



# Das Prinzip "Offenheit" in der medizinischen Forschung

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# Ablauf

- „Offenheit“ in der Medizin
- Open Access
- Open Data
- Medicine 2.0

# „Offenheit“ in der Medizin

# Open... ?

- Open Access
  - Open Source
- Open Notebook Science
  - Open Medicine
  - Open Data
  - Medicine 2.0

## Also... worüber reden wir hier eigentlich?

Primärdaten

Abgeleitete Daten (e.g. Visualisierungen)

Studiendokumentationen

Methodenprotokolle

Präsentationen

Poster

Conference Abstracts

Proceedings

Anträge

Berichte

Gutachten

Discussions

Artikel

Bücher

Leitlinien

Patente

Lehrmaterialien

Dissertationen

# Benefits

- Zeitnahe Rezeption
- Leichtere Kollaboration
- Schnellerer wissenschaftlicher Fortschritt
- Transparenz
- Nachhaltigkeit
- Kosteneffizienz
- Machine-readability (e.g. data mining)
- Vielfältige Verknüpfungsmöglichkeiten
- Wahrung von Autorenrechten
- Fairness



# Hinderungsgründe

- Rechtliche Unsicherheit
  - Personen-/Datenschutz
- Competition
  - Kommerzielle Verwertungsinteressen
- Fehlende Honorierung (z.B. Extra-Impact)
  - Aufwand
- "Trägheit" von Finanzierungsstrukturen
  - Umdenkprozesse - "Macht der Gewohnheit"

# Ablauf

- „Offenheit“ in der Medizin
- **Open Access**
- Open Data
- Medicine 2.0



# Open Access: Freier Zugang zu wissenschaftlicher Literatur im Internet

## Das „alte“ System: Wo liegt das Problem?

- Eingeschränkte Reichweite
  - Eingeschränkte Autorenrechte
  - Z.T. prohibitive Kosten
- **Rechtliche, technische und finanzielle Barrieren behindern die Dissemination neuer wissenschaftlicher Erkenntnisse.**

## Entwicklung: Von der Grassroot-Bewegung zur politischen Verankerung

- arXiv.org (1991)
- PubMed Central (2000)
- Berlin Declaration (2003)
- Leibniz: Open Access Leitlinie (2007)
- Allianz der deutschen Wissenschaftsorganisationen (2008–2012)
- International: „OA-Mandate“ u.a. von NIH (2008)

# Wer profitiert von Open Access?

- Zuwendungsgeber/Bibliotheken: Beitrag zur Lösung der "serials crisis" (willkommener Nebeneffekt).
- Verlage: Werden zukunftsfähig, wenn sie schlaue, wissenschaftsfreundliche Geschäftsmodelle entwickeln.
- Gesellschaft: Weltweiter Austausch von Forschungsergebnissen wird beschleunigt.
- **Forscher: Arbeiten gewinnen durch weltweite freie Zugriffsmöglichkeit immens an Sichtbarkeit und Wirkung.**

# Einfluss von OA auf den „Impact“

- Nachweislich höhere Download-Zahlen
- Wesentlich frühzeitigere Rezeption
- Mehr Zitierungen (?)
- Etablierung neuer Journals: „Time lag“-Problem

Eysenbach G. Citation advantage of Open Access Articles. PLoS Biol 2006;4(5):e157

Davis PM et al. Open access publishing, article downloads, and citations: randomised controlled trial. BMJ 2008;337:a568

Craig ID et al. Do Open Access Articles Have Greater Citation Impact? J Informetrics 2007;1(3):239-248

## Und so funktioniert's:

- Primärveröffentlichung in OA-Journal oder als OA-Option  
= **OA Gold**
- Zweitveröffentlichung als Pre-/Postprint in Volltextarchiv  
= **OA Grün**
- Dauerhafte kostenfreie **Verfügbarkeit** im Internet
- Keine Exklusiv-**Rechteübertragung**
- Kein Unterschied im **Peer review**

## Golden Road - mit maximaler Sichtbarkeit veröffentlichen

- Entweder: Publizieren in genuinen OA-Journals:
  - z.B. BioMed Central, PloS, German Medical Science
- Oder: Artikel in Subskriptions-Journals „freikaufen“
  - “Open Choice”, Sponsored Article”, “Author’s Choice”...
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## Let's talk money! Author fees

Biomed Central	\$315-2265 (typisch: \$1470)
Blackwell	\$3000
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German Medical Science	€85-880 (typisch: €270)
Nature	\$2500-3000
Public Library of Science	\$1300-2850
Springer	\$3000
Taylor & Francis	\$3250
Walter de Gruyter	€1750



# Wer trägt die Kosten?

- „Stakeholder“:
  - Träger-/Förderinstitutionen
  - Fachgesellschaften/Fachcommunities
  - Autoren
  - Sponsoring/Werbung
- Mehrheit der OA-Journals: keine Autorenegebühren\*

# Kleine Werbeunterbrechung!

German Medical Science –  
Open-Access-Publizieren  
mit der ZB MED



# German Medical Science... ?

- medizinisches Open-Access-Publikationsportal
- E-Journals, Kongresspublikationen, Forschungsberichte
- Seit 2003 online
- PubMed/MEDLINE-indexiert:
  - *GMS German Medical Science*
  - *GMS Psycho-Social-Medicine*



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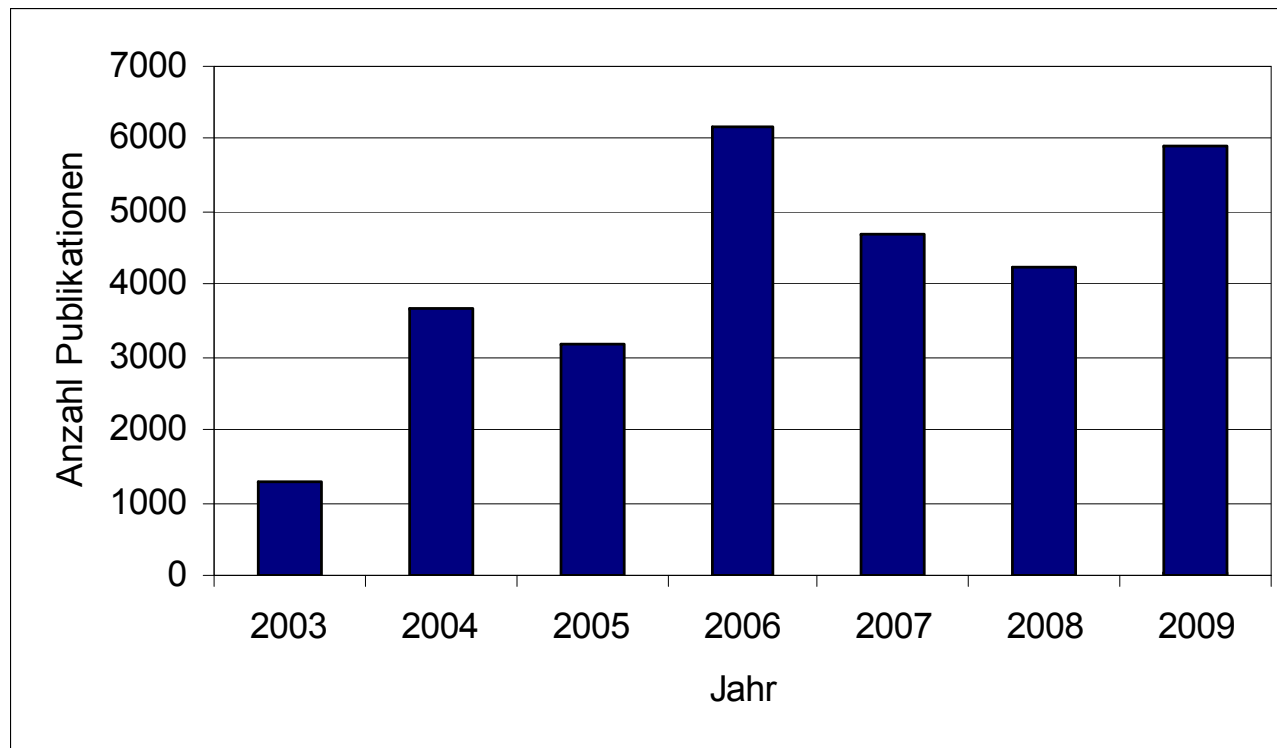
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# GMS: Entwicklung der Publikationszahlen



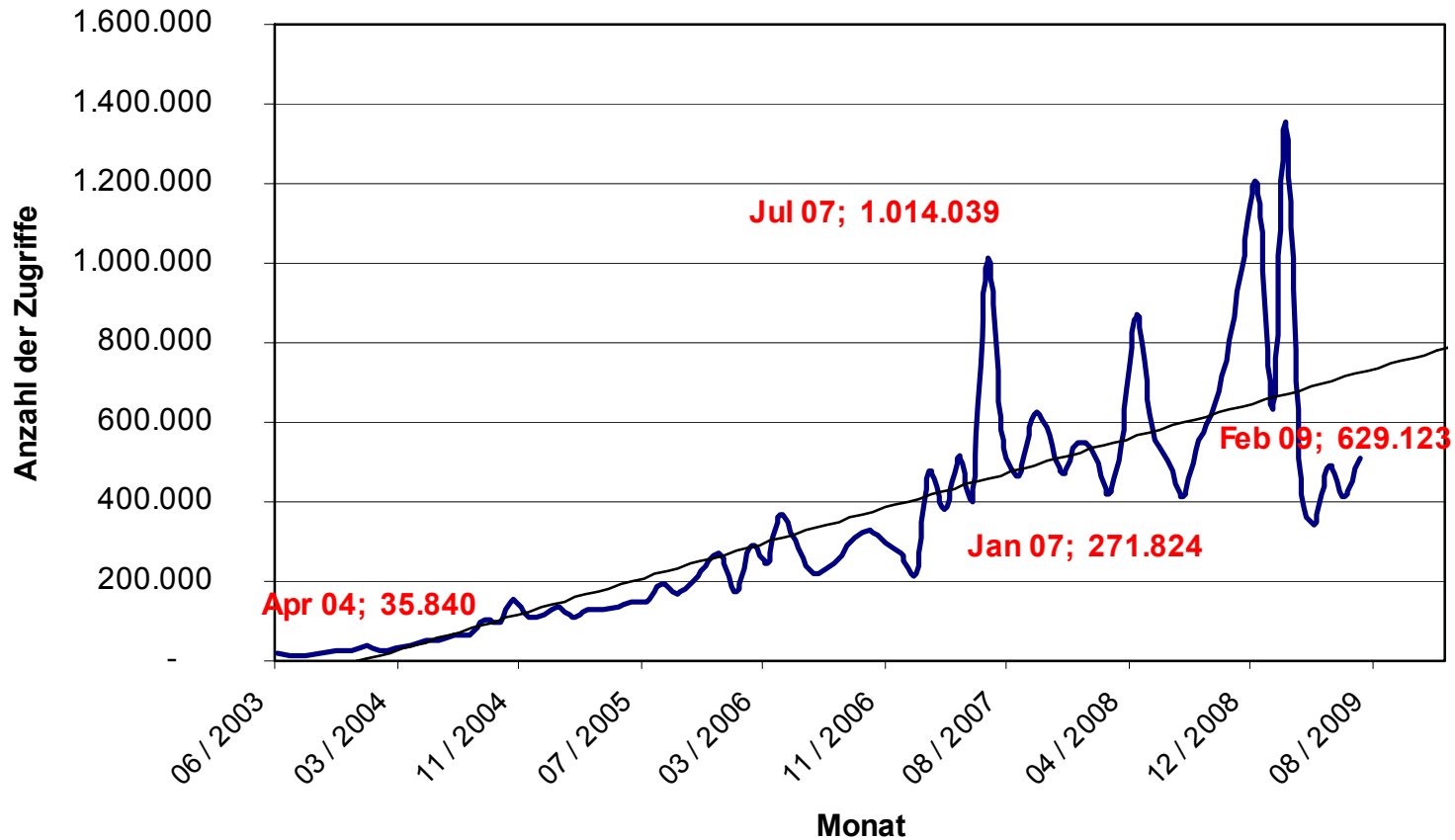


## GMS: Nutzung

- Fast 700.000 Zugriffe pro Monat (25 Mio. insgesamt)
- Davon 20% auf Journals
- 5000 Newsletter-Abos



# GMS: Entwicklung der Zugriffe



# GMS: Konditionen

- 2001–2006: durch DFG und BMGS gefördert
  - Seit 2007:
    - 30% herausgebende Fachgesellschaften  
(Publikationsgebühr: €270/Artikel, €4/Abstract)
    - 70% ZB MED & DIMDI
- Offen für neue Journals und Kongresse!



# Ende der Werbeunterbrechung!



## Green Road - mehr Sichtbarkeit im Nachhinein

- Fachliche Volltextarchive: PubMed Central, ELLiNET
- Institutionelle Volltextarchive
- Wer stellt ein?: Autoren, Bibliotheken, Repositorybetreiber, Publisher
- Rechtliche Klärung: Sherpa/ROME0

## Publisher copyright policies & self-archiving

Journal: **Nature Medicine** (ISSN: 1078-8956)  
 Publisher: **Nature Publishing Group**

These summaries are for the publishers *default* policies and changes or exceptions can often be negotiated by authors.  
*All information is correct to the best of our knowledge but should not be relied upon for legal advice.*

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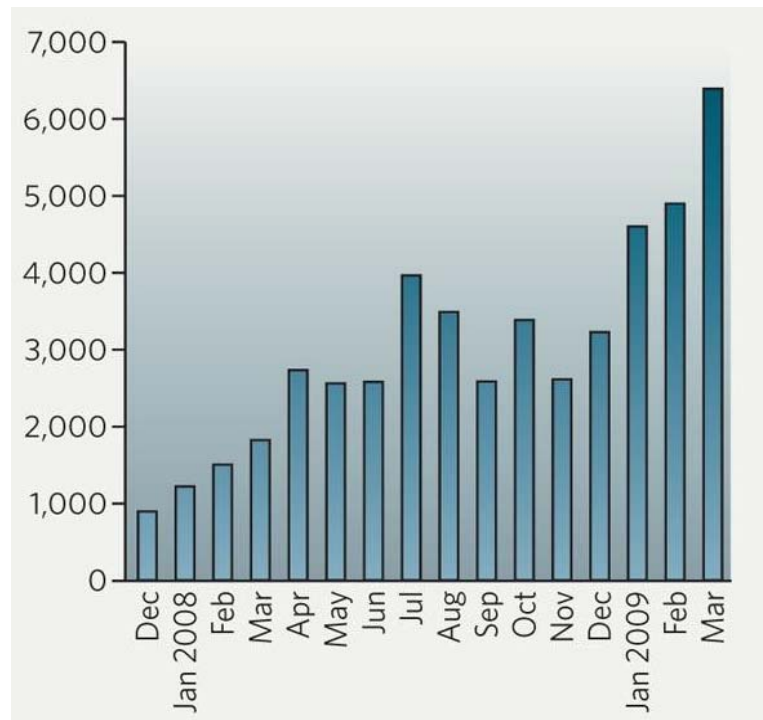
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## „Dramatic growth of Open Access – Open-access policy flourishes at NIH”



doi: 10.1038/458690a1



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# Ablauf

- „Offenheit“ in der Medizin
- Open Access
- **Open Data**
- Medicine 2.0

# Open Data: Freier Zugang zu Forschungsdaten

# Datenvielfalt

- Bilddaten
- Videodaten
- Audiodaten
- Sequenzierungsdaten
- Textuelle Daten
- Code/Software
- Datenbanken
- Numerische/tabellarische/statistische Messdaten
- Abgeleitete Daten
- etc.

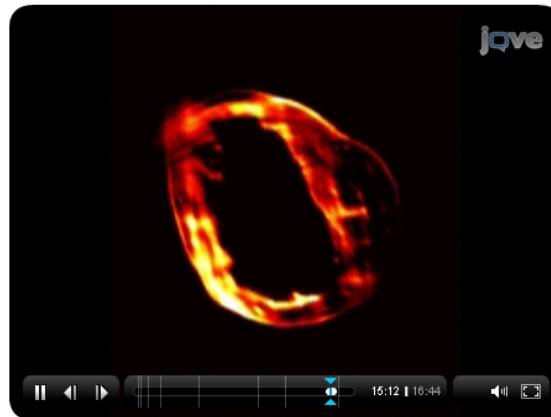
# Open Data

- DFG: Richtlinien für Gute Wissenschaftliche Praxis (1997), Workshop Forschungsdaten in Life Sciences (Anfang 2009)
- große Heterogenität
- i.d.R. Verknüpfung mit Publikationen
- neue, eigene Publikationsformen (z.B. JoVE, Earth System Science Data Journal)

## Born Normalization for Fluorescence Optical Projection Tomography for Whole Heart Imaging

Claudio Vinegoni<sup>1,2</sup>, Daniel Razansky<sup>3</sup>, Jose-Luiz Figueiredo<sup>1,2</sup>, Lyuba Fexon<sup>1,2</sup>, Misha Pivovarov<sup>1,2</sup>, Matthias Hahrendorf<sup>1,2</sup>, Vasilis Itziachristos<sup>2</sup>, Ralph Weisleder<sup>1,2</sup>

<sup>1</sup>Center for Systems Biology, Harvard Medical School, <sup>2</sup>Center for Systems Biology, Massachusetts General Hospital, <sup>3</sup>Institute for Biological and Medical Imaging, Technical University of Munich and Helmholtz Center Munich



0:05	Title
0:55	Introduction
1:49	An Optical Projection Tomography Microscope
4:51	Preparing Tissue for Tomographic imaging
9:30	Absorption Reconstructions
11:36	Fluorescent Reconstructions
15:44	Conclusion

### Abstract

Optical projection tomography is a three-dimensional imaging technique that has been recently introduced as an imaging tool primarily in developmental biology and gene expression studies. The technique renders biological sample optically transparent by first dehydrating them and then placing in a mixture of benzyl alcohol and benzyl benzoate in a 2:1 ratio (BABB or Murray's Clear solution). The technique renders biological samples optically transparent by first dehydrating them in graded ethanol solutions then placing them in a mixture of benzyl alcohol and benzyl benzoate in a 2:1 ratio (BABB or Murray's Clear solution) to clear. After the clearing process the scattering contribution in the sample can be greatly reduced and made almost negligible while the absorption contribution cannot be eliminated completely. When trying to reconstruct the fluorescence distribution within the sample under investigation, this contribution affects the reconstructions and leads, inevitably, to image artifacts and quantification errors. While absorption could be reduced further with a permanence of weeks or months in the clearing media, this will lead to progressive loss of fluorescence and to an unrealistically long sample processing time. This is true when reconstructing both exogenous contrast agents (molecular contrast agents) as well as endogenous contrast (e.g. reconstructions of genetically expressed fluorescent proteins).

### Files

This article is:  
**Free Access**

### Keywords

Bioengineering, Issue 28, optical imaging, fluorescence imaging, optical projection tomography, born normalization, molecular imaging, heart imaging

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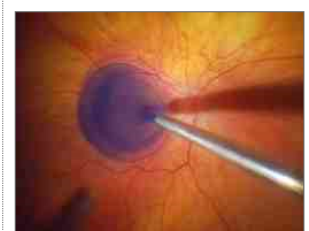
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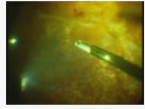
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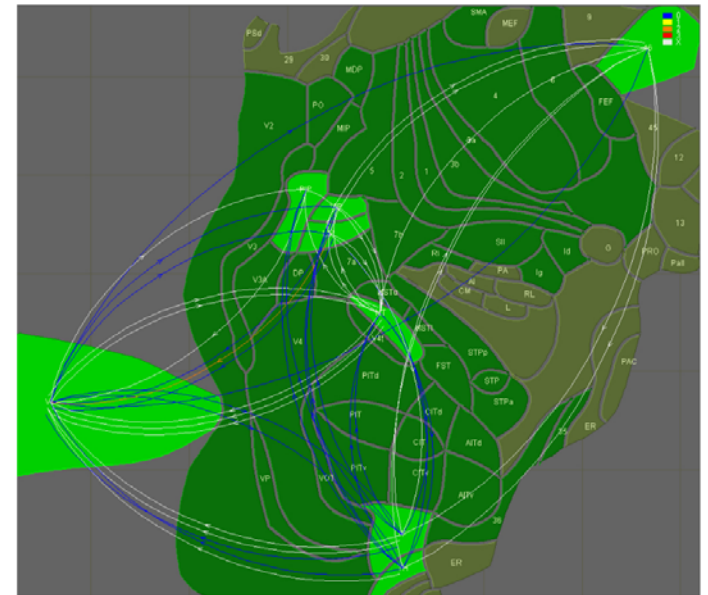
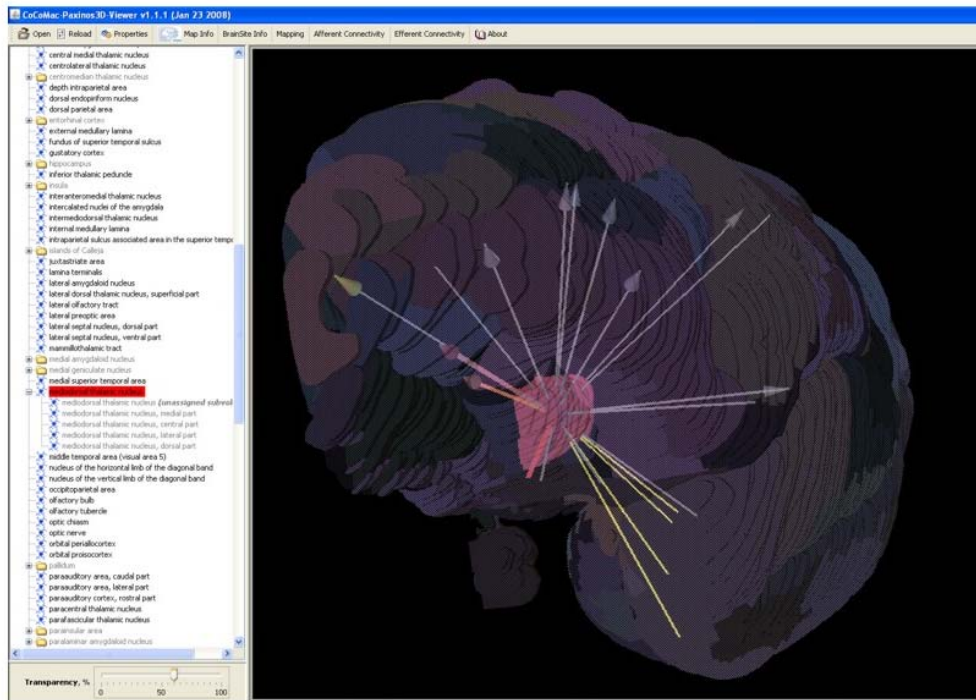
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V1		1	1	0	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	
V2	1		1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	
V3	1	1			1	1	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	1	0	0	0	0	0	0	
VP	0	1	1		1	1	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	0	0	0	0	0	0	0	
V3A	1	1	1	1		1		1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	0	0	0	1	0	0	0	0	
V4	1	1	1	1	1		1	1	1	1	1	1	1	1	1	1	0	1	0	0	0	1	1	0	0	0	1	1	0	0	0	1	0	0	1	
VOT	0	1	0	1		1					1		1																							
V4t	1	1	1	0		1		1	1														0	1	1											
MT	1	1	1	1	1	1	1	1		1	0		0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	0	0	0	0	1	1	0	
FST	0	0	1	0	1	1	1	1	1			1										1		1	1	0	0	0	0	0	0	0	0	1	1	0
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## Open Data - zu beachten:

- Qualitätssicherung
- Referenzierbarkeit (DOI)
- Gute Metadaten
- Vertrauenswürdige Archive
- Vermeidung proprietärer Formate

# Ablauf

- „Offenheit“ in der Medizin
- Open Access
- Open Data
- **Medicine 2.0**

# Medicine 2.0: digitale Wissenschafts-Kollaboration in Echtzeit

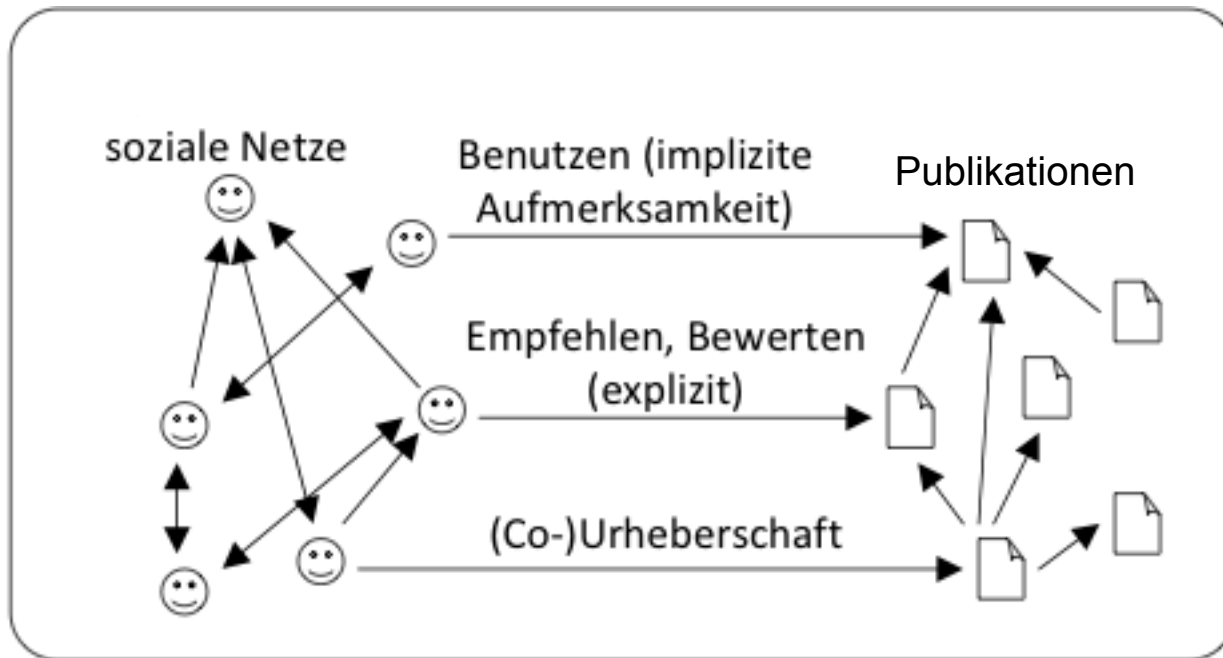
# Facetten des 2.0-Paradigmas

- Crowd Sourcing – kollektive Intelligenz
  - Interaktivität – Partizipation
    - Community-Orientierung – Kollaboration
  - Plattformunabhängigkeit – webbasiertes Arbeiten – Mobilität
- Vernetzung von Inhalten – Semantisches Web
  - Usability – Einfachheit – Unmittelbarkeit

## Medicine 2.0: Differenzierte Ansätze

- Fokus Social Network: ResearchGATE
- Fokus Literaturverwaltung: Mendeley, Zotero...
- Fokus wissenschaftlicher Diskurs: Nature Network
- Fokus Labor: OpenWetWare
- to be continued...

# Grundprinzip





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Immunology, Oct 18, 2009



**Wedding day is the most special day in your life, so be a sp...**

Stanley-Warren, Oct 18, 2009



**The Idea I have does not concern pollution restriction...in...**

Intellectual Property Forum, Oct 17, 2009



**(No worry of hernia re-appearing after surgery) The presi...**

Inguinal hernia repair without..., Oct 17, 2009

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1	Nature	291 readers
2	The New England Journal of Medicine	245 readers
3	Lancet	203 readers
4	Circulation	199 readers
5	Proceedings of the National Academy of Sciences of the United States of America	189 readers

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There have not been any recent changes.

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**Rasmus Vuori**

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## Welcome

### 2009 iGEM Teams



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## OWW Community Blog



### Referencing a DOI Within OpenWetWare

To lookup an article using a document object identifier, there's a cheap and cheerful way to do it based upon the work we did earlier to add access to pubget.

### OpenWetWare: Where DOI Begin(s)?

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But not all the time. By the time we're reading an OpenWetWare (OWW) page and notice a reference

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## Open Access + Social Web = Green Road 2.0?

- Author-upload-Feature z.B. in ResearchGATE und Mendeley
- Automatische Rechteprüfung (Sherpa/Romeo)
- Vorteil gegenüber Repositories: einfache, bruchlose Usability

# Wo geht's hin? - Trends

- „Blurring boundaries“ in der Wissenschaftskommunikation: Data Publishing – Text/Data Mining – Scientific Blogging – Open Peer Review – Semantic Publishing – Vernetzung – Crowd Sourcing
- Zunehmende Akzeptanz von Open Access
- „Openness“: whenever possible and appropriate!



# Vielen Dank für Ihre Aufmerksamkeit!

Anita Eppelin

[eppelin@zbmed.de](mailto:eppelin@zbmed.de)

ZB MED Köln



Photo: [www.highlightthehealth.com](http://www.highlightthehealth.com)