Poor housing and dark satanic mills

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Articles in The BMJ this week featuring mills and housing may seem like a throwback, but the problems they raise, from science to social welfare, are very contemporary. The impact of the cost of living crisis is clear for health professionals to see, and, where once poor laws offered relief to people who were disadvantaged, recent law making and spending plans will not do enough for people feeling the “consequences of creating public services in a nation getting poorer” (doi:10.1136/bmj.o2837).

Housing and heating are matters of direct concern to health professionals, given their effect on the population’s health and wellbeing (doi:10.1136/bmj-2021-069667) and the pressures that are then placed on health and social care (doi:10.1136/bmj.o2863). Cold, draughty homes promote ill health (doi:10.1136/bmj.o2480). Anny Cullum argues that the housing crisis is an emergency that requires urgent government action (doi:10.1136/bmj.o2600), An innovative pilot for GPs to prescribe heating to vulnerable people is being implemented more widely (doi:10.1136/bmj.o2835).

But solutions to social care that, as David Oliver observes (doi:10.1136/bmj.o2861), have been repeated and ignored for over a decade continue to be willfully overlooked. Until social care is “fixed,” how is it possible to implement a continuous flow model in urgent emergency care with any prospect of success? Louella Vaughan and Stevan Brujinis explain how this is a solution that is based on limited evidence and that can work in specific circumstances but may negatively affect outcomes (doi:10.1136/bmj.o2751).

Meanwhile, pressure on GPs continues unabated. They are being “named and shamed” by new data released by NHS Digital (doi:10.1136/bmj.o2852, doi:10.1136/bmj.o2877) and told to prepare for industrial action over their contract negotiations (doi:10.1136/bmj.o2851). Even government initiatives and media campaigns that may seem well intentioned to those promoting them, such as in relation to the menopause, can create unnecessary workload (doi:10.1136/bmj.o2841).

An education article provides an update on international experience and offers staff advice on how to adapt to transparent patient records (doi:10.1136/bmj-2021-069861). Early studies on patients’ access to their notes through the NHS App suggested that workload did not increase. Whether those findings will be replicated with more rigorous studies in different settings is to be seen.

Any research invites scrutiny, and three research papers published this week should do so. A US study finds that supraphysiological levels of oxygen administration during surgery may lead to postoperative organ injury (doi:10.1136/bmj-2022-070941). Oxygen can be a double edged sword, say editorialists Michele Samaja and Davide Chiumento (doi:10.1136/bmj.o2823), and the use of supraphysiological oxygen levels is something that anaesthetists and surgeons must now reconsider.

Perhaps more controversially still, given polarised viewpoints—and these are now commonplace on social media (doi:10.1136/bmj.o2834)—a case control study from Argentina finds that vaccination prevents covid related deaths in children and adolescents. Vaccination also prevents infection, although the effect wanes (doi:10.1136/bmj-2022-073070).

The final research article focuses on the satanic paper mills found mostly in China. These modern mills don’t use or make paper. Instead they produce fraudulent research papers and are now a rapidly growing threat to the integrity of science. Researchers from Yale University identified 1182 retracted research articles between 2004 and 2022 from paper mills (doi:10.1136/bmj-2022-071517). And those are the ones that we know about.

3 Mathew R, Ramnnya Mathew. The NHS and its staff are being set up to fail. BMJ 2022;379: doi: 10.1136/bmj.o2863 pmid: 36446415
5 Cullum A. We need affordable homes for healthy, happy lives. BMJ 2022;379: doi: 10.1136/bmj.o2600 pmid: 36307718