

EDITORIALS

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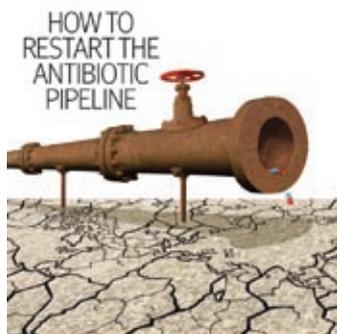
- ON THE CONTRARY**
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- 1115 Stoking the antibiotic pipeline**
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- 1124 Low maternal exposure to ultraviolet radiation in pregnancy, month of birth, and risk of multiple sclerosis in offspring: longitudinal analysis**
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MALCOLM WILLET

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Umbilical cord pH, pp 1092, 1121



Mobile phones and brain tumours, p 1105



The health secretary's cuts, p 1102

How trusts inhibit whistleblowers, p 1110



CLINICAL REVIEW

- 1125** **Diagnosis and management of the antiphospholipid syndrome**
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RATIONAL IMAGING

- 1133** **Imaging transient ischaemic attack with diffusion weighted magnetic resonance imaging**
Adam Wallis, Tim Saunders

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- 1136** **Stridor in children**
Laura J L Halpin, Claire L Anderson, Nicole Corriette

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- 1137** **Sexual precocity in a 4 year old boy**
A Mason, E McNeill, A M Wallace, J M Connell, M D C Donaldson

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- 1139** **Mortimer Sackler**
Psychiatrist, pharmacology pioneer, wealthy drug company owner, and philanthropist
- 1140** **Gordon Easton; Abraham Stone Freedberg; Sally Mashedor; Robert Malcolm Moffitt; Joyce Mary Owen; Ratnasabapathy Sashidharan; Richard John West**

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- 1141** **Lethal injections: no healthcare professionals should be involved**
Mike Weaver

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- 1142** **Florence and the war machine**
Colin Martin

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- 1143** **The cost of reading**
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- 1143** **4.48 Psychosis** by Sarah Kane
Richard Hurley

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- 1144** **Pain revisited**
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- A sometimes unhealthy coalition**
Ike Iheanacho

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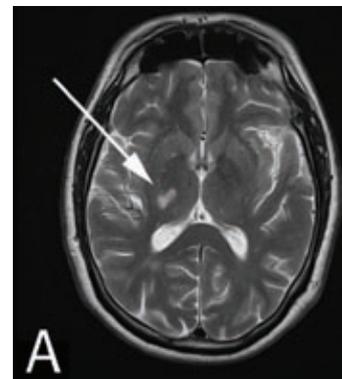
- 1145** **Quiz page for doctors in training**

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- 1146** **The dangers of waking up, and other stories**

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- 1138** **Guinea pigs for the “developed” countries**



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Sarah Kane’s suicidal psychosis, p 1143



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CHRISTOPHER BLACK/WHO

PICTURE OF THE WEEK

A statue commemorating those who contributed to the eradication of smallpox. The statue, which includes a girl about to be vaccinated, has been unveiled during this week's World Health Assembly in Geneva

See **NEWS**, p 1104

THE WEEK IN NUMBERS

34 years Mean age when antiphospholipid syndrome is diagnosed (*Clinical Review*, p 1125)

11-15% Estimated risk of completed stroke at one month after a transient ischaemic attack (*Practice*, p 1133)

12 months Length of time for which bacterial resistance in an individual patient can persist after an antibiotic for a respiratory or urinary infection (*Research*, p 1120)

QUOTE OF THE WEEK

“Questionnaire culture is reductionist nonsense that dismisses experience and clinical judgment, offering phoney reassurance”

Des Spence, Glasgow general practitioner, on the dearth of evidence for opioids for pain in conditions other than cancer (*Views and Reviews*, p 1144)

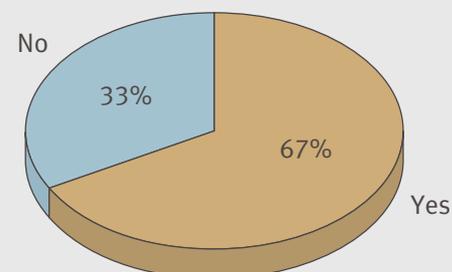
BMJ.COM POLL

Recently we asked:
“Should medical students be regulated?”
(total votes 681)

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See the head to head debate, *BMJ* 2010;340:c1677

Cast your vote in the latest poll on **bmj.com**



EDITOR'S CHOICE

CME, GMC, and Florence Nightingale

Suddenly, requests under the Freedom of Information Act have become the way of extracting information from the UK's secretive public bodies

This week sees the launch of a brand new, free service for BMJ readers: certified CME credits for reading research articles and answering linked multiple choice questions. It marks the first phase of a collaboration between the journal and the Cleveland Clinic. In their accompanying editorial, Steven Kawczak and Kirsten Patrick explain the mechanics and the outcome: credits towards the American Medical Association's Physicians Recognition Award (p 1093). We'll be linking roughly one article a week to a CME module, but in this inaugural week we're kicking off with three. While US doctors will immediately appreciate their value, we're seeking accreditations elsewhere. In the meantime, the questions should help all doctors with their continuing learning needs. We hope UK doctors will find the initiative useful when seeking revalidation with the GMC.

Meanwhile, is it fanciful to detect improvements at the GMC under its new chief executive officer (Niall Dickson) and chair (Peter Rubin)? The council was admirably quick to announce an expert committee to review guidance for paediatricians doing child protection work (*BMJ* 2010;340:c2551). However, there remains some more unfinished business from the previous regime: the council's attempts to keep secret its handling of a case involving a lay member with undeclared links with the Church of Scientology. "Why are lay panellists treated differently from the doctors they sit in judgment on, who can expect very public revelation of their misdemeanours?" asks Oliver Dearlove in his letter (p 1100). The case only came to light when documents were released under the Freedom of Information Act, and further requests are currently in progress (www.bmj.com/cgi/eletters/340/mar30_4/c1766#233737).

Suddenly, requests under the Freedom of Information Act have become the way of extracting information from the UK's secretive public bodies. When Adrian O'Dowd, Josephine Hayes, and Deborah Cohen couldn't find whistleblowing policies on the websites of NHS

foundation trusts they invoked the act—and largely got what they wanted (p 1110). Returns from 118 of 122 English trusts show "widely differing policies". Sadly for something that is meant to protect whistleblowers against recrimination, sanctions against malicious or false claims seem to be the most frequently mentioned feature of the policies. It's not all bad though: while Barnsley Hospital NHS Foundation Trust mentions the word "disciplinary" 21 times, the Walton Centre NHS Foundation Trust gets its message across without using the term once. The authors quote Peter Gooderham, law lecturer at the University of Manchester, who argues for the centralisation of whistleblowing policies, with a model disclosure policy produced by the Department of Health.

Concerns about whistleblowing extend north of the border, where doctors are calling for better protection when speaking out (p 1105). A BMA survey in Scotland found that four in 10 doctors failed to report concerns because they did not think it would make a difference or feared the consequences of speaking out.

Was Florence Nightingale an early whistleblower? Like whistleblowers she's remembered mostly for her trenchant criticisms—in this case of army medicine. But unlike most whistleblowers, her fate was to be lionised rather than ostracised. In this week's journal, Colin Martin reviews the revamped Florence Nightingale Museum at St Thomas's Hospital, London (p 1142). It doesn't sound as if its treatment of St Florence of Scutari is any less hagiographic than the museum's treatment of her in its previous incarnation. Those pondering a visit might first want to fortify themselves with Keith Williams's demolition job (*BMJ* 2008;337:a2889).

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The accuracy of clinical symptoms and signs for the diagnosis of serious bacterial infection in young febrile children: prospective cohort study of 15 781 febrile illnesses
Don't use aspirin for primary prevention of cardiovascular disease
The impact of removing financial incentives from clinical quality indicators: longitudinal analysis of four Kaiser Permanente indicators:

Career Focus, jobs, and courses appear after p 1144

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