

Dear *HSCNews* member,

Herewith the fourth of our new monthly *HSCNews Bulletins*. Each *Bulletin* provides details about the latest activities of the 2,500 members of the Health and Social Campaigners Network International, and gives information about health campaigners' new appointments, campaigns, events, funding, publications, research, and websites. The items in this *Bulletin* cover the period end-September to end-October 2006. All items are selected on the basis that they should be of interest to health campaigners worldwide.

We are now also sending out the *Bulletin* to a select number of journalists worldwide who have requested to receive a copy.

Kind regards,  
Louise Oatham  
Manager  
*HSCNews Bulletins*

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*Below, you will find a set of key subject matter mentioned in this Bulletin. If you search for any of these words in the email, you will find the item(s) of news related to that subject matter. Also listed are the countries and regions covered in the Bulletin, which can also be found by searching in the same way.*

**KEY WORDS**

ACCESS; ADVERTISING; AIDS; ALLERGY; ANXIETY; ALZHEIMER'S; ARTHRITIS; ASTHMA; ATTENTION DEFICIT HYPERACTIVITY SYNDROME; BONE; BRAIN TUMOURS; BREAST CANCER; CANCER; CLINICAL TRIALS; CONSUMER; COUNTERFEIT MEDICINES; DEPRESSION; DIABETES; DISABILITY; ENDOCRINE DISORDERS; FEAR OF FLYING; GENETIC; GLOBAL HEALTH; HEALTH DIPLOMACY; HEALTH INFORMATION; HIV; IMMUNOGLOBULIN; INFORMATION ON MEDICINES; MENTAL HEALTH; MEN'S HEALTH; OBESITY; PANIC; PHARMACEUTICAL; PRADER-WILLI SYNDROME; PRIMARY IMMUNODEFICIENCIES; INEFFECTIVE DRUGS; RARE DISORDERS; SELF-MANAGEMENT PROGRAMMES; SCHIZOPHRENIA; SMOKING; SUICIDE; TISSUE BANK; VALUE FOR MONEY; VON HIPPEL-LINDAU; WORLD HEALTH ORGANIZATION; YOUNG PEOPLE.

**COUNTRIES AND REGIONS**

AUSTRALIA; BELGIUM; BRAZIL; CANADA; ENGLAND; EUROPE; FRANCE; GERMANY; HUNGARY; ITALY; INTERNATIONAL; IRELAND; NETHERLANDS; NEW ZEALAND; ROMANIA; SOUTH AFRICA; SPAIN; SWEDEN; SWITZERLAND; UGANDA; UK; US.

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**MEMBERS' NEWS**

***OCTOBER 26 2006, UK***

*Downerry, Cornwall-based INTERNATIONAL PATIENT ORGANISATION FOR PRIMARY IMMUNODEFICIENCIES (IPOPI) stepped up its fight for the reinstatement of immunoglobulin (Ig) onto the World Health Organization's (WHO) Essential Medicines List. The List aims to specify which medicines best meet the priority health needs of populations. The various types of Ig (antibodies used by the body to neutralise pathogens such as bacteria and viruses) were removed from the List in 2003 by the WHO, which believes that vaccines are just as effective, and because no WHO clinical guidelines exist recommending the employment of Ig in treatment. At the IPOPI 9th Annual Meeting, held in Budapest, Hungary, between October 4th and October 6th 2006, the subject of the reinstatement of Ig was high on the agenda. The IPOPI believes that more than 1-in-2,000 patients*

*(particularly those with immunodeficiencies) could benefit from Ig therapy. The organisation also insists that ample data exists on the efficacy of Ig in treatment. On October 26th 2006, the IPOPI announced that it is submitting a formal request to the WHO to get the WHO to change its decision on Ig. Health campaigners, patients, and the public can email comments supporting the IPOPI application to [emlsecretariat@who.int](mailto:emlsecretariat@who.int).*

*[<http://www.ipopi.org/news/budapest-2006-presentations.html>; [http://www.ipopi.org/pdfs/budapest-2006/WHO%20EML%20Presentation\\_IPOPI%20Budapest\\_Final.pdf](http://www.ipopi.org/pdfs/budapest-2006/WHO%20EML%20Presentation_IPOPI%20Budapest_Final.pdf); <http://mednet3.who.int/EML/expcom/expcom15/applications.htm#M>]*

#### **OCTOBER 26 2006, NETHERLANDS**

At the 10th EuroBiO conference in Paris, France, between October 25th and October 27th 2006, the Soestdijk, Netherlands-based **EUROPEAN GENETIC ALLIANCES' NETWORK (EGAN)** announced that it had reached an agreement with Roche on clinical trials data. **EGAN** said that the Swiss pharmaceutical company would now extend its publicly-available internet databases listing clinical trials, and make them incorporate early-stage Phase-I data. Pharma have traditionally been reluctant to provide such data, for fear that competitors will gain access to commercially-sensitive information. But, on May 19th 2006, the World Health Organization (WHO) recommended that all clinical trials should be published in the public domain. The change in Roche's policy was warmly received by both **EGAN** and the Utrecht-registered **EUROPEAN CANCER PATIENT COALITION (ECPC)**, which has been spearheading the campaigning conducted on this issue. Hildrun Sundseth, policy officer at the **ECPC**, commented: "Often, participating in a clinical study (even in Phase I), might be our patients' last hope to survive, by getting a treatment that tries a different pathway than already-approved treatments. Therefore, it is a fundamental right for patients to know about such studies. Patients need accurate, reliable, and readily-understandable information about clinical trials (in all phases of development) to enable them to have an informed discussion with their doctors about their potential participation in a study". Alastair Kent, president of **EGAN**, added: "This announcement is a demonstration that it is possible for patient organisations and pharmaceutical companies to form real partnerships for the pursuit of common goals."

<http://www.egaweb.org>

<http://www.roche-trials.com>

<http://www.ecpc-online.org>

<http://www.who.int/mediacentre/news/releases/2006/pr25/en/index.html>]

#### **OCTOBER 18 2006, ITALY, GERMANY, NETHERLANDS, SWEDEN**

The Utrecht-registered **EUROPEAN CANCER PATIENT COALITION (ECPC)** expressed some disapproval of a new multi-stakeholder, Roche-financed campaign called **CANCER UNITED**. In an article entitled 'Concern over cancer group's link to drug firm', published by the UK newspaper, The Guardian, on October 18th 2006, Lynn Faulds Wood, chairperson of the **ECPC**, stated that she was listed as a member of the campaign's executive board without her agreement. She was quoted as saying: "We have reservations about the transparency of the Cancer United initiative, which appears to have only one funder". The article also mentioned that a group of Members of the European Parliament (MEPs) had withdrawn their support for the venture. The Guardian then published a number of letters in response. One, on October 24th 2006, was co-signed by Tom Hudson, Chairman of the Milan-based **EUROPA UOMO**, by Ingrid Kössler, President of the Sundbyberg-based **BRÖSTCANCERFÖRENINGARNAS RIKSORGANISATION (BRO)** [Swedish Breast Cancer Organisation], and by Anita Waldmann, President of the Berlin-based **MYELOMA EURONET**. The letter stated: "Recent criticism of the funding of a new campaign called Cancer United is unfounded and disappointing. To suggest that the focus of the campaign is the marketing of new drugs is very wide of the mark. We would not be part of such an initiative. We need one standard of care for all European

cancer patients.”

[<http://www.ecpc-online.org>

[<http://www.cancerunited.org/pan-european-campaign.html>

[<http://society.guardian.co.uk/health/story/0,,1924747,00.html>

[<http://www.guardian.co.uk/letters/story/0,,1929751,00.html>

[[http://www.cancerworld.org/cancerworld/home.aspx?id\\_sito=4&id\\_stato=1](http://www.cancerworld.org/cancerworld/home.aspx?id_sito=4&id_stato=1)

[<http://www.bro.org.se/index.asp>

[<http://www.myeloma-euronet.org>]

#### **OCTOBER 17 2006, BELGIUM**

A positive outcome came from an October 16th meeting in Brussels between Viviane Reding, European Commissioner for Information Society and Media, and Yannis Vardakastanis, President of the Brussels-based EUROPEAN DISABILITY FORUM (EDF). The Commissioner told Mr Vardakastanis that she recognised that the accessibility of information and communication technologies (ICT) for people with a disability should be an EU priority. Specifically discussed at the meeting were measures that could build upon the Riga Ministerial Declaration on e-Inclusion adopted in June 2006 by 34 European countries. The Declaration commits participant nations to promoting an inclusive and barrier-free 'Information Society' which fosters social and economic inclusion, and which includes a special focus on people with a disability.

[[http://www.edf-feph.org/en/news/press\\_co.htm](http://www.edf-feph.org/en/news/press_co.htm)]

#### **OCTOBER 13 2006, IRELAND**

A major conference on adult gliomas (brain tumours), organised by the Dublin-based **IRISH CANCER SOCIETY** and sponsored by Schering Plough Pharmaceuticals (Ireland), was held in Dublin on October 13th 2006. Neurosurgeons, pathologists, radiologists, and medical oncologists presented significant advances in how brain tumours are treated. The conference emphasised that modern imaging techniques, the latest surgical procedures, and different approaches to radiotherapy and chemotherapy can all prolong survival. One of the main conclusions reached at the event was that the numbers of neurosurgeons in Ireland needs to be at least doubled to help cope with patient need. Ireland presently has no more than nine neurosurgeons, and all are located in either of only two cities—Dublin and Cork.

[<http://www.cancer.ie>]

#### **OCTOBER 12 2006, AUSTRALIA**

The Camberwell, Victoria-based **CHRONIC ILLNESS ALLIANCE (CIA)** makes a request: “The state of Victoria can now offer a wide range of self-management programmes for people with a chronic illness. The Government, healthcare professionals, and consumers all have a strong interest in these programmes. Most of the programmes, however, are aimed at older people, and relate to diabetes, heart conditions, and so on. Meanwhile, the **CHRONIC ILLNESS ALLIANCE** receives requests for information about programmes suitable for young people (whether of school age or young adults), and for programmes which concentrate on issues that arise during the transition from paediatric to adult care. Current programmes are not particularly suitable for young people, because they are not directed at the types of illnesses that young people face, and do not look at the problems they face. The **CIA** would like to hear from anyone who is aware of self-management programmes for younger people with a chronic illness, and programmes that deal with transition issues—especially if such programmes have been evaluated”. Contact Christine Walker: [christine@chronicillness.org.au](mailto:christine@chronicillness.org.au).

[<http://www.chronicillness.org.au>]

#### **OCTOBER 12-20 2006, USA**

The week October 12th to October 20th 2006 was national action week for the **BONE AND JOINT DECADE (BJD)**, a global, multidisciplinary initiative promoting the care of people with a bone or joint disorder. The **OKLAHOMA ARTHRITIS NETWORK**

(OAN), a state-funded, multi-stakeholder initiative, circulated a list of evidence-based, self-management, education and physical activity programmes available in the state. However, the OAN also noted a need for more programmes of a similar nature.

[<http://www.boneandjointdecade.org>  
<http://www.health.ok.gov/program/aepj>]

**OCTOBER 10 2006, SOUTH AFRICA**

October 10th 2006 was World Mental Health Day The Johannesburg-based **SOUTH AFRICAN DEPRESSION AND ANXIETY GROUP (SADAG)**, the country's largest mental health group, marked the occasion by organising a number of events focused on the issue of suicide risk—the leading, and fastest-growing, cause of death among 15- to 24-year-olds in South Africa.

[<http://www.sadag.co.za>]

**OCTOBER 10 2006, UK**

London-based **DIABETES UK** joined the consumer association **WHICH?** and a range of other charities and organisations in writing to Ofcom, the UK's independent regulator and competition authority for communications industries. The health advocates were demanding a measure that might assist in the prevention of obesity among the young: a nightly 9pm 'watershed', before which the advertising of 'unhealthy' food should not be permitted on UK television. **DIABETES UK** was concerned to add its impetus to the request because figures from the 2005-2006 Quality and Outcomes Framework (QOF) for England, published on September 28th 2006 by a government-agency, The Information Centre, indicate that diabetes prevalence has jumped from 3.3% to 3.6% in just a single year. "These figures show that diabetes is one of the main health challenges facing us today—and the problem is getting worse all the time. Diabetes is a serious condition that can lead to blindness, kidney failure, heart disease, stroke, and nerve damage, and which can result in amputation," insisted Douglas Smallwood, Chief Executive of **DIABETES UK**.

[<http://www.diabetes.org.uk>]

**OCTOBER 10 2006, GERMANY**

The **FÜR DEN BUNDESVERBAND ARBEITSKREIS ÜBERAKTIVES KIND E.V. (BV-AÜK E.V.)**, and the **FÜR DEN BUNDESVERBAND AUFMERKSAMKEITSTÖRUNG/HYPERAKTIVITÄT E.V. (BV-AH E.V.)**, two self-help groups specialising in attention-deficit hyperactivity syndrome (ADHS), announced that they will merge from January 7th 2007. A combined network of 250 local and regional member groups will ensure that the new single entity, the **BUNDESVERBAND ADHS DEUTSCHLAND E.V.**, operates with a Germany-wide geographic reach. The **BV-AÜK E.V.** and the **BV-AH E.V.** believe that the successor will be potent enough to strengthen their existing telephone and information services, and will also be a more effective lobbyist—not just at national, but at European, level.

[<http://www.bv-auek.de>  
<http://www.bv-ah.de>]

**OCTOBER 3 2006, USA**

An August 2006 poll commissioned by San Francisco-based **BREAST CANCER ACTION (BCA)** revealed that 74% of Americans think breast cancer which is restricted to the breast can, or will, be fatal. Despite the billions of dollars invested in breast cancer research, notes Barbara Brenner, Executive Director of **BCA**, efforts have so far failed to produce answers to the most basic questions that women ask upon diagnosis—"Will I die from this?" and "What should I do next?". "We need research focused on finding answers that would allow doctors to predict the spread of breast cancer, determine whether it will become life threatening, and decide the best course of treatment for each woman", argues Ms Brenner.

[\[http://www.bcaction.org/AnswersWanted\]](http://www.bcaction.org/AnswersWanted)

**OCTOBER 2006, NEW ZEALAND**

The Masterton-based **PRADER-WILLI SYNDROME (PWS) ASSOCIATION** has conducted a four-year campaign for access to growth-hormone treatment by New Zealand's PWS patients. Early in October 2006, New Zealand's drug regulatory authority, Pharmac, consulted with the **ASSOCIATION** on criteria for patient access to growth-hormone therapy. The Pharmac Board indicated that it will soon reach a decision on whether the country's PWS patients will be permitted to use such treatment. [\[http://www.pwsa-nz.co.nz/growthhormone.html\]](http://www.pwsa-nz.co.nz/growthhormone.html)

**OCTOBER 2006, UK**

Kernsing, Kent-based Satchwell Prescription Delivery Services (SatchwellPDS) is a new commercial initiative launched by a small group of individuals, including Jim Thompson, CEO of the newly-formed **CENTRE FOR MENTAL HEALTH (CFMH)**, a UK umbrella organisation. Mr Thompson is also the European liaison of the US-headquartered **PARTNERSHIP FOR SAFE MEDICINES**, a coalition of stakeholder organisations interested in the subject of counterfeit medicines. Other founding experts include Dave Titcomb, former head of patient advocacy at Pfizer UK, Graham Satchwell, ex-detective superintendent at the Metropolitan Police, and a leading investigator into counterfeits, and Susan Ma, a former military intelligence and security consultant. SatchwellPDS offers patients an unusual service: it dispenses patients' drug prescriptions with a guarantee that the medicine is 'what it says on the label'. The company also scientifically tests patients' prescription medicines for safety. The initiative has been formed in reaction to growing global concerns about counterfeit medicines. "There is a limited range of medicines available initially. These have been selected because they are some of the most attractive to counterfeiters. The range (details on the website) will expand as the service becomes more established", says Mr Titcomb.

[\[http://www.prescriptiondeliverservices.com\]](http://www.prescriptiondeliverservices.com)

<http://www.centreformentalhealth.org>

<http://www.safemedicines.org>

**SEPTEMBER 29 2006, BELGIUM**

In its capacity as member of the steering committee, the Brussels-based **EUROPEAN PATIENTS' FORUM (EPF)** took part in the first meeting in Brussels of the European Commission's newly-established Pharmaceutical Forum. Co-chaired by Commission Vice-President Gunter Verheugen and Markos Kyprianou, Commissioner for Health and Consumer Protection, the Forum aims to find practical solutions to some of the key structural and public-health issues affecting medicines supply in Europe, notably:

1. How to improve patient information on medicines.
2. How patients can more quickly access new, effective medicines. And ...
3. How governments can get better value for money from medicines.

Members of the **EPF** sit on the three respective working groups established by the Forum. At the September 29th 2006 meeting, the three working groups agreed on strategies for progress. The next Pharmaceutical Forum meeting is scheduled for June 2007.

[\[http://www.europeanpatientsforum.org/index.php?lm3=XRWYSHFJYXEG](http://www.europeanpatientsforum.org/index.php?lm3=XRWYSHFJYXEG) [http://ec.europa.eu/enterprise/phabiocom/comp\\_pf\\_en.htm\]](http://ec.europa.eu/enterprise/phabiocom/comp_pf_en.htm)

**SEPTEMBER 28-29 2006, NETHERLANDS**

The Woerden-based **AIDS AND MOBILITY EUROPE (A & M)** hosted a conference in Utrecht, entitled 'Bridging Policy and Action'. At the conference, **A & M** presented the results of a project it has been conducting for several years. The Commission-funded network has been examining HIV/AIDS-related problems associated with the fast-growing mobility of populations in Europe (particularly illegal immigrants

and sex tourists).

[\[http://www.aidsmobility.org\]](http://www.aidsmobility.org)

**SEPTEMBER 22 2006, UK**

The London-based **AFIYA TRUST** highlighted the difficulties that people with a mental health problem, and who are also of Afro-Caribbean origin, can face when accessing services within the UK's national health service (NHS). The subject formed the theme of a Manchester-located conference entitled 'Stuck in the System', organised by the **TRUST**.

[\[http://www.afiyatrust.org.uk\]](http://www.afiyatrust.org.uk)

**SEPTEMBER 2006, SWEDEN**

The Stockholm-based **EUROPEAN FEDERATION OF ALLERGY AND AIRWAYS DISEASES PATIENTS' ASSOCIATIONS (EFA)** published its European Allergy Patient Manifesto, a political declaration that seeks to draw attention to the growing prevalence of allergy in Europe (and globally). The **EFA** calls for European institutions, national governments, the scientific community, healthcare professionals, and the healthcare industry to work towards countering allergy by:

1. Changing the prevailing cultural attitudes towards allergy.
2. Appropriately adapting healthcare systems and resources.
3. Understanding the nature of allergy.
4. Building programmes to train, educate, empower, and rehabilitate allergy patients.
5. Establishing research projects. And ...
6. Creating an allergy-aware environment for all.

[\[http://www.efanet.org/documents/EFAAllergyManifesto\\_000.pdf\]](http://www.efanet.org/documents/EFAAllergyManifesto_000.pdf)

**SEPTEMBER 2006, USA**

The Boston-based **VON HIPPEL-LINDAU (VHL) FAMILY ALLIANCE** announced a new initiative in tissue banking: it has reached an arrangement with the Rare Disease Initiative of the National Disease Research Interchange (NDRI), and the Office of Rare Diseases (ORD) of the US National Institutes of Health (NIH). The **VHL FAMILY ALLIANCE** states that the new relationship will allow the **ALLIANCE** to encourage VHL patients to donate tissue to the NDRI. In this way, the **ALLIANCE** will be able to help the NDRI gather the blood, urine, DNA, and tumour tissue needed by the medical-research and drug-development communities. Frank, a VHL patient who has donated tissue and blood samples, describes the process as "simple", adding: "I cannot encourage other VHL patients enough to allow tissue donation. It may save the lives of people in the generations to come. We can be a part of that. How wonderful!"

[\[http://www.vhl.org/bank/index.html#forms\]](http://www.vhl.org/bank/index.html#forms)

## **CAMPAIGNS**

**OCTOBER 27 2006, BELGIUM**

Fifteen charities have joined forces to launch the **EUROPEAN NETWORK FOR GLOBAL HEALTH**. This campaign will focus on persuading European governments, charities, and the private sector to put more effort into the task of improving healthcare in resource-poor parts of the world, and—in particular—to work harder to ensure that the Millennium Development Goals (MDGs) are achieved. The UN-sponsored MDGs were adopted in 2001 by all the world's governments. They call for a two-thirds reduction in the deaths of children and infants, and a three-quarters reduction in deaths relating to pregnancy and childbirth, by a target date of 2015. The **NETWORK**, which is co-ordinated by the Brussels-based office of **ACTIONAID INTERNATIONAL**, is supported by a Euros 8.4 million (\$10.7 million) grant from the **BILL AND MELINDA GATES FOUNDATION**. Simon Wright, Project Manager for the

**NETWORK**, says: "The EU and its Member States are already major donors supporting development, but they need to do much more to rescue the MDG targets".

Aside from **ACTIONAID INTERNATIONAL**, the other NGOs involved in the new network are:

- *Belgium*: The Brussels-based **EUROPEAN PUBLIC HEALTH ALLIANCE (EPHA)**, **MARIE STOPES INTERNATIONAL**, and the **STOP AIDS ALLIANCE**.
- *France*: Paris-based **GLOBAL HEALTH ADVOCATES**, and **MÉDECINS DU MONDE**.
- *Germany*: Bonn-based **DEUTSCHE WELTHUNGERHILFE (DWHH)**, and Osnabrück-based **TERRE DES HOMMES (TDH)**.
- *Italy*: Bologna-based **ASSOCIAZIONE ITALIANA DONNE PER LO SVILUPPO (AIDOS)**, and **CENTRO DI EDUCAZIONE SANITARIA E TECNOLOGIE APPROPRIATE SANITARIE (CESTAS)**.
- *Spain*: Madrid-based **FEDERACIÓN DE PLANIFICACIÓN FAMILIAR ESTATAL** [Spanish Family Planning Federation], and the **PLATAFORMA ONG SIDA Y DESARROLLO (FPFE)** [AIDS and Development Platform].
- *UK*: London-based **INTERACT WORLDWIDE**, and **TB ALERT**, and Brighton-based **INTERNATIONAL HIV/AIDS ALLIANCE**.  
[[www.globalhealthnetwork.eu](http://www.globalhealthnetwork.eu)]

#### **OCTOBER 6 2006, BELGIUM, FRANCE, ITALY, NETHERLANDS**

Five international organisations issued a 'Joint Declaration on Relevant Health Information for Empowered Citizens'. The five were:

- The Brussels-based Association Internationale de la Mutualité (AIM), which represents the interests of Europe's not-for-profit health insurers.
- The Brussels-based **EUROPEAN CONSUMERS' ORGANIZATION (BEUC)**.
- The Amsterdam-based health advocacy group, **HEALTH ACTION INTERNATIONAL (HAI)**.
- The Verona-based global network of journals and other publications, **INTERNATIONAL SOCIETY OF DRUG BULLETINS (ISDB)**.
- The Paris-based **MEDICINES IN EUROPE FORUM**.

The new Declaration expresses these groups' opposition to the Pharmaceutical Forum [Editor: see above], a European Commission initiative. The Declaration authors argue that the Forum could lead to direct-to-consumer medicines advertising (DTCA) becoming legally permissible in the EU: "The aim of the European Commission and its pompous Pharmaceutical Forum is actually to support EU pharma companies, and—ultimately—remove the ban on DTCA ... The public do not need information on medicines that is directly or indirectly supported by drug companies, simply because such information cannot be comparative". The Declaration goes on to say that the ban on DTCA in the EU must be maintained and applied strictly (whether on advertising proper, or on pharmaceutical company information about medicines and diseases).

[<http://www.aim-mutual.org>

<http://www.beuc.org>

[http://www.haiweb.org/01\\_about.htm](http://www.haiweb.org/01_about.htm)

<http://www.isdbweb.org>

<http://www.prescrire.org/aLaUne/dossierEuropeCampagneChronoEn.php>]

#### **OCTOBER 2006, BRAZIL**

The Cidade Nova-headquartered **ANSIEDADE E PÂNICO, ORGANIZAÇÃO DE INFORMAÇÃO E APOIO A RECUPERAÇÃO (GRUPO APOIAR)** [Anxiety and Panic Organization for Information and Support to Aid Recovery] launched a new campaign about anxiety and depression among Brazilian women. **GRUPO APOIAR** emphasises that these conditions can strike women at any age. The new campaign seeks to educate the public into realising that treatment is available.

[<http://www.apoiar.org.br>]

## PUBLICATIONS

### **OCTOBER 23 2006, USA**

In its first four years, the Geneva, Switzerland-based **GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS, AND MALARIA** (more commonly known as the **GLOBAL FUND**) has approved over 360 grant programmes in 132 countries, valued at \$5.6 billion [€uros 4.4 billion]—of which over \$2.7 billion [€uros 2.1 billion] has already been disbursed. As this *HSCNews Bulletin* was being issued, the Global Fund's board announced at a meeting in Guatemala City that it was on the verge of announcing the name of the **FUND**'s new Executive Director. In advance of the development, the Washington-based **CENTRE FOR GLOBAL DEVELOPMENT (CGD)** brought together its own working group of 21 experts from around the world to identify what the **CGD** considers should be the new Executive Director's most important goals. The working group's report, *Challenges and Opportunities for the New Executive Director of the Global Fund: Seven Essential Tasks*, was released on October 23rd 2006. The 47-page document, freely available in PDF from the address below, should be of interest to anybody concerned with the global response to the three epidemics (which, together, are estimated to kill 16,000 people a day).  
[\[http://www.cgdev.org/section/initiatives/\\_active/hivmonitor/globalfundwg\]](http://www.cgdev.org/section/initiatives/_active/hivmonitor/globalfundwg)

### **OCTOBER 10 2006, USA**

*Health Information Technology in the US: the Information Base for Progress* was published on October 10th 2006 by the Princeton, New Jersey-based **ROBERT WOOD JOHNSON FOUNDATION**. Written by a team of researchers from the Massachusetts General Hospital Institute for Health Policy, and the George Washington University's School of Public Health and Health Services, the 84-page PDF report shares the results of a study into the barriers that hinder the adoption of electronic health records (EHRs) in the US. The report's authors found that EHR systems are not widely embraced across the country, and offer a series of recommendations for improving implementation.  
[\[http://www.rwjf.org/files/publications/other/EHRReport0609.pdf\]](http://www.rwjf.org/files/publications/other/EHRReport0609.pdf)

### **SEPTEMBER 2006, BELGIUM**

The Brussels-based **MADARIAGA EUROPEAN FOUNDATION** issues a series of publications written under the imprimatur of its Anna Lindh Programme on Conflict Prevention. Established in 2004 with the backing of the Bank of Sweden's Tercentenary Foundation, the Programme aims to promote a stronger role for the EU as a global actor in conflict prevention, and emphasises the necessity for the development of a structured dialogue between the public and private spheres, civil society, and academia. The Programme's latest book, *Health and Conflict Prevention*, launched in September 2006, brings together writers from politics, academia, and the medical profession. Providing an innovative perspective on health as a potential issue of diplomacy, the publication's subject areas include: 'From Mad Cows to Avian Flu—European Responses to Avert Medical Catastrophes and Disease Outbreaks'; 'Managing Threats to Health and Security'; and 'Combating SARS in China—Experiences and Efforts to Coordinate Future Prevention'.