

EDITORIALS

- 1 **Bury the bill**
The proposed changes to the Health and Social Care Bill would leave it unfit for any purpose, say Tony Delamothe and colleagues
» Features, p 20
- 2 **Prevention of falls through podiatry care**
Consider foot pain, footwear, and orthoses, says Wesley Vernon *» Research, p 31*
- 3 **What would happen to health inequalities if smoking were eliminated?**
They would persist at a lower level because obesity would fill part of the gap, says Johan P Mackenbach *» Research, p 33*
- 4 **Why do some ex-armed forces personnel end up in prison?**
New report emphasises the role of alcohol, social exclusion, and financial problems, say Deirdre MacManus and Simon Wessely
- 5 **Axillary dissection in women with sentinel node metastasis**
Can be avoided in selected subgroups, say John Rescigno and Deborah Axelrod

LETTERS

- 7 **After Fukushima; Regulation of medical devices; Madness of child protection**
- 8 **We need to talk about nursing**
- 9 **Fall prevention with vitamin D; Digital rectal examination**
- 10 **Response: Kenneth Taylor responds to Des Spence**

NEWS

- 11 **BMA members refuse to reject health bill "in its entirety"**
New litigation rules may harm seriously injured patients
- 12 **Foundation trusts still struggle to hit cancer treatment targets**
GMC puts duty on doctors to try to prevent child abuse
- 13 **Anticholinergic effects of drugs can increase deaths in over 65s**
Social enterprises need proper evaluation, says watchdog
- 14 **Medical dean resigns after plagiarism is found in speech**
French guidelines are pulled after potential bias among authors
Pharma would like to befriend you
- 15 **Cuts to translation services in the Netherlands are "incomprehensible"**
- 16 **Spain bans unhealthy food in schools in bid to tackle obesity**
AMA backs health reform despite challenges from members
Injecting drug users have high rates of HIV and hepatitis

European agency extends review of safety of pioglitazone

- 17 **Tackle excess weight in infancy to avoid problems later, says new report on obesity**

SHORT CUTS

- 18 **What's new in the other general journals**

FEATURES

- 20 **NHS rethink: charade or cause for new hope?**
We asked a range of commentators from clinicians to academics for their thoughts on the proposed changes to the NHS Health and Social Care Bill. Do the changes move us to a healthcare model we can be proud of or do they take us back to pre-1948 inequity and a "return to fear"?
- 22 **Calling time on research's Wild West**
The only UK body dedicated to promoting research integrity had its funding withdrawn last year. So what is the future for policing research fraud? Clare Dyer reports
- 26 **Commentary: Skilled forensic capacity needed to investigate allegations of research misconduct**

ANALYSIS

- 27 **Why system inertia makes health reform so difficult**
Health systems around the world are struggling to find effective ways to make clinical practice safer, more effective, and evidence based. Enrico Coiera argues that the reason may be system inertia and looks to biology for solutions

RESEARCH

- 30 **Research highlights: the pick of *BMJ* research papers this week**
- 31 **Effectiveness of a multifaceted podiatry intervention to prevent falls in community dwelling older people with disabling foot pain: randomised controlled trial**
Martin J Spink, Hylton B Menz, Mohammad R Fotoohabadi, Elin Wee, Karl B Landorf, Keith D Hill, Stephen R Lord
» Editorial, p 2
- 32 **Priorities for women with lymphoedema after treatment for breast cancer: population based cohort study**
Afaf Girgis, Fiona Stacey, Teresa Lee, Deborah Black, Sharon Kilbreath
- 33 **Cause specific mortality, social position, and obesity among women who had never smoked: 28 year cohort study**
Carole L Hart, Laurence Gruer, Graham C M Watt
» Editorial, p 3



Editorial, p 1; Feature, p 20



Smoking and health inequalities, p 3



Policing research fraud, p 22



Making friends with Pharma, p 14



Speech that rang a bell, p 14

- 34 **Predicting risk of osteoporotic and hip fracture in the United Kingdom: prospective independent and external validation of QFractureScores**
Gary S Collins, Susan Mallett, Douglas G Altman

CLINICAL REVIEW

- 35 **Clinical management of stuttering in children and adults**
Susan O'Brian, Mark Onslow

PRACTICE

RATIONAL TESTING

- 39 **Postural hypotension**
T Sathyapalan, M M Aye, S L Atkin

10-MINUTE CONSULTATION

- 41 **Chronic chilblains**
I H Souwer, A L M Lagro-Janssen

OBITUARIES

- 43 **Jack Kevorkian**
Former pathologist and controversial assisted suicide activist
- 44 **Michael John Absolon; Ian Macdiarmid Brown; Frank Turner Crossling; Rehemat Curmally; Peter Graham; William Mackintosh Mackean; Theodore Stafford Maw**

VIEWS AND REVIEWS

PERSONAL VIEW

- 45 **We should publish the cost of each piece of research**
Penelope Hawe

REVIEW OF THE WEEK

- 46 **Plenitude: The New Economics of True Wealth** by Juliet B Schor
Richard Smith

BETWEEN THE LINES

- 47 **Saved by tuberculosis**
Theodore Dalrymple

MEDICAL CLASSICS

- 47 **Doctor Zhivago** by David Lean
Andrew Moscrop

COLUMNISTS

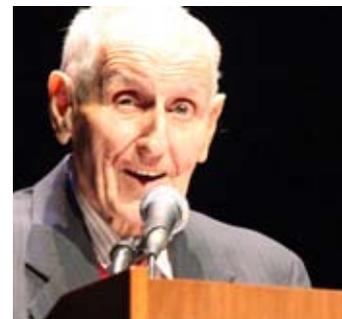
- 48 **The error of our ways**
Des Spence
- Death of the silent witness**
Ike Iheanacho

ENDGAMES

- 49 **Quiz page for doctors in training**

MINERVA

- 50 **Dementia in older people who'd migrated from a Caribbean island or Guyana, and other stories**



"Dr Death" obituary, p 43



Medical Classics, p 47

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PICTURE OF THE WEEK

The 1935 Picasso painting *Jeune fille endormie* was anonymously donated to the University of Sydney on the condition that the school uses proceeds from its sale to fund scientific research into obesity, diabetes, and heart disease. It fetched £13.5 million (€15m, \$21.6m) when it was auctioned at Christie's last week. See also this week's Personal View, "We should publish the cost of each piece of research," p 45.

THE WEEK IN NUMBERS

0.4 Reduction in the number of falls in community dwelling older people with disabling foot pain after podiatry treatment, compared to a control group, over one year (**Research**, p 31)

1% Proportion of school children worldwide who stutter (**Clinical Review**, p 35)

6% Proportion of healthy elderly people who have postural hypotension. 68% of people in hospital geriatric wards are affected (**Practice**, p 39)

QUOTE OF THE WEEK

"Instead of further tinkering, it would be better for the NHS, the government, and the people of England to sweep the bill's mangled remains into an unmarked grave and move on."

BMJ editors write about the proposed reforms to the Health and Social Care Bill (**Editorials**, p 1)

QUESTION OF THE WEEK

Last week we asked, "Does knowledge of arts and culture make doctors better clinicians?"

80% voted yes (total votes cast 434)

This week's poll asks, "Should the Health and Social Care Bill now be withdrawn?"

See **EDITORIAL**, p 1; **FEATURE**, p 20

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EDITOR'S CHOICE

Fighting for the NHS, and research integrity

Attempts to mollify the bill's critics have left us with what Hamish Meldrum, chairman of BMA Council, calls "a dog's dinner"

I'm writing this from the BMA's annual representative meeting in Cardiff. The location seems appropriate. Outside the conference hall is a statue of the NHS's founder Aneurin Bevan. The NHS "will only last as long as there are folk left with the faith to fight for it," he once said. Inside the hall the faithful are fighting. One speaker brandishes her well worn copy of Bevan's book *In Place of Fear*. She says she's old enough to remember its publication. "For the first time ever I'm afraid," she says.

The government's plans for the English NHS, detailed in its embattled bill, are "the final step on the road to privatisation," says a founder of Keep Our NHS Public. And attempts to mollify the bill's critics have left us with what Hamish Meldrum, chairman of BMA Council, calls "a dog's dinner." Contributors to our feature concur (p 20). "Vast sums of public money and the energy and commitment of thousands of talented people could be wasted implementing policies with little or no evidence base," says Andy Haines.

So where now? In our editorial Tony Delamothe, Edward Davies, and I say that Mr Lansley's monster should be buried in an unmarked grave (p 1). Here in Cardiff representatives narrowly miss reaching a similarly damning verdict, with just over half of them voting against calling on the BMA to oppose the bill in its entirety (p 11).

The conference began on a different note with a talk from Peter Wilmshurst on dishonesty in medicine. Wilmshurst has been an unshakable thorn in the side of those who would prefer misconduct swept under the carpet. "The problem isn't the few dishonest doctors—every profession has them," he told me afterwards. "It's that everything in the UK is geared to preventing people exposing misconduct:

whistleblowers are bullied, defamation laws protect the guilty, doctors tolerate misconduct, and institutions cover it up."

In this week's *BMJ*, Clare Dyer asks why the UK has failed so miserably to tackle research misconduct (p 22). Inadequacies in the system have been highlighted by the Andrew Wakefield saga. It took years before he was finally sanctioned and his study on MMR vaccine and autism retracted. "The effects of the failure to tackle his wrongdoing more quickly and decisively are still being felt," writes Dyer. His institution failed to properly investigate when serious concerns were raised in 2004. University College London is at last seeking to make good this failure and has told me that its investigation will aim to be thorough, fair, wide ranging, timely, and transparent, and will involve external scrutiny. This sounds promising. We must wait and see.

But the UK still lacks a statutory body with a mandate and forensic skills to investigate allegations and to enforce publication of the outcome. Iain Chalmers and Andy Haines call for such a body to be set up without delay (p 26). Until we have this, history tells us that institutions will continue to put their reputations above patient and public interests. Distracted though it may be by its problems with the NHS, the UK government must urgently address this shameful lack.

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Career Focus, jobs, and courses appear after p 48

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