

## Swiss irked by arrival of “death tourists”

A Swiss assisted-suicide organization has come under scrutiny following revelations that a small but growing number of “death tourists” has been entering the country.

In one case, a terminally ill British cancer patient arrived in Zurich with his family Oct. 23. After meeting with Ludwig Minelli, a lawyer and founder of Dignitas, a Swiss right-to-die group, the patient was examined by a doctor. Two days later the patient and his family went to a small apartment rented by Dignitas in a Zurich suburb, where he was given a barbiturate to swallow. His body was cremated and the family returned to Britain with his ashes.

In January, a 74-year-old Liverpool man with motoneuron disease made the same journey to Switzerland. It ended with the same result Jan. 20.

A loophole in Swiss law permits assisted suicide, allowing physicians to provide lethal doses of drugs to terminally ill patients who are willing either to ingest the drugs or to open the valve on an intravenous drip themselves. (Only 2 European countries, the Netherlands and Belgium, permit euthanasia, but they

prohibit physicians from assisting patients from other countries who wish to end their lives.) In 2001 the Swiss parliament rejected a proposal to legalize euthanasia.

It is estimated that 125 people, mostly foreigners, have come to Zurich to die with Dignitas’ assistance. Dignitas, founded in 1998, accepts foreigners as members.

The image cast by “death tourism” irks Swiss officials, and one lawmaker has proposed tightening restrictions on assisted suicide and prohibiting foreigners from participating.

The issue of assisted suicide received wide publicity earlier last year when Diane Pretty, a patient with incurable motoneuron disease, unsuccessfully sought to have Britain’s high court overturn the UK’s ban on the practice. Her appeal to the European Court of Human Rights was rejected, but her case spurred a campaign to change British law.

Deborah Annetts, chief executive of Britain’s Voluntary Euthanasia Society, said the case of the British cancer patient who died in Zurich is “terribly sad.” She said her group had been inundated with

calls from terminally ill people trying to get in touch with Dignitas. “We urgently need to protect the vulnerable from back-street assisted suicide at home and abroad,” she said. — *Mary Helen Spooner*, West Sussex, UK

## Europe cracks down on cigarette ads

A ruling by the European Court of Justice in Luxembourg means that cigarettes sold in the European Union (EU) will carry stronger warnings about the dangers of smoking, and tobacco companies will no longer be allowed to use terms such as “light” or “mild” to describe their products. The court rejected a challenge by 2 tobacco companies against last year’s EU directive on the manufacture, presentation and sale of tobacco products.

That directive provides for cigarette packets to carry health warnings covering 30% of the front and 40% of the back of each pack. Every pack must include 1 of 14 advisories, such as “Smoking clogs the arteries and causes heart attacks and strokes.”

The warnings will be framed in black, and usage will be rotated so that all appear regularly. The directive also lowers the maximum tar yield from 12 mg to 10 mg. As well, EU health ministers have banned tobacco advertising in newspapers and on the radio and the Internet.

Antitobacco groups praised the ruling concerning the use of “light” and “mild,” saying that it would help correct the misperception that these cigarettes cause less harm. “Every day Europe’s doctors come face to face with the suffering and death caused by tobacco,” said Dr. Sinead Jones, director of the British Medical Association’s Tobacco Control and Resource Centre. “Smokers have the right to clear, accurate information about the health effects of tobacco, and to be protected against misleading claims that some cigarettes are safer than others.” — *Mary Helen Spooner*, West Sussex, UK

## HIV testing now compulsory for new NHS staff

New employees of Britain’s National Health Service [NHS] will undergo compulsory HIV testing if their jobs involve close contact with patients, the NHS has announced.

The measure was recommended by a government medical panel studying the potential risk to patients from workers infected with serious communicable diseases. The panel’s report says the policy is “not intended to prevent those infected with bloodborne viruses from working in the NHS, but to restrict them from working in those clinical areas [surgery, dentistry, midwifery and gynecology] where their infection may pose a risk to patients in their care.”

Existing NHS staff seeking to transfer into these areas from other departments must also undergo testing, as must staff returning to work after a career break or overseas employment.

All new NHS recruits were already being screened for tuberculosis and hepatitis, and the move to add HIV to the list came amid growing public anxiety. In December, 125 patients in southwest England were offered HIV tests after a worker was found to have contracted the virus. The Dorset and Somerset Health Authority, which refused to identify the employee, announced that none of the patients who had opted for testing had been infected. While there have been no known cases in the UK of patients being infected with HIV by a health care worker, there have been 22 alerts affecting approximately 8000 patients.

Officials emphasized that the testing requirements were not aimed at the NHS’s large number of foreign-born staff. In 2001, the NHS recruited more than 2000 nurses in South Africa, where the HIV infection rate is among the highest in the world. — *Mary Helen Spooner*, West Sussex, UK