

Wilson rightly observes that continued improvement is dependent on organisations' developing clinical governance — accountability is a key driver for change. Change in practice is usually incremental, however, as we found in our study. Sustained change requires ongoing effort and support.

New comments on practical problems with faxing discharge summaries. In our study, GPs identified faxing as preferable because of problems experienced with summaries posted or delivered by patients. New also refers to the problem of patients having multiple GPs. It is up to the patient to advise the hospital appropriately, and this is a matter for consumer education. His suggestion of computerised hospital prescribing is an ideal we all hope will come to fruition sooner rather than later. In the meantime, we believe we have demonstrated the quality improvement process and its limitations and the value of GP audit in prompting that process.

- Mant A, Kehoe L, Cockayne NL, et al. A Quality Use of Medicines program for continuity of care in therapeutics from hospital to community. *Med J Aust* 2002; 177: 32-34.
- Australian Pharmaceutical Advisory Council. National guidelines to achieve the continuum of quality use of medicines between hospital and community. Canberra: Commonwealth of Australia, 1998. □

## Competing interests and careers

### Peter C Arnold

General Practitioner (retired)  
PO Box 280, Edgecliff, NSW 2027  
parnold@ozemail.com.au

**TO THE EDITOR:** Thanks for the interesting opinion pieces by Reid<sup>1</sup> and Paterson.<sup>2</sup> Would I be correct in assuming that they are the Reid and Paterson who were formerly health bureaucrats in New South Wales and Victoria, respectively?

May I suggest that your readers, especially those interstate and overseas, would have been better informed on the import of these articles if you had made some editorial mention of this fact? In this era of "career-hopping" between industry, government and academia, your readers, if they are to intelligently interpret an opinion piece, need to know more than merely the present position held by the author.

You rightly ask about the "competing interests" of contributors of research articles. Perhaps the writers of opinion pieces should declare their background?

- Reid MA. Reform of the Australian Health Care Agreements: progress or political play? *Med J Aust* 2002; 177: 310-312.
- Patterson JP. Australian Health Care Agreements 2003-2008: a new dawn? *Med J Aust* 2002; 177: 313-315. □

### Martin B Van Der Weyden

Editor, *Medical Journal of Australia*, Locked Bag 3030, Strawberry Hills, NSW 2012. editorial@ampco.com.au

**IN REPLY:** As always, I appreciate Arnold's input, and he is right yet again: M Reid was Director-General, New South Wales Health, 1995-2001, and J Paterson was Secretary, Health and Community Services, Victoria, 1992-1996. This information was conveyed in the author's details for Paterson, but inexplicably not for Reid.

The Journal asks its contributors to declare "competing interests"; that is, disclosure of "any situation in which an individual ... might be influenced ... by financial or personal factors that involve self-interest".<sup>1</sup> Most journals, including the *MJA*, choose to focus on competing financial interests, but an ongoing quandary is where to draw the line in the sand of competing interests — should they be religiosity, sexuality, consultancy within the political or health bureaucracy, or positions on committees or advisory boards, and so on?

Arnold wishes to move to a higher plane through disclosure of relevant areas of contributors' life stories, presumably to alert readers to the potential for bias. But might not the publication of a contributor's relevant career prejudice the response of the reader?

Kenneth Rothman, editor of the journal *Epidemiology*, has argued that objectivity in communication "depends on each contribution receiving its due regard, whatever the motivations for bringing it. It depends on judging a work on its merits, rather than on the inferred state of mind of the author".<sup>1</sup> The contributions by Reid and Paterson were published under the Journal's *For Debate* banner. I was hoping for a debate on the messages rather than the messengers.

- Rothman KJ. Conflict of interest. The new McCarthyism in science. *JAMA* 1993; 269: 2782-2784. □

## MJA Advertisers' Index

### Janssen-Cilag

Durogesic ..... p530

### Roche Products

Dilatrend ..... p538

### Schering Pty Limited

Yasmin ..... Inside front cover

Mirena ..... Inside back cover

Primolut N ..... Outside back cover

# The Medical Journal of Australia

## Editor

Martin Van Der Weyden, MD, FRACP, FRCPA

## Deputy Editors

Bronwyn Gaut, MBBS, DCH, DA

Ruth Armstrong, BMed

Mabel Chew, MBBS(Hons), FRACGP, FACHPM

Kincaid-Smith Editorial Fellow

Jenny Bergen, MBBS, FRANZCP

Manager, Communications Development

Craig Bingham, BA(Hons), DipEd

Senior Assistant Editor

Helen Randall, BSc, DipOT

## Assistant Editors

Elsina Meyer, BSc

Kerrie Lawson, BSc(Hons), PhD, MASM

Tim Badgery-Parker, BSc(Hons)

Josephine Wall, BA, BAppSci, GradDipLib

## Proof Reader

Richard Bellamy

## Editorial Administrator

Kerrie Harding

## Editorial Assistant

Christine Tsim

## Production Manager

Glenn Carter

## Editorial Production Assistant

Melissa Sherman

## Librarian, Book Review Editor

Joanne Elliot, BA, GradDipLib

## Consultant Biostatistician

Val Gebski, BA, MStat

**Content Review Committee.** Leon Bach, PhD, FRACP; Adrian Bauman, PhD, FAFPHM; Flavia Cicuttini, PhD, FRACP; Marie-Louise Dick, MPH, FRACGP; Mark Harris, MD, FRACGP; David Isaacs, MD, FRACP; Paul Johnson, PhD, FRACP; Jenefer Martin, MEd, FRACS; Adrian Mindel, MD, FRACP; Michael Solomon, MSc, FRACS; Campbell Thompson, MD, FRACP; Tim Usherwood, MD, FRACP; Owen Williamson, FRACS, GradDipClinEpi; John Wilson, PhD, FRACP; Jeffrey Zajac, PhD, FRACP

## Australasian Medical Publishing Co Pty Ltd

Advertising Manager: Peter Butterfield

Media Coordinator: Stephanie Elliott

*The Medical Journal of Australia (MJA)* is published on the 1st and 3rd Monday of each month by the Australasian Medical Publishing Company Proprietary Limited, Level 2, 26-32 Pyrmont Bridge Rd, Pyrmont, NSW 2009. ABN 20 000 005 854. Telephone: (02) 9562 6666. Fax: (02) 9562 6699. E-mail: ampco@ampco.com.au. The Journal is printed by Offset Alpine Printing Ltd, 42 Boorea St, Lidcombe, NSW 2141.

MJA on the Internet: <http://www.mja.com.au/>

None of the Australasian Medical Publishing Company Proprietary Limited, ABN 20 000 005 854, the Australian Medical Association Limited, or any of its servants and agents will have any liability in any way arising from information or advice that is contained in *The Medical Journal of Australia (MJA)*. The statements or opinions that are expressed in the Journal reflect the views of the authors and do not represent the official policy of the Australian Medical Association unless this is so stated. Although all accepted advertising material is expected to conform to ethical and legal standards, such acceptance does not imply endorsement by the Journal. All literary matter in the Journal is covered by copyright, and must not be reproduced, stored in a retrieval system, or transmitted in any form by electronic or mechanical means, photocopying, or recording, without written permission.

Published in 2 volumes per year.

Annual Subscription Rates for 2002 (Payable in Advance) to: AMPCo, Locked Bag 3030, Strawberry Hills, NSW 2012

Individual Subscriptions (includes 10% GST)

Australia—\$A284.90. Medical students (Australia only)—\$A55.00

Overseas Economy Air—\$A396.00, Airmail—\$A539.00

NZ & PNG Economy Air—\$A363.00, Airmail—\$A490.00

Indexes are published every 6 months and are available on request as part of the current subscription.

Single or back issues contact: AMPCo (02) 9562 6666.

Advice to Authors—

<http://www.mja.com.au/public/information/instruc.html>



27,787 circulation as at  
30 September, 2002



ISSN 0025-729X