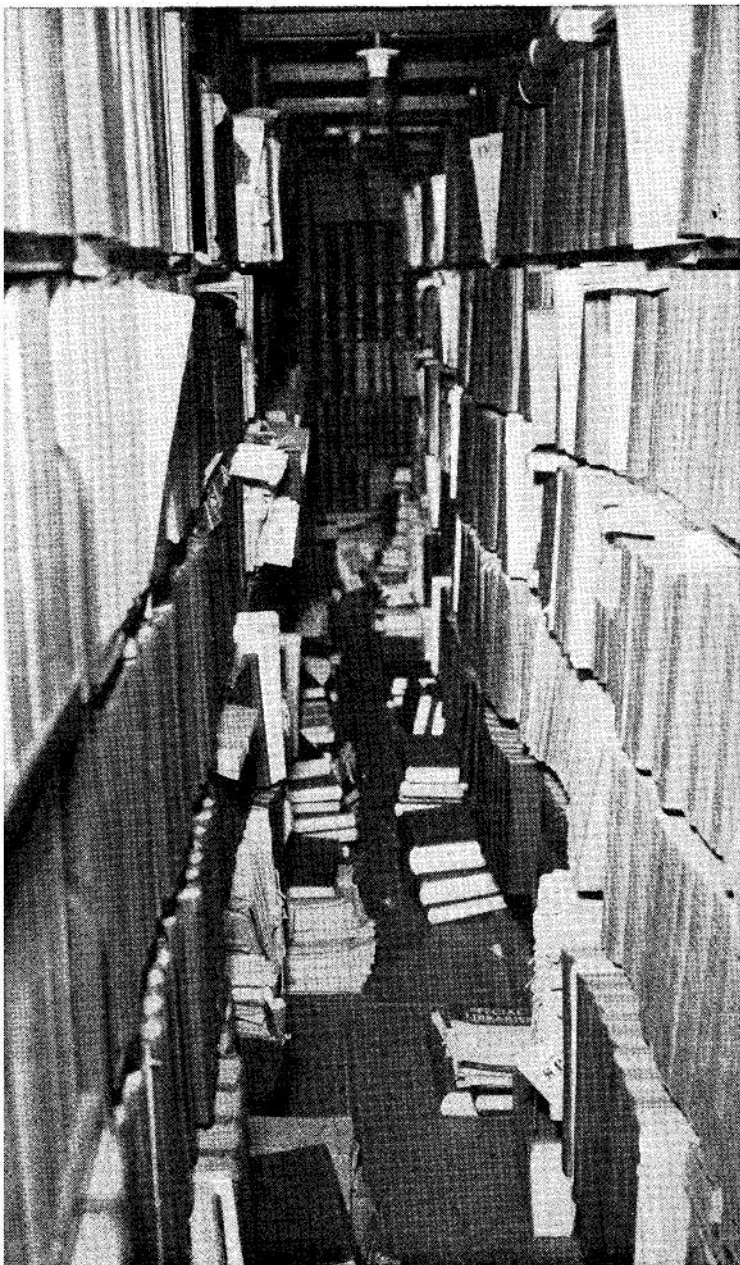


Chaos Among The Stacks



Medical libraries almost everywhere, says renowned Texas surgeon Michael E. DeBakey, are understaffed and underequipped, and collections are being destroyed by crowding and confusion. In the following article, Dr. DeBakey reports on the immediate need for drastic rehabilitative measures and outlines several ways in which medical schools, government agencies and private foundations can help to overcome the problem.

A crisis in medical libraries has occurred within the past few decades almost without our being aware of it. While we have been devoting millions to building the world's finest research institutions, staffing them with highly skilled scientists and technicians, and equipping them with costly and intricate machinery, we are allowing our medical libraries to deteriorate into inefficient, poorly staffed, badly housed, decaying repositories.

The end and the beginning of medical research is the published record, essential for training new physicians and for continuing the education of those already in practice. But, as the Deitrick report put it ten years ago, "In a nation dependent upon medical research to a greater degree than ever before, surprisingly little is being expended on the housing of the reports of that research and on making those reports available."

A large-scale national effort is needed now to rehabilitate medical school libraries. No temporary solution will suffice and no one agency can take on the job single-handedly. Not the medical schools, nor the federal and state governments, nor private foundations can assume the burden alone. The job must be cooperative.

Three needs are of immediate concern with regard to improving medical libraries: housing, working and storage space; trained library personnel; new methods of handling the growing scientific medical literature.

Overstocked And Understaffed

Housing for libraries is in a deplorable state. A 1957 survey showed that about 55% of the 45 libraries reporting were filled or had exceeded their capacity. In the 45% with space for growth, normal growth allowed for no more than five years' expansion. Libraries have usually found it necessary to store large portions of their working collections, often a great distance away.

Well-trained, imaginative, professional library personnel are hard to come by. A good recruitment program might attract more able young people into the field. Only nine schools in the U.S. give courses in some aspect of medical librarianship, and these are mostly summer courses or are offered only in alternate years. There is also a need to keep medical librarians up to date. Salaries must be made commensurate with responsibility. The median salary of medical school librarians is \$6,000.

The proper management of medical literature is complex, expensive and essential. Because expenditures have been made so frugally, medical school library collections now fall far short of what they should be. Proper maintenance has not been available, so the collections are being physically destroyed by crowding, dirt, improper heating and ventilation, and bad lighting.

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Bibliographical apparatus has become too cumbersome and expensive, and is breaking down. In 1880, there were 864 medical journals in the world; at the end of 1960, the National Library of Medicine listed 5,711 in the biomedical field. Actually, if all biomedical series were counted (annual reports, weekly statistical reports and so on), the current total would be around 14,000. A library may be assumed to double in size every 12 years. For 30 years the need for space in libraries has been deferred, until now we have reached a point at which the need must be treated as an emergency.

Col. F. B. Rogers of the NLM has stated that "A reasonable standard for a medical library capable of supporting research at its present accelerated level would be 100,000 volumes." Generally, it is felt that a good medical school library should be receiving 1,200 to 1,500 current journals. Fewer than 25% of the libraries have met the suggested standard, and this is only minimal.

Because the needs are so extensive and so urgent, they can be met only by outside help. The National Advisory Health Council has made the following recommendations to the Surgeon General, bearing in mind a planned expansion of the National Library of Medicine:

- ▶ Development of a satisfactory assistance program to permit the construction, extension and remodeling of medical library facilities throughout the country.

- ▶ Mounting of an assistance program to augment the



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book stock and journal collections of existing biomedical libraries, and to expedite their processing.

- ▶ Authorization of research grant funds for the direct cost of library research services.

- ▶ A program to train medical librarians and documentalists at a level commensurate with the needs of the nation.

- ▶ A support program to strengthen such components of the conventional communications system as indexes, abstract services and review publications.

- ▶ A program of research and development in information-retrieval systems. This would aim at tying together all medical libraries in a coordinated communications system, compatible with comparable or parallel systems which may be developed to handle literature in the physi-

cal and social sciences, and with the international system of medical libraries.

There is some feeling that libraries as we know them are a thing of the past—antiquated, inefficient and unworthy of survival—and should be replaced by some new institutional form made possible by modern technology. Perhaps there is some merit to the idea of mechanized storage and retrieval of volumes of published information. The NLM has developed a new computer indexing method for this purpose, MEDLARS (Medical Literature Analysis and Retrieval System). It produces an enlarged Index Medicus directly from magnetic tape, provides 50 recurring specialized indexes for research fields and has a demand search and retrieval facility capable of handling 100 queries a day.

The NLM has proposed support for students in medical librarianship and documentation, short-term institutes to update the skills of personnel on the job, support of these institutions and an expanded intern program.

Federal funds should be made available to existing and new medical schools to build up collections to minimum standards of 100,000 volumes and current receipt of 1,500 journals, and to support essential bibliographic apparatus. Federal funds should be appropriated to initiate a program of recruitment, education and training of medical librarians to raise their standards.

The regional reservoir library is a concept that shows great promise. One central resource library collects materials in depth and makes its resources and services available to a broad geographic area, to smaller medical libraries which can thus limit their collecting scope to the most-used class of materials, and to the general medical community.

John Shaw Billings, in 1881, said: "What is to be the result of this steadily increasing production of books? What will the libraries and catalogues and bibliographies of a thousand or even a hundred years hence be like, if we are thus to go on in the ratio of geometric progression, which has governed the press for the last few decades? The mathematical formula which would express this, based on the data of the past century, gives an absurd and impossible conclusion, for it shows that, if we go on as we have been going, there is coming a time when our libraries will become large cities, and will require the services of every one in the world, not engaged in writing, to catalogue and care for the annual product."

Controls are not the answer, at least not controls that state who can publish, how long an article may be, how many journals may exist and the like. The answer is undoubtedly to continue to try to improve our library housing, our methods of indexing and retrieving and our means of caring for the priceless documents that contain the only authoritative and permanent record of the work that is being performed so rapidly throughout the world. Our libraries are our most valuable and precise link between generations and between people working in many areas. We must protect them at any cost. But at the same time we cannot afford to stand still. There is an urgent need to revitalize these institutions for the national welfare and the benefit of all. ■