The Internet and evidence-based medicine

The topic of this month’s CME is covered by a large number of sites on the World WideWeb.

First of all there is the journal titled Evidence-Based Medicine (Fig. 1) published by the British Medical Journal (ebm.bmjournals.com). The BMJ has a policy of supplying the full text of their journals online to developing countries, and South Africa qualifies for this concession. Their servers automatically recognise the country of origin of access, and there is no need to subscribe — countries on the list automatically qualify for free access.

There is much to read on this site, but an efficient way of finding what you want is to click on the ‘Collections’ button, which takes you to a list of topic areas with many subheadings. For example, under Gastroenterology some of the subheadings are: Infection, Oesophagus, Gastro-oesophageal reflux, Stomach and duodenum, Helicobacter pylori, Small intestine, Pancreas and biliary tract, Liver, including hepatitis and cirrhosis, and Inflammatory bowel disease. If one is just browsing, there is the link to the current issue or the Search/Browse link if you are looking for something specific. The site is uncluttered and speedy.

Bandolier (www.jr2.ox.ac.uk/bandolier/) (Fig. 2) is a print and Internet journal about health care, using evidence-based medicine techniques to provide advice about particular treatments or diseases for health care professionals and consumers. The content is ‘tertiary’ publishing, distilling the information from (secondary) reviews of (primary) trials and making it comprehensible. Information comes from systematic reviews of the literature, from Effectiveness Bulletins from York (which initially were not made generally available), from ran-

domised controlled trials and from high-quality case-control, cohort or observational studies. The ‘Bandolier Journal’ link takes you to the latest journal articles, while ‘Bandolier Knowledge’ gives a list of topic areas similar to the ‘Collections’ link of the EBM Journal, and ‘Bandolier Extra’ gives a series of Internet essays on evidence-based medicine, management and specific topics, available to be read on-screen and/or as downloadable PDFs.

EBM Toolkit (www.med.ualberta.ca/ebm/ebm.htm), according to a blurb on the site, is a collection of tools for identifying, assessing and applying relevant evidence for better health care decision-making. The appraisal tools are adapted from the Users Guides series prepared by the Evidence Based Medicine Working Group and originally published in JAMA. It includes guidelines on how to assess articles and evidence-based clinical protocols, as well as links to other EBM sites on the ‘Net, including:

- CAT Walk: www.library.ualberta.ca/subject/health-sciences/catwalk/index.cfm — University of Alberta-guided walk through doing a Critically Appraised Topic (CAT)
- Resource Guide for Evidence-Based Medicine: www.library.ualberta.ca/subject/evidence/guide/index.cfm — University of Alberta
- Centre for Evidence-Based Medicine: www.cebm.utoronto.ca/ — Mount Sinai Hospital—University Network, University of Toronto
- Centre for Evidence-Based Medicine: www.cebm.net — Oxford
- Canadian Centres for Health Evidence: www.cche.net — University of Alberta and University of Manitoba
- Canadian Cochrane Collaboration: cochrane.mcmaster.ca/

Centre for Evidence-Based Medicine (CEBM). There are two sites, one in Toronto, Canada and one in Oxford, UK (Figs 3 and 4).
On the Oxford site (www.cebm.net), the following are some of the headings:

- Learning EBM. Background issues — what it is and what it isn’t — EBH glossary — study designs
- Doing EBM. Questions — searching — appraisal — decisions — evaluation
- Teaching EBM. Courses — downloads
- EBM toolbox. NNTs (numbers needed to treat) — LRs (likelihood ratios) — pre-test probabilities — calculators — and more.

The CEBM site in Toronto includes links to, among others, Introduction to EBM, Practising EBM, Syllabi for practising EBM, Teaching EBM, Glossary of EBM terms. Each link has either an explanation or a list of subheadings.

The EBM Resource Center (www.ebmny.org) (Fig. 5) site was established by the New York Academy of Medicine in partnership with the Evidence-based Medicine Committee of the American College of Physicians, New York Chapter with finance received in a grant from the National Institutes of Health to develop the Center. Evidence-based medicine is a methodology for evaluating the validity of research in clinical medicine and applying the results to the care of individual patients. Evidence is gathered through systematic review of the literature, and is critically appraised. The results are then integrated with physician/patient decision making.

Clicking on the ‘Publications’ button, takes you to a list of resources which will assist in obtaining evidence for a particular clinical problem. Their fact sheets will tell you about ‘Ovid’, a subscription search service or PubMed, the database of the National Library of Medicine in the USA, as well as some other databases.

There is more information if you use the ‘Searching’ and ‘Practicing’ (sic) links.

Finally, if you want a whole slew of EBM links, go to our old friend Google, and search on the term “evidence-based medicine” — include the quotation marks, as this will make certain that the whole phrase is searched for, not just the individual words.

FUN SITE OF THE MONTH

Darwin Awards

Each year awards are presented (posthumously) to people who either killed themselves accidentally or who placed themselves in dangerous situations which resulted in death or severe injury. Named in honour of Charles Darwin, the father of evolution, the Darwin Awards commemorate those who improve our gene pool by removing themselves from it. These awards are documented on the web site www.darwinawards.com. I have mentioned them in a previous column, but in the 2001 - 2002 Darwin Awards a new list of silly suicides appears. Read about the two motorists who both decided to race a train to a level crossing, the man who tried to steal a crystal stalactite, the Ghanaians who tried out a ‘bulletproof’ magic potion, and many more from this and previous years (Fig. 6).

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