



WHEC UPDATE

Briefings of worldwide activity of Women's Health and Education Center (WHEC)

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New Perspectives

Medical publishers are intensely concerned about conflicts of interest; primarily what is published can have worldwide health ramifications for years to come. Editors, reviewers, authors, and readers must be aware of potential conflicts of interest involved in each publication. The policy of our educational initiatives **WomensHealthSection.com** and *WHEC Update* is to make every effort to avoid real and perceived conflicts of interest among editors and reviewers. The editors comply with conflict of interest policies that prohibit financial or other relationships with pharmaceutical companies and other biomedical industries. In addition, editors and reviewers are expected to recuse themselves from decision making about manuscripts authored by current or recent close colleagues. When necessary, the manuscript is assigned to a consultant editor to avoid any real or perceived conflict of interest.

Editors, reviewers, and readers should be aware of the ways in which conflicts of interest can affect medical publications. Beneath the surface is the well-appreciated fact that only a portion of the studies performed under industrial auspices are published (i.e., selective reporting), and those that are published almost universally favor industrial interests. Publicly accessible, Internet-based registry of clinical trials (ClinicalTrials.gov) and World Health Organization (WHO) sponsored clinical trial registry (who.int/ictrp/en) were created at least in part to improve transparency from this perspective. It is our policy to confirm all submitted clinical trials that are phase 2a and above must be registered with these databases so that the submitted protocol can be compared with the protocol in the registry. Anyone interested can determine how many trials were begun on a particular subject and ascertain how many actually were published. However, few readers ever become aware of this information, and regardless, the unpublished results unknown. Today, a large percentage of published studies are performed with industrial support and thus are at increased risk of being affected by conflicts of interest. However, all studies considered for publication, whether paid for by industry or not, are held to the same standards. All authors are required to document the use of appropriate study guidelines, and confirm that the study design is appropriate and the conclusions are reasonable.

Conflicts of interest are important considerations whenever we have relationships with more than one entity and are thus at risk of favoring the interests of one entity over other. This situation presents itself daily to practicing physicians when we simultaneously try to meet the needs of patients, ourselves, employers, facilities in which we work, medical companies providing the tools of our trade, and society. For example, every time we decide whether or not to use a sophisticated new approach to perform a procedure, we must consider not only what is best for our patients but also other factors such as institutional and personal reputations and income, relationships with industry, teaching responsibilities, and hospital requirements for maintenance of privileges, to name just a few.

Despite the best intentions of companies, it is impossible to separate research from sales completely; every positive study is a potential advertising tool, and a negative study can be catastrophic for sales. Although companies often are organized into distinct research, marketing, and sales divisions, every employee should be invested in the company's success. This cornerstone of capitalism is certainly important for the business of medicine at all levels. The responsibility of everyone involved in medical publishing is new, true, and important to our patients' health and well-being. As an additional safeguard, each of us should resist the temptation to adapt new medical practices on the basis of a single publication, no matter how compelling the data.

Promoting Transparency in Clinical Trials

Rita Luthra, MD

Your Questions, Our Reply

What are the policies of The Women's Health and Education Center (WHEC) on competing interests? What sort of papers/research does WHEC want, publish and fund? What are the guidelines for submitting and publishing Clinical Trials in ***WomensHealthSection.com***?

The Women's Health and Education Center (WHEC) publishes papers on matters of women's health and health development with a special focus on Millennium Development Goal # 5 (Improve Maternal Health). This is a very broad field, and we consider a very wide range of papers, but the ones that survive peer review and are accepted for publication have some common features:

- The work described has some implications beyond where it was done.
- We learned something from the paper.
- We think that our readers would learn something, or find the contents useful to them in their work.
- The work is novel, relevant and valid, and has been conducted in an ethical manner.

WHEC provides grants for the research/publications for the accepted paper for the translations in six languages to be included in WomensHealthSection.com and dissemination of the work worldwide to millions of our readers in health care and policy-makers. Authors of accepted papers are also invited to participate in Continuing Medical Education (CME) discussions and forums on WHEC Global Health Line.

Unsolicited manuscripts: For the sections – Research, Policy & Practice, and Lessons From The Field manuscripts must be accompanied by two paragraphs indicating what they add to the literature:
– A brief explanation of what was already known about the topic concerned;
– A brief outline of what we know as a result of your manuscript.

The registration of all interventional trials is a scientific, ethical and moral responsibility. This will improve research transparency and will ultimately strengthen the validity and value of the scientific evidence base. Clinical trials sponsored by pharmaceutical companies should follow specific guidelines; available at: <http://www.gpp-guidelines.org> . All human trials that are phase 2a and above must be registered with a clinical trial registry of World Health Organization (WHO); available at: <http://www.who.int/ictrp/en> or National Institutes of Health (NIH), United States; available at: <http://clinicaltrials.gov/>

Authors should provide the name of the trial registry, the registry URL, and the trial registration number at the end of the abstract. Please note: Submit your contributions in a Microsoft Word compatible format (*.doc) and in English only.

Competing interests arise when authors, reviewer, or editors have personal, commercial, political, academic or financial interests that are not fully apparent and that may influence their professional judgment on a paper's content or suitability for publication. The WHEC recognizes that the desirable expertise of authors, writers and reviewers also makes them prone to acquiring competing interests in their subject area. The WHEC also requires authors, editors and reviewers to disclose their competing interests, upon submission or review of a paper for any section of the journal. Authors' competing interests statements will be taken into consideration when a final decision is made to accept or reject a paper, but will not stand as the only criterion for rejection without the editors first seeking further clarification from the authors. The WHEC asks reviewers to decline the invitation to review a paper if they feel that they may have a conflict of interest that would impede their objectivity, and to declare any potential competing interests when accepting the invitation to review.

The editors and editorial advisers are obliged to declare any competing interests to WHEC, and preclude themselves from handling papers in such interests collide. The WHEC's usual time span on conflict of interests is for three years preceding the disclosure, but authors, reviewers and editors are asked to declare any relevant competing interests that they may have outside of this period. In addition, The WHEC requires that authors explicitly state all sources of funding for research or writing activities. This information should be included in the acknowledgements section of the paper, and the methods section of

the paper should include the role of the funding source as regards the design, execution, and analysis of the study, and the decision to submit the paper for publication.

United Nations At A Glance

Andorra and the United Nations

SECRETARY-GENERAL HAILS ACCOMPLISHMENTS OF SIX MEMBER STATES AS THEY CELEBRATE TWENTIETH ANNIVERSARY SINCE JOINING UNITED NATIONS

Following are UN Secretary-General Ban Ki-moon's remarks at the twentieth anniversary of the ascension of Andorra, Czech Republic, the former Yugoslav Republic of Macedonia, Monaco and Slovakia to the United Nations: It is an honor to join you as we celebrate your twentieth anniversary celebration of membership at the United Nations. Congratulations.

Twenty years is not long in the life of people, let alone the life of nations. But, in a short span of time, Andorra, the Czech Republic, the former Yugoslav Republic of Macedonia, Monaco and Slovakia have each made important contributions to the work and the mission of the United Nations. I have had the profound honor of visiting each of your countries and deepening our partnership even further. The list of your accomplishments is far too long to detail. But, allow me to salute Andorra as a true international champion for women's empowerment, being one of only two countries around the world reaching 50 per cent of women in parliament. The Czech Republic has been a vital player in the peaceful settlement of disputes and supporting countries in transition.

The former Yugoslav Republic of Macedonia continues to play an important role in regional peace and stability, including as current Chair of the South East European Co-operation Process. Monaco has contributed extensively to the international debate on climate change, the protection of biodiversity, water management and the protection of oceans. And Slovakia's recent presidency of the Economic and Social Council has also been extremely valuable for the advancement of the sustainable development agenda. That is just a snapshot of your activities and contributions. Looking back over the past 20 years, much has changed in your countries as it has in the world around us.

Each of your histories is unique, but you are now united in purpose as an indispensable part of the United Nations family. I look forward to working closely with all of you as you begin your third decade at the United Nations. Building the future we want will demand dedication from the most powerful nations to the least developed countries, from the largest territories to the smallest States. I count on the continued commitment of Andorra, the Czech Republic, the former Yugoslav Republic of Macedonia, Monaco and Slovakia to help us realize a world of prosperity, sustainability, equity and dignity for all.

GILBERT SABOYA SUNYÉ, Minister for Foreign Affairs of Andorra, reminding the Assembly that the most serious challenges facing the international community and the Assembly today was the fight against climate change, said that up to now humanity was used to overcoming recessions and times of crisis and entering a new phase of growth without thinking of the negative external effects of that growth. Now, however, the world knew that growth was not possible at any price; that development had to be sustainable in economic terms, but also and more importantly, in environmental terms. That was why climate change was a threat as or even more powerful than the global recession.

<http://www.mae.ad/ca/>

Collaboration with World Health Organization (WHO)

WHO | Andorra

According to WHO estimates, a person born in Andorra in 2003 can expect to live 73.0 years on average: 76 years if female and 69 years if male. Since 1999, Andorrans have gained about 2.2 years in life

expectancy. As the length of life increases, older people can respond with lifestyle changes that can increase healthy years of life. Correspondingly, health care systems need to shift towards more geriatric care, the prevention and management of chronic diseases and more formal long-term care. Since people are living longer, measures to improve health and prevent disease need to focus on people of working age.

WHO estimated that in 2003, there was a probability that for every 1000 live births in Andorra, almost five children would die before five years of age, compared to the Eur-A average of between five and six per 1000 live births.

Antenatal care is one of the most important services in health care. Nevertheless, it can be expensive, and interventions may be excessive, unneeded and unproven. A simplified model of antenatal care, based on evidence of benefit, is available.

Infant, neonatal and child mortality

WHO estimated that in 2003, there was a probability that for every 1000 live births in Andorra, almost five children would die before five years of age, compared to the Eur-A average of between five and six (WHO, 2005) (Figure. Infant deaths and neonatal deaths).

Details: http://www.euro.who.int/_data/assets/pdf_file/0015/103191/E88208.pdf?ua=1

Bulletin of the World Health Organization; Complete list of [contents](#) for Volume 92, Number 3, March, 153-228

Collaboration with UN University (UNU)

UNU-WIDER (World Institute for Development Economics Research) *Expert Series on Health Economics:*

The global partnership for sustainable development

This paper examines whether foreign aid, together with other economic, social and environmental factors, contributes to sustainable development. It starts with a theoretical model where sustainable development is modelled as a different kind of growth that protects the environment. Using factor analysis and newly developed estimation methods for a dynamic panel data model with endogenous regressors, the empirical section finds evidence that foreign aid has been a significantly positive influence on sustainable development in aid recipient countries. This effect is very likely to go through channels related to growth and resources as well as a technology channel with respect to energy intensity. This research has important implications for a post-2015 development framework on international collective action with regard to a sustainable future.

Expanding populations and economies in the current world are adding considerable pressure on the environment while the widespread aging of the populace and rapid technological change are placing great stress on social equity and cohesion. Environmental sustainability and social inclusion have become major political priorities, especially for developing countries. This research focuses on the global partnership in areas such as foreign aid for sustainable development, which is one important vision articulated in the Millennium Declaration.

Since high growth performance does not necessarily bring about high levels of development, sustainable development has been increasingly regarded as the primary objective in many countries. As an alternative approach to the traditional growth path that concentrates only on economic advancement, sustainable development pursues a balance between economic development, social equity and environmental protection, not as conflicting goals but as pillars which complement each other.

This research has shed some light on the interaction between finance, economic growth, natural resource conservation and energy technological progress in the process of global sustainability. The significant,

observed effect of foreign aid on growth is also likely to be channeled through to sustainable development. The positive effect of aid on sustainability is also likely to work through natural resource conservation and/or energy intensity where foreign aid is used to encourage natural resource conservation and technological innovation of energy systems. Growth provides a concrete foundation for environmental protection and social development, and equips governments financially and technologically to fight climate change and stimulate social inclusiveness and development. This research has significant implications for both research and practice.

The finding has significant implications in the sense that an enhanced global partnership in areas such as foreign aid, trade, investment, migration (from rural to urban areas) and governance could play a crucial role in the process of global sustainability. Although efforts at the national level are crucial for sustainable development, action at the global level is also needed to provide support for diverging national needs and circumstances. The global partnership for sustainable development should be strengthened to encompass explicit commitments by all countries to the various goals and internationally coordinated measures that strive to create an enabling environment for development, to address the causes of climate change and income inequality, to facilitate sustainable management of the global commons and to achieve economic and financial stability.

Publisher: UNU-WIDER; Authors: Yongfu Huang and M. G. Quibria; Sponsor: UNU-WIDER gratefully acknowledges specific programme contributions from the governments of Denmark (Ministry of Foreign Affairs, Danida) and Sweden (Swedish International Development Cooperation Agency—Sida) for ReCom. UNU-WIDER also gratefully acknowledges core financial support to its work programme from the governments of Denmark, Finland, Sweden, and the United Kingdom.

(Details of the paper can be accessed from the link of UNU-WIDER on CME Page <http://www.womenshealthsection.com/content/cme/>)

United Nations Girls' Education Initiative (UNGEI)

The Effort to Advance the Global Strategy (Continued)

Elimination of Racial Discrimination. This has been ratified by virtually all European governments (the only exceptions being **Andorra**, Ireland, San Marino and Turkey).

International Legislation Handbook

Denied a future?

The right to education of Roma/Gypsy & Traveler children in Europe

Education – in the broadest sense of the term – is a fundamental human right. The denial of this right may affect the enjoyment of other rights. Ignorance, which can be a consequence of an incomplete education, may deprive individuals of the means of fully developing and expressing their personality and achieving recognition. Civil and political rights, such as freedom of expression, freedom of association or the right to political participation acquire substance and meaning only for people who have been educated.

Education is a vehicle for transmitting culture and hence cultural identity. For ethnic and linguistic minorities, the right to education is a vital means of safeguarding and strengthening their cultural identity, including the right to use their own language.

Education promotes the realization of social and economic rights, insofar as educated people have greater chances of finding work, and are more aware of their right to health, housing and food. Above all, they acquire the ability to access these basic benefits themselves. The holistic character of the right to education is undeniable. Its effective realization provides an essential means of access to an adequate standard of living. It ensures the access to knowledge required by individuals to develop all their faculties, to improve the quality of their lives, to take clear-sighted decisions and to continue to learn, in order to live a dignified life within a democratic society.

In other words: “Education is both a human right in itself and an indispensable means of realizing other human rights: civil, cultural, economic, political and social. It is the primary vehicle by which economically and socially marginalized people can lift themselves out of poverty and obtain the means to participate fully in national life. Its impact is thus felt in the future, as much if not more than in the present. Education benefits societies as well as individuals.”

http://www.ungei.org/resources/files/SaveTheChildren_dafvol3.pdf

To be Continued.....

Top Two-Articles Accessed in February 2014

1. Inherited Thrombophilia in Pregnancy;
<http://www.womenshealthsection.com/content/obsmd/obsm018.php3>
WHEC Publications. Gratitude is expressed to [Dr. John R. Higgins](#), Professor of Obstetrics and Gynaecology, Head of College of Medicine and Health, University College Cork, Cork University Maternity Hospital, Wilton, Cork, Ireland for serving as reviewer and helpful suggestions in compiling the manuscript.
2. The Ethical Concept of fetus as a patient;
<http://www.womenshealthsection.com/content/obs/obs019.php3>
Authors: [Frank A. Chervenak, M.D](#) ; Given Foundation Professor and Chairman; Department of Obstetrics and Gynecology; Weill Medical College of Cornell University, New York, New York (USA) and [Laurence B. McCullough, Ph.D.](#); Professor of Medicine and Medical Ethics, Associate Director for Education; Center for Medical Ethics and Health Policy; Baylor College of Medicine, Houston, Texas (USA)

From Editor’s Desk

Providing the foundation for sexual and reproductive health

A RECORD OF ACHIEVEMENT
UNDP/UNFPA/WHO/WORLD BANK

Special programme of research, development and research training in human reproduction (HRP)

Why sexual and reproductive health is important?

Protecting mothers and their newborn infants

For many women in developing countries, pregnancy and childbirth are risky undertakings. Poverty, lack of education, low social status and lack of access to high-quality maternal health care mean that each year tens of millions of women suffer disability resulting from hypertensive disorders, hemorrhage or other complications of pregnancy, and more than half a million die in pregnancy and childbirth—a rate of one woman every minute of every day. All but 1% of these deaths occur in the developing world, and almost all are preventable. Poor maternal health contributes to the death of newborns. Each year, 3 million infants are stillborn, and 3.7 million newborns die within one month. The prevalence of HIV infection raises important questions about maternal and newborn health care, such as how to prevent transmission of the virus from an infected mother to her infant during pregnancy, childbirth or breastfeeding.

Selected achievements

- On the basis of the latest research, HRP established a model of antenatal care that halves the time and money women spend in accessing services, without compromising the quality of care. At least 15 developing countries now use the model. The United States Agency for International Development has adapted it and promotes its use as 'focused antenatal care'. The health sector could save as much as US\$ 16 billion annually by implementing this new approach worldwide.
- We established that magnesium sulfate is the most effective treatment for women with eclampsia due to hypertensive disorders of pregnancy and can prevent the seizures associated with this complication. We also showed that a daily calcium supplement of 1.5 mg can reduce severe complications of pre-eclampsia and hence maternal disability and newborn deaths.
- In Latin America, we found that high rates of delivery by caesarean section, far from indicating better care, may be associated with harm and poorer health for mothers and newborns.
- HRP's expert group has reviewed evidence on the safety and efficacy of new antiretroviral drugs for preventing mother-to-child transmission of HIV and updated the guidelines for optimal use of various antiretroviral drugs in areas with scarce resources.

Ensuring good governance, accountability and respect for rights

Several complementary oversight and advisory bodies hold HRP accountable for meeting its stated objectives and monitor our scientific and ethical rigor, our gender sensitivity and the relevance of our work to sexual and reproductive health priorities in developing countries.

- Oversight of HRP's mission and overall direction are the responsibility of the Policy and Coordination Committee, comprising cosponsors, major donors, selected WHO Member States and other interested parties, which meets annually. This group commissions periodic in-depth evaluations of HRP's work by independent experts.
- The Scientific and Technical Advisory Group meets annually to review progress, to recommend strategic priorities and to advise on the allocation of resources.
- The Gender and Rights Advisory Panel reviews our work from the perspective of gender and reproductive rights.
- The Regional Advisory Panels recommend priority activities for the region and monitor and evaluate our work.
- The Scientific and Ethical Review Group Panel provides peer review and independent ethical assessment of research proposals.

Details: http://whqlibdoc.who.int/hq/2008/WHO_RHR_HRP_08.13_eng.pdf?ua=1

Words of Wisdom

To know how to grow old is the masterwork of wisdom, and one of the most difficult chapters in the great art of living.

– Henri-Frederic Amiel (1821-1881)

Monthly newsletter of WHEC designed to keep you informed on the latest UN and NGO activities

<http://www.womenshealthsection.com/>

