

ON THE NET

A textbook case for online searching

Outside, the streets are lashed with rain. It is a terrible night to drive 11 km to the university library, where the latest edition of the *AAP Red Book* is sitting on the shelf, but our doctor must consult it tonight. Tomorrow's 8 a.m. appointment is with the worried parents of an infant ill with *Campylobacter jejuni* infection.

Fortunately, the Internet age means that doctors facing these types of problems no longer have to venture outside.



They can visit www.cma.ca/osler, the CMA's online medical searching service, enter their username and password and select the latest feature, MD Consult.

Within seconds the full text of the American Academy of Pediatrics' *AAP Red Book: Report of the Committee on Infectious Diseases* is on the screen, fully searchable. The pages about treatment of *Campylobacter* infection can be read on the screen, printed or sent to the office by email for review later. While on the site, the physician also clicks on Librarian Support. The next morning, she will receive a complex MEDLINE search, complete with strategy and journal citation abstracts.

Best of all, OSLER is accessible from any computer, 24 hours a day, as a free service for CMA members. OSLER has always been popular with physicians, but the addition of MD Consult to its list of services in November 2000 caused thousands more physicians to sign on. (MD Consult is available to nonmembers for US\$200 a year, home.mdconsult.com/).

The full-text component of MD Consult provides a rich complement to every medical practice. It includes 56

journals with full-text articles, ranging from the *Clinics North America* series to the *Journal of Pediatrics* and the *American Heart Journal*. There are also 39 unabridged medical textbooks, including *Cecil's Textbook of Medicine* and *Nelson's Textbook of Pediatrics*. There are also 49 medical yearbooks and 3000 patient-education handouts that physicians can customize and download. This online content is searchable by keyword/MeSH heading, author, journal title and date.

While the full-text component of MD Consult is vast, current and highly praised by our users, the search engine is simple and less powerful than Ovid's. Best results are obtained by first conducting a search on Ovid and then using those citations to download material from MD Consult.

OSLER users can get help any time from cmalibrary@sympatico.ca or by calling 800 663-7336 x2255. — *Deidre Green, greend@cma.ca*

Emergency doctors, nurses prescribe cure for overcrowding

Overcrowding in Canada's emergency rooms is so severe that physicians and ER nurses have taken the unusual step of joining forces to demand reforms.

Dr. Douglas Sinclair, head of the 1400-member Canadian Association of Emergency Physicians, says the shortage of long-term-care beds has elderly patients lining emergency department corridors across the country. "It's a terrible way to deliver care," says Sinclair, head of emergency medicine at the Queen Elizabeth II Hospital in Halifax.

"It's very noisy and there are lights on all the time," adds Ann Cessford, head of the 1185-member National Emergency Nurses Affiliation. "The patients are exhausted by the atmosphere" and nurses experience "overwhelming anxiety."

The 2 professional organizations responded with a joint position statement asking governments to recognize ER overcrowding as a high-priority concern.

The joint statement says that overcrowding is "a symptom of system failure and solutions will require more community care options for the elderly and chronically ill, better access to diagnostic, surgical and acute care services, and improved hospital efficiency."

They also want Canada-wide standards for ER triage, databases to monitor use and pilot projects to enhance care. Most important, says Sinclair, is the need to target spending on research-based outcomes. "We waste a lot of money in health care, no one would question that. We need to be smarter."

Although the shortage of hospital beds is the primary cause of overcrowding, the statement says the problem is made worse by a "near collapse of primary care" that has resulted in orphan patients, a shortage of nurses and physicians, and large numbers of patients arriving with nonurgent problems. — *Barbara Sibbald, CMAJ*

CEO of Massachusetts Medical Society quits

The CEO of the Massachusetts Medical Society, publisher of the *New England Journal of Medicine*, resigned Mar. 1 after a turbulent 7-year tenure. Dr. Harry Greene II was CEO during a period of membership growth and a move to a new headquarters. However, Greene has been criticized for his role in the firing of *NEJM* editor Jerome Kassirer (*CMAJ* 2000;162[1]:92); Kassirer had objected to branding — the society's plan to use the journal's name to promote unrelated products. Greene also supported the purchase of the now-defunct health magazine *Hippocrates*, which capitalized on ties to the journal. He said there is no link between the criticisms and his resignation. "I am very proud of what we've accomplished," he stated. — *Barbara Sibbald, CMAJ*