## Fake membership invoices target dentists, pharmacists

Bogus membership renewal invoices from fictitious organizations have put some Canadian health organizations on the defensive. The mailings, which began in mid-January, are from fake organizations with names similar to those of legitimate associations. For instance, the Canadian Dental Association (CDA) became the Dental Association of Canada, while the Canadian Pharmacists Association became the Pharmacists Association of Canada. The CMA was not targeted in the scam.

"They were definitely bogus," says Phil Newton, communications director at the Canadian Pharmacists Association. "Our investigator, along with the RCMP, managed to track down the individual involved, who readily agreed to give back the money."

It is an offence under the Competition Act to promote knowingly a business interest or product that is false or misleading. Andrew McAlpine of the Canadian Competition Bureau, whose

Web site (www.competition.ic.gc.ca/) posted a warning, described the mailings as "highly suspicious." The bogus invoices also included Web sites for the "organizations" involved, but they are no longer active. The 7 pharmacists who sent money were all reimbursed.

The official-looking mailings asked for names, street and email addresses, and more than \$400. The text on the phony renewal forms was virtually identical, and their Web sites featured material pirated from official sites, such as the CDA's.

"We learned that the 'Dental Association of Canada' had mailed membership forms to dentists in Ontario and Quebec, and later found out that these forms were mailed to all dentists in Canada," says Bernadette Dacey of the CDA. "We immediately warned them not to send money or credit card information."

Suzanne Lavictoire says the Canadian Veterinary Medical Association took similar action after being alerted by a sharp-eyed recipient. "A member who had some concerns brought them to our attention," she says, and no members lost money because of the scam.

However, McAlpine says it's impossible to know how many people paid the invoices because some will not be aware of the scam. "This technique has been used by different groups for years," he says. "Read the thing over very carefully and make sure you know what you're paying for. If no one pays them, then by definition these organizations are going to go away." — Jim Donnelly, CMAJ

## Confusion over drug names leads to advisories

The US Food and Drug Administration and Health Canada have issued advisories warning health care professionals about prescribing errors that have occurred because 2 drugs — Seroquel and Serzone-5HT<sub>2</sub> — have look-alike names (see *CMAJ* 2003;168[5]:598).

In Canada there has been 1 reported dispensing error, which did not produce an adverse event. In the US, 7 dispensing errors and a death have been linked to the 2 drugs. A 25-year-old woman experienced respiratory arrest and died after taking Seroquel in error for 3 days, but no causal relationship was proved.

Seroquel is used to treat schizophrenia, while Serzone treats depression. Adverse events resulting from errors include hallucinations, nausea, vomiting, dizziness and mental deterioration.

Dispensing confusion has been attributed to similarities in strength, dosage and dosing interval, as well as poor physician handwriting and the fact that the 2 drugs are stocked close together in pharmacies.

Dr. Nacia Faure, medical director at Bristol-Myers Squibb Canada, which markets Serzone, advises caution when prescribing either product. "It's important that physicians write really clearly and that pharmacists makes sure they really understand what was written." — *Tim Lai*, CMAJ

## US hospitals balking at smallpox vaccination

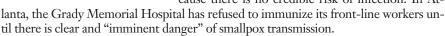
US President George Bush got his. So did Defence Secretary Donald Rumsfeld. But some hospitals across the US are balking at immunizing their staff against smallpox because they think the risks outweigh the threat posed by bioterrorism.

Based on studies reported by the US Centers for Disease Control (CDC) in 1968, 1000 of every million people receiving their first vaccination against smallpox will report serious reactions. These include an allergic reaction at the vaccination site, spread of the vaccinia virus to other people (inadvertent inoculation) and spread of the vaccinia virus to other parts of the body (generalized vaccinia). Between 14 and 52 of these 1 million

people will experience potentially life-threatening reactions to the vaccine, and 1 or 2 will die.

The CDC notes that there may be more adverse events today because more people are at risk due to immune suppression caused by diseases such as cancer and AIDS. It estimates that one-third of those vaccinated will experience symptoms severe enough to cause them to miss work.

In February, hospitals in Maryland, Colorado and Washington were weighing the pros and cons of the vaccine. At least 2 hospitals in Georgia and Virginia have refused to inoculate employees because there is no credible risk of infection. In At-



In December, Bush had proposed voluntary vaccinations for up to 10 million people, including the 400 000 health care workers who would likely be first responders during any smallpox outbreak following an attack with biological weapons. The first wave of about 450 000 voluntary vaccinations began in January. — *Barbara Sibbald*, CMAJ



Smallpox vaccination: health workers saying no