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### To Read or Not to Read— Can Clinical Practitioners Keep Up?

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While I can't cite studies that support the contention, I suspect there is some combined genetic-cultural factor that produces individuals with an almost insatiable appetite for new information. This appetite is not affected by age, location, or occupation. It is not ordinarily observed in illiterates, but then no one, to my knowledge, has studied their information-seeking habits.

Physicians as a group are probably higher than average in their information-seeking motivation. Like most "intellectuals," they read and communicate more than others. Nevertheless, in the world population of 1,000,000 medical practitioners, only 5 to 10% have that special propensity for information acquisition that I have observed throughout the world.

*Current Contents/Clinical Practice* is intended primarily for that relatively small group of doctors who enjoy browsing. Though they may protest the publication of even more "mediocre" jour-

nals, they continue to "metabolize" new information as readily as they breathe air. It is ISI®'s unique marketing task to find these individuals and provide them a means of optimizing the finite efforts anyone can devote to the literature.

It has been my long-time experience that almost nothing will deter a highly motivated reader. And if he believes some useful information can be found, then none of the presumed impediments to reading will stand in his way. For such a reader, the so-called information explosion becomes a meaningless term. Suddenly too little information exists. Saul Herner wrote about this many years ago when we were both associated with Johns Hopkins University.<sup>1</sup>

*Current Contents/Clinical Practice* is designed to help medical practitioners browse and/or search for as little or as much as they choose to cover in a particular

week. Some may choose to give the index-searching task to a secretary.<sup>2,3</sup> Others will skim every single contents page, yet never order a reprint. Others will follow-up with visits to a local library, while others will write authors for reprints. On occasion, when an especially pertinent article is noted, ISI's OATS® (Original Article Tear Sheet) hot-line will be used for instant delivery of an article that's of interest.

We harbor no illusion that CC®/CP is complete salvation for the world's medical practitioners. It is interesting to speculate on how useful *Current Contents* might be to medical missionaries in underdeveloped areas of the world, or to some harried practitioner in our own underdeveloped urban areas. My experience indicates that even the busiest practitioners can and do find time to read,<sup>4,5</sup> but only a small percentage of them are similarly motivated.

While the publishing of printed matter has never been greater, I am nevertheless concerned lest the impact of television on the younger generation has affected its desire and ability to read, though even that contention is not completely supported by documented studies. Perhaps the more sensitive among the young, that critical 5 to 10%, will properly use television as just another medium of communication which

eventually stimulates more reading. I think the increased use of *Current Contents* throughout the world indicates that people are finding the literature more rewarding than ever.

It is not, however, sufficient to recognize that a core of medical men are avid information seekers. One must also design an information tool that makes that process rewarding, and we believe CC does that at reasonable cost.

1. Herner, S. Technical information—too much or too little? *Scientific Monthly* 83:82-86, 1956.
2. Garfield, E. "A Weekly Subject Index for *Current Contents/Life Sciences*." Paper presented at the 71st Annual Meeting of the Medical Library Association, San Diego, California, June 11-15, 1972.
3. Harris, R.M. & Garfield, E. "Indexes to *Current Contents*, a new aid to complement scanning scientific literature." Paper presented at the 1972 Fall Meeting of the American Chemical Society, New York City, August 28-31, 1972.
4. Brown, E.A. How I get the meat out of 700 journals a month. *Medical Economics* 39:128-43, 1962.
5. Posen, S. & Posen, J.S. The geography of reprint requests. *J. Med Education* 44:648-54, 1969.