



Health of US prisoners, p 197



Surgical checklists, p 192



Drug industry in tough times, p 200

Contraceptive pill without prescription?  
p 202

## EDITORIALS

- 183 Antibiotic prophylaxis for minor dermatological surgery in primary care**  
Is usually unnecessary with good preoperative preparation, say Joseph E Grey, Brendan Healy, and Keith Harding » *Research*, p 211
- 184 Indoor radon and deaths from lung cancer**  
Universal coverage of basic anti-radon measures is key, say Anssi Auvinen and Göran Pershagen » *Research*, p 215
- 185 Statins and familial hypercholesterolaemia**  
LDL cholesterol should be lowered by at least 50% from baseline, say Andrew Neil and Steve E Humphries » *Research*, p 223
- 186 Surgical safety checklists**  
Improve collaborative teamwork, minimise surprises, and reduce harm to patients, say Jasmeet Soar, James Peyton, Michael Leonard, and Anne M Pullyblank
- 188 What should clinicians do when faced with conflicting recommendations?**  
Find guidelines that are systematic and transparent, and make informed judgments, say Andrew D Oxman, Paul Glasziou, and John W Williams

## LETTERS

- 189 Coffee creamer as infant food; End stage chronic lung disease**
- 190 Health in intellectual disability; Quality and outcomes framework**

## NEWS

- 191 Eli Lilly pays record fines of \$1.4bn for promoting off-label use of olanzapine for common disorders**  
Personal health budgets are to be piloted in England this summer
- 192 Surgical checklist reduces complications by one third**  
Palestinian doctor appeals for end to killing after losing daughters in last days of conflict
- 193 Doctors seek experts to lead fact finding mission in Gaza**  
FDA lets drug firms distribute articles about off-label uses
- 194 UK firms sign up to display calories of their food on menus**  
UK is to investigate deaths in people with learning disabilities  
Lack of funds slows human-animal stem cell research despite legislation in favour
- 195 Trusts back reading groups to boost health and wellbeing**
- 196 Singapore to speed up medical council's disciplinary procedures**  
German transplant body says it needs more authority to increase donations
- 197 US prisoners are much sicker than average Americans**

## SHORT CUTS

- 198 What's new in the other general journals**

## FEATURE

### 200 Radical treatments for difficult times

The economic downturn is only one of many factors forcing the drug industry to rethink its strategy. Andrew Jack reports

## HEAD TO HEAD

### 202 Should the contraceptive pill be available without prescription?

Two areas in London are piloting over the counter oral contraceptives. Daniel Grossman argues that the policy should be widely adopted but Sarah Jarvis believes it is the wrong approach to reducing unplanned pregnancy

## ANALYSIS

### 204 What should you do when you see a fellow student behaving inappropriately?

After a group of students wrote to the *BMJ* about their experience during an elective, we sought the opinions of an ethicist, a dean, a GMC representative, and a lecturer from an African university

## RESEARCH, CLINICAL REVIEW, AND PRACTICE

 See next page

## OBITUARIES

- 237 Carleton Gajdusek; James Wylie Beattie; Simon Andrew William Samuel Biggart; Ruth Abigail Mary Bridgewater; Sam Citron; John Johnson; Marcus Alexander Sleightholm**

## VIEWS AND REVIEWS

### PERSONAL VIEW

- 239 Aid, aid everywhere but still not a drop in the sink**  
Helena Watson

### COLUMNISTS

- 240 In a class on their own** Des Spence  
The currency of personal medical data  
Trisha Greenhalgh

### BETWEEN THE LINES

- 241 Desperate house calls** Theodore Dalrymple

### MEDICAL CLASSICS

- 241 Mary Barton** Neil H Metcalfe

### REVIEW OF THE WEEK

- 242 Hope and suffering** Perri Klass

## ENDGAMES

- 243 Case report; Statistical question; Picture quiz; Quiz**

## MINERVA

- 244 Disclosure and apologies in healthcare, and other stories**

## FILLERS

- 226 Are you working?**  
**232 A memorable 18 years**  
**236 A thank you**

Calorie counting  
on menus, p 194





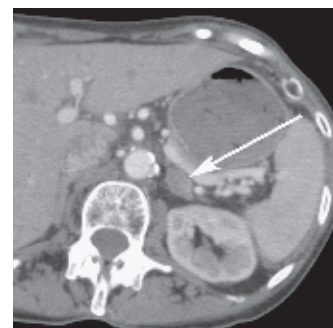
Outcomes of conduct problems in adolescence, p 208



Lung cancer deaths from indoor radon, p 215



Assessment and management of haematuria in primary care, p 227



Rational imaging: Definitive characterisation, p 233

## RESEARCH

### 208 Outcomes of conduct problems in adolescence: 40 year follow-up of national cohort

Among more than 3600 adolescents in Britain, those with marked externalising behaviour—disobedience, lying, lack of punctuality, restlessness, truancy, day dreaming in class, and poor response to discipline—went on to have significantly poorer mental health and family lives, and poorer social and economic outcomes in adulthood Ian Colman, Joseph Murray, Rosemary A Abbott, Barbara Maughan, Diana Kuh, Tim J Croudace, Peter B Jones

### 211 Does single application of topical chloramphenicol to high risk sutured wounds reduce incidence of wound infection after minor surgery? Prospective randomised placebo controlled double blind trial

A single application of topical chloramphenicol to high risk sutured wounds in this primary care trial reduced infection by 40% with a number needed to treat of 22.8: this was not clinically significant

Clare F Heal, Petra G Buettner, Robert Cruickshank, David Graham, Sheldon Browning, Jayne Pendergast, Herwig Drobetz, Robert Gluer, Carl Lisec

» Editorial p 183

### 215 Lung cancer deaths from indoor radon and the cost effectiveness and potential of policies to reduce them

» FAST TRACK

About 1100 deaths from lung cancer in the UK each year are related to radon, and a national policy requiring basic measures to prevent radon in all new homes would be highly cost effective

Alastair Gray, Simon Read, Paul McGale, Sarah Darby

» Editorial p 184

### 219 Use of Framingham risk score and new biomarkers to predict cardiovascular mortality in older people: population based observational cohort study

A single measurement of homocysteine accurately identified which 85 year olds with no history of cardiovascular disease were at high risk of cardiovascular mortality, unlike classic factors such as those included in the Framingham score

Wouter de Ruijter, Rudi G J Westendorp, Willem J J Assendelft, Wendy P J den Elzen, Anton J M de Craen, Saskia le Cessie, Jacobijn Gussekloo

### 223 Efficacy of statins in familial hypercholesterolaemia: a long term cohort study

Lower statin doses than currently advised reduced coronary heart disease risk by 80% in patients in the Netherlands with familial hypercholesterolaemia

Jorie Versmissen, Daniëlla M Oosterveer, Mojgan Yazdanpanah, Joep C Defesche, Dick C G Basart, Anho H Liem, Jan Heeringa, Jacqueline C Witterman, Peter J Lansberg, John J P Kastelein, Eric J G Sijbrands

» Editorial p 185

## CLINICAL REVIEW

### 227 Assessment and management of non-visible haematuria in primary care

John D Kelly, Derek P Fawcett, Lawrence C Goldberg

## PRACTICE

### 233 Rational imaging: Definitive characterisation of adrenal lesions

This article explores the radiological investigations for characterising adrenal lesions, focusing on adrenal protocol computed tomography, positron emission tomography, chemical shift magnetic resonance imaging, and nuclear scintigraphy J C Miller, M A Blake, G W L Boland

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PFIZER

**PICTURE OF THE WEEK**

A still from a cinema and online advertisement warning about the risks of buying prescription only medicine, without a prescription, from unregulated sources. The advert shows a man coughing up a dead rat after taking a pill bought from an illicit website, dramatising the point that counterfeit medicines can contain potentially life threatening ingredients including rat poison.

**THE WEEK IN NUMBERS**

**€20bn** Estimated associated costs in Europe of infected surgical skin incisions (Editorial, p 183)

**50-100 kcal** Average reduction for each food order in a New York scheme where restaurant chains with 15 or more outlets must list calories on their menus (News, p 194)

**1100** Number of deaths from lung cancer in the UK each year that are related to radon, but less than 5% of these arise from radon concentrations >200 Bq/m<sup>3</sup> (Research, p 215)

**≥1+** Score for a positive result of a urine dipstick analysis—the test of choice for diagnosing haematuria (Clinical Review, p 227)

**THE WEEK IN QUOTES**

**“I appeal to the entire world so that my children will be the last ones to pay the price”** (News, p 192)

**“The prescription requirement is an out of date, paternalistic barrier to contraceptive use that is not evidence based”** (Head to Head, p 202)

**“A single application of topical chloramphenicol to high risk sutured wounds reduced infection by 40%”** (Research, p 211)

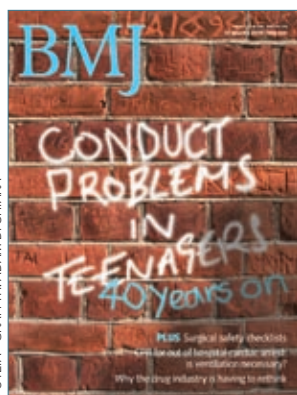
**“Most [adrenal] lesions can be characterised using adrenal protocol computed tomography”** (Practice, p 233)

**“Children with cancer may become public examples of the tragic, the heroic, the innocent, and the deserving”** (Review of the Week, p 242)



## EDITOR'S CHOICE

## Human as hero, not hazard



FOTLIA GRAFFITI: ADAM DI CHIARA

Research, p 208

Speaking last week at a lecture in his honour hosted by the National Patient Safety Agency, James Reason, the world expert on human error, said he was shifting his focus from “human as hazard” to “human as hero,” a species capable of heroic attention to detail. The very next day ex-fighter pilot Chelsey B Sullenberger became America’s perfect hero with his textbook landing of a stricken passenger plane on the Hudson River.

The lecturer was Atul Gawande, surgeon, writer, and global champion of patient safety. He held the packed hall spellbound. “I think of medicine as a test of our ability to manage extreme complexity,” he said. His message was that medicine’s complexity has now overwhelmed the ability of individuals to manage it, however expert and specialised they may be. As a result basic steps are missed and patients die. He told the story of Boeing’s long distance bomber, the B-17 Flying Fortress, which made possible the precision bombing of Germany from 1943 to 1945. But the plane nearly didn’t make it into mass production. Its 1935 demonstration flight to US military chiefs ended in disaster when the air crew forgot to unlock the elevators on the tail. The huge four engine aircraft crashed and burned on take off killing both pilots, their undoubted skills and training unable to save them or the plane.

What retrieved the plane from the scrap heap and secured its place in history was a simple pre-flight checklist. The question is whether we in medicine are ready for similar salvation. I think we have to be. A paper published last week in the *New England Journal of Medicine*, co-authored by Gawande as part of the World

Health Organisation’s World Alliance for Patient Safety, found that a 19 item perioperative checklist significantly reduced postoperative complications and deaths (p 192). As the authors and our editorialists (p 186) explain, the study has limitations. But the methodology is sufficiently robust and the results are sufficiently impressive to justify the NPSA’s commitment that the checklist should be implemented for all operations in England and Wales by February 2010.

Later this year WHO will launch its checklist for labour and delivery, and beyond that lies the prospect of checklists for a range of medical emergencies. Mandating their use will speed up adoption, but we should also try to win hearts and minds. There will be resistance to adopting something as prosaic as a checklist. Early adopters will already be using them. Others will be convinced by the *New England Journal* study. Yet others will want data from their own practice. But some will see checklists as an affront to their professionalism and will never be convinced. At some stage, perhaps sooner rather than later, these surgeons will have to go. We shouldn’t be conned by Hollywood’s version of the hero—the maverick loner who saves the day by breaking all the rules. Instead let’s look to the hero of the Hudson River. He and his crew had skill and experience as well as luck on their side, but they had also trained in teams for this extremely rare scenario, and they knew exactly what to do.

**Fiona Godlee, editor, BMJ** [fgodlee@bmj.com](mailto:fgodlee@bmj.com)

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## WHAT’S NEW AT THE BMJ GROUP

**ADHD in children and adolescents**

See *Clinical Evidence* for a recent systematic review covering pharmacological, psychological and combination treatments [clinicalevidence.bmj.com](http://clinicalevidence.bmj.com)

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## PLUS

Career Focus, jobs, and courses appear after p 242.

## WHAT'S NEW ON BMJ.COM

## LATEST BLOGS

Israeli geriatrician Mark Clarfield blogs about Palestinian gynaecologist Ezeldeen Abu al-Aish (pictured), whose three daughters were killed in a bomb blast during Israel's assault on Gaza. Medical student Frances Dixon is grappling with neuroscience and endocrinology after spending a disappointing Christmas where nobody asked her for medical advice. Her tutor had warned her she would be treated as a doctor after a term at medical school. And *BMJ* clinical editor Elizabeth Loder examines the propriety of partnerships between academia and the pharmaceutical industry.

To comment on these and other blogs, go to <http://blogs.bmj.com/bmj/>

## HEAD TO HEAD

**Have targets done more harm than good in the English NHS?**

Yes, says James Gibb, who argues that the focus has ignored underlying problems important to patient care. Gwyn Bevan disagrees. Targets have delivered real improvements in patient care, he believes.

Access the articles at <http://www.bmj.com/channels/comment.dtl>

## LATEST RESEARCH

**Comparing hospital and telephone follow-up after treatment for breast cancer**

Telephone follow-up by specialist breast care nurses has positive benefits for women with breast cancer, according to a randomised equivalence trial.

**Impact of presumed consent for organ donation on donation rates**

Presumed consent alone is unlikely to explain the variation in organ donation rates between countries, according to a systematic review.

To access these and other research papers, go to <http://www.bmj.com/channels/research.dtl>

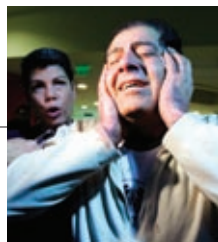
## LATEST PODCASTS

The US gets a new president this week, and to mark the event Deborah Cohen talks to *BMJ* Washington correspondent Vidhya Alakeson about US health care under President Obama, while Boston paediatrician Howard Bauchner and health economist Gail Wilensky outline their hopes and fears for the new administration.

Trish Groves interviews Jane Morrell, author of a randomised trial of training health visitors to assess women for postnatal depression and provide them with psychological support.

Download the weekly *BMJ* podcast, which also includes a round-up of the latest news, at iTunes, or by visiting <http://podcasts.bmj.com/bmj/>

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**Last week's poll asked:**  
"Should doctors work beyond 70?"

**You replied:**

**YES** 484 votes **(40%)**

**NO** 726 votes **(60%)**

**This week's poll asks:**

"Have NHS targets such as minimum waiting times done more harm than good?"



Let us know where you stand on this issue at [www.bmj.com/#poll](http://www.bmj.com/#poll)

## MOST READ

Festive medical myths

RCT of Alexander technique lessons, exercise and massage for back pain

Management of low back pain

Evaluating cardiovascular risk assessment for asymptomatic people

Outcomes of conduct problems in adolescence

## MOST COMMENTED ON

'I'll bet you a fiver it's not'

UK government launches initiative to cut obesity

Stepping into the therapeutics void

Electroconvulsive therapy

Management of low back pain

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