

by the use of gas centrifuges. The communiqué issued after the meeting is heavy with phrases such as "questions of substance still to be decided". What seems to have happened is that the ministers of the three countries—two from each side—were presented with a report on progress so far towards the solution of technical and political problems together with a draft of a treaty. Some points in the documents prepared by the officials have plainly been accepted by the politicians, although the communiqué says that the draft treaty will have to be amended in the light of the discussions at Bonn. Enough progress towards an agreement seems to have been made for the three governments to have agreed that industrial enterprises—including public corporations such as the British fuel manufacturing company—should be brought into the discussions. (From the beginning, the intention has been that industrial companies should be tightly integrated with the plans for making centrifuges.) But there is no longer any of the optimism which allowed people to say, as recently as March, that it might be possible to sign an agreement in principle at the meeting which took place earlier this week.

What lies ahead? Although it has plainly been something of a surprise that the negotiations have turned out to be as tough as Monday showed them to be, cheerfulness is still the order of the day among the negotiators. Most probably it is a combination of technical and political considerations which has made the going unexpectedly difficult, and certainly there will be great rejoicing among those who make and sell fissile materials when eventually it is possible to understand the commercial advantages of the bulk production of uranium-235 by gas centrifuge. Certainly there seems to be no doubt that the intervention of Euratom has been unimportant. Nobody seems to be concerned at the clarion call from Brussels that the use of this technique should be organized on an international basis, preferably within the EEC. This, however, probably explains the statement in the Bonn communiqué that there would be consideration for the participation of other governments once the tripartite enterprise had become a going concern.

## DRUG CONSUMPTION

### Eating More Pills

PEOPLE seem to have an insatiable appetite for pills, and the richer they are the more they take and the more they are prepared to spend on medicines in general. Doctors seem equally happy to prescribe more medicines. These apparently universal trends, which carry the risk of sickness through excessive use of drugs as well as waste of money, prompted the Swedish Government in the spring of 1964 to suggest that the World Health Organization should make a survey of European drug consumption. The report of a pilot survey in six European countries—Austria, France, Hungary, the Netherlands, Sweden and the United Kingdom—will do nothing to dispel the Swedish Government's alarm.

In all six countries, the increase in drug consumption and its cost is now a cause for anxiety. The WHO consultants say that the amount of information they were able to collect was insufficient to suggest how best to obtain the optimum level of drug consumption

or to make strict comparisons of the situation in different countries.

As would be expected, there is considerable variation in the pattern of drug consumption not only between but within the six countries. In general, urban communities consume and spend more on medicaments and medical care than their rural counterparts. The people of Budapest spent 349 florints on medicines in 1965, while the average spending in the rest of Hungary was 200 florints. There are also considerable differences in the amount spent on drugs in the six countries and the types of drugs used for particular diseases.

The rise in cost of prescribed drugs in the past ten years has generally outstripped the increase of national incomes, and is more evident in general practice than in the hospitals. One common cause is the tendency of general practitioners to prescribe proprietary drugs. The clearest example of this trend is in Britain. In 1949 the average cost per ingredient in the 202 million prescriptions was 16.4 pence, but by 1965 the comparable figure had increased to 84.4 pence. And in Sweden, the average cost per prescription rose from 6.49 to 12.36 kronor between 1955 and 1964. The increasing consumption of proprietary drugs—in Britain in 1964–65 they constituted 75 per cent of all drugs prescribed—is familiar enough. The report notes, for example, that several committees in Britain have commented on the fact that the medical profession, while stoutly defending the right of each doctor to have maximum freedom to prescribe any drug for his patient, too often succumbs to advertising and ends up by prescribing costly proprietary medicines for which there are cheaper alternatives.

Among the six countries surveyed, the number of prescription items per head of the population correlates with the number of doctors per head of the population. There was no correlation between consumption of prescription of over-the-counter drugs with the number of pharmacies. The survey also could find neither evidence that rigid government control of manufacture or marketing of drugs influences total consumption, nor evidence for the assumption that the availability of a large number of drugs affects total consumption. On the other hand, a liberal policy of admitting drugs to the market increases the risk of consumption of less effective drugs. The report also calls for more non-commercial communication about drugs in addition to the ever growing "commercial communication"—its euphemism for advertising. This is steadily intensifying in Europe, although it has not yet reached the levels in the United States, where the drug companies spend about \$4,000 a year per physician.

## PHARMACEUTICALS

### Keeping Watch on Drugs

It will be interesting to see whether the Dunlop Committee becomes known as the Frazer Committee now that Sir Derrick Dunlop has resigned the chairmanship of the British Government's Committee on Safety of Drugs and Dr A. C. Frazer has succeeded him. Certainly that is likely to be the most noticeable change. Sir Derrick, who has been chairman of the committee, which acts as a watchdog for the British Government on the new drugs and formulations put on the market