Briefly

Physician-assisted deaths: The number of physician-assisted deaths in the Netherlands rose by 13% in 2012 according to the commission that reviews all cases of euthanasia. This is the sixth consecutive year of increases. In 2012, an all-time high of 4188 people died by euthanasia, about 3% of all deaths, reports the *Associated Press*. In 2006, 1923 people had physician-assisted deaths. In the Netherlands, physician-assisted euthanasia has been legal for terminally ill people since 2002. Most requests come from people with cancer. Other conditions cited in requests include nervous system disorders and cardiovascular disease. — Catherine Cross, *CMAJ*

Maternal health: Prime Minister Stephen Harper has promised \$203 million over five years to nine projects dedicated to improving the health of mothers and newborns in developing nations. Harper made the announcement at a United Nations panel in New York, New York. The money, part of the nearly \$3 billion committed to maternal and child health in 2010, will be used to increase immunizations, improve nutrition and establish community services. “The world is making significant progress in improving the health of women and children in developing countries and reducing the unacceptable mortality rates faced by these vulnerable populations,” Harper said at the panel. “Canada is at the forefront of these efforts and I am proud that through today’s support, more women and children will benefit from better nutrition, increased food security and access to important, life-saving vaccines.” — Roger Collier, *CMAJ*

Concussion guidelines: The Ontario Neurotrauma Foundation has released new guidelines to help health care workers provide “evidence-based, best-practice” care to patients with persistent symptoms of mild traumatic brain

injury. Up to 15% of people with the condition experience symptoms — including headaches, sleep disturbance, cognitive impairment and fatigue — beyond the normal three-month recovery period, state the guidelines. “Not everyone is an expert on mild traumatic brain injury,” Dr. Shawn Marshall, lead author, told the *Ottawa Citizen*. “These guidelines help them navigate the recent and overwhelming explosion of concussion research.” — Roger Collier, *CMAJ*

Safe injection: Harm-reduction advocates in Ottawa, Ontario, will soon apply to Health Canada for permission to open Canada’s second safe-injection site, reports the *Ottawa Citizen*. For the past decade, the only facility to provide medical supervision for people injecting illegal drugs has been Insite in Vancouver, British Columbia. Dr. Mark Tyndall, head of infectious diseases at The Ottawa Hospital, is one of the leaders behind the push for a second site. “We have very high rates of HIV in the city, very high overdose rates, a lot of people that are disconnected from any health services,” he told the *Citizen*. “This is exactly what the supervised-injection site addresses.” — Roger Collier, *CMAJ*

Veil ban: United Kingdom Health Minister Dr. Dan Poulter has ordered a review of policies on hospital workers’ uniforms and proposed banning face veils for people who are in direct contact with patients. Bans on the niqab are already in place in 17 National Health Service hospitals, according to an investigation by *The Telegraph*. “Being unable to see a health care professional’s face can be a barrier to good and empathetic communication with patients and their families,” Poulter told *The Telegraph*. “That is why I am writing to all health care regulators to ask them to look into this matter and to review their professional regulations,

to ensure that there is always appropriate face-to-face contact between health care professionals and their patients.” — Roger Collier, *CMAJ*

Unmet needs: In 2012, about 17% of Canadians age 15 and older reported needing mental health care in the previous year, yet only 67% of those needs were fully met, according to a report from Statistics Canada. The need for care, such as counselling, went unmet for 12% of people and was partially met for 21%. Canadians with elevated levels of distress are “significantly more likely” to have unmet or partially met mental health needs, states the report. “Most perceived barriers to receiving [mental health care] were related to personal circumstances, although almost one in five who reported barriers said they were related to features of the health care system,” concluded the report. — Roger Collier, *CMAJ*

Bullying symptoms: Unexplained physical symptoms and illnesses in children may be signs that they are being bullied, according to a meta-analysis in the journal *Pediatrics*. The researchers analyzed 30 studies from 14 countries that involved about 220 000 school-aged children. They found that children who are bullied are twice as likely as their peers to complain of physical distress — including headaches, stomach aches, dizziness, diarrhea and trouble breathing — when there is no obvious cause. “The association between being bullied and psychosomatic problems was confirmed,” the paper concludes. “Given that school bullying is a widespread phenomenon in many countries around the world, the present results indicate that bullying should be considered a significant international public health problem.” — Roger Collier, *CMAJ*

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