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Brian Greenwood has spent 30 years working in sub-Saharan Africa coming up with ways to control malaria among other things. Geoff Watts talks to the man who is one of the joint winners of the Hideyo Noguchi Africa Prize

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In countries where elimination is still not feasible, Jo Lines, Allan Schapira and Tom Smith argue that the best strategy is to work towards universal coverage of key interventions

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Global warming will increase allergies and asthma, p 428
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438 Randomised controlled trial of Alexander technique lessons, exercise, and massage (ATEAM) for chronic and recurrent back pain

In adults with recurrent or chronic low back pain all three interventions led to better self reported function and less pain at three months, but only exercise prescribed by general practitioners and training in the Alexander technique had sustained benefit at one year

Paul Little, George Lewith, Fran Webley, Maggie Evans, Angela Beattie, Karen Middleton, Jane Barnett, Kathleen Ballard, Frances Oxford, Peter Smith, Lucy Yardley, Sandra Hollinghurst, Debbie Sharp

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441 Self reported receipt of care consistent with 32 quality indicators: national population survey of adults aged 50 or more in England

The gap between recommended and received health care, as reported by more than 8000 people, was greatest for chronic conditions that reduce quality of life of older people

Nicholas Steel, Max Bachmann, Susan Maisey, Paul Shekelle, Elizabeth Breeze, Michael Marmot, David Melzer

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444 Effect of integration of supplemental nutrition with public health programmes in pregnancy and early childhood on cardiovascular risk in rural Indian adolescents: long term follow-up of Hyderabad nutrition trial

Children followed for up to 15 years after they and their mothers were given a daily dietary supplement of corn-soya blend and soybean oil had better cardiovascular profiles in adolescence than controls


449 Physical control and coordination in childhood and adult obesity: longitudinal birth cohort study

Poor coordination and hand control at ages 7 and 11 were associated with obesity at age 33, regardless of socioeconomic conditions and body mass index in childhood

Walter Osika, Scott M Montgomery

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N J Sebire, M J Seckl

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459 Qualitative research: Grounded theory, mixed methods, and action research

These commonly used methods are appropriate for particular research questions and contexts

Lorelei Lingard, Mathieu Albert, Wendy Levinson

RESEARCH PUBLISHED ONLINE

Ethnic stereotypes and the underachievement of UK medical students from ethnic minorities: qualitative study

BMJ, doi:10.1136/bmj.a1220
Katherine Woolf, Judith Cave, Trisha Greenhalgh, Jane Dacre

Implementation of computerised physician order entry (CPOE) and picture archiving and communication systems (PACS) in the NHS: quantitative before and after study

BMJ, doi: 10.1136/bmj.a939
Simon Collin, Barnaby C Reeves, Jane Hendy, Naomi Fulop, Andrew Hutchings, Eugenia Priedane
Lessons in Alexander technique in patients with low back pain that when followed by exercise was almost as effective as 24 lessons (Research p 438)

1-3 in 1000 Pregnancies affected by hydatidiform mole (Clinical Review p 453)

50-500 Secondary cases of malaria produced by one primary case in tropical Africa (Analysis p 435)

48 hours Planned maximum working week from 2009 under European legislation (Editorial p 421)

61-90% Predicted rise in pollen counts in ragwort as a result of higher levels of carbon dioxide (News p 428)

“Doctors with responsibility for a patient with a knife wound should ensure that the police are told” (News p 426)

“Participants reported better [care for] conditions included in the UK general practice pay for performance contract than those excluded” (Research p 441)

“Nothing can quite prepare you for... the sickening awareness of your first big mistake” (The Bigger Picture p 464)

“Key features of grounded theory are its iterative study design, theoretical (purposive) sampling, and system of analysis” (Practice p 459)

“Dare to use your own intelligence!” (Observations p 434)
EDITOR’S CHOICE

Several horsemen of the apocalypse

The eradication of smallpox was meant to be the harbinger of future triumphs over infectious diseases. But it’s looking more and more like a one-off. Polio was meant to have followed smallpox by 2000, but this deadline has been shifted forward several times.

Similarly, tuberculosis refuses to go away. As a recent *Lancet* review reminds us, a third of the world is infected with *Mycobacterium tuberculosis*, and two million people die from tuberculosis every year, even though the BCG vaccine has been available for more than 75 years. For reasons unknown, this vaccine doesn’t seem to “work” in much of the world. The causative organism always keeps a few jumps ahead of our attempts to stamp it out. The emergence of extensively drug resistant tuberculosis on the heels of multidrug resistant tuberculosis is scary for the whole world, with South Africa currently on the front line of the battle (p 427).

Two articles in this week’s journal and an interview available on bmj.com focus on malaria, another infection with a dispiriting recent history. As Geoff Watts tells us in his profile of Brian Greenwood, malaria kills one million people annually—most of them African children (p 432). Professor Greenwood, who has just won the Hideyo Noguchi prize for medical research in Africa, is best known for showing that mosquito nets impregnated with insecticide reduce malarial infection. He thinks that, for most parts of Africa, eliminating malaria—that is, preventing its transmission—is a more realistic goal than eradication. He favours “squeezing the map”—starting at the edges of the malaria belt and moving inwards.

Greenwood’s research unit is a beneficiary of the Bill and Melinda Gates Foundation, which has challenged partners to adopt the goal of eradication. Drawing on lessons from the first global malaria eradication programme (1955-69), Jo Lines and colleagues have a gloomy response: even time limited elimination remains unfeasible with existing tools (p 435). Instead of eradicating or eliminating malaria, they favour the more modest goal of reducing the burden of disease—firstly, by prioritising universal coverage of a few interventions. They’re no fans of “shrinking the map” if that entails diverting resources from high burden areas to places where elimination seems realistic.

On bmj.com you can hear Deborah Cohen interviewed about how Ethiopia has emerged as a beacon of hope among African countries battling malaria (http://podcasts.bmj.com/bmj/). With an annual health spending of $7 per capita, it’s highly dependent on outside aid to sustain its antimalarial programmes. What happens when the Global Fund’s support ends in a few years is already worrying health workers.

For a little light relief, you might seek out Theodore Dalrymple’s dissection of John Buchan’s last book, *Sick Heart River* (p 465). Published posthumously in 1941, it concerns a man whose diagnosis of fatal tuberculosis leads him on a voyage of self discovery to Canada’s frozen wastes. Buchan was governor general of Canada at the time and a martyr to peptic ulcer. Dalrymple describes him eking out “his bland poached eggs at elaborate state dinners while everyone around him gorged themselves.” Buchan’s doctors weren’t to know that peptic ulcer had an infective basis.

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**THIS WEEK**

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