

## German company offers “package deal ops” to Ireland

Doug Payne *Dublin*

As the UK government announced plans for patients to be treated free in other EU countries, doctors and patients in Ireland have given a cautious welcome to an offer from a German group to give “package deal” operations to patients on hospital waiting lists. The company has also had talks with some UK health bodies.

The UK health secretary, Alan Milburn, has announced that he intends to make clear to all health authorities and primary care trusts that they are able to commission services from other countries as part of their wider efforts to reduce waiting times for NHS treatment. This follows a recent ruling by the European Court of Justice that patients facing undue delay in their home country could try to get treatment elsewhere in the European Union (21 July, p 128).

GerMedic has said that it will shortly offer the Irish government packages covering everything from flights to luxury beds and care by English speaking medical staff for operations ranging from hip replacements to heart surgery—all at two weeks’ notice. The group is also holding discussions with Denmark and Sweden.

GerMedic is a private company that works with a non-profit making government body, Kuratorium zur Förderung Deutscher Medizin im Ausland,

a committee set up to attract foreign patients to Germany.

Germany has invested heavily in hospital construction—and inherited other facilities from the former East Germany after reunification. As a result, German health authorities say that around 20% of their beds are empty. GerMedic is offering facilities in over 80 clinics for acute medical care, medical rehabilitation, and dentistry.

The company is already offering services to the Norwegian health ministry, which has sent 300 patients to Germany. Even so, the German scheme is being offered only as a stop gap.

“The Irish government should concentrate on providing a health service for its citizens so that they do not need to go abroad for basic services,” said Mr Axel Hollander, chief executive of GerMedic.

This is a view shared by the president of the Irish Patients Association, Stephen McMahon, who described it as an interesting offer but said that the focus “should be on improving our own ability to treat patients at home.”

A spokesperson for the Irish Department of Health said that the department would examine the GerMedic proposal when it is received in the autumn. The department already sends some patients to the United Kingdom and the United States for treatment. □

## COX 2 inhibitors may increase risk of heart attack

Scott Gottlieb *New York*

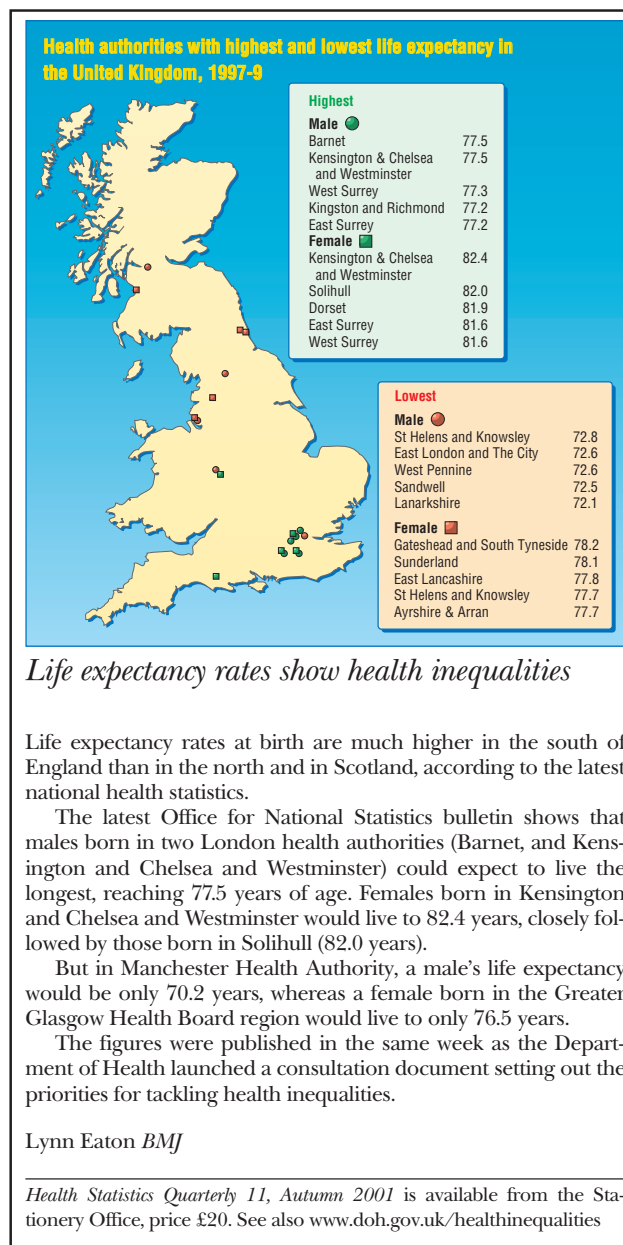
Treatment with certain COX 2 inhibitors, non-steroidal anti-inflammatory drugs that relieve the pain associated with arthritis, may increase the risk of heart attack, according to a retrospective analysis of two separate marketing studies.

The research comes within weeks of the National Institute

for Clinical Excellence approving these types of drug for use in the NHS in England and Wales. The institute acknowledged in a recent technology appraisal guidance bulletin (No 27, July 2001; [www.nice.org.uk](http://www.nice.org.uk)) that there is such a risk and that COX 2 inhibitors should not be prescribed routinely to patients with cardiovascular disease.

Researchers from the Cleveland Clinic Foundation in Ohio analysed the cardiovascular event rates in two randomised multi-centre trials. They also looked at myocardial infarction rates in the placebo group (23 407 patients) in a meta-analysis of four large aspirin studies.

They found that the annual



myocardial infarction rate in the aspirin placebo group was 0.52%. This compared with 0.74% (P=0.04) for the COX 2 inhibitor rofecoxib (Vioxx) in the Vioxx gastrointestinal outcomes research (VIGOR) study and 0.80% for the inhibitor celecoxib (Celebrex) in the celecoxib long term arthritis safety study (CLASS) (*JAMA* 2001;286:954-9).

Aspirin use was not permitted in the VIGOR study, in which 8076 patients were randomised to receive rofecoxib 50 mg a day or naproxen 1000 mg a day. There were 111 cardiovascular events in the rofecoxib arm and 50 events in the naproxen arm.

However, aspirin use was

permitted in the CLASS study, in which 8059 patients were randomised to 400 mg of celecoxib twice a day, 800 mg of ibuprofen three times a day, or 75 mg of diclofenac twice a day. □

### Correction

*Trust defends decision to retain private beds at Heart Hospital*

In this article by Anne Gulland (18 August, p 358), owing to a misunderstanding, we said that the private health insurer PPP has part ownership of some independent hospitals in London. PPP has told us that it no longer has such ownership.