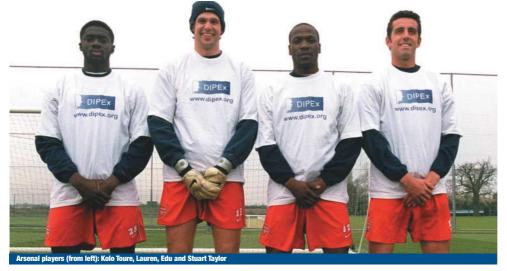
NEWS

## Arsenal helps publicise testicular cancer website



#### Susan Mayor London

The London football team Arsenal is supporting the launch of a new internet information resource on testicular cancer that is based on men's experiences of the cancer.

The resource is one of several on the website of DIPEx (www.dipex.org), which uses interviews with people with various diseases to develop health information and to provide answers to important questions. Arsenal players are helping to promote the DIPEx testicular cancer site in a poster and video that will be seen during men's health week this week in the United Kingdom.

If you click on a topic on the DIPEx website you won't get a fact sheet on a disease. Instead you get the choice of seeing videos or listening to or reading interviews with between 30 and 50 people with that disease. These people come from around the country and are of different ages and ethnic backgrounds, and they have different severities of the disease, so anyone looking at the site is likely to find at least one person they can relate to.

For each condition on the website the people who were interviewed were asked to tell the story of their illness from their own perspective. Researchers in the Department of Primary Care at the University of Oxford, which runs the DIPEx site as a registered charity, then sort out the key themes.

The project provides valid research information about people's experiences of illness. Researchers used a method called "purposive sampling," which means that they keep interviewing people with the condition until no more new issues arise. They are then fairly sure that most—if not all—issues have been raised.

### N BRIEF

□ HFEA grants Roslin Institute licence for human embryo research: The Human Fertilisation and Embryology Authority (HFEA) has granted a licence to the Roslin Institute, Edinburgh, so that it can improve the technology to produce and maintain human embryonic stem cells in culture. The Roslin Institute was the research organisation that first cloned an animal, Dolly the sheep.

#### Surgeon charged with man-

slaughter: A consultant surgeon who successfully appealed to the Privy Council (*BMJ* 2003;326:415) against being struck off after five of his patients died during botched operations (*BMJ* 2001;323:652) has been charged with manslaughter. Steven Walker faces charges relating to three of the operations, which were performed at the Victoria Hospital, Blackpool.

☐ Morning after pill can be taken up to five days after sex: The morning after pill can prevent pregnancy up to five days after unprotected sex, not just three days, as previously believed, according to research published in *Obstetrics and Gynecology* (2003;101:1168). The study found that the failure rate of the pill between 72 and 120 hours after sex, at about 2%, was the same as in women who took the pill within 72 hours.

□ Slovakians must pay to see a doctor: Patients' groups in Slovakia have protested at new health service charges. From this month patients must pay 20 koruna (£0.35; \$0.57; €0.48) to visit a doctor, 50 koruna a day to stay in hospital, and 12.5 koruna per mile in an ambulance, as the government aims to cut the huge health deficit.

Wales appoints "children's tsar": The Welsh Assembly has appointed consultant paediatrician Dr Huw Jenkins as director for healthcare services for children and young people in Wales.

# Paroxetine must not be given to patients under 18

#### Fabian Waechter BMJ

The Medicines and Healthcare Products Regulatory Agency (MHRA) has advised that the antidepressant paroxetine (marketed as Seroxat) should not be prescribed for children or adolescents. It did so on the recommendation of an independent expert working group, commissioned by the Committee on Safety of Medicines (CSM).

Paroxetine, which is made by GlaxoSmithKline, has never been licensed for children, but about 8000 patients under 18 were taking paroxetine in the United Kingdom last year because it is legal to prescribe it if the doctor responsible deems it appropriate.

The new advice is based on studies showing that there are higher rates of suicidal thoughts and behaviour in the patients who took paroxetine (25 out of 738; 3.4%), compared with those who took placebo (8 out of 647; 1.2%). There was no case of an actual suicide in all the patients in these studies.

The MHRA emphasised that it was important that patients did not stop taking paroxetine abruptly. Instead, patients should seek their doctor's advice on how to taper off the drug. For some young patients who were already taking the drug "it might be favourable to continue with the drug, if they do not suffer from suicidal thoughts or behaviour," said Dr Jonathan Chick, a psychiatrist on the CSM's expert working group on the issue.

A spokesman for the agency said that it was known that nine studies into the drug had been conducted, but the results of only one was "in the public domain." Professor Alasdair

Breckenridge, the agency's chairman, said: "The Committee on Safety of Medicines will immediately investigate the relevance of these findings for the usage of paroxetine in adults." He stated that "at the moment patients on paroxetine who do not show suicidal behaviour should continue taking it."

Dr Alastair Benbow, head of European psychiatry for GlaxoSmithKline, issued the following statement: "While we believe that today's move will inevitably limit the choices available to doctors treating children and teenagers under 18 years with major depressive disorder, and the conclusions we draw from the data differ, we recognise the MHRA's decision for UK paediatric patients and we will work with them to implement the changes as soon as possible."