LETTER TO THE EDITOR OPEN ACCESS

Evidence-Based Emergency Medicine is Easy: Why Not Giving it a Try?

Sir,

A 40-year gentleman comes to the emergency department with a distal radius fracture. You are planning to give a hematoma block to reduce the fracture; however, your junior asks you to give Bier's block. What will be your response?

This question draws our attention to evidence-based emergency medicine, which might seem complicated. I can assure you, it is not. You are an open-minded emergency physician who is aware of published evidence to challenge clinical practice. You have an ability to critically appraise the literature and have the capacity to make a clinical decision. You are keen enough to share your research findings with a colleague and with your institution.

How to bring this to reality? Medicine is a dynamic field and evidence-based medicine can be practiced by promoting a culture of questioning for mutual benefits. Reading papers can be intimidating; however, one can use efficient reading to understand it. As busy emergency physician, we feel there are some aspects that might get complicated; however, we need to be first expert clinicians and we should know to ask for help. We can start learning this by reading published work, which others are reviewing. The departmental journal club is a great tool for change where papers are selected for their relevance. 1-3 It needs to be attended by consultants who help in making the decisions in the department. Sharing and supporting colleagues to help organize a structured critical appraisal journal club will lead to better patient care and maintain enthusiasm. Learning to appraise an article is a skill that emergency physician need to be aware of. It promotes a culture of listening to others' ideas as a springboard for further thoughts. We should not remain comfortable in our clinical practices, which might require a new perspective, and all this brings about an opportunity for personal reflection. We can set up a PUBMED email alert if interested in a topic. It is easy and never miss a paper on a specific topic that interests you. It is increasingly difficult to keep up the pace of vast subjects in emergency medicine and while allowing access to databases, we must ensure that databases are available at the point of care.⁴

Emergency medicine is our specialty and we must have a sound knowledge base of the underpinnings of our practice. An aspiring emergency physician should know about the best evidence available to take help from it rather than the admitting team. This is to illustrate as a reflective note for all emergency physicians with a hope to find our way for improved emergency medicine practice within our departments.

COMPETING INTEREST:

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SS: Drafted and edited the manuscript solely.

REFERENCES

- Feinstein AR, Horwitz RI. Problems in the "evidence" of "Evidence-based Medicine." Am J Med 1997; 103(6): 529-35. doi: 10.1016/s0002-9343(97)00244-1.
- Molesworth N. Down with EBM. BMJ 1998; 317(7174): 1720-1. doi: 10.1136/bmj.317.7174.1720a.
- Guyatt GH. Evidence-based emergency medicine. Ann Emerg Med 1997; 30:675-6.
- Carley SD, Mackway-Jones K, Jones A, Morton RJ, Dollery W, Maurice S, et al. Moving towards evidence based emergency medicine: Use of a structured critical appraisal journal club. J Accid Emerg Med 1998; 15(4):220-6. doi: 10.1136/emj.15.4.220.

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