Radiotherapy can improve outcomes in some lung cancer patients

A new study of 7465 patients who underwent surgery for lung cancer shows that radiotherapy can improve the chances of long term survival in certain patients. The study, published online on 12 June in the *Journal of Clinical Oncology* (www.jco.org, doi: 10.1200/JCO.2005.04.6110) suggests reconsidering the role of radiotherapy in the treatment of lung cancer.

Brian Lally, a radiation oncologist at Wake Forest University Baptist Medical Center, Winston-Salem, North Carolina, and the study's lead author, said: "Postoperative radiotherapy has failed to demonstrate a survival benefit in the past, likely because previous studies used older equipment. Our study, which examines the results using modern equipment, shows survival benefit in selected patients."

Less than a third of lung cancer patients are treated with radiotherapy.

The improvements this study found occurred in patients whose cancer had spread to the regional lymph nodes between the lungs. Overall survival at five years was 27% in patients who received surgery and radiotherapy and 20% in patients who had only surgery.

David Spurgeon *Quebec*

Australian GPs "named and shamed" for abusing Medicare

In a move aimed at deterring doctors from exploiting the health system, GPs found to have abused Australia's public health Medicare programme have been "named and shamed" by the system's regulatory body. The types of abuse are overprescribing, ordering unnecessary tests, and claiming reimbursement for a very high number of consultations. Some doctors regularly claimed for seeing more than 80 patients a day.

A report sent to 45 000 doctors detailed the 26 doctors from around the country who in the last financial year have been barred from using Medicare, forced to repay money, or reprimanded by the independent Professional Services Review.

John Webber, director of the Professional Services Review, said, "Their [the doctors'] practice has been unacceptable to the general body of practitioners. They've had lots of chances to not only explain their behaviour but modify their behaviour and get back into line." It is believed that most if not all of the 26 are still in practice.

Christopher Zinn *Sydney*

Cord blood banks' claims are often unfounded, says royal college

Saving umbilical cord blood from newborn babies in commercial banks for use later in life is unnecessary and its benefit is unproved, a leading UK committee has reported.

The Scientific Advisory Committee of the Royal College of Obstetricians and Gynaecologists gave this finding in updating its advice on umbilical cord blood banking, which was first issued in 2001. Since then the number of private banks operating in Europe has grown.

Peter Braude, chairman of the committee, said the committee wholeheartedly supported the collection of stem cells from the umbilical cord when babies were at high risk of diseases such as aplastic anaemia and thalassaemia. The NHS's Cord Blood Bank would be able to serve families affected by these conditions, he said.

Private cord blood banks, however, were making claims to be able potentially to offer treatments that were still some way off.

"What they are offering may be a stem cell treatment for a disease which is still in the realm of speculation," said Professor Braude.

Lynn Eaton *London*

The royal college's advice is available at www.rcog.org.uk.

NHS deficit doubles to £512m, but true figure may be higher

Adrian O'Dowd *London*

The overall deficit for the NHS in England more than doubled to £512m (£750m; \$945m) for 2005-6 from the previous year, show figures released last week.

However, the government has stressed that the problems lie with a minority of trusts around the country and said that the deficit was stabilising and had fallen by £110m in the past six months.

The Department of Health, publishing its annual NHS report, said that despite the unaudited deficits the report told a "good news story," in that waiting times for operations and at emergency departments were shorter than ever.

The secretary of state for health, Patricia Hewitt, said: "I know there are financial challenges in a minority of organisations, but it is encouraging that the provisional end of year figures show that the minority of trusts that are overspending are now focusing on their problems and putting plans in place to tackle the issue."

"The end of year position is the equivalent of a person on an annual wage of £20 000 overspending by around £160. It's a problem—but a manageable problem."

The government wants the NHS to reduce its deficit to zero by the end of 2006-7.

Gill Morgan, chief executive of the NHS Confederation, the body that represents NHS organisations, said: "The overall figure hides the patchy distribution of the deficits. Whilst transforming the system is challenging to all, the biggest

problems are focused in a small number of communities where the problems are long standing, highly complex, and deep rooted."

The Liberal Democrats' shadow health secretary, Steve Webb, said: "The government sets NHS pay centrally, sets NHS targets centrally, and sets the cost of an operation centrally. Then, when the sums don't add up, they say it is the fault of local management."

The government's optimism was checked, however, by warnings made in a joint report on NHS finances by the spending watchdogs the Audit Commission and the National Audit Office.

The report warned that unaudited accounts can underestimate the true deficit and said that whereas the unaudited figure for the 2004-5 deficit was £133.9m the actual figure after audit was £251.3m.

Doctors' leaders said the government was to blame for NHS deficits, because of its "poorly designed policies and political interference."

Paul Miller, chairman of the BMA consultants' committee, said: "Care is suffering, jobs are disappearing, patients and staff are paying the price. Something is going very badly wrong with these health policies."

Chief Executive's Report to the NHS: June 2006 is available at www.dh.gov.uk. *Financial Management in the NHS: NHS (England) Summarised Accounts 2004-05* is available at www.audit-commission.gov.uk.