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New PURLs® INSTANT POLL

Tell us what works in daily practice

Do you use anesthetic drops for immediate relief of pain in children with acute otitis media, as we advise in the Priority Update from the Research Literature (PURL), page 370? Do colleagues like you around the country do so?

You can find out in a few seconds, at www.jfponline.com. Starting this month, our *PURLs Instant Poll—a Reality Check on the Research Literature*, lets you join an online dialogue about practice changes recommended in the PURLs series in *JFP*.

We have surveyed thousands of research studies in the past 8 months, with input from our “Reality Checkers” listserv and colleagues around the country, to help us figure out which studies are relevant, valid, practice changing, and usable. Our small group at the University of Chicago culled a dozen studies that met those criteria. Some of the questions that arose from these studies were: Do you use tamsulosin to help pass ureteral stones? ...vitamin C to prevent pain syndrome after fracture?... more thiazides and fewer beta-blockers for hypertension in the elderly—even those with diabetes and metabolic syndrome? ... zoledronic acid to prevent osteoporotic fracture? If so, why? If not, why not?

There is more to adopting a new practice than reading a study. Clear reasons (cost, insurance, patient factors) sometimes support a decision to maintain the status quo. But more often, we’ve discovered in our PURL-diving thus far, the reason is that we are unaware of the new evidence or unconvinced of its usefulness.

“Show me”

Diffusion theory suggests that we doctors will not adopt a practice change until we are convinced that our patients will benefit. Like those of us from Missouri, most doctors prudently think, “show me.” We have to be convinced that the science is good and that it is relevant to our patients, but we also have to be convinced that in the reality where practicing doctors and patients live, it works, it is acceptable, and it can actually be implemented.

We want to facilitate practice changes that will benefit patients. But one must know what the current practice *is* to determine if a study will change practice. We hope that we can all learn from each other about what works and makes sense for our practices and patients, and what does not.

By participating in the online *PURLs Instant Poll*, you can take part in selecting, adopting, and disseminating worthwhile new practice recommendations.

Please join us in defining what makes sense in the reality of family practice by logging in at www.jfponline.com, and responding to *PURLs Instant Polls*.