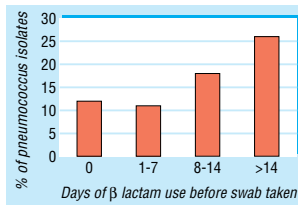


subsequent diabetes. Montgomery and Ekblom (p 26) suggest that in utero exposure to smoking results in life long metabolic dysregulation, possibly owing to fetal malnutrition or toxicity.

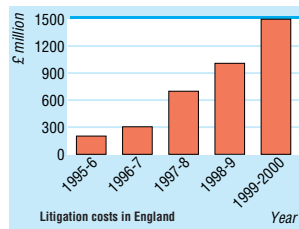
## $\beta$ lactam use increases chance of children carrying penicillin resistant pneumococci



The likelihood of a child carrying pneumococci resistant to penicillin increases with longer previous use of  $\beta$  lactam. Nasrin and colleagues (p 28) found that the presence of  $\beta$  lactam resistant pneumococci was significantly associated with length of  $\beta$  lactam use in the previous two months and that the probability of carriage of the resistant organisms increased by 4% for each additional day of  $\beta$  lactam use in the previous six months.

## Australian and English courts are becoming more patient centred

In the past decade both English and Australian courts have adopted a more patient centred standard in deciding what risks doctors must disclose to patients, leading to an increase in litigation costs for clinical negligence. In Australia, the courts have held doctors negligent for failure to disclose risks in a number of cases, including anal stenosis after haemorrhoidectomy, perforation of the uterus after insertion of an interuterine device, and hypertrophic scarring after laser removal of tattoos. Skene and Smallwood (p 39) recommend that Australian and English courts put more emphasis on the needs of patients to give greater weight to individual rights in both countries.



## Editor's choice

### The big events of 2001

Fifty years from now, 2001 might be remembered for two events: the attacks of September 11 and the publication of the report of the Commission on Macroeconomics and Health (p 7 and 12). The commission, which was set up by the World Health Organization, argues that extra expenditure of \$27bn (£18 700m) on health by the rich world in the poor world could save 8 million lives a year—and boost the global economy.

If the world takes up the bold challenge of the commission then the report will be remembered as a turning point as important as September 11. If the world doesn't respond then the report will remain just words—and the world will stay a place of inhuman inequalities.

For years economists saw investment in health as a nice extra for poor countries. It wasn't central to development. That view has now changed, and the commission argues that a dollar invested in health will bring a better return in development than almost any other investment. An investment of \$163bn by 2007 will not only save 8 million lives a year but also produce an economic gain of \$186bn. But will this happen?

The record of the rich countries is poor. Currently only five countries meet the target of spending 0.7% of their gross domestic product on development. Britain spends 0.26% and the United States—the richest and the stingiest—less than 0.1%. Nevertheless, Jeffrey Sachs, Harvard economist and chairman of the commission, says that he is optimistic: "September 11 has raised the awareness of what social collapse in one part of the world can mean for the rest of the world" (p 12). America's Congress took only three days after September 11 to appropriate \$40bn for the war against terror. The price for 8 million lives is \$25 for every citizen of a rich country each year. The presents you bought for Christmas, most of them already discarded, no doubt cost you—yes, you—much more.

Like all human beings we are of course much more concerned with our own problems than those of others. Doctors everywhere, but especially in Britain, have been getting a bad press—although worldwide respect for them remains high (p 11).

Two medicine and media pieces tell the stories of doctors hounded by the media and discuss the difficulties they have in setting the record straight (p 55 and 56). One of the doctors suggests that the media could ensure balance by obtaining written agreement from the complainants, giving permission for the doctor to speak about the specifics of the case. The *BMJ* itself is also taken to task for publishing an irresponsible editorial (p 41). Our defence (perhaps lame) might be that debate is usually messy.

Debates don't come much messier than those on globalisation, 2001's other big issue. Four months ago we published an article by Richard Feachem entitled "Globalisation is good for your health, mostly" (2001;323:504-6). The letters pages buzz with a selection of the 33 responses that the article provoked (p 44).

To receive Editor's choice by email each week subscribe via our website: [bmj.com/cgi/customalert](http://bmj.com/cgi/customalert)