

Briefly

New vaccine: Researchers in China's Jiangsu province and in Beijing are reporting success in creating a vaccine that is 90% effective against EV71-associated hand, foot and mouth disease in children. The infection causes a rash and painful blisters and is usually not life-threatening, but in some cases can cause fatal brain infections. In 2009, an outbreak in China involved 1.2 million people. Nearly 14 000 of those infected had severe complications, and 353 people died. The researchers published the results of a phase 3 trial involving 10 000 children in *The Lancet* ([http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(13\)61049-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)61049-1/fulltext)) on May 29. Although 90% of the children who received two vaccinations between 6 and 35 months of age were successfully immunized against EV71, there are other viruses including Coxsackievirus A16 that also cause hand, foot and mouth disease. — Laura Eggertson, *CMAJ*

Quality control: Four pharmaceutical companies and Health Canada have recalled dozens of lots of five different prescription drugs, citing "quality concerns at the manufacturing facility" in India. All four companies purchase the active ingredients they use to manufacture these medicines from Smruthi Organics Limited in Solapur, India. Health Canada made the recall of amlodipine, ciprofloxacin, lamotrigine, norfloxacin and telmisartan public May 30, after the European Directorate for the Quality of Medicines & HealthCare notified Canada about the results of its recent inspection of Smruthi. As of May 27, Health Canada had no reports of adverse reactions associated with the drugs, but advised patients to contact their health care provider if they had any concerns about the medication. The department asked doctors to let them know about any adverse reactions that could be related to these drugs. — Laura Eggertson, *CMAJ*

Digital hook-ups: The 16 000 to 30 000 New Brunswickers without a family doctor can now join an online registry the province launched May 28 to match them with doctors and nurse practitioners taking new patients. Patient Connect NB is a bilingual service that will assign patients to health practitioners on a first-come, first-served basis. People who already have family doctors but want to switch providers can also register, but those without any doctor would have priority. The registry collects personal health information about current and previous conditions, in an effort to match patients correctly, but promises to safeguard the information, in keeping with the provincial Personal Health Information Privacy and Access Act. — Laura Eggertson, *CMAJ*

Crisis centre opens: Manitoba is set to open what it is calling Canada's first stand-alone mental health crisis centre. The Mental Health Crisis Response Centre in Winnipeg is designed to serve the estimated 10 000 people with mental health challenges who currently visit hospital emergency rooms every year. The province, which contributed \$12.3 million toward the new centre, has hired 35 mental health professionals to provide assessments, crisis intervention and crisis treatment. The centre, set to open June 3, will also connect patients to follow-up resources. "Families dealing with a mental health crisis no longer have to go to an emergency room for care as we open Canada's first dedicated facility for mental health crises and emergencies," Premier Greg Selinger said in a news release. "Highly skilled mental health professionals will be available 24 hours a day, seven days a week for those who need them." The centre will also house the Adult Mobile Crisis Service, which already provides suicide prevention assistance and crisis intervention care to 10 000 adults in Winnipeg each year. — Laura Eggertson, *CMAJ*

Helmet laws: A new study finds that the number of cycling-related head injuries has decreased regardless of whether a Canadian province implemented helmet legislation. The study, published in *BMJ*, analyzed 66 716 hospital admissions across Canada between 1994 and 2008. In Ontario, a review by the chief coroner conducted in 2012 of 129 cycling-related deaths, indicates that helmets do lower the risk of dying from a head injury. — Emma Cohen, Ottawa, Ont.

EpiPens on the menu: The City of Hamilton, Ontario, wants to be the first municipality in Canada to ensure that every restaurant has auto-injectors (EpiPens) at the ready for clients with food allergies. In May, Hamilton's Board of Health voted to work with Dr. Susan Waserman at McMaster University to look into the process of having epinephrine autoinjectors available at food courts, snack bars and restaurants. Training would also be required for food service staff. Waserman, director of McMaster's Adverse Reactions Clinic, says the program would likely start as a pilot project but could ramp up, similar to the way defibrillators are now available in public places. — Laura Eggertson, *CMAJ*

Wider HIV testing: Everyone between the ages of 15 and 65 should be screened for HIV, the United States Preventive Services Task Force is recommending. The independent panel of primary and preventive care experts had previously recommended HIV tests only for pregnant women and people in high-risk groups, such as intravenous drug users, men who have sex with men, people who have unprotected vaginal or anal intercourse and those who have had sex with an HIV-positive partner, a bisexual partner or an injection drug user. The new guidelines are based on better outcomes when HIV is treated early, often when patients are

asymptomatic. The task force was also influenced by data that suggest as many as 25% of people who carry HIV in the US do not know they are infected. “The overall benefits of screening for HIV infection in adolescents, adults, and pregnant women are substantial,” the organization said in its recommendation. — Laura Eggertson, *CMAJ*

UK goes digital: The National Health Service in the United Kingdom is allocating £260 million for hospitals to develop an electronic prescribing system to ensure all diagnostic scans, x-rays and notes are entered on computer systems, all prescriptions are issued electronically to pharmacies and all patient records are available online by 2015. Health Secretary Jeremy Hunt says the digitization of prescribing services and patient records will protect patients from medication errors and other mistakes made because physicians and other health care providers lack basic information about their medical history. As many as 8% of hospital prescriptions contain errors, the Department of Health said in a statement, and studies have shown that using technology could cut those errors by half. Last year, at least 11 people died while in the care of the National Health Service because they were given the wrong prescription, the department said. — Laura Eggertson, *CMAJ*

Lessons from Sweden: Canada could learn a thing or two about health care from Sweden, according to the Fraser Institute, a Canadian research and educational organization with offices across the country. In a new report, *Health Care Lessons from Sweden*, the institute claims that Canada, despite having higher health expenditures, trails Sweden in many important areas, including wait times for emergency care, primary care and specialist care. The institute’s recommendations for Canada, based on Sweden’s model, include using activity-based funding models, providing private health care for medically necessary services and implementing cost-sharing regimes. These echo recommendations made in the institute’s previous report, *Health Care Lessons from Australia*, which medicare advocates criticized as an

attempt to change health care from a public service to a business. — Roger Collier, *CMAJ*

Roll up sleeves: Influenza immunization rates among health care professionals are “unacceptably low, even in developed countries,” says Dr. Cecil Wilson, president of the World Medical Association. Wilson, who addressed the World Health Assembly in Geneva, Switzerland, on May 21, says health care professionals play an important role in preventing and transmitting the virus. (A recent *CMAJ* Analysis article explored this issue.) The risk of complications associated with influenza is highest among older people, young children, patients with underlying medical conditions and pregnant women — all of whom are in frequent contact with health professionals in clinics, hospitals and doctors’ offices. In the United States, vaccination coverage among health care workers improved after 2010, when the Veterans Health Administration vaccinated 64% of its employees through its “Infection: Don’t Pass it On” campaign, Wilson says. He urged every health professional to get a flu shot each year. The Association is working with the International Federation of Pharmaceutical Manufacturers Associations on a global campaign to promote influenza immunization among doctors. — Laura Eggertson, *CMAJ*

Class-action launched: Seventy women have launched a class-action lawsuit against Apotex Inc., distributors of the birth control pill Alysena, which the company recalled April 8 after realizing some packages of the pill contained two rows of placebo pills instead of only one. Forty-five of the women involved in the lawsuit are pregnant, two miscarried and five had abortions, according to Sandy Zaitzeff, a lawyer with Watkins Law Professional Organization in Thunder Bay, Ontario, which is handling the lawsuit. Apotex did not initially alert women to the problem with the faulty packages of birth control, until Health Canada raised the level of the drug recall and prompted public notification. Watkins is claiming \$800 million in damages on behalf of

the entire class of women potentially affected by the faulty birth control. “Consumers have been left in emotional shock and turmoil and now face the life-altering consequences of this serious product and/or manufacturing defect,” Watkins said in a statement. The lawsuit has not yet been certified as a class, and the claims have not been proven in court. The original recall involved 50 000 packages of Alysena, lot number LF01899, but the recall was subsequently expanded to 11 additional lot numbers. Watkins expects other women will join the lawsuit. — Laura Eggertson, *CMAJ*

Raising smoking age: New York City is considering raising the minimum legal age to buy tobacco products from 18 to 21 to reduce smoking rates in youth. That would be the strictest age limit of any major city in the United States. The change could potentially reap benefits, because data suggest 80% of smokers pick up the habit before age 21, said Christine Quinn, speaker of the New York City Council, in to *The New York Times*. Debate remains, however, about the quality of scientific evidence linking age restrictions to decreased smoking among youth. Though studies do indeed indicate that sales of tobacco products to teenagers go down with age restrictions, young people are probably turning to other sources to fuel their smoking habits, Amanda Amos, professor of health promotion at the University of Edinburgh in Scotland, told *The New York Times*. — Roger Collier, *CMAJ*

E-health saves money, report says: E-health records saved the health care system \$1.3 billion over six years, according to a PricewaterhouseCoopers Canada Foundation study. Canada Health Infoway, a federally funded organization to promote and monitor e-health uptake across Canada, commissioned the study. The report states that 56% of patients now use electronic medical records (EMRs), up from 23% in 2006. From 2006 to 2012, EMRs saved \$800 million by making health care administration more efficient, with staff spending less time pulling and filing charts, and doctors spending less time reading and maintaining paper

files. The report also says that EMRs saved the system \$584 million by reducing duplicate tests and adverse drug reactions. Qualitatively, EMRs helped to improve communication among health care providers and between doctors and patients, the report says. PricewaterhouseCoopers drew its conclusions from current research, a national survey, cost data and interviews. — Catherine Cross, *CMAJ*

UK cosmetic procedures slammed: A review of Britain's cosmetic surgery industry commissioned by the Department of Health recommends a series of measures to better protect patients. The booming industry is expected to be worth \$5.6 billion by 2015, with the biggest growth in nonsurgical procedures such as dermal fillers, Botox and laser hair removal. But according to the report, this area is "almost entirely unregulated." The review also raised safety concerns, stating that there were no checks on the surgeons' qualifications in some parts of the private sector, and that more than half of cosmetic surgeries were being performed by "fly in, fly out" doctors who are based abroad and fly in to the UK to perform operations. Included in the report's recommendations are creating legislation to classify fillers as prescription only, compulsory insurance in case things go wrong and a ban on special financial offers for surgery. — Jasmine Williams, *CMAJ*

Cutting cord too early puts babies at risk: Experts say the long-standing practice of cutting the umbilical cord immediately after birth can put infants at risk for iron deficiency. According to researchers from the Royal College of Obstetricians and Gynaecologists in the United Kingdom, infant anemia can last for up to six months and has been linked to problems with brain development and conditions such as autism and cerebral palsy. While the college says it may be appropriate to cut the cord early in some cases, generally it recommends waiting at least two to five minutes after birth or until cord pulsation has ceased. This allows enough time for the blood in the cord to transfer to the baby, which can boost a newborn's blood volume by a third. The World Health Organization

and the International Federation of Gynecology and Obstetrics both changed their guidelines on early cord clamping a few years ago. The new recommendations are slated to be published by the National Institute for Health and Care Excellence in 2014. — Jasmine Williams, *CMAJ*

Eradicating polio: The Global Polio Eradication Initiative (GPEI) says it can eliminate polio by 2018 with an investment of \$5.5 billion. Polio once affected and crippled hundreds of thousands of people, but in 2012 there were only 223 cases. The World Health Organization, the United States Centers for Disease Control and Prevention, Rotary International, UNICEF and philanthropist groups are partnering with governments to raise money for the GPEI. The initiative has already raised \$4 billion, including \$1.8 billion from the Bill and Melinda Gates Foundation and \$250 million from the Government of Canada. Afghanistan, Nigeria and Pakistan are the only countries where polio remains endemic. — Catherine Cross, *CMAJ*

More funding for rural physicians: Saskatchewan's government is doubling its funding for its rural physician locum pool, increasing it from \$1.5 million to \$3 million. Locum physicians temporarily fill in for physicians who are away from their practices. The program, which began in May 2012, helps to prevent health care disruptions in rural areas that have limited access to care. The additional funding will help enlarge the physician pool by adding 12 full-time locum positions. This will ensure that there is at least one full-time locum physician in each of Saskatchewan's health care regions. — Catherine Cross, *CMAJ*

Avastin linked to necrotizing fasciitis: Top-selling cancer drug Avastin (bevacizumab) could put patients at risk for developing necrotizing fasciitis, commonly known as flesh-eating disease, Health Canada warns. To date, two Canadians have contracted the disease, one of whom has died. Drug manufacturer Hoffmann-La Roche Ltd. has confirmed 52 cases of flesh-eating disease in patients who took the drug between

November 1997 and September 2012; 17 of these patients died (<http://healthy.canadians.gc.ca/recall-alert-rappel-avis/hc-sc/2013/28921a-eng.php>). Necrotizing fasciitis is a severe bacterial infection of the skin and soft tissue, and treatment is often amputation. People with lowered immune systems, such as those with diabetes or cancer, are most at risk for the condition. Avastin is used to treat the brain cancer glioblastoma or in combination with chemotherapy to treat cancers that have spread to other parts of the body, such as colon, rectal or lung cancer. Health Canada advises that anyone taking Avastin who develops unusual signs or symptoms should contact their health care professional immediately. — Jasmine Williams, *CMAJ*

Prescription drug drop-off day in Ontario: Ontario Provincial Police and 29 municipal police services have organized a prescription drug drop-off day May 11 to divert narcotics and other drugs from misuse. They encourage doctors to urge their patients to drop old or unused medications off anonymously at locations across the province. "Anything that the medical community can do to help us get these drugs out of circulation is appreciated," says Joe Couto, director of government relations and communications for the Ontario Association of Chiefs of Police. Police are targeting oxycodone and other opioids, as well as stimulants and other medications commonly stolen from homes. "Ontarians are among the highest users of prescription medications containing narcotics in the country," OPP Commissioner Chris Lewis said in a news release. "The number of deaths has risen due to drug misuse; often, young people will use medications found in their home medicine cabinets to 'get high'." Drop-off locations are open from 10 am to 3 pm at 51 OPP detachments (www.oacp.ca/content/news/article.html?ID=1383) as well as community sites (www.oacp.ca/content/news/article.html?ID=1384). In a pilot program last year in the Niagara region, police collected 418 kilograms of prescription drugs, including 16 800 oxycodone and other opioid pills. — Laura Eggertson, *CMAJ*

CMAJ 2013, DOI:10.1503/cmaj.109-4521