In that this publication is written from the point of view of how a single physical deals with problems in his own practice, not everyone will necessarily answer each question in an identical fashion, and to some of these questions there are no right or wrong answers, only informed opinion. This does not detract from the book’s value.

Fritz E. Dreifuss, MB
University of Virginia
Health Sciences Center
Charlottesville

New Media

Reference
Stedman’s Electronic Medical Dictionary, 26th ed., ver. 3.0, diskette or CD-ROM, requirements: Windows at least 3.0, processor at least 400 MHz, 16 MB RAM, Stedman version preferred; documentation: 30-pp user’s manual $75.00, Starter Kit (for up to 5 users) $279.00, Baltimore, Md, Williams & Wilkins, 1996.

We still remember our first encounter with medical students with the intimidating vocabulary of medicine—not only Latin words, which seemed incomprehensible, but, even worse, terms commemorating prominent past figures. (What, exactly, is “anti-Trendelenburg?”) We also recall the sense of relief when, after some delay, we purchased our first medical dictionaries, which we still use to this very day.

Stedman’s Electronic Medical Dictionary contains the entire text of the 26th edition of Stedman’s Medical Dictionary (book version). Unfortunately, the illustrations are omitted from the electronic version.

After quick and simple installation of the software, one is presented with a self-explanatory search screen. Besides the straightforward word search, searching options also include Boolean operators (AND, OR, NOT), “Browse on index” (useful when looking up long terms or when the precise spelling is unknown), and “Previous” and “Next” entry. The useful “History” (log-file) feature brings up a list of all previously searched terms. The wild-card feature enables search queries such as “meningo” and “strepto.”

We found this electronic dictionary to be the perfect initial source for inquiring into unfamiliar medical entities, useful before opening the relevant textbook. This is especially true when only a concise description is needed. For example, looking up “Kimura’s disease” in the Harrison’s Principles of Internal Medicine index failed to furnish the answer that did appear in Stedman’s electronic dictionary: “angiolymphoid hyperplasia with eosinophilia.”

Other useful features are part of this package. When typing a misspelled term, a list of similar terms is instantaneously presented. Browsing this list, the user can double click on the correct, desired term. Hypertext capabilities (also known as definition chaining) are available: when reading a definition, one can double click on any of its words and then click the “lookup” button. The package automatically retrieves this word’s definition. For example, we initially searched “triatoma” to discover that this is not a malignant condition, but rather, “a genus of insects that includes important vectors of Trypanosoma cruzi . . .” We then double clicked on “Trypanosoma” and retrieved its definition as well as a list of over 25 different subtypes, which can also be searched.

We think that a medical dictionary is one of the books best suited to transfer into electronic format. The time saved by eliminating the tedious manual search may often make the difference between the effort to clarify a term or simply reading onward, relying on a guess. We are confident that the electronic version can entirely replace the printed version (except for the lack of illustrations, which constitutes only a minor drawback) for those studying near their computers.

In conclusion, we found this package to be a useful tool both for medical students and experienced physicians. The package performs very well on a 486-equipped PC.

Eytan Z. Blumenthal, MD
Daniel Mimouni, MD
Hadassah University Hospital
Jerusalem, Israel

Emergency Medicine


The modern world is divided into Mac people and IBM people, and I am one of the former. Previously, I was a FORTRAN person, and I approached computers as I would a rabid dog—only if I had no other choice. The user-friendly computers currently available make computers not only facile but fun, as witnessed by the billions of dollars and millions of hours annually spent on computer games. Not to be computer literate is to be left behind in the information age.

The software reviewed here is compatible with Macintosh computers with system 7.0 or higher. The IBM version will run with Windows 95. There is also a network version available, which could be used to connect multiple stations in an hospital or office, a big advantage over standard textbooks. Another advantage is the inclusion of a toll-free number and Internet address for technical assistance with the program.

The installation is quite simple, and I did not need technical assistance or the aid of my 14-year-old son. Access time with my Power Macintosh was more than adequate, but I was unable to use the guided-tour tutorial, which is only available in the Windows version. I therefore read the very short but informative users’ manual and pushed on.

This program is essentially the two textbooks sans indexes, copied in series on the disc and controlled by a friendly search engine. A tool bar provides quick access to various functions and allows one to highlight segments of text, take notes, bookmark information that is frequently used, and focus on specific search areas.

Both of the works were originally designed as board review texts, not as general reference textbooks or how-to books. This makes the program particularly appealing to the individual who is preparing for the board examination, but less appealing for someone writing a paper or managing a case in the emergency department. However, I feel that this format could easily be adapted to other texts with little difficulty. I browsed the table of contents and searched for a number of items. The information was complete, up-to-date, and clearly presented. I printed several pages of text, including tables and illustrations, without difficulty. A few references are included for each section, and a search template for bibliography is on the tool bar. The figures and tables are a bit difficult to read, and many of the radiographs reproduced poorly, but printed texts have similar problems.

The pretest has 620 board-type questions that are interactive with the text. The correct answer gives a short explanation, an incorrect answer returns to the question. The reader who needs a more detailed explanation can click and jump to the appropriate chapter in the text. The questions are challenging, although I noticed some interesting errors: for example, question 136 concerned a cat bite, but read “CT bite”—obviously a computer spell-check type of error.

Overall, I was quite pleased with the program. The ideal user would be the physician preparing to take the board examination in emergency medicine. However, I can see using the short-chap-