

In brief

Teenager dies after mismatched transplant: A 17 year old teenager with constrictive cardiomyopathy has died after receiving a heart and lung transplant which was not correctly matched for blood or tissue at Duke University in the US state of North Carolina. Jessica Santillan started rejecting the new organs immediately; properly matched organs were transplanted two days later. None the less, end organ damage ensued and Ms Santillan died.

Public retains trust in doctors: Doctors have again come top in MORI's annual poll of the most trusted professionals or occupational groups. Public approval for the way doctors do their jobs remains high at 90%. Ninety one per cent of the public said they trusted doctors to tell the truth, compared with 87% for teachers, 74% for professors, and 72% for judges.

Acute respiratory syndrome in China: The Ministry of Health in China has reported that the causal agent for the atypical pneumonia outbreak in Guangdong province, which affected more than 305 people and caused at least five deaths, was probably *Chlamydia pneumoniae* (22 February, p 416).

Two cases of "bird flu" confirmed in Hong Kong: The World Health Organization last week confirmed the presence of an avian influenza virus in a 9 year old child in Hong Kong and in his 33 year old father. Tests of two samples from the child have identified the virus as the strain of influenza A(H5N1), sometimes known as "bird flu."

Peter Homa is named as first head of CHAI: Peter Homa, who is currently the chief executive of the Commission for Health Improvement (CHI), is to be first chief executive of the Commission for Health Care Audit and Inspection (CHAI). CHAI, which comes into being in April 2004, brings together the work of CHI, the National Care Standards Commission, and much of the health sector work of the Audit Commission. Professor Ian Kennedy is its chairman designate.

Combined aspirin and clopidogrel treatment improves outcomes, study finds

David Spurgeon *Quebec*

The blood thinner clopidogrel, when used with aspirin, reduces the short term and long term risk of heart attack, stroke, and death among more than 12 000 emergency department patients in 28 countries, a study shows.

The study by Dr Salim Yusuf and colleagues, in the rapid track section of the online version of *Circulation*, says that the drug showed beneficial effects within 24 hours of start of treatment and that the benefit continued for 12 months (<http://www.circ.aha.journals.org>).

The report concludes: "Other than aspirin, clopidogrel is the only antithrombotic agent that has been demonstrated to be of benefit both in the early phase and during long-term treatment in ACS [acute coronary syndromes]."

"Other oral antithrombotic therapies have been found to be harmful (eg, oral glycoprotein IIb/IIIa inhibitors), ineffective, or poorly tolerated (eg, oral anticoagulants)," it says. "Therefore, both aspirin and clopidogrel should be initiated early (along with thrombin inhibitors and glycoprotein IIb/IIIa inhibitors in those undergoing interventions) and continued for the long term (with statins, ACE inhibitors, and, where appropriate, beta-blockers). The combined use of these treatments will lead to the greatest benefits in the largest number of patients."

The trial compared clopidogrel with placebo in 12 562 patients. Patients had an average age of 64 years, and 38% were women. All patients were treated

with aspirin. Patients who were also treated with clopidogrel were given an immediate dose of 300 mg, then 75 mg each day for up to a year.

In the first 30 days 343 patients (5.4%) in the placebo group died from a cardiovascular cause or had a myocardial infarction or stroke, compared with 270 (4.3%) in the clopidogrel group (relative risk 0.79 (95% confidence interval 0.67 to 0.92)). Between 31 days and 12 months the corresponding percentages were 6.3% in the placebo group and 5.2% in the clopidogrel group (0.82 (0.70 to 0.95)).

On the basis of the study's criteria, 1.18% of placebo patients and 1.75% of clopidogrel patients had a major bleed (relative risk 1.48, 1.1 to 1.99; absolute excess 0.57% over a mean of eight months).

Dr Shamir Mehta, assistant professor of medicine at McMaster University in Hamilton, Ontario, and a coauthor of the study, said: "It is important to note the apparent universality of these results." □

Ephedra supplement may have contributed to sportsman's death

Fred Charatan *Florida*

A baseball player known to have been taking ephedra, a controversial dietary supplement associated with a higher risk of adverse reactions than other herbal preparations, has died in Florida after a training workout.

Baltimore Orioles pitcher Steve Bechler, 23, died of heatstroke last week after his body temperature rose to 42°C. The Broward County medical examiner, Dr Joshua Perper, concluded that he died of complications of heatstroke, which resulted in multiorgan failure.

Dr Perper said that he was told that Bechler was taking three Xenadrine RFA-1 capsules, an over the counter dietary supplement, every morning for weight reduction. Each capsule contained 20 mg of ephedrine.

It will not be known how



Steve Bechler is driven off the field suffering from heat exhaustion

much of the supplement may have contributed to Bechler's death until toxicology reports are completed in two to three weeks.

Last year Dr Sidney Wolfe of Public Citizen, a consumer watchdog group, urged the Food and Drug Administration to ban dietary supplements containing ephedrine alkaloids (*BMJ* 2002; 325:924).

Last month a study published in the online version of *Annals of Internal Medicine* found that products containing ephedra accounted for 64% of all adverse reactions to herbs notified to US poison control centres in 2001, even though they accounted for only 1% of the market (www.acponline.org/journals/annals/ephedra.htm). □