EDITORIALS

1 Traffic speed zones and road injuries
   Speed management is key, says Shanthi Ameratunga
   > Editorial, p 1

2 Prevention of postoperative venous thromboembolism
   Should cover more patients, and possibly go on for longer, says Alexander T Cohen
   > Research, p 32

3 Survivors of childhood cancer
   Need a network of specialists that cross age boundaries, say Meriel Jenney and Gail Levitt
   > Research, p 34

4 “Greenwash” at the climate change summit in Copenhagen
   Failure of leadership challenges doctors to lead by example, says Michael Wilks
   > Letters, p 7

5 Another five year plan for the NHS
   Sets out rights for patients and security for staff, but can they be delivered, asks Chris Ham
   > News, p 11

LETTERS

7 Climate change; Commerce and malnutrition
8 Emergency sedation in children; Aspirin and diabetes; Metformin and lactic acidosis
9 Ethics in sports medicine; Letting go
10 Doctors’ hours; Wendy Reid replies to Roy Pounder

NEWS

11 New procedures are needed for climate talks in Mexico
   Drug firm censured for misleading promotional material
12 All English trusts must report safety incidents from April 2010
   Free speech is at risk from UK libel law, says Danish radiologist accused of defamation
13 Efforts to widen access to medical profession are failing, says BMA
   Regulator calls for faster improvements at troubled Mid Staffordshire foundation trust
14 HIV drug patent pool offers hope of cheap drugs to millions
   Dutch law lacks clarity over life ending treatment in sick newborns
15 BMJ Group announces its shortlists for awards
16 BMJ Group Lifetime Achievement Award

SHORT CUTS

18 What’s new in the other general journals

OBSERVATIONS

19 A spanner in the herbal works
   Nigel Hawkes

MEDICINE AND THE MEDIA

20 Thyroxine: anatomy of a health scare
   Kate Faasce, Tim Cundy, and Keith Petrie

FEATURES

22 Aubrey Blumsohn: academic who took on industry
   Aubrey Blumsohn forfeited his job after going public with concerns about access to Procter and Gamble’s research data on the osteoporosis drug risedronate. Clare Dyer talks to him about his experience

ANALYSIS

26 The NHS in the simulator
   NHS funding is set to fall in real terms but it is unclear how the system will cope. Martin McShane and Richard Smith describe their experience of a simulation exercise designed to find out

RESEARCH

30 Research highlights: the pick of BMJ research papers this week
31 Effect of 20 mph traffic speed zones on road injuries in London, 1986-2006: controlled interrupted time series analysis
   Chris Grundy, Rebecca Steinbach, Phil Edwards, Judith Green, Ben Armstrong, Paul Wilkinson
   > Editorial, p 1
32 Duration and magnitude of the postoperative risk of venous thromboembolism in middle aged women: prospective cohort study
   Siân Sweetland, Jane Green, Bette Liu, Amy Barrington de González, Marianne Canonico, Gillian Reeves, Valerie Beral, on behalf of the Million Women Study collaborators
   > Editorial, p 2
33 Prospective associations between objective measures of physical activity and fat mass in 12-14 year old children: the Avon Longitudinal Study of Parents and Children (ALSPAC)
   Chris J Ridgock, Sam D Leary, Andy R Ness, Steven N Blair, Kevin Deere, Calum Mattocks, Alex Griffiths, George Davey Smith, Kate Tilling

CONTROVERSY

33 South African health minister dies, p 12

WIDENING ACCESS TO MEDICINE, p 13

Academic who took on industry, p 22

Speed and road deaths: is this the limit?

Editorial, p 1
Research, p 31
Cardiac outcomes in a cohort of adult survivors of childhood and adolescent cancer: retrospective analysis of the Childhood Cancer Survivor Study cohort
Daniel A Mulrooney, Mark W Yeazel, Toana Kawashima, Ann C Mertens, Pauline Mitby, Marilyn Stovall, Sarah S Donaldson, Daniel M Green, Charles A Sklar, Leslie L Robison, Wendy M Leisenring

Risk of cardiovascular disease and all cause mortality among patients with type 2 diabetes prescribed oral antidiabetes drugs: retrospective cohort study using UK general practice research database
Ioanna Tzoulaki, Mariam Molokhia, Vasa Curcin, Mark P Little, Christopher J Millett, Anthea Ng, Robert I Hughes, Kamlesh Khunti, Martin R Wilkins, Azeem Majeed, Paul Elliott

Bias in identifying and recruiting participants in cluster randomised trials: what can be done?
Sandra Eldridge, Sally Kerry, David J Torgerson

Management of atrial fibrillation
Carmelo Lafuente-Lafuente, Isabelle Mahé, Fabrice Extramianai

Time for a break?
Refresh yourself.

BMJ Masterclasses
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THE WEEK IN NUMBERS

18% Prevalence of atrial fibrillation in people older than 85; up from 0.7% in 55-59 year olds (Clinical Review, p 40)

1.1 million People in the UK who have an eating disorder (Practice, p 46)

69.1% Relative risk of women being admitted with venous thromboembolism within six weeks of inpatient surgery compared with no surgery (Research, p 32)

QUOTE OF THE WEEK

“For the past 20 years people who ought to know better have been bashfully embracing one evidence free treatment after another, for fear that refusing to do so would make them seem reactionary old fuddyuddies”

Nigel Hawkes, on the Royal College of Physicians’ objection to government plans to regulate herbalists (Observations, p 19)

GRAPHIC OF THE WEEK

Deaths on British roads in 2008, from Department of Transport data. In all 2538 people died and nearly a quarter of a million were injured. Road crashes are the largest single cause of death for people between ages 5 and 35, and road travel is far deadlier than going by train or plane. Research in this week’s BMJ shows that the introduction of 20 mph zones in London was associated with a 40% reduction in casualties and collisions.

See RESEARCH, p 31, and EDITORIALS, p 1

PICTURE OF THE WEEK

Greenpeace activists erect 100 crosses at the Cenotaph in Hong Kong to mourn the lost chance to stop climate change at the Copenhagen climate summit, which ended on 18 December. A decision “to take note” of an accord that the Earth’s temperature should not rise by more than 2°C was agreed, far from the legally binding treaties that many had hoped for. UK politicians claimed that the talks had been “held to ransom” by a small group of nations. Other countries, however, accused Western nations of dictating terms to the rest of the world.

See NEWS, p 11, EDITORIALS, p 4, and LETTERS, p 7.
EDITOR’S CHOICE

A few changes for 2010

In this first print issue of 2010 you’ll find a few small but significant changes. Most significant is our new Research section (p 30), where authors summarise their research articles that have been published in full on bmj.com. In case any of you have missed previous explanations for this move away from publishing full research articles in print, let me summarise.

Repeated surveys of print readers over more than 20 years have shown that, although some read the research abstracts, very few read the full research articles. Meanwhile, online surveys consistently put research articles among the most popular types of BMJ content. This has confirmed our view that research belongs online, where authors can have all the space they need (the BMJ has no word limits on research articles) as well as an expanding array of online bells and whistles (additional tables and figures, videos, podcasts, commentaries, rapid responses, and blogs).

We were already shortening research articles in print, but this created work for authors and for us and confusion among readers as to which was the full version. So we have come up with one page summaries in print, which we hope will increase the impact of research among clinicians and policy makers. Feedback from authors and readers has been positive. One suggestion has been that we could do more to highlight implications for clinicians and health systems. Over time, the summary format will evolve.

It’s a good time to take this step. Our readership continues to grow in print and online: the BMJ is now the most widely read weekly medical publication in the UK, and its online readership is second only to that of the New England Journal of Medicine.

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 locator (rather than page number), eg BMJ 2009;338:b145.

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.

Article submissions are growing, from the UK and internationally. And, though I hesitate to mention such a flawed measure, the BMJ’s impact factor is a respectable 12.8.

While allowing our research authors full stretch online, we now have room for more educational content in print—something that readers consistently ask us for. This week we have a clinical review on atrial fibrillation (p 40), a patient’s journey from a doctor recovering from her 10 year fight with anorexia nervosa (p 46), a lesson of the week describing prolonged amenorrhoea in a woman treated for breast cancer (p 48), and a 10 minute consultation on hirsutism (p 51). There’s also our weekly series of Endgames to test your clinical knowledge (p 57).

In addition, as part of our commitment to support better clinical and health systems research, you’ll find regular articles in the Research Methods and Reporting section that explore ways of improving how research is performed and reported (p 36).

And there’s a new occasional column, Round Table, where you can highlight a current book, film, or television programme for others to discuss in our online forum doc2doc (doc2doc.com). This week, that famous scourge of complementary medicine David Colquhoun turns his sceptical eye on the low fat diet in his review of Gary Taube’s paradigm-shifting book The Diet Delusion.

The BMJ is your journal. Please tell us what you think.

Fiona Godlee, editor, BMJ fgodlee@bmj.com

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