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Contract for GPs in England “failed to live up to expectations”

Zosia Kmietowicz LONDON

England’s spending watchdog has delivered a damning assessment of the government’s attempts to modernise primary care through the new GPs’ contract, which came into effect in April 2004.

Costing £1.8bn (€2.3bn; \$3.2m) more than predicted in its first three years, says the Public Accounts Committee, the contract fully achieved just one of its objectives: to attract more doctors into general practice. Since March 2003 an additional 4098 GPs have been working in primary care, an increase of 15%.

But productivity in general practice has fallen by an average of 2.5% a year since the contract was launched, rather than increase by the expected 1.5%. And patients in deprived areas continue to struggle to access GP services, despite this being one of the goals heralded by the BMA as a top priority in its lengthy negotiations with the Department of Health over the new deal for GPs.

The committee’s report acknowledges that some progress has been made in linking GPs’ pay to performance. It is critical, however, of the quality and outcomes frameworks (QOF) system, developed to measure performance. With targets set too low it was simply too easy for GPs to achieve high scores, resulting in additional unexpected costs for the government.

Edward Leigh, the committee’s chairman, said, “The new contract for GPs in England, intended to deliver benefits by linking GPs’ pay to their clinical performance, has so far failed to live up to expectations.

“Partners in GP practices are now putting in less time, and their productivity has decreased. Only their pay is burgeoning, having increased on average by an eye watering 58% since 2003 [from £73 000 in 2002-3 to £114 000 in 2005-6].” It was originally expected that partners’ pay would increase by 15%. Pay for salaried GPs rose by just 3% from 2003 to 2006.

The report can be seen at www.parliament.uk.

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Europeans win Nobel prize for discovering HIV and HPV

Geoff Watts LONDON

The 2008 Nobel prize for physiology or medicine has gone to one German and two French researchers for microbiological detective work that led to the discovery of two families of viruses with a major impact on human health. Almost as noteworthy, say some commentators, is the absence of one US researcher whose contribution was controversial.

Françoise Barré-Sinoussi, 61, of the virology department at the Institut Pasteur in Paris, shares half the prize of 10 million Swedish kronor (£800 000; €1m; \$1.4m) with Luc Montagnier, 76, director of the World Foundation for AIDS Research and Prevention. Their award is for the discovery of HIV.

Jonathan Weber, professor of communicable diseases at Imperial College London, thinks that acknowledgment of the discovery is overdue. “I’m delighted the prize recognises the primacy of the French contribution,” he said, “and I’m particularly pleased it recognises Françoise Barré-Sinoussi, the scientist who actually did the work.”

The ghost at this particular Nobel feast is the US HIV researcher Robert Gallo. The 1980s saw an acrimonious dispute between him and Professor Montagnier over who had first identified the virus. Laboratory analyses of the relevant material subsequently showed that the

organism that Professor Gallo described was in fact the agent already identified by Professor Montagnier. The American’s samples had somehow become contaminated with material provided by his French counterpart.

“There’s absolutely no doubt that the French team did it first,” said Professor Weber. “I think what some scientists will struggle with is whether they could have done it without all the work that Gallo had done over the years.”

The third and uncontroversial

winner, Harald zur Hausen, 72, former scientific director of the German Cancer Research Centre in Heidelberg, receives his half of the prize money for discovering the human papillomavirus (HPV) family, the cause of cervical cancer. His work led to the development of a vaccine against cervical cancer.

Anne Szarewski of Cancer Research UK said, “Harald zur Hausen believed years before anyone else that the cause of this cancer must be HPV.”

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Nobel prize winners: the discovery of HPV as the cause of cervical malignancy led to the development of the first anticancer vaccine

CLAUDIO BRESCHI/APPA

Fertility specialist denies misconduct to GMC committee

Owen Dyer LONDON

A leading fertility specialist dismissed the symptoms of a patient, saying that they were due to anxiety, just hours before she was admitted to intensive care with severe hyponatraemia, a disciplinary panel of the General Medical Council has heard.

Mohamed Taranissi, founder of the Assisted Reproduction and Gynaecology Centre, Upper Wimpole Street, London, is also accused of unduly pressuring another patient to take adalimumab, a drug not licensed for fertility treatment. The patient, named only as IK, told the hearing that when she refused the drug Mr Taranissi grew angry and told her he would not be responsible if she had a miscarriage.

Cross examining IK, Mr Taranissi's counsel, Nicola Davies QC, described her as a serial complainant with an unreliable memory, noting that she had lodged complaints against two other IVF clinics and could not remember the dates and details of appointments.

Mr Taranissi is also accused of being insensitive, defensive, and lacking in compassion when dealing with the husband of the first woman, who attended his clinic "crying and feeling unwell." The GMC alleges that he failed to investigate the nausea of the patient, named as CG.

CG already felt sick when she made the trip to London for her appointment at Mr Taranissi's clinic on 10 August 2004.

With a further clinic visit scheduled the next day, CG stayed the night in London at a friend's house. She vomited often, and between 2 am and 3 am her husband called Mr Taranissi for advice. During this conversation, the couple allege, Mr Taranissi attributed her symptoms to anxiety and said she had a "mental block" about her treatment.

The next day she returned to the clinic for a series of appointments and began to feel somewhat better. After discussing her IVF treatment with Mr Taranissi, she headed back to her friend's house. "The next thing I remember was waking up in intensive care with a ventilator in my throat two days later," she told the hearing.

Mr Taranissi denies all charges of misconduct but has yet to take the stand. He has had a record of clashes with the regulator of IVF clinics, the Human Fertilisation and Embryology Authority (*BMJ* 2007;335:173).

Cite this as: *BMJ* 2008;337:a1995



BRADLEY KANARIS/GETTY

Cricket star tells Indian children to wash their hands

Zosia Kmietowicz LONDON

The international cricket star Sachin Tendulkar, also known as the "Master Blaster," has lent his image to Unicef in a bid to get Indian children to wash their hands and

promote better health care.

Public service announcements featuring Tendulkar, who is widely acknowledged as one of the greatest batsmen in the history of the game, will be broadcast in 14 languages

on television channels across India. Diarrhoea is the second biggest killer of children in the country. Proper hand washing can reduce the number of cases of diarrhoea by 47%.

Cite this as: *BMJ* 2008;337:a2011

Only 3% of NHS trusts failed to balance their books in 2007-8

Paul Dinsdale LONDON

Most NHS hospital and primary care trusts in England improved their financial performance in the last financial year, a report by the government's auditors says, but some are still performing poorly and need to take "immediate action" to rectify faults.

The third such annual report by the Audit Commission shows that half of the 302 trusts assessed performed "well or strongly" in the use of their resources and that only 3% failed to balance their books in 2007-8. The report does not include foundation trusts.

The survey found that 282 (93%) of the trusts met or exceeded minimum standards for their overall use of resources. Trusts in the area covered by the North West Strategic

Health Authority achieved the highest average score overall in England, whereas those in the Yorkshire and Humberside area scored the lowest, said the Audit Commission.

London's performance was the most mixed: it had the highest proportion of strongly performing trusts but also the highest proportion that failed to meet minimum standards.

Eight primary care trusts and six other trusts achieved the overall top score for use of resources in 2007-8, but 20 trusts failed to meet minimum standards overall in their use of resources in each of the past three years' evaluations.

Bromley Primary Care Trust was praised for its "outstanding" performance.

The auditors evaluated NHS bodies across five areas: financial reporting, financial management, financial standing, internal control, and value for money.

Auditors' Local Evaluation 2007/08 is at www.audit-commission.gov.uk.

Cite this as: *BMJ* 2008;337:a1981

Artist finds new use for doctors' ties

Zosia Kmietowicz LONDON

Using items of clothing to bring diversion to what can be difficult and emotional hospital visits seems to be Gina Glover's specialty.

Glover, who has just completed a year as artist

in residence at the assisted reproduction unit of Guy's and St Thomas' NHS Trust in south London, first brought us the image of colourful pairs of striped socks arranged as chromosomes (*BMJ* 2003;326:1413). For her latest

work Glover uses the ties of staff at the unit to demonstrate sperm morphology.

Last week Glover was awarded a medal from the Royal Photographic Society.

See <http://artinhhospitals.com>.

Cite this as: *BMJ* 2008;337:a1994

Ovarian cancer accord aims to settle dispute over symptoms

Susan Mayor LONDON

A UK consensus group has drawn up a list of symptoms that commonly occur in women who later receive a diagnosis of ovarian cancer. The group calls for research into the association between recognition of the symptoms, early referral, and outcomes, as part of efforts to resolve controversy over whether it is worthwhile to raise awareness of the disease.

In a debate in the *Times* in April, Ian Jacobs, director of the University College London Institute for Women's Health and a consultant gynaecologist and oncologist at University College London Hospitals NHS Foundation Trust, warned that campaigns to raise awareness of the symptoms of ovarian cancer could do more harm than good, because the symptoms are vague and common among women (www.timesonline.com, 14 Apr, "Ovarian cancer: the debate").

To help clarify the issue a group of researchers, doctors, and charities working in ovarian cancer have developed a consensus statement to provide up to date, evidence based guidance on the signs and symptoms of the cancer and what action to take. Its development was supported by the Eve Appeal, an ovarian cancer research charity, and the patients' support group Ovacom.

The consensus group, of which Professor Jacobs was a member, found that pelvic and abdominal pain, increased abdominal size or persistent bloating (or both), and difficulty in eating and feeling full are common among women in whom ovarian cancer is subsequently diagnosed.

The group's statement points out that survival is strongly associated with the stage of ovarian cancer at diagnosis. Five year survival is 90% in women with a diagnosis of stage IA or IB ovarian cancer but only 5-14%

in those with a diagnosis of stage IV.

Survival from ovarian cancer is poorer in the United Kingdom than in other European countries, although the statement acknowledges that the reasons for this are complex.

However, it notes, "Women often follow convoluted referral pathways before being correctly diagnosed, with 50% of women not being referred directly to gynaecological cancer clinics. This is due to both women and GPs failing to recognise the presenting symptoms of ovarian cancer."

Professor Jacobs said, "The hope is that greater awareness of symptoms among both doctors and the public will lead to prompt diagnosis, minimise delays and, through earlier detection, improve the outcome of treatment in terms of increasing survival and reducing the number of deaths."

However, he cautioned, "Whether or not this will actually be achieved is as yet uncertain."

The evidence indicates that the frequency, persistency, severity, and new onset of these symptoms might help to differentiate between ovarian cancer and other conditions, the consensus statement notes.

"The symptoms are often new, more persistent, and gradually become more severe in ovarian cancer," explained Professor Jacobs.

"But they are also very common in women who are healthy or have a variety of other conditions. More research is needed to identify a pattern of symptoms that can effectively identify women with ovarian cancer well before they would otherwise be diagnosed without making many other women anxious."

The Ovarian Cancer UK Consensus Statement is at www.eveappeal.org.uk/

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Primary trusts must "challenge the fiction of the wonder drug"

Lisa Hitchen LONDON

Primary care trusts need to "challenge the fiction of the wonder drug," a conference on the organisation of the NHS was told last week.

Sophia Christie, chief executive of Birmingham East and North Primary Care Trust, said, "This fiction is a really dangerous one that we need a more sophisticated understanding of."



FIONA HANSON/PA

Patricia Hewitt's decision on trastuzumab cost one trust £1m

Media headlines describe some drugs as "lifesaving treatments," when they often prolonged survival only for a number of weeks.

Many patients did not understand the numbers, she told the conference held at the Royal College of Physicians, and commissioning should not be driven by the demands of patients and clinicians. Giving patients these products only delayed discussions with patients about end of life care, an issue that, she said, needs an open debate and radical change.

Investment must also be "intelligence driven" and not react to other people's agendas, she said. Ms Christie gave the example of the 2005 announcement by the former health secretary Patricia Hewitt that primary care trusts must not refuse patients treatment with the breast cancer drug trastuzumab (Herceptin) on cost grounds alone. This prompted Ms Christie's trust to spend £1m (£1.3m; \$1.8m) on the drug—but that spending did nothing for the trust's more serious population problems of coronary vascular disease in men and infant mortality.

Cite this as: *BMJ* 2008;337:a1970



US tells African governments to stop supplying contraceptives to family planning group

Peter Moszynski LONDON

A recent decision by the United States Agency for International Development (USAID) to force African governments to cease providing contraceptive items to maternal health organisations partnered with the charity Marie Stopes International has caused widespread outrage. Critics of the agency's decision are concerned that it will increase numbers of unintended pregnancies and force women into unsafe abortions.

The instruction, issued by Kent Hill, USAID's assistant administrator for global health, said the action was necessary because Marie Stopes International works with the Chinese government, whom the US State Department accuses of "coercive abortion and involuntary sterilisations."

Dana Hovig, chief executive of Marie Stopes International, protested strongly against the decision. He said that his organisation does not support coercive abortion or involuntary sterilisation in China or elsewhere. "To the contrary, MSI is one of the few organisations that has worked over the past decade to increase the availability of voluntary, client centred family planning services in China."

Mr Hovig said the instruction will "seriously disrupt" the organisation's family planning programmes in at least six African countries: Ghana, Malawi, Sierra Leone, Tanzania, Uganda, and Zimbabwe.

Marie Stopes International estimates that worldwide its family planning services prevented five to seven million unwanted

pregnancies in 2007 alone, thus preventing one to 1.5 million abortions. It believes that most of these abortions would have been unsafe, putting women's lives at risk.

Mr Hovig said, "At a time when world governments have pledged to increase their commitment to improving the health of women, only the Bush administration could find logic in the idea that they can somehow reduce abortion and promote choice for women in China by causing more abortion and cutting choice for women in Africa."

"This senseless decision is likely to have only one clear consequence: the death of African women and girls."

More information can be found at www.mariestopes.org/News.aspx.

Cite this as: *BMJ* 2008;337:a1986

Portuguese code no longer lists abortion as ethical misconduct

Tiago Villanueva LISBON

Abortion is no longer considered an act of serious ethical misconduct in the latest ethical code for doctors in Portugal, which was approved recently by the Portuguese Medical Association.

The previous code stated, "The practices of both abortion and euthanasia are considered acts of serious ethical misconduct."

However, the new code, which was approved at the end of September by the plenary of regional councils, the most important decision making body in the Portuguese Medical Association, no longer includes this statement. Instead it simply says, "The physician must have respect for human life from the moment of its inception."

However, the code still refers to abortion as being allowed only if it is essential to save a woman's life and so does not explicitly refer to the recent law decriminalising and regulating abortion, enacted on 15 July 2007 after a national referendum. This legislation allowed abortions to be carried out in registered

premises up to the 10th week of pregnancy.

The new code was overwhelmingly approved by 107 delegates at a meeting to review it, with only two votes against and three abstentions. It will officially replace the previous version, which had been in place since March 1985, by the end of the year.

Pedro Nunes, the association's president, said, "This code stresses that there currently isn't a consensus surrounding the moment when life begins. This makes each physician responsible . . . for considering the moment when life begins."

The new code is at www.ordemdosmedicos.pt.

Cite this as: *BMJ* 2007;337:a1945

Letting art heal the devastation of HIV

Zosia Kmietowicz
LONDON

Anyone looking for evidence of how art can help people cope with illness need look no further than the life size photographs embedded in this hand embroidered triptych created by 120 South African women in response to the effects of AIDS and poverty.

The women, who live along the banks of the Keiskamma River in the country's Eastern



Cape province, are grandmothers who have been left to raise their grandchildren after their own children contracted HIV. Carol Hofmeyr, director and

founder of the Keiskamma Trust believes that the project has

helped women cope with their lives. The work can be seen at Southwark Cathedral, London Bridge, London SE1 from 8 to 30 October.

Cite this as: *BMJ* 2008;337:a1998

Supply of medical

Ned Stafford HAMBURG

European supplies of medical isotopes used as radiotracers in molecular imaging could return to nearly 80% of normal in the last week of October, as the result of a contingency plan worked out by the European Union and national authorities.

European hospitals have been enduring a severe shortage of medical isotopes that has reduced the capacity of nuclear medicine departments by more than half (*BMJ* 2008;337:a1575, 5 Sep).

Wolfram Knapp, president elect of the European Association of Nuclear Medicine, said that authorities had agreed to allow



An estimated 100 000 babies and 15 000 mothers die from tetanus each year, mainly in Africa and Asia

Unicef aims to eliminate tetanus in mothers and babies by 2012

John Zarocostas GENEVA

The global children's agency Unicef has launched a new vaccination drive to eliminate maternal and neonatal tetanus by 2012. "It's possible to do it," Francois Gasse, Unicef's senior health specialist, told reporters.

In 2004 the disease killed an estimated 128 250 babies and up to 30 000 mothers, almost all in 47 countries in Africa and Asia.

Dr Gasse said that these figures represented a sharp reduction from the 800 000 deaths of babies and 60 000 to 90 000 of mothers each year in the mid-1980s.

He pointed out that in the past decade 11 countries and 13 Indian states eliminated maternal and newborn tetanus, including

Egypt (2007), Malawi (2002), Rwanda (2004), Vietnam (2005), Zambia (2007), and the Indian states of Maharashtra (2006), Punjab (2007), and Goa (2007). The World Health Organization defines elimination as less than one case of tetanus in a newborn baby in every 1000 live births.

Dr Gasse said that new estimates, yet to be published, are likely to show that the annual number of deaths from the disease today stand at about 100 000 babies and about 15 000 mothers.

"It is unacceptable to see a disease that has disappeared from the industrialised world still occur in less industrialised countries," Dr Gasse outlines in Unicef's latest review,

Participate, Vaccinate, Eliminate.

"Maternal and newborn tetanus are deaths we shouldn't be talking about in this day and age," he said.

"If a mother is vaccinated, she passes her immunity on to her baby, who is protected for the first two months of life."

The agency predicts that 386 million vaccines are needed to eliminate the disease worldwide, and it adds that between 1998 and early 2008 more than 80 million women were immunised with at least two doses of the vaccine.

Clostridium tetani, the bacterium that causes tetanus, enters the body through open wounds and produces a potent toxin that attacks the nervous system.

The new campaign, Unicef said, aims to "lead to the vaccination and subsequent protection of over 70 million women of child bearing age and their babies."

Unicef says that the vaccine, developed in 1926, is one of the safest, and three doses would protect women for at least five years.

"Today the cost of one dose of vaccine is \$0.07 (£0.04: €0.05) to \$0.08," Dr Gasse said. "You need three vaccines, or \$0.21, to protect the mother. And you need three syringes, which cost \$0.06 each. The total cost is about \$1.80."

About \$200m, or half of the cost of the vaccines, will be met by donations to Unicef, but the agency said that it still needs to find the remaining funds.

Participate, Vaccinate, Eliminate is available at www.unicef.org.

Cite this as: *BMJ* 2008;337:a1987



Actress Salma Hayek went to Sierra Leone for the campaign

isotopes is likely to return to 80% by end of October

the transport of radioactive materials from the Osiris reactor in France to a processing plant in the Netherlands. Normally the Osiris reactor supplies a plant in Fleurus, Belgium, but that plant was shut down after a leak of iodine-131 gas, he said.

The Dutch processing plant would normally process material from the Petten nuclear reactor in the Netherlands but is idle because that reactor is down until late November for safety reasons, said Dr Knapp, who is also director of nuclear medicine at the University of Hanover Medical School in Germany.

"This new development is quite interest-

ing, and we are optimistic," he said. "The European Commission has been exerting some political pressure to get things done. I am pleased with the cooperation of the commission."

Dr Knapp said that the shortage in medical isotopes, which began in early September, has caused numerous postponements around Europe of non-urgent investigations. He added that some urgent investigations were also delayed, in particular lung investigations.

"I don't want to overdramatise this," he said. "But I know that in some places urgent investigations were not performed."

Of the three major firms that supply Europe with radiotracers, one seems to be better supplied than the others, Dr Knapp said, although he did not want to name names.

He added that companies generally have been helpful during the shortage.

He said that companies had put hospitals with long term supply agreements at the top of the delivery list and that some hospitals seemed to be better supplied than others. Weekly deliveries in some cases had fluctuated from week to week.

More information is at www.emea.europa.eu.

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IN BRIEF

Tougher targets on climate change would bring big health savings:

A 30% cut in greenhouse gas emissions by 2020, instead of the agreed 20% target, would result in the European Union saving up to €25bn (£19bn; \$34bn) a year in health costs, says a report commissioned by three health and environmental non-governmental organisations. The improvement in air quality would result in fewer years of life lost to respiratory disease and fewer hospital admissions, the report says.

Probiotics don't help eczema: There is no evidence that probiotics can relieve the symptoms of eczema, and they may harm people in certain groups, says a Cochrane Library systematic review (*Cochrane Database of Systematic Reviews* 2008;(4):CD006135). The researchers looked at 12 studies involving 781 children.

Researchers announce prenatal blood test for Down's syndrome:

Researchers at Stanford University, California, have developed a blood test that detects Down's syndrome during pregnancy that they think may be available in 2-3 years, eliminating the risk associated with more invasive tests. A study of 18 women identified all nine fetuses with Down's syndrome and three others with other chromosomal abnormalities (*PNAS* doi:10.1073/pnas.0808319105).

Blood pressure falls in Japan: From 1986 to 2002 mean systolic blood pressure in Japan fell by 1.8 to 3.0 mm Hg in men, according to age, and 3.7 to 5.1 mm Hg in women, shows research that was based on a nationally representative sample of nearly 200 000 people (*Bulletin of the World Health Organization* doi:10.2471/BLT.07.050195). Some of the fall was due to greater use of antihypertensive drugs, but the authors say much of the decline is unexplained and needs to be investigated.

Commonest medical words in papers are listed:

"Cell" is the medical word used most often in research papers, say researchers who compiled a league table of common medical terms (*English for Specific Purposes* doi:10.1016/j.esp.2008.05.003). The second commonest term was "data," followed by "muscular." Last in the league table of 623 words was "static."

Cite this as: *BMJ* 2008;337:a2016

Expensive placebos work better, crackly

Janice Hopkins Tanne

CAMBRIDGE, MASSACHUSETTS

After the Ig Nobel prizes were announced last week, there were a few less "unknown unknowns." Donald Rumsfeld, the former US defence secretary who first coined the phrase to describe the things we didn't know that we didn't know, would have been delighted.

The Ig Nobels, spoofs on the Nobel prizes, are awarded for research "that first makes you laugh, then makes you think." Many are handed out by genuine Nobel laureates, at a ceremony at Harvard University organised by the *Annals of Improbable Research*.

The theme of this year's ceremony was "redundancy." It featured redundant opening and closing speeches ("Welcome, welcome" and "Goodbye, goodbye"), two appearances by an imitator of the Republican vice presidential candidate, Sarah Palin, and two demonstrations of sword swallowing by last year's winner (*BMJ* 2007;335:741).

The Oxford scientist Charles Spence won the nutrition prize together with Massimiliano Zampini of the University of Trento, Italy, for a study showing that people believe that crackly crisps are 15% tastier. Professor



Spence, head of Oxford's Cross-Modal Laboratory, told the *BMJ* that in his study people nibbled on crisps while hearing artificially enhanced sound (*Journal of Sensory Studies* 2004;19:347-63).

Louder crisps tasted 15% better, he said. "All the senses contribute to flavour and taste," he said, "but few people think about sound."

The economics prize went to Geoffrey Miller and colleagues from the University of New Mexico, who studied the tips earned by lap dancers in Albuquerque.

Women who had natural menstrual cycles earned more per hour when they were ovulating, while those who took oral contraceptives had stable earnings per hour during their cycles (*Evolution and Human Behavior* 2007;28:375-81). Dr Miller said that previous studies showed that women were more attractive to men and felt themselves to be more attractive during their fertile period.

Dan Ariely of Duke University in Durham, North Carolina, and colleagues won the medicine prize for showing that a high priced placebo gives better pain relief than a cheap one. Dr Ariely, who wrote the book *Predictably Irrational*, said that participants in the study were told they were to

Attacks on hospitals by angry relatives are rising in Nepal

Khagendra Dahal NEPAL

Nepal has seen a spate of attacks in recent months on doctors and hospitals by relatives of patients who have died while undergoing treatment.

In the most recent incident, at the end of August, the relatives of a 22 year old woman who died after a caesarean section in a community hospital in the town of Dhulikhel, 21 km from Kathmandu, vandalised the hospital and assaulted healthcare professionals, including doctors on duty.

The woman was admitted to the hospital during prolonged labour and developed complications after the operation, which led to her death the next day in the hospital. The woman's husband alleged that the doctors were negligent and demanded compensa-

tion and action against them. Relatives burnt tyres in the centre of Dhulikhel as a protest against the hospital and smashed windows and furniture in the hospital.

The hospital denies the family's allegations. Rajendra Koju, the hospital's administrative director, said at a press briefing later that evening, "The patient didn't die from negligence. She was treated according to standard medical care. She died as a result of the complicated nature of the surgery."

A month before the incident in Dhulikhel, Bir Hospital, in the centre of Kathmandu, was attacked after a child who underwent hip surgery died from kidney failure. Relatives of the boy stormed the hospital.

The latest incident is the 10th such reported case of attacks on hospitals this year alone. Usually hospitals respond by closing medical services, sometimes for indefinite periods. The Nepal Medical Association has often called for doctors to strike in the face of these attacks.

Cite this as: *BMJ* 2008;337:a1946

crisps taste fresher, and ovulating lap dancers earn more

receive a new pain drug. They were subjected to electric shocks then given placebos described as an expensive US, a cheap US, an expensive Chinese, or a cheap Chinese drug. They rated the expensive US placebo as the most effective (*JAMA* 2008;299:1016-7).

Researchers from the Ecole Nationale Veterinaire de Toulouse in France won the biology prize for showing that dog fleas can jump higher than cat fleas (*Veterinary Parasitology* 2000;92:239-41).

The peace prize was presented to the Swiss Federal Ethics Committee on Non-Human Biotechnology and the citizens of Switzerland for adopting the legal principle that plants have dignity (www.ekah.admin.ch/en/topics/dignity-of-creation/index.html). Urs Thurnherr, a committee member and a philosopher at the University of Education, Karlsruhe, Germany, was asked about the ruling's effect on vegetarians. He said that if they did not eat arbitrarily but with consciousness there would be no problem.

The chemistry prize was jointly awarded to two groups of researchers, from the United States and Taiwan, for demonstrating respectively that Coca-Cola is and is not an effective spermicide. Deborah Anderson of Boston University School of Medicine found that Coca-Cola at a 5:1

concentration with sperm is spermicidal in the laboratory (*New England Journal of Medicine* 1985;313:1351). Researchers at Taipei Medical University found that neither Coca-Cola nor Pepsi was spermicidal when they added tiny amounts of it to semen (*Human Toxicology* 1987;6:395-6).

Dr Anderson said, "Coca-Cola was really pissed with us when we published the study. They issued a statement that Coca-Cola was not to be used for medicinal purposes." Coca-Cola had no comment on the award.

David Sims of the Cass Business School in London won the literature prize for his article "You bastard: a narrative exploration of the experience of indignation within organizations" (*Organization Studies* 2005;26:1625-40).

Professor Sims told the *BMJ* that people see their lives as stories. They expect people in the stories to be consistent. However, sometimes they encounter slippery, unpredictable individuals. Citing as typical the experience of doctors at a large London hospital with a management consultant who spoke continually in jargon, he said that people become indignant and label such a person as a bastard. He declined to name the hospital.

Dorian Raymer, of the Scripps Institution of Oceanography, San Diego, and Douglas Smith, of the University of California, San



Scientists discovered that lap dancers earn more in tips when they are ovulating

Diego, won the physics prize for proving that most string-like items such as iPod cords and hair will inevitably tangle themselves into knots when agitated.

Further information on the Ig Nobel prizes is at www.improbable.com.

Cite this as: *BMJ* 2008;337:a1992

Campaigners demand equal deal for all thalidomide victims



Thalidomide victims and campaigners demonstrate outside the German Embassy in London

Miguel Jara MADRID

Campaigners demonstrated in London last week demanding equal treatment for all European victims of the drug thalidomide. The drug, prescribed to pregnant women between 1957 and 1961 for morning sickness, resulted in severe malformations in their children.

Victims of the drug in Spain, Italy, and Austria have not yet been given any formal recognition or compensation by their governments and do not get financial help from the distributors or makers of the drug.

By contrast, in the United Kingdom 450 people receive £3200 (€4100; \$5600) a month from Distillers, the company that sold the drug after buying the patent from the German drug company Grünenthal.

Rafael Basterrechea, of the Spanish delegation, said: "We want all the victims to receive the same compensation . . . and these settlements have to be paid by the maker, Grünenthal."

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