

the *American Journal of Respiratory and Critical Care Medicine*, directly contradicted them.

The ad hoc committee, which included Dr Richard Smith, editor of the *BMJ*, concluded that Professor Decramer had wrongly accused the author of producing contradictory results and duplicate publication. And they judged that sanctions had been imposed without due process.

Caroline White *London*

Ontario's family doctors may opt for a capitation payment system

Family doctors in Canada's most populous and richest province, Ontario, have been offered a new way of being paid for medical services.

The family health network plan, under which doctors work in teams with other health professionals and are paid through either a capitation or a revised fee for service, was worked out by the provincial government in its attempt to reform primary health care.

The offer comes at a time when Canada's national health-care system is being widely debated. So far 170 of the province's 7000 family doctors are enrolled in the project.

Primary care networks consist of five or more doctors and allied health professionals such as nurse practitioners, chiropractors, and nutritionists, who work together to provide 24 hour continuous care to enrolled patients.

David Spurgeon *Quebec*

Details of the new system are available at www.ontariofamilyhealthnetwork.gov.on.ca

France's birth rate matches high Irish levels

France is experiencing a minor baby boom for the second consecutive year, with 774 800 births recorded last year, the same number as in 2000, a new report from France's National Institute of Sta-

tistics and Economic Studies (INSEE) has shown.

The birth rate in France has also increased—from 1.88 children per woman of childbearing age in year 2000 to 1.89 last year.

"Such a birth rate for two consecutive years has not been observed for 20 years," wrote Lionel Doisneau, the author of the study, which was released last week in Paris. (www.insee.fr)

France's birth rate is now the same as the rate in the Republic of Ireland, which for several years has had the highest birth rate in the European Union.

Birth rates in other EU countries have on average decreased by 0.1%, falling to the lowest level ever in some countries where rates have been high in the past—for example, to 1.22 in Spain and 1.25 in Italy.

Alexander Dorozynski *Paris*

India plans new legislation to prevent sex selection

The Indian health ministry has drafted legislation to regulate reproduction technologies in a fresh attempt to curb the widespread preference for male children in India.

The legislation will ban the use of preimplantation genetic diagnosis and other reproductive technologies for sex selection through amendments to an existing law that prohibits fetal sex determination. The amended legislation will allow genetic diagnosis for detecting medical conditions, however.

India outlawed fetal sex determination for sex selection eight years ago, but prenatal sex determination through ultrasonography continues. The practice, stemming from traditional prejudices against girls in Indian society, leads to the selective abortion of female fetuses and has contributed to India's declining sex ratio.

India's census last year had shown that the number of girls per 1000 boys under 6 years of age had declined substantially in several states—the national average dropped from 945 in 1991 to 927 in 2001.

Ganapati Mudur *New Delhi*

Netherlands considers prescribing heroin to addicts

Tony Sheldon *Utrecht*

The combined prescribing of heroin and methadone on medical grounds to long term users of heroin is safe and manageable and has health benefits over ordinary methadone programmes, two large randomised controlled trials in the Netherlands have concluded.

Prescribing heroin to up to 2000 addicts for whom no other medical treatment has proved effective now looks likely.

The trials were carried out on 549 patients in six cities between 1998 and 2001 by the Central Committee on the Treatment of Heroin Addicts. The committee was set up by the Dutch health minister in 1996 to look at the intended and unintended effects of medical prescription of heroin to "chronic, therapy resistant addicts" (*BMJ* 1995;310:1625).

Patients in one group were prescribed heroin and methadone for six or 12 months, while a control group received only methadone. The effect of discontinuing heroin treatment was also investigated.

Patients who were prescribed heroin and methadone experienced 23-25% more "clinically relevant improvements" in their physical, mental, or social condition than patients taking methadone alone. The improvements included better social contacts, less criminality, and less use of cocaine—90% of all the patients had previously been heavy users of cocaine.

The follow up study showed that within two months of stopping the treatment more than 80% of the patients lost all health gains.

The studies also conclude that prescribing heroin can be safe. Three patients died during the studies, which involved the dispensing of heroin 140 000 times. This is less than half the death rate in methadone programmes.

The committee now recommends that combined heroin and methadone treatment, under strict conditions and as a last medical option, should be introduced as part of Dutch addiction care and that the registration of heroin as a medicine should be promoted and a "quality system" developed for prescribing the drug.

Health minister Els Borst will put the recommendations to parliament, where MPs are expected to support them. She is keen to base policy on evidence, not ideology, and praised the research for its "unique" scientific framework.

The average patient in the studies was 39 years old with a 16 year addiction. The heroin was dispensed at a clinic three times a day for smoking or injecting under medical supervision, enabling close contact between patients and medical staff.

Of an estimated 25 000 people in the Netherlands with a heroin addiction, 13 000 are treated on methadone programmes—but for 8000 of these methadone treatment is deemed ineffective, because of criminality and use of other drugs. □

The results of the trial can be accessed on the committee's website at www.cbbh.nl



Dutch addicts may soon get heroin prescribed