

one or more of five additional vascular risk factors: a history of stroke or heart attack, angina pectoris, diabetes mellitus, or symptomatic peripheral vascular disease.

They were randomly assigned to either aspirin (75 mg a day) or placebo, and they all also received clopidogrel (75 mg a day); the study treatment lasted for 18 months.

Patients taking aspirin and clopidogrel had a small but non-significant reduction in major vascular events (defined by the study as being a composite of heart attack, ischaemic stroke, death from vascular causes, and readmission to hospital for acute ischaemia, including transient ischaemic attack, angina, and worsening peripheral arterial vascular disease) (relative risk reduction 6.4%, 95% confidence interval -4.6 to 16.3,  $P=0.244$ ; absolute risk reduction 1%, -0.6 to 2.7,  $P=0.244$ ).

But they also had double the absolute risk of intracranial and gastrointestinal bleeding—2.6% *v* 1.3%—compared with those taking clopidogrel alone (absolute risk increase 1.3%, 0.6 to 1.9,  $P<0.0001$ ), thus offsetting any potential benefit of combination treatment.

Debashis Singh *London*

## Fertilisation authority rules in favour of embryo selection for tissue donation

The UK Human Fertilisation and Embryology Authority has given parents new powers to select embryos so that the baby created can become a tissue donor to an ill sibling.

The move relaxes regulations laid down by the authority in 2001 to govern preimplantation genetic diagnosis—rules that were widely criticised as inconsistent.

Before last week's decision tissue typing could be carried out only in cells that had already been taken from embryos for the purpose of testing for inherited diseases.

The process was considered too invasive to be used more widely.

But Suzi Leather, the authority's chairwoman, said the authority was now more convinced of the safety of embryo biopsy and that parents will now be able to apply for permission to test embryos for tissue type alone.

She said, "Our review of the evidence available does not indicate that the procedure disadvantages resulting babies compared to other IVF [in vitro fertilisation] babies. It also shows that the risks associated with sibling to sibling stem cell donation are low and that this treatment can benefit the whole family."

Rebecca Coombes *London*

## Government confirms second case of vCJD transmitted by blood transfusion

A second case in the United Kingdom of variant Creutzfeldt-Jakob disease (vCJD) that may have been transmitted through a blood transfusion has been confirmed by the National CJD Surveillance Unit, the Department of Health has said.

The case involved a patient who had a blood transfusion in 1999 from a donor who later went on to develop vCJD. The patient died of causes unrelated to vCJD, but a post mortem examination showed the presence of disease causing prion proteins in the patient's spleen.

Few details of this second case were available, but a detailed account will be appearing soon in the *Lancet*, the government said. At the same time, ministers said they would tighten restrictions on blood donations in an effort to reduce the risk of transmitting the disease.

Since April this year people who have received a blood transfusion since January 1980 have been excluded from donating blood.

Stephen Pincock *London*

## Rape victims in Sudan face life of stigma, says report

Peter Moszynski *London*

Girls as young as eight are being raped and used as sex slaves in Darfur, says Amnesty International in a report published last week.

At the launch of its report the charity called for medical personnel to be sent immediately to care for survivors, warning, "Rape has a devastating and ongoing impact on the health of women and girls, and survivors now face a lifetime of stigma and marginalisation from their own families and communities."

The rapes are part of what the charity describes in the report as "a pattern of systematic and unlawful attacks on civilians in North, West and South Darfur states, by a government-sponsored militia and by the government army." The attacks are in response to the insurgency of two armed political groups mainly of Fur, Masalit, and Zaghawa ethnicity.

Pro-government Arab militia are accused of ethnic cleansing of the region's black African population. As a result of the conflict, some one million people have fled their homes and 50 000 people have been killed. Many are living in camps in the region's main towns, but there is not enough food, water, or medicine.

The hundreds of recorded rape cases were "just the tip of the iceberg," said Amnesty International researcher Benedicte Goderieux. "Given the cultural taboo associated with rape, women are reluctant to report it to the few medical workers

present in refugee camps, which can lead to further medical complications of injuries sustained during the rape."

The report warns: "Women who have become pregnant as a result of rape often suffer complications before, during and after giving birth, because of the physical injuries resulting from assault. When giving birth, women who have been raped are prone to the problem of fistula and lose control of the bladder or bowel functions. They become isolated as a result of their incontinence."

"Fear of exclusion is frequently the greatest concern," Dr Petra Clarke of the Medical Foundation for the Care of Victims of Torture told the *BMJ*.

She said that although the short term, physical effects of rape normally diminish within 10 days, the long term consequences can be far reaching. As well as the risk of HIV and other sexually transmitted infections, pregnancy, and psychological damage, a real danger was social isolation.

Medical facilities to detect HIV or help affected women and girls are lacking, because agencies are overwhelmed by the nutritional emergency and difficulties in access, logistics, and capacity, she said. "The consequences of this lack of medical support for rape survivors are severe." □

*Darfur: Rape as a Weapon of War—Sexual Violence and its Consequences* is accessible at <http://web.amnesty.org/library>



Refugees from Darfur leave their containers in a queue for water in a camp in Chad 50 km across the border