

## In brief

**New South Wales to test medical use of cannabis:** Australia's first trial of cannabis for medical use has been announced in New South Wales. The four year trial will involve people with cancer, AIDS, severe and chronic pain, spinal cord injuries, and multiple sclerosis. Forms of delivery will include tablets and an inhaler being developed in the United Kingdom.

**Soldiers develop "Gulf war syndrome" symptoms:** Four British soldiers who received vaccinations before the invasion of Iraq have fallen ill with symptoms typically associated with Gulf war syndrome. The National Gulf Veterans and Families Association accuses the minister of defence, Geoff Hoon, of breaching his promise that vaccinations would be spread over time. One of the soldiers said he had had five injections in a single day.

**Surgeon wins support of House of Lords:** A senior surgeon who was sacked six years ago after he was accused of lying to a patient about an operation won his case in Britain's highest court, the House of Lords, last week. Five law lords upheld an appeal court ruling that Dartford and Gravesham NHS Trust should have used the more elaborate disciplinary procedure for professional misconduct rather than dismissing David Skidmore for personal misconduct.

**Australia attempts to tackle indemnity crisis:** Australia's federal government has unveiled its third rescue package to address the country's medical indemnity crisis. Doctors will be protected from large medical liability payouts and will be given low cost retirement cover under new concessions.

**Case of BSE found in Canada:** The United States, Australia, Hong Kong, Japan, Mexico, and the Philippines have banned imports of Canadian meat after a single case of bovine spongiform encephalopathy was found in an 8 year old Angus cow in Alberta. It is unclear how the cow contracted the disease and whether the disease is more widespread. It is the first case of the disease in North America in 10 years.

## Toronto succumbs to SARS a second time

David Spurgeon *Quebec*

Toronto is back on the World Health Organization's list of areas with local transmission of SARS after Canada's federal health department reported new clusters of 26 suspected and eight probable cases of the disease linked to four Toronto hospitals.

But WHO is not recommending any restrictions on travel to the city, because the new cases can all be traced back to the original outbreak and are not linked to travel.

WHO spokesman Dick Thompson said it was extremely unlikely that WHO would be issuing a new warning against non-essential travel, because of the city's experience in dealing with and controlling outbreaks.

On 30 April WHO removed its warning on travel to Toronto, and on 14 May the city was removed from the agency's SARS list.

The health department said that as of 26 May 351 probable or suspected cases of SARS had been reported in Canada, with 27 deaths. By that date transmission was limited to specific locations such as particular households, hospitals, and community settings. A total of 111 people with probable SARS and 161 people with suspected SARS had been discharged or were at home.

To be considered for a WHO travel advisory an area must have more than 60 cases of SARS, report more than five new cases daily for an extended period, and show evidence of transmission beyond healthcare workers and their close contacts. Toronto does not meet those criteria today, said Mr Thompson.

The new outbreak spread from the SARS ward on the eighth floor of North York General Hospital, where a 96 year old man undergoing surgery for

a fractured pelvis on 19 April is believed to have contracted the disease. The man developed pneumonia-like symptoms after his surgery but was not suspected of having SARS because pneumonia is relatively common among elderly patients. He died on 1 May.

Investigators now believe that the man may have been infected by someone else in the ward who also went unrecognised as having SARS. Several members of his family have shown pneumonia-like symptoms and are part of the new SARS cluster.

A woman from the hospital's orthopaedic ward who was transferred to St John's Rehabilitation Hospital on 28 April was later recognised as having a mild case of SARS, and five other SARS cases then appeared at St John's Hospital. The woman has recovered, but three of the other patients are in critical condition, and a 90 year old woman has died. □

For the latest details of the SARS outbreak see News Extra at [bmj.com](http://bmj.com)

## WHO to push for swift implementation of tobacco accord

Fiona Fleck *Geneva*

After four years of talk the World Health Organization has adopted a landmark accord to curb deaths and disease from tobacco use but faces an uphill task in ensuring that, to be effective, it is ratified by the 40 signatory states.



Dr Jong Wook Lee, incoming director, WHO (see News Extra)

The framework convention on tobacco control envisages larger health warnings on cigarette packs, tougher laws on tobacco smuggling, new controls on passive smoking, and restrictions on tobacco advertising, promotion, and sponsorship.

The accord was adopted at the annual World Health Assembly of 192 nations in Geneva on 21 May, after the United States and Germany dropped their objections to the final text in a last minute turnabout (24 May, p 1103). WHO officials said it would take 6 to 12 months for the 40 countries to ratify the accord.

About 20 states, including Fiji and Tonga, said they already had the necessary support from their cabinets or heads of state and would ratify it fast. The European Union and Japan said they would ratify the agreement as soon as possible but are not expected to act quickly because of their complex political systems.

Some EU states, such as the United Kingdom, have already implemented parts of the accord in their national legislation—but other aspects of the accord, such as a ban on cross border advertising, cross border sharing of information on tobacco smuggling, are new.

Tommy Thompson, the US health secretary, said that although he supported the convention, Washington was reviewing the text, hinting that it would not be ratified soon.

WHO director general Gro Harlem Brundtland, who has made the anti-tobacco campaign a top priority during her five year tenure, hailed the adoption of the convention as a "historic moment in global public health" and said the agreement would save "billions of lives and protect people's health for generations to come."

Dr Jong Wook Lee of South Korea, who takes over from Dr Brundtland on 21 July, pledged to continue her work. "This is not the end but just the beginning," said Dr Lee, adding, "I think I will spend substantial time and effort to make it work." □