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MEDLINE VS EMBASE

Prior to starting a search, it is essential to choose the most appropriate database. The principal sources used to search topics related to biomedicine and health Medline and Embase.

What are their characteristics?

	Medline[1]	Embase[2]
Focus	Biomedicine and health	Broad biomedical scope with in-depth **coverage of drugs and pharmacology**
Produced by	US National Library of Medicine	Elsevier
Access	Available free of charge via PubMed OR Through institutional subscription via Ovid. Available via MUHC libraries portal muhclibraries.ca > Quick Links section	Through institutional subscription. Available via MUHC libraries portal muhclibraries.ca > Quick Links section
Content	Journal articles, mostly from peer-reviewed journals	Journal articles, mostly from peer-reviewed journals + **conference abstracts since 2009**
# of records	Over 20 million	Over 27 million, **including all Medline records**
# of journals (2012)[3]	Approximately 5600	Approximately 8000**, including Medline unique journals**
Journal origins (2012)	40,5% North America 48,5% Europe	33,8% North America 49,7% Europe

[1] http://www.nlm.nih.gov/pubs/factsheets/medline.html
[2] http://www.embase.com/info/
[3] http://fr.slideshare.net/rocheam/embase-contentandcoverage23-may2012

The searcher should also be familiar with differences in the establishment of subject headings in each database. These differences impact the way we search and the results.

	Medline MeSH[4]	Embase Emtree[5]
# of terms	Over 26 000	Over 60,000 (of which **more than 30,000 are drugs and chemicals**)
# of subheadings	83	78 (of which **64 are drug subheadings including 47 routes of drug administration**)
Synonyms	213 000[6]	260 000 (incl. over 175 000 drug synonyms)
Definitions	Extensive scope notes and history notes	No definition because, according to Elsevier, "natural language terminology means that you don't need to know "how" terms are defined in Emtree"[7]
Thesaurus update	Annually Drug terms are included when they become established	**3 times per year** Drug terms are included early in the drug development process
# of terms per article	10-20	**3-4 major terms, and up to 50 minor terms**.[8]
		Medline-derived articles are not indexed with Emtree terms. However MeSH terms are mapped to Emtree terms to provide indexing compatible with Embase indexing.

When searching information related to drugs, Embase offers more options than Medline. In addition, it is currently the most exhaustive biomedical literature database since Medline unique records are included in it.

However, the extensive coverage and deeper indexing of articles of Embase has drawbacks. If you don't need an extensive search, you may want to:

- Use subheadings to qualify the searched terms
- Search for your main term with the "major" status (also called focus in Ovid).

Whether you are wondering which resource to use or how to do a search, your librarians are available to respond to questions or provide you with any help that you need. Contact us.

[4] MeSH = Medical Subject Heading
[5] http://cdn.elsevier.com/assets/pdf_file/0019/127333/Embase_Emtree-and-Mesh-Whitepaper.pdf
[6] http://www.nlm.nih.gov/pubs/factsheets/mesh.html
[7] http://www.elsevier.com/online-tools/embase/emtree
[8] http://cdn.elsevier.com/assets/pdf_file/0009/126873/Embase-indexing-guide-2012.pdf