Evidence-based medicine toolkit (2nd edition) serves a long time need for an evidence-based medicine (EBM) book that is both reliable yet does not intimidate the reader by its voluminous size. A toolkit or a toolbox is a box or chest that is neatly compartmentalised and contains all the tools required to carry out the job. A toolkit is supposed to be used by both basic and advanced students and is supposed to make the job of an advanced student even easier. Evidence-based medicine toolkit serves these goals completely. It is a highly portable book of 105 pages that could easily fit into students’ coat pockets and is immensely readable and complete. Developed from materials created at the Centre of Evidence-based Medicine, Oxford University, UK, the book is designed to provide the reader with all the essential elements of EBM.

The book is well organised and comprises 11 chapters. The first page of each chapter displays a checklist that provides a summary of the key points for rapid perusal. Sections within each chapter provide background information and address each key point in adequate detail. The chapters are usually brief, well organised, and complete and can be read in under 30 minutes. Key points in the appraisal process are highlighted by a “dustbin” icon. If the paper under review does not address these points, the reader is advised to discard the paper and not waste precious time. The excellent layout of the book with its prominent display of key tables containing relevant information stands out and make these tools readily usable. Each chapter ends with selected key references for additional reading.

Several chapters need special mention. The chapter on “Finding the evidence” urges the readers to look for evidence in the TRIP Database, EBM Online, Clinical Evidence, or the Cochrane Library before looking at secondary (CATs, Health Technology Assessment reviews) or primary sources (Medline, EMBASE) of evidence or the internet. Valid guidelines are provided to assess the quality of generic internet websites like Google and others and also to assess the credibility of secondary sources of information. Tips for searching Medline using textword search and thesaurus search terms, PubMed, and search filters are highlighted. Searching Medline or PubMed using the PICO format in a new service called AskMedline is encouraged.

Besides routine chapters on critical appraisal of diagnosis, therapy, prognosis, and systematic reviews, the book also includes separate chapters dedicated to appraising qualitative studies and economic evaluations. Finally, a chapter on applying the evidence to patients provides a checklist of items to help the practitioner to apply new effective evidence to their patients.

Four additional sections at the end of the book deal with topics such as EBM terms in a glossary, selected important EBM websites (both English and non-English), levels of evidence, and study designs. The section on EBM websites provides a brief description of the essential components of all of the major EBM websites. Several new websites on statistical calculators and the GATE tool (EPIQ: Effective Practice, Informatics and Quality Improvement) provide the reader with new and innovative information on EBM.

The only drawback of the book would be the section on levels of evidence as there is a lack of uniform consensus on the use of these levels in different countries.

In summary, the text is handy and well organised and offers comprehensive information on EBM for both medical students and busy practitioners conversant with the basic principles of EBM.

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RATINGS
Methods ★★★★☆
Clinical usefulness ★★★★★