DDFU/DRUGU (Derwent Drug File)

DDFU Derwent Drug File Standard
DRUGU Derwent Drug File for Subscribers
(Former closed files DDFB/DRUGB are integrated)

Subject Coverage

All aspects of drugs:

- Analysis
- Biochemistry
- Galenics
- Metabolism
- Pharmacokinetics
- Pharmacology
- Structure-Activity Relationships
- Synthesis
- Therapeutics and Adverse Effects
- Toxicology

File Type

Bibliographic

Features

Thesaurus	Controlled Term (/CT)		
Alerts (SDI)	Weekly or monthly (weekly is the default)		
CAS Registry Number® Identifiers	☐	SLART	☑
Keep & Share	☑		

Record Content

- Bibliographic information, Derwent's abstract (and extension abstract in file DRUGU only), and controlled term indexing.

File Size

More than 2.7 million records (11/2022)

Coverage

1964–present

Updates

Weekly

Language

English

Database Producer

Clarivate
Friars House, 160 Black Friars Rd.
London SE1 8EZ
United Kingdom

Sources

- 1,100 Medical and scientific journals and conference proceedings

User Aids

- Derwent Drug File Thesaurus *
- Online Helps (HELP DIRECTORY lists all help messages available)
- STNGUIDE

* available from the producer and online

Cluster

- ALLBIB
- AUTHORS
- BIOSCIENCE
- CORPSOURCE
- FORMULATIONS
- MEDICINE
- PHARMACOLOGY
- TOXICOLOGY

STN Database Cluster information:
http://www.stn-international.com/en/customersupport/customer-support#cluster+%7C+subjects+%7C+features

Search and Display Field Codes

Fields that allow left truncation are indicated by an asterisk (*).

Search Field Name	Search Code	Search Examples	Display Codes
Basic Index* (contains single words from title (TI), controlled term (CT), index term (IT), abstract (AB), and extension abstract (ABEX))	None or /BI	S ANTI-TUMOR(P)TOXIC EFFECT# S CYCLOPHOSPHAMIDE	TI, AB, ABEX **(1)**, CT, IT
Abstract*	/AB	S (DNA AND PROTEIN)/AB	AB
Abstract, Extension* **(1)**	/ABEX	S ?PHENYLETHER?/ABEX	ABEX **(1)**
Accession Number	/AN	S 1994-00609/AN	AN
Author	/AU	S TEELMANN K/AU	AU
Availability of Document **(2)** (Reprint Address)	/AV	S HARVARD UNIV/AV	AV
Classification Code **(2)** (code and text)	/CC	S 73/CC S TRIAL PREPARATIONS/CC	CC
Controlled Term **(3,4)** (limited by roles)	/CT	S MARROW-DISEASE/CT S MARROW-DISEASE *AE/CT (P)CYCLOPHOSPHAMIDE *AE/CT	CT
Corporate Source **(2)**	/CS	S NIPPON ROCHE/CS	CS
Derwent Drug Registry Name	/DDRN	S FALIMINT/DDRN	CT
Document Type (code and text)	/DT (or /TC)	S JOURNAL/DT S J/DT	DT
Entry Date **(6)**	/ED	S L8 AND ED>20220901	ED
Field Availability	/FA	S L7 AND AB/FA	FA
International Standard (Document) Number (CODEN and ISSN)	/ISN	S 0020-7136/ISN S IJCNAW/ISN	SO
Index Term **(7)**	/IT	S THIOPHENE/IT	IT
Journal Title	/JT	S INT J CANCE?/JT	SO
Language (ISO code and text)	/LA	S L7 AND DE/LA S GERMAN/LA	LA
Location **(2)**	/LO	S (BASLE OR BASEL)/LO S KANAGAWA JAP?/LO	LO
Multipunch Code **(1,8)**	/MPC	S MCI-154 *PI/MPC	MPC
Publication Year **(6)**	/PY	S 1990-1992/PY	SO
Source (contains journal title, ISSN, CODEN, collation, and reprint address)	/SO	S INT J CANCE?/SO S IJCNAW/SO S 0020-7136/SO	SO
Subject Heading (code and text)	/SH	S S/SH AND L10 S ADVERSE EFFECTS/SH	SH
Title*	/TI	S COVID 19 PANDEMIC/TI	TI
Update Date **(6)**	/UP	S L8 AND UP>20221001	UP

(1) This field is available for display in the Derwent Subscriber file DRUGU only
(2) Search with implied (S) proximity is available in this field.
(3) Field available for data since 1983, a thesaurus is available in this field.
(4) There are 9 roles available in field /CT to limit a search to a particular aspect of a drug or a disease: AE Adverse Effects, DI Drug Interactions, DM Drug Metabolism, FT Further Term (assigned when no other role assigned), OC Other Context, PH Pharmacology, RC Reference Compound, RN Registry Name, TR Treatment. Controlled terms concerning the same drug in a record are linked by (P) proximity.
(6) Numeric search field that may be searched using numeric operators or ranges.
(7) Field available for data until 1983.
(8) Search with implied (P) proximity is available in this field. Multipunch codes concerning the same drug in a record are linked by (L) proximity.

Derwent Drug File Thesaurus

The Derwent Drug File Thesaurus is available online in field /CT (Controlled Term). All relationships codes can be used with both the EXPAND and SEARCH command.

Field	Relationship Code	Content	Search Examples
/CT	ALL	All Associated Terms (BT, SELF, USE, UF, SEE, NEW, OLD, TN, EC, CN, RT, NT, NOTE)	E LOBAPLATIN+ALL/CT
	AUTO (1)	Automatic Relationship (SELF, USE, UF, SEE, NEW, OLD, TN, EC, CN, NT)	E CLOPIDOGREL+AUTO/CT
	BT	Broader Terms (also BT1, BT2 etc. possible)	E LEGIONNAIRE-DISEASE+BT/CT
	HIE	Hierarchy Terms (BT, SELF, NT)	E PNEUMONIA+HIE/CT
	NT	Narrower Terms (also NT1, NT2 etc. possible)	
	PFT	All Preferred and Forbidden Terms	E CLOPIDOL+PFT/CT
	RT	Related Terms (see also)	E XYLAMIDE+RT/CT
	UF	Used for (Preferred and Forbidden Terms)	E FORMALDEHYDE+UF/CT
	USE	Use Forbidden and Preferred Terms	E FORMALIN+USE/CT

(1) Automatic Relationship is SET OFF. In case of SET REL ON, the result of EXPAND or SEARCH without any relationship code is the same as described for AUTO.

DISPLAY and PRINT Formats

Any combination of formats may be used to display or print answers. Multiple codes must be separated by spaces or commas, e.g., D L1 1-5 TI AU. The fields are displayed or printed in the order requested.

Hit-term highlighting is available for all fields. Highlighting must be ON during SEARCH to use the HIT, KWIC, and OCC formats.

Format	Content	Examples
AB	Abstract	D TI AB 1-4
ABEX **(1)**	Abstract Extension	D ABEX
AN	Accession Number	DIS AN
AU	Author	D AU TI 1-10
AV	Availability of Document (Reprint Address)	D TI AV 1-5
CC	Classification Code	D CC
CS	Corporate Source	D TI CS AB
CT	Controlled Term)	D CT
DDRN **(2)**	Derwent Drug Registry Name	D DDRN
DT (TC)	Document Type	D DT
ED **(2)**	Entry Date	D AN ED
FA	Field Availability	D AN FA
ISN **(2)**	International Standard (Document) Number	D JT ISN
IT	Index Term	D IT
JT **(2)**	Journal Title	D JT
LA	Language	D LA
LO	Location	D CS LO
MPC **(1)**	Multipunch Code	D MPC
PY **(2)**	Publication Year	D PY
SH	Subject Heading	D SH
SO	Source	D TI AU SO 1-10
TI	Title	D TI 5
UP **(2)**	Update Date	D UP
ABS	AN, AB, ABEX **(1)**	D ABS
ALL	AN, TI, AU, CS, LO, SO, AV, LA, DT, AB, SH, CC, CT, IT, FA	D ALL
IALL	ALL, Indented with text labels	D IALL
BIB	AN, TI, AU, CS, LO, SO, AV, LA, DT, FA	D BIB
IBIB	BIB, indented with text labels	D IBIB
IND	AN, SH, CC, CT, IT, MPC **(1)**	D IND
MAX	AN, TI, AU, CS, LO, SO, AV, LA, DT, AB, ABEX **(1)**, SH, CC, CT, IT, MPC **(1)**	D MAX
SCAN **(3)**	TI, CC, CT	
TRIAL (TRI, SAM, SAMPLE, FREE)	AN, TI, CC, CT, IT	D TRIAL
HIT	Hit term(s) and field(s)	D HIT
KWIC	Up to 50 words before and after hit term(s) (KeyWord-In-Context)	D KWIC
OCC	Number of occurrences of hit term(s) and field(s) in which they occur	D OCC

(1) This field is available in the Derwent Subscriber file DRUGU only.
(2) Custom display only.
(3) SCAN must be specified on the command line, i.e., D SCAN or DISPLAY SCAN.

SELECT, ANALYZE, and SORT Fields

The SELECT command is used to create E-numbers containing terms taken from the specified field in an answer set.

The ANALYZE command is used to create an L-number containing terms taken from the specified field in an answer set.

The SORT command is used to rearrange the search results in either alphabetic or numeric order of the specified field(s).

Field Name	Field Code	ANALYZE/ SELECT (1)	SORT
Abstract	AB	Y	N
Abstract Extension	ABEX **(2)**	Y	N
Accession Number	AN	Y	N
Author	AU	Y	Y
Availability of Document (Reprint Address)	AV	Y	Y
Classification Code	CC	Y	Y
CODEN	CODEN	N	Y
Controlled Term	CT	Y	N
Corporate Source	CS	Y	Y
Derwent Drug Registry Name	DDRN	Y **(3)**	N
Document Type	DT (TC)	Y	Y
Entry Date	ED	Y	Y
Field Availability	FA	Y **(3)**	Y
International Standard (Document) Number	ISN	Y **(4)**	Y
International Standard Serial Number	ISSN	N	Y
Index Term	IT	Y **(6)**	Y
Journal Title	JT	Y	Y
Language	LA	Y	Y
Location	LO	Y	Y
Multipunch Code	MPC **(2)**	Y	N
Occurrence Count of Hit Terms	OCC	N	Y
Publication Year	PY	Y	Y
Source	SO	Y **(5)**	N
Subject Heading	SH	Y	Y
Title	TI	Y (default)	Y
Update Date	UP	Y	Y

(1) HIT may be used to restrict terms extracted to terms that match the search expression used to create the answer set, e.g., SEL HIT TI.
(2) This field is available in the Derwent Subscriber file DRUGU only.
(3) SELECT HIT and ANALYZE HIT may not be used with this field.
(4) Selects or analyzes CODEN and ISSN with /ISN appended to the terms created by SELECT.
(5) Selects or analyzes CODEN and ISSN with /SO appended to the terms created by SELECT.
(6) Field available for data until 1983

Sample Records

DISPLAY IALL

ACCESSION NUMBER: 2022-23958 DRUGU
TITLE: Worldwide management of hepatocellular carcinoma during the COVID-19 pandemic.
AUTHOR(S): Inchingolo R; Acquafredda F; Tedeschi M; Laera L; Surico G; Surgo A; Fiorentino A; Spiliopoulos S; de'Angelis N; Memeo R
CORPORATE SOURCE: Univ.Athens-Nat.+Kapodistrian
LOCATION: Bari, Italy
SOURCE: World J.Gastroenterol. (2021), Volume 27, Number 25, pp. 3780-3789, 42 refs., 1 Tab.
ISSN: 1007-9327
AVAILABILITY: F Miulli Gen Reg Hosp, Dept Intervent Radiol Unit, Str Prov 127 Acquaviva Santeramo, Bari, Italy, I-70021. (Inchingolo R, e-mail: riccardoin@hotmail.it).
LANGUAGE: English
DOCUMENT TYPE: Journal
ABSTRACT: Worldwide management of hepatocellular carcinoma during coronavirus disease 2019 (COVID-19) pandemic is reviewed with reference to: surveillance; interventional radiology; surgery; oncology; and radiotherapy. Drugs discussed are lenvatinib, sorafenib and bevacizumab. Results suggest that COVID-19 pandemic has strongly impacted management of oncological patient due to reduction of inpatient beds and reallocation of nurses and doctors to COVID departments that are rapidly developed in each hospital to face pandemic. Despite this unexpected reorganization of hospitals, necessity to continue to manage patients with hepatocellular carcinoma has required continuation of multidisciplinary management while reducing risk of COVID-19 negatively affecting short and long-term oncological outcome.
SUBJECT HEADING: T THERAPEUTICS; B BIOCHEMISTRY
CLASSIFICATION CODE: 14 Enzyme Inhibitors; 51 Chemotherapy-clinical; 69 Reviews
CONTROLLED TERM: ADVANCED *TR; LIVER *TR; HEPATOPATHY *TR; HEPATOMA *TR; NEOPLASM *TR; IN-VIVO *FT; CASES *FT; REVIEW *FT; CYTOSTATIC *FT; DRUG-COMPARISON *FT; COMB. *FT; ALONE *FT; ANGIOGENESIS *FT; ANGIOGENESIS-INHIBITOR *FT; PROTEIN-TYROSINE-KINASE-INHIBITOR *FT; VESSEL *FT
[01] MAIN-TOPIC *FT; CYTOSTATICS *FT; TR *FT
[02] LENVATINIB *TR; SORAFENIB *TR; BEVACIZUMAB *TR; TR *FT

DISPLAY ALL of PRE-1983-RECORD

AN 1974-36436 DRUGU
TI METAL IONS AND COMPLEXES IN ORGANIC REACTIONS. PART XVIII. STRUCTURAL VARIATIONS IN THE PRODUCTION OF POLYCYCLIC HETEROCYCLIC SYSTEMS BY IRON/II/-PROMOTED CYCLISATIONS OF NITRO-SUBSTITUTED PRECURSORS.
AU BACON R G R; HAMILTON S D
LO BELFAST,U.K.
SO J.CHEM.SOC. PERKIN TRANS.1 1974, NO.16, (1970), 5
DT Journal
SH C CHEMISTRY

CC 19 Heterocyclics
IT THIOPHENE COND.RING DIFF.THIENO 2,3-B - IMIDAZOLE IMIDAZO 1,2-A -QUINOXALINE AMIDINE ARYLAMINE 4-ANILINOBENZO G -PTERIDINE ACRIDINE ARYLKETONE ACRID-9-ONE 3-NITRO-2-CF. -4- 4-PYRIDYLAMINO PYRIDINE NITROARENE 1-O-NITROPHENYL-PYRAZOLE ETC. SYNTH.

DISPLAY MAX

AN 2022-23962 DRUGU
TI Therapeutic Efficacy of Spironolactone for Central Serous Chorioretinopathy.
AU Han J Y; Kim Y J; Choi E Y; Lee J; Lee J H; Kim M; Byeon S H; Kim S S; Lee C S
CS Univ.Yonsei
LO Seoul, South Korea
SO Yonsei Med.J. (2022), Volume 63, Number 4, pp. 365-371, 32 refs., 2 Fig. 2 Tab.
ISSN: 0513-5796
AV Yonsei Univ, Severance Hosp, 50-1 Yonsei Ro, Seoul, South Korea, 03722. (Lee C S, e-mail: sklee219@yuhs.ac).
LA English
DT Journal
AB This interventional, open-label, retrospective study evaluated the outcomes, recurrence rates and safety of p.o. spironolactone (Aldactone; Pfizer) in management of central serous chorioretinopathy (CSC) in 103 patients. Central macular thickness and subretinal fluid height notably decreased after spironolactone at all time points. Old age, history of intravitreal bevacizumab injections and poor initial visual acuity were factors associated with recurrence. Visual acuity notably improved in chronic CSC patients, but not at other evaluation periods in both acute and chronic CSC patients. Subretinal fluid resolution (including partial or complete resolution) was associated with complete- and partial-responders or complete responders at last follow-up. In conclusion, p.o. spironolactone results in anatomical improvements in both acute and chronic CSC with excellent safety profiles.

ABEX Methods
103 Patients (77 male, mean age 51.5 yr) with CSC received p.o. spironolactone (50 mg/day b.i.d. for 3 mth).
Results
Mean duration of follow-up was 48.6 wk and mean duration of spironolactone therapy was 15.5 wk. Central macular thickness decreased from 395.4 uM at baseline to 320.9, 292.5, 275.3 and 249.9 uM at 1, 3 and 6 mth after treatment and last visit. Complete resolution of subretinal fluid was achieved in 13.1, 33.7, 52.5 and 81.2% of patients at 1, 3, and 6 mth and last visit. In non-recurrence patients, central macular thickness and subretinal fluid showed notable improvement after spironolactone treatment at all timepoints. Subfoveal choroidal thickness showed notable change at 3 and 6 mth and at the last visit. In recurrence patients, central macular thickness and subretinal fluid height showed notable improvement at all timepoints, similar to those in non-recurrence patients, but unlike those in non-recurrence patients, both best-corrected visual acuity and subfoveal choroidal thickness showed no notable change after spironolactone at all timepoints in recurrence patients. A notable decrease in subfoveal choroidal thickness was observed at 3 mth in acute CSC patients, while it was observed at 1, 3, and 6 mth in chronic CSC patients. Percentage of eyes with complete subretinal fluid resolution gradually increased in both acute and chronic CSC patients. 2/77 Male patients developed gynecomastia at 2 and 3 mth after treatment. After discontinuation of drugs, their symptoms resolved. One patient experienced mild elevation of serum creatinine 6

mth after taking spironolactone, which returned to normal after discontinuation of the medication. (L25)
SH T THERAPEUTICS; S ADVERSE EFFECTS
CC 35 Adverse Reactions; 62 Ophthalmological
CT [01] SPIRONOLACTONE *TR; SPIRONOLACTONE *AE; ALDACTONE *TR; ALDACTONE *AE; PFIZER *FT; SEROUS *TR; CHORIORETINOPATHY *TR; GYNECOMASTIA *AE; NEPHROPATHY *AE; ALOPECIA *AE; ACUTE *TR; CHRON. *TR; MAMMA-DISEASE *AE; HAIR *AE; ALDOSTERONE-ANTAGONISTS *FT; ANGIOGENESIS-INHIBITORS *FT; DIURETICS *FT; IN-VIVO *FT; CASES *FT; P.O. *FT; RETROSPECTIVE *FT; OPHTHALMOLOGICAL-AGENT *FT; ALDOSTERONE-ANTAGONIST *FT; TR *FT; AE *FT; SPIRONOLA *RN

DISPLAY BIB

AN 2022-23953 DRUGU
TI Fibroblast growth factor receptor: A systematic review and meta-analysis of prognostic value and therapeutic options in patients with urothelial bladder carcinoma.
AU Parizi M K; Margulis V; Lotan Y; Mori K; Shariat S F
CS Univ.Tehran-Med.Sci.; Univ.Vienna-Med.; Univ.Karlova; Univ.Jordan; Univ.Cornell; Univ.Texas-Syst.; Univ.Jikei-Med.; Univ.Sechenov
LO Vienna, Austria; Tehran, Iran
SO Urol.Oncol.-Semin.Orig.Investig. (2021), Volume 39, Number 7, pp. 409-421, 81 refs., 3 Fig. 3 Tab.
ISSN: 1078-1439
AV Med Univ Vienna, Comprehens Canc Ctr, Vienna, Austria. (Shariat S F, e-mail: sfshariat@gmail.com).
LA English
DT Journal
FA AB; ABEX; AV; CC; CT; DDRN; JT; SH; TI