

Computerized Hospitals: Not All That Glitters Is Gold

To the Editor:

Himmelstein et al¹ concluded that hospital computerization only modestly improves process measures of quality and fails to reduce costs. They cited the dramatic experience of computerization at the Department of Critical Care Medicine in the Children's Hospital of Pittsburgh, which reminded us that processes are not a validated surrogate end point for mortality or morbidity.² Despite this dramatic experience, computerization is still implemented without pertinent evaluation: After the publication from the Children's Hospital of Pittsburgh, only Del Beccaro et al³ evaluated patients' outcomes after implementation of computerization.

Why is there so little concern for evaluating patient interests when implementing computerization? If computers were drugs or medical devices, their application for mar-

keting authorization would have been rejected. Himmelstein and colleagues¹ are opening a black box. Hope is no longer justified when implementing computerization. The "I can buy it, then I do it" attitude cannot mask ignorance regarding patient outcomes. I hope that computing is not going to be to hospitals what building was to some municipalities.

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References

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