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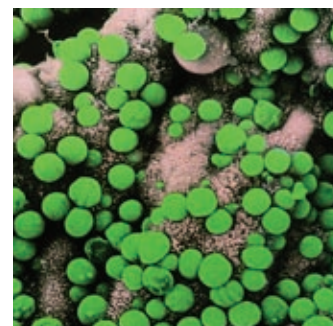
Cervical collar versus wait and see, p 952



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Cryptosporidiosis, p 963

RESEARCH

952 **Cervical collar or physiotherapy versus wait and see policy for recent onset cervical radiculopathy: randomised trial**

Both interventions reduced neck and arm pain substantially more than watchful waiting in 205 adult Dutch outpatients who had experienced symptoms and signs for less than a month
Barbara Kuijper, Jos Th J Tans, Anita Beelen, Frans Nolle, Marianne de Visser
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955 **pico** **FAST TRACK**

Reliability of patient responses in pay for performance schemes: analysis of national General Practitioner Patient Survey data in England

The two survey questions linked to general practitioner payments were reliable measures of practice performance, and no systematic association existed between response rates and practice quality scores
Martin Roland, Marc Elliott, Georgios Lyratzopoulos, Josephine Barbiere, Richard A Parker, Patten Smith, Peter Bower, John Campbell
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956 **pico** **Explaining the rise in antidepressant prescribing: a descriptive study using the general practice research database**

Antidepressant prescriptions per person nearly doubled from 1993 to 2004 in UK primary care, mainly owing to a moderate rise in long term treatment rather than increased rates of diagnosis or initial prescribing
Michael Moore, Ho Ming Yuen, Nick Dunn, Mark A Mullee, Joe Maskell, Tony Kendrick

957 **pico** **Rate of undesirable events at beginning of academic year: retrospective cohort study**

Among nearly 20 000 Australian patients whose anaesthetic procedures were done by 93 new trainees, the risk was highest in the first month of the academic year, regardless of trainees' previous clinical experience
Guy Haller, Paul S Myles, Patrick Taffé, Thomas V Perneger, Christopher L Wu
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958 **Use of serial qualitative interviews to understand patients' evolving experiences and needs**

Interviewing patients over the course of their illness can give a much better picture of their experience than single interviews, but the approach is rarely used. Scott Murray and colleagues explain how to get the most from it
Scott A Murray, Marilyn Kendall, Emma Carduff, Allison Worth, Fiona M Harris, Anna Lloyd, Debbie Cavers, Liz Grant, Aziz Sheikh

961 **STATISTICS NOTES**

Analysis of continuous data from small samples

Studies with small numbers of measurements are rare in the modern BMJ, but they remain plentiful in specialist clinical journals. Their analysis is often more problematic than that for large samples
J Martin Bland, Douglas G Altman

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Cryptosporidiosis

This review assesses the epidemiology, clinical presentation, diagnosis, and management of cryptosporidiosis
A P Davies, R M Chalmers

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Applying for ethical approval for research in the United Kingdom

A Smajdor, M R Sydes, L Gelling, M Wilkinson

972 **10-MINUTE CONSULTATION**

Malignant melanoma

Stella Ivaz, Hawys Lloyd-Hughes, Pippa Oakeshott, Saima Shah



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MOHAMMED SEENEA/APPA IMAGES

PICTURE OF THE WEEK

Maldivian Minister of Fisheries and Agriculture signs a document calling on all countries to cut down their carbon dioxide emissions ahead of a major UN climate change conference in Copenhagen later this year. Government ministers in scuba gear held an underwater meeting of the Maldives' Cabinet to highlight the threat global warming poses to one of the lowest lying nations on earth. The BMJ is planning to include articles on climate change to link in with the Copenhagen conference.

THE WEEK IN NUMBERS

84% Proportion of patients seen by their general practitioner within two days (Editorial, p 930)

£100 billion Economic, social, and human cost of mental illness a year in the UK (News, p 938)

46 million Number of Americans without health insurance (Observations, p 948)

1.40 Adjusted rate ratio for undesirable events in procedures carried out by new trainee anaesthetists at the beginning of the academic year (Research, p 957)

12.7 days Mean duration of cryptosporidiosis symptoms (Clinical Review, p 963)

THE WEEK IN QUOTES

“It's clear that smoking bans work”
(News, p 943)

“The Department of Health's mandatory MRSA screening policy breaches ethical guidelines” (Analysis, p 949)

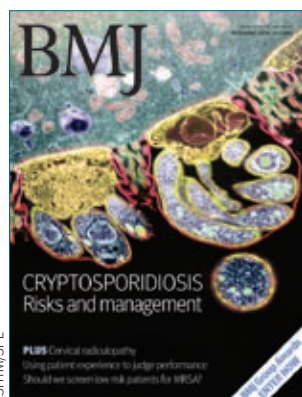
“The rise in antidepressant prescribing is mainly explained by small changes in the proportion of patients receiving long term treatment” (Research, p 956)

“Applying for ethical review in the UK can be time consuming and burdensome for researchers” (Practice, p 968)

“Robots are designed to hold the surgeon's hand in the operating theatre, not take over the operation”
(Review of the Week, p 976)

EDITOR'S CHOICE

Effective, safe, and a good patient experience



Clinical review, p 963

We talk a lot about improving the quality of health care. But until recently if you asked people what they meant by quality you got a range of unmemorable answers. Then came the cumulative work of Sheila Leatherman and her colleagues, and in the UK Ara Darzi's 2008 High Quality Care for All. Now everyone I talk to is using the same language: quality means clinical effectiveness, safety, and a good experience for the patient. This week's *BMJ* has something to say on all three.

On clinical effectiveness, Barbara Kuijper and colleagues ask what's the right non-surgical approach for people with cervical radiculopathy (p 952). Patients with subacute onset have a good prognosis, so it's reasonable to wait and see for the first six weeks. But there is little evidence on what works best to alleviate the pain, which can be excruciating, while waiting for things to resolve. So the authors evaluated two non-invasive approaches: immobilisation with a semi-hard collar versus mobilisation with physiotherapy. Intriguingly, both were similarly effective in reducing neck and arm pain compared with a wait and see policy. The authors recommend immobilisation because it's cheaper than physiotherapy, but in his linked editorial David Cassidy says this is an opportunity to let the patient decide (p 927).

On safety, Guy Haller and colleagues ask whether more mistakes happen at the beginning of the academic year (p 957). Their retrospective look at patients undergoing anaesthesia during one academic year in Australia finds that they do: the rate of

undesirable events was significantly raised in the first month and returned to the background level only by the end of the fourth month. Interestingly, they found the same excess risk in all new trainees regardless of their experience, which suggests that this is not just a problem of newly qualified doctors needing to gain more experience but of new staff, however well trained, who are unfamiliar with their working environment.

In their linked editorial Paul Barach and Julie Johnson say we must see the safe maturation of trainees as a complex adaptive process (p 929). They call for more standardisation across health systems, better supervision, team training, graduated uptake of clinical responsibilities, and staggering of start dates for trainees over the year.

Finally, to patients' experience. Scott Murray and colleagues (p 958) tell us that interviewing patients over the course of their illness gives a much better picture of their experience than single interviews. This is a million miles from the shallow snapshot of patients' views gleaned from the 2009 survey of NHS general practice reported by Martin Roland and colleagues (p 955). Two questions on access to care were used to help judge GPs' performance—not the best way to monitor access, says Chris Salisbury (p 930)—and decide on their pay. There was a large non-response rate, but GPs may be reassured by Roland and colleagues' conclusion that this did not make the pay for performance system unfair.

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

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Programme announced for International Forum on Quality and Safety in Healthcare, April 2010, Nice, France <http://internationalforum.bmj.com>

Drug and Therapeutics Bulletin (DTB)—october issue

Reviews on BNP testing in heart failure, imiquimod for superficial and in situ skin malignancy and anticoagulation with dabigatran or rivaroxaban dtb.bmj.com

ENDGAMES: your exam preparation and publishing opportunity!

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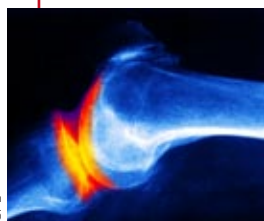
Career Focus, jobs, and courses appear after p 978

WHAT'S NEW ON BMJ.COM

LATEST RESEARCH

Supervised exercise therapy versus usual care for patellofemoral pain syndrome: This randomised controlled trial assessed the effectiveness of supervised exercise therapy with respect to recovery, pain, and function in patients with patellofemoral pain syndrome. Van Linschoten and colleagues found that supervised exercise therapy resulted in less pain and better function at short term and long term follow-up than with usual care. Exercise therapy did not produce a significant difference in the rate of self reported recovery.

Read this and other research at bmj.com/research.dtl



LATEST COMMENT

Alcohol use in South Asians in the UK: Alcohol use in South Asians in the UK is under-recognised, and alcohol related harm is disproportionately high warn editorialists Gurprit Pannu and colleagues. The degree and pattern of alcohol use among UK South Asians varies greatly. Differences in religion, culture, history, and socioeconomic position all play a part, while differences between generations and increased alcohol consumption from acculturation further complicate the picture. The authors call for more research to improve our understanding of alcohol related harm among different ethnic groups.

Read this and other comments at bmj.com/channels/comment.dtl



REX



Over on doc2doc, Richard Lehman continues his journal blog. This week he writes about why innovative surgeons are uncommon and dangerous animals, the effect that sleep deprivation has on procedural complications, and why paracetamol should not be given to children after vaccination. To read Richard's blog and join in other discussions visit doc2doc.bmj.com/

LATEST PODCAST

This week Duncan Jarvies talks to Peter Fleming about his latest findings on the risk factors for SIDS. He also finds out from Michael Moore about what's causing the rise in antidepressant prescription in the UK. Birte Twisselmann takes us through the news. You can subscribe via iTunes or listen at podcasts.bmj.com/bmj/

PSYCHIATRIC BULLETIN



LATEST BLOGS

Last week the Declaration on Mental Health Research was launched in the UK. The initiative is aimed at drawing attention to the imbalance of resources devoted to research on mental illnesses compared with other disabling conditions. Til Wykes writes about the launch and what the initiative hopes to achieve.

Paul Hodgkin discusses how the web is enabling people, patients, and carers to have their say about what they think about the medical profession. Everyone has a public voice on the web, and they can say what they think for free. "As this revolution unfolds, medicine is likely to become more mutual, our sense of ourselves and of our ability to heal, more explicitly bound up with these new, public conversations that we can neither control nor ignore," he says.

To read or comment on *BMJ* blogs, go to blogs.bmj.com/bmj/

Last week's poll asked:
Are women doctors still discriminated against?

You voted:
Yes: 317 (55%)
No: 261 (45%)



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This week's poll asks:
"Will you take the swine flu vaccine?"
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