In brief

Universities clamp down on drug company gifts: Stanford University Medical Center in California is to ban its doctors from accepting gifts from pharmaceutical companies, including pens, mugs, and lunches at seminars. Yale University and the University of Pennsylvania have announced similar policies. Doctors at Stanford will also be prohibited from publishing articles ghost written by industry contractors.

Early blood test detects genetic disorders: A blood test that identifies the sex of a fetus at seven weeks could help to detect babies with sex linked genetic disorders at an earlier stage and eliminate the need for riskier procedures. Researchers from the Institute of Child Health in London have trialled the test on 70 pregnant women.

Number hurt by landmines increases: Worldwide casualties from landmines and unexploded remnants of war increased to 7328 in 2005, up 11% on 2004, including about 1743 deaths, the annual *Landmine Monitor Report* says. But it notes that there is serious under-reporting, and experts believe there are between 15 000 and 20 000 new casualties each year.

Tobacco in film trailers on television needs control: Ninetv five per cent of all US youth aged between 12 and 17 saw, in a year, on television at least one movie trailer that depicted tobacco use, shows a study. It also found that 14.4% (31) of all trailers shown included images of tobacco use. More needs to be done to "reduce or eliminate the influence of tobacco use in televised movie trailers," say the authors (Archives of Pediatrics and Adolescent Medicine 2006;160:885-8.)

Payments prompt baby boom in Australia: Maternity payments of \$A4000 (£1600; €2400; \$3000) are credited with increasing the birth rate in Australia—by an extra 10 000 babies. A total of 268 667 parents in 2005-6 claimed the payment, showing a greater than expected rise in the birth rate.

British soldiers are "guinea pigs" for new use of blood clotting agent

Owen Dyer London

British soldiers in Iraq are being treated for traumatic injury with an unlicensed blood clotting agent that has yet to complete clinical trials.

The drug, NovoSeven, also called recombinant factor VIIa, has been licensed for the treatment of haemophilia since 1999 but is still undergoing phase III trials as treatment for traumatic bleeding. It was first used in a military setting four years ago, on a wounded Israeli soldier, and has since been used by US forces in Iraq.

A spokesman for the Ministry of Defence said, "The use of recombinant factor VIIa has been authorised only after a very extensive review of the current evidence. This is a proven, life-saving treatment. It has only twice been administered—in the

two separate incidents in Iraq, and on both occasions the individuals' lives were almost certainly saved by the treatment. It is used only in extremis, when the casualty has suffered a catastrophic trauma, and when no other treatments are viable or available. The NHS also recognises the benefits of this treatment in similar circumstances and has advised us that UK hospitals have also used the drug to treat severe trauma patients."

But Professor Ian Roberts, an epidemiolgist at the London School of Hygiene and Tropical Medicine, said that anecdotal evidence of success could be highly misleading. "Things get into medicine by the back door this way. Anecdotes about success pile up, and, before you know it, it's the standard treat-

ment, but it's still not proven. You only have to look at albumin in resuscitation or steroids in head injury to see that."

Professor Roberts led the CRASH (corticosteroid randomisation after significant head injury) trial, which found that steroid use in traumatic head injury, although widely accepted for years as standard treatment, actually increased mortality and had caused thousands of deaths. "All drugs have the potential to harm and clotting agents more than most," he said.

The Liberal Democrat science spokesman Evan Harris, a former hospital trauma specialist, said, "I think it's reasonable for the Ministry of Defence to provide this treatment outside the current licence—in extremis—while phase III trials are under way, as long as they publish their dossier of anecdotal evidence, in the interests of transparency. They should also undertake to publish case studies of soldiers treated, to contribute to the body of knowledge."

Gulf war symptoms do not constitute a syndrome

Fred Charatan Florida

The unexplained symptoms that afflict thousands of veterans of the Gulf war do not constitute a syndrome, a study from the US Institute of Medicine, published on 12 September, has found.

At the behest of Congress, the US Department of Veterans Affairs commissioned the Institute of Medicine to do the study.

The Institute of Medicine chose 850 potentially relevant epidemiological studies from more than 4000 references, and decided to base its conclusions on only peer reviewed published literature.

Almost 700 000 US soldiers, along with troops from 34 other countries, took part in the Gulf war. In the Persian Gulf, these soldiers were exposed to a wide variety of toxins and other health hazards, including pesticides, depleted uranium ammunition, and smoke from hundreds of burning oil wells.



US experts say that veterans, such as Major Randy Hebert, seen here testifying to Congress, suffered ill health but their symptoms did not amount to a syndrome

The 13 member committee of the institute was chaired by Lynn Goldman, professor of occupational and environmental health at Johns Hopkins University, Baltimore, who said, "Gulf war veterans consistently report experiencing a wide range of symptoms.

"But because the symptoms vary greatly among individuals, they do not point to a syndrome unique to these veterans. Unfortunately, because of the lack of objective pre-deployment health information, we do not have the baseline data needed to draw more definitive conclusions about many aspects of these veterans' long term health."

Almost 30% of personnel who served in the war in 1991, whether from the United States or other countries, have reported symptoms, compared with 16% of personnel who served elsewhere.

The report found that veterans of the Gulf war had increased chances of experiencing a psychological disorder such as depression, anxiety, or post-traumatic stress disorder. It also found a possible association between Gulf war service and amyotrophic lateral sclerosis, a rare disorder that occurs in five of every 100 000 people in the general population.

Simon Wessely, professor of epidemiological and liaison psychiatry at the Institute of Psychiatry, King's College London, and director of the King's Centre for Military Health Research, London, said, "This is a very impressive review of what we know. It is now clear there is no specific condition called 'Gulf war syndrome' but it is equally clear that service in the Gulf war did adversely affect health in some personnel."