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NEWS

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Hundreds of Chinese children are left poisoned as metal smelting plants are ordered to close

Jane Parry HONG KONG

Lead poisoning has been diagnosed in hundreds of children living near two metal smelting plants in China, say China's state news agency, Xinhua, and other media in China.

Of 1016 children living in three villages near the Dongling Lead and Zinc Smelting Company plant in the central Shaanxi province who underwent blood tests to measure lead concentrations, 851 have excessive lead, including 174 serious cases. In one village 236 of the 285 children have lead poisoning. The number of villages where children will be offered free tests has risen, and tests of adults living closest to the plant have shown dangerously high levels of lead and cadmium.

Meanwhile, tests on 2000 children aged under 14 years from four villages near the Jinglian Manganese Smelting Plant near Wugang city, in the southern province of Hunan, showed that 1354 have blood lead concentrations in excess of 480 µmol/l (10 mg/dl), with some as high as 1740 µmol/l. The UK Health Protection Agency says that there is no completely harmless level of exposure to lead but that epidemiological studies in children have shown an inverse relation between IQ and blood lead concentrations above 0.48 µmol/l (0.01 mg/dl). Children in other nearby villages are also undergoing testing, the state run, English language newspaper the China Daily reported.

The Jinglian plant has been operating



Villagers in Shaanxi province wait for blood tests to assess lead concentrations

without a licence from the local environmental protection bureau. Two Jinglian executives have been taken into custody, and its general manager, Liu Zhongwu, is reported to have fled. Two employees of the environmental protection bureau are also under investigation for negligence in connection with the plant, the *China Daily* reported.

Both the Dongling and Jinglian plants have been ordered to close. Villagers living within a 1 km radius of the Dongling plant, whose discharges have been polluting the air, water, and farmland since 2006, were

promised relocation further away as early as 2003. But relocation has either yet to happen or has been offered in areas still close to the plant, residents told Hong Kong's *South China Morning Post*. Government studies had found that the sites on offer were also contaminated, one villager said.

The mass poisoning is the second scandal within a year involving children's health and another example of growing concern about the effects on China's population of industrial and environmental pollution.

Cite this as: *BMJ* 2009;339:b3433

Care for people with neuromuscular conditions is unacceptable

Zosia Kmietowicz LONDON
The NHS is failing people
with muscular dystrophy and
related conditions by providing
unacceptably low standards of care,
concludes a report from a cross
party group of MPs and peers.

The all parliamentary group for muscular dystrophy's national inquiry into access to specialist care found that gaps in access to specialist, multidisciplinary care are

leading to huge disparities in life expectancy across the country. The result is that boys with Duchenne muscular dystrophy are living up to 30 years of age in the north east of England but to just 17 or 18 years in other parts of the UK.

In his evidence to the inquiry, Michael Hanna, chairman of the British Myology Society, argued that this "postcode lottery" would cause a national scandal if it concerned a rare form of cancer but that neuromuscular conditions are allowed to slip through the net.

The peer John Walton, who had a key role in initiating the inquiry, blamed the inequity of service provision on the NHS's system for specialised commissioning, which, he said, is "failing very many patients across the country."

The group's chairman, Dave Anderson MP, said, "The Walton

report shows an urgent need for NHS specialised commissioning groups to recognise muscular dystrophy as a condition within their remit.

"It is totally unacceptable that there are no NICE guidelines available for muscular dystrophy—a condition that affects 60 000 babies, children, and adults in the UK." he said.

See www.muscular-dystrophy.org. Cite this as: *BMJ* 2009;339:b3436

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IN BRIEF

US workplace suicides rose by 28% from 2007 to 2008: Of the 5071 deaths that occurred in the workplace in the United States in 2008, 251 were suicides, up from 196 the year before, figures from the US Department of Labor show. Redundancies, reduced working hours, and financial distress as a result of the recession have been blamed for the rise in suicides. The total number of workplace deaths in 2008 was the lowest number since tracking began in 1982, largely because of a fall in fatal injuries among construction workers, again because of the recession, the department says.

GP is found guilty of "hazardous" prescribing: Jane Barton has been found guilty by the General Medical Council of widely prescribing powerful painkillers and sedatives to elderly patients under her care at Gosport War Memorial Hospital that were "inappropriate, hazardous, and not in their best interests." The GMC's fitness to practise panel will decide next January whether Dr Barton is guilty of professional misconduct.

China cuts list of essential drugs by 85%: China's health ministry has cut the number of drugs on its essential medicines lists from 2033 to 307, in a bid to curb costs and implement a key part of its health system reform package, China's official news agency, Xinhua, has reported. State owned health facilities must give priority to these drugs.

NHS spends £74m on smoking cessation services: The number of people who successfully quit smoking (self reported as not smoking for four weeks) through NHS stop smoking services was 337 054 in 2008-9, says the NHS Information Centre (www.ic.nhs. uk/pubs/sss0809). This was a decrease of 4% on the 2007-8 number but an increase of 5% on 2006-7. The NHS spent £74m (€85m; \$122m) on its stop smoking services in 2008-9,

44% more than in 2006-7.
The cost per person
quitting was £219,
excluding the cost of
drug treatments.

Number of primary liver cancer cases in UK has tripled in 30

years: The number of cases of primary liver cancer in the United Kingdom rose from 865 in 1975 to 3108 in 2006, show figures from Cancer Research UK. Experts attribute this rise to increases in alcohol consumption, obesity, and the prevalence of hepatitis C.

Cite this as: BMJ 2009;339:b3459

Shortfall of family doctors will put US in "crisis" by 2020

Janice Hopkins Tanne NEW YORK

A predicted shortfall of 40 000 family doctors in the United States by 2020 has sparked fears that there will be too few doctors to cope with increased demand, including that arising from Barack Obama's proposals for healthcare reform.

The country faces "an absolute crisis" in



President Obama's plan to provide America's uninsured with health care needs more doctors

the provision of primary care doctors, said Ted Epperly, president of the 93 000 member American Academy of Family Physicians, which raised the alarm.

Students about to start medical school will be entering practice in 2020, but only one in 10 medical students currently enters primary care residencies; the rest all opt for specialties, Dr Epperly said. "We're poised to do healthcare reform, but we don't have a sufficient workforce." If Congress passes the reform bills, around 47 million Americans who are currently uninsured will gain access to regular care.

President Obama has also emphasised the importance of preventive care; and organisations such as the non-profit Commonwealth Fund, which works to improve health care, advocate a model where a patient receives primary medical care and related services at home, with access to specialists if needed.

Joseph Stubbs, president of the American

Opposition to swine flu vaccine among

Zosia Kmietowicz LONDON, and *BMJ* correspondents in North America, Europe, Asia, and South Africa

As governments gear up to launch national vaccination programmes against swine flu, questions are beginning to emerge about how many people will be prepared to take up the offer of the vaccine.

A survey published online this week in the *BMJ* found that just over half of 8500 health-care workers in Hong Kong said they would not be vaccinated against swine flu because of fears of side effects and doubts about the vaccine's effectiveness (*BMJ* 2009;339:b3391).

Evidence from 11 focus groups conducted in Canada before the current pandemic also indicates that parents and healthcare workers may refuse to be vaccinated or to vaccinate their children if they believe that the risks outweigh the benefits (*Emerging Health Threats Journal* 2009;2:e8, www.eht-forum.org/ehtj/journal/v2/pdf/ehtj09008a.pdf). And a survey by Israel's ministry of health similarly found that at least 25% of the population is not willing to be vaccinated against swine flu.

Last week England's chief medical officer, Liam Donaldson, shrugged off suggestions that NHS staff might turn down the vaccine when it is made available in the next few months. A poll of nurses found that a third would reject the offer (*BMJ* 2009;339:b3421, 21 Aug). Professor Donaldson said that anecdotal evidence from conversations with NHS managers suggests that "NHS staff are anxious to get the vaccine."

Initial testing in the United States of an H1N1 vaccine developed by Sanofi Pasteur in 500 adults has "raised no red flags" after 14 days, said Anthony Fauci, director of the US National Institutes of Health's Institute of Allergy and Infectious Diseases. On 17 August the institute expanded the study to include children aged 6 months to 17 years.

A survey of 15 countries carried out by *BMJ* correspondents found that most governments are planning to vaccinate at-risk groups of people and healthcare staff when a vaccine becomes available, probably in late September or early October. But some countries are yet to decide whether to include children. Germany's health ministry has said that it is awaiting clinical trial data.

Most countries are looking to start vaccinating in October, though Hong Kong has said that its vaccination programme is not expected to start until January or February. The government in Hong Kong cancelled its tender for flu vaccines on 20 August because

College of Physicians, which represents 126 000 internists and medical students, said that 40 000 to 50 000 more internists would be needed by 2020. Family physicians care for children and adults; internists care only for adults in primary care.

Stephen Schoenbaum, executive vice president for programmes at the Commonwealth Fund, pointed out that Massachusetts, which began providing health insurance to almost all its citizens in 2006, had clearly faced a shortage. "People had difficulty finding a primary care doctor who could see them. Providing coverage is only the first step," he said.

In 2005 around 130 million Americans had at least one chronic condition best managed by a multidisciplinary primary care team. By 2020 the number will be 157 million, and by 2023 78% of total health spending will be on chronic illness (*Health Affairs* 2009;28:64-74).

In the US about 30% of physicians currently work in primary care. In other industrialised nations about half of doctors are in primary care. Countries with highly developed primary care and areas of the US with good primary care "had better patient outcomes at lower cost," said Dr Schoenbaum. Cite this as: BMI 2009:339:b3431

NHS staff told to take more responsibility for their own health

Lvnn Eaton LONDON

All NHS staff in England should be given basic training in how to take responsibility for their own health and wellbeing, in a bid to cut sickness absence and make the NHS better value for money, advises an interim review for the Department of Health.

The report, which is based on interviews with 11 000 NHS employees, was drawn up by an independent occupational health adviser, Dr Steve Boorman, as part of the government's response to Dame Carol Black's report *Working For a Healthier Tomorrow*, published in March last year (*BMJ* 2008;336:631).

It shows that the NHS workforce has relatively high levels of sickness absence compared with other industries. On average, staff are absent for some 10.7 days a year, which is more than the public sector as a whole (9.7 days) and the private sector (6.4 days).

Dr Boorman, a former GP and currently

director of corporate responsibility and chief medical adviser to Royal Mail Group, emphasises that good staff health means better health outcomes for patients too.

"By putting staff health and wellbeing at the heart of how the NHS operates we will not only help improve the working lives of 1.4 million people [who work in it], but evidence suggests we will make significant savings and improve outcomes for patients," he said. But "making this happen requires nothing less than a sea change in the way in which staff health and wellbeing are perceived."

Dr Boorman told the *BMJ* that he was unable to give a breakdown of sickness absence by professional group, because the available evidence was not good enough for that. The NHS needs better national data on sickness absence, he says.

But "presenteeism" was also a concern, with many staff coming into work when they should have stayed home. "What we have got to do is raise awareness that your own individual health is your own responsibility. We are calling for basic training to include that—even for surgeons," said Dr Boorman. See http://nhshealthandwellbeing.org.

Cite this as: BMI 2009:339:b3406

health staff and the public seems to be growing worldwide



Those opposed to the H1N1 vaccine say there is a lack of evidence about its safety and efficacy

Drive-in vaccination allows 16 seconds per shot

Bob Roehr WASHINGTON, DC
Officials in metropolitan
Louisville, Kentucky (population
1.2 million) have found a new
way to rapidly inoculate a
population. Last year the public
health department offered free
seasonal flu jabs at the empty
county fairground, a massive
complex with good road

transportation. The complex has a single entry point with tollbooths, which is where they set up nine inoculation stations.

Hundreds of cars were lined up at the appointed hour. Patients were asked to roll up their sleeves and roll down their windows by the time they hit the tollbooth, said Adewale Troutman, the regional public health director. "In our plan we allowed 16 seconds to administer the injection," he said. At the peak of the vaccination effort, officials administered 1000 flu jabs in 40 minutes.

Cite this as: BMJ 2009;339:b3462

none of the offers met its health department's requirements. These included delivery by the end of the year, an agreement to buy back unused shots, and a minimum order size of three million doses up to a maximum of six million doses.

Schools that have been closed for the summer in the 15 countries surveyed will reopen as planned next month, although some have already set criteria for when they will close if the pandemic worsens. Hong Kong has issued the most specific policy. It says that schools will close for seven days if 10% of students become sick with H1N1 flu, if 1% are admitted to hospital, or if two or more students are admitted to intensive care or die.

In the US some local school boards have begun to change their attendance policies, which sometimes penalised truancy by reducing grades, to allow for greater flexibility in staying home during a flu outbreak.

In England the Department of Health is spending £2.2m (€2.5m; \$3.6m) on 14 fast tracked research projects into swine flu. Studies will look at various aspects of the infection, including estimates of how long someone is contagious and what a "safe distance" from an infected person might be.

Cite this as: BMJ 2009;339:b3461

Regulation of research is hampering progress in US health care

Bob Roehr WASHINGTON, DC

Regulations and practices in the United States designed to protect patients and their privacy are impeding medical research and in some instances making it prohibitively expensive, a leading medical society says.

The rules are hindering improvements in care, says the Infectious Disease Society of America in an article in *Clinical Infectious Diseases* (2009;49:328-35). The society is seeking to clarify and simplify the regulations while maintaining protection of patients.

A big obstacle, the article says, is the Health Insurance Portability and Accountability Act, enacted in 1996 to protect patients in care, with a rolling series of implementation dates. But research carried out with informed consent is a very different situation from standard health care, said William Burman, director of the infectious disease clinic at Denver Public Health and head of the society's research committee.

Dr Burman cited a 2007 survey in which two thirds of epidemiologists said that the act made their research significantly more difficult, and only a quarter believed that it improved patients' confidentiality (*JAMA* 2007;298:2164-70).

The society is pushing for adoption of recommendations on the act proposed by the Institute of Medicine issued last year (www. iom.edu). These suggest streamlining the process for non-interventional research such as chart reviews and systems analysis, where patient identifiers have been removed.

Cite this as: BMJ 2009;339:b3370

Dutch consultants threaten legal action over pay cuts

Tony Sheldon UTRECHT

Dutch hospital consultants are threatening legal action against their government's proposals to claw back hundreds of millions of euros from their salaries after a new payment system—designed to reward performance—sparked steep pay rises.

Both sides accept that the new system, based on declarations of treatments carried out rather than on lump sum payments, has flaws. Some hospital consultants—already among the best paid in the world—found their salaries unintentionally increased by 50% in 2008.

Measures now proposed include an 11% cut across the board for all consultants' hourly pay rates in a bid to avoid an overspend of €375m (£323m; \$534m) in 2010.

But the hospital consultants' professional body, the Order of Medical Specialists, has called the measures "draconian" and plans a legal challenge; individual hospital consultants have launched an online petition opposing the cuts (www.bezorgd.org).

Since 2008 most hospital consultants have been paid through a system of declarations of work carried out in the form of diagnostic treatment combinations. However, outdated average times per treatment meant that those consultants able to work more quickly could earn steep pay rises.

Miscalculations were also made in the compensation offered to those working in supporting specialties, such as microbiology and radiology, whose work was not seen as fully recognised under the new system of diagnostic treatment combinations.

A study for the ministry of health and health insurers found a 29% increase in the cost of fees declared by consultants between 2007 and 2008. For the supporting specialties the increase was as high as 50%.

The Order of Medical Specialists accepts that flaws in the new payments system resulted in some "excesses" but believes that the additional general cut of 11% holds the profession responsible for a budget crisis not of its making. In total, hospital consultants' pay will be reduced, on average, by 20%.

The chair of the order, anaesthesiologist Willem van der Ham, argues that the minister's proposals amount to a cut in the total budget for consultant care on top of what the order estimates to be a €200m overspend resulting from faults in the new payment system. "We were more than prepared to pay back that overspend. Our problem is that the minister is carrying out an ordinary package of economies in addition."

Health minister Ab Klink says that if adjustments to the average times and the compensation payments do not cover the overspend, then a reduction in the total budget for hospital consultant care is "inescapable."

A study by the Office for Economic Co-operation and Development of specialists' annual pay measured in US dollars put the Netherlands first, using 2004 data, at \$290 000, which compared with \$236 000 in the United States, \$153 000 in the United Kingdom, and \$144 000 in France (www.oecd.org).

Cite this as: BMJ 2009;339:b3408

A doll is used to demonstrate the Findelkind baby drop project in Hamburg, Germany

UK has more guidance for how to deal

Roger Dobson ABERGAVENNY Researchers have called for national guidelines in the United Kingdom on how to handle abandoned babies, after they found that only three of 170 NHS organisations have any relevant policies in place.

The authors of the study wrote: "There are currently greater provisions in terms of policies for abandoned vehicles than for babies—a sad state of affairs... Overall, there is

a vast lack of standardised guidelines for dealing with an abandoned baby in the UK, both nationally and institutionally" (*Health Policy* doi:10.1016/j. healthpol.2009.06.002).

The report adds: "National policies on recording and handling of baby abandonments are urgently needed, and future efforts should be concentrated on establishing clear data collection frameworks to inform understanding, guide competent

practice and enable successfully targeted interventions."

Major UK institutions that were contacted between September 2007 and April 2008 for information on existing policies or guidelines included England's Department of Health, the Home Office, the National Policing Improvement Agency, and the Royal Colleges of Midwives and of Obstetricians and Gynaecologists.

They also carried out a



"When homoeopathy stands in place of effective treatment, lives are lost," doctors have said

Homoeopathy should not be used to treat serious diseases, says WHO

Oona Mashta LONDON

The World Health Organization has said that homoeopathy should not be used to treat several serious diseases such as HIV, tuberculosis, and malaria, after doctors drew attention to the continuing promotion of such complementary therapies in many developing countries.

WHO also said that it does not recommend homoeopathy for treating diarrhoea in infants or flu.

WHO experts, who have clearly criticised the use of treatments that have not been proved clinically and that are not evidence based, said that homoeopathy had "no place" in treatment of these five diseases.

The organisation was responding to calls from young doctors and researchers who fear that the promotion of homoeopathy for these life threatening conditions in developing countries could put people's lives at risk.

The Voice of Young Science network, a group coordinated by the charity Sense About Science, has now written a letter to health ministers highlighting WHO's position and asking them to work against the promotion of homoeopathy for these dangerous diseases.

The network said: "We ask that you publicise this advice to healthcare agencies in your country and join our effort to combat the promotion of ineffective therapies such as homeopathy, which rarely contains any active ingredient, for these serious diseases."

In a letter to WHO in June doctors from the United Kingdom and Africa said they were frustrated with the continuing promotion of homoeopathy as a preventive treatment for serious diseases.

The letter is at www.senseaboutscience.org.uk.

Cite this as: BMJ 2009;339:b3447

with abandoned cars than babies

systematic search of websites of 170 NHS organisations. The authors say that only three had any relevant guidelines in place and available: NHS East Midlands, Nottingham University Hospitals NHS Trust, and Powys Health Care NHS Trust.

They say that no complete national record of the number of abandoned babies exists, but they identified two sources of associated statistics: the Abandoned Children Register, and Home Office crime statistics. Combining these two sets of figures gave an annual total of abandoned babies of between 60 and 80 babies since 1991.

"Data that does exist is not comprehensive and sources are incompatible, resulting in an ambiguous picture of UK baby abandonment," says the report. "Basic incidence data is essential, and more detailed statistics on abandonment

cases would further strengthen the evidence base to inform best practice."

It adds, "The situation of inaction differs from international approaches, where countries including the USA and France have introduced laws allowing safe anonymous abandonment of newborn babies to address infant safety and maternal mental health."

Cite this as: BMJ 2009;339:b3438

Misuse of ADHD drugs by young people is rising, US data show

Michael Day MILAN

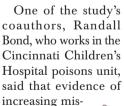
The misuse by young people in the United States of drugs to treat attention-deficit/hyperactivity disorder (ADHD) has risen by more than 75% in eight years, a study indicates.

Researchers at the Cincinnati Children's Hospital Medical Center, who made the discovery, called on prescribers and parents to be aware of the potential for the drugs to be misused (*Pediatrics* doi:10.1542/peds.2008-0931).

They analysed the American Association of Poison Control Center's national poison data system for the years 1998 to 2005, looking at all cases involving 13-19 year olds who intentionally misused ADHD drugs. These drugs often include mixed amphetamine salts and methylphenidate.

The number of phone calls to poison centres relating to adolescents' misuse of prescribed ADHD drugs rose from 330 to 581 over this period, a rise of 76% and a greater rise than that in the number of calls relating to young people's substance misuse generally. The estimated number of combined amphetamine/methylphenidate prescrip-

tions for teens and preteens rose by 80% in the same period, indicating that increased prescribing lay behind the rise in misuse, say the researchers.





ADHD drugs can feel like the common street drug speed

use was clear. "The fact that calls to poison centres are up means that abuse is up," he said.

He noted that the sharp rise was "out of proportion" to requests to poison centres for help with other forms of drug misuse. And he added that the 581 figure was almost certainly "the tip of the iceberg," as most such cases did not result in calls to poison centres.

Cite this as: BMJ 2009;339:b3434