Embase®

Dialog®

Embase provides comprehensive bibliographic coverage of the literature on drugs and pharmacology and of all other aspects of human medicine and related disciplines.

Embase is a key resource for biomedical evidence, from published, peer-reviewed literature, in-press publications and conference abstracts. Widely recognized as an authoritative source for generating systematic reviews, Embase's comprehensive indexing of trial and study types, reviews and meta analyses ensures maximum searchability.

Whether you are monitoring the literature to make informed decisions in evidence-based medicine or are engaged in pharmacovigilance and post-market monitoring of your products, Embase is the ideal solution.

Embase includes conference abstracts from 11,500+ biomedical, drug and medical device conferences dating back to 2009.

Full-text indexing of drug, disease and medical device data facilitates precise searching via the detailed life science thesaurus Emtree. This covers trade, generic and chemical designations for drugs, medical device trade and manufacturer names, disease names and more. Dialog™ offers an interactive thesaurus, updated three times per year, to provide full access to all these terms, and their broader and narrower hierarchies, subheadings and scope notes.

Embase covers the following areas:

Drug research
Pharmacology
Pharmacoeconomics
Pharmaceutics
Toxicology
Human medicine
Basic biological research
Health policy and management
Public, occupational and environmental health
Substance dependence and abuse
Psychiatry
Forensic science
Biomedical engineering and instrumentation
Medical devices

A supplementary database, Embase French Local Literature, is also available, allowing the monitoring of an additional 100 French-language journals for pharmacovigilance. It is searched and indexed just as Embase itself.

Use Embase to answer such questions as:

- What is the latest evidence for anti-PD-1 therapies in the treatment of cancer?
- Have any clinical trials been conducted on an ebola vaccine?
- Are there any systematic reviews on the treatment of hepatitis C?
- What are the adverse effects of nivolumab?

Date coverage 1947-present

Update frequency Daily (Monday to Friday)

Geographic coverage International

Document types Journal articles, conference material

Sources About 8,300 journals in 94 countries. All journals in Embase are cover-to-cover, and all are peer-reviewed except a very small number of trade journals. An additional 100 French local journals are covered in the supplementary database, Embase French Local Literature.

Publisher
Elsevier
Radared 29

Last revised: April 16, 2023

DialogSolutions
Part of Clarivate

Sample Document

Embase®

Citation/Abstract « Back to results

Add to selected items | Order full text | Save to My Research | Er

TI

Continuous glucose monitoring in patients with type 2 diabetes treated with glucagon-like peptide-1 receptor agonist dulaglutide in combination with prandial insulin lispro: an AWARD-4 substudy

AU
AUFN,AULN

Jendle, Johan; Testa, Marcia A.; Martin, Sherry; Jiang, Honghua; Milicevic, Zvonko.

PUB

Diabetes, Obesity and Metabolism 18.10 (Oct 1, 2016): 999-1005. Pricing

Highlighting: Off | Single | Multi

Show duplicate items from other databases

AB

Abstract (summary) Translate

Aim: To conduct a substudy, using 24-hour continuous glucose monitoring (CGM), of the AWARD-4 trial, which was designed to compare insulin + glucagon-like peptide-1 receptor agonist treatment with an insulin-only regimen. Methods: The AWARD-4 trial randomized 884 conventional insulin regimen-treated patients to dulaglutide 1.5 mg, dulaglutide 0.75 mg and glargine, all in combination with prandial insulin lispro. The CGM substudy included 144 patients inserted with a Medtronic CGMS iPro CGM device to enable 3-day glucose monitoring. CGM sessions were completed at weeks 0, 13, 26 and 52. CGM measures included mean 24-hour glucose, percentage time in target glucose ranges, hyper- and hypoglycaemia and glucose variability. The primary objective was treatment comparison for percentage time spent with CGM glucose values in the 3.9-7.8 mmol/L range after 26 weeks. Results: At week 26, mean CGM values decreased in all treatment groups (change from baseline −2.8 ± 0.3, −2.4 ± 0.3 and −2.5 ± 0.3 mmol/L for dulaglutide 1.5 mg, dulaglutide 0.75 mg and glargine, respectively); between-group differences were not statistically significant. Treatment groups were similar for percentage time in the 3.9-7.8 mmol/L range. Percentage time in the 3.9-10.0 mmol/L range was greater for dulaglutide 1.5 mg than for glargine ($p < 0.05$). Dulaglutide and glargine were associated with decreased glucose variability for all CGM variability indices. The overall

. . .

Indexing (details) Cite

SU
EMB MJEMB

Subject	
	Embase;
	dulaglutide (major);
	glucose;
	insulin;
	insulin glargine (major);
	insulin lispro (major);
	dulaglutide -- adverse drug reaction -- hypoglycemia (major);
	dulaglutide -- adverse drug reaction -- side effect (major);
	dulaglutide -- drug combination -- insulin lispro (major);
	dulaglutide -- drug comparison -- insulin glargine (major);
	dulaglutide -- drug dose (major);
	dulaglutide -- drug therapy -- hyperglycemia (major);
	dulaglutide -- drug therapy -- non insulin dependent diabetes mellitus (major);
	dulaglutide -- pharmacology (major);

glucose -- endogenous compound;
hemoglobin A1c -- endogenous compound;
insulin glargine -- adverse drug reaction -- hypoglycemia;
insulin glargine -- adverse drug reaction -- side effect;
insulin glargine -- drug combination -- insulin lispro;
insulin glargine -- drug comparison -- dulaglutide;
insulin glargine -- drug therapy -- hyperglycemia;
insulin glargine -- drug therapy -- non insulin dependent diabetes mellitus;
insulin glargine -- pharmacology;
insulin lispro -- adverse drug reaction -- hypoglycemia (major);
insulin lispro -- drug combination -- dulaglutide (major);
insulin lispro -- drug combination -- insulin glargine (major);
insulin lispro -- drug therapy -- hyperglycemia (major);
insulin lispro -- drug therapy -- non insulin dependent diabetes mellitus (major);
insulin lispro -- pharmacology (major);
awards and prizes (major);
blood glucose monitoring (major);
clinical trial;
controlled clinical trial;
drug combination (major);
drug therapy (major);
human;
hypoglycemia;
major clinical study;
non insulin dependent diabetes mellitus (major);
randomized controlled trial;
adult;
antidiabetic activity;
area under the curve;
Article;
combination drug therapy;
controlled study;
dose response;
drug dose comparison;
drug dose titration;
drug efficacy;
drug safety;
female;
glucose blood level;
glucose homeostasis;

. . .

CC	**Classification**	27: Biophysics, Bioengineering and Medical Instrumentation 29: Clinical and Experimental Biochemistry 3: Endocrinology 30: Clinical and Experimental Pharmacology 37: Drug Literature Index 38: Adverse Reactions Titles
SUBST RN	**Substance**	Substance: dulaglutide CAS: 923950-08-7 Substance: glucose CAS: 50-99-7 84778-64-3 Substance: hemoglobin A1c CAS: 62572-11-6 Substance: insulin glargine CAS: 160337-95-1 Substance: insulin lispro CAS: 133107-64-9
IF	**Identifier (keyword)**	continuous glucose monitoring, dulaglutide, glargine, type 2 diabetes
TN,TNDRUG	**Drug trade name**	ly 2189265
TN,TNDEV CO	**Device trade name**	Name: CGMS iPro Manufacturer: Medtronic
TI	**Title**	Continuous glucose monitoring in patients with type 2 diabetes treated with glucagon-like peptide-1 receptor agonist dulaglutide in combination with prandial insulin lispro: an AWARD-4 substudy
AU,AUFN,AULN	**Author**	Jendle, Johan [1] ; Testa, Marcia A. [2] ; Martin, Sherry [3] ; Jiang, Honghua [3] ; Milicevic, Zvonko [4]
AF		[1] Faculty of Medical Sciences, Department of Medicine, Örebro University, Örebro, Sweden [2] Department of Biostatistics, Harvard T.H. Chan School of Public Health, Harvard University, Boston, MA, United States [3] Eli Lilly and Company, Indianapolis, IN, United States [4] Eli Lilly and Company Regional Operations, Vienna, Austria milicevic_zvonko@lilly.com
EA	**Author e-mail address**	milicevic_zvonko@lilly.com
AU	**Correspondence author**	Milicevic, Zvonko Eli Lilly and Company Regional Operations, Vienna, Austria.
GI	**Grant**	Eli Lilly and Company. The authors would like to thank Ryan T. Hietpas, PhD of Eli Lilly and Company for writing support. The study was funded by Eli Lilly and Company, Indianapolis, IN, USA. All authors contributed to the design, conduct/data collection, and analysis of this study. All authors contributed to the writing of the manuscript.
LA	**Language**	English
SL	**Language of abstract**	English
DTYPE	**Document type**	Article
PUB	**Publication title**	Diabetes, Obesity and Metabolism
VO	**Volume**	18
ISS	**Issue**	10
PG	**Pagination**	999-1005

ISSN	**ISSN**	14628902
	Electronic ISSN	14631326
CODEN	**CODEN**	DOMEF
PTYPE	**Publication type**	Journal
PB	**Publisher**	Blackwell Publishing Ltd
PBLOC	**Publisher location**	United Kingdom
DOI	**DOI**	http://dx.doi.org/10.1111/dom.12705
NR	**Number of references**	23
PD, YR	**Publication date**	Oct 1, 2016
DCRE	**Date created**	2016-07-26
DSTAT	**Document status**	Revised
DSTAT	**Embase document status**	Embase
	Source attribution	Embase, © Publisher specific
AN	**Accession number**	611341033
	Document URL	http://10.241.145.67/professional/docview/1887866733?accountid=175644
	Copyright	Copyright 2016 Elsevier B.V., All rights reserved.
FAV	**First available**	2016-09-22
UD	**Updates**	2016-09-22 2016-10-14
	Database	Embase®; 1947 to date (1947 - current)

Search Fields

Field Name	Field Code	Example	Description and Notes
Abstract	AB	ab("glucose monitoring")	Over 70% of articles in Embase have an abstract. Use adjacency and/or Boolean operators to narrow or broaden your search and double quotes to search for a precise phrase.
Abstract present	ABANY	"t cell lymphoma" AND abany(yes)	Add: *AND ABANY(YES)* to a query to limit retrieval to records with abstracts. Use double quotes to search for a precise phrase.
Accession number	AN	an(611341033)	A unique document identification number assigned by the information provider.
All fields	ALL	all(cgm OR "continuous glucose monitoring")	Searches all fields. Use proximity and/or Boolean operators to narrow search results.
All fields + text	--	"continuous glucose monitoring"	Same as ALL field code - searches all fields.
Author[1] Author First Name Author Last Name	AU AUFN AULN	au(testa, m*) aufn(marcia) auln(testa)	All authors are included in the document. Elsevier has no standardization policy for author names. Names are captured as they appear in the source, so you will sometimes find authors with surname and initial(s), sometimes with surname and full first name(s).
First author	FAU	fau(jendle)	First name listed in Author field. It is included in the Author browse, but its position cannot be specified in the Author browse.
Author affiliation	AF	af(biostatistics AND harvard) af(sweden)	Includes as much data as is available in the original document, such as department, organization, address, city, state, country, author email, etc.
CAS® Registry Number[1]	RN	rn(923950-08-7)	CAS Registry Numbers are generated (when available) for all drug terms and are displayed together with the corresponding drug name. The Registry Number is also searchable using the Substance field code (SUBST).
Classification[1]	CC	cc("drug literature index") cc(37)	The classification is made up of 52 broad section headings, such as 'Cancer', 'Toxicology', and a numeric code for each.
Clinical trial number	STI	sti(nct01051856)	Clinical trial numbers (the numbers under which a clinical trial is registered at ClinicalTrials.Gov, Current Controlled Trials and the European Clinical Trials Database (EudraCT)) have been indexed in Embase since 2007.
Coden	CODEN	coden(domef)	

[1] A Lookup/Browse feature is available for this field in the Advanced Search dropdown or in Browse Fields.

Field Name	Field Code	Example	Description and Notes
Company[1]	CO	co(medtronic) co(merck)	The company name displays as the manufacturer of the relevant drug or device trade name. The company's country is often included too, and this is searchable with CN.
Conference country	CCNT	ccnt(france)	The conference country is also searchable with CF.
Conference information	CF	cf("rheumatology health professionals") cf("san francisco") cf("2018-11-06")	Conference abstracts have been included in Embase since 2009. CF can be used to search any part of the conference including name, location, and dates.
Conference start date	CDT, ESDT	cdt(20181106) esdt(20181106)	Also searchable with CF
Conference end date	EVDT	evdt(20181111)	Also searchable with CF
Conference title	CFTI	cfti("symposium in thoracic oncology")	Also searchable with CF
Country of manufacturer	CN	cn(belgium)	This is the country of the drug or device manufacturer usually displayed with the trade name.
Country of publisher			See Publisher location.
Date created	DCRE	dcre(2019-03-09) dcre(>20181231)	This represents the date Elsevier created the record and added it to their system. It predates its delivery to Dialog and has no relation to the Dialog update date.
Date delivered	DREV	drev(20190308) drev(20190308-20190315)	The date on which Elsevier delivered the record. This is a static date and is not affected by a reload of the database. This date is not displayed, but it is searchable and range searching is supported.
Document status	DSTAT	dstat(new) dstat(revised) dstat("in process") dstat("article in press") dstat(Embase) dstat(MEDLINE) dstat("in-process (MEDLINE in Embase)")	The following document status values are available: - 'new', for documents which have never been seen on Dialog before - 'revised', for documents which are an updated version of an earlier record - 'in process' and 'article in press' for documents which are not fully indexed yet - 'Embase' and 'MEDLINE' for documents which are fully indexed and sourced from Embase and MEDLINE respectively Since October 8th, 2018, documents sourced from MEDLINE have the full range of MEDLINE document status values applied, apart from the out of scope PubMed-not-MEDLINE. These are: - 'Publisher (MEDLINE in Embase)' – articles that appear on the web in advance of the

Field Name	Field Code	Example	Description and Notes
			journal issue's release (i.e. ahead of print citations) - 'In-Data-Review (MEDLINE in Embase)' – first step in the NLM's quality control; records with this value will proceed either to 'In process' or to 'PubMed-not-MEDLINE' - 'In-Process (MEDLINE in Embase)' – bibliographic data is checked but no MeSH terms are added yet - 'PubMed-not-MEDLINE (in Embase)' – records are not in scope for Medline. A small number of these are included in Embase, but not all - 'MEDLINE'
Document title			See Title
Document type[1]	DTYPE	dtype(article) dtype("conference abstract")	Most document types in Embase are articles, but a small number of other types are also available, notably conference abstracts.
DOI	DOI	doi(10.1111/dom.12705)	Digital Object Identifier. Search the portion of the number that follows http://dx.doi.org
Email address	EA	ea(zvonko@lilly)	The email address of the correspondence author
Emtree subject[1]	EMB	emb(heart) emb.exact(heart) emb.exact.explode(heart) emb(dulaglutide LNK drug therapy) emb(dulaglutide -- drug therapy) emb(dulaglutide LNK dt) emb(dulaglutide -- dt)	Emtree subjects are terms from the Emtree thesaurus describing the subjects of the original article. The following search tips may be useful. emb(heart) = 'heart' as a single term and as part of a longer phrase (e.g. heart disease) emb.exact(heart) = 'heart' as a single term only emb.exact.explode(heart) = 'heart' and all its narrower terms Use LNK or -- to combine a main heading with a subheading. Search subheadings as abbreviations or full terms. Emtree terms are generally displayed in two alpha sequences – drugs, then diseases/medical terms. Select Emtree terms from the online thesaurus via the link on the Advanced and Command Line search pages.

Field Name	Field Code	Example	Description and Notes
		emb(dulaglutide -- dt -- hyperglycemia)	You can browse a list of subheadings in the online thesaurus and on the field codes Help (see: MeSH® and Embase codes). Triple indexing links are available in some records since 2007. They consist of two main Emtree headings with a key subheading between. Use LNK or -- to combine terms, and the abbreviation or full form of the key subheading. Key subheadings used with triple links are: adverse drug reaction (ae) drug combination (cb) drug comparison (cm) drug interaction (it) drug therapy (dt) adverse device effect (am) device comparison (dc) side effect (si) special situation for pharmacovigilance (pv) unexpected outcome of drug treatment (tm) See also Notes on Triple Indexing Links on p. 14 of this ProSheet
Emtree subject (major) [1]	MJEMB	mjemb(heart) mjemb.exact(heart) mjemb.exact.explode(heart) mjemb(dulaglutide LNK dt) mjemb(dulaglutide -- drug therapy) mjemb(dulaglutide -- dt -- hyperglycemia)	These are the Emtree terms representing the major topics of the article.
Emtree qualifier	QU	qu(adverse drug reaction) qu(ae) mjemb(dulaglutide LNK ae) mjemb(dulaglutide -- ae) emb(dulaglutide -- nsh)	Usually searched with a main Emtree heading, the subheadings can also be searched alone if desired with the QU field code. Note that conference abstract and in process documents (including 'Articles in Press') do not have subheadings. It is possible to find articles in which the Emtree headings have no subheading: add 'LNK NSH' or '-- NSH' to the term.
First available	FAV	fav(20160922)	Indicates the first time a document was loaded on Dialog. It will not change regardless of how many times the record is subsequently reloaded, if the accession number remains the same.

Field Name	Field Code	Example	Description and Notes
Genetic sequence/ information	GEN	gen(ay604734/b)	Molecular sequence numbers are the accession numbers under which nucleic acid or amino acid sequences can be found in their respective repositories (Genbank, PIR & SWISSPROT). The repository name and accession number for all molecular sequence numbers mentioned in Embase articles are indexed. Newly submitted sequences are designated “major” (a), and referred sequences are “minor” (b).
Grant information	GI	gi(“eli lilly”)	If the authors received support or funding for the study that support is acknowledged here.
ISSN	ISSN	issn(14628902) issn(1462-8902)	Both the ISSN and the eISSN are searchable with field code ISSN. It is also searchable via the Look Up Citation tool.
Issue	ISS	iss(10) iss(supp)	Also searchable via the Look Up Citation tool.
Journal title	JN	jn(“diabetes obesity and metabolism”)	Full journal name (periodical title); Look-Up list available under Publication title.
Identifier (Keyword)	IF	if(“type 2 diabetes”)	These are author keywords, not part of the Emtree thesaurus. They are not available in every document.
Language	LA	la(english)	The language in which the document was originally published.
Language of abstract	SL	sl(spanish)	Some documents in Embase have both an English and a foreign-language abstract. Both are searchable in their respective languages.
Number of references	NR	nr(23)	Number of references is not available in all articles.
Pagination	PG	pg(999)	This may be the page number of an article in a hard copy journal or the article/abstract number of an electronic publication or conference abstract.
PII	AV	av(“S0378517315001349”)	The Publisher Item Identifier is a unique identifier used by scientific publishers to identify documents based on an extension of the ISSN. It is searchable when enclosed in double quotes. It appears in relatively few documents.
Publication date	PD	pd(20190501) pd(>20180415) pd(20160101-20161231)	This is the publication date of the article. Date range searching is supported.
Publication title[1]	PUB	pub("diabetes obesity and metabolism") pub(“diabetes obes metab”)	The publication title. Both the full and abbreviated form of the journal name are searchable.
Publication type[1]	PSTYPE	pstype(book)	Most documents in Embase are from journals, but a small number of other publication types are available too.

Field Name	Field Code	Example	Description and Notes
Publication year	YR	yr(2016) yr(2013-2019)	Date range searching is supported.
Publisher	PB	pb(blackwell)	This is the publisher of the journal.
Publisher location	PBLOC	pbloc(united kingdom)	This is the country of the journal's publisher.
Related record	CM	cm(erratum and bioinformatics)	Errata and retractions are noted here and allow you to link back to the original incorrect or retracted article. Simply click the highlighted accession number at the end of the string to go to the original. The Related record field is available in Embase documents dated October 2016 and later.
Source information	SRC	src("diabetes obesity and metabolism" and 2016)	
Subject[1]	SU	su(dulaglutide)	Includes Emtree subject (EMB) and author key words. An alternative to EMB for cross-file searching.
Main Subject	SUBT	subt(dulaglutide)	SUBT searches only the main subject field. MeSH and EMB subject terms are mapped to the main subject field but without their accompanying qualifiers. SUBT can be used to search a very restricted subset of SU.
Subject (major)	MJSUB	mjsub(diabetes mellitus)	Alternative to MJEMB for cross-file searching.
Substance[1]	SUBST	subst(dulaglutide) subst(923950-08-7)	The CAS Registry number (but not the chemical name) is also searchable using the RN search field.
Title	TI	ti(dulaglutide AND insulin lispro)	This is the title of the article. TI searches the Title, Alternate Title and Subtitle, when available.
Title only	TIO	tio("continuous glucose monitoring")	TIO searches the Title only, not Subtitle or Alternate title.
Alternate title	OTI	oti("angeboren* herzfehler*")	The alternate title is usually the original language title of a non-English article.
Trade name[1] Trade name drug Trade name medical device	TN TNDRUG TNDEV	tn(cgms ipro) or tn("ly 2189265") tndrug("ly 2189265") tndev("cgms ipro")	This is the trade name of the drug or device described in the article. In the case of drugs, the trade name will only be present if the article describes it as a clinical drug (and not, for example, as a food supplement).
Updates	UD	ud(20181014)	The date(s) the record was loaded as a result of an update provided by the supplier.
Volume of publication	VO	vo(18)	Also searchable via the Look Up Citation tool.

Search Tools

Field codes are used to search document fields, as shown in the sample document. Field codes may be used in searches entered on the **Basic Search**, **Advanced Search**, and **Command Line** search pages. **Limit options**, **Look up lists**, and **"Narrow results by" filters** tools are available for searching. Some data can be searched using more than one tool.

Limit Options

Limit options are quick and easy ways of searching certain common concepts. Check boxes are available for:

Abstract included, Humans, Animals, Females, Males, Clinical trials, Meta analysis, Medline, Embase

Short lists of choices are available for:

Embase document status, Document type, Source type, Language, Age group, Classification

Date limiters are available enabling you to select single dates or ranges for date of **publication** and **updated**.

Command Line Common Concepts

Strategies for these concepts are as follows.

Review articles
EMB.EXACT("REVIEW")

Priority journals
EMB.EXACT("PRIORITY JOURNAL")

The priority status is based on several criteria, such as whether the journal has an editorial board, whether it is peer reviewed, whether it is in English and whether it contains references. There is no selection based on research scope of the article.

Humans
EMB.EXACT(HUMAN) OR EMB(CASE OR CLINICAL OR CHILD)

Animals
EMB("ANIMAL" OR "RAT" OR "MOUSE" OR "RABBIT" OR "DOG" OR "PIG" OR "SWINE" OR "CATTLE" OR "CHICKEN" OR "MONKEY" OR "CAT")

Females
EMB("FEMALE" OR "FEMALE WORKER" OR "PRIMIGRAVIDA" OR "SINGLE WOMAN" OR "PREGNANT WOMAN" OR "PRIMIPARA" OR "GIRL" OR "BISEXUAL FEMALE" OR "FEMALE PHYSICIAN" OR "MULTIPARA" OR "HETEROSEXUAL FEMALE" OR "LESBIAN" OR "MARRIED WOMAN" OR "NULLIPARA")

Males
EMB("MALE" OR "BOY" OR "BISEXUAL MALE" OR "SINGLE MAN" OR "MARRIED MAN" OR "MALE HOMOSEXUAL" OR "HETEROSEXUAL MALE")

Clinical trials
EMB.EXACT.EXPLODE("CLINICAL TRIAL") OR EMB.EXACT.EXPLODE("CLINICAL TRIAL (TOPIC)") OR EMB("CLINICAL TRIAL*" OR "SINGLE BLIND PROCEDURE" OR "DOUBLE BLIND PROCEDURE" OR "TRIPLE BLIND PROCEDURE" OR "CROSSOVER PROCEDURE" or "RANDOMIZED CONTROLLED TRIAL")

Meta analysis

EMB("META ANALYSIS")

Documents sourced from Embase
EMBASE(YES)

Documents sourced from MEDLINE
MEDL(YES)

Look up Lists

You can browse the contents of certain fields by using Look up lists. These are particularly useful to validate spellings or the presence of specific data. Terms found in the course of browsing may be selected and automatically added to the Advanced Search form. Look up lists are available in the fields drop-down and in the search options for:

Subject, Major Subject, CAS Registry number, Author

and in the fields drop-down only for:

Company, Publication title, Substance, Classification, Trade name

Thesaurus

The Embase Thesaurus, updated on Dialog three times per year in line with Elsevier's schedule, is available by clicking on the "Thesaurus" hyperlink on the right side of the Advanced Search and the Command Line Search pages. Terms may be searched within the thesaurus, then selected to be added automatically to the search form.

Embase subheadings are available within the Thesaurus. The full list is also available at the end of this ProSheet.

"Narrow Results By" Filters

When results of a search are presented, the results display is accompanied by a list of "Narrow results by" options shown on the right-hand panel. Click on any of these options and you will see a ranked list showing the most frequently occurring terms in your results. Click on a term to apply it to ("narrow") your search results. "Narrow results by" filters in Embase include
Document type, Source type, Author, Language, Publication title, Subject, Substance, Publication date

Look Up Citation

If you need to trace a particular bibliographic reference, use the Look Up Citation feature. Find a link to this toward the top left-hand corner of the Advanced Search page, or in the drop list under Advanced on any search form; click this and you will go to a form where you can enter any known details of the citation, including document title, author, journal name, volume, issue, page, publication date, ISSN.

Notes

- **Drugs and diseases**
  For full details of the Embase indexing policy see The Embase Indexing Guide at:
  https://www.elsevier.com/__data/assets/pdf_file/0010/901693/Embase-indexing-guide-2020.pdf

- **Drug synonyms**
  The scope notes of Emtree drug terms typically contain many generic names and synonyms, and Elsevier's policy is to add as many relevant synonyms as possible. The defined sources of these are:
  - Proposed WHO INN names
  - USAN adopted names
  - MeSH trees
  - FDA approved compounds
  - EMA approved compounds
  - Brand names of prescription drugs of major pharmaceutical companies
  - Candidate terms used for indexing Embase
  - MeSH Supplementary Concept Records

  With regard to synonyms such as chemical (structural) names, research codes, CAS numbers and additional brand names, exact sources are not always readily definable. Such synonyms will be mostly present in the sources mentioned above, enriched further by additional variations on structural names and any additional research codes and brand names that can be found. Name/spelling variations (typically of salts) and British spelling variations where applicable are also added.

- **Drug trade names**
  Elsevier indexes product names as trade names when they appear as a 'clinical drug' in the document. If the product is not described in the article as a clinical drug, then it will not be indexed as a trade name and will not appear in the trade name field. For example, as at February 2019, in the case of 'similac', there are more than 210 documents describing its use as a nutritional supplement, where 'similac' does not appear in the trade name field. There are five documents in which this product is described as a treatment for diarrhoea, and these do have 'similac' in the trade name field. Product names may be indexed as full Emtree or candidate terms as well.

- **Candidate terms**
  These are terms under consideration for being added to Emtree. They are displayed and searchable with the same field code as other Emtree terms - e.g. EMB.EXACT("MORIHEPAMIN") or MJEMB.EXACT("MORIHEPAMIN"). Candidate terms do not appear in the thesaurus and you cannot use Explode with them. Candidate terms are reviewed annually; they may be promoted to bona fide Emtree terms or they may remain as candidates. If promoted to Emtree status, they will be searchable with Explode from the date of their promotion – it is possible therefore that you will find older records where they are indicated as candidates and newer ones where they are full thesaurus terms. For candidate drug terms, the term 'Unclassified drug' is also indexed and can be used as a search term. Candidate terms appear in the Subject field of records with a following '+' sign, e.g. morihepamin +

- **Triple indexing links**
  These are subject phrases consisting of three parts: a main Emtree heading (for a drug, device or disease), a 'key' subheading, and another main Emtree heading, e.g.: paracetamol -- drug therapy -- headache. Triple links enable

very accurate assessment of the content of the original article and very precise retrieval. Search triple links with the usual Emtree field codes EMB, MJEMB and SU.

The reverse form of every medical triple link is generally included on all documents, so the search may be approached from either point of view, e.g.:
EMB(PARACETAMOL -- DRUG THERAPY -- HEADACHE)
EMB(HEADACHE -- DRUG THERAPY -- PARACETAMOL)

Note that triple links using the combination 'drug -- adverse drug reaction -- disease' will have 'side effect' as the key subheading when the disease is the first term of the triple, e.g.:
EMB(ROFECOXIB -- ADVERSE DRUG REACTION – HYPERTENSION)
EMB(HYPERTENSION -- SIDE EFFECT -- ROFECOXIB)

In the case of drug combination or comparison triples, the reverse form may not always be included. The aspect of drug combination or comparison must be emphasized by the author to be indexed – for this reason the triple is not always reversed. For the same reason triple links using the 'special situation for pharmacovigilance' and 'unexpected outcome of drug treatment' subheadings introduced in January 2019 are not presented in their reverse form.

Triple links may be searched with a double dash (--) or LNK between terms; and the key subheading may be abbreviated or written out in full (e.g. dt or drug therapy).

From January 2019, 10 key subheadings are available for use with triple links, as follows:

Term	Key Subheading	Term	Example	Note
drug	special situation for pharmacovigilance (pv)	drug	adalimumab -- special situation for pharmacovigilance -- pediatric patient	New subheading Jan 2019
drug	unexpected outcome of drug treatment (tm)	drug	bleomycin -- unexpected outcome of drug treatment -- partial drug response	New subheading Jan 2019
drug	adverse drug reaction (ae)	disease	amoxicillin -- adverse drug reaction -- seizure	
drug	drug combination (cb)	drug	amoxicillin -- drug combination -- simvastatin	
drug	drug comparison (cm)	drug	amoxicillin -- drug comparison -- omeprazole	
drug	drug interaction (it)	drug	amoxicillin -- drug interaction -- warfarin	
drug	drug therapy (dt)	disease	amoxicillin -- drug therapy -- tonsillitis	
disease	drug therapy (dt)	drug	tonsillitis -- drug therapy -- amoxicillin	
disease	side effect (si)	drug	seizure -- side effect -- amoxicillin	
device	adverse device effect (am)	disease	stent -- adverse device effect -- stenosis	
device	device comparison (dc)	device	stent -- device comparison -- balloon	

The pharmacovigilance subheadings PV and TM are linked to specific terms in the third position of triple links, such as 'pediatric patient' in this example:

sumatriptan -- special situation for pharmacovigilance -- pediatric patient;

As noted above, triple indexing links using PV and TM do not appear on documents in their reverse form; they always appear with the drug in the first position.

The following tables list the special situation terms used in this way with PV and TM.

Special Situation for Pharmacovigilance (PV)

Special situation term used in third position of PV triple link	Scope note
compassionate use	Used in the case of compassionate use of a drug or an expanded access program/trial for a drug. Used when indicated as such by the author.
counterfeit drug	Used when the authors suspect or confirm a falsified drug. Used when indicated as such by the author.
disease transmission via medicinal product	Used when the authors suspect or confirm the transmission of an infectious agent via a drug or a medicinal product. Used when indicated as such by the author.
drug abuse	Used in the case of drug abuse. Drug abuse is the intentional excessive use of a drug accompanied by harmful physical or psychological effects. Used when indicated as such by the author.
drug exposure during lactation	Used when a nursing infant is exposed to a drug through breast feeding. Used when indicated as such by the author.
drug misuse	Used in the case of drug misuse. Drug misuse is the intentional and inappropriate use of a drug not in accordance with the authorized product information. Used when indicated as such by the author.
drug overdose	Used in the case of a drug overdose. Used when indicated as such by the author.
drug quality defect	Used when the authors suspect or confirm a quality defect of a drug. Used when indicated as such by the author.
aged	Used when a drug is used for elderly patients (for humans age 65 years and over).
kidney failure	Used when the drug is used by patients with kidney failure. Used when indicated as such by the author.
liver failure	Used when the drug is used by patients with liver failure. Used when indicated as such by the author.
medication error	Used in the case of a medication error, including medication errors through device malfunction. Used when indicated as such by the author.
named patient program	Used in the case of drugs used in a named-patient program. Used when indicated as such by the authors
occupational drug exposure	Used in the case of exposure to a drug as a result of one's occupation. Used when indicated as such by the author.
off label drug use	Used in the case of off-label drug use. Off-label use is the intentional use of a drug for a medical purpose not in accordance with the authorized product information. Used when indicated as such by the author.
pediatric patient	Used when a drug is used for pediatric patients (for humans less than 18 years of age).
prenatal drug exposure	Used when the embryo or fetus is exposed to a drug through the parent. Used when indicated as such by the author.

Unexpected Outcome of Drug Treatment (TM)

Unexpected outcome term used in third position of TM triple link	Scope note
lack of drug effect	Used when the authors report a lack of therapeutic efficacy of the drug
partial drug response	Used when the authors report a partial response to the drug
unexpected therapeutic effect	Used when the authors report an unexpected therapeutic effect
disease worsening with drug treatment	Used when the authors report disease worsening after drug therapy. The authors must make a connection between drug and the disease worsening.

Triple Links and Major

When a triple link is displayed on Dialog with a 'major' flag, it is always the first term of the triple which has the major emphasis. In this example, 'sumatriptan' is the major term of the three terms in the triple link:

sumatriptan -- adverse drug reaction -- disorientation (major);

When the explode and major modifiers are used together in a search, they are applied to the first term only of triple links. For example, MJEMB.EXACT.EXPLODE(SUMATRIPTAN) will return documents where 'sumatriptan' (and any of its narrower terms) is the major term of any triple link.

Another way to look at Major and Explode in triple links is as follows. The explode modifier only ever applies to the first term of a triple link, so combining this with MJEMB ensures that the major term is the first term of a triple link too. Thus:

MJEMB.EXACT(SUMATRIPTAN) returns triple links where sumatriptan may or may not be the major term. If sumatriptan is in the third position of the triple, then it won't be the one with major emphasis

MJEMB.EXACT.EXPLODE(SUMATRIPTAN) returns triple links where sumatriptan must be the major term, because it is brought to the front by the explode modifier

This means that occasionally you may see results where an exploded major term returns fewer documents than a non-exploded major term, as in this example with tacrolimus:

Tacrolimus has no narrower terms, so set 8 is returning documents where tacrolimus is the major term of a triple link; set 9 is returning documents where tacrolimus may or may not be the major term of a triple link – if it occurs at the beginning of the triple then it is the major, if it occurs at the end it is not major, and both are returned in this set.

Triple links were introduced in November 2016 and apply to relevant documents back to 2007. They are applied only to fully indexed material, not to in process documents or conference abstracts.

- **Documents from MEDLINE**
  Around 3,300 of the 5,600 journal titles covered by MEDLINE are independently indexed for Embase by Elsevier, using the usual Embase indexing policy. For articles from the remaining 2,300 MEDLINE titles (with a focus on basic biomedicine, allied health and other topics that are peripheral to the core topics of Embase), MeSH terms are mapped to Emtree to provide an index that is compatible with the Elsevier indexing. You can thus use Emtree terms to search across all documents in Embase.

  Documents which are covered by MEDLINE can be identified in the document display when the first or second entry in the Subject list is 'MEDLINE'. Those which are covered by Embase have as first or second entry 'Embase'. Those which are covered by both MEDLINE and Embase have both terms.

  Before October 8th, 2018, Embase only included complete MEDLINE documents. Since October 8th, 2018, Elsevier has included records that are sourced from Medline with the full range of **Medline document status types,** excluding some of the out of scope PubMed-not-Medline documents**.** Refer to the **Document status** note for more information

  Any records that are processed by both Elsevier and the NLM (Medline) will have the corresponding document status values from both systems.

  The Embase Indexing Guide describes in more detail the inclusion of Medline records in Embase:

  https://www.elsevier.com/__data/assets/pdf_file/0016/92104/Embase-Indexing-Guide.pdf

  Use **MEDL(YES)** and **EMBASE(YES)** to find documents covered by either source.

- **Journal List**
  A link to a complete list of journals currently available in Embase can be found on this Elsevier page:
  https://www.elsevier.com/solutions/embase-biomedical-research/embase-coverage-and-content

  In May 2020, Elsevier had permission to cover all but 50 of the 5,000+ MEDLINE journals, and these are listed at the above link.

- **Conference information**
  Embase includes conference abstracts from important biomedical, drug and medical device conferences dating back to 2009. It indexes 7,000+ conferences covering over 2.4 million conference abstracts. A link to a list of conferences covered in Embase can be found on this Elsevier page: https://www.elsevier.com/solutions/embase-biomedical-research/embase-coverage-and-content

  There are three document types for conference material:
  Conference Abstract - Abstract of a paper presented either as an oral presentation or at a poster session at a conference or symposium. Note that Elsevier does not accept conference abstract records that are not in English. Note also that Conference Abstracts are indexed automatically and do not have subheadings. (Other Embase documents are indexed by subject matter experts).

Conference Review – Review item summarizing conference abstracts presented at a single conference or symposium.
The conference abstracts and conference review usually appear soon after a conference has taken place - they may even pre-date the actual conference itself if the organizing committee has released the programme beforehand.
Conference Paper – Original article reporting data presented at a conference or symposium.

Use the DTYPE field code to search for these - e.g. **DTYPE("CONFERENCE REVIEW")** or **DTYPE("CONFERENCE ABSTRACT")** or **DTYPE("CONFERENCE PAPER").**

- **Embase French Local Literature**
  This new supplementary database was made available on Dialog in April 2019. It covers 100 French journals not included in Embase itself, specifically allowing users to monitor the French local literature for pharmacovigilance. Articles are included since January 2017 where possible. Just like Embase itself, this module is updated daily and is indexed by subject matter experts using Emtree. Subheadings and triple links are included where appropriate. Translation of the original full-text is performed by human-aided machine translation with human quality control. DOIs are available for articles in this database if provided by the publisher

- **Document status**
  'In process' documents, including Articles in Press, were formerly held in a separate database called *Embase Alert***.** In November 2016, this material was merged into *Embase* itself and *Embase Alert* was discontinued. Unlike full Embase documents, which are indexed by subject matter experts, in process material is indexed automatically and does not have subheadings. Articles in Press may also lack full bibliographic details. They are added to the database as soon as possible in order to give users fast access to the latest literature. Documents are updated when they have been fully processed through the Embase editorial system, which usually takes a few days. Most documents proceed from an in process state to a full Embase document, but if an Article in Press is never formally published, it will remain in this status.

  Documents sourced from MEDLINE also include their original MEDLINE document status values.

  Use the DSTAT field code to search for the different status types:

	EMBASE-specific values	MEDLINE-specific values (from Oct 8th, 2018)
DSTAT(NEW)	DSTAT("ARTICLE IN PRESS")	*DSTAT("Publisher (MEDLINE in Embase)")*
DSTAT(REVISED)		DSTAT("In-Data-Review (MEDLINE in Embase)")
	DSTAT("IN PROCESS")	DSTAT("In-Process (MEDLINE in Embase)")
	DSTAT(EMBASE)	DSTAT(MEDLINE)
		DSTAT("PubMed-not-MEDLINE (in Embase)")

Document Formats

Document Format	Fields	Online	Export / Download
Brief view	Title and Publication date	✓	
Detailed view	Same as Brief view plus a 3-line KWIC window	✓	
KWIC (Keyword in Context)	Detailed view plus all occurrences of your search terms, highlighted within the fields where the terms occur	✓	✓
Preview (subscribers only)	Title, Author, Publication title, Pagination, Publication date, Abstract, Subject terms	✓	
Preview (transactional)	Title, Publication date, abbreviated Abstract	✓	
Result Item Export	Article title, Author, Author affiliation, Publication title, Publication date, Publisher, Issue, Volume, Pagination, Database and Document URL		✓
Brief citation	Complete record minus Abstract and Indexing	✓	✓
Citation / Abstract	Complete record	✓[2]	✓
Custom	Choose the fields you want		✓[3]

[2] In Online-view mode, Dialog gives access to two Document Formats only: *Brief citation*, and the 'most complete' format available. Depending on the database, or the amount of data available for a record, the most complete format may be any one of *Citation*, *Citation/Abstract*, *Full text*, or *Full text – PDF*.

[3] Custom export/download format is available in the following mediums only: HTML, PDF, RefWorks, RTF, Text only, XLS.

Embase Subheadings

Embase subheadings (or qualifiers) are used to define the context of a main Emtree heading. An article indexed with "aripiprazole -- adverse drug reaction" informs the reader that the article is about the drug aripiprazole and specifically about the adverse effects of it. Emtree terms and subheadings can be selected from the online thesaurus via the link on the Advanced and Command Line search pages. For ease of reference the subheadings are also reproduced below. Subheadings can be searched as full terms, abbreviations or as a code for a group of subheadings (list of Embase subheading quick codes follows the full list below). In Embase (unlike MEDLINE) any subheading may be combined with any main Emtree heading, but not all combinations return results.

Use LNK or -- to combine a main heading with a subheading, e.g.:

EMB(ARIPIPRAZOLE -- AE)
EMB.EXPLODE("ANTIPSYCHOTIC AGENT" LNK QX)

Embase subheading	Abbreviation
adverse device effect	AM
adverse drug reaction	AE
buccal drug administration	BD
clinical trial	CT
complication	CO
congenital disorder	CN
device comparison	DC
device economics	DE
diagnosis	DI
disease management	DM
drug administration	AD
drug analysis	AN
drug combination	CB
drug comparison	CM
drug concentration	CR
drug development	DV
drug dose	DO
drug interaction	IT
drug resistance	DR
drug therapy	DT
drug toxicity	TO
endogenous compound	EC
epidemiology	EP
epidural drug administration	EI
etiology	ET
inhalational drug administration	IH
intraarterial drug administration	IA
intraarticular drug administration	AR
intrabronchial drug administration	BR
intrabursal drug administration	BU
intracameral drug administration	CL
intracardiac drug administration	IC
intracavernous drug administration	CA
intracerebral drug administration	CE
intracerebroventricular drug administration	CV
intracisternal drug administration	CI
intradermal drug administration	DL
intraduodenal drug administration	DU

Embase subheading	Abbreviation
intragastric drug administration	IG
intralesional drug administration	IL
transdermal drug administration	TD
intralymphatic drug administration	LY
intramuscular drug administration	IM
intranasal drug administration	NA
intraocular drug administration	IO
intraosseous drug administration	OS
intraperitoneal drug administration	IP
intrapleural drug administration	PL
intraspinal drug administration	SP
intrathecal drug administration	TL
intratracheal drug administration	TR
intratumoral drug administration	TU
intratympanic drug administration	TY
intraurethral drug administration	UR
intrauterine drug administration	UT
intravaginal drug administration	VA
intravenous drug administration	IV
intravesical drug administration	VE
intravitreal drug administration	VI
oral drug administration	PO
parenteral drug administration	PA
periocular drug administration	OC
pharmaceutics	PR
pharmacoeconomics	PE
pharmacokinetics	PK
pharmacology	PD
prevention	PC
radiotherapy	RT
rectal drug administration	RC
regional perfusion	RP
rehabilitation	RH
retrobulbar drug administration	RB
side effect	SI
special situation for pharmacovigilance	PV
subconjunctival drug administration	CJ
subcutaneous drug administration	SC

sublabial drug administration	SB	topical drug administration	TP
sublingual drug administration	LI	unexpected outcome of drug treatment	TM
surgery	SU		
therapy	TH		

Embase subheading quick codes

Embase quick subheading group	Abbreviation
Quick diagnosis (DI)	QD
Quick therapy (DT, RT, SU, TH)	QT
Quick toxicology (AE, TO, SI)	QX

Embase key subheadings used in triple links

Embase key subheading	Abbreviation
Adverse device effect	AM
Adverse drug reaction	AE
Device comparison	DC
Drug combination	CB
Drug comparison	CM
Drug interaction	IT
Drug therapy	DT
Side effect	SI
Special situation for pharmacovigilance	PV (new Jan 2019)
Unexpected outcome of drug treatment	TM (new Jan 2019)

Terms & Conditions

Contact**: Dialog Global Customer Support**
Email: Customer@dialog.com
Within North America **1 800 334 2564**
Outside North America **00 800 33 34 2564**