

Letter to the Editor

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CliniWeb: Managing Clinical Information on the World-Wide Web

To the Editor:—In their recent article, Hersh et al.¹ described CliniWeb, which intends to list and index medical resources on the Internet with Medical Subject Headings (MeSH) terms. They quote other sites that attempt to organize clinical information on the Web, such as Medical Matrix and Medweb, which do not use MeSH terms.

We want to bring attention to two other Web servers that also index biomedical resources, including clinical information on the Net, using the MeSH thesaurus:

1. Diseases, Disorders and Related Topics (DDRT) (<http://www.mic.ki.se/Diseases/index.html>), from the Library and Medical Information Centre at the Karolinska Institute (Stockholm, Sweden). This list was a Gopher in 1993 and a Web server since May 1995.
2. OMNI (<http://omni.ac.uk/general-info/launch.html>), the Organizing Medical Networked Information (UK). In existence since November 29, 1995, this is the work of a UK consortium of seven members.

When introducing the same requests into the three Web servers,² we can observe some differences. For example, in the Web server of the Agency for Health Policy and Research Guidelines (National Library of Medicine), we found two clinical practice guidelines about pain: "Management of Cancer Pain" and "Acute Pain Management." Curiously, these two do not appear in CliniWeb. They are both listed in Omni and DDRT.

We conclude that, in order to obtain the maximum amount of biomedical information, it would seem necessary to look at all three Web servers.

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References ■

1. Hersh WR, Brown KE, Donohoe LC, Campbell EM, Horacek AE. CliniWeb: Managing Clinical Information on the World Wide Web. *J Am Med Inform Assoc.* 1996;3:273–80.
2. Darmoni SJ, Thirion B. Indexing the Web? A comparative study of three medical Web servers on the Internet: Cliniweb, "Diseases, Disorders and Related Topics," Omni, Mednet 96, European Congress of the Internet in Medicine (in press).

■ **In reply:** The letter by Thirion and Darmoni demonstrates a point made in our paper, which is that the distributed nature of the World Wide Web and its lack of a centralized "table of contents" makes keeping up with all the new content as well as search engines difficult.

I am not sure, however, what to make of the difference between CliniWeb and the other search engines based on the absence of two AHCPH Practice Guidelines. We actually had trouble fitting these guidelines into our initial classification scheme that used only the MeSH disease tree. We eventually worked out an indexing strategy for them, and they have been included in more recent versions of CliniWeb.

I agree with Thirion and Darmoni that, at the present time, one must look to multiple Web servers for the maximum amount of biomedical information. However, CliniWeb is necessarily smaller than most other biomedical search engines. This is because we have chosen to omit information that is not clinically oriented to the level of a health science student or above. As a result, it does not contain patient-oriented matter, advertisements for clinics or universities, or other non-clinical information that some clinician–surfers find distracting.