Le banche dati scientifiche

PUBMED

COCHRANE LIBRARY

1

METODOLOGIA DELLA RICERCA: PASSAGGI METODOLOGICI

1. **Definizione del problema e formulazione del quesito di ricerca**
2. **Revisione della letteratura**
3. **Scelta del disegno dello studio**
4. **Campionamento**
5. Scelta e utilizzo di strumenti di raccolta dati
6. Analisi statistica dei dati raccolti
7. Risposta al quesito
8. Diffusione dei risultati

2

EBP: passaggi metodologici

1. **definizione del problema e formulazione del quesito**
2. **revisione della letteratura**
3. selezione degli studi attinenti
4. valutazione critica degli studi selezionati
   - quesito di ricerca chiaro?
   - disegno di ricerca appropriato?
   - metodologia di conduzione adeguata?
   - risultati applicabili nel setting dove lavoro?
5. se nel leggere l'articolo posso rispondere positivamente a tutte le domande del punto 5 posso applicare i risultati nella pratica clinica

3



GIMBE EVIDENCE FOR HEALTH

4

Anatomia dell'informazione biomedica

ricerca primaria	ricerca secondaria	fonti tradizionali*
✓ osservazionale	✓ revisioni sistematiche	revisioni narrative
✓ sperimentale	✓ linee guida evidence based	Editoriali
	✓ HTA Reports	lettere/opinioni
	✓ Economic analyses	libri
	✓ Decisional analyses	

Distorsione dei risultati originali della ricerca primaria

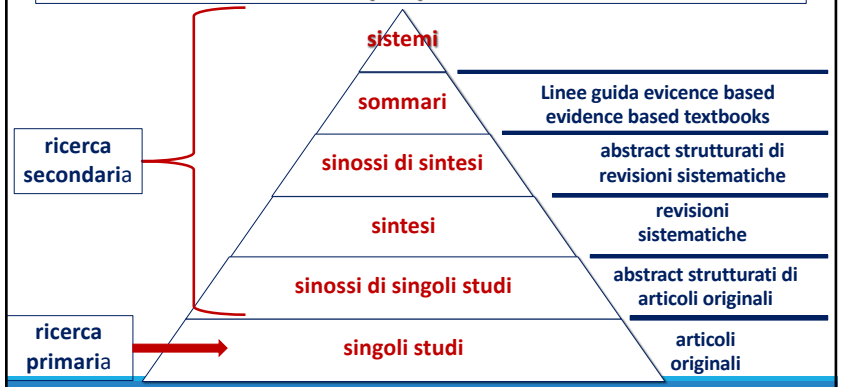
*inestricabile mix di opinioni ed evidenze

Modificata da: Cartabellotta A. Rec Prog Med 1998

GIMBE EVIDENCE FOR HEALTH

5

Gerarchia delle evidenze pre-processate: il sistema delle 6S



Accessing preappraised evidence: fine-tuning the 5S model into a 6S model 15 September 2009 | ACP Journal Club | Volume 151 • Number 3

6

singoli studi:

PubMed

embase BIOMEDICAL ANSWERS

CINAHL Available via EBSCOhost

PsycINFO American Psychological Association

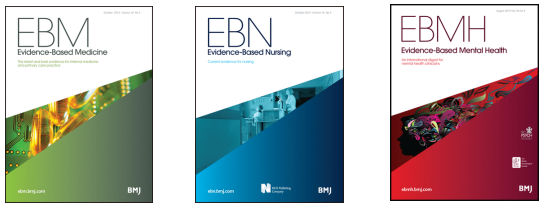
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7

sinossi di singoli studi:

ACP Journal Club® The Best New Evidence for Patient Care℠

ACP JOURNALWISE®



GIMBE EVIDENCE FOR HEALTH

8

sinossi di singoli studi

Non pubblicano studi originali
"Sorvegliano" un core di riviste pertinenti (40-50)
Selezionano studi primari e revisioni sistematiche pubblicati in relazione a:
- Rigore metodologico
- Rilevanza clinica

Editing abstract strutturato con commento
1 articolo = 1 pagina

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9

sintesi:

THE COCHRANE LIBRARY
Independent high-quality evidence for health care decision making

AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care www.ahrq.gov

PubMed

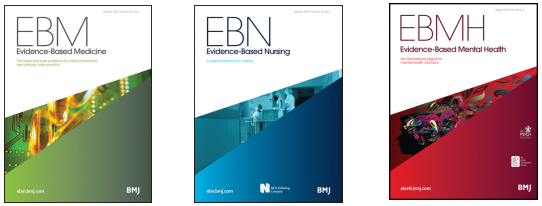
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10

sinossi di sintesi:

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The Best New Evidence for Patient Care℠

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Centre for Reviews and Dissemination

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Sommari
linee guida

AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care www.ahrq.gov

National Guideline Clearinghouse

NHS
National Institute for Health and Clinical Excellence

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12

sommari

Evidence-based Textbooks

UpToDate

DynaMed Powered by EBSCOhost

ClinicalEvidence

CKS Clinical Knowledge Summaries

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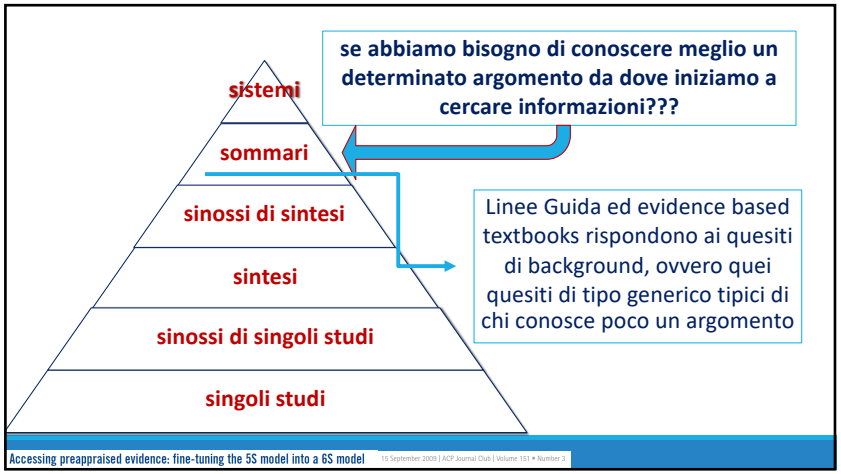
13

Per altri siti potete consultare questi link:

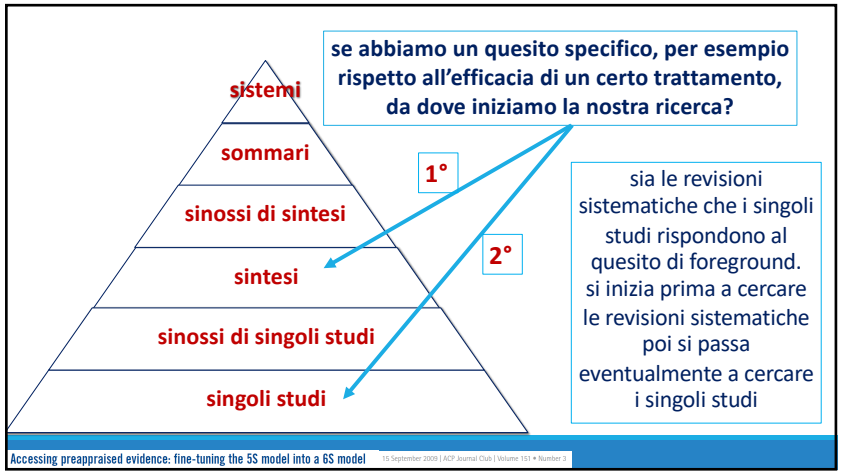
http://www.gimbe.org/ebp/getting.html

http://www.evidencebasednursing.it/nuovo/Risorse/6S.html

14



15



16

U.S. National Library of Medicine



LINK: https://www.nlm.nih.gov

17

Pubmed/medline

http://www.ncbi.nlm.nih.gov/pubmed/

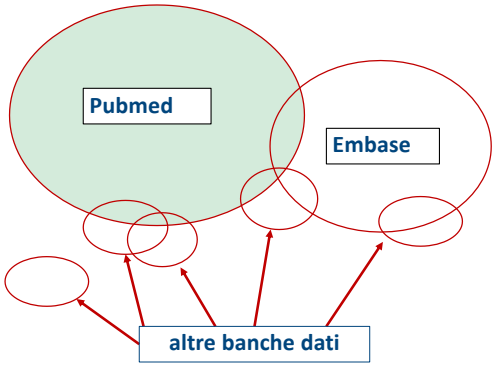
E' la principale banca dati bibliografica della National Library of Medicine e contiene più di 30 milioni di citazioni dal 1966 ad oggi.

Le citazioni provengono da 5248 riviste da più di 70 paesi.

Copre i settori della medicina, odontoiatria, scienze infermieristiche, veterinaria, scienze precliniche ed organizzazione sanitaria.

L'aggiornamento è settimanale.

18



Pubmed non è l'unica banca dati ma ne esistono diverse. Sostanzialmente il funzionamento delle varie banche dati è molto simile. Tutte hanno ripreso il sistema di classificzione ed archiviazione degli articoli messo a punto da PubMed.

19

Attenzione: prima regola

Requisito importante per andare a cercare nelle banche dati è:

AVERE GIÀ FORMULATO IL QUESITO

20

Struttura di medline

- Medline è un insieme di citazioni bibliografiche ottenute dalla recensione di riviste.
- Ogni citazione crea un **record.**
- Ogni record è suddiviso in **campi** che identificano e qualificano l'argomento.
- Ogni articolo è identificato da parole chiave (**MeSH** – Medical Subject Heading) contenute nel thesaurus.
- Ad ogni parola chiave possono essere abbinati dei qualificatori (**subheadings**).

21

21

TI = titolo

AB = abstract

FAU = primo autore

AU = autore

sono i campi, ne esistono molti .....

```
IS  - 2051-817X (Electronic)
IS  - 2051-817X (Linking)
VI  - 4
IP  - 20
DP  - 2016 Oct
TI  - The effects of intermittent negative pressure on the lower ex
      peripheral circulation and wound healing in four patients wi
      ischemia and hard-to-heal leg ulcers: a case report.
LID - e12998 [pii]
AB  - Peripheral circulation is severely compromised in the advanc
      peripheral arterial disease. Recently, it was shown that the
      mmHg intermittent negative pressure (INP) to the lower leg a
      macro- and microcirculation in healthy volunteers. In this c
      describe the effects of INP treatment on four patients with
      and hard-to-heal leg and foot ulcers. We hypothesized that I
      beneficial hemodynamic and clinical effects in the patients.
      range: 61-79 years) with hard-to-heal leg and foot ulcers (6-
      ankle-brachial pressure indices of </=0.60 on the affected s
      They were treated with an 8-week intervention period of -40
      negative pressure and 7 sec atmospheric pressure) on the lowe
      custom-made vacuum chamber was used to apply INP to the affe
      foot for 2 h per day. After 8 weeks of INP therapy, one ulce
      while the other three ulcers were almost completely healed.
      that INP may facilitate wound healing. The theoretical founda
      assists wound healing by improving blood flow to the small b
      affected limb, increasing the flow of oxygen and nutrients t
CI  - (c) 2016 The Authors. Physiological Reports published by Wile
      on behalf of the American Physiological Society and The Phys
FAU - Sundby, Oyvind H
AU  - Sundby OH
AD  - Section of Vascular Investigations, Department of Vascular Su
      Cardiovascular and Pulmonary Diseases, Oslo University Hospi
AD  - Faculty of Medicine, Institute of Clinical Medicine, Univers
      Norway.
```

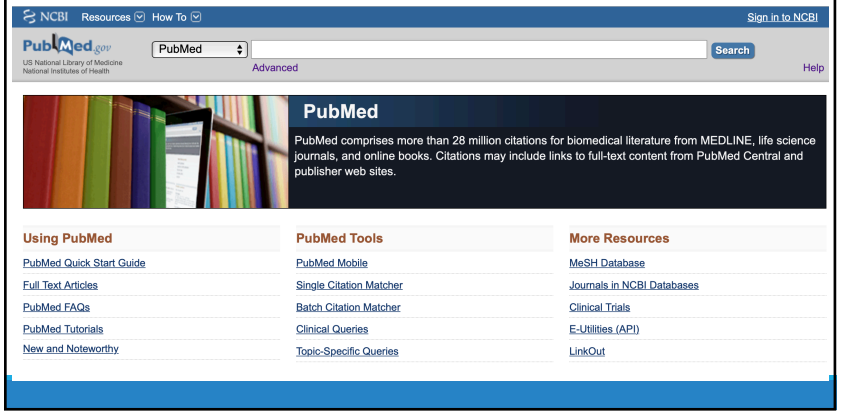
22

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PMID- 27798353
OWN - NLM
STAT- In-Data-Review
DA  - 20161031
LR  - 20161101
IS  - 2051-817X (Electronic)
IS  - 2051-817X (Linking)
VI  - 4
IP  - 20
DP  - 2016 Oct
TI  - The effects of intermittent negative pressure on the lower extremities'
      peripheral circulation and wound healing in four patients with lower limb
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LID - e12998 [pii]
AB  - Peripheral circulation is severely compromised in the advanced stages of
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      describe the effects of INP treatment on four patients with lower limb ischemia
      and hard-to-heal leg and foot ulcers. We hypothesized that INP therapy may have
      beneficial hemodynamic and clinical effects in the patients. Four patients (age
      range: 61-79 years) with hard-to-heal leg and foot ulcers (6-24 months) and
      ankle-brachial pressure indices of </=0.60 on the affected side were included.
      They were treated with an 8-week intervention period of -40 mmHg INP (10 sec
      negative pressure and 7 sec atmospheric pressure) on the lower limbs. A
      custom-made vacuum chamber was used to apply INP to the affected lower leg and
      foot for 2 h per day. After 8 weeks of INP therapy, one ulcer healed completely,
      while the other three ulcers were almost completely healed. These cases suggest
      that INP may facilitate wound healing. The theoretical foundation is that INP
      assists wound healing by improving blood flow to the small blood vessels in the
      affected limb, increasing the flow of oxygen and nutrients to the cells.
CI  - (c) 2016 The Authors. Physiological Reports published by Wiley Periodicals, Inc.
      on behalf of the American Physiological Society and The Physiological Society.
FAU - Sundby, Oyvind H
AU  - Sundby OH
AD  - Section of Vascular Investigations, Department of Vascular Surgery, Division of
      Cardiovascular and Pulmonary Diseases, Oslo University Hospital, Oslo, Norway.
AD  - Faculty of Medicine, Institute of Clinical Medicine, University of Oslo, Oslo,
      Norway.
AD  - Otivio AS, Oslo, Norway.
FAU - Hoiseth, Lars O
AU  - Hoiseth LO
AD  - Section of Vascular Investigations, Department of Vascular Surgery, Division of
      Cardiovascular and Pulmonary Diseases, Oslo University Hospital, Oslo, Norway.
AD  - Department of Anesthesiology, Division of Emergencies and Critical Care, Oslo
      University Hospital, Oslo, Norway.
FAU - Mathiesen, Iacob
AU  - Mathiesen I
AD  - Otivio AS, Oslo, Norway.
```

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AD  - Otivio AS, Oslo, Norway.
FAU - Hoiseth, Lars O
AU  - Hoiseth LO
AD  - Section of Vascular Investigations, Department of Vascular Surgery, Division
      Cardiovascular and Pulmonary Diseases, Oslo University Hospital, Oslo, Norway
AD  - Department of Anesthesiology, Division of Emergencies and Critical Care, Oslo
      University Hospital, Oslo, Norway.
FAU - Mathiesen, Iacob
AU  - Mathiesen I
AD  - Otivio AS, Oslo, Norway.
FAU - Jorgensen, Jorgen J
AU  - Jorgensen JJ
AD  - Faculty of Medicine, Institute of Clinical Medicine, University of Oslo, Oslo
      Norway.
AD  - Department of Vascular Surgery, Division of Cardiovascular and Pulmonary
      Diseases, Oslo University Hospital, Oslo, Norway.
FAU - Sundhagen, Jon O
AU  - Sundhagen JO
AD  - Department of Vascular Surgery, Division of Cardiovascular and Pulmonary
      Diseases, Oslo University Hospital, Oslo, Norway.
FAU - Hisdal, Jonny
AU  - Hisdal J
AD  - Section of Vascular Investigations, Department of Vascular Surgery, Division
      Cardiovascular and Pulmonary Diseases, Oslo University Hospital, Oslo, Norway
      jonny.hisdal@medisin.uio.no.
LA  - ENG
PT  - Journal Article
PL  - United States
TA  - Physiol Rep
JT  - Physiological reports
JID - 101607800
OTO - NOTNLM
OT  - Blood flow
OT  - intermittent negative pressure
OT  - leg ulcer
OT  - peripheral arterial disease
OT  - wound healing
EDAT- 2016/11/01 06:00
MHDA- 2016/11/01 06:00
CRDT- 2016/11/01 06:00
PHST- 2016/08/15 [received]
PHST- 2016/09/19 [accepted]
AID - 4/20/e12998 [pii]
AID - 10.14814/phy2.12998 [doi]
PST - ppublish
SO  - Physiol Rep. 2016 Oct;4(20). pii: e12998.
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23

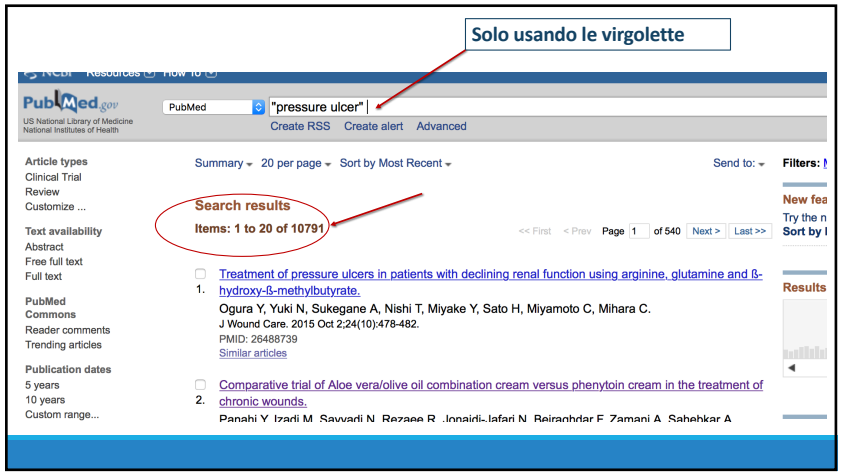
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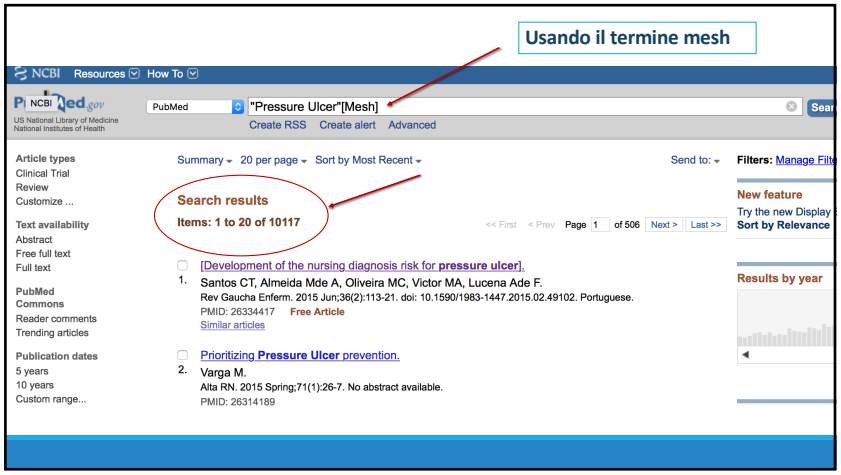
24



25



26



27

THESAURUS

- Raccoglie i termini MeSH che sono assegnati alle citazioni bibliografiche.
- E' un elenco strutturato di descrittori controllati sulla terminologia medica sviluppato da un'apposita commissione di esperti della NLM.
- Viene continuamente revisionato con cancellazioni, aggiunte, sostituzioni per restare al passo con l'evoluzione della scienza

28

28

THESAURUS

- E' organizzato in grandi strutture ad albero rovesciato nelle quali si procede dal generale al particolare.
- Per default PubMed utilizza l'esplosione dei termini che hanno sotto di loro altre voci subordinate.

29

La struttura

All MeSH Categories

Diseases Category

Skin and Connective Tissue Diseases

Skin Diseases

Skin Diseases, Eczematous

Dermatitis, Contact

Dermatitis, Allergic Contact

Dermatitis, Photoallergic

Dermatitis, Toxicodendron

Dermatitis, Irritant

Dermatitis, Phototoxic

Diaper Rash

Dermatitis, Occupational

30

Strategia di ricerca:

- Per ottimizzare la ricerca è conveniente usare i termini **mesh**
- Una volta che si è trovato il termine che sembra essere di nostro interesse **leggere sempre la descrizione** per non rischiare di aver frainteso
- occorre avere quesito da cui estrarre le parole chiave
- legare le parole chiave tra loro con gli **operatori BOOLEANI**
- Prestare attenzione alle **parentesi** quando si usano più parole chiave

31

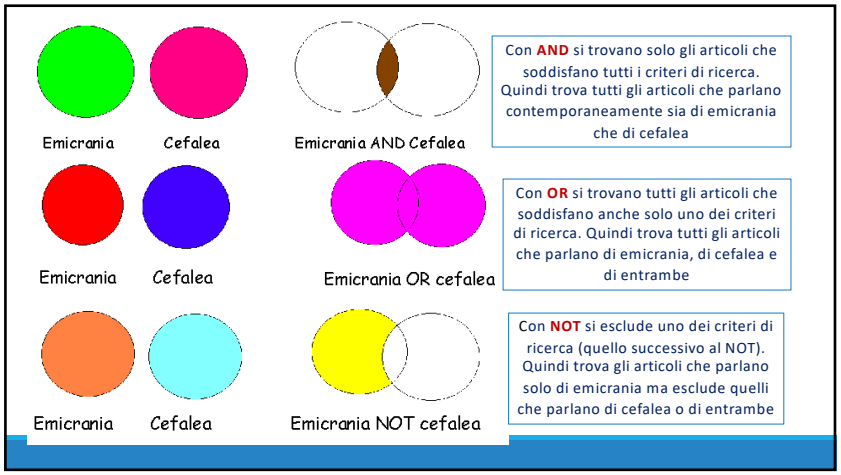
Gli operatori booleani

Sono strumenti di ricerca comuni a tutti i principali motori.

Devono il loro nome ad un matematico inglese George Boole, che ha dimostrato come esprimere un'operazione logica attraverso operazioni algebriche; si tratta di quattro parole inglesi di cui ci interessano in particolare queste tre:

AND, OR, NOT.

32



33

UTILIZZO DELLE PARENTESI

Esempio:

chirurgia AND colon OR retto

ci dà tutti i documenti della chirurgia del colon più tutti i documenti relativi al retto (non solo chirurgici).

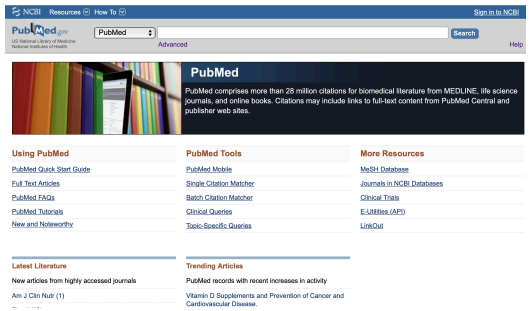
chirurgia AND (colon OR retto)

ci dà tutti i documenti della chirurgia del colon e della chirurgia del retto.

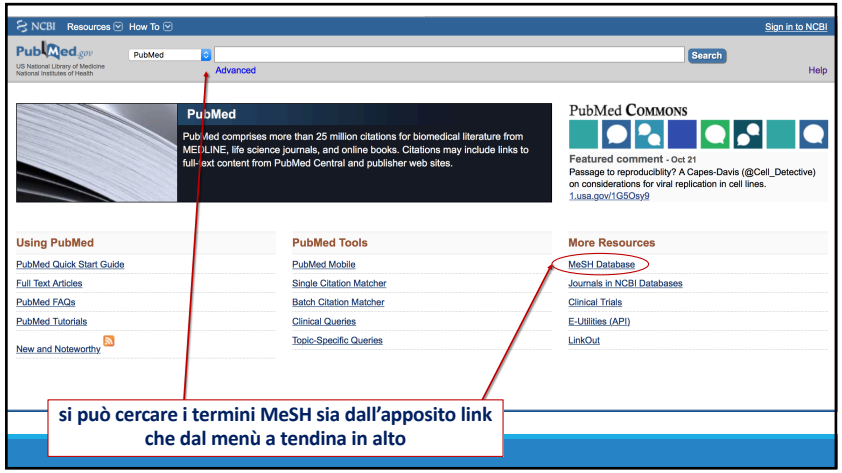
34

PUBMED

Iniziamo a vedere com'è strutturato il sito

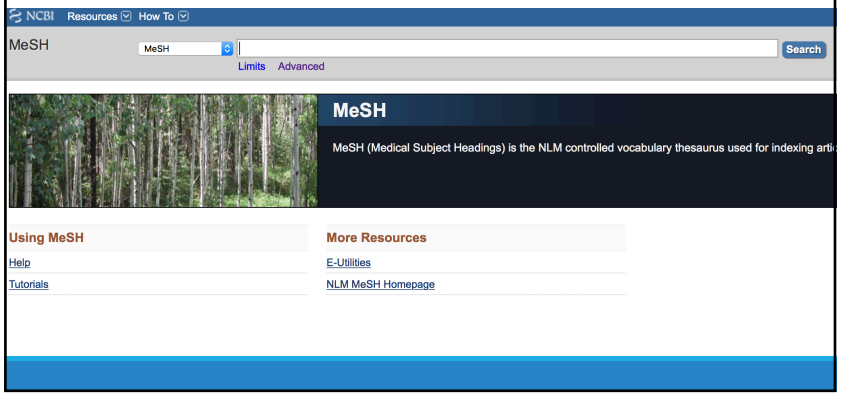


35



36

PAGINA DEI MESH



37

SIMULAZIONE:

QUESITO:

NEI PAZIENTI CON GESSO ALL'ARTO INFERIORE L'APPLICAZIONE DI UNA SCHIUMA DI POLIURETANO ALL'INTERNO DEL GESSO RIDUCE L'INCIDENZA DELLE LESIONI DA PRESSIONE?

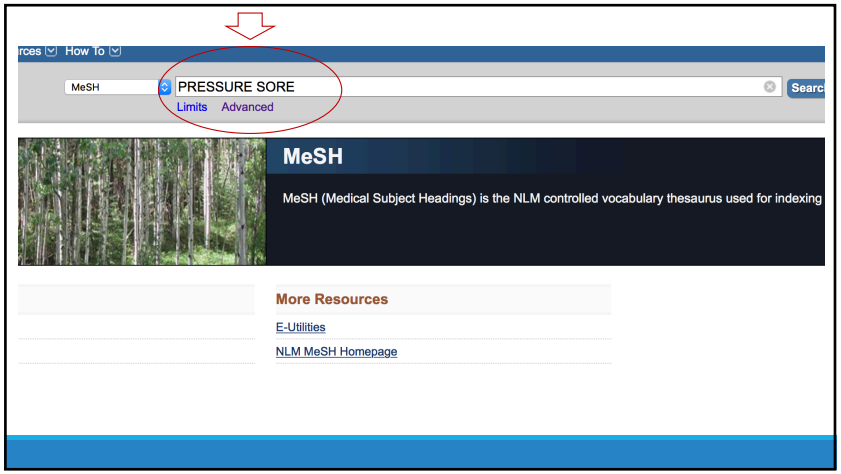
PAROLE CHIAVE:

- **GESSO**
- **SCHIUMA DI POIURETANO**
- **LESIONI DA PRESSIONE**

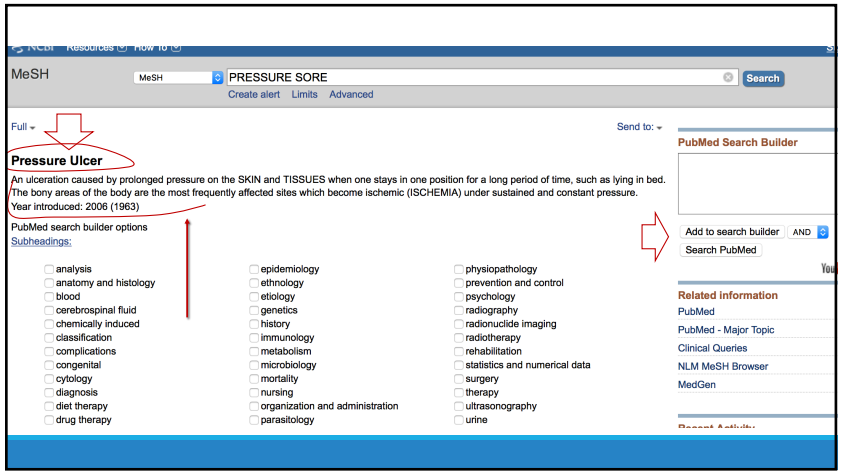
OPERATORE BOOLEANO:

- **AND**

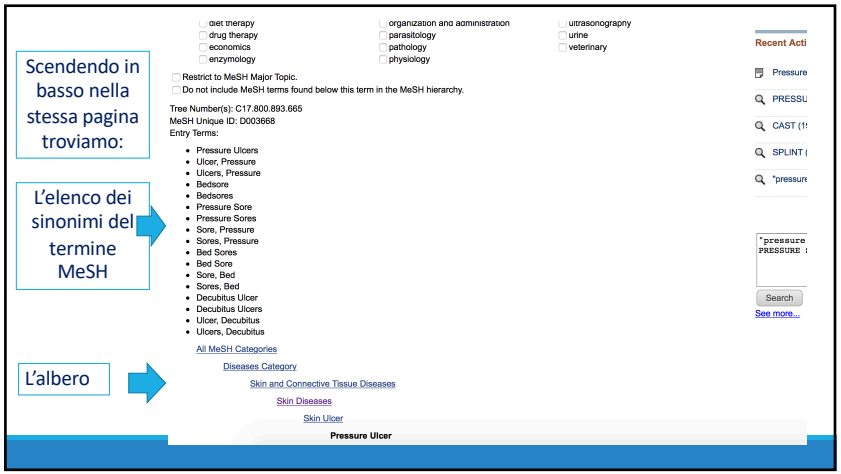
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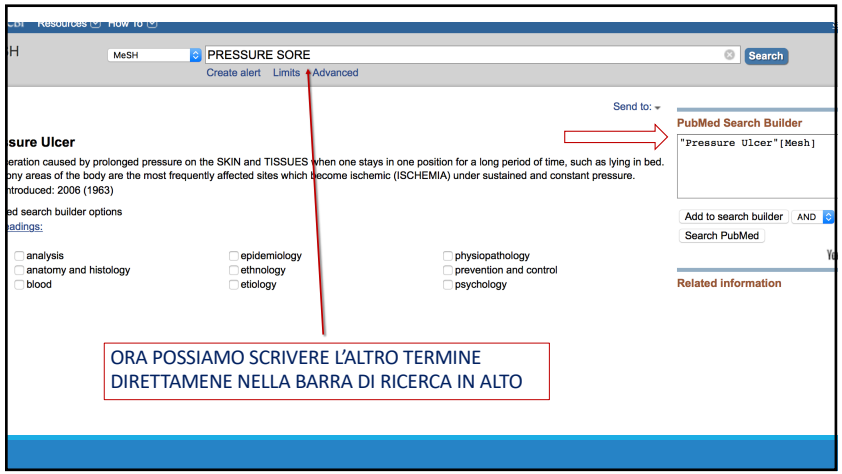
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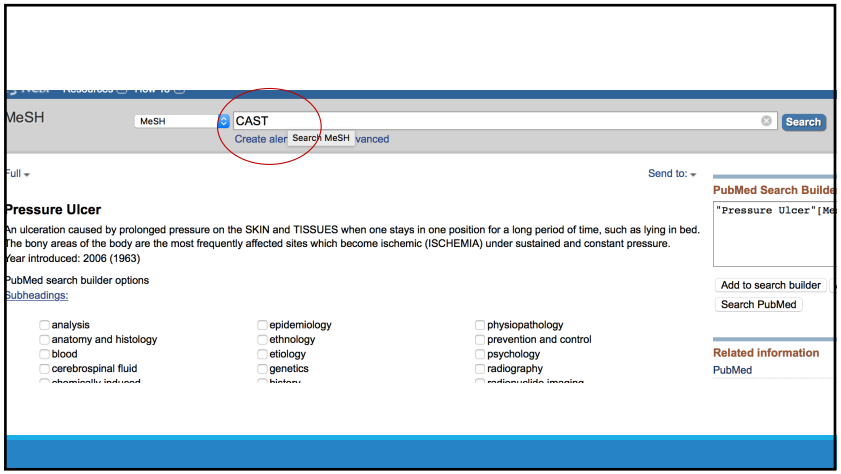
40


Scendendo in basso nella stessa pagina troviamo:
L'elenco dei sinonimi del termine MeSH
L'albero
Restrict to MeSH Major Topic.
Do not include MeSH terms found below this term in the MeSH hierarchy.
Tree Number(s): C17.800.893.665
MeSH Unique ID: D003668
Entry Terms:
Pressure Ulcers
Ulcer, Pressure
Ulcers, Pressure
Bedsore
Bedsores
Pressure Sore
Pressure Sores
Sore, Pressure
Sores, Pressure
Bed Sores
Bed Sore
Sore, Bed
Sores, Bed
Decubitus Ulcer
Decubitus Ulcers
Ulcer, Decubitus
Ulcers, Decubitus
All MeSH Categories
Diseases Category
Skin and Connective Tissue Diseases
Skin Diseases
Skin Ulcer
Pressure Ulcer
Search
See more...

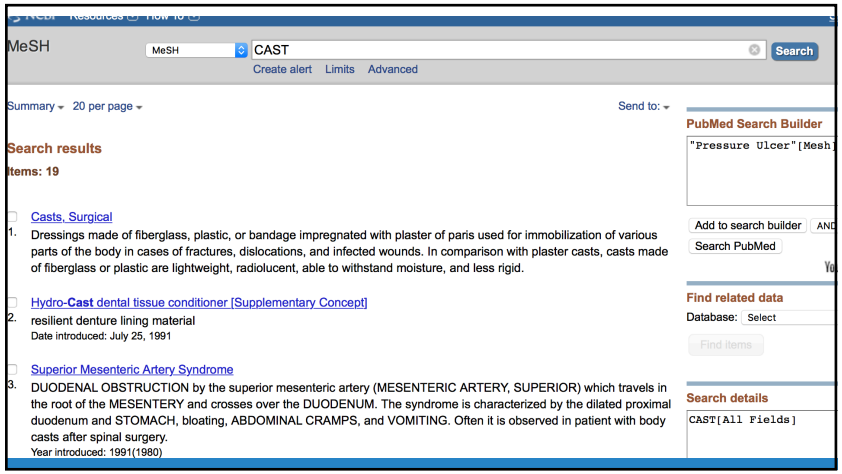
41


MeSH
PRESSURE SORE
Search
Create alert
Limits
Advanced
Send to:
PubMed Search Builder
"Pressure Ulcer"[Mesh]
Add to search builder
AND
Search PubMed
Related information
analysis
anatomy and histology
blood
epidemiology
ethnology
etiology
physiopathology
prevention and control
psychology
ORA POSSIAMO SCRIVERE L'ALTRO TERMINE DIRETTAMENE NELLA BARRA DI RICERCA IN ALTO

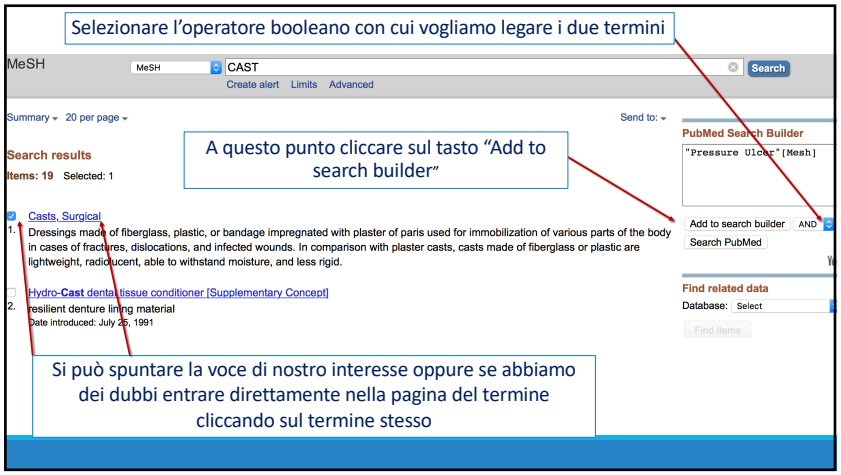
42


MeSH
CAST
Search
Search MeSH
Send to:
Pressure Ulcer
An ulceration caused by prolonged pressure on the SKIN and TISSUES when one stays in one position for a long period of time, such as lying in bed. The bony areas of the body are the most frequently affected sites which become ischemic (ISCHEMIA) under sustained and constant pressure.
Year introduced: 2006 (1963)
PubMed search builder options
Subheadings:
analysis
anatomy and histology
blood
cerebrospinal fluid
epidemiology
ethnology
etiology
genetics
physiopathology
prevention and control
psychology
radiography
PubMed Search Builder
Add to search builder
Search PubMed
Related information
PubMed

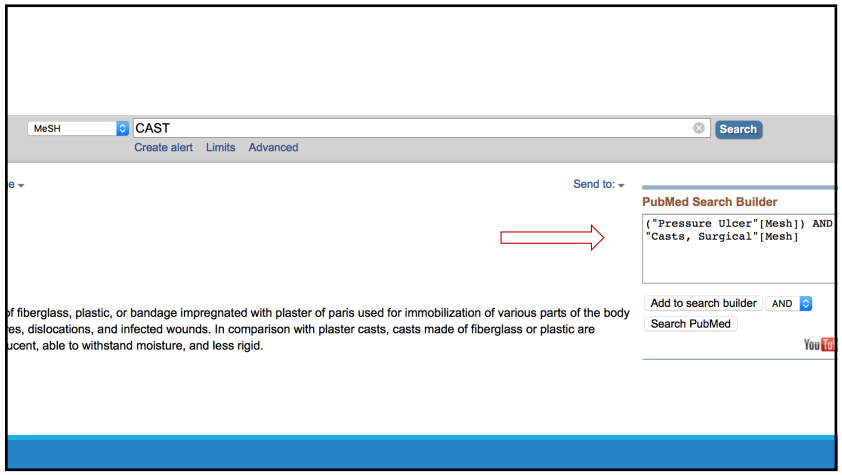
43


MeSH
CAST
Search
Create alert
Limits
Advanced
Summary
20 per page
Send to:
Search results
Items: 19
Casts, Surgical
1. Dressings made of fiberglass, plastic, or bandage impregnated with plaster of paris used for immobilization of various parts of the body in cases of fractures, dislocations, and infected wounds. In comparison with plaster casts, casts made of fiberglass or plastic are lightweight, radiolucent, able to withstand moisture, and less rigid.
Hydro-Cast dental tissue conditioner [Supplementary Concept]
2. resilient denture lining material
Date introduced: July 25, 1991
Superior Mesenteric Artery Syndrome
3. DUODENAL OBSTRUCTION by the superior mesenteric artery (MESENTERIC ARTERY, SUPERIOR) which travels in the root of the MESENTERY and crosses over the DUODENUM. The syndrome is characterized by the dilated proximal duodenum and STOMACH, bloating, ABDOMINAL CRAMPS, and VOMITING. Often it is observed in patient with body casts after spinal surgery.
Year introduced: 1991(1980)
PubMed Search Builder
"Pressure Ulcer"[Mesh]
Add to search builder
Search PubMed
Find related data
Database: Select
Find items
Search details
CAST[All Fields]

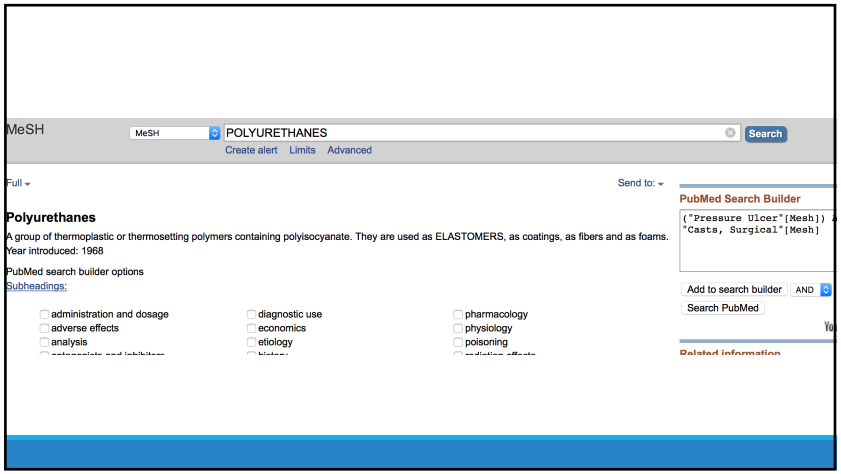
44


Selezionare l'operatore booleano con cui vogliamo legare i due termini
MeSH
MeSH
CAST
Search
Create alert
Limits
Advanced
Summary
20 per page
Send to:
PubMed Search Builder
"Pressure Ulcer"[Mesh]
Search results
Items: 19
Selected: 1
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1.
Dressings made of fiberglass, plastic, or bandage impregnated with plaster of paris used for immobilization of various parts of the body in cases of fractures, dislocations, and infected wounds. In comparison with plaster casts, casts made of fiberglass or plastic are lightweight, radiolucent, able to withstand moisture, and less rigid.
Hydro-Cast dental tissue conditioner [Supplementary Concept]
2.
resilient denture lining material
Date introduced: July 25, 1991
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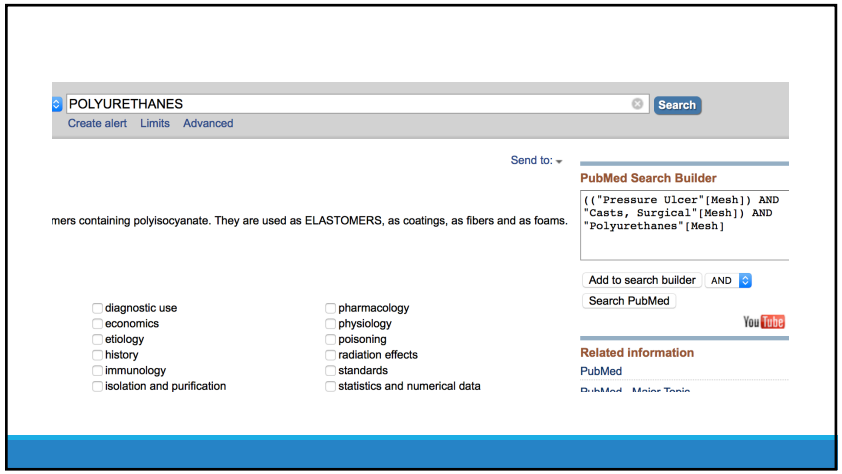
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of fiberglass, plastic, or bandage impregnated with plaster of paris used for immobilization of various parts of the body
es, dislocations, and infected wounds. In comparison with plaster casts, casts made of fiberglass or plastic are
ucent, able to withstand moisture, and less rigid.

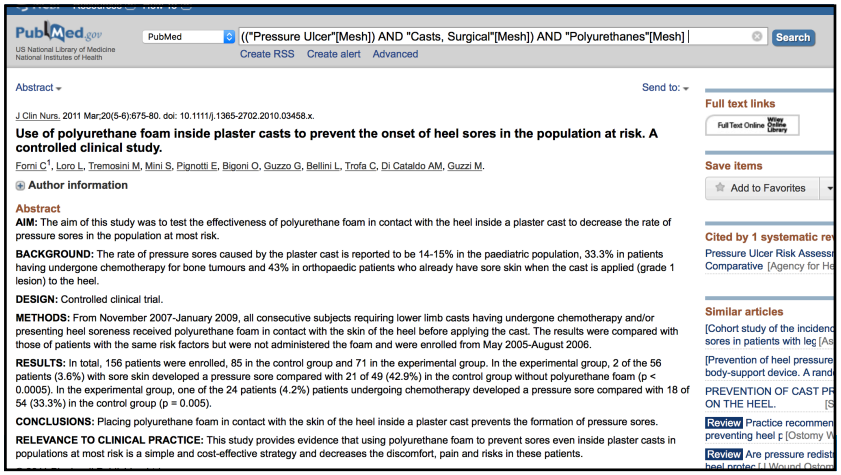
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MeSH
MeSH
POLYURETHANES
Search
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("Pressure Ulcer"[Mesh]) A
"Casts, Surgical"[Mesh]
Polyurethanes
A group of thermoplastic or thermosetting polymers containing polyisocyanate. They are used as ELASTOMERS, as coatings, as fibers and as foams.
Year introduced: 1968
PubMed search builder options
Subheadings:
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AND
Search PubMed
administration and dosage
adverse effects
analysis
diagnostic use
economics
etiology
pharmacology
physiology
poisoning

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POLYURETHANES
Search
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(("Pressure Ulcer"[Mesh]) AND
"Casts, Surgical"[Mesh]) AND
"Polyurethanes"[Mesh]
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etiology
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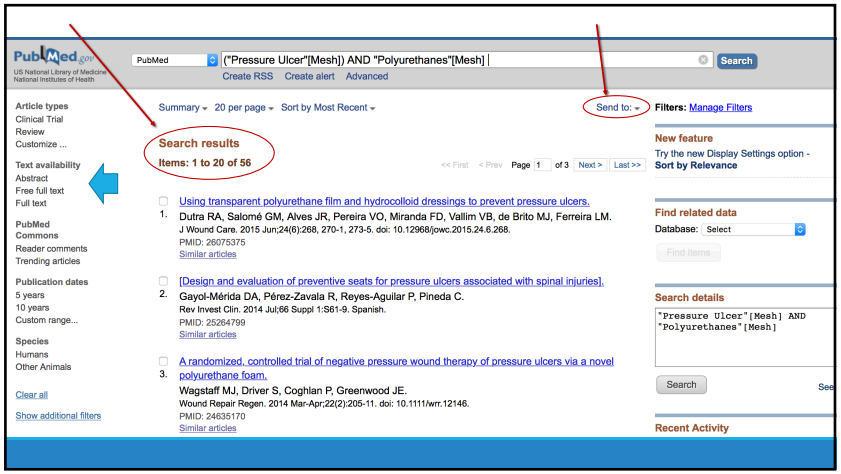


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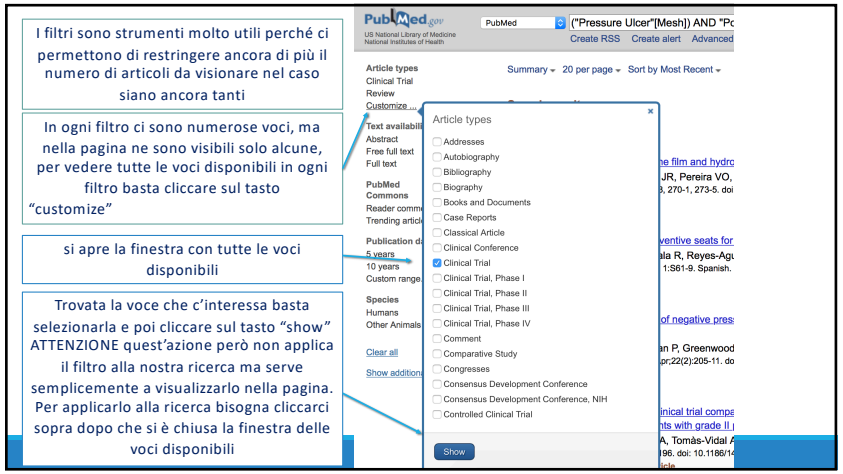
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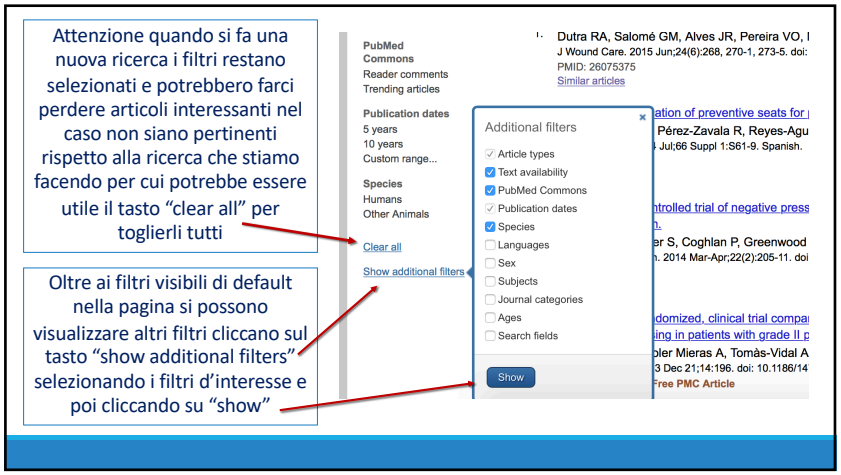
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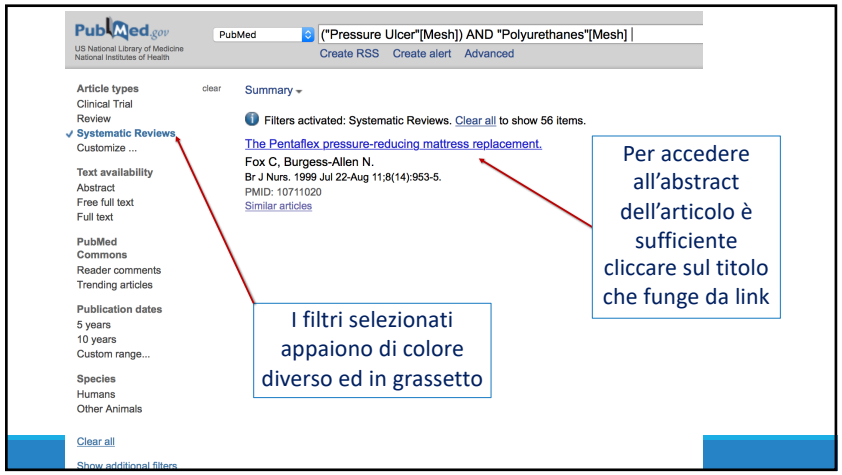
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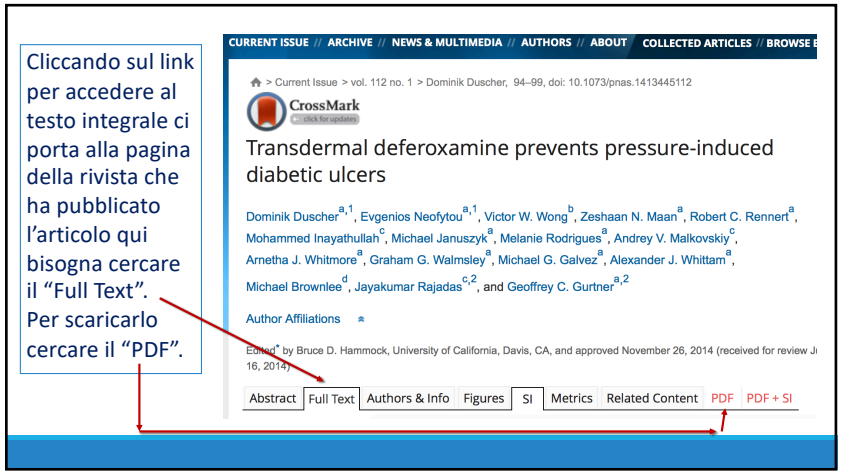
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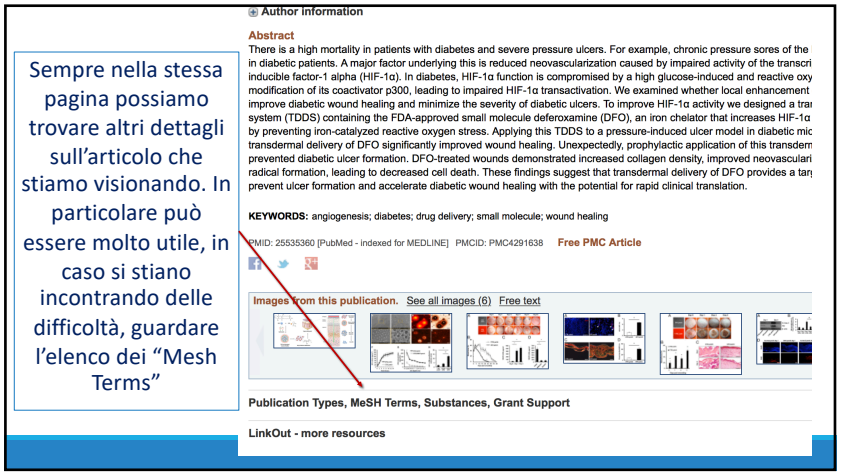

Link per il testo completo dell’articolo
Abstract
Send to:
Proc Natl Acad Sci U S A. 2015 Jan 6;112(1):94-9. doi: 10.1073/pnas.1413445112. Epub 2014 Dec 22.
Transdermal deferoxamine prevents pressure-induced diabetic ulcers.
Author information
Abstract
There is a high mortality in patients with diabetes and severe pressure ulcers. For example, chronic pressure sores of the heels often lead to limb loss in diabetic patients. A major factor underlying this is reduced neovascularization caused by impaired activity of the transcription factor hypoxia inducible factor-1 alpha (HIF-1α). In diabetes, HIF-1α function is compromised by a high glucose-induced and reactive oxygen species-mediated modification of its coactivator p300, leading to impaired HIF-1α transactivation. We examined whether local enhancement of HIF-1α activity would improve diabetic wound healing and minimize the severity of diabetic ulcers. To improve HIF-1α activity we designed a transdermal drug delivery system (TDDS) containing the FDA-approved small molecule deferoxamine (DFO), an iron chelator that increases HIF-1α transactivation in diabetes by preventing iron-catalyzed reactive oxygen stress. Applying this TDDS to a pressure-induced ulcer model in diabetic mice, we found that transdermal delivery of DFO significantly improved wound healing. Unexpectedly, prophylactic application of this transdermal delivery system also prevented diabetic ulcer formation. DFO-treated wounds demonstrated increased collagen density, improved neovascularization, and reduction of free radical formation, leading to decreased cell death. These findings suggest that transdermal delivery of DFO provides a targeted means to both prevent ulcer formation and accelerate diabetic wound healing with the potential for rapid clinical translation.
KEYWORDS: angiogenesis; diabetes; drug delivery; small molecule; wound healing
PMID: 25535360 [PubMed - indexed for MEDLINE] PMCID: PMC4291638
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Local injection of deferoxamine improves neovascularization in ischemic [PLoS One. 2014]
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Transdermal deferoxamine prevents pressure-induced diabetic ulcers
Dominik Duscher[a,1], Evgenios Neofytou[a,1], Victor W. Wong[b], Zeshaan N. Maan[a], Robert C. Rennert[a], Mohammed Inayathullah[c], Michael Januszyk[a], Melanie Rodrigues[a], Andrey V. Malkovskiy[c], Arnetha J. Whitmore[a], Graham G. Walmsley[a], Michael G. Galvez[a], Alexander J. Whittam[a], Michael Brownlee[d], Jayakumar Rajadas[c,2], and Geoffrey C. Gurtner[a,2]
Author Affiliations
Edited* by Bruce D. Hammock, University of California, Davis, CA, and approved November 26, 2014 (received for review J
16, 2014)
Abstract
Full Text
Authors & Info
Figures
SI
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Sempre nella stessa pagina possiamo trovare altri dettagli sull'articolo che stiamo visionando. In particolare può essere molto utile, in caso si stiano incontrando delle difficoltà, guardare l'elenco dei "Mesh Terms"

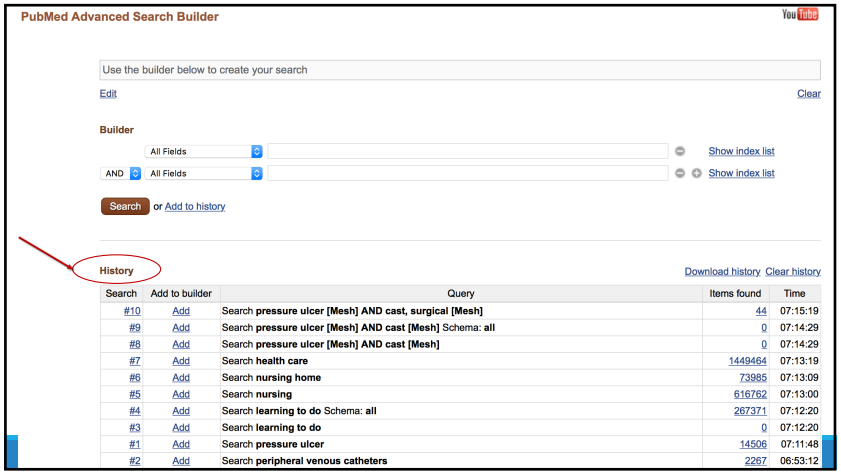


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revisioni sistematiche

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La Cochrane collaboration

Agli inizi degli anni Settanta, **Archibald Cochrane** - epidemiologo inglese - sosteneva che i **risultati della ricerca** avevano un **impatto molto limitato sulla pratica** clinica:

"*è causa di grande preoccupazione constatare come la professione medica non abbia saputo organizzare un sistema in grado di rendere* ***disponibili, e costantemente aggiornate, delle revisioni critiche sugli effetti dell'assistenza sanitaria***".

In altre parole Cochrane, consapevole delle **risorse economiche limitate**, suggeriva di rendere disponibili a tutti i pazienti solo gli interventi sanitari di provata efficacia.

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La Cochrane collaboration

Nel 1993, dopo l'esperienza del centro pilota di Oxford, le idee di Cochrane si concretizzano con la fondazione della **Cochrane Collaboration**,

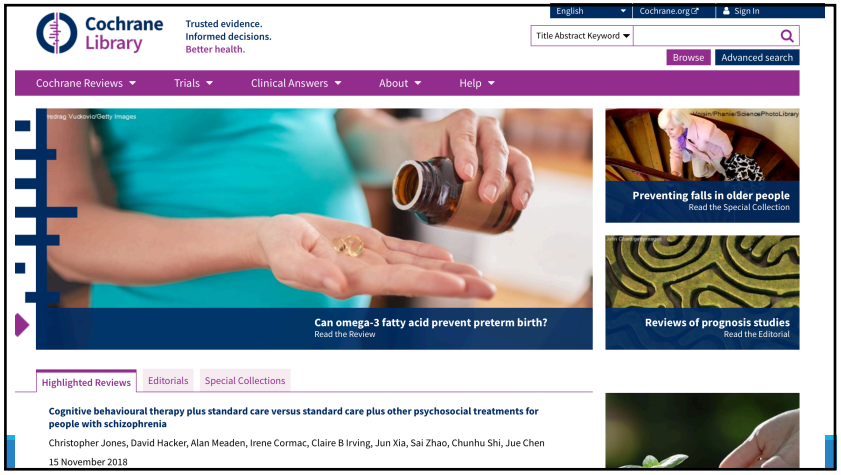
un **network internazionale** nato con l'obiettivo di:

- "preparare, aggiornare e disseminare **revisioni sistematiche degli studi clinici controllati sugli effetti dell'assistenza sanitaria** e, laddove non sono disponibili studi clinici controllati, **revisioni sistematiche delle evidenze comunque esistenti**"

Il lavoro dei gruppi di revisione della Cochrane Collaboration viene distribuito mediante la **Cochrane Library**.

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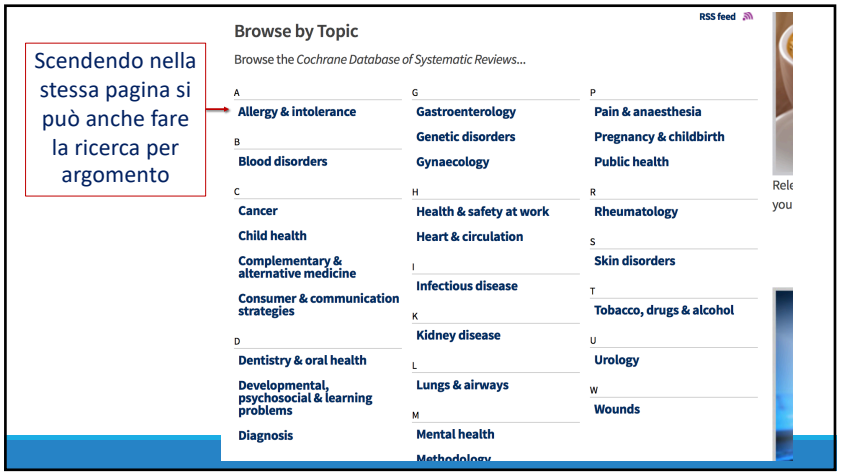
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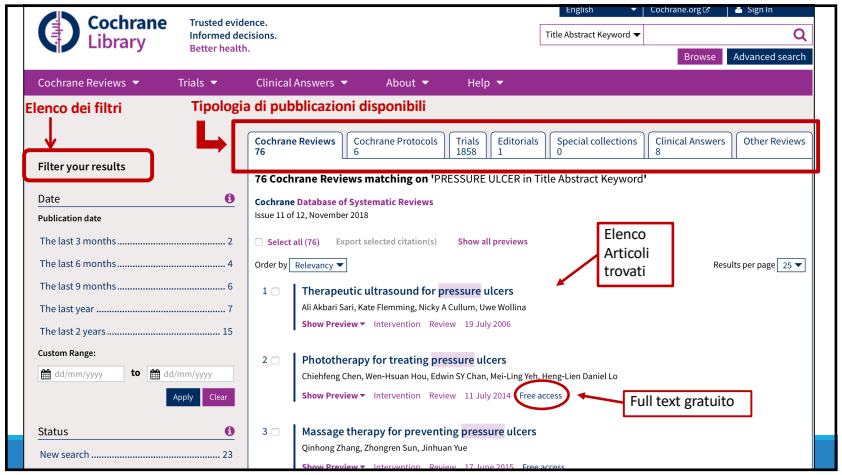
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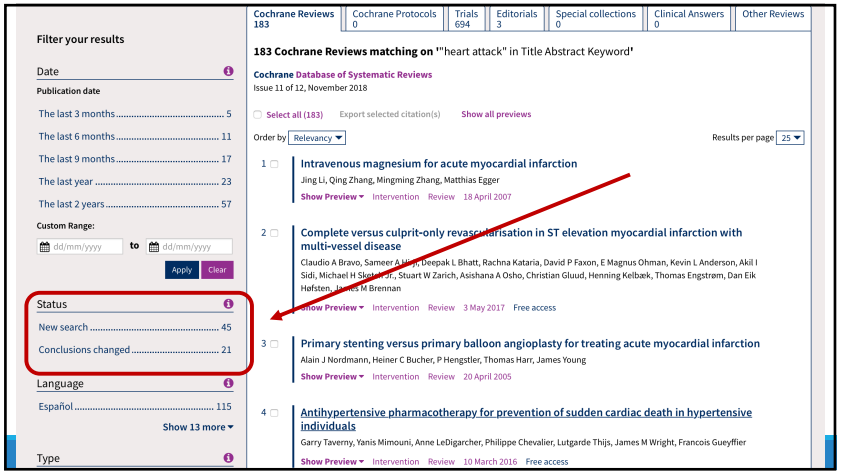
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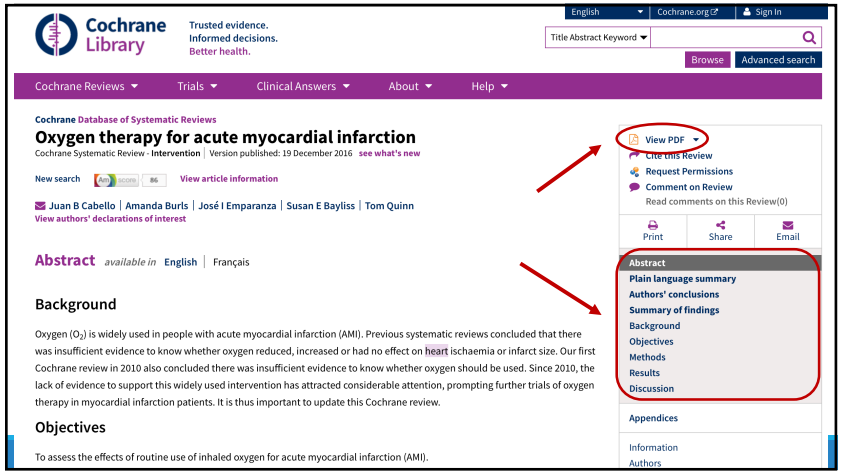
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Frontespizio delle revisioni sistematiche Cochrane



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