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Three linked editorials

The heart of the BMJ is its scientific papers. Without them we are not much. Yet we recognise that it may not be rational for a doctor who has two hours a week to read to spend 40 minutes grappling with a complex paper. We thus try hard-with structured abstracts, key messages, and the paragraph in "This week in the BMJ"—to present the information in easily digested forms, encouraging readers to chose the one that suits them best. We also try hard to exploit the papers to the full-for instance, by carrying editorials that comment on them. This week we have three such editorials.

Firstly, nuts. Evidence from the Nurses Health Study suggests that eating nuts, including peanuts, reduces the risk of coronary artery disease (p 1341). "The effect," observes Hugh Tunstall-Pedoe in an editorial (p 1332), "appears large and significant, as great or greater than that in the statin trials." The nuts may affect serum lipids, or the benefits may simply reflect "residual confounding" (the differences between nut eaters and the rest that have not been controlled out). Should we all start eating nuts? This paper does not prove that eating nuts will produce benefit (a randomised controlled trial would be needed), but the authors conclude cautiously that "nuts can be included as part of a healthy diet." Sales of red wine jumped dramatically in the United States after a television programme suggested that red wine prevented the French dying of heart disease. The nut evidence is better quality, but a nut boom seems unlikely.

The second linked editorial (p 1331) looks at two papers showing that tall people are more likely than short people to develop cancer (pp 1350 and 1351). They support growing evidence that higher intakes of dietary energy during childhood may cause cancer.

The third linked editorial (p 1333) also looks at relations between experiences in early life and problems in adult life-this time birth trauma and suicide. The linked paper finds such a relation and suggests that pain experienced during complicated deliveries may "imprint" and lead to suicide in adult life (p 1346). Louis Appleby, the editorialist, is sceptical and reminds readers that the big challenge for those interested in the epidemiology of suicide is to explain the doubling of suicide risk in young males in the past two decades.

Finally, Albert Weale reviews the book by Tony Blair, the British Prime Minister, on "the third way" (p 1394). The third way is to accept the inevitable power of global markets but to encourage "equal worth, opportunity, responsibility, and community" by working in partnership with the private and voluntary sectors. Bloated central bureaucracies are to be avoided, meaning logically, writes Weale, that the NHS must watch out. In fact Blair is very pro the NHS. Weale gives the book four stars for curiosity and one for coherence.



Jon Deeks

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