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# JOURNAL

OF THE EUROPEAN ASSOCIATION  
FOR HEALTH INFORMATION AND LIBRARIES



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

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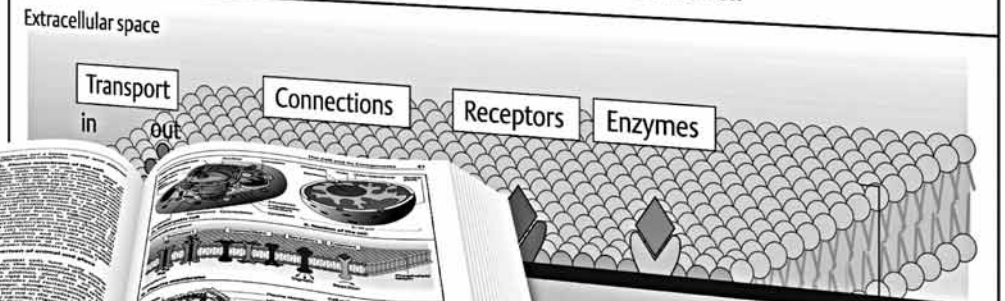
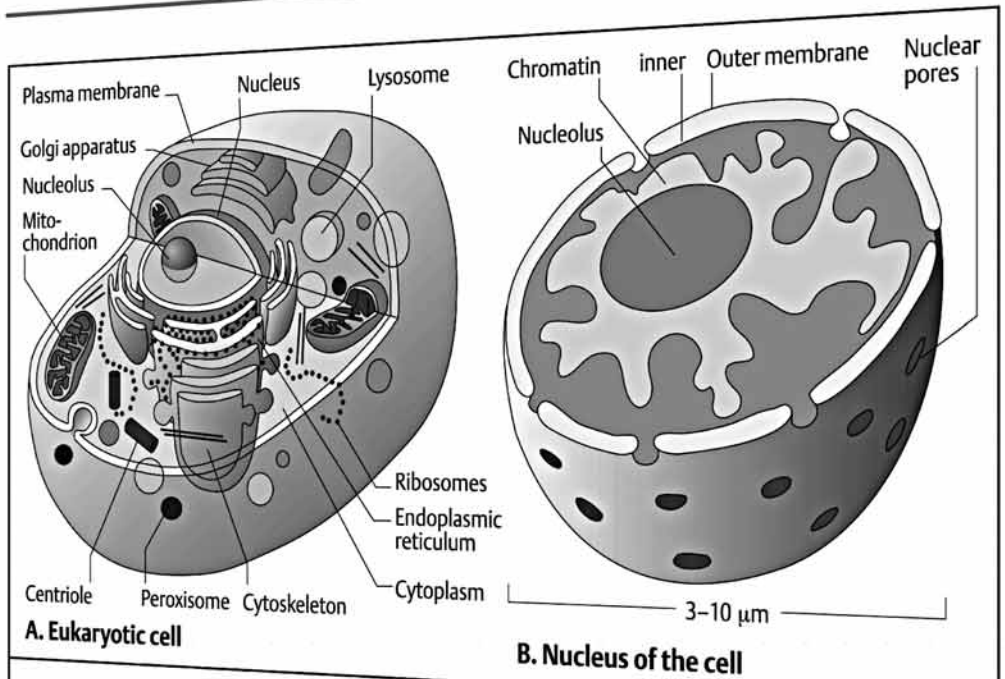
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- Chronology
- Part 1. Fundamentals
- Molecular Basis of Genetics
  - The Cell and Its Components
  - Some Types of Chemical Bonds
  - Carbohydrates
  - Lipids (Fats)
  - Nucleotides and Nucleic Acids
  - Amino Acids
  - Proteins
  - DNA as Carrier of Genetic Information
  - DNA and Its Components
  - DNA Structure
  - Alternative DNA Structures
  - DNA Replication
  - The Flow of Genetic Information: Transcription and Translation
  - Genes and Mutation
  - Genetic Code
  - The Structure of Eukaryotic Cells



# Journal of the European Association for Health Information and Libraries

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## Editorial

Hello Everyone

This issue is dedicated to Open Access. The Budapest Open Access Initiative in February 2002 stated: "By 'open access' to this literature, we mean its free availability on the public internet, permitting any users to read, download, copy, distribute, print, search, or link to the full texts of these articles, crawl them for indexing, pass them as data to software, or use them for any other lawful purpose, without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. The only constraint on

reproduction and distribution, and the only role for copyright in this domain, should be to give authors control over the integrity of their work and the right to be properly acknowledged and cited." Ulrich Korwitz held a very successful workshop on Open Access from the 7-8th December 2004 and a detailed report with power point presentations can be found at <http://www.zbmed.de/summit/> A recent IFLA satellite meeting, *Open Access: the Option for the Future?* co-sponsored by EAHIL, was organized by our President Arne Jakobsson on Saturday, 13<sup>th</sup> August 2005 in Oslo and his report and summary of the present situation can be found in the following pages as well as excellent papers from the MLA, NIH, Tony McSeán, Solveig Thorsteinsdottir and Heike Schmidt.

In Cluj we are already working hard to prepare for the conference next year. Can I remind you again of the deadline for the **Call for Papers** which is **15 January 2006**. Registration for the conference will be open on the **5<sup>th</sup> February** but please visit our site [www.eahilconfcluj.ro](http://www.eahilconfcluj.ro) where you will find preliminary information concerning the scientific programme, the social programme and the proposed Continuing Education courses which will be run by Eva Alopaeus and Patricia Flor.

The following themes for the Journal of EAHIL 2006 are listed below. For the feature issue, articles on any subject in health sciences will be considered.

February 2006	Feature issue	Deadline: <b>15 January 2006</b>
May 2006	Theme issue: <b>Health Technology Assessment</b>	Deadline: <b>15 April 2006</b>
August 2006	Theme issue: <b>Evidence-Based Medicine</b>	Deadline: <b>15 July 2006</b>
November 2006	Special issue on the Cluj Conference	Deadline: <b>15 October 2006</b>

Regarding the new EAHIL member database, there are still 213 members who have not updated their membership entry. It would be very useful if all members could keep their membership entry up-to-date as not only am I taking all the information from this database in order to create labels to send out the Journal, but also this data is essential for everyone to keep in touch with each other. Arne has described on page 8 how every member can update their entry and I can assure it is really simple to do and will only take 5 minutes. The website has been designed by Morten Pederson and is extremely user friendly.

Finally as this is the last issue for this year I must wish you all a very Happy Christmas.

**Sally Wood-Lamont**  
Editor-in-Chief  
[swood@umfcluj.ro](mailto:swood@umfcluj.ro)

# Contents

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## EDITORIAL

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

## NEWS FROM OUR ASSOCIATION

3. Letter from the President - *Arne Jakobsson*
7. Prestigious Award for one of our EAHIL Colleagues
7. News from PHing - *Michelle Wake*
8. Have you checked your data in the EAHIL Membership Database?

## NEWS FROM OUR COLLEAGUES

9. News from the Medical Library Association - *Eve-Marie Lacroix*
11. Reports of ICML 9, Brazil - *Arne Jakobsson and Tony McSeán*

## FEATURE ARTICLES ON OPEN ACCESS

15. The National Institutes of Health "Public Access Policy" - *Martha R. Fishel*
17. U. S. Medical Libraries and Open Access - *Patricia L. Thibodeau and Carla J. Funk*
21. Open Access: Today and Tomorrow - *Tony McSeán*

## NEWS FROM CLUJ -NAPOCA, ROMANIA - 10<sup>th</sup> EAHIL Conference 2006

24. **Call For Papers**
24. Important Dates
25. Conference Themes

## FEATURE ARTICLES ON OPEN ACCESS Conference 2006

27. Does National Access to E-Publications Make A Difference: The Icelandic Experience? - *Solveig Thorsteinsdottir*
33. Open Access Publishing - *Heike Schmidt*

## INTERNET PAGE

36. Infectiology: MeSH terms & Subheadings, Journals & Directories - *Benoit Thirion*

## JOURNAL REVIEWS

39. Journal of Social Work in End-of-Life & Palliative Care - *Aileen Wood*
40. Journal of Electronic Resources in Medical Libraries - *Ioana Robu*
41. Anthony Thompson Award 2006

## 42. PUBLICATIONS AND NEW PRODUCTS - *Giovanna F. Miranda*

## 47. ADVERTISING RATES 2006

## 48. COLOPHON

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# News from our Association

## Letter from the President

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Open Access:  
the option for the  
future?

During the IFLA  
conference in Oslo,  
EAHIL co-sponsored the  
IFLA satellite meeting  
*Open Access: the option  
for the future?* on  
Saturday, 13<sup>th</sup> August.

The seminar was well attended (almost 150 participants) and had prominent speakers representing the open access movement, from libraries and publishers. The proceedings are now available at [http://www.ub.uio.no/ifla/IFLA\\_open\\_access/programme\\_abstracts.htm](http://www.ub.uio.no/ifla/IFLA_open_access/programme_abstracts.htm) and also via a link from the EAHIL webpage.

Open access is still in its infancy and there are differing opinions as to whether the open access model is beneficial, sustainable in the long run and even working at all. The critics consider that the present publishing model is working. So if it is working, why change it? I think it is vital to get information and to hear the different opinions. The transition must be evidenced-based.

### **CERN and the Berlin Declaration on Open Access**

Many organizations and universities have already implemented an open access policy. One of the most successful advocates of the open access principles is CERN. CERN has supported the principles of open access to scientific information since its creation in 1954. The process of directing scholarly communication towards the open access model was pioneered by the high-energy physicists with their subject-based repository ArXiv. By signing the Berlin Declaration on Open Access to Knowledge in the Sciences and Humanities in May 2004 (<http://www.zim.mpg.de/openaccess-berlin/berlindeclaration.html>), CERN made a further commitment to the wider open access movement. The Berlin Declaration is a historically important step for the open access movements worldwide.

The Berlin Declaration was inaugurated in October 2003 at a meeting organized by the Max Planck Society with the specific aim of ensuring free and unrestricted access for everyone to the results of scientific research and to the cultural heritage of mankind. So far the Declaration has been signed by 129 organizations throughout the world, and these are now taking concrete measures for its implementation.

In order to have an impact, the Berlin Declaration must be put into action. The delegates of the "Berlin 3 Open Access" conference (Feb 28th - Mar 1st, 2005, University of Southampton, UK) (<http://www.zim.mpg.de/openaccess-berlin/recommendation.html>) agreed on a recommendation in order to move forward:

"In order to implement the Berlin Declaration institutions should:

1. implement a policy which requires their researchers to deposit a copy of all their published articles in an open access repository and
2. encourage their researchers to publish their research articles in open access journals where a suitable journal exists and provide the support to enable that to happen."

Jens Vigen, CERN Scientific Information Service, reported that 70% of the current production of journal articles at CERN are available as open access on the CERN document server and that 90% of the CERN reports are available as open access. The goal is for 100 % to be available on open access, so there is still work to be done. Jens Vigen also reported that author awareness at CERN had improved.

### **Author awareness**

Are authors generally aware of open access and that they can self-archive journal articles? To investigate this, an author study on open access

# News from our Association

Arne Jakobsson

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was conducted. The study was carried out during the last quarter of 2004 by Alma Swan and Sheridan Brown from Key Perspective Limited for JISC and Open Society Institute. This is the second international, cross-disciplinary author study on open access and it had 1296 respondents. (Swan, A. and Brown, S. (2005) Open access self-archiving: An author study. Technical Report, External Collaborators, Key Perspectives Inc). <http://eprints.ecs.soton.ac.uk/10999/>

The study is very interesting and we need many more studies to get more facts and fewer anecdotes. This study, for instance, addresses the opinion of authors on publishing their work in open access journals.

From the Executive summary

"For example, the main reasons for authors publishing their work in open access journals are the principle of free access for all and their perceptions that these journals reach larger audiences, publish more rapidly and are more prestigious than the toll-access (subscription-based) journals that they have traditionally published in. The principal reasons why authors have **not** published in open access journals are that they are unfamiliar with any in their field and that they cannot identify a suitable one in which to publish their work."

It is encouraging for the open access movement that self-archiving in institutional repositories has doubled since the last study a year ago and that self-archiving in subject-based repositories has increased by 60%.

"Almost half (49%) of the respondent population have self-archived at least one article during the last three years in at least one of the three possible ways - by placing a copy of an article in an institutional (or departmental) repository, in a subject-based repository, or on a personal or institutional website. More people (27%) have so

far opted for the latter method - putting a copy on a website - than have used institutional (20%) or subject-based (12%) repositories, though the main growth in self-archiving activity over the last year has been in these latter two more structured, systematic methods for providing open access. Use of institutional repositories for this purpose has doubled and usage has increased by almost 60% for subject-based repositories."

There is still a substantial proportion of authors unaware of the possibility of providing open access to their work by self-archiving. It is disappointing that 36% of the total author population have not yet been made aware of this possibility.

Should self-archiving be voluntary or should it be made mandatory by employers or funders of research?. Is voluntary self-archiving working or must you wield a stick and/or a carrot? The study shows that:

"The vast majority of authors (81%) would willingly comply with a mandate from their employer or research funder to deposit copies of their articles in an institutional or subject-based repository. A further 13% would comply reluctantly; 5% would not comply with such a mandate."

The study also addressed the question as to whether open access is an advantage over the present publishing model. Some publishers argue that open access and self-archiving are threats to the present publishing model.

"In a separate exercise we asked the American Physical Society (APS) and the Institute of Physics Publishing Ltd (IOPP) what their experiences have been over the 14 years that arXiv has been in existence. How many subscriptions have been lost as a result of arXiv? Both societies said they could not identify any loss of subscriptions for this reason and that they do not view arXiv as a threat to their business (rather the opposite - in fact the APS

# News from our Association

## Letter from the President

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helped establish an arXiv mirror site at the Brookhaven National Laboratory."

### **Voluntary self-archiving at the U.S. National Institute of Health**

Sheldon Kotzin, U.S. National Library of Medicine, talked about „Archiving NIH research results in PubMed Central“. PubMed Central is the U.S. National Institutes of Health (NIH) free digital archive of biomedical and life sciences journal literature.

Authors can self-archive journal articles in PubMed Central and publishers can deposit their full-text journal articles. 288, 000 articles have already been deposited by publishers.

October 13, 2004 NIH (National Institute of Health) expressed concerns that federally funded research was not readily accessible to everyone. ([http://www.nih.gov/about/publicaccess/public\\_access\\_background.htm](http://www.nih.gov/about/publicaccess/public_access_background.htm))

"Advanced computing technologies and a networked environment are creating an infrastructure that supports new research capabilities, expands the ability to build upon and connect the work of many scientists, and facilitates exploration of new scientific frontiers. These technological advances are providing new opportunities to enhance access to and archive the scientific literature.

Thus, although direct and indirect costs included in federal grant funds contribute to financing the publication of manuscripts and subscriptions for journal use, and access to such information is being improved by modern technology, the published results of federally funded health research are not readily accessible to everyone."

In September 2004, NIH proposed a policy to enhance public access to archived publications resulting from NIH-funded research:

- The draft policy requested, but did not require, that NIH-supported investigators submit electronically to the NIH the final, peer-reviewed author's copy of manuscripts upon acceptance for publication.
- The manuscripts would be archived in PubMed Central (PMC)
- The author's copy would be made available freely to the public through PMC six months after the publisher's date of final publication (or sooner if the publisher agrees).

This proposed policy received 6,249 comments.

In response to feedback, NIH revised the proposed policy in February 2005 (Effective from May 2) (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-05-022.html>) to:

- Emphasize the voluntary nature of authors' submissions.
- Clarify "NIH-funded investigators" to specify those supported with "direct costs" from NIH.
- Provide authors with flexibility to specify the timing of the posting of their final manuscript for public accessibility.
- Strongly encourage posting for public accessibility through PMC as soon as possible and within 12 months of the publisher's official date of final publication.

For the open access movement this revised policy was a disappointment and a step back from the initial proposal. It is going to be very interesting to see if this voluntary submission will work and to compare it with the submission rate at CERN, as CERN has implemented a policy that requires their researchers to deposit a copy of all their published articles in an open access repository. The progress will be very closely monitored.

"The Committee directs the Office of the Director to submit...by March 1, 2006 a comprehensive

# News from our Association

Arne Jakobsson

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report on the progress achieved during the first eight months:

- Total of applicable peer-reviewed articles deposited in PubMed Central
- Embargo period requested by the author for each deposited work
- NIH's best estimate of the total of applicable... articles available for deposit."

## Open Access Journals

One important route to open access is that of open access journals with author-fees and/or institutional subscriptions to author-pays journals. It is encouraging for the open access movement that some publishers are opening the door for open access.

Springer has introduced *Springer Open Choice*: a programme that allows authors of journal articles to pay a basic fee to have their article made available to the public. The basic fee for Springer Open Choice is \$3,000.

November 15, 2004. The American Institute of Physics announced that it will offer on a trial basis an open access publishing option to authors contributing to three AIP journals: *Journal of Mathematical Physics*, *Review of Scientific Instruments*, and *Chaos: An Interdisciplinary Journal of Nonlinear Science*. The initiative has been named *Author Select*. Beginning on January 1, 2005, JMP, RSI, and Chaos will permit authors (or their funding agencies) to pay a \$2000 fee prior to publication, for articles that will be freely available to anyone on the Web.

And there is of course the open access publisher BioMed Central ([www.biomedcentral.com](http://www.biomedcentral.com)) with 130 open access journals and the PLoS-journals (<http://www.plos.org/>). For most journals BioMed Central charges \$605 for each article.

The most comprehensive directory of open access journals is the Directory of Open Access Journals (<http://www.doaj.org/>) which covers 1751 free, full text, quality controlled scientific and scholarly journals. Currently 432 journals are searchable at article level. As of today 77484 articles are included in the DOAJ service.

During the open access seminar Richard Gedye, Sales and Marketing Director for Oxford Journals, reported on the Oxford Journals Open Access experiments. Oxford Open was launched July 2005 and the charge is \$2800 for each article. Richard Gedye explained that Oxford University press experimented with open access to collect more first-hand data on the viability of open access as a long-term journal business model.

Tony McSeán, Director of Library Relations Elsevier, reported that Elsevier has decided not to experiment with open access publishing. They do not see how it can be viable for anyone and they argue that serious practical issues still have to be addressed and they have worries about sustainability. They also consider that open access publishing is divorcing payment from consumption.

## Conclusion

All stakeholders are committed to and interested in an effective system for dissemination of scientific information. Is the present publishing model the solution or are there better alternatives? Both the present model and alternative models should be explored. Much more experimentation and research has to be done to explore the options. Health sciences libraries are an important stakeholder and should together with the other stakeholders participate in this process.

**Arne Jakobsson**  
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# News from our Association

## Prestigious Award for One of Our Best Known EAHIL Colleagues

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**Elisabeth Husem** has been awarded the **Norwegian King's Merit Medal in Silver** for her tireless work for the medical library profession over many years. Her citation emphasises her achievements in promoting and sustaining the development of medical librarianship in the new Baltic states, particularly in Lithuania. She will be presented with her award by King Harald V on November 3rd.

Elisabeth Husem is librarian at the University of Oslo's Department of Psychiatry. In 1995-6 and 1996-7 she served two terms as president of the European Association for Health Information and Libraries (EAHIL) and served as president of the Norwegian medical library association (SMH) for over 15 years in the 1980s and 90s. She was the recipient of the 2001 EAHIL Award of Honour and continues to champion the cause of professionalism in information services, working with Norwegian and Lithuanian colleagues to assist the medical libraries of St Petersburg.

## News from PHING



### **Report of the Pharmaceutical Information Group (PHING)**

The group's Web pages, [http://www.eahil.net/pharmaceutical\\_information\\_group.htm](http://www.eahil.net/pharmaceutical_information_group.htm), were launched at the EAHIL

Workshop in Palermo in June 2005. Since then the pages have been added to and expanded with the help of PHING members. But, as with all information resources, it will need constantly updating so please do send in any suggestions to Michelle Wake at [michelle.wake@ulsop.ac.uk](mailto:michelle.wake@ulsop.ac.uk).

One section of the PHING Web pages lists journals that are free online to all. This includes the Journal of Pharmacy and Pharmaceutical Sciences from the Canadian Society for Pharmaceutical Sciences - the first in its field to be a free and open access peer-reviewed online journal. Other key titles with an

international remit are also listed, so very much worth a look.

By the time you read this in late 2005 a project by PHING to evaluate pharmacy databases will be underway. Emails will have been posted on the EAHIL lists and contributions to this work, which will be able to inform all EAHIL members selection of databases, would be most gratefully received.

We are hoping to be able to have a special interest session at the 2006 EAHIL Conference in Cluj, Romania. We will definitely be having a business meeting which will also have a social element.

**Michelle Wake**  
PHING Secretary  
Head of Library and Information Services  
The School of Pharmacy  
University of London  
[Michelle.wake@ulsop.ac.uk](mailto:Michelle.wake@ulsop.ac.uk)

# News from our Association

## Have you checked your data in the EAHIL Membership Database?

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### **213 EAHIL Members Have Not Yet Updated Their Membership Record in the EAHIL Membership Database**

The EAHIL Membership Database was launched Thursday 26th of May 2005. All EAHIL membership records have been imported from the EAHIL Secretariat to the new membership database. It is very important that your membership record is correct. The information in the database will be used for mailing the Journal of EAHIL and for communicating with all members via e-mail, so it is vital that both your mail address and your e-mail address are up to date.

Every member has been assigned a temporary personal username and a temporary password to access his/her membership record. You must change both your username and password the first time you login. An e-mail was sent to all EAHIL members on the 26th of May asking the members to login to the database and check/update their membership record. Many members have not yet checked/updated their record.

### **Could you please login to the membership database and check/update your membership record!**

There is a link from the EAHIL homepage ([www.eahil.net](http://www.eahil.net)) to the EAHIL Membership Database.

Have you lost your username and password? Click on "Forget your password" on the membership database login page. Type your e-mail address to receive an e-mail with your username and password. If the e-mail address you type in matches with your e-mail address in the database you will receive an e-mail with your username and password.

35 members do not have an e-mail address in their membership record. I have asked all council members to check if any member(s) in their country is lacking an e-mail address in their membership record and contact all members without an e-mail address. If you have not received an e-mail about updating your membership record you could be one of the 35 members or your e-mail address might be wrong. Please contact your council member or our developer/super user Morten Pedersen [morten.pedersen@ub.uio.no](mailto:morten.pedersen@ub.uio.no). Council users will be able to update all records within their own country/countries. Super users will be able to update all records. You can upload a picture that will be shown together with your membership record. We really hope that everybody will upload a picture so that everyone can combine a name and a face.

All the information stored in the database is just for EAHIL members. No one from the outside can view any of the information on these sites.

# News from our Colleagues

## News from MLA

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### **Introducing the President, MLA 2005-2006**

Mary Joan (M.J.) Tooey, was installed as MLA President at the end of the Annual Meeting in San Antonio, Texas. MJ is Director of the Health

Sciences and Human Services Library, University of Maryland in Baltimore, MD. In a recent article, Frieda Weise, former Director of that library, described her as a person of "wit, intelligence, and passion for the profession." She has been a medical librarian and active member of MLA for over 20 years, recognized for sharing her experience and offering leadership in technology, education, planning library facilities and library management.

"Transformation" is the word MJ has chosen to describe her focus as MLA's leader this year. Her goals are divided into three areas:

- *Transforming Ourselves: The first step is supporting our own personal and professional growth.* Included here are education, engaging each other, and networking locally and nationally.
- *Transforming Our Profession: we have a compelling and an exciting profession with incredible opportunities.* Exploring new professional roles, recruiting and nurturing new members, and promoting the profession to all audiences.
- *Transforming Our Association: MLA's survival and relevance depend on agility and responsiveness.* Included here are specific objectives to redesign and renew MLANET as a communication portal; to

actively seek partnerships with other professional associations to develop innovative programs; to identify issues of national and international importance to members as a foundation for MLA's advocacy programs, and many more.

For more detail on MJ's plans and current activities, visit [mlanet.org](http://mlanet.org).

### **MLA '06 Phoenix, Arizona**

MLA 2006 Annual Meeting *Transformations A-Z* will be held in Phoenix, Arizona May 19-24, 2006. This year some of the MLA '06 section programs are soliciting posters on the same themes as those for papers and will display those posters in the same room as paper presentations in a simultaneous, unified poster arrangement. Abstracts may be submitted online at MLANET. The closing date is **November 7, 2005** for both posters and paper submissions. We hope to hear from many of our European colleagues at next year's conference.

### **Medical libraries and Hurricane Katrina**

No doubt the European press covered the devastation and personal tragedy caused in late August by Hurricane Katrina as she very slowly made her landfall and moved through Louisiana, Mississippi, Alabama and parts of Georgia and Florida. Many MLA members and their institutions were directly or indirectly affected by Katrina's destruction. The MLA Board of Directors met in September and immediately took several actions to assist our members.

- **Dues relief:** The Board approved giving free 2006 MLA memberships to the 29

# News from our Colleagues

Eve-Marie Lacroix

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individual members and four MLA institutional members in areas most impacted by Hurricane Katrina.

- Publications: MLA is holding hard copies of *MLA News* and *Journal of the Medical Library Association* for those unable to receive mail and will send copies to the affected areas as soon as possible.
- Fundraising: MLA has initiated the Medical Library Disaster Relief Fund to raise money specifically for medical libraries impacted by the hurricane. Fundraising is being done in

collaborating with regional chapter fundraising.

- MLA Katrina portal: MLA has created an information portal for communicating information on the affected libraries, assistance needed and provided, and links to other library aid and resources available. The URL is [http://www.mlanet.org/hurricane\\_katrina.html](http://www.mlanet.org/hurricane_katrina.html), linked from the home page of [mlanet.org](http://www.mlanet.org).

**Eve-Marie Lacroix**

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

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## Palermo Workshop EAHIL Certificate of Attendance

I have received back from the organizers of the Palermo Workshop, about 50 attendance certificates. I would be very happy to send them on to those who did not have the chance of picking them up.

Please contact me by email: [mcolombi@jcit.jnj.com](mailto:mcolombi@jcit.jnj.com) with the subject line "EAHIL Certificate of Attendance".

**Manuela Colombi**

# News from our Colleagues

## 9<sup>th</sup> International Congress on Medical Librarianship, 20-23 September 2005, Salvador, Bahia, Brazil

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The Latin American and Caribbean Center on Health Sciences Information, the BIREME/PAHO/WHO and the IFLA Section of Biological and Medical Sciences Libraries held the 9th International Congress on Medical Librarianship in the city of Salvador, in the state of Bahia, Brazil, 20-23 September 2005.

To celebrate the presence of the ICML for the first time in Latin America, ICML9 incorporated a number of regional and national meetings, including the 7th Latin American and Caribbean Congress on Health Sciences Information, CRICS VII. The theme of the ICML9 Congress was *Commitment to Equity*, with the focus on the understanding that knowledge should permeate all activities regarding human health. Over 1,000 participants from more than 50 countries attended the ICML9. The scientific programme was presented in plenary sessions and parallel sessions with contributed papers as well as poster sessions.

On Thursday 22 September, EAHIL arranged a seminar with the focus on quality in health information. The seminar was chaired by Tony McSeán. Andrea Lane, BMJ Publishing Group (United Kingdom), Carol Lefebvre, the UK Cochrane Centre (United Kingdom), Heather Todd, University of Queensland (Australia) and Arne Jakobsson, Library of Medicine and

Health Sciences (Norway) presented papers on quality in health information.

Many speakers addressed the problem of inequality. Equality in both access to and mastering of information and knowledge is an essential condition for improving the health and quality of life of individuals and communities. Mirta Roses, Director of the Pan-American Health Organization (PAHO), addressed the audience via a video recording. She stressed the nature of knowledge and information as being public goods that need to be administered by public bodies and agencies. *Being deprived of information flows is the worst of exclusions*, she said, calling for the improvement of policies and public programmes to foster these information flows and their accessibility.

In her opinion, inequality is the root of all health problems in Latin America. Exclusion from information and knowledge hinders improvement in living conditions and it affects not only the health of the more disadvantaged sections of the population, but of society as a whole.

Also Ariel Pablos, Director of the WHO Programme for Knowledge Management and Sharing, addressed the issue of the digital divide between what is known and what is

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**ICML 9 | CRICS 7**

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[www.icml9.org](http://www.icml9.org)**

# News from our Colleagues

## 9<sup>th</sup> International Congress on Medical Librarianship, 20-23 September 2005, Salvador, Bahia, Brazil

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actually done. Bridging the *know-do* gap in global health would require improved access to information; translating knowledge into action; sharing and reapplying knowledge acquired through experience, and commitment to boosting e-health in developing countries.

During the closing session, the participants in the 9th International Congress on Medical Librarianship, and Seventh Regional Congress of Information in Health Sciences

(ICML9/CRICS7) agreed on the Declaration of Salvador - Commitment to Equity. The declaration defines a global commitment with equality of access to information and knowledge. The declaration is available on <http://www.icml.org/channel.php?lang=en&channel=91&content=438>

**Arne Jakobsson.**

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The International Congress on Medical Librarianship is the premier event in the medical and health libraries calendar. The intention is that every four or five years the medical library profession meets to study and report on progress since the previous meeting, to make contact with old contacts and meet new ones. The conference venue is decided by IFLA, and in 2005 the congress met in Latin America for the first time - in the Brazilian tropical resort of Salvador. It is hard to imagine that any conference could be favoured with a better setting, with conference hotels rising up from the Atlantic breakers and a beautifully restored colonial city centre to provide atmosphere for the social events.

Many hundreds of delegates attended, including very large numbers of Brazilian librarians taking full advantage of an international library conference on their doorstep, and the conference sessions and exhibition area were lively and bustling throughout the event. Perhaps inevitably the

nature and emphasis of the meeting reflected local concerns and the priorities of Bireme, who organised the event with their usual style and aplomb.

As an organisation, Bireme is very committed to open access publishing, and this was very much reflected in the subject matter in the plenary sessions. But there was also room for another notable feature of Bireme's biennial PAHO regional library conferences - the presentation of interesting academic perspectives on the structural and cultural aspects of language and communication. This was nowhere more apparent than in the last speaker of the plenary programme, the French-Canadian Professor Pierre Lévy from the Department de Sciences du Loisir et de la Communication Sociale, Université du Québec à Trois-Rivières who was in sparkling form with a very challenging analysis of the role of language in the development of human society and how this may be taken forward in the computer age.

The contributed paper sessions were, at times, a bit of a lottery. Up to nine papers were

# News from our Colleagues

## 9<sup>th</sup> International Congress on Medical Librarianship, 20-23 September 2005, Salvador, Bahia, Brazil

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scheduled for each parallel session and, perhaps in keeping with the democratic spirit of the conference's Commitment to Equity theme the chair was not appointed in advance but selected democratically as each session unfolded. In practice this was usually not much of a problem, beyond a certain amount of over-running which happens even in sessions with the most authoritarian chairing.

The Commitment to Equity theme was also apparent in the comparatively large representation of developing countries amongst those attending. The AHILA members in particular contributed substantially to the quality of the programme, notably the plenary paper by the AHILA president, Ibrahima Bob from Senegal, who spoke on access to health information in Africa. Sadly, this representation was not matched by the attendance from North America and Europe, which was extremely disappointing. The joint EAHIL / MLA members' dinner on the last night fitted comfortably round a single (very large) table.

This breadth of attendance was assisted by a health scholarship fund of €2,000 made

available from the London ICML's surplus (which was in turn made possible in significant part by EAHIL's generous support to the London organisers), which was administered by the indefatigably independent Lenny Rhine of Florida University who did the same job in 2000.

Continuing the London tradition of sessions sponsored by regional health library associations, EAHIL sponsored a parallel session on the theme of quality in health information services. The session was chaired by myself and featured three long-time EAHIL members Arne Jakobsson, Andrea Lane and Carol Lefebvre, plus a guest from Australia in Heather Todd, medical librarian at the University of Queensland and chair of the organising committee for the 2009 ICML. The papers presented four contrasting perspectives on the importance of quality in health libraries and our services and were very well received.

**Tony McSeán**  
EAHIL Past-President  
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### ICML10

The University of Queensland Library and the IFLA Section of Biological and Medical Sciences Libraries invite you to participate in the 10th International Congress on Medical Librarianship (<http://www.icml2009.com/>), to be held in September 2009 in Brisbane, the capital city of the state of Queensland, Australia. The ICML 2009 theme *Positioning the Profession* will offer delegates an array of research papers, user studies and innovative solutions from a wide range of local and international presenters. A number of continuing education activities will be offered as well as tours of the region.



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# THEME: OPEN ACCESS

## The National Institutes of Health "Public Access Policy"

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On February 3, 2005, the National Institutes of Health (NIH) announced a new policy designed to enhance the public's access to published articles which result from NIH-funded research. Under the policy, NIH-funded scientists are requested to submit their manuscripts which have been accepted for publication to a web-based archive at the National Library of Medicine. NIH views this policy as important, not only for making the results of research more accessible to the public, health care providers, educators, and scientists, but also for assisting NIH in managing its research portfolios and for creating a stable archive of research publications to ensure the permanent preservation of these critical research findings. The archive is PubMed Central (PMC) at the National Library of Medicine (NLM). PMC is a digital archive of the life sciences journal literature.

### **The Development of PubMed Central (PMC)**

For decades NLM has carried out its mandate of preserving the biomedical literature. In the digital age, PMC (<http://www.pubmedcentral.gov>) is a natural extension of this mission into a computer-based archive of full-text journal literature. PMC depends upon the voluntary participation of publishers who provide electronic copies of full-text journal articles. The articles are available for free, online access and are integrated with a variety of other scientific information resources at the NLM. A key principle behind PMC is that giving all users free and unrestricted access to the content in PMC is the best way to ensure the effectiveness and utility of the archive over time.

The principles for participation in PubMed Central are straightforward. Participation in PMC is open to any English-language life sciences journal that meets NLM's standards for scientific and editorial quality of its content and for the technical quality of its digital files. A

journal must provide a full XML version of its journal issues, including high-resolution digital image files and supplementary data files if available. A journal may request to delay free access for a period generally up to 12 months. The copyright to all material deposited in PMC is retained by the publisher or author, whichever is applicable. PMC is simply an archive and does not claim copyright on any material. Once a journal has deposited current content, those deposits and free access permissions are permanent. A journal may stop depositing new material but may not withdraw material already deposited.

### **PMC Back Issue Scanning Project**

The back issue scanning project was launched in May 2003 to make the older, print-only content of participating journals searchable electronically, and available in a digitized form. Currently, the complete back runs of 20 journals have been processed, and over 70 more journals are in production. Our back issue scanning project is vastly increasing the material in PMC and making this critical information available electronically for the first time. It currently accounts for over 287,000 articles in PMC today. In each case, the complete volume is available, including front and back covers, tables of contents, administrative material such as masthead and editorial boards, and the advertisements. Views include a full-text summary, HTML view, separate views of TIFF images, and the full PDF. The earliest titles available in their entirety, each starting with volume 1 number 1, include *Bulletin of the Medical Library Association 1911-*, *Proceedings of the National Academy of Sciences 1915-*, and *Journal of Bacteriology 1916-*. Many more important early works are in progress, including BMJ back to 1853. In 2004, NLM signed an agreement with the Wellcome Trust and the Joint Information Systems Committee in the UK to

# THEME: OPEN ACCESS

Martha R. Fishel

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scan additional journals that they identify and fund, all of which will also be added to PMC. Those include titles such as *Annals of Surgery* back to 1885, *Journal of Physiology* to 1878, and *Journal of the Royal Society of Medicine* to 1907 among others.

## NIH Public Access Policy

PubMed Central and its underlying technologies have been key components in the NIH Public Access policy. Over the last several years, Congress had indicated its interest in ensuring that the results of NIH supported research are made available to the public. In September 2004, NIH announced its public access policy by issuing it in a proposal format and distributing to concerned stakeholders, including publishers, authors, journal editors, and consumers. After a sixty-day public comment period during which over 6,000 comments were received, NIH modified the proposal and issued the final policy on February 3, 2005. The policy stated three major goals:

1. Improve access via the Internet to NIH funded research results for health professionals, researchers, and the public.
2. Create a permanent archive of these publications to ensure that they will be available in the future.
3. Enable NIH to manage more efficiently and understand better its research portfolio, monitor scientific productivity, and help set research priorities.

The policy requests, but does not require, that authors submit to PMC an electronic version of their final manuscript upon acceptance for publication. The policy strongly encourages that authors specify posting of their final manuscripts for public accessibility as soon as possible, but within 12 months of the publisher's official date of publication. The policy specifically applies to research supported in whole or in part with direct costs from NIH. It includes those receiving funding through grants, cooperative agreements,

and contracts as well as those in the NIH intramural program. It applies to original research but not to book chapters, editorials, reviews, or conference proceedings.

## Copyright

A concern was raised when the proposal was announced about the status of an article's copyright. The policy explicitly states that funding recipients may continue to assert copyright in their works and they may assign those copyrights to journals as is the current practice. Moreover, the PMC archive includes a copyright notice alerting users to the rights of copyright holders.

## Current Status

The NIH Manuscript Submission System (NIHMS) has been developed to facilitate submissions under the NIH Public Access policy. NIHMS enables authors to login to an NIH web site and upload their accepted, peer-reviewed manuscript files. The system generates an XML tagged version of the paper which the author reviews. Upon the author's approval and after the selected post-publication delay, the paper is posted to the PMC archive. The system has been operational since May. The percentage of manuscripts that are being submitted to NIHMS is averaging just under 5% of the estimated total number of NIH-funded publications.

Further information about the NIH Manuscript Submission system can be found at its web site: [www.nihms.nih.gov](http://www.nihms.nih.gov). Additional information about the final NIH Public access policy, along with useful Q&As can be found on the NIH website: <http://www.nih.gov/>.

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# THEME: OPEN ACCESS

## U.S. MEDICAL LIBRARIES AND OPEN ACCESS

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### **Summary:**

*The U. S. medical library community has been dealing with the issue of open access in a variety of ways since the mid-1900's as part of both a professional belief in the importance of easy access to quality health information and also in response to the increasingly high cost of journals. The current publishing trend of high prices for institutional licenses as well as pay-per-view fees are creating information access obstacles for scientists, clinicians, and health consumers and has pitted librarians against publishers. This article describes some initiatives, viewpoints, and the educational challenge of open access.*

### **Keywords:**

Open access, scholarly publishing, medical librarians.

### **MLA and Open Access.**

The Medical Library Association (MLA) and its membership have actively supported open access initiatives since the mid- 1990's with memberships in the Scholarly Publishing and Academic Resources Coalition SPARC, the Open Access Working Group (OAWG), and the Information Access Alliance. The MLA Scholarly Publishing Task Force, chaired by Patricia L. Thibodeau, was appointed to monitor and make recommendations about initiatives in this area. Thibodeau also serves on the NIH Public Access Working Group that is evaluating the NIH public access policy for a report back to the U.S. Congress in 2006. In addition to being an advocate for open access, MLA has tried to maintain a balance in its approach, continuing to work with publishers on these important issues as partners and not as opponents in order to strike a feasible balance.

In 2006, MLA hopes to sponsor a session with the Society of Scholarly Publishing to address scholarly publishing issues.

MLA's peer-reviewed journal, *Journal of the Medical Library Association (JMLA)*, formerly the *Bulletin of the Medical Library Association (BMLA)*, has been available since 2000 through PubMed Central, a free digital archive of the biomedical and life sciences journal literature.

In 2003, MLA published the MLA Statement on Open Access authored by the association's Governmental Relations Committee that stated that "The Medical Library Association (MLA) supports both the concept of open access to information generated from federally funded scientific and medical research and current copyright law, and maintains that having access to timely, relevant, and accurate information is vital to the health of our nation and its education and research programs." In 2002, MLA signed on to the Budapest Open Access Initiative, and in 2004, MLA and the Association of Academic Health Sciences Libraries (AAHSL) published the joint policy statement, *Public Access to Health Information: Finding a Balance*. The policy stated that "making health care information more readily available to the public was vital to the nation's health and furthered research, innovation, and development of knowledge. To provide a return on society's investment in scholarly research, health care information must also be organized, communicated, and preserved for current, historic, and future access by the public."

### **Medical Librarians and Open Access.**

Open access is not without controversy and it is too soon to determine its success and impact

# THEME: OPEN ACCESS

Patricia L. Thibodeau

Carla J. Funk

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on scholarly communication and, ultimately the library community. Many important questions remain. Which open access models will be viable and sustainable, which will support open access and the reliable and efficient dissemination of the information, which will maintain the integrity of information generated by research, and which will preserve that information for future generations? All of these questions are of great concern to medical librarians. Medical librarians are also busy educating both themselves and authors and researchers about open access and need materials to assist them in these endeavors. Librarians believe that it is also critical to preserve the processes of peer review, editing, and scientific quality control in the publication of journal articles because of the crucial role that scientific and medical research play in the delivery of healthcare. Peer review, the scientific community's method of quality control, must balance the independent nature of this process and employ safeguards against undue peer pressure and inappropriate political criticism. Also, the dissemination of results should be a recognized part of the cost of conducting research. Expansion of collaboration between the public and private sectors (for example, US government agencies, public health organizations, libraries, publishers, foundations, and societies) for distribution of information should be encouraged. The value-added roles that publishers play in the dissemination of knowledge should be recognized, and librarians and publishers should continue to discuss their differences and try to reach compromises, through open forums, meetings with advisory committees, and other means.

Librarians recognize that it is also important to maintain only one final version of the manuscript for publication for permanent archival access. Research lays the foundation for future scientific discovery and information contained in earlier studies is often critical to care as demonstrated by the Johns Hopkins incident involving the death of a research subject. Long-term preservation and access to published research continue to be areas of great concern due to the constantly changing policies in the publishing industry because of acquisitions and mergers. One successful model is the role that the National Library of Medicine (NLM) plays in disseminating medical research information for free to the public through MEDLINEplus, PubMed Central, ClinicalTrials.gov, and the PubChem project. Similar models in the commercial and non-profit sectors must be examined as well. Librarians understand that the process by which open access will function within the current copyright law should be more closely examined. Copyright and public access are different entities, but not mutually exclusive. Existing provisions (for example, fair use and first sale doctrines) that allow exemptions for libraries for educational use and promote dissemination of information must be protected. Authors should be appropriately recognized for their intellectual contributions independent of the venue in which the work is disseminated and should assume full responsibility for the rigor and integrity of their work.

## **The Educational Challenge.**

U.S. medical librarians are now engaged in the task of educating peers, faculty and researchers about open access publishing. The MLA

# THEME: OPEN ACCESS

## U.S. MEDICAL LIBRARIES AND OPEN ACCESS

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Scholarly Publishing Task Force has published *Open Access - A Primer*, by task force member Mark Funk. It is a beginner's guide that briefly describes what open access is, useful definitions, the economics of open access, the groups involved, and what librarians can do. A major educational effort is also now underway concerning the National Institutes of Health Policy on Enhancing Public Access to Archived Publications Resulting from NIH-Funded Research and open access in general. The NIH Public Access Policy holds the promise of vastly expanding and improving public access to much needed medical literature. However, when the final policy was announced in February 2005, US librarians reacted to it with mixed emotions. Librarians were pleased to see a federal agency address the growing demand for free and immediate access to research results, but were less pleased with the fact that the final policy did not require submission and did not stipulate immediate release. Instead of being required, submission was strongly encouraged. The time span for releasing manuscripts shifted from 6 months to 12 months, with NIH cautioning authors to make sure their copyright agreements with publishers allowed submission and release to the public. Essentially the final policy relies on the willingness of authors to negotiate with publishers on release dates, ensure they have a completely edited version of their manuscript, and take the time to submit their articles.

When the NIH Public Access Working Group, appointed by the National Library of Medicine Board of Regents, met on July 11, 2005, it was clear that researchers had not quickly embraced this new policy. Based on a National

Library of Medicine (NLM) study of the number of NIH-funded articles that were indexed over previous years, the projected number of submitted articles should have been 5,500 papers per month or an average of 250 manuscripts per day. NIH analyzed all submissions as of July and reported the following:

- 3% of the possible manuscripts had been submitted
- 4% of the NIH researchers had participated
- most of the authors (68.3%) requested immediate public access
- 7.9% requested 6-month release dates and 14.3% stipulated 12-month embargoes.

The Public Access Working Group was then faced with the question as to why the submission rate was low. Was it a problem of awareness of the policy? NIH had sent out letters and emails to researchers announcing the policy and giving them links to resources. Many librarians, especially in academic settings, had also alerted their research communities. A few publishers commented that they had not had time to communicate with their authors about their policies, but others had done so.

Was the submission process too difficult? NIH reported the authors using the system as of July did not seem to have difficulties. Many (48%) completed the process in less than 3 minutes, with 84% taking less than 10 minutes. Only 8% took longer than 20 minutes. The third-party submission option had been released the prior week, an option that allowed librarians to assist with manuscript submission, but it was too soon to tell if this approach would increase participation. As of early October 2005, a

# THEME: OPEN ACCESS

Patricia L. Thibodeau

Carla J. Funk

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search of PubMed Central resulted in only 514 author manuscripts. This is less than 2% of possible submissions over a five-month period. Of course, many more papers may be in the NIH system waiting for release dates based on 6 or 12-month embargoes.

The question remaining before the Working Group was what might be real or perceived obstacles to participation. The ensuing discussion identified a number of factors that might be limiting participation: lack of understanding of the policy; concern over creating an author's version instead of using the final published article; confusion over copyright issues; concern about the impact on societies that published journals; and, the fact that it was not a mandatory activity. Initial analysis of an informal survey conducted by MLA and AAHSL of AAHSL institutions confirms that researchers are giving these as reasons for non-compliance. The survey results also revealed that while the majority of researchers are aware of the policy, many are confused about its intent and the mechanics of preparing and submitting a paper.

The MLA Scholarly Publishing Task Force has developed FAQs for the NIH Public Access Policy to help educate medical librarians about the policy and to help them educate their faculty and researchers on the submission process. The challenge will be to develop strategies that will increase understanding and compliance with the policy and help make NIH's public access policy and model a success.

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# THEME: OPEN ACCESS

## Open Access Today and Tomorrow

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Like all forms of human endeavour, library and information work is prone to fashions and enthusiasms. Some of these mutate into the mainstream and others fade quietly away. Crucial survival indicators for innovations are that they are a

better way of doing our job, that they are not rapidly overtaken by something even better, that they deliver tangible benefits to the library's paymasters - and above all that library users like them.

Open access (OA) is a single, value-laden term for a wide variety of activities, and in this paper only its relevance to conventional scientific, technical and medical (STM) publishing is covered. In one form or another OA has been on the agenda for nearly 10 years and there are currently two basic genera. OA gold is a direct alternative to the traditional subscription journal methodology, with the costs being met by the author and/or the author's funding agency; OA green is where the article is formally published in a journal and its text is then separately placed by the author in an archive which is open to all.

Passions can run high on all aspects of OA, but in reality there is a growing general acceptance of OA green and almost all of the major commercial and learned society publishers have author agreements which accommodate self-archiving. Elsevier was one of the first to change its policy in this regard and our agreements give authors the right to archive the full post-print version as soon as the article appears on ScienceDirect. Publishers and subject repositories are negotiating ways of co-existing. Institutional repositories are less of a threat to what subscription-based STM publishers see as their essential interests, and many publishers are working with universities to ensure that repositories develop to serve as fully as the

technology allows the emerging intra-mural functions of archiving, staff management, administrative efficiency, institutional marketing and so on. There are issues to be resolved where deposited texts are linked (particularly by third parties) to in effect reconstructed parallel publications, but for almost all STM publishers for almost all of the time OA green is not a contentious issue.

OA gold is a stickier matter. For almost all STM publishers this is a matter of practicality rather than principle: commercial and society publishers alike would happily embrace publishing-charges as a methodology provided that it meets all the requirements of scientific publishing and provides a viable, sustainable business model. Many of the major publishing houses are experimenting with OA in one way or another. Even those like Elsevier which are still looking on from the sidelines are paying the closest possible attention, with an eye to the future.

The simplicity and operational advantages of OA are plain to all and not seriously in dispute, but there are still some very significant difficulties to be worked through:

### **Financial viability**

The cost of bringing an article from submission to the point where it is ready to be released to the printer or the online service is a constant, regardless of the revenue model. Springer are charging \$3,000 for their OA option, which is close to Elsevier and other estimates of an economic price, and there is no evidence as yet that the author community is ready to pay publication charges at this level.

### **Commercial consumers of STM information**

Industry is a large net consumer of scholarly STM publications (ie they buy a lot but publish much less). Under an OA regime this revenue would be lost from the system and would need to be replaced

# THEME: OPEN ACCESS

Tony McSeán

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from somewhere - personally I find assertions that industry would continue to pay similar amounts out of a sense of moral duty, to be a little fanciful, and think the additional burden would fall on the scholarly community in some form.

## **Divorcing payment from consumption**

As a general rule of service provision, the greater the consumer influence the more likely that the service will be efficient, relevant and in tune with user needs.

## **Meritocracy**

One of the great, resilient strengths of traditional STM publishing is that, in principle at least, the blind peer review process on which it rests produces a pure meritocracy - top class papers get into top class journals regardless of the status of the authors. In the real world of academic life, author fees will be in effect rationed, and their allocation will be governed by internal power politics. In an OA environment, highly-regarded journals will be charging higher publication fees than their lower-status rivals. Junior staff and researchers from

poorer institutions and developing countries will struggle to achieve their current level of access to *The Lancet*, *Cell* etc.

Elsevier does not regard the adoption of OA publishing as a moral issue. As the world's largest STM publisher, we are ready to embrace any methodology that matches the requirements of all the participants in the scholarly communication process and which is financially sustainable in the long term. At the moment we do not think the case is near to being proven. Until it is, we will continue our policy of being responsive to the needs of customers and sensitive to those outside the first-world library network - working with patient information groups and above all with the HINARI and AGORA programmes to provide free or minimal-cost access to our full-strength ejournal service.

**Tony McSeán**

Director of Library Relations, Elsevier  
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## **PRIZES FOR PRESENTATIONS AT THE CLUJ CONFERENCE**

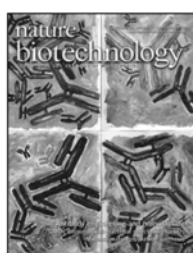
The Cluj IPC has decided that three prizes will be awarded for presentations given at the Cluj Conference 11-16 September 2006

- Best Poster from a first-timer at an EAHIL Conference
- Best Oral Presentation from a participant under 40 years old
- Best Oral Presentation overall



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# News from Cluj-Napoca, ROMANIA

## The 10<sup>th</sup> EAHIL Conference, 2006

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EUROPE AS AN OPEN BOOK

### The 10<sup>th</sup> EAHIL Conference

11-16 September 2006

Cluj-Napoca

Romania

### CALL FOR PAPERS

The ***abstract submission form***, as well as the guidelines for the submission of abstracts, have been available since September 2005. Abstracts can be submitted online, both for oral and poster presentations, and will be evaluated for acceptance by the members of the International Programme Committee. Please refer to the conference site: [http://www.eahilconfcluj.ro/call\\_for\\_papers.html](http://www.eahilconfcluj.ro/call_for_papers.html)

#### Important Dates

1. Deadline for abstracts submission: **15 January 2006**
2. IPC meeting to discuss submitted papers:  
**end of February, beginning of March 2006**
3. Deadline for sending confirmation of paper acceptance to the authors:  
**15 March 2006**
4. Deadline for receiving confirmation of participation from authors:  
**15 April 2006**
5. Deadline for submission of full text of papers: **31 July 2006**

# News from Cluj-Napoca, ROMANIA

## The 10<sup>th</sup> EAHIL Conference Themes

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### The 10th EAHIL Conference Themes

#### ● Access to health science publications:

Open access

- Where are we? Benefits, drawbacks, projects, trends, the future of OA
- The role of librarians in promoting and managing OA

Repositories for institutional publications

Current projects and models for improving access

- Projects for developing countries (e.g. HINARI)
- Partnerships and "sister-library" projects

New tools for libraries: Scopus, Scirus, Google Scholar, Google print

Access to e-journals

- Purchasing models: what to choose? Pay per view? Consortium?

#### 2. Information policy:

- What type of library for what type of services? Patients, students, health professionals, others.  
How wide should we open our doors? For free or for a fee?
- Organization of libraries: space, "new agora", "new buildings", "new needs", "new facilities",  
how far should we go to become virtual

#### 3. Our profession:

- Accreditation & Quality Management
- Continuing Professional Development
- Mentoring
- State of health librarianship profession in various countries

#### 4. User education:


- Methods: web-based teaching/learning packages, e-learning
- Integration into the school curriculum
- Measuring learning outcomes

#### 5. Library informatics:

- Metadata, structure of information, knowledge management, Semantic web.

#### 6. History of medicine, of medical libraries

#### 7. Patient/Consumer Information



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# THEME: OPEN ACCESS

## Does National Access to E-Publications Make a Difference: The Icelandic Experience?

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At the initiative of librarians and the Icelandic government the entire population of Iceland has been given access to a wide range of databases and e-journals in order to improve the nation's access to information. In this article the emphasis will be on e-journals. The ideology behind the national access to e-publications in Iceland was to make research articles in all academic disciplines freely available to all Icelanders on the Internet. (1) Since the project started in 2001, contracts have been signed with the providers of electronic journals but there are still many important providers that have not yet been included, due to lack of funding. The aim of the Icelandic national access project is to promote and improve research developments and support education such as distant education. This article discusses the different issues involved in the national access, such as the usage, funding of the project and the limitations of the business model in use.

### Two lines of thought - one project

In 1998 libraries wanted to share resources to make accessible larger numbers of e-journals and databases to their users, mainly for the research community. At the same time the government had issued a policy on equal access for all Icelanders to the information society. These two lines of thought became one project as the libraries adopted the government's policy. The aim of the project was to make various electronic databases and e-journals accessible to the whole population of Iceland at an agreeable cost.

The result from this project was that contracts have been signed with the providers of electronic databases and journals. An access is IP based and opens to all IP addresses from domestic Internet

Service Providers. The project was initiated in 1998 by the Ministry of Education which set up a committee to look into the possibility of working out national agreements with vendors. In 1999 that committee proposed the establishment of a three year experimental project. The first contract was signed in 1999 for *Encyclopaedia Britannica Online*. In 2000 a working group was set up to carry out the 3 year experimental project. A number of contracts were signed before the 3 year project finished at the end of the year 2002. In 2002 the task was assigned to the National and University Library of Iceland.

### Present situation

The National and University Library of Iceland acts on behalf of the Ministry in all dealings with information providers, regarding financial, technical and public relations matters. An advisory committee works with the library and acts as the representative of end-users and libraries. The task is to select e-content, divide cost, and keep up-to-date on new developments, select which contracts are signed on the national level, decide which contracts are better kept in the hands of smaller consortia and which are better kept as individual subscriptions by an institution. (2)

The National consortium contracts 2001 - 2006 to e-journals are:

- Blackwell,
- Karger,
- Kluwer,
- Springer,
- Elsevier

Smaller consortia also signed agreements with vendors that allow national access such as the Health Consortium agreement in 2003 to Elsevier Health Sciences Collection. The National access to e-journals from 2003-2005 covers 81% of the total

# THEME: OPEN ACCESS

## Solveig Thorsteinsdottir

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cost of national access to e-journals but the Elsevier Health Sciences Collection covers 19% of the total cost.

### *Vendors*

The opportunity of working out national agreements with vendors' databases and e-journal vendors turned out to be possible because Iceland has a small population (about 300.000) and a high educational level. It ranks high in general IT use, the level of Internet access is high and computer ownership is also high.

### *Demanding users*

The international comparison shows that Iceland is among the top 10 nations in the quantity of medical research when calculated per one hundred thousand inhabitants. (3) During the period 1994-98 papers from clinical medicine in Iceland were ranked 1st in the world with 6.7 mean citations when the world mean was 4.1. Molecular biology and genetics were ranked 10th. (3) With the high output of scientific research the researchers depend on good access to research information and expect the libraries to provide easy and unrestricted access to e-journals.

### **High standard of health care**

Iceland enjoys a high standard in health care. Infant mortality rate is the lowest in the world. Life expectancy for males is the highest in the world. High standards depend on good access to quality information. Health care providers depend on good access to quality information. These characteristics have made Iceland the ideal place to develop such a project as national access and publishers were ready at that time to take part in the project.

### **The cost model**

The libraries pay the major part for national access. The journal subscriptions each library had in the year 2000 were used as the basis for the payments for the national licences. In addition a national access was negotiated for the whole subscription packages that the vendors were selling. This national access is 30% of the total cost and the subscription cost from the year 2000 covers 70%.

The subscription costs from the year 2000 is still used as a base for calculating what each library in Iceland pays, both for their former subscriptions and the national access. This is the cost model set up by the Icelanders not the publishers. The payments and division of cost for e-journals are as follows:

- The libraries pay 94% for e-journals and the state 6%.
- The cost is covered by 37 research libraries out of their budget, of which two libraries pay 71% and the rest 23%.

However the cost model is not working because only a few libraries pay for the e-journals out of their budgets. Many institutions are using this access and are not paying for their use.

The plan was to use the cost model in the beginning and later change it by looking at different factors such as usage. It has not been possible so far to change the model since it is difficult to divide the usage between participating libraries due to the fact that the users access from different locations in Iceland. Other institutions also claim they do not have the additional funds to pay for this access from their library budget.

There is a problem with calculating cost because of the uneven spread of subscriptions between libraries in the year 2000. The reason is that most

# THEME: OPEN ACCESS

## Does National Access to E-Publications Make a Difference: The Icelandic Experience?

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subscriptions were covered by the same libraries that carry the cost today.

A new model is needed because many changes have taken place since the national access first started. New universities have been established that do not participate in the old model since they did not have any journal subscriptions at the year 2000. Companies have also merged which does influence the cost model.

A group is now working towards establishing a new cost model based on the number of university students and employees FTE count.

### **Hvar.is**

To ensure awareness of the offered information a web-site was established for the national access. The web-site was given the name *Hvar.is* which translates into English as *Where.is*. It has practical information about availability and how to use and access the information. The number of visits to *Hvar.is* each year corresponds to that 1/3 of the Icelandic population which visits the website each year. In the year 2004 the visitors were 117.000. The number of visits increased by 20% between the years 2003 and 2004. (4)

### **Training**

Training is also offered to the users to ensure public awareness of the offered information and to increase the information skills for the end-users.

### **Usage**

#### *How much?*

From the statistics we know the total number of full text access for all users in the country. We can only break down the usage figures from a few main libraries that have separate IP numbers which the publishers count separately but it is not possible to

measure the total usage by every institution. This is a limitation set by the publishers.

During the year 2003 the download of full text articles from the e - journals offered through the national access were 360,142 articles and during the year 2004 the total was 481,944 articles. There has been an increase in the usage of full text articles from the national access, about 35% between 2003- 2004. If we look at the year 2004 the access figures correspond to that of each Icelander in the age group 14 to 65 accessing 2.5 full text articles per year from the national access.

#### *Who are the users?*

Breaking down the actual usage is not possible, because about 50% of the usage is from home. No one knows exactly who is using the e-journals within Iceland. What we do know according to statistics based on visits to the website, librarian's experience and use reports received from the e-journals, that this access is frequently used by the following user groups:

- universities and colleges
- research institutes
- distance students who rely on this access
- patrons of public libraries who seek quality information via the Internet
- Secondary school students.

#### *When is it used?*

A librarian at Landspítalinn Anna Sigríður Guðnadóttir did a small survey in 2004. The group included in the survey were endocrinologists in Iceland. A part of the survey examined the usage of both e-journals as part of the national access and e-journals as subscribed to by the library. The outcome was that 33% of respondents used them during work hours, 22% after work hours and 45% during and after work hours. (5)

# THEME: OPEN ACCESS

Solveig Thorsteinsdottir

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## Does the National Access fulfil the user's need?

### 2004 - National access/vs. library subscriptions to e-journals at Landspítali

If we look at the subscriptions for one library, the Landspítali University Hospital Library, almost half of the articles used through the IP access of the library is outside the national access. The cost for that additional access is almost twice the cost paid by that library for the national access.

National access
53% of total access
36% of total subscription cost

Outside national access
47% of total access
64% of total subscription cost

Total access for this library was 111,953 full text articles in 2004. If this usage is broken down between the national access and the journals subscribed to by the library, the FT access from the national access was 59,235 articles (including the health sciences collection from Elsevier). Access to FT from the library's e-subscriptions was 52,708 articles. The national access to e-journals does not fulfil the e-journal requirement for this group. However the national access is more economical for the library. In this context it is worth mentioning that the most expensive e-journals are not included in the national access and never will be on account of a limited and highly specialised user group.

## Does this national access make a difference?

### Research

According to users this access is important for education, technology and research. How much it has influenced research we do not know. However, research has increased during this period; about

85% for all of Iceland and even more for the health sector or about 300% according to a search done in the ISI database for published articles indexed in the ISI database from Iceland 1999-2003.

In June 2005 a resolution was issued by the Council of Science and Technology in Iceland appointed by the Prime Minister's Office. The Council of Research and Technology emphasized that it is very important to ensure that this special access will remain open as stated in the declaration:

"It is clear that there has been a great increase in the usage of electronic journals provided by the national access. It is used by the general public, specialists and researchers. It is used by many institutions that do not pay for this access. The electronic journals are available to everybody, but only few libraries pay for them out of their budgets. The usages of this electronic information is increasing, benefiting the total population. It is important for education, technology and research that this access will remain open." (6)

## Library services

### Interlibrary loans

Interlibrary loan (ILL) decreased by 45% from the year 2000 to 2003 in Iceland. If we look at how users are accessing articles in Iceland, we do notice a change regarding ILL but national access is not the only explanation. During this period four health science libraries merged and also the main health library discontinued supporting Norfree, which is a free delivery of articles between member libraries in the Nordic countries. As a result other libraries used ILL from libraries that provide NORFree outside Iceland.

### Aleph/Gegnir

At the same time as the national access was started a central web-based library system, Aleph, was



# THEME: OPEN ACCESS

## Does National Access to E-Publications Make a Difference: The Icelandic Experience?

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acquired by the Icelandic Library Consortium. It is a centrally run library system used by the majority of Icelandic libraries and accessible to all Icelanders. The system covers most of Iceland's library and information resources. (7) Linking enables users to link from their search for e-journals to bibliographic records in Aleph. This linking access is useful to further enhance search results and tie together the National access to e-publications and the National library system.

### Advantages

The advantages of national access as seen by the Icelandic libraries, are that it creates better access to information and knowledge, it supports distance education and the libraries join resources to subscribe to databases and e-journals. The libraries also have better opportunities in linking resources by using both the national access and the national library system and in that way, they make the best use of all of our collections and services. The libraries also have gained expertise regarding contracts and negotiations and there is one body dealing with the publishers and aggregators saving both time and money.

### Disadvantages

The main disadvantages are that only a few libraries pay for the electronic journals that are available to everybody. To solve this problem the libraries have to agree on a different cost model. The new model should take into account different criteria such as FTE for employees and the number of students.

The national access to e-journals is, according to the licence agreements with the publishers, divided into two parts: the subscription cost based on the subscriptions the libraries had in the year 2000 and the cost of national access. This division is as follows: for national access it is about 30% of the cost and for subscription costs it is about 70%.

Since it is the policy of the Government of Iceland to make the e-journals accessible to all, it is only fair that the government covers 30% of the cost. Now it covers only 6% of the cost. A good argument to procure additional funds for national access to e-journals is the Policy of the Government of Iceland on the Information Society for the years 2004 - 2007 *Access for everyone*. This policy emphasizes the part Icelandic libraries play regarding access for everyone. This is promising for libraries and to be able to carry out this policy, libraries need to procure additional funds.

### ACCESS FOR EVERYONE

"Convenient access to sources of information and knowledge needs to be ensured. This is to be accomplished, for example, by the ready availability of computers and the internet in schools and Iceland's libraries and by further strengthening services for individuals at these establishments. All the country's main libraries are to receive support in installing wireless networks for access by their customers."

**Responsibility:** Ministry of Education, Science and Culture.

"Efforts will be made to co-ordinate databases within varying disciplines of science and academic study. These are to be made accessible on the Internet to both the public and academics, thus contributing to the improved utilisation of scientific data as well as to innovation, eg. by private enterprise."

**Responsibility for the above tasks:** Ministry of Education, Science and Culture; Ministry of Agriculture where appropriate; the respective educational and scientific institutes. (7)

### Open access /vs. national access

The Open Access model for e-journals might be a better solution for Iceland in the near future since the cost factor is too great for the national access to

# THEME: OPEN ACCESS

Solveig Thorsteinsdottir

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provide access to all e-journals available. OA might succeed in providing access to all publications required.

At the ministerial level in Iceland, a group is working towards a policy on access to research data from public funding. This policy is built on work done by OECD and ESB. 35 OECD countries, including Iceland supported OA and OAI by issuing a declaration in January 2004; *Declaration on access to research data from public funding*. (9, 10) The outcome from this work might influence further development of the national access to e-journals.

## Conclusion

The six years of the national access have left its mark. This access is very much used as pointed out earlier and has been very enjoyable for Icelandic libraries. It has been a privilege to experience this breakthrough regarding access to information for all Icelanders. It does make a difference. One good example is the resolution that was issued in June this year by the Council of Research and Technology in Iceland that emphasized the need for this very important special access to remain open. (5)

The national access has been a quest to find a way to make information accessible to all Icelanders and we have been able to provide unique access. However this access is not equal to OA. No one nation can be an island regarding access to information. Information is not just about access: it is also about sharing information with others. The national access does not allow our researchers to share their work freely outside Iceland. It also limits the boundaries of distance education to location within Iceland. I do believe that the national access in Iceland is proof that such an access is very valuable to the general public, specialists and researchers alike. However, Iceland needs to work with other nations towards commonly agreed principles and guidelines on

access and sharing of research data. Indeed OA should be the access we should look forward to in the near future.

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# THEME: OPEN ACCESS

## Open Access Publishing - Experiences with the Online Journal German Medical Science<sup>1</sup>

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The discussion on open access was intensified by the fact that the budgets of university libraries have stagnated while at the same time prices of journal subscriptions have risen up to 10 % per year in the last 10 years. With more than 30.000 scientific journals world-wide and almost 1.5 million scientific articles each year it was a logical consequence that something had to change. In February 2002 the *Budapest Open Access Initiative*<sup>2</sup> and in October 2003 the *Berlin Declaration on Open Access to Knowledge in the Sciences and Humanities*<sup>3</sup> demanded a free and gratis access to original scientific research results, raw data and metadata, source materials, digital representations of pictorial and graphic materials and scholarly multimedia material.

### GMS - The beginning

This demand was taken up in December 2002 from the Association of the Scientific Medical Societies in Germany (AWMF), the German Institute of Medical Documentation and Information (DIMDI) and the German National Library of Medicine (ZB MED) when they signed a co-operation agreement to edit the electronic journal German Medical Science (GMS).

The following objectives were defined:

- Strengthen the authors' copyright
- Reduce the editorial costs of scientific publications
- Accelerate publishing and acquisition of literature
- Offer an alternative to journals' impact factors
- Continuous archiving on reliable servers

Just seven months later, in July 2003, the first publications in GMS were accessible on the Internet at [www.egms.de](http://www.egms.de)

### Concept and Partners

GMS, a portal and international interdisciplinary e-journal, offers open access to high-ranking and quality-reviewed medical articles. It is aimed at all professionals in the field of medical science, health sciences and research. Its intent is to propagate the high-quality research in medical science world-wide. All articles published in GMS are accessible immediately, permanently and free of charge for everyone in the world. Most articles are published in English after they have been peer-reviewed by experts. The editorial board of GMS is provided by the Association of the Scientific Medical Societies in Germany with its 151 Learned Societies and more than 150.000 members from all fields of medicine. The German National Library of Medicine (ZB MED) is responsible for the editorial work and marketing. It is the largest medical library in Europe and has a stock of more than 1.3 million volumes and 18.000 journals from which 7.800 are under current subscription.

The German Institute of Medical Documentation and Information (DIMDI) offers more than 70 medical databases, information systems for drugs, medicinal products as well as health technology assessment and edits medical classifications in German. This partner of GMS guarantees the technical realisation and provides permanent access and citeability of the electronic documents with the archival storage on its highly secure servers.

### Software

The software of GMS is built on the basis of a modular system:

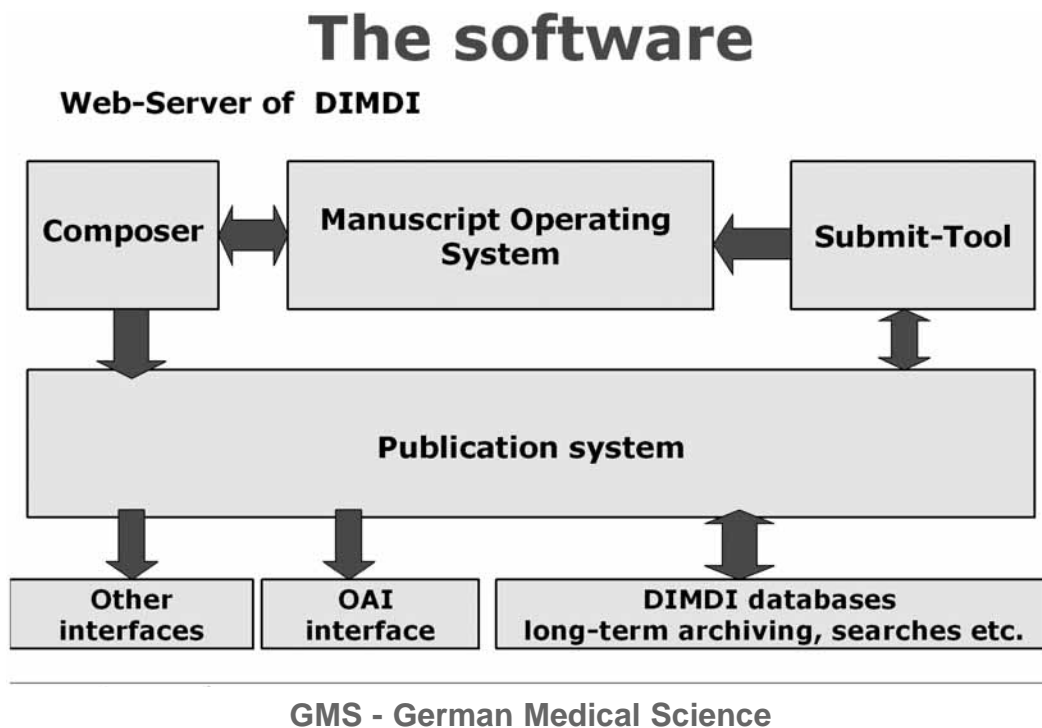
The authors and Learned Societies submit their manuscripts quickly and free of charge by using the web-based Submit-Tool. The Manuscript Operating System (MOPS) controls the workflow of the

# THEME: OPEN ACCESS

Heike Schmidt

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manuscript submitted until it is accepted or finally rejected. The composer formats Word- or other textfiles to XML and produces PDF-files. The Publication System (PUBS) is responsible for the final publication on the DIMDI-server. The average time span from submission to publishing or returning to the authors for revision is 45 days.



## Financing

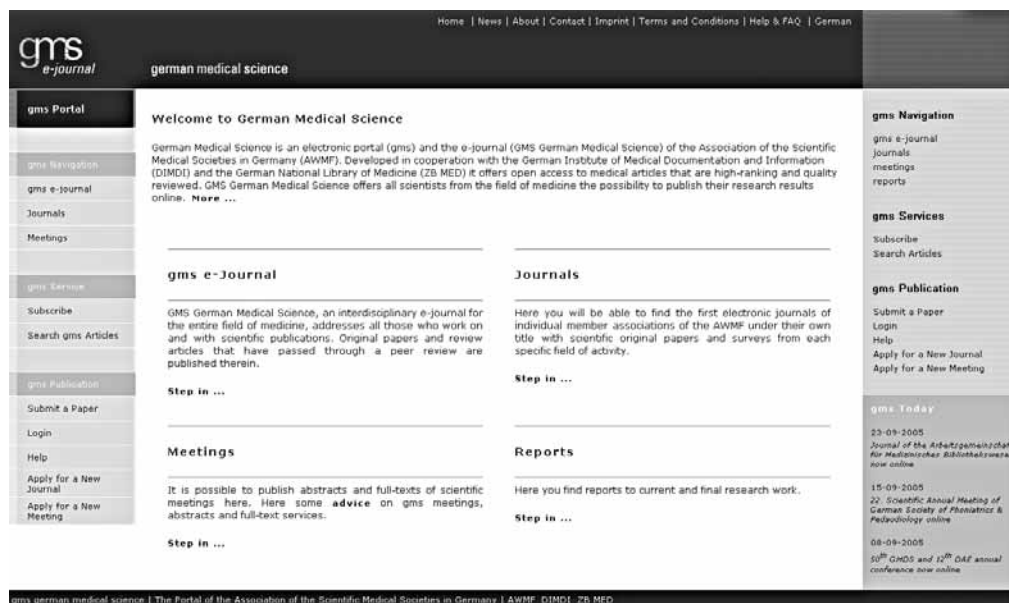
At the initial phase (2002/2003) GMS was funded by the German Research Foundation (DFG) and by the German Federal Ministry of Health and Social Security (BMGS) with approximately 360.000 € for the development of a prototype. In the consolidation phase (2005/2006) the German Research Foundation (DFG) has allocated funds for setting up a business plan (160.000 €). This business plan is designed to manage the relevant costs for IT (current and investments), production, management and operational costs. In the future users will have free access but will have to pay for print material. Congress organisers (mostly Learned Societies) will contribute per congress report or abstract. Learned Societies will have to pay for Society journals according to the service level used (generating funds from membership fees or from their authors).

## Statistics

Up to the present, 217 articles have been published on the portal of GMS. The high number of rejected articles reflects the thorough review process every contribution is subjected to. The number of site visits has risen from 18.000 in July 2003 to 196.000 in September 2005. Besides interdisciplinary original and review articles, GMS publishes the e-journals of individual member associations of the Association of the Scientific Medical Societies (AWMF) under their own titles with scientific original papers and surveys from each specific field. Six journals with active publications have been incorporated since the start of GMS and ongoing negotiations are aimed at introducing five new journals on its portal.

# THEME: OPEN ACCESS

## Open Access Publishing - Experiences with the Online Journal German Medical Science<sup>1</sup>



### GMS - German Medical Science

The portal additionally serves as a platform for public and internal communication among the member associations and for the publication of electronic proceedings. Since the beginning of GMS, 28 congresses with 7.600 documents have been published. It is an advantage for the authors to publish free of charge and keep the copyright. Furthermore, they can enrich their articles with high-resolution pictures, extensive charts, sounds, films, complete research databases or other data. The portal allows searching for articles in the same manner we are used to from searches in databases.

### Conclusion

According to experts, open access journals will have a market share of 30-40 % in the next 5 to 10 years. It is currently under 10 %. According to a recent publication in the German press<sup>4</sup>, the number of publications by Brazilian scientists in international journals has tripled between 1985 and 1999 and Brazil has moved up to one of the 25 leading and active research nations. In the field of medical bioethics Brazilian scientists have increased their publications in an impressive manner.

So why don't you - and it is self-evident that I include all other nations too - encourage your scientists to publish in open access journals like GMS?

**Heike Schmidt**  
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<sup>1</sup> Held at the 9th International Congress on Medical Librarianship (ICML9), 21st September 2005, Salvador de Bahia (Brazil)

<sup>2</sup> <http://www.soros.org/openaccess/g/read.shtml>

<sup>3</sup> <http://www.zim.mpg.de/openaccess-berlin/berlindeclaration.html>

<sup>4</sup> Wüsthof, A. Das grüne Wunder von São Paulo. Die Zeit. 2005 June 30; 27: 36

# INTERNET PAGE

Benoit Thirion

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## Infectiology: MeSH Terms & Subheadings

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

- anti-infective agents
- bacterial infections and mycoses
- carrier state
- disease transmission
- drug resistance, microbial
- infection control
- microbiology (sh)
- parasitic diseases
- parasitology (sh)
- patient isolators
- transmission (sh)
- tropical medicine
- virus diseases

These terms may be used to create a strategy in PubMed with the help of MyNCBI (<http://myncbi.nlm.nih.gov>), such as:

"anti-infective agents"[MeSH Terms] OR "bacterial infections and mycoses"[MeSH Terms] OR "carrier state"[MeSH Terms] OR "disease transmission"[MeSH Terms] OR "drug resistance, microbial"[MeSH Terms] OR "infection control"[MeSH Terms] OR "parasitic diseases"[MeSH Terms] OR "patient isolators"[MeSH Terms] OR "tropical medicine"[MeSH Terms] OR "virus diseases"[MeSH Terms] OR "transmission"[Subheading]

or go to URL: <http://infectiology-in-PubMed.nlm.nih.gov>

2. The Journals:

There are 41 infectious disease journals indexed by ISI. Their impact factors may be found in JCR (Journal Citation Reports).

Permission to include the list below asked at June 3, 2005. No response from ISI.

1 AIDS	8 CLIN INFECT DIS
2 AIDS PATIENT CARE ST	9 CLIN MICROBIOL INFEC
3 AIDS RES HUM RETROV	10 CURR HIV RES
4 AM J INFECT CONTROL	11 CURR OPIN INFECT DIS
6 BMC INFECT DIS	12 DIAGN MICR INFEC DIS
7 CLIN DIAGN LAB IMMUN	13 EMERG INFECT DIS

# INTERNET PAGE

## Infectiology: MeSH terms & Subheadings; Journals & Directories; Hints & Tips

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14 ENFERM INFECC MICR CL	28 J HOSP INFECT
15 EPIDEMIOL INFECT	29 J HUMAN VIROL
16 EUR J CLIN MICROBIOL	30 J INFECT DIS
17 FEMS IMMUNOL MED MIC	31 J INFECTION
18 INFECT CONT HOSP EP	32 J VIRAL HEPATITIS
19 INFECT DIS CLIN N AM	33 JAIDS-J ACQ IMM DEF
20 INFECT IMMUN	34 JPN J INFECT DIS
21 INFECT MED	35 LEPROSY REV
22 INFECTION	36 MED MALADIES INFECT
23 INT J ANTIMICROB AG	37 MICROB DRUG RESIST
24 INT J HYG ENVIR HEAL	38 PEDIATR INFECT DIS J
25 INT J STD AIDS	39 SCAND J INFECT DIS
26 INT J TUBERC LUNG D	40 SEX TRANSM DIS
27 J ANTIMICROB CHEMOTH	41 SEX TRANSM NFECT

See also, from List of Journals Indexed for MEDLINE, 2005  
(<ftp://nlmpubs.nlm.nih.gov/online/journals/ljiweb.pdf>), these subject sections:

ACQUIRED IMMUNODEFICIENCY SYNDROME  
ANTI-BACTERIAL AGENTS  
BACTERIOLOGY  
COMMUNICABLE DISEASES  
MICROBIOLOGY  
PARASITOLOGY  
SEXUALLY TRANSMITTED DISEASES  
TROPICAL MEDICINE

3. To know more about Infectiology on the Internet:

1. DDRT Diseases, Disorders and Related Topics (SE):

- Bacterial infections and mycoses (<http://www.mic.ki.se/Diseases/C01.html>)
- Parasitic diseases (<http://www.mic.ki.se/Diseases/C03.html>)
- Virus diseases (<http://www.mic.ki.se/Diseases/C02.html>)

# INTERNET PAGE

## Benoit Thirion

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2. Hardin MD (US):
  - Infectious Diseases / Bacterial Diseases / Microbiology (<http://www.lib.uiowa.edu/hardin/md/micro.html>)
3. HealthWeb:
  - Microbiology & Infectious Diseases (<http://healthweb.org/browse.cfm?subjectid=52>)
4. NGC National Guideline Clearinghouse (US) :
  - Bacterial infections and mycoses (<http://www.guideline.gov/browse/browsemode.aspx?node=2555&type=1>)
  - Parasitic diseases (<http://www.guideline.gov/browse/browsemode.aspx?node=19876&type=1>)
  - Virus diseases (<http://www.guideline.gov/browse/browsemode.aspx?node=28374&type=1>)
5. NLM Gateway (include: ClinicalTrials.gov & MedlinePlus) (US):
  - Bacterial infections and mycoses (<http://NLMGateway-bact-infect-mycoses.notlong.com> )
  - Parasitic diseases (<http://NLMGateway-parasitic-diseases.notlong.com>)
  - Virus diseases (<http://NLMGateway-virus-diseases.notlong.com>)
6. Omni (UK):
  - Bacterial infections ( <http://omni.ac.uk/browse/mesh/D001424.html>)
  - Mycoses (<http://omni.ac.uk/browse/mesh/D009181.html>)
  - Parasitic diseases (<http://omni.ac.uk/browse/mesh/D010272.html>)
  - Virus diseases (<http://omni.ac.uk/browse/mesh/D014777.html>)

And of course, not to forget, two very important sites containing information on infectious diseases:

- Centers for Disease Control and Prevention (<http://www.cdc.gov/>) & World Health Organization (<http://www.who.int/en/>)

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

[http://www.chu-rouen.fr/documed/eahil\\_infectious\\_diseases.html](http://www.chu-rouen.fr/documed/eahil_infectious_diseases.html)

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# JOURNAL REVIEWS

## Journal of Social Work in End-of-Life & Palliative Care

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**Volume 1 Number 1 2005**  
**Haworth Social Work Practice Press**

This quarterly journal is a successor to *Loss, Grief and Care*. The intended audience is social workers, researchers, policy analysts and those practitioners wanting to gain an insight into social work.

The journal aims to explore topics concerned with ethics, mortality, spirituality, professional understanding of death, patients' attitudes to dying including pain, anxiety and denial. In relation to end-of-life, the articles consider a variety of settings from outpatient care and dying at home to hospices and the role of hospitals. Some concepts may be alien to other countries particularly around the emotive subjects of euthanasia and assisted suicide generally described as death with dignity.

This first issue has one invited paper and three peer-reviewed papers. All the contributions are written from an American perspective. Each peer-reviewed article is supported by a long reference list and cross-reference to other studies.

The invited paper by Christ and Blacker on *Setting an agenda for social work in end-of-life and palliative care; an overview of leadership and organisational initiatives* is a culmination of the outcomes from the *Project on Death in America* and a social work leadership summit.

Reece et al: *Beliefs, death anxiety, denial and treatment preference in end-of-life care; a comparison of social work students, community residents and medical students* presents the results of a study that examined

cultural and religious beliefs towards death anxiety amongst three groups of students working with end-of-life patients.

Kane, Hamlin and Hawkins: *Perceptions of preparedness to assist elders with end-of-life care preferences* used a systematic sample of licensed clinical social workers to review how respondents perceived their capability to assist the elderly with end-of-life care decisions.

Although intended as an academic journal the paper by Miller and Hedlund: *'We just happen to live here' Two social workers share their stories about Oregon's Death with Dignity Law* is written from a personal experience and presented as an observation appraisal. Oregon is the only state in the USA that has legislation covering Death with Dignity.

Gwyther et al: *Social work competencies in palliative and end-of-life care* has been written following a national summit. The article identifies competencies that are needed to provide high-quality social work. These are described in terms of knowledge, skills and values that are core to social work practice in palliative and end-of-life care.

Comments from other reviewers see this journal as a useful title for hospice and academic libraries; a valuable resource for those working with the dying; providing a forum for best practice and ethical considerations; a resource of all social workers.

**Aileen J. Wood**  
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# JOURNAL REVIEWS

Ioana Robu

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**The Journal of Electronic Resources in  
Medical Libraries  
Haworth Information Press  
ISSN: 1542-4065**

This is not exactly a new journal, its first issue of volume 1 appeared in 2004 and there are already 7 issues published and 2 pre-published on the journal website at <http://www.haworthpress.com/web/JERML/>. Issues 2 & 3 of volume 1 were received from the publisher at the JEAHIL Editorial office in September 2005.

As stated by the editors "*The Journal of Electronic Resources in Medical Libraries* is a peer-reviewed professional journal devoted to the access, evaluation, and management of electronic resources in the medical library environment". For those already familiar with *Medical Reference Services Quarterly*, from the same publisher, and in fact also edited by M. Sandra Wood, this journal is a welcome completion that highlights the reference and bibliographic instruction aspects of electronic resources.

When I first saw the journal title, I assumed there would be something like the *Medicine on the Net*, namely a collection of web resources in the field of health sciences, with descriptions and reviews. I was pleasantly surprised to discover a much more in-depth approach of the major problems to be tackled by us, medical librarians, in relation to electronic resources.

The topics addressed include: collection development and selection of electronic

resources, electronic document delivery in medicine and health care, enhancing electronic resource user services, print versus electronic or combination formats, site licensing, cataloguing electronic formats, access and archiving issues, management of PDAs, database/journal publisher relations and medical libraries and more.

Each issue includes 4-5 original peer-reviewed articles in relation to these topics, mostly authored by our American colleagues. Besides the original articles we find the regular columns

- **Information Rx**, reviewing databases and electronic resources in clinical practice
- **eJournals Forum**, discussing all aspects of electronic journals, and
- **PDAs@the Library**, covering aspects of using PDAs (Personal Digital Assistants) in medical libraries and clinical practice

*The Journal of Electronic Resources in Medical Libraries* is a quarterly, the print form having an easy-to-read A5 format, with attractive colour covers reproducing classical paintings. Institutional annual rate for international subscriptions is 348 US\$, electronic access being included free with print. Free alerting TOC services are available from the journal website (see above).

It is certainly a journal title to be considered for inclusion into the "professional" collection of medical libraries and librarians.

# JOURNAL REVIEWS

## Journal of Website Promotion

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**Journal of Website Promotion**  
**Volume 1, Number 1 2005**  
**ISSN: 1553-3611**  
**Co-Published by Best Business Books and**  
**Internet Practice Press**  
<http://www.haworthpress.com/web/JWP/>

Though this new journal is not for the medical librarians' professional community, not even to the more broadly librarians' one, being rather

addressed to "Internet business research, theory and practice", it might be worth peeping at from time to time, as it includes topics like Internet marketing, website planning and development, impact of electronic resources, which have already proved to be very useful for the library environment.

**Ioana Robu**  
[irobu@umfcluj.ro](mailto:irobu@umfcluj.ro)

### **Anthony Thompson Award 2006**

The Award enables a qualified librarian from outside the UK to visit and study some aspects of UK library and information work. Applicants should have at least 5 years experience, have not made a previous professional visit to the UK, and be under the age of 40 on the closing date.

Anthony Thompson was the first full-time IFLA Secretary General, from 1962 to 1970, and following his death a trust fund was set up for the study of international and comparative librarianship.

The selection panel encourages applications for the 2006 award from South or Central America (including the Caribbean). One of the themes that we are interested in is Health Information, but other themes will be considered. A panel comprising members of ILIG committee and CILIP International Relations Panel will consider applications. Their decision will be final and they will not enter into correspondence on it.

Normally visits last for around 3-4 weeks around May/June to coincide with an appropriate conference or related event, and the funds support airfare, UK travel and a small

daily maintenance allowance. Applicants must write a report of not more than 4000 words within 6 months of their visit for publication in Focus, the ILIG journal.

The deadline for receipt of proposals for the 2006 award is **Friday 2 December 2005**. The successful applicant will be notified by February 2006.

Applicants should submit a formal proposal in English of up to 500 words [equivalent to 1-2 pages of A4 paper] using the headings of Visit Objectives and Planned Approach and Content, and attach a full Curriculum Vitae with the names of two Referees in senior posts.

The proposal should be sent to the Secretary, Diana Rosenberg, by email to

**[drosenberg@gn.apc.org](mailto:drosenberg@gn.apc.org)**

or by post to:

**Roadways  
The Ridge  
Bussage  
Stroud  
Gloucestershire GL6 8BB  
UK**

# PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda

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Dear Colleagues,

## **Peer-Review and Citation: Two Procedures under Discussion.**

Studies on the potential bias in the peer review system show that suggesting or excluding reviewers can significantly increase a manuscript's chance of being accepted (D. Grimm. *Science* 309, 1974). A physicist invents the *h-index* a new measure of research achievement. The h-index depends on both the number of scientist's publications and their impact on his peers (P. Ball. *Nature*, 2005, 900).

## **Two Claims from The American Chemical Society and from Publishers.**

The American Chemical Society has complained that the database PubChem, launched by the NHI's National Centre for

Biotechnology Information (NCBI), duplicates its Chemical Abstracts Service (CAS) (J. Kaiser. *Science*, 2005, 309, 1473).

Google Print has suspended the digitization of copyrighted works. Publishers and authors who object to Google digitizing their copyrighted works without permission may withdraw them from the Project. (<http://aaupnet.org/aboutup/issues/81905.html>).

A new way to communicate for library staff. Blogging is becoming part of library life and is a new way to communicate with each other and spread message to a wider base (T. Cadwell. *Information World Review*, 2005, 216, 16).

**Giovanna F. Miranda**

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## **JOURNAL ISSUES**

Since the Newsletter of August 2005, the following journal issues of *Health Information and Libraries Journal* have been received: Vol. 22, 2005, n. 3 and Vol.22, 2005, Suppl.1.

### **Vol. 22 n. 3**

**G. Walton. Negotiation in health libraries: a case study of Health Information and Library Journal and open access publishing.** p. 161.

Editorial.

**L. Appleton. Examination of the impact of information-skills training on the academic work of health-studies students: a single case study.** p. 164 - 172.

The aim of this study was to examine the impact of information-skills training on the

academic studies of student midwives. Information skills for health-studies curricula in higher education can be developed and delivered collaboratively by both library and academic staff.

**F.G. Boissin. Information-seeking behaviour and use of the Internet by French general practitioners: a qualitative study.** p. 173 - 181.

The purpose of this study was to analyse more thoroughly the impact that computerization could have on the information-seeking behaviour of GPs and to determine whether isolation and lack of library services affect their information use.

**L. Doney, H. Barlow and J. West. Use of libraries and electronic information resources by primary care staff: outcomes from a survey.** p. 182 - 188.

# PUBLICATIONS AND NEW PRODUCTS

## Publications and New Products

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The aim of the survey was to find out about information use and needs of primary care staff. The levels of usage of the Internet and biomedical databases are encouraging, but the study identifies a training need.

**D. Koufogiannakis, J. Buckingham, A. Alibhai and D. Rayner. Impact of librarians in first-year medical and dental student problem-based learning (PBL) groups: a controlled study.** p. 189 - 195.

The purpose of this study was to determine whether having a librarian present in the small-group, problem-based learning modules for the first-year medical and dental students results in an improved understanding of evidence-based medicine concepts, the nature of medical literature, and information access skills.

**D.A. Swinglehurst. Information needs of United Kingdom primary care clinicians.** p. 196 - 204.

This paper reviews the literature on the information needs of primary care clinicians to enable evidence-based decision making. Some lessons are drawn on the role of information professionals in facilitating evidence-based health care.

**K. McKenna, S. Bennett, Z. Dierselhuis., T. Hoffmann, L. Thooth and A. McCluskey. Australian occupational therapists' use of an online evidence-based practice database (OTseeker).** p. 205 - 214.

A survey on occupational therapists working in 95 facilities in two Australian states on the use of an online evidence-based practice database (OTseeker). Lack of time was the main reason why over half of the participants in this study had not accessed it. Participants reported that

information on Otseeker had improved their knowledge, but only a small proportion of respondents reported changes to practice as a direct consequence of accessing this database.

Brief communications p. 215.

**Vol. 22 Suppl. 1**

**M. Carmel and R.M. Osborn. Memorial issue in honour of Leslie T. Morton 1907-2004.** p. 3. Editorial.

**S. Godbolt. Leslie Morton; a personal reminiscence.** p. 4. Editorial.

**J.F. Hewlett and M. J. Hewlett. A bibliography of Leslie T. Morton.** p. 5. Editorial.

**V. Ferguson. The professionalization of health librarianship in the UK between 1909 and 1978.** p. 8 - 19.

This paper focuses on the key role of the Library Association Medical Section in the professional development of medical librarians in the United Kingdom up to 1978 when it merged with the Library Association Hospital Libraries and Handicapped Readers Group to create the Medical Health and Welfare Group.

**B. Madge and T.S. Plutchak. The increasing globalization of health librarianship: a brief survey of international trends and activities.** p. 20 - 30.

In memory of the work that Leslie T. Morton did in the international developments in health librarianship, the authors examine current

# PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda

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developments in this field and describe some current themes.

**C. Sawers. The way we were: health library life seen through the pages of the Medical Library Bulletin of the Thames Regions 1974-94.** p. 31 - 37.

The Medical Library Bulletin of the Thames Regions reflected the development of health services over the 20 years it existed. Leslie T. Morton edited almost every issue, starting at a time when there was little guidance or professional literature available for health-service librarians.

**S. J. Pritchard and A. L. Weightman. Medline in the UK: pioneering the past, present and future.** p. 38 - 44.

This article provides a brief history of the development of the Medline database and its huge impact within the U.K., from its inception to the present time.

**J. Murphy and A. Adams. Exploring the benefits of user education: a review of three case studies.** p. 45 - 58.

This paper describes three different approaches to mediated training for medical students and clinicians provided by peers, medical students and information specialists.

**R. J. Moore. Morton's short list of publications on the history of medicine.** p. 59 - 61.

A selective list intended to guide readers to authoritative modern and older books on the History of Medicine and related sciences in English language.

Brief communications p. 62.

## NEW JOURNALS

**Core Evidence** is an international peer-reviewed journal published by the Core Medical Publishing Ltd, a new independent publishing company. Each issue of the journal contains up to seven reviews covering drugs from phase I trials through post-launch. <http://www.coremedicalpublishing.com>

## BOOKS REVIEW

**Electronic Journal Management Systems. Experiences from the field.** Ed. G. Ives. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$29.95 soft, ISBN-13: 978-0-7890-2596-8; \$49.95 hard, ISBN-13: 978-0-7890-2595-1; pp. 157. This book discusses a wide range of implementation and use issues (from Microsoft Excel to TDNet, Serial Solution, SFX, Ebsco's A-to-Zed, etc). It includes screen shots, tables and diagrams to illustrate concepts and information.

**Introducing Information Management.** Eds E. Maceviciūtė and T.D. Wilson. The Facet Publishing London (UK) 2005., £39,95 hardback, ISBN 1-856-561-7; pp. 256. This book introduces the reader to the common topics and methodologies used in teaching Information Management, broadly: information behaviour; environmental scanning and decision-making; KM; and information strategy.

**Licensing in Libraries. Practical and ethical Aspects.** Ed. K.Rupp-Serrano. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$29.95 soft, ISBN-13: 978-0-7890-2879-2; \$49.95 hard, ISBN-13: 978-0-7890-2878-5; pp.210. This book presents state-of-the-art information on licensing issues, including consortial licensing, licensing software and legal aspects of licensing.

# PUBLICATIONS AND NEW PRODUCTS

## Publications and New Products

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### PAPERS REVIEW

#### **Reforming scholarly publishing and knowledge communication. From the advent of the scholarly journal to the challenges of open access.**

A.M Ramalho Correia and J.C. Teixeira.  
Online Information Review, 2005, 29, 349.

#### **PubNet: a flexible system for visualizing literature derived networks.**

S. M. Douglas et al. Genome Biology, 2005, 6: R80 Full text at <http://genomebiology.com/2005/6/9/R80>

#### **NIH, Chemical Society look for a common ground.**

J. Kaiser. Science, 2005, 309, 1473.

#### **Suggesting or excluding reviewers can help get your paper published.**

D. Grimm. Science, 2005, 309, 1974.

#### **Index aims for fair ranking of scientists.**

P. Ball. Nature, 2005, 436, 900.

#### **Pen a blog buster.**

T. Caldwell. Information World Review, 2005, 216, 16

#### **Evidence-Based Nursing Resources.**

M.A. Spasser. Medical Reference Services Quarterly, 2005, 24, 71

### INFORMATION SOURCES... WEB BASED

**ILOSearch.** The Informed Librarian Online announces the launch of ILOSearch a new database index of articles from library periodicals. The index contains more than 36,000 documents dating back to January 2003 from 300 different library journals, newsletter, magazines and webzines.

<http://www.informedlibrarian.com>

**Conference Alerts** is based in South Africa, but operates as a global organization maintaining an extensive, constantly updated database of conferences. It can be searched by, topic, keyword, city or country.

<http://www.conferencealerts.com>

### NEWS FROM PUBLISHERS

**BiomedCentral.** The Wellcome Trust has stated that as part of its policy it will also "provide grantees with additional funding to cover the costs of page processing charges levied by open access publishers, such as the Public Library of Science and BioMed Central."

<http://www.biomedcentral.com>

**EBSCO** includes **Google Scholar** as one of its OpenURL-enabled sources. EBSCO's Link Sources now allows Ebsco A-to-Z customers to activate their online resources through the search engine.

<http://www.ebsco.com>

**Google Print.** Google announced a revision of their opt-out policy for the Google Library Project. Under the revised plan, publishers and authors who object to Google digitizing their copyrighted works without permission may withdraw them from the Project by supplying Google with a list of titles to be withdrawn that includes the basic bibliographic information for each title, including ISBN. Books withdrawn in this way will not be digitally copied for the Project. To give publishers and authors time to gather the information and compile the lists, Google has suspended the digitization of copyrighted works and will not resume until November 1.

<http://aapnet.org/aboutup/issues/81905.html>

# FORTHCOMING EVENTS

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**The WHO Library and Information Networks for Knowledge (LNK)** is compiling a World Directory of Medical Libraries. This comprehensive listing of medical/health libraries worldwide will provide a unique resource to facilitate the flow of information between libraries and coordination between libraries and coordination of global efforts to improve access to health information.  
<http://www.who.int/ghl/directory/en/>

## FORTHCOMING EVENTS

**2-6 November 2005, Taormina, Italy**  
**3rd International Conference of Evidence Based Health Care Teachers and Developers. Building Bridges between research and teaching.**  
For further information: <http://www.ebhc.org>

**17 November 2005, Paris, France**  
**Tarification et modèles économiques des services d'information**  
**Journée d'étude ADBS et GFII**  
For further information:  
e-mail [adbs-formation@adbs.fr](mailto:adbs-formation@adbs.fr)

**23-25 November 2005, Rome, Italy**  
**Library politics in Italy. The services 52. AIB National Conference.**  
For further information: <http://www.aib.it/aib/congr/c52/c52-e.htm>

**29 November - 1<sup>st</sup> December 2005, London**  
**UK Online Information 2005**  
For further information: <http://www.online-information.co.uk>

**4-7 December, 2005, Prague (Czech Republic) MedNet 2005**  
**10<sup>th</sup> Annual World Congress on the Internet in Medicine**  
For further information: [www.medinfo.cz/mednet2005](http://www.medinfo.cz/mednet2005)

**30 January - 1<sup>st</sup> February 2006, Tallinn, Denmark Bobcatsss 2006**  
**Information, Innovation, Responsibility: Information Professional in the Network Society. European Association for Library and Information Education and Research**  
For further information: <http://www.tlu.ee/konverents/2006bobcatsss/>

**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](http://www.lub.lu.se/ncc2006)

**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>

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

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

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

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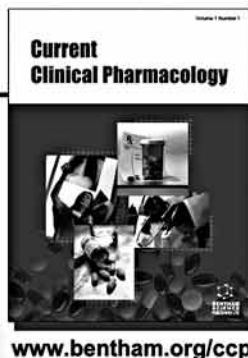
# NEW Journals *IMPACTING* Science

## Current Clinical Pharmacology

New

The journal aims to publish frontier reviews on all the latest advances in clinical pharmacology. Topics covered include: pharmacokinetics; therapeutic trials; adverse drug reactions; drug interactions; drug metabolism; pharmacoepidemiology; and drug development.

- *Launch Date Print & Online: January 2006*
- *Volume 1, 2006, Personal Subscription: \$ 140.00*



## Current Drug Therapy

New

The journal aims to publish frontier reviews on all the latest advances in drug therapy. Topics covered include: new and existing drugs, therapies and medical devices. This comprehensive source of developments in the field should prove to be essential reading for all clinicians and researchers involved in drug therapy.

- *Launch Date Print & Online: January 2006*
- *Volume 1, 2006, Personal Subscription: \$ 140.00*

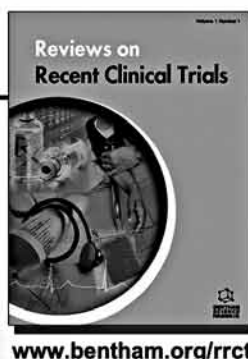


## Reviews on Recent Clinical Trials

New

The journal aims to publish frontier reviews on recent clinical trials of major importance. Topics covered include: important Phase I – IV clinical trial studies, clinical investigations at all stages of development and therapeutics. Essential reading for all researchers and clinicians in the field of drug therapy and clinical trials!

- *Launch Date Print & Online: January 2006*
- *Volume 1, 2006, Personal Subscription: \$ 140.00*



## Current Drug Safety

New

The journal aims to publish frontier review articles on all the latest advances on drug safety. Topics covered include: adverse effects of individual drugs and drug classes, management of adverse effects, pharmacovigilance and pharmacoepidemiology of new and existing drugs, post-marketing surveillance.

- *Launch Date Print & Online: January 2006*
- *Volume 1, 2006, Personal Subscription: \$ 140.00*



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