

Drug eluting and bare metal stents in people with and without diabetes, p 668



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Quality of clinical aspects of call handling at Dutch out of hours centres, p 676



Investigating dyspepsia, p 682

## RESEARCH

### 668 Drug eluting and bare metal stents in people with and without diabetes: collaborative network meta-analysis

Previous analyses showed greater mortality with drug eluting stents, but this analysis shows them to be safe and effective—for patients with or without diabetes—as long as dual antiplatelet therapy is given for at least six months

Christoph Stettler, Sabin Allemann, Simon Wandel, Adnan Kastrati, Marie Claude Morice, Albert Schömig, Matthias E Pfisterer, Gregg W Stone, Martin B Leon, José Suárez de Lezo, Jean-Jacques Goy, Seung-Jung Park, Manel Sabaté, Maarten J Suttorp, Henning Kelbaek, Christian Spaulding, Maurizio Menichelli, Paul Vermeersch, Maurits T Dirksen, Pavel Cervinka, Marco De Carlo, Andrejs Erglis, Tania Chechi, Paolo Ortolani, Martin J Schalij, Peter Diem, Bernhard Meier, Stephan Windecker, Peter Jüni

>> *Editorial p 643*

### 673 Adherence to Mediterranean diet and health status: meta-analysis

In more than 1.5 million healthy adults, those who adhered more closely to this diet had lower mortality (all cause, cardiovascular, and neoplastic) and lower incidence of Parkinson's disease and Alzheimer's disease

Francesco Sofi, Francesca Cesari, Rosanna Abbate, Gian Franco Gensini, Alessandro Casini

### 676 Quality of clinical aspects of call handling at Dutch out of hours centres: cross sectional national study

When presented with seven scenarios by standardised patients telephone triagists asked the right questions in only one fifth of calls and rated urgency correctly in just over half of calls

Hay P Derkx, Jan-Joost E Rethans, Arno M Muijtjens, Bas H Maiburg, Ron Winkens, Harrie G van Rooij, J André Knottnerus

>> *Editorial p 644*

### 679 Misperceptions and misuse of Bear Brand coffee creamer as infant food: national cross sectional survey of consumers and paediatricians in Laos

Nearly half of 1000 adults believed the product's logo of a mother bear cradling a baby bear denoted suitability as a breast milk substitute (despite warnings on the label) and 18% had used it in this way; a finding corroborated by paediatricians

Hubert Barennes, Todisoa Andriatahina, Vattanaphone Latthaphasavang, Margot Anderson, Leila M Srour

## CLINICAL REVIEW

### 682 Investigating dyspepsia

Rocco Maurizio Zagari, Lorenzo Fuccio, Franco Bazzoli

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### 687 Qualitative research: Critically appraising qualitative research

Six key questions to help readers assess qualitative research  
Ayelet Kuper, Lorelei Lingard, Wendy Levinson

### 690 Teaching rounds: Teaching in an ambulatory care setting

Four third-year medical students are coming to the clinic for half a day a week. They have just finished their basic clinical skills training and the aim of their attendance is to further develop their history taking and examination skills in the maelstrom of clinical practice. What organisational issues do you need to consider?  
Caroline Sprake, Peter Cantillon, Jane Metcalf, John Spencer

## RESEARCH PUBLISHED ONLINE

### Paracetamol plus ibuprofen for the treatment of fever in children (PITCH): economic evaluation of a randomised controlled trial

BMJ, doi:10.1136/bmj.a1490

Sandra Hollinghurst, Niamh Redmond, Céire Costelloe, Alan Montgomery, Margaret Fletcher, Tim J Peters, Alastair D Hay



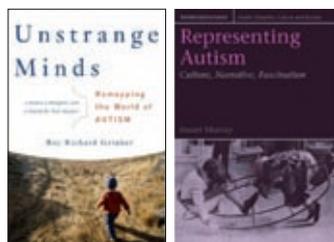
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Two books about autism, p 698

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Concerns about quality and safety highlight the need for further evaluation, say Josip Car, Elizabeth Koshy, Derek Bell, and Aziz Sheikh  
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Nurses should be acknowledged as the true frontline providers of primary care, says Bonnie Sibbald, but Rhona Knight says that moving to a purely nurse led service would be a backward step

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# BMJ

20 September 2008 Vol 337

## The Editor, BMJ

BMA House, Tavistock Square,  
London WC1H 9JR

Email: editor@bmj.com  
Tel: +44 (0)20 7387 4499  
Fax: +44 (0)20 7383 6418

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Published weekly. US periodicals class postage paid at Rahway, NJ. Postmaster: send address changes to BMJ, c/o Mercury Airfreight International Ltd Inc, 365 Blair Road, Avenel, NJ 07001, USA. \$796. Weekly  
Printed by Precision Colour Printing Limited



SOUTHWEST NEWS SERVICE

## PICTURE OF THE WEEK

A rare photograph of the nursing pioneer Florence Nightingale before her death in 1910 at the age of 90. The picture of Nightingale, who spent more of her life in bed than most of her peers, was taken by Lizzie Caswall Smith and is to be auctioned. See Head to Head, p 658, and Feature, p 660.

## THE WEEK IN NUMBERS

**6 months** Minimum duration of antiplatelet therapy for patients having implantation of a drug eluting coronary stent (Research p 668)

**25-40%** Prevalence of dyspepsia in the adult population (Clinical Review p 682)

**12%** Proportion of strains of *Escherichia coli* resistant to cefotaxime and ceftazidime in 2007; up from 1% or 2% in 2000 (News p 654)

**7.7 million** Size of ethnic minority population in England (Editorial p 645)

**3000-5000** Advanced nurse practitioners in the UK (Feature p 660)

## THE WEEK IN QUOTES

“Greater adherence to a Mediterranean diet confers a significant protection for overall mortality” (Research p 673)

“Opportunities for effective learning [in the ambulatory setting] are often lost through lack of planning” (Practice p 690)

“Coauthors abrogating responsibility is a recurrent theme . . . Honorary or gift authorship is unacceptable” (News p 649)

“Nurse led primary care . . . devalues medical training and the complex expertise of the GP” (Head to Head p 658)

“Whining about other specialties is an art form in medicine” (From the Front Line p 696)

## EDITOR'S CHOICE

## What skills do doctors and nurses need?



MALCOLM WILLET

Head to head, p 658  
Feature, p 660

What's the difference between a doctor and a nurse? Our cover picture this week suggests that the differences are becoming harder to spot, and on p 660 Rebecca Coombes explores the shifting and increasingly overlapping territories of the two professions. It's easy to understand why the nurse's role is expanding into traditionally medical areas of diagnosis and treatment: nurses cost less to employ and have more time to spend with patients.

But it's not all plain sailing. There's confusion over titles, a lack of nationally agreed standards on what training and experience are needed, and no proper regulation for advanced nurse practitioners in the UK. But other countries are further ahead, helped by graduate only entry to nurse training. So could nurses expand their roles even further? In our head to head debate, Bonnie Sibbald argues that primary care should now be led by nurses (p 658); Rhona Knight disagrees (p 659).

While roles are rapidly evolving, it seems clear to me that doctors and nurses are selected, trained, and paid differently for good reason. Doctors need to take risks and deal with uncertainty, while nurses are more attuned to following protocols and providing hands-on care. But if, as some argue, diagnosis is almost the only skill that defines doctors, it's reassuring that machines can't yet do the job better.

As Christopher Martyn explains (p 663), computerised Bayesian algorithms and artificial neural networks have failed to live up to their early promise. On the down side, this has left us largely in the dark about how doctors reach their diagnostic decisions or what makes some people

better at it than others. But the good news, he says, is that doctors are pretty good at diagnosis. "On the whole, doctors care a lot about getting diagnosis correct and they castigate themselves when they fail." Martyn also thinks it's admirable (as do I) that when doctors do make diagnostic mistakes they talk about them and write them up in journals.

What about telephone triage as a form of diagnostic decision making? Hay Derkx and colleagues don't offer much comfort from their national cross sectional study of Dutch out of hours call centres (p 676). Using standardised patient scenarios they found that, in a high proportion of interactions, advice was given after asking too few questions and without properly interpreting the answers. In their accompanying editorial (p 644), Joseph Lip and colleagues raise serious concerns about the lack of consistency and transparency in the training of "triagists" and the protocols they use. They call for proper evaluation of the safety and quality of these services.

As health care becomes more complex and fragmented, patient safety relies more than ever on teams of people with a range of skills working effectively together. What these skills are—and how strictly they need to be defined, assessed, and regulated—are questions we must continue to ask.

**Fiona Godlee, editor, BMJ, fgodlee@bmj.com**

Cite this as: *BMJ* 2008;337:a1722

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## PLUS

Career Focus, jobs, and courses appear after p 698.

## WHAT'S NEW ON BMJ.COM

Our poll last week on whether nurses should take the lead in primary care attracted more than 1000 votes, one of the highest response rates we have had. It also attracted lots of feedback.

David Lewis: "The UK and first world countries' citizens have needs and wants that often extend even the skills and knowledge of experienced GPs. Thus, in our country primary care will remain mainly GP led."

Johann Graggaber: "There is very little overlap in nurses' and doctors' training curriculums, and nurses' understanding of physiology. . . is rather limited. Cost savings by employing nurses instead of doctors will be limited. Productivity in a nurse led clinic is lower and the salary of a specialist nurse is easily on par with that of a junior doctor/SpR."



### LATEST RESEARCH

What is the combined impact of lifestyle factors on mortality? According to this cohort study in US women, adherence to guidelines recommending a healthy diet, regular physical activity, and weight management was associated with markedly lower mortality.

**Find out about this and other recent research projects at [bmj.com/channels/research.dtl](http://bmj.com/channels/research.dtl)**

### LATEST BLOGS

Do we take informed consent too far, asks Tessa Richards: "Is it not enough for the patient to know that the operation will be extremely challenging? Most, I suspect, will already know, or sense when the stakes are high. Those who want the odds spelt out will surely ask for them?"

Richard Smith wonders why quality improvement remains a minority sport, asking: "How might we engage. . . clinicians and patients? Might we. . . be able to create an energised, effective social movement not only with evidence but with stories, campaigns, images, songs, marches, and passion? Such a movement abolished slavery in 20 years."

And for Anna Donald, feeling good comes from being with people and the sense that you belong, not to mention food, breaking the rules, massage, and searing light from an Australian sky, among other things.

**Join these debates and others at <http://blogs.bmj.com/bmj>**

### Last week's poll asked

Should primary care be nurse led?

**You replied:**

**NO** 734 (70%) **YES** 318 (30%)



### This week's poll asks

"Is early intervention in the major psychiatric disorders justified?"

### MOST COMMENTED ON

Getting a patient's consent for publication

Paracetamol plus ibuprofen for the treatment of fever in children

Exposure to antipsychotics and risk of stroke

Are national qualifying examinations a fair way to rank medical students?

Ethnic stereotypes and underachievement of UK medical students from ethnic minorities

### MOST READ

Adherence to Mediterranean diet and health status: meta-analysis

Paracetamol plus ibuprofen for the treatment of fever in children: RCT

RCT of Alexander technique lessons, exercise, and massage for back pain

ECG leads to a quick diagnosis

Misperceptions and misuse of Bear Brand coffee creamer as infant food

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