

adequate attention and lead to the complicated behavior change being asked of patients for the abstinence strategies. Finally, quit smoking resources were eliminated from the decision support tools in the development process. In this circumstance, raising the advisability of smoking abstinence earlier, and backed by behavioral support interventions, may have been more effective.

In short, to be effective, SDM supported by decision aids needs to address appropriate problems, using good tools, delivered in an optimal way. This study, with its combination of positive and negative findings, adds important knowledge that should help achieve those goals.

### Competing Interests

Dr. Barry is an employee and chief science officer of Healthwise, Inc., Boise, Idaho, a 501(c)3 nonprofit organization

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## ANESTHESIOLOGY REFLECTIONS FROM THE WOOD LIBRARY-MUSEUM

### Brown's Household Panacea: Stealing Away Pain



Symbolizing pain as a burning stove, this “Brown’s Household Panacea” advertising card featured artwork produced by New York’s J. [Jacob] Ottman Lithographing Company. “Sold by all druggists” as a nostrum from the 1870s through the 1920s, “Brown’s Household Panacea and Family Liniment” could be applied externally, at full strength, as a “sure cure for toothache,” cuts, burns, bruises, pains, sprains, stiff joints, and rheumatism. Diluted to a teaspoon of Panacea per cup of water, this cure-all was advertised to be taken internally to relieve sleeplessness, sore throat, stomach pains, colic, or chills. A stronger dose, “a full bottle [of Panacea] in a pint of water,” was touted for relief of chills or colic ... suffered by the family horse! (Copyright © the American Society of Anesthesiologists, Inc.)

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