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Metapneumovirus is a leading cause of respiratory tract infection in infants

In a substantial proportion of lower respiratory tract infections in children where no virus can be cultured, human metapneumovirus infection is a leading cause of the infection in the first years of life. The resulting spectrum of disease is similar to that seen with respiratory syncytial virus.

In 2001, researchers in the Netherlands first isolated the new virus from children and adults with acute respiratory tract infection. This RNA virus is closely related to avian pneumovirus. In a new study, researchers sought to define more clearly the aetiological role of this virus in lower respiratory tract infections in previously healthy young children (*New England Journal of Medicine* 2004;350:443-50).

Researchers led by Dr John V Williams of Vanderbilt University Medical Center in Nashville, Tennessee, tested nasal wash specimens for human metapneumovirus. Specimens had been obtained over a 25 year period from otherwise healthy children presenting with acute respiratory tract illness.

The researchers examined results from 2009 infants and children prospectively seen in primary care from 1976 to 2001. No cause was identified in 321 children who made 408 visits for lower respiratory tract illness. Of these children, specimens from 248 were available. Forty nine specimens (20%) contained human metapneumovirus RNA or viable virus. Thus, a fifth of all lower respiratory tract illnesses previously negative for virus were attributable to human metapneumovirus.

Scott Gottlieb *New York*

Doctors suspended for removing wrong kidney

Two doctors who mistakenly removed a patient's only working kidney have been suspended



BMJ ethics committee appoints new chairperson

The *BMJ* ethics committee has appointed Dr Iona Heath (pictured right) as its new chairwoman after the resignation of its former chairman, Dr Alexander McCall Smith.

Dr Heath, who is a general practitioner in Kentish Town, north London, has been chairwoman of the ethics committee of the Royal College of General Practitioners since 1998 and was previously vice chairwoman of the college.

Dr McCall Smith, who is professor of medical law at the University of Edinburgh, resigned as chair of the committee after the huge success of his detective novels set in Botswana, which began with *The No 1 Ladies' Detective Agency*. He is the author of more than 50 books, which include academic titles and children's books as well as his best selling series set in Africa. He used to be deputy chairman of the Human Genetics Commission.

The committee, which was set up in 2000, has the role of clarifying, reviewing, and developing editorial policies on issues such as consent to publication of material arising from the doctor-patient relationship, competing interests for authors, and prior disclosure of results to research participants. It is also there to help to formulate new editorial policies.

Annabel Ferriman *BMJ*

for 12 months by the General Medical Council.

Mr John Gethin Roberts, a consultant urologist, and registrar Mr Mahesh Goel faced the GMC's professional conduct committee 18 months after being acquitted of manslaughter in the death of 70 year old patient Graham Reeves.

Mr Reeves underwent what should have been a right nephrectomy at the Prince Philip Hospital in Llanelli, South Wales, in January 2000. But under Mr Roberts's supervision, Mr Goel removed the patient's left kidney in error.

Mr Roberts attended the GMC hearings and admitted most of the charges. He has been suspended on full pay by Camarthenshire NHS Trust since 2000. Mr Goel was unre-

resented and is believed to be in India.

The professional conduct committee heard that Mr Goel made an incorrect entry into the urology department's diary, using the information on a wrongly completed admission slip. The error was compounded in the operating theatre when Mr Roberts placed the x ray back to front and positioned Mr Reeves for a left nephrectomy.

GMC committee chair Dr Chitra Bharucha said the doctors had committed serious professional misconduct by failing to consult each other or the x ray adequately. In view of their previously unblemished records, she said, striking off would be disproportionate.

Owen Dyer *London*

Kidney trade arrest exposes loopholes in India's transplant laws

Police have arrested a senior surgeon in Mumbai [Bombay] for his alleged role in facilitating trade in human kidneys.

The arrest has exposed a loophole in India's decade old organ transplantation act. Doctors say that the act is not strict enough to stop unrelated living donors pretending that they are a friend or relative of the recipient and are giving a kidney for emotional rather than financial reasons.

Detectives arrested Dr Suresh Trivedi, a nephrologist at the Bombay Hospital and Medical Research Centre, last week after claiming to have established links between him and agents who recruited kidney donors for his patients.

Police said that Trivedi would pass requests for kidneys to agents who would find poor donors and fabricate documents to show that the donors were distant relatives or close friends of the patients. Each donor would receive 30 000-50 000 rupees (£360-£610, \$660-\$1100; €530-€890), but a recipient would be charged up to 200 000 rupees for a kidney.

Ganapati Mudur *New Delhi*

Payments announced for patients infected with hepatitis C

British patients infected with hepatitis C through blood, blood products, or organ transplants during NHS treatment are to receive payments of up to £45 000 (\$81 600; €65 500) under a government compensation scheme unveiled last week.

The ex gratia scheme will include patients who have cleared the virus through antiviral treatment (but not those who have cleared it spontaneously), those who caught the virus from someone else who was infected by NHS treatment, and those who are also infected with HIV.

Clare Dyer *legal correspondent, BMJ*