BRUCE S. MILLER, MD, MS, on “Quality and Content of Internet-Based Information for Ten Common Orthopaedic Sports Medicine Diagnoses” by James S. Starman, MD, et al.

The objective of this study by Starman and associates was to assess the quality and content of Internet-based information regarding commonly encountered diagnoses in orthopaedic sports medicine. The authors used ten common sports-medicine conditions to identify and evaluate web sites according to three criteria: (1) type of web site (for example, academic compared with commercial), (2) web-site quality, and (3) web-site content. The study question is timely, the methods and analysis are clear, and the manuscript is very well-written.

The authors report some interesting, and perhaps worrisome, findings. Commercial web sites were the most common type encountered, with a frequency of more than twice that of the next most common category, that is, academic web sites. In addition, there was great variability in quality and content scores across all types of web sites. Not surprisingly, web sites that claimed to be compliant with quality standards had superior content. This is not the first study on this topic, and the authors identify similar studies in orthopaedic surgery that mirror these findings.

The methodology of this study relies on some “customized” outcome measures for assessing web-site quality and content. For example, the outcome measure for web-site quality in this study is based on the “Health On the Net” criteria, an early effort to improve the quality of Internet-based health information. The use of such outcome measures might potentially compromise the outcome of a study. However, as the study of web-site content is an emerging field, the authors’ effort to objectively evaluate the web sites appears to be sound. Furthermore, the authors report excellent agreement between raters.

What is clear is that the Internet is here to stay. Our patients already utilize the Internet as a source of information for their medical conditions, and they will likely continue to do so with greater frequency. What is also clear is that it is not safe to assume that our patients are able to discriminate a web site with “good” content from one with content that we might consider questionable. Thus, the burden is on us to take an active role in steering our patients to reputable sources of information on the Internet and in pressing for standards to improve the content and transparency of such web sites.

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