

separate communities should be developed.

3. Healthcare professionals prefer focused, structured and moderated online discussions. This has resource implications but is essential if rambling and aimless discussions that result in low interaction are to be avoided.
4. All healthcare organisations need to ensure adequate IT access but perhaps more importantly is change to the organisational culture so that it embraces the use of technology as part of everyday professional work.

A glimpse into an online community can be easily obtained by joining an existing community but registration may be required. Examples include Saferhealthcare <www.saferhealthcare.org.uk/ihi> and CHAIN <<http://chain.ulcc.ac.uk/chain/>>. Saferhealthcare has a focus on patient safety and offers a range of discussion forums within the 'Peer-to-Peer' section that use a discussion board approach. CHAIN (Contact, Help, Advice and Information Networks) is a well-established group of online networks for healthcare professionals that are based around specific areas of interest. The networks mainly provide opportunities to share information by email but CHAIN 2 for work-place learning occasionally offers an interactive discussion forum that uses a blog format.

I accept that some online communities can be a success but I have not been able to find the evidence. I encourage everyone to evaluate and publicise their successes. Online communities have the potential to meet the challenge of sharing professional knowledge for healthcare professionals. However, we do appear to keep replicating failure and my research suggests that the basic principles are repeatedly ignored. Is this the future?

References

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Medical Journals Back-files Project

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An initiative to create a free-to-access, critical mass of digital content, based on the back-files of a number of historically significant medical journals.

The Medical Journals Back-files Project is an initiative to create a free-to-access, critical mass of digital content, based on the back-files of a number of historically significant medical journals.

Carried out in partnership between the Wellcome Trust, the Joint Information Systems Committee (JISC), the National Library of Medicine (NLM), and a number of publishers, this project will, on completion, deliver more than 3 million pages of content, made freely available on the Internet via PubMed Central (PMC) <www.pubmedcentral.gov>.

Every word within the archive is indexed enabling a researcher to look for any word or phase, wherever it may appear within the article.

Although the project focuses on digitising back-files, participating publishers also agree to deposit new issues of these journals into this archive on an on-going basis, subject to an embargo period. As such, this project is in close accordance with the Wellcome Trust's position on the desirability of open access to scientific literature.

Thus far, 17 journals, published by a mix of for-profit, not-for-profit, and learned society publishers, have agreed to participate in this project. Titles that will be made available through this project include the *Annals of Surgery*, *BMJ*, *Biochemical Journal*, and the *Journal of Physiology*. A full list of titles that are participating in this project can be found at <<http://library.wellcome.ac.uk/backfiles>>.

...help today's clinicians and researchers discover and access the 'minutes of science', as recorded in these historically significant journals.

A value-added product

In addition to creating page-scans of every single page in the archive, this project also provides a number of value-added features that will help researchers exploit the full potential of the archive. Some of these key features are described below.

Searching the archive

Every word within the archive is indexed enabling a researcher to look for any word or phase, wherever it may appear within the article. In addition, a bibliographic citation for every discrete article is created for inclusion in PubMed. Thus, a

researcher who uses the PubMed database to find articles relevant to the research they are undertaking will be alerted to articles (with links to the full text article in PMC) irrespective of when they were published, or when PubMed/Medline started indexing that title.

Finally, as Google and other search engines are able to trawl and index every paper within the archive, the researcher who uses these generic search tools will still be made aware of relevant papers within the back-file archive.

Innovative linking

To help the researcher move from one relevant research paper to another, all references cited in a paper are programmatically

...research papers are linked to related datasets, such as chemical compound and gene sequence databases.

extracted from the article and rendered as hypertext links. Thus, if a paper references another study that is included in the PMC archive, then the researcher can simply follow the link and access the article.

This linking process is run dynamically, so as more content becomes available in PMC then the greater the chance of being able to move from article to article. If the article is not available in PMC, then the reference will be linked to a PubMed citation (if one exists) and from there – dependent upon the publisher policy – it may be possible to link to the original paper.

Another powerful linking facility relates to online corrections. When a journal within the archive includes a published erratum, these data are tagged in the PMC database and a link is created to the original article. Finally, research papers are linked to related datasets, such as chemical compound and gene sequence databases. As this linking is two-way, the researcher can either move from the text to the data, or vice-versa.

Faithful replication

In digitising the back-files, the project strives to produce a faithful replication of the published journal. Thus, as well as digitising all the papers within an issue, advertisements, journal administrative matter, tables of contents and covers are also digitised. Further, every photograph that is found within an article is subject to a separate, high-quality, image scan, which is also made available to the reader.

Highlights

Although the project is not yet complete, well over a million pages are already online and a number of classic articles, which have changed the face of medicine, are available including:

- *Kenneth Burton's classic and highly cited 'methods' paper that provided a standard way of assaying DNA concentration in a solution using diphenylamine. Biochemical Journal 1956*

www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pmcentrez&artid=1215910

- *Hodgkin and Huxley's Nobel-prize winning paper on ionic theory of the nerve impulse. This work was the foundation for thousands of subsequent studies of electrical signalling in the brain and has been useful for understanding the origins of many disorders – such as multiple sclerosis, muscle myotonias, and heart arrhythmias – that result from defects in electrical signalling. Journal of Physiology 1952* www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pmcentrez&artid=1392413
- *Frederic Wood-Jones' and Wen I-Chuan's article on the development of the external ear; a paper that is still referenced in human embryology textbooks. Journal of Anatomy 1934* www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pmcentrez&artid=1249008

Conclusions

Over the next couple of years, the archive will continue to grow and, in so doing, provide an even richer resource – freely available to all – that will help today's clinicians and researchers discover and access the 'minutes of science', as recorded in these historically significant journals.

Mobile Web Initiative

www.w3.org/Mobile/

W3C (the World Wide Web Consortium) has set up an initiative to 'to make browsing the Web from mobile devices a reality'. The Mobile Web is available any time, any place. However, there are still interoperability and usability problems. This initiative aims to address these problems.

EU petition on open access

www.ec-petition.eu/

An EU petition has been running since 17 January to support 'guaranteed public access to publicly-funded research results'.

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