

In praise of e-journals

As a member of the over-50 crowd who has been involved, including editorially, with print publications for many years, I disagree with the lamentations and conclusions about print versus electronic media voiced by physics researcher Matthew Edwards (as quoted by Barbara Sibbald in a recent *CMAJ* news article¹). Now that numerous journals are available online (including, of course, *CMAJ*) and with nearly universal physician access to the Internet, it has become easier to browse. In addition, many institutional libraries now make it possible for staff to access electronic collections from their homes (via the Internet), which means that they can browse at their leisure. Furthermore, it is easier to e-clip, e-file and e-retrieve “browsed” information of potential later interest (as well as to hyperlink it). Some may miss browsing the paper version of *Index Medicus*, but with the availability of PubMed 24 hours a day, 365 days a year, grazing one’s e-retrievals results in expanded cross-fertilization of ideas (since article abstracts appear in PubMed but not *Index Medicus*).

Regarding “uncertain shelf life” and the possibility that data “will become corrupted or lost,” I find it incredible that Edwards applies these statements to electronic rather than print media. Electronic texts and journals, especially those stored on a central server, are never at the bindery, never missing, never waiting to be reshelved, never mis-shelved and never unavailable because someone else is using them. Conventional wisdom certainly suggests that e-media are easier to store, locate, secure and back up to ensure accurate, long-term retention. For the size, weight and publication cost of one traditional medical text of 2000-plus pages, one can have dozens of copies in various electronic formats that can be

readily cloned to maintain their original integrity for millennia.

Gary N. Fox
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Toledo, Ohio

Reference

1. Sibbald B. Last call for print journals? *CMAJ* 2003;168(3):327.

The Wawa factor

I was intrigued to read in James Maskalyk’s recent commentary¹ a description of the “Wawa factor.” As a family doc practising in Wawa, Ont., I felt I should let you know how closely your imaginary Wawa world corresponds with reality.

In fact, my wife is the very person Maskalyk described. She is a hard-working mother of 2 who struggles to balance her practice and her family life. She does enjoy her work (I think) and considers how it fits in with the rest of the world.

I read your article aloud at our weekly CME session, and the other physicians and the nurse practitioner were similarly impressed. Have you considered picking stocks or horses?

Mike Cotterill
Wawa Medical Centre
Wawa, Ont.

Reference

1. Maskalyk J. The editing life [editorial]. *CMAJ* 2002;167(11):1252.

Finding time

As a practising family physician who is somewhat “dispirited,” I thank you for the insightful editorial exposing the rather useless generality of Roy Romanow’s recommendations for primary care reform.¹ You hit the nail on the

head by suggesting that more resources are required for administrative support. I now spend more time in the office than I did 10 years ago to take care of the same number of patients. I have excellent staff — both nursing and administrative — but I can only “download” so much to them.

It seems to me that there are 2 main areas where more time is required. The first is direct patient care — managing patients during the extended period while they wait for a specialist referral and following up patients seen in our overburdened emergency departments and specialists’ offices; as the editorial says, “Follow up with your family doctor” is a common instruction to patients in these situations. The second is the mounting paper pile. We are the truant officers for the Workplace Safety and Insurance Board of Ontario, schools, government and industry, and some days it seems that everyone has a form to fill out.

Michael Pray
Family Physician
Hamilton, Ont.

Reference

1. The primacy of primary care: reading Romanow [editorial]. *CMAJ* 2003;168(2):141.

Overdose advice

I read with interest the findings of the study published recently in *CMAJ*¹ examining the quality of poison management information in the 2001 edition of the *Compendium of Pharmaceuticals and Specialties (CPS)*.² As a member of the *CPS* editorial advisory panel, I am familiar with the process by which the content of product monographs is determined. This is pertinent to understanding the appropriate use of the information contained in those monographs.

The product monographs, which are