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碩睿資訊 Shou Ray Information Service Trainer 2024

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資料庫簡介

一般檢索搭配 PICO 問題架構,快速一把抓

利用 MeSH Term 檢索,聰明不遺漏

利用Search Manager,策略化檢索

利用PICO檢索,精準化查找

註冊個人帳號, 善用個人化功能

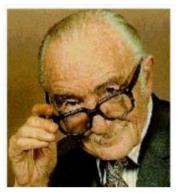
實證醫學資源



資料庫簡介



資料庫背景



Professor Archibald Leman Cochrane, CBE FRCP FFCM, (1909-1988)

英國內科醫師及流行病學專家

■ 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

Cochrane Taiwan 成立 @TMU

1972

1992

2015



THE ROCK CARLING FELLOWSHIP

1971

EFFECTIVENESS AND EFFICIENCY

RANDOM REFLECTIONS ON HEALTH SERVICES

A. L. Cochrane

CBE, FRCP

Director

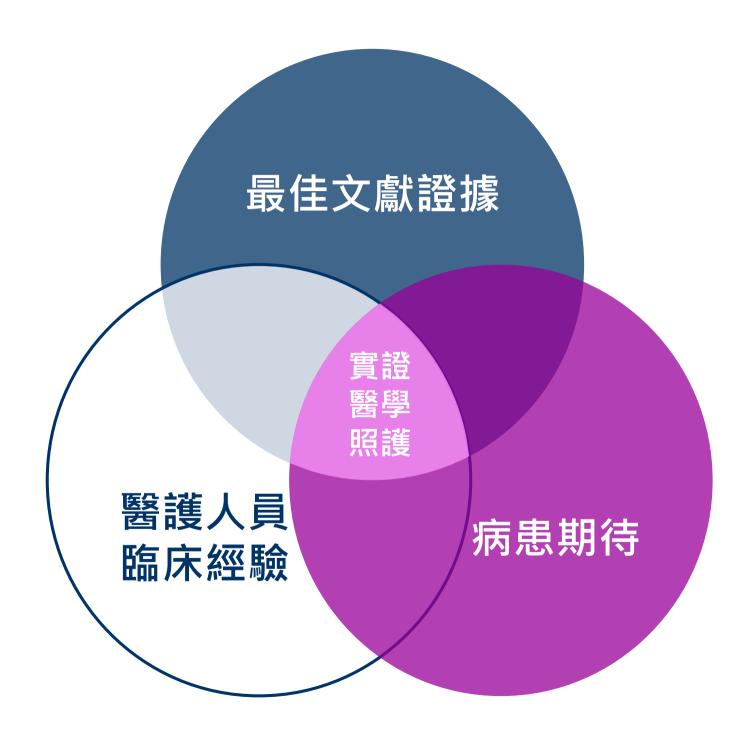
MRC Epidemiology Unit

Cardiff

EBM Gordon

Cochrane Collaboration @England 更名為 The Cochrane 目標 成為全球健康決策 的證據核心









臨床對照試驗

收集安全性 有效性資料 ↓ **評斷新方法**

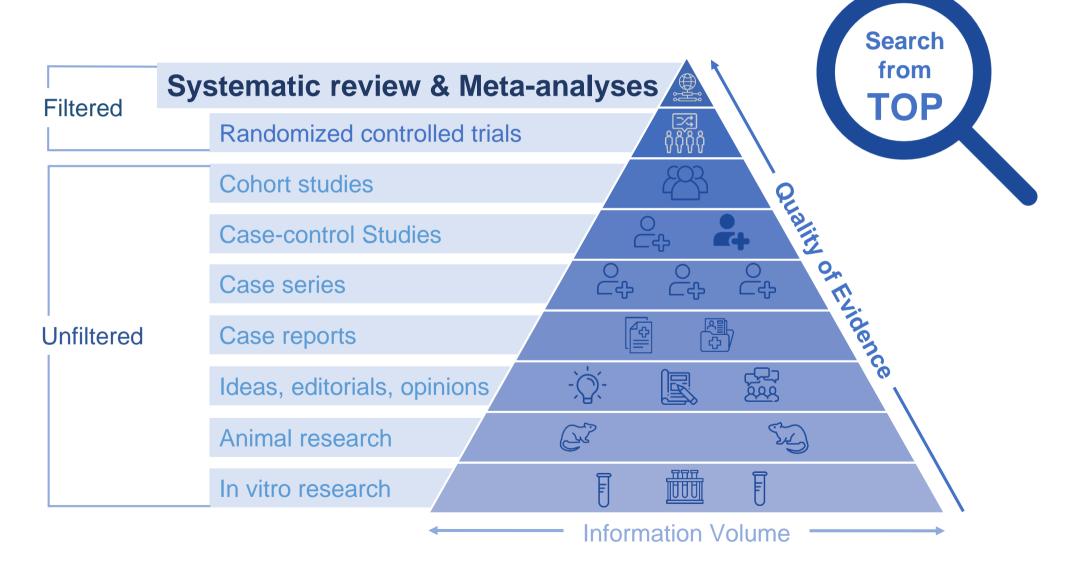


系統性文獻回顧

整合 臨床試驗 ↓ 綜合判斷

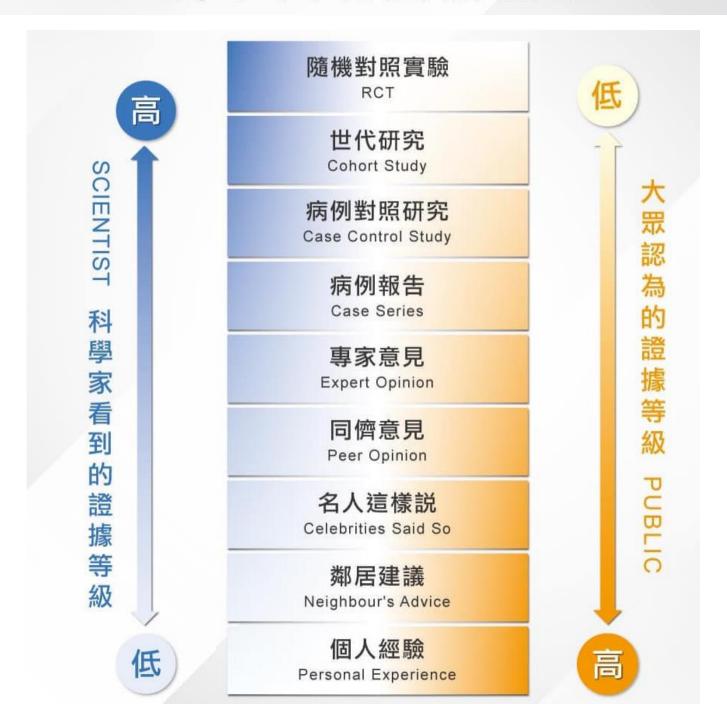


Evidence Pyramid





科學與現實的差距





收錄三個資料庫

收錄資料庫	特色
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
Cochrane Central Register of Controlled Trials (Clinical Trials)	收錄隨機臨床實驗的書目資料庫
Clinical Answers (CCAs)	從 Cochrane Reviews 擷取易讀、易懂的臨床切入重點 ,便於臨床照護的決策與操作



Cochrane 評論小組 (CRG)

- ◆ CDSR 中的 Cochrane 評論由在其中一個Cochrane 評論小組 註冊標題的作者編寫。每個 Cochrane 評論小組都專注於一個特定的主題領域,由一名統籌編輯(Co-ordinating Editor)和一個編輯團隊帶領,其中包括一名執行編輯和一名訊息專家。Cochrane 評論小組為作者提供方法和編輯支持,以準備 Cochrane 評論,並管理包括同行評審的編輯過程。
- ◆ 所有協調編輯和其他 Cochrane 評論小組的工作人員和編輯 均已聲明存在利益衝突。

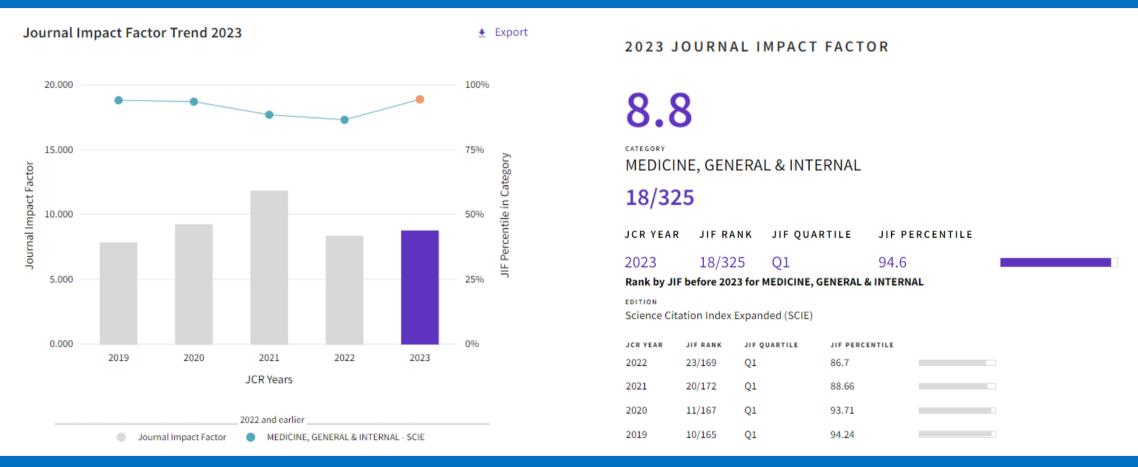


Cochrane Database of Systematic Reviews (CDSR)

- Cochrane 系統評論資料庫 (CDSR) 是醫療保健和衛生政策研究系統評論的主要資源。
- 包括由 Cochrane 評論小組準備的所有 Cochrane Review、Protocol、社論和增刊。
- CDSR 整個月都在構建,新的和更新的 Review 和 Protocol 會不斷發布。



研究成果收錄成Cochrane Database of Systematic Review (CDSR) 評論小組一段時間會重新進行資料收集及評讀



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



Cochrane Central Register of Controlled Trials (CENTRAL)

- ◆ Cochrane 對照試驗中心註冊庫 (CENTRAL) 是高度集中的隨機和準隨機對照試驗報告來源。
- ◆大多數 CENTRAL 記錄取自 PubMed 和 Embase.com 書目 資料庫,但記錄也來自其他已發表和未發表的來源,包括 CINAHL、ClinicalTrials.gov 和 WHO 的國際臨床試驗註冊平台。



Cochrane Clinical Answers (CCAs)

- ◆為 Cochrane 評論中的嚴謹研究提供了一個可讀、易消化、 以臨床為中心的切入點,旨在具有可操作性並為即時決策提供 資訊。
- ◆每個 CCA 都包含一個臨床問題、一個簡短答案和來自 Cochrane 評論的結果數據,這些數據與執業醫事專業人員最相關。
- ◆ 證據內容包括了敘述、數據和圖形鏈接,以清楚易明的表格 呈現。



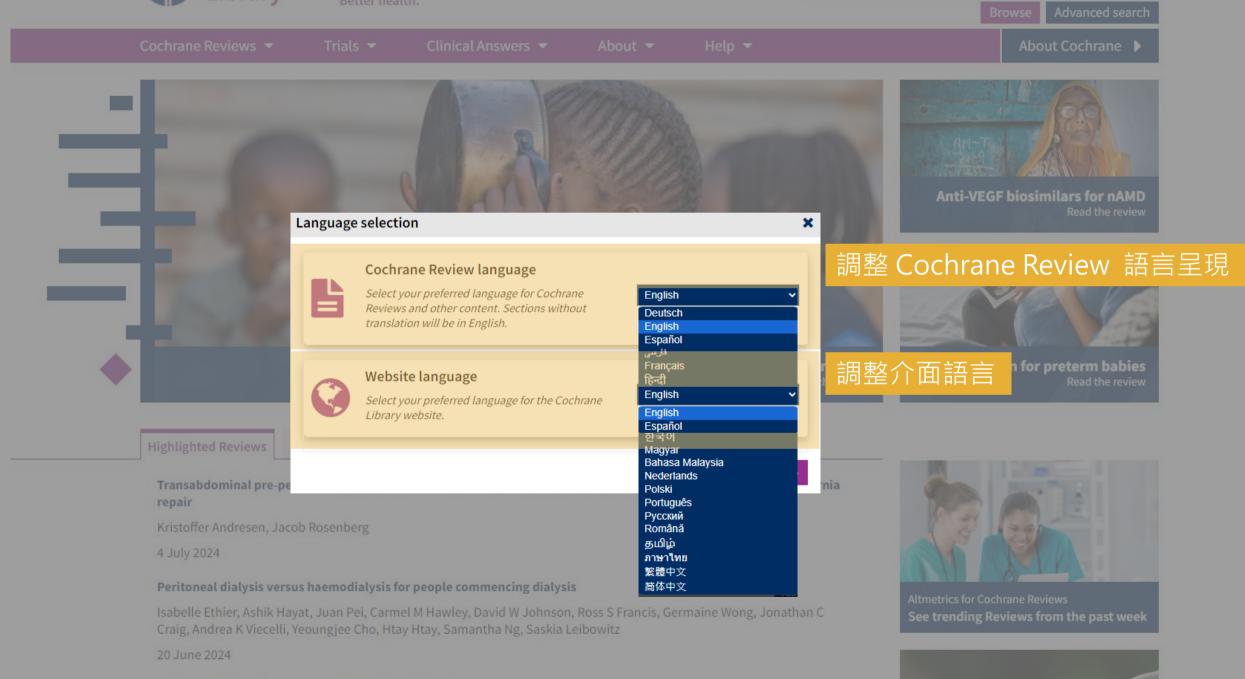
資料庫介面





Treatments for intractable constipation in childhood

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由 Cochrane Library 精選每月評論文章。

Transabdominal pre-peritoneal (TAPP) versus totally extraperitoneal (TEP) laparoscopic techniques for inguinal hernia repair

Kristoffer Andresen, Jacob Rosenberg

4 July 2024

Peritoneal dialysis versus haemodialysis for people commencing dialysis

Isabelle Ethier, Ashik Hayat, Juan Pei, Carmel M Hawley, David W Johnson, Ross S Francis, Germaine Wong, Jonathan C Craig, Andrea K Viecelli, Yeoungjee Cho, Htay Htay, Samantha Ng, Saskia Leibowitz

20 June 2024

Treatments for intractable constipation in childhood

Altmetrics for Cochrane Reviews See trending Reviews from the past week





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🖹 Review language : English 👂 Website language : English 🔒 Sign In

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BROWSE



Browse by PICOs

Browse by Topic

Browse by PICOs¹⁰

依照 Cochrane Library 對文獻標記的 P、I、C、O瀏覽 Cochrane Library 提供的系統性文獻回顧評論。 ※限 2015 年迄今之介入型評論 (intervention reviews)

Population	Intervention & Comparison	Outcome
Blood and immune system conditions	Behavioural therapies	Adverse events
Cancer	Cellular and gene therapies	Compliance with treatment
Cardiovascular conditions	Complementary and alternative therapies	Failed intervention
Digestive system conditions	Complex interventions	Function
Ear, nose and throat conditions	Educational interventions	Infection
Endocrinal, nutritional and metabolic disorders	Medical devices	Mental health
Eyes and vision	No active treatment	Mortality
Fertility, pregnancy and childbirth	Pharmacological interventions	Pain



依照不同領域主題,瀏覽 Cochrane Library 提供的系統性文獻回顧評論。

Browse by PICOs

Browse by Topic

Browse by Topic

Browse Cochrane Reviews, Protocols and Clinical Answers.

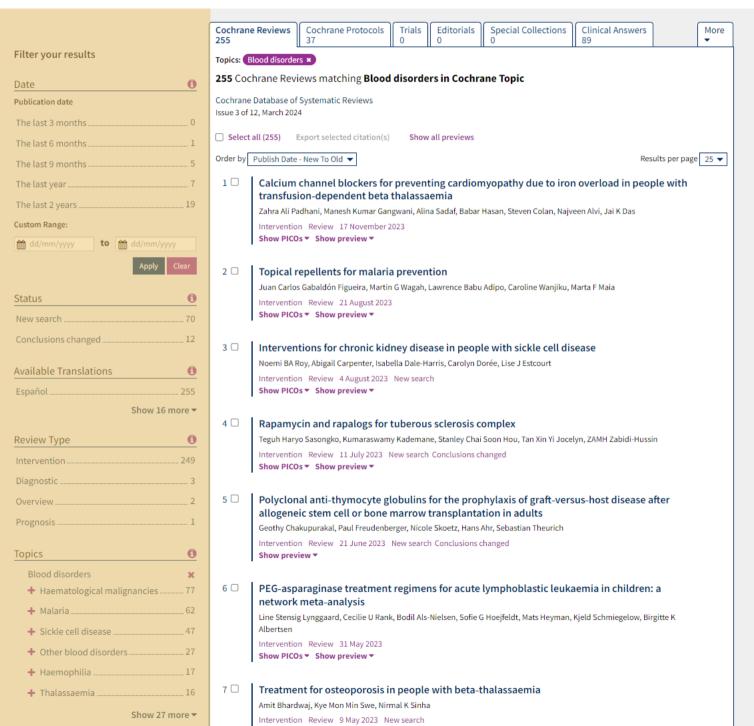
♠ Set email alerts

a	g	n
Allergy & intolerance	Gastroenterology & hepatology	Neonatal care
b	Genetic disorders	Neurology
Blood disorders 點選欲瀏覽主題	Gynaecology	0
c	h	Orthopaedics & trauma
Cancer	Health & safety at work	р
Child health	Health professional education	Pain & anaesthesia
Complementary & alternative medicine	Heart & circulation	Pregnancy & childbirth
Consumer & communication strategies	i	Public health
d	Infectious disease	r
Dentistry & oral health	Insurance medicine	Reproductive & sexual health
Developmental, psychosocial & learning	k	Rheumatology



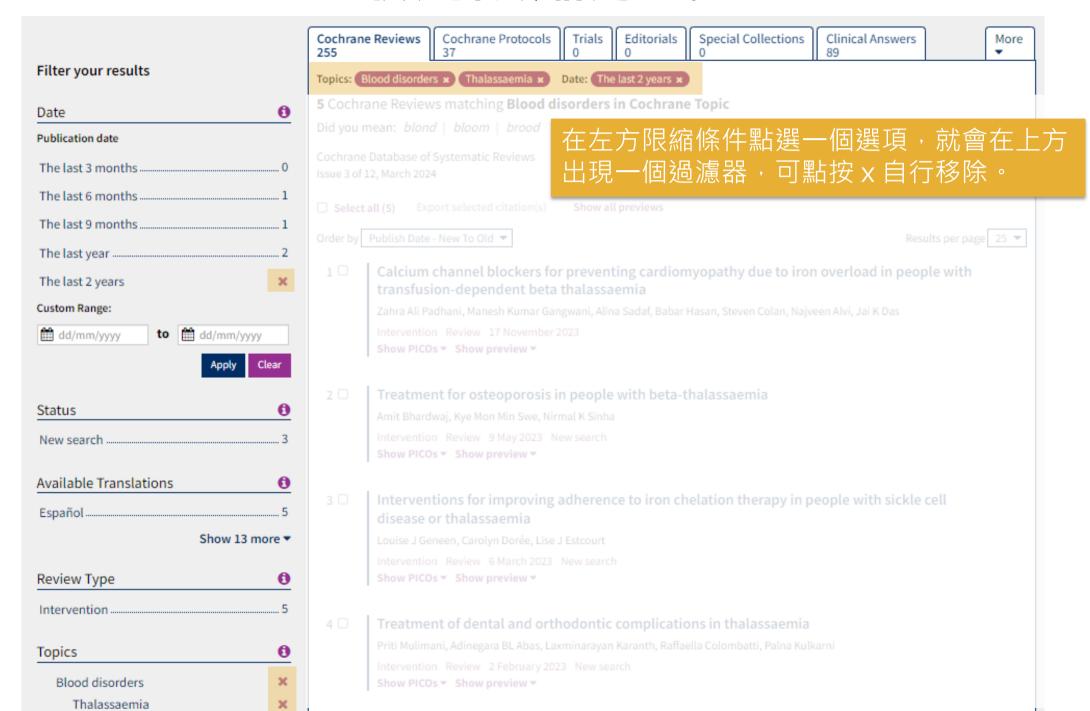
限縮方式

可依照日期、狀態、語言、Review 類型等方式 限縮檢索結果。





取消限縮方式





檢索介紹一簡易檢索



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Title Abstract Keyword

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Record Title

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Abstract

Author

Keyword

All Text

Publication Type

Source

DOI

Accession Number

Trial Registry Number

Cochrane Group

Cochrane Topic

Magnesium for preterm babies
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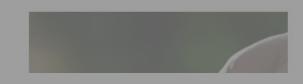
Isabelle Ethier, Ashik Hayat, Juan Pei, Carmel M Hawley, David W Johnson, Ross S Francis, Germaine Wong, Jonathan C Craig, Andrea K Viecelli, Yeoungjee Cho, Htay Htay, Samantha Ng, Saskia Leibowitz

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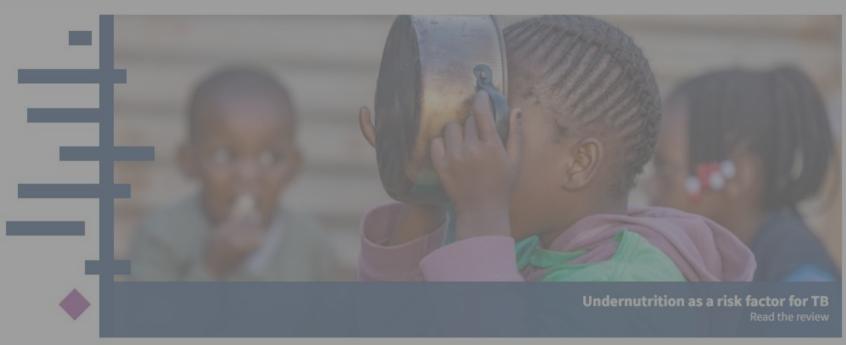
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Transabdominal pre-peritoneal (TAPP) versus totally extraperitoneal (TEP) laparoscopic techniques for inguinal hernia repair

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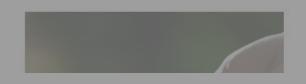
Peritoneal dialysis versus haemodialysis for people commencing dialysis

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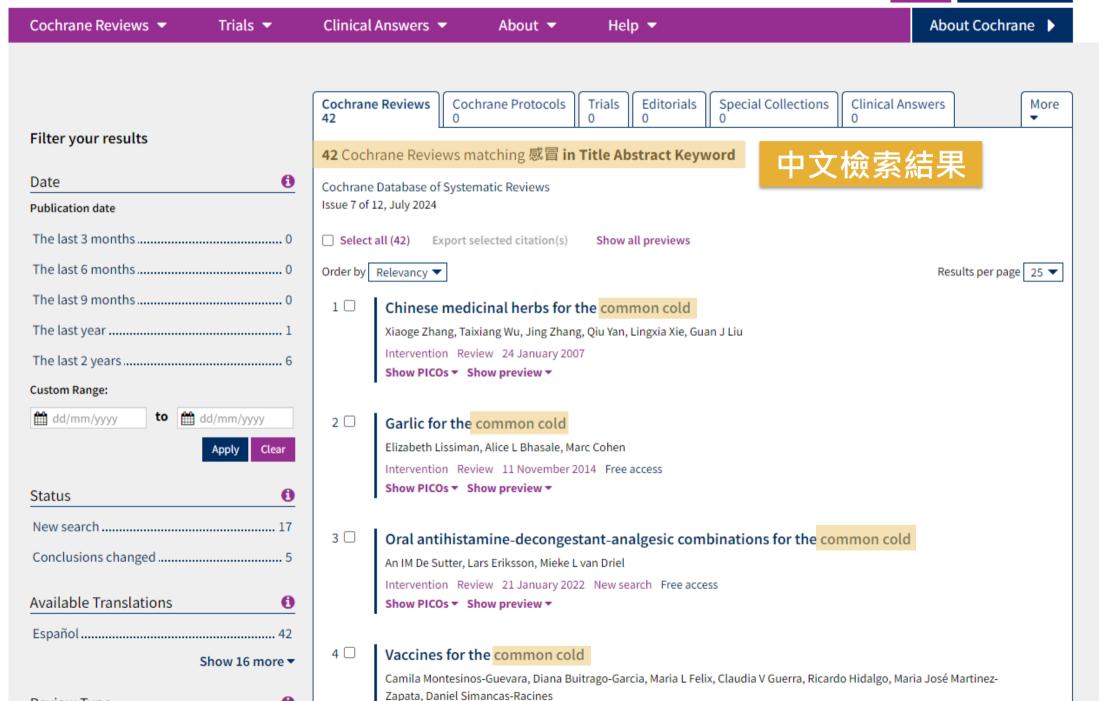




Peview Type

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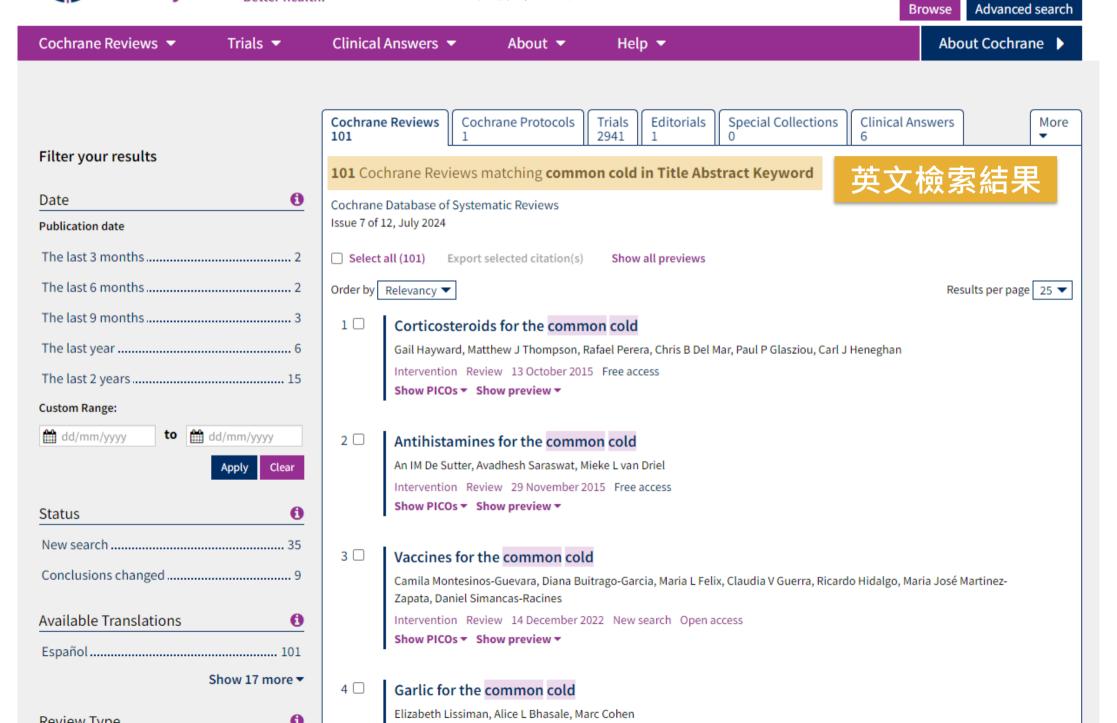






英文檢索







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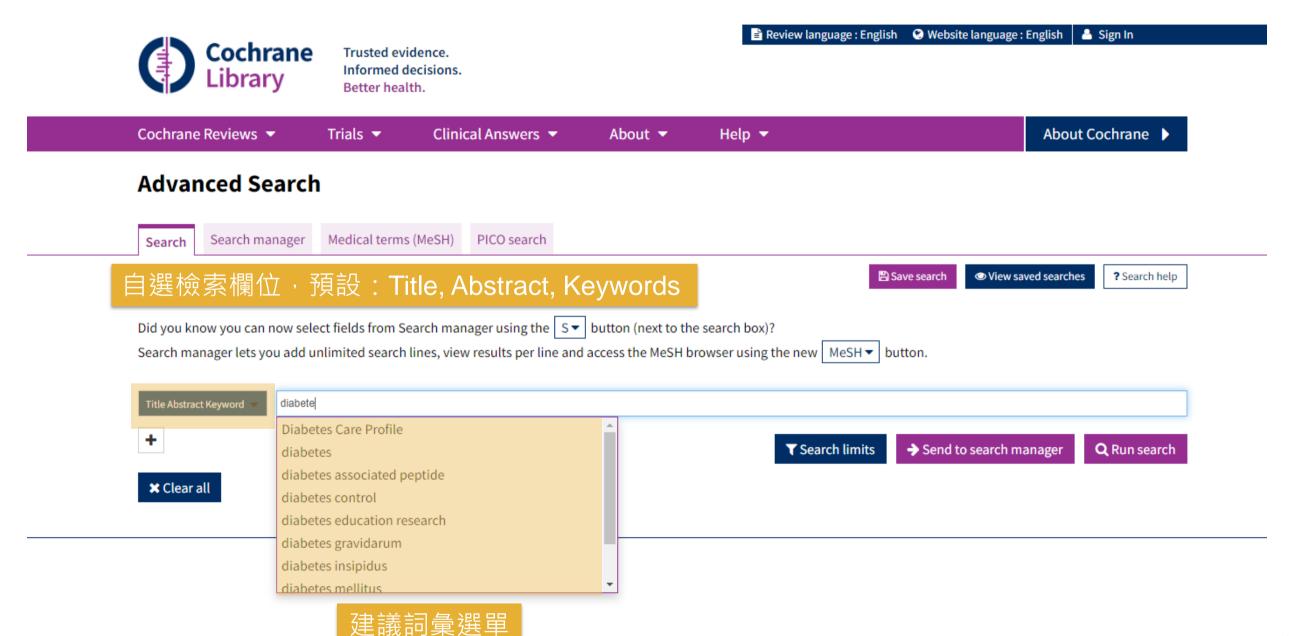
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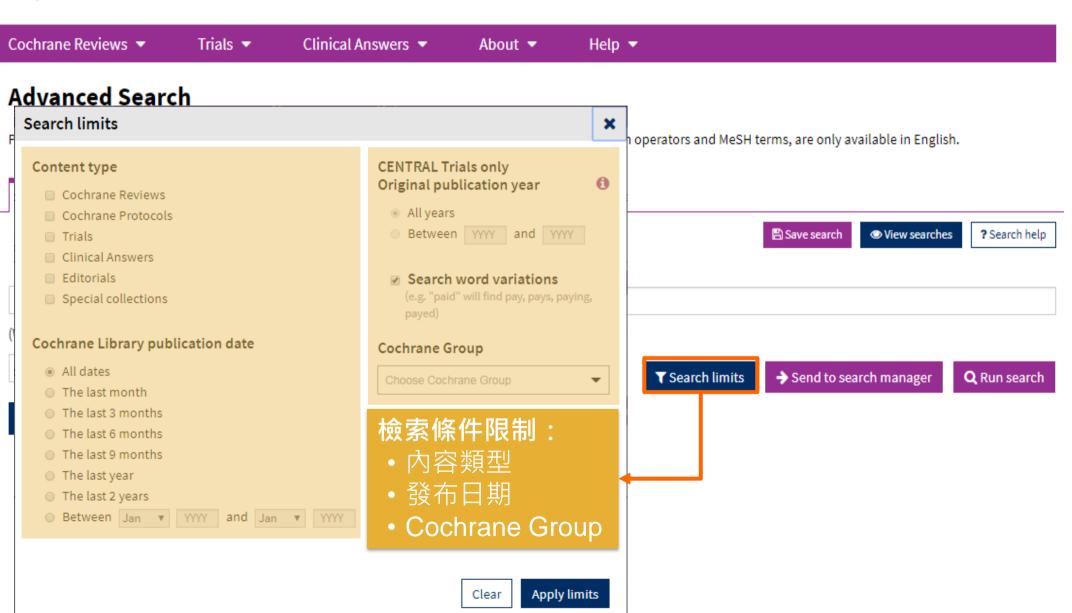
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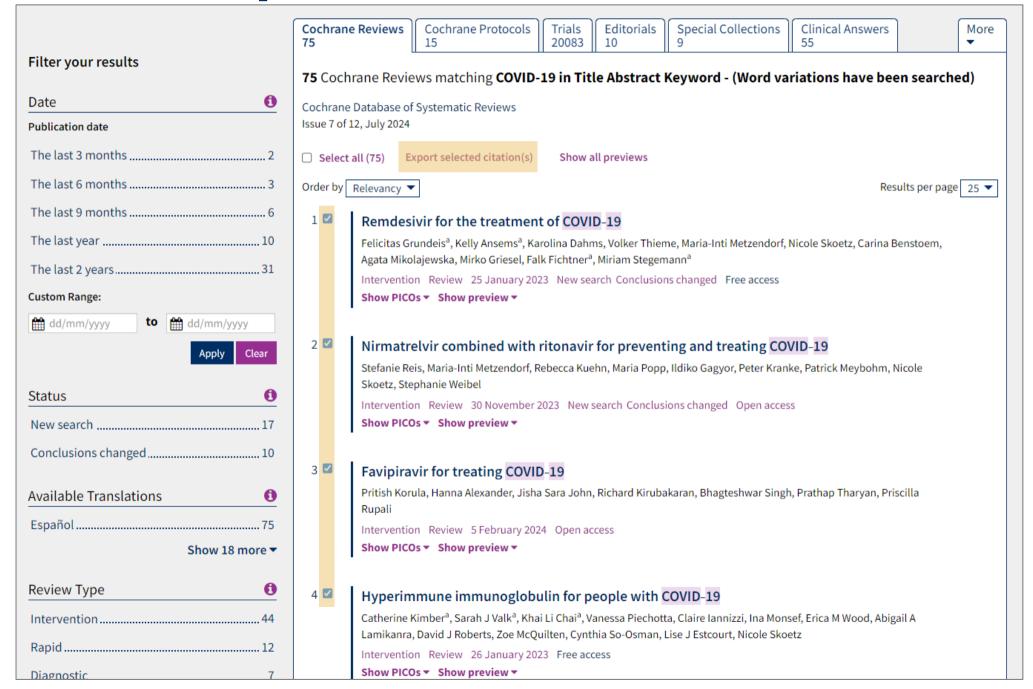




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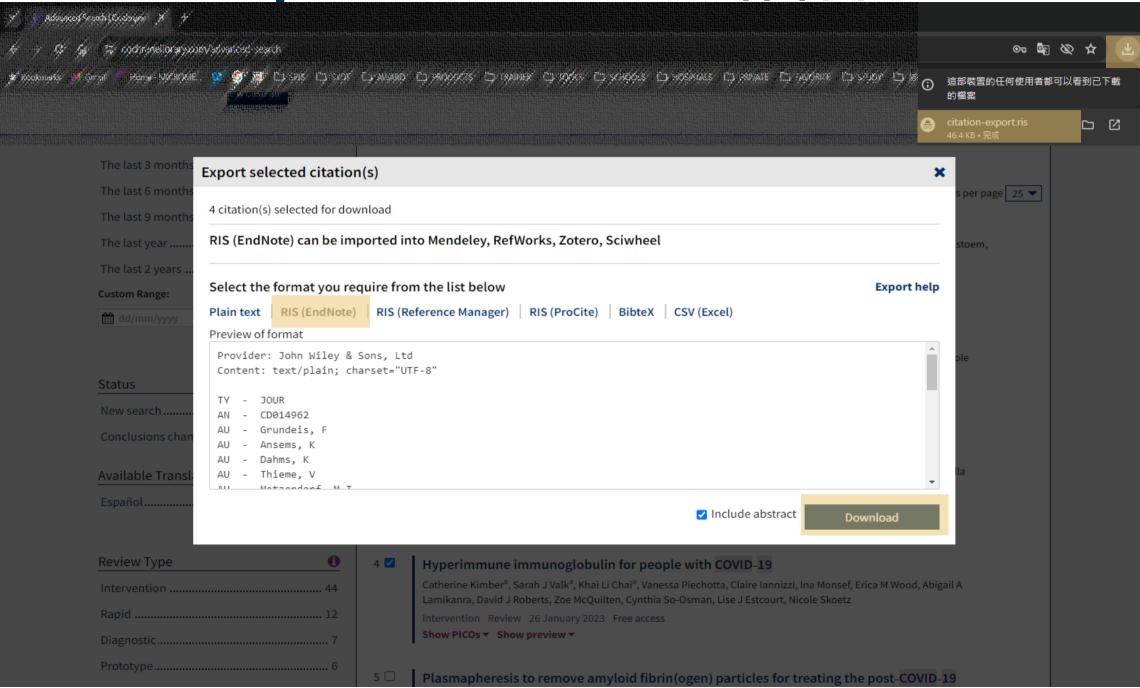


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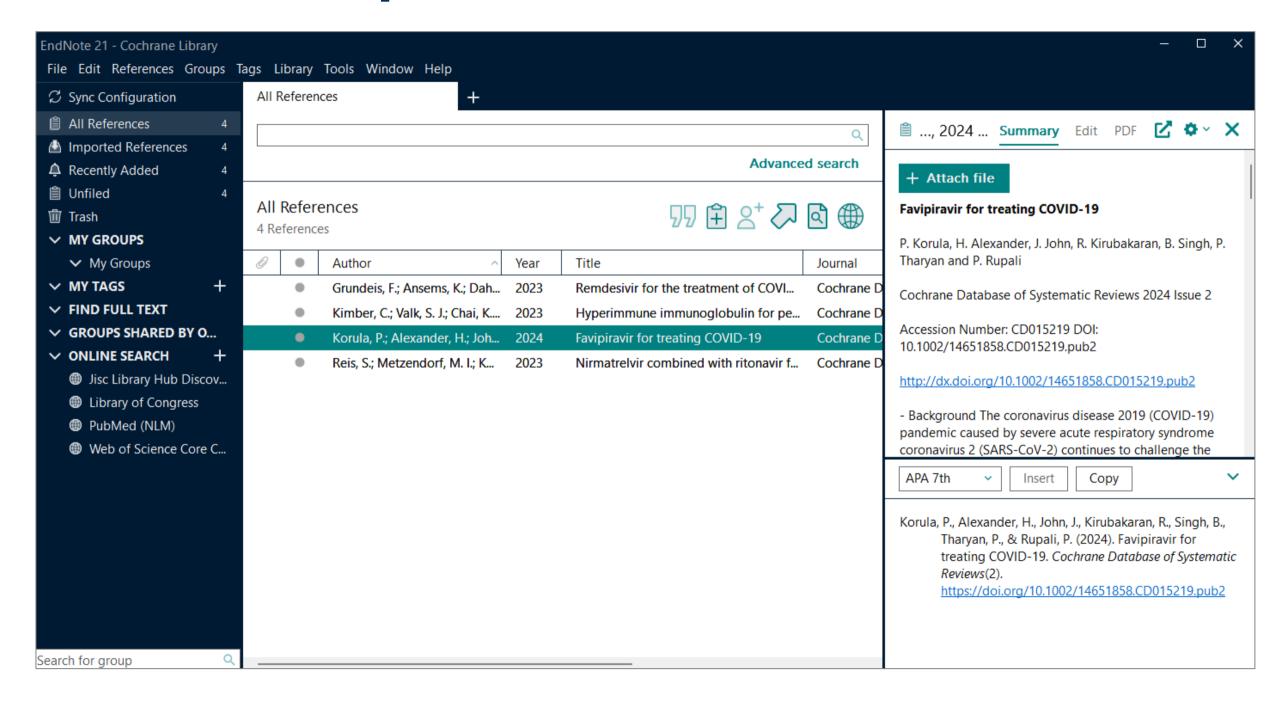


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實證醫學檢索



5As Standard EBM Steps in EBM process Formulate an answerable question Ask Acquire Track down the best evidence **A**ppraisal Critically appraise the evidence Apply Integrate with clinical expertise and patient values Audit Critically appraise the evidence





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



檢索範例

多數住院患者在住院期間內,會接受透過靜脈導 管注射輸液或藥物治療,通常例行每3至4天更 换一次,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。



檢索範例分析

多數住院患者在住院期間內,會接受透過靜脈導 管注射輸液或藥物治療,通常例行每3至4天更 换一次,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及醫材消耗,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。



檢索範例

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



檢索範例

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



使用不同檢索欄位查詢(Title Abstract Keyword)

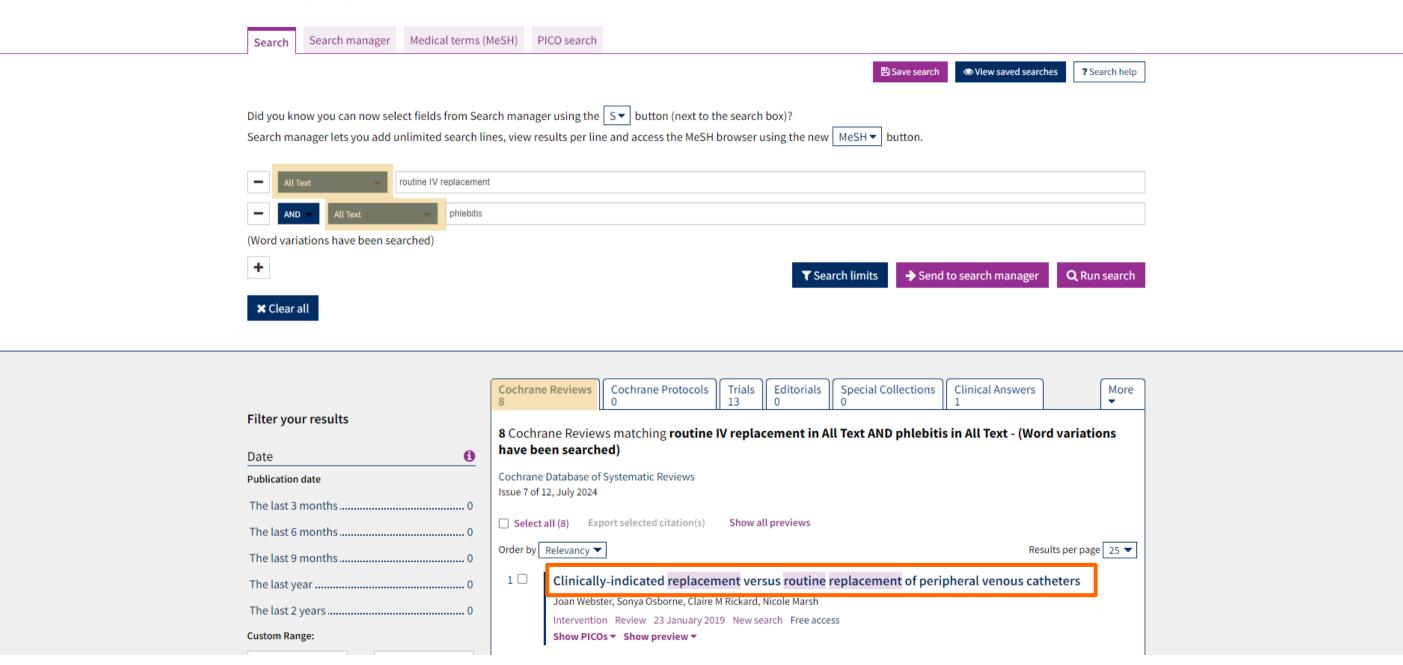
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	Save search Search help
	elds from Search manager using the S▼ button (next to the search box)? ted search lines, view results per line and access the MeSH browser using the new MeSH▼ button.
Title Abstract Keyword routing	IV replacement
AND Title Abstract Keyword	phlebitis
(Word variations have been searche	d)
+	▼ Search limits → Send to search manager Q Run search
≭ Clear all	
	Cochrane Reviews Cochrane Protocols Trials Editorials Special Collections Clinical Answers More 1 0 0 ▼
Filter your results	1 Cochrane Review matching routine IV replacement in Title Abstract Keyword AND phlebitis in Title Abstract
Date	(Word variations have been searched)
Publication date	Cochrane Database of Systematic Reviews Issue 7 of 12, July 2024
The last 3 months	
The last 6 months	Order by Relevancy Results per page 25 V
The last 9 months	
The last year	
The last 2 years	Intervention Review 23 January 2019 New search Free access
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使用不同檢索欄位查詢(All Text)

Advanced Search





全文下載

Cochrane Database of Systematic Reviews | Review - Intervention

Clinically-indicated replacement versus routine replacement of peripheral venous catheters

☑ Joan Webster, Sonya Osborne, Claire M Rickard, Nicole Marsh Authors' declarations of interest

Version published: 23 January 2019 Version history

https://doi.org/10.1002/14651858.CD007798.pub5 3



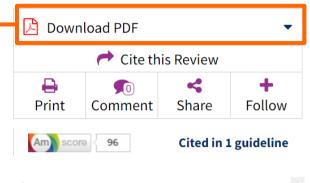
US Centers for Disease Control guidelines recommend replacement of peripheral intravenous catheters (PIVC) no more frequently than every 72 to 96 hours. Routine replacement is thought to reduce the risk of phlebitis and bloodstream infection. Catheter insertion is an unpleasant experience for patients and replacement may be unnecessary if the catheter remains functional and there are no signs of inflammation or infection. Costs associated with routine replacement may be considerable. This is the third update of a review first published in 2010.

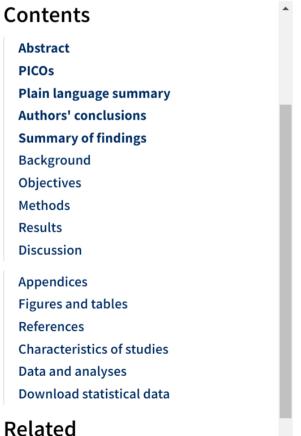
Objectives

To assess the effects of removing peripheral intravenous catheters when clinically indicated compared with removing and re-siting the catheter routinely.

Search methods

The Cochrane Vascular Information Specialist searched the Cochrane Vascular Specialised Register, CENTRAL, MEDLINE, Embase and CINAHL and World Health Organization International Clinical Trials Registry Platform and ClinicalTrials.gov trials registers to 18 April 2018. We also undertook reference checking, and contacted researchers and manufacturers to identify additional studies.

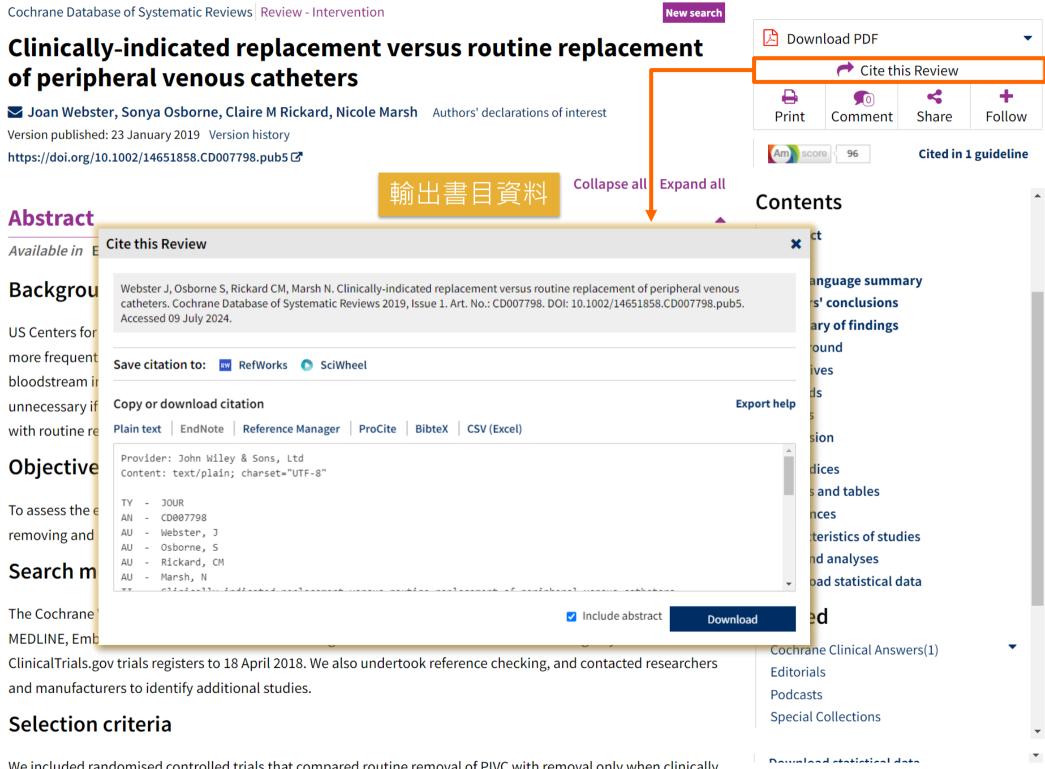




Cochrane Clinical Answers(1)

Editorials









Clinically-indicated replacement versus routine replacement of peripheral venous catheters

Joan Webster, Sonya Osborne, Claire M Rickard, Nicole Marsh Authors' declarations of interest

Version published: 23 January 2019 Version history

https://doi.org/10.1002/14651858.CD007798.pub5 &

Collapse all Expand all

Abstract

Available in English | Español | فارسي | Français | 简体中文

Background

US Centers for Disease Control guidelines recommend replacement of peripheral intravenous catheters (PIVC) no more frequently than every 72 to 96 hours. Routine replacement is thought to reduce the risk of phlebitis and bloodstream infection. Catheter insertion is an unpleasant experience for patients and replacement may be unnecessary if the catheter remains functional and there are no signs of inflammation or infection. Costs associated with routine replacement may be considerable. This is the third update of a review first published in 2010.

Objectives

To assess the effects of removing peripheral intravenous catheters when clinically indicated compared with removing and resting the catheter routinely.

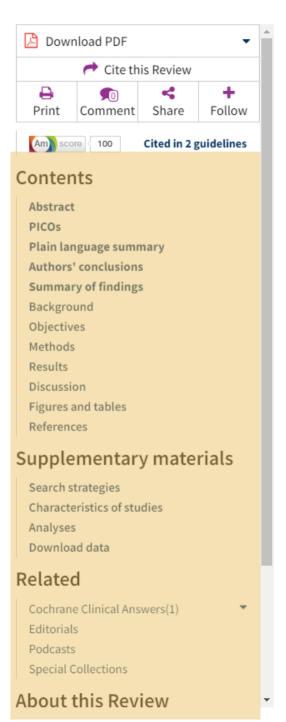
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The Cochrane Vascular Information Specialist searched the Cochrane Vascular Specialised Register, CENTRAL, MEDLINE, Embase and CINAHL and World Health Organization International Clinical Trials Registry Platform and Clinical Trials.gov trials registers to 18 April 2018. We also undertook reference checking, and contacted researchers and manufacturers to identify additional studies.

Selection criteria

We included randomised controlled trials that compared routine removal of PIVC with removal only when clinically indicated, in hospitalised or community-dwelling patients receiving continuous or intermittent infusions.

Data collection and analysis





Plain Language Summary

Plain language summary

Available in English | Deutsch | Español | فارسى | Français | Bahasa Malaysia | Polski | Русский | 简体中文 繁體中文



Replacing a per replacement

Review question

We reviewed the evide only if there were sign

Background

Most hospital patients
An intravenous cathet
allow administration of
three to four days to to
discomfort to patients

Study characteristics

In April 2018 we search change) with changing blood stream infection blockage. We included

Key results

We found no clear diff stream infection from

Plain language summary

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依臨床狀況更換與常規更換周邊靜脈導管之比較

回顧問題

我們回顧實證報告關於定期更換導管(每3至4天)及只有在導管出現問題或症狀時才更換導管之差異。

研究背景

大多數醫院患者在住院期間,通常會通過外周靜脈導管接受液體或藥物治療。靜脈導管 (也稱為靜脈滴注、靜脈或靜脈插管) 為放置在靜脈中的一個短且空心的管路,用於將藥物、液體或營養物質直接輸送到血液中。這些導管通常每三到四天更換一次,以防止靜脈刺激或血液感染。然而,更換導管可能會給患者帶來不適,而且成本相當高。 表於2010的評論文章。

研究特點

2018年4月,我們尋找隨機對照試驗 (RCT),僅在出現併發症或治療完成的情況下才更換導管及每72至96小時更換導管 (常規更換)進行比較。我們測量導管相關的血液感染、靜脈炎和其他與外周導管有關的問題,如局部感染和導管堵塞。我們總共發現了9項研究,包含此次納入的兩項新研究,有7412名參與者。

主要結果

我們發現,導管相關的血液感染率、靜脈炎(靜脈炎症)、任何原因引起的血液流感染、局部感染、死亡率或疼痛的發生率並沒有顯著差異。依照臨床狀況更換導管,並無法確定局部感染是否因此減少或增加。常規更換導管者,滲漏(液體滲入導管周圍的組織)和導管堵塞(無法通過導管注入液體或藥物)可能會減少。在依照臨床徵兆才更換導管者,成本降低。研究結果的假設,"每名患者的導管重新置放管路次數",及,"滿意度"並未包括在任何研究報告評價中

證據品質

證據整體的品質被批判對大多數結果是模稜兩可的,這研究的結果無法說服我們。不確定性主要歸因由於患者對靜脈炎等結果進行評估,這些結果可能或也可能不影響他們關於問題是否存在的決定。





Translation notes

依臨床狀況更換與常規更換周邊靜脈導管之比較

回顧問題

我們回顧實證報告關於定期更換導管(每3至4天)及只有在導管出現問題或症狀時才更換導管之差異。

研究背景

大多數醫院患者在住院期間,通常會通過外周靜脈導管接受液體或藥物治療。靜脈導管(也稱為靜脈滴注、靜脈或靜脈插

管) 為放置在靜脈中的一個短且空極 換一次, 以防止靜脈刺激或血液感 表於2010的評論文章。

研究特點

2018年4月,我們尋找隨機對照試驗 換)進行比較。我們測量導管相關的 現了9項研究,包含此次納入的兩項

主要結果

我們發現,導管相關的血液感染率

沒有顯著差異。依照臨床狀況更換等点,並無法確定可能逐步是自己的概念。如何加。形況更接等自有,廖MM (IQ 程序) 八等自己 園的組織) 和導管堵塞 (無法通過導管注入液體或藥物) 可能會減少。在依照臨床徵兆才更換導管者, 成本降低。研究結果的 假設, "每名患者的導管重新置放管路次數", 及, "滿意度"並未包括在任何研究報告評價中

證據品質

證據整體的品質被批判對大多數結果是模稜兩可的,這研究的結果無法說服我們。不確定性主要歸因由於患者對靜脈炎等結果進行評估,這些結果可能或也可能不影響他們關於問題是否存在的決定。



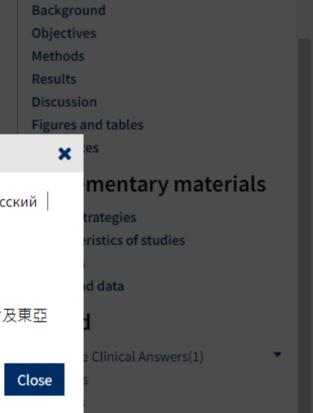
翻譯者: 鄒季蓉

服務單位:大林慈濟醫院護理部專科護理師內科組

職稱:專科護理師

本翻譯計畫由臺北醫學大學考科藍臺灣研究中心(Cochrane Taiwan)、台灣實證醫學學會及東亞

考科藍聯盟(EACA)統籌執行 聯絡E-mail: cochranetaiwan@tmu.edu.tw



Plain language summary Authors' conclusions

Summary of findings

About this Review

(i) Information

Version history

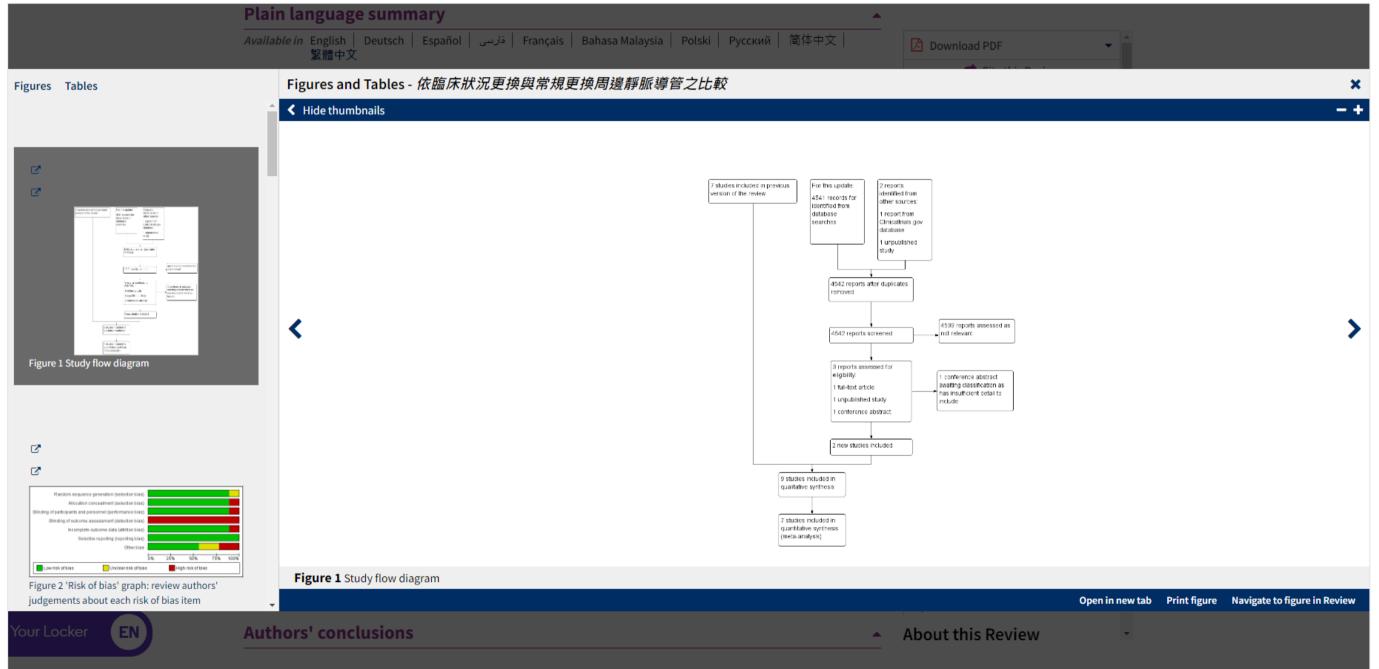
Related content

A Keywords (MeSH, PICOs)

Authors .



Figures and Tables



Special Collections 68



Search Strategies

Appendices

Appendix 1. Search strategies

Cochrane Central Register of Controlled Trials (1 January 2015 to 18 April 2018)

#1 MESH DESCRIPTOR Infusions, Intravenous EXPLODE ALL TREES
9657

#2 MESH DESCRIPTOR Catheters, Indwelling EXPLODE ALL TREES 933

#3 MESH DESCRIPTOR Catheterization, Peripheral EXPLODE ALL TREES 804

#4 catheter*:TI,AB,KY 19185

#5 cannul*:TI,AB,KY 2736

#6 (iv near2 (therapy or treatment or device)):TI,AB,KY 817

#7 (intravenous near2 (therapy or treatment or device)):TI,AB,KY 2643

#8 #1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7 32660

#9 MESH DESCRIPTOR Device Removal EXPLODE ALL TREES 340

#10 change:TI,AB,KY 100383

#11 routine:TI,AB,KY 22763

#12 (resit* or re-sit*):TI,AB,KY 28

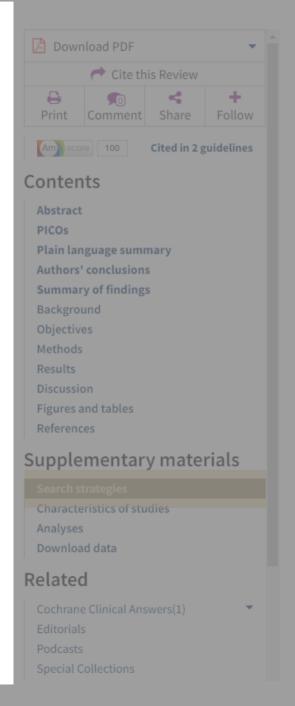
#13 replace* :TI,AB,KY 23906

#14 remov* 18920

#15 #9 OR #10 OR #11 OR #12 OR #13 OR #14 157711

#16 #8 AND #15 6531

#17 01/01/2015 TO 17/04/2018:CD 301940





Version history

Version history

Published	Title	Stage	Authors	Version
2019 Jan 23	Clinically-indicated replacement versus routine	Review	Joan Webster, Sonya Osborne,	https://doi.org/10.1002/1465
Show revisions	replacement of peripheral venous catheters		Claire M Rickard, Nicole Marsh	858.CD007798.pub5 🗗
2015 Aug 14	Clinically-indicated replacement versus routine	Review	Joan Webster, Sonya Osborne,	https://doi.org/10.1002/1465
Show revisions	replacement of peripheral venous catheters		Claire M Rickard, Karen New	858.CD007798.pub4 ☐
2013 Apr 30	Clinically-indicated replacement versus routine	Review	Joan Webster, Sonya Osborne,	https://doi.org/10.1002/1465
Show revisions	replacement of peripheral venous catheters		Claire M Rickard, Karen New	858.CD007798.pub3
2010 Mar 17	Clinically-indicated replacement versus routine	Review	Joan Webster, Sonya Osborne,	https://doi.org/10.1002/1465
Show revisions	replacement of peripheral venous catheters		Claire Rickard, Jennifer Hall	858.CD007798.pub2
2009 Apr 15	Clinically indicated replacement versus routine	Protocol	Joan Webster, Sonya Osborne,	https://doi.org/10.1002/146
Show revisions	replacement of peripheral venous catheters		Jennifer Hall, Claire Rickard	858.CD007798 ♂

Search strategies

Supplementary materials

Plain language summary Authors' conclusions Summary of findings

Jearen strategies

Figures and tables

Characteristics of studies

Analyses

References

Abstract PICOs

Background Objectives Methods Results Discussion

Download data

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(i) Information

🕰 Authors

Version history

A Keywords (MeSH, PICOs)

• Related content

文 Translation notes

🦧 Request permissions

Differences between protocol and review

2018 update

- We added funding source; ethics approval and consent; and prospective registration on a clinical trials register; to our data extraction tool
- We also added the following outcome to the 'Summary of Findings' table:
 - all-cause blood stream infection

Previous updates

We changed the primary outcome to catheter-related bloodstream infection; and added all-cause bloodstream infection as a separate primary outcome. This was to more closely differentiate between the two outcomes. The methodological quality assessment of the included studies was updated to the Cochrane Collaboration tool for assessing risk of bias (Higgins 2017).



MESH SEARCH



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。





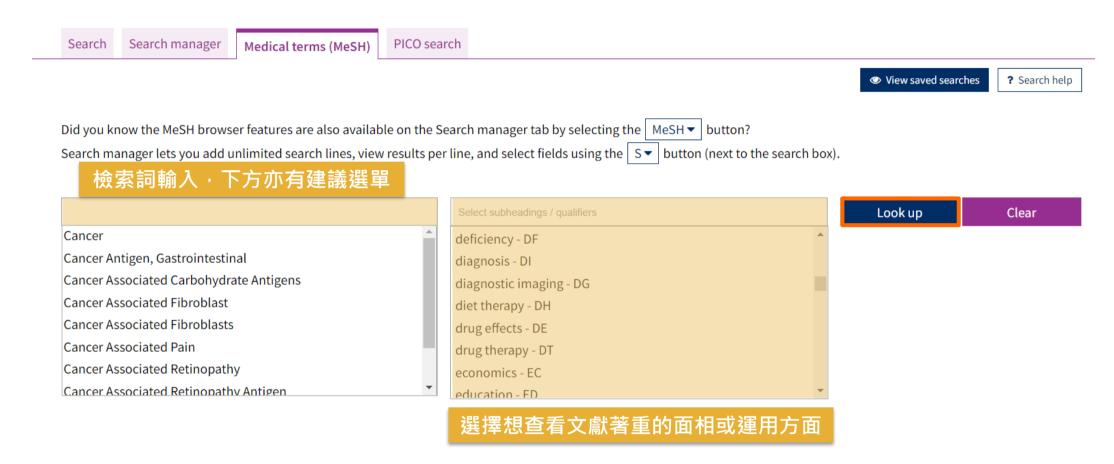
使用 MeSH 的好處

- 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
 - 使用同義詞也可準確查詢出相關文獻資料
- 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)。



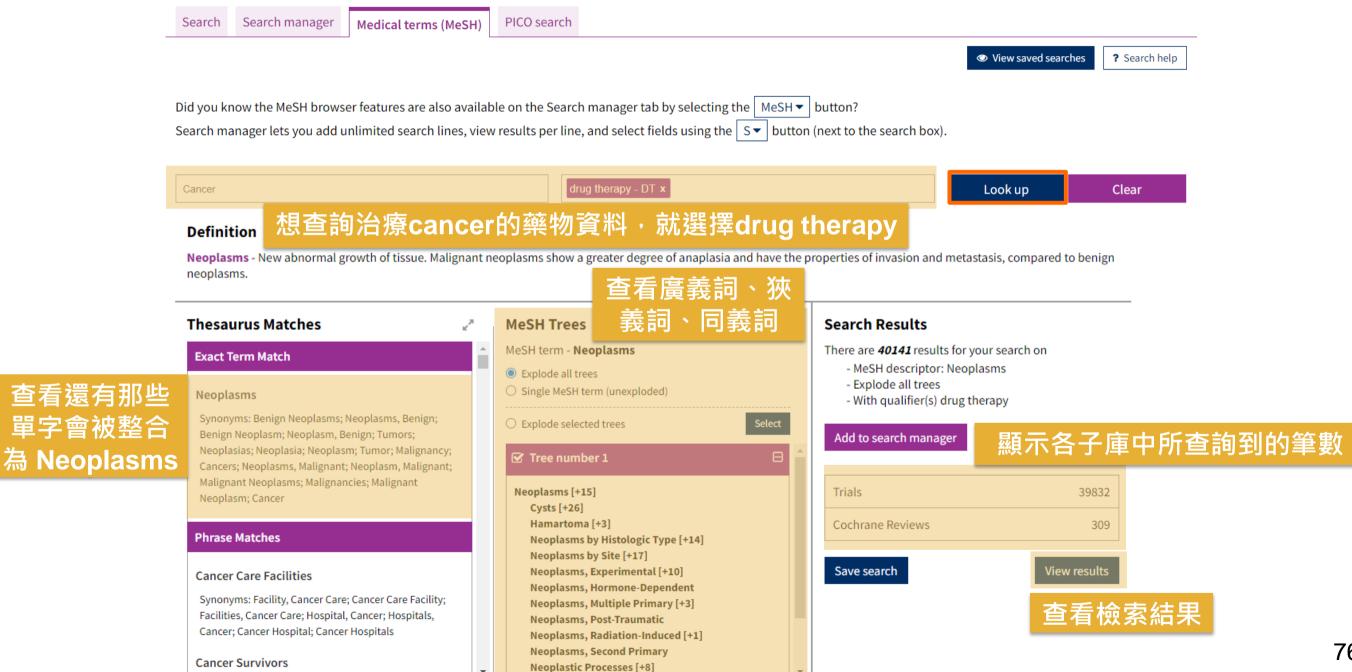
MeSH Search

Advanced Search

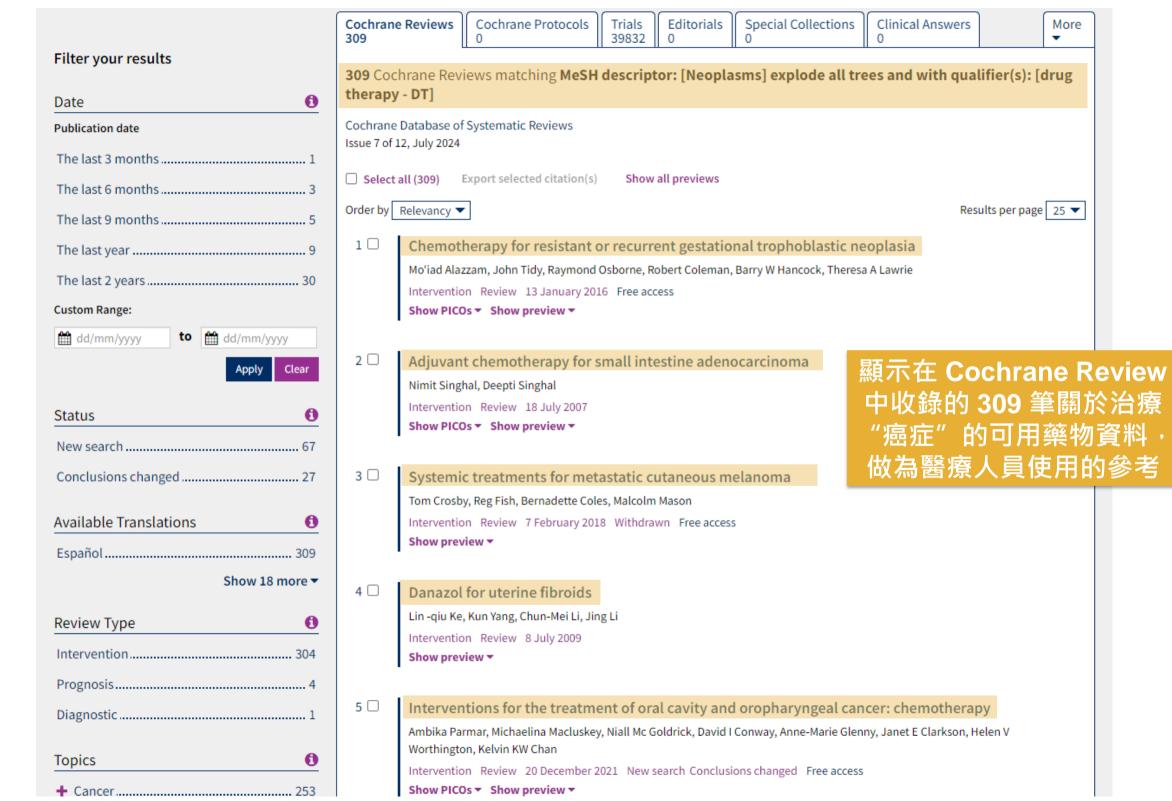




Advanced Search





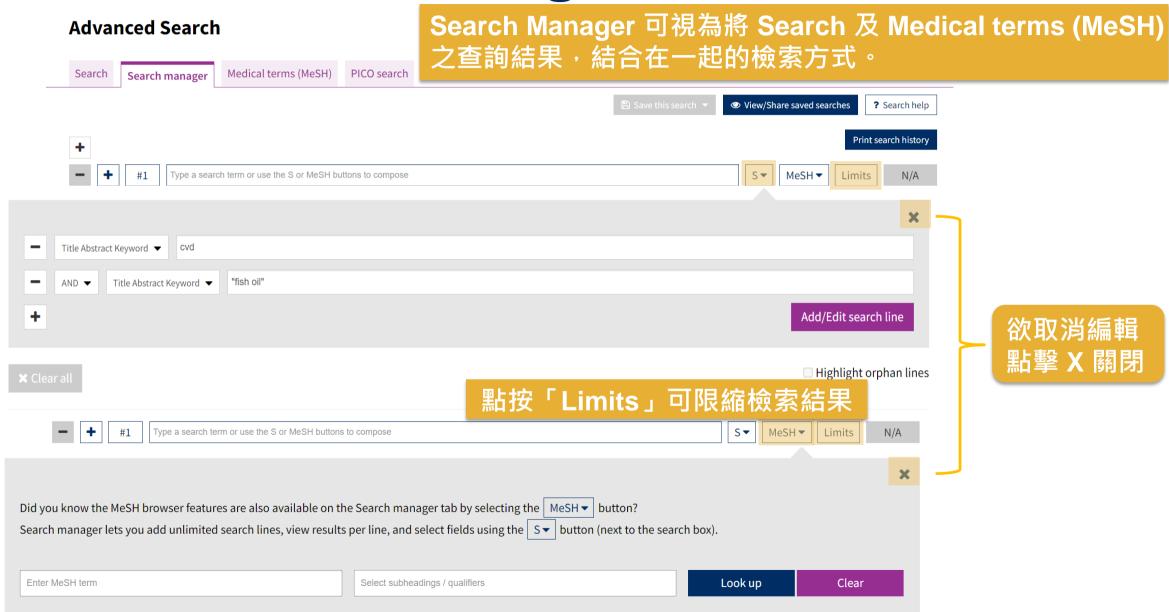




SEARCH MANAGER

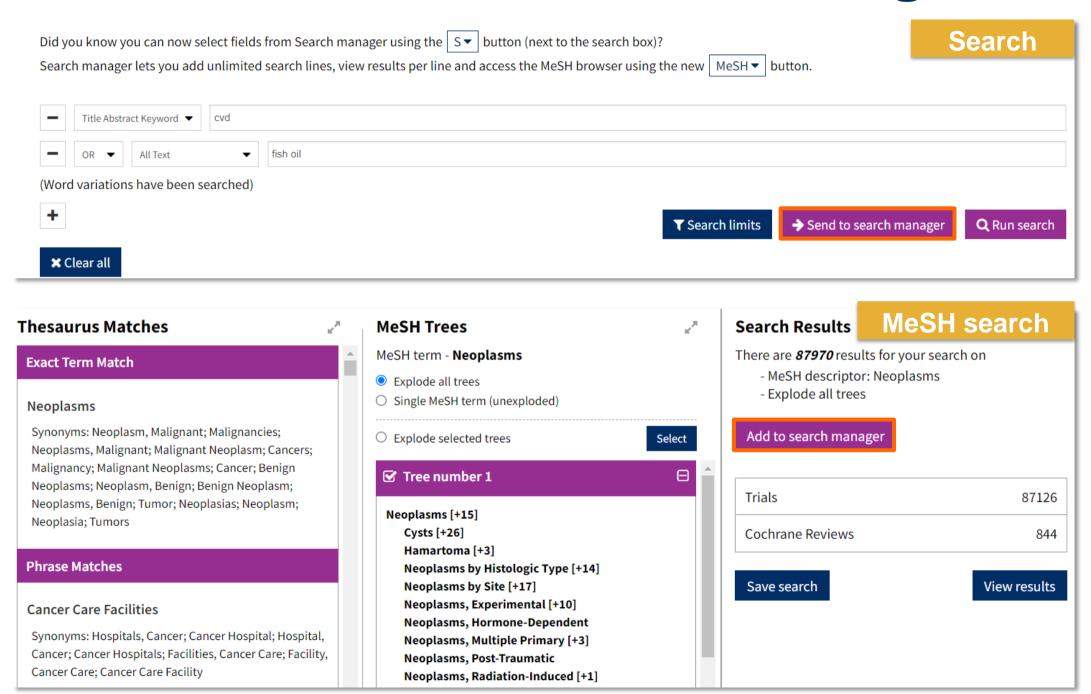


Search Manager 內檢索



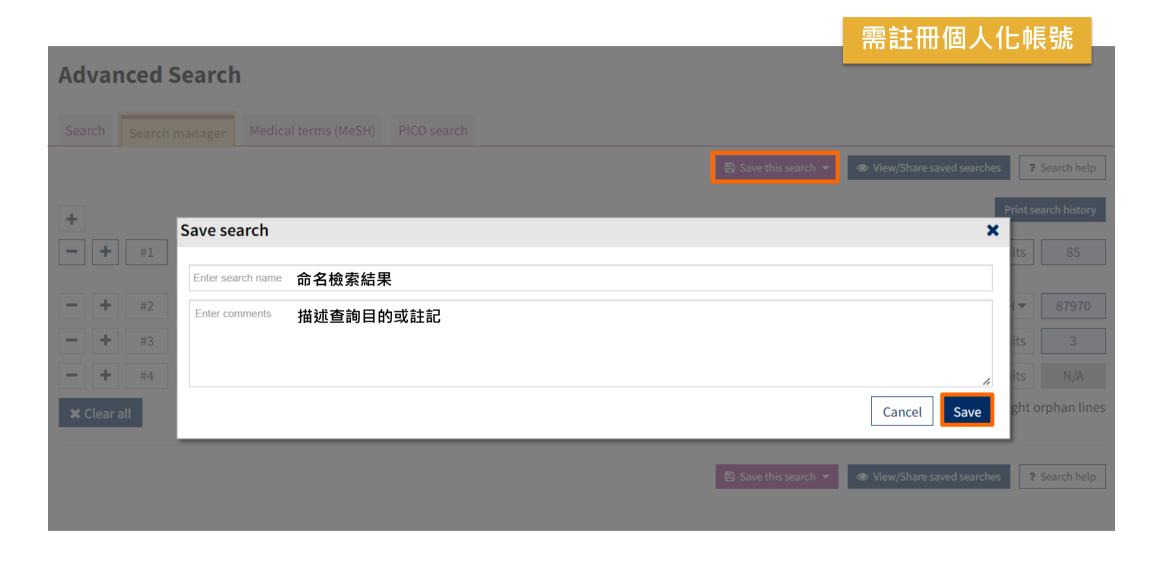


Send / Add to Search Manager





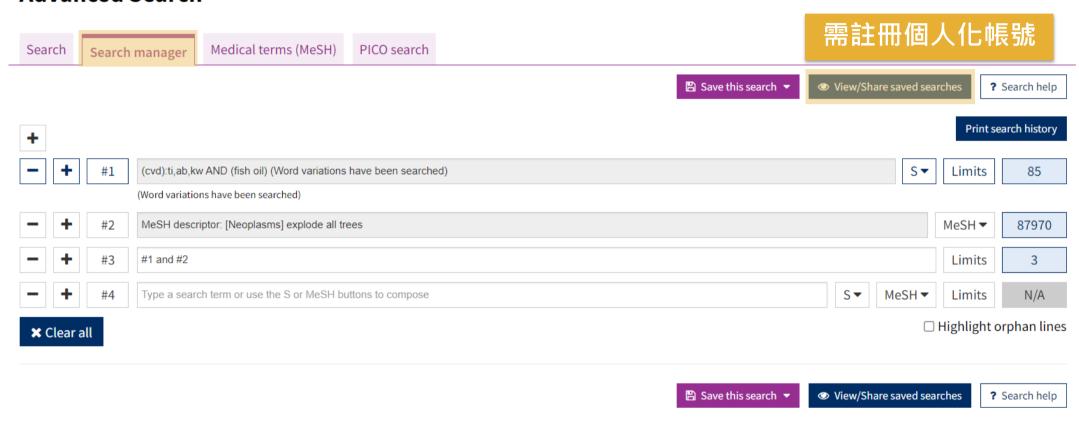
儲存檢索策略





查看已儲存檢索策略

Advanced Search



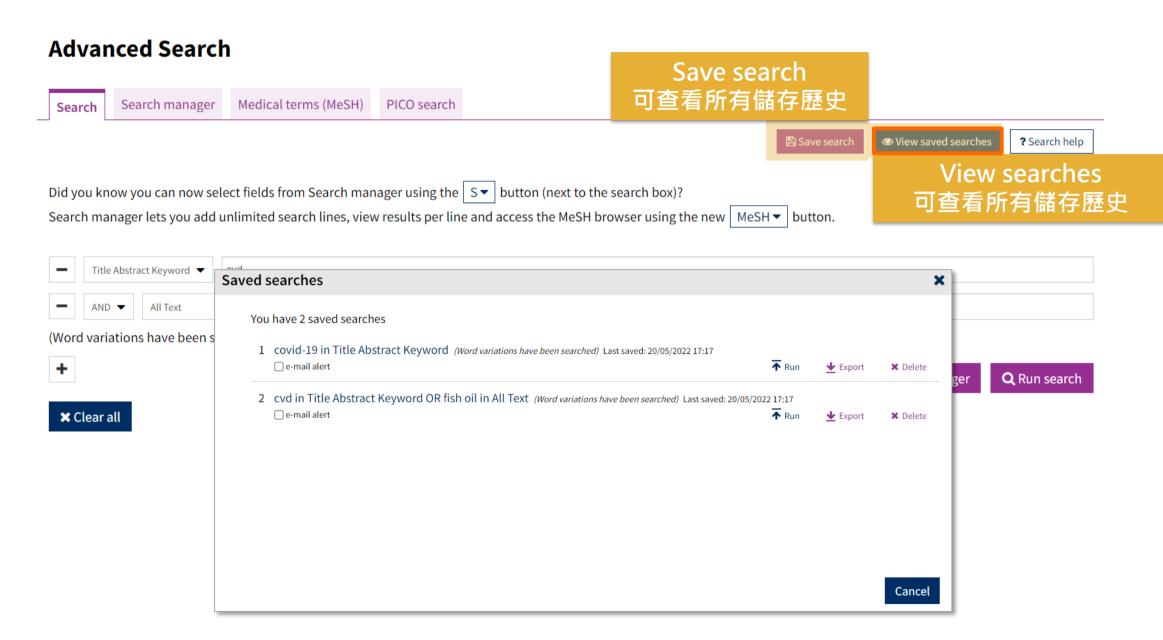


查看已儲存檢索策略





在 Search 中儲存/查看檢索結果





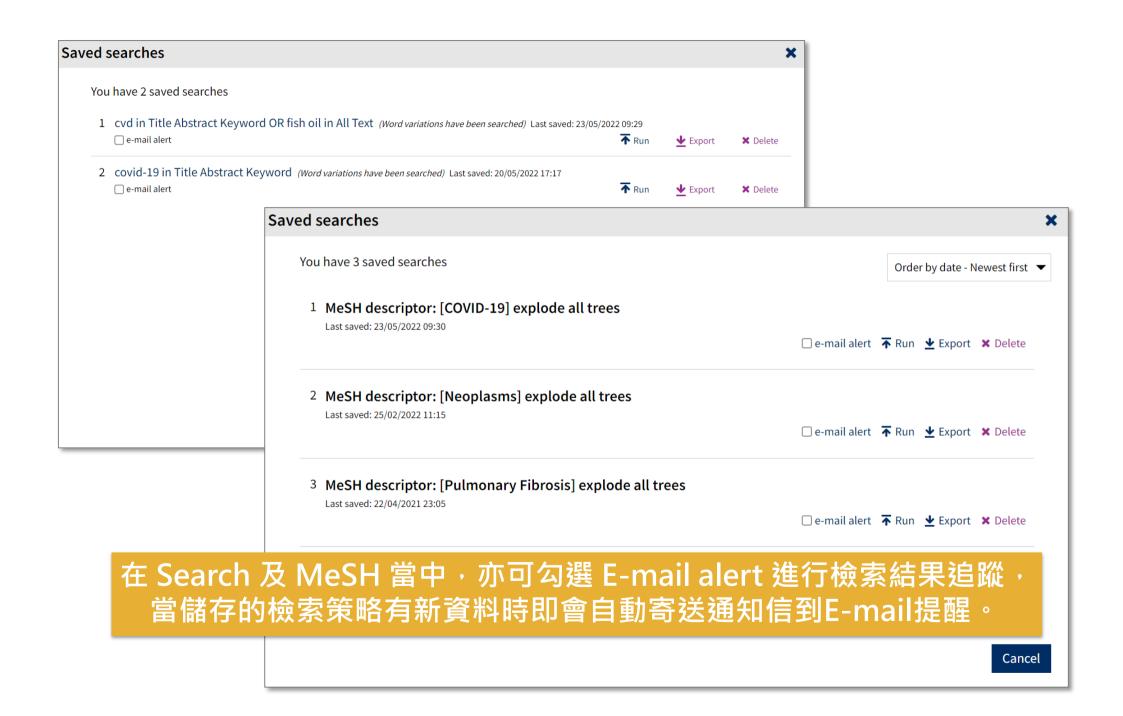
Synonyms: Hospitals, Cancer; Cancer Hospital; Hospital,

在 MeSH Search 中儲存/查看檢索結果

arch Search manager Medical ter	ms (MeSH)	PICO search						
					View saved search	? Search h		
you know the MeSH browser features are	e also available	e on the Search manager tab by selecting t	ne MeSH▼ button	1?				
rch manager lets you add unlimited sear	ch lines, view i	results per line, and select fields using the	S▼ button (next to	the search box).				
pplasms		Select subheadings / qualifiers			Look up	Clear		
efinition								
eoplasms. hesaurus Matches	الري	MeSH Trees	₂ 7	Search Resul	+c			
			к.		results for your searc	h on		
Exact Term Match	Í	Explode all trees	Explode all trees - MeSH descriptor: Neoplasms					
Neoplasms		O Single MeSH term (unexploded)		- Explode all	trees			
Synonyms: Neoplasm, Malignant; Malignancies; Neoplasms, Malignant; Malignant Neoplasm; Cancers; Malignancy; Malignant Neoplasms; Cancer; Benign Neoplasms; Neoplasm, Benign; Benign Neoplasm; Neoplasms, Benign; Tumor; Neoplasias; Neoplasm;		Explode selected trees	O Explode selected trees Select Add			d to search manager		
		☑ Tree number 1						
		Neoplasms [+15]		Trials		87126		
Neoplasia; Tumors		Cysts [+26]		Cochrane Revie	ews	844		
Phrase Matches		Hamartoma [+3] Neoplasms by Histologic Type [+14]						
Cancer Care Facilities		Neoplasms by Site [+17] Neoplasms, Experimental [+10]		Save search		View result		

Neoplasms, Multiple Primary [+3]







PICO SEARCH



PICO Search



- 搜尋範圍:預期將 2015 年迄今的 Intervention Reviews 介入型評論全數納入。
- 為獨立頁面,尚未與 Search Manager 整合;
 亦不提供檢索歷史與儲存檢索策略功能。



PICO Search - 輸入檢索詞

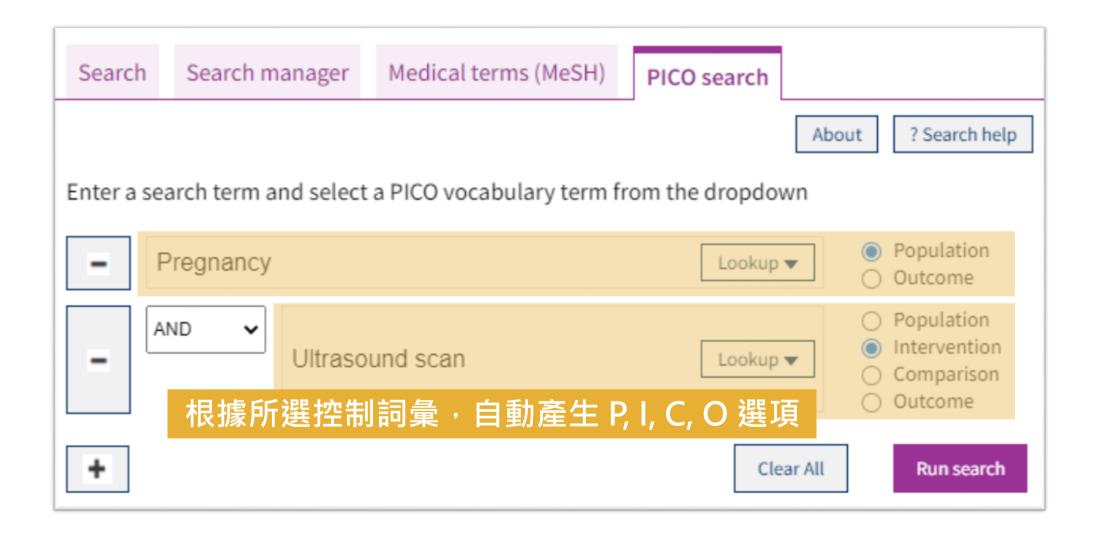




- 1. 必須搭配控制詞彙選單。
- 2. 選單含相似詞、同義詞。
- 3. 若在控制詞彙選單中 沒有符合需求的字詞:
 - 可將檢索策略置換為其他 P, I, C, O項目。 例:原將P設為檢索條件,但未找到相關詞 彙時,改將I設為檢索條件。
 - 利用Look up查看完整的同義詞、相關詞、 廣義詞、狹義詞。



PICO Search - 檢索選項





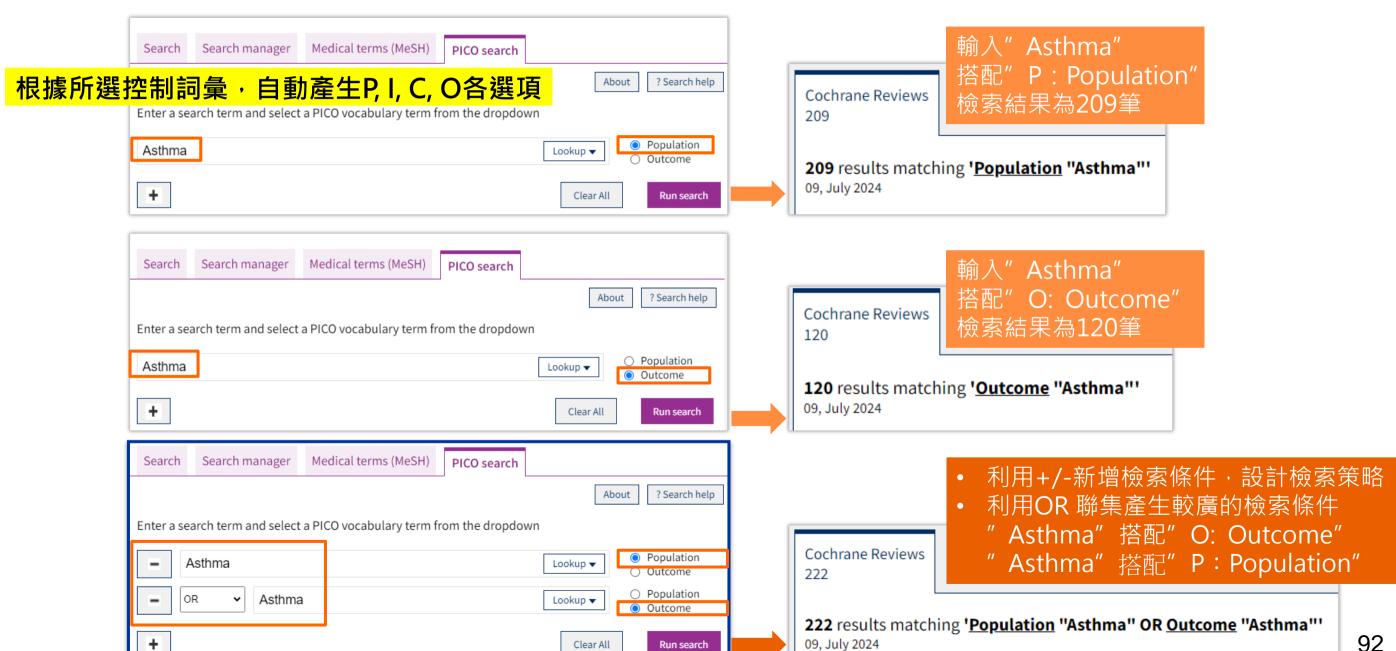
PICO Search - 檢索技巧

Search Search manager Medical terms (MeSH)	Cochrane Reviews 14		
Enter a search term and select a PICO vocabulary term from the dropdown	14 results matching 'Population "Pregnancy " AND Comparison "Ultrasound scan" 10, July 2024		
■ Pregnancy Lookup ▼ ● Population Outcome	☐ Select all (14) Export selected citation(s) Show all PICOs		
AND V Deputation Intervention	Order By Relevancy ▼ Results per page 25 ▼		
Ultrasound scan	1 □ Cervical assessment by ultrasound for preventing preterm delivery ShowPICOs 25 September 2019		
+ Clear All Run search	2 ☐ Amniotic fluid index versus single deepest vertical pocket as a screening test for preventing adverse pregnancy outcome ShowPICOs ▼ 01 March 2008		
Search Search manager Medical terms (MeSH) PICO search About ? Search help	3 ☐ Fetal and umbilical Doppler ultrasound in normal pregnancy ShowPICOs ▼ 15 April 2015		
Enter a search term and select a PICO vocabulary term from the dropdown	4 □ Utero-placental Doppler ultrasound for improving pregnancy outcome ShowPICOs ▼ 20 July 2010		
Pregnancy Lookup ▼ Population Outcome	5 □ Fetal and umbilical Doppler ultrasound in high-risk pregnancies ShowPICOs ▼ 13 June 2017		
AND ✓ Ultrasound scan Lookup ▼ O Population O Intervention O Comparison O Outcome	6 □ Interventions for suspected placenta praevia ShowPICOs 01 January 2000		
Clear All Run search	7 □ Routine vaginal examinations compared to other methods for assessing progress of labour to improve outcomes for women and babies at term ShowPICOs ▼ 04 March 2022		

因 PICO 中 Intervention 及 Comparison 特性, 檢索時選擇任一項目,皆會產生聯集(I OR C)的檢索結果。

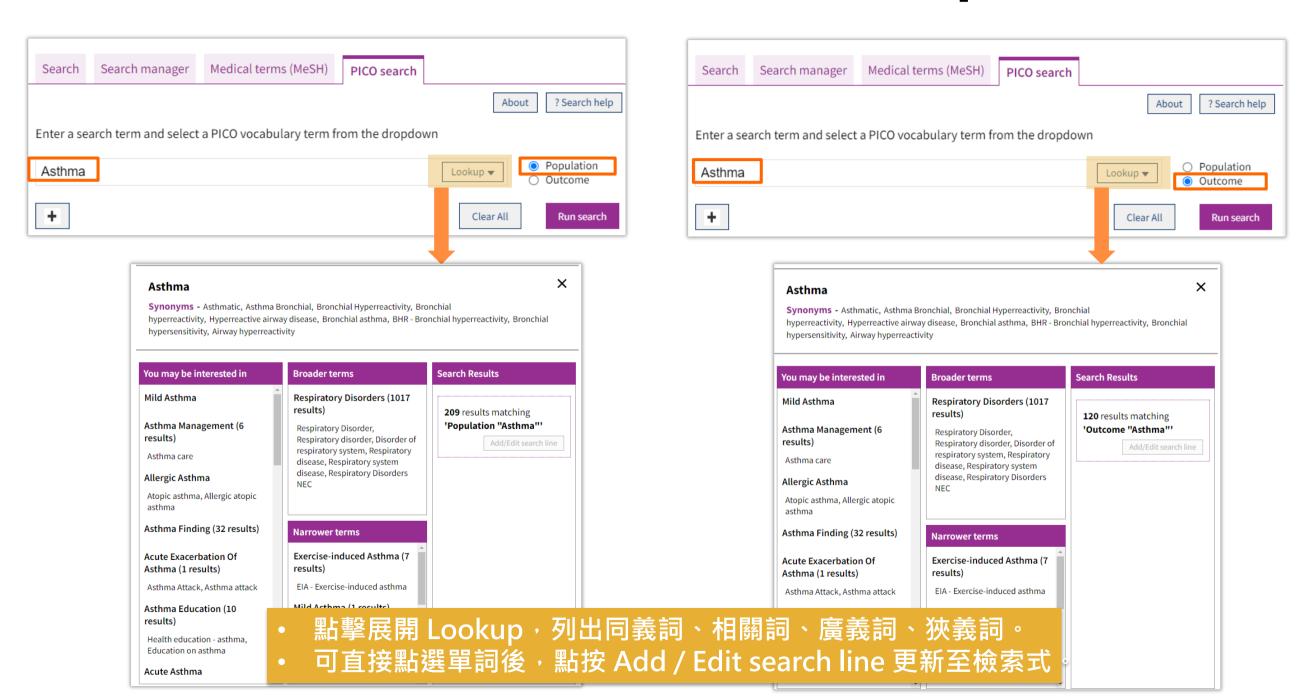


PICO Search — 類別選項



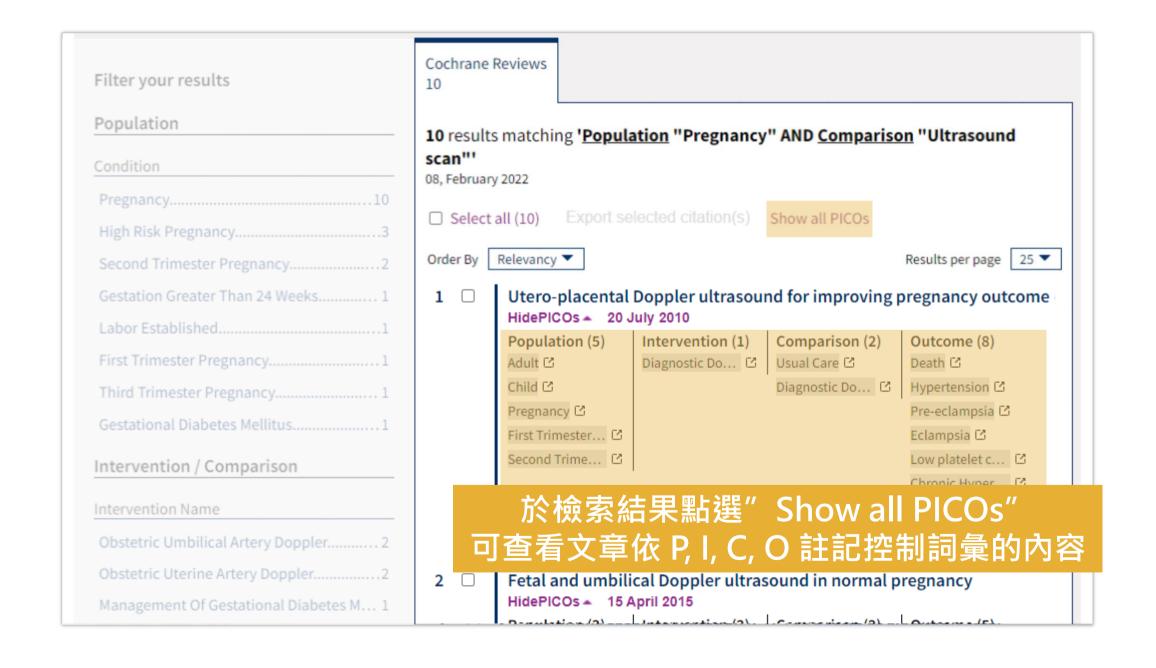


PICO Search – Lookup





PICO Search – Show all PICOs





PICO Search — 限縮欄位

Cochrane Reviews Filter your results 10 Population 10 results matching 'Population "Pregnancy" AND Comparison "Ultrasound scan"" Condition 08, February 2022 Pregnancy......10 ☐ Select all (10) High Risk Pregnancy......3 Order By Relevancy Results per page 25 ▼ Second Trimester Pregnancy......2 Gestation Greater Than 24 Weeks...... 1 Utero-placental Doppler ultrasound for improving pregnancy outcome ShowPICOs - 20 July 2010 Labor Established.....1 Fetal and umbilical Doppler ultrasound in normal pregnancy First Trimester Pregnancy......1 ShowPICOs - 15 April 2015 Third Trimester Pregnancy...... 1 限縮欄位以P, I, C, O分類 Gestational Diabetes Mellitus.....1 以檢索結果文獻被註記的控制詞彙統計而成 Intervention / Comparison Fetal and umbilical Doppler ultrasound in high-risk pregnancies ShowPICOs - 13 June 2017 Intervention Name 5 Obstetric Umbilical Artery Doppler........... 2 Amniotic fluid index versus single deepest vertical pocket as a screening test for preventing adverse pregnancy outcome Obstetric Uterine Artery Doppler.....2 ShowPICOs - 01 March 2008 Management Of Gestational Diabetes M... 1 untinuous gardiata cagranhy (CTC) as a farm of alactropic fotal



CLINICAL ANSWERS



Clinical Answers (CCAs)

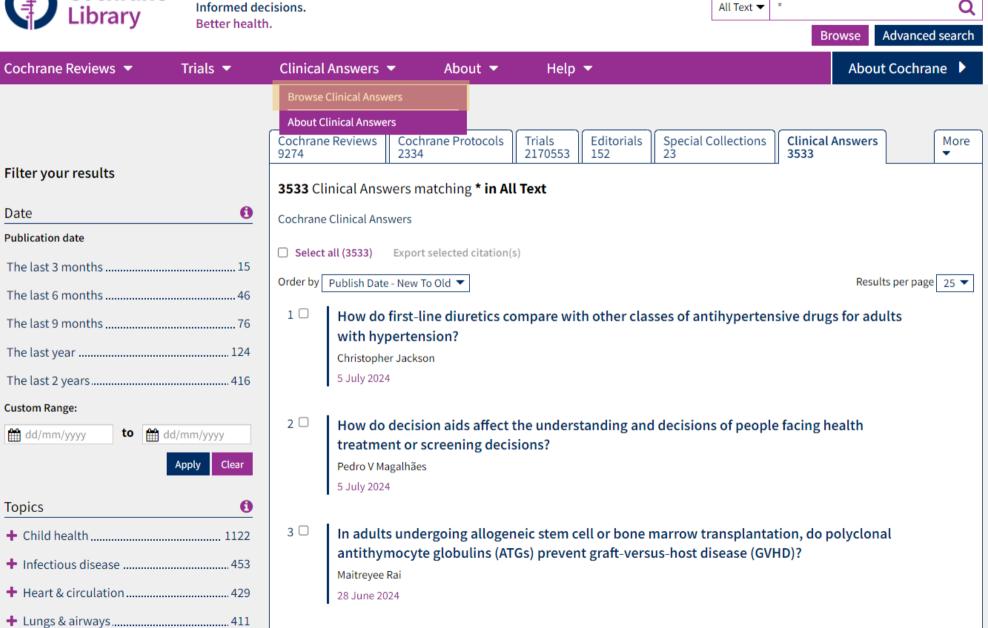
- 針對 Cochrane 系統性文獻回顧中嚴謹的研究結果,提供使用 者一個易讀、易懂且切入重點的臨床決策參考。
- 每個 CCAs 涵蓋臨床問題、解答摘要,以及從 Cochrane reviews 可深入探究的相關性證據。實證結合情境敘述、數據 與圖表,以可讀性高的介面呈現,讓使用者更容易獲得所需要 的臨床解答。
- 主要使用族群為健康照護醫護專業人員與健康照護決策者。
- CCAs 以 Cochrane 高質量系統性文獻回顧為基礎,專注於以「病人安全」為中心,CCAs 提供醫護人員權威且專業的實證 臨床問題解答。



瀏覽Clinical Answers



Trusted evidence. Informed decisions.

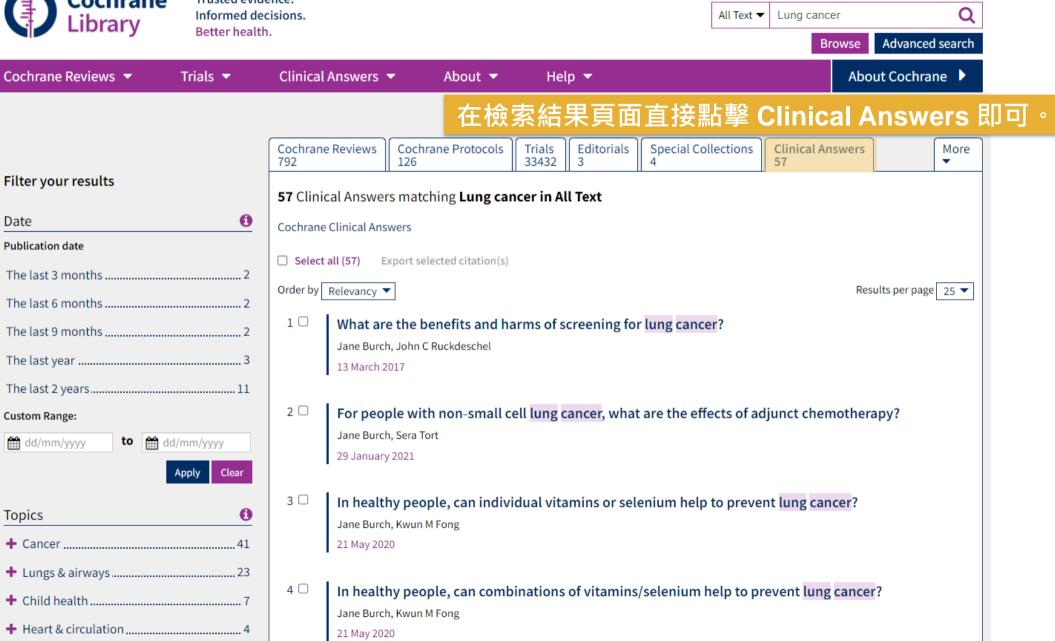




檢索Clinical Answers



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Trials ▼



Cochrane Reviews -

Cochrane Clinical Answers

Question:

What are the benefits and harms of screening for lung cancer?

Clinical Answers ▼

About ▼

Jane Burch, John C Ruckdeschel 13 March 2017 https://doi.org/10.1002/cca.873 ♂

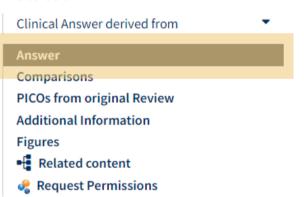
Clinical Answer:

Available randomized controlled trial data does not support screening for lung cancer with chest X-ray with or without sputum cytology. Screening with low dose CT may reduce lung-cancer mortality in smokers, but effects in other populations need to be further assessed.

Moderate to high-quality evidence shows that more intense screening (with chest X-ray +/- sputum cytology) had similar effects than less intense screening on lung cancer mortality; however, when longer follow-up data was added, lung cancer mortality was higher with more intense screening; this may be a consequence of overtreatment. Conversely, low to moderate-quality evidence shows higher lung cancer 5-year survival with more intense screening. High-quality evidence shows no benefit of annual chest X ray compared with no regular screening on lung cancer mortality at 6 or 13 years' follow-up but when annual-low dose CT was compared with annual chest X-ray in smokers or former smokers, lung cancer mortality was lower. Benefits for CT screening in people with a history of smoking would have been even higher if it had been compared with the community standard (no screening) rather than with X-ray. Harms were poorly reported and mostly associated with subsequent invasive investigations and death post-surgery, but harms directly related to screening were not reported.

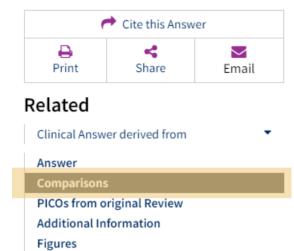


Related





Expand All » 1. 4 to 12 monthly screening versus less frequent screening (chest X-ray +/- sputum cytology) > OUTCOME 1.1 Lung cancer mortality (duration unclear – seems to be 3 years) > OUTCOME 1.2 Lung cancer mortality (including longer follow-up data (seems to be up to 6 years)) > OUTCOME 1.3 Lung cancer 5-year survival > OUTCOME 1.4 Resection rate (duration of screening 3 to 6 years) > OUTCOME 1.5 Harms of screening (duration of screening 3 to 6 years) > OUTCOME 1.6 Requirement of further invasive investigations → Population, Intervention, Comparator **Population** Mostly men (aged 35 to 65 years; women included in only one study), current smokers and nonsmokers, being screened for lung cancer. Two trials included only participants with an initial negative X-ray. Screening duration was 3 to 6 years Intervention Four-monthly, semi-annual or annual chest X-rays, with or without four-monthly or semi-annual sputum cytology Comparator Chest X-ray either annually, at 18-monthly intervals, at study entry and/or at the end of the study, with or without sputum cytology annually or at the end of the study 2. Annual chest X-ray screening versus no regular screening Expand All » 3. Annual low dose computed tomography (CT) screening versus annual chest X-ray Expand All >>



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單位權限 IP 範圍內註冊即可利用下述功能:

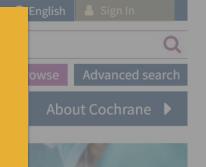
提供 My Profile 的功能

儲存檢索條件

Alert 功能

Email Address

Password





×

Sign in Strategies for using topical corticost Stephanie J Lax, Jane Harvey, Emma

Williams, Kim S Thomas, Joanne R Ch

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Point-of-care viral load tests to detect high HIV viral load in people living with HIV/AIDS attending health facilities

Eleanor A Ochodo, Easter Elizal

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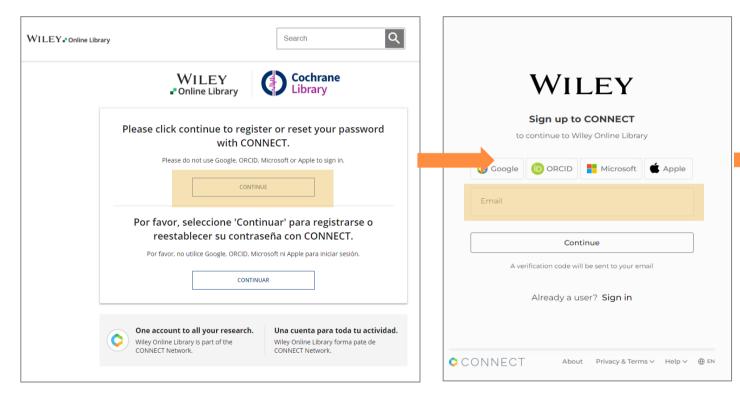
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Inhaled corticosteroids for the





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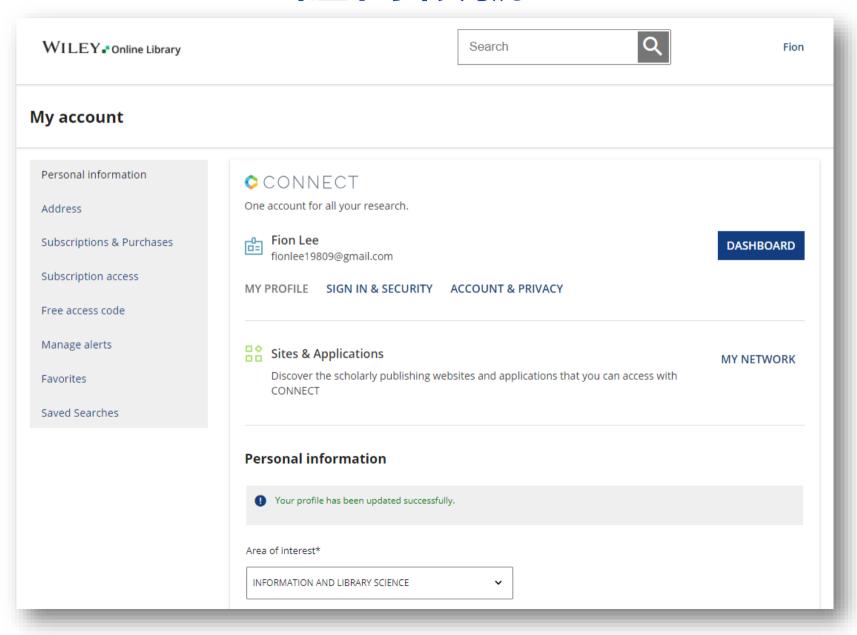








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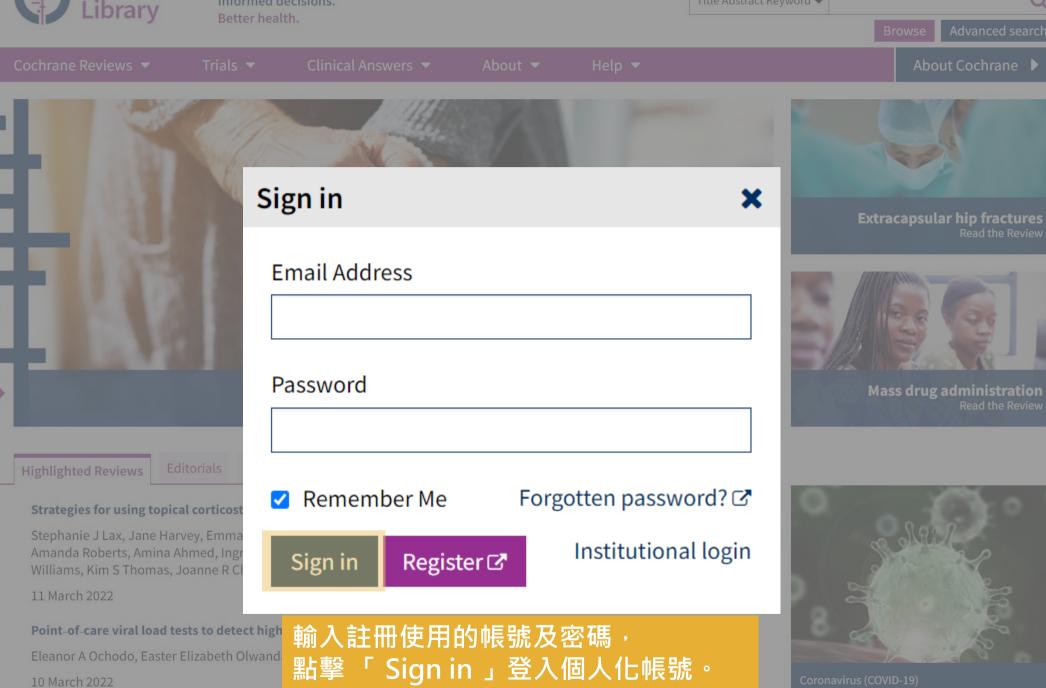






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Title Abstract Keyword ▼				Q



Inhaled corticosteroids for the treatment of COVID-19



實證醫學資源



實證醫學知識網

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考科藍使用統計

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最新消息

【實證醫學線上直播課程】

NEW!!!

系統性文獻回顧和統合分析常見的迷思

講師:康以諾 副執行長 (臺北醫學大學 考科藍臺灣研究中心)

課程時間:07月17日(星期三)12:00-13:00

上課地點: YouTube線上直播

參加對象:對實證醫學有興趣的醫事人員與學生

活動費用:免費參加!!速速前往報名!

【推廣活動】NEW!!!

「誒!? 實證怎麼說」考科藍播客(Podcast)競賽開始!

播客 (Podcast) 源於iPod + Broadcast (廣播) 的組合詞,聽眾可以在任何 時間選擇有興趣的主題,透過「聽」的方式得到訊息

「誒!? 實證怎麼說」考科藍播客 (Podcast) 競賽

活動日期:即日起至2024年7月31日止

活動詳情: http://imohw.tmu.edu.tw/7154-2/

Beats耳機、空氣清淨機、氣泡水機還有7-11商品卡等獎項等你抱回家喔!

將實證知識「說」給大家聽吧!

活動

> 20240717實證醫學研習線上直播

相關網站

- Cochrane Taiwan
- > Cochrane Taiwan 粉絲專頁
- The Cochrane
- The Cochrane Library
- 台灣實證護理醫學
- > 台灣實證醫學學會
- > 台灣護理學會實證健康照護知識館
- > 行政院衛生福利部
- > 財團法人國家衛生研究院



翻譯志工招募

iMOHW PROPERTY TO THE PROPERT

「推動全國實證醫學普及科技知識及建置緊疫衛生認利生物期刊共享資源計畫」

關於本站 最新

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CDSR翻譯

CDSR 翻譯、審稿志工徵求

考科藍圖書館(Cochrane Library)係當前國際上實證醫學最具代表性、以收錄系統性文獻回顧為主的線上電子資料庫。考科藍圖書館雖名為圖書館,實質上係整合多個實證醫學相關子資料庫。其中Cochrane Library系統性文獻回顧(一般稱Cochrane reviews)主要收錄在Cochrane Database of Systematic Reviews(CDSR)子資料庫中,Cochrane review之科學引文索引(Science Citation Index,SCI)的影響係數(Impact Factor)2014 年為6.035,其重要性可見一斑。

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子資料庫之 Cochrane reviews摘要翻譯工作,以提供對英文不熟稔之醫事人員及時的摘要訊息傳遞,並將中文翻譯的 CDSR摘要上傳至Cochrane Library的網頁供全球華語使用者查詢閱讀,擴大台灣對全球實證研究領域的實質 貢獻與提升國際能見度。CDSR每一篇Cochrane reviews,均有一段研究總結(plain language summary),以較 通俗易懂的表達方式呈現,不僅有助非醫療專業人員也能理解醫學研究的結果,也提供為醫病之間很好的溝通 參考文獻。

目前針對CDSR子資料庫Cochrane reviews摘要翻譯,全球除了有台灣進行繁體中文的翻譯計畫外,尚有西班牙文、法文等大型的翻譯計畫,其他如簡體中文、韓文、德文、日文、葡萄牙文等亦有相當規模的翻譯計畫進行中。

如果您有興趣加入義工,請與計畫助理: cochranetaiwan@tmu.edu.tw 聯絡。

活動

> 20240717實證醫學研習線上直播

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搜尋

TACI

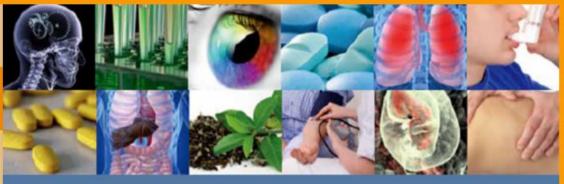
臺灣引文資料庫

The Cochrane Library 實證醫學資料庫

Cambridge Books Online 優質的數位出版

KMCC

光華管理個案收錄庫



The Cochrane Library

The Cochrane Library (考科藍圖書館) 為一實證醫學資料庫,收錄不同高品質及獨立證據的文獻資源,協助醫護人員快速找到所需的參考資料... 《詳全文》

活動特區



2024 Web of Science用戶會—AI賦能學術研究: 邁向創新與數據應用的新境界!

活動時間: 2024年8月1日(星期四)09:30-16:30

活動內容: 生成式 AI開始進入各行各業以及我們的日常生活之中,在今年的用戶會中,

我們將分享科睿唯安於AI發展的最新策略與佈局,同時也邀請多位專家分享機構內的實際應用,從過往大數據分析與多元服務方式,到賦能學術研究資

料以加速創新,透過新的視角將我們帶往資訊探索的新境界!

詳情請見: 活動網站









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Q & A

Thank You!

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