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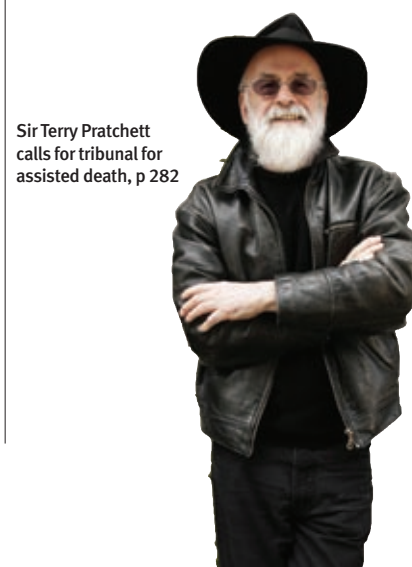
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## PICTURE OF THE WEEK

A mass “overdose” of whole bottles of homeopathic pills, organised by sceptics (see [www.1023.org.uk](http://www.1023.org.uk)). In 2005-8 the NHS spent £12m on homeopathic pills. The Society of Homeopaths said that it did not expect protesters to have any adverse reactions to the pills.

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- ▶ A spanner in the herbal works (2009;339:b5441)
- ▶ Giving homeopathy on the NHS is unethical and unreliable, MPs are told (2009;339:b5080)
- ▶ Homeopath society breaks own ethics code by making speculative claims (2009;339:b4605)

## THE WEEK IN NUMBERS

**1 in 1000** Live births affected by clubfoot in the UK (Clinical Review, p 308)

**65-70%** Proportion of people affected by long QT syndrome who have an identifiable gene mutation (Practice, p 314)

**18** Fields that must be removed to share patient information in the UK, but the Health Insurance Portability and Accountability Act does not consider journals' use of data (Research Methods & Reporting, p 304)

## QUOTE OF THE WEEK

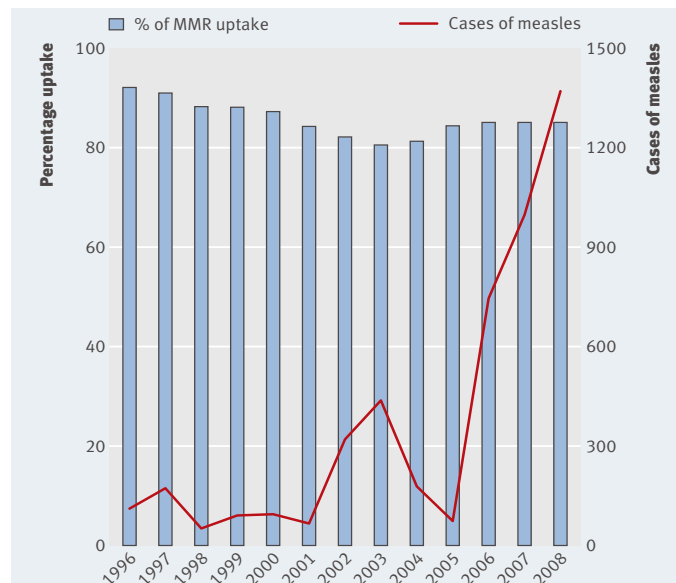
“This research carries the scars of big pharma, with relative risk reductions, non-clinical outcomes, and composite end points”

Des Spence, on the overdiagnosis of osteoporosis and non-evidence based prescription of bisphosphonates to young people (Views and Reviews, p 320)

## GRAPHIC OF THE WEEK

**Uptake of the combined measles, mumps, and rubella vaccine and cases of measles in England and Wales, from the Health Protection Agency.**

See **EDITORIALS**, p 271, **NEWS**, p 281, and **OBSERVATIONS**, pp 294, 295



## EDITOR'S CHOICE

## MMR and other controversies

**As for the next big scare—and there will be one—professionals must be much readier to advocate what is best for patients even if this seems to run counter to “patient choice”**

Following the GMC's judgment, the *Lancet* has retracted the paper by Andrew Wakefield and colleagues that in 1998 linked the MMR vaccine to autism and bowel disease (p 281). Last week's judgment on Wakefield and two of his co-authors was damning, both of the researchers' unethical conduct and of their dishonest and misleading reporting of the study. In our observation columns this week, Trish Greenhalgh gives her view on why retraction was needed (p 294). We also hear from Brian Deer, whose journalistic investigation forced a partial retraction in 2004 and ultimately led to this longest ever GMC hearing (p 295).

In his editorial, David Ellison says that MMR vaccination rates are recovering, but there is still a challenge to restore trust, particularly among parents who have decided their children should not have the vaccine (p 271). As for the next big scare—and there will be one—he thinks professionals must be much readier to advocate what is best for patients even if this seems to run counter to “patient choice.”

What's best for patients has been slow to emerge in the management of clubfoot. Surgical correction has been the order of the day for centuries, despite mainly poor outcomes. Flaubert chose Dr Bovary's disastrous attempt at surgery on the local “cripple” Hippolyte as a pivotal event in *Madame Bovary*, as Kirsten Patrick describes in this week's Medical Classic (p 319). We must thank American orthopaedic surgeon Ignacio Ponseti, whose obituary is published this week (p 317) for the fact that the one in 1000 children born with this condition can now look forward to minimal invasive treatment and good outcomes.

In their clinical review of the management of clubfoot, Joshua Bridgens and Nigel Kelly describe Ponseti's method of sequential plasters and minor surgery as the treatment of choice. But it has taken over 30 years to gain acceptance. Even after Ponseti published his impressive results from a 30 year follow-up study in 1995, surgical opinion shifted, say our reviewers, only because parents surfed the internet for surgeons who used his technique. I wonder why there was no randomised trial.

The existence of valid randomised controlled trials is one of many points of contention in a marvellous slew of letters on homoeopathy this week (p 278). Prefaced by our picture of the week showing Saturday's mass overdose of homoeopathic remedies, we hear from representatives of the British Homeopathic Association, the Royal London Homoeopathic Hospital, and the Department of Health steering group on the statutory regulation of traditional medicines. We also hear from the health minister Mike O'Brien, whose view that further research into homoeopathy's effects is “unlikely to settle the debate” gets a caustic response from Michael Power. “Mr O'Brien's ‘neutral policy’ amounts to a decision not to make a decision and to continue to waste taxpayers' money and patients' time and health,” he writes. David Colquhoun, whose editorial sparked this whole exchange, is equally unimpressed.

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Career Focus, jobs, and courses appear after p 320

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