



MALCOLM WILLET

● ANALYSIS, pp 22, 25

NEWS

- Further care home scandals like Winterbourne are likely if no action is taken, warn campaigners
First NHS hospital to be run by private sector made £2.3m loss in first quarter
- Response is lukewarm to draft targets for NHS commissioners
One in three survivors of childhood meningitis is left with "hidden" after effects, three year study finds
- Cancer screening advice should be separate from invitations
Texas judge rules that Wakefield's libel action against *BMJ* cannot go ahead
- US health insurance firms issue \$1.1bn in rebates
Adverse events in children having surgery are common and need investigation, Canadian study concludes
Researchers call for national funding to monitor all birth defects



Adverse effects of surgery in children, p 4

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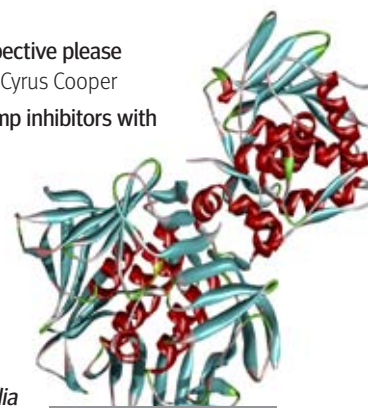
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- The pick of *BMJ* research papers this week
- ### RESEARCH NEWS
- All you need to read in the other general journals
- ### RESEARCH PAPERS
- Effectiveness of yearly, register based screening for chlamydia in the Netherlands: controlled trial with randomised stepped wedge implementation
Ingrid V F van den Broek et al
● EDITORIAL, p 8
 - Clopidogrel and interaction with proton pump inhibitors: comparison between cohort and within person study designs
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 - Cardiovascular safety of central nervous system stimulants in children and adolescents: population based cohort study
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 - Validation of treatment strategies for enterohaemorrhagic *Escherichia coli* O104:H4 induced haemolytic uraemic syndrome: case-control study
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 - Reoperation rates after breast conserving surgery for breast cancer among women in England: retrospective study of hospital episode statistics
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- Vitamin D: some perspective please
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- Prescribing proton pump inhibitors with clopidogrel
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- Screening for *Chlamydia trachomatis*
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● RESEARCH, p 14
- A national early warning score for acutely ill patients
Ann McGinley and Rupert M Pearse
- Ensuring open access for publicly funded research
Peter Suber



Shiga in HUS, p 7

HEAD TO HEAD

- Should we abandon cervical spine manipulation for mechanical neck pain?
Benedict Wand and colleagues argue that the risks of cervical spine manipulation are not justified, but David Cassidy and colleagues think it is a valuable addition to patient care

ANALYSIS

- Pharmaceutical R&D: What do we get for all that money?
Data indicate that the widely touted "innovation crisis" in pharmaceuticals is a myth. The real innovation crisis, say Donald Light and Joel Lexchin, stems from current incentives that reward companies for developing large numbers of new drugs with few clinical advantages over existing ones
- Raising the bar for market authorisation of new drugs
Huseyin Naci and colleagues find that requiring comparative evidence for market entry of new drugs could have numerous benefits, including providing incentives for development of drugs for conditions that have few treatment options



Is cervical spine manipulation justified? p 20

Articles appearing in this print journal have already been published on *bmj.com*, and the version in print may have been shortened. *bmj.com* also contains material that is supplementary to articles: this will be indicated in the text (references are given as w1, w2, etc) and be labelled as extra on *bmj.com*.

Please cite all articles by year, volume, and elocator (rather than page number), eg *BMJ* 2012; 344:d286.

A note on how to cite each article appears at the end of each article, and this is the form the reference will take in PubMed and other indexes.



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11 August 2012 Vol 345

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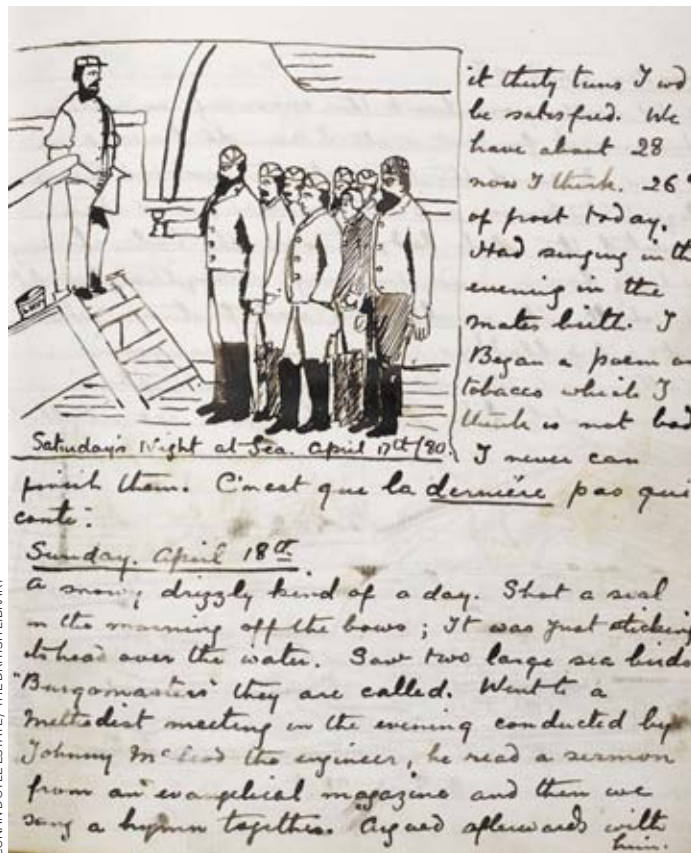
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Published weekly. US periodicals class postage paid at Rahway, NJ. Postmaster: send address changes to *BMJ*, c/o Mercury Airfreight International Ltd Inc, 365 Blair Road, Avenel, NJ 07001, USA. \$796.

Weekly

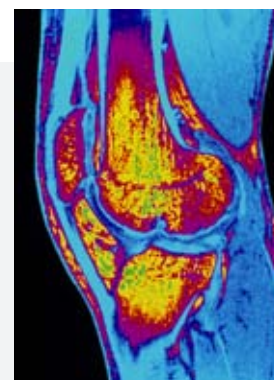
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PICTURE OF THE WEEK

Sir Arthur Conan Doyle's illustrated diary, documenting his adventures as a ship's doctor on the Arctic whaler *Hope* in 1880, is to be published by the British Library. The 20 year old medical student abandoned his studies in Edinburgh for almost a year to take part in this voyage. He described falling into the sea while seal hunting with the sailors: "I fell into the Arctic Ocean three times today, but luckily someone was always near to pull me out... The danger in falling in is that... you may be cut in two pretty well by two pieces of ice coming together and nipping you." *Dangerous Work: Diary of an Arctic Adventure* is to be published next month, and can be preordered online (www.bl.uk/shop).



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Vitamin D: some perspective please
Should we screen for type 2 diabetes?

MOST READ ON BMJ.COM

The truth about sports drinks
Shift work and vascular events
Association between psychological distress and mortality
Management of osteoarthritis of the knee
How a charity oversells mammography

RESPONSE OF THE WEEK

Give me a child until he is seven and I care not who has him after that.

Early exposure to adverse experiences in childhood have been clearly shown to adversely affect health in multiple areas. Life is a marathon, not a sprint, so it is not surprising that being programmed for maladaptive stress responses in childhood has adverse effects upon cardiovascular health. Could it be otherwise?

Stephen R Workman, physician, Halifax, Nova Scotia, Canada, in response to "Association between psychological distress and mortality: individual participant pooled analysis of 10 prospective cohort studies" (*BMJ* 2012;345:e4933)

BMJ.COM POLL

Last week's poll asked: "Should patients be able to control their own records?"

58.3% voted yes (total 667 votes cast)

► Feature (*BMJ* 2012;345:e4905)

This week's poll asks: "Has the current economic downturn adversely affected the health of your patients?"

► Observations (*BMJ* 2012;345:e5183)

► Vote now on bmj.com

EDITOR'S CHOICE

Going for gold

Innovation should be rewarded not by patents but by huge cash prizes

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The UK government has been taking the opportunity of the Olympics to boost a few grand ideas. On the last day of the Olympics, for example, the prime minister will host a high level summit on global nutrition and food security (doi: 10.1136/bmj.e5335), a subject that the *BMJ* plans to return to over the next few months. In the meantime, at last week's Global Health Policy Summit on innovation in health policy, the prime minister repeated his promise to harness "the incredible data collected by the NHS" (about all of us), which he hopes will make the UK the best place in the world to conduct research (doi: 10.1136/bmj.e5285).

Innovation is also a theme running through our two Analysis articles. In the first Donald Light and Joel Lexchin puncture some of the myths about drug development (p 22). They show, for example, that the innovation pipeline has not dried up: drug development has been relatively constant since the 1960s—and it's not so much an innovation pipeline as a derivative pipeline. Also, the public sector, and not industry, funds most of the basic research behind drug development. The real business model for drugs, the authors argue, "centres on turning out scores of minor variations, some of which become market blockbusters."

Their solutions are to insist that new drugs are licensed only if they offer a therapeutic advantage over existing drugs, that drug regulators should be funded by public funds rather than fees from the pharmaceutical industry, and that innovation should be rewarded not by patents but by huge cash prizes.

Huseyin Naci and colleagues examine what it would mean if drugs were licensed only if they proved better

than existing ones (p 25). Prescribers would, for example, have better information on relative harms and benefits from the outset and manufacturers would be encouraged to make real advances.

The argument for private companies taking over roles in healthcare formerly filled by the private sector is that they bring innovation and efficiencies. But the evidence in this week's *BMJ* undermines that belief. Nigel Hawkes examines how Circle, a private company that took over a debt ridden public hospital in Huntingdon, is doing six months later (p 19). Financially it is not doing so well, but it has done a grand job on the public relations front, boasting lower waiting times and high approval ratings from patients. Hawkes wonders whether Circle has truly transformed the hospital or "merely restored its clinical performance to what it was before its financial problems became insupportable."

Worse evidence emerges over the disability assessments done for the Department of Work and Pensions by the company Atos. Margaret McCartney has written about this topic before (*BMJ* 2011;342:d599) and returns to it in her review of two television programmes that looked at Atos's assessments (p 34). The criteria on which the judgments are made are not public, and McCartney concludes that the assessments—done without access to medical notes, test results, or expert opinions—cannot distinguish people who are fit for work from those who are not. Her ire is also aimed at the health professionals who lend legitimacy to this dreadful process.

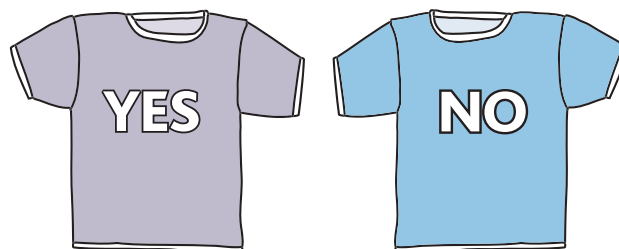
Jane Smith, deputy editor, *BMJ* jsmith@bmj.com

Cite this as: [BMJ](https://doi.org/10.1136/bmj.2012.345.e5363) 2012;345:e5363

Polls

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