

## Experts question wisdom of stockpiling oseltamivir

Andrew Cole *London*

Stockpiling supplies of the antiviral drug oseltamivir (Tamiflu) for use in the event of a flu epidemic was questioned by experts on both sides of the Atlantic this week.

The UK government's decision to order 14.6 million doses of oseltamivir was questioned by Joe Collier, professor of medicines policy at St George's Hospital Medical School, London, and former editor of the *Drug and Therapeutics Bulletin*.

"I would like to know what evidence there is that Tamiflu actually alters mortality," he said. "And if it doesn't then what are we doing? What it certainly does is shorten the illness by a day, but the question is—does that matter?"

On the other side of the Atlantic Canada's federal health minister, Ujjal Dosanjh, told listeners to an interview on a Canadian Broadcasting Corporation radio programme ("The Current," 27 Oct) that oseltamivir did not prevent infection with the flu virus and that at best it would reduce the severity of the illness (*BMJ* 2003;326:1235).

The demand for oseltamivir has risen dramatically in recent months amid fears of the spread of avian flu, which has led to more than 60 deaths in east Asia

and the culling of 150 million birds. The drug's manufacturer, Roche, recently suspended supplies to pharmacies in Canada and the United States to protect stocks for use when the flu season begins.

In the United Kingdom the drug is increasingly advertised online, and pharmacies have reported a big increase in inquiries from the public. Although GPs are currently able to prescribe it on the NHS only if someone has both flu and a chronic condition, any patient who gets a private prescription for the drug can obtain it from a pharmacist for £25 for a pack of 10 pills.

The UK health department

says that oseltamivir will be the "first line of defence" for the treatment of flu if there is a pandemic. Apart from ordering 14.6 million doses of the drug from Roche to be produced by September 2006, it has arranged for larger than normal amounts to be made available this winter to treat people who are at highest risk from current strains of flu.

In response to rising demand Roche has increased production of the drug by nearly 10-fold in the last 2.5 years. It is expected to record sales of \$925m (£522m; €770m), more than three times last year's \$266m.

The spokeswoman also confirmed that the department was at an advanced stage of discussions about licensing other companies to make the drug to increase overall supplies. More than 100 companies had contacted the department in the last fortnight to offer their services, she said.

## Roche Canada stops distributing oseltamivir

David Spurgeon *Quebec*

Canadian federal officials are trying to damp down concern about a possible flu pandemic, after reports of Canadians stockpiling the flu treatment oseltamivir (Tamiflu) prompted Roche Canada to cease distribution of the drug to pharmacies until the flu season begins.

David Butler-Jones, Canada's chief medical officer of health, said that although the government is stockpiling oseltamivir as a precautionary measure he personally had no intention of buying the drug for his home and that healthy Canadians have no need to lay in supplies. He said he expected that the government would also buy zanamivir (Relenza), another antiviral, and amantadine, an older drug that had not been shown to be effective against human cases of avian flu but that might be useful if the virus changed and becomes readily transmissible between humans.

Roche Canada recently sent an "urgent" letter to Canadian pharmacies saying it would "prioritise" distribution of oseltamivir when the flu season began to those patients most at risk of developing serious complications.

Some 4061 prescriptions were written for the drug in September, which compares with 421 in the same month last year. More than 53 000 prescriptions were written for it last February and March. Canadian governments have stockpiled 35 million oseltamivir pills, and some doctors who expect to treat patients with flu have amassed pills.

At a conference in Ottawa on pandemic preparations, Lee Jong-wook, director general of the World Health Organization, said Roche has agreed to share its licence for oseltamivir with other drug companies.

Jack Kay, president of Apotex, Canada's largest manufacturer of generic drugs, said the company has started work on a synthetic copy of oseltamivir (*Globe and Mail*, 26 Oct, sect A: 7).



Sign of the times: A notice outside a clinic in Harley Street, London

## Doctors warn of potentially catastrophic flu pandemic in UK

Lynn Eaton *London*

The effect of a flu pandemic arising from the mutation of avian flu into a human form would be "somewhere between major and catastrophic," Richard Jarvis, a BMA council member, told members of the House of Lords Science and Technology Committee last week.

The committee is looking into how well prepared the United Kingdom is for a possible

outbreak of a pandemic strain of the flu in humans. It held two hearings last week and took evidence from the BMA, the Royal College of General Practitioners, the Royal College of Nursing, NHS Direct, the Health Protection Agency, the World Health Organization, and vaccine manufacturers.

Dr Jarvis, a consultant in health protection, said that despite the measures being taken to prepare for such a pandemic doctors and nurses would struggle to cope with the extra number of patients needing treatment.

And Nigel Mathers, chairman of the Royal College of General Practitioners' Research Group, said that normally GPs would see 30 cases a week of flu in every 100 000 patients. This

rises to 250 per 100 000 patients during a normal flu outbreak. But a pandemic could mean between 5000 and 10 000 cases per 100 000 patients.

"We would not be able to cope with a surge like that," he warned. He said a huge media campaign would be necessary to tell the public how best to treat symptoms themselves, so reducing the number of visits to surgeries.

Professor Mathers also pleaded for more secure funding for the college's influenza surveillance unit, which monitors the UK's flu incidence each week and would be the first warning system of any outbreak. The unit is funded by a contract with the Department of Health, but its current grant runs out in April 2006.