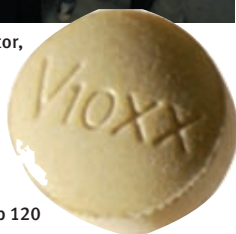




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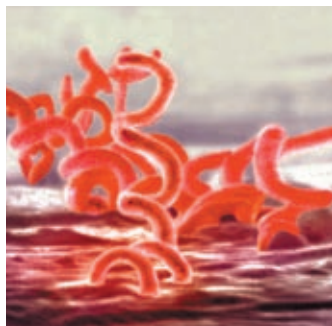
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WELCOMELIBRARY



## PICTURE OF THE WEEK

**BMJ Medical Milestones poll winner:** The work of Edwin Chadwick, the 19th century lawyer who pioneered the introduction of piped water to people's homes and sewers rinsed by water, has been voted the greatest medical advance since 1840. Chadwick's "sanitary revolution" attracted 15.8% of the votes. A total of 11 341 people voted on the shortlist of 15 breakthroughs, which had been chosen by a panel of experts from a list nominated by readers. See News, p 111

## THE WEEK IN NUMBERS

**50%** Reduction in deaths after giving isoniazid prophylaxis against tuberculosis to children with HIV (Research p 136)

**1 in 4** Specialist registrars in England consider their employment prospects "poor or very worrying" (News p 114)

**1 million** Reprints of VIGOR, Merck's discredited study of Vioxx, bought by Merck to promote its drug to doctors (Feature p 120)

**79%** Fall in carbon monoxide in Irish bar workers' exhalations since the introduction of the smoking ban in 2004 (News p 114)

**106** Government's margin of defeat when the Lords passed an amendment to the Mental Health Bill (News p 113)

## THE WEEK IN QUOTES

**"You will be less of a burden to taxpayers because you will die sooner. You might even be a financial asset if you time it right"** (Letter p 110)

**"Referral management schemes are insulting to GPs, second guessing their decisions"** (Personal view p 156)

**"The perky aura of quick fixes and instant solutions fizzles effusively from the show. Viewers, unfortunately, might just believe it"** (Review p 157)

**"Cataract surgery is the most common elective surgical procedure in the UK"** (Practice p 148)

**"Much teenage sex has little to do with sex itself but is connected with searching for meaning, identity, and belonging"** (Editorial p 103)





## ON THE COVER

What have we learnt from Vioxx? Researchers and journals can still benefit from this case if they learn from the mistakes, say Harlan Krumholz and colleagues

COVER IMAGE: AP PHOTO/DANIEL HULSHIZER

See page 120

## EDITOR'S CHOICE

# A redesigned bmj.com

Hot on the heels of a redesigned print *BMJ* comes a redesigned *bmj.com*. In the nine years since our last major redesign we've added a host of new features, and the time had come to reduce the clutter and provide more consistent navigation.

But visitors to the site this week will notice more than just a general tidying up. The big change is that the focus of publication has changed from the weekly print issue to the individual article.

Until now, most articles had to roll off the printing presses before making their way online. There were exceptions—original research articles published “online first” to maximise their impact and minimise delay; now we're making the exception the rule. By the end of this year we hope that all articles will be published first on *bmj.com*. No more news stories or editorials published 10 days after the event, or educational articles drifting gently out of date while queuing up to be printed.

In place of the weekly journal as the main organising principle for articles, we will now allocate articles to one of four “channels” online: research, education, news, comment. The weekly print edition will still be represented prominently online, but the channels will be where to find articles (and the only place to find articles published ahead of print).

For several years, many research articles, news stories, and obituaries have been available in longer versions online than in print. That will now become the norm, as notices throughout the print journal remind readers.

The logical conclusion of this trend is that some articles will appear only on the web, without any print manifestation (other than perhaps a listing in the table of contents). This has already been the case for some news stories (news extra) and most electronic letters to the editor (rapid responses).

Increasingly, the print journal will become a subset of the electronic journal, an “editor's choice” of everything that's available on *bmj.com*. Responding to the fact that 92% of the *BMJ*'s 122 000 print copies are distributed inside Britain, the editor could skew her selection to content of greater interest to UK readers, while the content of the website reflects the international makeup of its 1.2 million visitors a month (two thirds of whom come from outside Britain).

The recent redesign of the print *BMJ* (shorter, snappier articles, with more illustrations) depended on the presence of the full versions of articles on *bmj.com* for those who wanted them. While becoming ever more different, the two versions of the *BMJ*—print and online—are remaining complementary.

Once we have established this new model of publishing—online oblivious to print (with articles appearing in print later, shorter, or never)—we will turn our attention to greater user participation in online publishing, as discussed by Dean Giustini in his Christmas editorial on Web 2.0 (*BMJ* 2006;333:1283-4). As always, we would be delighted to hear what readers think of the new look *bmj.com* and how we could develop the site further.

**Tony Delamothe**  
deputy editor (tdelamothe@bmj.com)

Articles appearing in this print journal are likely to have been shortened. To see the full version of articles go to *bmj.com*.

*bmj.com* also contains material that is supplementary to articles: this will be indicated in the text (references will be given as w1, w2, etc) of the article and be labelled as *extra* on *bmj.com*.

## PLUS

### In this week's *BMJ* careers

**International health foundation programmes**

**Tips on preparing for the MRCS part 3 exam**

**Expedition medicine in Morocco**

### What's new at the *BMJ* Group:

*BMJ* Clinical Evidence website relaunched with host of new features. Discover more at [clinicalevidence.com](http://clinicalevidence.com)



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