

Newsletter of

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## Cataloging in the History of Medicine Division, NLM\*

by John B. Blake

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In the beginning (at the National Library of Medicine) was John Shaw Billings and the <a href="Index-Catalogue">Index-Catalogue</a>
—and we still rely on it daily. However, I assume that all who read this are familiar with the <a href="Index-Catalogue">Index-Catalogue</a>, so I will jump rapidly to 1946 when the <a href="Library">Library</a> began implementing a program to recatalog its entire collection. Up to that time it still did not use such no longer innovative devices as an alpha-numerical classification system and call numbers for the orderly arrangement of books. Some years ago this program was essentially completed for substantial monographs of the 19th and 20th centuries and for serials, but not for the bulk of the pamphlet collection or the dissertations.

At the same time that the Cataloging Division (now the Cataloging Section of Technical Services Division [TSD]) began that project for post-1800 material in Washington, the History of Medicine Division (HMD), then located in Cleveland, began recataloging the pre-1801 imprints (and those post-1800 imprints that fall within the Library's definition of Americana set forth in the NLM Classification under WZ 270). For a variety of reasons progress at first was slow, and by 1962, when HMD was reunited with the rest of the Library in its new building in Bethesda, only about 4,000 books had in fact been cataloged. Since then the cataloging rate has been greatly speeded up and in some respects simplified, with the following results. A full catalog of 16th century imprints (4808 items), prepared by Richard J. Durling, and a short-title catalog of 18th century imprints excluding dissertations (about 25,000 items) have been published. (A catalog of incunabula, prepared by Dorothy M. Schullian, was published in 1950, before the present cataloging program began.) Initial cataloging of the 17th century imprints has been completed and a catalog is now being prepared for publication by Peter Krivatsy.

It is expected to contain about 12,000 to 13,000 items; it should be ready for the printer within another two years. Cataloging of the 18th century dissertation collection is nearing completion (about 15,000 items), and we expect to start planning soon for the publication of a special catalog of this group of material. The published catalogs, of course, are intended for the benefit of interested persons everywhere. Inhouse, when I joined HMD in 1961, one had to look in eleven different files and catalogs to find the mainentry records of all pre-1801 imprints. With minor exceptions that are rapidly being eliminated, it is now necessary to search, I am pleased to say, in only one. This file is the card catalog in HMD, containing all pre-1801 imprints. It is separate from NLM's main card catalog, which contains only post-1800 imprints cataloged since 1946.

Soon after this project was started, the A.L.A. Cataloging Rules for Author and Title Entries, 2nd ed. (Chicago, 1949) came into general use in American libraries, and these were the rules of entry used in HMD. Descriptive cataloging followed the standard Library of Congress (LC) Rules (Washington, 1949) with some local modification. Considerable flexibility was feasible, especially in description, since the cataloging was intended only for our own card and independently published catalogs and not for a national computer-based network where it is more important that two libraries holding the same book describe it, if possible, precisely the same way. With the advent of the Anglo-American Cataloging Rules (Chicago, 1967), HMD introduced modifications in some entries, particularly of corporate bodies formerly listed under place, but did not change its descriptive methods. HMD has not, for example, used the new punctuation, nor has it ordinarily included a transcription of the author's name in the body of the description. TSD, on the other hand, has from the start almost fully accepted AACR, including the modifications in descriptive cataloging set forth in the revised Chapter Six issued in 1974. Since 1965, post-1800 works cataloged at NLM-

<sup>\*</sup>Based on an informal presentation to the Association of Librarians in the History of the Health Sciences at its meeting in Boston, May 2, 1980. Copyright is not claimed for this article.

most, of course, are current imprints — have been entered into CATLINE, but the computer has not been used in cataloging works printed before 1801.

HMD classifies early books according to the NLM Classification (WZ 240-270), which essentially separates them by century of printing and then by author. We do not do subject cataloging. This decision antedates my arrival at NLM and I do not know what the original reasons were. That policy has continued and I would justify it for the NLM collection on grounds that (1) it is timeconsuming and we lack sufficient personnel; that (2) it is in any case virtually impossible to do intelligent subject cataloging of early books using NLM's standard Medical Subject Headings; and that (3) existing bibliographies and catalogs, from Index-Catalogue back to Champier if you will, already provide far more detailed and far better guides to the early literature than we could produce today. I recognize, of course, that the situation may be quite different in a medical school or other library with a smaller collection, a local clientele including beginners in medical history, and a teaching responsibility; under such circumstances I would argue that subject cataloging should be essayed.

This year the situation is changed. The new second edition of AACR imposes on the library community a number of changes in the form of personal and corporate names used as entries and in the choice of main entry - changes that are drastic in their effect on a card catalog but, at least in my opinion, generally trivial in their direct benefit to libraries' patrons. I will concede that I tend to think of a certain Greek physician as Galen rather than Galenus, but this has never hampered my search for his works, and the same applies even to Muhammad Ibn Zakariya, Abu Bakr, al-Razi, commonly known as Rhazes. Consistency in the use of the same name for the same person may be considered essential, but the same cannot be said for the particular form that some committee has decided is "best." One can only hope that increasing international standardization and automation will lower the national cost of cataloging, enhance communication among libraries, and improve retrieval, thereby benefiting users in the long run. Meanwhile, the immediate result, at NLM as at many other large research libraries including LC, is the unavoidable necessity of closing the existing card catalog on January 1, 1981, when the new rules go into effect. From that date TSD will add no new cataloging to NLM's main card catalog. In addition, NLM will accept those options in the new rules that are chosen by LC, so that NLM's and LC's descriptive cataloging as well as form and choice of entry will be the same at last. NLM will also work toward the use of the MARC format, which differs in a number of ways from that used in CATLINE. On the other hand, for the immediate future anyway, NLM will continue to differ from LC by using its own classification system for medicine and the preclinical sciences (it already uses LC classification for other disciplines) and its own subjectheading system. To find newly cataloged books after

January 1, 1981, it is expected that on-site users of NLM will have to use either CATLINE or some form of computer-output microform (COM).

As part of the program for closing, and in all probability for eventually eliminating, the main card catalog, NLM has already embarked on a program of entering its existing shelflist records back to 1801 (except WZ 270) into its machine-readable CATLINE store. This store already contained all cataloging records of post-1800 material prepared since 1965, including all currently received serials. When the task is completed (estimated for 1983), records for some 270,000 monographs, 20,000 pamphlets, and 30,000 analytics printed between 1801 and 1964 will have been added to the 200,000 records already in CATLINE, along with the remaining noncurrent serials. Volumes printed before 1871 are located in HMD, the rest are in the general collection.

It will be important to remember, especially for those interested in the history of medicine, that this retrospective conversion of the existing shelflist omits about 50,000 monographs and 20,000 dissertations printed before 1801 and about 130,000 pamphlets and 260,000 dissertations printed between 1801 and 1950. All of this omitted material is now housed in HMD. The primary file for pre-1801 material, as I have already mentioned, is HMD's card catalog. The post-1800 segment is recorded in the Index-Catalogue, series 1-5, and, in part, in the "old public catalog"—the remnants of the card catalog that was closed when the recataloging project started in 1946.

How will this project and the new rules generally affect cataloging in HMD? New post-1800 acquisitions are being added to CATLINE already, and this will continue. At present, AACR 1 is used; after January 1, HMD will follow AACR 2, in accordance with general NLM policy. Shelflisted material printed 1801-1870 will be added to the computer store under the retrospective conversion project, but there are no present plans to modify the form or choice of entry to conform to AACR 2 unless the name comes up again for current cataloging. Nor are there any plans now to computerize or otherwise modify the old public catalog records. Among other reasons, the existing records are so far inconsistent not only with AACR 1 or AACR 2 but even internally that it would require handling and recataloging each of nearly 400,000 pieces — all of which are already listed in the Index-Catalogue. Even the most ardent exponent of computerization might find this difficult to justify, although it is possible that computerization of selected portions of this collection might be considered at future date.

HMD's more immediate problem is what to do about pre-1801 imprints. If the collection were static, there would be no problem: we could simply close the catalog. However, we must somehow accommodate a few hundred new acquisitions of early books each year,

together with the modern books added to our reference shelves. There are at present no plans to enter retrospectively material that is, or will be, in the century and dissertation catalogs recently published or currently planned. Therefore it will be necessary to maintain the HMD card catalog for the foreseeable future. At the same time it is obvious that HMD cannot with the resources now or likely to become available revise its entire existing catalog to make it conform to AACR 2. Having worked for nearly twenty years to consolidate the records from eleven different files into one, I would be reluctant to start a new one. Cataloging to be done after January 1 will have to conform to AACR 2 and at least for the next few years we will have to find some way to interfile the new with the old. I do not anticipate any major intellectual difficulties, although I do expect some inconvenience and added labor when Aristoteles becomes Aristotle and Moses ben Maimon becomes Maimonides. We have not yet decided in detail how to handle Galenus when he is metamorphosed into Galen, but I trust that somehow we will be able to avoid erasing "us" from 2,500 cards. Need I add how thankful I am that Hippocrates (4,000 cards) does not change? The new rules will also introduce some changes in our purely descriptive cataloging, but these do not ordinarily affect filing and are of minor significance for a card catalog, which can accept most such discrepancies readily, however displeasing they may be to a tidy mind.

NLM has a century-old tradition, however, of making its cataloging records available to the library and user community at large, as exemplified in the Index-Catalogue and its successors, right down to its present Current Catalog and online data base CAT-LINE. HMD has adhered to this policy, most recently through the current series of century catalogs. This kind of publication is becoming increasingly slow and expensive, however, and it would seem desirable that in the future HMD also make its new cataloging available through CATLINE. This would provide users outside the library with a constant updating of HMD's holdings of early books and of new cataloging information not available in our published catalogs - information now available only in our card catalog. It would also make the publication of supplements much easier and cheaper. Aside from the fact that as part of NLM it is obligated to do so, this possibility of joining a national network is, of course, the most important reason for HMD to adopt AACR 2, both for form and choice of entry, and the new descriptive rules based on AACR 2 and ISBD(A) that are being put into final (?) form at LC, although I have yet to discover what other advantage for the primary users of HMD's collection the new rules may have over those employed by John Shaw Billings and Robert Fletcher when they began to publish the Index-Catalogue one hundred years ago.

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## ALHHS doings...

BUSINESS/PLEASURE Our two meetings this spring in Boston and Bethesda were productive of both business and pleasure. In this issue are presented Dr. Blake's pleasurably businesslike account of past and present developments at NLM-HMD in respect to cataloging of historic materials, as presented at Boston. It is also pleasant to the Editor and her colleagues from the early days of ALHHS to report herein our current membership of 60. In the next issue, we expect to give ourselves the pleasure of reporting other presentations from both Boston and Bethesda.

QUESTIONNAIRE ENCLOSED Nancy Zinn has asked us to include with this mailing a questionnaire on cataloging of special collections as conducted by or for members of this Association. She especially asks that we respond as early as convenient, and that we identify ourselves and our collections on the

ORAL HISTORY OF MEDICAL LIBRARIANSHIP For the past three years MLA has supported an oral history program to docu-

ment the history of health science libraries and MLA. To date project members have interviewed 15 distinguished medical librarians including Gertrude Annan, coeditor of the 3d edition of the Handbook of Medical Library Practice, and Brad Rogers, first director of NLM.

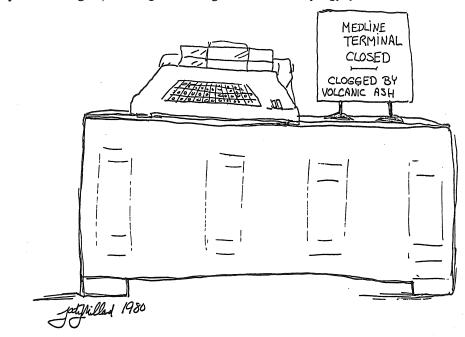
The Project's director since its inception has been Dr. Estelle Brodman, who, with Nancy Zinn, has been the principal interviewer. Dr. Brodman has developed a Manual of Operations and a set of forms needed to handle legal aspects of the interview process. Also available is an interview schedule, a group of questions to be asked of all interviewees.

NLM has recently awarded the committee a grant which will enable continuation of the project for the next three years.

Copies of interviews taped so far, with a computer-produced master index, have been deposited in MLA Archives, and may be borrowed free of charge from William K. Beatty, MLA archivist. The committee hopes that this material will be used by scholars interested in the history of medical librarianship and related subjects — for example, women's history. Dr. Brodman has already published an article based on this material ("Education and Attitudes of Early Medical Librarians....") in Journal of Library History.

WALTER L. NECKER With profound regret, we record the death of our member Walter L. Necker, formerly Librarian, Biomedical Libraries, University of Chicago. In the next issue, we expect to publish a fuller notice of his work.

Once again we are pleased to be able to offer a sight of ourselves in cartoon. As a minority — even a <u>depressed</u> minority sometimes — within the the larger minority of librarianship in general, it cannot but reassure us to see ourselves and our tools pictured, thus reminding ourselves and the world outside that we do, in fact, exist. Our kind cartoonist is Jody Millard again, and again her agent is Frank Gyorgyey.



I NEED SOME INFORMATION ON THE CURATIVE POWERS OF THE PRIMITIVE INDIAN MEDICINE MAN...







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