



BELLE MELLOR

- EDITORIAL, p 5
- HEAD TO HEAD, p 14

NEWS

- 1 **Community treatment orders have not reduced admissions, study shows**
Training for parents can help tackle antisocial behaviour, says NICE
- 2 **Manager describes culture of “threats” and “bullying” in NHS**
Peers could force second redrafting of rules on tendering services by clinical commissioning groups
- 3 **Teenagers and young adults with cancer need better access to trials**
Study of genetic variants in common cancers paves way for targeted screening
- 4 **Anaesthetist wins payout from trust over libel**
Mandatory breast cancer screening for working women is challenged



NICE issues guidance on tackling antisocial behaviour, p 1

RESEARCH

RESEARCH NEWS

- 9 **All you need to read in the other general journals**

RESEARCH PAPERS

- 10 **Training practitioners to deliver opportunistic multiple behaviour change counselling in primary care: a cluster randomised trial**
Christopher C Butler et al
● EDITORIAL, p 5
- 11 **Overdiagnosis in screening mammography in Denmark: population based cohort study**
Sisse Helle Njor et al
- 12 **Cemented, cementless, and hybrid prostheses for total hip replacement: cost effectiveness analysis**
Mark Pennington et al
- 13 **Sample size determinations in original research protocols for randomised clinical trials submitted to UK research ethics committees: review**
Timothy Clark et al

COMMENT

EDITORIALS

- 5 **What should clinical commissioning groups do on 1 April 2013?**
Clare Gerada
- 6 **Transferring healthcare for immigration detainees in England to the NHS**
Hilary Pickles and Naomi Hartree
- 7 **Training practitioners in primary care to deliver lifestyle advice**
Eileen Kaner and Ruth McGovern
● RESEARCH, p 10



Robotic surgery needs proper evaluation, p 8

- 8 **Robotic surgery: revisiting “no innovation without evaluation”**
Subroto Paul et al

HEAD TO HEAD

- 14 **Will 1 April mark the end of the NHS?**
The government's changes to the NHS in England come into force on 1 April. David Hunter argues that they will result in creeping privatisation and destroy the public service ethos, but Julian Le Grand thinks that more competition will improve the quality of care

ANALYSIS

- 16 **Health policy in Europe: factors critical for success**
Large health gains could be made if all countries in Europe adopted the health policies of the best performing country. Johan P Mackenbach, Marina Karanikolos, and Martin McKee examine the differences between countries and the reasons behind them



East Europeans are at bottom of Europe's health league, p 16

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* 2013; 346:f286.

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.



Is the NHS our "national myth"?
p 23

COMMENT

LETTERS

- 20 Liverpool care pathway
- 21 Debate on weekend working; New NHS competition regulations

OBSERVATIONS

ETHICS MAN

- 22 The ethics gift box: suggestions for improving the ethical conduct of doctors
Daniel K Sokol

BOOK REVIEW

- 23 God Bless the NHS: The Truth Behind the Current Crisis by Roger Taylor
Nick Seddon

PERSONAL VIEW

- 24 Drug users need more choices
Arash Alaei,
Kamiar Alaei



Treatment for injecting drug use, p 24

OBITUARIES

- 25 C Everett Koop
US surgeon general extraordinaire
- 26 James Forrest Dick; James Geddis Kernohan; Andrew Julian Richardson; Richard Edward Rossall; Philip Victor Seal; Jenny Tyrrell; Gordon Robert Winter

LAST WORDS

- 38 Bad medicine: co-codamol Des Spence
Divination Robin Ferner

EDUCATION

CLINICAL REVIEW

- 27 Outpatient parenteral antimicrobial therapy
Ann L N Chapman

PRACTICE

GUIDELINES

- 31 Long term follow-up of survivors of childhood cancer: summary of updated SIGN guidance
W H B Wallace et al

EASILY MISSED?

- 33 Cushing's syndrome
Julia Kate et al

ENDGAMES

- 36 Quiz page for doctors in training

MINERVA

- 38 Supportive postcards and self poisoning events, and other stories



Calcification in man with diabetes, p 38

Returning from a break?

BMJ Masterclasses

masterclasses.bmj.com



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: mfogler@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

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.

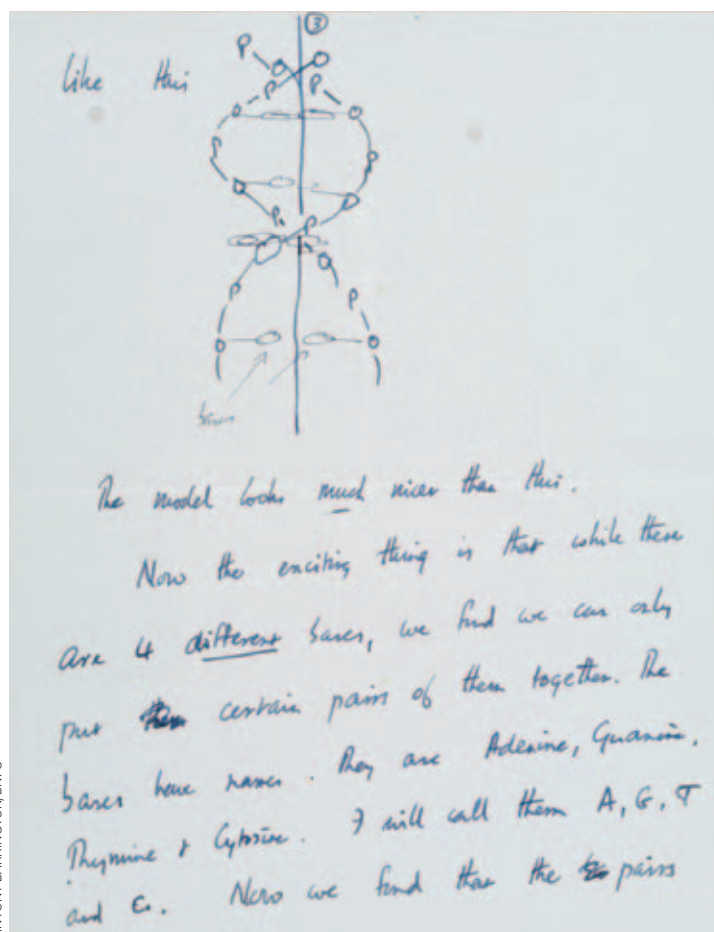
To the fullest extent permitted by law, the BMJ Publishing Group shall not be liable for any loss, injury, or damage resulting from the use of the *BMJ* or any information in it whether based on contract, tort, or otherwise. Readers are advised to verify any information they choose to rely on.

©BMJ Publishing Group Ltd 2013
 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

ANTONY BARRINGTON/BMPS



PICTURE OF THE WEEK

A letter from Francis Crick, one of the discoverers of the structure of DNA, has been put up for auction. The letter, written to Crick's 12 year old son, in 1953, just weeks before the announcement of the discovery, describes the molecule's double helix structure. It is expected to be sold for £1.2 million.

RESPONSE OF THE WEEK

Of course most factors against human health can be found outside hospitals, as the author states. But this fact has nothing to do with the need of diseased people for hospital care. Prevention of health conditions is to be done in the broader society based on state and private budgets, but the care of diseased people remains the task of GPs, outpatient settings and hospitals. The selection of the appropriate level of care is part of medical knowledge and public health policy, not of political slogans driven by fiscal policies.

János Weltner, surgeon, Semmelweis University, Budapest, Hungary, in response to "England must rid itself of 'obsession' with hospital medicine, conference hears" (*BMJ* 2013;346:f1799)

MOST SHARED

Getting serious about obesity
 Is paracetamol hepatotoxic at normal doses?
 Winding back the harms of too much medicine
 Drug company gifts to medical students: the hidden curriculum
 Effect of behavioural-educational intervention on sleep for primiparous women and their infants in early postpartum:
 multisite randomised controlled trial

BMJ.COM POLL

Last week's poll asked: "Is it acceptable for people to take cognitive enhancing drugs to improve performance?"

57% voted no (total votes cast: 761)

► *BMJ* 2012;346:f1743

This week's poll asks:

"Will 1 April mark the end of the NHS in England?"

Head to Head:

Yes ► *BMJ* 2013;346:f1951

No ► *BMJ* 2013;346:f1975

► **Vote now on bmj.com**

EDITOR'S CHOICE

The NHS deserves better than this dash to market

Does April 1 mark the beginning of the end of England's NHS?

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

Twitter

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



Sign up today using your smartphone

—follow these steps:

- Download a free QR reader from your handset's app store
- Hold your smartphone over the QR code
- You will then be forwarded to the email sign up page

With apologies to those for whom it holds no interest, I am writing for a second week about England's NHS (*BMJ* 2013;346:f1850). We are now only days away from the introduction of new NHS regulations. Drafted in February, hastily revised by the government last week because of fierce criticism, and due to be enacted in a few days' time, they are designed to open up the NHS in England to competition by for-profit corporations. The *BMJ* has a reputation for anti-market sentiment when it comes to the provision of healthcare, and views on the new regulations are polarised. So to balance last week's coverage we have commissioned a debate aiming to reflect both sides of the argument and inform readers about what's going on.

Does April 1 mark the beginning of the end of England's NHS? David Hunter says it does, and he invites those who think this is just left wing scaremongering to take a close look at what is happening in other health systems where similar marketisation is underway (p 14). Julian Le Grand, former advisor to Tony Blair during the New Labour healthcare reforms, says the fear of competition is misplaced, especially since "large chunks of the NHS are already private and have been since 1948." (p 14) We should direct our fears towards austerity measures, he says, not the market.

I asked last week whether people understand what is happening. Clare Gerada confirms my view that we don't. In her editorial she says that we are dealing with "a set of regulations that no one understands and that seem to conflict with the previously stated intentions of the government that wrote them." (p 5). Even someone as

engaged and impressive as the chief executive of NHS London, Ruth Carnall, admits to confusion. In a recent tweet quoted by Gerada, Carnall says, "I'm supposed to know what's going on re all of this. I don't." And she's not alone. The House of Lords committee responsible for scrutinising the regulations concluded last week that there is "no common understanding" of the new rules, saying that the Department of Health has given "insufficient time" to set the system up properly and enable thorough scrutiny.

Gerada herself is in no doubt about what the new regulations mean. They allow for "the wholesale dismantling of the NHS and privatisation of the supply, organisation, planning, finance, and distribution of healthcare." Nor does she doubt the consequences. The regulations will leave general practitioners "bearing the brunt of the public's wrath, while much of the health budget is handed over to the for-profit commercial sector, services are closed, and entitlements to universal healthcare are eroded."

The government wants the regulations in place when the National Commissioning Board takes over England's NHS on April 1. But members of the House of Lords may still be able to limit the extent of subsequent privatisation by forcing a debate at the end of April (p 2). If they succeed, this will be a once in a lifetime chance to influence the future of England's NHS. We must seize it on behalf of present and future generations.

Fiona Godlee, editor, *BMJ*

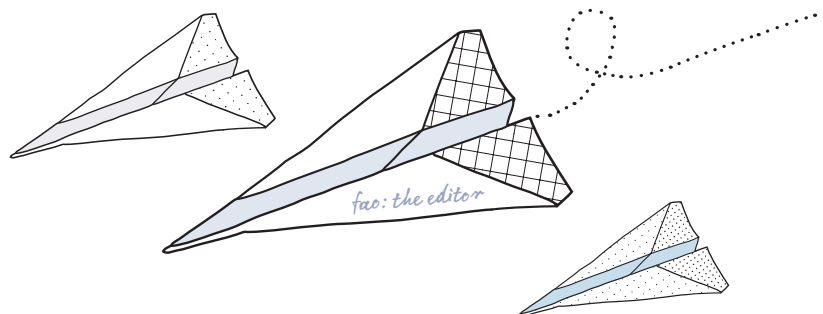
fgodlee@bmj.com

Cite this as: BMJ 2013;346:f1994

Rapid responses FAO: the editor

Read e-letter responses to the latest articles or submit your own and get published.

Visit
bmj.com



BMJ