

View from the front line: Beyond the PDA

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Current and future converged mobile devices.

The PDA (personal digital assistant) has been a revelation to me and has vastly improved my efficiency both at home and at work. I was an early user of the Psion and then moved to the Palm. Just over a year ago, I upgraded and bought a Palm Tungsten TX and its major improvement, compared to the model I was using, was that it was Wi-Fi enabled. Logging onto networks such as my home Wi-Fi is a breeze, especially for collecting email, whilst my current Palm also has my diary and contacts, as well as important word documents, spreadsheets, etc. thanks to the fabulous 'documents to go' programme. Medical textbooks are available for the Palm and some are

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well integrated into the main functioning of the device. I am delighted with my current Palm and use it every day both for personal and work matters.

However, all is not well on the Palm (and PDA) front as sales are declining¹ and this is an on-going trend. The reasons are complex and, in the fast-moving technical world, not always easy to tease out. The rise of the Smartphone and the need to have a mobile phone as well as a PDA is a bit of a nuisance. Equally, some people need a MP3 player and look to different devices to satisfy all their needs whilst other people do remain loyal to their PDA. All these demands put pressure on PDA sales, contributing to the downward trend.

I probably have a foot in both camps. I like my Palm and it serves me well; it is reliable and easy to use both for work and home life. Also, I have a lot of data in my Palm which

could be a bit of pain to transfer across to another device and anyway I am not that keen to change allegiance just yet. I don't think the ideal 'converged device' – a PDA, MP3 player, good quality camera, Internet access device that can handle the Web and email easily and telephone, all fused together in one functional device – is available just yet. Sure there are devices that claim to carry out these functions but they seem to be 'Jack of all trades and masters of none'. By that, I mean some units will be a better phone than a PDA, to give an example. However, as time moves on (perhaps a year or two) then better devices that will perform all their

functions equally well and effortlessly will come onto the market. As I was writing this article, Apple were announcing their new iPhone www.apple.com/iphone/ which I understand will not be available in the UK for some time.

Of course Apple were responsible for the iconic iPod www.apple.com/itunes/ and so when they enter this market everyone will take notice. It will be interesting to watch what happens with this product (iPhone) and if it will fulfil its promise. If it does not, I am sure there will be a number of com-

petitors waiting in the wings to produce their device which will aim to be superior to the rest.

Talking of iconic products, one worth mentioning is the BlackBerry www.blackberry.com/ which, although used a lot in business, is also used by individuals.

I have been using one for the last few months and have been hugely impressed. For another publication, I have been reviewing a BlackBerry 8700f supplied by Pearl Medical www.pearlmedical.co.uk/. Their business model revolves around the fact that the doctor currently pays £5 per month (plus the cost of phone calls from the device) and agrees to take part in a weekly survey; the data generated are sold to third parties, such as pharmaceutical companies. So far, I have found the online surveys easy to do and not time consuming. Setting up your email 'poll' is easy and technical support direct from Pearl Medical is superb.

The BlackBerry is an excellent device, with an easy-to-use mobile phone plus Web access which runs at the speed of dial-up Internet access and the sites display reasonably well. However, the BlackBerry excels at email access and it can 'poll' your normal email account and you can easily reply from the BlackBerry with an email. Attachments such as word files are viewed without difficulty, whilst typing (no need for a stylus as used with my Palm) with the in-built keyboard is simple to use with thumbs. The unit is slightly bulkier than a modern mobile phone or PDA but there are new versions of a BlackBerry that are not too dissimi-

lar from a 'normal' mobile phone. Even better, the company supplying the BlackBerry are working with the

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GP software provider EMIS to provide access to the EMIS GP clinical system. Since I use EMIS at work, this is an exciting prospect and I hope to take part in the early trials of this.

A device along the lines of a BlackBerry and perhaps even the Apple iPhone will eventually replace the PDA and the standard mobile phone. Sure, there are devices available now but as I have said none are perfect and there is room for improvement. In the next few years, I would expect to see a small portable device, with a built in, easy-to-use keyboard and high-speed Internet access. In addition, this device will be at ease with multimedia and have excellent address and diary sections. Such convergence encompassed within one unit will be hugely popular with health professionals as well as consumers and business people.

At the moment with my Palm, I only have Wi-Fi access to the Internet and if I want a medical textbook I have to buy a reference source which has been compiled to work on the Palm. Imagine having easy-to-use, nationally available, high-speed Internet access and being able to look at all the standard Web sites with ease. Yes, it looks like the PDA is slowly dying a death and, although many people (including myself) love their PDA – I think the Palm device is wonderful - I need to carry that and a mobile phone. When a gadget becomes available that possesses all the best qualities of the current crop of mobile devices then that will be the death knell for mass use of the PDA. It will be subsumed into this multifunctional device and that time is probably sooner rather than later. Currently, for me, the best of breed around is my Palm Tungsten TX and my BlackBerry 8700f. They are two fantastic devices that satisfy all my mobile 'digital' needs both as a consumer and a health professional. I can't wait till they become united!

Reference

1. Jaques R. PDA market continues to dive. IT Week, 9 November 2006
<www.itweek.co.uk/vnunet/news/2168280/pda-market-continues-dive>.

Current literature

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An annotated bibliography of books and articles relevant to the study and use of the Internet in the healthcare environment.

Pappas G et al. World Wide Web hepatitis B virus resources. *J Clin Virol* 2007; 38: 161–4

This study identifies and evaluates the provision of hepatitis B (HBV) information for clinicians and the public on the Internet. The aim is to highlight 'highly subjective and selective' Web sites which might provide an accurate starting point for HBV information. Google and Yahoo were used to identify Web sites, which were selected using certain criteria. The medical content was judged independently by two of the authors, and the public Web sites were judged by two non-medical personnel. For clinicians, eleven 'useful' Web sites were identified; however, not all of these provided free access. Two Web sites were singled out as having excellent content: ClinicalCareOptions <<http://clinicaloptions.com/Hepatitis.aspx>>, and The Hepatitis B Foundation <www.hepb.org>. For patients, fifteen 'useful' Web sites were identified, two mentioned specifically: the British Medical Association <www.bma.org.uk/ap.nsf/Content/hepbstatus>, and the US Centers for Disease Control <www.cdc.gov/ncidod/diseases/hepatitis/b/index.htm>, which provide the best set of fact sheets and question/answer lists. Many of the patient Web sites were created by patient groups and pharmaceutical companies, and may contain some degree of bias or inaccuracy; the authors question whether free access and data validity can be married. They also suggest other ways of presenting public information, and conclude that continuing thought and research should go into the

presentation of online patient information.

Sim NZ et al. Information on the World Wide Web – how useful is it for parents? *J Pediatr Surg* 2007; 42(2): 305–12

This study, based in a paediatric surgery out-patient department, identifies how many parents accessed the Internet to find out more about their child's condition, and whether the information they found was useful. A questionnaire was completed by carers of children attending consultations. Questions asked included the type of information sought, keywords used, and other sources of health information used (top of this list was the GP). Of respondents, 53% accessed the Internet and 94% of these found the information useful, of whom 66%, nonetheless, found the information too technical, too distressing, insufficiently specific, too brief or too overwhelming. Only 6% did not find the Internet useful. The authors cite studies from Bath, Oxford and Cincinnati which displayed similar results; in addition, none show a high proportion of patients discussing Internet findings with their clinicians, but they do show that clinicians remain the main source for medical information. The authors looked at Web site validation tools, focusing on DISCERN <www.discern.org.uk> and studies which have used DISCERN to demonstrate the paucity of quality Web sites available. The conclusion suggests that it should be within the remit of clinicians not only to ask patients about their Internet findings and to recommend