

Nineteen separate points are made in the document; I have highlighted just a few of them here.

1. There should be valid medical reasons for undertaking such a study. The design and methods used must permit the achievement of the stated scientific and medical objectives. The study must *not* be designed for or conducted as a promotional exercise.
2. Where a study is prospective, patients should be identified for inclusion in the study, only *after* the decision has been made to prescribe a particular medicine.
3. The design, conduct and analysis of the study should originate in the company's medical department, and be under the supervision of a medical practitioner registered in the UK, and his or her name should be recorded on all documentation.
4. Drug representatives should not be involved in such a way that the study could be seen as a promotional exercise.
5. Remuneration – no inducement to undertake a study should be offered to, requested by, or given to a doctor participating in a company-sponsored post-marketing surveillance study. A scale of fees has been drawn up by the ABPI and BMA. In 1989 terms, these amounted to

£5.40 per completed form and £10.80 if the form was particularly complex.

It is suggested that any adverse reaction during a drug trial should be reported to the Committee on Safety of Medicine (Mkt Twrs, 1 Nine Elms Lane, London SW8). You may also wish to report to the National Drugs Advisory Board (Charles Lucas House, 63/64 Adelaide Road, Dublin 2).

More recently concern has been expressed about the practice of paying researchers on a per capita basis for patients recruited into other forms of clinical trials. Members are cautioned against undertaking such a contract in view of the danger that researchers would be placed under considerable pressure to recruit patients on grounds other than those required for the proper conduct of the trial.

We would recommend all Members and Fellows who are approached about PMS studies to read the guidelines referenced above. If you have any concerns about such studies, the Research Committee would be pleased to hear about them. You may also wish to write to the code of practice committee of the Association of the British Pharmaceutical Industry, 12 Whitehall, London SW1A 2DY.

C. P. Freeman, *Chairman, Research Committee, Royal College of Psychiatrists*

Regional meeting

A regional meeting of the Royal College of Psychiatrists will take place in the Middle East from 11–13 May 1994. Further information:

Dr N. Loza, Behman Hospital, Helwan, Cairo, Egypt (fax 202 960999).

MRCPsych Part 1 and Part 2 examinations

I would be grateful if all those concerned with the examination would note that as from April 1994, as already announced, candidates will be expected to be familiar with ICD-10.

Dr Sheila A. Mann, *Chief Examiner, Royal College of Psychiatrists*