

Japan to legalize the pill

The Japanese government looks likely to lift a ban on the oral contraceptive pill next year following a decision by the subcommittee of the Central Pharmaceutical Affairs Council, which is affiliated with the Ministry of Health and Welfare (Koseisho), to approve its legalization.

A study group of the council, which consists of six organisations such as Japan Association of Obstetricians and Gynecologists and the Family Planning Federation of Japan, has set up provisional guidelines for legalization of a low-dose pill, which will be submitted to the council's plenary session this month.

The government considered giving the go-ahead back in 1992, but deliberations were halted by concerns that legalisation of the pill may reduce condom use and lead to rapid proliferation of sexually transmitted diseases (STD). Over 600 million condoms are sold annually in Japan, making this the most popular method of birth control. In addition, the Japanese pharmaceutical company, Taiho Pharmaceuticals, submitted an application to Koseisho at the end of October for approval to market a female condom.

The Japanese government was also said to be concerned that the availability of the pill may further decrease the nation's birth rate.

The guidelines require that a physician prescribing the pill give a detailed explanation of the risk factors involved to patients as well as advising on the prevention of STD. They also state that patients should be tested for AIDS, hepatitis B and syphilis, provided that they have consented to such testing. Women with breast cancer, cardiovascular and liver diseases and prepubescent girls will be banned from taking the pill.

High-dose pills are legal in Japan for treating menstrual irregularities. They are believed, however, to be taken by more than 200,000 Japanese women for contraceptive purposes.

Japan is the only industrialized country in the world that has not approved the use of the pill.

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Reducing embryo implants in IVF

The growing success of *in vitro* fertilization (IVF) techniques in producing so-called test-tube babies in Britain has itself created a new set of problems, namely the difficulties caused by multiple pregnancies.

Since the establishment of the Human Fertilization Embryo Authority (HFEA) in 1990, it has been illegal to implant more than three fertilized embryos in a woman wishing to become pregnant. But with an increasing number of multiple births resulting from IVF procedures, pressure is growing for this to be reduced to two.

"We want to give people a healthy baby," says Janice Kerr, team leader with the assisted conception Unit at Leeds General Infirmary. "But as pregnancy and implantation rates get better, so the medical and emotional difficulties caused by multiple births—something that we try to avoid wherever possible—are coming to be more and more of a problem." Increasing financial pressure on parents is also a concern.

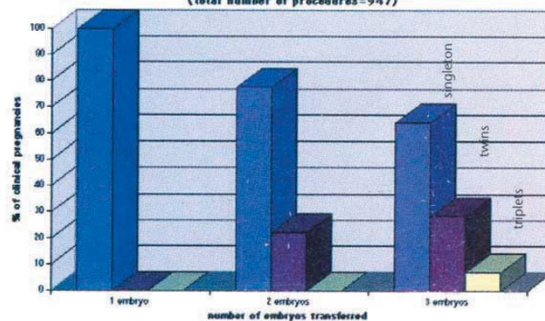
A survey of couples who have received treatment at the Leeds unit revealed that although 85 percent of those with an ongoing triplet pregnancy delivered three babies, 13 percent lost all their babies, primarily because of premature delivery. In general, the pregnancy rates among women receiving two embryos were almost the same as those receiving three.

The latest annual report of the HFEA,

published last month, reveals that in the 15 months up to April 1996, almost one-third of the 5,542 test-tube births were multiple births involving twins, triplets or quads, compared to around one quarter in 1988.

Any move to reduce the legal maximum of implanted embryos is likely to meet with considerable opposition from clinics, particularly those dealing with foreign patients, which treat a higher proportion of older women. For those over 40, for example, the

Choice of multiple pregnancy according to number of embryos transferred at LCI in 1996 (total number of procedures=947)



chances of a successful pregnancy are considerably increased by using a higher number of embryos, and some clinics even want to be able to use more than three.

Although there are currently no plans to change the rules on the number of embryos that can legally be implanted, Ruth Deech, chair of the HFEA and principal of St Anne's College, Oxford, says that the HFEA is keeping the issue "under active consideration."

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Japanese donor card shortage

Since Japan passed its new organ transplant law, allowing transplantation of organs from brain-dead donors, in October, only 300,000 donor cards have been printed in Japan. Both the Japan Society for Transplantation (JST) and the Japan Organ Transplantation Network (JOTN), which issues the donor cards, say that this is not enough to overcome the strict regulations of the transplant law. According to JST, distributing several hundred thousand cards would only get ten donors per year, and that at least a hundred million cards would have to be distributed in order to recruit a sufficient number of donors.

Unfortunately the card system, which is being overseen by the Ministry of Health and Welfare and independent organizations supporting organ donation, is far from being a national operation. Cards are currently being handed out in driving schools, public offices and libraries, and according to JOTN, they "might get distributed at some regional hospitals." "It's like spraying water in the desert," says a JST spokesperson, "but we'll just have to keep trying."

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