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Is insufficient on its own to improve clinical outcomes, says Elizabeth Murray
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May improve control of measles but cannot replace doses given at 9-15 months, say H Broutin and M A Miller
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Portfolios were introduced with the aim of improving the learning and assessment of doctors. Erik Driessen believes that they work well when used correctly, but Geoff Norman remains unconvinced

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The UK government is due to issue guidance on treatment for foreign nationals later this year. But doctors say they should concentrate on giving appropriate health care and not worry about policing the UK borders, as Jane Cassidy reports

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As deputy chief medical officer from 1950 to 1960, and then chief medical officer until 1973, Sir George exercised an influence over health policy that has remained unmatched, writes David Brindle

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The large and diverse nature of guideline committees can make consensus difficult. Roman Jaeschke and colleagues describe a simple technique for clarifying opinion

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RESEARCH

331 Economic evaluation of human papillomavirus vaccination in the United Kingdom

This study underpins the choice of a bivalent vaccine for the forthcoming UK national immunisation programme for 12-13 year old girls, rather than the more expensive quadrivalent vaccine that is equally effective in preventing cervical dysplasia
Mark Jit, Yoon Hong Choi, W John Edmunds
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335 Interventions before consultations to help patients address their information needs by encouraging question asking: systematic review

This review of 33 trials with more than 8000 patients found that question asking and patients’ satisfaction increased with use of prompt sheets and coaching, but evidence of other benefits was limited
Paul Knoppersley, Adrian Edwards, Kerry Hood, Rebecca Ryan, Hayley Prout, Naomi Cadbury, Fergus MacBeth, Phyllis Butow, Christopher Butler
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339 Protective efficacy of standard Edmonston-Zagreb measles vaccination in infants aged 4.5 months: interim analysis of a randomised clinical trial

Vaccine efficacy was 94% and the number needed to treat to prevent one case of measles between ages 4.5 months and 9 months was 7.2 during this epidemic in Guinea-Bissau
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343 Open access publishing, article downloads, and citations: randomised controlled trial

In this trial in 11 physiology articles randomisation to open access led to more downloads but had no effect on citations over the next year—shedding doubt on the “citation advantage” of open access
Philip M Davis, Bruce V Lewenstein, Daniel H Simon, James G Booth, Mathew J L Connolly
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Kelsey Hegarty, Angela Taft, Gene Feder

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Sarah Lightbody was 17 when she was diagnosed with epilepsy. This is her account of her experience of the condition during the 14 years since then
Sarah Lightbody

RESEARCH PUBLISHED ONLINE

What oncologists tell patients about survival benefits of palliative chemotherapy and implications for informed consent: qualitative study
Suzanne Audrey, Julian Abel, Jane M Blazeby, Stephen Falk, Rona Campbell

BMJ, doi: 10.1136/bmj.a752
Total annual cost of intimate partner violence to the UK
£5.7bn
(Clinical Review p 346)

Reduction in incidence of cervical cancer after 100 years of vaccination against human papillomavirus
24-93%
(Research p 331)

Letters sent by the FDA in 2003-7 to ask drug companies to stop promoting off-label uses of their drugs
42
(News p 313)

Proportion of survivors of torture who report that a doctor oversaw the abuse
33-50%
(editorial p 308)

UK travel brochures with holidays to malarious regions that advised malaria prophylaxis
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(Letter p 310)
A poster advertising the British Library’s Business and Intellectual Property Centre shows a padlocked garden shed, on which the following words have been painted: “Inside is your invention. We’ll help you stop it becoming someone else’s.” Nothing could better symbolise the suburban smallmindedness underlying this initiative.

I find it depressing because it represents an absolute repudiation of the role of libraries. Has the British Library forgotten that, along with archives and museums, libraries make up the memory business, preserving the resources of the past for present and future use? At the heart of this business lies an optimism, a generosity of spirit, an understanding of how progress happens.

Readers of this journal don’t need reminding that science is a collaborative effort, with each important development heavily dependent on earlier ones. The references at the end of every article attest to this. As Isaac Newton put it, we don’t see further because of our particularly acute vision but because we’re standing on the shoulders of giants.

As if to prove the point, Newton borrowed his metaphor from Bernard of Chartres, 500 years earlier, who had borrowed it from Greek mythology, according to Wikipedia, the free online reference library. And it’s not just science—examine the high points of literature, art, and music from any civilisation; their debts to earlier works are usually obvious.

Which brings us to the antithesis of the padlocked garden shed: the open access movement. Made possible by the internet’s vastly reduced costs of dissemination, it promotes free access to original research articles. Much has been made of the potential value to science of the free availability of research articles, but is there any proof? Embarrassingly, we’ve had to wait more than 10 years for the first rigorous evaluation of this intervention (p 343). It shows that physiology research articles and reviews that are freely available online are no more likely to be cited within a year of publication than those behind access controls. It’s still early days, and the results of longer term follow-up, as well as studies of other disciplines, including medicine, are promised.

By the time more results are published, the web’s next big (medical) thing—Medpedia—will be upon us (www.medpedia.com). As the name suggests, Wikipedia is the model. Medpedia seeks to create “the most comprehensive and collaborative medical resource in the world,” serving “as a catalog, database, and learning tool about health, medicine and the body for doctors, scientists, policymakers, students and citizens that will improve medical literacy worldwide.” It already counts the universities of Harvard, Stanford, and Oxford among its supporters (http://blogs.bmj.com/bmj/2008/08/04/richard-smith-medpedia-inspired-by-the-counterculture-of-the-60s/).

Now might be a good time for the British Library to thumb through a few of the books on its shelves to remind itself what a library is for—and for it to go

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