

## Lunch with *The Lancet* Bill Roedy



MTV

For Bill Roedy's role as GAVI Alliance Envoy see [http://www.gavialliance.org/media\\_centre/press\\_releases/bill\\_roedy.php](http://www.gavialliance.org/media_centre/press_releases/bill_roedy.php)

For the FEAST trial short film see <http://www.youtube.com/watch?v=hK9VUkL-DqU>

If global health had rock legends, Bill Roedy would be in its hall of fame. The former MTV boss, who ensured that the music channel network went global, joined forces long ago with the UN to invent innovative ways of raising HIV awareness among young people. Now, he has taken on the challenge of raising the profile of vaccines, by becoming the GAVI Alliance's first global Envoy.

When we meet in London, a minute away from MTV Europe's headquarters, Roedy is in the midst of a media whirlwind to talk about *What Makes Business Rock*, his part-memoir, part-business bible. The book is likely to interest even someone who has zero interest in building a multi-billion dollar business empire, because much of Roedy's advice is not just about how to work but also about how to live: "be slow to take credit, quick to take blame", he says.

In person, Roedy isn't quite as I'd predicted. He's as charming and engaging as you'd expect from a man who often has to calm down irate megastars, but is also extremely polite and respectful. But then there's nothing predictable about a man who has lived as many lifetimes as Roedy has. He was once a Vietnam platoon leader, later in charge of US nuclear missile bases in Italy, before graduating with an MBA from Harvard and joining the world of television. For Roedy, raised by a single mother in Miami who struggled to make ends meet, TV was an "escape capsule".

Roedy was head of MTV Europe when, with MTV colleague Georgia Arnold, he created the Staying Alive campaign in 1998 to teach young people about how to protect themselves against HIV/AIDS. The popular soap operas that Staying Alive makes drive home key messages about safe sex and dealing with the stigma of HIV. Being entertaining is one thing, but an independent evaluation by Family Health International shows that the programmes are educational too.

Now, Roedy wants to use the lessons he's learned about HIV awareness to promote vaccines. "We need to turn up the volume on the message. This is a compelling story, because you give a vaccination, you save a life. 5 million lives have been saved in 10 years. That's extraordinary." Nevertheless, anti-vaccination critics have been increasingly vocal, especially in the USA. Does Roedy ever worry about that? "You can never ignore it, you can't get complacent."

"Think global, act local" is a phrase that has enormous resonance with the way vaccination needs to be rolled out. But at MTV, Roedy says, "we went local before local was cool". Rather than shove western music wholesale into countries like India and China, they tweaked each local channel so that it would "respect and reflect local culture". That sounds like a fine approach to global health too.

Priya Shetty

## On Reflection Costing lives

Avoiding harm isn't always easy. For a vintage illustration of the difficulty, take a look at the short film made by the authors of the Fluid Expansion as Supportive Therapy (FEAST) trial published recently in *The New England Journal of Medicine*. I defy you not to weep.

For at least two decades doctors have believed that giving a bolus of fluid to children in shock as a result of fever or sepsis aided recovery. But no one had bothered to check. So Kath Maitland and colleagues tested the belief in a trial in 3000 children in east Africa. It was done in the "full expectation" that it would save lives, she said. Instead it cost lives. The trial was stopped early when results showed 89.4% of babies given the bolus survived compared with 92.7% given fluids more gradually. About 2 million children die annually of fever. That 3-4% difference might have translated into tens of thousands of lives lost had bolus fluid resuscitation continued to be given to children in line with current WHO guidelines.

The results of this remarkable trial are a reminder of the medical imperative never to rely on anecdotal experience. How many other treatments have been around so long that they have become an accepted part of the medical pantheon—beyond challenge?

Decades ago I learnt the story of retrolental fibroplasia and how premature babies were blinded in the 1950s by oxygen (it caused overgrowth of the capillaries in the retina). How could oxygen, the gas that makes life possible on this planet, cause blindness? The shock of that discovery has stayed with me. It was an early lesson that even seemingly benign treatments can cause serious harm. There have been countless examples since. It made intuitive sense to give anti-arrhythmic drugs including lidocaine and flecainide introduced in the late 1970s to patients with abnormal heart rhythm. Yet by 1990 they were estimated to be killing more Americans every year than died in the Vietnam War. Hundreds of thousands of children lost their tonsils in the UK during the 1950s in a surgical assault that, we now know, actually weakened their defence against infection rather than strengthening it.

One of the most serious charges made by "proper" doctors against practitioners of alternative medicine is that their treatments have never been subject to clinical trials. It is disturbing how often the same charge can be laid at orthodox medicine's door. First, do no harm? No—first be sure you know what it is you do.

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