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2006



www.eahil.net

JOURNAL

OF THE EUROPEAN ASSOCIATION
FOR HEALTH INFORMATION AND LIBRARIES



**Europe as an Open Book
10th EAHIL Conference
Cluj, 11-16 September 2006**

**REGISTRATION IS OPEN
FOR THE 10th
EAHIL CONFERENCE**

Go to: www.eahilconfcluj.ro

**The EAHIL Election Committee
is seeking candidates
for the Presidency
and for Board membership**

**Complete your Nomination Form inside
Deadline: 31 March**

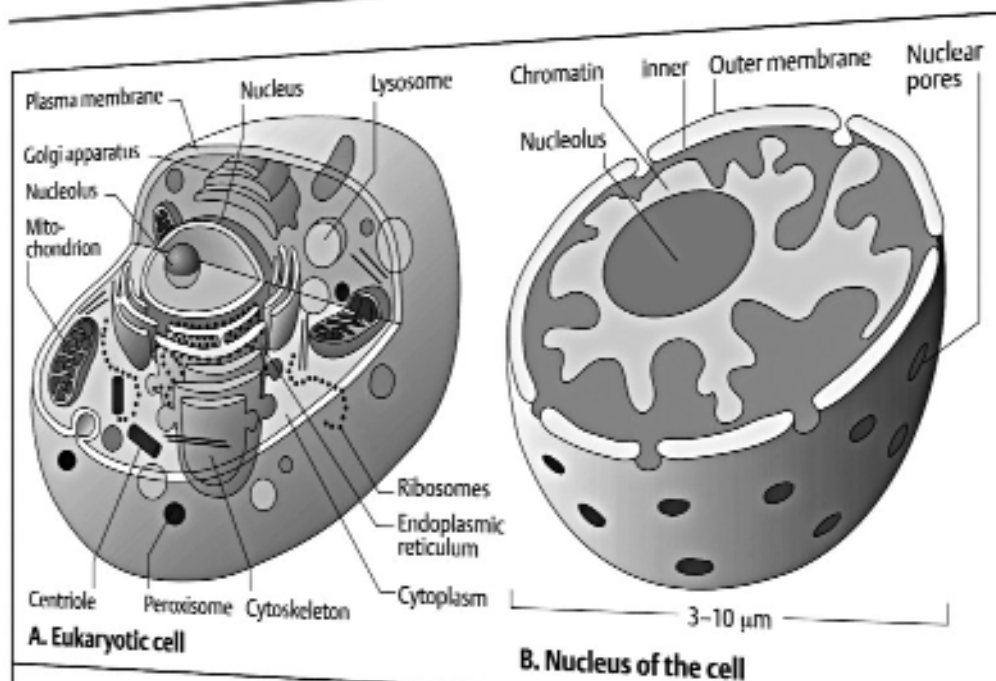
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HOME BOOKS SEARCH HELP

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Color Atlas of Genetics

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ELECTIONS FOR THE
EAHIL PRESIDENT
AND
EXECUTIVE BOARD MEMBERS

Oslo, January 30, 2006

To all EAHIL members

Herewith the announcement that in 2006 elections will take place for the President and Executive Board members, for whom the term of office will end on 1.1.2007:

Arne Jakobsson (President) 2nd 2-years-term, will become Past-president

Suzanne Bakker - will stand for President

Meile Kretaviciene - will stand for re-election

Tony McSeán - will stand for re-election

Márta Virágos - will stand for re-election

The election committee is seeking candidates both for the Presidency and for Board membership. **Candidates should be nominated by two EAHIL members** (see form on the next page). The President's election is separate from the election of the other Board members.

EAHIL Nominations Committee

It is very important to find and promote new and energetic people to take EAHIL forward. To improve the present arrangements of nominating members as EAHIL president and to the EAHIL board, the EAHIL Board has decided to set up a nomination committee. This was approved at the Council meeting and at the General Assembly in Palermo 2005. The nomination committee should have members from North, South, East and West Europe, who would actively seek out and encourage active EAHIL members to stand for EAHIL President and Board elections. **Of course, this does not preclude any two "ordinary" members from nominating someone;** it is just an extra measure to try to encourage new people to come forward and to revitalize the process. Members of the EAHIL Nomination Committee are: from the North (Eva Alopaeus); the West (Bruce Madge) and the East (Sally Wood-Lamont), from the South (Luisa Fruttini).

The Board particularly welcomes nominations of candidates from countries not yet represented on the Board. The Board will co-opt as deputy members the two unelected candidates from the Board election who received the largest numbers of votes.

Please send the properly and fully filled form **NOT LATER THAN March 31st 2006** to the

EAHIL Election Committee
EAHIL Secretariat
Nieuwegracht 15
3512 LC Utrecht
The Netherlands
fax: + 31 30 231 1830

on behalf of the election committee:

Arne Jakobsson
EAHIL President

EAHIL

European Association for Health Information and Libraries



NOMINATION FOR	President* (2-years term) Executive Board member* (4-years term)	2006 election
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*please clearly mark what is applicable and strike out the other option

I, EAHIL member Address: City: Country: E-mail: Date: Signature:	I, EAHIL member Address: City: Country: E-mail: Date: Signature:
hereby nominate as candidate for President*/Board member* in the 2006 EAHIL elections:	

Candidate for Presidency* / Executive Board membership*: Name: Function: Institutional address: City & Country: Phone: Fax: E-mail:

Candidate's agreement:

I agree to be a candidate in the 2006 elections and am willing and able to serve on the Executive Board of EAHIL from 2007-2008 or 2007-2010 respectively.

Date: Signed (by candidate):

This form should be sent not later than **March 31st, 2006**, to:

EAHIL Election Committee, EAHIL Secretariat, Nieuwegracht 15, 3512 LC Utrecht, The Netherlands phone + 31 30 2619663, fax + 31 30 2311830



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Journal of the European Association for Health Information and Libraries

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Editorial

Hello Everyone

I wish you all a wonderfully successful 2006. May I take this opportunity to thank everyone who contributed to the *Journal of EAHIL* in 2005 and ask everyone to consider sending in contributions in 2006. The success of the Journal depends on its members.

From 2006 all articles - apart from meeting reports, product reviews, opinion and discussion papers, and news items will be subject to peer-review. We shall use EAHIL members as peer-reviewers according to their fields of interest and/or expertise. Anyone who would like to participate as a future peer reviewer, please contact me.

The following themes for 2006 have been proposed:

May 2006	Theme Issue: Health Technology Assessment	Deadline: 15 April 2006
August 2006	Theme Issue: Evidence-Based Medicine	Deadline: 15 July 2006

This issue is the first number of volume 2 of the *Journal of EAHIL* and in addition to feature articles we are reporting on the EAHIL Board Meeting which took place in London on the 20th January. Also 2006 is election year and the nomination form for the EAHIL President and Executive Board members is at the beginning of this issue. Please take the time to study the newly designed form and to send in your choices.

As you all know this will be a very busy year for myself and Ioana Robu in Romania as co-organisers of the 10th EAHIL Conference, 11-16th September in Cluj-Napoca. The International Programme Committee, chaired by Benoit Thirion will meet in Cluj on the 2-3 March to select papers and posters and to decide on the final programme of the conference.

The Local Committee is already working hard together and we are very lucky to have as Joint Co-ordinators, Aileen Wood and Susan Fairlamb. Aileen and Susan will be in charge of the Registration and Information desk throughout the conference, the hotspot of any conference, while Eve Hollis will be the Communications Officer. In addition, as I will be otherwise occupied, Eve will be the Chief Editor of the *Transylvanian EAHIL Echo*, the conference newsletter.

Librarians chosen from all over Romania will assist Aileen and Susan, while a number of librarians from the Cluj Medical Library will be assisting in the day-to-day organization of the Conference centre. We are recruiting students, fluent in English, German, French or Italian and Spanish, as guides on the complimentary buses provided to take participants to their respective hotels, which will be on hand to meet all participants flying to Cluj airport. They will also assist in the Thursday afternoon local tours as well as the free whole day tours offered on Saturday 16th September.

Registration for the conference will be open from the **15th February**. Access our site for more information regarding the scientific and social programmes, the Continuing Education Courses, as well as accommodation and flights: www.eahilconfcluj.ro Regarding flights, our travel agency in Cluj naturatravel@cluj.astral.ro has some excellent offers so before booking any flights try them first!

Lastly do not hesitate to get in touch with myself (address below) or Ioana if there are any other queries: irobu@umfcluj.ro We look forward to hearing from you.

Sally Wood-Lamont
Editor-in-Chief
swood@umfcluj.ro

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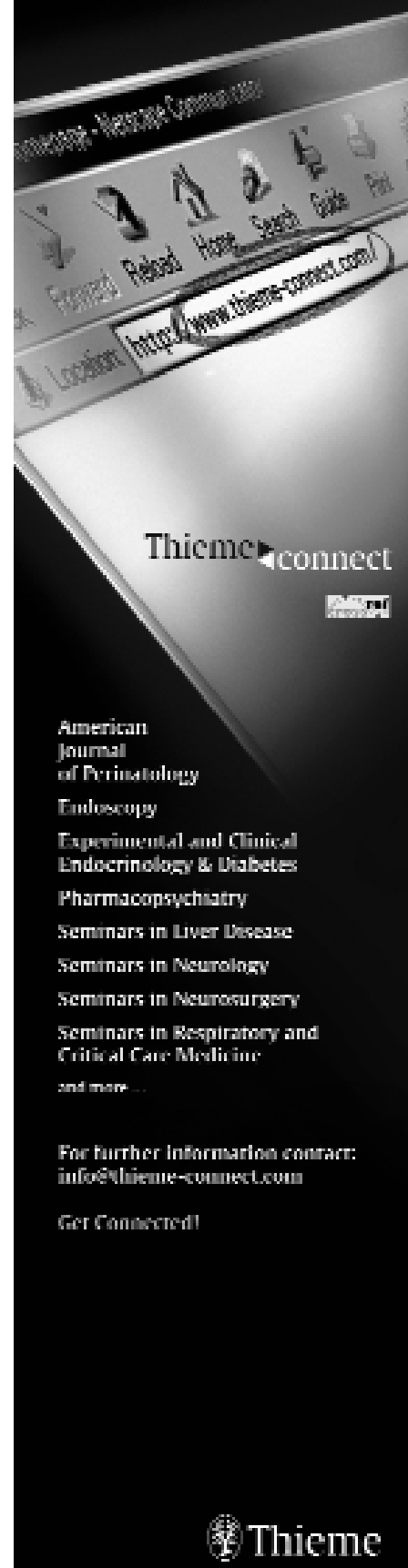
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News from our Association

Letter from the President



EAHIL's strength, influence and ability come from its members. In 2004 the General Assembly voted that personal EAHIL membership for European members would become free of charge from 2006.

This bold decision will hopefully increase and further develop our excellent network of active members throughout all regions of Europe, regardless of their ability to pay membership fees.

All professionally active medical librarians/health-care librarians/information officers working in a medical and health science library in Europe are now invited to fill in the online Membership Application form for FREE EAHIL membership. New applications will be checked for validity by an EAHIL Council Member from the applicant's region of Europe (just to make sure bogus applicants do not get added to our database).

The form is easy to complete. Applicants must enter their professional address but can decide if they wish to include their personal address. The system is password controlled and only validated EAHIL Members have access to the database, which existing members have already found to be both user-friendly and very useful. It is extremely important to make sure the list is accurate and up-to-date. Members will be responsible for adding and correcting their own data, and will be expected to enter the database at least once a year to renew their membership.

All EAHIL activities are set to continue and increase, as we welcome new and active EAHIL Members to join us in motivating, developing and uniting medical and health information professionals across Europe and beyond.

I encourage you all to recruit new members to EAHIL. The application form is available on the EAHIL web (www.eahil.net) under the heading Membership Database. As soon as their application is approved, new members will have all EAHIL membership benefits. All EAHIL members can receive a printed copy of *Journal of the European Association for Health Information and Libraries* free of charge or be alerted when *Journal of EAHIL* is available in PDF on EAHIL web. EAHIL members will also receive first-hand information on future EAHIL Conferences and Workshops, plus a wide range of "continuing education" seminars and practical workshops in conjunction with these meetings. EAHIL members can also apply for scholarships. EAHIL is planning to launch a professional Certification scheme soon. All members are invited to actively participate in the work of developing EAHIL.

2006 election year and EAHIL Nominations Committee

It is very important to find and promote new and dynamic people to take EAHIL forward. The present arrangements of nominating members to the post of EAHIL president and to the EAHIL board could be improved. The idea of a Nominations Committee was discussed and welcomed both by the Board and Council members at their meetings in Palermo. It was agreed to discuss the matter further at the General Assembly, and to make sure a Nominations Committee was set up.

At the General Assembly (not quorated) it was decided to have members from Northern, Southern, Eastern and Western Europe, who would deliberately seek out and encourage active EAHIL members to stand in Council and Board elections. Of course, this would not preclude any two "ordinary" members from nominating someone of their own choice. It would simply be an extra measure to try to encourage new people to come

News from our Association

Arne Jakobsson

forward and to revitalize the process. Members present agreed that it was a good idea. Volunteers were found from the North (Eva Alopaeus), the West (Bruce Madge), the East (Sally Wood-Lamont) and the South (Luisa Fruttini).

In this issue of *Journal of EAHIL* you will find the nomination form for the EAHIL President and Executive Board members. Any two EAHIL members can nominate candidates. The role of the nomination committee is complementary, i.e. to actively seek out and encourage active EAHIL members to stand in the President and Board elections. The election will take place late spring 2006. All EAHIL members will receive voting papers by mail.

2005 has been a successful year

EAHIL is a thriving organization with more than 400 members from around 25 European countries and members from outside Europe. We can look back at a very successful and active year.

Our Italian colleagues organized a magnificent workshop in Palermo. EAHIL co-sponsored the IFLA Open Access seminar and a reception for medical and health librarians attending IFLA in Oslo. In addition, EAHIL sponsored a parallel session on the theme of quality in health information services at the 9. ICML in Salvadore, Bahia.

The Finnish Medical Library Association (Bibliothecarie Medicinæ Fenniae - BMF) agreed to organize the 11. European Conference of Medical and Health Libraries in Helsinki, 2008.

The EAHIL membership database was launched.

Benoit Thirion agreed to be the new EAHIL Webmaster and the EAHIL web has now moved to France. Due to administrative problems with our

present domain name service provider, we had to register a new domain name **www.eahil.net** at another service provider.

A new Special Interest group of WHO Documentation Centres in Europe was established.

EAHIL Newsletter changed its title to *Journal of the European Association for Health and Information Libraries*, and will in the future also include Peer Reviewed articles.

EAHIL continued to closely liaise with other organizations.

Tony McSean represented EAHIL at the MLA meeting in San Antonio, May 2005.

Marta Vigaros represented EAHIL on the Editorial Board of the *Health Information and Libraries Journal*.

Suzanne Bakker represented EAHIL at the meeting of CERTIdoc and LIBER. LIBER had invited EAHIL to discuss options for cooperation on a European level.

Former EAHIL president Elisabeth Husem was awarded the Royal Medal of Merit in silver for her tireless work for the medical library profession over many years.

I would like to thank all EAHIL members for their hard and successful work in 2005 and I am looking forward to an equally successful 2006.

Arne Jakobsson
p.a.jakobsson@ub.uio.no

News from our Association

Report on the Meeting of the EAHIL Board in London, 20th January, 2006



The meeting of EAHIL's Executive Board took place in London, on January 20th, 2006, at the Elsevier Offices. Only Manuela Colombi was unable to attend the meeting.

President Arne Jakobsson greeted those present (Board Members Suzanne Bakker, Linda Lisgarten, Meile Kretaviciene, Márta Virágos, Helena Bouzková, Tony McSeán and Journal Editor Sally Wood-Lamont). The minutes of the previous meeting (22nd June, 2005) was agreed upon as a correct record of the proceedings. One copy was signed officially by the President for the Archives. Two matters not otherwise covered by the agenda came up: the proposal of the award of the best conference paper and the celebration of EAHIL's 20-year anniversary.

Concerning the President's Report, Arne Jakobsson had previously circulated his report by e-mail to the Board. There were no special comments pertaining to the Report, which will be made available to all EAHIL members on the Web.

The Treasurer's report will be published after the auditors' report and discussed in detail at the General Assembly in Cluj. The Board agreed that the figures for the budget year of 2005 were very promising, and the EAHIL Balance Sheet for 2005 shows that the Association's budget, with a reserve of 121,000 euros, is in a very healthy condition.

Suzanne Bakker, Supervisor of the Secretariat reported that the membership database at present contains 415 valid records. The records

in three registration systems were compared and synchronized: the preliminary web-database, the data at the Secretariat and the files in use for mailing the *Journal*.

The financial archives dating back to the period of the Association's administration in Brussels have been cleaned up and all privacy-sensitive material has been destroyed (Dutch law requires 7 years' archive). The archives of the Association's business (correspondence, meetings and events) were reorganized in order to integrate the files from the Brussels, Amsterdam and Utrecht periods.

An inventory of back issues of the *Newsletter* and also of the Proceedings books evidenced that are no copies in the archive of issues: 8, 15 and 26 and that there is only one copy of issue 12. For most issues there are 5-10 copies in stock. Recent issues: approx. 25 copies in stock. If any EAHIL member has a copy of issue 8,15 and 26 please contact Suzanne.

It was also reported that the accountant would check the book-keeping halfway into the fiscal year as well as before closing the books; the Secretariat will produce financial overviews for the Treasurer every quarter year.

What is also promising is that there is a slow growth in the number of advertisements in the *Journal*; the fees have been increased slightly, with a surcharge for covers and colour printing. There is also an interest among the affiliated members in purchasing self-adhesive address labels for sending out their mailings.

Regarding the EAHIL *Journal*, Sally Wood-Lamont reported that from January 2005 the EAHIL *Newsletter* was replaced by the *Journal of the European Association of Health*

News from our Association

Marta Viragos

Information and Libraries. In the first volume it had two colour middle page spreads, numbers 1 and 3. These were very successful, so much so that in 2006 the Editor will have at least three colour spreads from 4 to 8 pages. This will be financed by the advertisers who are now being offered a chance to buy colour advertising space. Nature, Bentham, Ovid and Elsevier have already bought colour advertising space for the first issue of 2006. In 2005 the theme issues comprised, *European WHO Documentation Centres, Certification and Education* and the fourth-issue featured articles on Open Access. Starting with 2006 articles will be peer-reviewed.

It is evident now that the Journal of EAHIL continues to be published at a good profit but in order to keep printing costs down it is suggested that if there are many EAHIL members at the same library, then only one print version be sent. The Journal of EAHIL of course is also available in PDF on the EAHIL website.

Concerning the EAHIL Membership Database, Arne Jakobsson reported that the membership database is working now. The database has 3 authorisation levels: (1) a normal one for the regular members to check and modify their own data, (2) the level of council members: they can check and modify the data of their own country's members and (3) the supervisor's level. The membership database has many good features: through the database there will be a possibility to send letters (e-mail) to all the members, or create special cluster listings (eg. national lists). From now on the labels for the *Journal* mailing will be printed out also from the database. Arne Jakobsson reported that already from the beginning of January 2006 there were 145 new

member registrations. The procedure is very simple: first the applicant registers, then his/her own national Council member approves the applicant. The Board will receive notice of new members and a list will be published regularly in the *Journal*. The President pointed out that a substantial problem had arisen whereby 170 old members had not renewed their membership and their data had not been incorporated into the database. It is the Council's duty to identify these members and send them a reminder to renew their membership.

Suzanne Bakker prepared the new application form for colleagues outside Europe. The Board agreed that members in the USA should be encouraged to register through the MLA.

With respect to the EAHIL Website it seems that a favourable solution has been found in that Benoit Thirion, Council member from France, has undertaken its development and maintenance. President Arne Jakobsson reported that EAHIL had now forever lost the domain name www.eahil.org. The new EAHIL domain name will be printed on the *Journal* front cover. It was also agreed that information about the Association should be updated by Linda Lisgarten.

Regarding the EAHIL nominations committee and arrangements for electing EAHIL Board members and Councillors, the Board agreed that the nomination process should be improved. At the general Assembly it was decided to have members from Northern, Southern, Eastern and Western Europe, people who would deliberately seek out and encourage active EAHIL members to stand in Council and Board elections. For the future of EAHIL it is important to find new talent.

News from our Association

Report on the Meeting of the EAHIL Board in London, 20th January, 2006

Volunteers were found from the North (Eva Alopaeus); the West (Bruce Madge), the East (Sally Wood-Lamont), and the South (Luisa Fruttini). The Board's other concern is to make the work of the Council more productive. It was also agreed that on the EAHIL web page the date of the term of each Board and Council member should be specified. It was also agreed that the new councillors election would be organized after the Cluj General Assembly.

With regard to the EAHIL Subgroups, Linda Lisgarten reported that three written reports had arrived, one from the PHING, one from the group of WHO Documentation Centers and one from EVLG. These reports can be read in this current issue. All three groups intend to host a parallel session at the 10th EAHIL Conference in Cluj-Napoca.

EAHIL Scholarships: the Board would like to continue giving at least the same number of grants at future conferences. The Board decided to support 6 librarians and help 2 more from the Veterinary group. The Board also agreed that EAHIL should support more professional development in the future.

Future events:

Regarding future conferences, the Board agreed that a standard abstract and conference application form should be developed to facilitate future conference organizers.

2006 EAHIL Conference in Cluj-Napoca: Sally Wood-Lamont reported that the 10th EAHIL Conference would be held on September 11-16, 2006. Sally also reported that the International Program Committee chaired by Benoit Thirion would meet on 2-3 March, 2006, to select the papers and to

discuss the definitive conference program. The continuing education courses have already been put together by Eva Alopaeus and Patricia Flor and are on the web page. Sally reported also that the registration would be open on February 10th.

2007 EAHIL Workshop in Kracow: Barbara Niedzwiedzka, chair of the International Program Committee reported that the date of the conference would be 12-15 September 2007. A welcome page has already been opened. The IPC fixed the workshop theme which will be *The Education, Training and Continuing Development of the Health Library and Information Workforce*. The organizers would like a real workshop with a few introductory papers and small-group discussions. A detailed outline of the scientific program was sent to the Board.

2008 EAHIL Conference in Helsinki: Piirjo Rajakiili reported that the Finnish Medical Library Association had accepted the invitation to host the 2008 EAHIL Conference. She suggested 23-26 June for the date of the conference. There are four prospective conference sites (the Marina Conference Center, the Finlandia House, the Biomedical Center and the Technical University).

2009 EAHIL Workshop: the Board received two excellent applications. After a long discussion the Board voted to support the proposal submitted by the Health Science Libraries Group (a section of the Library Association) of Ireland to host the EAHIL Workshop in 2009 in Dublin.

Márta Virágos
marta@lib.unideb.hu

News from our Association

EAHIL SPECIAL INTEREST GROUPS REPORT



At the meeting of the EAHIL Board in London in January 2006, members received an update report on the activities of the EAHIL Special Interest Groups (SIGs) from Linda Lisgarten, SIG Co-ordinator.

PHING, the Pharmaceutical Interest Group, reported that it had successfully launched its own webpages (within the EAHIL website), containing a wealth of information on databases, journals and other pharmacy-related resources which had been assessed and evaluated by PHING members, and which would be regularly reviewed and amended. Early feedback had indicated that this had already proved to be a very useful resource. PHING members at the Palermo Workshop had met together for a useful interchange of ideas for the future, and had confirmed that the joint Chairs of the group would be Giovanna Miranda and Linda Lisgarten, with Michelle Wake as Secretary. It had also been agreed that there would be a Business Meeting and a Parallel Session of pharmaceutical papers, if possible, at the 10th EAHIL Conference in Cluj-Napoca, September 2006. It was also decided that the Evaluation of Pharmacy Databases project would be pursued, and a full progress report on developments will be given at Cluj-Napoca.

The Veterinary Interest Group, known as EVLG, had plans to make their reserve fund available as special Scholarships at the Cluj conference. The EAHIL Board discussed this and it was agreed that two Scholarships of special interest to applicants from the veterinary field would be made. These would be in addition to the six general Scholarships already agreed. It was hoped that this might increase interest from veterinary librarians and information workers in attending the conference in Cluj-Napoca in 2006.

The World Health Organisation's Documentation Centres (WHO DC) had arranged a session in Santander at the 9th EAHIL Conference in 2004 and had been officially adopted by the EAHIL Board as an EAHIL SIG at their meeting in January 2005. THE WHO DC SIG had set their objectives as follows:

- To enhance communication between Documentation Centres in Europe.
- To facilitate networking between WHO DCs.
- To facilitate sharing of experiences in managing WHO DCs.

It was proposed that the 10th EAHIL Conference in Cluj would be a good place to further the aims of the Group and to hold a Business Meeting and hopefully some relevant papers. It was agreed that articles about WHO DCs should be submitted to the Journal of EAHIL. Officers of the Group were provisionally proposed as Pina Frazzica, Paivi Pekkarinen and Meile Kretaviciene.

Linda Lisgarten
linda.lisgarten@ULSOP.AC.UK

News from our Colleagues

News from MLA



MLA '06 Phoenix, Arizona

MMLA members are gearing up for Annual Meeting *Transformations A-Z* which will be held in Phoenix, Arizona May 19-24, 2006. Atul Gawande,

MD, MPH., practicing surgeon, accomplished writer, teacher and speaker will open the conference as the first plenary speaker, giving his perspective on modern medicine. Gawande's book *Complications: A Surgeon's Notes on an Imperfect Science*, was a finalist for the National Book Award in 2002. Gawande also writes about medicine and science for *The New Yorker* magazine and is a regular columnist for *The New England Journal of Medicine*.

The last morning of the conference will feature a session on *Integrating Reference Information into the Electronic Health Record: Practice and Standards*. Physicians, informaticians and librarians will explore two approaches currently in practice - clinical portals, which aggregate and simplify access to content, and clinical "info buttons" which use information from the clinical system to search and present information from appropriate resources.

As is customary, the International Visitors reception will be held on Sunday evening at 6 pm. If you are planning to travel to Phoenix, do make hotel reservations early, and the

nearby hotels are filling up. I do hope to see many of you there.

Global Initiatives Task Force Update

In 2005, the MLA Board had accepted nearly all the recommendations of the Global Initiatives Task Force. At the Board Meeting in February, the Board will approve a charge and appoint a Librarians Without Borders Task Force to implement some of the recommendations of the Global Initiatives Task Force. MLA's Global Initiatives Program will be named *Librarians Without Borders*. Also, in the near future, MLA will establish the MLA Award for Excellence in International Service.

Hurricane Katrina Relief Effort

In the last column I reported on MLA's efforts to assist the libraries and librarians in Louisiana, Mississippi, Alabama and parts of Georgia and Florida affected by the devastating hurricane last fall. I am pleased to report that MLA has collected nearly \$8,000 to date and will match those funds. These funds can be used for collections, consortial memberships and computers. MLA will continue to raise funds, as the rebuilding will no doubt take a very long time.

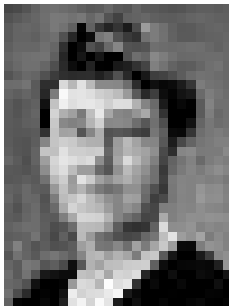
Eve-Marie Lacroix

MLA Representative to EAHIL
lacroixe@mail.nlm.nih.gov

News from our Colleagues

Tuulevi Ovaska

Oili Puukko



The 25th Anniversary Seminar of Bibliothecarii Medicinae Fenniae, 11th of November 2005

The Finnish Association of Medical Librarians, Bibliothecarii Medicinae Fenniae (BMF) celebrated its 25th

anniversary by arranging in Helsinki a seminar entitled *Evidence Based Librarianship in Health Libraries*.

There were more than 80 participants, and the organizers were happy to see that among them were also librarians from other disciplines than health. Evidence-based librarianship or evidence-based information practice raises interesting questions currently and supports new approaches in all fields of librarianship, though the target in the seminar was that of health and medical libraries.

The keynote speaker of the seminar was a true authority of evidence-based librarianship /evidence-based information practice, Director of Information Resources and Senior Lecturer Andrew Booth from the University of Sheffield School of Health and Related Research. The second foreign speaker was Anne-Marie Haraldstad from the University of Oslo Library of Medicine and Health Sciences.

Andrew Booth's presentation called *Blue Skies or Slippery Paths? Prospects and Pitfalls for Evidence Based Information Practice* gave the interested audience a good overview of the backgrounds, present situation, and future prospects of evidence-based information practice.

Our work is changing rapidly; not only the technology but also the methods and contents are changing. Part of the work of librarians and information specialists today is to teach and advise their patrons how to use information resources, but when it comes to using research in developing our own work and territory, we seem to forget to make good use of the material that we tell the others to utilize.

The principal idea of evidence-based librarianship /evidence-based information practice is to put theory into action, and to use it in developing library services. It improves the quality of professional decisions and practices by making us ask questions, search evidence, find research results. The objective of evidence-based information practice is information professionals who are able and willing to ask the essential questions to develop their work, are critical, considerate and can challenge the authority of practices grounded on the thinking best explained by saying *it has always been done this way*.



Seminar audience

They are also eager to question their own prevailing practices, are able to give and take feedback, are capable of utilizing research, and

News from our Colleagues

Promoting Evidence Based Librarianship in Health Libraries in Finland

ready to learn but also to communicate their own experience and knowledge.

Anne-Marie Haraldstad's presentation was called *Information literacy teaching - the evidence-based librarianship approach: wishful thinking or a real possibility? The University of Oslo experience*. She spoke about adapting an evidence-based viewpoint into teaching information literacy in the medical faculty of the University of Oslo.

In the afternoon the seminar program continued in Finnish, and the audience was presented with five case studies on how to apply theoretical background and evidence gathered from user surveys in developing library collections and services. The subjects ranged from teaching information literacy to undergraduate students and improving

Most these presentations were based on theses, and cooperation between libraries and universities' departments of information studies, e.g. between practice and theory, was recommended as a means of putting their day's subject into action. The presentations are available at <http://www.terkko.helsinki.fi/bmf/>



Anniversary Dinner



New honorary members : Liisa Öberg and Liisa Salmi

information retrieval services for researchers in the National Public Health Institute to developing journal collections in the National Library of Health Sciences Terkko by means of citation analysis, and collecting data about laypersons' literacy of health information.

After the seminar *Bibliothecarii Medicinae Fenniae* continued the celebrations in an anniversary meeting where two well known names, Liisa Salmi and Liisa Öberg were designated as honorary members of the Association. Later in the evening the speakers and about 30 members of the Association gathered to enjoy an anniversary dinner together.

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FEATURE ARTICLES

Are Librarians Value For Money?



This is perhaps the most critical question which faces our profession. The rapid changes in information access and delivery have brought us up against new, and powerful, competitors for information services. Perhaps it is timely to consider information trends over the past ten years or so - in relation to what our clients and stakeholders want and need. Do the tools we use to justify our particular contribution to running library services effectively and efficiently, demonstrate our contribution to health care? And if so, what are they?

Earlier this year (2005) it was reported that there was to be a cutback in subject librarians at one of the British Universities. The reason given by the University authorities was that they did not deliver "value for money"¹. It was claimed that librarians had largely been superseded by the internet.

I am sure that this University (one that does not have a medical school) had strategic plans, business plans, performance indicators and quality systems in place that aspired to meet local standards of accreditation and even international standards. But it seems that this was not enough. So where are the weaknesses - what has gone wrong? Why do some people perceive instruments such as *Google* and the internet as providing greater value for money than librarians?

Internet access in developed countries is cheap compared to a professional librarian's salary. The information resources it can deliver (both free and subscription - to your desk) are more than enough - can, in fact, be too much. Over the past year ten years the trend has been:

1. *Towards electronic distribution of information* - some resources are only available digitally.
 2. *'One-stop shopping' and the integration of different kinds of information* - this is a world wide trend but these examples, from the U.K., are best known to me and demonstrate the trend.
- Biome, indexing and assessing the reliability of web resources
 - The National electronic Library for Health - delivering core resources to the U.K.National Health Service
 - Regional web resources which include relevant local information and policies

At first glance one might be forgiven for thinking that by producing these easy to use, reliable, and integrated resources librarians the world over may be contributing to their own demise!

¹ *Information World Review March 2005*, quoted in Ryan F. Surviving and thriving in a harsh world. *Update May, 2005*; 4(5):26-29.

FEATURE ARTICLES

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3. *Empowering the client* - I can understand how our objective of "empowering the client" might also lead to the perception (among non-librarians) that not only have electronic superstores been created but they are also "Do-it-yourself" superstores. "Do-it-yourself" is generally cheaper than employing a professional - provided that you can do it as well, or better, and if you have the time which would not be better spent doing something else.

Such perceptions are encouraged by the efficiency and ease of use of search engines such as *Google* and *Google Scholar*. So our clients may also share this perception. Where the infrastructure is efficient, they can access the information they want from a computer on their desk and, sometimes, from a hand held PDA - Personal Digital Assistant.

Client Stakeholders

In summary what our clients want and what electronic technology is increasingly able to give them is information that is:

- *Timely* - but this can be time consuming, especially if you are not familiar with the database or website
- *Relevant* - again time consuming if you need the most relevant or all the relevant literature for research. It is our business to know more about different databases than we are able to teach in one or two or even several tutorial sessions. For instance Global Health is not so widely used or available, as Medline, but its coverage of diseases of developing and tropical countries is greater, and may be essential to the query in hand.

- *Reliable* - at a macro scale librarians can and do recommend reliable sites to which access is available - increasingly we need to acquire skills to make some assessment of the reliability of a website or research paper.

I fear that many clients are too easily satisfied by services (their own or from others), that provides something (anything?) that is relevant and timely. The quality of the literature retrieved and completeness of coverage are not always given the priority that is necessary for good research and practice.

Budget stakeholders

What administrators or budget holders want is value for money and proof (preferably in dollars, euros or pounds) that they are getting it either by:

- *saving the institution money* - through the efficient use of expensive professional time or resources e.g. fewer diagnostic tests necessary
- *adding quality to the institutions aims* e.g. improving patient outcomes
- avoiding expensive court cases and claims for negligence
- *ensuring that the information resources bought are the best for their purposes* - who else is going to check the evidence against the hard sell? It seems to me that with the number of different services on offer it is not enough for our clients say that they like a particular package, without some assessment of other comparable services, based on hard data of relevance and quality.

FEATURE ARTICLES

Are Librarians Value For Money?

Evaluation tools

Setting quality standards, monitoring performance, and evaluation are valuable both for credibility to the outside world and for our own assessment of strengths and weaknesses. The downside is that they are time consuming and it would seem that they may not be enough without additional input from as many professional librarians as possible - if not all of us.

In the past we seem to have counted everything that moved - perhaps because automation allowed us to do so. As the EAHIL Workshop on the *Implementation of quality systems and certification of biomedical libraries*, Palermo, 2005, has demonstrated, times have changed for the better. To demonstrate that subject librarians have answered so many enquiries and done so many literature searches or teaching sessions may show that they have used their time efficiently, but does not show if their time has been spent effectively i.e. made a difference.

If we are to demonstrate value, then some measure of effectiveness of the advice or service provided is necessary - did it or will it save the client's time, increase their information skills, was it what they wanted/needed, was the format and medium of delivery acceptable etc., all leading up to - did they use it? This last is the most difficult and perhaps one of the most valuable measures.

A recent systematic review on the impact of library services on patient care by Alison

Weightman and Jane Wilkinson², has demonstrated that, though difficult, such research can and has been undertaken. The indications are that library services can influence patient outcomes in various ways - particularly in time savings and associated cost-benefits. Using this research a London Quality and Statistics Group is "working with librarians in and beyond the U.K. to develop a pragmatic but high-quality user survey instrument to measure the effect of the impact of a library service on its users."

We are in a changing situation which threatens our profession as well as providing new opportunities. Nothing can remain static. As others have found we can not stand still in devising standards and evaluating the contribution that libraries and librarians make to health. There may be some hard choices to make, but management and performance management in its broadest sense should not be so time consuming as to straight-jacket innovation and creativity.

We are outsourcing (to use a business term) much of what had to be done by professional librarians locally i.e. we can buy in or share cataloguing records, and install self-issue systems. This ought to give at least some of us the opportunity to develop more specialist professional information/ knowledge roles and it is already happening. The roles of librarians are becoming more diverse. We may be able to use or adapt some of the evaluation methods and standards used by other professions.

² Weightman AL The value and impact of information provided through library services for patient care: a systematic review. *Health Information and Libraries Journal* 2005; 22:4-25.

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- *Management* - a degree in management and business administration is already recognised as a good additional qualification for running libraries
- *Teaching qualifications* - are also viewed as valuable as the demand for training by and for librarians increases.
- *Subject specialization* - this requires greater knowledge of the particular health subject e.g. statistics, epidemiology - informationists, in the USA may have a biomedical background as well as a qualification in information. For those of us who do not have this background, it is important to learn something of the subject itself, in order to be able to respond more knowledgeably and intelligently to requests for subject related help.
- *Webmasters* - an eye for design and ensuring ease of use are important qualities, as well as the necessary skill to manipulate the software.
- *Editing and repackaging of information for different consumers* - this requires assessment of the original material and some knowledge of the subject. It is particularly important for nurses and paramedics in developing countries.

Evidence that librarians can provide value for money, be effective members of the institution and make a contribution to its outcomes will become increasingly necessary - just as it has with other professions. But, in addition, we need to encourage and give time to:

- *Innovation and creativity* - This is necessary in a rapidly changing situation which could be to our detriment or benefit, and has been amply

demonstrated in the ways in which librarians have used and are using electronic facilities to make the information needed by clients more easily accessible to them.

- *More research* - we need to understand the information habits, preferences, needs/wants of different client groups to aid in the selection of cost effective materials.
- *New means to demonstrate the impact and value for money* provided by librarians in pursuance of the institution's objectives and for improved health care.

Perhaps research is not for all of us, but not having the time to either do research or read it and try to put it into practice is not a good enough excuse when so much is at stake. Engaging in information research has a number of benefits to oneself and to our colleagues by giving insights into our research clients problems - using good research design, data handling etc.

If we do all this, we also need to ensure that our stakeholders including the institutional budget holders - get the message that librarians are professionals that do give value for money!

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Based on a paper given at the EAHIL Workshop in Palermo, June 23-25, 2005 Implementation of Quality Systems and Certification of Biomedical Libraries.

³ Davidoff F & Florance V The informationist: a new health profession? *Annals of Internal Medicine* 2000; 132:996-8

FEATURE ARTICLES

Piramide: A Website For Locating PubMed Journals



Keywords: *Periodicals. Directory [Publication Type]. Internet. Abstracting and Indexing.*

ABSTRACT

PIRAMIDE is a virtual journal directory of PubMed-indexed journals, searchable since September 2004 on a website (www.iss.it/sitp/piramide) developed by the Italian National Institute of Health. PIRAMIDE helps to locate the original documents, through a user-friendly interface that can be easily accessed from any platform or browser. A subject approach to journal titles is also allowed through an in-house developed classification scheme.

Introduction

Rapid developments in the presentation and distribution of biomedical information has led to consequent changes in the expectations of library users, who are demanding faster and global access to scientific information. Many studies have analyzed the behaviour of researchers and the way in which they prefer to retrieve the required information. There is an increasing feeling, among end-users, that everything can be found on the Internet and an emerging trend, especially for young researchers, to avoid subscription barriers (both for paper and electronic material) and rely almost exclusively on what they manage to find freely on the Internet¹.

A survey carried out in United States on a medical faculty's use of print and electronic journalsⁱⁱ showed that researchers in medical faculties read a great deal, especially compared to other scientists, and that most of them continue to rely on print journals *versus* electronic journals. Other studies^{iii iv}, however, argue that the transformation from print to digital media for scientific communication is creating fundamental changes in publishers,

libraries and universities and that users are gladly adapting to these developments now clearly preferring electronic over paper versions of the most consulted journals.

The necessity of retrieving scientific information is not a new problem: the difficulty in keeping updated in a field, such as biomedicine for example comprising over ten thousand journals, speeds up the development of innovative, technologically supported tools for the analysis and retrieval of the related literature. In the last decade, however, the problem of retrieving biomedical information has shifted from its individuation, through bibliographical references, to the localization of original documents. In spite of the diffusion of the open access movement, still relatively few items are available free-of-charge on the Net, and the expectations of end-users are therefore often disappointed. The variety of free databases on the Web, which are being searched by millions of scientists and laymen, nowadays emphasizes the importance of retrieving the full text.

The Piramide Database: Design And Functionality

In this context, the Italian National Institute of Health (Istituto Superiore di Sanità - ISS), which since 1978 has been the National MEDLARS reference centre, developed PIRAMIDE, a virtual journal directory of PubMed-indexed journals, searchable since September 2004 on a public available website (www.iss.it/sitp/piramide). No identification or password is required for access. PIRAMIDE helps to locate the original documents, exploiting the opportunities offered by Italian catalogues, publishers, websites and other Internet-available directories.

The PIRAMIDE database was launched in 2001, a year in which its prototype was presented at the EAHIL (European Association of Health Information and Libraries) Conference in Alghero (Italy)^v, as an instrument of connection between periodicals indexed by PubMed and the other data banks produced by the US National Library of

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Maurella Della Seta

Medicine, and Italian libraries holdings. Devised initially as an ISS Intranet resource, to satisfy information requirements of internal users, it was soon rendered accessible to external users, through the development of a dedicated website.

As a first step, two data sets were downloaded from the NLM website: the *List of Serials Indexed for Online Users 2000* and the *List of Journals Indexed in Index Medicus 2000*, both in Portable Document Format (PDF). The database has been updated in the subsequent years, and its data coincide now with those of the *List of Serials Indexed for Online Users* (2005 edition)^{vi}. The *List* is designed to provide bibliographic information for serials from which articles are indexed with the MeSH vocabulary and cited in MEDLINE, the backbone of NLM's PubMed database. The 2005 edition contains 10,582 serial titles, including 4,850 titles currently indexed for MEDLINE, cited alphabetically by abbreviated title followed by full title. The list was originally converted from PDF format in Word format and later in text format: relevant fields (Title, Medline abbreviation and International Standard Serial Number) were imported in our ACCESS database, making up the first part of the record. These above-mentioned fields also are the main access keys in the user searchable interface.

The second part of the record aims at ensuring access to resources available at a local (ISS Library), national and international level. For this purpose links have been established with:

- the electronic catalogue of the ISS Library, which is using at present the Italian software SEBINA. SEBINA allows automatic serials management and record-keeping: patrons may therefore verify the presence of a specific item, timely checking the actual availability of every serial issue;
- the Italian Periodicals Catalogue (ACNP)^{vii}, for identification of Italian libraries which hold the journal. This catalogue contains the serial holdings of over 2300 libraries, in all

subject fields. Links from journals indexed in PubMed and ACNP have been automatically established through the ISSN;

- publisher's website, for those journals available in electronic format.

The third part of the PIRAMIDE record allows a subject approach to serials, since each periodical has been indexed in Italian. The scheme adopted by the *List of Journals Indexed in Index Medicus*^{viii} was used for periodicals indexing. The scheme was translated into Italian, taking advantage of the Italian translation of Medical Subject Headings, already prepared by ISS^{ix}. The scheme was modified in some places (in fact some new headings were inserted such as Botany, Health Policy and Economy, Nuclear Energy, Religion, Zoology). Almost thirty percent of the titles were already indexed for *Index Medicus*. The indexing of the remaining seventy percent was directly carried out by the participants in the project, according to the Italian scheme of classification. Indexing was completed in 2004.

Searching Piramide

Starting from a bibliographical citation it is possible to carry out a variety of searches:

1. by MEDLINE abbreviation, as it appears in the PubMed citation;
2. by full journal title, using the complete title or a string of it, thanks to the use of the asterisk, which is the joker character allowing truncation;
3. by the ISSN (International Standard Serial Number);
4. by subject, selecting from a menu containing a list of 140 headings.

A well-developed help page gives visitors all necessary instructions for research options. When the item is not available in Italian libraries, users can order it through a link to the DOCLINE (US National Library of Medicine) service, of which the ISS is the National Reference Centre. The service will order the article from the NLM which

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Piramide: A Website For Locating PubMed Journals

will send it in a short time to the requestor's computer. This service is free-of-charge for internal users, while the payment of a fee is required to external users.

Conclusions

The PIRAMIDE website, which, as said before, is accessible to all users since September 2004, represents a qualified and original tool. It is useful to both scientists and librarians, to verify the availability of a journal and its full-text retrieval modalities. PIRAMIDE counts over ten thousand

journal titles at present, and has been accessed by over 5000 visitors during 2005. Hopefully this database will increase its potentialities in the near future to better match user's expectations and better serve the Internet users' community.

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The PIRAMIDE Working Group comprises Maurella Della Seta, Fabio Galati, Elisabetta Gambini, Maria Salvatorina Graziani, Antonietta Monaco, Cinzia Sellitri.

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EAHIL Conference Scholarships Deadline 1 April 2006

The EAHIL Executive Board is pleased to announce 6 scholarships for the 10th EAHIL conference in Cluj, Romania 11-16th September. The scholarships will be 500 euros maximum.

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e-mail: arne.jakobsson@ub.uio.no

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Prices are per room, per night, breakfast inclusive of VAT.

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Capitolina 3*	52	62	72 / 78
Victoria 3*	48	55	81
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Sport 2*	48	56	80

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<p>Capitolina</p>  <p>www.hotel-capitolina.ro</p>	<p>Victoria</p> 	<p>Belvedere</p> 	<p>Sport</p> 

CONTINUING EDUCATION COURSES

Eva Alopaeus (Sweden) and Patricia Flor (Norway) have organized 13 excellent Continuing Education Courses as listed below. Their objective from the beginning was to offer high quality courses at affordable prices. Full details of the courses at www.eahilconfcluj.ro. The cost of the 2 day courses in *English for Librarians and Mentoring for librarians: getting the best out of yourself and your staff* are 150 euros for each course. Subsequently the cost for a full day course is 80 euros and for a half-day course, 50 euros. The one and two day course prices include lunch.

2 day courses	
English for librarians	Mihaela Lazar
Mentoring for librarians: getting the best out of yourself and your staff	Monica Marasescu and Adriana Vuscan
One Day Courses	
Presentation Techniques. How to Eat an Elephant: Keeping Your Audience Awake	Eve Hollis and Ronald van Dieën
From Medline to Cochrane: Essentials of Evidence-based Medicine for Medical Librarians	Jamila Potomkova
The Changing Role of the Medical Information Specialist	Ronald van Dieën and Hans Ket
Half-Day Courses	
Managing e-journals	Anne-Gry Skonnard
Negotiating Best Prices and Service for Electronic Journal Access	C. Alderson and P. Harwood
Hidden Treasures on the Internet	Friedhelm Rump
PubMed and Other Relevant NLM resources	Astrid Müller
Measuring Impact: Cost Justification for Information Services	Liz Blankson-Hemans
Free Resources on the Internet	Hilde Strømme
The Design of Web Tutorials and Guides	Patricia Flor
Searching IndexCat the Digitized Version on the <i>Index-Catalogue of the Library of the Surgeon General's Office</i>	Lillian R. Kozuma

Room	Monday 11 September morning	Monday 11 September afternoon	Tuesday 12 September morning	Tuesday 12 September afternoon
Computer Room 1	From Medline to Cochrane: Essentials of Evidence-based Medicine for Medical Librarians		PubMed and Other Relevant NLM resources	Searching IndexCat - the Digitized Version on the <i>Index-Catalogue of the Library of the Surgeon General's Office</i>
Computer Room 2	Free Resources on the Internet	Hidden Treasures on the Internet	The Changing Role of the Medical Information Specialist	
Computer Room 3	How to Eat an Elephant - or - How to Keep Your Audience Awake			
Lecture Room 1	Negotiating Best Prices and Service for Electronic Journal Access	The design of Web Tutorials and Guides	Measuring Impact: Cost Justification for Information Services	
Lecture Room 2			Managing e-journals	
Course Room 2	English for Librarians			
Course Room 3	Mentoring for Librarians: Getting the Best out of Yourself and Your Staff			

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MEET THE CEC TRAINERS (1)

Title of Course: **Free Resources on the Internet**
Duration: **Half-day course**
Lecturer: **Hilde Strømme**
Ullevaal University Hospital, Medical Library, Oslo, Norway
hilde.stromme@medisin.uio.no



Biography

Hilde Strømme has worked in different Norwegian hospital libraries since 1996. She is currently employed by Ullevaal University Hospital, where she is head of the Medical Library's user education programme. Hilde Strømme is also chair of the Norwegian Library Association's Section for Medicine and Health and a member of the EAHIL Council.

Abstract

There are numerous free medical resources on the Internet. Some are useless, others very good. In this course we will look at a **few** of the good ones. We will focus on resources for evidence based practice, clinical guidelines, free medical journals, and free medical databases. Please note that this is not a course in database searching, but you will get a few tips about some of the databases that are available. The course will be a combination of demonstrations and hands-on-training.

Title of Course: **Mentoring for Librarians: Getting the Best Out of Yourself and Your Staff**
Duration: **2 day course**
Lecturers: **Adriana Vuscan,**
Vice-President, the Romanian Mentors' Association/ASMERO
Monica Marasescu,
Director, British Council Centre in Cluj, Romania
monica.marasescu@mail.rdscj.ro



Biography

ADRIANA VUSCAN completed her training as a mentor trainer at Leeds University, School of Education, 1999. She has held training courses both in Romania and abroad (Latvia and Ukraine), and has been involved in several British Council mentoring projects (Presett, Support for Newly Qualified Teachers, Mentor Observation and Support Scheme). She is co-author of *Portfolios for Newly Qualified Teachers and their Mentors* (2002) and of *Tests for Evaluating Mentors* (1998).

Biography

MONICA MARASESCU is an experienced mentor trainer, completing her training at Leeds University, School of Education in 1999 and has trained mentors both in Romania and abroad. She has acquired experience developing and managing mentoring projects for the British Council: *Support for Newly Qualified Teachers* (2000-2002) and *Mentor Observation and Support Scheme* (2001-2002), and is co-author of *Tests for Evaluating Mentors* (1998).

Abstract

This 2-day workshop will look at a librarian's development within a mentoring system. We will help participants become aware of the specific skills and qualities of a successful mentor and of the mentor's roles in assisting colleagues in their early or mid career. Participants will be invited to take part in an exciting interactive course where sharing experience and reflection on one's practice will enhance and benefit professional communication and learning.



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Branded Information About Clinical Trials



Introduction

Clinical trials are essential for drug research and development; information about them is available at all times to the public. Clinical trials must meet the requirements of European legislation (The European Clinical Trial Directive 2001/20/EC), as well as national legislation. There is also a current process of clinical trials harmonisation on a world wide level (e.g. ICH E9). This paper demonstrates the importance of information about clinical trials, which is a base for further communication between the pharmaceutical industry and the professional community, as well as between the pharmaceutical industry and the public. The aim of this article is to present a database "Current Controlled Trials" - CCT, where everybody can access information on clinical trials which are being or have been performed. Titles for clinical trials are carefully chosen because of acronyms which can be formed from words in a title; a good acronym or a fantasy name for a clinical trial can contribute much to the subsequent communication for marketing purposes.

New trends in clinical trials research

The development of a drug has usually four phases - the early phases (I and II) and the later phases (III and IV) including post-marketing surveillance, when a drug is on the market. There is an amazing amount of money invested in clinical trials all over the world. In 1991, pharmaceutical companies invested some USD 10 billion on global R&D efforts. In 2004, they spent eight times that amount. But the FDA (Food and Drug Administration in U.S.A.) approved only 30 new drugs last year, down from 53 in 1996. (1)

Many drug candidates fail after phases I and II. To increase the efficiency, new knowledge management systems and novel clinical-trial methodologies have recently been introduced which have the potential to reduce the development time as well as patients' numbers and ultimately the costs. It is expected that drug development will have two stages - an "exploratory phase", where a drug target is tested for proof of concept, and a later "confirmatory phase", where testing will be aimed at regulatory approval and future marketing.

Clinical trials' titles are very important, because of possible further marketing actions. There is a current trend for clinical trials to have special titles that become acronyms or fantasy names which can be also registered as trade marks. With subsequent promotion such trade marks can become brands and good results from the clinical study are successfully incorporated into knowledge about a specific drug.

Legal requirements regarding clinical trials.

Basic requirements about clinical trials are listed in the Joint declaration of CPME (Standard Committee of European Doctors) and EFPIA (European Federation of Pharmaceutical Industry

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Associations) regarding the co-operation between the medical profession and the pharmaceutical industry (June 2005). It is written that the following principles must be adhered to in all clinical trials:

- a) All partners in a clinical trial must follow ethical and professional principles and guidelines, such as the Declaration of Helsinki and ICH Good Clinical Practice guidelines;
- b) Each trial must pursue a scientific and therapeutically relevant aim. No trial should be performed primarily for promotional purposes. The aim of the trial must always be the improvement of therapy, diagnostic methods and/or medical knowledge for the best of the patients;
- c) The aim of the trial must be stated beforehand. Research protocols must be drafted in such a way as to ensure that this aim is achieved and that the conclusions of the study are valid;
- d) The sponsor has to be disclosed to the patients recruited to the study;
- e) A physician must not receive payment or other benefits for only referring patients to clinical trials;
- f) A physician may receive compensation for his/her work in the trial. The compensation of whatever kind must be related to the work done, and must be
- g) disclosed to the ethical committee reviewing the study protocol. The compensation must not be linked to any expected result of the study;
- h) All efficacy and safety results on marketed products should be honestly published irrespective of the outcome, at least in summary form on the Internet, within one year after the product received its marketing authorisation. Also, other results of clinical importance should be similarly published;
- i) In publications, lectures and other presentations the sponsor has to be disclosed;
- j) The physician may receive compensation for lecturing about the trial and its results;
- k) When giving presentations on trials the doctor has to disclose his/her connections with all companies in the therapeutic field covered.

Evidence about all clinical trials.

Bad results in clinical trials can be as important as the good ones in making clinical decisions. A solution to the problem of disclosure, according to several health care organisations, is to ensure a listing of all clinical trials and their results in a public registry. Physicians, patients, and even lawmakers would then stand a better chance of seeing all the findings and of making more informed decisions. The American Medical Association has proposed that a registry be maintained by the Department of Health and Human Services (DHHS), the European Science Foundation has recommended a registry for trials across Europe, and the World Health Organisation plans to propose a world-wide registry of its own. An intriguing proposal is under consideration by the International Council of Medical Journal Editors, a group representing 12 of

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the most prestigious medical publications, including *The New England Journal of Medicine*, *The Lancet*, *The Journal of the American Medical Association*, and *The Annals of Internal Medicine*. The journals would require that pharmaceutical companies register clinical trials, at their initiation, in a public database, or results would not be eligible for publication. Because manufacturers often point to published results in prestigious journals in marketing their drugs, the incentive to participate in the registry would be significant. (2)

Elly Lilly recently announced one of the most ambitious initiatives among pharmaceutical manufacturers. It plans to publish, on its web site, all clinical trials data from all phases of testing for its approved drugs, including the results of trials for off-label uses. Various registries about clinical trials will be put together in a structured database which is called Current Controlled Trials (<http://www.controlled-trials.com>) and it will be available free of charge. Today we face the situation of "consumer-driven health care" where patients proactively participate in searches about new clinical trials to see if they can participate or benefit from results in the future.

Description of Current Controlled Trials database (CCT).

CCT comprises the following registries:

Action Medical Research

Institute of Psychiatry/South London and Maudsley Trust

Laxdale Ltd

Leukaemia Research Fund

Medical Research Council (UK)

NHS Trusts Clinical Trials Register

National Health Service Research and Development Health Technology Assessment Programme (HTA)

National Health Service Research and Development Programme 'Time-Limited' National Programmes

National Health Service Research and Development Regional Programmes

National Institutes of Health (NIH) - randomized trial records held on NIH ClinicalTrials.gov website.

CCT database is regularly updated; there are about 4000 clinical studies registered at the beginning of 2006. This publicly available database offers an easy search in the ISRCTN (International Standard Randomised Controlled Trial Number) Register. The ISRCTN provides us with clinical trials according to their "registered numbers". Another search is possible in mCTR (meta Clinical Trials Register), where we can search all registers (listed above). There is a short description of ISRCTN and mCTR:

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1. ISRCTN Registry - trials registered with a unique identifier

The ISRCTN is a simple numerical system for the identification of randomised controlled clinical trials worldwide. The ISRCTN Register will also accept registration of other forms of studies designed to assess the efficacy of healthcare interventions. The ISRCTN scheme simplifies the identification of trials and provides a unique number that can be used to track all publications and reports resulting from each trial. ISRCTN consists of the following data:

Applicant details; Sponsor details; Lead principal investigator/contact details; Trial details.

2. mRCT Registry

The *mRCT* was established in response to an initiative taken in the UK in July 1998 that brought together representatives from the UK Medical Research Council, the National Health Service Executive, medical charities, pharmaceutical companies, the UK Cochrane Centre, and journals such as the *British Medical Journal* and *The Lancet*. The agreed action plan was initially taken forward by an Ad Hoc Group for Prospective Registration of Controlled Trials. The active involvement of a major international drug company - GlaxoSmithKline - and subsequent commitments from other international organisations, meant that the scope of the *mRCT* quickly extended outside Britain.

The *mRCT* is a major international searchable database of ongoing randomised controlled trials in all areas of healthcare, built by combining registers held by public, charitable and commercial sponsors of trials. The *mRCT* also contains some completed trials. The *mRCT* is a free service that allows users to search all participating registers, which are asked to submit trial records including specified essential data items. The *mRCT* has been set up to provide a service to the following groups:

- people using evidence from controlled trials who want to be confident that they are aware of all of the trial evidence relevant to a particular question
- research funding agencies (public, commercial and charitable) who want to take their funding decisions in the light of information about relevant ongoing research, both to avoid duplication of effort and to promote collaboration; and
- patients, participants, and other decision-makers who wish to be informed about trials in which they can participate or to which they can contribute in other ways.

Examples from the ISRCTN registry:

Looking at the first 100 records (December 2005) in this database shows that about half of the clinical trials have good acronyms; below are some extracts of records with the following data: ISRCTN number, a title of a clinical trial, an acronym (if available), a source of funding (*), and a sponsor (**):

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ISRCTN87325378

Low molecular weight heparin (FRagmin (R)) in pregnant women with a history of Uteroplacental Insufficiency and Thrombophilia, a randomized trial (**FRUIT**-study)

* Pharmacia & Upjohn Company

**VU University Medical Center (The Netherlands)

ISRCTN57754429

The Incidence of Post trauma Psychopathology Study (TRAUMA TIPS): efficacy of an innovative preventive multimedia-intervention

Acronym: **Trauma Tips**-Prevention

*AMC Amsterdam, Achmea Stichting Slachtoffer en samenleving (SASS)

**Academic Medical Center Department of Psychiatry, Center for Psychological Trauma (The Netherlands)

ISRCTN72086307

Postoperative accelerated radiotherapy versus conventional radiotherapy in squamous cell head and neck cancer (**POPART**). A phase III randomised study.

Acronym: POPART, CKTO 2003-11

*Koningin Wilhelmina Fonds (KWF)

** VU University Medical Center (The Netherlands)

ISRCTN72259862

The **DALI** study: a double-blind randomized placebo-controlled trial in patients with diabetes mellitus type 2 and hypertriglyceridemia.

Acronym: **DALI** study

*Parke Davis

** Erasmus Medical Center (The Netherlands)

ISRCTN32675862

Treatment strategies for Rheumatoid Arthritis (BeSt - Behandel Strategieën in Reumatoïde Artritis)

Acronym: **BeSt**

*Centocor, Schering-Plough, Dutch Health Care Insurance Board (CVZ, independent government organisation)

**Leiden University Medical Center (LUMC) (The Netherlands)

ISRCTN57478950

Primary care Electronic Referrals: Focus on Efficient Consultation using Telemedicine in Dermatology.

Acronym: **PERFECT D**

*ZON-MW, The Netherlands Organization for Health Research and Development

**KSYOS Health Management Research BV (The Netherlands)

FEATURE ARTICLES

Nada Tržan-Herman

ISRCTN57292778

Cost-effectiveness of cognitive behaviour therapy for recent onset schizophrenia patients with persistent and recurrent psychosis.

Acronym: **COCOS**

*ZON-MW, The Netherlands Organization for Health Research and Development

**University Medical Center Groningen (The Netherlands)

Conclusion

Examples from the Current Controlled Trials database show that acronyms or fantasy names are used as value-added information to clinical trials. A title of a clinical trial is important for professionals as well as for patients in order to find the specific clinical trial in databases. On the other hand an acronym is important to remember the clinical trial - especially if results are good or when there is a continuation of some studies; these acronyms can be registered as trademarks. Nowadays this practice is becoming more and more popular. Trademarks are sometimes registered for a single trial (e.g.: ATAC, CATIE, SPARCL, ASCOT, RESIST, SPIRIT) as well as for large clinical programs (e.g.: Atorvastatin landmark program, Galaxy, Mural Clinical Trials program). (3) Clinical trials are usually double-blind studies i.e. a clinical trial design in which neither the participating individuals nor the research staff know which participants are receiving the experimental medicinal product and who are receiving a placebo or another therapy.

Because of the basic requirement that no names or trademarks of medicinal products are used, a trial's effective name is part of the clinical study design. However, there are benefits from successful clinical trials, and physicians recall trials with good acronyms or fantasy names better than those with no such attributes. Therefore the branded information of clinical trials can help to capture more easily, knowledge about medicinal products.

References

1. Gardner E: A new development, *Pharma Business Review*. Novartis, Autumn 2005; issue 9: 3-7.
2. Field RI: Advocates pursue a public registry for all clinical trials. *P&T* 2004; 29(9): 532-533
3. Hallerman S: Branding Clinical Trials, PTMG (Pharmaceutical Trade Mark Group). 71st Group Conference, Cannes 2005

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BOOK REVIEW

A Guide to Developing End User Education Programs in Medical Libraries

Author: Elizabeth Connor
Haworth Press, 2005
Soft Cover ISBN: 978-0-7890-1725-3

Book Review

The title of this book could be misleading. It is not a single authored progressive guide to the topic, addressing various aspects associated with the task of developing end user education programs in a sequential presentation. Eighteen case studies are presented of examples of how different institutions have tackled the problem representing input from 38 contributors and edited by Elizabeth Connor. The work is based on American experience and practice. It is useful that each case study is outlined in the same format: the setting; educational approaches; evaluation methods and conclusion with some appendices. This enables comparison. Each chapter begins with a summary description of the institution whose work is being described. This could be helpful to identify a similar situation to your own as a starting point. However, it does make for rather heavy and repetitive reading. Some common themes and ideas emerge but you have to search for them. There is not one detailed, comprehensive statement about key issues and how to tackle them. Most case studies have a supporting bibliography.

The book is designed to help information professionals in medical libraries and so important sources of medical and healthcare information are cited several times, although the range of sources are not as varied as might have been expected. There are some useful examples of pre-assessment and assessment questions, criteria and objectives associated with education programs and evaluation techniques. Such advice might have more impact if presented comprehensively under such headings as part of a continuing narrative rather than being repeated in each case study. Case study material can be very informative in understanding real life situations but for information professionals with limited experience of introducing and developing end user education programs such material may lack help about basic guiding principles.

The educational approach sections show different styles of learning and teaching which are important subjects to understand when preparing end user education programmes. The personal interface with end users is very significant. You have to have a good assessment of their needs and how to engage their interest. Often when facing the introduction or development of end user programs help is required with funding, marketing and publicity. These aspects are not that clearly covered. Examples of specific questions or topics with drafts of teaching notes can help other information professionals think through the preparation of material that is relevant for their own end users. It would have been good to see more help of this kind given. The question of computer competency is raised several times and demonstrates the need to cover this as part of information skills education.

There is an index although no references are made to key medical databases or resources by name which would allow all the work associated with a particular source to be considered together. Substantial medical and healthcare information is available on the Internet but advice on how to source and evaluate this material is lacking.

Overall, this book represents a collection of experience and ideas that you can dip into for help. Conclusions at the end of each case study enable the reader to build up a picture of the issues of note faced by each of the institutions represented and their thoughts about future activity. It is a fairly intense read and may be better for those with some experience already rather than the beginner.

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INTERNET PAGE

Military Medicine: MeSH terms, Indexed Journals & Directories



1. MeSH terms & Subheadings (unique or "parent" headings):

- | | |
|----------------------------|--|
| 1. Chemical Warfare Agents | 10. Military Psychiatry |
| 2. Combat Disorders | 11. Military Science |
| 3. Hospitals, Military | 12. Persian Gulf Syndrome |
| 4. Hospitals, Veterans | 13. Psychology, Military |
| 5. Military Dentistry | 14. United States Department of Veterans Affairs |
| 6. Military Hygiene | 15. Veterans |
| 7. Military Medicine | 16. Veterans disability claims |
| 8. Military Nursing | 17. Veterinary Service, Military |
| 9. Military Personnel | 18. War |

These terms may be used to create a strategy in PubMed with the help of *MyNCBI*, such as:
chemical warfare agents OR combat disorders OR hospitals, military OR hospitals, veterans OR military dentistry OR military hygiene OR military medicine OR military nursing OR military personnel OR military psychiatry OR military science OR persian gulf syndrome OR psychology, military OR united states department of veterans affairs OR veterans OR veterans disability claims OR veterinary service, military OR war

Or go to URL: <http://military-medicine-pubmed.notlong.com>

See also **Terrorism**

2. Journals:

See from *List of Journals Indexed for MEDLINE, 2005*

(<ftp://nlmpubs.nlm.nih.gov/online/journals/ljiweb.pdf>), these titles:

Annales Academiae Medicae Stetinensis.
Biosecurity and bioterrorism: biodefense strategy, practice, and science.
International maritime health.
Journal of the Royal Army Medical Corps.
Journal of the Royal Naval Medical Service.
Military medicine.
Voenno-meditsinskii zhurnal.
Vojnosanitetski pregled. Military-medical and pharmaceutical review.

3. Directories:

MedlinePlus (USA):

- Veterans and Military Health
<http://www.nlm.nih.gov/medlineplus/veteransandmilitaryhealth.html>

NGC National Guideline Clearinghouse (USA):

- Guidelines on Bioterrorism <http://www.guideline.gov/resources/bioterrorism.aspx>

Omni (UK) :

- Military Medicine <http://omni.ac.uk/browse/mesh/D008887.html>

An HTML version of this page is available at the URL:

http://www.chu-rouen.fr/documed/jeahil_military_medicine.html

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PUBLICATIONS AND NEW PRODUCTS

JOURNAL ISSUES



Dear Colleagues,

Google and Wikipedia are changing the habits of users. Google Scholar has led visitors to many more biomedical journal websites than has PubMed (Giustini, D. *BMJ*. 2005. 331: 24)

and the Wikipedia is growing rapidly, now including close to 4 million entries, and has become the 37th most visited website (Giles, J. *Nature*. 2005; 438: 900). The accuracy of science articles in Wikipedia is good and the number of errors is not substantially more than in *Encyclopaedia Britannica*, but researchers should read Wikipedia cautiously (*Nature*. 2005; 438: 890).

On the contrary, the habits of users on medical books are still not changing. Despite the fact that publishers and information suppliers advertise the advantages of the e-books, the high costs make the uptake and the usage disappointing low (Cadwell, T. *Information World Review*. December 2005; Issue 219: 11). Moreover many scientists are reluctant to embrace the latest web tools that would allow them to communicate their ideas in new ways (Butler, D. *Nature*. 2005; 438: 548).

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JOURNAL ISSUES

Since the Journal of November 2005, the following journal issues of *Health Information and Libraries Journal* have been received: Vol. 22, 2005, n. 4 and Vol. 22, 2005, Supplement 2.

Vol. 22 n. 4

M. Weisen. Cornucopia of health - widening the contribution of museum, libraries and archives.

p. 239. Editorial.

S. Lockyer, C. Creaser, J.E. Davies. Availability of accessible publications: designing a methodology to provide reliable estimates for the Right to Read Alliance.

p. 243 - 252.

The objective of this study was to establish reliable estimates of the proportion of books available in formats accessible to visually impaired people and to recommend a practical method of updating the estimates.

A. Devaney and H. Outhwaite. Learning resource needs of UK NHS support staff.

p. 253 - 261.

This project aims to identify the learning resources and services needed by support staff locally, focusing on the Health Library and Information Service at York Hospital.

R. Marriot. Access to learning resources for students on placement in the UK: what are the issues and how can we resolve them?

p. 262 - 266.

The aim of this study was to compile a list of the issues regarding access to learning resources which affect students on placement in the UK and to suggest some ways in which these can be resolved.

K.M. Turtle. A survey of users and non users of a UK teaching hospital library and information service. p. 267 - 275.

A survey on users and non-users' opinions of the services offered by librarians to find out to

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what extent librarians were offering a multi-disciplinary services to all staff, and to use these information to develop a marketing strategy and a resource development policy.

C. Mancini, M. Zedda, A. Barbaro. Health information in Italian public health websites: moving from inaccessibility to accessibility. p. 276 - 285.

The purpose of this study was to investigate whether Italian Local Health Authorities websites are accessible to people with disabilities.

Brief communications p. 286.

Vol. 22 Suppl. 2

P. Levy. Editorial. p. 1.

A. Booth, P. Levy, P.A. Bath, T. Lacey, M. Sanderson, G. Diercks-O'Brien. Studying health information from a distance: refining an e-learning case study in the crucible of student evaluation. p. 8 - 19.

The purpose of this study was to present a formative evaluation of the impact of a multimedia case study as a component of a masters course in health informatics delivered by distance learning.

S. Childs, E. Blenkinsopp, A. Hall, G. Walton. Effective e-learning for health professionals and students - barriers and their solutions. A systematic review of the literature - findings from the HeXL project. p. 20 - 32.

The systematic literature review was conducted using methods promulgated by the

Centre for Reviews and Dissemination, but adapted to the particular demands of this project. The prime focus was the exploration of barriers, and their possible solutions, to e-learning for NHS staff and healthcare students.

A. Clarke, D. Lewis, I. Cole, L. Ringrose. A strategic approach to developing e-learning capability for healthcare. p. 33 - 41.

This article examines a strategic approach to developing e-learning capability to enhance learning opportunities for the workforce of a healthcare organization.

L. Robinson, J. Hilger-Ellis, L. Osborne, J. Rowlands, J.M. Smith, A. Weist, J. Whetherly, R. Phillips. Healthcare librarians and learner support: a review of competences and methods. p. 42 - 50.

This paper reports on the first phase of the project of London Health Libraries to develop the role of their library and knowledge services staff in supporting learners within the NHS in the London area.

G. Walton, S. Childs, E. Blenkinsopp. Using mobile technologies to give health students access to learning resources in the UK community setting. p. 51 - 65.

This article describes a project which explored the potential for mobile technologies to give health students in the community access to learning resources.

Brief communications p. 66.

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JOURNAL ISSUES

NEW JOURNALS

ChemMedChem. The Italian and the German Chemical Society start a new online Journals, named ChemMedChem, effective January 2006. The Publisher is Wiley.

<http://www3.interscience.wiley.com/cgi-bin/jhome/110485305>

BOOKS REVIEW

Planning, Renovating, Expanding, and Constructing Library Facilities in Hospitals, Academic Medical Centres, and Health Organizations. Ed. E. Connor. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$24.95 soft, ISBN-13: 978-0-7890-2541-8; \$34.95 hard, ISBN-13: 978-0-7890-2540-1; pp. 218. The book presents thirteen insight case studies on resource library's moves, expansions and renovations of library, designing a new library.

Libraries Within Their Institutions. Creative Collaborations. Eds. W. Miller and R.M. Pellen. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$39.95 soft, ISBN-13: 978-0-7890-2720-7; \$59.95 hard, ISBN-13: 978-0-7890-2719-1; pp. 230. This book provides practical information on the element of effective collaboration including partnership with teaching centres, library-faculty cooperation, collaboration in collection management.

Relationships Between Teaching Faculty and Teaching Librarians. Ed. S. B. Kraat. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$24.95 soft, ISBN-13: 978-0-7890-2573-9; \$39.95 hard, ISBN-13: 978-0-7890-2572-2; pp.182. This book reflects the experience of librarians, teaching faculty, and library directors. The book includes case

studies, surveys, sample questionnaires, and a look at innovative methods of increasing the teaching roles of librarians.

The Virtual Reference Desk. Creating a reference future. Eds. R. D. Lankes, E. G. Abels, M. D. White and S. N. Haque, The Facet Publishing London (UK); 2006, £49.95 paperback (£39.96 to CILIP Members); ISBN 1-85604-566-8; 240 pp. This volume guides information professionals through new training and staffing models; looks at performance standards and evaluation tools; offers advice for serving new audiences; and helps build collaborations and networks for reference services.

PAPERS REVIEW

Internet encyclopaedias go head to head. Giles, J. *Nature*. 2005; 438: 900

Wiki's wild world
Nature. 2005; 438: 890

Joint Efforts.
Butler, D. *Nature* 2005; 438: 548

The real death of print.
von Bubnoff, A. *Nature*. 2005; 438: 550

Don't let e-books give you a cardiac arrest.
Cadwell, T. *Information World Review*. December 2005; Issue 219: 11

How Google is changing medicine.
Giustini, D. *BMJ*. 2005; 331: 1487

Evidence-Based Practice: a new paradigm brings new opportunities for health sciences librarians.

Perry, G.J. Kronenfeld, MR. *Medical Reference Services Quarterly*. 2005; 24 (4): 1

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INFORMATION SOURCES WEB BASED

ICISC a master calendar of relevant conferences being held around the world on information science and in related disciplines.

<http://icisc.neasist.org/>

OpenWetWare is a wiki that promotes the sharing of information, know-how, and wisdom among researchers and groups who are working in biology & biological engineering. OWW provides a place for labs, individuals, and groups to organize their own information and collaborate with others easily and efficiently. OpenWetWare houses pages from more than 20 labs at 10 universities.

http://openwetware.org/wiki/Main_Page

NEWS FROM PUBLISHERS

The Publishers Association and the International Association of Scientific, Technical and Medical Publishers has commissioned the CIBER, an independent publishing think tank, based at City University in London, a survey of senior researchers on new journal publishing models. The authors publishing in open access journals have had a dramatic rise in number.

http://www.eurekalert.org/pub_releases/2005-10/bc-dri103105.php

EBSCO. Twelve Publishers have recently signed agreements to add their content to **EBSCOhost** Electronic Journals Service Enhanced, collectively representing 61 titles. The publishers adding content are BC Decker,

E-Med Ltd., eContent Management, Dialogue Foundation, American Academy of Orthopaedic Surgeons, IFIS Publishing, Palgrave Macmillan, The Berkeley Electronic Press, the American Podiatric Medical Association, the American Association on Mental Retardation, the American Public Health Association and the Pan American Health Organization.

<http://www.ebsco.com>

Elsevier introduces the beta version of EMCare, a new bibliographic Nursing/Allied Health Database drawn from more than 2,700 international source titles that includes close to 2 million records from the nursing, allied health, and biomedical literature. The new database will be updated weekly and will be available on several commercial online hosts starting in January 2006. It currently features a 10-year back file and will add close to 250,000 new records each year.

<http://www.elsevier.com>

SWETS Information Services has launched SwetsWise Searcher an innovative federated search solution that dynamically organizes search results into meaningful categories for users, enabling them to quickly navigate to the most relevant information. Built on award-winning metasearch and clustering technology, SwetsWise Searcher reduces search time, improves the relevancy of results, provides access to the most current information. In addition, it includes a free connector to SwetsWise Online Content, delivering a single connection to the collections of e-journals currently available.

<http://www.swets.com>

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JOURNAL ISSUES

FORTHCOMING EVENTS

23-24 February 2006, Kilkenny, Ireland
HSLG Conference 2006
Irish Health Sciences Libraries Group,
Annual Conference 2006
For further information:
<http://hslg.ie/conference>

23 March 2006, Milan, Italy
Portals as communication and information
tools: which kind, which content.
XXIV Gidif, Rbm Congress.
For further information:
<http://www.gidif-rbm.it/>

6-7 April 2006, Tours, France
L'information dans les organisations:
dynamique et complexité
Colloque international organisé par l'axe
"Information dans les organisations" du
Centre d'études du débat public (CEDP)
For further information:
<http://net.iut.univ-tours.fr/Info/colloque/accueil.htm>

24-25 April 2006, Lund, Sweden
Beyond Declarations. The Changing
Landscape of Scholarly Communication.
3rd Nordic Conference on Scholarly
Communication
For further information:
www.lub.lu.se/ncc2006

23-25 May 2006, Prague, Czech Republic
12th INFORUM Conference
For further information:
<http://www.inforum.cz/inforum2006/english>

29 May - 4 June 2006, Dubrovnik and
Mljet, Croatia
Libraries in the Digital Age (LIDA) 2006.
For further information:
<http://www.ffos.hr/lida>

10-12 July 2006, Eastbourne, East Sussex,
UK
Informed and Interactive Health Knowledge
for All.
2006 Health Libraries Group Conference.
For further information:
<http://www.cilip.org.uk/specialinterestgroups/bysubject/health/events/conference/conference2006/default.htm>

20-24 August 2006, Seoul, Korea
Libraries: Dynamic Engines for the
Knowledge and Information Society.
World Library and Information Congress:
72nd IFLA General Conference and Council.
For further information:
<http://www.ifla.org/IV/ifla72/index.htm>

11-16 September 2006, Cluj-Napoca,
Romania
10th European Conference of Medical and
Health Libraries
For further information:
<http://www.eahilconfcluj.ro/>

13-20 October 2006, Toronto Canada
MEDNET 2006
11th World Congress on Internet in
Medicine
For further information:
<http://www.mednetcongress.org/>

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LIST OF NEW EAHIL MEMBERS 2006

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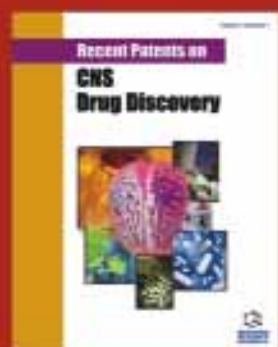
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