EDITORIALS

- 449 Minimum alcohol pricing in England

 A start, but not enough, say Cordelia E M
 Coltart and Ian T Gilmore
 >> Research, pp 479, 480
- 450 High blood pressure in young people and premature death Alternative strategies are needed to stratify

risk and determine treatment thresholds, says Bryan Williams » Research, p 483

451 Statins for primary prevention of cardiovascular disease

Are not needed for people at very low risk and should be tailored to individual risk in everyone else, say Jaap W Deckers and Roger S Blumenthal

- 453 Pandemic influenza vaccines Are protective, but are limited by delays in availability, say John M Watson and Richard G Pebody
- **454** Accessible medical research New journal *BMJ Open* provides open access to even more research, says Trish Groves

LETTERS

- 455 Chronic disease to top agenda
- 456 Anticoagulation in AF; Generalised anxiety disorder
- 457 Research regulation; Getting welfare to work
- 458 Poor health and NHS reform; Assisted dying debate

NEWS

- 459 Doctors in UK alcohol network may refuse to sign action pledge because it is too weak English hospitals are failing to implement patient safety alerts
- 460 BMA calls on government to abandon price based competition in NHS Fewer hospitals to do children's heart surgery
- 461 BMA is pressed to oppose health bill NICE publishes guidance to improve
- diagnosis of food allergy in children 462 Asian healthcare needs to innovate Reproductive choice for girls is key to nations' development Italy plans random drug testing of healthcare staff Making a triumph out of an accident
- 463 Online tests reach the patients other tests can't reach
- 464 Patent rules must not hinder access to cheap drugs for poor Medical charity is expelled from Darfur Budget cutting US Republicans try to end funds for family planning and health reform
- 465 European Union introduces laws to stop false medicines

SHORT CUTS

466 What's new in the other general journals

FEATURES

- 468 *BMJ* Lifetime Achievement Award Whose legacy will readers celebrate this year?
- **470** A smarter way to practise The popularity of smartphones now outstrips that of the personal computer, but is their use by doctors a desirable trend? Tom Nolan reports

OBSERVATIONS

MEDICINE AND THE MEDIA

- 472 How the media helped ban mephedrone Jeremy Sare
 - LOBBY WATCH
- **473 The Work Foundation** Jane Cassidy

REALITY CHECK

474 Overdiagnosis and the dangers of early detection Ray Moynihan

ANALYSIS

475 Going local: devolving national pay for performance programmes The recommendation that part of the Quality and Outcomes Framework be devolved to local areas has not been widely implemented. However, the experience of Christopher Millett and colleagues shows that it can help focus attention on local health needs

RESEARCH

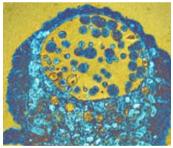
- 478 Research highlights: the pick of *BMJ* research papers this week
- 479 Association of alcohol consumption with selected cardiovascular disease outcomes: a systematic review and meta-analysis Paul E Ronksley, Susan E Brien, Barbara J Turner, Kenneth J Mukamal, William A Ghali » Editorial, p 449
- 480 Effect of alcohol consumption on biological markers associated with risk of coronary heart disease: systematic review and meta-analysis of interventional studies Susan E Brien, Paul E Ronksley, Barbara J Turner, Kenneth J Mukamal, William A Ghali » Editorial, p 449
- 481 Emotional distress in infertile women and failure of assisted reproductive technologies: meta-analysis of prospective psychosocial studies | Boivin, E Griffiths, C A Venetis
- 482 Peer support for patients with type 2 diabetes: cluster randomised controlled trial S M Smith, G Paul, A Kelly, D L Whitford, E O'Shea, T O'Dowd



Editorial, p 449; News, p 459 Research, p 479; Practice, p 490



Hypertension in youth, pp 450, 483



Testing for chlamydia at home, p 463



Legal highs, pp 472, 501

Food allergy in children, p 461

THIS WEEK

483 Association of blood pressure in late adolescence with subsequent mortality: cohort study of Swedish male conscripts Johan Sundström, Martin Neovius, Per Tynelius, Finn Rasmussen » Editorial, p 450

CLINICAL REVIEW

484 Treatment of breast infection J Michael Dixon, Lucy R Khan

PRACTICE

GUIDELINES

490 Diagnosis, assessment, and management of harmful drinking and alcohol dependence: summary of NICE guidance Stephen Pilling, Amina Yesufu-Udechuku, Clare Taylor, Colin Drummond, on behalf of the Guideline Development Group

A PATIENT'S JOURNEY

493 Alcoholism Anonymous, Adrian M Raby RATIONAL IMAGING

495 Role of brain imaging in early parkinsonism David P Breen, James B Rowe, Roger A Barker

OBITUARIES

- **499 Arthur Schatzkin** Found that high fibre diets don't prevent colorectal cancer
- 500 Hazel Baker; Samareswar Bhattacharya; Denis Vincent Primo D'Auria; Roger Duchene de Vere; Richard Charles Eve; Ronald Michael Vanreenen; Anna Wilkes

VIEWS AND REVIEWS

PERSONAL VIEW

501 "Legal highs" should be regulated as medicinal products Michael Evans-Brown, Mark A Bellis, Jim McVeigh

REVIEW OF THE WEEK

502 The Two Kinds of Decay by Sarah Manguso Leyla Sanai

BETWEEN THE LINES

503 Malice, intention, patience, and resource Theodore Dalrymple

MEDICAL CLASSICS

503 A Long Day's Journey into Night by Eugene O'Neill Birte Twisselmann

COLUMNISTS

504 The number needed not to treat Des Spence Bombs and tunnels Iames Owen Drife

ENDGAMES

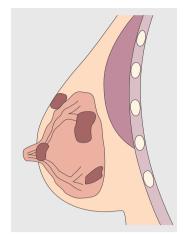
505 Quiz page for doctors in training

MINERVA

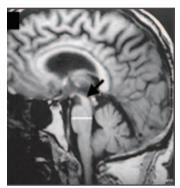
506 The "father of stress" and the tobacco industry, and other stories

FILLERS

- 492 A disorder of eating or of values?
- 498 Corrections and clarifications



How to treat breast infections, p 484



MRI showing supranuclear palsy, p 495

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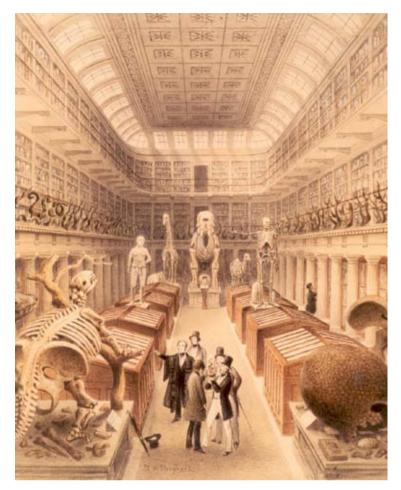
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THE WEEK IN NUMBERS

1-2 Number of alcoholic drinks consumed daily that lead to the lowest risk of incident coronary heart disease; for incident stroke it occurred with ≤ 1 drink per day (Research, p 479)

90% Accuracy of specialists making a clinical diagnosis of Parkinson's disease (Practice, p 495)

2004 Year of the introduction of the "world's largest pay for performance programme," the quality and outcomes framework (Analysis, p 475)

10% Proportion of US women who breast feed who have mastitis; a recent Cochrane review reported the incidence may be as high as 33% (Clinical Review, p 484)

PICTURE OF THE WEEK

A pencil and watercolour view of the College Museum at the Royal **College of Surgeons** of England circa 1842 by Thomas Hosmer Shepherd. On 1 March the exhibition London's Lost Museums: Nature and Medicine on Show opens at the Hunterian Museum at the college. The exhibition celebrates early natural history and anatomical collections once displayed in the capital that are now lost because of neglect, dispersal, or destruction. See www. rcseng.ac.uk/museums.

QUOTE OF THE WEEK

"You have a bunch of people there whose first duty is to their shareholders to deliver profits, and that means maintaining alcohol consumption and alcohol sales"

Nick Sheron, head of clinical hepatology at the University of Southampton, on the government's alcohol network (News, p 459)

QUESTION OF THE WEEK

Last week's poll asked, "Should helmets be compulsory for skiers and snowboarders?"

65% voted yes (total 526 votes cast)

This week we are asking, "Who should win the BMJ Group lifetime achievement award: George Alleyne, Richard Peto, or John Wennberg?" See FEATURE, p 468 O bmj.com Cast your vote

EDITOR'S CHOICE

Drinking: messages for the beer mat

Research continues to pile up that suggests that light drinking protects against cardiovascular disease

• Twitter Follow the editor, Fiona Godlee, at twitter.com/ fgodlee and the *BM*/s latest at twitter.com/bmj_latest

Career Focus, jobs, and courses appear after p 504

Our patient journey this week is from a man who nearly ruined his marriage and the health of his wife through excessive drinking (p 493). "Having been afraid of the effect on me if my wife found out about my drinking, I had never imagined the devastating effects on her. Suddenly I seemed to her a fraud." With a supportive family and general practitioner, the anonymous writer seeks and gets help, and the story has a happy ending: "I prefer to be a steady non-drinker who takes the odd glass. It seems to be working."

But not all such stories have a happy ending. In their editorial on the government's plans to set a minimum price for alcohol in England, Cordelia Coltart and Ian Gilmore outline the costs of alcohol consumption: in the UK alone 30 000-40 000 deaths, close to a million hospital admissions, and costs of £20bn to £55bn (€24bn-€66bn, \$32bn-\$89bn) (p 449). That price affects alcohol consumption is well known, but Coltart and Gilmore criticise the timidity of the government's proposals. "The price floor has been set so low that it will have no effect whatsoever on the health of the nation." They suspect the drinks industry of exerting its influence.

So that makes the latest NICE guidance on diagnosing, assessing, and managing harmful drinking and alcohol dependence as necessary as ever (p 490). Although most of the interventions have decent evidence behind them (information given in the version on bmj.com), the guideline writers point out that in the UK treatment services are fragmented and specialist alcohol services only patchily available. But the tools for identifying harmful drinking are widely available, and the article includes the AUDIT questionnaire on drinking patterns for use in primary care and non-specialist

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settings. But perhaps AUDIT should be even more accessible: the drinks industry could prove its social responsibility by printing it on beer mats and cocktail menus.

In the meantime research continues to pile up that suggests that light drinking protects against cardiovascular disease. In their systematic review and meta-analysis Paul Ronksley and colleagues update knowledge on the association of alcohol consumption and cardiovascular outcomes (p 479). Drinkers (compared with non-drinkers) had lower risks of coronary heart disease and stroke and death from cardiovascular disease and stroke, with the lowest risks in those who drank less than two drinks a day. A further systematic review by the same group shows that moderate drinking (compared with no drinking) resulted in favourable changes in biomarkers associated with coronary heart disease (p 480).

One of this year's finalists in the BMJ Group Lifetime Achievement Award has also researched the effects of alcohol: Richard Peto's studies in Russia into the effects of alcohol on mortality have led to greater controls on alcohol. He and the other two finalists, George Alleyne and John Wennberg, are the subject of a feature this week (p 468), the first of a series that will profile all the finalists for all 13 of the BMJ Group awards. The Lifetime Achievement Award is the only one where *BMJ* readers get to make the decision, so do cast your vote on bmj.com.

Jane Smith, deputy editor, BMJ jsmith@bmj.com

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