The Cochrane Library

SRIS 碩睿資訊 Spring 2017



大綱

資料庫背景介紹



利用PICO檢索_又快又準

利用MeSH Term檢索_聰明不遺漏

利用Search Manager_策略化檢索

註冊個人帳號, 善用個人化功能



Cochrane



為什麼需要 The Cochrane Library?

持續知識 需求

「你們現在在醫學院所學到的,其中有一半在十年內將會被證實是錯誤的;糟糕的是,連你的老師也不知道哪些是錯誤的。」

~Dr. Sydney Burwell (1956 Dean, Harvard Medical School)

時間有限

- >2百萬篇文章發表於2萬種生物醫學期刊/年
- →臺北101大樓(500公尺)
- >21篇/天→掌握核心發展最新狀況

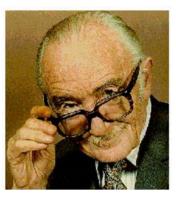
專業審閱 專業推薦

醫學界重要的出版品一致推崇Cochrane Review是目前最具參考價值的系統評論(Gold Standard)

- The Lancet
- New England Journal of Medicine
- British Medical Journal
- The Journal of the American Medical Association



資料庫背景



- 使用已被證明有效果的醫療措施
 - →避免醫療資源浪費
- 呼籲健康照護的成效應有實證研究支持
 - →RCT研究 Randomized Controlled Trial

Professor Archibald Leman Cochrane, CBE FRCP FFCM, (1909-1988) 英國內科醫師及流行病學專家

1972

1992

Cochrane Collaboration 英國成立 Cochrane Taiwan 成立 @TMU

2015



更名為The Cochrane

EFFECTIVENESS AND EFFICIENCY

THE ROCK CARLING FELLOWSHIP

1971

RANDOM REFLECTIONS ON HEALTH SERVICES

A. L. Cochrane

CBE, FRCP

Director

MRC Epidemiology Unit

Cardiff

14 Centres

14 Centres and 19 Associate Centres

16 Methods Groups

11 Fields & Networks

53 Review Groups 🔎

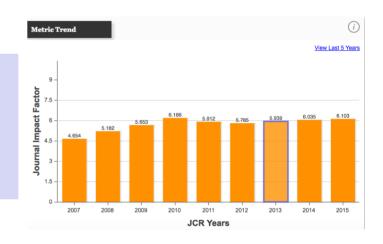


研究成果收錄成CDSR(Cochrane Database of Systematic Review) 一段時間會重新進行資料收集及評讀

SCI排名

2016 Medicine, General & Internal Impact Factor= 6.124

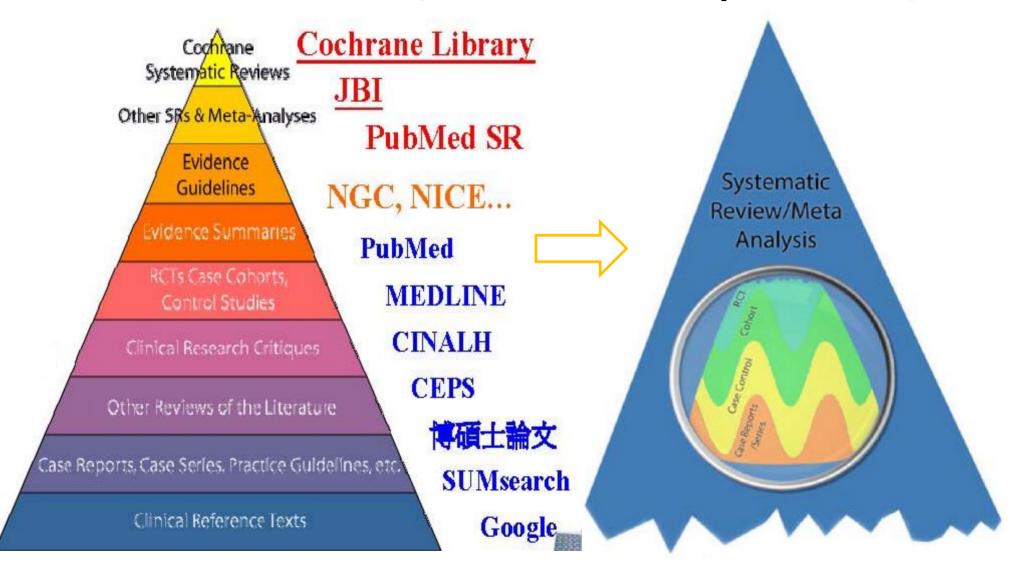
Rank=14/154



針對特定臨床醫療照護問題的介入方式評斷其療效協助醫療專業人士進行診療判斷與決策



文獻搜尋優先順序 (STRATEGY: Top→Down)





包括六個文獻庫

- Cochrane Database of Systematic Reviews (Cochrane Reviews)
 - 針對特定臨床問題(健康照護)的介入方式評斷其療效,是全文資料庫
- Database of Abstracts of Reviews of Effects (Other Reviews)
 - 收錄經過嚴格審核標準的系統評論摘要資料庫
- Cochrane Central Register of Controlled Trials (Clinical Trials)
 - 收錄隨機臨床實驗的書目資料庫
- Cochrane Methodology Register (Methods Studies)
 - 蒐集已出版的且針對產生對照實驗方法的書目資訊
- Health Technology Assessment Database (Technology Assessments)
 - 提供健康醫療技術之評估摘要,目的在於改善健康照顧的品質及成本效益
- NHS Economic Evaluation Database (Economic Evaluations)
 - 收錄不同治療方式的成本比較和治療效果比較等摘要資料

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Search title, abstract, keyword

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 Cochrane.org

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Highlighted Reviews Editorials **Special Collections**

Aquatic exercise for the treatment of knee and hip osteoarthritis

Else Marie Bartels, Carsten B Juhl, Robin Christensen, Kåre Birger Hagen, Bente Danneskiold-Samsøe, Hanne Dagfinrud, Hans Lund

23 March 2016

Workplace interventions for reducing sitting at work

Nipun Shrestha, Katriina T Kukkonen-Harjula, Jos H Verbeek, Sharea Ijaz, Veerle Hermans, Soumyadeep Bhaumik 17 March 2016

Interventions for improving outcomes in patients with multimorbidity in primary care and community settings

Susan M Smith, Emma Wallace, Tom O'Dowd, Martin Fortin 14 March 2016

Tell us what you think. We welcome your comments on Cochrane Reviews.

Delirium prevention

Read the editorial

submit a comment ©

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Consumer & communication strategies

Dentistry & oral health

Developmental, psychosocial & learning

problems

Diagnosis

Ear, nose & throat

Effective practice/health systems

Endocrine & metabolic

Eyes & vision

Gastroenterology

Genetic disorders

Gynaecology

Health & safety at work

Heart & circulation

Infectious disease

Kidney disease

Lungs & airways

Mental health

Methodology

Neonatal care

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Orthopaedics & trauma

Pain & anaesthesia

Pregnancy & childbirth

Public health

Rheumatology

Skin

Tobacco, drugs & alcohol

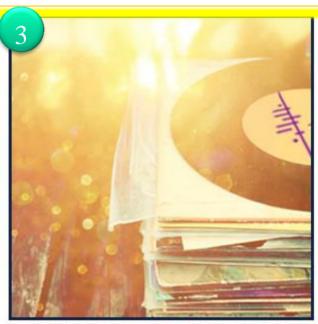
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Workplace interventions for reducing sitting

Nipun Shrestha, Katriina T Kukkonen-Harjula, J

Susan M Smith, Emma Wallace, Tom O'Dowd, M 14 March 2016

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Effective practice/health systems

Endocrine & metabolic

Eyes & vision

Gastroenterology

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Gynaecology

Health & safety at work

Heart & circulation

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Kidney disease

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Rheumatology

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Tobacco, drugs & alcohol

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Wounds





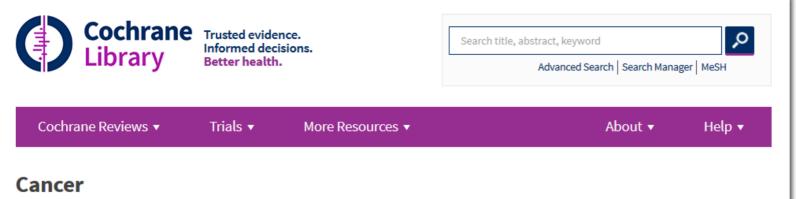
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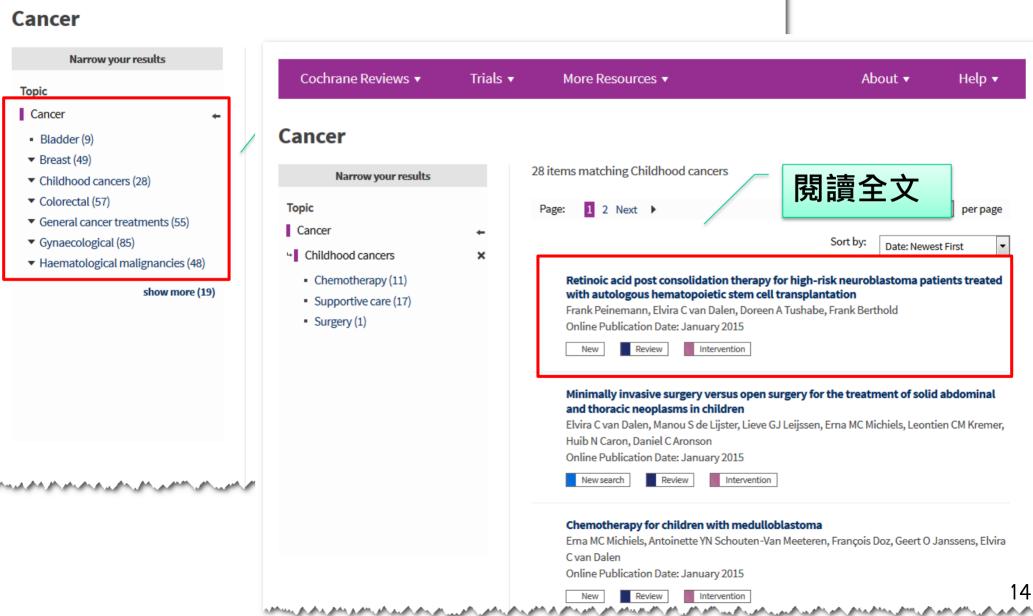
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Airways Group

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- Dementia and Cognitive Imp
- Depression, Anxiety and Ne
- Developmental, Psychosocial and Learning Problems Group
- Drugs and Alcohol Group
- Ear, Nose and Throat Disorders Group

#AEffective Practice and Officialisation of Policy Ghouse, 4444, 444, 4444

Narrow your results

Cochrane Review Group

Airways Group

Topic

- ▼ Child health (160)
- Complementary & alternative medicine (16)
- Developmental, psychosocial & learning problems (1)
- Diagnosis (1)
- ▼ Gastroenterology (2)
- Genetic disorders (1)
- ▼ Heart & circulation (1)

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Highlighted Cochrane Reviews

Indacaterol, a once-daily beta2-agonist, versus twice-daily beta2-agonists or placebo for chronic obstructive pulmonary disease

James B Geake, Eli J Dabscheck, Richard Wood-Baker, Christopher J Cates

339 matching items

選取相關主題的子分類, 並閱讀全文

Sort by:

Date: Newest First

page

Exhaled nitric oxide levels to guide treatment for children with asthma

Helen L Petsky, Kayleigh M Kew, Jennifer A Kynaston, Cathy Turner, Anne B Chang Online Publication Date: January 2015

Protocol

Intervention

Unsupervised exercise training versus no exercise training for chronic obstructive pulmonary disease

Katy E Mitchell, Rachael A Evans, Vicki Johnson-Warrington, Karen Rees, Theresa Harvey-Dunstan, Sally J Singh

Online Publication Date: January 2015



New Protocal Intervention



- Neuromuscular Disease Group
- Occupational Safety and Health Group
- Oral Health Group

go to the Journal Club O





Cm Comment

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檢索結果顯示頁面

Search		Search Manager	Medical Terms (MeSH)		Browse		
Title, Abstract, Keyword	ls 🔻	"cardiovascular disease"			Go Save		
→ AND ▼ Title, Abstra	ct, Keywords	"omega-3"			Add to Search Manager		
Search Limits	Search Help	(Word variations have been s	earched)				
Clear							
► Saved Searches (1)							
savea ocarones (1)	_						
All Results (275)	Cochrane Da	tabase of Systematic Reviews	: Issue 2 of 12, February 2015				
Cochrane Reviews (4)	Issue <u>update</u>	d daily throughout month					
All Review	There are 4 r "omega-3" i	esults from 8724 records for your Title, Abstract, Keywords	our search on "cardiovascular disease" i in Cochrane Reviews'	in Title, /	Abstract, Keywords and		
Protocol			Sc	ort by Re	levance: high to low		
Other Reviews (19)Trials (250)	Select all	Export all Export selected	I				
Methods Studies (0)		nega 3 fatty acid for the preventi	ion of cognitive decline and dementia				
Technology Assessments (2)	En	Emma Sydenham , Alan D Dangour and Wee-Shiong Lim Online Publication Date: June 2012					
Economic Evaluations (0)Cochrane Groups (0)	On	nine Publication Date. June 2012	<u> </u>		Review		
All	Or	nega 3 fatty acids for prevention	n and treatment of cardiovascular disease	\			
Current Issue		- · · -	arolyn D Summerbell , Helen Moore , Helen V Iolph Riemersma and Shah Ebrahim	Worthingt	on , Andrew Ness , Nigel		
Me Methodology	On	lline Publication Date: October 2	004		Review		
Dx Diagnostic					Review		
Ov Overview			ids (PUFA) for type 2 diabetes mellitus ictor M Montori , Sean F Dinneen , Andrew HAV	WN Neil a	nd Andrew J Farmer		
Cc Conclusions changed	On	line Publication Date: January 2	008				
Ns New search					Review		
Mc Major change		•	preventing cardiovascular disease ell , Rachel Thompson , Deirdre Sills , Felicia (G Roherts	Helen I Moore and George		
Up Update	Da	vey Smith		O Nobella	, , i leien 3 moole and George		
Wd Withdrawn	On	lline Publication Date: May 2012					

關於本站

最新消息

活動訊息

學習資源

推廣活動

考科藍使用統計

實證醫學問卷調查

CDSR翻譯

翻譯志工招募

「讓全世界看到你!!!」考科藍摘要中文翻譯志工招募計畫

一、計畫簡介: CDSR (Cochrane Database of Systematic Reviews) 為考科藍圖書館 (the Cochrane Library) 的子資料庫之一,收錄大量系統性文獻回顧相關的研究論文及摘要,2014年Cochrane review之科學引文索引 (Science Citation Index, SCI) 的影響係數 (Impact Factor) 為6.035。考科藍臺灣研究中心(由臺北醫學大學實證醫學研究中心升格,以下簡稱本中心) 持續進行CDSR繁體中文的翻譯工作,並發布至考科藍圖書館資料庫,供全球華語健康照護者查詢及閱讀,以促進實證醫學知識之傳遞及交流。為增加考科藍圖書館中繁體中文資料的數量及品質,及拓展臺灣能見度,本中心持續招募「考科藍摘要中文翻譯志工」,除了讓國際看見臺灣在實證醫學領域的用心與努力外,也將在翻譯文稿末尾留下譯者大名以表彰譯者之貢獻,讓全世界看到你!

二、翻譯流程:加入翻譯志工後,我們會依據志工的專業領域挑選1~2篇英文摘要製成翻譯檔案,連同「翻譯原則」一起Email給志工。志工完成中文翻譯後,在文末註明服務單位及大名,於1個月內回覆本中心,由本中心審稿後將翻譯稿件上傳至Cochrane Library網頁,再進行下一次的翻譯。

三、計畫聯絡方式: Email: cochranetaiwan@tmu.edu.tw;電話: 02-27361661#7212

「考科藍摘要中文翻譯志工」報名表

 姓名
 連絡電話

 服務單位
 職稱

E-mail

專業領域(如:心臟、呼吸道、腸胃、骨骼肌肉、婦產、老人、兒童、癌症、精神疾病、護理照護、口腔健康、公共衛生…等,請盡量多填幾項。):

⋒ 衛生福利部焦點新聞

)疾管署防疫醫師赴中南美洲瞭解茲卡病毒疫 情防治資訊,並對僑胞進行衛教宣導 2016/04/06

■ 衛生福利部活動訊息

▶ 教育可以不e樣 2016/03/24

Cochrane in the news

 Cochrane Review of legislative smoking bans profiled in BuzzFeed 2016/02/05

相關網站

- Cochrane Taiwan
- East Asian Cochrane Aliance
- International Society of Evidence-Based Healthcare, Taiwan
- The Cochrane Collaboration
- The Cochrane Library
- Unbound Medicine

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- 1. 進入Advanced Search
- 2.點選頁面的Log in/Register
- 3.出現新視窗後,點選Register註冊 Cochrane library 帳號



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請將有 紅色星號* 的欄位填寫正 確後提交 Register on Wiley Online Library to:

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*	= R	ea	ILIİI	red	Fi	eld

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Re-type E-mail Address: *				pe Password: *	
	to	one-time confirmation e-mail will be sent this address. Your e-mail will serve as our login.			Passwords must be alphanumeric (special characters) between 5 and characters long.
Personal Profile			Cours	try/Location: *	
Last name: *	Ļ			of Interest: *	Select your country or location
	ai ci	irst Name and Last Name should be phanumeric with the following allowed haracters: hyphen(-), single quotes('), pace and dot	, , , ,		Select your area of interest
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Submit registration 20



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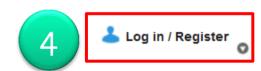
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Clear						
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進階檢索



實證醫學五步驟

"Standard EBM" Steps in EBM process (5 As)

- 提出問題(Ask: PICO)
 - Formulate an answerable question
- 搜尋證據(Acquire)
 - Track down the best evidence
- 嚴格評讀(Appraisal: VIP)
 - Critically appraise the evidence
- 恰當運用(Apply: 3E)
 - Integrate with clinical expertise and patient values
- 衡量結果(Audit)
 - Monitoring your performance



實證醫學五步驟

- 提出問題(Ask: PICO)
 - Patient or Problem(病人或問題)
 - Intervention or Indicator(介入或指標)
 - 某種治療、檢查、危險因子等
 - Comparator or Comparison(比較)
 - 該治療和什麼相比
 - Outcome (結果)
 - 想達成或避免什麼結果

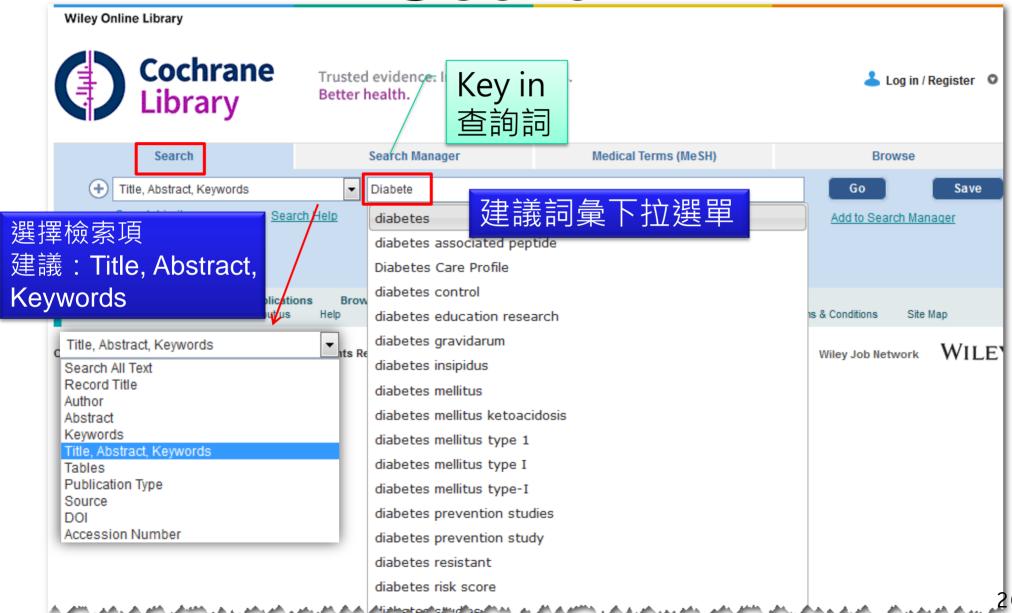


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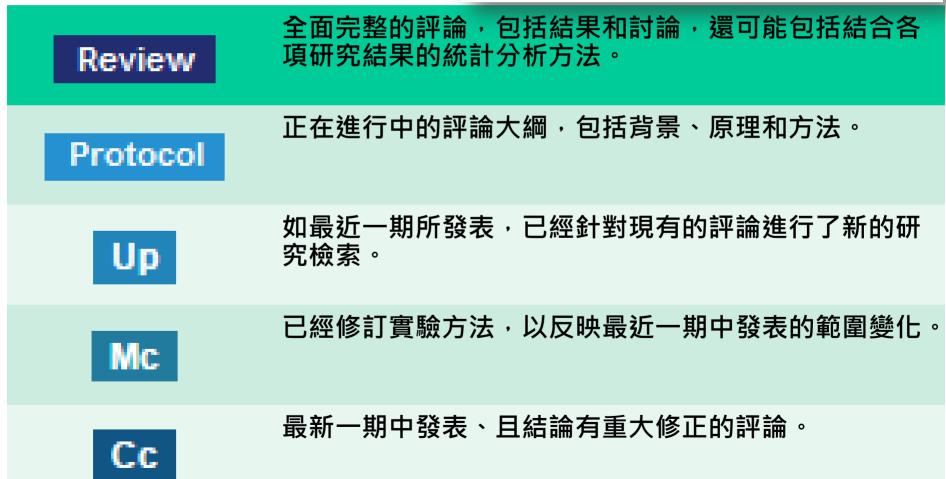






評論狀態圖示說明







檢索範例



一般檢索

Case:

抗生素能否緩和喉嚨痛的症狀?

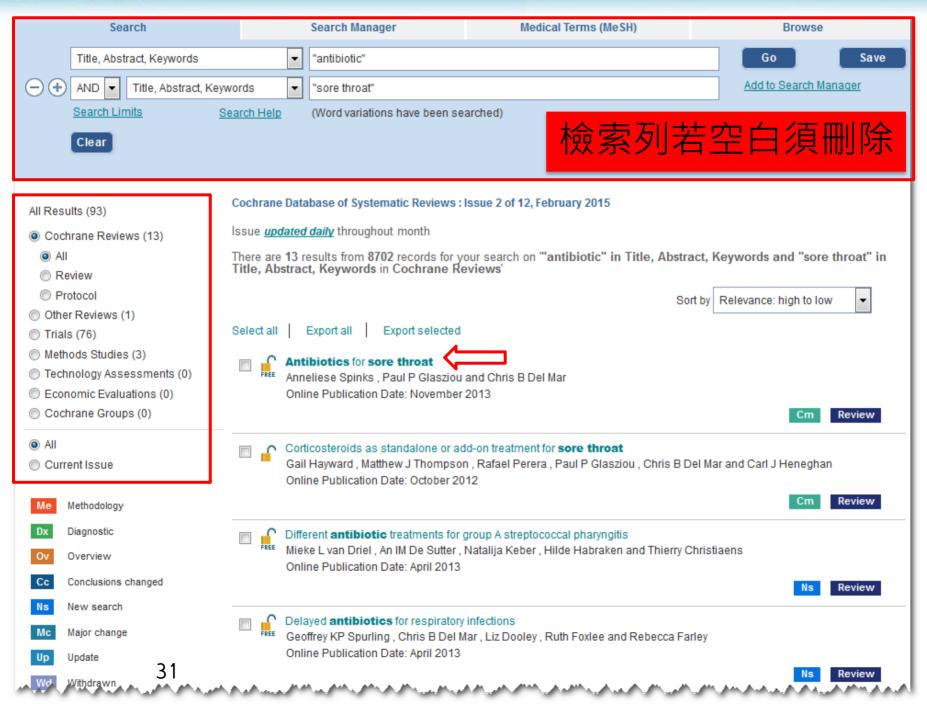
Can antibiotics help in alleviating the symptoms of sore throat?

檢索策略:

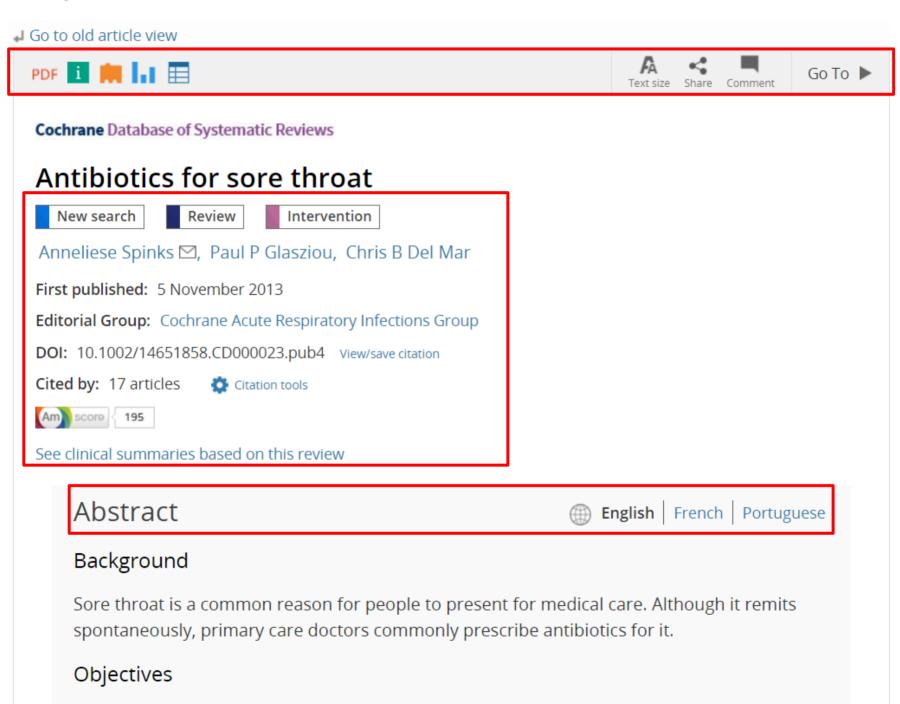
(antibiotics):ti,ab,kw and (sore throat):ti,ab,kw

the cochrane library

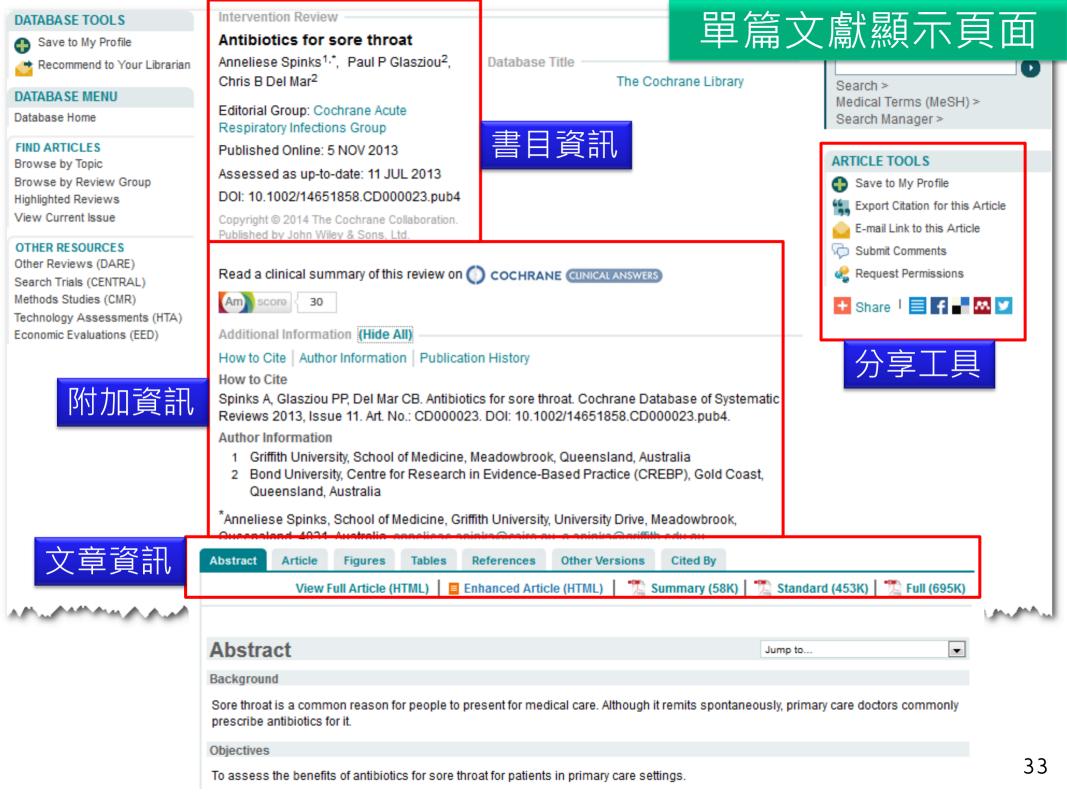
檢索結果顯示頁面







To assess the benefits of antibiotics for sore throat for patients in primary care settings.





情境分析一

情境:

一位22歲身高修長之女大學生,因為突發性胸痛至急診,您發現在胸部X-ray顯示在肺部右側有明顯的氣胸,初步估計大約佔右側肺部約40%的體積,您認為此時應該要使用引流管來治療氣胸,但是病人與家屬認為是否可以先觀察後,若情況不佳時再決定是否放置引流管,他們也同時問到現在醫療技術中是否可使用較小的引流管而不需傳統胸管來做治療。請問您就醫療實證醫學予與治療評估模式(包括cure rate、successful rate、odds ratio with 95% confidence interval、或其他的prognostic factors)等依據,來比較不同治療方法上的優劣,並針對此病人做適當治療上之建議。

取自北榮實證醫學小組 林小伶護理督導長 案例





情境分析一



情境:

一位22歲身高修長之女大學生,因為突發性胸痛至急診,您發現在胸部X-ray顯示在肺部右側有明顯的氣胸,初步估計大約佔右側肺部約40%的體積,您認為此時應該要使用引流管來治療氣胸,但是病人與家屬認為是否可以先觀察後,若情況不佳時再決定是否放置引流管,他們也同時問到現在醫療技術中是否可使用較小的引流管而不需傳統胸管來做治療。請問您就醫療實證醫學予與治療評估模式(包括cure rate、successful rate、odds ratio with 95% confidence interval、或其他的prognostic factors)等依據,來比較不同治療方法上的優劣,並針對此病人做適當治療上之建議。

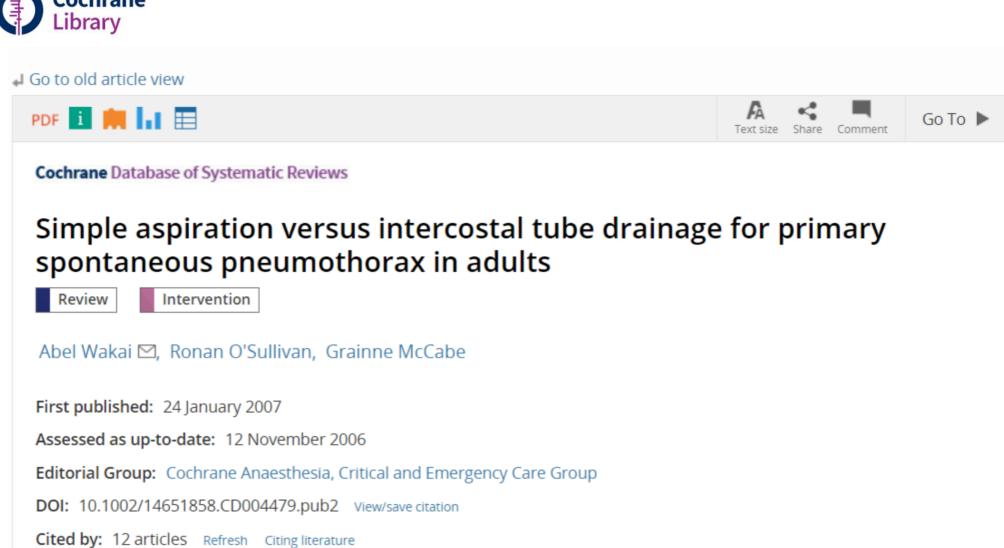
取自北榮實證醫學小組 林小伶護理督導長 案例



P.I.C.O.

Type of Q	Treatment				
Р	成人氣胸	spontaneous pneumothorax			
I	引流管	needle aspiration			
С	傳統胸管	tube thoracostomy			
Ο	增加治療成功率復發	successful & recurrence rate			







Am score 3

母嬰親善醫療院所均會鼓勵母乳哺餵,但是常 發現多數的哺乳婦女在哺乳初期都會經歷乳 頭破皮及疼痛的困境。乳頭疼痛會合併有傷 口、皸裂、出血、水腫、泛紅、水皰或結痂 ,也會導致母乳哺餵中斷,影響產後母乳哺 育率。治療乳頭疼痛方法有很多,因此讓醫 護人員思考,在眾多治療乳頭破皮及疼痛的 方法中,何種治療最合滴?最符合經濟效益

母嬰親善醫療院所均會鼓勵母乳哺餵,但是常 發現多數的哺乳婦女在哺乳初期都會經歷乳 頭破皮及疼痛的困境。乳頭疼痛會合併有傷 □、皸裂、出血、水腫、泛紅、水皰或結痂 ,也會導致母乳哺餵中斷,影響產後母乳哺 育率。治療乳頭疼痛方法有很多,因此讓醫 護人員思考,在眾多治療乳頭破皮及疼痛的 方法中,何種治療最合滴?最符合經濟效益 ?(97期護訊)

Participants/ Problems	哺乳婦女		
Interventions	使用乳汁		
Comparisons	使用羊毛脂		
Outcomes	乳頭破皮及疼痛		

Participants/Problems	哺乳婦女 breastfeeding, breast milk, lactation, lactate*
Interventions	使用乳汁 expressed milk, expressed mothers milk, breast milk, human milk
Comparisons	使用羊毛脂 lanolin, butter, oil, cream, ointment
Outcomes	乳頭破皮及疼痛 sore nipple, nipple crack, nipple lesion, nipple pain, nipple trauma

接受經腹部陽胃手術(open gastrointestinal surgery)之病人,因為手術關係,導致陽胃道蠕動等功能暫時性停止或減弱,一般醫療處置會讓病人禁食或合併置入鼻胃管引流腸胃液體,直到病人排氣,以避免腹脹及達到腸胃道組織修復,而臨床醫師也多以病人排氣視為腸胃功能恢復的具體徵象。因此病人常會詢問什麼時候鼻胃管可以拔除?什麼時候我才會放屁,才可以吃東西?所以如何讓病人盡早拔除管路,減輕引起不適及正常進食,對於病人的訴求,臨床護理師希望藉由實證的過程來瞭解是否有方便、有效的、不傷害、符合經濟效益的方法以促進腸胃道手術後病人儘早排氣?(99期護訊)

接受經<mark>腹部陽胃手術(open gastrointestinal surgery</mark>)之病人,因為手術關係,導致陽胃道蠕動等功能暫時性停止或減弱,一般醫療處置會讓病人禁食或合併置入鼻胃管引流腸胃液體,直到病人排氣,以避免腹脹及達到腸胃道組織修復,而臨床醫師也多以病人排氣視為腸胃功能恢復的具體徵象。因此病人常會詢問什麼時候鼻胃管可以拔除?什麼時候我才會放屁,才可以吃東西?所以如何讓病人盡早拔除管路,減輕引起不適及正常進食,對於病人的訴求,臨床護理師希望藉由實證的過程來瞭解是否有方便、有效的、不傷害、符合經濟效益的方法以促進腸胃道手術後病人儘早排氣?(99期護訊)

Participants/ Problems	腸胃道手術後病人
Interventions	嚼口香糖
Comparisons	禁食,原來照護方式
Outcomes	第一次排氣時間/腸阻塞

Participants/ Problems	陽 周道手術後病人 Gastrectomy or Gastrectomies or Procedure, Digestive System Surgical		
Interventions	嚼口香糖 Chewing Gums or Gum, Chewing or Gums, Chewing or Chewing-gum, Chewing Gum		
Comparisons	禁食,原來照護方式 Fasting		
Outcomes	第一次排氣時間/腸阻塞 Flatus or Fart, Flatulence/ ileus or Intestinal Obstructions or Obstruction, Intestinal Obstruction		

多數住院患者在住院期間內,會接受透過靜脈 導管注射的輸液或藥物治療,通常例行每3至4 天更換一次,以預防對靜脈的刺激或血液感染 ,但此例行程序可能造成患者的不適目相當昂 貴,亦為醫療照護人員工作負擔與壓力的來源 ,因此醫院希望重新評估依臨床狀況移除周邊 靜脈導管與常規移除並重新置入靜脈導管之局 部感染和導管阳塞比率是否有顯著差異。

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Participants/ Problems	住院病人
Interventions	依臨床狀況更換周邊靜脈導管
Comparisons	常規更換周邊靜脈導管(原來照護方式)
Outcomes	局部感染和導管阻塞比率



Participants/ Problems	住院病人 In-patient
Interventions	依臨床狀況更換周邊靜脈導管 Clinically-indicated replacement, Routine replacement routine
Comparisons	常規更換周邊靜脈導管(原來照護方式) replacement of peripheral venous catheters , routine removal of peripheral IV catheters
Outcomes	局部感染和導管阻塞比率 Difference in peripheral catheter-related complications / phlebitis rates



情境

四十五歲男性,事業有成,父親過去因急性心肌梗塞猝死,因此一直注重養生不抽菸。定期接受健康檢查:沒有高血壓、糖尿病或高血脂。最近哥哥突然又發生急性心肌梗塞接受緊急心導管治療救回來。這些親人狀況令他非常焦慮,在安排例行健康檢查時,問了一連串的問題:有沒有什麼檢查可以讓他及早預防類似狀況?聽說深海魚油可以預防心血管疾病,真的嗎?聽說降血脂藥也可以預防心血管疾病,但又聽說吃降血脂藥會增加糖尿病的風險及造成腎臟病,真的嗎?那平常多吃些通血管的藥有沒有幫忙????

取自北榮實證醫學中心何主任案例



情境分析

四十五歲男性,事業有成,父親過去因急性心肌梗塞猝死,因此一直注重養生不抽菸。定期接受健康檢查:沒有**高血壓、糖尿病或高 血脂**。最近哥哥突然又發生急性心肌梗塞接受緊急心導管治療救回來。這些親人狀況令他非常<u>焦慮</u>,在安排例行健康檢查時,問了一連串的問題:有沒有什麼檢查可以讓他及早預防類似狀況?聽說深海魚油可以預防心血管疾病,真的嗎?聽說降血脂藥也可以預防心血管疾病,但又聽說吃降血脂藥會增加糖尿病的風險及造成<mark>腎臟病</mark>真的嗎?那平常多吃些**通血管的藥**有沒有幫忙????

取自北榮實證醫學中心何主任案例



情境分析、形成問題

形成問題:

- •四十五歲男性,急性心肌梗塞家族史(+),不抽菸、沒有 高血壓、糖尿病或高血脂、糖尿病或高血脂。焦慮(A型個性) [高/中/低心血管疾病風險族群?]。
- •[什麼]檢查可以及早預防類似狀況?篩檢或確診?
- •深海魚油可預防心血管疾病?fish oil或特別成分
- <u>降血脂藥</u>可預防心血管疾病,但會增加糖尿病及造成腎臟病? stain, niacin or fibrate; Therapy vs harm
- 通血管的藥有沒有幫忙? aspirin, 銀杏(Ginkgo), plavix

取自北榮實證醫學中心何主任案例



P.I.C.O.

P	45歲男性,急性心肌梗塞家族史(+),A型個性[中度心血管疾病風險族群]				
Type of Q	Diagnostic	Therapy	Interventions		
I	MDCT	深海魚油	Statin	Aspirin	
С	ETT	-/ healthy life style	-/ healthy life style	-/ healthy life style	
Ο	Survey for CAD (high sensitivity)	Decrease risk of CVD	Decrease risk of CVD	Decrease risk of CVD	

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Omega 3 fatty acids for prevention and treat cardiovascular disease



Review

Intervention

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yn D Summerbell, Helen Moore, Helen V Worthington,

ey Smith, Rudolph Riemersma, Shah Ebrahim

First published: 18 October 2004 Full publication history

Assessed as up-to-date: 31 July 2004 Editorial Group: Cochrane Heart Group DOI: 10.1002/14651858.CD003177.pub2

Cited by: 36 articles Citing literature



Abstract









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v

背景

歐米加3脂肪酸用於預防及治療心血管疾病

目前認為來自多油的魚類和植物的歐米加3(W3, n圆3或歐米加-3)脂類對健康有益。

目標

以隨機分配試驗及世代研究來評估飲食中或補充的

目前已有3500多篇中文摘要正式上線

搜尋策略

搜尋包含CENTRAL、MEDLINE和EMBASE在内的五個資料庫,時間到2002年2月。沒有施行語言的限制。參考文獻也進行查核並聯絡作者。

選擇標準

對歐米加3的攝取或建議進行隨機分派且除去干擾因素之隨機分配試驗,試驗期間至少6個月。需追蹤至少6個月的世代研究才涵刮在內,並進行歐米加3攝取量的預估。

資料收集與分析

對試驗進行加入及資料擷取的評估,試驗品質則獨立地評估兩次。分別對隨機分配試驗及世代研究的資料進行統合分析。

主要結論

共涵括48個隨機分配試驗(36,913個參加者)和41個世代分析。試驗的集合結果並無法顯示額外攝取歐米加3脂類者可減少總死亡率或合併的心血管事件之風險(具有顯著的統計上異質性)。敏感性分析僅涵刮那些偏差風險低的試驗,可減少異質性但仍舊暗示歐米加3脂類沒有顯著效果。將分析的範圍侷限於魚類來的歐米加3脂類或短鏈歐米加3脂類量較高的試驗仍無法顯示這兩者對死亡率或心血管事件有顯著影響。飲食建議或額外補充、心血管疾病的基準風險或歐米加3脂類劑量的次族群分析顯示這些因素對主要終點沒有明確的影響。歐米加3脂類攝取量高者的隨機分配試驗或世代研究都沒有顯示會增加癌症的相對風險,但因為劑量的估計並不準確,所以無法排除對臨床有軍要影響。

作者結論

目前並不清楚飲食中或額外補充歐米加3脂類對於已患有或罹患心血管疾病風險高者或一般人口是否可以降低總死亡率、合併的心血管事件或癌症的風險。目前沒有證據顯示吾人應建議民眾停止攝取富含歐米加3脂類來源的物質,但需要更進一步的高品質試驗來確定歐米加3脂類對心血管健康有保護性效果。目前沒有明確證據顯示不同來源(魚類或植物)、不同補充方式(飲食中或額外補充)、不同劑量或是否有安慰劑做比較對於歐米加3脂類的效果有影響。

翻譯人

本摘要由臺北榮民總醫院陳國維翻譯。

此翻譯計畫由臺灣國家衛生研究院(National Health Research Institutes, Taiwan)統籌。

總結

目前沒有足夠的證據可以支持民眾應該停止攝取富含歐米加3脂類來源的物質,但需要進一步高品質的試驗來確認原先認為對心血管疾病風險較





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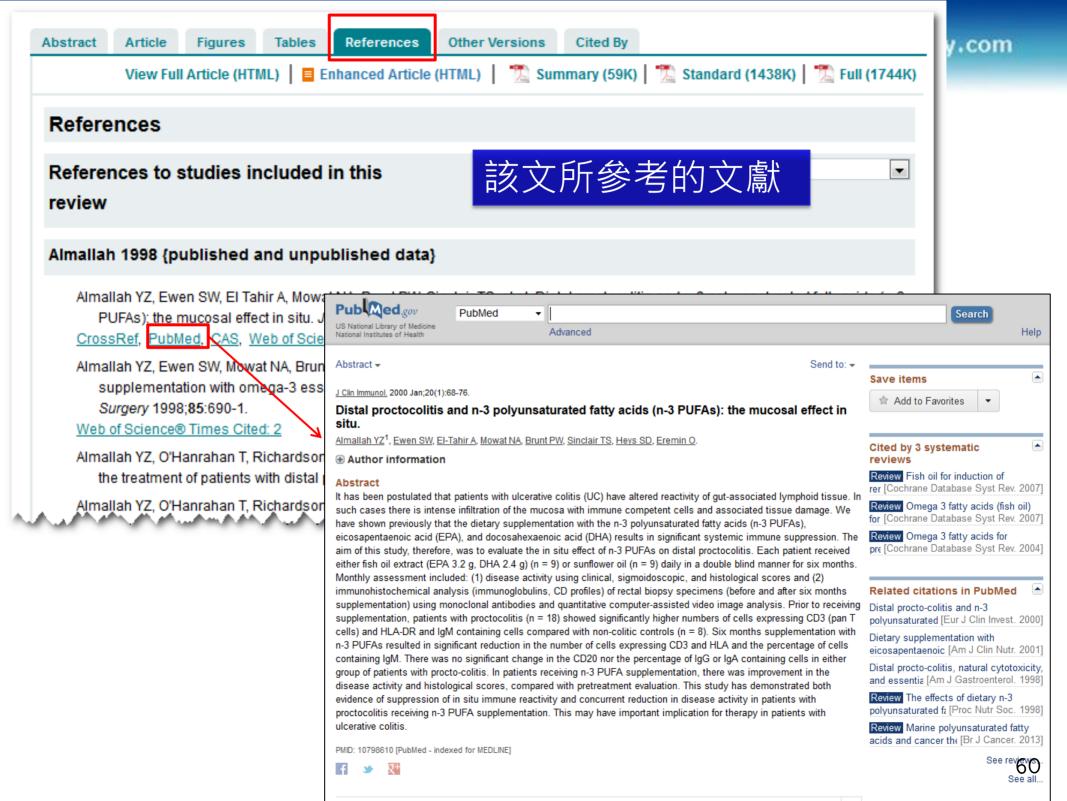
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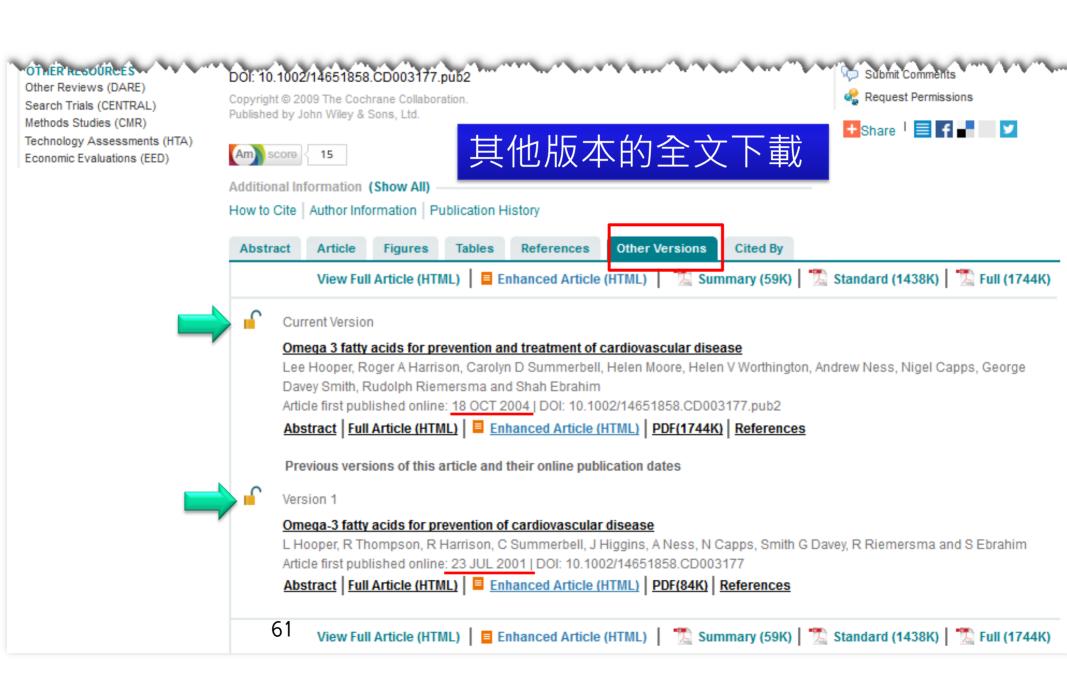


Since the suggestion by Bang (Bang 1972; Bang 1976), that the abundance of omega 3 fatty acids in the diet of the Greenland Eskimos was responsible for their low mortality from ischaemic heart disease, there has been considerable interest in the protective role and possible mechanism of action of marine unsaturated fats. This interest has spread to encompass plant oils rich in omega 3 fatty acids, including flax (linseed) and rapeseed (canola) oils (Nettleton 1991), their derivatives (e.g. margarines) and purslane leaves (Simopoulos 1992). Omega 3 fats (also called Ω3 or n-3 fats) from fish sources include eicosapentaenoic acid (EPA or 20:5), docosahexaenoic acid (DHA, 22:6) and docosapentaenoic acid (DPA, 22:5), and are the longer chain omega 3 fats.

Alpha-linolenic acid (ALA or α-linolenic, 18:3) is the shorter chain omega 3 fat from plants (also found in grass fed meats), which is partially converted to longer chain omega 3 fatty acids within our bodies. There is some debate about the effectiveness of this conversion, which may differ depending on other dietary factors (Li 1999; Pawlosky 2001) and whether assessed over short or long term. For this reason the 59 effectiveness of ALA may differ from that of the longer chain omega 3 fats









This article has been cited by:

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 - Abstract | Fun Article (HTML) | PDF(356K) | References

MeSH search

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檢索問題

用詞不一致

 同樣指癌症,有人使用「cancer」,有人使用「 tumor」,需把相同概念的各式同義詞及狹義詞 完整蒐集,查找文獻才不會遺漏。

需過濾不相關文獻

 輸入的關鍵字可能只與文章某處有關聯,但並非 文章重點,需花大量時間過濾「出現這個字但實 際上並不相關」的文章。



MeSH Search

醫學主題詞表 (Medical Subject Headings;簡稱MeSH)

- 美國國家醫學圖書館 (National Library of Medicine) 出版
- 分析生物醫學方面之期刊文獻等資源的主題內容之 控制語彙表
 - NLM出版之MEDLINE/PubMed資料庫主題檢索的索引典。





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- 可以協助找出精確符合主題的資料
 - 無須煩惱因縮寫、別名而遺漏相關文獻
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- 使用MeSH Tree
 - 可以依需求擴展或縮小查詢範圍
 - 了解各醫學標題的橫向與縱向關聯
 - MeSH Tree可顯示標題間分類的層級關係。最上層顯示者,表示該標題詞所代表的主題意涵較廣(generic),而愈下層顯示者,則表示所代表的主題意涵愈為特異(specific)。



Synonyms: Heart Failures, Systolic: Systolic

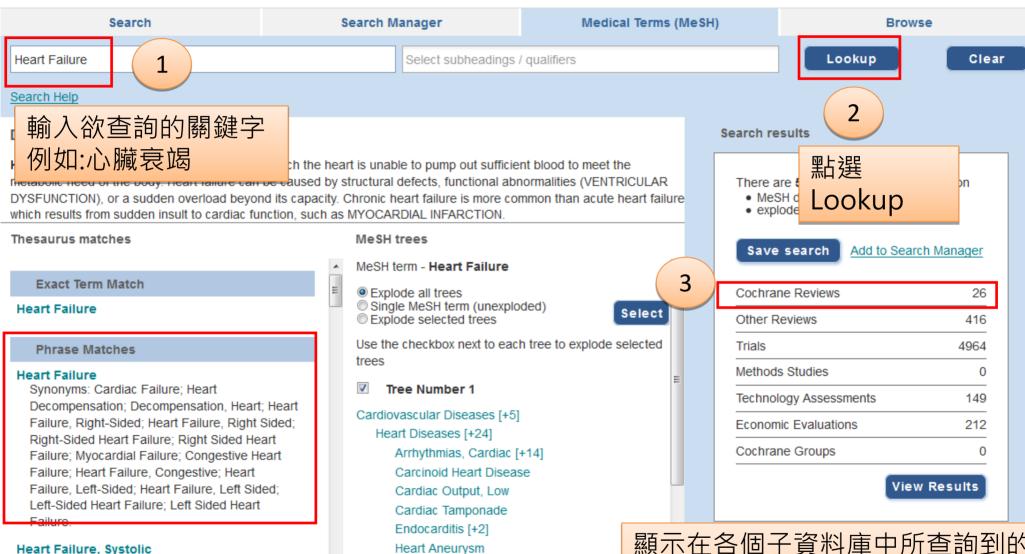
Synonyms: Diastolic Heart Failures: Heart

Failures, Diastolic; Diastolic Heart Failure.

Heart Failures; Systolic Heart Failure.

Heart Failure, Diastolic

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Heart Defects, Congenital [+26]

Dyspnea Paroxysmal

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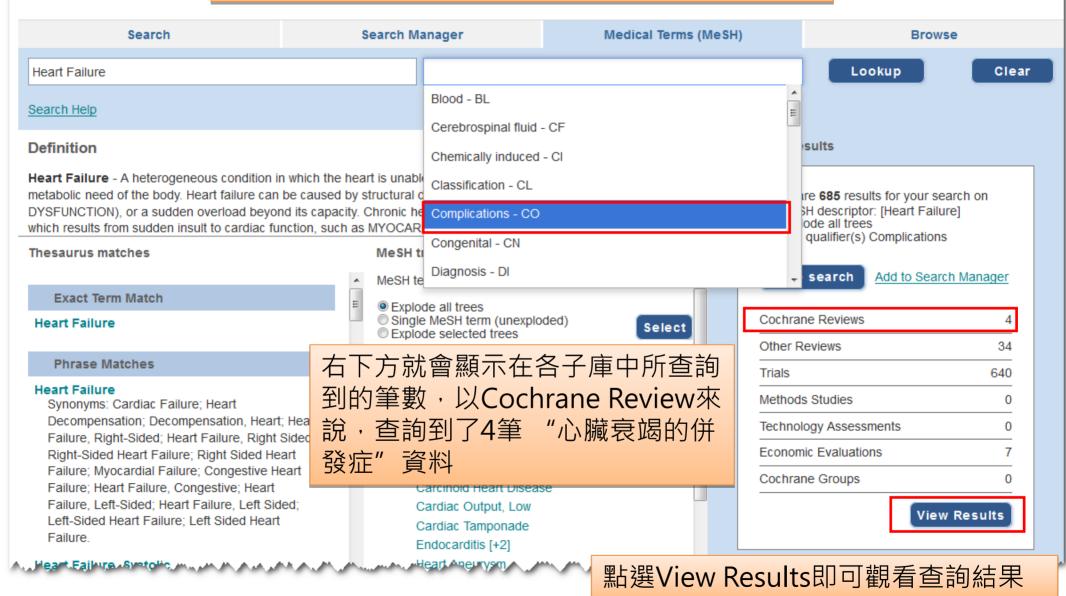






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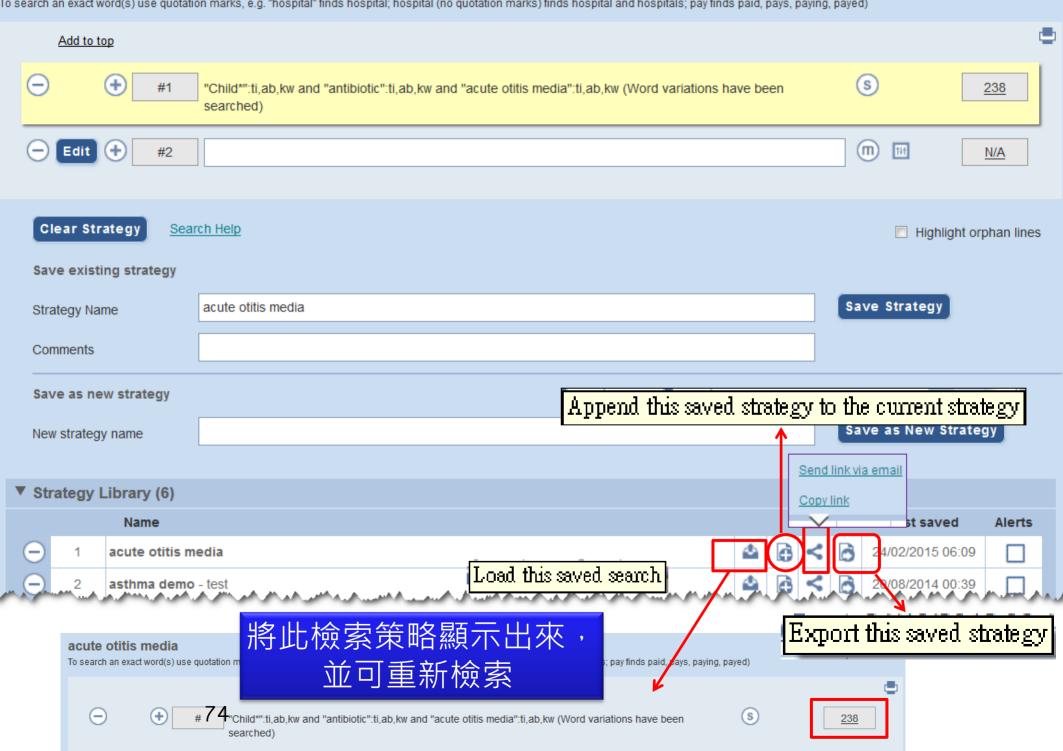
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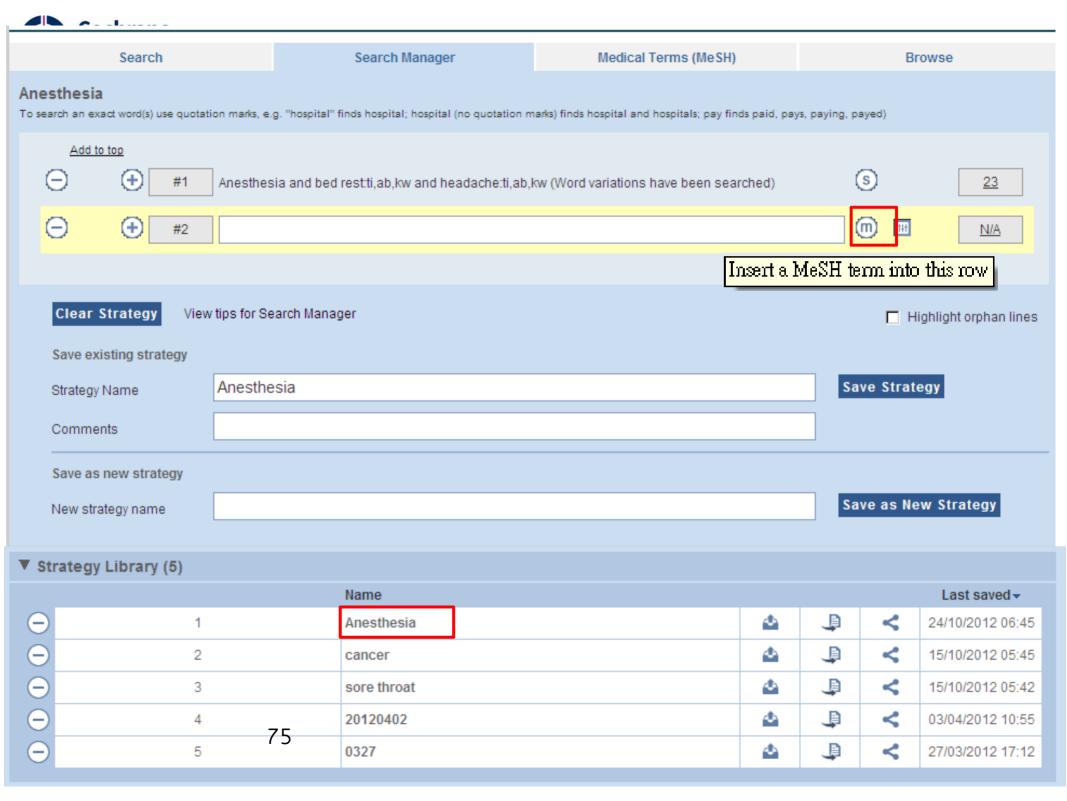


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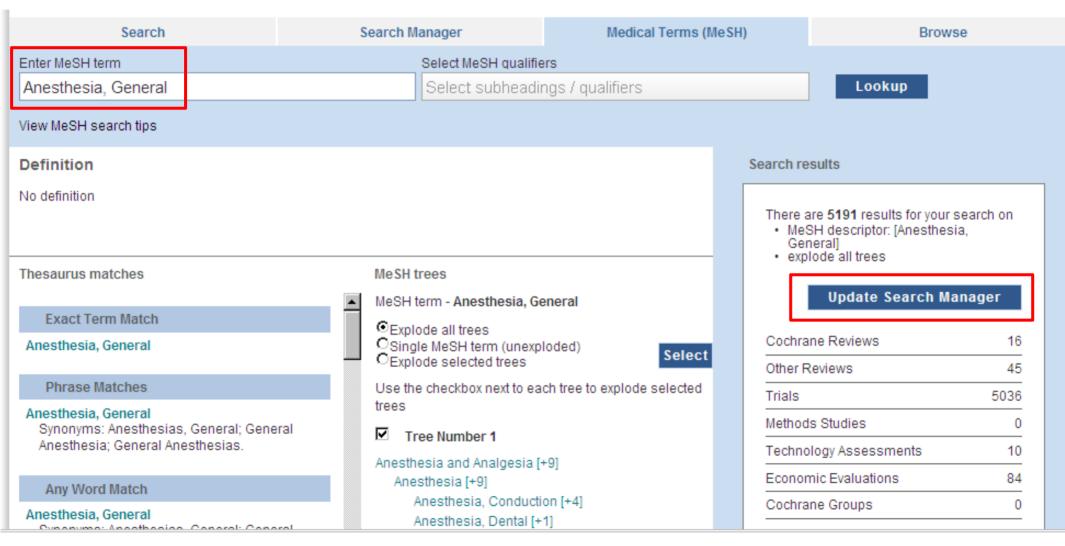
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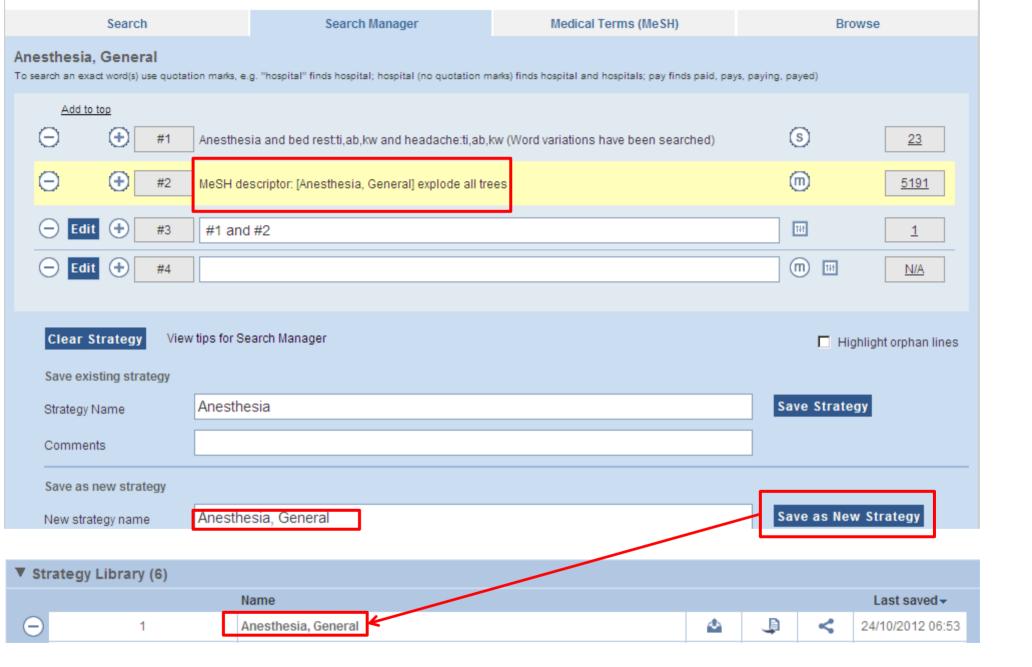
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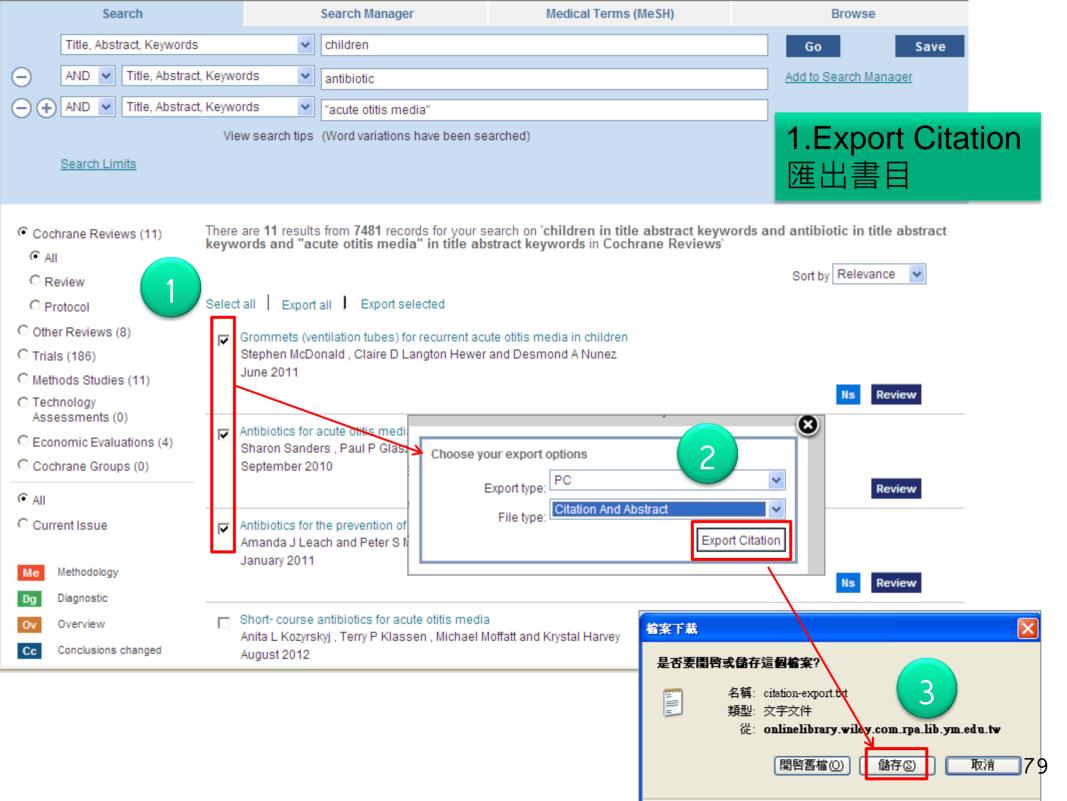


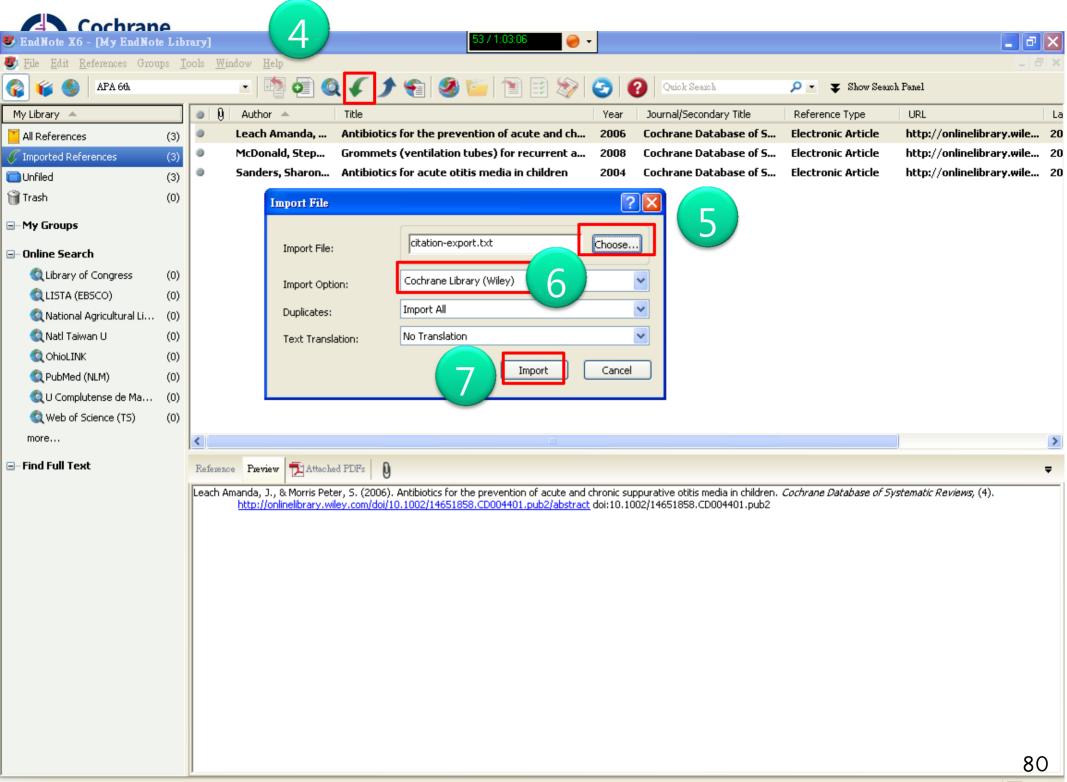


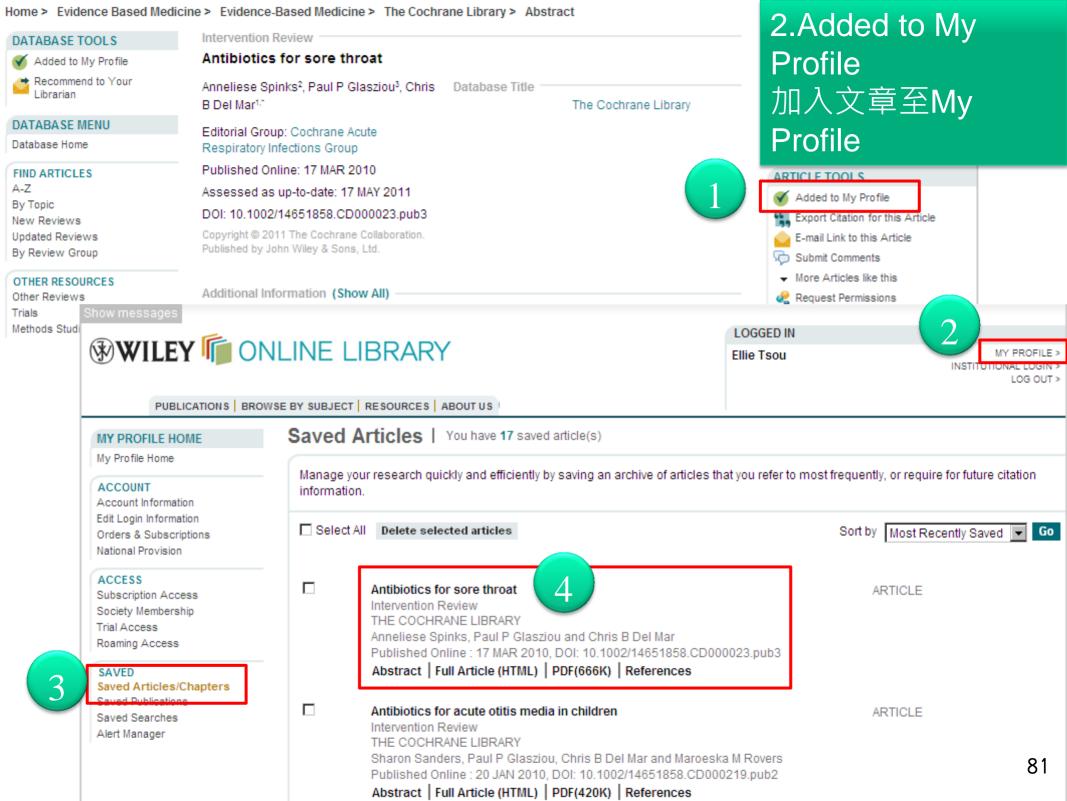




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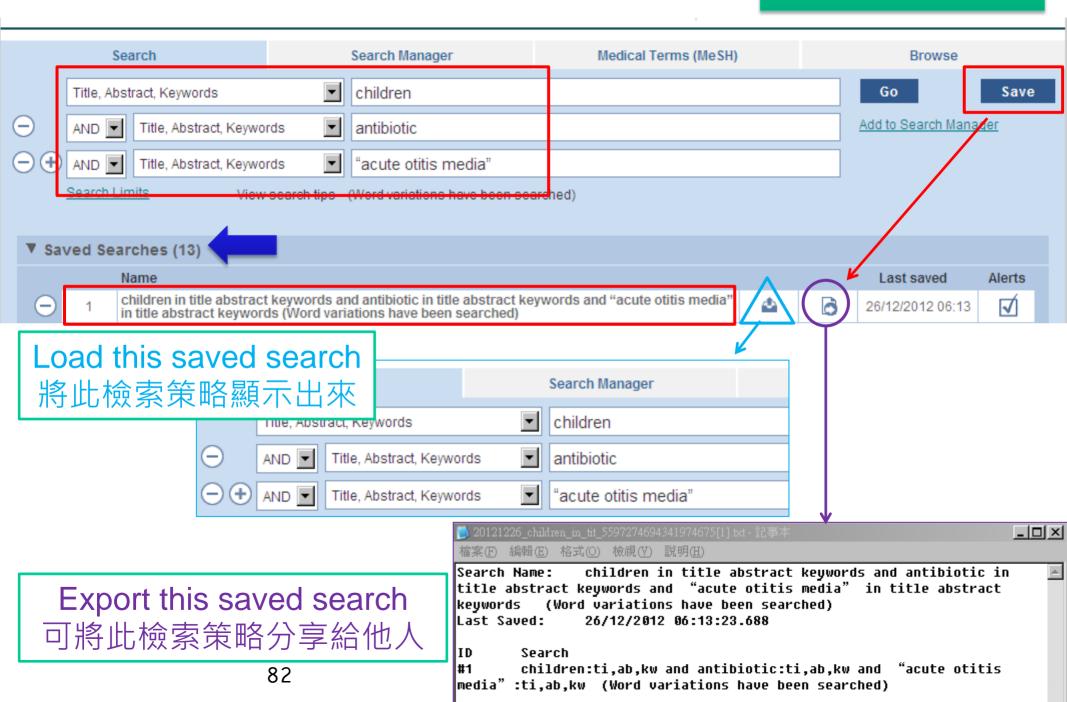






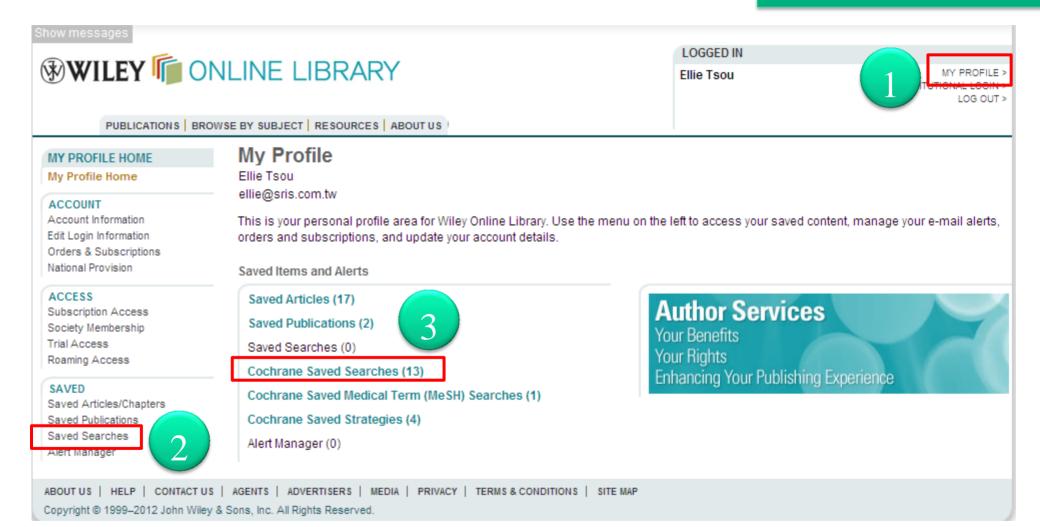


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Me Methodology			
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Cc Conclusions changed Ns New search	Original Author(s): Gulani A , Sachdev HP and Qazi SA Indian Pediatrics, 2010, 47(1), 74-87		
Mc Major change Up Update	Antibiotic therapy to prevent the development of asymptomatic middle ear effusion in children with acute otitis media: a meta-analysis of individual patient data (Structured abstract)		
Wd Withdrawn	Centre for Reviews and Dissemination Original Author(s): Koopman L , Hoes AW , Glasziou PP , Appelman CL , Burke P , McCormick DP , Damoiseaux RA , LeSaux N		
Cm Comment	and Rovers MM Archives of Otolaryngology Head and Neck Surgery, 2008, 134(2), 128-132		
	Antibiotics for acute otitis media: a meta- analysis with individual patient data (Structured abstract) Centre for Reviews and Dissemination Original Author(s): Rovers M M, Glasziou P, Appelman C L, Burke P, McCormick D P, Damoiseaux R A, Gaboury I, Little P		



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Evidence assessment of management of acute otitis media - I. The role of antibiotics in treatment of uncomplicated acute otitis media (Structured abstract)

- · Authors' objectives
- Searching
- Study selection: study designs
- Study selection: specific interventions
- Study selection: participants
- Study selection: outcomes
- Study selection: how were decisions on the relevance of primary studies made?
- · Validity assessment

Evidence assessment of management of acute otitis media - I. The role of antibiotics in treatment of uncomplicated acute otitis media (Structured abstract)

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Original article: Takata G S, Chan L S, Shekelle P, Morton S C, Mason W, Marcy S M. Evidence assessment of management of acute otitis media - I. The role of antibiotics in treatment of uncomplicated acute otitis media. *Pediatrics*. 2001; 108(2):239-247. Links

Authors' objectives

To synthesise the literature on the natural history of acute otitis media (AOM), the effectiveness of antibiotic treatment in uncomplicated AOM, and the relative effectiveness of specific antibiotic regimens.

Searching

The following sources were searched: MEDLINE from 1966 to March 1999; the Cochrane Library (to March 1999); HealthSTAR from 1975 to March 1999; International Pharmaceutical Abstracts from 1970 to March 1999; CINAHL from 1982 to March 1999; BIOSIS Previews from 1970 to March 1999; and EMBASE from 1980 to March 1999. Grey literature was identified by reviewing

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- Cc Conclusions changed
- Ns New search
- Mc Major change
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[Double-blind comparative study of tebipenem pivoxil and high-dose cefditoren pivoxil in children with acute otitis media (phase III)]

Suzuki K, Baba S, Totsuka K, Hori S, Ubukuta K, Nakashima M and Sunakawa K Japanese Journal of Chemotherapy, 2009, 57(Suppl 1), 167

[Usefulness of fenspiride in the treatment of acute otitis media in children].

Zielnik-Jurkiewicz B and Jurkiewicz D

Polski merkuriusz lekarski: organ Polskiego Towarzystwa Lekarskiego, 2005, 18(108), 624

- Outcome- oriented managed care comparing efficacies of cefaclor and amoxicillin in acute and recurrent acute otitis media Perry BP, Zieno SA, Yonkers AJ and Moore GF

 Ear Nose Throat J, 1995, 74(12), 840
- Change in nasopharyngeal carriage of Streptococcus pneumoniae resulting from antibiotic therapy for acute otitis media in children.

Cohen R, Bingen E, Varon E, de LaRocque F, Brahimi N, Levy C, Boucherat M, Langue J and Geslin P. The Pediatric infectious disease journal, 1997, 16(6), 555

Parent satisfaction OK with no treatment of otitis.

Anonymous

Journal of Family Practice, 2005, 54(9), 754

Recurrence up to 3.5 years after antibiotic treatment of acute otitis media in very young Dutch children: survey of trial participants.

Bezáková N, Damoiseaux RA, Hoes AW, Schilder AG and Rovers MM BMJ (Clinical research ed.), 2009, 338, b2525



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The Cochrane Central Register of Controlled Trials (CENTRAL) 2011 Issue 4

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Title	Outcome-oriented managed care comparing efficacies of cefaclor and amoxicillin in acute and recurrent acute otitis media Links Export Central Citation	
Author(s)	Perry B P, Zieno S A, Yonkers A J, Moore G F	
Source	Ear Nose Throat J	
Date of Publication	1995	
Volume	74	
Issue	12	
Pages	840-4	
Abstract	A study utilizing outcome-oriented cure is employed to show the effectiveness of a given medical treatment. A specific patient population is studied in order to determine the most effective treatment for a common clinical disorder. A total of 201 children were retrospectively studied to evaluate the efficacy and side effects of amoxicillin and cefaclor in the treatment of acute otitis media and recurrent acute otitis media. There were 456 episodes of acute otitis media; 245 episodes were treated with amoxicillin with an efficacy of 91%, while 211 episodes were treated with cefaclor with an efficacy of 97%. The dosage of 40 mg/kg/day, divided in three equal doses, was employed for both antibiotics in the treatment of acute otitis media, while half of this amount was given once daily for the chemoprophylaxis of recurrent acute otitis media. In the 87 courses of chemoprophylaxis with cefaclor for recurrent otitis media, the efficacy was found to be 53%; while amoxicillin was found to be effective in 30% of the 33 patients studied. There were fewer side effects noted in the cefaclor group than in the amoxicillin group (4% vs. 12%). Both drugs caused diarrhea, while cefaclor also caused a mild maculopapular rash in two patients (1.67%). While amoxicillin remains the drug of choice for acute otitis media (AOM), this study suggests that cefaclor may be a better selection in the chemoprophylaxis of recurrent acute otitis media.	
Review Group keywords	Acute Disease; Adolescence; Amoxicillin; Administration & Dosage; Adverse Effects; *Therapeutic Use; Antibiotics; Administration & Dosage; Adverse Effects; *Therapeutic Use; Cefaclor; Administration & Dosage; Adverse Effects; *Therapeutic Use; Child; Child, Preschool; Comparative Study; Ear, Middle; Physiopathology; Surgery; Human; Infant; Infant, Newborn; Middle Ear Ventilation; Otitis Media; *Drug Therapy; Physiopathology; Surgery; Recurrence; Retrospective Studies	



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