

In brief



Umaru Fofana/Reuters

Health workers carry the body of an Ebola virus victim in Kenema, Sierra Leone. The Ebola outbreak has killed 518 people in Guinea, Liberia and Sierra Leone as of 6 July this year, making it the largest and deadliest ever, according to the World Health Organization. West African states lack the resources to battle the world's worst outbreak of Ebola and deep cultural suspicions about the disease remain a big obstacle to halting its spread, the countries' health ministers, meeting in Ghana to draw up a regional response, said.

From the NHMRC

Supporting clinical trials in Australia

International Clinical Trials Day is marked annually on 20 May, the date in 1747 that James Lind commenced his famous trial on the efficacy of citrus fruits in curing scurvy — one of the first clinical experiments in the history of medicine. These days, it is well accepted that clinical trials are essential for showing the safety and effectiveness of new health treatments.

Clinical trials also provide other benefits in new knowledge and wealth, bringing new products to market and improving standards of clinical care. There is concern, however, that Australia's share of clinical trials is falling behind relative to other comparable countries. While our regulatory environment and public health systems are very well regarded internationally, there are concerns that slow clinical trial approval and recruitment times reduce

Australia's competitiveness.

How can this be improved? At a national level, the National Health and Medical Research Council (NHMRC) has provided a wealth of guidance material that, if adopted, would improve the efficiency and timeliness of clinical trial approval processes. Australia's decentralised system means that individual institutions are responsible for decisions related to the support, approval and conduct of clinical trials. The guidance material includes the framework for single ethical review for multicentre clinical trials; a system for certification of human research ethics committee processes; and a list of standard items for clinical trials, now costed by the Independent Hospital Pricing Authority. The NHMRC also supports the Australian New Zealand Clinical Trials Registry and has developed the Australian Clinical Trials website ([http://www.](http://www.australianclinicaltrials.gov.au)



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australianclinicaltrials.gov.au), which brings together resources for patients, researchers and proponents of clinical trials.

The NHMRC is consulting on a proposed new best-practice approach to research governance, and, with the Department of Industry, is developing new education and training material for those involved in the conduct or approval of clinical trials.

Thus, we already have, or soon will have, all the tools we need to improve the efficiency and timeliness of clinical trial approvals in Australia. What is now needed, perhaps, are the carrots and sticks that can encourage all parties involved in the clinical trials process to use these tools in a nationally consistent manner, and to better support and accept clinical trials as a core part of their activities. □

News

Drummond Rennie quote circles the globe ... again

At the *MJA*'s Centenary Symposium on 4 July, guest speaker **Professor Richard Smith**, speaking on the birth and possible demise of medical journals, quoted **Drummond Rennie**, former deputy editor of *JAMA* and organiser of the International Congress on Peer Review and Biomedical Publication, who said: "There seems to be no study too fragmented, no hypothesis too trivial, no literature too biased or too egotistical, no design too warped, no methodology too bungled, no presentation of results too inaccurate, too obscure, and too contradictory, no analysis too self-serving, no argument too circular, no conclusions too trifling or too unjustified, and no grammar and syntax too offensive for a paper to end up in print". A picture of the slide containing the quote was tweeted from the Symposium and was subsequently retweeted over 500 times.

Ebola outbreak reaches unprecedented level

The **World Health Organization** reports that the ongoing outbreak of Ebola virus in West Africa has now reached "unprecedented" levels, with 844 cases and 518 deaths in Guinea, Sierra Leone and Liberia as of 6 July this year. The epicentre was believed to be a small town in rural Guinea called Guekedou. The WHO convened an emergency ministerial meeting of 11 African countries and key international representatives at the start of this month, which resolved to set up a subregional control centre in Guinea to strengthen surveillance, case finding, reporting and contact tracing, as well as to "contain the disease, share experiences and agree on a strategy for an accelerated operational response to bring an end to the outbreak".

Nature retracts two stem cell papers

Prestigious journal *Nature* has retracted two papers on STAP stem cells following an investigation by the Japanese stem research institute, RIKEN, **Retraction Watch** reports. RIKEN found the two papers contained multiple errors, including mislabelled figures, digitally enhanced images and "inexplicable discrepancies" in the data presented. One coauthor, Yoshiki Sasai, apologised, saying he was "deeply ashamed". *Nature* also apologised, but defended its peer-review process, saying the referees "could not have detected the problems that fatally undermined the papers" because "the referees' rigorous reports quite rightly took on trust what was presented in the papers".

Cate Swannell

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MJA InSight Poll

Total respondents: 116

Should the medical profession actively encourage older patients to discuss where they want to die?

No — it's a family discussion 2%
Maybe — if the patient raises the issue 7%

91%
Yes — it isn't discussed enough

Take part in next week's poll on: www.mja.com.au/insight



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comments@mja.com.au

This issue's suggested topic:

In your practice, do you consider that there has been an increase in the diagnosis of ADHD and, if so, does it reflect a real change in the frequency of the disorder?

Doctors helping the terminally ill

Readers interested in the burgeoning issue of voluntary assisted dying can read Senator Richard Di Natale's draft bill for a Medical Services (Dying With Dignity) Act (http://richard-di-natale.greensmps.org.au/sites/default/files/dying_with_dignity_medical_services_draft.pdf). Its provisions would certainly not enable Dr Philip Nitschke's recent act of helping an apparently healthy depressed man to commit suicide. Nor would it set society onto a slippery slope into abuse. The Dying With Dignity movement is all about establishing strict rules and guidelines under which assisted dying can be legally practised — but ONLY for terminally or incurably ill people who request it, and ONLY by doctors who believe it is justified.

Anne Riddell

Retired editor, member of *Dying With Dignity*, VIC.

Advice to a young person thinking of studying medicine

The most important thing in life, above all, is to do what you love. They say that medicine is a vocation, a calling, and I think that's true. It allows you access into people's lives in a really intimate way, and enables you to participate in important community discussions about a wide range of issues, many of which you would never have even considered before you signed up. It can be very stressful, emotional, and physically taxing, but you always go home at the end of the day and feel like you have helped someone.

Dr Megan Hickie

Intern, ACT.

If you do go through that door there is a world of interesting life paths that you might go down. Fulfilling, ever changing and challenging. It is worth thinking not only whether those paths might be a good fit for you but also are you a good fit for the many people who will rely on you in the future? Basically it's a people business and the community expects its doctors to be devoted to their welfare.

Professor Ian Hickie

Professor of Psychiatry, NSW.

Medicine is not a 6- or 7-year course — it will take you at least 12 years before you are fully qualified. Think very carefully about family life, and especially about your own family planning, before you embark on this strenuous odyssey.

"There may not be any 'solutions' (to social problems) analogous to academic exercises with prearranged happy endings and no loose ends dangling."

Thomas Sowell

Dr Peter Arnold

Retired general practitioner, NSW.



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