

and disability persisted after three months. These findings contradict clinical practice guidelines, which imply that recovery from acute low back pain is rapid and complete.

## Short interpregnancy interval is associated with adverse outcome

Conceiving shortly after giving birth is independently associated with preterm birth and neonatal death. In an analysis of almost 90 000 women having second births after an uncomplicated first birth at term, Smith and colleagues (p 313) found that, after demographic factors were



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adjusted for, women with an interpregnancy interval of less than six months had a 60% excess of moderately preterm birth, double the risk of extremely preterm birth, and almost four times the risk of neonatal death. The authors state that strategies to reduce the number of women who have very short intervals between pregnancies may reduce the numbers of preterm births.

### POEM\*

#### Soy-derived isoflavones don't help hot flushes

**Question** Are soy-derived isoflavone tablets effective for hot flushes in menopausal women?

**Synopsis** In this rather small Italian double blinded randomised controlled trial, women aged 45 to 60 years were randomised (allocation concealed) to soy-derived isoflavone tablets, two 36 mg tablets twice daily (n = 28) or placebo (n = 34). Women had to have at least seven hot flushes per day to be eligible for the study. Evaluations were made at baseline and at three and six months. The number of daily hot flushes decreased by 40% in each group (isoflavone group from 9.9 (SD 4.5) to 4.6 (3.8), placebo from 8.6 (2.9) to 4.0 (3.9)). However, the study was too small to reliably detect a difference of less than 50%. There was no change in endometrial thickness in either group. Likewise there was no increase in arterial blood flow as measured by a pulsatility index of the internal carotid or middle cerebral arteries, which would have been expected with a significant oestrogenic effect.

**Bottom line** Isoflavones had no measurable effect on the daily number of hot flushes, endometrial thickness, or arterial blood flow in this study. Women treated with isoflavones or placebo both had a similar large reduction in number of daily hot flushes over the six month study period. There is some conflicting evidence, but these results are comparable with a similar study of soy protein supplementation (St Germaine et al. *Menopause* 2001;8:17-26). A clinically important effect on vasomotor symptoms is doubtful.

**Level of evidence** 1b (see [www.infoPOEMs.com/resources/levels.html](http://www.infoPOEMs.com/resources/levels.html)); individual randomised controlled trials (with narrow confidence interval). Penotti M, Fabio E, Modena AB, Rinaldi M, Omodei U, Vignani P. Effect of soy-derived isoflavones on hot flushes, endometrial thickness, and the pulsatility index of the uterine and cerebral arteries. *Fertil Steril* 2003;79:1112-7.

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\* Patient-Oriented Evidence that Matters. See editorial (*BMJ* 2002;325:983)

## Editor's choice

### What's your price?

About six months ago a woman representing a drug company rang me and said that she would take me to "the restaurant of my choice" if we would change our policy on economic evaluations and consider a paper that her company had sponsored. She stopped short of offering to go to bed with me, but I was surprised by her crassness. "Are you trying to bribe me?" I asked. "No," she answered brightly, "just being nice."

Perhaps I shouldn't have been surprised. Caroline White, chair of the Guild of Health Writers, describes how guild members were invited to attend an "exclusive preview" of laser eye technology where they could "discuss free treatment in exchange for editorial features" (p 348). On another occasion members were invited to a conference on cancer, but places would be free only if the journalists could guarantee copy both before and after the conference.

Such invitations do not meet the code of practice of the Institute of Public Relations, but the public relations agencies are desperate for business and their clients for editorial coverage. "A 'message' reported in the news media is eight times more likely to be trusted than an advertisement," reports White.

Better than having a journalist write a piece on your product is to have someone you pay to ghost write the piece. Minerva (p 350) picks up on an intriguing article from the *British Journal of Psychiatry* (2003;183:22-7) that compares articles on the antidepressant sertraline coordinated by "a medical information company" and those produced in the usual way. The authors, David Healy and Dinah Cattell, were able to identify the articles coordinated by the company because of a document that was obtained in legal proceedings. The document was produced for Pfizer, the manufacturers of sertraline.

The company—Current Medical Directions from New York—"writes up studies, review articles, abstracts, journal supplements, product monographs, expert commentaries and textbook chapters." It obviously does its work well, as its articles were roughly five times more likely to be cited than control articles.

The gains to be had from marketing your product hard are illustrated well by a press release from "Linda Liu, healthcare analyst at Frost and Sullivan" entitled "Critical success factors for the sexual dysfunction medication market." The United States market, writes Liu, is "experiencing a surge of interest and is expected to grow significantly from its current \$1.9 billion status in 2002. Advertising, a flux of new entrants, expansion of treated indications, and growth in the *sexual dysfunction prevalent population* (sic) are driving demand for sexual dysfunction medication." Invest now, seems to be the message. There may be more money in sex than tobacco.

These pieces come to hand as we publish many responses to our theme issue on doctors and drug companies (p 341). Several respondents want us to grow up and recognise that everybody has conflicts and agendas. Maybe I should have gone to that restaurant.

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