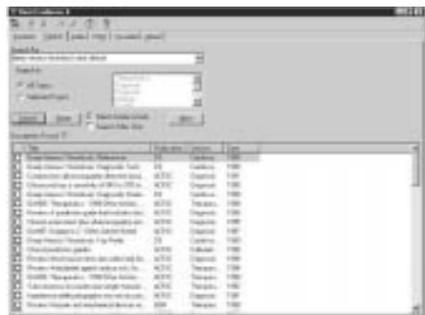


Best Evidence 4



Best Evidence 4 is a compilation on CD ROM of the entire contents of *ACP Journal Club* (*ACPJC*), *Evidence-Based Medicine* (*EBM*), and the 1999 edition of the textbook *Diagnostic Strategies for Common Medical Problems* (*DS*). It includes all published editorials from *ACPJC* and *EBM* and an archive of studies now judged by the editors and study authors to have become obsolete since original publication in the journals. The CD is targeted to readers of both *ACPJC* and *EBM*, although most of its references are most relevant to internal medicine (a reflection of the preponderance of *ACPJC* articles).

ACPJC and *EBM* are both journals of secondary publication and include abstracts of selected articles on various topics, including diagnosis, aetiology, treatment, prognosis, economic analysis, and quality improvement. *DS* focuses on the diagnosis of such common medical problems as myocardial infarction, acute monoarthritis, and pulmonary embolism. The criteria for study selection are explicit and valid for both *ACPJC* and *EBM*, but the criteria used to select evidence for *DS* are less clear.

Several options are available for searching, including browsing the table of contents for each of the component publications; using a text word search function across all publications, with filters that can be invoked with a single keystroke for diagnosis, prognosis, therapeutics, aetiology, economics, quality improvement, or clinical prediction guides; using an alphabetical index; using a "clinical content map" designed to group related material together; and using a "favourites" function with user definable folders. The internet can be accessed without leaving the software, and web pages can be inserted in the favourites folder.

The screen interface works like a simple web browser. It uses 2 screens, 1 for searching and the other for displaying search results that can be either resized to appear on the same screen or toggled. The same interface is used when web pages are accessed, so most regular browser functions are not available. Search results are presented in a ranked order by number of hits of the search terms used. The source publication (*ACPJC*, *EBM*, or *DS*) is noted beside each item. It took me several tries to understand exactly what all the browser functions were and how to use them. Once mastered, however, it becomes relatively easy to navigate within the program, although the need to keep toggling back to another window to change search strategies remains a nuisance.

I used this software to answer clinical questions that arose from my clinical teaching practice. While searching for the operating characteristics of the clinical examination for deep venous thrombosis, the search function ("deep venous thrombosis" and "clinical") yielded 77 citations (not all relevant), 1 of which was a useful review of the topic.

By using the clinical content map, I found the same article faster, but I had to guess that the relevant category would be "cardiovascular illness." Exploring *DS* for the same question disclosed no mention of this article or of an earlier one by the same group. When I searched for evidence about the tests used in the diagnosis of temporal arteritis, there were several useful tables in *DS*. For the best method of diagnosing haemochromatosis, 1 citation in which the word was only mentioned in passing was retrieved.

A search for evidence for the treatment of hepatitis C found 5 articles, 2 of which were not relevant, and only 1 of 2 recent large trials of combination interferon-ribavirin treatment was mentioned. Other diagnostic and therapeutic questions yielded similar types of results.

Best Evidence 4 gives one the ability to rapidly search 2 of the premier evidence-based resources (*ACPJC* and *EBM*) currently available. It is most useful for quick searches for high quality studies. Its major problem is that studies not reviewed in its parent publications will not be found.

KENNETH A LOCKE, MD
Mount Sinai Hospital
University of Toronto
Toronto, Ontario, Canada

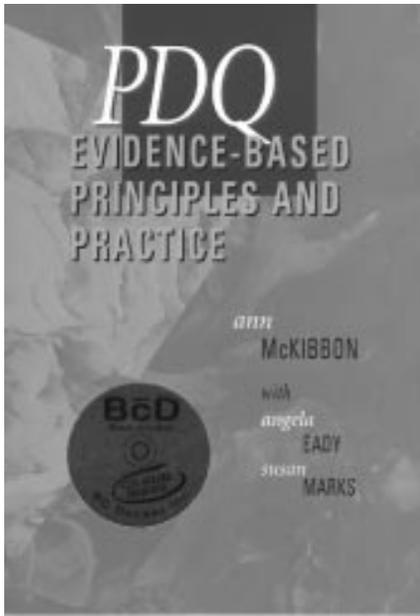
Ratings

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

Clinical usefulness: ★★★☆☆☆

Best Evidence 4 may be purchased at subscriptions@bmjgroup.com for £70 (BMA Members £50 only and 10% off CD ROM for joint subscriptions to *EBM* and *Best Evidence*). *Best Evidence 5* is expected early in 2001.

McKibbin A, Eady A, Marks S. *PDQ evidence-based principles and practice*. Hamilton, Ontario, Canada: BC Decker Inc, 1999.



The purpose of this book is to be a “pretty darned quick” guide to the principles of evidence-based health care (EBHC) and to the use of healthcare databases to retrieve methodologically sound studies. The book targets healthcare professionals who might be interested in making EBHC decisions. The main author is a librarian, who shares her many years of experience and expertise as an information retrieval professional.

The text is organised by category of research. Individual chapters cover studies of treatment, diagnosis, aetiology, and prognosis. Systematic review articles, clinical practice guidelines, economic analyses, and qualitative studies are also discussed in separate sections. Each chapter begins with an example of the study design, followed by an introduction to methodology and the qualities of a valid study. A guide to the statistical tools typically used is also provided. Thus, in the treatment chapter, randomisation, blinding, bias, and number needed to treat are all included in the discussion. The explanations are clear and concise, and numerical examples are provided. The core of each chapter consists of lists of index terms and text words that may be used to search each of the 4 major healthcare databases (Medline, CINAHL, PsycINFO, and EMBASE/Excerpta Medica) for methodologically rigorous studies. Critically appraised “hedges,” or optimal search strategies, for searching Medline are also included. The chapters conclude with search exercises for the reader to complete.

The volume comes with a CD ROM, which contains the full text as well as the answers to the searching assignments in 2 separate documents. Both are in Adobe Acrobat format and are therefore accessible to users of most current computer operating systems provided the appropriate software is installed. Acrobat Reader for 16 bit and 32 bit versions of Windows and Macintosh is thoughtfully provided on the disk. The contents of the CD are fully searchable, which greatly enhances the utility of the text as a reference. Unfortunately, the answers to the searching assignments can be found only on the CD ROM. I would have preferred to have had these included in the printed text only, forgoing the digital version. The multitude of included citations, which are reproduced in their entirety, would also not have been missed.

Despite its stated purpose as a quick reference, a surprising amount of historical information is included. Although this makes for interesting reading, I found that it detracted somewhat from the focus of the text.

On the whole, this book is a useful reference. However, while I had hoped to learn some of the trade secrets of an information professional, I was primarily rewarded with long, albeit useful, lists of terms. The included Medline “hedges,” or filters, are already incorporated in the free online PubMed search engine. My overwhelming impression after reading this text was that, despite the increasing accessibility of these large databases, literature searching continues to be overly reliant on fallible human indexers. By using some of the strategies detailed within this book, we may improve the efficiency and yield of our searches but, ultimately, more intelligent search engines are sorely needed.

GAVIN HUI, MD
Halton Healthcare Corporation
Milton, Ontario, Canada

Ratings

Methods/Quality of information: ★★☆☆☆

Clinical usefulness: ★★☆☆☆

PDQ Evidence-Based Principles and Practice can be purchased on-line at <http://www.bcdecker.com/> for US \$27.95. A discount for online orders is offered.