

## BOOK REVIEWS

DETWILER, SUSAN M. **Super Searchers on Health & Medicine. The Online Secrets of Top Health & Medical Researchers.** Edited by Reva Basch. Medford, NJ: Information Today, Inc., 2000. 208 p. \$24.95. ISBN 0-910965-44-7.Ⓢ

The Super Searchers series contain interviews with people who are judged by their peers to be extraordinary database searchers and reference librarians in the field of a particular volume. Volume 4, *Super Searchers on Health & Medicine*, begins with an excellent introduction that summarizes major points under the rubrics: "Dedication," "Reliance on Proven Sources," "Precision," "Evidence-Based Medicine," "Alternative Medicine," and "Keeping Up with the Web." At the end of each interview in the volume, the interviewer elicits "power tips" from the super searchers. All the interviews begin with backgrounds of the individuals and current job descriptions. Other usual discussion topics not listed in the introductory summaries are audiences and their questions and frequent search techniques with the databases used. The discussions end with such future speculations as influence of the Web, the role of the librarian, and a wish list of ideal resources.

Part of the charm of the volume is, however, the freedom with which the interviewer follows a thread in the discussion, and the interviewees expand on their own predilections. Many questions in each interview are individualized to the particular role or niche of the person interviewed. The slant of different conversations is indicated by the chapter titles: "Barbara Bernoff Cavanaugh, Life Science Generalist"; "Frances A. Brahmi, Educating Future Physicians"; "Thomas Emmett, Doctor Turned Librarian"; "Margaret (Peg) Allen, Serving Allied Health"; "Auburn Steward, Assessing Toxic Risk";

"Nancy J. Allee, Finding Healthy Web Sites"; "Alan Eshleman, Online Patient Liaison"; "Pam Geyer, Focused on the Consumer"; "John E. Levis, Independent Healthcare Generalist"; and Bonnie Snow, Following Pharmaceuticals."

As the titles suggest, not all the interviewees are full-time searchers. For example, Alan Eshleman is a physician still doing clinical work at Kaiser Permanente but responsible for its new Website half time. He says this amounts to being the medical director for *KP Online*. Nancy Allee is director of public health information services and access at the University of Michigan. As well as traditional reference service, circulation, and collection management, Allee's responsibilities include the network and computing area, classroom services, and developing and maintaining the Website. One of Allee's responsibilities, the Michigan Megasite Project, evaluates health and medical Websites. Peg Allen is an independent consultant with major responsibilities for the Cumulative Index to Nursing and Allied Health Literature (CINAHL), especially its Website indexing. She also assists two Wisconsin Area Health Education Centers with grant proposal writing and development research among many other responsibilities.

There is a good glossary, and "Appendix A: Internet Resources" (probably worth the price of the book) is a handy selection by experts and frequent searchers of 186 resources, 175 of them on the Internet. This section will be updated online.

For the personality of interviewees to show, they must lead the interview to a certain extent. The result is that there cannot be tight organization. While the index has good cross references, this reviewer is disappointed not to find any general entry on "Staying Current" or "Keeping Up," even though "Keeping Up with the Web" is a

heading in the introductory summary. There are subentries for the former term under four of the entries for individual interviewees and "Web Resources." The indexing does not always bring concepts together. For instance, "Citation indexes" (and "Indexes, citation") lists two page references, but the pages listed under "SciSearch" and "ISI, Citation Indexes" are not under the citation indexes' main entries.

Another problem with interviews is that reputed "common knowledge" tends to be perpetuated, even though it is not true. Three different interviewees speak of MEDLINE as peer reviewed, but peer reviewing is not required to accept a journal for MEDLINE indexing. In addition, some major medical journals are reviewed internally rather than by peers of the authors. Certainly, the journals to be indexed in MEDLINE are carefully selected.

If, like me, readers enjoy and learn from biographies and congressional hearings, they will like this book. It is generally well written and edited, and any librarian with searching responsibilities will find helpful new ideas in it. It will provide students with the flavor of medical and allied professional reference. To them, the summary power tips will probably be more useful than to an experienced searcher.

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MILLENSON, MICHAEL. **Demanding Medical Excellence: Doctors and Accountability in the Information Age.** Chicago, IL: The University of Chicago Press, 1999. 451 p. Softcover. \$16.00. ISBN 0-226-52588-0.Ⓢ

Accountability in American health care is not just for doctors and patients but for hospitals, government

agencies, insurance companies, and even the benefits coordinators for large employers. Millenson chronicles their issues and relationships in recent years. As a good journalist (a former *Chicago Tribune* reporter who specializes in health care issues), he carefully cites names, actions, dates, and places and deciphers euphemisms.

This is a history of changing power, a history of a true "paradigm shift." The mid-century post-war period of provider autonomy with no accountability for outcomes generated abuses that led to a major social and political backlash. Medicine practiced by tradition and personal opinion led to widespread variability in outcomes (mortality and morbidity), hidden until exposed by outcomes research. "The operation was a success, but the patient died" is no longer acceptable at the dawn of the "Age of Evidence-Based Medicine."

Practice variation is not caused by "bad" or "ignorant" doctors. Rather it is a natural consequence of a system that systematically tracks neither its processes nor its outcomes, preferring to presume that good facilities, good intentions, and good training lead automatically to good results. Providers remain more comfortable with the habits of a guild, where each craftsman trusts his fellows, than with the demands of the Information Age. Collegiality is too often mistaken for quality control. (p. 376)

[T]he number one cause of medical mistakes is not incompetence but confusion. Although outright negligence and incompetence certainly exist, most treatment-related errors are caused by a poorly designed process of care that lacks safeguards to protect against anything less than human perfection. (p. 54)

Millenson cites research sources for the following assertions:

We have seen that only a small percentage of contemporary medical

practices have been scientifically validated. At the same time, effective therapies can take years to make their way into common use. Medical textbooks are frequently outdated, and journals go unread or unheeded. Continuing medical education has proved better at providing doctors with memorable meals or vacation snapshots than at changing their behavior. The consensus conferences on "best practices" sponsored by the National Institutes of Health are no more effective at producing behavioral change than the free meals. Meanwhile, when a group of doctors is asked whether the care in a particular case meets the highest professional standards, the "physician agreement regarding quality of care is only slightly better than the level expected by chance." Research medicine and everyday medicine often seem to exist in separate worlds. The public thrills to stories about a pill that may slow the aging process. But in everyday medicine we are just now examining the best way to perform the hip-replacement surgery that hundreds of thousands of Americans who *are* aging undergo annually at a cost of nearly \$3 billion. . . . In illness after illness and disease after disease we have seen almost random variation in how different doctors treat patients with similar clinical symptoms. (p. 350)

Consumer and third-party payer concern has shifted from issues of access to popular providers to measurable quality of care provided for the lowest cost. In the cost containment battles, who guards quality? Millenson traces the history of various fee for service and prepaid systems, as well as the development of the different quality-tracking efforts and quality improvement programs. Almost every sector of American society appears to be involved—individual patients and practitioners, health care professional organizations, health care corporations, accrediting organizations, government and nongovernment agencies, politicians, the courts, and the press.

Albeit polemic at times, the ac-

count is so thick with documented details that, with its index and notes, it qualifies as a reference book useful in any health sciences library. Originally published in 1997, this edition includes a new afterword that continues the saga.

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KOVACS, DIANE K; AND CARLSON, ANN L. **How to Find Medical Information on the Internet. A Print and Online Tutorial for the Healthcare Professional and Consumer.** Berkeley, CA: Library Solutions Press, 2000. 121 p. \$60.00. ISBN 1-882208-27-7. (Internet Workshop Series Number 10).©

For practicing health sciences librarians who use the Internet on a daily basis, there will be little new in this publication. It is more likely to be of use as a training tool for developing bibliographic instruction classes rather than as a tool for finding health information. Aimed at both consumers and health professionals, the book is about "providing you with skills to be a savvy Internet searcher." It is, as the title says, a print and online tutorial designed to replicate Kovacs' class, complete with lectures, overheads, and exercises. The dual format is meant to assure the information is always current. Every copy of the book has a unique number that enables the owner to log on to the Website and acquire a personal password. This gives the owner six-month access to the online tutorial, including the ability to contact Kovacs as the tutor for assistance with the exercises. The password must be obtained before July 1, 2001.

Three units—"Getting Started," "The Internet as a Powerful Means of Communication," and "Beyond Basics"—form the core of the book.