Correspondence

The use of Medline in a public health department

Sirs,

Guidance from the National Health Service Executive states that one priority is 'formulating decisions on the basis of appropriate evidence about clinical effectiveness'.1 One way of doing this is to use a computerized database such as Medline. This contains titles or abstracts from over 3500 biomedical journals from 1966 onwards. Although Medline is used mainly by researchers, it is also used in clinical practice. A survey of 552 physicians found that it assisted the development of an appropriate treatment plan or aided diagnosis.2 The early use of Medline during a patient's stay in hospital shortened that stay and reduced its cost when compared with controls.3 We report the monitoring of Medline use in Warwickshire Health's Public Health Department.

A log of Medline use was kept from January 1995 until July 1995. The user's name, the subject of the search, the reason for the search and whether the user found the search helpful were recorded.

Eighty-seven searches were performed in six months (mean three per week). The type of enquiry was categorized after examining the entries of the Medline users (Table 1). On 76 (87 per cent) occasions the search was helpful to the enquirer.

When the Medline was bought, we envisaged that it would be used for major public health projects, such as needs assessments, or educational work such as Part II projects. Table 1 demonstrates that we also made other types of searches which were not exhaustive. For example, a search for the health effects of ecstasy brought several helpful abstracts. This was not a full review and the papers were not obtained, but it did inform a tutorial about the main health effects of the drug. An example of a practical service enquiry concerned the risks of exposure to measles virus when three months pregnant. Textbooks did not contain any relevant information but a case series did.4

In a systematic review, it is important to find all extant papers to answer a specific question. This means hand searches of bibliographic databases, searches of the grey literature and complex computerized searches of multiple databases. Many questions a health authority faces have not been addressed by an updated systematic review, but public health physicians must still come up with an answer, and often speedily. Our pragmatic use of Medline represents a compromise between a systematic review and having no information on the topic at all. Several decisions have been made only on the abstracts of papers from the most recent Medline disks (1991 to the present).

We recognize that errors may occur. We try to judge where a fuller search is necessary. In a US clinical setting, physicians did searches to identify treatments for their patients.5 They did not perform systematic reviews, but patients benefited from their Medline search as detailed in the paper. We believe we are practising similarly and that Medline is helpful in public health departments. It is used in a different way than if it were sited in the library some distance away.

References

5 Siegel ER, Rapp BA, Lindberg DA. Evaluating the impact of Medline using the critical incident technique. Proceeding — the annual symposium on computer applications in medical care, 1991; 83-87.

TABLE 1 Number of enquiries and category of enquiry

<table>
<thead>
<tr>
<th>Category of enquiry</th>
<th>No. (%)</th>
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<tbody>
<tr>
<td>Interest and education</td>
<td>32 (37)</td>
</tr>
<tr>
<td>Specific public health projects</td>
<td>22 (25)</td>
</tr>
<tr>
<td>Advising on ECR request</td>
<td>6 (7)</td>
</tr>
<tr>
<td>Practical service enquiries</td>
<td>27 (31)</td>
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</tbody>
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