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Vyhledávání, rešerše a další informačně-knihovnické služby v oblastech competitive intelligence

Papík, Richard
2016

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Richard Papík

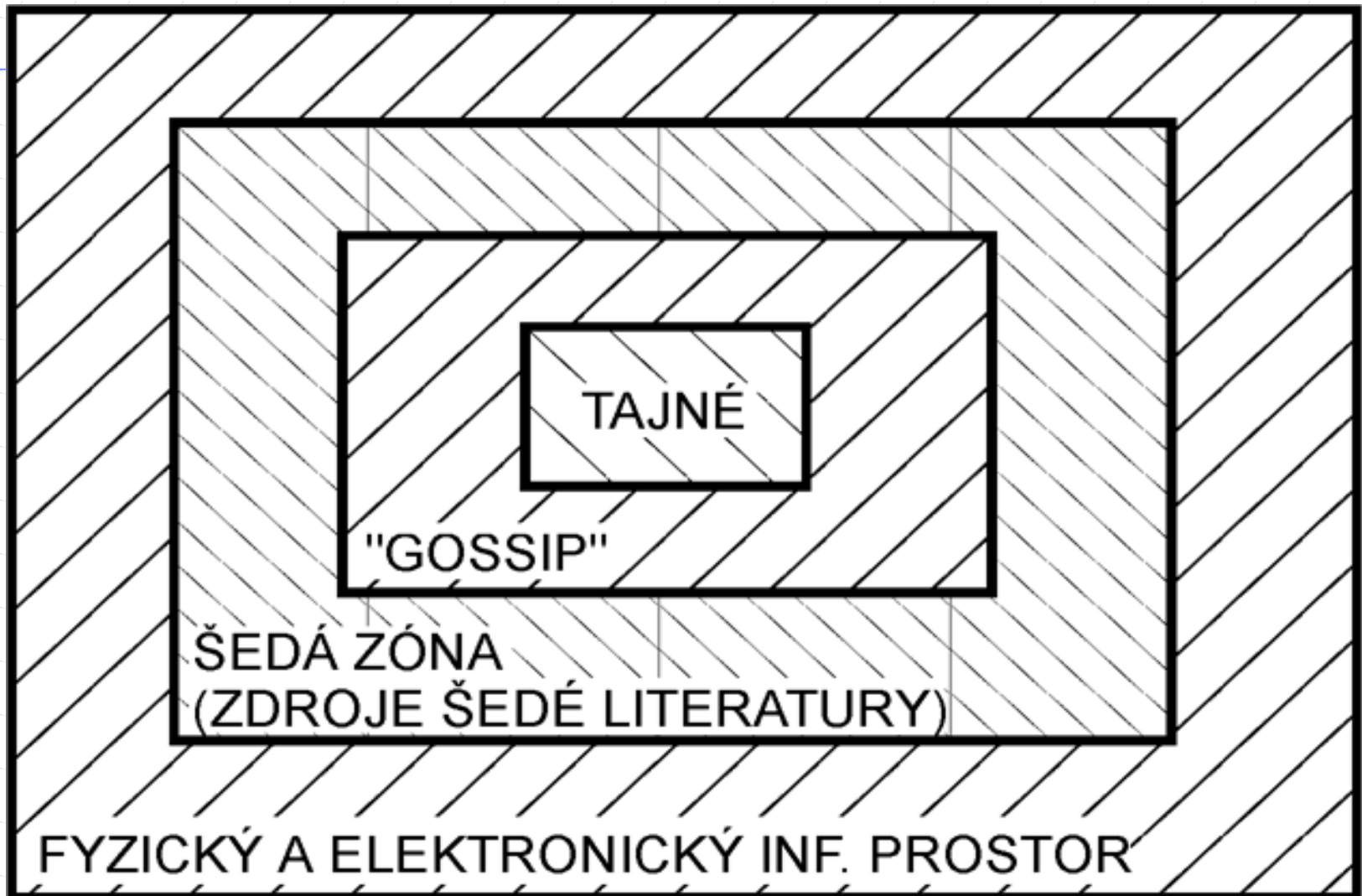
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<http://www.linkedin.com/in/papik>

<http://www.facebook.com/richard.papik>

Searching Session 2016

Akce konaná v úterý 4.10. 2016 v Národní technické knihovně v Praze, venku nádherně deštivo, což je přímo ideální pro seminář nebo četbu ...



?

**Co je competitive intelligence a co
možná není, a také co zásadně
není...**

REALLY NOT A SIMPLE ANSWER

WHAT'S THE "Oj"?

(also **Bi, Mi**)

STRATEGY: FINANCIAL... ANALYSIS
MANAGER'S GAME

(WAR)
btw: COMPETITIVE GAMES
(~ GAME THEORY)



RODNEY'S LECTURE

THEORY
ON SES

CORPORATE COMBAT

ETHIC

INFORMATION WORK / LIBRARIANSHIP

TEAM WORK

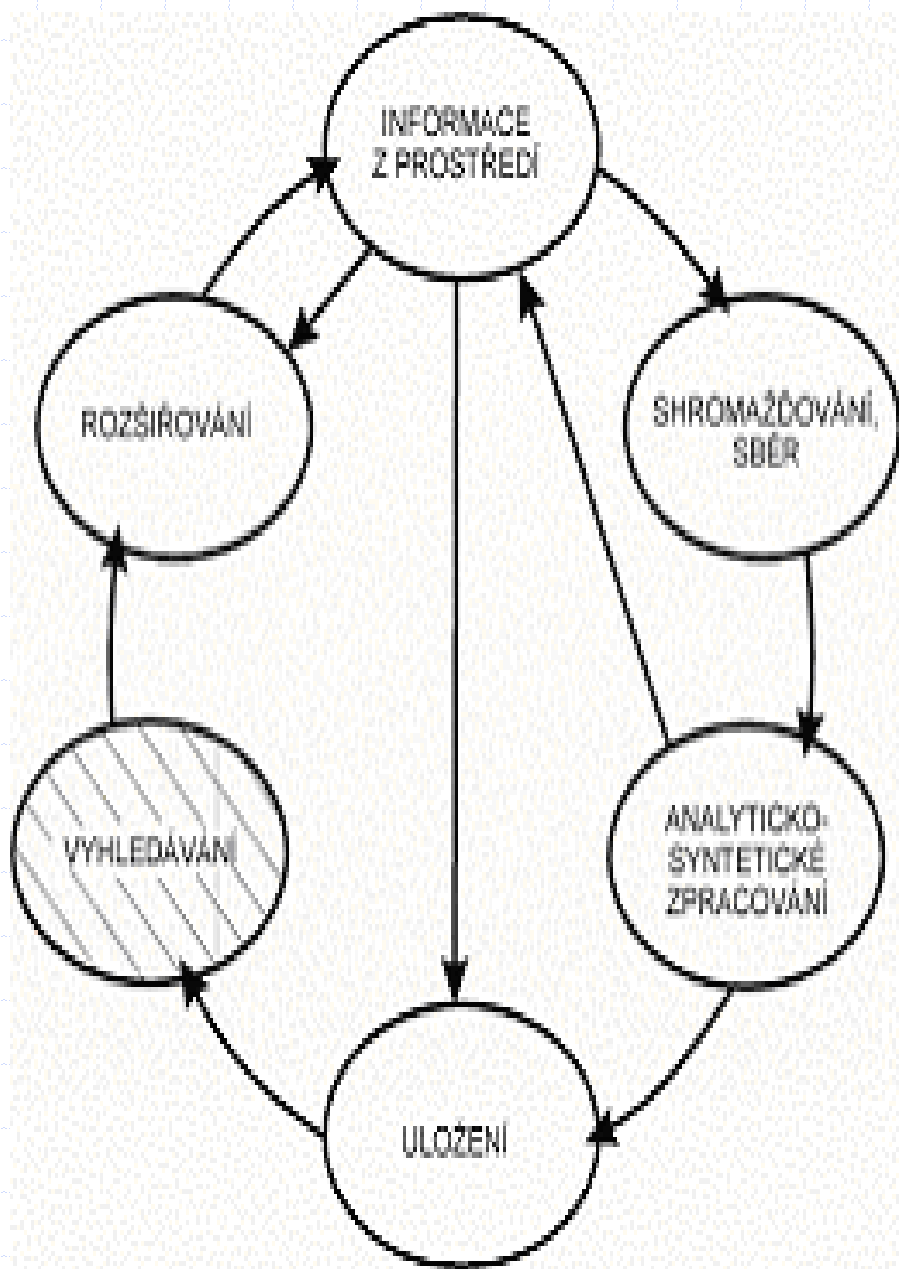
DIPLOMACY

CORPORATE INTELLIGENCE AND ESPIONAGE (INDUSTRIAL)

SIMILARITY WITH MILITARY (INTELLIGENCE)

"SYNONYMS" (SOMETIMES)

- COMPETITIVE 1.
- COMPETITOR 1.
- COMPANY 1.
- CORPORATE 1.
- MARKET 1.
- BUSINESS 1.



... důsledky pro profesi

Profese:

- ◆ Competitive Intelligence Professional
- ◆ Chief Information Officer
- ◆ Chief Knowledge Officer
- ◆ Research and Information Specialist
- ◆ Research Analyst
- ◆ Knowledge Analyst
- ◆ ale také Science Librarian, information officer ph.

Vztah ke knihovnicko-informační praxi:

- ◆ *<http://www.sla.org>, <http://www.ala.org>*
- ◆ *<http://www.aiip.org>,*
- ◆ *<http://www.scip.org>*

Kategorizace a výběrově příklady

◆ HUMINT

◆ GEOINT

◆ MASINT

◆ FININT

◆ TECHINT

◆ ...

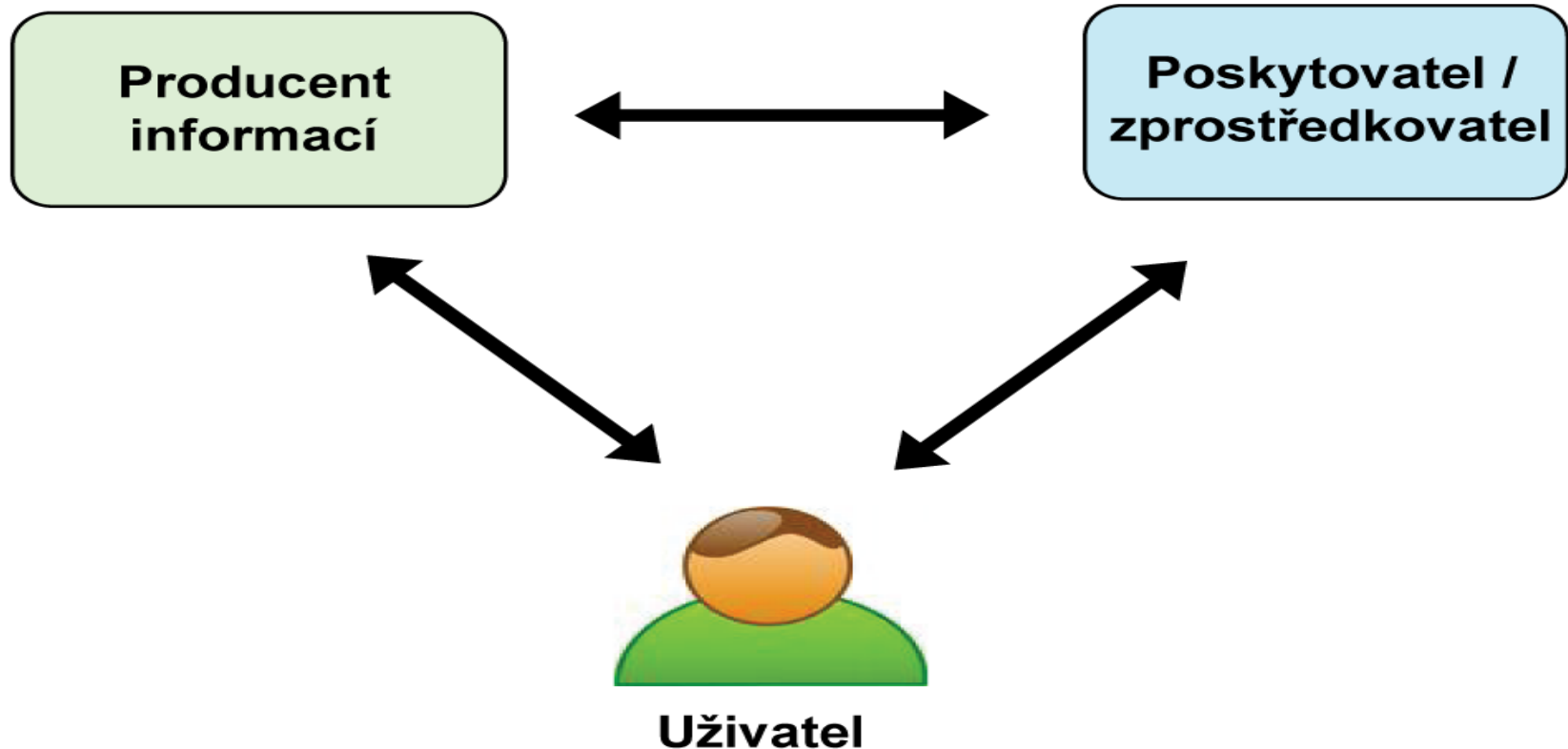
◆ **OSINT**

Typologie a vhodnost KI služeb, zkoumání informačního chování uživatelské skupiny

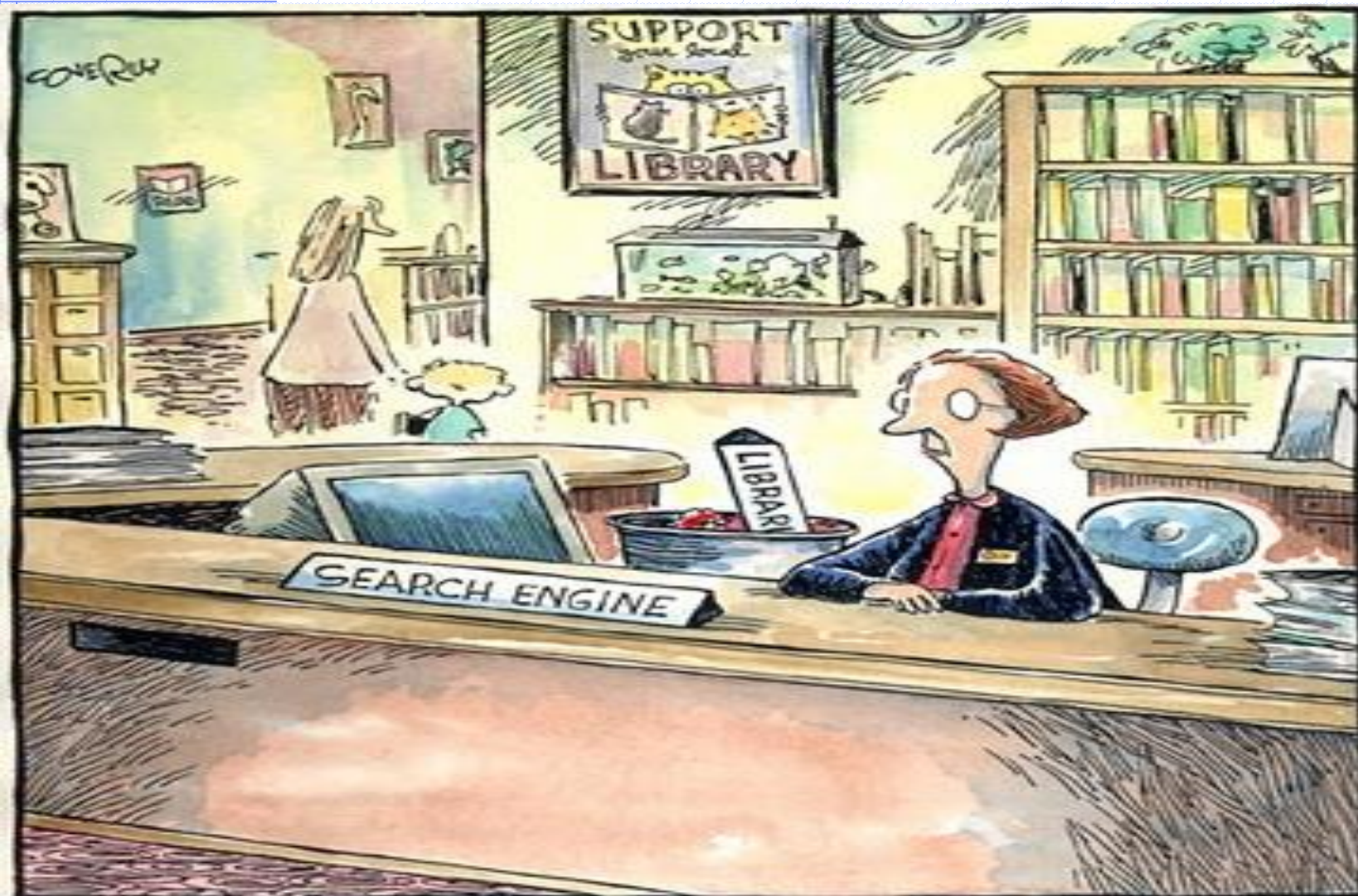


Umístění informačního brokeringu k informačnímu průmyslu

Tři základní subjekty informačního průmyslu



Jsou knihovny a jim podobné instituce vhodné pro služby uživatelům se vztahem k CI? ... **jsou a jak** 😊





Komentování případových úloh ...

Mapping the Indian nanotechnology innovation system

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Author(s): Amit Kumar (Centre for Studies in Science Policy, Jawaharlal Nehru University, New Delhi, India)
Pranav N. Desai (Centre for Studies in Science Policy, Jawaharlal Nehru University, New Delhi, India)

Citation: Amit Kumar , Pranav N. Desai , (2014) "Mapping the Indian nanotechnology innovation system", World Journal of Science, Technology and Sustainable Development, Vol. 11 Iss: 1, pp.53 - 65

DOI: <http://dx.doi.org/10.1108/WJSTSD-09-2013-0039>

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Abstract:
Purpose
– The purpose of this paper is to map out the Indian nanotechnology innovation system. An attempt is made to identify the dominant actors, collaborative pattern and analyse the role of and interactions between the actors and institutions.

Design/methodology/approach

– A combination of frameworks such as national and international system of innovation is used to include all possible actors and institutions involved. A scientometric analysis is also carried out.

Findings

– Despite a series of government interventions discernible in various programmes since the 1980s, nanotechnology-based industries are yet to emerge as a dominant sector. The health sector has emerged as one of the major contributors in terms of nanotechnology applications. There are many other challenges of safety and standards, socioeconomic, ethical and environmental concerns. Academic R&D labs are active in technology transfer.

Research limitations/implications

– A scant literature is available for this sector in India and especially from the international innovation system framework to analyse the socioeconomic and risk governance issues.

Practical implications

– A scant literature is available for this sector in India and especially from the international innovation system framework to analyse the socioeconomic and risk governance issues.

Originality/value

– A scant literature is available for this sector in India and especially from the international innovation system framework to analyse the socioeconomic and risk governance issues.

Keywords: India, Nanotechnology, Innovation systems, International collaborations

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Online from: 2010

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Keywords: India, Nanotechnology, Innovation systems, International collaborations

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Components of Participating Organizations	National Institute of Biomedical Imaging and Bioengineering (NIBIB) National Cancer Institute (NCI) National Eye Institute (NEI) National Human Genome Research Institute (NHGRI) National Heart, Lung, and Blood Institute (NHLBI) National Institute on Aging (NIA) National Institute on Alcohol Abuse and Alcoholism (NIAAA) National Institute of Allergy and Infectious Diseases (NIAID) National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) National Institute on Drug Abuse (NIDA) National Institute on Deafness and Other Communication Disorders (NIDCD) National Institute on Dental and Craniofacial Research (NIDCR) National Institute of Environmental Health Sciences (NIEHS) National Institute of Neurological Disorders and Stroke (NINDS) National Institute of Nursing Research (NINR)
Funding Opportunity Title	Nanoscience and Nanotechnology in Biology and Medicine (R21)
Activity Code	R21 Exploratory/Developmental Research Grant Award
Announcement Type	Reissue of PA-08-053
Related Notices	None
Funding Opportunity Announcement (FOA) Number	PA-11-149
Companion FOA	PA-11-148 , R01 Research Project Grant
Number of Applications	See Section III. 3. Additional Information on Eligibility
Catalog of Federal Domestic Assistance (CFDA) Number(s)	93.286, 93.113, 93.867, 93.837, 93.172, 93.866, 93.173, 93.121, 93.113, 93.853, 93.279, 93.273, 93.361, 93.865, 93.846 93.855, 93.856
FOA Purpose	This initiative, issued by the National Institutes of Health, encourages applications from institutions/organizations that apply nanoscience and nanotechnology approaches to address problems in biology and medicine. The purpose of this FOA is to provide support for cutting-edge nanoscience and nanotechnology research that applies biomedical knowledge and new investigations into the diagnosis, treatment and management of an array of

Komplexnost, na klíč, s přidanou hodnotou apod.

Ambivalence a současně symbióza:

- end-user (koncový uživatel) - ?
- information broker (zprostředkovatel, prostředník) - ?
- end user x final user (koncový x konečný uživatel) - ? (Gartner, EIU aj.)



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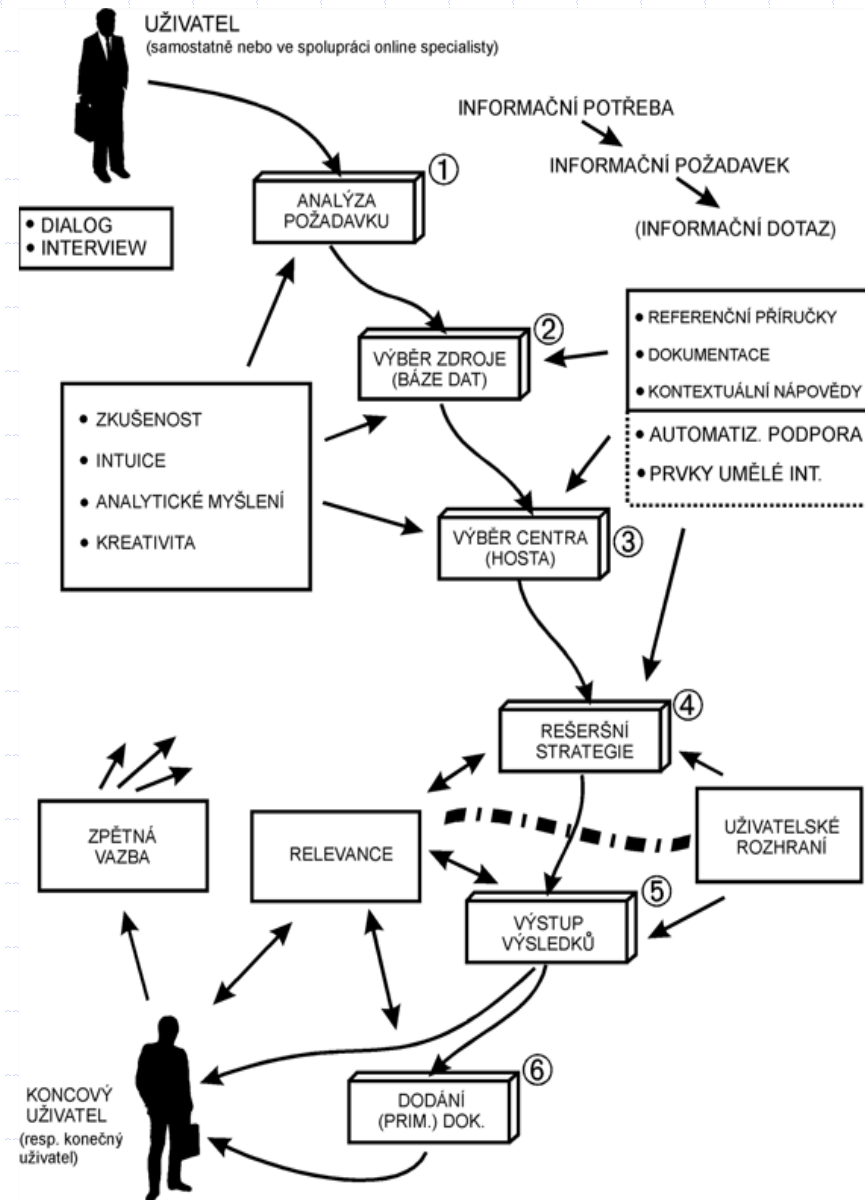
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

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Abstract (Summary)

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
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2010 FEB 14 - (<<http://www.newsrx.com>> NewsRx.com) -- Life Science Intelligence (LSI) announced that medical technology investment banking veteran Christopher J.P. Velis of Medical Capital Advisors would kick off their Emerging Medical Technologies Spotlight - an online event showcasing 40 emerging medical device companies - with an industry presentation titled "Valuations and Exit Strategies for Medtech Companies in the New Economy: The 10 Things Every Startup, Investor, and Dealmaker Needs to Know." Mr. Velis' one-hour industry presentation, which will be released in an interactive webinar format, will provide startup CEOs, business development executives, and venture capitalists with a practical and realistic picture of what to expect in terms of valuations and exits in 2010. Mr. Velis' discussion will be followed by detailed business presentations from the CEOs of 40 privately-held emerging medical device companies selected by event host Life Science Intelligence. Each of the 40 presenting companies is seeking strategic partners and/or raising capital. Register here to access the event (see also <<http://www.newsrx.com/library/topics/Life-Science-Intelligence.html>> Life Science Intelligence).

Attendees receive online access to Mr. Velis' presentation and 10-15 minute CEO presentations (audio and slides); a notebook of executive summaries; and detailed information, such as: development stage, competitive landscape and positioning, technological advantage, target markets, sales forecasts, financial and fund raising status, management team, IP position, exit strategy, and contact details.

Companies on the program thus far include: Aardvark Medical, Advanced Ophthalmic Pharma, Angel Medical Systems, ArtVentive Medical, Bakhtar Medical Imaging, Biomedix, Branching Tree, CardioMag, Cardioux, Epinex Diagnostics, Heart Test Labs, Izun Pharmaceuticals, Lerner Medical Devices, LightIntegra, MEDTRONS, Mobius Therapeutics, Near Infrared Imaging, NuOrtho Surgical, Optical Imaging, Pico-Tesla Magnetic Therapies, PolyRemedy, Qscope, Renova Orthopedics, Sara Medical Devices, Seguro Surgical,

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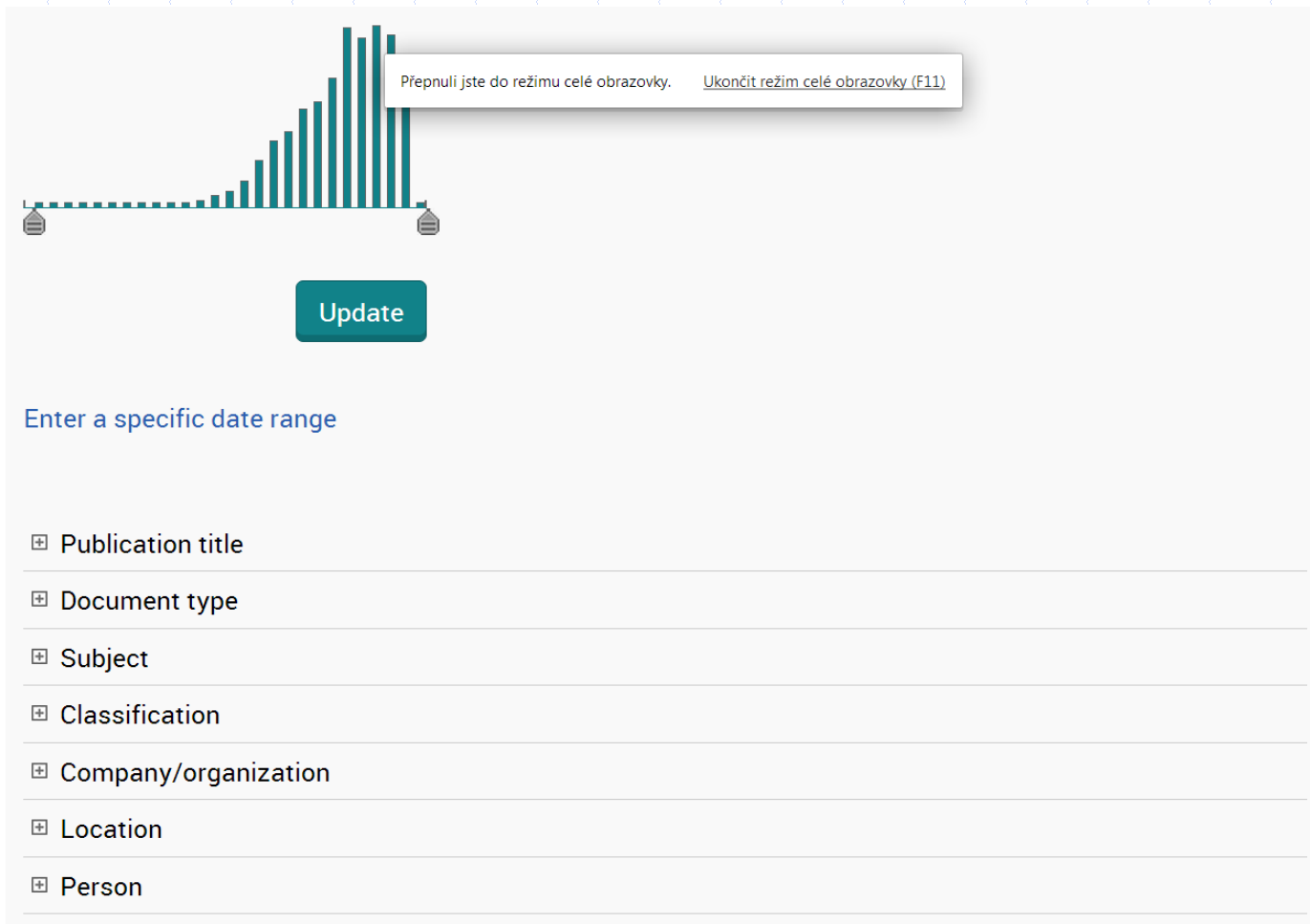
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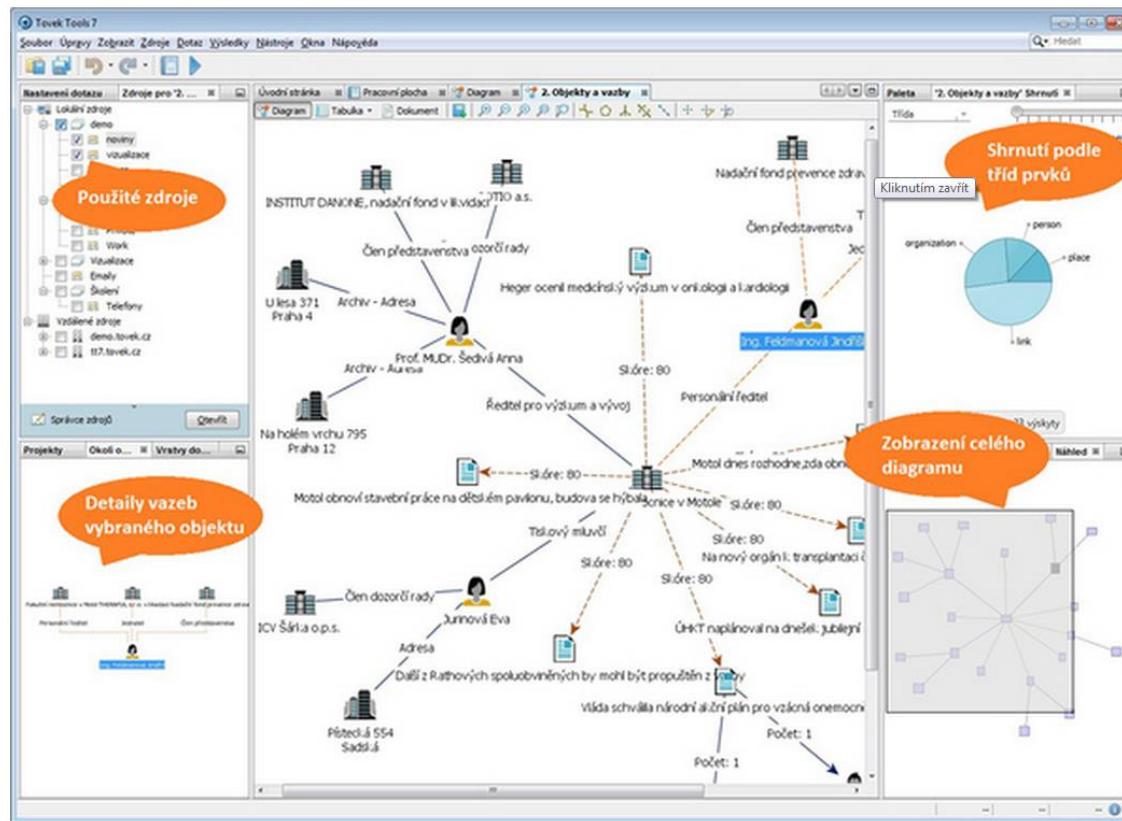
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Combine association, temporal and geospatial data visualization to provide multidimensional views and aid comprehension

The screenshot displays the IBM I2 Analyst's Notebook interface. At the top, a menu bar includes File, Home, Arrange, Style, Analyze, Selection, View, and Publish. Below the menu is a toolbar with various analysis tools such as Find Text, Find Path, Find Connected Network, and Social Network Analysis. The main workspace is divided into three panels: a network graph at the top showing nodes and connections, a histogram on the right showing data distribution over time, and a geospatial map at the bottom showing flight routes across the North Atlantic and surrounding regions. The histogram shows data points for quarters from Q2 2004 to Q2 2012. The map shows flight paths connecting major cities like New York, London, and Paris.

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Twenty-two years ago, the largest gene found in nature was isolated, and a year later it was sequenced. This 2.4Mb leviathan encoded no mere housekeeping protein – its 3685-amino-acid product, a rod-shaped human muscle protein now known as dystrophin, is of profound significance to families affected by the various forms of muscular dystrophy, a disease which occurs in 1 in 3500 newborn males.

However, 22 years on, the slow progress of gene therapies to market has been profoundly disappointing in all sectors, not only for muscular dystrophy or other genetic diseases – as yet, following a quarter of a century of frenetic R&D activity, there are still only two gene therapies launched worldwide, and both of these are for cancer...



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Mergers, Acquisitions & Joint Ventures

Onyx Pharmaceuticals has acquired Proteolix.

ACE Biosciences has become a subsidiary of Zymenex.

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Newly identified drug protein targets.

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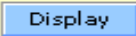
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Drug Name: adefovir dipivoxil (BAN)

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Accession Number

2005664

Drug Name

adefovir dipivoxil (BAN)

Synonyms

GS 840, **HEPSERA**, RESPUR, PREVEON

Highest Phase

Marketed

Active Program

Yes

Chemical Name

2,2-dimethylpropanoic acid [2-(6-amino-9H-purin-9-yl)ethoxy]methyl]phosphinylidene]bis
(oxymethylene) ester

CAS Registry Numbers

142340-99-6 (adefovir dipivoxil), 220351-05-3 (cpd with succinic acid (1:1)), 220351-03-1 (fumarate (1:1)), 220351-10-0 (maleate (1:1)), 220351-14-4 (cpd with L-ascorbic acid (1:1)), 220351-22-4 (cpd with methanol (1:1)), 220350-43-6 (dihydrate), 220350-98-1 (monocamsilate), 220350-82-3 (monomesilate), 220350-60-7 (monohydrobromide), 220350-68-5 (monohydrochloride), 220350-82-3 (monoessilate), 220350-94-7 (mono-1-naphthalenesulfonate), 220350-89-0 (mononapsilate), 220350-73-2 (mononitrate), 220351-17-7 (mononicotinate), 220350-52-7 (sulfate (2:1))

General Comments

20030609 pc Launch. Gilead Sciences' reverse transcriptase inhibitor, adefovir dipivoxil (**HEPSERA**), has been launched in Germany for the treatment of chronic hepatitis B virus infection.

Company Information

Originator: Bristol-Myers Squibb, USA

Licensee: Gilead Sciences, USA

Licensee: GlaxoSmithKline, UK

Indication

[cytomegalic inclusion disease](#), [hepatitis](#), [viral infection](#)

EphMRA Code

J5B Antivirals, Excluding Anti-HIV Products

Latest Change

20030609

Commercial Summary

Gilead Sciences is developing a mononucleotide analogue, adefovir dipivoxil, an oral, once-daily prodrug of adefovir, for the treatment of viral infection. Applications for marketing approval of the agent in the treatment of chronic hepatitis B virus (HBV) infection, in treatment-naive and treatment-experienced patients, have been made in the USA and Europe (Gilead Sciences, MAR 2002). The US FDA approved the agent as a treatment for HBV infection and a launch has subsequently taken place in this market (Gilead Sciences, SEP 2002). The agent has also been approved in Europe as a treatment for HBV infection, and launches have taken place in the UK (Pharmaceutical Journal, APR 2003) and Germany (IMS, APR 2003). Filings have been submitted to regulatory authorities in Australia, Canada and Switzerland (Gilead Sciences, MAR 2003). An early access program was initiated in the USA for use of adefovir dipivoxil 10 mg in the treatment of patients with chronic HBV infection resistant to lamivudine and the program has been extended to Canada, Australia, and most European countries

Licensing Status

Unavailable for Licensing: Japan

Unavailable for Licensing: Taiwan

Unavailable for Licensing: South Korea

Unavailable for Licensing: China

Patent Assignee

Bristol-Myers Squibb

Patent Summary

Product: EP 481214 B 1998, priority US 583906 1990, designating 14 states. Equivalents identified in five countries.

Development Status

Marketed: USA, hepatitis

Phase III: USA, cytomegalic inclusion disease

Marketed: UK, hepatitis

Marketed: Germany, hepatitis

Registered: Europe, hepatitis

Pre-registration: Switzerland, hepatitis

Pre-registration: Canada, hepatitis

Pre-registration: Australia, hepatitis

Phase III: South-East Asia, hepatitis

Phase I: China, hepatitis

Substance Origin

chemical synthesis

Mechanism of Action

[reverse transcriptase inhibitor](#), [nucleotide analogue](#)

Clinical Overview

In vitro, adefovir dipivoxil is effective against most drug-resistant HIV strains including with a Q151 mutation, and shows synergy with nucleoside analogues and proteinase inhibitors (Gilead Sciences, MAY 1997). Oral adefovir dipivoxil is rapidly converted to adefovir. Adefovir dipivoxil was associated with reduced p24 antigenemia and transient increases in CD4 counts in some patients infected with HIV. A phase I/II trial showed that once daily adefovir dipivoxil was safe and well tolerated at three different dose levels and caused a drug related decrease in p24 antigen levels in HIV-infected patients. Side effects included mild to moderate gastrointestinal symptoms. Oral bioavailability for adefovir dipivoxil was 40%. A phase I/II, trial showed adefovir dipivoxil at doses of 125 or 250 mg/day produced sustained increases in CD4 cell counts of 46 and 15 cells/mm³ from baseline, respectively, versus -41 cells/mm³ for placebo following 6 week treatment. Viral load, as measured by HIV RNA, was decreased by median -0.5 log copies/mL and -0.4 log copies/mL at the 125 and 250 mg doses, respectively. Detectable CMV levels were reduced in comparison with placebo in a subset of patients. In study 411 involving treatment-naive HIV-positive patients receiving adefovir dipivoxil, indinavir and one or two reverse transcriptase inhibitors (zidovudine, lamivudine or stavudine), or standard triple therapy (zidovudine, lamivudine and indinavir), 80% of patients receiving regimens with or without adefovir dipivoxil had undetectable levels of HIV RNA at 20 week. Triple drug regimens containing adefovir dipivoxil increased CD4 cells by 92 cells/mm³, compared with an increase of 66 cells/mm³ with the standard triple therapy. Elevations in liver transaminase and creatine kinase occurred in 8% and 3% of the adefovir dipivoxil group and 5% and 5% of the standard group, respectively (Gilead Sciences, APR 1998). In study 408, 442 HIV-positive patients were randomized to receive 120 mg adefovir dipivoxil (219 patients) or placebo (223 patients) once daily in addition to current antiretroviral therapy. In

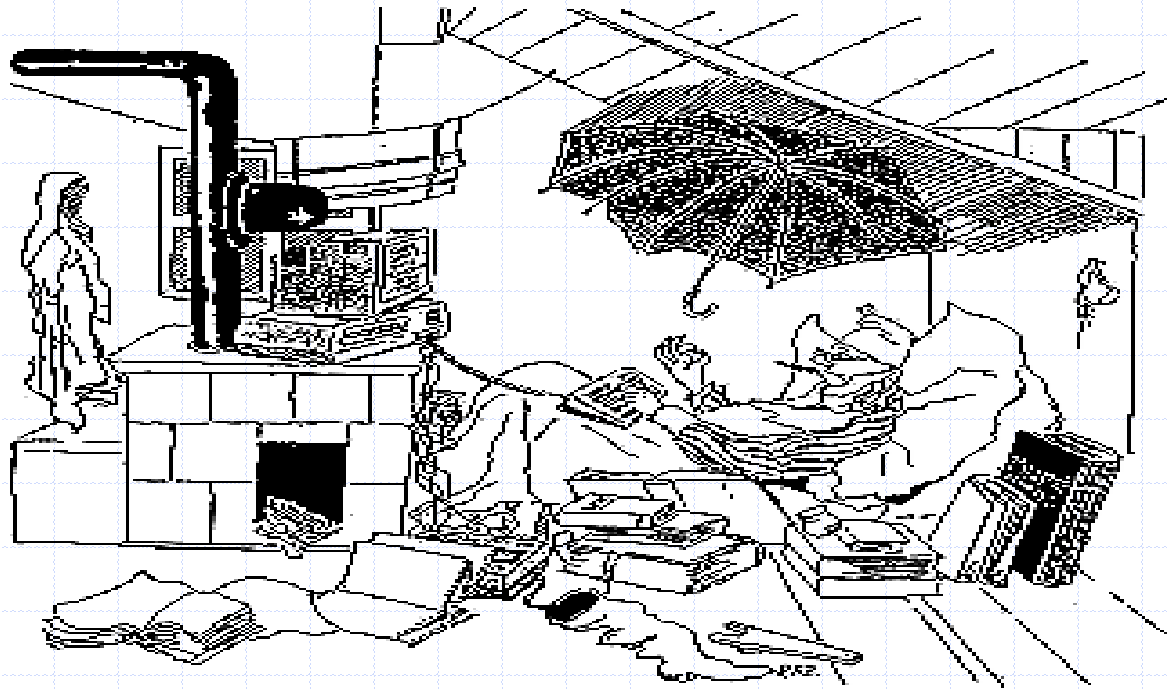
Drug Development History

- 200304: Marketed, UK, Germany (HBV).
- 200303: Registered, Europe (HBV).
- 200211: Recommended, Europe (HBV).
- 200209: Registered and Marketed, USA (HBV).
- 200208: Recommended, USA (HBV).
- 200204: Licensing agreement between Gilead Sciences and GlaxoSmithKline.
- 200203: Pre-registration, USA, Europe (HBV).
- 200101: Phase I, China (HBV).
- 199912: Discontinued (HIV).
- 199910: Pre-registration, Europe (HIV). Approval not recommended, USA (HIV)
- 199904: Phase III, USA, Europe, Canada, Australia, Asia (HBV).
- 199903: Expanded access program expanded.
- 199901: Pre-registration, USA.
- 199811: Fast track designation.
- 199703: Phase II, USA, UK, Australia, Canada (HBV).
- 199701: Phase III, USA (HIV, CMV).
- 199606: Phase II/III, USA (HIV).
- 199504: Phase I/II, UK, (HBV).
- 199408: Phase I/II, USA (HIV).
- 199404: Phase I, USA.
- 199401: Preclinical, USA.
- 199009: Priority product patent application filed, USA.

Update Code

20030605

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