

News and Notes

BAN ON PRIVATE PRACTICE LIKELY

The government is seriously assessing the possibility of banning private practice by doctors working in government hospitals and health institutions. This was stated by Gen. Mohammad Zia-ul-Haq, Chief Martial Law Administrator in the inaugural address at the 14th National Conference on Planning Rural Health Services, held at Lahore recently.

The CMLA said the government would give adequate compensatory allowance to the doctors if this step was taken.

ZIA ADVISES DOCTORS TO STRENGTHEN PMA

Gen. Zia-ul-Haq urged the doctors to unite into one association which is only the PMA, and give priority to the fulfilment of the noble objectives of their profession rather than to money making.

He said the doctors association should be a thinking body which should help the government in the formulation of policies in the health sector.

IMMUNIZATION CAMPAIGN

A countrywide campaign is being launched on official level to save children from serious epidemics.

The Federal Government, has decided to set up comprehensive immunization units all over the country with the assistance and collaboration of the World Health Organisation and the UNICEF. The two world bodies have agreed in principle to provide vaccine and vaccination for the project which will be implemented in different phases.

An immunization unit of this kind has been set up in Rawalpindi at the Central Government Hospital to provide vaccination facilities to the children of upto two years of age.

BRAIN DEATH DETERMINATION

Cerebral circulation provides the best yardstick for determining brain death, according to most of the experts who gathered here for a Conference on Brain Death. And the best method for evaluating this circulation, according to New York University Medical Centre's Dr. Julius Korein may be the radioactive bolus technique rather than traditional four vessel cerebral angiography or gamma imaging.

Dr. Korein, Professor of Neurology, said the bolus technique is 100% accurate and can be done with portable equipment directly at the patient's bedside. A pair of scintillation probes and a recorder can be readily adapted to detect and display the passage of a radioisotopic bolus produced by rapid intravenous injection of technetium 99m per technetate through the cerebrum and through a femoral artery. The

display is a simple time-activity curve that cannot be obfuscated by extracerebral scalp circulation.

The presence or absence of cerebral blood flow was confirmed where possible by four-vessel angiography and postmortem pathological examination of the brain. One big advantage of the bolus technique is that it can be repeated at will without endangering the patient.

The absence of a clearly defined "bolus effect," or rapid rise in radioactivity counts as the bolus passes the detector located at the head, indicates that cerebral blood flow is diminished to below 24% of normal because the capillary bed has necrosed, Dr. Korein explained. No comatose patient has ever been known to recover cerebral viability when blood flow was so diminished.

"An absence of a head bolus reading in two attempts within 30 minutes is incompatible with survival," he said. Dr. Korein pointed out, patients with clinical and electroencephalographic findings suggestive of brain death.