Resource corner

Feldman W. *Evidence-Based Pediatrics*. Hamilton, Canada: BC Decker, 1999.
Moyer V. *Evidence-Based Paediatrics and Child Health*. London, UK: BMJ Books, 2000.

To evaluate the relative merits of these 2 recent compendia of evidence-based information (*Evidence-Based Paediatrics and Child Health [EBPCH]* and *Evidence-Based Pediatrics [EBP]*), we selected common cases from some of our recent days "on call." Through the long, wet days and chilly nights, children with a range of conditions presented to the assessment unit. We saw a young mother and her infant concerned about breast feeding, a barking toddler with croup, stressed parents with their post-ictal son, a worryingly breathless lad whose asthma was worsening, and a febrile, well looking, grumpy 9 month old infant with no obvious focus of infection. Many questions arose from each of these cases, but we limited ourselves to 1 per child. We were interested in determining how these books would address the benefits and difficulties of breast feeding, the diagnosis of croup, the prognosis of febrile convulsions, the evidence for the use of aminophylline in asthma, and the benefit of blood tests in determining the risk of invasive bacterial infection in the infant.

The goal of *EBPCH* is to provide a method for practising evidence-based child health care. The book aims to address common questions for practising paediatricians, and to review the processes of identifying and appraising the evidence involved. To assist with this goal, the first section of the book provides a series of educational, explanatory chapters addressing the tenets of critical appraisal and the principles of evidence-based medicine. These chapters are informative and well written, but may be used infrequently as a reference source by the busy paediatrician.

EBP aims to provide physicians who provide primary care for children with "the best available evidence regarding the benefit/risk ratios underlying their interventions" for common clinical problems and well child care. It focuses on discrete clinical problems and avoids the theoretical introductory chapters to *EBCH* (saving 100 pages in the process!).

Addressing our question about breast feeding, *EBPCH* tangentially refers to it during discussions of asthma and reflux, whereas *EBP* contains a brief review of the benefits of breast feeding in its first chapter. However, while relevant references are provided in *EBP*, there are no descriptions of the searches performed in selecting the evidence, of the level of evidence, or of the grade of recommendation that the authors provide.

The diagnosis of croup is directly addressed in a chapter in *EBPCH*. Each of the clinical chapters in this textbook provides a detailed clinical scenario, a list of clinical questions relevant to the case, and a review of all the available, relevant evidence. A good description of the literature search, critical appraisal, and interpretation of the evidence is given in the text and we were able to find an answer to our question. *EBP* also has a chapter on croup, but only the literature search and critical appraisal of the therapeutic interventions are described whereas diagnostic issues are outlined in a traditional review format without referring to the appraisal of evidence.

The use of aminophylline in acute asthma and prognostic questions commonly asked by the parents of children with a febrile convulsion are covered in both books. Again, *EBP* lacks a description of the search strategies and provides an appraisal of the evidence only for the asthma question whereas *EBPCH* describes the searches, the evidence, and the appraisal in substantial detail. *EBPCH* addresses the clinical scenario of a febrile infant with a good description of the search and critical appraisal of the evidence and in fact includes the specific question posed by us. *EPB* discusses the debate about the utility of blood tests but does not describe the literature search or the specific evidence.

Both textbooks provide electronic support: *EBP* includes a simple electronic representation of the book in PDF format on an accompanying CD and *EBPCH* has a linked website "with updates" (<http://www.evidbasedpediatrics.com>), although at the time of this review no updates were available.

We found that both books succeeded in addressing common questions, and provided references to the answers they gave. However, it was *EBPCH* that described the methods of systematically searching the literature, critically appraising and summarising the evidence, and offered some proof that it was more than a well written chapter in a traditional textbook.

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Evidence-Based Paediatrics and Child Health can be purchased online at <http://www.bmjbookshop.com>. The contents and sample chapters can also be viewed on this site.
Evidence-Based Pediatrics can be purchased online at <http://www.bcdecker.com>. The contents and a sample chapter can also be viewed on this site.

Ratings

Methods/Quality of information: EBPCH: ★★★★★ EBP: ★☆☆☆☆

Clinical usefulness: EBPCH: ★★★★★ EBP: ★★★★★

Competing Interests: Bob Phillips is the author of the forthcoming book, "Evidence-based On Call."

Irwig J, Irwig L, Sweet M. *Smart Health Choices: How To Make Informed Health Decisions*. Sydney: Allen and Unwin, 1999.

Smart Health Choices can be viewed and purchased online at <http://www.health.usyd.edu.au/smarthealthchoices/>

Smart Health Choices aims to provide healthcare consumers with the necessary tools to assess health advice, whether from a physician, a naturopath, the media, the internet, or a friend. Unlike most resources reviewed in *Evidence-Based Medicine*, this book is targeted at healthcare consumers, not clinicians. It is written by an Australian trio with various perspectives: a husband and wife team (she is a “communicator” and healthcare consumer; he is a clinically trained epidemiologist) and a medical writer.

Smart Health Choices is a small paperback with brief chapters, useful summaries, and the occasional cartoon. It has 5 sections that cover everything from identifying meaningful health claims, to finding a good doctor, to evaluating evidence. Individual chapters include discussions on such topics as “don’t always rely on the expert,” choosing a practitioner, judging the evidence, and applying evidence to you and your situation.

The book, one hopes, represents movement along the continuum from evidence only being formatted for academics or experts towards increased dissemination to frontline clinicians and, finally, to healthcare consumers. Each target group requires purposeful “packaging” of the information to make it relevant and usable.

The authors decipher some of the core concepts of evidence-based medicine for consumers, not an easy task considering that many clinicians and learners struggle with ideal command of evidence-based medicine. I thought this book was accurate and that a consumer would certainly be more capable of participating in rational health care decision making after reading it. As with most health information, it will be used mostly by motivated, possibly well educated, consumers. I also think it would be a good read for a medical student.

If I were to provide advice for a second edition it would be to build on what is already there. Most consumers will find the clinical examples quite powerful, and this power could be amplified. For instance, in the decision making example on hormone replacement therapy, the Heart and Estrogen/Progestin Replacement Study evidence was glossed over. I think it would be a great opportunity to show both the fluidity of evidence and the difference between experiment and observation. Another opportunity for improvement would be to provide more web based resources and resources beyond the mostly Australian examples currently given.

I am going to pass my copy of this book on to my parents and recommend it to my patients.

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