Adverse drug reactions result in 250 000 UK admissions a year

Lisa Hitchen *London*

More than a quarter of a million patients are admitted to hospital in the United Kingdom because of harmful effects after taking drugs, a BMA report estimates this week.

The report cites research from 2004 suggesting that these cases cost the NHS around £466m (€680m; \$870m) a year.

The research, by Munir Pirmohamed and colleagues at the University of Liverpool, was based on an analysis of 18 820 admissions to hospital over six months, which found that 1225 were related to an adverse drug reaction (*BMJ* 2004;329:15-9). Aspirin, diuretics, warfarin, and non-steroidal anti-inflammatory drugs were the drugs most commonly involved.

The authors of the BMA report extrapolated from these figures that the total for the UK could be 250 000.

In the UK adverse events must be reported to the Medicines and Healthcare Products Regulatory Agency (MHRA) under the yellow card scheme, which was set up in 1964 after use of thalidomide led to abnormalities among children of

mothers who had taken the drug for morning sickness.

But the scheme is voluntary, and the report shows that the total number of adverse drug reactions being reported over the past 20 years has remained static at around 20 000 a year. The exception was the year 2000, when the total number of reports was 33 152. This was due to the introduction of the meningitis C vaccination campaign and a decision to allow nurses to report reactions.

Health professionals should see it as their "professional duty" to report to the scheme, the report says, and it is particularly important to report reactions in children, elderly people, and people with congenital abnormalities. But it says that many factors seem to stand in the way of reporting, such as lack of time, apathy, lack of awareness, confusion, and fear of legal reprisals.

Vivienne Nathanson, the BMA's head of ethics and science, said: "Clinical trials have limitations. And when a drug is first marketed its effectiveness may be well understood, but rel-

atively little may be known about its safety in the population at large."

"Doctors must make sure they report any suspected ADR [adverse drug reaction] and at the same time increase awareness among their patients about the reporting process," she added.

Since January 2005 patients have been able to report to the scheme. Pharmacists joined in 1999 and nurses in 2000.

"Doctors should be reminded that the introduction of nurse

and pharmacist reporting was meant to supplement the reports they made and not be a substitute for them," the report says. It adds that hospital doctors in particular should be reporting more, given the high numbers of adverse drug reactions in hospitalised patients.

Hospital doctors fall behind GPs, who report the most, the report finds.

Reporting Adverse Drug Reactions: A Guide for Healthcare Professionals is available at www.bma.org.uk.

Department of Health ends contract with drugs bulletin

Madeleine Brettingham *London*

The *Drug and Therapeutics Bulletin*, a journal that has provided doctors across England with advice about medical treatments for over 40 years, has had its funding stopped by the Department of Health in the latest round of cost cutting in the NHS.

The last minute decision, which came only two hours before the bulletin's previous contract ended in March, leaves

the publication's future uncertain and threatens to increase yet further the influence of the drug industry in doctors' prescribing, said its editor, Ike Iheanacho.

"In April last year the [parliamentary] health select committee pointed to us as an invaluable source of independent advice. So it seems strange that they have done this. The fear is that now doctors will be

reliant on pharmaceutical promotion," Dr Iheanacho said.

"We have an unrivalled reputation for looking critically at the information on offer and giving doctors practical guidance, and many have told me they would find it harder to make decisions without us. The danger is it will be difficult to evaluate expensive new treatments that haven't stood the test of time," he said.

The journal, which is available online and is sent free to all NHS doctors in England, is published by the UK Consumers' Association (now known as Which?). In a survey carried out in winter 2005 89% of readers

said the publication influenced their decisions and recommendations about treatment. Dr Iheanacho said that at least 100 have complained to the secretary of state for health about its withdrawal.

But a health department spokeswoman said that the cuts represented inevitable belt tightening. "The contract was due to end in March 2006, and as we were not sure whether sufficient funding would be available to start a new contract we gave the Consumers' Association warning of this," she said. "The contract has not been renewed, and officials are discussing the implications of this decision."