



National Institutes of Health  
National Library of Medicine  
Bethesda MD 20894

February 8, 2006

Elias A. Zerhouni, M.D.  
Director  
National Institutes of Health  
9000 Rockville Pike  
Bethesda, Maryland 20892

Dear Dr. Zerhouni,

The Board of Regents of the National Library of Medicine (NLM) fully supports the goals of the NIH public access policy – to create a central archive of NIH-funded research publications, to advance science and enable NIH to better manage its research portfolio, and to provide electronic access to the public to NIH-funded research publications. We applaud you for taking this important step to benefit science and the public interest, and we congratulate the NLM staff for handling the technical implementation effectively.

As you know, in 2005, the Board of Regents of the National Library of Medicine established an NIH Public Access Policy Working Group consisting of a range of stakeholders. The Working Group's charge is to (1) review the statistical evidence on the impact of the Policy; (2) provide suggestions for improving implementation; (3) assess how well the Policy is achieving the NIH goals, and (4) suggest changes to the Policy that might further these goals. I chair the Working Group on behalf of the Board of Regents. Dr. Deanna Marcum also represents the Board on the Group. The Working Group has held two meetings, on July 11, 2005 and November 15, 2005. The minutes of these meetings (available from <http://www.nlm.nih.gov/od/bor/bor.html>) were distributed to the full Board of Regents in advance of its September 20, 2005 and February 7, 2006 meetings. Dr. Marcum and I also reported on the Working Group discussions at these Board meetings.

The report of the November 15 Working Group meeting reveals that the current rate of participation in the voluntary Policy is very low (less than 4%). Since there is evidence that the submission system is relatively easy to use and that the majority of NIH-funded researchers appear to know about the policy, technical difficulties or lack of awareness do not appear to be primary reasons for non-compliance.

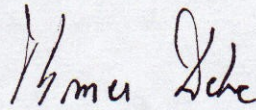
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Based on this information and the opinions expressed by Working Group members, the Board has concluded that the NIH Policy cannot achieve its stated goals unless deposit of manuscripts becomes mandatory. We favor public release of NIH-funded articles in PubMed Central no later than 6 months after publication, although some flexibility may be needed for journals published less frequently than bimonthly. We were pleased that most of the publishers on the Working Group indicated an interest in depositing the final published version of articles in PubMed Central on behalf of NIH-funded authors. The Board agrees that this would be highly desirable.

The Board encourages NIH and NLM to develop a careful plan for transitioning to a mandatory policy. It will be important to provide clear guidance and a reasonable timetable, to minimize burden on NIH-funded researchers and grantee institutions, and also to continue to work with publishers to make it easy for them to submit articles on behalf of their NIH-supported authors. The next Working Group's next meeting is scheduled for April 10. I would be happy to engage the Group in assisting with transition planning, if that would be helpful.

I would be pleased to meet with you to discuss this matter.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Thomas Detre". The signature is fluid and cursive, with the first name "Thomas" and last name "Detre" clearly distinguishable.

Thomas Detre, M.D.  
Chair, Board of Regents