In brief

British patients received graft tissue from stolen bones: At least 40 British patients have received bone graft tissue from bodies that had been obtained illegally from US mortuaries and sold by a US tissue procurement company. Britain's Medicines and Healthcare Products Regulatory Agency named 25 hospitals that had received the tissue, used as a filler in orthopaedic surgery.

Dutch hospitals contest funding cut: The Dutch Hospitals Association is taking the health minister, Hans Hoogervorst, to court in an attempt to halt a €200m (£134m; \$255m) cut to their funding, confirmed in the Netherlands' recent budget. The cut, amounting to 1.6%, or 2000 staff positions, results from hospitals agreeing with health insurers to treat an extra 300 000 patients in 2005.

Agency shuts down unlicensed drug websites: A number of unlicensed websites allegedly selling prescription only drugs illegally in the United Kingdom have been shut down after raids by the Medicines and Healthcare Products Regulatory Agency. The raids, in Greater London, Colchester, Canterbury, Preston and Hereford, were in connection with sites allegedly selling steroids and sleeping pills. The agency is currently investigating 117 internet related cases.

Wales could go smoke free by April 2007: A ban on smoking in enclosed public places in Wales could be in force by April next year. Draft regulations for the legislation are out for consultation until the end of October.

EU approves cervical cancer vaccine: The European Union has approved Gardasil, the vaccine for cervical cancer, which is designed to be given to girls and women aged 9 to 26 years. It works against human papillomavirus types 6, 11, 16, and 18, which can lead to cervical cancer. The UK Joint Committee on Vaccination and Immunisation will advise the Department of Health whether it should be made available in the NHS.

Guantanamo breaches right to health, says UN

John Zarocostas *Geneva*

Harsh treatment in the US detention camp at Guantanamo Bay has had profound effects on the mental health of many of the detainees and constitutes a breach of their right to health, a joint report by five UN independent experts has concluded.

"The treatment and conditions include the capture and transfer of detainees to an undisclosed overseas location, sensory deprivation and other abusive treatment during transfer; detention in cages without proper sanitation and exposure to extreme temperatures; minimal exercise and hygiene; systematic use of coercive

interrogation techniques; and long period of solitary confinement," it says.

The report to the UN Human Rights Council is by the special rapporteurs on torture, arbitrary detention, judicial independence, freedom of religion, and the right to health. It outlines the conditions that have led to hundreds of acts of self harm; individual and mass suicide attempts; and many hunger strikes.

"The severe mental health consequences are likely to be long term in many cases, creating health burdens on detainees and their families for years to come," it says.

The special rapporteur on the right to health, Professor Paul Hunt, told reporters, "We were extremely worried about the reports we were receiving about the totality of the conditions and their impact on the mental health of detainees."

Earlier he told a session of

the council that although the US claimed that the prevalence of mental illness in Guantanamo was similar to that in other correctional settings, no evidence supported this. The report showed that the detainees' mental health was worse than elsewhere.

Among the serious and credible reports of violations he had received were:

- Provision of health care had been conditional on cooperation with interrogators
- Health care had been denied
- Detainees had been subjected to treatment without their consent, including drugging and force feeding.

Professor Hunt also put the spotlight on many other systematic violations of ethical standards by health professionals and notes that many of the reports of violations of ethical standards had been confirmed by investigations of the US military.

Better care for Michael Stone might still not have prevented the killings

Clare Dyer *legal correspondent, BMJ*

Serious mistakes were made in the care and treatment of Michael Stone, the killer of Lin and Megan Russell, but better care might still not have avoided the killings, the report of an independent inquiry has concluded.

Robert Francis QC, who chaired the inquiry into the involvement of the health, probation, and social services with Mr Stone before he bludgeoned the mother and daughter to death on a country lane in Kent in 1996, said: "This is emphatically not a case of a man with a dangerous personality disorder being generally ignored by agencies or left at large without supervision."

He added: "We have made criticisms, some of them in strong terms, but we are unable to say that the murders could have been avoided by a better standard of care in these respects."

Mr Francis said Mr Stone was "among the most difficult and challenging" patients and had a combination of problems: "a severe antisocial personality disorder, multiple drug and alcohol abuse, and, occasionally, psychotic symptoms consistent with

Michael Stone has a severe antisocial personality disorder

adverse effects of drug misuse and/or aspects of his personality disorder."

There was no suggestion that he was deprived of any service that would have made him less of a danger to the public, Mr Francis said.

The report was handed over to the commissioning agencies—West Kent Health Authority (now the South East Coast

Strategic Health Authority), Kent Social Services, and Kent Probation Service—in 2000, but publication was held up until this week while Mr Stone fought an ultimately unsuccessful legal battle to try to keep his medical records secret.

It lists a catalogue of failings, including failures by the different agencies to share information and coordinate risk assessment. Although Mr Stone spent a substantial part of his adult life in jail, the prison service lost most of his prison medical records. Addiction services ignored his repeated requests for detoxification, and a consultant thought he was too dangerous for the community mental health trust to become involved.

Responsibility for his treatment was left with a GP, who changed dosages and prescriptions without telling the specialists concerned.

Five days before the murders Mr Stone had an "aggressive outburst" in which he told a nurse he wanted to kill someone. The nurse phoned the GP, who said he had increased the dosage of Mr Stone's treatment but failed to mention that Mr Stone had missed an injection three days earlier.

But the inquiry concluded that delays in giving the drugs "did not have any adverse effects on Mr Stone."