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OF THE EUROPEAN ASSOCIATION
FOR HEALTH INFORMATION AND LIBRARIES

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**THEME ISSUE:
Clinical
Information Services**

**Scholarships
for the Krakow Workshop
Deadline date for application
31 May 2007**

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The screenshot displays a digital textbook page titled "The Cell and Its Components" on page 21. The interface includes a top navigation bar with "HOME", "BOOKS", "SEARCH", and "HELP" options, along with icons for "FULL SCREEN", "DOUBLE PAGE", "BOOKMARK PAGE", and "FLY BOOK". A left sidebar contains a "Contents" menu with sections like "Color Atlas of Genetics", "Book Info", "Introduction", "Chronology", and "Part 1. Fundamentals". The main content area features two detailed diagrams of a eukaryotic cell. The left diagram, labeled "A. Eukaryotic cell", shows various organelles including the Plasma membrane, Nucleus, Lysosome, Golgi apparatus, Nucleolus, Mitochondrion, Centriole, and Peroxisome. The right diagram, labeled "B. Detail of the nucleus", shows the Nucleolus, Chromatin, inner and outer membranes, and Nuclear pores. A scale bar indicates a size of 3-10 μm. Below the diagrams, a section titled "Transport" shows a cross-section of a cell membrane with arrows indicating "in" and "out" movement. The page number "21" is in the top right corner, and "PREV" and "NEXT" navigation buttons are also present.

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Editorial

I hope you all enjoyed a nice Easter. We have had an incredibly mild winter this year in Romania with hardly any snow and spring immediately began in March. A very hot summer has been forecast so we shall see what happens.

I would like to congratulate Meile on the opening of the Kaunas University Medical Library and thank Arne for the report and picture, which is featured in this issue. I know Meile has been working very hard on this project for almost four years and it has turned out to be a huge success. The road to the building of the new Cluj University of Medicine and Pharmacy library was much longer and is now almost a history lesson. Ioana was moved to this students' hostel, twenty years ago as solely a *temporary* solution, when the old library began to have major subsidence problems. Work began in 1995 for the new library! However, the new building has begun to progress rapidly over the last 2 years and we hope to be able to move in late autumn. So Cluj will have its new medical library in the very near future.

The theme of this May *Journal of EAHIL* is *Clinical Information Services* and I thank Tünde Gracza from Pecs University Medical Library, Leena Lodenius *et al.* from the Finnish Medical Society Duodecim, Marie-Pierre Réthy, University of Lyon, and Maurella della Seta and Luisa Leone from the Istituto Superiore di Sanità in Rome for their contributions. Velta Pozņaka gives us news about a new Nordic-Baltic project while Suzanne Bakker, as our new President, unveils her Strategy Plan for EAHIL. Meile reports on the Executive Board meeting in London while Benoit and Oliver keep us up to date with all the latest on internet and Giovanna with all the latest news from publishers.

The next issue of *JEAHIL* in August is dedicated to the 20th Anniversary of EAHIL and we hope to have a really special issue to commemorate this anniversary. There are lots of ideas already proposed but if any of the *older* members would like to contribute some memories etc., I would be happy to receive them by the 12 July which is the deadline date. If any members would like to give suggestions on how we should celebrate this event, the EAHIL Executive Board would be pleased to hear from you too.

Registration has now opened for the Krakow workshop and it promises to be, as all EAHIL conferences and workshops, an event from which everyone will learn something. Early Bird Registration is until 31 May – Don't forget!

Sally Wood-Lamont
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Contents

EDITORIAL

1. Letter from the Editor - *Sally Wood-Lamont*

NEWS FROM OUR ASSOCIATION

3. Letter from the President - *Suzanne Bakker*
5. EAHIL Strategic plan 2007–2010 - *Suzanne Bakker*
7. Report of the EAHIL Executive Board Meeting, London
- *Meile Kretaviciene*
9. Renewal of EAHIL membership for 2007 - *Arne Jakobsson*

NEWS FROM OUR COLLEAGUES

10. News from the Medical Library Association - *Becky J. Lyon*
11. Opening of the Kaunas University of Medicine Library
- *Elisabeth Husem, Arne Jakobsson, Hilde Strømme*
12. Health Technology Assessment International IRG Workshop 2007

THEME ISSUE – Clinical Information Services

13. EBM Guidelines Link Cochrane-Information into Clinical Practice
- *Leena Lodenius, Ilkka Kunnamo, Peter Nyberg*
18. Clinical Information Services in Italy: Progress and Challenges
- *Maurella Della Seta, Luisa Leone*
23. Patients' Information in Hospital - *Marie-Pierre Réthy*
26. **The EAHIL Workshop 2007, Krakow, Poland**
29. Scholarships for the Krakow Workshop

THEME ISSUE – Clinical Information Services

30. The Use of Library Services - *Tünde Gracza*
32. The Nordic Council of Ministers Supports Educational Courses for Searching Medical Information - *Velta Pozņaka*

INTERNET PAGE

34. Take a Look - *Benoit Thirion*

WEB 2.0

40. Starting a Blog - *Oliver Obst*

44. **OBITUARY: Jane Rowlands** – *Tony McSeán*

46. **PUBLICATIONS AND NEW PRODUCTS** - *Giovanna F. Miranda*

Get
connected!

The screenshot displays the Thieme Connect website. At the top, the URL 'www.thieme-connect.com' is visible. Below it, the text 'Get connected!' is prominently displayed. The main content area shows a navigation menu on the left with options like '> Home', 'Subject List', 'Alphabetical List', 'Help', 'FAQ', 'What's New?', and 'Deutsche Version'. A search bar with a 'Go!' button and an 'Advanced Search >>' link is also present. On the right, a list of journals is shown, including 'American Journal of Perinatology', 'Clinics in Colon and Rectal Surgery', 'Endoscopy', 'European Journal of Pediatric Surgery', 'Experimental and Clinical Endocrinology & Diabetes', 'Facial Plastic Surgery', 'Homoeopathic Links', 'Hormone and Metabolic Research', 'International Journal of Sports Medicine', 'Journal of Reconstructive Microsurgery', 'Minimally Invasive Neurosurgery', 'Neuropediatrics', 'Orthopedic Trauma Directions', 'Osteosynthesis and Trauma Care', 'Pharmacopsychiatry', 'Plant Biology', 'Planta Medica', 'Seminars in Hearing', 'Seminars in Interventional Radiology', 'Seminars in Liver Disease', 'Seminars in Musculoskeletal Radiology', 'Seminars in Neurology', 'Seminars in Plastic Surgery', 'Seminars in Reproductive Medicine', 'Seminars in Respiratory and Critical Care Medicine', 'Seminars in Thrombosis and Hemostasis', 'Seminars in Vascular Medicine', 'Skull Base', 'Synfacts', 'Synlett', 'Synthesis', 'The Thoracic and Cardiovascular Surgeon', and 'Zentralblatt für Neurochirurgie (published in English) and more...'. At the bottom of the screenshot, the text 'Thieme eJournals The Quality Choice in Medicine and Science' is visible, along with contact information: 'eproducts@thieme.de' and 'Tel.: +49 711 8931 407'. The Thieme Connect logo is at the bottom right.

News from our Association

Letter from the President



Dear Colleagues and Friends,

In the first quarter of 2007 the Executive Board made a good start with a business meeting in London in February. Board members were allocated different tasks. In this issue there is a report of this meeting by Meile Kretaviciene. The Board discussed the Strategic Plan for EAHIL 2007-2010, which you will find in this issue as well.

This first quarter has been a busy time for our colleagues in the Local Organizing Committee (LOC) and the International Programme Committee (IPC) of the Krakow workshop in September. The IPC meeting took place early March. I was fortunate to be able to attend this meeting. First of all Barbara Niedzwiedska, Chair of the IPC, prepared the meeting in all details and thanks to her good work and the quality of the submitted papers, we were able to compose an interesting programme on different aspects of education for medical & health information professionals. Anna Uryga (chair of the LOC) informed us about the facilities of the venue, the plans for the social events and the economics of this meeting. All details can be found on the EAHIL website (http://www.eahil.net/conferences_eahil.htm). Do register in time (before the end of May) to benefit from the early bird registration fee.

The Council meeting in Krakow will be focused on career paths for medical & health information specialists. There will be ample time to discuss this issue in small groups. This means that only a very limited or hardly any time will be spent on the business agenda. Most of EAHIL business matters that needs to be presented and discussed can be dealt with in the General Assembly (GA). Formal decisions will be postponed to the GA next year anyway. This does not mean that the Council and GA meetings in Krakow aren't important, on the contrary! It will be *the* opportunity to discuss, make plans and agree on our analysis of our changing professional environment and appropriate action to take.

I hope you all made a good start in this first quarter of 2007. Do think of EAHIL-infrastructure as an opportunity to communicate with your colleagues, nationally *and* internationally. Thanks to the creative thinking of our colleagues we have a virtual but very vivid and alive association. The website, the web membership database, the discussion lists, the weblog, the Journal... all created for you. Enjoy the benefits of being part of EAHIL family!

Suzanne Bakker
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News from our Association

EAHIL Strategic plan 2007–2010

EAHIL Strategic plan 2007–2010

European Medical and Health Information Professionals can make a difference

In 1996 the strategic plan towards 2000 written by Elisabeth Husem, at that time President, was published in the *Newsletter* (n. 36, p. 6). The strategic plan for 2007-2010 starts with the same vision and main goals, annotated with the goals reached since then.

Aims:

Conferences and workshops We have achieved the goal of having an annual meeting (conference or workshop) and the near future looks good (an offer for 2010 has been received). Never change a winning formula, so EAHIL will continue the present procedures of invitation for bids to organize future conferences. In order to support organizers of future events, guidelines on how to organize an EAHIL event (conference or workshop) will be produced by the Board in 2007.

Efficient network:

The *EAHIL Newsletter* has evolved towards the *JEAHIL* and made a start with peer reviewing. These changes reflect the goal that our journal should develop towards being a counterpart of *HILJ* and *JMLA*. For news items and rapid communication new technologies will be used more and more. Back issues of the newsletter will be scanned and archived in PDF format on the EAHIL website to complete the more recent issues already archived in PDF.

New technology

Discussion lists, the Website and Membership web-database are running well and are in capable hands.

Electronic election procedure started this year and will be continued for the coming years, making organizing an election less cumbersome and a lot cheaper than the postal ballots.

An electronic system for abstract submission and evaluation by programme committees for future conferences and workshops will be developed as an EAHIL proprietary and should be in use by summer 2007 for the conference in Helsinki in 2008.

Videotaping CEC's and/or empowerment sessions of workshops and conferences could be a future option, but practical and copyright issues should be investigated further.

Education

The provision of help for continuing education courses on national and local levels by providing details of professional courses to be given on request or by establishing a database of course supervisors and teachers, has not been materialized to the extent we had in mind 10 years ago. It might well be that the language is a barrier. The programmes of CEC's of EAHIL conferences and workshops have been successful and should be continued. The themes and subject for CEC's should reflect the development of the profession and possible career opportunities.

Cooperative agreements between European libraries

EAHIL scholarships (for attending EAHIL meetings) are established and we should take care to develop this program further and maybe widen its scope. Minor financial incentives support help to intensify contacts over all Europe by facilitating attendance of workshops and courses.

Bilateral agreements could be an outcome of EAHIL activities, but must be seen as a very positive side-effect of EAHIL contacts

Alliances with national medical and health associations are most important to advocate for access to health information; therefore EAHIL should be more active in contacting national associations. National medical library associations

News from our Association

Suzanne Bakker

are seen as having an important role and the President and/or Board members will actively work on establishing contacts.

European representation

EAHIL has established formalised presentation and cooperation with the UK Health Libraries Group of CILIP by a representative in the editorial advisory board of *HILJ* and reduced fees for *HILJ* subscriptions; and with MLA by representatives and membership registrations and reduced fees on publications. EAHIL will seek further contacts with LIBER. Contacts and active cooperation exist with IFLA through the Health and Biosciences Libraries Section and ICML. Dialogs should be sought with publishers (e.g. UKSG and ALSP) and library schools and LIS departments of universities to advocate on medical and health information issues affecting our profession.

Membership

Recruiting more members is less urgent now that we have reached over 1100 members and free membership and a web-database are installed. Priority will be given now to the benefits of EAHIL membership, e.g. accreditation and to open invitations to more subject oriented SIG's and/or task forces.

Coalitions and lobbying

EAHIL Board and Council should discuss and explore opportunities to network with national medical organizations, medical associations, patient associations, publishers and scientific associations.

Opinions, evaluations and trend watching

Future events and theme issues of the journal provide a discussion forum for analyzing changes in our professional environment and formulating opinions to be referred to and used when representing EAHIL in collaborations, professional discussions and when seeking coalitions or in advocacies.

Standards for medical (nursing, hospital, teaching) libraries & library services will be of major importance in the near future, e.g.

- Collecting and comparing national standards (if available);
- Quality issues in clinical library & information services;
- Benefits for EAHIL members;
- Accreditation / registration;
- Reduction on publications, subscriptions and memberships;
- Scholarships;
- Awards;
- Network of knowledge & expertise;
- Representation (being a representative and being represented).

This *10-point Strategic Plan* was discussed by the Board in the February 2007 meeting in London and will be open for further discussion at the General Assembly in Krakow and Helsinki. Strategic plans form a framework for activities and are by no means static. The EAHIL Council meeting in Krakow is planned to be more like a focus group than a business meeting where the focus will be set on career paths. The outcome of this Council meeting will be reported in the General Assembly in Krakow. By relying on our, nowadays, very strong EAHIL network we can make further steps and extend our professional contacts as indicated in this plan, so that European medical and health information professionals will make a difference!

Suzanne Bakker
EAHIL President
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News from our Association

Report on the EAHIL Board Meeting



Report on the Meeting of the EAHIL Board in London, 16th February, 2007

The EAHIL new Executive Board's meeting took place in London at the Elsevier Office on 16th February. President

Suzanne Bakker greeted the new Board: Helena Bouzkova, Manuela Colombi, Arne Jakobsson, Meile Kretaviciene, Linda Lisgarten, Tony McSeán, Pirjo Rajakiili, Benoit Thirion, Enrica Veronesi, Sally Wood-Lamont.

After a brief discussion the Board allocated the following duties to the Board members: Suzanne Bakker, President; Manuela Colombi, Treasurer; Benoit Thirion, First Vice-President; Tony McSeán, Secretary; Arne Jakobsson, Past President and Membership Database Administrator; Meile Kretaviciene, Communications Officer. Meile will also be responsible for preparing the Report of the Board Meeting to the *JEAHIL*.

The minutes of the meeting held on 11th September 2006 in Cluj-Napoca were signed officially by the President for the Archives. Three matters not otherwise covered by the agenda arose: the amendment and translation of the Statutes is still in hand. It was noted that full details of the amended Statutes as officially approved by the General Assembly in Cluj had been published in *JEAHIL*; sending out messages to members who have opted for only an e-copy of the Journal; the possibility to register EAHIL's ownership of the eahil.eu domain.

Concerning the President's report, Arne Jakobsson previously circulated by e-mail his report to the Board. It was accepted with some detailed additions and is now on the web site.

As to the Treasurer's report which covers the first year of operating without subscription income, the final result indicates a surplus in the year of €1,600, as confirmed by the auditor's report. The report was accepted with thanks by the Board.

The Supervisor of the Secretariat, Suzanne Bakker reported that in 2006 the trend of a reduction in the secretariat's workload continued, reinforced in part by staffing problems at NVB. Suzanne recommended considering moving the Secretariat from NVB to the accountants' office. The remaining work now consists of small-scale financial administration, and the accountants are perfectly able to do this. It would be more expensive per hour than NVB, but less hours than before would be required, so no additional expenditure would be entailed. In the future, e-mail enquiries could be routed to the Supervisor rather than to the Secretariat, thus further reducing the outlay, and the Board Secretary and the Communications Officer added to the enquiry list.

Regarding the *Journal of the EAHIL*, Sally Wood-Lamont reported that operating profit on the *JEAHIL* is expected to continue in 2007. The print run is steady at 450 copies and submission of articles is still increasing. There was a vacancy on the Editorial Board and Linda Lisgarten's offer to join the Board was accepted. The President congratulated Sally Wood-Lamont on the continuing excellence and financial success of the journal.

With regard to the EAHIL membership database, Arne Jakobsson reported that the current membership figure is 1,136, of whom 930 had already renewed their membership for 2007. Members, who have not renewed their membership by mid-year, will have their

News from our Association

Meile Kretaviciene

membership cancelled and their record deleted from the database. Now it is easy to print membership cards from the membership database and members will need to show this card in order to receive a voting card at the General Assembly at the Helsinki Conference. The report was accepted with thanks by the Board.

The Council elections: the next Council elections will be held in November 2008. In the future there will be no subsidiary elections to fill vacancies and elections where national memberships have passed a membership threshold.

After a substantial discussion, the Board decided not to intervene in the democratic process in order to ensure both Flemish and French speaking Belgian representation in the Council. As for the EAHIL scholarships, the Board agreed to allocate four scholarships for workshops and six for conferences to persons working as health information professionals. An additional scholarship will be available for Krakow, funded by PHING.

Regarding the web page, the Board decided that the European Medical Librarians' Blog at <http://euromedlib.blogspot.com> cannot be officially sponsored by EAHIL for legal reasons, but the Board encourage authors to continue contributing to the blog.

The Board decided to move all the material on to the main server and add to it the conference and workshop proceedings from Palermo, Santander, Oslo, Cologne, Tartu, and also to archive the *EAHIL Newsletter*.

Statutes: the Board decided that the Rules of Procedure would be presented to the Krakow General Assembly for approval.

Concerning professional accreditation and certification matters, Tony McSeán tabled a draft set of proposals for a certification system, and asked questions on the value of the scheme. The Board decided to appoint a team to produce a draft plan for approval at the Krakow General Assembly and to draw up an implementation timetable.

The Board approved the WHO Group's proposed change of the name to the Public Health Group.

The Board decided to issue a special August edition of the *JEAHIL* to mark the Association's 20th anniversary and to produce suitable souvenirs.

Future events: **The EAHIL workshop in Krakow, 12-15 September, 2007.** Both the Organizing Committee and IPC continue to work on the Workshop. Papers and posters presented at the Workshop relate to its overall theme *The Education, Training and Continuing Development of the Health Library & Information Workforce*. The organizers are offering 12 CEC.

The EAHIL Conference in Helsinki, 23-26 June, 2008. Pirjo Rajakiili reported that the Conference theme has been set as *Towards a new information space*. The Programme Committee has been at work since the Cluj workshop and it will issue the first *Call for Papers* before Krakow. The Finlandia Hall has been booked as the conference and exhibition venue and conference organisers have made a contract. The web pages will be available soon.

The venue for the 2010 conference will be announced at the Krakow workshop, and proposals will be invited for bids for 2011 and 2012.

Meile Kretaviciene
Communications Officer
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News from our Association

Renewal of EAHIL Membership for 2007



Renewal of EAHIL Membership for 2007

Dear EAHIL member

EAHIL membership is free of charge for European EAHIL members, but all members must renew their membership annually. Most members have renewed their membership, but there are still some members that have not renewed their membership for 2007. The reason is often that the e-mail address in the membership database is incorrect so the renewal e-mail has not reached the EAHIL member.

Please note that even paying members from outside Europe, should login to the membership database and renew their membership through the database. The reason for this is that we want you to check and update your address, e-mail address and so on.

Instructions:

1. Go to EAHIL web <http://www.eahil.net/>
2. Click on Membership database
3. Login with your userid and password.
4. When you have logged in to the database you must check/update all information. The information in the database is used for mailing of the *Journal of EAHIL* and for communicating with all members via e-mail, so it is vital that both your mail address and your e-mail address are up to date.
5. Click on Update and renew membership if you want to continue to be EAHIL member.
6. Click on Cancel membership if you want to cancel your membership.

Contact Arne Jakobsson if you previously have not received a renewal e-mail and do not have your user-ID and password to the membership database. All members that do not renew their membership before 1st of June 2007 will automatically be cancelled.

Arne Jakobsson
EAHIL Past President
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News from our Colleagues

Becky J. Lyon



News from the Medical Library Association

One of MLA's most esteemed and accomplished members, Estelle Brodman, died on March 1, 2007 at the age of 92. Dr. Brodman was a visionary, scholar, researcher and teacher who had a major impact on medical librarianship. She made many contributions to MLA in serving on the Board of Directors as President from 1964-65, and as editor of the *Bulletin of the Medical Library Association* for ten years. She received the Murray Gottlieb Prize, delivered the 1971 Janet Doe Lecture, and was awarded the Marcia C. Noyes Award, MLA's highest professional honor.

“Library’s Value” DVDs Now Available

MLA's spring Webcast, “Survival of the Fittest: Strategies to Prove Your Library’s Value,” was a big success. The program can now be purchased through the MLANET Online Store. Key areas addressed in the program are: the library’s value in the larger organization; tools that can be used to assess library users and stakeholders; and promotion strategies and programs.

Free Tutorial Introduces Users to Finding Online Health Information

“Medical Information on the Internet: Guide for Health Reporters and Consumers” is a Web-based tutorial designed by MLA members to lead health reporters and consumers to quality health care information on the Internet. Use this free tutorial to introduce others to the skills involved in finding quality information for improved health.

July International Scholarly Publishing Conference

The first international “Public Knowledge Project (PKP) Scholarly Publishing Conference” will be held on July 11-13 in Vancouver, BC. The Scholarly Publishing and Academic Resources Coalition (SPARC) is a sponsor of this event. Registration is limited to 200 people and is filling up fast. The conference will provide opportunities for those involved in the organization, promotion, and study of scholarly communication to share and discuss innovative work in scholarly publishing, with a focus on the contribution that open source publishing technologies can make to improving access to research and scholarship on a global and public scale. More information and online registration is available on the conference Website at <http://ocs.sfu.ca/pkp2007/>.

Becky J. Lyon
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News from our Colleagues

Opening of the Kaunas University of Medicine Library

Opening of the Kaunas University of Medicine Library

On the 6th of March 2007 the Kaunas University of Medicine in Lithuania opened its magnificent new library. This library is a modern 4-storey building incorporating all the newest technology. In Kaunas they have succeeded in building a library that will be an inspiration to many countries. Even in this electronic age it is important not to underestimate the role of the physical library as a vital learning resource arena. In Kaunas they have understood this and acted on this knowledge.

The Director of the library is Meile Kretaviciene. Meile has been an EAHIL Board member since 1998 and is on the present Board as EAHIL's Communications Officer.

At the opening ceremony, Arne Jakobsson, EAHIL's Past-President, represented EAHIL and brought greetings from the Association. Elisabeth Husem and Hilde Strømme brought greetings from the Baltic Sea Region Cooperation, a committee within the Norwegian Library Association – Section for Medicine and Health (SMH Baltic).

The Nordic/Baltic health libraries programme was initiated in 1994 when Nordic and Baltic colleagues met in Oslo in connection with the EAHIL conference. Within the framework of this Nordic/Baltic partnership programme, Norway and Lithuania have established a special bilateral programme. Meile has been the main partner since then and many activities have taken place, to our mutual benefit and pleasure, a true transfer of knowledge!



Since 2003 Meile has been the leader of the new library building project, responsible for coordinating with authorities and architects, implementing new technology, and all the rest! She has been working very hard all this time, with good support from her library staff, to establish a modern library for the benefit of medicine and health care in Lithuania, and surely also outside its borders!

We recommend that you all visit Kaunas University of Medicine Library and let yourselves be inspired.

**Elisabeth Husem,
Arne Jakobsson,
Hilde Strømme**

News from our Colleagues

Health Technology Assessment International 2007

HTA for Evidence - Based Public Health, 4th Annual Meeting, Barcelona 16-22 June

HTAi IRG Workshop: *Pushing the Frontiers of HTA Information Management*



Make the IRG pre-conference workshop part of your annual HTAi (<http://www.htai.org>) meeting plans! Join us in Barcelona on Sunday June 17th for a full day

of training and lively discussions. Our workshop includes a mixture of presentations and interactive sessions highlighting important and emerging developments in HTA information management.

Julie Glanville, IS Manager and Associate Director at the Centre for Reviews and Dissemination in York, will outline recent research into search filters to identify diagnostic tests and assessments of which databases and other resources should be searched for diagnostic test studies.

Greg Bak, an information specialist from the Canadian Agency for Drugs and Technologies in Health, will discuss a CADTH-adapted critical appraisal instrument that can be used to rank and assess the quality of methodological search filters. His presentation will provide participants with the skills needed to make informed decisions about when and which methodological search filters to use.

Sari Ormstad, a research librarian at the Norwegian Knowledge Centre for the Health

Services, Oslo, will present on a new database that offers local decision-makers and health personnel an overview of all current international assessments of new health technologies and summarises those that are most relevant for them.

Miquel Mayer, Director of Web Mèdica Acreditada, an international accreditation program of medical websites, will discuss the quality and use of health-related websites, different strategies to select and improve their quality, and finally how metadata and semantic web technologies could help users find the best health information.

Elaine Alligood, an information specialist from Veterans Affairs Technology Assessment Program, will update participants on current search engines and how they can be used in HTA searches to complement traditional database searching.

Andrew Booth, Director of Information Resources at the School of Health & Related Research (SchARR), and **Amanda Burls**, Senior Clinical Lecturer and Director of West Midlands Health Technology Assessment Collaboration, deliver a half-day bilingual (English and Spanish) critical appraisal workshop in which they provide a "tapas" of critical appraisal skills and techniques. The workshop will demonstrate that skills in critical appraisal can be modelled and facilitated by library, information and other health staff working locally.

Details regarding conference registration are available at <http://www.htai.org/barcelona-2007>. For more information, contact **Becky Skidmore**, IRG Chair, bskidmore@sogc.com or **Malene Fabricius Jensen**, IRG Chair-Elect, mfj@sst.dk.

Clinical Information Services

EBM Guidelines Link Cochrane-Information into Clinical Practice



EBM Guidelines Link Cochrane-Information into Clinical Practice

Clinical guidelines are published in order to bridge the gap between research evidence and practice. In the ideal case a guideline standardizes treatment practices, reduces regional differences, improves the quality of care and promotes cost-effectiveness. The Cochrane Library has become one of the most important sources of evidence. However, Cochrane reviews are often long and key messages may be difficult to find for doctors working in primary care. EBM Guidelines has tried to solve this problem by producing very short evidence summaries and linking them to a comprehensive set of concise guidelines. The objective of the EBM Guidelines is to get the right evidence-based information by one search term within one minute



Introduction

EBM Guidelines (EBMG) is a unique, concise and easy-to-use collection of clinical guidelines for primary care and ambulatory care linked to the best available evidence. Continuously updated EBMG follows the latest developments in clinical medicine and brings evidence to practice.



The idea of EBM Guidelines emerged at the end of 1980s from the obvious need of health care professionals to find reliable guidance for clinical decision-making and to have an easy access to this information. The editorial process was set up in 1988 with the help of the Finnish Medical Society Duodecim, the scientific society of Finnish physicians. The first electronic version was published in 1989 and since then the guidelines have been tested in daily clinical work by thousands of doctors. EBMG is the result of almost 20 years systematic development.

Even if the editorial work of EBMG is done in Finland the database is an international product and suitable for world-wide use as it is based on international research evidence. There is an editorial team of experienced physicians who have been trained in critical appraisal of the literature, and most of them also have a clinical research background. The team meets 1-2 times a month and works in cooperation with about 20 specialist coordinators and over 300 authors. The articles in EBMG are circulated to a group of external referees (many of whom are coordinators of Cochrane reviewer groups) from both English speaking and other countries.

The Evidence Base in EBMG

The main sources of evidence for the guidelines are Cochrane reviews and DARE abstracts, that are systematically evaluated by the editorial team as they are published or updated. clinical evidence, HTA database and some other EBM sources are reviewed. In addition the editors continuously follow the contents of the most important English language medical journals. Whenever relevant topics to EBM Guidelines are found they are abstracted as evidence summaries into EBMG.

Clinical Information Services

Leena Lodenius, Ilkka Kunnamo, Peter Nyberg

There are many products that provide evidence to be used as the basis for clinical decision-making but there is no other comprehensive collection of guidelines where the evidence is described and coded explicitly, with direct links to full text Cochrane reviews

Basic idea and scope of contents

EBMG includes for the time being almost 1,000 concise primary care practice guidelines. The unique feature of the EBMG is that each guideline contains concise summaries of scientific evidence underlying the given recommendations linked to the guidelines. A link is made from the evidence summary to the Cochrane review, and all Cochrane Systematic Reviews cited within EBM Guidelines are provided in full text for the subscribers. Thus the information retriever can move from the guidelines to the evidence summaries and from the summaries to the Cochrane reviews. There are now almost 3000 evidence summaries.

A specific feature of the evidence summaries are the evidence codes: the strength of evidence is graded from A to D according to the principles of the GRADE Working Group (www.gradeworkinggroup.org), with A presenting the highest quality research evidence and D the lowest (see figure 1). Thus the clinicians can judge how well-founded the recommendations are.

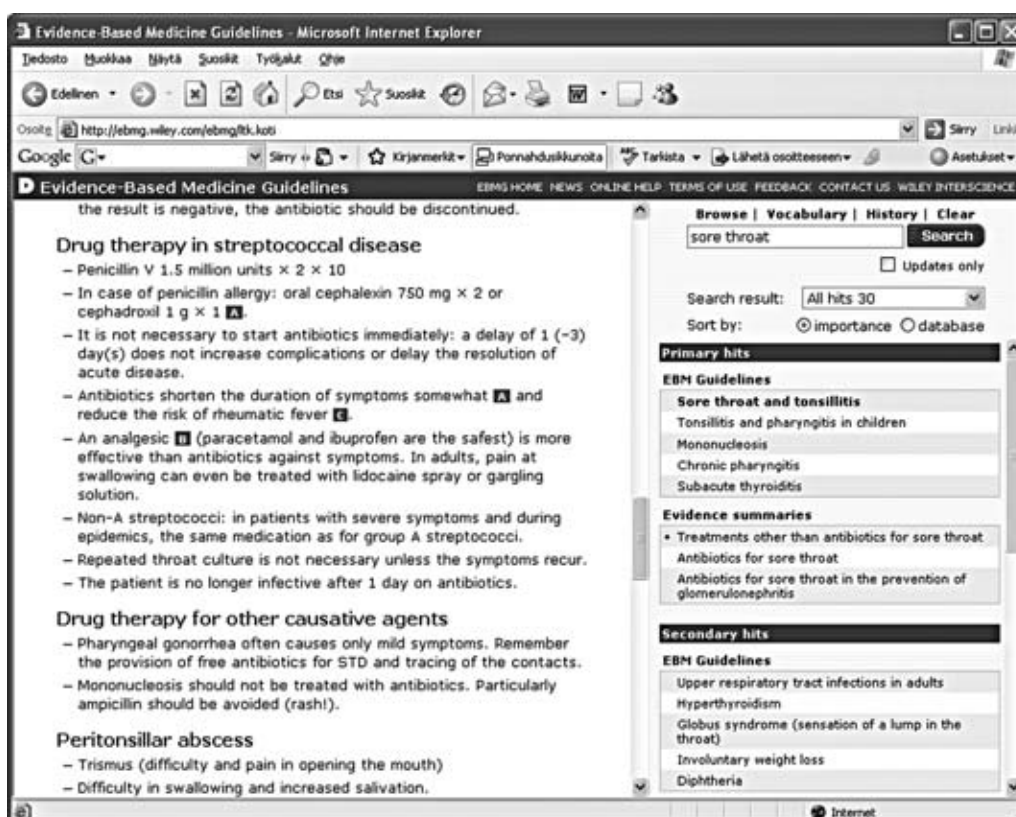


Figure 1: A search of guidelines about sore throat. Evidence codes can be seen after treatment recommendations. By clicking the code the underlying evidence summary will be seen (an evidence summary in figure 2).

Clinical Information Services

EBM Guidelines Link Cochrane-Information into Clinical Practice

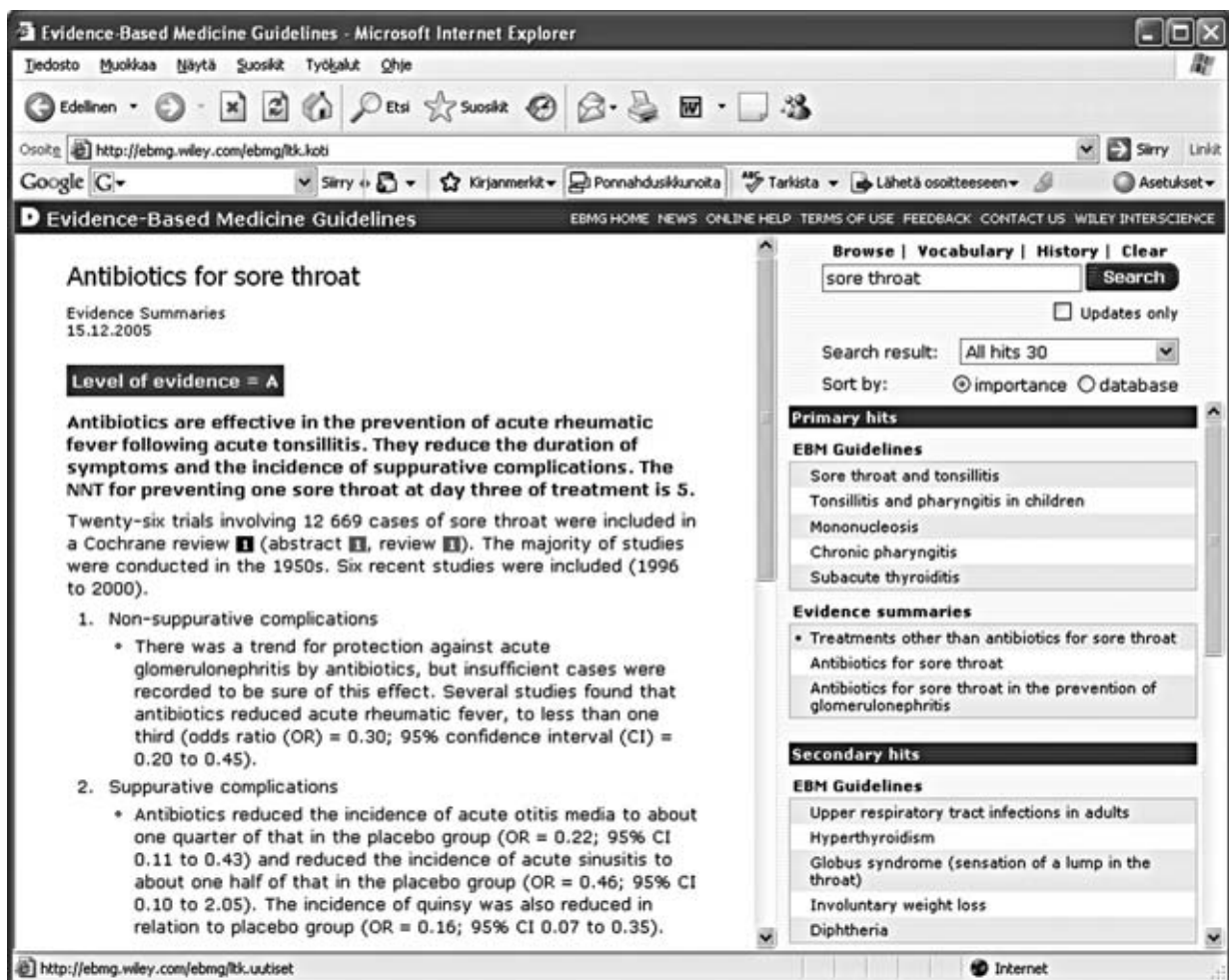


Figure 2: An evidence summary underlying the treatment recommendation. There is a link to the original full-text Cochrane review. Thus the information retriever can move from the guidelines to the evidence summaries and from the summaries to the Cochrane reviews.

EBMG offers a vast library of high-quality photographs and images of all common and many rare dermatological conditions, electrocardiograms and eye pictures. Besides interesting audio samples are included (e.g. heart auscultation, lung auscultation).

Originally EBMG was planned for primary health care and family physicians. However, the scope of EBMG is wider than that of most references of family practice, e.g. small surgical procedures, treatment of fractures, clinical exercise test for diagnosing coronary heart disease, endoscopies, insertion of IUDs are all covered. More than 95% of all first-line encounters with a physician can be treated on the basis of the information found in EBMG. EBMG also includes information of investigations and procedures performed only in secondary care (e.g. neuroradiological imaging). This information is valuable for general practitioners as they need to know what are the indications for specialist investigations to be able to refer the right patients to the specialists.

Clinical Information Services

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Because of its wide scope, EBMG has become very popular among young physicians during their postgraduate specialist training, irrespective of speciality. Also experienced specialists use EBMG when encountering patients who have problems outside their speciality.

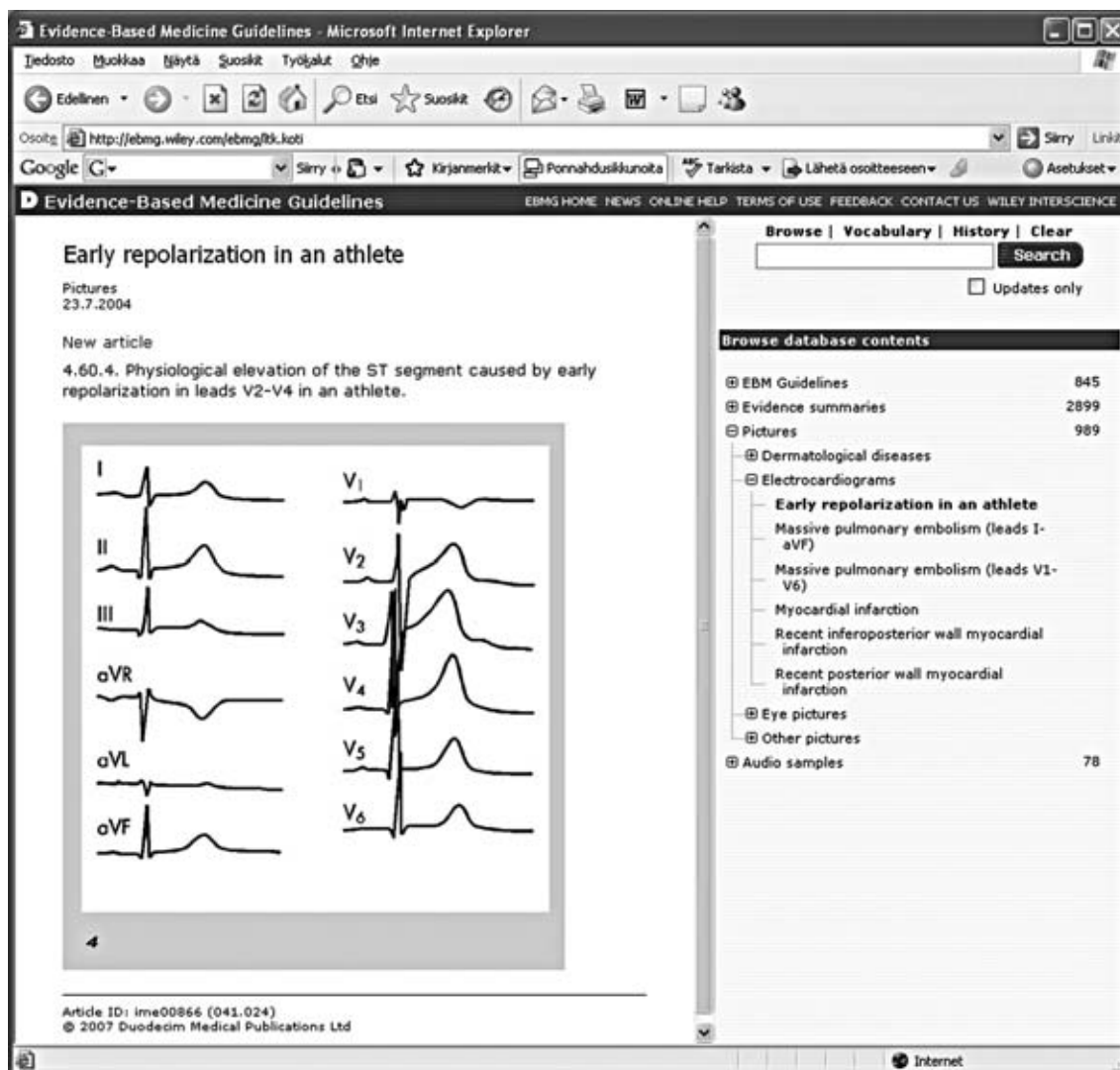


Figure 3. A view of database-contents in EBM Guidelines

Information retrieval in EBM Guidelines

Information retrieval from EBMG has been made as easy as possible to reach the objective: to get the right evidence-based information by one search term within one minute. The indexing of the material is not completely based on MeSH – the choice has been made on purpose: doctors do not have a deep knowledge of MeSH vocabulary. However, MeSH-terms have been used whenever possible and

Clinical Information Services

EBM Guidelines Link Cochrane-Information into Clinical Practice

reasonable. The articles have been indexed simply by using words that describe their content. Also author and speciality are used in indexing. One can find the terms used in indexing by entering at least three letters in the search field and clicking the "Vocabulary" link above it. Many terms are added and included in EBMG by monitoring the log file recordings of the terms that are used in searching the guidelines, evidence summaries and Cochrane reviews. The logfile will help to build an appropriate vocabulary for the doctors using EBMG. There are plans to index the evidence summaries also on the basis of patient groups and diagnoses, interventions, and outcomes, so that each of these could be searched separately or in combinations. EBMG will also be integrated with electronic medical records by indexing the contents with terms coded in the records (such as ICD-10/9CM codes and ICPC-2 codes).

The search is directed to all databases simultaneously: guidelines, evidence summaries, pictures and audio samples. The search can also be focused only to the evidence summaries. The hits are classified either as primary or secondary hits on the basis of indexing by hand. Text word hits are shown at the bottom of the search result. Anonymous log file recordings (arising from monitoring EBMG use) of used search terms and read guidelines are utilised for continuous improvement of the contents to meet the needs of the users.

At present, all articles in EBMG are circulated to the original authors and external referees for updating every two years. In addition, the editorial team of EBMG updates new information whenever such information becomes available from published systematic reviews or research reports.

Use of EBM Guidelines

EBMG is the key source of practical information for primary care and a powerful tool reflecting real clinical experience. However, because of its wide clinical scope EBMG is an excellent database in medical education and it is now being used in several different countries.

EBM Guidelines has been translated into German, Russian, Estonian and Hungarian languages. The German language version is available on the web. They can be subscribed from Wiley Interscience and the Internet address is <http://ebmg.wiley.com>

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Clinical Information Services

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Clinical Information Services in Italy: Progress and Challenges



Introduction

The possibility of sharing clinical data and making it available on the Net is an important tool to reach high-quality patient care services. Health care is increasingly being influenced by information and communication technology and great profits are being gained from its technological advancements. Reynold Haux, in his recent exhaustive review article *Health information systems – past, present, future*¹ considers the following as the main lines of development in this field: a) the shift from paper-based to computer-based processing and storage, and the parallel increase of data to be processed and stored; b) the shift from local to global information system architecture; c) the shift from health care professionals to patients and health consumers; d) the use of information services data not only for patient care but also for research and health care planning; e) the inclusion of new types of data, such as images, in particular from radiology; f) the inclusion of new technologies, such as wearable devices used to continuously monitor the health status of patients. Furthermore, the original and still cardinal aim of clinical information systems, i.e. to contribute to an efficient health care system allowing access to relevant data for diagnostic and therapeutic procedures, has evolved more and more towards a networked patient-centered approach.

Some European initiatives

International and European organizations have been paying due attention to the relevance of information systems. The example of CISID (Centralized Information System for Infectious Diseases)² – produced by the WHO Regional Office for Europe – deserves a mention, as it uses advanced technology to collect, analyse and present data on infectious diseases in the WHO European Region. CIDIS allows sharing of data at the sub-national level to identify specific geographic areas of risk, and risk groups by age and gender; it also aims at rapidly disseminating critical timely information about infectious diseases to public health professionals, through an early warning system.

The European Commission has been funding a series of initiatives for clinical information systems development, encouraging broader collaboration between the various European health institutional bodies. The e-health action plan – *Making healthcare better for European citizens*³ – launched in 2004, has as its specific goal the interoperability of health information systems. Facing a rising demand for health and social services, and the increasing expectations of citizens who want the best care available and a reduction in inequalities in access to health care, e-Health systems and resources are key enabling tools for empowering health consumers, assisting health professionals, and supporting health authorities and health managers. The integration of heterogeneous systems will allow secure and fast access to comparable public health data and to patient information located in different places; the action plan places special emphasis on the importance of user-friendliness of e-Health systems and services, which should allow fast-connection, connectivity and high-speed in getting reliable and high-quality results.

The High Level Group on Health Services on Medical Care, composed by experts from all the

Clinical Information Services

Clinical Information Services in Italy: Progress and Challenges

Members States and structured in six working groups, was established in July 2004. One of the working areas is devoted to *Information and e-health* with the aim “to examine the feasibility of introducing a minimum data set for patients to be available throughout the Union”⁴.

In the framework of the e-Ten programme of the European Commission, the EURO CET project, a European Registry for Organs, Tissues and Cells⁵ was launched in 2005, with twelve participating Member States. The aim of EURO CET is to collect and publish official and updated figures on organs, tissues and cells donation and transplantation activities, making them available to professional, patients and general public. Several European health institutions have already implemented health information networks for clinical data exchange, among them: Sweden with the Sjunet project (the Swedish Healthcare Network)⁶, Greece with HYGEIANET⁷ (the Regional Health Information Network of Crete), and Finland with UUMA (The Uusimaa Regional Information System)⁸.

An overview of the Italian situation

An editorial published at the beginning of 2004 by two Italian scientists from the well-known Mario Negri Institute for Pharmacological Research⁹ stated that “any new knowledge obtained from clinical research cannot easily be transferred to clinical practice for several reasons, including publication bias, lack of medical knowledge databases (or lack of their completeness), and lack of integration among these databases”. This article cited the US National Institutes of Health databases as a best-practice example of integration, and concluded that a similar model should be exported to Italy. At a distance of almost three years it could be affirmed that the situation regarding the integration of services and databases has not changed so much in our country, although we can see much progress in the implementation

of resources, in their availability to the general public and in the user-friendliness of interfaces.

The first example we are going to analyze is the *Osservatorio sulla sperimentazione clinica* (National Monitoring Centre for Clinical Trials), developed by the Italian Ministry of Health and the Italian Medicines Agency¹⁰ to guarantee the epidemiological surveillance of clinical trials on drugs conducted in Italy. This project started in 1998, has been on the Web since the year 2000, and has been accessible to the general public since 2005, with a selection of Phase II, III and IV trials, since May 1st, 2004 onwards. The informative support of the *Osservatorio* consists of three on-line registers which form the database of clinical trials: a Register of the local Ethic Committees; a Register of private clinical sites; a Register of clinical trials. Clinical trials can be searched by therapeutic area (e.g. Cardiology, Haematology, Gynaecology), by disease (e.g. in the Neurology area: multiple sclerosis, dementia, sleep disorders etc.) or by free-word full-text searching. Another search approach is by geographical regions: clicking on the map of Italy (see Figure 1) access is provided to a list of trials present in the selected area, with an additional subdivision by provinces. For each trial a brief summary is provided, together with the list of participating centres, sponsors, and status (open, closed, under approval). In the period January 1st, 2000 - December 31st, 2005 a total of 3,527 trials¹¹ were registered in the Italian database: they are all linked to the central European data bank EudraCT¹², a database of all clinical trials commencing in the Community from May 1st, 2004 onwards, established in accordance with Directive 2001/20/EC.

The Italian National Guidelines Programme (*Programma Nazionale Linee Guida – PNLG*)¹³ is a website developed by the Italian National Institute of Health and the Agency for Regional Health Services. It gives access at present (April 2007) to

Clinical Information Services

Maurella Della Seta, Luisa Leone



Figure 1 - Clinical trials in Italy (April 2007)

the updated and revised full-text of eighteen clinical practice guidelines on different topics, ranging from herniated disk to diagnostic imaging. Each guideline examines possible therapeutic alternatives and relevant success probabilities, in order to orientate doctors, patients and health managers towards the best possible decisions. Guideline searching is only allowed by title, through a pull-down menu. The lack of a structured database could hinder, in the future, the usability of this website, especially when further guidelines will be implemented and more data added. A valuable tool, accessible from the home page of this website, is the international guideline comparison database, although, at present, it only offers limited searching features on ten selected health topics.

Among other Italian initiatives in the field of clinical information services, we would like to remember the establishment of an Emergency Call Centre, by the Centre for Disease Control and Prevention of the Ministry of Health¹⁴. This Call Centre provides information to health personnel and to citizens about possible health emergencies

such as SARS, influenza outbreaks, bioterrorism, and risk from heat waves. The call centre is named Carlo Urbani, after an Italian doctor who died from SARS. He was one of the first scientists to study this viral disease. It offers telephonic counselling, and it will be connected to the European and the US CDCs.

Last but not least, the Information System on Organ Transplantation¹⁵ (*Sistema Informativo Trapianti*). This system has been developed to register citizens' living wills on organ and tissue donation, and to collect all data on organ withdrawal and transplantation in Italy. It also provides information on waiting lists and facilitates information sharing at a regional, national and international level. It offers two interactive online services, conceived for a) finding the nearest health structure authorized to register citizens' living wills on organ or tissue donation; b) searching the nearest authorized transplantation centre.

Conclusions

The importance of undertaking measures for the full development of clinical information services is nowadays well understood by health institutions and the ICT industry in Italy. There is a creative ferment in this area that leads to the flourishing of a number of projects, which, under the heading of telemedicine, sweep from electronic patient records to clinical data networks. These projects are often established on a local or regional basis, in the absence of a central coordinating authority.

Some encouraging signals toward the coordination of projects for a common goal come from the development of websites such as e-Oncology¹⁶, which has recently been re-designed. Produced by Alliance against Cancer, the Italian Association of National Cancer Centres, it has the declared task of promoting an active collaboration among Italian Cancer Institutes on common research projects through the exchange of information, knowledge,

Clinical Information Services

Clinical Information Services in Italy: Progress and Challenges

data, scientific results and human resources. The aim is to develop and fill the gaps of Italian cancer research and promote the transfer of its results into clinical practice (see Figure 2), also through the creation of clinical networks for data sharing (Teseo - Tele-pathology for online histological imaging; the Rare Tumours Network).

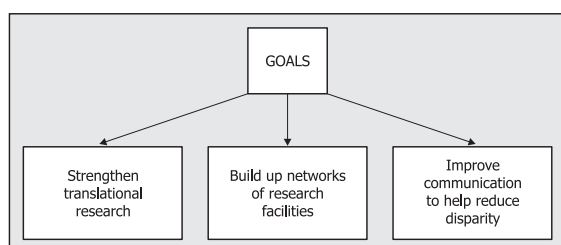


Figure 2 - The Italian Association of National Cancer Centres *Alliance against Cancer* goals

The long term goal of the Alliance is to assure equal assistance to cancer patients across Italy and in all institutes and hospitals and to stop the migration in different regions of the country.

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12. <http://eudract.emea.eu.int>
13. www.pnlg.it
14. <http://www.ccm.ministerosalute.it/>
15. <http://www.trapianti.ministerosalute.it/>
16. <http://www.e-oncology.it/indexeng.asp>

In this still fragmented panorama we can only express the wish for a better synergy between the different agents (national agencies, hospitals, research institutes, regional and local health authorities). This necessary synergy could lead to the creation of a national clinical information portal, to be integrated with other European similar initiatives. Health librarians could play a key role in this direction, using their skills and coordinating their efforts for a full standard application in database design, better website usability and accessibility, full understanding of the need for system interoperability, and in helping users finding relevant resources.

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Clinical Information Services

Marie-Pierre Réthy



Patients' Information in Hospital

Abstract

Confronting the ease with which information is provided by the Internet nowadays, a hospital librarian has to

deal, not only with new working methods but also with new users. As patients want to know everything about their condition, the librarian becomes the physician's partner in providing information to the patient.

Keywords: hospital, information, patient, physician, librarian.

Introduction

In hospital, the patient constantly seeks and requests information. The Internet boom in the 1990s has modified the librarian's working methods not only in information research, but also in its transmission. Thus information comes from very various sources, mixing "reality, possibility, illusion, and true and false fears"¹. It is difficult to find one's bearings. And it is much more difficult when one has to handle medical information, when users are physicians, who use this information and transmit it to patients, who in turn may become users.

Information participants in hospital

During their stay in hospital, patients and relatives face various sources of information:

- at the reception desk, the patient is informed of his rights and duties: he is guided through the maze of administrative procedures and addressed to the appropriate department;
- at the secretariat, he is informed about which documents to bring for consultation and/or hospitalisation;

- the health staff will try and make his stay more pleasant by giving him "well-being" information;
- the medical staff will inform him of his health condition and what he can do to improve it so as to draw him closer to recovery;
- the documentation staff may also be called on by a patient who wishes to have further information additional to that already given by the physician.

Different types of information sought by the patient in hospital

- *Guidance information:* the patient turns up and does not know who to speak to, where to go etc;
- *Quality information:* the anxious patient wishes to have other patients' view on healthcare quality, the health staff's expertise and the accessibility of the physician or surgeon to have his questions answered;
- *Information on his condition:* depending on his health status and how inquisitive and resourceful he is, the patient will speak directly to the physician or come to the medical library or the documentation centre.

The quartet – physician, librarian, patient, information

Physicians are often overwhelmed by their work schedules and do not always have time to search information themselves on the Internet or at university. The medical library, created by and for them, meets their needs as far as possible and documentation professionals are appointed to manage it. Usually, patients can have access to the

Clinical Information Services

Patients' Information in Hospital

medical library only under certain conditions. In France, medical libraries have been increasingly set up within hospitals. The libraries are frequently general, sometimes specialised, enabling the medical profession to obtain information quickly.

As a rule, in a hospital, medical information is held by the physician and the librarian – the physician through his studies, experience and knowledge, and the librarian through his expertise to find the right information using different documentary tools at his disposal.

However, thanks to new technology, the patient is nowadays more frequently in possession of information, most of which he finds on the Internet. Besides, legislation (law 95-1000 dated 6 September 1995) states that “the physician must provide fair, clear and appropriate information for the individual he examines or counsels.” Thus, the patient must be knowledgeable of his condition so that he can give his informed consent and better share the medical decision.

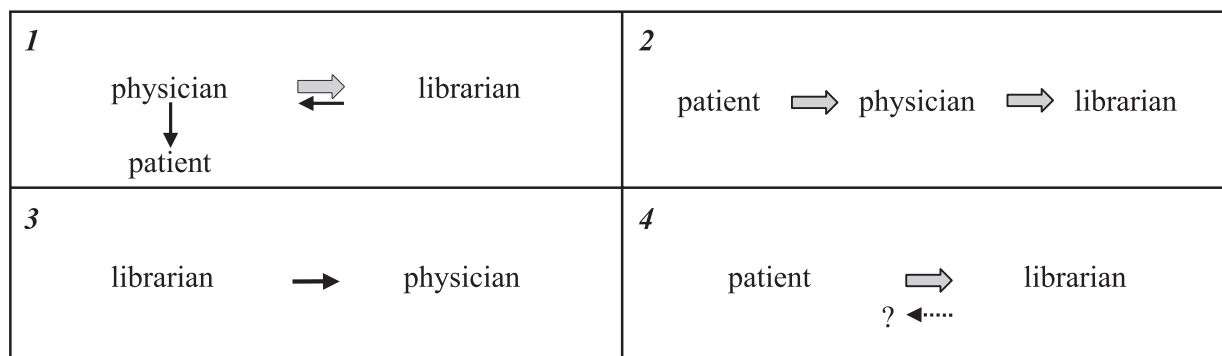
Henceforth, information will transit between 3 participants following 4 possible routes (fig. 1):

- the physician completes his knowledge at the library and transmits information to the patient;
- the patient asks for details from the physician who can then search for it at the documentation centre (if the case is unusual);
- the librarian transmits information in advance to the physician, by organising a document search on his behalf, to provide him with regular current articles on a given condition;
- the patient turns up himself at the medical library and tries to get the information he needs.

What should one do when a patient comes for information?

For a few years now, the emergence of new diseases (prion diseases) and the reemergence of older ones (tuberculosis) mirrored by the media have encouraged patients to learn more about their own conditions².

Only the physician can allow the librarian to give documents and/or information to the patient as he



⇒ information request
 → information transmission

Fig. 1. Circulation of information between patient, physician and librarian

Clinical Information Services

Marie-Pierre Réthy

is the one who knows the understanding potential of the patient.

However, it is sometimes difficult not to answer a distressed patient or his relatives on the one hand, and within the framework of the patient informed consent and shared medical decision. On the other hand, the patient may demand to be informed.

Thus, several possibilities are to be considered:

✓ Giving the patient information may prove to be harmful. Indeed, the librarian does not know the patient's physical and psychological condition – will he/she withstand the true facts? The librarian should refrain from comments or advice, despite his know-how and skills to question users so as to better meet needs and expectations.

✓ The librarian decides that the patient, as a person expecting information, is first of all a user, but not any user. With great attention and caution, attempts should be initiated to learn how much the user knows about his condition, what documentary sources have been consulted (e.g. texts or scientific articles). Then, the librarian has to evaluate this information, at the same time, understanding or interpreting errors so as to make it easier to transmit the information required. From this point on, the librarian should on no account substitute for the physician. This behaviour is not advisable and the librarian should turn away the patient tactfully if necessary.

✓ A librarian should be fully aware of the danger of a poorly transmitted and understood piece of information. Before looking on the patient as a user, the librarian has to speak to the physician,

who solely can direct him to such relevant documents to present to the patient. If the physician gives his consent to the patient coming and obtaining information, he has to inform the librarian about the patient's health condition and ability to understand and take in this additional piece of information, and decide on the patient's capacity:

- to receive a piece of information;
- to recall the piece of information received;
- to make a decision and give the reason for it;
- to use the relevant information when making a decision;
- to appropriately divide the relevant information up.³

Conclusion

The librarian's primary role is to keep the medical profession and the health staff informed, but they must be aware that patients can also find various and diversified information in the library. As legislation dictates that information be given to the patient, the librarian must comply. But, the decision to inform an inquiring patient is a matter for joint reflection, agreement and decision between the physician and the librarian, thus creating a true information/documentary partnership in the patient's interest.

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EAHIL WORKSHOP'07

Kraków, Poland

12th - 15th of September 2007

**EARLY BIRD REGISTRATION DEADLINE IS
MAY 31st, 2007**

EAHIL WORKSHOP SCIENTIFIC PROGRAMME

	Wednesday, September 12th	Thursday, September 13th	Friday, September 14th	Saturday, September 15th	
8:30-8:45 8:45-9:00				Position Paper VI	
9:00-9:15 9:15-9:30 9:30-9:45 9:45-10:00	Continuous Education Courses	Opening Ceremony	Position Paper III Position Paper IV	Paper Session VI	
10:00-10:15 10:15-10:30 10:30-10:45 10:45-11:00		Position Paper I	Sponsor Sessions	Poster Session	
11:00-11:15 11:15-11:30 11:30-11:45 11:45-12:00		Coffee	Paper Session I	Coffee	Coffee
11:00-11:15 11:15-11:30 11:30-11:45 11:45-12:00		CEC Meeting of Heads of Polish Medical Libraries	Coffee	Paper Session III Paper Session IV	General Assembly + EAHIL C/W Report
12:00-12:15 12:15-12:30 12:30-12:45 12:45-13:00	CEC	Opening of Exhibition Area		Awards & Closing Ceremony	
13:00-13:15 13:15-13:30 13:30-13:45 13:45-14:00	Lunch	Lunch	Lunch	Lunch	
14:00-14:15 14:15-14:30 14:30-14:45 14:45-15:00	CEC	Position Paper II Paper Session II	Empowerment Session	Post-Workshop Tours	
15:00-15:15 15:15-15:30 15:30-15:45 15:45-16:00	EAHIL Council Workshop	Coffee	Sponsor Sessions (14:00-15:10) Coffee (15:10-15:30) Position Paper V		
16:00-16:15 16:15-16:30 16:30-16:45 16:45-17:00	Coffee	Poster Session SIGS Meeting	Paper Session V		
17:00-17:15 17:15-17:30 17:30-17:45 17:45-18:00	CEC	EAHIL Council Workshop			
18:00-18:15 18:15-18:30 18:30-18:45 18:45-19:00		Walking Tours			
19:00 ~..	Welcome Reception		Gala Dinner		

Registration: Wednesday, September 12th from 8:00 am - 7:30 pm and Thursday, September 13th from 8:00 - 9:00 am

EAHIL Board Meeting: Tuesday, September 11th from 9:00 am - 5:00 pm

Pre-Workshop Tours & Activities for Accompanying Persons: 10th, 11th, 12th, and 15th of September

Post-Workshop Tours: Sunday, September 16th

info: www.bm.cm-uj.krakow.pl/eahil

ORAL PRESENTATIONS



Paper Session I September 13 (Thursday Morning)

Position Paper I

A. Booth (United Kingdom): New Breed or Different Species: is the 21st Century Health Information Professional Generic or Specific?

- G. Buluță, C. Mihăilescu, O. - L. Porumbeanu (Romania): Some Aspects Concerning the Education, Training and Continuous Development of the Librarians and Information Specialists in Romania. The Case of the Professionals from the Library of the "Carol Davila" University of Medicine and Pharmacy - Bucharest.
- T. Sandgren, K. Larmo (Finland): Continuous Professional Development and Workplace Education Program in the National Library of Health Sciences, Finland.
- L. Garau, C. Ferri, P. Gradito (Italy): Biomedical Librarian in Veterinary Public Health Institutions: Competence Profile and Training.

Paper Session II September 13 (Thursday Afternoon)

Position Paper II

S. J. Darmoni (France): Information and Communication Technologies in Modern Health Library.

- B. Grala, W. Kozakiewicz (Poland): Infobrokering and Searching the Deep Web - the New Role of Employee of the Department of Medical Scientific Information.
- A.J.P van den Brekel (Netherlands): Get Your Consumer Health Information from an Avatar! Health and Medical Related Activities in a Virtual Environment.
- A. Czarnecka (Poland): Model of Desktop Publishing Services in the Modern Offer of an Academic Library.

Paper Session III September 14 (Friday Morning)

Position Paper III

J. Gilbert (Netherlands): The Library Workforce in a Changing Environment: from Threats to Challenges.

- A. Wood (United Kingdom): Raising Professional Standards - The Role of the Professional Institut.
- W. Schallier (Belgium): Information Literacy in Academic Curricula - A Case Study of Integration at the Biomedical Faculties of K.U. Leuven University.
- U. Korwitz (Germany): Lets Talk: Introduction of Personnel Appraisal Interviews as a Means of Human Resources Development in a Medical Library.
- T. Oker-Blom, K. Kunttu, P. Lipsanen, R. Iivonen, K. Koskinen (Finland): Managerial Issues in Establishing and Running an Open Repository-Case DVIikki.
- S.J. Nelson, J.-L. Schulman (United States): Management of the MeSH Translation Maintenance System: Issues in Creation and Maintenance of Medical Subject Headings (MeSH) in an International and Multilingual Context.

Paper Session IV September 14 (Friday Morning)

Position Paper IV

S. Bakker (Netherlands): Tailored Information Services.

- L. Vercellesi, G.F. Miranda, E. Pozzi, M.G. Chiaudani, F. Bruno (Italy): Supporting the Practice of Health Communication Professionals.
- T. Ovaska (Finland): Supporting Evidence - Based Nursing.
- P. Divall, S. Sutton, L. Ward (United Kingdom): Pharm - Assist: Using Personal Digital Assistants (PDAs) to Assist in Pharmacy Decisions.
- B. Trojan (Canada): Out of the Library and into the Ward: Clinical Librarianship Programmes at University Health Network.
- I. Fourie (South Africa): Information Literacy for Healthcare Professionals - Learning from Studies in Human Information Behaviour (HIB).

Paper Session V September 14 (Friday Afternoon)

Position Paper V

A. McKibbin (Canada): Medical Librarians and Research: Myths, Realities, and Opportunities.

- P. De Castro, E. Poltronieri, O. Granata, A. Carattoli (Italy): Educating Authors of Biomedical Papers to the Benefits of the Open Access Publishing Model.
- J. Przyłuska (Poland): Medical Library as Intellectual Support for Users.
- J. Ni Chalanáin, B. Barrett (Ireland): Health Information Professionals: Roles, Skillset and Barriers to Involvement in the Cochrane Process.

Paper Session VI September 15 (Saturday Morning)

Position Paper VI

I. Robu (Romania): Librarians and Information Literacy in Health Sciences. A Bird's Eye View.

- L. Nordheim, M. Nortvedt (Norway): The Development and Evaluation of a Postgraduate Programme in Evidence Based Practice for Librarians.
- C. Brouwir, N. Durieux, N. Fairon, S. Spronck, S. Vandepuut, F. Pasleau (Belgium): Sharing Inter - Faculty Teaching Experiences for Improved Training in Information Literacy.
- E. Lesenková, H. Bouzková, A. Drdulová, L. Maixnerová (Czech Republic): Information Literacy: Know - How in the Area of Effectiveness Information Services for Medical Librarians and Their Customers in the Czech Republic.

PRELIMINARY SCHEDULE OF CONTINUING EDUCATION COURSES

September 12th, Wednesday

Registration deadline for CEC is May 31st, 2007

The description of courses is available on EAHIL Workshop web site
www.bm.cm-uj.krakow.pl/eahil

FULL DAY COURSES	
A. Booth	Using Evidence in Day to Day Practice: an EBLIP Update
E. Hollis, R. van Dieën	The Elephant Code. Presentation and Communication Techniques
S. J. Nelson, JL. Schulman	Using the MESH Translation Maintenance System
A. Sniechowska-Karpinska	E-learning/Teaching in Medical Library - Theory and Practice (<i>in Polish</i>)
HALF DAY MORNING COURSES	
K. Czabanowska	Qualitative Research Approaches in Information Science and in Library Setting
A. McKibbon	Statistics for the Statistically Challenged: A Primer for Understanding the Numbers and Statistics in Healthcare Research Reports
O. Obst, G. van den Brekel	Weblogs and Mashups Services
F. Rump	"I didn't Know that Exists" - Internet Search Tools for the Biomedical Librarian
M. L. Zafron	Making Library Instruction Count: User Education Methods and Techniques
HALF DAY AFTERNOON COURSES	
C. Bassi, V. Pistotti	Supporting the Evidence. Clinical Trials, Health Technology Assessment Reports, Practice Guidelines. Where to Find and How to Search Them
L. Blankson-Hemans	Measuring Impact: Cost Justification for Information Services
A. McKibbon	Health Librarianship / Health Informatics
G. van den Brekel, D. Kieft-Wondergem	Make Your Own Library Toolbar

EAHIL Workshop Scholarships

Deadline 31 May 2007

The EAHIL Executive Board is pleased to announce 4 scholarships for the EAHIL workshop in Krakow 12 -15 September. The scholarships will be 500 euros and can be used to pay the registration fee, accommodation and/or flights.

Additionally, one further Scholarship of 500 euros will be awarded jointly by the Board and the Pharmaceutical Information Special Interest Group (PHING) to an applicant with an interest in pharmaceutical/medicines information.

Please indicate on the application whether you are applying for a general scholarship (4) or the PHING one (1).

Applicants must apply to:

**EAHIL President: Suzanne Bakker
Central Cancer Library,
The Netherlands Cancer Institute,
Plesmanlaan 121,
NL-1066 CX Amsterdam,
The Netherlands.**

Tel: +31 20 512 2597

Fax: +31 20 512 2599

e-mail: s.bakker@nki.nl

Please remember to state in one or two paragraphs the reason why you require this scholarship and how it would benefit you and your library

Clinical Information Services

Tünde Gracza



The Use of Library Services

“Without the use of a database, modern healing is unthinkable...”

In other words, training in the *Use of Library*

Sources is an essential part of clinical information provision.

The advent of electronic information provision has led to many additional challenges and opportunities for library services. Our physical and geographical limitations can now be overcome, and through the library's virtual gates, enquirers can enter and exit twenty four hours a day. Thus we need to be, and can be, more flexible and pro-active than ever before in our efforts to promote our services and to aid the work of medical practitioners and all users. In this article I would like to tell you of some of the methods we have used to inform our clinical practitioners about the possibilities of our library services and of our continuing efforts to promote the full use and appreciation of them.

The Library of Pecs University of Medicine and Health Science celebrated the 75th anniversary of its founding in 2001. From the very beginning, a high priority was given to the library and to the education and development of our readers' abilities to use the library resources and catalogues. Indeed, the founder, Mihaly Pekar MD, Dean, instigated this approach.

During the 1970s and 1980s, the National Curriculum included courses on the proper use of medical library services, but these were only

available to our own enrolled students in-house. At the end of the 1980s, the library acquired its first computer, and we began to develop a mediated literature searching service for enquirers on an individual basis, which was very popular. However, during the 1990s, the institutes and clinics of the University of Medicine were able to purchase a good number of computers of suitable specification to enable us to interconnect through an intranet and also, most importantly, exploit the information potential of the internet. Meanwhile, our library was expanding year on year. Thus from our beginnings when we could only offer our users a CD-based bibliographical MEDLINE access, we are now able to offer a wide range of bibliographical and full text databases, accessible in different formats and covering the full spectrum of medicine and health information. And this is before we take into account our ability to access many completely new electronic sources, especially those developed in the fields of evidence-based medicine and patient information.

The new technology, integrated library systems, and the new possibilities in information finding led to new information searching habits amongst our users, and we needed to respond. We put our previously purchased electronic resources on the intranet and re-organised our library training sessions. Of course, all this demanded a lot of careful research and preparation on our part. We wanted to meet the real needs of our users, particularly the doctors, lecturers and researchers working in our clinics. Our surveys led us to embark on a multi-step project which began at the start of the new millennium, and which we hope to continue to develop and add to as new needs and possibilities arise.

Clinical Information Services

The Use of Library Services

A first step was to develop and introduce a library group session called the *Library survey course*. The aim of this session was to show the available electronic databases and to help with a simple search. The training session was open to university students, lecturers, and those working in health institutions throughout the city. The response was overwhelming. The interest was so great that immediately we had enough applicants to hold 23 sessions and the 20 computers we had available in the library were insufficient! Following an introduction to our online catalogue, we reviewed the databases, being careful to leave enough time for individuals to get some familiarity with what was available in their field and to experiment with some searches. At the end of the session, participants filled in a questionnaire which we devised in order to get an idea of their level of satisfaction with the training and what their further requirements, ideas and critical assessments might be. It was the response of one of our users which suggested the title of this article, ie “without the use of a database, modern healing is unthinkable”.

We analysed the response to the *Library survey course* in order to further develop our training. One factor which became apparent was that clinicians were very keen to participate but were constrained by time and distance from the library. Therefore we developed a second stage to our training, which we called *If Mohammed will not go to the mountain... amongst ourselves!* We contacted all the directors of the various institutions and clinics by letter, email, telephone or in person, saying that we were willing to offer the courses *in house* for them. These efforts were not in vain! 64 percent of those contacted responded requesting such a

service at their location. Thus on many occasions the library staff were found giving session at a clinic to all the doctors at the end of their working day. These sessions gave us the most satisfaction and were very rewarding to all parties. We were able to tailor the sessions to cover the subject area(s) and interests of the participants, although of course it is very challenging to the librarian to be able to react to spontaneously posed questions in specialist areas and come up with good results.

The positive feedback we get from these sessions is being used to inform the development of further programmes. Now that our lecturers and researchers are using our electronic sources and services, we plan to further extend our training of the students, hoping that our work will be made easier by the fact that we in the library are “on the same wavelength” as their professors and thus our services are seen to be vital and relevant.

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Clinical Information Services

Velta Pozņaka



The Nordic Council of Ministers Supports Educational Courses for Searching Medical Information

Short summary

The Baltic Association of Medical Libraries has contributed to the promotion of the ability to use information sources through a grant from the Nordic Council of Ministers. The grant was received for educational courses for searching medical information. Figures on access to the Internet and computer use in Latvia are given, and also some background information on public health. A summary of the courses is also presented.

The greatness of our achievements depends on the level of our starting point. We are happy that we are making an additional step towards information support and our medical professionals are still at the beginning with regard to information seeking. I would like to give some figures which characterize the level of public health in Latvia and to show our access to the electronic world.

According to a 1996 study published by the WHO Regional Office for Europe, there has been a deterioration in health status indicators in Latvia since 1989, a decrease in life expectancy, and a low fertility rate - one of the lowest indicators in Europe. The number of hospitals also continues to decrease: 176 in 1992, 131 in 2003, 119 in 2004, 109 in 2005 and 106 in 2006. This was caused by reforms implemented by the government.

During the early 2000's, medical informatics began to be officially supported by the Latvian Ministry of Health. E-health sessions have been included in the programme of the Baltic IT&T Forum since 2004. There is now a document, ratified by the Cabinet of Ministers in 2005: "*Pamatnostādnes 'e-Veselība Latvijā'*" (Basic principles: e-Health in Latvia). The draft of the *National Development Plan of Latvia 2007–2013* includes sections on health information and e-health. In 2004 the percentage of individuals in Latvia regularly using the Internet was only 27%, compared to 45% in Estonia and an equally low 26% in Lithuania. The average figure in the European Union (EU-25) was 38%. According to the data from the Central Statistical Bureau of Latvia, access to a computer/the Internet in Latvia has grown from 32.3% / 30.5% (at the beginning of 2005) to 40.6% / 42.2% (at the beginning of 2006). The usage for individuals who used a computer/Internet at least once a week was 41.9% / 36.3% at the beginning of 2005 and 49.2% / 46.0% at the beginning of 2006. According to the same source, the purpose for using the Internet at the beginning of 2006 was: Training and education, 25.2%; sale of goods and services, banking affairs, 44.9%; interaction with public authorities, 49.6%; communication, 86.1%; information searching and online services, 96.4%.

All things involving the usage of databases and systems demand the knowledge to use them. Our physicians are lucky in this respect. It is not enough to ratify one document. Of course we have

Clinical Information Services

Educational Courses for Searching Medical Information

to remember the importance of a native language which is not English, and also that there was a long period where there was no necessity or motivation to learn a foreign language.

There have been a number of projects involving medical librarians which have facilitated their professional development and the passage of their libraries into the electronic environment. Librarians are mostly involved in the teaching process based on the initiative of their own library rather than on national policy. Recently, the Baltic Association of Medical Libraries received a grant from the Nordic Council of Ministers under the Support Programme for Non-governmental Organisations in the Baltic Sea Region for the project: *Collaboration and knowledge - investment for the development of a civic society*. The Association was founded in 2002 and joined together the leading medical and health libraries of Latvia, Lithuania and Estonia. This association is, in turn, a member of the Nordic–Baltic Association for Medical and Health Information.

Although the sum donated is not so large, about 6830 euros, we are very pleased that the project has been appreciated as valuable and sustainable. This is an important step in the development of knowledge integration in our society.

The project will include the training of librarian specialists, representatives of social organisations, and persons occupied in various fields of health care. The first stage of the project activities will take place in Riga, on 8th - 10th May 2007. Trainers from the University of Oslo Library of Medicine and Health Sciences, Ullevål University Hospital Health Information Centre and from the Centre for Evidence-Based Practice in Bergen will share their knowledge during these days in Riga. The trainers come from a country where the acquirement of qualitative medical information searching skills is part of the syllabus in higher education. This is something to which we are unaccustomed in Latvia.

During the second stage of the activities, library specialists will continue educational processes in Latvia, Lithuania and Estonia. In Latvia, it is presumed that the training in medical information searching skills will be undertaken by the Medical Library of Latvia for branch librarians, and also for hospital librarians and health specialists from other districts of Latvia.

Participants will acquire new skills for medical information searching on the Internet. Special attention will be made to information given by physicians to patients and to members of their families. Trainers will also speak about evidence-based practice resources and about the Norwegian experience in creating a database for patients.

The creators of the project, the specialists at the Medical Library of Latvia, are ready to assert that the implementation of the project will give enormous support to health specialists in the course of treatment and will improve the level of health care in our society.

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INTERNET PAGE

Benoit Thirion



Take a Look!

(collected during January-March 2007)

The goal of this section is to have a look at references from non-medical librarian journals, but interesting for medical librarians (for lists and TOC's alerts from medical librarian journals, see: <http://www.chu-rouen.fr/documed/eahil67.html>)

Free full text

1. Williams E. Nwagwu, PhD. - **Patterns of Authorship in the Biomedical Literature of Nigeria**
LIBRES Number 17 Issue 1
Free full text: http://libres.curtin.edu.au/libres17n1/NwagwuPatterns_Final_rev.pdf
2. William Hersh and Henning Müller. - **Image Retrieval in Medicine: The ImageCLEF Medical Image Retrieval Evaluation**
ASIST Bulletin February/March 2007
Free full text: http://www.asis.org/Bulletin/Feb-07/hersh_mueller.html
3. Ophelia T. Morey. - **Health information ties: preliminary findings on the health information seeking behaviour of an African-American community**
IR Information Research Vol. 12 No. 2, January 2007
Free full text: <http://informationr.net/ir/12-2/paper297.html>
4. C. Lynch and A. Perrett. - **Online information literacy learning for nurses: exploration of an RCN learning area**
Journal of Information Literacy: Volume 1, Issue 1 (January 07)
Free full text: http://www.informationliteracy.org.uk/upload/jil/voll1issue1_afp_lynch.pdf
5. David J. Solomon. - **The Role of Peer Review for Scholarly Journals in the Information Age**
Journal of Electronic Publishing Winter 2007 vol. 10, no. 1, Winter 2007
Free full text: <http://hdl.handle.net/2027/spo.3336451.0010.107>
6. Hannigan GG. - **Identifying Relevant Controlled Clinical Trials for Systematic Reviews Requires Searching Multiple Resources – and, Even Then, Comprehensiveness is Questionable**
Evidence Based Library and Information Practice, Vol 1, No 4 (2006)
Free full text: <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/93>
7. Haley P. - **Analysis of Print and Electronic Serials' Use Statistics Facilitates Print Cancellation Decisions**
Evidence Based Library and Information Practice, Vol 1, No 4 (2006)
Free full text: <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/81>
8. Corkett M. - **The Quality of Canadian and U.S. Government Health Documents Remains Unchallenged Until Better Research Can Be Undertaken**

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Evidence Based Library and Information Practice, Vol 1, No 4 (2006)

Free full text: <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/75>

9. Glynn L. - **Terminology Versus Action**

Evidence Based Library and Information Practice, Vol 1, No 4 (2006)

Free full text: <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/163/156>

Abstracts

1. Clara Calero, Thed N. van Leeuwen and Robert J. W. Tijssen. - **Research cooperation within the bio-pharmaceutical industry: Network analyses of co-publications within and between firms**
Scientometrics Volume 71, Number 1 / April, 2007

Abstract:

<http://www.springerlink.com/content/k41720311h04t41x/?p=4c36701f893f4070aca9bf77bd1928dc&pi=3>

2. Rafael Ball and Dirk Tunger. - **Science indicators revisited - Science Citation Index versus SCOPUS: A bibliometric comparison of both citation databases**

Information Services and Use Issue: Volume 26, Number 4 / 2006

Abstract: <http://iospress.metapress.com/link.asp?id=9vy6xd722hu17rbc>

3. Paula Barnett-Ellis, Sherri Restauri. - **Nursing Student Library Usage Patterns in Online Courses: Findings and Recommendations**

Internet Reference Services Quarterly Volume 11, Issue 4, 2007

Abstract: <http://www.haworthpress.com/store/ArticleAbstract.asp?ID=91901>

4. Mia Liza A. Lustria. - **Can interactivity make a difference? Effects of interactivity on the comprehension of and attitudes toward online health content**

Journal of the American Society for Information Science and Technology Volume 58, Issue 6, 2007.

Abstract: <http://www3.interscience.wiley.com/cgi-bin/abstract/114121748>

5. Cynthia Goss, Steven Lowenstein, Ian Roberts, and Carolyn DiGuseppi. - **Identifying controlled studies of alcohol-impaired driving prevention: designing an effective search strategy**

Journal of Information Science 2007 33: 151-162

Abstract: <http://jis.sagepub.com/cgi/content/abstract/33/2/151>

6. Pascal Bador, Chérifa Boukacem-Zeghmouri, Thierry Lafouge, Hélène Prost, Joachim Schöpfel. - **A cartographic analysis of the correlation between document supply and citations in pharmacology: a case study from INIST in France (part 2)**

Interlending & Document Supply Year: 2007 Volume: 35 Issue: 1 Page: 7 - 14

Abstract:

<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1596391>

7. Jenny Harbour, Gobinda G. Chowdhury. - **Use and outcome of online health information services: a study among Scottish population**

INTERNET PAGE

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Journal of Documentation Year: 2007 Volume: 63 Issue: 2 Page: 229 - 242

Abstract:

<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1596544>

8. Juan Miguel Campanario, Erika Acedo. - **Rejecting highly cited papers: The views of scientists who encounter resistance to their discoveries from other scientists**
Journal of the American Society for Information Science and Technology Volume 58, Issue 5, Pages 734 – 743
Abstract: <http://www3.interscience.wiley.com/cgi-bin/abstract/114111310>
9. Àngel Borrego et al. - **Use and Users of Electronic Journals at Catalan Universities: The Results of a Survey**
The Journal of Academic Librarianship Volume 33, Issue 1 , January 2007, Pages 67-75
Abstract: <http://dx.doi.org/10.1016/j.acalib.2006.08.012>
10. Peter Herson. et al. - **E-book Use by Students: Undergraduates in Economics, Literature, and Nursing**
The Journal of Academic Librarianship Volume 33, Issue 1 , January 2007, Pages 3-13
Abstract: <http://dx.doi.org/10.1016/j.acalib.2006.08.005>
11. Beverly Brown, Cynthia Found, Merle McConnell. - **Federal Science eLibrary Pilot: Seamless, equitable desktop access for Canadian government researchers**
The Electronic Library Year: 2007 Volume: 25 Issue: 1 Page: 8 - 17
Abstract:
<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1593792>
12. Ina Fourie, Retha Claasen-Veldsman. - **An exploration of the potential of WWW current awareness services for oncology nurses**
The Electronic Library Year: 2007 Volume: 25 Issue: 1 Page: 36 – 53
Abstract:
<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1593794>
13. Melih Kirlidog, Didar Bayir. - **The effects of electronic access to scientific literature in the consortium of Turkish university libraries**
The Electronic Library Year: 2007 Volume: 25 Issue: 1 Page: 102 – 113
Abstract:
<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1593799>
14. Katia Medawar. - **The restructuring of the portal at the Institut Pasteur Library: a case study**
Electronic library and information systems Year: 2007 Volume: 41 Issue: 1 Page: 20 - 34
Abstract:

INTERNET PAGE

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<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1593860>

15. Glenn D. Walters. - **Predicting subsequent citations to articles published in twelve crime-psychology journals: Author impact versus journal impact**
Scientometrics Issue Volume 69, Number 3 / December, 2006
Abstract:
<http://www.springerlink.com/content/k63942th70v334p1/?p=a7db3ad209dd48669c1e58a2b8bdd164&pi=1>
16. Rogerio Meneghini et al. - **International versus national oriented Brazilian scientific journals. A scientometric analysis based on SciELO and JCR-ISI databases**
Scientometrics Issue Volume 69, Number 3 / December, 2006
Abstract:
<http://www.springerlink.com/content/xw6279h463534322/?p=a7db3ad209dd48669c1e58a2b8bdd164&pi=3>
17. Tzeng-Ji Chen. - **The rise of China in gastroenterology? A bibliometric analysis of ISI and Medline databases**
Scientometrics Issue Volume 69, Number 3 / December, 2006
Abstract:
<http://www.springerlink.com/content/682408jx240t34lg/?p=a7db3ad209dd48669c1e58a2b8bdd164&pi=4>
18. Armando Albert. - **Scientific and technological performance evaluation of the Spanish Council for Scientific Research (CSIC) in the field of Biotechnology**
Scientometrics Issue Volume 70, Number 1 / January, 2007
Abstract:
<http://www.springerlink.com/content/35814m614025g727/?p=66a4c78b00304e5b9da6b25aade4a&pi=2>
19. Rafael Aleixandre-Benavent et al. - **Hypothetical influence of non-indexed Spanish medical journals on the impact factor of the Journal Citation Reports-indexed journals**
Scientometrics Issue Volume 70, Number 1 / January, 2007
Abstract:
<http://www.springerlink.com/content/b2796604647j8p77/?p=66a4c78b00304e5b9da6b25aade4a&pi=3>
20. Chin-tsai Lin. - **Evaluating the performance of sponsored Chinese herbal medicine research**
Scientometrics Issue Volume 70, Number 1 / January, 2007
Abstract:
<http://www.springerlink.com/content/km86135841501r4r/?p=66a4c78b00304e5b9da6b25aade4a&pi=4>
21. Gerard Pasterkamp. - **Citation frequency: A biased measure of research impact significantly influenced by the geographical origin of research articles**

INTERNET PAGE

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Abstract:

<http://www.springerlink.com/content/vh78876tru122k43/?p=66a4c78b00304e5b9da6b25aadeade4a&pi=8>

22. C.A. Beverley, P.A. Bath, R. Barber. - **Can two established information models explain the information behaviour of visually impaired people seeking health and social care information?**

Journal of Documentation Year: 2007 Volume: 63 Issue: 1 Page: 9 - 32

Abstract:

<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1589315>

23. Solomon Bayugo Sulemani. - **Information Seeking Behavior of Health Sciences Faculty at the College of Health Sciences, University of Ghana**

Information Development, Vol. 23, No. 1, 63-70 (2007)

Abstract: <http://idv.sagepub.com/cgi/content/abstract/23/1/63>

24. Pryor G. - **Project StORe: making the connections for research**

OCLC Systems & Services Year: 2007 Volume: 23 Issue: 1 Page: 70 - 78

Abstract:

<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1593463>

25. Brunelle B. - **The healthcare advertising landscape**

Learned Publishing Volume 20, Number 1, January 2007, pp. 51-57(7)

Abstract:

<http://alpsp.publisher.ingentaconnect.com/content/alpsp/lp/2007/00000020/00000001/art00010;jsessionid=3aedshod4l8sr.alice>

26. Nicholas D. et al. - **The impact of open access publishing (and other access initiatives) on use and users of digital scholarly journals**

Learned Publishing Volume 20, Number 1, January 2007, pp. 11-15(5)

Abstract:

<http://alpsp.publisher.ingentaconnect.com/content/alpsp/lp/2007/00000020/00000001/art00004;jsessionid=3aedshod4l8sr.alice>

27. Paul Huntington et al. - **Health information for the consumer: NHS vs the BBC**

Aslib Proceedings Year: 2007 Volume: 59 Issue: 1 Page: 46 – 67

Abstract:

<http://www.emeraldinsight.com/Insight/viewContentItem.do?contentType=Article&contentId=1589310>

28. Michelynn McKnight. - **A grounded theory model of on-duty critical care nurses' information behavior: The patient-chart cycle of informative interactions**

INTERNET PAGE

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Journal of Documentation Year: 2007 Volume: 63 Issue: 1 Page: 57 - 73
Abstract: <http://www.emeraldinsight.com/10.1108/00220410710723885>

29. Severiens T. Et al. - **RDF Database for PhysNet and Similar Portals**
Cataloging & Classification Quarterly Volume: 43 Issue: 3/4 Cover Date: 2007
Abstract:
<https://www.haworthpress.com/store/ArticleAbstract.asp?sid=UAVB3TVJMXUJ9LE4Q061BUP87CMG9G29&ID=97030>
30. Michon J. - **Biomedicine and the Semantic Web: A Knowledge Model for Visual Phenotype**
Cataloging & Classification Quarterly Volume: 43 Issue: 3/4 Cover Date: 2007
Abstract: **This Article is Currently Unavailable**
31. Barjak F. - et al. - **Which factors explain the Web impact of scientists' personal homepages?**
Journal of the American Society for Information Science and Technology Volume 58, Issue 2 , Pages 200 – 211
Abstract: **<http://www3.interscience.wiley.com/cgi-bin/abstract/113489530>**
32. Spackman E. - **Utilizing Focus Groups to Evaluate an Information Literacy Program in a General Biology Course**
Science & Technology Libraries Volume: 27 Issue: 3 Cover Date: 2007
Abstract:
<https://www.haworthpress.com/store/ArticleAbstract.asp?sid=MCPGJ3MDQ12L9M164C39J9B9BFBKGDS57&ID=9641>
33. Choinski EM. - **Journal Use in Pharmacy: A Citation Analysis of Faculty Publications at a School of Pharmacy**
Science & Technology Libraries Volume: 27 Issue: 3 Cover Date: 2007
Abstract:
<https://www.haworthpress.com/store/ArticleAbstract.asp?sid=MCPGJ3MDQ12L9M164C39J9B9BFBKGDS57&ID=96643>

An HTML version of this page is available at the URL:
http://www.chu-rouen.fr/documed/jeahil_take_a_look_mars_2007.html

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WEB 2.0

Oliver Obst



Starting a Blog

Starting a weblog can be as easy as to write an E-Mail. Content is King: knowledge about technology or HTML is not necessary, the author can concentrate just on the content. 175,000 blogs are created each day - altogether 70 million weblogs world-wide have sprung from the popularity of this idea (as of April 2007, the number doubles every 12 months). There are various tools for the creation and maintenance of weblogs. The easiest to use are the free web sites like *blogger.com* or *wordpress.com*. It really works as in the advertisements: 1, 2, 3, -finished!

If you choose instead one of the freely accessible software packages such as *wordpress.org* or *movabletype.org*, it becomes somewhat more difficult, because they have to be installed on your own web site. But then it is much more flexible and the blog can be adapted in accordance to each need and requirement. The *Wordpress* software used by the author for various weblogs is open source, the most widespread blog software around, and based on the ubiquitous PHP script and mySQL database. Everyone with even some knowledge in IT, can probably help if you encounter problems. If you choose to buy some server space on the web, it can be as cheap as 5 euros per month to get PHP and mySQL support.

Tools

There is a multiplicity of tools to add value to your blog and thereby strengthen the interaction with your readers. Some are related to RSS (universal language to syndicate content): tools to extract RSS, tools to merge RSS, tools to manipulate RSS. Some are from *Google* or other companies such as *conduit.com*. But most are Plugins, made available by the giant developer community of *wordpress*. Many are just nice, some are useful, but one that is really indispensable is: *Akismet* for filtering and deleting comment spam. Further useful Plugins are:

- *AutoClose Comments* - supports the protection against comment spam;
- *Get Recent Comments* shows, as the name implies, the most current comments, as well as references from other Blogs (Trackbacks). Both promote networking and interactivity;
- *WP-Polls* let you make votes on your blog;
- *Simple tagging* permits the tagging of blog posts and the display of related posts;
- *Amazon Media Manager* offers announcement and discussion of new acquisitions and is very useful for libraries.

If you use one of the web-based blog hosts, there are less features. However, they offer little “functionality boxes”, called widgets or page elements, which you can drag & drop into the layout template of your blog.

WEB 2.0

Starting a Blog

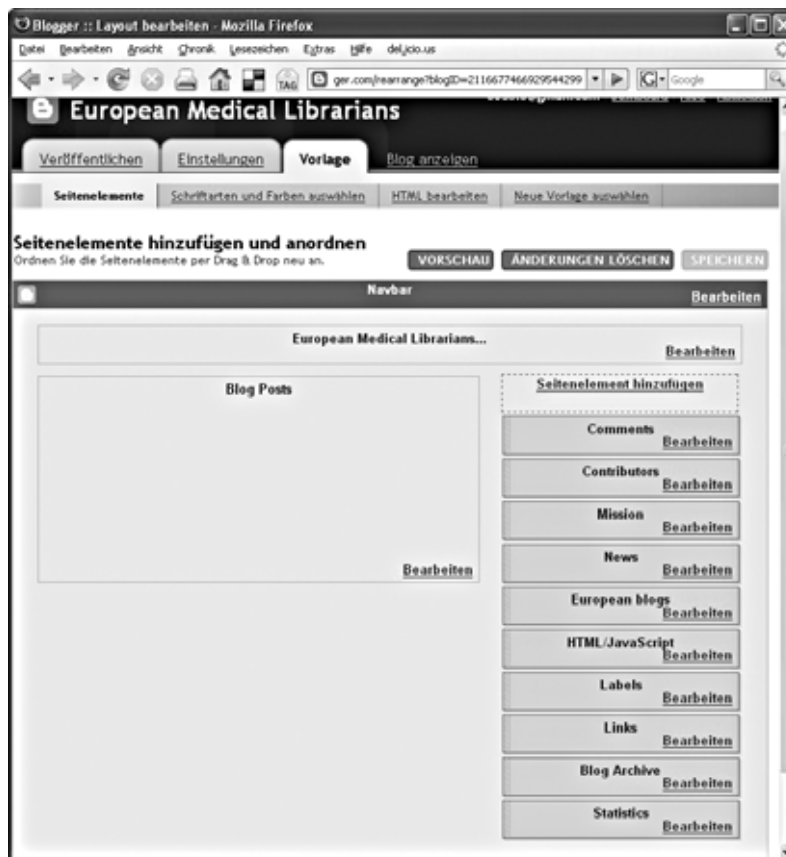


Fig.1: Enhancing the blog with widgets

Feedscrapers

The so called “Feedscrapers” enable you to extract an RSS feed from literally every web page with list entries. This is extremely useful, if the web page does not offer a RSS feed. A typical example is the press announcements of my university clinic. They display the news to the clinic’s homepage by means of a PHP/mySQL script; however a RSS feed was not offered. After some failed attempts with various Feedscrapers, finally I managed to extract the news with *feed43.com* and transform it into a regular RSS feed. Now I can universally re-use these news, mix them with other feeds, and offer them to anyone - in the library’s blog, in the library’s toolbar or in whatever web page I want.

Google Reader

Google reader can be used as a reader for RSS feeds only, but you can publish also public pages with it (“sharing/public pages”). You just define which of your own subscribed feeds or posts you

WEB 2.0

Oliver Obst

want to share with the public (“shared items”) by tags or by manually selecting posts. Like competing services such as *feedburner.com* or *feeddigest.com*, *Google reader* offers a HTML code, which permits the imbedding of the feed into any web page. You will find a nice example at the sidebar of *biomedbiblog.blogse.nl*.

Yahoo Pipes

Only recently, Yahoo started a Web2.0-service called *Yahoo Pipes*, which raised the idea of feed manipulation to a new level. It has great flexibility; owing to the object-oriented interface which you can arrange and work on every feed in the simplest way. The following image shows the *Yahoo Pipe* for the English translation of the weblog *medinfo*.

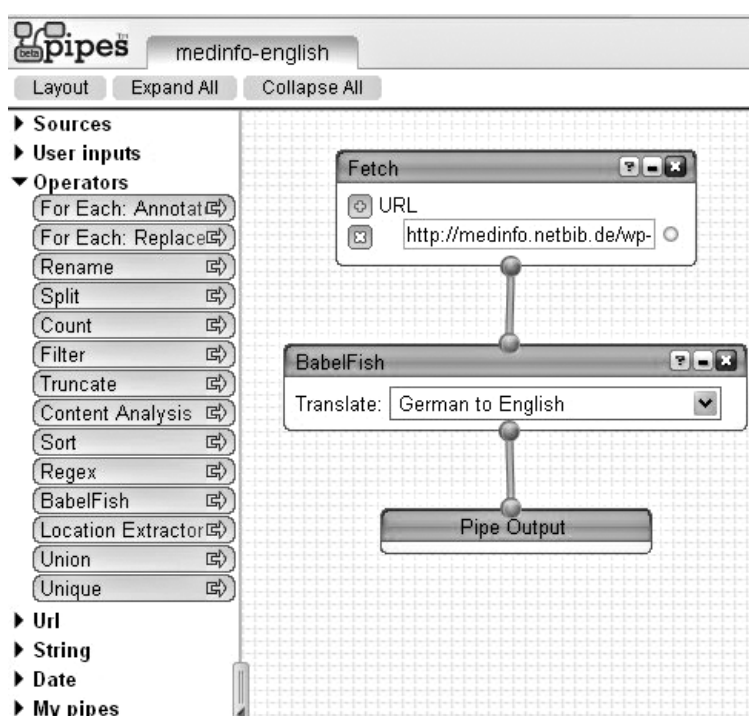


Fig.2: Yahoo Pipe for the translation of medinfo

Library Toolbar

Inspired by Guus van den Brekel of the UB Groningen, our library has offered the free toolbar of *conduit.com* since 2004. The purpose was to promote our news feeds with this congenial toolbar, which could be easily installed by users and docks on their browsers. The library toolbar brought a powerful answer for two of the greatest challenges of today: the growing remoteness of the

WEB 2.0

Starting a Blog

(scientific) user, and the fight for the browser's start page. The toolbar supplies the catalogues and data bases of the library making it so much simpler to the user. Independently, of the very web site users are viewing, with one click they can use the most important library services, be it catalogs, data bases, news feeds, or can immediately return to the library's homepage. In order to benefit the user more, further useful sources were integrated: The German phone directory, the university phone directory, the Google PageRank, the University News, the University Clinics News, local weather forecasts etc. pp. - the toolbar permits almost unlimited extensions. Don't miss Guus' workshop at Krakow on *Building a Library Toolbar!*

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EAHIL has a longstanding cooperation with MLA and UK HLG. It has been agreed that EAHIL members are entitled to purchase MLA publications at a reduced rate. Blackwell also offers a reduction on a personal subscription for EAHIL members to *Health Information and Libraries Journal* (HILJ).

Take advantage of EAHIL membership and tap from the information sources published by our partners.

Obituary - Jane Rowlands

Tony McSeán



Obituary

Jane Rowlands (nee Barton) 1963 – 2007

By the time of her death in February, aged only 43, Jane Rowlands had achieved more professionally, made more friends and gained more respect than most people achieve over a complete working life. Jane spent her entire career on the staff of the BMA Library, joining as a library assistant in 1987 and retiring as acting deputy librarian in 2006 when her illness made it impossible for her to continue working.

Jane's first degree was in psychology, and throughout her career she fiercely defended its credentials as a *bona fide* science while at the same time demonstrating through her skilful managing and influencing of those around her that she was equally aware of its everyday and pragmatic elements. After training and qualifying as a teacher she changed emphasis and found a natural and rewarding home in medical librarianship, joining the BMA library at a time when it was entering a period of transition to a modern information service – a transition to which she would make a crucial contribution. She took her postgraduate qualification at the Polytechnic of North London, as it then was, while working full-time – and also enjoying a social life that many a lady of leisure would struggle to keep up with. Jane bubbled over with a fierce energy – a very rare combination of marathon stamina and the ability to throw herself into immediate matters with a determination to deal with them, learn what there was to be learned and then work out a way to do it better next time.

This was Jane's defining quality, and sometimes created a charming dissonance with her tiny stature – she stood barely 1.5 metres tall and was once described as “a butterfly in combat boots”, which was just about right. She was always busy and equally reliably ready to take on something new. Jane was an outstanding library assistant, and at a time when the BMA library was expanding rapidly her aptitude for dealing with both people and IT systems ensured that she was promoted rapidly also – becoming in quick succession an outstanding assistant librarian and an outstanding sub-librarian. At this time in her career she formed an outstanding partnership with William Forrester, the head of development for the library. Jane's abilities to cast a blanket of warm inclusiveness over everyone involved in a project and her skill as a trainer and motivator were the perfect oil to William's genius in delivering systems on time and keep them running. Jane met deadlines come what may, and her example and support ensured that those around her did the same. In a short space of years William and Jane implemented a complete Dynix library system, a fast library-wide intranet connected to the web, and then a national Medline system: and did so at a time when IT was flakier than it is today and when any one of these would have been an outstanding achievement.

The national Medline system was Jane's crowning professional achievement. It was the first of its kind in the world, comfortably predating the general adoption of windows and the web. It was a 100% dial-up system, and in its first nine months connected 5,000 BMA members via what appeared to be an infinite variety of telecoms packages, few of which worked properly or at all. Jane wrote

Obituary - Jane Rowlands

1963 - 2007

downloadable training guides, ran courses and with her assistant librarian operated a help desk which combined technical expertise with something approaching saintliness. With no precedents or accepted standards, the team got 5,000 doctors dialling-up online without a single complaint of any kind being registered. Quite rightly, it was an achievement which gained Jane a special award from the BMA.

When William Forrester left to sort out the BMA's IT department, Jane took his place as part of the library's senior management team and was as at home in her new job as she had been in her old. She rebuilt the development team, contributed fully to the broader running of the library and above ensured that those around her had the opportunity and encouragement to reach their full potential.

Jane Rowlands was also a well-known figure in UK librarianship. This was partly through the hundreds of medical librarians that benefited from the programme of BMA library training courses that she created once the Medline system settled down and she felt like taking on something new. It was also, though, because she contributed so fully to Health Libraries Group and other conferences, both as speaker and, especially, as one of the mainstays of the social programme. The first in line at the social events and the last to be ready for bed – if not quite wild, perhaps, Jane was certainly impossible to keep up with. She gained a wider recognition through her participation in EAHIL events, winning an award as best young speaker at our 1994 conference in Oslo, and making a tremendous contribution to the 2000 joint conference with ICML in London. Her list of publications would have been creditable in a full-time academic.

She was never ill – two days sick in the whole 16 years we worked together at the BMA, so when her uncharacteristic listlessness was diagnosed as a brain tumour it was all the more shocking. Jane took on her illness as she had taken on many a professional and personal issue before – full on and with a complete, ferocious determination to succeed. For a time it looked as though she might. After a year of exhausting treatment she went into remission, returned to work part-time and working on the plans to install a new generation of library management system.

Alas it wasn't to be. The disease returned and with it early retirement. Even last November, coping with serious disabilities as a legacy of her treatment, Jane was making plans for a new career running courses to help others in her position gain access to IT and the web. After enjoying Christmas with her large and endlessly supportive family, Jane Rowlands' condition deteriorated rapidly and she died peacefully at her family home in Essex on February 10th. Her funeral was a true indication of the worth of the woman and the esteem in which she was held by those around her. More than a bus-load of colleagues made the 100km journey from London, helping to make the ceremony standing-room only, and there were many more smiles and tears than is usual at an English funeral, where the stiff upper lip is usually much in evidence. A couple of weeks later, her London-based friends met for a lively evening in her memory, in a pub near the BMA, an unconventional send-off, perhaps, but one where she would have been at home and at ease.

Tony McSeán and contributions from many of Jane Rowlands' friends and colleagues

PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda



Dear Colleagues,

A conference on scientific publishing was held by the European Union Science and Research Commissioner in Brussels. An online petition signed by almost 14,000 researchers and 500 research organizations in the Europe Union asked the European Commission to take action on open access. The commission failed to enact a mandatory open-access policy for E.U. funded scientists (M. Enserink. *Science*, 2007, 315, 1065). However the commission confirms that to promote better access to the publications that results from research, it is intending to fund with the sum of €54bn from the E.U. budget over the next seven years (R. Watson. *BMJ* 2007, 334, 389).

Giovanna F. Miranda

JOURNAL ISSUES

Since the Journal of February 2007, the following journal issue of *Health Information and Libraries Journal* has been received: Vol. 24, 2007, n. 1

Vol. 24 n. 1

M. N. Kamel Boulos and S. Wheeler. The emerging Web 2.0 social software: an enabling suite of sociable technologies in health and health care education. p. 2 - 23.

This article presents Web 2.0 technologies and social software as enablers in health and health care. The paper also offers a glimpse of future software, touching on Web 3.0 and how it could be combined with the Web 2.0 to produce the ultimate architecture of participation.

A. Brettle, C. Hulme, P. Ormandy. Effectiveness of information skills training and mediated searching: qualitative results from the EMPIRIC project. p. 24 - 33.

This is the second article describing the Effective Methods of Providing Information for Patient Care (EMPIRIC). The first paper described quantitative results. This paper describes the qualitative results exploring library staff and health professionals' view on the effectiveness of information skills training and librarian mediated searching as methods of providing information for patient care.

V. M. Trinder, G. E. Fleet, A. E. Gray. Evaluating the impact of library user training programmes across Thames Valley Strategic Health Authority in the UK. p. 34 - 40.

The objectives of this study was to assess whether information literacy skills training taken up by health professionals impacts on their confidence and skills in using electronic sources of health information.

K. Neves and W.J.E.P. Lammers. Growth in biomedical publications and scientific institutions in the Emirates (1998-2004): an Arabian renaissance? p. 41 - 49.

The study examines the biomedical publications of the United Arab Emirates during the period 1998-2004 by searching the three databases PubMed, Current Contents and Embase.

PUBLICATIONS AND NEW PRODUCTS

JOURNAL ISSUES

BOOKS REVIEW

S. Isaac. National Vocational Qualifications: the candidates' experience. p. 50 - 57.

The aim of this paper is to examine the experience of studying for a National Vocational Qualification (NVQ) by past and present candidates in the library and information science sector, their reasons for choosing this qualification and its impact on completion.

Brief communication p. 58.

BOOKS REVIEW

Measuring Library Performance Principles and Techniques. Ed. P. Brophy. Facet Publishing, London UK. 2006. £ 39.95 (£ 31.96 to CILIP Members), hardback ISBN-10: 1-85604-593-5; p. 272. This book provides an account on the evaluation of library services of traditional and electronic libraries. It is structured to focus primarily on the intended service user (outcomes and impact perspectives), service management (output and process issues) and the building of services (inputs).

Rules & Guidance for Pharmaceutical Manufacturers & Distributors. 2007. The Orange Guide, that collates European and UK guidance documents and information on legislation relating to the manufacture and distribution of medicines for human use, has been updated from its last edition in 2002. Compiled by the Inspection and Standards Division, Medicines and Healthcare products Regulatory Agency (MHRA), London, UK is published by the Pharmaceutical Press.
<http://www.medicinescomplete.com>

Surgical Treatment of Orthopaedic Trauma. Eds. J. Stannard, A. Schmidt, P. Kregor. Thieme Publishers, N.Y., Stuttgart, 2007. 299.95, ISBN-13 9783131369413; p. 976. The book is a multimedia reference tool covering the surgical management of injuries. The book is accompanied by four high-quality DVDs, with over 18 hours of surgical videos.

Ethics of Emerging Technologies: Scientific Facts and Moral Challenges. Eds. Thomas F. Budinger, Miriam D. Budinger. John Wiley & Sons, 2006; ISBN: 978-0-471-69212-6 Hardcover, p. 512. The text discusses ethical problems and possible approaches to resolving conflicts associated with new technologies in the context of the global community. Some of the topics are: Human health and environmental effects of alternative energy production methods; plagiarism and authorship, genetic modification of organisms, human and animal experimentation, and many others.

NEW JOURNALS

PLoS One is an international, peer-reviewed, open-access, online publication from the Public Library of Science (PLoS). It welcomes reports on primary research from any scientific discipline. Each submission will be assessed by a member of the PLoS One Editorial Board before publication. This pre-publication peer review will concentrate on technical rather than subjective concerns and may involve discussion with other members of the Editorial Board and/or the solicitation of formal reports from independent referees. If published, papers will be made available for community-based open peer review involving online annotation, discussion, and rating.
<http://www.plosone.org>

PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda

PAPERS REVIEW

How impact factors changed medical publishing and science.

H. Brown, *BMJ*, 2007, 334, 561

E-books fail to fly into users' hands.

T. Caldwell. *Information World Review*, March 2007, Issue 233, 8.

INFORMATION SOURCES... WEB BASED

dbGaP (database of Genotype and Phenotype): The National Library of Medicine (NLM) announces the introduction of dbGaP, a new database designed to archive and to distribute data from genome wide association (GWA) studies. GWA studies explore the association between specific genes (genotype information) and observable traits, such as blood pressure and weight, or the presence or absence of a disease or condition (phenotype information). Connecting phenotype and genotype data provides information about the genes that may be involved in a disease process or condition, which can be critical for better understanding the disease and for developing new diagnostic methods and treatments.

<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=gap>

Openarchives.eu is the European guide to OAI-PMH compliant digital repositories in the world. This is not a search engine to find metadata stored in the repositories but a searchable index of the repositories themselves.

<http://www.openarchives.eu/>

Nature Network. The Nature Publishing Group announces the launch of Nature Network, a new free online networking website for scientists worldwide. Nature Network is the online meeting place to gather, talk and find out about the latest scientific news and events.

<http://network.nature.com/>

Google patent. All patents available through Google Patent Search come from the United States Patent and Trademark Office (USPTO). Patents issued in the United States are public domain government information, and images of the entire database of U.S. patents are readily available online via the USPTO website. Google Patent Search covers the entire collection of patents made available by the USPTO—from patents issued in the 1790s through those issued in the middle of 2006. Patent applications, international patents, or U.S. patents issued over the last few months are not included.

<http://www.google.com/patents>

HEALTH Map brings together disparate data sources to achieve a unified and comprehensive view of the current global state of infectious diseases and their effect on human and animal health. This freely available Web site integrates outbreak data of varying reliability, ranging from news sources (such as Google News) to curated personal accounts (such as ProMED) to validated official alerts (such as World Health Organization). Through an automated text processing system, the data is aggregated by disease and displayed by location for user-friendly access to the original alert.

<http://www.healthmap.org/>

PUBLICATIONS AND NEW PRODUCTS

NEWS FROM EDITORS

FORTHCOMING EVENTS

NEWS FROM EDITORS

Nature Publishing Group (NPG) announces the launch of **Nature Education**, a new venture to develop innovative educational resources and tools for science students and their professors. Nature Education will take a non-traditional approach to the rapidly-evolving college education market, focusing primarily on creating leading edge, digitally-based, learning solutions in biology, chemistry and physics.

<http://www.macmillan.com/16January2007NatureEducation.asp>

John Wiley & Sons, Inc. announced that it has finalized the acquisition of the outstanding shares of **Blackwell Publishing Ltd.**, one of the world's foremost academic and professional publishers. Blackwell's publishing program is being merged with Wiley's global scientific, technical, and medical business. The merged business is now the largest of the three businesses owned by John Wiley & Sons, Inc.

<http://eu.wiley.com/WileyCDA/Section/id-301452,newsId-2292.html>

BioMed Central announces that their search engine will automatically suggest alternatives for mistyped queries when searching BioMed Central journals. The spelling suggestions on the site of Biomed Central are powered by the National Library of Medicine's technology, and so are optimized to handle biomedical terminology.

www.biomedcentral.com

Google's library project. A new partnership between the **Princeton University Library** and Google soon will make approximately 1 million books in Princeton's collection available online in a searchable format. In a move designed to open Princeton's vast resources to a broad international audience, the library will work with Google over the next six years to digitize books that are in the public domain and no longer under copyright.

<http://www.princeton.edu/main/news/archive/S16/84/71S02/index.xml>

FORTHCOMING EVENTS

6-11 May 2007, Chapel Hill-Durham, NC, USA

4th International Evidence Based Library & Information Practice Conference

For further information: <http://www.eblip4.unc.edu>

22-24 May 2007, Prague, Czech Republic

Inforum 2007

13th Annual Conference on Professional Information Resources

For further information: <http://www.inforum.cz/en/>

28 May – 1 June, 2007, Ottawa, Ontario Canada

Capitalizing on Health Information

2007 Annual Meeting and Conference of the Canadian Health Libraries Association

For further information: <http://www.chla-absc.ca/2007/>

PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda

28 May - 2 June 2007, Settignano, Florence (Italy)

Digital Libraries for the Digital Librarian

Making the Journey from Traditional to Digital Libraries

Delos-NSDL Summer School

For further information:

http://www.delos.info/index.php?option=com_content&task=view&id=566&Itemid=305

17 June 2007, Barcellona, Spain

PW4: Pushing the frontiers of HTA Information Management

The IRG workshop

For further information: http://www.htai.org/barcelona-2007/workshop_pw4.asp

19 -21 June 2007, Manchester, UK

Joint Use Libraries, an international conference

For further information: <http://www.ebase.uce.ac.uk/events/joint-use-conference.htm>

21-27 June, 2007 Washington D.C., USA

2007 ALA Annual Conference

For further information: <http://www.ala.org/>

13 – 16 August, Boras, Sweden,

6th International Conference on Conceptions of Library and Information Science: "Featuring the Future"

Swedish School of Library and Information Science, University College of Boras & Goteborg University

For further information: <http://www.hb.se/colis/>

12-15 September 2007, Krakow, Poland

Pathways to new roles: The Education, Training and Continuing Development of the Health Library & Information Workforce

EAHIL Workshop 2007

For further information: <http://www.bm.cm-uj.krakow.pl/eahil/index.php>

11-14 November 2007, Athens, Greece

Pharma-Bio-Med 2007

For further information: <http://www.pharma-bio-med.com>

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EAHIL Secretariat moves from Utrecht to Maarsssen

The successful transition from membership payment to a “free membership” for European medical librarians and health information professionals has drastically reduced the workload of the Secretariat, thanks to the well-designed membership webdatabase. It is foreseen that by further use of electronic communication channels and the electronic election procedure there will be even less work for EAHIL Secretariat in the coming years.

The time spent on running the Secretariat and the auditing of EAHIL finances over the last year come close and include a substantial doubling of work.

Early March NVB Bureau announced change of staff members and EAHIL Board considered this the right time to take the decision of moving the Secretariat to the auditor’s office.

On April 16th Manuela Colombi (Treasurer) and Suzanne Bakker (President) met with the parties involved and it was agreed upon that the books will be closed by May 1st by NVB Bureau, the files (electronic and paper, including the old archives) are then to be moved by the end of May, and from June 1st onwards Leijte & Regoort office will provide secretarial and financial support for EAHIL, catching up from the closing of files by May 1st.

Dutch law allows that control of the bookkeeping is done by two members. With the bookkeeping in professional hands, this will be an easy task. At the General Assembly in Krakow we will appoint two members to do this review in early 2008 for the bookings of 2007.

From May 1st the new EAHIL postal address will be:

**EAHIL, c/o Leijte & Regoort, P.O. Box 1388, NL-3600 BJ Maarsssen,
fax: +31 346 550 876.**

Maarsssen is located between Abcoude (home of the Supervisor) and Utrecht; the Leijte & Regoort offices are near the railway station in Maarsssen.

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Whilst the Editorial Board endeavours to obtain items of interest, the facts and opinions expressed in those items are the responsibility of the authors concerned. They do not necessarily reflect the policies and opinions of the Association.

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Instructions for Authors

Manuscripts in English should be about 3-4 standard (1.50 space) typewritten pages and provided by e-mail. Informative title, short summary and keywords should be provided. References should be expressed in Vancouver style. Authors of submitted papers accept editing and re-use of published material by EAHIL including electronic publishing of the Newsletter on the EAHIL website. From 2006 all articles will be peer-reviewed - except for meeting reports, product reviews, opinion and discussion papers, and news items. Illustrations may be sent electronically, preferably either TIFF (tagged image file format) or EPS (encapsulated postscript) formats. If taken by a digital camera they must be 300 dpi resolution. For best results, illustrations should be much larger than the desired final size.

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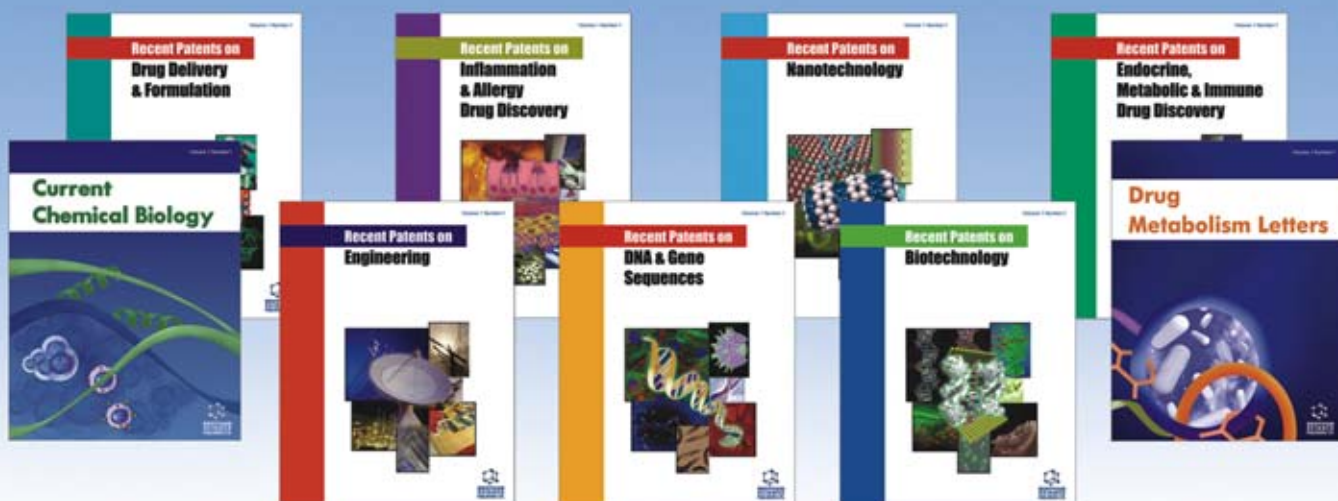
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