Resource review

Tugwell P, Shea B, Boers M, *et al*, editors. *Evidence-based rheumatology*. London: Blackwell BMJ Books, 2003.

Evidence-based rheumatology can be purchased at www.blackwellpublishing.com/medicine/bmj/rheumatology/default.asp for £70 or US \$135.

Aim

The aim of *Evidence-based rheumatology* is to both synthesise evidence gathered from several trials and systematic reviews and provide specific advice to physicians, either general practitioners or specialists (and through them to patients), on therapeutic options for several rheumatic conditions. The professionals mentioned above are the primary audience of this resource.

Methods and quality of information

The vast experience of the Cochrane Musculoskeletal Group and the authors in performing systematic reviews and generating primary research is shown in the compilation. Each clinical chapter provides an explicit set of criteria used to select content, beginning with a clear enunciation of useful clinical questions relevant to doctors and patients, followed by a detailed search strategy and a novel but simple grading of the recommendation. This book stresses a patient oriented approach in which patients are given plenty of information, and it educates doctors on the need for respectful and cooperative decision making.

List of contents

The book is divided into 2 parts:

The first part discusses methodological aspects of rheumatology practice, but it extends to all medical or health caregivers. Of particular relevance are the chapters dedicated to (1) developing an information system for patients to help them share in making informed decisions about available therapeutic options and (2) the OMERACT (Outcome Measures in Rheumatology) project, which addresses the need for consensus criteria in objective rheumatic outcomes. In addition, sound chapters devoted to literature searching and economics, 2 fields where most physicians tend to feel uncomfortable, are well presented.

The second part deals with the management of several common rheumatic conditions, such as gout, systemic lupus erythematosus, osteoarthritis, osteoporosis (postmenopausal), rheumatoid arthritis, shoulder and elbow pain, spondyloarthropathies, systemic sclerosis, and primary vasculitis. A great editorial effort was devoted to unify style. Each chapter is similar: there is a brief introduction to general knowledge of the disease, followed by a 3 or 4 part relevant and answerable question, its corresponding search strategy, and the results, which are displayed in an easy to understand visual. Some chapters (eg, rheumatoid arthritis, systemic sclerosis, and shoulder and elbow pain) leave you wondering at rheumatology and its ability to generate evidence, offering wide research opportunities.

The structure of the compilation makes it impossible to be exhaustive, and chapters on such conditions as lumbar or knee pain and fibromyalgia are missed. Also a future edition should consider the evidence regarding diagnosis (eg, diagnostic value of criteria or procedures used in establishing the rheumatic condition's diagnosis).

Clinical usefulness

As a clinical rheumatologist, I found this resource valuable, with the main clinical questions clearly expressed and easily accessed with the colored bookmarks and, especially, the useful CD accompanying the printed edition. The book can serve as a companion in daily practice, either in an outpatient or ward environment. The PDA capabilities and the easy search engine for use in a laptop make it portable and reliable, and an update capacity via the internet is of extra value.

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RATINGS

Methods ★★★★★

Clinical usefulness ★★★★★