

and lists of resources, whether they be for respite care, information, or education on managing ethical issues. These tools should be evidence-based, recommended by consensus, validated, and widely available, and their use should be standardized across the country. Second, I think family physicians and specialists need to continue to discuss ways to optimize shared care of patients suffering from dementia. Third, the health care system needs to facilitate family physicians' access to other professionals to optimize collaborative team care. ❁

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# PubMed Central—at last

Tony Reid, MD, MSC, CCFP, FCFP    Lynn G. Dunikowski, MLS

**W**e are delighted to announce that *Canadian Family Physician* has been accepted into the PubMed Central (PMC) database.

Eighteen months ago, the staff at *Canadian Family Physician* debated whether or not to try for membership in PMC in order to increase exposure for our substantive research and education articles. Given the added rigour and prestige associated with PMC, as opposed to a straight link to our own website, we decided to apply for PMC membership.

This was part of our Print short, Web long strategy, which was meant to increase the number of research articles we could publish while we managed the smaller size of the print journal. In this format, our research articles have been available on our website in full text since January 2005.

To be included in PMC, journals must qualify on two levels: on the scientific and editorial quality of the content, and on the technical quality of the digital files. *Canadian Family Physician* has been indexed in PubMed-MEDLINE since 1993, and has fully met the criteria for scientific and editorial quality. We have worked very hard in the last year and a half to meet PMC's technical requirements as well. Happily, we can now report that we have met their standards and will be accepted by PMC starting in February 2006. We intend to archive previous work on PMC, beginning with all the articles for 2005.

# PubMed-MEDLINE and PubMed Central

What is the difference between these databases and what does it mean for *Canadian Family*

*Physician?* PubMed-MEDLINE is the premier North American biomedical index—what the print Index Medicus grew into. PubMed-MEDLINE is the place to start searching for information in the biomedical journal literature. It is a bibliographic database made up of the citations and abstracts of millions of articles from almost 5000 journals. PubMed-MEDLINE is produced by the United States National Library of Medicine.

Searchers in PubMed-MEDLINE will see links to full-text articles in PMC. PubMed Central is a product of the National Center for Biotechnology Information in the National Library of Medicine. PubMed Central is a library, but it is a digital library of journal articles rather than a building with books on shelves. PubMed Central is intended to preserve and provide unrestricted access to the biomedical journal literature over the long term. In a time when technology is rapidly changing, when publishers and publishing and storage formats come and go, PMC is intended to preserve biomedical journal literature just as traditional libraries do by keeping books on shelves. PubMed Central also fulfils the traditional library role of providing public access to information in a free and unrestricted way—in this case, to anyone who has access to the Internet.

### Added value

The value of PMC, in addition to its role as an archive, lies in what can be done when data from diverse sources are stored in a common format

in a single repository. Searchers get more rapid searching, cross-linking of the complete collection, and all the benefits that derive from that. PubMed Central can rapidly search the entire body of literature in the database—all of the words in all of the full text of articles. Storing all articles in a uniform and well-defined structure allows, for example, searches focused on the Methods section of articles across the whole database. In addition, searchers can follow links to a variety of information resources—the full text of other journal articles in PMC, as well as books, factual databases, and other resources outside PMC. Storage in a single repository in a uniform way also enables development of tools to further integrate the literature with the many information resources available to scientists, clinicians, and others.

Because of the high standards of editorial quality and peer review, PMC also acts as a quality filter. Searchers can be confident that all of the research articles in PMC have been peer reviewed.

So, this is a time to celebrate. *Canadian Family Physician* is the only family medicine journal listed in PMC other than *BioMed Central Family Practice*. We hope you find our increased exposure useful and a reflection of our commitment to excellence. ❁

**Dr Reid** practises family medicine in Orillia, Ont, and is Scientific Editor of *Canadian Family Physician*.

**Ms Dunikowski** is Director of Library Services for the College of Family Physicians of Canada in London, Ont.

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