

Epistle

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If I was asked which aspect of paediatrics had moved most spectacularly from the world of assertion based medicine to evidence based medicine in the last decade, I would have to choose child protection. This is, in no small part, down to the work of the Welsh Child Protection Systematic Review Group, whose work can be found at <http://www.core-info.cardiff.ac.uk/>, and whose Sabine Maguire has written what is my first Editor's Choice article for the journal. No child protection paper can be complete, definitive and stand alone, but Dr Maguire's article comes as close as it is possible in eight pages of a journal. I suspect that I will be using it for reference when writing a good many witness statements in the future.

In fact, I suspect that no paper can be definitive. One of our most popular papers recently – McWilliam and Riordan's Interpretations paper on how to use CRP¹ – excited a few responses, some to the journal and some directly to the authors. It's possible that the perfect description of how to use this test is beyond a paper, series or even a textbook. This is at least as true as the assertion that in many cases this test is very badly used, and misunderstood. However, I was able to persuade the authors to respond in writing to their various correspondents, and the post-script appears this month, (*see page 194*) to be read and digested alongside the original.

Helen Williams asks "Do you know your lobes?" in this month's Illumination (*see page 196*). I'm enjoying the new format of these papers; we're hoping to introduce more by way of multiple choice questions into the journal, both as underlying formats for the more image based articles, and in order to test your understanding of papers we've published. In this latter situation we're hoping to be able to link your answers to part of the RCPCH Continuing Professional Development (CPD) system so that you can record the reading of *E&P* as CPD. Of course, you can leave a narrative of what you've learnt for part of your CPD already; the new system will hopefully make it easier. Incidentally, my own answer to Helen's question is "Not as well as I ought to".

I used to write an online section for the main *ADC* journal called *Precis*. The idea was that the core message of all scientific papers could be described in a sentence. This highly reductionist view is, of course, completely facile, and is the opposite of the equal and opposite truism that sometimes simple questions require complex answers. However, it taught me that if you can't have a good go at describing something very briefly, you don't understand it that well. *Precis* was fun while it lasted, and has been replaced in my affection for brevity by Twitter. I mentioned earlier in the year that I'd set out a challenge on Twitter for people to

define evidence based medicine terms in 140 characters or less. You can read some of the results scattered throughout this edition, under the titles #EBMTerms. I think they express some important concepts very precisely. I'd be interested to know if you agree, or if you could do better; find us on twitter@ArchivesEandP.

I've been deputy editor for this part of the journal for nearly a year now, and I hope you've enjoyed the changes we've been making to your journal. I do want to thank a number of people, including the section editors (listed opposite), the contributors and all the editorial team at the BMJ Group offices. There is one group of contributors who don't even get their name on a paper, so I'd specifically like to mention the people who write the abstracts in the Picket section; their names are below.

Next year? Well, onwards and upwards. More pages. Perhaps some new mini-series in Best Practice. More multiple choice questions, as discussed above. Some different photographs on the front cover. And lots and lots of interesting articles. If you've got ideas, please do get in touch. That's enough to be getting on with, isn't it?

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REFERENCE

1. McWilliam S, Riordan A. How to use: C-reactive protein. *Arch Dis Child Educ Pract Ed* 2010;**95**:55–8.

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