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STN Database Summary Sheet

Adis Clinical Trials Insight is a bibliographic and full-text database that contains key papers from more than 1,700 international medical and biomedical journals on drugs, drug therapy, adverse drug reactions, and pharmacoeconomics. It is divided into five document types: best evidence, citation only, ongoing trial, supporting evidence, and study.

Records contain bibliographic and indexing information. Summaries also contain side effects tables, clinical relevance, evaluation scores with positive and negative features, and text, which includes the purpose of the paper, author comments, drug tables listing dosage information, and results tables.

Subject Coverage

- Alzheimer's and Cognition Disorders
- Affective Disorders
- Antibacterials
- Antifungals
- Antithrombotics
- Antivirals
- Anxiety Disorders
- Arrhythmias
- Cancer Chemotherapy
- Diabetes
- Epilepsy and Seizure Disorders
- Heart Failure
- Hyperlipidaemia
- Hypertension
- Inflammatory Bowel Diseases
- Ischaemic Heart Disease
- Men's Health
- Nausea and Migraine
- Obesity
- Obstructive Airways Disease
- Pain Control
- Parkinson's Disease
- Peptic Ulcer Disease
- Pharmacoeconomics
- Psychotic Disorders
- Rheumatic Disease
- Transplant Rejection
- Vaccines
- Women's Health

Sources

Adis Clinical Trials Insight

File Data

- 1983 to the present
- More than 402,200 records (9/06)
- Updated weekly
- Automatic current-awareness searches (SDIs) are run weekly

User Aids

- Online helps (HELP DIRECTORY lists all available help messages)
- STNGUIDE

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ADISCTI**Search and Display Field Codes**

The fields that allow left truncation and SLART (/BI, /TI) are indicated by an asterisk (*).

Search Field Name	Search Code	Search Examples	Display Codes
Basic Index * (contains single words from the title (TI), controlled term (CT), text (TX), side effects (SIDE), and evaluation (EVAL) fields)	None (or /BI)	S PHARMACOKINETICS S QUALITY OF LIFE S RESIST? (L) NEGATIVE S VACCINE# (S) USE S PATIENT-CONTROLLED S ?DIABET/(L)?THERAP?	CT, EVAL, SIDE, TI, TX
Accession Number ADIS Last Update Date (3) ADIS Record Creation Date (3) ATC Code (EPHMRA and WHO) Author	/AN /DUP /DED /CC /AU	S 2006:1005/AN S 20051004/DUP S 20051004/DED S R01AD03/CC S JENSEN P?/AU S JENSEN, P?/AU	AN DUP DED CC AU
Clinical Relevance (1) Controlled Term	/CL /CT	S A/CL S THERAPEUTIC EQUIVALENCE/CT S CORONARY SPASM, TREATMENT/CT	CL CT
Controlled Word	/CW	S (ACICLOVIR (L) ACTIVITY)/CW S (INHIBITORS (S) ANTIMICROBIAL)/CW	CT
Corporate Source (organization name and location) (2) Document Number Document Type (text)	/CS /DN /DT (or /TC)	S (VETERANS AFFAIRS AND ALABAMA)/CS S 801032402/DN S CASE/DT	CS DN DT
Dose (3,4) Entry Date (3) Evaluation (4,5)	/DOSE /ED /EVAL	S 1.15-1.20/DOSE S L1 AND ED>=20051100 S CONTROLS/EVAL S MEDIA RELEASE/EVAL	TX ED EVAL
Evaluation Score (3,4,5) Field Availability International Standard (Document) Number (contains ISBN and ISSN)	/EVAL.S /FA /ISN	S EVAL.S>=90 S L3 AND SIDE/FA S 8750-2836/ISN	EVAL Not displayed ISN, SO
Journal Title (contains full and abbreviated journal titles) Language (code and text)	/JT /LA	S REGION ANESTH/JT S REGIONAL ANESTHESIA/JT S L2 AND ENGLISH/LA S L2 AND EN/LA	JT, JTA, JTF, SO LA
Number of Patients (3,4) Ongoing Trial Comment Other Source	/PNO /OT /OS	S PNO<=100 S TRANSDERMAL?/OT S 2006000116/OS S ADISINSIGHT/OS	PNO OT OS
Publication Date (3) Publication Year (3) Reference (2) Side Effects (4)	/PD /PY /RE /SIDE	S JUN 1-30 2005/PD S 2004/PY S EPILEPSY DISORDERS/RE S NAUSEA/SIDE S ADVERSE EVENTS/SIDE	PD, SO PY, SO RE SIDE
Source (contains full journal title, publication date, and collation information (volume, issue, and page numbers)) Title *	/SO /TI	S (BIOLO? AND BULL? AND VOL 20)/SO S (VITRO AND ACTIVITY)/TI S ?MALARIA?/TI S (KETOLIDE (S) ANTIMICROBIAL)/TI	SO TI
Update Date (3) Word Count (3,4)	/UP /WC	S L7 AND 20021100-20021200/UP S L1 AND WC<200	ED WC

(1) See HELP CLREL for descriptions of codes used in this field.

(2) Implied (S) proximity is available in this field.

(3) Numeric search field that may be searched using numeric operators or ranges.

(4) This field is available only in the SUMMARY file segment.

(5) See HELP SCORE for more information.

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 AU. The fields are displayed or printed in the order requested.

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

Format	Content	Examples
AN (1) AU CC CL (1,2) CS CT (1) DED DN DT (TC) DUP ED EVAL (2) ISN JT (3) JTA (3) JTF (3) LA OS OT PD (3) PNO (1,2) PY (3) RE SIDE (2) SO TI (1) TX (2) UP WC (1,2)	Accession Number Author ATC CODE (EPHMRA and WHO) Clinical Relevance Corporate Source Controlled Term (Drug Descriptors, Disease Descriptors, and Other Descriptors) ADIS Record Creation Date Document Number Document Type ADIS Last Update Date Entry Date Evaluation (Positive Features, Negative Features, Adis Comment, and Adis Evaluation) International Standard (Document) Number Journal Title, Full and Abbreviated Journal Title, Abbreviated Journal Title, Full Language Other Source Ongoing Trial Comment Publication Date Number of Patients Publication Year Reference Side Effects (includes side effects table) Source Title Text (Global Study Outcome (Efficacy, Tolerability, Pharmacoeconomics), Study Message (Efficacy, Tolerability), Results Highlights (Efficacy, Tolerability), Purpose, Author Comments, Study Details (Design, Control, Phase, Methodology, EndPoints, Companies) Subject Details (Type, No., Age, Sex, Location, Disease, Characteristics), Drug, Drug Table (Drug/Treatment, Dose, Route, Frequency, Duration), Results (Results Table), Case Details (Toxicity, Dechallenge, Outcome, Claimed Association, Key Details), and Age Key) Update Date Word Count	D L4 1-4 AN D AU CS D CC D CL EVAL D CS 1,3-5 D CT 5-10 D DED D 1-3,7,8 DN D DT D DUP D ED D EVAL 1 5 D ISN D JT D JTA 2 D JTF D LA D OS OT D PD D PNO D PY D RE D SIDE D SO D TI D TX D UP D WC
ALL BIB CBIB DALL IALL IBIB IND (1) SCAN (1,4) TEXT (2) TRIAL (TRI, SAM) (1)	AN, DN, TI, AU, CS, SO, DT, DED, DUP, RE, LA, WC, OS, ED, EVAL, CL, TX, SIDE, PNO, CC, CT AN, DN, TI, AU, CS, SO, DT, DED, DUP, RE, LA, WC, OS, ED BIB in compressed format ALL, delimited for post processing ALL, indented with text labels BIB, indented with text labels PNO, CC, CT TI, PNO, CC, CT (random display, no answer numbers) EVAL, CL, TX, SIDE, PNO TI, PNO, CC, CT	D ALL D 2 L5 BIB D CBIB D DALL D IALL D IBIB D IND D SCAN D TEXT D TRIAL TOTAL
HIT KWIC OCC (1)	Fields containing hit terms Hit terms 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) No online display fee for this format.

(2) This field is available only in the SUMMARY file segment.

(3) Custom display format only.

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

ADISCTI**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	Y	N
ADIS Last Record Update	DUP	Y	Y
ADIS Record Creation Date	DED	Y	Y
ATC Record (EPHMRA and WHO)	CC	Y	N
Author	AU	Y	Y
Citation	CIT	Y (2,3)	N
Controlled Term	CT	Y	N
Corporate Source	CS	Y	Y
Document Number	DN	Y	Y
Document Type	DT	Y	Y
Entry date	ED	Y	Y
Evaluation (4)	EVAL	Y	N
File Segment	FS	Y	Y
International Standard (Document) Number	ISN	Y	Y
Journal Title	JT	Y (5)	Y
Journal Title, Abbreviated	JTA	Y (6)	Y
Journal Title, Full	JTF	Y (6)	Y
Language	LA	Y	Y
Number of Patients (4)	PNO	Y	Y
Occurrence Count of Hit Terms	OCC	N	Y
Ongoing Trial Comment	OT	Y	N
Other Source	OS	Y	N
Publication Date	PD	Y	Y
Publication Year	PY	Y	Y
Reference	RE	Y	Y
Side Effects (4)	SIDE	Y	N
Text (4)	TX	Y (7)	N
Title	TI	Y (default)	Y
Treatment Code	TC	Y	Y
Update Date	UP	Y	Y
Word Count (4)	WC	N	Y

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

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

(4) This field is available only in the SUMMARY file segment.

(5) Selects or analyzes full and abbreviated journal titles with /JT appended to the terms created by SELECT.

(6) Appends /JT to the terms created by SELECT.

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

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 Answer number(s) Answer number(s) and format Format only Change default format Forward n fields Backward n fields Search forward for character string Search backward for character string End DISPLAY BROWSE	=> D BRO L1 : :1-3 :4 HIT :TI TX :*KWIC :F3 :B1 :S BONE MARROW :S- NAUSEA :END =>	EXPERT version display answers 1, 2, and 3 in default format display answer 4 in HIT format display title and text of last answer displayed change default to KWIC no answer displayed move forward 3 fields move backward 1 field search forward within record for 'bone marrow' search backward within record for 'nausea' exit DISPLAY BROWSE and return to => prompt

Sample Records

DISPLAY IALL

ACCESSION NUMBER: 2002:7310 ADISCTI
DOCUMENT NUMBER: 800920886
TITLE: Fluoxetine v. placebo in prevention of relapse in
post-traumatic stress disorder.
ADIS TITLE: Fluoxetine: therapeutic use
Post-traumatic stress disorder
Prevention of relapse
AUTHOR: Martenyi F; Brown E B; Zhang H; Koke S C; Prakash A
CORPORATE SOURCE: Lilly Research Laboratories, Lilly Corporate Center,
Indianapolis, Indiana, USA (Martenyi F; Brown E B;
Zhang H; Koke S C; Prakash A)
SOURCE: British Journal of Psychiatry (Oct 1, 2002), Vol. 181,
pp. 315-320
ISSN: 0007-1250
DOCUMENT TYPE: Best Evidence
ADIS REC. CREATED: 22 Oct 2002
REFERENCE: Anxiety Disorders
LANGUAGE: English
WORD COUNT: 723
OTHER SOURCE: ADISINSIGHT 2000000281
ENTRY DATE: Entered STN: 25 Oct 2002
Last Updated on STN: 25 Oct 2002

EVALUATION:

Positive Features:

placebo comparison to control for variation; double-blind study design to control for bias; well defined study purpose; well defined patient inclusion and exclusion criteria and patient demographical data; adequate patient numbers; patients randomised to comparable treatment groups; appropriate drug dosage and study duration; methods, results and adverse events adequately reported; valid study conclusions

Negative Features:

intercentre comparability not assessed; no information on concomitant medication

ADIS Evaluation: 80

CLINICAL RELEVANCE: B

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TEXT - Global Study Outcome:

Efficacy: Fluoxetine > Placebo

Tolerability: Fluoxetine = Placebo

TEXT - Study Message:

Efficacy:

Fluoxetine is effective in the prevention of relapse in patients with post-traumatic stress disorder.

Tolerability:

Fluoxetine is well tolerated in patients with post-traumatic stress disorder.

TEXT - Results Highlights:

Efficacy:

Fluoxetine was effective in the prevention of relapse in patients with post-traumatic stress disorder. Fluoxetine was significantly superior to placebo with regard to time to relapse ($p < 0.05$). The occurrence of relapse was greater in placebo compared with fluoxetine recipients (16 vs 6% of patients; $0.05 < p < 0.10$).

Tolerability:

Fluoxetine was well tolerated in patients with post-traumatic stress disorder. Adverse events were observed in 39% of fluoxetine and 24% of placebo recipients and included insomnia, anxiety, headache and pain.

TEXT - Purpose:

Post-traumatic stress disorder (PTSD) is a psychopathological response to a traumatic experience, and can persist for up to 10 years in some patients. Selective serotonin reuptake inhibitors (SSRIs) are known to be effective in PTSD in the short term, but few studies have assessed the efficacy of long-term treatment in preventing relapse of PTSD.

This study assessed the efficacy and tolerability of fluoxetine in the prevention of relapse in patients with PTSD.

TEXT - Author Comments:

"The findings demonstrate the efficacy of pharmacotherapy with fluoxetine, an SSRI [selective serotonin reuptake inhibitor], in the prevention of PTSD [post-traumatic stress disorder] relapse and continual improvement in PTSD symptoms for up to 6 months following response to 12 weeks of acute treatment."

"Safety and tolerability of fluoxetine in this study were comparable to previous studies of fluoxetine in PTSD and to fluoxetine trials for other indications."

TEXT - Subject Details:

Type: patients

No: 131

Age: 18-65 (mean 38) years

Sex: 106 male & 25 female

Location: Belgium, Bosnia-Herzegovina, Croatia, Israel, South Africa, Yugoslavia

Disease: Post-traumatic-stress-disorder

Characteristics: patients had post-traumatic stress disorder according to DSM-IV criteria. Patients also had a Clinician-Administered PTSD Scale - Diagnostic Version (CAPS-DX) score ≥ 50 , a CGI severity score of ≥ 4 and a Montgomery-asberg Depression Rating Scale (MADRS) score ≤ 20 . Trauma type was either combat ($n = 62$) or non-combat related (69) and had been experienced a mean of 5 years previously.

Fluoxetine

Drug/Treatment	Dose	Route	Frequency	Duration
Fluoxetine	20-80 mg/day	PO	not stated	12-36 weeks

Placebo
Placebo
Results:

Efficacy analysis	Placebo		Fluoxetine	
	baseline (week 12 of acute treatment)	change at endpoint	baseline (week 12 of acute treatment)	change at endpoint
CGI severity score	1.9	+0.3	1.9	-0.2 sup (a)
CGI improvement score		2.8		2.4
CAPS-DX score:				
total	29.6	-0.9	31.3	-6.2 sup (b)
intrusive	8.5	+0.2	9.0	-1.6 sup (b)
avoidance	11.2	-0.8	12.3	-3.7 sup (c)
hyperarousal	9.9	-0.2	10.0	-1.0
DTS score:				
total	32.3	-5.0	34.9	-8.7
intrusive	9.7	-2.4	10.5	-2.5
avoidance	11.5	-2.7	13.8	-4.1
hyperarousal	10.8	-0.4	10.3	-1.9
SCL-90-R score	85.8	-5.3	113.9	-13.1
HARS score	7.2	+0.6	7.2	-1.8 sup (c)
MADRS score	6.8	+0.7	7.2	-1.8 sup (c)
TOP-8 score	6.1	+0.05	6.6	-1.8 sup (c)

DTS = Davidson Trauma Scale; SCL-90-R = Symptom Checklist 90-item Revised;
HARS = Hamilton Anxiety Rating Scale.

a p < 0.01 vs placebo; b p 0.05 < p < 0.10 vs placebo; c p < 0.05 vs placebo.

TEXT - Age Key: adult, elderly

TEXT - Study Details:

Design: multicentre, randomised, double-blind

Control: baseline comparison, placebo comparison

Phase: III

Methods: Patients were randomised to fluoxetine or placebo for 12 weeks. After the 12 weeks, fluoxetine recipients who had a $\geq 50\%$ decrease in the 8-item Treatment Outcome PTSD scale (TOP-8), a Clinical Global Impressions scale (CGI) severity score ≤ 2 and who did not meet DSM-IV criteria for PTSD were re-randomised to fluoxetine or placebo for a further 24 weeks.

Endpoints: Assessment-scale-scores, Clinical-Global-Impressions-scale, Clinical-relapse-rate, Clinician-Administered-Post-Traumatic-Stress-Disorder-Scale, Hamilton-Anxiety-Rating-Scale, Montgomery-Asberg-Depression-Rating-Scale, Symptom-Checklist-(SCL-90)

Companies: Eli Lilly, Eli Lilly

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SIDE EFFECTS:

Side Effects Table:

Side effects (% of patients)	Placebo (n = 62)	Fluoxetine (n = 69)
Withdrawal due to adverse events	0	1
>=1 adverse event	24	39
Insomnia	10	15
Anxiety		6
Headache	5	6
Pain	5	
Serious adverse events		3

NO. OF PATIENTS: 131

THERAPEUTIC CDE: N06A (EPhMRA); N06AB03 (WHO)

CONTROLLED TERM: Drug Descriptors: Fluoxetine, therapeutic use

CONTROLLED TERM: Disease Descriptors: Post traumatic stress disorder,