

ISMPP would like to thank...



the following Platinum Sponsors for their ongoing support of the society



Today's Program



- **Presenter**
 - Bill Deluise, Senior Editor, Wiley-Blackwell

- **Moderator**
 - Susan Wingeron, Vice President, Nexus Communications

- **Q&A follows the presentation—but feel free to send in questions as you have them**

Electronic Publishing

Overview and Major Trends

Changing User Behavior and its Implication for
Publication Professionals

Bill Deluise
Senior Editor

Wiley-Blackwell, a division of John Wiley & Sons, Inc.

Overview



- ◆ **Key Terms and Definitions**
- ◆ **The Essentials: Publication Timeframes, the Article of Record, and Content Rendering**
- ◆ **Emerging Trends: Reader Behavior**
- ◆ **Emerging Trends: Delivery Models**
- ◆ **Assessing the Impact of Changing Behavior and Delivery**
- ◆ **Concluding Remarks**

Key Terms and Definitions



The screenshot shows a Google search interface with the search term "define:publish". The search results include a list of related phrases and a definition of "publish" on the web.

Related phrases: [publish/subscribe](#) [ez publish](#) [publish or perish](#) [publish & subscribe](#) [publish subscribe](#) [publish to web](#) [hyper publish](#) [publish on demand](#) [subscribe](#)

Definitions of **publish** on the web

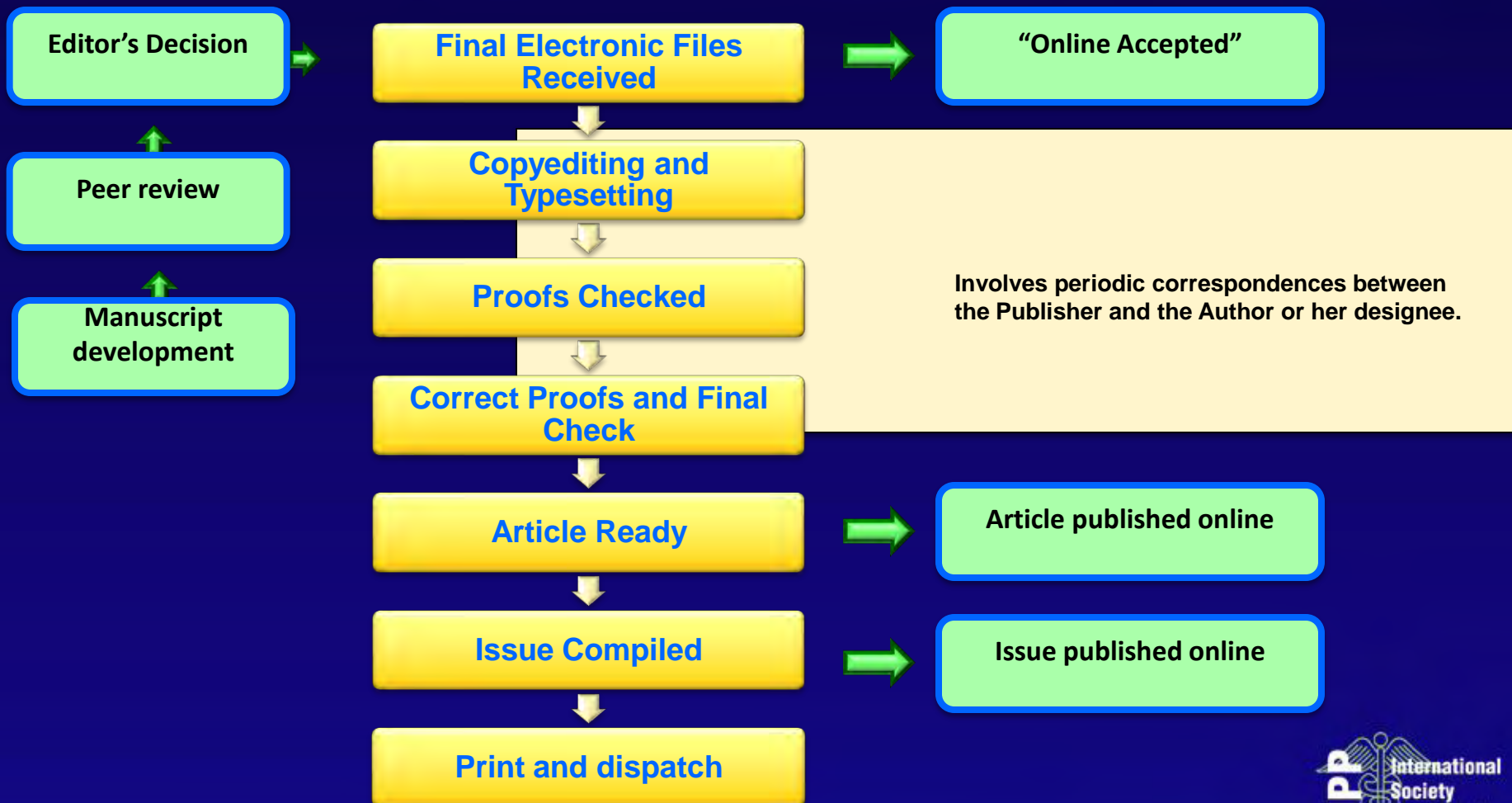
- print: put into print; "The newspaper published the news of the royal couple's divorce": "These news should not be printed."
wordetweb.princeton.edu/perl/webwn
- to prepare written materials to be shared with an audience, such as in a bound book or oral performance. This is the final stage in the writing process after the author revises or edits
www.middleboro.K12.ma.us/ReportCard/Web/ReportCard/Glossary

Key Terms and Definitions



- ◆ **e-publication:** preparation of materials to be shared with an audience in an electronic environment
- ◆ **e-ahead of print:** publication of a copyedited, typeset, and proofread manuscript online in advance of its print publication
- ◆ **e-only:** publication of a copyedited, typeset, and proofread manuscript online only
- ◆ **“online accepted”:** publication of a manuscript online in advance of copyediting, typesetting, and proofreading

What Constitutes “Real” Publication



Why Online Publication is Better...

...or, at least, largely similar.

	Article Published Online (article of record)	Issue published online	Print and dispatch
• Publicly available	✓	✓	✓
• Citable	✓ (DOI)	✓ (Vol, Iss, Pp)	✓ (Vol, Iss, Pp)
• PR	✓	✓	✓
• Reprints	✓ (preprints)	✓	✓
• Medline	✓	✓	✓
• eTOC to users	x	✓	✓
• RSS feed update	✓	x	x
• Issue on readers' desks	x	x	✓

Rendering Content Electronically

- Primary online publication formats: .html and .pdf
- PDF: simulates look and feel of print publication; comfortable to users; easy to print
- HTML: optimized for interaction on screen; improved ability to contextualize content/link out to related content

The screenshot displays the Wiley InterScience website interface. At the top, the user is logged in as 'William Dekker'. The main navigation bar includes 'HOME', 'ABOUT US', 'CONTACT US', and 'HELP'. A search bar is located on the right side. The central content area features the Wiley InterScience logo and the journal title 'JCH Journal of Clinical Hypertension'. Below this, there is a section for 'The Journal of Clinical Hypertension' with details about the current issue (Volume 12, Issue 3, Pages 160-165, Published Online: 10 Dec 2009). A list of navigation options is provided, including 'Top of Page', 'Abstract', 'Methods', 'Results', 'Discussion', 'Conclusions', and 'References'. The main article title is 'Prevalence of Clinical and Ambulatory Hypertension in a Population of 65-Year-Olds: The PROOF Study'. The authors listed are Philippe Gosse, Virginie Daughnot, Frederic Roche, Vincent Pichot, Sebastian Cella, Jean-Claude Barthélémy, and Jean-Claude Badier. The article is categorized as an 'Original Paper'. Below the article information, there is a section for 'ABSTRACT' and a list of 'ARTICLES IN PRESS' with their respective volume and issue information. On the right side, there is a 'View Full Text' link. At the bottom of the screenshot, a PDF viewer is open, displaying a page from 'THE LANCET' with the title 'UK doctors begin reporting gun and knife crime'. The PDF viewer shows the text of the article, including a sub-heading 'UK doctors begin reporting gun and knife crime' and the beginning of the main text.

Rendering Content Electronically

- ◆ Online accessibility is oftentimes restricted to paying subscribers, pay-per-view purchasers, and individuals based at institutions with licensed access to the content.
- ◆ Digital Rights Management (DRM) goes beyond document security, ensuring control by the copyright holder over how content is delivered, priced, sold, and used.
- ◆ Technical protection measures (TPM), the legal term for DRM are most used in e-books (e.g., by Amazon, by Adobe, and by Apple). These are covered in the Digital Management Copyright Act (DMCA), which criminalizes hacking DRM.

Emerging Trends: Reader Behavior

- ◆ Reach, consumer behavior, and routes to content
- ◆ Evolving brand loyalty and information consumption habits
- ◆ How users are engaging with the content
- ◆ How users are aware of and sharing information about content

Circulation, Readership, and Usage

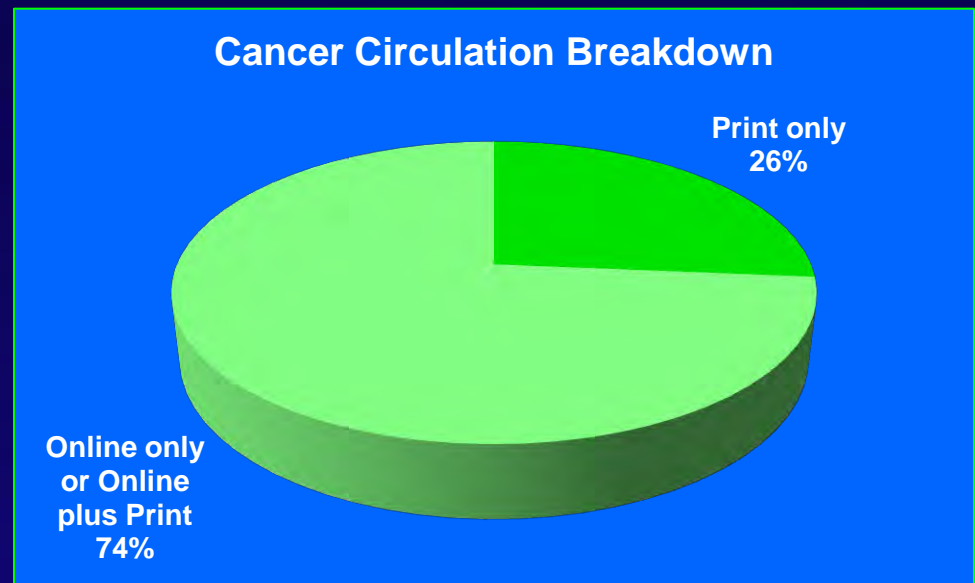
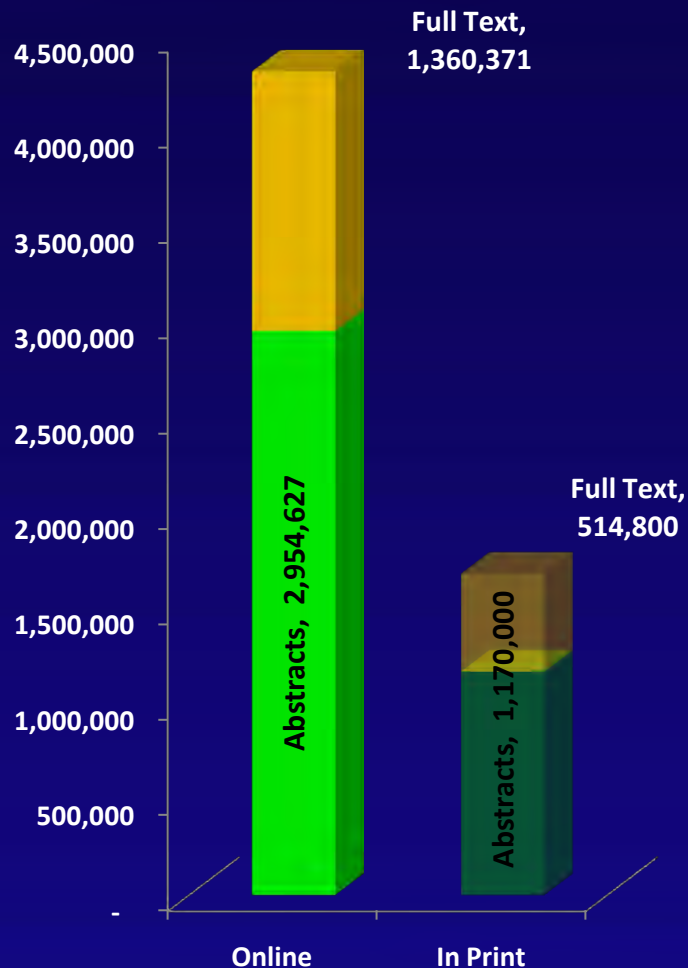
Online usage profiles dramatically affects the reach of an article, sometimes increasing readership exponentially above the print circulation.

Cancer

- Official journal of the American Cancer Society
- Impact Factor of 5.238 (ISI 2008 Impact Factor)
- Currently in its 116th volume
- Print circulation of 6,250

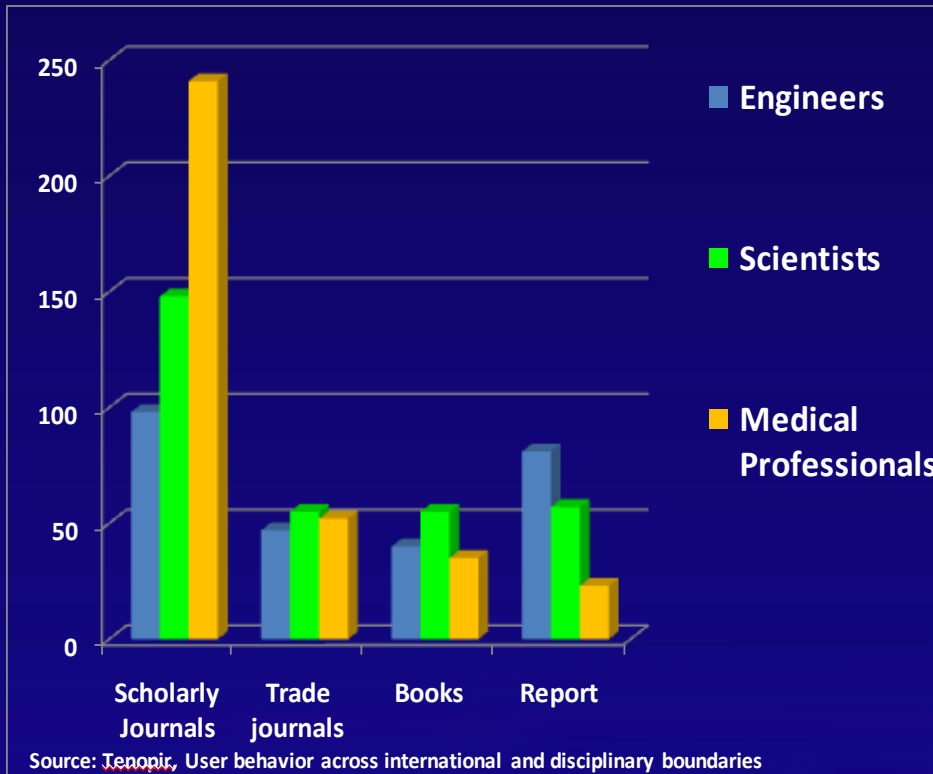


Circulation, Readership, and Usage



Searching and Routes to Content

- ◆ Moving from a mindset of “browsing” to “searching”
- ◆ “Economizing” content for declining time per article

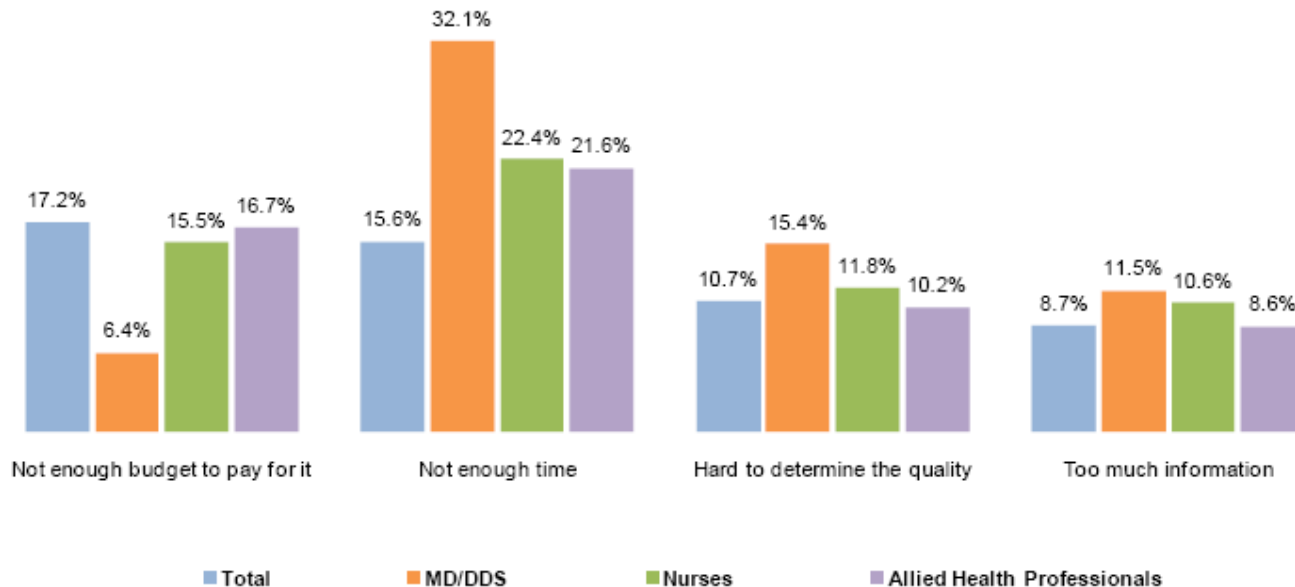


Work field	Articles read (per year)	Time spent (hours)	Time per article (min)
MDs	~322	118	22
Chemists	~276	198	43
Life scientists	~239	104	26
Physicists	~204	153	45
Social scientists	~191	121	38
Engineers	~72	97	81

Source: Publisher's Own Data

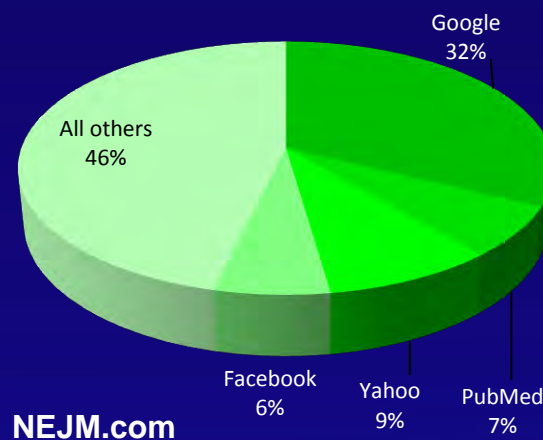
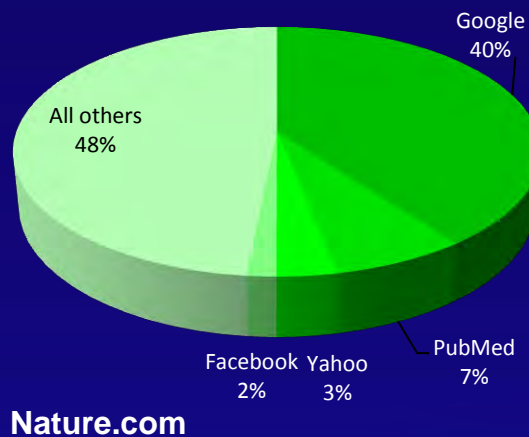
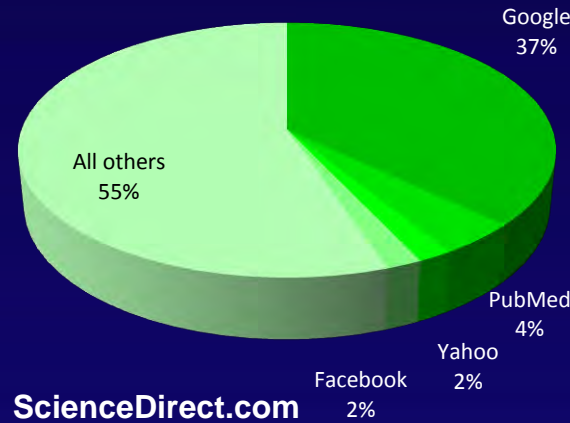
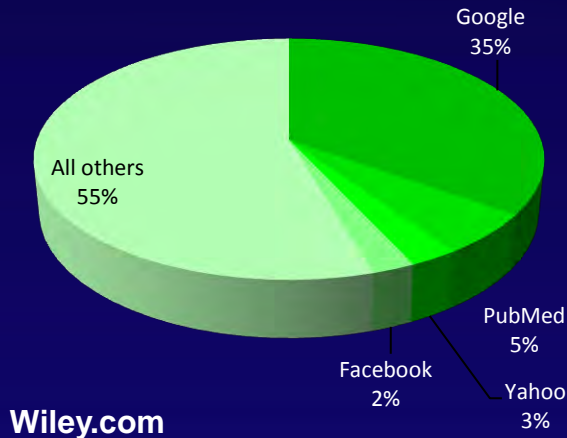
Searching and Routes to Content

- ◆ Physicians especially indicate “not enough time” and “too much information” as barriers to information seeking
- ◆ Nurses and allied health professionals more frequently cite budget constraints



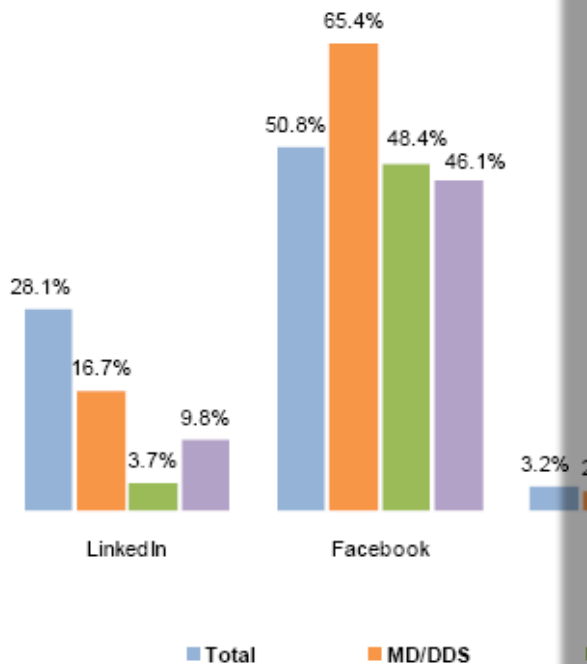
Source: Outsell's Information Markets & Users Database, December 2008 Survey
© 2009 Outsell, Inc. Reproduction strictly prohibited.

Searching and Routes to Content

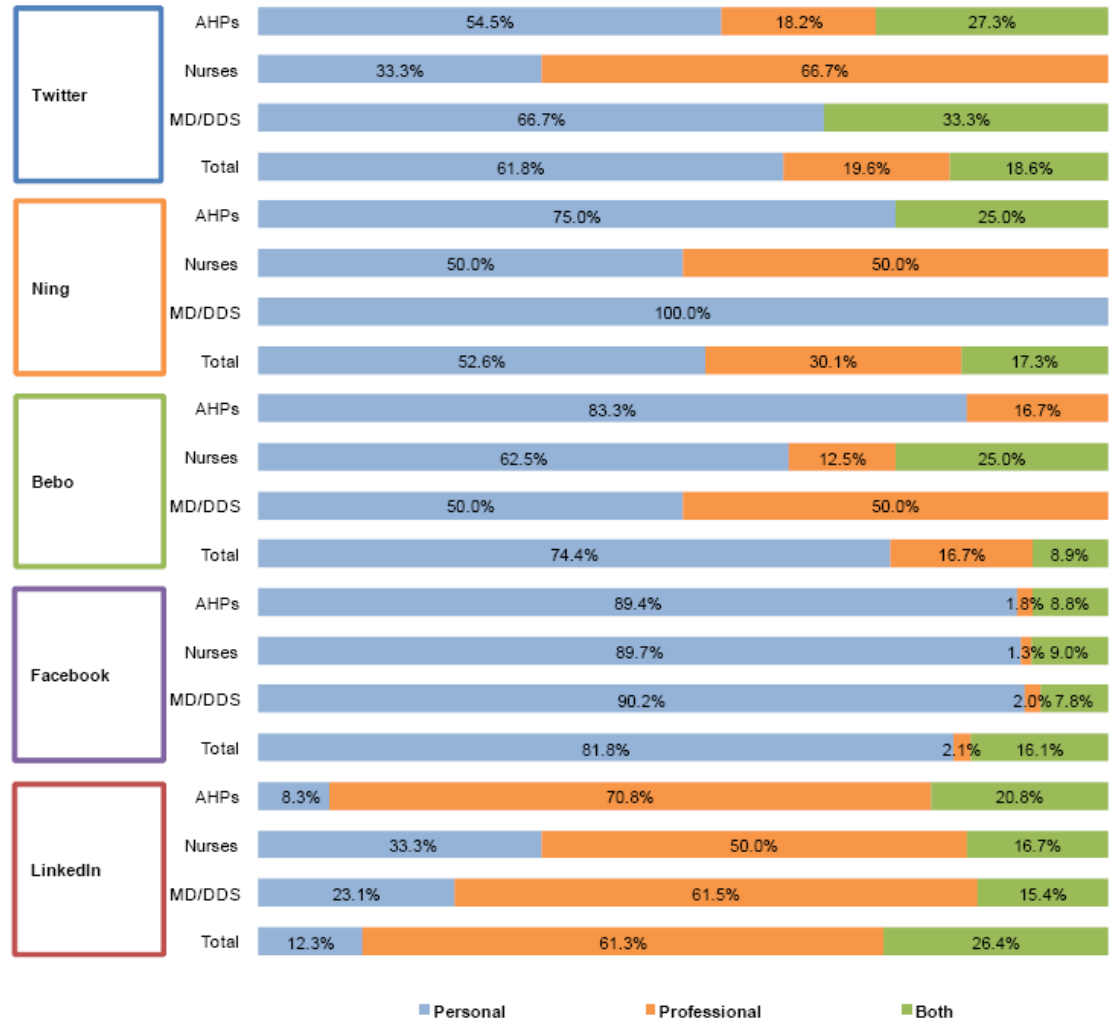


- **PubMed typically accounts for 4-7% of traffic to online content**
- **Google can drive between 30-40% of traffic**
- **Facebook is an emerging traffic driver**

Engaging With and Sharing Content



Source: Outsell's Information Markets & Users Database, December 2008 Survey
 © 2009 Outsell, Inc. Reproduction strictly prohibited.



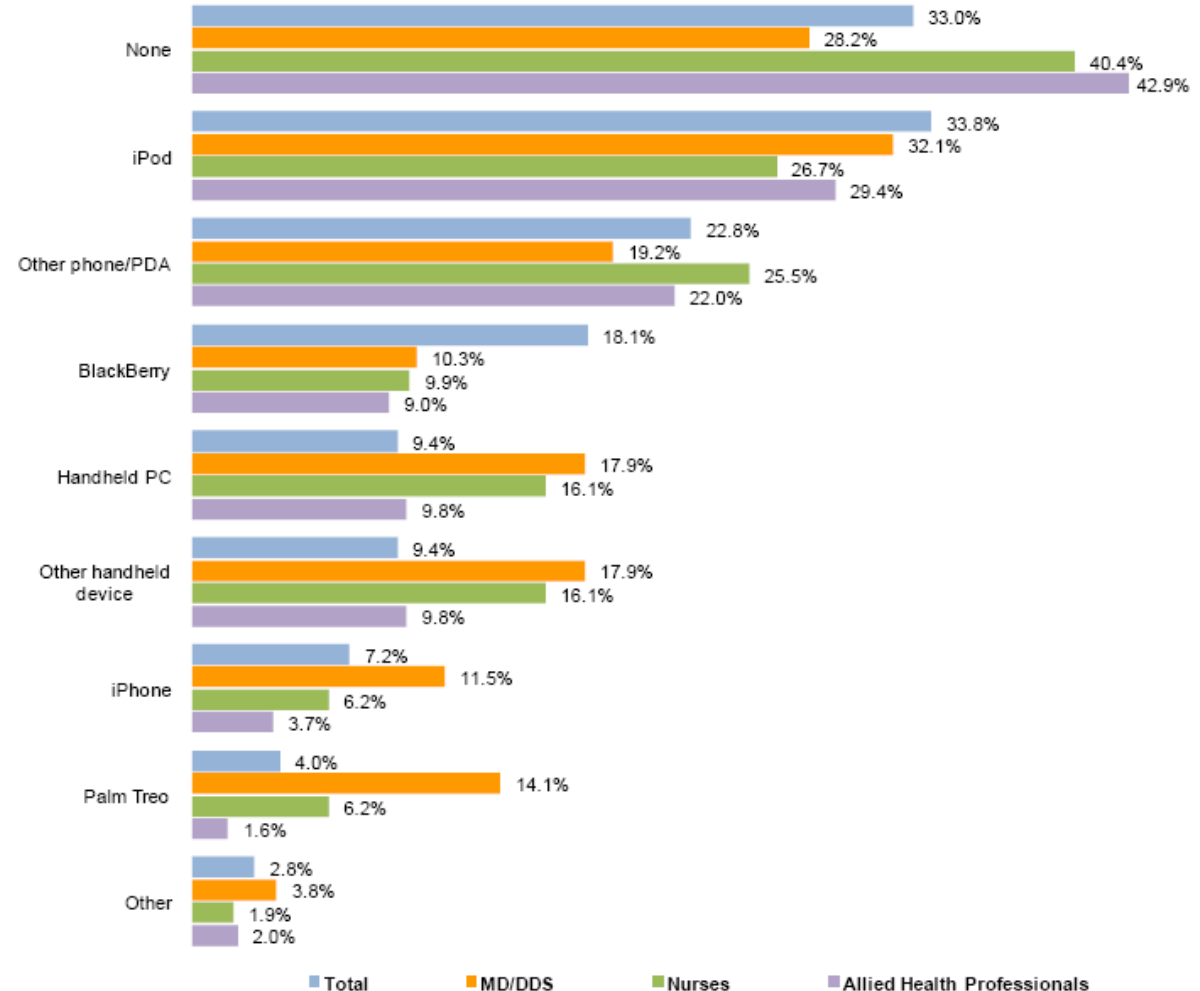
Source: Outsell's Information Markets & Users Database, December 2008 Survey
 © 2009 Outsell, Inc. Reproduction strictly prohibited.

Emerging Trends: Delivery Models

- ◆ Mobile content delivery
- ◆ Content via eReaders
- ◆ Electronic Medical Records

Mobile Delivery and eReaders

- Emerging content delivery options
- iPhone/iPod currently leading the physician audience
- “Early adopters” include NEJM



Source: Outsell's Information Markets & Users Database, December 2008 Survey
© 2009 Outsell, Inc. Reproduction strictly prohibited.

Mobile Delivery and eReaders



◆ Feedback has been generally positive but areas for improvement are identified:

“Overall, the articles are easy to read, and suffer very little from being converted to Kindle format, with one notable exception: the graphics and tables come across horribly on the Kindle screen.”

- *Excerpted from an Amazon.com review*

“The Kindle edition of The New England Journal of Medicine contains articles found in the print edition, including all tables, charts, and clinical images...There may be a lack of clarity for some tables and illustrations due to their size and layout. Some features...are not currently available.”

- *Excerpted from a blog review (<http://dotdotereader.blogspot.com>)*

Mobile Delivery and eReaders



Kindle	Nook	Sony eReader	iPhone	Droid
				
<ul style="list-style-type: none">• Fastest to gain market share• Variations (Kindle 2 and Kindle DX) have followed• International capabilities• Proprietary content format	<ul style="list-style-type: none">• Considered a more stylish design• First 3G and wireless enabled• First full-color, touch-screen navigation• ePub format	<ul style="list-style-type: none">• Different editions: Touch, Daily, and Pocket• Daily Edition optimized for periodicals.• Supports PDF, Microsoft Word, and audio.	<ul style="list-style-type: none">• Widely thought to have revolutionized mobile computing• Touchscreen, multitouch optimized• App-based, with 100,000+ apps	<ul style="list-style-type: none">• Google's answer to the iPhone, using the Android platform• Touchscreen and keyboard• App-based, enhanced multitasking capabilities

Mobile Delivery and eReaders

iPad

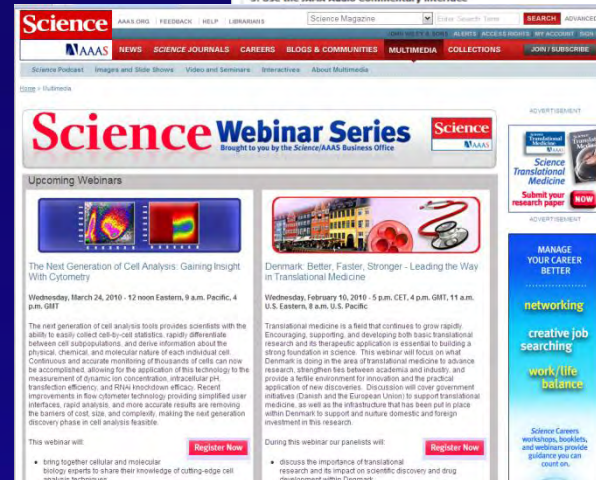


- “A magical and revolutionary product at an unbelievable price.” - *Apple*
- “An iPad which can be used for data lookup, data entry, point-of-need multimedia education and reference, and access to electronic health records – what’s not to like?” - *Steve Woodruff, KevinMD.com (medical blog)*
- “...more physicians than ever -- more than 50%, according to a recent survey by Software Advice -- say they are now considering buying a tablet. A separate survey by Epocrates, whose medical software has been a popular smartphone download, found that one in five physicians are planning specifically to purchase an iPad.” – *American Medical News*

Delivering Newer Content Formats

Consider content delivery formats that fit the medium and the needs of the end user. Some examples:

- Webcasts
- Podcasts
- Content summaries
- Mobile-optimized abstracts



EMRs Incorporating Content



- ◆ **Evidence-based Medicine (EBM) is based on evidence, not opinion.**
- ◆ **The goal is to easily convert knowledge into practice**
- ◆ **To do so, EBM needs to be part of clinical workflow**
- ◆ **Five Steps of EBM:**
 - Convert information needs into answerable questions
 - Track down the best evidence with which to answer them (from RCTs and other reports)
 - Critically appraise that evidence for validity and usefulness
 - Apply the results of this appraisal in practice
 - Evaluate performance

John Doe

NHS Number 12345-9877, Hos
Address: 2212 19th St SW, Unit
Telephone: 56478986
Born: 21.04.1952
Age: 53 y. 2 m

**Patient on Glitazone
treatment and cardiac
insufficiency diagnosed**

DNA [1]

NOTE!
02.02.04 Wheelchair patient

Care Unit: Diabetes Centre
Doctor:
Status: Active

Primary diagnosis
29.04.05 COPD
27.02.95 E11 Diabetes-2, duration 10 years, diet y.1993

Secondary diagnosis
17.02.05 I50 Cardiac insufficiency
02.06.03 H36.00 Nonproliferative retinopathy (right)
01.06.02 N08.31 Macroalbuminury
01.06.02 G63.3 Polyneuropathy

Treatments
01.06.02 Protein
limitation

Care recommendation
(1) Your patient has a note or suspicion of heart failure (date),
glitazone treatment is contraindicated as possible fluid retention
may pose a risk to the patient.
(2) Your patient has a note of current insulin treatment. Glitazone
treatment is contraindicated.
(4) Patient is using drug, which may cause hypoglycaemia. Their
effect may be stronger in combination with glitazone treatment. In
case of symptoms of hypoglycaemia, their dosage should be
reduced accordingly.

MEDICATION

Insulin				Morning	Snack	Lunch	Snack	Dinner	Snack	Evening	Extra
02.02.04/prowellness	INS	LANTUS								10	
	INS	Total 0.12 unit/kg/day		Short term 0 ky		Interm 10 ky				Rapid 0 ky	

Oral Hypoglycaemic and Other medicines			Morning	Lunch	Dinner	Evening	Dosage info
17.02.05/prowellness		AVANDIA 4MG	1			1	
21.06.04/prowellness		MELIZID 5MG	1				

Drug allergy
27.06.04 Penicillin

SUMMARY DATA

blood pressure diastolic (17.02.05) 120/105 mmHg
blood pressure systolic (17.02.05) 120/105 mmHg
Body Mass Index (17.02.05) 34.4

Risk of coronary heart disease:
Risk of Cardiovascular Disease Mortality:
Smoking status: **Yes**
Last eye screening: 08.12.2003 Diabetes Education Centre
Last eye grading: 02.08.2003 Diabetes Education Centre

Doe John
NHS Number 12345-9877, Hospital Number

Visit Information

Primary diagnosis: Copd, Diabetes

John Doe

NHS Number 12345-9877, Hospital Number
Address: 2212 19th St SW, Unit 203, 1718 Calgary, AB
Telephone: 56478966
Born: 21.04.1952
Age: 53 y. 2 m

DNA [1]

NOTE!
02.02.04 Wheelchair patient

Care Unit: Diabetes Centre
Doctor:
Status: Active

Primary diagnosis

29.04.05 COPD
27.02.95 E11 Diabetes-2, duration 10 years, diet y.1993

Secondary diagnosis

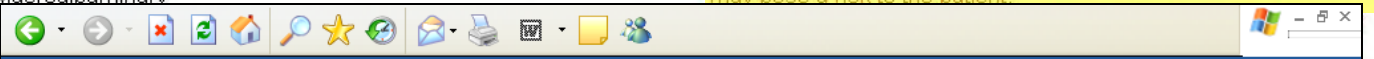
17.02.05 I50 Cardiac insufficiency
02.06.03 H36.00 Nonproliferative retinopathy (right)
01.06.02 N08.31 Macroalbuminury
01.06.02 G63.3 P

Treatments

01.06.02 Protein limitation

Care recommendation

(1) Your patient has a note or suspicion of heart failure (date), glitazone treatment is contraindicated as possible fluid retention may pose a risk to the patient.



Administrative decompensation

Evidence Summary
30.3.2004

Level of evidence

Loop diuretic decompensation and a better bolus administration

A Cochrane review with a total of 10 studies, the output, the greater in patients with a difference (WMD) of 1.47 (95% CI 0.87 to 2.07). Electrolyte disturbances were significantly different (RR) of 1.47 (95% CI 0.87 to 2.07) (tinnitus and tinnitus given, RR 0.06). The duration of treatment with continuous infusion while cardiac treatment given, two studies, a two treatment existing data on practice.

[Review] Continuous infusion versus bolus injection of loop diuretics in congestive heart failure

PDF (Size 206K)

- Abstract
- Plain language summary
- Background
- Objectives
- Criteria for considering

[Review] Continuous infusion versus bolus injection of loop diuretics in congestive heart failure

DRK.Salvador, NR.Rey, GC.Ramos, FER.Punzalan

Cochrane Database of Systematic Reviews 2007 Issue 1 (Status: Commented)
Copyright © 2007 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.
DOI: 10.1002/14651858.CD003178.pub3 This version first published online: 20 July 2005 in Issue 3, 2005
Date of Most Recent Substantive Amendment: 23 May 2005

This record should be cited as: Salvador DRK, Rey NR, Ramos GC, Punzalan FER. Continuous infusion versus bolus injection of loop diuretics in congestive heart failure. *Cochrane Database of Systematic Reviews* 2005, Issue 3. Art. No.: CD003178. DOI: 10.1002/14651858.CD003178.

MEDICATION

Insulin
02.02.04/prowelling

Oral Hypoglycaemic
17.02.05/prowelling
21.06.04/prowelling

Drug allergy
27.06.04 Penicillin

SUMMARY DATA

blood pressure di
blood pressure sy
Body Mass Index

Risk of coronary h
Risk of Cardiovas
Smoking status:
Last eye screenin
Last eye examin

Potential Impact of Changes



- ◆ With changing “circulation,” understand metrics to assess potential article reach
- ◆ Revisit how users are finding content (Google vs. PubMed) and how that might impact publication plans
- ◆ Inquire about publishers’ standard practices surrounding driving users to content (through marketing and PR initiatives)

Potential Impact of Changes

Maximizing time to Publication and “Citability”

- Time to publication is consistently decreasing; time to print is less certain. Make the most out of your online-only content.
- Citing an article by DOI: Available well before the traditional citation

Author, Title, Journal, Advance Online Publication, Day
Month Year, DOI: [doi]

vs.

Author, Title, Journal, Publication Date, Vol, Issue,
Page Range

DIABETES/METABOLISM RESEARCH AND REVIEWS
Diabetes Metab Res Rev 2009; 25: 50–51.
Published online 2009 in Wiley InterScience (www.interscience.wiley.com) DOI: 10.1002/dmrr.934

COMMENTARY

Insulin analogues: fears, facts and fantasies

DOI = 10.1002/dmrr.934

Renzo Cordeiro
Barbara Salani and
Lucia Briatore

*Department of Endocrinology and
Medicine (DiSEM), University of
Genova, Italy*

*Correspondence to: Renzo Cordera,
Department of Endocrinology and
Medicine (DiSEM), University of
Genova, Viale Benedetto XV, 6

IGF-1 and insulin, acting through both IGF-1 and insulin receptors, have been studied widely to evaluate their oncogenic and teratogenic properties. These two properties need to be studied for each new insulin analogue, in addition to measurements of their metabolic and pharmacodynamic features. This editorial critiques a study in this issue of the journal of several insulin analogues in their action in vitro on several cancer-related cell lines. The conclusions and limitations of these studies are highlighted, especially as they influence guidelines for using these analogues patients. Copyright © 2009 John Wiley & Sons, Ltd.

Potential Impact of Changes



Benefitting from the Search Mentality

- ◆ **Optimize your content for highest possible results in search engines.**
- ◆ **Some tips for optimizing abstracts:**
 - People tend to search for specifics, not just one word.
 - Ensure that the title contains the most important words that relate to the topic.
 - Repeat key phrases frequently, but ensure that you don't disrupt flow.
 - Focus on a maximum of three or four different keyword phrases in an abstract.
 - Remember: The primary audience is still the researcher not a search engine, so write for readers not robots.

- ◆ **More information available at:**
<http://authorservices.wiley.com/bauthor/seo.asp>

Parting Thoughts



- ◆ **Consider the medium:** Printed words on a page are limited. What can you do to make your content more interactive? Should more interactive content delivery formats be incorporated into you plans?
- ◆ **Consider the reader:** The average physician is decreasing the amount of time spent on any given article. Is there something more you can do with your content to make it more accessible to the reader?
- ◆ **Consider the future:** Mobile computing and eReaders are on the rise. How will this affect your publication plans and the reader's interaction with your content? What can you do to make content more economical?

For more information...



**Bill Deluise
Senior Editor
Wiley-Blackwell
John Wiley & Sons, Inc.
wdeluise@wiley.com**

Questions & Answers

To ask a question, please type your query into the 'Q&A' chat box at the bottom left of your screen. Every attempt will be made to answer all questions.

Next ISMPP U



DATE: May 12th

TIME: 11am EST

TOPIC: Clinical Trial Registration: EU and US Regulations

Thank you for attending!

We hope you enjoyed today's presentation.

Please take a moment to fill out the survey sent to you after today's program so you can provide valuable feedback, as it will help us to develop future educational offerings.