

Additional medical websites of interest

Drs Leduc and Cauchon have written an excellent article¹ on high-quality medical resources on the Internet. I reviewed the article in detail because our Medical Information Service website for rural physicians in Alberta covers much of the same material. Here is some additional information that might interest *Canadian Family Physician* readers.

1. Cochrane Library CD-ROM, <http://www.updateusa.com/clibpw/clib.htm>
The listed price for the CD-ROM version is \$235 (US). The CD-ROM is available from Membership Services at the Canadian Medical Association (CMA) for \$323.95, <http://www.cma.ca/catalog/cochrane.htm>

2. Best Evidence 5 CD-ROM, http://www.acponline.org/catalog/electronic/best_evidence.htm
The CD-ROM is listed at \$80 (US). It is available from the CMA for \$128.95, <http://www.cma.ca/catalog/bestevide.htm>

3. Medical World Search, <http://www.mwsearch.com/> As of February 2001, this website is no longer free. They now charge a \$10 registration fee.

4. Canadian Medical Association Member Service Centre; telephone (613) 731-8610, ext 2307, or 1-888-855-2555; fax (613) 236-8864; e-mail cmasc@cma.ca; website <http://www.cma.ca/member/servicecent.htm>

—Barrie McCombs, MD, CCFP,
CCFP(EM), FCFP
Calgary, Alta
by e-mail

Reference

1. Leduc Y, Cauchon M. Finding the right information at the right time. Part 2: MEDLINE, medical journals, and websites. *Can Fam Physician* 2001;47:567-9 (Eng), 577-9 (Fr).

Hats off to family physicians

As a certificant and Fellow of the College of Family Physicians of Canada and a Fellow of the Royal College of Physicians in General Pathology, I still read *Canadian Family Physician* as soon as I get it.

I would like to comment on the research paper,¹ "Does having regular care by a family physician improve preventive care?" which appeared in January. The methods and materials used were appropriate for obtaining the results and conclusion: that adults receiving regular care from family physicians

are better positioned to receive recommended preventive services.

I think the real question now is how accessible family physicians are to the more complex demands of the ever-more medically knowledgeable public? The other question is whether our current fee schedule promotes preventive medicine effectively. Pharmacists, nurses, and a plethora of clinics and self-help groups vie with physicians for informing the public. Being an effective family practitioner requires knowing about public and medical services available and having encyclopedic knowledge. This includes knowledge of pathology and the various tools for investigational analysis, such as glucometers and serum glucose analyzers, their advantages and limitations as well as their technological capabilities and biases.

In addition, with the evolving field of genomics and proteomics, family physicians need to know the basics of such molecular techniques as Southern blot analysis, Northern blot analysis, and gene amplification techniques, such as polymerase chain reaction. If physicians do not understand these techniques, their awareness of preventive therapy for many diseases will be hindered.

Family physicians might have less knowledge than some of their specialized peers, but the tasks and ongoing demands of dedicated family practitioners are immense and worthy of the highest respect. Those of us who emulate these noteworthy practitioners deserve to be lauded; those who do not would do well to follow their example.

—John Vernick, MD, CCFP, FRCP
Detroit, Mich
by mail

Reference

1. McIsaac WJ, Fuller-Thomson E, Talbot Y. Does having regular care by a family physician improve preventive care? *Can Fam Physician* 2001;47:70-6.

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