

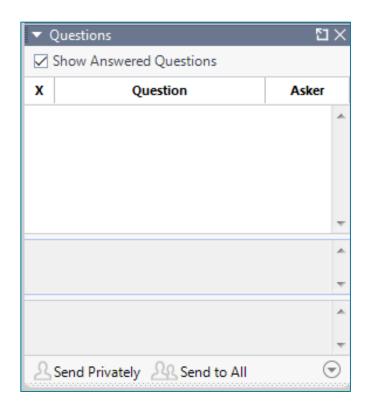


Getting started with Embase – An introduction

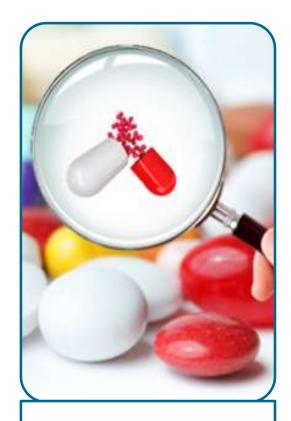
XXXXX Customer Consultant XXXX@elsevier.com August, 2017

Agenda

- Embase content and coverage
- What is Emtree and how is Embase indexed?
- How to search in Embase?
- Demo
- Q&A



Why do people use Embase?



Pharmacovigilance and drug safety



Clinical evaluation and device safety



Systematic review for evidence-based medicine

How Embase delivers value?

Efficient and useful **tool** for quick search through massive science data.

"Indexing is amazing!

More successful queries in this database than in Pubmed



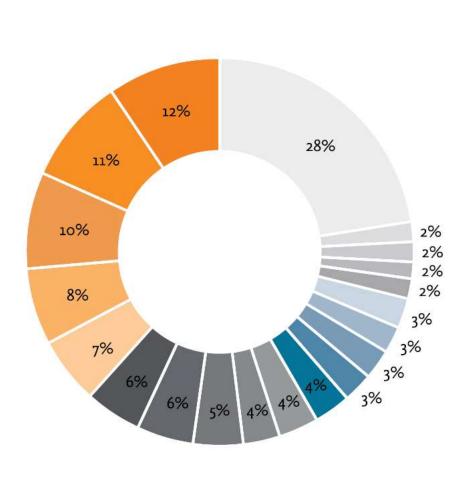
the ability to **export** the citation from the original list, as well as from most of the citations, has made the whole experience tremendously fruitful.

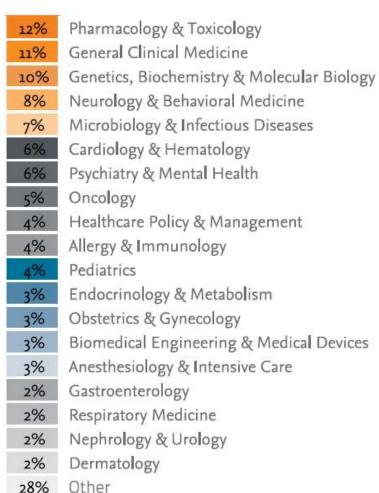
When typing in keywords,
Embase readily offers the best used terms. This is so very helpful. The layout of Embase is so well done.

It's one of the most important databases for research in the medical field. When performing exhaustive searches in the medical field, the

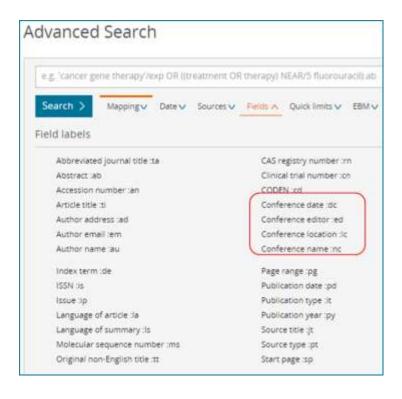
content of Embase has to be taken into account.

Embase focuses on biomedical literature in key areas for drug, disease and device research





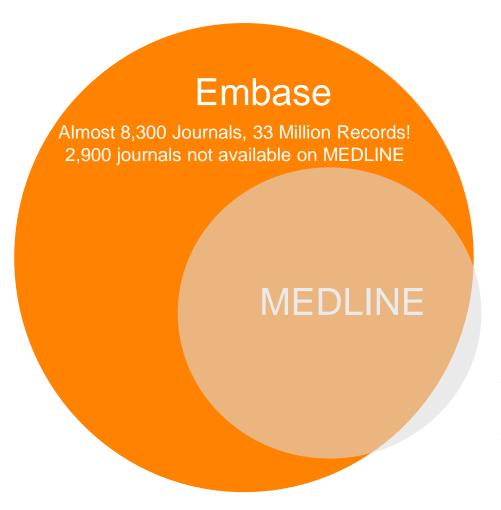
Unique coverage of conference abstracts



Article	Erratum
Article in Press	Letter
Conference Abstract	Note
Conference Paper	Review
Conference Review	Short Survey

https://www.elsevier.com/solutions/embase-biomedical-research/embase-coverage-and-content

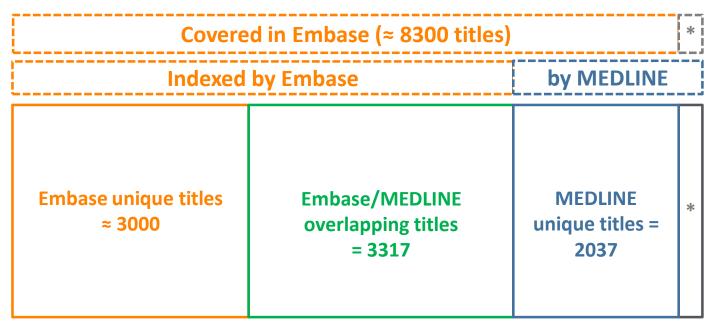
Comprehensive content coverage



- * Changed MEDLINE coverage since 2017

 May due to Elsevier publisher embargo
 policy
- ** We are actively working to close the gap.
 Users can use this query to search the missing titles in MEDLINE

Comprehensive content coverage



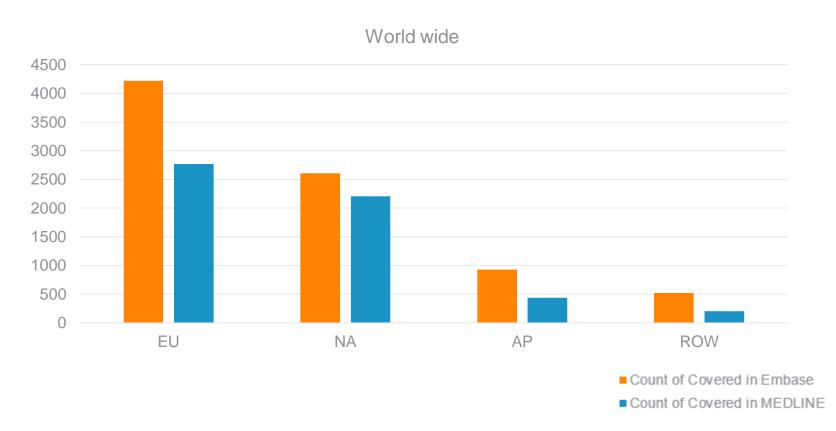
^{*} MEDLINE unique titles not covered in Embase (275 journal titles)

More content: MEDLINE In-Process and In-Press records and PubMed-not-MEDLINE records in Embase

- Changed MEDLINE coverage since 2017 May due to Elsevier publisher embargo policy
- As of July 2017
- We are actively working to close the gap. Users can use this query to search the missing titles in MEDLINE

Worldwide coverage

Embase covers all the content contained in MEDLINE and unique coverage, including conference abstracts and European journals.



non-English content

Language	Embase (per year)	MEDLINE (per year)	Unique in Embase
English **	1,413,745	623,018	790,727
Chinese	23,798	13,675	10,123
French	12,094	6,170	5,924
Spanish	12,333	4,273	8,060
Japanese	6,703	5,010	1,693
Russian	5,522	3,979	1,543
Portuguese	2,718	1,493	1,225
Polish	1,712	982	730
Turkish	1,534	421	1,113
Korean	364	146	360

^[1] Search query: e.g [1-1-2016]/sd NOT [1-1-2017]/sd AND [dutch]/lim AND [embase]/lim NOT [medline]/lim

^[2] Searched in Embase.com

More randomized controlled trials, especially non-English records

Language	Embase.com	MEDLINE (PubMed)	Embase Advantage	Percent
Chinese	11042	7427	3615	49%
French	3384	2876	508	18%
Spanish	2876	2128	748	35%
Japanese	2139	1237	902	73%
Russian	2018	1923	95	5%
Portuguese	1154	614	540	88%
Polish	575	376	199	53%
Turkish	944	109	835	766%
Korean	193	83	110	133%

^[1] Search query: e.g. 'randomized controlled trial'/NOT [31-5-2017]/sd AND [french]/lim

^[2] Search query: e.g. ((("1000/1/1"[MeSH Date]:"20exp 17/5/31"[MeSH Date] AND medline[sb]) AND Randomized Controlled Trial[ptyp])) AND french[Language]



Indexing and Emtree

Importance of indexing

Case presentation

A 36-year-old Caucasian man presented to our hospital with refractory hypotension, severe cardiac insufficiency and multi-organ failure due to mixed intoxication with atenolol, nifedipine, Lacidipine and sertraline.

Together with standard treatment, we performed extra-corporeal membrane oxygenation to overcome refractory cardiogenic shock and lead the patient to achieve a full

PMID- 21699679

OWN - NLM

STAT- PubMed-not-MEDLINE

Case presentation

A 36-year-old Caucasian man with a history of hypertensisuicide attempts was brought to our emergency departm total estimated amount of 10 g of atenolol in association Lacidipine and fluoxetinee.

rug, plasma i	end ultra-filtrate levels and clearar Emergency Department arrival 60 minutes after drug Ingestion	After plasma e therapy 8 hour ingestion	After 72 hours of HV-CVVH		
Medication	Plasma levels	Plasma levels	Ultra-filtrate	Plasma levels	Ultra- filtrate
Sertraline, ug/mL	0.55	9	- 14	92	25
Nifedipine,	2.23	0.45		19	91

Drug Terms

activated carbon[®]%, epinephrine[®]%, **atenoloi**[®]%, beta adrenergic receptor blocking agent[®]%, bicarbonate[®]%, calcium channel blocking agent[®]%, calcium chloride[®]%, dobutamine[®]%, dopamine[®]%, fluoxetine[®]%, glucagon[®]%, glucose[®]%, insulin[®]%, isoprenaline[®]%, lacidipine[®]%, macrogol[®]%, nifedipine[®]%, noradrenalin[®]%, sertraline[®]%, vasopressin[®]%

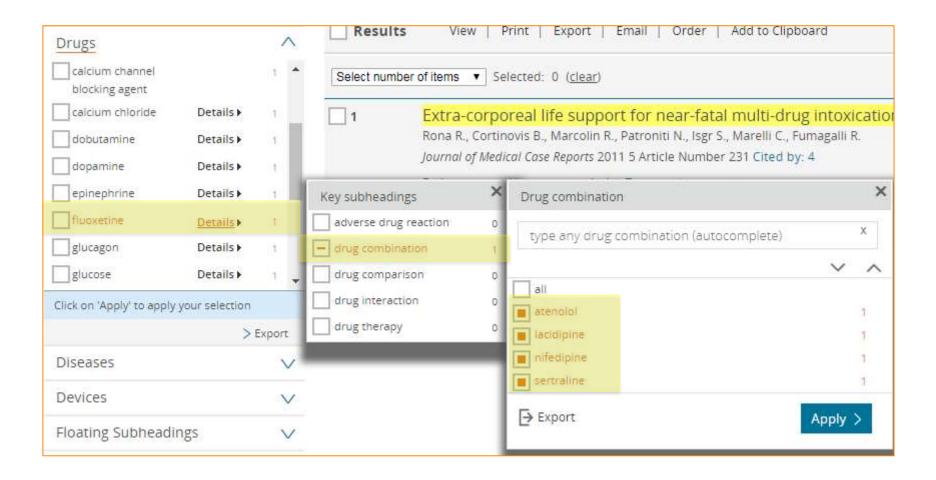
Disease Terms

acute heart failure $^{\circ}$ %, cardiogenic shock $^{\circ}$ %, **drug fatality** $^{\circ}$ %, **drug intoxication** $^{\circ}$ %, hypotension $^{\circ}$ %, multiple organ failure $^{\circ}$ %

Other Terms

adult[®]%, article[®]%, case report[®]%, continuous hemodiafiltration[®]%, continuous infusion[®]%, convalescence[®]%, drug clearance[®]%, drug dose reduction[®]%, drug megadose[®]%, drug substitution[®]%, extracorporeal oxygenation[®]%, hemodynamics[®]%, human[®]%, male[®]%, mortality[®]%, plasmapheresis[®]%, priority journal[®]% treatment outcome[®]%

Importance of indexing



Indexing principles

Indexing for Embase is a manual process performed by trained indexers with a biomedical background, with the exception of articles designated for automatic indexing.



Indexers read and analyze the full text of articles in order to identify relevant concepts, and index them with the most specific Emtree terms.

Scientific Popes

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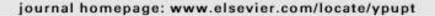
Index terms are controlled by the Emtree thesaurus resulting in consistent coverage of concepts that may be expressed in many different ways in the literature.





Contents lists available at SciVerse ScienceDirect

Pulmonary Pharmacology & Therapeutics





A randomised, placebo- and active-controlled dose-finding study of aclidinium bromide administered twice a day in COPD patients

D. Singh a, *, H. Magnussen b, A. Kirsten b, S. Mindt c, C. Caracta d, B. Seoane e, D. Jarreta e, E. Garcia Gil e

ARTICLE INFO

Article history: Received 14 December 2011 Received in revised form 27 March 2012 Accepted 29 March 2012

Keywords: Aclidinium Bronchodilation COPD Phase II Twice-daily

ABSTRACT

This Phase IIb, double-blind, double-dummy, placebo- and active-comparator-controlled crossover study (ClinicalTrials.gov identifier: NCT01120093) assessed efficacy and safety of three doses of aclidinium bromide in patients with moderate to severe chronic obstructive pulmonary disease. Patients were randomised to one of five treatment sequences each consisting of twice-daily (BID) aclidinium 100 μ g, 200 μ g, 400 μ g (via Genuair®*), formoterol 12 μ g (via Aerolizer®) and matched placebo for 7 days, with a 5- to 9-day washout period. Primary endpoint was mean change from baseline in forced expiratory volume in 1 s (FEV₁) normalised area under the curve (AUC)₀₋₁₂ on Day 7. Secondary endpoints were: change from baseline in FEV₁ normalised AUC₁₂₋₂₄, FEV₁ normalised AUC₀₋₂₄ and morning pre-dose FEV₁ on Day 7. Adverse events were monitored throughout the study. Of 79 randomised patients, 68 (86.1%) completed the study. After 7 days of treatment, actidinium and formoterol produced statistically significantly greater changes from baseline in FEV₁ normalised AUC₀₋₁₂ vs placebo (p < 0.0001). FEV₁ normalised AUC₁₂₋₂₄, FEV₁ normalised AUC₀₋₂₄, and morning pre-dose FEV₁ were also statistically significantly greater with all aclidinium doses vs placebo (p < 0.0001). Improvements in primary and

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Delimonary Research Institute at Hospital Grosshansdorf, Woehrendamm 80, D-22927 Grosshansdorf, Germany

^c Klinische Forschung Hamburg GmbH, Hoheluftchaussee 18, 20253 Hamburg, Germany

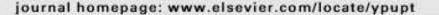
^d Forest Research Institute, Harborside Financial Center, Jersey City, NJ 07311, USA

e Almirall R&D Centre, Ronda General Mitre 151, 08022 Barcelona, Spain



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Pulmonary Pharmacology & Therapeutics





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^e Almirall R&D Centre, Ronda General Mitre 151, 08022 Barcelona, Spain

ELSEVIER

Embase indexing

The article full-text is read to extract significant concepts

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The purpose of this Phase IIb study was to assess the bronchodilatory effects of three doses of aclidinium (100 µg, 200 µg and 400 µg) BID in patients with moderate to severe COPD compared with placebo to guide dose selection for additional Phase III studies. The long-acting β₂-agonist (LABA) formoterol (12 µg BID) was used as an active comparator, so that the profile of aclidinium BID could be compared to a BID bronchodilator that is currently used in clinical practice,

2. Methods

2.1. Study subjects

Patients aged ≥40 years with a clinical diagnosis of stable moderate to severe COPD according to the current guidelines [8] were enrolled in the study. At screening, patients were required to have a post-salbutamol forced expiratory volume in 1 s (FEV₁)/forced vital capacity (FVC) ratio <70%, a post-salbutamol FEV₁≥30% and <80% of the predicted normal value, and be current or former cigarette smokers of ≥10 pack-years. Patients with a history or current diagnosis of asthma, with any respiratory tract infection or who had experienced a COPD exacerbation in the 6 weeks prior to screening (3 months if it resulted in hospitalisation) were excluded. Other exclusion criteria were: other clinically significant respiratory or cardiovascular conditions, and contraindications for anti-cholinergic drugs.

2.2. Study design

This was a double-blind, double-dummy, placebo- and activecomparator-controlled crossover study in patients with COPD (ClinicalTrial.gov identifier: NCT01120093) conducted in 11 centres in Germany and Belgium. Following a screening visit, eligible patients underwent a 14-day run-in period prior to randomisation. Patients were randomised to one of five 7-day treatment sequences (separated by 5- to 9-day washout periods) using a 5×5 Latin square crossover design [9]. Treatments were actidinium 100 µg, 200 µg, 400 µg BID (via Genuair®*, Almirall, Barcelona, Spain) and formoterol 12 µg (via Foradil Aerolizer®, Novartis AG; Basel, Switzerland) and matched placebo. The Genuair inhaler is a novel multidose, breath-actuated dry powder inhaler (DPI) that generates a highly reproducible mean fine particle dose and delivers actidinium effectively to lungs over a range of inhalation flows [10,11]. Genuair** incorporates multiple feedback mechanisms to ensure that doses are administered correctly, including a colour window changing from green to red and an audible click [10]. The Aerolizer® inhaler is a single-dose, breath-actuated DPI, which also performs consistently in terms of dosing efficiency [12]. But the feedback to the patient on whether the dose has been administered successfully is based on the single-dose, capsule-based nature of this

Patients received the morning and evening dose 12 h apart for 7 consecutive days and were assessed on Days 1 and 7 of each treatment period. Salbutamol (100 µg per puff), as-needed, was allowed during the run-in and after randomisation. Inhaled glucocorticosteroids, oral and parenteral glucocorticosteroids (up to 10 mg/day), and oral sustained-release theophyllines were permitted if their use was stable >4 weeks prior to screening. Tiotropium was stopped at least 72 h prior to screening and LABAs

glucocorticosteroids or resulted in hospitalisation.

This study was conducted according to International Conference on Harmonization/Good Clinical Practice guidelines and the Declaration of Helsinki. The protocol was approved by local institutional review boards and ethics committees (Ethikkomission Schleswig-Holstein, Segeberg, Germany; Commissie voor Medische Ethiek, Universitair Ziekenhuis Gent, Belgium). All patients provided written informed consent prior to the study.

2.3. Assessments

2.3.1. Efficacy

At screening, spirometry measurements were taken at two intervals (1 h apart) prior to the morning dose, and then at 0.5, 1, 2, 3, 4 and 6 h post-morning dose on Day 1. On Day 7, measurements were taken at the same times as Day 1 and also at 8, 10, 12 (preevening dose), 13, 14, 15, 16, 22, 23 and 24 h post-morning dose. Spirometers and all necessary equipment were provided by a centralised company (CareFusion) for specific use in this study. Spirometers were calibrated every day of use and after maintenance; instrument recommendations were followed to ensure accurate and comparable spirometric data. Spirometry assessments were performed in triplicate, and all three measurements were required to meet acceptability and repeatability criteria according to current recommendations [13]. If either of these criteria were not met, additional measurements (up to a maximum of eight) were taken until the criteria were met, Baseline was defined as the mean of the two pre-dose spirometry measurements on Day 1 of each treatment period. The use of relief medication was recorded in patient diary cards. Convenience of use of both inhaler devices was assessed at the end of the study using a seven-item questionnaire.

2.3.2. Sufety

Adverse events (AEs) were monitored throughout the study and were graded as mild, moderate or severe. AEs were considered treatment-emergent (TEAEs) if they started on or after the first dose of study drug, or if the severity of a medical condition worsened after study drug. Other safety investigations included 12-lead electrocardiogram (ECG, performed both pre-dose and 2-h post-dose), blood-pressure measurements, and assessments of clinical laboratory parameters and vital signs.

2.4. Endpoints

The primary efficacy variable was mean change from baseline in FEV₁ normalised area under the curve (AUC) for the 12-h period immediately after morning dose (AUC₀₋₁₂) on Day 7. Secondary efficacy endpoints included: change from baseline in FEV₁ normalised AUC₁₂₋₂₄, FEV₁ normalised AUC₀₋₂₄, and morning predose (trough) FEV₁ at Day 7. Additional efficacy endpoints included: change from baseline in FVC normalised AUC₀₋₁₂, AUC₁₂₋₂₄ and AUC₀₋₂₄ at Day 7; change from baseline in morning peak FEV₁ on Day 1 and Day 7; morning trough FVC on Day 7; and change from baseline in the use of relief medication after 7 days of treatment (baseline was assessed as relief medication use during the run-in period).

Safety and tolerability endpoints included AEs and change from baseline in blood pressure, ECG, laboratory parameters and vital signs.

Embase indexing

The article full-text is read to extract significant concepts

Table 4Treatment-emergent adverse events reported by ≥ 2 patients in any treatment group (safety population).

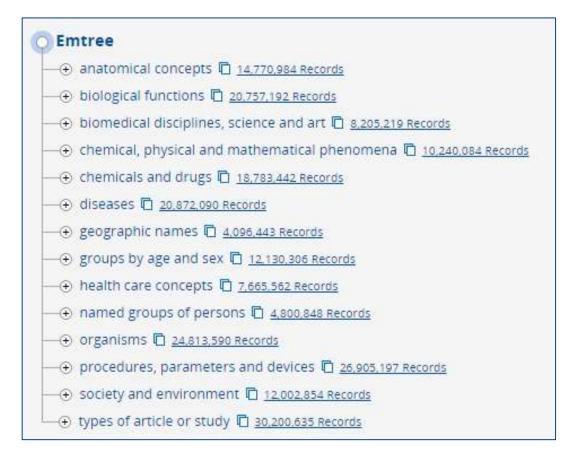
	Number (%) of patients reporting adverse events					
	Placebo	Aclidinium			Formoterol	
	<i>N</i> = 76	100 μg N = 73	200 μg N = 73	$400~\mu g$ $N=74$	12 μg N = 74	
Any TEAE	16 (21.1)	11 (15.1)	13 (17.8)	14 (18.9)	11 (14.9)	
Any severe TEAE	1 (1.3)	0 (0)	2(2.7)	2(2.7)	1 (1.4)	
Headache	5 (6.6)	4 (5.5)	4 (5.5)	<mark>5 (</mark> 6.8)	2 (2.7)	
Nasopharyngitis	1 (1.3)	0 (0)	0 (0)	3 (4.1)	1 (1.4)	
Toothache	0 (0)	1 (1.4)	0 (0)	2(2.7)	0 (0)	
Cough	2 (2.6)	1 (1.4)	1 (1.4)	1 (1.4)	1 (1.4)	
Pruritus	2 (2.6)	1 (1.4)	1 (1.4)	0 (0)	<mark>2 (</mark> 2.7)	
Diarrhoea	2 (2.6)	1 (1.4)	1 (1.4)	0 (0)	0 (0)	

SAE, serious adverse event; TEAE, treatment-emergent adverse event.

Embase [®] Sear	rch v Browse v Results My	tools ∨ 🛂 Select Language ▼ Register Login 🜲(1)		
Session Results / Record 1 of 1 Full record		Add All to Clipboard > Print >		
Record 1 Similar records Add to Clipboard Email Record		Back to results		
A randomised, placebo- and active-controlled dose-finding study of aclidinium Singh D., Magnussen H., Kirsten A., Mindt S., Caracta C., Seoane B., Jarreta D., Garcia Gil E. Pulmonary Pharmacology and Therapeutics 2012 25:3 (248-253) Go to publisher for the full text	n bromide administered twice	a day in COPD patients		
Abstract	Copyright			
This Phase IIIs double blind double double double and action assessment assessment assessment.		PubMed®, a database of the U.S. National Library of Medicine.		
This Phase Ilb, double-blind, double-dummy, placebo- and active-comparator-controlled crossover study (Cl patients with moderate to severe chronic obstructive pulmonary disease. Patients were randomised to one				
ormoterol 12 µg (via Aerolizer®) and matched placebo for 7 days, with a 5- to 9-day washout period. Primar		Lib width a haarda ha o		
urve (AUC) ₀₋₁₂ on Day 7. Secondary endpoints were: change from baseline in FEV ₁ normalised AUC ₁₂₋₂₄ , FEV ₁	Embase identification number (PUI)	L51978736		
f 79 randomised patients, 68 (86.1%) completed the study. After 7 days of treatment, aclidinium and formo		Pulm. Pharmacol. Ther.		
0001). FEV₁ normalised AUC₁₂-₂₄. FEV₁ normalised AUC₀-₂₄, and morning pre∙dose FEV₁ were also statistically ndpoints were statistically significantly greater with aclidinium 400 µg vs 100 µg. The safety profile of aclidi		10945539, 15229629 (electronic)		
ependent clinically meaningful improvements in FEV ₁ compared with placebo. This study also confirmed th		PPTHF		
ther investigation in Phase III trials. © 2012 Elsevier Ltd.	Source Type	Journal		
	Source Publication Date	June 2012		
ug Terms	Entry Date	2012-05-18 (Full record), 2012-05-16 (Article in Press/In process)		
idinium bromide [°] 2», <u>formoterol fumarate</u> [°] 2», placebo [°] 2», <u>salbutamol</u> [°] 2»	Publication Type	Article		
	Page Range	248-253		
ease Terms	Country of Author	United Kingdom		
onic obstructive lung disease %, coughing %, diarrhea %, ECG abnormality %, headache %, prui	Country of Source	United Kingdom		
To recommend to recommend to recommend to recommend to recommend	Language of Article	English		
	Language of Summary	English		
vice Terms	Publisher Item Identifier	\$1094553912000508		
wder inhaler 🐾	Digital object identifier (DOI)	10.1016/j.pupt.2012.03.008		
	MEDLINE PMID	22497752		
her Terms	Embase Accession Number	2012260646		
ult 🐾 , article 🔩 , bronchodilatation 🔩 , controlled study 🔩 , crossover procedure 🔩 , disease severity 🤋	Number of References	20		
ıg monitoring 🔩 ، drug safety 🔩 , evening dosage 🔩 , female 🔩 , forced expiratory volume 🔩 , forced v	Cited by in Scopus	<u>30</u>		
lticenter study 😋 , phase 2 clinical trial 🐾 , priority journal 🔩 , randomized controlled trial 🐾	Device Tradenames	Aerolizer (Novartis, Switzerland), Genuair (Almirall, Spain)		
thor Keywords	Drug Tradenames	foradil (Novartis, Switzerland)		
	Device Manufacturers	Almirall (Spain), Novartis (Switzerland)		
idinium, AE, AUC, BID, Bronchodilation, COPD, DPI, ECG, FEV ₁ , FVC, ITT, LABA, LAMA, LS, Phase II, SAE, SE,	Drug Manufacturers	Novartis (Switzerland)		
rrespondence Address		aclidinium bromide (<u>320345-99-1</u>)		
ngh D. 🔄 University of Manchester, Medicines Evaluation Unit, University Hospital of South Manchester	CAS Registry Numbers	formoterol fumarate (<u>43229-80-7</u>) salbutamol (<u>18559-94-9</u>), <u>35763-26-9</u>		
ithor Addresses	Clinical Trial Numbers	ClinicalTrials.gov (NCT01120093)		
ingh D. I University of Manchester, Medicines Evaluation Unit, University Hospital of South Manchester Magnussen H. J., Kirsten A. I Pulmonary Research Institute at Hospital Grosshansdorf Woehrendamr		800000		

What is Emtree?

A controlled vocabulary for Biomedicine and related Life Sciences



What is facet?

The levels of a thesaurus subject hierarchy are called facets. Each facet represents a broad category of subjects.

Webinar Recording <systematic searching with Emtree> http://help.elsevier.com/app/answers/detail/a_id/18667/p/9754/

Emtree Facts

75,000 preferred terms

320,000 synonyms

Drug Facet: 32,000 preferred terms and over 200,000 synonyms

Including all MeSH terms

Emtree update 3 times a year, including backposting

Explore Emtree

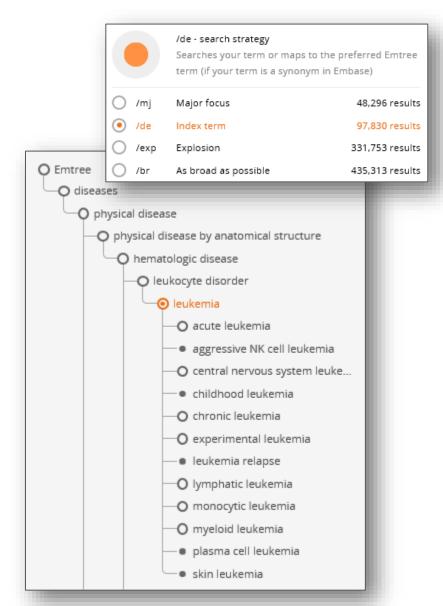
The hierarchy of terms defines the context

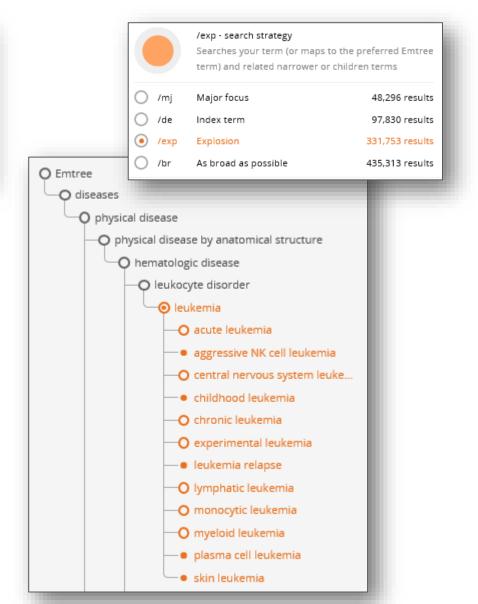
Drugs can be classified via different routes:

- Drug class:
 - therapeutic use
 - system affected
 - mechanism of action
- Pharmacological activity
- Chemical structure



Make use of the Emtree structure: explosion searching





adverse

device effect

Subheadings

Subheadings are Emtree terms that are also used as concept qualifiers for drugs, diseases and devices to refine their meaning, providing a very precise idea of what an article covers. Side effect Adverse Drug drug therapy Drug reaction therapy Disease Drug Drug combination Drug comparison **Device**

Device comparison

Drug

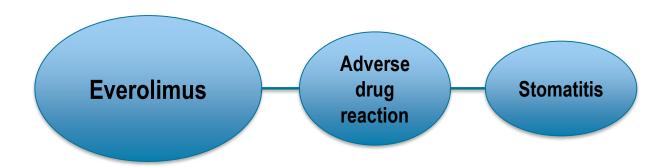
interaction

Indexing: triple-linking

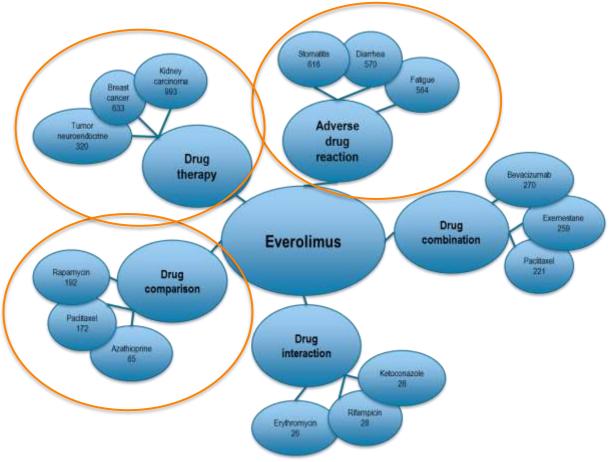
Triple-indexing is three level indexing of the full text of an article. It consists of:

- Term (drug or device or disease)
- Key subheading (relationship)
- Linked terms (e.g. stomatitis, hypertension, stroke, nausea, etc.)

Triple indexing has started in Q1 of 2007 for the **drug triples** (drug therapy from Q2 of 2009). **Devices** began in Q2 of 2014.



E.g. Triple indexing can be used to identify relationships of the drug Everolimus



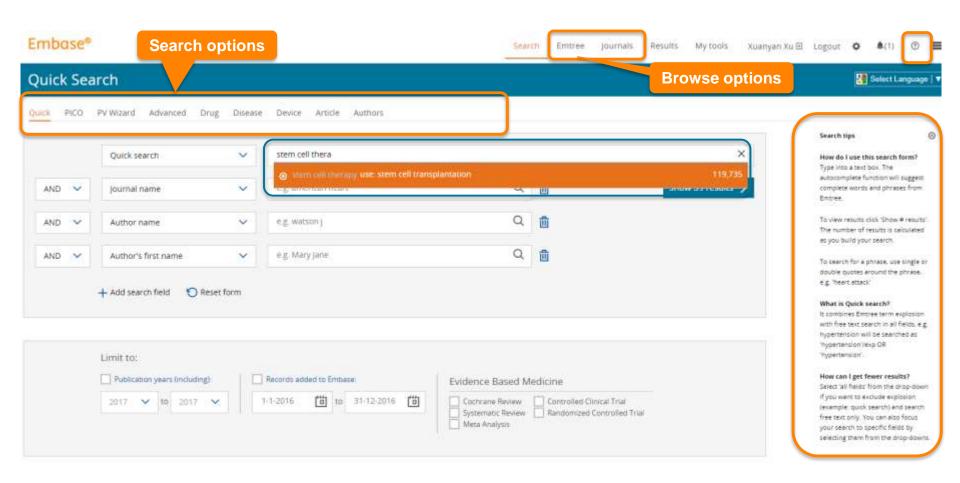
Manually extracted semantic relationships

Triple linking and drug-repurposing

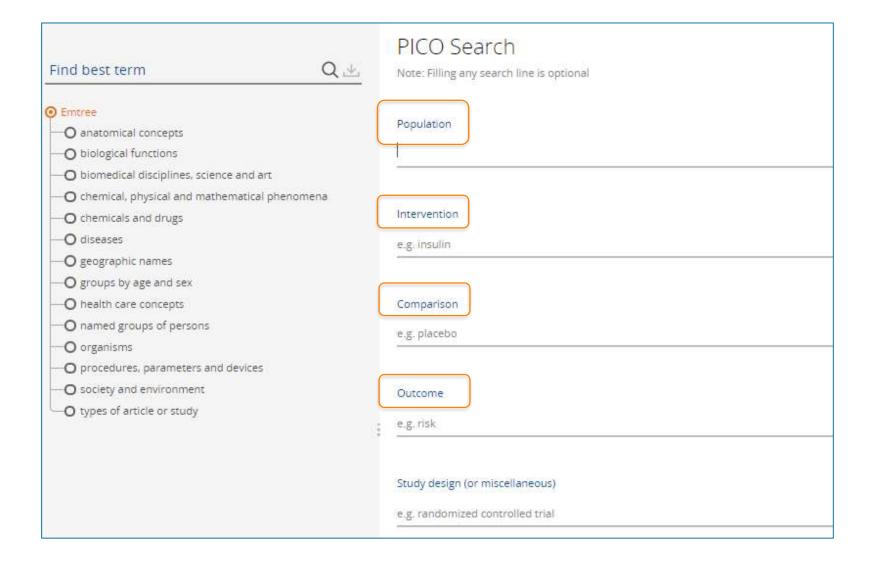
- http://help.elsevier.com/app/answers/detail/a_id/11345/p/9754
- http://help.elsevier.com/app/answers/detail/a id/6082/p/9754



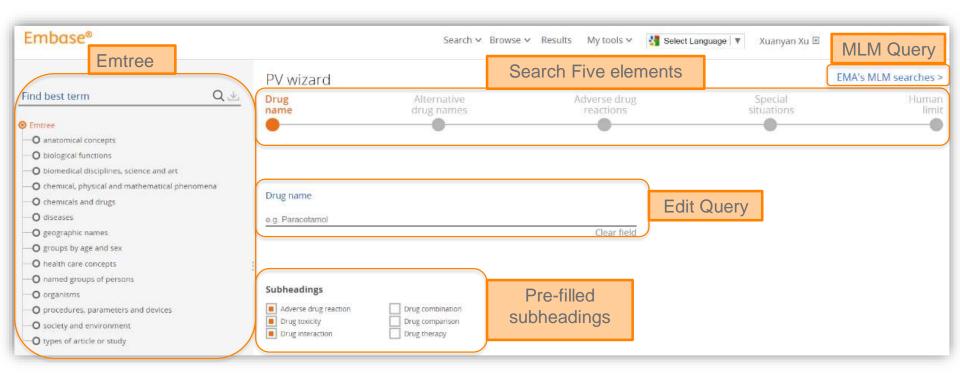
Tools in Embase.com



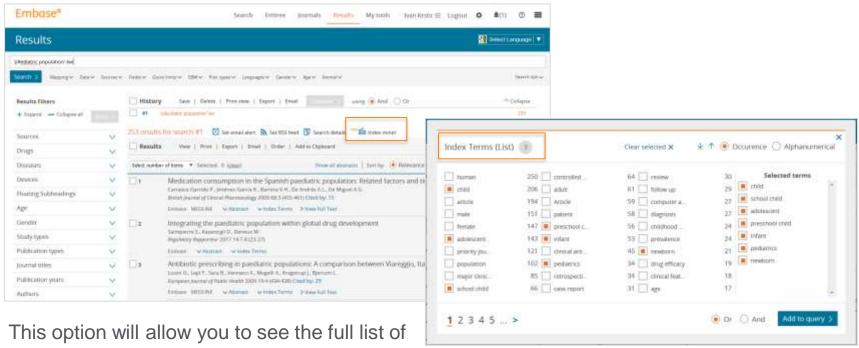
Using PICO search form for systematic searching



Using PV wizard search form



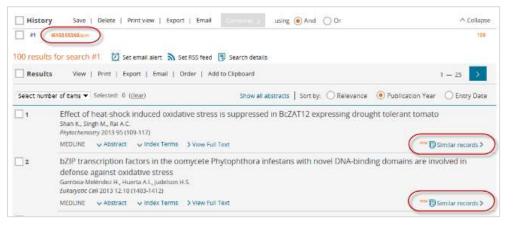
Index miner



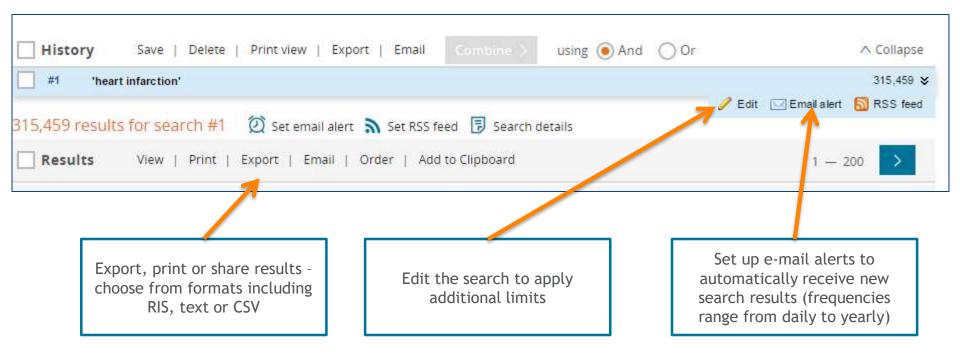
I his option will allow you to see the full list of indexed terms in the result set, and select the ones you want to include to expand the search.

Find similar records

- Embase will display 100 records similar to a record (e.g. L123456789)
- Search syntax will be L123456789/sim
- Search will be executed as a combination of major focus terms:
 'term 1'/mj AND 'term 2'/mj OR ('term 1'/mj AND 'term 3'/mj) OR ('term 1'/mj AND 'term 4'/mj) OR ('term 2'/mj AND 'term 3'/mj) OR ('term 2'/mj AND 'term 4'/mj) ... OR ('term n-1'/mj AND 'term n'/mj) NOT L123456789
- Results will be sorted by relevance and limited to top 100



Managing results



How Embase delivers value?

...by including literature and information resources in a timely manner

Conference proceedings



Scientific Journals



In Press In Press (unpublished)



We make sure you don't miss any biomedical literature

...by reading full-text to identify drugs, diseases, adverse affects, clinical trials, drug trade names etc.

Deep indexing using own taxonomy (EMTREE)

The only close alternative is reading all the articles

...by enabling advanced search filters and intuitive search tools to pinpoint relevant literature and manageable record set

Very powerful Search Environment

Good precision and recall balance

...by allowing users to automate searching and result management







Interoperability E-mail Alerting

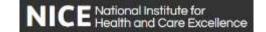


Automation and documentation

Embase is recommended by the regulatory bodies and authorities for maintaining awareness of safety profiles













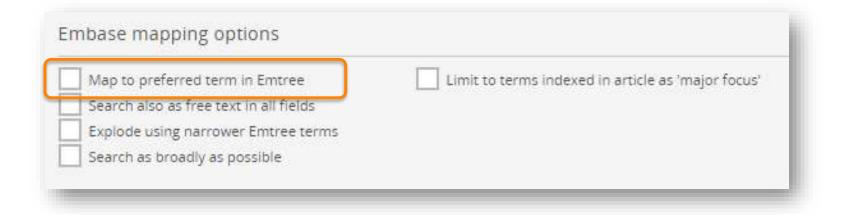


EUROPEAN COMMISSION
ENTERPRISE AND INDUSTRY DIRECTORATE GENERAL

Consumer Goods
Cosmetics and Medical Devices



Basic searching



/de: search the preferred term

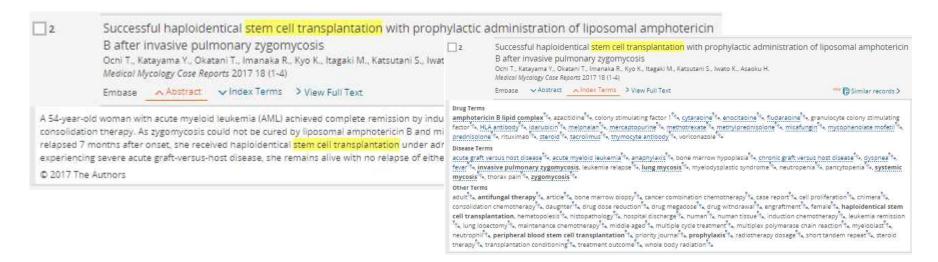
Stem Cell Therapy is a synonym of Stem Cell Transplantation Searching 'stem cell therapy' will be mapped to searching the preferred term 'stem cell transplantation'

'stem cell therapy'/de 36,166 'stem cell transplantation'/de 36,166

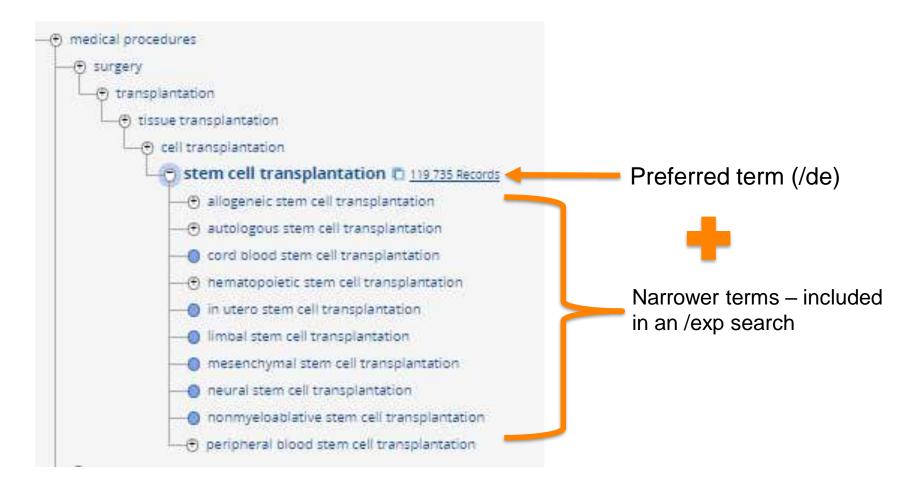
Map to preferred term in Emtree	Limit to terms indexed in article as 'major focus
Search also as free text in all fields	
Explode using narrower Emtree terms	
Search as broadly as possible	

search in all fields of a record

including title, abstract, author keyword, institute name, all fields



/exp: explode using narrower Emtree terms



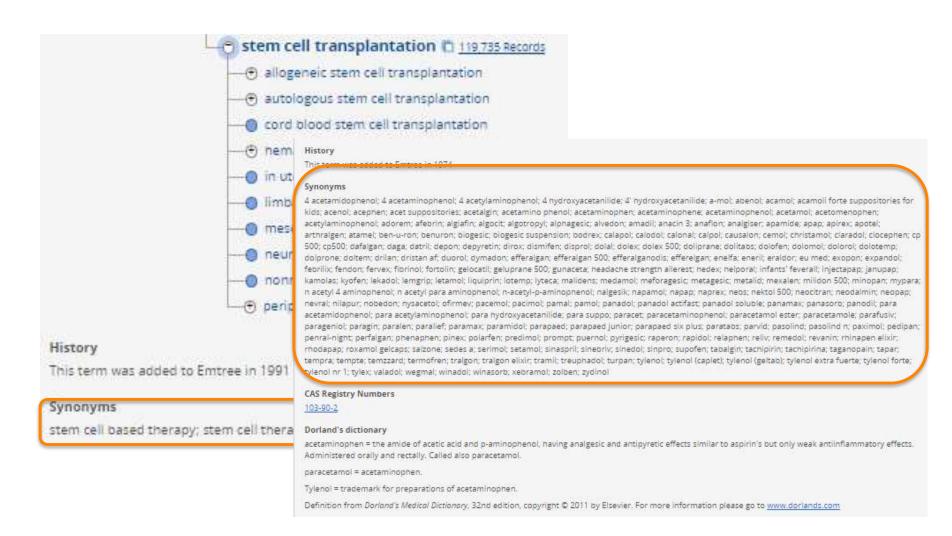
Map to preferred term in Emtree	Limit to terms indexed in article as 'major focus
Search also as free text in all fields	
Explode using narrower Emtree terms	
Search as broadly as possible	

/br Search as broad as possible. It combines:

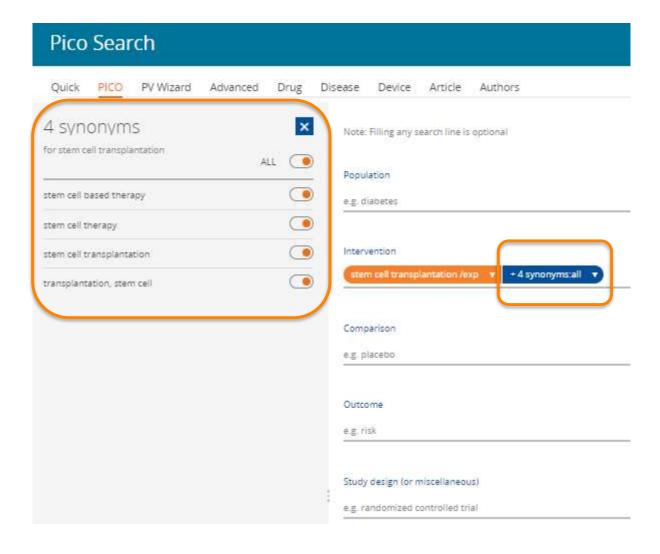
- Map to preferred term in Emtree
- Search also as free text in all fields
- Explode using narrower Emtree terms

'stem cell transplantation'/exp 119,735
'stem cell transplantation'/br 130,135
'stem cell transplantation'/exp OR 'stem cell transplantation' 130,135

Synonyms

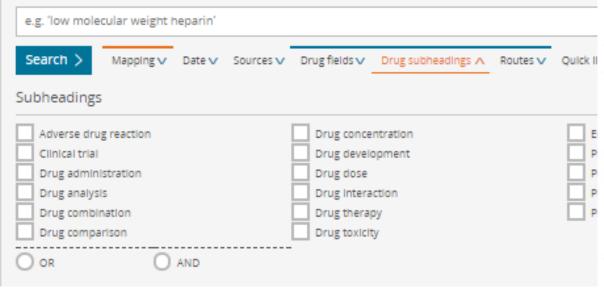


Using PICO to include synonyms



Balance comprehension and precision

- To increase comprehension
 - Include sub-terms/derivatives with an <u>explosion</u> search
 - Include synonyms in a <u>free text</u> search => PICO form can h
- To increase precision



Sources	V
Drugs	~
Diseases	~
Devices	~
Floating Subheadings	V
Age	V
Gender	~
Study types	~
Publication types	~
Journal titles	V.
Publication years	~
Authors	~
Conference Abstracts	~
Drug Trade Names	V.
Drug Manufacturers	V
Device Trade Names	~
Device Manufacturers	~

Results Filters

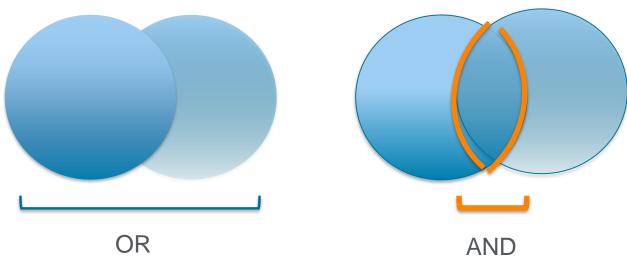
+ Expand - Collapse all

Tips for searching – Boolean operators

The Boolean logical operators AND, OR, NOT, NEAR and NEXT can be used to combine search terms or query numbers in a variety of ways:

- Aged OR elderly OR geriatric At least one word must be mentioned in each record
- Depression AND tricyclic Both words must be present in each record

Boolean operators can be combined and nested with parentheses within a single search statement:



Tips for searching

• When conducting a search of Article title and Abstract for author free-text expressions consider using **proximity operators** (**NEXT**, **NEAR**) as appropriate

cardiac NEAR/5 catheter retrieves:

output pulmonary artery catheter."

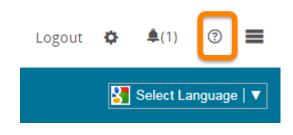
"Despite complicated cardiac anatomy, catheter ablation of AT..."
"... patients undergoing catheter ablation for cardiac arrhythmias ..."
"...a continuous thermodilution cardiac

When performing free-text searches, remember to **consider variant spellings** including British and American spellings and terminology

-e.g., tumor vs tumour; diaper vs nappy; pediatric vs paediatric; otorhinolaryngology vs ear, nose and throat; overuse injury vs repetitive strain injury

Where Can you Learn More?





▼ Searching	
Overview	(12)
Quick Searches	(6)
Advanced, Drug, Disease	(15)
Search syntax and operators	(10)
	(10)

> New Embase Support Center



Demo

PICO

What are the best empirical antibiotic treatment options for bacterial meningitis?

('bacterial meningitis'/exp OR 'bacterial meningitis':ti,ab OR 'e. coli meningitis':ti,ab OR 'escherichia coli meningitis':ti,ab OR 'meningitis purulenta':ti,ab OR 'meningitis, bacterial':ti,ab OR 'meningitis, escherichia coli':ti,ab OR 'meningitis, pyogenic':ti,ab OR 'purulent meningitis':ti,ab OR 'pyogenic meningitis':ti,ab ON ('antibiotic agent'/exp OR 'antibiotic':ti,ab OR 'antibiotic agent':ti,ab OR 'antibiotic combination':ti,ab OR 'antibiotic drug':ti,ab OR 'antibiotic ointment':ti,ab OR 'antibiotic residue':ti,ab OR 'antibiotics, combined':ti,ab OR 'antibiotics, folate antagonists':ti,ab OR 'antibiotics, miscellaneous':ti,ab OR 'antibiotics, nitrofuran':ti,ab OR 'antibiotics, oxalodinones':ti,ab OR 'combined antibiotic':ti,ab)

PV Wizard

Identify all the adverse events that mentioned paracetamol

PICO

Compare the everolimus eluting coronary stent with biolimus eluting coronary stent

('everolimus eluting coronary stent'/exp OR 'promus element' OR 'xience xpedition' OR 'xience-v' OR 'everolimus eluting coronary stent' OR 'xience' OR 'xience v') AND ('biolimus eluting coronary stent'/exp OR 'biolimus a9 (device)' OR 'biolimus eluting coronary stent')

Drug and Disease search

Recent reports of cardiac adverse effects of beta agonists in the treatment of asthma patients

```
#1 'beta adrenergic receptor stimulating agent'/exp/dd_ae OR 'beta adrenergic receptor stimulating agent'
#2 'asthma'/exp/dm_dt
#3 'heart disease'/exp/dm_si
#1 AND #2 AND #3
```





Thank you! Questions?

Contact: XXXXX@elsevier.com

Searching basics to master

Boolean operators

- The Boolean logical operators AND, OR, NOT, NEAR and NEXT can be used to combine search terms or query numbers in a variety of ways:
 - Depression AND tricyclic Both words must be present in each record
 - Aged OR elderly OR geriatric At least one word must be mentioned in each record
- Boolean operators can be combined and nested with parentheses within a single search statement:
 - (aged OR elderly OR geriatric) AND (depression OR insomnia)

Notes:

- •If no other operator is specified, <u>AND</u> is the default operator; heart failure is searched as heart AND failure if not enclosed in quotation marks
- •Boolean operators can be used in any search form, including Quick Search
- Phrases: searched in quotation marks; 'heart failure'

Searching basics to master

Proximity operators

Proximity operators let you search for words or phrases at any specified distance from each other

NEAR/n:

This requests terms which are within 'n' words of each other, in either direction.

cardiac NEAR/5 catheter retrieves:

"Despite complicated **cardiac** anatomy, **catheter** ablation of AT..."

"... patients undergoing **catheter** ablation for **cardiac** arrhythmias ..."

"...a continuous thermodilution cardiac output pulmonary artery catheter."

NEXT/n:

This requests terms which are within 'n' words of each other, in the order specified.

hip NEXT/3 prosthesis retrieves:

"... rheumatoid arthritis, joint surgery, **hip** or knee **prosthesis** ..."

"metal on metal **hip** resurfacing, **prosthesis** failure (complication, diagnosis)..."

Notes:

• The proximity operators NEAR and NEXT can be used with parentheses, truncation and field limits, for example: (symptom* NEAR/5 (headache* OR 'head ache')):TI,AB

Searching basics to master

Wildcard operators

- Wildcards (truncation characters) let you search for word roots, variations in spelling, many plural forms, etc.
 - Variable truncation: Use an asterisk (*)
 - ✓ sul*ur retrieves sulfur, sulphur
 - ✓ cat* retrieves cat, cats, catalyst, catastrophe
 - ➤ A question mark (?) indicates exactly one variable character
 - ✓ sulf?nyl retrieves records that contain words like 'sulfonyl' and 'sulfinyl'
 - catheter? retrieves records that contain words like 'catheters', but not 'catheter' or 'catheterization'

Notes:

- Wildcards (*, ?) are now searchable in phrases e.g. 'heart infarct*' or "metabol* disorder*'
- The wildcard * cannot be used with fewer than two characters e.g. 'm* disorder' will not return results