Other journals in brief

A selection of abstracts of clinically relevant papers from other journals.

The abstracts on this page have been chosen and edited by John R. Radford.

'HAS YOUR PATIENT TONSILS?'

Tonsillectomy study must not lead to unnecessary increase in surgery, expert says

Ferriman A. *BMJ* 2013; **346**: f2162.

'...46 tonsillectomy operations in adults were required to prevent 14 mild sore throats...' with only one person in the control group contracting a severe sore throat.

This commentary is grounded on a paper (Koskenkorva T, Koivunen P *et al.* *CMAJ* 2013; DOI: 10.1503/cmaj.121852) that has received some media exposure. The paper reported that the number of symptomatic days were significantly lower in the tonsillectomy group when compared with the control group. However, it is stated in this commentary that almost 50 tonsillectomies were required to prevent 14 mild sore throats. Although there is an implication that tonsillectomies merely 'generate income', the key question is does such limited benefit outweigh untoward sequelae? Despite the link between tonsils and a regular oral examination being puzzling, it would seem that the above question, barked out by the dental tutor, will continue to panic future generations of dental students.

DOI: 10.1038/sj.bdj.2013.649

SOFT DRINKS – TYPE 2 DIABETES

Consumption of sweet beverages and type 2 diabetes incidence in European adults: results from EPIC-InterAct

The InterAct consortium. *Diabetologia* 2013; **56**: 1520–1530.

After adjustments including BMI, there was no relationship between artificially sweetened soft drinks and type 2 diabetes, although there was such an association with sugar-sweetened soft drinks.

Yet an attention grabbing headline was 'Drinking one or more cans of sugary soft drinks a day is linked to an increased risk of diabetes...'. This EU study looked for associations between the consumption of sweet beverages and 11,684 incident cases of type 2 diabetes. The direction of association could not be established, as the consumption of sweet beverages was measured using a cross sectional design. Professor Patrick Wolfe statistician, states that 'sugary soft drinks are only part of the picture' although they are one that can be eliminated by 'switching to diet soft drinks'. There was no mention as to the deleterious effect of such drinks on teeth.

DOI: 10.1038/sj.bdj.2013.650

'ELITE' OR 'PRECARIAT'

A new model of social class: findings from the BBC's Great British Class Survey Experiment

Savage M, Devine F *et al.* *Social* 2013; DOI: 10.1177/0038038513481128.

A new approach embracing 'cultural and social boundaries'

There is an association between dental disease and deprivation. Yet contrary to widely held belief, the link between health behaviours and social inequalities is unclear (*PLoS Med*; DOI: 10.1371). Any putative relationship depends on the reliability of the social class classification. Earlier classifications were based on 'moralising' measures of class based on 'standing within the community'. The Goldthorpe class schema, makes the distinction between employees and employers. Instead of wading through some 33 pages of this paper, a flavour of this can be gleaned by ascertaining your own social class (<http://www.bbc.co.uk/news/magazine-22000973>). This seven-class classification was based on the data gleaned from 161,400 responding to a web survey, in addition to a representative survey of 1,026 respondents in order to address the bias associated with '...the typical BBC news audience'.

DOI: 10.1038/sj.bdj.2013.651

'WEEKDAY' AS WELL AS A 'WEEKEND EFFECT'

Day of week of procedure and 30 day mortality for elective surgery: retrospective analysis of hospital episode statistics

Aylin P, Alexandrescu R *et al.* *BMJ* 2013; **346**: f2424; DOI: 10.1136/bmj.f2424.

The adjusted odds of death were 44% higher and 82% higher when elective surgery was carried out on Fridays and at weekends respectively, when compared with Mondays.

Studies have reported a higher risk of mortality for those patients admitted at the weekend compared with those admitted during the week. The much vaunted reason is the 'staffing hypothesis', comprising both reduced staffing levels and less experienced staff. However, an alternative and plausible explanation is those patients admitted at the weekend are more poorly. This study interrogated data on elective surgery performed in all acute and specialist English hospitals over a two-year period. In over 4 million elective surgical procedures, there were 582 deaths within 30 days of admissions (overall crude mortality rate 6.7 per 1,000). There was higher mortality when surgery was carried out on Fridays and at the weekends compared with Mondays.

DOI: 10.1038/sj.bdj.2013.652