# PubMed Portal to Medical Information

# Where to start when you need information?

### <u>A quick review of a topic</u>

- UpToDate
- Emedicine
- <u>Drugs</u>
  - Micromedix
  - UpToDate

x MDConsult Drugs@FDA.gov

- Extensive review
  - Cochrane Library of evidence based medicine
- Everything else

- Start with PubMed - all the time





### Why should you use PubMed?

- PubMed contains all citations from the medical literature back to 1953
- PubMed is updated daily directly from publishers
- PubMed links directly to the home pages of the journals
- Medline is hosted on PubMed. All other vendors which offer Medline actually license their Medline from the National Library of Medicine and there is a significant delay.
- 90% of all Medline searches are done in PubMed
- PubMed is Medline and much, much more!!!

### Why should you use PubMed?

- PubMed contains over 14 million citations of medical literature back to the 1953.
- Over 4,600 medical journals are indexed yearly
- Newspapers, life science journals, nursing journals, and medical management journals, and others are all covered in PubMed.
- <u>This is not true of Medline found in other</u> <u>vendors!</u>

### Impact of PubMed

 Today, the number of PubMed searches ranges from 500,000 to over one million per day

### Why should you use PubMed?

- It is the best medical database of its kind in the world
- It is free
- · Your patients use it
- Your lawyers, drug reps, accountants and nursing staff use it.

# To what degree can you limit your searches?

- Just to Medline, or to Cancer or Dental or Nursing, etc
- Age
- Date of publication
- Sex
- Gender
- Human or animal or both

- Only materials with abstracts
- Type of publication
  - Review article
  - Clinical practice guidelines
  - Randomized controlled trials
  - Letter
  - Editorial

### What I am going to cover today about PubMed?

- FAQ Frequently asked questions
- These questions will feature the use of <u>PubMed services</u> found in the left hand bar on the PubMed page
- How to link to the home page of the journal
- How to find <u>free</u> full text
- The use of the Cubby
  - How to store searches for future use

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Cubby	available for interactive searching on the <u>Bookshelf</u> .	PubMed. See <u>New</u>	/Noteworthy.
Related Resources		<u>New Clinical Alert</u> : Treatment Signific	New antly Improves
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	•	National Cancer Ir	nstitute
Clinical Alerts		(NCI) October 9, 2003	
ClinicalTrials.gov			

- Journals Database
- 2. MeSH Database
- 3. Single Citation Matcher
- 4. Clinical Queries
- 5. Cubby

### Question #1

### You have a very specific question you want a very specific answer

- Use <u>Clinical Queries</u> under PubMed services
- Newest treatment for sarcoidosis
- Remember to set your limits
- You can choose
  - Therapy
  - Diagnosis
  - Etiology
  - Prognosis

You can emphasize sensitivity or specificity

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KNET Isumer Health Iical Alerts IicalTrials.gov Med Central	Enter subject search: sarcoidosis Go Clear
acy Policy	Note: If you want to retrieve everything on a subject area, you should not use this screen. The objective of filtering is to reduce the retrieval to articles that report research conducted with specific methodologies.
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### Question #2 I get too many returns?

- #1 set your limits before you do anything.
- #2 use the 1-2-3 approach to searching. Don't start out your search with a laundry list of terms. Start out with one keyword, then run the search, add another word, run the search again, add another and so on.
- You don't add all your spice to the stew at once - same principle.

### Question #3

### I don't get anything I am looking for -What should I do?

- Time to use MeSH headings
  - MeSH headings are Medical Subject Headings

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### Using MeSH Headings

 The MeSH controlled vocabulary is a distinctive feature of MEDLINE. It imposes uniformity and consistency to the indexing of biomedical literature. MeSH terms are arranged in a hierarchical categorized manner called MeSH Tree Structures and are updated annually.

All MeSH Categories

Analytical, Diagnostic and Therapeutic Techniques and Equipment Category

Diagnosis

Laboratory Techniques and Procedures

Specimen Handling

Punctures –

Paracentesis

Pericardiocentesis

All MeSH Categories

 <u>Analytical</u>, <u>Diagnostic</u> and <u>Therapeutic</u> <u>Techniques</u> and <u>Equipment</u> <u>Category</u> <u>Therapeutics</u>

Punctures

Paracentesis

Pericardiocentesis

<u>All MeSH Categories</u> <u>Analytical, Diagnostic and Therapeutic Techniques and Equipment Category</u> <u>Surgical Procedures, Operative</u> **Paracentesis** <u>Amniocentesis</u> <u>Pericardiocentesis</u> ■ 30: Surg Neurol. 2003 Oct;60(4):311-20; discussion 320. ELSEVIER FULLTEXTARTICLE

#### Stereotactic biopsies of focal brainstem lesions.

#### Goncalves-Ferreira AJ, Herculano-Carvalho M, Pimentel J.

Department of Neurosurgery, University Hospital de Santa Maria, Lisboa, Portugal.

BACK GROUND: Stereotactic biopsies of the brainstem (SBB) are a selected group of stereotactic operations owing to the lower incidence of brainstem lesions requiring biopsy, the greater complexity, and the higher risks of these procedures. Usually, the lower the lesion in the brainstem, the greater the risks involved. The approach of the different target locations by distinct routes, transcerebral and transcerebellar, is still a matter of debate. Moreover, pure medullary lesions are seldom biopsied, whereas diffuse brainstem lesions, typical of children's brainstem gliomas and rather frequent in most published series, depend less and less on the histopathological confirmation for treatment. In this study, the authors present their own experience on SBB aiming to discuss mainly their indications, approach routes choice, and procedure techniques. METHODS: The authors reviewed a series of 30 SBB (27 adults and 3 children) out of 450 stereotactic biopsies of the central nervous system performed for the last 10 years. All cases but one presented as focal brainstem masses, 19 mainly in the pons and 10 in the midbrain. Eleven lesions (10 in the midbrain and one midbrain-pontine) were approached by a transfrontal route. All the others were approached by a suboccipital transcerebellar route. RESULTS: Twenty-six (87%) out of the 28 cases (93%) where a positive histopathological result was obtained had a specific diagnosis: 18 tumors (14 astrocytomas, 2 primary brain lymphomas, 1 oligodendroglioma, and 1 ganglioglioma), 2 toxoplasmosis, 2 MeSH Terms:

- Adolescent
- Adult
- Aged
- Aged, 80 and over
- Biopsy/methods\*
- Brain Diseases/diagnosis\*
- Brain Diseases/radiography
- Brain Diseases/surgery\*
- Brain Neoplasms/diagnosis
- Brain Neoplasms/surgery
- Brain Stem\*/pathology
- Brain Stem\*/radiography
- Brain Stem\*/surgery
- Child
- Child, Preschool
- Female
- Human
- Magnetic Resonance Imaging
- Male
- Middle Age
- Stereotaxic Techniques\*
- · Tomography, X-Ray Computed

PMID: 14505847 [PubMed - indexed for MEDLINE]

### Using MeSH Headings

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# Click on the subject heading you want in order to expose subheadings



### 1. Check the drug therapy box 2. <u>click on send to</u> <u>search box AND</u>" 3. Then click on <u>Search PubMed</u>

## Results – Rheumatoid Arthritis/ drug therapy – 15,359 articles!!

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Overview Help   FAQ Tutorial New/Noteworthy E-Utilities	<ul> <li>Auranofin improves outcome in early rheumatoid arthritis. Results from a 2-year, double blind placebo con J Rheumatol. 1988 Dec;15(12):1747-54.</li> <li>PMID: 14552308 [PubMed - indexed for MEDLINE]</li> <li>Omagari K. Matsunaga Y. Yamashita H. Nishiyama H. Hazama H. Oda H. Isomoto H. Mizuta Y. Murase K. Kohno S.</li> </ul>	ntrolled study. Related Articles
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Batch Citation Matcher Clinical Queries LinkOut Cubby	Interpretation of trial methodology not always easy: comment on the editorial by Landewe. Arthritis Rheum. 2003 Sep;48(9):2693-4; author reply 2695. No abstract available. PMID: 13130490 [PubMed - indexed for MEDLINE]	
0000,	🗖 4: Jensen AO, Mejer J.	Related Articles,
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ClinicalTrials.gov	Negotiating an innovative uniform infusion therapy fee: a managed care case study.	

### Set your limits

## S NCBI



Use All Fields pull-down menu to specify a field.

· Boolean operators AND, OR, NOT must be in upper case.

• If search fields tags are used enclose in square brackets, e.g., rubella [ti].



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PubMed Services	Arthritis Rheum. 2003 Aug;48(8):2224-33.
Journals Database	PMID: 129054/6 [PubMed - indexed for MEDLINE]
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Matcher	E Long term structural effects of combination therapy in patients with early rheumatoid arthritis: five year follow up of a prospective
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Clinical Queries	Ann Rheum Dis. 2003 Aug;62(8):764-6.
Cubby	PMID: 12860733 [PubMed - indexed for MEDLINE]
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Related Resources	Chemokine blockade and chronic inflammatory disease: proof of concept in patients with rheumatoid arthritis
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	PMID: 12860725 [PubMed - indexed for MEDLINE]

### Now Make it Perfect

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Journals Database	observational, extension study of a three-month, randomized, placebo-controlled trial.
MeSH Database Single Citation	Braun J. Brandt J. Listing J. Zink A. Alten R. Burmester G. Golder W. Gromnica-Ihle E. Kellner H. Schneider M.
Matcher Batch Citation Matcher	Sorensen H, Zeidler H, Reddig J, Sieper J.
Clinical Queries	
LinkOut Cubby	Benjamin Franklin Hospital, Free University, Berlin, Germany. J.Braun@rheumazentrum-ruhrgebiet.de
	OBJECTIVE: Treatment of ankylosing spondylitis (AS) with infliximab, an anti-tumor necrosis factor alpha monoclonal antibody, v
Related Resources Order Documents	shown to be efficacious in patients with active disease during a 3-month treatment period. The purpose of this study was to evaluat
NLM Gateway	the efficacy and safety of infliximab treatment of AS for a 1-year period. METHODS: This study was an open, observational,
Consumer Health	group) or placebo (placebo/infliximab 12-week crossover group) therapy for 3 months entered the open extension trial (n = 65).
Clinical Alerts	Infliximab was administered at a dosage of 5 mg/kg every 6 weeks after the induction phase (weeks 0, 2, and 6). The primary end

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### Last but not least: send to text

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Cinical Queries LinkOut Cubby	Benjamin Franklin Hospital, Free University, Berlin	n, Germany. J.Braun@rheumazentrum-ru	ıhrgebiet.de
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1: Arthritis Rheum. 2003 Aug;48(8):2224-33.

Long-term efficacy and safety of infliximab in the treatment of ankylosing spondylitis: an open, observational, extension study of a three-month, randomized, placebo-controlled trial.

Braun J, Brandt J, Listing J, Zink A, Alten R, Burmester G, Golder W, Gromnica-Ihle E, Kellner H, Schneider M, Sorensen H, Zeidler H, Reddig J, Sieper J.

Benjamin Franklin Hospital, Free University, Berlin, Germany. J.Braun@rheumazentrum-ruhrgebiet.de

OBJECTIVE: Treatment of ankylosing spondylitis (AS) with infliximab, an anti-tumor necrosis factor alpha monoclonal antibody, was shown to be efficacious in patients with active disease during a 3-month treatment period. The purpose of this study was to evaluate the efficacy and safety of infliximab treatment of AS for a 1-year period. METHODS: This study was an open, observational, extension study of a 3-month, randomized, placebo-controlled trial. All patients who had tolerated infliximab (infliximab/infliximab group) or placebo (placebo/infliximab 12-week crossover group) therapy for 3 months entered the open extension trial (n = 65). Infliximab was administered at a dosage of 5 mg/kg every 6 weeks after the induction phase (weeks 0, 2, and 6). The primary end point was a 50% improvement in the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI). RESULTS: At week 54, a total of 54 of the 69 patients (78%) continued to take infliximab. The intent-to-treat primary efficacy analysis at week 54 showed that 47% of patients in the infliximab/infliximab group (95% confidence interval 31-63) and 51% of the patients in the placebo/infliximab group (95% confidence interval 36-67) achieved 50% improvement in BASDAT scores. In the analysis of those who

## Save this file as a <u>.txt</u> file to your hard drive. This allows for future editing.

### Question #4 I finally found 1 good one - now what?

- Excellent! Now save it to the <u>clipboard</u>.
- The clipboard will hold your articles on this computer only for 8 hours. Now click on related articles next to this article and start doing the same thing – the relevancy of the related article search is much more specific.
  - It is not in chronological order.
  - Save articles to the clipboard as you go.
- When you are through with your search, click on Clipboard to collect your articles

# Where are the <u>clipboard</u> and <u>limits</u> features?



### Use Related Articles Feature

- When you find the one perfect article, save it to the clipboard, then click on related <u>articles on the right</u>
- PubMed creates this set by comparing words from the title, abstract, and MeSH terms using a powerful word-weighted algorithm. Citations are displayed in rank order from most to least relevant, with the "linked from" citation displayed first.

### Question #5 I am looking for a specific author

### Use Single Citation Matcher

S NCBI	Citation Matcher for Single Articles
Entrez	PubMed Nucleotide Protein Genome Structure PMC Journals
About Entrez	Enter information about the article you wish to find. Journal:
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Journals Database MeSH Database Single Citation Matcher Batch Citation Matcher Clinical Queries LinkOut Cubby	<ul> <li>Notes:</li> <li>You may omit any item if you wish</li> <li>Journal titles may be entered in full or as valid MEDLINE abbreviations</li> <li>For Date, you may enter yyyy, yyyy/mm, or yyyy/mm/dd. For example, 1998, 1998/03, or 1998/03/06</li> <li>Author names are automatically truncated to account for varying initials, e.g., smith j will also match on smith ja, sm etc. Enclose author names in double quotes to retrieve that exact match, e.g., "smith j"</li> </ul>

### Using single citation matcher for more:

- You know the year, the words in title, the journal but you can't remember the rest - try it here
- You know the author, the year but don't know the rest
- Use all kinds of combinations here!

### What is the Cubby?

 The Cubby stores search strategies and a default e-mail address, and Link Out preferences to specify which LinkOut providers you want displayed in PubMed, and changes the default document delivery services. For you to use this feature, your Web browser must be set to accept cookies.

### What are cookies?

 Persistent Client-State HTTP Cookies are files containing information about visitors to a web site (e.g. user name and preferences). This information is provided by the user during the first visit to a web server. The server records this information in a text file and stores this file on the visitor's hard drive. When the visitor accesses the same web site again the server looks for the cookie and configures itself based on the information provided.

### Cookies, etc

- When you register through the National Library of Medicine, your cookie is stored on the NLM server. This allows your searches to be saved.
- You must use the same computer all the time. If you change computers, the cookies do not apply and your searches will not appear. This process is computer specific.

### **Registration for Cubby Users**

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PubMed	Nucleotide	Protein	Genome	Structure	PopSet	Taxonomy				
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### Give yourself a username and password.

### Login for Cubby

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		Login									
	<u>Write to the Help Desk</u> <u>NCBI   NLM   NIH</u> <u>Department of Health &amp; Human Services</u> <u>Freedom of Information Act   Disclaimer</u>										

# You must login to access the Cubby. This login will remain active for 12 hours

### Storing Searches in Cubby

- Conduct a search in PubMed create it exactly the way you want it
- Click on "Cubby" in the left hand blue bar
- Click on "Store in Cubby"
- A date, time and hyperlink is created. Each time a search is added these items will be added.
- You can delete searches by clicking on the appropriate button

## How do you run an update on a search?

- Choose the search you want to update by putting a check mark in the box next to it
- Click on <u>What's New for Selected?</u>
- You can also choose to delete all your searches.
- Each new search will only contain updated material since the last search was run.
- All of these searches can be saved as text files in your computer as we discussed earlier.

## How to find free full text articles

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### Important New Web Sites

- Drugs@fda.gov
- http://www.accessdata.fda.gov/scripts/cder/drugsatfda/
- Drugs@FDA, a pilot project, is a searchable Web site containing information about approved and tentatively approved prescription, over-the-counter, and discontinued drugs. It includes links to drug approval letters, labels, and review packages

 This is the replacement and improvement for the PDR