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## Health in the news

It seems that the summer months were a time for compiling reports. An important study from the British Medical Association shows that casualty departments in hospitals are struggling to meet government targets (see *Waiting times: the truth, the whole truth...?*); while another from the National Cancer Research Unit has produced a 'map' of cancer research spending. This shows that the biggest killer, lung cancer, gets only three per cent of the available funding in the UK (see 'Under-funding of biggest cancer killers').

A £20 million investigation into HRT was abandoned last month – unfortunately half the money allocated to it had already been spent. The Medical Research Council were quick to point out that the study was being abandoned for scientific and practical reasons, not on safety grounds. Just as well, as six million prescriptions a year are issued in England alone (see 'Huge HRT trial abandoned').

Twenty-four years after the birth of the first baby using in vitro fertilisation a British woman has given birth after becoming pregnant using her own frozen eggs. The media carried articles suggesting that career women could now put their eggs on hold in the deep freeze until they were ready to conceive (see 'IVF with a difference').

The UK is worryingly short of cardiologists, according to another report – this time from the Royal College of Physicians with the British Cardiac Society. It is good then that trials of a drug to reduce the number of people having heart attacks and strokes have been halted ahead of schedule because of the 'outstanding results' (see 'Cardiology news: the bad and the good').

Leukaemia received a lot of coverage last month, with a new technique for transplanting stem cells and good news about a treatment drug from NICE (see 'New milestone in leukaemia treatment').

Also last month was conference time for the main political parties. We saw open disagreement about foundation hospitals between ministers standing under a huge banner saying, 'Schools and hospitals first' (see 'Party conference time').

## Waiting times: the truth, the whole truth...?

Casualty departments are struggling to meet government targets to speed up care for patients say doctors. A British Medical Association report published at the end of last month questions whether the government has accurately assessed how well targets are being met. 'Waits and measures: improving emergency care for today's patients' is based on a study of 160 A & E consultants representing forty per cent of hospital departments in the UK. It aims to provide a realistic assessment of pressures facing A & E and to explore how they are introducing new systems of care to help reduce waiting times for patients. The study found anomalies between the government's assessment on the current state of A & E wards and the progress towards NHS Plan targets, and that of the doctors working in the field. The government says that nearly eighty per cent of all A & E patients spend four hours or less in A & E, and waits for admission to a hospital bed of over twenty-four hours have been eliminated. The BMA survey shows that one in five departments had patients wait for more than twenty-four hours; the longest reported wait was three and a half days; and half the respondents did not accept that most patients spend four hours or less in A & E. Waiting for a hospital bed was the most common reason for delay. Asked if the situation had changed in the last year, only a quarter of consultants reported that the situation had improved, and over a third stated that it had deteriorated. The BMA is to host a consultative seminar with representatives of patient groups and other professionals working in A & E to explore access to emergency care and to identify and address other areas of concern.

Another report shows that the length of time patients wait for outpatient appointments and for surgery in ear, nose and throat departments in the UK varies widely. But waiting times are not directly linked to levels of demand and capacity, according to the country's spending watchdog, the Audit Commission. 'We noted very wide variations in waiting times within trusts and between trusts,' said Jane Laughton, author of the report. 'This is to do with how the process is managed locally, both in terms of managing patients who need to access care, and in managing waiting lists.' Despite such wide variations, no link was found between demand and capacity indicators and the proportion of patients with very short or very long waits. – An orthopaedic surgeon from St George's Hospital in south-west London made the headlines last month.



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Martin Bircher said he had been told to stop his work to reduce waiting times for routine surgery to meet government targets. Mr Bircher specialises in reconstructing badly smashed pelvises – often the result of motor accidents. This is a highly specialised field, and patients from throughout the country are referred to him as soon as possible after their crash. Dr Peter Hawker, chairman of the British Medical Association's consultant's committee, said, 'This is a stark example of the perverse pressures which waiting list targets can create.'

• *BMJ* 26<sup>th</sup> October, Press release (BMA London), BBC Online

## Under-funding of biggest cancer killers

Some of the UK's cancer killers get only a fraction of the funding they deserve, according to a new 'map' of research spending. The National Cancer Research Institute (NCRI) has produced the first ever comprehensive breakdown of cancer research in the UK, hoping that the database will stop research money from different funding bodies being wasted on the same type of project. Interestingly the research has revealed that some cancers, which cause relatively few fatalities, are funded much better than others responsible for thousands of deaths each year. The prime example is lung cancer, which kills the most people in the UK each year. It gets only three per cent of the available funding in the UK, but accounted for twenty-two per cent of the total deaths from cancer in 2000. Leukaemia, on the other hand, receives almost eighteen per cent of the total funding, yet accounts for far fewer deaths – approximately three per cent. Breast cancer also attracts almost eighteen per cent of the available money, and is responsible for approximately eight per cent of the deaths. Other hard-to-treat cancers, such as pancreas and stomach also attract far less funding than their high death rate seems to demand.

The NCRI pooled research figures from the fifteen largest cancer research funding organisations, including Cancer Research UK, the Department of Health, and the Medical Research Council. An estimated £350 million is spent annually in the UK on cancer research. More than a fifty per cent of the spending goes into research into treatment, sixteen per cent on studies into the possible causes of cancer, and eight per cent on early detection and diagnosis. Research into cancer prevention takes only two per cent of the total. Professor Mike Richards, the government's National Cancer Director, said, 'For the first time, we have a very useful overview of cancer research in this country. Now we will be working together to address the gaps.' Sir Paul Nurse, director general of the charity

Cancer Research UK, described the map as a milestone.

• BBC Online

## Huge HRT trial abandoned

A £20 million international investigation into the risks and benefits of hormone replacement therapies was abandoned last month in another big setback to the hormone replacement industry. The decision to end the planned thirteen-year trials, which had recruited more than 5,000 British volunteers over the past three years, was made because they were taking too long and would not influence prescribing practice. The government-funded Medical Research Council (MRC) changed its mind following publication of US research, which reported small increases in the number of women developing breast cancer, heart disease, blood clots, and strokes – findings which led to the American trials being abandoned. The council made clear, however, that the study was being abandoned for scientific and practical reasons, not on safety grounds. The MRC also asked independent advisers to review international evidence to help determine the future of the trials, known as Wisdom – the Women's International Study of Long Duration Oestrogen After Menopause.

In the wake of the US trial results the government is reviewing its advice to HRT manufacturers and patients. It had already changed its guidance, available through NHS Direct, because of the emerging international evidence over HRT, for which six million prescriptions a year are issued in England alone. Safety advisers to the government's medicines control agency insisted previous suggestions that HRT might reduce heart disease must be replaced by warnings that HRT 'has not been shown to prevent heart disease'. There must also be clearer information on the increased risk of breast cancer.

• *Guardian* 24<sup>th</sup> October

## IVF with a difference

The first British woman to become pregnant using her own frozen eggs has given birth to a healthy baby girl. Thirty-six-year-old Helen Perry, from Ludlow in Shropshire turned to in vitro fertilisation (IVF) after discovering that she had blocked fallopian tubes. But she and her husband decided against standard IVF treatment as they are Jehovah's Witnesses and consider it unacceptable to produce embryos, only one or two of which will be used and the rest destroyed. Egg freezing gets around this ethical obstacle, but has been little used because of safety

fears and because it is difficult to do and has a lower success rate. The birth of the baby from a frozen egg was welcomed both by infertility specialists and religious groups that normally oppose IVF. Both see the development as an important breakthrough for women facing cancer treatment that could make them infertile. Professor Lord Winston, a leading expert on IVF, however, said that there were concerns about the long-term effects. 'Work in mice has shown that chromosomes which carry the genes can be broken up by egg freezing and that is why many clinics have not gone down this route,' he said.

There are also worries about the safety of fertility techniques that use frozen embryos. A major study is to be carried out to assess whether children born using artificial fertility techniques face health problems in later life. The Human Fertilisation and Embryology Authority (HFEA) is to consider how best to examine the long-term effects on children conceived using IVF techniques. In total, 68,000 IVF children have been born since the technique was pioneered in 1978 – it has not been decided how many, if any, of these children will be studied. The HFEA and the MRC have established a joint working party, chaired by senior epidemiologist Professor Catherine Peckham, to decide how to carry out the research.

• *The Times* 12<sup>th</sup> October, BBC Online

## More IVF news

An IVF test, which screens out embryos that have no chance of surviving to healthy birth, has been developed offering fresh hope to women who have suffered repeated miscarriages. A £700 test that can screen about a third of chromosomes for abnormalities is already available and has recently been licensed in Britain. The new technique is the first to count every chromosome and is significantly more reliable. Dr Dagan Wells, a British scientist who led the US development team said, 'What we want to do in IVF is not to transfer embryos that have no chance, accidentally leaving behind some that do. At the moment, the cost is prohibitive, about four or five times as much as a conventional procedure. However, that would come down as the technology improves and I think it would lend itself well to automation.'

Couples in some parts of Britain wait for more than two years to even start fertility treatment, according to a new study. In some areas no NHS funding is available at all, which means patients must seek private medical help. In other areas, free treatment is available but strict age limits can apply. The Labour party promised to investigate universal access to treatment but this has not yet brought any result. The National Institute for Clinical Excellence is reviewing the policy and is due to report in mid-2003.

• *The Times* 12<sup>th</sup> October, *Sunday Times* 20<sup>th</sup> October

## Government bans aspirin for under-16s

Aspirin has been banned for children under twelve since 1986. Now it is to be banned for children under sixteen to minimise the risk of young people contracting a rare disease that can cause seizures, coma, and death. Reye's Syndrome is a potentially fatal condition that affects the brain and liver. Its causes are unknown but a link with aspirin has been established for fifty years following identification of the condition by an Australian pathologist. Alasdair Breckenridge, chairman of the independent committee on safety of medicines (CSM) said, 'There are plenty of analgesic products containing paracetamol and ibuprofen for this age group not associated with Reye's Syndrome. There is no need to expose those under sixteen to the risk, however small.'

Makers of 140 products, including brands such as Alka-Seltzer, Anadin, Aspro, Beechams Powders and Disprin, as well as supermarket own-label alternatives will have to display warnings under the new CSM rules, although the ban will not be complete until next March.

• *Guardian* 23<sup>rd</sup> October, Press release (DoH), BBC Online

## Cardiology news: the bad and the good

Britain has one of the highest rates of heart disease in the world, yet is so short of cardiologists that a third of all those who have a heart attack do not get to see a heart doctor. A report by the British Cardiac Society with the Royal College of Physicians (RCP) says cardiologist numbers in the UK need to be almost doubled, from 630 to 1,220; and the European directive limiting working hours means the numbers will need to rise again, to 1,500 by 2020. If this did occur, said Roger Hall the main author of the report, thousands of lives could be saved. The joint report, 'Fifth report on the provision of services for patients with heart disease', was commissioned at the request of RCP Past President, Professor George Alberti, and addresses clinical and surgical requirements for the future, while exploring the reasons for why there are continuing staff shortages.

Trials of a drug which could reduce the number of people having heart attacks and strokes in Britain have been halted ahead of schedule after producing outstanding results. Researchers decided the trials had been so successful that it would be unfair to continue giving some patients a dummy version of the pill. Tests on the drug, atorvastatin, were carried out at Imperial College London

on nearly 20,000 patients. Results showed that the drug, produced by Pfizer under the name of Lipitor, was effective on patients who had high blood pressure, but who would not normally be given treatment because their cholesterol levels were not excessively high.

• Press release (RCP/British Cardiac Society), *Guardian* 17<sup>th</sup> October, BBC Online

## New milestone in leukaemia treatment

Scientists from Cancer Research UK have developed a new technique for transplanting stem cells into patients with leukaemia and lymphoma. The treatment is sometimes used in patients with these diseases who do not respond to conventional treatment. However, the transplants are often followed by high-dose chemotherapy, which can cause side-effects and kill the stem cells. The UK Team, led by Dr Raj Chopra, have succeeded in genetically engineering cells to make them resistant to the chemotherapy. The chemotherapy targets the cancer cells and the patient's own stem cells, but leaves the transplanted stem cells which multiply to fill the gaps and strengthen the anti-cancer immune response. Dr John Toy, medical director of Cancer Research UK said, 'Dr Chopra's research combines two of the most exciting areas of medical science – stem cell research and gene therapy – to create a clever potential treatment which may end up saving lives.'

More good news for leukaemia sufferers is that the National Institute for Clinical Excellence has recommended that Glivec, a drug used to treat people with chronic myeloid leukaemia (CML) should be made available on the NHS as a second line treatment to all patients likely to benefit from it. NICE will also be preparing guidelines on the use of Glivec for the first line treatment of CML subject to the drug receiving its licence for this indication.

• Press release (DoH), BBC Online

## Party conference time

Last month saw the annual party political conferences in the UK. Health Secretary Alan Milburn told the Labour party conference that he would stand 'four-square' behind managers trying to bring overseas clinical teams into the NHS. Asked if it meant backing them in the face of resistance from existing clinical staff he said, 'Doctors know we need more doctors.' Mr Milburn also spoke of his commitment to the establishment of foundation trusts and dismissed as 'nonsense' the claim that they would lead to the privatisation of hospitals. Earlier in the week the Trans-

port and General Workers Union attacked the foundation concept, saying it represented a 'full-blown and giant step towards privatisation of the NHS' via the creation of two-tier systems. Mr Milburn said, 'Not for profit, community-centred foundation trusts would allow the creation of a fourth centre for British healthcare alongside the NHS, the private and voluntary sectors.' The Health Secretary also clashed with Chancellor Gordon Brown over the rights of foundation hospitals to borrow capital on the open market – and off the government balance sheet. Mr Brown openly showed his disagreement at the meeting. The issue was later said to have been 'resolved and settled' in Mr Brown's favour.

At their conference the Conservatives heard Shadow health minister Dr Liam Fox pledge to end political interference in the NHS and allow every hospital to raise its own funds and manage its own budget – an extension of the current government's policy on foundation trusts. Dr Fox also said the next Conservative government would introduce a voucher system allowing patients who opt out of the NHS to buy private healthcare.

## Unfortunate timing

As reported from the Labour party conference Mr Milburn is keen to use doctors from outside the UK. However, one of the first overseas teams of surgeons, billed as the solution to the UK's long waiting lists, decided to stop operating after only completing two cataract operations at Cannock Chase Hospital in the West Midlands. Consultants at the hospital accused the Germans of using 'antiquated' techniques. The hospital is now reviewing the situation and has not confirmed whether or not it intends to proceed with the scheme.

• *Health Service Journal* 3<sup>rd</sup>, 10<sup>th</sup> October

## The search for a CJD drug

So far 127 people, mainly from Britain, have contracted Creutzfeldt-Jakob disease (vCJD). But the idea that thousands more may have caught the disease from BSE-infected beef is driving research. Last year the former anti-malarial drug quinacrine was first tried as a treatment for the disease, giving remission to British patient Rachael Forbes. She stopped taking the drug after liver complications and died last December. This promoted the UK government to say it would carry out human trials of

quinacrine, but this has yet to happen. A spokesman for the Medical Research Council, which is organising the research, said, 'The trial design is still being peer-reviewed. These things can take quite a time.' The Department of Health is also investigating pentosan polysulphate, a chemical sometimes used to treat cystitis. The drug hasn't yet been tested on people with CJD, but it is known to reduce infection rates in mice exposed to scrapie, the prion brain disease that affects sheep.

As last month drew to a close, twenty-four patients from Middlesbrough General Hospital on Teeside were told they may have been infected with 'sporadic' CJD through instruments used on a woman diagnosed with the brain disease. In what the Department of Health termed an 'appalling safety lapse' the equipment was not decontaminated properly after being used for a brain biopsy in July. Despite the diagnosis of CJD following two weeks later it took until late October for a decision to be made to start contacting those at risk. The strain of the illness involved – sporadic CJD – is not linked to eating beef from a BSE-infected cow. It accounts for around eighty-five per cent of all cases of the illness and can have an incubation period of up to twenty years.

• *New Scientist* 26<sup>th</sup> October, BBC Online

## Looking after older people

The UK Department of Health marked International Day of Older Persons, on the 1<sup>st</sup> October, with the launch of this year's annual flu vaccination campaign. The aim this year is to achieve an overall national uptake of seventy per cent among those aged sixty-five years and over. As the influenza virus is constantly changing people are being encouraged to have the jab, which is free for anyone over sixty-five and those in 'at risk' groups. For the third year running the ex-boxer Sir Henry Cooper, is fronting the campaign. This year's main message is, 'Beat flu before it beats you'.

Also launched on the 1<sup>st</sup> October was the Keep Warm Keep Well public information campaign. Around half of all extra deaths each winter are due to respiratory diseases and a third due to heart disease or strokes. A drop in body temperature contributes to these deaths by thickening the blood and restricting circulation. The campaign offers a free telephone helpline, and a guide containing practical tips on keeping warm and staying healthy in winter. It also outlines financial assistance to help people heat and insulate their homes in cold weather. Keep Warm Keep Well will run until next March.

• Press releases (DoH)

## People

– The most coveted prize in world medicine has been awarded to two Britons and an American. Sir John Sulston, Sydney Brenner and Robert Horvitz were awarded the Nobel Prize for medicine for decades of collective work studying the genesis and growth of microscopic nematode worms. Their research showed that the growth and programmed death of the hundreds of cells in the developing worm was a key to understanding the same processes in the cells of the human body. Sydney Brenner spent most of his working life at the Medical Research Council in Cambridge. It was he who showed how the growth of life from a single cell to a whole creature could be tracked by watching the nematode worm. Sir John Sulston and Mr Horvitz both worked under him for part of their careers. Sir John, now based at the Wellcome Trust Sanger Institute in Cambridge, built on Mr Brenner's work to reveal how every worm grows in the same way. After this, he went on to decode the 'book of life', the human genome, the work for which he is better known to the public (the award of science Nobel prizes tends to lag decades behind the discoveries for which they are awarded).

• *Guardian* 8<sup>th</sup> October

– Sir Liam Donaldson, Chief Medical Officer, with the agreement of the Prime Minister and the Secretary of State for Health, has announced the appointment of Professor Aidan Halligan as the successor to Dr Sheila Adam, Deputy Chief Medical Officer. Professor Halligan is currently on secondment to the NHS Modernisation Agency from his post as Professor of Fetal Maternal Medicine at the University of Leicester. He is currently the Director of the NHS Clinical Governance Programme.

• Press release (DoH)

## In brief

– The Tetley tea company has been rapped for claiming that tea is good for the heart and implying it may help you live longer. Following a complaint by The Food Commission, the Advertising Standards Agency (ASA) ruled there was insufficient scientific evidence to back up the claims made in their adverts. Tetley, which carries the British Heart Foundation logo on some of its products, argued its claims were based on a substantial body of research by leading medical experts – submitting details of thirty-one studies in its support. While accepting that antioxidants found in tea might help prevent coronary heart disease, the ASA ordered Tetley to

change its claims with help from the Committee on Advertising Practice Copy.

- BBC Online

- Clear guidance on home versus hospital haemodialysis for people with end stage renal failure, from the National Institute of Clinical Excellence (NICE) has been welcomed by Health Minister, Lord Philip Hunt. NICE recommends that all existing patients and new patients be assessed for home haemodialysis and, if suitable, be offered the choice between having it at home, or in a hospital/satellite unit. An estimated 27,500 patients in England and Wales are on some form of renal replacement therapy (transplantation and dialysis). In general, patients receiving the treatment at home report a better quality of life, although some feel isolated from the support of hospital staff, and find the responsibility of carrying out the procedure at home stressful.

- Press release (DoH)

- The NHS has ordered hospitals throughout England to stop using cheap brands of chicken for its patients after a consignment adulterated with water and animal proteins was found in the kitchen of Luton and Dunstable hospital. The meat came from a Dutch processor. The wholesaler who supplied the chicken said, 'It's sod's law. We don't usually use chicken from Holland, but we'd run short and bought this.'

- *Guardian* 8<sup>th</sup> October

- Recent research supports the theory that 'E numbers' in popular snacks can cause hyperactivity and tantrums in young children. Scientists from the Food Commission analysed the effects of five different additives, commonly found in popular crisps, sweets and fizzy drinks, on 277 three-year-olds from the Isle of Wight. The additives were given to children in a single drink, although the doses were similar to levels found in common foods. Many parents reported significant changes in behaviour. However, the British Nutrition Foundation said the evidence was 'quite sketchy' and did not support removing the additives from food. A spokeswoman suggested that parents who were concerned could choose alternative food or drinks that did not contain additives.

- BBC Online

- Women who take birth control pills for years actually improve their future ability to conceive, according to a British Study. Researchers at Brunel University in Uxbridge, Middlesex, asked over eight thousand women to complete questionnaires. They inquired, among other things, about the women's contraceptive pill use and

how long it took them to conceive. They found that even when they allowed for other factors such as age, smoking and drinking, women who used to take the Pill conceived more quickly.

- *New Scientist* 12<sup>th</sup> October

- A Coventry GP has been suspended for six months by the General Medical Council. Dr Jarnail Singh was charged with encouraging and participating in the trade of human organs from live donors – a practice that is banned in the UK. Two undercover journalists approached Dr Singh for advice about how to arrange a live donor transplant. The doctor told them that he had helped others in a similar situation and told them it would cost £3,000 to secure an organ from a living donor. Some weeks ago a London GP, Dr Bhagat Singh Makkar, was struck off the medical register after boasting to a reporter that he could organise a kidney transplant in the UK or abroad for a fee.

- BBC Online

- Trials of a drug to treat rheumatoid arthritis have shown significant improvements in three quarters of patients. Initial results of tests on the drug rituximab found that more than fifty per cent of patients in the trial showed 'major improvements' and a further twenty-three per cent demonstrated a 'brilliant response'. More than 350,000 people in Britain are affected by the disease. Presenting the findings to an American College of Rheumatology in the US, Professor Jo Edwards, from University College, London, said, 'An arthritis cure is now firmly on the agenda. This study proves the scientific validity of the benefits of rituximab to rheumatoid arthritis sufferers.'

- *The Times* 27<sup>th</sup> October

- A report by the Consumers' Association (CA) has found poor standards at private clinics offering plastic surgery in the UK. It is estimated around 65,000–75,000 cosmetic surgery procedures are carried out each year in the UK. But the service is not properly regulated – despite a new government system of regulation for private healthcare. The CA publication *Health Which?* sent two actors with hidden recording equipment to twenty-one private cosmetic surgery clinics. They found clinics agreeing to unsuitable surgery and failing to provide adequate information about the risks involved. The British Association of Aesthetic Plastic Surgeons, together with other surgical organisations, says the public is still at risk from unqualified practitioners. No recognised standard of training for cosmetic surgery exists, though it is hoped with the establishment of the Cosmetic Surgery Interspeciality Committee this will change. Ros Gray, of

the National Care Standards Commission set up to regulate private medicine, said that new national standards would help to tackle the problems.

- BBC Online

– In early October there was a hark-back to the days before the then Prime Minister Margaret Thatcher stopped schoolchildren having free milk. Thousands of children were given free milk for a week, to mark National School Milk Week. The milk companies wanted to highlight that primary schools can buy subsidised milk, but only sixteen per cent in England do so at present.

- *Guardian* 7<sup>th</sup> October

– The National Institute for Clinical Excellence has been accused of restricting the use of a treatment that can save the sight of thousands of people. The Royal National Institute for the Blind is calling for a treatment for age-related macular degeneration (AMD) – the leading cause of blindness in the UK – to be made widely available. AMD affects around 50,000 people in the UK, and an estimated 100 people who could have benefited from treatment go blind every week. Although a consultation document on the treatment has been published NICE has not yet made any recommendations, nor issued any guidance to the NHS.

- BBC Online

– A consultation document has been issued as part of the government's commitment to tackle the problems associated with alcohol misuse. The document outlines areas for investigation, invites comments on them, and seeks suggestions about other areas that the project should be looking at. The project is sponsored by Hazel Blears, parliamentary under secretary of state for public health. She said, 'The large majority of people who drink, do so without causing themselves or others harm. This project focuses on the harm that can be caused by excessive drinking. The NHS Plan said that the Department of Health would be implementing a National Alcohol Strategy by 2004, and we are on course to achieve that target.'

A report, 100% Proof, by Alcohol Concern, published recently, called for more research into drinking problems in Britain. The Report shows that more than one

million pensioners are drinking too much alcohol, with a seventy-five per cent increase in the problem among women over sixty-five during the past ten years.

- Press release (DoH), *Guardian* 7<sup>th</sup> October

– Caterers have been warned against selling food containing raw eggs after two men died and more than 150 people fell ill from an unusual strain of the *Salmonella* bacterium, which causes food poisoning. Several other people, including children, needed hospital treatment in outbreaks in London and north-west England. The men were among fifty-three victims of the bacteria in Cheshire, where a bakery which used uncooked eggs, rather than the pasteurised alternative, is being investigated by health officials from the Food standards agency. The outbreak in London led the agency to investigate another bakery in Victoria. The size of the outbreaks is causing concern as only 393 cases of food poisoning in England and Wales were caused by this strain last year.

- *Guardian* 17<sup>th</sup> October

– Millions of doses of the smallpox vaccine are to be stockpiled by the government to prepare for mass vaccination in the event of a bio-terrorist attack. The Department of Health said that while there was no evidence of a specific threat it was carrying out 'intensive planning' just in case. Key health workers, including doctors and nurses, will be the first to be offered the vaccine as they will be caring for those taken ill in an outbreak. Sir Liam Donaldson, Chief Medical Officer, said a mass vaccination programme would only be considered if there were a number of outbreaks.

- BBC Online

– Health Minister, Lord Philip Hunt has announced the review of the maximum price scheme for generic medicines (those without a brand name) used in NHS primary care. Lord Hunt said the government proposed to roll forward the scheme, unchanged, pending decisions on long-term future arrangements. He said the scheme, introduced in August 2000, had restored stability in the generics market and the NHS had saved some £330 million annually as a result. The consultation ends on the 29<sup>th</sup> November 2002.

- Press release (DoH)