November 5, 2003

### Introduction

### **Caveats**

Not Experiential	When William Sieber was looking for content for our Research Fellowship meetings, I volunteered – having useful information in doing "clinical searches." However, I do not have uniform or consistent experience in research. So I've had to hunt out and make up strategies, tips and sources that might be helpful to a researcher.		
A Patchwork	To do this, I have spent time online reviewing various tips and resources, went through the PubMed Tutorial, discussed ideas with others What I've patched together isn't even a quilt – it's just a patchwork. But hopefully there are some helpful tips here.		
Varying Goals	<ul> <li>My purposes are a bit varied here because of my own personal mission:</li> <li>Clinical help – My own work is dedicated to help clinical effectiveness and decision-making, so I sneak in some information to help you answer clinical questions.</li> <li>Systematic review tips – I also include information about systematic reviews because there is possibly as much or more work needed in this arena than in "generating new knowledge." You may wish to take on an SR as one of your fellowship projects.</li> <li>Research searching – My primary goal is to give you tips to help you conduct primary research. Yet this is necessarily incomplete. You will have to become a "researcher" of additional assistance toward your own searching needs.</li> </ul>		

### Recognition and Recommendations

Thanks!	I have much gratitude for Nancy Stimson, UCSD Biomedical Library, because of her incredible helpfulness. Nancy is only responsible for anything good within and nothing bad – ALL failings, inconsistencies, weaknesses, etc., are mine and mine alone. Also, I always am grateful for the help of Ted Ganiats and Mike Stuart – some of Mike's great work is reflected here in the clinical help pieces. And big thanks to all those who created what I cut & pasted from!
Partnering with the Library for Help	I STRONGLY recommend using the services of the wonderful Biomedical Library. They offer classes and can provide one-on-one consultations for specific research questions. Our colleagues in the library are knowledgeable resources and are wonderfully helpful – they truly demonstrate the best attributes of being there to serve.  As an example, there is so much to understand of PubMed when you are working as a researcher in particular. Our Biomedical Library angels can help you incredibly on things like using MeSH terms versus keyword searching, publication types and subsets, and more that cannot be covered here. When working with them, think of yourself as partnering with them to create a synergy between what they know and what you most need. Here's how you can reach them:  UCSD Databases for BML/MCL (Biomedical Library/Medical Center Library)  http://scilib.uscd.edu/bml/
	http://gort.ucsd.edu/clinlib/

### A Few Key Tips Overall

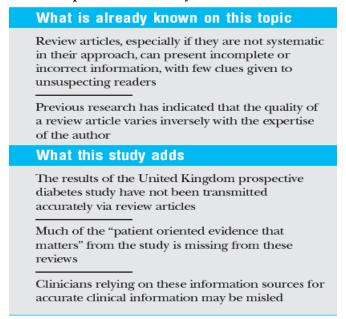
Documentation	Save your strategies. Document everything.	
Currency of	Look for gaps in time: database, article, references.	
Data	Look for gaps in time: database, article, references.	
Virtues of	It will be harder than you expect – so expect that. Meticulousness to the point of psychosis (or at least borderline)	
Having OCD	is required.	
Luck	And even from an evidence-based girl, luck is part of the formulation. Good luck and godspeed!	

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What is the purpos	se of your search? Directional tips
Answer a clinical question	<ul> <li>You need the most reliable sources for quality and usability.</li> <li>You need efficient search, filter and acquire strategies.</li> <li>→ For tips see <i>Delfini</i> Guide to Searching the Medical Literature.</li> </ul>
Conduct a systematic review	<ul> <li>You need to understand the requirements for a systematic review and how to find the right studies for combining for results.</li> <li>Find a resource like JAMA User's Guides or from readings such as recommended readings on www.delfini.org, including <i>Delfini</i> Systematic Review Appraisal Tool.</li> </ul>
Get an idea for a research topic	<ol> <li>You want to find sources for ideas that will provide value in primary care.</li> <li>Look for gaps in optimal care and current medical practice that are not well studied         <ul> <li>De Maeseneer JM, van Driel ML, Green LA, van Weel C.The need for research in primary care. Lancet PMID: 14575979 [PubMed - in process]. 2003 Oct 18;362(9392):1314-9.</li> </ul> </li> <li>Look for hypothesis-generating ideas through sub-group analysis, post-hoc analysis, case series or case reports</li> <li>Look for poor quality research which you can do well – DOEs; observational studies on therapy, etc.; inadequately powered studies with n/s findings; flawed studies, etc.</li> <li>Use explicit clinical practice guidelines to find gaps</li> <li>Get ideas from other people (research leaders, experts including those not in the field in which you are interested) and the literature – samples         <ul> <li>a. Discussion sections in reviews</li> <li>b. Berwick article and rebuttal on safety</li> <li>c. BMJ boxes – "What is known on this topic; what this study adds" – See Figure 1.             <ul> <li>d. Other?</li> <li>Other?</li> <li>Description of the provided provi</li></ul></li></ul></li></ol>
Learn what has already been studied on a topic	You need to –  Do a thorough search to learn what has already been done on a topic. (See Search Filters.)  Know, of that work, what is considered to be the key work.  Evaluate the quality of what you find (i.e., critically appraise it).
Justify a research effort	<ul> <li>Immediately above plus you need to –</li> <li>Provide background for why your question is worth answering within existing need.</li> <li>Position your work within the context of past work.</li> <li>See Figure 1. BMJ boxes – "What is known on this topic; what this study adds" – See Figure 1</li> </ul>
Other?	

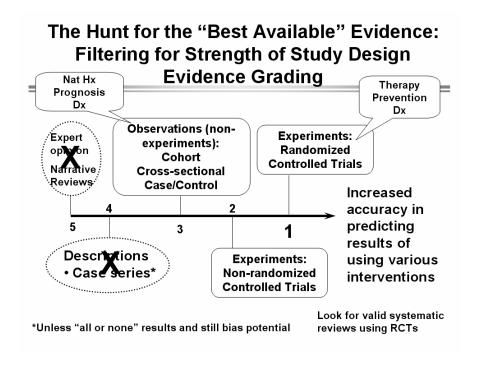
Figure 1. BMJ – "What is known on this topic; what this study adds"



### Advice from an Evidence-based Medicine Perspective

- 1. Know the basics of evidence based-medicine, especially critical appraisal.
- 2. Understand which study designs have higher methodologic strength than others (Figure 2.)

Figure 2. The Hierarchy of Evidence



3. Understand which research methodologies are the best for answering a specific type of question (Figure 3.)

Figure 3. Best research methodology for answering a specific question

Question Topic	Needs	Study Type
Treatment, Screening or Prevention  – what happens when you do something to someone?	Experiment = Randomize appropriately and compare groups	RCT
Diagnosis – does what it is supposed to do & does it improve care?	Need data to calculate sensitivity/specificity/predictive values – independent, blind comparison with a "gold standard"	RCT/ Cross-sectional
Natural history – what happens when you follow natural course of a condition	Not an experiment – follows what actually happens over time	Cohort
Prognosis – what happens when you follow the natural course of a condition	Not an experiment – follows what actually happens over time	Cohort

4. Have an understanding of sources for information and how to evaluate information once you get it:

Basic Types of Information	Tips for Finding
Secondary sources (systematic reviews including meta-	Delfini Guide to Searching the Medical Literature –
analyses, guidelines, other clinical content)	information on high quality sources, methods and
<ul> <li>You might need to critically appraise these.</li> </ul>	advice for when you need to do an appraisal
	<ul> <li>www.delfini.org – Favored Links</li> </ul>
Primary sources (articles from original research)	Delfini Guide to Searching the Medical Literature
<ul> <li>You do need to critically appraise these.</li> </ul>	
	<ul> <li>PubMed: Access through UCSD Biomedical</li> </ul>
	Library –
	http://scilib.uscd.edu/bml/
	Do hand-searches of references in key articles and
	articles of interest and in biolographies of texts
Grey literature ("The quasi-printed reports,	<ul> <li>Research and opinion leaders, authors, etc. (also for</li> </ul>
unpublished but circulated papers, unpublished	what is "in press")
proceedings of conferences, printed programs from	
conferences, and the other non-unique material which	• Unknown, but may be of possible help:
seems to constitute the bulk of our modern manuscript	http://www.greynet.org/pages/1/
collections." (Hirtle 1991).	
You do need to critically appraise these.	
Textbooks, Other?	
<ul> <li>Caveats on validity and usability.</li> </ul>	

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#### Sources for Information - Databases

#### What do the best choose?

Clinical Evidence	Cochrane
MedLine	MedLine
EMBASE*	EMBASE*
Cochrane	Grey literature

### UCSD Databases for BML/MCL (Biomedical Library/Medical Center Library)

This page lists databases covering materials in the biomedical sciences. For more databases covering all subjects, please visit the Databases A-Z page at the UCSD Libraries site.

About Some Key Databases – Always note the limitations of years for database, but also in any bibliographies.

- BIOSIS Previews: 1969 to present. Citations for over 6,000 journals, books, conference papers in biology & life sciences
- CINAHL: Cumulated Index to Nursing and Allied Health Literature 1982 present. Covers journal literature in nursing and allied health disciplines, including physical & occupational therapy, clinical nutrition, speech pathology.
- Current Contents 1993-present. Citations from over 6500 scholarly journals in all disciplines: arts & humanities, social sciences, and sciences.
- \* EMBASE European and concentrates on drugs Per BML, very good resource, yet not available at UCSD except going through BML Reference Librarian for a fee (contact Penny Coppernoll-Blach).
- LILACS Latin American and Caribbean Literature on the Health Sciences is a BIREME System's cooperative database which covers literature related to the health sciences and has been published in countries of the Region since 1982. It contains articles from about 670 of the most well-known journals in the medicine field, reaching approximately more than 150,000 records and other documents, such as: theses, chapters of theses, books, chapters of books, congress and conference proceedings, technical and scientific reports and governmental publications.

MedLine – MedLine is the National Library of Medicine (NLM) on-line database of medical, dental, nursing and basic life science publications. **PubMed** is the user-friendly interface for MedLine.

- PsycINFO Database (Psychological Abstracts): 1840-present. Access to international literature in psychology, cognitive science, and related disciplines. Abstracts journal articles, book chapters, and dissertations. Many articles are available full-text.
- IN PubMed = TOXNET® links to the NLM's TOXNET Web site which provides access to a cluster of databases on toxicology, hazardous chemicals, and related areas.
- At UCSD BML Lots of resources including MICROMEDEX for drug info.
- Other?

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#### Sources for Information – Research Awareness

### Alerts on newly published articles -

**Through UCSD BML – Current Awareness Updates** (PDF) Keep up-to-date on your search topics. PubMed has more up-to-date citations than any other MEDLINE provider, but it does not have an automatic e-mail update service. **PubCrawler** and **BioMail** are free third-party tools which you can set up to send you automatic search results by e-mail based on a PubMed query that you store on their systems.

*Tip:* the *most recent* citations in PubMed have no MeSH subject terms attached, so for the most recent articles, you'll want to base your current awareness search on title/text words, authors, and/or journal name, and not use limits like age group, human/animal, language, or publication type.

No specific recommendation from BML – each is a little different; it's totally a personal preference:

### For PubCrawler

http://www.pubcrawler.ie/

Remember: "It goes to the library. You go to the pub."

#### For **BioMail**:

http://berlioz.informatics.sunysb.edu/cgi-bin/biomail/users.pl

### Information on Ongoing Clinical Trials -

- IN PubMed = ClinicalTrials.gov links to the NIH/NLM Web site for current information about clinical research studies.
- DARE "Full search: It is important to find out if there are major studies on the research question in progress in order to contact the researchers for preliminary information, and learn when the study is to be completed and the results made available. The following resources have a UK bias. A wide range of research registers outside the UK could also be identified and consulted."

http://www.york.ac.uk/inst/crd/revs1.htm

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### Some Cool Features in PubMed

What do you want to do?	Where do you want to go? Features Bar
To learn PubMed	Tutorial — Easy to navigate for specific features described below – and more.
Restricts searches to	Limits
specific fields	Restrict to age groups, gender, <b>type of study</b> , Entrez or publication date, a specific language, types of
	articles, or <b>subsets</b> .
	■ For tips see <i>Delfini</i> Guide to Searching the Medical Literature
View your search	<b>Details</b> – reasons to use →
strategy as it was	See how PubMed translated your search:
translated by PubMed	Understand your retrieval, deal with surprises, find misspellings
	Edit your search
	Save your search strategy: If you want to save the current strategy for later use, click on the URL
	button. Use your Web browser's bookmark or favorites feature to save this URL. Another way to save
	your search strategy is to use the <b>Cubby</b> . <b>Tip</b> : Do save the strategy finally used for certain!
	<b>Note:</b> Searches that are created using a search statement number (in <b>History</b> ) for example, #1 or #2, should not be saved using the URL button as the search statements represented by these numbers are
	lost when History is automatically deleted after one hour of inactivity.
View and combine	History
previous queries	<b>Tip</b> : May be most useful for viewing only. May be easier to perform multiple single or simple searches
previous queries	rather than complex ones. It's a personal preference thing. You can get a lot of help from BML on queries.
Collect citations –	Clipboard
TEMPORARILY	Can collect up to 500 items from current or previous searches. <b>Limited in time stored</b> .
	Can save items, remove them and print.
	PubMed can also save citations to a file on your computer. You can save individual, selected, or all
	citations. There is a limit of 10,000 items.
What do you want to do?	Where do you want to go? Side Bar
Use some selected pre-	Clinical Queries
constructed search	<ul> <li>Specialized searches for clinicians – "Clinical Queries using Research Methodology Filters</li> </ul>
methods	based on Haynes RB et al. Developing optimal search strategies for detecting clinically
	sound studies in MEDLINE. J Am Med Inform Assoc. 1994 Nov-Dec;1(6):447-58."
	<ul> <li>Specialized query for retrieving systematic reviews.</li> </ul>
	For tips see <i>Delfini</i> Guide to Searching the Medical Literature
Benefit from a more	Cubby – requires registration and cookies
permanent and	Store a Search and Check What's New
sophisticated way than	Store searches that you run regularly to check for new items retrieved.
Clipboard to store search	■ Reviewing Information About a Stored Search
strategies =	You can click on the Cubby search name to see details about your Cubby stored search. Information
Cubby	about the stored search includes the Cubby Search Name, the date and time the search was stored or
	last updated, and the search strategy and limits used.
See what else is related in	Related Articles & Links
PubMed	Tip: Can use Links to see MeSH terms used for searching ideas.
Browse medical subject	<b>MeSH Browser</b> To browse for a term, enter the term in the search box and click Go. If there is no match or
headings	associated term, the browser provides a list of possible terms for you to choose from.
Search for a journal	Journals Database
	The Journals Database is accessed from the PubMed sidebar. It allows you to look up a journal and search
	for citations from that journal in PubMed. You can locate the journal using:
	The title of the journal.  The ISSN (International Standard Serial Number)
	The 1551V (International Standard Serial IVaniber).
	<ul><li>The MEDLINE journal title abbreviation.</li><li>The NLM ID (NLM's unique journal identifier).</li></ul>
	The 142141 12 (142141 5 unique journal identifier).

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### **Searching Suggestions**

- Courses available on "Searching" through UCSD Biomedical Library
- Access PubMed through UCSD BML to get full text where available to UCSD

Go through –	1. Choose PubMed Information for UCSD	
http://scilib.ucsd.edu/bml/	2. Then PubMed Profiled for UCSD Users	

Quick Tip from UCSD BML: "PubMed's links to our journals are not complete - we have a number of journals online that PubMed does not link to. Some users find it easier to open a second window with either ROGER or our E-Journals page. This makes it easy to flip back and forth to check on all of our holdings. ROGER accepts official MEDLINE abbreviations for journal titles, so you can just copy and paste the journal names from PubMed into the Title search in ROGER. These links will open either our E-Journals pages or a ROGER Journal Title search in a second window."

### Search Strategy Tips From PubMed

- Identify the key concepts.
- Determine alternative terms for these concepts, if needed.
- Refine your search to dates, study groups, etc., as appropriate.
- Practice helps. Strategies and styles will differ according to personal choice and professional discipline

### Alternative Terms Examples – "Do physician communications improve patient outcomes?" = 5 hits in PubMed

- 1. Physician communications patient outcomes = 28
- 2. Physician communication patient outcomes = 503
- 3. Communication OR bedside manner OR rapport OR relationship OR medical interview = 878070
- 4. Communication OR bedside manner OR rapport OR relationship OR medical interview AND patient outcome = 9452
- #4. Using "Clinical Queries," Systematic Reviews = 644
  - That is how we got to this → . Beck RS, Daughtridge R, Sloane PD. Physician-Patient Communication in the Primary Care Office: A Systematic Review. JABFP 2002. 15:25-38. JABFP
- #4. Using Limits meta-analysis = 61

#### **MeSH Browser**

- Online vocabulary look-up aid available for use with MeSH® (Medical Subject Headings).
- Designed to help quickly locate descriptors of possible interest and to show the hierarchy in which descriptors of interest appear.
- The MeSH hierarchy can also be displayed online as in this example and each descriptor is a direct link to the complete MeSH record for that term. Example for Breast Neoplasms:

Neoplasms [C04]

Neoplasms by Site [C04.588]

Abdominal Neoplasms [C04.588.033] ± Anal Gland Neoplasms [C04.588.083]

Bone Neoplasms [C04.588.149] ±

Breast Neoplasms [C04.588.180]

Breast Neoplasms, Male [C04.588.180.260]

Mammary Neoplasms [C04.588.180.520]

Mammary Neoplasms, Experimental [C04.588.180.525]

Phyllodes Tumor [C04.588.180.762]

Digestive System Neoplasms [C04.588.274] ± etc...

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#### **Boolean Searching**

TIP: May be best to keep it simple and do multiple searches rather than one huge comprehensive search.

- Boolean searching lets you put search terms into logical groups through the use of connecting terms (Boolean connectors): AND, OR, NOT. For example, apples or oranges broadens a search (either term may be in the records retrieved). Whereas, apples and oranges narrows the search (both terms must be in the records retrieved). Not excludes terms: oranges not apples excludes records which contain the word apples.
- Boolean operators -- AND, OR, NOT -- must be entered in uppercase letters.
- Boolean operators are processed from left to right.
- Use parentheses to nest terms together so they will be processed as a unit and then incorporated into the overall strategy.

**Truncation** = \* as wild card. Truncation turns off automatic term mapping and the automatic explosion of MeSH terms. For example, **heart attack**\* will not map to the MeSH term *Myocardial Infarction* or include any of the more specific indentions, such as *Myocardial Stunning* 

**Nesting** involves using parentheses to insure that Boolean operations are performed in the sequence you intend. This technique allows you to build a complex search using two or more operators (AND, OR, NOT).

**CAUTION!** You may not build a good search using more than one Boolean operator without using nesting.

### Example of simple nesting & what is going on in the search:

#### Find: smoking AND (adolescents OR teenagers) = 15978

In this search the OR operation is nested and will be performed first. Then the AND operation will be performed. This search will retrieve items on smoking and adolescents as well as items on smoking and teenagers.

Using Details reveals the actual search used → (("smoking"[MeSH Terms] OR smoking[Text Word]) AND (("adolescent"[MeSH Terms] OR adolescents[Text Word])))

#### **Example of more complex nesting:**

### Find: (smoking OR tobacco OR nicotine) AND (adolescents OR teenagers) = 17468

The OR operations inside both sets of parentheses will be performed first, and then the resulting sets will be combined using the AND operator. Nesting synonyms in this way can broaden your search.

(((("smoking"[MeSH Terms] OR smoking[Text Word]) OR ("tobacco"[MeSH Terms] OR tobacco[Text Word])) OR ("nicotine"[MeSH Terms] OR nicotine[Text Word])) AND (("adolescent"[MeSH Terms] OR adolescents[Text Word])) OR ("adolescent"[MeSH Terms] OR teenagers[Text Word])))

#### **BAD Example:**

• Find: smoking OR tobacco AND adolescents OR teenagers = 991374

This search will perform the OR and AND operations in the sequence that they are typed. This will retrieve items that are irrelevant! You will retrieve all items about "teenagers," not just those relating to smoking.

(((("smoking"[MeSH Terms] OR smoking[Text Word]) OR ("tobacco"[MeSH Terms] OR tobacco[Text Word])) AND ("adolescent"[MeSH Terms] OR adolescents[Text Word])) OR ("adolescent"[MeSH Terms] OR teenagers[Text Word]))

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Search Filters – Not necessarily recommended by BML, but included here to point out complexities. Syntax varies for different sources of information.

### Scottish Intercollegiate Guidelines Network

http://www.show.scot.nhs.uk/sign/methodology/filters.html

Search filters are pre-tested strategies that identify the higher quality evidence from the vast amounts of literature indexed in the major medical databases. Filters exist for most types of experimental design, and are comprised of index terms relating to study type and specific terms associated with the methodological description of good experimental design.

These are designed for specificity.

- Systematic Reviews
- Randomised Controlled Trials
- Observational Studies
- Diagnostic Studies
- Economic Studies

#### **DARE**

http://www.york.ac.uk/inst/crd/search.htm Search Strategies to Identify Reviews and Meta-analyses in MEDLINE and CINAHL

Options for sensitivity and specificity

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Sample - PubMed MESH Browser: "Decision"

### National Library of Medicine - Medical Subject Headings

### **2003 MeSH**

Return to Entry Page

### Please select a term from list:

**Decision Making** 

Decision Making, Computer-Assisted

Computer-Assisted Decision Making

Medical Decision Making, Computer-Assisted

Decision Making, Organizational

Organizational Decision Making

Decision Support Systems, Clinical

Clinical Decision Support Systems

Decision Support Systems, Management

**Decision Support Techniques** 

**Decision Analysis** 

**Decision Modeling** 

Models, Decision Support

Analysis, Decision

**Decision Aids** 

**Decision Support Technics** 

**Decision Theory** 

**Decision Trees** 

Epilepsy, Reflex

Decision Making Reflex Epilepsy

Jurisprudence

**Court Decision** 

**Resuscitation Orders** 

**Resuscitation Decisions** 

Supreme Court Decisions

United States Supreme Court Decisions

legislation & jurisprudence

court decisions

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