



**Faculté de Médecine
Comité des thèses
Année 2012**

Séminaire-Atelier n°1

**Les Moteurs de
Recherche**

Avant l'utilisation des moteurs de recherche

- Élaborer une stratégie de recherche
- Choisir des mots-clefs appropriés
- Interroger les principaux outils bibliographiques

Formuler la question

La question sera différente en fonction du problème, mais il faudra toujours se demander :

De qui est-il question ? **(Qui ?)**

Que cherche-t-on à faire ? **(Quoi ?)**

Pourquoi faire ? **(Pourquoi ?)**

Où chercher ?

Pour trouver

- des informations, des données, des faits ?
 - **Moteurs de recherche** : Google, PubMed
 - **Encyclopédies en ligne** :
Encyclopedia universalis, Wikipedia
- des sites ?
 - Annuaire de sites web** : Cismef

Pour trouver

- des articles ?

Moteurs de recherche spécialisés : Google Scholar, Scirus

Bases de données, portails de périodiques : BDSP, Medline, EM-Consulte, DOAJ, Science direct, ISI Web of science , Google scholar...

- des ouvrages ou des thèses ?

Catalogues de bibliothèques : exemple: Sudoc, catalogue de la bibliothèque de Paris-Sud

Ce que l'on peut consulter librement de chez soi

- Moteurs de recherche, annuaires de sites
- Catalogues de bibliothèque
- Base de données gratuites : BDSPP, PubMed
- Portails de périodiques gratuits

Périodiques gratuits en texte intégral

- PLoS Medicine : <http://medicine.plosjournals.org/>
- PubMed Central : <http://www.pubmedcentral.nih.gov/>
- Free medical journals :
<http://www.freemedicaljournals.com/>
- Highwire : <http://highwire.stanford.edu/>
- DOAJ : <http://www.doaj.org/>
- HAL (archives ouvertes du CNRS) : <http://hal.ccsd.cnrs.fr/>
- Scientific Commons : <http://www.scientificcommons.org/>

Ce que l'on ne peut consulter qu'à la bibliothèque ou avec un abonnement

Des ressources auxquelles la bibliothèque est abonnée mais qui n'offrent pas de consultation à distance :

- certains portails de périodiques et bases de données : EM-Consulte
- certaines revues électroniques

Passons à la pratique !

- Exemple de recherche sur PubMed
- Exemple de recherche avancée sur Google

Pour le sujet suivant :

« Les anti-inflammatoires non stéroïdiens sont-ils plus efficaces que les antalgiques dans la gonarthrose du sujet âgé ? »

les mots-clefs Mesh sont :

- Anti-inflammatoires non stéroïdiens = anti-inflammatory agents, non steroidal
- Antalgiques = analgesics
- Gonarthrose = osteoarthritis, knee
- Sujet âgé = aged (« limit »)

Search: MeSH

Limits Advanced search Help

analgesics

Search

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1: Analgesics

Compounds capable of relieving pain without the loss of CONSCIOUSNESS.

Year introduced: 1978

Subheadings: This list includes those paired at least once with this heading in MEDLINE and may not reflect current rules for allowable combinations.

- administration and dosage
- adverse effects
- agonists
- analogs and derivatives
- analysis
- antagonists and inhibitors
- biosynthesis
- blood
- cerebrospinal fluid
- chemical synthesis
- chemistry
- classification
- contraindications
- diagnostic use
- economics
- epidemiology
- history
- immunology
- isolation and purification
- metabolism
- pharmacokinetics
- pharmacology
- physiology
- poisoning
- radiation effects
- standards
- supply and distribution
- surgery
- therapeutic use
- therapy
- toxicity
- urine

Restrict Search to Major Topic headings only.

Do Not Explode this term (i.e., do not include MeSH terms found below this term in the MeSH tree).

Entry Terms:

- Analgesic Drugs
- Drugs, Analgesic
- Anodynes
- Analgesic Agents
- Agents, Analgesic
- Antinociceptive Agents

See Also:

- [Anesthetics](#)
- [Pain](#)

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[Peripheral Nervous System Agents](#)

[Sensory System Agents](#)

Analgesics

[Analgesics, Non-Narcotic](#)

[Anti-Inflammatory Agents, Non-Steroidal](#) +

[Analgesics, Opioid](#)

[Dentin Desensitizing Agents](#)

[Narcotics](#)

[All MeSH Categories](#)

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- Select PubMed under the Links menu to retrieve all
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- cerebrospinal fluid chemical synthesis chemistry classification contraindications diagnostic use economics epidemiology history
- immunology isolation and purification metabolism pharmacokinetics pharmacology physiology poisoning radiation effects standards
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- Antinociceptive Agents

See Also:

- [Anesthetics](#)
- [Pain](#)

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All: 1

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1: Analgesics

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- Editorial
- Letter
- Meta-Analysis
- Practice Guideline

Languages

- English
- French
- German
- Italian
- Japanese

Species

- Humans
- Animals

Sex

- Male
- Female

Subsets

- AIDS
- Bioethics
- Cancer
- Complementary Medicine
- Core clinical journals

Ages

- Adult: 19-44 years
- Middle Aged: 45-64 years
- Middle Aged + Aged: 45+ years
- Aged: 65+ years
- 80 and over: 80+ years

Text Options

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J Am Osteopath Assoc. 2007 Nov;107(10 Suppl 6):ES21-7.

Managing osteoarthritic knee pain.

Barron MC, Rubin BR.

Division of Rheumatology, Department of Internal Medicine, University of North Texas Health Science Center, Fort Worth-Texas College of Osteopathic Medicine, 855 Montgomery St, Fort Worth, TX 76107-2553, USA.

Abstract

Osteoarthritis is one of the most common forms of arthritis seen in primary care practice. Pain associated with this condition is the chief complaint of most patients, prompting them to seek medical attention. Pain can originate from the synovial membrane, joint capsule, periarticular muscles and ligaments, and periosteum and subchondral bone, among other sources. Although osteoarthritis is traditionally thought of as a noninflammatory type of arthritis, inflammatory mechanisms can be present. Therefore, management of osteoarthritic pain involves both nonpharmacologic and pharmacologic modes of therapy. Nonpharmacologic approaches include osteopathic manipulative treatment, physical therapy, exercise, use of assistive devices, and weight reduction. Pharmacologic options may be topical, intra-articular, or oral in route of administration and include acetaminophen, nonsteroidal anti-inflammatory drugs, and opioids. Patients often benefit from combinations of therapeutic modalities. Although pain relief is a chief motivator for patients with osteoarthritis to seek medical attention, a secondary benefit of successful treatment is slowing the decrease in patients' quality of life.

PMID: 17986674 [PubMed - indexed for MEDLINE] [Free Article](#)

Publication Types, MeSH Terms, Substances

Publication Types:

- [Case Reports](#)
- [Review](#)

MeSH Terms:

- [Acupuncture Therapy](#)
- [Adjuvants, Immunologic/therapeutic use](#)
- [Aged](#)
- [Algorithms](#)
- [Analgesics, Opioid/therapeutic use](#)
- [Anti-Inflammatory Agents, Non-Steroidal/therapeutic use](#)
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Substances:

Related citations

- [Review](#) Management of osteoarthritic knee pain. [J Am Osteopath Assoc. 2005]
- [Review](#) Knee osteoarthritis management therapies. [Pain Manag Nurs. 2000]
- [Review](#) A 60-year-old woman considering acupuncture for knee pain. [JAMA. 2007]
- [Review](#) Osteoarthritis: current concepts in diagnosis and mana [Am Fam Physician. 2000]
- [Review](#) Treatment options for osteoarthritis. [Orthopedics. 2005]

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Conclusion : quels réflexes pour faire une recherche documentaire ?

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- Trouver les mots-clefs correspondants
- Interroger les bons outils : Cismef, PubMed, Hinari.....