In brief

Guidelines help doctors to cut down antibiotic prescribing:

Improving the way that antibiotics are prescribed to hospital inpatients can reduce antibiotic resistance and hospital acquired infection, according to a systematic review of 66 studies. The authors found that guidelines restricting doctors' prescribing habits had a greater immediate impact than just trying to persuade them to change their ways (*Cochrane Library* 2005, issue 4; www.thecochranelibrary.com).

Czech president objects to appointment of doctors' leader:

Czech President Vaclav Klaus has refused to endorse the head of the Czech doctors' organisation David Rath as health minister, insisting it was a conflict of interest and "against common sense."

Patients can check on doctors more easily:

The General Medical Council has improved its website enabling patients, pharmacists, and employers to gain instant access to a doctor's registration status. From 1 November providing the name of the doctor will be enough to see whether he or she has any restrictions on their registration. See www.gmc-uk.org.

Commission launches report on patient experiences:

A person's age, health, and where they live affects their perception of NHS services, shows a survey from the Healthcare Commission of 312 000 patients. Older people are more positive about their NHS care, as are those living outside London—particularly in the north east. Those most unwell were more likely to be negative. See www.healthcarecommission.org.uk.

Top-up fees will deter future doctors:

Plans to force mature graduates who take a second degree in medicine to pay £3000 a year top-up fees up front will undermine attempts to diversify the profession, say the BMA and the Council of Heads of Medical Schools. The new arrangement is due to start next year, although undergraduates will still be able to defer repayment of their fees until after they finish their degree.

Doctors who write guidelines often have ties to the drug industry

Janice Hopkins Tanne *New York*

About a third of authors who write practice guidelines in the United States have ties to the pharmaceutical industry, a survey by the journal *Nature* has discovered (2005;437:1070-1). About 70% of writing panels were affected.

Nature's journalists surveyed 215 guidelines deposited with the US National Guideline Clearinghouse in 2004. All 215 guidelines concerned drugs. But only 90 contained details of the authors' conflicts of interest, and, of these, only 31 guidelines were free of ties to industry.

A total of 685 authors contributed to the 90 guidelines that *Nature* investigated. The researchers found that:

- 445 authors (65%) declared no conflict of interest
- 143 (21%) had an advisory board or consultancy position with a relevant company
- 153 (22%) had a research grant from a relevant company
- 103 (15%) had a position on a drug company resource panel of expert doctors
- 16 (2%) held stock in a relevant company
- 10 (1%) mentioned a different conflict of interest.

The article also reported that the Center for Science in the Public Interest, based in Washington, DC, which had first started the study, checked the disclosure statements of authors of some hypertension guidelines published in 2004. Only one author reported a conflict of interest, but the centre's further checking found that four other authors had received research

funds from drug companies.

Guidelines are important because of the growing emphasis on evidence based medicine. They are often written by experienced doctors brought together by professional societies. Many evidence based recommendations rely on clinical trials.

Merrill Goozner, director of the Center for Science in the Public Interest's Integrity in Science Project, told the *BMJ* that he was not surprised by the study's findings and that he had cooperated with *Nature*. The centre had gathered data on 26 guidelines but had not completed the study. It had consequently given its information to *Nature*, which used the same methodology for its larger study.

Mr Goozner told the *BMJ* that many doctors did not disclose their drug industry connections, even when the guidelines or a journal required it. "There's no standard journal policy," he said, "and no punishment [for not disclosing information]."

Stem cell foundation greeted by cautious optimism

Norra MacReady *Los Angeles*

The establishment of the World Stem Cell Foundation, announced earlier this month by Woo Suk Hwang of Seoul National University, is being greeted as a step forward in the contentious area of stem cell research.

Professor Hwang is considered the leading expert in somatic cell nuclear transfer, or therapeutic cloning. His was the first laboratory to clone a dog,

an Afghan hound named Snuppy (*BMJ* 2005;331:366). He and his colleagues also made headlines when they successfully cloned human stem cells and created disease specific embryonic stem cell lines without fertilised embryos.

In therapeutic cloning, mature cell nuclei are injected into oocytes from which the nucleus has been removed. The

oocytes are then allowed to develop into embryos.

The foundation's headquarters will be in Seoul, with satellite laboratories in Oxford and San Francisco. Investigators at all three sites will harvest ova from local donors and do therapeutic cloning at the satellite laboratories. They will then take the cells to the main laboratory in Seoul for development into embryonic stem cell lines. Ultimately, the foundation expects to develop as many as 100 cell lines each year. The lines will not be patented.

In an editorial in the *New England Journal of Medicine*, Susan Okie said that some US scientists were concerned that keeping the base of operations in Seoul might slow their own efforts to develop proficiency in therapeutic cloning (2005;353:1645). And the ethical questions remain, she said, even though the research will be legal in most US states as long as the investigators do not use federal funds.

Shane Smith, the scientific director of the Children's Neurobiological Solutions Foundation in Santa Barbara, California, which promotes research on genetic and acquired neurological disorders, said: "Right now, there are no good human models for the diseases we represent."

Professor Woo Suk Hwang tells the press how his centre will work