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Scarce resources may cause doctors to be pessimistic about prognosis and refuse critical care admissions, say Eddy Fan and Dale M Needham
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- 1104 Doctors and climate change**
Health professionals have a duty to be part of the solution, say Mike Gill, Fiona Godlee, Richard Horton, and Robin Stott
» [Letters p 1110; News p 1116](#)

- 1105 Screening for prostate cancer in younger men**
Clinicians should promote informed decision making while awaiting definitive evidence from RCTs, say Dragan Ilic and Sally Green
» [Research p 1139](#)

- 1106 Communicating risk to the public after radiological incidents**
Providing detailed, comprehensible, and relevant health information is essential, says Steven M Becker
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- 1107 Obesity and cancer**
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Reprogramming of skin cells to create embryonic stem cells is potentially hazardous in current form
- 1113 One in 20 East German doctors spied on patients or colleagues for the Stasi**
Expert accuses drug company of "intimidation"
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- 1115 Less than half of men invited for screening for bowel cancer take up the offer, project shows**
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- 1130 Future of quality measurement**
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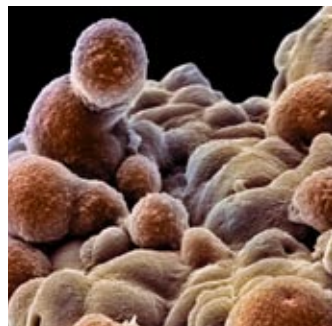
- 1131 "Write me a sentence"**
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Screening for prostate cancer, p 1139



Public health communications after the polonium-210 poisoning, p 1143



Hazards of alcohol hand rubs, p 1154

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1132 Implications of prognostic pessimism in patients with chronic obstructive pulmonary disease (COPD) or asthma admitted to intensive care in the UK within the COPD and asthma outcome study (CAOS): multicentre observational cohort study

Doctors admitting patients aged 45 years and older with severe exacerbations of COPD or asthma considerably underestimated survival at six months

Martin J Wildman, Colin Sanderson, Jayne Groves, Barnaby C Reeves, Jon Ayres, David Harrison, Duncan Young, Kathy Rowan

» Editorial p 1103

1134 Cancer incidence and mortality in relation to body mass index in the Million Women Study: cohort study

In postmenopausal women in the UK 5% of all cancers, or about 6000 cases annually, are attributable to being overweight or obese

Gillian K Reeves, Kirstin Pirie, Valerie Beral, Jane Green, Elizabeth Spencer, Diana Bull, for the Million Women Study Collaboration

» Editorial p 1107

1139 Detection of prostate cancer in unselected young men: prospective cohort nested within a randomised controlled trial

Debate continues on the pros and cons of screening at various ages: here uptake of PSA testing in primary care by men aged 45-49 was only 34% and the prevalence of prostate cancer (of unknown prognosis) was 2.3%

J Athene Lane, Joanne Howson, Jenny L Donovan, John R Goepel, Daniel J Dedman, Liz Down, Emma L Turner, David E Neal, Freddie C Hamdy

» Editorial p 1105

1143 Public information needs after the poisoning of Alexander Litvinenko with polonium-210 in London: cross sectional telephone survey and qualitative analysis

Perceptions that this incident in 2006 was related to espionage helped to reassure 1000 members of the public and 86 potentially exposed people that the risks to personal health were low

G James Rubin, Lisa Page, Oliver Morgan, Richard J Pinder, Paul Riley, Stephani Hatch, Helen Maguire, Mike Catchpole, John Simpson, Simon Wessely

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1147 Vaginal discharge

Des Spence, Catriona Melville

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1152 A patient's journey: Pemphigus vulgaris

Twelve years ago, Siri Lowe developed pemphigus vulgaris, a potentially fatal autoimmune blistering disorder. As her story shows, it can have a devastating impact on patients' lives, as can the side effects of the necessary treatments

Siri Lowe

1154 Lesson of the week: Alcohol hand rubs—hygiene and hazard

Young or confused people and those dependent on alcohol are at risk from ingestion of alcohol hand rubs

John R H Archer, David M Wood, Zoe Tizzard, Alison L Jones, Paul I Dargan

RESEARCH PUBLISHED AHEAD OF PRINT

Antithrombin III in critically ill patients: systematic review with meta-analysis and trial sequential analysis

Arash Afshari, Jørn Wetterslev, Jesper Brok, Ann Møller

Early life determinants of physical activity in 11 to 12 year olds: cohort study

Calum Mattocks, Andy Ness, Kevin Deere, Kate Tilling, Sam Leary, Steven N Blair, Chris Riddoch

Financial ties and concordance between results and conclusions in meta-analyses: retrospective cohort study

Veronica Yank, Drummond Rennie, Lisa A Bero



WHAT WOULD YOU ASK ARA DARZI?

Do you have a burning question for health minister Lord Darzi? Do you want to ask him about his plans for the NHS in England? Or what he thinks a surgeon can bring to health service reform? The *BMJ*'s editor, Fiona Godlee, will put your questions to Lord Darzi next month. Please send your question by 3 December as a rapid response by following the link on bmj.com's homepage.

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MIYASHITA FUMIO, 1999; REPRODUKTIONEN, NAGANO (JAPAN), BIWA-STUDIO

PICTURE OF THE WEEK

Some Japanese people have so much stress that they can't sleep at home; instead, they spend up to €40 to attend concerts aimed specifically at sending them to sleep. A new exhibition, *Sleeping and Dreaming*, opened this week at the Wellcome Collection, London, running until 9 March 2008. It will be reviewed in a future issue of the *BMJ*.

THE WEEK IN NUMBERS

12% Londoners surveyed who perceived their health to be at risk after the poisoning of Alexander Litvinenko (Research p 1143)

80% Proportion of women with chlamydia who lack symptoms (Clinical Review p 1147)

12 000 Newborn babies affected by thalidomide (Observations p 1125)

2 in 5 Pregnant women in England who are not being offered the choice of a home birth (News p 1112)

2°C Predicted rise in temperature of the Earth by 2030 (Letter p 1110)

THE WEEK IN QUOTES

“If prognoses for patients . . . are unduly pessimistic, some patients might be denied intensive care” (Research p 1132)

“Second Life can be used to help students interact with patients in a safe, simulated environment” (Feature p 1122)

“The drug industry is ‘burying its head in the sand’ when dealing with health in developing countries” (News p 1111)

“Six months after becoming ill . . . I had to retire” (Patient's Journey p 1152)

“He ‘would have made a great chemist . . . had he not turned out a great quack’” (Past Caring p 1158)



ON THE COVER

The polonium scare: how public fear was allayed

Editorial, p 1106

Research, p 1143

Cover shows British police officers guarding the sushi restaurant where, on 1 November 2006, former Soviet spy Alexander Litvinenko met Italian security expert Mario Scaramella
COVER IMAGE: LEFTERIS PITRAKIS/AP/PA

PLUS

In this week's BMJ careers

The essence of Ellis

Failing postgraduate exams

GMC test of competence

Becoming a freelance GP

15 minute interview with

SurfAid founder

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 of the article (references will be given as w1, w2, etc) and be labelled as extra on bmj.com.

EDITOR'S CHOICE

The market has failed

Gordon Brown may be having second thoughts about market reforms in the NHS. Last week Nick Timmins described how the government is cutting back its use of the private sector (*BMJ* 2007;335:1066). Expansion of the private sector is still the official line, but only as long as it provides value for money, Mr Brown told this week's conference of the CBI. Beleaguered as he is on almost every front, if Brown is rethinking healthcare markets he'll find support in this week's *BMJ*. Steffie Woolhandler and David Himmelstein argue that US health care, the biggest system in the world in which markets have been given full rein, has failed. Specifically, they point to the toxic mix of public funding (through Medicare and Medicaid) and private provision, exactly the mix that Tony Blair envisioned for the UK. Rather than copying the US model, say Woolhandler and Himmelstein, the UK and the world should put it in quarantine (p 1126).

Why do markets in health care fail to deliver the things we want? The Office of Health Economics explains that effective markets produce the goods and services we want in the right quantities at the lowest possible cost (www.ohschools.org/ohsch3pg2.html). They function because they are able to transmit information about benefits and costs between producers and consumers. Markets fail when information isn't transferred properly, which prevents people from making rational decisions about what they are buying. Markets also fail when the producers have the power to influence price or quantity. Doctors and other health suppliers often have this power.

At a more fundamental level, even the most perfect healthcare market will fail to deliver what most of us want: a fair distribution. Markets are amoral about who consumes what and how much. Markets ration consumption on the basis of price and consumers' incomes. A true market has no room for equal access for equal need, the bedrock on which the NHS was built. Even those who are not hung up on equity for its own sake can see that societies need a healthy workforce and that public ill health carries threats for the rich as well as the poor.

Proof of the market's failure in US health care is nowhere more evident, ironically, than in the fact that 60% of health spending now comes from the public purse. Woolhandler and Himmelstein explore how this has happened. They conclude that using public money to buy care from private firms has led to soaring administrative costs, selective enrolment, corruption, and profiteering: "Investor owned healthcare firms are not cost minimisers but profit maximisers. Strategies that bolster profitability often worsen efficiency. US firms have found that raising revenues by exploiting loopholes or lobbying politicians is more profitable than improving efficiency or quality."

Michael Moore's film *Sicko* (*BMJ* 2007;334:1338-9) used controversial documentary techniques to rage against the parlous state of US health care. Woolhandler and Himmelstein don't pull their punches and may be accused of polemic. But the facts they have marshalled speak for themselves and must give Gordon Brown, or any future government, serious pause for thought.

Fiona Godlee, editor, *BMJ* fgodlee@bmj.com

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**What's in December's *Student BMJ*?**

Student BMJ is a monthly journal for medical students written by medical students. Here are just some of the articles you will find in the December issue of *Student BMJ*.
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•Charging vulnerable migrants for health care
•A history of plastic surgery
If you want to find out more about *Student BMJ* please email studenteditor@bmj.com

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