#### **PULSE**

# Fertility rates and gross national incomes per capita

ecently the World Health Organization reported 2005 fertility rates per woman and gross national incomes per capita from its 193 member countries. Figure 1 shows these data for the 20 countries with the highest and lowest fertility rates for which gross national income data were available and for the G7 countries (Canada, United States, France, United Kingdom, Germany, Italy, Japan) for comparison.

Countries with the highest fertility rates per woman tended to have a much lower gross national income per capita than countries with the lowest fertility rates. They also tended to be or to have recently been politically unstable. (The fertility rates per woman for Timor-Leste and Afghanistan were 7.8 and 7.3 respectively but are not included in Figure 1 because data for their gross national income were not available.)

A fertility rate per woman of just over 2.0–2.1 is recognized as being necessary to maintain a country's population size. Countries with a rate below this, which included most of the G7 countries, must rely on immigration if this is their intent. — Mark O. Baerlocher MD, Toronto, Ont.

#### REFERENCE

 World health statistics 2007. Geneva: World Health Organization; 2007. Available: www.who .int/whosis/en/

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### Gross national income per capita, \$ 5000 10 000 15 000 20 000 25 000 30 000 35 000 40 000 45 000 Ukraine Fertility rate per woman Slovakia Gross national income Republic of Moldova per capita, \$ Poland Greece Czech Republic Bulgaria Belarus Spain Singapore Japan Italy Germany Canada United Kingdom France **United States** Sierra Leone Burkina Faso Angola Democratic Republic of the Congo Chad Mali Burundi Uganda Guinea-Bissau Niger Fertility rate per woman

Figure 1: Fertility rates per woman and corresponding gross national incomes per capita in 2005 for the 20 countries with the highest and lowest fertility rates for which gross national income data were available and for the G7 countries. Source: World health statistics 2007.

## News @ a glance

Prexige review: In the wake of a decision by Australian authorities to yank lumiracoxib (Prexige) from the market after reports of liver problems, including 2 deaths and 2 liver transplants, in 8 people who took the drug, Health Canada has announced that it is reviewing the COX-2 inhibitor nonsteroidal

anti-inflammatory to determine whether it's safe for use in the treatment of osteoarthritis. The department says it has requested information about the adverse events from the drug's manufacturer, Novartis Pharmaceuticals Canada Inc.

**Research access:** The Canadian Institutes of Health Research has adopted a

policy that will require all researchers to make peer reviewed research articles stemming from work funded in whole or in part by the agency (after Jan. 1, 2008) freely available online within 6 months of their publication date. As well, grant recipients will be required to deposit bioinformatics, atomic and molecular coordinate data in public databases.