In brief

Indonesian case is likely to be avian flu: The 8 year old daughter of the man who had Indonesia's first reported human case of H5N1 avian flu has also been confirmed as probably having had the disease. She, her 1 year old sister, and 38 year old father all died on 12 July. Test results on the younger sister are still pending.

English health department offers bowel screening by post: All men and women in England in their 60s are to be offered screening by post for bowel cancer. Home faecal occult blood testing kits will be sent to around two million people a year, starting in April next year.

Pig infection worries WHO: The World Health Organization says it is baffled by the unusually large number of infections among humans and high mortality resulting from an outbreak of *Streptococcus suis* in pigs in Sichuan province, China. As of 28 July 152 people had been infected, of whom 27 were in a critical condition and 31 had died, most within a day of developing symptoms.

EU implements ban on tobacco advertising: European Union legislation came into force on 31 July banning tobacco advertising in the print media, on radio, and on the internet. It also prohibits tobacco sponsorship of transnational sporting and cultural events, such as Formula One grand prix races that take place in one country but are televised and broadcast to others.

A third of Welsh people have long term illness: Almost one in three adults in Wales have a limiting, long term illness, according to the Welsh Health Survey. Eighteen per cent of adults are being treated for high blood pressure, 14% for arthritis, 13% for respiratory illness, 12% for back pain, and 10% for a heart condition. See www.wales.gov.uk/

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Resistance to antiviral drugs is climbing

Zosia Kmietowicz *London*

Public health experts have warned of a worrying increase in resistance to antiviral drugs that is making infections such as HIV and hepatitis B more difficult to manage.

Evidence from research that followed 4500 British patients infected with HIV indicates that after two years of standard treatment with a combination of three different classes of antiretroviral drugs 10% of people become resistant to at least one drug. Six years after starting treatment 27% of patients are resistant to at least one of their drugs.

Speaking at the launch of the annual report of the Health Protection Agency for England and Wales, Peter Borriello, interim director of the agency's Centre of Infections, said the most worrying development is the emergence of strains of HIV that are resistant to all three classes of antiretroviral drugs currently available. Such triple resistance

HIV particles (yellow and pink) budding from the surface of a T4 lymphocyte cell (blue) in a coloured transmission electron micrograph

now affects one in 25 people with HIV, and although some antiviral drugs may dampen down the viral load in these patients their prognosis is much worse than in someone who shows no drug resistance.

"Up to one in five people who are being diagnosed with HIV are resistant to at least one drug, which suggests they have acquired the infection from someone who is already receiving treatment," said Professor Borriello. "This tells us we have to now reinforce behaviour messages."

There is also evidence that

20% of strains of hepatitis B viruses are now resistant to standard treatment, and work with the World Health Organization indicates that resistance to drugs for influenza was emerging, although less than 1% of people were showing resistance.

William Stewart, chairman of the agency, said: "The worrying trend is that viruses that are resistant to antiviral drugs are beginning to emerge. To a microbiologist this may be unsurprising, but it is worryingly reminiscent of the development of antibiotic resistant bacteria over 50 years ago. The fight against microbial diversity is endless."

Although the development of resistance to antiviral drugs was inevitable, cooperation from public health departments in other countries would help in monitoring the situation and in devising protocols to limit the spread of resistance, experts agree. Development of new classes of drugs by pharmaceutical companies would also provide doctors with the means to treat infections with a reduced risk of resistance developing, said Professor Borriello. □

The report is at www.hpa.org.uk/annualreport2005

Fertility agency is to investigate single embryo transfer

Owen Dyer *London*

The common practice in Britain during in vitro fertilisation (IVF) treatment of implanting more than one embryo in women may be banned under new guidelines aimed at reducing the number of multiple births.

The Human Fertilisation and Embryology Authority, which regulates fertility treatment and cloning research, has announced that an expert group will study the experience in Europe of single embryo transfer.

The authority's chief executive, Angela McNab, in announcing the review in Manchester last week, said multiple births placed a strain on parents and the NHS. "We know that the biggest risk from fertility treatment is caused by multiple births—having twins or triplets—and this is a risk both to the mother and to the children born.

"Multiple births are more likely to be premature and the babies below normal birth weight. This can have profound implications for the children's health and development in the years to come. We also know that twins or triplets are much more likely to have cerebral palsy [and] to die around the time of birth or for there to be other complications during pregnancy."

Ms McNab referred to a Sheffield University study that placed the average cost of care of triplets in the first year of life at £32 350 (\$57 200; €46 800), more than 10 times the cost of a singleton birth. Professor William Ledger, who presented the study to the European Society of Human Reproduction and Embryology's conference in Copenhagen in late June, was one of several researchers there

to press the case for single embryo transfer.

The resulting savings could enable the NHS to offer IVF treatment to more women, Professor Ledger argued. Last year the NHS paid for only a quarter of cycles of treatment, and this year it is struggling to fulfil a government commitment to provide one free cycle to each woman under 40 seeking IVF treatment.

"Women are designed to have healthy babies, one at a time, and with natural conception this is what usually happens. The HFEA [Human Fertilisation and Embryology Authority] wants to see the results of fertility treatment come closer to what occurs naturally."

Restricting treatment to a single embryo per cycle would be a major change in standard British practice. Just 9% of cycles of IVF treatment in 2002-3 involved a single embryo transfer, while 76% involved two embryos, and 15% involved three. □

See www.hfea.gov.uk