## In brief

**Dengue fever death toll rises:** The number of deaths in the outbreak of dengue fever in Indonesia has risen to 344, with almost 20 000 recorded cases so far this year. The World Health Organization says a cyclical decline in population immunity is probably responsible rather than a new viral strain.

#### Rare form of chlamydia in

Europe: A possible outbreak of a rare form of chlamydia, lymphogranuloma venereum, may affect a "large part of western Europe," Dutch doctors warn. Normally associated with the tropics, it has been identified in a cluster of 25 gay men in Rotterdam and Amsterdam who between them had had sex in five European countries (Nederlands Tijdschrift voor Geneeskunde 2004;148:441-2). Unlike most types of chlamydia, treatment entails taking antibiotics for up to three weeks.

UK government seeks views on public health: Health Secretary John Reid has launched a three month consultation called "Choosing Health?" to gauge reaction to proposals to curb rates of smoking, obesity, and sexually transmitted diseases. The consultation will be followed this summer by a white paper on public health (see details at www.dh.gov.uk/consultations)

#### Urgent appeal to Sudanese

**government:** The European Union has made an urgent appeal for the Sudanese government to cease hostilities and allow relief organisations unlimited access to people threatened by civil war in the western region of Darfur. Negotiations currently continue for two emergency aid flights to be allowed into the region.

## Long term response to avian flu is needed: The World Health

Organization has urged a long term response to the current outbreak of H5N1 avian influenza in Asia. The unprecedented distribution, rate of spread, and severity of the infection make it difficult to control and prevent, WHO says. Details of its assessment are at www. who.int/csr/don/2004\_03\_02/en

#### Regulations are stifling development of new drugs

Zosia Kmietowicz London

The volumes of regulations that surround scientific research are stifling the development of new drugs and need to be rationalised if innovative discoveries in biology are to be matched with new medicines and demand by patients for better treatments, said experts this week.

It costs an estimated \$800m (£433m; €645m) to get a new drug to the market, and pharmaceutical companies have to hit first year sales figures of about

\$500m to cover their expenses, said Professor Michael Rawlins, chairman of the National Institute for Clinical Excellence.

But with outlay costs increasing at a rate of about 10% a year, the cost of developing a new drug by 2015 will be in the region of \$2bn, and sales will have to reach \$1bn in the first year after launch, a situation that Professor Rawlins described as "unsustainable."

He was speaking at the launch of a new book, *The Search for New Medicines*, by the journalist and broadcaster Dr Geoff Watts, which highlights the findings of a conference held last September to discuss the future of the pharmaceutical industry and the dwindling supply of new drugs.

Professor Rawlins suggested that lifting some of the inappro-

priate regulations that surround scientific research, and hence some of the expense, may help to stimulate drug developments.

"Our understanding of biology is extraordinary, and the number of drugs being developed should be huge, but it isn't. I believe that drug regulation has a critical role to play in the development of drugs, but we do need to examine every stage of the evidence base for all the requirements we make, and we need to look at each of these requirements and decide if it is real value for money," said Professor Rawlins. 

For an electronic copy of *The Search* for *New Medicines* please email your name, job title, company, and telephone number to Dino Ribeiro (dribeiro@riia.org) at the Royal Institute of International Affairs.

# Children say they are not involved enough in their treatment

Chibuzo Odigwe BMJ

Children and teenagers are unhappy with the lack of communication they get when they are treated in the NHS and think that they are not sufficiently involved with the decision making process, a new report says.

The report, which was published by the Commission for Health Improvement last week, says that many children and teenagers felt they had the right to participate in decisions about their treatment rather than being passive recipients of care.

It was compiled from 59 separate reports from voluntary bodies and statutory organisations and is the largest ever compilation of feedback from children and teenagers about health care. All the information, comprising 700 individual pieces of feedback, is being put on a database, to which health professionals will have access.

The report gives many examples of how young people viewed their treatment. They gave descriptions such as "Nobody explained anything about going home" and "The GP did not ask-[he] just sent a referral."

Some of the young people's comments on their level of involvement were: "[There was]

not enough time to have things properly explained," "[The doctor] only explained it to my dad," "I know more than my mum, I know nearly everything," and "[I] did not really understand, nobody explained what is going to happen to you to make you better."

The responses also showed that they felt that the hospital environment could be better, with comments such as, "Better decoration would make it feel more like home."

The responses, which were from children and teenagers up to the age of 19, were collected in different ways appropriate for each age group, including questionnaires, oral interviews, and interactive group sessions. However, to qualify for entry into the database responses had to come directly from the children, not from parents or other carers.

The Commission for Health Improvement thought that it was important that young people's voices were heard. Liz Fradd, director of nursing at the commission, who was responsible for the report, said: "Responding to what children say they want in health care is more than [giving in to] pester power—it's good patient care. Children clearly want to be involved, informed, and consulted when they have to use healthcare services."

*Children's Voices* is accessible at www.chi.nhs.uk/childrens\_voices/ index.shtml



Children in hospital complained that doctors explained things only to their parents