

ple with poorer health prospects in particular. And further, what light do the indicators shed on the role of different providers—general practitioners, hospitals, community services—in improving health?

In all cases, the answer is little. There is no way of knowing, on the basis of the indicators alone, whether high death rates in some parts of the country are due to poor care. If sanctions are to be applied and incentives offered, these are the things that we need to know. Moreover, if deprived areas are not to be penalised for poor performance then the data must be adjusted to account for socioeconomic factors. The risk, as the Department of Health acknowledges, is that such adjustments mask the true extent of inequalities that the NHS should know about and address.<sup>5</sup>

The Secretary of State for Health recently announced that the NHS is neither a market nor an administrative hierarchy but a system.<sup>3</sup> Systems in general, and health care in particular, are complex, hard to understand, and difficult to manage. Performance indi-

cators alone are not enough; unhappily, unless the national plan for the NHS reveals evidence of new thinking, performance indicators seem to be the only game in town.

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## Revel in electronic and paper media

*BMJ readers and authors should enjoy the strengths of both media*

Some *BMJ* readers are proud of not using the world wide web. Others are scornful of paper media, predicting that one day everything will be purely electronic. Both are wrong, and we urge *BMJ* readers and authors to exploit to the full both paper and electronic media.

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We also urge the *BMJ*'s authors to make greater use of the two media. They should aim to present short, readable articles in the paper journal. These articles will be reproduced on *bmj.com*, but authors can add additional material including more information, data, explanations, examples, and links. The tension between providing a readable article for generalists and giving more information to those with a greater interest cannot be avoided in a purely paper world, but it can be in a world that is simultaneously paper and electronic.

Tony Delamothe *web editor, BMJ*

Richard Smith *editor, BMJ*

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