

MDMLG NEWS

Fall 2011



www.mdmlg.org

Inside This Issue

- 1 President's Message
- 2 Fall General meeting
- 3 Pharmaceutical trademarks
- 5 Where are they now?
- 7 Announcements

President's Message from JoAnn Krzeminski

Fall is here once again. It's the time for crunching leaves underfoot, cider mills, back to school, and for many librarians - subscription renewals. Needless to say, it's a busy time for all of us as we shake off the dream-induced state of our summer vacations and get back to business. While we may be busy, I hope members can take the afternoon of October 6 to join us at Oakland University for our first MDMLG meeting of the year. The program for this meeting will be comprised of a panel featuring 3 of our colleagues as they share their wisdom on the hot topics of library branding, training, and space planning. Not only will we learn something new, it will give us all a chance to check out the brand new [Oakland University William Beaumont School of Medicine](#) Library and its founding director, our very own MDMLG member, Nancy Bulgarelli. Congratulations Nancy on this great accomplishment!

The fall meeting also unofficially marks what feels like the "real" start of my term as MDMLG president. I must admit, I took this position with a little bit of apprehension. While I have worked in libraries for over 10 years, I only received my MLIS degree 6 years ago. I felt like a small fish swimming a pond of much more experienced fish. What if I cause the downfall of the 40 year old organization? What if I forget the *Robert's Rules of Order*? Tell me again, who needs to second a motion?

As you see, I got over my fear. I realized it was time for me to step up and take on a new responsibility. And as it turns out, the experienced fish are pretty helpful and encouraging. I hope this will encourage other librarians that have recently entered our profession to also take an active part in the organization, hopefully in the form of running for an Executive Board position or joining a committee.

Let's make this a great year! See you in October!

JoAnn Krzeminski
MDMLG President

MDMLG Fall General Meeting and Program

Thursday October 6, 2011

Please join us for the MDMLG General Business Meeting on **Thursday, October 6, 2011** at Oakland University.

PROGRAM: *"And the survey said . . ."*

The program will consist of three brief presentations on those "hot topics" identified by a survey of the MDMLG membership conducted earlier this year. The titles of the individual presentations are:

Information Literacy / Training - "How, When and Where You Need It @ HDGH" - Toni Janik

Marketing - "What's in a Name? First Steps to Building a Library Brand" - Gayle Williams

Space Planning - "Sprucing Up the Beaumont Library" - Janet Zimmerman

Come and learn what your colleagues are doing. There will be plenty of time for questions and discussion!

DATE: Thursday, October 6, 2011

LOCATION: Oakland University

Kresge Library, Room 100

Rochester, MI

AGENDA: 12:30pm-1:00pm – Registration
1:00-1:30pm – Business Meeting
1:30-2:00pm – Refreshments and Networking
2:00-3:30pm – Program

3:30pm - Tour of the new Oakland University William Beaumont School of Medicine and/or Kresge Library

MAP: [Oakland University Campus Map](#)

The closest parking is in lot P-36 which is located just south of Kresge Library. Parking is free, but tends to be crowded this time of year. If you cannot find a spot in a surface lot, consider parking in the structure (P-29) located on Pioneer Drive.

Hope to see you there!

MDMLG Program Committee

Pharmaceutical Trademarks

A business tries to establish a reputation for itself and its products through branding. A trademark is a quick and easy way for a consumer to distinguish a product from others in the marketplace. Most businesses trademark products or services they sell. A trademark identifies the source of the product. This can lead to protection for the consumer, since the quality or lack thereof can be traced to its manufacturer. Pharmaceutical trademarks function in the same way, but are held to a higher standard. A drug trademark must not only satisfy the requirements of the United States Patent and Trademark Office ([USPTO](#)), but has to undergo extensive regulatory review by the Food and Drug Administration (FDA).

When anyone other than a pharmaceutical manufacturer applies for a federal trademark, the procedure is straightforward. A search is done to find if there are similar marks within the class of goods or services. The search can be tricky because one must look for variant spellings, words that sound alike, foreign language translations, or similar design elements. Once the trademark is applied for, it is reviewed by a trademark examiner. The most important characteristic is *likelihood of confusion*. Would the consumer be confused between one trademark and another? This is determined by the SAM rule – whether they are alike based on sound, appearance or meaning. On this basis, Toro Rojo was rejected because it was too similar to Red Bull, both being beverages. Similar trademarks are allowed to coexist if the products are different from each other, for example, Bass shoes and Bass Ale. The designs of their marks are similar, but no one confuses them.

The process is more complicated for a pharmaceutical trademark. A drug has three names, a chemical name, a generic name and a brand name. The brand name is what is trademarked. The drug begins as a new chemical entity (NCE). Its chemical name is determined by rules set up by the International Union of Pure and Applied Chemistry (IUPAC). Many NCEs are being developed simultaneously, because only a few will survive the long process of becoming a marketable drug. As soon as one is suspected to have pharmacological activity, a patent is applied for, and the NCE is submitted to the United States Adopted Name Council ([USAN](#)) to be assigned a generic name. This group is a mixture of representatives of the American Medical Association (AMA), the American Pharmaceutical Association (APhA), and the FDA. As most pharmaceuticals would be distributed worldwide, the generic name is submitted to the World Health Organization (WHO) for final approval.

The brand name is a trademark, submitted to the USPTO and international trademark agencies. Unlike other trademarks, it must also be reviewed by the FDA. The review is complex and covers many areas. One of the largest concerns is that *likelihood of confusion* could be deadly.

Medication errors are common, and the chances increase with similar sounding names. In 1999, an 8 year old boy died when given methadone instead of methylphenidate, a drug for attention deficit disorder. Flomax, a drug for enlarged prostate, has been confused several times with Volmax, a drug for bronchospasm. Other mistakes have involved confusion between Serzone and Seroquel, or Lodine and iodine, to name a few. Sometimes there is confusion between brand and generic, such as Toradol and tramadol. The FDA maintains a database of reported [medical errors](#).

Sometimes confusion can be subtle, and can come as a surprise if it appears. On the surface, the diabetes drug Avandia and the anticoagulant Coumadin appear very different. The medications were being mixed up thanks to poor handwriting. The first “A” in Avandia could look like a “C” if not fully formed, and the final “a” sometimes appeared as an “n”. The FDA takes this into account in its review of potential trademarks.

The pharmaceutical companies have a large army of legal professionals to handle the process of trademark from start to finish. Specialized trademark attorneys have to search worldwide, not only for confusingly similar marks, but for stems which could confer unintended meaning. A term with no meaning in any language is ideal – such as Xanax. A team of ‘naming specialists’ spends its time coming up with a multitude of possible names. At least three names are submitted for a drug to the FDA, with hopes that at least one will survive the review.

As stated earlier, the USPTO will allow similar trademarks if the goods or services are different from each other. This does not necessarily stop a company from bringing suit against someone who has a similar trademark, even if the mark is granted. Large companies defend their trademarks vigorously. Viagra is the best example. Its trademark was granted to Pfizer in 1996. Once the product launched in 1998, several Viagra trademarks were applied for and granted, based on dissimilar products. There was a Viagra sailplane, a Viagra golf club, a Car Viagra for an engine cleaning tube, and some herbal formulas. It is interesting to see in the USPTO database that all were cancelled and abandoned in less than a year. The process begins with a letter to ‘cease and desist’ using the mark. The company must then make a decision if they want to pursue facing a large pharmaceutical company in court. In one case, an herbal formula for erectile dysfunction named Vaegra, was issued an injunction to stop using the name, despite being granted a federal trademark. Most of the other cases did not make it to court. To this day, Pfizer is in litigation around the world, defending the Viagra trademark, along with others that it owns.

A trademark can last forever if it is renewed every ten years. It is only when the patent expires on a drug that generics follow, using the same generic name conceived twenty years previous. A brand name drug, once off patent, can’t command the same price as it did as when it had a monopoly. It may still carry the brand name to distinguish it from another manufacturer, or could be abandoned as unprofitable. Most modern drugs keep the trademark alive, so that it can’t be used by generic manufacturers.

Update: In the article I wrote for the Summer issue, *Medical and Biotechnology Patents*, I discussed the appeal of the case of patentability of BRCA 1 and 2 genes. In July 2011, the appeals court ruled that “*companies can obtain patents on the genes but cannot patent methods to compare the gene sequences*”. News of this case can be followed at [here](#)

Last week, on September 16, 2011, the President signed into law the [Leahy-Smith America Invents Act](#). Buried in its many provisions is this: “*Patents on “Human Organisms: The Act prohibits issuance of a patent claim “directed to or encompassing a human organism.” The Act does not appear to define the expression “directed to.”* (Summary)

Mary Kordyban
Assistant Manager
Business, Science & Technology Department
Detroit Public Library
mkordyban@detroitpubliclibrary.org

Where are they now?

The option to participate in MDMLG as an emeritus member began in 2001 when a third level of membership was added to the by-laws. This third level of membership enabled students and emeritus members to belong to MDMLG for a reduced cost. This year MDMLG has five emeritus members: **Agnes Bognero**, **Carole Gilbert**, **Sylvia Graham**, **Marilyn Kostrzewski**, and **Sandra Studebaker**. I spoke with all five and asked each the same four questions: What was your work history? What are you up to in retirement? What do you miss most about medical librarianship? Why did you decide to remain an emeritus member of MDMLG?

Agnes Bognero began her career as a medical technologist at Mt. Carmel Hospital. In addition to practicing as a medical technologist, she taught medical technology for twenty years at Mercy College. After earning her library degree, Agnes worked for six months as an information broker for Advanced Information Consultants. Upon leaving Advanced Information Consultants, she worked part time at Henry Ford Hospital's Sladen Library for ten years. Agnes retired in 2000 to spend time with her husband who has Alzheimer's disease. Agnes is keeping busy subbing at the Livonia Public Library; working one day per week at the Henry Ford Museum as a cataloging librarian, where she has been working on a special project for the last 15 years; and volunteering at the Salem/South Lyon Public Library maintaining a portion of their gardens and serving as a page and shelf reader. She has held the position of trustee for the Salem/South Lyon library and served on their Building and Grounds Committee as well. As if that wasn't enough, Agnes is the primary caregiver for her husband. When asked what she misses most about medical librarianship, Agnes replied that she misses the people at the Sladen Library. She also said that she misses the challenge and intellectual stimulation of searching for answers to reference questions. Agnes retains her MDMLG membership because it is a link to her chosen profession, and she likes to keeping up with the members and reading about what is going on within the organization.

Carole Gilbert began her career in librarianship at the Henry Ford Nursing School Library after graduating from Wayne State University. When Carole took over the library, one of the first projects she tackled was to re-class the entire collection. From the Henry Ford Nursing School Library, Carole moved to Metropolitan Hospital in Detroit, where she served as Director for two years. It was here that Carole became one of the first librarians to use professional software. Carole was then hired as Director of the Helen DeRoy Library, Providence Hospital, where she remained for 23 years, until her position was eliminated in 2008. Presently, Carole teaches an acquisitions class in the Library Technician program at OCC. She also continues as the Editor for the *Journal of Hospital Librarianship*. She spends her free time at her cottage, quilting (Carole donates 15-20 quilts a year to the [Infant Mortality Project](#) based in Highland Park), and attending her grandkids sporting events. As for medical librarianship, Carole most misses working with the docs and medical people in general; there was always something new happening. Carole maintains her MDMLG membership (MLA and Midwest as well) for the camaraderie and friendships she has developed over the years as well as to maintain contacts for articles for the [Journal of Hospital Librarianship](#).

Sylvia Graham began her career in librarianship in 1987, after her kids were a bit older. She did a practicum at General Motors and Ford Motor Company while in library school, and upon graduation, Sylvia was hired by the Henry Ford Hospital to work as a reference librarian in the Sladen Library. In 2001, Sylvia retired after 11.5 years in the Sladen Library. Since her retirement, Sylvia and her husband have become snowbirds, and they escape the Michigan winters for the warmth of Florida for seven months of the year. Sylvia volunteers in a parochial grade school library in Florida one day per week. She is also a member of the Red Hat Society and serves as the group's Secretary. She is active in the Senior Citizen's Club at St. Paul's Church in St. Petersburg, and she spends time with her son and grandkids in St. Petersburg. When asked what she misses most about medical librarianship, Sylvia said she misses the

challenge of answering reference questions and searching for information. She also misses the people she used to work with at the Sladen Library. Sylvia has retained her MDMLG membership in order to keep up with what is going on in the profession. She also enjoys attending the summer luncheons.

Marilyn Kostrzewski began her professional career as a nurse, first in med-surg, then obstetrics where she worked in postpartum, recovery, and the newborn nursery. From floor nursing, Marilyn became a health educator and taught women's health, human sexuality, and AIDS awareness. She began her library career as a library tech at St. Mary's Hospital in Livonia. After receiving her MLS, Marilyn went to work at Oakwood Hospital where she was the library Director for thirteen years. She retired this past July. Marilyn had decided when she retired that she was not going to make any major decisions regarding future commitments for six months. She has been keeping busy working with the Girl Scouts in Ann Arbor, attending to her garden, canning, participating in a Bible study, and traveling (she'll be heading to Italy in the near future). Additionally, now that she has retired, she will be able to pursue her other interest, genealogy. When asked what she was going to miss most about medical librarianship, Marilyn said she would miss the people and their diversity. Plus, she enjoyed being on the cutting edge of new information and technology. Marilyn decided to retain her MDMLG membership because librarianship was her profession, and she doesn't want to give it up completely. She wants to have the opportunity to network and take advantage of the continuing education offered by MDMLG.

Sandra Studebaker spent 24 years working fulltime at St. Joseph Mercy in Mt Clemens. She then became a part time contract employee in Pontiac and at Beaumont, Troy. From there, Sandra went to work at Shiffman-Karmanos, where she reconfigured the library, both the collection and the library's physical space. Sandra retired in 2001. Since her retirement, Sandra has been "up to her eyeballs" in genealogy. She volunteers at the Family History Center in Roseville, a branch of the Family History Library located in Salt Lake City. She "works" there fulltime. Sandra stated that her new patrons want the oldest information available as opposed to her old patrons (the medical community) who wanted the newest information available. Ironically, she went from one end of the spectrum to the other. Sandra is also on the Board of Directors for the Studebaker Family National Association in Tipp City, OH. She is working to computerize previously published volumes of Studebaker history and doing additional research to fill holes in the earlier research. When asked what she misses the most about medical Librarianship, Sandra answered "the controlled vocabulary"; genealogy does not have one. She also misses the collegiality that occurred between the libraries and librarians. Sandra retains her MDMLG membership because "it was an option". She enjoys attending the summer luncheon, seeing old friends, and attending the interesting programming. She also likes receiving the communications from MDMLG so she can keep up with what is going on in the profession.

As evidenced by the above profiles (and in contrast to General MacArthur's "old soldiers"), retired librarians don't fade away ... they volunteer.

Jill Turner
University of Detroit Mercy
School of Dentistry Library
turner1ja@udmercy.edu

ANNOUNCEMENTS

Future meetings

February 9, 2012

April 2012

June, 2012

September, 2012

Get Involved!

The Newsletter Committee is looking for a contributor to provide ongoing commentary on health sciences libraries. Whether on your own place of employment or on the business in general, share your views with your colleagues. Pretend it's a blog, only more 20th Century. Could even be anonymous.

[Contact Marilyn Dow](#) or call at 313-494-6905

Nominations are being accepted for the **Thomson Reuters/Frank Bradway Rogers Information Advancement Award**, which recognizes outstanding contributions in the use of technology to deliver health science information, in the science of information, or in the facilitation of the delivery of health science information. The recipient will receive a cash award of \$500 and recognition at the 2012 Annual MLA Meeting. All nominations are due November 1, 2011. Visit

http://www.mlanet.org/pdf/awards/rogers_nom_20090714.pdf for more details and the nomination form. Contact Susan Foster-Harper, Jury Chair, (smfost1@email.uky.edu) with questions.

Please join us for the [2011 Midwest Chapter / Medical Library Association Annual Meeting](#), to be held in Indianapolis, October 8th-11th. The meeting will be held at the [Indianapolis Marriott Downtown](#).

Registration for 2011 Midwest Chapter MLA/Indiana Health Sciences Librarians Association Annual Meeting is available now. You can register online, by check or onsite during the conference.

Newsletter Committee 2011 - 2012

Marilyn Dow, editor	dowmk@udmercy.edu
Andrea Kepsel	akepsel@mail.lib.msu.edu
Mary Kordyban	mkordyban@detroitpubliclibrary.org
Jill Turner	turnerja1@udmercy.edu
Cathy Phillips	cphillips@tu.edu
Valerie Reid (Wehmaster)	vreid1@hfhs.org