

本次主題

關於Medline

查詢基本功

- 查詢模組: Basic Search & Advanced Search
- 檢索工具: 合併檢索與切截
- 限制篩選功能:Limits
- 匯出檢索結果及取得全文
- 設定新知通知





最重要的醫學文獻資料庫

- 收錄年代:1950年代至今
- 收錄國家:來自美國及其他70餘國
- 收錄期刊:超過5,600種期刊
- 資料類型:期刊文獻、學術專論、會議論文等...







醫學主題 MeSH

- MeSH: 生物醫學專業主題
 - 專家在文獻標示適合主題
 - 讀者可透過MeSH精準查詢文獻
- 使用MeSH好處:精準查詢
 - 檢索用詞標準化
 - 整合日常用語和專業用語
 - Cancer \ Neoplasms
 - 常用縮寫對應標準全名:
 - PTSD \ Post-Traumatic StressDisorders
 - 集合同義字用詞:
 - Bird flu \ Avian flu
 - 瀏覽文獻結果更簡單

Unique Identifier 17987010

Authors Willyard C.

Authors Full

Name Willyard, Cassandra.

Title Blue's clues.

Source Nature Medicine. 13(11):1272-3, 2007 Nov.





MeSH的組成

結構: *Depression / dt [Drug Therapy]

- Depression/
 - MeSH標題
 - 表示文獻討論主題為Depression
- / dt [Drug Therapy]
 - SubHeading副標題
 - 與MeSH搭配使用,表示研究方向
 - 表示文獻中討論Depression的藥 物治療
- *:標示文獻中的主要主題
 - 其他無*表示為次要主題

Unique Identifier 17987010

Authors Willyard C.

Authors Full

Name Willyard, Cassandra.

Title Blue's clues.

Source Nature Medicine. 13(11):1272-3, 2007 Nov.

MeSH Subject *Depression / dt [Drug Therapy]
Headings *Depression / ge [Genetics]

*Depressive Disorder / dt [Drug Therapy]

*Depressive Disorder / ge [Genetics]

*Genetic Predisposition to Disease

Genetic Variation

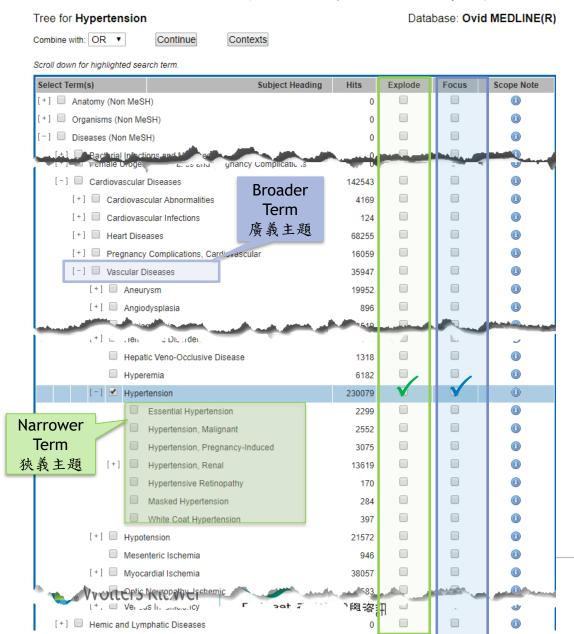
Humans

Polymorphism, Single Nucleotide





MeSH主題詞以樹狀結構表示從屬關係



- 17大類樹狀結構主題詞表
 - 檢索時可擴展或縮小主題範 疇
- 勾選Explode(exp)
 - 同時查詢該主題及所屬狹義 主題
 - 使用時機:
 - 多個關鍵字查詢時
- 勾選Fous(*)
 - 查詢主要討論該主題的文獻
 - 使用時機:
 - 單一關鍵主題查詢
 - 資料量大,鎖定多個關鍵 主題中的主要關鍵主題

瞄準研究方向:副標題詞 (SubHeadings)

- 副標題詞幫助讀者找尋特定的 研究方向資料
- MeSH提供80+種研究方向
 - 給予2個字母的代碼來表示,如 Nursing即以NU表示,更能方便 檢索進行。
- 副標題詞的查詢:
 - Floating Sub-Heading (FS): 指 定特定副標題詞查詢
 - Exploded Sub-Heading (XS):某些副標題詞實際上又可以被歸類成同一類主題,目前共有31類。當我們需要查詢同一類的副標題譬如ae.xs,就表示查詢包含Adverse Effects、Poisoning和Toxicity這三類副標題的文獻。





10 /hi - History (424)

Subheadings for: Hypertension Combine with: OR ▼ Continue Include All Subheadings (230079) -- or choose one or more of these subheadings --(1) /ae - Adverse Effects (1) Im - Immunology (1014) ① /bl - Blood (15866) 🕕 🗆 /li - Legislation & Jurisprudence (2) Image: Ime - Metabolism (15069) O /cf - Cerebrospinal Fluid (101) Imi - Microbiology (72) /ci - Chemically Induced (9090) Imo - Mortality (3293) Inu - Nursing (639) U /ch - Chemistry (1) Image: Ips - Parasitology (9) (42910) (42910) Ipa - Pathology (7907) /cn - Congenital (54) Image: Iph - Physiology (562) 1) /cv - Cytology (1) (19393) (19393) /pp - Physiopathology (59686) Imaging (2985) Ipc - Prevention & Control (10199) (2290) In July 19 (2290) In the second of the second Image: In the second of the second Image: Irh - Rehabilitation (327) /ec - Economics (1357) Image: Isu - Surgery (2063) (2983) In Jen - Enzymology ① 🔲 /th - Therapy (15514) 1) /tm - Transmission Image: Property of the control of (3775) (3775) 1 /ur - Urine (2638) 1 (26475) United to the contract of the contra Ive - Veterinary (312) Image: Description of the control 1 (39) 1 (39)

採用副標題查詢:即使篇名裡沒有提到相關關鍵字,透過副標題查詢仍可查到相關研究方向的文獻



Abstract:

OBJECTIVE: Although electrocardiography (ECG) is recommended in all subjects with hypertension, no information is available on the influence exerted by random changes in the placement of electrodes on the day-to-day variability of ECG criteria for diagnosis of left ventricular hypertrophy (LVH).

METHODS: In a multicentre, randomized study, two standard 12-lead ECG were recorded, 24 h apart, from 276 consecutive hypertensive patients (mean age 65 +/- 12 years, 49.6% men). Overall, 142 patients were randomized to ECG with the position of electrodes marked on the skin using a dermographic pen and 134 to traditional ECG without marking the position of electrodes. Day-to-day variability of ECG criteria for LVH was compared between the two groups.

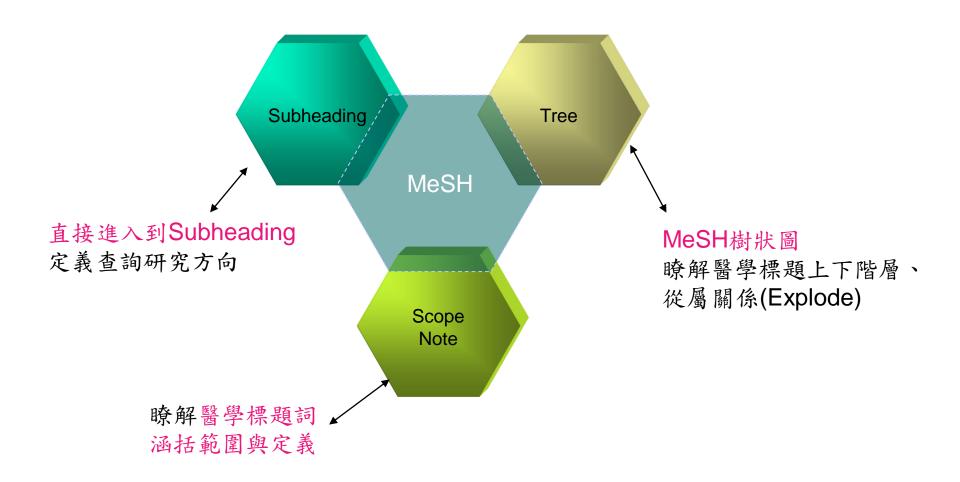
RESULTS: Coefficients of variation (SD of the difference between paired voltage measurements divided by the mean value) varied consistently among subjects randomized to ECG without dermographic pen, ranging from 30% (R wave in lead I) to 81% (R wave in lead V5). Dermographic pen led to a lesser variability of ECG voltages with consequent reduction in the coefficients of variation, which ranged from 26% (R-wave amplitude in lead I) to 43% (R-wave amplitude in lead V5). The proportion of subjects who changed classification status for LVH ('reclassification rate') from the first to the second ECG session (LVH present in session 1 and absent in session 2, or vice versa) decreased for effect of dermographic pen from 11 to 4% (P = 0.040) with the Cornell voltage, from 19 to 11% (P = 0.029) with the Sokolow-Lyon voltage, and from 18 to 7% with the Romhilt-Estes criterion (P = 0.018), but not with other criteria. In particular, the typical strain and the Cornell strain were associated with the lowest reclassification rates regardless of dermographic pen.

CONCLUSIONS: Random changes in the position of ECG electrodes strongly impair the day-to-day reproducibility of Cornell voltage, Sokolow-Lyon and Romhilt-Estes criteria for LVH. The typical strain and Cornell strain criteria showed a lesser spontaneous day-to-day variability.





認識並活用MeSH

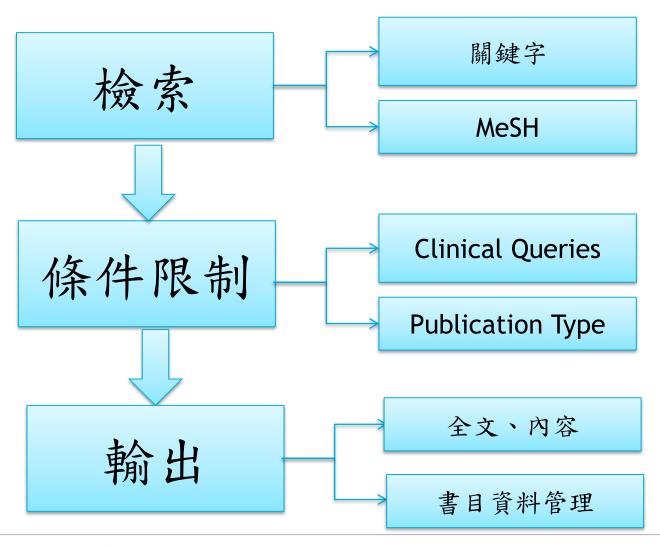








MEDLINE 文獻查詢主要步驟









Ovid 的查詢模式

Basic Search

- ●最直覺的搜尋方式
- ●快速取得關聯度最高 文獻
- ●輕鬆篩選年代及全文

Advanced Search

- ●最嚴謹的搜尋方式
- ●詳細比對醫學標題詞
- ●取得最完整的文獻資料

特定欄位搜尋

- Find Citation
- Search Fields
- Multi-Field Search

Search Tools

- ●標題詞的延伸應用
- ●尋找標題詞的定義
- ●比對標題詞





OVID



Basic Search: 可快速查詢高關聯度文獻

範例:2015年至今有關statin與預防老人心臟病發的全文文獻

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

- 1 Resource selected | Hide | Change
- Ovid MEDLINE(R) Epub Ahead of Print, In-Process & Other Non-Indexed Citations, Ovid MEDLINE(R) Daily and Ovid MEDLINE(R) 1946 to Present
- statin for heart attack prevention

Search



- Limits (expand)
- □ Include Multimedia
 ✓ Include Related Terms
- 查詢方式:輸入所有查詢內容
 - 輸入所有的關鍵字
 - 一個完整的句子
 - 複製某篇文章的篇名

- 自然語言智慧搜尋(Include Related Terms)
 - 同義之字/詞/片語查詢
 - 單複數與詞性變化形查詢
 - 英美語系之異體字杳詢
 - 專業縮寫/全寫查詢
 - 可對應之標題詞查詢



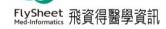




Basic Search: 依關聯度排序檢索結果

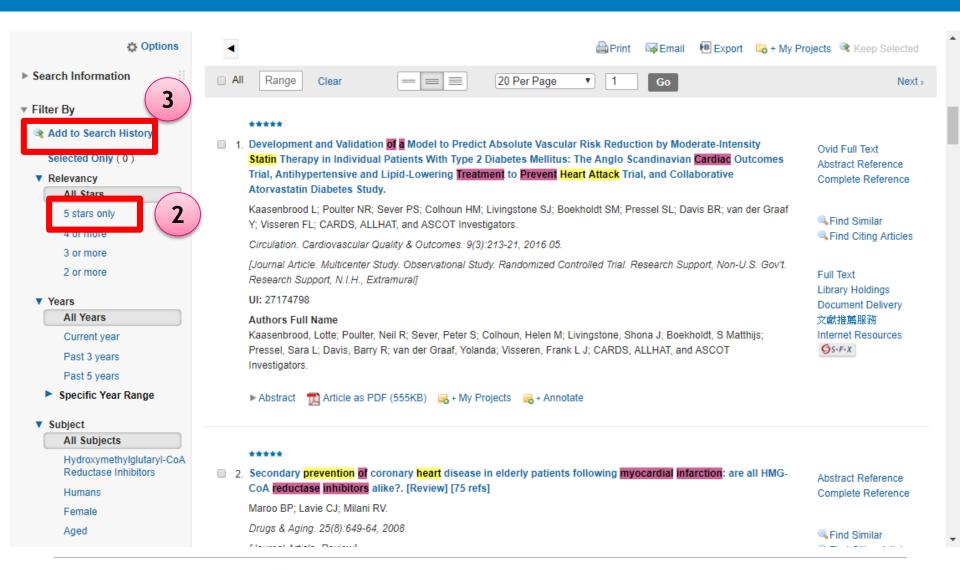








Basic Search: 提供結果分析

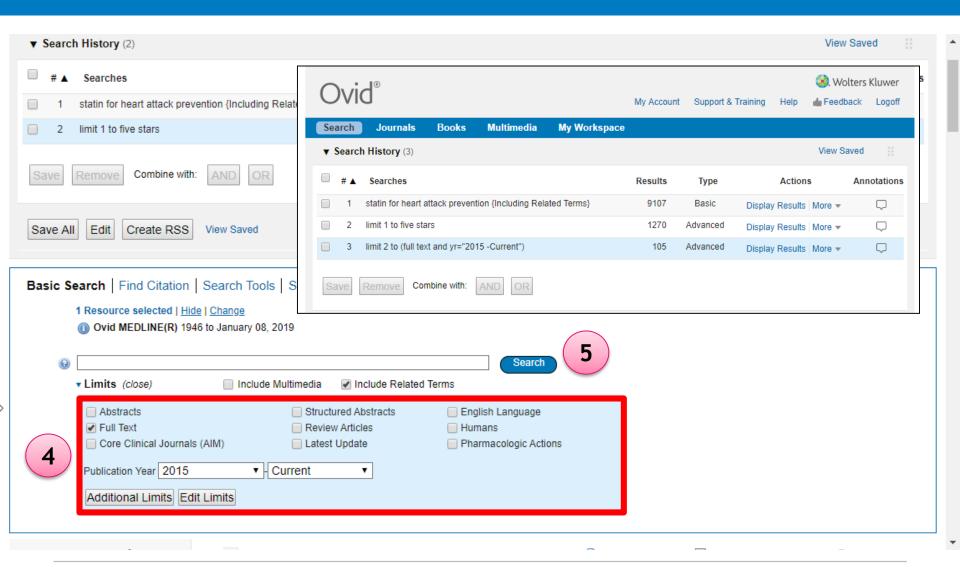








Basic Search: 利用Limit快速篩選







Basic Search運作的方式(一)

- 1. OvidSP依據輸入的句子分析出需要查詢的關鍵字
 - 讀者輸入: treatment for childhood obesity
 - 系統查詢: treatment/childhood/obesity
- 2. 根據資料庫索引典、各專業字/ 詞典和美國及英國標準英文辭典搜尋相關字詞 同時進行查詢

輸入辭彙	相關辭彙		
treatment	therapy, palliative, relieve, ameliorate, alleviate, therapeutic, treatments, relief, therapies, therapeutics, amelioration, relieving, alleviated, alleviation alleviating, ameliorates, relieves, alleviates, reliefs, management, intervention, cure, treated		
childhood	child, children, kids, kid, childhoods, child hood, child youth		
obesity	obesity, adiposes, adiposis, adiposities, adiposity, obesities, overweight, overweights, obesity unspecified		



Basic Search運作的方式(二)

- 1. 依下列關聯度標準給予每篇文獻5到1顆星的評等
 - Count : 出現的次數
 - Frequency:出現的頻率
 - Importance: 關鍵字在資料庫中的重要性
 - Cohesion:關鍵字彼此之間的距離遠近
 - Vocabulary Level:與輸入的關鍵字相符程度
- 2. 系統篩選並依序提供部分高關聯度的文獻結果
 - 使讀者可以快速獲得最符合查詢主題的文獻
 - 提醒:若需全部文獻結果,建議採用其他檢索模式



使用Basic Search的小技巧

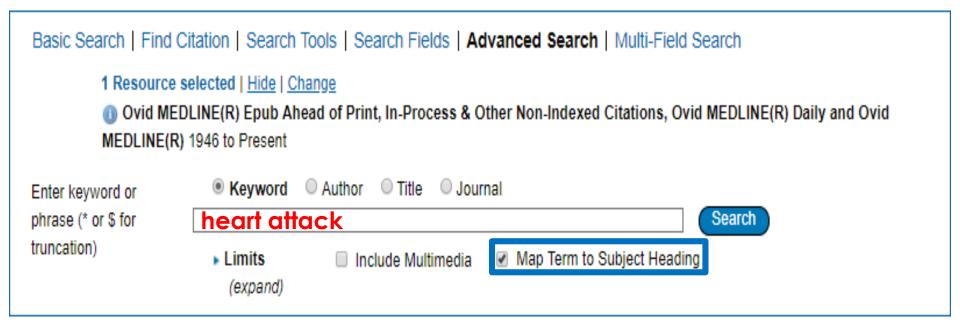
- · 一次輸入所有要查詢的關鍵字或主題(Google Experience)
 - Basic Search會直接交集查詢讀者輸入的所有關鍵字,顯示文獻結果時僅顯示部分高關聯度的文獻資料
 - Basic Search不適用於多個關鍵字分開查詢後再由讀者自行交集,會導致因僅交集片段的文獻結果而無法獲得正確的資訊
- 直接使用日常使用的英文查詢
- 查詢時盡量簡潔,避免不必要的修飾或形容
 - 譬如 "serious food crisis from huge climate changes "可直接輸入" food crisis from climate changes"或" food crisis and climate changes"查詢即可
- 名詞較易比對,建議多使用名詞而少使用動詞查詢。
- · 如果非必要,盡量不要用引號[""]、括弧[()]或連字號[-]來連結字串而強制形成片語。
 - 譬如輸入weather-related,系統會把它當作一個單獨的片語,延展查詢時就可能不會找出weathers。若輸入weather related則可以搜尋weather的同義字及變化形。







Advanced Search: Mapping 提供精準文獻查詢



- 查詢方式:
 - Keyword:
 - 主題詞自動比對(Map Term to Subject Heading):提高查詢精確度 (單一資料庫)
 - 關鍵字查詢:查詢所有文字欄位

- Author:以作者查詢
- Title:查詢題名關鍵字
- Journal:查詢期刊名,不可使用縮寫





MeSH比對規則

- 1. Map Term to Subject Heading: 先比對後統計
- 2. 先一一比對在MeSH中有無可對應的標準主題。
- 3. 如果比對不到標準主題時,先收集在文章篇名、摘要等書目欄位中有出現過 我們所輸入的關鍵字的所有文獻。
- 4. 再統計這些文獻中所有標準主題出現的次數。
- 5. 出現最多次的這些標準主題就會被列入MeSH的建議選單中。
- 6. 如果我們在主題建議清單中還是沒有找到適合的,Ovid還是會把關鍵字帶入資料庫中的重要欄位進行查詢。



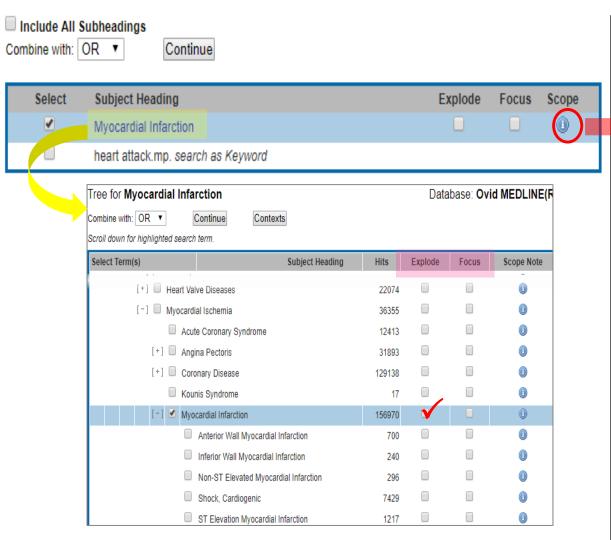


Advanced Search: 自動比對適合的MeSH標題

Your term mapped to the following Subject Headings:

Click on a subject heading to view more general and more specific terms within the tree.

See term mapped to thesaurus term



Scope Note for: Myocardial Infarction

MeSH HEADING: MYOCARDIAL INFARCTION

SCOPE: NECROSIS of the MYOCARDIUM caused by an obstruction of the blo

NOTE: do not coordinate with ACUTE DISEASE for "acute infarct"

YEAR of ENTRY: 79; was MYOCARDIAL INFARCT 1963-78

SEARCH NOTE: use MYOCARDIAL INFARCTION to search MYOCARDIAL IN

REFERENCES:
See Related:
HEART RUPTURE, POST-INFARCTION

Used For:
cardiovascular stroke
cardiovascular strokes

heart attack heart attacks

infarct, myocardial

infarction, myocardial

infarctions, myocardial

infarcts, myocardial

myocardial infarction myocardial infarctions

myocardial infarcts

stroke, cardiovascular

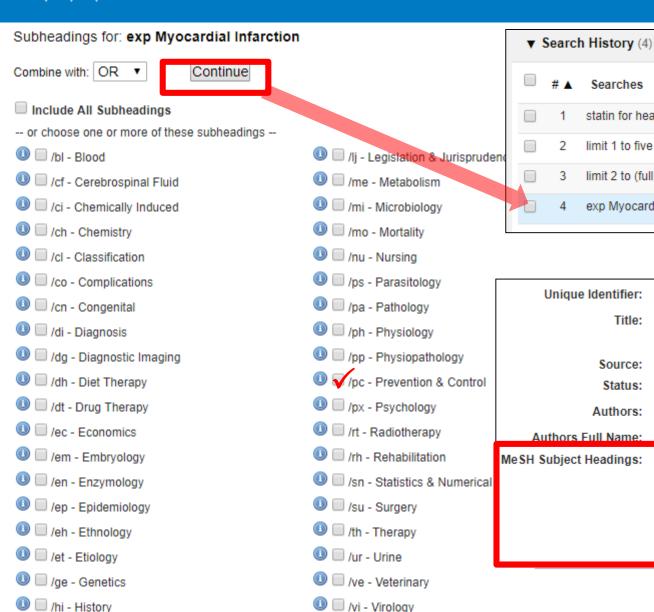
strokes, cardiovascular

myocardial infarct



/im - Immunology

Advanced Search: 選擇適合的副標題(研究方向), 得到精確檢



			# 🛦	Searches		Results	
no			1	statin for heart attack prevention {Including Related Terms}			
			2	limit 1 to five stars			
			3	limit 2 to (full text and yr="2015 -Current")			
7	1		4	exp Myocardial Infarction/pc [Prevention & Control]			
Unique Identifier:		dentifier:	30508932				
				Title:	Modified double-stent strategy may be an opt nd meta-analysis.	imal choic	
				Source: Status:	Medicine. 97(48):e13377, 2018 Nov. MEDLINE		
				Authors:	Lv YH; Guo C; Li M; Zhang MB; Wang ZL.		
Authors Full Name:			thors	Full Name:	Lv. Yong-Hui: Guo. Chen: Li. Min: Zhang. Mino	ı-Bo: Wan	
Me	e SH	H S	ubject	Headings:	*Coronary Artery Disease / su [Surgery] Humans Myocardial Infarction / pc [Prevention & Control	<u>ol]</u>	

*Percutaneous Coronary Intervention / mt [Methods]

Randomized Controlled Trials as Topic

*Stents



Health

特定欄位查詢

Basic Search Find Citation Se	earch Tools Search Fields Adva	nced Search Multi-Field Search		
Basic Search Find Citation Search Tools Search Fields Advanced Search Multi-Field Search				
Basic Search Find Citation Se	earch Tools Search Fields Adva	nced Search Multi-Field Search		
1 Resource selected <u>Hide</u> ① Ovid MEDLINE(R) ALL 19				
		All Fields	▼	
AND ▼		All Fields	•	
AND ▼		All Fields	√ Search	
		+ Add Ne	w Row	
			Fields" Area.	
bk: Book Accession	ba: Book Authors	bf: Book Authors Full Name	Click the "i" button	
□ bn: Book Edition	be: Book Editors	pr: Book Part	next to the field to browse the index	
□ bt: Book Title	□ bv: Book Volume	cd: Cited Reference DOI	for the selected item	
cq: Cited Reference Date	p: Cited Reference Issue	cz: Cited Reference PMCID	Items marked with	
□ cg: Cited Reference Page	ny: Cited Reference Publisher Identifier	cs: Cited Reference Source	can only be searched. No index is available.	
☐ rz: Cited Reference UI	ce: Cited Reference Volume	cl: Collection Title		
A Woltone Klunner				



關鍵字查詢技巧: 切截與萬用字元

- ■切截字:\$或*
 - 無限制切截查詢:
 - depress*: depress, depressive, depression, depressed, ...
 - 有限制切截查詢:
 - gene*2: gene, genes, genera,...(不會有generation)
- ■萬用字元:#和?
 - ■#:表示一個字母
 - organi#ation : organization \ organisation
 - dog#: dogs (不會有dog)
 - wom#n : woman > women
 - ■?:表示0或1個字母
 - colo?r: color, colour
 - dog?: dog和dogs







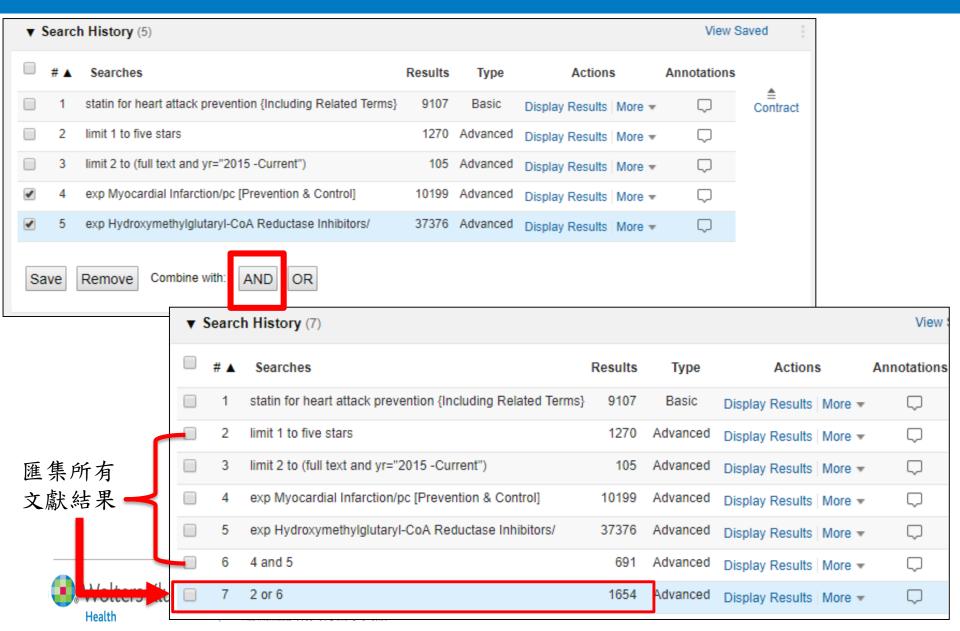
- ■合併檢索 (布林邏輯)
 - AND
 - OR
 - NOT
 - ADJ# pain management → pain* adj3 manag*
 - Pain management
 - management of bladder pain
 - manage cancer pain.....
 - management of painful
 - Early Gains Versus Late Pains: Management Options







合併檢索結果





檢索

檢索流程

合併查詢結果: AND/OR/NOT(手動輸入)

所有關鍵字及其相關字詞延伸查詢 有5顆星文獻 篩選5顆星文獻 Basic Search 基本檢索 (不適用 AND/OR/NOT) 沒有5顆星文獻 調整關鍵字,直到有5顆星文獻 MeSH比對 切截字 關鍵字查詢 萬用字元 Advanced Search 進階查詢 AND OR 合併查詢 NOT ADJ# Find Citation Search Fields 特定欄位查詢 Multi-Field Search Map Term: MeSH 比對 PerMuted Index: MeSH關鍵字 Search Tools



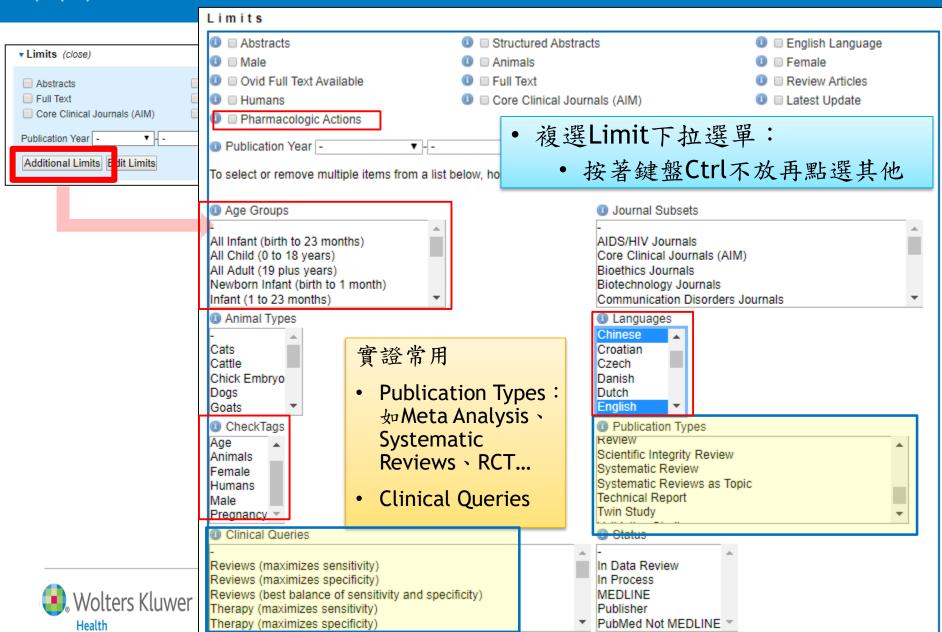


Subheadings: 研究方向



Limit篩選

Subject Subjects



Special Ovid Filters for MEDLINE

Ovid Medline EBM 文獻查詢順位

- Systematic Review
 - Cochrane System Review
 - Health Technology Assessments
 - ACP Journal club
 - Meta-Analysis
 - Consensus Development Reports
 - Decision Analyses
 - Guideline/Practice Guideline
- ---- V----Clinical Queries---- V----
- RCTs
 - Double Blind studies (therapy, diagnosis)
- Controlled Clinical Trials
 - Multicenter Studies
 - Crossover Design

- Cohorts Studies (prognosis, etiology, prevention)
 - Longitudinal Studies
 - Follow-Up Studies
 - Prospective Studies
- Case Control Studies (prognosis, etiology, prevention)
 - Retrospective Studies
- Cross-Sectional Survey
- Review
- Case Series/Case Reports

- •使用Limits/Additional Limits篩選,例如RCTs
- •研究方法可使用Map Term to Subject Heading查詢,如Cohorts Studies





Clinical Queries (I)

Strategy Type	Optimizatio n	Sens / spec / prec / acc(%)	Ovid Syntax
	Sensitivity	99 / 70 / 10 / 71	clinical trial.mp. OR clinical trial.pt. OR random:.mp. OR tu.xs
Therapy 治療	Specificity	93 / 97 / 54 / 97	randomized controlled trial.pt. OR randomized controlled trial.mp.
	Optimized	96 / 95 / 39 / 95	randomized controlled trial.pt. OR randomized.mp. OR placebo.mp.
	Sensitivity	99 / 74 / 1 / 74	sensitiv:.mp. OR diagnos:.mp. OR di.fs.
Diagnosis 診斷	Specificity	65 / 98 / 11 / 98	specificity.tw.
107 EI	Optimized	93 / 92 / 3 / 92	sensitiv:.mp. OR predictive value:.mp. OR accurac:.tw.
	Sensitivity	90 / 80 / 2 / 80	incidence.sh. OR exp mortality OR follow-up studies.sh. OR mortality.sh. OR prognos:.tw. OR predict:.tw. OR course:.tw.
Prognosis 預後	Specificity	52 / 94 / 3 / 94	prognos:.tw. OR first episode.tw. OR cohort.tw.
1A 1X	Optimized	83 / 84 / 2 / 84	prognosis.sh. OR diagnosed.tw. OR cohort:.mp. OR predictor:.tw. OR death.tw. OR exp models, statistical

Sensitivity/sens = 敏感度; Specificity/spec = 特異性; Optimized=最佳化; prec = 精確性; acc = 準確性





Clinical Queries (II)

Strategy Type	Optimization	Sens / spec / prec / acc(%)	Ovid Syntax
	Sensitivity	99.9 / 52 / 3 / 53	search:.tw.OR meta analysis.mp,pt.OR review.pt.OR di.xs. OR associated.tw.
Reviews 評論	Specificity	71 / 99.2 / 57 / 99	MEDLINE.tw.OR systematic review.tw.OR meta analysis.pt.
	Optimized	98 / 91 / 14 / 91	meta analysis.mp,pt.OR review.pt.OR search:.tw.
Clinical	Sensitivity	96 / 79 / 1 / 79	predict:.mp. OR scor:.tw. OR observ:mp.
Prediction Guides	Specificity	54 / 99 / 12 / 99	validation.tw. OR validate.tw.
臨床預測指引	Optimized	90 / 90 / 2 / 90	predict:tw. OR validat:.mp. OR develop.tw.
Qualitative	Sensitivity	95 / 70 / 2 / 70	interview:.tw. OR px.fs. OR exp health services administration
Studies	Specificity	61 / 99 / 37 / 99	qualitative.tw. OR themes.tw.
質化研究	Optimized	92 / 92 / 7 / 92	interview:.mp. OR experience:.mp. OR qualitative.tw.

Sensitivity/sens = 敏感度; Specificity/spec = 特異性; Optimized=最佳化; prec = 精確性; acc = 準確性





Clinical Queries (III)

Strategy Type	Optimization	Sens / spec / prec / acc(%)	Ovid Syntax
	Sensitivity	93 / 63 / 2 / 63	risk:.mp. OR exp cohort studies OR between group:.tw.
Etiology 病因	Specificity	51 / 95 / 6 / 95	relative risk:.tw. OR risks.tw. OR cohort stud:.mp.
<i>7</i> / 7	Optimized	83 / 83 / 3 / 83	risk.mp. OR mortality.mp. OR cohort.tw.
	Sensitivity	100 / 96 / 13 / 96	ec.fs. OR cost.tw. OR health care costs.sh.
Costs	Specificity	57 / 99.5 / 37 / 99	cost effectiveness.tw. OR health care costs.sh.
成本	Optimized	98 / 98 / 18 / 98	exp "costs and cost analysis" OR costs.tw. OR cost effective:.tw.
Economics	Sensitivity	100 / 94 / 1 / 94	randomized controlled trial.pt. OR cost effectiveness.tw. OR cost effective.tw.
成本效益	Specificity	51 / 99.4 / 6 / 99	cost effective.tw. OR sensitivity analys:.tw.
	Optimized	97 / 96 / 2 / 96	cost:.mp. OR cost benefit analys:.mp. OR health care costs.mp.

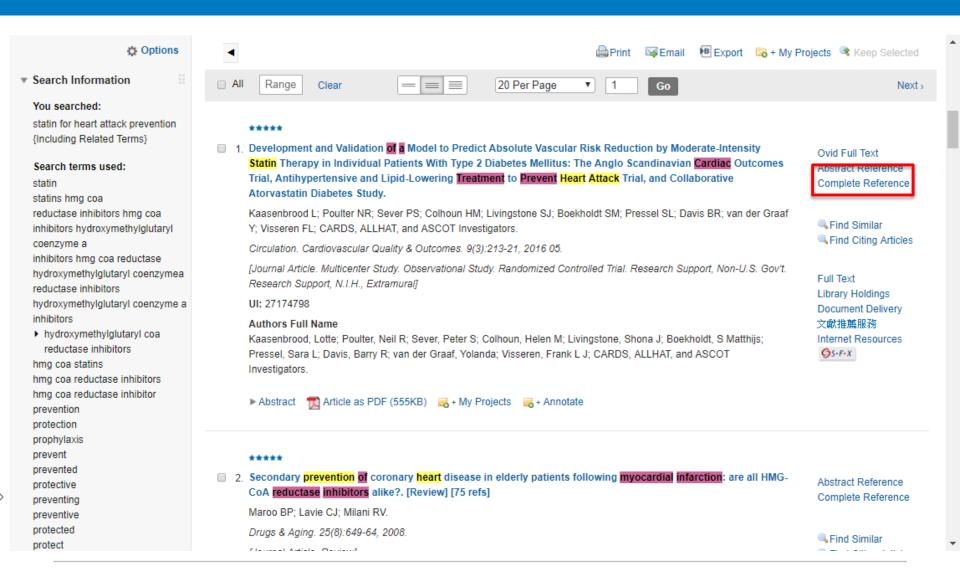
Sensitivity/sens = 敏感度; Specificity/spec = 特異性; Optimized=最佳化; prec = 精確性; acc = 準確性







篩檢文獻小訣竅: Complete reference









瀏覽文獻小訣竅:看MeSH

Relevance: ★★★★★

Unique Identifier: 25832289

Title: Preoperative rosuvastatin protects patients with coronary artery disease undergoing noncardiac surgery.

Source: Cardiology. 131(1):30-7, 2015.

Abbreviated Source: Cardiology. 131(1):30-7, 2015.

Version ID: 1

Record Owner: From MEDLINE, a database of the U.S. National Library of Medicine.

Status: MEDLINE

Authors: Xia J; Qu Y; Yin C; Xu D.

Authors Full Name: Xia, Jinggang; Qu, Yang; Yin, Chunlin; Xu, Dong.

Institution: Xia, Jinggang. Department of Cardiology, Xuanwu Hospital, Capital Medical University, Beijing, PR China.

Comments: Comment in: Cardiology. 2015;131(1):51-2; PMID: 25871508

MeSH Subject Headings: Aged

*Coronary Artery Disease / co [Complications]

<u>Female</u>

*Fluorobenzenes / ad [Administration & Dosage]

<u>Humans</u>

*Hydroxymethylglutaryl-CoA Reductase Inhibitors / ad [Administration & Dosage]

<u>Male</u>

Middle Aged

*Myocardial Infarction / pc [Prevention & Control]

*Postoperative Complications / pc [Prevention & Control]

Preoperative Care

*Pyrimidines / ad [Administration & Dosage]

Rosuvastatin Calcium

*Sulfonamides / ad [Administration & Dosage]

Abstract: OBJECTIVES: We explored whether preoperative rosuvastatin could protect the cardiac health of patients with coronary artery disease



瀏覽文獻小訣竅: 看文獻類型

Abstract:

OBJECTIVES: We explored whether preoperative rosuvastatin could protect the cardiac health of patients with coronary artery disease undergoing emergency, noncardiac surgery.

METHODS: We randomized 550 noncardiac emergency surgery patients with stable coronary artery disease on long-term statin therapy to treatment with and without preoperative rosuvastatin. All patients received rosuvastatin after surgery. We evaluated the incidence of myocardial necrosis and major adverse cardiovascular and cerebrovascular events (MACCE) 30 days and 6 months after surgery.

RESULTS: Creatinine kinase-myocardial band (CK-MB) isoform elevations occurred less frequently 12 and 24 h after noncardiac emergency surgery in the experimental group than in the control group (p = 0.029). After surgery, the incidence of MACCE was also lower in the experimental group than in the control group (p = 0.019). The difference was mainly due to the incidence of perioperative myocardial infarction (p = 0.029). Multivariable analysis found that rosuvastatin reload reduced the incidence of MACCE 52% 6 months after surgery (p = 0.03).

CONCLUSIONS: Preoperative rosuvastatin reload therapy decreases the incidence of myocardial necrosis and MACCE after noncardiac emergency surgery in patients with stable coronary artery disease on long-term statin therapy.

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Registry Number/Name of

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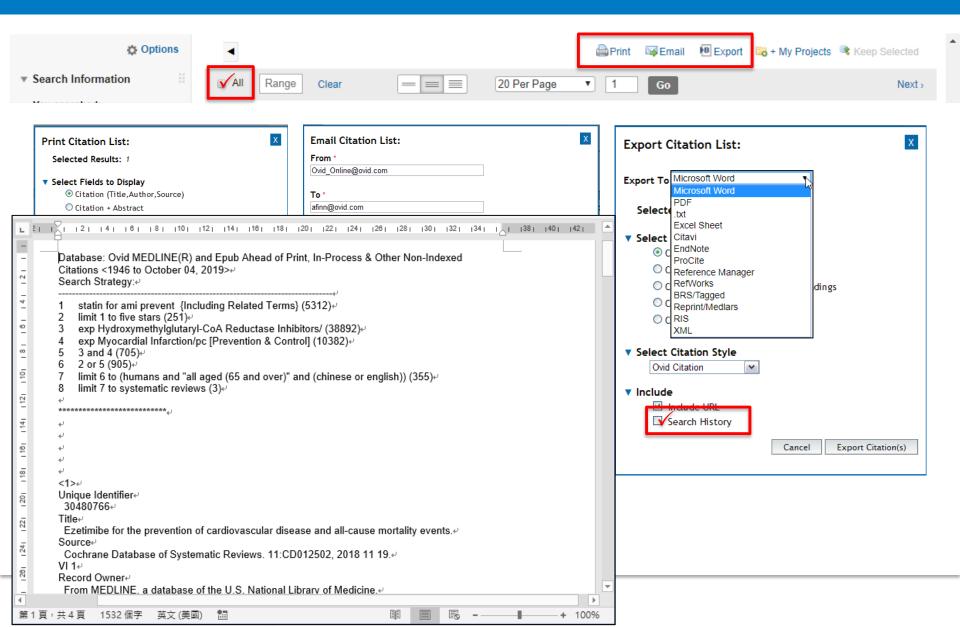






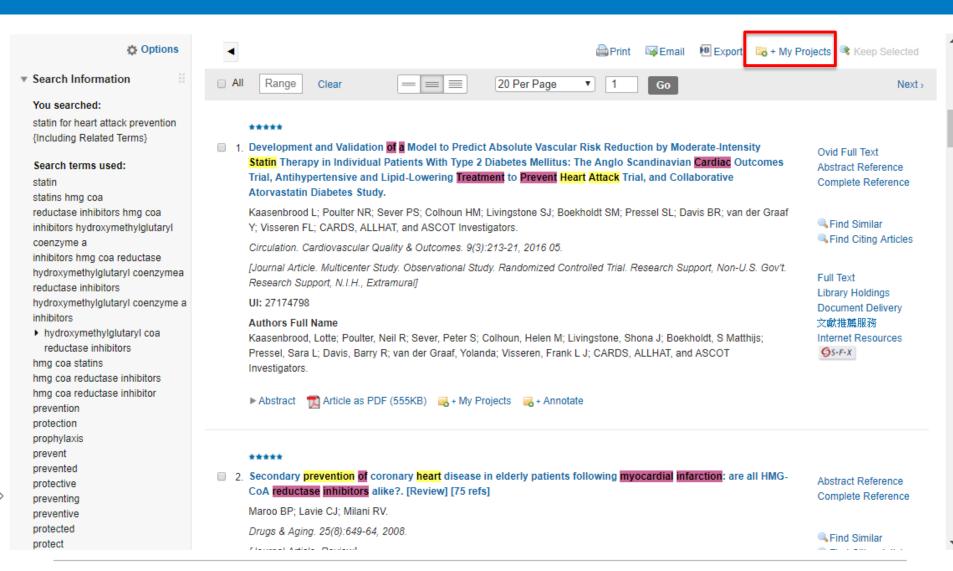


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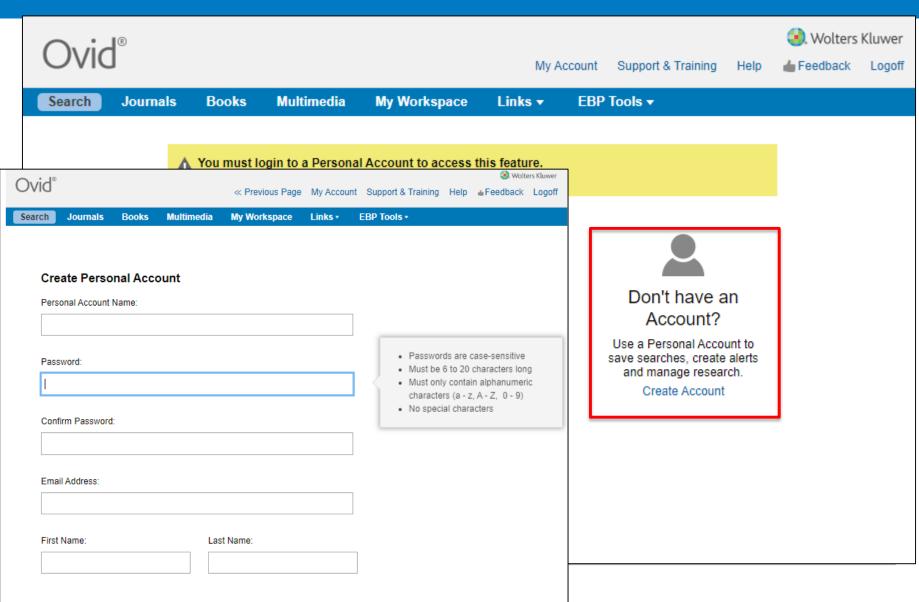






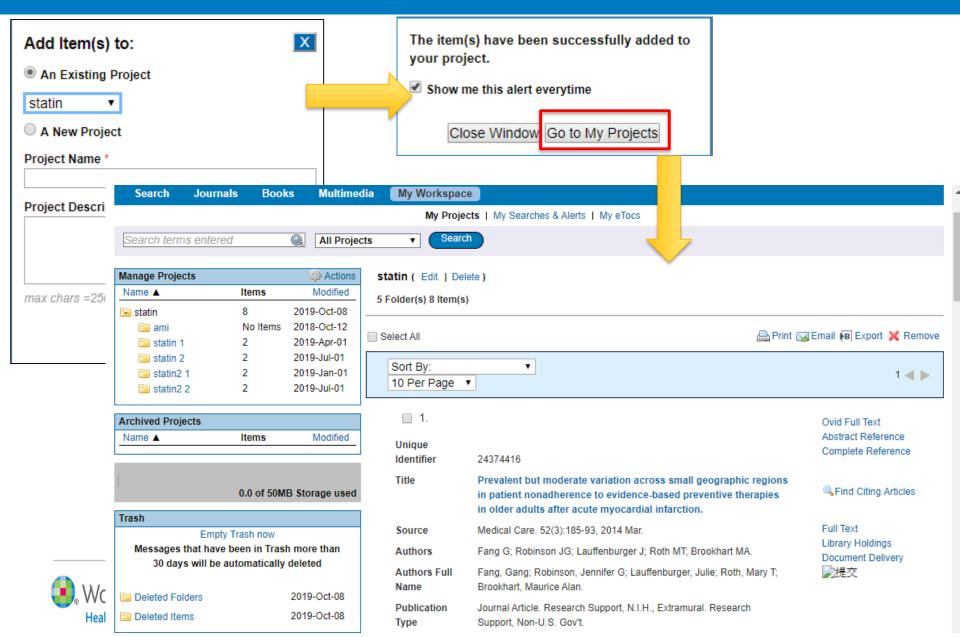
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Cardiology

Issue: Volume 131(1), April 2015, p 30-37 Copyright: @ 2015 S. Karger AG, Basel Publication Type: [Original Research] DOI: 10.1159/00037187210.1159/000371872

ISSN: 0008-63121421-9751 Accession: 25832289

Keywords: Aged, Coronary Artery Disease, Female, Fluorobenzenes, Humans, Hydroxymethylglutaryl-CoA Reductase Inhibitors, Male, Middle Aged, Myocardial Infarction, Postoperative Complications, Preoperative Care, Pyrimidines, Rosuvastatin Calcium, Sulfonamides

[Original Research]

Preoperative Rosuvastatin Protects Patients with Coronary Artery Disease Undergoing Noncardiac Surgery

Xia, Jinggang^a; Qu. Yang^b; Yin, Chunlin^a; Xu. Dong^a

▼ Abstract

We explored the preparation of the cardina health

Mesults:: Creatinine All., se-myocal dialiband (CK Mip) isolorin excluders occurred less frequently 12 and 2 in life, noncall emergency surger, in the experimental

group than in the control group (p = 0.029). After surgery, the incidence of MACCE was also lower in the experimental group than in the control group (p = 0.019). The difference was mainly due to the incidence of perioperative myocardial infarction (p = 0.029). Multivariable analysis found that rosuvastatin reload reduced the incidence of MACCE 52% 6 months after surgery (p = 0.03).

Conclusions:: Preoperative rosuvastatin reload therapy decreases the incidence of myocardial necrosis and MACCE after noncardiac emergency surgery in patients with stable coronary artery disease on long-term statin therapy.

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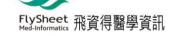
Introduction

The prevalence of cardiovascular disease increases with age, as does the need for emergency surgical intervention in a variety of other health conditions. Since the number of people age 65 and older will increase 25-35% over the next 30 years, the number of people with cardiovascular disease undergoing emergency surgical procedures will increase as well [1,2]. Perioperative major adverse cardiovascular and cerebrovascular events (MACCE) continue to be important clinical problems. Autopsy studies suggest that approximately half of major adverse cardiovascular events during surgical procedures are attributable to myocardial necrosis because of a sustained mismatch between the myocardial oxygen supply and myocardial oxygen demand [3,4].

Several studies involving large populations have consistently demonstrated that statins can prevent adverse cardiovascular events at both the primary and secondary levels [5,6,7]. Previous studies focused on the protective effect of preoperative statins, especially atorvastatin, against myocardial infarction (MI) during or immediately after cardiac surgery, including percutaneous coronary intervention [8], vascular surgery [9], and coronary artery bypass grafting (CABG) [10].

There are few studies about the effects of rosuvastatin on patients undergoing noncardiac emergency surgery. This study was designed to investigate whether preoperative





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Introduction

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IMAGE GALLERY



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Introduction

The prevalence of cardiovascular disease increases with age, as does the need for emergency surgical intervention in a variety of other health conditions. Since the number of people age 65 and older will increase 25-35% over the next 30 years, the number of people with cardiovascular disease undergoing emergency surgical procedures will increase as we in [1,2]. Perioperative major adverse cardiovascular and cerebrovascular events (MACCE) continue to be important clinical problems. Autopsy studies suggest that approximately helf if major adverse cardiovascular events during surgical procedures are attributable to myocardial necrosis because of a sustained mismatch between the myocardial oxyger upply and myocardial oxygen demand [3,4].

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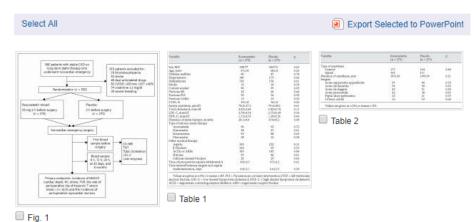
There are few study as about the effects of rosuvastatin on patients undergoing noncardiac emergency surgery. This study was designed to investigate whether preoperative rosuvastatin reload solution of the control of

References

1 Mangano DT: Perioperative cardiac morbidity. Anesthesiology 1990;72:153-184. Ovid Full Text | 文獻推薦服務 | SFX Demo | Full Text | Internet Resources
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IMAGE GALLERY







Study Design

Clinical Follow-Up

Statistical Analysis Results

Study Population

Primary Endpoints

Discussion

Limitations

Conclusions

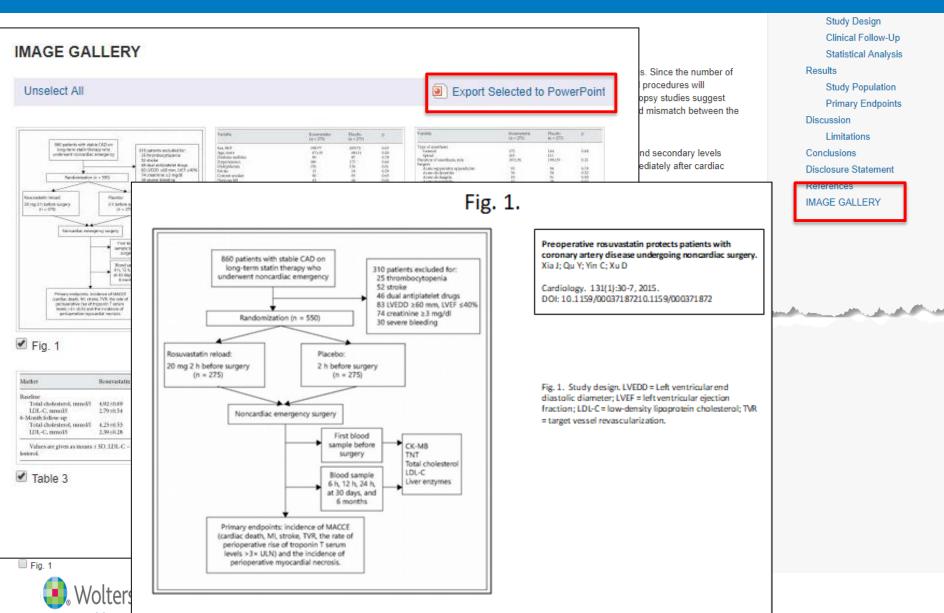
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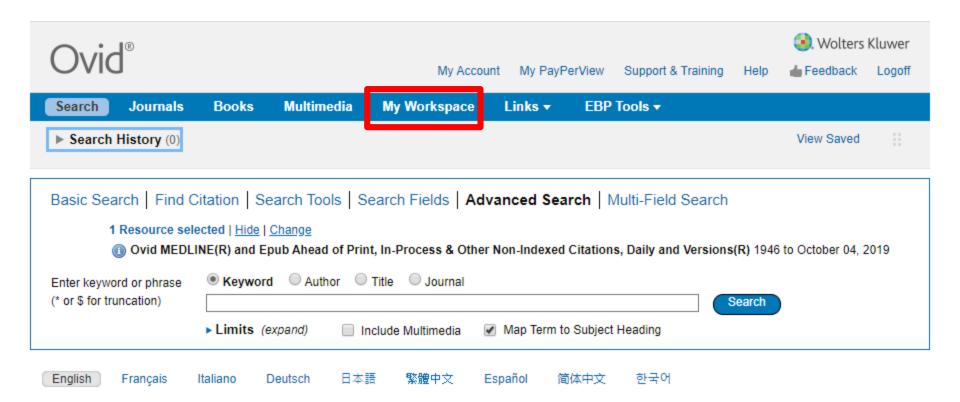
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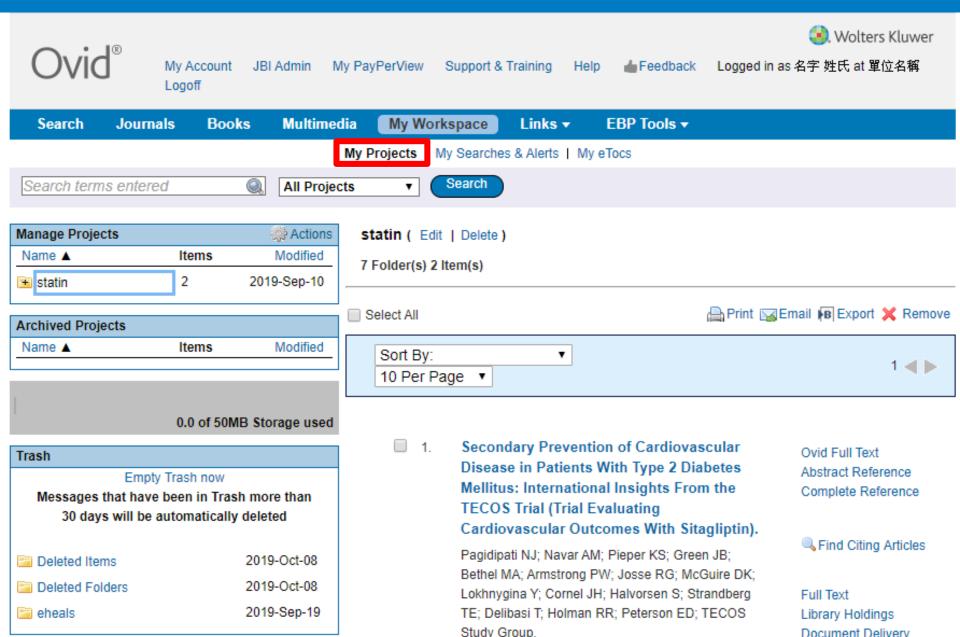






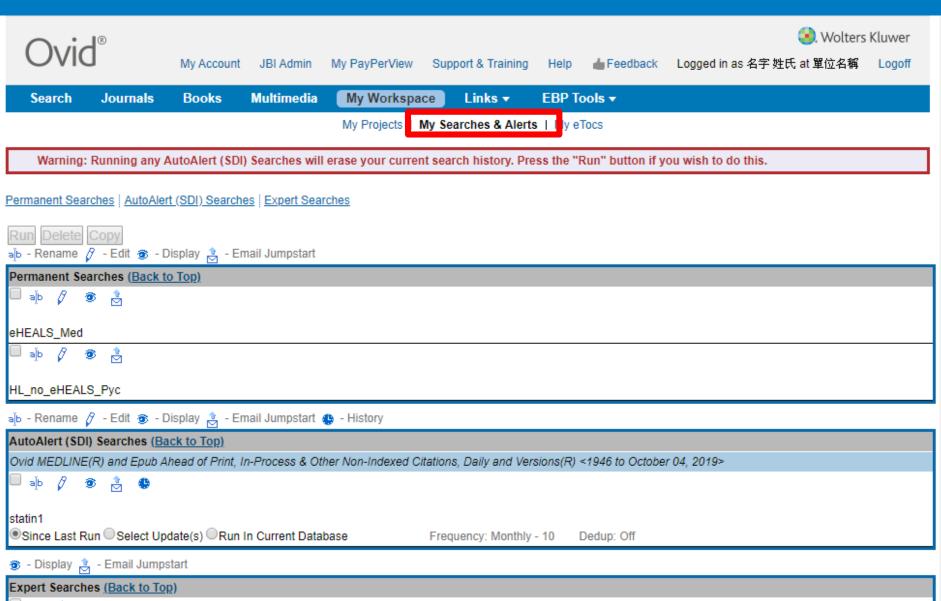


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局部冷敷是否能減輕會陰傷口之疼痛

- P: episiotomy
- I : cold compress
- C: non cold compress
- O: perineal pain





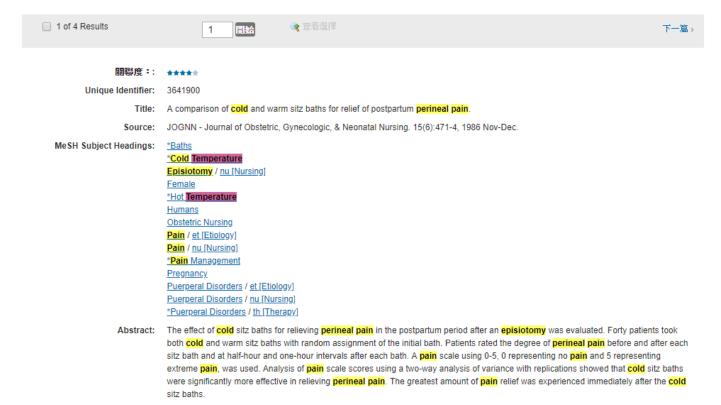
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再次確認採用之關鍵字

	Patient/Population	Intervention	comparison	Outcomes	
Keywords	episiotomy	cold compress	non cold compress	perineal pain	
MeSH	 Episiotomy Delivery,	• Cryotherapy		PainPain Management	

基本檢索 │ 書目檢索 │ 檢索工具 │ 欄位檢索 │ 進階檢索 │ 多欄位檢索

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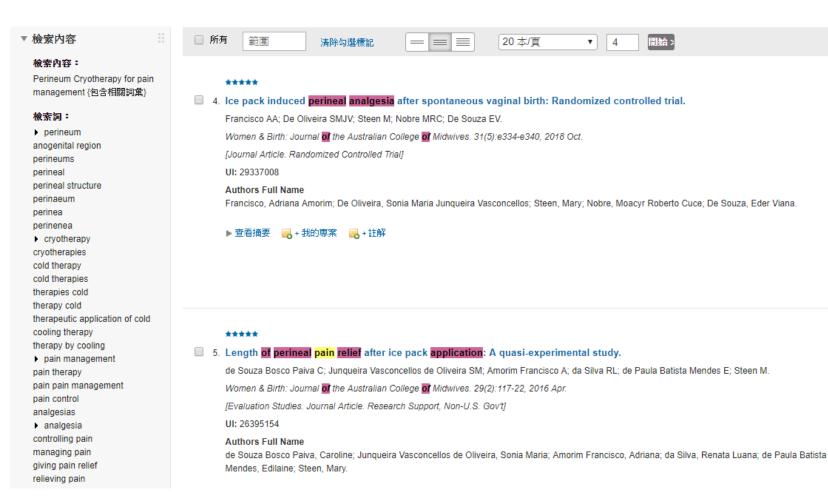


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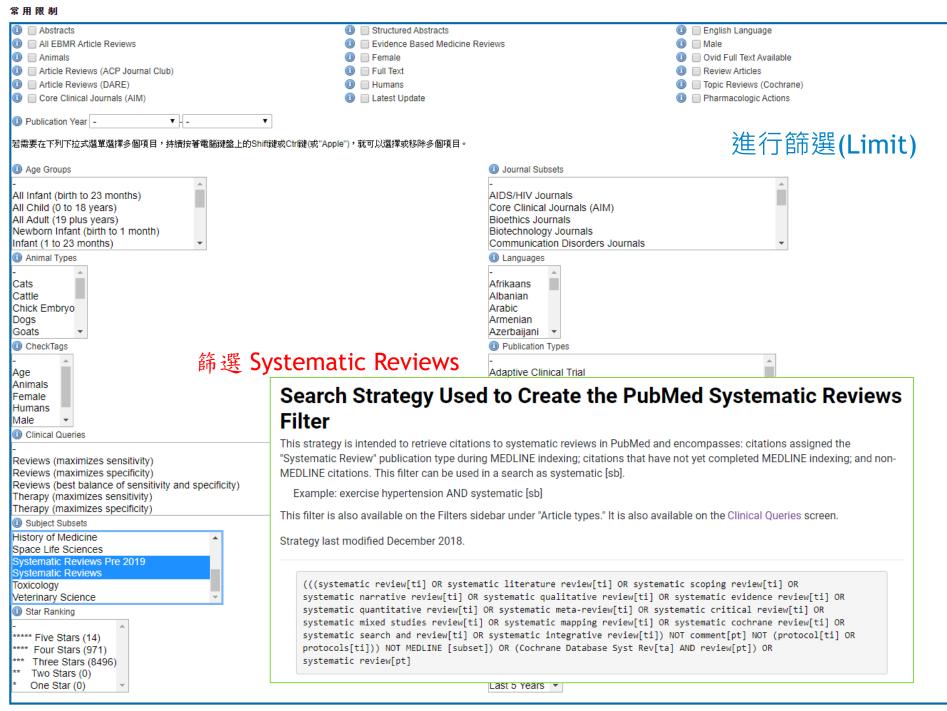


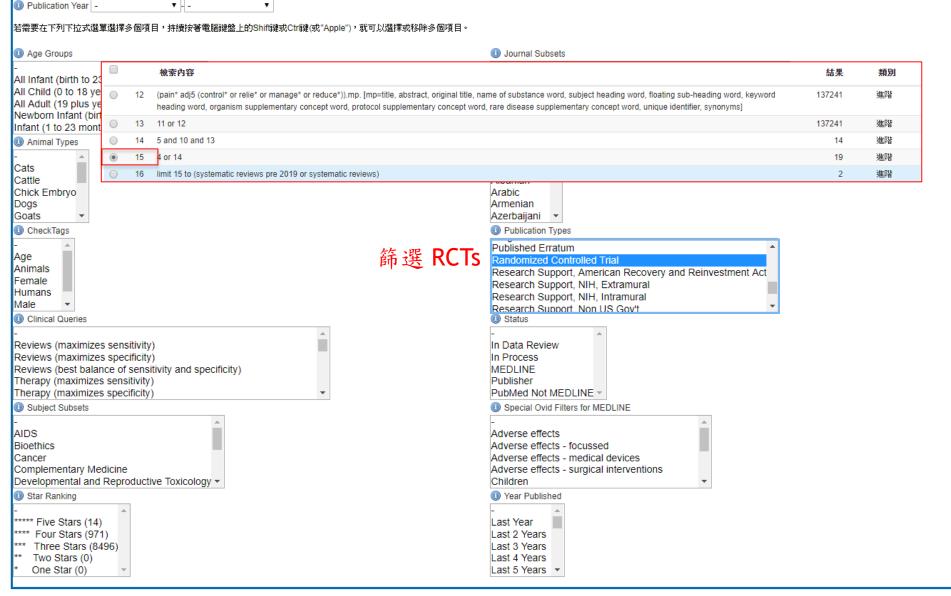
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	1	cold compress perineal pain for episiotomy {Including Related Terms}	5297	基本	顯示結果 更多 ▼	\Box	縮小
	2	from 1 keep 2-5 Basic Search	4	進階	顯示結果 更多 ▼	\Box	
	3	Perineum Cryotherapy for pain management {包含相關詞彙}	9481	基本	顯示結果 更多 ▼	\Box	
	4	limit 3 to five stars	14	進階	顯示結果 更多 ▼	\Box	
	5	Cryotherapy/	4891	進階	顯示結果 更多 ▼	\Box	
	6	Perineum/	9288	進階	顯示結果 更多 ▼	\Box	
	7	exp Puerperal Disorders/nu, th [Nursing, Therapy]	5028	進階	顯示結果 更多 ▼	\Box	
	8	exp Episiotomy/	2086	進階	顯示結果 更多 ▼	\Box	
	9	exp Delivery, Obstetric/	76996	進階	顯示結果 更多 ▼	\Box	
	10	6 or 7 or 8 or 9	89472	進階	顯示結果 更多 ▼	\Box	
	11	exp Pain Management/	31160	進階	顯示結果 更多 ▼	\Box	
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	14	5 and 10 and 13 Advanced Search	14	進階	顯示結果 更多 ▼	\Box	
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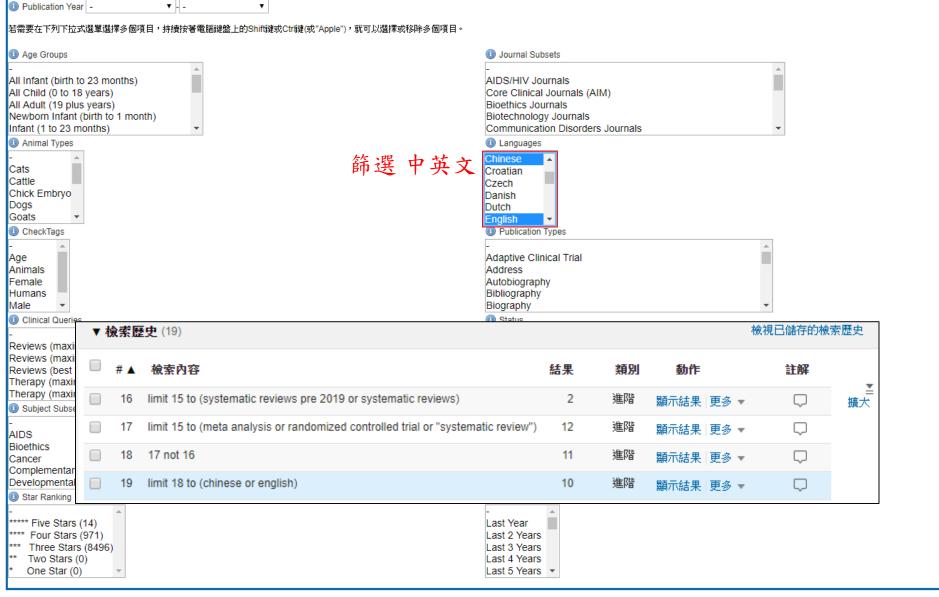












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# 🛦	檢索內容	結果	類別
1	cold compress perineal pain for episiotomy {Including Related Terms}	5297	基本
2	from 1 keep 2-5	4	進階
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6	Perineum/	9288	進階
7	exp Puerperal Disorders/nu, th [Nursing, Therapy]	5028	進階
8	exp Episiotomy/	2086	進階
9	exp Delivery, Obstetric/	76996	進階
10	6 or 7 or 8 or 9	89472	進階
11	exp Pain Management/	31160	進階
12	(pain* adj5 (control* or relie* or manage* or reduce*)).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	137241	進階
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