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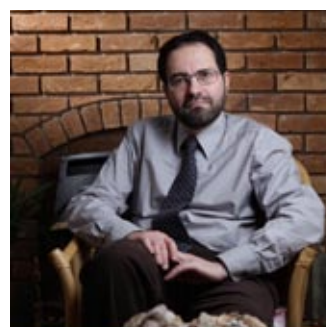
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## The Editor, BMJ

BMA House, Tavistock Square,  
London WC1H 9JR

Email: editor@bmj.com

Tel: +44 (0)20 7387 4410

Fax: +44 (0)20 7383 6418

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GREENPEACE

## PICTURE OF THE WEEK

Greenpeace activists erect 100 crosses at the Cenotaph in Hong Kong to mourn the lost chance to stop climate change at the Copenhagen climate summit, which ended on 18 December. A decision "to take note" of an accord that the Earth's temperature should not rise by more than 2°C was agreed, far from the legally binding treaties that many had hoped for. UK politicians claimed that the talks had been "held to ransom" by a small group of nations. Other countries, however, accused Western nations of dictating terms to the rest of the world.

See **NEWS**, p 11, **EDITORIALS**, p 4, and **LETTERS**, p 7.

## THE WEEK IN NUMBERS

**18%** Prevalence of atrial fibrillation in people older than 85; up from 0.7% in 55-59 year olds (**Clinical Review**, p 40)

**1.1 million** People in the UK who have an eating disorder (**Practice**, p 46)

**69.1%** Relative risk of women being admitted with venous thromboembolism within six weeks of inpatient surgery compared with no surgery (**Research**, p 32)

## QUOTE OF THE WEEK

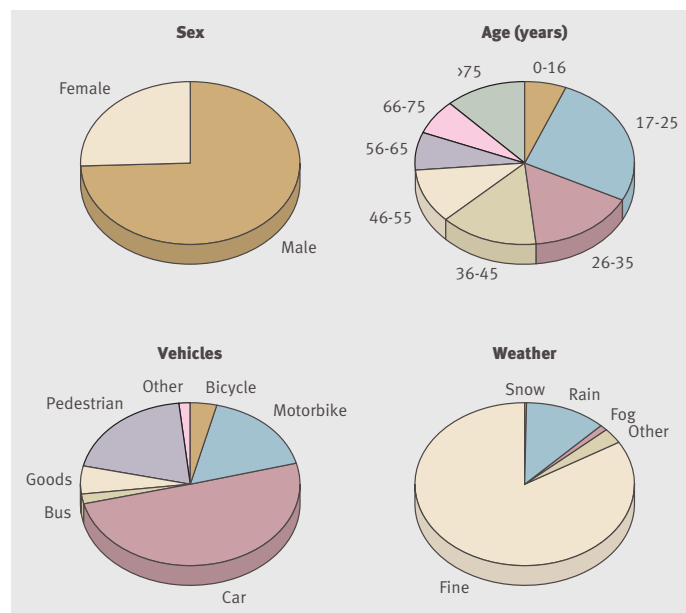
"For the past 20 years people who ought to know better have been bashfully embracing one evidence free treatment after another, for fear that refusing to do so would make them seem reactionary old fuddy duddies"

Nigel Hawkes, on the Royal College of Physicians' objection to government plans to regulate herbalists (**Observations**, p 19)

## GRAPHIC OF THE WEEK

**Deaths on British roads in 2008, from Department of Transport data. In all 2538 people died and nearly a quarter of a million were injured. Road crashes are the largest single cause of death for people between ages 5 and 35, and road travel is far deadlier than going by train or plane. Research in this week's BMJ shows that the introduction of 20 mph zones in London was associated with a 40% reduction in casualties and collisions.**

See **RESEARCH**, p 31, and **EDITORIALS**, p 1





## EDITOR'S CHOICE

## A few changes for 2010

**Our readership continues to grow in print and online: the *BMJ* is now the most widely read weekly medical publication in the UK, and its online readership is second only to that of the *New England Journal of Medicine***

In this first print issue of 2010 you'll find a few small but significant changes. Most significant is our new Research section (p 30), where authors summarise their research articles that have been published in full on [bmj.com](http://bmj.com). In case any of you have missed previous explanations for this move away from publishing full research articles in print, let me summarise.

Repeated surveys of print readers over more than 20 years have shown that, although some read the research abstracts, very few read the full research articles. Meanwhile, online surveys consistently put research articles among the most popular types of *BMJ* content. This has confirmed our view that research belongs online, where authors can have all the space they need (the *BMJ* has no word limits on research articles) as well as an expanding array of online bells and whistles (additional tables and figures, videos, podcasts, commentaries, rapid responses, and blogs).

We were already shortening research articles in print, but this created work for authors and for us and confusion among readers as to which was the full version. So we have come up with one page summaries in print, which we hope will increase the impact of research among clinicians and policy makers. Feedback from authors and readers has been positive. One suggestion has been that we could do more to highlight implications for clinicians and health systems. Over time, the summary format will evolve.

It's a good time to take this step. Our readership continues to grow in print and online: the *BMJ* is now the most widely read weekly medical publication in the UK, and its online readership is second only to that of the *New England Journal of Medicine*.

Article submissions are growing, from the UK and internationally. And, though I hesitate to mention such a flawed measure, the *BMJ*'s impact factor is a respectable 12.8.

While allowing our research authors full stretch on line, we now have room for more educational content in print—something that readers consistently ask us for. This week we have a clinical review on atrial fibrillation (p 40), a patient's journey from a doctor recovering from her 10 year fight with anorexia nervosa (p 46), a lesson of the week describing prolonged amenorrhoea in a woman treated for breast cancer (p 48), and a 10 minute consultation on hirsutism (p 51). There's also our weekly series of Endgames to test your clinical knowledge (p 57).

In addition, as part of our commitment to support better clinical and health systems research, you'll find regular articles in the Research Methods and Reporting section that explore ways of improving how research is performed and reported (p 36).

And there's a new occasional column, Round Table, where you can highlight a current book, film, or television programme for others to discuss in our online forum [doc2doc](http://doc2doc.doc2doc.com) ([doc2doc.com](http://doc2doc.doc2doc.com)). This week, that famous scourge of complementary medicine David Colquhoun turns his sceptical eye on the low fat diet in his review of Gary Taube's paradigm-shifting book *The Diet Delusion*.

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

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Career Focus, jobs, and courses appear after p 56

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