

In brief

Hong Kong issues flu alert kits:

The Hong Kong government is to send out influenza pandemic preparedness kits to the city's households. The kits will tell citizens to stock up on surgical face masks and antifever drugs, such as paracetamol, and to check that their GP has supplies of antiviral drugs.

US calls for storage of stem cells from umbilical cord:

The US Institute of Medicine recommends establishing a National Cord Blood Policy Board and system to store and distribute stem cells derived from umbilical cord blood. It would allow 90% of patients to find a match for treating leukaemia, lymphoma, and other blood diseases.

WHO calls for H2N2 virus to be destroyed:

The World Health Organization has ordered the destruction of samples of the H2N2 influenza virus that the College of American Pathologists sent to more than 3700 laboratories worldwide amid fears that unintentional infection of a laboratory worker could unleash a pandemic. The unmarked samples of the virus that caused the 1957 Asian influenza pandemic, killing one million people, were sent as part of a laboratory quality control exercise.

UK island changes abortion law:

Abortions for fetuses with Down's syndrome are to become legal in Jersey. Previously, one of the legally accepted reasons for abortion was if the fetus was likely to have an "exceedingly poor quality of life," effectively outlawing the aborting of a fetus with Down's syndrome. The new law refers to fetuses that would be "seriously handicapped."

Happiness may be related to the functioning of the body:

People who reported more everyday happiness had lower concentrations of plasma fibrinogen and cortisol, a study has shown. Happy men also had lower heart rates. Researchers from University College London did a study of 216 Londoners due to be published in the early online edition of the *Proceedings of the National Academy of Sciences* at www.pnas.org.

India launches national rural health mission

Ganapati Mudur *New Delhi*

The Indian government announced a plan to increase staffing levels and improve the infrastructure in rural hospitals last week. It also intends to use village women to track the health needs of their own communities.

The health ministry has earmarked 67bn rupees (£0.8bn; \$1.5bn; €1.2bn) this year (2005-6) for the National Rural Health Mission, dubbing it a fresh effort to correct "striking inequalities" between urban and rural health services in India. But health activists have said that the plan would require more funding and complementary changes to India's medical education system for it to work.

The mission will raise a cadre of 250 000 women volunteers designated as accredited social health activists over the next three years, virtually one from every village or cluster of villages, across 18 states with weak rural health infrastructure.

The activists would be trained to advise village populations about sanitation, hygiene, contraception, and immunisation; to provide primary medical

care for diarrhoea, minor injuries, and fevers; and to escort patients to medical centres.

They would also be expected to deliver direct observed short course therapy for tuberculosis and oral rehydration; to give folic acid tablets and chloroquine to patients; and to alert authorities to unusual outbreaks.

The mission has also pledged higher standards for health care in rural medical centres to be achieved by increasing the number of doctors, improving infrastructure, and ensuring a supply

of drugs. But community health activists say that the mission has unrealistic expectations.

"The additional allocation is grossly inadequate," said Abhay Shukla, coordinator of the Centre for Enquiry into Health and Allied Themes in Pune and a member of a task force that advised the health ministry on mission strategies.

Health activists say that the mission appears to rely on funds earlier spent on reproductive and child health. "We had also urged reasonable compensation for the accredited social health activists, but the government wants them as honorary volunteers," Dr Shukla said.

Government officials admit that there are shortages of doctors in rural areas. □



A force of 250 000 women is to be recruited as health activists for India's rural areas to redress inequalities in health care

High Court tightens conditions under which Southall may practise

Clare Dyer *legal correspondent, BMJ*

The British consultant paediatrician David Southall should not be erased from the medical register, a High Court judge ruled last week. Professor Southall accused a father of murdering two of his baby sons after watching him on television.

The Council for Healthcare Regulatory Excellence (CHRE) had challenged the General Medical Council's decision not to strike Professor Southall off for accusing Stephen Clark of double murder on the basis of the televised interview. The CHRE, which oversees the regulation of healthcare professions, had argued that the three year ban from child protection work imposed by the GMC was "unduly lenient."

But Mr Justice Collins ruled that, although Professor Southall had "neither the sense nor the humility" to retract his "seriously flawed" allegations, the GMC had acted reasonably in allowing him to continue to work as a consultant paediatrician. However, he decided that the conditions imposed on the ban needed to be tightened and that it should be reviewed before the end of the three years to see if any conditions should be continued.

Professor Southall, who is professor of paediatrics at Keele University, must do no more than alert the relevant child protection doctor if he believes a child needs protecting. He must also give the GMC details of any

such reports every six months.

Professor Southall was found guilty of serious professional misconduct by the GMC last August. After seeing Stephen Clark interviewed on a Channel 4 *Dispatches* programme in 2000, he had contacted the child protection team and had later written a report claiming that Mr Clark's guilt was "certain or near certain" (*BMJ* 2004;329:366). Mr Clark's wife, Sally, was then serving a life sentence for murdering the couple's baby sons Christopher and Harry. Her conviction was quashed in 2003.

But Professor Southall became convinced that her husband had tried to smother Christopher and that the couple's surviving child was at risk, after hearing Mr Clark describe a nosebleed experienced by Christopher at a London hotel in 1996. Christopher died at home aged 11 weeks, nine days after the incident. □