

## FROM THE PRESS

### Guidelines for stem cell therapy

Driven by the mushrooming of clinics claiming to use stem cell therapy, the Indian Council of Medical Research and the Department of Biotechnology are finally negotiating a single set of guidelines. There is no supervision of procedures for preparing stem cells or clinical follow-up, says Vasantha Muthuswamy, head of basic medical sciences at the ICMR.

In 2002, the ICMR announced a policy permitting therapeutic cloning and encouraging stem-cell research. The previous year the Department of Biotechnology (DBT), which belongs to the science ministry, had also issued guidelines, and some clinics had exploited these to begin clinical treatments.

No one has a clear idea of what clinical studies are being carried out and how they are evaluated, admit the ICMR and the DBT.

Hyderabad seems to be a centre of stem cell therapy. The privately owned L V Prasad Eye Institute has used transplanted stem cells to treat more than 240 patients, two other private hospitals use them to treat damaged heart muscle, and other hospitals and clinics plan to use stem cells to regenerate the liver in cirrhosis sufferers and the pancreas in diabetics.

In March, a top heart surgeon at New Delhi's All India Institute of Medical Sciences (AIIMS) reportedly used stem cells derived from bone marrow to treat 35 patients during bypass surgery. Panangipalli Venugopal said that he and his colleagues had also administered stem cells to patients with cerebral palsy, muscular dystrophy and stroke.

"If the nation's premier medical institute did not ask our permission for such therapy, how can we blame private clinics?" asks Muthuswamy.

The quality of cells being used in therapy is of major concern, as is the failure of clinicians to understand stem-cell biology. "A lot of basic research is needed and the safety and efficacy of therapy must be experimentally proven in animals," Polani Seshagiri, a stem-cell biologist at the Bangalore-based Indian Institute of Science, told Nature.

**K S Jayaraman. Indian regulations fail to monitor growing stem-cell use in clinics. *Nature*, March 17, 2005.**

### Re-registration of doctors

A proposal by health minister Anbumani Ramadoss that doctors should take exams every five years to keep themselves updated on medical advances and reregister to retain their licenses has triggered debate in the medical community.

The Indian Medical Association said that it favoured voluntary programmes of continuing medical education instead and that a qualifying exam for doctors to reregister has "no logic."

Doctors in academic institutions have emphasised the need for structured continuing medical education that leads to credits.

"But the first move should be to make continuing medical education mandatory," said Dr Sanjiv Lewin, associate professor of paediatrics at St John's Medical College in Bangalore. "Today, a doctor who's got a degree and registration doesn't have to pick up a book or a journal ever again."

**Ganapati Mudur. Indian proposals to revalidate doctors get mixed reception *BMJ* April 2, 2005.**

### IMA approves the one-child norm

After years of debate, the Indian Medical Association (IMA) has finally ratified the controversial one-child norm for India, telling the Union government that population explosion in the country has assumed "gangrenous proportion and that it needs immediate amputation".

IMA President Sudipto Roy told reporters on the sidelines of the meet that though the issue was one of the key points in the agenda of IMA meets for over two decades, it had been considered a "harsh" means of population control till now.

But a high level delegation of the IMA recently visited China and was impressed by the way the country has managed its population growth so effectively.

**Press Trust of India. IMA ratifies 'one-child' norm for India. *Hindustan Times*, April 17, 2005.**

### Doctors and the adoption racket

When five people were arrested in Chennai for selling over 350 children to an adoption agency, it was just the tip of the adoption racket iceberg. Trade in inter-country adoptions appears to be big business - and medical professionals are sometimes involved. Some private clinics are involved in shady deals. "Doctors are not supposed to place children in adoption. Only licensed and recognised agencies can do adoptions. Yet we have been informed that there are doctors who have even given the child's birth certificate with the name of the adoptive parents," says Kaumudi Telang from the Mumbai-based Indian Association for the Promotion of Adoption.

In hospital delivery rooms, mothers have been told that the baby was stillborn and the infant spirited away. Agencies operate from within hospital premises in New Delhi, according to a Delhi government inquiry. Babies missing from government hospitals have been traced to adoption agencies. For instance, in 1999, four babies missing from the Salem General Hospital were found at an agency in Chennai.

Many unwed pregnant mothers are directed to short-stay homes by government hospitals after an abortion has failed or is too late. Usually, the babies are taken away for adoption and the women encouraged to leave the home.

**The adoption market. *Frontline*, May 21-June 3, 2005.**