

bmj.com news roundup

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Germany sets up a system for reporting medical mistakes

Germany has set up a critical incident reporting system on the internet so that GPs and specialists can anonymously report any mistakes that they have made or that they have seen being made by colleagues.

Last week the National Association of Statutory Health Insurance Physicians [Kassenärztliche Bundesvereinigung] announced in Berlin that it would be posting on a website all reported incidents once they had been checked for their veracity and anonymity (www.cirmsmedical.ch/kbv). The system will be run by the anaesthetist Daniel Scheidegger, from Basel, who developed it 12 years ago for use in Switzerland.

"This system is about learning from mistakes rather than blaming them on somebody," said Andreas Köhler, head of the association at a press conference in Berlin. "If mistakes are recognised in time, causes and possible sources of systematic errors can be detected and abolished."

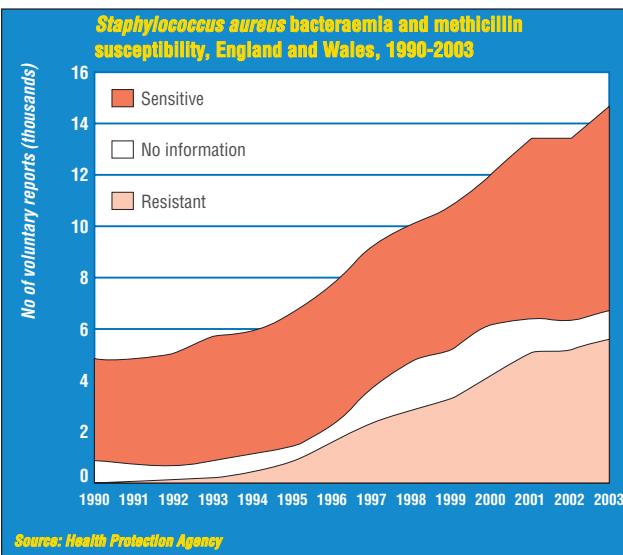
He added that discussions about mistakes had been virtually impossible in the past because doctors were under the constant threat of legal prosecution and insurance companies were reluctant to cover the costs of medical negligence if mistakes were admitted.

Annette Tuffs *Heidelberg*

Dutch doctors should tackle female genital mutilation

School doctors in the Netherlands should examine the genitalia of girls aged 6, 9, and 13 years, as part of regular health checks. This is the proposal of a government advisory body to tackle the illegal practice of female genital mutilation.

In its report, the Council for Public Health and Care also recommends that doctors should



Hand washing is more important than cleaner wards in controlling MRSA

Environmental factors, such as dirty hospitals, are responsible for only 10% of methicillin resistant *Staphylococcus aureus* (MRSA) infections, Mark Enright, senior research fellow in microbiology at Bath University told a conference organised by the Patients Association in London last week. "If you make nurses wash their hands [between seeing each patient] you can control 80% of it," he said, explaining that one of the highest risks was in catheterisation.

Dr Enright said that the current rates of MRSA were due to the emergence in the early 1990s of the two particular strains of the bacterium which had proved resistant to treatment with the antibiotic methicillin and were particularly virulent.

Lynn Eaton *London*

be legally obliged to report cases. The report estimates there are 50 cases of female circumcision a year in the Netherlands. This is based on two representative studies, in Amsterdam and Tilburg, of immigrant populations from Saharan countries where female circumcision is traditional.

But the Royal Dutch Medical Association, the Dutch child health association, and the Dutch tropical medicine society are opposed to the proposals. They argue that emphasising prosecution rather than prevention may jeopardise the 95% coverage of health checks for schoolchildren and would drive the problem of female circumcision further underground.

Tony Sheldon *Utrecht*

The report, *Betrijding Vrouwelijke Genitale Verminking* [Combating Female Genital Mutilation], is available at www.rvz.net.

FDA warns about using antipsychotic drugs for dementia

The US Food and Drug Administration issued a public health advisory warning of fatal adverse events in patients with dementia treated with atypical antipsychotic drugs. Seventeen controlled studies of elderly patients with dementia have shown that patients treated with the drugs were 1.6 to 1.7 times more likely to die than patients given placebo. The causes of death included congestive heart failure, sudden death, and infections, such as pneumonia.

The FDA asked manufacturers to place a "black box" warning on drug labels—indicating an adverse reaction that may result in death or serious injury—noting the increased death rates and that "these drugs are not

approved for the treatment of behavioural symptoms in elderly patients with dementia."

The drugs affected include aripiprazole (Abilify), olanzapine (Zyprexa), quetiapine (Seroquel), risperidone (Risperdal), clozapine (Clozaril), and ziprasidone (Geodon). A drug used for depression associated with bipolar disorder, olanzapine (Symbyax), was included in the advisory warning.

Warnings about atypical antipsychotic drugs have been issued in recent years after reports of increased rates of stroke, obesity, and diabetes. Last year, doctors in Europe and Canada received warnings about olanzapine as an intramuscular injection, but doctors in the United States did not. The failure to warn doctors has triggered consternation among some leading physicians in the US.

Jeanne Lenzer *New York*

Ruling allows EU patients to be reimbursed for treatment outside the union

European Union patients who have received prior permission from their national health service or insurers to be treated in another EU country are entitled to have their costs covered even if they are subsequently given medical care outside the union, according to a new judgment from the European Court of Justice. The ruling establishes the principle that health authorities in one member state are bound by decisions taken by those in another.

The case revolved around Annette Keller, a German citizen living in Spain, who obtained documentation which entitled her to any immediate treatment she might require when visiting her native country in October 1994.

In Germany, Ms Keller was diagnosed as having a malignant tumour which could cause her death at any time and was advised to have treatment at a private clinic in Switzerland. She