

commissions who would give a mandate to the president to discuss science on their behalf. Very often, a decision is reached only after many hours of tough negotiation, and on a majority vote. I do not see how the ARC bureau can do that".

In the past ten years the Ministry of Health has asked for inspections of the ARC's finances on four occasions. No fraud or misuse of money has been identified. The last inspection was halted by the administrative tribunal, which concluded that the Inspection Générale des Affaires Sociales (the state's anti-fraud squad) was not the appropriate body to probe a private organisation.

Flamant would like the two main cancer charities, ARC and the National League against Cancer, to coordinate their promotion campaigns. He questions some of the means by which people are urged to donate and believes that the public should know in advance what proportion of their money goes to promotion or administration. He also calls for the charities to coordinate with the state in determining policy about funding of cancer research, as happens in Britain.

Crozemarie has written to *L'Express* to complain that it was wrong of Flamant to give the public the impression that ARC was misusing its funds. However, as Flamant pointed out in a rejoinder, Crozemarie has not refuted the specific allegations. Scientific teams at the Gustave-Roussy may now not accept more than FFfr 300 000 at a time without the director's formal approval. Like the Institut Curie in Paris, the Institut Gustave-Roussy will be raising its own money, so as to reduce its dependence on others.

Jean-Michel Bader

Australia: General practice strategy

Divisions of general practice aimed at providing a professional focus for hitherto isolated GPs is one of the key pieces of a strategy to resurrect general practice. The strategy is a result of seven months of negotiations between the Federal Government, the Royal Australian College of General Practitioners (RACGP), and the Australian Medical Association (AMA) (see *Lancet* Jan 18, p 171; May 23, p 1288). The divisions will be geographically based and will receive funding for their establishment, but they should become self-sufficient. The idea is that they should encourage GPs to get involved in teaching and research, in planning local and regional health services, and in hospital care of their patients. They should encourage health promotion, after-hours cooperatives, and peer-review activities. They are also meant to encourage liaison with allied health professionals such as physiotherapists and counsellors. Other parts of the strategy include: restrictions on entry of overseas trained doctors; inducements for GPs to work in rural areas; compulsory postgraduate training; practice accreditation; practice grants for GPs to take part in health promotion and health education; and a review of the Medicare Benefits Schedule based on a relative-value study. Implementation of this review would see funds directed away from specialists and towards GPs.

The strategy is not finalised. Nationwide meetings of GPs are planned to discuss its effects. Although Health Minister Mr Brian Howe says "the significance of this agreement should not be misunderstood" and the RACGP endorsed it strongly, the AMA was decidedly cool. The closest the AMA president, Dr Bruce Shepherd, came to endorsement was that the association "supported the principles contained in the package".

Mark Ragg

Medicine and the Law

Tobacco litigation (USA, UK, and Australia)

Neither the tobacco industry nor individual brand manufacturers have been held directly responsible in law for any injury, death, or financial loss attributable to cigarette smoking, so not one penny has been paid out in damages. However, there are straws in the wind in the UK, Australia, and the USA, especially with the US Supreme Court ruling in the Cippolone case on June 24, 1992.

In the UK "health warnings" first appeared in 1971; though now writ bolder and more bluntly, such warnings are puny in terms of redressing the balance of promotion. In the USA health warnings have been mandatory since 1966. Until the June 24 ruling that health warnings did not provide automatic immunity from litigation for the tobacco industry, the scope for legal claims looked limited but now it is clear that manufacturers may be sued, if the claimant can prove that they deliberately misrepresented the dangers.

In the US case Rose Cippolone had smoked for 42 years but died from lung cancer in 1984 before the case went to trial. Her family continued the fight and a jury awarded \$400 000 damages but this award was overturned by a superior court ruling that the defendant tobacco industry was legally protected by the statutory health warnings. The case reached the Supreme Court because of the efforts of Laurence Tribe, a law professor at Harvard University. The judgment, which has been described as confusing, runs to over a hundred pages, and opens the way, says Professor Tribe, "for people to sue the tobacco industry and hold it accountable for its deceptive practices". There are only fifty or so tobacco-related personal injury claims proceeding in the USA, a country with 50 million smokers and more than half a million deaths every year from lung cancer and other smoking-related illnesses. Anti-smoking lobbyists now expect many more, including actions against companies which promoted cigarettes as "low tar, low nicotine", on the basis that such a description implies that the product carries little risk of harm and is misleading.

Following the Supreme Court ruling, US tobacco share prices tumbled. Philip Morris, the world's largest tobacco company, tried to counter the damage by describing the court's decision as a "significant victory" for the industry because claims limited to damages arising from intentional misrepresentation would have "little practical effect" (*Times*, June 25).

Last week firms of UK solicitors held meetings in inner cities in the hope of encouraging smokers to consider claims for personal injury against tobacco companies and/or the industry generally, with the support of legal aid. Claims arising before March 1, 1988, must be in negligence alone; after that the Consumer Protection Act 1987 will help if it can be shown that the product is not as safe as persons generally were entitled to expect, given the marketing and information provided. For smokers claiming that they became addicted before 1971 there is a further problem since a personal injury claim normally has to be started within three years of knowledge about an injury. And there are more hurdles. The plaintiff has a duty to mitigate his loss—ie, by giving up smoking or at least cutting back on consumption. Warnings of health risks caused by smoking have been widespread, albeit in small print, since 1971, so a smoker starting after that date took up the habit, it could be