argued in the *BMJ* against acceptance of the grant, to fund an international centre for the study of corporate responsibility. He also allowed the university to put its case in the journal. The *BMJ* then held a poll of its readers, asking them two questions: should the university return the money to BAT, and should Richard Smith resign as professor of medical journalism if it did not. An overwhelming majority (85%) of the 1075 voters were in favour of the university returning the money, and a small majority (54%) voted in favour of Dr Smith's resignation after a refusal.

More seriously for the university, the Cancer Research Campaign has decided that £1.5m which was to be raised through an appeal to help build new research facilities in Nottingham will now be donated to Newcastle University instead. The university has also lost a team of cancer researchers led by Professor David Thurston, who has resigned from his post as professor of experimental

cancer chemotherapy and director of the Gene Targeted Drug Design Research Group.

- *BMJ* 19th, 26th May

More smoking news

The European Parliament is preparing to put in place some of the world's toughest antismoking legislation, in a bid to reduce drastically the number of deaths and illnesses related to tobacco. Under EU rules agreed this month, national governments will be able to insist that from September 2002, tobacco manufacturers place graphic pictures of rotting teeth and cancerous lungs on cigarette packets.

Although some EU governments may decide not to have such visual warnings, from this date every cigarette packet will have to devote thirty per cent of its front and forty per cent of its back to statements such as 'smoking kills'. They must be printed in bold black type on a white background and be surrounded by black borders to give them greater prominence. By the end of December 2002 tobacco companies will have to introduce further health-related measures and must submit, on an annual basis, a list of ingredients contained in their products. From September 2003 descriptions such as 'low tar', 'light', and 'mild' will be banned; from January 2004 the tar content of cigarettes will be reduced from 12mg to 10mg, and a ceiling of 1mg will apply to nicotine.

- *BMJ* 26th May

Not so easy for NICE

A sixth wave of medical treatments will be considered by the National Institute for Clinical Excellence: drugs for colorectal cancer, breast cancer, epilepsy, diabetes and kidney conditions are included. Electroconvulsive therapy, the controversial treatment for a range of mental conditions will also come under NICE scrutiny. The institute's latest work programme was announced shortly after it issued guidance recommending more widespread and consistent use of drugs for pancreatic and brain cancer.

Meanwhile, many doctors have openly disagreed with some of the decisions reached by NICE and, in some cases, have questioned the body's political independence. The controversial flu drug Relenza has again come under the spotlight; it was at first not recommended by NICE, which later changed its decision on the basis of evidence that some specialists have described as flimsy. One leading cardiologist has said he disagrees with the NICE position on the anti-blood clotting agent Reopro, which he regards

as too expensive to use to the extent called for by NICE.

NICE is also under fire for delays in reaching final decisions on the use of beta-interferon and Copaxone for the treatment of multiple sclerosis. The MS Society says NICE is treating patients in a 'cavalier way'.

However, NICE Chief Executive Andrew Dillon said, 'What we have done so far is already benefiting millions of people, and it is really making a difference to solving the entirely unsatisfactory postcode prescribing arrangements.'

Postcode prescribing has, nevertheless, yet to die. The media has given a high profile to the case of an Alzheimer patient who received the drug Aricept (recommended by NICE) free of charge when she lived in Swindon, but on moving to Northampton to be near her daughter was told she would have to pay for it. Her eighty-four year-old husband makes regular journeys to Swindon, where a consultant is still willing to prescribe the drug for her.

- Press releases (DoH) *Health Service Journal* 17th May, BBC Online

Clinical governance in Scotland

Guidance issued by the National Institute for Clinical Excellence (NICE) does not apply to Scotland, which has yet to get an equivalent system off the ground. However, the Health Technology Board for Scotland (NTBS) will now be issuing 'Scottish responses' to NICE rulings. NTBS Director, Dr Karen Facey, said most NICE advice would be equally applicable to Scotland but in some cases Scottish disease patterns were different. Other factors could also vary; for example, a NICE decision that a drug should only be available at specialist centres might not be appropriate for Scotland, as many patients would be faced with unacceptably long distances to travel.

It is generally reckoned that the pace of NHS reform is slower in Scotland. In a recent interview, Scottish health minister Susan Deacon said, 'There have got to be some hard looks at system failures. I am very, very struck by the extent to which the changes have not taken place. It is taking much longer than I had hoped.'

- *Health Service Journal* 10th May

Research hindered

Many hospitals have stopped sending data on cancer patients to the UK National Cancer Registry, leading to fears that cancer research in the UK may be left irretrievably damaged. The registry is acknowledged to be one of the

best in the world but without access to new data researchers will be unable to follow trends or detect cancer 'hotspots'.

The General Medical Council has been blamed for the problem. It issued guidance to hospitals last year to the effect that, since the Data Protection Act 1988 became law, the passing on of private information might be illegal. Professor Gordon McVie, Director General of the Cancer Research Campaign, said, 'The erosion of data will almost certainly lead to an increase in cancer deaths unless action is taken quickly.' An amendment to the Health & Social Care Bill, which has just been passed by parliament should make it possible for registries to collect patients' data without their consent.

Researchers also feel that their work is being damaged by the fall-out from the Alder Hey affair. Parents of children who have died are now very reluctant to allow a postmortem. The paediatric pathology service is said to be close to collapse. Several consultants have left the specialty and there are main vacant posts across the country that cannot be filled.

Inadequate funding always poses problems for researchers but some health problems fare worse than others when it comes to attracting financial backing. An investigation by the Stroke Association has found that money spent on stroke research is fifty times less than that spent on heart diseases or cancer. The association blames ageism for the lack of interest in stroke, as most victims are elderly, yet there are 125,000 strokes in the UK every year accounting for one in ten deaths. Care for the 250,000 disabled stroke survivors accounts for six per cent of total NHS and social services expenditure – £2.3bn a year.

- BBC Online, *BMJ* 19th May

Money for the NHS

Health secretary Alan Milburn has presented the DoH's Departmental Report for 2001–2002. He spoke of the increases in NHS funding, which he described as 'the largest level of sustained real terms growth over any four-year period in NHS history'; government expenditure on the NHS had risen since 1999 by over fifty per cent. 'Now that questions about funding have been answered, it is time to concentrate on the real issue – delivering better health, and faster, fairer, more convenient services. We have to change the way the NHS works to make the most effective use of these extra resources. The report may be seen in full on www.doh.gov.uk/dohreport/report2001/dr2001.html.

Also during May, Mr Milburn announced additional funding packages for the NHS. There will be £100m for maternity services. The number of NHS midwives will be increased by 2000 within the next five years; midwives

returning to the service will each receive a payment of £1500. The 109 acute hospitals in England will each be 'fast-tracked' extra funding for new equipment. The total sum will amount to £105m. Senior clinical staff in each hospital will decide how its money should be spent.

- The Chairman of the Commons Public Accounts Committee has said that clinical negligence claims against the NHS are 'spiralling out of control'. There has been a seven-fold increase in claims over the last three years. Claims settled last year totalled £386m, and the service still faces claims totalling £3.9b – 10% of a single year's budget.

- Press releases (DoH), BBC Online

Boost for dentistry

NHS dental practices in England will be offered cash from a £35m dentistry modernisation fund. Up to £6,500 per practice will be available for such purposes as: new equipment, new IT systems, improving disabled access, and refurbishing and redecorating surgeries and waiting areas.

Health minister Lord Hunt said that, together with new funding already provided for dentists' continuing professional development, the money would 'make a real difference to dental teams and their working environments.' He also announced that the government would be taking steps to improve access to NHS dentistry for patients not registered with a dentist who, till now, have only been entitled to a limited range of basic and temporary treatments. A full review of the dental workforce in England, the first since 1987, has been announced as part of the government's response to a select committee report on NHS dentistry. The full response may be seen on www.doh.gov.uk/dental/strategy.

- Press releases (DoH)

New menu for hospitals

A highly publicised £40m programme to improve the standard of hospital food is now under way. The services were engaged of TV chef Lloyd Grossman, assisted by six other leading chefs, to devise new menus that would be more palatable to patients. One hoped for result would be a reduction in the amount of food that patients do not eat, estimated to amount to around £45m-worth of food every year. Another innovation will be the introduction of a twenty-four hour 'ward call' service, similar to a hotel room service.

Opposition parties have dismissed the new arrangements, particularly the involvement of Lloyd Grossman, as a

gimmick. Help the Aged said more needed to be addressed than just the menus; many old people in hospital were not getting the support they needed to help them to eat. Around £500m is spent on 300m NHS meals every year.

- Press release (DoH), BBC Online

Royal College launches international examination

Four pioneer sites have been chosen by the Royal College of General Practitioners where doctors overseas may take the College's new international examination – MRCGP(Int).

The MRCGP is widely regarded as an end-point assessment for general practice for doctors completing vocational training, although summative assessment remains the national standard. The MRCGP(Int) is intended to provide a 'gold standard' for family doctors abroad undertaking a general practice/family medicine examination. The RCCP says it will work closely with colleagues in the pilot countries to develop a practical and viable examination and accreditation system. The four pilot countries are: Kuwait, Oman, Brunei and Egypt. For further details contact the RCGP press office – jblissett@rcgp.org.uk.

- Press release (Royal College of General Practitioners)

In brief

– The government has given a temporary reprieve to Community Health Councils, which were scheduled for abolition under the NHS Plan – a move criticised from many quarters. The reprieve is the result of objections to the abolition from the House of Lords and the government's need to rush its Health & Social Care Bill through parliament before the election. Labour's pledge to change patient advocacy arrangements within the NHS still remains but the Association for Community Health Councils in England & Wales welcomed the delay, as it would provide 'opportunity for reflection'. Some observers have said the result may be that Community Health Councils will survive after all.

- *BMJ* 19th May, BBC Online

– More than one in ten British children are carrying 'superbugs' resistant to one or more antibiotics, according to a new study. The proportion of adult carriers could be even higher. The superbugs are no immediate threat to those carrying them but some, for example MRSA, can cause dangerous infections after an operation.

Michael Millar, of St Bartholomew's Hospital and the Royal London School of Medicine, who wrote the report warned, 'This may be just the beginning of something that will take off in a big way. We need policies to control antibiotic resistance that go across boundaries.' Marcos Espinal, leader of WHO's surveillance project on drug-resistant tuberculosis described the British research as 'very important'.

- *New Scientist* 17th May

– The advice in some diet books could actually be harmful. *Which?* magazine, published by the Consumers' Association, asked experts in nutrition, exercise and psychology to assess the most popular diet books on the market. They praised those which provided balanced nutritional advice, stressed the importance of exercise and spelled out who should *not* follow the diet. But some diet books gave 'potentially dangerous advice'. A spokesman for the British Nutrition Foundation said, 'We are concerned with the large number of fad diets currently on the market, some of which do not stand up to scientific scrutiny. Despite the hype, key advice on healthy eating has changed very little over the past few decades.'

- BBC Online

– A 71-year-old man has paid over £6,000 for heart surgery in India after being told he faced a year-long wait for the same operation in the UK. Ken Roche, who was suffering acute angina and breathing difficulties, was worried he would not survive the wait to get the operation on the NHS. His daughter, who lives in India, arranged for the quadruple heart by-pass operation in Bombay. The operation was carried out by a London trained surgeon. Mr Roche was referred to the Royal Brompton Hospital in London earlier this year where it was decided he did not require immediate surgery and he was therefore offered an appointment for January 2002.

- BBC Online

– The inquiry into mass murderer Harold Shipman is to investigate the deaths of 466 of his former patients. He has been convicted of 15 murders, but there are fears that he may have killed more than 300 people. Some 260 new inquests into former Shipman patients will be put on hold until after the findings of the inquiry are known. High Court Judge Dame Janet Smith, who is chairing the inquiry, told relatives and friends of suspected victims that she would try to reach individual decisions on the death of the 'enormous' number of patients of Shipman about whom there had been concerns. 'I recognised the need for families to know the truth,' she said.

- BBC Online

- Suicide among teenage males has reached 'crisis' point with a seventy-two per cent increase in reported cases over the last twenty years. Hanging has replaced self-poisoning from car exhaust fumes as the most common suicide method among fifteen to nineteen-year-old men, according to research published in the *British Journal of Psychiatry*. Psychiatrist Dr Mike McClure, who carried out the research, says statistics underestimate the true extent of the problem because coroners prefer to classify unexplained deaths as 'undetermined' or 'accidental', if there is any doubt. Dr McClure said, 'It is always a mistake to look for one single cause, but it is probably a crisis of confidence among these young people.' Health psychologist Dr Rory O'Connor believes the growing suicide rate reflects the urgent need for society to address the wider underlying issues. 'Suicide is an index of an ill society,' he said. Research shows the suicide rate among girls in the same age group decreased slightly over the same period.
 - BBC Online
- An anti-abortion group has been given leave for a full legal challenge of chemist sales of emergency contraception. The High Court is allowing the Society for the Protection of the Unborn Child to bring a judicial review of the decision to make the medication more easily available to those over sixteen. It was previously only available on prescription from a doctor. The High Court decision does not mean a reversal of the current policy, it simply allows the case to be heard in full. An attempt has already been made in the House of Lords to prevent the medication being sold at chemist shops. However, this was defeated by peers.
 - BBC Online
- The genetics watchdog in Britain has recommended a three-year ban on the use of genetic test results by insurance companies, after the industry failed to prevent its members from using unapproved tests. The Human Genetics Commission has added an extra twelve months to the moratorium on the use of genetic test results recommended by MPs in April. The commission said time was needed to gather more information on the complex issues involved in using genetic data to calculate premiums. The Association of British Insurers is criticised in the commission's report for allowing its members to flout rules on the use of genetic test results that it had voluntarily agreed to. Baroness Helena Kennedy, QC, Chairwoman of the commission, said, 'Our consultations have shown very real public concern on the issue of genetics and insurance ... We have profound misgivings about the industry's handling of this information and its ability to keep its own house in order.'
 - *BMJ* 12th May
- Over 150 NHS trusts have now been authorised by the Retained Organs Commission to begin the process of informing families and relatives whether organs have been retained following post-mortems; more are likely to be authorised over the next few weeks.
 - Press release (DoH)
- A key measure to improve patient safety has been announced by health minister Lord Philip Hunt. A new advisory group, the Committee of Safety of Devices, is to be set up to advise ministers on a wide range of issues concerning medical devices and support the work of the Medical Devices Agency.
 - Press release (DoH)
- The average man or woman from Manchester lives five years less than counterparts elsewhere in the UK. The latest life expectancy charts, released by the Office of National Statistics, reveal wide variations from region to region across England and Wales between 1997 and 1999. On average in the UK, men live to approximately seventy-five years old, and women to eighty. Overall life expectancy is a reliable measure of the level of health in general throughout life, as well as being a guide to the quality of health services. Manchester also came bottom of other statistical tables measuring access to hospital care. Although Scottish figures are not included in the latest release, previous calculations suggest that in some areas of Scotland, such as inner-city Glasgow, life expectancy is even lower than in Manchester – falling beneath the seventy-year mark.
 - BBC Online
- Patient information leaflets have little impact on the number of patients visiting their doctors for minor illnesses, according to research. Doctors are keen that patients learn more about minor illnesses, in the hope that it may reduce pressure on busy surgeries – particularly the flu season. However, a study published in the *BMJ* suggests the advice leaflets are not as effective as hoped. The authors of the study, GPs from the Southampton area, said, 'Most patients find information about minor illness provided by post useful, and it helps their confidence in managing illness. Information may reduce the number attending commonly with minor illness, but the effect on overall contacts is likely to be modest.'
 - BBC Online
- A report says hospitals should adopt better procedures for checking the qualifications and experience of locum consultants, and monitoring their performance. The Commission for Health Improvement (CHI) has asked

the DoH to consider establishing a national database to allow trusts to access doctors' qualifications, and to equip all locums with a card that records their employment history and qualifications. The recommendations follow an investigation carried out by CHI after it came to light that the laboratory results of a consultant histopathologist Dr James Elwood, employed as a locum by four different trusts, were causing concern. CHI concluded that a national shortage of doctors means too much reliance on locums, especially in some fields such as histopathology. 'Employing Locum Consultants: Matters Arising From the Employment of Dr Elwood' is available on www.chi.nhs.uk.

- BBC Online

– The number of orthopaedic consultants has increased by seventy-eight per cent over the last twenty years but waiting lists have not fallen, according to a study at Birmingham University's Health Service Management Centre. For the government target of a maximum six-month waiting time to be reached, extra 85,000 orthopaedic patients will have to be admitted over the next five years. The increased effectiveness of hip and knee surgery has been responsible for much of the increase in orthopaedic surgery. Surgeons themselves say they are overburdened with paperwork. However, the authors of the study say the situation could be improved if the surgeons confined their lucrative private work to weekends and evenings.

- *Health Service Journal* 17th May

– A survey of nurses, conducted by *Nursing Times* and the Nuffield Trust, found they were often critical of the care that doctors give to dying patients. Many nurses said the doctors they worked with were not good at pain control. Some said they found it difficult to get doctors to help them when trying to care for patients who were dying. The authors of the report said nurses needed doctors to prescribe pain relief, particularly at night, but many doctors tended to withdraw from dying patients, leaving their care to nurses. The Nuffield Trust says palliative care is often inadequate and has called for a national audit to ensure that high standards are maintained across the country.

- BBC Online

– A new book makes the case for employing disabled people. *Unblocking the Evidence*, published by the Employers' Forum on Disability, says 'business can reap rewards from embracing disability' but fear, myth and stigma surrounding the UK's 8.7m disabled people are responsible for keeping them 'on the margins of mainstream economic life'. It calls for action by

government and employers to get more people into work.

- Press release (Employers' Forum on Disability)

– The DoH has published a report from the Committee on the Medical Effects of Air Pollutants (COMEAP) estimating the effect of long-term exposure to particulate air pollution on life expectancy. COMEAP, which was appointed by the Chief Medical Officer, was set up in 1992 and is chaired by Professor Stephen Holgate. The report reviews scientific evidence which indicates that people exposed to fine airborne particles over the long term are at greater risk of premature death, particularly from heart disease. The effect of day-to-day changes in pollution (short-term effects) was not the main focus of this report. The report is on the COMEAP website – www.doh.gov.uk/comeap/index.htm.

- Press release (DoH)

– A study in Birmingham, backed by the British Heart Foundation will investigate possible links between heart attacks and air pollution. University of Birmingham researchers will use advanced equipment to study the effects of different pollutants on the cardiovascular system.

- BBC Online

– Clinical trials of a vaccine for cervical cancer are being conducted in Cardiff, backed by the Cancer Research Campaign. The trials involve around twenty women with pre-cancerous cells but they are seen as being part of efforts to develop a vaccine against advanced stages of the disease. The vaccine attacks the human papilloma virus, present in around ninety per cent of pre-cancerous cells – though only one per cent of such cases ever develop into cancer.

- BBC Online

– Liver cancer deaths have increased in the UK, as they have in many other countries, over the last few years. Researchers at the Imperial College School of Medicine say the UK rise is the result of an increase in one particular form of liver cancer – intrahepatic cholangiocarcinoma, which arises from the bile ducts. There were 38 deaths from this cancer in England and Wales in 1968 compared with 864 last year. Improved diagnosis accounts for some of the increase. Further studies are needed to determine the risk factors for this cancer.

- BBC Online

– A new air ambulance service has been launched in Scotland, with two helicopters that are faster, have more capacity and are better at flying at night and in poor weather than their predecessors. Specialist paediatric incubators are among the facilities on board. The

upgraded Helicopter Emergency Medical Service was inspected at Edinburgh airport by First Minister Henry McLeish and Health Minister Susan Deacon. Mr McLeish said the new service would ‘...make an immense contribution to providing first class health care for the people of Scotland.’

- Press release (Scottish Executive)
- New figures published by the NHS show that the number of doctors in Scotland is falling. There has also been a drop in the number of doctors in training. The BMA has said it is concerned about the situation, particular the decrease in the number of GPs. In April the Scottish Executive announced an £11.5m investment intended to increase the number of junior doctors by 375 – a 9% increase.
- BBC Online
- The Family Planning Association has lodged papers with the High Court in Belfast seeking clarification of the

law on abortion in Northern Ireland, and how it differs from the position in the rest of the UK. The 1967 Abortion Act does not apply to Northern Ireland but the Department of Health accepts the legality of abortion in some circumstances. The FPA says this has led to confusion which needs to be resolved. Many women travel from Northern Ireland to the mainland for abortions; the FPA says 40,000 have done so in the last 20 years.

- BBC Online
- A successful vaccination programme for chickens has led to a dramatic drop in salmonella in eggs. The Advisory Committee on the Microbiological Safety of Food says the scheme has worked well and has praised the action the industry has taken to restore consumer faith in eggs. The number of cases of salmonella has been more than halved since vaccination was introduced three years ago.
- BBC Online