

Transparency is key to rationing debate, delegates told

"Rationing should be made explicit, and arguments for any scheme made public," Professor Joe Collier of St George's Hospital and Medical School, London, told an audience at a conference on rationing and the NHS held this week by the *Drugs and Therapeutics Bulletin*.

"The notion of keeping this from society is no longer tenable," added Professor Collier, who is editor of the bulletin. He called for rationing to become more explicit and for policy decisions at any level of care to be rooted in a sound scientific and ideological basis. "Details should be defensible in courts and understandable by prescribers and, through them, by patients... These ideals are clearly not being met at the present time," he said.

Professor Ian Rees Jones from St George's Hospital and Medical School, London, told delegates that the role of GPs in the rationing debate needed to be addressed. "Too much of the rationing debate focuses on secondary care," he added. "There are rationing issues with primary care."

Sally Hargreaves *London*

US Senate outlaws "partial birth abortion"

The Republican controlled US Senate passed legislation last week outlawing "partial birth abortion," a technique used in an estimated 0.6% of abortions. Similar legislation will almost certainly be passed by the House of Representatives, also in the control of the Republicans, and soon signed into law by President Bush.

Partial birth abortion is what the American College of Obstetricians and Gynecologists calls a non-medical term for "intact dilatation and extraction," a rarely used technique for late abortions. The fetus is partially delivered feet first, up to the neck. Then the base of the skull

is punctured and the intracranial contents removed so that the head collapses, enabling the rest of the fetus to be delivered.

The technique is sometimes used when the fetus is severely deformed or the woman's health is at serious risk. Organisations and doctors supporting a woman's right to a legal abortion said the new law could be used to outlaw many surgical procedures for abortion.

Doctors who perform the procedure might be subject to fines or imprisonment for up to two years.

Janice Hopkins Tanne *New York*

Ambulance services to have access to telephone and email records

The Home Office has released for public consultation its new proposals on access to telephone and communications data, a watered down successor to the plan denounced last summer as a "snooper's charter."

Under the initial proposals, all local councils, seven Whitehall departments, and 11 other organisations would have had complete access to telephone and email records under the Regulation of Investigatory Powers Act (RIPA) 2000. Such powers of access have previously been the exclusive domain of the police, Customs, Inland Revenue, and security services.

The new consultation paper would grant such access to just five additional agencies: the UK Atomic Energy Authority Constabulary, the Scottish Drug Enforcement Agency, the Maritime and Coastguard Agency, the fire authorities, and the ambulance services of NHS trusts. The fire and ambulance services would use the data to investigate and prosecute hoax calls.

Owen Dyer *London*

Access to Communications Data—Respecting Privacy and Protecting the Public From Crime is available at www.homeoffice.gov.uk/ripa/part1/consult.pdf

UK nuclear medicine is close to collapse, experts warn

Zosia Kmietowicz *London*

Many cancer patients in the United Kingdom are getting a substandard service because of a shortage of modern scanners and appropriately trained doctors, say specialists.

Nuclear medicine services are close to collapse, they warn. Unless more doctors train in the specialty, they say, already fragmented services for mainly cancer and cardiac patients will get worse.

With just four full positron emission tomography (PET) scanning facilities, the United Kingdom lags behind the United States and most of Europe in its provision of nuclear medicine, says the Intercollegiate Standing Committee on Nuclear Medicine.

The scanners, which are used to help diagnose and stage many common cancers, including lung and colorectal cancer, and to monitor patients for recurrences after treatment, are all in London. Although patients from all over the country travel to London to be scanned, many more patients miss out because of the restricted service and risk late diagnosis and inappropriate treatment because of incorrect staging of disease with less accurate imaging techniques, says the committee.

In one of two reports issued this week the committee has called for 11 more PET sites to be introduced in the United Kingdom over the next five years and a further 30 to 45 sites in the next decade.

Dr Mike O'Doherty, chairman of the working party that produced the reports, said: "PET

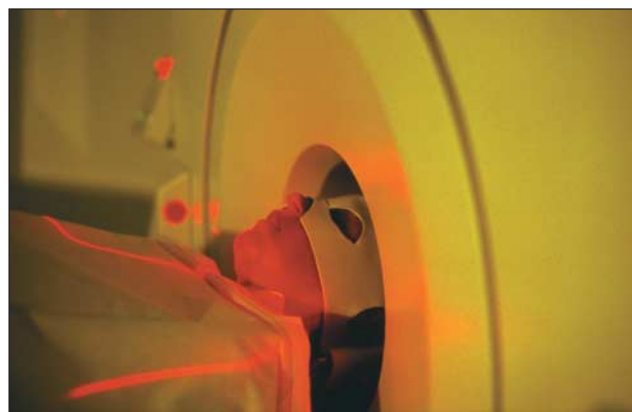
is an invaluable technique to enable the management of patients with a variety of cancers [and] ischaemic cardiac disease and at present has a limited role in patients with neurological disorders. A large number of patients with lung cancer, colorectal cancer, and lymphoma would benefit from this technique. It needs to be introduced in a planned way throughout the UK such that all patients who may benefit from PET have access in their own areas of the country."

Any plans to improve scanning services in the United Kingdom will fail unless a staffing crisis in nuclear medicine is tackled urgently, says the committee.

There are currently just 54 whole time equivalent consultants in nuclear medicine. But between 250 and 300 are needed to cope with existing workloads. With an estimated 100 to 120 consultants due to retire in the next few years, many of whom help run nuclear imaging services, the problem will get worse unless action is taken, says the committee.

In its second report the committee suggests raising the profile of nuclear medicine and to attract more doctors—making it part of the senior house officer job rotations. □

Nuclear Medicine and Radionuclide Imaging and Positron Electron Tomography are available from the Royal College of Physicians' publications department (prices £7 and £15, respectively, or £20 for both), tel 020 7935 1174 ext 358.



A patient undergoes a positron emission tomography (PET) brain scan. The United Kingdom has only four full PET scanning facilities