

Prime minister tells troubled trusts to “hold their nerve”

Michael Day *London*

Tony Blair has intervened personally in the financial and political storm over NHS debts and job losses. He summoned the chief executives of 16 of the most debt ridden hospital and primary care trusts to Downing Street to discuss the progress of “turnaround teams,” the financial and management specialists despatched to help the trusts balance their books.

The meeting on Wednesday last week came just hours after the West Hertfordshire Hospitals NHS Trust announced that it would axe up to 500 jobs to tackle its deficit of £28.6m (£41.3m; \$50.3m).

In recent weeks trusts in England and Wales have announced around 7000 job losses as they battle financial difficulties. The

NHS is thought to have reached a record debt of more than £700m in the latest financial year.

At the Downing Street summit three areas were on the agenda: wages bills, particularly those for temporary staff; patients’ length of stay in hospital; and procurement of drugs and equipment. Mr Blair is reported to have told the trust managers that it was important for them to “hold their nerve” in the present round of belt tightening.

And on Tuesday this week he repeated his call for steady nerves in a speech to the New Health Network think tank. Mr Blair said he wanted to create an NHS for “2008, not 1948” and that to achieve this it was necessary to “take the tough decisions which are not the cause of the NHS


problems but the route to making the NHS even better, even fitter for the modern world.”

The health secretary for England, Patricia Hewitt, repeated her assertion that “only a minority” of trusts were in difficulty and that the NHS “would continue hitting targets, treating more patients, and cutting waiting lists.”

However, Andrew Lansley, the Conservative shadow health secretary, said ministers and not NHS chiefs were to blame for the current situation. He said, “It’s the Department of Health that needs a turnaround team. It is perfectly clear that the government has allowed there to be a dramatic increase in the number of administrators in the NHS, without a commensurate

increase in the overall quality of management.”

However, the government had some unlikely—although not entirely welcome—support from the right of centre think tank Reform, which said in a report that the current reforms would eventually lead to 100 000 jobs losses and radically improve the efficiency of the NHS.

The report’s author, Nick Bosanquet, professor of health policy at Imperial College London, said reforms such as foundation hospitals, the payment by results system, and choice for patients would boost productivity. 

Staffing and Human Resources in the NHS: Facing up to the Reform Agenda is at www.reform.co.uk.

Court awards claimant \$13.5m in rofecoxib lawsuit

Janice Hopkins Tanne *New York*

A jury in New Jersey has awarded \$4.5m (£2.6m; €3.7m) in compensatory damages to a 77 year old man who claimed that rofecoxib (Vioxx) had caused his heart attack. The jury decided that Merck, the maker of the cyclo-oxygenase-2 inhibitor, had deceived the US Food and Drug Administration about the safety of the drug and awarded the man an additional \$9m in punitive damages.

Merck said it had given the FDA all the necessary information about rofecoxib and would appeal the ruling.

The jury decided that the heart attack of a second man in the same trial had not been caused by rofecoxib and awarded him only the cost of his drugs: \$45. The judge, the former malpractice lawyer Carol

Higbee, who is overseeing 4500 rofecoxib cases filed in New Jersey against Merck, has grouped several cases together.

Merck faces nearly 10 000 cases in the US relating to rofecoxib. The company has said it would fight each one. Nearly half a million people in the UK have taken rofecoxib, and several hundred are considering suing. Cases will be heard in the US.

This is the second time that a jury has awarded punitive damages in cases concerning rofecoxib. The first was a case in Texas, in which the widow of a man who died after taking rofecoxib was awarded \$253m. That award will be reduced by state law to about \$26m (*BMJ* 2005;331:471). Merck plans to appeal.


In the trial in New Jersey a former FDA official testified that

Merck had disclosed the appropriate material to the administration. Merck’s former chief executive officer, Raymond Gilmartin, testified that Merck had not withheld safety data from the FDA.

Merck had performed a trial in which rofecoxib was compared with the non-selective non-steroidal anti-inflammatory drug naproxen in terms of gastrointestinal effects (*New England Journal of Medicine* 2000;343:1520-8). Rofecoxib was shown to cause fewer gastrointestinal problems, but further analysis showed that patients taking rofecoxib had more heart attacks and strokes than the patients taking naproxen. Merck interpreted this to mean that naproxen was cardioprotective.

Rofecoxib was removed from the market in 2004 after a study showed that it doubled the risk of heart attacks and strokes when taken for more than 18 months (*BMJ* 2004;329:816).

The plaintiff in the New Jersey case, John McDarby, a retired

insurance agent with diabetes and atherosclerosis, had taken rofecoxib for four years to alleviate arthritis in his hands and knee. He had a heart attack in 2004 and fell, breaking his hip. He is now confined to a wheelchair. 



Plaintiff John McDarby is confined to a wheelchair