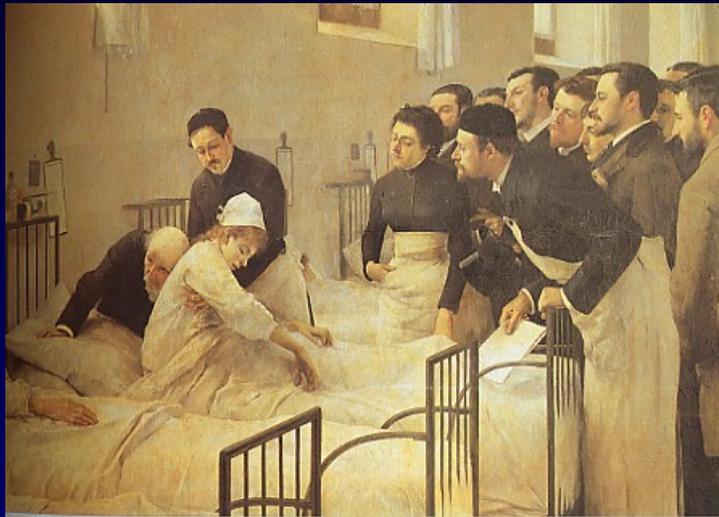


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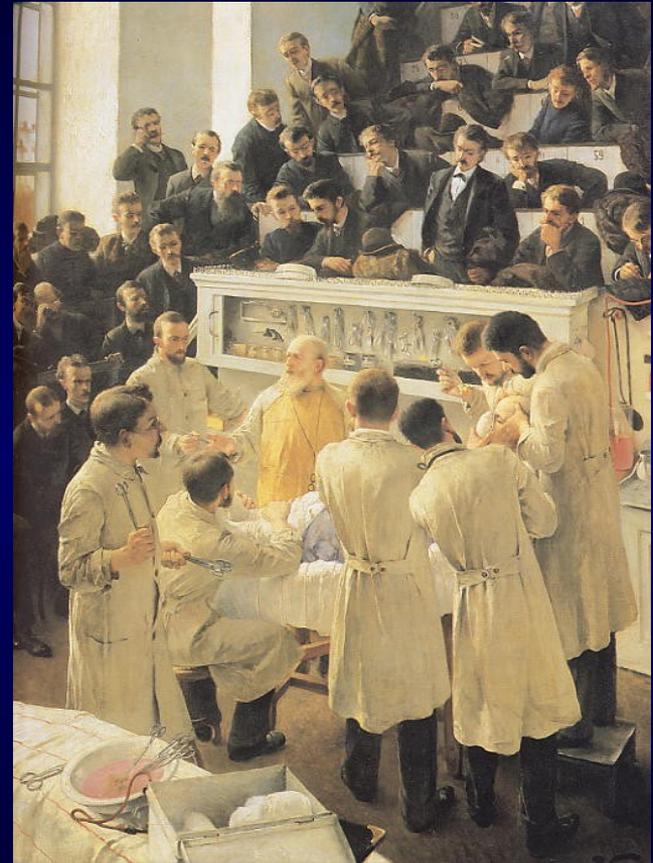
# La Ricerca Bibliografica

- Banche-dati elettroniche
- Tecniche di consultazione





Jean-Martin Charcot, 1825-1893



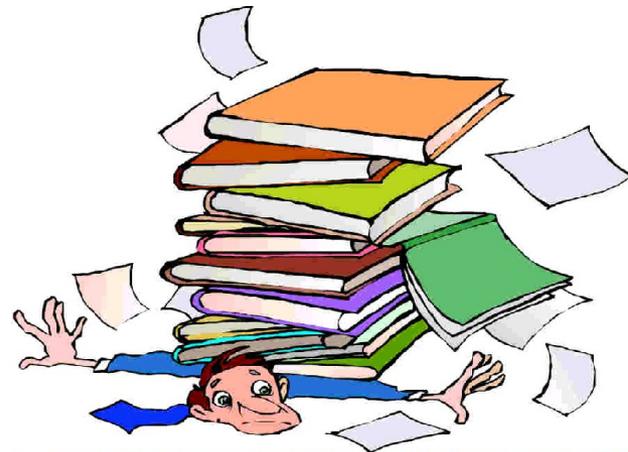
Prof. Billroth.  
Vienna, 1890

# La mole delle conoscenze mediche..

5000 nuovi articoli ogni giorno

1250 articoli selezionati per MEDLINE ogni giorno

55 nuovi studi clinici randomizzati (RCT)



**28 Kg. di Linee-guida**

# Quanto leggiamo durante la nostra pratica clinica ??

1/2 ora a settimana:	3%
1 ora a settimana:	46%
1 e 1/2 a settimana:	23%
2 ore a settimana:	20%
3 ore o più:	8%

**Per ogni malato si prendono in media  
40 - 50 decisioni critiche**

Ognuna può condizionare l'outcome

*“Il vero nemico della malattia è la conoscenza ”*

*Muir Gray*

# Fattori che condizionano le decisioni:

- ✓ esperienza personale
- ✓ letture sparse
- ✓ ricordi universitari
- ✓ opinione di colleghi anziani
- ✓ orientamento del responsabile
- ✓ **abitudini consolidate**

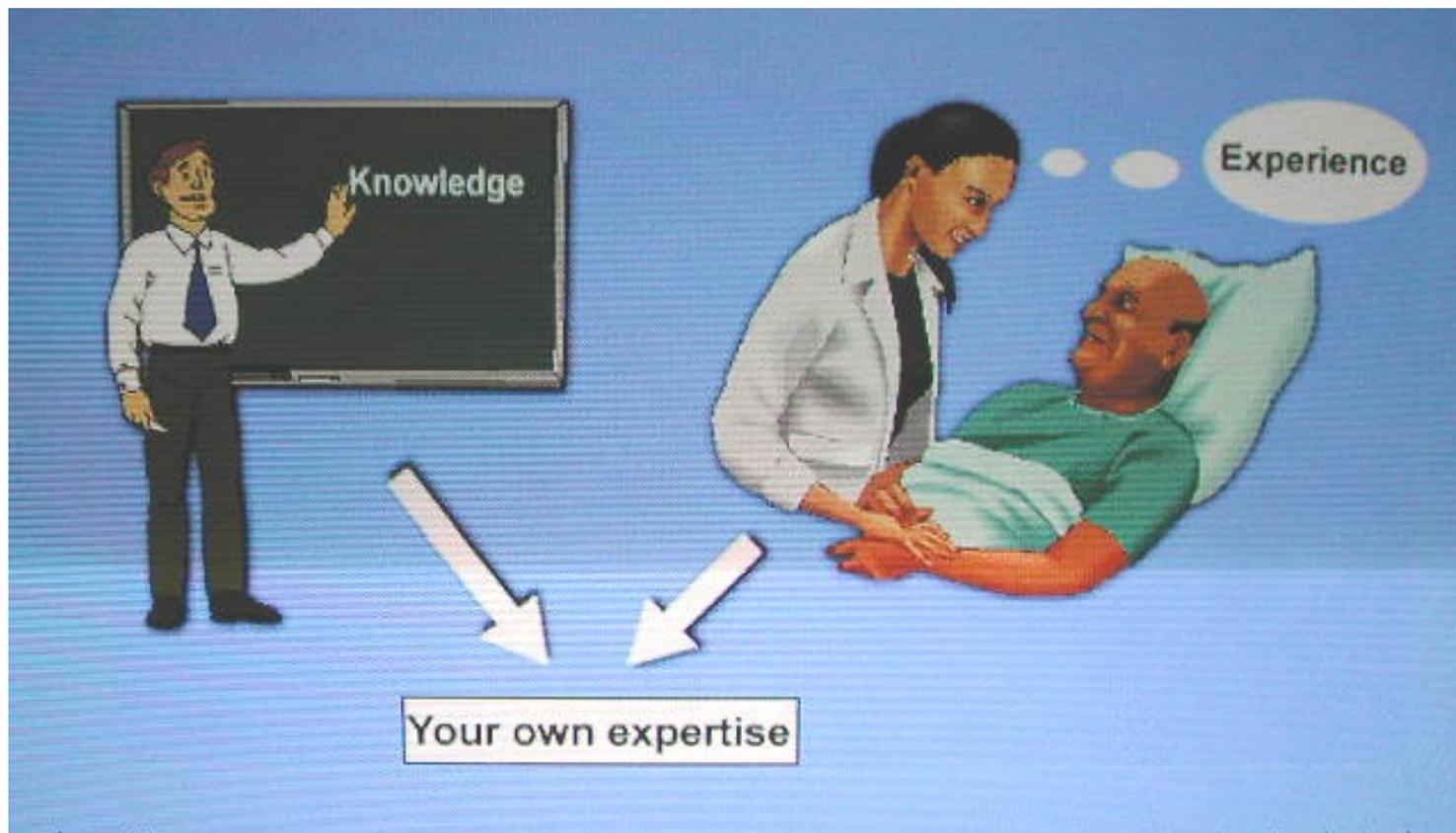
*“ è più facile perdere un regno che un’abitudine ”*

*Enrico IV*

**Una decisione sbagliata...**



**Il disastro umano della TALIDOMIDE**



La nostra competenza deriva dalla capacità di coniugare **CONOSCENZA**, **ESPERIENZA**, **VALORI** e **ASPETTATIVE** del paziente.

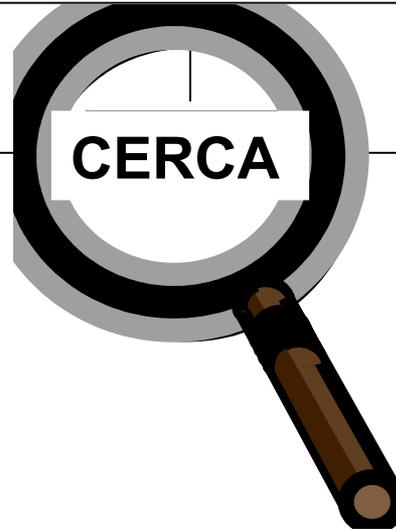
# Il metodo, 4 fasi:

---

1. Formulare il quesito
2. Cercare l'evidenza scientifica
3. Valutare l'attendibilità dei risultati
4. Valutarne l'applicabilità al nostro specifico contesto (*il mio paziente*)



**PROBLEMA** → Domanda rispondibile



Primari  
(MedLine)

Secondari  
(Cochrane)

**VALUTA**

**APPLICA**

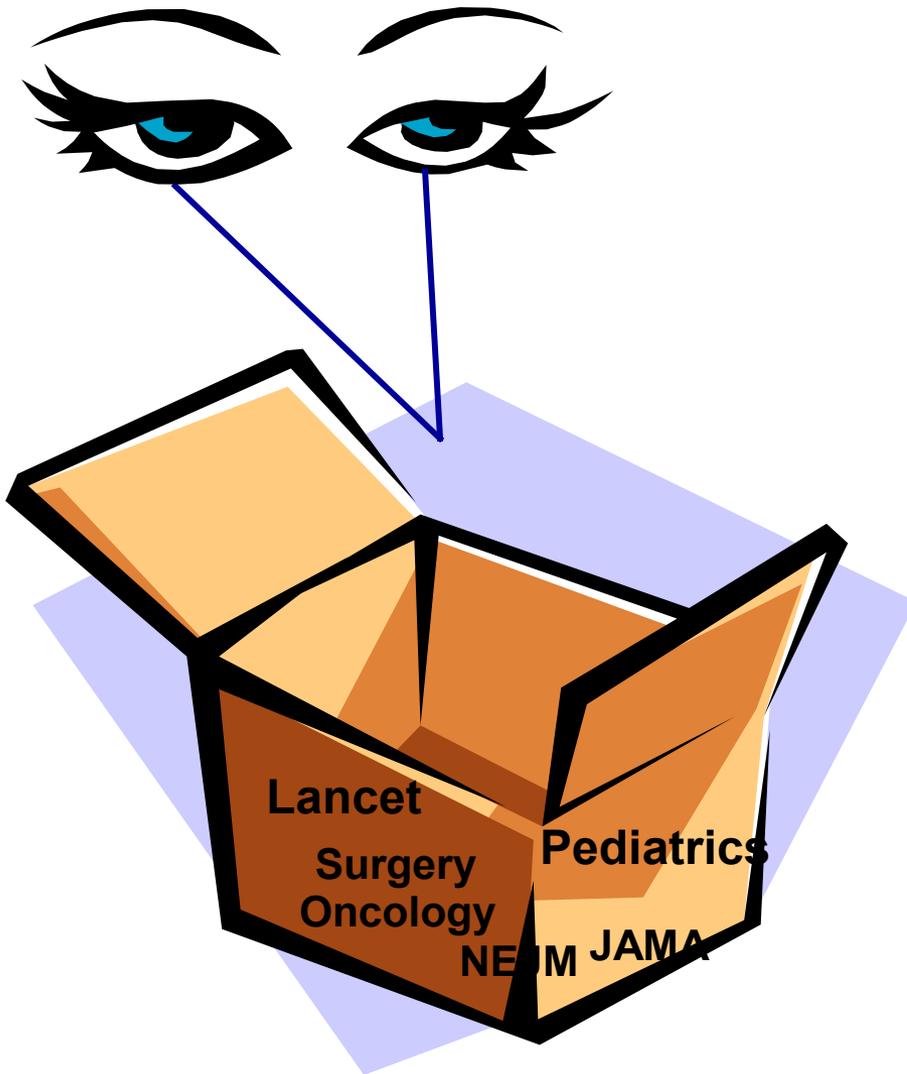
Conoscenza

Esperienza



**DECIDI !!**

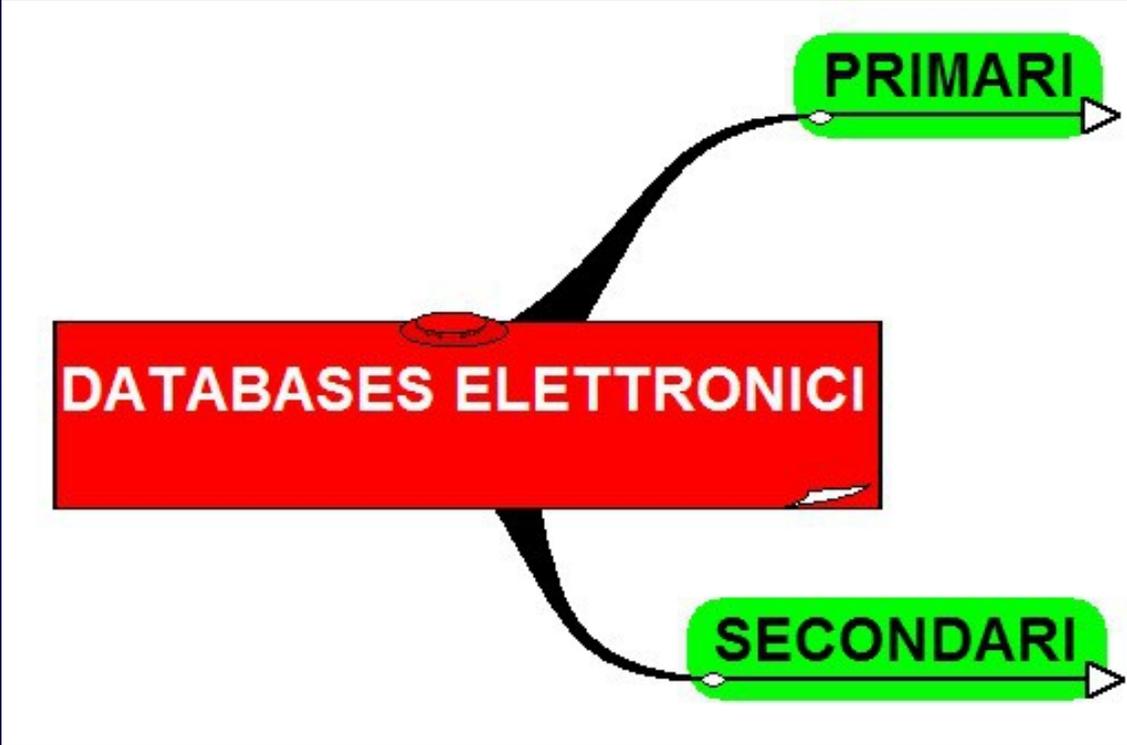
**PUBMED, SUMSEARCH, BIOMEDNET, KNOWLEDGE FINDER**



**MEDLINE**

**dal 1974**

**5200** riviste indicizzate  
di cui **384** infermieristiche  
**23M** di record



A mind map diagram with a central red rectangular box containing the text "DATABASES ELETTRONICI". Two black curved lines branch out from the right side of this box. The upper line leads to a green rounded rectangular box with the text "PRIMARI" and a white arrow pointing to the right. The lower line leads to another green rounded rectangular box with the text "SECONDARI" and a white arrow pointing to the right. The entire diagram is set against a white background.

**DATABASES ELETTRONICI**

**PRIMARI**

**SECONDARI**

# DATABASES ELETTRONICI

**PRIMARI**

GENERALI

SETTORIALI

**SECONDARI**

CLINICAL EVIDENCE

COCHRANE

# DATABASES ELETTRONICI

## PRIMARI

### GENERALI

MEDLINE

EMBASE

CINAHL

### SETTORIALI

AIDSLINE, CANCERLITE, TOXLINE, HEALTHSTAR

## SECONDARI

CLINICAL EVIDENCE RCT, Revisioni

COCHRANE Revisioni sistematiche

# DATABASES ELETTRONICI

## PRIMARI

### GENERALI

#### MEDLINE

farmacologia e scienze di base

#### EMBASE

più riviste europee

molto costoso

dal 1974 ad oggi

#### CINAHL

nursing

educazione sanitaria

servizi sociali

terapia occupazionale

testi integrali a pagamento

dal 1983 ad oggi

### SETTORIALI

AIDSLINE, CANCERLITE, TOXLINE, HEALTHSTAR

## SECONDARI

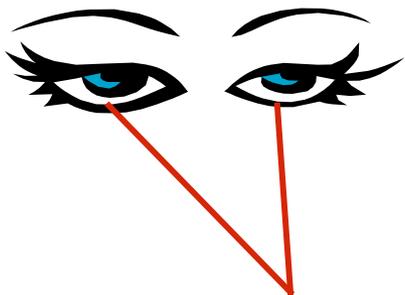
### CLINICAL EVIDENCE

RCT, Revisioni

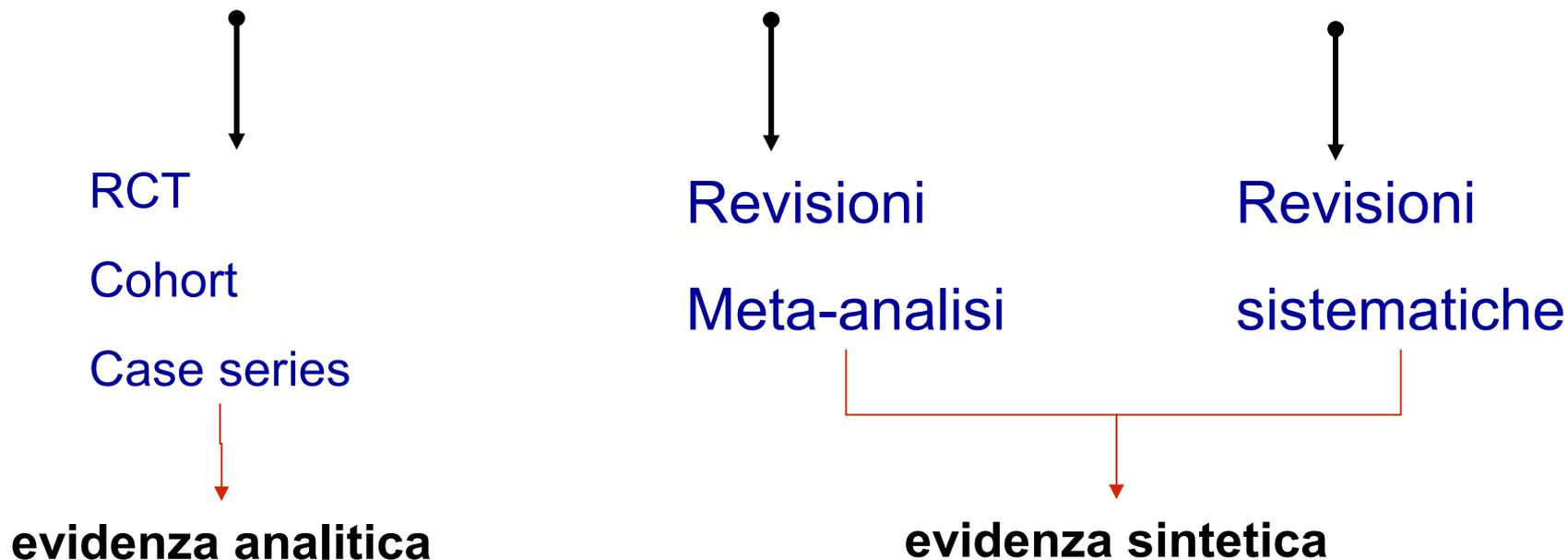
### COCHRANE

Revisioni sistematiche

**PUBMED** – accesso universale, gratuito ([www.ncbi.nlm.nih.gov/entrez](http://www.ncbi.nlm.nih.gov/entrez))



**MEDLINE – Clinical Evidence - Cochrane**



# **COSA C'E' IN QUESTI DATABASE ELETTRONICI ?**

---

## **1. Solo letteratura in lingua inglese:**

Se l'Autore non fornisce un Abstract in lingua inglese, l'articolo non viene indicizzato nel MEDLINE.

## **2. Letteratura "grigia" non presente:**

Capitoli di libri, Atti di Congressi, Tesi e Dissertazioni, Direttive emanate da Governi ed Organizzazioni (OMS).

## **3. Non è sempre presente il testo integrale degli articoli**

## **4. La ricerca va fatta usando termini in lingua inglese**

# Come vengono catalogati gli articoli (1)

---

- 1. Per testo libero (text-word):**  
ogni parola di Titolo e Abstract viene immessa nel DB  
e costituisce da sola un criterio di ricerca
- 2. Per categorie pre-definite, in base all'argomento trattato.**  
Tali categorie sono chiamate **MESH** (Medical Subject Headings)
- 3. Per disegno di studio:**  
randomized controlled trial (RCT)  
clinical trial  
review/systematic review/overview  
meta-analysis

# Come vengono catalogati gli articoli (2)

---

I MeSH possono essere:

- termini medici standardizzati (es. *anemia, diabetes, etc..*)
- possono indicare argomenti significativi trattati nell'articolo (es. *nutrition, economics, etc..*)
- possono avere specifiche funzioni (es. *comparative study*)

Ogni MeSH ha a sua volta dei sotto-gruppi (**sub-headings**) che dettano aspetti particolari di un argomento (**MeSH tree**) o suddividono l'argomento nelle classiche categorie di:

epidemiologia, diagnosi, complicanze, effetti collaterali, prognosi, terapia, prevenzione, etc..

Esempio:

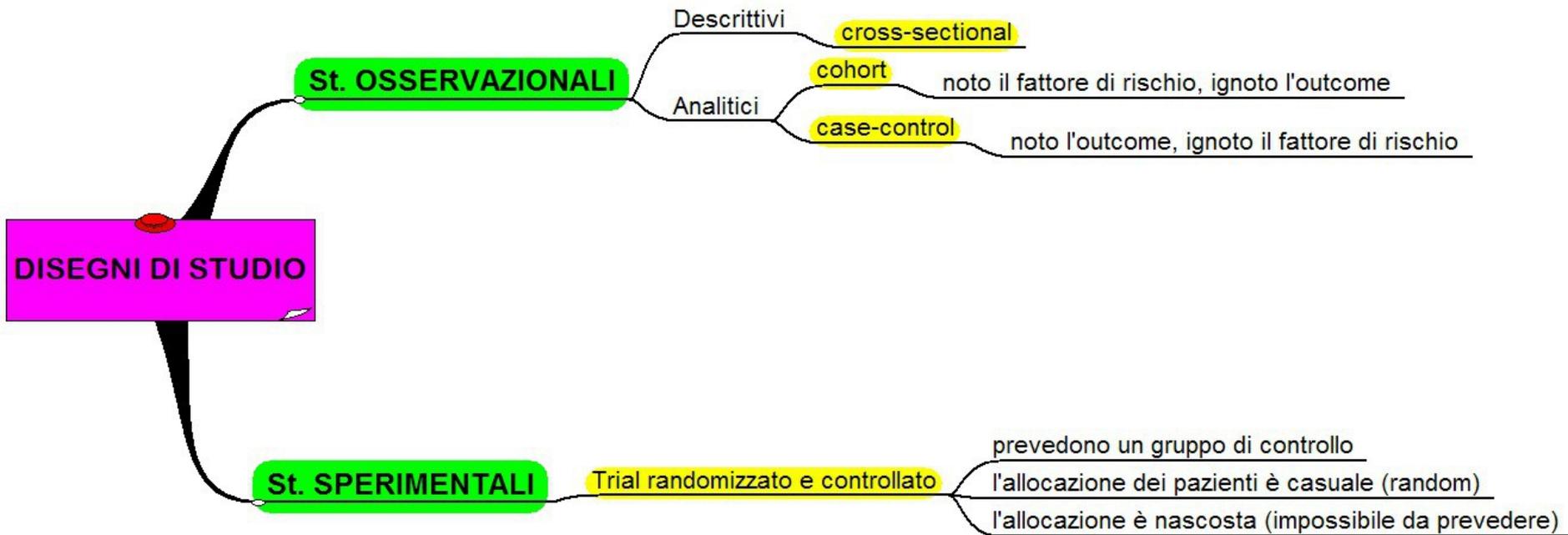
**Anemia**

**Anemia, aplastica**

**Anemia, congenital dyserythropoietic**

**Anemia, hemolytic**

**Anemia, hemolytic, autoimmune..**



Solo gli studi randomizzati e controllati (RCT) dimostrano una relazione causa-effetto.

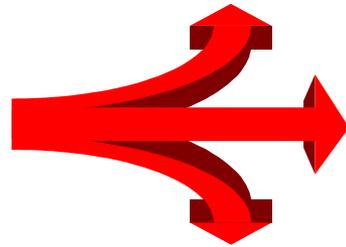
# REVIEWS



Studi che fanno 'la somma' di altri studi  
(la sintesi dell'evidenza)

**REVIEWS**

**narrative reviews**



**systematic reviews**

**meta-analysis**

# La gerarchia dell'evidenza

---

1. Revisioni sistematiche e meta-analisi
2. Studi clinici controllati randomizzati (RCT)
3. Cohort studies (studi a follow-up)
4. Case-control studies (studi caso-controllo)
5. Cross-sectional surveys
6. Case reports

# Scegliere il tipo di ricerca

## Il miglior tipo di ricerca per rispondere ai quesiti clinici

	Qualitative	Cross Sectional	Case Control	Cohort	RCT	Systematic Review
Diagnosi				√	√ √	√ √ √
Trattamento				√	√ √	√ √ √
Prognosi				√ √ √		
Screening			√	√	√ √	√ √ √
Vedute, beliefs & percezioni	√ √ √					
Innovazioni manageriali	√		√	√	√ √	√ √ √
Prevalenza / Generazione di ipotesi	√ √ √	√ √ √	√ √ √			

# LIMITI DEI DATABASE ELETTRONICI

---

1. Sono incompleti (MEDLINE contiene solo 1/3 delle riviste)
  2. Gli algoritmi di ricerca sono imperfetti
- Un bibliotecario esperto può trovare il triplo degli articoli di uno alle prime armi
  - la stessa ricerca effettuato dopo pochi giorni può fornire risultati diversi

# COME INIZIARE ??

Trasformare i problemi clinici  
in  
quesiti rispondibili



I databases vanno interrogati  
usando il loro linguaggio..

**PAROLE CHIAVI + OPERATORI BOLEANI**

Formulare correttamente il quesito



ci consente di..

Pianificare una strategia di ricerca bibliografica

*“ Quali sono i benefici ed i rischi di una terapia anticoagulante orale a lungo termine in confronto al trattamento con anti-aggreganti piastrinici nei pazienti con fibrillazione atriale non reumatica ?? “*

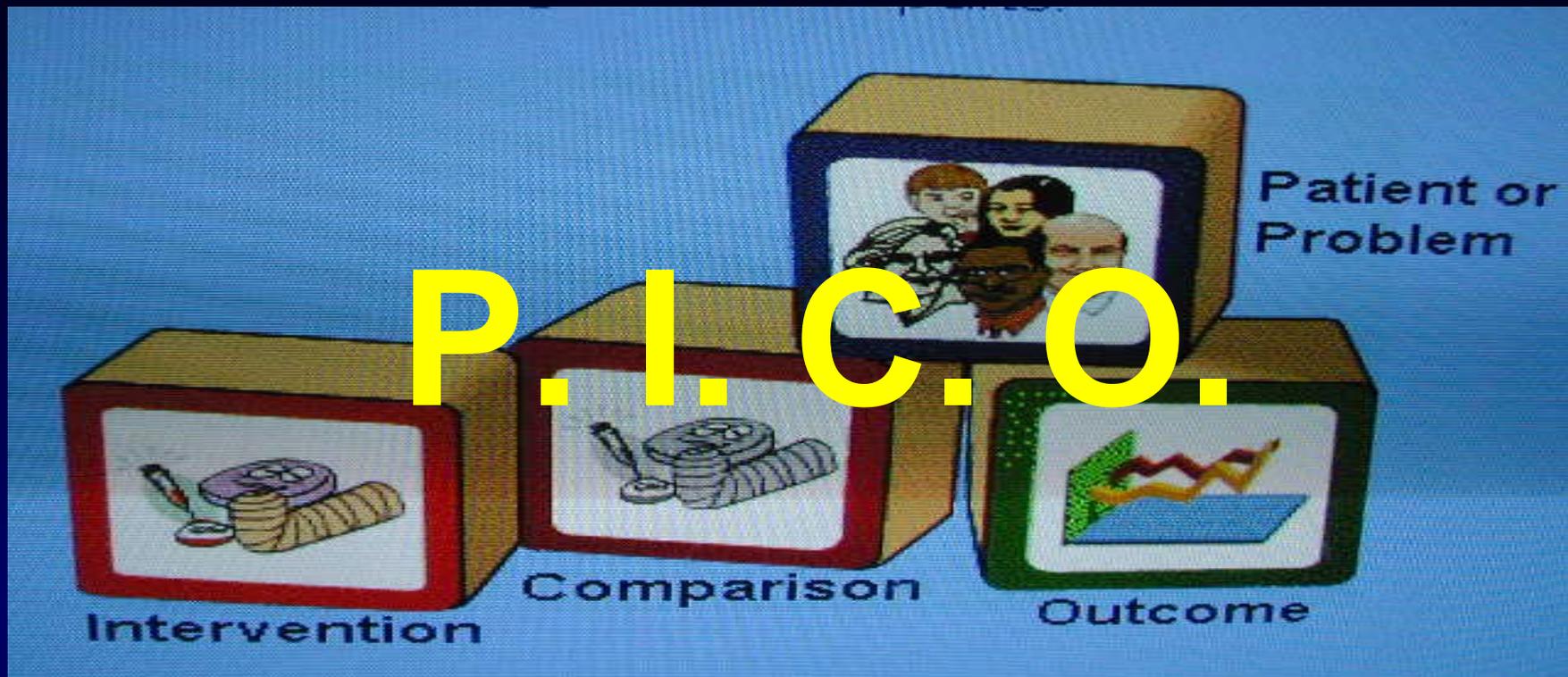
Un problema generico che va strutturato

In un quesito di ricerca (*research question..*)

Esistono delle regole per farlo..

# Scomporre in 4 componenti..

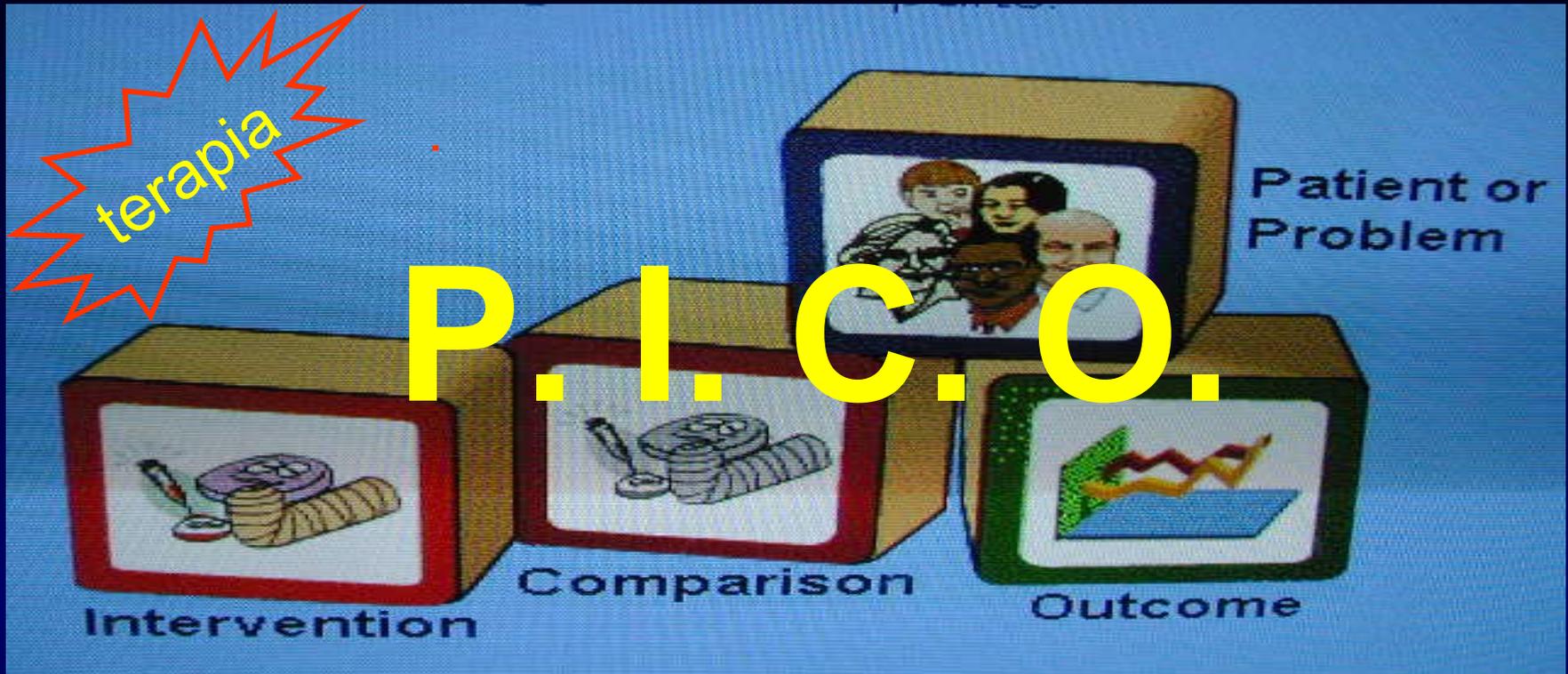
	<b>Paziente/ Problema</b>	<b>Intervento (causa, fattore prognostico, terapia)</b>	<b>Confronto/ Alternativa</b>	<b>Outcome</b>
<b>suggerimen ti</b>	Come descrivo un gruppo di malati simile al mio ?	Quale intervento sto considerando?  (Sii specifico)	Qual è la principale alternativa ?  (Sii specifico)	Cosa voglio ottenere ?  (Sii specifico)
<b>esempio</b>	Atrial fibrillation	Anticoagulant	Antiplatelet	- stroke - mortality



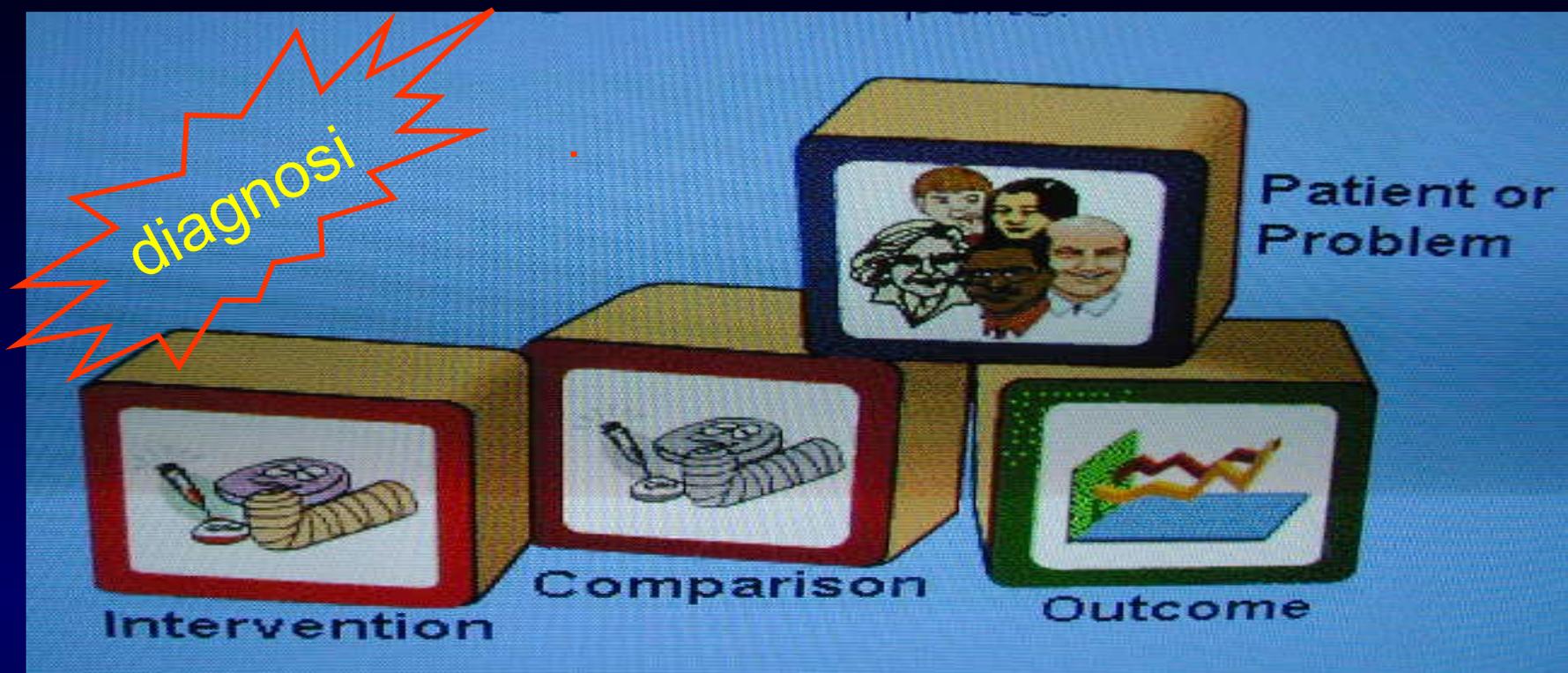
Paziente/ problema	Intervento/ test	Confronto	Outcome
<b>hypertension</b>	<b>Beta-block*</b>	<b>Placebo</b>	<div style="background-color: #e67e22; color: white; padding: 5px;">           - stroke            - mortality         </div>

# Gli operatori logici

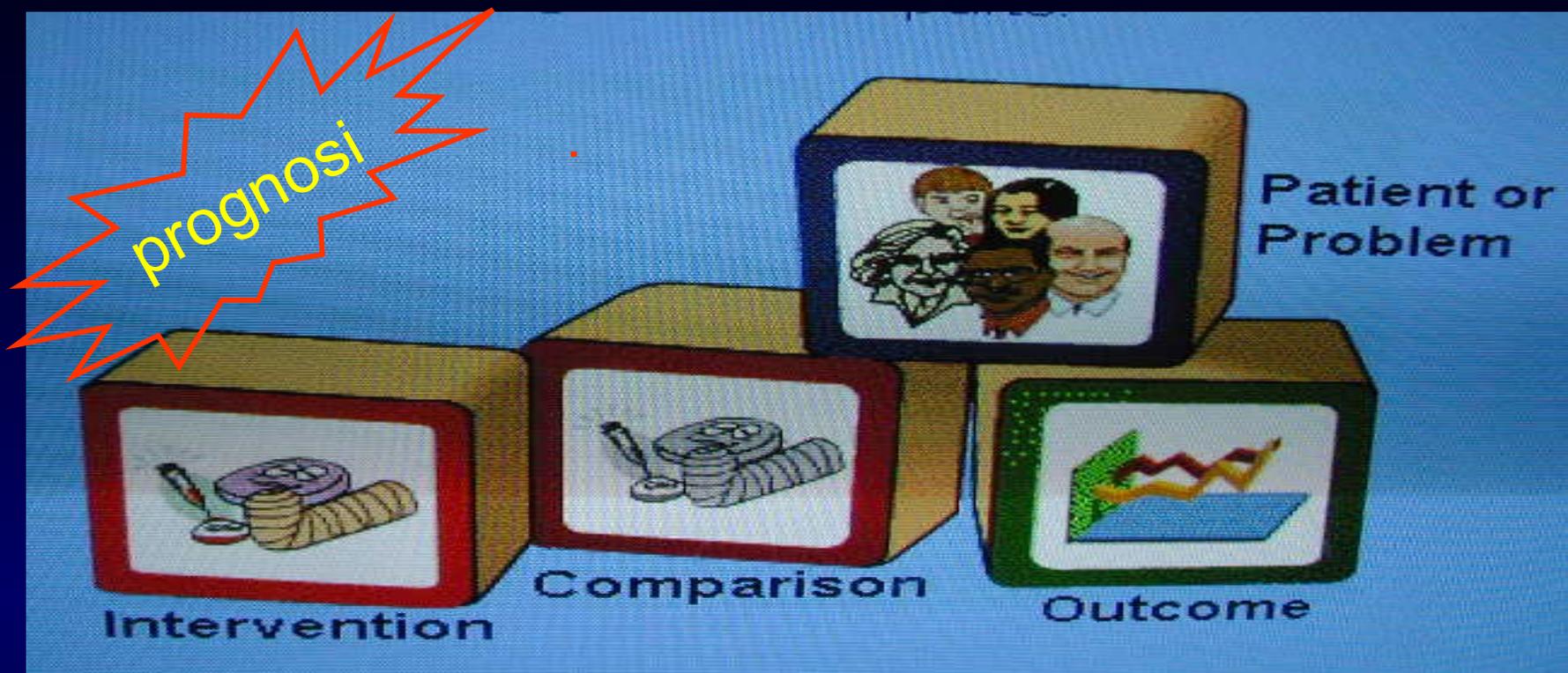
1. **OR** (disgiunzione)
2. **AND** (congiunzione)



Paziente/ problema	Intervento/ test	Alternativa/ Controllo	Outcome
hypertension	Beta-block*	Placebo	- stroke OR - mortality
	AND	AND	AND



Paziente/ problema	Intervento/ test	Confronto	Outcome
Lung cancer <b>OR</b> Pulmonary neoplasm	Spiral CT	Chest XR	<b>Diagnosis</b>
	<b>AND</b>	<b>AND</b>	<b>AND</b>



Paziente/ problema	Intervento/ test	Confronto	Outcome
Ulcerative colitis			Bowel cancer OR Cancer
<b>AND</b>			

# Simboli e caratteri speciali

1. Una frase messa tra virgolette viene cercata così come l'avete scritta (es. "*pulmonary embolism*")
2. Tutte le possibili varianti di una parola si cercano aggiungendo l'asterisco (\*) alla radice comune (es. *beta-block\**)
3. Si può chiedere al database di cercare un termine come testo libero [texword] o come MESH [MESH], oppure entrambi contemporaneamente

# Principali ragioni di insuccesso di una ricerca bibliografica:

---

1. Termini inappropriati o inesistenti in lingua inglese
2. Mancata specifica di termini alternativi
3. Mancato uso dei MeSH
4. Mancata specifica dei limiti (es. disegno di studio)
5. Errata scelta del database

# LA STRATEGIA

- 1. TRASFORMARE IL PROBLEMA IN UN QUESITO (P.I.C.O.)**
- 2. E' UN PROBLEMA DI TERAPIA, DIAGNOSI O PROGNOSI ?**
- 3. STABILIRE QUAL E' IL DISEGNO DI STUDIO CHE PUO' RISPONDERE ALLA DOMANDA**
- 4. SCEGLIERE IL DATABASE**
- 5. CERCARE E RIFINIRE LA RICERCA SULLA BASE DI QUANTO SI E' TROVATO.**

# Altri Databases nel mondo



[Home](#) [About](#)



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Indexing of Indian Medical Journals.

[Journals Indexed in IndMED](#)

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Free Fulltext Articles of select Indian Medical Journals.

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## Simple Search

Restrict to medIND (Articles available in Full Text).

[And Show](#)

[Help](#)

e.g. Acute renal failure in Malaria

Search: Acute AND renal AND failure AND malaria

## Advanced Search

<http://indmed.nic.in>



Database : **LILACS** Free form

Search for : [Basic form](#) [Advanced form](#)

Enter one or more words (AND, OR)

All words (AND)  OR

LILACS

PAHO

REPIDISCA

DESASTRES

ADOLEC

BBO

BDENF

HomeoIndex

MedCarib

WHOLIS

**Notes:**

- This option recovers words of the title of the article, words of the abstract, name of substances, name of people as subject, and subject descriptors.
- Language of the search:
  - for searches in words of the title and words of the abstract, uses preferentially the languages Portuguese, Spanish or English, since the majority of the articles LILACS are in an of these languages. Example: colgajos quirúrgicos or skin flaps
  - for searches in subject descriptors, name of substances, the search should be made in English. Example: Surgical Flaps
- Uses truncation symbol \$ in order to search words with same root.  
Example: educ\$ recovers educación, education, educação, educator etc.
- Does not key in Boolean operators (AND, OR or AND NOT) among the words.

3 / 244

LILACS

- select
-  to print
-  Photocopy
-  Full text
-  Related documents

Id: 430304

**Author:** Pereira, Flávia C; Simonini, Fernanda; Pereira, Marcelo; Silva, Valderez ; Sanches, Vicente; Tavares, Eduardo C.

**Title:** Protocolos de Recrutamento Alveolares em pacientes portadores da Síndrome Angústia Respiratória / Alveolars Recruitment Protocols in patients with Acute Respiratory

**Source:** Arq. ciênc. saúde;12(1):32-36, jan.-mar. 2005. tab.

**Language:** Pt.

**Abstract:** A síndrome de angústia respiratória aguda (SARA) pode ser compreendida por alterações pulmonares e mecânicas, entretanto, vários estudos têm demonstrado estratégias que reduzem essas alterações e diminuem a mortalidade. Dentre as estratégias utilizadas no manejo da SARA, evidenciam-se a combinação da relação P<sub>úV</sub> (Pressão úVolume) e pressão expiratória final (PEEP). Essa relação simultaneamente garante um recrutamento pulmonar adequado, e evita lesão pulmonar, enquanto se obtém uma troca gasosa e oferta de oxigênio adequadas. Neste estudo constam sete protocolos com manobras de recrutamento (MR) utilizadas na SARA. Todos foram randomizados. A amostragem variou com o estudo: 1 com 3 pacientes, 3 pesquisas com 5 pacientes, 1 com 17 pacientes, 1 estudo com 7 pacientes com SARA e 11 indivíduos saudáveis. As formas de estudo utilizadas nas pesquisas foram Tomografia Computadorizada e o Pneumotógrafo. As variáveis analisadas nos estudos foram: PEEP, FIO<sub>2</sub>, SO<sub>2</sub>, índice de oxigenação, complacência estática, pressão de pico, pressão deplatô, volume expirado e frequência respiratória. Os dados corroboram diferentes pressões inspiratórias, variando de 30 a 54 cm H<sub>2</sub>O e PEEP de 15 a 40 cm H<sub>2</sub>O, todavia, existem poucos relatos em relação à frequência das manobras e permanência dos seus efeitos. Os resultados apresentados demonstraram variação de acordo com os protocolos usados, devido os diferentes níveis de pressão inspiratória e PEEP. Entretanto

http://koreamed.org

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KOREAN ASSOCIATION  
OF MEDICAL  
JOURNAL EDITORS

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 Synapse

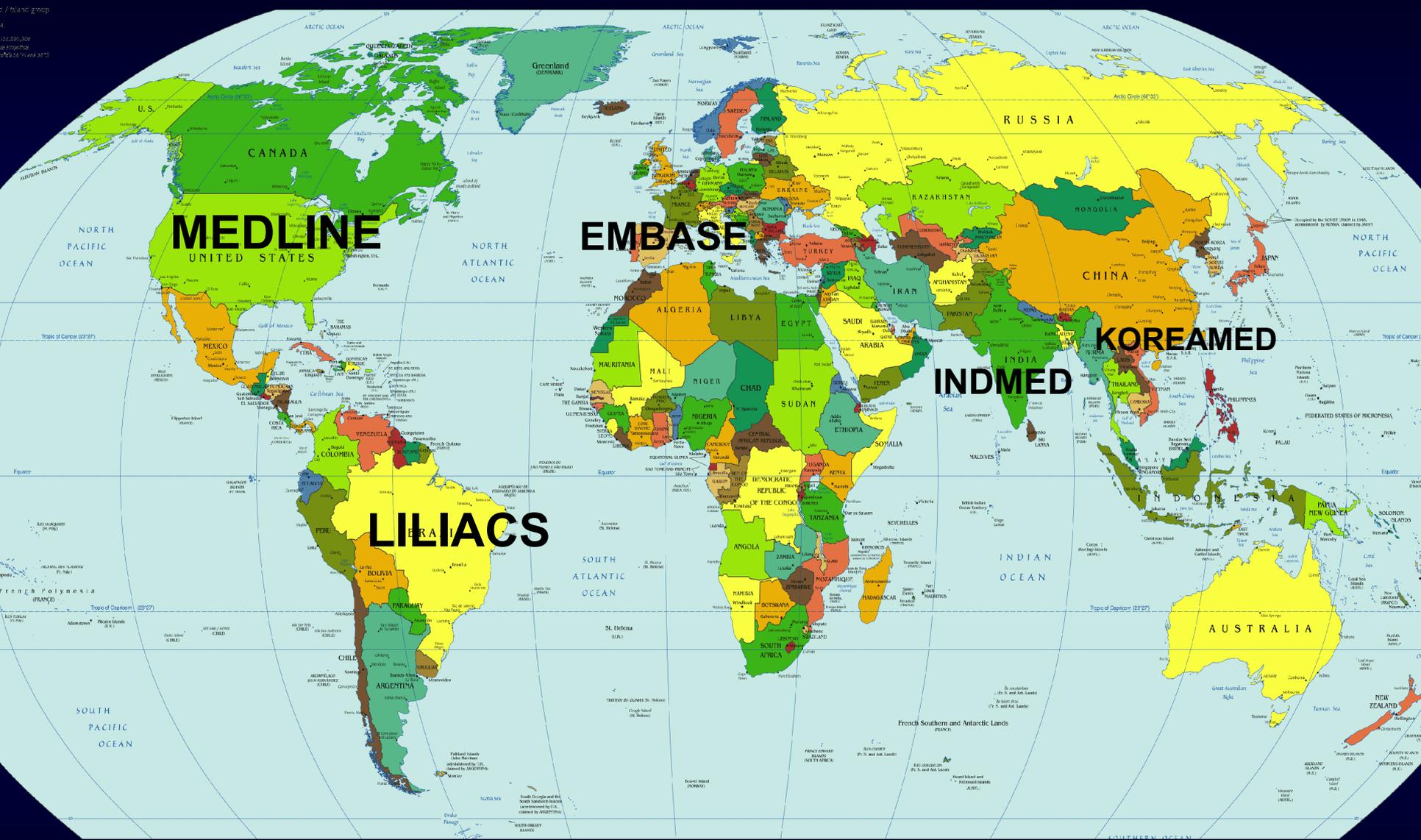
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Korean Medical Citation Index

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 WorldWideScience.org  
The Global Science Gateway

 Crossref

1 / Some map  
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**MEDLINE**  
UNITED STATES

**EMBASE**

**LILIACS**

**INDMED**

**KOREAMED**

**Trials non ancora pubblicati..**

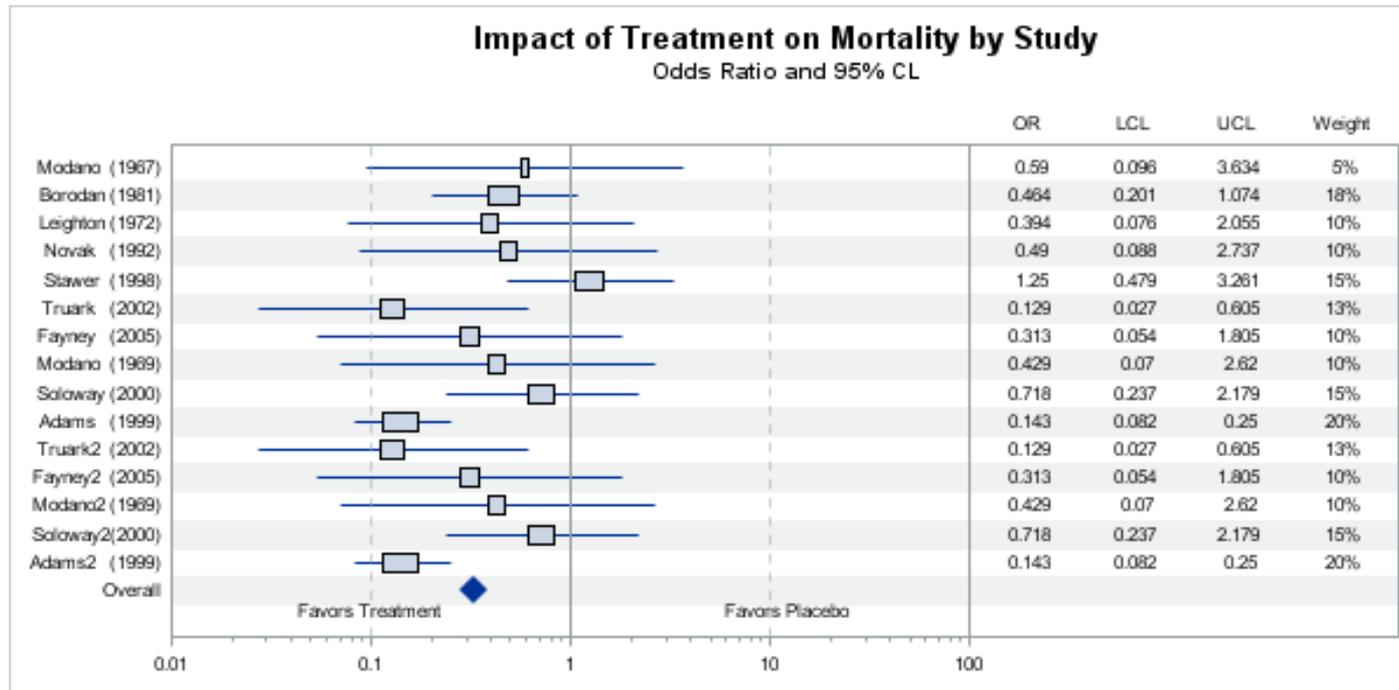
*(ongoing trials)*

[www.clinicaltrials.gov](http://www.clinicaltrials.gov)

[www.controlled-trials.com/mrct/](http://www.controlled-trials.com/mrct/)

[www.who.int/trialsearch](http://www.who.int/trialsearch)

# Cochrane Library, Revisioni sistematiche



# **La ricerca delle Linee-Guida**



Welcome to NICE



SEARCH NICE

Search input field with 'Go' button

Advanced>

15 April 2004

QUICK LINKS

- NICE E-Newsletter - March 2004
Improving Supportive and Palliative Care for Adults with Cancer - the Manual
Diathermy in tonsillectomy - Interim guidance
TA076 - Newer drugs for epilepsy in adults, Full guidance
IPG054 Laparoscopic helium plasma coagulation of endometriosis - Guidance
IPG053 Computed tomography (CT) guided thermocoagulation of osteoid osteoma - Guidance
IPG052 Endovenous laser treatment of the long saphenous vein - Guidance
IPG051 Free fluid thermal endometrial ablation - Guidance
IPG050 Vagus nerve stimulation for refractory epilepsy in children - Guidance
IPG049 Radiotherapy for age-related macular degeneration - Guidance
IPG048 Macular translocation for age-related macular degeneration - Guidance

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- English
Cymraeg

MY PREFERENCES

- Vision Impaired
Display options
Email notify

Clinical guideline on dental recall

6 April 2004

Contrary to reports in the media, NICE has not yet issued guidance to the NHS on dental recall intervals. The first draft of this guideline was issued for consultation in February. This consultation period has now closed. NICE expects to issue final guidance to the NHS on dental recall in September 2004. Further details of the guideline development process can be found here.

Appraisal Consultation Document: Tacrolimus and ... for atopic eczema

- Introduction to Clinical guidelines
Guideline Review Panels
Guidelines and cancer service guidance in progress
Completed guidelines and cancer service guidance
National Collaborating Centres
Common questions
Stakeholder Interest - Guidelines
Guideline Development Process (current)

the consultation period for this Appraisal document will close at 5pm on 28 April 2004.

Research Fellows in Guideline Development (NCC-CC)

a multidisciplinary team developing guidelines for the management of chronic conditions, you will use initiative and communication skills to systematically appraise the current medical literature to inform development of evidence-based recommendations for the NHS.

Communications Administrator

candidate will have prior experience in web/Intranet development and other forms of electronic communication, and demonstrate commitment to this type of work.

Communications Administrator

1 April 2004

**www.sign.ac.uk**



## Scottish Intercollegiate Guidelines Network

### Clinical Guidelines

- Homepage
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- Guidelines
- Development Process
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- Events
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#### Published Guidelines

- [Full Text of Guidelines](#)
- [Supporting Material for Published Guidelines](#)
- [General Information](#)
- [Notes for Users](#)
- [Copyright Details](#)
- [Summary of research recommendations](#) from SIGN guidelines published in 2003

#### Development Programme

- [Guideline Development Programme](#)
- [Propose a Guideline Topic](#)

#### Development Process

- [Methodology](#)

▲ Top

Scottish Intercollegiate Guidelines Network  
9 Queen Street, Edinburgh EH2 1JQ  
Website address: <http://www.sign.ac.uk>

Tel. 0131-225 7324  
Fax. 0131-225 1789

Web contact: [d.service@rope.ac.uk](mailto:d.service@rope.ac.uk)  
Last modified 4/3/04  
© SIGN 2001-2004



# Health Technology Assessment Programme.

## Details of HTA publications

Last updated: 6 April 2004  
Next update due: 20 April 2004

**Publication search:** you have five options:

[www.hta.nhsweb.nhs.uk](http://www.hta.nhsweb.nhs.uk)

➔ [View a list of ALL publications](#) in reverse volume order

➔ Search publication titles   Single word  Exact phrase

➔ Select publications by ICD\* disease

➔ Select publications using one or more

### by Key Area

Key Areas are areas which the NHS has declared as priorities. This list will be updated 3-6 monthly.

- Please select from list
- Please select from list
- abortions
- acne
- age related macular degeneration
- alcohol disorders
- anaemias
- angina etc
- anorexia
- antenatal care incl screening
- aortic aneurysm
- asthma
- atherosclerosis
- back pain, incl disk disorders
- benign tumours
- birth trauma
- bleeding disorders
- blindness etc
- breast disease - benign
- bronchiectasis
- burns
- cancer of appendix
- cancer of bladder
- cancer of brain
- cancer of breast
- cancer of cervix
- cancer of colon and rectum
- cancer of liver
- cancer of mouth
- cancer of oesophagus
- cancer of oesophagus

### by ICD\* chapter heading

### by Intervention

\* International Classification of Diseases

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The National Coordinating Centre for Health Technology Assessment coordinates the HTA Programme under contract from the Department of Health's R&D Division



[www.york.ac.uk/inst/crd/ehcb.htm](http://www.york.ac.uk/inst/crd/ehcb.htm)

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- [The Society of Critical Care Medicine \(SCCM\) has recently submitted guidelines for inclusion. Look for these in NGC in the near future.](#)
- [Look for practical, ready-to-use tools for measuring and improving the quality of Americans' health care in the Agency for Healthcare Research and Quality's \(AHRQ's\) QualityTools Web site.](#)
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- 09.05.2013 [Conclusa la revisione aperta della linea guida sul trattamento della psoriasi](#)
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Il Sistema nazionale linee guida (SNLG) elabora raccomandazioni di comportamento clinico basate sugli studi scientifici più aggiornati, secondo il proprio **metodo**.

#### Linee guida regionali

Banca dati di linee guida e altri strumenti di governo clinico elaborati da parte dei Servizi sanitari regionali in conformità con una metodologia definita.

#### Altri documenti evidence based

Repertorio di linee guida e documenti evidence based non SNLG, prodotti da enti e istituzioni italiani o da altre organizzazioni secondo una metodologia definita.

#### Banca dati comparativa

Uno strumento che semplifica le ricerche sulle linee guida internazionali per un primo giudizio sulla affidabilità in termini di

#### Esperienze di implementazione

Qui si accede alla piattaforma GOAL, uno strumento per la condivisione e l'implementazione a livello locale della

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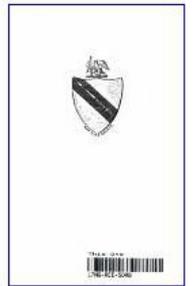
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# Hamlet

by William Shakespeare

◀ Chapter Excerpt ▶

## The Tragedy of Hamlet Prince of Denmark

### [ACT 1

Scene 1. A guard platform of the castle.]

*Enter Barnardo and Francisco, two sentinels.*

*Barnardo.* Who's there?

*Francisco.* Nay, answer me. Stand and unfold<sup>o</sup> yourself.

*Barnardo.* Long live the King!<sup>o</sup>

*Francisco.* Barnardo?

*Barnardo.* He.

*Francisco.* You come most carefully upon your hour.

*Barnardo.* 'Tis now struck twelve. Get thee to bed, Francisco.

<sup>o</sup>The degree sign (°) indicates a footnote, which is keyed to the text by the line number. Text references are printed in **boldface** type; the anno-

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La mia biblioteca **Novità!**

[The pathophysiology of propofol infusion syndrome: a simple name for a complex syndrome](#)

[philippefevre.com \[PDF\]](#)

[B Vasile, F Rasulo, A Candiani, N Latronico - Intensive care medicine, 2003 - Springer](#)

Abstract Propofol infusion syndrome (PRIS) is a rare and often fatal syndrome described in critically ill children undergoing long-term propofol infusion at high doses. Recently several cases have been reported in adults, too. The main features of the syndrome consist of ...

Citato da 421 [Articoli correlati](#) [Tutte e 11 le versioni](#) [Cita](#) [Salva](#) [Altro](#)

In qualsiasi momento

Dal 2014

Dal 2013

Dal 2010

Intervallo specifico...

[Critical illness myopathy and neuropathy](#)

[N Latronico, D Recupero, A Candiani, B Guameri... - The Lancet, 1996 - Elsevier](#)

Summary Background Critically ill patients may develop muscle weakness or paralysis during the course of sepsis and multiple-organ failure. We studied peripheral nerve and muscle disorders (NMD) in comatose patients. Methods Comatose patients who ...

Citato da 309 [Articoli correlati](#) [Tutte e 8 le versioni](#) [Cita](#) [Salva](#) [Altro](#)

Ordina per pertinenza

[CITAZIONE] [Critical illness myopathy and neuropathy](#)

[gwicu.com \[PDF\]](#)

[N Latronico, E Peli, M Botteri - Current opinion in critical care, 2005 - LWW](#)

Citato da 158 [Articoli correlati](#) [Tutte e 6 le versioni](#) [Cita](#) [Salva](#) [Altro](#)

Ordina per data

[Cerebral blood flow threshold of ischemic penumbra and infarct core in acute ischemic stroke a systematic review](#)

[ahajournals.org \[HTML\]](#)

[E Bandera, M Botteri, C Minelli, A Sutton, KR Abrams... - Stroke, 2006 - Am Heart Assoc](#)

Background and Purpose—Cerebral blood flow (CBF) reduction below critical thresholds discriminates between irreversible infarct core, penumbra, and benign oligemia (penumbra that recovers spontaneously). Thresholds are based on animal studies, and their ...

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# Il Sistema Bibliotecario Biomedico Lombardo

(*www.sbbl.it*)

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## BENVENUTO

SBBL è la biblioteca biomedica di Regione Lombardia nata con lo scopo di offrire una corretta e aggiornata documentazione scientifica e clinica al personale sanitario operante nelle strutture sanitarie lombarde pubbliche e/o accreditate. Attraverso una rete di 163 biblioteche aderenti a SBBL, la Regione garantisce agli operatori la possibilità di un supporto scientifico alle decisioni cliniche complesse e la formazione continua permanente, nel quadro della medicina basata sulle evidenze.

SBBL rappresenta un significativo e strategico passo avanti nella gestione della Sanità in Lombardia che punta sulla cultura e sull'aggiornamento professionale degli operatori sanitari per incidere sul livello qualitativo delle prestazioni sanitarie.



Biblioteca dell'Istituto Nazionale Tumori (Milano)

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The screenshot shows the PubMed interface for a specific article. At the top, there are navigation links for 'Resources' and 'How To', and a 'Sign in to NCBI' option. The PubMed logo and 'US National Library of Medicine' are visible. A search bar contains the text 'PubMed' and a 'Search' button. Below the search bar, there are links for 'Advanced' and 'Help'. The article title is 'Albumin versus crystalloid solutions in patients with the acute respiratory distress syndrome: a systematic review and meta-analysis'. The authors listed are 'Uhlig C, Silva PL, Deckert S, Schmitt J, Gama de Abreu M'. The abstract text is visible, starting with 'INTRODUCTION: In patients with acute respiratory distress syndrome (ARDS) fluid therapy might be necessary...'. On the right side, there is a sidebar with a 'Send to' button, a 'Save items' section with an 'Add to Favorites' button, and a 'Recent Activity' section showing a search for 'ards[ALL] (7357)'. The PubMed logo is also present in the sidebar.

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Crit Care, 2014 Jan 9;18(1):R10. [Epub ahead of print]

**Albumin versus crystalloid solutions in patients with the acute respiratory distress syndrome: a systematic review and meta-analysis.**

Uhlig C, Silva PL, Deckert S, Schmitt J, Gama de Abreu M.

**Abstract**

**INTRODUCTION:** In patients with acute respiratory distress syndrome (ARDS) fluid therapy might be necessary. The aim of this systematic review and meta-analysis is to determine the effects of colloid therapy compared to crystalloids on mortality and oxygenation in adults with ARDS.

**METHODS:** Randomized controlled trials (RCTs) identified through a systematic literature search of MEDLINE, EMBASE, CENTRAL and LILACS. Article published up to 15th February 2013 were independently screened, abstracted, and assessed (Cochrane Risk of Bias Tool) to provide evidence-based therapy recommendations. RCTs were eligible if they compared colloid versus crystalloid therapy on lung function, inflammation, damage or mortality in adults with ARDS. Primary outcome parameters were respiratory mechanics, gas exchange lung inflammation and damage as well as hospital mortality. Kidney function, need for renal replacement therapy, hemodynamic stabilization and intensive care unit (ICU) length of stay served as secondary outcomes.

**RESULTS:** A total of 3 RCTs out of 4130 potential trials found in the databases were selected for qualitative and quantitative analysis totaling 206 patients who received either albumin or saline. Overall risk of bias was unclear to high in the identified trials. Calculated pooled risk of death was not statistically significant (albumin 34 of 100 (34.0%) versus 40 of 104 (38.5%), relative risk (RR) = 0.89, 95% confidence interval (CI) 0.62 to 1.28, P = 0.539). Weighted mean difference (WMD) in PaO<sub>2</sub>/FIO<sub>2</sub> [mmHg] improved in the first 48 hours (WMD = 62, 95% CI 47 to 77, P <0.001, I<sup>2</sup> = 0%) after therapy start and remained stable after 7 days (WMD = 20, 95% CI 4 to 36, P = 0.017, I<sup>2</sup> = 0%).

**CONCLUSIONS:** There is a high need for RCTs investigating the effects of colloids in ARDS patients. Based on the findings of this review, colloid therapy with albumin improved oxygenation but did not affect mortality.

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The screenshot displays the Lighthouse website interface. At the top, there is a green navigation bar with the 'Lighthouse' logo on the left and several utility icons (home, search, star, printer, flags) on the right. Below the logo are menu buttons for 'Gestione', 'Catalogo', 'Metacrawler', 'Anagrafica', and 'Home LH'. On the far right of the navigation bar is the 'SBBL' logo with the text 'Sistema Bibliotecario Biomedico Lombardo' and the tagline 'Una biblioteca virtuale per la Sanità'.

Below the navigation bar, a breadcrumb trail shows 'Home LH > Ricerca articolo'. The main content area is titled 'Ricerca Articolo' and features a sub-navigation bar with buttons for 'Dati della rivista', 'Link al fulltext', 'Chiedi articolo', 'Altri link', and 'Dati della ricerca'. The 'Link al fulltext' button is highlighted.

Below the sub-navigation bar, there is a message: '2 elementi trovati, tutti gli elementi visualizzati.' This is followed by a table with the following data:

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Below the table, another message reads: '2 elementi trovati, tutti gli elementi visualizzati.'

**"E' meglio cadere tra le mani  
di un medico felice o di un  
medico erudito...??"**

**Bonaventure des PERIERS  
(1500-1543)**

