and price measures, as suggested by Chopra and Darnton-Hill.⁴ Such conventions will require governments, WHO, and the Food and Agriculture Organization to take a strong role. However, government failures must be corrected before market failures can be tackled. Before we brake, we should take the foot off the gas.

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Can I get points for reading this?

Accreditation for learning took a knock last year when the Royal College of General Practitioners took the brave step of abolishing its old system of accrediting learning events or resources—the Postgraduate Education Allowance (PGEA) system. Under the old system GPs gathered points by going to courses or reading, and when they reached their annual points quota—hey presto. There was no formal requirement to do further learning that year. Most GPs did continue learning, but for some there seemed little point. The royal college also thought that a worthwhile learning exercise could easily turn into a worthless points gathering exercise and threw the system out. Under the new system GPs have to undertake a satisfactory amount of learning to pass their annual appraisals. The amount and type of learning is agreed beforehand by appraiser and appraisee.¹

Some colleges are sticking with their points system, however, and continue to insist that their members gain a set quota of points every year. Are they right? One of the main problems with points is that they can interfere with motivation. You should be learning what you want to learn or what you need to learn, but the temptation is to attend a course that is nearby or that doesn't overlap with your children's holidays just so you can get some points. And what happens when you arrive at the course? Well, you could sit at the front and take notes and ask questions, and get your points at the end of the day. Alternatively, you could sit at the back and fall asleep or sign the register and then go shopping, and still get your points at the end of the day. Under most points systems one hour equals one point. But what if you attend a lecture, and it covers a topic that you already know about? You might not have learnt anything, but you still get your point. Much evidence shows that if you try to do an hour of learning you do most of the learning in the first 15 minutes and in the last five. But, regardless of how much you learn, you still get a point. And points mean prizes, and in this case the prize is staying on the medical register.

Advocates of points systems claim that at least everyone can understand points and that all systems are open to abuse and are ultimately dependent on the learner. They also say that points give doctors something tangible that they can show their employers, and ultimately their patients, to show that they are up to date. Points have their weaknesses, but for many of us they are here to stay. But we shouldn't get too hung up on points; doctors who do are a bit like medical students who keep asking if your lectures are going to come up in their finals—annoying. And can you get points for reading journals or doing online learning? Well you can get any number of personal CPD points for reading journals or doing online learning, and you can count online learning for up to five external CPD points.

At BMJ Learning we try not to get too involved in points-gathering exercises; we think clinical learning is much more interesting. One of our most recent clinical modules is on paracetamol overdose. Some 150-200 deaths occur annually in England and Wales because of paracetamol poisoning,² and it is responsible for around half of all cases of acute liver failure in the United Kingdom.³ How best to treat it? Should you eliminate the drug from the stomach with syrup of ipecacuanha, or gastric lavage, or activated charcoal, or none of the above? Would you treat patients any differently if they were also taking drugs such as protease inhibitors or St John's wort? Should you treat pregnant women or children any differently? To find out, have a look on www.bmjlearning.com.

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