Búsqueda de la literatura médica

Por Netzahualpilli Delgado F.

Objetivos de la Sesión:

- Identificar que es una base de datos (Literatura médica)
- Qué son los términos MeSH
- Palabras = Objetos
- Revistas electrónicas como espacio de alojamiento
- Organigrama de bases de datos
- Estrategias de búsqueda básicas

Declaración de CDI:

No trabajo para la industria farmacéutica, ni de dispositivos médicos

Trabajo para:

Universidad de Guadalajara y OPD Hospital Civil de Guadalajara

https://wdg.biblio.udg.mx/index.php/index.php

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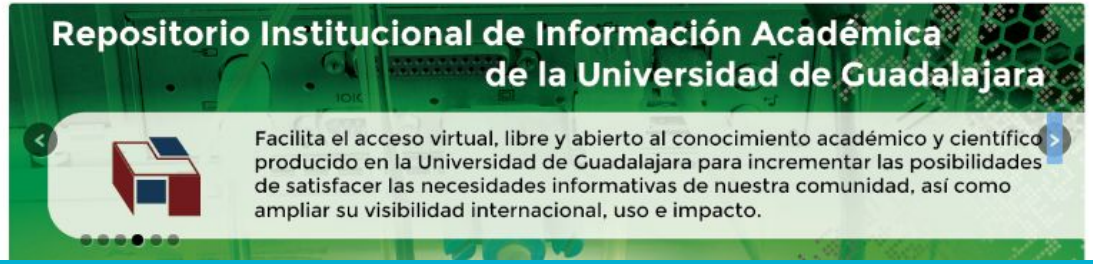
UNIVERSIDAD DE GUADALAJARA
Red Universitaria de Jalisco

Hola, NETZAHUALPILLI
Cerrar sesión

Principal | Recursos informativos | Repositorio Institucional | Catálogos en línea | Herramientas | Servicios bibliotecarios

Bienvenido

Este espacio ofrece a la comunidad de la Universidad de Guadalajara, acceso al acervo de recursos informativos digitales con que la institución cuenta. Suscripción a bases de datos de revistas científicas y libros, de editoriales con prestigio internacional. Producción universitaria disponible en el Repositorio Institucional, acceso al Fondo Histórico digitalizado y enlaces al Catálogo electrónico de las bibliotecas UdeG. Ingresando con su código y NIP de SIIAU se garantiza el acceso a los documentos dentro y fuera de las instalaciones universitarias. Las herramientas de apoyo facilitan la localización de documentos y los servicios brindan la posibilidad de tener acompañamiento bibliotecario.

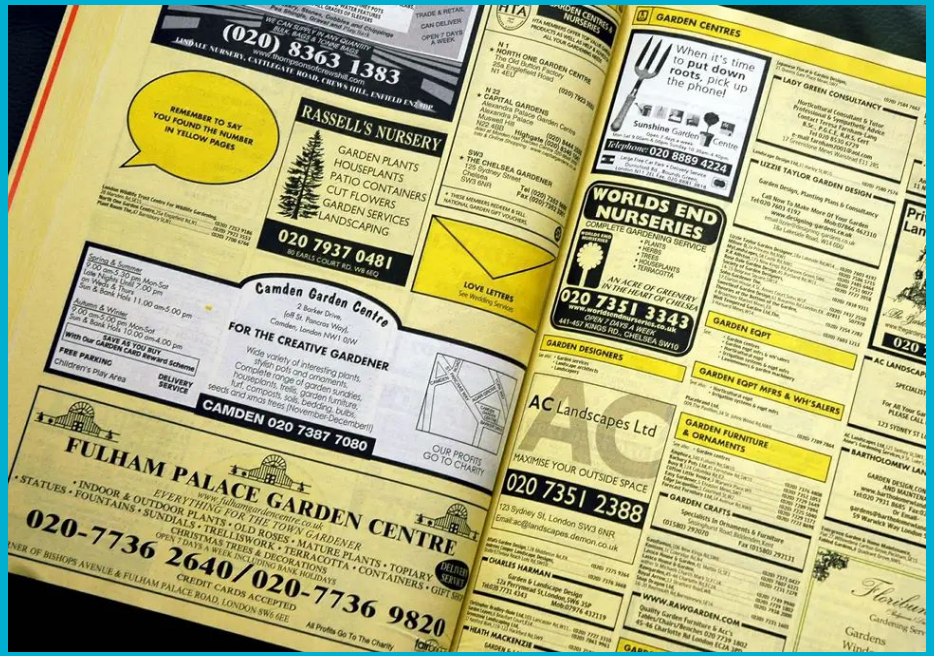


Twitter

Twitter por el @wdg_biblio.

Hay 18 invitados y 5 miembros en línea

Las bases de datos funcionan como directorios ó secciones amarillas:



Lógica de búsqueda responde a términos como entidades u objetos:

- “Apendicitis aguda” (D001064)
- “Adulto” (D000328)
- “Hiponatremia” (D007010)
- “Fístula” (D005402)
- “Revisión Sistemática” (D000078182)

Fistula

Abnormal communication most commonly seen between two internal organs, or between an internal organ and the surface of the body.

Tree Number(s): C23.300.575
MeSH Unique ID: D005402

Sepsis

Systemic inflammatory response syndrome with a proven or suspected infectious etiology. When sepsis is associated with organ dysfunction distant from the site of infection, it is called severe sepsis. When sepsis is accompanied by HYPOTENSION despite adequate fluid infusion, it is called SEPTIC SHOCK.
Year introduced: 1995

Tree Number(s): C01.539.757, C23.550.470.790.500
MeSH Unique ID: D018805

Appendicitis

Acute inflammation of the APPENDIX. Acute appendicitis is classified as simple, gangrenous, or perforated.

Tree Number(s): C01.539.463.099, C06.405.205.099, C06.405.469.110.207
MeSH Unique ID: D001064

MeSH

MeSH

Limits Advanced

Full

Send to:

Systematic Review [Publication Type]

A review of primary literature in health and health policy that attempts to identify, appraise, and synthesize all the empirical evidence that meets specified eligibility criteria to answer a given research question. Its conduct uses explicit methods aimed at minimizing bias in order to produce more reliable findings regarding the effects of interventions for prevention, treatment, and rehabilitation that can be used to inform decision making.
Year introduced: 2019

PubMed search builder options

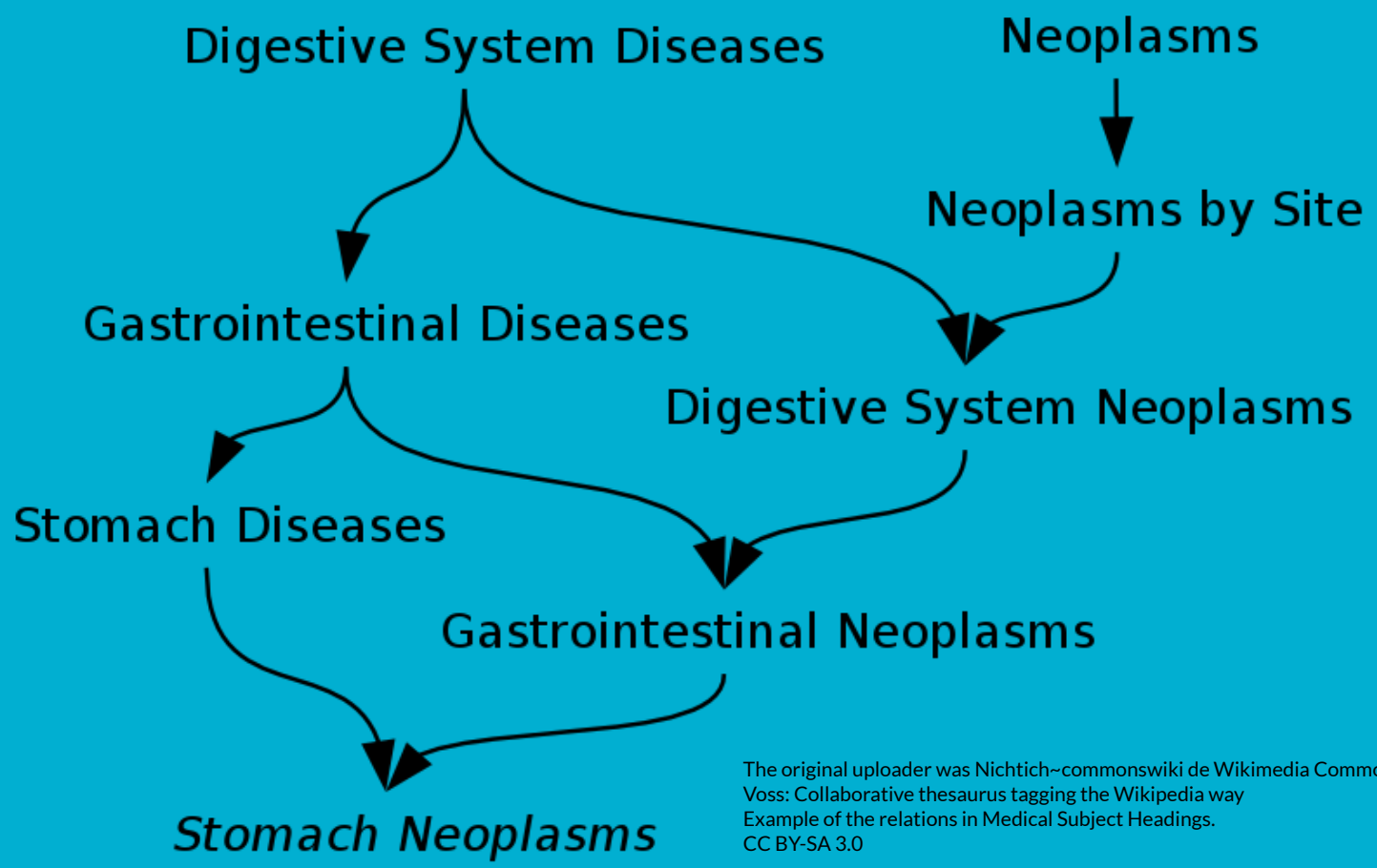
☐ Do not include MeSH terms found below this term in the MeSH hierarchy.

Tree Number(s): V03.850
MeSH Unique ID: D0000781882
Entry Terms:

- Review, Systematic

All MeSH Categories
Publication Type Category
Study Characteristics
Systematic Review

Medical Subject Headings (MeSH)



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Example of the relations in Medical Subject Headings.
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Casas Editoriales y Revistas como proveedores de esos “objetos”

Las revistas funcionan como repositorios de los artículos científicos

- Las revistas depositan registros de donde estan ubicados esos articulos y esos términos en las bases de datos.
- DOI
- PUBMED ID
- URL

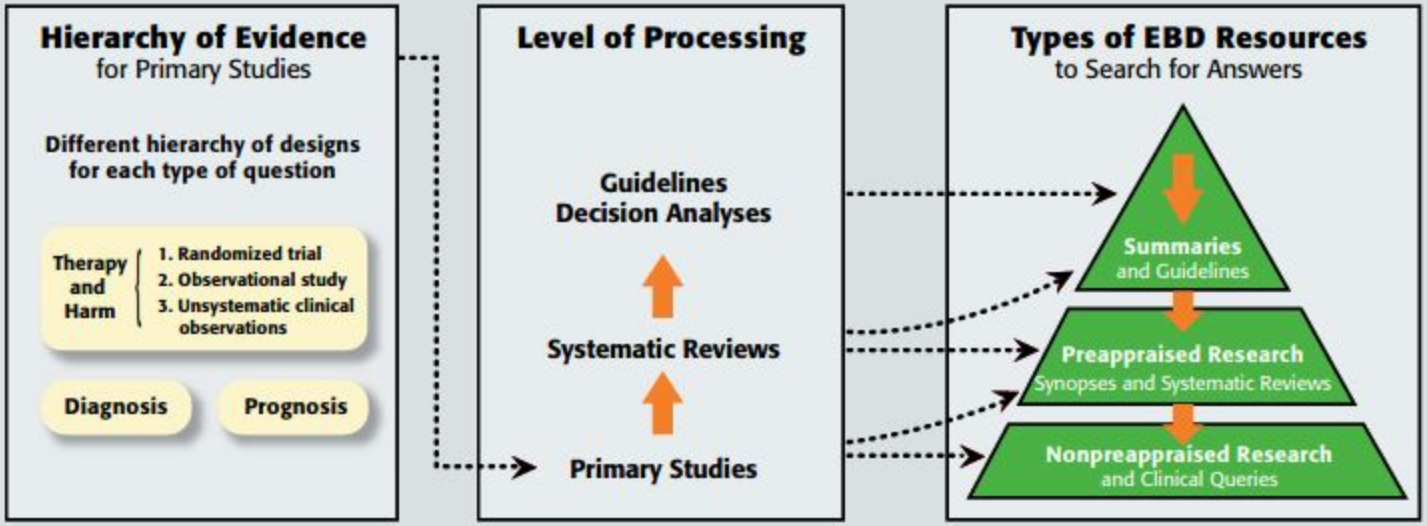
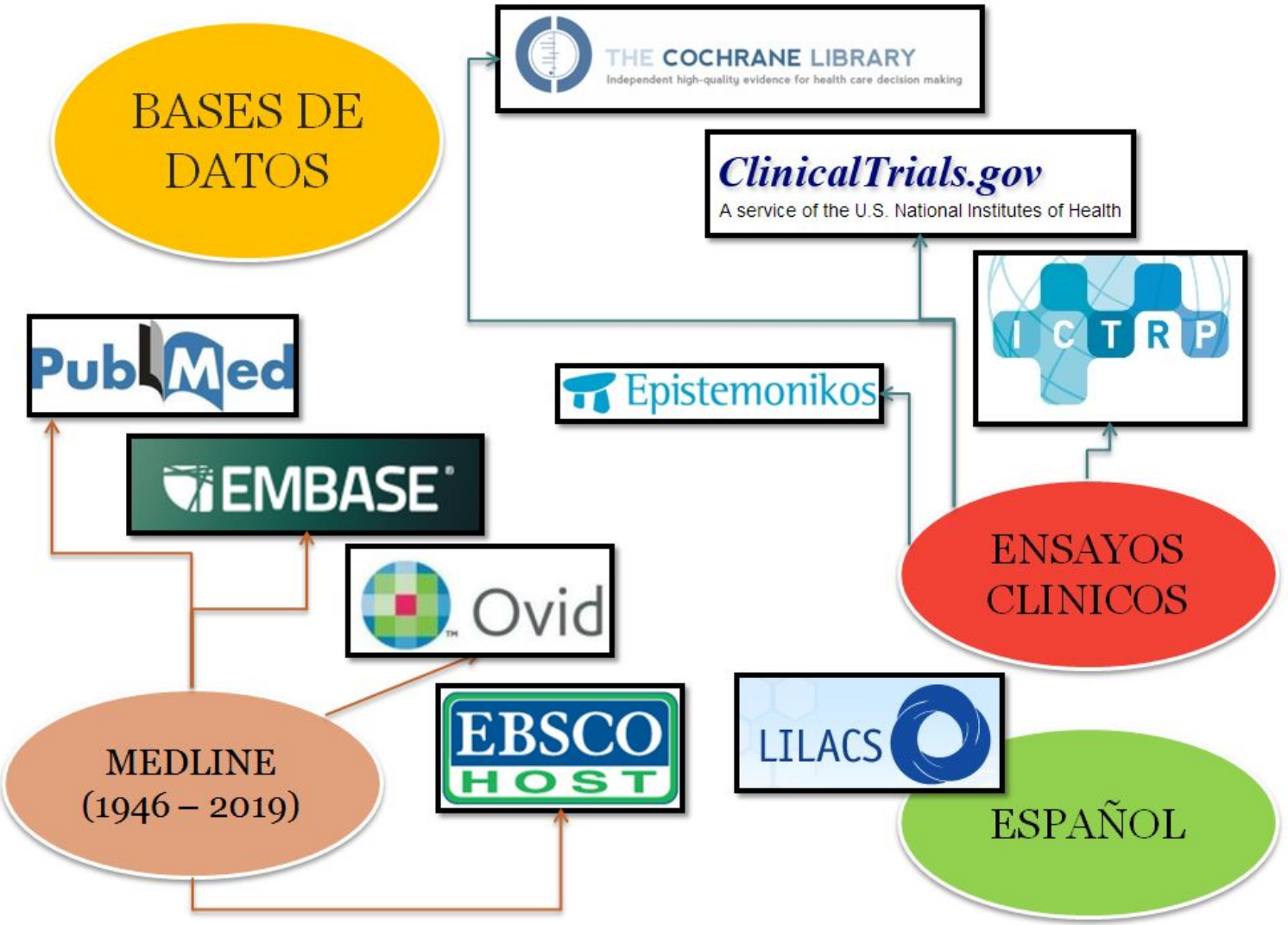
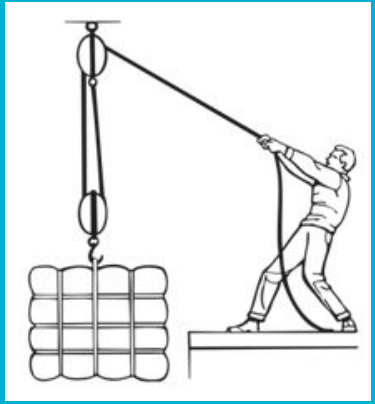


Figure. Types of evidence, according to their level of processing and resources to find them. The figure illustrates how to navigate across available types of evidence-based dentistry (EBD) resources. The left panel illustrates the hierarchy of evidence for primary studies, the middle panel helps determine the type of evidence for which to look and the right panel illustrates where to search for such evidence. Depending on the nature of the question, primary studies follow a hierarchy of study designs from lower to higher risk of bias (left panel). They can be processed further into systematic reviews, where they are comprehensively synthesized, and then clinical guidelines, which move from evidence to recommendations (middle panel). Once the desired evidence has been determined, the pyramid of types of EBD resources (right panel) helps to choose the type of resource in which to search for the evidence. Efficient searches should start from the top—for example, with online sources of summaries (such as DynaMed). These typically include more processed evidence, providing the gist and links to selected guidelines and systematic reviews. If no answer is found, sources of preappraised research (such as Evidence-Based Dentistry Journal) provide synopsis of selected and methodologically sound reviews and studies. Finally, large databases of nonpreappraised research (such as PubMed) contain all current studies, yet often are diluted by numerous citations irrelevant to the question. Reproduced with permission of the American Medical Association from Agoritsas and colleagues.[8] Copyright © 2015 American Medical Association.


BASES DE DATOS
THE COCHRANE LIBRARY
Independent high-quality evidence for health care decision making
ClinicalTrials.gov
A service of the U.S. National Institutes of Health
ICTRP
PubMed
Epistemonikos
EMBASE
Ovid
ENSAYOS CLINICOS
EBSCO HOST
LILACS
MEDLINE (1946 – 2019)
ESPAÑOL

Modalidades para consultar literatura:

Estrategia “Pull”



Implica construir una Pregunta Clínica Contestable:

- **PICO**
- **PEO**
- **PECOT**

Estrategia “Push”

Implica “SUSCRIBIRSE” a sistema de alertas digitales:

- **Tópicos selectos**
- **Curaduría en evidencia**
- **Con “Cambio en la Práctica Clínica”**

Con que Contamos Localmente:

- Usar PUBMED
- Usar Biblioteca Digital de la Universidad
  - ebsco
  - ovid
  - scopus
  - cochrane library
- Usar Epistemonikos
- Usar TripDatabase

Lógica de la búsqueda:

<Generar pregunta clínica>

<Definir los términos necesarios>

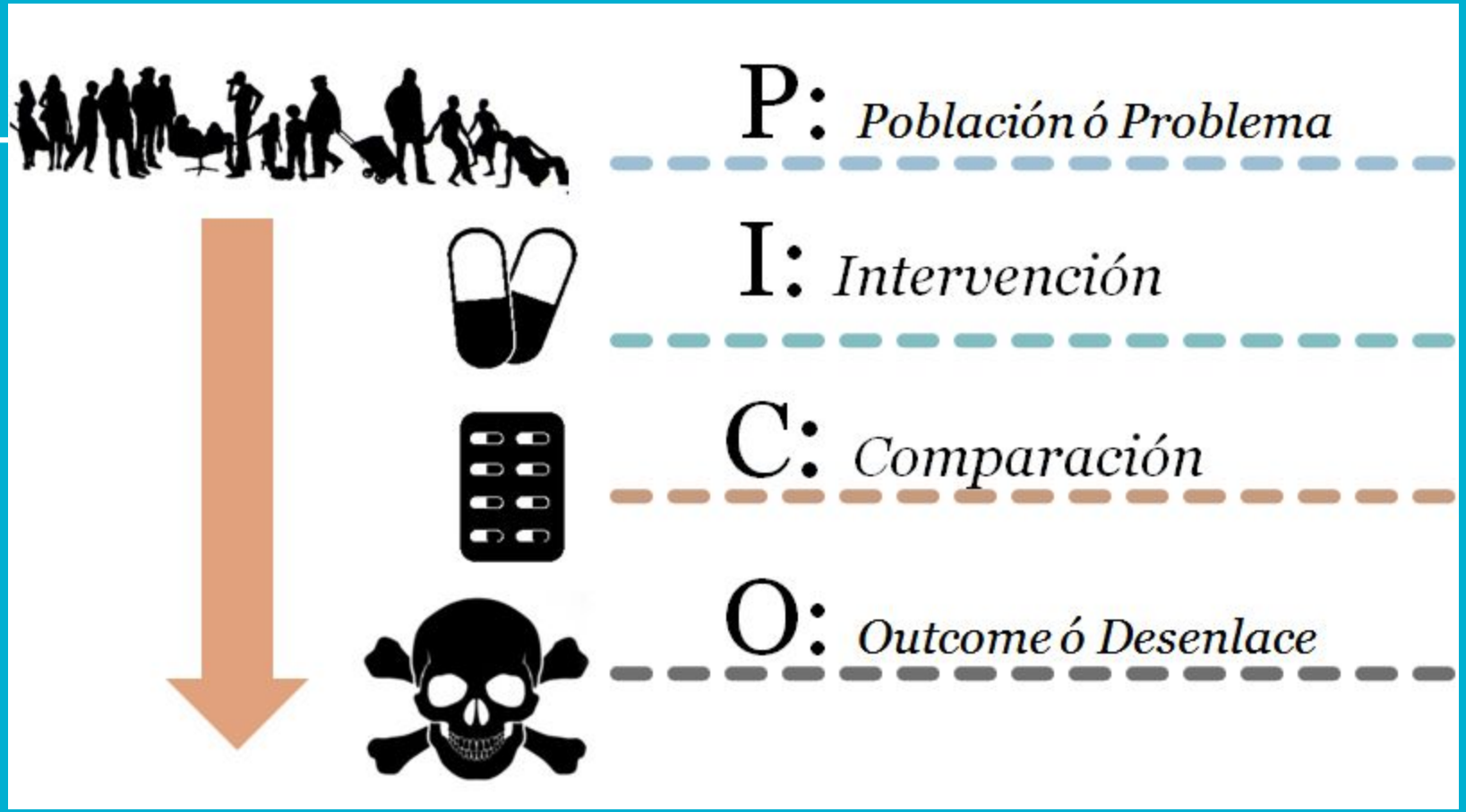
<Generar una sintaxis de búsqueda>

<Probar y refinar la búsqueda>

Uso de datos lógicos “booleanos”

Las computadoras usan una lógica para búsquedas y resultados, universalmente programados en todo su código y lenguaje.

AND	OR	NOT
(+)	(/)	(-)


P: Población ó Problema
I: Intervención
C: Comparación
O: Outcome ó Desenlace

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

NCBI Resources How To Sign in to NCBI

PubMed.gov
US National Library of Medicine
National Institutes of Health

PubMed Search

Advanced Help

PubMed

PubMed comprises more than 29 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.

Using PubMed

- PubMed Quick Start Guide
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PubMed Tools

- PubMed Mobile
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- Batch Citation Matcher
- Clinical Queries
- Topic-Specific Queries

More Resources

- MeSH Database
- Journals in NCBI Databases
- Clinical Trials
- E-Utilities (API)
- LinkOut

Latest Literature

New articles from highly accessed journals

- Cell (4)
- Chest (1)
- Circulation (11)
- Cochrane Database Syst Rev (1)

Trending Articles

PubMed records with recent increases in activity

Autophagy induction via STING trafficking is a primordial function of the cGAS pathway.
Nature. 2019.

Long-term follow-up of the RESONATE™ phase 3 trial of ibrutinib versus ofatumumab.
Blood. 2019.

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

NCBI Resources How To Sign in to NCBI

PubMed.gov
US National Library of Medicine
National Institutes of Health

PubMed Search

Search PubMed. Use up and down arrows to choose an item from the autocomplete.

Help

Recent
PubMed
All
All Databases
Assembly
Biocollections
BioProject
BioSample
BioSystems
Books
ClinVar
Clone
Conserved Domains
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dbVar
EST
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Genome
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GEO Profiles

PubMed

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https://www.ncbi.nlm.nih.gov/pubmed/advanced

NCBI Resources How To Sign in to NCBI

PubMed Home More Resources Help

PubMed Advanced Search Builder

YouTube Tutorial

Use the builder below to create your search

Edit Clear

Builder

All Fields Show index list

AND All Fields Show index list

Search or Add to history

Bases de datos locales:

Especializadas:

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Cochrane Central Register of Controlled Trials
Issue 5 of 12, May 2019

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2019 12685
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2017 118052
2016 112272
2015 93749

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1 **Classical homeopathic therapy of neurodermitis**
J Siebenwirth, J Rakoski
Der hautarzt; zeitschrift für dermatologie, venerologie, und verwandte gebiete, **1997**, 48(Suppl), S22 | added to CENTRAL: 31 October 2009 | 2009 Issue 4

2 **Cisplatin /Carboplatin/cyclophosphamide (CCP) vs cisplatin/cyclophosphamide (CP) in stage III-IV epithelial ovarian cancer: a French randomized phase III study**

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biblioteca virtual en salud

LILACS

Organización Panamericana de la Salud

Organización Mundial de la Salud
Oficina Regional para las Américas

BIREME
Centro Latinoamericano y del Caribe de Información en Ciencias de la Salud

english português

LILACS es el más importante y abarcador índice de la literatura científica y técnica en Salud de América Latina y de Caribe. Desde hace 32 años contribuye al aumento de la visibilidad, del acceso y de la calidad de la información en la Región.

LILACS en números

26 países

896 revistas

871.291 registros

725.617 artículos

92.224 monografías

43.768 tesis

457.791 textos completos

Última actualización:
13/05/2019

Búsqueda

Todos los índices | Buscar

Búsqueda via formulario iAH

Tipo de estudio

- Revisión sistemática
- Revisión sistemática (*validada*)
- Revisión integrativa
- Sintesis de evidencias

- Ensayo clínico controlado
- Evaluación económica en salud
- Evaluación de tecnologías sanitárias
- Overview

Como buscar

- Como buscar en LILACS
- Búsqueda de Ensayos Clínicos Controlados en LILACS

Acerca de LILACS

- Guías, manuales y normas técnicas
- Referencias acerca de LILACS
- Portal de la Metodología LILACS (documentos para la Red LILACS)

Destacados

- La adhesión al Movimiento de Acceso Abierto es realidad en LILACS. Conozca:
- Recomendación sobre Acceso Abierto y Contenido En Línea en LILACS

Noticias LILACS

- Diretores CDE/OPAS e PANAFTOSA visitam a BIREME. O Dr. Marcos Espinal, Diretor do Departamento de Doenças Transmissíveis da OPAS/OMS (CDE) e o Dr. Ottorino Cosivi, Diretor do Centro Pan-Americano de Febre Aftosa (PANAFTOSA), visitam o Instituto Butantan e a BIREME.pic.twitter.com/pqb3bUSKBP
- Hoy en la reunión de coordinación @redelilacs la presentación de Ing. @fernandoardito sobre el proceso de evaluación y selección de revistas para LILACS en Perú! @BVS_Peru @BVSPERUpic.twitter.com/iGzyME2PEQ
- Acontece agora: sessão sobre "Criação de registros Bibliográficos de Monográficos e Documentos não Convencionais (Literatura cinzenta) no FI-Admin"!pic.twitter.com/iZiY2PL719

https://www.epistemonikos.org/es/matrixes/5509912fdfbaca1cf79f0bb4#

Epistemonikos Acerca de Ayuda Contacto Mi panel de evidencia netscience89@gmail.com

Antibioticos versus apendicectomía para la apendicitis aguda no complicada

Marzo 18, 2015 *Felipe Moraga Torres, FERNANDO CROVARI, Vanessa Ahumada Farías, Rubén Francisco Allende Salazar*

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28 Estudios primarios 28.6% Ensayo controlado aleatorizado (ECA) 8 / 28

24 Revisiones sistemáticas

	Eriksson S 1995	Hansson J 2009	Vons C 2011	Turhan AN 2009	Styrud J 2006	Liu K 2007	Abes M 2007	Salminen P 2015	Park HC 2014	Hansson J 2012	Malik AA 2009	Di Saveno S 2014	Svensson JF 2015	Mudri M 2017	Armstrong J 2014	Hartvich J 2016	Mahida JB 2016	Minneci PC 2016	Tanaka Y 2015	Minneci PC 2014	Gorter RR 2015	Kaneko K 2004	Steiner Z 2015	Caruso AM 2017	Park HC 2011	Koike Y 2014	Paudel GR 2010	Minneci PC 2014
Wilms IM 2011	■		■	■	■						■																	
Liu ZH 2014	■	■		■	■																							
Fitzmaurice GJ 2011		■			■	■	■				■																	
Ansaloni L 2011	■	■			■						■																	
Varadhan KK 2010	■	■			■																							
Liu K 2011	■	■		■	■	■					■																	
Varadhan KK 2012	■	■	■		■																							
Mason RJ 2012	■	■	■		■						■																	
Sallinen V 2016	■	■	■		■			■					■															
Rollins KE 2016	■	■	■		■			■																				
Podda M 2017	■		■	■	■			■																				
Harnoss JC 2017	■	■	■	■	■			■	■	■																		
Sakran JV 2017	■	■	■		■			■																				
Poon SHT 2017	■	■	■	■	■			■																				
Ehlers AP 2016	■	■	■	■	■			■																				
Talutis SD 2017	■	■	■	■	■			■	■		■	■						■		■								
Kessler U 2017													■	■		■		■	■									
Horst JA 2015							■						■		■					■								

https://www.scopus.com/results/results.uri?sort=plf-f&src=s&st1=acute+appendicitis+AND+children&nlo=&nlr=&nls=&sid=58904ff01c1...

Scopus

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46 document results

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TITLE-ABS-KEY (acute AND appendicitis AND children) AND (LIMIT-TO (PUBYEAR , 2019)) AND (LIMIT-TO (DOCTYPE , "ar"))

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Search within results...

Refine results

Limit to Exclude

Access type

Open Access (13)

Other (33)

Year

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	Document title	Authors	Year	Source	Cited by
1	Diagnostic Utilization and Accuracy of Pediatric Appendicitis Imaging at Adult and Pediatric Centers	Jones, R.E., Gee, K.M., Preston, S.C., Babb, J.L., Beres, A.L.	2019	Journal of Surgical Research 240, pp. 97-103	0

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KU SCHOOL OF MEDICINE WICHITA The University of Kansas

SUMSearch 2

KU MEDICAL CENTER The University of Kansas

Search Pubmed for studies, systematic reviews and guidelines:

acute appendicitis AND children

Connect search terms with 'AND'.

Focus:	Intervention	Diagnosis	None
Age:	Adult	Pediatrics	Either
Human only: ☑	English only: ☐	Require abstracts: ☑	
Max # iterations:	5	6	Explain
Target # of original studies:	20	50	Explain

MeSH - Enviar - Please click once.

News:

- 7/22/2018: National Guidelines Clearinghouse no long available.
- Comparison of SUMSearch, Scholar, PubMed published

About SUMSearch 2

Other resources:

- Citation maker
- Clnical epi calculator (with Bayesian statistics)
- Health care policy search
- Internet browser bookmarklets
- Internet browser search plugins
- openRules (open source, collaborative prediction rules)
  (currently has New Pooled Cohort ASCVD Risk Equations and Mayo rule for pulmonary nodules
- WikiDoc

Keep up:

ACP Journal Club:

- Review: Some ED triage systems better predict ED mortality than in-hospital mortality or hospitalization (posted: 4/15/2019)
- Some patient interventions increased thiazide prescriptions and improved blood pressure control (posted: 4/15/2019)
- Inhaled tranexamic acid improved recovery from hemoptysis compared with placebo (posted: 4/15/2019)
- In early prostate cancer, radical prostatectomy reduced mortality more than watchful waiting at 23 years (posted: 4/15/2019)
- Review: In adults with AF and HF, AF catheter ablation vs drug therapy reduces mortality and HF hospitalizations (posted: 4/15/2019)
- In older postmenopausal women with osteopenia, zoledronate reduced fragility fractures at 6 years (posted: 4/15/2019)
- Review: Opioids improve chronic noncancer pain, but difference may not be clinically meaningful in most patients (posted: 4/15/2019)
- In type 2 diabetes with periodontitis, intensive periodontitis treatment improved glycemic control at 1 year (posted: 4/15/2019)
- Review: Rapid-acting analogues do not differ from regular human insulin for mortality or HbA 1c in type 2 diabetes (posted: 4/15/2019)
- Guideline: Starting dual antiplatelet therapy ≤ 24 h after high-risk TIA or minor ischemic stroke is recommended (posted: 4/15/2019)

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Para más información:

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Dirección: Sierra Mojada 950, Edificio P, Primer Nivel, Col. Independencia, C.P. 44340, Guadalajara, Jal.

Teléfono: (33) 1058 5200, ext. 33872.

Email: netzahualpilli.delgado@udgvirtual.udg.mx