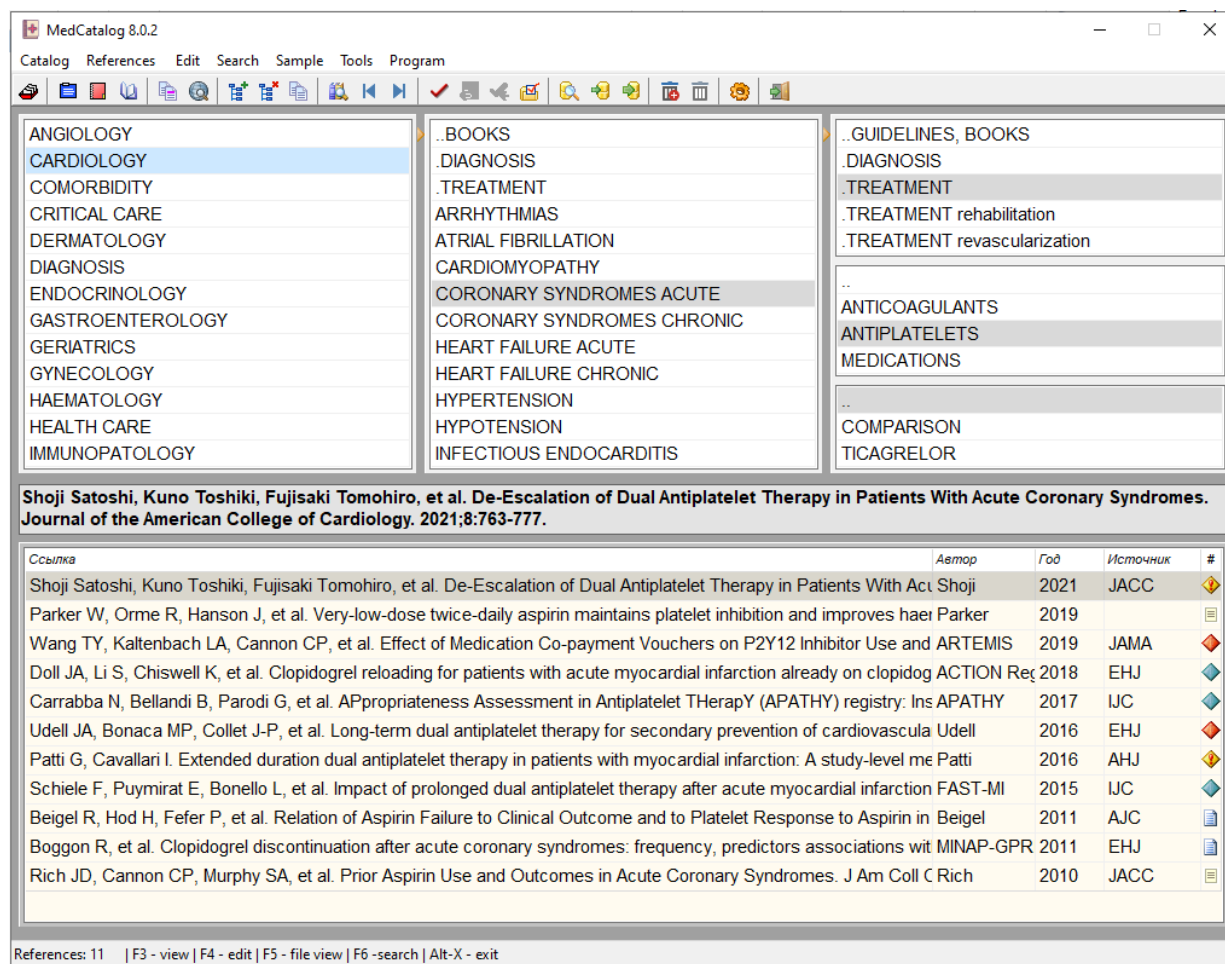


# Program MedCatalog



The MedCatalog (Fwcatalog) program is designed to maintain a catalog of bibliographic references and is distributed without restrictions. The program is used by the author to prepare books, articles, lectures, as well as to solve problems of diagnosis and treatment of diseases, and has been maintained for more than twenty years.

This program allows you to enter and edit bibliographic data, change the catalog, create and output a list of references. Existing bibliographic programs, such as EndNote, are designed primarily for entering references from the Internet (journals, databases) and formatting according to bibliographic standards. The MedCatalog program complements the above programs and is a 5-level catalog that allows to see the classification structure of sources.

The large database of bibliographic references fcatalog.sqlite is updated weekly and downloaded separately as archive fcatalogdb.zip.

Wishes and advices can be sent to the author by e-mail: fbelyalov@yandex.ru, Belialov Farid

## CONTENTS

DEVELOPMENT HISTORY.....	3
INSTALLATION.....	4
SETUP.....	4
REFERENCING.....	5
DATABASE STRUCTURE.....	5
DOCUMENT VIEWING.....	6
REFERENCE PREVIEW.....	7
DATA ENTRY AND EDITING.....	8
MOVE AND SEARCH.....	9
SEARCH MANAGER.....	10
USING SQL.....	11
SELECTION OF REFERENCES.....	12
EDIT SELECTION.....	12
OUTPUT TO FILE.....	12
CATALOG MANAGEMENT.....	13
CATALOG CHANGE.....	13
CATALOG EDITING.....	13
DATA STORAGE.....	14
PROGRAM UPDATE.....	14
DATABASE UPDATE.....	14
DOCUMENT UPDATE.....	14
DATA TRANSFER.....	15
MOBILE PROGRAM.....	16

# DEVELOPMENT HISTORY

## **version 8.0**

- + operational change of reference base.
- + compiled for Windows x64
- + internal archiver
- + international version
- + sorting of links by year and date of creation
- + improved work on creating/editing sections
- + quick access to frequently used folders
- + optimized link search

## **version 7.0**

- + mobile version of Fmcatalog program created
- + transition to open, universal SQLite database
- + alphabetical sorting of headings
- + analyzing and correcting paths to documents
- + Internet search by title and DOI
- + improved system of searching and sorting links
- + output of SQL query results to a file
- + improved link parsing
- + starting directory selection
- + selection of link chart range
- + improved color setting in the abstracts view window
- + icons updated and unified with other programs
- + added download of fcatalog.sqlite database from ftp server

## **version 6.0**

- + Microsoft Access database management system has been changed.
- + the limitation on the length of the reference (field of type Long Text) has been removed
- + import of references in RIS or PubMed format
- + graphic identification of reference type (RCT, register, meta-analysis)
- + editing window in the reference search module

## **version 5.0**

- + editing window: removal of hyphenation, new buttons, panel for abstracts
- + access to data copying (abstract, title) in viewing mode
- + bar with full source title in the main window
- + optimization of the chart of annual number of publications
- + updating icons
- + customization of abstracts view colors and font...
- + removed reports in Quick Report and replaced with Microsoft Word and FastReport
- + database statistics in graphics
- + semi-automatic filling of fields
- + abstracts viewing
- + scheduled data backup archiving
- + redesign of information input window

## **version 4.0**

- + improvement of data retrieval system
- + Quick Report
- + moving catalogs and documents

## **version 3.0**

Catalog development on Delphi in 2002 with dbf-database.


## **version 2.0**

Switching to Clipper system in 1993.

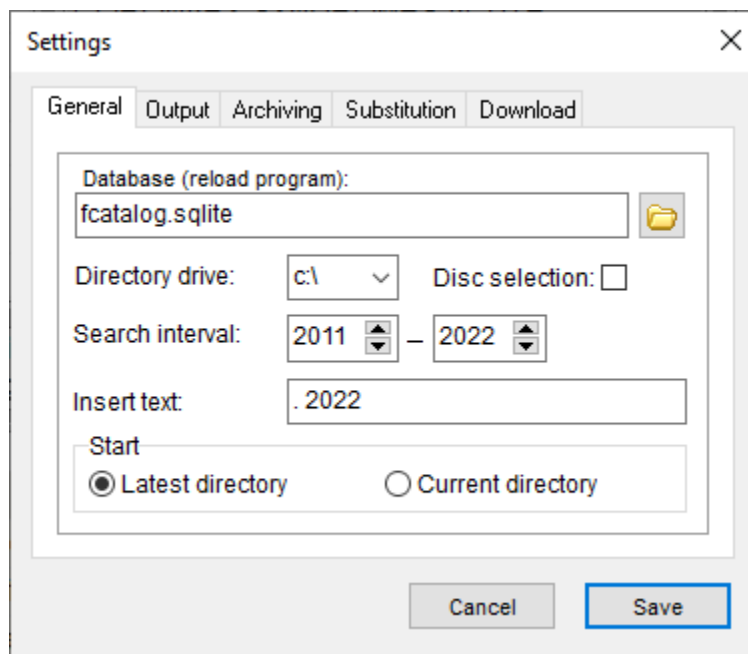
## **version 1.0**


Development of the catalog on dBase III in 1991.

## INSTALLATION


1. On a Windows system, run the installer program setup.exe.
2. After running the program, click the configuration button  and set the optimal settings. You can also manually edit the fcatalog.ini file before running the program. The program uses the database fcatalog.sqlite, located in the same directory as the main file Fwcatalog.exe.
3. On the site “WEB-medicine” in the section of programs you can download the latest database with bibliographic references, which are collected by the author to help in his work, and replace the installed file fcatalog.sqlite.
4. Think carefully about your catalog structure to suit the specifics of your work and modify the author's existing one. Since this is a personal catalog, the possibility of adding third-party databases is limited.

## SETUP



To configure the program you can manually edit the fcatalog.ini file or use the configuration button . Here you can set the initial conditions of information search, database backup, report creation parameters. In the “Database” section you can replace the text in the field that contains the path data to an external document. This option is provided due to the change of the catalog where the documents are stored.

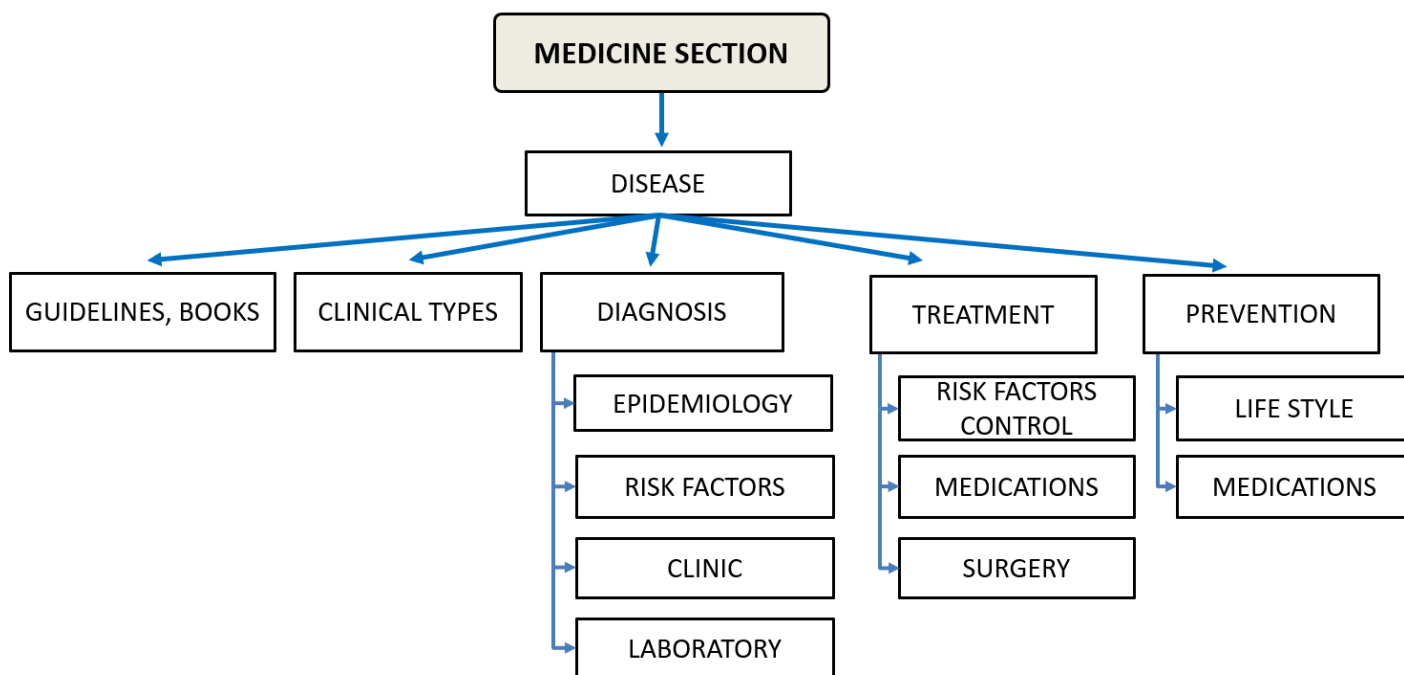
## REFERENCING

The general scheme of working with bibliographic data used by the author is presented in the figure. A reference can be obtained by copying its text or by exporting it, usually in RIS or NBIB format. In the latter case, it is convenient to import the reference into the catalog in the edit window via the button .

In addition to direct reference entry, you can use the widely used EndNote or Reference Manager programs and then copy the reference to the catalog via the clipboard.


## DATABASE STRUCTURE


The catalog contains large sections on cardiology, comorbidity, psychosomatics, prognosis, and scales that are in the author's area of interest. The sections of the reference database have a unified structure with some variations, depending on the field of medicine. The structure of the reference database is constantly modified in connection with the updating of information and improvement of rubrication.





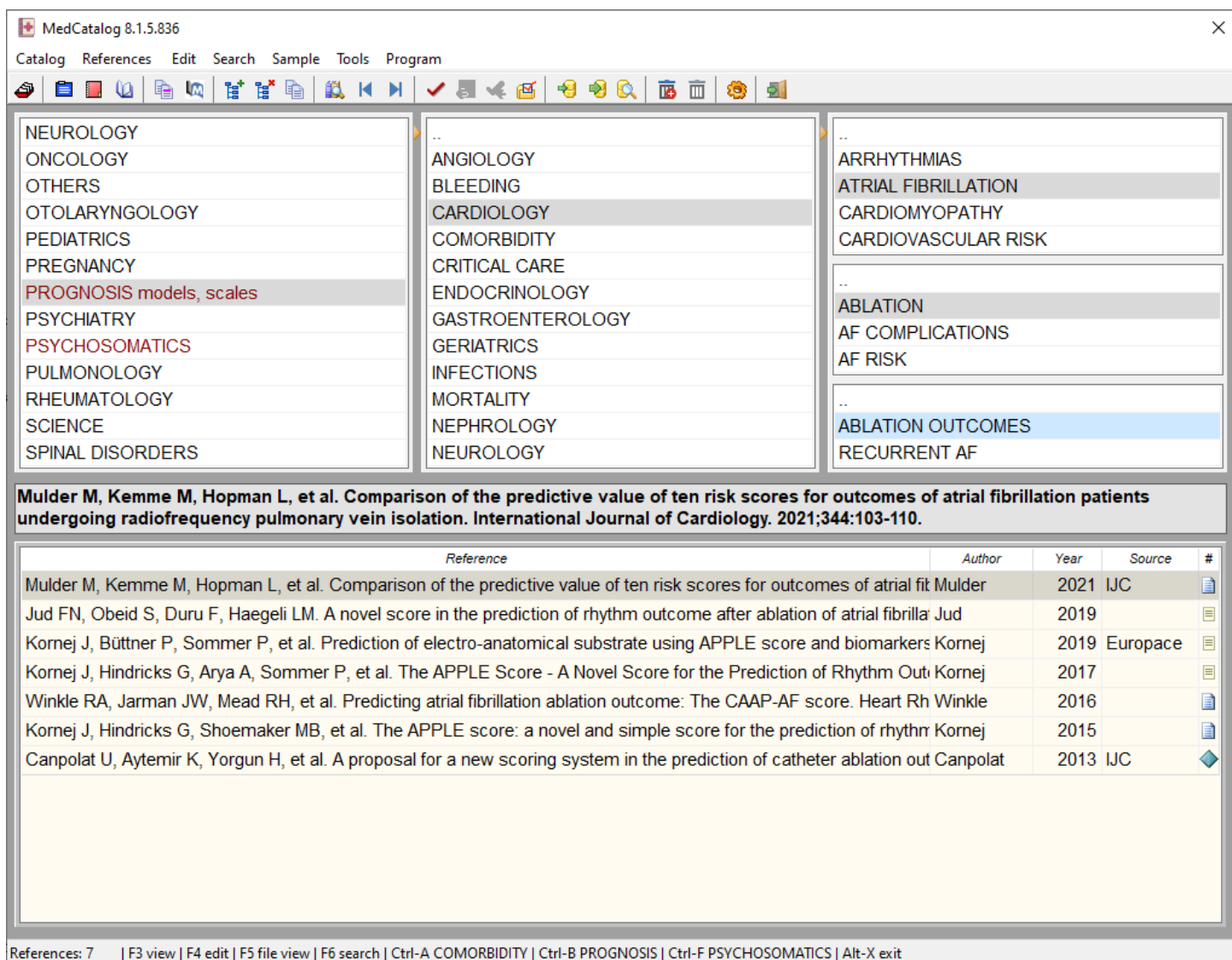
## DOCUMENT VIEWING

The main window is used to select references for viewing or editing, move through directories, move references to different subdirectories or to the trash, organize selections for later use in documents, search for a reference and the Internet.

If you have a complete document as a separate file, you can call it up with the F5 key or the button .

To edit the data, use the button  or the F4 key to call the link edit window.

To create a reference, press the Ins key or the button . You can find a publication on the Internet by its full title using Google search () or in the PubMed database () by title or highlighted text.










The screenshot shows the MedCatalog 8.1.5.836 application window. The interface includes a menu bar (Catalog, References, Edit, Search, Sample, Tools, Program) and a toolbar with various icons. The main area is divided into three panes:

- Left Pane:** A list of medical specialties including NEUROLOGY, ONCOLOGY, OTHERS, OTOLARYNGOLOGY, PEDIATRICS, PREGNANCY, PROGNOSIS models, scales (highlighted in red), PSYCHIATRY, PSYCHOSOMATICS (highlighted in red), PULMONOLOGY, RHEUMATOLOGY, SCIENCE, and SPINAL DISORDERS.
- Middle Pane:** A list of sub-specialties including ANGIOLOGY, BLEEDING, CARDIOLOGY (highlighted), COMORBIDITY, CRITICAL CARE, ENDOCRINOLOGY, GASTROENTEROLOGY, GERIATRICS, INFECTIONS, MORTALITY, NEPHROLOGY, and NEUROLOGY.
- Right Pane:** A list of specific conditions including ARRHYTHMIAS, ATRIAL FIBRILLATION, CARDIOMYOPATHY, CARDIOVASCULAR RISK, ABLATION, AF COMPLICATIONS, AF RISK, ABLATION OUTCOMES (highlighted in blue), and RECURRENT AF.


Below the panes, a reference entry is displayed:

**Mulder M, Kemme M, Hopman L, et al. Comparison of the predictive value of ten risk scores for outcomes of atrial fibrillation patients undergoing radiofrequency pulmonary vein isolation. International Journal of Cardiology. 2021;344:103-110.**

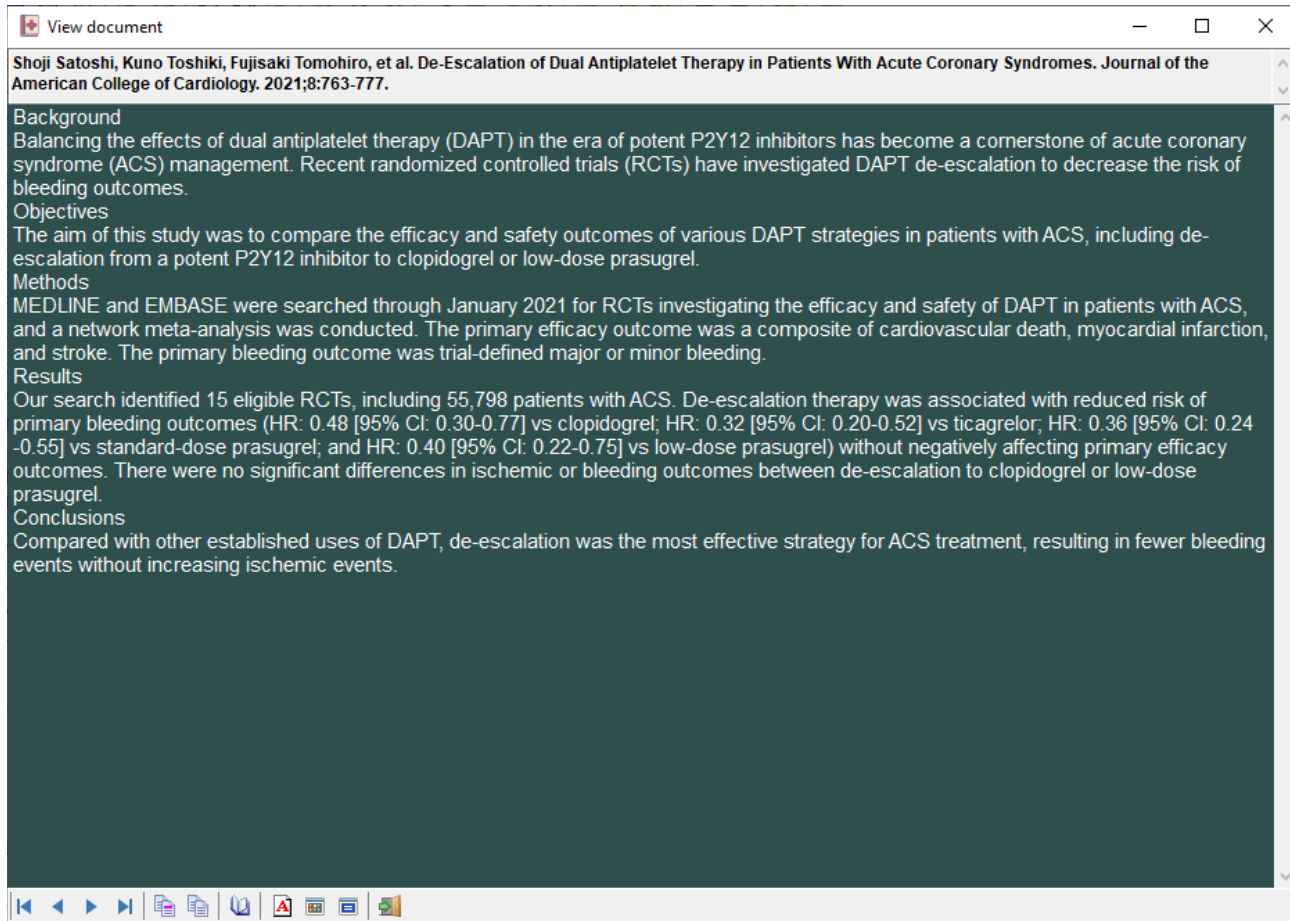
Reference	Author	Year	Source	#
Mulder M, Kemme M, Hopman L, et al. Comparison of the predictive value of ten risk scores for outcomes of atrial fibrillation patients undergoing radiofrequency pulmonary vein isolation. International Journal of Cardiology. 2021;344:103-110.	Mulder	2021	IJC	
Jud FN, Obeid S, Duru F, Haegeli LM. A novel score in the prediction of rhythm outcome after ablation of atrial fibrillation. Heart Rhythm. 2019;15:1033-1040.	Jud	2019		
Kornej J, Büttner P, Sommer P, et al. Prediction of electro-anatomical substrate using APPLE score and biomarkers. Europace. 2019;21:1033-1040.	Kornej	2019	Europace	
Kornej J, Hindricks G, Arya A, Sommer P, et al. The APPLE Score - A Novel Score for the Prediction of Rhythm Outcome after Catheter Ablation of Atrial Fibrillation. Heart Rhythm. 2017;13:1033-1040.	Kornej	2017		
Winkle RA, Jarman JW, Mead RH, et al. Predicting atrial fibrillation ablation outcome: The CAAP-AF score. Heart Rhythm. 2016;12:1033-1040.	Winkle	2016		
Kornej J, Hindricks G, Shoemaker MB, et al. The APPLE score: a novel and simple score for the prediction of rhythm outcome after catheter ablation of atrial fibrillation. Europace. 2015;17:1033-1040.	Kornej	2015		
Canpolat U, Aytemir K, Yorgun H, et al. A proposal for a new scoring system in the prediction of catheter ablation outcome in atrial fibrillation. Europace. 2013;15:1033-1040.	Canpolat	2013	IJC	

At the bottom of the window, a status bar displays: References: 7 | F3 view | F4 edit | F5 file view | F6 search | Ctrl-A COMORBIDITY | Ctrl-B PROGNOSIS | Ctrl-F PSYCHOSOMATICS | Alt-X exit

## REFERENCE PREVIEW

In the main window, the user selects the desired directory and press the button , the F3 key or double-click the mouse to get acquainted with the abstract in the document viewer.

Here it is possible to scroll through the documents of a given subdirectory, call the full document view, copy the title, and set a comfortable background (e.g., #2F4F4F or #0063B1) and font.



**View document** — □ ×

Shoji Satoshi, Kuno Toshiki, Fujisaki Tomohiro, et al. De-Escalation of Dual Antiplatelet Therapy in Patients With Acute Coronary Syndromes. *Journal of the American College of Cardiology*. 2021;8:763-777.

**Background**  
Balancing the effects of dual antiplatelet therapy (DAPT) in the era of potent P2Y12 inhibitors has become a cornerstone of acute coronary syndrome (ACS) management. Recent randomized controlled trials (RCTs) have investigated DAPT de-escalation to decrease the risk of bleeding outcomes.

**Objectives**  
The aim of this study was to compare the efficacy and safety outcomes of various DAPT strategies in patients with ACS, including de-escalation from a potent P2Y12 inhibitor to clopidogrel or low-dose prasugrel.

**Methods**  
MEDLINE and EMBASE were searched through January 2021 for RCTs investigating the efficacy and safety of DAPT in patients with ACS, and a network meta-analysis was conducted. The primary efficacy outcome was a composite of cardiovascular death, myocardial infarction, and stroke. The primary bleeding outcome was trial-defined major or minor bleeding.

**Results**  
Our search identified 15 eligible RCTs, including 55,798 patients with ACS. De-escalation therapy was associated with reduced risk of primary bleeding outcomes (HR: 0.48 [95% CI: 0.30-0.77] vs clopidogrel; HR: 0.32 [95% CI: 0.20-0.52] vs ticagrelor; HR: 0.36 [95% CI: 0.24-0.55] vs standard-dose prasugrel; and HR: 0.40 [95% CI: 0.22-0.75] vs low-dose prasugrel) without negatively affecting primary efficacy outcomes. There were no significant differences in ischemic or bleeding outcomes between de-escalation to clopidogrel or low-dose prasugrel.

**Conclusions**  
Compared with other established uses of DAPT, de-escalation was the most effective strategy for ACS treatment, resulting in fewer bleeding events without increasing ischemic events.

Navigation icons: Home, Back, Forward, Stop, Copy, Paste, Undo, Redo, Print, Refresh, Close.

## DATA ENTRY AND EDITING

**Edit**

Title (<255 characters)  
Luo Q, O'Connell D, Yu X, et al. Cancer incidence and mortality in Australia from 2020 to 2044 and an exploratory analysis of the potential effect of treatment delays during the COVID-19 pandemic: a statistical modelling study. The Lancet Public Health. 2022;6:e537-e548.

Author, trial	Year	Source	File type	Change file type	Entry date
Luo	2022	Lancet	article	not change	2022-06-27

File  
d:\liter\medicine\journals\lancet\22\piis2468266722000901.pdf


DOI  
10.1016/S2468-2667(22)00090-1

**Abstract**

**Background**  
Long-term projections of cancer incidence and mortality estimate the future burden of cancer in a population, and can be of great use in informing the planning of health services and the management of resources. We aimed to estimate incidence and mortality rates and numbers of new cases and deaths up until 2044 for all cancers combined and for 21 individual cancer types in Australia. We also illustrate the potential effect of treatment delays due to the COVID-19 pandemic on future colorectal cancer mortality rates.



**Methods**  
In this statistical modelling study, cancer incidence and mortality rates in Australia from 2020 to 2044 were projected based on data up to 2017 and 2019, respectively. Cigarette smoking exposure (1945–2019), participation rates in the breast cancer screening programme (1996–2019), and prostate-specific antigen testing rates (1994–2020) were included where relevant. The baseline projection model using an age-period-cohort model or generalised linear model for each cancer type was selected based on model fit statistics and validation with pre-COVID-19 observed data. To assess the impact of treatment delays during the COVID-19 pandemic on colorectal cancer mortality, we obtained data on incidence, survival, prevalence, and cancer treatment for colorectal cancer from different authorities. The relative risks of death due to system-caused treatment delays were derived from a published systematic review. Numbers of excess colorectal cancer deaths were estimated using the relative risk of death per week of treatment delay and different durations of delay under a number of hypothetical scenarios.

Enter the required information directly or from another source (EndNote, Reference Manager, Internet Explorer, Word) via copy and paste with Ctrl-Ins/Ctrl-C and Shift-Ins/Ctrl-V.




It is also possible to import references in RIS or PubMed format via the button . The program reads files with “.ris” and “.nbib” extensions. At the same time, RIS format differs from journal to journal (e.g., journal name identifier as JF, JO or T2, abstract may include line breaks and only the first line is read...), so sometimes additional manual editing is needed.

If characters (e.g. ≥) are missing when importing a reference from a text file, the reference can be copied from the clipboard.





It is important to format bibliographic references according to the standards of information presentation (.

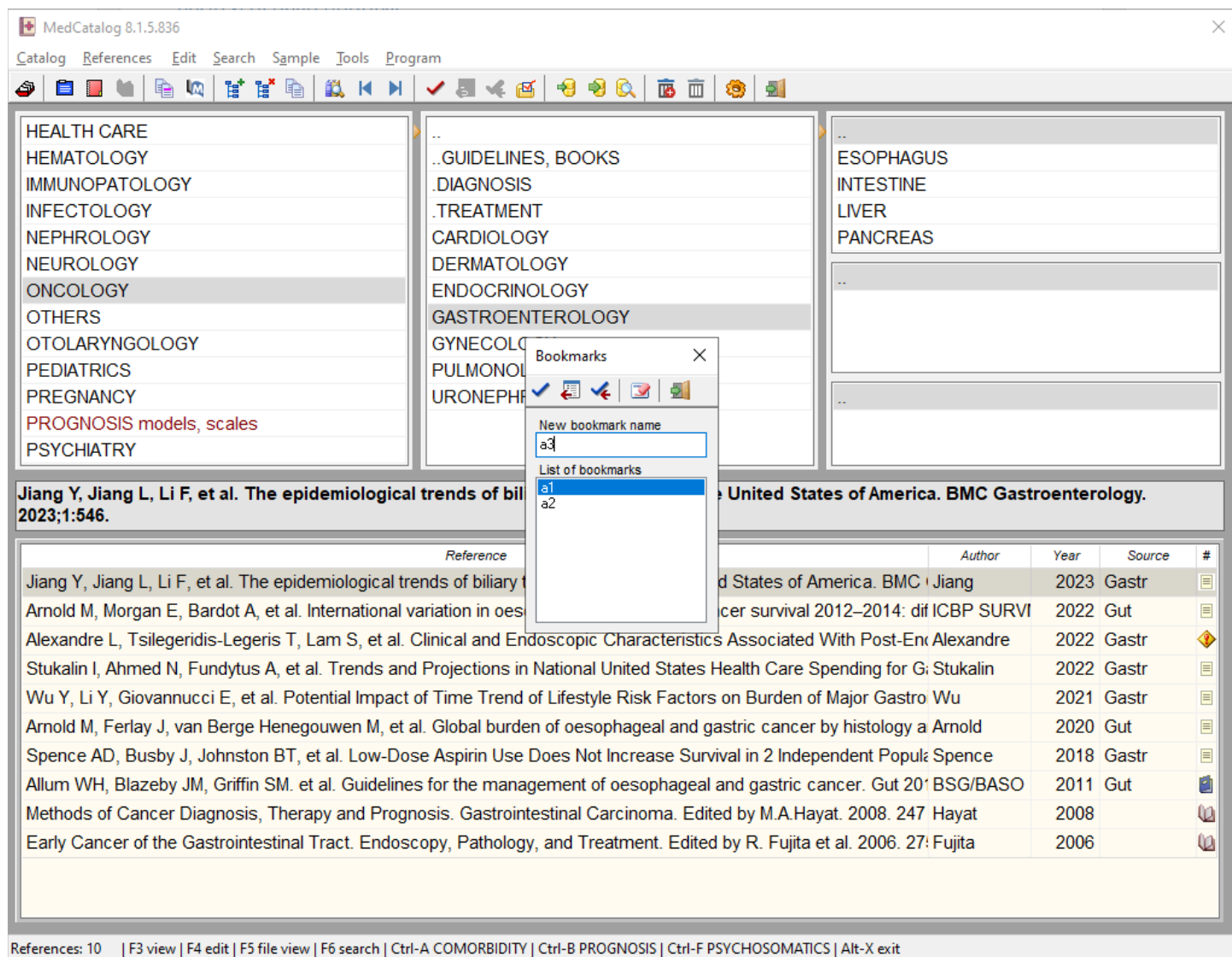
To facilitate manual work, various buttons can be used to remove garbage, add “et al.” () , automatically organize the references into fields the author's surname, year of publication and journal abbreviation () ,



copy memorized text (   ), etc. In a reference or abstract, there are often unwanted characters and lines that can be deleted using the button .

## MOVE AND SEARCH

Moving through subfolders can be facilitated by “quick” bookmarks (create - button , jump - button ) or bookmark manager (button ). You can move a link to a subdirectory marked with a bookmark using the button .



The screenshot shows the MedCatalog 8.1.5.836 interface. The main window is divided into several panes. On the left, there is a 'Catalog' pane with a tree view of medical specialties: HEALTH CARE, HEMATOLOGY, IMMUNOPATOLOGY, INFECTOLOGY, NEPHROLOGY, NEUROLOGY, ONCOLOGY, OTHERS, OTOLARYNGOLOGY, PEDIATRICS, PREGNANCY, PROGNOSIS models, scales, and PSYCHIATRY. The 'PROGNOSIS models, scales' item is highlighted in red. The middle pane shows a sub-catalog with categories like ..GUIDELINES, BOOKS, .DIAGNOSIS, .TREATMENT, CARDIOLOGY, DERMATOLOGY, ENDOCRINOLOGY, GASTROENTEROLOGY, GYNECOLOGY, PULMONOLOGY, and URONEPHROLOGY. The right pane shows a list of organs: ESOPHAGUS, INTESTINE, LIVER, and PANCREAS. Below these panes, a reference list is displayed. The first reference is highlighted: Jiang Y, Jiang L, Li F, et al. The epidemiological trends of biliary cancer in the United States of America. BMC Gastroenterology. 2023;1:546. A 'Bookmarks' dialog box is open in the foreground, showing a 'New bookmark name' field with 'a3' entered, and a 'List of bookmarks' section with 'a1' and 'a2' listed. The bottom status bar shows 'References: 10 | F3 view | F4 edit | F5 file view | F6 search | Ctrl-A COMORBIDITY | Ctrl-B PROGNOSIS | Ctrl-F PSYCHOSOMATICS | Alt-X exit'.

Reference	Author	Year	Source	#
Jiang Y, Jiang L, Li F, et al. The epidemiological trends of biliary cancer in the United States of America. BMC Gastroenterology. 2023;1:546.	Jiang	2023	Gastr	
Arnold M, Morgan E, Bardot A, et al. International variation in oesophageal cancer survival 2012–2014: dif ICBP SURVI		2022	Gut	
Alexandre L, Tsilegeridis-Legeris T, Lam S, et al. Clinical and Endoscopic Characteristics Associated With Post-Enr	Alexandre	2022	Gastr	
Stukalin I, Ahmed N, Fundytus A, et al. Trends and Projections in National United States Health Care Spending for G;	Stukalin	2022	Gastr	
Wu Y, Li Y, Giovannucci E, et al. Potential Impact of Time Trend of Lifestyle Risk Factors on Burden of Major Gastro	Wu	2021	Gastr	
Arnold M, Ferlay J, van Berge Henegouwen M, et al. Global burden of oesophageal and gastric cancer by histology a	Arnold	2020	Gut	
Spence AD, Busby J, Johnston BT, et al. Low-Dose Aspirin Use Does Not Increase Survival in 2 Independent Popul	Spence	2018	Gastr	
Allum WH, Blazeby JM, Griffin SM. et al. Guidelines for the management of oesophageal and gastric cancer. Gut 201	BSG/BASO	2011	Gut	
Methods of Cancer Diagnosis, Therapy and Prognosis. Gastrointestinal Carcinoma. Edited by M.A.Hayat. 2008. 247	Hayat	2008		
Early Cancer of the Gastrointestinal Tract. Endoscopy, Pathology, and Treatment. Edited by R. Fujita et al. 2006. 27	Fujita	2006		

The following hotkeys are used to quickly navigate to catalogs frequently used by the author: Ctrl-A (COMORBIDITY), Ctrl-B (PROGNOSIS), Ctrl-F (PSYCHOSOMATICS).

## SEARCH MANAGER

Search
X

Source

Document creation date

Document type

Entry date

Key (word+ \_ord-word)

2011 – 2022

all references

2000-01-01 – 2022-11-19

Author, trial

Reference fragment, word+year (ex. smith+2022)  
morton+2022

Reference	Year	Source	Author	Section4 №	№	#
Tomic D, Morton J, Chen L, et al. Lifetime risk, life expectancy, and years of life	2022	Lancet	Tomic	1201	61743	
Morton L, Macfarlane G, Jones G, et al. Driving Difficulties in Patients With Axia	2022		Morton	940	60605	
Pan L, Morton J, Mbulo L, et al. Electronic cigarette use among adults in 14 cou	2022		Pan	2956	58288	
Morton J, Lazzarini P, Shaw J, et al. Trends in the Incidence of Hospitalization f	2022	DC	Morton	155	57321	

**Tomic D, Morton J, Chen L, et al. Lifetime risk, life expectancy, and years of life lost to type 2 diabetes in 23 high-income jurisdictions: a multinational, population-based study. The Lancet Diabetes & Endocrinology. 2022;11:795-803.**




10.1016/S2213-8587(22)00252-2

**Background**  
Diabetes is a major public health issue. Because lifetime risk, life expectancy, and years of life lost are meaningful metrics for clinical decision making, we aimed to estimate these measures for type 2 diabetes in the high-income setting.

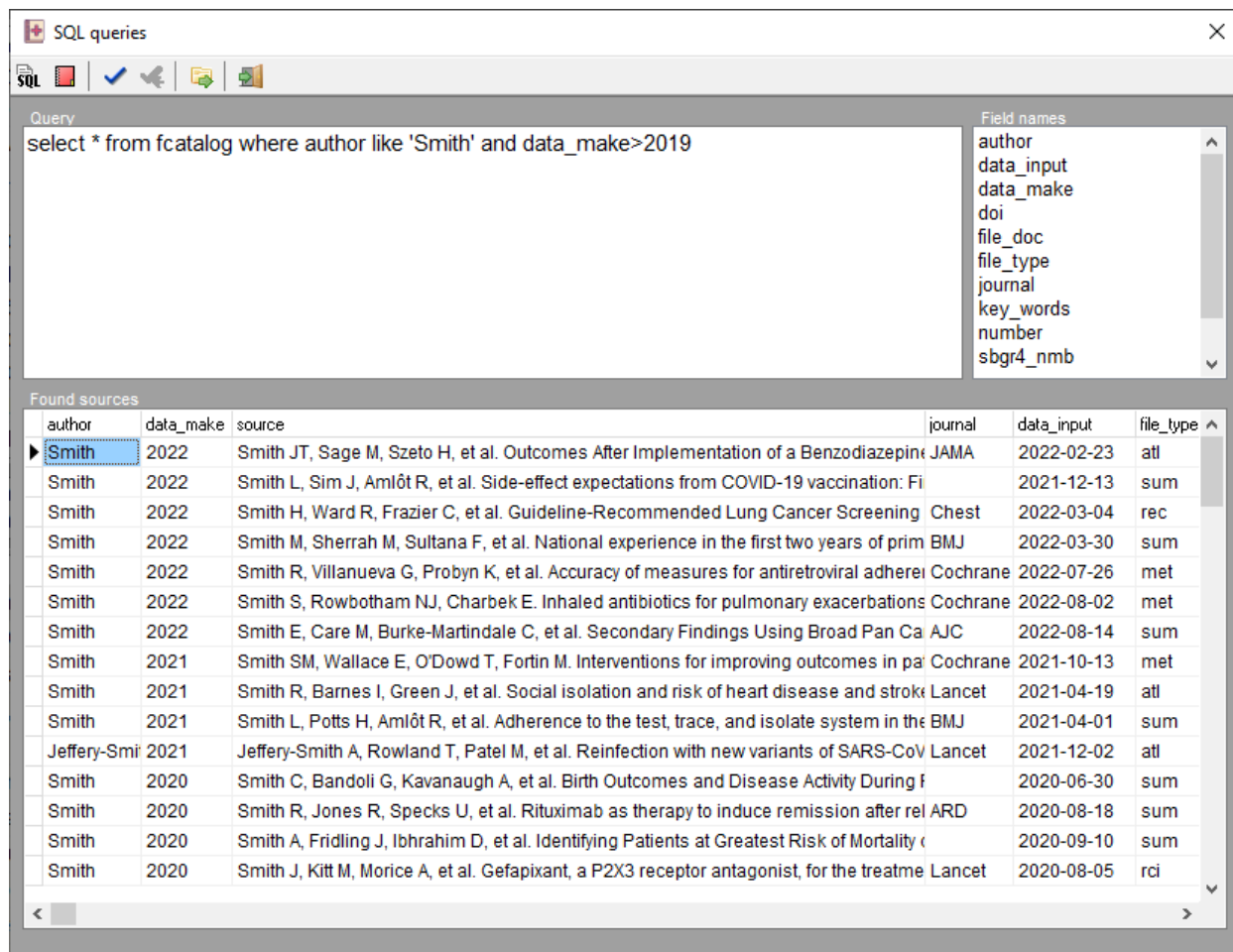
**Methods**  
For this multinational, population-based study, we sourced data from 24 databases for 23 jurisdictions (either whole countries or regions of a country): Australia; Austria; Canada; Denmark; Finland; France; Germany; Hong Kong; Hungary; Israel; Italy; Japan; Latvia; Lithuania; the Netherlands; Norway; Scotland; Singapore; South Korea; Spain; Taiwan; the UK; and the USA. Our main outcomes were lifetime risk of type 2 diabetes, life expectancy in people with and without type 2 diabetes, and years of life lost to type 2 diabetes. We modelled the incidence and mortality of type 2 diabetes in people with and without type 2 diabetes in sex-stratified, age-adjusted, and calendar year-adjusted Poisson models for each jurisdiction. Using incidence and mortality, we constructed life tables for people of both sexes aged 20–100 years for each jurisdiction and at two timepoints 5 years apart in the period 2005–19 where possible. Life expectancy from a given age was computed as the area under the survival curves and lifetime lost was calculated as the difference between the expected lifetime of people with versus without type 2 diabetes at a given age. Lifetime risk was calculated as the proportion of each cohort who developed type 2 diabetes between the ages of 20 years and 100 years. We estimated 95% CIs using parametric bootstrapping.

**Findings**  
Across all study cohorts from the 23 jurisdictions (total person-years 1 577 234 194), there were 5 119 585 incident cases of type 2 diabetes, 4 007 064 deaths in those with type 2 diabetes, and 11 854 043 deaths in those without type 2 diabetes. The lifetime risk of type 2 diabetes ranged from 16.3% (95% CI 15.6–17.0) for Scottish women to 59.6% (58.5–60.8) for Singaporean men. Lifetime risk declined with time in 11 of the 15 jurisdictions for which two timepoints were studied. Among people with type 2 diabetes, the highest life expectancies were found for both sexes in

References: 4


To search for links, use the search manager (button ). In the opened window you can set search conditions and then click the button . Double-click on the link or on the button  to open the quick edit window.

## USING SQL




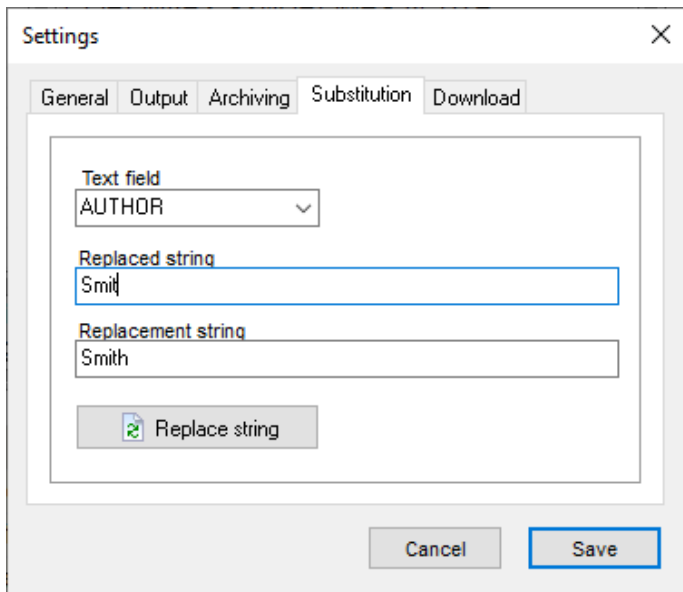
The screenshot shows a window titled "SQL queries" with a toolbar at the top. The main area is divided into two panes. The left pane, labeled "Query", contains the SQL statement: `select * from fcatalog where author like 'Smith' and data_make>2019`. The right pane, labeled "Field names", lists the columns: author, data\_input, data\_make, doi, file\_doc, file\_type, journal, key\_words, number, and sbgr4\_nmb. Below these panes is a table titled "Found sources" with the following data:

author	data_make	source	journal	data_input	file_type
Smith	2022	Smith JT, Sage M, Szeto H, et al. Outcomes After Implementation of a Benzodiazepine	JAMA	2022-02-23	atl
Smith	2022	Smith L, Sim J, Amlôt R, et al. Side-effect expectations from COVID-19 vaccination: Fi		2021-12-13	sum
Smith	2022	Smith H, Ward R, Frazier C, et al. Guideline-Recommended Lung Cancer Screening	Chest	2022-03-04	rec
Smith	2022	Smith M, Sherrah M, Sultana F, et al. National experience in the first two years of prim	BMJ	2022-03-30	sum
Smith	2022	Smith R, Villanueva G, Probyn K, et al. Accuracy of measures for antiretroviral adhere	Cochrane	2022-07-26	met
Smith	2022	Smith S, Rowbotham NJ, Charbek E. Inhaled antibiotics for pulmonary exacerbations	Cochrane	2022-08-02	met
Smith	2022	Smith E, Care M, Burke-Martindale C, et al. Secondary Findings Using Broad Pan Ca	AJC	2022-08-14	sum
Smith	2021	Smith SM, Wallace E, O'Dowd T, Fortin M. Interventions for improving outcomes in pa	Cochrane	2021-10-13	met
Smith	2021	Smith R, Barnes I, Green J, et al. Social isolation and risk of heart disease and strok	Lancet	2021-04-19	atl
Smith	2021	Smith L, Potts H, Amlôt R, et al. Adherence to the test, trace, and isolate system in the	BMJ	2021-04-01	sum
Jeffery-Smi	2021	Jeffery-Smith A, Rowland T, Patel M, et al. Reinfection with new variants of SARS-CoV	Lancet	2021-12-02	atl
Smith	2020	Smith C, Bandoli G, Kavanaugh A, et al. Birth Outcomes and Disease Activity During f		2020-06-30	sum
Smith	2020	Smith R, Jones R, Specks U, et al. Rituximab as therapy to induce remission after rel	ARD	2020-08-18	sum
Smith	2020	Smith A, Fridling J, Ibbrahim D, et al. Identifying Patients at Greatest Risk of Mortality		2020-09-10	sum
Smith	2020	Smith J, Kitt M, Morice A, et al. Gefapixant, a P2X3 receptor antagonist, for the treatme	Lancet	2020-08-05	rci

You can use the flexible and powerful SQL query language for searching (button ):

- `SELECT * FROM fcatalog ORDER BY data_input DESC LIMIT 50`
- `SELECT * FROM fcatalog WHERE author LIKE 'Smith' AND data_make>2019`
- `SELECT * FROM gr_name WHERE gr_title NOT LIKE 'WASTEBASKET' ORDER BY gr_title DESC`
- `UPDATE fcatalog SET data_make = REPLACE (data_make, '2104', '2014')`
- `UPDATE sbgr1_nm SET sbgr1_name = REPLACE (sbgr1_name, 'ОБЩИЙ', '..')`
- `UPDATE fcatalog SET file_doc = ''`
- `UPDATE fcatalog SET file_doc = REPLACE(file_doc, '\other\icd10\ ', '\other\')`
- `UPDATE fdata SET type1 = REPLACE(type1, 'first', 'advice')`
- `DELETE FROM fcatalog WHERE number>60`
- `DELETE FROM fcatalog WHERE author <> 'Smith'`
- `UPDATE fcatalog SET author= REPLACE(author, 'Smit', 'Smith') WHERE journal LIKE '%BMJ%'`
- `UPDATE fcatalog SET file_type = REPLACE (file_type, 'rci', 'sum') WHERE source LIKE '%Mendelian Randomi- zation%'`
- `UPDATE fcatalog SET source = REPLACE(source, 'Z et al.', 'Z, et al.')`

In addition to writing SQL queries, there is a simplified version in the program configuration () , where you can select the field, substituted and substituted rows on the Base tab.



## SELECTION OF REFERENCES

The selection is a list of references with possible inclusion of abstracts. To create a report, you must first copy the selected references to the appropriate directory. You can select a reference by pressing the buttons copy to buffer one reference or all references in a given subdirectory (📁, 📁). After that you can go to the report catalog (🔍) and edit the list of references. The inclusion of abstracts is set in the program configuration (⚙️).

### EDIT SELECTION

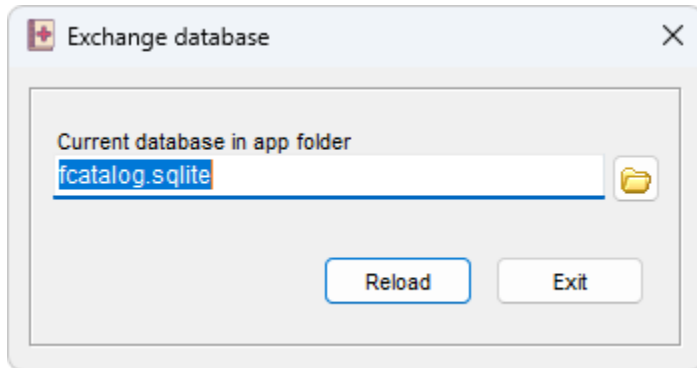
References selected and copied to the appropriate catalog, which can be viewed and changed in the manager, where we get to using the button 🔍. After work it is advisable to clear the catalog using the button 🗑️ for future reports.


### OUTPUT TO FILE

You can create a file with a list of references in the following way. First, the selected references are transferred either individually or all together to the report directory (🔍), and from there output either to an ASCII text file (📄) or to an MSWord file (📄). Output parameters (with or without abstract, font peculiarities) are set in the program configuration (⚙️).

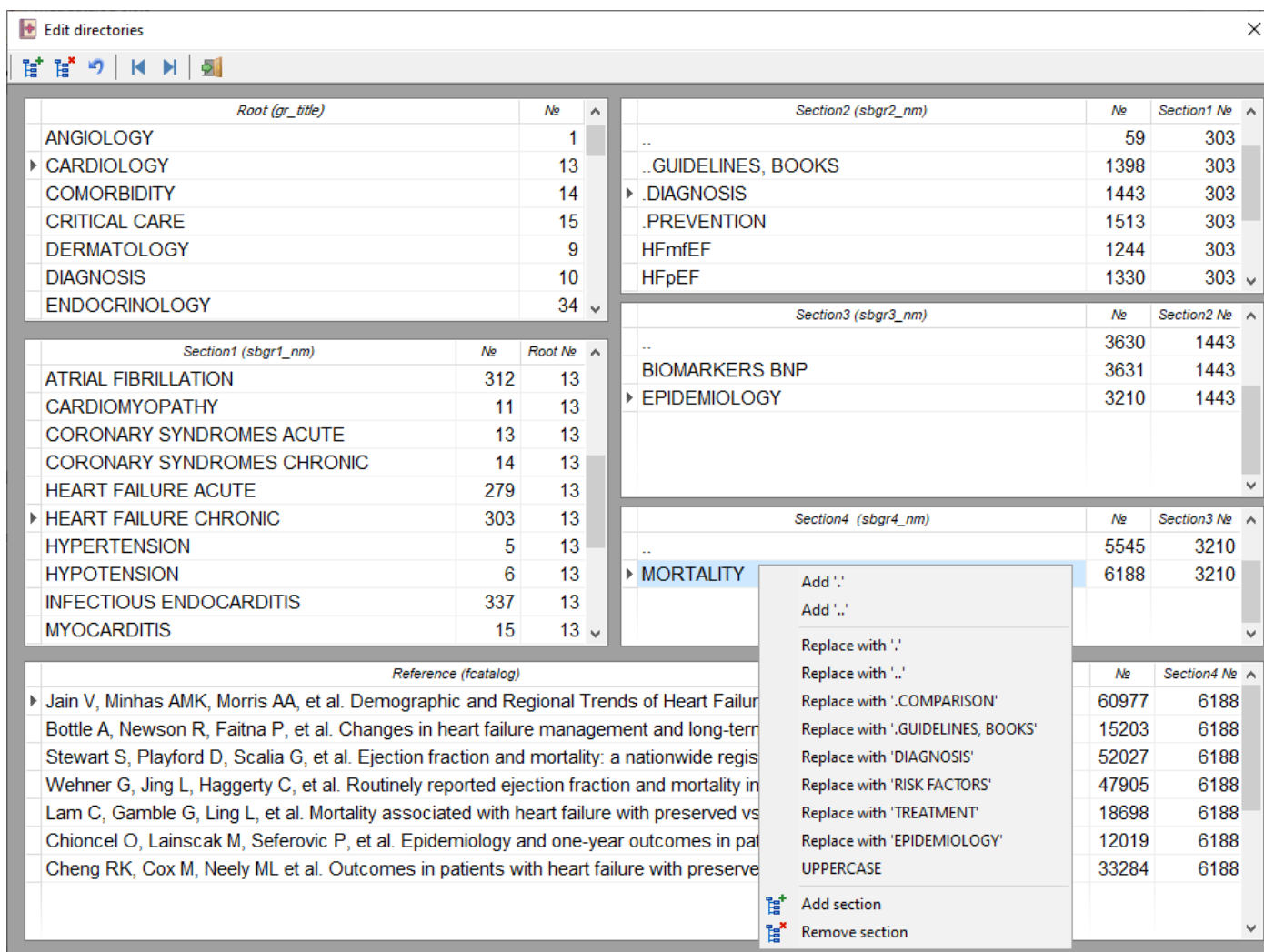
# CATALOG MANAGEMENT



## CATALOG CHANGE



You can quickly load a new reference database via the Exchange database menu .

## CATALOG EDITING




The catalog structure is created in the window after pressing the button . Adding a record is performed by pressing Ins or the button  followed by pressing Enter - otherwise the new record will not be entered. The program allows not only renaming, but also transferring subdirectories: for this purpose it is necessary to change

the number corresponding to the underlying directory. Although this method is not very correct, it is very flexible and convenient.

In case of a large edit, changes in the directory structure are not always immediately visible, so it is necessary to exit the program and start it again.

## DATA STORAGE

Data corruption and loss cannot be avoided even in very high security level systems, especially for simple database management systems. For example, a network failure while working with a database can lead to data integrity violations that would require a specialist to restore. The author during many years of work with databases repeatedly had to spend a lot of effort to restore data.

In order to improve security, it is recommended to periodically save a copy of the database. This process can be automated by setting the interval of saving the database, or can be done arbitrarily using the button . In this case, a database archive is created in a specified directory using an external archiver program. The archiving parameters are configured individually in the program configuration window.

## PROGRAM UPDATE

The program is constantly being improved and updated. The latest version is available on the Cardiosite in the programs section (<https://therapy.irkutsk.ru/prog1.htm>). For the first installation you can download the file fcsetup.exe, and to update only the file Fwcatalog.exe, it is easier to use the program archive fcatalog.zip.

## DATABASE UPDATE

The author constantly analyzes the most authoritative medical publications and selects important and interesting studies, which are entered into the database. The information is used to help in practical and educational work, preparation of articles and books, which can be found on the Cardiosite (<http://therapy.irkutsk.ru/doc.htm>).

Monthly updated database is published on the Cardiosite. You can download the file fcatalogdb.zip, unzip it and replace the outdated one in the program directory. In this case, the data you entered into the program will disappear.

In addition, you can go to the 'Download' tab in the program settings and get the fcatalogdb.zip database file from a remote server.

You can supplement the current database with information from another database with a similar structure or perform other database correction using a database management program, such as SQLite Expert.

To copy directories with files after a certain date for further archiving and transfer to a remote computer, use the Windows command: `ROBOCOPY c:\Liter\Medicine c:\1\Liter\Medicine *.* /S /MAXAGE:20150101`. The directory, including folders and files, can then be archived, if necessary, into files of a specified size.

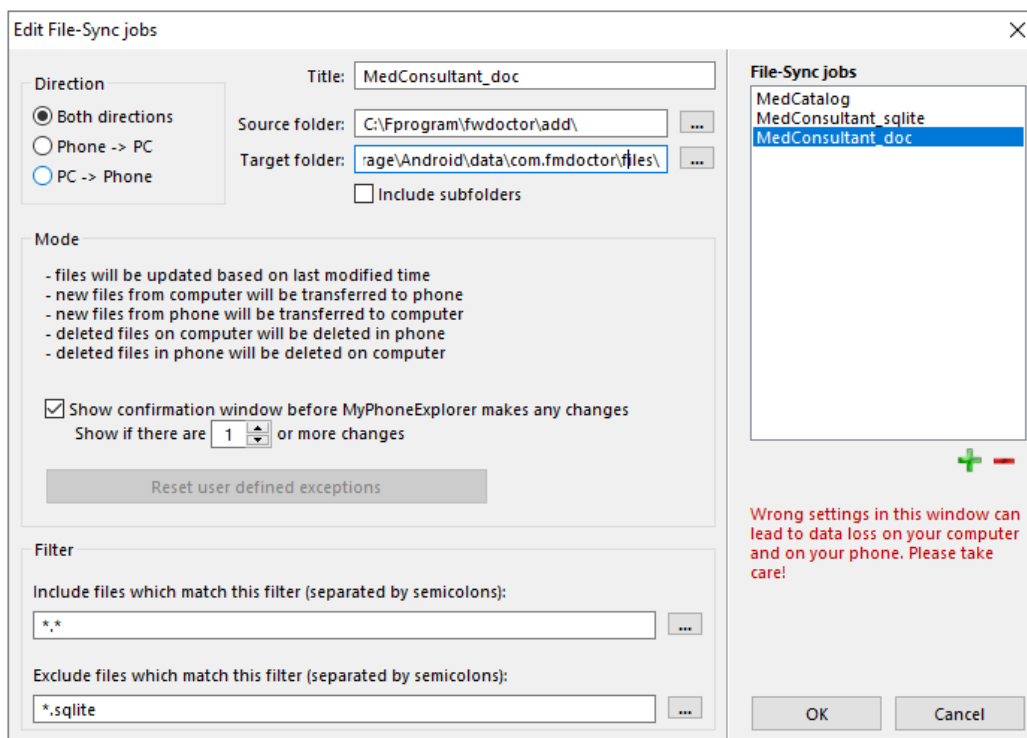
## DOCUMENT UPDATE

It is not uncommon for outdated documents to be deleted, but this does not happen on other computers unless the document archive is in the public cloud. You can use Total Commander to compare the list of documents and delete obsolete ones. Connect the mobile disk and display the folders to be compared, select Synchronize

dirs through the Commands menu, mark Subdirs and by content, run Compare. After that we select obsolete files marked in red and delete them. New files marked in green are overwritten using the Synchronize button.

## DATA TRANSFER

To transfer patient data between a computer and a smartphone or between a computer at a medical center where consultations are performed and a home computer using a smartphone via WiFi or wire, you can use the MyPhoneExplorer program, where you set the file synchronization parameters. In the settings (Settings-Multi-Sync-Customize) create tasks (File-Sync jobs) specifying the source folder on the computer (C:\Fprogram\fwcat-alog\)) and the target folder on the smartphone (\Internal storage\Android\data\com.fmcatalog\files\), file filter (\*.sqlite), synchronization (PC->Phone or Both directions). Connect on startup and Start Multi-sync are also marked in the program startup settings. The program settings (c:\Users\Farid\AppData\Roaming\MyPhoneExplorer\..\FileSync.dat) can be transferred to another computer.



## MOBILE PROGRAM

In order to quickly view documents on mobile devices, a version of the pro-gram (Fmcatalog) for the Android operating system has been developed and can be downloaded from Google Play. The pro-gram has a similar structure of catalog selection and a simplified window for viewing the document with the abstract. The original document can be found online using a unique DOI link.

