



European Association

for Health Information and Libraries

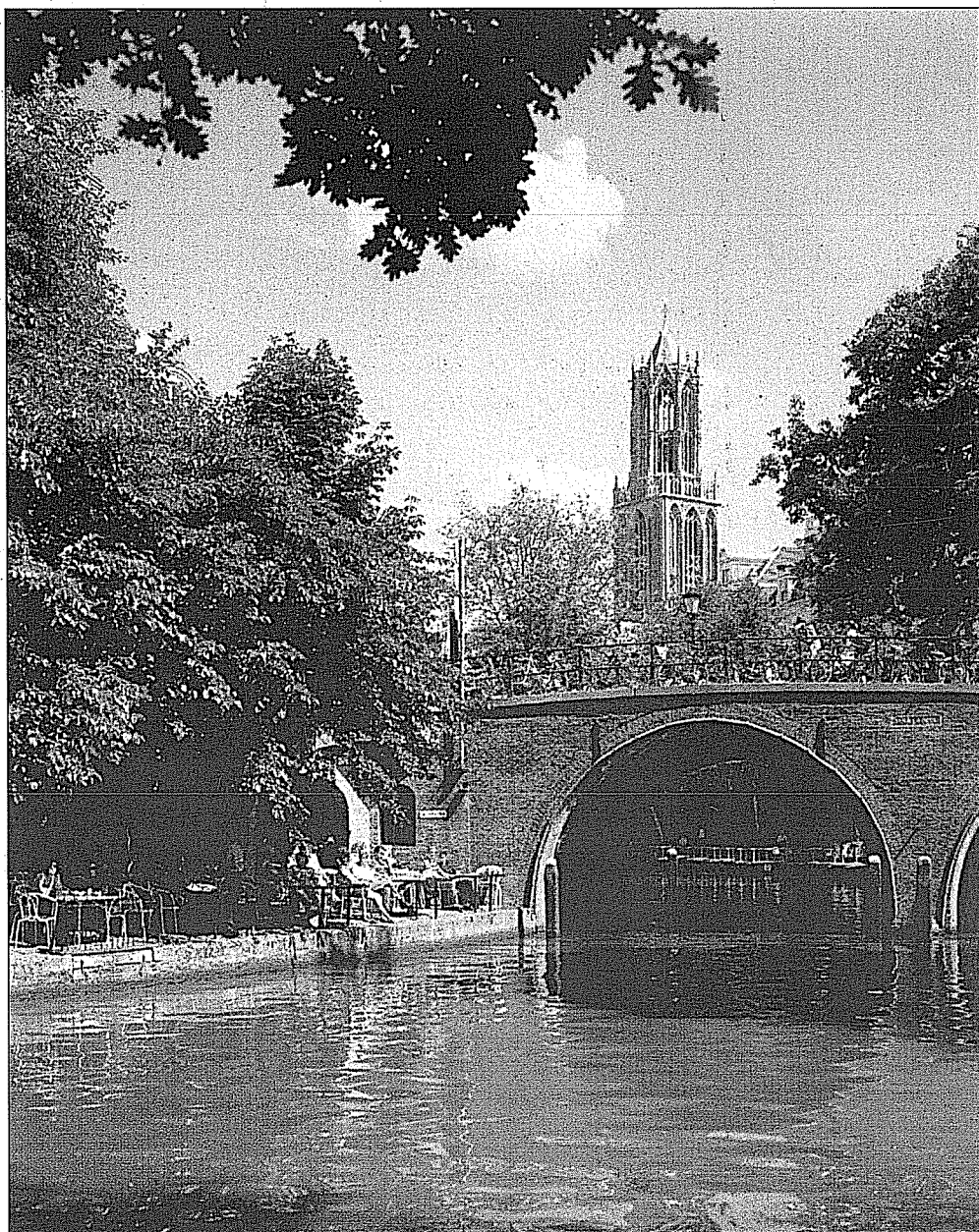
Association Européenne

pour l'Information et les Bibliothèques de Santé

April - Avril 1998 • N° 43

Newsletter

to European Health Librarians • des Bibliothécaires Européens de la Santé



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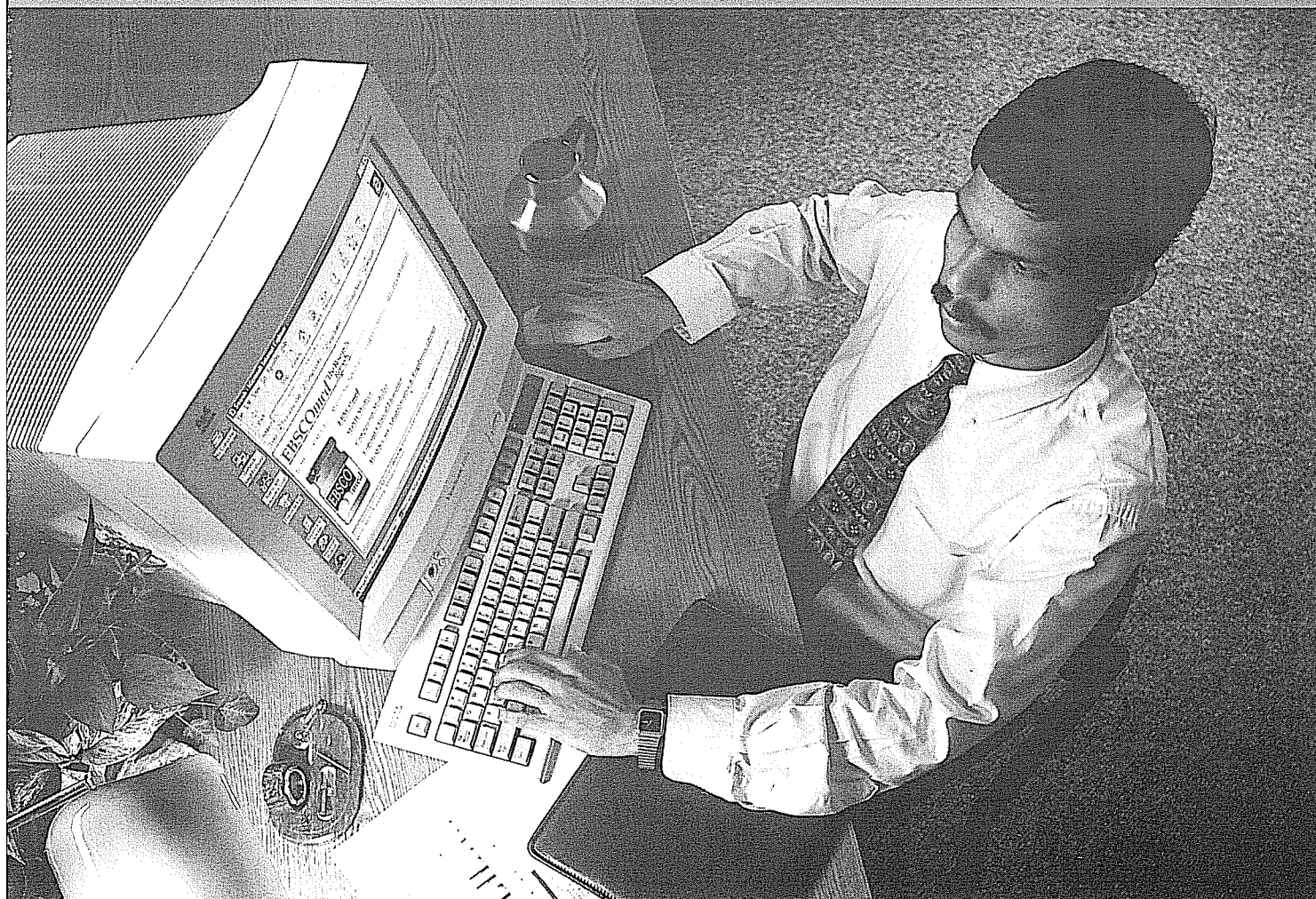
Sixth European Conference of Medical and Health Libraries
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Manuscripts either in English or in French should be about 3-4 standard (1.50 space) typewritten pages (diskette should be provided). Informative title, short summary and keywords should be provided. References should be expressed in Vancouver style. Authors submitted papers accept editing and re-use of published material by EAHIL.

Les manuscrits, qu'ils soient rédigés en français ou en anglais, devront être présentés sous forme de pages dactylographiées, de standard 3-4 (espace de 1.50) (les disquettes devront être fournies). Le titre, un bref résumé ainsi que les mots-clés devront également être joints. Les références devront être formulées selon le "style de Vancouver". Les auteurs ayant soumis des articles acceptent que ces derniers soient édités et utilisés à nouveau dans les publications pour l'AEIBS.

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

La Rédaction s'efforce d'obtenir des articles intéressants. Cependant, les faits et opinions exprimés dans ces articles sont de la responsabilité de leurs auteurs. Ils ne reflètent pas nécessairement les politiques et opinions de l'Association.

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From the Editor

*I*n a rapidly changing society, the information world is moving ahead of changes. The information professionals are expected to move with this change, be flexible and widen their competencies.

The two feature articles of this issue are giving examples of flexibility.

- **The clinical librarian:** an information professional grasping the new concept of evidence-based medicine, to be closer to the clinicians' need and support their decisions respect individual patients: and therefore the need for the information professional to participate to clinical sessions and medical conferences.

*D*ans une société à évolution rapide, le monde de l'information se trouve à la tête du changement. Les professionnels de l'information sont supposés suivre ce changement, être flexibles et élargir leurs compétences.

Les deux principaux articles de ce numéro donnent des exemples de flexibilité.

- **Le bibliothécaire clinique :** un professionnel de l'information saisissant le nouveau concept de médecine basée sur l'évidence pour être plus proche des besoins du clinicien et soutenir sa décision dans le respect des patients individuels. Pour y arriver, l'auteur souligne le besoin du professionnel de l'information de participer aux sessions cliniques et aux conférences médicales.
- **Le professionnel de la connaissance:** un professionnel de l'information face au nouveau défi du management de la connaissance; qui regarde le savoir comme une utilisation avancée de l'information et des données, les associant à l'expérience et la dernière génération des technologies de l'information.

- **The knowledge officer:** an information professional facing the new challenge of knowledge management, and looking at knowledge as the advanced utilisation of information and data, coupling them with experience and last generation information technology.

Knowledge Management (KM) considers information as a common asset to be assessed, enriched, modified and improved against the personal intellectual experience of any individual and his/her own knowledge.

Information is an expensive commodity, which finds its expense justification in sharing: knowledge management is therefore at least interesting for information professionals.

The aim of KM is to create a working environment in which all the information is available to anybody to increase the organisation's capabilities, in a way that they exceed the sum of its parts; that better and faster decision making is possible; that innovation and creativity are

enhanced; that the organisation's IQ is not modified despite people leaving. Other benefits are both in terms of resources (time saving, reduction in costs, common platforms for decisions) and cultural (less misunderstandings, more empathy).

The most challenging part of a KM project is putting people together, and making them sharing ideas and valuing the ideas of everybody, in spite of institutional status or expertise.

At the moment it is difficult to assess the tangible benefits of a KM project, as it has always been to assess the tangible benefits of devoting resources to information centres.

Definitely, we are in front of a new wave of activity and cultural change, favoured by the available information technology. We need to understand how all the components that are important to the process can be put in place and even more to be a proactive part of this process.

Le Management de la Connaissance (MC) considère l'information comme un actif commun à répartir, enrichir, modifier et améliorer au contact de l'expérience intellectuelle de chaque individu et de sa propre connaissance.

L'information est une denrée chère, qui trouve la justification de sa valeur dans le partage : le Management des Connaissances est donc intéressant pour les professionnels de l'information.

Le but du MC est de créer un environnement de travail dans lequel toute information est accessible à chacun de façon à augmenter les possibilités de l'organisation, à permettre une meilleure et plus rapide prise de décision, à accroître l'innovation et la créativité, à ne pas subir un appauvrissement du QI de l'organisation au départ de travailleurs.

La gageure du projet MC est de réunir les gens et de susciter le partage des idées, de mettre en valeur les idées de tous en dépit du statut institutionnel ou de la compétence.

Pour le moment, il est difficile d'évaluer les bénéfices tangibles d'un projet de MC., comme il a toujours été difficile d'évaluer les bénéfices de l'attribution de ressources à des centres d'information.

Décidément, nous nous trouvons devant une nouvelle vague d'activités et de changements culturels, favorisés par la disponibilité des technologies de l'information. Nous devons comprendre comment tous les composants importants pour le processus peuvent être mis en place et, même plus, nous devons adopter une attitude proactive envers ce processus.



Luisa
Vercellesi
Chief Editor



PRIZE CONTEST

The work of conservation of books began centuries ago in a number of ways. Here is a tentative list of major libraries of the past and today. Can anyone spot the two major ones, which are missing?

Five correct answers will be drawn and, if possible, given out at the Utrecht conference to 5 librarians providing the right answers. Any completed entries will be welcome.

- Library of Congress, Washington 29 million of books, 470 languages, 9 million of maps, 19 millions of manuscripts
- Bibliothèque Nationale, Paris 400 km of shelves for 10 millions of books, moving from the original site to Tolbac, according to a project by President Mitterrand.
- Biblioteca Nazionale Vittorio Emanuele II, Rome, established in 1876, 4 million and half books, above all modern, specialised in Roman history.
- Vatican library, founded in 1450: 65,000 manuscripts, 100,000 prints, 1 million ancient books, holding texts condemned by the Inquisition, with "marginalia" (marginal notes) of the reasons of heresy.

From the past:

- Assurbanipal library, built between 668 and 626 b.c. and discovered in 1877-78. Found 22,000 cuneiform terracotta writing tablets..
- Alexandria Library, founded by Tolomeo in 280 b.c., it contained up to 700,000 volumes. Fired in 48 b.c. after Caesar entered Alexandria, it was rebuilt and again destroyed in 391 a.c. Unesco is financing a huge project to built again the library in the same site.

The next issue will be give the answers and the name of the lucky winners.

CONCOURS PRIMÉ

Les efforts de conservation des livres ont débuté il y a des siècles dans des voies toujours renouvelées. Voici un essai de liste des bibliothèques les plus importantes du passé et du présent. Quelles sont les deux grandes institutions manquantes ?

Cinq prix seront attribués, et si possible, remis lors de la conférence d'Utrecht. Les bibliothèques manquantes datent pour l'une d'avant JC et pour l'autre de l'époque actuelle. Toute contribution à la liste est la bienvenue.

- La Bibliothèque du Congrès, Washington. 29 millions de livres en 470 langues. 9 millions de cartes et 19 millions de manuscrits.
- La Bibliothèque Nationale de France, Paris. 400 km de rayons pour 10 millions de livres. Pour poursuivre un projet du Président Mitterrand, a quitté son emplacement original pour le site de Tolbiac.
- La Bibliothèque Nationale Victor-Emmanuel II, Rome. Créée en 1876 pour 4,5 millions de livres, surtout modernes et spécialisés dans l'histoire romaine.
- La Bibliothèque vaticane. Fondée en 1450 : 65000 manuscrits, 100000 imprimés, 1 million de livres anciens. Conservation des textes condamnés par l'inquisition avec en notes marginales les raisons de l'hérésie.

Plus ancien, avant J.C.:

- La Bibliothèque Assurbanipal bâtie entre -668 et -626. En 1877-78, on y a découvert 20000 tablettes en terre cuite recouvertes d'écriture cunéiforme.
- La Bibliothèque d'Alexandrie. Fondée en -280 par Ptolémée, elle contenait 700000 volumes. Après avoir été incendiée en -48 lors de l'entrée de César dans la ville, elle a été reconstruite et détruite à nouveau en 391. L'Unesco finance un vaste projet de reconstruction d'une bibliothèque sur le même site.

Les réponses seront données dans le prochain numéro, dans lequel vous trouverez aussi le nom des cinq heureux collègues.

Please send answers to the editor - Adressez vos réponses à la rédactrice en chef

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NEWS FROM OUTSIDE EUROPE



MLA in Philadelphia, May 22-27, 1998

A brief look

This is MLA's 100th anniversary - "a once-in-a-lifetime event." MLA is preparing a Time Capsule to be sealed for the next 100 years, and Lois Ann Colaanni will deliver a Plenary session entitled "MLA Time Capsule: Take One and Call Your Medical Librarian in 100 years."

Other Plenary sessions will include:

- *Perspectives a Medicine and Microbes* by Kenneth Ludmerer, M.D., and Laurie Garrett
- *The Janet Doe Lecture* by Wayne J. Peay
- *Transforming What We Do - A Vision of the Future* by Chuck Martin
- *Laugh for the Health of It* by John Morreall, Ph.D.

Most of the Sections of MLA will present programs, including the International Cooperation Section. 34 Continuing Education Courses will be taught. A Postconference Symposium on "Health

Informatics Research Agenda for the Twenty-first Century "will be held at the end of MLA on May 28, 1998.

A very special International Visitors Reception will be held. After the reception, many international visitors and members of the International Cooperative Section of MLA will go out to dinner together. All are invited.

A Placement Service for those seeking a job or for employers seeking librarians will be available. A wide variety of tours in and around Philadelphia are being organized by MLA. The Philadelphia Marriott Hotel is the headquarters Hotel for MLA.

Donna Flake

MLA Representative to EAHIL
Costal AHEC Library, Wilmington, USA
email: dbf1@med.unc.edu

MLA, join us for dinner !

If anyone is planning to attend the MLA

Conference in Philadelphia in May and would like to join the International Cooperation Section and other international attendees for dinner, please email Zana Etter at etter@rwja.umdj.edu

The dinner will be held on Sunday evening, May 24 following the International Reception, at the Singapore Restaurant, which is within walking distance of the hotels. It is a reasonably priced Chinese/Vegetarian restaurant and provides a wide selection of dishes.

Zana Etter,

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NEWS FROM OUR ASSOCIATION

Exciting changes in the Association

Changements importants au sein de l'Association

Le 6^e Congrès Européen des Bibliothèques Médicales et de santé approche. La fin juin sera un grand événement à Utrecht et les comités d'organisation ont du pain sur la planche pour ajuster toutes les pièces.

- Nous aimerions vous rappeler que des réunions importantes auront lieu à cette occasion et que la réunion majeure est bien sûr l'**Assemblée Générale**.

La grande décision à prendre porte sur le futur du secrétariat de l'AEIBS et nous avons besoin d'autant de votes que possible pour que la décision reflète vraiment la volonté des membres.

- Un autre changement d'importance est le renouvellement du/de la Président/le et des membres du Conseil. Cela signifie toujours un changement dans les activités. Ces changements ne représentent pas en principe de grands bouleversements, cependant il y a toujours des différences culturelles dans la manière de faire tourner une association et c'est ce qui rend le travail au sein d'une association internationale si fascinant.

Il est donc impératif que votre cotisation pour 1998 soit payée et que vous assistiez à cet événement important. Si vous ne pouvez pas vous déplacer personnellement, assurez-vous qu'un de vos collègues qui a la chance d'assister à l'Assemblée Générale emporte votre procuration pour vous y représenter.

- Notre Présidente, Elisabeth Husem, nous représentera à la célébration exceptionnelle du 100^e anniversaire de la MLA à Philadelphie, USA.

The Sixth European Congress of Medical and Health Libraries is approaching. The end of June is going to be a big event in Utrecht, and the organising committees are having their hands full in fitting all pieces together.

- We just want to remind you that there will be very important meetings held, and the most central of them is of course the **General Assembly**.

The big decision to be made is the future of the EAHIL secretariat, and we

need as many votes as possible to make the decision a true expression of the membership.

- Other important changes are that we will also have a new President and new Council Members, which always mean a change in activities. These changes need not be great in principle, but there are always cultural differences in running an organisation. This is the feature that also makes working in an international association so fascinating.

So, make sure you have your membership fees paid and are ready to come to this important EAHIL event. If you cannot come yourself, please make sure you have given a proxy to one of your colleagues, who has this year the opportunity to attend.

- Our present President, Elisabeth Husem will represent us at the huge event of the 100th Anniversary of the Medical Library Association in Philadelphia in the United States.

Liisa Salmi
EAHIL Board Member

EAHIL SUB-GROUPS

PhInfG at the EAHIL Conference in Utrecht

You have probably all received the programme for the next EAHIL Conference, Utrecht, the Netherlands, 22-27 June 1998.

As you have certainly noticed, due to lack of submissions of papers covering the relevant matters, it was impossible to organise a full pharmaceutical information session.

General Assembly

The General Assembly of the PhInfG will take place on Thursday 25 June, starting at 14.00. It will also act as a business meeting. You can express your participation by ticking the SIG 7 in your registration form.

Following matters will be on the agenda :

- report of the Executive Board
- financial report
- activities to come
- activities of the past two years
- why so little pharmaceutical information submissions ?
- elections of the Executive Board

Elections of the PhInfG Executive Board

Candidates for the new Executive Board can send their application to me.

Dinner ?

To permit further more relaxed discussion, I propose also to organise a dinner on Thursday evening. If you are interested, please let me know.

Other hints from the Programme

Some other hints from the Programme of special interest to pharmaceutical information :

- *Embase Workshop - When every piece of information is essential?* (M-5) free full day course on Monday 22 by the excellent **Justus Krabshuis**, that also will introduce BIOBASE.
- *Information specialist/librarian: the unmistakable link between the author and the publisher* (W-4) a unique half-day course on Wednesday 24 morning by **Micheline van Migro**,

an active member of many professional associations, and of our Group.

- *The future is now: Linking primary and secondary information.*

A plenary session on Saturday 27 Morning, in the form of a "confronting" ? debate between **Lois Ann Colaianne**, NLM; **Wubbo Tempel**, Excerpta Medica/Elsevier Science; and **Arnoud de Kemp**, Springer Verlag.

- *The development of a strategic plan for the scientific information provision of a pharmaceutical company*, by **Nico van Putte**

A presentation at the parallel session "Measuring success II: Quality & performance" on Friday 26 morning by the well-known PDR past president.

...and a lot more.

See you in Utrecht !

Vincent Maes
PhInfG Secretary



Be informed ! Join the EAHIL discussion list

EAHIL-L is an electronic discussion list for all EAHIL members. EAHIL-L is intended as an electronic forum for ideas, questions, and announcements specific to EAHIL members. The list stimulates interaction and discussion between all EAHIL members including EAHIL council and board members. An electronic mail/message sent to the list is delivered in a matter of seconds to all people currently subscribing to the list. Only EAHIL members can subscribe to the list.

EAHIL-L was founded on February 1, 1997 and today 134 members subscribe to the list. Interaction between all EAHIL members is very important for a democratic organisation. If you have e-mail you should subscribe to EAHIL-L and exploit this new possibility of interaction. It is easy to subscribe:

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When you have subscribed you can start sending messages to the list.

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Web Archives for EAHIL-L :

Old and new subscribers to EAHIL-L can also search EAHIL-L list archives via the World Wide Web. You can search EAHIL-L list archives with your favourite web browser. To search the archives:

1. Please connect to EAHIL Home Page <http://www.ub.ntnu.no/eahil/>.
2. Choose Discussion list.
3. Clicking the "Web Archives for EAHIL-L" hyperlink connects you to the archives page for EAHIL-L.

From here you can either browse the available archives (monthly archives) by clicking on the various hyperlinks, or you can choose "Search the archives" to bring up a search page. It is also possible to Post a message to the list.

Note. Only subscribers to EAHIL-L can search or look in the Web archives. Please follow the online instructions.

Restez informé ! Rejoignez la liste de discussion de l'AEIBS

EAHIL-L est une liste de discussion électronique pour tous les membres de l'AEIBS. EAHIL-L constitue un forum électronique pour les idées, les questions et les annonces spécifiques aux membres de l'AEIBS. La liste stimule les échanges et discussions entre tous les membres de l'AEIBS, y compris les membres du Conseil et du Bureau. Un courrier/message électronique envoyé à la liste est livré en quelques secondes à toutes les personnes abonnées à la liste. Seuls les membres de l'AEIBS peuvent s'abonner à la liste.

EAHIL-L a été fondée le 1er février 1997 et à ce jour 134 membres y sont abonnés. L'interaction entre tous les membres de l'AEIBS est très importante pour la démocratie. Si vous avez une adresse e-mail vous devriez vous abonner à EAHIL-L et exploiter les nouvelles possibilités d'échange. Il est facile de s'abonner :

Pour s'abonner à EAHIL-L :

Envoyer un e-mail à : Listserv@spriwww.spri.se
Sujet : laisser la ligne blanche
Première ligne : Subscribe EAHIL-L Nom Prénom
Quand vous vous êtes abonnés vous pouvez commencer à envoyer des messages à la liste de discussion.

Pour envoyer un message à EAHIL-L :

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Sujet : Votre sujet
..... Votre message

Les archives web de la liste EAHIL-L :

Les anciens et nouveaux abonnés à EAHIL-L peuvent aussi chercher dans les archives de la liste EAHIL-L via le web. Vous pouvez y accéder grâce à votre système de recherche favori. Pour accéder aux archives :

1. Vous connecter à la page d'accueil de l'AEIBS <http://www.ub.ntnu.no/eahil/>
2. Choisir "Discussion List"
3. Cliquer sur l'hyperlien " web archives for EAHIL-L" pour vous connecter à la page d'archives d'EAHIL-L.

A partir de cet endroit, vous pouvez soit feuilleter les archives disponibles (archives mensuelles) en cliquant sur un des hyperliens, soit choisir "Search the archives" pour atteindre la page de recherches. Il est aussi possible de poster un message sur la liste.

Remarque : seuls les abonnés à EAHIL-L peuvent accéder aux archives web. Merci de suivre les instructions en ligne.

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NEWS FROM OUR ASSOCIATION

EAHIL MEMBERSHIP ■ EAHIL MEMBERSHIP ■ EAHIL MEMBERSHIP

We would like to thank **DAWSON** and **SWETS** for the renewal of their 1998 sponsorship. We much appreciate their support.

We are happy to welcome new EAHIL members :

Individual Membership

- ALMAS Karin, Central Hospital Moere and Romsdal, Med.Library, Alesund, Norway
- CLAUSEN Edith, Arhus Amtssygehus, Laegebiblioteket, Arhus, Denmark
- DEURENBERG Rikie, Medische Bibliotheek, Nijmegen, Netherlands
- ENGELSEN Astrid, Alesund College, Alesund, Norway
- LINDEGREN-BOHN Britte, Swedish Univ.Agricultural Sciences Libraries, Skara, Sweden
- LINNANE Anthony, Western Health Board Library, Galway, Ireland
- VAN AMSTERDAM M., Ziekenfondsraad, Amstelveen, Netherlands

WHO documentation Centres:

- ALBANIA: Dr D. Stratoverdha, National Dir.Health Education, Tirana
- ARMENIA: Dr A. Shirinian, Med. Scientific Library, Ministry of Health, Yerevan
- AZERBAIJAN: Tamilla Aliyeva, Institute of TB & Pulmonary Diseases, Baku

- BELARUS: Eugenia Gorelova, Rep. Scientific Medical Library, Minsk
- BOSNIA & HERZEGOVINA: Prof. A.A. Smajkic, Institute of Social Med.and Organisation of Health, Sarajevo
- BULGARIA: Dr Ch. Mutafov, Medical Inform. Centre, Sofia
- CROATIA: Prof. Maria Teuber, Andrija Stampar School Public Health, Zagreb
- CZECH REPUBLIC: Dr J. Drbalek, National Medical Library, Prague
- GEORGIA: Dr T. Kacharava, Centre of Health Inform. & Statistics, Tbilisi
- HUNGARY: Fedinecz, National Institute of Med. Information, Budapest
- KYRGYZSTAN: Dr A.S. Imanbaev, WHO Information Centre for the Asian Republics, Bishkek
- LATVIA: Dr G. Brigis, Medical Academy of Latvia, Riga
- LITHUANIA: Meilute Kretaviciene, Kaunas Medical Academy, Kaunas
- LITHUANIA: Danute Kazlauskienė, Lithuanian Library of Medicine, Vilnius
- ROMANIA: Irma Eva Csiki, Institute of Hygiene, Public Health, Bucharest
- RUSSIAN FEDERATION: Dr T. V. Kaigorodova, Med. Soc. Econ. Inform. Institute, Moscow
- SLOVAKIA: Eva Hulinova, Slovak Medical Library, Bratislava

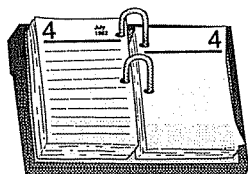
- SLOVENIA: Prof. T. Berger, Institute of Slovenia, Ljubljana
- TURKEY: Prof. S. Uner, Hacettepe University, Ankara
- UKRAINE: Prof. A. Uvarenko, Centre of Sc.Information & Patent Licence Provision, Kiev
- UZBEKISTAN: Faina Bolgunova, State Scientific Medical Library, Tashkent

Institutional Membership:

- BOSCHI Silvana, Università Studi di Milano, Fac.Med.Veterinaria, Milano, Italy
- CALINON Danièle, Institut Universitaire d'Histoire de la Médecine, Lausanne, Switzerland
- ESCHLE Hildegard, Zentrum für Zahn-, Mund-, und Kieferheilkunde, Zürich, Switzerland
- SCHODT Ilse, DSI Library, Copenhagen, Denmark

Associate Members:

- AUSTON Ione C., McLean, Va., USA
- BERTOLUCCI Isabel, AHIP, Oakland, Ca., USA
- BOYD Trenton, AHIP, Columbia, USA
- ETTER Zana Claire, R.W.Johnson Medical School, UMDNJ, Piscataway, NJ, USA
- SMITH Linda C. University of Illinois, Champaign, Ill. USA



FORTHCOMING EVENTS

May 22-28, 1998 Philadelphia, USA

MLA 98, Medical Library Association Annual Meeting & Exhibit.
Contact: R. Carey, 6 N Michigan Ave, #300, Chicago, IL 60602, USA - Tel: 1 312 419-9094, Fax: 1 312 419-8950, E-mail: info@mlahq.org.

June 22-27, 1998 Utrecht, The Netherlands

EAHIL Sixth European Conference of

Medical and Health Libraries "The digital Library in Biomedicine".
Information: EAHIL'98, P.O./Box 80125, NL-3508 TC Utrecht, Netherlands, fax: 31 20 253 3667, email: l.donkers@fbu.ruu.nl

August 16-21, 1998 Amsterdam, The Netherlands

64th IFLA General Conference -
General Information: Amsterdam '98, Congrex Holland bv, P.O.Box 302, NL-

1000 AH Amsterdam, Fax: 31 20 625 9574 - email: ifla@congrex.nl

September 21-23, 1998 Berlin, Germany

Annual Meeting of the German Association for Medical Libraries. TE Conference with Exhibition., Univ.-Klinikum Charité, Dr. V. Jost, Zentralbibliothek, Schumannstr. 20/21, D-10117 Berlin, Germany - Countryphone: +4 9 30 28023614.



APDIS

Portuguese Association for Health documentation and Information 4th APDIS meeting, Lisbon, 24th-25th March 1998.

Under the theme "Health information: what competencies" this meeting Was held in Lisbon on March 24-25 1998.

The scientific programme included a wide range of interesting papers on several sub-themes that reflected Portuguese health information professionals major concerns. New requirements in new information pathways, ethics in the daily work of the library, resources for clinical decision making support focusing on the Cochrane database, access to primary documents procedures with the participation of BLDSC, EBSCO,

LUSODOC, SWETS representatives made up the first day. A new era for an old profession, librarian profiles and competencies with the digital revolution, electronic information sources in the health field, user's education and the educators competencies, new professions/ new professional values and the importance of education, was the programme for the second day. The social programme with a visit to the Museum of the National Pharmacy Association and a dinner party offered an excellent opportunity to make informal contacts and exchange experiences.

APDIS Newsletter

This Newsletter was delivered in February. Among the news were items about the changes all health information professionals deal with in their daily work. The 6th EAHIL Conference in Utrecht was mentioned and an invitation to participate to this EAHIL event as well. Libraries changing needs and roles, the theme of this conference, is of major interest. APDIS took this opportunity to mail news to the EAHIL Special Interest Group for Nursing and Allied Health, at their request.

Antonia Pereira da Silva

EAHIL Council Member, Coimbra, Portugal

National projects in Finland

Projets nationaux en Finlande

En 1995, une directive gouvernementale esquissait une stratégie de la société de l'information, stipulant que chaque branche administrative prépare un plan d'action détaillé pour mettre en oeuvre cette stratégie dans le but d'offrir à chaque citoyen l'opportunité d'acquérir les nouvelles compétences requises pour accéder à l'information. Le Ministère de l'Education concentre ses activités sur l'éducation, la recherche et la culture, dotant les institutions concernées de réseaux d'information modernes et garantissant à tous les niveaux scolaires l'opportunité d'utiliser les réseaux et leurs services. Les bibliothèques sont aussi incluses dans ce développement car elles sont considérées comme des fournisseurs incontournables de ces services à tous.

La réalisation de ces buts idéalistes se déroule relativement bien et le Ministère de l'Education concentre sur deux points fondamentaux : mettre le système d'éducation en réseau grâce aux technologies les plus modernes et garantir les connaissances de bases pour l'utilisation de ces technologies à chacun. Les écoles et les bibliothèques publiques sont les fers de lance qui assurent l'accès de chaque

citoyen à l'information. C'est un bon exemple de l'idée de démocratie nordique, dont nous sommes assez fiers. Il y a maintenant un troisième point qui émerge: nous n'avons pas besoin de technologies tant que nous n'avons pas de contenu. Le gouvernement supporte et encourage les PME à produire du contenu utilisable dans tout environnement d'apprentissage via les nouvelles technologies.

Deux caractéristiques de la société finlandaise facilitent l'accomplissement de ces buts : la norme générale d'éducation de la nation entière est élevée et dans, certains domaines de la communication des données, la Finlande est un des leaders mondiaux. Dès le milieu des années 80, le ministère a créé le réseau des universités finlandaises, FUNET, pour assurer les liens de télécommunication entre les universités finlandaises et la communauté de recherche nationale. Il y a aussi une troisième raison, guère mentionnée dans les communiqués officiels : nous sommes une nation qui traite une chose à la fois. Avec une population de 5 millions de personnes, chacun dans le pays sait immédiatement ce qui se passe et, si nous pensons que

c'est un bon sujet, nous nous investissons dans celui-ci et uniquement dans celui-ci.

Pour prendre un exemple, nous avons aujourd'hui plus de téléphones mobiles par habitant que n'importe quel autre pays dans le monde. Et les Finlandais, qui ne communiquent pas facilement face à face, discutent interminablement dans leurs téléphones mobiles y compris dans les lieux publics où tout le monde peut tout entendre. Dans le cadre de cette stratégie globale, toutes les bibliothèques de recherches, incluant et plus spécialement les bibliothèques médicales, sont plutôt en avance sur les technologies de l'information. Certains besoins au niveau de la sécurité des données créent encore des obstacles pour les bibliothèques hospitalières, mais les technologies se développent tout le temps.

Les bibliothèques médicales de Finlande se sont regroupées en consortium à l'initiative de la Bibliothèque Centrale en Sciences de la Santé d'Helsinki, afin de négocier en commun les licences avec les gros producteurs de bases de données. La compétition entre les éditeurs, producteurs et vendeurs est dure et nous essayons d'en tirer le meilleur à coûts raisonnables. Il est de tradition en



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European Association for Health Information and Libraries

*Sixth European Conference
of Medical and Health Libraries*

"Libraries without limits: changing needs - changing roles"

*"Des bibliothèques sans limite;
changement des besoins, changement des fonctions"*

INFORMATION PROFESSIONALS MAKE THE DIFFERENCE

22-27 JUNE 1998

Welcome to Utrecht !

*M*y final contribution before we welcome you all to Utrecht at the 6th EAHIL-event will focus - as I promised earlier - on Utrecht University and on the libraries that will act as your hosts during your stay in our country. Writing this on a mini-holiday under the shining sun of Gran Canaria - whilst my colleagues in Holland are facing some late snowshowers at present - I reflect on the fact that new technologies have made travelling the world smaller, but in libraries and information science the world seems to have grown. Over the last few decades we've seen systems getting bigger, bigger and bigger. Has information flow between people reached its final goal in the global possibilities of the Internet? I doubt it.

When I sat down to write some lines about Utrecht University's information system, I thought I had to focus on holdings, on computerisation, on how CD-ROM's had replaced on-line searching, on the Internet files (<http://www.med.ruu.nl/bestande.htm>) and on how Internet use is growing and flourishing. But when you're in Utrecht we will show you it all and we will have the opportunity to discuss the newest developments in our fields. And when you leave I'm sure you will be convinced of the truth of the conference "slogan": Information professionals make the difference.

Utrecht University is not the biggest or oldest of the thirteen universities in The Netherlands. Although its roots date back to the year 695, the actual university was installed as late as 1636. But at present Utrecht University is second in the country, according to budgets, number of students (25.000) and scientific output. There are fourteen faculties with a broad range of specialities. Since 1925 it houses the only veterinary school in the country. In the last twenty years the University has outgrown the inner city. A complete new campus was set up and nearly all branches have been relocated ten km East of the city centre at the Uithof locality.

Formerly Utrecht University was notorious for its small libraries in the old town. At one stage there were 150 separate small libraries. Currently the reshuffling and concentration is nearly finished: the Medical University Library is concentrated in one huge new Hospital Building. Only the Children's Hospital is still in the inner city, but next year this and its library will move over. The veterinary library - as it is the only one in the country - serves not only the University, but all the veterinarians in the country and a lot of governmental and private research in the field. This library is a merger of many small collections. The Special Interest Group on veterinary medicine, the European Veterinary Libraries Group will visit it during the EAHIL Conference. But of course you all are welcome to browse the vast collection. For even in the Internet era, browsing is still possible!!

See you in Utrecht !



Rijksuniversiteit Utrecht - Outside View of Academy Building

*M*a contribution finale, avant de vous accueillir à la 6e manifestation de l'AEIBS à Utrecht, va se centrer – comme promis – à l'Université d'Utrecht et aux bibliothèques qui se comporteront en hôtes pendant votre séjour dans notre pays. Écrivant ces lignes au cours de mini-vacances sous le flamboyant soleil de Gran Canaria – mes collègues en Hollande affrontant quelques neiges tardives en ce moment –, je réfléchis au fait que les nouvelles technologies ont réduit le monde au niveau des voyages, mais qu'au niveau des bibliothèques et des sciences de l'information, le monde semble avoir grandi. Au cours des dernières décennies, nous avons vu les systèmes devenir de plus en plus grands. Le flux d'informations entre les personnes a-t-il atteint son but final dans les possibilités d'internet ? J'en doute. Quand je me suis assis pour vous écrire quelques lignes à propos du système d'information de l'université d'Utrecht, je pensais que je m'attacherais aux collections, à l'informatisation, à la manière dont les CD-Roms ont remplacé la recherche en ligne, sur les fichiers internet (<http://www.med.ruu.nl/bestande.htm>) et sur le développement florissant de l'utilisation d'internet. Mais à Utrecht nous vous montrerons tout cela et nous aurons l'occasion de discuter de la pointe du développement dans nos domaines. Et quand vous partirez, je suis sûr que vous serez convaincus de la vérité du slogan de la conférence : " Les professionnels de l'information font la différence ".

L'université d'Utrecht n'est pas la plus grande ni la plus ancienne des 13 universités des Pays-Bas. Bien que ces racines remontent à 695, l'université réelle a été installée aussi tard qu'en 1636. Mais aujourd'hui, l'université d'Utrecht occupe la 2e place dans le pays au plan des budgets, du nombre d'étudiants (25000) et du niveau scientifique. Elle compte quatorze facultés représentant une large gamme de spécialités. Depuis 1925, elle héberge l'unique école vétérinaire du pays.

Au cours des vingt dernières années, l'université était à l'étroit dans le centre ville. Un campus complètement nouveau a été construit et presque toutes les branches ont été transférées à 10 km à l'est du centre, dans la localité de Uithof. Dans le temps, l'université d'Utrecht était célèbre pour ses petites bibliothèques de la vieille ville. A une certaine époque, il y en avait 150 ! Aujourd'hui le remaniement et la concentration sont presque achevés : la bibliothèque médicale universitaire est concentrée dans un énorme nouveau bâtiment de l'hôpital. Seul l'hôpital des enfants et sa bibliothèque attendent encore dans le centre ville un déménagement prévu pour l'an prochain.

La bibliothèque vétérinaire, qui est la seule du pays, ne sert pas uniquement l'université mais tous les vétérinaires néerlandais et aussi beaucoup de recherches gouvernementales et privées dans le domaine. Cette bibliothèque est donc une fusion de beaucoup de petites collections. Le groupe d'intérêt spécial sur la médecine vétérinaire, le Groupe Européen des Bibliothèques Vétérinaires, la visitera pendant la conférence de l'AEIBS. Mais vous êtes tous invités à feuilleter la vaste collection. Même à l'heure d'internet, feuilleter reste possible !

A bientôt à Utrecht !

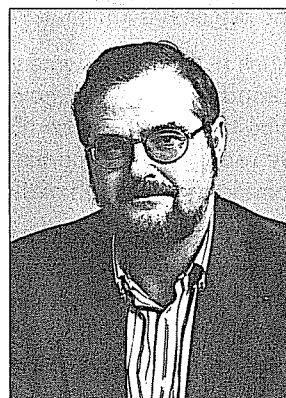
Paul van Olm

Institute for Animal Science and Health (ID-DLO)

P.O. Box 65, 8200 AB Lelystad, The Netherlands.

Phone: 31.320.238238,

E-mail: p.w.vanolm@id.dlo.nl



GENERAL INFORMATION

*U*trecht is situated in the heart of the Netherlands, approximately 35 kilometres south of Amsterdam. It was founded in AD 48 by the Romans, who built a military settlement on the banks of the Rhine. In AD 695, the English Benedictine monk, Willibrord, came to convert the Franks and the Frisians to Christianity, and made Utrecht a religious centre, evidence of which is still apparent today. For centuries, Utrecht was the largest and only city of importance in the northern part of the Netherlands. Today, Utrecht is the fourth largest city in the Netherlands, after Amsterdam, Rotterdam and The Hague. With the largest university in the country, its atmosphere is largely determined by cycling students and their pubs. Like Amsterdam, the city centre boasts beautiful canals and ancient buildings. Utrecht now has 230,000 inhabitants, including 23,000 students.

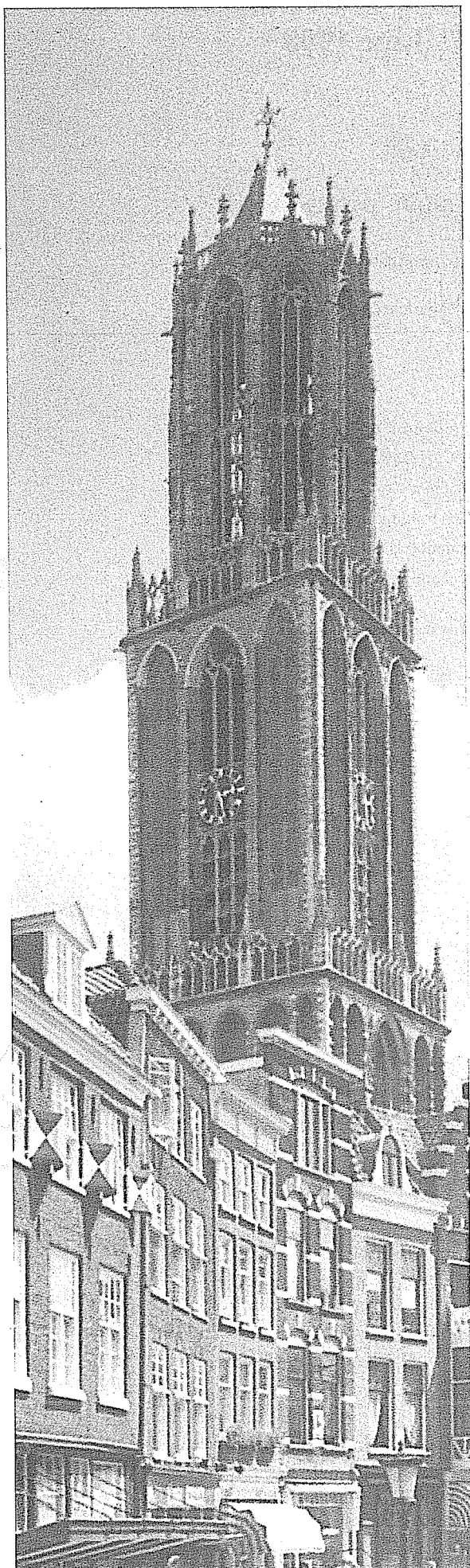
The **Jaarbeurs "Beatrixgebouw", Conference Centre** is located in the centre of Utrecht, next to the railway station. Hotels, shops and restaurants are available within walking distance.

Jaarbeursplein, Utrecht, The Netherlands

Tel: +31.30.295.5421 / +31.30.294.5144 - Fax: +31.30.293.9459

The Continuing Education Courses will be held at Utrecht University, which is located on the edge of the town. The FBU Congress Bureau will be the "Hospitality-Registration-Information Desk" during the courses (University Campus, Heidelberglaan 2, See Map).

Host Institution : Medical Library, Faculty of Medicine, Utrecht University



PROGRAMME

WEDNESDAY JUNE 24

	CEC
12.00-13.00	EAHIL Board
13.00-14.30	EAHIL Council
12.30-16.30	Special Interest Groups
13.30-16.30	Symposium
14.00-17.00	Registration
17.00-18.00	Opening Ceremony
18.00	Start Exhibition
18.00-20.00	Welcome Reception

THURSDAY JUNE 25

8.30-17.00	Exhibition
9.00-10.00	1st Plenary Session
10.00-10.30	Coffee break
10.30-11.30	Parallel Sessions
11.30-13.00	General Assembly
13.00-13.30	Lunch & Learn Sessions
13.30	Poster Session
14.00-15.00	Product Presentations
15.00-15.15	Tea break
15.15-17.15	Educational Tours
	Special Interest Groups
20.00-24.00	Cocktail Party

FRIDAY JUNE 26

8.30-17.00	Exhibition
9.00-10.00	2nd Plenary Session
10.00-10.30	Coffee break
10.30-11.30	Parallel Sessions
12.30-13.30	Lunch
13.30	Poster Session
14.00-15.00	Product Presentations
15.15-17.15	Parallel Sessions
20.00-24.00	Conference Party

SATURDAY JUNE 27

8.30-14.00	Exhibition
9.00-10.30	Parallel Sessions
10.30-11.00	Coffee break
11.00-12.00	3rd Plenary Session
12.00-12.30	Closing Ceremony
12.30-14.00	Farewell Lunch

For further information, courses and hotel registration forms, please check the conference Web-site or contact the FBU congress bureau.

Mailing Address :

EAHIL '98 - FBU Congress Bureau - Utrecht University
P.O. Box 80.125 - 3508 TC Utrecht - The Netherlands
Tel: +31.30.253.2728 (or 5044) - Fax: +31.30.253.5851
E-mail: LDO@FBU.RUU.NL

EAHIL'98 web-site :

<http://www.med.ruu.nl/eahil.html>

6th European Conference of Medical and Health Libraries

UTRECHT 22-27 June 1998

PLENARY SESSIONS : THEMES AND SPEAKERS

- I: INFORMATION OWNERSHIP: copyright - licenses
Charles Oppenheim, De Montford University Leicester (UK)
Madeleine de Cock Buning, University of Amsterdam (NL)
- II: QUALITY ISSUES AT BOTH SIDES: RESEARCH FRONT - USER END
Hampus Rabow (Sweden) & Bob Gann (UK)
- III: The FUTURE is NOW: linking primary and secondary information
Lois-Ann Colaizzi, NLM, Bethesda (USA)
Wubbo Tempel, Excerpta Medica/Elsevier Science, Amsterdam (NL)

OVERVIEW CONTINUING EDUCATION COURSES

■ Monday Whole day (9.00-17.00)

- M1 Managing successful projects and project teams. *Keith Bonson & Beryl Morris*
- M2 Quality management and performance measurement. *Carl Gustav Johannsen*
- M3 User education: developing your teaching skills. *Jean Yeoh*
- M4 ISI Web of Science and Current Contents Connect: free training course. *Mark Wheeler*
- M5 Free EMBASE workshop: When every piece of information is essential? *Justus Krabshuis*
- M6 Free course: Using BIOSIS Previews to access medical and veterinary information.
Nigel Robinson
- M7 Free course: EBSCO for information retrieval. *Nick Vos & Annemieke Meijer*

■ Tuesday Morning (9.00-12.30)

- T1 Cochrane Library and Evidence-based medicine.
Carol Lefebvre
- T2 Text retrieval and bibliography formatting software. *Eric Sieverts*
- T3 Wir mache ich mich und meine Bibliothek fit für's Jahr 2000. *Oliver Obst*

■ Tuesday Afternoon ((13.30-17.00)

- T4 Datenbanken der Cochrane & Quellen zur Evidenz-Basierten Medizin
Reinhard Wentz, Carol Lefebvre u.a.
- T5 Hybrid Internet sources and information transfer. *Paul Nieuwenhuysen*
- T6 Scientométrie: connaissance et phénomènes génomiques. *Marie Angèle de Looze*
- SIG Editors Medical Library Journals Association Newsletters

■ Tuesday Whole day (9.00-17.00)

- T7 Accessing, evaluating and organizing medical information on the WWW.
Lisa Blankenship & Lynn Fox
- T8 Encouraging innovation at work. *Beryl Morris & Keith Bonson*
- T9 NLM Medical Subject Headings (MeSH). *Marie Monik & Gun Brit Knutsson*
- T10* Visit Universiteit Maastricht Medical Library and StudyLandscape for PBL.
Fons van den Eeckhout & Sieb Bohlken
- T11* Visit Tilburg University Library. *Miebet Wilhelm & Gemma Geertshuis*

■ Wednesday Morning (9.00-12.30) at the Uithof (University Campus)

- W1 International Public Health Information on the Internet. *Anke Scheiber*
- W2 Des serveurs Web pour les professionnels de l'information biomédicale. *Corinne Verry*
- W3 Genome and molecular biology information for librarians. *Frank Norman*
- W4 Information specialist/librarian: link between author and publisher. *Micheline van Migro*
- W5 Copyright and the electronic library.
Charles Oppenheim
- W6 Databases in medicine and health care.
Christine Wickman

■ Wednesday Afternoon (13.30-16.30) Jaarbeurs Conference Centre

- W7* SYMPOSIUM ON EVIDENCE-BASED MEDICINE: PERSPECTIVES AND ROLES OF THE HEALTH LIBRARY.
Jenni Tsafirir & Barbara Aronson

- 12.00-13.00 EAHIL Board meeting
13.00-14.30 EAHIL Council meeting
12.30-13.30 / 13.30-15.00 / 15.00-16.30
Special Interest Group meetings

* restricted to registered participants of the conference!



Finlande que les différents ministères ne coopèrent pas beaucoup, mais ce consortium de bibliothèques médicales va maintenant agir comme parapluie pour tous les types de bibliothèques médicales.

Les bibliothèques médicales finlandaises sont généralement administrées par le Ministère de la Santé et des Affaires Sociales ou le Ministère de l'Education. Nous espérons donc rassembler les bibliothèques médicales universitaires, les bibliothèques hospitalières, les bibliothèques de recherche en sciences de la santé et les bibliothèques de l'administration nationale médicale sous ce parapluie. Nous espérons même que les centres de santé communautaires pourront en bénéficier. Si nous réussissons à réunir tout le monde, nous aurons déjà accompli un pas supplémentaire dans le dépassement des obstacles bureaucratiques.

Dans les stratégies nationales, il se passe aussi d'autres choses excitantes. La bibliothèque universitaire d'Helsinki, qui est la bibliothèque nationale de Finlande, développe divers projets de digitalisation de notre patrimoine national. Nos collections nationales sont déjà accessibles par internet pour tous les citoyens grâce à un effort commun des bibliothèques, musées et archives. Un projet spécial est en train d'organiser la conservation à long terme des documents distribués sur internet et un autre recherche les possibilités de conditions contractuelles équitables pour les publications électroniques pour les bibliothèques, sociétés savantes, éditeurs et sociétés de copyright.

Le Ministère de l'Education a publié fin 1997 un fascicule sur les stratégies nationales intitulé "La société de l'information en Finlande : les stratégies de l'information du Ministère de l'Education". Ce document est disponible sur simple demande auprès de l'auteur de cet article.



In 1995, a Government position paper outlined an information society strategy stipulating that each administrative branch prepare detailed action plans to implement the strategy with the aim of providing every citizen the opportunity to acquire the new skills needed to obtain access to the information. The Ministry of Education focuses its activities on education, research

and culture, providing the institutions concerned with modern information networks, and guaranteeing schools at all levels the opportunities to use the networks and the services offered by them. Libraries are also included in this development, since they are considered crucial in providing these services to everybody.

Implementation of these idealistic goals is going well, and the Ministry of Education concentrates on two fundamental issues: networking the education system using the latest technology, and guaranteeing the basic skills necessary to use that technology to everyone. Great emphasis is laid on schools and public libraries in order to secure every citizen access to information. This is a good example of the idea of Nordic democracy, which we are rather proud of. There is now a third essential issue emerging: we do not need the technology unless we have subject content in it. The Government is now supporting and encouraging small and medium-size enterprises to produce content to be used in all learning environments using new technology.

There are two features in Finnish society which facilitate the implementation of these goals: the general education standard of the whole nation is high, and in certain fields of data communication, Finland is one of the leading countries in the world. As early as the mid 1980s, the Ministry launched the Finnish University Network, FUNET to secure telecommunication links between Finnish universities and the national research community. There is a third reason, too, which is not usually mentioned in official situations: we are a nation that can be called a nation of one issue at a time. Because we have a population of only 5 million, everyone knows immediately what is going on in the country, and if we think it is a good idea, we all concentrate, enthusiastically, on that one and only thing. To take one example, we now have more mobile telephones per capita than any other country in the world. And Finns who hardly ever voluntarily talk to other people face to face, endlessly chat on mobile phones, even in public places, so that everyone can hear everything.

Within the frame of this overall strategy, all research libraries, including and especially medical libraries, are rather advanced in information technology. There are certain requirements with data security that still prove an obstacle for hospital

libraries, but the technology is developing all the time. Medical libraries in Finland have now formed a consortium, with the initiative from the Central Health Sciences Library in Helsinki, in order to jointly negotiate licences with big database producers. The competition between the publishers, producers and vendors is hard, and we are trying to make the best of it at a reasonable cost. In Finland it is a tradition that different ministries do not co-operate very much, but this medical library consortium will now act as an umbrella for all types of medical libraries. Medical libraries in Finland are usually administered by either the Ministry of Health and Social Affairs or the Ministry of Education. Now we hope to get university medical libraries, hospital libraries, health sciences research libraries, libraries under national medical administration all under this umbrella, and we hope that even community health centres will benefit from this. If we succeed in bringing them all together, one step forward in overcoming bureaucratic obstacles will have been taken.

Within the national strategies, there are also other exciting things happening. Helsinki University Library, which is the National Library in Finland, runs several projects in digitising our national heritage. Our national collections are already available on the Internet for all citizens as a result of a joint effort by libraries, museums and archives. A special project is going on to organise the long-term preservation of documents distributed on the Internet, and another one is researching the possibilities of fair contractual conditions of electronic publishing for libraries, learned societies, publishers and copyright organisations.

The Ministry of Education published a booklet on the national strategies in late 1997. It is called "The Information Society in Finland: The Information Strategies of the Ministry of Education and their Implementation". Anyone interested in having a copy of the publication can order it from the writer of this article.

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Nordic Association for Medical and Health Information

L'Association Nordique pour l'Information Médicale et de Santé

L'objectif principal de l'association est d'augmenter la collaboration entre les bibliothécaires nordiques spécialisés en médecine, soins infirmiers et santé – donc de renforcer la connaissance des spécialistes et encourager le développement. L'association est un conglomerat formé par les associations nationales du Danemark, de la Finlande, de l'Islande, de la Norvège et de la Suède. Les membres de ces associations nordiques sont attachés collectivement à l'Association.

L'Association Nordique est dirigée par un Conseil composé de deux membres de chaque pays nordique. Les membres du conseil sont nommés par leurs associations nationales respectives.

Le conseil est responsable de :

- s'assurer que le conseil se réunit au moins une fois par an, dans les pays membres en alternance ;
- que chaque année, SESAM, le magazine commun, soit édité ;
- d'organiser tous les quatre ans une conférence nordique pour les bibliothécaires médicaux.

Réunions

A la fin des années 80, des membres des associations nordiques de bibliothécaires médicaux se sont rencontrés lors d'une conférence à Stockholm, Suède, et l'idée d'une association nordique naquit. En 1992, les membres se sont réunis à Reykjavik, Islande, et ont traité de la collaboration nordique, la formation continue, le prêt interbibliothèque et l'Europe de l'Est. La réunion inaugurale du conseil eut finalement lieu à Åbo, Finlande, en mai 1993. Depuis, les réunions se sont tenues une à deux fois par an – souvent en relation avec les conférences nordiques, les conférences ou ateliers de l'AEIBS. A Oslo, le Conseil s'est tenu pendant la conférence de l'AEIBS en 1994. Le Danemark a accueilli la réunion du conseil au cours de la 4e Conférence Nordique des Bibliothèques médicales et de santé en 1995.

La réunion de 1996 a eu lieu pendant la conférence de l'AEIBS à Coimbra tandis que celle de 1997 prenait place dans le cadre de l'atelier de l'AEIBS à Budapest.

SESAM : un magazine nordique commun-

Chaque année un magazine nordique commun paraît. C'est en Islande que le premier numéro a été édité et baptisé

SESAM, nom qui est resté depuis. Chaque année les responsabilités éditoriales incombent à un pays différent, mais tous les pays nordiques participent à la rédaction et aux frais.

Conférences

Un des objectifs de l'association est d'organiser tous les quatre ans une conférence pour les bibliothécaires médicaux et de santé. Le cycle de conférences en bibliéconomie médicale nordiques a débuté en Norvège et a continué en Suède et en Finlande. La première Conférence organisée sous les auspices de l'Association s'est tenue à Copenhague, Danemark, en 1995, avec deux jours de sessions précédées par un jour de cours de formation continue. La 5e Conférence Nordique pour les Bibliothèques Médicales aura lieu à Reykjavik, Islande, du 2 au 5 juin 1999. Le thème de la Conférence est "L'an 2000 : les bibliothèques médicales dans un nouveau millénaire". La langue de la Conférence est l'anglais. Ces Conférences sont vivement recommandées !



The Association's overall objective, is to increase collaboration between Nordic librarians specialized in areas within medicine, nursing and health - thus strengthening the specialist knowledge and encouraging development. The Association is a conglomerate consisting of the national associations in Denmark, Finland, Iceland, Norway, and Sweden. Members of these Nordic associations are collectively attached to the Association.

The Nordic Association is governed by a Board consisting of two members from each Nordic country. Members of the Board are appointed by their respective national associations.

The Board is responsible for the following:

- To ensure that the Board meets, at least once a year, alternating between the membership countries
- That each year, a joint Nordic magazine (SESAM) is produced.
- That once in every four years, a Nordic conference is arranged for Medical Librarians.

Meetings

In the late eighties members from the Nordic medical library associations met at a

conference in Stockholm, Sweden and the idea of a Nordic Association came up. In 1992, members met in Reykjavik, Iceland and discussed Nordic collaboration, continuing education, interlibrary lending and Eastern Europe. The Board's inaugural meeting was finally held in Åbo, Finland in May 1993. Since then meetings have been held once or twice every year - often in connection with Nordic conferences or EAHIL conferences or workshops. In Oslo the Board met during the EAHIL conference in 1994.

Denmark hosted a board meeting in connection with the 4th Nordic Conference for Medical and Health Libraries in 1995. The 1996 meeting was held during the EAHIL conference in Coimbra while the 1997 meeting was held at the EAHIL workshop in Budapest.

SESAM : a joint Nordic magazine

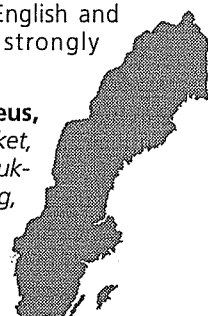
Every year a joint Nordic magazine is produced. The first time Iceland was editor the magazine was given the name SESAM and has been called so ever since. The responsibility for the editing of the magazine lies with a different country every year but each Nordic country contributes with articles and ads to cover the costs

Conferences

One of the objectives of the Association is to arrange conferences for medical and health librarians every four years. The suite of Nordic medical library conferences started in Norway and was followed by conferences in Sweden and Finland. The first conference organized under the auspices of the Association was held in Copenhagen, Denmark in 1995 with two full conference days introduced by a day of continuing education courses.

The 5th Nordic Conference for Medical Libraries will be held in Reykjavik, Iceland, June 2-5 1999. The theme of the conference is "The year 2000: Medical Libraries in a New Millenium". The Nordic conference language is English and the conferences are strongly recommended!

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Literature information applied to clinical practice: the clinical Librarian

La littérature d'information appliquée à la pratique clinique : le Bibliothécaire clinique

L'objectif le plus important d'une bibliothèque d'hôpital, outre la livraison d'information aux unités de recherche et de formation de l'institution, est de satisfaire les besoins des médecins en formation continue et de les tenir à jour sur les avancées de la connaissance médicale. En outre, de plus en plus fréquemment, les services des bibliothèques d'hôpitaux sont utilisés pour fournir de l'information afin de résoudre des problèmes cliniques. Les services des bibliothèques d'hôpitaux doivent fournir une documentation hautement spécifique, des recherches de littérature médicale

étroitement liées à des cas cliniques de manière à influencer le traitement du cas en cours. Au cours des dernières décennies, le bibliothécaire clinique servait à procurer une visibilité et une croyance à la bibliothèque en science de la santé à titre d'entité intégrale dans l'environnement de soins de santé. Récemment, la médecine basée sur l'évidence est devenue un concept d'importance croissante. Pour faire face à l'évolution rapide de la médecine, les médecins doivent rester en contact avec beaucoup de nouvelles thérapies et techniques de diagnostic, mais il ne leur est pas possible de lire tous les articles publiés. Ils ont besoin de bibliothécaires experts pour réduire l'écart entre la littérature disponible et sa pertinence pour les soins de santé. Donc, les bibliothécaires actuels doivent jouer un rôle plus important dans l'accès et la gestion de l'information, et, aujourd'hui plus que jamais, des bibliothécaires et documentalistes très qualifiés sont nécessaires. Ils devraient être capables de comprendre la littérature qu'ils gèrent aussi bien que les concepts fondamentaux tels les vocabulaires contrôlés, les langages documentaires, etc. Tout donnera aux bibliothécaires hospitaliers un futur excellent dans l'environnement des sciences de la santé.

The most important objective in a Hospital Library, besides delivering information to research and education units in the institution, is to satisfy the physicians needs in continuing medical education, and to keep them up to date with advances in medical knowledge. In addition, more and more frequently, hospital library services are used to provide information for clinical problem solving.

Hospital Library services must provide highly specific, case related medical literature searches in a manner that allows the information obtained to influence ongoing case management. Over the last decade the Clinical Librarian would serve to provide visibility and credence to the health sciences library as an integral entity in the health care environment. Recently Evidence Based Medicine is an increasingly important concept. To cope with the rapid evolution of medicine, physicians need to remain abreast of many new therapies and diagnostic techniques, but it is not possible for physicians to read all the papers published. They need expert librarians to bridge the gap between the volumes of literature available and its relevance to health care.

So, librarians must play a greater role in the access to and management of information, and now, more than ever, highly qualified librarians and document-

alists are needed. They should be capable of understanding the literature they manage as well as basic components like controlled vocabulary, structures, document languages, etc. All this will give hospital librarians an excellent future in the Health Sciences environment.

The most important goal of a medical library in a hospital is to provide all its institution professionals (physicians, nurses, pharmacists, administrators, etc.) the necessary support information for three basic hospital objectives: clinical practice, research and education.

However, hospital-located medical libraries present a special characteristic: in addition to providing information for research and education, their most important objective is to give information for better patient health care, a feature which makes them unique.

In this way, the information provided can be looked at from two perspectives: information provided on a daily basis, to keep health professionals knowledge up to date; and information aimed at specific case-related need, to assist in diagnosis and treatment. The impact of Hospital Libraries upon decision taking has been widely studied in the last years⁽¹⁻³⁾. The study carried out by Rober Veenstra in the Hospital at Hartford, Connecticut, reviews the literature focusing on the service

provided by libraries to patient care⁽⁴⁾.

It may well be, therefore, that the characteristics which can better define the hospital library are the dynamism which should be present in every exchange of knowledge, its scientific accuracy and comprehensiveness. Hospital librarians are well aware of the importance of the speed at which the information is given, especially if dealing with cases related directly with a patient. On the other hand, this information must be gathered and spread as accurate, comprehensive, current, relevant, precise and scientifically proven as possible.

The recent revolutionary advances in genetic and biologic research are changing the practice of medicine. The quantity of current information which is generated is impossible to handle. It is estimated that medical literature grows 6-7% yearly, and it is twice as big every 10-12 years; the number of journals printed annually is approximately 25,000⁽⁵⁾. This information overload is not showing any decrease, and must constitute a major issue for medical practice. Information must be synthesized, stored and handled or it will saturate and lead to the collapse of communication channels which will lose all their potential applications.

The difficulty that arises with the use of literature which appears in journals lies,



FEATURE ARTICLES

mostly, in the time needed to peruse it and retrieve the proper information. Electronic retrieval systems have solved the problem of having access to bibliographic references, article abstracts, and even to complete articles which can be applied to specific situations.

This makes the Hospital Library much more than a collection place, located in a building with a better or worse infrastructure. The new Hospital Library should be the starting point from which the user can start his search of any information he needs in the best conditions. What we have traditionally called, Hospital "Library", must now be a specialized information and documentation service aimed at providing health professionals with the information they require, using currently available means, traditional (paper) and electronic, and advanced technologies. Today's hospital library should be headed by real information professionals who can manage this kind of service and who can guide the users through what is currently available in a sea of information.

Within the activities of these professionals as providers of bibliographic information for patient care, a new figure has arisen: that of the Clinical Medical Librarian⁽⁶⁾. The main task of the Clinical Librarian is to provide doctors with very specific information whilst treating a patient. The Clinical Librarian is part of the group, during clinical sessions, medical conferences and other activities; this allows him to acquire an exact knowledge of the medium and a way in which he can contribute to the group.

From the beginning of the 70's, health care applications include the formation of multidisciplinary groups made up by doctors, pharmacists, nurses, nutritionists, social workers and psychologists. Librarians saw the opportunity to have a place in this group as specialists on biomedical literature, they would accompany the doctor on his visit to the patient and then would go back to the library to search for relevant literature related with the specific case⁽⁷⁾.

The knowledge acquired by the librarian in these activities helps him to understand, analyze and answer efficiently specific clinical issues with qualitative-searched related information. The work of the clinical librarian save time for the doctor, localizes the currently available information

and increases the use of the library resources.

Nevertheless, looking further at this trend, in the last few years a new term has been coined, in a way that nowadays it has acquired the category of an authentic paradigm if we want to understand the current discipline of Medicine. This concept is known as Evidence-Based Medicine, and functions as keyword in the Medical Subject Heading of the National Library of Medicine, in the United States.

By Evidence-Based Medicine (EBM) we mean the number of studies carried out according to strict methodological accuracy in which the potential benefits have been demonstrated⁽⁸⁾. The origin of the EBM goes together with the new epidemiological and statistical methods in clinical research, mainly in randomized clinical trials and meta-analysis and systematic review of literature. Its aim is to have available the most relevant scientific information (the evidence) as possible, in order to implement it into the clinical practice.

*EBM
are the studies
carried out with
methodological
accuracy
demonstrating
potential benefits*

Evidence-Based Medicine has a number of strategies such as the quick retrieval of issues and studies that are directly relevant to an arising clinical problem, the critical revision of these studies and the implementation of the results into the best practice in relation to the clinical problem. All of this process should be linked with the application of the proper scientific method in order to determine the optimal treatment for each particular patient.

As a result, Evidence-Based Medicine has its basis in the systematization of a search process of the relevant information in order to be applied to specific clinical cases; the said process can be described following these steps:

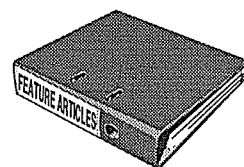
Designing a clear question having as its starting point the specific clinical cases to be analyzed, Searching systematically the evidence available in the literature in order to identify the relevant works in the field, Evaluating the scientific evidence, analyzing at the same time the validity and utility of the depicted results and Putting into practice the final findings.

However, it is obvious that in order for the retrieved information to have all the quality guarantees, relevance and scientific accuracy, to be used for a better patient treatment, several searching techniques must be used. These techniques must make it possible to retrieve from the existing huge volume of information, the actual information that will be finally necessary for this aim.

It is here where the hospital librarian-documentalist has to put into practice all his knowledge and skills. This fact makes more and more obvious the necessity for experts in Health Sciences and in managing systems. Professionals who gather the required knowledge in order to distinguish from among the different kinds of scientific works those appropriate to each case. Since the result of a search varies a lot depending on whether it has been carried out by an expert, it is necessary to take into account how each information resource has been designed and structured, and to be acquainted with the whole set of available resources.

Physicians are more and more aware of the importance of being skilled at the time of searching the medical knowledge and the necessary abilities that will help them to increase their cognitive potential. So showed a study, of compulsory reference carried out on more than 700 physicians, in which the authors concluded "health professionals require substantial help to have all their scientific information requirements satisfied."⁽⁹⁾

For example, in the respect of the correct use of the internationally reputable MEDLINE, it is absolutely necessary to have a good knowledge of the way it is constructed and its possibilities. In order to exploit all its potential, it is necessary to take into account different aspects such as the use of the thesaurus, which includes



more than 17,000 terms, apart from the new concepts that are being added each year, the modifications to the already existing terms and concepts, etc. All this requires knowing how to locate the specific term used to represent a specific concept as well as knowing how to differentiate the different subject fields. It is also essential to have in mind the terminology used by the database, and to have the capacity of distinguishing what is relevant and what is not, since some words that the non-expert user employs may lack meaning being too unspecific, too general. At the same time, it is essential that the subheadings are properly used to limit the retrieval of information, such as diagnosis, epidemiology, etiology, or even the use of the check tags, which show very wide attributes referring to the content of the articles such as geographical data. All this is part of an experts training; he has got his skills with study and experience, and these cannot be improvised.

In this way, in order to retrieve useful information for the health professional it is essential to establish a search strategy which allows for the selection of those relevant studies to be then applied to each professional's purpose.

Thus the librarian must have a series of abilities which allow him not only to manage and handle the available information, being up to date with all the current different access and retrieval systems, but also, and even more importantly, to understand the information he is handling. In order to do this, it is essential to be acquainted with at least three languages: the documentalist, the natural languages, mainly English, and the scientific one.

The Medical Library Association, since the beginning of the 90's have developed "The Task Force on Knowledge and Skills", aware of the fact that the changes in the information world have conditioned the librarian's formation. However, though it is essential (it could not be any other way) the incorporation of the technologies into the daily functioning of libraries or documentation and information services, this profession evolves in a medium with a developing volume of information⁽¹⁰⁾. The way in which this information is produced is secondary "the container is not the information", though it is true that this conditions the retrieval tasks, in a way that the professionals should take into account two essential facts: The increase of the

volume of information which needs to be selected. The necessity of organizing it and spreading it in a way that its results can be used efficiently.

In Spain there are authors such as M.F. Ribes Cot, who in a widely documented study, lists a number of skills that the librarian profile ought to have today. She mentions, firstly, the importance of continuing education in order to keep up to date these professionals' knowledge, at the rhythm of his surrounding world. She also emphasizes the need for good preparation in aspects such as management and administration, languages, terminology, knowledge of the basic concepts of medicine, teaching techniques, research methodology, and knowledge of current technologies and marketing⁽¹¹⁾.

Among all these usual tasks of the hospital librarian-documentalist, we should perhaps underline one of them which has been gaining importance over the last few years. As experts in the retrieval of information, librarians have assumed the role of teaching the use of databases to users so that they can perform comprehensive and relevant searches. The teaching role of the hospital librarian-documentalists has developed widely, mainly from the 90's onwards, with the generalization of the use of technology, turning it into one of their daily tasks. In a recent study about hospital libraries in Spain it was found that the 64% of the librarians were teaching the use of databases to their users (12). This is general practice in other countries such as the United States, Canada or Australia where this activity is very common among their respective standards in the hospital libraries.

But even after training for the end users to be able to search properly, the role that the librarian plays as an advisor should be highlighted. The librarian-documentalist has the training and the knowledge of the nomenclatures, conceptual hierarchies, resources, facilities, etc, which will be the bridge between the information systems and the users. It is, therefore, usual that the librarian is often consulted either in order to build up a search strategy, for the selection of a keyword, the proper database, etc.

From what is said above, to which many other comments could be added, we can conclude that the hospital librarian-documentalist of today has a wide range of activities in front of him. He is part of a

multidisciplinary group of professionals involved in the task of offering the best health care to the Community. From the professionals point of view, he has the opportunity of occupying a relevant position within his institution from where he is able to offer his services as the provider, by definition, of the information in a place where it is essential.

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Knowledge management : a changing scene for information professionals.

Au début de la connaissance médicale, celle-ci était transmise oralement. Plus tard, les bibliothèques ont fait office "d'entrepôt" des données. Aujourd'hui, la croissance exponentielle des informations requiert organisation et stockage des données. Les bibliothèques deviennent virtuelles, le rôle des bibliothécaires et documentalistes change. Un nouveau défi apparaît, récupérer le savoir, en organiser ses données. L'industrie pharmaceutique s'intéresse à cette nouvelle donne de l'information. Mais l'exemple de l'organisation du savoir au CEA (Commissariat à l'Energie Atomique) sous la houlette de Jean-Louis ERMINE nous a paru intéressant.

For many centuries medical knowledge was passed on to successive generations of physicians orally. Later, the library was the place where knowledge was stored. Today the extraordinary growth of medical information make it essential to organise and store information in files, databases, etc. that can be searched using keywords, concepts, and such like. Libraries have thus become "virtual libraries". The introduction of CD-Roms and the Internet in libraries has changed the relationship between information professionals and their customers, and now we speak of "disintermediation".

We are likely to face another challenge in the near future: "knowledge management". To find and store information is not "knowledge". Knowledge is a whole of many abstract or real elements, a complex system where information is only the visible part, the raw part. The term "knowledge" is used to refer to the information, skills and resources that individuals need to perform complex jobs or solve a problem. Sharing of knowledge among staff increases their efficiency in tackling and solving problems. Everybody, in every project team in a company or institution must be able to profit from this knowledge. This implies an ease of access to information, its sending and retrieval. An organisation's efficiency is measurable by its capacity to adapt itself to a generation of new knowledge and to make use of it. Knowledge is matter and must be transformed following a process of creation. Adding value to existing knowledge creates new knowledge. So people must have the knowledge they need at their disposal at the right time.

The importance of knowledge has always been recognised but until now organisations have not felt able to manage it. This picture is gradually changing as models, methods, tools and techniques are becoming available. Today, knowledge can be managed with many tools or containers, on many platforms. All the containers for documents (word, notes, html pages from web, database, etc.) form the knowledge warehouse.

A new family of tools, such as push and pull technology, makes access to the warehouse easier. Some large pharmaceutical groups have started with this new strategy, but a very good example is the CEA -Commissariat à l'Energie Atomique - a French institution that does research in various domains. At the CEA production of knowledge (scientific, technical, basic, operational) is very important. Its targets are industrial, national, international, civilian, military, and strategic. Management of this knowledge is essential and is done on a traditional basis: publications, conferences, documentation, networks. However, the strategic value of this knowledge was such that a new management approach was needed. A specific department of knowledge management was created in 1995 lead by Jean-Louis Ermine, who is very well known in the knowledge management world. His task was to find methods to collect researchers know-how and technologies and to manage them⁽¹⁾.

At the CEA this management has given rise to new activities, as consultants and experts. Knowledge management stays at the departmental level whereas the database of information is central. The knowledge management department has multiple functions: capitalization, enhanced value, quality assurance, document management, training. The department provides a guarantee of uniformity. It has also to analyse why each request for information is made and to take the most appropriate action for each case. A good knowledge of the tools, techniques and problems is required to adapt analyses and methodology. The success of the architecture of knowledge management is based on the diversity of the containers and how the new knowledge structure can absorb novelty. In the face of these continuously changing scenes we need to reassess our way of thinking. Could information professionals have a role in knowledge management? We are familiar with the terms "information resources", "Information management". Information is a resource that needs to be managed to be useful in an organisation. Now we must start to look at "knowledge" as a resource as well.

Knowledge is the full utilisation of information and data, coupled with the potential of people's skills, ideas, intuition, commitments and motivations. It is stored in the individual brain or encoded in organisational processes, documents, products, services, facilities and systems.

The ability to manage all this knowledge comprises the practices, processes and technology used to collect, organize and distribute knowledge to people who need it. Knowledge management technology can make it possible to involve people directly in solving their own problems, can reduce the cost of staff training and increase the effectiveness of the training. L.B. Smith describes the know-how of the "knowledge officers" ⁽²⁾. They pick up where technology leaves off, masterminding what information should be distributed on the network and galvanising troops to share it. The ideal knowledge officer candidate must have a grasp of the technical infrastructure, the ability to decide what information is essential and work independently. One of the three profiles proposed to fit this new career is "an information technologist, primarily interested in architecture and how information is collected and dispersed". Our know-how and experience in collecting, selecting, organising and distributing information could help information professionals contribute to the organisation of a knowledge base. One of the first things to do is to weed out the old and obsolescent thinking, just as we have done for printed material.

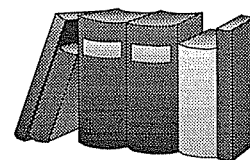
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Dear colleagues,

The article "Effective use of health care information" referred to R. Smith (editor of *BMJ*) claim that "experienced doctors use about six million pieces of information to manage their patients and that about a third of doctors' time is spent recording and synthesizing information". In addition *JAMA* launched a call for paper inviting submission of manuscripts of systematic studies of the quality of medical information available in various online venues, including methods of quality assessment and improvement. The Internet in this article is defined "a source not just of information but of misinformation" and asks "can the Internet improve the way physicians learn and to make better-informed health care decision?" I think that librarians and information professionals can contribute to this process and I hope in the near future to see some of our papers published on this topic in the medical literature.

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JOURNAL ISSUES

The following journal issue of *Health Libraries Review* has been received : vol. 14, 1997, no. 4

Bonnett : Editorial – Effective use of health care information. p. 199.

Merry : Effective use of Health care information. p.201-208. This paper present a new book commissioned by the British Library. Health managers require access to literature-based information as well as statistical and operational data. Providing for these needs present librarians with a number of problems. The book looks at research in the field and highlights opportunities for health care librarians.

L. Cooper : How much should it cost ? An introduction to management use of costing information. p.209-217. Many libraries are requested to cost their services. This paper discusses the various reasons for costing services and how costing information can influence the management decision making.

Forrest and A.M. Cawasjee : Costing the library services. Cairns Library : a case study. p. 219-232. Libraries have to adopt a business approach to funding submissions. The Cairns Library has introduced an ongoing costing exercise covering the different services. The direct costs and the indirect costs have been identified and allocated/apportioned to the individual services.

S. Capel, L. Banwell and G. Walton : Library and information services to support the education and development of nurses : the management of co-operation and change-a clash of two cultures. p. 233-245. The aims of the study are to investigate the organisation and funding of library and information services to the nursing profession. The paper focuses on the lack of co-operation and communication between the National Health Service and higher education cultures in the provision of services to nurses.

Innovation on Internet. p.247-250

Anagnostelis Series Editors.

J. Stephenson and C. Flowers : South and West Health Care Libraries Home Page : providing a local interface to health-related Internet resources.

A. Booth : Becoming ADEPT. p.251-252

- Sleepless in Seattle : report on the 97th Annual Meeting of the Medical Library Association (MLA), Seattle, Washington, 24-28 May 1997
- Partners in Care : Community Care Network Conference and the James Gracie Centre, Birmingham, 1-2 November 1996
- LA Under One Umbrella Conference, UMIST, Manchester, 27-29 June 1997
- Problems! Problems! Tomorrow's Doctors : Learning Skills and Information Needs. University National Heart and Lung Institute, London 4 November 1996
- 20th Anniversary Conference of the United Kingdom Serial Group, Heriot-Watt University, Edinburgh, 7-9 April 1997
- Yet More Evidence... R & D in Health Information (J. Palmer) p. 263
- National and International News. (B. Madge) p. 267

BOOKS REVIEW

Technology and Management in Library and Information services. By F.W. Lancaster and B. Sandore. 1997. £ 37.50. *Library Association Publishing*. The authors examine "the logical intersection" between management and technology. They provide a comprehensive review of the library and information science literature on the subject, including citations from the European literature.

PAPERS REVIEW

Computers, the Internet and the Practice of Medicine : A call for papers. A. Winker and W.M. Silberg, *JAMA*, 1998, 279, 66.

Rating Health Information on the Internet. Navigation to knowledge or to Babel. A.R. Jadad et al., *JAMA*, 1998, 279, 611- 614.

A job for the professionals. Defining an employee in the information sector.

Infield, Information World Review, February 1998, n.133, 16.

Future information infrastructure as a base for the knowledge society - a comparison of librarianship in East and West. E. Simon and K.A. Stroetmann, *New Library World*, 1998, 99, 20-30.

INFORMATION SOURCES

..... CD-Rom

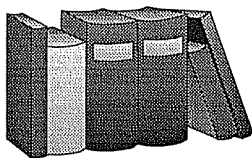
Encyclopedia of Neuroscience. More than 800 contributions from experts, include color illustrations, graphics, animations, video sequences and clips. It is designed to serve the ready-reference needs to both the specialist in neurosciences and non-specialist reader. The CD-Rom can be installed either under Windows'95 or on Macintosh. *Elsevier Science*, \$ 169.95 single-user version.

NEWS

Ebsco Subscription Services is currently projecting a price increase for 1999 subscriptions of 9.5 to 11.5 percent for U.S. journals and 9 to 11 percent for UK journals and journals published in Continental Europe. These projections are based on historical price increase data, preliminary information received from publishers and exchange rates available at date of release. For conservative budgeting, the recommendation is to add 2 to 5 percent to the estimated price increase for non-domestic journals to protect budget from a weakening of the currency in which they are invoiced between now and when subscription rates are paid.

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PUBLICATIONS AND NEW PRODUCTS

Book review

The Hidden Structure - The life of Camillo Golgi

Paolo Mazzarello

Introduction by Enrico Solcia - Foreword by Alberto Calligaro, pgg I-XXI; 1-584. Edizioni Cisalpino Istituto Editoriale Universitario, Collana Fonti e Studi per la storia dell'Università di Pavia: per il 550° anniversario della fondazione dell'Ospedale S. Matteo di Pavia

Ce volume puissant et très bien documenté vient combler le vide causé par l'absence d'une monographie complète et organisée sur la vie et l'œuvre de Camillo Golgi. Paolo Mazzarello, neurologue et chercheur à l'Institut de génétique biochimique évolutionnelle du Conseil National de Recherche à Pavie, retrace chronologiquement la carrière et la vie de Camillo Golgi, couvrant une période fondamentale de l'histoire de la biologie : l'origine de la neuroscience. L'histoire des découvertes, ainsi que leur développement dans un contexte scientifique pertinent, sont décrits dans une analyse détaillée des contributions primaires de ce grand scientifique. Pour en découvrir plus sur ce Prix Nobel (1906) et son concurrent Santiago Ramon y Cajal, n'hésitez pas à vous plonger dans cet ouvrage important sur l'histoire de la neurologie.

For a long time, the lack of an organised and complete monograph on Camillo Golgi's life and work has been regarded as a remarkable gap, even outside of Italy. The powerful, very well documented, nonetheless easily legible volume of Paolo Mazzarello, neurologist, researcher at the Institute of Biochemical Evolutional Genetics of The National Research Council, Pavia, now fills in this gap. Camillo Golgi's life and scientific career are chronologically followed, a basic period in the history of biology - the origin of neuroscience - being illustrated. The history of discoveries, as well as their development in the relevant scientific context, are described, within a detailed analysis of the primary contributions of this great scientist.

The author dwells upon one of Golgi's main prides, that he was the master of many researchers. In the historical picture of contemporary Italian science, the school of Histology and Pathological histology of Camillo Golgi in Pavia only compares with the school of Nuclear Physics in Rome, gathered around Enrico Fermi in the Institute of via Panisperna, and with the school guided by Giuseppe Levi, master of Renato Dulbecco and Rita Levi Montalcini in Turin.

Camillo Golgi was trained in the University of Pavia, where the study of histology, or microscopic anatomy, was based on a rigorous morphological tradition, strictly adhering to experimental data and interpretations as corollaries of observations.

In about 1873, Golgi experimented with the black reaction. Potassium dichromate hardened tissue samples were stained with silver nitrate. This enabled the view of the nervous cells in silhouette, with its detailed and well defined outlines and all its composite morphology, and gave the chance to trace and analyse a long tract of all its branching. The main finding of this

method, which still remains unexplained, was that some cells were only black-stained by silver, while most of them were not affected. Therefore, individual elements came out of the background puzzle. The black reaction allowed a topographic description of various cell groups in the nervous mosaic, resulting in a detailed microscopic neuroanatomy. Golgi discovered this process in a country town, equipped with his microscope only, after many attempts, and by virtue of his great intuition, as well as by a good deal of luck. He perceived the importance of his discovery immediately.

Later on, the scientist carried forward his studies on the structure of the central nervous system, dealing with the sensitive nerve endings of tendons. It had already been established that nerves penetrate tendons, together with vessels. However, the current investigational methodology was strictly morphological, therefore the ending pattern was completely unknown.

Golgi's method resulted in a decisive research innovation. In about 1881 he discovered a sensory corpuscle in tendons, later called Golgi's neurotendinous terminal organ, and in 1897-98 the internal reticulus, better known as Golgi complex or apparatus, one of the basic cellular components.

The "reticularist theory" had a strong influence on studies about the nervous system and imposed an olistic view of the nature of system functioning in the second half of 19 century. Golgi always maintained his strong belief in this theory, even when the individualism of nervous cells started being proved. This was the neuronist theory, which became established in the next decades. Golgi's faith in tradition misled him along way in his following studies on the subject. In 1887, the Spanish scientist Santiago Ramon y Cajal started with his studies on the

central nervous system with the black reaction. He became the most strenuous advocate of neuronism against reticism, and Golgi's most fierce scientific rival. Moreover, the personalities and attitudes of the two scientists were radically different - and clashing. The volume gives a vivid picture of this contrast. Cajal work fully acknowledged Golgi's investigational method, increasingly used by scientists, according to Cajal's, not Golgi's, view. Within a couple of years, Cajal devised the law of dynamic polarisation. Neurones transmit nervous impulses with specific directions and towards specific objectives, transmission is not indiscriminately addressed to the whole nervous system.

Everything became simpler, compared to the more chaotic nervous structure advocated by Golgi, where the highly complicated interlacement was the guarantee of a higher number of intercellular relations. However, at present the epistemological value of this dualism is the most interesting aspect of Golgi-Cajal contrast. Both the scientists were conditioned by their own theory, which sometimes acted as an ideological "filter" against experimental data, thus becoming also an investigational instrument.

The contrast between "reticulists" and "neuronists" lasted until the complete victory of neuronists, thanks to the contribution of the electron microscope. Both scientists won the Nobel prize in 1906.

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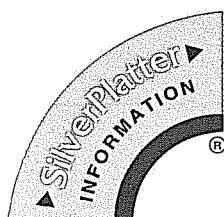
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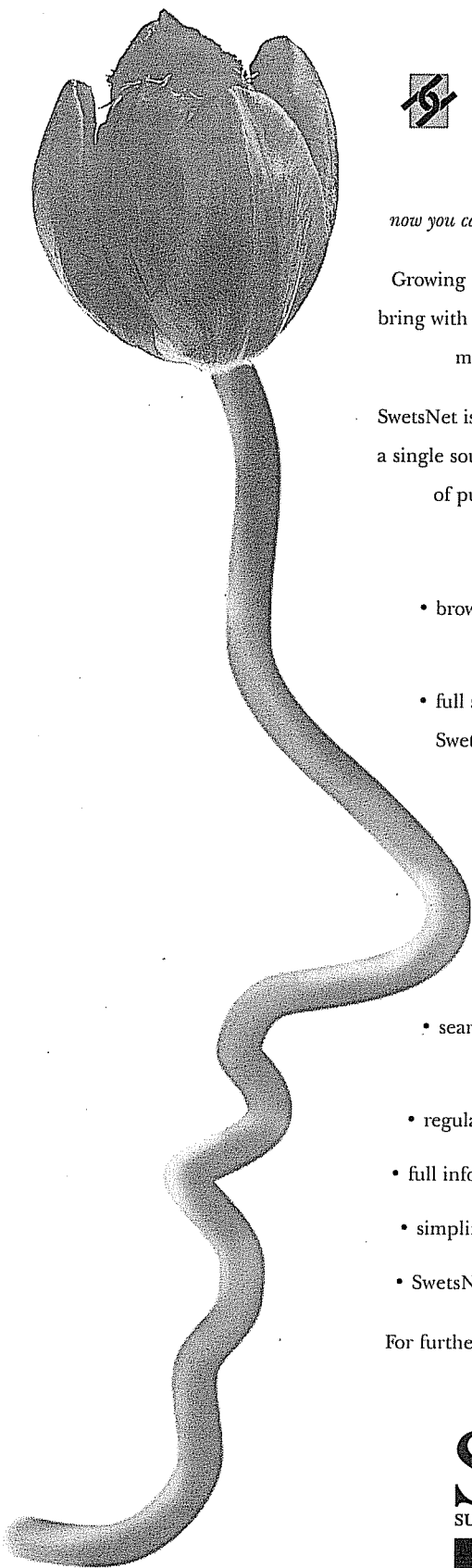
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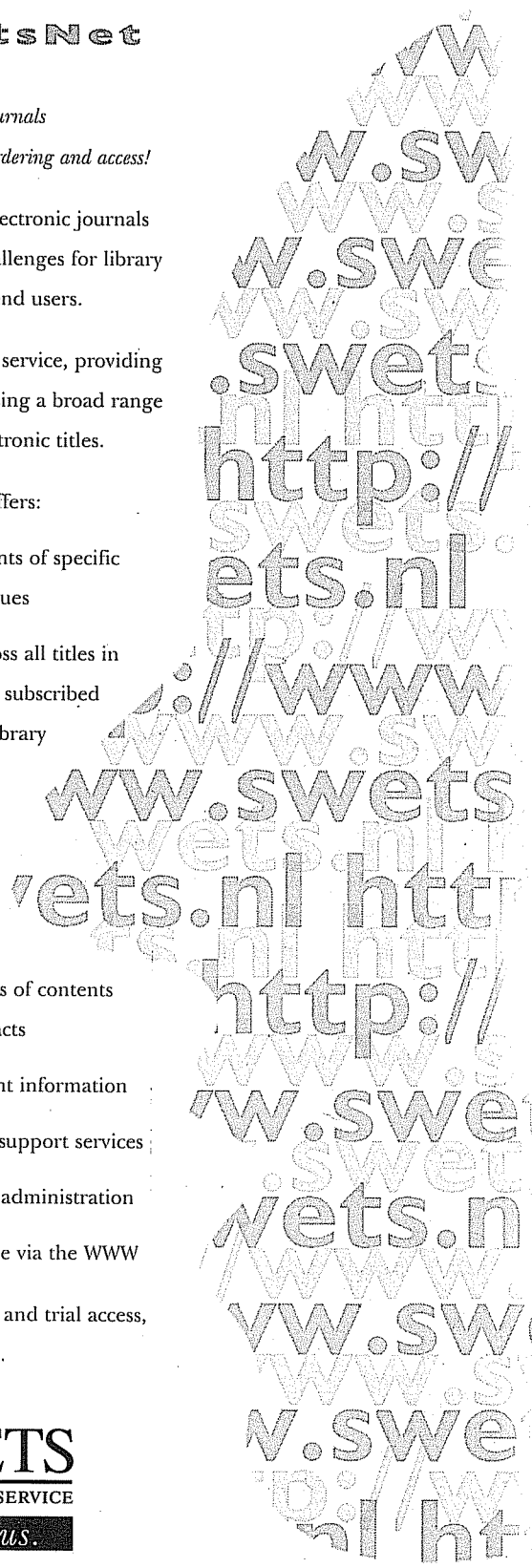
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