

[Press release: Persistent peddler jailed for dealing dodgy sex drugs](#)

In 2016, Peppino Fiori was jailed for 12 months for the importation and sale of dangerous steroids and unlicensed erectile dysfunction medicines from his home address in Surrey.

Following a further investigation by the Medicines and Healthcare Products Regulatory Agency, it was discovered that Fiori continued to import and possess with intent to sell, unlicensed drugs, coordinating his illegal business from a rented storage unit whilst on bail.

Despite receiving numerous warnings from MHRA as early as 2013, Fiori chose to ignore these and was sentenced again last week to 12 months immediate custody for reoffending.

This man's illegal activity posed a serious health risk to the public. These medicines are potent and can cause serious side effects.

Approximately 60,640 doses of unlicensed medicine were seized including 2,200 doses of generic Tramadol, a powerful class C drug. It is thought that Fiori's hoard was valued at more than £60,000.

MHRA Head of Enforcement, Alastair Jeffrey, said:

Selling medicines outside of the regulated supply chain is a serious criminal offence. These criminals are motivated by greed and have no concern about your safety or welfare.

Unlicensed medicines can be dangerous as their contents are unknown and untested. Chances are they simply will not work, but they may contain dangerous ingredients. The consequences for your health can be devastating.

If you need advice or treatment for a condition, visit your GP. Make sure you obtain medical products from legitimate high street outlets or online retailers displaying the distance selling logo.

MHRA is currently running the #FakeMeds campaign to warn people against buying potentially dangerous or useless unlicensed medicines sold by illegal online suppliers. Visit www.gov.uk/fakemeds for tips on buying medicines safely online and how to avoid unscrupulous sites.

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Office hours are Monday to Friday, 8:30am to 5pm. For real-time updates including the latest press releases and news statements, see our Twitter channel at <https://www.twitter.com/mhrapress>

Press release: Government launches consultation to protect political debate

Updated: Changed end date to 11:45pm on 28 October.

The government is launching its consultation today (Sunday 29 July) for a new electoral offence which aims to crack down on threats and abuse towards those standing for election.

The consultation, which will run until 11:45pm on 28 October, also seeks views on clarifying the electoral offence of undue influence of voters. Currently, a person is guilty of undue influence if they threaten electors to vote a certain way or stop them from voting.

The consultation will review whether the requirement to have imprints, which is added to election material to show who is responsible for producing it, should be extended to digital communications.

This would also have the benefit of increasing transparency in digital campaigning, in light of recent concerns about the potential risks of 'fake news' and foreign interference in future ballots.

Following on from the recommendations set out by the Committee on Standards in Public Life (CSPL) last year, the Prime Minister announced that the government will consult on a new offence that would be in addition to the current offence of electoral intimidation which relates to undue influence on voters.

The consultation also comes amid concerns voiced by politicians and campaigners on all sides about the increasing intimidation and abuse of people taking part in elections.

The proposals would toughen current electoral law, which includes provisions against undue influence of voters, by introducing a new offence to tackle intimidation of Parliamentary candidates and campaigners. This new law could see people stripped of their right to stand for or hold public office, should they be found guilty of threatening or abusive behaviour, either in person or online.

Extreme cases of intimidation are considered a serious criminal offence, punishable with a custodial sentence where evidence of sustained, pressurising behaviour intended to cause distress and impact campaigning is found.

Minister for the Constitution, Chloe Smith said:

This government recognises that rising intimidation in public life is stopping talented people from standing for election and putting voters off politics and we want to tackle this extremely serious issue.

We are consulting on three new measures that will protect voters, candidates and campaigners so they can make their choice at the ballot box or stand for public service without fear of being victims of misinformation or abuse.

We can't let intimidation of our candidates, campaigners, the public and those that serve us continue unchecked and I would encourage everyone to take part in this consultation.

Lord Bew, Chair of the Committee on Standards in Public Life, said:

Intimidation presents a real threat to the integrity, diversity, and vibrancy of our public life.

People of all backgrounds should not be put off from standing for public office as a result of intimidatory behaviour.

We warmly welcome that the government are implementing our recommendation to consult on a new electoral offence of intimidating Parliamentary candidates and introducing digital imprints.

The Electoral Commission identified these gaps in electoral law in evidence to our review, and these measures would play an important part in protecting candidates and voters at election time.

[Press release: Be Clear on Cancer campaign urges public to check urine for blood](#)

Public Health England (PHE) is launching a national 'Be Clear on Cancer' campaign which highlights blood in pee as a key symptom of bladder and kidney cancers. The campaign will encourage everyone to 'look before they flush' and visit their GP without delay if they notice blood in their pee, even if it's just once.

A new survey reveals that only 16% of adults aged 50 and over in England (those most at risk of these cancers) say they check the colour of their pee every time they go to the toilet, with women being less likely to check every time (12% versus 20% of men).

A new short film featuring TV doctor Dr Dawn Harper is being released as part of the campaign. The film shows what to look out for as the colour of blood in your pee can vary – from very diluted to bright red or even dark brown, like the colour of weak black tea. Blood in pee is a symptom in almost two thirds (64%) of all bladder cancers and around a fifth (18%) of kidney cancers.

Blood might not appear every time, so it is important that people seek medical help even if they notice it just once. Worryingly, around half (47%) of those surveyed said they would not seek medical advice if they saw blood in their pee just once, with 45% saying they would wait and see if it happened again, potentially putting off a vital diagnosis.

When asked why they would not go to the GP straight away, one in five (20%) say they would be worried about wasting the GP's time and nearly a quarter (23%) would only book an appointment sooner if they had other symptoms.

Latest figures show that every year in England around 19,100 people are diagnosed with bladder or kidney cancer and around 8,000 people die from these diseases. Early diagnosis is critical; 84% of those diagnosed with kidney cancer and 77% of those diagnosed with bladder cancer at the earliest stage (stage 1) will live for at least 5 years. At a late stage (stage 4), this drops to 10% and 9% respectively.

Professor Julia Verne, from Public Health England said:

It is vital that people know that blood in pee could be a sign of cancer.

Our research shows only a small number of people check the colour of their pee every time they go to the toilet. People need to get into the habit of looking before they flush to spot any signs of blood in their pee. And if there is blood, they shouldn't hesitate about going to their GP. This will help diagnose more people at the early stages, when cancer is more treatable – improving their chances of living longer.

Dr Dawn Harper, TV Doctor and GP, said:

I'm urging people to be vigilant to changes in their body and to check their pee. I hear all too often about people who have delayed seeking medical advice if they have worrying symptoms – like blood in pee – because they are afraid of what the doctor might find or what the treatment might be.

If you do notice blood in your pee, it's probably nothing serious, but it's always worth checking with a health professional – you won't be wasting their time. It's vital that people don't put off getting help; if it is cancer, early diagnosis saves lives.

Professor Chris Harrison, NHS England's national clinical director for cancer, said:

The earlier people are diagnosed, the better their chances, which is why it is vital people understand what to look out for and when to visit the GP. This campaign has the important aim of helping raise awareness of the signs and symptoms of bladder and kidney cancer and encouraging people to visit their GP after seeing blood in their pee.

The 'Be Clear on Cancer' 'Blood in Pee' campaign runs until 23 September and includes advertising on TV, radio and in public toilets and online. For further information about the signs and symptoms of bladder and kidney cancer, search 'Be Clear on Cancer'.

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Background

1. The campaign launches across England on Thursday 19 July 2018 and runs until 23 September 2018. The campaign activity includes TV, print, radio, digital and out of home advertising.
2. Be Clear on Cancer campaigns are run by Public Health England in partnership with the Department of Health and NHS England and with the support of Cancer Research UK
3. Early diagnosis of cancer is a major priority for the government in helping us to improve cancer survival. Be Clear on Cancer campaigns, which aim to raise public awareness of the symptoms of cancer and encourage earlier presentation, are included in the report of the Independent Cancer Taskforce 'Achieving World-Class Cancer Outcomes: A Strategy for England 2015 to 2020'.
4. Interview opportunities with Public Health England spokespeople, a range of urologists from across the country, Dr Dawn Harper, charity supporters and case studies are available upon request.
5. [Video assets for the campaign](#) and still images with Dr Dawn Harper can be found on Dropbox.
6. [Public Health England](#) exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, knowledge and intelligence, advocacy, partnerships and providing specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific expertise and support. Follow us on Twitter: [@PHE_uk](#) and Facebook: www.facebook.com/PublicHealthEngland.

Factors that increase the risk of bladder and/or kidney cancer include:

- smoking
- being overweight or obese
- some jobs, because of exposure to certain chemicals
- other medical conditions, such as kidney failure

- a family history of cancer

Blood in pee is a key symptom for both bladder cancer and kidney cancer.

Other symptoms of bladder cancer include:

- cystitis (a urinary tract infection) that is difficult to treat or comes back quickly after treatment
- pain when peeing

Other symptoms of kidney cancer include:

- a pain that doesn't go away, either in the tummy or in the side, below the ribs
- weight loss

Additional spokespeople quotes

Geraldine Sinfield, bladder cancer survivor and supporter of the Urology Foundation, said:

I noticed blood in my pee in late 2013. I knew something was wrong and made an appointment to see my doctor straight away. He referred me to hospital for tests which showed I had bladder cancer. I'm so glad I acted quickly because my cancer was caught early and just six months after my treatment, my husband and I went sailing around Britain, something I never thought would be possible! Recently, at my last appointment, my doctor was so pleased with my progress that I was told I would no longer need to have annual checkups, which is a huge relief.

Louise de Winter, CEO of The Urology Foundation, said:

We are very pleased to see Public Health England running this campaign. The Urology Foundation will always support campaigns that raise awareness of blood in pee, a symptom of a number of urological cancers.

We know cancer is so much easier to treat when it's caught early, which means checking for blood in pee can be a small, but life-saving decision. Our goal is to lead the fight against urology disease and encouraging people to check for blood in their pee and to take action is an important step in that fight.

Andrew Winterbottom, founder and CEO of Fight Bladder Cancer and a bladder cancer patient himself, explained:

The Blood in Pee campaign is essential to let people know that they should go and see their GP if they have any sign of blood in their

pee even if it is just on one occasion. Whatever the reason it's important not to delay as getting it checked out straight away is really important if it turns out to be something serious.

Nick Turkentine, CEO of Kidney Cancer UK, said:

This is an incredibly important campaign as early diagnosis of kidney cancer offers greatly increased chance of a full recovery. One of the early signs something may be wrong is traces, or amounts, of blood in your pee, so if you see it, talk to your GP without fail. Also, look for other possible signs, these may not necessarily be kidney cancer but are worth being aware of including a pain that doesn't go away, either in the tummy or in the side below the ribs, or loss of weight. See your GP if you have any concerns.

Allen Knight, CEO of Action Bladder Cancer UK, said:

Around 8,000 people die from bladder or kidney cancer each year in England. Many of these deaths could be avoided if patients saw a doctor as soon as they noticed a key symptom of these cancers – blood in pee – even if it's only once. Bladder cancer is often diagnosed late, which means it can be even harder to treat. We are pleased to support the Be Clear on Cancer campaign and to help spread the message that if you do notice blood in your pee, you must take action and get checked by your GP – and go back again if it is not resolved.

Press release: Local government, NHS 10-year plan and a prevention opportunity

The NHS's upcoming 10-year plan will only succeed if it has local government's expertise and a golden thread of preventing poor health running through it, Public Health England's (PHE) Chief Executive Duncan Selbie has told the Local Government Association (LGA) conference this week. As an example of this, he highlighted a new approach to preventing and tackling obesity which is being piloted by PHE.

The new 5-year funding settlement will see the NHS receive increased funding of £20.5 billion in real terms per year by the end of the 5 years compared to

today – an average 3.4% per year overall. The Prime Minister has spoken of the need to improve social care and to support prevention and public health in the new NHS plan, a view echoed by Duncan Selbie.

Duncan Selbie said:

The NHS 10-year plan is a huge opportunity, but it will be judged by how it prioritises prevention. We must of course treat illness but even smarter would be to prevent it. With 40% of all poor health being preventable and 60% of 60 year olds experiencing at least one long term condition this has to be a no brainer.

Keeping people well for longer and helping them to stay in their own homes for longer must be the primary objective. Local government has huge expertise and know how to bring to this.

Mr Selbie was speaking at a meeting on enabling healthy communities, which considered ill health's effects on the economy and the workforce. The economic case for prevention is well established; illness among working age people costs the UK economy £100 billion a year and about 330,000 people every year become unemployed because of health-related issues.

The burden preventable illness puts on public services is also clear. Obesity-related ill health costs the NHS around £6 billion per year, while the impact of obesity on local authority social care budgets is estimated at £350 million per year.

PHE is piloting a whole systems approach to obesity programme, which supports local authorities in tackling obesity through joined-up local action including all departments within the local authority, NHS Trusts, local businesses and voluntary and community organisations. Developed in partnership with the LGA and Association of Directors of Public Health (ADPH), it is rooted in the principle that no single individual, group or organisation can tackle obesity alone and that everyone has a part to play.

Leeds Beckett University is supporting 11 pilot local authorities to co-develop resources that will be available for all local authorities, in spring 2019.

On tackling obesity, Duncan Selbie said:

Reversing this epidemic is possible, provided everyone pulls together. No other country in the world is tackling this in such a comprehensive way.

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Background

PHE will invite expressions of interest from local authorities to test and provide feedback on the draft guide. This has been co-developed by local authorities, for local authorities, so their input will be invaluable in shaping this innovative piece of work. Local authorities will be sent the draft guide in September for feedback, and then the whole systems approach will be peer reviewed by systems experts before it is made available nationally in spring 2019.

The LGA published a briefing for elected members on the [whole systems approach to obesity](#) in December 2017.

References:

The cost of obesity related ill-health to the NHS:
www.ncbi.nlm.nih.gov/pubmed/21562029 (The direct cost to the NHS in 2006 to 2007 of people being overweight and obese was £5.1 billion. These costs have been updated to £6.1 billion to take into account inflation.)

The impact of obesity on local authority social care budgets:
www.local.gov.uk/sites/default/files/documents/15.6%20obesity-05.pdf
(Unpublished analysis of Health Survey for England combined data 2011 and 2012. Obesity Knowledge and Intelligence. PHE 2014. Cost of extra formal hours of help for severely obese compared to healthy weight people.)

[Press release: Blood pressure and heart medication recalled from Pharmacies](#)

Pharmacies in the UK are being advised to recall all batches of valsartan containing medicines made by Dexcel Pharma Ltd and Accord Healthcare (previously known as Actavis Group) as a precaution, the Medicines and Healthcare products Regulatory Agency's (MHRA) has warned today. This follows an urgent investigation in to medicines containing valsartan used to treat

high blood pressure and heart conditions.

A recall is underway across Europe following recent and emerging information that an impurity has been identified as part of the manufacturing process in a valsartan active substance manufactured at one facility based in China. This facility has supplied the manufacturers with the valsartan active substance. The impurity (N-nitrosodimethylamine), which may have carcinogenic potential, is a result of a change in the manufacturing process. This active substance is used in a number of medicines marketed in Europe.

The European Medicines Agency and other EU regulators are working together to investigate the extent of the issue and any possible impact for patients.

If you are taking any of the affected valsartan products, it is vital that you do not stop taking your medication but you should get in touch with a doctor or healthcare professional as soon as possible. Alternative valsartan containing products, that are unaffected by this issue, are available in the UK.

Patient safety is our top priority and we will provide further updates as the investigation progresses.

Dr Sam Atkinson, MHRA's Director of the Inspection, Enforcement and Standards Division said:

People taking valsartan medication affected by this recall are advised to not stop taking their medication, but to speak to their doctor or healthcare professional who can advise on alternative treatment.

We continue to undertake an urgent review of all these products that may pose a low risk to public health.

We will communicate the outcome of our investigations and ensure that any other affected products are recalled.

Our highest priority is to ensure that the medicines you take are safe.

If you are concerned, please speak to your GP, pharmacist or other healthcare professional.

We strongly encourage anyone taking Valsartan medicines to report any suspected side effects, to us via our [Yellow Card Scheme](#).

Notes to Editor

1. MHRA is responsible for regulating all medicines and medical devices in the UK. All our work is underpinned by robust and fact-based judgments to ensure that the benefits justify any risks. MHRA is a centre of the

Medicines and Healthcare products Regulatory Agency which also includes the [National Institute for Biological Standards and Control \(NIBSC\)](#) and the [Clinical Practice Research Datalink \(CPRD\)](#). The Agency is an executive agency of the Department of Health. www.mhra.gov.uk

2. [Link to Yellow Card Scheme](#)

3. [MHRA Drug Alerts](<https://www.gov.uk/drug-device-alerts>)

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