

## Recent Publications

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### A monthly newsletter on AIDS

**United Kingdom** — The diversity of the problems associated with AIDS, both medical and social, has led the Royal Society of Medicine to launch a monthly *AIDS Letter* which provides authoritative, up-to-date information and commentary on all aspects of the subject, ranging from progress in relevant research to implications for life insurance cover.

*The AIDS Letter* is available from the Royal Society of Medicine Services Limited, 1 Wimpole Street, London W1M 8AE, England.

### Responsibility for drug-induced injury

The scope of this new monograph is aptly summarized in the opening paragraph of its introductory chapter: "this is a book about justice and therefore about rights and duties. Every day, throughout the world, people are being injured by medicines. Sometimes that is inevitable; often it could have been prevented. Once it has happened it is important to find out what went wrong, and what the legal and social consequences of the injury are. It can be at least as important to determine how one can prevent the same injury being unnecessarily inflicted again. It is that process of enquiry — judicial, disciplinary or social — which this book is intended to serve".

In presenting the relevant issues and problems the book is encyclopaedic in its coverage. It is less impressive in discussing the solutions. This is not through lack of research or scholarship. The reality is that very few countries have instituted or even contemplated a system of compensation for drug-induced injury that either supplants or complements the traditional slow, costly and uncertain process of litigation between parties. Many have yet to organize effective adverse drug reaction monitoring programmes. Any prospect of setting up compensatory schemes in countries that have yet to develop other

forms of health insurance is far distant. The emphasis must consequently be placed on prevention rather than cure. More countries must be persuaded that monitoring and assessing the performance of widely-used medicines is not only cost-effective, but fundamental to improved patient care, and vital to WHO's broader objective of the rational use of drugs.

**Reference:** Dukes, M.N.G., Swartz, B. Responsibility for drug-induced injury. Netherlands: Elsevier (1988).

### Guidelines for the control of *Shigella dysenteriae* 1

In the early decades of this century the classical shiga bacillus, *S. dysenteriae* 1, was a virulent pathogen responsible for widespread epidemics characterized by high case fatality and extreme debilitation. In the 1930s, for reasons that remain undetermined, such epidemics became rare and the disease virtually disappeared from industrialized countries. In the late 1960s, however, it suddenly reappeared in epidemic form, first in Central America and Mexico where it has again become a major public health problem and, more recently, in Asia and Africa.

These guidelines, issued by the Diarrhoeal Diseases Control Programme of WHO, include an up-to-date review of the epidemiology and clinical features of the disease and propose strategies for the prevention and control of epidemics.

**Reference:** *Guidelines for the control of epidemics due to Shigella dysenteriae* 1. World Health Organization, Geneva. WHO/CDD/SER/88.12.

### Information on veterinary products

The increasing use of drugs in animal husbandry, not only to combat disease in farm animals but to increase the yields of food obtained from them, has important public health implications. The need to

ensure that food for human consumption is free from potentially hazardous drug residues has become a major focus of attention within drug regulatory authorities. Not only do commercially-available products need to be formally registered, their legitimate use needs to be clearly defined and monitored and, in particular, safe withdrawal periods need to be defined if drugs are not to be administered to meat-producing animals unacceptably close to the time of slaughter.

International harmonization of requirements is imperative if a reasonably open international market in meat, milk and eggs is to be maintained, and national regulatory officials consequently need to view their responsibilities within a broader, international context. This resulted, in 1982, in the foundation of the International Technical Conference on the Registration of Veterinary Medicines as an informal forum for promoting common approaches to shared problems. The initiative has now become more securely established through the publication of a six-monthly information letter (in English, French and Spanish) which is issued under the auspices of the International Office of Epizootics in Paris.

**Reference:** *Lettre d'information sur l'enregistrement des médicaments vétérinaires*. Office international des Epizooties. ISSN 1010-3538, March 1988.

## Why report adverse drug reactions?

As yet, relatively few countries have instituted national systems for the spontaneous reporting of suspected adverse drug reactions by doctors and other health professionals. Moreover, even where such systems have been in place for some years, many serious reactions remain unreported. In an effort to stimulate more effective reporting, the Committee on Safety of Medicines in the United Kingdom has produced a 10-minute video entitled "Help make medicines safer". Its aim is to explain why an effective voluntary reporting scheme represents a worthwhile investment in preventive medicine.

It is directed to all members of the medical profession and, within the United Kingdom, copies have been sent to all pre- and post-registration schools of Medicine and Pharmacy. Limited numbers are available to other national regulatory authorities and teaching institutions.

**Reference:** CSM Video: "Help make medicines safer", Department of Health and Social Security, Medicines Division, Market Towers, 1 Nine Elms Lane, London SW8 5NQ, England.

