

EDITOR'S CHOICE

Welcome to the new design

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This week we launch a new design for the print journal and for bmj.com. Both are the result of your feedback. We hope you like them. We'll tell you more about the new website next week when it is safely up and running. We hope you will forgive, and let us know about, any glitches in the meantime.

In print, the redesign is an evolution of what's gone before. It consists mainly of a reordering of the content, though there are other subtle changes that the sharp eyed among you may notice. We have brought News to the front, in line with other print periodicals, followed by Editorials. Research too has been brought forward. This week we have an array of topics and study designs, and as always the full text and additional features are on bmj.com. The research section also now contains summaries of research published elsewhere (previously called Shortcuts, now called Research News, and still produced, I am glad to say, by Alison Tonks) as well as our much accessed and cited Research Methods and Reporting articles, although we don't have one this week.

Beyond that comes our magazine content: journalistic features, analysis articles, head to head debates, letters to the editor, columnists, personal views, book reviews, and obituaries. In this section this week we publish data from the Committee of Publication Ethics on the problems editors face when asking institutions to investigate research misconduct (doi:10.1136/bmj.d6586). COPE's chair, Liz Wager, has audited the 155 cases of research misconduct submitted to the committee in the past four years. In 24 of them, editors came up against problems at the authors' institutions, ranging from non-response to failure to investigate properly or at all. Wager concludes that institutions have an inherent conflict of interest, and calls for editors and institutions to work together to overcome what she calls a culture of secrecy.

On this same topic in the features section, we return to the MMR scare, having been sent some previously unpublished data relating to the now retracted Lancet paper linking MMR vaccine to autism and bowel disease. David Lewis was given a collection of pathology grading sheets by Wakefield and, as he explains in his rapid response on bmj.com (reproduced on p 000), he believes that they show that Wakefield did not intentionally misinterpret the children's bowel pathology. But far from exonerating Wakefield of fraud, the new information shows, according to our expert reviewers (doi:10.1136/bmj.d6979, doi:10.1136/bmj.d6985), that the children's bowels were almost all normal, and it raises serious questions about the role of his co-authors (doi:10.1136/bmj.d6823). In a linked editorial I suggest that these are questions that the institution, UCL, has so far failed to address, and that it's time for parliament to step in (doi:10.1136/bmj.d7284).

From there we move on to our clinical education section, which this week carries a detailed review of how to diagnose and manage anal cancer (doi:10.1136/bmj.d6818), a summary of the new NICE guidelines on colorectal cancer (doi:10.1136/bmj.d6751), and an account of how to investigate recurrent angio-oedema (doi:10.1136/bmj.d6607). You'll also find Endgames.

The Careers and jobs section, which comes next, will be the main reason for some of you to open the journal. Then comes Des Spence, who continues to delight and annoy in equal measure (doi:10.1136/bmj.d7244), and our other regular columnists. Finally, because we didn't dare to move her, comes Minerva. For those of you who read the print journal from back to front, start here.

Cite this as: BMJ 2011;343:d7299

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