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آفرینش ۲۰۲۰

سامانه غربالگری COVID-۱۹

اتوماسیون تغذیه

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Water drinking acutely improves orthostatic tolerance in healthy subjects.

Schroeder C, et al. Circulation. 2002. PMID: 12451007 Clinical Trial.

How severe are Omicron infections?

Ledford H. Nature. 2021. PMID: 34934198 No abstract available.

Activation mechanism of PINK1

## Latest Literature

New articles from highly accessed journals

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Ann Oncol (1)

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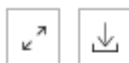
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Age-related

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Asbell PA, Dualk

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Lancet. 2005 Fe

PMID: 15708105

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hmad M, Epstein S.

09. doi: 10.1016/S0140-6736(05)17911

Review.

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**Cataract**, opacification of the lens, is one of the commonest causes of loss of u  
estimated 16 million people worldwide affected. Several risk factors have been identified in addition to  
increasing age--genetic composition, exposure to ultraviolet light ...



The global state of **cataract** blindness.

2

Lee CM, Afshari NA.

Cite

Curr Opin Ophthalmol. 2017 Jan;28(1):98-103. doi: 10.1097/ICU.0000000000000340.

PMID: 27820750

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The present article reviews the literature and describes the current extent of **cataracts** globally, barriers  
to treatment and recommendations for improving the treatment of **cataracts** ...Recent studies have



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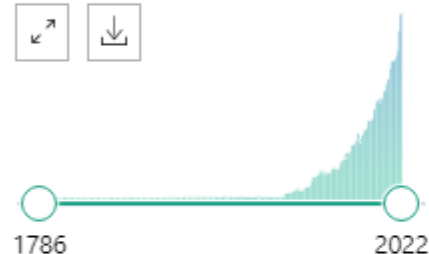
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- ☐ Associated data

ARTICLE TYPE

☐ Age-related **cataract**.


1 Asbell PA, Dualan I, Mindel J, Brocks D, Ahmad M, Epstein S.

Cite Lancet. 2005 Feb 12-18;365(9459):599-609. doi: 10.1016/S0140-6736(05)17911-2.

PMID: 15708105 Review.

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**Cataract**, opacification of the lens, is one of the commonest causes of loss of useful vision, with an estimated 16 million people worldwide affected. Several risk factors have been identified in addition to increasing age--genetic composition, exposure to ultraviolet light ...

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2 Lee CM, Afshari NA.

Cite Curr Opin Ophthalmol. 2017 Jan;28(1):98-103. doi: 10.1097/ICU.0000000000000340.

PMID: 27820750 Review.

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The present article reviews the literature and describes the current extent of **cataracts** globally, barriers to treatment, and recommendations for improving the treatment of **cataracts**. ...Recent studies have largely found higher rates of **cataracts** in women tha ...

☐ The mechanisms of **cataract** formation.



☐ Associated data

Page 1

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- ☐ Books and Documents
- ☐ Clinical Trial
- ☐ Meta-Analysis
- ☐ Randomized Controlled Trial
- ☐ Review
- ☐ Systematic Review

#### PUBLICATION DATE

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#### ☐ The mechanisms of **cataract** formation.

3 Schmitt C, Hockwin O.

Cite J Inherit Metab Dis. 1990;13(4):501-8. doi: 10.1007/BF01799507.

PMID: 2122116 Review.

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This review summarizes current knowledge concerning **cataract** formation. Metabolically induced forms of **cataract** are discussed, but mainly aspects of **cataract** formation in older patients are described, especially with respect to lens protein modifications and ...

#### ☐ Congenital and infantile **cataract**: aetiology and management.

4 Chan WH, Biswas S, Ashworth JL, Lloyd IC.

Cite Eur J Pediatr. 2012 Apr;171(4):625-30. doi: 10.1007/s00431-012-1700-1. Epub 2012 Mar 1.

PMID: 22383071 Review.

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Congenital **cataract** is the commonest worldwide cause of lifelong visual loss in children. ...However, visual outcome is largely dependent on the timing of surgery when dense **cataracts** are present. Good outcomes have been reported in children undergoing surgery before ...

#### ☐ **Cataracts.**

5 Thompson J, Lakhani N.

Cite Prim Care. 2015 Sep;42(3):409-23. doi: 10.1016/j.pop.2015.05.012.

PMID: 26319346 Review.

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Although aging is the most common cause, other factors are also known to be associated with **cataract** formation. Although **cataracts** are the domain of ophthalmology, primary care physicians are frequently the ones to whom patients present with vision complaints. Knowl ...

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## Age-related cataract

Penny A Asbell , Ivo Dualan, Joel Mindel, Dan Brocks, Mehdi Ahmad, Seth Epstein

Affiliations + expand

PMID: 15708105 DOI: 10.1016/S0140-6736(05)17911-2

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### Abstract

Cataract, opacification of the lens, is one of the commonest causes of loss of useful vision, with an estimated 16 million people worldwide affected. Several risk factors have been identified in addition to increasing age--genetic composition, exposure to ultraviolet light, and diabetes. However, no method to halt the formation of a cataractous lens has been shown to be effective. Nevertheless, advances in surgical removal of cataracts, including small-incision surgery, use of viscoelastics, and the development of intraocular lenses, have made treatment very effective and visual recovery rapid in most cases. Despite these advances, cataract continues to be a leading public-health issue that will grow in importance as the population increases and life expectancy is extended worldwide.

### Comment in

[Cataract treatment where resources are scarce.](#)

Vasavada AR, Raj SM.

Lancet. 2005 Feb 12-18;365(9459):550-1. doi: 10.1016/S0140-6736(05)17921-5.

PMID: 15708082 No abstract available.

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Ther Umsch. 2009 Mar;66(3):167-71. doi: 10.1024/0040-5930.66.3.167.

PMID: 19266463    Review.    German.

[Clear corneal cataract surgery.](#)

Fine IH, Hoffman RS.

Ophthalmic Surg Lasers. 1998 Oct;29(10):822-31.

PMID: 9793948    Review.    No abstract available.

[Clinical outcomes and patient satisfaction after Visian Implantable Collamer Lens removal and phacoemulsification with intraocular lens implantation in eyes with induced cataract.](#)

Kamiya K, Shimizu K, Igarashi A, Aizawa D, Ikeda T.

Eye (Lond). 2010 Feb;24(2):304-9. doi: 10.1038/eye.2009.87. Epub 2009 Apr 24.

PMID: 19390560

[Posterior vertical capsulotomy with optic entrapment of the intraocular lens in congenital cataracts--prevention of capsule opacification.](#)

Grieshaber MC, Pienaar A, Stegmann R.

J Cataract Refract Surg. 2005 May;31(5):886-94. doi: 10.1016/j.jcrs.2004.08.055.

PMID: 15975452

[\[Relative factors of retinal detachment after phacoemulsification cataract extraction and intraocular lens implantation\].](#)

Miao PJ, Li WS, Zheng JW, Wu RH, Xu M.

Zhonghua Yi Xue Za Zhi. 2009 Sep 22;89(35):2462-7.

PMID: 20137431    Chinese.

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Fernandes AG, Berezovsky A, Watanabe SES, Mitsuhiro MRKH, Cypel MC, Ferraz NN, Furtado JM, Sacai PY, Muñoz S, Cunha CC, Vasconcelos GC, Morales PHA, Cohen MJ, Cohen JM, Campos M, Belfort R Jr, Salomão SR. Sci Rep. 2021 Dec 9;11(1):23710. doi: 10.1038/s41598-021-03172-4. PMID: 34887482 [Free PMC article.](#)

### Safety Profile of Ibrutinib: An Analysis of the WHO Pharmacovigilance Database.

Allouchery M, Tomowiak C, Lombard T, Pérault-Pochat MC, Salvo F. Front Pharmacol. 2021 Oct 28;12:769315. doi: 10.3389/fphar.2021.769315. eCollection 2021. PMID: 34776981 [Free PMC article.](#)

### RNA-Seq analysis in giant pandas reveals the differential expression of multiple genes involved in cataract formation.

You Y, Bai C, Liu X, Lu Y, Jia T, Xia M, Yin Y, Wang W, Chen Y, Zhang C, Liu Y, Wang L, Pu T, Ma T, Liu Y, Zhou J, Niu L, Xu S, Ni Y, Hu X, Zhang Z. BMC Genom Data. 2021 Oct 27;22(1):44. doi: 10.1186/s12863-021-00996-x. PMID: 34706646 [Free PMC article.](#)

### A comparison of clinical outcomes and optical performance between monofocal and new monofocal with enhanced intermediate function intraocular lenses: a case-control study.

Huh J, Eom Y, Yang SK, Choi Y, Kim HM, Song JS. BMC Ophthalmol. 2021 Oct 16;21(1):365. doi: 10.1186/s12886-021-02124-w. PMID: 34656091 [Free PMC article.](#)

### Knockdown of lncRNA TUG1 protects lens epithelial cells from oxidative stress-induced injury by regulating miR-196a-5p expression in age-related cataracts.

Shen Q, Zhou T. Exp Ther Med. 2021 Nov;22(5):1286. doi: 10.3892/etm.2021.10721. Epub 2021 Sep 13. PMID: 34630641 [Free PMC article.](#)

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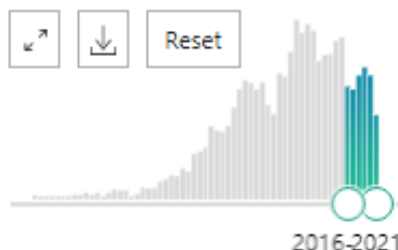
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Long-term Effect of Intraocular Lens vs Contact Lens Correction on Visual Acuity After **Cataract** Surgery During Infancy: A Randomized Clinical Trial.

1

Cite Lambert SR, Cotsonis G, DuBois L, Nizam Ms A, Kruger SJ, Hartmann EE, Weakley DR Jr, Drews-Botsch C; Infant Aphakia Treatment Study Group.

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JAMA Ophthalmol. 2020 Apr 1;138(4):365-372. doi: 10.1001/jamaophthalmol.2020.0006.

PMID: 32077909 [Free PMC article.](#) [Clinical Trial.](#)

IMPORTANCE: Although intraocular lenses (IOLs) are often implanted in children, little is known whether primary IOL implantation or aphakia and contact lens correction results in better long-term visual outcomes after unilateral **cataract** surgery during infancy. OBJECTIVE: ...

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Femtosecond laser-assisted versus phacoemulsification **cataract** surgery (FEMCAT): a multicentre participant-masked randomised superiority and cost-effectiveness trial.

2

Cite


Schweitzer C, Brezin A, Cochener B, Monnet D, Germain C, Roseng S, Sitta R, Maillard A, Hayes N, Denis P, Pisella PJ, Benard A; FEMCAT study group.

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Lancet. 2020 Jan 18;395(10218):212-224. doi: 10.1016/S0140-6736(19)32481-X



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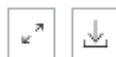
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TEXT AVAILABILITY

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ARTICLE ATTRIBUTE

☐ **Treatment of Liver Cancer.**

1 Liu CY, Chen KF, Chen PJ.

Cite Cold Spring Harb Perspect Med. 2015 Jul 17;5(9):a021535. doi: 10.1101/cshperspect.a021535.

PMID: 26187874 [Free PMC article.](#) [Review.](#)

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☐ **The Treatment of Laryngeal Cancer.**

2 Obid R, Redlich M, Tomeh C.

Cite Oral Maxillofac Surg Clin North Am. 2019 Feb;31(1):1-11. doi: 10.1016/j.coms.2018.09.001.

PMID: 30449522 [Review.](#)

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☐ **Red ginseng and cancer treatment.**

3 Wang CZ, Anderson S, DU W, He TC, Yuan CS.

Cite Chin J Nat Med. 2016 Jan;14(1):7-16. doi: 10.3724/SPJ.1009.2016.00007.

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Evolution of enhanced innate immune evasion by SARS-CoV-2.  
Thorne LG, et al. Nature. 2021. PMID: 34942634

Covid-19: Hospital admission 50-70% less likely with omicron  
than delta, but transmission a major concern.

Mahase E. BMJ. 2021. PMID: 34952835 No abstract available.

Water drinking acutely improves orthostatic tolerance in healthy

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## PubMed Overview

PubMed is a free resource supporting the search and retrieval of biomedical and life sciences literature with the aim of improving health—both globally and personally.

The PubMed database contains more than 33 million citations and abstracts of biomedical literature. It does not include full text journal articles; however, links to the full text are often present when available from other sources, such as the publisher's website or [PubMed Central \(PMC\)](#).

Available to the public online since 1996, PubMed was developed and is maintained by the [National Center for Biotechnology Information \(NCBI\)](#), at the [U.S. National Library of Medicine \(NLM\)](#), located at the [National Institutes of Health \(NIH\)](#).

## About the Content

Citations in PubMed primarily stem from the biomedicine and health fields, and related disciplines such as life sciences, behavioral sciences, chemical sciences, and bioengineering.

PubMed facilitates searching across several NLM literature resources:

### MEDLINE

MEDLINE is the largest component of PubMed and consists primarily of citations from journals selected for

### PubMed Central (PMC)

Citations for [PubMed Central \(PMC\)](#) articles make up the second largest component of PubMed.

### Bookshelf

The final component of PubMed is citations for books and some individual chapters available on [Bookshelf](#).



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## MEDLINE

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**Overview**

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[MEDLINE Home](#)

## MEDLINE: Overview

MEDLINE is the National Library of Medicine's (NLM) premier bibliographic database that contains more than 28 million references to journal articles in life sciences with a concentration on biomedicine. A distinctive feature of MEDLINE is that the records are indexed with NLM Medical Subject Headings (MeSH).

MEDLINE is the primary component of PubMed, a literature database developed and maintained by the NLM National Center for Biotechnology Information (NCBI). MEDLINE is the online counterpart to the MEDical Literature Analysis and Retrieval System (MEDLARS) that originated in 1964 (see MEDLINE history).

The majority of journals are selected for MEDLINE based on the recommendation of the Literature Selection Technical Review Committee (LSTRC), an NIH-chartered advisory committee of external experts.

*Time coverage:* MEDLINE includes literature published from 1966 to present, and selected coverage of literature prior to that period. For details about pre-1966 citations see [OLDMEDLINE Data](#).

*Source:* Currently, citations from more than 5,200 worldwide journals in about 40 languages.

*Updates:* Citations are added to PubMed 7 days a week.

*Broad subject coverage:* In line with the [Collection and Preservation Policy of the NLM](#), the subject scope of MEDLINE is biomedicine and health, broadly defined to encompass those areas of the life sciences, behavioral sciences, chemical sciences, and bioengineering needed by health professionals and others engaged in basic research and clinical

## PMC Overview

PubMed Central® (PMC) is a free full-text archive of biomedical and life sciences journal literature at the U.S. National Institutes of Health's National Library of Medicine (NIH/NLM). In keeping with NLM's legislative mandate to collect and preserve the biomedical literature, PMC serves as a digital counterpart to NLM's extensive print journal collection.

PMC was developed and is managed by NLM's National Center for Biotechnology Information (NCBI).

## About the Content

Since its inception in 2000, PMC has grown from comprising only two journals, *PNAS: Proceedings of the National Academy of Sciences* and *Molecular Biology of the Cell*, to an archive of articles from thousands of journals.

Today, PMC contains more than 7 million full-text records, spanning several centuries of biomedical and life science research (late 1700s to present). Content is added to the archive through

### Journal and Publisher Program Deposit

NLM has agreements with publishers, scholarly societies, and other content owners to deposit journal articles directly to PMC.

### Author Manuscript Deposit

NLM partners with a number of scientific research funders to accept the deposit of [author manuscripts](#) in compliance with funder policies.

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### Digitization Projects

NLM collaborates with publishers and other organizations to preserve the historical literature through scanning of journal content.

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The resulting collaborations with publishers, societies, research funders, and international organizations form the foundation of PMC. PMC is not a publisher and does not publish journal articles itself.

As of June 2020, PMC also includes preprints that report NIH-funded research results. To learn more, see [NIH Preprint Pilot](#).

For more information on content in PMC, see [Policies](#) and the [PMC Disclaimer](#).

## About the Archive

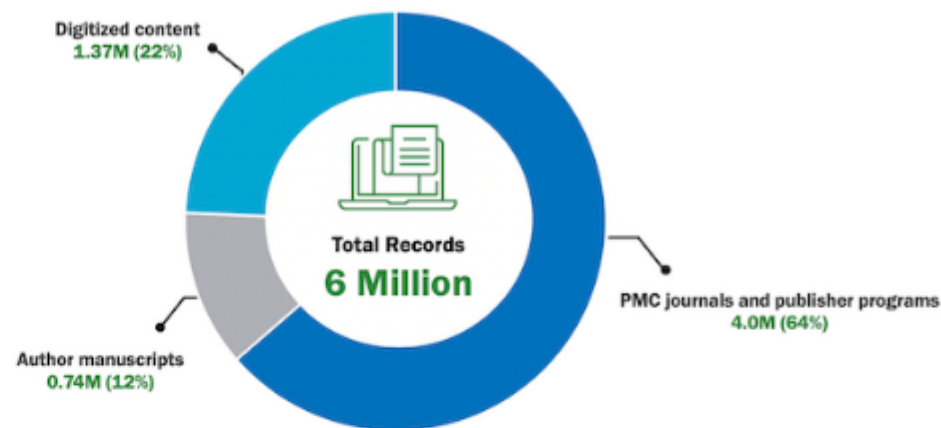
NLM's fundamental responsibility is to permanently preserve periodicals, among other materials, pertinent to medicine. (See the [NLM Preservation Policy](#) for more information.) As such, PMC is designed to provide permanent access to all of its content, even as technology evolves. To do so,



PMC makes all content free to read (in some cases, following an embargo period), as NLM believes that the best way to ensure the accessibility and viability of digital material over time is through consistent and active use of the archive. However, free access does not mean that there is no copyright protection (see the [PMC Copyright Notice](#)).



PMC stores content in eXtensible Markup Language (XML), which represents the structure and meaning of a document in a relatively simple and human-readable form. All PMC content is converted to and stored in the [NISO Z39.96-2015 JATS XML](#) format. This standard format is the most effective and widely used archival format for journal articles.



Source: PMC, March 2020



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## Trending Articles

PubMed records with recent increases in activity

Evolution of enhanced innate immune evasion by SARS-CoV-2.  
Thorne LG, et al. Nature. 2021. PMID: 34942634

Covid-19: Hospital admission 50-70% less likely with omicron  
than delta, but transmission a major concern.

Mahase E. BMJ. 2021. PMID: 34952835 No abstract available.

Water drinking acutely improves orthostatic tolerance in healthy

## Latest Literature

New articles from highly accessed journals

Am J Clin Nutr (3)

Am J Gastroenterol (1)

Am J Med (2)

Blood (3)

Clin Infect Dis (1)

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Use this tool to find PubMed citations. You may omit any field.

### Journal

Journal may consist of the full title or the title abbreviation.

### Date

Month and day are optional.

#### Year

#### Month

#### Day

### Details

#### Volume

#### Issue

#### First page

### Author

Use format lastname initials for the most comprehensive results, e.g., Ostell J. See also: [Searching by author](#).

### Limit authors

☐ Only as first author ☐ Only as last author

### Title words

## PubMed Single Citation Matcher

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### Date

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#### Year

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#### Day

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### Details

#### Volume

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#### First page

### Author

Use format lastname initials for the most comprehensive results, e.g., Ostell J. See also: [Searching by author](#).

Mirmohammadkhani



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covid19

Search

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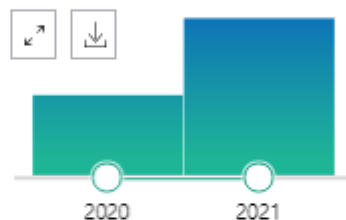
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TEXT AVAILABILITY

- ☐ Abstract
- ☐ Free full text
- ☐ Full text

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

- ☐ Books and Documents

3 results

<<

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Use COVID-19 filters from PubMed Clinical Queries to refine your search

Treatment Mechanism Transmission More filters

See more SARS-CoV-2 literature, sequence, and clinical content from NCBI

☐

1 Knowledge, Attitudes, and Practices toward COVID-19 among Persian Birth Cohort Participants.

Cite

Mirmohammadkhani M, Bemanalizadeh M, Yazdi M, Goli P, Mohebpour F, Saffarieh E, Danaei N, Paknazar F, Daniali SS, Kelishadi R.

Share

J Educ Health Promot. 2021 Sep 30;10:358. doi: 10.4103/jehp.jehp\_1274\_20. eCollection 2021.

PMID: 34761044 Free PMC article.

☐

2 Knowledge and attitudes of Iranian dental students regarding infection control during the COVID-19 pandemic.

Cite

Esmaeelinejad M, Mirmohammadkhani M, Naghipour A, Hasanian S, Khorasanian S.

Share

Braz Oral Res. 2020 Oct 30;34:e121. doi: 10.1590/1807-3107bor-2020.vol34.0121. eCollection 2020.

PMID: 33146317 Free article.

☐

Prevalence of COVID-19 Virus Infection in Semnan province.



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Use the form below to retrieve PubMed PMIDs. Upload a file or enter your request in the text box.

- Use the following input format: *journal\_title|year|volume|first\_page|author\_name|your\_key|*
- Fields must be separated by a vertical bar with a final bar at the end of the string.
- If citation strings are entered in the text box and a file is uploaded, the results will be an aggregate of both.

For more information, please see the [PubMed User Guide](#).

\* Email

email@example.com

Upload a text file

Drag file here or [select a file](#)

Citation strings

Enter your citation strings here

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### Latest Literature

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Blood (3)

Clin Infect Dis (1)



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MeSH (Medical Subject Headings) is the NLM controlled vocabulary thesaurus used for indexing articles for PubMed.

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MeSH

MeSH ▾

cancer

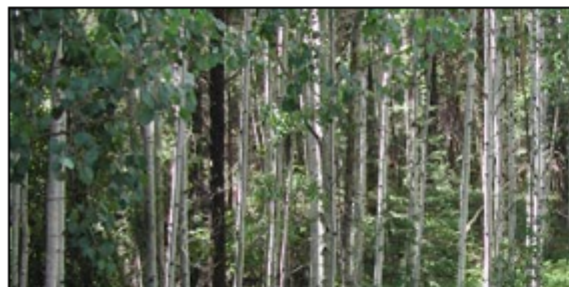
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5t4 cancer vaccine  
 activated in prostate cancer protein, human  
 adrenal cancer  
 adrenal cancers  
 adrenal cortex cancer  
 adrenal cortex cancers  
 adrenal gland cancer  
 adrenal gland cancers  
 adrenocortical cancer  
 adrenocortical cancers  
 adult liver cancer  
 adult liver cancers  
 allatostatin b type, cancer borealis  
 american cancer societies  
 american cancer society  
 amplified in breast cancer 1 protein  
 amplified in breast cancer 1 protein, human  
 amplified in liver cancer 1 protein, human  
 anal cancer  
 anal cancers

indexing articles for PubMed.

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## Neoplasms

New abnormal growth of tissue. Malignant neoplasms show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign neoplasms.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

PubMed search builder options

Subheadings:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> abnormalities              | <input type="checkbox"/> education                       | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> administration and dosage  | <input type="checkbox"/> embryology                      | <input type="checkbox"/> pharmacology                  |
| <input type="checkbox"/> analysis                   | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> anatomy and histology      | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> biosynthesis               | <input type="checkbox"/> etiology                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> genetics                        | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> blood supply               | <input type="checkbox"/> growth and development          | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> cerebrospinal fluid        | <input type="checkbox"/> history                         | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> chemical synthesis         | <input type="checkbox"/> immunology                      | <input type="checkbox"/> secondary                     |
| <input type="checkbox"/> chemically induced         | <input type="checkbox"/> injuries                        | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> chemistry                  | <input type="checkbox"/> innervation                     | <input type="checkbox"/> supply and distribution       |
| <input type="checkbox"/> classification             | <input type="checkbox"/> isolation and purification      | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> complications              | <input type="checkbox"/> legislation and jurisprudence   | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> congenital                 | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> cytology                   | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> transmission                  |
| <input type="checkbox"/> diagnosis                  | <input type="checkbox"/> mortality                       | <input type="checkbox"/> transplantation               |
| <input type="checkbox"/> diagnostic imaging         | <input type="checkbox"/> nursing                         | <input type="checkbox"/> ultrastructure                |
| <input type="checkbox"/> diet therapy               | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> drug effects               | <input type="checkbox"/> parasitology                    | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> drug therapy               | <input type="checkbox"/> pathogenicity                   | <input type="checkbox"/> virology                      |
| <input type="checkbox"/> economics                  |  |  |

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Neoplasms

MeSH

cancer (397)

MeSH

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Tree Number(s): C04

MeSH Unique ID: D009369

Entry Terms:

- Tumor
- Neoplasm
- Tumors
- Neoplasia
- Neoplasias
- Cancer
- Cancers
- Malignant Neoplasm
- Malignancy
- Malignancies
- Malignant Neoplasms
- Neoplasm, Malignant
- Neoplasms, Malignant
- Benign Neoplasms
- Benign Neoplasm
- Neoplasms, Benign
- Neoplasm, Benign

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**Neoplasms**

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MeSH

MeSH

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New abnormal growth of tissue. Malignant neoplasms show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign neoplasms.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1984-1985

PubMed search builder options

[Subheadings:](#)

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| <input type="checkbox"/> anatomy and histology      | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> prevention and control        |
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| <input type="checkbox"/> cerebrospinal fluid        | <input type="checkbox"/> history                         | <input type="checkbox"/> rehabilitation                |
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| <input type="checkbox"/> congenital                 | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> therapy                       |
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| <input type="checkbox"/> diagnosis                  | <input type="checkbox"/> mortality                       | <input type="checkbox"/> transplantation               |
| <input type="checkbox"/> diagnostic imaging         | <input type="checkbox"/> nursing                         | <input type="checkbox"/> ultrastructure                |
| <input type="checkbox"/> diet therapy               | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |

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"Neoplasms"[Mesh]

Add to search builder AND

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[cancer \(397\)](#)

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New abnormal growth of tissue. Malignant neoplasms show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign neoplasms.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

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[Subheadings:](#)

- |   |  |  |
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| <input type="checkbox"/> biosynthesis               | <input type="checkbox"/> etiology                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> genetics                        | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> blood supply               | <input type="checkbox"/> growth and development          | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> cerebrospinal fluid        | <input checked="" type="checkbox"/> history              | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> chemical synthesis         | <input type="checkbox"/> immunology                      | <input type="checkbox"/> secondary                     |
| <input type="checkbox"/> chemically induced         | <input type="checkbox"/> injuries                        | <input type="checkbox"/> statistics and numerical data |
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| <input type="checkbox"/> diet therapy               | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> drug effects               | <input type="checkbox"/> parasitology                    | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> drug therapy               | <input type="checkbox"/> pathogenicity                   | <input type="checkbox"/> virology                      |
| <input type="checkbox"/> ...                        |  |  |

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"Neoplasms" [Mesh]

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New abnormal growth of tissue. Malignant neoplasms show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign neoplasms.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

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|---|--|--|
| <input type="checkbox"/> abnormalities              | <input type="checkbox"/> education                       | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> administration and dosage  | <input type="checkbox"/> embryology                      | <input type="checkbox"/> pharmacology                  |
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| <input type="checkbox"/> cerebrospinal fluid        | <input checked="" type="checkbox"/> history              | <input type="checkbox"/> rehabilitation                |
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| <input type="checkbox"/> congenital                 | <input type="checkbox"/> metabolism                      | <input checked="" type="checkbox"/> therapy            |
| <input type="checkbox"/> cytology                   | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> transmission                  |
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| <input type="checkbox"/> diet therapy               | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> drug effects               | <input type="checkbox"/> parasitology                    | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> drug therapy               | <input type="checkbox"/> pathogenicity                   | <input type="checkbox"/> virology                      |

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```
((("Neoplasms"[Mesh]) AND  
"Neoplasms/history"[Mesh]) AND (  
"Neoplasms/therapy"[Mesh] )
```

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((("Neoplasms"[Mesh]) AND "Neoplasms/history"[Mesh]) AND ( "Neoplasms/



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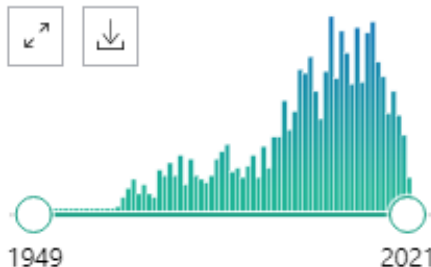
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☐ Free full text

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The development of breast radiology: the *Acta Radiologica* perspective.

1

Zackrisson S, Andersson I.

Cite

Acta Radiol. 2021 Nov;62(11):1473-1480. doi: 10.1177/02841851211050861. Epub 2021 Oct 28.

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PMID: 34709078 Review.



Pituitary Surgery.

2

Mortini P, Albano L, Barzaghi LR, Losa M.

Cite

Presse Med. 2021 Dec;50(4):104079. doi: 10.1016/j.lpm.2021.104079. Epub 2021 Oct 21.

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PMID: 34687913 Review.



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Domains & Structures  
Genes & Expression  
Genetics & Medicine  
Genomes & Maps  
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burns

Search

Burns : journal of the International Society for Burn Injuries

Jo Zhonghua shao shang za zhi = Zhonghua shaoshang zazhi = Chinese journal of burns

Jo Zhonghua zheng xing shao shang wai ke za zhi = Zhonghua zheng xing shao shang waikf [i.e. waike] zazhi = Chinese journal of plastic sur...

Annals of burns and fire disasters

Burns, including thermal injury

Y Burns & trauma

G International journal of burns and trauma

N Scars, burns & healing

N Journal of burns and wounds

N Burns open : an international open access journal for burn injuries

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NLM Catalog 

burns



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## Search results

Items: 15

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1. International Society for Burn Injuries.  
NLM Title Abbreviation: **Burns** Open  
ISSN: 2468-9122 (Electronic) ; 2468-9122 (Linking)  
[England] : Elsevier Ltd., [2017]-  
Not currently indexed for MEDLINE  
NLM ID: 101768726 [Serial]

☐ [Scars, burns & healing](#)

2. Katie Piper Foundation.  
NLM Title Abbreviation: Scars Burn Heal  
ISSN: 2059-5131 (Electronic) ; 2059-5131 (Linking)  
Thousand Oaks, CA : SAGE Publications, [2015]-  
Not currently indexed for MEDLINE  
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**Burns open : an international open access journal for burn injuries**

**Author(s):** International Society for Burn Injuries, issuing body

**NLM Title Abbreviation:** Burns Open

**Title(s):** Burns open : an international open access journal for burn injuries.

**Related Title:** Burns

**Publication Start Year:** 2017

**Frequency:** Quarterly

**Country of Publication:** England

**Publisher:** [England] : Elsevier Ltd., [2017]-

**Description:** 1 online resource

**Language:** English

**ISSN:** 2468-9122 (Electronic)

2468-9122 (Linking)

**LCCN:** 2020243203

**Electronic Links:** <https://www.sciencedirect.com/journal/burns-open>

**In:** PubMed: Selected citations only

**Current Indexing Status:** Not currently indexed for MEDLINE. Citations are for articles where the manuscript was deposited in PubMed Central (PMC) in compliance with public access policies. For further information, see [Author Manuscripts in PMC](#).

**MeSH:** Burns\*

**Publication Type(s):** Periodical

**Notes:** Articles are published as they are received and compiled into volumes.

Companion journal to: Burns.

Complemented by (work): Burns 0305-4179 (DLC)sn 89033009 (OCoLC)20002337 (DNLM)8913178.

**Other ID:** (OCoLC)1004202435

**NLM ID:** [101768726](#) [Serial]

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MeSH

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# جستجوی شواهد بالینی

بیش از 2000 سال است که دو واقعیت مبنای امر طبابت را تشکیل داده اند:

1 - ضرری نرسانم 2 - آنچه نیکوست انجام دهم (سوگند نامه بقراط).

در طول تاریخ همواره پزشکان و آموزش دهندگان دانش پزشکی در راه رسیدن به این اهداف، به دنبال راه هایی برای هرچه بهتر عملی کردن این آموزه ها بوده اند. آن چه بر اساس آن می توان نیکویی یا ضرر را تشخیص داد و بر اساس آن عمل را ارزیابی کرد، بهترین شواهد موجود است.

# جستجوی شواهد بالینی

از سوی دیگر ، پزشکی مدرن در برابر هجوم اطلاعات بخصوص در عصر ارتباطات و بدون امکان تجزیه و تحلیل تمامی مطالب منتشر شده قرار گرفته است که از طرفی منبع مناسبی برای متخصصان بالینی هستند و از طرفی ممکن است موجبات سردرگمی آنها را فراهم آورند.

لذا، رویکردی که از آن به عنوان " پزشکی مبتنی بر شواهد" Evidence based Medicine یا EBM نام برده می شود ، توصیه می کند به جای مطالعه همه متون ، در زمان نیاز و بر حسب مورد به جستجوی اطلاعات معتبر و مطالعه آن برای پاسخ به پرسش های بالینی پرداخت.

# پزشکی مبتنی بر شواهد چیست؟

اولین بار دیوید ساکت (David Sackett) و همکاران وی در دانشگاه مک ماستر واژه پزشکی مبتنی بر شواهد را در 1995 ابداع نمودند و تعریف پزشکی مبتنی بر شواهد را چنین بیان نمودند:

پزشکی مبتنی بر شواهد عبارتست از استفاده درست، صریح و مدبرانه از بهترین شواهد موجود در تصمیم گیری درباره مراقبت از هر بیمار و این به معنی تلفیق تجارب بالینی فردی با بهترین شواهد بالینی در دسترس و بدست آمده از پژوهشهای نظام مند است.



# چرا پزشکی مبتنی بر شواهد مطرح شد؟

- شکافی که بین پژوهشهای پزشکی و عملکرد بالینی وجود داشت مهمترین دلیل بود.
- دلیل دیگر، ترکیب تجربه متخصصین با ارزش ها و شرایط بالینی بیمار بود.

# ضرورت پزشکی مبتنی بر شواهد

- نیمه عمر دانش پزشکی و انفجار اطلاعات
- بیماری های جدید و پیچیدگی بیماریها
- شکاف بین کار بالینی و پژوهش بالینی (Clinical research & clinical practice)



# فرآیند پزشکی مبتنی بر شواهد:

- ▶ تنظیم یک سوال بالینی قابل پاسخ دادن
- ▶ جستجوی شواهد
- ▶ ارزیابی نقادانه شواهد
- ▶ کاربرد شواهد
- ▶ ارزشیابی عملکرد

# انواع سوال بالینی

## ▶ **سوالات زمینه ای یا Background**

▶ در سوالات background با اطلاعات کلی در رابطه با بیماری سروکار داریم

## ▶ **سوالات آتی یا foreground**

▶ در سوالات Foreground با اطلاعاتی سر و کار داریم که در برخورد با بیمار به دست می آید.

▶ تبدیل سوالات background به Foreground

## انواع سوال بالینی :

وقتی تجربه و دانش ما نسبت به مساله ای اندک است مانند دانشجویی که در مرحله ی یادگیری مساله ای جدید است، بیشتر سوالات را سوالات Background تشکیل می دهد. با افزایش دانش بالینی و تجربه ، نسبت سوالات Foreground افزایش می یابد. لازم به ذکر است که هیچگاه بی نیاز از یک نوع از سوال نخواهیم شد.

## مثال

خانم بارداری با شکایت از خستگی بیش از حد به پزشک مراجعه می کند. پزشک بعد از صحبت با او متوجه اشتهاى زیاد و در عین حال کم کردن وزن نسبت به ماه های قبل می شود. بر این اساس، به دیابت حاملگی در او مشکوک می شود.

- عامل ایجاد دیابت بارداری چیست؟ (عامل بیماری)
- دیابت بارداری را چگونه تشخیص دهیم؟ (تشخیص)
- بهترین درمان برای دیابت بارداری چیست؟ (درمان)
- پیش آگهی دیابت بارداری چیست؟ (پیش آگهی)
- چگونه می توان از دیابت بارداری جلوگیری کرد؟ (پیشگیری)

# انواع سوال بالینی :

- ▶ Intervention یا مداخله
- ▶ Etiology یا عامل بیماری
- ▶ Diagnosis یا تشخیصی
- ▶ پیش آگهی و پیشگیری یا Prognosis

سؤال بالینی مشخص می کند که چه نوع مطالعه یا مطالعاتی جستجو شود.  
برای مثال برای یافتن شواهد مرتبط با یک مداخله، بهترین نوع مطالعه کارآزمایی  
بالینی است. در جدول زیر نوع سوالات و بهترین نوع مطالعه برای یافتن شواهد  
مربوطه ارائه شده است.

# بهترین نوع شواهد بر اساس انواع سوالات بالینی

نوع سوال	بهترین نوع شواهد با کمترین سوگیری
مداخله	مرور نظام مند ، مطالعه کنترل شده تصادفی (RCT)
اتیولوژی و عوامل خطر	مرور نظام مند، مطالعه کوهورت
تشخیصی	مرور نظام مند، مطالعه مقطعی
پیش آگهی و پیشگیری	مرور نظام مند، مطالعه کوهورت

# در کدام پایگاه ها جستجو کنیم؟

- ▶ **PubMed**
- ▶ **Clinical key**
- ▶ **Cochrane**
- ▶ **Tripe**



# مراحل جستجو

- ▶ تنظیم سوال بالینی (PICO)
- ▶ تعیین مترادف ها
- ▶ • تهیه استراتژی
- ▶ • جستجوی شواهد

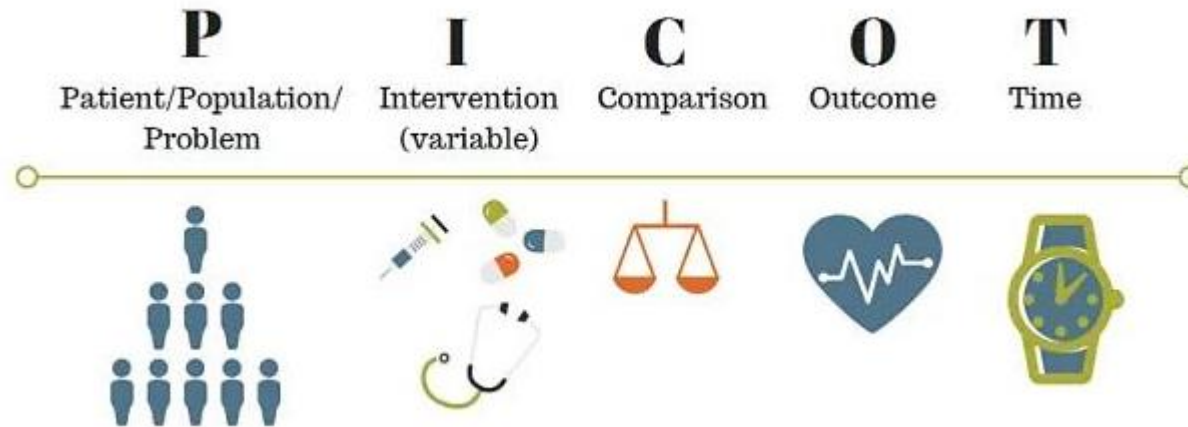
# مرحله اول جستجو در پزشکی مبتنی بر شواهد:

▶ تنظیم سوال بالینی

▶ PICO

# PICO or PICOT

- ▶ P: population , patient, problem
- ▶ I: intervention
- ▶ C: comparison
- ▶ O: outcome



## مثال

اول وقت اداری است و من در کتابخانه نشسته ام. یکی از اساتید بخش سرطان وارد می شود. او می گوید یکی از شایعترین تومورهای ناحیه سر و گردن تومورهای سلول سنگفرشی است که بر اساس درجه بیماری ، در درمان از پرتودرمانی یا جراحی استفاده می شود. اما در صحبت هایی که با سایر اساتید بخش داشته ایم، اضافه کردن شیمی درمانی به پرتودرمانی را بعنوان پیشنهاد ارائه داده اند. آیا می توانید مقالات معتبری را برایم پیدا کنید که این دو روش را مقایسه نموده و افزایش میزان پاسخ به درمان و پایین بودن عود بیماری را بررسی کرده باشند.

# یافتن کلمات کلیدی سوال بالینی

اول وقت اداری است و من در کتابخانه نشسته ام. یکی از اساتید بخش سرطان وارد می شود. او می گوید یکی از شایعترین تومورهای ناحیه سر و گردن تومورهای سلول سنگفرشی سر و گردن است که بر اساس درجه بیماری ، در درمان از پرتودرمانی یا

جراحی استفاده می شود. اما در صحبت هایی که با سایر اساتید بخش داشته ایم، اضافه کردن شیمی درمانی به پرتودرمانی را بعنوان پیشنهاد ارائه داده اند. آیا می توانید مقالات معتبری را برایم پیدا کنید که این دو روش را مقایسه نموده و نشان داده باشند کدام

روش باعث افزایش پاسخ به درمان شده و ریسک عود تومور را کاهش داده باشند.

# برگردان کلمات کلیدی نویسنده به زبان استاندارد

Head and Neck tumor	تومورهای سر و گردن
Squamous Cell Carcinoma of Head and Neck	سلول سنگفرشی سر و گردن
Radiotherapy	پرتودرمانی
Chemo radiotherapy	اضافه کردن شیمی درمانی به پرتودرمانی
Treatment outcome	نتیجه درمان
tumor recurrence	عود تومور

# انواع جستجو

جستجوی کلیدواژه ای: فقط کلمات کلیدی سوال جستجو می شود.

جستجوی موضوعی: کلمات کلیدی سوال به همراه اصطلاح پذیرفته شده MESH و مترادف ها جستجو می گردد.

# مشخص کردن اجزای PICO

PICO	KEYWORD
PUPULATION/PATIENTS	Squamous Cell Carcinoma of Head and Neck
INTERVENTION	Radiotherapy
COMPRARISSON	Chemo radiotherapy
OUTCOME	Treatment outcome, tumor recurrence



# جستجوی موضوعی

ابزار این نوع جستجو:

**MeSH**

# جستجوی کلیدواژه ای

... > Search: "Squamous Cell Carcinoma of Head and Neck" AND  
Radiotherapy AND "Chemo radiotherapy "AND "Treatment outcome"  
OR "tumor recurrence"

17,628

# جستجوی موضوعی

OR

AND

اجزای PICO	کلیدواژه ها	مترادف ها
PUPOLATION		
INTERVENTION		
COMPARATOR		
OUTCOME		

# یافتن مترادف ها

MeSH

▼

Squamous Cell Carcinoma of Head and Neck

×

Search

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## Squamous Cell Carcinoma of Head and Neck

The most common type of head and neck carcinoma that originates from cells on the surface of the NASAL CAVITY, MOUTH, PARANASAL SINUSES, SALIVARY GLANDS, and LARYNX. Mutations in TNFRSF10B, PTEN, and ING1 genes are associated with this cancer.

Year introduced: 2019 (2009)

[PubMed search builder options](#)

# جستجوی موضوعی

Subheadings:

## سرعنوان های موضوعی فرعی

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> analysis              | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> anatomy and histology | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> blood                 | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> blood supply          | <input type="checkbox"/> etiology                        | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> chemically induced    | <input type="checkbox"/> genetics                        | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> chemistry             | <input type="checkbox"/> immunology                      | <input type="checkbox"/> secondary                     |
| <input type="checkbox"/> classification        | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> complications         | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> cytology              | <input type="checkbox"/> mortality                       | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> diagnosis             | <input type="checkbox"/> nursing                         | <input type="checkbox"/> ultrastructure                |
| <input type="checkbox"/> diagnostic imaging    | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> diet therapy          | <input type="checkbox"/> pathology                       | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> drug therapy          | <input type="checkbox"/> physiology                      | <input type="checkbox"/> virology                      |
| <input type="checkbox"/> economics             |  |  |

☐ Restrict to MeSH Major Topic.

☐ Do not include MeSH terms found below this term in the MeSH hierarchy.

محدود کردن جستجو به مقالاتی که موضوع اصلی آنها  
کلیدواژه مش است

# جستجوی موضوعی

Entry Terms:

## واژه های مترادف

- Squamous Cell Carcinoma of the Head and Neck
- Squamous Cell Carcinoma, Head And Neck
- Carcinoma, Squamous Cell of Head and Neck
- Head and Neck Squamous Cell Carcinoma

## رده بندی درختی MESH

[All MeSH Categories](#)

[Diseases Category](#)

[Neoplasms](#)

[Neoplasms by Histologic Type](#)

[Neoplasms, Glandular and Epithelial](#)

[Carcinoma](#)

[Carcinoma, Squamous Cell](#)

**Squamous Cell Carcinoma of Head and Neck**

[All MeSH Categories](#)

[Diseases Category](#)

[Neoplasms](#)

[Neoplasms by Site](#)

[Head and Neck Neoplasms](#)

**Squamous Cell Carcinoma of Head and Neck**

# انتخاب تقسیم فرعی موضوعی بر اساس نوع پرسش و نوع مطالعه

نوع سوال	نوع مطالعه	تقسیم موضوعی فرعی
Therapy	Randomized Controlled Trial ,Double Blind Method , Random Allocation	therapy , drug therapy , Surgery
Prevention	Randomized Controlled Trial ,Double Blind Method , Random Allocation	Primary Prevention
Diagnosis	Cross-Over Studies , Reference Standards, Predictive Value of Tests	Diagnosis
Prognosis	Cohort Studies	Prognosis ,Morbidity, Mortality

# مشخص کردن اجزای PICO

PICO	KEYWORD
PUPULATION	Squamous Cell Carcinoma of Head and Neck
INTERVENTION	Radiotherapy
COMPRARISSON	Chemo radiotherapy
OUTCOME	Treatment outcome, tumor recurrence



# یافتن مترادفها

PUPOLATION	Squamous Cell Carcinoma of Head and Neck	Squamous Cell Carcinoma of the Head and Neck Squamous Cell Carcinoma, Head And Neck Carcinoma, Squamous Cell of Head and Neck Head and Neck Squamous Cell Carcinoma
INTERVENTION	Radiotherapy	Radiotherapies Radiation Therapy Radiation Therapies Radiation Treatment Radiation Treatments
COMPARATOR	Chemoradiotherapy	Chemoradiotherapies Radiochemotherapy Radiochemotherapies Concurrent Chemoradiotherapy Synchronous Chemoradiotherapy
OUTCOME	Treatment Outcome tumor recurrence	Treatment Outcome Patient-Relevant Outcome Clinical Effectiveness Treatment Effectiveness Treatment Efficacy Neoplasm Recurrence, Local Local Neoplasm Recurrences



pubmedhh.nlm.nih.gov/nlmd/pico/piconew.php

## Search MEDLINE/PubMed via PICO with Spelling Checker

*Patient, Intervention, Comparison, Outcome*

[go.usa.gov/xFn](http://go.usa.gov/xFn)

### Patient/Problem:

Medical condition:

Intervention:

(therapy, diagnostic test, etc.)

Compare to:

(same as above, optional):

Outcome:

(optional)

Select Publication type:

Not specified



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## PubMed Clinical Queries

This tool uses [predefined filters](#) to help you quickly refine PubMed searches on clinical or disease-specific topics. To use this tool, enter your search terms in the search bar and select filters before searching.

**Note:** The Systematic Reviews filter has moved; it is now an option under the "Article Type" filter on the main PubMed search results page.

Enter your search terms

Search

### Filter category

- ☒ Clinical Studies  
☐ COVID-19

Clinical Queries filters were developed by Haynes  
RB et al. to facilitate retrieval of clinical studies.

### Filter

Therapy  
Therapy  
Clinical Prediction Guides  
Diagnosis  
Etiology  
Prognosis

### Scope

Broad  
Broad  
Narrow

**Filter category**  
☒ Clinical Studies  
☐ COVID-19  
Clinical Queries filters were developed by Haynes RB et al. to facilitate retrieval of clinical studies.

**Filter**  
  
See Clinical Queries filter details.

**Scope**  
  
Returns fewer results: more specific, but less comprehensive. See filter details.

## Results for Clinical Studies: Therapy/Narrow

5 of 59,888 results sorted by: Most Recent

[See all results in PubMed \(59,888\)](#)

[Protocol for a pilot randomized controlled trial of a mobile health exercise intervention for older patients with myeloid neoplasms \(GO-EXCAP 2\).](#)

Loh KP, et al. *J Geriatr Oncol.* 2021. PMID: 34949540

[Development and validation of a nomogram to predict cancer-specific survival in patients with hypopharyngeal squamous cell carcinoma treated with primary surgery.](#)

Wang K, et al. *J Int Med Res.* 2021. PMID: 34939432 [Free article.](#) *Clinical Trial.*

[Whole Brain Irradiation or Stereotactic RadioSurgery for five or more brain metastases \(WHOB-I-STER\): A prospective comparative study of neurocognitive outcomes, level of autonomy in daily activities and quality of life.](#)

Ferini G, et al. *Clin Transl Radiat Oncol.* 2021. PMID: 34926839 [Free PMC article.](#)

[Rationale and design of the multicentric, double-blind, double-placebo, randomized trial APrepitant versus HYdroxyzine in association with cytoreductive treatments for patients with myeloproliferative neoplasia suffering from Persistent Aquagenic Pruritus. Trial acronym: APHYPAR.](#)

Le Gall-Ianotto C, et al. *Trials.* 2021. PMID: 34923994 [Free PMC article.](#) *Clinical Trial.*

[The influence of a supervised group exercise intervention combined with active lifestyle recommendations](#)



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Row	Saved	Status	Study Title	Conditions	Interventions	Locations
1	<input type="checkbox"/>	Completed	<a href="#">Posting of Basic Results of Clinical Trials</a>	<ul style="list-style-type: none"><li>The Study Will Focus on no Specific Conditions</li></ul>	<ul style="list-style-type: none"><li>Other: survey by email</li></ul>	<ul style="list-style-type: none"><li>Clinical Epidemiology Center, Hotel-Dieu Paris, France</li></ul>
2	<input type="checkbox"/>	Completed <a href="#">Has Results</a>	<a href="#">PGT-A Versus Blastocyst Morphology Selection</a>	<ul style="list-style-type: none"><li>Pregnancy</li></ul>	<ul style="list-style-type: none"><li>Procedure: comprehensive chromosome screening</li></ul>	<ul style="list-style-type: none"><li>Antalya IVF Antalya, Turkey</li></ul>
3	<input type="checkbox"/>	Completed	<a href="#">Study on Dynamic Changes of the Maternal Anti-EV71 and Anti-CVA16 Antibody Levels in Infants and Young Children</a>	<ul style="list-style-type: none"><li>Hand, Foot and Mouth Disease</li><li>Anti-EV71</li><li>Anti-CVA16</li></ul>		<ul style="list-style-type: none"><li>Jiangsu Provincial Center for Diseases Control and Prevention Nanjing, Jiangsu, China</li></ul>
4	<input type="checkbox"/>	Unknown †	<a href="#">Extended Follow-up of Treatment of Prednisone Plus Cyclophosphamide in Patients With Advanced-stage IgA Nephropathy</a>	<ul style="list-style-type: none"><li>IgA Nephropathy</li></ul>	<ul style="list-style-type: none"><li>Drug: prednisone and cyclophosphamide</li><li>Drug: prednisone alone</li></ul>	<ul style="list-style-type: none"><li>Guangdong General Hospital Guangzhou, Guangdong, China</li></ul>
5	<input type="checkbox"/>	Unknown †	<a href="#">A 5-year Observational Follow-up Study to Describe Treatment Patterns in Real World of HCV Patients</a>	<ul style="list-style-type: none"><li>Hepatitis C</li></ul>		<ul style="list-style-type: none"><li>Wei Lai</li></ul>

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/ نویسندگان مرسته روحانی زادگان، اکبر سلطانی

نوع مدرک	BF :
زبان مدرک	فارسی :
شماره رکورد	20350 :
شماره مدرک	۵۶۵۹ :
سرشناسه	روحانی‌زادگان، مرسته :
عنوان و نام پدیدآور	سطوح شواهد و درجه بندی توصیه‌های بالینی [کتاب] / نویسندگان مرسته روحانی زادگان، اکبر سلطانی؛ ویراستار حمیده موسی پور :
وضعیت نشر	تهران: ویستا، ۱۳۸۸. :
صفحه شمار	۵۸ص: جدول :
فروست	(مجموعه کتابچه‌های پزشکی مبتنی بر شواهد) :
یادداشت	چاپی :
یادداشت	پشت جلد به انگلیسی Level of Evidence and Grade of Clinical Recommendation. :
شماره استاندارد بین المللی کتاب (ISBN)	۹۷۸-۹۶۴-۲۹۹۷-۲۵-۱ :
موضوع	پزشکی مبتنی بر شواهد :
موضوع	پزشکی بالینی :
شناسه افزوده	سلطانی، اکبر :
رده بندی پزشکی	موسی‌پور، حمیده :
محل نگهداری	WB102.R737 1388 :
شماره ثبت	1 :
شماره ثبت	۷۴۰۳۰ :

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أشهر :

شماره راهنما :

مرکز:

موجودی



عنوان :

: دیدآور

تاریخ نشر :

اشهر :

شماره راهنما : 5

مرکز:

موجودی

سنوان :

تاریخ نشر :

اشهر :

شماره راهنما : 4

مرکز:

موجودی



عنوان :

## موضوعات مرتب

(1) Critical pathways

(1) optic nerve Diseases

(1) Evidence Based Medicine

(1) Eye Diseases

(1) Physical therapy-methods

(1) Nutrition



پدیدآوران مرتب

(1) Brazis, Paul W

(1) Gass,E.M

(1) Refshauge, K.M

(1) physical therapy-methods

(1) .Katz,David L

(1) Dunn, Grahm



ناشران مرتبط

(1) Thieme

(1) Butterworth Heinemann

(1) Halsted Press

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"تصمیم گیری های بالینی دندانپزشکی مبتنی بر معتبرترین شواهد علمی مجموعه مقالات مروری نظامند از مطالعات کنترل تصادفی (کتابخانه کاکرین)"

نوع مدرک	: BF
زبان مدرک	: فارسی
زبان اثر اصلی	: فارسی
شماره رکورد	: 50770
شماره مدرک	: ۲۹۳د
سرشناسه	: یزدانی، رضا
عنوان و نام پدیدآور	: تصمیم گیری های بالینی دندانپزشکی مبتنی بر معتبرترین شواهد علمی مجموعه مقالات مروری نظامند از مطالعات کنترل تصادفی (کتابخانه کاکرین) [کتاب] ؛ رضا یزدانی، سیمین زهرا محبی
وضعیت نشر	: تهران: رویان پژوه، ۱۳۹۵
صفحه شمار	: ۴۱۳ص.
شماره استاندارد بین المللی کتاب (ISBN)	: خریداری: ۹۷۸۶۰۰۴۰۸۲۵۲۵
موضوع	: دندانپزشکی مبتنی بر شواهد
موضوع	: Evidence - based dentistry
شناسه افزوده	: محبی، سیمین زهرا
رده بندی پزشکی	: WU 20.5.Y 11 1395
محل نگهداری	: 11
شماره ثبت	: ۱۱۴۱
محل نگهداری	: 11
شماره ثبت	: ۱۱۷۷
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