

ADISNEWS (Adis Newsletters)

Subject Coverage				rmacoeconomics and outcomes rmacoepidemiology rmacology		
File Type	Bibliographic, Full T	ext				
Features	Alerts (SDI) Weekly (default), or monthly					
	CAS Registry Number [®] Identifiers	$\overline{\square}$	Page Images			
	Keep & Share	$\overline{\checkmark}$	SLART			
	Learning Database		Structures			
Record Content	 Bibliographic info Full text of the re References to the Indexing terms Chemical names CAS Registry Nu 	ports e documents	cited by the newslet	tter		
File Size	More than 302,781 (10/22)				
Coverage	1983 to the present					
Updates	Weekly					
Language	English					
Database Producer	O = = : : : : : = - - - - - - - - -					
	Contact Springer Online Services support desk: Email: onlineservice@springer.com Phone: +49 6221 345 4303 (Europe/Asia/Africa) +1 800 777 4643 (North & South America)					
Sources	 ReactionsTM - ale in the world's bio 	erts to adverse medical litera	iture (1983 - present	m all adverse drug events reported		
User Aids	Online Helps (HESTNGUIDE	:LP DIRECT(ORY lists all help me	essages available)		

ADISNEWS

Clusters

- ADISBASES
- ALLBIB
- BIOSCIENCE
- CASRNS
- FULLTEXT
- HEALTH
- MEDICINE
- PHARMACOLOGY
- PV
- TOXICOLOGY

STN Database Clusters information (PDF).

Search and Display Field Codes

Simultaneous left and right truncation (SLART) may be used for search terms in the (/BI, /CW, /TI, and /TX) fields and are marked with an asterisk.

Search Field Name	Search Code	Search Examples	Display Codes			
Basic Index* (contains single words from the title (TI), chemical name (RN), controlled term (CT), and text (TX) fields, as well as CAS Registry Numbers (RN))	None (or /BI)	S NRT S RELEAS? HORMONE S SERIOUS (L) CASE REPORT# S 57-88-5	RN, TI, TX			
Accession Number Chemical Name Cited Reference (contains referenced author or company name, publication year, volume, and first page)	/AN /CN /RE	S 2001:1236/AN S DC 015/CN S ABDULLA S, 1998, V351, P1411?/RE S ABBOTT LAB?/RE	AN RN RE			
Cited Reference Author Name (Cited Reference Company Name)	/RAU	S RILEY L?/RAU S 3M?/RAU S (GEORGE J? (L) LEACH J?)/RAU	RE			
Cited Reference Country of Publication	/RCY	S SINGAPORE/RCY	RE			
Cited Reference Document Type Cited Reference Language Cited Reference Page Number	/RDT /RLA /RPG	S CORRESPONDENCE/RDT S NEWS ITEM/RDT (L) ENGLISH/RLA S 9-10/RPG	RE RE RE			
(1) Cited Reference Publication Name	/RWK	S WALL STREET JOURNAL/RWK	RE			
Cited Reference Publication Year (2)	/RPY	S RPY>=2000	RE			
Cited Reference Series Volume Number	/RVL	S 998/RVL (L) 9/RPG	RE			
Cited Reference Title Controlled Term	/RTI /CT	S (MILD (L) ASTHMA)/RTI S ABACAVIR?/CT S BY-841, PHARMACODYNAMICS/CT	RE CT			
Controlled Word* (1)	/CW	S DIABETES/CW S SERIOUS REACTIONS/CW	СТ			
Document Number Document Type (code)	/DN /DT (or/TC)	S 11735503-800244211/DN S MIX/DT	DN DT			
Entry Date (2) Field Availability (code and text) File Segment (code and text)	/ED /FA /FS	S L1 and ED>=20010731 S L7 and RN/FA S INP/FS S INPHARMA/FS	ED Not displayed FS			
International Standard (Document) Number (contains ISSN)	/ISN	S 1173-5503/ISN	ISN, SO			
Journal Title Publication Date (2) Publication Year (2) Source (contains newsletter, publication date, and ISSN)	/JT /PD /PY /SO	S REACTIONS/JT S JULY 30, 2001/PD S 2000-2001/PY S (INPHARMA AND 2001)/SO S 1173-8324/SO	JT, SO PD, SO PD, PY, SO SO			
Text* Title*	/TX /TI	S TOLERATED DOS?/TX S HEPATITIS/TI S PRODUCT NEWS/TI	TX TI			
Update Date (2) Word Count (of text) (2)	/UP /WC	S L1 AND UP>=20010900 S ADR AND WC<=100	UP WC			

⁽¹⁾ Search with implied (S) proximity is available in this field.(2) Numeric search field that may be searched using numeric operators or ranges.

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DISPLAY and PRINT Formats

Any combination of formats may be used to display or print answers. Multiple codes must be separated by spaces or commas, e.g., D L1 1-5 TI TX. The fields are displayed or printed in the order requested.

Hit-term highlighting is available for all fields except PY. Highlighting must be ON during SEARCH in order to use the HIT, KWIC, and OCC formats.

Format	Content	Examples
AN (1) CT (1) DN (1) DT (TC) ED FS (2) ISN (2) JT (2) PD (2) PY (2) RE RN (CN) (1) SO TI (1) TX UP WC	Accession Number Controlled Term Document Number Document Type Entry Date (includes UP) File Segment International Standard (Document) Number (ISSN) Journal Title Publication Date Publication Year Cited Reference CAS Registry Number and Chemical Name Source Title Text Update Date (includes ED) Word Count	D AN D 1-5 CT D DN D DT D 1 8 ED D 1, 3-5 FS D ISN D JT 3 D PD D PY D RE 10 7 D RN D SO D TI TOTAL D TX D UP D WC 3,4
ALL BIB CBIB DALL IALL IBIB IIND (1) IND (1) QRD SCAN (1,3) TRIAL (TRI, SAM, FREE) (1) XML	AN, ED, UP, DN, TI, SO, DT, WC, TX, RE, CT, RN AN, ED, UP, DN, TI, SO, DT, WC AN, DN, compressed bibliographic information ALL. delimited for post processing All, indented with text labels BIB, indented with text labels (IBIB is the default) IND, indented with text labels CT, RN BIB and hit terms in ORG, PHARM and IDE (Default display) DN, TI (random display without answer numbers) AN, DN, TI ALL, in XML format	D ALL D BIB D CBIB D DALL D IALL D IBIB L2 7 D IIND D IND D QRD D SCAN D FREE 1-25
HIT KWIC OCC (1)	Fields containing hit terms Hit term with 20 words on either side (KeyWord-In-Context) Number of occurrences of hit terms and fields in which they occur	D HIT D KWIC NOH D OCC 1-6

⁽¹⁾ No online display fee for this format.

⁽²⁾ Custom display only.

⁽³⁾ SCAN must be specified on the command line, i.e., D SCAN or DISPLAY SCAN.

Full-Text Browsing

User Request	Example	System Response
DISPLAY BROWSE	=> DISPLAY BROWSE ENTER (L1) OR L#:. ENTER (DIS), ANSWER NUMBERS, OR END:	NOVICE version
D BRO	=> D BRO L1	EXPERT version
Answer number(s)	:1-3	display answers 1, 2, and 3 in default format
Answer number(s) and format	:4 HIT	display answer 4 in HIT format
Format only	:ТІ ТХ	display title and text of last answer displayed
Change default format	:*KWIC	change default to KWIC no answer displayed
Forward n fields	:F3	move forward 3 fields
Backward n fields	:B1	move backward 1 field
Search forward for character string	:S NICOTINE	search forward within record for 'nicotine'
Search backward for character string	:S -NAUSEA	search backward within record for 'nausea'
End DISPLAY BROWSE	:END =>	exit DISPLAY BROWSE and return to =>

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SELECT, ANALYZE, and SORT Fields

The SELECT command is used to create E-numbers containing terms taken from the specified field in an answer set.

The ANALYZE command is used to create an L-number containing terms taken from the specified field in an answer set.

The SORT command is used to rearrange the search results in either alphabetic or numeric order of the specified field(s).

Field Name	Field Code	ANALYZE/ SELECT (1)	SORT
Accession Number	AN	Υ	Ν
CAS Registry Number	RN	Y (2)	N
CAS Registry Number and Chemical Name	CHEM	Y (2)	N
Chemical Name	CN	Υ	N
	NAME	Y (2)	N
Cited Reference	RE	Y (3,4)	N
Cited Reference Publication Name	RWK	Υ	N
Controlled Term	CT	Υ	Υ
Document Number	DN	Υ	Υ
Document Type	DT	Υ	Υ
Entry Date	ED	Υ	Υ
File Segment	FS	Υ	Υ
International Standard (Document) Number	ISN	Y (5)	N
Journal Title	JT	Υ	Υ
Occurrence Count of Hit Terms	OCC	N	Υ
Publication Date	PD	Υ	Υ
Publication Year	PY	Y (3)	Υ
Source	SO	Ϋ́	N
Text	TX	Υ	N
Title	TI	Y (default)	Υ
Treatment Code	TC	Y	Υ
Update Date	UP	Υ	Υ
Word Count	WC	N	Υ

⁽¹⁾ HIT may be used to restrict terms extracted to terms that match the search expression used to create the answer set, e.g., SEL HIT CT.

⁽²⁾ Appends /BI to the terms created by SELECT.

⁽³⁾ SELECT HIT and ANALYZE HIT are not valid with this field.

⁽⁴⁾ Extracts first author, publication year, volume, and first page with a truncation symbol appended and with /RE appended to the terms created by SELECT.

⁽⁵⁾ Selects or analyzes the ISSN and appends /ISN to the terms created by SELECT.

Sample Records

DISPLAY IALL (INPHARMA Record)

ACCESSION NUMBER: 2008:8738 ADISNEWS <u>Full-text</u>

ENTRY DATE: Entered STN: 9 Dec 2008 Last Updated on STN: 9 Dec 2008

DOCUMENT NUMBER: 11738324-801133743

TITLE: Product news: Laughter really is the best medicine.

SOURCE: INPHARMA 9 Dec 2008 ISSN: 1173-8324

DOCUMENT TYPE: (MIX)
WORD COUNT: 186

TEXT:

Laughter has always been considered the best medicine, and now there is research to prove it.

Rx Laughter, an organisation interested in using humour for healing, worked with researchers from UCLA to determine the effect of humorous shows on the pain tolerance of children and adolescents undergoing stressful or painful procedures such as cancer treatments or blood draws.

Eighteen healthy children, aged 7 to 16 years, participated in the study in which they placed their hands into iced water for up to three minutes maximum. Participants watched funny classic and contemporary shows and researchers took a baseline measure of submersion duration before, during and after viewing of the videos. The participants appraisals of pain and noted submersion times were documented and examined in relation to humor indicators - the number of laughs/smiles and the children's ratings of how funny the show was. The group demonstrated significantly greater pain tolerance while viewing the funny shows, but their ratings of the severity of the pain were not influenced. These results suggest that humorous distraction could be used in clinical settings to help children better handle painful hospital procedures.

(1) Medical News Today. Watching funny shows helps children tolerate pain for longer periods. Internet Document 2007, P[2 pages] (English, Study (USA)) CONTROLLED TERM: Children

DISPLAY IALL (PHARMACOECONOMICS AND OUTCOMES NEWS Record)

ACCESSION NUMBER: 2010:5804 ADISNEWS Full-text

ENTRY DATE: Entered STN: 8 Oct 2010

Last Updated on STN: 8 Oct 2010

DOCUMENT NUMBER: 11735503-809116853

TITLE: Chronic pain management inefficient in Europe.

SOURCE: PHARMACOECONOMICS AND OUTCOMES NEWS 8 Oct 2010 ISSN:

1173-5503

DOCUMENT TYPE: (MIX)
WORD COUNT: 116

TEXT:

A report, commissioned for inclusion in the European Pain Proposal*, has shown that inefficiencies in the treatment of chronic pain leads to increased healthcare costs and patient suffering.

The report found that there is a high degree of variability in accessing pain management services, not only between but within countries. In addition, the type of care offered is inconsistent. It says that both cost savings and improved patient outcomes could be achieved if pain was managed efficiently and it calls on the European Union to provide a minimum standard of care for all patients with chronic pain.

- * developed by a group of European experts involved in chronic pain, policy and economics, in partnership with Pfizer REFERENCE(S):
- (1) Pain Proposal. New Report Reveals Inefficient Management of Chronic Pain Costs Billions of Euros Each Year. Media Release 2010, P29 Sep 2010.

 Available from (English, Media release (Belgium))

CONTROLLED TERM: Healthcare-expenditure; Healthcare-news; Pain, treatment

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DISPLAY IALL (REACTIONS Record)

ACCESSION NUMBER: 2010:5821 ADISNEWS <u>Full-text</u>

ENTRY DATE: Entered STN: 8 Oct 2010

Last Updated on STN: 8 Oct 2010

DOCUMENT NUMBER: 01149954-803042187

TITLE: ADR news: Natalizumab withdrawal. Immune reconstitution

inflammatory syndrome: case report. Serious.

SOURCE: REACTIONS 8 Oct 2010 ISSN: 0114-9954

DOCUMENT TYPE: (MIX) WORD COUNT: 273

TEXT:

A 30-year-old woman with relapsing-remitting multiple sclerosis (MS) developed experienced worsening of her condition due to immune reconstitution inflammatory syndrome (IRIS) after her therapy with natalizumab was withdrawn. The woman started receiving natalizumab at escalating doses with good response after 22 infusions over almost 2 years [dosage details incomplete]. Natalizumab was withdrawn in November 2008; at that time, she had an EDSS* score of 5. She developed high-grade tetraparesis within the next 9 weeks despite administration of methylprednisolone boli; additionally, new gadolinium-enhancing lesions became evident on MRI.

The woman underwent forced immunotherapy with plasma exchange (PE). However, her condition worsened further with development of marked cognitive impairment, neglect and consciousness disturbance; her EDSS score increased to 9.5. She received further steroid pulses, but her symptoms persisted unchanged. Three months after natalizumab withdrawal, new development of gadolinium-enhancing lesions on MRI continued. Proton magnetic resonance spectroscopy from subcortical white matter revealed a reduced N-acetylaspartate level, and increased creatinine, choline and lactate levels. Her CSF cell count was persistently elevated, intrathecal immunoglobulin synthesis was evident, and her CD4+/CD8+ ratio was decreased. A brain biopsy showed an active demyelinating lesion with immunopathological pattern and pronounced axonal damage. She received another steroid pulse followed by a 3-week taper. At the end of the taper, her disease had spontaneously stabilised. Her condition slowly improved, and she had an EDSS score of 7 in February 2010.

* Expanded Disability Status Scale

Author Comment: "PE was performed after estimated 4 to 6 half-times of natalizumab and thus by clearing

residual natalizumab might have accelerated lymphocyte trafficking into the brain thereby paving the way for an IRIS-like rebound of inflammatory MS activity."

REFERENCE(S):

(1) Lenhard, T.; Biller, A.; Mueller, W.; Metz, I.; Schonberger, J.; Wildemann, B. Immune reconstitution inflammatory syndrome after withdrawal of natalizumab? Neurology 2010, V75, P831-833 (English, Case report (Germany))

CONTROLLED TERM: Drug-withdrawal; Immune-reconstitution-syndrome,

drug-induced; Multiple-sclerosis, drug-induced;

Natalizumab, serious adverse-reactions

CAS REGISTRY NO.: 60-27-5 (CREATININE)

62-49-7 (CHOLINE)

83-43-2 (METHYLPREDNISOLONE)

7440-54-2 (GADOLINIUM) 20846-91-7 (EDSS)

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