## Opposition to new marijuana research rules

Dozens of scientists, lawmakers, entertainers and patients have protested to the Clinton administration that its new guidelines for medical research involving marijuana are too cumbersome, and will only delay studies seeking to find out whether the illegal drug is valuable for pain relief, nausea and other therapeutic uses.

The administration announced last May that it would ease the restrictions on "research grade" marijuana, making it available to research scientists (*Nature Med.* **5**, 721; 1999). Research protocols require the oversight of the National Institute on Drug Abuse (NIDA), the Food and Drug Administration and the Drug Enforcement Administration—which the complainants argue is a complicated and bureaucratic procedure that will keep the research from moving forward "as expeditiously as possible."

Thus, in a letter to Health and Human Services Secretary Donna Shalala, nearly three dozen members of Congress, actress Susan Sarandon, comedian Richard Pryor, scientist Stephen Jay Gould and former Surgeon General Joycelyn Elders, among others, calling themselves the Marijuana Policy Project, complained that the new rules, which came into effect on 1 December 1999, "place a much greater burden on medicinal marijuana researchers than on drug companies that develop and study newly synthesized pharmaceuticals."

But NIDA Director Alan Leshner told *Nature Medicine* that the new rules were designed to streamline the process—not hamper it—and described the policy as "nothing compared to trying to get a [typical] grant from NIH." He adds, "The policy decision was made to expand research opportunities. Some might find the process cumbersome. Do I think it's cumbersome? No. Do I think we haven't got it smoothly operating yet? Absolutely. There is no question we will smooth out the process as it goes."

Leshner admits that since changing the policy there have only been two serious research inquiries: "We expected substantially more interest, but it seems clear there is relatively little interest in the scientific community."

**Marlene Cimons, Washington, D.C.**

## Survey shows Australian scientists' discontent

Biomedical research in Australia is characterized by poor job security, low salaries and a gloomy outlook, a new survey has found. The Australian Society for Medical Research (ASMR) Workplace Survey, which attracted 266 responses, including 32 from Australians based overseas, revealed concern over lack of research funds and poor career prospects.

The study showed that more than one-third of Australia's biomedical researchers were planning to change positions in the next year, at home or abroad, in quest of more stable employment and funding.

Most Australian researchers seeking overseas work said they wanted to broaden their scientific experience, find a career path and learn new research techniques—priorities ahead of boosting their pay packet. But once a position overseas has been secured, the higher foreign salaries make it difficult to leave, according to the convenor of the annual ASMR conference, Jason Smythe: that is why one-quarter of those overseas have been away from home for five years or more.

Most overseas researchers are based in either the UK or the US, with a small number in Canada and Germany. The survey revealed that nearly half the researchers within Australia had an annual salary range of A$40,000–60,000 (US$25,000–40,000) and only 28% exceeded A$60,000. The opposite is true of those overseas: 53% are earning A$60,000 or more.

Not only is the money better overseas, but also there is a better prospect of its continuing to flow. According to Smythe, security in research is diminishing in Australia, with tenured positions becoming hard to come by as universities switch to agreements that require ratification every few years.

Most researchers in Australia are on government-funded grants of three or fewer years, with no guarantee of renewal, compared with the more commonplace five-year grants in the US and UK. The ASMR hopes that the Australian Government's promise to double medical research spending over the next five years will stop the 'brain drain'.

**Rada Rouse, Brisbane**

## UKXIRA delays potential xenotransplant trial approvals

Investigators wishing to carry out clinical trials of xenotransplantation in the UK will have to wait until after June this year to receive approval from UKXIRA (the United Kingdom Xenotransplantation Interim Regulatory Authority), George Griffin, professor of infectious diseases at St Georges Hospital, London, and head of the UKXIRA's Infection Surveillance subcommittee, told attendees last month at a press conference to launch the group's second annual report.

Furthermore, Griffin advised interested parties to submit any applications before this time, in order to engage in discussions with the UKXIRA panel. But because some aspects of the approval system remain unresolved—namely, the involvement of the Public Health Laboratory Service (PHSL) in disease surveillance—many believe that the UKXIRA will not be ready even by midyear. Griffin was less than forthcoming when one researcher, eager to begin trials, pressed him on how likely it is that the necessary monitoring systems will be in place by then, and would only comment that "discussions are underway" with the PHSL on whether they can take on the responsibility.

The subcommittee's draft document on surveillance attracted media attention recently, since it contains the proposal that women xenotransplant recipients must agree not to have children. The final report is due out in June, and Griffin made it clear that any patients chosen for trials will be carefully selected. He told *Nature Medicine* that the first ideal candidates are likely to be young healthy males, unlikely to have children, with a desire to comply with surveillance programs and thereby advance the knowledge of medical science.

The UKXIRA is the first level of regulation that must be passed before a trial application is handed to the Medicines Control Agency and then to local ethical review boards. So far, the UKXIRA has received three trial applications; the first was withdrawn and the other two were returned to the investigators because of "insufficient supporting evidence." A copy of the annual report is available at http://www.doh.gov.uk/ukxira.htm

**Karen Birmingham, London**