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2013 November 08

Most Popular

Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed

MEDLINE Data Changes – 2014

What's New for 2014 MeSH

2013 NOVEMBER–DECEMBER No. 395

Issue Completed December 30, 2013

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New CMT Subset Available

New CMT Subset Available. NLM Tech Bull. 2013 Nov-Dec;(395):b6.

2013 December 20 [posted]

The Primary Care Subset from Convergent Medical Terminology (CMT) is available for download by UMLS licensees.

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SNOMED CT: Spanish Version, Updated ICD-9-CM Mapping, and Updated CORE Subset Available

SNOMED CT: Spanish Version, Updated ICD-9-CM Mapping, and Updated CORE Subset Available. NLM Tech Bull. 2013 Nov-Dec;(395):b5.

2013 December 17 [posted]

Three updated SNOMED CT-related downloads are available:

1. Spanish edition of July 2013 International Release
2. ICD-9-CM Diagnostic Codes to SNOMED CT Map (based on ICD-9-CM 2013 and September 2013 US Edition of SNOMED CT)
3. CORE Subset of SNOMED CT (based on July 2013 International Release of SNOMED CT and 2013AB UMLS Release)

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Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed

Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed. NLM Tech Bull. 2013 Nov-Dec;(395):b4.

2013 December 16 [posted]

As of December 16, PubMed/MEDLINE citations, the MeSH database, and the NLM Catalog were updated to reflect 2014 MeSH. The MeSH translation tables were also updated on December 16. Now that end-of-year activities are complete, MEDLINE/PubMed may be searched using 2014 MeSH vocabulary. See *MEDLINE Data Changes – 2014* for details on the data changes. On December 17, NLM will resume daily (Tuesday-Saturday) MEDLINE updates to PubMed (including the backlog of citations indexed since November 20 with 2014 MeSH).

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DIRLINE Ends Its 30 Year Run

DIRLINE Ends Its 30 Year Run. NLM Tech Bull. 2013 Nov-Dec;(395):b3.

2013 December 02 [posted]

Due to a changing technical and budgetary environment, the Division of Specialized Information Services (SIS) is no longer adding, updating or maintaining records in DIRLINE.

As of October 1, 2013, and for the following fiscal year, DIRLINE is searchable but the records are marked as "archived" (see Figure 1). SIS expects to retire DIRLINE at the end of 2014. These changes do not affect Health Hotlines.

Screen capture of a sample of DIRLINE record marked archived.

Screen capture of a sample of DIRLINE record marked archived.



Figure 1: Sample of DIRLINE record marked archived.

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WISER for Windows 4.5 Now Available

WISER for Windows 4.5 Now Available. NLM Tech Bull. 2013 Nov-Dec;(395):b2.

2013 November 22 [posted]

The National Library of Medicine's WISER for Windows 4.5 is now available. This new version of WISER fully integrates Chemical Hazards Emergency Medical Management (CHEMM) content and updates the Emergency Response Guidebook (ERG) content to 2012.

Here is a closer look at What's New in this release:

- Full integration of CHEMM content, which includes:
 - New hospital provider and preparedness planner profiles, along with a customized home screen for all WISER profiles
 - Acute Care Guidelines for six known mass casualty agents/agent classes
 - The addition of a wealth of CHEMM reference material
 - CHEMM Intelligent Syndromes Tool (CHEMM-IST), a new help identify tool designed to diagnose the type of chemical exposure after a mass casualty incident
- ERG content is now updated to the 2012 release. This includes the full ERG 2012 tool.

WISER for Windows 4.5 can be downloaded directly from the WISER Web site.

Coming Soon

Look for these exciting additions in the coming months:

- WebWISER 4.5, which includes CHEMM integration, ERG 2012 updates, and more
- WISER for Android 3.1, which adds Help Identify Chemical and protective distance mapping to this popular platform

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"Typhoon Haiyan/Yolanda: Health-Related Information Resources" Now Available from NLM

"Typhoon Haiyan/Yolanda: Health-Related Information Resources" Now Available from NLM. NLM Tech Bull. 2013 Nov-Dec;(395):b1.

2013 November 15 [posted]

A new Web page, "Typhoon Haiyan/Yolanda: Health-Related Information Resources," is now available from the US National Library of Medicine (NLM) Disaster Information Management Research Center. The resources on this page may be of value to international responders and response planners as well as to U.S. friends and family of people in the Philippines.

NLM has also activated the Emergency Access Initiative in support of medical efforts in the Philippines and surrounding areas following the devastating typhoon.

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Updates to PMC Archive and Table of Contents Pages: Embargoed Articles Now Listed

Orris R. Updates to PMC Archive and Table of Contents Pages: Embargoed Articles Now Listed. NLM Tech Bull. 2013 Nov-Dec;(395):e10.

2013 December 30 [posted]

The display of the journal archive pages in PubMed Central (PMC) for full participation journals was updated to include links to all issues in PMC, even if all of the articles in the issue are under embargo. Table of contents (TOC) pages are also now available for each issue that is in PMC, even if all articles are embargoed. Previously, an issue with all articles embargoed did not appear on the archive page and no TOC page was available until after the embargo ended.

To see examples of journal archive and TOC pages, begin by going to the PMC Journal List. To search for a specific journal title, such as the *British Journal of Pharmacology*, you may either:

1. Enter the title or a portion of it in the "Search for journals" field at the top of the page; as you type, the autocomplete feature will attempt to predict the title you are searching for (see Figure 1), or
2. Select the title from the list of journals by using the alphabetic tabs (see Figure 1).

Journal List > [A-B]

PMC Journals

Search for journals
 br j pharm Search

British Journal of Pharmacology
 British Journal of Pharmacology and Chemotherapy

[Download CSV](#) [Legend](#)

A-B | C-H | I-M | N-S | T-Z | New | Special Collections

Search this Journal	ISSN	Title	Volumes in PMC		Free Access	Participation Level
			Latest	First		
	1550-7416	The AAPS Journal (v.1;1999)	v.15(4) Oct 2013	v.6 2004	12 months or less	Full
	1530-9932	AAPS PharmSciTech	v.14(4) Dec 2013	v.1 2000	12 months or less	Full

Figure 1: Search for a Journal on the Journal List page.

Clicking on the journal title takes you to the archive page where you will see all the issues for the journal currently in PMC. As in Figure 2 below, there is a note at the top of each archive page that indicates the default embargo period for the journal and that some articles may be available sooner.

To view a TOC for a journal issue, click on an the issue's link on the archive page.

NCBI Resources How To Sign in to NCBI

PMC US National Library of Medicine National Institutes of Health

Search

Limits Advanced Journal list Help

Journal List > Br J Pharmacol

BJP BRITISH JOURNAL OF PHARMACOLOGY **BPS** BRITISH PHARMACOLOGICAL SOCIETY

The archive for this journal includes:

- Br J Pharmacol: Vols. 34 to 170; 1968 to 2013
- [Br J Pharmacol Chemother](#): Vols. 1 to 33; 1946 to 1968

Articles from this journal are usually available in PMC after a 12-month delay (embargo). Some articles may be available sooner.

British Journal of Pharmacology
Vols. 34 to 170; 1968 to 2013

v.168(1): 1–278 Jan 2013	v.168(2): 279–518 Jan 2013	v.168(3): 519–784 Feb 2013
v.168(4): 785–1042 Feb 2013	v.168(5): 1043–1289 Mar 2013	v.168(6): 1291–1529 Mar 2013
v.168(7): 1531–1770 Apr 2013	v.168(8): 1771–2012 Apr 2013	v.169(1): 1–238 May 2013

Figure 2: Note on PMC journal archive page.

As indicated in Figure 3 below, the TOCs for issues with articles still under embargo will display the same message about the default embargo. The "Free in PMC" date" listed next to each article shows the date that article will be viewable in PMC.

NCBI Resources How To Sign in to NCBI

PMC US National Library of Medicine National Institutes of Health

Search

Limits Advanced Journal list Help

Journal List > Br J Pharmacol > Volume 170(4); October 2013 Other issues: [previous](#) | [next](#) | [latest](#) | [archive](#)

BJP BRITISH JOURNAL OF PHARMACOLOGY **BPS** BRITISH PHARMACOLOGICAL SOCIETY

Volume 170(4); October 2013

Articles from this journal are usually available in PMC after a 12-month delay (embargo). Some articles may be available sooner.

Issue Information

Issue Information
Br J Pharmacol. 2013 October; 170(4): i–ii. Published online 2013 October 1. doi: 10.1111/j.1476-5381.2013.02167.x
PMCID: PMC3799585

Currently embargoed: Free in PMC on Oct 1, 2014

Figure 3: TOC page showing note and date viewable in PMC.

Please note that only articles with a twelve-month or shorter embargo will display the PMCID in the TOC because only those articles meet the NIH Public Access Policy requirements.

By Rebecca Orris
National Center for Biotechnology Information

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Author, Corporate Author, and Collaborator Affiliation Display Changes

Author, Corporate Author, and Collaborator Affiliation Display Changes. NLM Tech Bull. 2013 Nov-Dec;(395):e9.

2013 December 24 [posted]

2014 May 22 [Editor's note added]

[Editor's note: Effective May 8, 2014, My NCBI now includes a PubMed preference to automatically open Author information on PubMed abstracts. For more information see My NCBI Help.

Background

Effective December 16, NLM now includes Author Affiliations for all Authors, Corporate Authors and Collaborators in PubMed if the data are supplied by publishers in their XML submissions for MEDLINE indexed journals.

PubMed Display Changes

To view Affiliation information, go to the Abstract display format and click on "Author information" (see Figure 1).

Ann Rheum Dis. 2013 Dec 17. doi: 10.1136/annrheumdis-2013-204466. [Epub ahead of print]

Genetic variation in VTCN1 (B7-H4) is associated with course of disease in juvenile idiopathic arthritis.

Albers HM, Reinards TH, Brinkman DM, Kamphuis SS, van Rossum MA, Hoppenreijis EP, Girschick HJ, Wouters C, Saurenmann RK, Bakker E, Verduijn W, Slagboom P, Huizinga TW, Toes RE, Houwing-Duistermaat JJ, Ten Cate R, Schilham MW.

Author information



Abstract

OBJECTIVE: The course of disease in juvenile idiopathic arthritis (JIA) is unpredictable with episodes of activity and remission. In order to identify predictive factors, 93 SNPs, JIA subtype, age at onset and ANA status were studied in relation to disease course.

METHODS: Genetic and clinical parameters were analysed in a cohort of 272 Caucasian patients with persistent oligoarthritis (n=129), extended oligoarthritis (n=57) and rheumatoid factor negative polyarthritis (n=86). Categories of disease course (remitting (n=65), intermediate (n=96) and unremitting (n=111)) were designed based on the cumulative time spent in active disease in the first 2 years.

RESULTS: Univariate analysis revealed association of the course of disease with JIA subtype ($p=5.7 \times 10^{-5}$) and three SNPs; VTCN1 rs10 923 223 ($p=4.4 \times 10^{-5}$), VTCN1 rs12 046 117 ($p=0.017$) and CDK6 rs42 041 ($p=0.038$). In a subsequent multivariate ordinal logistic regression analysis, VTCN1 rs10 923 223 (OR 0.41, 95%-CI 0.26 to 0.63) and JIA subtype (OR 3.8, 95%-CI 2.0 to 7.2; OR 2.5, 95%-CI 1.4 to 4.2, for extended oligoarthritis and RF-negative polyarthritis vs persistent oligoarthritis, respectively) were the strongest independent factors for course of disease.

CONCLUSIONS: This study provides evidence that VTCN1, encoding B7-H4, is associated with course of disease in selected subtypes of JIA. VTCN1 might be useful in predicting the course of disease.

KEYWORDS: Arthritis, Disease Activity, Gene Polymorphism, Juvenile Idiopathic Arthritis, T Cells

PMID: 24347572 [PubMed - as supplied by publisher]

Figure 1: Click on "Author information" to view affiliation(s).

Not all publishers will provide affiliation data for all authors. Furthermore, we are not adding additional affiliation data to existing MEDLINE/PubMed citations. (See Figure 2)

Ann Rheum Dis. 2013 Dec 17. doi: 10.1136/annrheumdis-2013-204466. [Epub ahead of print]

Genetic variation in VTCN1 (B7-H4) is associated with course of disease in juvenile idiopathic arthritis.

Albers HM, Reinards TH, Brinkman DM, Kamphuis SS, van Rossum MA, Hoppenreijis EP, Girschick HJ, Wouters C, Saurenmann RK, Bakker E, Verduijn W, Slagboom P, Huizinga TW, Toes RE, Houwing-Duistermaat JJ, Ten Cate R, Schilham MW.

Author information

Department of Paediatrics/Paediatric Rheumatology, Leiden University Medical Center, Leiden, The Netherlands.

Abstract

OBJECTIVE: The course of disease in juvenile idiopathic arthritis (JIA) is unpredictable with episodes of activity and remission. In order to identify predictive factors, 93 SNPs, JIA subtype, age at onset and ANA status were studied in relation to disease course.

METHODS: Genetic and clinical parameters were analysed in a cohort of 272 Caucasian patients with persistent oligoarthritis (n=129), extended oligoarthritis (n=57) and rheumatoid factor negative polyarthritis (n=86). Categories of disease course (remitting (n=65), intermediate (n=96) and unremitting (n=111)) were designed based on the cumulative time spent in active disease in the first 2 years.

RESULTS: Univariate analysis revealed association of the course of disease with JIA subtype ($p=5.7 \times 10^{-5}$) and three SNPs; VTCN1 rs10 923 223 ($p=4.4 \times 10^{-5}$), VTCN1 rs12 046 117 ($p=0.017$) and CDK6 rs42 041 ($p=0.038$). In a subsequent multivariate ordinal logistic regression analysis, VTCN1 rs10 923 223 (OR 0.41, 95%-CI 0.26 to 0.63) and JIA subtype (OR 3.8, 95%-CI 2.0 to 7.2; OR 2.5, 95%-CI 1.4 to 4.2, for extended oligoarthritis and RF-negative polyarthritis vs persistent oligoarthritis, respectively) were the strongest independent factors for course of disease.

CONCLUSIONS: This study provides evidence that VTCN1, encoding B7-H4, is associated with course of disease in selected subtypes of JIA. VTCN1 might be useful in predicting the course of disease.

KEYWORDS: Arthritis, Disease Activity, Gene Polymorphism, Juvenile Idiopathic Arthritis, T Cells

PMID: 24347572 [PubMed - as supplied by publisher]

Figure 2: Author information. Note that there is affiliation information for the first author only.

Superscripted numbers are used to associate each author with his/her affiliation when there are multiple authors with different affiliations (see Figure 3).

KIAA1462, A Coronary Artery Disease Associated Gene, Is a Candidate Gene for Late Onset Alzheimer Disease in APOE Carriers.

Murdock DG¹, Bradford Y¹, Schnetz-Boutaud N¹, Mayo P¹, Allen MJ¹, D'Aoust LN¹, Liang X¹, Mitchell SL¹, Zuchner S², Small GW³, Gilbert JR², Pericak-Vance MA², Haines JL¹.

Author information

¹Center for Human Genetics Research and Department of Molecular Physiology and Biophysics, Vanderbilt University, Nashville, Tennessee, United States of America.

²Miami Institute for Human Genomics, Miller School of Medicine, University of Miami, Miami, Florida, United States of America.

³Semel Institute for Neuroscience and Human Behavior, University of California Los Angeles, Los Angeles, California, United States of America.

Abstract

Alzheimer disease (AD) is a devastating neurodegenerative disease affecting more than five million Americans. In this study, we have used updated genetic linkage data from chromosome 10 in combination with expression data from serial analysis of gene expression to choose a new set of thirteen candidate genes for genetic analysis in late onset Alzheimer disease (LOAD). Results in this study identify the KIAA1462 locus as a candidate locus for LOAD in APOE4 carriers. Two genes exist at this locus, KIAA1462, a gene associated with coronary artery disease, and "rokimi", encoding an untranslated spliced RNA. The genetic architecture at this locus suggests that the gene product important in this association is either "rokimi", or a different isoform of KIAA1462 than the isoform that is important in cardiovascular disease. Expression data suggests that isoform f of KIAA1462 is a more attractive candidate for association with LOAD in APOE4 carriers than "rokimi" which had no detectable expression in brain.

PMID: 24349219 [PubMed - in process] PMCID: PMC3861372 [Free PMC Article](#)

Figure 3: Author information for multiple affiliations.

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What's New for 2014 MeSH

Schulman J. What's New for 2014 MeSH. NLM Tech Bull. 2013 Nov-Dec;(395):e8.

2013 December 18 [posted]

Overview of Vocabulary Development and Changes for 2014

- 304 Descriptors added
- 40 Descriptor terms replaced with more up-to-date terminology
- 8 Descriptors deleted

Totals by Type of Terminology

- 27,149 Descriptors
- 83 Qualifiers
- 219,266 Supplementary Concept Records

Helpful Links

Please consult the 2014 online Introduction to MeSH for more details. Lists of new and changed vocabulary are available at these links:

- MeSH Vocabulary Changes
- New Descriptors - 2014
- Changed Descriptors - 2014
- Deleted Descriptors - 2014
- New Descriptors by Tree Subcategory - 2014

Update: Unique Ingredient Identifiers (UNIIs) Added to MeSH Descriptors

The UNII Project is a collaborative effort between NLM and Food and Drug Administration (FDA) informatics scientists to include FDA Substance Registration System (SRS) - Unique Ingredient Identifiers (UNIIs) in MeSH. The first part of this project, completed for the 2013 MeSH year, involved updating MeSH Supplemental Concepts (SCRs) with UNII identifiers. The 2014 MeSH release completes the second part and includes 2,900 UNII updates for Descriptor chemicals. In total, there are now 10,837 UNII identifiers in MeSH.

Because many of the MeSH UNII concepts involve pharmaceutical compounds, the range of pharmacological action (PA) classes covered by MeSH was expanded and a new category, "Diagnostic Uses of Chemicals," was added. This effort was coordinated with the UNII project so that MeSH headings could be simultaneously reviewed for UNII and PA assignments. It is hoped that the addition of UNII identifiers and new MeSH PA assignments will improve the utility of the MeSH database as a resource for drug information.

Genetics Home Reference

In the Fall of 2013, MeSH finalized the integration of Genetic Home Reference (GHR) disease vocabulary completing a goal of covering more than 95% of all the human diseases and conditions with genetic components in MeSH. Human disease terms from the NIH Office of Rare Diseases and Research (ORDR), Online Mendelian Inheritance in Man (OMIM), and GHR are now part of MeSH.

By Jacquelynne Schulman
MeSH Section

Other pertinent articles:

What's New for 2014 MeSH

Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed

MEDLINE Data Changes — 2014

Cataloging News — 2014

2014 MeSH Now Available

MEDLINE/PubMed Year-End Processing Activities

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Apply to Attend the Winter 2014 Online Class "Fundamentals of Bioinformatics and Searching"

Dennis S. Apply to Attend the Winter 2014 Online Class "Fundamentals of Bioinformatics and Searching". NLM Tech Bull. 2013 Nov-Dec;(395):e7.

2013 December 04 [posted]

Health science librarians in the United States are invited to participate in the next offering of the online bioinformatics training course, **Fundamentals of Bioinformatics and Searching**, sponsored by the National Library of Medicine (NLM), the National Center for Biotechnology Information (NCBI), and the National Network of Libraries of Medicine, NLM Training Center (NTC). This rigorous course provides basic knowledge and skills for librarians interested in helping patrons use online molecular databases and tools from the NCBI. Attending this course will improve your ability to initiate or extend bioinformatics services at your institution. Prior knowledge of molecular biology and genetics is not required. This course is a prerequisite for the face-to-face workshop, Librarian's Guide to NCBI.

The major goal of this course is to provide an introduction to bioinformatics theory and practice in support of developing and implementing library-based bioinformatics products and services. This material is essential for decision-making and implementation of these programs, particularly instructional and reference services. The course encompasses visualizing bioinformatics end-user practice, places a strong emphasis on hands-on acquisition of NCBI search competencies, and a working molecular biology vocabulary, through self-paced hands-on exercises.

This course is offered online (asynchronous) from **February 10 – March 21, 2014**. The course format includes video lectures, readings, a molecular vocabulary exercise, an NCBI discovery exercise, and other hands-on exercises. The instructor is Diane Rein, Ph.D., MLS, Bioinformatics and Molecular Biology Liaison from the Health Science Library, University at Buffalo.

Due to limited enrollment, interested participants are required to complete an application form. The deadline for completing the application is January 10, 2014; participants will be notified of acceptance on January 22, 2014.

The course is offered at no cost to participants. Participants who complete all assignments and the course evaluation by the due dates within the course will receive fifteen hours of MLA CE credit. No partial CE credit is granted.

Participants who complete the required coursework and earn full continuing education credit will be eligible to apply to attend the five-day Librarian's Guide that will be offered in April 2014 if they so choose.

For more information and to apply, visit: https://www.surveymonkey.com/s/fundamentals_winter_2014

Questions? E-mail the course organizers at ncbi_course@lists.utah.edu.

By Sharon Dennis
National Library of Medicine Training Center
Spencer S. Eccles Health Sciences Library
University of Utah, Salt Lake City

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Table of Contents: 2013 NOVEMBER–DECEMBER No. 395

MEDLINE Data Changes — 2014

Tybaert S. MEDLINE Data Changes — 2014. NLM Tech Bull. 2013 Nov-Dec;(395):e6.

2013 December 04 [posted]
2013 December 30 [Editor's note added]
2014 June 09 [Editor's note added]

This article collects the notable data changes made to MEDLINE during annual National Library of Medicine (NLM) maintenance known as Year-End Processing (YEP) for 2014.

For information about how this maintenance affects the NLM schedule for adding indexed MEDLINE citations to PubMed, see the article, *MEDLINE/PubMed Year-End Processing Activities*. Two additional resources, Annual MEDLINE/PubMed Year-End Processing (YEP): Impact on Searching During Fall 2013 and Annual MEDLINE/PubMed Year-End Processing (YEP): Background Information, include examples of typical changes that take place in MEDLINE citations during YEP.

MeSH Vocabulary Updated for 2014

The MeSH Browser currently points to the 2014 MeSH vocabulary with a link to the 2013 MeSH Vocabulary. Searchers should consult the Browser to find MeSH headings of interest and their relationships to other headings. The Browser contains MeSH Heading records that may include scope notes, annotations, entry terms, history notes, allowable qualifiers (subheadings), previous headings and other information. It also includes Subheading records and Supplementary Concept Records (SCRs) for substances and diseases that are not MeSH Headings.

The MeSH Section homepage provides a link under "All About MeSH" to the Introduction of 2014 MeSH and under "Obtaining MeSH" to download electronic versions.

The MeSH Tree Structures are also available online in both PDF and HTML formats with all indented terms showing.

For highlights about 2014 MeSH, see the forthcoming article, *What's New for 2014 MeSH*.

The PubMed MeSH database and translation tables will be updated to reflect 2014 MeSH in mid-December when YEP activities are complete and the newly maintained MEDLINE data are available in PubMed.

Updated MeSH in MEDLINE Citations

MEDLINE records with updated MeSH will be in PubMed in mid-December 2013. See "Modifying a Saved Search Strategy" for details on revising My NCBI saved searches.

[Editor's note: added June 9, 2014: MEDLINE citation maintenance XML files are no longer available for download.] The MeSH Section homepage provides links to descriptions of MeSH maintenance. The About Updates link under the "MEDLINE Citation Maintenance" section explains how NLM prepares the changes in a machine-readable form for others to use. To access the XML files for the tasks processed for this maintenance, click on the "Download XML Files" link under this same section; the 2014 changes should be available sometime in January 2014. This information is helpful for those individuals or organizations using MeSH headings in their own application (such as indexing curricula guides) and want to update those applications with the new version of MeSH.

New MeSH Headings

304 new MeSH Headings were added to MeSH in 2014.

Typically, NLM does not retrospectively re-index MEDLINE citations with new MeSH Heading concepts. Therefore, searching PubMed for a new MeSH term tagged with [mh] or [majr] effectively limits retrieval to citations indexed after the term was introduced. PubMed Automatic Term Mapping (ATM) expands an untagged subject search to include both MeSH Terms and All Fields index terms and may retrieve relevant citations indexed before the introduction of a new MeSH term. Searchers may consult the MeSH Browser or the MeSH database to see the Previous Indexing terms most likely used for a particular concept before the new MeSH Heading was introduced.

Other pertinent articles:

What's New for 2014 MeSH

Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed

MEDLINE Data Changes — 2014

Cataloging News — 2014

2014 MeSH Now Available

MEDLINE/PubMed Year-End Processing Activities

Changes to MeSH Headings

This year 48 MeSH Headings were either changed or deleted and replaced with more up-to-date terminology. During YEP, NLM updates MeSH headings on MEDLINE citations.

Brand New Concepts

Examples of new MeSH headings of special interest to searchers are highlighted below by Category. You can browse all of the new 2014 concepts on the MeSH New Descriptors Web page.

Category A - Anatomy

- Allografts
- Autografts
- Back Muscles
- Bone-Patellar Tendon-Bone Grafts
- Composite Tissue Allografts
- Dander
- Heterografts
- Intermediate Back Muscles
- Isografts
- Paraspinal Muscles
- Superficial Back Muscles

Category B - Organisms

- Cephalochordata
- Influenza A Virus, H7N9 Subtype
- Lancelets

Category C - Diseases

- Ankle Fractures
- Carcinogenesis
- Chemically-Induced Disorders
- Chemotherapy-Induced Febrile Neutropenia
- Dandruff
- Drug-Related Side Effects and Adverse Reactions
- Febrile Neutropenia
- Fetal Alcohol Spectrum Disorders
- Myalgia
- Pediatric Obesity
- Prostatic Neoplasms, Castration-Resistant
- Scorpion Stings
- Teratogenesis
- Tick Bites
- Triple Negative Breast Neoplasms

Category D - Chemicals and Drugs

- Ammonium Compounds
- Biodegradable Plastics
- Biological Products
- Filamins
- Gasotransmitters
- Hand Sanitizers
- Medical Marijuana
- Minichromosome Maintenance Proteins
- Minichromosome Maintenance Complex Component 2
- Minichromosome Maintenance Complex Component 3
- Minichromosome Maintenance Complex Component 4
- Minichromosome Maintenance Complex Component 5
- Minichromosome Maintenance Complex Component 6
- Minichromosome Maintenance Complex Component 7
- Minichromosome Maintenance Complex Component 8
- Minichromosome Maintenance Complex Component 9
- Multifunctional Enzymes
- Non-Nutritive Sweeteners
- Nutritive Sweeteners

Category E - Analytical, Diagnostic and Therapeutic Techniques and Equipment

- Alveolar Bone Grafting
- Cell- and Tissue-Based Therapy
- Hand Transplantation
- Multimodal Imaging
- Papanicolaou Test
- Polypharmacology
- Therapy, Soft Tissue
- Vascularized Composite Allotransplantation

Category F - Psychiatry and Psychology

- Hope

Type B Personality
Type D Personality

Category G - Phenomena and Processes

Cool-Down Exercise (ET: Warm-Down Exercise)
Immunity, Heterologous
Microbiota
Organogenesis, Plant
Physical Conditioning, Human
Portion Size
Secondary Metabolism
Serving Size
Warm-Up Exercise

Category H - Disciplines and Occupations

Veterinary Sports Medicine

Category I - Anthropology, Education, Sociology and Social Phenomena

Drug Trafficking
Human Trafficking (ET: Sex Trafficking)
Identity Theft
Medical Identity Theft
Organ Trafficking
Prenatal Education
Slavery
Sports for Persons with Disabilities

Category K - Humanities

Influenza Pandemic, 1918-1919

Category L - Information Science

Biological Ontologies
Gene Ontology (ET: Gene Ontology Project)
Mobile Applications
Web Browser

Category M - Named Groups

Disaster Victims
Family Nurse Practitioners
Healthy Volunteers
Nurses, Community Health
Nurses, International
Nurses, Public Health
Pediatric Nurse Practitioners
Prisoners of War
Slaves

Category N - Health Care

Critical Care Nursing
Home Health Nursing
Hospice and Palliative Care Nursing
Parish Nursing
Preexisting Condition Coverage
Nocebo Effect
Patient Harm
Rural Nursing
Safety-net Providers
Senior Centers

Category V - Publication Characteristics

Dataset
Observational Study
Pragmatic Clinical Trial

Category Z - Geographical

Asia, Northern
Mesopotamia

Changes of particular interest include:

- In 2013 Ammonium Compounds and Ammonium were Entry Terms to Quaternary Ammonium Compounds; however, in 2014 Ammonium Compounds became a MeSH Heading and Ammonium is an Entry Term to this new heading.
- Biological Agents was replaced by Biological Products and Biological Agents is now an Entry Term for the MeSH Heading Biological Factors.
- A number of trees in Category D were refined.
- In 2013 the MeSH Heading Education had an Entry Term of Parenting Education. In 2014 this Entry Term was moved to a different MeSH Heading, "Education, Nonprofessional."

- Fetal Alcohol Syndrome was a MeSH Heading in 2013, but in 2014 it became an Entry Term to the new MeSH Heading, Fetal Alcohol Spectrum Disorder.
- Heterograft was an Entry Term to Transplantation, Heterologous [E04.936.764] but is now promoted to a MeSH Heading in Category A under Transplants [A01.941].
- Microbiota was an Entry Term to Metagenome tree under Genome in Category G. In 2014 it became a MeSH Heading and is treeed both under Category G and Category N.
- The Entry Term Papanicolaou Test for Vaginal Smears in 2013 MeSH has been promoted to a MeSH Heading in 2014.
- Slaves was an Entry Term in 2013 for the MeSH Heading, Social Problems, in Category I. In 2014 Slavery became a new MeSH Heading and was moved to Category M.
- Tissue Therapy, Historical replaces Tissue Therapy. The replaced term is more specific; follow-on tasks will insure that Tissue Therapy, Historical is used only for articles related to the procedures by Filatov or Niehans. Users should use Cell- and Tissue-Based Therapy to retrieve articles for contemporary cell or tissue therapy.
- Transplant and Transplantation terms were reviewed and changes were made to treeing and subheadings, plus a few new terms were added. For example Transplants was moved from Category E7 to Category A.
- The Entry Term Tumorigenesis for Cell Transformation, Neoplastic has been moved and is now an Entry Term under Carcinogenesis.

Do not confuse:

- Home Health Nursing with Home Nursing.
- Immunity, Heterologous with Cross Protection or Cross Reactions.
- Multifunctional Enzymes with Multienzyme Complexes.
- Polypharmacology with Polypharmacy; Pharmacology; or Polychemotherapy.
- Secondary Metabolism with Secondary Metabolites.
- Teratogenesis with Teratoma.
- Therapy, Soft Tissue with Cell- and Tissue-Based Therapy.
- Warm-Down Exercise (an Entry Term for Cool-Down Exercise) with Warm-Up Exercise, a new 2014 MeSH Heading.

In addition to changes and deletions of MeSH terms on MEDLINE citations, YEP includes other adjustments to reflect 2014 MeSH vocabulary and to enhance search retrieval. These follow-on adjustments are largely the adding of more MeSH Headings or Supplementary Concept Record Names to citations to help searchers refine retrieval. In some cases, the changes clarify areas where a single concept existed before, but it is now represented by two or more specific concepts.

These types of changes, along with others documented on the Annual MEDLINE/PubMed Year-End Processing (YEP): Background Information Web page, suggest the importance of routinely using the PubMed Details feature when searching to see how terms are mapped with the new year's vocabulary and then checking the MeSH Browser or the MeSH database for clarification. Additional information is also available in the article, Skill Kit: The Effects of Year End Processing (YEP) on Saved Searches or RSS Feeds.

New Publication Types (PT) for 2014

Three new publication types have been introduced for 2014 MeSH. They are:

- **Dataset**
This publication type is defined as "An organized collection of values stored permanently in a formalized manner suitable for communication, interpretation, or processing." This publication type will not be used in combination with any other publication type as it is not to be used for journal articles that contain or produce datasets as part of the publication (including Supplemental Materials). Rather, it will be used on citations to items that are stand-alone descriptions of the metadata of a particular dataset.
- **Observational Study**
The scope note defines this publication type as "A clinical study in which participants may receive diagnostic, therapeutic, or other types of interventions, but the investigator does not assign participants to specific interventions (as in an interventional study)." This publication type should not be confused with the MeSH Heading "Observation" which is used for a scientific method. There is a related new MeSH Heading "Observational Studies as Topic," which is used for general design, methodology, economics, etc. of observational studies.
- **Pragmatic Clinical Trial**
This publication type refers to "Randomized clinical trials that compare interventions in clinical settings and which look at a range of effectiveness outcomes and impacts." There is a related new MeSH Heading, "Pragmatic Clinical Trial as Topic," which is used for general design, methodology, economics, etc. of pragmatic clinical trials.

Entry Combination Revisions

This year during YEP, NLM will again retrospectively replace certain MeSH heading/subheading combinations, known as Entry Combinations, with the new precoordinated MeSH heading. If you get no retrieval for a MeSH Heading/subheading combination check the heading in the 2014 MeSH Browser to see if the Entry Combination information indicates a different term.

There are 21 new Entry Combinations for 2014.

**Previous MeSH Heading/Subheading
(Entry Combination)**

3-Hydroxybutyric Acid/analogs & derivatives
Alcoholism/congenital
Aminocaproic Acid/analogs & derivatives
Dihydrouracil Dehydrogenase (NADP)/deficiency
DNA Gyrase/antagonists & inhibitors
Drug Therapy/adverse effects
Glutamates/antagonists & inhibitors
Glutamic Acid/agonists
Glutamic Acid/antagonists & inhibitors
H(+)-K(+)-Exchanging ATPase/antagonists & inhibitors
Hand/transplantation
Hyoscyamine/analogs & derivatives
Pharmaceutical Preparations/adverse effects
Pharmaceutical Preparations/toxicity
Phospholipases A2/antagonists & inhibitors
Prolyl Hydroxylases/antagonists & inhibitors
Proton Pumps/antagonists & inhibitors
Receptors, Neurokinin-1/antagonists & inhibitors
Sodium-Potassium-Chloride Symporters/antagonists & inhibitors
Solute Carrier Family 12, Member 3/antagonists & inhibitors
Sports for Persons with Disabilities/injuries

Replaced-by Heading for 2014

Hydroxybutyrates
Fetal Alcohol Spectrum Disorders
Aminocaproates
Dihydropyrimidine Dehydrogenase Deficiency
Topoisomerase II Inhibitors
Drug-Related Side Effects and Adverse Reactions
Excitatory Amino Acid Antagonists
Excitatory Amino Acid Agonists
Excitatory Amino Acid Antagonists
Proton Pump Inhibitors
Hand Transplantation
Atropine Derivatives
Drug-Related Side Effects and Adverse Reactions
Drug-Related Side Effects and Adverse Reactions
Phospholipase A2 Inhibitors
Prolyl-Hydroxylase Inhibitors
Proton Pump Inhibitors
Neurokinin-1 Receptor Antagonists
Sodium Potassium Chloride Symporter Inhibitors
Sodium Chloride Symporter Inhibitors
Athletic Injuries

Author Affiliation

Effective with the implementation of the new PubMed system in mid-December and going forward, NLM will include Author Affiliations for all Authors, Corporate Authors and Investigators, if the data are supplied by the publisher in their XML submissions for MEDLINE indexed journals. To prepare for and support this change, NLM ceased quality control review and editing of the author affiliation field in the MEDLINE citations as of September 30, 2013.

[Editor's note: For additional information on author affiliation see *Author, Corporate Author, and Collaborator Affiliation Display Changes.*]

Databanks

Starting soon NLM will be including additional Databank names in MEDLINE citations. Currently NLM includes data from the 13 registries in the Secondary Source (SI) field. The additional data being carried include 13 new WHO Primary Clinical Trial Registries; UniProt databanks; and several NCBI databanks.

Structured Abstracts

In November 2013, NLM added 505 new labels to the list of structured abstract labels. This brings the total of vetted and mapped labels to 2,454.

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Cataloging News — 2014

Boehr D, Willis S. Cataloging News — 2014. NLM Tech Bull. 2013 Nov-Dec;(395):e5

2013 December 04 [posted]

MeSH 2014 — Implications for LocatorPlus, NLM Catalog, and the NLM Classification

The National Library of Medicine (NLM) adopted the 2014 MeSH vocabulary for cataloging on November 25, 2013.

Accordingly, MeSH subject headings in LocatorPlus were changed to reflect the 2014 MeSH vocabulary and appear in that form as of November 25, 2013.

When year-end processing (YEP) activities are completed in mid-December, the NLM Catalog MeSH database and translation tables will be updated to reflect 2014 MeSH. Until then, note that there will be a hiatus in the addition of new and edited bibliographic records to the NLM Catalog.

The Index to the NLM Classification will not reflect 2014 MeSH changes until Spring 2014.

Other pertinent articles:

What's New for 2014 MeSH

Newly Maintained MEDLINE for 2014 MeSH Now Available in PubMed

MEDLINE Data Changes — 2014

Cataloging News — 2014

2014 MeSH Now Available

MEDLINE/PubMed Year-End Processing Activities

MeSH 2014 Changes in NLM Bibliographic Records and Cataloging Policy

In general, the Cataloging Section implemented the vocabulary changes in NLM bibliographic records for books, serials, and other materials, as they were applied for citations in MEDLINE. For highlights about 2014 MeSH, see the articles *What's New for 2014 MeSH* and *MEDLINE Data Changes — 2014*.

Pediatric Obesity

Includes both children and adolescents. **Cataloging policy:** Do not coordinate with age group(s) unless specific age group(s) is discussed, for example, *Adolescents*.

Multimodal Imaging

Used for a combination of techniques for a single procedure and not for multiple separate imaging techniques. Coordinate with specific imaging techniques used in combination. The 2012 pre-coordinated term *Positron-Emission Tomography and Computed Tomography* was deleted.

Tissue Therapy

The 2012 term *Tissue Therapy*, which was supposed to be used for the historical techniques associated with Filatov or Niehans, was changed to *Tissue Therapy, Historical* to make a clear distinction between the historical and current technique, *Cell- and Tissue-Based Therapy*. During YEP, Cataloging mapped bibliographic records with *Tissue Therapy* to *Cell- and Tissue-Based Therapy*.

New Nursing Terms

Several new nursing and nurse terms are now available. Some nursing terms have corresponding nurse terms, for example, *Pediatric Nurse Practitioners* and *Pediatric Nursing* are both available. **Cataloging policy:** Do not routinely coordinate the nursing term with the nurse term but evaluate what is appropriate to add.

Although we now have some new pre-coordinated disease nursing headings, it is important to be aware that the subheading /nursing is still allowed with the general disease term, e.g., Nephrology Nursing is now available but /nursing is still allowed with Kidney Diseases. **Cataloging policy:** Prefer specific disease term with /nursing; however, it is up to cataloger's judgment, based on the item cataloged, whether a combination of general and specifics (with subheadings) are needed.

Examples:

ANNA standards and guidelines of clinical practice for nephrology nursing.
Nephrology Nursing \$x standards
Practice Guideline

Contemporary nephrology nursing.
Nephrology Nursing
Kidney Diseases \$x nursing

Hemodialysis, the nurse's role.
Renal Dialysis \$x nursing

Publication Types (PTs) and Related Terms:

For now, Cataloging will not use the new PT Dataset. Catalogers should use the PT *Database* if applicable. *Herbals as Topic* may be used for current materials although the PT *Herbals* is not allowed for current materials.

New MeSH Descriptors Not Used by Catalogers:

National Longitudinal Study of Adolescent Health and *International Classification of Functioning, Disability and Health* have the annotation: CATALOG: use NAF entry. Catalogers should use the National Authority File (NAF) headings.

Diagnostic Uses of Chemicals should not be used by catalogers. Catalogers should use the specific MeSH terms treed under it.

Additional Database Changes

No substantive changes were made to the DTD and XML for the NLMCatalogRecordSet DTD and CatfilePlus and Serfile XML for 2014.

By Diane Boehr and Sharon Willis
Cataloging Section

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UMLS 2013AB Release Available

Wilder V. UMLS 2013AB Release Available. NLM Tech Bull. 2013 Nov-Dec;(395):e4.

2013 November 22 [posted]

The 2013AB release of the Unified Medical Language System (UMLS) Knowledge Sources is available for download as of November 21, 2013.

In the new UMLS Release there are:

- More than 2.9 million concepts and 11.4 million unique concept names from over 160 source vocabularies
- The full Metathesaurus requires 23 GB of disk space; the active release requires 22 GB of disk space.
- Four new sources
 - Anatomical Therapeutic Chemical Classification System (ATC)
 - Current Dental Terminology (CDT)
 - US Edition of SNOMED CT (SNOMEDCT_US)
 - Vaccines Administered (CVX)
- One new mapping
 - SNOMED CT-to-ICD10
- 37 updated English sources and 20 updated translation sources including MeSH, MedDRA, RxNorm, and SNOMED CT® (English and Spanish)

As of 2013AA, the release is available in two versions: Full and Active.

The Full Release includes all source vocabularies.

The Active Release includes only vocabularies that are actively updated in the Metathesaurus. The Active Release is a smaller download, decreases MetamorphoSyS processing time, and provides easier access to current Metathesaurus content.

Data Changes

- MRCONSO file change: The maximum length for the CODE, SAUI, SCUI, and SDUI fields is now increased to 100 characters.
- The co-occurrences files, MRCOC.RRF and MRCOC (ORF format), are not included in the release as of 2013AB. Co-occurrence information is available on the MEDLINE/PubMED Baseline Repository (MBR) Web site.
- The Metathesaurus no longer includes these vocabulary sources, listed by Source abbreviation (SAB):
 - MTHHL7V25 (HL7 Vocabulary Version 2.5, 7-bit equivalents)
 - MTHICPC2ICD107B (International Classification of Primary Care 2nd Edition, 7-bit Equivalents)
 - SNOMEDCT (International Release of SNOMED CT); content is available in SNOMEDCT_US
 - SNOMEDCT_USX (US Extension of SNOMED CT); content is available in SNOMEDCT_US
- NLM no longer creates plain ASCII versions of atoms where the original string value included non-ASCII characters. As of this release the Metathesaurus does not include these ASCII terms. Metathesaurus indexes reflect these changes and include modifications to maintain existing search and retrieval capabilities.
 - Use the Unicode Filter in MetamorphoSyS to convert to ASCII or remove non-ASCII terms from your subset.

Logical Observation Identifier Names and Codes (LOINC)

- LNC_AD8 (Eight-item Informant Interview to Differentiate Aging and Dementia) and LNC_MDS30 (Minimum Data Set, 3.0):
 - As of 2013AB, this content is included under SAB=LNC due to processing changes.
- The representation of LOINC (SAB=LNC) in the Metathesaurus does not include the following content:
 - Blessed Orientation-Memory-Concentration Test
 - Borderline Symptom List – 23 Item
 - Borderline Symptom List – Supplement
 - Edinburgh Postnatal Depression Scale
 - Patient Reported Outcomes Measurement (PROMIS)
 - Test of Infant Motor Performance (TIMP)

Release Information

For more information about the release, see the What's New and Updated Sources sections of the Release Documentation. Additional release statistics are published on the UMLS Web site.

To access the UMLS Release files, you must have an active UMLS Metathesaurus License and a valid UTS account. You will be prompted for your UTS username and password when downloading the files.

Additional information regarding the UMLS is available on the UMLS homepage. New users are encouraged to take the UMLS Basics Tutorial and to explore the new UMLS Quick Start Guide, training materials and other information on the New Users' homepage.

Source Release Documentation

2013AB Source Release Documentation Web pages will be published following the release.

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Structured Abstracts in MEDLINE: Newly Identified and Mapped Labels Available

Truong F, Knecht LS, Ripple AM. Structured Abstracts in MEDLINE: Newly Identified and Mapped Labels Available. NLM Tech Bull. 2013 Nov-Dec;(395):e3.

2013 November 20 [posted]

The National Library of Medicine (NLM) has updated its list of structured abstract labels. This updated list, along with the NLM-assigned broader category mappings, can be downloaded for free from the Structured Abstracts resource page which also provides NLM guidelines and other background information to assist licensees or researchers.

The Updated Label List and NLM Category Mappings file contains 2,454 labels: 1,949 labels (from the 2012 Label List) and 505 new labels. Each label has a map to one of five corresponding broader NLM Categories (i.e., BACKGROUND, OBJECTIVE, METHODS, RESULTS, or CONCLUSIONS) and an indication of whether the label is classed as an "Ending Label" concept. The 505 new label entries have a timestamp of "|20131106". This file does not contain labels that map to UNASSIGNED as an NLM Category (see explanation).

Completed MEDLINE citations (medline [sb]) and PubMed-not-MEDLINE citations (pubmednotmedline [sb]) in PubMed that contain one or more of the 505 newly verified and mapped labels were revised to reflect the new labels, effective on or about November 6, 2013.

Read more about Structured Abstracts in MEDLINE/PubMed.

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New PubModel for PubMed Citations

Knecht LS. New PubModel for PubMed Citations. NLM Tech Bull. 2013 Nov-Dec;(395):e2.

2013 November 08 [posted]

In mid-June 2013, a new publication model (PubModel) called Electronic-eCollection was introduced for PubMed citations from electronic-only journals. The PubModel value is carried in the journal citation and is used for the citation display in PubMed. The new value Electronic-eCollection means an article is published electronically on a specific date (this date must include year, month, and day in numerical format) and then is also associated with an electronic collection date (akin to an issue; this date can be a year or a year and month, but never a year, month, and day). NLM determines the PubModel based on the data submitted by the publishers.

A new display value of eCollection precedes the collection date information in a citation display. The specific article date will display after the journal title abbreviation while the collection date will display near the end of the source information (see Figure 1).

[Genetics of melanoma.](#)
Wangari-Talbot J, Chen S.
Front Genet. **2013 Jan 25** 3:330. doi: 10.3389/fgene.2012.00330 **eCollection 2012.**
PMID: **23372575** [PubMed] **Free PMC Article**

Figure 1: Sample display for journal citation with PubModel = Electronic-eCollection.

This particular article cited in Figure 1 was published online on January 25, 2013, yet was included in the Volume 3, 2012 collection as deposited in PMC.

See Use of Article and ArticleDate Attribute Values in Creating the Source Area of the MEDLINE/PubMed Citation Display for documentation on all of the PubModel values.

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MedlinePlus Connect Integrates Information from Genetics Home Reference

Miller N, Morrison SM. MedlinePlus Connect Integrates Information from Genetics Home Reference. NLM Tech Bull. 2013 Nov-Dec;(395):e1

2013 November 08 [posted]

The National Library of Medicine (NLM) recently released an enhancement to MedlinePlus Connect. Responses to SNOMED CT® codes now include information from NLM's Genetics Home Reference (GHR) Web site. GHR is the NLM's Web site for consumer information about genetic conditions and the genes or chromosomes related to those conditions.

MedlinePlus Connect is NLM's service for patient portals and electronic health record (EHR) systems to link to patient-friendly and context-relevant information. It responds to code-based requests, and delivers information for patients that relates to a specific diagnosis, medication or lab test. Previous articles describe MedlinePlus Connect's launch, the addition of lab test response support, a Web service, and additional enhancements. With this new enhancement, MedlinePlus Connect can respond to requests for information related to SNOMED CT codes with information from MedlinePlus and from GHR. Currently this feature is available only for English SNOMED CT requests.

In cases where MedlinePlus Connect has responses from both MedlinePlus and GHR, the MedlinePlus information appears first, followed by GHR information (see Figure 1). There may be up to five different GHR responses available for a single code request.

Health Information for You

MedlinePlus Connect found the following results for your request. However, these results may not exactly match the link you selected. Check with your health care provider to discuss your questions and get the information that is right for you.

Results in MedlinePlus

Muscular Dystrophy

Also called: MD

Muscular dystrophy (MD) is a group of more than 30 inherited diseases. They all cause muscle weakness and muscle loss. Some forms of MD appear in infancy or childhood. Others may not appear until middle age or later. The different types can vary in whom they affect, which muscles they affect, and ...

More on [Muscular Dystrophy](#)

- [Becker's muscular dystrophy](#)
- [Duchenne muscular dystrophy](#)
- [Facioscapulohumeral muscular dystrophy](#)
- [Limb-girdle muscular dystrophies](#)
- [Muscular dystrophy](#)

[see all](#)



Results in Genetics Home Reference

Limb-girdle muscular dystrophy

Limb-girdle muscular dystrophy is a term for a group of diseases that cause weakness and wasting of the muscles in the arms and legs. The muscles most affected are those closest to the body (proximal muscles), specifically the muscles of the shoulders, upper arms, pelvic area, and thighs. The ...
More on [Limb-girdle muscular dystrophy](#)

MedlinePlus Connect matched the above topic(s) to SNOMED CT® 240068006. [SNOMED CT](#) stands for the Systematized Nomenclature of Medicine — Clinical Terms.

Figure 1: Sample MedlinePlus Connect response with MedlinePlus and GHR information.

In some cases, there may be no corresponding MedlinePlus information (see Figure 2) or no GHR information.

Health Information for You

MedlinePlus Connect found the following results for your request.

However, these results may not exactly match the link you selected. Check with your health care provider to discuss your questions and get the information that is right for you.

Results in Genetics Home Reference

[Adenine phosphoribosyltransferase deficiency](#)

Adenine phosphoribosyltransferase (APRT) deficiency is an inherited condition that affects the kidneys and urinary tract. The most common feature of this condition is recurrent kidney stones; urinary tract stones are also a frequent symptom. Kidney and urinary tract stones can create blockages in ... More on [Adenine phosphoribosyltransferase deficiency](#)

MedlinePlus Connect matched the above topic(s) to SNOMED CT® 238009001. [SNOMED CT](#) stands for the Systematized Nomenclature of Medicine — Clinical Terms.

Figure 2: Sample MedlinePlus Connect response with GHR information but no MedlinePlus information.

The GHR information is available using either the MedlinePlus Connect Web application or Web service. In the Web application, GHR responses contain the first 300 characters of the text, with a link to the complete page on GHR. In the Web service, GHR responses include the entire introduction of the page and a link to the full page of GHR content.

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