Future researchers may want to study in greater depth the positions of individuals writing as librarians in health sciences journals. It may also be interesting to determine what motivates health sciences librarians to write articles for biomedical journals. Health sciences librarians' motivation (or lack of motivation) in doing research and publishing their findings should also be further examined.

ACKNOWLEDGMENT

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Expanded use of GaIN network for rapid dissemination of current clinical information

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THE CHALLENGE

Steinbrook and Lo have reported that the primary method for informing health care professionals about promising new therapies is the news media [1]. Little information is provided to educate the caregiver. Steinbrook and Lo call for a commitment by federal agencies to better inform physicians about promising new treatments, possibly through “expanded use of on-line computerized information sources.” Examples are AIDSTRIALS, the National Cancer Institute’s PDQ database, and other databases provided to the public through the National Library of Medicine (NLM). The authors do not, however, consider the role that NLM or other libraries might play in the rapid dissemination of this treatment information.

THE NATIONAL OPPORTUNITY

In a letter to Regional Medical Library Network members (January 25, 1991), Colaianni reported that NLM Director Donald A. B. Lindberg has suggested that NLM and health sciences libraries could take a more active role in disseminating electronically the results of clinical trials performed under the aegis of the National Institutes of Health (NIH).

NLM has since developed a program whereby users of the MEDLARS system will be informed of NIH clinical alerts in the regular MEDLARS online “news” message. The clinical alert message contains a one-sentence summary, an abstract with a maximum of seventy lines, and a telephone number for more information. With the first alert, all resource libraries were provided with a fax copy of the supporting information, followed by the letter from Colaianni with the same data and the suggestion that network libraries “develop a regular mechanism to reach po-

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tentatively affected health care professionals rapidly” [2].

THE LOCAL OPPORTUNITY

The Georgia Interactive Network for Medical Information (GaIN), established in 1984 with a grant from NLM, links the Mercer University School of Medicine with more than 700 individual health care professionals and more than thirty health care institutions throughout Georgia and surrounding states [3-4]. GaIN was developed as a prototype medical information system that electronically links the academic medical center with practice sites, as recommended by the Matheson-Cooper Report [5]. The integrated GaIN system includes GaIN MEDLINE, electronic mail, online journal and book catalogs of the thirty-plus GaIN institutions, a gateway to remote databases, a continuing education bulletin board, and online search request forms. The network provides a transparent interface among several softwares, including public domain software, BACS software, and GaIN-designed features programmed by Simon Igielnik of Advanced Computer Concepts, St. Louis, Missouri.

One recent software addition to the network is the GaIN Bulletin Board, which allows users to make online requests for recent library acquisitions, news items, and GaIN computer classes. Other new features are the Current Literature Alert and the Healthcare Standards and Recommendations. The Current Literature Alert and the Healthcare Standards and Recommendations are journal citations assembled by a librarian who scans the new literature in the library each week. These two GaIN bulletin boards list new NIH consensus reports, Centers for Disease Control recommendations, comprehensive review articles, drug studies, and other articles of possible interest to primary-care physicians. GaIN members, while online, can request copies of these articles from the Mercer Medical Library. Future plans are to move to full-text retrieval for these documents.

When an NIH clinical alert is released by NLM through the MEDLARS system, the seventy-line abstract is downloaded from the MEDLARS system and uploaded into the GaIN Bulletin Board. The structure of the GaIN Bulletin Board allows the user first to read the one-sentence summary of the clinical alert, then to exit or read the longer abstract. The abstract is divided into twenty-five-line screens, with an option to exit at the end of each screen. At the end of the abstract, users may request copies of the supporting information from the Mercer Medical Library. The system requires minimal keystrokes to work through the bulletin board, and the messaging function automatically identifies the system user to the reference librarian. An up-to-the-minute banner at the initial GaIN log-on message provides users with immediate notification about the availability of a new clinical alert.

POSITIONED FOR ACTION

Because of its commitment to provide the most recent information in a full-text format to practice sites throughout its network, GaIN was well positioned to respond rapidly to NLM’s request for a regular mechanism to disseminate this information. Because it receives the information in a digitized format, minimal staff effort is expended to create a new bulletin board item.

The existing GaIN Bulletin Board software was designed to speed user access to new information. Specifically, the log-on banner alerts users to new information, the exit feature lets the user move swiftly to relevant information, and the NIH clinical alert can be added without displacing any regular information or system feature.

Among the advantages of having the NIH clinical alert available on a statewide network such as GaIN are:

- A local system regularly used for electronic mail purposes is consulted frequently.
- Articles can be ordered online without calling another number or communicating with another agency.
- The interface with a familiar local outlet (library) gives users ready access to existing photocopy, mail, fax, and charging mechanisms.

THE FUTURE

NLM intended the NIH clinical alert program to disseminate up-to-the-minute information gleaned from clinical trials via the national network of MEDLARS and existing statewide and campuswide networks such as GaIN. Implementing such a program responds to the frequent recommendation that computer access to quality-filtered information may be the answer to the burgeoning problems of underused medical literature [6] and the medical community’s inability to keep current with recent advances [7].

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