Brian Haynes was a second-year medical student when he had his first inkling that much of what he was being taught had no scientific basis.

“I asked a professor if Sigmund Freud’s theories were true. He said he didn’t think there was any evidence, and I thought, well, how much of medical practice is based on unproven theories?”

A chance meeting with David Sackett, founding chair of McMaster’s clinical epidemiology department, convinced him he was not alone. He became a student of Sackett’s, then a fellow professor, where he became a central figure in the small band of individuals who pioneered evidence-based medicine.

But Haynes’ most enduring contribution to the field is less about answering the questions that haven’t been answered, and more about ensuring the answers find their way to practitioners and patients so they can make a difference.

Alarmed by the discovery that less than five percent of studies reported in medical journals were scientifically valid and clinically applicable, he founded CE&B’s Health Information Research Unit and created a refinery of both evidence-based journals and Internet information services.

The McMaster Health Knowledge Refinery now reaches 200,000 subscribers with email summaries and expert ratings of articles culled from the world’s top 120 scientific journals. Articles are matched to recipients’ interests and field of practice, and labelled with short declarative titles.

Jokes Haynes: “We actually invented the tweet before there was a tweet.”

In a 38-year career that shows no signs of waning, the scholar and still-active physician (he holds a cross appointment in medicine) has amassed such honors as Fellow of the Royal Society of Canada, Officer of the Order of Canada and the Roger Côté Medal of Excellence in Health Informatics. Yet he still finds new and innovative ways to retrieve and deploy clinical information in support of health care decision making.

His latest effort is an app that will allow seniors to upload, onto a smartphone or tablet, the current best evidence concerning their personal health priorities simultaneously with their family doctors.

Declares Haynes: “Communication and shared decision making are the last steps to getting evidence into practice.”