In brief

FDA reports that two US women died after abortion pill regimen: The FDA last week advised patients to take misoprostol—the second drug of a two drug abortifacient regimen—orally rather than vaginally after two women died after using it vaginally. Six US women have died after medical abortions, out of the 560 000 women who have used the regimen since it was approved in 2000. None of the deaths have been directly attributed to the regimen.

Newborns to be screened for deafness: The parents of every newborn baby in England will now be offered the chance to have their child checked for deafness and hearing impairment shortly after birth as part of the NHS newborn hearing screening programme. The new test identifies hearing loss and impairment on average two years earlier than previous methods.

HIV prevalence among injecting drug users is at highest for a decade: In 2005 one in 62 injecting drug users was infected with HIV (1.6%), up from one in 110 in 2002 (0.9%) and reaching the same figure as the previous peak in 1992.

Website offers advice on PSA test: DIPEX, the UK website highlighting patients' experiences of health care, has launched an online resource for GPs and nurses advising men whether or not they should have a prostate specific antigen test for prostate cancer. It gives first hand experiences of men who have had the test and information on the pros and cons of taking the test. See www.dipex.org.uk/psatesting.

Swiss insurers must meet cost of penis implants for transsexuals: A Swiss court has ruled that the cost of penis implants enabling postoperative transsexuals to have an erection should be covered by basic health insurance. The ruling by the Swiss Insurance Court was made after a 31 year old who was born a woman sued his health insurance provider for refusing to pay for penis implants after a sex change.

Court delays takeover of Derbyshire practice

Owen Dyer *London*

A contract giving control of a Derbyshire general practice to a US health management company has been put on hold after a legal challenge from a local resident.

UnitedHealth Europe, a subsidiary of the Minnesota based United Health Group, won the bidding process to manage a general practice in the former mining village of Creswell, which includes a branch surgery in the nearby village of Langwith (*BMJ* 2006;332:194, 28 Jan).

But Scarcliffe Parish Council, which administers Langwith, voted unanimously to oppose the award, complaining that North Eastern Derbyshire Primary Care Trust failed to meet its statutory duty of public consultation.

Pam Smith, one of the local parish councillors and a patient in Langwith, applied for a judicial review of the decision. Last

Residents were upset that a bid by local GP Dr Elizabeth Barrett was not shortlisted

week Mr Justice Davis ruled in the High Court that the review process could go ahead. A final decision is expected in May.

Richard Smith, chief executive of UnitedHealth Europe and a former editor of the *BMJ*, said the company had expected the decision. "Judicial reviews are almost never stopped at this stage. We're quite relaxed about this process going ahead." He stressed that the case concerned the trust's consultation process, not UnitedHealth's competence in managing primary care.

Researchers funded by NIH are failing to make data available

Janice Hopkins Tanne *New York*

Most researchers who are funded by the US National Institutes of Health (NIH) do not provide free public access to their papers by posting them on PubMed Central, says an NIH report. Mandatory posting may be necessary to ensure that free access is given in future, says the report.

Prodded by federal departments and Congressional committees, the NIH last year announced a policy on public access to increase the availability of research that it funds. It asked researchers to submit their final, peer reviewed manuscripts to the PubMed Central database—the NIH's free digital archive of journal literature in the biomedical and life sciences—when their paper was accepted by a journal.

However, less than 4% did so. Several senators have suggested that even more federally

funded research should be publicly available for free, the *Washington Post* reported (15 Mar, sect A: 17). Such research includes studies funded by the Centers for Disease Control and Prevention, the Agency for Healthcare Research and Quality, the Environmental Protection Agency, and the National Oceanic and Atmospheric Administration.

The NIH provides major funding for biomedical research. However, when research is published, scientists and the public typically must pay to read it by subscribing to the journal or purchasing an article. Subscriptions can run into hundreds or thousands of dollars a year, and fees for a single article can be \$25 (£14; €21) or \$35.

Law makers and others say that because tax payers had

Ms Pam Smith said residents were particularly upset that a bid from a local GP, Elizabeth Barrett, had not been shortlisted, despite the parish council's support and the council's offer of land at a peppercorn rent for her surgery.

"We tried to make our voice heard," said Ms Smith. "We set up a patients' committee. But we weren't consulted at all."

"Since the pit closed a lot of the young people have left, and there are a lot of older patients here. I saw Richard Smith on the telly saying we don't like change. We're not afraid of change, but we want a service that has been tried and tested. The NHS is part of Britain. We've never needed American companies to come in and run it before. We're just a small village, and they're a multimillion pound company. They're going to be out for their shareholders first."

Richard Stein, Ms Smith's solicitor, said the application for judicial review argued that the primary care trust had not met its obligations under section 11 of the Health and Social Care Act 2001, which mandates that patients likely to be affected by changes in services must be consulted.

already paid for the research through their taxes they should not have to pay again to read the results.

In May 2005 the NIH asked researchers to post their results on PubMed Central. It hoped to create a central archive of NIH funded research publications, to advance the cause of science, to help the NIH manage its research portfolio better, and to give the public electronic access to the published results of NIH funded research.

However, participation was voluntary, although the NIH made considerable efforts to encourage researchers to post their publications. Senior NIH officials made presentations to scientific, library, university, and publisher groups.

Despite these efforts, in the first eight months only 1636 of about 43 000 eligible articles (less than 4%) were deposited in PubMed Central.

Report on the NIH Public Access Policy is available at <http://publicaccess.nih.gov/news.htm>.