

News @ a glance

Rural India: A new Rural Health Mission in India will attempt to provide basic health services in 300 000 villages. The plan covers 17 states, including those with some of the worst health indicators, including high maternal and infant death rates and low immunization coverage.

As well as providing maternal and child health facilities, the mission will implement national programs to control leprosy, tuberculosis, malaria, leishmaniasis and iodine deficiency. The key part of the program, expected to cost US\$1777 million for the first 2

years, will involve training a woman from the village as an accredited social health worker/activist (ASHA). The ASHA is expected to manage the drug and contraceptive depots, encourage family planning, keep records of births and deaths in the village, maintain a village health register and help prepare a village health plan. Indian health ministry officials say the mission will strengthen the country's public health infrastructure, increase community ownership and create a cadre of village health workers. But non-government organizations fear the mission may end up concentrating on population control through coercive sterilization of women and ignore health problems, especially HIV, which is spreading rapidly through rural India. — *T.V. Padma*, New Delhi, India

Google grads: One of the Internet's most popular search engines has launched a sister engine devoted to scholarly literature, including peer-reviewed papers, theses, books, preprints, abstracts and technical reports. Google Scholar (<http://scholar.google.com/>) searches a subset of the main Google index, open reposi-

tories and the Web sites of academic publishers, professional societies, preprint repositories and universities. One major source it doesn't have is Elsevier. The new engine defines the importance of the reference through a combination of the number of times it is cited by other texts and the source's credibility. Features for narrowing searches, such as timeliness, will be added, added Acharya. "We will gradually refine it once we figure out which things are important."

125 ways: A report from the College of Family Physicians of Canada makes 125 recommendations to address the current and future shortage of FPs. *Family Medicine in Canada — Vision for the Future* recommends increasing the number of medical school entry positions from 2100 to 2500 by 2008, allocating at least 45% of first-year residency positions to family medicine and increasing residence flexibility so residents can transfer more easily. According to the report, 16% of Canadians over age 18 (about 5 million adults) don't have a family physician and only 20% of FPs are now fully open to taking new patients, down from 24% in 2001.

Beyond Dolly: The creators of Dolly the sheep have applied for a licence from the UK Human Fertilisation and Embryology Authority (HFEA) to clone human embryos for research into motor neuron disease (MND). The team from Roslin Institute, Edinburgh, will be the first to deliberately clone embryos with a disease. They plan to use rejected eggs from fertility treatment, remove their DNA and replace it with genes known to be involved in MND and genes from people with a family history

of MND. This will allow study of the early stages of MND; the embryos will be destroyed after 6 days. Group leader, Ian Wilmut emphasized that the current objective was to gain insight into the disease rather than to develop a cure. Brian Dickie, Director of Research at the MND Association, says the research could eventually "revolutionize future treatment of MND." While recognizing the significant moral and ethical concerns, Dickie adds: "We will support this research project, as long as we are satisfied that it is legal, has a sound scientific rationale and has the potential to bring us closer to treatments and/or a cure for MND." — *Cathel Kerr*, Fife, Scotland

No autism coverage: A unanimous Supreme Court of Canada decision that the BC government did not discriminate against autistic children by refusing to pay for expensive therapy, means it's up to the provinces to decide what "non-core" services are funded. The Nov. 19 decision stated: "The [medicare] scheme is, by its very terms, a partial health plan and its purpose is not to meet all medical needs. It follows that exclusion of particular non-core services cannot ... be viewed as an adverse distinction." The 6-year legal battle involved BC's refusal to pay for an early-intervention, applied behavioural

therapy program for autistic children that costs about \$60 000 per year. In 2002 the BC Court of Appeal ruled that failure to pay for the treatment violated Section

15(1) of the Charter of Rights and Freedoms (*CMAJ* 2002;167[11]:1278) which gives all Canadians "the right to the equal protection and equal benefit of the law." — Compiled by *Barbara Sibbald*, CMAJ



Art Explosion



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