

In brief

NHS banned from using expensive phone lines: The Department of Health for England has announced a ban on NHS organisations using expensive national telephone numbers that cost patients more than a standard phone call. From April, only freephone numbers or those that offer patients a guaranteed low rate call, such as those starting with 0845 or 0844, will be allowed.

NICE issues guidance on pacemakers: The National Institute for Clinical Excellence (NICE) has recommended that dual chamber pacemakers should generally be used to treat symptomatic bradycardia in patients with sick sinus syndrome or atrioventricular block, or both. See www.nice.org.uk

African countries vaccinate against polio: A further attempt to eradicate poliomyelitis—by vaccinating more than 100 million children—is underway in 22 African countries. The move comes following a report of a child with the disease in Ethiopia, where no case had been reported in four years.

Nurse prescribing powers may be extended: England's Department of Health and the Medicines and Healthcare Products Regulatory Agency will be consulting over the next three months on how best to expand the existing powers for nurses and pharmacists to prescribe drugs, freeing doctors to deal with the most serious conditions. See www.dh.gov.uk/consultations

Tobacco control framework comes into force: The World Health Organization's Framework Convention on Tobacco Control, to which 168 countries have signed up, came into force on 27 February. Signatories have three years to get strong health warnings on to tobacco packaging, and five years to establish comprehensive bans on tobacco advertising, promotion, and sponsorship. See www.who.int/en/

Abstinence programmes do not reduce HIV prevalence in Uganda

Bob Roehr *Boston*

Use of condoms and death explain the substantial decline in the prevalence of HIV in Uganda in the past decade.

The reduction had previously been credited to ABC programmes (abstinence, be faithful, and use condoms). A longitudinal study, presented at the 12th retroviral conference in Boston, however, challenges the contributions of abstinence and fidelity. The study included a door to door survey of about 10 000 adults aged 15-49 in 44 villages in the Rakai district of southern Uganda.

A surge of infections in the early 1990s is the cause of rising numbers of deaths. In 2001-2, 125 cases of seroconversion added to the prevalence, and 200 died. "Death alone accounted for a six percentage point reduction in HIV prevalence in the one year," Maria Wawer, a public health researcher from Columbia University, New York city, said. "Overall, the HIV prevalence over the last decade declined 6.2 percentage points. We estimate that mortality alone contributed five percentage points of the decline."

The remaining share could



Sexual abstinence among men aged 15-49 in Uganda declined between 2001-2 and 2002-3

not be attributed to abstinence. The proportion of men reporting sexual abstinence in the past year declined, but the proportion among women did not change. Nor could the decline be credited to fidelity because the proportion of men reporting two or more partners in the past year increased in the decade.

Use of condoms increased dramatically. "Condom use is much higher with casual part-

ners than with their married partner," Dr Wawer said. "Condom use is associated with the significant reduction of HIV acquisition in this population."

The most troubling aspect of the analysis is that men who have seroconverted within the past year reported having about twice as many sexual partners as men who have not seroconverted. The probability of transmitting HIV per coital act is about 10 times higher for someone who recently seroconverted. This group accounts for roughly half of all new infections in Uganda. As a result, the overall incidence has edged upwards from 1.3 per 100 people per year in 1994-5 to 1.7 in 2002-3.

The study began in 1994 and consisted of a behavioural questionnaire and an analysis of collected blood and urine samples. Its annual compliance rate was 85-90%. Researchers from Johns Hopkins University, in Baltimore, Maryland, and Makerere University in Kampala, Uganda, led the collaborative effort.

HIV prevalence in women was 19.7% in 1994 and fell by a third to 12.9% in 2003, the last year for which full analysis of the data was complete. For men, prevalence declined by 38% from 15.0% to 9.3% in the same period. (see p 498.) □

The abstract (27LB) is available at www.retroconference.org

UN committee approves declaration on human cloning

Susan Mayor *London*

A United Nations committee approved an international declaration on human cloning last week. A contentious vote ended three years of failure to reach a more binding agreement.

The UN Declaration on Human Cloning calls for countries "to prohibit all forms of human cloning inasmuch as they are incompatible with human dignity and the protection of human life." The sixth committee of the UN, which agrees legal issues, was divided on the declaration with 71 mem-

bers in favour, 35 against, and 43 abstentions. The declaration will now be passed to the General Assembly for formal adoption.

The declaration was developed after a three year debate in which the committee was unable to choose between two more tightly defined proposals for an international treaty on human cloning. The first proposal from Costa Rica, also supported by the United States, recommended a complete ban on both reproductive and therapeutic cloning. A second proposal from Belgium proposed banning reproductive cloning but allowing member countries to make their own decisions on therapeutic cloning (*BMJ* 2004;329:1258, 27 Nov).

The declaration is a powerful but non-binding instrument that encourages, but does not require, countries to pass laws conform-

ing to its position, written in language ambiguous enough to please both sides of the argument. The decision to adopt it remains highly controversial.

Belgium, which had argued in favour of allowing therapeutic cloning, said it would not be bound by a text approved by such a narrow vote.

Richard Gardner, chairman of the working group on stem cell research and cloning at the Royal Society, said that the declaration would have no effect on research into therapeutic cloning in the United Kingdom.

The non-binding nature of the declaration also allows for reproductive cloning, however. Professor Gardner commented, "The voting of 71 to 35, with 43 abstentions, shows a divided UN and fails to send out a clear message to maverick scientists that reproductive cloning is unacceptable." □