

director of British and Commonwealth Shipping.

The announcement of the setting up of the new company said that Celltech has reached an agreement with the Medical Research Council (MRC) that provides a "framework" within which the company will have access to research carried out in the council's laboratories. It has also come to an arrangement with the National Research Development Corporation, the public corporation which is the principal repository of patent rights arising from research carried out in university and public laboratories in the United Kingdom. Plainly the negotiation of these agreements, no details of which have been made public, has taken up some of the time that has elapsed since the Celltech project was first announced nearly four months ago (see *Nature* 24 July).

Veal hormones

Total ban proposed

Brussels

The Commission of the European Economic (EEC) has lost no time in taking steps to ban the use of all natural and artificial hormones in livestock — a draft regulation is due to come into effect on 1 January 1981. At the Council of EEC Agricultural Ministers on 30 September the Commission promised to respond speedily to a request to draw up proposals on the use of hormones and anabolic steroids. This week's Agricultural Council meeting on 10 and 11 November was to be given an account of the Commission's proposals, but will hardly have had a chance to digest them.

Although the ministers have committed themselves to speedy action there are several hurdles ahead of them. The proposals are far reaching — covering all meats intended for human consumption (veal, pork, beef and fowl). The only exception is for the use of natural hormones in therapeutic treatment, which must be carried out under strict supervision. Furthermore, the marketing of animals or carcasses containing residues above a certain level (yet to be specified) will also be prohibited.

None of this will be easy to enforce. The commission still has to devise a foolproof way of controlling the supply of hormones to vets, ways of monitoring animals from the farm to the abattoir, and ways of checking meat on retail sale. These controls are bound to involve a system of identification so that the animal's origin can be traced if the regulations are broken.

The commission's proposals will be particularly welcome in Italy, where in September a magistrate imposed a nationwide ban on veal sales and the sale of twenty-two brands of baby foods containing veal was suspended. The British position is one of traditional restraint, partly due to unwillingness to yield too

much power to Brussels and partly due to scepticism over the implementation of EEC regulations. This scepticism is shared in Germany, where laws on the import of meats have already been tightened.

Jasper Becker

Medical research

Born-again basics

The UK Medical Research Council (MRC) and the departments of health in London and Edinburgh are making a valiant effort to defend the transfer of Rothschild contract research monies back to the control of the MRC (*Nature* 23 October, p.669). Last week, on the publication of the MRC annual report for 1979-80, MRC secretary Dr J.L. Gowans said that his council is expected to double its commitment to "health services research" in the next five years. And Professor Arthur Buller, Chief Scientist at the Department of Health and Social Security, said that his department had pressed the MRC into the deal, rather than the other way about.

The doubling of health services research is said to be the MRC price for gaining control of the £13.85 million per annum of Rothschild cash. Since 1972 and the adoption of the Rothschild customer-contractor principle, these funds have been controlled by the health departments but spent by MRC. Under a concordat reached in 1973 between the departments and the MRC they were spent exclusively on biomedical research. Each year the departments defined their interests in a voluminous report under headings such as "blood", "mental illness", "cancer and infections" and so on; and MRC responded, detailing exactly how its biomedical research was relevant. Each year, the health departments passed the Rothschild allocation to MRC, duly increased for inflation.

Health services research, which involves social and economic as well as medical matters (for example, does amniocentesis yield a net benefit?) was, strangely, not covered by the 1973 concordat — so that the £2 million or so a year of health services research at present undertaken by the MRC was in fact funded with money outside the Rothschild principle.

The health departments themselves have thus pressed MRC into the new arrangement under which MRC must spend an extra £2 million on health services research by 1985. Professor Buller, no fan of the 1973 arrangement, considers this a net gain for health services researchers, who might expect, for example, two or three new MRC units in the area by 1985.

Both Professor Buller and Dr Gowans, however, insist that the definition of health services research must be broad, and that the creation of new units will depend on the availability of good people to head them. The agreement is to be reviewed in five years, when the health departments could

MRC report in brief

The 1979-80 report makes the following specific points:

Neutron therapy. Another £1½ million is needed by the end of this year to buy and set up a new cyclotron for neutron therapy research at Clatterbridge Hospital, Liverpool — which would thus overtake the Hammersmith Hospital, London, in this work. The cyclotron would be outside the MRC budget, and would be funded largely by the Imperial Cancer Research Fund, the Mersey Regional Hospitals Authority, and a Liverpool cancer research fund. But quotations for the equipment expire in December, when inflation would probably put the cyclotron out of reach.

Tropical medicine. The Tropical Medicine Research Board of MRC met last Friday for the first time since 1979, having cancelled two meetings for lack of money for research grants since cutbacks in Overseas Development Administration spending in 1979. No new projects could be funded — and overseas cooperation is threatened by the new round of government spending cuts. Recruitment into the field has halted.

Budgets. Total expenditure by MRC in 1979-80 was £74 million, including £57 million from the Department of Education and Science and £12.7 million of Rothschild money. The council notes with approval the stability promised in the most recent public expenditure plans, but is apprehensive about the effects of cash limits in inflationary times. Anxious to increase its room for manoeuvre, the council says it has deliberately reduced its commitments to long-term research programmes. During the year, it opened two new research units and closed seven.

Private practice. The council has confirmed its longstanding policy that members of the MRC research staff should not be allowed to engage in private medical practice. The review was made necessary by the decision that physicians working for the National Health Service might take on private patients. The MRC council says that private practice would be incompatible with full-time research appointments, promises to secure adequate salaries for those members of its staff concerned and hopes that British universities will follow a similar policy.

Robert Walgate

claw back the money if MRC has not performed according to plan. MRC should undertake "brick upon brick" health services research, says Buller, without the constraint of contracts tied to particular policy objectives. The subject is just at the point of requiring such academic treatment, he believes, and it is best handled under the dual support system. The departments' own £20 million of research money will continue to be spent on pragmatic matters.

Robert Walgate