

# THIS WEEK

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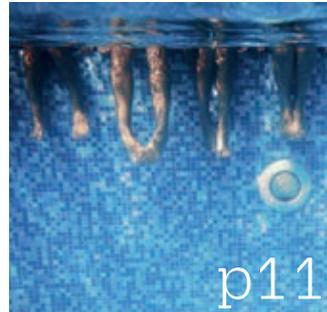
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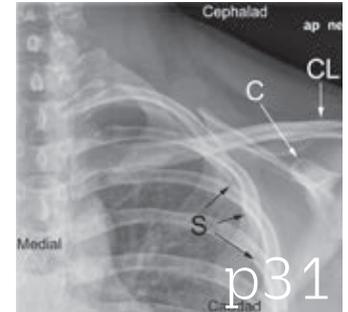
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DELAN DEVAKUMAR

### PICTURE OF THE WEEK

**Obesity: a new priority** A notice on a bus in southern Brazil reads: "Priority seat for obese people, pregnant women, people holding babies or children, the elderly and disabled people. In the absence of people with these conditions, it is free to use." The image was submitted to *The BMJ* by Delan Devakumar from UCL Institute for Global Health, London, and Patricia H C Rondó, professor in the nutrition department, School of Public Health, University of São Paulo, São Paulo, Brazil, as an example of how public signage is starting to reflect soaring obesity rates in the country.

● INVESTIGATION, p 15

### THEBMJ.COM POLL

Last week's poll asked:

**Is the NHS your top UK  
general election issue?**

**YES 65%**  
**NO 35%**

Total votes cast: 142



This week's poll asks:

**Should industry  
funding of nutrition  
research be banned?**

▶ **BMJ 2015;350:h231**

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## EDITOR'S CHOICE

## Big food, big pharma: is science for sale?

**A cynical public won't accept that general vaccination is vital for some potent diseases if they believe that vaccines of questionable benefit are being promoted for profit**



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We have grown accustomed to allegations of conflicts of interest, biased research, and manipulative marketing on the part of the drug industry. Valentine's Day is a good time to spare a thought for the same problems as they involve the sugar industry. In a *BMJ* investigation this week Jonathan Gornall examines the not so sweet side of what might be called "Big Sugar": large food companies whose products include sugary foods (p 15). Using methods that seem borrowed wholesale from the pharma playbook, they provide consultancies and research support to prominent scientists who also work on nutrition issues for the UK government.

Such strategies mirror those of the drug industry, and the arguments used to defend these associations are strikingly similar. Engagement with the private sector is desirable because it enables "more rapid transfer of the best ideas into new interventions," and scientists use the money for "important pieces of research." These things may well be true. The existence of such financial ties is not evidence of "research malpractice" but does contribute to perceptions that nutrition science might be for sale.

Perceptions about the trustworthiness of nutritional research matter because consensus has not been achieved on the extent to which sugar contributes to health problems or what should be done about it. Is sugar "pure, white, and deadly," as the late John Yudkin suggested well over 40 years ago? Much evidence points in that direction. But which way does the causation run? Are we hardwired to crave sweet things? Or do we crave sugary treats because we are manipulated to do so? Policy initiatives to curb sugar intake will be developed on the basis of research on these questions. To

gain public cooperation the science must be above reproach.

Sadly, this is not the only area where there is reason for concern about corporate influence on public policy. Crowcroft and colleagues examine the controversial UK government decision on public funding for a new vaccine (Bexsero) for meningococcal disease (p 18). The problems they outline are familiar: "lobbying may have influenced the alteration" of the original decision. Links between some "vocal clinicians" and the drug industry were not disclosed. The lack of transparency makes it unsurprising that "conspiracy theories emerged, including the idea of undue influence of industry."

This piece could not be timelier, published as it is in the midst of a large US outbreak of the vaccine preventable disease measles. Powerful commercial interests will advocate widespread use of any new vaccine they develop, even when the benefits do not justify the cost. They may pursue these arguments in ways that undermine public trust in vaccination in general. A cynical public won't accept that general vaccination is vital for some potent diseases if they believe that vaccines of questionable benefit are being promoted for profit. Crowcroft and colleagues' conclusion about the lesson of the Bexsero affair should be heeded by all medical researchers: "We risk losing public trust . . . by allowing people with close links to industry to be involved in decision making."

Put another way, we cannot expect the public to have confidence in science that seems to be for sale. **Elizabeth Loder, acting head of research, *The BMJ*** [eloder@bmj.com](mailto:eloder@bmj.com)

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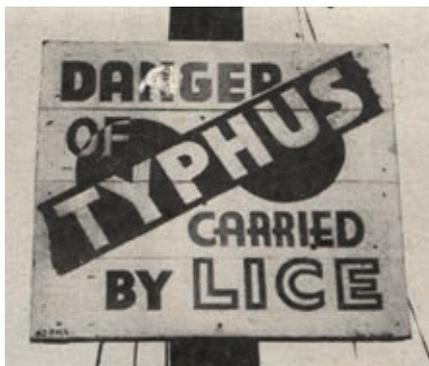
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# Online highlights from thebmj.com

## FROM THE ARCHIVE: 13 FEBRUARY 1915

Several readers respond to Lieutenant-Colonel S Monckton Copeman's "Note on a successful method for the extermination of vermin infesting troops." Army doctor Edward J Cross recommends a single application of "a powder consisting of three parts of black hellebore root and one of borax freely dusted over the men's blankets, clothing, etc." Others recommend H M Lefroy's "crude oil" emulsion "of 10lb of whale oil soap, five and a half pints of crude Barbados petroleum, and 4oz naphthalene."

• [BMJ 1915;1:317](#)



## INFOGRAPHIC

Use our interactive link diagram to explore the complex network of connections between the sugar industry and UK government advisory bodies.

• [www.bmj.com/infographics](http://www.bmj.com/infographics)



## RESPONSE OF THE WEEK

This important and interesting trial [of financial incentives for smoking cessation in pregnancy] concerned only the pregnant women themselves, but it is well known that people with a partner who smokes find it easier to stop smoking if they support each other by stopping together. That is also better for the new baby and for any other children in the household.

It would therefore make sense to encourage and help partners who are smokers to stop at the same time. This should certainly involve personal counselling and follow-up, but not necessarily an additional financial incentive. I suggest that future studies building on this one should also collect data on smoking by the prospective fathers.

Andrew Herxheimer, clinical pharmacologist, London, UK, in response to "Financial incentives for smoking cessation in pregnancy: randomised controlled trial"

• [BMJ 2015;350:h134](#)

## TWEETS

Using Tamiflu...compounds the felony of using a vaccine that does more harm than good.....

Doctors' role models? Why a McDonald's in Guy's, a Burger King in Southampton and a Pizza Hut in Derriford hospitals?

Why isn't a nursing home set up to care for people for whom hospital intervention is no longer sensible or kind?

How pathetic Britons have become. To subject any doctor to this sort of harassment is beyond belief. #FGM



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## LATEST BLOGS

### The challenges China faces as it stops using organs from executed prisoners

At the start of 2015 China stopped using organs from executed prisoners for transplants. The gap between organ supply and demand is already large, and will now increase further. Kanhua Yin and Can Wang discuss how China can tackle this problem and what needs to be done to increase volunteer donation rates.

• <http://bmj.co/chinaorgans>

### Stemming the rising tide of epidemic proportions

We need to stem the rising tide of epidemic proportions, says Neville Goodman. The word "epidemic" is overused and is therefore losing its true meaning, he says. "It may not be sexy, but 'increasing prevalence' is the correct description."

• <http://bmj.co/epidemic>

### Health professionals have no role in Saudi blogger's flogging case

The disturbing case of a Saudi blogger sentenced to flogging should serve as a reminder that health professionals should never participate in torture or cruel, inhuman, or degrading treatment, says Vincent Iacopino, from Physicians for Human Rights. Even by declaring that the blogger is unfit for further punishment, doctors are enabling his torture to continue.

• <http://bmj.co/Raif>



## MOST READ ARTICLES ONLINE

### The survival time of chocolates on hospital wards

• [BMJ 2013;347:f7198](#)

### Why there's no point telling me to lose weight

• [BMJ 2015;350:g6845](#)

### The Darwin Awards: sex differences in idiotic behaviour

• [BMJ 2014;349:g7094](#)

### Financial incentives for smoking cessation in pregnancy: randomised controlled trial

• [BMJ 2015;350:h134](#)