

## Current research

Compiled by Teresa Lee

Hoffecker L, Reiter, CM. A review of seven complementary and alternative medicine databases. *Journal of Electronic Resources in Medical Libraries*. 2006;3(4):13–32. doi:10.1300/J383v03n04\_02.

Health sciences librarians are frequently asked to provide customer access to credible complementary and alternative medicine (CAM) information. This article reviews and compares the strengths and weaknesses of seven major CAM databases: AltHealth Watch, AMED, Complementary Medicine Subset on PubMed, HerbMed, MANTIS, Natural Medicines Comprehensive Database, and Natural Standard. Factors such as the amount, quality (evidence based and (or) peer reviewed), uniqueness, currency, and timeliness of information provided in each database as well as unique features, accessibility, and ease of use are discussed.

Mani NS, Wu WG. Information on demand: alert services and selection guidelines for librarians. *Journal of Electronic Resources in Medical Libraries*. 2006;3(4):33–49. doi:10.1300/J383v03n04\_03.

Providing on-demand information is ever popular in today's technologically advanced environment. Whether one promotes library services or provides a communication gateway within a department, several options can be considered when selecting a new information delivery method. This article focuses primarily on using weblogs, RSS feeds, podcasting, and other means to deliver information alerts in a library setting. Discussion involves the various alert services available, the advantages and disadvantages of each type of alert service, and an "information alert selection guide" to assist in the selection of an alert service for a specific institution.

Boulos MN, Maramba I, Wheeler S. Wikis, blogs and podcasts: a new generation of Web-based tools for virtual collaborative clinical practice and education. *BMC Med Educ*. 2006 Aug 15;6:41. Available at <http://www.biomedcentral.com/content/pdf/1472-6920-6-41.pdf>. PMID: 16911779.

**Background:** We have witnessed a rapid increase in the use of Web-based "collaborationware" in recent years. These Web 2.0 applications, particularly wikis, blogs, and podcasts, have been increasingly adopted by many online health-related professional and educational services. Because of their ease of use and rapidity of deployment, they offer the opportunity for powerful information sharing and

ease of collaboration. Wikis are Web sites that can be edited by anyone who has access to them. The word "blog" is a contraction of "Web Log" — an online Web journal that can offer a resource-rich multimedia environment. Podcasts are repositories of audio and video materials that can be "pushed" to subscribers, even without user intervention. These audio and video files can be downloaded to portable media players that can be taken anywhere, providing the potential for "anytime, anywhere" learning experiences (mobile learning). **Discussion:** Wikis, blogs, and podcasts are all relatively easy to use, which partly accounts for their proliferation. The fact that there are many free and Open Source versions of these tools may also be responsible for their explosive growth. Thus it would be relatively easy to implement any or all within a Health Professions' Educational Environment. Paradoxically, some of their disadvantages also relate to their openness and ease of use. With virtually anybody able to alter, edit, or otherwise contribute to the collaborative Web pages, it can be problematic to gauge the reliability and accuracy of such resources. While arguably, the very process of collaboration leads to a Darwinian type "survival of the fittest" content within a Web page, the veracity of these resources can be assured through careful monitoring, moderation, and operation of the collaborationware in a closed and secure digital environment. Empirical research is still needed to build our pedagogic evidence base about the different aspects of these tools in the context of medical or health education. **Summary and conclusion:** If effectively deployed, wikis, blogs, and podcasts could offer a way to enhance students', clinicians', and patients' learning experiences, and deepen levels of learners' engagement and collaboration within digital learning environments. Therefore, research should be conducted to determine the best ways to integrate these tools into existing e-learning programs for students, health professionals, and patients, taking into account the different but also overlapping needs of these three audience classes and the opportunities of virtual collaboration between them. Of particular importance is research into novel integrative applications to serve as the "glue" to bind the different forms of Web-based collaborationware synergistically to provide a coherent, whole-some learning experience.

Kroth PJ, Aspinall EE, Phillips HE. The National Institutes of Health (NIH) Policy on Enhancing Public Access: tracking institutional contribution rates. *J Med Libr Assoc*. 2006 Jul;94(3):279–83. Available at

<http://www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pubmed&pubmedid=16888660>. PMID: 16888660.

No abstract available.

Albert KM. Open access: implications for scholarly publishing and medical libraries. *J Med Libr Assoc*. 2006 Jul;94(3):253–62. Available at <http://www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pubmed&pubmedid=16888657>. PMID: 16888657.

**Purpose:** The paper reviews and analyzes the evolution of the open access (OA) publishing movement and its impact on the traditional scholarly publishing model. **Procedures:** A literature survey and analysis of definitions of OA, problems with the current publishing model, historical developments, funding agency responses, stakeholder viewpoints, and implications for scientific libraries and publishing are performed. **Findings:** The Internet's transformation of information access has fueled interest in reshaping what many see as a dysfunctional, high-cost system of scholarly publishing. For years, librarians alone advocated for change, until relatively recently when interest in OA and related initiatives spread to the scientific community, governmental groups, funding agencies, publishers, and the general public. **Conclusions:** Most stakeholders acknowledge that change in the publishing landscape is inevitable, but heated debate continues over what form this transformation will take. The most frequently discussed remedies for the troubled current system are the "green" road (self-archiving articles published in non-OA journals) and the "gold" road (publishing in OA journals). Both movements will likely intensify, with a multiplicity of models and initiatives coexisting for some time.

Glover SW, Webb A, Gleghorn C. Open access publishing in the biomedical sciences: could funding agencies accelerate the inevitable changes? *Health Info Libr J*. 2006 Sep;23(3):197–202. PMID: 16911126.

**Background:** Open access is making a noticeable impact on access to information. In 2005, many major research funders, including the Wellcome Trust, National Institutes for Health (NIH), and the Research Councils UK (RCUK), set out their position in a number of statements. Of particular note was the stipulation that authors receiving grants must deposit their final manuscript in an open access forum within 6–12 months of publication. **Observations:** The paper will look at the open access position statements issued by some of the major funding bodies in the biomedical sciences. The paper will also look at the models used by publishers to provide open or delayed access, such as Oxford Open from Oxford University Press, HighWire Press' delayed access policy, BioMed Central, and Public Library of Science (PLOS). There are now over 1.2 million articles in

PubMed that are freely accessible via publishers' Web sites. **Conclusion/discussion:** Could funding agencies accelerate the move to open access? The list of funding agencies supporting open access is growing. The NIH and the Wellcome Trust have been joined by many of the world's major funders in biomedical research whose goal it is to make their research findings available with no barriers.

Pearce-Smith N. A randomised controlled trial comparing the effect of e-learning, with a taught workshop, on the knowledge and search skills of health professionals. *Evidence Based Library and Information Practice*. 2006;1(3). Available at <http://ejournals.library.ualberta.ca/index.php/EBLip/article/view/54/155>.

**Objective:** The aim of the trial was to establish whether there is a significant difference in terms of knowledge and skills between self-directed learning using a Web-based resource and a classroom-based interactive workshop, for teaching health professionals how to search. The outcomes measured were knowledge of databases and study designs, and search skills. **Methods:** The study design was a randomised controlled trial (RCT). Seventeen health professionals were randomised into one of two groups; one group (EG) received access to a search-skills Web resource, and the other group received a search workshop (WG) taught by a librarian. Participants completed pre- and post-intervention tests involving multiple choice questions and practical searching using clinical scenarios. **Results:** Nine WG and six EG participants completed both pre- and post-intervention tests. The test results were blindly marked using a score chart developed with two other librarians. For question formulation and devising a search strategy, all participants obtained a score that was the same or better after receiving the intervention (both WG and EG), but statistical analysis showed that the only significant outcomes were for the WG devising a search strategy ( $p = 0.01$ ) and preferring to search using MeSH after receiving the taught workshop ( $p = 0.02$ ). The Mann-Whitney  $U$  test showed there were no significant differences in any of the outcomes ( $p > 0.05$ ) between the WG and the EG. The statistical analyses must be viewed with caution owing to the small sample size. **Conclusions:** There were no significant differences in knowledge of databases and study design or search skills when the WG and the EG were compared. Although many participants obtained a score that was higher post-intervention, only devising a search strategy and preferring to search using MeSH were significant for the WG. The question of whether a taught workshop and an e-learning module are of equal effectiveness in teaching search skills is an important one for health librarians involved in user education and was a justifiable topic to propose and conduct research. The fact that the results are mainly inconclusive because of the small sample size is disappointing but does not diminish the importance of conducting the study.