

In the Bookstores

How to read a paper – the basics of evidence-based medicine and health care (sixth edition)
Trisha Greenhalgh
Wiley Blackwell, 2019
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I must admit that it felt a little odd to be reading a book about “how to read a paper”, but this book is really about so much more than that. Its author, Dr Trisha Greenhalgh, is passionate

about evidence-based medicine, and this is a very hot topic right now in the era of increasingly “fake” news and predatory journalism. As a grumpy scientist who is increasingly irritated and dismayed by the rise and rise of utter nonsense presented (and accepted) as fact, I settled in for a good read.

It is astonishing that this book was first published 23 years ago, and yet we have not been able to eradicate poor science and sub-standard science reporting. However, as Dr Greenhalgh acknowledges, evidence-based medicine has both increased and decreased in popularity over the years. This edition is the fifth update to Dr Greenhalgh’s original book, and it includes more worked examples, updated references, improved graphics, and a very helpful questions section at the end of each chapter to help check understanding. This edition also contains a new chapter dealing with population genetics and “big data” so it is very current.

Dr Greenhalgh has a very easy, nicely flowing writing style, and punctuates what could be very dry text with lots of personal anecdotes. However, it’s worth pointing out that this book is aimed at medical students, not medical writers, and although there is a lot of overlap between the two, Dr Greenhalgh is a clinician and her aim with the book is to help other clinicians to assess the literature more critically to help them in their practice decisions. This means that the book is written from the clinician’s perspective and the anecdotes are from clinical practice. I found this a little irritating at times, but most of the time I enjoyed learning about “the other side”, and I’m sure it will help my appreciation of clinicians

when I next work with them in my project team.

The book is split into 17 very manageable chapters. The only time I have to read is while travelling, so it was great to have chapters that I could complete in quite short chunks rather than having to stop half way through and then try to re-trace my train of thought the next time I was on a train or plane. Chapter 1 starts with “Why read papers at all?” and then Dr Greenhalgh leads the reader

through the topic of evidence-based medicine very logically – with chapters covering how to search the literature effectively, how to approach a paper and assess it critically, and discussions of papers that report on very simple interventions, right through to detailed discussions about papers dealing with guidelines, systematic reviews, genetic and economic analyses, genetic association studies, and meta-analyses. Although I was already familiar with a lot of the material covered in the book, I found that I could easily skip over those sections to the more interesting or unusual sections that I had not encountered in this detail before. I actually believe that this was the intention, since the book provides very handy coloured “tabs” on the left- and right-hand sides of the pages to allow the reader to navigate between chapters very easily.

I was particularly interested in the chapter dealing with papers that describe evidence for patients and those looking at the patient’s perspective. This chapter describes the patient’s viewpoint, and deals with patient-reported outcomes research. Given the book’s target audience, there is naturally a section on shared decision making and option grids, but this was not laboured and was actually very well done. I have read many papers about decision aids and how best to produce them and use them to explain complex benefit-risk evaluations, and of course the book cannot cover everything, but it gave the top-line views of the topic. It was also

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really interesting to read the difficulties from the clinician’s point of view, and Dr Greenhalgh’s suggestions for how to present this information to patients and how to guide them through it.

This is quite a short book, but the chapters are very well referenced should the reader want or need more detail on any particular point, and they are punctuated with really useful lists of things to look for, or beware of, which I’ve bookmarked for myself for later! There are also lots of good tips and tricks for non-experts (one of the benefits of aiming a book at students), and I found the chapter on statistics to be particularly well written and explained.

The questions/exercises at the end of each chapter were also really helpful. Some were in the form of medical case studies, but they made sense in the context of that particular chapter, so were still helpful. Some chapters (e.g., “Assessing Methodological Quality”) also contained a summary at the end of the chapter and I found this very useful – both for future reference and as a check that I’d followed the main points correctly.

Overall, whilst I wouldn’t consider this a must-read text for medical writers, I am looking at my copy now and noting its plethora of sticky tabs on the side that I have used to mark pages for future reference. This book has something for medical writers of all levels and in all areas of industry, and it is also a very easy book to read – even if you don’t share the viewpoint of a clinician. Perhaps it’s not a bad thing for us all to have a bird’s eye view of how clinicians approach evidence-based medicine, and it’s certainly a timely reminder for us all to be on our guard and to think more carefully about how we read papers!

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