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November 2001

Health in the news

Once again, the UK media has highlighted very few health stories during the past month. New figures showing that patients are waiting longer in accident and emergency departments did, however, receive considerable prominence – see 'A&E waiting times rising'.

Less attention was paid to the introduction of new arrangements whereby the NHS now meets the costs of nursing care for the residents of nursing homes – see 'New care system begins'.

There were further developments in several controversial areas during the month. Some observers considered the trade unions let the government off the hook at the Labour party conference in choosing not to push their dissatisfaction with plans for increased private sector involvement in public healthcare. Nevertheless, the heated debate on links with the private sector still goes on – see 'Private sector involvement: does it help?'

The regulation of healthcare professionals (see 'Regulation: the GMC's view') is another controversial area, and likewise the morale of doctors – see 'Medics' morale'.

The limitations of the new 'star system' for rating the performance of hospitals also emerged – see 'It isn't all in the stars'.

One of the most gratifying news items of the month was the award of a Nobel Prize to two British medical researchers – see 'People'.

New care system begins

The NHS is, from October, committed to meeting the costs of nursing care for nursing home residents in England and Wales but the new system has come in for criticism. The government's decision that 'personal care' will not be paid for remains controversial, especially as the Scottish parliament has taken a different view on this. The complexity of the new arrangements has also come under fire.

Help the Aged says the government's plans for free nursing care are too complex to be workable. Tessa Harding, the charity's Head of Policy, described the plans as 'a nonsense', and full of anomalies. The Scottish parliament's decision to adopt a different system meant that there should be a rethink in the rest of the UK. The public would be confused by the proposed new system. The Royal College of Nursing, Age Concern, and the Alzheimer's Society are amongst the other bodies that have been critical. Age Concern has said that there will be chaos and has called for the government to follow the recommendations of the Royal Commission on Long-term Care which, in its 1999 report, called for the NHS to meet personal as well as nursing costs.

Under the £1.4bn package, around 42,000 people living in nursing or residential homes will receive free nursing care, defined as care given by a registered nurse and not including work done by a care assistant. There will be a system of assessing the condition of patients that involves four possible 'bands', which indicate the level of nursing care considered appropriate for them and will also determine how much the NHS will pay to the care home.

– A report from Help the Aged has examined the plight of elderly people who live with and care for a person with a long-standing illness or disability. Many of these carers also have serious health problems of their own. The charity says many receive no help from the NHS and are never able to take a break from their responsibilities: 'It is time that services found ways to offer support to this very dedicated group of carers in a way that takes into account the specific circumstances of older couples, enabling a carer to provide care without placing themselves or their health at risk.'

• *Health Service Journal* 4th October, BBC Online, Press release (DoH)

It isn't all in the stars

The new government system of assessing hospitals by means of a star system (see *Health Insight* October) has



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come in for criticism from several quarters. Notably, it has come to light that one of the twelve hospital trusts in England to be awarded no stars at all, Portsmouth, actually received the highest rating in the country for its clinical services. It performed less well on other criteria taken into consideration for the star scheme; its out-patient waiting times were found to be particularly poor. The trust's Chief Executive has been given a year to 'turn the hospital round' or face dismissal.

A favourable clinical governance review of another 'no-star' hospital trust, Ashford & St Peter's, has been published by the Commission for Health Improvement (CHI). In the star-rating review, the hospital was said to be 'significantly underachieving' clinically.

Health secretary Alan Milburn has agreed that there can be conflicts between the two systems and wants to move towards a single performance measure.

The Policy Director of the NHS Confederation said of the star system, 'It does not work well for trusts which are improving or deteriorating rapidly. It demoralises the improving and doesn't spot those who are deteriorating.' The Confederation would work with the DoH to improve the system.

• *Health Service Journal* 4th, 25th October

Regulation: the GMC's view

The GMC says it welcomes the government's proposals for a body, to be known as the Council for the Regulation of Healthcare Professionals, which would coordinate the work of health regulators. However, it has strong reservations over the proposal that this body should oversee the regulators and that regulators should be accountable to it. The GMC has sent a memo to the DoH outlining its position.

GMC President Sir Donald Irvine, who will be retiring early next year, said that coordination of professional regulation was essential but the GMC should be accountable to parliament directly.

The GMC says it is continuing its efforts to strengthen its links both with doctors and with the public at large. It is seeking comments on its consultation documents, in which it outlines its plans for reform. The documents may be seen on www.gmc-uk.org.

The council of the BMA, however, has attacked the GMC's proposals that deal specifically with the 'revalidation' of doctors. It says there are several anomalies and contradictions in the proposals, particularly as regards the suggestion that doctors will need to be both registered and licensed. The GMC has said that registered doctors would only be able to practise under supervision until they have

a licence but, confusingly, it has also said that unlicensed doctors will not be able to practise at all. The BMA is considering submitting its own proposals on revalidation directly to parliament.

• *GMC News* October, *BMJ* 13th & 20th October

NICE decisions

The anti-obesity drug, sibutramine (Reductil) is to be made available on prescription. The National Institute for Clinical Excellence (NICE) has recommended that sibutramine be part of an overall treatment plan for obese patients aged between eighteen and sixty-five. The drug alters the chemical messages that control feelings and thoughts about food, promoting a feeling of being full or having eaten enough. NICE said that when sibutramine is prescribed, the patient should also be offered advice and support, as well as counselling on diet, exercise, and behavioural changes. Professor Peter Littlejohns, the Institute's clinical director said, 'Obesity has a major impact on a person's physical, social, and emotional wellbeing and future health. Doctors and patients need to work together to manage this condition.'

NICE has still not reached a final decision as to whether beta-interferon should be available on the NHS for people with multiple sclerosis (MS). However, it provisionally advised in August that its use was not justified 'on the balance of clinical and cost effectiveness', and it has since indicated that it is unlikely to give its approval to the treatment, or to the use of another drug against MS, glatiramer acetate. This has angered patient groups representing people with MS and become the most controversial of the treatments considered by NICE. Now, however, the DoH has announced that it intends to conduct an extended clinical trial of beta-interferon, which it is thought will include all the nearly 10,000 patients who meet the clinical criteria for its use. The DoH says it is trying to negotiate a deal with drug companies to share the financial risk. A spokesperson said: 'If the drug was working, payments would continue. If not, payments to manufacturers would be reduced on a sliding scale.' Three UK hospitals are already taking part in a trial of glatiramer acetate against (MS). The international trial involves 900 patients in the UK, US and France. Neither drug cures MS but both are claimed to increase the period of time between relapses.

Health minister Lord Philip Hunt has announced that the current arrangements for the prescribing by GPs of drug treatments (including Viagra) for impotence will not change. A public consultation earlier this year showed that the majority were against the current restrictions. However, the £25m expenditure on the drugs was above

expectation and looks continued to increase. 'The extra cost of allowing unrestricted prescription would be many times higher and would involve diversion of funds from other NHS priorities,' said Lord Hunt. 'The list of medical conditions which qualify men for NHS prescriptions for these drug treatments will not change. Men with severe distress will continue to be able to receive treatment from a hospital specialist. GPs can still issue private prescriptions to those men who are not eligible for prescriptions on the NHS.'

Lord Hunt has also announced the roll forward of the UK-wide maximum price scheme for generic medicines used in NHS primary care. This follows the success of the maximum price scheme introduced by the government a year ago. Lord Hunt said, 'The scheme has restored stability to the generics market and the NHS has made expenditure savings of some £240 million in 2000-01.'

• *BMJ* 27th October, BBC Online, Press releases (DoH)

Fast-track heart surgery

A British woman has become the first person in Europe to undergo major heart surgery and leave hospital the same day. Sarah Wonnacott, 34 had a revolutionary operation to close a hole in her heart at the Royal Brompton Hospital in London. The technique uses a device called an intracardiac echo (ICE), in which a camera is inserted into the heart so the surgeon can see exactly what he is doing. The camera works by sending a sonic signal that bounces off the tissue of the heart and is fed back into a computer to produce an ultrasound image. The sonic imaging equipment and a probe are pushed up through a catheter inserted in the patient's groin. At the end of the probe is a plug which is detached when it reaches the site of the hole by operating a spring mechanism.

The procedure lasts at most forty minutes and there are rarely any side-effects. The cost of £10,500 is half the price of open heart surgery. Consultant cardiologist Dr Mike Mullen came to the Royal Brompton Hospital from Canada where the technique has been licensed for six months. 'This is a huge advance, getting steering and ultrasound into something 3mm in diameter,' said Dr Mullen.

• BBC Online

Private sector involvement: does it help?

The King's Fund and the NHS Alliance say that the evidence that public-private partnerships (PPPs) can increase funding is 'paltry'. A report from the two organisations

advises that NHS trusts should err on the side of caution when considering establishing a PPP and ensure that there will be benefits before proceeding.

The King's Fund is an independent health charity, generally described as a 'think tank'. The NHS Alliance represents primary care groups. Their joint report calls for safeguards in any PPP scheme to ensure that quality is maintained and that patients benefit without staff being harmed. PPPs should not be undertaken solely with the aim to cut staff pay.

The report may be seen on www.kingsfund.org.uk and www.nhsalliance.org.

A leading government adviser has criticised the hospitals now being built under the private finance initiative (PFI). Sir Stuart Lipton, head of the Commission for Architecture & the Built Environment, said insufficient consideration had been given to the impact of building design on patient care. Some of the hospitals being built had unusable rooms, no air conditioning and inadequate sewage systems. The new hospital building programme (sixty to seventy hospitals) was the most substantial the UK had seen in decades and it was important to get it right but: 'The present round of PFI is effectively subcontracted obligations. It is not that the buildings are being built inefficiently, but the contractor has got nothing to do with the medical process - they are two separate functions which should be one.'

The PFI approach is being used in other sectors too and there have been, for example, criticisms of how the scheme is working in education.

• *BMJ* 27th October, BBC Online

Unrest among Unison members

The trade union Unison, which represents most NHS support staff and also some nurses, is pressing for substantial pay rises. It is demanding a ten per cent pay rise for nurses.

At several hospital trusts, Unison members are threatening overtime bans and strikes. These include the North Glasgow University Hospital Trust, the Royal Liverpool & Broadgreen University Hospital Trust, the Lothian University Hospital Trust and also the first private finance initiative - Cumberland Infirmary. (The situation in the latter hospital was discussed in October's *Health Insight*.)

Medical secretaries, particularly in Scotland, are amongst the workers represented by Unison who appear to be close to taking some form of industrial action.

• *Health Service Journal* 18th October

Medics' morale

A national survey held by the British Medical Association says about a quarter of family doctors are disillusioned with the profession and want to leave their jobs in the next five years. The BMA's survey was sent out to all of the UK's 41,500 GPs – more than half of them responded. With most GPs managing list sizes of between 1500 and 2500 patients, it seems many simply cannot cope. More than 90% said they were being asked to do too much but felt undervalued at the same time. Long hours, work-related stress, and the fact that they thought patients were getting a raw deal all added to the profession's dissatisfaction. However, despite their low morale GPs firmly believe in the NHS and would rather work for the NHS than the private sector, if the conditions in the two sectors were comparable. Peter Cope, secretary of the BMA's General Practitioners Committee said, 'The survey demonstrates that there is a huge commitment to the NHS from GPs, but at the moment the health service is unsustainable.'

A government plan to keep doctors in the NHS with a £10,000 'golden goodbye' has been rejected by seventy per cent of family doctors, according to another survey by the BMA. In addition to a £10,000 investment bond offered to those staying on in the NHS until sixty-five, rather than sixty, the government also announced £5,000 for those who have quit if they go back into general practice. Newly qualified doctors would also be offered a £5,000 'golden hello'. Dr Evan Harris MP, Liberal Democrat health spokesman, said, 'No amount of "bribes" from the government can make up for the failure to invest in training extra doctors five years ago.'

Regulations should be relaxed to make it easier for refugee doctors to practise medicine in the UK, according to Professor Sir George Alberti, president of the Royal College of Physicians. Sir George called for a revamp of the UK regulatory machinery, to make it easier for refugee and other doctors from overseas to get onto the register that allows them to practise. He said this was not just important from a humanitarian standpoint, but crucial at a time when there were only half the number of consultant physicians needed to run a high-quality service for patients.

The government has issued a new code of practice containing guidance for the NHS to help tackle the problem of recruitment of healthcare workers from developing countries. The Code of Practice for International Recruitment sets out NHS guidelines on the ethical and effective recruitment of staff from abroad. It was developed with NHS employers, professional bodies, trade unions and commercial recruitment agencies.

• BBC Online, *BMJ* 20th October, Press release (DoH)

A&E waiting times rising

An Audit Commission report says that the percentage of patients who attend accident and emergency units and have to wait more than an hour for treatment is higher than it was five years ago. The percentage seen within an hour was seventy per cent across England and Wales in 1996 but is now around fifty-five per cent. There is a considerable variation in the figure across the country. London is the worst; only thirty per cent of patients are seen within the hour. In Wales eighty-four per cent are seen within the hour. Rural areas and small units generally perform best.

The number of patients attending in England and Wales increases by around one per cent every year (over fifteen million patients are now seen annually) but there has been, since 1998, a ten per cent increase in the number of A&E doctors which should have more than kept pace. The decline in performance has therefore caused considerable concern. Ironically, most of the decline has been since 1998.

Amongst the suggestions made by the Audit Commission are that more A&E units should have nurse practitioners (only five per cent do at present) and that they should all have computers (fourteen per cent do not). www.audit-commission.gov.uk/publications/aande.shtml.

Alan Milburn commented that the worst-performing A&E departments would have to change the way they approached their job: 'We know some hospitals are cracking these problems and some aren't.'

Mr Milburn has also given details of a new three-year £100m investment plan for A&E – *Reforming emergency care: first steps to a new approach*. A key part of the approach will be funding to pay for up to 25,000 operations in the private sector. Additional nurses and more equipment will also be provided.

• *BMJ* 27th October, Press releases (DoH), BBC Online, and Audit Commission document.

Health gap widens

The London Health Observatory (LHO), a government unit established to monitor health inequalities, says the health gap between rich and poor is widening. For example, in the early 1990s, a baby boy born in a poor borough like Newham had a life expectancy four years less than a boy born in Westminster. The equivalent figure today is five years. LHO says its findings 'point to a likely national pattern'.

London, however, has particularly extreme variations in life expectancy. In the life expectancy 'league' Westminster ranks 26th and 13th respectively for men and

women. Newham is 349th and 320th. Hackney has the highest infant mortality (8.9 per 1,000 live births) – nearly three times the figure in Bexley (3.6).

Dr Sue Atkinson, Director of Public Health for London, said, 'This report really brings home the need for effective action at all levels.'

The LHO website is www.lho.org.uk and a summary of its findings may be seen on . . .

<http://www.lho.org.uk/pubs/pdf/ineq/pressrelease.pdf>.

• *BMJ* 13th October, BBC Online

Looking for a dentist

Four in ten dentists will not take on new NHS patients, according to a survey in *Health Which?* Many dentists have shunned NHS practice because they say the fees are too low in comparison with private sector work. Despite a government pledge that by September 2001 access to an NHS dentist should only be a 'phone call away' the survey found that many people still have problems finding an NHS dentist.

Dame Margaret Seward, the Chief Dental Officer, said the data contained in the *Which?* report was at least three to four months old and the system had been strengthened since then. The magazine also criticised the system under which NHS dentists can strike patients off their list if they don't visit for fifteen months. For their part dentists say the bureaucracy working in the NHS brings, plus the lack of time with patients, deters them from working in the public sector. Jo Tanner of the British Dental Association admitted, 'The situation is far from perfect. We want to see more incentives for dentists to come back from private practice into NHS dentistry to provide that level of care that is so required.' Ms Tanner welcomed the government's commitment to have invested £100m into NHS dentistry by April next year.

Five dental practices were honoured recently, for their commitment to patient care. The five practices from around England were finalists in the first-ever Focus Awards, a joint initiative by the DoH and the British Dental Association. The award rewards practices offering 'value-added services' above and beyond the usual dental check-up. The ceremony took place at The Royal College of Surgeons in London.

• BBC Online, Press release (DoH)

Scottish hospitals may get help for reviews

NHS trusts in Scotland may receive support to help them meet the costs involved in preparing for reviews of their

performance to be conducted by the new Clinical Standards Board (CSB). The CSB will perform a similar function to the Commission for Health Improvement (CHI) in England. Its first review has just been published. The hospital trust concerned, Lothian University Hospital Trust, found that 'many thousands of hours' extra work were required to prepare for the CSB's visit. Scotland's health minister, Susan Deacon, has now indicated that changes could be made to reduce the burden on trusts in the run up to their inspection. CSB Chief Executive Dr David Steel has also acknowledged that the reviews are 'labour intensive' for the hospitals.

Trusts in England have also said they devote significant amount of time to coping with CHI inspections but there has been no talk of extra help. It is assumed that, as experience is gained with the review system, trusts will find it quicker and easier to deal with.

• *Health Service Journal* 25th October

More news from Scotland

Scottish Health Minister, Susan Deacon, has announced that all newborn babies in Scotland will be tested for the inherited disease cystic fibrosis from April next year. She said, 'Sadly, we cannot prevent a child being born with cystic fibrosis but, through early diagnosis, we can ensure that treatment is given at the earliest possible stage and that parents are given the information and support they need to care for their child.' The move has been welcomed by the National Cystic Fibrosis Trust which has long campaigned for screening at birth. The average life expectancy for a patient is 30 years. Approximately 7,500 people in the UK have cystic fibrosis. However, it is widely predicted that the condition will be one of the first to be controlled through gene therapy.

The suicide rate in young men in Scotland is twice that in England and Wales. The past thirty years have seen an alarming rise of more than thirty per cent in suicides among men. More than half the 600 suicides in Scotland each year occur in men under forty-four; higher levels of poverty and unemployment in Scotland are considered to be important factors behind the increase. The Scottish health department has published a consultative report that sets out a series of proposals on how the problem can be tackled.

Less than a third of Scottish hospitals meet targets on giving thrombolysis. The first performance report on Scottish hospitals has found high levels of compliance with standards on treating heart attacks but has uncovered failings in the administration of thrombolysis. The report from the Clinical Standards Board for Scotland found that only ten out of thirty-seven hospitals met the standard for ad-

ministering thrombolysis to fifty per cent of patients within thirty minutes of admission to hospital with a heart attack.

Scottish nurses coming back into the profession after a career break are being forced to pay for their retraining, and often work for a number of weeks without pay. Unison Scotland, the country's largest public sector union, are planning to take the authorities to an employment tribunal in an effort to see the practice overturned. Last year nurse vacancies in Scotland rose by forty-eight per cent and there are currently more than 10,000 trained nurses out of service. Scottish Executive Health Minister Susan Deacon is planning a summit this month to consider long-term recruitment and retention issues in the NHS. However, Unison warns recruitment drives will not be successful as long as nursing staff are expected to pay for refresher courses and work without pay before they can return.

• BBC Online, *BMJ* 20th, 27th October

Northern Ireland 'not keeping pace'

Northern Ireland's health minister is seeking increased funding for health care to cope with rising costs. Bairbre De Brun (of Sinn Fein) said patients were suffering from poor care because investment was not at the same level as in the rest of the UK: 'If our budget does not keep pace with England, then the services and the people will suffer and, frankly, that is already happening. We face growing pressure to meet the increased level of need. The growth in emergency cases and attendances at A&E departments, trolley waits and delayed discharges are a constant feature of our services, and the size of our waiting lists is simply unacceptable.'

A recent article in the *Health Service Journal* has alleged that the NHS in Northern Ireland has almost run out of cash. It says the situation is 'spiralling out of control.'

• *Health Service Journal* 11th October

vCJD latest

Details have been announced of the compensation scheme for families of victims of vCJD. Interim payments of £25,000 have already been made to most families following the establishment of an interim trust in April. Alan Milburn said that each family will now receive a further £75,000. The government is, however, only committed at this stage to providing compensation to families of the first 250 vCJD victims. There have now been 107 'definite and probable' cases.

There is still no clear understanding as to how the epidemic is likely to progress. Expert opinions vary widely with regard to when it is likely to reach a peak and how many people may be affected. The media in October gave considerable prominence to the views of Dr George Venter, a public health consultant in Lanarkshire, who doubts there is a link between vCJD and meat. He says the slow progress of the epidemic is not consistent with what one expects from a foodborne disease. He believes the disease is a rare one that till now was frequently misdiagnosed.

A new UK Zoonoses Group has been set up by the government to provide a forum for the discussion of all diseases that are transmissible between animals and humans. Details on www.defra.gsi.gov.uk.

• Press releases (DoH), BBC Online

Other NHS initiatives

Health Secretary Alan Milburn and Local Government Secretary Stephen Byers have jointly announced a £300m initiative to tackle 'bed-blocking'. The aim is to allow 2,000 older people to leave hospital rather than having to wait after their treatment is finished. This would free up many beds in the NHS. The older people would be placed in care homes or given other forms of support until their recovery has progressed. Bed-blocking is agreed to contribute significantly to the waiting list problem.

Maternity units in England will receive £100m to modernise and improve their facilities. Health minister Jacqui Smith said the extra money would pay for a range of improvements including 93 major refurbishments, 97 new facilities for fathers and families, the modernisation of 65 antenatal units and better bereavement facilities in over 80 units.

Pilot schemes have been launched in ten hospitals which will reward staff who perform exceptionally well with bonuses. The Norfolk and Norwich will, for example, give all staff a £600 bonus if their targets are met. The government wants to see such schemes in place throughout the health service.

The European Court of Justice ruling that allows health services to send patients to other EU countries for treatment (see *Health Insight* October) has led to one patient going to Germany for a knee-replacement. She had been waiting for surgery for two years because of waiting list problems in her local hospital.

Two hundred and fifty NHS 'job shops' are to be set up in shopping centres, theatres and other locations as part of the £1m recruitment campaign to attract more staff into the NHS. The job shops will be looking out for all kinds of staff – plumbers, bakers and printers, as well as nurses and doctors.

• Press releases (DoH), BBC Online

People

- Two British scientists, together with an American, have been awarded the Nobel Prize for Medicine for their discoveries about the way cells work. Their pioneering work may eventually lead to new treatments for cancer and other diseases. Sir Paul Nurse, the director general of the Imperial Cancer Research Fund, and Dr Tim Hunt, from the charity's Cell Cycle Control Laboratory won the prize jointly with US expert Professor Lee Hartwell. All three have spent years unravelling the way in which cells reproduce, with the hope of working out a way to understand and halt the uncontrolled growth which characterises cancer growth. It is the first time British scientists have won the prize since 1993.
 - BBC Online, *BMJ* 20th October
- Professor Rory Shaw was recently appointed chairman of the nascent National Patient Safety agency. At present the agency has twenty-five pilot schemes running at a variety of hospital and primary care trusts. If these schemes, which started in the summer and are due to report at the end of the year, are successful the agency will go nationwide next year. The role of the agency, as Professor Shaw sees it, is 'to look for adverse events, for near misses, and ask not who did it but why it happened and what were the root causes.'
 - Press release (DoH)

In brief

- The families of over one hundred women plan to sue the makers of the third-generation contraceptive pill. They allege that use of the pill led to blood clots, with long-term damage to the health of the women, ten per cent of whom have died. The companies concerned – Schering, Organon and Wyeth – say they will vigorously defend the claims. The DoH says there is no reason why women should stop taking the third-generation pill, although the European Agency for the Evaluation of Medicinal Products has said that it is slightly more likely to cause clots than the second-generation pill.
 - BBC Online
- The French health minister Bernard Kouchner recently criticised the British NHS. Although admitting the UK is ahead of his country in medical research, he said that advantage was wasted because the British public did not get access to new drugs any quicker.
 - BBC Online
- Health minister John Hutton has told a charity representing people who have acted as 'whistleblowers' that

the law now provides them with effective protection. The charity, Public Concern at Work (www.pcaw.co.uk) had raised once again the case of the whistleblower in the 'Bristol babies' affair, who was victimised because of his actions and had to leave the UK to find work. However, Mr Hutton, after taking legal advice, has said that anyone in a similar position today would be adequately protected by the Public Interest Disclosure Act.

- *BMJ* 27th October
- In a response to the terrorist anthrax attacks in the USA, the UK Public Health Laboratory has issued guidance to doctors on how to deal with the infection. Chief Medical Officer Professor Liam Donaldson has also assured the public that steps are being taken to secure supplies and stores of the appropriate antibiotics.
 - *BMJ* 20th October
- A terminally-ill woman who wants her husband to be allowed to help her to die has failed in her appeal to the High Court. The Director of Public Prosecutions had refused to rule that her husband would not be prosecuted. She hoped that the Court would overturn this ruling. However, the judges decided that to do so would be 'a licence to commit crime'.
 - BBC Online
- An audit, commissioned by the DoH and conducted by the Royal College of Obstetricians & Gynaecologists, has found that the percentage of babies delivered by caesarean section in England, Wales and Northern Ireland has risen to twenty-one point five per cent. The rate recorded in England thirty years ago was four per cent. Many obstetricians are concerned that the rate is now so high. Health minister Jacqui Smith said the audit would form the basis for future research, and for the development of guidelines on caesarean section by the National Institute for Clinical Excellence. The report may be seen on the RCOG website – www.rcog.org.uk.
 - *BMJ* 27th October, Press release (DoH)
- A British woman is pregnant with what the media have dubbed a 'designer baby', following IVF treatment in the USA. The woman and her husband have a four-year-old son recovering from leukaemia. They want to ensure that their second child has tissue that will match that of his/her older brother. Should he have a relapse, the younger sibling would then be able to donate bone marrow. There have been similar cases in the USA but the UK's Human Fertilisation & Embryology Authority has yet to approve any such procedure here. Ethical objections have been raised, but one UK IVF specialist, Mohammed Taranissi commented, 'We are not creating

- designer babies. We are not trying to choose eye colour or hair colour. We are trying to prevent an illness.'
- BBC Online
 - The DoH says practitioners of traditional Chinese medicine (TCM) have agreed to cooperate in efforts to improve the safety of TCM products on sale in the UK. Potentially toxic or carcinogenic ingredients have been found in some products. For example, some contain steroids though this is not declared on the label. Banned products containing the herb aristolochia, known to cause kidney damage, are still being offered for sale.
 - *BMJ* 6th October
 - The Commission for Health Improvement has concluded that a hospital trust that was 'fast-tracked' for inspection, following a series of problems, is 'in the process of turning the corner'. The Plymouth Hospitals NHS Trust has had severe waiting list problems, which the CHI concluded were the result of demands exceeding resources and inadequate levels of medical staffing. There have also been employment tribunal claims against the trust by four surgeons, who have made allegations of bullying, sexism and racism. The Chief Executive and his deputy resigned in 1999.
 - *BMJ* 6th October
 - High Court writs are being issued against two major airlines over claims that they failed to warn British passengers of the potential health risks from long-distance air travel. The test cases against Virgin Airlines and British Airways involve passengers who developed deep vein thrombosis (DVT) after long-haul flights. This may lead to 'group litigation', or a class action, against many airlines who could then face a compensation bill of more than £10m.
 - BBC Online
 - Research and development awards totalling £2.5m have been announced by the NHS Director of Research and Development, Sir John Pattison. The National Primary Care Award Scheme funds important new research, which will contribute to high-quality patient care in crucial primary care services.
 - Press release (DoH)
 - Together with some of Europe's leading consumer organisations, the UK Consumers' Association and National Consumer Council are opposing plans to allow limited direct advertising of prescription medicines to special patients' groups. In July the European Commission suggested that the current ban of direct advertising by pharmaceutical companies might be relaxed. Consumer groups argue that, although patients need better information about drugs and treatment, this should be the role of national authorities and the London-based European Medicines Evaluation Agency, not drugs companies.
 - *BMJ* 20th October
 - A new intercalated BSc degree in international health was launched in October by the International Health and Medical Education Centre at University College, London. The course aims to provide students with an understanding of health and care in the context of increasing globalisation. Fifteen medical students, nine of them preclinical, from seven medical schools across the UK, are now studying for this new degree.
 - *BMJ* 13th October
 - Britain and the United States have agreed to collaborate on improving the quality of healthcare, and to exchange data to facilitate responses to health emergencies. A basis for discussion was agreed at a meeting held in England in 1998 between two private foundations, the US Commonwealth Fund and the UK Nuffield Trust. In the following two years, a series of topics was developed for collaboration. There are two main sections in the agreement. One covers topics related to health emergencies; the second covers quality issues in healthcare.
 - *BMJ* 20th October
 - Health minister, Lord Hunt, has announced five further pilot schemes offering health checks for people retiring from work. The first three schemes were announced by the government in March this year and the new schemes started last month. The schemes could include checks and advice on blood pressure, fuel and heating, fitness level, diet, immunisation and screening programmes. Research shows that many current health activities fail to cater for people who have retired and that health checks or information are seldom offered to employees before retirement. Around £800,000 has been made available to fund the pilots.
 - Press release (DoH)
 - For 350 years the Royal College of Physicians has held an annual dinner, thanks to an indenture from William Harvey, the eminent 17th century physician who discovered the circulation of the blood. Each year the RCP invites a leading doctor or scientist to give a 'Harveian Oration', at the dinner, on issues relating to his or her own field of work. For the first time in its history this year's oration was on tropical medicine. Professor David Warrell is Professor of Tropical Medicine & Infectious Diseases at the University of Oxford. His lecture covered

- diseases that follow bites from mosquitoes, snakes and mad dogs, outlining how powerless we still are against their potentially fatal consequences, and how prevention is better than treatment. Professor Warrell also highlighted key research findings and pointed to areas worthy of further investigation.
- Press release (RCP)
 - The government has agreed a five-year moratorium with the Association of British Insurers on the use of genetic test results by insurers. The moratorium is a key aspect of the government's response to the Science and Technology Select Committee Report on Genetics and Insurance published in April. Welcoming the report health minister Lord Hunt said, 'This will ensure that no-one is put off having a genetic test because they fear the result may affect their ability to get insurance cover. This is essential because genetic tests can offer important health benefits for many people.'
 - Press release (DoH)
 - A million infant school children in England are to get free fruit every day, thanks to £42m from the New Opportunities Fund. Another £10m will pay for promotion of healthy eating in areas hardest hit by cancer and heart disease. From 2004 every infant school pupil will have the right to free fruit. The scheme was piloted in 500 schools, providing 80,000 four to six-year-olds with one piece of fruit on every school day. An evaluation of the pilot schemes found that four in five of the children took the fruit they were offered, and consumption was maintained over time.
 - BBC Online, Press release (DoH)
 - To mark World Mental Health Day, held on October 10th, health minister Jacqui Smith announced the first wave of work to be carried out by the National Institute for Mental Health in England (NIMHE). The Institute, which was launched in July this year, will undertake a range of initiatives to implement the National Service Framework for Mental Health, raise the profile of mental health and improve services.
 - Press release (DoH)
 - This year's flu vaccination campaign has begun in the UK. Free flu jabs are being given to everyone over 65 and people who are more at risk, including those with underlying medical conditions such as chronic respiratory, renal or heart disease, diabetes, impaired immunity, and those in residential care or nursing care homes. Professor Liam Donaldson, the Chief Medical Officer for England, said, 'While the occasional bout of flu is not a serious matter for most healthy people, in severe cases it can lead to death; it is the "silent assassin".'
 - BBC Online, Press release (DoH)
 - The third phase of the South Asian Organ Donation campaign was launched by health minister Jacqui Smith recently. This is part of an overall campaign by the DoH to raise awareness of its importance. It is hoped that TV commercials and press adverts, featuring key British Asian celebrities in different environments, will encourage people to become organ donors.
 - Press release (DoH)