EDITORIALS

247 Exercise after stroke
Is beneficial but how best to increase physical activity is unknown, says Gillian Mead

Research, p 273

248 Oral quinine for the treatment of uncomplicated malaria
Is ineffective in outpatients and should be used only in rare cases, say Hugh Reyburn and colleagues

Research, p 283

249 Eating healthily and rising food prices
Implementing a rational food policy requires a political process that is transparent, documented, and accountable, says Tim Lobstein

Analysis, p 269

250 Making information about clinical trials publicly available
Open access to information on the EudraCT database will improve transparency, says Rosalind L Smyth

Analysis, p 269

251 Photodynamic therapy and cancer
Promising results need to be followed by development of more selective drugs, say Stanley B Brown and Sally H Ibbotson

LETTERS

253 A/H1N1 flu; NICE on back pain
254 Abdominal aortic aneurysm
255 Statistics for health; Patient safety
256 Intravenous fluids in surgery; Learning from John Lewis; Prosthetic joint infection

NEWS

257 Swiss government considers stricter law on assisted suicide
Doctors call for guidance on prioritising A/H1N1 critically ill

258 Doctors in NHS disciplinary hearings can now have lawyer
President of British Pain Society is forced from office over NICE guidance on low back pain

259 Government proposes group activities to boost mental health
One in four multiple pregnancies at London clinic came from fertility treatment overseas

260 Auditors criticise FDA for failing to track workload and costs
Talks on US healthcare reforms are halted until the autumn
Man with transplanted arms shows his skills

261 Top UCLA surgeon is demoted for undisclosed payments
Nicaragua’s abortion ban criminalises doctors and endangers lives of women, says report

SHORT CUTS

262 What’s new in the other general journals

FEATURES

264 Name and shame
When health workers raise the alarm about standards of care, they can end up feeling as guilty as the organisations they expose, Jane Cassidy reports

OBSERVATIONS

YANKEE DOODLING

268 Who will pay and who will say no?
Douglas Kamerow

ANALYSIS

269 Potential causes and health effects of rising global food prices
High food prices affect not only our pockets but also our health. Karen Lock and colleagues examine the cause of recent increases and discuss what can be done to minimise harm

RESEARCH, CLINICAL REVIEW, AND PRACTICE  See next page

OBITUARIES

297 Jean Dausset; Sidney Temple Armstrong; Victor Stanley Brookes, Robert Davies Cundall; John Alexander McConachie; Hugh Alexander McDonald; Edward Hamilton Dalrymple Phillips; Salih Yassin Salih

VIEWS AND REVIEWS

PERSONAL VIEW

299 The key to effective whistleblowing is interprofessional collaboration
John Roddick

REVIEW OF THE WEEK

300 Bullets come first
Gerry Shaper

BETWEEN THE LINES

301 Mesmerising evidence
Theodore Dalrymple

MEDICAL CLASSICS

301 The ECG made easy
David Warriner

COLUMNISTS

302 Delirious
Des Spence
When my daughter sailed home
Mary E Black

ENDGAMES

303 Quiz page for doctors in training

MINERVA

304 Neural transplants for Huntington’s disease and other stories

FILLERS

278 What’s the BM?
289 A clear vision of our finances
294 Consulting with veiled students

Effective whistleblowing, p 299
RESEARCH

273 ExStroke Pilot Trial of the effect of repeated instructions to improve physical activity after ischaemic stroke: a multinational randomised controlled clinical trial
For people over 40 years old in Denmark, Estonia, Poland, and China, this intervention had no significant effect on physical activity, recurrent vascular events, or activities of daily living after mild stroke. Gudrun Boysen, Lars-Henrik Kranup, Xianrong Zeng, Adam Oskedra, Janika Kørv, Grethe Andersen, Christian Glud, Anders Pedersen, Marianne Lindahl, Lotte Hansen, Per Winkel, Thomas Truelsen, for the ExStroke Pilot Trial Group

276 Effect of unsupervised home based proprioceptive training on recurrences of ankle sprain: randomised controlled trial
Training using a balance board and exercise instructions prevented self reported recurrences among these active Dutch sports participants aged 12-70, with a number needed to treat of nine. Maarten D W Hupperets, Evert A L M Verhagen, Willem van Mechelen

279 Changes in white matter as determinant of global functional decline in older independent outpatients: three year follow-up of LADIS (leukoaraiosis and disability) study cohort
Among patients with non-disabling complaints in whom brain magnetic resonance imaging found severe white matter changes, about two thirds became disabled or died within the next three years. Domenico Inzitari, Giovanni Pracucci, Anna Poggesi, Giovanna Carlucci, Frederik Barkhof, Hugues Chabriat, Timo Erkinjuntti, Franz Fazekas, José M Ferro, Michael Hennerici, Peter Langhorne, John O’Brien, Philip Scheltens, Marieke C Visser, Lars-Olof Wahlund, Gunhild Waldemar, Anders Wallin, Leonardo Pantoni, on behalf of the LADIS Study Group

283 Effectiveness of quinine versus artemether-lumefantrine for treating uncomplicated falciparum malaria in Ugandan children: randomised trial
In a population at high risk for malaria, a seven day course of quinine was significantly less effective at eliminating the parasites than artemether-lumefantrine. Jane Achan, James K Tibenderana, Daniel Kyabayanize, Fred Wabwire Mangen, Moses R Kamya, Grant Dorsey, Umberto D’Alessandro, Philip J Rosenthal, Ambrose O Talisuna

CLINICAL REVIEW

284 Spontaneous intracerebral haemorrhage
Rustam Al-Shahi Salman, Daniel L Labovitz, Christian Stapf

PRACTICE

290 Uncertainties page:
Should antihistamines be used to treat anaphylaxis?
D A Andreae, M H Andreae

292 A patient’s journey:
Living with a benign brain tumour
Anne McDonald

295 10-minute consultation:
Thyroid swellings
Rebecca Hatton, Madhukar Patel, Devasenan Devendra

296 Drug points:
Rimonabant may induce atrial fibrillation
Guiseppe Cocco, David Chu

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To mark the online availability of every BMJ article published since the first issue in October 1840 we’re offering a prize for the most interesting use of the journal’s archive. The use should be actual, not hypothetical.

To enter please describe in an article of up to 1700 words your use of the BMJ archive. Send it via submit.bmj.com, choosing “Competition” as the article type.
The deadline is 30 September 2009 and the winning article will be published in this year’s Christmas BMJ.
THE WEEK IN NUMBERS

816 Number of confirmed deaths from swine flu globally (News, p 257)

7/10 Proportion of doctors who said they had raised a concern with their trust (Feature, p 264)

100 million Number of people worldwide who have been pushed into poverty by rising food prices (Analysis, p 269)

35% Reduction in risk for recurrence of ankle sprain in athletes on a home based proprioceptive training programme (Research, p 276)

10% Proportion of all strokes in the UK caused by spontaneous intracerebral haemorrhage (Clinical Review, p 284)

THE WEEK IN QUOTES

“It is totally unacceptable for guideline developers to . . . have their professional integrity called into question” (Letter, p 253)

“NHS employers should now allow medical practitioners to bring a legal representative to disciplinary hearings” (News, p 258)

“Older people with extensive age related changes in white matter are at high risk of functional decline over the next three years” (Research, p 279)

“Antihistamines have no proved clinical effect on the immediate and life threatening symptoms of anaphylaxis” (Practice, p 290)

“Were you outraged by those professionals who turned a blind eye to the likes of Robert Maxwell, Equitable Life, Shipman . . . ?” (Personal View, p 299)
Transparency

Transparency is a major theme in this week’s BMJ. It’s explicit in Rosalind Smyth’s editorial on making information about clinical trials publicly available (p 250). She explains how trial registration in Europe has come through an unusual route, through regulations on testing drugs for use in children. These require all trials of paediatric drugs conducted in Europe to be made publicly available on the EudraCT database. There seemed no logic to insisting on information on trials in children but not in adults, so now the database will include protocols of all trials, with a requirement for results to be available too.

Perhaps surprisingly, transparency also emerges as an important element in improving the world’s supply of healthy food. In their article on the causes and effects of rising food prices Karen Lock and colleagues describe how agricultural subsidies favour high fat, energy dense foods at the expense of healthy ones such as fruit and vegetables (p 269). Changing these policies requires action at a global level because of the influence of large producers in forums like the World Trade Organization. Indeed, in his accompanying editorial, Tim Lobstein argues that the intractable problems in food policy lie in “the power relationships . . . between highly financed corporations . . . and the governmental agencies such as the United Nations Food and Agriculture Organization, the World Health Organization, and the World Trade Organization” (p 249). These dealings occur mostly out of view and “need to become transparent, routinely documented, and exposed to challenge and accountability.”

Transparency is, of course, implicit in what whistleblowers do. In this week’s feature Jane Cassidy describes some well known episodes of whistleblowing—and what happened to the whistleblowers (p 264). Too often organisations find it easier to suppress the message and vilify the messenger than to tackle the problem that the whistleblower has identified. Dr Steve Bolsin, who first drew attention to high mortality rates in babies undergoing cardiac surgery at Bristol Royal Infirmary, now works in Australia. He thinks that the more supportive culture in Australia, together with a strictly enforced public interest disclosure law, makes it easier for doctors there to speak out and prevent problems.

John Roddick’s Personal View, however, suggests that, in Britain at least, the problem of whistleblowing isn’t confined to medicine (p 299). He’s a retired engineer who thinks that the corporate climate and other pressures make it difficult for professionals to make a stand. But he wants to encourage them to reassert their “true professionalism” and proposes that the professions should band together to provide confidential support and advice for those in other disciplines who face an incident that compromises their integrity.

Meanwhile Bob Roehr reports that it is Barack Obama’s failure to level with the public, by focusing on abstract principles rather than detail, that has delayed until autumn a vote on US healthcare reform (p 260). In his Observations column Doug Kamerow observes despairingly that no one in US health care wants to give anything up—and nobody wants to be the one who says no to inappropriate care (p 268).
**LATEST ON PANDEMIC FLU**

We have launched a [pandemic flu website](http://pandemicflu.bmj.com/) with daily updates and links to the most reliable sources of information. The site brings doctors and healthcare professionals the latest information on prevention, symptoms, testing, and treatment. We've published articles, podcasts, learning modules, and other resources, including information for patients, on a range of pandemic flu issues. We would also like to hear from you on our [flu forum](http://flu.bmj.com on doc2doc).

**LATEST RESEARCH**

Cervical screening according to age and HPV status

Cervical screening in women aged 20-24 has little or no impact on rates of invasive cervical cancer up to age 30, according to this UK population based case-control study of prospectively recorded data. By contrast, screening older women leads to a substantial reduction in incidence of and mortality from cervical cancer, say Peter Sasieni and colleagues. A simultaneously published population based cohort study from Costa Rica concludes that testing for short term HPV persistence might be clinically useful for assessing the risk of cervical intraepithelial neoplasia grade II+ among women who test positive for carcinogenic HPV. The accompanying editorial confirms that cytological screening under age 25 has very low effectiveness but concludes that after that, HPV genotyping helps to stratify risk.

Performance evaluation of a new rapid urine test for chlamydia in men

The performance of the new Chlamydia Rapid Test with first void male urine samples indicates that it would be an effective diagnostic tool for chlamydial infection in men, according to this UK prospective cohort study. The availability of test results within an hour allows for immediate treatment and contact tracing, potentially reducing the risks of persistent infection and onward transmission. It is also potentially useful as a simple and reliable alternative to nucleic acid amplification assays for testing of male urine in chlamydial screening programmes in high prevalence settings.

See this and other recent research articles at http://www.bmj.com/channels/research.dtl.

**LATEST PODCASTS**

Helen MacDonald talks to Steven Greenberg about his research into citation whispers - how citation distortions create unfounded authority.

Duncan Javies discusses with Jane Achan about how effective artemisinin based therapies are as a first line treatment for uncomplicated malaria, and Deborah Cohen takes us through this week’s news.

Listen to this and other podcasts at [http://podcasts.bmj.com/bmj/](http://podcasts.bmj.com/bmj/).

**WHAT’S NEW ON BMJ.COM**

New guest blogger Annabel Bentley wonders whether in light of the swine flu pandemic, advice to pregnant women has finally gone too far. She concludes that it has and thinks that, “The conflicting messages about masks and staying at home dilute the key messages to everyone about hand washing, sneezing and disposing of tissues.”

Louise Kenney writes about a new job that she will start shortly at the Hospitalito Atlan in Guatemala. The challenge that she will face communicating to patients in Spanish is giving her sleepless nights. She has been practising her Spanish a lot, but that may not be the worst of her problems, as she says: “I’ve been well informed by someone who has worked in the Hospitalito Atlan before that I really need not panic about the Spanish, that, I quote, ‘it will be the least of my worries.’”

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