



FEATURE, p 20

NEWS

- 1 Novartis takes legal action over trusts' advice to use bevacizumab for wet AMD to save money
Baby who died raises controversy over child abuse
- 2 Disputes over payments for short stay patients are wasting NHS time, says watchdog
Process on closing service at Royal Brompton was fair, judges rule
- 3 British doctor fabricated the results of a non-existent experiment, US body finds
Marmot warns that austerity programmes will lead to rise in unemployment and increased mortality
- 4 Judges grill five tobacco companies over their challenge to Australia's law on plain packaging
US bill proposes speeding up free online access to federally funded research
- 5 "Responsible officers" could test language skills of EU doctors
Government's alcohol strategy is criticised for being short on targets and lacking ambition
- 6 Attacks on doctors rise in conflict zones, report says
Blackout at PFI hospital in Edinburgh forces surgeon to operate by torchlight



Payment for day patients, p 2

RESEARCH

RESEARCH HIGHLIGHTS

- 11 The pick of *BMJ* research papers this week
- ### RESEARCH NEWS
- 12 All you need to read in the other general journals
- ### RESEARCH PAPERS
- 14 Clinical and cost effectiveness of mobile phone supported self monitoring of asthma: multicentre randomised controlled trial
Dermot Ryan et al
 - 15 Effect of offering different levels of support and free nicotine replacement therapy via an English national telephone quitline: randomised controlled trial
Janet Ferguson et al
EDITORIAL, p 7
 - 16 Lung protective mechanical ventilation and two year survival in patients with acute lung injury: prospective cohort study
Dale M Needham et al
EDITORIAL, p 8
 - 17 Risk factors for mortality from imported falciparum malaria in the United Kingdom over 20 years: an observational study
Anna M Checkley et al

- 18 Cost effectiveness of alternative planned places of birth in woman at low risk of complications: evidence from the Birthplace in England national prospective cohort study
Elizabeth Schroeder et al
- 19 Angiotensin receptor blockers and risk of cancer: cohort study among people receiving antihypertensive drugs in UK General Practice Research Database
Krishnan Bhaskaran et al

COMMENT

EDITORIALS

- 7 Smoking cessation strategies
Simon Chapman and Melanie Wakefield
RESEARCH, p 15
- 8 Lung protective ventilation
Luigi Camporota and Nicholas Hart
RESEARCH, p 16
- 9 Opium, opioids, and an increased risk of death
Irfan A Dhalla
- 10 Health information technology and patient safety
Christopher A Longhurst and Howard M Landa



Opioids, p 9

FEATURES

- 20 Asthma in elite athletes: what can we learn?
As Olympic competitors are told they no longer need authorisation for using the most common inhalers, Sophie Arie looks at why asthma seems so common in elite athletes and the lessons that could be of huge benefit to the general public
- 23 Health campaigns that have changed public understanding
Anna Sayburn speaks to the people behind the campaigns shortlisted for the BMJ Group award for healthcare communication

ANALYSIS

- 24 Scientific evidence alone is not sufficient basis for health policy
Keith Humphreys and Peter Piot argue that basing health policy solely on evidence is inherently contrary to the essence of policy development and even potentially dangerous



Articles appearing in this print journal have already been published on bmj.com, and the version in print may have been shortened. bmj.com also contains material that is supplementary to articles: this will be indicated in the text (references are given as w1, w2, etc) and be labelled as extra on bmj.com.

Please cite all articles by year, volume, and elocator (rather than page number), eg *BMJ* 2012; 344:d286.

A note on how to cite each article appears at the end of each article, and this is the form the reference will take in PubMed and other indexes.



Medicine and malpractice, p 33

COMMENT

LETTERS

- 26 Collaboration with drug industry
- 27 DPP-4 inhibitors in type 2 diabetes
- 28 New kind of hospital physician; Testicular self examination; Hospital episode statistics
- 29 Blood pressure differences; Ingrowing toenails; Health and Social Care Bill

OBSERVATIONS

ON THE CONTRARY

- 30 Springtime for open access in academia
Tony Delamothe

VIEWS AND REVIEWS

PERSONAL VIEW

- 31 Tendering out general practice is bad for us all
Katy Gardner

REVIEW OF THE WEEK

- 32 A Plague of Prisons by Ernest Drucker
Stephen Ginn

BETWEEN THE LINES

- 33 For a few dollars more
Theodore Dalrymple

MEDICAL CLASSICS

- 33 The Mask of Sanity by Hervey Milton Cleckley
Mohammad Shaiyan Rahman

OBITUARIES

- 34 Alistair Riddell; David Anthony Earnshaw; John Robert Stephen Innes; William Stuart Jamieson

LAST WORDS

- 49 All applicants to medical school should be interviewed
Des Spence
Consequences Robin Ferner

EDUCATION

CLINICAL REVIEW

- 35 Diagnosis and management of bone stress injuries of the lower limb in athletes
James Pegrum et al

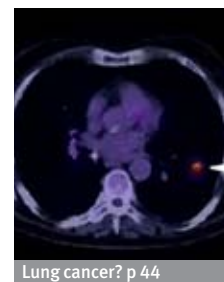
PRACTICE

RATIONAL TESTING

- 41 Investigating asthma symptoms in primary care
Christine Jenkins et al

RATIONAL IMAGING

- 44 Investigating the solitary pulmonary nodule
William McNulty et al



ENDGAMES

- 48 Quiz page for doctors in training

MINERVA

- 50 Ideators and enactors, and other stories

FILLERS

- 47 Corrections and clarifications

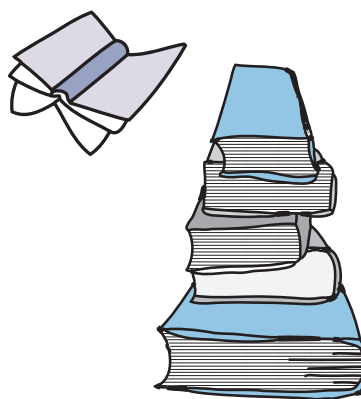
The archive

Dates from 1840

Delve into the complete back archive from the first issue and read *BMJ* articles written by eminent authors such as David Livingstone, Joseph Lister, Arthur Conan Doyle, Florence Nightingale, Richard Doll, and Alice Stewart.

Visit

bmj.com/archive



BMJ

BMJ

28 April 2012 Vol 344

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
BMA MEMBERS' INQUIRIES
 Email: membership@bma.org.uk
 Tel: +44 (0)20 7383 6642
BMJ CAREERS ADVERTISING
 Email: sales@bmjcareers.com
 Tel: +44 (0)20 7383 6531
DISPLAY ADVERTISING
 Email: sales@bmjgroup.com
 Tel: +44 (0)20 7383 6386
REPRINTS
 UK/Rest of world
 Email: ngurneyrandall@bmjgroup.com
 Tel: +44 (0)20 8445 5825
 USA
 Email: mfgler@medicalreprints.com
 Tel: +1 (856) 489 4446
SUBSCRIPTIONS
 BMA Members
 Email: membership@bma.org.uk
 Tel: +44 (0)20 7383 6642
 Non-BMA Members
 Email: support@bmjgroup.com
 Tel: +44 (0)20 7383 6270
OTHER RESOURCES
 For all other contacts:
 resources.bmj.com/bmj/contact-us
 For advice to authors:
 resources.bmj.com/bmj/authors
 To submit an article:
 submit.bmj.com

BMJ Group

The BMJ is published by BMJ Publishing Group Ltd, a wholly owned subsidiary of the British Medical Association.

The BMA grants editorial freedom to the Editor of the *BMJ*. The views expressed in the journal are those of the authors and may not necessarily comply with BMA policy. The *BMJ* follows guidelines on editorial independence produced by the World Association of Medical Editors (www.wame.org/wamestmt.htm#independence) and the code on good publication practice produced by the Committee on Publication Ethics (www.publicationethics.org.uk/guidelines/).

The *BMJ* is intended for medical professionals and is provided without warranty, express or implied. Statements in the journal are the responsibility of their authors and advertisers and not authors' institutions, the BMJ Publishing Group, or the BMA unless otherwise specified or determined by law. Acceptance of advertising does not imply endorsement.

To the fullest extent permitted by law, the BMJ Publishing Group shall not be liable for any loss, injury, or damage resulting from the use of the *BMJ* or any information in it whether based on contract, tort, or otherwise. Readers are advised to verify any information they choose to rely on.

©BMJ Publishing Group Ltd 2012 All Rights Reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any other means, electronic, mechanical, photocopying, recording, or otherwise, without prior permission, in writing, of the *BMJ*

Published weekly. US periodicals class postage paid at Rahway, NJ. Postmaster: send address changes to *BMJ*, c/o Mercury Airfreight International Ltd Inc, 365 Blair Road, Avenel, NJ 07001, USA. \$796. Weekly

Printed by Polestar Limited

PICTURE OF THE WEEK

An ethical code for public servants found by Dr Gabriel Scally in a street in Addis Ababa, Ethiopia, during the 13th triennial world congress on public health. This congress held this week aims to bring together leaders in health from across the globe to protect and promote global public health, and to unite the innovation and experience from the developing and developed worlds to address the challenges and opportunities facing public health organisations worldwide in making progress towards attaining global health equity.

Follow Dr Gabriel Scally, public health doctor, on Twitter @GabrielScally and read his blog at blogs.bmj.com/bmj



RESPONSE OF THE WEEK

“Following the prime minister’s launch of the recent campaign, I found myself asking this question [What are the benefits of an



early diagnosis of dementia?]. Having watched 3 close family members suffer differing stages of this terrible illness, I am left uncertain of any benefit from pharmacological or other interventions. Patients and their families are seen at regular intervals by well meaning ologists and therapists with very little to offer other than smiles and encouragement. The patient then returns home to the care of the immediate family, who are increasingly socially isolated as the circle of friends shrinks. Scant funds should be directed to patient and family support rather than thrown fruitlessly at big pharma”

Andrew Kennedy, doctor, Royal Victoria Hospital, Belfast, UK, in response to “What are the benefits of an early diagnosis?” (*BMJ* 2012;344:e2747)

MOST READ ON BMJ.COM

Safety and efficacy of antibiotics compared with appendicectomy for treatment of uncomplicated acute appendicitis: meta-analysis of randomised controlled trials

The effectiveness of SPARX, a computerised self help intervention for adolescents seeking help for depression: randomised controlled non-inferiority trial

Comparison of metformin and insulin versus insulin alone for type 2 diabetes: systematic review of randomised clinical trials with meta-analyses and trial sequential analyses

Cluster headache

BMJ.COM POLL

Last week we asked, “Is spending on proton beam therapy going too far too fast?”

56% voted no (total 143 votes cast)

This week’s poll asks: “What is the most important change to medical education in the last 20 years?”

1. Debt
2. Competition to get into medical school
3. Competition for training posts
4. Workforce planning
5. Teaching methods and resources

EDITOR'S CHOICE

Making the most of the Olympics

Perhaps the most important legacy for all people with asthma is the new consensus that, for most of them, exercise is good. It builds lung function and improves quality of life

The London Olympics are only 13 weeks away, and for those who care about such things the excitement is mounting. Its organisers have been keen to emphasise that the games will have something for everyone and will leave a lasting legacy. There are many reasons to doubt this. In a systematic review published in the *BMJ* two years ago (doi:10.1136/bmj.c2369), Gerry McCartney and colleagues found little evidence that major multi-sports events deliver health or socioeconomic benefits. But this week's feature by Sophie Arie provides a crumb of support for the notion of a public good from elite sports (p 20).

As Arie reports, asthma is common in the normal population, but it's very common among elite athletes—for example, more than one in five of the members of Team GB is affected by the condition. Concerns that this higher prevalence might exist because some athletes want to justify using performance enhancing β agonists have not been borne out. Current explanations focus more on the effects of intense exertion, cold air, and chlorine in swimming pools, as well as the detailed diagnostic evaluation that athletes undergo. It's interesting that there's a dose-response relation: higher level athletes have a higher prevalence of asthma. More curiously, and still unexplained, is the fact that athletes with asthma are more likely to win than those without.

Apart from the pleasure of seeing athletes perform at the highest level, how can their experience benefit the rest of us? Athletes and their medical advisers are motivated to get the very best out of their bodies. The emphasis on ensuring the right diagnosis, tailoring inhaler use, and targeting prevention can show what's possible, says Arie. She concludes that perhaps the most important legacy for all people with asthma is the

new consensus that, for most of them, exercise is good. It builds lung function and improves quality of life. So the days of routinely advising children with asthma to avoid games should be long gone.

An accompanying video on bmj.com highlights, among other things, the problems of diagnosing exercise induced asthma in primary care, where it's hard to recreate the exercise trigger. Help is at hand from Christine Jenkins and colleagues, who describe their approach to the rational investigation of exercise related dyspnoea (p 41).

If people do take London's Olympics 2012 Organising Committee chair Sebastian Coe at his word and use the games as a spur to getting fit, there'll be more stress fractures to deal with in the coming weeks. In their Clinical Review (p 35), James Pegrum and colleagues remind us to suspect this problem, especially in women with lower limb pain and the "female athlete triad": low bone mineral density, low body mass index, and menstrual irregularity. The diagnosis is best confirmed by magnetic resonance imaging, and most fractures can be treated with rest and a modified training routine.

You can find these articles and a range of sports related content from the *BMJ*, its sister journal the *British Journal of Sports Medicine*, BMJ Learning, and the BMJ Evidence Centre on our new Olympics portal (www.bmj.com/olympics). You don't need a subscription to access the content, which is freely available until after the Olympics and Paralympics. Please do browse, share and discuss the content with your colleagues, and give us your feedback.

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

Cite this as: *BMJ* 2012;344:e2977

► To receive Editor's Choice by email each week, visit bmj.com/cgi/customalert

Twitter

► Follow the editor, Fiona Godlee, at twitter.com/fgodlee and the *BMJ*'s latest at twitter.com/bmj_latest

When was your last update?

BMJ Masterclasses

masterclasses.bmj.com

