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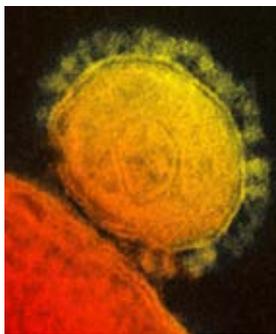
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Some journals take funding from drug companies or other organisations to publish articles. Jadwiga A Wedzicha says this enables niche work to be disseminated, advancing medicine, but Robert Steinbrook and Jerome P Kassirer believe that sponsorship introduces more conflicts of interest and erodes trust

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The Editor, *BMJ*
BMA House, Tavistock Square,
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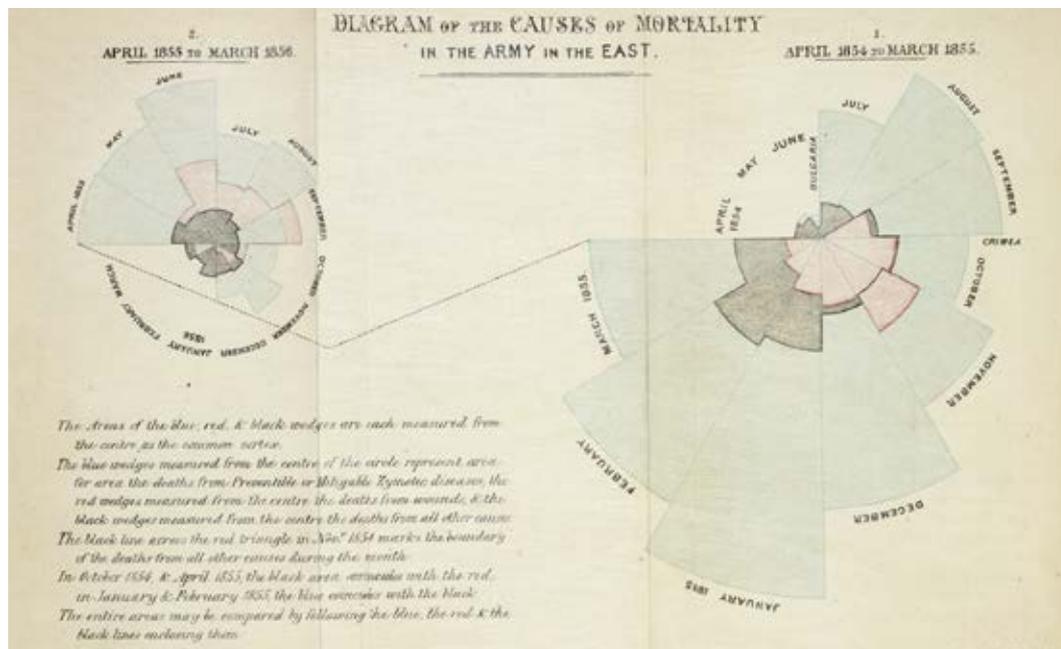
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**PICTURE OF THE WEEK**

Florence Nightingale developed the use of the “rose diagram” during the Crimean War to indicate causes of death. This diagram shows that preventable epidemic disease (coloured blue) was responsible for far more casualties than battlefield wounds inflicted (red) or other causes (black). It is on display at the British Library’s first science exhibition, *Beautiful Science: Picturing Data, Inspiring Insight* (until 26 May 2014).

RESPONSE OF THE WEEK

I read Christopher Snowdon’s response and was persuaded by it. Unfortunately I then read the response to his response by Jonathan Gornall on the facing page and was also persuaded by that. What to think? Toss a coin—but hardly scientific. What to do? Got it—add the reading of both articles as 0.5 hours into my appraisal toolkit and if my response is printed, double the impact score to 1 hour.

Nicholas A McDowall, GP, Gloucester, UK, in response to “Under the influence: author’s response to criticism by Institute of Economic Affairs” (*BMJ* 2014;348:g1563)

MOST READ

2013 was a horrible year for nursing—nurses are “burnt out,” says chief
The survival time of chocolates on hospital wards: covert observational study
Change in mental health after smoking cessation: systematic review and meta-analysis
Neuropathic pain: mechanisms and their clinical implications
Bad medicine: gabapentin and pregabalin

BMJ.COM POLL

Last week’s poll asked:
“Should consultations in primary care be held standing up?”

82% voted no (total 717 votes cast)

► *BMJ* 2014;348:g1558

This week’s poll asks:

“Should medical journals publish sponsored content?”

► *BMJ* 2014;348:g352

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EDITOR'S CHOICE

The *BMJ* and sponsorship

Responses to our survey expressed fear and counselled caution on the grounds that accepting sponsorship would damage the *BMJ*'s reputation for independence

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Last year we asked for your views on whether the *BMJ* should accept sponsorship for some of its content and activities. We realised that doing this was taking a bit of a risk—even raising the issue might be seen as suggesting that we were about to relax our rules. But we were hoping to get a sense from you about how much you were bothered by such things, whether we as editors were right to fret, and whether we should keep turning down sponsorship requests. At the time, we were actively seeking ways to fund new activities at the journal, such as *BMJ* Spotlights (collections of articles on a topical but non-clinical issue, such as climate change (bmj.com/bmj-series/spotlight-climate-change)) and roundtable discussions, so it must have seemed perverse to our commercial colleagues and to potential sponsors to be saying no to money when it was offered.

We had lots of questions. Should we take sponsorship at all? If so, should we distinguish between commercial and non-commercial sponsors? Were drug and device companies materially different from other commercial sponsors? And what did the new buzzword “partnership” really mean? Should sponsors be allowed to suggest topics and contributors, and should they be allowed to have a representative on a judging panel or roundtable discussion?

We posted a survey on bmj.com in September 2013. We also commissioned a head to head debate, which is published this week (p 18), along with an online poll (bmj.com).

Only a very small number of readers responded to the survey, so this was by no means a piece of science, but in the spirit of transparency and data sharing we have

posted the results in the online version of this article (doi: [10.1136/bmj.g1804](https://doi.org/10.1136/bmj.g1804)). Those who did respond were not keen on sponsorship in general and even less keen on pharmaceutical sponsorship in particular. There was a clear negative attitude towards allowing sponsors to have input or take part in the activities they funded. Free text comments expressed fear and counselled caution on the grounds that accepting sponsorship would damage the *BMJ*'s reputation for independence.

Small though the response was, it reassured us. It fitted our current policy and strengthened our resolve. Our current practice is that we accept sponsorship for a very limited range of activities: The *BMJ* Awards, *BMJ* Spotlights, and *BMJ* Roundtables. Decisions to accept sponsorship are entirely at my discretion as editor. The *BMJ* retains full editorial control. Sponsors do not take part in the activity they are funding—for example, as judges of The *BMJ* Awards or as members of a discussion panel. All sponsorship is declared.

But this is part of an ongoing conversation with sponsors and our commercial colleagues. It is an issue that all journals and publishers have to come to terms with one way or another. Stringent rules may mean that willing sponsors are few and far between. Or it may mean that the values that sit behind these rules attract sponsors and funders who wish to be associated with a trusted brand. For example, we have recently been awarded two sizeable grants—from the European Union and from the Open Society Foundations—to support our programme of *BMJ* investigations. We prize our independence and are glad to think you do too. We would welcome your views.

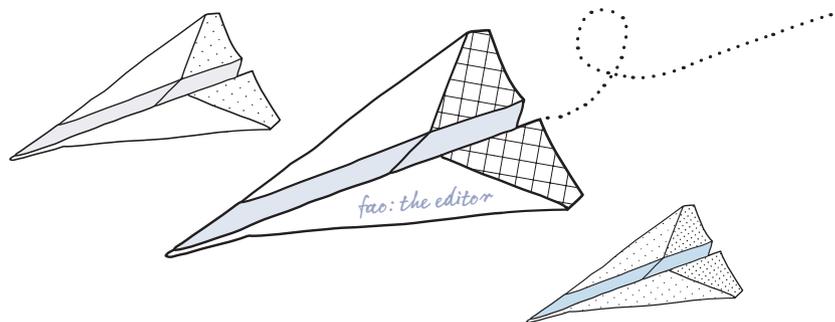
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