MINUTES OF 19th ANNUAL GENERAL MEETING

18th October 2007
THE MEDICAL SOCIETY of LONDON. CHANDOS ST. LONDON W1

PRESENT


APPOLOGIES FOR ABSENCE
Jacqueline Birtwhistle, Katharine Garrow, William Oddling-Smee, Les Rose.

MINUTES OF 18th AGM AND MATTERS ARISING

It was noted that Anne Raikes was reported as absent whereas she was present.

Membership The discussion about the size of HealthWatch was revisited. Some members feel we would have more power if we were larger, others believe our size is not important so long as we remain independent and provide information for press radio and TV. All members are conscious that we need to attract younger members to ensure that Healthwatch can continue in the future. There was some discussion about methods of attracting interested young people but no consensus emerged.

CHAIRMAN’S REPORT

We are small, but we are not insignificant

I will start with a quotation from an editorial in the Journal of the American Medical Association of November 15 1913 entitled Braughan’s pellagra remedy: worthless nostrum sold under fraudulent claims. “Nostrum fakers are damned. It is they who feed carrion-like on the fears of suffering humanity. To those stricken with a well-nigh incurable disease they hold out the hope of a sure cure.” This remedy contained quinine and iron salts, which give a bitter taste, which would suggest to the pellagrin that it was good medicine. Little seems to have changed over the last century, and HealthWatch seems to be needed as much as ever.

We publish this newsletter four times a year, and occasional position papers (with one revised paper and three new ones published this year), as well as maintaining a website with an archive of all past newsletters. In addition to this we have recently written to organisations such as the Medicines and Healthcare products Regulatory Agency and the Royal College of Obstetrics and Gynaecology concerning their promotion of unproven complementary and alternative therapies, with the aim of publishing our letters and their responses. We also hold the annual student prize for critical appraisal of clinical research protocols, generously supported by a grant form the Ajahma Trust, and make an annual award to an outstanding medical scientist, practitioner or journalist for his or her contribution to better understanding or practice of evidence-based medicine. We provide a source of information and
informed comment for press, radio and TV.

The committee has spent much time over the last few months wondering what more we should do. Three areas have emerged:

  Although we send the newsletter to several hundred journalists, perhaps we should excite them more with embargoed press releases

  We should be prepared in advance to have press releases available before a story breaks

  We should encourage more participation of members in discussions of matters of interest. To this end we have recently set up a discussion forum linked to the HealthWatch website. Anyone may join the discussions, but any inappropriate posting will be removed, and the offender will be barred from the forum.

Our great strength is our independence. Our only sources of income are membership subscriptions and occasional donations, as well as the grant from the Ajahma Trust for the student prize. This does not stop vilification that we are “in the pockets of big Pharma”, despite the fact that we receive no money from industry at all. We maintain friendly relations with Sense About Science; we share many of their aims, but not their more political objectives and we lack their financial and political resources.

We seem to have influence beyond what our small size might suggest. The website has received an average of 53,000 hits per month over the last year. About half of these are from addresses such as .com, .net or of unknown origin; of the half that can be traced to a country, only 16% are from uk addresses, and at least 50 hits in any one month have come from 50 different countries. One third of the hits come from people going directly to the HealthWatch website, and most of the rest come from Google, Yahoo and MSN searches, but a significant number come from Wikipedia –obviously we are considered to be an important, authoritative and independent source of information on health.

The Chairman is only as good as his committee, and I have to thank all members of the HealthWatch committee for their help. I must pay tribute to the late Michael Allen, who was a founder member of HealthWatch and over the years has done all the difficult jobs (treasurer, newsletter editor, secretary, mailing out the newsletter, and as his final gift to HealthWatch, reconciling the membership records held by the membership secretary and treasurer, which had diverged over the years). Anne Raikes now keeps the accounts in order; John Garrow is an indefatiguable vice-Chairman and contributor to the newsletter; Malcolm and Diana Brahams are always ready to offer legal advice, and Malcolm has written a number of solicitor’s letters on our behalf (we probably could not have afforded to pay a solicitor to do so); John Illman, Keith Isaacson, James May, Caroline Richmond and Les Rose are always ready to write for the newsletter; Gillian Robinson and Walli Bounds produced the protocols for the student competition and judged this year’s record entry. There are four other people we could not do without: Mandy Paine produces this excellent newsletter every quarter; Caroline Addy reads the draft newsletter to check it for libel, pro bono; Joan Gandy undertakes all the work associated with running the student prize, and consistently refuses to accept even a modest honorarium; Kenneth Bodman took over as membership secretary (with the added burden of distributing the newsletter each quarter) in January, in return for a modest honorarium.

David A Bender

MEMBERSHIP SECRETARY’S REPORT

During the past year, 2 members have died, 4 have resigned, 7 have been struck off for non-payment, and 4 new members have joined. 17 additional members have signed GiftAid forms as a result of a request included with the renewal notices in July.

We currently have 197 members, of whom 110 pay by standing order and have signed a GiftAid form, 32 pay by standing order and have not signed a GiftAid form, 29 pay by request and have signed a GiftAid form, 16 pay by request and have not signed a GiftAid form, 4 pay by CAF voucher. In addition there are 5 life members and one complimentary subscription (the Research Council for Complementary Medicine).
17 members who pay by request have not yet renewed their subscriptions and were sent a reminder with the October newsletter. A further, final, reminder will be sent after the AGM.

Kenneth Bodman

**TREASURER’S REPORT**

**Annual Accounts**

The Balance Sheet and Income and Expenditure Account for the period 1st June 2006 to 31st May 2007 are available at the AGM and/or a complete copy of the Financial Statements if required.

As in previous years, the major part of our total expenditure of £5,123 (£5,089), is incurred in producing and distributing the Newsletter (four each year).

During the year £1,076 (£1,832) was expended on the HealthWatch Student Prize. The accounts show the Ajhama funds separately from general HealthWatch funds. There remained £4,383 in this account at end May 2007.

We were very sad to report the death in January of Michael Allen, secretary and staunch supporter of Healthwatch. Donations in his memory of almost £1,000 have very gratefully been received by us. Nevertheless, the overall level of donations of £1,332, on which Healthwatch increasingly relies, is well down from last year (£2,040).

Members of the Committee continue to give their time and effort at no cost to HealthWatch. However, the Committee has agreed to pay for part time membership secretarial and newsletter distribution services. The level of subscription income of £2,744 was down from last year (£2,906) and no longer covers the cost of the Newsletter and distribution.

The Accounts show a profit this year of £215 (excluding the restricted Ajhama related activity) which is well down from last year (£1,491). This drop is the result of lower subscription income, higher administrative costs and a fall in donations. Healthwatch need to maintain its level of reserves, not only for the Newsletter but also in case of libel defence (insurance being impractical) and for future projects that the Committee would like to implement given sufficient funds.

In order to preserve Healthwatch reserves, the Committee consider it necessary to increase the subscription level from £16 to £30 per annum, with a reduced rate of £25 for those who agree to receive the Newsletter by e mail. In order to encourage students, no subscription will be charged for the time they are in full time education and they receive the Newsletter by e mail.

Anne Raikes - Treasurer 18th October 2007

Neilson and Co were reappointed to perform the independent examination of accounts (unanimous)

**Increase in Subscriptions**

After some debate it was agreed to increase the subscriptions as follows:

a) Members in Europe, receiving the newsletter by post £30  
b) Members in Europe, receiving newsletter by email £25  
c) Members outside Europe, receiving the newsletter by post £40  
d) Members outside, Europe, receiving the newsletter by email only £25  
e) Student members, receiving the newsletter by email only free  
The membership agreed that the committee could discuss this further and alter the rates if appropriate.
ELECTION OF OFFICERS

The following were nominated and elected unopposed: Chairman: David Bender Vice-Chairman: John Garrow Treasurer: Anne Raikes Secretary: currently vacant; subsequently Gillian Robinson was elected

Committee members: Susan Bewley Walli Bounds Diana Brahams Malcolm Brahams Neville Goodman John Illman Keith Isaacson James May Caroline Richmond Gillian Robinson Les Rose

AJAHMA STUDENT PRIZE

On behalf of HW, I should like to thank the AJAHMA Trust for having provided the funding for this competition, which has enabled us to run it for a fourth consecutive year.

Aim:
As most of you will know, the aim of this competition is to see whether medical and nursing students have acquired the skills critically to appraise clinical trial protocols, and hence to assess the validity or research findings. As we all know only too well, there are numerous claims of efficacy or safety of healthcare treatments published in the medical and lay press, which, on closer examination, are based on poorly designed clinical trials, that could not possibly support the stated claims, and it is vitally important for our future doctors and nurses, who will base their clinical decisions on research findings, to be able to distinguish the ‘wheat from the chaff’.

Method:
Students are invited to appraise four 1-page long hypothetical research protocols, and to rank them according to which one is most likely to provide a reliable answer to the stated aim of the trial. The protocols contain varying degrees of scientific and ethical flaws, (eg no control group, or no informed consent), which the students are expected to identify and comment upon.

Administration:
The competition is administered by Dr Joan Gandy, Reader in Nutrition at Buckinghamshire and Chiltern University College, who notifies all medical and nursing colleges in the UK early in the year, collects all the entries, sends the anonymised entries to the judges, and notifies all participants of the results. She has provided this service in her own time, entirely free of charge, and I should like, at this stage, to propose a vote of thanks to Dr Gandy for her valuable and much appreciated contribution.

Results:
This year, the flyers were distributed electronically to all medical and nursing colleges and also to the Council of Deans of Nursing, rather than by traditional mail, and we feel sure this mode of publicity is responsible for the very favourable response, compared to earlier years. A total of 95 entries were received, of which 85 were from medical students and 10 from nursing students. This compares with 9 entries in 2006, 32 in 2005 and 38 in 2004. When entrants were asked how they found out about the competition, the vast majority (77) stated that their source was the university website or email from the university.

Of the 95 entries, 60 had rated the protocols in the correct order, and these 60 then underwent detailed scrutiny by the judges, who paid particular attention to see whether students spotted design weaknesses, such as absence of, or unsatisfactory control group, no patient and/or assessor blinding, and ethical issues.

The judges were most impressed with the high quality of comments presented by many of the students this year, which showed that they had carefully appraised the protocols, and that they had a fairly good understanding of what a good-quality clinical trial entails. This, of course, made the judging more difficult, but it suggests that Medical Schools are now taking the teaching of how to evaluate new drugs/treatments more seriously. However, the judges were disappointed and concerned to note that
the vast majority of students failed to comment on the absence of ethics committee clearance and absence of informed patient consent in some of the protocols. Failure to spot such critical omissions is most disturbing and raises the question of whether medical and nursing training pays much attention to ethical issues in clinical trials, and I am sure many of you will share our concerns in this respect.

**Prize presentation:**
I should now like to invite our President to hand out the prizes to the winners and runners-up, who are:
Medical Students

Winner:
Alison Myers UCL

Runners-Up:
Alexandros Georgiou Liverpool
Ruth Heseltine Barts & The London
Philip Jones Nottingham
Gillian Norrie Aberdeen
George Peck Imperial College

Nursing Students

Winner:
Sarah Linge Edinburgh

Runner-Up:
Lisa Common Nottingham

Walli Bounds
Member, Executive Committee, HealthWatch
16 October 2006

HEALTHWATCH AWARD 2007

The HealthWatch award 2007 was presented to Prof Raymond Tallis, for his thoughtful promotion of evidence-based medicine, and Prof Tallis gave a lecture on Anecdotes, data and the curse of the media case study.