

## More nurse practitioners needed in GPs' offices, UK says

The Audit Commission, the independent body responsible for insuring that public money is spent efficiently in the United Kingdom, says it is time to hire more nurse practitioners to ease the workload of the country's GPs.

The commission recently issued a special report, *A Focus on General Practice in England* ([www.audit-commission.gov.uk/](http://www.audit-commission.gov.uk/)), which noted that GPs are responsible for 80% of patient contacts within the NHS but receive only 20% of its budget.

The Royal College of General Practitioners says it supports a different skill mix within general practice but introducing this type of change will be "considerably hampered by the scarcity of primary care nurses, especially nurse practitioners."

According to the Audit Commission, there are 12 nurses for every specialist consultant in the UK, but 2.3 GPs for every nurse working in a general practice. "Put another way," says the commission,

"whereas 1 in 3 doctors is a GP, only 1 in 20 nurses works in general practice."

It recommends development of a national strategy to promote nursing careers within general practice and says the country must produce more nurse practitioners who can take on additional duties. "If staffing in general practice was being planned from scratch today," the report concluded, "it might look rather different." — *Cathel Kerr*, Fife, Scotland

### CONFERENCE REPORT

## Mind-boggling health problems confronted as 192 nations meet

In Geneva's courtly Palais des Nations, officials representing 192 countries met earlier this year for the 55th World Health Assembly (WHA), where they tried to set the direction for global health policy. A major theme this year was the link between economic development and health.

Dr. Gro Harlem Brundtland, director general of the World Health Organization (WHO), continues to emphasize the need for WHO leadership and global partnerships to deal with the highest priority health issues.

A key point of contention has been Brundtland's insistence that WHO projects must be open for cosponsorship. This year critics aimed at a newly announced WHO-sponsored partnership, the Global Alliance for Improved Nutrition (GAIN), which will try to counter global malnutrition by getting companies to bring food to impoverished nations. On the one hand, critics say, WHO is promoting tobacco-free initiatives, while on the other hand it is allowing into GAIN partners that are linked to tobacco. (Kraft, a GAIN member, is owned by tobacco giant Philip Morris, see [www.infact.org/050902gat.html](http://www.infact.org/050902gat.html)). Canada has contributed Can\$500 000 to the GAIN effort, while the Bill and Melinda Gates Foundation has committed Can\$80 million. The program's main

goal is to introduce food-fortification programs to counter the severe micronutrient deficiencies that cause birth defects, impaired physical and mental growth, and other problems. The main deficiencies involve vitamin A, folic acid, iron and iodine ([www.gainhealth.org](http://www.gainhealth.org)).

One of the main achievements to emerge from this year's WHA actually got its wings last year in Doha, Qatar (*CMAJ* 2002;166[3]:366). With the moral weight of that declaration behind it, the 2002 WHA unanimously approved a resolution calling on WHO to promote differentiated prices for essential drugs, with lower prices in poorer nations.

But many items didn't make it to the WHA agenda. One of them was parked outside the Palais in a truck that carried the sign: "TRAPPED — Neglected Diseases, Forgotten Lives." The trailer, part of a Médecins Sans Frontières (MSF) travelling exhibit, provided a virtual tour of desperation. Visitors to MSF's "Fly Trap" had a chance to live short, trapped lives in the Third World. For an instant I became a Cambodian girl who had contracted malaria. I learned that I would be prescribed chloroquine, a drug that probably wouldn't do me any good because of endemic drug resistance.

Malaria, which still claims more than 2 million lives annually, draws lit-

tle notice from the drug industry. Bernard Pecoul, an MSF director based in Geneva, pointed to a recent report that only 13 drugs among 1393 new chemical entities developed over the past 25 years have been aimed at tropical infectious diseases.

MSF calls this a public policy failure and says policy-making organizations such as WHO must make "neglected diseases" like tuberculosis and leishmaniasis a priority. MSF, which launched a Drugs for Neglected Diseases Initiative in 1999, describes the situation as a "fatal imbalance." It has been lobbying, without success, to have WHO put the neglected-diseases issue at the top of its priority list.

Gilbert Buckle, a physician with Ghana's National Catholic Secretariat, was standing outside MSF's TRAPPED display when he said that the diseases MSF is trying to bring to the world's attention are not "forgotten diseases" where he lives. Nearly 60% of his outpatients have some kind of infectious illness, and there are few medicines to treat them. "I hope and pray that we can somehow make the necessary research happen so I can have even basic medicines to save my patients."

Unfortunately, officials meeting attending this year's WHA meeting were a bit beyond earshot. — *Alan Cassels*, Victoria