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JOURNAL

OF THE EUROPEAN ASSOCIATION
FOR HEALTH INFORMATION AND LIBRARIES

**Meet the candidates for
EAHIL PRESIDENT
and the
EAHIL BOARD**



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

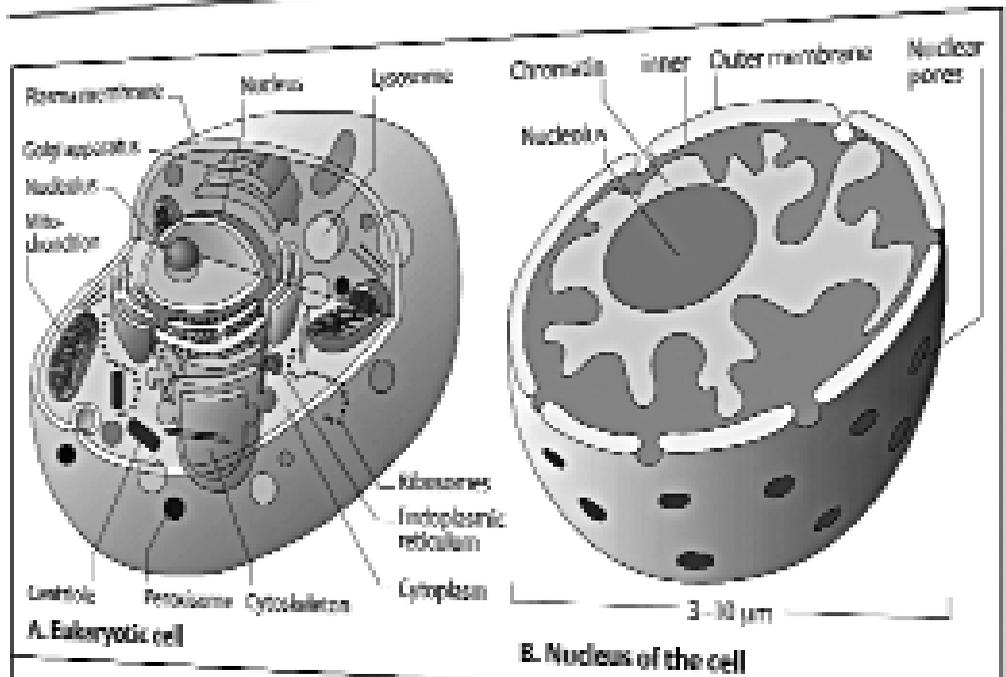
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Editorial

Hello Everyone

After a very severe winter which was echoed throughout Europe, here in Romania there are signs that spring is on the way. I hope you all had a good Easter and benefited from a short break.

The May issue of the Journal of EAHIL is dedicated to Health Technology Assessment (HTA) and I was really pleased to see the interest in this subject.

The Scope Note of the MeSH term "Technology Assessment, Biomedical" for HTA is: *the evaluation of biomedical technology in relation to cost, efficacy, utilization etc., and its future impact on social, ethical, and legal systems.*¹ Therefore it is indeed a very current and valuable topic and additional information and information sources will be offered in the following pages.

The EAHIL Elections are now in process for a new President, three new Board members and two co-opted members. Each candidate has been asked to write a short manifesto and for the first time these will be featured in the Journal. In this way it is hoped that everyone will be able to better see the candidates and their ideas and plans for the future of EAHIL. All EAHIL members are eligible to participate in this important voting procedure.

Registration for the 10th EAHIL Conference is brisk and enrolment for the CEC courses are also going well so do not wait too long to register for your courses.

Three hotels are filling up rapidly, the **Agape**, the **Capitolina** and the **Fulton**. Most of all I urge you to **book your plane tickets** well in advance especially if you plan to come via Budapest and Bucharest. There will be a great rush for tickets for not only flying into Cluj on the 9th, 10th, 11th, 12th September but also for leaving on Sunday 18th. More information regarding accommodation and flights can be obtained from our Conference Travel Agency at **naturatravel@cluj.astral.ro**.

The Scientific Programme was established at the IPC meeting and we are publishing it in this issue. As you can see we have some very interesting speakers and subjects and the Cluj IPC are hopeful that everyone will be able to find subjects of interest. The Social Programme is finalized and over 80% of the people registered have also signed up for one of the all day excursions on the Saturday, Biertan and Sighisoara being the most popular.

All sixteen exhibition booths have been already reserved and in fact we are trying to realize more space for additional exhibitors. As you can see from the list of exhibitors in the middle pages all the major names in medical librarianship will be represented at the Cluj conference.

The August issue's theme is **Evidence-Based Medicine** and the deadline for submission of articles is 15 July 2006. I look forward to hearing from you all

Sally Wood-Lamont
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1. http://www.nlm.nih.gov/cgi/mesh/2006/MB_cgi?mode=&term=Technology+Assessment,+Biomedical&field=entry

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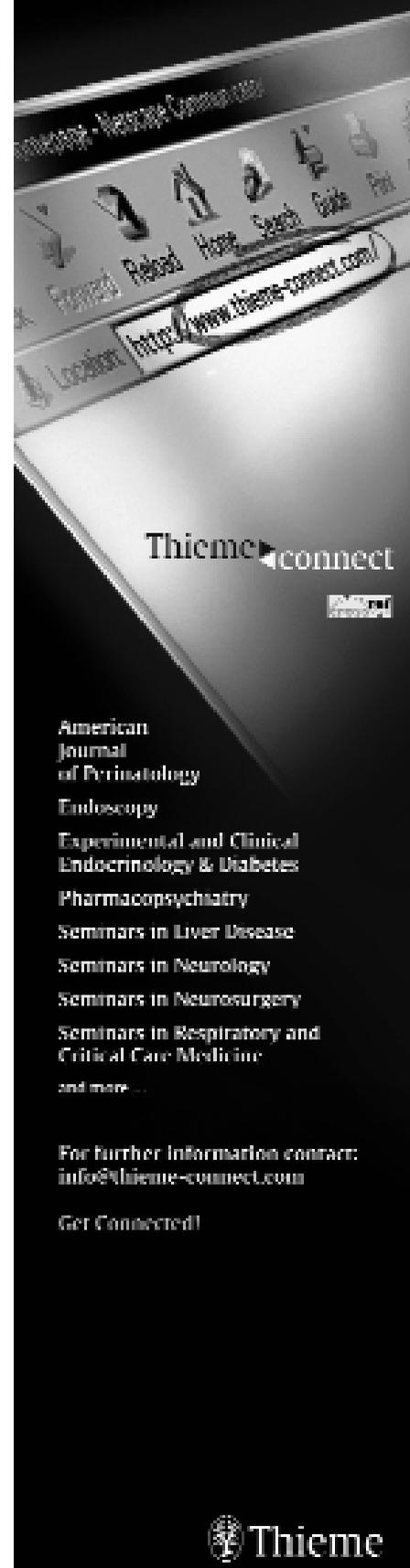
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News from our Association

Letter from the President



10th EAHIL Conference in Cluj-Napoca, Romania

In the February issue of the *Journal of EAHIL* we all received a warm invitation to take part in the 10th EAHIL Conference in Cluj-Napoca, Romania. I hope that many EAHIL members will take this opportunity to join colleagues from Europe, and in fact from all over the world, in Cluj-Napoca. The extensive continuing education courses, organized by Eva Alopaeus (Sweden) and Pat Flor (Norway), have already been published in the *Journal of EAHIL* and on the web. The Programme Committee, chaired by Benoit Thirion (France), met the first week in March and decided on the Scientific Programme. I participated in the meeting and the overall quality of the papers was very good, so we can look forward to an excellent Scientific Programme.

DO NOT MISS EARLY-BIRD REGISTRATION - 31ST MAY

Even though the Scientific Programme is packed, the organizers have made sure that we do not miss the delights of Cluj-Napoca and its surroundings. There are city tours arranged for Thursday afternoon, and on Saturday a choice of three different tours. In addition the organizers are providing free transport from the airport to our hotels. There will also be a *Transylvanian EAHIL Echo*. Accommodation and meals in Cluj-Napoca are very reasonable. Your local travel agency might not book so many flights to Cluj-Napoca, so before you book you should also consult **Natura Travel** in Cluj-Napoca in order to get the best deal. I hope to see many of you in Cluj-Napoca, where the organizers have done their utmost to guarantee a successful conference.

2006 election year

2006 is election year for the EAHIL President and for the EAHIL Board members. The Nomination Committee (Eva Alopaeus from the North, Bruce Madge from the West, Sally Wood-Lamont from the East and Luise Fruttini from the South) and individual EAHIL members have worked hard to seek out and encourage active EAHIL members to stand for President and on the Board. 2 candidates have been nominated as President and 9 candidates have been nominated for the EAHIL Board. There are three vacancies for Board members and one for President. The two non-elected candidates who receive the largest numbers of votes will be co-opted to the Board.

The voting papers will be sent by ordinary mail during the spring to all EAHIL members with voting privileges, i.e. all members except affiliated members and honorary members. All candidates for Board and President have been asked to send:

- curriculum vitae, hopes and visions for EAHIL's future
- picture, full details of name, address, e-mail
- activities and professional interests
- plans for EAHIL

I urge all EAHIL members to participate in the election. The votes should be sent by ordinary mail to EAHIL secretariat. Closing date for the election is 31st July.

I wish you all a wonderful summer. I look forward to seeing you all in Cluj.

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

News from our Association

EAHIL 2006 ELECTIONS

CANDIDATE FOR EAHIL PRESIDENT



**Suzanne Bakker -
The Netherlands**

Curriculum Vitae

- Library Director since 1984 of the medical libraries of the University of Nijmegen, the University of Amsterdam and since 1998 of the Netherlands Cancer Inst.
- Active member of the biomedical information group (BMI) of the Dutch Library Association (NVB) as Editor of the newsletter *Biomedities* and as Chair of the Continuing Education Committee (see also: <http://www.nvbonline.nl/bmi>).
- Joined EAHIL in the late 80s and have served on numerous International Programme Committees since 1992 as well as being responsible for the Continuing Education Courses in 1998, 2002 and 2004. Editor of the Conference Proceedings from the Montpellier, Coimbra and Utrecht EAHIL conferences.
- Supervisor of the EAHIL secretariat since the move from Brussels to the Netherlands (Amsterdam/Utrecht) in October 1998
- Currently 2nd Vice President of EAHIL

Professional interests:

Clinical librarianship; bibliometrics; instruction in bibliographic databases and bibliographic database management systems; continuing education for medical librarians

Important issues for EAHIL:

- continuation of the annual events (conferences and workshops) as an opportunity to meet colleagues, exchange ideas & experiences and to learn about new initiatives in our field
- organizing and facilitating continuing education courses
- "visibility" of our profession by contacts, publications and attendance of conferences with medical and health professionals and management
- development of standards and guidelines for medical library and information services

It would be an honor for me to serve EAHIL as President in the coming years. It is my strong belief that Europe will benefit from closer cooperation among professionals in general and that European citizens will benefit from health services that are supported by the European medical information professionals in particular.

Suzanne Bakker, MSc.

Library Director / Information specialist
Central Cancer Library
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News from our Association

EAHIL 2006 ELECTIONS

CANDIDATE FOR EAHIL PRESIDENT



Manuela Colombi - Italy

Curriculum Vitae

I have been employed at Janssen-Cilag in Italy since 1998. I am in charge of the management of the scientific documentation and drug safety department. All my previous job experience has been in the pharmaceutical industries.

I have been a member of EAHIL since the beginning of the nineties and I have been active as a Council then as a Board member and from 1999 to 2000 I had the responsibility and honor of being President. At present I am Treasurer. As an EAHIL member I have organized two workshops in Italy and I have been a member of the Scientific Committees of numerous conferences.

Future Plans for EAHIL

As in the previous mandate I would like to continue the cooperation with all Council members to disseminate information regarding activities and projects run by the EAHIL Association. I intend to take care of the financial wellbeing of EAHIL now that we are a 'no-fee' association. While increasing the cooperation with our colleagues from what we now call New-Europe, at the same time I would like to maintain an active membership in those countries which founded EAHIL.

Finally, a special consideration must be given to the Association's Webpage, our window to the world. There the work done by Benoit Thirion is invaluable, and I would like if, on the same server, we could host all the proceedings of our workshops and conferences.

Manuela Colombi
Janssen-Cilag SpA
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CANDIDATES FOR THE EAHIL BOARD

There will be three new Board members elected, plus the two non-elected candidates who receive the largest numbers of votes will be co-opted to the Board.

North Europe



Pirjo Rajakiili - Finland

Curriculum Vitae

- Library Director since 1999 of the National Library of Health Sciences
- 1991-1999 Head Librarian of the National Public Health Institute

- Two other library posts before those two mentioned

Activities and Professional Interests:

- Board member and secretary of the Finnish Research Library Association
- Board member of Bibliothecarii Medicinae Fenniae BMF and later President
- Active member of BMF in organizing EAHIL Conference 2008 in Helsinki
- Board member of the Nordic Association for Medical and Health Information (NAMHI, now NORDBALT) since 1994

News from our Association

EAHIL 2006 ELECTIONS

- EAHIL Council member (second term)
- As Council member I have been developing together with two other persons The Code of Ethics for EAHIL and now am a member of the EAHIL Certification Working Party.
- Member of the evaluation group of the Finnish Museums.
- Honours: Nominated Director of the Year 2004 at the University of Helsinki

Plans for EAHIL

I think that our profession is a great profession. Our knowledge is becoming more useful for our patrons and we know it, but how can we manage to make this knowledge visible; how to survive as a profession. It is here that I think EAHIL can have an important role and there I would like to do my bit.

Pirjo Rajakiili

National Library of Health Sciences
pirjo.rajakiili@helsinki.fi

South Europe



Benoit Thirion -
France

Functions

- Responsible for the Medical Library of the Rouen University Hospital since 1983.
- Coordinator of the CISMef project (started in 1995) = Catalog and Index of French-language health resources: <http://www.cismef.org/>.
- Council member for France in EAHIL, since 2003.
- Internet Page Editor for Journal of EAHIL

Awards

- Albert Sézary Price & Laureat in October, 2000 from the French National Academy of Medicine
- EAHIL Prix D'Honneur winner in 2002

Publications

- Thirion B, Loosli G, Douyere M, Darmoni SJ. Metadata element set in a quality-controlled subject gateway: a

step to a health semantic Web. - Stud Health Technol Inform. 2003;95:707-12

- Darmoni SJ, Thirion B, Leroy JP, Douyère M, Piot J. - The use of Dublin Core metadata in a structured health resource guide on the Internet. - Bulletin of the Medical Library Association 2001; July;89(3) 297-301
- Thirion B, Darmoni SJ. - Simplified access to MeSH Tree Structures on CISMef. - Bulletin of the Medical Library Association 1999; Oct; 87(4):480-1
- Darmoni SJ, Thirion B. - A Standard Metadata Scheme for Health Resources - JAMIA Journal of the American Medical Informatics Association 2000; Jan-Feb;7(1):108-109

Plans for EAHIL

- Try to enhance the European identity and specificity of EAHIL,
- Offer a better visibility of European Projects in the medical librarians' areas

Benoit Thirion

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News from our Association

EAHIL 2006 ELECTIONS



South Europe

Joanna Venieri - Greece

Curriculum Vitae

I was born on July 22th 1967 in Athens, Greece. I have a Bachelor degree in

Law from the University of Athens from 1991 and I have studied Classical music in Athens. In 1995 I founded the SBC-Scientific & Biomedical Information Centre. My experience and speciality for Information Science is Databases and Information Retrieval, and I aim to graduate with a Masters Degree at the end of the 2007 from the University of South Florida.

From 1995 till the present day, SBC, which is a non profit Institution, has developed into a large electronic library in Greece with 6.500 online journals, 25 databases and many books

in the area of Biomedicine, Social Sciences (especially in Management and Health Care Management) and Chemistry providing Health Information to students, doctors and others Academicians. I am trying to organize a Greek Consortium for Medical or Special Libraries and I would like your support for this.

Plans for EAHIL

I would like EAHIL to play a more educational role in Health Information. I would suggest to form an Academy of Health Information Professionals with postgraduate programs in collaboration with other Organizations. I think that EAHIL can become an even bigger force in Health Information for Libraries and Librarians. In the future I would like there to be an EAHIL meeting here in Greece.

Joanna Venieri

SBC - Scientific & Biomedical
Information Centre
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Enrica Veronesi - Italy

Career

I have worked at the Library of Faculty of Medicine and Surgery - University of Brescia Medical library from 1984-2006 and I be-

came responsible for the Library in 1989.

Professional Interests

- From 1998-2005 member of the GIDIF-RBM Board (Gruppo Italiano Documentalisti Industria Farmaceutica Ricerca Bio-Medica)
- Involved in various Italian collaborative projects and systems based on collective

catalogue and DD, e-journals and data base subscriptions such as:
SBBL <http://www.sbbl.it>;
GIDIF-RBM <http://www.gidif-rbm.it/>;
NILDE <http://nilde.bo.cnr.it/>;
Cilea Digital Library <http://cdl.cilea.it/>;
SBN <http://opac.sbn.it/index.html>.

Plans for EAHIL

I wish to contribute to the dissemination of EAHIL initiatives to Italian colleagues, encouraging them to participate and debate in the evolution of the profession.

Enrica Veronesi

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East Europe

Meile Kretaviciene - Lithuania

Activities and projects

- member of the Executive Board in several Lithuanian Academic Library Network (LABT) projects in Lithuania:
- creation of Lithuanian ETD IS, Lithuanian Academic Virtual Library, Lithuanian scientific publications DB, and Lithuanian e-publishing project
- Since 2003 leader in the new Library of the Kaunas University of Medicine building project: planning, building, implementation of new library technologies
- 2000-2004 Co-organizer with the Nordic Library Association SMH in a Nordic-Baltic partnership program *Transfer of Knowledge*
- organized several courses on Health Information Search during 2000-2005 for health specialists
- prepared and published Web-based training material for medical librarians and physicians and presented papers at a

number of national and international conferences and workshops on health information

Membership

- 1993 - Head of the World Health Organization Documentation Centre at the KMU
- 1998 1st co-opted EAHIL member, currently 2nd EAHIL Vice-President
- 2000-2005 President of the Association of Lithuanian Academic Libraries
- 2000 - Board member of the Lithuanian Research Libraries' Consortium
- 1998 - Board member of the NAHMI
- 2000 - Board member of the Baltic Association of the Medical Libraries
- Member of IPC for EAHIL Workshops in Oslo and Krakow

Plans for EAHIL

- to act at EAHIL as a contact person for relations with Medical librarians in Former Soviet Union, Eastern European and new EU countries and seek new contacts and new members.

Meile Kretaviciene

Library of Kaunas University of Medicine
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East Europe



Márta, Virágos - Hungary

Current position

Presently Director of the National and University Library of the University of Debrecen. Academic experience - teaching

information storage and retrieval and Internet services at the University of Debrecen.

Functions and activities

Active in several professional organizations she has been

- Vice President of the Hungarian Medical Library Association
- President of the University Library Directors' Committee,
- Vice-President of the Library and Informatics Association, Hungary.

Professional Interests

Since 1988 she has been a member of the European Association for Health Information and Libraries, of which she was elected member of the Executive Board in 2000. She is

News from our Association

EAHIL 2006 ELECTIONS

now Internal Communications Officer as well as a member of the Journal Editorial Board. She organized the 1997 EAHIL Workshop in Budapest and has been a member of several EAHIL conference IPCs. She has given several lectures at international conferences and published two books and 20 papers

Plans for EAHIL

I would like to continue my work for EAHIL in two domains. Firstly, I would like to strengthen

my Hungarian colleagues' membership in the Association and secondly to promote collaboration among Central European Medical Libraries in European library projects.

Márta Virágos

University Library of the
University of Debrecen, Hungary

Giovanna.Miranda@sanofi-aventis.com

East Europe



Ioana Robu - Romania

Current position

● Director of the Central Library of the University of Medicine and Pharmacy of Cluj-Napoca, Romania

Functions and activities

- President of the Medical Section of the Romanian Association of Educational Libraries
- Coordinator of the Information and Documentation chapter within the EU project for the Management of Romanian Medical Universities
- Cunningham Fellow of the MLA - 4 months experience in USA medical libraries - 1997

Professional Interests

- development of web technology and research of the emerging tools (cf. Robu I, Robu V, Thirion B. An introduction to the Semantic Web for health sciences librarians. *J Med Libr Assoc.* 2006 April; 94(2): 198-205

- bibliometrics, with the aim of improving medical scientific publication in Romania. Improving standards in the scientific biomedical community in Romania by using journal ranking to improve journal quality (*Health Information and Libraries Journal* 2001; 18: 91-98)
- creation of the Romanian medical database *RoBiblioMed* - coordinator of this project

Plans for EAHIL

- promote EAHIL among the community of health science librarians of East European countries, and consequently encourage a more active participation of this community in the EAHIL projects and activities
- contribute to EAHIL in playing a leading role in the setting of professional standards in medical librarianship at a European level, thus implicitly helping improve these standards in East European countries.

Ioana Robu

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University of Medicine and Pharmacy
Cluj-Napoca, Romania
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News from our Association

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West Europe



Tony McSeán - UK

Career

- 2004 - 2006: Director of Library Relations, Elsevier
- 1989 - 2004: Director of the British Medical Association Library
- 1974 - 1989: University and National library posts in the UK and Ireland

Professional Interests

1993 - member of the EAHIL Board (President 1993-4 and 2001-2, Secretary 1996-2000, Treasurer 2002-3, currently Chair of the Certification Working Party)

1995 - member of Library Association and Cilip Council (1997-2000 Board member and chair of Enterprise Board, 2006 - date Board member and chair of Cilip Council)

Chair of ICML 2000, which incorporated the EAHIL conference

Plans for EAHIL

Since 1993 I have been a member of the EAHIL Board and have worked hard to make EAHIL a financially stable organization which understands the needs of its members and supports the professional development of health librarians throughout Europe. I have been concerned with many fundamental changes in EAHIL's structures and operations, including the introduction of EAHIL workshops and the organisation's restructuring and move from Brussels to the Netherlands. Most recently, as Treasurer, I was responsible for working through the financial and statutory implications of the abolition of subscriptions and the change to virtual status. My present responsibility is to chair the working party which will bring to the 2006 annual meeting a proposal to establish a system of professional certification and recognition for experienced health librarians in Europe.

If elected I will support the new President in her work, and will contribute to the many issues and changes facing EAHIL and health information professionals over the next four years.

Tony McSeán
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News from our Association

EAHIL 2006 ELECTIONS

West Europe



Friedhelm Rump -
Germany

Curriculum Vitae

● studied Mineralogy / Geochemistry at the Universities of Giessen and Goettingen 1969-1978; PhD 1978

- worked at Gottingen University Library 1979-1980
- library training at Gottingen University Library and Library School in Cologne 1980-1982
- worked at Gottingen Municipal Archives 1983-1985
- Subject specialist for science at Stuttgart-Hohenheim University Library 1985-1989 (Deputy Librarian 1988)
- Head librarian at the Library of the Veterinary School (now University) of Hannover since 1990

Activities

- Head of examination board for library assistants in Lower Saxony 1992-1997
- Head of the Lower Saxonian Council for Library Affairs to the Minister of Science and Culture 1996-1997
- Council member for the installation of an integrated library system for seven

German states 1997; EAHIL-member since 1994

- SIG "European Veterinary Libraries Group" Treasurer 1994-2006, speaker 2004 to date
- Project-coordinator of the "(German) Virtual Library of Veterinary Medicine and General Parasitology" since 2001
- Member of steering-committee (now coordination-board) and workgroups "marketing" and "BioMed" (speaker) of vascoda (German science gateway)

Professional interests

Utilization of new technical devices; internet resources; search-engine-technology

Plans for EAHIL

In addition to Board duties: playing an active role in

- enhancing members' Internet- and search skills (possibly as part of an EAHIL-competence-group)
- PR and marketing of EAHIL

Friedhelm Rump

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News from our Colleagues

News from MLA



MLA '06 Phoenix, Arizona

Members will gather in Phoenix this year for the premier event of the year - the Annual Meeting. The International Visitors Reception will be held on Sunday evening 6-7pm and is always a lovely event. If you are attending MLA, do

not miss this opportunity to meet the MLA Board members, members of the International Cooperation Section, the 2006 Cunningham Fellow, as well as attendees from all over the world.

Cunningham Fellow

Hanne Caspersen, Medical Librarian, State and University Library/Aarhus, Denmark, is the MLA 2006 Cunningham Fellow. As many of you will know, the Medical Library is new as of 2000, and she and a small team of people helped establish it. Before that it was integrated in the State and University Library. Hanne works with courses for the students, searching medical databases and providing workshops for staff at the hospital in various departments. She does interlibrary loan as well, and uses PubMed and LoansomeDoc in her work. She will be at NLM Monday April 17-Friday April 21, and will attend PubMed training, learn about Clinical trials.gov and the Gateway, and have overviews of many program areas including all of those in Library Operations. NLM staff are looking forward to meeting her.

MLA Open Access Survey

MLA's Scholarly Publishing Task Force monitors issues, policies, and trends emerging in the scientific, technical, and medical (STM) publishing market, especially those relating to open and public access. The task force is assessing how these trends and policies in scholarly publication directly impact biomedical libraries and will recommend new programs, special initiatives, and other activities that MLA

should pursue to support the various needs of MLA members. During April, MLA is conducting an online Open Access Survey, asking MLA members to respond to questions concerning their view of scholarly publishing and how open access might change their library's policies related to journal subscriptions. Questions also inquire about educational programs the libraries are conducting now, and what MLA might do to assist their member libraries. Look for the findings from the survey in the summer.

Hurricane Katrina Relief Efforts

Slowly libraries are recovering from the disastrous Hurricane Katrina that hit 5 states last August. As reported in the last issue, MLA established a Medical Library Disaster Relief fund to assist members and libraries had been affected by Hurricane Katrina. Nine librarians from Louisiana applied for and received an MLA award to attend MLA '06 in Phoenix. This fund has also been awarded for library equipment.

Through the efforts of one library, The West Virginia University Health Sciences Library-Morgantown, duplicate medical journals have been collected for libraries impacted by Hurricane Katrina. The available issues have been posted on the MLANET Hurricane Katrina portal so that libraries can easily request the journal issues they need.

Personal Note

I have enjoyed being the MLA representative to EAHIL for five years. On March 31, 2006 I retired from the National Library of Medicine, and MLA will appoint a new representative for a new three year term at its Board meeting in May. I hope to see many of my EAHIL colleagues in Cluj-Napoca in September.

Eve-Marie Lacroix

MLA Representative to EAHIL

THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

What is Health Technology Assessment?

Health Technology Assessment (HTA) is a multidisciplinary field that *seeks to inform health policy makers by using the best scientific evidence on the medical, social, economic and ethical implications of investments in health care.*¹ These healthcare "investments" or technologies include *drugs, devices, medical and surgical procedures used in health care, as well as measures for the prevention and rehabilitation of disease, and the organisational and support systems in which health care is provided.*¹ HTA is an evolving and maturing field and many HTA agencies and associated organizations have only emerged in the last decade or two. Some of the better-known organizations include the Agency for Healthcare Research and Quality (AHRQ - www.ahrq.gov), the National Institute for Health and Clinical Excellence (NICE - www.nice.org.uk), and the German Institute of Medical Documentation and Information (DIMDI - www.dimdi.de).

Evidence is the underlying basis of any HTA. *HTA is the synthesis of many pieces of information from many different sources,*² including published and grey literature, experts, patient groups, and manufacturers. HTA uses *explicit analytical frameworks*

*drawing from a variety of methods,*³ thereby providing a credible and transparent evidence base on which to make decisions.

Providing this evidence base requires the participation of a skilled and knowledgeable information specialist (IS). In the most successful HTAs, the IS is part of the HTA team from the beginning. He or she participates in all aspects of the project, including protocol development, literature searching, critical appraisal, information management, report writing and review, and publication. The IS's role in HTA can be methodologically and practically challenging. In support of this, information specialists work together at the local, national and international level to share and develop best practice for undertaking HTA; the HTAi Vortal (www.htai.org/vortal) and the Search Filter Resource (www.york.ac.uk/inst/crd/intertasc/index.htm) which are described in this theme issue of the Journal of EAHIL, provide tangible examples of output from this effort.

Becky Skidmore,

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Janette Boynton

Janette.Boynton@nhshealthquality.org

¹ *About HTA*. Stockholm: International Network of Agencies for Health Technology Assessment; 2005? Available: http://www.inahta.org/inahta_web/index.asp

² Chan L, Collins S, Topfer LA. *Health technology assessment on the Net: a guide to Internet sources of information*. 7th ed. Edmonton: Alberta Heritage Foundation for Medical Research; 2005. Available: http://www.ahfmr.ab.ca/hta/hta-publications/infopapers/Internet_sources_of_information.pdf

³ Glossary. In: Goodman CM, editor. *HTA 101: introduction to Health Technology Assessment*. Bethesda (MD): National Information Services on Health Services Research and Health Care Technology; 2004. Available: <http://www.nlm.nih.gov/nichsr/hta101/ta101014.html>

THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

Becky Skidmore

HTAi Vortal

The Information Resources Group (IRG) of Health Technology Assessment International (HTAi) has begun development of a comprehensive, accessible vortal of international HTA information resources (www.htai.org/vortal). The first phase of the vortal includes the compilation of HTA web resources in a variety of subject areas. A preliminary version, largely developed by one IRG member, was released in spring 2005.

Content and design is now being reviewed, verified and expanded by volunteer subject experts recruited from the international community via the IRG listserv. These experts identify relevant resources, write user-friendly descriptions and assign keywords. One IRG member edits and coordinates content, updating others regularly via the listserv. Twenty-one volunteers from seven countries are currently contributing to the vortal. Additional volunteers will be recruited from the broader HTAi community.

Users access resources in the vortal via a keyword search facility or an expandable list of categories. Clicking the resource reveals its URL and description. The next phase of development will include focused usability testing, using HTA end-users as participants, to ensure that content is relevant and that the site is user-friendly. Federated searching (simultaneous web/database searching across defined resources) is also being explored. Later phases may incorporate member-only services, virtual reference, or blogs.

The IRG received seed funding from the National Library of Medicine and Veterans' Affairs Technology Assessment Program for this project. Ongoing web support is provided by the HTAi Secretariat.

Becky Skidmore, Chair, IRG

Information Specialist
Canadian Agency for Drugs and Technologies
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beckys@cadth.ca

The ISSG Search Filters Resource

Information professionals probably create search strategies on an almost daily basis. Many of us are no doubt trying to create the same strategies as our neighbours. The recent boom in published search filters may be a recognition that this duplicate effort is going on, and represents information professionals' desires to minimise duplication, to provide well-researched tools and to enhance consistent searching for their customers. It also reflects the fact that there are now only a few

widely used search interfaces - meaning that investing time in designing a search filter has the potential to be beneficial to a large number of interface users.

Search filters are collections of search terms designed to retrieve selections of records. Filters may be designed to retrieve records of research using a specific study design such as randomised controlled trials or by topic or by some other feature of the research question.

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The ISSG Search Filters Resource

Search filters may be designed to maximise sensitivity (or recall), so that as many potentially relevant records as possible are retrieved, or to maximise precision. Precision-maximising filters seek to reduce the number of irrelevant records that may need to be assessed in the search for relevant records.

The selection of a search filter should be an informed decision. Before choosing to use a filter we want to know its purpose, its scope, its strengths and weaknesses, and whether it will really benefit our customers. The information we need to decide whether to use a filter hinges on the methods used to compile the filter. The methods should be clearly described by the filter's authors and we should make a critical assessment of those methods before use.

Search filters have also become known, unhelpfully, as 'quality filters'. Search filters are rarely quality filters and the search results from all filters will inevitably need to be assessed against a customer's requirements and against measures of quality. All search filters and all search strategies are compromises and an assessment of the performance of filters for specific purposes should be made.

These issues, along with the growing number of published filters, have led to the development of a new information resource. Information professionals working in research groups within England and Scotland providing

technology assessments to the National Institute for Health and Clinical Excellence (NICE) identified both the advantages and the limitations of search filters. These information professionals, the InterTASC Information Specialists' Sub-Group (ISSG), and their guest participants (for a list please see appendix 1), agreed to collaborate on a joint venture to identify, collate and critique published search filters. The first two stages of the project have progressed well and a web site has been created (<http://www.york.ac.uk/inst/crd/intertasc/index.htm>) with citations and links to many published methodological filters. The next stages of the collaboration are for the collaborators to assess the quality of the search filters, and to test out filter performance in their own work supporting technology assessments and other evidence syntheses.

Quality assessment will include the examination of a range of factors which might contribute to the reliability of the filter. Contributions on the performance (sensitivity and precision) of search filters will include retrospective analyses by contributors of how well individual search filters performed in retrieving known relevant studies in individual evidence syntheses. This assessment will necessarily be retrospective, at the end of projects. However, conducting a series of such analyses will build up a picture of the overall performance of filters across a range of research types and subject areas.

The scope of the ISSG resource is published filters of interest to researchers producing

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Julie Glanville

health technology assessments. Filters are usually published for a specific database interface. Often these filters are 'translated' or adapted to run on different interfaces to the database. Links to known 'translations' are offered.

To avoid potential duplication of effort, and to encourage testing and use of new filters, the site also offers detail of research in progress, and known completed but as yet unpublished filters. Other information retrieval research such as reviews of search filters is also offered.

The ISSG welcomes comments on the usefulness of the information presented so far (email: jmg1@york.ac.uk). We would also like to learn about filter research in progress. If you are engaged in search filter research and would be willing to tell us more, so that we can record your information on the site, please tell us using the email above.

The search filter site is a collaborative venture. We welcome more collaborators. In particular there is real scope for contributions from collaborating individuals and teams willing to test search filter performance on completion of a research project, and to provide performance information to the website. With wider collaboration the resource has the potential to offer valuable insights in filter performance and make searching as part of health care research more evidence based.

Appendix 1.

ISSG members include:

- HSRU, Aberdeen University
- ScHARR, University of Sheffield
- CRD, University of York
- West Midlands Health Technology Assessment Collaboration, University of Birmingham
- Liverpool Reviews and Implementation Group, University of Liverpool
- SHTAC, University of Southampton

Guest participants include

- Andrew Booth, ScHARR, University of Sheffield
- Janette Boynton, Louise Foster and Karen Macpherson, NHS Quality Improvement Scotland
- Ruth Frankish, Hasina Shaikh and colleagues, NICE
- Moira Napper, HERU, Aberdeen University
- Carol Lefebvre, UK Cochrane Centre, Oxford

Julie Glanville

On behalf of the
InterTASC Information
Specialists' Sub-Group (ISSG)
jmg1@york.ac.uk

THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

The HTA database: A History and Description



The HTA database: A History and Description

Abstract: This article provides a brief history of the origin of the Health Technology Assessment (HTA) database, describing its content and how the database is produced and maintained, and how the content is disseminated. It then gives a brief look into the future direction of the database.

History of the Health Technology Assessment database

The Health Technology Assessment (HTA) database is produced by the Centre for Reviews and Dissemination (CRD) at the University of York, in collaboration with the International Network of Agencies for HTA (INAHTA).

In the mid-1990s, HTA, although not exactly a new field, was certainly a booming one. More and more organizations around the world were becoming involved in HTA, and it was evident that the output of HTA reports was only going to increase over time. This crucial and interesting phase of international HTA development was an ideal time to start a database capturing and disseminating all these reports. This database would allow the mutual communication and sharing of HTA work between organisations and with potential researchers and health care providers. Rather than scan the individual websites of numerous separate organisations, a single database would enable searching via one portal, a huge time saving for busy information professionals, researchers and decision makers.

CRD proposed such a database to its funders, to be produced and promoted by the CRD. The proposal was accepted and the HTA database came into existence. Production and promotion of access to the HTA database now forms one of CRD's core targets and is funded by the English Department of Health.

INAHTA at that time had an embryonic set of bibliographic details for those HTA reports their members were involved in, and the existing CRD databases (DARE and NHS EED) were scanned for HTA reports. These formed the base for the HTA database which was launched in 1998.

What the database contains

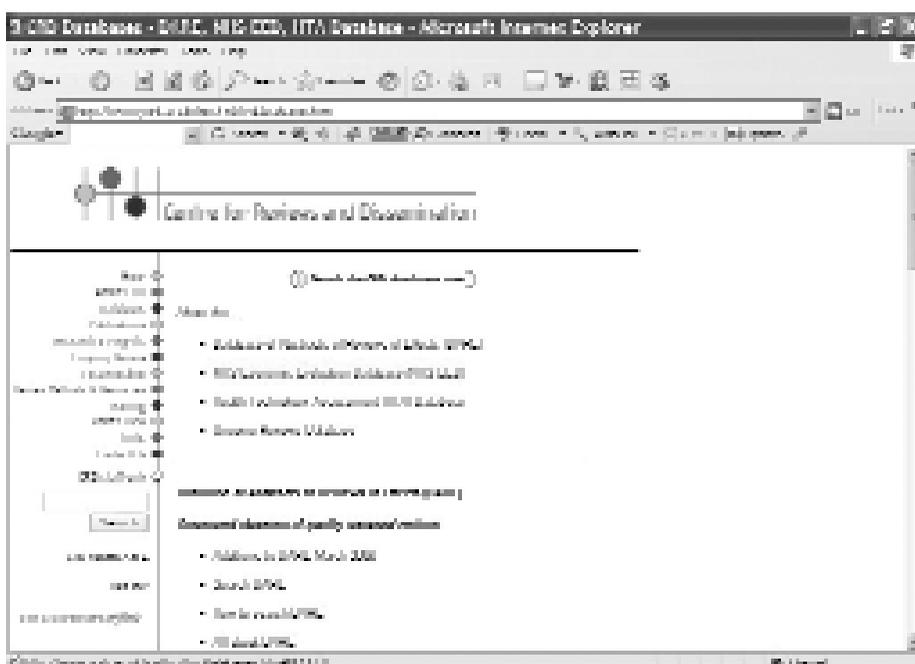
The HTA database contains bibliographic details of ongoing projects and completed reports from 37 current INAHTA organisations, 19 current non-INAHTA organisations, and also the archive reports of 5 defunct organisations. The HTA database is unusual amongst biomedical databases in that it includes both details of ongoing projects and completed reports. This is key to the CRD's remit of promoting access to research evidence: the details of ongoing projects can prove just as

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useful to researchers and healthcare providers as details of completed reports in terms of generating options to collaborate and allowing projects to be postponed pending publication of research.

As of 18th April 2006, the HTA database held the bibliographic details of 5718 records: 802 ongoing projects and 4916 completed reports.



Research recorded on the HTA database may be one of a range of types: for example systematic reviews, overviews, questionnaires, cost-effectiveness studies, clinical trials. CRD produces two other databases, the Database of Abstracts of Reviews of Effects (DARE) and the NHS Economic Evaluation Database (NHS EED). These databases critique HTA systematic reviews and economic

evaluations so there may be some overlap between the databases, with some HTA reports appearing on DARE and/or NHS EED as well as on the HTA database. Quality inclusion criteria are not applied to reports or projects on the HTA database (unlike DARE and NHS EED). However, all records come from internationally recognised HTA organisations that operate on a not-for-profit basis.

Production of the database

Information given about ongoing projects is confined to the title of the project, organisation undertaking the project and where possible National Library of Medicine Medical Subject Headings (MeSH). The amount of information provided for finished reports varies from basic bibliographic details to a citation plus a full abstract including objectives, methods, results, cost information where appropriate and conclusions. These abstract details will have been taken from the original document or its summary. The abstracts are not analytic or written by an external body. Permission has been granted by all organisations whose publications or projects are on the

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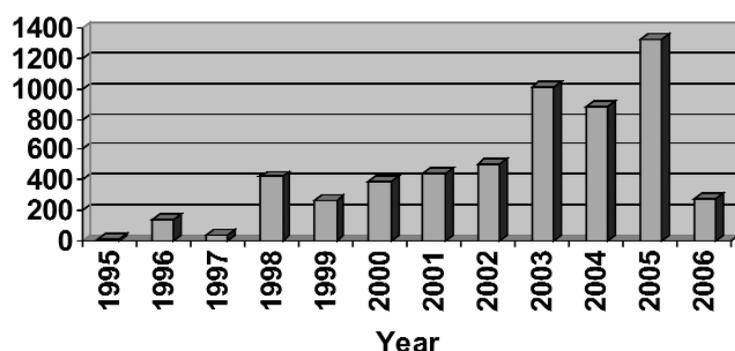
The HTA database: A History and Description

HTA database for CRD to use their bibliographic records and abstracts. However, copyright on the records remains with the publishing organisation.

Links to the URL of original publications are provided where possible, but if this is not feasible, a link to the organisation's website is provided instead. Indexing is provided for all reports using MeSH, but not for all projects; we advise that researchers do not rely on MeSH alone when searching the database.

New items are regularly added to the HTA database. Staff at CRD scan the websites of 56 HTA organisations for new HTA publications, as well as scanning the HTA literature. In addition to this, every six months the INAHTA secretariat passes on a list of new reports and projects provided by their member organisations. They will also notify the production team at CRD of completed projects and any corrections to existing records on the database. Organisations can submit details of their publications and projects directly, either via a proforma available on the CRD website or by emailing an attachment with record details to CRD. This combination of approaches allows for flexibility for submitting organisations, and also for currency in the database: the turnaround particularly from new reports appearing on an individual HTA website to those details being available on the HTA database is usually very rapid.

Records added to the HTA database



Disseminating the database

The HTA database, along with DARE and NHS EED, is an important part of the CRD's remit of providing research-based information about the effects of interventions used in health and social care. All three databases are widely promoted at a variety of conferences, in publications and on the CRD website. Links to the HTA database are kindly provided on the INAHTA website, and on the individual websites of some HTA organisations.

All three of the CRD databases form part of the Cochrane Library suite of databases, where they can be searched individually or as part of a general Cochrane Library search. They are also part of those sources searched via Turning Research Into Practice (TRIP). These particular databases offer the advantage of allowing users to use a single interface to interrogate a range of related

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Jo Akers

databases. However, searching via the CRD website is always the most current way to search the database.

There is an HTA database mailing list. It is possible to join the mailing list using a proforma on the CRD website. Details of new additions to the database are sent out monthly, as well as any other items of news such as new organisations being added to the database, or tips on searching. There are currently approximately 400 individuals on the mailing list, and the roll call is truly international, with members from Europe, Israel, Australia, New Zealand, Brazil, Panama, South Africa, Malaysia, Taiwan, Thailand, and India. Regular bulletins of HTA database news are also sent to members of the INAHTA mailing list.



The importance of searching grey literature when embarking on Health Technology Assessment research is acknowledged¹. HTA reports can be defined as items of grey literature: they are usually produced by government-sponsored organisations and published by non-commercial publishers². The HTA database is recommended as the best place to find grey

literature relating to health technology assessment³. Inclusion on searching checklists produced by international HTA bodies also indicate that the HTA database is a useful resource.

Future developments

In April 2006 CRD signed an agreement with Update Software to provide a new web interface for all of its databases. This will improve the look and functionality of the databases, and allow users to set their own preferences and to download larger record sets. This exciting development for all CRD databases is expected to go live in summer 2006.

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The HTA database: A History and Description

A new organisation is about to be added to the HTA database: Adelaide HTA (AHTA). This joins two recent additions: ECRI and WorksafeBC. Staff at CRD who work on the HTA database are constantly on the alert for new HTA organisations, and recommendations from other individuals or organisations are always welcome.

Comments or feedback on the HTA database are much appreciated; we are always striving to improve and enhance the database for its users. Please address all comments to: Jo Akers - jmd7@york.ac.uk

Jo Akers
Information Officer,
Centre for
Reviews and Dissemination,
University of York

WebPages mentioned in this article

HTA database <http://www.york.ac.uk/inst/crd/crddatabases.htm>

Centre for Reviews and Dissemination <http://www.york.ac.uk/inst/crd/>

INAHTA <http://www.inahta.org/>

To submit details of an HTA report <http://www.york.ac.uk/inst/crd/hfaq7.htm>

Join the HTA mailing list <http://www.york.ac.uk/inst/crd/htamail.htm>

HTA database FAQs <http://www.york.ac.uk/inst/crd/hfaq.htm>

Cochrane Library <http://www.thecochranelibrary.com>

Turning Research Into Practice <http://www.tripdatabase.com>

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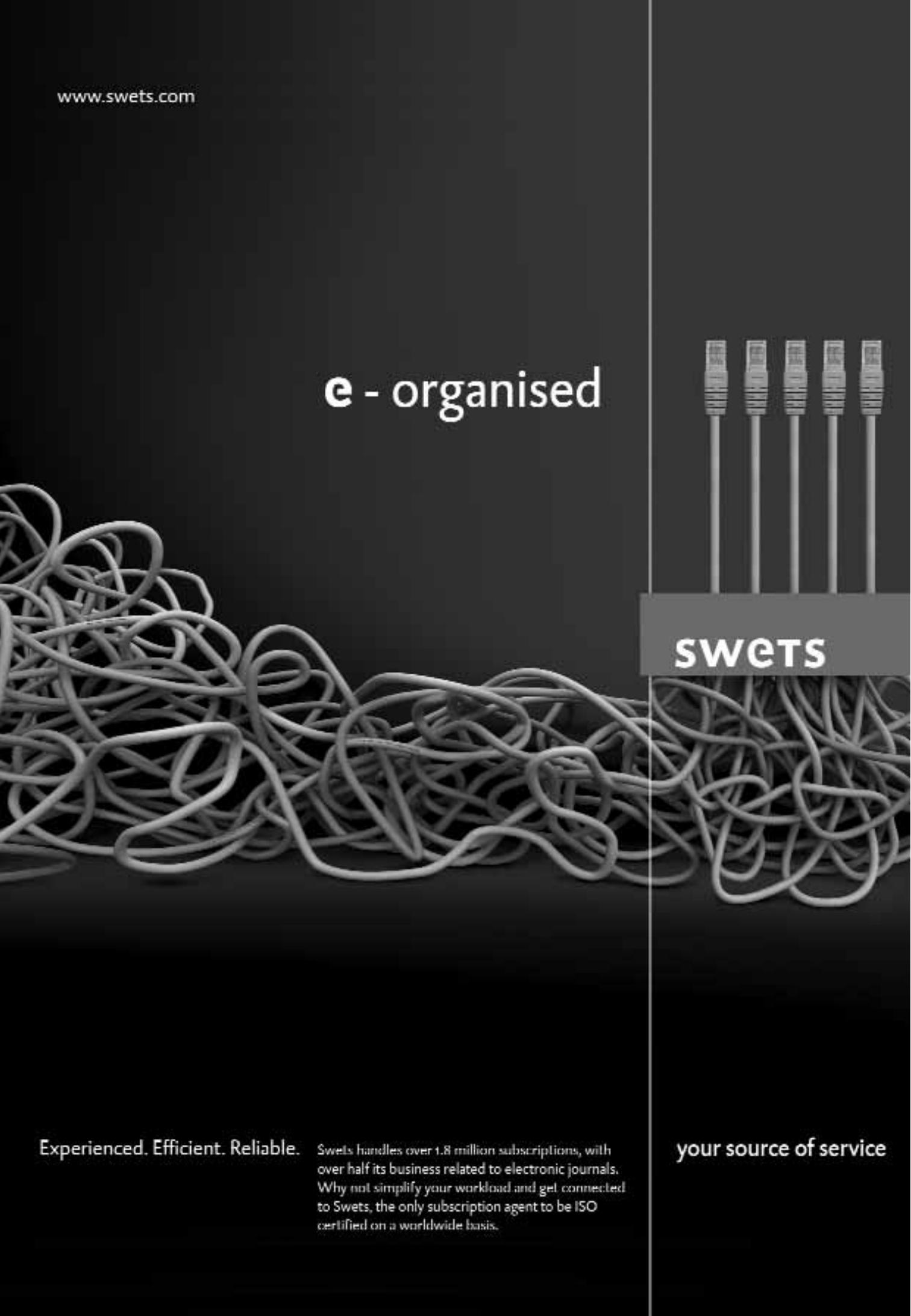
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2. New frontiers in grey literature: Fourth International Conference on Grey Literature: GL'99 proceedings; 1999 Oct 4-5; Washington, D.C. Amsterdam: GreyNet; 1999.

3. Topfer L-A, Auston I. E-text on health technology assessment (HTA) information resources. Bethesda, MD: National Information Center on Health Services Research and Health Care Technology (NICHSR); 2000 Last updated 23 November 2005. Available from: <http://www.nlm.nih.gov/nichsr/ehta/>

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NEWS FROM CLUJ, ROMANIA

10th EAHIL Conference 2006

Report of the IPC Meeting in Cluj

Report on the Meeting of the International Program Committee of the 2006 EAHIL Conference in Cluj-Napoca, Romania, 2-3 March 2006



IPC meeting in Cluj Medical Library

The 10th EAHIL Conference will be held on September 11-16, 2006, in Cluj-Napoca, Romania. The members of the Cluj International Programme Committee chaired by Benoit Thirion, Eva Alopaeus (Sweden), Manuela Colombi (Italy), Maurella Della Seta (Italy), Patricia Flor (Norway), Tony McSeán (UK), Barbara Niedzwiedzka (Poland), Jarmila Potomkov (Czech Republic), Márta Virágos, (Hungary) and EAHIL President Arne Jakobsson, visited Cluj-Napoca to inspect the conference site and discuss the final scientific programme of the conference. Sally Wood-Lamont and Ioana Robu greeted those present.

Ioana Robu distributed the Abstracts with reviewer's comments and marks to the group. It was decided that there would be 6 plenary sessions and 20 parallel sessions. First the IPC agreed about the plenary session papers. Secondly the group evaluated the abstracts according to themes and took into consideration the reviewers' scores and comments. Lastly oral papers were chosen for plenary sessions.

Before lunch the International Program Committee inspected the prospective sites of the conference. The venue of the conference will be the University of Babes-Bolyai's Collegium Academicum. The conference building houses a very impressive theatre-hall with a seating capacity of 800. Three large seminar rooms are available to accommodate the parallel sessions. Separate rooms will be available for the Board and Council meetings, and special groups can also hold their meetings in these premises. The Collegium Academicum Foyer will serve as the



Evening at the *Roata* restaurant in Cluj

NEWS FROM CLUJ, ROMANIA

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Márta Virágos

exhibition area. A separate internet room will be made available for the duration of the conference. As to the meals, two restaurants on the campus will be made available for the delegates.

Regarding the continuing education courses, the new Medical Informatics building of the Cluj University of Medicine and Pharmacy will house the courses. The Medical University is within walking distance from the city centre. It was agreed that special guides will help the delegates to find their way to the continuing education courses' location.

In the afternoon the Committee worked on the allocation of papers to Parallel Sessions where Manuela Colombi's vast experience assisted us greatly. Later Ioana and Sally took the group to dinner to a very nice restaurant where the IPC members were able to meet the local teachers of the Continuing Education Courses.

In the second day's program the discussion of the Empowerment Sessions was continued. Eva Alopaeus and Patricia Flor gave a detailed report, which was followed by the discussion of the evaluation criteria of the prizes for Best Oral/Poster presentations. The IPC then finalised the Scientific Programme which will be published in May 2006 on the site and in the Journal.



Evening at the *Roata* restaurant in Cluj

It was decided that there would be two categories of fees set for the conference to help the medical librarians of developing countries in Eastern Europe to help them attend the conference in larger numbers. It was also announced that 30 Euros of the respective individual conference fees will go to the EAHIL Association. The representatives of the Program Committee and the EAHIL Board found that Cluj-Napoca is an attractive urban environment (pop. about 350.000) and will be an ideal conference site. The members of the visiting group are grateful to Sally and Ioana for their outstanding hospitality.

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MEET THE CEC TRAINERS (2)

Title of Course: Hidden Treasures on the Internet
Duration: Half-day course
Lecturer: Friedhelm Rump
University of Veterinary Medicine Library, Hannover.
Friedhelm.Rump@tiho-hannover.de



Biography

Friedhelm Rump holds a diploma (1973) and a PhD (1978) in Geochemistry from Göttingen University. He undertook his library training at Göttingen University Library and Fachhochschule für Bibliotheks- und Dokumentationswesen in Köln (1980 -1982). He has held positions at the Göttingen University Library, the Municipal Archives of Göttingen and Hohenheim University, Stuttgart. Since 1990 he has been library director at the Veterinary University of Hannover. He has held a number of honorary positions. He is very active in EAHIL, and is both treasurer and spokesman for the European Veterinary Libraries Group.

Course description

The course focuses on three search skills, search tools and special resources. The aim is to provide an extensive overview of what exists on the internet and how to use it effectively. The expected level of expertise for participants ranges from basic to intermediate. The contents of this course will be available on a CD which will be given to participants free of charge at the end of the course.

Title of Course: The Design of Web Tutorials and Guides
Duration: Half-day course
Lecturers: Patricia Flor
Telemark University College, The Library Porsgrunn, Norway
Patricia.Flor@hit.no



Biography

Patricia Flor qualified as a librarian in 1970 and has additional studies in management and in computer science. She has worked in medical and health care libraries in Great Britain, West Africa and Norway. At present she is Head of Department at Telemark University College Library and has special responsibility for services to health care studies. In 2003-2004 she led a project for the development of a web-based guide in information literacy for students, **rad&VINK**. She has been active in EAHIL for many years and is one of the EAHIL Council Members for Norway. She has also taken part in continuing education committees and international programme committees for several conferences and workshops.

Course description

There are many web tutorials in information literacy freely available on the Internet. Even so, they may not suit the needs of our users or have an approach to teaching and learning that is conducive to our way of thinking. What decisions and actions should you make before, during and after the production of your own tutorial? This course will look at these issues:

- Planning and goals
- Educational approach
- Content
- Information design
- Web design
- Testing
- Implementation of the finished product

Title of Course: **Negotiating Best Prices and Service for Electronic Journal Access**
Duration: **Half-day course**
Lecturer: **Paul Harwood, Content Complete Ltd.**
phanwood@contentcomplete.com
Carolyn Alderson, Content Complete Ltd.
calderson@contentcomplete.com



Biographies

Paul trained as a librarian and spent six years working in libraries before joining 3M in a sales and marketing role. He worked for Swets and Zeitlinger for fourteen years and between 1994 and 2003 was the Managing Director of the Company in the UK and Ireland. During his last year at Swets, he was responsible for the Company's global Consortia and Multi-Site Services Team, helping academic consortia and global corporations broker electronic deals with scholarly publishers.



Carolyn has been in the serials information industry since 1988. She joined Content Complete Ltd in April 2004 as Content Negotiator. Since joining Content Complete, Carolyn's work has revolved around negotiating preferential access rates and licensing terms with publishers on behalf of NESLI2, IRaL and for the major pharmaceutical corporation GlaxoSmithKline.

Course description

This Course is designed to help librarians and information professionals in handling negotiations with online journal publishers and is based on the experiences of the workshop leaders in negotiating with publishers on behalf of academic consortia and multi-sited global corporations and a range of other clients in the public and private sectors. The workshop adopts a chronological and systematic approach to the process of negotiating with publishers, from identification of the content to be licensed through to post-negotiation issues and service fulfilment. It includes some practical exercises and group work.

The workshop will be of interest not only to those individuals just setting-out on the negotiations path but also to those who wish to benchmark their own negotiating strategies and approach with others.

Title of Course: **Managing e-journals**
Duration: **Half-day course**
Lecturers: **Anne Gry Skonnord**
Library of Medicine and Health Sciences, Oslo, Norway
a.g.skonnord@ub.uio.no



Biography

Anny Gry Skonnord qualified as a librarian in 1988. She has worked with e-journals at the library of Medicine and Health Sciences, University of Oslo, Norway, since 2001.

Course description

Every library is dealing with the daily management of an increasing number of electronic journals: how does one start? This course is aimed at librarians with little or no experience with e-journal management.

Title of Course: How To Eat An Elephant - or - How to Keep Your Audience Awake
Duration: Full Day Course - Lunch Included
Lecturers: Eve Hollis
BSc. MCLIP, NOC NHS Trust, Oxford
ehollis@gwmsailjr2.ox.ac.uk
Ronald van Dieën
Ingressus BV, 3000 CH Rotterdam
rvandieen@ingressus.nl



Biographies

Eve Hollis began her library career as a library assistant at the Nuffield Orthopaedic Centre, Oxford. Since 1995 she has been the Library Services Manager. Learning never stops and she has attended numerous seminars, workshops, conferences and trainings, and she has found that most of them, while interesting in content are usually profoundly dull to sit through, often leading to afternoon snoozes. Learning should start as fun in the nursery and continue to be enjoyed when discussing one's pension. International programme committees for several conferences and workshops.



Ronald van Dieën completed Library School in 1988. Since then he has worked as the head of several medical and psychiatric libraries. Co-founder of the Central Catalogue of Hospital Libraries in the Netherlands, he is former chair of the Dutch Medical Library Association (NVB/BMI). In 1998 he became General Manager of EBSCO the Netherlands. Since 2001 he has worked as a medical library consultant for Ingressus. He is stimulated and motivated by sharing ideas, experiences and knowledge with other library professionals.

Abstract

How do you eat an elephant? One slice at a time! The same applies to digesting difficult to understand or boring information - one bit at a time. Information overload in presentations will only lead to indigestion, failure to understand, and a dozing audience. This course will help the attendees to put together presentations of difficult or boring material and make it more interesting. It will give tips on technique, do's and don'ts, and ways of keeping an audience interested and awake.

Title of Course: PubMed and other relevant NLM resources
Duration: Half-day course
Lecturers: Astrid Muller,
Library of Medicine and Health Sciences, University of Oslo, Norway
astrid.muller@ub.uio.no



Biography

Astrid Muller is librarian at the Library of Medicine and Health Sciences, University of Oslo, Norway. In addition to giving courses in PubMed, she is also webmaster of her library and participant in the library portal project of the University of Oslo Library.

Course description

This course is designed for searchers who would like a refresher or an update on the newest in PubMed and want to expand their knowledge on PubMed services such as MeSH database, Clinical Queries, LinkOut and related resources including TOXNET, the NLM Gateway and OldMedline. (Molecular databases are not included in the course)



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EXHIBITORS HALL

The exhibitor's hall will be one of the focal points of the conference.

Situated in the foyer of the Colegium Academicum, where the Registration and Information desk will also be, the 16 reserved booths will offer a wealth of information on current innovation in the field of medical librarianship. The coffee/tea breaks will also take place here providing a bustling and atmospheric thoroughfare for all participants.

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10th EAHL Conference Scientific Programme

Monday Sept. 11	Tuesday Sept.12	Wednesday Sept.13	Thursday Sept.14	Friday Sept. 15	Saturday Sept. 16	
9⁰⁰ - 17⁰⁰ Continuing Education Courses		9⁰⁰ - 16⁰⁰ EAHL Board Meeting		Whole Day Free Sightseeing Tours in Transylvania		
9⁰⁰ - 17⁰⁰ Continuing Education Courses		9⁰⁰ - 12⁰⁰ EAHL Council Meeting				
14⁰⁰ - 17⁰⁰ EAHL SIGS & Nordic Assoc. Meetings		19⁰⁰ Reception for First - Timer EAHL Participants				
		9⁰⁰ - 11⁰⁰ Conference Registration	9⁰⁰ - 10⁰⁰ Plenary Session II			9⁰⁰ - 10⁰⁰ Plenary Session III
		11⁰⁰ Opening Ceremony	10⁰⁰ - 10³⁰ Coffee			10⁰⁰ - 10³⁰ Coffee
		12⁰⁰ Opening of Exhibition and Poster Area	10⁰⁰ - 11⁰⁰ Empowerment Session I			10³⁰ - 11⁰⁰ Parallel Session III
		13⁰⁰ - 14⁰⁰ Lunch	11⁰⁰ - 12⁰⁰ Exhibition & Poster Sessions			11⁰⁰ - 12⁰⁰ Empowerment Session II
		14⁰⁰ Plenary Session I	12⁰⁰ - 14⁰⁰ Lunch			12⁰⁰ - 14⁰⁰ Lunch
		15⁰⁰ Parallel Session I	14⁰⁰ - 15⁰⁰ Parallel Session II			14⁰⁰ - 15⁰⁰ Parallel Session IV
		16⁰⁰ Coffee Break	15⁰⁰ - 18⁰⁰ Choice of local Sightseeing Tours			15⁰⁰ - 15³⁰ Coffee Break
		16³⁰ - 18⁰⁰ Vendor Session	Free evening to sample restaurants in Cluj	15³⁰ - 16⁰⁰ EAHL General Assembly		
		19⁰⁰ - 21⁰⁰ Opera Concert and Welcome Buffet		16⁰⁰ - 17⁰⁰ Closing Ceremony		
				19⁰⁰ - 24⁰⁰ Gala Dinner at Hotel Belvedere		



10th EAHIL Conference Scientific Programme

PLENARY SESSIONS

Plenary Session I Wednesday 13 September 14.30 – 15.30

- **M. Anibaba (Romania):** Modern librarians
- **M. Acalovschi (Romania):** E-publishing develops rapidly in Romania: the experience of a recently established medical journal

Plenary Session II Thursday 14 September 9am – 10am

- **M. Fishel, B. Lyon (USA):** Development of PubMed Central, back issue scanning project, NLM's open access NIH manuscript project
- **R. Kiley (UK):** The UK PubMed Central Project (provisional title)

Plenary Session III Friday 15 September 9am – 10am

- **F. Pasleau (Belgium):** Easy access to medical literature: are users' habits changing? Is it a threat to science quality?
- **G. van den Brekel (Netherlands):** Into the user environment now! How the users have changed and how the libraries can adjust

PARALLEL SESSIONS

Parallel Session I Wednesday 13 September 15.30 – 16.30

1a Access to Publications

- **A. Parrical (Switzerland):** Use of free web resources to locate medical documents: examples taken from the CHUV library
- **F. Rump (Germany):** Searchin'? - Got the Dot Com Blues? - here is a Remedy
- **I. Le Bis, S. Devaux, G. Lewison, O. Grimaud, A.E. Clarke, A. Gatine (France):** Assessing European public health research through a bibliometric analysis: Methods used for the SPHERE project

Ib Library Informatics

- **G. Karacsony, E. Jofoldi (Hungary):** Utilizing diverse internet resources for scientific research with a metasearch clustering engine
- **P. Chalon, L. Alexandre-Joaquim, C. Naget, C. Becquart (Belgium):** Open your mind! Selecting and implementing an integrated library system: the open-source opportunity
- **B. Madge, A. Gilles (UK):** Knowledge management for primary care: a difficult case?

Ic Education and Learning

- **B. Niedzwiedzka (Poland):** Searching skills training may not be enough. Experiences from an information competency program
- **T. Heino (Finland):** Information and Communication Technology (ICT) driving license at the University of Helsinki
- **E. Padar (Hungary):** Library informatics: an online course for distance learners by the Veterinary Science Library

Id History of Medicine

- **L. Kozuma, S. Greenberg (USA):** IndexCat – content and Relevance for non-English Sources in the History of Medicine
- **A. M. Gherman (Romania):** The Romanian Enlightenment in Transylvania and in medicine
- **M. Teissier (France):** A brief history of the World Organisation for Animal Health (OIE)

Parallel Session II Thursday 14 September 14.00 - 15.30

Ila Access to Publications

- **E. Poltronieri, C. Morciano, T. Niglio, C. Sellitri, R. Solimini (Italy):** Setting-up an institutional repository at the Italian National Institute of Health: results from a survey
- **A. Chalepliglou (Greece):** Digital medical libraries: a step ahead for Open Access
- **A. Lawton (Ireland):** Creating a digital media archive of Irish health information
- **M. Wilhelm, O. van Staveren (Netherlands):** Institutional repository in a teaching hospital

Ilb Our Profession

- **K. Austveg, H. Fossum, I. M. Juul, A. Munthe (Norway):** A survey of users and non-users of a Norwegian university library
- **M. Heijmans, H. Ket (Netherlands):** Nursing the nurses' literature: challenging you to become a clinical librarian for nurses!
- **O. Riendet, L. Stefanescu (France):** The role of "information brokers" in therapeutics research
- **I. Fourie, R. Claassen-Veldsman (South Africa):** Exploring the need for current awareness services via the www: oncology nurses as example

IIc Education and Learning

- **K. Buset, S. Kvale (Norway):** Increasing information literacy at NTNU and St.Olavs hospital - Implementation of an e-learning tool
- **M. Dozier, F. Brown (UK):** Strategic contacts for curricular integration of information skills
- **I. Truccolo, G. Cognetti, W. Russell-Edu, A. Bogliolo (Italy):** Patients and cancer in the Internet age: guided pathways for diseases
- **K. Czabanowska, E. Nowak, E. Rys (Poland):** Improving English language performance of medical library professionals

II d Veterinary Group Session

- **L. Fruttini, E. Piras, I. Massirio, M. Bucciarelli, S. Guarise, L. Pitaro, E. Aliberti, A. D'Orazi, L. Lombardi, P. Gradito (Italy):** An open archive for II.ZZ.SS. publications
- **R. Iivonen, A. Uusitalo, M. Hopeakoski-Nurminen (Finland):** Mentoring in the Viikki Science Library: Case Veterinary Medicine Library
- **K. Miszori, B. Winkler (Hungary):** Children of the information society: a student survey for strategic planning
- **E. Piras, R. Clappelloni, L. Garau, S. Guarise, A. D'Orazi, M. Bucciarelli, F. Capuano, E. Aliberti, L. Lombardi, P. Gradito (Italy):** Prevention in livestock diseases in Italy: history and records

Parallel Session III Friday 15 September 10.30 - 11.30

IIIa Access to Publications

- **I. Schoedt, H. Christensen, C. Skrubbeltrang (Denmark):** How to establish good and equal access to electronic resources for health care personnel in Danish health libraries
- **J-P. Lardy, S. Dalhoumi, O. Larouk (France):** Open access at the University of Lyon: a comparative and disciplinary approach
- **M. Parakova, H. Bouzkova, J. Potomkova, E. Lesenkova (Czech Republic):** A multi-institution collaborative project filling vital information needs of biomedical research community

IIIb Information Policy

- **L. Dorrington (UK):** The development of an information policy for Imperial College London medical library
- **L. Qafoku (Albania):** The introduction of EBL principles and the start of their application in Albania
- **M. Krog (Norway):** Marketing library services – our way of doing it

IIIc Searching Tools

- **M. Della Seta, R. Cammarano (Italy):** Google Scholar and Science Citation Index: analogies and differences in citation analysis of scientific publications

- **L. Iselid (Sweden):** Critical assessment of Web of Science, Scopus and Google Scholar
- **S. Bakker (Netherlands):** Scientometric and bibliometric tools

IIId WHO Group Session

- **T. Allen (Switzerland):** Global Health Library - A WHO Initiative for Access to Health Knowledge
- **A. Dumitrescu, M. Ghitoc, D. Berluteau Tsouros (Denmark):** Electronic publishing for public health
- **T. Kaigorodova (Russia):** Guidelines on using of WHO web-resources to improve access for Russian speaking consumers

Parallel Session IV Friday 15 September 14.00 - 15.00

IVa Library Informatics

- **M. Calonge Contreras, G. Powell (UK):** The National Public Health Language
- **E. Glesenhagen, H-P. Dauben (Germany):** Trusting the evidence – the quality question
- **J. Vejvalka (Czech Republic):** Documenting the semantics of medical data

IVb Information Policy

- **I. de Kaenel (Switzerland):** Interlibrary loan and document delivery: a new deal in the "big deals" era
- **R. Ferarra, D. Gentili, V. Ponzani (Italy):** How "free" we are: Survey of the Italian policy in the document supply service
- **J. Harrison, S. Nikoi (UK):** "Click, click quick" an electronic acute services current awareness service for the NHS

IVc History of Medicine

- **J-F. Vincent (France):** History of medicine and internet at the Bibliotheque Interuniversitaire de Medecine et d'Odontologie
- **P. De Castro, M. Di Benedetto, S. Modigliani, F. Napolitani, A. M. Rossi, S. Salinetti, A. Spurio (Italy):** Preserving historical memories in scientific institutions: the experience of the National Institute of Health in Italy
- **C. Barsu (Romania):** V.L. Bologa – Founder of the Cluj medical books historical collection

IVd Our Profession

- **T. Ovaska (Finland):** The Possibilities of Horizontal Career Development and the Changing Roles of Librarians
- **D. Eskildsen Stenbaek (Denmark):** How do you nurse your journal collection?
- **J. Ginestet (Italy):** Information professional in a fast growing environment. How we are able to keep the challenge?

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THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

The Information Specialist and HTA

The Information Specialist and Health Technology Assessment: Challenges and Opportunities



Abstract

In this article we describe the challenging role of the information specialist in the Health Technology Assessment (HTA) process, from contributing with input to clarification regarding the content of the HTA, to preparing, conducting, and documenting the searches. To ensure a systematic and thorough information retrieval, close collaboration with project group members is necessary.

An HTA mainly builds upon existing knowledge from published and unpublished studies. Using literature-based documentation requires that the literature has been searched and appraised in a systematic way and that internationally approved methods of searching and appraisal have been applied.

The systematic approach implies that the literature is identified according to a detailed search strategy, that the literature is selected according to well-defined inclusion and exclusion criteria, and that the literature is appraised according to accepted methodological standards. The methods of retrieval and selection must be described, a detailed search strategy must be present, and also the methods of appraisal of strength of evidence must be described. At DACEHTA the Oxford Centre for Evidence-based Medicine Levels of Evidence are used (http://www.cebm.net/levels_of_evidence.asp)

What is Health Technology Assessment ?

Health Technology is the application of scientific knowledge in health care and prevention. **Health Technology Assessment** is a multidisciplinary process that summarizes information about the medical, social, economic and ethical issues related to the use of a health technology in a systematic, transparent, unbiased, and robust manner. Its aim is to inform the formulation of safe, effective, health policies that are patient focused and seek to achieve best value.

The goal of HTA is providing input to decision making in healthcare policy and practice. Essential attributes of HTA are:

- Orientation toward decision making
- Systematic interdisciplinary process
- Wide scope

Despite its policy goals, HTA must always be firmly rooted in research and the scientific method.

The project group and the information specialist

The information specialist is integrated in the project group appointed to make the HTA in close collaboration with the members of the project group and has the responsibility of preparing, conducting and evaluating searches. Other responsibilities of the information specialist are teaching and advisory regarding methodology and development of search protocols.

Before deciding on an HTA the information specialist is often involved in contributing with input to clarification regarding the precise content of the HTA - what other HTAs have already been made on the subject and what do they recommend? Are there some aspects of the subject, which especially needs to be dealt with?

Before starting the HTA group members may be invited to a *methodology day*, where they

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Drea Eskildsen Stenbaek, Malene Fabricius Jensen

are introduced to the principles of HTA, including the methodology of systematic literature searching and appraisal. Here the information specialist is in charge of teaching systematic search methodology.

In some cases the information specialist does all the searches, in other cases one of the group members with experience in literature searching is appointed as literature searcher for some or all aspects of the HTA. The information specialist then has a teaching and advisory role regarding choice of relevant databases and information sources and development of search strategies.

The information searching process

The process involves the following steps: asking answerable focused questions, choosing relevant databases and information sources, developing a search strategy for each source, evaluating the search, keeping a search protocol, selecting literature according to well defined inclusion and exclusion criteria, and appraising the literature.

The starting point is always a number of focused questions designed to answer the HTA problem. To answer for example the question of "what is the effect of screening for colorectal cancer?" e.g. the following focused question (one out of many) could be asked: "does faecal occult blood screening reduce mortality from colorectal cancer in adults compared with no screening?". A well formulated question is crucial in order to determine the best search strategy and it comprises the following elements: the population (what type of patients are we talking about?), the intervention (is it a diagnostic test, a pharmaceutical, a surgical method etc.?), the intervention of comparison (what is the alternative?) and the outcome (what are the effects and the consequences of

the intervention?). Questions related to non-clinical aspects also should aim to be well formulated, e.g. *what factors determine the extent of lifestyle changes achievable in patients recently diagnosed with type 2 diabetes?*

The purpose of the focused questions is to delimit the literature search, keep focus when looking through and sorting the abstracts, keep focus when reading and appraising the literature, and make sure that the questions are satisfactorily answered.

The focused questions are discussed and agreed upon within the project group. The information specialist attends these discussions in order to be as well prepared as possible to design the best search strategy. It is also decided what are the inclusion and exclusion criteria for the literature selection (e.g. age, publication types, publication years), as these criteria can often be built into the search strategy, thus giving a more precise search result less overwhelming in numbers of hits. Often it is necessary to maintain correspondence with the group members in between meetings, as not all questions/problems can be foreseen before starting the searches. It is important at these meetings to ensure that both the information specialist and the project group members have the same understanding of the purpose, the extent and the time limits of the searches.

The first step in the search process is to identify evaluated research, i.e. research that has been subjected to selection according to specified search criteria, critical appraisal, addition of commentary or interpretive material, and combined with other research to provide state-of-the-art summaries of clinical effectiveness with links back to the original research evidence (e.g. HTA, clinical guidelines, meta-analyses, systematic reviews).

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The Information Specialist and HTA

If evaluated research does not exist, does not fully answer the questions, is not of high enough quality or is not up-to-date, the second step is to identify the original research/primary studies (e.g. individual randomized controlled trials, cohort studies etc.).

Examples of sources for identifying evaluated research

The Health Technology Assessment database

<http://www.york.ac.uk/inst/crd/crddatabases.htm>

National HTA agencies (list of agencies can be found at **www.inahta.org**)

The Cochrane Library (**<http://www3.interscience.wiley.com>**)

G-I-N Guidelines International Network (**<http://www.g-i-n.net/>**)

TRIP+Database (**<http://www.tripdatabase.com>**)

Search protocol

During the search process it is the responsibility of the information specialist to keep a search protocol, which is a structured plan for the retrieval of information. The search protocol should include the focused questions, the chosen information sources (databases, websites etc.), the inclusion and exclusion criteria, the detailed search strategy and search results of each source/database, and the criteria/strategy for selection of the literature. The purpose of the search protocol is to create an overview of the literature retrieval process, to act as documentation of what has been done, when and how, why specific studies have (not) been found, and to ensure consistency when repeating/following up on the search. The overall rule is that the search must be reproducible.

Conclusion

Being an information specialist working in the field of HTA includes working in multidisciplinary teams. This means challenges as well as benefits for us as information specialists! We must know about the basic principles of scientific areas such as critical appraisal, epidemiology, scientific research processes, but we must also know about the structure of the health care systems in our countries as well as the decision making processes. Hereby we will be partners in the projects instead of passive providers of information. Information skills will thus be further integrated into the process of HTA as well as the scientific and clinical settings within health care.

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Additional information about HTA

Additional information about Health Technology Assessment

HTA in Denmark

In Denmark HTA was introduced at the beginning of the 1980's, but not many HTA activities were seen until the middle of the 1990's. The National Strategy for Health Technology Assessment was published in 1996 and the following year the Danish Institute for Health Technology Assessment (DIHTA), now the Danish Centre for Evaluation and Health Technology Assessment (DACEHTA), was established.

The aim of DACEHTA is to implement the intentions of the National Strategy for Health Technology Assessment from 1996 with the key goal to build HTA into planning and management of health care at all levels.

Read more at www.dacehta.dk

INAHTA

The International Network of Agencies for Health Technology Assessment (INAHTA) was established in 1993 and has now 43 member agencies from 21 countries. Current Chair of INAHTA is Prof. Finn Børllum Kristensen (Danish Centre for Evaluation and Health Technology Assessment, DACEHTA).

Read more at www.inahta.net

HTAi

Health Technology Assessment International (HTAi) is the scientific society for HTA. HTAi provides the key forum for all those from the worlds of health care, academia and business interested in the science, development and application of HTA. Current President of HTAi is Dr. Berit Mørland (The Norwegian Centre for Health Technology Assessment)

Read more at www.htai.org

HTAi-IRG

The Information Resources Group (IRG) is one of several interest groups of HTAi. The IRG has about 90 members working with or interested in information and documentation aspects of HTA. Current Chair is Information Specialist Becky Skidmore (Canadian Agency for Drugs and Technologies in Health, CADTH). The IRG has been active in developing, collaborating on and promoting information retrieval methods and technologies appropriate to HTA. It was responsible for developing the E-text on HTA Information Resources published by NLM (<http://www.nlm.nih.gov/nichsr/ehta/>). Many IRG members authored chapters in this electronic textbook. One of its current initiatives is the HTAi Vortal (the vortal is in the preliminary stages of development, www.htai.org/vortal). Each year at the HTAi annual conference, the IRG offers a pre-conference workshop aimed at providing ongoing training to HTAi/IRG members as well as to other health librarians/professionals.

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EUnetHTA



EUnetHTA - The First European Network to Assess Health Technology

In 2004 the European Commission and Council of Ministers targeted HTA as *a political priority*, recognising *...an urgent need for establishing a sustainable European network on HTA*. A Commission's call was answered by a group of 35 organisations throughout Europe. European Network for Health Technology Assessment, EUnetHTA, coordinates the efforts of 27 European countries including 24 Member States of the European Union in evaluating health technology in Europe.

HTA brings together scientific evidence to inform policy makers, clinicians, and the public on safety, effectiveness and cost of health technology. Most European countries have public agencies to evaluate health technologies; these bodies engage in Health Technology Assessment.

EUnetHTA will create a win-win situation for all parties

Since different countries in Europe use largely similar methods in health care, they often spend time and money assessing the same technologies. The general strategic objective of EUnetHTA is to connect public national HTA agencies, research institutions and health ministries, enabling effective exchange of information and support to policy decisions by the Member States. EUnetHTA will develop an organisational framework for a sustainable European network for HTA and also practical tools to fit into this framework.

EUnetHTA aims to reduce the overlap and duplication of efforts and hence promote a more effective use of resources; to increase the HTA output and input to decision-making in the Member States and EU and hence increase the impact of HTA; to strengthen the link between HTA and healthcare policy making in the EU and Member States; and to support countries with limited experience with HTA. EUnetHTA will thus help to avoid much of duplication of work through structured sharing of the scientific evidence that agencies in the network have compiled already. Greater opportunities to coordinate studies across Europe will also generate new evidence.

A 3 year project, 60 organisations, 8 work packages

The EUnetHTA project started its activities on January 1, 2006. The partnership involves 59 organisations: 35 Associated Partners - including Main Partner (DACEHTA), and 24 Collaborating Partners.

In total, 31 countries are participating in the project. Inside Europe: 24 EU countries, Norway, Iceland and Switzerland; outside Europe: Australia, Canada, Israel, USA.

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The project is divided in 8 work packages (WP's):

- WP 1, lead by DACEHTA (Denmark), is devoted to the coordination of the project.
- WP 2, lead by SBU (Sweden) and DAHTA@DIMDI (Germany), will support the project communication.
- WP 3, lead by NOKC (Norway), will be in charge of the evaluation of the project.
- WP 4, lead by FinOHTA (Finland), will focus on common core of HTA.
- WP 5, lead by NCCHTA (United Kingdom), aims to apply common core information and adapt existing HTAs into local/national setting.
- WP 6, lead by DACEHTA (Denmark), will ensure the evaluation of the transferability of HTA to health policy.
- WP 7, lead by HAS (France), will ensure the monitoring emerging/new technology development and prioritization of HTA.
- WP 8, lead by CAHTA (Spain), will set up a system for support of countries without institutionalized HTA

Initially, the EUnetHTA project is being co-financed by the European Commission (DG Sanco) and contributions from network members. The network is expected to continue sustainable operations following the 3-year project grant from the Commission.

Stay tuned with EUnetHTA

Progress reports and information on EUnetHTA activities involving a wider stakeholder group will be continuously available on **www.eunethta.net**

A EUnetHTA Conference presenting the project results and future plans will be held in November 2008.

For more information, please contact the EUnetHTA secretariat at:

Phone: +45 7222 7548

e-mail: eunethta@sst.dk

URL: www.eunethta.net.

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THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

HTA in Italy: Past Experiences and Perspectives



ABSTRACT

Health Technology Assessment (HTA) is a multidisciplinary field of research that provides information based on scientific criteria to support health policy decisions at different levels: national institutions, health organizations, and clinical practice. In the field of HTA the term 'technology' is very comprehensive and includes, among others, evaluating equipment, intervention protocols, computer science applications, organizational systems and managerial tasks. The aim of this article is to present the areas of application, the

methods and the main experiences of HTA in Italy. In particular, it will illustrate the nation-wide project named OPT (Osservatorio dei Prezzi e delle Tecnologie - Technology and Expenditures Observatory) and the constitution of a network among ten representative Italian institutions, including the Istituto Superiore di Sanità. Finally, we will discuss the so called *Carta di Trento*, a programmatic agreement among the members of the above mentioned network covering the main principles of the health technology assessment in Italy.

Health Technology Assessment, introduced in the late 70's in the United States, aims at estimating the effectiveness and the efficiency of biomedical technologies: this concept is very comprehensive and includes, among others, evaluating equipment, intervention protocols, computer science applications, organizational systems and managerial tasks.

The importance of HTA has been lately recognized by the European Commission ([1],[2],[3]) and in 2004 a pilot project was co-financed (EUnetHTA, European Network for Health Technology Assessment[4]) to coordinate the efforts of 35 European partner organizations:

To establish an effective and sustainable European Network for Health Technology Assessment that informs policy decisions.

In Italy one of the first nation-wide experience on health technology evaluation has been carried out since 1996 by the Friuli-Venezia Giulia Region, under a project named OPT (Osservatorio dei Prezzi e delle Tecnologie - Technology and Expenditures Observatory) funded by the Ministry of Health. This project had considerable success, and its operation was subsequently taken over in 2005 by the ASSR (Agenzia per i Servizi Sanitari Regionali - the Government Agency for the coordination of regional health services)

Among the main tasks, OPT developed and kept up-to-date a Technology Data Base (named BDTB, Banca Dati Tecnologie Biomediche) that can be accessed through the Web (<http://opt1.area.trieste.it>) by all the National Health Services hospitals and branches. The BDTB containing bulletins & detailed technical reviews on a number of medical devices and technologies, and several purchase information (on prices, accessories, consumables) based on the yearly survey of tender purchasing events on participating hospitals.

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Francesco Martelli, Daniela Armocida

All biomedical technologies are classified by an encoding system called CIVAB, the use of which has been widespread in Italy since its introduction in the late 80's, made up of an 8-character coded string (XXX JJJ YY) the meaning of which is:

1. class of technology (XXX). Example: ECT = ecotomograph;
2. manufacturer (JJJ);
3. the specific model (YY).

As an example, the following table shows the number of products in the database (as of March, 2005)

Table 1. Number of products in the HTA database

Technology group	Class	Manufacturer	Models
Biomedical Equipment	825	3,114	47,981
Reagents for analytical instruments	459	785	52,982
Angiographic catheters	41	22	4,904
Dialysis filters	1	24	737
Radiographic films	46	13	5,203
PaceMakers	1	14	662
Implantable defibrillators	1	7	100
Orthopedic prostheses	17	65	3,933
TOTAL	1,391	4,044	116,502

This database is one of the most widespread available in Europe in its kind, and every year a *yearbook* is released for each Technology Group in the table, containing an organized list of makes, models and characteristics.

In the last two years a project has been funded by the Italian Ministry of Health ("Promozione di un network di collaborazione per la diffusione delle metodologie di Health Technology Assessment per la gestione delle tecnologie nelle aziende sanitarie") to promote the development of a nation-wide HTA network with the aim of spreading the use of technology assessment and developing a sustainable national reference model. Players in this network are research institutions, hospitals and universities with previous experience in HTA (see Table 2).

Comparing this network, in which the Istituto Superiore di Sanità has an active involvement, with those already existing in Europe (e.g. Swiss and Austrian networks), the Italian one is more committed on the use of Health Technology Assessment as a management support tool, both on a decision makers level and on hospital manager's perspective.

A short-term effect of the birth of the Italian network has been an increased visibility, on the international scenario, of HTA activities carried on in Italy: in 2005 the Second International

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HTA in Italy: Past Experiences and Perspectives

Table 2. Research institutions, hospitals and universities participating in the Italian HTA network

U.O.	ISTITUZIONE	STRUTTURA
UO 1	Regione Molise, Assessorato alla Sanità	Osservatorio Regionale per le Tecnologie biomediche
UO 2	Università Cattolica del Sacro Cuore Roma	Policlinico universitario "A. Gemelli" - Unità di Valutazione delle Tecnologie
UO 3	Azienda Socio Sanitaria n. 2 Isontina	Direzione Sanitaria
UO 4	IRCCS Policlinico "S. Matteo" di Pavia	Servizio di ingegneria clinica
UO 5	Azienda Provinciale per i Servizi Sanitari di Trento	Direzione Generale
UO 6	Università "G. 'Annunzio" di Chieti	Sezione di Epidemiologia e Sanità Pubblica, Dip. Di Medicina e Scienze dell'Invecchiamento
UO 7	Istituto Superiore di Sanità	Dipartimento delle Tecnologie Biomediche
UO 8	Agenzia per i Servizi Sanitari Regionali	Sezione Innovazione, Sperimentazione e Sviluppo
UO 9	IRCCS Casa Sollievo della Sofferenza, Opera Padre Pio	Servizio di Ingegneria Clinica
UO 10	Regione Lombardia	Direzione Generale Sanità

Meeting of HTAi (Health Technology Assessment international) was held in Rome, where the ISS (Istituto Superiore di Sanità, which is the main technical-scientific organ of the Italian National Health Service) presented research on the structure and the organization of 24 leading HTA Agencies in Europe, Americas and Australia [5].

More recently, during the First Italian Forum on Health Technologies (held in Trento, January 19-21, 2006) the network summarized on a paper named Carta di Trento a programmatic agreement covering the main principles of health technology assessment in Italy:

1. Technology Assessment should involve all the parties involved in health care delivery (*Who*)
2. The assessment should be carried on all the elements and topics involved in the health care delivery process (*What*)
3. Health Technology Assessment should involve and affect all managerial levels and structures involved in the health care delivery process (*Where*)
4. Health technologies should be assessed throughout their entire lifecycle, i.e. before, during and after their introduction in real practice (*When*)
5. Health Technology Assessment is both an opportunity and a need for the integrated governance of health care systems and of the structures they are built of (*Why*)

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Francesco Martelli, Daniela Armocida

6. Health Technology Assessment is an inherently multidisciplinary process, and should be carried on coherently with other processes (medical, technical, administrative) running in the health care systems and of the structures they are built of (*How*)

Even more recently, the activities carried on by the Italian Network received an implicit acknowledgement with the publication by the Ministry of Health of the 2006-2008 National Health Plan [6], which recognizes Health Technology Assessment as a strategic tool for the evaluation of the technological and scientific progress, stating:

... [HTA] aims to inform the decision makers on the technological choices, using the best available scientific evidence on the impact and the medical, social, economical and ethical implications on health expenditures and investments. Those methodologies are indispensable for the assessment of high technologies, their related high costs and management issues, their rational distribution over the country, and to avoid unnecessary duplication or serious deficiency on health care investments.

In Italy, health is constitutionally recognized as a right of the individual and a collective wealth, and the health care system is almost totally financed with public funds. The low growth of the gross domestic product in the last ten years has threatened the sustainability of the growth of national health expenditure, which is consistent with other OECD (Organisation for Economic Co-operation and Development) member countries data, but in excess to the life cost increase in the same years. This situation is not sustainable in the long term, and can be dealt both with a managed increase in the national health expenditure and using tools designed to increase efficiency in resource utilization. Health Technology Assessment is a promising tool in this field, and we look forward to its widespread utilization in Italy.

Francesco Martelli

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- [3] Decision No 1786/2002/Ec of the European Parliament and of the Council of 23 September 2002 adopting a programme of Community action in the field of public health (2003-2008)
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THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

Bundesgesundheitsblatt 49 (3) 2006



**Bundesgesundheitsblatt - Gesundheitsforschung - Gesundheitsschutz
2006; 49(3)**

Health Technology Assessment: Sauerstoff des Gesundheitswesens. pp. 223-224.

Health Technology Assessment -- Was verbirgt sich dahinter? pp. 225-232.

Gerhardus A. Die Rolle von HTA-Berichten im deutschen Gesundheitswesen. pp. 233-240.

Francke R, Hart D. HTA in den Entscheidungsprozessen des IQWiG und G-BA. pp. 241-250.

Sauerland S. Die Kritische Rolle wissenschaftlicher Evidenz im Rahmen von Health Technology Assessment. pp. 251-256.

Kulp W, Greiner W. Gesundheitsökonomie und HTA. pp. 257-263.

Behrens T, Ahrens W. Epidemiologische Studien als Teil des HTA-Bewertungsprozesses. pp. 264-271.

Lange S. Die Rolle randomisierter kontrollierter Studien bei der medizinischen Bewertung von Routineverfahren. pp. 272-277.

Perleth M, Lühmann D, Antes G. Das Deutsche Netzwerk Evidenzbasierte Medizin DNEbM. pp. 278-282.

Kristensen F, Chamova J, Hansen N. Toward a sustainable European Network for Health Technology Assessment. pp. 283-285.

With a series of articles containing appealing (sub)titles, such as: *Oxygen for the Health System*, *What is Behind?*, *The Critical Role of HTA*, issue 3 of the **Bundesgesundheitsblatt** March 2006 merits the effort of laying your hands on and reading. Nine articles and an editorial introduction give an overview of what can be expected of Health Technology Assessment and what it is all about.

For librarians and management this issue gives answers to the things you never dared to ask, as it seems everybody else knows all about HTA. HTA: *A form of policy research of the short- and long-term consequences of technology use and usage* (D. Banta). In this way HTA is meant to support policy decisions and takes a rather scientific approach. With the broadening of HTA activities, e.g. DIMDI (Deutsches Institut für Information und Dokumentation = German Institute for Information and Documentation) in the role of the German Office of HTA (Deutsche Agentur für HTA = DAHTA), the Institute of Quality and Economics (or efficiency) in the Health System and the many health-related programs and curricula in the universities, all together mean a recognition and a demand for science-based medical practice and medical procedures, with respect to technologies as well as to health policy decision making.

THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

Suzanne Bakker

HTA in itself has a multidisciplinary approach and aims towards systematic and transparent statements on medical practice and technology in different aspects: medical, economical, social, legal, cultural and ethical aspects.

The article by Gerhardus deals with the question of the impact of HTA-products. Like all other scientific results the outcome of HTA should be evaluated. Results of HTA activities could be both assessment and appraisal: where it is understood that assessment leads to knowledge and appraisal to decisions. With the introduction of HTA, it is no longer the medical criteria alone that lead to decisions, but cost-effectivity and/or cost-benefit ratios are taken into account as well. On different levels of of policy and decision making HTA has its effect: at the government level, for politicians, but also for hospital mangement, individual medical practitioners and patients. Guidelines and clinical pathways can be seen as side-products of HTA. The author concludes that the potential of HTA reports is much more extensive and complex than has been generally assumed. It is recommended that in HTA a stepwise procedure should be followed, comprising the involvement of the groups concerned, the explicit inclusion of impact objectives in all HTA reports and the subsequent evaluation of effect produced.

HTA is embedded in legal regulations regarding datadase-supported information systems for the evaluation of effects, effectivity and costs of medical practice and technology. Therefore two new institutions have been established in Germany: the Federal Joint Committee and the Institute for Quality and Efficiency in Health Care.

HTA can be seen as part of the global evidence-based medicine (EBM) movement: its aim is to improve standards in health care, to strengthen scientific principles and to reduce subjectivity and bias in decision making. EBM and HTA use similar methodologies and make use of comparable hierarchies of levels of evidence.

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THEME ISSUE - HEALTH TECHNOLOGY ASSESSMENT

The HTAi - IRG 2006 Annual Workshop

Putting Evidence to Work: Evidence-Based HTA Librarianship

Make the IRG pre-conference workshop part of your annual HTAi (www.htai.org) meeting plans! Join us down under in Adelaide, Australia on Sunday July 2nd for a great day of training and lively discussions.

This full-day workshop includes presentations from a variety of speakers plus interactive sessions highlighting important topics in this field.

Hear these well-known speakers!

Carol Lefebvre, from the UK Cochrane Centre in Oxford, will speak about the re-design of the Cochrane Highly Sensitive Search Strategy for identifying randomized controlled trials in MEDLINE. Additionally, Carol will speak about the UK InterTASC Information Specialists' Subgroup's work on developing a web site for and critically appraising search filters.

Catherine Voutier, from the Centre for Clinical Effectiveness, Monash Institute of Health Services Research, will give an overview of HTA information activities in Australia and New Zealand.

Malene Fabricius Jensen, from DACEHTA in Denmark, will present work on a checklist developed for evaluating literature search methodologies in HTAs. The presentation will include discussion on the usefulness of such a resource.

Anne Parkhill of Aptly Information Design in Australia, will lead an interactive session on evidence-based work she has done regarding the effectiveness of different training methods for information management skills in the occupational medicine field.

Andrew Booth of the School of Health & Related Research (SchARR) at the University of Sheffield will give a full afternoon session. Andrew is internationally known for his work on evidence-based library and information practice. He is the creator of *Netting the Evidence* and author of the chapter *Evidence-Based Perspectives on Information Access and Retrieval* in the multi-author work, *Evidence-Based Practice: a Handbook for Information Professionals*. Andrew's session will examine the evidence base of information retrieval methods and is likely to raise some challenges to current approaches.

Join us on Sunday, July 2nd from 9-5 in the lecture theatre of the historic Institute Building in the State Library of South Australia on North Terrace. Registration and Coffee begin at 8:30 AM.

There is no charge for participants attending the full HTAi conference. For those attending the workshop only there is a charge of AU \$150 for workshop. Registration includes any distributed workshop materials, morning and afternoon breaks, and lunch. Full details regarding conference registration are available at <http://www.htai.org/australia-2006/>

For more information, contact Becky Skidmore, IRG Chair (beckys@cadth.ca) or Susan Bidwell (susan.bidwell@chmeds.ac.nz).

INTERNET PAGE

Benoit Thirion



Substance Abuse: MeSH terms, Indexed Journals, Guidelines & Directories

The PubMed subsets (http://www.nlm.nih.gov/bsd/pubmed_subsets.html) are far from covering all the medical specialities. In

a brief series, the Internet Page of JEAHIL will attempt to compensate for this deficiency by indicating MeSH terms (as well as journals and major web sites) concerning the different medical specialities.

1. MeSH terms & Their Scope Notes (unique or "parent" headings)

1. Alcohol Deterrents

Substances interfering with the metabolism of ethyl alcohol, causing unpleasant side effects thought to discourage the drinking of alcoholic beverages. Alcohol deterrents are used in the treatment of alcoholism.

2. Alcoholics Anonymous

An organization of self-proclaimed alcoholics who meet frequently to reinforce their practice of abstinence.

3. Behavior, Addictive

The observable, measurable, and often pathological activity of an organism that portrays its inability to overcome a habit resulting in an insatiable craving for a substance or for performing certain acts. The addictive behavior includes the emotional and physical overdependence on the object of habit in increasing amount or frequency.

4. Needle-Exchange Programs

Organized services for exchange of sterile needles and syringes used for injections as a potential means of reducing the transmission of infectious diseases.

5. Smoking

Inhaling and exhaling the smoke of tobacco or something similar to tobacco.

6. Street Drugs

Drugs obtained and often manufactured illegally for the subjective effects they are said to produce. They are often distributed in urban areas, but are also available in suburban and rural areas, and tend to be grossly impure and may cause unexpected toxicity.

7. Substance Abuse Detection

Detection of drugs that have been abused, overused, or misused, including legal and illegal drugs. Urine screening is the usual method of detection.

8. Substance Abuse Treatment Centers

Health facilities providing therapy and/or rehabilitation for substance-dependent individuals. Methadone distribution centers are included.

9. Substance-Related Disorders

Disorders related to substance abuse, the side effects of a medication, toxin exposure, and ALCOHOL-RELATED DISORDERS.

10. Tobacco Smoke Pollution

Contamination of the air by tobacco smoke.

11. Tobacco Use Cessation

Cessation of the habit of using tobacco products for smoking or chewing, including the use of snuff.

These terms may be used to create a strategy in PubMed with the help of MyNCBI, such as: alcohol deterrents OR alcoholics anonymous OR behavior, addictive OR needle-exchange programs OR smoking OR street drugs OR substance abuse detection OR substance abuse treatment centers OR substance-related disorders OR tobacco smoke pollution OR tobacco use cessation

INTERNET PAGE

Substance Abuse: MeSH terms, Indexed Journals, Guidelines & Directories

Or go to URL: <http://substance-abuse-in-pubmed.notlong.com>

See Also: Alcoholic Beverages, Designer Drugs, Drug and Narcotic Control, Temperance & Tobacco Industry.

2. Journals:

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

Addiction (Abingdon, England).

Addiction biology.

Addictive behaviors.

Alcohol (Fayetteville, N. Y.)

Alcohol and alcoholism (Oxford, Oxfordshire).

Alcohol and alcoholism (Oxford, Oxfordshire). Supplement.

Alcohol research & health: the journal of the National Institute on Alcohol Abuse and Alcoholism.

Alcoholism, clinical and experimental research.

The American journal of drug and alcohol abuse.

The American journal on addictions / American Academy of Psychiatrists in Alcoholism and Addictions.

Bulletin on narcotics.

Drug and alcohol dependence.

Drug and alcohol review.

European addiction research.

Journal of addictive diseases: the official journal of the ASAM, American Society of Addiction Medicine.

Journal of drug education.

Journal of psychoactive drugs.

Journal of studies on alcohol.

Journal of studies on alcohol. Supplement.

Journal of substance abuse treatment.

NIDA research monograph.

Nihon Arukoru Yakubutsu Igakkai zasshi = Japanese journal of alcohol studies & drug dependence.

Psychology of addictive behaviors: journal of the Society of Psychologists in Addictive Behaviors.

Recent developments in alcoholism: an official publication of the American Medical Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism.

Substance abuse: official publication of the Association for Medical Education and Research in Substance Abuse.

Substance use & misuse.

Tobacco control.

See Also: Substance Abuse Treatment, Prevention and Policy: <http://www.substanceabusepolicy.com>, from BioMed Central.

3. Directories & Guidelines

1. MedlinePlus (USA):

Substance Abuse Problems Topics
<http://www.nlm.nih.gov/medlineplus/substanceabuseproblems.html>

2. NGC National Guideline Clearinghouse (USA):

Substance-Related Disorders <http://www.guideline.gov/browse/browsemode.aspx?node=34809&type=1&view=all>

3. Omni (UK) :

Substance-Related Disorders <http://omni.ac.uk/browse/mesh/D019966.html>

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

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

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PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda



Dear Colleagues,

Once again peer review and the impact factor are under discussion.

Authors make every effort to get their results accepted by top journals but more than 200 reviewers identify an average of only two errors (A. McCook, *The Scientist*, 2006, 20, 26) and peer review is not capable of catching fraudulent science (E. Marris, *Nature*, 2006, 439, 520). In a paper presented at the 2005 International Congress on Peer Review and Biomedical Publication, a prospective review of 1,107 manuscripts submitted to the *Annals of Internal Medicine*, *British Medical Journal* and *The Lancet* in 2003 showed that many major changes to the text demanded by peer review included toning down the manuscript's conclusion and highlighting the paper's limitations (A. McCook, *The Scientist*, 2006, 20, 26). Apparently it is time for a change: three medical journals *The Lancet*, *Annals of Internal Medicine* and *BMJ* allowed the videoing of editorial meetings and the researchers to see all relevant paperwork including confidential reports (J. Giles, *Nature*, 2006, 439, 252).

It is well known that the Impact Factor (IF) measures the numbers of citations per paper. Page Rank algorithm (PR) can be applied to research publications by analysing how many times those who cite a paper are themselves cited. IF measures crude popularity, PR is a measure of prestige. A current proposal is counting the two metric ranking journals

according to the product of IF and PR, a new measure called Y-factor (P. Ball, *Nature*, 2006, 439, 770).

JOURNAL ISSUES

Since the Journal of EAHIL issue in February 2006, the following Health Information and Libraries Journal has been received: Vol. 23, 2006, n. 1

Vol. 23 n. 1

Health information and Libraries Journal embarks on having and impact factor. p. 1. Editorial.

S. Golder, H. M. McIntosh, S. Duffy, J. Glanville. Developing efficient search strategies to identify reports of adverse effects in Medline and Embase. p. 3-12.

The objective of this study was to assess the performance, in terms of sensitivity and precision, of five different approaches to searching Medline and Embase to identify studies of adverse effects.

S. Leung, K. Chan, L. Song. Publishing trends in Chinese medicine and related subjects documented in WorldCat. p. 13 - 22.

This study is designed to analyse the publishing trends of Chinese medicine and related subjects ranging from books and serials to audio-visual and electronic resources found in WorldCat the database produced by OCLC.

B. Sen. Market orientation: a concept for health libraries. p. 23 - 31.

PUBLICATIONS AND NEW PRODUCTS

Books review

The aim of this study was to gain an understanding of the concept of market orientation relative to the health library sector.

N. Pearce-Smith. A journal club is an effective tool for assisting librarians in the practice of evidence-based librarianship: a case study. p. 32 - 40.

Attending the Journal Clubs help librarians to develop appraisal skills and write a critically appraised topic.

V. Haigh. Clinical effectiveness and allied health professionals: an information needs assessment. p. 41 - 50.

The purpose of this study was to determine the information needs and support required by AHPs whilst building services based on clinical effectiveness.

C. Honeybourne, S. Sutton, L. Ward. Knowledge in the Palm of your hands: PDAs in the clinical setting. p. 51 - 59.

A descriptive study comparing aspects of Personal Digital Assistant (PDA) resource to explore the impact on patient care.

Brief communications p. 60.

BOOKS REVIEW

E-Metrics for Library and Information Professionals. How to use data for managing and evaluating electronic resource collections. Eds. A White and E.D. Kamal. The Facet Publishing London (UK); 2006. £ 39.95, ISBN 1-85604-555-2; pp. 249. This book

shows how to use e-metrics to measure library performance and value and how to effectively use the electronic data captured from various network activities to manage library collections, budgets, and services. Using e-metrics, the authors identify expensive and underused digital resources, visualise virtual user behaviour patterns, and construct new collection development strategies.

Biomedical Organizations. A worldwide guide to position documents. Ed. D.A. Stirling. The Haworth Information Press, Binghamton, N.Y. USA 2006. \$34.95 soft, ISBN-13: 978-0-7890-2298-1; \$49.95 hard, ISBN-13: 978-0-7890-2297-4; pp. 302. This book lists medical organizations, and their web site address and presents an alphabetical index of their position statements.

Law, Libraries and Technology. A practical Guide Ed. M. Van Hoorebeek. Chandons Publishing Oxford, UK, 2005; £ 55.00 Hardback ISBN 1-84334-072-0.; pp. 164. This book provides an authoritative and practical guide to the subject of copyright and intellectual property law providing a European and British perspective. It help libraries and librarians to be aware of the legal ramifications of the new technologies that are available.

Metadata. A cataloger's primer. Ed. R. P. Smiraglia. The Haworth Information Press, Binghamton, N.Y. USA 2005. \$39.95 soft, ISBN-13: 978-0-7890-2801-3; \$59.95 hard, ISBN-13: 978-0-7890-2800-6; pp.303. This book provides work forms, work plans and practical examples that demonstrate the

PUBLICATIONS AND NEW PRODUCTS

Giovanna F. Miranda

application of metadata for resource description and depository development.

PAPERS REVIEW

Is peer review broken?

A. McCook. *The Scientist* 2006, 20 (2), 26

Journals submit to scrutiny of their peer-review process

J. Giles. *Nature*, 2006, 439, 252

Should journals police scientific fraud?

E. Marris. *Nature*, 2006, 439, 520

Prestige is factored into journal ratings.

P. Ball. *Nature*, 2006, 439, 770

Searching for the right search - Reaching the medical literature

R. Steinbrook. *New England Journal of Medicine*, 2006, 354, 4

Pertinence in the eye of the user

P. Jacsó. *Online Information Review*, 2006, 30 (1), 70

INFORMATION SOURCES... WEB BASED

Wild life disease Information Node. These and other situations emphasize the need for comprehensive wildlife disease information in order to build a foundation to facilitate strategic planning and actions to protect human health.

<http://wildlifedisease.nbi.gov/index.jsp>

Pandemicflu.gov. This site managed by the Department of Health and Human Services is a one-stop access to U.S. Government avian and pandemic flu information.

<http://www.pandemicflu.gov/>

NEWS FROM PUBLISHERS

British Library Searches on Google Scholar include links to the British Library's document delivery service. Search results are matched against the Library's holdings and where a match is made, users will have the option to obtain articles held via the British Library's online document ordering interface, British Library Direct <http://www.bl.uk>

EBSCO and WebFeat announce a partnership that will allow the federated search engine WebFeat Express to be sold as an add-on product to EBSCO's online title listing service EBSCO A-to-Z®. WebFeat Express is a streamlined version of the original WebFeat federated search engine. Designed to appeal to the budgets and administrative demands of small to medium-size libraries, WebFeat Express allows clients to handle federated search configuration with minimal effort using WebFeat's intuitive admin module.

<http://www.ebsco.com>

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PUBLICATIONS AND NEW PRODUCTS

Forthcoming Events

FORTHCOMING EVENTS

4th-10th June, 2006, San Miniato, Tuscany (Italy)

Digital Preservation in Digital Libraries: Emerging Approaches

DELOS Summer School on Preservation 2006

For further information: <http://www.dpc.delos.info/ss06/>

11-14 June 2006, Baltimore, MD, USA

SLA Annual Conference

For further information: <http://www.sla.org/content/Events/conference/ac2006/index.cfm>

4-7 July 2006, Vienna (Austria)

Knowledge Organization for a Global Learning Society

Ninth International ISKO Conference

For further information: <http://isko.univie.ac.at/cms2/index.php>

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/groups/hlg/conf2006/index.html>

2-5 July 2006, Adelaide, Australia

3rd Annual Meeting of Health Technology Assessment International (HTAi)

International society for the promotion of health technology assessment (HTA).

For further information: <http://www.htai.org/australia-2006>

20-24 August 2006, Seoul, Korea

Libraries: Dynamic Engines for the Knowledge and Information Society.

World Library and Information Congress: 72nd IFLA General Conference and Council.

For further information: <http://www.ifla.org/IV/ifla72/index.htm>

11-16 September 2006, Cluj-Napoca, Romania

10th European Conference of Medical and Health Libraries

For further information: <http://www.eahil.confcluj.ro/>

17 - 22 September 2006, Alicante, Spain

10th European Conference on Research and Advanced Technology for Digital Libraries

For further information:

<http://www.ecdl2006.org>

16-17 October 2006, London, UK

Internet Librarian International 2006

For further information: <http://www.internet-librarian.com/index.shtml>

13-20 October 2006, Toronto Canada
MEDNET 2006

11th World Congress on Internet in Medicine

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

12-15 November, Lisbon, Portugal

Pharma-Bio-Med 2006

The international conference and exposition for Information Specialists and Managers

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

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LIST OF NEW EAHIL MEMBERS 2006

Members registered between 6 February and 21 April

Mrs. Kostallari Papadhopulli	RR.Bajram Curri, Tirana	Albania	Mr. Filip Kriz	National Medical Library, Prague	Czech Republic
Mrs. Martine Ackermans	Hopital Vincent Van Gogh Marchienne-au-Pont	Belgium	Mrs. Jarmila Pirnerova	Charles University, Faculty of Pharmacy, Prague	Czech Republic
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Miss. Florence Willem	Bibliotheque de médecine vétérinaire, Liege	Belgium	Mrs. Karine Korsgaard	Amtssygehuset i Glostrup	Denmark
Ms. Bernadette Claus	Wetenschappelijk Instituut Volksgezondheid, Bruxelles	Belgium	Mrs. Trine Lacoppidan Kæstel	Forensic Psychiatry Clinic, Min. of Justice, Copenhagen	Denmark
Mr. Frederic Hameleers	Université Libre de Bruxelles	Belgium	Mrs. Ulla Bay	Hillerød Sygehus	Denmark
Mrs. Christine Lanners	UCL-Université Catholique de Louvain	Belgium	Ms. Jette Frost Jepsen	Medical Library, Aalborg Hospital	Denmark
Mrs. Michel Maas	Bibliotheque des Sciences de la Vie, Univ. Liege	Belgium	Mrs. Jette Bojesen	Library, School of Nursing, Holstebro	Denmark
Dr. Christophe Schuermans	Janssen-Cilag S.A./N.V., Antwerp	Belgium	Mrs. Charlotte Løvenhardt Sørensen	University College Øresund	Denmark
Mrs. Raymonde Charlier	UCL - Catholic University of Leuven	Belgium	Ms. Jane Koch	Psykiatrisk Center, Glostrup	Denmark
Mr. Benoît Kints	DSAA , ULB - Bibliotheque de Médecine, Bruxelles	Belgium	Miss. Birgitta Vikström	Danish School of Midwifery, Copenhagen	Denmark
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Mr. André Meunier	Bibliotheque des Sciences de la Vie, Univ. Liege	Belgium	Mrs. Riitta Grahn	STAKES, Helsinki	Finland
Mr. Luc Bourceret	Université Libre de Bruxelles	Belgium	Ms. Veera Ristikartano	STAKES, National Research and Dev. Centre, Helsinki	Finland
Miss. Christine Brouwir	Bibliotheque des Sciences de la Vie, Univ. Liege	Belgium	Ms. Leena Lodenius	Finnish Medical Society, Helsinki	Finland
Dr. Paul Nieuwenhuysen	Vrije Universiteit Bruxelles	Belgium	Ms. Leena Raustia	Stakes, FinOHTA Helsinki	Finland
Miss. Clarisse Haar-Salle	ULG - Bibliotheque des sciences de la vie, Liege	Belgium	Ms. Minna Liikala	STAKES, National Research and Dev Centre, Helsinki	Finland
Ms. Tamara Marija Seme	Childrens Hospital, Zagreb	Croatia	Mrs. Claudine Bernard	SCD Bibliotheque de 'Universite de Caen	France
Mrs. Gordana Ramljak	University Hospital of Traumatology, Zagreb	Croatia	Mr. Elmar Mittler	Niedersächsische Staats- und Universitätsbibl. Göttingen	Germany
Ms. Alena Simova	National Medical Library, Prague	Czech Republic	Mrs. Elke Menn	Universitaetsklinikum Hamburg-Eppendorf	Germany
Ms. Lenka Maixnerova	National Medical Library, Prague	Czech Republic	Mr. Andreas Duda	BfArM, Bonn	Germany
			Mrs. Joanna Venieri	SBC-Scientific & Biomedical Info. Centre, Kallithea	Greece
			Ms. Miszori Katalin	SZIE Veterinary Science Library, Budapest	Hungary

LIST OF NEW EAHIL MEMBERS 2006

Members registered between 6 February and 21 April

Ms. Pádár Éva	SZIE Veterinary Science Library, Budapest	Hungary	Ms. Zaneta Brazdziute	Medical Lib. of Latvia, Riga	Latvia
Miss. Beáta Winkler	SZIE Veterinary Science Library, Budapest	Hungary	Miss. Lilita Bunde	Riga Stradins Univ. Riga	Latvia
Mrs. György Kicsi	SZIE Veterinary Science Library, Budapest	Hungary	Ms. Astrida Smagre	Medical Lib. of Latvia, Riga	Latvia
Mrs. Eva Orban	SZIE Veterinary Science Library, Budapest	Hungary	Miss. Evija Grinmane	Medical Lib. of Latvia, Riga	Latvia
Mr. Bernard Barrett	Health Service Executive, Mid West Office, Limerick	Ireland	Mrs. Jelena Vasiljeva	Medical Lib. of Latvia, Riga	Latvia
Miss. Sue Faulkner	Sisters of Charity of Jesus and Mary, Monasterevin	Ireland	Mrs. Tatjana Naumova	Medical Lib. of Latvia, Riga	Latvia
Ms. Fiona McCarthy	Children's Univ Hosp. Dublin	Ireland	Ms. Daiga Spila	Medical Lib. of Latvia, Riga	Latvia
Ms. Rosina Doherty-Allan	Altnagelvin Hospitals Health & Soc. Serv. Trust, Londonderry	Ireland	Ms. Laimdota Daniela	Medical Lib. of Latvia, Riga	Latvia
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Mrs. Maria Letizia Sora	Biblioteca Facolta' di Farmacia, Univ. Parma	Italy	Ms. Anda Krotniecē	Riga Stradins Univ. Riga	Latvia
Dr. Paola Ferrari	Istit. Super. di Sanita, Rome	Italy	Ms. Irina Starostina	Medical Lib. of Latvia, Riga	Latvia
Dr. Rita Lori	Arcispedale Santa Maria Nuova	Italy	Mrs. Daiga Fišere	Medical Lib. of Latvia, Jelgava	Latvia
Ms. Cinzia Sellitri	Istit. Super. di Sanita, Rome	Italy	Miss. Dace Rozenberga	Medical Lib. of Latvia, Riga	Latvia
Dr. Luisa DE BIAGI	National Research Council 'G. Marconi' Bibl. Rome	Italy	Ms. Margarita Zelve	Riga Stradins Univ. Riga	Latvia
Mrs. Ornella Ferrari	Istit. Super. di Sanita, Rome	Italy	Ms. Irina Starostina	Medical Lib. of Latvia, Riga	Latvia
Ms. Chiara Bassi	CEVEAS, Az. Usl Modena	Italy	Ms. Valentina Vikse	Medical Lib. of Latvia, Riga	Latvia
Miss. Polaka Inga	Medical Lib. of Latvia, Riga	Latvia	Ms. Marita Kapina	Medical Lib. of Latvia, Riga	Latvia
Mrs. Iveta Horeva	Medical Lib. of Latvia, Riga	Latvia	Mrs. Ilze Purina	Riga Stradins Univ. Riga	Latvia
Mrs. Galina Trifonova	Medical Lib. of Latvia, Riga	Latvia	Miss. Inara Silvane	Medical Lib. of Latvia, Riga	Latvia
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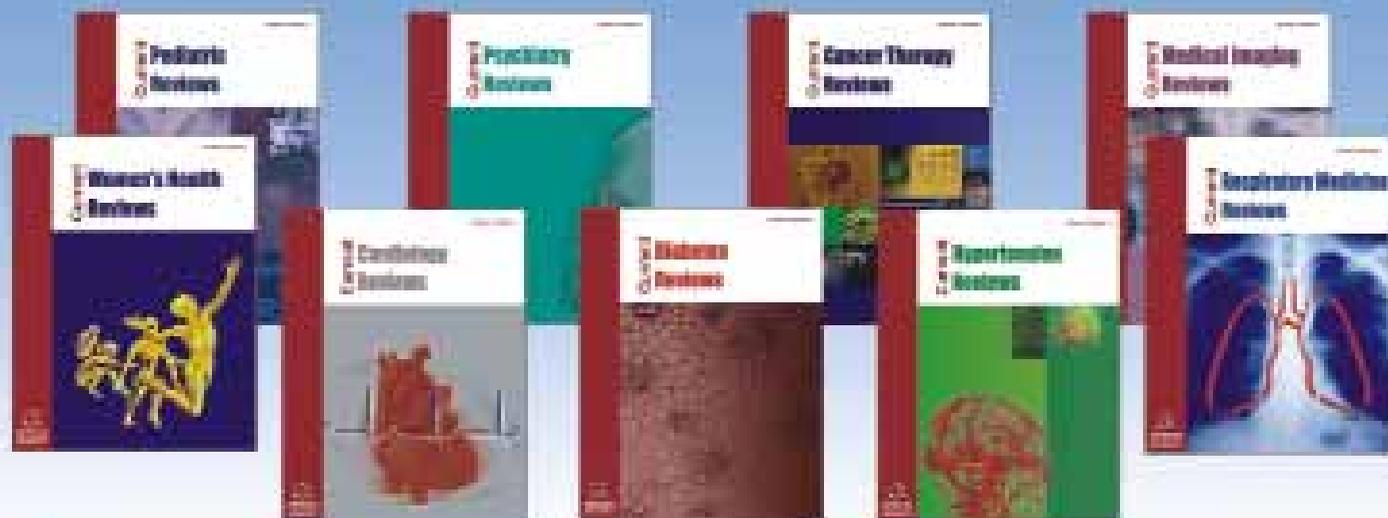
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