

- relaxes the gripping feeling in the chest area, and
- energizes the body, mind, and spirit.

The video "Yoga and the Gentle Art of Healing, A Journey of Recovery After Breast Cancer" is professionally done and has a running time of 43 minutes. Easy to follow, the video offers women a chance at physical, mental, and spiritual healing after surgery and treatment. Ms Rosen provides excellent instruction and support and speaks directly from her own survival experience. Health care practitioners would be well advised to share this video with patients, friends, or family members who are facing breast cancer. They will

find support, and their healing journey will be enhanced by the physical and mental renewal they gain through using the video. Cost for the video is \$19.95. For more information about the video, visit www.YogaJoyofDelMar.com or call 858-573-0090. ❖

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Reference

1. Feuer EJ, Wun LM, Boring CC, Flanders WD, Timmel MJ, Tong T. The lifetime risk of developing breast cancer. *J Natl Cancer Inst* 1993 Jun 2;85(11):892-7.



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Journal of Telemedicine and Telecare

Review by Vincent J Felitti, MD

The *Journal of Telemedicine and Telecare (JTT)* is now in its seventh year of bimonthly publication by the Royal Society of Medicine (London). The journal is designed to bring together reports of successes and failures in a new, exciting, and rapidly expanding field where an impressive number of innovative ideas are being tested around the world.

Clearly, electronic storage and transfer of information is currently important in medical practice and is essential to its future. Use of computers, personal digital assistants, and the Internet by physicians and patients has become common. But expectations are rising faster than are experience and practical use. For instance, resolution of operational problems is now commonly postponed with the statement, "That will be solved when we get the electronic medical record."

Browsing through *JTT*, the reader finds a number of remarkably imaginative projects that have already been instituted, often in remote parts of the world. Telepathology, teleophthalmology, videoconferencing, telepsychiatry, home monitoring, and teleradiology are all used, although not necessarily successfully. The reader of *JTT* also finds that the technology itself is

usually only a minor part of the equation for successful medical collaboration at a distance. Repeatedly, *JTT* reports project failure traced to inadequately addressed issues of interpersonal cooperation, hidden competitiveness, and a naïve hope that investment in technology can somehow solve problems that have not been thoroughly analyzed. When we also recognize that successful telemedicine approaches are volume-dependent (because of costs that must be capitalized), we realize that any smoothly running, high-volume operation depends first on a leader who organizes human efforts for cumulative effect.

The *Journal of Telemedicine and Telecare* would be a good investment for Kaiser Permanente's in hospital medical libraries as a way to develop interest, stimulate imaginative thinking, and yet maintain realistic expectations among Permanente physicians contemplating the rapidly expanding field of telemedicine. Some physicians may wish to subscribe, but others might want to use the free alerting service with Table of Contents posted on the Internet at www.rsm.ac.uk/pub/jt.htm. A free sample issue may also be viewed at that Internet address. ❖

Vincent J Felitti, MD, has been with the Southern California Permanente Medical Group since its opening in San Diego in the late 1960s.