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## Health in the news

Britain's family doctors may no longer be paid according to how many patients they have on their lists if the Health Secretary gets his way (see 'Critical new contract for GPs').

It will be interesting to see if the government listens to reason should the doctors reject the new contract. It seems that it did take notice of the nationwide protest at plans to close small hospitals (see 'Small is OK after all').

The elderly have quite a high profile this month. Thousands of them may be claiming compensation (see 'Elderly wrongly charged for care'.) and many of them face staying in hospital when they should be discharged (see 'Bed blocking bill faces delay').

On the research front we have yet more news about the MMR vaccine (see 'The continuing story of the MMR vaccine') and some exciting news about the detection of breast cancer (see 'New device spots breast cancer early'). There is also a research story which makes the national average of 2.2 children seem a healthy option (see 'Heart risk linked to big families').

The first clinic in the UK to tackle juvenile delinquency by studying what offending children eat has opened (see 'Eating your way out of crime').

The good news is that all haemophilia patients are to be given a synthetic blood-clotting factor (see 'Victory for haemophilia patients').

The bad news is that a report into the first hospital built under the government's private finance initiative says it is 'badly run' (see 'Unwelcome report for flagship hospital').

## Critical new contract for GPs

Family doctors in the UK will be paid according to the quality of the treatment they offer under proposals for the biggest reforms of primary care since the foundation of the National Health Service. GPs will receive pay rises of between ten and fifty per cent – depending on the services they offer and how well they comply with best treatment practice – which could put some on salaries of more than £100,000 a year. At present, their pay is based mainly on how many patients they have on their lists. However, many GPs fear that even this will not be enough to attract young doctors to the profession, which is short of some thousand doctors.

Under the new provisional agreement, which was negotiated by the British Medical Association and the NHS Confederation, future funding will be linked to outcomes and services. One third of a GP's income could depend on how well a doctor treats a patient against pre-defined criteria for diseases such as heart disease, cancer and diabetes. Another third could come from offering a greater range of services such as minor operations, drug rehabilitation, or even chemotherapy currently provided by hospitals. The government hopes this will lessen the pressure on hospitals and cut waiting lists. It is also hoped that all Britain's 36,000 GP practices will make more use of nurses, physiotherapists and other professionals to provide different services under one roof. More and more GP surgeries may include a pharmacy. In addition GPs will be able to opt out of providing out-of-hours services – that will become the responsibility of local primary care trusts.

The new contract has been broadly welcomed. John Chisholm, chairman of the BMA's GPs' Committee said, 'This is an historic step change in the level of funding for general practice. It modernises primary care by focusing on quality and it offers hope for GPs who are struggling to cope.' The package is complex, however, and GPs only have until April to work out exactly how much more money it is worth. It has come at a critical time for the NHS and for Alan Milburn, the Health Secretary. Having had the consultant's contract rejected he cannot afford to lose another.

• *The Times* 22<sup>nd</sup> February



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## Small is OK after all

The government has abandoned its plans to close small hospitals after huge public opposition. New guidance published last month says 'biggest is not always best'. The document is called 'Keeping the NHS Local – a New Direction of Travel', although the government flatly denies that this title represents a U-turn. The change in policy is the result of new approaches, says the document, such as better IT systems, more day surgery, and better use of medical staff. The NHS document admits that the better services and lower costs that are supposed to result from hospital mergers do not always arrive. Alan Milburn, the Health Secretary, said, 'Patients want more, not fewer, local services. Changing local health services does not necessarily mean centralising services with fewer, larger "super hospitals".'

There have been a series of high-profile campaigns to save threatened hospitals with petitions, marches and applications for judicial review. One hospital consultant, Richard Taylor, won a parliamentary seat (Wyre Forest) in 2001 on a wave of protest about the closure of the accident and emergency department at Kidderminster Hospital. He said he would be arguing for a reversal of the closure, in spite of the health department insisting that advice in the document was not retrospective.

– When it comes to GP practices smaller ones give equal quality of patient care compared with their larger counterparts, according to researchers from University College, London. Professor Azeem Majeed and his colleagues focused on sixty-two general practices in southwest London. They found little difference in the care offered to patients with ischaemic heart disease by small and large GP practices.

• *The Times* 15<sup>th</sup> February, BBC Online

## Gene therapy breakthrough

Scientists have developed a more effective way to carry out gene therapy without the risks of current methods. The modification of genes offers the potential to treat or cure many diseases. However, the use of viruses to deliver the modified genes to the target tissue is not always safe, and other methods do not seem to work well. The latest technique, developed by scientists at Imperial College London and the Medical Research Council in the UK, appears to be effective, and does not require the use of viruses. It works by combining the use of microbubbles and ultrasound – already in use to improve patient ultrasound scans in the heart, liver and many other areas.

So far the technique has only been tested on skeletal muscle in mice, but it is hoped it may eventually be used to treat muscular dystrophy in children. Researcher Dr Martin Blomley said, 'This promising study suggests that there may be a less invasive and more efficient, safe and accurate technique for targeting tissue, than those currently in use. Now we've found a good delivery system, we need to build on the research to improve the technique and assess the possible impact it could have on diseases such as muscular dystrophy, cancer, and diseases of the heart.'

• BBC Online

## New device spots breast cancer early

In Britain, breast cancer affects one woman in ten, and is the biggest cause of cancer deaths among them. Now an ingenious advance in mammography may make it possible to detect cancer at a much earlier stage. Scientists at University College London have discovered that tumour cells give away their presence by scattering X-rays in a unique way, making them much easier to pinpoint among healthy cells.

The team has developed a device, called Diffraction Enhanced Breast Imaging (Debi) to measure this effect and so identify potentially cancerous cells. The device has been tested on breast tissue from patients undergoing breast reduction operations and from biopsies. UCL scientist Dr Robert Speller said early results had been promising. 'We should be able to pick up something just four millimetres in diameter,' he said, 'where conventional mammograms can only easily spot ten to twelve millimetre lumps.'

• *New Scientist* 20<sup>th</sup> February

## Elderly wrongly charged for care

Thousands of elderly and disabled people may be able to claim compensation because they have been wrongly charged for long-term care. A report by the independent Health Service Ombudsman has found evidence to suggest officials are wrongly making people meet the costs of nursing home care. The Ombudsman, Ann Abraham, upheld four complaints from the families of individuals who were billed for their care. In each case, the individual had an underlying medical condition that required them to have round-the-clock care. All were required to pay nursing home fees, despite Department of Health guidance and a 1999 court ruling stating that the costs of long-term care must be met by the NHS if the needs of the patient

are primarily health-related. Health authorities have since been ordered to reimburse those costs.

In her report, Ms Abraham said health authorities were failing to follow the government's guidelines. Charities and opposition politicians say the report is just the 'tip of the iceberg' and that thousands more could be entitled to money back. The Liberal Democrats, which brought the cases to the attention of the Ombudsman, welcomed the report, as did the charity Age Concern. Its Director General, Gordon Lishman, said there were, 'hundreds, certainly, and probably thousands of people' who had been wrongly charged between £400 and £600 week.

- BBC Online

## Eating your way out of crime

The first clinic in Britain to tackle juvenile delinquency by studying what children eat, then treating them with nutritional medicine and psychotherapy, has opened at Teesside University in Middlesbrough. The Cactus Clinic sprang from the work of the late Professor Steven Baldwin and Janice Hill, who runs the Overload Network, an Edinburgh-based charity for children with behavioural disorders. Their approach was based on a wealth of global research into the effects of vitamins, minerals and other compounds such as amino acids on brain chemistry.

Last year a study in the *British Journal of Psychiatry* suggested that reoffending by juvenile delinquents could be slashed by a quarter if they improved their diets. A study of 230 inmates at a young offenders' institution saw the group given pills containing vitamins, minerals and essential fatty acids commit twenty-five per cent fewer offences than the group on placebo capsules. For serious offences, including violence, there was a fall of nearly forty per cent. There was no decline in reoffending for those taking dummy compounds.

The Cactus Clinic's consultant is Peter Bennett, a former officer with West Yorkshire police. He stumbled upon the work of a number of nutritionists during a study sabbatical at Oxford University. When the Police Force did not take his findings seriously, he quit his job and trained as a nutritionist. He continues to get remarkable results from his patients. However, despite evidence that alternative treatments may work, society, mainstream medicine and the prison authorities remain unimpressed. 'It's a crazy notion that we can accept that ten pints of beer – which, after all, is derived from wheat – can affect behaviour, but not other foodstuffs,' said Janice Hill.

- *Guardian* 23<sup>rd</sup> February

## The continuing story of the MMR vaccine

Yet more research into the MMR vaccine has concluded that it does not overload a child's immune system, preventing it from fighting other infections. It had been feared that the combined measles, mumps and rubella jab might be too much for a young child. To test the theory researchers from the Public Health Laboratory Service looked at serious bacterial infections such as septicaemia, pneumonia and meningitis amongst one to two-year-olds, as MMR is the only vaccination given to children of that age. If it did affect the immune system, the researchers said, they would have expected to see an increase in infections just after children had been given the jab. The researchers found that there was no evidence that having the MMR vaccination increased the risk of developing an infection then, compared to before having the jab or a long time after.

Demand for the single measles and mumps vaccines has soared as parents lose faith in the triple MMR vaccine, according to figures from the Medicines Control Agency (MCA). In the year 2000 there were 1,376 doses of the measles vaccine imported into the UK; this figure had risen to 71,859 by 2002. For mumps 825 doses were imported in 2000, rising to 39,089 in 2002. These figures are for the number of doses that the importers told the MCA they were planning to import. It does not necessarily mean that these were the actual amounts imported, supplied and administered.

- *The Times* 22<sup>nd</sup> February, BBC Online

## Heart risk linked to big families

People who have big families appear to be at increased risk of heart disease, research suggests. Two British studies of nearly 10,000 men and women found that people who had two children were at the lowest risk of developing coronary heart disease (CHD), whilst those who had more than two children appeared to have a significantly increased risk – and the risk became larger for each additional child. The risks were also higher for those people who had just one child, or who remained childless.

Lead researcher Dr Debbie Lawlor, of the University of Bristol, said 'Parents of large families tend to be poorer and also have less healthy lifestyles, which explains some of their increased CHD risk.' She said the most likely explanation for the apparent increased risk among people

with less than two children was that they were likely to suffer from general ill health. This could explain their increased risk of CHD, and their reduced fertility. The study was part-funded by the British Heart Foundation.

- *The Times* 18<sup>th</sup> February

## Bed blocking bill faces delay

Plans to free up hospital beds could be delayed by at least a year by a government defeat in the House of Lords. Government ministers want to introduce fines for local authorities that fail to provide the required home-care or suitable accommodation for patients waiting to be discharged. Conservative and Liberal Democrat peers, however, say social services still lack the necessary staff and facilities. If they win an amendment to the Community Care (Delayed Discharges) Bill it will delay the scheme until April 2004.

Meanwhile, more than 40,000 elderly people remain in hospitals in England despite being fit enough to leave. According to the NHS watchdog, the National Audit Office (NAO), one out of every three will wait for more than a month to be discharged. NAO head Sir John Bourn said, 'This significantly reduces their quality of life and undermines the ability of hospitals to treat more patients and meet testing targets.' Local authorities have come in for much criticism. The Independent Healthcare Association said their 'scandalous misuse' of government funding had caused the current problems.

- BBC Online

## Victory for haemophilia patients

More than 4,000 patients with haemophilia in England are finally to be given synthetic blood clotting factor to minimise the risk of future infections through donated blood plasma. Hundreds are already infected with HIV and thousands with hepatitis C because of contamination, and some think they might have unknowingly contracted variant CJD as well, without yet showing symptoms. The Haemophilia Society, the national patient group, has demanded £522 million compensation for 2,800 haemophiliacs unwittingly infected with hepatitis C.

All British patients will be given access to synthetic clotting factor, known as recombinant. Patients in Scotland, Northern Ireland and Wales have long had that alternative – as, since 1998, have those diagnosed when children in England. Karin Pappenheim, chief executive of the

Haemophilia Society said recombinant 'is now seen as the safest modern treatment'. Hazel Blears, the health minister, said the switch, costing £88 million over three years, would begin with treatment for the 1,500 most severe haemophilia patients. Doctors would have to recommend the switch in individual cases. The government is under pressure to hold a public inquiry into the contamination scandal.

- *Guardian* 13<sup>th</sup> February

## Unwelcome report for flagship hospital

An official investigation into the first NHS hospital built with private money has found it is run badly. A report by the Commission for Health Improvement says North Cumbria Acute Hospitals NHS Trust lacks a clear strategy and is not treating some patients quickly enough. The trust includes Cumberland Infirmary in Carlisle, which was built under the government's controversial private finance initiative (PFI) scheme. The report came less than a week after Nick Wood, the trust's chief executive, resigned just eighteen months into the job. The trust was created by the merger of Cumberland Infirmary and the West Cumberland Hospital in Whitehaven, forty miles away. The CHI report suggests the merger and the PFI scheme have contributed to many of the trust's problems, including tensions between the two hospital sites.

- BBC Online

## Appointment

Dr Peter Homa has been appointed as shadow chief executive of the Commission for Healthcare, Audit and Inspection. Dr Homa, currently chief executive of the Commission for Health Improvement, had been widely tipped for the job, which he will take up this month.

- *Health Service Journal* 20<sup>th</sup> February

## In brief

- A consultant paediatrician misdiagnosed 618 children by wrongly interpreting their symptoms as epilepsy. An official enquiry said that Andrew Holton, a consultant at Leicester Royal Infirmary, got 31.8% of his epilepsy diagnoses wrong. However, the doctor escaped disciplinary action after evidence from the British Paediatric Neurology Association that this rate of epilepsy misdiagnoses by generalist paediatricians was 'not unusual'. The association's president, Richard Newton, said that mistakes would not come to the attention of

- one of Britain's sixty-three specialist paediatric neurologists until the children failed to respond to epilepsy treatment.
- *Guardian* 5<sup>th</sup> February
  - The UK's Food Standards Agency issued a warning last month that pregnant women, breastfeeding mothers, and women intending to become pregnant should limit the amount of tuna fish they eat. There are concerns that tuna, shark, swordfish and marlin contain levels of mercury that could cause brain damage in unborn or young babies. Women in these categories should not eat more than two medium-sized cans or more than one fresh tuna steak a week.
    - *Daily Telegraph* 18<sup>th</sup> February
  - The government is investing more than £4 billion into the NHS, to provide more than 8,000 extra training places over the next three years for nurses, midwives, and other health workers. A new advertising campaign on TV and in newspapers was launched at the end of last month. The Royal College of Nursing welcomed the announcement but warned that nurses would have to be paid more and have opportunities to develop their careers to ensure they did not leave the profession.
    - BBC Online
  - Bottle-fed babies are at greater risk of cot death than breast-fed babies if they share a bed with their parents, according to new research. Social anthropologists at Durham University have discovered that breast-feeding mothers instinctively adopt a safer sleeping position, curled around their baby with its head at breast level. Mothers who bottle-feed are more likely to turn their back on their sleeping baby or place its head on the pillow level with their own. They concluded that mothers who bottle-feed should be given advice about the safer sleeping position.
    - *The Times* 26<sup>th</sup> February
  - More than 500 people in South London were offered blood tests for hepatitis B after a healthcare worker had the untreatable virus diagnosed. The Healthcare Protection Service for southeast London sent out warning letters to everyone who had been treated by the worker and set up a phone-line for those who had been contacted. Callers were offered an appointment for a confidential blood test and pre-test advice. The Director of the South East London Health Protection Service said, 'I would like to reassure people that the risk of infection is very small indeed.'
    - *The Times* 15<sup>th</sup> February
  - Taking ibuprofen counteracts the benefits of taking aspirin to prevent heart disease, increasing the risk of fatal illness, researchers have found. The research, carried out at the University of Dundee and published in *The Lancet*, found that people taking both aspirin and ibuprofen have a seventy-five increased risk of dying from cardiovascular disease compared to those just taking aspirin. Aspirin is known to cut the risk of heart attacks and strokes because it makes blood-clotting cells less sticky, and therefore less likely to clot and block blood vessels. Lead researcher Professor Tom MacDonald said, 'Perhaps it would be prudent that patients took an alternative pain-killer at least until this issue is further clarified.'
    - BBC Online
  - The UK's twelve million hay fever sufferers are already starting their annual sneezing, coughing and nose blowing. Climate change means that the trees and grasses most associated with hay fever are flowering early. Warm winters mean sufferers can experience symptoms as early as the end of February and the season which once ended in July runs through August. For reasons that are not yet understood, the number of people suffering from symptoms is rising dramatically. In 1965, twelve per cent of young people aged twelve to fourteen suffered from hay fever, while currently it is thirty-six per cent and continuing to grow. Adults in their forties are developing hay fever and recent tests on children aged six and seven showed twenty-five to thirty per cent have hay fever depending on where they live.
    - *Guardian* 4<sup>th</sup> February
  - A UK hospital waste disposal company has been fined £100,000, one of the largest penalties of its kind. Eurocare Environmental Services, which has contracts to deal with twenty-five per cent of NHS clinical waste, left dozens of articulated trailers full of clinical waste, including human tissue and blood, at sites in Newcastle and Birmingham. Workers in Wrexham, North Wales, regularly emptied a 4,000-litre 'gunk tank' of clinical waste, including blood, into a septic tank which discharged into a tributary of the River Dee. A spokesman for the Environment Agency welcomed the fine and said it was a sign that the courts are treating environmental crimes seriously.
    - *The Times* 15<sup>th</sup> February, *Health Service Journal* 20<sup>th</sup> February
  - The Hammersmith Hospitals NHS trust in West London is to ask patients what treatment they would like – if any – should they be afflicted with advanced cancer or dementia, left bed-bound by a stroke, blinded or in a wheelchair. Patients will be asked to specify when

treatment should stop if their health deteriorates so much they cannot communicate. Forms signed in front of witnesses will be kept with medical notes, to dictate future treatment and override the opinions of the patient's family. The charity Age Concern said it supported living wills but fears that the involvement of doctors could sway the opinions of more vulnerable patients.

- *Daily Mail* 24<sup>th</sup> February
- Scientists think expensive drugs provided to some patients with multiple sclerosis are a waste of money. They have suggested the £50 million spent on providing beta interferon and glatiramer acetate on the NHS could be much better spent elsewhere. Last year the National Institute for Clinical Excellence ruled that the drugs were not cost-effective and should not be provided on the NHS at all. Following uproar among patient groups the government announced the drugs would be provided, but only to patients in certain stages of the disease. In a study published in the *British Medical Journal*, Scientists criticised the policy saying that all patients with MS should benefit from any extra money. They also suggested some of the money could be used to compare beta interferon and glatiramer with cheaper alternatives.
- BBC Online
- Nearly two million people will be entitled to advanced digital hearing aids free on the NHS, under a partnership announced by the government and the Royal National Institute for Deaf People. Health Secretary, Alan Milburn, said he would provide £94 million to modernise audiology services in England within two years. The Scottish executive made a similar announcement, following initiatives in Wales and Northern Ireland. The RNID charity had been campaigning for digital aids on the grounds that they can give people who are deaf or hard of hearing a forty per cent improvement in hearing and quality of life.
- *Guardian* 7<sup>th</sup> February
- England's two largest hospital trusts – Leeds Teaching Hospitals trust and University Hospitals of Leicester trust – have failed to meet the government's deadline to abolish mixed-sex wards and bathrooms. Leeds expects to comply soon and work is ongoing in Leicester. The Labour Party's 1997 manifesto gave a commitment to the elimination of mixed-sex wards, and the government set a target of ninety-five per cent being phased out by December 2002. The Department of Health is understood to have a list of fifteen trusts that are not expected to be compliant by the end of the financial year, but will not

release their names.

- *Health Service Journal* 20<sup>th</sup> February
- Apparently very few women take the government's recommended amount of daily exercise, and are at a greater risk of cancer as a result. Cancer Research UK conducted a survey to find out how much exercise women take, and found that only twenty per cent of those questioned take thirty minutes of exercise five times a week. Researchers say people who take the most exercise regularly can reduce their risk of bowel cancer by up to fifty per cent compared with those who remain sedentary. Exercise can also protect against breast cancer, and possibly against lung, prostate and womb cancer.
- *Guardian* 26<sup>th</sup> February
- Health Secretary, Alan Milburn, has reneged on a government pledge to allow NHS patients the right to correct inaccurate facts or opinions held on their medical records. The Department of Health is also discussing secret plans to increase charges, originally set at a maximum of £10, to £50 or more for people to see their records. A plan to allow people 'fast track' access to their records in twenty-one rather than forty days has also been dropped. As we write, the matter is due to be raised at a meeting of the advisory committee on implementing the freedom of information act, set up by Lord Irvine, the Lord Chancellor, to monitor developments in Whitehall.
- *Guardian* 25<sup>th</sup> February

