



Ovid

Ovid Open Access:
Know more with Medknow

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Agenda

Today's session will look at the following...

- ✓ Ovid Open Access What is it?
- ✓ The Content

 What are the sources behind Ovid Open Access?
- ✓ A Trainer's View Some hidden benefits of Ovid Open Access

Available as part of your Ovid MEDLINE subscription.

Where:

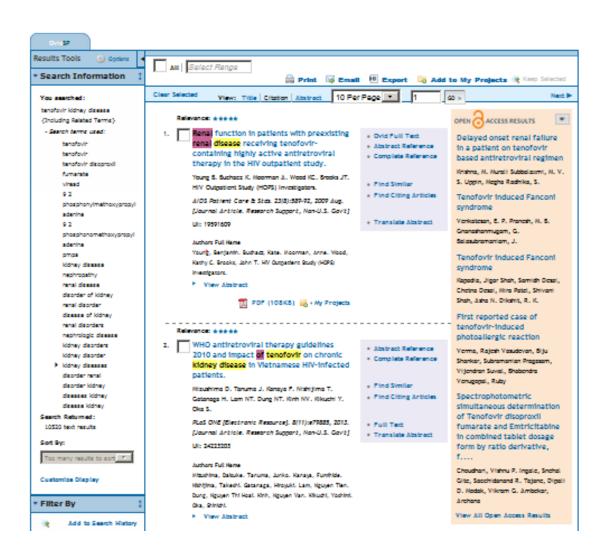
Ovid MEDLINE

What:

tenofovir kidney disease

How:

Basic Search



Accessible only via the Basic Search.

Where:

Ovid MEDLINE

What:

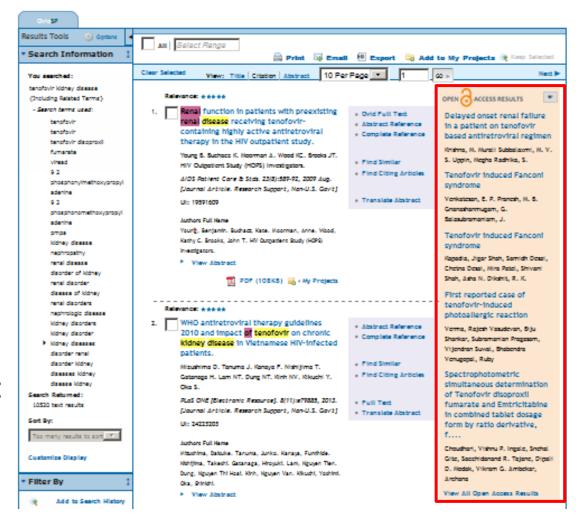
tenofovir kidney disease

How:

Basic Search

Ovid Open Access:

Full text resources (usually)



The results can be displayed as Ovid Open Access only.

Where:

Ovid MEDLINE

What:

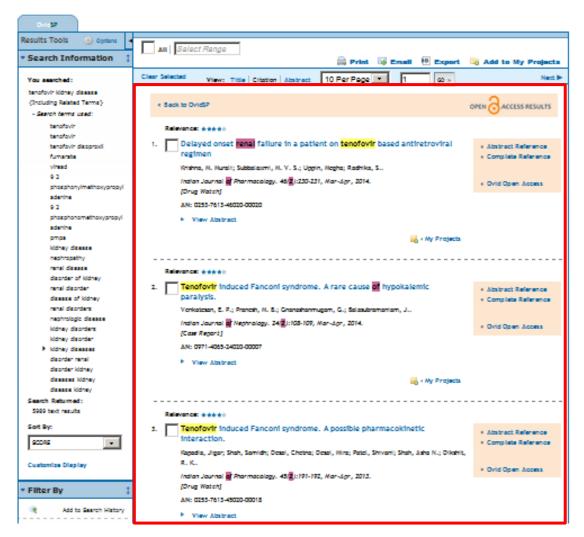
tenofovir kidney disease

How:

Basic Search

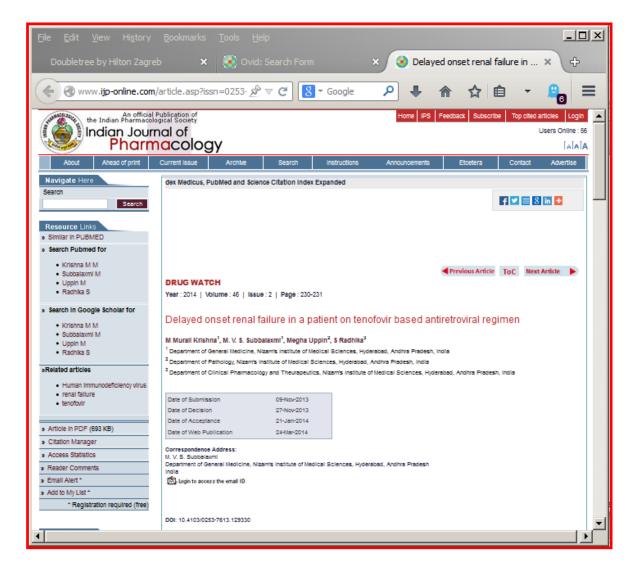
Ovid Open Access:

Full text resources
Record as for MEDLINE



Links out to the record on the Medknow website.

Where: Out of Ovid Space!



The Content

There are two content repositories to consider...

Medknow Publications the largest editor of Open Access Journals, and now owned by Wolters Kluwer Health.

PubMed Central

a huge open access digital library managed by the National Center for Biotechnology Information (NCBI).

The Content

Medknow Publications, a Wolter Kluwer company.

- ✓ Part of Wolters Kluwer Health, Medknow Publications is one of the largest Open Access publishers, publishing on behalf of learned societies & associations.
- ✓ Over 349 scholarly journals, affiliated with nearly 314 societies & associations, providing over 100,000 Full-Text Articles.
- ✓ Publishes professional health information for clinicians, physicians, nurses and students where the top quality journals are peer-reviewed, each journal with its own website.
- ✓ Cover a wide range of subject areas including Alternative Medicine, Nursing, Pharmacology, General Medicine and more.
- ✓ Indexed in a large number of bibliographic databases like Embase, PubMed, Science Citation Index, CINAHL that adds to the high visibility & research impact.

The Content

PMC (formerly PubMed Central).

- ✓ The U.S. National Institutes of Health (NIH) digital archive of biomedical and life sciences journal literature.
- ✓ Peer-reviewed scientific literature in biomedical and life Sciences with over 1000 unembargoed PubMed OA Journals, containing abstracts with links to full text.
- ✓ All Public Library of Science (PLoS) journals will be available via PubMed Open Access on Ovid.
- ✓ Top resources on PMC include:
 - Human Genomics and Proteomics (Sage Publications)
 - *BMJ Open* (BMJ Group)
 - *PLoS Medicine*, (Public Library of Science)

A Trainer's View

Full-text sources are still only a part of the total domain.

Ovid Open Access:

Facilitates access to full text

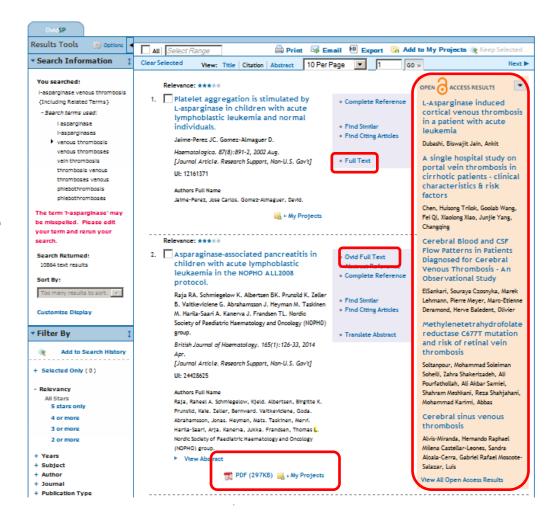
Case study example:

Users want to access full text as fast as possible. They overlook the reach of the key bibliographic databases like MEDLINE with 22 million records.

Recommendation:

Use Limits to narrow down to

- Ovid Full Text
- Full Text



A Trainer's View

A case study of the one record that might have got away!

Ovid Open Access:

Expands the research domain

Case study example:

An important side effect was found in the *Journal of Pharmacology and Pharmacotherapeutics*. This is not indexed in MEDLINE nor in Embase.

Recommendation:

Basic Search across

- Ovid MFDLINE
- Embase
- Ovid Open Access

L-Asparginase induced cortical venous thrombosis in a patient with acute leukemia

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ABSTRACT

L-Asparginase is used for remission induction in acute lymphobiastic leukemia. We describe a case of 16-year-old boy who developed cortical venous thrombosis following the administration of L-Asparginase.

Key words: Acute lymphoblastic leukemia, cortical venous thrombosis, L-Asparginase

INTRODUCTION

1-Asparginase is an active anti-cancer drug exclusively used in the treatment of Acute Lymphoblastic Leukamia. The common side effects include Hypersensitivity reactions, Pancreathis and Coagulation absormalities. Cortical vescors thrombosis (CVT) is an uncommon side effect and can result in a life threatening complication. Here we report a case of a young boy with leukamia who developed CVT on treatment with 1-Asparginase.

CASE REPORT

A 16-year-old boy diagnosed as acute lymphoblastic leukemia (ALL) was started on multicentric protocol (MCP) 841 protocol. The drugs used during the induction phase include uncertainte, 1-asparginase, demonrablein, and steroids. He received 1-asparginase 6000 IU/m² on alternate days for



five doese during the repeat induction phase. He presented with headache, vomiting, and multiple episodes of seizures. On extensionation, he was afabrile, there was no evidence of neurological deficit and fundus examination revealed no evidence of papelledeam. Hemogram was normal with no evidence of papelledeam. Hemogram was normal with no evidence of blacks on the peripheral smear. A contrast enhanced CT brain was taken which revealed cortical venous thrombosis (CCVT) [Figure 1]. He was started on low molecular weight beparin (enoxaparin) at a dose of 1 mg/kg twice a day for 6 months and his symptoms improved A repeat CT taken after a month revealed a normal study.

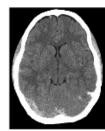


Figure 1: CT brain—showing cortical various thrombosis

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Questions?

Thank you for your time and attention.

For more information and further assistance on how to use specific features on OvidSP such as **Export Selected to Powerpoint** as demonstrated on this slide, please see the OvidSP Resource Center or contact the trainer directly:

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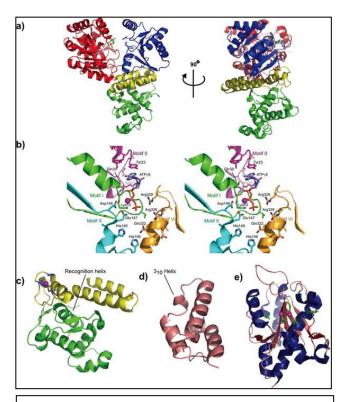


Figure 2 . Structural features of RecQ DNA helicases.
Sit down, relax and unwind: structural insights into RecQ helicase mechanisms. Killoran, Michael; Keck, James Nucleic Acids Research. 34(15):4098-4105, September 2006.
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