1.

TY - JOUR

DB - Embase Preprint

AN - 2028429715

T1 - C-section and systemic inflammation synergize to disrupt the neonatal gut microbiota and brain development in a model of prematurity

A1 - Morin C.

A1 - Faure F.

A1 - Guenoun D.

A1 - Sautet I.

A1 - Diao S.

A1 - Faivre V.

A1 - Hua J.

A1 - Schwendimann L.

A1 - Mokhtari A.

A1 - Martin R.

A1 - Chadi S.

A1 - Demene C.

A1 - Delahaye-Duriez A.

A1 - Diaz-Heijtz R.

A1 - Fleiss B.

A1 - Matrot B.

A1 - Auger S.

A1 - Tanter M.

A1 - Van Steenwinckel J.

A1 - Gressens P.

A1 - Bokobza C.

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AO - Fleiss, Bobbi; ORCID: https://orcid.org/0000-0001-7828-673X

Y1 - 2023//

N2 - Infants born very preterm (below 28 weeks of gestation) are at high risk of developing neurodevelopmental disorders, such as intellectual deficiency, autism spectrum disorders, and attention deficit. Preterm birth often occurs in the context of perinatal systemic inflammation due to chorioamnionitis and postnatal sepsis (Dammann, O. and Leviton, A., Intermittent or sustained systemic inflammation and the preterm brain. Pediatr Res, 2014. 75(3): p. 376-80). In addition, C-section is often performed for very preterm neonates to avoid hypoxia during a vaginal delivery (Luca, A.,et al., Birth trauma in preterm spontaneous vaginal and cesarean section deliveries: A 10-years retrospective study. PloS one,2022, 17(10), e0275726.) We have developed and characterized a mouse model based on intraperitoneal injections of IL-1b between postnatal days one and five to reproduce perinatal systemic inflammation (Favrais, G.,et al., Systemic inflammation disrupts the developmental program of white matter. Ann Neurol,2011. 70(4): p. 550-65). This model replicates several neuropathological, brain imaging, and behavioral deficits observed in preterm infants. We hypothesized that C-sections could synergize with systemic inflammation to induce more severe brain abnormalities. We observed that C-sections significantly exacerbated the deleterious effects of IL-1b on reduced gut microbial diversity, increased levels of circulating peptidoglycans, abnormal microglia/macrophage reactivity, impaired myelination, and reduced functional connectivity in the brain relative to vaginal delivery plus intraperitoneal saline. These data demonstrate the deleterious synergistic effects of C-section and neonatal systemic inflammation on brain maldevelopment and malfunction, two conditions frequently observed in very preterm infants, who are at high risk of developing neurodevelopmental disorders.Copyright The copyright holder for this preprint is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under a CC-BY-NC-ND 4.0 International license.

KW - animal model

KW - attention deficit hyperactivity disorder

KW - birth injury

KW - \*brain development

KW - \*cesarean section

KW - chorioamnionitis

KW - controlled study

KW - drug therapy

KW - functional connectivity

KW - hypoxia

KW - infant

KW - \*inflammation

KW - \*intestine

KW - \*intestine flora

KW - intraperitoneal drug administration

KW - macrophage

KW - \*mental disease

KW - microbial diversity

KW - \*microglia

KW - mouse model

KW - \*myelination

KW - neuroimaging

KW - newborn

KW - nonhuman

KW - pregnancy

KW - \*prematurity

KW - retrospective study

KW - sepsis

KW - \*social interaction

KW - vaginal delivery

KW - very premature birth

KW - white matter

KW - dextropropoxyphene

KW - interleukin 1beta

KW - peptidoglycan

KW - sodium chloride

KW - preprint

JF - bioRxiv

JA - bioRxiv

LA - English

SP -

CY - United States

PB - bioRxiv

SN - 2692-8205 (electronic)

SN - 2692-8205

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UR - https://www.biorxiv.org

DO - https://dx.doi.org/10.1101/2023.10.20.563256

PT - Preprint

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=empp&NEWS=N&AN=2028429715

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=empp&DO=10.1101%2f2023.10.20.563256Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Morin&issn=2692-8205&title=bioRxiv&atitle=C-section+and+systemic+inflammation+synergize+to+disrupt+the+neonatal+gut+microbiota+and+brain+development+in+a+model+of+prematurity&volume=&issue=&spage=&epage=&date=2023&doi=10.1101%2F2023.10.20.563256&pmid=&sid=OVID:embase

C1 - Database: Embase Classic+Embase <1947 to 2024 April 19>

Search Strategy:

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1 intestine flora.mp. or exp intestine flora/ (111514)

2 exp microbiome/ or exp intestine flora/ or gut microbio\*.mp. (155568)

3 exp intensive care/ or exp hospital care/ or exp artificial ventilation/ or exp icu triage/ (1170783)

4 critical illness.mp. or critical illness/ (46017)

5 critical care.mp. or intensive care/ (194112)

6 mechanical ventilation.mp. or exp artificial ventilation/ (283913)

7 exp health care associated pneumonia/ or exp pneumonia/ (437441)

8 exp sepsis/ or sepsis.mp. (412219)

9 septic shock.mp. or exp septic shock/ (84440)

10 septicaemia.mp. or exp septicemia/ (29293)

11 exp mental health/ (261113)

12 mental illness.mp. or mental disease/ (336941)

13 exp long term depression/ or exp chronic depression/ or exp Montgomery Asberg Depression Rating Scale/ or exp major depression/ or exp "Hospital Anxiety and Depression Scale"/ or depression.mp. or exp "Hospital Anxiety and Depression Scale-Anxiety"/ or exp "mixed anxiety and depression"/ or exp depression/ (969732)

14 exp anxiety/ or exp "Hospital Anxiety and Depression Scale-Depression"/ or exp anxiety disorder/ or exp Generalized Anxiety Disorder Scale/ or exp Generalized Anxiety Disorder-7/ or anxiety.mp. or exp "Hospital Anxiety and Depression Scale"/ (697284)

15 exp posttraumatic stress disorder/ or post traumatic disorder.mp. (84723)

16 exp delirium/ or delirium.mp. (52149)

17 dysbiosis.mp. or exp dysbiosis/ or exp intestine flora/ (124897)

18 1 or 2 or 17 (164020)

19 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 (1883811)

20 11 or 12 or 13 or 14 or 15 or 16 (1742560)

21 18 and 19 and 20 (304)

22 18 and 19 (7965)

23 19 and 20 (87859)

24 18 and 20 (7037)

25 22 or 23 or 24 (102253)

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2.

TY - JOUR

DB - Embase Weekly Updates

AN - 2031145168

T1 - The injury of major organs and expression of inflammatory cytokines in mice with early infection of Vibrio vulnificus through respiratory tract

A1 - Zhang L.

A1 - Liu J.-F.

A1 - Zhou L.-J.

A1 - Ma H.

Y1 - 2023//

N2 - Objective Establishing animal model of Vibrio vulnificus (V. vulnificus) early infection via respiratory tract, to observe the survival, pathological changes of target organs and the expression changes of inflammatory cytokines in model mice, and to provide references for the relevant prevention and treatment strategies. Methods A total of 24 healthy female BALB/c mice (8 to 10 weeks old) were randomly divided into 4 groups (6 mice per group), including control group and three infection groups (low, medium and high concentration of infection, respectively), based on which the V. vulnificus infection models were established by intranasal administration. The survival statistics, status of defecation, hair and respiration as well as mental state of mice were monitored during 0-12 h early infection progress. Hematoxylin-eosin (HE) staining was performed on the important organs of mice to analyze the pathological manifestations, and immunohistochemical staining was used to detect the expression of interleukin (IL)-6, IL-10, interferon-gamma (IFN-gamma) and tumor necrosis factor-alpha (TNF-alpha) in the target organs. Mouse inflammation panel combined with flow cytometry was used to further detect the changes of multiple inflammatory and anti-inflammatory cytokines in serum. Results V. vulnificus infection via respiratory tract caused mice deterioration in survival rate, defecation, hair status, respiratory tract and mental state within 12 h. HE pathological analysis showed inflammatory cell infiltration and cell necrosis in ileum, lung, liver and spleen of mice in different infection groups, and the injury was much severer in high concentration of infection group. Immunohistochemical results reflected the positive expression rates of IL-6, IL-10, IFN-gamma and TNF-alpha in ileum, lung, liver and spleen of mice in medium and high concentration of infection groups were significantly higher than those in control group (P<0.05). The results of mouse inflammation panel and flow cytometry showed that compared with the control group, the expression levels of TNF-alpha and monocyte chemotactic protein (MCP)-1 in all three infection groups were significantly increased (P<0.05), and the expression level of IL-27 significantly decreased (P<0.05); the expression levels of IL-1beta, IL-6, IL-17A and granulocyte-macrophage colony-stimulating factor (GM-CSF) were significantly increased in medium and high concentration of infection groups (P<0.05); the expression levels of IL-1alpha, IL-23, IL-12p70 and IFN-gamma were significantly increased in high concentration of infection group (P<0.05). Conclusions V. vulnificus infection progressed rapidly through respiratory tract in mice, and lung, intestine, liver and spleen were major target organs. Accompanied by increased secretion of multiple serum inflammatory cytokines, V. vulnificus infection through respiratory tract might further causes severe inflammatory reaction in hosts.Copyright © 2023 People's Military Medical Press. All rights reserved.

KW - abdominal pain

KW - animal experiment

KW - animal model

KW - animal tissue

KW - article

KW - article

KW - Bagg albino mouse

KW - cell infiltration

KW - controlled study

KW - cytokine production

KW - defecation

KW - dual energy X ray absorptiometry

KW - enzyme linked immunosorbent assay

KW - female

KW - flow cytometry

KW - hair

KW - heart rate

KW - histopathology

KW - ileum

KW - immunofluorescence

KW - immunohistochemistry

KW - inflammation

KW - intestine

KW - intestine flora

KW - intranasal drug administration

KW - lung

KW - mental health

KW - mouse

KW - mouse model

KW - nonhuman

KW - \*organ injury

KW - protein expression

KW - respiration control

KW - \*respiratory system

KW - spinal cord injury

KW - spleen

KW - staining

KW - statistics

KW - survival analysis

KW - survival rate

KW - target organ

KW - Vibrio vulnificus

KW - \*Vibrio vulnificus infection

KW - eosin

KW - gamma interferon/ec [Endogenous Compound]

KW - granulocyte macrophage colony stimulating factor/ec [Endogenous Compound]

KW - hematoxylin

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 12p70/ec [Endogenous Compound]

KW - interleukin 13/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1alpha/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - interleukin 23/ec [Endogenous Compound]

KW - interleukin 27/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - monocyte chemotactic protein/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

JF - Medical Journal of Chinese People's Liberation Army

JA - Med. J. Chin. Peoples Liberation Army

LA - Chinese

VL - 48

IS - 12

SP - 1378

EP - 1386

CY - China

PB - People's Military Medical Press

SN - 0577-7402

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UR - http://zh.jfjyxzz.org.cn/thesisDetails#10.11855/j.issn.0577-7402.2568.2023.0324&lang=en

DO - https://dx.doi.org/10.11855/j.issn.0577-7402.2568.2023.0324

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2031145168

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.11855%2fj.issn.0577-7402.2568.2023.0324Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=0577-7402&title=Medical+Journal+of+Chinese+People%27s+Liberation+Army&atitle=&volume=48&issue=12&spage=1378&epage=1386&date=2023&doi=10.11855%2Fj.issn.0577-7402.2568.2023.0324&pmid=&sid=OVID:embase

3.

TY - JOUR

DB - Embase Weekly Updates

AN - 2026153737

ID - 37849008 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37849008]

T1 - Interaction of Clostridioides difficile infection with frailty and cognition in the elderly: a narrative review

A1 - Fernandez-Cotarelo M.-J.

A1 - Jackson-Akers J.Y.

A1 - Nagy-Agren S.E.

A1 - Warren C.A.

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Y1 - 2023//

N2 - Purpose: Clostridioides difficile infection (CDI) is the leading cause of antibiotic-related diarrhea and healthcare-associated infections, affecting in particular elderly patients and their global health. This review updates the understanding of this infection, with focus on cognitive impairment and frailty as both risk factors and consequence of CDI, summarizing recent knowledge and potential mechanisms to this interplay. Method(s): A literature search was conducted including terms that would incorporate cognitive and functional impairment, aging, quality of life, morbidity and mortality with CDI, microbiome and the gut-brain axis. Result(s): Advanced age remains a critical risk for severe disease, recurrence, and mortality in CDI. Observational and quality of life studies show evidence of functional loss in older people after acute CDI. In turn, frailty and cognitive impairment are independent predictors of death following CDI. CDI has long-term impact in the elderly, leading to increased risk of readmissions and mortality even months after the acute event. Immune senescence and the aging microbiota are key in susceptibility to CDI, with factors including inflammation and exposure to luminal microbial products playing a role in the gut-brain axis. Conclusion(s): Frailty and poor health status are risk factors for CDI in the elderly. CDI affects quality of life, cognition and functionality, contributing to a decline in patient health over time and leading to early and late mortality. Narrative synthesis of the evidence suggests a framework for viewing the cycle of functional and cognitive decline in the elderly with CDI, impacting the gut-brain and gut-muscle axes.Copyright © 2023, BioMed Central Ltd., part of Springer Nature.

KW - aged

KW - brain-gut axis

KW - Charlson Comorbidity Index

KW - \*Clostridium difficile infection/dt [Drug Therapy]

KW - \*Clostridium difficile infection/pc [Prevention]

KW - \*cognitive defect

KW - community acquired pneumonia/dt [Drug Therapy]

KW - cytokine production

KW - delirium

KW - dementia

KW - diarrhea

KW - disease burden

KW - dysbiosis

KW - fecal oral transmission

KW - \*frailty

KW - hospital readmission

KW - human

KW - immunosenescence

KW - in-hospital mortality

KW - inflammaging

KW - intestine flora

KW - microbial diversity

KW - mild cognitive impairment

KW - multiple chronic conditions

KW - muscle mass

KW - nervous system inflammation

KW - nonhuman

KW - quality of life

KW - recurrent infection

KW - review

KW - sarcopenia

KW - antibiotic agent/dt [Drug Therapy]

KW - antibiotic agent/pv [Special Situation for Pharmacovigilance]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/po [Oral Drug Administration]

KW - vancomycin/pv [Special Situation for Pharmacovigilance]

XT - vancomycin

XT - antibiotic agent

XT - community acquired pneumonia

XT - aged

XT - Clostridium difficile infection

XT - aged

JF - European Journal of Medical Research

JA - Eur. J. Med. Res.

LA - English

VL - 28

IS - 1

SP - 439

CY - United Kingdom

PB - BioMed Central Ltd

SN - 0949-2321

SN - 2047-783X

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UR - https://eurjmedres.biomedcentral.com

DO - https://dx.doi.org/10.1186/s40001-023-01432-9

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2026153737

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1186%2fs40001-023-01432-9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fernandez-Cotarelo&issn=0949-2321&title=European+Journal+of+Medical+Research&atitle=Interaction+of+Clostridioides+difficile+infection+with+frailty+and+cognition+in+the+elderly%3A+a+narrative+review&volume=28&issue=1&spage=439&epage=&date=2023&doi=10.1186%2Fs40001-023-01432-9&pmid=37849008&sid=OVID:embase

4.

TY - JOUR

DB - Embase Weekly Updates

AN - 2030934387

T1 - Gut Metabolites Acting on the Gut-Brain Axis: Regulating the Functional State of Microglia

A1 - Deng W.

A1 - Yi P.

A1 - Xiong Y.

A1 - Ying J.

A1 - Lin Y.

A1 - Dong Y.

A1 - Wei G.

A1 - Wang X.

A1 - Hua F.

Y1 - 2024//

N2 - The gut-brain axis is a communication channel that mediates a complex interplay of intestinal flora with the neural, endocrine, and immune systems, linking gut and brain functions. Gut metabolites, a group of small molecules produced or consumed by biochemical processes in the gut, are involved in central nervous system regulation via the highly interconnected gut-brain axis affecting microglia indirectly by influencing the structure of the gut-brain axis or directly affecting microglia function and activity. Accordingly, pathological changes in the central nervous system are connected with changes in intestinal metabolite levels as well as altered microglia function and activity, which may contribute to the pathological process of each neuroinflammatory condition. Here, we discuss the mechanisms by which gut metabolites, for instance, the bile acids, short-chain fatty acids, and tryptophan metabolites, regulate the structure of each component of the gut-brain axis, and explore the important roles of gut metabolites in the central nervous system from the perspective of microglia. At the same time, we highlight the roles of gut metabolites affecting microglia in the pathogenesis of neurodegenerative diseases and neurodevelopmental disorders. Understanding the relationship between microglia, gut microbiota, neuroinflammation, and neurodevelopmental disorders will help us identify new strategies for treating neuropsychiatric disorders.Copyright © 2023 Deng W. et al.

KW - algorithm

KW - Alzheimer disease

KW - antidepressant activity

KW - anxiety

KW - blood brain barrier

KW - \*brain-gut axis

KW - clinical feature

KW - data analysis

KW - depression

KW - diet

KW - down regulation

KW - dysbiosis

KW - fecal microbiota transplantation

KW - feces microflora

KW - gene overexpression

KW - human

KW - intestine flora

KW - intestine mucosa permeability

KW - KEGG

KW - lipid diet

KW - machine learning

KW - mental disease

KW - \*metabolic regulation

KW - \*metabolite

KW - \*microglia

KW - multiple sclerosis

KW - nervous system inflammation

KW - neuropsychiatry

KW - neurotransmission

KW - review

KW - sepsis associated encephalopathy

KW - signal transduction

KW - transepithelial resistance

KW - tryptophan metabolism

KW - bile acid

KW - gamma interferon/ec [Endogenous Compound]

KW - glycosaminoglycan

KW - intercellular adhesion molecule 1/ec [Endogenous Compound]

KW - lipopolysaccharide

KW - neurotransmitter

KW - short chain fatty acid

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vascular cell adhesion molecule 1/ec [Endogenous Compound]

JF - Aging and Disease

JA - Aging Dis.

LA - English

VL - 15

IS - 2

SP - 480

EP - 502

CY - United States

PB - International Society on Aging and Disease

SN - 2152-5250 (electronic)

SN - 2152-5250

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UR - https://www.aginganddisease.org/EN/10.14336/AD.2024.0123

DO - https://dx.doi.org/10.14336/AD.2023.0727

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2030934387

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.14336%2fAD.2023.0727Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Deng&issn=2152-5250&title=Aging+and+Disease&atitle=Gut+Metabolites+Acting+on+the+Gut-Brain+Axis%3A+Regulating+the+Functional+State+of+Microglia&volume=15&issue=2&spage=480&epage=502&date=2024&doi=10.14336%2FAD.2023.0727&pmid=&sid=OVID:embase

5.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028461870

ID - 38317437 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38317437]

T1 - Antimicrobial prescribing guidelines for dairy cattle

A1 - House J.K.

A1 - Izzo M.M.

A1 - Page S.W.

A1 - Browning G.F.

A1 - Norris J.M.

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Y1 - 2024//

KW - abdominal pain

KW - abomasum

KW - Actinobacillus lignieresii

KW - anorexia

KW - antibiotic resistance

KW - antibiotic sensitivity

KW - antimicrobial activity

KW - antimicrobial therapy

KW - arthrocentesis

KW - article

KW - Aspergillus fumigatus

KW - ataxia

KW - Bacillus cereus

KW - bacteremia

KW - bacterial colonization

KW - bacterial endocarditis

KW - bacterial infection

KW - Bacteroides

KW - blepharospasm

KW - bronchopneumonia

KW - Campylobacter jejuni

KW - Chlamydia pecorum

KW - chronic pyelonephritis

KW - Clostridium perfringens

KW - coccidiosis

KW - commercial phenomena

KW - conjunctivitis

KW - Cryptosporidium

KW - cystitis

KW - \*dairy cattle

KW - dairy industry

KW - decision making

KW - depression

KW - digital dermatitis

KW - dysphagia

KW - endometritis

KW - endotoxemia

KW - Escherichia coli

KW - fascioliasis

KW - fever

KW - fly control

KW - food safety

KW - Fusobacterium necrophorum

KW - gangrene

KW - granulation tissue

KW - heart failure

KW - human

KW - infectious bovine keratoconjunctivitis

KW - intestine flora

KW - joint swelling

KW - laceration

KW - Lactobacillus

KW - laparotomy

KW - laryngitis

KW - Listeria monocytogenes

KW - listeriosis

KW - lumpy jaw

KW - Mannheimia haemolytica

KW - mass spectrometry

KW - mastitis

KW - meningoencephalitis

KW - milk production

KW - milk yield

KW - Mycoplasma bovis

KW - newborn sepsis

KW - nonhuman

KW - osteomyelitis

KW - osteoporosis

KW - paracentesis

KW - Pasteurella multocida

KW - pericardiocentesis

KW - pericarditis

KW - peritonitis

KW - petechia

KW - pharmacodynamics

KW - pharmacokinetics

KW - polymerase chain reaction

KW - polyserositis

KW - polyuria

KW - \*prescribing guideline

KW - Prevotella

KW - Prevotella melaninogenica

KW - Pseudomonas aeruginosa

KW - pustule

KW - pyelonephritis

KW - retained placenta

KW - risk assessment

KW - Rotavirus

KW - salmonellosis

KW - sepsis

KW - Staphylococcus aureus

KW - stillbirth

KW - Streptococcus uberis

KW - stridor

KW - surgical drainage

KW - systolic heart murmur

KW - tachycardia

KW - tenesmus

KW - tracheostomy

KW - tracheotomy

KW - treatment duration

KW - umbilical hernia

KW - urinary tract infection

KW - vaccination

KW - vibriosis

KW - wound infection

KW - Yersinia enterocolitica

KW - amoxicillin

KW - ampicillin

KW - \*antiinfective agent

KW - benzathine penicillin

KW - ceftiofur

KW - cefuroxime

KW - cephalosporin

KW - cloxacillin

KW - corticosteroid

KW - dexamethasone

KW - erythromycin

KW - florfenicol

KW - folic acid

KW - furosemide

KW - ketoprofen

KW - lasalocid

KW - lincomycin

KW - macrolide

KW - magnesium oxide

KW - meloxicam

KW - novobiocin

KW - omeprazole

KW - oxytetracycline

KW - pectin

KW - peracetic acid

KW - procaine penicillin

KW - ranitidine

KW - spectinomycin

KW - tilmicosin

KW - tulathromycin

KW - tylosin

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T1 - Genus Paeonia monoterpene glycosides: A systematic review on their pharmacological activities and molecular mechanisms

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Y1 - 2024//

N2 - Background: Genus Paeonia, which is the main source of Traditional Chinese Medicine (TCM) Paeoniae Radix Rubra (Chishao in Chinese), Paeoniae Radix Alba (Baishao in Chinese) and Moutan Cortex (Mudanpi in Chinese), is rich in active pharmaceutical ingredient such as monoterpenoid glycosides (MPGs). MPGs from Paeonia have extensive pharmacological effects, but the pharmacological effects and molecular mechanisms of MPGs has not been comprehensively reviewed. Purpose(s): MPGs compounds are one of the main chemical components of the genus Paeonia, with a wide variety of compounds and strong pharmacological activities, and the structure of the mother nucleus-pinane skeleton is similar to that of a cage. The purpose of this review is to summarize the pharmacological activity and mechanism of action of MPGs from 2012 to 2023, providing reference direction for the development and utilization of Paeonia resources and preclinical research. Method(s): Keywords and phrases are widely used in database searches, such as PubMed, Web of Science, Google Scholar and X-Mol to search for citations related to the new compounds, extensive pharmacological research and molecular mechanisms of MPGs compounds of genus Paeonia. Result(s): Modern research confirms that MPGs are the main compounds in Paeonia that exert pharmacological effects. MPGs with extensive pharmacological characteristics are mainly concentrated in two categories: paeoniflorin derivatives and albiflflorin derivatives among MPGs, which contains 32 compounds. Among them, 5 components including paeoniflorin, albiflorin, oxypaeoniflorin, 6'-O-galloylpaeoniflorin and paeoniflorigenone have been extensively studied, while the other 28 components have only been confirmed to have a certain degree of anti-inflammatory and anticomplementary effects. Studies of pharmacological effects are widely involved in nervous system, endocrine system, digestive system, immune system, etc., and some studies have identified clear mechanisms. MPGs exert pharmacological activity through multilateral mechanisms, including anti-inflammatory, antioxidant, inhibition of cell apoptosis, regulation of brain gut axis, regulation of gut microbiota and downregulation of mitochondrial apoptosis, etc. Conclusion(s): This systematic review delved into the pharmacological effects and related molecular mechanisms of MPGs. However, there are still some compounds in MPGs whose pharmacological effects and pharmacological mechanisms have not been clarified. In addition, extensive clinical randomized trials are needed to verify the efficacy and dosage of MPGs.Copyright © 2024 Elsevier GmbH

KW - acidity

KW - acute hemorrhagic pancreatitis/dt [Drug Therapy]

KW - acute kidney failure/dt [Drug Therapy]

KW - acute lung injury/dt [Drug Therapy]

KW - Akt/mTOR signaling

KW - alkalinity

KW - allergic contact dermatitis/dt [Drug Therapy]

KW - allergic rhinitis/dt [Drug Therapy]

KW - Alzheimer disease/dt [Drug Therapy]

KW - amygdala

KW - anaphylaxis/dt [Drug Therapy]

KW - antibacterial activity

KW - antiinflammatory activity

KW - antioxidant activity

KW - apoptosis

KW - asthma/dt [Drug Therapy]

KW - astrocyte

KW - atherosclerosis/dt [Drug Therapy]

KW - bleomycin-induced pulmonary fibrosis

KW - bone disease

KW - bone marrow suppression/dt [Drug Therapy]

KW - brain cancer

KW - brain injury

KW - brain-gut axis

KW - breast cancer/dt [Drug Therapy]

KW - BxPC-3 cell line

KW - canonical Wnt signaling

KW - cardiovascular disease

KW - cataract/dt [Drug Therapy]

KW - cell density

KW - cell migration

KW - cerebral ischemia reperfusion injury/dt [Drug Therapy]

KW - cerebrovascular disease

KW - chemical composition

KW - chemical structure

KW - Chinese medicine

KW - chronic inflammatory pain/dt [Drug Therapy]

KW - clinical practice

KW - cognitive defect/dt [Drug Therapy]

KW - colitis/dt [Drug Therapy]

KW - collagen-induced arthritis

KW - colon cancer/dt [Drug Therapy]

KW - colorectal cancer/dt [Drug Therapy]

KW - complement inhibition

KW - constipation/dt [Drug Therapy]

KW - contact dermatitis/dt [Drug Therapy]

KW - cytokine production

KW - degenerative disease/dt [Drug Therapy]

KW - dendritic cell

KW - dendritic spine

KW - depression/dt [Drug Therapy]

KW - diabetes mellitus/dt [Drug Therapy]

KW - diabetic complication

KW - diabetic foot/dt [Drug Therapy]

KW - diabetic nephropathy/dt [Drug Therapy]

KW - diabetic neuropathy/dt [Drug Therapy]

KW - diabetic retinopathy/dt [Drug Therapy]

KW - digestive system

KW - digestive system cancer

KW - digestive system disease

KW - disseminated intravascular clotting/dt [Drug Therapy]

KW - down regulation

KW - drug absorption

KW - \*drug activity

KW - drug bioavailability

KW - drug delivery system

KW - drug effect

KW - \*drug mechanism

KW - drug overdose

KW - drug research

KW - drug safety

KW - drug solubility

KW - dyspepsia/dt [Drug Therapy]

KW - endocrine disease

KW - endometrial disease/dt [Drug Therapy]

KW - fatty liver/dt [Drug Therapy]

KW - fibrosis

KW - genital system disease

KW - gestational diabetes/dt [Drug Therapy]

KW - glioblastoma/dt [Drug Therapy]

KW - glioma/dt [Drug Therapy]

KW - glycosylation

KW - HCT 116 cell line

KW - head and neck squamous cell carcinoma/dt [Drug Therapy]

KW - heart disease

KW - heart failure/dt [Drug Therapy]

KW - heart muscle ischemia/dt [Drug Therapy]

KW - heart ventricle remodeling/dt [Drug Therapy]

KW - hippocampus

KW - HL-60 cell line

KW - human

KW - hyperprolactinemia/dt [Drug Therapy]

KW - hypothalamus hypophysis adrenal system

KW - immune system

KW - immunopathology

KW - immunoregulation

KW - in vitro study

KW - inflammatory bowel disease/dt [Drug Therapy]

KW - inflammatory disease

KW - inflammatory pain/dt [Drug Therapy]

KW - information retrieval

KW - injury

KW - insulin resistance/dt [Drug Therapy]

KW - intestine flora

KW - intestine ischemia/dt [Drug Therapy]

KW - ischemic stroke/dt [Drug Therapy]

KW - isomer

KW - JNK signaling

KW - Jurkat cell line

KW - Klebsiella infection/dt [Drug Therapy]

KW - liver cancer

KW - liver fibrosis/dt [Drug Therapy]

KW - liver injury/dt [Drug Therapy]

KW - lung cancer/dt [Drug Therapy]

KW - lung fibrosis/dt [Drug Therapy]

KW - lupus erythematosus nephritis/dt [Drug Therapy]

KW - malignant neoplasm

KW - MAPK signaling

KW - MCF-7 cell line

KW - Medline

KW - meta analysis

KW - microflora

KW - molecular docking

KW - mood disorder/dt [Drug Therapy]

KW - mouse

KW - mRNA expression level

KW - nanotechnology

KW - neuroapoptosis

KW - neuroblastoma/dt [Drug Therapy]

KW - neurologic disease

KW - neuropathic pain/dt [Drug Therapy]

KW - neurotoxicity/dt [Drug Therapy]

KW - nonhuman

KW - Nrf2 signaling

KW - osteoarthritis/dt [Drug Therapy]

KW - osteoporosis/dt [Drug Therapy]

KW - ovariectomy-induced osteoporosis

KW - ovary polycystic disease/dt [Drug Therapy]

KW - oxidative stress

KW - \*Paeonia

KW - pain

KW - pancreas cancer/dt [Drug Therapy]

KW - Parkinson disease/dt [Drug Therapy]

KW - parkinsonism/dt [Drug Therapy]

KW - pH

KW - pharmacokinetic parameters

KW - physiotherapy

KW - phytotherapy

KW - Pi3K/Akt signaling

KW - postoperative pain/dt [Drug Therapy]

KW - posttraumatic stress disorder/dt [Drug Therapy]

KW - preclinical study

KW - prefrontal cortex

KW - prenatal stress/dt [Drug Therapy]

KW - proliferative glomerulonephritis/dt [Drug Therapy]

KW - promyelocytic leukemia/dt [Drug Therapy]

KW - protein expression

KW - pseudoallergy/dt [Drug Therapy]

KW - psoriasis/dt [Drug Therapy]

KW - pulmonary hypertension/dt [Drug Therapy]

KW - pyroptosis

KW - radiation injury/dt [Drug Therapy]

KW - Ranunculaceae

KW - rat

KW - RBL-2H3 cell line

KW - reperfusion injury

KW - retention time

KW - review

KW - rheumatoid arthritis/dt [Drug Therapy]

KW - rodent model

KW - rosacea/dt [Drug Therapy]

KW - search engine

KW - secondary osteoporosis/dt [Drug Therapy]

KW - sepsis/dt [Drug Therapy]

KW - SH-SY5Y cell line

KW - side effect

KW - skin disease

KW - soft stool

KW - spinal ganglion

KW - Sprague Dawley rat

KW - stomach cancer/dt [Drug Therapy]

KW - Streptococcus infection/dt [Drug Therapy]

KW - subarachnoid hemorrhage/dt [Drug Therapy]

KW - SW480 cell line

KW - synovitis

KW - systematic review

KW - systemic lupus erythematosus/dt [Drug Therapy]

KW - systems pharmacology

KW - T cell leukemia/dt [Drug Therapy]

KW - T-47D cell line

KW - Th1 Th2 balance

KW - THP-1 cell line

KW - thrombus/dt [Drug Therapy]

KW - U-251MG cell line

KW - U-87MG ATCC cell line

KW - ulcerative colitis/dt [Drug Therapy]

KW - upregulation

KW - urticaria/dt [Drug Therapy]

KW - uterine cervix cancer/dt [Drug Therapy]

KW - vitiligo/dt [Drug Therapy]

KW - Web of Science

KW - adenosine A1 receptor/ec [Endogenous Compound]

KW - \*albiflorin/dt [Drug Therapy]

KW - \*albiflorin/ig [Intragastric Drug Administration]

KW - \*albiflorin/iv [Intravenous Drug Administration]

KW - \*albiflorin/pd [Pharmacology]

KW - alpha synuclein/ec [Endogenous Compound]

KW - amyloid beta protein/ec [Endogenous Compound]

KW - antifibrotic agent/pd [Pharmacology]

KW - antiinfective agent/pd [Pharmacology]

KW - antiinflammatory agent/pd [Pharmacology]

KW - antineoplastic agent/pd [Pharmacology]

KW - antioxidant/pd [Pharmacology]

KW - apoptosis signal regulating kinase 1/ec [Endogenous Compound]

KW - aptamer

KW - beta catenin/ec [Endogenous Compound]

KW - brain derived neurotrophic factor/ec [Endogenous Compound]

KW - brexanolone/ec [Endogenous Compound]

KW - caspase 3/ec [Endogenous Compound]

KW - complement component C1q/ec [Endogenous Compound]

KW - cryopyrin/ec [Endogenous Compound]

KW - cyclic AMP/ec [Endogenous Compound]

KW - cyclic AMP dependent protein kinase/ec [Endogenous Compound]

KW - cyclic AMP responsive element binding protein/ec [Endogenous Compound]

KW - cyclin D1/ec [Endogenous Compound]

KW - cyclooxygenase 2/ec [Endogenous Compound]

KW - cytokeratin 17/ec [Endogenous Compound]

KW - fibroblast growth factor 2/ec [Endogenous Compound]

KW - gelatinase B/ec [Endogenous Compound]

KW - glucocorticoid receptor/ec [Endogenous Compound]

KW - glucose

KW - \*glycoside/pd [Pharmacology]

KW - heme oxygenase 1/ec [Endogenous Compound]

KW - hypoxia inducible factor 1alpha/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - inducible nitric oxide synthase/ec [Endogenous Compound]

KW - inflammasome/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 1beta converting enzyme/ec [Endogenous Compound]

KW - interleukin 22/ec [Endogenous Compound]

KW - interleukin 23/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lactone

KW - mammalian target of rapamycin/ec [Endogenous Compound]

KW - messenger RNA/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - microRNA 124/ec [Endogenous Compound]

KW - microRNA 15b/ec [Endogenous Compound]

KW - microRNA 210/ec [Endogenous Compound]

KW - mitogen activated protein kinase 1/ec [Endogenous Compound]

KW - mitogen activated protein kinase kinase 4/ec [Endogenous Compound]

KW - mitogen activated protein kinase p38/ec [Endogenous Compound]

KW - \*monoterpene/pd [Pharmacology]

KW - monoterpenoid

KW - moutan cortex

KW - \*paeoniflorin/dt [Drug Therapy]

KW - \*paeoniflorin/ig [Intragastric Drug Administration]

KW - \*paeoniflorin/ip [Intraperitoneal Drug Administration]

KW - \*paeoniflorin/iv [Intravenous Drug Administration]

KW - \*paeoniflorin/pd [Pharmacology]

KW - phenol

KW - phosphatidylinositol 3,4,5 trisphosphate 3 phosphatase/ec [Endogenous Compound]

KW - protein Bax/ec [Endogenous Compound]

KW - protein bcl 2/ec [Endogenous Compound]

KW - protein kinase B/ec [Endogenous Compound]

KW - protein kinase C delta/ec [Endogenous Compound]

KW - radix paeoniae alba

KW - radix paeoniae rubra

KW - Rho kinase/ec [Endogenous Compound]

KW - SAP90/PSD95 associated protein/ec [Endogenous Compound]

KW - serotonin/ec [Endogenous Compound]

KW - serotonin 2A receptor/ec [Endogenous Compound]

KW - stress activated protein kinase/ec [Endogenous Compound]

KW - suppressor of cytokine signaling 3/ec [Endogenous Compound]

KW - tiopronin

KW - toll like receptor 4/ec [Endogenous Compound]

KW - transcription factor FKHR/ec [Endogenous Compound]

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - unclassified drug

KW - vanilloid receptor 1/ec [Endogenous Compound]

KW - Wnt protein/ec [Endogenous Compound]

KW - microneedle

KW - bt 483 cell line

KW - chronic colitis/dt [Drug Therapy]

KW - chronic unpredictable mild stress/dt [Drug Therapy]

KW - deficient endometrial receptivity/dt [Drug Therapy]

KW - intestinal ischemia reperfusion injury

KW - septic myocardial dysfunction/dt [Drug Therapy]

KW - spiral ganglion neuron

KW - Streptococcus suis infection/dt [Drug Therapy]

KW - 4 o benzoylpaeoniflorin/pd [Pharmacology]

KW - 4 o galloylpaeoniflorin/pd [Pharmacology]

KW - 4 o methylbenzoylpaeoniflorin/pd [Pharmacology]

KW - 4 o methylpaeoniflorin/pd [Pharmacology]

KW - 4' o vanillylalbiflorin/pd [Pharmacology]

KW - 6' o galloylpaeoniflorin/dt [Drug Therapy]

KW - 6' o galloylpaeoniflorin/tu [Intratumoral Drug Administration]

KW - 6' o galloylpaeoniflorin/pd [Pharmacology]

KW - 6' o nicotinoylalbiflorin/pd [Pharmacology]

KW - 6' o paeoniflorin/pd [Pharmacology]

KW - benzoylalbiflorin/pd [Pharmacology]

KW - benzoylpaeoniflorin/dt [Drug Therapy]

KW - benzoylpaeoniflorin/ig [Intragastric Drug Administration]

KW - benzoylpaeoniflorin/pd [Pharmacology]

KW - beta benzoyloxypaeoniflorin/pd [Pharmacology]

KW - debenzoylalbiflorin/pd [Pharmacology]

KW - ethosome

KW - galloylalbiflorin/pd [Pharmacology]

KW - galloylpaeoniflorin/pd [Pharmacology]

KW - gasdermin D/ec [Endogenous Compound]

KW - microRNA 135a/ec [Endogenous Compound]

KW - moudanpioside F/pd [Pharmacology]

KW - mudanpioside A/pd [Pharmacology]

KW - mudanpioside B/pd [Pharmacology]

KW - mudanpioside C/pd [Pharmacology]

KW - mudanpioside D/pd [Pharmacology]

KW - mudanpioside e/pd [Pharmacology]

KW - mudanpioside H/pd [Pharmacology]

KW - oxypaeoniflora/dt [Drug Therapy]

KW - oxypaeoniflora/pd [Pharmacology]

KW - oxypaeoniflorin/dt [Drug Therapy]

KW - oxypaeoniflorin/ig [Intragastric Drug Administration]

KW - oxypaeoniflorin/pd [Pharmacology]

KW - paeonidanin/pd [Pharmacology]

KW - paeonidanin A/pd [Pharmacology]

KW - paeoniflorigenone/dt [Drug Therapy]

KW - paeoniflorigenone/pd [Pharmacology]

KW - paeoniflorin B/pd [Pharmacology]

KW - paeoniside A/pd [Pharmacology]

KW - paeoniside B/pd [Pharmacology]

KW - suffrupaeoniflorin A/pd [Pharmacology]

KW - suffrupaeoniflorin B/pd [Pharmacology]

KW - total glucosides of peony/dt [Drug Therapy]

KW - total glucosides of peony/ig [Intragastric Drug Administration]

KW - total glucosides of white paeony capsule/dt [Drug Therapy]

XT - acute hemorrhagic pancreatitis / drug therapy / paeoniflorin

XT - acute kidney failure / drug therapy / paeoniflorin

XT - acute lung injury / drug therapy / oxypaeoniflorin

XT - acute lung injury / drug therapy / paeoniflorin

XT - allergic contact dermatitis / drug therapy / paeoniflorin

XT - allergic rhinitis / drug therapy / paeoniflorin

XT - Alzheimer disease / drug therapy / albiflorin

XT - Alzheimer disease / drug therapy / paeoniflorin

XT - anaphylaxis / drug therapy / benzoylpaeoniflorin

XT - asthma / drug therapy / paeoniflorin

XT - atherosclerosis / drug therapy / albiflorin

XT - atherosclerosis / drug therapy / paeoniflorin

XT - bone marrow suppression / drug therapy / albiflorin

XT - bone marrow suppression / drug therapy / paeoniflorin

XT - breast cancer / drug therapy / paeoniflorigenone

XT - breast cancer / drug therapy / paeoniflorin

XT - cataract / drug therapy / paeoniflorin

XT - cerebral ischemia reperfusion injury / drug therapy / 6' o galloylpaeoniflorin

XT - cerebral ischemia reperfusion injury / drug therapy / paeoniflorin

XT - chronic colitis / drug therapy / paeoniflorin

XT - chronic inflammatory pain / drug therapy / paeoniflorin

XT - chronic unpredictable mild stress / drug therapy / paeoniflorin

XT - cognitive defect / drug therapy / albiflorin

XT - cognitive defect / drug therapy / paeoniflorin

XT - colitis / drug therapy / paeoniflorin

XT - colitis / drug therapy / total glucosides of peony

XT - colon cancer / drug therapy / paeoniflorin

XT - colorectal cancer / drug therapy / paeoniflorin

XT - constipation / drug therapy / paeoniflorin

XT - contact dermatitis / drug therapy / paeoniflorin

XT - deficient endometrial receptivity / drug therapy / paeoniflorin

XT - degenerative disease / drug therapy / paeoniflorin

XT - depression / drug therapy / albiflorin

XT - depression / drug therapy / paeoniflorin

XT - diabetes mellitus / drug therapy / paeoniflorin

XT - diabetic foot / drug therapy / paeoniflorin

XT - diabetic nephropathy / drug therapy / oxypaeoniflora

XT - diabetic nephropathy / drug therapy / paeoniflorin

XT - diabetic neuropathy / drug therapy / paeoniflorin

XT - diabetic retinopathy / drug therapy / paeoniflorin

XT - disseminated intravascular clotting / drug therapy / paeoniflorin

XT - dyspepsia / drug therapy / paeoniflorin

XT - endometrial disease / drug therapy / paeoniflorin

XT - fatty liver / drug therapy / paeoniflorin

XT - gestational diabetes / drug therapy / paeoniflorin

XT - glioblastoma / drug therapy / paeoniflorin

XT - glioma / drug therapy / paeoniflorin

XT - head and neck squamous cell carcinoma / drug therapy / paeoniflorigenone

XT - heart failure / drug therapy / paeoniflorin

XT - heart muscle ischemia / drug therapy / oxypaeoniflorin

XT - heart muscle ischemia / drug therapy / paeoniflorin

XT - heart ventricle remodeling / drug therapy / paeoniflorin

XT - hyperprolactinemia / drug therapy / paeoniflorin

XT - inflammatory bowel disease / drug therapy / paeoniflorin

XT - inflammatory pain / drug therapy / paeoniflorin

XT - insulin resistance / drug therapy / paeoniflorin

XT - intestine ischemia / drug therapy / paeoniflorin

XT - ischemic stroke / drug therapy / paeoniflorin

XT - Klebsiella infection / drug therapy / paeoniflorin

XT - liver fibrosis / drug therapy / paeoniflorin

XT - liver injury / drug therapy / paeoniflorin

XT - lung cancer / drug therapy / 6' o galloylpaeoniflorin

XT - lung fibrosis / drug therapy / paeoniflorin

XT - lupus erythematosus nephritis / drug therapy / paeoniflorin

XT - mood disorder / drug therapy / albiflorin

XT - neuroblastoma / drug therapy / 6' o galloylpaeoniflorin

XT - neuropathic pain / drug therapy / albiflorin

XT - neuropathic pain / drug therapy / paeoniflorin

XT - neurotoxicity / drug therapy / paeoniflorin

XT - osteoarthritis / drug therapy / paeoniflorin

XT - osteoporosis / drug therapy / 6' o galloylpaeoniflorin

XT - osteoporosis / drug therapy / albiflorin

XT - ovary polycystic disease / drug therapy / paeoniflorin

XT - pancreas cancer / drug therapy / paeoniflorin

XT - Parkinson disease / drug therapy / paeoniflorin

XT - parkinsonism / drug therapy / total glucosides of peony

XT - postoperative pain / drug therapy / paeoniflorin

XT - posttraumatic stress disorder / drug therapy / albiflorin

XT - prenatal stress / drug therapy / paeoniflorin

XT - proliferative glomerulonephritis / drug therapy / paeoniflorin

XT - promyelocytic leukemia / drug therapy / paeoniflorigenone

XT - pseudoallergy / drug therapy / paeoniflorin

XT - psoriasis / drug therapy / paeoniflorin

XT - pulmonary hypertension / drug therapy / paeoniflorin

XT - radiation injury / drug therapy / 6' o galloylpaeoniflorin

XT - rheumatoid arthritis / drug therapy / paeoniflorin

XT - rheumatoid arthritis / drug therapy / total glucosides of white paeony capsule

XT - rosacea / drug therapy / paeoniflorin

XT - secondary osteoporosis / drug therapy / paeoniflorin

XT - sepsis / drug therapy / paeoniflorin

XT - septic myocardial dysfunction / drug therapy / paeoniflorin

XT - stomach cancer / drug therapy / paeoniflorin

XT - Streptococcus infection / drug therapy / paeoniflorin

XT - Streptococcus suis infection / drug therapy / paeoniflorin

XT - subarachnoid hemorrhage / drug therapy / paeoniflorin

XT - systemic lupus erythematosus / drug therapy / paeoniflorin

XT - T cell leukemia / drug therapy / paeoniflorigenone

XT - thrombus / drug therapy / paeoniflorin

XT - ulcerative colitis / drug therapy / paeoniflorin

XT - urticaria / drug therapy / paeoniflorin

XT - uterine cervix cancer / drug therapy / paeoniflorigenone

XT - vitiligo / drug therapy / paeoniflorin

XT - 6' o galloylpaeoniflorin / drug therapy / cerebral ischemia reperfusion injury

XT - 6' o galloylpaeoniflorin / drug therapy / lung cancer

XT - 6' o galloylpaeoniflorin / drug therapy / neuroblastoma

XT - 6' o galloylpaeoniflorin / drug therapy / osteoporosis

XT - 6' o galloylpaeoniflorin / drug therapy / radiation injury

XT - albiflorin / drug therapy / Alzheimer disease

XT - albiflorin / drug therapy / atherosclerosis

XT - albiflorin / drug therapy / bone marrow suppression

XT - albiflorin / drug therapy / cognitive defect

XT - albiflorin / drug therapy / depression

XT - albiflorin / drug therapy / mood disorder

XT - albiflorin / drug therapy / neuropathic pain

XT - albiflorin / drug therapy / osteoporosis

XT - albiflorin / drug therapy / posttraumatic stress disorder

XT - benzoylpaeoniflorin / drug therapy / anaphylaxis

XT - oxypaeoniflora / drug therapy / diabetic nephropathy

XT - oxypaeoniflorin / drug therapy / acute lung injury

XT - oxypaeoniflorin / drug therapy / heart muscle ischemia

XT - paeoniflorigenone / drug therapy / breast cancer

XT - paeoniflorigenone / drug therapy / head and neck squamous cell carcinoma

XT - paeoniflorigenone / drug therapy / promyelocytic leukemia

XT - paeoniflorigenone / drug therapy / T cell leukemia

XT - paeoniflorigenone / drug therapy / uterine cervix cancer

XT - paeoniflorin / drug therapy / acute hemorrhagic pancreatitis

XT - paeoniflorin / drug therapy / acute kidney failure

XT - paeoniflorin / drug therapy / acute lung injury

XT - paeoniflorin / drug therapy / allergic contact dermatitis

XT - paeoniflorin / drug therapy / allergic rhinitis

XT - paeoniflorin / drug therapy / Alzheimer disease

XT - paeoniflorin / drug therapy / asthma

XT - paeoniflorin / drug therapy / atherosclerosis

XT - paeoniflorin / drug therapy / bone marrow suppression

XT - paeoniflorin / drug therapy / breast cancer

XT - paeoniflorin / drug therapy / cataract

XT - paeoniflorin / drug therapy / cerebral ischemia reperfusion injury

XT - paeoniflorin / drug therapy / chronic colitis

XT - paeoniflorin / drug therapy / chronic inflammatory pain

XT - paeoniflorin / drug therapy / chronic unpredictable mild stress

XT - paeoniflorin / drug therapy / cognitive defect

XT - paeoniflorin / drug therapy / colitis

XT - paeoniflorin / drug therapy / colon cancer

XT - paeoniflorin / drug therapy / colorectal cancer

XT - paeoniflorin / drug therapy / constipation

XT - paeoniflorin / drug therapy / contact dermatitis

XT - paeoniflorin / drug therapy / deficient endometrial receptivity

XT - paeoniflorin / drug therapy / degenerative disease

XT - paeoniflorin / drug therapy / depression

XT - paeoniflorin / drug therapy / diabetes mellitus

XT - paeoniflorin / drug therapy / diabetic foot

XT - paeoniflorin / drug therapy / diabetic nephropathy

XT - paeoniflorin / drug therapy / diabetic neuropathy

XT - paeoniflorin / drug therapy / diabetic retinopathy

XT - paeoniflorin / drug therapy / disseminated intravascular clotting

XT - paeoniflorin / drug therapy / dyspepsia

XT - paeoniflorin / drug therapy / endometrial disease

XT - paeoniflorin / drug therapy / fatty liver

XT - paeoniflorin / drug therapy / gestational diabetes

XT - paeoniflorin / drug therapy / glioblastoma

XT - paeoniflorin / drug therapy / glioma

XT - paeoniflorin / drug therapy / heart failure

XT - paeoniflorin / drug therapy / heart muscle ischemia

XT - paeoniflorin / drug therapy / heart ventricle remodeling

XT - paeoniflorin / drug therapy / hyperprolactinemia

XT - paeoniflorin / drug therapy / inflammatory bowel disease

XT - paeoniflorin / drug therapy / inflammatory pain

XT - paeoniflorin / drug therapy / insulin resistance

XT - paeoniflorin / drug therapy / intestine ischemia

XT - paeoniflorin / drug therapy / ischemic stroke

XT - paeoniflorin / drug therapy / Klebsiella infection

XT - paeoniflorin / drug therapy / liver fibrosis

XT - paeoniflorin / drug therapy / liver injury

XT - paeoniflorin / drug therapy / lung fibrosis

XT - paeoniflorin / drug therapy / lupus erythematosus nephritis

XT - paeoniflorin / drug therapy / neuropathic pain

XT - paeoniflorin / drug therapy / neurotoxicity

XT - paeoniflorin / drug therapy / osteoarthritis

XT - paeoniflorin / drug therapy / ovary polycystic disease

XT - paeoniflorin / drug therapy / pancreas cancer

XT - paeoniflorin / drug therapy / Parkinson disease

XT - paeoniflorin / drug therapy / postoperative pain

XT - paeoniflorin / drug therapy / prenatal stress

XT - paeoniflorin / drug therapy / proliferative glomerulonephritis

XT - paeoniflorin / drug therapy / pseudoallergy

XT - paeoniflorin / drug therapy / psoriasis

XT - paeoniflorin / drug therapy / pulmonary hypertension

XT - paeoniflorin / drug therapy / rheumatoid arthritis

XT - paeoniflorin / drug therapy / rosacea

XT - paeoniflorin / drug therapy / secondary osteoporosis

XT - paeoniflorin / drug therapy / sepsis

XT - paeoniflorin / drug therapy / septic myocardial dysfunction

XT - paeoniflorin / drug therapy / stomach cancer

XT - paeoniflorin / drug therapy / Streptococcus infection

XT - paeoniflorin / drug therapy / Streptococcus suis infection

XT - paeoniflorin / drug therapy / subarachnoid hemorrhage

XT - paeoniflorin / drug therapy / systemic lupus erythematosus

XT - paeoniflorin / drug therapy / thrombus

XT - paeoniflorin / drug therapy / ulcerative colitis

XT - paeoniflorin / drug therapy / urticaria

XT - paeoniflorin / drug therapy / vitiligo

XT - total glucosides of peony / drug therapy / colitis

XT - total glucosides of peony / drug therapy / parkinsonism

XT - total glucosides of white paeony capsule / drug therapy / rheumatoid arthritis

JF - Phytomedicine

JA - Phytomedicine

LA - English

VL - 127

SP - 155483

CY - Germany

PB - Elsevier GmbH

SN - 0944-7113

SN - 1618-095X

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UR - https://www.sciencedirect.com/science/journal/09447113

DO - https://dx.doi.org/10.1016/j.phymed.2024.155483

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2030752350

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1016%2fj.phymed.2024.155483Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Xu&issn=0944-7113&title=Phytomedicine&atitle=Genus+Paeonia+monoterpene+glycosides%3A+A+systematic+review+on+their+pharmacological+activities+and+molecular+mechanisms&volume=127&issue=&spage=155483&epage=&date=2024&doi=10.1016%2Fj.phymed.2024.155483&pmid=38432036&sid=OVID:embase

7.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029099635

ID - 38529276 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38529276]

T1 - Editorial: Characteristic clinical immune phenotypes and molecular mechanisms associated with inflammatory diseases

A1 - Pan S.

A1 - Xie D.

A1 - Gao C.

A1 - Xiong K.

Y1 - 2024//

KW - adaptive immunity

KW - adult respiratory distress syndrome

KW - Akkermansia muciniphila

KW - Alzheimer disease

KW - antibiotic therapy

KW - apoptosis

KW - brain-gut axis

KW - cell differentiation

KW - cognitive defect

KW - degenerative disease

KW - diabetic retinopathy

KW - editorial

KW - ferroptosis

KW - Gilles de la Tourette syndrome

KW - human

KW - immunological synapse

KW - immunomodulation

KW - inflammation

KW - \*inflammatory disease

KW - innate immunity

KW - intestine flora

KW - keratoconus

KW - major depression

KW - myopia

KW - necroptosis

KW - nervous system inflammation

KW - obesity

KW - osteoarthritis

KW - \*phenotype

KW - proteinuria

KW - regulatory T lymphocyte

KW - sepsis

KW - septic shock

KW - Takotsubo cardiomyopathy

KW - ventilator associated pneumonia

KW - wound healing

KW - cryopyrin/ec [Endogenous Compound]

KW - dopamine

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lymphotoxin

KW - microRNA/ec [Endogenous Compound]

KW - phosphoglycerate mutase

KW - phospholipid hydroperoxide glutathione peroxidase/ec [Endogenous Compound]

KW - synaptopodin/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 15

SP - 1384971

CY - Switzerland

PB - Frontiers Media SA

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2024.1384971

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029099635

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3389%2ffimmu.2024.1384971Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pan&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Editorial%3A+Characteristic+clinical+immune+phenotypes+and+molecular+mechanisms+associated+with+inflammatory+diseases&volume=15&issue=&spage=1384971&epage=&date=2024&doi=10.3389%2Ffimmu.2024.1384971&pmid=38529276&sid=OVID:embase

8.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029152740

T1 - Skin Lesions with Loss of Tissue and Cutaneous-Onset Sepsis: The Skin Infection-Sepsis Relationship

A1 - Patrascu A.-I.

A1 - Vata D.

A1 - Temelie-Olinici D.

A1 - Mocanu M.

A1 - Gugulus D.-L.

A1 - Marinescu M.

A1 - Stafie L.

A1 - Tarcau B.-M.

A1 - Cretu I.

A1 - Popescu I.-A.

A1 - Cimpoesu C.-D.

A1 - Gheuca-Solovastru L.

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Y1 - 2024//

N2 - Infectious and inflammatory dermatoses featuring skin lesions with loss of tissue expose skin layers to microbial invasions, disrupt the normal skin microbiome, and potentially lead to sepsis. However, literature data on the incidence of cutaneous-onset sepsis are scarce. This retrospective observational study assessed hospital admissions for primary skin lesions without bacterial infections and sepsis during 2020-2022 in the largest emergency hospital in NE Romania. Of 509 patients, 441 had infected lesions, 78 had sepsis caused by venous ulcers from microbial eczema cellulitis, superinfected bullous dermatoses, erysipelas, and erythroderma. Cultured samples revealed S. aureus, P. aeruginosa, and E. coli; and K. pneumoniae and S. beta-hemolytic associated with sepsis, even if this was rarer. Clinical manifestations included ulcerations, erosions, fissures, excoriations, bullae, vesicles, pruritus, tumefaction, edema, fever, chills, pain, adenopathy, and mildly altered mental status. Underlying chronic heart failure, atrial fibrillation, anemia, and type-1 diabetes mellitus were comorbidities associated with infection and sepsis. Significant associations and risk factors, including their combined effects, are discussed to draw attention to the need for further research and adequate management to prevent sepsis in adult patients of any age presenting with infected skin lesions (especially cellulitis) and comorbidities (especially type 1 diabetes mellitus and anemia).Copyright © 2024 by the authors.

KW - adult

KW - anemia

KW - article

KW - atrial fibrillation

KW - bacterial infection

KW - bullous skin disease

KW - cellulitis

KW - chill

KW - comorbidity

KW - controlled study

KW - dermatitis

KW - drug therapy

KW - eczema

KW - edema

KW - erysipelas

KW - erythroderma

KW - fever

KW - heart failure

KW - hemolysis

KW - hospital admission

KW - human

KW - human tissue

KW - incidence

KW - insulin dependent diabetes mellitus

KW - lymphadenopathy

KW - male

KW - mental health

KW - \*microbiome

KW - nonhuman

KW - observational study

KW - pain

KW - pruritus

KW - retrospective study

KW - risk factor

KW - Romania

KW - \*sepsis

KW - \*skin defect

KW - \*skin infection

KW - skin picking disorder

KW - stasis dermatitis

KW - subcorneal pustular dermatosis

JF - Diagnostics

JA - Diagn.

LA - English

VL - 14

IS - 6

SP - 659

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2075-4418 (electronic)

SN - 2075-4418

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UR - http://www.mdpi.com/journal/diagnostics/

DO - https://dx.doi.org/10.3390/diagnostics14060659

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029152740

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fdiagnostics14060659Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Patrascu&issn=2075-4418&title=Diagnostics&atitle=Skin+Lesions+with+Loss+of+Tissue+and+Cutaneous-Onset+Sepsis%3A+The+Skin+Infection-Sepsis+Relationship&volume=14&issue=6&spage=659&epage=&date=2024&doi=10.3390%2Fdiagnostics14060659&pmid=&sid=OVID:embase

9.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028524857

T1 - Natural products for the treatment of chemotherapy-related cognitive impairment and prospects of nose-to-brain drug delivery

A1 - He Y.-Q.

A1 - Zhou C.-C.

A1 - Jiang S.-G.

A1 - Lan W.-Q.

A1 - Zhang F.

A1 - Tao X.

A1 - Chen W.-S.

Y1 - 2024//

N2 - Chemotherapy-related cognitive deficits (CRCI) as one of the common adverse drug reactions during chemotherapy that manifest as memory, attention, and executive function impairments. However, there are still no effective pharmacological therapies for the treatment of CRCI. Natural compounds have always inspired drug development and numerous natural products have shown potential therapeutic effects on CRCI. Nevertheless, improving the brain targeting of natural compounds in the treatment of CRCI is still a problem to be overcome at present and in the future. Accumulated evidence shows that nose-to-brain drug delivery may be an excellent carrier for natural compounds. Therefore, we reviewed natural products with potential anti-CRCI, focusing on the signaling pathway of these drugs' anti-CRCI effects, as well as the possibility and prospect of treating CRCI with natural compounds based on nose-to-brain drug delivery in the future. In conclusion, this review provides new insights to further explore natural products in the treatment of CRCI.Copyright © 2024 He, Zhou, Jiang, Lan, Zhang, Tao and Chen.

KW - Alzheimer disease

KW - amino acid metabolism

KW - angiogenesis

KW - anxiety

KW - apoptosis

KW - atherosclerosis

KW - attention

KW - autism

KW - biocompatibility

KW - brain ischemia

KW - breast cancer

KW - cardiotoxicity

KW - cell proliferation

KW - cell survival

KW - Centella asiatica

KW - \*chemotherapy-related cognitive impairment

KW - choroid plexus

KW - cognition

KW - cognitive defect

KW - cytokine production

KW - degenerative disease

KW - depression

KW - DNA damage

KW - drug bioavailability

KW - \*drug delivery system

KW - drug development

KW - drug solubility

KW - dysbiosis

KW - excitotoxicity

KW - executive function

KW - ferroptosis

KW - Ganoderma lucidum

KW - hepatomegaly

KW - histopathology

KW - human

KW - immune response

KW - inflammation

KW - lipid metabolism

KW - lipid peroxidation

KW - lipophilicity

KW - MAPK signaling

KW - microemulsion

KW - mitochondrial biogenesis

KW - nanoemulsion

KW - nanotechnology

KW - nephrotoxicity

KW - nervous system inflammation

KW - neuroprotection

KW - neurotoxicity

KW - nonhuman

KW - oxidative stress

KW - Parkinson disease

KW - photosynthesis

KW - pyroptosis

KW - reperfusion injury

KW - review

KW - schizophrenia

KW - seizure

KW - sepsis

KW - signal transduction

KW - transcytosis

KW - traumatic brain injury

KW - ubiquitination

KW - wound healing

KW - acetylcholinesterase/ec [Endogenous Compound]

KW - caffeic acid

KW - carboplatin

KW - carmustine

KW - carotenoid

KW - catalase/ec [Endogenous Compound]

KW - catechin/ec [Endogenous Compound]

KW - ceruloplasmin/ec [Endogenous Compound]

KW - chitosan

KW - choline acetyltransferase/ec [Endogenous Compound]

KW - cisplatin

KW - citrulline

KW - corticosterone/ec [Endogenous Compound]

KW - curcumin

KW - cyclophosphamide

KW - digoxin

KW - docetaxel

KW - doxorubicin

KW - epigallocatechin gallate

KW - epinephrine

KW - epirubicin

KW - flavonoid

KW - flavonol

KW - glutathione

KW - influenza vaccine

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - methotrexate

KW - mitochondrial DNA

KW - nanocapsule

KW - nanofiber

KW - \*natural product

KW - oxaliplatin

KW - paclitaxel

KW - pentacyclic triterpene

KW - phosphatidylserine

KW - phycocyanin

KW - piceid

KW - polyphenol

KW - propolis

KW - quercetin

KW - reactive oxygen metabolite

KW - resveratrol

KW - saponin

KW - sertraline

KW - superoxide dismutase/ec [Endogenous Compound]

KW - temozolomide

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vinblastine

KW - vincristine

KW - xanthophyll

KW - \*nose to brain drug delivery

JF - Frontiers in Pharmacology

JA - Front. Pharmacol.

LA - English

VL - 15

SP - 1292807

CY - Switzerland

PB - Frontiers Media SA

SN - 1663-9812 (electronic)

SN - 1663-9812

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UR - http://www.frontiersin.org/Pharmacology

DO - https://dx.doi.org/10.3389/fphar.2024.1292807

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028524857

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3389%2ffphar.2024.1292807Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=He&issn=1663-9812&title=Frontiers+in+Pharmacology&atitle=Natural+products+for+the+treatment+of+chemotherapy-related+cognitive+impairment+and+prospects+of+nose-to-brain+drug+delivery&volume=15&issue=&spage=1292807&epage=&date=2024&doi=10.3389%2Ffphar.2024.1292807&pmid=&sid=OVID:embase

10.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028501330

ID - 38334893 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38334893]

T1 - Current perspectives on fecal microbiota transplantation in inflammatory bowel disease

A1 - Singh A.

A1 - Midha V.

A1 - Chauhan N.S.

A1 - Sood A.

AO - Sood, Ajit; ORCID: https://orcid.org/0000-0001-6961-6389

Y1 - 2024//

N2 - Fecal microbiota transplantation (FMT) has emerged as a promising therapeutic modality within the domain of inflammatory bowel disease (IBD). While FMT has secured approval and demonstrated efficacy in addressing recurrent and refractory Clostridioides difficile infection, its application in IBD remains an area of active exploration and research. The current status of FMT in IBD reflects a nuanced landscape, with ongoing investigations delving into its effectiveness, safety and optimal implementation. Early-stage clinical trials and observational studies have provided insights into the potential of FMT to modulate the dysbiotic gut microbiota associated with IBD, aiming to mitigate inflammation and promote mucosal healing. However, considerable complexities persist, including variations in donor selection, treatment protocols and outcome assessments. Challenges in standardizing FMT protocols for IBD treatment are compounded by the dynamic nature of the gut microbiome and the heterogeneity of IBD itself. Despite these challenges, enthusiasm for FMT in IBD emanates from its capacity to address gut microbial dysbiosis, signifying a paradigm shift towards more comprehensive approaches in IBD management. As ongoing research progresses, an enhanced understanding of FMT's role in IBD therapy is anticipated. This article synthesizes the current status of FMT in IBD, elucidating the attendant challenges and aspiring towards the refinement of its application for improved patient outcomes.Copyright © Indian Society of Gastroenterology 2024.

KW - abdominal pain

KW - allogeneic hematopoietic stem cell transplantation

KW - arthralgia

KW - arthritis

KW - bacteremia

KW - Bacteroides thetaiotaomicron

KW - Clostridium difficile infection

KW - colitis

KW - colonoscopy

KW - Crohn disease

KW - depression

KW - diarrhea

KW - disease duration

KW - donor selection

KW - dysbiosis

KW - environmental exposure

KW - Escherichia coli

KW - Eubacterium

KW - Faecalibacterium

KW - \*fecal microbiota transplantation

KW - fever

KW - Food and Drug Administration

KW - freeze drying

KW - freezing

KW - gastroscopy

KW - headache

KW - hepatic encephalopathy

KW - human

KW - ileitis

KW - inflammation

KW - \*inflammatory bowel disease

KW - intestine flora

KW - liver cirrhosis

KW - metagenomics

KW - microbial community

KW - microbial diversity

KW - Model For End Stage Liver Disease Score

KW - myelodysplastic syndrome

KW - outcome assessment

KW - patient selection

KW - Proteobacteria

KW - pseudomembranous colitis

KW - questionnaire

KW - randomized controlled trial (topic)

KW - review

KW - risk factor

KW - Roseburia

KW - scoring system

KW - sexual behavior

KW - Shigella

KW - treatment protocol

KW - ulcerative colitis

KW - upper respiratory tract infection

KW - urticaria

KW - antibiotic agent

KW - biological product

KW - corticosteroid

KW - extended spectrum beta lactamase

KW - tofacitinib

KW - ubiquinone

KW - medical device

KW - Crohn disease activity index score

KW - automatic purification system

KW - GenFMTer

JF - Indian Journal of Gastroenterology

JA - Indian J. Gastroenterol.

LA - English

VL - 43

IS - 1

SP - 129

EP - 144

CY - India

PB - Springer

SN - 0254-8860

SN - 0975-0711

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M2 - GenFMTer

C1 - GenFMTer

UR - https://www.springer.com/journal/12664

DO - https://dx.doi.org/10.1007/s12664-023-01516-8

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028501330

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1007%2fs12664-023-01516-8Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Singh&issn=0254-8860&title=Indian+Journal+of+Gastroenterology&atitle=Current+perspectives+on+fecal+microbiota+transplantation+in+inflammatory+bowel+disease&volume=43&issue=1&spage=129&epage=144&date=2024&doi=10.1007%2Fs12664-023-01516-8&pmid=38334893&sid=OVID:embase

11.

TY - JOUR

DB - Embase Weekly Updates

AN - 2030712828

T1 - Potential benefits and challenges on the use of phytochemicals for obese COVID-19 patients: A review

A1 - Abubakar M.B.

A1 - Yusuf A.P.

A1 - Usman D.

A1 - Abubakar I.B.

A1 - Katsayal B.S.

A1 - Sadiq I.Z.

A1 - Hassan S.M.

A1 - Forcados G.E.

A1 - Ibrahim K.G.

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Y1 - 2024//

N2 - Background: COVID-19 produces a great burden on obese individuals. Due to the age-long use of medicinal herbs in the management of obesity, their potential against the COVID-19 pandemic is increasingly investigated. This study aims to review phytochemicals or bioactive compounds with the potential of being useful for obese COVID-19 patients. Method(s): Using search terms that include pairwise combinations of either COVID-19 or obesity with each of nine selected phytochemicals (epigallocatechin gallate, rutin, astaxanthin, resveratrol, genistein, curcumin, quercetin, ellagic acid, and hesperidin). Relevant articles published from January 2009 to August 2023 were retrieved from PubMed. Result(s): A total of 43 papers (17 clinical trials, 12 preclinical studies, 3 systemic reviews of randomized controlled trials, and 11 other review papers) met the inclusion criteria and were discussed in this review. These include research articles reporting the anti-COVID-19 properties of the selected phytochemicals, which have previous or recent "clinical evidence" against overweight or obesity Conclusion(s): Phenolic compounds make up to eight out of the nine selected bioactive compounds and are, therefore, concluded to be the best class of phytochemicals for managing obese COVID-19 patients.Copyright © 2024

KW - adult respiratory distress syndrome

KW - antiinflammatory activity

KW - antioxidant activity

KW - anxiety

KW - atherosclerosis

KW - \*coronavirus disease 2019

KW - depression

KW - dietary intake

KW - dizziness

KW - dysbiosis

KW - dyslipidemia

KW - health care cost

KW - hospital mortality

KW - hospitalization

KW - human

KW - human cell

KW - hypertension

KW - inflammation

KW - insulin resistance

KW - mental disease

KW - MRC-5 cell line

KW - neurotoxicity

KW - \*obesity

KW - pandemic

KW - pneumonia

KW - randomized controlled trial (topic)

KW - review

KW - virus replication

KW - waist circumference

KW - angiotensin converting enzyme 2

KW - angiotensin receptor antagonist

KW - apolipoprotein B

KW - astaxanthin

KW - chloroquine

KW - curcumin

KW - ellagic acid

KW - epigallocatechin gallate

KW - farnesoid X receptor

KW - genistein

KW - glycoprotein

KW - hesperetin

KW - interleukin 6

KW - lopinavir

KW - low density lipoprotein cholesterol

KW - malonaldehyde

KW - \*phytochemical

KW - phytosterol

KW - polyphenol

KW - resveratrol

KW - ritonavir

KW - RNA directed RNA polymerase

KW - rutoside

JF - Phytomedicine Plus

JA - Phytomedicine Plus

LA - English

VL - 4

IS - 2

SP - 100526

CY - Netherlands

PB - Elsevier B.V.

SN - 2667-0313 (electronic)

SN - 2667-0313

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UR - https://www.sciencedirect.com/science/journal/26670313

DO - https://dx.doi.org/10.1016/j.phyplu.2024.100526

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2030712828

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1016%2fj.phyplu.2024.100526Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Abubakar&issn=2667-0313&title=Phytomedicine+Plus&atitle=Potential+benefits+and+challenges+on+the+use+of+phytochemicals+for+obese+COVID-19+patients%3A+A+review&volume=4&issue=2&spage=100526&epage=&date=2024&doi=10.1016%2Fj.phyplu.2024.100526&pmid=&sid=OVID:embase

12.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028105963

ID - 38255828 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38255828]

T1 - Resveratrol for the Management of Human Health: How Far Have We Come? A Systematic Review of Resveratrol Clinical Trials to Highlight Gaps and Opportunities

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A1 - Britton R.G.

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Y1 - 2024//

N2 - Resveratrol has long been proposed as being beneficial to human health across multiple morbidities, yet there is currently no conclusive clinical evidence to advocate its recommendation in any healthcare setting. A large cohort with high-quality clinical data and clearly defined biomarkers or endpoints are required to draw meaningful conclusions. This systematic review compiles every clinical trial conducted using a defined dose of resveratrol in a purified form across multiple morbidities to highlight the current 'state-of-play' and knowledge gaps, informing future trial designs to facilitate the realisation of resveratrol's potential benefits to human health. Over the last 20 years, there have been almost 200 studies evaluating resveratrol across at least 24 indications, including cancer, menopause symptoms, diabetes, metabolic syndrome, and cardiovascular disease. There are currently no consensus treatment regimens for any given condition or endpoint, beyond the fact that resveratrol is generally well-tolerated at a dose of up to 1 g/day. Additionally, resveratrol consistently reduces inflammatory markers and improves aspects of a dysregulated metabolism. In conclusion, over the last 20 years, the increasing weight of clinical evidence suggests resveratrol can benefit human health, but more large, high-quality clinical trials are required to transition this intriguing compound from health food shops to the clinic.Copyright © 2024 by the authors.

KW - abdominal pain/si [Side Effect]

KW - abnormal feces composition/si [Side Effect]

KW - add on therapy

KW - adipocyte

KW - adipose tissue

KW - adjuvant therapy

KW - adult

KW - aged

KW - alanine aminotransferase blood level

KW - albuminuria

KW - amnesia/si [Side Effect]

KW - AMPK signaling

KW - androgen blood level

KW - anthropometric parameters

KW - antiinflammatory activity

KW - aortic arch syndrome

KW - area under the curve

KW - aspartate aminotransferase blood level

KW - atherosclerosis/dt [Drug Therapy]

KW - autism/dt [Drug Therapy]

KW - blood pressure

KW - blood vessel reactivity

KW - body composition

KW - body mass

KW - body weight loss

KW - bone density

KW - brain blood flow

KW - brain size

KW - calcium metabolism

KW - caloric intake

KW - calorie

KW - cardiovascular disease/dt [Drug Therapy]

KW - cardiovascular function

KW - cell cycle

KW - cellulitis

KW - cerebrovascular accident

KW - chill/si [Side Effect]

KW - cholesterol blood level

KW - chronic kidney failure/dt [Drug Therapy]

KW - clinical outcome

KW - \*clinical trial (topic)

KW - comparative study

KW - connective tissue disease/si [Side Effect]

KW - consensus

KW - constipation/si [Side Effect]

KW - coronary artery disease/dt [Drug Therapy]

KW - creatinine blood level

KW - creatinine urine level

KW - crossover procedure

KW - cystocele/si [Side Effect]

KW - DAS28

KW - decreased appetite/si [Side Effect]

KW - depression/dm [Disease Management]

KW - depression/dt [Drug Therapy]

KW - diabetes mellitus

KW - diabetic foot/dt [Drug Therapy]

KW - diarrhea/si [Side Effect]

KW - disease activity

KW - disease activity score

KW - dizziness/si [Side Effect]

KW - down regulation

KW - drug bioavailability

KW - drug dose escalation

KW - drug dose increase

KW - drug dose reduction

KW - drug hypersensitivity/si [Side Effect]

KW - drug indication

KW - dyslipidemia

KW - dyspepsia/si [Side Effect]

KW - dysphagia/si [Side Effect]

KW - eczema/si [Side Effect]

KW - electrocardiogram

KW - elevated blood pressure/dt [Drug Therapy]

KW - endometriosis/dt [Drug Therapy]

KW - endothelial dysfunction/dt [Drug Therapy]

KW - energy expenditure

KW - energy metabolism

KW - enzyme activity

KW - epididymitis/si [Side Effect]

KW - estimated glomerular filtration rate

KW - evening dosage

KW - exercise

KW - fat content

KW - fat mass

KW - fatigue/si [Side Effect]

KW - fatty acid oxidation

KW - fatty liver

KW - feces composition

KW - female

KW - femur

KW - fever/si [Side Effect]

KW - flatulence/si [Side Effect]

KW - flow-mediated dilation test

KW - follow up

KW - gastroesophageal reflux/si [Side Effect]

KW - gastrointestinal disease/si [Side Effect]

KW - gastrointestinal symptom/si [Side Effect]

KW - gene expression

KW - genital system disease/si [Side Effect]

KW - gingivitis/dt [Drug Therapy]

KW - global longitudinal strain

KW - glucose blood level

KW - glucose homeostasis

KW - glucose metabolism

KW - glycemic control

KW - hand paresthesia/si [Side Effect]

KW - headache/si [Side Effect]

KW - \*health

KW - health care quality

KW - health food

KW - heart failure with reduced ejection fraction/dt [Drug Therapy]

KW - heart infarction/dt [Drug Therapy]

KW - heart left ventricle function

KW - heart ventricle contraction

KW - heartburn/si [Side Effect]

KW - hemoglobin blood level

KW - hepatic encephalopathy/dt [Drug Therapy]

KW - high intensity exercise

KW - homeostasis model assessment

KW - hot flush/si [Side Effect]

KW - human

KW - hypertensive patient

KW - hypoglycemia/si [Side Effect]

KW - hypotension/si [Side Effect]

KW - immunopathology/si [Side Effect]

KW - increased appetite/si [Side Effect]

KW - infection/si [Side Effect]

KW - infestation/si [Side Effect]

KW - inflammation

KW - injury/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - insulin blood level

KW - insulin metabolism

KW - insulin release

KW - insulin resistance/dt [Drug Therapy]

KW - insulin sensitivity

KW - insulin tolerance test

KW - intestine flora

KW - intoxication/si [Side Effect]

KW - kidney disease/si [Side Effect]

KW - kidney function

KW - knee osteoarthritis/dt [Drug Therapy]

KW - lethargy/si [Side Effect]

KW - leukopenia/si [Side Effect]

KW - lipid accumulation product index

KW - lipid blood level

KW - lipid fingerprinting

KW - lipid liver level

KW - lipoprotein blood level

KW - lumbar spine

KW - male

KW - male infertility/dt [Drug Therapy]

KW - malignant neoplasm

KW - medication compliance

KW - menopause

KW - mental function

KW - mental performance

KW - meta analysis

KW - metabolic parameters

KW - metabolic regulation

KW - metabolic syndrome X/dt [Drug Therapy]

KW - metabolism

KW - middle aged

KW - middle cerebral artery

KW - migraine/dt [Drug Therapy]

KW - mitochondrial biogenesis

KW - mitochondrial respiration

KW - morning dosage

KW - mRNA expression level

KW - muscle cramp/si [Side Effect]

KW - musculoskeletal disease/si [Side Effect]

KW - myalgia/si [Side Effect]

KW - National Institutes of Health Stroke Scale

KW - nausea/si [Side Effect]

KW - nervousness

KW - neurologic disease/si [Side Effect]

KW - neurovascular coupling

KW - nociception

KW - non insulin dependent diabetes mellitus/dt [Drug Therapy]

KW - nonalcoholic fatty liver/dt [Drug Therapy]

KW - nutritional disorder/si [Side Effect]

KW - obese patient

KW - obesity/dt [Drug Therapy]

KW - ovary polycystic disease/dt [Drug Therapy]

KW - oxidative stress

KW - parameters

KW - patient compliance

KW - periodontitis/dt [Drug Therapy]

KW - peripheral arterial disease/dt [Drug Therapy]

KW - peripheral blood mononuclear cell

KW - peripheral neuropathy/si [Side Effect]

KW - physical activity

KW - physical examination

KW - platelet reactivity

KW - pneumonia/dt [Drug Therapy]

KW - preeclampsia/dt [Drug Therapy]

KW - pregnancy outcome

KW - prostate size

KW - protein blood level

KW - proteinuria/si [Side Effect]

KW - pruritus/si [Side Effect]

KW - quality control

KW - quality of life

KW - randomized controlled trial (topic)

KW - rash/si [Side Effect]

KW - reactive hyperemia/dt [Drug Therapy]

KW - renin angiotensin aldosterone system

KW - respiratory tract disease/si [Side Effect]

KW - respiratory tract infection/si [Side Effect]

KW - restlessness/si [Side Effect]

KW - review

KW - rheumatoid arthritis/dt [Drug Therapy]

KW - schizophrenia/dt [Drug Therapy]

KW - side effect/si [Side Effect]

KW - single drug dose

KW - skeletal muscle

KW - skin disease/si [Side Effect]

KW - skin irritation/si [Side Effect]

KW - sleep quality

KW - social status

KW - somnolence/si [Side Effect]

KW - stable angina pectoris/dt [Drug Therapy]

KW - steatorrhea/si [Side Effect]

KW - stomach emptying

KW - stomach pain/si [Side Effect]

KW - subcutaneous tissue

KW - symptom

KW - systematic review

KW - systolic heart failure/dm [Disease Management]

KW - systolic heart failure/dt [Drug Therapy]

KW - tachycardia/si [Side Effect]

KW - thorax disease/si [Side Effect]

KW - thorax pain/si [Side Effect]

KW - thrombocytopenia/si [Side Effect]

KW - total antioxidant capacity

KW - treatment failure

KW - triacylglycerol blood level

KW - TWEAK signaling

KW - ulcer healing rate

KW - ulcerative colitis/dm [Disease Management]

KW - ulcerative colitis/dt [Drug Therapy]

KW - upper respiratory tract infection/si [Side Effect]

KW - upregulation

KW - urea blood level

KW - urinary tract disease/si [Side Effect]

KW - urinary tract infection/si [Side Effect]

KW - vascular disease/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - waist circumference

KW - walking

KW - wellbeing

KW - Wnt signaling

KW - xerostomia/si [Side Effect]

KW - acetylcysteine/cb [Drug Combination]

KW - acetylcysteine/dt [Drug Therapy]

KW - adiponectin/ec [Endogenous Compound]

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - alkaline phosphatase bone isoenzyme/ec [Endogenous Compound]

KW - alpha tocopherol/ec [Endogenous Compound]

KW - alteplase/cb [Drug Combination]

KW - alteplase/it [Drug Interaction]

KW - amoxicillin/dt [Drug Therapy]

KW - amoxicillin/pv [Special Situation for Pharmacovigilance]

KW - androgen/ec [Endogenous Compound]

KW - angiotensin 1 receptor/ec [Endogenous Compound]

KW - angiotensin converting enzyme 2/ec [Endogenous Compound]

KW - angiotensinogen/ec [Endogenous Compound]

KW - apolipoprotein A1/ec [Endogenous Compound]

KW - aromatic amino acid/ec [Endogenous Compound]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - atorvastatin/cb [Drug Combination]

KW - atorvastatin/dt [Drug Therapy]

KW - biochemical marker/ec [Endogenous Compound]

KW - biological marker/ec [Endogenous Compound]

KW - brain natriuretic peptide/ec [Endogenous Compound]

KW - C reactive protein/ec [Endogenous Compound]

KW - calcium/cb [Drug Combination]

KW - calcium/cm [Drug Comparison]

KW - calcium/dt [Drug Therapy]

KW - carboxy terminal telopeptide/ec [Endogenous Compound]

KW - carnitine palmitoyltransferase/ec [Endogenous Compound]

KW - CD14 antigen/ec [Endogenous Compound]

KW - CD16 antigen/ec [Endogenous Compound]

KW - cholesterol/ec [Endogenous Compound]

KW - citrate synthase/ec [Endogenous Compound]

KW - collagen type 4/ec [Endogenous Compound]

KW - copper zinc superoxide dismutase/ec [Endogenous Compound]

KW - creatinine/ec [Endogenous Compound]

KW - cytokeratin 18/ec [Endogenous Compound]

KW - fat droplet/ec [Endogenous Compound]

KW - fatty acid/ec [Endogenous Compound]

KW - fibroblast growth factor 2/ec [Endogenous Compound]

KW - fluorodeoxyglucose f 18

KW - fluoxetine/cb [Drug Combination]

KW - fluoxetine/dt [Drug Therapy]

KW - fructosamine/ec [Endogenous Compound]

KW - gelatinase B/ec [Endogenous Compound]

KW - glucagon/ec [Endogenous Compound]

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - glucose/ec [Endogenous Compound]

KW - glutathione peroxidase/ec [Endogenous Compound]

KW - glutathione transferase alpha/ec [Endogenous Compound]

KW - growth hormone/ec [Endogenous Compound]

KW - hemoglobin A1c/ec [Endogenous Compound]

KW - high density lipoprotein/ec [Endogenous Compound]

KW - high density lipoprotein cholesterol/ec [Endogenous Compound]

KW - hormone precursor/ec [Endogenous Compound]

KW - hydrogen sulfide/cm [Drug Comparison]

KW - hydrogen sulfide/dt [Drug Therapy]

KW - hydroxymethylglutaryl coenzyme A reductase kinase/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - incretin/ec [Endogenous Compound]

KW - insulin/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - isoprostane derivative/ec [Endogenous Compound]

KW - leptin/ec [Endogenous Compound]

KW - lipid/ec [Endogenous Compound]

KW - long chain acyl coenzyme A dehydrogenase

KW - low density lipoprotein/ec [Endogenous Compound]

KW - low density lipoprotein cholesterol/ec [Endogenous Compound]

KW - macrophage derived chemokine/ec [Endogenous Compound]

KW - malonaldehyde/ec [Endogenous Compound]

KW - meloxicam/cb [Drug Combination]

KW - meloxicam/dt [Drug Therapy]

KW - messenger RNA/ec [Endogenous Compound]

KW - metformin/cb [Drug Combination]

KW - metformin/dt [Drug Therapy]

KW - methylphenidate/cb [Drug Combination]

KW - methylphenidate/dt [Drug Therapy]

KW - n(g),n(g) dimethylarginine/ec [Endogenous Compound]

KW - nifedipine/cb [Drug Combination]

KW - nifedipine/dt [Drug Therapy]

KW - nitrate/ec [Endogenous Compound]

KW - nitrite/ec [Endogenous Compound]

KW - Notch receptor/ec [Endogenous Compound]

KW - omega 3 fatty acid/ec [Endogenous Compound]

KW - omega 6 fatty acid/ec [Endogenous Compound]

KW - oral antidiabetic agent/dt [Drug Therapy]

KW - oral antidiabetic agent/po [Oral Drug Administration]

KW - osteocalcin

KW - palmitic acid/ec [Endogenous Compound]

KW - pentraxin 3/ec [Endogenous Compound]

KW - peroxisome proliferator activated receptor alpha/ec [Endogenous Compound]

KW - piperine/cb [Drug Combination]

KW - plasma protein/ec [Endogenous Compound]

KW - prasterone sulfate/ec [Endogenous Compound]

KW - prodrug/cm [Drug Comparison]

KW - prodrug/dt [Drug Therapy]

KW - protein p16/ec [Endogenous Compound]

KW - protein p21/ec [Endogenous Compound]

KW - protein p53/ec [Endogenous Compound]

KW - \*resveratrol/ae [Adverse Drug Reaction]

KW - \*resveratrol/ct [Clinical Trial]

KW - \*resveratrol/cb [Drug Combination]

KW - \*resveratrol/cm [Drug Comparison]

KW - \*resveratrol/it [Drug Interaction]

KW - \*resveratrol/dt [Drug Therapy]

KW - \*resveratrol/iv [Intravenous Drug Administration]

KW - \*resveratrol/po [Oral Drug Administration]

KW - \*resveratrol/pk [Pharmacokinetics]

KW - \*resveratrol/pv [Special Situation for Pharmacovigilance]

KW - risperidone/cb [Drug Combination]

KW - sex hormone binding protein/ec [Endogenous Compound]

KW - sirtuin 1/ec [Endogenous Compound]

KW - STAT5b protein/ec [Endogenous Compound]

KW - stromelysin/ec [Endogenous Compound]

KW - testosterone/ec [Endogenous Compound]

KW - tetrahydrolipstatin/ae [Adverse Drug Reaction]

KW - tetrahydrolipstatin/cb [Drug Combination]

KW - tetrahydrolipstatin/dt [Drug Therapy]

KW - tetrahydrolipstatin/ec [Endogenous Compound]

KW - tissue inhibitor of metalloproteinase 1/ec [Endogenous Compound]

KW - transcription factor/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - tumor necrosis factor ligand superfamily member 12/ec [Endogenous Compound]

KW - unclassified drug

KW - urea/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

KW - very low density lipoprotein/ec [Endogenous Compound]

KW - very low density lipoprotein cholesterol/ec [Endogenous Compound]

KW - Wnt protein/ec [Endogenous Compound]

KW - minimal hepatic encephalopathy/dt [Drug Therapy]

KW - calcium fructoborate/cb [Drug Combination]

KW - calcium fructoborate/cm [Drug Comparison]

KW - calcium fructoborate/dt [Drug Therapy]

KW - transcription factor EB/ec [Endogenous Compound]

XT - abdominal pain / side effect / resveratrol

XT - abdominal pain / side effect / tetrahydrolipstatin

XT - abnormal feces composition / side effect / resveratrol

XT - amnesia / side effect / resveratrol

XT - atherosclerosis / drug therapy / atorvastatin

XT - atherosclerosis / drug therapy / resveratrol

XT - autism / drug therapy / methylphenidate

XT - autism / drug therapy / resveratrol

XT - cardiovascular disease / drug therapy / resveratrol

XT - chill / side effect / resveratrol

XT - chronic kidney failure / drug therapy / resveratrol

XT - connective tissue disease / side effect / resveratrol

XT - constipation / side effect / resveratrol

XT - constipation / side effect / tetrahydrolipstatin

XT - coronary artery disease / drug therapy / resveratrol

XT - cystocele / side effect / resveratrol

XT - decreased appetite / side effect / resveratrol

XT - depression / drug therapy / resveratrol

XT - diabetic foot / drug therapy / resveratrol

XT - diarrhea / side effect / resveratrol

XT - diarrhea / side effect / tetrahydrolipstatin

XT - dizziness / side effect / resveratrol

XT - drug hypersensitivity / side effect / resveratrol

XT - dyspepsia / side effect / resveratrol

XT - dysphagia / side effect / resveratrol

XT - eczema / side effect / resveratrol

XT - elevated blood pressure / drug therapy / resveratrol

XT - endometriosis / drug therapy / resveratrol

XT - endothelial dysfunction / drug therapy / resveratrol

XT - epididymitis / side effect / resveratrol

XT - fatigue / side effect / resveratrol

XT - fever / side effect / resveratrol

XT - flatulence / side effect / resveratrol

XT - gastroesophageal reflux / side effect / resveratrol

XT - gastrointestinal disease / side effect / resveratrol

XT - gastrointestinal symptom / side effect / resveratrol

XT - genital system disease / side effect / resveratrol

XT - gingivitis / drug therapy / resveratrol

XT - hand paresthesia / side effect / resveratrol

XT - headache / side effect / resveratrol

XT - heart failure with reduced ejection fraction / drug therapy / resveratrol

XT - heart infarction / drug therapy / resveratrol

XT - heartburn / side effect / resveratrol

XT - hepatic encephalopathy / drug therapy / acetylcysteine

XT - hepatic encephalopathy / drug therapy / resveratrol

XT - hot flush / side effect / resveratrol

XT - hypoglycemia / side effect / resveratrol

XT - hypotension / side effect / resveratrol

XT - immunopathology / side effect / resveratrol

XT - increased appetite / side effect / resveratrol

XT - infection / side effect / resveratrol

XT - infestation / side effect / resveratrol

XT - injury / side effect / resveratrol

XT - insomnia / side effect / resveratrol

XT - insulin resistance / drug therapy / resveratrol

XT - intoxication / side effect / resveratrol

XT - kidney disease / side effect / resveratrol

XT - knee osteoarthritis / drug therapy / meloxicam

XT - knee osteoarthritis / drug therapy / resveratrol

XT - lethargy / side effect / resveratrol

XT - leukopenia / side effect / resveratrol

XT - male infertility / drug therapy / hydrogen sulfide

XT - male infertility / drug therapy / prodrug

XT - male infertility / drug therapy / resveratrol

XT - metabolic syndrome X / drug therapy / resveratrol

XT - migraine / drug therapy / resveratrol

XT - minimal hepatic encephalopathy / drug therapy / acetylcysteine

XT - minimal hepatic encephalopathy / drug therapy / resveratrol

XT - muscle cramp / side effect / resveratrol

XT - musculoskeletal disease / side effect / resveratrol

XT - myalgia / side effect / resveratrol

XT - nausea / side effect / resveratrol

XT - nausea / side effect / tetrahydrolipstatin

XT - neurologic disease / side effect / resveratrol

XT - non insulin dependent diabetes mellitus / drug therapy / oral antidiabetic agent

XT - non insulin dependent diabetes mellitus / drug therapy / resveratrol

XT - nonalcoholic fatty liver / drug therapy / resveratrol

XT - nutritional disorder / side effect / resveratrol

XT - obesity / drug therapy / fluoxetine

XT - obesity / drug therapy / metformin

XT - obesity / drug therapy / resveratrol

XT - obesity / drug therapy / tetrahydrolipstatin

XT - ovary polycystic disease / drug therapy / resveratrol

XT - periodontitis / drug therapy / resveratrol

XT - peripheral arterial disease / drug therapy / resveratrol

XT - peripheral neuropathy / side effect / resveratrol

XT - pneumonia / drug therapy / amoxicillin

XT - pneumonia / drug therapy / resveratrol

XT - preeclampsia / drug therapy / nifedipine

XT - preeclampsia / drug therapy / resveratrol

XT - proteinuria / side effect / resveratrol

XT - pruritus / side effect / resveratrol

XT - rash / side effect / resveratrol

XT - reactive hyperemia / drug therapy / resveratrol

XT - respiratory tract disease / side effect / resveratrol

XT - respiratory tract infection / side effect / resveratrol

XT - restlessness / side effect / resveratrol

XT - rheumatoid arthritis / drug therapy / resveratrol

XT - schizophrenia / drug therapy / resveratrol

XT - side effect / side effect / resveratrol

XT - skin disease / side effect / resveratrol

XT - skin irritation / side effect / resveratrol

XT - somnolence / side effect / resveratrol

XT - stable angina pectoris / drug therapy / calcium fructoborate

XT - stable angina pectoris / drug therapy / calcium

XT - stable angina pectoris / drug therapy / resveratrol

XT - steatorrhea / side effect / resveratrol

XT - steatorrhea / side effect / tetrahydrolipstatin

XT - stomach pain / side effect / resveratrol

XT - systolic heart failure / drug therapy / resveratrol

XT - tachycardia / side effect / resveratrol

XT - thorax disease / side effect / resveratrol

XT - thorax pain / side effect / resveratrol

XT - thrombocytopenia / side effect / resveratrol

XT - ulcerative colitis / drug therapy / resveratrol

XT - upper respiratory tract infection / side effect / resveratrol

XT - urinary tract disease / side effect / resveratrol

XT - urinary tract infection / side effect / resveratrol

XT - vascular disease / side effect / resveratrol

XT - vomiting / side effect / resveratrol

XT - xerostomia / side effect / resveratrol

XT - acetylcysteine / drug combination / resveratrol

XT - acetylcysteine / drug therapy / hepatic encephalopathy

XT - acetylcysteine / drug therapy / minimal hepatic encephalopathy

XT - alteplase / drug combination / resveratrol

XT - alteplase / drug interaction / resveratrol

XT - amoxicillin / drug therapy / pneumonia

XT - amoxicillin / special situation for pharmacovigilance / pediatric patient

XT - atorvastatin / drug combination / resveratrol

XT - atorvastatin / drug therapy / atherosclerosis

XT - calcium / drug combination / resveratrol

XT - calcium / drug comparison / placebo

XT - calcium / drug therapy / stable angina pectoris

XT - calcium fructoborate / drug combination / resveratrol

XT - calcium fructoborate / drug comparison / placebo

XT - calcium fructoborate / drug therapy / stable angina pectoris

XT - fluoxetine / drug combination / resveratrol

XT - fluoxetine / drug therapy / obesity

XT - hydrogen sulfide / drug comparison / resveratrol

XT - hydrogen sulfide / drug therapy / male infertility

XT - meloxicam / drug combination / resveratrol

XT - meloxicam / drug therapy / knee osteoarthritis

XT - metformin / drug combination / resveratrol

XT - metformin / drug therapy / obesity

XT - methylphenidate / drug combination / resveratrol

XT - methylphenidate / drug therapy / autism

XT - nifedipine / drug combination / resveratrol

XT - nifedipine / drug therapy / preeclampsia

XT - oral antidiabetic agent / drug therapy / non insulin dependent diabetes mellitus

XT - piperine / drug combination / resveratrol

XT - prodrug / drug comparison / resveratrol

XT - prodrug / drug therapy / male infertility

XT - resveratrol / adverse drug reaction / abdominal pain

XT - resveratrol / adverse drug reaction / abnormal feces composition

XT - resveratrol / adverse drug reaction / amnesia

XT - resveratrol / adverse drug reaction / chill

XT - resveratrol / adverse drug reaction / connective tissue disease

XT - resveratrol / adverse drug reaction / constipation

XT - resveratrol / adverse drug reaction / cystocele

XT - resveratrol / adverse drug reaction / decreased appetite

XT - resveratrol / adverse drug reaction / diarrhea

XT - resveratrol / adverse drug reaction / dizziness

XT - resveratrol / adverse drug reaction / drug hypersensitivity

XT - resveratrol / adverse drug reaction / dyspepsia

XT - resveratrol / adverse drug reaction / dysphagia

XT - resveratrol / adverse drug reaction / eczema

XT - resveratrol / adverse drug reaction / epididymitis

XT - resveratrol / adverse drug reaction / fatigue

XT - resveratrol / adverse drug reaction / fever

XT - resveratrol / adverse drug reaction / flatulence

XT - resveratrol / adverse drug reaction / gastroesophageal reflux

XT - resveratrol / adverse drug reaction / gastrointestinal disease

XT - resveratrol / adverse drug reaction / gastrointestinal symptom

XT - resveratrol / adverse drug reaction / genital system disease

XT - resveratrol / adverse drug reaction / hand paresthesia

XT - resveratrol / adverse drug reaction / headache

XT - resveratrol / adverse drug reaction / heartburn

XT - resveratrol / adverse drug reaction / hot flush

XT - resveratrol / adverse drug reaction / hypoglycemia

XT - resveratrol / adverse drug reaction / hypotension

XT - resveratrol / adverse drug reaction / immunopathology

XT - resveratrol / adverse drug reaction / increased appetite

XT - resveratrol / adverse drug reaction / infection

XT - resveratrol / adverse drug reaction / infestation

XT - resveratrol / adverse drug reaction / injury

XT - resveratrol / adverse drug reaction / insomnia

XT - resveratrol / adverse drug reaction / intoxication

XT - resveratrol / adverse drug reaction / kidney disease

XT - resveratrol / adverse drug reaction / lethargy

XT - resveratrol / adverse drug reaction / leukopenia

XT - resveratrol / adverse drug reaction / muscle cramp

XT - resveratrol / adverse drug reaction / musculoskeletal disease

XT - resveratrol / adverse drug reaction / myalgia

XT - resveratrol / adverse drug reaction / nausea

XT - resveratrol / adverse drug reaction / neurologic disease

XT - resveratrol / adverse drug reaction / nutritional disorder

XT - resveratrol / adverse drug reaction / peripheral neuropathy

XT - resveratrol / adverse drug reaction / proteinuria

XT - resveratrol / adverse drug reaction / pruritus

XT - resveratrol / adverse drug reaction / rash

XT - resveratrol / adverse drug reaction / respiratory tract disease

XT - resveratrol / adverse drug reaction / respiratory tract infection

XT - resveratrol / adverse drug reaction / restlessness

XT - resveratrol / adverse drug reaction / side effect

XT - resveratrol / adverse drug reaction / skin disease

XT - resveratrol / adverse drug reaction / skin irritation

XT - resveratrol / adverse drug reaction / somnolence

XT - resveratrol / adverse drug reaction / steatorrhea

XT - resveratrol / adverse drug reaction / stomach pain

XT - resveratrol / adverse drug reaction / tachycardia

XT - resveratrol / adverse drug reaction / thorax disease

XT - resveratrol / adverse drug reaction / thorax pain

XT - resveratrol / adverse drug reaction / thrombocytopenia

XT - resveratrol / adverse drug reaction / upper respiratory tract infection

XT - resveratrol / adverse drug reaction / urinary tract disease

XT - resveratrol / adverse drug reaction / urinary tract infection

XT - resveratrol / adverse drug reaction / vascular disease

XT - resveratrol / adverse drug reaction / vomiting

XT - resveratrol / adverse drug reaction / xerostomia

XT - resveratrol / drug combination / acetylcysteine

XT - resveratrol / drug combination / alteplase

XT - resveratrol / drug combination / atorvastatin

XT - resveratrol / drug combination / calcium fructoborate

XT - resveratrol / drug combination / calcium

XT - resveratrol / drug combination / fluoxetine

XT - resveratrol / drug combination / meloxicam

XT - resveratrol / drug combination / metformin

XT - resveratrol / drug combination / methylphenidate

XT - resveratrol / drug combination / nifedipine

XT - resveratrol / drug combination / piperine

XT - resveratrol / drug combination / risperidone

XT - resveratrol / drug combination / tetrahydrolipstatin

XT - resveratrol / drug comparison / hydrogen sulfide

XT - resveratrol / drug comparison / placebo

XT - resveratrol / drug comparison / prodrug

XT - resveratrol / drug interaction / alteplase

XT - resveratrol / drug therapy / atherosclerosis

XT - resveratrol / drug therapy / autism

XT - resveratrol / drug therapy / cardiovascular disease

XT - resveratrol / drug therapy / chronic kidney failure

XT - resveratrol / drug therapy / coronary artery disease

XT - resveratrol / drug therapy / depression

XT - resveratrol / drug therapy / diabetic foot

XT - resveratrol / drug therapy / elevated blood pressure

XT - resveratrol / drug therapy / endometriosis

XT - resveratrol / drug therapy / endothelial dysfunction

XT - resveratrol / drug therapy / gingivitis

XT - resveratrol / drug therapy / heart failure with reduced ejection fraction

XT - resveratrol / drug therapy / heart infarction

XT - resveratrol / drug therapy / hepatic encephalopathy

XT - resveratrol / drug therapy / insulin resistance

XT - resveratrol / drug therapy / knee osteoarthritis

XT - resveratrol / drug therapy / male infertility

XT - resveratrol / drug therapy / metabolic syndrome X

XT - resveratrol / drug therapy / migraine

XT - resveratrol / drug therapy / minimal hepatic encephalopathy

XT - resveratrol / drug therapy / non insulin dependent diabetes mellitus

XT - resveratrol / drug therapy / nonalcoholic fatty liver

XT - resveratrol / drug therapy / obesity

XT - resveratrol / drug therapy / ovary polycystic disease

XT - resveratrol / drug therapy / periodontitis

XT - resveratrol / drug therapy / peripheral arterial disease

XT - resveratrol / drug therapy / pneumonia

XT - resveratrol / drug therapy / preeclampsia

XT - resveratrol / drug therapy / reactive hyperemia

XT - resveratrol / drug therapy / rheumatoid arthritis

XT - resveratrol / drug therapy / schizophrenia

XT - resveratrol / drug therapy / stable angina pectoris

XT - resveratrol / drug therapy / systolic heart failure

XT - resveratrol / drug therapy / ulcerative colitis

XT - resveratrol / special situation for pharmacovigilance / aged

XT - resveratrol / special situation for pharmacovigilance / pediatric patient

XT - risperidone / drug combination / resveratrol

XT - tetrahydrolipstatin / adverse drug reaction / abdominal pain

XT - tetrahydrolipstatin / adverse drug reaction / constipation

XT - tetrahydrolipstatin / adverse drug reaction / diarrhea

XT - tetrahydrolipstatin / adverse drug reaction / nausea

XT - tetrahydrolipstatin / adverse drug reaction / steatorrhea

XT - tetrahydrolipstatin / drug combination / resveratrol

XT - tetrahydrolipstatin / drug therapy / obesity

JF - International Journal of Molecular Sciences

JA - Int. J. Mol. Sci.

LA - English

VL - 25

IS - 2

SP - 747

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 1661-6596

SN - 1422-0067

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C3 - srt 501

UR - http://www.mdpi.com/journal/ijms

DO - https://dx.doi.org/10.3390/ijms25020747

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028105963

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fijms25020747Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Brown&issn=1661-6596&title=International+Journal+of+Molecular+Sciences&atitle=Resveratrol+for+the+Management+of+Human+Health%3A+How+Far+Have+We+Come%3F+A+Systematic+Review+of+Resveratrol+Clinical+Trials+to+Highlight+Gaps+and+Opportunities&volume=25&issue=2&spage=747&epage=&date=2024&doi=10.3390%2Fijms25020747&pmid=38255828&sid=OVID:embase

13.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028596808

ID - 38361953 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38361953]

T1 - Unraveling lipid and inflammation interplay in cancer, aging and infection for novel theranostic approaches

A1 - Conde-Torres D.

A1 - Blanco-Gonzalez A.

A1 - Seco-Gonzalez A.

A1 - Suarez-Leston F.

A1 - Cabezon A.

A1 - Antelo-Riveiro P.

A1 - Pineiro A.

A1 - Garcia-Fandino R.

Y1 - 2024//

N2 - The synergistic relationships between Cancer, Aging, and Infection, here referred to as the CAIn Triangle, are significant determinants in numerous health maladies and mortality rates. The CAIn-related pathologies exhibit close correlations with each other and share two common underlying factors: persistent inflammation and anomalous lipid concentration profiles in the membranes of affected cells. This study provides a comprehensive evaluation of the most pertinent interconnections within the CAIn Triangle, in addition to examining the relationship between chronic inflammation and specific lipidic compositions in cellular membranes. To tackle the CAIn-associated diseases, a suite of complementary strategies aimed at diagnosis, prevention, and treatment is proffered. Our holistic approach is expected to augment the understanding of the fundamental mechanisms underlying these diseases and highlight the potential of shared features to facilitate the development of novel theranostic strategies.Copyright © 2024 Conde-Torres, Blanco-Gonzalez, Seco-Gonzalez, Suarez-Leston, Cabezon, Antelo-Riveiro, Pineiro and Garcia-Fandino.

KW - \*aging

KW - anorexia

KW - Aspergillus fumigatus

KW - atherosclerosis

KW - bacteremia

KW - bladder cancer

KW - breast cancer

KW - cancer growth

KW - cancer mortality

KW - Candida albicans

KW - cardiovascular disease

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - cell dysfunction

KW - cell membrane

KW - chronic inflammation

KW - colorectal cancer

KW - degenerative disease

KW - delirium

KW - dysbiosis

KW - dyslipidemia

KW - Escherichia coli

KW - fever

KW - Haemophilus influenzae

KW - Helicobacter pylori

KW - homeostasis

KW - human

KW - \*infection

KW - \*inflammation

KW - inflammatory bowel disease

KW - invasive aspergillosis

KW - Legionella pneumophila

KW - lipid composition

KW - lipid fingerprinting

KW - lipid metabolism

KW - lipidomics

KW - malignant neoplasm

KW - mortality rate

KW - Mycobacterium bovis

KW - natural killer cell

KW - \*neoplasm

KW - oxidative stress

KW - personalized medicine

KW - prostate cancer

KW - prostatitis

KW - protein homeostasis

KW - review

KW - review

KW - stomach cancer

KW - tumor microenvironment

KW - urinary tract infection

KW - viral gastroenteritis

KW - biological marker/ec [Endogenous Compound]

KW - ceramide/ec [Endogenous Compound]

KW - cholesterol/ec [Endogenous Compound]

KW - galactosylceramide/ec [Endogenous Compound]

KW - glucosylceramide/ec [Endogenous Compound]

KW - inflammasome/ec [Endogenous Compound]

KW - linoleic acid/ec [Endogenous Compound]

KW - \*lipid/ec [Endogenous Compound]

KW - phosphatidic acid/ec [Endogenous Compound]

KW - phosphatidylcholine/ec [Endogenous Compound]

KW - phosphatidylethanolamine/ec [Endogenous Compound]

KW - phosphatidylinositol/ec [Endogenous Compound]

KW - phosphatidylserine/ec [Endogenous Compound]

KW - sphingomyelin/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 15

SP - 1320779

CY - Switzerland

PB - Frontiers Media SA

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2024.1320779

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028596808

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3389%2ffimmu.2024.1320779Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Conde-Torres&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Unraveling+lipid+and+inflammation+interplay+in+cancer%2C+aging+and+infection+for+novel+theranostic+approaches&volume=15&issue=&spage=1320779&epage=&date=2024&doi=10.3389%2Ffimmu.2024.1320779&pmid=38361953&sid=OVID:embase

14.

TY - JOUR

DB - Embase Weekly Updates

AN - 2027849208

ID - 38196049 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38196049]

T1 - Necrotizing enterocolitis: current understanding of the prevention and management

A1 - Hu X.

A1 - Liang H.

A1 - Li F.

A1 - Zhang R.

A1 - Zhu Y.

A1 - Zhu X.

A1 - Xu Y.

Y1 - 2024//

N2 - Necrotizing enterocolitis (NEC) is one of the diseases in neonates, with a high morbidity and mortality rate, especially in preterm infants. This review aimed to briefly introduce the latest epidemiology, susceptibility factors, and clinical diagnosis and presentation of NEC. We also organized new prevention strategies by risk factors according to different pathogeneses and then discussed new treatment methods based on Bell's staging and complications, and the classification of mild to high severity based on clinical and imaging manifestations. Such a generalization will help clinicians and researchers to gain a deeper understanding of the disease and to conduct more targeted classification, grading prevention, and exploration. We focused on prevention and treatment of the early and suspected stages of NEC, including the discovery of novel biomarkers and drugs to control disease progression. At the same time, we discussed its clinical application, future development, and shortcomings.Copyright © 2024, The Author(s).

KW - abdominal tenderness

KW - antibiotic therapy

KW - artificial milk

KW - assisted ventilation

KW - disease classification

KW - enteric feeding

KW - gestational age

KW - human

KW - infection prevention

KW - intervention study

KW - intestine flora

KW - intestine ischemia

KW - lung complication

KW - mental disease

KW - microbial colonization

KW - \*necrotizing enterocolitis/pc [Prevention]

KW - nonhuman

KW - nutritional support

KW - parenteral nutrition

KW - pathogenesis

KW - premature labor

KW - remission

KW - reperfusion injury

KW - review

KW - risk factor

KW - screening

KW - short bowel syndrome

KW - biological marker/ec [Endogenous Compound]

KW - infusion fluid

JF - Pediatric Surgery International

JA - Pediatr. Surg. Int.

LA - English

VL - 40

IS - 1

SP - 32

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 0179-0358

SN - 1437-9813

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UR - https://www.springer.com/journal/383

DO - https://dx.doi.org/10.1007/s00383-023-05619-3

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2027849208

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1007%2fs00383-023-05619-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Hu&issn=0179-0358&title=Pediatric+Surgery+International&atitle=Necrotizing+enterocolitis%3A+current+understanding+of+the+prevention+and+management&volume=40&issue=1&spage=32&epage=&date=2024&doi=10.1007%2Fs00383-023-05619-3&pmid=38196049&sid=OVID:embase

15.

TY - JOUR

DB - Embase Weekly Updates

AN - 2030176508

ID - 37470727 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37470727]

T1 - Radiation injury and gut microbiota-based treatment

A1 - Wang W.

A1 - Cui B.

A1 - Nie Y.

A1 - Sun L.

A1 - Zhang F.

Y1 - 2024//

N2 - The exposure to either medical sources or accidental radiation can cause varying degrees of radiation injury (RI). RI is a common disease involving multiple human body parts and organs, yet effective treatments are currently limited. Accumulating evidence suggests gut microbiota are closely associated with the development and prevention of various RI. This article summarizes 10 common types of RI and their possible mechanisms. It also highlights the changes and potential microbiota-based treatments for RI, including probiotics, metabolites, and microbiota transplantation. Additionally, a 5P-Framework is proposed to provide a comprehensive strategy for managing RI.Copyright ©The Author(s) 2023.

KW - abdominal pain

KW - Actinobacteria

KW - alopecia

KW - atopic dermatitis

KW - bacterial translocation

KW - Bacteroides

KW - Bifidobacterium

KW - Bifidobacterium longum

KW - bloating

KW - brachytherapy

KW - brain injury

KW - carbon metabolism

KW - cardiotoxicity

KW - cardiovascular disease

KW - Clostridioides difficile

KW - Clostridium

KW - Clostridium difficile infection

KW - cognition

KW - cognitive defect

KW - colonoscopy

KW - colorectal cancer

KW - coronary artery disease

KW - cystitis

KW - depression

KW - dermatitis

KW - diarrhea

KW - DNA damage

KW - duodenitis

KW - dysbiosis

KW - dyspnea

KW - Enterococcus

KW - erythema

KW - Eubacterium

KW - Faecalibacterium

KW - fatigue

KW - fecal microbiota transplantation

KW - ferroptosis

KW - Gammaproteobacteria

KW - gastrointestinal tract function

KW - gastroscopy

KW - gene expression

KW - genomic instability

KW - head and neck cancer

KW - heart failure

KW - heart injury

KW - Helicobacter

KW - hematuria

KW - hepatectomy

KW - hepatomegaly

KW - human

KW - hyperbaric oxygen therapy

KW - hyperpigmentation

KW - inflammatory bowel disease

KW - \*intestine flora

KW - ionizing radiation

KW - Lachnospiraceae

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus reuteri

KW - Lactobacillus rhamnosus

KW - lipid peroxidation

KW - liver cell carcinoma

KW - liver injury

KW - metabolite

KW - nervous system inflammation

KW - nonhuman

KW - oral mucositis

KW - oxidative stress

KW - pneumonia

KW - prevalence

KW - prostatitis

KW - Proteobacteria

KW - Pseudomonas

KW - radiation exposure

KW - \*radiation injury

KW - radiation protection

KW - radiosensitivity

KW - review

KW - Ruminococcus

KW - signal transduction

KW - skin injury

KW - Staphylococcus

KW - Stenotrophomonas

KW - ulcer

KW - urinary tract infection

KW - Virgibacillus

KW - vomiting

KW - ATM protein/ec [Endogenous Compound]

KW - ellagitannin

KW - glutathione/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - interleukin 1/ec [Endogenous Compound]

KW - interleukin 1 receptor/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - isorhamnetin

KW - leptin

KW - polyphenol

KW - probiotic agent

KW - prostaglandin F2 alpha/ec [Endogenous Compound]

KW - protein p53/ec [Endogenous Compound]

KW - reactive oxygen metabolite/ec [Endogenous Compound]

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Protein and Cell

JA - Protein Cell

LA - English

VL - 15

IS - 2

SP - 83

EP - 97

CY - United Kingdom

PB - Oxford University Press

SN - 1674-800X

SN - 1674-8018

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UR - https://academic.oup.com/proteincell

DO - https://dx.doi.org/10.1093/procel/pwad044

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2030176508

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1093%2fprocel%2fpwad044Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=1674-800X&title=Protein+and+Cell&atitle=Radiation+injury+and+gut+microbiota-based+treatment&volume=15&issue=2&spage=83&epage=97&date=2024&doi=10.1093%2Fprocel%2Fpwad044&pmid=37470727&sid=OVID:embase

16.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028107549

T1 - Microorganisms and Breast Cancer: An In-Depth Analysis of Clinical Studies

A1 - Naderi N.

A1 - Mosahebi A.

A1 - Williams N.R.

AO - Williams, Norman R.; ORCID: https://orcid.org/0000-0001-6496-312X

Y1 - 2024//

N2 - Breast cancer is a multifactorial disease that affects millions of women worldwide. Recent work has shown intriguing connections between microorganisms and breast cancer, which might have implications for prevention and treatment. This article analyzed 117 relevant breast cancer clinical studies listed on ClinicalTrials.gov selected using a bespoke set of 38 search terms focused on bacteria, viruses, and fungi. This was supplemented with 20 studies found from a search of PubMed. The resulting 137 studies were described by their characteristics such as geographic distribution, interventions used, start date and status, etc. The studies were then collated into thematic groups for a descriptive analysis to identify knowledge gaps and emerging trends.Copyright © 2023 by the authors.

KW - antiproliferative activity

KW - anxiety

KW - aspergillosis

KW - bacterial microbiome

KW - \*breast cancer

KW - breast reconstruction

KW - cancer radiotherapy

KW - cancer risk

KW - chemoradiotherapy

KW - Clostridium

KW - cognition

KW - fatigue

KW - fecal microbiota transplantation

KW - feces microflora

KW - female

KW - human

KW - immune response

KW - immunogenicity

KW - influenza

KW - intestine flora

KW - Lactobacillus

KW - mastectomy

KW - \*microorganism

KW - mycobiome

KW - mycosis

KW - mycosis fungoides

KW - nonhuman

KW - pneumonia

KW - postoperative depression

KW - postoperative pain

KW - radiation dermatitis

KW - review

KW - risk factor

KW - Saccharomyces

KW - Streptococcus pneumoniae

KW - systematic review

KW - vaccination

KW - Vaccinia virus

KW - vagina flora

KW - Wart virus

KW - botulinum toxin A

KW - immune checkpoint inhibitor

KW - pembrolizumab

KW - prebiotic agent

KW - probiotic agent

KW - breast endoprosthesis

KW - data analysis software

KW - microsoft excel

JF - Pathogens

JA - Pathogens

LA - English

VL - 13

IS - 1

SP - 6

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2076-0817 (electronic)

SN - 2076-0817

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M2 - Microsoft excel

C1 - Microsoft excel

UR - http://www.mdpi.com/journal/pathogens

DO - https://dx.doi.org/10.3390/pathogens13010006

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028107549

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fpathogens13010006Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Naderi&issn=2076-0817&title=Pathogens&atitle=Microorganisms+and+Breast+Cancer%3A+An+In-Depth+Analysis+of+Clinical+Studies&volume=13&issue=1&spage=6&epage=&date=2024&doi=10.3390%2Fpathogens13010006&pmid=&sid=OVID:embase

17.

TY - JOUR

DB - Embase Weekly Updates

AN - 633277659

ID - 33105830 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33105830]

T1 - Probiotics in Treatment of Viral Respiratory Infections and Neuroinflammatory Disorders

A1 - Shahbazi R.

A1 - Yasavoli-Sharahi H.

A1 - Alsadi N.

A1 - Ismail N.

A1 - Matar C.

Y1 - 2020//

N2 - Inflammation is a biological response to the activation of the immune system by various infectious or non-infectious agents, which may lead to tissue damage and various diseases. Gut commensal bacteria maintain a symbiotic relationship with the host and display a critical function in the homeostasis of the host immune system. Disturbance to the gut microbiota leads to immune dysfunction both locally and at distant sites, which causes inflammatory conditions not only in the intestine but also in the other organs such as lungs and brain, and may induce a disease state. Probiotics are well known to reinforce immunity and counteract inflammation by restoring symbiosis within the gut microbiota. As a result, probiotics protect against various diseases, including respiratory infections and neuroinflammatory disorders. A growing body of research supports the beneficial role of probiotics in lung and mental health through modulating the gut-lung and gut-brain axes. In the current paper, we discuss the potential role of probiotics in the treatment of viral respiratory infections, including the COVID-19 disease, as major public health crisis in 2020, and influenza virus infection, as well as treatment of neurological disorders like multiple sclerosis and other mental illnesses.

KW - Betacoronavirus

KW - brain

KW - Coronavirus infection/th [Therapy]

KW - drug effect

KW - gastrointestinal tract

KW - human

KW - immunology

KW - immunomodulation

KW - influenza/th [Therapy]

KW - intestine flora

KW - lung

KW - mental disease/th [Therapy]

KW - microbial consortium

KW - microbiology

KW - multiple sclerosis/th [Therapy]

KW - Orthomyxoviridae

KW - pandemic

KW - pathogenicity

KW - physiology

KW - respiratory tract infection/th [Therapy]

KW - symbiosis

KW - virology

KW - virus pneumonia/th [Therapy]

KW - probiotic agent/dt [Drug Therapy]

JF - Molecules (Basel, Switzerland)

JA - Molecules

LA - English

VL - 25

IS - 21

SP -

CY - Switzerland

PB - NLM (Medline)

SN - 1420-3049 (electronic)

SN - 1420-3049

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DO - https://dx.doi.org/10.3390/molecules25214891

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=633277659

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fmolecules25214891Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Shahbazi&issn=1420-3049&title=Molecules+%28Basel%2C+Switzerland%29&atitle=Probiotics+in+Treatment+of+Viral+Respiratory+Infections+and+Neuroinflammatory+Disorders&volume=25&issue=21&spage=4891&epage=&date=2020&doi=10.3390%2Fmolecules25214891&pmid=33105830&sid=OVID:embase

18.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028068465

T1 - Advances in Mass Spectrometry-Based Blood Metabolomics Profiling for Non-Cancer Diseases: A Comprehensive Review

A1 - Demicheva E.

A1 - Dordiuk V.

A1 - Polanco Espino F.

A1 - Ushenin K.

A1 - Aboushanab S.

A1 - Shevyrin V.

A1 - Buhler A.

A1 - Mukhlynina E.

A1 - Solovyova O.

A1 - Danilova I.

A1 - Kovaleva E.

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AO - Kovaleva, Elena; ORCID: https://orcid.org/0000-0002-3111-345X

Y1 - 2024//

N2 - Blood metabolomics profiling using mass spectrometry has emerged as a powerful approach for investigating non-cancer diseases and understanding their underlying metabolic alterations. Blood, as a readily accessible physiological fluid, contains a diverse repertoire of metabolites derived from various physiological systems. Mass spectrometry offers a universal and precise analytical platform for the comprehensive analysis of blood metabolites, encompassing proteins, lipids, peptides, glycans, and immunoglobulins. In this comprehensive review, we present an overview of the research landscape in mass spectrometry-based blood metabolomics profiling. While the field of metabolomics research is primarily focused on cancer, this review specifically highlights studies related to non-cancer diseases, aiming to bring attention to valuable research that often remains overshadowed. Employing natural language processing methods, we processed 507 articles to provide insights into the application of metabolomic studies for specific diseases and physiological systems. The review encompasses a wide range of non-cancer diseases, with emphasis on cardiovascular disease, reproductive disease, diabetes, inflammation, and immunodeficiency states. By analyzing blood samples, researchers gain valuable insights into the metabolic perturbations associated with these diseases, potentially leading to the identification of novel biomarkers and the development of personalized therapeutic approaches. Furthermore, we provide a comprehensive overview of various mass spectrometry approaches utilized in blood metabolomics research, including GC-MS, LC-MS, and others discussing their advantages and limitations. To enhance the scope, we propose including recent review articles supporting the applicability of GCxGC-MS for metabolomics-based studies. This addition will contribute to a more exhaustive understanding of the available analytical techniques. The Integration of mass spectrometry-based blood profiling into clinical practice holds promise for improving disease diagnosis, treatment monitoring, and patient outcomes. By unraveling the complex metabolic alterations associated with non-cancer diseases, researchers and healthcare professionals can pave the way for precision medicine and personalized therapeutic interventions. Continuous advancements in mass spectrometry technology and data analysis methods will further enhance the potential of blood metabolomics profiling in non-cancer diseases, facilitating its translation from the laboratory to routine clinical application.Copyright © 2024 by the authors.

KW - acute heart infarction

KW - acute liver failure

KW - adult respiratory distress syndrome

KW - albuminuria

KW - Alzheimer disease

KW - amino acid metabolism

KW - amyotrophic lateral sclerosis

KW - analytic method

KW - ankylosing spondylitis

KW - aortic dissection

KW - apoptosis

KW - arachidonic acid metabolism

KW - arthralgia

KW - bacteremia

KW - bacterial load

KW - Bacteroides

KW - bariatric surgery

KW - biocompatibility

KW - \*blood analysis

KW - blood sampling

KW - body mass

KW - brain hemorrhage

KW - Burkholderia pseudomallei

KW - Candida albicans

KW - carbon metabolism

KW - cardiometabolic risk

KW - cardiovascular disease

KW - cardiovascular risk

KW - cell membrane fluidity

KW - cellular immunity

KW - chronic kidney failure

KW - clinical practice

KW - collagen-induced arthritis

KW - consciousness disorder

KW - cord serum

KW - coronary artery calcification

KW - coronary artery disease

KW - degenerative disease

KW - depression

KW - diabetes mellitus

KW - diabetic nephropathy

KW - diabetic retinopathy

KW - diagnostic accuracy

KW - diastolic dysfunction

KW - diet supplementation

KW - disease activity

KW - disease severity

KW - dog

KW - dyslipidemia

KW - enzyme activity

KW - erythrocyte count

KW - Escherichia coli

KW - extrapulmonary tuberculosis

KW - fatigue

KW - fever

KW - gas chromatography

KW - gastric banding

KW - gestational diabetes

KW - glucose blood level

KW - glucose homeostasis

KW - glycemic control

KW - glycolysis

KW - glycomics

KW - glycosylation

KW - hair loss

KW - head injury

KW - health care personnel

KW - heart failure

KW - high performance liquid chromatography

KW - hospitalization

KW - human

KW - hyperandrogenism

KW - hyperglycemia

KW - hypertension

KW - immune deficiency

KW - immune response

KW - immune system

KW - immunoglobulin A nephropathy

KW - inflammation

KW - influenza A (H1N1)

KW - insulin deficiency

KW - insulin dependent diabetes mellitus

KW - insulin resistance

KW - insulin sensitivity

KW - interstitial lung disease

KW - interstitial pneumonia

KW - intestine flora

KW - ischemic preconditioning

KW - ketogenic diet

KW - language processing

KW - latent tuberculosis

KW - left ventricular diastolic dysfunction

KW - limit of detection

KW - lipid composition

KW - lipid metabolism

KW - lipid storage

KW - lipidomics

KW - liquid chromatography-mass spectrometry

KW - liver biopsy

KW - liver cirrhosis

KW - liver injury

KW - lupus erythematosus nephritis

KW - mass fragmentography

KW - \*mass spectrometry

KW - matrix-assisted laser desorption-ionization mass spectrometry

KW - melioidosis

KW - meningococcemia

KW - mental disease

KW - metabolic syndrome X

KW - metabolite

KW - \*metabolomics

KW - microalbuminuria

KW - multiple reaction monitoring

KW - multiple sclerosis

KW - Mycobacterium bovis

KW - Mycobacterium tuberculosis

KW - myelination

KW - natural language processing

KW - necrotizing enterocolitis

KW - neurotoxicity

KW - non insulin dependent diabetes mellitus

KW - nonalcoholic fatty liver

KW - nonhuman

KW - obesity

KW - osteoarthritis

KW - ovary function

KW - oxidative stress

KW - personalized medicine

KW - preeclampsia

KW - premature labor

KW - prevalence

KW - principal component analysis

KW - proliferative diabetic retinopathy

KW - protein intake

KW - protein structure

KW - protein synthesis

KW - proteinase inhibition

KW - Pseudomonas aeruginosa

KW - psoriasis

KW - review

KW - rheumatoid arthritis

KW - risk assessment

KW - risk factor

KW - schizophrenia

KW - sepsis

KW - sepsis associated encephalopathy

KW - septic shock

KW - signal transduction

KW - skin lupus erythematosus

KW - sneezing

KW - systemic lupus erythematosus

KW - Th1 cell

KW - thorax pain

KW - tumor growth

KW - ulcerative colitis

KW - ultra performance liquid chromatography

KW - upregulation

KW - virus load

KW - Yersinia pestis

KW - acylcarnitine

KW - agmatine

KW - alanine

KW - alpha tocopherol

KW - arachidic acid

KW - benzo[a]pyrene

KW - bilirubin

KW - bilirubin glucuronide

KW - biliverdin

KW - biological marker

KW - cathepsin D

KW - ceramide

KW - citrulline

KW - docosahexaenoic acid

KW - galactitol

KW - glucagon like peptide 1

KW - glutamic acid

KW - glutathione

KW - glycan

KW - glycerophospholipid

KW - glycochenodeoxycholic acid

KW - glycolithocholic acid

KW - haptoglobin

KW - high density lipoprotein cholesterol

KW - homocysteine

KW - icosapentaenoic acid

KW - isoleucine

KW - kynurenine

KW - linoleic acid

KW - lipid

KW - lipidome

KW - lipoxygenase

KW - low density lipoprotein cholesterol

KW - lysophosphatidylcholine

KW - methamphetamine

KW - oleic acid

KW - oxylipin

KW - palmitic acid

KW - phosphatidylethanolamine

KW - phosphatidylserine

KW - phospholipid

KW - pioglitazone

KW - polyphenol

KW - procalcitonin

KW - serine

KW - sphingomyelin

KW - terpene

KW - terpenoid

KW - threonine

KW - triacylglycerol

KW - tryptophan

KW - tyrosine

KW - uremic toxin

KW - uric acid

KW - valine

JF - Metabolites

JA - Metabolites

LA - English

VL - 14

IS - 1

SP - 54

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2218-1989 (electronic)

SN - 2218-1989

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UR - http://www.mdpi.com/journal/metabolites

DO - https://dx.doi.org/10.3390/metabo14010054

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028068465

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fmetabo14010054Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Demicheva&issn=2218-1989&title=Metabolites&atitle=Advances+in+Mass+Spectrometry-Based+Blood+Metabolomics+Profiling+for+Non-Cancer+Diseases%3A+A+Comprehensive+Review&volume=14&issue=1&spage=54&epage=&date=2024&doi=10.3390%2Fmetabo14010054&pmid=&sid=OVID:embase

19.

TY - JOUR

DB - Embase Weekly Updates

AN - 640494355

ID - 36869725 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36869725]

T1 - Association Between Gut Microbiota and Delirium in Acutely Ill Older Adults

A1 - Garcez F.B.

A1 - Garcia de Alencar J.C.

A1 - Fernandez S.S.M.

A1 - Avelino-Silva V.I.

A1 - Sabino E.C.

A1 - Martins R.C.R.

A1 - Franco L.A.M.

A1 - Lima Ribeiro S.M.

A1 - Possolo de Souza H.

A1 - Avelino-Silva T.J.

AO - Garcia de Alencar, Julio Cesar; ORCID: https://orcid.org/0000-0001-5859-6060

Y1 - 2023//

N2 - Our aim was to investigate the association between gut microbiota and delirium occurrence in acutely ill older adults. We included 133 participants 65+ years consecutively admitted to the emergency department of a tertiary university hospital, between September 2019 and March 2020. We excluded candidates with >=24-hour antibiotic utilization on admission, recent prebiotic or probiotic utilization, artificial nutrition, acute gastrointestinal disorders, severe traumatic brain injury, recent hospitalization, institutionalization, expected discharge <=48 hours, or admission for end-of-life care. A trained research team followed a standardized interview protocol to collect sociodemographic, clinical, and laboratory data on admission and throughout the hospital stay. Our exposure measures were gut microbiota alpha and beta diversities, taxa relative abundance, and core microbiome. Our primary outcome was delirium, assessed twice daily using the Confusion Assessment Method. Delirium was detected in 38 participants (29%). We analyzed 257 swab samples. After adjusting for potential confounders, we observed that a greater alpha diversity (higher abundance and richness of microorganisms) was associated with a lower risk of delirium, as measured by the Shannon (odds ratio [OR] = 0.77; 95% confidence interval [CI] = 0.60-0.99; p = .042) and Pielou indexes (OR = 0.69; 95% CI = 0.51-0.87; p = .005). Bacterial taxa associated with pro-inflammatory pathways (Enterobacteriaceae) and modulation of relevant neurotransmitters (Serratia: dopamine; Bacteroides, Parabacteroides: GABA) were more common in participants with delirium. Gut microbiota diversity and composition were significantly different in acutely ill hospitalized older adults who experienced delirium. Our work is an original proof-of-concept investigation that lays a foundation for future biomarker studies and potential therapeutic targets for delirium prevention and treatment.Copyright © The Author(s) 2023. Published by Oxford University Press on behalf of The Gerontological Society of America. All rights reserved. For permissions, please e-mail: journals.permissions@oup.com.

KW - aged

KW - \*delirium/ep [Epidemiology]

KW - hospitalization

KW - human

KW - \*intestine flora

KW - length of stay

KW - prospective study

JF - The journals of gerontology. Series A, Biological sciences and medical sciences

JA - J Gerontol A Biol Sci Med Sci

LA - English

VL - 78

IS - 8

SP - 1320

EP - 1327

CY - United States

PB - NLM (Medline)

SN - 1758-535X (electronic)

SN - 1758-535X

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DO - https://dx.doi.org/10.1093/gerona/glad074

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=640494355

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1093%2fgerona%2fglad074Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Garcez&issn=1758-535X&title=The+journals+of+gerontology.+Series+A%2C+Biological+sciences+and+medical+sciences&atitle=Association+Between+Gut+Microbiota+and+Delirium+in+Acutely+Ill+Older+Adults&volume=78&issue=8&spage=1320&epage=1327&date=2023&doi=10.1093%2Fgerona%2Fglad074&pmid=36869725&sid=OVID:embase

20.

TY - JOUR

DB - Embase Weekly Updates

AN - 2027988146

T1 - Ferroptosis: a new antidepressant pharmacological mechanism

A1 - Zhang G.

A1 - Lv S.

A1 - Zhong X.

A1 - Li X.

A1 - Yi Y.

A1 - Lu Y.

A1 - Yan W.

A1 - Li J.

A1 - Teng J.

Y1 - 2023//

N2 - The incidence rate of depression, a mental disorder, is steadily increasing and has the potential to become a major global disability factor. Given the complex pathological mechanisms involved in depression, the use of conventional antidepressants may lead to severe complications due to their side effects. Hence, there is a critical need to explore the development of novel antidepressants. Ferroptosis, a newly recognized form of cell death, has been found to be closely linked to the onset of depression. Several studies have indicated that certain active ingredients can ameliorate depression by modulating the ferroptosis signaling pathway. Notably, traditional Chinese medicine (TCM) active ingredients and TCM prescriptions have demonstrated promising antidepressant effects in previous investigations owing to their unique advantages in antidepressant therapy. Building upon these findings, our objective was to review recent relevant research and provide new insights and directions for the development and application of innovative antidepressant strategies.Copyright © 2024 Zhang, Lv, Zhong, Li, Yi, Lu, Yan, Li and Teng.

KW - Alzheimer disease

KW - amino acid sequence

KW - amygdala

KW - amyotrophic lateral sclerosis

KW - antidepressant activity

KW - antioxidant activity

KW - anxiety

KW - apoptosis

KW - artificial ventilation

KW - astrocyte

KW - bipolar disorder

KW - blood brain barrier

KW - cancer therapy

KW - cell death

KW - cellular immunity

KW - Chinese medicine

KW - cognitive defect

KW - cyclization

KW - \*depression/dt [Drug Therapy]

KW - DNA polymorphism

KW - drug mechanism

KW - energy conversion

KW - Faecalibacterium

KW - \*ferroptosis

KW - functional magnetic resonance imaging

KW - gene deletion

KW - glycolysis

KW - hepatic encephalopathy

KW - herbal medicine

KW - hippocampus

KW - human

KW - immune response

KW - inflammation

KW - insulin dependent diabetes mellitus

KW - intestine flora

KW - iron homeostasis

KW - iron overload

KW - lipid metabolism

KW - lipid peroxidation

KW - liver toxicity

KW - major depression

KW - mental disease

KW - metabolomics

KW - microglia

KW - mitochondrial membrane potential

KW - mitochondrion

KW - nerve cell degeneration

KW - nerve cell plasticity

KW - nervous system inflammation

KW - neurotoxicity

KW - nonhuman

KW - nuclear magnetic resonance spectroscopy

KW - oral drug administration

KW - oxidative phosphorylation

KW - oxidative stress

KW - post-stroke depression

KW - pregnancy

KW - prescription

KW - protein expression

KW - proteomics

KW - review

KW - signal transduction

KW - sleep apnea syndromes

KW - synaptic transmission

KW - treatment resistant depression

KW - ubiquitination

KW - upregulation

KW - adiponectin

KW - alpha tocopherol

KW - \*antidepressant agent/dt [Drug Therapy]

KW - \*antidepressant agent/pd [Pharmacology]

KW - antioxidant

KW - aspartate aminotransferase

KW - brain derived neurotrophic factor

KW - CD71 antigen

KW - ceruloplasmin

KW - corticosterone

KW - cystine

KW - deferoxamine

KW - dexpanthenol

KW - docosahexaenoic acid

KW - edaravone

KW - etomidate

KW - ferritin

KW - ferroportin

KW - ferroportin 1

KW - gallic acid

KW - glucose transporter 4

KW - glutathione reductase

KW - guanosine triphosphate cyclohydrolase I

KW - inflammasome

KW - interleukin 1beta

KW - ketamine

KW - lipoxygenase

KW - lithium ion

KW - malonaldehyde

KW - midazolam

KW - nose spray

KW - pentetrazole

KW - phosphatidylethanolamine

KW - probiotic agent

KW - propofol

KW - reactive oxygen metabolite

KW - sapropterin

KW - selenocysteine

KW - silibinin

KW - streptozocin

KW - superoxide dismutase

KW - tau protein

KW - thioredoxin reductase 1

KW - transcription factor Nrf2

XT - depression / drug therapy / antidepressant agent

XT - antidepressant agent / drug therapy / depression

JF - Frontiers in Pharmacology

JA - Front. Pharmacol.

LA - English

VL - 14

SP - 1339057

CY - Switzerland

PB - Frontiers Media SA

SN - 1663-9812 (electronic)

SN - 1663-9812

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UR - http://www.frontiersin.org/Pharmacology

DO - https://dx.doi.org/10.3389/fphar.2023.1339057

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2027988146

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3389%2ffphar.2023.1339057Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=1663-9812&title=Frontiers+in+Pharmacology&atitle=Ferroptosis%3A+a+new+antidepressant+pharmacological+mechanism&volume=14&issue=&spage=1339057&epage=&date=2023&doi=10.3389%2Ffphar.2023.1339057&pmid=&sid=OVID:embase

21.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029766702

ID - 38211636 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38211636]

T1 - Azithromycin preserves adult hippocampal neurogenesis and behavior in a mouse model of sepsis

A1 - Rodriguez-Moreno C.B.

A1 - Caneque-Rufo H.

A1 - Flor-Garcia M.

A1 - Terreros-Roncal J.

A1 - Moreno-Jimenez E.P.

A1 - Pallas-Bazarra N.

A1 - Bressa C.

A1 - Larrosa M.

A1 - Cafini F.

A1 - Llorens-Martin M.

AO - Llorens-Martin, Maria; ORCID: https://orcid.org/0000-0001-9129-5198

Y1 - 2024//

N2 - The mammalian hippocampus can generate new neurons throughout life. Known as adult hippocampal neurogenesis (AHN), this process participates in learning, memory, mood regulation, and forgetting. The continuous incorporation of new neurons enhances the plasticity of the hippocampus and contributes to the cognitive reserve in aged individuals. However, the integrity of AHN is targeted by numerous pathological conditions, including neurodegenerative diseases and sustained inflammation. In this regard, the latter causes cognitive decline, mood alterations, and multiple AHN impairments. In fact, the systemic administration of Lipopolysaccharide (LPS) from E. coli to mice (a model of sepsis) triggers depression-like behavior, impairs pattern separation, and decreases the survival, maturation, and synaptic integration of adult-born hippocampal dentate granule cells. Here we tested the capacity of the macrolide antibiotic azithromycin to neutralize the deleterious consequences of LPS administration in female C57BL6J mice. This antibiotic exerted potent neuroprotective effects. It reversed the increased immobility time during the Porsolt test, hippocampal secretion of pro-inflammatory cytokines, and AHN impairments. Moreover, azithromycin promoted the synaptic integration of adult-born neurons and functionally remodeled the gut microbiome. Therefore, our data point to azithromycin as a clinically relevant drug with the putative capacity to ameliorate the negative consequences of chronic inflammation by modulating AHN and hippocampal-related behaviors.Copyright © 2024 The Author(s)

KW - adult

KW - \*animal behavior

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - article

KW - brain disease/et [Etiology]

KW - C57BL 6 mouse

KW - chronic inflammation

KW - controlled study

KW - cytokine release

KW - Escherichia coli

KW - female

KW - forced swim test

KW - \*hippocampus

KW - immobility time

KW - intestine flora

KW - mouse

KW - nerve cell

KW - \*nervous system development

KW - \*neuroprotection

KW - nonhuman

KW - Retroviridae

KW - \*sepsis/dt [Drug Therapy]

KW - synaptic transmission

KW - treatment duration

KW - within host interaction

KW - \*azithromycin/do [Drug Dose]

KW - \*azithromycin/dt [Drug Therapy]

KW - \*azithromycin/po [Oral Drug Administration]

KW - \*azithromycin/pd [Pharmacology]

KW - cytokine

KW - lipopolysaccharide

KW - \*adult hippocampus neurogenesis

XT - sepsis / drug therapy / azithromycin

XT - azithromycin / drug therapy / sepsis

JF - Brain, Behavior, and Immunity

JA - Brain Behav. Immun.

LA - English

VL - 117

SP - 135

EP - 148

CY - United States

PB - Academic Press Inc.

SN - 0889-1591

SN - 1090-2139

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C3 - zithromax: Pfizer

C4 - Pfizer

UR - https://www.sciencedirect.com/science/journal/08891591

DO - https://dx.doi.org/10.1016/j.bbi.2024.01.005

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029766702

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1016%2fj.bbi.2024.01.005Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rodriguez-Moreno&issn=0889-1591&title=Brain%2C+Behavior%2C+and+Immunity&atitle=Azithromycin+preserves+adult+hippocampal+neurogenesis+and+behavior+in+a+mouse+model+of+sepsis&volume=117&issue=&spage=135&epage=148&date=2024&doi=10.1016%2Fj.bbi.2024.01.005&pmid=38211636&sid=OVID:embase

22.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029631270

ID - 38184307 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38184307]

T1 - Factors that impact on the quality of life of intestinal failure patients treated with home parenteral nutrition: protocol for a multicentre, longitudinal observational study

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A1 - Mathers J.

A1 - Pearce M.

A1 - Thompson N.P.

A1 - Jones D.

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Y1 - 2024//

N2 - Background Home parenteral nutrition (HPN) refers to the intravenous administration of macronutrients, micronutrients and fluid. The aims of treatment are to increase survival and improve quality of life (QoL). However, patients struggle with physiological symptoms, time-consuming invasive therapy and an increased occurrence of depression and social isolation. Our aim is to understand how HPN impacts the QoL of patients, and the contribution played by the complications of treatment, for example, liver disease. Methods and analysis A multicentre, longitudinal, observational study will be conducted using routinely collected clinical data. Participants will also be asked to complete three QoL questionnaires (EuroQol-5 Dimensions, Short Form 36 and HPN-QoL) at baseline and 12 months. The primary outcome is mean change in QoL scores over 12 months. Secondary outcomes include how factors including liver function, gut microbiota, number of infusions of PN per week, nutritional composition of PN and nutritional status impact on QoL scores. Ethics and dissemination Ethical approval was obtained from HRA and Health and Care Research Wales Research Ethics Committee (21/SC/0316). The study was eligible for portfolio adoption, Central Portfolio Management System ID 50506. Results will be disseminated through peer-reviewed scientific journals and presented at national and international meetings.Copyright © 2024 BMJ Publishing Group. All rights reserved.

KW - article

KW - clinical trial protocol

KW - cohort analysis

KW - diet composition

KW - emotional well-being

KW - European Quality of Life 5 Dimensions 5 Level questionnaire

KW - European Quality of Life 5 Dimensions Visual Analogue Scale

KW - health

KW - home infusion therapy

KW - \*home parenteral nutrition

KW - human

KW - \*intestinal failure/dm [Disease Management]

KW - \*intestinal failure/th [Therapy]

KW - intestine flora

KW - liver function

KW - longitudinal study

KW - mental health

KW - multicenter study

KW - nutritional status

KW - observational study

KW - outcome assessment

KW - pain

KW - physical well-being

KW - \*quality of life

KW - quality of life assessment

KW - \*risk factor

KW - role playing

KW - Short Form 36

KW - social well-being

KW - Home Parenteral Nutrition Quality of Life questionnaire

JF - BMJ Open

JA - BMJ Open

LA - English

VL - 14

IS - 1

SP - e082163

CY - United Kingdom

PB - BMJ Publishing Group

SN - 2044-6055 (electronic)

SN - 2044-6055

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UR - http://bmjopen.bmj.com/content/early/by/section

DO - https://dx.doi.org/10.1136/bmjopen-2023-082163

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029631270

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1136%2fbmjopen-2023-082163Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kirk&issn=2044-6055&title=BMJ+Open&atitle=Factors+that+impact+on+the+quality+of+life+of+intestinal+failure+patients+treated+with+home+parenteral+nutrition%3A+protocol+for+a+multicentre%2C+longitudinal+observational+study&volume=14&issue=1&spage=e082163&epage=&date=2024&doi=10.1136%2Fbmjopen-2023-082163&pmid=38184307&sid=OVID:embase

23.

TY - JOUR

DB - Embase Weekly Updates

AN - 2027191206

ID - 38155743 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38155743]

T1 - Co-Housing and Fecal Microbiota Transplantation: Technical Support for TCM Herbal Treatment of Extra-Intestinal Diseases Based on Gut Microbial Ecosystem Remodeling

A1 - Sun X.

A1 - Zhou X.

A1 - He W.

A1 - Sun W.

A1 - Xu Z.

Y1 - 2023//

N2 - Dysregulation of the gut microbial ecosystem (GME) (eg, alterations in the gut microbiota, gut-derived metabolites, and gut barrier) may contribute to the onset and progression of extra-intestinal diseases. Previous studies have found that Traditional Chinese Medicine herbs (TCMs) play an important role in manipulating the GME, but a prominent obstacle in current TCM research is the causal relationship between GME and disease amelioration. Encouragingly, co-housing and fecal microbiota transplantation (FMT) provide evidence-based support for TCMs to treat extra-intestinal diseases by targeting GME. In this review, we documented the principles, operational procedures, applications and limitations of the key technologies (ie, co-housing and FMT); furthermore, we provided evidence that TCM works through the GME, especially the gut microbiota (eg, SCFA-and BSH-producing bacteria), the gut-derived metabolites (eg, IS, pCS, and SCFAs), and intestinal barrier to alleviate extra-intestinal diseases. This will be beneficial in constructing microecological pathways for TCM treatment of extra-intestinal diseases in the future.Copyright © 2023 Sun et al.

KW - Actinobacteria

KW - acute pancreatitis

KW - Alzheimer disease

KW - asthma

KW - atherosclerosis

KW - atrial fibrillation

KW - autism

KW - Bacteroidetes

KW - Bifidobacteriaceae

KW - cardiovascular disease

KW - cerebrovascular accident

KW - \*Chinese medicine

KW - chronic kidney failure

KW - Clostridioides difficile

KW - cognitive defect

KW - colonoscopy

KW - depression

KW - \*enteropathy

KW - Faecalibacterium

KW - \*fecal microbiota transplantation

KW - feces microflora

KW - Firmicutes

KW - hepatic encephalopathy

KW - hypertension

KW - inflammation

KW - insulin dependent diabetes mellitus

KW - \*intestine flora

KW - Lachnospiraceae

KW - metabolite

KW - microbial community

KW - microbial metabolism

KW - non insulin dependent diabetes mellitus

KW - nonalcoholic fatty liver

KW - nonhuman

KW - obesity

KW - osteoporosis

KW - ovary cancer

KW - ovary polycystic disease

KW - pneumonia

KW - Proteobacteria

KW - review

KW - betaine

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - trimethylamine/ec [Endogenous Compound]

JF - Drug Design, Development and Therapy

JA - Drug Des. Dev. Ther.

LA - English

VL - 17

SP - 3803

EP - 3831

CY - New Zealand

PB - Dove Medical Press Ltd

SN - 1177-8881 (electronic)

SN - 1177-8881

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UR - https://www.dovepress.com/getfile.php?fileID=95556

DO - https://dx.doi.org/10.2147/DDDT.S443462

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2027191206

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.2147%2fDDDT.S443462Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sun&issn=1177-8881&title=Drug+Design%2C+Development+and+Therapy&atitle=Co-Housing+and+Fecal+Microbiota+Transplantation%3A+Technical+Support+for+TCM+Herbal+Treatment+of+Extra-Intestinal+Diseases+Based+on+Gut+Microbial+Ecosystem+Remodeling&volume=17&issue=&spage=3803&epage=3831&date=2023&doi=10.2147%2FDDDT.S443462&pmid=38155743&sid=OVID:embase

24.

TY - JOUR

DB - Embase Weekly Updates

AN - 631717847

ID - 32391658 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32391658]

T1 - Management of COVID-19: the Zhejiang experience

A1 - Xu K.

A1 - Cai H.

A1 - Shen Y.

A1 - Ni Q.

A1 - Chen Y.

A1 - Hu S.

A1 - Li J.

A1 - Wang H.

A1 - Yu L.

A1 - Huang H.

A1 - Qiu Y.

A1 - Wei G.

A1 - Fang Q.

A1 - Zhou J.

A1 - Sheng J.

A1 - Liang T.

A1 - Li L.

Y1 - 2020//

N2 - The current epidemic situation of coronavirus disease 2019 (COVID-19) still remained severe. As the National Clinical Research Center for Infectious Diseases, the First Affiliated Hospital of Zhejiang University School of Medicine is the primary medical care center for COVID-19 in Zhejiang province. Based on the present expert consensus carried out by National Health Commission and National Administration of Traditional Chinese Medicine, our team summarized and established an effective treatment strategy centered on "Four-Anti and Two-Balance" for clinical practice. The "Four-Anti and Two-Balance" strategy included antivirus, anti-shock, anti-hyoxemia, anti-secondary infection, and maintaining of water, electrolyte and acid base balance and microecological balance. Meanwhile, integrated multidisciplinary personalized treatment was recommended to improve therapeutic effect. The importance of early viralogical detection, dynamic monitoring of inflammatory indexes and chest radiograph was emphasized in clinical decision-making. Sputum was observed with the highest positive rate of RT-PCR results. Viral nucleic acids could be detected in 10%patients' blood samples at acute period and 50%of patients had positive RT-PCR results in their feces. We also isolated alive viral strains from feces, indicating potential infectiousness of feces.Dynamic cytokine detection was necessary to timely identifying cytokine storms and application of artificial liver blood purification system. The "Four-Anti and Two-Balance" strategy effectively increased cure rate and reduced mortality. Early antiviral treatment could alleviate disease severity and prevent illness progression, and we found lopinavir/ritonavir combined with abidol showed antiviral effects in COVID-19. Shock and hypoxemia were usually caused by cytokine storms. The artificial liver blood purification system could rapidly remove inflammatory mediators and block cytokine storm.Moreover, it also favored the balance of fluid, electrolyte and acid-base and thus improved treatment efficacy in critical illness. For cases of severe illness, early and also short period of moderate glucocorticoid was supported. Patients with oxygenation index below 200 mmHg should be transferred to intensive medical center. Conservative oxygen therapy was preferred and noninvasive ventilation was not recommended. Patients with mechanical ventilation should be strictly supervised with cluster ventilator-associated pneumonia prevention strategies. Antimicrobial prophylaxis was not recommended except for patients with long course of disease, repeated fever and elevated procalcitonin (PCT), meanwhile secondary fungal infection should be concerned.Some patients with COVID-19 showed intestinal microbial dysbiosis with decreased probiotics such as Lactobacillus and Bifidobacterium, so nutritional and gastrointestinal function should be assessed for all patients.Nutritional support and application of prebiotics or probiotics were suggested to regulate the balance of intestinal microbiota and reduce the risk of secondary infection due to bacterial translocation. Anxiety and fear were common in patients with COVID-19. Therefore,we established dynamic assessment and warning for psychological crisis. We also integrated Chinese medicine in treatment to promote disease rehabilitation through classification methods of traditional Chinese medicine. We optimized nursing process for severe patients to promote their rehabilitation. It remained unclear about viral clearance pattern after the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection. Therefore, two weeks' quarantine for discharged patients was required and a regular following up was also needed.The Zhejiang experience and suggestions have been implemented in our center and achieved good results. However, since COVID-19 was a newly emerging disease, more work was warranted to improve strategies of prevention, diagnosis and treatment for COVID-19.

KW - Betacoronavirus

KW - China

KW - coronavirus disease 2019

KW - \*Coronavirus infection/di [Diagnosis]

KW - \*Coronavirus infection/ep [Epidemiology]

KW - \*Coronavirus infection/th [Therapy]

KW - \*disease management

KW - early diagnosis

KW - feces

KW - human

KW - isolation and purification

KW - \*pandemic

KW - Severe acute respiratory syndrome coronavirus 2

KW - sputum

KW - virology

KW - \*virus pneumonia/di [Diagnosis]

KW - \*virus pneumonia/ep [Epidemiology]

KW - \*virus pneumonia/th [Therapy]

JF - Zhejiang da xue xue bao. Yi xue ban = Journal of Zhejiang University. Medical sciences

JA - Zhejiang Da Xue Xue Bao Yi Xue Ban

LA - Chinese

VL - 49

IS - 2

SP - 147

EP - 157

CY - China

PB - NLM (Medline)

SN - 1008-9292

M1 - (Xu, Cai, Shen, Ni, Chen, Hu, Li, Wang, Yu, Huang, Qiu, Wei, Fang, Zhou, Sheng, Liang, Li) First Affiliated Hospital, Zhejiang University School of Medicine, Hangzhou 310003, China

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PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=631717847

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&AN=631717847Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Xu&issn=1008-9292&title=Zhejiang+da+xue+xue+bao.+Yi+xue+ban+%3D+Journal+of+Zhejiang+University.+Medical+sciences&atitle=Management+of+COVID-19%3A+the+Zhejiang+experience&volume=49&issue=2&spage=147&epage=157&date=2020&doi=&pmid=32391658&sid=OVID:embase

25.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029029195

ID - 38130738 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38130738]

T1 - Frailty in end-stage liver disease: Understanding pathophysiology, tools for assessment, and strategies for management

A1 - Elsheikh M.

A1 - El Sabagh A.

A1 - Mohamed I.B.

A1 - Bhongade M.

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Y1 - 2023//

N2 - Frailty and sarcopenia are frequently observed in patients with end-stage liver disease. Frailty is a complex condition that arises from deteriorations across various physiological systems, including the musculoskeletal, cardiovascular, and immune systems, resulting in a reduced ability of the body to withstand stressors. This condition is associated with declined resilience and increased vulnerability to negative outcomes, including disability, hospitalization, and mortality. In cirrhotic patients, frailty is influenced by multiple factors, such as hyperammonemia, hormonal imbalance, malnutrition, ascites, hepatic encephalopathy, and alcohol intake. Assessing frailty is crucial in predicting morbidity and mortality in cirrhotic patients. It can aid in making critical decisions regarding patients' eligibility for critical care and transplantation. This, in turn, can guide the development of an individualized treatment plan for each patient with cirrhosis, with a focus on prioritizing exercise, proper nutrition, and appropriate treatment of hepatic complications as the primary lines of treatment. In this review, we aim to explore the topic of frailty in liver diseases, with a particular emphasis on pathophysiology, clinical assessment, and discuss strategies for preventing frailty through effective treatment of hepatic complications. Furthermore, we explore novel assessment and management strategies that have emerged in recent years, including the use of wearable technology and telemedicine.Copyright © The Author(s) 2023.

KW - aging

KW - alcohol consumption

KW - amino acid metabolism

KW - ascites

KW - clinical assessment

KW - clinical effectiveness

KW - Clinical Frailty Scale

KW - depression

KW - \*disease assessment

KW - disease predisposition

KW - dysbiosis

KW - \*end stage liver disease

KW - endocrine disease

KW - fasting

KW - fatty liver

KW - \*frailty/dt [Drug Therapy]

KW - \*frailty/su [Surgery]

KW - \*frailty/th [Therapy]

KW - functional status assessment

KW - hepatic encephalopathy

KW - hepatitis

KW - hormonal therapy

KW - hospital discharge

KW - hospitalization

KW - human

KW - hyperammonemia

KW - information technology

KW - liver cirrhosis

KW - malnutrition

KW - \*medical procedures

KW - mortality risk

KW - nutrition

KW - \*pathophysiology

KW - preoperative exercise

KW - quality of life

KW - review

KW - sarcopenia/su [Surgery]

KW - sarcopenic obesity

KW - telemedicine

KW - transjugular intrahepatic portosystemic shunt

KW - carnitine/dt [Drug Therapy]

KW - cytokine receptor antagonist/dt [Drug Therapy]

KW - diuretic agent

KW - metformin/dt [Drug Therapy]

KW - ornithine aspartate/dt [Drug Therapy]

KW - rifaximin/dt [Drug Therapy]

KW - unclassified drug

KW - wearable device

KW - Fried Frailty Index

KW - gut microbiota dysbiosis

KW - Liver Frailty Index

KW - \*management strategy

KW - metabolic dysfunction associated steatotic liver disease

KW - non home discharge

KW - myostatin antagonist/dt [Drug Therapy]

XT - frailty / drug therapy / carnitine

XT - frailty / drug therapy / cytokine receptor antagonist

XT - frailty / drug therapy / metformin

XT - frailty / drug therapy / myostatin antagonist

XT - frailty / drug therapy / ornithine aspartate

XT - frailty / drug therapy / rifaximin

XT - carnitine / drug therapy / frailty

XT - cytokine receptor antagonist / drug therapy / frailty

XT - metformin / drug therapy / frailty

XT - myostatin antagonist / drug therapy / frailty

XT - ornithine aspartate / drug therapy / frailty

XT - rifaximin / drug therapy / frailty

JF - World Journal of Gastroenterology

JA - World J. Gastroenterol.

LA - English

VL - 29

IS - 46

SP - 6028

EP - 6048

CY - China

PB - Baishideng Publishing Group Inc

SN - 1007-9327

SN - 2219-2840

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UR - https://www.wjgnet.com/1007-9327/full/v29/i46/6028.htm

DO - https://dx.doi.org/10.3748/wjg.v29.i46.6028

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029029195

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3748%2fwjg.v29.i46.6028Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Elsheikh&issn=1007-9327&title=World+Journal+of+Gastroenterology&atitle=Frailty+in+end-stage+liver+disease%3A+Understanding+pathophysiology%2C+tools+for+assessment%2C+and+strategies+for+management&volume=29&issue=46&spage=6028&epage=6048&date=2023&doi=10.3748%2Fwjg.v29.i46.6028&pmid=38130738&sid=OVID:embase

26.

TY - JOUR

DB - Embase Weekly Updates

AN - 2027335437

T1 - Once upon a Time Oral Microbiota: A Cinderella or a Protagonist in Autism Spectrum Disorder?

A1 - Mussap M.

A1 - Beretta P.

A1 - Esposito E.

A1 - Fanos V.

AO - Mussap, Michele; ORCID: https://orcid.org/0000-0002-3417-1284

Y1 - 2023//

N2 - Autism spectrum disorder (ASD) is a neurodevelopmental disorder evolving over the lifetime of individuals. The oral and gut microbial ecosystems are closely connected to each other and the brain and are potentially involved in neurodevelopmental diseases. This narrative review aims to identify all the available evidence emerging from observational studies focused on the role of the oral microbiome in ASD. A literature search was conducted using PubMed and the Cochrane Library for relevant studies published over the last ten years. Overall, in autistic children, the oral microbiota is marked by the abundance of several microbial species belonging to the Proteobacteria phylum and by the depletion of species belonging to the Bacteroidetes phylum. In mouse models, the oral microbiota is marked by the abundance of the Bacteroidetes phylum. Oral dysbiosis in ASD induces changes in the human metabolome, with the overexpression of metabolites closely related to the pathogenesis of ASD, such as acetate, propionate, and indoles, together with the underexpression of butyrate, confirming the central role of tryptophan metabolism. The analysis of the literature evidences the close relationship between oral dysbiosis and autistic core symptoms; the rebuilding of the oral and gut ecosystems by probiotics may significantly contribute to mitigating the severity of ASD symptoms.Copyright © 2023 by the authors.

KW - Actinobacteria

KW - Actinomyces

KW - \*autism

KW - Bacillales

KW - bacteremia

KW - Bacteroidales

KW - Bacteroides fragilis

KW - Bifidobacterium

KW - carbon metabolism

KW - chronic periodontitis

KW - dental health

KW - depression

KW - Flavobacterium

KW - human

KW - immune system

KW - Lactobacillus rhamnosus

KW - mental disease

KW - metabolome

KW - metabolomics

KW - microglia

KW - \*mouth flora

KW - periodontitis

KW - review

KW - Rothia mucilaginosa

KW - Streptococcus mitis

KW - tryptophan metabolism

KW - acetic acid

KW - lipopolysaccharide

KW - propionic acid

KW - virulence factor

JF - Metabolites

JA - Metabolites

LA - English

VL - 13

IS - 12

SP - 1183

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2218-1989 (electronic)

SN - 2218-1989

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UR - http://www.mdpi.com/journal/metabolites

DO - https://dx.doi.org/10.3390/metabo13121183

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2027335437

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.3390%2fmetabo13121183Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mussap&issn=2218-1989&title=Metabolites&atitle=Once+upon+a+Time+Oral+Microbiota%3A+A+Cinderella+or+a+Protagonist+in+Autism+Spectrum+Disorder%3F&volume=13&issue=12&spage=1183&epage=&date=2023&doi=10.3390%2Fmetabo13121183&pmid=&sid=OVID:embase

27.

TY - JOUR

DB - Embase Weekly Updates

AN - 2029049972

T1 - Is the surgical community prepared to face patients with SARS-CoV-2-induced cell death and organ injury in the post-pandemic era?

A1 - Rampes S.

A1 - Ruhomaun S.

A1 - Shu Q.

A1 - Ma D.

AO - Ma, Daqing; ORCID: https://orcid.org/0000-0003-1235-0537

Y1 - 2023//

KW - adverse outcome

KW - blood clotting disorder

KW - \*cell death

KW - \*coronavirus disease 2019/dt [Drug Therapy]

KW - diet therapy

KW - dysbiosis

KW - editorial

KW - elective surgery

KW - endothelial dysfunction

KW - human

KW - immune dysregulation

KW - integrated health care system

KW - length of stay

KW - long COVID

KW - multidisciplinary team

KW - nonhuman

KW - \*organ injury/co [Complication]

KW - \*pandemic

KW - patient care

KW - perioperative medicine

KW - postoperative complication

KW - postoperative delirium

KW - preoperative evaluation

KW - preoperative exercise

KW - risk benefit analysis

KW - risk factor

KW - \*Severe acute respiratory syndrome coronavirus 2

KW - shared decision making

KW - smoking cessation

KW - \*surgery

KW - surgical mortality

KW - therapy delay

KW - vaccination

KW - SARS-CoV-2 vaccine/dt [Drug Therapy]

XT - coronavirus disease 2019 / drug therapy / SARS-CoV-2 vaccine

XT - SARS-CoV-2 vaccine / drug therapy / coronavirus disease 2019

JF - Burns and Trauma

JA - Burns and Trauma

LA - English

VL - 11

SP - tkad049

CY - United Kingdom

PB - Oxford University Press

SN - 2321-3876 (electronic)

SN - 2321-3876

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UR - https://academic.oup.com/burnstrauma

DO - https://dx.doi.org/10.1093/burnst/tkad049

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2029049972

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1093%2fburnst%2ftkad049Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rampes&issn=2321-3876&title=Burns+and+Trauma&atitle=Is+the+surgical+community+prepared+to+face+patients+with+SARS-CoV-2-induced+cell+death+and+organ+injury+in+the+post-pandemic+era%3F&volume=11&issue=&spage=tkad049&epage=&date=2023&doi=10.1093%2Fburnst%2Ftkad049&pmid=&sid=OVID:embase

28.

TY - JOUR

DB - Embase Weekly Updates

AN - 2026898679

ID - 38032428 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38032428]

T1 - The 36th International Symposium on Pediatric Surgical Research

A1 - Puri P.

Y1 - 2024//

KW - awards and prizes

KW - basic science

KW - centralization

KW - \*clinical research

KW - congenital diaphragm hernia

KW - convalescence

KW - editorial

KW - exosome

KW - human

KW - hydrocephalus

KW - intestinal dysmotility

KW - intestinal failure

KW - microbiome

KW - muscle disease

KW - necrotizing enterocolitis

KW - neuroendoscopy

KW - newborn sepsis

KW - patient care

KW - \*pediatric surgery

KW - psychological well-being

KW - publication

KW - regenerative medicine

KW - short bowel syndrome

KW - smooth muscle

KW - \*symposium

KW - tissue regeneration

JF - Pediatric Surgery International

JA - Pediatr. Surg. Int.

LA - English

VL - 40

IS - 1

SP - 14

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 0179-0358

SN - 1437-9813

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UR - https://www.springer.com/journal/383

DO - https://dx.doi.org/10.1007/s00383-023-05597-6

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2026898679

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1007%2fs00383-023-05597-6Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Puri&issn=0179-0358&title=Pediatric+Surgery+International&atitle=The+36th+International+Symposium+on+Pediatric+Surgical+Research&volume=40&issue=1&spage=14&epage=&date=2024&doi=10.1007%2Fs00383-023-05597-6&pmid=38032428&sid=OVID:embase

29.

TY - JOUR

DB - Embase Weekly Updates

AN - 2026523135

ID - 37946667 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37946667]

T1 - Natural history and prognostic factors of candidemia in kidney transplant recipients: A retrospective, multinational study

A1 - Pecanha-Pietrobom P.M.

A1 - Truda V.S.S.

A1 - Fernandez-Ruiz M.

A1 - Gutierrez M.G.

A1 - Sukiennik T.C.T.

A1 - Santos D.W.D.C.L.

A1 - Valerio M.

A1 - Gioia F.

A1 - Rodriguez-Goncer I.

A1 - Giacobbe D.R.

A1 - Vena A.

A1 - Machado M.

A1 - Bassetti M.

A1 - Munoz P.

A1 - Aguado J.M.

A1 - Tedesco-Silva H.

A1 - Colombo A.L.

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AO - Vena, Antonio; ORCID: https://orcid.org/0000-0002-0697-3992

Y1 - 2024//

N2 - Background: The natural history of candidemia in kidney transplant recipients (KTR) remains poorly understood. This study aimed to evaluate mortality, prognostic factors and overall graft loss after candidemia in KTRs. Method(s): This is a retrospective multicentre study enrolling all KTRs >=15 years old with candidemia diagnosed at hospitals in Brazil, Spain and Italy from 2010 to 2020. Primary endpoints were mortality rates at 14 and 30 days. Secondary endpoints were prognostic factors of 14-day mortality and overall graft loss. Result(s): We enrolled 93 KTRs of which 75 were from Brazil. The mean time interval from transplantation to the onset of candidemia was 45.2 +/- 61.5 months. 42% of all patients were on haemodialysis, 31.3% had an episode of sepsis and 39% underwent surgery within 30 days before fungemia. European patients were more likely to receive echinocandin (32 vs. 72%, p <.001). 22.7% of Brazilian patients did not receive any antifungal before death. All-cause mortality at 14 days was higher in Brazil (41.3 vs. 11.1%, p =.016). Candida colonisation (OR 6.91 [95% CI: 1.08-44.3], p =.042) and hypotension (OR 4.87 [95% CI: 1.62-14.66], p =.005) were associated with 14-day mortality. Echinocandin treatment had a protective effect (OR 0.19 [95% CI: 0.05-0.73], p =.015). Graft loss at 90 days occurred in 48% of patients (70.7 in Brazil vs. 22.2% in Europe, p <.01). Conclusion(s): Candidemia in KTR is usually documented late after engraftment in patients requiring HD, surgical procedures and dysbiosis secondary to antibiotic use. Mortality was higher in Brazil. Echinocandin therapy was associated with improved survival.Copyright © 2023 Wiley-VCH GmbH. Published by John Wiley & Sons Ltd.

KW - acute kidney failure/th [Therapy]

KW - adult

KW - aged

KW - all cause mortality

KW - antifungal therapy

KW - article

KW - bacterial infection

KW - blood culture

KW - Brazil

KW - Candida albicans

KW - \*candidemia/co [Complication]

KW - \*candidemia/dt [Drug Therapy]

KW - \*candidemia/et [Etiology]

KW - catheter removal

KW - clinical feature

KW - clinical outcome

KW - controlled study

KW - delayed graft function

KW - disease predisposition

KW - dysbiosis

KW - end stage renal disease/su [Surgery]

KW - end stage renal disease/th [Therapy]

KW - endotracheal intubation

KW - Europe

KW - female

KW - fungal colonization

KW - fungemia

KW - graft failure

KW - \*graft recipient

KW - graft rejection/dt [Drug Therapy]

KW - hemodialysis

KW - hospital admission

KW - human

KW - human tissue

KW - hypotension

KW - immunosuppressive treatment

KW - invasive candidiasis

KW - Italy

KW - \*kidney transplantation

KW - major clinical study

KW - male

KW - mental health

KW - mortality rate

KW - nonhuman

KW - opportunistic infection

KW - peritoneal dialysis

KW - \*prognosis

KW - renal replacement therapy

KW - respiratory failure

KW - retrospective study

KW - sepsis

KW - Spain

KW - amphotericin B lipid complex/dt [Drug Therapy]

KW - antiinfective agent

KW - azathioprine/cb [Drug Combination]

KW - basiliximab

KW - corticosteroid/dt [Drug Therapy]

KW - cyclosporine/cb [Drug Combination]

KW - echinocandin/dt [Drug Therapy]

KW - fluconazole/dt [Drug Therapy]

KW - mammalian target of rapamycin/cb [Drug Combination]

KW - mycophenolic acid/cb [Drug Combination]

KW - prednisone/cb [Drug Combination]

KW - tacrolimus/cb [Drug Combination]

KW - thymocyte antibody/dt [Drug Therapy]

XT - candidemia / drug therapy / amphotericin B lipid complex

XT - candidemia / drug therapy / echinocandin

XT - candidemia / drug therapy / fluconazole

XT - graft rejection / drug therapy / corticosteroid

XT - graft rejection / drug therapy / thymocyte antibody

XT - amphotericin B lipid complex / drug therapy / candidemia

XT - azathioprine / drug combination / cyclosporine

XT - azathioprine / drug combination / prednisone

XT - azathioprine / drug combination / tacrolimus

XT - corticosteroid / drug therapy / graft rejection

XT - cyclosporine / drug combination / azathioprine

XT - cyclosporine / drug combination / mammalian target of rapamycin

XT - cyclosporine / drug combination / mycophenolic acid

XT - cyclosporine / drug combination / prednisone

XT - cyclosporine / drug combination / tacrolimus

XT - echinocandin / drug therapy / candidemia

XT - fluconazole / drug therapy / candidemia

XT - mammalian target of rapamycin / drug combination / cyclosporine

XT - mammalian target of rapamycin / drug combination / prednisone

XT - mammalian target of rapamycin / drug combination / tacrolimus

XT - mycophenolic acid / drug combination / cyclosporine

XT - mycophenolic acid / drug combination / prednisone

XT - mycophenolic acid / drug combination / tacrolimus

XT - prednisone / drug combination / azathioprine

XT - prednisone / drug combination / cyclosporine

XT - prednisone / drug combination / mammalian target of rapamycin

XT - prednisone / drug combination / mycophenolic acid

XT - prednisone / drug combination / tacrolimus

XT - tacrolimus / drug combination / azathioprine

XT - tacrolimus / drug combination / cyclosporine

XT - tacrolimus / drug combination / mammalian target of rapamycin

XT - tacrolimus / drug combination / mycophenolic acid

XT - tacrolimus / drug combination / prednisone

XT - thymocyte antibody / drug therapy / graft rejection

JF - Mycoses

JA - Mycoses

LA - English

VL - 67

IS - 1

SP - e13669

CY - United Kingdom

PB - John Wiley and Sons Inc

SN - 0933-7407

SN - 1439-0507

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1439-0507

DO - https://dx.doi.org/10.1111/myc.13669

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2026523135

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1111%2fmyc.13669Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pecanha-Pietrobom&issn=0933-7407&title=Mycoses&atitle=Natural+history+and+prognostic+factors+of+candidemia+in+kidney+transplant+recipients%3A+A+retrospective%2C+multinational+study&volume=67&issue=1&spage=e13669&epage=&date=2024&doi=10.1111%2Fmyc.13669&pmid=37946667&sid=OVID:embase

30.

TY - JOUR

DB - Embase Weekly Updates

AN - 2028689858

ID - 37386935 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37386935]

T1 - Restrictive Versus Permissive Use of Broad-spectrum Antibiotics in Patients Receiving Allogeneic Stem Cell Transplantation and With Early Fever Due to Cytokine Release Syndrome: Evidence for Beneficial Microbiota Protection Without Increase in Infectious Complications

A1 - Weber D.

A1 - Hiergeist A.

A1 - Weber M.

A1 - Ghimire S.

A1 - Salzberger B.

A1 - Wolff D.

A1 - Poeck H.

A1 - Gessner A.

A1 - Edinger M.

A1 - Herr W.

A1 - Meedt E.

A1 - Holler E.

Y1 - 2023//

N2 - Background. Intestinal microbiome contributes to the pathophysiology of acute gastrointestinal (GI) graft-versus-host disease (GvHD) and loss of microbiome diversity influences the outcome of patients after allogeneic stem cell transplantation (SCT). Systemic broad-spectrum antibiotics have been identified as a major cause of early intestinal dysbiosis. Methods. In 2017, our transplant unit at the university hospital in Regensburg changed the antibiotic strategy from a permissive way with initiation of antibiotics in all patients with neutropenic fever independent of the underlying cause and risk to a restrictive use in cases with high likelihood of cytokine release syndrome (eg, after anti-thymocyte globulin [ATG] therapy). We analyzed clinical data and microbiome parameters obtained 7 days after allogeneic SCT from 188 patients with ATG therapy transplanted in 2015/2016 (permissive cohort, n = 101) and 2918/2019 (restrictive cohort, n = 87). Results. Restrictive antibiotic treatment postponed the beginning of antibiotic administration from 1.4 +/- 7.6 days prior to 1.7 +/- 5.5 days after SCT (P = .01) and significantly reduced the duration of antibiotic administration by 5.8 days (P < .001) without increase in infectious complications. Furthermore, we observed beneficial effects of the restrictive strategy compared with the permissive way on microbiome diversity (urinary 3-indoxylsulfate, P = .01; Shannon and Simpson indices, P < .001) and species abundance 7 days post-transplant as well as a positive trend toward a reduced incidence of severe GI GvHD (P = .1). Conclusions. Our data indicate that microbiota protection can be achieved by a more careful selection of neutropenic patients qualifying for antibiotic treatment during allogeneic SCT without increased risk of infectious complications.Copyright © 2023 Oxford University Press. All rights reserved.

KW - acute leukemia/th [Therapy]

KW - adult

KW - \*allogeneic stem cell transplantation

KW - \*antibiotic therapy

KW - article

KW - bone marrow depression/th [Therapy]

KW - clinical examination

KW - clinical outcome

KW - Clostridium innocuum

KW - cohort analysis

KW - controlled study

KW - \*cytokine release syndrome/dt [Drug Therapy]

KW - drug use

KW - Eggerthella lenta

KW - Enterococcus

KW - febrile neutropenia

KW - female

KW - \*fever/dt [Drug Therapy]

KW - gastrointestinal disease

KW - graft versus host reaction/dt [Drug Therapy]

KW - graft versus host reaction/pc [Prevention]

KW - human

KW - lymphoma/th [Therapy]

KW - major clinical study

KW - male

KW - middle aged

KW - myelodysplastic syndrome/th [Therapy]

KW - myeloma/th [Therapy]

KW - myeloproliferative disorder/th [Therapy]

KW - overall survival

KW - Pneumocystis pneumonia/dt [Drug Therapy]

KW - Pneumocystis pneumonia/pc [Prevention]

KW - population abundance

KW - practice guideline

KW - reduced intensity conditioning

KW - retrospective study

KW - RNA sequence

KW - Shannon index

KW - sibling donor

KW - Simpson index

KW - stem cell transplantation

KW - Streptococcus

KW - unrelated donor

KW - \*antibiotic agent/dt [Drug Therapy]

KW - calcineurin inhibitor/cb [Drug Combination]

KW - calcineurin inhibitor/dt [Drug Therapy]

KW - ceftazidime

KW - cotrimoxazole/dt [Drug Therapy]

KW - meropenem

KW - methotrexate/cb [Drug Combination]

KW - methotrexate/dt [Drug Therapy]

KW - mycophenolate mofetil/cb [Drug Combination]

KW - mycophenolate mofetil/dt [Drug Therapy]

KW - piperacillin plus tazobactam

KW - rifaximin/po [Oral Drug Administration]

KW - RNA 16S/ec [Endogenous Compound]

KW - thymocyte antibody/cb [Drug Combination]

KW - thymocyte antibody/dt [Drug Therapy]

KW - unclassified drug

KW - vancomycin

KW - 3 indoxylsulfate

XT - cytokine release syndrome / drug therapy / antibiotic agent

XT - fever / drug therapy / antibiotic agent

XT - graft versus host reaction / drug therapy / calcineurin inhibitor

XT - graft versus host reaction / drug therapy / methotrexate

XT - graft versus host reaction / drug therapy / mycophenolate mofetil

XT - graft versus host reaction / drug therapy / thymocyte antibody

XT - Pneumocystis pneumonia / drug therapy / cotrimoxazole

XT - antibiotic agent / drug therapy / cytokine release syndrome

XT - antibiotic agent / drug therapy / fever

XT - calcineurin inhibitor / drug combination / methotrexate

XT - calcineurin inhibitor / drug combination / mycophenolate mofetil

XT - calcineurin inhibitor / drug therapy / graft versus host reaction

XT - cotrimoxazole / drug therapy / Pneumocystis pneumonia

XT - methotrexate / drug combination / calcineurin inhibitor

XT - methotrexate / drug combination / thymocyte antibody

XT - methotrexate / drug therapy / graft versus host reaction

XT - mycophenolate mofetil / drug combination / calcineurin inhibitor

XT - mycophenolate mofetil / drug combination / thymocyte antibody

XT - mycophenolate mofetil / drug therapy / graft versus host reaction

XT - thymocyte antibody / drug combination / methotrexate

XT - thymocyte antibody / drug combination / mycophenolate mofetil

XT - thymocyte antibody / drug therapy / graft versus host reaction

JF - Clinical Infectious Diseases

JA - Clin. Infect. Dis.

LA - English

VL - 77

IS - 10

SP - 1432

EP - 1439

CY - United Kingdom

PB - Oxford University Press

SN - 1058-4838

SN - 1537-6591

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UR - http://cid.oxfordjournals.org/content/by/year

DO - https://dx.doi.org/10.1093/cid/ciad389

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=2028689858

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1093%2fcid%2fciad389Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Weber&issn=1058-4838&title=Clinical+Infectious+Diseases&atitle=Restrictive+Versus+Permissive+Use+of+Broad-spectrum+Antibiotics+in+Patients+Receiving+Allogeneic+Stem+Cell+Transplantation+and+With+Early+Fever+Due+to+Cytokine+Release+Syndrome%3A+Evidence+for+Beneficial+Microbiota+Protection+Without+Increase+in+Infectious+Complications&volume=77&issue=10&spage=1432&epage=1439&date=2023&doi=10.1093%2Fcid%2Fciad389&pmid=37386935&sid=OVID:embase

31.

TY - JOUR

DB - Embase Weekly Updates

AN - 641645208

T1 - The Effect of Chronic Allergic Lung Inflammation on Gut Microbiota and Depression in Mice

T3 - American Thoracic Society International Conference, ATS 2023. Washington, DC United States.

A1 - Kanaya A.

A1 - Lukovic E.

A1 - Emala C.W.

A1 - Mikami M.

Y1 - 2023//

N2 - Rationale: Emerging epidemiological studies show that allergies and allergic diseases, including asthma, may be linked to depression. There is evidence that the gut microbiota plays a role in the pathogenesis of asthma and depression. However, very few studies examine a possible relationship between all three. Therefore, we investigated the hypothesis that allergic lung inflammation in mice causes gut microbial dysbiosis that may, via the gut-brain axis, be associated with depression. Method(s): All animal studies were approved by the institutional IACUC. Wild-type C57BL/6J female mice were sensitized with intranasal house dust mite (HDM) antigen (N = 12) or control vehicle (PBS) (N = 12) for 6 weeks to induce chronic allergic lung inflammation. Sucrose preference tests were performed to assess depression. Fecal samples were collected, and 16S ribosomal RNA gene sequencing was performed in Alkek Center for Metagenomics and Microbiome Research at Baylor College of Medicine to detect differences in gut microbiota composition between the HDM and PBS groups. Distance calculation, operational taxonomic units cluster, rarefaction analysis, and estimator calculation (alpha- and beta-diversity) were performed using ATIMA software. Result(s): There was significant difference in beta-diversity (Bray-Curtis dissimilarity, FStatistics = 6.16, p = 0.001) of the gut microbiota between HDM and PBS groups. However, there was no difference in the alpha-diversity (Shannon index: p = 0.45). We observed multiple differentially abundant bacteria in the HDM and PBS groups. The genus Faecalibaculum (p = 0.028) was more abundant in the HDM group, whereas phylum Firmicutes (p = 0.037), and genera Dubosiella (p = 0.00024) and Turicibacter (p = 0.037) were more abundant in the PBS group. Interestingly, the relative abundance of some bacteria were correlated with the sucrose preference tests. The order Lactobacillales (r = 0.46, p = 0.028), the family Lactobacillaceae (r = 0.44, p = 0.036) and the genus Lactobacillus (r = 0.44, p = 0.036) were positively associated with sucrose preference tests, whereas the family Bacteroidaceae (r = 0.47, p = 0.023) and genus Bacteroides (r = 0.47, p = 0.023) were negatively associated with sucrose preference tests. Conclusion(s): 6 weeks of intranasal HDM administration to mimic the chronic status of lung inflammation in asthma caused several gut microbial changes in mice. Some of these alterations were associated with sucrose preference rates, suggesting a link between asthma, microbiome, and depression. The microbial changes in the gut-lung-brain axis may play a pivotal role in the development of depression in asthmatic mice.

KW - adult

KW - animal experiment

KW - animal model

KW - asthma

KW - Bacteroidaceae

KW - Bacteroides

KW - \*brain-gut axis

KW - C57BL 6 mouse

KW - calculation

KW - conference abstract

KW - controlled study

KW - \*depression

KW - Dermatophagoides

KW - dysbiosis

KW - feces

KW - Firmicutes

KW - gene sequence

KW - intestine flora

KW - Lactobacillales

KW - Lactobacillus

KW - male

KW - metagenomics

KW - mouse

KW - nonhuman

KW - operational taxonomic unit

KW - phylum

KW - \*pneumonia

KW - RNA gene

KW - Shannon index

KW - software

KW - sucrose preference test

KW - wild type

KW - antigen

KW - RNA 16S

KW - sucrose

JF - American Journal of Respiratory and Critical Care Medicine

JA - Am. J. Respir. Crit. Care Med.

LA - English

VL - 207

IS - 1

SP -

CY - Netherlands

PB - American Thoracic Society

SN - 1535-4970

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UR - https://www.atsjournals.org/doi/abs/10.1164/ajrccm-conference.2023.207.1\_MeetingAbstracts.A3022

DO - https://dx.doi.org/10.1164/ajrccm-conference.2023.B31

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=641645208

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexb&DO=10.1164%2fajrccm-conference.2023.B31Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kanaya&issn=1535-4970&title=American+Journal+of+Respiratory+and+Critical+Care+Medicine&atitle=The+Effect+of+Chronic+Allergic+Lung+Inflammation+on+Gut+Microbiota+and+Depression+in+Mice&volume=207&issue=1&spage=&epage=&date=2023&doi=10.1164%2Fajrccm-conference.2023.B31&pmid=&sid=OVID:embase

32.

TY - JOUR

DB - Embase

AN - 2026766936

ID - 38004108 [https://www.ncbi.nlm.nih.gov/pubmed/?term=38004108]

T1 - The Role of Nutrition in Neurological Disorders

A1 - Tsalamandris G.

A1 - Hadjivassiliou M.

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AO - Hadjivassiliou, Marios; ORCID: https://orcid.org/0000-0003-2542-8954

Y1 - 2023//

KW - abdominal pain

KW - acute ischemic stroke

KW - adipose tissue

KW - alcoholism

KW - Alzheimer disease

KW - antioxidant activity

KW - anxiety disorder

KW - ataxia

KW - autism

KW - bacterial infection

KW - behavior change

KW - body mass

KW - brain function

KW - brain region

KW - brain-gut axis

KW - cardiovascular disease

KW - cardiovascular system

KW - caregiver

KW - cell death

KW - central nervous system

KW - cerebellum vermis

KW - cerebrovascular accident

KW - chronic disease

KW - chronic kidney failure

KW - chronic pain

KW - chronic stress

KW - circadian rhythm

KW - clinical feature

KW - clinical practice

KW - Clostridium

KW - cognitive defect

KW - confusion

KW - constipation

KW - cranial nerve

KW - dementia

KW - depression

KW - dermatitis

KW - diabetes mellitus

KW - diarrhea

KW - diet supplementation

KW - \*diet therapy

KW - dietary intake

KW - disease association

KW - disease exacerbation

KW - dumping syndrome

KW - dysphagia

KW - editorial

KW - endocrine function

KW - energy expenditure

KW - enteric feeding

KW - Enterobacteriaceae

KW - enzyme activity

KW - Escherichia

KW - etiology

KW - eye disease

KW - family history

KW - fast food

KW - feeding difficulty

KW - food frequency questionnaire

KW - fruit consumption

KW - gastroesophageal reflux

KW - gastrointestinal disease

KW - Geriatric Nutritional Risk Index

KW - growth retardation

KW - hereditary motor sensory neuropathy

KW - high risk patient

KW - human

KW - hypoglycemia

KW - hypophysis

KW - hypothalamus

KW - immune system

KW - intermittent fasting

KW - intestine flora

KW - irritable colon

KW - ischemic stroke

KW - lipid fingerprinting

KW - lymphedema

KW - macronutrient

KW - malabsorption

KW - malnutrition

KW - mammillary body

KW - MDS-Unified Parkinson Disease Rating Scale

KW - meal

KW - mental disease

KW - mental performance

KW - multiple sclerosis

KW - neophobia

KW - nerve cell

KW - nervous system

KW - neuroimaging

KW - \*neurologic disease

KW - neuropathology

KW - neuropathy

KW - neuroprotection

KW - nuclear magnetic resonance imaging

KW - nutrient content

KW - nutrient intake

KW - \*nutrition

KW - nutritional deficiency

KW - nutritional disorder

KW - nutritional requirement

KW - nutritional status

KW - nutritional support

KW - obesity

KW - oxidative stress

KW - Parkinson disease

KW - pathogenesis

KW - peripheral neuropathy

KW - physician

KW - polyneuropathy

KW - pontine tegmentum

KW - prevalence

KW - primary prevention

KW - processed food

KW - prognosis

KW - recurrent disease

KW - refractory epilepsy

KW - risk

KW - Salmonella

KW - seizure

KW - selenium intake

KW - sleep disorder

KW - spastic paraplegia

KW - standardization

KW - stomatitis

KW - symptom

KW - systematic review (topic)

KW - taste disorder

KW - thalamus nucleus

KW - thiamine deficiency

KW - treatment planning

KW - vegetable consumption

KW - vitamin B deficiency

KW - Wernicke encephalopathy

KW - zinc blood level

KW - zinc deficiency

KW - adenosine A1 receptor/ec [Endogenous Compound]

KW - adipocytokine

KW - antibiotic agent

KW - brain receptor/ec [Endogenous Compound]

KW - carbohydrate

KW - glucose transporter 1/ec [Endogenous Compound]

KW - glutamate receptor/ec [Endogenous Compound]

KW - leptin

KW - levodopa

KW - magnesium

KW - multivitamin

KW - nicotinamide riboside

KW - nutraceutical

KW - omega 3 fatty acid

KW - phycocyanin

KW - prebiotic agent

KW - pyridoxine

KW - resistin

KW - riboflavin

KW - selenium

KW - selenoprotein

KW - serum albumin

KW - thiamine

KW - ubidecarenone

KW - zinc

KW - continuous glucose monitoring system

JF - Nutrients

JA - Nutrients

LA - English

VL - 15

IS - 22

SP - 4713

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2072-6643 (electronic)

SN - 2072-6643

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UR - http://www.mdpi.com/journal/nutrients/

DO - https://dx.doi.org/10.3390/nu15224713

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026766936

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3390%2fnu15224713Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tsalamandris&issn=2072-6643&title=Nutrients&atitle=The+Role+of+Nutrition+in+Neurological+Disorders&volume=15&issue=22&spage=4713&epage=&date=2023&doi=10.3390%2Fnu15224713&pmid=38004108&sid=OVID:embase

33.

TY - JOUR

DB - Embase

AN - 2026768337

T1 - Current Uses and Future Perspectives of Genomic Technologies in Clinical Microbiology

A1 - Bianconi I.

A1 - Aschbacher R.

A1 - Pagani E.

AO - Pagani, Elisabetta; ORCID: https://orcid.org/0000-0002-4008-6756

Y1 - 2023//

N2 - Recent advancements in sequencing technology and data analytics have led to a transformative era in pathogen detection and typing. These developments not only expedite the process, but also render it more cost-effective. Genomic analyses of infectious diseases are swiftly becoming the standard for pathogen analysis and control. Additionally, national surveillance systems can derive substantial benefits from genomic data, as they offer profound insights into pathogen epidemiology and the emergence of antimicrobial-resistant strains. Antimicrobial resistance (AMR) is a pressing global public health issue. While clinical laboratories have traditionally relied on culture-based antimicrobial susceptibility testing, the integration of genomic data into AMR analysis holds immense promise. Genomic-based AMR data can furnish swift, consistent, and highly accurate predictions of resistance phenotypes for specific strains or populations, all while contributing invaluable insights for surveillance. Moreover, genome sequencing assumes a pivotal role in the investigation of hospital outbreaks. It aids in the identification of infection sources, unveils genetic connections among isolates, and informs strategies for infection control. The One Health initiative, with its focus on the intricate interconnectedness of humans, animals, and the environment, seeks to develop comprehensive approaches for disease surveillance, control, and prevention. When integrated with epidemiological data from surveillance systems, genomic data can forecast the expansion of bacterial populations and species transmissions. Consequently, this provides profound insights into the evolution and genetic relationships of AMR in pathogens, hosts, and the environment.Copyright © 2023 by the authors.

KW - antibiotic resistance

KW - antimicrobial activity

KW - bacterial genome

KW - bacterial load

KW - bacterium identification

KW - Bacteroidetes

KW - bioinformatics

KW - blood glucose monitoring

KW - bronchoalveolar lavage fluid

KW - degenerative disease

KW - depression

KW - disease surveillance

KW - disk diffusion

KW - Enterococcus faecalis

KW - Escherichia coli

KW - feces microflora

KW - functional magnetic resonance imaging

KW - Fusobacterium nucleatum

KW - gene amplification

KW - \*gene drive technology

KW - genetic variability

KW - genome analysis

KW - genotyping

KW - Haemophilus influenzae

KW - health care personnel

KW - high throughput sequencing

KW - human

KW - infection control

KW - intensive care unit

KW - \*intestine flora

KW - mastitis

KW - \*metagenomics

KW - microbial community

KW - microbial diversity

KW - microbial identification

KW - \*microbiology

KW - minimum inhibitory concentration

KW - molecular epidemiology

KW - \*molecular phylogeny

KW - Neisseria gonorrhoeae

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - phenotype

KW - phylogenetic tree

KW - prevalence

KW - proteomics

KW - public health

KW - pyrosequencing

KW - quality control

KW - review

KW - \*sequence analysis

KW - Streptococcus gallolyticus

KW - transcriptomics

KW - whole genome sequencing

KW - antibiotic agent

KW - carbapenem

KW - carbapenemase

KW - cefepime

KW - hemagglutinin

KW - influenza vaccine

KW - meropenem

KW - piperacillin plus tazobactam

KW - posaconazole

KW - quinolone derivative

KW - RNA 16S

KW - \*virulence factor

JF - Antibiotics

JA - Antibiotics

LA - English

VL - 12

IS - 11

SP - 1580

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2079-6382 (electronic)

SN - 2079-6382

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UR - http://www.mdpi.com/journal/antibiotics

DO - https://dx.doi.org/10.3390/antibiotics12111580

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026768337

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3390%2fantibiotics12111580Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bianconi&issn=2079-6382&title=Antibiotics&atitle=Current+Uses+and+Future+Perspectives+of+Genomic+Technologies+in+Clinical+Microbiology&volume=12&issue=11&spage=1580&epage=&date=2023&doi=10.3390%2Fantibiotics12111580&pmid=&sid=OVID:embase

34.

TY - JOUR

DB - Embase

AN - 2026712528

T1 - Enteroendocrine cell regulation of the gut-brain axis

A1 - Barton J.R.

A1 - Londregan A.K.

A1 - Alexander T.D.

A1 - Entezari A.A.

A1 - Covarrubias M.

A1 - Waldman S.A.

Y1 - 2023//

N2 - Enteroendocrine cells (EECs) are an essential interface between the gut and brain that communicate signals about nutrients, pain, and even information from our microbiome. EECs are hormone-producing cells expressed throughout the gastrointestinal epithelium and have been leveraged by pharmaceuticals like semaglutide (Ozempic, Wegovy), terzepatide (Mounjaro), and retatrutide (Phase 2) for diabetes and weight control, and linaclotide (Linzess) to treat irritable bowel syndrome (IBS) and visceral pain. This review focuses on role of intestinal EECs to communicate signals from the gut lumen to the brain. Canonically, EECs communicate information about the intestinal environment through a variety of hormones, dividing EECs into separate classes based on the hormone each cell type secretes. Recent studies have revealed more diverse hormone profiles and communication modalities for EECs including direct synaptic communication with peripheral neurons. EECs known as neuropod cells rapidly relay signals from gut to brain via a direct communication with vagal and primary sensory neurons. Further, this review discusses the complex information processing machinery within EECs, including receptors that transduce intraluminal signals and the ion channel complement that govern initiation and propagation of these signals. Deeper understanding of EEC physiology is necessary to safely treat devastating and pervasive conditions like irritable bowel syndrome and obesity.Copyright © 2023 Barton, Londregan, Alexander, Entezari, Covarrubias and Waldman.

KW - abdominal pain/dt [Drug Therapy]

KW - anxiety

KW - autoimmune polyendocrinopathy candidiasis ectodermal dystrophy

KW - blood brain barrier

KW - \*brain-gut axis

KW - colorectal cancer/dt [Drug Therapy]

KW - constipation

KW - diabetes mellitus

KW - diarrhea

KW - distress syndrome

KW - dysbiosis

KW - dyspepsia

KW - endometriosis

KW - \*enteroendocrine cell

KW - environment

KW - epigastric burning

KW - epigastric pain

KW - epigastric pain syndrome

KW - gastrectomy

KW - glucose homeostasis

KW - human

KW - hypoparathyroidism

KW - irritable colon

KW - obesity

KW - opossum

KW - parenteral nutrition

KW - polyendocrinopathy

KW - review

KW - sensory nerve cell

KW - signal transduction

KW - sleeve gastrectomy

KW - synaptic transmission

KW - ulcerative colitis

KW - umami

KW - vagus nerve

KW - visceral pain

KW - wound healing

KW - calcium

KW - cholecystokinin/ec [Endogenous Compound]

KW - gastric inhibitory polypeptide/ec [Endogenous Compound]

KW - ghrelin/ec [Endogenous Compound]

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - guanylin/dt [Drug Therapy]

KW - heat stable enterotoxin receptor agonist

KW - hemoglobin A1c/ec [Endogenous Compound]

KW - ion channel/ec [Endogenous Compound]

KW - linaclotide/dt [Drug Therapy]

KW - liraglutide/ec [Endogenous Compound]

KW - motilin/ec [Endogenous Compound]

KW - neurogenin 3/ec [Endogenous Compound]

KW - neurotensin/ec [Endogenous Compound]

KW - peptide YY/ec [Endogenous Compound]

KW - plecanatide/dt [Drug Therapy]

KW - potassium

KW - potassium channel

KW - retatrutide/ec [Endogenous Compound]

KW - secretin/ec [Endogenous Compound]

KW - semaglutide/ec [Endogenous Compound]

KW - sodium

KW - sodium channel Nav1.7

KW - sodium channel Nav1.8

KW - sodium glucose cotransporter 1/ec [Endogenous Compound]

KW - tamoxifen/ec [Endogenous Compound]

KW - tirzepatide/ec [Endogenous Compound]

KW - toll like receptor/ec [Endogenous Compound]

KW - villin/ec [Endogenous Compound]

KW - vurolenatide/ec [Endogenous Compound]

XT - abdominal pain / drug therapy / linaclotide

XT - abdominal pain / drug therapy / plecanatide

XT - colorectal cancer / drug therapy / guanylin

XT - guanylin / drug therapy / colorectal cancer

XT - linaclotide / drug therapy / abdominal pain

XT - plecanatide / drug therapy / abdominal pain

JF - Frontiers in Neuroscience

JA - Front. Neurosci.

LA - English

VL - 17

SP - 1272955

CY - Switzerland

PB - Frontiers Media SA

SN - 1662-4548

SN - 1662-453X

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C3 - ozempic

UR - https://www.frontiersin.org/journals/neuroscience#

DO - https://dx.doi.org/10.3389/fnins.2023.1272955

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026712528

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3389%2ffnins.2023.1272955Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Barton&issn=1662-4548&title=Frontiers+in+Neuroscience&atitle=Enteroendocrine+cell+regulation+of+the+gut-brain+axis&volume=17&issue=&spage=1272955&epage=&date=2023&doi=10.3389%2Ffnins.2023.1272955&pmid=&sid=OVID:embase

35.

TY - JOUR

DB - Embase

AN - 2026649268

T1 - Emerging trends and focus of research on the relationship between traumatic brain injury and gut microbiota: a visualized study

A1 - Du Q.

A1 - Li Q.

A1 - Liao G.

A1 - Li J.

A1 - Ye P.

A1 - Zhang Q.

A1 - Gong X.

A1 - Yang J.

A1 - Li K.

Y1 - 2023//

N2 - Background: Traumatic brain injury (TBI) is one of the most serious types of trauma and imposes a heavy social and economic burden on healthcare systems worldwide. The development of emerging biotechnologies is uncovering the relationship between TBI and gut flora, and gut flora as a potential intervention target is of increasing interest to researchers. Nevertheless, there is a paucity of research employing bibliometric methodologies to scrutinize the interrelation between these two. Therefore, this study visualized the relationship between TBI and gut flora based on bibliometric methods to reveal research trends and hotspots in the field. The ultimate objective is to catalyze progress in the preclinical and clinical evolution of strategies for treating and managing TBI. Method(s): Terms related to TBI and gut microbiota were combined to search the Scopus database for relevant documents from inception to February 2023. Visual analysis was performed using CiteSpace and VOSviewer. Result(s): From September 1972 to February 2023, 2,957 documents published from 98 countries or regions were analyzed. The number of published studies on the relationship between TBI and gut flora has risen exponentially, with the United States, China, and the United Kingdom being representative of countries publishing in related fields. Research has formed strong collaborations around highly productive authors, but there is a relative lack of international cooperation. Research in this area is mainly published in high-impact journals in the field of neurology. The "intestinal microbiota and its metabolites," "interventions," "mechanism of action" and "other diseases associated with traumatic brain injury" are the most promising and valuable research sites. Targeting the gut flora to elucidate the mechanisms for the development of the course of TBI and to develop precisely targeted interventions and clinical management of TBI comorbidities are of great significant research direction and of interest to researchers. Conclusion(s): The findings suggest that close attention should be paid to the relationship between gut microbiota and TBI, especially the interaction, potential mechanisms, development of emerging interventions, and treatment of TBI comorbidities. Further investigation is needed to understand the causal relationship between gut flora and TBI and its specific mechanisms, especially the "brain-gut microbial axis."Copyright © 2023 Du, Li, Liao, Li, Ye, Zhang, Gong, Yang and Li.

KW - anxiety

KW - blood brain barrier

KW - brain injury

KW - catalysis

KW - encephalitis

KW - feces microflora

KW - female

KW - functional connectivity

KW - health care system

KW - human

KW - inflammation

KW - innate immunity

KW - \*intestine flora

KW - male

KW - microbial diversity

KW - nerve degeneration

KW - network analysis

KW - oxidative stress

KW - parenteral nutrition

KW - Parkinson disease

KW - review

KW - sepsis

KW - \*traumatic brain injury

KW - G protein coupled receptor/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - omega 3 fatty acid/ec [Endogenous Compound]

KW - ornithine/ec [Endogenous Compound]

KW - probiotic agent

KW - serotonin/ec [Endogenous Compound]

KW - tryptophan/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Frontiers in Microbiology

JA - Front. Microbiol.

LA - English

VL - 14

SP - 1278438

CY - Switzerland

PB - Frontiers Media SA

SN - 1664-302X (electronic)

SN - 1664-302X

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UR - https://www.frontiersin.org/journals/microbiology#

DO - https://dx.doi.org/10.3389/fmicb.2023.1278438

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026649268

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3389%2ffmicb.2023.1278438Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Du&issn=1664-302X&title=Frontiers+in+Microbiology&atitle=Emerging+trends+and+focus+of+research+on+the+relationship+between+traumatic+brain+injury+and+gut+microbiota%3A+a+visualized+study&volume=14&issue=&spage=1278438&epage=&date=2023&doi=10.3389%2Ffmicb.2023.1278438&pmid=&sid=OVID:embase

36.

TY - JOUR

DB - Embase

AN - 642445282

ID - 37805868 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37805868]

T1 - THE GUT-BRAIN AXIS: IMPLICATIONS FOR NEUROLOGICAL DISORDERS, MENTAL HEALTH, AND IMMUNE FUNCTION

A1 - Sahu S.

A1 - Shah S.

A1 - Supriti

A1 - Joshi A.

A1 - Patel J D.

A1 - Yadav A.

Y1 - 2023//

N2 - A gut-brain axis (GBA) has a long history of conceptual development. Intestinal dysbiosis has now been recognized as a key player in the development of adult neurodevelopmental disorders, obesity, and inflammatory bowel disease. Recent developments in metagenomics suggest those nutrition and gut microbiotas (GM) are important regulators of the gut-brain communication pathways that cause neurodevelopmental and psychiatric problems in adulthood. Intestinal dysbiosis and neurodevelopmental disease outcomes in preterm newborns are being linked by recent research. Recent clinical investigations demonstrate that in critical care units, intestinal dysbiosis occurs before late-onset newborn sepsis and necrotizing enterocolitis. Strong epidemiologic data also shows a connection between necrotizing enterocolitis and extremely low birth weight babies' long-term psychomotor impairments and late-onset neonatal sepsis. The GBA theory suggests that intestinal bacteria may indirectly affect preterm newborns' developing brains. In this review, we emphasize the structure and function of the GBA and discuss how immune-microbial dysfunction in the gut affects the transmission of stress signals to the brain. Preterm babies who are exposed to these signals develop neurologic disorders. Understanding neuronal and humoral communication through the GBA may provide insight into therapeutic and nutritional strategies that may enhance the results of very low-birth-weight babies.

KW - adult

KW - brain-gut axis

KW - dysbiosis

KW - human

KW - immunity

KW - infant

KW - mental health

KW - microbiology

KW - \*necrotizing enterocolitis

KW - \*neurologic disease

KW - newborn

KW - \*newborn disease

KW - \*newborn sepsis

JF - Georgian medical news

JA - Georgian Med News

LA - English

IS - 340-341

SP - 17

EP - 24

CY - United States

SN - 1512-0112

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PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=642445282

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&AN=642445282Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sahu&issn=1512-0112&title=Georgian+medical+news&atitle=THE+GUT-BRAIN+AXIS%3A+IMPLICATIONS+FOR+NEUROLOGICAL+DISORDERS%2C+MENTAL+HEALTH%2C+AND+IMMUNE+FUNCTION&volume=&issue=340-341&spage=17&epage=24&date=2023&doi=&pmid=37805868&sid=OVID:embase

37.

TY - JOUR

DB - Embase

AN - 2020136989

ID - 36384390 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36384390]

T1 - Effects of different dietary interventions in multiple sclerosis: a systematic review of evidence from 2018 to 2022

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Y1 - 2023//

N2 - Background: Nutrition is an important risk factor for both Multiple sclerosis (MS) development and post-diagnosis disease prognosis. However, it is important to evaluate the diet as a whole instead of considering the effects of nutrients individually. Aim(s): In this systematic review, it was aimed to evaluate the effect of different dietary interventions in MS patients and to determine the most appropriate dietary model for this group. Method(s): The search was carried out between February 2022 and March 2022 in three different databases, 'PubMed', 'Web of Science' and 'The Cochrane Library' over the university access network. After the search for the determined keywords, a total of 269 studies conducted between 2018 and 2022 were identified, but only 17 of them were found to be suitable for inclusion criteria. Result(s) and Conclusion(s): Although there are studies reporting positive health outcomes for energy-restricted/intermittent fasting diets, ketogenic diet, and modified paleolithic diet, these diets may not be applicable diets in the long-term as they may cause deficiencies of various nutrients. No current study was found for low-fat diets, gluten-free diet and Mediterranean-DASH Intervention for Neurodegenerative Delay (MIND) diet applied to individuals with MS. The Mediterranean diet, on the other hand, is more recommendable than other diet models due to the positive health results reported in long-term studies and the absence of any side effects. However, more studies are needed to reach a definite conclusion.Copyright © 2022 Informa UK Limited, trading as Taylor & Francis Group.

KW - antibody response

KW - bloating

KW - bone density

KW - caloric intake

KW - caloric restriction

KW - carbohydrate intake

KW - cardiovascular disease

KW - celiac disease

KW - cognition

KW - degenerative disease

KW - demyelination

KW - depression

KW - diet supplementation

KW - diet therapy

KW - dietary compliance

KW - dietary fiber

KW - exercise

KW - Expanded Disability Status Scale

KW - Faecalibacterium

KW - fatigue

KW - follow up

KW - food intake

KW - gene expression

KW - \*gluten free diet

KW - glycemic index

KW - headache

KW - human

KW - hyperlipidemia

KW - hypertension

KW - intermittent fasting

KW - intervention study

KW - intestine flora

KW - \*ketogenic diet

KW - lipid diet

KW - \*low fat diet

KW - \*Mediterranean diet

KW - \*MIND diet

KW - \*multiple sclerosis

KW - non insulin dependent diabetes mellitus

KW - nutrient

KW - obesity

KW - oxidative stress

KW - paleolithic diet

KW - parenteral nutrition

KW - physical activity

KW - protein intake

KW - randomized controlled trial (topic)

KW - reproductive health

KW - review

KW - risk factor

KW - schizophrenia

KW - seaweed

KW - systematic review

KW - thrombocyte aggregation

KW - alpha tocopherol

KW - aryldialkylphosphatase

KW - aryldialkylphosphatase 1

KW - coconut oil

KW - cod liver oil

KW - epigallocatechin gallate

KW - gallic acid

KW - ketone body

KW - leptin

KW - polyunsaturated fatty acid

KW - prebiotic agent

KW - reactive oxygen metabolite

KW - vitamin D

JF - Nutritional Neuroscience

JA - Nutr. Neurosci.

LA - English

VL - 26

IS - 12

SP - 1279

EP - 1291

CY - United Kingdom

PB - Taylor and Francis Ltd.

SN - 1028-415X

SN - 1476-8305

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UR - http://www.tandfonline.com/loi/ynns20#.VvukQLdf1Hh

DO - https://dx.doi.org/10.1080/1028415X.2022.2146843

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2020136989

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1080%2f1028415X.2022.2146843Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Atabilen&issn=1028-415X&title=Nutritional+Neuroscience&atitle=Effects+of+different+dietary+interventions+in+multiple+sclerosis%3A+a+systematic+review+of+evidence+from+2018+to+2022&volume=26&issue=12&spage=1279&epage=1291&date=2023&doi=10.1080%2F1028415X.2022.2146843&pmid=36384390&sid=OVID:embase

38.

TY - JOUR

DB - Embase

AN - 642461164

ID - 37813622 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37813622]

T1 - Cohort Profile: Guangzhou Nutrition and Health Study (GNHS): A Population-Based Multi-Omics Study

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A1 - Zhong H.

A1 - Zeng F.-F.

A1 - Chen G.

A1 - Fu Y.

A1 - Wang C.

A1 - Zhang Z.-Q.

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A1 - Sun T.-Y.

A1 - Ding D.

A1 - Liu Y.-H.

A1 - Dong H.-L.

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A1 - Ling W.

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Y1 - 2023//

N2 - BACKGROUND: The Guangzhou Nutrition and Health Study (GNHS) aims to assess the determinants of metabolic disease in nutritional aspects, as well as other environmental and genetic factors, and explore possible biomarkers and mechanisms with multi-omics integration. METHOD(S): The population-based sample of adults in Guangzhou, China (baseline: 40-83 years old; n = 5118) was followed up about every 3 years. All will be tracked via on-site follow-up and health information systems. We assessed detailed information on lifestyle factors, physical activities, dietary assessments, psychological health, cognitive function, body measurements, and muscle function. Instrument tests included dual-energy X-ray absorptiometry scanning, carotid artery and liver ultrasonography evaluations, vascular endothelial function evaluation, upper-abdomen and brain magnetic resonance imaging, and 14-d real-time continuous glucose monitoring tests. We also measured multi-omics, including host genome-wide genotyping, serum metabolome and proteome, gut microbiome (16S rRNA sequencing, metagenome, and internal transcribed spacer 2 sequencing), and fecal metabolome and proteome. RESULT(S): The baseline surveys were conducted from 2008 to 2015. Now, we have completed 3 waves. The 3rd and 4th follow-ups have started but have yet to end. A total of 5118 participants aged 40-83 took part in the study. The median age at baseline was approximately 59.0 years and the proportion of female participants was about 69.4%. Among all the participants, 3628 (71%) completed at least one on-site follow-up with a median duration of 9.48 years. CONCLUSION(S): The cohort will provide data that have been influential in establishing the role of nutrition in metabolic diseases with multi-omics.

KW - abdomen

KW - adult

KW - aged

KW - anthropometry

KW - article

KW - blood glucose monitoring

KW - brain

KW - carotid artery

KW - cognition

KW - \*cohort analysis

KW - controlled study

KW - dual energy X ray absorptiometry

KW - echography

KW - endothelium

KW - feces

KW - female

KW - follow up

KW - gastrointestinal tract

KW - genotyping

KW - human

KW - human tissue

KW - lifestyle

KW - liver

KW - major clinical study

KW - metabolic disorder

KW - metabolome

KW - metagenome

KW - microbiome

KW - middle aged

KW - \*multiomics

KW - muscle function

KW - neuroimaging

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - \*nutritional assessment

KW - physical activity

KW - psychological well-being

KW - endogenous compound

KW - internal transcribed spacer 2

KW - proteome

KW - RNA 16S

JF - Journal of epidemiology

JA - J Epidemiol

LA - English

SP -

CY - Japan

SN - 1349-9092 (electronic)

SN - 1349-9092

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DO - https://dx.doi.org/10.2188/jea.JE20230108

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=642461164

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.2188%2fjea.JE20230108Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ling&issn=1349-9092&title=Journal+of+epidemiology&atitle=Cohort+Profile%3A+Guangzhou+Nutrition+and+Health+Study+%28GNHS%29%3A+A+Population-Based+Multi-Omics+Study&volume=&issue=&spage=&epage=&date=2023&doi=10.2188%2Fjea.JE20230108&pmid=37813622&sid=OVID:embase

39.

TY - JOUR

DB - Embase

AN - 2027275322

T1 - The gut microbiome in children with mood, anxiety, and neurodevelopmental disorders: An umbrella review

A1 - Romano K.

A1 - Shah A.N.

A1 - Schumacher A.

A1 - Zasowski C.

A1 - Zhang T.

A1 - Bradley-Ridout G.

A1 - Merriman K.

A1 - Parkinson J.

A1 - Szatmari P.

A1 - Campisi S.C.

A1 - Korczak D.J.

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AO - Korczak, Daphne J.; ORCID: https://orcid.org/0000-0002-0061-7495

Y1 - 2023//

N2 - Research on the gut microbiome and mental health among children and adolescents is growing. This umbrella review provides a high-level overview of current evidence syntheses to amalgamate current research and inform future directions. Searches were conducted across seven databases for peer-reviewed pediatric (<18 years) review literature. Studies reporting gut microbiome composition and/or biotic supplementation on depression, bipolar disorder, anxiety, attention deficit hyperactivity disorder, autism spectrum disorder (ASD), or obsessive-compulsive disorder (OCD) were included. Deduplication and screening took place in Covidence. A sensitivity analysis was conducted to assess the degree of primary study overlap. Among the 39 included review studies, 23 (59%) were observational and 16 (41%) were interventional. Most reviews (92%) focused on ASD. Over half (56%) of the observational and interventional reviews scored low or critically low for methodological quality. A higher abundance of Clostridium clusters and a lower abundance of Bifidobacterium were consistently observed in ASD studies. Biotic supplementation was associated with ASD symptom improvement. Gut microbiome-mental health evidence syntheses in child and youth depression, anxiety, bipolar disorder, and OCD are lacking. Preliminary evidence suggests an association between specific microbiota and ASD symptoms, with some evidence supporting a role for probiotic supplementation ASD therapy.Copyright © The Author(s), 2023. Published by Cambridge University Press in association with The Nutrition Society.

KW - Acidaminococcus

KW - \*anxiety

KW - anxiety disorder

KW - attention deficit hyperactivity disorder

KW - autism

KW - Bacillales

KW - bacterial flora

KW - Bacteroides

KW - Bacteroidetes

KW - Bifidobacterium

KW - Bifidobacterium bifidum

KW - Bifidobacterium lactis

KW - Bifidobacterium longum

KW - bipolar disorder

KW - Blautia

KW - Candida

KW - child

KW - Clostridia

KW - Clostridium

KW - Collinsella

KW - depression

KW - Desulfovibrio

KW - enterococcal bacteremia

KW - Enterococcus

KW - Enterococcus faecalis

KW - Eubacterium

KW - Faecalibacterium

KW - Firmicutes

KW - human

KW - intestine flora

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus brevis

KW - Lactobacillus casei

KW - Lactobacillus delbrueckii

KW - Lactobacillus paracasei

KW - Lactobacillus plantarum

KW - Lactobacillus rhamnosus

KW - Megasphaera

KW - \*mental disease

KW - mental health

KW - meta analysis

KW - metagenomics

KW - \*microbiome

KW - \*mood

KW - obsessive compulsive disorder

KW - Prevotella

KW - Proteobacteria

KW - review

KW - Ruminococcus

KW - Salmonella enterica serovar Infantis

KW - sensitivity analysis

KW - Streptococcus

KW - Streptococcus thermophilus

KW - systematic review

KW - Veillonellaceae

KW - fructose oligosaccharide

KW - galactose oligosaccharide

KW - prebiotic agent

KW - synbiotic agent

JF - Gut Microbiome

JA - Gut. Microbiome.

LA - English

VL - 4

SP - e18

CY - United Kingdom

PB - Cambridge University Press

SN - 2632-2897 (electronic)

SN - 2632-2897

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UR - https://www.cambridge.org/core/journals/gut-microbiome/information/about-this-journal

DO - https://dx.doi.org/10.1017/gmb.2023.16

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2027275322

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1017%2fgmb.2023.16Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Romano&issn=2632-2897&title=Gut+Microbiome&atitle=The+gut+microbiome+in+children+with+mood%2C+anxiety%2C+and+neurodevelopmental+disorders%3A+An+umbrella+review&volume=4&issue=&spage=e18&epage=&date=2023&doi=10.1017%2Fgmb.2023.16&pmid=&sid=OVID:embase

40.

TY - JOUR

DB - Embase

AN - 642509446

T1 - PROBIOTIC LIMOSILACTOBACILLUS REUTERI DSM 17938 AMELIORATES MATERNAL SEPARATION STRESS IN NEWBORN MICE AND ALTERS BEHAVIOR

T3 - North American Society for Pediatric Gastroenterology, Hepatology and Nutrition Annual Meeting, NASPGHAN 2023. San Diego, CA United States.

A1 - Saleh Z.

A1 - Okeugo B.

A1 - Venna V.

A1 - Blixt F.

A1 - Quaicoe V.

A1 - Park E.

A1 - Rhoads J.M.

A1 - Liu Y.

Y1 - 2023//

N2 - Background: Gut microbial dysbiosis plays a key role in early life stress and stress-related adult neuropsychiatric disorders. Resetting gut microbiota by microbial manipulation may have therapeutic effects. Limosilactobacillus reuteri DSM 17938 (LR 17938) has beneficial effects in infant colic and neonatal necrotizing enterocolitis by modulating gut microbiota, altering systemic metabolites, and facilitating immune regulation. In mice, maternal separation (MS) results in disorganized maternal care, behavioral deficits, and dysbiosis that persist into adulthood. Mice produce ultrasonic vocalizations (USVs), or whistle-like calls at 30-90kHz, in a variety of social contexts throughout development. USVs have been used for evaluating mother-pup and juvenile interactions. We measured serum cholecystokinin (CCK), a peptide connecting gut and brain functions involved in the neurobiology of anxiety, depression, psychosis, nociception, and feeding behavior and we quantified corticosterone, a primary stress hormone, in mice with and without MS stress. Objective(s): To determine whether DSM 17938 can affect USVs and behavior as well as reduce stress-associated changes in newborn mice by modulating gut microbiota Methods: We subjected mouse pups to daily unpredictable MS (MSU) during the first three postnatal weeks for 3 hours/day. Newborn pups with MSU were gavage fed daily with phosphate buffered saline (PBS) or DSM 17938 (10 7 CFU/mouse/day) from day of life 7 (d7) to d20. Mouse weight was measured, and USVs were recorded weekly. Brain tissue was collected and processed to measure protein levels of CCK and corticosterone by ELISA on d21. Behavioral tests including tail suspension test (TST) and y-maze test (YMT) were performed on the adult offspring at 6-8 weeks of age to determine the effect DSM 17938 and MSU on cognitive function and depression-like behavior. Result(s): MSU resulted in a significant decrease in growth at d14 and d21 of life (p= 0.035 and <0.0001). Orally feeding DSM 17938 to mice with MSU significantly improved weight gain on d14 compared to MSU mice fed with PBS. No significant changes were noted in USVs between groups. Protein levels of CCK in brain tissue were significantly decreased following MSU, while DSM 17938 significantly increased CCK levels in those subjected to MSU (p=0.04). Brain corticosterone levels in the brain tissue of mice subjected to MSU were not changed compared to those who stayed with their dam, but gavage feeding of PBS daily to these MSU newborn mice significantly increased the levels of brain corticosterone. Feeding DSM 17938 ameliorated the stimulation of brain corticosterone levels. No significant changes were seen in the behavior of mice subjected to MSU and mice without MSU on TST and YMT. However, DSM 17938 treated offspring demonstrated antidepressant-like behavior (TST p=0.0017) and better cognitive function (YMT p=0.0071). Conclusion(s): DSM 17938 beneficially affects stress-related changes caused by MS in neonates. Additionally, it enhances cognitive function and antidepressant-like behavior in mice. Further research on gut microbiota and their metabolites will provide insights into the mechanism of action of probiotics in stress-associated brain-gut disorders and behavior.

KW - adult

KW - adulthood

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - bacterial growth

KW - body weight gain

KW - brain function

KW - brain tissue

KW - cholecystokinin blood level

KW - cognition

KW - conference abstract

KW - controlled study

KW - \*depression

KW - dysbiosis

KW - enteric feeding

KW - enteropathy

KW - enzyme linked immunosorbent assay

KW - feeding behavior

KW - female

KW - gene expression

KW - intestine flora

KW - intestine function

KW - juvenile

KW - \*Lactobacillus reuteri

KW - maternal care

KW - \*maternal deprivation

KW - mouse

KW - neurobiology

KW - newborn

KW - nociception

KW - nonhuman

KW - \*physiological stress

KW - progeny

KW - protein expression

KW - psychosis

KW - quantitative analysis

KW - social environment

KW - tail suspension test

KW - ultrasound

KW - vocalization

KW - Y-maze test

KW - antidepressant agent

KW - cholecystokinin

KW - corticosterone

KW - endogenous compound

KW - phosphate buffered saline

KW - \*probiotic agent

KW - stress hormone

JF - Journal of Pediatric Gastroenterology and Nutrition

JA - J. Pediatr. Gastroenterol. Nutr.

LA - English

VL - 77

IS - 1 Supplement 1

SP - S495

EP - S496

CY - Netherlands

PB - Lippincott Williams and Wilkins

SN - 1536-4801

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PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=642509446

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&AN=642509446Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Saleh&issn=1536-4801&title=Journal+of+Pediatric+Gastroenterology+and+Nutrition&atitle=PROBIOTIC+LIMOSILACTOBACILLUS+REUTERI+DSM+17938+AMELIORATES+MATERNAL+SEPARATION+STRESS+IN+NEWBORN+MICE+AND+ALTERS+BEHAVIOR&volume=77&issue=1+Supplement+1&spage=S495&epage=S496&date=2023&doi=&pmid=&sid=OVID:embase

41.

TY - JOUR

DB - Embase

AN - 2022991653

ID - 36788671 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36788671]

T1 - Microbiota signatures and mucosal healing in the use of enteral nutrition therapy v. corticosteroids for the treatment of children with Crohn's disease: a systematic review and meta-analysis

A1 - Ding Z.

A1 - Ninan K.

A1 - Johnston B.C.

A1 - Moayyedi P.

A1 - Sherlock M.

A1 - Zachos M.

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Y1 - 2023//

N2 - Corticosteroids (CS) and exclusive and partial enteral nutrition (EEN and PEN) are effective therapies in paediatric Crohn's disease (CD). This systematic review of randomised controlled trials (RCT) and cohort studies analyses the impact of EEN/PEN v. CS on intestinal microbiota, mucosal healing as well as other clinically important outcomes, including clinical remission, relapse, adherence, adverse events and health-related quality of life (HRQL) in paediatric CD. Three RCT (n 76) and sixteen cohort studies (n 1104) compared EEN v. CS. With limited available data (one RCT), the effect on intestinal microbiome indicated a trend towards EEN regarding Shannon diversity. Based on two RCT, EEN achieved higher mucosal healing than CS (risk ratio (RR) 2.36, 95 % CI (1.22, 4.57), low certainty). Compared with CS, patients on EEN were less likely to experience adverse events based on two RCT (RR 0.32, 95 % CI (0.13, 0.80), low certainty). For HRQL, there was a trend in favour of CS based on data from two published abstracts of cohort studies. Based on thirteen cohort studies, EEN achieved higher clinical remission than CS (RR 1.18, 95 % CI (1.02, 1.38), very low certainty). Studies also reported no important differences in relapse and adherence. Compared with CS, EEN may improve mucosal healing with fewer adverse events based on RCT data. While limited data indicate the need for further trials, this is the first systematic review to comprehensively summarise the data on intestinal microbiome, mucosal healing and HRQOL when comparing enteral nutrition and CS in paediatric CD.Copyright © The Author(s), 2023. Published by Cambridge University Press on behalf of The Nutrition Society.

KW - abdominal pain/si [Side Effect]

KW - acne/si [Side Effect]

KW - Alistipes

KW - child

KW - \*Crohn disease/dt [Drug Therapy]

KW - \*Crohn disease/th [Therapy]

KW - depression/si [Side Effect]

KW - dietary compliance

KW - drug dose reduction

KW - drug withdrawal

KW - \*enteric feeding

KW - Escherichia

KW - flatulence/si [Side Effect]

KW - Fusobacterium

KW - headache/si [Side Effect]

KW - \*healing

KW - hirsutism/si [Side Effect]

KW - human

KW - hyperglycemia/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - \*intestine flora

KW - meta analysis

KW - microbial diversity

KW - moon face/si [Side Effect]

KW - muscle weakness/si [Side Effect]

KW - myopathy/si [Side Effect]

KW - nausea/si [Side Effect]

KW - osteoporosis/si [Side Effect]

KW - quality of life

KW - randomized controlled trial (topic)

KW - relapse

KW - remission

KW - review

KW - Shannon index

KW - Shigella

KW - stria/si [Side Effect]

KW - systematic review

KW - treatment withdrawal

KW - Veillonella

KW - vomiting/si [Side Effect]

KW - calgranulin/ec [Endogenous Compound]

KW - \*corticosteroid/ae [Adverse Drug Reaction]

KW - \*corticosteroid/dt [Drug Therapy]

KW - \*corticosteroid/po [Oral Drug Administration]

KW - \*corticosteroid/pv [Special Situation for Pharmacovigilance]

KW - \*corticosteroid/tm [Unexpected Outcome of Drug Treatment]

KW - hydrocortisone/dt [Drug Therapy]

KW - hydrocortisone/pv [Special Situation for Pharmacovigilance]

KW - methylprednisolone/dt [Drug Therapy]

KW - methylprednisolone/po [Oral Drug Administration]

KW - methylprednisolone/pv [Special Situation for Pharmacovigilance]

KW - prednisolone/dt [Drug Therapy]

KW - prednisolone/pv [Special Situation for Pharmacovigilance]

KW - prednisone/dt [Drug Therapy]

KW - prednisone/pv [Special Situation for Pharmacovigilance]

KW - \*mucosal healing

XT - abdominal pain / side effect / corticosteroid

XT - acne / side effect / corticosteroid

XT - Crohn disease / drug therapy / corticosteroid

XT - Crohn disease / drug therapy / hydrocortisone

XT - Crohn disease / drug therapy / methylprednisolone

XT - Crohn disease / drug therapy / prednisolone

XT - Crohn disease / drug therapy / prednisone

XT - depression / side effect / corticosteroid

XT - flatulence / side effect / corticosteroid

XT - headache / side effect / corticosteroid

XT - hirsutism / side effect / corticosteroid

XT - hyperglycemia / side effect / corticosteroid

XT - insomnia / side effect / corticosteroid

XT - moon face / side effect / corticosteroid

XT - muscle weakness / side effect / corticosteroid

XT - myopathy / side effect / corticosteroid

XT - nausea / side effect / corticosteroid

XT - osteoporosis / side effect / corticosteroid

XT - stria / side effect / corticosteroid

XT - vomiting / side effect / corticosteroid

XT - corticosteroid / adverse drug reaction / abdominal pain

XT - corticosteroid / adverse drug reaction / acne

XT - corticosteroid / adverse drug reaction / depression

XT - corticosteroid / adverse drug reaction / flatulence

XT - corticosteroid / adverse drug reaction / headache

XT - corticosteroid / adverse drug reaction / hirsutism

XT - corticosteroid / adverse drug reaction / hyperglycemia

XT - corticosteroid / adverse drug reaction / insomnia

XT - corticosteroid / adverse drug reaction / moon face

XT - corticosteroid / adverse drug reaction / muscle weakness

XT - corticosteroid / adverse drug reaction / myopathy

XT - corticosteroid / adverse drug reaction / nausea

XT - corticosteroid / adverse drug reaction / osteoporosis

XT - corticosteroid / adverse drug reaction / stria

XT - corticosteroid / adverse drug reaction / vomiting

XT - corticosteroid / drug therapy / Crohn disease

XT - corticosteroid / special situation for pharmacovigilance / pediatric patient

XT - corticosteroid / unexpected outcome of drug treatment / disease worsening with drug treatment

XT - hydrocortisone / drug therapy / Crohn disease

XT - hydrocortisone / special situation for pharmacovigilance / pediatric patient

XT - methylprednisolone / drug therapy / Crohn disease

XT - methylprednisolone / special situation for pharmacovigilance / pediatric patient

XT - prednisolone / drug therapy / Crohn disease

XT - prednisolone / special situation for pharmacovigilance / pediatric patient

XT - prednisone / drug therapy / Crohn disease

XT - prednisone / special situation for pharmacovigilance / pediatric patient

JF - British Journal of Nutrition

JA - Br. J. Nutr.

LA - English

VL - 130

IS - 8

SP - 1385

EP - 1402

CY - United Kingdom

PB - Cambridge University Press

SN - 0007-1145

SN - 1475-2662

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UR - http://journals.cambridge.org/BJN

DO - https://dx.doi.org/10.1017/S0007114523000405

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2022991653

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1017%2fS0007114523000405Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ding&issn=0007-1145&title=British+Journal+of+Nutrition&atitle=Microbiota+signatures+and+mucosal+healing+in+the+use+of+enteral+nutrition+therapy+v.+corticosteroids+for+the+treatment+of+children+with+Crohn%27s+disease%3A+a+systematic+review+and+meta-analysis&volume=130&issue=8&spage=1385&epage=1402&date=2023&doi=10.1017%2FS0007114523000405&pmid=36788671&sid=OVID:embase

42.

TY - JOUR

DB - Embase

AN - 2021629754

ID - 36788356 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36788356]

T1 - Growth and neuro-developmental outcomes of probiotic supplemented preterm infants-a systematic review and meta-analysis

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A1 - Athalye-Jape G.

A1 - Rao S.

A1 - Patole S.

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Y1 - 2023//

N2 - Gut dysbiosis is associated with sepsis and necrotizing enterocolitis in preterm infants, which can adversely affect long-term growth and neurodevelopment. We aimed to synthesise evidence for the effect of probiotic supplementation on growth and neurodevelopmental outcomes in preterm infants. MEDLINE, EMBASE, EMCARE, Cochrane CENTRAL, and grey literature were searched in February 2022. Only randomized controlled trials (RCTs) were included. Meta-analysis was performed using random effects model. Effect sizes were expressed as standardized mean difference (SMD), mean difference (MD) or risk ratio (RR) and their corresponding 95% confidence intervals (CI). Risk of Bias (ROB) was assessed using the ROB-2 tool. Certainty of Evidence (CoE) was summarized using GRADE guidelines. Thirty RCTs (n = 4817) were included. Meta-analysis showed that probiotic supplementation was associated with better short-term weight gain [SMD 0.24 (95%CI 0.04, 0.44); 22 RCTs (n = 3721); p = 0.02; I2 = 88%; CoE: low]. However, length [SMD 0.12 (95%CI -0.13, 0.36); 7 RCTs, (n = 899); p = 0.35; I2 = 69%; CoE: low] and head circumference [SMD 0.09 (95%CI -0.15, 0.34); 8 RCTs (n = 1132); p = 0.46; I2 = 76%; CoE: low] were similar between the probiotic and placebo groups. Probiotic supplementation had no effect on neurodevelopmental impairment [RR 0.91 (95%CI 0.76, 1.08); 5 RCTs (n = 1556); p = 0.27; I2 = 0%; CoE: low]. Probiotic supplementation was associated with better short-term weight gain, but did not affect length, head circumference, long-term growth, and neurodevelopmental outcomes of preterm infants. Adequately powered RCTs are needed in this area. Prospero Registration: CRD42020064992.Copyright © 2023, Crown.

KW - body height

KW - body weight gain

KW - \*child growth

KW - \*diet supplementation

KW - drug efficacy

KW - \*dysbiosis/co [Complication]

KW - \*dysbiosis/dt [Drug Therapy]

KW - effect size

KW - evidence based medicine

KW - head circumference

KW - human

KW - infant

KW - \*mental development

KW - mental disease

KW - meta analysis

KW - outcome assessment

KW - practice guideline

KW - \*prematurity

KW - randomized controlled trial (topic)

KW - review

KW - systematic review

KW - treatment response

KW - placebo

KW - \*probiotic agent/cm [Drug Comparison]

KW - \*probiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/pv [Special Situation for Pharmacovigilance]

XT - dysbiosis / drug therapy / probiotic agent

XT - probiotic agent / drug comparison / placebo

XT - probiotic agent / drug therapy / dysbiosis

XT - probiotic agent / special situation for pharmacovigilance / pediatric patient

JF - European Journal of Clinical Nutrition

JA - Eur. J. Clin. Nutr.

LA - English

VL - 77

IS - 9

SP - 855

EP - 871

CY - United Kingdom

PB - Springer Nature

SN - 0954-3007

SN - 1476-5640

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UR - https://www.nature.com/ejcn/

DO - https://dx.doi.org/10.1038/s41430-023-01270-2

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2021629754

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1038%2fs41430-023-01270-2Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Panchal&issn=0954-3007&title=European+Journal+of+Clinical+Nutrition&atitle=Growth+and+neuro-developmental+outcomes+of+probiotic+supplemented+preterm+infants-a+systematic+review+and+meta-analysis&volume=77&issue=9&spage=855&epage=871&date=2023&doi=10.1038%2Fs41430-023-01270-2&pmid=36788356&sid=OVID:embase

43.

TY - JOUR

DB - Embase

AN - 642440500

T1 - Bifidobacterium breve supplementation during infancy attenuates mobility in low-birthweight rats during adolescence

T3 - 22nd International Congress of Nutrition, IUNS. Tokyo Japan.

A1 - Tsuji M.

A1 - Itoh A.

A1 - Tanaka N.

A1 - Fukunaga S.

A1 - Nakano-Doi A.

A1 - Matsuyama T.

A1 - Nakagomi T.

Y1 - 2023//

N2 - Background and Objectives: Children with low birthweight (LBW) have a higher risk for developing attentiondeficit/ hyperactivity disorder (ADHD), for which no prophylactic measure exists. The gut microbiota in infants with LBW is different from that in infants with normal birthweight and is associated with ADHD. Oral supplementation with Bifidobacterium has several health benefits, such as suppressing inflammation and reducing infectious disease in newborns with LBW. We hypothesized that early oral administration of B. breve can attenuate altered behaviors observed later in life in individuals born with LBW. The aim of the present study was to investigate whether oral administration of B. breve M-16V in the neonatal and infantile periods has beneficial effects on behaviors during adolescence in rats born with LBW. Method(s): We examined the effect of gavage supplementation with Bifidobacterium breve M-16V in a rat model of intrauterine hypoperfusion. Pups born with LBW were supplemented with either B. breve or vehicle from postnatal days 1 to 21. Result(s): The open-field test at 5 weeks of age (equivalent to human pubertal age) showed that rats in the LBW-vehicle group were marginally hyperactive compared with rats in the sham group, while rats in the LBW-B.breve group were significantly hypoactive compared with rats in the LBW-vehicle group. The gut microbiota in the LBW-vehicle group wasdifferent from that in the sham group, while that in the LBW-B.breve group was not. Anatomical/histological evaluation at 6 weeks of age demonstrated that the brain weight and the cerebral areas on coronal sections were reduced in the LBW groups compared with the sham group. Probiotic supplementation did not ameliorate these morphological brain anomalies in LBW animals. The percentage of Iba-1+ cells in the brain was not different among the LBW-B.breve, LBW-vehicle, and sham groups. Conclusion(s): B. breve supplementation during early life is suggested to have the potential to help children with LBW attenuate hypermobility in adolescence, although caution is warranted when extrapolating the data on rodent behaviors to children with neurodevelopmental disorders.

KW - \*adolescence

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - \*Bifidobacterium breve

KW - brain cell

KW - brain weight

KW - conference abstract

KW - controlled study

KW - enteric feeding

KW - \*histology

KW - human

KW - \*infancy

KW - \*intestine flora

KW - \*intrauterine growth retardation

KW - \*low birth weight

KW - male

KW - mental disease

KW - newborn

KW - nonhuman

KW - open field test

KW - oral drug administration

KW - perfusion

KW - rat

KW - rat model

KW - probiotic agent

KW - \*unclassified drug

JF - Annals of Nutrition and Metabolism

JA - Ann. Nutr. Metab.

LA - English

VL - 79

IS - Supplement 1

SP - 469

CY - Netherlands

PB - S. Karger AG

SN - 1421-9697

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DO - https://dx.doi.org/10.1159/000530786

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=642440500

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1159%2f000530786Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tsuji&issn=1421-9697&title=Annals+of+Nutrition+and+Metabolism&atitle=Bifidobacterium+breve+supplementation+during+infancy+attenuates+mobility+in+low-birthweight+rats+during+adolescence&volume=79&issue=Supplement+1&spage=469&epage=&date=2023&doi=10.1159%2F000530786&pmid=&sid=OVID:embase

44.

TY - JOUR

DB - Embase

AN - 2025733551

ID - 37754596 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37754596]

T1 - The MothersBabies Study, an Australian Prospective Cohort Study Analyzing the Microbiome in the Preconception and Perinatal Period to Determine Risk of Adverse Pregnancy, Postpartum, and Child-Related Health Outcomes: Study Protocol

A1 - Strout N.

A1 - Pasic L.

A1 - Hicks C.

A1 - Chua X.-Y.

A1 - Tashvighi N.

A1 - Butler P.

A1 - Liu Z.

A1 - El-Assaad F.

A1 - Holmes E.

A1 - Susic D.

A1 - Samaras K.

A1 - Craig M.E.

A1 - Davis G.K.

A1 - Henry A.

A1 - Ledger W.L.

A1 - El-Omar E.M.

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Y1 - 2023//

N2 - The microbiome has emerged as a key determinant of human health and reproduction, with recent evidence suggesting a dysbiotic microbiome is implicated in adverse perinatal health outcomes. The existing research has been limited by the sample collection and timing, cohort design, sample design, and lack of data on the preconception microbiome. This prospective, longitudinal cohort study will recruit 2000 Australian women, in order to fully explore the role of the microbiome in the development of adverse perinatal outcomes. Participants are enrolled for a maximum of 7 years, from 1 year preconception, through to 5 years postpartum. Assessment occurs every three months until pregnancy occurs, then during Trimester 1 (5 + 0-12 + 6 weeks gestation), Trimester 2 (20 + 0-24 + 6 weeks gestation), Trimester 3 (32 + 0-36 + 6 weeks gestation), and postpartum at 1 week, 2 months, 6 months, and then annually from 1 to 5 years. At each assessment, maternal participants self-collect oral, skin, vaginal, urine, and stool samples. Oral, skin, urine, and stool samples will be collected from children. Blood samples will be obtained from maternal participants who can access a study collection center. The measurements taken will include anthropometric, blood pressure, heart rate, and serum hormonal and metabolic parameters. Validated self-report questionnaires will be administered to assess diet, physical activity, mental health, and child developmental milestones. Medications, medical, surgical, obstetric history, the impact of COVID-19, living environments, and pregnancy and child health outcomes will be recorded. Multiomic bioinformatic and statistical analyses will assess the association between participants who developed high-risk and low-risk pregnancies, adverse postnatal conditions, and/or childhood disease, and their microbiome for the different sample types.Copyright © 2023 by the authors.

KW - adult

KW - anxiety

KW - Apgar score

KW - article

KW - birth weight

KW - blood pressure

KW - blood pressure monitoring

KW - blood sampling

KW - body composition

KW - breast feeding

KW - breast milk

KW - breathing rate

KW - \*child health

KW - childhood disease

KW - cohort analysis

KW - coronavirus disease 2019

KW - dietary intake

KW - DNA extraction

KW - feces analysis

KW - female

KW - gestational age

KW - head circumference

KW - heart rate

KW - \*high risk pregnancy

KW - human

KW - intestine flora

KW - liquid chromatography-mass spectrometry

KW - longitudinal study

KW - maternal nutrition

KW - mental health

KW - metabolic parameters

KW - metagenomics

KW - microbial community

KW - microbial diversity

KW - \*microbiome

KW - nuclear magnetic resonance spectroscopy

KW - nutritional assessment

KW - observational study

KW - outcome assessment

KW - perinatal care

KW - \*perinatal period

KW - physical activity

KW - preeclampsia

KW - pregnancy

KW - \*prepregnancy care

KW - prevalence

KW - \*prospective study

KW - puerperium

KW - pulse oximetry

KW - quality control

KW - questionnaire

KW - risk assessment

KW - risk factor

KW - robot assisted surgery

KW - sleep time

KW - ultra performance liquid chromatography

KW - waist circumference

KW - fluorometer

KW - nucleic acid isolation kit

KW - Qubit

JF - International Journal of Environmental Research and Public Health

JA - Int. J. Environ. Res. Public Health

LA - English

VL - 20

IS - 18

SP - 6736

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 1661-7827

SN - 1660-4601

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M2 - QIAsymphony DSP: Qiagen, Qubit

C1 - QIAsymphony DSP: Qiagen, Qubit

C2 - Qiagen

UR - http://www.mdpi.com/journal/ijerph

DO - https://dx.doi.org/10.3390/ijerph20186736

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2025733551

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3390%2fijerph20186736Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Strout&issn=1661-7827&title=International+Journal+of+Environmental+Research+and+Public+Health&atitle=The+MothersBabies+Study%2C+an+Australian+Prospective+Cohort+Study+Analyzing+the+Microbiome+in+the+Preconception+and+Perinatal+Period+to+Determine+Risk+of+Adverse+Pregnancy%2C+Postpartum%2C+and+Child-Related+Health+Outcomes%3A+Study+Protocol&volume=20&issue=18&spage=6736&epage=&date=2023&doi=10.3390%2Fijerph20186736&pmid=37754596&sid=OVID:embase

45.

TY - JOUR

DB - Embase

AN - 2024483596

ID - 37460822 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37460822]

T1 - Prebiotics modulate the microbiota-gut-brain axis and ameliorate cognitive impairment in APP/PS1 mice

A1 - Zhang S.

A1 - Lv S.

A1 - Li Y.

A1 - Wei D.

A1 - Zhou X.

A1 - Niu X.

A1 - Yang Z.

A1 - Song W.

A1 - Zhang Z.

A1 - Peng D.

Y1 - 2023//

N2 - Purpose: Prebiotics, including fructo-oligosaccharides (FOS) and galacto-oligosaccharides (GOS), stimulate beneficial gut bacteria and may be helpful for patients with Alzheimer's disease (AD). This study aimed to compare the effects of FOS and GOS, alone or in combination, on AD mice and to identify their underlying mechanisms. Method(s): Six-month-old APP/PS1 mice and wild-type mice were orally administered FOS, GOS, FOS + GOS or water by gavage for 6 weeks and then subjected to relative assays, including behavioral tests, biochemical assays and 16S rRNA sequencing. Result(s): Through behavioral tests, we found that GOS had the best effect on reversing cognitive impairment in APP/PS1 mice, followed by FOS + GOS, while FOS had no effect. Through biochemical techniques, we found that GOS and FOS + GOS had effects on multiple targets, including diminishing Abeta burden and proinflammatory IL-1beta and IL-6 levels, and changing the concentrations of neurotransmitters GABA and 5-HT in the brain. In contrast, FOS had only a slight anti-inflammatory effect. Moreover, through 16S rRNA sequencing, we found that prebiotics changed composition of gut microbiota. Notably, GOS increased relative abundance of Lactobacillus, FOS increased that of Bifidobacterium, and FOS + GOS increased that of both. Furthermore, prebiotics downregulated the expression levels of proteins of the TLR4-Myd88-NF-kappaB pathway in the colons and cortexes, suggesting the involvement of gut-brain mechanism in alleviating neuroinflammation. Conclusion(s): Among the three prebiotics, GOS was the optimal one to alleviate cognitive impairment in APP/PS1 mice and the mechanism was attributed to its multi-target role in alleviating Abeta pathology and neuroinflammation, changing neurotransmitter concentrations, and modulating gut microbiota.Copyright © 2023, The Author(s), under exclusive licence to Springer-Verlag GmbH Germany.

KW - Actinobacteria

KW - animal behavior

KW - animal experiment

KW - animal model

KW - animal tissue

KW - antiinflammatory activity

KW - anxiety

KW - article

KW - Bacteroidetes

KW - Bifidobacterium

KW - brain cortex

KW - brain tissue

KW - \*brain-gut axis

KW - C57BL 6 mouse

KW - \*cognitive defect/th [Therapy]

KW - colon

KW - controlled study

KW - \*diet supplementation

KW - down regulation

KW - enteric feeding

KW - escape latency

KW - feces microflora

KW - Firmicutes

KW - genus

KW - hippocampal CA3 region

KW - intestine flora

KW - intestine tissue

KW - Lactobacillus

KW - liquid chromatography-mass spectrometry

KW - mouse

KW - nervous system inflammation

KW - NF kB signaling

KW - nonhuman

KW - phylum

KW - protein expression level

KW - RNA sequencing

KW - social competence

KW - total distance traveled

KW - transgenic mouse

KW - Verrucomicrobia

KW - wild type mouse

KW - 4 aminobutyric acid/ec [Endogenous Compound]

KW - alpha tubulin/ec [Endogenous Compound]

KW - amyloid beta protein/ec [Endogenous Compound]

KW - \*fructose oligosaccharide

KW - \*galactose oligosaccharide

KW - I kappa B/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - messenger RNA/ec [Endogenous Compound]

KW - myeloid differentiation factor 88/ec [Endogenous Compound]

KW - \*prebiotic agent

KW - RNA 16S/ec [Endogenous Compound]

KW - serotonin/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - water

JF - European Journal of Nutrition

JA - Eur. J. Nutr.

LA - English

VL - 62

IS - 7

SP - 2991

EP - 3007

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 1436-6207

SN - 1436-6215

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UR - https://www.springer.com/journal/394

DO - https://dx.doi.org/10.1007/s00394-023-03208-7

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024483596

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1007%2fs00394-023-03208-7Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=1436-6207&title=European+Journal+of+Nutrition&atitle=Prebiotics+modulate+the+microbiota-gut-brain+axis+and+ameliorate+cognitive+impairment+in+APP%2FPS1+mice&volume=62&issue=7&spage=2991&epage=3007&date=2023&doi=10.1007%2Fs00394-023-03208-7&pmid=37460822&sid=OVID:embase

46.

TY - JOUR

DB - Embase

AN - 2025383196

ID - 37697264 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37697264]

T1 - Fatal BK polyomavirus-associated pneumonia: report of two cases with literature review

A1 - Wang Y.

A1 - Fang Y.

A1 - Yan Z.

A1 - Xia R.

A1 - Zeng W.

A1 - Deng W.

A1 - Xu J.

A1 - Feng X.

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A1 - Miao Y.

AO - Miao, Yun; ORCID: https://orcid.org/0000-0003-3592-4695

Y1 - 2023//

N2 - Background: In immunocompromised populations, such as patients with AIDS and recipients of solid organ and hematopoietic stem cell transplants, BK polyomavirus (BKPyV) can reactivate and cause several diseases, which can lead to death in their severe forms. Unlike hemorrhagic cystitis and BKPyV-associated nephropathy, BKPyV-associated pneumonia is rare, with only seven known cases worldwide. However, the disease can rapidly progress with extremely high mortality. Case presentation: Herein, we report two cases of BKPyV-associated pneumonia following hematopoietic stem cell transplantation. Both patients had consistent infectious pneumonia and graft-versus-host disease after stem cell transplantation. The diagnosis of BKPyV-associated pneumonia was confirmed by metagenomic next-generation sequencing and polymerase chain reaction after the sudden worsening of the pulmonary infection signs and symptoms concomitant with renal dysfunction and systemic immune weakening. Both patients eventually died of systemic multi-organ failure caused by severe pneumonia. Conclusion(s): Currently, BKPyV reactivation cannot be effectively prevented. Immunocompromised patients must actively manage their primary lung infections, pay close attention to pulmonary signs and imaging changes. Especially during and after steroid pulse therapy or immunosuppressive therapy for graft versus host diseases, BKPyV load in blood/urine needs to be regularly measured, and the immunosuppressive intensity should be adjusted properly after the BKPyV reactivation diagnosis. Clinical trials of new antiviral drugs and therapies for BKPyV are urgently needed.Copyright © 2023, BioMed Central Ltd., part of Springer Nature.

KW - acute kidney failure/th [Therapy]

KW - acute lymphoblastic leukemia/di [Diagnosis]

KW - acute lymphoblastic leukemia/dt [Drug Therapy]

KW - acute lymphoblastic leukemia/th [Therapy]

KW - adult

KW - agranulocytosis/di [Diagnosis]

KW - allogeneic peripheral blood stem cell transplantation

KW - antibiotic therapy

KW - article

KW - assisted ventilation

KW - atypical mycobacteriosis/dt [Drug Therapy]

KW - bacterial pneumonia/dt [Drug Therapy]

KW - bilateral pneumonia/di [Diagnosis]

KW - bilateral pneumonia/th [Therapy]

KW - \*BK virus infection/co [Complication]

KW - \*BK virus infection/di [Diagnosis]

KW - \*BK virus infection/dt [Drug Therapy]

KW - blister

KW - blood analysis

KW - body temperature measurement

KW - bone marrow biopsy

KW - bone marrow depression/di [Diagnosis]

KW - bone marrow depression/dt [Drug Therapy]

KW - bone marrow depression/th [Therapy]

KW - cancer chemotherapy

KW - case report

KW - chickenpox

KW - child

KW - chill

KW - clinical article

KW - computer assisted tomography

KW - continuous renal replacement therapy

KW - cytomegalovirus infection/di [Diagnosis]

KW - cytomegalovirus pneumonia/dt [Drug Therapy]

KW - death

KW - \*disease association

KW - disease control

KW - disease course

KW - disease severity

KW - drug substitution

KW - drug withdrawal

KW - dry cough

KW - dysbiosis/dt [Drug Therapy]

KW - dysbiosis/th [Therapy]

KW - dyspnea/th [Therapy]

KW - electrolyte disturbance

KW - endotracheal intubation

KW - enteropathy/dt [Drug Therapy]

KW - Epstein Barr virus infection/di [Diagnosis]

KW - Epstein Barr virus infection/dt [Drug Therapy]

KW - fasting

KW - fecal microbiota transplantation

KW - fever/di [Diagnosis]

KW - follow up

KW - gastrointestinal disease/dt [Drug Therapy]

KW - general condition deterioration

KW - graft versus host reaction/co [Complication]

KW - graft versus host reaction/dt [Drug Therapy]

KW - heart ventricle flutter/di [Diagnosis]

KW - hematopoietic stem cell transplantation

KW - hemoglobinopathy/di [Diagnosis]

KW - herpes zoster/dt [Drug Therapy]

KW - high throughput sequencing

KW - hospital admission

KW - human

KW - human cell

KW - human tissue

KW - hyperpyrexia

KW - hyperthermia

KW - immune deficiency

KW - immunosuppressive treatment

KW - infectious pneumonia/co [Complication]

KW - intubation

KW - kidney biopsy

KW - kidney failure/th [Therapy]

KW - leukopoiesis

KW - lung infection

KW - lung lavage

KW - lung mycosis/di [Diagnosis]

KW - maintenance therapy

KW - male

KW - mesenchymal stem cell transplantation

KW - metagenomics

KW - multiple organ failure

KW - Mycobacterium smegmatis

KW - mycosis/dt [Drug Therapy]

KW - mycosis/pc [Prevention]

KW - pain

KW - papule

KW - pediatric multisystem inflammatory syndrome/di [Diagnosis]

KW - pediatric multisystem inflammatory syndrome/dt [Drug Therapy]

KW - pediatric multisystem inflammatory syndrome/th [Therapy]

KW - plasmapheresis

KW - pneumomediastinum/di [Diagnosis]

KW - \*pneumonia/co [Complication]

KW - \*pneumonia/di [Diagnosis]

KW - \*pneumonia/dt [Drug Therapy]

KW - \*pneumonia/th [Therapy]

KW - polymerase chain reaction

KW - postoperative complication/co [Complication]

KW - pus

KW - pyrexia idiopathica/di [Diagnosis]

KW - resuscitation

KW - school child

KW - thalassemia major/di [Diagnosis]

KW - thorax radiography

KW - thrombocytopenia/di [Diagnosis]

KW - thrombocytopenia/dt [Drug Therapy]

KW - treatment failure

KW - virus load

KW - virus pneumonia/di [Diagnosis]

KW - young adult

KW - aciclovir/dt [Drug Therapy]

KW - antiinflammatory agent

KW - budesonide/dt [Drug Therapy]

KW - budesonide/pv [Special Situation for Pharmacovigilance]

KW - caspofungin/dt [Drug Therapy]

KW - caspofungin/pv [Special Situation for Pharmacovigilance]

KW - cefepime/cb [Drug Combination]

KW - cefepime/dt [Drug Therapy]

KW - cefepime/po [Oral Drug Administration]

KW - cidofovir/dt [Drug Therapy]

KW - cidofovir/pv [Special Situation for Pharmacovigilance]

KW - cilastatin plus imipenem/dt [Drug Therapy]

KW - clarithromycin/cb [Drug Combination]

KW - clarithromycin/dt [Drug Therapy]

KW - cyclosporine/dt [Drug Therapy]

KW - cyclosporine/pv [Special Situation for Pharmacovigilance]

KW - eltrombopag/dt [Drug Therapy]

KW - esomeprazole/dt [Drug Therapy]

KW - foscarnet/dt [Drug Therapy]

KW - foscarnet/pv [Special Situation for Pharmacovigilance]

KW - ganciclovir/dt [Drug Therapy]

KW - granulocyte colony stimulating factor

KW - hemoglobin/ec [Endogenous Compound]

KW - immunoglobulin/dt [Drug Therapy]

KW - immunoglobulin/iv [Intravenous Drug Administration]

KW - immunoglobulin/pv [Special Situation for Pharmacovigilance]

KW - itraconazole/dt [Drug Therapy]

KW - levofloxacin/cb [Drug Combination]

KW - levofloxacin/dt [Drug Therapy]

KW - linezolid/cb [Drug Combination]

KW - linezolid/dt [Drug Therapy]

KW - meropenem/cb [Drug Combination]

KW - meropenem/dt [Drug Therapy]

KW - methylprednisolone/dt [Drug Therapy]

KW - methylprednisolone/iv [Intravenous Drug Administration]

KW - methylprednisolone/pv [Special Situation for Pharmacovigilance]

KW - moxifloxacin/cb [Drug Combination]

KW - moxifloxacin/dt [Drug Therapy]

KW - mycophenolate mofetil/dt [Drug Therapy]

KW - mycophenolate mofetil/pv [Special Situation for Pharmacovigilance]

KW - piperacillin plus tazobactam/dt [Drug Therapy]

KW - piperacillin plus tazobactam/pv [Special Situation for Pharmacovigilance]

KW - posaconazole/dt [Drug Therapy]

KW - rituximab/dt [Drug Therapy]

KW - rituximab/pv [Special Situation for Pharmacovigilance]

KW - sirolimus/dt [Drug Therapy]

KW - sirolimus/pv [Special Situation for Pharmacovigilance]

KW - somatostatin/dt [Drug Therapy]

KW - sorafenib/dt [Drug Therapy]

KW - sulfamethoxazole/dt [Drug Therapy]

KW - teicoplanin/dt [Drug Therapy]

KW - teicoplanin/pv [Special Situation for Pharmacovigilance]

KW - thalidomide/dt [Drug Therapy]

KW - thalidomide/pv [Special Situation for Pharmacovigilance]

KW - tumor necrosis factor receptor 2/dt [Drug Therapy]

KW - tumor necrosis factor receptor 2/pv [Special Situation for Pharmacovigilance]

KW - unclassified drug

KW - valganciclovir/dt [Drug Therapy]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/po [Oral Drug Administration]

KW - vancomycin/pv [Special Situation for Pharmacovigilance]

KW - voriconazole/dt [Drug Therapy]

KW - voriconazole/pv [Special Situation for Pharmacovigilance]

KW - oxygen mask

KW - magnesium isoglycyrrhizinate

XT - acute lymphoblastic leukemia / drug therapy / sorafenib

XT - atypical mycobacteriosis / drug therapy / clarithromycin

XT - atypical mycobacteriosis / drug therapy / moxifloxacin

XT - bacterial pneumonia / drug therapy / clarithromycin

XT - bacterial pneumonia / drug therapy / moxifloxacin

XT - BK virus infection / drug therapy / caspofungin

XT - BK virus infection / drug therapy / cidofovir

XT - BK virus infection / drug therapy / cilastatin plus imipenem

XT - BK virus infection / drug therapy / foscarnet

XT - BK virus infection / drug therapy / ganciclovir

XT - BK virus infection / drug therapy / immunoglobulin

XT - BK virus infection / drug therapy / sulfamethoxazole

XT - bone marrow depression / drug therapy / methylprednisolone

XT - cytomegalovirus pneumonia / drug therapy / valganciclovir

XT - dysbiosis / drug therapy / vancomycin

XT - enteropathy / drug therapy / budesonide

XT - enteropathy / drug therapy / thalidomide

XT - enteropathy / drug therapy / tumor necrosis factor receptor 2

XT - Epstein Barr virus infection / drug therapy / rituximab

XT - gastrointestinal disease / drug therapy / esomeprazole

XT - gastrointestinal disease / drug therapy / somatostatin

XT - graft versus host reaction / drug therapy / cyclosporine

XT - graft versus host reaction / drug therapy / mycophenolate mofetil

XT - graft versus host reaction / drug therapy / sirolimus

XT - herpes zoster / drug therapy / aciclovir

XT - mycosis / drug therapy / itraconazole

XT - mycosis / drug therapy / posaconazole

XT - pediatric multisystem inflammatory syndrome / drug therapy / cefepime

XT - pediatric multisystem inflammatory syndrome / drug therapy / cilastatin plus imipenem

XT - pediatric multisystem inflammatory syndrome / drug therapy / levofloxacin

XT - pediatric multisystem inflammatory syndrome / drug therapy / linezolid

XT - pediatric multisystem inflammatory syndrome / drug therapy / meropenem

XT - pediatric multisystem inflammatory syndrome / drug therapy / teicoplanin

XT - pediatric multisystem inflammatory syndrome / drug therapy / voriconazole

XT - pneumonia / drug therapy / caspofungin

XT - pneumonia / drug therapy / cefepime

XT - pneumonia / drug therapy / cilastatin plus imipenem

XT - pneumonia / drug therapy / ganciclovir

XT - pneumonia / drug therapy / levofloxacin

XT - pneumonia / drug therapy / linezolid

XT - pneumonia / drug therapy / meropenem

XT - pneumonia / drug therapy / piperacillin plus tazobactam

XT - pneumonia / drug therapy / sulfamethoxazole

XT - pneumonia / drug therapy / teicoplanin

XT - pneumonia / drug therapy / voriconazole

XT - thrombocytopenia / drug therapy / eltrombopag

XT - aciclovir / drug therapy / herpes zoster

XT - budesonide / drug therapy / enteropathy

XT - budesonide / special situation for pharmacovigilance / pediatric patient

XT - caspofungin / drug therapy / BK virus infection

XT - caspofungin / drug therapy / pneumonia

XT - caspofungin / special situation for pharmacovigilance / pediatric patient

XT - cefepime / drug combination / linezolid

XT - cefepime / drug therapy / pediatric multisystem inflammatory syndrome

XT - cefepime / drug therapy / pneumonia

XT - cidofovir / drug therapy / BK virus infection

XT - cidofovir / special situation for pharmacovigilance / pediatric patient

XT - cilastatin plus imipenem / drug therapy / BK virus infection

XT - cilastatin plus imipenem / drug therapy / pediatric multisystem inflammatory syndrome

XT - cilastatin plus imipenem / drug therapy / pneumonia

XT - clarithromycin / drug combination / moxifloxacin

XT - clarithromycin / drug therapy / atypical mycobacteriosis

XT - clarithromycin / drug therapy / bacterial pneumonia

XT - cyclosporine / drug therapy / graft versus host reaction

XT - cyclosporine / special situation for pharmacovigilance / pediatric patient

XT - eltrombopag / drug therapy / thrombocytopenia

XT - esomeprazole / drug therapy / gastrointestinal disease

XT - foscarnet / drug therapy / BK virus infection

XT - foscarnet / special situation for pharmacovigilance / pediatric patient

XT - ganciclovir / drug therapy / BK virus infection

XT - ganciclovir / drug therapy / pneumonia

XT - immunoglobulin / drug therapy / BK virus infection

XT - immunoglobulin / special situation for pharmacovigilance / pediatric patient

XT - itraconazole / drug therapy / mycosis

XT - levofloxacin / drug combination / meropenem

XT - levofloxacin / drug therapy / pediatric multisystem inflammatory syndrome

XT - levofloxacin / drug therapy / pneumonia

XT - linezolid / drug combination / cefepime

XT - linezolid / drug therapy / pediatric multisystem inflammatory syndrome

XT - linezolid / drug therapy / pneumonia

XT - meropenem / drug combination / levofloxacin

XT - meropenem / drug therapy / pediatric multisystem inflammatory syndrome

XT - meropenem / drug therapy / pneumonia

XT - methylprednisolone / drug therapy / bone marrow depression

XT - methylprednisolone / special situation for pharmacovigilance / pediatric patient

XT - moxifloxacin / drug combination / clarithromycin

XT - moxifloxacin / drug therapy / atypical mycobacteriosis

XT - moxifloxacin / drug therapy / bacterial pneumonia

XT - mycophenolate mofetil / drug therapy / graft versus host reaction

XT - mycophenolate mofetil / special situation for pharmacovigilance / pediatric patient

XT - piperacillin plus tazobactam / drug therapy / pneumonia

XT - piperacillin plus tazobactam / special situation for pharmacovigilance / pediatric patient

XT - posaconazole / drug therapy / mycosis

XT - rituximab / drug therapy / Epstein Barr virus infection

XT - rituximab / special situation for pharmacovigilance / pediatric patient

XT - sirolimus / drug therapy / graft versus host reaction

XT - sirolimus / special situation for pharmacovigilance / pediatric patient

XT - somatostatin / drug therapy / gastrointestinal disease

XT - sorafenib / drug therapy / acute lymphoblastic leukemia

XT - sulfamethoxazole / drug therapy / BK virus infection

XT - sulfamethoxazole / drug therapy / pneumonia

XT - teicoplanin / drug therapy / pediatric multisystem inflammatory syndrome

XT - teicoplanin / drug therapy / pneumonia

XT - teicoplanin / special situation for pharmacovigilance / pediatric patient

XT - thalidomide / drug therapy / enteropathy

XT - thalidomide / special situation for pharmacovigilance / pediatric patient

XT - tumor necrosis factor receptor 2 / drug therapy / enteropathy

XT - tumor necrosis factor receptor 2 / special situation for pharmacovigilance / pediatric patient

XT - valganciclovir / drug therapy / cytomegalovirus pneumonia

XT - vancomycin / drug therapy / dysbiosis

XT - vancomycin / special situation for pharmacovigilance / pediatric patient

XT - voriconazole / drug therapy / pediatric multisystem inflammatory syndrome

XT - voriconazole / drug therapy / pneumonia

XT - voriconazole / special situation for pharmacovigilance / pediatric patient

JF - BMC Infectious Diseases

JA - BMC Infect. Dis.

LA - English

VL - 23

IS - 1

SP - 592

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1471-2334 (electronic)

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UR - https://bmcinfectdis.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s12879-023-08577-2

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2025383196

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1186%2fs12879-023-08577-2Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=1471-2334&title=BMC+Infectious+Diseases&atitle=Fatal+BK+polyomavirus-associated+pneumonia%3A+report+of+two+cases+with+literature+review&volume=23&issue=1&spage=592&epage=&date=2023&doi=10.1186%2Fs12879-023-08577-2&pmid=37697264&sid=OVID:embase

47.

TY - JOUR

DB - Embase

AN - 2024241151

T1 - Clinical observation and mechanism of acupuncture on amnestic mild cognitive impairment based on the gut-brain axis: study protocol for a randomized controlled trial

A1 - Bao Q.

A1 - Liu Y.

A1 - Zhang X.

A1 - Li Y.

A1 - Ye F.

A1 - He X.

A1 - Xia M.

A1 - Chen Z.

A1 - Yao J.

A1 - Zhong W.

A1 - Wu K.

A1 - Wang Z.

A1 - Sun M.

A1 - Chen J.

A1 - Hong X.

A1 - Zhao L.

A1 - Yin Z.

A1 - Liang F.

Y1 - 2023//

N2 - Background: Amnestic mild cognitive impairment (aMCI) is a pre-dementia condition associated with declined cognitive function dominated by memory impairment. The occurrence of aMCI is associated with the gut-brain axis. Previous studies have shown cognitive improvements in MCI after acupuncture treatment. This study evaluates whether acupuncture can produce a therapeutic effect in patients with aMCI by modulating the gut-brain axis. Methods and design: This is a prospective, parallel, multicenter randomized controlled trial. A total of 40 patients with aMCI will be randomly assigned to an acupuncture group (AG) or a waiting-list group (WG), participants in both groups will receive health education on improving cognitive function at each visit, and acupuncture will be conducted twice a week for 12 weeks in the AG. Another 20 matched healthy volunteers will be enrolled as normal control. The primary outcome will be the change in Alzheimer's Disease Assessment Scale-cognitive scale score before and after treatment. Additionally, functional magnetic resonance imaging data, faeces, and blood will be collected from each participant to characterize the brain function, gut microbiota, and inflammatory cytokines, respectively. The differences between patients with aMCI and healthy participants, and the changes in the AG and WG groups before and after treatment will be observed. Ultimately, the correlation among brain function, gut microbiota, inflammatory cytokines, and clinical efficacy evaluation in patients with aMCI will be analyzed. Discussion(s): This study will identify the efficacy and provide preliminary data on the possible mechanism of acupuncture in treating aMCI. Furthermore, it will also identify biomarkers of the gut microbiota, inflammatory cytokines, and brain function correlated with therapeutic effects. The results of this study will be published in peer-reviewed journals. Clinical trial registration: http://www.chictr.org.cn, identifier ChiCTR2200062084.Copyright © 2023 Bao, Liu, Zhang, Li, Wang, Ye, He, Xia, Chen, Yao, Zhong, Wu, Wang, Sun, Chen, Hong, Zhao, Yin and Liang.

KW - \*acupuncture

KW - adult

KW - aged

KW - article

KW - baihui acupoint

KW - blood glucose monitoring

KW - blood pressure regulation

KW - \*brain-gut axis

KW - clinical article

KW - \*clinical observation

KW - clinical trial protocol

KW - cluster analysis

KW - controlled study

KW - depression

KW - DNA library

KW - emotion

KW - enzyme linked immunosorbent assay

KW - female

KW - functional disease

KW - functional magnetic resonance imaging

KW - functional neuroimaging

KW - high throughput sequencing

KW - hospital admission

KW - human

KW - intestine flora

KW - male

KW - metagenomics

KW - \*mild cognitive impairment

KW - Montreal cognitive assessment

KW - multicenter study

KW - parallel design

KW - Pittsburgh Sleep Quality Index

KW - prospective study

KW - randomized controlled trial

KW - recall

KW - Rey auditory verbal learning test

KW - sample size

KW - shenmen acupoint

KW - shenting acupoint

KW - single blind procedure

KW - sleep disorder/dt [Drug Therapy]

KW - sleep quality

KW - T1 weighted imaging

KW - taixi acupoint

KW - \*therapy effect

KW - treatment duration

KW - working memory

KW - cyclooxygenase 1/ec [Endogenous Compound]

KW - cyclooxygenase 2/ec [Endogenous Compound]

KW - glucose/ec [Endogenous Compound]

KW - hypnotic agent/dt [Drug Therapy]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - acupuncture needle/ct [Clinical Trial]

KW - disposable equipment

KW - ELISA kit

KW - freezer

KW - high throughput sequencer

KW - MRI scanner

KW - refrigerator

XT - sleep disorder / drug therapy / hypnotic agent

XT - hypnotic agent / drug therapy / sleep disorder

JF - Frontiers in Medicine

JA - Front. Med.

LA - English

VL - 10

SP - 1198579

CY - Switzerland

PB - Frontiers Media SA

SN - 2296-858X (electronic)

SN - 2296-858X

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M1 - (Ye) The Sichuan Province People's Hospital, Chengdu, China

M1 - (He) The Rehabilitation Hospital of Sichuan Province, Chengdu, China

C2 - hwato [China], Illumina, Siemens Healthcare [Germany]

UR - journal.frontiersin.org/journal/medicine

DO - https://dx.doi.org/10.3389/fmed.2023.1198579

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024241151

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3389%2ffmed.2023.1198579Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bao&issn=2296-858X&title=Frontiers+in+Medicine&atitle=Clinical+observation+and+mechanism+of+acupuncture+on+amnestic+mild+cognitive+impairment+based+on+the+gut-brain+axis%3A+study+protocol+for+a+randomized+controlled+trial&volume=10&issue=&spage=1198579&epage=&date=2023&doi=10.3389%2Ffmed.2023.1198579&pmid=&sid=OVID:embase

48.

TY - JOUR

DB - Embase

AN - 2024654300

T1 - Improvements and evaluations of animal models of neonatal necrotizing enterocolitis

A1 - Lingqi X.

A1 - Shurong M.

A1 - Lulu C.

A1 - Huiting Z.

A1 - Jian W.

Y1 - 2023//

N2 - Objective The construction of animal models of neonatal necrotizing enterocolitis (NEC) is still not uniform, and animal modeling approaches that are more relevant to the actual clinical situation of NEC childem should be clarified. Methods Fifly-four newborn mice were randomized into five groups of control (Ctrl),hypoxia plus artificial feeding (HF),hypoxia plus artificial feeding plus cold stimulation (Cold) hypoxia plus artificial feeding plus lipopolysaccharide (LPS) and hypoxia plus artificial feeding plus intestinal bacteria in NEC (Bac). After successful modeling,intestinal pathology,NEC-related intestinal epithelial barrier proteins (p-catenin & Occludin),intestinal epithelial cell death (CC3,RIPK1 & PARP1) and pro-inflammato-ry cytokines (IL-6,TNF-a & MCP1) were evaluated. Results Nadler score ^2 according to intestinal histology was considered as NEC-like intestinal injury. In this study, the intestinal histopathology of the three NEC-modeled groups met the criteria for NEC-like intestinal injury, except for the Ctrl and HF groups. Compared with the NEC modeling groups HF (30%), Cold (83.3%) and LPS (81. 8%), the Bac group had the highest modeling success rate (100%), and the mental status, bloating and diarrhea, and mobility of the mice in the Bac group during the modeling period were more consistent with clinical NEC. Meanwhile, the expression of intestinal barrier proteins [i-catenin and Occludin was decreased in the Bac group mice, and the difference was statistically significant compared with the Ctrl group (P <0.05). the expression of intestinal epithelial cell death marker molecules RIPK1 and PARP1 was upregulated in the LPS and Bac groups, and the expression levels of inflammatory factors IL-6, TNF-a and MCP1 were increased compared with the Ctrl group, with statistically significant differences (P <0.05). Conclusion This study has successfully established four NEC animal models and verified a more appropriate animal modeling method of clinical NEC, namely "hypoxia plus artificial feeding plus NEC intestinal bacteria". Such a modeling method has a high success rate. And intestinal his-topathological injury, intestinal barrier protein expression and systemic inflammatory response mimic closely the clinical characteristics of NEC.Copyright © 2023, Science and Technology Association of Hunan Province. All rights reserved.

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - article

KW - artificial feeding

KW - bloating

KW - cell death

KW - cold exposure

KW - controlled study

KW - diarrhea

KW - epithelium cell

KW - evaluation study

KW - feasibility study

KW - histology

KW - histopathology

KW - hypoxia

KW - inflammation

KW - intestine flora

KW - intestine injury

KW - mental health

KW - molecular pathology

KW - mouse

KW - movement (physiology)

KW - \*necrotizing enterocolitis

KW - newborn

KW - nonhuman

KW - \*process development

KW - protein degradation

KW - protein expression

KW - randomized controlled trial (topic)

KW - upregulation

KW - beta catenin/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lipopolysaccharide

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - nicotinamide adenine dinucleotide adenosine diphosphate ribosyltransferase 1/ec [Endogenous Compound]

KW - occludin/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Journal of Clinical Pediatric Surgery

JA - J. Clin. Pediatr. Surg.

LA - Chinese

VL - 22

IS - 6

SP - 569

EP - 575

CY - China

PB - Science and Technology Association of Hunan Province

SN - 1671-6353

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UR - http://lcxrwkzz.paperopen.com/Upload/PaperUpLoad/e29b79a2-780b-42c6-b39c-ddee75bd7b6b.pdf

DO - https://dx.doi.org/10.3760/cma.j.cn101785-202202036-014

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024654300

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3760%2fcma.j.cn101785-202202036-014Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lingqi&issn=1671-6353&title=Journal+of+Clinical+Pediatric+Surgery&atitle=Improvements+and+evaluations+of+animal+models+of+neonatal+necrotizing+enterocolitis&volume=22&issue=6&spage=569&epage=575&date=2023&doi=10.3760%2Fcma.j.cn101785-202202036-014&pmid=&sid=OVID:embase

49.

TY - JOUR

DB - Embase

AN - 2024425409

T1 - Proceedings of the 2021 American Burn Association State and Future of Burn Science Meeting

A1 - Shupp J.W.

A1 - Holmes J.H.

A1 - Moffatt L.T.

A1 - Phelan H.A.

A1 - Sousse L.

A1 - Romanowski K.S.

A1 - Jeschke M.

A1 - Kowalske K.J.

A1 - Badger K.

A1 - Allely R.

A1 - Cartotto R.

A1 - Burmeister D.M.

A1 - Kubasiak J.C.

A1 - Wolf S.E.

A1 - Wallace K.F.

A1 - Gillenwater J.

A1 - Schneider D.M.

A1 - Hultman C.S.

A1 - Wiechman S.A.

A1 - Bailey J.K.

A1 - Powell H.M.

A1 - Travis T.E.

A1 - Supp D.M.

A1 - Carney B.C.

A1 - Johnson L.S.

A1 - Chung K.K.

A1 - Kahn S.A.

A1 - Gibson A.L.F.

A1 - Christy R.J.

A1 - Carter J.E.

A1 - Carson J.S.

A1 - Palmieri T.L.

A1 - Kopari N.M.

A1 - Blome-Eberwein S.A.

A1 - Hickerson W.L.

A1 - Parry I.

A1 - Cancio J.M.

A1 - Suman O.

A1 - Schulman C.I.

A1 - Lamendella R.

A1 - Hill D.M.

A1 - Wibbenmeyer L.A.

A1 - Nygaard R.M.

A1 - Wagner A.L.

A1 - Carter A.D.W.

A1 - Greenhalgh D.G.

A1 - Lawless M.B.

A1 - Carlson D.L.

A1 - Harrington D.T.

Y1 - 2022//

N2 - Periodically, the American Burn Association (ABA) has convened a State of the Science meeting on various topics representing multiple disciplines within burn care and research. In 2021 at the request of the ABA President, meeting development was guided by the ABA's Burn Science Advisory Panel (BSAP) and a subgroup of meeting chairs. The goal of the meeting was to produce both an evaluation of the current literature and ongoing studies, and to produce a research agenda and/or define subject matter-relevant next steps to advance the field(s). Members of the BSAP defined the topics to be addressed and subsequently solicited for nominations of expert speakers and topic leaders from the ABA's Research Committee. Current background literature for each topic was compiled by the meeting chairs and the library then enhanced by the invited topic and breakout discussion leaders. The meeting was held in New Orleans, LA on November 2nd and 3rd and was formatted to allow for 12 different topics, each with two subtopics, to be addressed. Topic leaders provided a brief overview of each topic to approximately 100 attendees, followed by expert-lead breakout sessions for each topic that allowed for focused discussion among subject matter experts and interested participants. The breakout and topic group leaders worked with the participants to determine research needs and associated next steps including white papers, reviews and in some cases collaborative grant proposals. Here, summaries from each topic area will be presented to highlight the main foci of discussion and associated conclusions.Copyright © 2022 American Burn Association. All rights reserved.

KW - acute stress disorder

KW - aftercare

KW - aging

KW - Big Five Inventory

KW - \*burn/dt [Drug Therapy]

KW - burn infection

KW - \*burn patient

KW - burn scar

KW - burn shock

KW - burn survivor

KW - burn unit

KW - clinical evaluation

KW - Clinical Frailty Scale

KW - clinical research

KW - collaborative learning

KW - community reintegration

KW - conference paper

KW - critical illness

KW - fluid resuscitation

KW - frailty

KW - frostbite

KW - histology

KW - human

KW - indirect calorimetry

KW - integration

KW - intensive care

KW - leadership

KW - library

KW - long term care

KW - Louisiana

KW - medical expert

KW - \*medical society

KW - metabolism

KW - microbiome

KW - microbiomics

KW - nail dyschromia

KW - neuropathic pain

KW - neuropsychological assessment

KW - nutrition

KW - nutritional requirement

KW - nutritional support

KW - outcome assessment

KW - patient assessment

KW - \*patient care

KW - posttraumatic stress disorder

KW - professional knowledge

KW - pruritus

KW - research priority

KW - return to school

KW - return to work

KW - sepsis

KW - surgical technique

KW - treatment outcome

KW - university hospital

KW - wound

KW - wound assessment

KW - wound care

KW - wound healing

KW - trace element/dt [Drug Therapy]

XT - burn / drug therapy / trace element

XT - trace element / drug therapy / burn

JF - Journal of Burn Care and Research

JA - J. Burn Care Res.

LA - English

VL - 43

IS - 6

SP - 1241

EP - 1259

CY - United States

PB - Oxford University Press

SN - 1559-047X

SN - 1559-0488

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UR - http://journals.lww.com/burncareresearch

DO - https://dx.doi.org/10.1093/jbcr/irac092

PT - Conference Paper

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024425409

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1093%2fjbcr%2firac092Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Shupp&issn=1559-047X&title=Journal+of+Burn+Care+and+Research&atitle=Proceedings+of+the+2021+American+Burn+Association+State+and+Future+of+Burn+Science+Meeting&volume=43&issue=6&spage=1241&epage=1259&date=2022&doi=10.1093%2Fjbcr%2Firac092&pmid=&sid=OVID:embase

50.

TY - JOUR

DB - Embase

AN - 2025135295

ID - 37630804 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37630804]

T1 - Potential Epigenetic Effects of Human Milk on Infants' Neurodevelopment

A1 - Gialeli G.

A1 - Panagopoulou O.

A1 - Liosis G.

A1 - Siahanidou T.

AO - Gialeli, Giannoula; ORCID: https://orcid.org/0000-0003-3735-1608

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Y1 - 2023//

N2 - The advantages of human milk feeding, especially in preterm babies, are well recognized. Infants' feeding with breast milk lowers the likelihood of developing a diverse range of non-communicable diseases later in life and it is also associated with improved neurodevelopmental outcomes. Although the precise mechanisms through which human milk feeding is linked with infants' neurodevelopment are still unknown, potential epigenetic effects of breast milk through its bioactive components, including non-coding RNAs, stem cells and microbiome, could at least partly explain this association. Micro- and long-non-coding RNAs, enclosed in milk exosomes, as well as breast milk stem cells, survive digestion, reach the circulation and can cross the blood-brain barrier. Certain non-coding RNAs potentially regulate genes implicated in brain development and function, whereas nestin-positive stem cells can possibly differentiate into neural cells or/and act as epigenetic regulators in the brain. Furthermore, breast milk microbiota contributes to the establishment of infant's gut microbiome, which is implicated in brain development via epigenetic modifications and key molecules' regulation. This narrative review provides an updated analysis of the relationship between breast milk feeding and infants' neurodevelopment via epigenetics, pointing out how breast milk's bioactive components could have an impact on the neurodevelopment of both full-term and preterm babies.Copyright © 2023 by the authors.

KW - Alzheimer disease/et [Etiology]

KW - astrocyte

KW - autism/et [Etiology]

KW - blood brain barrier

KW - \*brain development

KW - \*breast milk

KW - cell differentiation

KW - diabetes mellitus

KW - epigenetic modification

KW - \*epigenetics

KW - exosome

KW - feeding

KW - gastrointestinal tract

KW - human

KW - infant

KW - malnutrition

KW - mental disease/et [Etiology]

KW - \*microbiome

KW - milk

KW - narrative

KW - nerve cell

KW - nerve cell differentiation

KW - nervous system development

KW - neurologic disease/et [Etiology]

KW - neurological complication/pc [Prevention]

KW - non communicable disease

KW - nonhuman

KW - obesity

KW - oligodendroglia

KW - premature labor

KW - prematurity

KW - protein function

KW - review

KW - schizophrenia/et [Etiology]

KW - sepsis

KW - smoking

KW - \*stem cell

KW - biological marker/ec [Endogenous Compound]

KW - \*long untranslated RNA/ec [Endogenous Compound]

KW - \*microRNA/ec [Endogenous Compound]

KW - microRNA 132/ec [Endogenous Compound]

KW - microRNA 210/ec [Endogenous Compound]

KW - microRNA 29b/ec [Endogenous Compound]

KW - nestin/ec [Endogenous Compound]

KW - transcription factor Sox2/ec [Endogenous Compound]

KW - untranslated RNA/ec [Endogenous Compound]

JF - Nutrients

JA - Nutrients

LA - English

VL - 15

IS - 16

SP - 3614

CY - Switzerland

PB - Multidisciplinary Digital Publishing Institute (MDPI)

SN - 2072-6643 (electronic)

SN - 2072-6643

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UR - http://www.mdpi.com/journal/nutrients/

DO - https://dx.doi.org/10.3390/nu15163614

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2025135295

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3390%2fnu15163614Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gialeli&issn=2072-6643&title=Nutrients&atitle=Potential+Epigenetic+Effects+of+Human+Milk+on+Infants%27+Neurodevelopment&volume=15&issue=16&spage=3614&epage=&date=2023&doi=10.3390%2Fnu15163614&pmid=37630804&sid=OVID:embase

51.

TY - JOUR

DB - Embase

AN - 642184879

T1 - Bifidobacterium breve supplementation during infancy attenuates mobility in low-birthweight rats during adolescence

T3 - IUNS 22nd International Congress of Nutrition. Tokyo Japan.

A1 - Tsuji M.

A1 - Itoh A.

A1 - Tanaka N.

A1 - Fukunaga S.

A1 - Nakano-Doi A.

A1 - Matsuyama T.

A1 - Nakagomi T.

Y1 - 2023//

N2 - Background and Objectives: Children with low birthweight (LBW) have a higher risk for developing attention-deficit/hyperactivity disorder (ADHD), for which no prophylactic measure exists. The gut microbiota in infants with LBW is different from that in infants with normal birthweight and is associated with ADHD. Oral supplementation with Bifidobacterium has several health benefits, such as suppressing inflammation and reducing infectious disease in newborns with LBW. We hypothesized that early oral administration of B. breve can attenuate altered behaviors observed later in life in individuals born with LBW. The aim of the present study was to investigate whether oral administration of B. breve M-16V in the neonatal and infantile periods has beneficial effects on behaviors during adolescence in rats born with LBW. Method(s): We examined the effect of gavage supplementation with Bifidobacterium breve M-16V in a rat model of intrauterine hypoperfusion. Pups born with LBW were supplemented with either B. breve or vehicle from postnatal days 1 to 21. Result(s): The open-field test at 5 weeks of age (equivalent to human pubertal age) showed that rats in the LBW-vehicle group were marginally hyperactive compared with rats in the sham group, while rats in the LBW-B.breve group were significantly hypoactive compared with rats in the LBW-vehicle group. The gut microbiota in the LBW-vehicle group wasdifferent from that in the sham group, while that in the LBW-B.breve group was not. Anatomical/histological evaluation at 6 weeks of age demonstrated that the brain weight and the cerebral areas on coronal sections were reduced in the LBW groups compared with the sham group. Probiotic supplementation did not ameliorate these morphological brain anomalies in LBW animals. The percentage of Iba-1+ cells in the brain was not different among the LBW-B.breve, LBW-vehicle, and sham groups. Conclusion(s): B. breve supplementation during early life is suggested to have the potential to help children with LBW attenuate hypermobility in adolescence, although caution is warranted when extrapolating the data on rodent behaviors to children with neurodevelopmental disorders.

KW - \*adolescence

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - \*Bifidobacterium breve

KW - brain cell

KW - brain weight

KW - conference abstract

KW - controlled study

KW - enteric feeding

KW - \*histology

KW - human

KW - \*infancy

KW - \*intestine flora

KW - \*intrauterine growth retardation

KW - \*low birth weight

KW - male

KW - mental disease

KW - newborn

KW - nonhuman

KW - open field test

KW - oral drug administration

KW - perfusion

KW - rat

KW - rat model

KW - probiotic agent

KW - \*unclassified drug

JF - Annals of Nutrition and Metabolism

JA - Ann. Nutr. Metab.

LA - English

VL - 79

IS - Supplement 1

SP - 469

CY - Netherlands

PB - S. Karger AG

SN - 1421-9697

AD - M. Tsuji, Kyoto Womens University, Japan

M1 - (Tsuji, Itoh, Tanaka, Fukunaga) Kyoto Womens University, Japan

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DO - https://dx.doi.org/10.1159/000530786

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=642184879

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1159%2f000530786Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tsuji&issn=1421-9697&title=Annals+of+Nutrition+and+Metabolism&atitle=Bifidobacterium+breve+supplementation+during+infancy+attenuates+mobility+in+low-birthweight+rats+during+adolescence&volume=79&issue=Supplement+1&spage=469&epage=&date=2023&doi=10.1159%2F000530786&pmid=&sid=OVID:embase

52.

TY - JOUR

DB - Embase

AN - 2024813399

T1 - Editorial: What does it take to cure the brain? Studies toward genes, proteins, processes, and rehabilitation

A1 - Shu X.

A1 - Denora N.

A1 - Laquintana V.

Y1 - 2023//

KW - Alzheimer disease/dt [Drug Therapy]

KW - autism

KW - \*brain dysfunction/rh [Rehabilitation]

KW - brain function

KW - cerebrovascular accident

KW - depression

KW - disease classification

KW - editorial

KW - environmental factor

KW - gene

KW - \*genetic analysis

KW - heredity

KW - human

KW - hypoxic ischemic encephalopathy/dt [Drug Therapy]

KW - metabolomics

KW - microbiome

KW - neurofibrillary tangle

KW - nonhuman

KW - \*protein analysis

KW - protein expression

KW - protein phosphorylation

KW - \*rehabilitation care

KW - sepsis

KW - transcriptomics

KW - amyloid beta protein/ec [Endogenous Compound]

KW - amyloid precursor protein/ec [Endogenous Compound]

KW - cannabinoid/dt [Drug Therapy]

KW - carbenoxolone/dt [Drug Therapy]

KW - glial fibrillary acidic protein/ec [Endogenous Compound]

KW - granulocyte macrophage colony stimulating factor/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 3/ec [Endogenous Compound]

KW - macrophage elastase/ec [Endogenous Compound]

KW - presenilin 1/ec [Endogenous Compound]

KW - presenilin 2/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - PSEN1 gene

KW - PSEN2 gene

XT - Alzheimer disease / drug therapy / carbenoxolone

XT - hypoxic ischemic encephalopathy / drug therapy / cannabinoid

XT - cannabinoid / drug therapy / hypoxic ischemic encephalopathy

XT - carbenoxolone / drug therapy / Alzheimer disease

JF - Frontiers in Neuroscience

JA - Front. Neurosci.

LA - English

VL - 17

SP - 1252955

CY - Switzerland

PB - Frontiers Media SA

SN - 1662-4548

SN - 1662-453X

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UR - https://www.frontiersin.org/journals/neuroscience#

DO - https://dx.doi.org/10.3389/fnins.2023.1252955

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024813399

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3389%2ffnins.2023.1252955Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Shu&issn=1662-4548&title=Frontiers+in+Neuroscience&atitle=Editorial%3A+What+does+it+take+to+cure+the+brain%3F+Studies+toward+genes%2C+proteins%2C+processes%2C+and+rehabilitation&volume=17&issue=&spage=1252955&epage=&date=2023&doi=10.3389%2Ffnins.2023.1252955&pmid=&sid=OVID:embase

53.

TY - JOUR

DB - Embase

AN - 2026065187

T1 - Gestational Diabetes: A Review

A1 - Barbach A.

A1 - Chenguiti A.A.

A1 - Charrah Y.

A1 - Barkat A.

Y1 - 2023//

N2 - Gestational diabetes (GD) is a disorder of glucose tolerance resulting in hyperglycemia first diagnosed during pregnancy. Its worldwide prevalence is estimated at 14% but varies regionally. In 2008, new diagnostic criteria were adopted, leading to an increase in diagnosed cases. Biomarkers could potentially serve as an alternative to the current diagnostic criteria in the future, enabling the realization of a universally applicable GD screening program. Risk factors associated with GD encompass a range of factors, including epigenetic factors, inadequate vitamin D levels, family history of diabetes, prediabetes, obesity, fetal death, polycystic ovary syndrome (PCOS), and advanced maternal age. GD can have consequences for maternal health, increasing the risk of hypertensive disorders, premature labor, cesarean delivery, metabolic disorders, and later type 2 diabetes. In children, it may be associated with macrosomia, shoulder dystocia, respiratory insufficiency, and hospitalization in the neonatal intensive care. Offspring born to mothers with GD face heightened susceptibility to childhood and adult obesity, alongside elevated cardiometabolic risk. The consequences and risk factors of GD are not fully understood to this day. Therefore, Additional research is warranted to gain a deeper comprehension of the pathophysiology underlying the disease and to ascertain efficacious preventive and therapeutic approaches. Nutritional therapy is often sufficient to achieve normoglycemia objectives. An individualized nutritional program is recommended, providing the necessary nutrients to promote maternal and infant health, attain optimal gestational weight gain and uphold glycemic regulation. However, in some cases, additional antidiabetic therapy is necessary. Insulin remains the most commonly used treatment, but metformin may be a safe and effective alternative. This still needs to be validated by in-depth studies leading to better evaluation of its long-term effects on offspring.Copyright © 2023 Biomedical & Pharmacology Journal.

KW - anxiety

KW - article

KW - body mass

KW - caloric intake

KW - cardiometabolic risk

KW - cardiovascular risk

KW - diabetes mellitus

KW - diet therapy

KW - DNA methylation

KW - dystocia

KW - family history

KW - gene expression

KW - \*gestational diabetes

KW - glaucoma

KW - glucose blood level

KW - \*glucose intolerance

KW - glucose tolerance

KW - glycemic control

KW - glycemic index

KW - hospitalization

KW - human

KW - hyperglycemia

KW - hypertension

KW - hypoglycemia

KW - hypoxemia

KW - immunological tolerance

KW - impaired glucose tolerance

KW - insulin dependent diabetes mellitus

KW - intensive care unit

KW - intestine flora

KW - lifestyle modification

KW - macrosomia

KW - maternal age

KW - maternal hypertension

KW - Mediterranean diet

KW - metabolic disorder

KW - metabolic syndrome X

KW - newborn intensive care

KW - non insulin dependent diabetes mellitus

KW - obesity

KW - oral glucose tolerance test

KW - ovary polycystic disease

KW - pathophysiology

KW - physical activity

KW - preeclampsia

KW - pregnancy

KW - \*pregnancy outcome

KW - prematurity

KW - risk factor

KW - shoulder dystocia

KW - \*sleep apnea syndromes

KW - thyroid disease

KW - thyroid function

KW - vitamin blood level

KW - adiponectin/ec [Endogenous Compound]

KW - biological marker/ec [Endogenous Compound]

KW - hemoglobin A1c/ec [Endogenous Compound]

KW - insulin/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - metformin

KW - microRNA/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Biomedical and Pharmacology Journal

JA - Biomed. Pharmacol. J.

LA - English

VL - 16

IS - 2

SP - 673

EP - 686

CY - India

PB - Oriental Scientific Publishing Company

SN - 0974-6242

SN - 2456-2610

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UR - https://biomedpharmajournal.org/vol16no2/gestational-diabetes-a-review/

DO - https://dx.doi.org/10.13005/bpj/2649

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026065187

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.13005%2fbpj%2f2649Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Barbach&issn=0974-6242&title=Biomedical+and+Pharmacology+Journal&atitle=Gestational+Diabetes%3A+A+Review&volume=16&issue=2&spage=673&epage=686&date=2023&doi=10.13005%2Fbpj%2F2649&pmid=&sid=OVID:embase

54.

TY - JOUR

DB - Embase

AN - 2026109205

ID - 36541887 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36541887]

T1 - Multidisciplinary Perinatal Care in IBD

A1 - Godny L.

A1 - Svolos V.

A1 - Williams A.-J.

A1 - Czuber-Dochan W.

A1 - Aloi M.

A1 - Ibarra A.

A1 - O'Hanlon D.V.

A1 - Dragoni G.

A1 - Biron I.A.

A1 - Campmans-Kuijpers M.

A1 - Collins P.

A1 - Eder P.

A1 - Pfeffer-Gik T.

A1 - Jaghult S.

A1 - Wall C.L.

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Y1 - 2023//

N2 - Background and Aims: Patients with inflammatory bowel disease [IBD] are often affected during their reproductive years and may have many perinatal queries that require the comprehensive perspectives of a multidisciplinary team [MDT]. The purpose of this topical review is to assess the scientific evidence and provide expert opinion related to nutritional, psychological and supportive care of women and their infants throughout the prenatal, antenatal and infant periods. Method(s): A consensus expert panel of a paediatrician, gastroenterologists, nurses and dietitians was convened by the European Crohn's and Colitis Organisation. This panel critically reviewed literature related to the non-medical management of patients with IBD during preconception, pregnancy, the postnatal period and the first years of the infant's life. Statements were developed using an e-Delphi process over two rounds and were confirmed when >=80% of experts agreed with the statements. Result(s): A total of 19 current practice positions were developed that cover the preconception period, pregnancy and lactation, and early-life exposures associated with risk of IBD. Development of the infant microbiome and its role in the immune system and topics including nutritional optimization, psychological support and education relating to early life were reviewed. Conclusion(s): Patients with IBD have unique nutritional and psychosocial needs that may affect fertility and pregnancy outcomes. The early-life environment of infants born to parents with IBD may be associated with subsequent development of IBD in offspring. An MDT is the optimal setting to support and counsel patients throughout the perinatal period.Copyright © The Author(s) 2022.

KW - alternative medicine

KW - B12 deficiency/dt [Drug Therapy]

KW - birth setting

KW - breast feeding

KW - breast milk

KW - calcium deficiency/dt [Drug Therapy]

KW - \*collaborative care team

KW - consultation

KW - Delphi study

KW - diet

KW - dietary pattern

KW - dietitian

KW - disease activity

KW - disease course

KW - drug use

KW - dysbiosis

KW - eating habit

KW - education

KW - enteric feeding

KW - epigenetics

KW - fertility

KW - fiber intake

KW - folic acid deficiency/dt [Drug Therapy]

KW - gastroenterologist

KW - gestational weight gain

KW - health promotion

KW - healthy diet

KW - human

KW - immune system

KW - infancy

KW - infant care

KW - infection

KW - \*inflammatory bowel disease

KW - inheritance

KW - iodine deficiency/dt [Drug Therapy]

KW - iron deficiency/dt [Drug Therapy]

KW - iron therapy

KW - lactation

KW - malnutrition

KW - maternal age

KW - maternal care

KW - medication therapy management

KW - mental health

KW - microbial community

KW - microbiome

KW - micronutrient intake

KW - nonhuman

KW - nurse

KW - nutritional deficiency

KW - nutritional status

KW - nutritional support

KW - obesity

KW - obstetric delivery

KW - obstetrician

KW - parent counseling

KW - pediatrician

KW - \*perinatal care

KW - perinatal period

KW - pregnancy

KW - pregnancy outcome

KW - prenatal exposure

KW - prenatal period

KW - prepregnancy care

KW - prevention

KW - progeny

KW - protein deficiency/dt [Drug Therapy]

KW - psychological care

KW - psychologist

KW - psychosocial care

KW - review

KW - risk assessment

KW - smoking

KW - treatment planning

KW - vaccination

KW - vitamin D deficiency/dt [Drug Therapy]

KW - vitamin supplementation

KW - antibiotic agent

KW - calcium/dt [Drug Therapy]

KW - cyanocobalamin/dt [Drug Therapy]

KW - folic acid/dt [Drug Therapy]

KW - iodine/dt [Drug Therapy]

KW - iron/dt [Drug Therapy]

KW - protein/dt [Drug Therapy]

KW - vitamin D/dt [Drug Therapy]

KW - infant microbiome

XT - B12 deficiency / drug therapy / cyanocobalamin

XT - calcium deficiency / drug therapy / calcium

XT - folic acid deficiency / drug therapy / folic acid

XT - iodine deficiency / drug therapy / iodine

XT - iron deficiency / drug therapy / iron

XT - protein deficiency / drug therapy / protein

XT - vitamin D deficiency / drug therapy / vitamin D

XT - calcium / drug therapy / calcium deficiency

XT - cyanocobalamin / drug therapy / B12 deficiency

XT - folic acid / drug therapy / folic acid deficiency

XT - iodine / drug therapy / iodine deficiency

XT - iron / drug therapy / iron deficiency

XT - protein / drug therapy / protein deficiency

XT - vitamin D / drug therapy / vitamin D deficiency

JF - Journal of Crohn's and Colitis

JA - J. Crohn's Colitis

LA - English

VL - 17

IS - 5

SP - 663

EP - 680

CY - United Kingdom

PB - Oxford University Press

SN - 1873-9946

SN - 1876-4479

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UR - https://academic.oup.com/ecco-jcc/issue

DO - https://dx.doi.org/10.1093/ecco-jcc/jjac189

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2026109205

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1093%2fecco-jcc%2fjjac189Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Godny&issn=1873-9946&title=Journal+of+Crohn%27s+and+Colitis&atitle=Multidisciplinary+Perinatal+Care+in+IBD&volume=17&issue=5&spage=663&epage=680&date=2023&doi=10.1093%2Fecco-jcc%2Fjjac189&pmid=36541887&sid=OVID:embase

55.

TY - JOUR

DB - Embase

AN - 2025181311

ID - 36977450 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36977450]

T1 - Therapeutic potential of puerarin against cerebral diseases: From bench to bedside

A1 - Liu T.

A1 - Su K.

A1 - Cai W.

A1 - Ao H.

A1 - Li M.

Y1 - 2023//

N2 - The incidence of cerebral diseases is rapidly increasing worldwide, and they have become an important challenge for modern medicine. Most of the available chemical drugs used in the treatment of cerebral diseases are highly toxic and single-targeted. Therefore, novel drugs from natural resources have attracted much attention for their potential to manage cerebral diseases. Puerarin is a natural isoflavone isolated from the roots of Pueraria species such as P. lobata (Willd.) Ohwi, P. thomsonii, and P. mirifica. Several authors have reported the beneficial effects of puerarin in cerebral ischemic disease, intracerebral hemorrhage, vascular dementia, Alzheimer's disease, Parkinson's disease, depression, anxiety, and traumatic brain injury. This review summarizes the brain pharmacokinetics, brain drug delivery system, clinical use (in cerebral diseases), toxicity, and the adverse clinical reactions of puerarin. We have systematically presented the pharmacological actions and the molecular mechanisms of puerarin in various cerebral diseases to provide a direction for future researches on the therapeutic use of puerarin in cerebral diseases.Copyright © 2023

KW - acrosome

KW - akinesia

KW - Alzheimer disease

KW - animal experiment

KW - animal model

KW - animal tissue

KW - antidepressant activity

KW - anxiety

KW - apoptosis

KW - autophagosome

KW - bioavailability

KW - biotransformation

KW - blood brain barrier

KW - bone necrosis/co [Complication]

KW - bone necrosis/si [Side Effect]

KW - bradykinesia

KW - brain hemorrhage/co [Complication]

KW - brain hemorrhage/dt [Drug Therapy]

KW - brain infarction

KW - \*brain ischemia/dt [Drug Therapy]

KW - brain vasospasm

KW - carotid artery occlusion

KW - cognitive defect

KW - controlled study

KW - counter current chromatography

KW - \*degenerative disease/dt [Drug Therapy]

KW - depression

KW - drug elimination

KW - encapsulation

KW - endometriosis/co [Complication]

KW - endometriosis/si [Side Effect]

KW - erythrocyte disorder

KW - excitotoxicity

KW - feces analysis

KW - genetic transcription

KW - hippocampal CA1 region

KW - hippocampus

KW - Huntington chorea

KW - hypothalamus

KW - hypothalamus hypophysis adrenal system

KW - inner cell mass

KW - intestine flora

KW - lipid diet

KW - lipid peroxidation

KW - liver histology

KW - long term potentiation

KW - middle cerebral artery occlusion

KW - mouse

KW - nerve cell plasticity

KW - nerve degeneration

KW - \*nervous system development

KW - nervous system inflammation

KW - neurofibrillary tangle

KW - \*neuroprotection

KW - neurotoxicity

KW - nonhuman

KW - olfactory bulb

KW - open field test

KW - oxidative stress

KW - Parkinson disease

KW - particle size

KW - pharmacokinetics

KW - Pi3K/Akt signaling

KW - plant juice

KW - plant root

KW - posttraumatic stress disorder

KW - protein expression

KW - \*Pueraria

KW - Pueraria lobata

KW - reperfusion injury

KW - resuscitation

KW - review

KW - rotarod test

KW - signal transduction

KW - subarachnoid hemorrhage

KW - synaptic transmission

KW - time to maximum plasma concentration

KW - traumatic brain injury

KW - upregulation

KW - urinalysis

KW - vasospasm

KW - zeta potential

KW - acetylcholinesterase

KW - acetylsalicylic acid

KW - actin related protein 2

KW - brain derived neurotrophic factor

KW - calcium calmodulin dependent protein kinase II

KW - caspase 3

KW - catalase

KW - choline acetyltransferase

KW - claudin 1

KW - corticotropin

KW - cyclin D1/ec [Endogenous Compound]

KW - cytochrome c oxidase

KW - cytochrome P450

KW - daidzein

KW - dopamine

KW - endothelial nitric oxide synthase

KW - erythropoietin/ec [Endogenous Compound]

KW - glial cell line derived neurotrophic factor

KW - glucuronide

KW - glutathione

KW - glutathione peroxidase

KW - heat shock protein 70

KW - heme oxygenase 1

KW - immunoglobulin enhancer binding protein

KW - inducible nitric oxide synthase

KW - interleukin 6

KW - isoflavone

KW - isoflavone derivative

KW - lactate dehydrogenase

KW - malonaldehyde

KW - mammalian target of rapamycin

KW - myeloid differentiation factor 88

KW - nitric oxide

KW - occludin

KW - presenilin 1

KW - progesterone receptor

KW - prostaglandin E2

KW - protein bcl 2

KW - protein p53

KW - \*puerarin/ae [Adverse Drug Reaction]

KW - \*puerarin/dt [Drug Therapy]

KW - \*puerarin/ip [Intraperitoneal Drug Administration]

KW - \*puerarin/pr [Pharmaceutics]

KW - \*puerarin/pk [Pharmacokinetics]

KW - \*puerarin/pd [Pharmacology]

KW - reactive oxygen metabolite

KW - sequestosome 1

KW - stress activated protein kinase

KW - superoxide dismutase

KW - synaptophysin

KW - thrombomodulin

KW - toll like receptor 4

KW - transcription factor Nrf2

KW - tyrosine 3 monooxygenase

KW - vesicular monoamine transporter 2

KW - von Willebrand factor

XT - bone necrosis / side effect / puerarin

XT - brain hemorrhage / drug therapy / puerarin

XT - brain ischemia / drug therapy / puerarin

XT - degenerative disease / drug therapy / puerarin

XT - endometriosis / side effect / puerarin

XT - puerarin / adverse drug reaction / bone necrosis

XT - puerarin / adverse drug reaction / endometriosis

XT - puerarin / drug therapy / brain hemorrhage

XT - puerarin / drug therapy / brain ischemia

XT - puerarin / drug therapy / degenerative disease

JF - European Journal of Pharmacology

JA - Eur. J. Pharmacol.

LA - English

VL - 953

SP - 175695

CY - Netherlands

PB - Elsevier B.V.

SN - 0014-2999

SN - 1879-0712

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UR - https://www.elsevier.com/locate/ejphar

DO - https://dx.doi.org/10.1016/j.ejphar.2023.175695

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2025181311

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.1016%2fj.ejphar.2023.175695Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Liu&issn=0014-2999&title=European+Journal+of+Pharmacology&atitle=Therapeutic+potential+of+puerarin+against+cerebral+diseases%3A+From+bench+to+bedside&volume=953&issue=&spage=175695&epage=&date=2023&doi=10.1016%2Fj.ejphar.2023.175695&pmid=36977450&sid=OVID:embase

56.

TY - JOUR

DB - Embase

AN - 2024515417

ID - 37475961 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37475961]

T1 - Editorial: The role of probiotics, postbiotics, and microbial metabolites in preventing and treating chronic diseases

A1 - Xu T.

A1 - He X.

A1 - Chen T.

Y1 - 2023//

KW - abdominal pain

KW - acute ischemic stroke

KW - Alzheimer disease

KW - animal experiment

KW - animal model

KW - animal tissue

KW - Antheraea pernyi

KW - atopic dermatitis

KW - Bacillus subtilis

KW - bacterial membrane

KW - brain-gut axis

KW - cerebrovascular accident

KW - chronic bronchitis

KW - \*chronic disease/dt [Drug Therapy]

KW - Clostridium difficile infection

KW - controlled study

KW - diabetes mellitus

KW - diagnostic test accuracy study

KW - dietary supplement

KW - dysbiosis

KW - editorial

KW - emphysema

KW - Enterococcaceae

KW - Enterococcus

KW - Enterococcus faecium

KW - Faecalibacterium

KW - fecal microbiota transplantation

KW - Generalized Anxiety Disorder-7

KW - Helicobacter pylori

KW - human

KW - hyperlipidemia

KW - hypertension

KW - inflammation

KW - intestine flora

KW - irritable colon

KW - ischemic heart disease

KW - Lachnospiraceae

KW - lactic acid bacterium

KW - Lactobacillus

KW - lipid diet

KW - macrophage

KW - male

KW - \*metabolite

KW - microbiome

KW - mouse

KW - multiomics

KW - nonalcoholic fatty liver

KW - nonhuman

KW - osteoporosis

KW - Parkinson disease

KW - pathophysiology

KW - Pediococcus pentosaceus

KW - pneumonia

KW - quality of life

KW - receiver operating characteristic

KW - Rothia

KW - signal transduction

KW - stomach cancer

KW - survival rate

KW - therapy effect

KW - ulcerative colitis/dt [Drug Therapy]

KW - upregulation

KW - alpha synuclein/ec [Endogenous Compound]

KW - aromatic hydrocarbon receptor

KW - butyric acid/dt [Drug Therapy]

KW - G protein coupled receptor 30/ec [Endogenous Compound]

KW - glutathione peroxidase 1

KW - kelch like ECH associated protein 1/ec [Endogenous Compound]

KW - \*probiotic agent/cb [Drug Combination]

KW - \*probiotic agent/dt [Drug Therapy]

KW - superoxide dismutase

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - tryptophan

KW - unclassified drug

KW - \*postbiotic agent/cb [Drug Combination]

KW - \*postbiotic agent/dt [Drug Therapy]

XT - chronic disease / drug therapy / postbiotic agent

XT - chronic disease / drug therapy / probiotic agent

XT - ulcerative colitis / drug therapy / butyric acid

XT - butyric acid / drug therapy / ulcerative colitis

XT - postbiotic agent / drug combination / probiotic agent

XT - postbiotic agent / drug therapy / chronic disease

XT - probiotic agent / drug combination / postbiotic agent

XT - probiotic agent / drug therapy / chronic disease

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 13

SP - 1246937

CY - Switzerland

PB - Frontiers Media SA

SN - 2235-2988 (electronic)

SN - 2235-2988

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UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2023.1246937

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024515417

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.3389%2ffcimb.2023.1246937Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Xu&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Editorial%3A+The+role+of+probiotics%2C+postbiotics%2C+and+microbial+metabolites+in+preventing+and+treating+chronic+diseases&volume=13&issue=&spage=1246937&epage=&date=2023&doi=10.3389%2Ffcimb.2023.1246937&pmid=37475961&sid=OVID:embase

57.

TY - JOUR

DB - Embase

AN - 2024952356

ID - 36056826 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36056826]

T1 - Microbiome-Based Therapies in Parkinson's Disease: Can Tuning the Microbiota Become a Viable Therapeutic Strategy?

A1 - Onaolapo A.Y.

A1 - Ojo F.O.

A1 - Olofinnade A.T.

A1 - Falade J.

A1 - Lawal I.A.

A1 - Onaolapo O.J.

Y1 - 2023//

N2 - Progressive neurodegenerative disorders such as Parkinson's disease (PD) have continued to baffle medical science, despite strides in the understanding of their pathology. The inability of currently available therapies to halt disease progression is a testament to an incomplete understanding of pathways crucial to disease initiation, progression and management. Science has continued to link the activities and equilibrium of the gut microbiome to the health and proper functioning of brain neurons. They also continue to stir interest in the potential applications of technologies that may shift the balance of the gut microbiome towards achieving a favourable outcome in PD management. There have been suggestions that an improved understanding of the roles of the gut microbiota is likely to lead to the emergence of an era where their manipulation becomes a recognized strategy for PD management. This review examines the current state of our journey in the quest to understand how gut microbiota can influence several aspects of PD. We highlight the relationship between the gut microbiome/ microbiota and PD pathogenesis, as well as preclinical and clinical evidence evaluating the effect of postbiotics, probiotics and prebiotics in PD management. This is with a view to ascertaining if we are at the threshold of discovering the application of a usable tool in our quest for disease modifying therapies in PD.Copyright © 2023, Bentham Science Publishers. All rights reserved.

KW - aging

KW - Alzheimer disease

KW - antidepressant activity

KW - apoptosis

KW - article

KW - astrocyte

KW - Bacteroides

KW - Bacteroidetes

KW - Bifidobacterium

KW - blood brain barrier

KW - bone metabolism

KW - brain function

KW - brain nerve cell

KW - brain-gut axis

KW - cardiovascular disease

KW - central nervous system

KW - Clostridioides difficile

KW - Clostridium butyricum

KW - Clostridium difficile infection

KW - cognition

KW - cognitive defect

KW - colon flora

KW - colorectal cancer

KW - constipation

KW - degenerative disease

KW - depression

KW - diet supplementation

KW - dietary fiber

KW - disease exacerbation

KW - down regulation

KW - Down syndrome

KW - Drosophila

KW - Drosophila melanogaster

KW - dysbiosis

KW - excitotoxicity

KW - Faecalibacterium

KW - fecal microbiota transplantation

KW - feces microflora

KW - fermentation

KW - Firmicutes

KW - health promotion

KW - human

KW - Huntington chorea

KW - hypertension

KW - hyposmia

KW - hypotension

KW - inflammatory bowel disease

KW - insulin sensitivity

KW - intestine flora

KW - intestine innervation

KW - jurisprudence

KW - Lachnospiraceae

KW - lactic acid bacterium

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus plantarum

KW - Lactobacillus rhamnosus

KW - lifestyle modification

KW - lipid diet

KW - MAPK signaling

KW - mental disease

KW - mental stress

KW - microbial community

KW - \*microbiome

KW - microglia

KW - nerve degeneration

KW - nervous system development

KW - nervous system inflammation

KW - neuromodulation

KW - neuroprotection

KW - neurotoxicity

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - Opisthokonta

KW - oxidative stress

KW - \*Parkinson disease/dt [Drug Therapy]

KW - parkinsonism

KW - phase 1 clinical trial (topic)

KW - prevalence

KW - Prevotella

KW - Proteobacteria

KW - quality of life

KW - renin angiotensin aldosterone system

KW - risk factor

KW - Ruminococcus

KW - seaweed

KW - senescence accelerated mouse

KW - sepsis

KW - signal transduction

KW - upregulation

KW - velvet bean

KW - Verrucomicrobia

KW - acetylcholinesterase

KW - alpha synuclein

KW - amantadine

KW - brain derived neurotrophic factor

KW - docosahexaenoic acid

KW - fisetin

KW - flavonoid

KW - galactose oligosaccharide

KW - gamma interferon

KW - gasotransmitter

KW - glucagon like peptide 1

KW - inulin

KW - ketamine

KW - lactulose

KW - levodopa

KW - microRNA

KW - noradrenalin

KW - osteocalcin

KW - osteopontin

KW - pioglitazone

KW - polyphenol

KW - \*prebiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/dt [Drug Therapy]

KW - saponin

KW - short chain fatty acid

KW - \*synbiotic agent/dt [Drug Therapy]

KW - tyrosine 3 monooxygenase

XT - Parkinson disease / drug therapy / prebiotic agent

XT - Parkinson disease / drug therapy / probiotic agent

XT - Parkinson disease / drug therapy / synbiotic agent

XT - prebiotic agent / drug therapy / Parkinson disease

XT - probiotic agent / drug therapy / Parkinson disease

XT - synbiotic agent / drug therapy / Parkinson disease

JF - CNS and Neurological Disorders - Drug Targets

JA - CNS Neurol. Disord. Drug Targets

LA - English

VL - 22

IS - 9

SP - 1355

EP - 1368

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1871-5273

SN - 1996-3181

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UR - https://www.eurekaselect.com/646/journal/cns-amp-neurological-disorders-drug-targets

DO - https://dx.doi.org/10.2174/1871527321666220903114559

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexa&NEWS=N&AN=2024952356

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emexa&DO=10.2174%2f1871527321666220903114559Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Onaolapo&issn=1871-5273&title=CNS+and+Neurological+Disorders+-+Drug+Targets&atitle=Microbiome-Based+Therapies+in+Parkinson%27s+Disease%3A+Can+Tuning+the+Microbiota+Become+a+Viable+Therapeutic+Strategy%3F&volume=22&issue=9&spage=1355&epage=1368&date=2023&doi=10.2174%2F1871527321666220903114559&pmid=36056826&sid=OVID:embase

58.

TY - JOUR

DB - Embase

AN - 2025468205

T1 - Molecular signalling during cross talk between gut brain axis regulation and progression of irritable bowel syndrome: A comprehensive review

A1 - Singh S.V.

A1 - Ganguly R.

A1 - Jaiswal K.

A1 - Yadav A.K.

A1 - Kumar R.

A1 - Pandey A.K.

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Y1 - 2023//

N2 - Irritable bowel syndrome (IBS) is a chronic functional disorder which alters gastrointestinal (GI) functions, thus leading to compromised health status. Pathophysiology of IBS is not fully understood, whereas abnormal gut brain axis (GBA) has been identified as a major etiological factor. Recent studies are suggestive for visceral hyper-sensitivity, altered gut motility and dysfunctional autonomous nervous system as the main clinical abnormalities in IBS patients. Bidirectional signalling interactions among these abnormalities are derived through various exogenous and endogenous factors, such as microbiota population and diversity, microbial metabolites, dietary uptake, and psychological abnormalities. Strategic efforts focused to study these interactions including probiotics, antibiotics and fecal transplantations in normal and germfree animals are clearly suggestive for the pivotal role of gut microbiota in IBS etiology. Additionally, neurotransmitters act as communication tools between enteric microbiota and brain functions, where serotonin (5-hydroxytryptamine) plays a key role in pathophysiology of IBS. It regulates GI motility, pain sense and inflammatory responses particular to mucosal and brain activity. In the absence of a better understanding of various interconnected crosstalks in GBA, more scientific efforts are required in the search of novel and targeted therapies for the management of IBS. In this review, we have summarized the gut microbial composition, interconnected signalling pathways and their regulators, available therapeutics, and the gaps needed to fill for a better management of IBS.Copyright © The Author(s) 2023. Published by Baishideng Publishing Group Inc. All rights reserved

KW - abdominal discomfort

KW - adipose tissue

KW - antigen presenting cell

KW - autism

KW - bacterial translocation

KW - Bacteroides

KW - Bifidobacterium

KW - brain function

KW - \*brain-gut axis

KW - celiac disease

KW - Clostridioides difficile

KW - constipation

KW - diarrhea

KW - \*down regulation

KW - dysbiosis

KW - dyspepsia

KW - energy metabolism

KW - enteric feeding

KW - Enterococcus

KW - gastrointestinal motility

KW - gastrointestinal tract

KW - germfree animal

KW - hormonal regulation

KW - human

KW - hypertension

KW - immune response

KW - immune system

KW - inflammatory bowel disease

KW - insulin sensitivity

KW - intestinal dysmotility

KW - \*intestine flora

KW - \*irritable colon

KW - Lactobacillus

KW - Lactobacillus rhamnosus

KW - lamina propria

KW - lipid metabolism

KW - lipid storage

KW - liver regeneration

KW - metagenome

KW - microbial community

KW - microbial diversity

KW - molecularly targeted therapy

KW - mucosal immunity

KW - nerve cell differentiation

KW - neuroendocrine tumor

KW - obsessive compulsive disorder

KW - physiological stress

KW - postsynaptic density

KW - quality of life

KW - regulatory T lymphocyte

KW - review

KW - sensory nerve cell

KW - signal transduction

KW - ulcerative colitis

KW - vitamin metabolism

KW - vomiting

KW - xenobiotic metabolism

KW - antibiotic agent

KW - corticotropin releasing factor/ec [Endogenous Compound]

KW - epinephrine

KW - fluoxetine

KW - hydrogen sulfide

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - linoleic acid

KW - neuropeptide Y/ec [Endogenous Compound]

KW - peroxisome proliferator activated receptor gamma/ec [Endogenous Compound]

KW - probiotic agent

KW - RNA 16S/ec [Endogenous Compound]

KW - serotonin/ec [Endogenous Compound]

KW - somatostatin

KW - toll like receptor 7/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - tryptophan hydroxylase/ec [Endogenous Compound]

JF - World Journal of Clinical Cases

JA - World J. Clin. Cases

LA - English

VL - 11

IS - 19

SP - 4458

EP - 4476

CY - China

PB - Baishideng Publishing Group Inc

SN - 2307-8960 (electronic)

SN - 2307-8960

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UR - https://www.wjgnet.com/2307-8960/about.htm

DO - https://dx.doi.org/10.12998/wjcc.v11.i19.4458

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2025468205

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.12998%2fwjcc.v11.i19.4458Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Singh&issn=2307-8960&title=World+Journal+of+Clinical+Cases&atitle=Molecular+signalling+during+cross+talk+between+gut+brain+axis+regulation+and+progression+of+irritable+bowel+syndrome%3A+A+comprehensive+review&volume=11&issue=19&spage=4458&epage=4476&date=2023&doi=10.12998%2Fwjcc.v11.i19.4458&pmid=&sid=OVID:embase

59.

TY - JOUR

DB - Embase

AN - 2025857628

ID - 37356796 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37356796]

T1 - Continuous glucose monitoring in a healthy population: understanding the post-prandial glycemic response in individuals without diabetes mellitus

A1 - Jarvis P.R.E.

A1 - Cardin J.L.

A1 - Nisevich-Bede P.M.

A1 - McCarter J.P.

Y1 - 2023//

N2 - Continuous glucose monitoring has become a common adjunct in the management of Diabetes Mellitus. However, there has been a recent trend among individuals without diabetes using these devices as a means of monitoring their health. The increased visibility of glucose data has allowed users to study the effect lifestyle has upon post-prandial glucose levels. Although post-prandial hyperglycemia is well understood in the setting of diabetes, its impact in individuals without diabetes is less well defined. This article reviews the factors which contribute to post-prandial hyperglycemia in individuals without diabetes and how the data obtained from continuous glucose monitoring can be used to improve an individual's metabolic health.Copyright © 2023 The Authors

KW - adult

KW - \*blood glucose monitoring

KW - body weight loss

KW - controlled study

KW - \*diabetes mellitus

KW - diet

KW - \*glycemic control

KW - human

KW - hunger

KW - hyperglycemia

KW - hypoglycemia

KW - intestine flora

KW - mental health

KW - metabolism

KW - normal human

KW - physical activity

KW - \*postprandial state

KW - review

KW - sleep quality

KW - \*glucose/ec [Endogenous Compound]

KW - continuous glucose monitoring system

JF - Metabolism: Clinical and Experimental

JA - Metab. Clin. Exp.

LA - English

VL - 146

SP - 155640

CY - United States

PB - W.B. Saunders

SN - 0026-0495

SN - 1532-8600

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UR - http://www.elsevier.com/inca/publications/store/6/2/3/3/1/9/index.htt

DO - https://dx.doi.org/10.1016/j.metabol.2023.155640

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2025857628

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1016%2fj.metabol.2023.155640Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Jarvis&issn=0026-0495&title=Metabolism%3A+Clinical+and+Experimental&atitle=Continuous+glucose+monitoring+in+a+healthy+population%3A+understanding+the+post-prandial+glycemic+response+in+individuals+without+diabetes+mellitus&volume=146&issue=&spage=155640&epage=&date=2023&doi=10.1016%2Fj.metabol.2023.155640&pmid=37356796&sid=OVID:embase

60.

TY - JOUR

DB - Embase

AN - 2024255688

ID - 37119907 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37119907]

T1 - Helminth-derived biomacromolecules as therapeutic agents for treating inflammatory and infectious diseases: What lessons do we get from recent findings?

A1 - Chakraborty P.

A1 - Aravindhan V.

A1 - Mukherjee S.

AO - Mukherjee, Suprabhat; ORCID: https://orcid.org/0000-0002-5709-9190

Y1 - 2023//

N2 - Despite the tremendous progress in healthcare sectors, a number of life-threatening infectious, inflammatory, and autoimmune diseases are continuously challenging mankind throughout the globe. In this context, recent successes in utilizing helminth parasite-derived bioactive macromolecules viz. glycoproteins, enzymes, polysaccharides, lipids/lipoproteins, nucleic acids/nucleotides, and small organic molecules for treating various disorders primarily resulted from inflammation. Among the several parasites that infect humans, helminths (cestodes, nematodes, and trematodes) are known as efficient immune manipulators owing to their explicit ability to modulate and modify the innate and adaptive immune responses of humans. These molecules selectively bind to immune receptors on innate and adaptive immune cells and trigger multiple signaling pathways to elicit anti-inflammatory cytokines, expansion of alternatively activated macrophages, T-helper 2, and immunoregulatory T regulatory cell types to induce an anti-inflammatory milieu. Reduction of pro-inflammatory responses and repair of tissue damage by these anti-inflammatory mediators have been exploited for treating a number of autoimmune, allergic, and metabolic diseases. Herein, the potential and promises of different helminths/helminth-derived products as therapeutic agents in ameliorating immunopathology of different human diseases and their mechanistic insights of function at cell and molecular level alongside the molecular signaling cross-talks have been reviewed by incorporating up-to-date findings achieved in the field.Copyright © 2023 Elsevier B.V.

KW - Actinobacteria

KW - aging

KW - allergic airway inflammation

KW - Ancylostoma caninum

KW - asthma

KW - atherosclerosis

KW - autoimmune disease

KW - \*bacterial infection

KW - Bacteroides

KW - Bifidobacterium

KW - Brugia malayi

KW - chronic gastritis

KW - Clostridium leptum

KW - colitis

KW - dysbiosis

KW - Echinococcus

KW - Echinococcus multilocularis

KW - Escherichia coli

KW - Faecalibacterium prausnitzii

KW - filariasis

KW - Fusobacterium nucleatum

KW - gastrointestinal disease

KW - graft rejection

KW - Haemophilus influenzae

KW - helminth

KW - human

KW - hypersensitivity

KW - immune response

KW - immunopathology

KW - immunosenescence

KW - \*inflammation

KW - inflammatory bowel disease

KW - insulin resistance

KW - insulin sensitivity

KW - intestine flora

KW - macrophage migration

KW - mental disease

KW - metabolic disorder

KW - natural killer cell

KW - Nippostrongylus brasiliensis

KW - obesity

KW - Prevotella

KW - Proteobacteria

KW - review

KW - rheumatoid arthritis

KW - sepsis

KW - signal transduction

KW - systemic lupus erythematosus

KW - Trichinella spiralis

KW - Trichuris

KW - Trypanosoma cruzi

KW - upregulation

KW - gamma interferon/ec [Endogenous Compound]

KW - glycoprotein/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - nucleic acid/ec [Endogenous Compound]

KW - nucleotide/ec [Endogenous Compound]

KW - polysaccharide/ec [Endogenous Compound]

KW - stress activated protein kinase/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - International Journal of Biological Macromolecules

JA - Int. J. Biol. Macromol.

LA - English

VL - 241

SP - 124649

CY - Netherlands

PB - Elsevier B.V.

SN - 0141-8130

SN - 1879-0003

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UR - https://www.sciencedirect.com/journal/international-journal-of-biological-macromolecules

DO - https://dx.doi.org/10.1016/j.ijbiomac.2023.124649

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024255688

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1016%2fj.ijbiomac.2023.124649Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Chakraborty&issn=0141-8130&title=International+Journal+of+Biological+Macromolecules&atitle=Helminth-derived+biomacromolecules+as+therapeutic+agents+for+treating+inflammatory+and+infectious+diseases%3A+What+lessons+do+we+get+from+recent+findings%3F&volume=241&issue=&spage=124649&epage=&date=2023&doi=10.1016%2Fj.ijbiomac.2023.124649&pmid=37119907&sid=OVID:embase

61.

TY - JOUR

DB - Embase

AN - 2025503867

T1 - Microbiota and probiotics: Chances and challenges - A symposium report

A1 - Ruxton C.H.S.

A1 - Kajita C.

A1 - Rocca P.

A1 - Pot B.

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Y1 - 2023//

N2 - The 10th International Yakult Symposium was held in Milan, Italy, on 13-14 October 2022. Two keynote lectures covered the crewed journey to space and its implications for the human microbiome, and how current regulatory systems can be adapted and updated to ensure the safety of microorganisms used as probiotics or food processing ingredients. The remaining lectures were split into sections entitled Chances and Challenges. The Chances section explored opportunities for the science of probiotics and fermented foods to contribute to diverse areas of health such as irritable bowel syndrome, major depression, Parkinson's disease, immune dysfunction, infant colic, intensive care, respiratory infections, and promoting healthy longevity. The Challenges section included selecting appropriate clinical trial participants and methodologies to minimise heterogeneity in responses, how to view probiotics in the context of One Health, adapting regulatory frameworks, and understanding how substances of bacterial origin can cross the blood-brain barrier. The symposium provided evidence from cutting-edge research that gut eubiosis is vital for human health and, like space, the microbiota deserves further exploration of its vast potential.Copyright © The Author(s), 2023. Published by Cambridge University Press on behalf of The Nutrition Society.

KW - abdominal pain

KW - Actinobacteria

KW - aging

KW - asthma

KW - Bacteroidaceae

KW - Bacteroides

KW - Bifidobacterium bifidum

KW - Bifidobacterium longum subsp. infantis

KW - bloating

KW - blood brain barrier

KW - cardiovascular mortality

KW - CD8+ T lymphocyte

KW - decision tree

KW - depression

KW - diaphragm movement

KW - dietary compliance

KW - dysbiosis

KW - dyslipidemia

KW - endotoxemia

KW - environmental factor

KW - Escherichia coli

KW - Faecalibacterium

KW - fecal microbiota transplantation

KW - feces analysis

KW - feces microflora

KW - fermentation

KW - \*fermented product

KW - food processing

KW - gastrointestinal tract

KW - Helicobacter pylori

KW - human

KW - hypothalamus hypophysis adrenal system

KW - immune response

KW - infantile colic

KW - inflammatory bowel disease

KW - intensive care

KW - intestine flora

KW - irritable colon

KW - Lactobacillus acidophilus

KW - Lactobacillus brevis

KW - Lactobacillus casei

KW - Lactobacillus paracasei

KW - machine learning

KW - major depression

KW - metabolic syndrome X

KW - metabolomics

KW - metagenomics

KW - microbial community

KW - microbial diversity

KW - \*microflora

KW - microglia

KW - nonhuman

KW - oxidative stress

KW - Parkinson disease

KW - phagocytosis

KW - phylogeny

KW - physical activity

KW - Prevotella

KW - Proteobacteria

KW - public health

KW - respiratory tract infection

KW - review

KW - risk assessment

KW - risk factor

KW - Ruminococcaceae

KW - Ruminococcus

KW - sepsis

KW - seroconversion

KW - ulcerative colitis

KW - xenobiotic metabolism

KW - fructan

KW - hydrocortisone/ec [Endogenous Compound]

KW - isoflavone

KW - lipopolysaccharide/ec [Endogenous Compound]

KW - \*probiotic agent

KW - RNA 16S/ec [Endogenous Compound]

JF - Gut Microbiome

JA - Gut. Microbiome.

LA - English

VL - 4

SP - e6

CY - United Kingdom

PB - Cambridge University Press

SN - 2632-2897 (electronic)

SN - 2632-2897

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UR - https://www.cambridge.org/core/journals/gut-microbiome/information/about-this-journal

DO - https://dx.doi.org/10.1017/gmb.2023.4

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2025503867

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1017%2fgmb.2023.4Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ruxton&issn=2632-2897&title=Gut+Microbiome&atitle=Microbiota+and+probiotics%3A+Chances+and+challenges+-+A+symposium+report&volume=4&issue=&spage=e6&epage=&date=2023&doi=10.1017%2Fgmb.2023.4&pmid=&sid=OVID:embase

62.

TY - JOUR

DB - Embase

AN - 2024044778

T1 - The Spectrum of Extraglandular Manifestations in Primary Sjogren's Syndrome

A1 - Mihai A.

A1 - Caruntu C.

A1 - Jurcut C.

A1 - Blajut F.C.

A1 - Casian M.

A1 - Opris-Belinski D.

A1 - Ionescu R.

A1 - Caruntu A.

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Y1 - 2023//

N2 - Extraglandular manifestations (EGMs) in primary Sjogren's syndrome (pSS) represent the clinical expression of the systemic involvement in this disease. EGMs are characterized by a wide heterogeneity; virtually any organ or system can be affected, with various degrees of dysfunction. The existing gaps of knowledge in this complex domain of extraglandular extension in pSS need to be overcome in order to increase the diagnostic accuracy of EGMs in pSS. The timely identification of EGMs, as early as from subclinical stages, can be facilitated using highly specific biomarkers, thus preventing decompensated disease and severe complications. To date, there is no general consensus on the diagnostic criteria for the wide range of extraglandular involvement in pSS, which associates important underdiagnosing of EGMs, subsequent undertreatment and progression to severe organ dysfunction in these patients. This review article presents the most recent basic and clinical science research conducted to investigate pathogenic mechanisms leading to EGMs in pSS patients. In addition, it presents the current diagnostic and treatment recommendations and the trends for future therapeutic strategies based on personalized treatment, as well as the latest research in the field of diagnostic and prognostic biomarkers for extraglandular involvement in pSS.Copyright © 2023 by the authors.

KW - abdominal pain

KW - anaphylactoid purpura

KW - annular erythema

KW - apoptosis

KW - arterial wall thickness

KW - arthralgia

KW - autoimmune thyroiditis

KW - bronchiectasis

KW - CD4+ T lymphocyte

KW - celiac disease

KW - cell infiltration

KW - cell survival

KW - cholestasis

KW - cholinergic transmission

KW - chronic fatigue syndrome

KW - complement activation

KW - cryoglobulinemia

KW - cryotherapy

KW - cytokine production

KW - depression

KW - diagnostic accuracy

KW - disease activity

KW - disease duration

KW - disease severity

KW - dyspepsia

KW - dyspnea

KW - echocardiography

KW - echography

KW - endothelial progenitor cell

KW - epistaxis

KW - erythema multiforme

KW - erythema nodosum

KW - esophagography

KW - gastroesophageal reflux

KW - gene expression

KW - genetic screening

KW - hearing impairment

KW - histopathology

KW - human

KW - Human T-lymphotropic virus 1

KW - humoral immunity

KW - hypertension

KW - hypokalemia

KW - hypotension

KW - hypothyroidism

KW - immune response

KW - immunoglobulin deficiency

KW - immunosuppressive treatment

KW - innate immunity

KW - interstitial lung disease

KW - interstitial nephritis

KW - interstitial pneumonia

KW - intestine flora

KW - intestine infarction

KW - kidney distal tubule

KW - leukocytoclastic vasculitis

KW - lichen planus

KW - liver cirrhosis

KW - lung artery pressure

KW - lung biopsy

KW - lung lavage

KW - lymphocytic infiltration

KW - marginal zone lymphoma

KW - metabolic acidosis

KW - metacarpophalangeal joint

KW - multiple myeloma

KW - muscle weakness

KW - myelooptic neuropathy

KW - myofibroblast

KW - nephrotic syndrome

KW - neuropathic pain

KW - neuropsychological assessment

KW - nuclear magnetic resonance imaging

KW - organ systems

KW - pericardial effusion

KW - platelet lymphocyte ratio

KW - positron emission tomography

KW - proteinuria

KW - psoriasis

KW - pustule

KW - pustulosis

KW - quality of life

KW - regulatory B lymphocyte

KW - regulatory T lymphocyte

KW - review

KW - scoring system

KW - sensorimotor neuropathy

KW - \*Sjoegren syndrome

KW - subcorneal pustular dermatosis

KW - synoviocyte

KW - synovium

KW - \*systemic lupus erythematosus

KW - T cell lymphoma

KW - T lymphocyte

KW - tachycardia

KW - Th1 cell

KW - Th17 cell

KW - Th2 cell

KW - trigeminus neuralgia

KW - tumor associated leukocyte

KW - tumor microenvironment

KW - upregulation

KW - vascular smooth muscle cell

KW - vitiligo

KW - antinuclear antibody

KW - azathioprine

KW - biological marker

KW - calgranulin

KW - calreticulin

KW - cladribine

KW - clomipramine

KW - clusterin

KW - creatine kinase/ec [Endogenous Compound]

KW - creatinine/ec [Endogenous Compound]

KW - cryoglobulin

KW - cyclophosphamide

KW - cyclosporine

KW - doxorubicin

KW - duloxetine

KW - fludarabine

KW - gabapentin

KW - immunoglobulin G/ec [Endogenous Compound]

KW - interleukin 13/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - leflunomide

KW - leukocyte elastase/ec [Endogenous Compound]

KW - methotrexate

KW - methylprednisolone

KW - neutrophil gelatinase associated lipocalin

KW - nivolumab

KW - prednisone

KW - rituximab

KW - salazosulfapyridine

KW - tacrolimus

KW - transcriptome/ec [Endogenous Compound]

KW - triamcinolone

KW - troponin

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - venlafaxine

KW - vincristine

JF - Journal of Personalized Medicine

JA - J. Pers. Med.

LA - English

VL - 13

IS - 6

SP - 961

CY - Switzerland

PB - MDPI

SN - 2075-4426 (electronic)

SN - 2075-4426

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UR - http://www.mdpi.com/journal/jpm

DO - https://dx.doi.org/10.3390/jpm13060961

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024044778

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3390%2fjpm13060961Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mihai&issn=2075-4426&title=Journal+of+Personalized+Medicine&atitle=The+Spectrum+of+Extraglandular+Manifestations+in+Primary+Sjogren%27s+Syndrome&volume=13&issue=6&spage=961&epage=&date=2023&doi=10.3390%2Fjpm13060961&pmid=&sid=OVID:embase

63.

TY - JOUR

DB - Embase

AN - 2014066175

ID - 34237237 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34237237]

T1 - Gluteal Necrotizing Soft Tissue Infection and Hip Osteomyelitis due to Candida Glabrata

A1 - Henry R.

A1 - McGillen P.

A1 - Nassiri N.

A1 - Asanad K.

A1 - Matsushima K.

A1 - Inaba K.

A1 - Clark D.

Y1 - 2023//

N2 - Background: Necrotizing soft tissue infection (NSTI) is a rapidly progressive and often fatal infection of the soft tissue. Classically, it is attributed to bacterial infection and immunocompromised patients are particularly vulnerable. However, NSTI due to fungal infection rarely does occur, including from Candida species, and can pose a diagnostic challenge for unfamiliar providers. Expedient clinical recognition, surgical debridement, fungal tissue culture, and initiation of antifungal therapy are key. Case Presentation: We report a 39-year-old obese male with long-standing history of poorly controlled diabetes who presented to a community hospital, noted to have NSTI of the sacrum, bilateral buttocks, and left hip, and was treated only with antibiotics. After transfer to an academic center, the patient underwent aggressive debridement and tissue diagnosis of Candida glabrata NSTI was made. He received broad-spectrum antibiotic and antifungal therapy for several months. Over the course of 4 months, his infection was cleared, and his large tissue defects were reconstructed with rotation flaps and the patient was discharged home. Conclusion(s): Fungal NSTI is a rare entity, especially when due to Candida species. It can be exceedingly difficult to diagnose and manage, as these patients may suffer higher mortality than those with NSTI due to bacteria. A high index of suspicion for the entity, rapid debridement, intraoperative tissue culture, and treatment with appropriate antifungal therapy offers the greatest chance of survival.Copyright © The Author(s) 2021.

KW - abscess drainage

KW - acidemia/di [Diagnosis]

KW - adult

KW - anuria/di [Diagnosis]

KW - article

KW - \*Candida glabrata

KW - \*candidiasis/di [Diagnosis]

KW - case report

KW - clinical article

KW - colostomy

KW - computer assisted tomography

KW - creatine kinase blood level

KW - debridement

KW - diabetes mellitus

KW - human

KW - human cell

KW - human tissue

KW - hypotension

KW - incision

KW - intensive care unit

KW - intestine flora

KW - kidney failure/co [Complication]

KW - kidney failure/di [Diagnosis]

KW - lactate blood level

KW - leukocyte count

KW - leukocytosis/di [Diagnosis]

KW - male

KW - mental disease

KW - morbid obesity

KW - multiple organ failure/co [Complication]

KW - multiple organ failure/di [Diagnosis]

KW - \*osteomyelitis/di [Diagnosis]

KW - \*osteomyelitis/su [Surgery]

KW - perianal abscess/dt [Drug Therapy]

KW - perianal abscess/su [Surgery]

KW - perineal pain

KW - septic shock/di [Diagnosis]

KW - soft tissue defect/su [Surgery]

KW - \*soft tissue infection/di [Diagnosis]

KW - \*soft tissue infection/dt [Drug Therapy]

KW - tachycardia/di [Diagnosis]

KW - tissue flap

KW - tissue graft

KW - tissue necrosis/di [Diagnosis]

KW - tissue necrosis/dt [Drug Therapy]

KW - tissue necrosis/su [Surgery]

KW - ulcer/di [Diagnosis]

KW - vacuum assisted closure

KW - antibiotic agent/dt [Drug Therapy]

KW - antibiotic agent/po [Oral Drug Administration]

KW - antifungal agent

KW - clindamycin/cb [Drug Combination]

KW - clindamycin/dt [Drug Therapy]

KW - creatine kinase/ec [Endogenous Compound]

KW - fluconazole/cb [Drug Combination]

KW - fluconazole/dt [Drug Therapy]

KW - hypertensive factor

KW - lactic acid/ec [Endogenous Compound]

KW - linezolid/cb [Drug Combination]

KW - linezolid/dt [Drug Therapy]

KW - micafungin/dt [Drug Therapy]

KW - piperacillin plus tazobactam/cb [Drug Combination]

KW - piperacillin plus tazobactam/dt [Drug Therapy]

KW - vancomycin/cb [Drug Combination]

KW - vancomycin/dt [Drug Therapy]

XT - perianal abscess / drug therapy / linezolid

XT - perianal abscess / drug therapy / piperacillin plus tazobactam

XT - soft tissue infection / drug therapy / antibiotic agent

XT - soft tissue infection / drug therapy / clindamycin

XT - soft tissue infection / drug therapy / fluconazole

XT - soft tissue infection / drug therapy / micafungin

XT - soft tissue infection / drug therapy / piperacillin plus tazobactam

XT - soft tissue infection / drug therapy / vancomycin

XT - tissue necrosis / drug therapy / antibiotic agent

XT - tissue necrosis / drug therapy / clindamycin

XT - tissue necrosis / drug therapy / fluconazole

XT - tissue necrosis / drug therapy / micafungin

XT - tissue necrosis / drug therapy / piperacillin plus tazobactam

XT - tissue necrosis / drug therapy / vancomycin

XT - antibiotic agent / drug therapy / soft tissue infection

XT - antibiotic agent / drug therapy / tissue necrosis

XT - clindamycin / drug combination / fluconazole

XT - clindamycin / drug combination / piperacillin plus tazobactam

XT - clindamycin / drug combination / vancomycin

XT - clindamycin / drug therapy / soft tissue infection

XT - clindamycin / drug therapy / tissue necrosis

XT - fluconazole / drug combination / clindamycin

XT - fluconazole / drug combination / piperacillin plus tazobactam

XT - fluconazole / drug combination / vancomycin

XT - fluconazole / drug therapy / soft tissue infection

XT - fluconazole / drug therapy / tissue necrosis

XT - linezolid / drug combination / piperacillin plus tazobactam

XT - linezolid / drug therapy / perianal abscess

XT - micafungin / drug therapy / soft tissue infection

XT - micafungin / drug therapy / tissue necrosis

XT - piperacillin plus tazobactam / drug combination / clindamycin

XT - piperacillin plus tazobactam / drug combination / fluconazole

XT - piperacillin plus tazobactam / drug combination / linezolid

XT - piperacillin plus tazobactam / drug combination / vancomycin

XT - piperacillin plus tazobactam / drug therapy / perianal abscess

XT - piperacillin plus tazobactam / drug therapy / soft tissue infection

XT - piperacillin plus tazobactam / drug therapy / tissue necrosis

XT - vancomycin / drug combination / clindamycin

XT - vancomycin / drug combination / fluconazole

XT - vancomycin / drug combination / piperacillin plus tazobactam

XT - vancomycin / drug therapy / soft tissue infection

XT - vancomycin / drug therapy / tissue necrosis

JF - American Surgeon

JA - Am. Surg.

LA - English

VL - 89

IS - 5

SP - 2101

EP - 2104

CY - United States

PB - SAGE Publications Inc.

SN - 0003-1348

SN - 1555-9823

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UR - https://journals.sagepub.com/home/ASU

DO - https://dx.doi.org/10.1177/00031348211031856

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2014066175

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1177%2f00031348211031856Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Henry&issn=0003-1348&title=American+Surgeon&atitle=Gluteal+Necrotizing+Soft+Tissue+Infection+and+Hip+Osteomyelitis+due+to+Candida+Glabrata&volume=89&issue=5&spage=2101&epage=2104&date=2023&doi=10.1177%2F00031348211031856&pmid=34237237&sid=OVID:embase

64.

TY - JOUR

DB - Embase

AN - 2024011108

ID - 37365682 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37365682]

T1 - Lactobacillus salivarius and Lactobacillus gasseri supplementation reduces stress-induced sugar craving in mice

A1 - Nicol M.

A1 - Lahaye E.

A1 - El Mehdi M.

A1 - do Rego J.-L.

A1 - do Rego J.-C.

A1 - Fetissov S.O.

AO - Fetissov, Serguei O.; ORCID: https://orcid.org/0000-0002-2491-4945

Y1 - 2023//

N2 - Objective: Increased intake of sweets or sugar craving may occur in response to chronic stress representing a risk factor for development of eating disorders and obesity. However, no safe treatment of stress-induced sugar craving is available. In this study we analysed effects of two Lactobacillus strains on food and sucrose intake in mice before and during their exposure to a chronic mild stress (CMS). Research Methods & Procedures: C57Bl6 mice were gavaged daily for 27 days with a mix of L. salivarius (LS) LS7892 and L. gasseri (LG) LG6410 strains or with 0.9% NaCl as a control. Following 10 days of gavage, mice were individually placed into the Modular Phenotypic cages, and after 7 days of acclimation were exposed to a CMS model for 10 days. Food, water and 2% sucrose intakes as well as meal pattern were monitored. Anxiety and depressive-like behaviour were analysed by standard tests. Result(s): Exposure of mice to CMS was accompanied by increased size of sucrose intake in the control group likely reflecting the stress-induced sugar craving. A consistent, about 20% lower total sucrose intake, was observed in the Lactobacilli-treated group during stress which was mainly due to a reduced number of intakes. Lactobacilli treatment also modified the meal pattern before and during the CMS, showing a decrease of meal number and an increase of meal size with a tendency of reduced total daily food intake. Mild anti-depressive behavioural effects of the Lactobacilli mix were also present. Conclusion(s): Supplementation of mice with LS LS7892 and LG LG6410 decreases sugar consumption suggesting a potential utility of these strains against stress-induced sugar craving.Copyright © 2023 The Authors. European Eating Disorders Review published by Eating Disorders Association and John Wiley & Sons Ltd.

KW - acclimatization

KW - animal experiment

KW - animal model

KW - anxiety

KW - article

KW - bacterial strain

KW - \*brain

KW - C57BL 6 mouse

KW - controlled study

KW - enteric feeding

KW - \*feeding behavior

KW - \*fluid intake

KW - food intake

KW - \*intestine flora

KW - \*Lactobacillus gasseri

KW - \*Lactobacillus salivarius

KW - male

KW - meal size

KW - mouse

KW - nonhuman

KW - \*physiological stress

KW - sugar intake

KW - \*sweet craving

KW - \*probiotic agent

KW - sodium chloride

KW - water

JF - European Eating Disorders Review

JA - Eur. Eating Disord. Rev.

LA - English

SP -

CY - United Kingdom

PB - John Wiley and Sons Ltd

SN - 1072-4133

SN - 1099-0968

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M1 - (do Rego, do Rego) University of Rouen Normandie, Inserm US51, CNRS UAR2026, Animal Behavioral Platform SCAC-HeRacLeS, Institute for Research and Innovation in Biomedicine (IRIB), Rouen, France

UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1099-0968

DO - https://dx.doi.org/10.1002/erv.3004

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024011108

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1002%2ferv.3004Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Nicol&issn=1072-4133&title=European+Eating+Disorders+Review&atitle=Lactobacillus+salivarius+and+Lactobacillus+gasseri+supplementation+reduces+stress-induced+sugar+craving+in+mice&volume=&issue=&spage=&epage=&date=2023&doi=10.1002%2Ferv.3004&pmid=37365682&sid=OVID:embase

65.

TY - JOUR

DB - Embase

AN - 2025204836

ID - 37228002 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37228002]

T1 - What's what in a pandemic? Virus, disease, and societal disaster must be differentiated

A1 - Gorbalenya A.E.

A1 - Perlman S.

Y1 - 2023//

N2 - Viruses, the diseases they can trigger, and the possible associated societal disaster represent different entities. To engage with the complexities of viral pandemics, we need to recognize each entity by using a distinctive name.Copyright © 2023 Gorbalenya, Perlman. This is an open access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

KW - acquired immune deficiency syndrome

KW - article

KW - asymptomatic coronavirus disease 2019/di [Diagnosis]

KW - awareness

KW - biomedicine

KW - comorbidity

KW - \*coronavirus disease 2019/di [Diagnosis]

KW - \*coronavirus disease 2019/dt [Drug Therapy]

KW - \*coronavirus disease 2019/ep [Epidemiology]

KW - \*coronavirus disease 2019/pc [Prevention]

KW - cultural factor

KW - death

KW - diagnostic procedure

KW - disaster

KW - disease association

KW - disease course

KW - distress syndrome

KW - drug bioavailability

KW - drug labeling

KW - drug targeting

KW - genetics

KW - geography

KW - health care policy

KW - human

KW - Human immunodeficiency virus 1

KW - immune response

KW - infection control

KW - intensive care unit

KW - journalism

KW - lockdown

KW - microbiome

KW - Middle East respiratory syndrome

KW - \*pandemic

KW - scientist

KW - severe acute respiratory syndrome

KW - Severe acute respiratory syndrome coronavirus 2

KW - social stigma

KW - teacher

KW - virology

KW - virome

KW - virus cell interaction

KW - virus replication

KW - virus transmission

KW - vulnerable population

KW - wellbeing

KW - anticoagulant agent/dt [Drug Therapy]

KW - antiinflammatory agent/dt [Drug Therapy]

KW - biological factor/ec [Endogenous Compound]

KW - host factor/ec [Endogenous Compound]

KW - SARS-CoV-2 vaccine/dt [Drug Therapy]

XT - coronavirus disease 2019 / drug therapy / anticoagulant agent

XT - coronavirus disease 2019 / drug therapy / antiinflammatory agent

XT - coronavirus disease 2019 / drug therapy / SARS-CoV-2 vaccine

XT - anticoagulant agent / drug therapy / coronavirus disease 2019

XT - antiinflammatory agent / drug therapy / coronavirus disease 2019

XT - SARS-CoV-2 vaccine / drug therapy / coronavirus disease 2019

JF - PLoS Biology

JA - PloS Biol.

LA - English

VL - 21

IS - 5

SP - e3002130

CY - United States

PB - Public Library of Science

SN - 1544-9173

SN - 1545-7885

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UR - https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.3002130

DO - https://dx.doi.org/10.1371/journal.pbio.3002130

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2025204836

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1371%2fjournal.pbio.3002130Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gorbalenya&issn=1544-9173&title=PLoS+Biology&atitle=What%27s+what+in+a+pandemic%3F+Virus%2C+disease%2C+and+societal+disaster+must+be+differentiated&volume=21&issue=5&spage=e3002130&epage=&date=2023&doi=10.1371%2Fjournal.pbio.3002130&pmid=37228002&sid=OVID:embase

66.

TY - JOUR

DB - Embase

AN - 2020560961

ID - 36481824 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36481824]

T1 - Involvement of Microbiome Gut-Brain Axis in Neuroprotective Effect of Quercetin in Mouse Model of Repeated Mild Traumatic Brain Injury

A1 - Balasubramanian R.

A1 - Bazaz M.R.

A1 - Pasam T.

A1 - Sharief N.

A1 - Velip L.

A1 - Samanthula G.

A1 - Dandekar M.P.

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Y1 - 2023//

N2 - Repeated mild traumatic brain injury (rmTBI) poses adversity in the form of neurological deficits. The ignition of long-term neurological aberrations post-TBI is appended with the microbiota gut-brain axis perturbation. Herein, we examined whether quercetin, which is anti-inflammatory and antioxidant flavonoid, serves as a prebiotic and modifies the compromised microbiome gut-brain axis in rmTBI mouse model. Male C57BL/6 mice were subjected to rmTBI for 7 times. The quercetin (50 mg/kg) was administered peroral from the day1 of first injury till 7 days post-injury. The neurobehavioral assessments were performed using return of righting reflex (ROR), rotarod, forced swimming test (FST), elevated zero maze (EZM), novel object recognition test (NORT), and Y-maze. Mice fecal samples, brains, and intestines were collected for molecular studies. Mice underwent rmTBI showed significant neurological deficits in ROR and rotarod test and also exhibited long-term neuropsychiatric aberrations like anxiety- and depression-like phenotypes, and cognitive deficits in EZM, FST, and Y-maze assays, respectively. Repeated peroral administration of quercetin ameliorated these neuropsychiatric problems. Quercetin treatment also restored the increased expression of GFAP and decreased expression of occludin and doublecortin in the frontal cortex and hippocampus of rmTBI mice. The altered levels of acetate and propionate, and microbial phylum abundance in fecal samples were also normalized in the quercetin-treated group. We also noted an improved intestinal permeability indicated by reduced villi rupture, blunting, and mucosal thinning in quercetin-treated mice. We suggest that the neuroprotective effect of quercetin may be mediated via remodeling of the microbiome gut-brain axis in rmTBI mouse model.Copyright © 2022, The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature.

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety disorder

KW - article

KW - \*brain-gut axis

KW - cognitive defect

KW - controlled study

KW - depression

KW - elevated zero maze test

KW - forced swim test

KW - frontal cortex

KW - \*intestine flora

KW - intestine mucosa permeability

KW - latent period

KW - male

KW - mouse

KW - \*neuroprotection

KW - nonhuman

KW - novel object recognition test

KW - phenotype

KW - resuscitation

KW - righting reflex test

KW - rotarod test

KW - \*traumatic brain injury/dt [Drug Therapy]

KW - Y-maze test

KW - acetic acid/ec [Endogenous Compound]

KW - doublecortin domain protein/ec [Endogenous Compound]

KW - glial fibrillary acidic protein/ec [Endogenous Compound]

KW - occludin/ec [Endogenous Compound]

KW - propionic acid/ec [Endogenous Compound]

KW - \*quercetin/dt [Drug Therapy]

KW - \*quercetin/po [Oral Drug Administration]

KW - \*quercetin/pd [Pharmacology]

KW - return of righting reflex

XT - traumatic brain injury / drug therapy / quercetin

XT - quercetin / drug therapy / traumatic brain injury

JF - NeuroMolecular Medicine

JA - NeuroMol. Med.

LA - English

VL - 25

IS - 2

SP - 242

EP - 254

CY - United States

PB - Springer

SN - 1535-1084

SN - 1559-1174

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C4 - Yarrow [India]

UR - https://www.springer.com/journal/12017

DO - https://dx.doi.org/10.1007/s12017-022-08732-z

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2020560961

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1007%2fs12017-022-08732-zLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Balasubramanian&issn=1535-1084&title=NeuroMolecular+Medicine&atitle=Involvement+of+Microbiome+Gut-Brain+Axis+in+Neuroprotective+Effect+of+Quercetin+in+Mouse+Model+of+Repeated+Mild+Traumatic+Brain+Injury&volume=25&issue=2&spage=242&epage=254&date=2023&doi=10.1007%2Fs12017-022-08732-z&pmid=36481824&sid=OVID:embase

67.

TY - JOUR

DB - Embase

AN - 2021574307

ID - 36763294 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36763294]

T1 - Butyrate: More Than a Short Chain Fatty Acid

A1 - Mohamed Elfadil O.

A1 - Mundi M.S.

A1 - Abdelmagid M.G.

A1 - Patel A.

A1 - Patel N.

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Y1 - 2023//

N2 - Purpose of Review: The mechanistic understanding of the importance and the potential benefits of the gut microbiome has exploded in potential roles in human health and disease. Short chain fatty acids (SCFAs), including butyrate, are one of the key metabolic end products that has been a major focus of microbiome understanding. This brief review aims to describe butyrate's relation to certain biological concepts and their clinical application. Recent Findings: Butyrate has reportedly been described as a potent pro-resolution molecule that has a significant role in maintaining gut immunity, supporting gut barrier function, regulation of histone deacetylase (HDAC), and numerous systemic roles. Further research is needed to explore potential benefits of adding SCFAs for patients receiving total parenteral nutrition. Summary: Butyrate plays several biological roles in intestinal epithelium anti-inflammatory pathways with clear benefits in numerous acute and chronic disease states and overall human health helping to maintain homeostasis.Copyright © 2023, The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature.

KW - acute pancreatitis

KW - anorexia nervosa

KW - antibacterial activity

KW - antimicrobial activity

KW - apoptosis

KW - atherosclerosis

KW - autophagosome

KW - brain degeneration

KW - breast cancer

KW - carcinogenesis

KW - CD4+ T lymphocyte

KW - cell differentiation

KW - cell proliferation

KW - cell survival

KW - childhood obesity

KW - chronic disease

KW - colorectal cancer

KW - cytotoxicity

KW - degenerative disease

KW - depression

KW - dietary fiber

KW - feces analysis

KW - gene expression

KW - histone acetylation

KW - homeostasis

KW - human

KW - hyperglycemia

KW - hyperlipidemia

KW - hypoxia

KW - immune response

KW - immunity

KW - inflammation

KW - inflammatory bowel disease

KW - insulin sensitivity

KW - \*intestine flora

KW - lipolysis

KW - liver injury

KW - LS174T cell line

KW - \*microbiome

KW - mucosal immunity

KW - obesity

KW - oxidative stress

KW - parenteral nutrition

KW - peritonitis

KW - physical activity

KW - prostate cancer

KW - review

KW - sepsis

KW - signal transduction

KW - Th2 cell

KW - Th9 cell

KW - total parenteral nutrition

KW - ulcerative colitis

KW - artemisinin

KW - \*butyric acid

KW - cytokine

KW - doxorubicin

KW - histone deacetylase

KW - interleukin 13

KW - interleukin 1beta

KW - interleukin 6

KW - interleukin 8

KW - lipopolysaccharide

KW - \*short chain fatty acid

KW - tumor necrosis factor

JF - Current Nutrition Reports

JA - Curr. Nutr. Rep.

LA - English

VL - 12

IS - 2

SP - 255

EP - 262

CY - United States

PB - Springer

SN - 2161-3311 (electronic)

SN - 2161-3311

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UR - https://www.springer.com/journal/13668

DO - https://dx.doi.org/10.1007/s13668-023-00461-4

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021574307

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1007%2fs13668-023-00461-4Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mohamed+Elfadil&issn=2161-3311&title=Current+Nutrition+Reports&atitle=Butyrate%3A+More+Than+a+Short+Chain+Fatty+Acid&volume=12&issue=2&spage=255&epage=262&date=2023&doi=10.1007%2Fs13668-023-00461-4&pmid=36763294&sid=OVID:embase

68.

TY - JOUR

DB - Embase

AN - 2021614696

ID - 36721963 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36721963]

T1 - Treatment of COVID-19 patients with a SARS-CoV-2-specific siRNA-peptide dendrimer formulation

A1 - Khaitov M.

A1 - Nikonova A.

A1 - Kofiadi I.

A1 - Shilovskiy I.

A1 - Smirnov V.

A1 - Elisytina O.

A1 - Maerle A.

A1 - Shatilov A.

A1 - Shatilova A.

A1 - Andreev S.

A1 - Sergeev I.

A1 - Trofimov D.

A1 - Latysheva T.

A1 - Ilyna N.

A1 - Martynov A.

A1 - Rabdano S.

A1 - Ruzanova E.

A1 - Savelev N.

A1 - Pletiukhina I.

A1 - Safi A.

A1 - Ratnikov V.

A1 - Gorelov V.

A1 - Kaschenko V.

A1 - Kucherenko N.

A1 - Umarova I.

A1 - Moskaleva S.

A1 - Fabrichnikov S.

A1 - Zuev O.

A1 - Pavlov N.

A1 - Kruchko D.

A1 - Berzin I.

A1 - Goryachev D.

A1 - Merkulov V.

A1 - Shipulin G.

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Y1 - 2023//

N2 - Background: Severe acute respiratory syndrome corona virus (SARS-CoV-2) infection frequently causes severe and prolonged disease but only few specific treatments are available. We aimed to investigate safety and efficacy of a SARS-CoV-2-specific siRNA-peptide dendrimer formulation MIR 19 (siR-7-EM/KK-46) targeting a conserved sequence in known SARS-CoV-2 variants for treatment of COVID-19. Method(s): We conducted an open-label, randomized, controlled multicenter phase II trial (NCT05184127) evaluating safety and efficacy of inhaled siR-7-EM/KK-46 (3.7 mg and 11.1 mg/day: low and high dose, respectively) in comparison with standard etiotropic drug treatment (control group) in patients hospitalized with moderate COVID-19 (N = 52 for each group). The primary endpoint was the time to clinical improvement according to predefined criteria within 14 days of randomization. Result(s): Patients from the low-dose group achieved the primary endpoint defined by simultaneous achievement of relief of fever, normalization of respiratory rate, reduction of coughing, and oxygen saturation of >95% for 48 h significantly earlier (median 6 days; 95% confidence interval [CI]: 5-7, HR 1.75, p =.0005) than patients from the control group (8 days; 95% CI: 7-10). No significant clinical efficacy was observed for the high-dose group. Adverse events were reported in 26 (50.00%), 25 (48.08%), and 28 (53.85%) patients from the low-, high-dose and control group, respectively. None of them were associated with siR-7-EM/KK-46. Conclusion(s): siR-7-EM/KK-46, a SARS-CoV-2-specific siRNA-peptide dendrimer formulation is safe, well tolerated and significantly reduces time to clinical improvement in patients hospitalized with moderate COVID-19 compared to standard therapy in a randomized controlled trial.Copyright © 2023 The Authors. Allergy published by European Academy of Allergy and Clinical Immunology and John Wiley & Sons Ltd.

KW - adult

KW - anxiety disorder/si [Side Effect]

KW - article

KW - bradycardia/si [Side Effect]

KW - breathing rate

KW - cerumen impaction/si [Side Effect]

KW - cholelithiasis/si [Side Effect]

KW - chorioretinopathy/si [Side Effect]

KW - chronic pancreatitis/si [Side Effect]

KW - cohort analysis

KW - comparative effectiveness

KW - conserved sequence

KW - constipation/si [Side Effect]

KW - controlled study

KW - \*coronavirus disease 2019/dt [Drug Therapy]

KW - coughing

KW - cytolytic hepatitis/si [Side Effect]

KW - diabetes mellitus/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - drug dose comparison

KW - drug efficacy

KW - drug formulation

KW - drug hypersensitivity/si [Side Effect]

KW - drug megadose

KW - drug safety

KW - drug targeting

KW - dysbiosis/si [Side Effect]

KW - dyspepsia/si [Side Effect]

KW - enterocolitis/si [Side Effect]

KW - epistaxis/si [Side Effect]

KW - female

KW - fever

KW - heart surgery

KW - heart ventricle extrasystole/si [Side Effect]

KW - hemoptysis/si [Side Effect]

KW - hernioplasty

KW - hospital patient

KW - human

KW - human tissue

KW - hypertension/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - low drug dose

KW - major clinical study

KW - male

KW - multicenter study

KW - nausea/si [Side Effect]

KW - nonhuman

KW - nose obstruction/si [Side Effect]

KW - open study

KW - oropharynx pain/si [Side Effect]

KW - oxygen saturation

KW - patent ductus arteriosus/su [Surgery]

KW - phase 2 clinical trial

KW - prostate hypertrophy/si [Side Effect]

KW - randomized controlled trial

KW - \*Severe acute respiratory syndrome coronavirus 2

KW - side effect/si [Side Effect]

KW - single drug dose

KW - sinus tachycardia/si [Side Effect]

KW - sleep disorder/si [Side Effect]

KW - spinal pain/si [Side Effect]

KW - stomatitis/si [Side Effect]

KW - supraventricular premature beat/si [Side Effect]

KW - tachycardia/si [Side Effect]

KW - thorax pain/si [Side Effect]

KW - toxic hepatitis/si [Side Effect]

KW - umbilical hernia/su [Surgery]

KW - virus pneumonia/si [Side Effect]

KW - virus strain

KW - vomiting/si [Side Effect]

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - alpha2b interferon/cm [Drug Comparison]

KW - alpha2b interferon/dt [Drug Therapy]

KW - aminotransferase/ec [Endogenous Compound]

KW - antibiotic agent/dt [Drug Therapy]

KW - anticoagulant agent/dt [Drug Therapy]

KW - baricitinib/dt [Drug Therapy]

KW - C reactive protein/ec [Endogenous Compound]

KW - corticosteroid/dt [Drug Therapy]

KW - \*dendrimer

KW - favipiravir/cm [Drug Comparison]

KW - favipiravir/dt [Drug Therapy]

KW - liver enzyme/ec [Endogenous Compound]

KW - monoclonal antibody/dt [Drug Therapy]

KW - nonsteroid antiinflammatory agent/dt [Drug Therapy]

KW - SARS-CoV-2 convalescent plasma/cm [Drug Comparison]

KW - SARS-CoV-2 convalescent plasma/dt [Drug Therapy]

KW - \*small interfering RNA/ae [Adverse Drug Reaction]

KW - \*small interfering RNA/ct [Clinical Trial]

KW - \*small interfering RNA/cm [Drug Comparison]

KW - \*small interfering RNA/do [Drug Dose]

KW - \*small interfering RNA/dt [Drug Therapy]

KW - \*small interfering RNA/ih [Inhalational Drug Administration]

KW - tofacitinib/dt [Drug Therapy]

KW - unclassified drug

KW - arterial stent

KW - face mask

KW - inhaler

KW - PCR assay kit

KW - \*miR 19/ae [Adverse Drug Reaction]

KW - \*miR 19/ct [Clinical Trial]

KW - \*miR 19/cm [Drug Comparison]

KW - \*miR 19/do [Drug Dose]

KW - \*miR 19/dt [Drug Therapy]

KW - \*miR 19/ih [Inhalational Drug Administration]

KW - \*peptide dendrimer

KW - UN-233

XT - anxiety disorder / side effect / mir 19

XT - anxiety disorder / side effect / small interfering RNA

XT - bradycardia / side effect / mir 19

XT - bradycardia / side effect / small interfering RNA

XT - cerumen impaction / side effect / mir 19

XT - cerumen impaction / side effect / small interfering RNA

XT - cholelithiasis / side effect / mir 19

XT - cholelithiasis / side effect / small interfering RNA

XT - chorioretinopathy / side effect / mir 19

XT - chorioretinopathy / side effect / small interfering RNA

XT - chronic pancreatitis / side effect / mir 19

XT - chronic pancreatitis / side effect / small interfering RNA

XT - constipation / side effect / mir 19

XT - constipation / side effect / small interfering RNA

XT - coronavirus disease 2019 / drug therapy / alpha2b interferon

XT - coronavirus disease 2019 / drug therapy / antibiotic agent

XT - coronavirus disease 2019 / drug therapy / anticoagulant agent

XT - coronavirus disease 2019 / drug therapy / baricitinib

XT - coronavirus disease 2019 / drug therapy / corticosteroid

XT - coronavirus disease 2019 / drug therapy / favipiravir

XT - coronavirus disease 2019 / drug therapy / mir 19

XT - coronavirus disease 2019 / drug therapy / monoclonal antibody

XT - coronavirus disease 2019 / drug therapy / nonsteroid antiinflammatory agent

XT - coronavirus disease 2019 / drug therapy / SARS-CoV-2 convalescent plasma

XT - coronavirus disease 2019 / drug therapy / small interfering RNA

XT - coronavirus disease 2019 / drug therapy / tofacitinib

XT - cytolytic hepatitis / side effect / mir 19

XT - cytolytic hepatitis / side effect / small interfering RNA

XT - diabetes mellitus / side effect / mir 19

XT - diabetes mellitus / side effect / small interfering RNA

XT - diarrhea / side effect / mir 19

XT - diarrhea / side effect / small interfering RNA

XT - drug hypersensitivity / side effect / mir 19

XT - drug hypersensitivity / side effect / small interfering RNA

XT - dysbiosis / side effect / mir 19

XT - dysbiosis / side effect / small interfering RNA

XT - dyspepsia / side effect / mir 19

XT - dyspepsia / side effect / small interfering RNA

XT - enterocolitis / side effect / mir 19

XT - enterocolitis / side effect / small interfering RNA

XT - epistaxis / side effect / mir 19

XT - epistaxis / side effect / small interfering RNA

XT - heart ventricle extrasystole / side effect / mir 19

XT - heart ventricle extrasystole / side effect / small interfering RNA

XT - hemoptysis / side effect / mir 19

XT - hemoptysis / side effect / small interfering RNA

XT - hypertension / side effect / mir 19

XT - hypertension / side effect / small interfering RNA

XT - insomnia / side effect / mir 19

XT - insomnia / side effect / small interfering RNA

XT - nausea / side effect / mir 19

XT - nausea / side effect / small interfering RNA

XT - nose obstruction / side effect / mir 19

XT - nose obstruction / side effect / small interfering RNA

XT - oropharynx pain / side effect / mir 19

XT - oropharynx pain / side effect / small interfering RNA

XT - prostate hypertrophy / side effect / mir 19

XT - prostate hypertrophy / side effect / small interfering RNA

XT - side effect / side effect / mir 19

XT - side effect / side effect / small interfering RNA

XT - sinus tachycardia / side effect / mir 19

XT - sinus tachycardia / side effect / small interfering RNA

XT - sleep disorder / side effect / mir 19

XT - sleep disorder / side effect / small interfering RNA

XT - spinal pain / side effect / mir 19

XT - spinal pain / side effect / small interfering RNA

XT - stomatitis / side effect / mir 19

XT - stomatitis / side effect / small interfering RNA

XT - supraventricular premature beat / side effect / mir 19

XT - supraventricular premature beat / side effect / small interfering RNA

XT - tachycardia / side effect / mir 19

XT - tachycardia / side effect / small interfering RNA

XT - thorax pain / side effect / mir 19

XT - thorax pain / side effect / small interfering RNA

XT - toxic hepatitis / side effect / mir 19

XT - toxic hepatitis / side effect / small interfering RNA

XT - virus pneumonia / side effect / mir 19

XT - virus pneumonia / side effect / small interfering RNA

XT - vomiting / side effect / mir 19

XT - vomiting / side effect / small interfering RNA

XT - alpha2b interferon / drug comparison / mir 19

XT - alpha2b interferon / drug comparison / small interfering RNA

XT - alpha2b interferon / drug therapy / coronavirus disease 2019

XT - antibiotic agent / drug therapy / coronavirus disease 2019

XT - anticoagulant agent / drug therapy / coronavirus disease 2019

XT - baricitinib / drug therapy / coronavirus disease 2019

XT - corticosteroid / drug therapy / coronavirus disease 2019

XT - favipiravir / drug comparison / mir 19

XT - favipiravir / drug comparison / small interfering RNA

XT - favipiravir / drug therapy / coronavirus disease 2019

XT - mir 19 / adverse drug reaction / anxiety disorder

XT - mir 19 / adverse drug reaction / bradycardia

XT - mir 19 / adverse drug reaction / cerumen impaction

XT - mir 19 / adverse drug reaction / cholelithiasis

XT - mir 19 / adverse drug reaction / chorioretinopathy

XT - mir 19 / adverse drug reaction / chronic pancreatitis

XT - mir 19 / adverse drug reaction / constipation

XT - mir 19 / adverse drug reaction / cytolytic hepatitis

XT - mir 19 / adverse drug reaction / diabetes mellitus

XT - mir 19 / adverse drug reaction / diarrhea

XT - mir 19 / adverse drug reaction / drug hypersensitivity

XT - mir 19 / adverse drug reaction / dysbiosis

XT - mir 19 / adverse drug reaction / dyspepsia

XT - mir 19 / adverse drug reaction / enterocolitis

XT - mir 19 / adverse drug reaction / epistaxis

XT - mir 19 / adverse drug reaction / heart ventricle extrasystole

XT - mir 19 / adverse drug reaction / hemoptysis

XT - mir 19 / adverse drug reaction / hypertension

XT - mir 19 / adverse drug reaction / insomnia

XT - mir 19 / adverse drug reaction / nausea

XT - mir 19 / adverse drug reaction / nose obstruction

XT - mir 19 / adverse drug reaction / oropharynx pain

XT - mir 19 / adverse drug reaction / prostate hypertrophy

XT - mir 19 / adverse drug reaction / side effect

XT - mir 19 / adverse drug reaction / sinus tachycardia

XT - mir 19 / adverse drug reaction / sleep disorder

XT - mir 19 / adverse drug reaction / spinal pain

XT - mir 19 / adverse drug reaction / stomatitis

XT - mir 19 / adverse drug reaction / supraventricular premature beat

XT - mir 19 / adverse drug reaction / tachycardia

XT - mir 19 / adverse drug reaction / thorax pain

XT - mir 19 / adverse drug reaction / toxic hepatitis

XT - mir 19 / adverse drug reaction / virus pneumonia

XT - mir 19 / adverse drug reaction / vomiting

XT - mir 19 / drug comparison / alpha2b interferon

XT - mir 19 / drug comparison / favipiravir

XT - mir 19 / drug comparison / SARS-CoV-2 convalescent plasma

XT - mir 19 / drug therapy / coronavirus disease 2019

XT - monoclonal antibody / drug therapy / coronavirus disease 2019

XT - nonsteroid antiinflammatory agent / drug therapy / coronavirus disease 2019

XT - SARS-CoV-2 convalescent plasma / drug comparison / mir 19

XT - SARS-CoV-2 convalescent plasma / drug comparison / small interfering RNA

XT - SARS-CoV-2 convalescent plasma / drug therapy / coronavirus disease 2019

XT - small interfering RNA / adverse drug reaction / anxiety disorder

XT - small interfering RNA / adverse drug reaction / bradycardia

XT - small interfering RNA / adverse drug reaction / cerumen impaction

XT - small interfering RNA / adverse drug reaction / cholelithiasis

XT - small interfering RNA / adverse drug reaction / chorioretinopathy

XT - small interfering RNA / adverse drug reaction / chronic pancreatitis

XT - small interfering RNA / adverse drug reaction / constipation

XT - small interfering RNA / adverse drug reaction / cytolytic hepatitis

XT - small interfering RNA / adverse drug reaction / diabetes mellitus

XT - small interfering RNA / adverse drug reaction / diarrhea

XT - small interfering RNA / adverse drug reaction / drug hypersensitivity

XT - small interfering RNA / adverse drug reaction / dysbiosis

XT - small interfering RNA / adverse drug reaction / dyspepsia

XT - small interfering RNA / adverse drug reaction / enterocolitis

XT - small interfering RNA / adverse drug reaction / epistaxis

XT - small interfering RNA / adverse drug reaction / heart ventricle extrasystole

XT - small interfering RNA / adverse drug reaction / hemoptysis

XT - small interfering RNA / adverse drug reaction / hypertension

XT - small interfering RNA / adverse drug reaction / insomnia

XT - small interfering RNA / adverse drug reaction / nausea

XT - small interfering RNA / adverse drug reaction / nose obstruction

XT - small interfering RNA / adverse drug reaction / oropharynx pain

XT - small interfering RNA / adverse drug reaction / prostate hypertrophy

XT - small interfering RNA / adverse drug reaction / side effect

XT - small interfering RNA / adverse drug reaction / sinus tachycardia

XT - small interfering RNA / adverse drug reaction / sleep disorder

XT - small interfering RNA / adverse drug reaction / spinal pain

XT - small interfering RNA / adverse drug reaction / stomatitis

XT - small interfering RNA / adverse drug reaction / supraventricular premature beat

XT - small interfering RNA / adverse drug reaction / tachycardia

XT - small interfering RNA / adverse drug reaction / thorax pain

XT - small interfering RNA / adverse drug reaction / toxic hepatitis

XT - small interfering RNA / adverse drug reaction / virus pneumonia

XT - small interfering RNA / adverse drug reaction / vomiting

XT - small interfering RNA / drug comparison / alpha2b interferon

XT - small interfering RNA / drug comparison / favipiravir

XT - small interfering RNA / drug comparison / SARS-CoV-2 convalescent plasma

XT - small interfering RNA / drug therapy / coronavirus disease 2019

XT - tofacitinib / drug therapy / coronavirus disease 2019

JF - Allergy: European Journal of Allergy and Clinical Immunology

JA - Allergy Eur. J. Allergy Clin. Immunol.

LA - English

VL - 78

IS - 6

SP - 1639

EP - 1653

CY - United Kingdom

PB - John Wiley and Sons Inc

SN - 0105-4538

SN - 1398-9995

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M2 - UN-233: A and D [Japan]

C1 - UN-233: A and D [Japan]

C2 - A and D, DNA Technology [Russian Federation], lytech [Russian Federation], A and D [Japan]

C3 - mir 19

UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1398-9995

DO - https://dx.doi.org/10.1111/all.15663

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021614696

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1111%2fall.15663Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Khaitov&issn=0105-4538&title=Allergy%3A+European+Journal+of+Allergy+and+Clinical+Immunology&atitle=Treatment+of+COVID-19+patients+with+a+SARS-CoV-2-specific+siRNA-peptide+dendrimer+formulation&volume=78&issue=6&spage=1639&epage=1653&date=2023&doi=10.1111%2Fall.15663&pmid=36721963&sid=OVID:embase

69.

TY - JOUR

DB - Embase

AN - 641527339

T1 - FUSOBACTERIUM NUCLEATUM, AN UNDERRATED CAUSE OF COLORECTAL CANCER

T3 - Society of Hospital Medicine Converge, SHM 2023. Austin, TX United States.

A1 - Lahm K.

A1 - Hardy J.

A1 - Timm-Intilli J.

Y1 - 2023//

N2 - Case Presentation: A 60-year-old male with a history of right hepatic resection for donation in 2011 presented to the Emergency Department for acute onset of chills, malaise, and fever up to 101.3 at home with associated vomiting, abdominal pain, and abdominal distention. He was found to have fluid refractory hypotension, elevated lactate, and a stage II AKI with CT concerning multiple hepatic abscesses. He was started on vasopressors, and broad-spectrum antibiotics, and admitted to the medical ICU for septic shock. His shock resolved in less than 24 hours and he was transferred to the medical floor. His abscesses resulted in intrahepatic biliary obstruction, later managed with percutaneous drainage given the high-risk location. Cultures of the aspirate and blood grew F. nucleatum. Follow-up CT was remarkable for a hyperattenuating mucosal lesion in the cecum. A colonoscopy was performed, and remarkable for a Paris 0-IIa+c lesion (flat elevation with central depression). Pathology was consistent with invasive adenocarcinoma. The biopsy was complicated by recurrent hemorrhage. He underwent a right hemicolectomy with end ileostomy for definitive management of both his malignancy and GI bleeding. Final surgical pathology showed adenocarcinoma invading the muscularis propria with negative margins. Throughout his stay, he was managed with Piperacillin/Tazobactam followed by Metronidazole and Ciprofloxacin upon discharge with serial imaging to guide the duration of therapy. Discussion(s): Colorectal cancer accounts for 150,000 cases of newly diagnosed cancer in the United States and leads to over 50,000 deaths annually. The 5-years survival rate of colorectal cancer has significantly improved following the widespread adoption of preventative cancer screening. Recent research has shed light on the association of gut microbiota with carcinogenesis in CRC. As an example, Streptococcus gallolyticus, previously S. bovis, and its association with CRC has been known since 1951. F. nucleatum is an anaerobic commensal gramnegative bacterium that colonizes both the gastrointestinal and respiratory tract. The increased colonization in patients with CRC compared to healthy individuals has raised concerns about its role in oncogenesis. Proposed mechanisms include the production of virulence factors Fap2, which promotes bacterial proliferation and affinity for CRC, and FadA, which upregulates the oncogenic s-catenin signaling pathway. F. nucleatum has been proposed to promote CD11b+ myeloid cell proliferation and NK cell inactivation, aiding angiogenesis and evasion of immune destruction respectively. Conclusion(s): In this case report, we discuss a case of multiple pyogenic liver abscesses and bacteremia secondary to Fusobacterium nucleatum (F. nucleatum) prompting a subsequent diagnosis of colorectal cancer. This case highlights the uncommon initial presentation of bacteremia and hepatic abscess formation in patients with CRC. Identification of F. Nucleatum infection in a patient should be followed by prompt evaluation for colonic malignancy. stool DNA testing of F. Nucleatum was pioneered in Japan as a possible screening tool for patients at risk of developing CRC. Research into intestinal dysbiosis and its role in oncogenesis is a rapidly expanding field. Further research may help guide the identification of additional culprit organisms and aid in risk stratification. (Figure Presented).

KW - abdominal distension

KW - abdominal pain

KW - adenocarcinoma

KW - adoption

KW - adult

KW - angiogenesis

KW - aspiration

KW - bacteremia

KW - bacterial colonization

KW - bacterial virulence

KW - bone marrow cell

KW - cancer patient

KW - cancer recurrence

KW - cancer screening

KW - cancer staging

KW - cancer surgery

KW - cancer survival

KW - cecum

KW - cell proliferation

KW - chill

KW - cholestasis

KW - colon cancer

KW - colonoscopy

KW - \*colorectal cancer

KW - commensal

KW - complication

KW - conference abstract

KW - \*depression

KW - destruction

KW - dysbiosis

KW - emergency ward

KW - feces

KW - fever

KW - follow up

KW - France

KW - \*Fusobacterium nucleatum

KW - gastrointestinal hemorrhage

KW - hemicolectomy

KW - hepatectomy

KW - human

KW - hypotension

KW - ileostomy

KW - intestine flora

KW - Japan

KW - liver abscess

KW - major clinical study

KW - malaise

KW - male

KW - medical intensive care unit

KW - middle aged

KW - natural killer cell

KW - nonhuman

KW - percutaneous drainage

KW - pyogenic liver abscess

KW - respiratory system

KW - risk assessment

KW - septic shock

KW - signal transduction

KW - Streptococcus equinus

KW - Streptococcus gallolyticus

KW - surgery

KW - survival rate

KW - treatment duration

KW - United States

KW - vomiting

KW - antibiotic agent

KW - catenin

KW - ciprofloxacin

KW - endogenous compound

KW - lactic acid

KW - metronidazole

KW - piperacillin plus tazobactam

KW - virulence factor

JF - Journal of Hospital Medicine

JA - J. Hosp. Med.

LA - English

VL - 18

IS - Supplement 1

SP - S558

EP - S559

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1553-5606

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DO - https://dx.doi.org/10.1002/jhm.13090

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=641527339

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1002%2fjhm.13090Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lahm&issn=1553-5606&title=Journal+of+Hospital+Medicine&atitle=FUSOBACTERIUM+NUCLEATUM%2C+AN+UNDERRATED+CAUSE+OF+COLORECTAL+CANCER&volume=18&issue=Supplement+1&spage=S558&epage=S559&date=2023&doi=10.1002%2Fjhm.13090&pmid=&sid=OVID:embase

70.

TY - JOUR

DB - Embase

AN - 2024968562

ID - 34238825 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34238825]

T1 - Polyethylene Glycol 3350 Changes Stool Consistency and the Microbiome but not Behavior of CD1 Mice

A1 - Salman S.S.

A1 - Williams K.C.

A1 - Marte-Ortiz P.

A1 - Rumpf W.

A1 - Mashburn-Warren L.

A1 - Lauber C.L.

A1 - Bailey M.T.

A1 - Maltz R.M.

Y1 - 2021//

N2 - Objectives:Polyethylene Glycol 3350 (PEG3350) is a laxative commonly used to treat constipation in children. The Food and Drug Administration has received reports of increased anxiety, aggression, and obsessive - compulsive behaviors in children administered PEG3350. Thus, we assessed whether daily administration of PEG3350 leads to anxiety-like behavior in mice. Method(s):Outbred CD-1 IGS mice were administered either a high or a low dose of PEG3350 via daily oral gavage for 2 weeks. As a laxative comparison and control, additional mice were given a high or low dose of magnesium citrate or vehicle (water). Weight and stool consistency were assessed after each gavage to determine laxative effectiveness. Anxiety-like behaviors were assessed using light/dark, open field, and elevated plus maze (EPM) tests at baseline, after 2 weeks of daily gavage, and after a 2 week washout in experiment 1, and after 2 weeks of daily gavage in experiment 2. Stool samples were collected for microbiome analysis in experiment 2 at baseline, after 2 weeks of daily gavage, and after 2 weeks washout. Result(s):PEG3350 and magnesium citrate significantly changed stool consistency, as well as microbiome alpha and beta diversity. Anxiety-like behaviors were not, however, different in mice administered low or high doses of PEG3350 or magnesium citrate. Conclusion(s):Although changes in stool consistency and the gut microbiome occurred, administration of PEG3350 did not alter anxiety-like behaviors.Copyright © 2021 Lippincott Williams and Wilkins. All rights reserved.

KW - animal experiment

KW - animal model

KW - \*anxiety

KW - article

KW - \*CD-1 mouse

KW - comparative effectiveness

KW - \*constipation

KW - controlled study

KW - drug megadose

KW - elevated plus maze test

KW - enteric feeding

KW - \*feces

KW - gastrointestinal tract

KW - low drug dose

KW - male

KW - \*microbiome

KW - mouse

KW - nonhuman

KW - oral drug administration

KW - \*laxative

KW - \*macrogol 3350

KW - \*magnesium citrate

KW - water

JF - Journal of Pediatric Gastroenterology and Nutrition

JA - J. Pediatr. Gastroenterol. Nutr.

LA - English

VL - 73

IS - 4

SP - 499

EP - 506

CY - United States

PB - Lippincott Williams and Wilkins

SN - 0277-2116

SN - 1536-4801

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UR - http://journals.lww.com/jpgn

DO - https://dx.doi.org/10.1097/MPG.0000000000003222

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024968562

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1097%2fMPG.0000000000003222Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Salman&issn=0277-2116&title=Journal+of+Pediatric+Gastroenterology+and+Nutrition&atitle=Polyethylene+Glycol+3350+Changes+Stool+Consistency+and+the+Microbiome+but+not+Behavior+of+CD1+Mice&volume=73&issue=4&spage=499&epage=506&date=2021&doi=10.1097%2FMPG.0000000000003222&pmid=34238825&sid=OVID:embase

71.

TY - JOUR

DB - Embase

AN - 2021580409

ID - 36768793 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36768793]

T1 - Necrotizing Enterocolitis: The Role of Hypoxia, Gut Microbiome, and Microbial Metabolites

A1 - Kaplina A.

A1 - Kononova S.

A1 - Zaikova E.

A1 - Pervunina T.

A1 - Petrova N.

A1 - Sitkin S.

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Y1 - 2023//

N2 - Necrotizing enterocolitis (NEC) is a life-threatening disease that predominantly affects very low birth weight preterm infants. Development of NEC in preterm infants is accompanied by high mortality. Surgical treatment of NEC can be complicated by short bowel syndrome, intestinal failure, parenteral nutrition-associated liver disease, and neurodevelopmental delay. Issues surrounding pathogenesis, prevention, and treatment of NEC remain unclear. This review summarizes data on prenatal risk factors for NEC, the role of pre-eclampsia, and intrauterine growth retardation in the pathogenesis of NEC. The role of hypoxia in NEC is discussed. Recent data on the role of the intestinal microbiome in the development of NEC, and features of the metabolome that can serve as potential biomarkers, are presented. The Pseudomonadota phylum is known to be associated with NEC in preterm neonates, and the role of other bacteria and their metabolites in NEC pathogenesis is also discussed. The most promising approaches for preventing and treating NEC are summarized.Copyright © 2023 by the authors.

KW - dysbiosis

KW - human

KW - \*hypoxia

KW - infant mortality

KW - intestinal failure

KW - \*intestine flora

KW - intrauterine growth retardation

KW - liver disease

KW - mental disease

KW - metabolite

KW - metabolome

KW - \*necrotizing enterocolitis/et [Etiology]

KW - \*necrotizing enterocolitis/pc [Prevention]

KW - \*necrotizing enterocolitis/su [Surgery]

KW - nonhuman

KW - parenteral nutrition

KW - pathogenesis

KW - preeclampsia

KW - prematurity

KW - Pseudomonadaceae

KW - review

KW - risk factor

KW - short bowel syndrome

KW - very low birth weight

KW - glycan/ec [Endogenous Compound]

KW - oligosaccharide

JF - International Journal of Molecular Sciences

JA - Int. J. Mol. Sci.

LA - English

VL - 24

IS - 3

SP - 2471

CY - Switzerland

PB - MDPI

SN - 1661-6596

SN - 1422-0067

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UR - http://www.mdpi.com/journal/ijms

DO - https://dx.doi.org/10.3390/ijms24032471

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021580409

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3390%2fijms24032471Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kaplina&issn=1661-6596&title=International+Journal+of+Molecular+Sciences&atitle=Necrotizing+Enterocolitis%3A+The+Role+of+Hypoxia%2C+Gut+Microbiome%2C+and+Microbial+Metabolites&volume=24&issue=3&spage=2471&epage=&date=2023&doi=10.3390%2Fijms24032471&pmid=36768793&sid=OVID:embase

72.

TY - JOUR

DB - Embase

AN - 2019022331

T1 - Gut Microbiota in Hemodynamics

A1 - Pan X.

A1 - Chen D.

Y1 - 2022//

N2 - The gut microbiota is a powerful "organ" composed of prokaryotic organisms (bacteria), eukaryotic microorganisms (including fungi and protozoa) and viruses, which plays a crucial role in the nutrition metabolism, maintenance of the integrity of intestinal mucosal barrier, and immune regulation of the body. Researches have shown that intestinal microecology is related to the pathogenesis of many diseases, such as neuropsychiatric diseases, autoimmune diseases, cancer and chronic metabolic diseases. Recent studies have found that gut microbiota can regulate hemodynamics through the oxidation of trimethylamine and short chain fatty acids. At the same time, gut microbiota disorder and translocation can activate the body's inflammatory response, affecting the stability of the body's hemodynamics.In this article, we summarize the relationship between gut microbiota and hemodymamics, in order to provide reference for further research.Copyright © 2022, Peking Union Medical College Hospital. All rights reserved.

KW - article

KW - autoimmune disease

KW - bacterial translocation

KW - \*hemodynamics

KW - immunoregulation

KW - inflammation

KW - intensive care

KW - \*intestine flora

KW - intestine mucosa

KW - malignant neoplasm

KW - mental disease

KW - metabolic disorder

KW - microbial metabolism

KW - nonhuman

KW - oxidation

KW - pathogenesis

KW - short chain fatty acid/ec [Endogenous Compound]

KW - trimethylamine/ec [Endogenous Compound]

JF - Medical Journal of Peking Union Medical College Hospital

JA - Med. J. Peking. Un. Med. Coll. Hosp.

LA - Chinese

VL - 13

IS - 6

SP - 936

EP - 941

CY - China

PB - Peking Union Medical College Hospital

SN - 1674-9081

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UR - https://xhyxzz.pumch.cn/en/article/current

DO - https://dx.doi.org/10.12290/xhyxzz.2022-0468

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2019022331

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.12290%2fxhyxzz.2022-0468Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pan&issn=1674-9081&title=Medical+Journal+of+Peking+Union+Medical+College+Hospital&atitle=Gut+Microbiota+in+Hemodynamics&volume=13&issue=6&spage=936&epage=941&date=2022&doi=10.12290%2Fxhyxzz.2022-0468&pmid=&sid=OVID:embase

73.

TY - JOUR

DB - Embase

AN - 2023383531

ID - 37230968 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37230968]

T1 - Pathophysiological mechanisms and therapeutic approaches in obstructive sleep apnea syndrome

A1 - Lv R.

A1 - Liu X.

A1 - Zhang Y.

A1 - Dong N.

A1 - Wang X.

A1 - He Y.

A1 - Yue H.

A1 - Yin Q.

Y1 - 2023//

N2 - Obstructive sleep apnea syndrome (OSAS) is a common breathing disorder in sleep in which the airways narrow or collapse during sleep, causing obstructive sleep apnea. The prevalence of OSAS continues to rise worldwide, particularly in middle-aged and elderly individuals. The mechanism of upper airway collapse is incompletely understood but is associated with several factors, including obesity, craniofacial changes, altered muscle function in the upper airway, pharyngeal neuropathy, and fluid shifts to the neck. The main characteristics of OSAS are recurrent pauses in respiration, which lead to intermittent hypoxia (IH) and hypercapnia, accompanied by blood oxygen desaturation and arousal during sleep, which sharply increases the risk of several diseases. This paper first briefly describes the epidemiology, incidence, and pathophysiological mechanisms of OSAS. Next, the alterations in relevant signaling pathways induced by IH are systematically reviewed and discussed. For example, IH can induce gut microbiota (GM) dysbiosis, impair the intestinal barrier, and alter intestinal metabolites. These mechanisms ultimately lead to secondary oxidative stress, systemic inflammation, and sympathetic activation. We then summarize the effects of IH on disease pathogenesis, including cardiocerebrovascular disorders, neurological disorders, metabolic diseases, cancer, reproductive disorders, and COVID-19. Finally, different therapeutic strategies for OSAS caused by different causes are proposed. Multidisciplinary approaches and shared decision-making are necessary for the successful treatment of OSAS in the future, but more randomized controlled trials are needed for further evaluation to define what treatments are best for specific OSAS patients.Copyright © 2023, The Author(s).

KW - acromegaly

KW - Actinobacteria

KW - adenoidectomy

KW - adult respiratory distress syndrome

KW - aerobic exercise

KW - airway resistance

KW - angiogenesis

KW - antineoplastic activity

KW - apathy

KW - apnea hypopnea index

KW - apoptosis

KW - arousal

KW - atherosclerosis

KW - Bacteroides

KW - Bacteroidetes

KW - \*behavior therapy

KW - Bifidobacteriaceae

KW - body mass

KW - breast cancer

KW - breathing

KW - breathing pattern

KW - cancer growth

KW - cancer patient

KW - cancer recurrence

KW - carcinogenesis

KW - cardiovascular disease

KW - CD4+ T lymphocyte

KW - cell cycle arrest

KW - cell proliferation

KW - cell survival

KW - chemoreceptor reflex

KW - chemosensitivity

KW - cognition

KW - cognitive defect

KW - colon cancer

KW - coronary artery disease

KW - coronavirus disease 2019

KW - craniofacial synostosis

KW - depression

KW - disease severity

KW - DNA damage

KW - DNA methylation

KW - DNA sequence

KW - \*drug targeting

KW - dysautonomia

KW - dysbiosis

KW - dysphagia

KW - endoplasmic reticulum stress

KW - endoscopy

KW - enuresis

KW - enzyme activity

KW - epigenetics

KW - epithelial mesenchymal transition

KW - erectile dysfunction

KW - facial bone

KW - fatigue

KW - Firmicutes

KW - fluid retention

KW - foramen magnum

KW - gastrectomy

KW - gastric banding

KW - gene control

KW - gene expression

KW - gene silencing

KW - genetic transcription

KW - gestational diabetes

KW - glycolysis

KW - headache

KW - heart failure

KW - hospitalization

KW - human

KW - hydrostatic pressure

KW - hyoid bone

KW - hypercapnia

KW - hypercoagulability

KW - hyperlipidemia

KW - hypersalivation

KW - hypertension

KW - hyperventilation

KW - hypocapnia

KW - hypopituitarism

KW - hypotension

KW - hypothyroidism

KW - hypoxemia

KW - hypoxia

KW - immune dysregulation

KW - immune response

KW - immune system

KW - immunoblotting

KW - incidence

KW - inflammation

KW - insomnia

KW - insulin sensitivity

KW - intermittent hypoxia

KW - intestine flora

KW - Lachnospiraceae

KW - libido disorder

KW - lipid metabolism

KW - lipid peroxidation

KW - lipid storage

KW - lung metastasis

KW - macroglossia

KW - malignant neoplasm

KW - mandible osteotomy

KW - mandibular advancement

KW - melanoma

KW - metabolic acidosis

KW - metabolic disorder

KW - metabolic syndrome X

KW - microglia

KW - \*molecular pathology

KW - muscle function

KW - muscle hypotonia

KW - muscle relaxation

KW - muscle strength

KW - neck circumference

KW - neurologic disease

KW - neuropathy

KW - neuroprotection

KW - non insulin dependent diabetes mellitus

KW - \*non invasive procedure

KW - nonalcoholic fatty liver

KW - nonhuman

KW - nose obstruction

KW - obesity

KW - \*obstructive sleep apnea/rh [Rehabilitation]

KW - \*obstructive sleep apnea/su [Surgery]

KW - \*obstructive sleep apnea/th [Therapy]

KW - osteotomy

KW - oxidative stress

KW - oxygen blood level

KW - oxygen desaturation

KW - oxygen saturation

KW - paresthesia

KW - passive smoking

KW - personalized medicine

KW - pharyngeal muscle

KW - physiological stress

KW - Pierre Robin syndrome

KW - positive end expiratory pressure ventilation

KW - postoperative pain

KW - preeclampsia

KW - prevalence

KW - Prevotella

KW - prostate cancer

KW - protein expression

KW - protein synthesis

KW - Pseudomonas

KW - ptosis (eyelid)

KW - pyrosequencing

KW - quality of life

KW - radiofrequency ablation

KW - randomized controlled trial (topic)

KW - rebreathing

KW - regulatory T lymphocyte

KW - REM sleep

KW - renin angiotensin aldosterone system

KW - reoxygenation

KW - reperfusion injury

KW - respiration depression

KW - respiratory drive

KW - respiratory failure

KW - retrognathia

KW - review

KW - risk factor

KW - Ruminococcaceae

KW - sexual function

KW - shared decision making

KW - signal transduction

KW - sleep apnea syndromes

KW - sleep quality

KW - sleep time

KW - sore throat

KW - spermatozoon motility

KW - synostosis

KW - systemic lupus erythematosus

KW - temporomandibular joint

KW - Th1 cell

KW - tissue pressure

KW - tracheostomy

KW - tracheotomy

KW - transepithelial resistance

KW - tumor growth

KW - tumor microenvironment

KW - ubiquitination

KW - unfolded protein response

KW - upper respiratory tract

KW - upper respiratory tract obstruction

KW - upregulation

KW - uvulopalatopharyngoplasty

KW - verbal communication

KW - virus load

KW - vocal cord paralysis

KW - acetazolamide

KW - acetylcysteine

KW - androgen receptor

KW - atomoxetine

KW - carbon monoxide

KW - caspase 3

KW - clusterin

KW - CXCL1 chemokine

KW - cyclic GMP dependent protein kinase

KW - cyclin D1

KW - dexamethasone

KW - diphenhydramine

KW - endoplasmic reticulum chaperone BiP

KW - eszopiclone

KW - ferritin

KW - furosemide

KW - histone demethylase

KW - hydrogen sulfide

KW - immunoglobulin enhancer binding protein

KW - inflammasome

KW - interleukin 6

KW - leptin

KW - long untranslated RNA

KW - mammalian target of rapamycin

KW - microRNA

KW - mitogen activated protein kinase p38

KW - nitric oxide

KW - noradrenalin

KW - oxybutynin

KW - peroxiredoxin 4

KW - phosphoinositide dependent protein kinase 1

KW - protein kinase B

KW - protein p53

KW - reactive oxygen metabolite

KW - reduced nicotinamide adenine dinucleotide phosphate oxidase

KW - superoxide dismutase

KW - testosterone

KW - transcription factor FKHRL1

KW - trimethylamine oxide

KW - tumor necrosis factor

KW - tyrosine 3 monooxygenase

KW - vasculotropin

KW - wortmannin

KW - zolpidem

JF - Signal Transduction and Targeted Therapy

JA - Signal Transduct. Target. Ther.

LA - English

VL - 8

IS - 1

SP - 218

CY - United Kingdom

PB - Springer Nature

SN - 2095-9907

SN - 2059-3635

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UR - https://www.nature.com/sigtrans

DO - https://dx.doi.org/10.1038/s41392-023-01496-3

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2023383531

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1038%2fs41392-023-01496-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lv&issn=2095-9907&title=Signal+Transduction+and+Targeted+Therapy&atitle=Pathophysiological+mechanisms+and+therapeutic+approaches+in+obstructive+sleep+apnea+syndrome&volume=8&issue=1&spage=218&epage=&date=2023&doi=10.1038%2Fs41392-023-01496-3&pmid=37230968&sid=OVID:embase

74.

TY - JOUR

DB - Embase

AN - 641345510

T1 - A Short-Term Enteral Nutrition Protocol for Management of Adult Crohn's Disease - A Pilot Trial

T3 - American Society for Parenteral and Enteral Nutrition Conference and Practice, ASPEN. Las Vegas, NV United States.

A1 - Teigen L.

A1 - Hamilton M.

A1 - Shmidt E.

A1 - Vaughn B.

Y1 - 2023//

N2 - Background: Enteral nutrition therapy (exclusive or partial; EEN or PEN, respectively) is an established therapy for management of Crohn's disease (CD) in pediatric populations, but its use in adults is less common. This is largely due to the limited, albeit growing, studies describing enteral nutrition therapy in management of adult CD. Therefore, we conducted an exploratory study to determine the therapeutic feasibility of a 4-week semi-elemental formula based, oral nutrition program for management of adult CD. As secondary endpoints, we collected longitudinal data on disease activity, physical and mental health scores, and gut microbiota composition over the course of the intervention. Method(s): The study design was an open-label 4-week intervention study that relied on a commercially available, semi-elemental, enteral nutrition formula (Peptamen 1.5, vanilla) to provide at least 80% of estimated calorie needs. The formula was consumed orally by participants. In-person study visits at baseline and week 4 were conducted to allow for calculation of Crohn's disease activity index (CDAI) and Harvey-Bradshaw Index (HBI) scores. Patient experience (using a 5-point scale) on the semi-elemental EEN regimen was assessed using an investigator generated questionnaire. The PROMIS Item Bank v1.0 - Emotional Distress-Depression - Short Form 4a and PROMIS Scale v1.2 - Global Health Physical 2a were used to measure emotional distress and physical health, respectively, over the study period. Paired t-tests were used to compare continuous variables. Gut microbiota composition was characterized using high throughput 16S rRNA gene sequence analysis. Result(s): Four of the five enrolled participants tolerated, and successfully completed, the intervention. Scores reflecting overall experience on the semi-elemental EEN regimen improved from 3.25 to 4 (out of 5) from the end of week 1 to the end of intervention (week 4) but did not reach statistical significance (p = 0.2). Mean HBI score trended towards an improvement (10 vs 6.2, p = 0.08) as did CDAI score (216 vs 137, p = 0.3). Mean PROMIS emotional distress scores improved from 8.25 to 6.5 (p = 0.06) while physical global health scores did not change. There was no difference in Shannon diversity index between subjects (mean = 3.2) or when comparing samples pre- and post-intervention (p = 0.1). Linear discriminant analysis effect size (LEfSe) analysis identified one differentially abundant genus, Flavinofractor, which was associated with post-intervention samples (LDA score 3.7). Conclusion(s): These findings demonstrate the feasibility of utilizing a 4-week semi-elemental formula based, oral nutrition delivery program for management of adult CD and provides important estimates on the effect size of this intervention for future studies. While we observed trends toward clinical improvement, the study was not powered to detect changes. We also identified Flavinofractor as the only differentially abundant genus discriminating post samples from pre samples, which may suggest a potential role in CD, but further work with a larger sample size is needed to elucidate the role of gut microbiota in the therapeutic efficacy of EEN.

KW - adult

KW - calculation

KW - calorie

KW - clinical article

KW - clinical trial

KW - conference abstract

KW - controlled study

KW - \*depression

KW - discriminant analysis

KW - effect size

KW - emotional stress

KW - \*enteric feeding

KW - exploratory research

KW - feasibility study

KW - female

KW - gene sequence

KW - global health

KW - \*Harvey Bradshaw Index

KW - health

KW - human

KW - intervention study

KW - intestine flora

KW - male

KW - mental health

KW - nonhuman

KW - questionnaire

KW - sample size

KW - sequence analysis

KW - Shannon index

KW - statistical significance

KW - Vanilla

KW - endogenous compound

KW - protein concentrate plus carbohydrates plus lipids plus minerals plus vitamins

KW - RNA 16S

JF - Journal of Parenteral and Enteral Nutrition

JA - J. Parenter. Enter. Nutr.

LA - English

VL - 47

IS - Supplement 2

SP - S91

EP - S92

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1941-2444

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DO - https://dx.doi.org/10.1002/jpen.2491

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=641345510

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1002%2fjpen.2491Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Teigen&issn=1941-2444&title=Journal+of+Parenteral+and+Enteral+Nutrition&atitle=A+Short-Term+Enteral+Nutrition+Protocol+for+Management+of+Adult+Crohn%27s+Disease+-+A+Pilot+Trial&volume=47&issue=Supplement+2&spage=S91&epage=S92&date=2023&doi=10.1002%2Fjpen.2491&pmid=&sid=OVID:embase

75.

TY - JOUR

DB - Embase

AN - 2024391462

ID - 32251025 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32251025]

T1 - Persistent inflammatory states and their implications in brain disease

A1 - Valdes-Ferrer S.I.

A1 - Benkendorff A.

A1 - Sankowski R.

Y1 - 2020//

N2 - Purpose of reviewApart from mental, motor and sensory functions, the human central nervous system (CNS) regulates a plethora of homeostatic (autonomic and hormonal) bodily functions. These functions are dependent on specialized neuronal networks. To ensure connectivity of these networks, they are continuously refined and supported by glial cells that outnumber neurons by, according to some accounts, an order of magnitude. Among glial cells, microglia - the brain resident macrophages - plays a crucial role in maintaining neuronal networks. However, in their concomitant role as brain immune cells microglia also engage in inflammatory signaling that may disrupt neuronal networks. Here, we review novel insights for molecular pathways involved in the protective functions of microglia and other immune cells in response to systemic signals and stimuli.Recent findingsRecent evidence suggests that aging and systemic disease push individual microglia toward proinflammatory phenotypes compromising the connectivity of neuronal networks, resulting in neuropsychiatric disease. Furthermore, cells (self as well as the microbiome) outside the CNS have been shown to affect neuronal function.SummaryThese recent findings have critical implications for mental health, particularly of an aging population, in particular for the development of novel immunomodulatory therapies for brain disease.Copyright © 2020 Lippincott Williams and Wilkins. All rights reserved.

KW - \*aging

KW - \*Alzheimer disease

KW - \*brain disease

KW - central nervous system

KW - \*gastrointestinal tract

KW - glia cell

KW - human

KW - human cell

KW - immunocompetent cell

KW - immunotherapy

KW - mental disease

KW - mental health

KW - microbiome

KW - \*microglia

KW - nerve cell network

KW - nonhuman

KW - phenotype

KW - review

KW - \*sepsis

KW - signal transduction

KW - systemic disease

JF - Current Opinion in Neurology

JA - Curr. Opin. Neurol.

LA - English

VL - 33

IS - 3

SP - 341

EP - 346

CY - United Kingdom

PB - Lippincott Williams and Wilkins

SN - 1350-7540

SN - 1473-6551

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UR - http://journals.lww.com/co-neurology/pages/default.aspx

DO - https://dx.doi.org/10.1097/WCO.0000000000000809

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024391462

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1097%2fWCO.0000000000000809Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Valdes-Ferrer&issn=1350-7540&title=Current+Opinion+in+Neurology&atitle=Persistent+inflammatory+states+and+their+implications+in+brain+disease&volume=33&issue=3&spage=341&epage=346&date=2020&doi=10.1097%2FWCO.0000000000000809&pmid=32251025&sid=OVID:embase

76.

TY - JOUR

DB - Embase

AN - 2017399929

T1 - Gut microbiome and neurocritically ill patients

A1 - Dono A.

A1 - Esquenazi Y.

A1 - Choi H.A.

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AO - Esquenazi, Yoshua; ORCID: https://orcid.org/0000-0002-9757-1453

AO - Choi, Huimahn A.; ORCID: https://orcid.org/0000-0001-7218-832X

Y1 - 2022//

N2 - Since the times of Rokitansky and Cushing, we have been fascinated by the connections between the gut and the brain. Recent advances in next-generation sequencing techniques have shown that this relationship is even more complex and integral to our sense of self than previously imagined. As these techniques refine our understanding of the abundance and diversity of the gut bacterial microbiome, the relationship between the gut and the brain has been redefined. Now, this is understood as a complex symbiotic network with bidirectional communication, the gut-brain axis. The implication of this communication involves an intense focus of research on a variety of chronic psychiatric, neurological, neurodegenerative, and neuro-oncological diseases. Recently, the gut-brain axis has been studied in neurologically ill patients requiring intensive care. Preliminary studies have shown that acute brain injury changes the bacterial phenotype from one that is symbiotic with the host human to one that is pathologic, termed the "pathobiome." This can contribute to nosocomial pneumonia and sepsis. The first studies in neurologically ill patients in the neurointensive care unit (neuroICU) demonstrated changes in the gut microbiome between neuroICU patients and healthy matched subjects. Specifically, a decrease in short-chain fatty acid-producing bacteria and increase in harmful gut microbes have been associated with mortality and decreased function at discharge. Although these preliminary findings are exciting and have opened a new field of research in the complex neuroICU population, there are several limitations and challenges. Further investigation is needed to confirm these correlations and understand their implications on patients in a complex intensive care environment.Copyright © 2022 The Korean Neurocritical Care Society.

KW - article

KW - blood brain barrier

KW - brain function

KW - brain-gut axis

KW - central nervous system cancer

KW - \*critically ill patient

KW - degenerative disease

KW - disease association

KW - Enterobacteriaceae

KW - high throughput sequencing

KW - hospital acquired pneumonia

KW - hospital discharge

KW - human

KW - intensive care

KW - \*intestine flora

KW - Lachnospiraceae

KW - mental disease

KW - metabolomics

KW - microbial diversity

KW - mortality

KW - neurologic disease

KW - neurological intensive care unit

KW - phenotype

KW - Ruminococcaceae

KW - sepsis

KW - shotgun sequencing

KW - symbiosis

KW - whole genome sequencing

KW - bacterial RNA

KW - ribosome RNA

KW - short chain fatty acid

KW - \*neurocritically ill patient

JF - Journal of Neurocritical Care

JA - J. Neurocritical Care

LA - English

VL - 15

IS - 1

SP - 1

EP - 11

CY - South Korea

PB - Korean Neurocritical Care Society

SN - 2508-1349 (electronic)

SN - 2508-1349

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M1 - (Dono, Esquenazi, Choi) Department of Neurosurgery, UT Health Houston, McGovern Medical School, Houston, TX, United States

UR - https://www.e-jnc.org

DO - https://dx.doi.org/10.18700/jnc.220058

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2017399929

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.18700%2fjnc.220058Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Dono&issn=2508-1349&title=Journal+of+Neurocritical+Care&atitle=Gut+microbiome+and+neurocritically+ill+patients&volume=15&issue=1&spage=1&epage=11&date=2022&doi=10.18700%2Fjnc.220058&pmid=&sid=OVID:embase

77.

TY - JOUR

DB - Embase

AN - 2023118134

ID - 37180438 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37180438]

T1 - The traditional Chinese medicine and non-small cell lung cancer: from a gut microbiome perspective

A1 - Wang X.

A1 - Hou L.

A1 - Cui M.

A1 - Liu J.

A1 - Wang M.

A1 - Xie J.

Y1 - 2023//

N2 - Non-small cell lung cancer (NSCLC) is one of the most serious diseases affecting human health today, and current research is focusing on gut flora. There is a correlation between intestinal flora imbalance and lung cancer, but the specific mechanism is not clear. Based on the "lung and large intestine being interior-exteriorly related" and the "lung-intestinal axis" theory. Here, based on the theoretical comparisons of Chinese and western medicine, we summarized the regulation of intestinal flora in NSCLC by active ingredients of traditional Chinese medicine and Chinese herbal compounds and their intervention effects, which is conducive to providing new strategies and ideas for clinical prevention and treatment of NSCLC.Copyright © 2023 Wang, Hou, Cui, Liu, Wang and Xie.

KW - A-549 cell line

KW - cancer immunotherapy

KW - cancer patient

KW - cell cycle arrest

KW - \*Chinese medicine

KW - depression

KW - diarrhea

KW - dysbiosis

KW - Eleutherococcus senticosus

KW - Fusobacteria

KW - Ganoderma lucidum

KW - gene sequence

KW - herbal medicine

KW - human

KW - inflammation

KW - inflammatory bowel disease

KW - \*intestine flora

KW - JAK-STAT signaling

KW - metabolite

KW - microbial community

KW - microbial diversity

KW - \*non small cell lung cancer

KW - Parabacteroides distasonis

KW - Pi3K/Akt signaling

KW - pneumonia

KW - Proteobacteria

KW - review

KW - RNA gene

KW - spirochete

KW - symbiosis

KW - tumor growth

KW - tumor microenvironment

KW - ulcerative colitis

KW - Verrucomicrobia

KW - western medicine

KW - alkaloid

KW - caspase 3/ec [Endogenous Compound]

KW - cyclin A/ec [Endogenous Compound]

KW - cyclooxygenase 2/ec [Endogenous Compound]

KW - DNA 16S/ec [Endogenous Compound]

KW - flavonoid

KW - G protein coupled receptor/ec [Endogenous Compound]

KW - ginsenoside

KW - interleukin 1beta/ec [Endogenous Compound]

KW - Ki 67 antigen/ec [Endogenous Compound]

KW - protein Bax/ec [Endogenous Compound]

KW - protein p21/ec [Endogenous Compound]

KW - RNA 16S/ec [Endogenous Compound]

KW - short chain fatty acid/ec [Endogenous Compound]

KW - thioredoxin interacting protein/ec [Endogenous Compound]

KW - transcription factor FOXO/ec [Endogenous Compound]

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - tumor necrosis factor receptor associated factor 6/ec [Endogenous Compound]

KW - unclassified drug

KW - G protein coupled receptor 41/ec [Endogenous Compound]

KW - G protein coupled receptor 43/ec [Endogenous Compound]

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 13

SP - 1151557

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

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M1 - (Hou) Department of Geriatrics, Xijing Hospital, Fourth Military Medical University, Xi an, China

UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2023.1151557

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2023118134

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3389%2ffcimb.2023.1151557Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=The+traditional+Chinese+medicine+and+non-small+cell+lung+cancer%3A+from+a+gut+microbiome+perspective&volume=13&issue=&spage=1151557&epage=&date=2023&doi=10.3389%2Ffcimb.2023.1151557&pmid=37180438&sid=OVID:embase

78.

TY - JOUR

DB - Embase

AN - 2023004550

ID - 37139495 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37139495]

T1 - Probiotics for the treatment of depression and its comorbidities: A systemic review

A1 - Gao J.

A1 - Zhao L.

A1 - Cheng Y.

A1 - Lei W.

A1 - Wang Y.

A1 - Liu X.

A1 - Zheng N.

A1 - Shao L.

A1 - Chen X.

A1 - Sun Y.

A1 - Ling Z.

A1 - Xu W.

Y1 - 2023//

N2 - Depression is one of the most common psychiatric conditions, characterized by significant and persistent depressed mood and diminished interest, and often coexists with various comorbidities. The underlying mechanism of depression remain elusive, evidenced by the lack of an appreciate therapy. Recent abundant clinical trials and animal studies support the new notion that the gut microbiota has emerged as a novel actor in the pathophysiology of depression, which partakes in bidirectional communication between the gut and the brain through the neuroendocrine, nervous, and immune signaling pathways, collectively known as the microbiota-gut-brain (MGB) axis. Alterations in the gut microbiota can trigger the changes in neurotransmitters, neuroinflammation, and behaviors. With the transition of human microbiome research from studying associations to investigating mechanistic causality, the MGB axis has emerged as a novel therapeutic target in depression and its comorbidities. These novel insights have fueled idea that targeting on the gut microbiota may open new windows for efficient treatment of depression and its comorbidities. Probiotics, live beneficial microorganisms, can be used to modulate gut dysbiosis into a new eubiosis and modify the occurrence and development of depression and its comorbidities. In present review, we summarize recent findings regarding the MGB axis in depression and discuss the potential therapeutic effects of probiotics on depression and its comorbidities.Copyright © 2023 Gao, Zhao, Cheng, Lei, Wang, Liu, Zheng, Shao, Chen, Sun, Ling and Xu.

KW - abdominal pain

KW - Actinomyces

KW - Akkermansia muciniphila

KW - amyotrophic lateral sclerosis

KW - antibiotic resistance

KW - anxiety

KW - astrocyte

KW - autism

KW - Bacillus coagulans

KW - bacteremia

KW - Bacteroides

KW - Beck Anxiety Inventory

KW - Beck Depression Inventory

KW - Bifidobacteriaceae

KW - Bifidobacterium

KW - Bifidobacterium bifidum

KW - Bifidobacterium breve

KW - Bifidobacterium longum

KW - Bifidobacterium longum subsp. infantis

KW - bloating

KW - brain development

KW - carbohydrate metabolism

KW - cardiovascular disease

KW - cardiovascular risk

KW - Clostridium butyricum

KW - cognition

KW - colorectal cancer

KW - \*comorbidity

KW - constipation

KW - degenerative disease

KW - \*depression

KW - dietary fiber

KW - disease activity

KW - disease severity

KW - dysglycemia

KW - dyslipidemia

KW - endotoxemia

KW - Enterococcus faecalis

KW - enzyme activity

KW - Escherichia coli

KW - Faecalibacterium

KW - fatigue

KW - fecal microbiota transplantation

KW - Firmicutes

KW - forced swim test

KW - glycemic control

KW - Hamilton Depression Rating Scale

KW - human

KW - hypertension

KW - immobility time

KW - immune system

KW - inflammation

KW - inflammatory bowel disease

KW - insulin resistance

KW - intestine flora

KW - irritable colon

KW - Lachnospiraceae

KW - lactic acid bacterium

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus brevis

KW - Lactobacillus casei

KW - Lactobacillus fermentum

KW - Lactobacillus helveticus

KW - Lactobacillus paracasei

KW - Lactobacillus plantarum

KW - Lactobacillus rhamnosus

KW - lipid metabolism

KW - major depression

KW - metabolomics

KW - metagenomics

KW - microbial diversity

KW - myelination

KW - nonhuman

KW - open field test

KW - Prevotella

KW - protein expression

KW - Proteobacteria

KW - proteomics

KW - randomized controlled trial (topic)

KW - regulatory T lymphocyte

KW - review

KW - systematic review

KW - tail suspension test

KW - ulcerative colitis

KW - urinary tract infection

KW - vagotomy

KW - Verrucomicrobia

KW - Weissella

KW - antidepressant agent/ec [Endogenous Compound]

KW - corticosterone

KW - corticotropin

KW - dexamethasone

KW - escitalopram

KW - glucocorticoid receptor/ec [Endogenous Compound]

KW - glutathione reductase/ec [Endogenous Compound]

KW - interleukin 1/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 5/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - kynurenine/ec [Endogenous Compound]

KW - lipopolysaccharide/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - mirtazapine

KW - myeloperoxidase/ec [Endogenous Compound]

KW - noradrenalin/ec [Endogenous Compound]

KW - olanzapine

KW - paroxetine

KW - plasminogen activator inhibitor 1/ec [Endogenous Compound]

KW - polyphenol

KW - \*probiotic agent

KW - sertraline

KW - superoxide dismutase/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - tryptophan/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 13

SP - 1167116

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

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UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2023.1167116

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2023004550

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3389%2ffcimb.2023.1167116Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gao&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Probiotics+for+the+treatment+of+depression+and+its+comorbidities%3A+A+systemic+review&volume=13&issue=&spage=1167116&epage=&date=2023&doi=10.3389%2Ffcimb.2023.1167116&pmid=37139495&sid=OVID:embase

79.

TY - JOUR

DB - Embase

AN - 641287785

T1 - Outcomes of Clostridioides difficile Infection in Hospitalized Patients With Generalized Anxiety Disorder

T3 - Annual Scientific Meeting of the American College of Gastroenterology, ACG 2022. Charlotte, NC United States.

A1 - Patel S.J.

A1 - Kaye A.J.

A1 - Meyers S.

A1 - Saiganesh P.

A1 - Ahlawat S.

Y1 - 2022//

N2 - Introduction: Clostridioides difficile infection (CDI) is a significant burden for healthcare facilities. Clinical presentation can range from mild diarrhea to colitis. Higher levels of anxiety have been reported in patients with recurrent CDI. Generalized anxiety disorder (GAD) is a common form of anxiety. Our study aims to understand the impact of comorbid GAD on the outcomes of hospitalized patients with CDI. Method(s): Hospitalized patients with CDI were selected from the 2014 National Inpatient Sample database based on ICD-9 codes. Patient demographics and outcomes of CDI were compared between groups with and without GAD. The outcomes included respiratory failure, renal failure (AKI), sepsis, megacolon, colonic perforation, hypotension/shock, intestinal abscess, hepatic failure, and inpatient mortality. The proportions and means were compared using chi-squared tests and independent t-tests respectively. After adjusting for age, race, sex, and Charlson Comorbidity Index (CCI), a multivariate logistic regression analysis was used to assess GAD as an independent predictor of the outcomes. Result(s): For the year 2014, 72,379 hospitalized adults were diagnosed with CDI. Patients with CDI and comorbid GAD were younger (62.1 vs 65.4 years old, p< 0.001), more likely to be female (72.3% vs 56.3%, p< 0.001), more likely to be white (84% vs 72.6%, p< 0.001), had a lower CCI (3.91 vs 4.57, p< 0.001), had a shorter length of stay (9.55 days vs 10.70 days, p< 0.001), and had a smaller hospital charge ($77,039 vs $96,129, p< 0.001). GAD was noted to be an independent risk factor for inpatient mortality (adjusted odds ratio (aOR) 1.57, 95% confidence interval (CI): 1.40-1.76, p< 0.001), sepsis (aOR 1.26, 95% CI: 1.20- 1.34, p< 0.001), hypotension/shock (aOR 1.12, 95% CI: 1.06-1.19, p< 0.001), respiratory failure (aOR 1.23, 95% CI: 1.14-1.33, p< 0.001), AKI (aOR 1.27, 95% CI: 1.20-1.33, p< 0.001), acute hepatic failure (aOR 1.47, 95% CI: 1.15-1.89, p=0.003), and colonic perforation (aOR 1.62, 95% CI: 1.08-2.43, p=0.019). GAD was not a risk factor for intestinal abscess (aOR 0.99, 95% CI: 0.70-1.40, p=0.969). The analysis for megacolon could not be performed due to small sample size. Conclusion(s): Hospitalized CDI patients with a history of GAD are more likely to have increased mortality, sepsis, multi-organ failure and colon perforation. These findings are likely due to GAD's association with a pro-inflammatory state, inconsistent healthcare utilization, and altered gut microbiota.

KW - acute liver failure

KW - adult

KW - aged

KW - anxiety

KW - Charlson Comorbidity Index

KW - \*Clostridium difficile infection

KW - colon perforation

KW - conference abstract

KW - controlled study

KW - demographics

KW - female

KW - \*generalized anxiety disorder

KW - health care utilization

KW - hospital charge

KW - \*hospital patient

KW - human

KW - human tissue

KW - hypotension

KW - ICD-9

KW - in-hospital mortality

KW - intestine flora

KW - kidney failure

KW - length of stay

KW - liver abscess

KW - major clinical study

KW - male

KW - megacolon

KW - mortality

KW - multiple organ failure

KW - nonhuman

KW - \*outcome assessment

KW - race

KW - respiratory failure

KW - risk factor

KW - sample size

KW - sepsis

KW - treatment failure

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 117

IS - 10 Supplement 2

SP - S172

CY - Netherlands

PB - Wolters Kluwer Health

SN - 1572-0241

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DO - https://dx.doi.org/10.14309/01.ajg.0000857616.64288.ca

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=641287785

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.14309%2f01.ajg.0000857616.64288.caLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Patel&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=Outcomes+of+Clostridioides+difficile+Infection+in+Hospitalized+Patients+With+Generalized+Anxiety+Disorder&volume=117&issue=10+Supplement+2&spage=S172&epage=&date=2022&doi=10.14309%2F01.ajg.0000857616.64288.ca&pmid=&sid=OVID:embase

80.

TY - JOUR

DB - Embase

AN - 641284309

T1 - Outcomes of Patients Hospitalized for Inflammatory Bowel Disease With Comorbid Generalized Anxiety Disorder

T3 - Annual Scientific Meeting of the American College of Gastroenterology, ACG 2022. Charlotte, NC United States.

A1 - Kaye A.J.

A1 - Patel S.J.

A1 - Meyers S.

A1 - Shah V.P.

A1 - Mathew A.G.

A1 - Ahlawat S.

Y1 - 2022//

N2 - Introduction: The development of inflammatory bowel disease (IBD) is multifactorial. A risk factor for IBD is stress from anxiety. Generalized anxiety disorder (GAD), a prevalent form of anxiety, is twice as common in IBD patients. This study explores the outcomes of adults hospitalized for IBD with comorbid GAD. Method(s): Adults hospitalized for IBD were selected from the 2014 National Inpatient Sample database. ICD-9 codes were used to select diagnoses. Demographic data and outcomes of IBD were compared between a subgroup with GAD and a subgroup without GAD. The outcomes of interest were hypotension/shock, sepsis, acute hepatic failure, acute respiratory failure, acute renal failure (AKI), myocardial infarction (MI), acute deep vein thrombosis (DVT), ileus, inpatient mortality, colectomy, intestinal abscess, obstruction, and perforation. Chi-squared tests and independent t-tests were used to compare proportions and means respectively. A multivariate logistic regression analysis was used to establish if GAD is an independent predictor for the outcomes, after adjusting for age, sex, race, and Charlson Comorbidity Index (CCI). Result(s): Among 24,773 IBD patients, 3,400 also had GAD. Patients with comorbid GAD were more likely to be younger (54.8 vs. 55.9 years old, p< 0.001), to be female (68.6% vs. 46.3%, p< 0.001), to be white (86.1% vs. 76.7%, p< 0.001), to have a lower hospitalization cost ($56,313 vs. $68,784, p< 0.001) and a lower CCI (2.45 vs. 2.65, p< 0.001). There was no significant difference in length of stay (6.6 vs. 6.8 days, p=0.264). After adjusting for age, sex, race, and CCI, GAD was found to be a risk factor for sepsis (adjusted odds ratio (aOR) 1.33, 95% confidence interval (CI) 1.17-1.50, p< 0.001), acute hepatic failure (aOR 1.80, 95% CI 1.18-2.73, p=0.006), acute respiratory failure (aOR 1.24, 95% CI 1.04-1.49, p=0.018), inpatient mortality (aOR 1.87, 95% CI 1.50-2.31, p< 0.001), intestinal abscess (aOR 2.35, 95% CI 1.20-4.61, p=0.013) and perforation (aOR 1.44, 95% CI 1.06-1.95, p=0.019). The aORs were not statistically significant for hypotension/shock (p=0.306), AKI (p=0.083), MI (p=0.278), DVT (p=0.972), ileus (p=0.613), colectomy (p=0.760), and obstruction (p=0.129). (Table) Conclusion(s): In IBD patients, GAD is a risk factor for sepsis, acute hepatic failure, acute respiratory failure, intestinal abscess, perforation, and inpatient mortality. The worse outcomes may be attribuTable to the microbiome disruption as well as poor medication compliance associated with GAD. (Table Presented).

KW - abscess

KW - acute kidney failure

KW - acute liver failure

KW - acute respiratory failure

KW - adult

KW - Charlson Comorbidity Index

KW - colectomy

KW - conference abstract

KW - controlled study

KW - deep vein thrombosis

KW - demographics

KW - female

KW - \*generalized anxiety disorder

KW - heart infarction

KW - hospital patient

KW - hospitalization cost

KW - human

KW - human tissue

KW - hypotension

KW - ICD-9

KW - ileus

KW - in-hospital mortality

KW - \*inflammatory bowel disease

KW - length of stay

KW - major clinical study

KW - male

KW - medication compliance

KW - microbiome

KW - nonhuman

KW - \*outcome assessment

KW - perforation

KW - race

KW - risk factor

KW - sepsis

KW - surgery

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 117

IS - 10 Supplement 2

SP - S737

CY - Netherlands

PB - Wolters Kluwer Health

SN - 1572-0241

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DO - https://dx.doi.org/10.14309/01.ajg.0000860708.34581.8a

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=641284309

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.14309%2f01.ajg.0000860708.34581.8aLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kaye&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=Outcomes+of+Patients+Hospitalized+for+Inflammatory+Bowel+Disease+With+Comorbid+Generalized+Anxiety+Disorder&volume=117&issue=10+Supplement+2&spage=S737&epage=&date=2022&doi=10.14309%2F01.ajg.0000860708.34581.8a&pmid=&sid=OVID:embase

81.

TY - JOUR

DB - Embase

AN - 2017344770

ID - 30444815 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30444815]

T1 - Subtypes of Delirium: A Step Toward Precision Medicine

A1 - Stevens R.D.

A1 - Zink E.K.

Y1 - 2018//

KW - artificial ventilation

KW - brain disease

KW - \*delirium

KW - depression

KW - dysbiosis

KW - editorial

KW - epigenetics

KW - exercise

KW - high throughput sequencing

KW - hospitalization

KW - human

KW - intensive care unit

KW - machine learning

KW - \*personalized medicine

KW - phenotype

KW - prediction

KW - prevalence

KW - psychomotor activity

KW - risk factor

KW - sedation

JF - Critical Care Medicine

JA - Crit. Care Med.

LA - English

VL - 46

IS - 12

SP - 2058

EP - 2059

CY - United States

PB - Lippincott Williams and Wilkins

SN - 0090-3493

SN - 1530-0293

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UR - http://journals.lww.com/ccmjournal/pages/default.aspx

DO - https://dx.doi.org/10.1097/CCM.0000000000003462

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2017344770

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1097%2fCCM.0000000000003462Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Stevens&issn=0090-3493&title=Critical+Care+Medicine&atitle=Subtypes+of+Delirium%3A+A+Step+Toward+Precision+Medicine&volume=46&issue=12&spage=2058&epage=2059&date=2018&doi=10.1097%2FCCM.0000000000003462&pmid=30444815&sid=OVID:embase

82.

TY - JOUR

DB - Embase

AN - 640501945

ID - 35606640 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35606640]

T1 - Therapeutic Implications of the Microbial Hypothesis of Mental Illness

T2 - Current Topics in Behavioral Neurosciences

A1 - Savitz J.

A1 - Yolken R.H.

Y1 - 2023//

N2 - There is increasingly compelling evidence that microorganisms may play an etiological role in the emergence of mental illness in a subset of the population. Historically, most work has focused on the neurotrophic herpesviruses, herpes simplex virus type 1 (HSV-1), cytomegalovirus (CMV), and Epstein-Barr virus (EBV) as well as the protozoan, Toxoplasma gondii. In this chapter, we provide an umbrella review of this literature and additionally highlight prospective studies that allow more mechanistic conclusions to be drawn. Next, we focus on clinical trials of anti-microbial medications for the treatment of psychiatric disorders. We critically evaluate six trials that tested the impact of anti-herpes medications on inflammatory outcomes in the context of a medical disorder, nine clinical trials utilizing anti-herpetic medications for the treatment of myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) or schizophrenia, and four clinical trials utilizing anti-parasitic medications for the treatment of schizophrenia. We then turn our attention to evidence for a gut dysbiosis and altered microbiome in psychiatric disorders, and the potential therapeutic effects of probiotics, including an analysis of more than 10 randomized controlled trials of probiotics in the context of schizophrenia, bipolar disorder (BD), and major depressive disorder (MDD).Copyright © 2022, The Author(s), under exclusive license to Springer Nature Switzerland AG.

KW - adaptive immunity

KW - antiretroviral therapy

KW - cancer chemotherapy

KW - Candida albicans

KW - cardiovascular disease

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - central nervous system

KW - cytomegalovirus infection

KW - enzyme immunoassay

KW - Epstein Barr virus

KW - Epstein Barr virus infection

KW - Faecalibacterium

KW - feces microflora

KW - functional magnetic resonance imaging

KW - gastrointestinal tract

KW - genetic risk

KW - Herpes simplex virus

KW - hospital readmission

KW - human

KW - Human herpesvirus 7

KW - humoral immunity

KW - immunosuppressive treatment

KW - intestine flora

KW - Lactobacillus

KW - Lactobacillus plantarum

KW - Lactobacillus rhamnosus

KW - \*mental disease

KW - \*microbial activity

KW - microbial diversity

KW - microbiome

KW - mutagenicity

KW - neurotropism

KW - outcome assessment

KW - physical activity

KW - prospective study

KW - psychotherapy

KW - schizophrenia

KW - sepsis

KW - systematic review

KW - systemic lupus erythematosus

KW - \*therapy effect

KW - Toxoplasma gondii

KW - toxoplasmosis

KW - verbal memory

KW - viremia

KW - virus replication

KW - working memory

KW - antiinfective agent

KW - antiparasitic agent

KW - azithromycin

KW - ganciclovir

KW - haloperidol

KW - immunoglobulin A/ec [Endogenous Compound]

KW - immunoglobulin G/ec [Endogenous Compound]

KW - immunoglobulin M/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lamotrigine

KW - neutralizing antibody/ec [Endogenous Compound]

KW - prebiotic agent

JA - Curr. Top. Behav. Neurosci.

LA - English

VL - 61

SP - 315

EP - 351

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 1866-3370

SN - 1866-3389

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UR - https://www.springer.com/series/7854

DO - https://dx.doi.org/10.1007/7854\_2022\_368

PT - Chapter

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=640501945

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1007%2f7854\_2022\_368Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Savitz&issn=1866-3370&title=Current+Topics+in+Behavioral+Neurosciences&atitle=Therapeutic+Implications+of+the+Microbial+Hypothesis+of+Mental+Illness&volume=61&issue=&spage=315&epage=351&date=2023&doi=10.1007%2F7854\_2022\_368&pmid=35606640&sid=OVID:embase

83.

TY - JOUR

DB - Embase

AN - 640501931

ID - 35543867 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35543867]

T1 - Fungal Forces in Mental Health: Microbial Meddlers or Function Fixers?

T2 - Current Topics in Behavioral Neurosciences

A1 - Severance E.G.

Y1 - 2023//

N2 - In the mental health field, the gut-brain axis and associated pathways represent putative mechanisms by which gastrointestinal (GI) microbes and their gene products and metabolites can access and influence the central nervous system (CNS). These GI-centered investigations focus on bacteria, with significant information gaps existing for other microbial community members, such as fungi. Fungi are part of a complex and functionally diverse taxonomic kingdom whose interactions with hosts can be conversely deadly and beneficial. As serious sources of morbidity and mortality, fungal pathogens can quickly turn healthy microbiomes into toxic cycles of inflammation, gut permeability, and dysbiosis. Fungal commensals are also important human symbionts that provide a rich source of physiological functions to the host, such as protection against intestinal injuries, maintenance of epithelial structural integrities, and immune system development and regulation. Promising treatment compounds derived from fungi include antibiotics, probiotics, and antidepressants. Here I aim to illuminate the many attributes of fungi as they are applicable to overall improving our understanding of the mechanisms at work in psychiatric disorders. Healing the gut and its complex ecosystem is currently achievable through diet, probiotics, prebiotics, and other strategies, yet it is critical to recognize that the success of these interventions relies on a more precisely defined role of the fungal and other non-bacterial components of the microbiome.Copyright © 2022, The Author(s), under exclusive license to Springer Nature Switzerland AG.

KW - apoptosis

KW - aspergillosis

KW - blastomycosis

KW - brain-gut axis

KW - Candida albicans

KW - candidemia

KW - coccidioidomycosis

KW - Cryptococcus neoformans

KW - disease severity

KW - DNA sequencing

KW - dysbiosis

KW - environmental factor

KW - fecal microbiota transplantation

KW - \*fungus

KW - high throughput analysis

KW - Histoplasma

KW - histoplasmosis

KW - human

KW - immunoassay

KW - inflammation

KW - irritable colon

KW - mental disease

KW - \*mental health

KW - morbidity

KW - mortality

KW - nonhuman

KW - Pneumocystis

KW - Pneumocystis jiroveci

KW - prevalence

KW - schizophrenia

KW - prebiotic agent

KW - probiotic agent

KW - RNA 16S/ec [Endogenous Compound]

KW - virulence factor/ec [Endogenous Compound]

JA - Curr. Top. Behav. Neurosci.

LA - English

VL - 61

SP - 163

EP - 179

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 1866-3370

SN - 1866-3389

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UR - https://www.springer.com/series/7854

DO - https://dx.doi.org/10.1007/7854\_2022\_364

PT - Chapter

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=640501931

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1007%2f7854\_2022\_364Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Severance&issn=1866-3370&title=Current+Topics+in+Behavioral+Neurosciences&atitle=Fungal+Forces+in+Mental+Health%3A+Microbial+Meddlers+or+Function+Fixers%3F&volume=61&issue=&spage=163&epage=179&date=2023&doi=10.1007%2F7854\_2022\_364&pmid=35543867&sid=OVID:embase

84.

TY - JOUR

DB - Embase

AN - 2024069994

ID - 37061021 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37061021]

T1 - Brain-gut microbiome profile of neuroticism predicts food addiction in obesity: A transdiagnostic approach

A1 - Zhang X.

A1 - Bhatt R.R.

A1 - Todorov S.

A1 - Gupta A.

Y1 - 2023//

N2 - Neuroticism is one of the most robust risk factors for addictive behaviors including food addiction (a key contributor to obesity), although the associated mechanisms are not well understood. A transdiagnostic approach was used to identify the neuroticism-related neuropsychological and gut metabolomic patterns associated with food addiction. Predictive modeling of neuroticism was implemented using multimodal features (23 clinical, 13,531 resting-state functional connectivity (rsFC), 336 gut metabolites) in 114 high body mass index (BMI >=25 kg/m2) (cross-sectional) participants. Gradient boosting machine and logistic regression models were used to evaluate classification performance for food addiction. Neuroticism was significantly associated with food addiction (P < 0.001). Neuroticism-related features predicted food addiction with high performance (89% accuracy). Multimodal models performed better than single-modal models in predicting food addiction. Transdiagnostic alterations corresponded to rsFC involved in the emotion regulation, reward, and cognitive control and self-monitoring networks, and the metabolite 3-(4-hydroxyphenyl) propionate, as well as anxiety symptoms. Neuroticism moderated the relationship between BMI and food addiction. Neuroticism drives neuropsychological and gut microbial signatures implicated in dopamine synthesis and inflammation, anxiety, and food addiction. Such transdiagnostic models are essential in identifying mechanisms underlying food addiction in obesity, as it can help develop multiprong interventions to improve symptoms.Copyright © 2023 The Authors

KW - adult

KW - anxiety disorder

KW - article

KW - body mass

KW - \*brain-gut axis

KW - clinical feature

KW - controlled study

KW - cross validation

KW - cross-sectional study

KW - disease association

KW - dopamine metabolism

KW - emotion regulation

KW - executive function

KW - female

KW - \*food addiction/di [Diagnosis]

KW - functional connectivity

KW - human

KW - human experiment

KW - inflammation

KW - logistic regression analysis

KW - machine learning

KW - male

KW - metabolite

KW - neuropsychology

KW - \*neurosis

KW - \*obesity

KW - omics

KW - \*prediction

KW - predictor variable

KW - resting state network

KW - reward

KW - self monitoring

KW - self report

KW - dopamine/ec [Endogenous Compound]

KW - propionic acid/ec [Endogenous Compound]

KW - unclassified drug

KW - MRI scanner

KW - 3 (4 hydroxyphenyl)propionic acid/ec [Endogenous Compound]

KW - Prisma

JF - Progress in Neuro-Psychopharmacology and Biological Psychiatry

JA - Prog. Neuro-Psychopharmacol. Biol. Psychiatry

LA - English

VL - 125

SP - 110768

CY - United States

PB - Elsevier Inc.

SN - 0278-5846

SN - 1878-4216

AD - A. Gupta, Goodman-Luskin Microbiome Center, G. Oppenheimer Center for Neurobiology of Stress and Resilience, Neuroimaging Core, Ingestive Behavior and Obesity Program, UCLA Vatche and Tamar Manoukian Division of Digestive Diseases, David Geffen School of Medicine, UCLA CHS 42-210, 10833 Le Conte Avenue, Los Angeles, CA 90095-7378, United States. E-mail: agupta@mednet.ucla.edu

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M2 - Prisma: Siemens [Germany]

C1 - Prisma: Siemens [Germany]

C2 - Siemens [Germany]

UR - http://www.sciencedirect.com/science/journal/02785846

DO - https://dx.doi.org/10.1016/j.pnpbp.2023.110768

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2024069994

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1016%2fj.pnpbp.2023.110768Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=0278-5846&title=Progress+in+Neuro-Psychopharmacology+and+Biological+Psychiatry&atitle=Brain-gut+microbiome+profile+of+neuroticism+predicts+food+addiction+in+obesity%3A+A+transdiagnostic+approach&volume=125&issue=&spage=110768&epage=&date=2023&doi=10.1016%2Fj.pnpbp.2023.110768&pmid=37061021&sid=OVID:embase

85.

TY - JOUR

DB - Embase

AN - 2022705986

ID - 37090714 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37090714]

T1 - The immunomodulatory mechanisms for acupuncture practice

A1 - Wang M.

A1 - Liu W.

A1 - Ge J.

A1 - Liu S.

Y1 - 2023//

N2 - The system physiology approaches that emerge in western countries in recent years echo the holistic view of ancient Traditional Chinese Medicine (TCM) practices that deal with the root, rather than only the symptoms of diseases. Particularly, TCM practices, including acupuncture, emphasize the mobilization of self-healing mechanisms to bring back body homeostasis. Acupuncture has been practiced for over two thousand years to modulate body physiology via stimulation at specific body regions (acupoints). With the development of various research on acupuncture therapy, its regulatory effect on the immune system has been gradually recognized, especially on immunological diseases, including infectious and allergic diseases. In this study, we reviewed the immunomodulatory mechanism of acupuncture and systematically integrates existing research to respectively elucidate the modulatory mechanisms of acupuncture on the innate immune system, adaptive immune system, and well-known neuroanatomical mechanisms, including intact somatosensory-autonomic reflex pathway. With the advances made in recent systems physiology studies, we now have a great opportunity to gain insight into how acupuncture modulates immunity, and subsequently improves its efficacy.Copyright © 2023 Wang, Liu, Ge and Liu.

KW - abdominal pain

KW - \*acupuncture

KW - acupuncture point

KW - acute pancreatitis

KW - adaptive immunity

KW - adrenalectomy

KW - allergic disease

KW - antigen presenting cell

KW - antiinflammatory activity

KW - anxiety

KW - asthma

KW - astrocyte

KW - autonomic nervous system

KW - autonomic reflex

KW - brain blood flow

KW - brain ischemia

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - central nervous system

KW - chronic obstructive lung disease

KW - collagen-induced arthritis

KW - communicable disease

KW - coronary artery ligation

KW - cytotoxic T lymphocyte

KW - delayed hypersensitivity

KW - depression

KW - electroacupuncture

KW - electrostimulation

KW - endotoxemia

KW - enteropathy

KW - gastrointestinal disease

KW - gastrointestinal motility

KW - glaucoma

KW - Hamilton Depression Rating Scale

KW - hematopoietic stem cell

KW - homeostasis

KW - human

KW - humoral immunity

KW - hyperalgesia

KW - hypothalamus hypophysis adrenal system

KW - immune response

KW - immune system

KW - immunohistochemistry

KW - \*immunomodulation

KW - immunopathology

KW - immunoregulation

KW - immunosuppressive treatment

KW - inflammation

KW - inflammatory bowel disease

KW - inflammatory pain

KW - innate immunity

KW - intestine

KW - intestine flora

KW - intestine lymphatic tissue

KW - irritable colon

KW - lamina propria

KW - lateral hypothalamus

KW - leukocyte count

KW - lymphocyte count

KW - mast cell

KW - mechanical stimulation

KW - medical practice

KW - mental disease

KW - microglia

KW - mobilization

KW - moxibustion

KW - muscle atrophy

KW - natural killer cell

KW - nerve degeneration

KW - neurite outgrowth

KW - neuroanatomy

KW - neuropathic pain

KW - nonhuman

KW - osteoarthritis

KW - ovary cancer

KW - Parkinson disease

KW - phagocytosis

KW - regulatory T lymphocyte

KW - respiratory tract allergy

KW - review

KW - sensory nerve cell

KW - sepsis

KW - signal transduction

KW - spinal cord injury

KW - spleen

KW - stem cell niche

KW - sympathetic ganglion

KW - Th1 cell

KW - Th17 cell

KW - Th2 cell

KW - Th9 cell

KW - tissue regeneration

KW - trigeminus ganglion

KW - tumor associated leukocyte

KW - tumor immunity

KW - tumor microenvironment

KW - ulcerative colitis

KW - upregulation

KW - vagotomy

KW - autoantibody

KW - calcitonin gene related peptide

KW - chemokine receptor CCR2

KW - corticotropin

KW - corticotropin releasing factor

KW - cyclophosphamide

KW - cytokine

KW - cytotoxic T lymphocyte antigen 4

KW - endocannabinoid

KW - gamma interferon

KW - glucocorticoid

KW - hydrocortisone

KW - immunoglobulin E

KW - immunoglobulin enhancer binding protein

KW - inflammasome

KW - interleukin 1

KW - interleukin 10

KW - interleukin 12

KW - interleukin 13

KW - interleukin 17

KW - interleukin 1beta

KW - interleukin 2

KW - interleukin 23

KW - interleukin 33

KW - interleukin 4

KW - interleukin 5

KW - interleukin 6

KW - lipopolysaccharide

KW - methylprednisolone

KW - monocyte chemotactic protein 1

KW - morphine

KW - neuropeptide Y

KW - noradrenalin

KW - ovalbumin

KW - perforin

KW - T lymphocyte receptor

KW - toll like receptor

KW - toll like receptor 2

KW - toll like receptor 4

KW - tryptase

KW - tumor necrosis factor

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 14

SP - 1147718

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2023.1147718

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2022705986

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3389%2ffimmu.2023.1147718Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=1664-3224&title=Frontiers+in+Immunology&atitle=The+immunomodulatory+mechanisms+for+acupuncture+practice&volume=14&issue=&spage=1147718&epage=&date=2023&doi=10.3389%2Ffimmu.2023.1147718&pmid=37090714&sid=OVID:embase

86.

TY - JOUR

DB - Embase

AN - 2021397992

ID - 36459977 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36459977]

T1 - Genomic Medicine Year in Review: 2022

A1 - Manolio T.A.

A1 - Narula J.

A1 - Bult C.J.

A1 - Chisholm R.L.

A1 - Deverka P.A.

A1 - Ginsburg G.S.

A1 - Goldrich M.

A1 - Green E.D.

A1 - Jarvik G.P.

A1 - Mensah G.A.

A1 - Ramos E.M.

A1 - Relling M.V.

A1 - Roden D.M.

A1 - Rowley R.

A1 - Williams M.S.

Y1 - 2022//

KW - anticoagulant therapy

KW - cardiomyopathy

KW - clinical decision making

KW - copy number variation

KW - cost effectiveness analysis

KW - depression

KW - diagnostic accuracy

KW - familial hypercholesterolemia

KW - follow up

KW - genetic analysis

KW - genetic counseling

KW - genetic risk

KW - genetic screening

KW - \*genomic medicine

KW - genotype

KW - genotyping

KW - health care personnel

KW - health care system

KW - heart arrhythmia

KW - high throughput sequencing

KW - human

KW - hypercholesterolemia

KW - hyperlipidemia

KW - hypertension

KW - intensive care unit

KW - kidney failure

KW - Lynch syndrome

KW - microbiome

KW - newborn intensive care

KW - note

KW - pharmacogenomics

KW - point of care testing

KW - polymerase chain reaction

KW - prenatal diagnosis

KW - prevalence

KW - psychosis

KW - randomized controlled trial (topic)

KW - risk factor

KW - schizophrenia

KW - sensitivity and specificity

KW - single nucleotide polymorphism

KW - systolic blood pressure

KW - tendon reflex

KW - tuberous sclerosis

KW - whole exome sequencing

KW - whole genome sequencing

KW - aminoglycoside/ec [Endogenous Compound]

KW - apolipoprotein L1/ec [Endogenous Compound]

KW - biological marker/ec [Endogenous Compound]

KW - low density lipoprotein cholesterol/ec [Endogenous Compound]

JF - American Journal of Human Genetics

JA - Am. J. Hum. Genet.

LA - English

VL - 109

IS - 12

SP - 2101

EP - 2104

CY - United States

PB - Cell Press

SN - 0002-9297

SN - 1537-6605

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UR - http://www.elsevier.com/wps/find/journaldescription.cws\_home/713561/description#description

DO - https://dx.doi.org/10.1016/j.ajhg.2022.11.003

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021397992

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1016%2fj.ajhg.2022.11.003Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Manolio&issn=0002-9297&title=American+Journal+of+Human+Genetics&atitle=Genomic+Medicine+Year+in+Review%3A+2022&volume=109&issue=12&spage=2101&epage=2104&date=2022&doi=10.1016%2Fj.ajhg.2022.11.003&pmid=36459977&sid=OVID:embase

87.

TY - JOUR

DB - Embase

AN - 634470395

ID - 33732655 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33732655]

T1 - Factors Associated With the Microbiome in Moderate-Late Preterm Babies: A Cohort Study From the DIAMOND Randomized Controlled Trial

A1 - Chong C.Y.L.

A1 - Vatanen T.

A1 - Alexander T.

A1 - Bloomfield F.H.

A1 - O'Sullivan J.M.

AO - Chong, Clara Yieh Lin; ORCID: https://orcid.org/0000-0001-6796-9914

Y1 - 2021//

N2 - The gut microbiota of preterm infants is affected by perinatal factors and, in turn, may impact upon infant health. In this study, we collected fecal samples at Day-10 (D10) and 4-months corrected-age (4M) from 227 moderate-late preterm (MLPT) babies enrolled in a randomized controlled trial of nutritional management. A total of 320 samples underwent 16S amplicon sequencing, and shotgun metagenomic sequencing was performed on 94 samples from the 4M time point. The microbiome of babies whose families lived in lower socioeconomic status (SES) areas exhibited a significantly higher microbial alpha diversity at D10 (Wilcoxon test, p = 0.021), greater abundance of Bifidobacterium (linear model, q = 0.020) at D10 and Megasphaera (q = 0.031) at 4M. Hospital of birth explained 5.2% of the observed variance in 4M samples (PERMANOVA, p = 0.038), with Staphylococcus aureus more abundant in fecal samples from babies born in Middlemore hospital (linear model, q = 0.016). Maternal antibiotic (Wilcoxon test, p = 0.013) and probiotic (p = 0.04) usage within the four-week period before sample collection was associated with a reduction in the alpha diversity of D10 samples. Infant probiotic intake explained 2.1% (PERMANOVA, p = 0.021) of the variance in the D10 microbial profile with increased Lactobacillus (linear model, q = 1.1 x 10-10) levels. At 4M, the microbiome of infants who were breastmilk fed had reduced alpha diversity when compared to non-breastmilk fed infants (Wilcoxon test, p < 0.05). Although causality cannot be inferred within our study, we conclude that in MLPT babies, maternal socioeconomic factors, as well as the perinatal medical environment and nutrition impact on the development of the newborn microbiome.© Copyright © 2021 Chong, Vatanen, Alexander, Bloomfield and O'Sullivan.

KW - Actinobacteria

KW - Actinomycetaceae

KW - anthropometry

KW - article

KW - Atopobiaceae

KW - Bacteroidaceae

KW - Bacteroides

KW - Bacteroidetes

KW - Bifidobacteriaceae

KW - Bifidobacterium bifidum

KW - Bifidobacterium longum subsp. infantis

KW - bioinformatics

KW - breast feeding

KW - child health

KW - Clostridium

KW - cohort analysis

KW - Coriobacteriaceae

KW - Corynebacteriaceae

KW - depression

KW - DNA extraction

KW - DNA sequencing

KW - educational status

KW - Eggerthellaceae

KW - electroencephalography

KW - Enterobacteriaceae

KW - Erysipelotrichaceae

KW - ethnicity

KW - feces analysis

KW - female

KW - Firmicutes

KW - follow up

KW - gestational age

KW - human

KW - human experiment

KW - infant

KW - intestine flora

KW - intravenous feeding

KW - Lactobacillaceae

KW - Lactobacillus acidophilus

KW - male

KW - maternal age

KW - Megasphaera

KW - metagenomics

KW - microbial community

KW - microbial diversity

KW - \*microbiome

KW - multicenter study (topic)

KW - Pasteurellaceae

KW - Peptostreptococcaceae

KW - \*prematurity

KW - Proteobacteria

KW - randomized controlled trial (topic)

KW - Ruminococcaceae

KW - shotgun sequencing

KW - social status

KW - socioeconomics

KW - Staphylococcus aureus

KW - stress management

KW - Veillonellaceae

KW - probiotic agent

KW - diagnostic kit

KW - DNA purification kit

KW - genetic analyzer

KW - high throughput sequencer

KW - photometer

KW - AllPrep DNA/RNA mini

KW - NanoPhotometer N60

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 11

SP - 595323

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

AD - T. Vatanen, Liggins Institute, The University of Auckland, Auckland, New Zealand, F.H. Bloomfield, Liggins Institute, The University of Auckland, Auckland, New Zealand, J.M. O'Sullivan, Liggins Institute, The University of Auckland, Auckland, New Zealand, T. Vatanen, Infectious Disease Microbiome Program, The Broad Institute of MIT and Harvard, Cambridge, MA, United States, J.M. O'Sullivan, The Maurice Wilkins Centre, The University of Auckland, Auckland, New Zealand

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M1 - (O'Sullivan) The Maurice Wilkins Centre, The University of Auckland, Auckland, New Zealand

M2 - Allprep DNA/RNA Mini: Qiagen, MiSeq: Illumina, NanoPhotometer N60, NovaSeq 6000

C1 - Allprep DNA/RNA Mini: Qiagen, MiSeq: Illumina, NanoPhotometer N60, NovaSeq 6000

C2 - Invitrogen [United States], Qiagen, Illumina

UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2021.595323

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=634470395

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3389%2ffcimb.2021.595323Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Chong&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Factors+Associated+With+the+Microbiome+in+Moderate-Late+Preterm+Babies%3A+A+Cohort+Study+From+the+DIAMOND+Randomized+Controlled+Trial&volume=11&issue=&spage=595323&epage=&date=2021&doi=10.3389%2Ffcimb.2021.595323&pmid=33732655&sid=OVID:embase

88.

TY - JOUR

DB - Embase

AN - 2022485314

ID - 37056708 [https://www.ncbi.nlm.nih.gov/pubmed/?term=37056708]

T1 - Application background and mechanism of short-chain fatty acids in sepsis-associated encephalopathy

A1 - Zhang Q.

A1 - Lu C.

A1 - Fan W.

A1 - Zhang J.

A1 - Yin Y.

Y1 - 2023//

N2 - Sepsis-associated encephalopathy (SAE) is a frequent brain dysfunction found in sepsis patients, manifesting as delirium, cognitive impairment, and abnormal behaviors. The gut microbiome and short-chain fatty acids (SCFAs) are particularly associated with neuroinflammation in patients with SAE, thus noticeably attracting scholars' attention. The association of brain function with the gut-microbiota-brain axis was frequently reported. Although the occurrence, development, and therapeutic strategies of SAE have been extensively studied, SAE remains a critical factor in determining the long-term prognosis of sepsis and is typically associated with high mortality. This review concentrated on the interaction of SCFAs with microglia in the central nervous system and discussed the anti-inflammatory and immunomodulatory effects of SCFAs by binding to free fatty acid receptors or acting as histone deacetylase inhibitors. Finally, the prospects of dietary intervention using SCFAs as dietary nutrients in improving the prognosis of SAE were reviewed.Copyright © 2023 Zhang, Lu, Fan, Zhang and Yin.

KW - antiinflammatory activity

KW - antioxidant activity

KW - blood brain barrier

KW - brain-gut axis

KW - central nervous system

KW - diet therapy

KW - energy metabolism

KW - fermentation

KW - human

KW - immunomodulation

KW - intestine flora

KW - intestine innervation

KW - microglia

KW - nervous system inflammation

KW - pathogenesis

KW - prognosis

KW - sepsis

KW - \*sepsis associated encephalopathy

KW - short survey

KW - G protein coupled receptor/ec [Endogenous Compound]

KW - histone deacetylase inhibitor

KW - \*short chain fatty acid

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 13

SP - 1137161

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

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M1 - (Lu) Department of Anesthesiology, The Second Hospital of Jilin University, Changchun, China

UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2023.1137161

PT - Short Survey

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2022485314

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.3389%2ffcimb.2023.1137161Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Application+background+and+mechanism+of+short-chain+fatty+acids+in+sepsis-associated+encephalopathy&volume=13&issue=&spage=1137161&epage=&date=2023&doi=10.3389%2Ffcimb.2023.1137161&pmid=37056708&sid=OVID:embase

89.

TY - JOUR

DB - Embase

AN - 2023317616

ID - 36995889 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36995889]

T1 - Second Brazilian consensus on the management of ulcerative colitis in adults: a consensus of the Brazilian Organization for Crohn's Disease and Colitis (GEDIIB)

T3 - Segundo Consenso Brasileiro no manejo da retocolite ulcerativa em adultos: um consenso da Organizacao Brasileira para Doenca de Crohn e Colite (GEDIIB)

A1 - Baima J.P.

A1 - Imbrizi M.

A1 - Andrade A.R.

A1 - Chebli L.A.

A1 - Argollo M.C.

A1 - Queiroz N.S.F.

A1 - De Azevedo M.F.C.

A1 - Vieira A.

A1 - Costa M.H.D.M.

A1 - Froes R.S.B.

A1 - Cancela E Penna F.G.

A1 - Quaresma A.B.

A1 - Damiao A.O.M.C.

A1 - Da Silva Moraes A.C.

A1 - dos Santos C.H.M.

A1 - Flores C.

A1 - Zaltman C.

A1 - Vilela E.G.

A1 - Morsoletto E.

A1 - Goncalves Filho F.D.A.

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Y1 - 2022//

N2 - Background - Inflammatory bowel diseases are immune-mediated disorders that include Crohn's disease (CD) and ulcerative colitis (UC). UC is a progressive disease that affects the colorectal mucosa causing debilitating symptoms leading to high morbidity and work disability. As a consequence of chronic colonic inflammation, UC is also associated with an increased risk of colorectal cancer. Objective - This consensus aims to provide guidance on the most effective medical management of adult patients with UC. Methods - A consensus statement was developed by stakeholders representing Brazilian gastroenterologists and colorectal surgeons (Brazilian Organization for Crohn's Disease and Colitis [GEDIIB]). A systematic review including the most recent evidence was conducted to support the recommendations and statements. All recommendations/statements were endorsed using a modified Delphi Panel by the stakeholders/experts in inflammatory bowel disease with at least 80% or greater consensus. Results and conclusion - The medical recommendations (pharmacological and non-pharmacological) were mapped according to the stage of treatment and severity of the disease onto three domains: management and treatment (drug and surgical interventions), criteria for evaluating the effectiveness of medical treatment, and follow-up/ patient monitoring after initial treatment. The consensus targeted general practitioners, gastroenterologists and surgeons who manage patients with UC, and supports decision-making processes by health insurance companies, regulatory agencies, health institutional leaders, and administrators.Copyright © 2022, IBEPEGE - Inst. Bras. Estudos Pesquisas Gastroent.. All rights reserved.

KW - abdominal pain

KW - abdominal radiography

KW - abdominal tenderness

KW - acute pancreatitis/si [Side Effect]

KW - adult

KW - anemia

KW - anorexia

KW - anxiety

KW - apoptosis

KW - arthralgia

KW - article

KW - asthenia

KW - bacteremia

KW - basal cell carcinoma

KW - bipolar disorder

KW - bloody diarrhea

KW - bone marrow suppression/si [Side Effect]

KW - \*Brazilian

KW - carcinogenesis

KW - cell proliferation

KW - cholangitis

KW - chromoendoscopy

KW - Clostridioides difficile

KW - Clostridium difficile infection

KW - coinfection

KW - colectomy

KW - \*colitis

KW - colonoscopy

KW - colorectal cancer

KW - \*consensus

KW - constipation

KW - \*Crohn disease

KW - Cushing syndrome

KW - cutaneous melanoma

KW - cytomegalovirus infection

KW - cytotoxicity

KW - decision making

KW - deep vein thrombosis

KW - demyelinating disease

KW - diagnostic accuracy

KW - disease duration

KW - disease severity

KW - drug metabolism

KW - ecchymosis

KW - endoscopy

KW - enteropathy

KW - Epstein Barr virus infection

KW - erythema

KW - erythrocyte sedimentation rate

KW - Escherichia coli

KW - fatigue

KW - fever

KW - follow up

KW - gastroenterologist

KW - genetic polymorphism

KW - glaucoma

KW - headache

KW - health insurance

KW - heart failure

KW - human

KW - human tissue

KW - hypertension

KW - immune response

KW - immunization

KW - immunogenicity

KW - immunosuppressive treatment

KW - inflammation

KW - inflammatory bowel disease

KW - insomnia

KW - intervertebral disk degeneration

KW - intestine flora

KW - kidney biopsy

KW - lactation

KW - Lactobacillus

KW - Lactobacillus reuteri

KW - Lactobacillus rhamnosus

KW - latent tuberculosis

KW - leadership

KW - leukocytosis

KW - liver toxicity

KW - lung toxicity

KW - lymphadenopathy

KW - malaise

KW - male infertility

KW - medical assessment

KW - melanoma

KW - monotherapy

KW - morbidity

KW - nephrotoxicity

KW - neurotoxicity

KW - nuclear magnetic resonance imaging

KW - osteoporosis

KW - pancolitis

KW - patient monitoring

KW - postoperative complication

KW - predictive value

KW - premature labor

KW - prevalence

KW - psoriatic arthritis

KW - pyoderma gangrenosum

KW - quality of life

KW - rectum hemorrhage

KW - rheumatoid arthritis

KW - risk factor

KW - sacroiliitis

KW - scoring system

KW - sepsis

KW - skin atrophy

KW - splenic flexure

KW - spondylarthritis

KW - standardized incidence ratio

KW - stillbirth

KW - tachycardia

KW - tenesmus

KW - \*ulcerative colitis

KW - uterine cervix dysplasia

KW - vaccination

KW - viremia

KW - vomiting

KW - white light endoscopy

KW - wound healing

KW - adalimumab/sc [Subcutaneous Drug Administration]

KW - aminosalicylic acid

KW - azathioprine/ae [Adverse Drug Reaction]

KW - azathioprine/po [Oral Drug Administration]

KW - bisphosphonic acid derivative

KW - budesonide

KW - C reactive protein/ec [Endogenous Compound]

KW - calgranulin

KW - ciprofloxacin

KW - corticosteroid

KW - cyclosporine/iv [Intravenous Drug Administration]

KW - filgotinib/po [Oral Drug Administration]

KW - folic acid

KW - gamma interferon

KW - ganciclovir

KW - golimumab/sc [Subcutaneous Drug Administration]

KW - hepatitis B surface antigen

KW - hydrocortisone/iv [Intravenous Drug Administration]

KW - infliximab/iv [Intravenous Drug Administration]

KW - infliximab/sc [Subcutaneous Drug Administration]

KW - integrin

KW - interleukin 2

KW - interleukin 6

KW - Janus kinase inhibitor

KW - lipoxygenase

KW - macrolide

KW - mercaptopurine/po [Oral Drug Administration]

KW - mesalazine/po [Oral Drug Administration]

KW - methotrexate/po [Oral Drug Administration]

KW - methylprednisolone

KW - metronidazole

KW - mycophenolate mofetil

KW - natalizumab

KW - omalizumab

KW - ozanimod/po [Oral Drug Administration]

KW - prednisolone/po [Oral Drug Administration]

KW - prednisone/po [Oral Drug Administration]

KW - probiotic agent

KW - prostaglandin synthase

KW - salazosulfapyridine/po [Oral Drug Administration]

KW - tacrolimus

KW - tocilizumab

KW - tofacitinib/po [Oral Drug Administration]

KW - tumor necrosis factor

KW - upadacitinib/po [Oral Drug Administration]

KW - ustekinumab/iv [Intravenous Drug Administration]

KW - ustekinumab/sc [Subcutaneous Drug Administration]

KW - vedolizumab/iv [Intravenous Drug Administration]

KW - vedolizumab/sc [Subcutaneous Drug Administration]

KW - vitamin D

XT - acute pancreatitis / side effect / azathioprine

XT - bone marrow suppression / side effect / azathioprine

XT - azathioprine / adverse drug reaction / acute pancreatitis

XT - azathioprine / adverse drug reaction / bone marrow suppression

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DB - Embase

AN - 2022826188

ID - 36399701 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36399701]

T1 - A phase 2 study of interleukin-22 and systemic corticosteroids as initial treatment for acute GVHD of the lower GI tract

A1 - Ponce D.M.

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A1 - Slingerland J.

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Y1 - 2023//

N2 - Graft-versus-host disease (GVHD) is a major cause of morbidity and mortality following allogeneic hematopoietic transplantation. In experimental models, interleukin-22 promotes epithelial regeneration and induces innate antimicrobial molecules. We conducted a multicenter single-arm phase 2 study evaluating the safety and efficacy of a novel recombinant human interleukin-22 dimer, F-652, used in combination with systemic corticosteroids for treatment of newly diagnosed lower gastrointestinal acute GVHD. The most common adverse events were cytopenias and electrolyte abnormalities, and there were no dose-limiting toxicities. Out of 27 patients, 19 (70%; 80% confidence interval, 56%-79%) achieved a day-28 treatment response, meeting the prespecified primary endpoint. Responders exhibited a distinct fecal microbiota composition characterized by expansion of commensal anaerobes, which correlated with increased overall microbial alpha-diversity, suggesting improvement of GVHD-associated dysbiosis. This work demonstrates a potential approach for combining immunosuppression with tissue-supportive strategies to enhance recovery of damaged mucosa and promote microbial health in patients with gastrointestinal GVHD. This trial was registered at www.clinicaltrials.gov as NCT02406651.Copyright © 2023 The American Society of Hematology

KW - abdominal pain/si [Side Effect]

KW - \*acute graft versus host disease/co [Complication]

KW - \*acute graft versus host disease/dt [Drug Therapy]

KW - adult

KW - aged

KW - alanine aminotransferase blood level

KW - alkaline phosphatase blood level

KW - anemia/si [Side Effect]

KW - anorexia/si [Side Effect]

KW - anxiety disorder/si [Side Effect]

KW - article

KW - aspartate aminotransferase blood level

KW - body weight gain

KW - body weight loss

KW - catheter infection/si [Side Effect]

KW - chill/si [Side Effect]

KW - clinical article

KW - cohort analysis

KW - \*combination drug therapy

KW - controlled study

KW - corticosteroid therapy

KW - coughing/si [Side Effect]

KW - cytopenia/si [Side Effect]

KW - dizziness/si [Side Effect]

KW - drug dose reduction

KW - drug efficacy

KW - drug safety

KW - dysbiosis

KW - dysgeusia/si [Side Effect]

KW - dyspnea/si [Side Effect]

KW - electrolyte disturbance/si [Side Effect]

KW - epistaxis/si [Side Effect]

KW - fatigue/si [Side Effect]

KW - feces microflora

KW - female

KW - fever/si [Side Effect]

KW - \*gastrointestinal disease/dt [Drug Therapy]

KW - graft versus host reaction/dt [Drug Therapy]

KW - graft versus host reaction/pc [Prevention]

KW - human

KW - hyperbilirubinemia/si [Side Effect]

KW - hyperglycemia/si [Side Effect]

KW - hyperkalemia/si [Side Effect]

KW - hypermagnesemia/si [Side Effect]

KW - hypernatremia/si [Side Effect]

KW - hypertension/si [Side Effect]

KW - hypertriglyceridemia/si [Side Effect]

KW - hypoalbuminemia/si [Side Effect]

KW - hypocalcemia/si [Side Effect]

KW - hypoglycemia/si [Side Effect]

KW - hypokalemia/si [Side Effect]

KW - hypomagnesemia/si [Side Effect]

KW - hyponatremia/si [Side Effect]

KW - hypophosphatemia/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - international normalized ratio

KW - leukopenia/si [Side Effect]

KW - liver function test

KW - low drug dose

KW - \*lower gastrointestinal tract

KW - lymphocytopenia/si [Side Effect]

KW - male

KW - microbial diversity

KW - multicenter study

KW - muscle weakness/si [Side Effect]

KW - nausea/si [Side Effect]

KW - neutropenia/si [Side Effect]

KW - peripheral edema/si [Side Effect]

KW - phase 2 clinical trial

KW - pruritus/si [Side Effect]

KW - sepsis/si [Side Effect]

KW - side effect/si [Side Effect]

KW - single drug dose

KW - squamous cell skin carcinoma/rt [Radiotherapy]

KW - squamous cell skin carcinoma/si [Side Effect]

KW - squamous cell skin carcinoma/su [Surgery]

KW - systemic therapy

KW - thorax pain/si [Side Effect]

KW - thrombocytopenia/si [Side Effect]

KW - treatment response

KW - tremor/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - xerophthalmia/si [Side Effect]

KW - xerosis/si [Side Effect]

KW - xerostomia/si [Side Effect]

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - alkaline phosphatase/ec [Endogenous Compound]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - calcineurin inhibitor/cb [Drug Combination]

KW - calcineurin inhibitor/dt [Drug Therapy]

KW - cyclophosphamide/dt [Drug Therapy]

KW - methotrexate/cb [Drug Combination]

KW - methotrexate/dt [Drug Therapy]

KW - mycophenolate mofetil/cb [Drug Combination]

KW - mycophenolate mofetil/dt [Drug Therapy]

KW - \*prednisone/ae [Adverse Drug Reaction]

KW - \*prednisone/ct [Clinical Trial]

KW - \*prednisone/cb [Drug Combination]

KW - \*prednisone/dt [Drug Therapy]

KW - \*prednisone/iv [Intravenous Drug Administration]

KW - \*prednisone/tm [Unexpected Outcome of Drug Treatment]

KW - \*recombinant cytokine/ae [Adverse Drug Reaction]

KW - \*recombinant cytokine/ct [Clinical Trial]

KW - \*recombinant cytokine/cb [Drug Combination]

KW - \*recombinant cytokine/dt [Drug Therapy]

KW - \*recombinant cytokine/iv [Intravenous Drug Administration]

KW - \*recombinant cytokine/pk [Pharmacokinetics]

KW - \*recombinant cytokine/tm [Unexpected Outcome of Drug Treatment]

KW - unclassified drug

KW - \*f 652/ae [Adverse Drug Reaction]

KW - \*f 652/ct [Clinical Trial]

KW - \*f 652/cb [Drug Combination]

KW - \*f 652/dt [Drug Therapy]

KW - \*f 652/iv [Intravenous Drug Administration]

KW - \*f 652/pk [Pharmacokinetics]

KW - \*f 652/tm [Unexpected Outcome of Drug Treatment]

XT - abdominal pain / side effect / f 652

XT - abdominal pain / side effect / prednisone

XT - abdominal pain / side effect / recombinant cytokine

XT - acute graft versus host disease / drug therapy / f 652

XT - acute graft versus host disease / drug therapy / prednisone

XT - acute graft versus host disease / drug therapy / recombinant cytokine

XT - anemia / side effect / f 652

XT - anemia / side effect / prednisone

XT - anemia / side effect / recombinant cytokine

XT - anorexia / side effect / f 652

XT - anorexia / side effect / prednisone

XT - anorexia / side effect / recombinant cytokine

XT - anxiety disorder / side effect / f 652

XT - anxiety disorder / side effect / prednisone

XT - anxiety disorder / side effect / recombinant cytokine

XT - catheter infection / side effect / f 652

XT - catheter infection / side effect / prednisone

XT - catheter infection / side effect / recombinant cytokine

XT - chill / side effect / f 652

XT - chill / side effect / prednisone

XT - chill / side effect / recombinant cytokine

XT - coughing / side effect / f 652

XT - coughing / side effect / prednisone

XT - coughing / side effect / recombinant cytokine

XT - cytopenia / side effect / f 652

XT - cytopenia / side effect / recombinant cytokine

XT - dizziness / side effect / f 652

XT - dizziness / side effect / prednisone

XT - dizziness / side effect / recombinant cytokine

XT - dysgeusia / side effect / f 652

XT - dysgeusia / side effect / prednisone

XT - dysgeusia / side effect / recombinant cytokine

XT - dyspnea / side effect / f 652

XT - dyspnea / side effect / prednisone

XT - dyspnea / side effect / recombinant cytokine

XT - electrolyte disturbance / side effect / f 652

XT - electrolyte disturbance / side effect / recombinant cytokine

XT - epistaxis / side effect / f 652

XT - epistaxis / side effect / prednisone

XT - epistaxis / side effect / recombinant cytokine

XT - fatigue / side effect / f 652

XT - fatigue / side effect / prednisone

XT - fatigue / side effect / recombinant cytokine

XT - fever / side effect / f 652

XT - fever / side effect / prednisone

XT - fever / side effect / recombinant cytokine

XT - gastrointestinal disease / drug therapy / f 652

XT - gastrointestinal disease / drug therapy / prednisone

XT - gastrointestinal disease / drug therapy / recombinant cytokine

XT - graft versus host reaction / drug therapy / calcineurin inhibitor

XT - graft versus host reaction / drug therapy / cyclophosphamide

XT - graft versus host reaction / drug therapy / methotrexate

XT - graft versus host reaction / drug therapy / mycophenolate mofetil

XT - hyperbilirubinemia / side effect / f 652

XT - hyperbilirubinemia / side effect / prednisone

XT - hyperbilirubinemia / side effect / recombinant cytokine

XT - hyperglycemia / side effect / f 652

XT - hyperglycemia / side effect / prednisone

XT - hyperglycemia / side effect / recombinant cytokine

XT - hyperkalemia / side effect / f 652

XT - hyperkalemia / side effect / prednisone

XT - hyperkalemia / side effect / recombinant cytokine

XT - hypermagnesemia / side effect / f 652

XT - hypermagnesemia / side effect / prednisone

XT - hypermagnesemia / side effect / recombinant cytokine

XT - hypernatremia / side effect / f 652

XT - hypernatremia / side effect / prednisone

XT - hypernatremia / side effect / recombinant cytokine

XT - hypertension / side effect / f 652

XT - hypertension / side effect / prednisone

XT - hypertension / side effect / recombinant cytokine

XT - hypertriglyceridemia / side effect / f 652

XT - hypertriglyceridemia / side effect / prednisone

XT - hypertriglyceridemia / side effect / recombinant cytokine

XT - hypoalbuminemia / side effect / f 652

XT - hypoalbuminemia / side effect / prednisone

XT - hypoalbuminemia / side effect / recombinant cytokine

XT - hypocalcemia / side effect / f 652

XT - hypocalcemia / side effect / prednisone

XT - hypocalcemia / side effect / recombinant cytokine

XT - hypoglycemia / side effect / f 652

XT - hypoglycemia / side effect / prednisone

XT - hypoglycemia / side effect / recombinant cytokine

XT - hypokalemia / side effect / f 652

XT - hypokalemia / side effect / prednisone

XT - hypokalemia / side effect / recombinant cytokine

XT - hypomagnesemia / side effect / f 652

XT - hypomagnesemia / side effect / prednisone

XT - hypomagnesemia / side effect / recombinant cytokine

XT - hyponatremia / side effect / f 652

XT - hyponatremia / side effect / prednisone

XT - hyponatremia / side effect / recombinant cytokine

XT - hypophosphatemia / side effect / f 652

XT - hypophosphatemia / side effect / prednisone

XT - hypophosphatemia / side effect / recombinant cytokine

XT - insomnia / side effect / f 652

XT - insomnia / side effect / prednisone

XT - insomnia / side effect / recombinant cytokine

XT - leukopenia / side effect / f 652

XT - leukopenia / side effect / prednisone

XT - leukopenia / side effect / recombinant cytokine

XT - lymphocytopenia / side effect / f 652

XT - lymphocytopenia / side effect / prednisone

XT - lymphocytopenia / side effect / recombinant cytokine

XT - muscle weakness / side effect / f 652

XT - muscle weakness / side effect / prednisone

XT - muscle weakness / side effect / recombinant cytokine

XT - nausea / side effect / f 652

XT - nausea / side effect / prednisone

XT - nausea / side effect / recombinant cytokine

XT - neutropenia / side effect / f 652

XT - neutropenia / side effect / prednisone

XT - neutropenia / side effect / recombinant cytokine

XT - peripheral edema / side effect / f 652

XT - peripheral edema / side effect / prednisone

XT - peripheral edema / side effect / recombinant cytokine

XT - pruritus / side effect / f 652

XT - pruritus / side effect / prednisone

XT - pruritus / side effect / recombinant cytokine

XT - sepsis / side effect / f 652

XT - sepsis / side effect / prednisone

XT - sepsis / side effect / recombinant cytokine

XT - side effect / side effect / f 652

XT - side effect / side effect / prednisone

XT - side effect / side effect / recombinant cytokine

XT - squamous cell skin carcinoma / side effect / f 652

XT - squamous cell skin carcinoma / side effect / prednisone

XT - squamous cell skin carcinoma / side effect / recombinant cytokine

XT - thorax pain / side effect / f 652

XT - thorax pain / side effect / prednisone

XT - thorax pain / side effect / recombinant cytokine

XT - thrombocytopenia / side effect / f 652

XT - thrombocytopenia / side effect / prednisone

XT - thrombocytopenia / side effect / recombinant cytokine

XT - tremor / side effect / f 652

XT - tremor / side effect / prednisone

XT - tremor / side effect / recombinant cytokine

XT - vomiting / side effect / f 652

XT - vomiting / side effect / prednisone

XT - vomiting / side effect / recombinant cytokine

XT - xerophthalmia / side effect / f 652

XT - xerophthalmia / side effect / prednisone

XT - xerophthalmia / side effect / recombinant cytokine

XT - xerosis / side effect / f 652

XT - xerosis / side effect / prednisone

XT - xerosis / side effect / recombinant cytokine

XT - xerostomia / side effect / f 652

XT - xerostomia / side effect / prednisone

XT - xerostomia / side effect / recombinant cytokine

XT - calcineurin inhibitor / drug combination / methotrexate

XT - calcineurin inhibitor / drug combination / mycophenolate mofetil

XT - calcineurin inhibitor / drug therapy / graft versus host reaction

XT - cyclophosphamide / drug therapy / graft versus host reaction

XT - f 652 / adverse drug reaction / abdominal pain

XT - f 652 / adverse drug reaction / anemia

XT - f 652 / adverse drug reaction / anorexia

XT - f 652 / adverse drug reaction / anxiety disorder

XT - f 652 / adverse drug reaction / catheter infection

XT - f 652 / adverse drug reaction / chill

XT - f 652 / adverse drug reaction / coughing

XT - f 652 / adverse drug reaction / cytopenia

XT - f 652 / adverse drug reaction / dizziness

XT - f 652 / adverse drug reaction / dysgeusia

XT - f 652 / adverse drug reaction / dyspnea

XT - f 652 / adverse drug reaction / electrolyte disturbance

XT - f 652 / adverse drug reaction / epistaxis

XT - f 652 / adverse drug reaction / fatigue

XT - f 652 / adverse drug reaction / fever

XT - f 652 / adverse drug reaction / hyperbilirubinemia

XT - f 652 / adverse drug reaction / hyperglycemia

XT - f 652 / adverse drug reaction / hyperkalemia

XT - f 652 / adverse drug reaction / hypermagnesemia

XT - f 652 / adverse drug reaction / hypernatremia

XT - f 652 / adverse drug reaction / hypertension

XT - f 652 / adverse drug reaction / hypertriglyceridemia

XT - f 652 / adverse drug reaction / hypoalbuminemia

XT - f 652 / adverse drug reaction / hypocalcemia

XT - f 652 / adverse drug reaction / hypoglycemia

XT - f 652 / adverse drug reaction / hypokalemia

XT - f 652 / adverse drug reaction / hypomagnesemia

XT - f 652 / adverse drug reaction / hyponatremia

XT - f 652 / adverse drug reaction / hypophosphatemia

XT - f 652 / adverse drug reaction / insomnia

XT - f 652 / adverse drug reaction / leukopenia

XT - f 652 / adverse drug reaction / lymphocytopenia

XT - f 652 / adverse drug reaction / muscle weakness

XT - f 652 / adverse drug reaction / nausea

XT - f 652 / adverse drug reaction / neutropenia

XT - f 652 / adverse drug reaction / peripheral edema

XT - f 652 / adverse drug reaction / pruritus

XT - f 652 / adverse drug reaction / sepsis

XT - f 652 / adverse drug reaction / side effect

XT - f 652 / adverse drug reaction / squamous cell skin carcinoma

XT - f 652 / adverse drug reaction / thorax pain

XT - f 652 / adverse drug reaction / thrombocytopenia

XT - f 652 / adverse drug reaction / tremor

XT - f 652 / adverse drug reaction / vomiting

XT - f 652 / adverse drug reaction / xerophthalmia

XT - f 652 / adverse drug reaction / xerosis

XT - f 652 / adverse drug reaction / xerostomia

XT - f 652 / drug combination / prednisone

XT - f 652 / drug therapy / acute graft versus host disease

XT - f 652 / drug therapy / gastrointestinal disease

XT - f 652 / unexpected outcome of drug treatment / disease worsening with drug treatment

XT - f 652 / unexpected outcome of drug treatment / lack of drug effect

XT - methotrexate / drug combination / calcineurin inhibitor

XT - methotrexate / drug therapy / graft versus host reaction

XT - mycophenolate mofetil / drug combination / calcineurin inhibitor

XT - mycophenolate mofetil / drug therapy / graft versus host reaction

XT - prednisone / adverse drug reaction / abdominal pain

XT - prednisone / adverse drug reaction / anemia

XT - prednisone / adverse drug reaction / anorexia

XT - prednisone / adverse drug reaction / anxiety disorder

XT - prednisone / adverse drug reaction / catheter infection

XT - prednisone / adverse drug reaction / chill

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XT - prednisone / adverse drug reaction / side effect

XT - prednisone / adverse drug reaction / squamous cell skin carcinoma

XT - prednisone / adverse drug reaction / thorax pain

XT - prednisone / adverse drug reaction / thrombocytopenia

XT - prednisone / adverse drug reaction / tremor

XT - prednisone / adverse drug reaction / vomiting

XT - prednisone / adverse drug reaction / xerophthalmia

XT - prednisone / adverse drug reaction / xerosis

XT - prednisone / adverse drug reaction / xerostomia

XT - prednisone / drug combination / f 652

XT - prednisone / drug combination / recombinant cytokine

XT - prednisone / drug therapy / acute graft versus host disease

XT - prednisone / drug therapy / gastrointestinal disease

XT - prednisone / unexpected outcome of drug treatment / disease worsening with drug treatment

XT - prednisone / unexpected outcome of drug treatment / lack of drug effect

XT - recombinant cytokine / adverse drug reaction / abdominal pain

XT - recombinant cytokine / adverse drug reaction / anemia

XT - recombinant cytokine / adverse drug reaction / anorexia

XT - recombinant cytokine / adverse drug reaction / anxiety disorder

XT - recombinant cytokine / adverse drug reaction / catheter infection

XT - recombinant cytokine / adverse drug reaction / chill

XT - recombinant cytokine / adverse drug reaction / coughing

XT - recombinant cytokine / adverse drug reaction / cytopenia

XT - recombinant cytokine / adverse drug reaction / dizziness

XT - recombinant cytokine / adverse drug reaction / dysgeusia

XT - recombinant cytokine / adverse drug reaction / dyspnea

XT - recombinant cytokine / adverse drug reaction / electrolyte disturbance

XT - recombinant cytokine / adverse drug reaction / epistaxis

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XT - recombinant cytokine / adverse drug reaction / hyperbilirubinemia

XT - recombinant cytokine / adverse drug reaction / hyperglycemia

XT - recombinant cytokine / adverse drug reaction / hyperkalemia

XT - recombinant cytokine / adverse drug reaction / hypermagnesemia

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XT - recombinant cytokine / adverse drug reaction / hypoalbuminemia

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XT - recombinant cytokine / adverse drug reaction / hypomagnesemia

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XT - recombinant cytokine / adverse drug reaction / xerophthalmia

XT - recombinant cytokine / adverse drug reaction / xerosis

XT - recombinant cytokine / adverse drug reaction / xerostomia

XT - recombinant cytokine / drug combination / prednisone

XT - recombinant cytokine / drug therapy / acute graft versus host disease

XT - recombinant cytokine / drug therapy / gastrointestinal disease

XT - recombinant cytokine / unexpected outcome of drug treatment / disease worsening with drug treatment

XT - recombinant cytokine / unexpected outcome of drug treatment / lack of drug effect

JF - Blood

JA - Blood

LA - English

VL - 141

IS - 12

SP - 1389

EP - 1401

CY - United States

PB - Elsevier B.V.

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SN - 1528-0020

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C3 - f 652

UR - https://www.journals.elsevier.com/blood

DO - https://dx.doi.org/10.1182/blood.2021015111

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2022826188

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1182%2fblood.2021015111Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ponce&issn=0006-4971&title=Blood&atitle=A+phase+2+study+of+interleukin-22+and+systemic+corticosteroids+as+initial+treatment+for+acute+GVHD+of+the+lower+GI+tract&volume=141&issue=12&spage=1389&epage=1401&date=2023&doi=10.1182%2Fblood.2021015111&pmid=36399701&sid=OVID:embase

91.

TY - JOUR

DB - Embase

AN - 2023597347

T1 - MOOD DISORDERS AND OUTCOMES OF PATIENTS WITH INFLAMMATORY BOWEL DISEASES: A 2016-2019 NATIONWIDE ANALYSIS

T3 - Abstracts From the 2023 Crohn's & Colitis Congress. Denver United States.

A1 - Kilani Y.

A1 - Aldiabat M.

A1 - Bhatija R.R.

A1 - Kamal S.A.F.

A1 - Arshad I.

A1 - Sohail H.

A1 - Favour M.

Y1 - 2023//

N2 - INTRODUCTION: Several risk factors have been associated with inflammatory bowel diseases (IBD), including genetic, environmental, gut microbiota and immune dysregulation. Psychiatric disorders have been linked to IBD. However, the question of whether psychiatric conditions affect the severity of patients with IBD remains unanswered. We aimed to investigate the relationship between mood disorders and IBD outcomes. METHOD(S): This is a retrospective longitudinal study of patients admitted with a primary diagnosis of IBD. Data was retrieved from the Nationwide Inpatient Sample (NIS) databases of the years 2016 to 2019 using ICD-10-CM codes for IBD. Multivariate logistic regression analysis was applied to estimate the effect of mood disorders on the outcomes of IBD (mortality, complications and hospital utilization), while adjusting for patient and hospital confounders. A T-Test and Chi Square test were performed to compare baseline characteristics in patients admitted for IBD with and without a secondary diagnosis of mood disorder (table 1). We used Stata Version 17.0 Software (Statacorp, Texas, USA) for analysis. The p-value was set at p < 0.05. RESULT(S): A total of 374745 adults with a primary diagnosis of IBD were identified; less than one fifth (21%) had a documented mood disorder. A significantly higher proportion of females (66%, p-value=0.000) and Whites (81%, p-value=0.000) were noted in the mood disorder group. Having a mood disorder was associated with no statistically significant change in mortality (Odds ratio (OR) = 0.86, p = 0.461), anemia (OR = 0.99; p = 0.891), gastrointestinal bleed (OR = 0.99; p = 0.910), inflammatory polyps (OR = 0.79; p = 0.452), toxic megacolon (OR = 0.79; p = 0.664), colorectal cancer (OR = 0.70; p = 0.133), primary sclerosing cholangitis (OR = 1.34; p = 0.228), and pyoderma gangrenosum (OR = 1.01; p = 0.945) (figure 1). A statistically but non clinically significant reduction in the risk of intestinal abscess (OR= 0.81; p = 0.024), stenosis (OR= 0.68; p = 0.000), and fistula (OR= 0.84; p =0.012), was noted in patients with mood disorder. However, an increased hospital utilization was noted in patients with mood disorder (length of stay: 0.59 days, p-value = 0.000; total healthcare cost: 3372 US Dollars, p-value = 0.000). DISCUSSION: IBD patients demonstrate a higher prevalence of mood disorders when compared to the general population, especially in females and Whites. Our study showed that the presence of mood disorder concurrently with IBD does not significantly affect the outcomes of IBD in terms of mortality, or morbidity. A multidisciplinary approach of patients with IBD including diagnosis and management of the underlying psychiatric disorders could help optimize the hospital utilization of patients with IBD. [Formula presented] [Formula presented]Copyright © 2023

KW - abscess

KW - adult

KW - anemia

KW - cancer patient

KW - Caucasian

KW - colorectal cancer

KW - complication

KW - conference abstract

KW - confounding variable

KW - controlled study

KW - diagnosis

KW - female

KW - fistula

KW - gastrointestinal hemorrhage

KW - health care cost

KW - hospital patient

KW - hospital utilization

KW - human

KW - ICD-10-CM

KW - inflammatory bowel disease

KW - length of stay

KW - longitudinal study

KW - major clinical study

KW - mental disease

KW - mood disorder

KW - morbidity

KW - mortality

KW - outcome assessment

KW - polyp

KW - prevalence

KW - primary sclerosing cholangitis

KW - pyoderma gangrenosum

KW - retrospective study

KW - software

KW - stenosis

KW - Texas

KW - toxic megacolon

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 164

IS - 4 Supplement

SP - S33

EP - S34

CY - Netherlands

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

DO - https://dx.doi.org/10.1053/j.gastro.2023.03.068

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2023597347

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1053%2fj.gastro.2023.03.068Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kilani&issn=0016-5085&title=Gastroenterology&atitle=MOOD+DISORDERS+AND+OUTCOMES+OF+PATIENTS+WITH+INFLAMMATORY+BOWEL+DISEASES%3A+A+2016-2019+NATIONWIDE+ANALYSIS&volume=164&issue=4+Supplement&spage=S33&epage=S34&date=2023&doi=10.1053%2Fj.gastro.2023.03.068&pmid=&sid=OVID:embase

92.

TY - JOUR

DB - Embase

AN - 2014056947

ID - 34699326 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34699326]

T1 - Intermodulation of gut-lung axis microbiome and the implications of biotics to combat COVID-19

A1 - Aishwarya S.

A1 - Gunasekaran K.

A1 - Anita Margret A.

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AO - Gunasekaran K.; ORCID: https://orcid.org/0000-0001-9027-0108

Y1 - 2022//

N2 - The novel coronavirus disease pandemic caused by the COVID-19 virus has infected millions of people around the world with a surge in transmission and mortality rates. Although it is a respiratory viral infection that affects airway epithelial cells, a diverse set of complications, including cytokine storm, gastrointestinal disorders, neurological distress, and hyperactive immune responses have been reported. However, growing evidence indicates that the bidirectional crosstalk of the gut-lung axis can decipher the complexity of the disease. Though not much research has been focused on the gut-lung axis microbiome, there is a translocation of COVID-19 infection from the lung to the gut through the lymphatic system resulting in disruption of gut permeability and its integrity. It is believed that detailed elucidation of the gut-lung axis crosstalk and the role of microbiota can unravel the most significant insights on the discovery of diagnosis using microbiome-based-therapeutics for COVID-19. This review calls attention to relate the influence of dysbiosis caused by COVID-19 and the involvement of the gut-lung axis. It presents first of its kind details that concentrate on the momentousness of biotics in disease progression and restoration. Communicated by Ramaswamy H. Sarma.Copyright © 2021 Informa UK Limited, trading as Taylor & Francis Group.

KW - Actinobacteria

KW - adult respiratory distress syndrome

KW - airway epithelium cell

KW - Alzheimer disease

KW - antimicrobial activity

KW - antineoplastic activity

KW - antiviral activity

KW - anxiety

KW - artificial ventilation

KW - Aspergillus fumigatus

KW - asthma

KW - ataxia

KW - attention

KW - autism

KW - bacterial translocation

KW - Bacteroides

KW - Bacteroides fragilis

KW - Bacteroidetes

KW - Bifidobacterium

KW - Bifidobacterium bifidum

KW - biofilm

KW - bipolar disorder

KW - Blautia

KW - cancer immunotherapy

KW - Candida albicans

KW - cardiovascular disease

KW - Clostridioides difficile

KW - cognition

KW - \*coronavirus disease 2019

KW - cyanobacterium

KW - cystic fibrosis

KW - cytokine release

KW - cytokine storm

KW - depression

KW - diet supplementation

KW - dietary intake

KW - disease exacerbation

KW - distress syndrome

KW - dizziness

KW - dysbiosis

KW - dysphagia

KW - Enterococcus faecalis

KW - eosinophilia

KW - Escherichia coli

KW - feces microflora

KW - Firmicutes

KW - Fusobacteria

KW - gastrointestinal disease

KW - gastrointestinal motility

KW - headache

KW - hospitalization

KW - human

KW - hyperlipidemia

KW - hypertension

KW - immune response

KW - immune system

KW - \*immunomodulation

KW - insulin dependent diabetes mellitus

KW - insulin resistance

KW - \*intestine flora

KW - intestine innervation

KW - Jerusalem artichoke

KW - Lactobacillus

KW - Lactobacillus casei

KW - Lactobacillus helveticus

KW - Lactobacillus plantarum

KW - Lactobacillus rhamnosus

KW - Leuconostoc

KW - Leuconostoc mesenteroides

KW - lung epithelium

KW - lung infection

KW - \*lung microbiota

KW - lymphatic system

KW - macrophage

KW - mental disease

KW - microalga

KW - microbial community

KW - microbiome

KW - mortality

KW - mortality rate

KW - mucosal immunity

KW - natural killer cell

KW - nausea

KW - nervous system

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - obesity

KW - pandemic

KW - posttraumatic stress disorder

KW - prevalence

KW - Proteobacteria

KW - renin angiotensin aldosterone system

KW - review

KW - risk factor

KW - Saccharomyces cerevisiae

KW - SARS coronavirus

KW - schizophrenia

KW - seizure

KW - sepsis

KW - Severe acute respiratory syndrome coronavirus 2

KW - sleep quality

KW - sneezing

KW - stereotypy

KW - Th1 cell

KW - tuberculosis

KW - ulcerative colitis

KW - vaginitis

KW - viral respiratory tract infection

KW - virus infection

KW - virus replication

KW - virus transmission

KW - vomiting

KW - angiotensin converting enzyme 2

KW - antibiotic agent

KW - bacteriocin

KW - CD14 antigen

KW - endocannabinoid

KW - fructan

KW - fructose oligosaccharide

KW - gamma interferon

KW - gentamicin

KW - immunoglobulin A

KW - interleukin 10

KW - interleukin 12

KW - interleukin 17

KW - interleukin 6

KW - meropenem

KW - noradrenalin

KW - oligosaccharide

KW - pathogen associated molecular pattern

KW - polyphenol

KW - \*prebiotic agent

KW - \*probiotic agent

KW - short chain fatty acid

KW - \*synbiotic agent

KW - toll like receptor

KW - toll like receptor 4

KW - tumor necrosis factor

KW - vancomycin

JF - Journal of Biomolecular Structure and Dynamics

JA - J. Biomol. Struct. Dyn.

LA - English

VL - 40

IS - 24

SP - 14262

EP - 14278

CY - United Kingdom

PB - Taylor and Francis Ltd.

SN - 0739-1102

SN - 1538-0254

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UR - http://www.tandfonline.com/loi/tbsd20

DO - https://dx.doi.org/10.1080/07391102.2021.1994875

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2014056947

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1080%2f07391102.2021.1994875Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Aishwarya&issn=0739-1102&title=Journal+of+Biomolecular+Structure+and+Dynamics&atitle=Intermodulation+of+gut-lung+axis+microbiome+and+the+implications+of+biotics+to+combat+COVID-19&volume=40&issue=24&spage=14262&epage=14278&date=2022&doi=10.1080%2F07391102.2021.1994875&pmid=34699326&sid=OVID:embase

93.

TY - JOUR

DB - Embase

AN - 640340433

T1 - MOOD DISORDERS AND OUTCOMES OF PATIENTS WITH INFLAMMATORY BOWEL DISEASES: A 2016-2019 NATIONWIDE ANALYSIS

T3 - 2023 Crohn's and Colitis Congress. Denver, CO United States.

A1 - Kilani Y.

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A1 - Arshad I.

A1 - Sohail H.

A1 - Favour M.

Y1 - 2023//

N2 - INTRODUCTION: Several risk factors have been associated with inflammatory bowel diseases (IBD), including genetic, environmental, gut microbiota and immune dysregulation. Psychiatric disorders have been linked to IBD. However, the question of whether psychiatric conditions affect the severity of patients with IBD remains unanswered. We aimed to investigate the relationship between mood disorders and IBD outcomes. METHOD(S): This is a retrospective longitudinal study of patients admitted with a primary diagnosis of IBD. Data was retrieved from the Nationwide Inpatient Sample (NIS) databases of the years 2016 to 2019 using ICD-10-CM codes for IBD. Multivariate logistic regression analysis was applied to estimate the effect of mood disorders on the outcomes of IBD (mortality, complications and hospital utilization), while adjusting for patient and hospital confounders. A T-Test and Chi Square test were performed to compare baseline characteristics in patients admitted for IBD with and without a secondary diagnosis of mood disorder (table 1). We used Stata Version 17.0 Software (Statacorp, Texas, USA) for analysis. The p-value was set at p < 0.05. RESULT(S): A total of 374745 adults with a primary diagnosis of IBD were identified; less than one fifth (21%) had a documented mood disorder. A significantly higher proportion of females (66%, p-value=0.000) and Whites (81%, p-value=0.000) were noted in the mood disorder group. Having a mood disorder was associated with no statistically significant change in mortality (Odds ratio (OR) = 0.86, p = 0.461), anemia (OR = 0.99; p = 0.891), gastrointestinal bleed (OR = 0.99; p = 0.910), inflammatory polyps (OR = 0.79; p = 0.452), toxic megacolon (OR = 0.79; p = 0.664), colorectal cancer (OR = 0.70; p = 0.133), primary sclerosing cholangitis (OR = 1.34; p = 0.228), and pyoderma gangrenosum (OR = 1.01; p = 0.945) (figure 1). A statistically but non clinically significant reduction in the risk of intestinal abscess (OR= 0.81; p = 0.024), stenosis (OR= 0.68; p = 0.000), and fistula (OR= 0.84; p =0.012), was noted in patients with mood disorder. However, an increased hospital utilization was noted in patients with mood disorder (length of stay: 0.59 days, p-value = 0.000; total healthcare cost: 3372 US Dollars, p-value = 0.000). DISCUSSION: IBD patients demonstrate a higher prevalence of mood disorders when compared to the general population, especially in females and Whites. Our study showed that the presence of mood disorder concurrently with IBD does not significantly affect the outcomes of IBD in terms of mortality, or morbidity. A multidisciplinary approach of patients with IBD including diagnosis and management of the underlying psychiatric disorders could help optimize the hospital utilization of patients with IBD. (Table Presented).

KW - abscess

KW - adult

KW - anemia

KW - cancer patient

KW - Caucasian

KW - colorectal cancer

KW - complication

KW - conference abstract

KW - confounding variable

KW - controlled study

KW - diagnosis

KW - female

KW - fistula

KW - gastrointestinal hemorrhage

KW - health care cost

KW - hospital patient

KW - hospital utilization

KW - human

KW - ICD-10-CM

KW - inflammatory bowel disease

KW - length of stay

KW - longitudinal study

KW - major clinical study

KW - mental disease

KW - mood disorder

KW - morbidity

KW - mortality

KW - outcome assessment

KW - polyp

KW - prevalence

KW - primary sclerosing cholangitis

KW - pyoderma gangrenosum

KW - retrospective study

KW - software

KW - stenosis

KW - Texas

KW - toxic megacolon

JF - Inflammatory Bowel Diseases

JA - Inflammatory Bowel Dis.

LA - English

VL - 29

IS - Supplement 1

SP - S26

EP - S27

CY - Netherlands

PB - Oxford University Press

SN - 1536-4844

AD - Y. Kilani

DO - https://dx.doi.org/10.1093/ibd/izac247.050

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=640340433

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1093%2fibd%2fizac247.050Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kilani&issn=1536-4844&title=Inflammatory+Bowel+Diseases&atitle=MOOD+DISORDERS+AND+OUTCOMES+OF+PATIENTS+WITH+INFLAMMATORY+BOWEL+DISEASES%3A+A+2016-2019+NATIONWIDE+ANALYSIS&volume=29&issue=Supplement+1&spage=S26&epage=S27&date=2023&doi=10.1093%2Fibd%2Fizac247.050&pmid=&sid=OVID:embase

94.

TY - JOUR

DB - Embase

AN - 2020409051

ID - 36463140 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36463140]

T1 - The Establishment of China Bronchiectasis Registry and Research Collaboration (BE-China): Protocol of a prospective multicenter observational study

A1 - Gao Y.-H.

A1 - Lu H.-W.

A1 - Mao B.

A1 - Guan W.-J.

A1 - Song Y.-L.

A1 - Li Y.-Y.

A1 - Wang D.-X.

A1 - Wang B.

A1 - Gu H.-Y.

A1 - Li W.

A1 - Luo H.

A1 - Wang L.-W.

A1 - Li F.

A1 - Guo F.-X.

A1 - Zhang M.

A1 - Jie Z.-J.

A1 - Hang J.-Q.

A1 - Yang C.

A1 - Ren T.

A1 - Yuan Z.

A1 - Meng Q.-W.

A1 - Jia Q.

A1 - Chen Y.

A1 - Chen R.-C.

A1 - Qu J.-M.

A1 - Xu J.-F.

Y1 - 2022//

N2 - Background: Bronchiectasis is a highly heterogeneous chronic airway disease with marked geographic and ethnic variations. Most influential cohort studies to date have been performed in Europe and USA, which serve as the examples for developing a cohort study in China where there is a high burden of bronchiectasis. The Establishment of China Bronchiectasis Registry and Research Collaboration (BE-China) is designed to: (1) describe the clinical characteristics and natural history of bronchiectasis in China and identify the differences of bronchiectasis between the western countries and China; (2) identify the risk factors associated with disease progression in Chinese population; (3) elucidate the phenotype and endotype of bronchiectasis by integrating the genome, microbiome, proteome, and transcriptome with detailed clinical data; (4) facilitate large randomized controlled trials in China. Method(s): The BE-China is an ongoing prospective, longitudinal, multi-center, observational cohort study aiming to recruit a minimum of 10,000 patients, which was initiated in January 2020 in China. Comprehensive data, including medical history, aetiological testing, lung function, microbiological profiles, radiological scores, comorbidities, mental status, and quality of life (QoL), will be collected at baseline. Patients will be followed up annually for up to 10 years to record longitudinal data on outcomes, treatment patterns and QoL. Biospecimens, if possible, will be collected and stored at - 80 degreeC for further research. Up to October 2021, the BE-China has enrolled 3758 patients, and collected 666 blood samples and 196 sputum samples from 91 medical centers. The study protocol has been approved by the Shanghai Pulmonary Hospital ethics committee, and all collaborating centers have received approvals from their local ethics committee. All patients will be required to provide written informed consent to their participation. Conclusion(s): Findings of the BE-China will be crucial to reveal the clinical characteristics and natural history of bronchiectasis and facilitate evidence-based clinical practice in China.Copyright © 2022, The Author(s).

KW - article

KW - blood sampling

KW - \*bronchiectasis/di [Diagnosis]

KW - \*bronchiectasis/dt [Drug Therapy]

KW - \*bronchiectasis/et [Etiology]

KW - \*China

KW - Chinese

KW - \*clinical practice

KW - clinical protocol

KW - cohort analysis

KW - comorbidity

KW - controlled study

KW - demographics

KW - \*disease classification

KW - \*disease exacerbation

KW - \*disease registry

KW - disease severity

KW - echocardiography

KW - follow up

KW - genome

KW - \*history

KW - home oxygen therapy

KW - hospital

KW - human

KW - information dissemination

KW - information processing

KW - informed consent

KW - longitudinal study

KW - lung function

KW - major clinical study

KW - medical ethics

KW - \*medical research

KW - mental health

KW - microbiological examination

KW - microbiome

KW - noninvasive ventilation

KW - observational study

KW - pathophysiology

KW - patient monitoring

KW - \*phenotype

KW - prospective study

KW - quality control

KW - quality of life

KW - radiology

KW - \*risk factor

KW - scoring system

KW - social participation

KW - sputum analysis

KW - storage

KW - temperature

KW - treatment outcome

KW - \*Western Hemisphere

KW - antibiotic agent/dt [Drug Therapy]

KW - antibiotic agent/ih [Inhalational Drug Administration]

KW - antibiotic agent/po [Oral Drug Administration]

KW - beta adrenergic receptor stimulating agent/dt [Drug Therapy]

KW - corticosteroid derivative/dt [Drug Therapy]

KW - corticosteroid derivative/ih [Inhalational Drug Administration]

KW - corticosteroid derivative/po [Oral Drug Administration]

KW - immunoglobulin/dt [Drug Therapy]

KW - immunoglobulin/iv [Intravenous Drug Administration]

KW - muscarinic receptor blocking agent/dt [Drug Therapy]

KW - oxygen

KW - proteome

KW - transcriptome

KW - \*endotype

KW - Leicester Cough Questionnaire

XT - bronchiectasis / drug therapy / antibiotic agent

XT - bronchiectasis / drug therapy / beta adrenergic receptor stimulating agent

XT - bronchiectasis / drug therapy / corticosteroid derivative

XT - bronchiectasis / drug therapy / immunoglobulin

XT - bronchiectasis / drug therapy / muscarinic receptor blocking agent

XT - antibiotic agent / drug therapy / bronchiectasis

XT - beta adrenergic receptor stimulating agent / drug therapy / bronchiectasis

XT - corticosteroid derivative / drug therapy / bronchiectasis

XT - immunoglobulin / drug therapy / bronchiectasis

XT - muscarinic receptor blocking agent / drug therapy / bronchiectasis

JF - Respiratory Research

JA - Respir. Res.

LA - English

VL - 23

IS - 1

SP - 328

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1465-9921

SN - 1465-993X

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UR - https://respiratory-research.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s12931-022-02254-9

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2020409051

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1186%2fs12931-022-02254-9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gao&issn=1465-9921&title=Respiratory+Research&atitle=The+Establishment+of+China+Bronchiectasis+Registry+and+Research+Collaboration+%28BE-China%29%3A+Protocol+of+a+prospective+multicenter+observational+study&volume=23&issue=1&spage=328&epage=&date=2022&doi=10.1186%2Fs12931-022-02254-9&pmid=36463140&sid=OVID:embase

95.

TY - JOUR

DB - Embase

AN - 2019078800

ID - 36104418 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36104418]

T1 - Prostate cancer: highlights from research

A1 - Fenner A.

Y1 - 2022//

KW - androgen deprivation therapy

KW - bacterium

KW - cancer cell

KW - castration resistant prostate cancer/dt [Drug Therapy]

KW - cell proliferation

KW - chimeric antigen receptor T-cell immunotherapy

KW - cytokine release syndrome

KW - DNA sequencing

KW - fecal microbiota transplantation

KW - follow up

KW - heterosexual male

KW - human

KW - intestine flora

KW - lesions and defects

KW - male

KW - male to female transgender

KW - men who have sex with men

KW - mental health

KW - mortality

KW - multiparametric magnetic resonance imaging

KW - nonhuman

KW - note

KW - phase 1 clinical trial (topic)

KW - progression free survival

KW - \*prostate cancer

KW - quality of life

KW - sepsis

KW - tumor growth

KW - tumor metabolism

KW - tumor microenvironment

KW - tumor volume

KW - androgen/ec [Endogenous Compound]

KW - antibiotic agent

KW - antineoplastic agent/dt [Drug Therapy]

KW - carbon 13

KW - lactic acid/ec [Endogenous Compound]

KW - nitrogen 15

KW - pembrolizumab/dt [Drug Therapy]

KW - prasterone/ec [Endogenous Compound]

KW - prostate specific antigen/ec [Endogenous Compound]

KW - prostate specific membrane antigen/ec [Endogenous Compound]

KW - pyruvic acid/ec [Endogenous Compound]

KW - taxane derivative/dt [Drug Therapy]

KW - testosterone/ec [Endogenous Compound]

KW - transforming growth factor beta/ec [Endogenous Compound]

KW - unclassified drug

KW - urea/ec [Endogenous Compound]

KW - vipivotide tetraxetan lutetium lu 177/dt [Drug Therapy]

KW - chimeric antigen receptor T-cell

KW - Bacteroides acidifaciens

KW - pelvis lesion

KW - Ruminococcus gnavus

KW - androgen receptor pathway inhibitor/dt [Drug Therapy]

XT - castration resistant prostate cancer / drug therapy / androgen receptor pathway inhibitor

XT - castration resistant prostate cancer / drug therapy / antineoplastic agent

XT - castration resistant prostate cancer / drug therapy / pembrolizumab

XT - castration resistant prostate cancer / drug therapy / taxane derivative

XT - castration resistant prostate cancer / drug therapy / vipivotide tetraxetan lutetium lu 177

XT - androgen receptor pathway inhibitor / drug therapy / castration resistant prostate cancer

XT - antineoplastic agent / drug therapy / castration resistant prostate cancer

XT - pembrolizumab / drug therapy / castration resistant prostate cancer

XT - taxane derivative / drug therapy / castration resistant prostate cancer

XT - vipivotide tetraxetan lutetium lu 177 / drug therapy / castration resistant prostate cancer

JF - Nature

JA - Nature

LA - English

VL - 609

IS - 7927

SP - S32

EP - S33

CY - United Kingdom

PB - Nature Research

SN - 0028-0836

SN - 1476-4687

AD - A. Fenner

UR - https://www.nature.com/nature/

DO - https://dx.doi.org/10.1038/d41586-022-02857-8

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2019078800

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1038%2fd41586-022-02857-8Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fenner&issn=0028-0836&title=Nature&atitle=Prostate+cancer%3A+highlights+from+research&volume=609&issue=7927&spage=S32&epage=S33&date=2022&doi=10.1038%2Fd41586-022-02857-8&pmid=36104418&sid=OVID:embase

96.

TY - JOUR

DB - Embase

AN - 2022350315

T1 - Endogenous hyaluronan promotes intestinal development and protects against intestinal injury in neonatal mice

T3 - 2023 Southern Regional Meeting. New Orleans United States.

A1 - Eckert J.V.

A1 - Burge K.

A1 - Wilson A.

A1 - Chaaban H.

Y1 - 2023//

N2 - Purpose of Study: Hyaluronan (HA), a glycosaminoglycan polymer, is an important component of the extracellular matrix. In the gut, HA is known to play important roles in regulating intestinal and colonic growth and protecting against inflammatory injury. We previously showed exogenous HA, with a molecular weight of 35 kDa, accelerates postnatal intestinal development and protects against the development of murine NEC. The role of endogenous HA in NEC, however, is currently unexplored. Objective(s): Determine the effects of PEP-1-induced hyaluronan receptor blockade on small intestinal development and differentiation (1) at homeostasis and (2) during development of neonatal NEC-like injury. Methods Used: CD-1 mouse pups were randomized after birth to receive intraperitoneal (i.p.) injection of either PEP-1 (20 mg/kg) or scrambled peptide from postnatal day 7 (P7) to P14. Effect of treatment on small intestinal development, epithelial cell proliferation (Ki67), and goblet and Paneth cell differentiation were assessed by hematoxylin and eosin (H&E) staining, immunohistochemistry, and qPCR. The impact of HA receptor blockade on susceptibility to intestinal NEC-like injury at P14 was assessed through chemical knockdown of Paneth cell functionality through administration of i.p. dithizone (33 mg/kg), followed by induction of rapid dysbiosis through Klebsiella pneumoniae (1 x 107 CFU/kg) gavage. Pups were monitored for physiological distress and mortality for 16 hours. Surviving pups were euthanized, tissues collected, and distal ileum assessed for histological injury and cytokine expression via immunoassay multiplexing. Summary of Results: No difference was seen in daily weight between PEP-1 (n = 16) and scramble (n = 16). Intestinal villi of PEP-1 pups were 10% shorter (118 +/- 2.234 mum vs 127.3 +/- 2.235 mum; p = 0.0056) and crypt depth significantly shallower (32.05 +/- 0.774 mum vs. 35.26 +/- 0.711 mum; p = 0.0031) than control. PEP-1 treatment was also associated with a trend toward increased mortality (69% vs 53.3%) and significantly higher intestinal injury scores (2.154 +/- 0.33 vs 1.267 +/- 0.33; p = 0.0492). Effects on cytokine release, epithelial cell proliferation (Ki67), goblet and Paneth cell differentiation, endogenous HA localization and staining intensity, and stool microbial compositions are pending. Conclusion(s): Endogenous HA receptor blockade by PEP-1 in neonatal mice negatively affects small intestinal development and susceptibility to NEC-like injury, highlighting the important role of endogenous HA on protection from NEC.Copyright © 2023 Southern Society for Clinical Investigation.

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - CD-1 mouse

KW - cell differentiation

KW - cell proliferation

KW - colon

KW - conference abstract

KW - controlled study

KW - cytokine release

KW - distress syndrome

KW - dysbiosis

KW - enteric feeding

KW - extracellular matrix

KW - feces

KW - gastrointestinal tract

KW - gene expression

KW - goblet cell

KW - histopathology

KW - homeostasis

KW - ileum

KW - immunoassay

KW - immunohistochemistry

KW - \*intestine injury

KW - intestine villus

KW - intraperitoneal drug administration

KW - Klebsiella pneumoniae

KW - male

KW - molecular weight

KW - mortality

KW - mouse

KW - newborn

KW - nonhuman

KW - Paneth cell

KW - protein expression

KW - protein function

KW - small intestine

KW - cytokine

KW - dithizone

KW - endogenous compound

KW - eosin

KW - hematoxylin

KW - \*hyaluronic acid

KW - hyaluronic acid binding protein

KW - Ki 67 antigen

KW - polymer

JF - American Journal of the Medical Sciences

JA - Am. J. Med. Sci.

LA - English

VL - 365

IS - Supplement 1

SP - S325

EP - S326

CY - Netherlands

PB - Elsevier B.V.

SN - 0002-9629

SN - 1538-2990

M1 - (Eckert, Burge, Wilson, Chaaban) The University of Oklahoma Health Sciences Center, Oklahoma City, OK, United States

DO - https://dx.doi.org/10.1016/S0002-9629%2823%2900604-3

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2022350315

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1016%2fS0002-9629%252823%252900604-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Eckert&issn=0002-9629&title=American+Journal+of+the+Medical+Sciences&atitle=Endogenous+hyaluronan+promotes+intestinal+development+and+protects+against+intestinal+injury+in+neonatal+mice&volume=365&issue=Supplement+1&spage=S325&epage=S326&date=2023&doi=10.1016%2FS0002-9629%252823%252900604-3&pmid=&sid=OVID:embase

97.

TY - JOUR

DB - Embase

AN - 2021066743

ID - 35907640 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35907640]

T1 - Review of the British Thoracic Society Winter Meeting 2021, 24-26 November 2021

A1 - Jha A.

A1 - Ward T.

A1 - Walker S.

A1 - Goodwin A.T.

A1 - Chalmers J.D.

AO - Jha, Akhilesh; ORCID: https://orcid.org/0000-0002-8413-7738

AO - Goodwin, Amanda T.; ORCID: https://orcid.org/0000-0002-1488-6549

Y1 - 2022//

N2 - The Winter Meeting of the British Thoracic Society (BTS) is a platform for the latest clinical and scientific research in respiratory medicine. This review summarises the key symposia and presentations from the BTS Winter Meeting 2021 held online due to the COVID-19 pandemic.Copyright © Author(s)

KW - Akt/mTOR signaling

KW - antimicrobial activity

KW - bronchiectasis

KW - chronic obstructive lung disease

KW - circadian rhythm

KW - claustrophobia

KW - continuous positive airway pressure

KW - \*coronavirus disease 2019

KW - cytotoxic T lymphocyte

KW - disease severity

KW - dysbiosis

KW - enzyme activity

KW - eosinophil count

KW - human

KW - immunomodulation

KW - leukocyte activation

KW - lung embolism

KW - Mycobacterium abscessus

KW - Mycobacterium tuberculosis

KW - neutrophil count

KW - neutrophil extracellular trap

KW - nonhuman

KW - \*pandemic

KW - peripheral blood mononuclear cell

KW - phase 3 clinical trial (topic)

KW - pleura mesothelioma/dt [Drug Therapy]

KW - pneumonia

KW - Pulmonary Embolism Severity Index

KW - pulmonary hypertension

KW - pulmonary rehabilitation

KW - quality of life

KW - randomized controlled trial (topic)

KW - \*respiratory tract inflammation

KW - review

KW - Streptococcus pneumoniae

KW - \*symposium

KW - Th1 cell

KW - Th2 cell

KW - cigarette smoke

KW - elastase/ec [Endogenous Compound]

KW - epithelial derived neutrophil activating factor 78/ec [Endogenous Compound]

KW - ipilimumab/dt [Drug Therapy]

KW - nivolumab/dt [Drug Therapy]

KW - polypeptide antibiotic agent

KW - sphingosine kinase 1/ec [Endogenous Compound]

KW - transcription factor ARNTL/ec [Endogenous Compound]

XT - pleura mesothelioma / drug therapy / ipilimumab

XT - pleura mesothelioma / drug therapy / nivolumab

XT - ipilimumab / drug therapy / pleura mesothelioma

XT - nivolumab / drug therapy / pleura mesothelioma

JF - Thorax

JA - Thorax

LA - English

VL - 77

IS - 10

SP - 1030

EP - 1035

CY - United Kingdom

PB - BMJ Publishing Group

SN - 0040-6376

SN - 1468-3296

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M1 - (Chalmers) Division of Molecular and Clinical Medicine, Ninewells Hospital, Medical School, University of Dundee, Dundee, United Kingdom

UR - http://thorax.bmj.com/

DO - https://dx.doi.org/10.1136/thorax-2022-219150

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021066743

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1136%2fthorax-2022-219150Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Jha&issn=0040-6376&title=Thorax&atitle=Review+of+the+British+Thoracic+Society+Winter+Meeting+2021%2C+24-26+November+2021&volume=77&issue=10&spage=1030&epage=1035&date=2022&doi=10.1136%2Fthorax-2022-219150&pmid=35907640&sid=OVID:embase

98.

TY - JOUR

DB - Embase

AN - 2021916388

T1 - Recurrent Miscarriage: Diagnostic and Therapeutic ProceduresGuideline of the DGGG, OEGGG and SGGG (S2k-Level, AWMF Registry No. 015/050, May 2022)

A1 - Toth B.

A1 - Bohlmann M.

A1 - Hancke K.

A1 - Kuon R.

A1 - Nawroth F.

A1 - Von Otte S.

A1 - Rogenhofer N.

A1 - Rudnik-Schoneborn S.

A1 - Schleubetaner E.

A1 - Tempfer C.

A1 - Vomstein K.

A1 - Wischmann T.

A1 - Von Wolff M.

A1 - Wurfel W.

A1 - Zschocke J.

Y1 - 2023//

N2 - Purpose The aim of this guideline is to standardize the diagnosis and therapy of recurrent miscarriage (RM) using evidence from the recent literature. This is done by using consistent definitions, objective evaluations and standardized treatment protocols. Methods When this guideline was compiled, special consideration was given to previous recommendations in prior versions of this guideline and the recommendations of the European Society of Human Reproduction and Embryology, the Royal College of Obstetricians and Gynecologists, the American College of Obstetricians and Gynecologists and the American Society for Reproductive Medicine, and a detailed individual search of the literature about the different topics was carried out. Recommendations Recommendations about the diagnostic and therapeutic procedures offered to couples with RM were developed based on the international literature. Special attention was paid to known risk factors such as chromosomal, anatomical, endocrinological, physiological coagulation, psychological, infectious and immune disorders. Recommendations were also developed for those cases where investigations are unable to find any abnormality (idiopathic RM).Copyright © 2023 Georg Thieme Verlag. All rights reserved.

KW - alcohol consumption

KW - antiphospholipid syndrome

KW - article

KW - autoimmune disease

KW - behavior

KW - blood clotting disorder

KW - body mass

KW - chromosome disorder

KW - chronic disease

KW - coffee consumption

KW - congenital malformation

KW - consensus

KW - diagnostic procedure

KW - diagnostic test

KW - endocrine disease

KW - endometritis

KW - heredity

KW - human

KW - hysteroscopy

KW - idiopathic disease

KW - immunotherapy

KW - incidence

KW - infection

KW - lifestyle

KW - mental disease

KW - mental stress

KW - microbiome

KW - monogenic disorder

KW - ovary polycystic disease

KW - patient care

KW - patient monitoring

KW - polyp

KW - \*practice guideline

KW - preimplantation genetic diagnosis

KW - prenatal diagnosis

KW - psychological aspect

KW - \*recurrent abortion

KW - risk factor

KW - smoking

KW - standardization

KW - thrombophilia

KW - thyroid disease

KW - treatment indication

KW - uterus myoma

KW - uterus synechia

KW - vaginitis

KW - vitamin D deficiency

KW - acetylsalicylic acid

KW - antibody

KW - caffeine

KW - ciprofloxacin

KW - D dimer

KW - doxycycline

KW - glucocorticoid

KW - heparin

KW - immunoglobulin

KW - lipid

KW - metronidazole

KW - nicotine

KW - progesterone

KW - tumor necrosis factor inhibitor

KW - vitamin D

KW - allogeneic lymphocyte immunotherapy

KW - congenital thrombophilia

JF - Geburtshilfe und Frauenheilkunde

JA - Geburtshilfe Frauenheilkd.

LA - English

VL - 83

IS - 1

SP - 49

EP - 78

CY - Germany

PB - Georg Thieme Verlag

SN - 0016-5751

SN - 1438-8804

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UR - https://gebfra.thieme.com/home

DO - https://dx.doi.org/10.1055/a-1895-9940

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2021916388

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1055%2fa-1895-9940Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Toth&issn=0016-5751&title=Geburtshilfe+und+Frauenheilkunde&atitle=Recurrent+Miscarriage%3A+Diagnostic+and+Therapeutic+ProceduresGuideline+of+the+DGGG%2C+OEGGG+and+SGGG+%28S2k-Level%2C+AWMF+Registry+No.+015%2F050%2C+May+2022%29&volume=83&issue=1&spage=49&epage=78&date=2023&doi=10.1055%2Fa-1895-9940&pmid=&sid=OVID:embase

99.

TY - JOUR

DB - Embase

AN - 2018869009

ID - 36593738 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36593738]

T1 - The Route of Neuro-Critical Care

A1 - Longhitano Y.

A1 - Zanza C.

Y1 - 2022//

KW - airway

KW - antiviral therapy

KW - assisted ventilation

KW - central nervous system

KW - editorial

KW - electrolyte disturbance

KW - human

KW - intestine flora

KW - intracranial pressure

KW - mental health

KW - \*neurological intensive care unit

KW - peripheral nervous system

KW - publication

KW - virus encephalitis

KW - aciclovir

KW - glucocorticoid

JF - Reviews on Recent Clinical Trials

JA - Rev. Recent. Clin. Trials

LA - English

VL - 17

IS - 4

SP - 225

EP - 226

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1574-8871

SN - 1876-1038

M1 - (Longhitano, Zanza) Department of Anaesthesiology and Intensive Care, Azienda Ospedaliera SS, Antonio e Biagio e Cesare Arrigo, Alessandria, Italy

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M1 - (Zanza) Department Of Emergency Medicine, Fondazione, Policlinico Universitario A. Gemelli, IRCSS, Rome, Italy

UR - https://www.eurekaselect.com/640/journal/reviews-recent-clinical-trials

DO - https://dx.doi.org/10.2174/157488711704221118165629

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2018869009

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.2174%2f157488711704221118165629Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Longhitano&issn=1574-8871&title=Reviews+on+Recent+Clinical+Trials&atitle=The+Route+of+Neuro-Critical+Care&volume=17&issue=4&spage=225&epage=226&date=2022&doi=10.2174%2F157488711704221118165629&pmid=36593738&sid=OVID:embase

100.

TY - JOUR

DB - Embase

AN - 2018809835

ID - 35486831 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35486831]

T1 - Gut Microbiome in Anesthesiology and Pain Medicine

A1 - Minerbi A.

A1 - Shen S.

Y1 - 2022//

N2 - The gut microbiome plays critical roles in human health and disease. Recent studies suggest it may also be associated with chronic pain and postoperative pain outcomes. In animal models, the composition of the gut microbiome changes after general anesthesia and affects the host response to medications, including anesthetics and opioids. In humans, the gut microbiome is associated with the development of postoperative pain and neurocognitive disorders. Additionally, the composition of the gut microbiome has been associated with pain conditions including visceral pain, nociplastic pain, complex regional pain syndrome, and headaches, partly through altered concentration of circulating bacterial-derived metabolites. Furthermore, animal studies demonstrate the critical role of the gut microbiome in neuropathic pain via immunomodulatory mechanisms. This article reviews basic concepts of the human gut microbiome and its interactions with the host and provide a comprehensive overview of the evidence linking the gut microbiome to anesthesiology, critical care, and pain medicine.Copyright © 2022 Lippincott Williams and Wilkins. All rights reserved.

KW - \*analgesia

KW - \*anesthesiology

KW - chronic pain

KW - comorbidity

KW - critically ill patient

KW - disease association

KW - disorders of higher cerebral function

KW - drug sensitivity

KW - fibromyalgia

KW - general anesthesia

KW - headache

KW - human

KW - intensive care

KW - \*intestine flora

KW - lung microbiota

KW - microbial interaction

KW - neuropathic pain

KW - nonhuman

KW - pain

KW - perioperative period

KW - postoperative delirium

KW - postoperative pain

KW - review

KW - rodent

KW - visceral pain

KW - anesthetic agent

KW - opiate

JF - Anesthesiology

JA - Anesthesiology

LA - English

VL - 137

IS - 1

SP - 93

EP - 108

CY - United States

PB - Lippincott Williams and Wilkins

SN - 0003-3022

SN - 1528-1175

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UR - http://journals.lww.com/anesthesiology/pages/default.aspx

DO - https://dx.doi.org/10.1097/ALN.0000000000004204

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2018809835

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1097%2fALN.0000000000004204Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Minerbi&issn=0003-3022&title=Anesthesiology&atitle=Gut+Microbiome+in+Anesthesiology+and+Pain+Medicine&volume=137&issue=1&spage=93&epage=108&date=2022&doi=10.1097%2FALN.0000000000004204&pmid=35486831&sid=OVID:embase

101.

TY - JOUR

DB - Embase

AN - 2017864316

ID - 35681166 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35681166]

T1 - Pushing the frontiers of military medical excellence: updates, progress and future needs

A1 - Seah J.J.

A1 - Wang D.-Y.

AO - Wang, De-Yun; ORCID: https://orcid.org/0000-0002-0909-2963

Y1 - 2022//

N2 - Since its establishment in 2014, MilitaryMedicalResearch has come a long way in becoming a premier journal for scientific articles from various different specialties, with a special emphasis on topics with military relevance. The field of military medicine may be obscure, and may not be readily encountered by the typical clinician on a day-to-day basis. This journal aims not only to pursue excellence in military research, but also keep current with the latest advancements on general medical topics from each and every specialty. This editorial serves to recap and synthesize the existing progress, updates and future needs of military medical excellence, discussing foremostly the unique traits of literature published in this journal, and subsequently presenting the discourse regarding wartime and peacetime medicine, the role of the military in a public health emergency, as well as wound healing and organ regeneration. Special attention have been devoted to military topics to shed light on the effects of Chemical, Biological, Radiological and Explosive (CBRE) warfare, environmental medicine and military psychiatry, topics which rarely have a chance to be discussed elsewhere. The interconnectedness between military combat and soldier physical and mental well-being is intricate, and has been distorted by pandemics such as coronavirus disease 2019 (COVID-19). This journal has come a long way since its first article was published, steadily contributing to the existing knowledge pool on general medical topics with a military slant. Only with continuous research and sharing, can we build upon the work of the scientific community, with hopes for the betterment of patient care.Copyright © 2022, The Author(s).

KW - basic science

KW - clinical medicine

KW - coronavirus disease 2019

KW - editorial

KW - environmental medicine

KW - general practice

KW - human

KW - microbiome

KW - \*military medical personnel

KW - military medicine

KW - military research

KW - patient care

KW - posttraumatic stress disorder

KW - psychological well-being

KW - randomized controlled trial (topic)

KW - sepsis

KW - septic shock

KW - tissue engineering

KW - warfare

KW - wound healing

JF - Military Medical Research

JA - Mil. med. res.

LA - English

VL - 9

IS - 1

SP - 27

CY - United Kingdom

PB - BioMed Central Ltd

SN - 2095-7467

SN - 2054-9369

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M1 - (Wang) Infectious Diseases Translational Research Programme, Yong Loo Lin School of Medicine, National University of Singapore, Singapore, Singapore

UR - https://mmrjournal.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s40779-022-00388-x

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed25&NEWS=N&AN=2017864316

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed25&DO=10.1186%2fs40779-022-00388-xLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Seah&issn=2095-7467&title=Military+Medical+Research&atitle=Pushing+the+frontiers+of+military+medical+excellence%3A+updates%2C+progress+and+future+needs&volume=9&issue=1&spage=27&epage=&date=2022&doi=10.1186%2Fs40779-022-00388-x&pmid=35681166&sid=OVID:embase

102.

TY - JOUR

DB - Embase

AN - 2020310176

ID - 36122838 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36122838]

T1 - Differential co-expression networks of the gut microbiota are associated with depression and anxiety treatment resistance among psychiatric inpatients

A1 - Thompson D.S.

A1 - Fu C.

A1 - Gandhi T.

A1 - Fowler J.C.

A1 - Frueh B.C.

A1 - Weinstein B.L.

A1 - Petrosino J.

A1 - Hadden J.K.

A1 - Carlson M.

A1 - Coarfa C.

A1 - Madan A.

Y1 - 2023//

N2 - Background: Comorbid anxiety and depression are common and are associated with greater disease burden than either alone. Our recent efforts have identified an association between gut microbiota dysfunction and severity of anxiety and depression. In this follow-up, we applied Differential Co-Expression Analysis (DiffCoEx) to identify potential gut microbiota biomarker(s) candidates of treatment resistance among psychiatric inpatients. Method(s): In a sample of convenience, 100 psychiatric inpatients provided clinical data at admission and discharge; fecal samples were collected early during the hospitalization. Whole genome shotgun sequencing methods were used to process samples. DiffCoEx was used to identify clusters of microbial features significantly different based on treatment resistance status. Once overlapping features were identified, a knowledge-mining tool was used to review the literature using a list of microbial species/pathways and a select number of medical subject headlines (MeSH) terms relevant for depression, anxiety, and brain-gut-axis dysregulation. Network analysis used overlapping features to identify microbial interactions that could impact treatment resistance. Result(s): DiffCoEx analyzed 10,403 bacterial features: 43/44 microbial features associated with depression treatment resistance overlapped with 43/114 microbial features associated with anxiety treatment resistance. Network analysis resulted in 8 biological interactions between 16 bacterial species. Clostridium perfringens evidenced the highest connection strength (0.95). Erysipelotrichaceae bacterium 6\_1\_45 has been most widely examined, is associated with inflammation and dysbiosis, but has not been associated with depression or anxiety. Conclusion(s): DiffCoEx potentially identified gut bacteria biomarker candidates of depression and anxiety treatment-resistance. Future efforts in psychiatric microbiology should examine the mechanistic relationship of identified pro-inflammatory species, potentially contributing to a biomarker-based algorithm for treatment resistance.Copyright © 2022 Elsevier Inc.

KW - adult

KW - \*anxiety disorder

KW - article

KW - bacterium identification

KW - Clostridium perfringens

KW - convenience sample

KW - demography

KW - \*depression

KW - \*disease association

KW - disease marker

KW - DSM-IV

KW - dysbiosis

KW - Erysipelotrichaceae

KW - feces analysis

KW - female

KW - hospital admission

KW - human

KW - inflammation

KW - \*intestine flora

KW - length of stay

KW - major clinical study

KW - male

KW - mental health care

KW - \*mental patient

KW - microbial interaction

KW - nonhuman

KW - shotgun sequencing

KW - whole genome sequencing

KW - biological marker/ec [Endogenous Compound]

JF - Progress in Neuro-Psychopharmacology and Biological Psychiatry

JA - Prog. Neuro-Psychopharmacol. Biol. Psychiatry

LA - English

VL - 120

SP - 110638

CY - United States

PB - Elsevier Inc.

SN - 0278-5846

SN - 1878-4216

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UR - http://www.sciencedirect.com/science/journal/02785846

DO - https://dx.doi.org/10.1016/j.pnpbp.2022.110638

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020310176

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1016%2fj.pnpbp.2022.110638Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Thompson&issn=0278-5846&title=Progress+in+Neuro-Psychopharmacology+and+Biological+Psychiatry&atitle=Differential+co-expression+networks+of+the+gut+microbiota+are+associated+with+depression+and+anxiety+treatment+resistance+among+psychiatric+inpatients&volume=120&issue=&spage=110638&epage=&date=2023&doi=10.1016%2Fj.pnpbp.2022.110638&pmid=36122838&sid=OVID:embase

103.

TY - JOUR

DB - Embase

AN - 2015387855

ID - 35159189 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35159189]

T1 - The Microbiota-Gut Axis in Premature Infants: Physio-Pathological Implications

A1 - Bresesti I.

A1 - Salvatore S.

A1 - Valetti G.

A1 - Baj A.

A1 - Giaroni C.

A1 - Agosti M.

Y1 - 2022//

N2 - Intriguing evidence is emerging in regard to the influence of gut microbiota composition and function on host health from the very early stages of life. The development of the saprophytic microflora is conditioned by several factors in infants, and peculiarities have been found for babies born prematurely. This population is particularly exposed to a high risk of infection, postnatal antibiotic treatment, feeding difficulties and neurodevelopmental disabilities. To date, there is still a wide gap in understanding all the determinants and the mechanism behind microbiota disruption and its influence in the development of the most common complications of premature infants. A large body of evidence has emerged during the last decades showing the existence of a bidirectional communication axis involving the gut microbiota, the gut and the brain, defined as the microbiota- gut-brain axis. In this context, given that very few data are available to demonstrate the correlation between microbiota dysbiosis and neurodevelopmental disorders in preterm infants, increasing interest has arisen to better understand the impact of the microbiota-gut-brain axis on the clinical outcomes of premature infants and to clarify how this may lead to alternative preventive, diagnostic and therapeutic strategies. In this review, we explored the current evidence regarding microbiota development in premature infants, focusing on the effects of delivery mode, type of feeding, environmental factors and possible influence of the microbiota-gut-brain axis on preterm clinical outcomes during their hospital stay and on their health status later in life.Copyright © 2022 by the authors. Licensee MDPI, Basel, Switzerland.

KW - antibiotic sensitivity

KW - Apgar score

KW - asphyxia

KW - autonomic nervous system

KW - bacteremia

KW - Bacteroides

KW - Bacteroidetes

KW - Bifidobacterium

KW - blood brain barrier

KW - brain development

KW - clinical outcome

KW - Clostridia

KW - Clostridiales

KW - constipation

KW - depression

KW - Enterococcus faecalis

KW - environmental factor

KW - enzyme activity

KW - Escherichia coli

KW - Eubacterium

KW - feces microflora

KW - feeding

KW - Gammaproteobacteria

KW - gene expression

KW - hospitalization

KW - hypoxia

KW - immune response

KW - inflammatory bowel disease

KW - innate immunity

KW - \*intestine flora

KW - intestine innervation

KW - Klebsiella pneumoniae

KW - Lactobacillales

KW - Lactobacillus

KW - mental disease

KW - metagenomics

KW - microbial community

KW - microbial diversity

KW - microbiome

KW - microglia

KW - mortality

KW - myelination

KW - necrotizing enterocolitis

KW - nerve cell differentiation

KW - nerve degeneration

KW - nervous system inflammation

KW - nonhuman

KW - outcome assessment

KW - parenteral nutrition

KW - \*pathophysiology

KW - pregnancy

KW - \*prematurity

KW - Proteobacteria

KW - review

KW - shotgun sequencing

KW - Staphylococcus epidermidis

KW - upregulation

KW - corticosterone

KW - immunoglobulin A

KW - interleukin 2

KW - RNA 16S

KW - short chain fatty acid

KW - toll like receptor 4

KW - toll like receptor 5

JF - Cells

JA - Cells

LA - English

VL - 11

IS - 3

SP - 379

CY - Switzerland

PB - MDPI

SN - 2073-4409 (electronic)

SN - 2073-4409

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UR - https://www.mdpi.com/2073-4409/11/3/379/pdf

DO - https://dx.doi.org/10.3390/cells11030379

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2015387855

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3390%2fcells11030379Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bresesti&issn=2073-4409&title=Cells&atitle=The+Microbiota-Gut+Axis+in+Premature+Infants%3A+Physio-Pathological+Implications&volume=11&issue=3&spage=379&epage=&date=2022&doi=10.3390%2Fcells11030379&pmid=35159189&sid=OVID:embase

104.

TY - JOUR

DB - Embase

AN - 2021356726

ID - 36191590 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36191590]

T1 - Features of gut microbiota in patients with anorexia nervosa

A1 - Yuan R.

A1 - Yang L.

A1 - Yao G.

A1 - Geng S.

A1 - Ge Q.

A1 - Bo S.

A1 - Li X.

Y1 - 2022//

N2 - Background:Anorexia nervosa (AN) is a psychological disorder, which is characterized by the misunderstanding of body image, food restriction, and low body weight. An increasing number of studies have reported that the pathophysiological mechanism of AN might be associated with the dysbiosis of gut microbiota. The purpose of our study was to explore the features of gut microbiota in patients with AN, hoping to provide valuable information on its pathogenesis and treatment. Method(s):In this cross-sectional study, from August 2020 to June 2021, patients with AN who were admitted into Peking University Third Hospital and Peking University Sixth Hospital (n = 30) were recruited as the AN group, and healthy controls (HC) were recruited from a middle school and a university in Beijing (n = 30). Demographic data, Hamilton Depression Scale (HAMD) scores of the two groups, and length of stay of the AN group were recorded. Microbial diversity analysis of gut microbiota in stool samples from the two groups was analyzed by 16S ribosomal RNA (rRNA) gene sequencing. Result(s):The weight (AN vs. HC, [39.31 +/- 7.90] kg vs. [56.47 +/- 8.88] kg, P < 0.001) and body mass index (BMI, AN vs. HC, [14.92 +/- 2.54] kg/m2vs. [20.89 +/- 2.14] kg/m2, P < 0.001) of patients with AN were statistically significantly lower than those of HC, and HAMD scores in AN group were statistically significantly higher than those of HC. For alpha diversity, there were no statistically significant differences between the two groups; for beta diversity, the two groups differed obviously regarding community composition. Compared to HC, the proportion of Lachnospiraceae in patients with AN was statistically significantly higher (AN vs. HC, 40.50% vs. 31.21%, Z = -1.981, P = 0.048), while that of Ruminococcaceae was lower (AN vs. HC, 12.17% vs. 19.15%, Z = -2.728, P = 0.007); the proportion of Faecalibacterium (AN vs. HC, 3.97% vs. 9.40%, Z = -3.638, P < 0.001) and Subdoligranulum (AN vs. HC, 4.60% vs. 7.02%, Z = -2.369, P = 0.018) were statistically significantly lower, while that of Eubacterium\_hallii\_group was significantly higher (AN vs. HC, 7.63% vs. 3.43%, Z = -2.115, P = 0.035). Linear discriminant effect (LEfSe) analysis (LDA score >3.5) showed that o\_Lachnospirales, f\_Lachnospiraceae, and g\_Eubacterium\_hallii\_group (o, f and g represents order, family and genus respectively) were enriched in patients with AN. Microbial function of nutrient transport and metabolism in AN group were more abundant (P > 0.05). In AN group, weight and BMI were significantly negatively correlated with the abundance of Bacteroidota and Bacteroides, while positively correlated with Subdoligranulum. BMI was significantly positively correlated with Firmicutes; HAMD scores were significantly negatively correlated with Faecalibacterium. Conclusion(s):The composition of gut microbiota in patients with AN was different from that of healthy people. Clinical indicators have correlations with the abundance of gut microbiota in patients with AN.Copyright © 2022 Lippincott Williams and Wilkins. All rights reserved.

KW - adolescent

KW - adult

KW - \*anorexia nervosa/di [Diagnosis]

KW - article

KW - body mass

KW - body weight

KW - China

KW - clinical article

KW - \*clinical feature

KW - community structure

KW - controlled study

KW - cross-sectional study

KW - demographics

KW - DNA extraction

KW - Eubacterium hallii

KW - Faecalibacterium

KW - feces analysis

KW - female

KW - gene sequence

KW - Hamilton Depression Rating Scale

KW - hospital admission

KW - human

KW - \*intestine flora

KW - Lachnospiraceae

KW - length of stay

KW - male

KW - microbial community

KW - microbial diversity

KW - middle school

KW - nonhuman

KW - polymerase chain reaction

KW - population abundance

KW - Ruminococcaceae

KW - RNA 16S/ec [Endogenous Compound]

JF - Chinese Medical Journal

JA - Chin. Med. J.

LA - English

VL - 135

IS - 16

SP - 1993

EP - 2002

CY - China

PB - Lippincott Williams and Wilkins

SN - 0366-6999

SN - 2542-5641

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UR - https://journals.lww.com/cmj/pages/default.aspx

DO - https://dx.doi.org/10.1097/CM9.0000000000002362

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2021356726

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1097%2fCM9.0000000000002362Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Yuan&issn=0366-6999&title=Chinese+Medical+Journal&atitle=Features+of+gut+microbiota+in+patients+with+anorexia+nervosa&volume=135&issue=16&spage=1993&epage=2002&date=2022&doi=10.1097%2FCM9.0000000000002362&pmid=36191590&sid=OVID:embase

105.

TY - JOUR

DB - Embase

AN - 2020480136

ID - 36476497 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36476497]

T1 - The central role of the gut in intensive care

A1 - Corriero A.

A1 - Gadaleta R.M.

A1 - Puntillo F.

A1 - Inchingolo F.

A1 - Moschetta A.

A1 - Brienza N.

Y1 - 2022//

N2 - Critically ill patients undergo early impairment of their gut microbiota (GM) due to routine antibiotic therapies and other environmental factors leading to intestinal dysbiosis. The GM establishes connections with the rest of the human body along several axes representing critical inter-organ crosstalks that, once disrupted, play a major role in the pathophysiology of numerous diseases and their complications. Key players in this communication are GM metabolites such as short-chain fatty acids and bile acids, neurotransmitters, hormones, interleukins, and toxins. Intensivists juggle at the crossroad of multiple connections between the intestine and the rest of the body. Harnessing the GM in ICU could improve the management of several challenges, such as infections, traumatic brain injury, heart failure, kidney injury, and liver dysfunction. The study of molecular pathways affected by the GM in different clinical conditions is still at an early stage, and evidence in critically ill patients is lacking. This review aims to describe dysbiosis in critical illness and provide intensivists with a perspective on the potential as adjuvant strategies (e.g., nutrition, probiotics, prebiotics and synbiotics supplementation, adsorbent charcoal, beta-lactamase, and fecal microbiota transplantation) to modulate the GM in ICU patients and attempt to restore eubiosis.Copyright © 2022, The Author(s).

KW - acute kidney failure

KW - adult respiratory distress syndrome

KW - Akkermansia

KW - Akkermansia muciniphila

KW - alcohol liver disease

KW - Alzheimer disease

KW - asthma

KW - atherosclerosis

KW - atopy

KW - autoimmune hepatitis

KW - bacterial colonization

KW - Bifidobacteriaceae

KW - brain-gut axis

KW - bronchiectasis

KW - bronchiolitis

KW - bronchiolitis obliterans

KW - Campylobacter

KW - chronic kidney failure/th [Therapy]

KW - Clostridioides difficile

KW - Clostridium difficile infection/th [Therapy]

KW - Clostridium tyrobutyricum

KW - coronavirus disease 2019/dt [Drug Therapy]

KW - critically ill patient

KW - \*dysbiosis/dt [Drug Therapy]

KW - end stage renal disease/th [Therapy]

KW - enteric feeding

KW - Enterobacteriaceae

KW - Enterococcaceae

KW - Enterococcus

KW - Enterococcus faecalis

KW - Enterococcus gallinarum

KW - Escherichia

KW - Faecalibacterium

KW - fecal microbiota transplantation

KW - fiber intake

KW - gastrointestinal symptom

KW - heart failure

KW - heart muscle fibrosis

KW - heart ventricle hypertrophy

KW - hemodialysis

KW - host

KW - human

KW - hypertension

KW - inflammatory bowel disease

KW - intensive care unit

KW - intestine epithelium

KW - \*intestine flora

KW - intestine innervation

KW - intestine mucosa permeability

KW - Klebsiella pneumoniae

KW - Lactobacillus

KW - length of stay

KW - mental disease

KW - mortality

KW - multiple sclerosis

KW - myocardial ischemia reperfusion injury

KW - nervous system inflammation

KW - nonalcoholic steatohepatitis

KW - nonhuman

KW - parenteral nutrition

KW - Parkinson disease

KW - peritoneal dialysis

KW - Prevotellaceae

KW - review

KW - risk reduction

KW - Salmonella

KW - sepsis/dt [Drug Therapy]

KW - sepsis/th [Therapy]

KW - Sequential Organ Failure Assessment Score

KW - Shigella

KW - Streptococcus

KW - Streptococcus pneumonia/th [Therapy]

KW - traumatic brain injury/dt [Drug Therapy]

KW - traumatic brain injury/th [Therapy]

KW - treatment duration

KW - ventilator associated pneumonia/dt [Drug Therapy]

KW - ventilator associated pneumonia/pc [Prevention]

KW - adsorbent

KW - antibiotic agent/dt [Drug Therapy]

KW - beta lactamase inhibitor/dt [Drug Therapy]

KW - ceftriaxone/cb [Drug Combination]

KW - cephalosporin/dt [Drug Therapy]

KW - cryopyrin/ec [Endogenous Compound]

KW - farnesoid X receptor/ec [Endogenous Compound]

KW - G protein coupled receptor/ec [Endogenous Compound]

KW - hypertensive factor

KW - interleukin 1/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - macrolide/cb [Drug Combination]

KW - penicillin derivative/dt [Drug Therapy]

KW - phosphatidylcholine/ec [Endogenous Compound]

KW - prebiotic agent

KW - probiotic agent/dt [Drug Therapy]

KW - ribaxamase/cb [Drug Combination]

KW - sulbactam/cb [Drug Combination]

KW - synbiotic agent

KW - tazobactam/cb [Drug Combination]

KW - unclassified drug

KW - gut heart axis

KW - gut kidney axis

KW - gut liver axis

KW - gut lung axis

KW - dav 132

KW - g protein coupled bile acid receptor 1/ec [Endogenous Compound]

XT - coronavirus disease 2019 / drug therapy / probiotic agent

XT - dysbiosis / drug therapy / beta lactamase inhibitor

XT - dysbiosis / drug therapy / cephalosporin

XT - dysbiosis / drug therapy / penicillin derivative

XT - sepsis / drug therapy / probiotic agent

XT - traumatic brain injury / drug therapy / probiotic agent

XT - ventilator associated pneumonia / drug therapy / antibiotic agent

XT - ventilator associated pneumonia / drug therapy / probiotic agent

XT - antibiotic agent / drug therapy / ventilator associated pneumonia

XT - beta lactamase inhibitor / drug therapy / dysbiosis

XT - ceftriaxone / drug combination / macrolide

XT - cephalosporin / drug therapy / dysbiosis

XT - macrolide / drug combination / ceftriaxone

XT - penicillin derivative / drug therapy / dysbiosis

XT - probiotic agent / drug therapy / coronavirus disease 2019

XT - probiotic agent / drug therapy / sepsis

XT - probiotic agent / drug therapy / traumatic brain injury

XT - probiotic agent / drug therapy / ventilator associated pneumonia

XT - ribaxamase / drug combination / tazobactam

XT - sulbactam / drug combination / tazobactam

XT - tazobactam / drug combination / ribaxamase

XT - tazobactam / drug combination / sulbactam

JF - Critical Care

JA - Crit. Care

LA - English

VL - 26

IS - 1

SP - 379

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1364-8535

SN - 1466-609X

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C3 - syn 004

UR - https://ccforum.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s13054-022-04259-8

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020480136

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1186%2fs13054-022-04259-8Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Corriero&issn=1364-8535&title=Critical+Care&atitle=The+central+role+of+the+gut+in+intensive+care&volume=26&issue=1&spage=379&epage=&date=2022&doi=10.1186%2Fs13054-022-04259-8&pmid=36476497&sid=OVID:embase

106.

TY - JOUR

DB - Embase

AN - 2020422095

T1 - Should Anabolic Agents be Used for Resolving Catabolism in Post-ICU Recovery?

A1 - Vanzant E.

A1 - Frayman R.

A1 - Hensley S.

A1 - Rosenthal M.

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Y1 - 2022//

N2 - Purpose of Review: Over the last several decades, we have come to recognize that injury and critical illness (CI) are a spectrum of disease. Acute CI is associated with a hypermetabolic response that is likely beneficial immediately after an insult. A subset of these patients go on to develop chronic CI with persistent inflammation, immunosuppression, and catabolism that extends well beyond injury and is associated with poor outcomes. Uncontrolled catabolism leads to progressive loss of lean muscle mass resulting in decreased functionality and dampened recovery. The ability to combat catabolism with therapeutic agents has become an area of interest for providers who work with these populations. This paper aims to review the recent literature on anabolic agents that may be used to attenuate the catabolic response in post-ICU recovery patients. Recent Findings: Literature from the last 5 years was sparse for many agents with anabolic potential. There are some data to support the use of propranolol and oxandrolone in certain CI populations. Summary: More randomized controlled trials are greatly needed to ascertain precise timing of such adjuncts during both the acute phase of injury and recovery period in order to support the patient's endogenous anabolic response.Copyright © 2022, The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature.

KW - anemia

KW - bacteremia

KW - body weight gain

KW - bradycardia

KW - \*catabolism

KW - clinical trial (topic)

KW - Clostridia

KW - continuous renal replacement therapy

KW - coronary artery disease

KW - critical illness

KW - critically ill patient

KW - depression

KW - diarrhea

KW - dysbiosis

KW - energy expenditure

KW - erythrocytosis

KW - fatigue

KW - Fusobacteria

KW - heart failure

KW - heart rate

KW - hemodynamics

KW - hemorrhagic shock

KW - hospitalization

KW - human

KW - hypercalcemia

KW - hyperglycemia

KW - hyperinsulinemia

KW - hypertension

KW - hypoglycemia

KW - hypotension

KW - immunosuppressive treatment

KW - inflammation

KW - insulin resistance

KW - insulin treatment

KW - \*intensive care unit

KW - Lactobacillus

KW - length of stay

KW - lipolysis

KW - liver toxicity

KW - mean arterial pressure

KW - mortality

KW - muscle atrophy

KW - muscle strength

KW - myositis

KW - nephrosis

KW - nitrogen balance

KW - non insulin dependent diabetes mellitus

KW - paresthesia

KW - patient safety

KW - Pi3K/Akt signaling

KW - prostate cancer

KW - protein synthesis

KW - renal replacement therapy

KW - review

KW - Saccharomyces

KW - sarcopenia

KW - sepsis

KW - septic shock

KW - Staphylococcus

KW - symbiosis

KW - thermal injury

KW - viremia

KW - virilization

KW - wound healing

KW - \*anabolic agent

KW - beta adrenergic receptor blocking agent

KW - catecholamine

KW - clonidine

KW - epinephrine

KW - fructose oligosaccharide

KW - hydrocortisone

KW - interleukin 1

KW - mammalian target of rapamycin

KW - oxandrolone

KW - prasterone

KW - propranolol

KW - somatomedin C

KW - testosterone

KW - tumor necrosis factor

JF - Current Surgery Reports

JA - Current Surgery Reports

LA - English

VL - 10

IS - 12

SP - 206

EP - 217

CY - United States

PB - Springer

SN - 2167-4817 (electronic)

SN - 2167-4817

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UR - https://www.springer.com/journal/40137

DO - https://dx.doi.org/10.1007/s40137-022-00336-7

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020422095

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1007%2fs40137-022-00336-7Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Vanzant&issn=2167-4817&title=Current+Surgery+Reports&atitle=Should+Anabolic+Agents+be+Used+for+Resolving+Catabolism+in+Post-ICU+Recovery%3F&volume=10&issue=12&spage=206&epage=217&date=2022&doi=10.1007%2Fs40137-022-00336-7&pmid=&sid=OVID:embase

107.

TY - JOUR

DB - Embase

AN - 2019045378

ID - 35658593 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35658593]

T1 - Indole-3-Propionic Acid as a Potential Therapeutic Agent for Sepsis-Induced Gut Microbiota Disturbance

A1 - Fang H.

A1 - Fang M.

A1 - Wang Y.

A1 - Zhang H.

A1 - Li J.

A1 - Chen J.

A1 - Wu Q.

A1 - He L.

A1 - Xu J.

A1 - Deng J.

A1 - Liu M.

A1 - Deng Y.

A1 - Chen C.

Y1 - 2022//

N2 - The effects of using gut microbiota metabolites instead of live microorganisms to modulate sepsis-induced gut dysbiosis remain largely unknown. We assessed the effects of microbiota metabolite indole-3-propionic acid (IPA) on gut microbiota in mice during sepsis. Sepsis models were constructed by cecal ligation and puncture (CLP) methods. Fecal microbiota composition analysis was performed to characterize the gut microbiota composition. Fecal microbiota transplantation was performed to validate the roles of gut microbiota on sepsis progression. IPA-treated mice exhibited lower serum inflammatory mediator levels and a higher survival rate than those of saline-treated mice after modeling of sepsis, which were negated in the presence of antibiotics. Compared with saline-treated mice after modeling, IPA-treated mice showed a markedly different intestinal microbiota composition, with an enrichment of Bifidobacteriaceae family and a depletion of Enterobacteriaceae family. Mice gavaged with postoperative feces from IPA-treated animals displayed better survival than mice gavaged with feces from saline-treated animals. Overall, these data suggest that IPA offers a microbe-modulated survival advantage in septic mice, indicating that some microbiota metabolites could replace live microorganisms as potential options for regulation of sepsis-induced gut dysbiosis. IMPORTANCE The role of gut microbiota in the pathophysiology of sepsis is gaining increasing attention and developing effective and safe sepsis therapies targeting intestinal microorganisms is promising. Given the safety of probiotic supplementation or fecal microbiota transplantation in critically ill patients, identifying an abiotic agent to regulate the intestinal microbiota of septic patients is of clinical significance. This study revealed that IPA, a microbiota-generated tryptophan metabolite, ameliorated sepsis-induced mortality and decreased the serum levels of proinflammatory cytokines by modulating intestinal microbiota. Although IPA did not increase the abundance and diversity of the microbiota of septic mice, it significantly decreased the number of Enterobacteriaceae family. These findings indicate that a specific microbiota metabolite (e.g., IPA) can mediate the intestinal microbiota apart from FMT or probiotics.Copyright © 2022 Fang et al.

KW - anesthesia

KW - animal experiment

KW - animal model

KW - anxiety

KW - article

KW - Bifidobacteriaceae

KW - bioinformatics

KW - brain function

KW - cecal ligation and puncture-induced sepsis

KW - disease exacerbation

KW - Enterobacteriaceae

KW - enzyme linked immunosorbent assay

KW - fecal microbiota transplantation

KW - feces microflora

KW - gene sequence

KW - \*intestine flora

KW - kidney function

KW - Lactobacillus

KW - laparotomy

KW - male

KW - microbial diversity

KW - mortality

KW - mouse

KW - nonhuman

KW - \*sepsis/dt [Drug Therapy]

KW - \*sepsis/ep [Epidemiology]

KW - survival rate

KW - ampicillin/dt [Drug Therapy]

KW - bacterial DNA

KW - cytokine/ec [Endogenous Compound]

KW - \*indolepropionic acid/dt [Drug Therapy]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - lipopolysaccharide

KW - metronidazole/dt [Drug Therapy]

KW - neomycin/dt [Drug Therapy]

KW - procalcitonin/ec [Endogenous Compound]

KW - RNA 16S/ec [Endogenous Compound]

KW - sodium chloride

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vancomycin/dt [Drug Therapy]

KW - ELISA kit

KW - needle

KW - nucleic acid isolation kit

KW - Mag-Bind

XT - sepsis / drug therapy / ampicillin

XT - sepsis / drug therapy / indolepropionic acid

XT - sepsis / drug therapy / metronidazole

XT - sepsis / drug therapy / neomycin

XT - sepsis / drug therapy / vancomycin

XT - ampicillin / drug therapy / sepsis

XT - indolepropionic acid / drug therapy / sepsis

XT - metronidazole / drug therapy / sepsis

XT - neomycin / drug therapy / sepsis

XT - vancomycin / drug therapy / sepsis

JF - Microbiology Spectrum

JA - Microbiol. Spectr.

LA - English

VL - 10

IS - 3

SP -

CY - United States

PB - American Society for Microbiology

SN - 2165-0497 (electronic)

SN - 2165-0497

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M2 - Mag-Bind: Omega Bio-Tek [United States]

C1 - Mag-Bind: Omega Bio-Tek [United States]

C2 - Cusabio, MEIMIAN, Omega Bio-Tek [United States]

UR - https://journals.asm.org/doi/10.1128/spectrum.00125-22

DO - https://dx.doi.org/10.1128/spectrum.00125-22

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2019045378

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1128%2fspectrum.00125-22Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fang&issn=2165-0497&title=Microbiology+Spectrum&atitle=Indole-3-Propionic+Acid+as+a+Potential+Therapeutic+Agent+for+Sepsis-Induced+Gut+Microbiota+Disturbance&volume=10&issue=3&spage=&epage=&date=2022&doi=10.1128%2Fspectrum.00125-22&pmid=35658593&sid=OVID:embase

108.

TY - JOUR

DB - Embase

AN - 2018448054

ID - 35933433 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35933433]

T1 - Core outcome measures for clinical effectiveness trials of nutritional and metabolic interventions in critical illness: an international modified Delphi consensus study evaluation (CONCISE)

A1 - Davies T.W.

A1 - van Gassel R.J.J.

A1 - van de Poll M.

A1 - Gunst J.

A1 - Casaer M.P.

A1 - Christopher K.B.

A1 - Preiser J.C.

A1 - Hill A.

A1 - Gundogan K.

A1 - Reintam-Blaser A.

A1 - Rousseau A.F.

A1 - Hodgson C.

A1 - Needham D.M.

A1 - Castro M.

A1 - Schaller S.

A1 - McClelland T.

A1 - Pilkington J.J.

A1 - Sevin C.M.

A1 - Wischmeyer P.E.

A1 - Lee Z.Y.

A1 - Govil D.

A1 - Li A.

A1 - Chapple L.

A1 - Denehy L.

A1 - Montejo-Gonzalez J.C.

A1 - Taylor B.

A1 - Bear D.E.

A1 - Pearse R.

A1 - McNelly A.

A1 - Prowle J.

A1 - Puthucheary Z.A.

Y1 - 2022//

N2 - Background: Clinical research on nutritional and metabolic interventions in critically ill patients is heterogenous regarding time points, outcomes and measurement instruments used, impeding intervention development and data syntheses, and ultimately worsening clinical outcomes. We aimed to identify and develop a set of core outcome domains and associated measurement instruments to include in all research in critically ill patients. Method(s): An updated systematic review informed a two-stage modified Delphi consensus process (domains followed by instruments). Measurement instruments for domains considered 'essential' were taken through the second stage of the Delphi and a subsequent consensus meeting. Result(s): In total, 213 participants (41 patients/caregivers, 50 clinical researchers and 122 healthcare professionals) from 24 countries contributed. Consensus was reached on time points (30 and 90 days post-randomisation). Three domains were considered 'essential' at 30 days (survival, physical function and Infection) and five at 90 days (survival, physical function, activities of daily living, nutritional status and muscle/nerve function). Core 'essential' measurement instruments reached consensus for survival and activities of daily living, and 'recommended' measurement instruments for physical function, nutritional status and muscle/nerve function. No consensus was reached for a measurement instrument for Infection. Four further domains met criteria for 'recommended,' but not 'essential,' to measure at 30 days post-randomisation (organ dysfunction, muscle/nerve function, nutritional status and wound healing) and three at 90 days (frailty, body composition and organ dysfunction). Conclusion(s): The CONCISE core outcome set is an internationally agreed minimum set of outcomes for use at 30 and 90 days post-randomisation, in nutritional and metabolic clinical research in critically ill adults.Copyright © 2022, The Author(s).

KW - acute respiratory failure

KW - article

KW - body composition

KW - bone

KW - caregiver

KW - clinical outcome

KW - clinical research

KW - cognition

KW - \*consensus

KW - \*critical illness

KW - critically ill patient

KW - daily life activity

KW - Delphi study

KW - employment

KW - family

KW - fatigue

KW - frailty

KW - grip strength

KW - health care personnel

KW - health care utilization

KW - hospital discharge

KW - human

KW - infection

KW - inflammation

KW - intensive care unit

KW - length of stay

KW - life satisfaction

KW - mental health

KW - \*metabolism

KW - microbiome

KW - multiple organ failure

KW - muscle function

KW - \*nutrition

KW - nutritional status

KW - \*outcome assessment

KW - physical performance

KW - randomization

KW - randomized controlled trial (topic)

KW - scientist

KW - sexual health

KW - Short Form 36

KW - short physical performance battery

KW - six minute walk test

KW - stomach function

KW - survival

KW - swallowing

KW - systematic review

KW - wound healing

JF - Critical Care

JA - Crit. Care

LA - English

VL - 26

IS - 1

SP - 240

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1364-8535

SN - 1466-609X

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UR - https://ccforum.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s13054-022-04113-x

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2018448054

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1186%2fs13054-022-04113-xLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Davies&issn=1364-8535&title=Critical+Care&atitle=Core+outcome+measures+for+clinical+effectiveness+trials+of+nutritional+and+metabolic+interventions+in+critical+illness%3A+an+international+modified+Delphi+consensus+study+evaluation+%28CONCISE%29&volume=26&issue=1&spage=240&epage=&date=2022&doi=10.1186%2Fs13054-022-04113-x&pmid=35933433&sid=OVID:embase

109.

TY - JOUR

DB - Embase

AN - 2013648735

ID - 34473419 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34473419]

T1 - Recent advances in the early treatment of cystic fibrosis: Bridging the gap to highly effective modulator therapy

A1 - Lahiri T.

A1 - Sullivan J.S.

AO - Lahiri, Thomas; ORCID: https://orcid.org/0000-0001-8374-4918

Y1 - 2022//

N2 - Highly effective modulator therapy (HEMT) for cystic fibrosis (CF) has been touted as one of the greatest advances to date in CF care. As these therapies are now available for many older children and adults with CF, marked improvement of their nutritional status, pulmonary and gastrointestinal symptoms has been observed. However, most infants and younger children are not current candidates for HEMT due to age and/or cystic fibrosis transmembrane conductance regulator (CFTR) mutation. For these young children, it is essential to provide rigorous monitoring and care to avoid potential disease sequelae while awaiting HEMT availability. The following article highlights recent advances in the care of infants and young children with CF with regard to surveillance and treatment of nutritional, pulmonary, and gastrointestinal disorders. Recent clinical trials in this population are also reviewed.Copyright © 2021 Wiley Periodicals LLC

KW - anxiety

KW - article

KW - behavior therapy

KW - child growth

KW - child nutrition

KW - computer assisted tomography

KW - constipation/co [Complication]

KW - \*cystic fibrosis/dt [Drug Therapy]

KW - \*cystic fibrosis/th [Therapy]

KW - depression

KW - diet therapy

KW - dysbiosis/co [Complication]

KW - \*early intervention

KW - enteric feeding

KW - environmental factor

KW - family

KW - gastroesophageal reflux/co [Complication]

KW - health equity

KW - human

KW - immunization

KW - infancy

KW - intestine obstruction/co [Complication]

KW - liver disease/co [Complication]

KW - lung clearance

KW - lung function

KW - malnutrition

KW - mental health

KW - microbiology

KW - monitoring

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - pancreas disease/co [Complication]

KW - parent

KW - azithromycin/dt [Drug Therapy]

KW - azithromycin/pv [Special Situation for Pharmacovigilance]

KW - aztreonam/dt [Drug Therapy]

KW - aztreonam/pv [Special Situation for Pharmacovigilance]

KW - aztreonam lysine/dt [Drug Therapy]

KW - aztreonam lysine/pv [Special Situation for Pharmacovigilance]

KW - bronchodilating agent/dt [Drug Therapy]

KW - bronchodilating agent/pv [Special Situation for Pharmacovigilance]

KW - ceftazidime/dt [Drug Therapy]

KW - ceftazidime/pv [Special Situation for Pharmacovigilance]

KW - ciprofloxacin/dt [Drug Therapy]

KW - ciprofloxacin/pv [Special Situation for Pharmacovigilance]

KW - colistin/dt [Drug Therapy]

KW - colistin/pv [Special Situation for Pharmacovigilance]

KW - corticosteroid/dt [Drug Therapy]

KW - corticosteroid/pv [Special Situation for Pharmacovigilance]

KW - dornase alfa/dt [Drug Therapy]

KW - dornase alfa/pv [Special Situation for Pharmacovigilance]

KW - ivacaftor/dt [Drug Therapy]

KW - ivacaftor/pv [Special Situation for Pharmacovigilance]

KW - lumacaftor/dt [Drug Therapy]

KW - lumacaftor/pv [Special Situation for Pharmacovigilance]

KW - sodium chloride/dt [Drug Therapy]

KW - sodium chloride/pv [Special Situation for Pharmacovigilance]

KW - tobramycin/dt [Drug Therapy]

KW - tobramycin/pv [Special Situation for Pharmacovigilance]

KW - feeding tube

KW - \*highly effective modulator therapy

XT - cystic fibrosis / drug therapy / azithromycin

XT - cystic fibrosis / drug therapy / aztreonam lysine

XT - cystic fibrosis / drug therapy / aztreonam

XT - cystic fibrosis / drug therapy / bronchodilating agent

XT - cystic fibrosis / drug therapy / ceftazidime

XT - cystic fibrosis / drug therapy / ciprofloxacin

XT - cystic fibrosis / drug therapy / colistin

XT - cystic fibrosis / drug therapy / corticosteroid

XT - cystic fibrosis / drug therapy / dornase alfa

XT - cystic fibrosis / drug therapy / ivacaftor

XT - cystic fibrosis / drug therapy / lumacaftor

XT - cystic fibrosis / drug therapy / sodium chloride

XT - cystic fibrosis / drug therapy / tobramycin

XT - azithromycin / drug therapy / cystic fibrosis

XT - azithromycin / special situation for pharmacovigilance / pediatric patient

XT - aztreonam / drug therapy / cystic fibrosis

XT - aztreonam / special situation for pharmacovigilance / pediatric patient

XT - aztreonam lysine / drug therapy / cystic fibrosis

XT - aztreonam lysine / special situation for pharmacovigilance / pediatric patient

XT - bronchodilating agent / drug therapy / cystic fibrosis

XT - bronchodilating agent / special situation for pharmacovigilance / pediatric patient

XT - ceftazidime / drug therapy / cystic fibrosis

XT - ceftazidime / special situation for pharmacovigilance / pediatric patient

XT - ciprofloxacin / drug therapy / cystic fibrosis

XT - ciprofloxacin / special situation for pharmacovigilance / pediatric patient

XT - colistin / drug therapy / cystic fibrosis

XT - colistin / special situation for pharmacovigilance / pediatric patient

XT - corticosteroid / drug therapy / cystic fibrosis

XT - corticosteroid / special situation for pharmacovigilance / pediatric patient

XT - dornase alfa / drug therapy / cystic fibrosis

XT - dornase alfa / special situation for pharmacovigilance / pediatric patient

XT - ivacaftor / drug therapy / cystic fibrosis

XT - ivacaftor / special situation for pharmacovigilance / pediatric patient

XT - lumacaftor / drug therapy / cystic fibrosis

XT - lumacaftor / special situation for pharmacovigilance / pediatric patient

XT - sodium chloride / drug therapy / cystic fibrosis

XT - sodium chloride / special situation for pharmacovigilance / pediatric patient

XT - tobramycin / drug therapy / cystic fibrosis

XT - tobramycin / special situation for pharmacovigilance / pediatric patient

JF - Pediatric Pulmonology

JA - Pediatr. Pulmonol.

LA - English

VL - 57

IS - S1

SP - S60

EP - S74

CY - United States

PB - John Wiley and Sons Inc

SN - 8755-6863

SN - 1099-0496

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UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1099-0496

DO - https://dx.doi.org/10.1002/ppul.25660

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2013648735

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1002%2fppul.25660Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lahiri&issn=8755-6863&title=Pediatric+Pulmonology&atitle=Recent+advances+in+the+early+treatment+of+cystic+fibrosis%3A+Bridging+the+gap+to+highly+effective+modulator+therapy&volume=57&issue=S1&spage=S60&epage=S74&date=2022&doi=10.1002%2Fppul.25660&pmid=34473419&sid=OVID:embase

110.

TY - JOUR

DB - Embase

AN - 2020726288

ID - 36165028 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36165028]

T1 - Gastrointestinal symptoms in COVID-19: the long and the short of it

A1 - Freedberg D.E.

A1 - Chang L.

Y1 - 2022//

N2 - Purpose of reviewA large and growing number of patients have persistent gastrointestinal symptoms that they attribute to COVID-19. SARS-CoV-2, the virus that causes COVID-19, replicates within the gut and acute COVID-19 is associated with alteration of the gut microbiome. This article reviews recent observational data related to gastrointestinal symptoms in 'long COVID' and discusses pathophysiologic mechanisms that might explain persistent post-COVID gastrointestinal symptoms.Recent findingsGastrointestinal symptoms are present in half of the patients with acute COVID-19, persist 6 months after COVID-19 in 10-25% of patients, and are rated as the most bothersome symptom in 11% of all patients. These symptoms include heartburn, constipation, diarrhoea and abdominal pain and decline in prevalence with the passage of time. Long COVID gastrointestinal symptoms are associated with mental health symptoms (anxiety and depression) that predate COVID-19 and also with mental health symptoms that are concurrent, after recovery from COVID-19. The cause of long COVID gastrointestinal symptoms is unknown and hypotheses include the SARS-CoV-2 virus itself, which infects the gastrointestinal tract; COVID-19, which can be accompanied by gut microbiome changes, a profound systemic inflammatory response and critical illness; and/or effects of pandemic stress on gastrointestinal function and symptom perception, which may be unrelated to either SARS-CoV-2 or to COVID-19.SummaryNew, persistent gastrointestinal symptoms are commonly reported after recovery from COVID-19. The pathophysiology of these symptoms is unknown but likely to be multifactorial.Copyright © 2022 Lippincott Williams and Wilkins. All rights reserved.

KW - abdominal pain

KW - anxiety

KW - constipation

KW - depression

KW - diarrhea

KW - \*gastrointestinal symptom/et [Etiology]

KW - gastrointestinal tract

KW - heartburn

KW - human

KW - intestine infection

KW - irritable colon

KW - \*long COVID/et [Etiology]

KW - microbiome

KW - nonhuman

KW - pandemic

KW - pathophysiology

KW - review

KW - Severe acute respiratory syndrome coronavirus 2

JF - Current Opinion in Gastroenterology

JA - Curr. Opin. Gastroenterol.

LA - English

VL - 38

IS - 6

SP - 555

EP - 561

CY - United States

PB - Lippincott Williams and Wilkins

SN - 0267-1379

SN - 1531-7056

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UR - http://journals.lww.com/co-gastroenterology/pages/default.aspx

DO - https://dx.doi.org/10.1097/MOG.0000000000000876

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020726288

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1097%2fMOG.0000000000000876Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Freedberg&issn=0267-1379&title=Current+Opinion+in+Gastroenterology&atitle=Gastrointestinal+symptoms+in+COVID-19%3A+the+long+and+the+short+of+it&volume=38&issue=6&spage=555&epage=561&date=2022&doi=10.1097%2FMOG.0000000000000876&pmid=36165028&sid=OVID:embase

111.

TY - JOUR

DB - Embase

AN - 2020686588

ID - 36201610 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36201610]

T1 - Editorial: The double burn of malnutrition: the place of key nutrients revisited

A1 - Delzenne N.M.

A1 - Lukaski H.C.

Y1 - 2022//

KW - cardiometabolic risk

KW - \*diet therapy

KW - dietary intake

KW - editorial

KW - food intake

KW - food security

KW - functional food

KW - glucose metabolism

KW - glycemic control

KW - heredity

KW - human

KW - insulin sensitivity

KW - insulin signaling

KW - intervention study

KW - lipid blood level

KW - lipid fingerprinting

KW - lowest income group

KW - \*malnutrition

KW - mental health

KW - meta analysis (topic)

KW - metabolic disorder

KW - metabolic syndrome X

KW - microbiome

KW - non insulin dependent diabetes mellitus

KW - nonalcoholic fatty liver

KW - \*nutrient

KW - nutritional assessment

KW - nutritional science

KW - obesity

KW - oxidative stress

KW - parenteral nutrition

KW - personalized nutrition

KW - plant product

KW - protein intake

KW - sarcopenia

KW - vitamin supplementation

KW - World Health Organization

KW - amino acid

KW - animal protein

KW - muscle protein

KW - polyunsaturated fatty acid

KW - prebiotic agent

KW - trace element

KW - vitamin D

KW - zinc

JF - Current Opinion in Clinical Nutrition and Metabolic Care

JA - Curr. Opin. Clin. Nutr. Metab. Care

LA - English

VL - 25

IS - 6

SP - 423

EP - 424

CY - United States

PB - Lippincott Williams and Wilkins

SN - 1363-1950

SN - 1473-6519

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UR - http://journals.lww.com/co-clinicalnutrition/pages/default.aspx

DO - https://dx.doi.org/10.1097/MCO.0000000000000875

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020686588

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1097%2fMCO.0000000000000875Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Delzenne&issn=1363-1950&title=Current+Opinion+in+Clinical+Nutrition+and+Metabolic+Care&atitle=Editorial%3A+The+double+burn+of+malnutrition%3A+the+place+of+key+nutrients+revisited&volume=25&issue=6&spage=423&epage=424&date=2022&doi=10.1097%2FMCO.0000000000000875&pmid=36201610&sid=OVID:embase

112.

TY - JOUR

DB - Embase

AN - 2020589753

T1 - Current trends and challenges in point-of-care urinalysis of biomarkers in trace amounts

A1 - Yeasmin S.

A1 - Ammanath G.

A1 - Onder A.

A1 - Yan E.

A1 - Yildiz U.H.

A1 - Palaniappan A.

A1 - Liedberg B.

Y1 - 2022//

N2 - Urinalysis enables non-invasive point-of-care (POC) testing of numerous biomarkers at their physiological and elevated levels, obviating the need for sophisticated equipment or trained personnel. POC urinalysis is used to identify biomarkers that are rich in urine (greater than 1 muM), such as lactate, uric acid, glucose, ions, and adenosine. Urine also contains biomarkers such as small molecules, nucleic acids, neurotransmitters, and drugs in trace amounts (less than 1 muM). These biomarkers are of significant importance for health care monitoring, diagnosis of various disorders (cancer, metabolic diseases, etc.) and illicit drug control (cocaine, steroids, etc.). While POC detection of urinary biomarkers at higher concentration (muM to mM) levels is feasible, direct assaying of biomarkers in nM to fM levels is challenging, as assay responses are typically masked by interferences from the urine sample matrix. This report is a consolidated review of emerging trends and challenges in the POC urinalysis for detecting biomarkers that are less abundant in urine. The sensing mechanisms, analytical device fabrication, discrete and integrated sample pre-treatment procedures for POC assaying of urinary markers in trace amounts are elaborated. Subsequently, the utilization of smart data analytics for facilitating personalized urinalysis is presented. A comprehensive outlook on associated challenges in POC urinalysis of biomarkers in trace amounts is further provided, which would facilitate the advancement of POC urinalysis for a wide range of healthcare applications.Copyright © 2022 Elsevier B.V.

KW - Alzheimer disease/di [Diagnosis]

KW - anxiety disorder/di [Diagnosis]

KW - arthritis/di [Diagnosis]

KW - attention deficit hyperactivity disorder/di [Diagnosis]

KW - bacterium detection

KW - bipolar disorder/di [Diagnosis]

KW - bladder cancer/di [Diagnosis]

KW - cachexia/di [Diagnosis]

KW - cancer diagnosis

KW - cannabis addiction/di [Diagnosis]

KW - centrifugation

KW - cerebrovascular accident/di [Diagnosis]

KW - chemoluminescence

KW - chronic bronchitis/di [Diagnosis]

KW - chronic fatigue syndrome/di [Diagnosis]

KW - chronic hepatitis/di [Diagnosis]

KW - cocaine dependence/di [Diagnosis]

KW - colorimetry

KW - coma/di [Diagnosis]

KW - concentration (parameter)

KW - Crohn disease/di [Diagnosis]

KW - Cushing disease/di [Diagnosis]

KW - data analysis

KW - degenerative disease/di [Diagnosis]

KW - depression/di [Diagnosis]

KW - diabetes mellitus/di [Diagnosis]

KW - dilution

KW - drug abuse

KW - drug screening

KW - dysbiosis/di [Diagnosis]

KW - evaporation

KW - exosome

KW - extraction

KW - filtration

KW - fluorescence analysis

KW - hallucination/di [Diagnosis]

KW - heart disease/di [Diagnosis]

KW - heart infarction/di [Diagnosis]

KW - Hepatitis B virus

KW - human

KW - hypertension/di [Diagnosis]

KW - immunopathology/di [Diagnosis]

KW - inflammation/di [Diagnosis]

KW - kidney disease/di [Diagnosis]

KW - limit of detection

KW - limit of quantitation

KW - liquid liquid extraction

KW - liver cell carcinoma/di [Diagnosis]

KW - liver cirrhosis/di [Diagnosis]

KW - lung injury/di [Diagnosis]

KW - malignant neoplasm/di [Diagnosis]

KW - mental disease/di [Diagnosis]

KW - metabolic disorder/di [Diagnosis]

KW - miniaturization

KW - non insulin dependent diabetes mellitus/di [Diagnosis]

KW - obesity/di [Diagnosis]

KW - Opisthorchis viverrini

KW - patient monitoring

KW - phencyclidine dependence/di [Diagnosis]

KW - pneumonia/di [Diagnosis]

KW - \*point of care testing

KW - posttraumatic stress disorder/di [Diagnosis]

KW - precipitation

KW - prostate cancer/di [Diagnosis]

KW - respiratory tract infection/di [Diagnosis]

KW - review

KW - seizure/di [Diagnosis]

KW - sexually transmitted disease/di [Diagnosis]

KW - solid phase extraction

KW - suicidal behavior/di [Diagnosis]

KW - surface enhanced Raman spectroscopy

KW - surface plasmon resonance

KW - trend study

KW - ultrafiltration

KW - \*urinalysis

KW - urinary tract infection/di [Diagnosis]

KW - urine sampling

KW - Zika virus

KW - 3 nitrotyrosine

KW - 8 hydroxydeoxyguanosine

KW - adenosine/ec [Endogenous Compound]

KW - albumin

KW - ascorbic acid

KW - \*biological marker/ec [Endogenous Compound]

KW - cannabis

KW - cocaine

KW - DNA/ec [Endogenous Compound]

KW - dopamine/ec [Endogenous Compound]

KW - epinephrine/ec [Endogenous Compound]

KW - fentanyl citrate

KW - glucose/ec [Endogenous Compound]

KW - hydrocortisone/ec [Endogenous Compound]

KW - immunoglobulin/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - ion/ec [Endogenous Compound]

KW - lactic acid/ec [Endogenous Compound]

KW - lead

KW - lysozyme/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - neutrophil gelatinase associated lipocalin/ec [Endogenous Compound]

KW - nitrate

KW - nitrite/ec [Endogenous Compound]

KW - nitrofural/ec [Endogenous Compound]

KW - noradrenalin/ec [Endogenous Compound]

KW - nucleic acid/ec [Endogenous Compound]

KW - phencyclidine

KW - prasterone/ec [Endogenous Compound]

KW - protein/ec [Endogenous Compound]

KW - retinol binding protein/ec [Endogenous Compound]

KW - serotonin

KW - steroid

KW - testosterone/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - unclassified drug

KW - uric acid/ec [Endogenous Compound]

KW - virus DNA/ec [Endogenous Compound]

KW - zinc/ec [Endogenous Compound]

KW - biosensor

KW - electrochemical biosensor

KW - dual mode extraction

KW - n acetyl tyramine O glucuronide/ec [Endogenous Compound]

JF - TrAC - Trends in Analytical Chemistry

JA - TrAC Trends Anal. Chem.

LA - English

VL - 157

SP - 116786

CY - Netherlands

PB - Elsevier B.V.

SN - 0165-9936

SN - 1879-3142

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UR - https://www.elsevier.com/locate/trac

DO - https://dx.doi.org/10.1016/j.trac.2022.116786

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2020589753

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1016%2fj.trac.2022.116786Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Yeasmin&issn=0165-9936&title=TrAC+-+Trends+in+Analytical+Chemistry&atitle=Current+trends+and+challenges+in+point-of-care+urinalysis+of+biomarkers+in+trace+amounts&volume=157&issue=&spage=116786&epage=&date=2022&doi=10.1016%2Fj.trac.2022.116786&pmid=&sid=OVID:embase

113.

TY - JOUR

DB - Embase

AN - 2019788608

ID - 35598629 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35598629]

T1 - Natural History of Alcohol-Associated Liver Disease: Understanding the Changing Landscape of Pathophysiology and Patient Care

A1 - Bajaj J.S.

A1 - Nagy L.E.

AO - Bajaj, Jasmohan S.; ORCID: https://orcid.org/0000-0003-4928-3681

Y1 - 2022//

N2 - Alcohol use and consequent liver disease are major burdens that have worsened during the COVID-19 pandemic. There are several facets to the pathophysiology and clinical consequences of alcohol-use disorder (AUD) and progression to alcohol-associated liver disease (ALD) that require a concerted effort by clinicians and translational and basic science investigators. Several recent advances from bedside to bench and bench to bedside have been made in ALD. We focused this review on a case-based approach that provides a human context to these important advances across the spectrum of ALD.Copyright © 2022 AGA Institute

KW - adult

KW - alcohol consumption

KW - \*alcohol liver disease

KW - Alcohol Use Disorders Identification Test

KW - alcoholics anonymous

KW - alcoholism

KW - ascites

KW - aspiration pneumonia

KW - bacterial infection

KW - body mass

KW - case report

KW - cell death

KW - clinical article

KW - clinical trial (topic)

KW - decompensated liver cirrhosis

KW - Diagnostic and Statistical Manual of Mental Disorders

KW - dietary intake

KW - discriminant analysis

KW - disease exacerbation

KW - drinking behavior

KW - environmental factor

KW - family history

KW - fatty liver

KW - female

KW - flapping tremor

KW - follow up

KW - foot edema

KW - genetic risk

KW - heavy drinking

KW - hepatic encephalopathy

KW - hepatitis C

KW - Hepatitis C virus

KW - human

KW - hyperlipidemia

KW - infection risk

KW - innate immunity

KW - intestine flora

KW - liver cirrhosis

KW - liver fibrosis

KW - liver transplantation

KW - magnetic resonance elastography

KW - male

KW - malnutrition

KW - \*medical history

KW - mental health

KW - meta analysis (topic)

KW - microbiome

KW - middle aged

KW - Model For End Stage Liver Disease Score

KW - mycosis

KW - nuclear magnetic resonance imaging

KW - obesity

KW - outpatient care

KW - pandemic

KW - pathogenesis

KW - \*pathophysiology

KW - \*patient care

KW - posttraumatic stress disorder

KW - prognosis

KW - review

KW - risk assessment

KW - risk factor

KW - thromboelastography

KW - vodka

KW - war

KW - acamprosate

KW - alanine aminotransferase

KW - \*alcohol

KW - antibiotic agent

KW - baclofen

KW - disulfiram

KW - diuretic agent

KW - gabapentin

KW - lactulose

KW - naltrexone

KW - steroid

KW - topiramate

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 163

IS - 4

SP - 840

EP - 851

CY - United States

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

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UR - http://www.journals.elsevier.com/gastroenterology/

DO - https://dx.doi.org/10.1053/j.gastro.2022.05.031

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2019788608

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1053%2fj.gastro.2022.05.031Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bajaj&issn=0016-5085&title=Gastroenterology&atitle=Natural+History+of+Alcohol-Associated+Liver+Disease%3A+Understanding+the+Changing+Landscape+of+Pathophysiology+and+Patient+Care&volume=163&issue=4&spage=840&epage=851&date=2022&doi=10.1053%2Fj.gastro.2022.05.031&pmid=35598629&sid=OVID:embase

114.

TY - JOUR

DB - Embase

AN - 2019385094

ID - 36175166 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36175166]

T1 - Periodontitis-related salivary microbiota aggravates Alzheimer's disease via gut-brain axis crosstalk

A1 - Lu J.

A1 - Zhang S.

A1 - Huang Y.

A1 - Qian J.

A1 - Tan B.

A1 - Qian X.

A1 - Zhuang J.

A1 - Zou X.

A1 - Li Y.

A1 - Yan F.

AO - Yan, Fuhua; ORCID: https://orcid.org/0000-0002-6963-3530

Y1 - 2022//

N2 - The oral cavity is the initial chamber of digestive tract; the saliva swallowed daily contains an estimated 1.5 x 1012 oral bacteria. Increasing evidence indicates that periodontal pathogens and subsequent inflammatory responses to them contribute to the pathogenesis of Alzheimer's disease (AD). The intestine and central nervous system jointly engage in crosstalk; microbiota-mediated immunity significantly impacts AD via the gut-brain axis. However, the exact mechanism linking periodontitis to AD remains unclear. In this study, we explored the influence of periodontitis-related salivary microbiota on AD based on the gut-brain crosstalk in APPswe/PS1DELTAE9 (PAP) transgenic mice. Saliva samples were collected from patients with periodontitis and healthy individuals. The salivary microbiota was gavaged into PAP mice for two months. Continuous gavage of periodontitis-related salivary microbiota in PAP mice impaired cognitive function and increased beta-amyloid accumulation and neuroinflammation. Moreover, these AD-related pathologies were consistent with gut microbial dysbiosis, intestinal pro-inflammatory responses, intestinal barrier impairment, and subsequent exacerbation of systemic inflammation, suggesting that the periodontitis-related salivary microbiota may aggravate AD pathogenesis through crosstalk of the gut-brain axis. In this study, we demonstrated that periodontitis might participate in the pathogenesis of AD by swallowing salivary microbiota, verifying the role of periodontitis in AD progression and providing a novel perspective on the etiology and intervention strategies of AD.Copyright © 2022 The Author(s). Published with license by Taylor & Francis Group, LLC.

KW - \*Alzheimer disease

KW - animal experiment

KW - anxiety

KW - article

KW - Bacteroidetes

KW - \*brain-gut axis

KW - clinical article

KW - cognition

KW - cognitive defect

KW - controlled study

KW - discriminant analysis

KW - enteric feeding

KW - enzyme linked immunosorbent assay

KW - female

KW - Firmicutes

KW - Fusobacterium

KW - human

KW - immunofluorescence

KW - inflammation

KW - intestine flora

KW - male

KW - mouse

KW - \*mouth flora

KW - nervous system inflammation

KW - nonhuman

KW - novel object recognition test

KW - open field test

KW - \*periodontitis

KW - Porphyromonas

KW - principal coordinate analysis

KW - real time polymerase chain reaction

KW - saliva

KW - signal transduction

KW - swallowing

KW - Treponema

KW - Y-maze test

KW - RNA 16S/ec [Endogenous Compound]

KW - ELISA kit

JF - Gut Microbes

JA - Gut Microbes

LA - English

VL - 14

IS - 1

SP - 2126272

CY - United States

PB - Taylor and Francis Ltd.

SN - 1949-0976

SN - 1949-0984

AD - Y. Li, Nanjing Stomatological Hospital, Medical School of Nanjing University, Nanjing, China. E-mail: yanfh@nju.edu.cn, F. Yan, Nanjing Stomatological Hospital, Medical School of Nanjing University, Jiangsu, Nanjing 210008, China. E-mail: liyanfen2003@126.com

M1 - (Lu, Zhang, Huang, Qian, Tan, Qian, Zhuang, Zou, Li, Yan) Nanjing Stomatological Hospital, Medical School of Nanjing University, Nanjing, China

UR - http://www.tandfonline.com/toc/kgmi20/current

DO - https://dx.doi.org/10.1080/19490976.2022.2126272

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2019385094

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1080%2f19490976.2022.2126272Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lu&issn=1949-0976&title=Gut+Microbes&atitle=Periodontitis-related+salivary+microbiota+aggravates+Alzheimer%27s+disease+via+gut-brain+axis+crosstalk&volume=14&issue=1&spage=2126272&epage=&date=2022&doi=10.1080%2F19490976.2022.2126272&pmid=36175166&sid=OVID:embase

115.

TY - JOUR

DB - Embase

AN - 2018792949

ID - 36032153 [https://www.ncbi.nlm.nih.gov/pubmed/?term=36032153]

T1 - Host-microbiota interactions: The aryl hydrocarbon receptor in the acute and chronic phases of cerebral ischemia

A1 - Fan X.

A1 - Wang S.

A1 - Hu S.

A1 - Yang B.

A1 - Zhang H.

Y1 - 2022//

N2 - The relationship between gut microbiota and brain function has been studied intensively in recent years, and gut microbiota has been linked to a couple of neurological disorders including stroke. There are multiple studies linking gut microbiota to stroke in the "microbiota-gut-brain" axis. The aryl hydrocarbon receptor (AHR) is an important mediator of acute ischemic damage and can result in subsequent neuroinflammation. AHR can affect these responses by sensing microbiota metabolites especially tryptophan metabolites and is engaged in the regulation of acute ischemic brain injury and chronic neuroinflammation after stroke. As an important regulator in the "microbiota-gut-brain" axis, AHR has the potential to be used as a new therapeutic target for ischemic stroke treatment. In this review, we discuss the research progress on AHR regarding its role in ischemic stroke and prospects to be used as a therapeutic target for ischemic stroke treatment, aiming to provide a potential direction for the development of new treatments for ischemic stroke.Copyright © 2022 Fan, Wang, Hu, Yang and Zhang.

KW - angiogenesis

KW - antibiotic therapy

KW - antiinflammatory activity

KW - anxiety

KW - apoptosis

KW - astrocyte

KW - atherosclerosis

KW - bacterial translocation

KW - Bacteroidaceae

KW - Bifidobacterium longum

KW - blood brain barrier

KW - brain blood flow

KW - brain edema

KW - brain function

KW - brain infarction

KW - \*brain ischemia

KW - cell migration

KW - cell proliferation

KW - cerebrovascular accident

KW - Clostridia

KW - Clostridiales

KW - degenerative disease

KW - dysbiosis

KW - Escherichia coli

KW - Faecalibacterium

KW - fecal microbiota transplantation

KW - Firmicutes

KW - hippocampus

KW - \*host microbe interaction

KW - human

KW - hypercholesterolemia

KW - hypertension

KW - immune response

KW - inflammation

KW - inflammatory bowel disease

KW - ischemic stroke

KW - Lachnospiraceae

KW - Lactobacillus casei

KW - Lactobacillus reuteri

KW - Lactobacillus rhamnosus

KW - Lactobacillus sakei

KW - mild cognitive impairment

KW - nerve cell plasticity

KW - nervous system development

KW - nervous system inflammation

KW - neuroprotection

KW - neurotoxicity

KW - nonhuman

KW - obesity

KW - Peptostreptococcus

KW - Prevotella

KW - prospective study

KW - Proteobacteria

KW - reperfusion injury

KW - review

KW - Ruminococcaceae

KW - Ruminococcus

KW - sepsis

KW - signal transduction

KW - tryptophan metabolism

KW - upregulation

KW - ampicillin

KW - amyloid precursor protein/ec [Endogenous Compound]

KW - antibiotic agent

KW - \*aromatic hydrocarbon receptor/ec [Endogenous Compound]

KW - atorvastatin

KW - diosmin/ec [Endogenous Compound]

KW - kynurenine

KW - lactulose

KW - presenilin 1/ec [Endogenous Compound]

KW - quinolinic acid/ec [Endogenous Compound]

KW - tight junction protein/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vasculotropin B/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 13

SP - 967300

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2022.967300

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2018792949

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3389%2ffimmu.2022.967300Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fan&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Host-microbiota+interactions%3A+The+aryl+hydrocarbon+receptor+in+the+acute+and+chronic+phases+of+cerebral+ischemia&volume=13&issue=&spage=967300&epage=&date=2022&doi=10.3389%2Ffimmu.2022.967300&pmid=36032153&sid=OVID:embase

116.

TY - JOUR

DB - Embase

AN - 2017865206

ID - 35678072 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35678072]

T1 - Polymicrobial Acute Suppurative Parotitis in a 33-Day-Old Infant: A Case Report and Review of the Literature

A1 - Paouris D.

A1 - Dallos T.

A1 - Pitiriga V.

AO - Paouris D.; ORCID: https://orcid.org/0000-0001-5949-2669

Y1 - 2022//

N2 - Background: Acute suppurative parotitis (ASP) of neonates is a rare condition characterized by irritability, erythema, and tenderness of the affected gland. Methods/Results: Only few cases have been reported in Engilsh literature, mostly in male neonates, in a unilateral fashion. In our case, a polymicrobial etiology (Klebsiella pneumoniae, Staphylococcus aureus, Acinetobacter ursingii, and Acinetobacter junii) was found. Based on the review of the microbiological findings of cases of ASP in English literature for the years 1970 to 2020, S. aureus is the most commonly isolated microorganism (47% of the total 65 patients). Our patient was born with a C-section procedure and was not breast-fed, making dysbiosis along with the usage of the feeding bottle, possible risk factors for the development of ASP. Conclusion(s): ASP may be due to polymicrobial etiology. Initial presentation in neonates may not include typical signs and symptoms, like fever. Aseptic technique of oral procedures is of utmost importance also in immune-competent neonates.Copyright © The Author(s) 2022.

KW - Acinetobacter

KW - Acinetobacter junii

KW - anemia

KW - case report

KW - clinical article

KW - clinical examination

KW - distress syndrome

KW - dysbiosis

KW - echography

KW - female

KW - follow up

KW - human

KW - infant

KW - inflammation

KW - Klebsiella pneumoniae

KW - laboratory test

KW - leukocytosis

KW - microbiological examination

KW - patient monitoring

KW - physical examination

KW - review

KW - risk factor

KW - Staphylococcus aureus

KW - \*suppurative parotitis/et [Etiology]

KW - swelling

KW - thrombocytosis

KW - urea nitrogen blood level

KW - C reactive protein/ec [Endogenous Compound]

KW - C reactive protein/pv [Special Situation for Pharmacovigilance]

KW - cefotaxime/iv [Intravenous Drug Administration]

KW - cefotaxime/pv [Special Situation for Pharmacovigilance]

KW - ceftazidime/pv [Special Situation for Pharmacovigilance]

KW - gentamicin/iv [Intravenous Drug Administration]

KW - gentamicin/pv [Special Situation for Pharmacovigilance]

KW - oxacillin/pv [Special Situation for Pharmacovigilance]

KW - paracetamol/iv [Intravenous Drug Administration]

KW - paracetamol/pv [Special Situation for Pharmacovigilance]

KW - feeding bottle

XT - C reactive protein / special situation for pharmacovigilance / pediatric patient

XT - cefotaxime / special situation for pharmacovigilance / pediatric patient

XT - ceftazidime / special situation for pharmacovigilance / pediatric patient

XT - gentamicin / special situation for pharmacovigilance / pediatric patient

XT - oxacillin / special situation for pharmacovigilance / pediatric patient

XT - paracetamol / special situation for pharmacovigilance / pediatric patient

JF - Clinical Pediatrics

JA - Clin. Pediatr.

LA - English

VL - 61

IS - 11

SP - 802

EP - 807

CY - United States

PB - SAGE Publications Inc.

SN - 0009-9228

SN - 1938-2707

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UR - https://journals.sagepub.com/home/CPJ

DO - https://dx.doi.org/10.1177/00099228221102712

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017865206

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1177%2f00099228221102712Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Paouris&issn=0009-9228&title=Clinical+Pediatrics&atitle=Polymicrobial+Acute+Suppurative+Parotitis+in+a+33-Day-Old+Infant%3A+A+Case+Report+and+Review+of+the+Literature&volume=61&issue=11&spage=802&epage=807&date=2022&doi=10.1177%2F00099228221102712&pmid=35678072&sid=OVID:embase

117.

TY - JOUR

DB - Embase

AN - 2019014341

T1 - Sepsis-Induced Gut Dysbiosis Mediates the Susceptibility to Sepsis-Associated Encephalopathy in Mice

A1 - Fang H.

A1 - Wang Y.

A1 - Deng J.

A1 - Zhang H.

A1 - Wu Q.

A1 - He L.

A1 - Xu J.

A1 - Shao X.

A1 - Ouyang X.

A1 - He Z.

A1 - Zhou Q.

A1 - Wang H.

A1 - Deng Y.

A1 - Chen C.

Y1 - 2022//

N2 - Sepsis-associated encephalopathy (SAE) is common in septic patients and is associated with adverse outcomes. The gut microbiota has been recognized as a key mediator of neurological disease development. However, the exact role of the gut microbiota in regulating SAE remains elusive. Here, we investigated the role of the gut microbiota in SAE and its underlying mechanisms. Cecal ligation and puncture (CLP) was conducted to induce sepsis in mice. Neurological scores were recorded to distinguish SAE-resistant (SER) (score of >6 at 36 h postoperatively) from SAE-susceptible (SES) (score of <=6 at 36 h postoperatively) mice. 16S rRNA gene sequencing and metabolomics analyses were used to characterize the gut microbiota in the two groups. Fecal microbiota transplantation was performed to validate the role of the gut microbiota in SAE progression. The gut microbiota was more severely disrupted in SES mice than in SER mice after sepsis modeling. Interestingly, mice receiving postoperative feces from SES mice exhibited more severe cortical inflammation than mice receiving feces from SER mice. Indole-3-propionic acid (IPA), a neuroprotective molecule, was more enriched in feces from SER mice than in feces from SES mice. IPA alleviated CLP-induced anxiety and spatial memory impairment in septic mice. Moreover, IPA markedly inhibited NLRP3 inflammasome activation and interleukin-1beta (IL-1beta) secretion in lipopolysaccharide-stimulated microglia. These responses were attenuated after antagonizing the aryl hydrocarbon receptor. Our study indicates that the variability in sepsis-induced gut dysbiosis mediates the differential susceptibility to SAE in CLP-induced experimental sepsis mice, and microbially derived IPA is possibly involved in SAE development as a neuroprotective compound.Copyright © 2022 Fang et al.

KW - animal cell

KW - animal experiment

KW - animal model

KW - antibiotic therapy

KW - anxiety

KW - article

KW - Bacteroidia

KW - behavior change

KW - cognitive defect

KW - controlled study

KW - \*dysbiosis

KW - Enterobacterales

KW - Enterobacteriaceae

KW - fecal microbiota transplantation

KW - Gammaproteobacteria

KW - gene sequence

KW - \*intestine flora

KW - ligation

KW - metabolite

KW - metabolomics

KW - Morris water maze test

KW - mortality

KW - mouse

KW - nonhuman

KW - principal component analysis

KW - Proteobacteria

KW - puncture

KW - \*sepsis

KW - \*sepsis associated encephalopathy

KW - Shannon index

KW - spatial memory

KW - survival rate

KW - total distance traveled

KW - aromatic hydrocarbon receptor

KW - indolepropionic acid

KW - interleukin 1beta

KW - RNA 16S

KW - tumor necrosis factor

JF - mSystems

JA - mSystems

LA - English

VL - 7

IS - 3

SP -

CY - United States

PB - American Society for Microbiology

SN - 2379-5077 (electronic)

SN - 2379-5077

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UR - https://journals.asm.org/doi/10.1128/msystems.01399-21

DO - https://dx.doi.org/10.1128/msystems.01399-21

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2019014341

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1128%2fmsystems.01399-21Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fang&issn=2379-5077&title=mSystems&atitle=Sepsis-Induced+Gut+Dysbiosis+Mediates+the+Susceptibility+to+Sepsis-Associated+Encephalopathy+in+Mice&volume=7&issue=3&spage=&epage=&date=2022&doi=10.1128%2Fmsystems.01399-21&pmid=&sid=OVID:embase

118.

TY - JOUR

DB - Embase

AN - 2018311662

T1 - Effects of Exercise Intervention on Type 2 Diabetes Patients With Abdominal Obesity and Low Thigh Circumference (EXTEND): Study Protocol for a Randomized Controlled Trial

A1 - Liu D.

A1 - Zhang Y.

A1 - Wu L.

A1 - Guo J.

A1 - Yu X.

A1 - Yao H.

A1 - Han R.

A1 - Ma T.

A1 - Zheng Y.

A1 - Gao Q.

A1 - Fang Q.

A1 - Zhao Y.

A1 - Sun B.

A1 - Jia W.

A1 - Li H.

Y1 - 2022//

N2 - Introduction: Type 2 diabetes patients have abdominal obesity and low thigh circumference. Previous studies have mainly focused on the role of exercise in reducing body weight and fat mass, improving glucose and lipid metabolism, with a lack of evaluation on the loss of muscle mass, diabetes complications, energy metabolism, and brain health. Moreover, whether the potential physiological benefit of exercise for diabetes mellitus is related to the modulation of the microbiota-gut-brain axis remains unclear. Multi-omics approaches and multidimensional evaluations may help systematically and comprehensively correlate physical exercise and the metabolic benefits. Methods and Analysis: This study is a randomized controlled clinical trial. A total of 100 sedentary patients with type 2 diabetes will be allocated to either an exercise or a control group in a 1:1 ratio. Participants in the exercise group will receive a 16-week combined aerobic and resistance exercise training, while those in the control group will maintain their sedentary lifestyle unchanged. Additionally, all participants will receive a diet administration to control the confounding effects of diet. The primary outcome will be the change in body fat mass measured using bioelectrical impedance analysis. The secondary outcomes will include body fat mass change rate (%), and changes in anthropometric indicators (body weight, waist, hip, and thigh circumference), clinical biochemical indicators (glycated hemoglobin, blood glucose, insulin sensitivity, blood lipid, liver enzyme, and renal function), brain health (appetite, mood, and cognitive function), immunologic function, metagenomics, metabolomics, energy expenditure, cardiopulmonary fitness, exercise-related indicators, fatty liver, cytokines (fibroblast growth factor 21, fibroblast growth factor 19, adiponectin, fatty acid-binding protein 4, and lipocalin 2), vascular endothelial function, autonomic nervous function, and glucose fluctuation. Discussion(s): This study will evaluate the effect of a 16-week combined aerobic and resistance exercise regimen on patients with diabetes. The results will provide a comprehensive evaluation of the physiological effects of exercise, and reveal the role of the microbiota-gut-brain axis in exercise-induced metabolic benefits to diabetes. Clinical Trial Registration: http://www.chictr.org.cn/searchproj.aspx, identifier ChiCTR2100046148.Copyright © 2022 Liu, Zhang, Wu, Guo, Yu, Yao, Han, Ma, Zheng, Gao, Fang, Zhao, Zhao, Sun, Jia and Li.

KW - \*abdominal obesity/rh [Rehabilitation]

KW - \*abdominal obesity/th [Therapy]

KW - adult

KW - aerobic exercise

KW - aged

KW - anthropometry

KW - appetite

KW - article

KW - blood glucose monitoring

KW - body weight

KW - bone metabolism

KW - brain-gut axis

KW - clinical evaluation

KW - cognition assessment

KW - controlled study

KW - diet

KW - dietary compliance

KW - dietary intake

KW - elastography

KW - energy expenditure

KW - \*exercise

KW - exercise intensity

KW - fat mass

KW - female

KW - food frequency questionnaire

KW - functional magnetic resonance imaging

KW - Generalized Anxiety Disorder-7

KW - glucose metabolism

KW - heart rate variability

KW - hip circumference

KW - human

KW - insulin sensitivity

KW - international physical activity questionnaire

KW - intervention study

KW - kidney function

KW - lipid blood level

KW - major clinical study

KW - male

KW - metabolic regulation

KW - metabolomics

KW - metagenomics

KW - middle aged

KW - mood

KW - muscle mass

KW - muscle training

KW - \*non insulin dependent diabetes mellitus/rh [Rehabilitation]

KW - \*non insulin dependent diabetes mellitus/th [Therapy]

KW - nuclear magnetic resonance spectroscopy

KW - outcome assessment

KW - oxygen consumption

KW - Patient Health Questionnaire 9

KW - physical activity

KW - \*protocol compliance

KW - questionnaire

KW - randomized controlled trial

KW - resistance training

KW - sedentary lifestyle

KW - sensitivity analysis

KW - thigh circumference

KW - ultrasound

KW - visual analog scale

KW - waist circumference

KW - adiponectin receptor/ec [Endogenous Compound]

KW - fatty acid binding protein 4/ec [Endogenous Compound]

KW - fibroblast growth factor 19/ec [Endogenous Compound]

KW - fibroblast growth factor 21/ec [Endogenous Compound]

KW - glucose/ec [Endogenous Compound]

KW - glycosylated hemoglobin/ec [Endogenous Compound]

KW - lipid/ec [Endogenous Compound]

KW - liver enzyme/ec [Endogenous Compound]

KW - neutrophil gelatinase associated lipocalin/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

KW - accelerometer

KW - body composition analyzer

KW - autonomic nervous function

KW - bioelectrical impedance analysis

KW - cardiopulmonary fitness

KW - glucose fluctuation

KW - liver transient elastography

KW - \*low thigh circumference

KW - Montreal Cognitive Assessment Scale

KW - Problem Areas in Diabetes Scale

KW - HG HRUB150T

KW - KY 701

KW - KY 703

KW - KY 705

KW - wGT3X

JF - Frontiers in Endocrinology

JA - Front. Endocrinol.

LA - English

VL - 13

SP - 937264

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-2392 (electronic)

SN - 1664-2392

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M1 - (Zheng, Zhao) Department of Sports and Health Science, Nanjing Sport Institute, Nanjing, China

M2 - HG HRUB150T, KY 701, KY 703, KY 705, wGT3x: Manufacturing Technology [United States]

C1 - HG HRUB150T, KY 701, KY 703, KY 705, wGT3x: Manufacturing Technology [United States]

C2 - Manufacturing Technology [United States]

UR - https://www.frontiersin.org/journals/endocrinology#

DO - https://dx.doi.org/10.3389/fendo.2022.937264

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2018311662

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3389%2ffendo.2022.937264Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Liu&issn=1664-2392&title=Frontiers+in+Endocrinology&atitle=Effects+of+Exercise+Intervention+on+Type+2+Diabetes+Patients+With+Abdominal+Obesity+and+Low+Thigh+Circumference+%28EXTEND%29%3A+Study+Protocol+for+a+Randomized+Controlled+Trial&volume=13&issue=&spage=937264&epage=&date=2022&doi=10.3389%2Ffendo.2022.937264&pmid=&sid=OVID:embase

119.

TY - JOUR

DB - Embase

AN - 2017934640

T1 - Global Registries in Congenital Hyperinsulinism

A1 - Pasquini T.L.S.

A1 - Mesfin M.

A1 - Schmitt J.

A1 - Raskin J.

Y1 - 2022//

N2 - Congenital hyperinsulinism (HI) is the most frequent cause of severe, persistent hypoglycemia in newborn babies and children. There are many areas of need for HI research. Some of the most critical needs include describing the natural history of the disease, research leading to new and better treatments, and identifying and managing hypoglycemia before it is prolonged and causes brain damage or death. Patient-reported data provides a basis for understanding the day-to-day experience of living with HI. Commonly identified goals of registries include performing natural history studies, establishing a network for future product and treatment studies, and supporting patients and families to offer more successful and coordinated care. Congenital Hyperinsulinism International (CHI) created the HI Global Registry (HIGR) in October 2018 as the first global patient-powered hyperinsulinism registry. The registry consists of thirteen surveys made up of questions about the patient's experience with HI over their lifetime. An international team of HI experts, including family members of children with HI, advocates, clinicians, and researchers, developed the survey questions. HIGR is managed by CHI and advised by internationally recognized HI patient advocates and experts. This paper aims to characterize HI through the experience of individuals who live with it. This paper includes descriptive statistics on the birthing experience, hospitalizations, medication management, feeding challenges, experiences with glucose monitoring devices, and the overall disease burden to provide insights into the current data in HIGR and demonstrate the potential areas of future research. As of January 2022, 344 respondents from 37 countries consented to participate in HIGR. Parents or guardians of individuals living with HI represented 83.9% of the respondents, 15.3% were individuals living with HI. Data from HIGR has already provided insight into access challenges, patients' and caregivers' quality of life, and to inform clinical trial research programs. Data is also available to researchers seeking to study the pathophysiology of HI retrospectively or to design prospective trials related to improving HI patient outcomes. Understanding the natural history of the disease can also guide standards of care. The data generated through HIGR provides an opportunity to improve the lives of all those affected by HI.Copyright © 2022 Pasquini, Mesfin, Schmitt and Raskin.

KW - adult

KW - anxiety

KW - article

KW - binge eating disorder

KW - birth weight

KW - blood glucose monitoring

KW - caregiver

KW - confusion

KW - controlled study

KW - diet supplementation

KW - disease burden

KW - disease registry

KW - disease severity

KW - dizziness/si [Side Effect]

KW - enterocolitis/si [Side Effect]

KW - \*fatigue

KW - feeding difficulty

KW - genetic screening

KW - gestational age

KW - headache/si [Side Effect]

KW - health care quality

KW - hospital readmission

KW - hospitalization

KW - human

KW - hyperglycemia/si [Side Effect]

KW - \*hyperinsulinism

KW - hypertension/si [Side Effect]

KW - hypoglycemia/si [Side Effect]

KW - injection pain/si [Side Effect]

KW - lethargy

KW - loss of appetite/si [Side Effect]

KW - microbiome

KW - nausea/si [Side Effect]

KW - neurology

KW - outcome assessment

KW - pancreatectomy

KW - pathophysiology

KW - \*patient-reported outcome

KW - prevalence

KW - quality of life

KW - questionnaire

KW - \*risk factor

KW - skin redness/si [Side Effect]

KW - stomach pain/si [Side Effect]

KW - surgical approach

KW - swelling/si [Side Effect]

KW - tachycardia/si [Side Effect]

KW - texture analysis

KW - transitional care

KW - angiopeptin

KW - diazoxide/ae [Adverse Drug Reaction]

KW - glucose

KW - larazotide/ae [Adverse Drug Reaction]

KW - octreotide/ae [Adverse Drug Reaction]

KW - blood glucose meter

XT - dizziness / side effect / diazoxide

XT - dizziness / side effect / larazotide

XT - dizziness / side effect / octreotide

XT - enterocolitis / side effect / diazoxide

XT - enterocolitis / side effect / larazotide

XT - enterocolitis / side effect / octreotide

XT - headache / side effect / diazoxide

XT - headache / side effect / larazotide

XT - headache / side effect / octreotide

XT - hyperglycemia / side effect / diazoxide

XT - hyperglycemia / side effect / larazotide

XT - hyperglycemia / side effect / octreotide

XT - hypertension / side effect / diazoxide

XT - hypertension / side effect / larazotide

XT - hypertension / side effect / octreotide

XT - hypoglycemia / side effect / diazoxide

XT - hypoglycemia / side effect / larazotide

XT - hypoglycemia / side effect / octreotide

XT - injection pain / side effect / diazoxide

XT - injection pain / side effect / larazotide

XT - injection pain / side effect / octreotide

XT - loss of appetite / side effect / diazoxide

XT - loss of appetite / side effect / larazotide

XT - loss of appetite / side effect / octreotide

XT - nausea / side effect / diazoxide

XT - nausea / side effect / larazotide

XT - nausea / side effect / octreotide

XT - skin redness / side effect / diazoxide

XT - skin redness / side effect / larazotide

XT - skin redness / side effect / octreotide

XT - stomach pain / side effect / diazoxide

XT - stomach pain / side effect / larazotide

XT - stomach pain / side effect / octreotide

XT - swelling / side effect / diazoxide

XT - swelling / side effect / larazotide

XT - swelling / side effect / octreotide

XT - tachycardia / side effect / diazoxide

XT - tachycardia / side effect / larazotide

XT - tachycardia / side effect / octreotide

XT - diazoxide / adverse drug reaction / dizziness

XT - diazoxide / adverse drug reaction / enterocolitis

XT - diazoxide / adverse drug reaction / headache

XT - diazoxide / adverse drug reaction / hyperglycemia

XT - diazoxide / adverse drug reaction / hypertension

XT - diazoxide / adverse drug reaction / hypoglycemia

XT - diazoxide / adverse drug reaction / injection pain

XT - diazoxide / adverse drug reaction / loss of appetite

XT - diazoxide / adverse drug reaction / nausea

XT - diazoxide / adverse drug reaction / skin redness

XT - diazoxide / adverse drug reaction / stomach pain

XT - diazoxide / adverse drug reaction / swelling

XT - diazoxide / adverse drug reaction / tachycardia

XT - larazotide / adverse drug reaction / dizziness

XT - larazotide / adverse drug reaction / enterocolitis

XT - larazotide / adverse drug reaction / headache

XT - larazotide / adverse drug reaction / hyperglycemia

XT - larazotide / adverse drug reaction / hypertension

XT - larazotide / adverse drug reaction / hypoglycemia

XT - larazotide / adverse drug reaction / injection pain

XT - larazotide / adverse drug reaction / loss of appetite

XT - larazotide / adverse drug reaction / nausea

XT - larazotide / adverse drug reaction / skin redness

XT - larazotide / adverse drug reaction / stomach pain

XT - larazotide / adverse drug reaction / swelling

XT - larazotide / adverse drug reaction / tachycardia

XT - octreotide / adverse drug reaction / dizziness

XT - octreotide / adverse drug reaction / enterocolitis

XT - octreotide / adverse drug reaction / headache

XT - octreotide / adverse drug reaction / hyperglycemia

XT - octreotide / adverse drug reaction / hypertension

XT - octreotide / adverse drug reaction / hypoglycemia

XT - octreotide / adverse drug reaction / injection pain

XT - octreotide / adverse drug reaction / loss of appetite

XT - octreotide / adverse drug reaction / nausea

XT - octreotide / adverse drug reaction / skin redness

XT - octreotide / adverse drug reaction / stomach pain

XT - octreotide / adverse drug reaction / swelling

XT - octreotide / adverse drug reaction / tachycardia

JF - Frontiers in Endocrinology

JA - Front. Endocrinol.

LA - English

VL - 13

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PB - Frontiers Media S.A.

SN - 1664-2392 (electronic)

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UR - https://www.frontiersin.org/journals/endocrinology#

DO - https://dx.doi.org/10.3389/fendo.2022.876903

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017934640

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3389%2ffendo.2022.876903Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pasquini&issn=1664-2392&title=Frontiers+in+Endocrinology&atitle=Global+Registries+in+Congenital+Hyperinsulinism&volume=13&issue=&spage=876903&epage=&date=2022&doi=10.3389%2Ffendo.2022.876903&pmid=&sid=OVID:embase

120.

TY - JOUR

DB - Embase

AN - 2017408047

ID - 35765729 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35765729]

T1 - COVID-19 pandemic after Omicron

A1 - Lai C.K.

A1 - Lam W.

A1 - Tsang K.Y.

A1 - Cheng F.W.

A1 - Wong M.C.

Y1 - 2022//

KW - acute myeloid leukemia

KW - burnout

KW - \*coronavirus disease 2019

KW - corticosteroid therapy

KW - critically ill patient

KW - disease severity

KW - disease surveillance

KW - editorial

KW - editorial

KW - epidemic

KW - health care system

KW - herd immunity

KW - human

KW - immunization

KW - length of stay

KW - medical research

KW - mental health

KW - microbiome

KW - mortality

KW - \*pandemic

KW - pericarditis

KW - psychological well-being

KW - \*SARS-CoV-2 Omicron

KW - tuberculosis

KW - vaccination

KW - vaccine hesitancy

KW - Zika fever

KW - corticosteroid/ec [Endogenous Compound]

KW - messenger RNA/ec [Endogenous Compound]

KW - monoclonal antibody/ec [Endogenous Compound]

JF - Hong Kong Medical Journal

JA - Hong Kong Med. J.

LA - English

VL - 28

IS - 3

SP - 196

EP - 198

CY - Hong Kong

PB - Hong Kong Academy of Medicine Press

SN - 1024-2708

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UR - https://www.hkmj.org/system/files/hkmj215130.pdf

DO - https://dx.doi.org/10.12809/hkmj215130

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017408047

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.12809%2fhkmj215130Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lai&issn=1024-2708&title=Hong+Kong+Medical+Journal&atitle=COVID-19+pandemic+after+Omicron&volume=28&issue=3&spage=196&epage=198&date=2022&doi=10.12809%2Fhkmj215130&pmid=35765729&sid=OVID:embase

121.

TY - JOUR

DB - Embase

AN - 2017879777

ID - 35254129 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35254129]

T1 - Nutritional Modulation of Gut Microbiota Alleviates Severe Gastrointestinal Symptoms in a Patient with Post-Acute COVID-19 Syndrome

A1 - Wang Y.

A1 - Wu G.

A1 - Zhao L.

A1 - Wang W.

Y1 - 2022//

N2 - With the increase in total coronavirus disease 2019 (COVID-19) infection cases, post-acute COVID-19 syndrome, defined as experiencing ongoing health problems 4 or more weeks after the first severe acute respiratory syndrome coronavirus 2 (SARSCoV- 2) infection, has become a new arising public health concern. As part of post-acute COVID-19 syndrome, gastrointestinal symptoms might be associated with dysbiosis of the gut microbiota, which has the potential to become a target for intervention. In this study, a patient with post-acute COVID-19 syndrome with long-lasting severe gastrointestinal symptoms was provided 2-month expanded access to a high-fiber formula with investigational new drug (IND) status developed to alleviate COVID-19-related symptoms by modulating the gut microbiota. Symptoms including severe "loss of appetite,"palpitation, and anxiety were significantly alleviated by the end of the intervention. The medication dosage for controlling nausea decreased during the intervention. The serum lipid profile, insulin level, and leptin level were improved compared to the baseline values. Significant structural changes of the patient's gut microbiota and reduced microbial fermentation activity in the small intestine were found during the intervention. Eighteen amplicon sequence variants (ASVs) of the V4 region of the 16S rRNA gene significantly responded to this nutritional intervention. Six out of the 18 ASVs were also found to be negatively correlated with symptom severity/medication dosage. Five of the six ASVs (ASV0AKS-Oscillibacter, ASV009F-Anaerofustis, ASV02YT-Blautia, ASV07LA-Blautia, and ASV0AM6-Eubacterium hallii) were potential short-chain fatty acid (SCFA)-producing bacteria, which might be associated with the alleviation of symptoms. Our study indicates the feasibility of alleviating gastrointestinal symptoms in patients with post-acute COVID-19 syndrome by way of nutritional modulation of their gut microbiota.Copyright © 2022 Wang et al.

KW - abdominal pain/dt [Drug Therapy]

KW - adult

KW - anxiety disorder/dt [Drug Therapy]

KW - article

KW - case report

KW - cholecystectomy

KW - clinical article

KW - coronavirus disease 2019/dt [Drug Therapy]

KW - depression/dt [Drug Therapy]

KW - female

KW - fiber intake

KW - gallbladder disease/su [Surgery]

KW - gastritis/dt [Drug Therapy]

KW - gastroesophageal reflux/dt [Drug Therapy]

KW - \*gastrointestinal symptom/co [Complication]

KW - \*gastrointestinal symptom/th [Therapy]

KW - Graves disease/dt [Drug Therapy]

KW - heart palpitation

KW - \*high fiber diet

KW - human

KW - hypothyroidism/dt [Drug Therapy]

KW - \*intestine flora

KW - liver function

KW - \*long COVID

KW - middle aged

KW - nausea

KW - nausea and vomiting/dt [Drug Therapy]

KW - pneumonia

KW - Severe acute respiratory syndrome coronavirus 2

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - amoxicillin/dt [Drug Therapy]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - azithromycin/dt [Drug Therapy]

KW - dicycloverine/dt [Drug Therapy]

KW - hydroxychloroquine/dt [Drug Therapy]

KW - levothyroxine/dt [Drug Therapy]

KW - ondansetron/dt [Drug Therapy]

KW - pantoprazole/dt [Drug Therapy]

KW - paroxetine/dt [Drug Therapy]

KW - radioactive iodine/dt [Drug Therapy]

XT - abdominal pain / drug therapy / dicycloverine

XT - anxiety disorder / drug therapy / paroxetine

XT - coronavirus disease 2019 / drug therapy / amoxicillin

XT - coronavirus disease 2019 / drug therapy / azithromycin

XT - coronavirus disease 2019 / drug therapy / hydroxychloroquine

XT - depression / drug therapy / paroxetine

XT - gastritis / drug therapy / pantoprazole

XT - gastroesophageal reflux / drug therapy / pantoprazole

XT - Graves disease / drug therapy / radioactive iodine

XT - hypothyroidism / drug therapy / levothyroxine

XT - nausea and vomiting / drug therapy / ondansetron

XT - amoxicillin / drug therapy / coronavirus disease 2019

XT - azithromycin / drug therapy / coronavirus disease 2019

XT - dicycloverine / drug therapy / abdominal pain

XT - hydroxychloroquine / drug therapy / coronavirus disease 2019

XT - levothyroxine / drug therapy / hypothyroidism

XT - ondansetron / drug therapy / nausea and vomiting

XT - pantoprazole / drug therapy / gastritis

XT - pantoprazole / drug therapy / gastroesophageal reflux

XT - paroxetine / drug therapy / anxiety disorder

XT - paroxetine / drug therapy / depression

XT - radioactive iodine / drug therapy / Graves disease

JF - mBio

JA - mBio

LA - English

VL - 13

IS - 2

SP -

CY - United States

PB - American Society for Microbiology

SN - 2161-2129

SN - 2150-7511

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M1 - (Wang) Division of Gastroenterology and Hepatology, Department of Medicine, Rutgers New Jersey Medical School, Newark, NJ, United States

UR - https://journals.asm.org/doi/10.1128/mbio.03801-21

DO - https://dx.doi.org/10.1128/mbio.03801-21

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017879777

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1128%2fmbio.03801-21Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=2161-2129&title=mBio&atitle=Nutritional+Modulation+of+Gut+Microbiota+Alleviates+Severe+Gastrointestinal+Symptoms+in+a+Patient+with+Post-Acute+COVID-19+Syndrome&volume=13&issue=2&spage=&epage=&date=2022&doi=10.1128%2Fmbio.03801-21&pmid=35254129&sid=OVID:embase

122.

TY - JOUR

DB - Embase

AN - 2017817955

ID - 35307727 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35307727]

T1 - Clinical Application of Enteral Nutrition Combined with Microbial Preparation for Intestinal Preparation in Elderly Patients with Colorectal Cancer

A1 - Shen Y.

A1 - Zhao X.

A1 - Zhao H.

A1 - Chen N.

A1 - Wang J.

A1 - Zhuang H.

A1 - Zhang X.

Y1 - 2022//

N2 - Background: The purpose of this study was to determine the safety and efficacy of enteral nutrition in combination with microbial preparations for bowel preparation in elderly patients with colorectal cancer. Material/Methods: Were divided 160 patients diagnosed with colorectal cancer into a control group (n=80) and an experimental group (n=80) by random number table method. The control group took the traditional intestinal preparation, and the experimental group took oral enteral nutrition combined with microbial preparations. Both groups were treated by the same medical team. The postoperative recovery, complications, nutritional status, inflammation, and other indicators of the 2 groups were compared. Result(s): The nutritional status of the experimental group was significantly better than that of the control group, the incidence of tissue inflammation and postoperative complications was significantly lower than that of the control group, and the stool test results of patients with postoperative diarrhea were better than those of the control group, and the difference between groups was statistically significant. Conclusion(s): The intestinal preparation using enteral nutrition combined with microbial preparations can alleviate the systemic inflammatory response in elderly patients, improve the nutritional status, reduce the occurrence of postoperative complications, and facilitate rapid postoperative recovery.Copyright © Med Sci Monit, 2022

KW - adenocarcinoma

KW - adult

KW - aged

KW - article

KW - body mass

KW - \*colorectal cancer/su [Surgery]

KW - colorectal surgery

KW - controlled study

KW - diarrhea/co [Complication]

KW - dizziness/co [Complication]

KW - drug capsule

KW - \*drug efficacy

KW - \*drug safety

KW - \*enteric feeding

KW - fatigue/co [Complication]

KW - feces analysis

KW - female

KW - fistula/co [Complication]

KW - follow up

KW - gastrointestinal tumor

KW - heart palpitation/co [Complication]

KW - human

KW - hypoproteinemia

KW - inflammation

KW - intestine flora

KW - intestine preparation

KW - length of stay

KW - leukocyte count

KW - major clinical study

KW - male

KW - mycosis/co [Complication]

KW - nausea/co [Complication]

KW - nonhuman

KW - nutritional status

KW - outcome assessment

KW - peristalsis

KW - postoperative complication/co [Complication]

KW - postoperative delirium/co [Complication]

KW - protein blood level

KW - very elderly

KW - vomiting/co [Complication]

KW - acetylsalicylic acid/pv [Special Situation for Pharmacovigilance]

KW - C reactive protein/ec [Endogenous Compound]

KW - dexmedetomidine/pv [Special Situation for Pharmacovigilance]

KW - gastrointestinal agent/pv [Special Situation for Pharmacovigilance]

KW - gentamicin/pv [Special Situation for Pharmacovigilance]

KW - interleukin 6/ec [Endogenous Compound]

KW - probiotic agent/po [Oral Drug Administration]

KW - probiotic agent/pv [Special Situation for Pharmacovigilance]

KW - serum albumin/ec [Endogenous Compound]

KW - tinidazole/pv [Special Situation for Pharmacovigilance]

KW - transferrin/ec [Endogenous Compound]

KW - transthyretin/ec [Endogenous Compound]

XT - acetylsalicylic acid / special situation for pharmacovigilance / aged

XT - dexmedetomidine / special situation for pharmacovigilance / aged

XT - gastrointestinal agent / special situation for pharmacovigilance / aged

XT - gentamicin / special situation for pharmacovigilance / aged

XT - probiotic agent / special situation for pharmacovigilance / aged

XT - tinidazole / special situation for pharmacovigilance / aged

JF - Medical Science Monitor

JA - Med. Sci. Monit.

LA - English

VL - 28

SP - e935366

CY - United States

PB - International Scientific Information, Inc.

SN - 1234-1010

SN - 1643-3750

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M1 - (Shen, Zhao, Zhao, Chen, Wang, Zhuang, Zhang) Division of Gastrointestinal Surgery, Affiliated Huai'an Hospital of Xuzhou Medical University, Jiangsu, Huai'an, China

UR - https://www.medscimonit.com/abstract/full/idArt/935366

DO - https://dx.doi.org/10.12659/MSM.935366

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017817955

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.12659%2fMSM.935366Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Shen&issn=1234-1010&title=Medical+Science+Monitor&atitle=Clinical+Application+of+Enteral+Nutrition+Combined+with+Microbial+Preparation+for+Intestinal+Preparation+in+Elderly+Patients+with+Colorectal+Cancer&volume=28&issue=&spage=e935366&epage=&date=2022&doi=10.12659%2FMSM.935366&pmid=35307727&sid=OVID:embase

123.

TY - JOUR

DB - Embase

AN - 2016019124

ID - 33050862 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33050862]

T1 - Engineered Probiotic and Prebiotic Nutraceutical Supplementations in Combating Non-communicable Disorders: A Review

A1 - Kerry R.G.

A1 - Das G.

A1 - Golla U.

A1 - Rodriguez-Torres M.P.

A1 - Shin H.-S.

A1 - Patra J.K.

Y1 - 2022//

N2 - Nutritional supplementations are a form of nutrition sources that may help in improving the health complexities of a person throughout his or her life span. Being also categorized as food supplementations, nutraceuticals are products that are extracted from edible sources with medical benefits as well as primary nutritional values. Nutraceuticals can be considered as functional foods. There are evidences that nutraceutical supplementations can alter the commensal gut microbiota and help to prevent or fight against chronic non-communicable degenerative diseases in adults, including neurological disorders (Autism Spectrum Disorder [ASD], Parkinson's disease [PD], Multiple sclerosis [MS]) and metabolic disorders (Type-II diabetes, obesity and non-alcoholic fatty liver disease). They can even lessen the complexities of preterm babies like extra-uterine growth restriction, necrotizing enterocolitis, infant eczema and allergy (during pregnancy) as well as bronchopulmonary dysplasia. Molecular perception of inflammatory and apoptotic modulators regulating the pathogenesis of these health risks, their control and management by probiotics and prebiotics could further emphasize the scientific overview of their utility. In this study, the pivotal role of nutraceutical supplementations in regulating or modulating molecular pathways in the above non-communicable diseases is briefly described. This work also gives an overall introduction of the sophisticated genome-editing techniques and advanced delivery systems in therapeutic activities applicable under these health risks.Copyright © 2022 Bentham Science Publishers.

KW - abdominal distension

KW - adaptive immunity

KW - Alzheimer disease

KW - antimicrobial activity

KW - anxiety

KW - apoptosis

KW - artificial ventilation

KW - atopic dermatitis

KW - autism

KW - biocompatibility

KW - blood brain barrier

KW - brain depth stimulation

KW - carcinogenesis

KW - cardiovascular disease

KW - CD4+ T lymphocyte

KW - cell infiltration

KW - cellular immunity

KW - constipation

KW - CRISPR-CAS9 system

KW - cytokine release

KW - degenerative disease

KW - diabetes mellitus

KW - DNA damage

KW - DNA sequence

KW - dysbiosis

KW - dyslipidemia

KW - eczema

KW - energy expenditure

KW - enzyme activity

KW - gastroesophageal reflux

KW - gene disruption

KW - gene expression

KW - genetic engineering

KW - genetic recombination

KW - genetic transfection

KW - glomerular filtration barrier

KW - glucose blood level

KW - glycemic control

KW - human

KW - Huntington chorea

KW - hyperammonemia

KW - hyperglycemia

KW - hyperoxia

KW - hypersalivation

KW - hypertension

KW - hypertriglyceridemia

KW - immune response

KW - insulin resistance

KW - insulin sensitivity

KW - lactic acid bacterium

KW - lipid metabolism

KW - lipid storage

KW - liver cirrhosis

KW - lung dysplasia

KW - metabolic acidosis

KW - metabolic disorder

KW - metabolic syndrome X

KW - microbial community

KW - multiple sclerosis

KW - necrotizing enterocolitis

KW - nerve degeneration

KW - nervous system development

KW - \*non communicable disease

KW - nonalcoholic fatty liver

KW - nuclear magnetic resonance imaging

KW - oral mucositis

KW - oxidative phosphorylation

KW - oxidative stress

KW - parenteral nutrition

KW - Parkinson disease

KW - pregnancy diabetes mellitus

KW - premature labor

KW - prematurity

KW - protein engineering

KW - proteomics

KW - questionnaire

KW - review

KW - risk factor

KW - sepsis

KW - signal transduction

KW - spinal dysraphism

KW - Streptococcus pneumonia

KW - transcriptomics

KW - urea nitrogen blood level

KW - visual acuity

KW - zinc finger motif

KW - adiponectin/pr [Pharmaceutics]

KW - antisense oligonucleotide/pr [Pharmaceutics]

KW - cod liver oil

KW - cytosine deaminase/ec [Endogenous Compound]

KW - ghrelin/ec [Endogenous Compound]

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - glucose transporter 4/ec [Endogenous Compound]

KW - glutathione peroxidase/ec [Endogenous Compound]

KW - high density lipoprotein cholesterol/ec [Endogenous Compound]

KW - immunoglobulin E/ec [Endogenous Compound]

KW - interleukin 13/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - inulin/ec [Endogenous Compound]

KW - leptin/ec [Endogenous Compound]

KW - liraglutide/pr [Pharmaceutics]

KW - nanocomposite/ec [Endogenous Compound]

KW - neuropeptide Y/ec [Endogenous Compound]

KW - pectin/ec [Endogenous Compound]

KW - phytic acid/ec [Endogenous Compound]

KW - \*prebiotic agent/pr [Pharmaceutics]

KW - \*probiotic agent/pr [Pharmaceutics]

KW - protein kinase B

KW - serum amyloid A/ec [Endogenous Compound]

KW - small interfering RNA/ec [Endogenous Compound]

KW - thioctic acid/ec [Endogenous Compound]

KW - toll like receptor 2/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

KW - vitamin D/ec [Endogenous Compound]

JF - Current Pharmaceutical Biotechnology

JA - Curr. Pharm. Biotechnol.

LA - English

VL - 23

IS - 1

SP - 72

EP - 97

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1389-2010

SN - 1873-4316

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UR - http://www.eurekaselect.com/607/journal/current-pharmaceutical-biotechnology

DO - https://dx.doi.org/10.2174/1389201021666201013153142

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2016019124

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.2174%2f1389201021666201013153142Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kerry&issn=1389-2010&title=Current+Pharmaceutical+Biotechnology&atitle=Engineered+Probiotic+and+Prebiotic+Nutraceutical+Supplementations+in+Combating+Non-communicable+Disorders%3A+A+Review&volume=23&issue=1&spage=72&epage=97&date=2022&doi=10.2174%2F1389201021666201013153142&pmid=33050862&sid=OVID:embase

124.

TY - JOUR

DB - Embase

AN - 2015280320

ID - 35279084 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35279084]

T1 - Durable reduction of Clostridioides difficile infection recurrence and microbiome restoration after treatment with RBX2660: results from an open-label phase 2 clinical trial

A1 - Orenstein R.

A1 - Dubberke E.R.

A1 - Khanna S.

A1 - Lee C.H.

A1 - Yoho D.

A1 - Johnson S.

A1 - Hecht G.

A1 - DuPont H.L.

A1 - Gerding D.N.

A1 - Blount K.F.

A1 - Mische S.

A1 - Harvey A.

Y1 - 2022//

N2 - Background: Effective treatment options for recurrent Clostridioides difficile infection (rCDI) are limited, with high recurrence rates associated with the current standard of care. Herein we report results from an open-label Phase 2 trial to evaluate the safety, efficacy, and durability of RBX2660-a standardized microbiota-based investigational live biotherapeutic-and a closely-matched historical control cohort. Method(s): This prospective, multicenter, open-label Phase 2 study enrolled patients who had experienced either >= 2 recurrences of CDI, treated by standard-of-care antibiotic therapy, after a primary CDI episode, or >= 2 episodes of severe CDI requiring hospitalization. Participants received up to 2 doses of RBX2660 rectally administered with doses 7 days apart. Treatment success was defined as the absence of CDI diarrhea without the need for retreatment for 8 weeks after completing study treatment. A historical control group with matched inclusion and exclusion criteria was identified from a retrospective chart review of participants treated with standard-of-care antibiotics for recurrent CDI who matched key criteria for the study. The primary objective was to compare treatment success of RBX2660 to the historical control group. A key secondary outcome was the safety profile of RBX2660, including adverse events and CDI occurrence through 24 months after treatment. In addition, fecal samples from RBX2660-treated participants were sequenced to evaluate microbiome composition and functional changes from before to after treatment. Result(s): In this Phase 2 open-label clinical trial, RBX2660 demonstrated a 78.9% (112/142) treatment success rate compared to a 30.7% (23/75) for the historical control group (p < 0.0001; Chi-square test). Post-hoc analysis indicated that 91% (88/97) of evaluable RBX2660 responders remained CDI occurrence-free to 24 months after treatment demonstrating durability. RBX2660 was well-tolerated with mostly mild to moderate adverse events. The composition and diversity of RBX2660 responders' fecal microbiome significantly changed from before to after treatment to become more similar to RBX2660, and these changes were durable to 24 months after treatment. Conclusion(s): In this Phase 2 trial, RBX2660 was safe and effective for reducing rCDI recurrence as compared to a historical control group. Microbiome changes are consistent with restorative changes implicated in resisting C. difficile recurrence. Clinical Trials Registration NCT02589847 (10/28/2015)Copyright © 2022, The Author(s).

KW - abdominal distension/si [Side Effect]

KW - abdominal pain/si [Side Effect]

KW - adult

KW - aged

KW - anxiety disorder/si [Side Effect]

KW - article

KW - chi square test

KW - \*Clostridioides difficile

KW - \*Clostridium difficile infection/di [Diagnosis]

KW - \*Clostridium difficile infection/dt [Drug Therapy]

KW - \*Clostridium difficile infection/et [Etiology]

KW - constipation/si [Side Effect]

KW - controlled study

KW - diarrhea/si [Side Effect]

KW - disease severity

KW - drug efficacy

KW - drug safety

KW - drug tolerability

KW - feces analysis

KW - female

KW - fever/si [Side Effect]

KW - flatulence/si [Side Effect]

KW - gastrointestinal disease/si [Side Effect]

KW - headache/si [Side Effect]

KW - health care quality

KW - hospitalization

KW - human

KW - major clinical study

KW - male

KW - mental disease/si [Side Effect]

KW - \*microbiome

KW - multicenter study

KW - nausea/si [Side Effect]

KW - neurologic disease/si [Side Effect]

KW - phase 2 clinical trial

KW - pneumonia/si [Side Effect]

KW - post hoc analysis

KW - prospective study

KW - quality control

KW - recurrence risk

KW - recurrent disease

KW - retrospective study

KW - sepsis/si [Side Effect]

KW - treatment duration

KW - treatment failure

KW - treatment outcome

KW - upper respiratory tract infection/si [Side Effect]

KW - urinary tract infection/si [Side Effect]

KW - very elderly

KW - \*antibiotic agent/ae [Adverse Drug Reaction]

KW - \*antibiotic agent/ct [Clinical Trial]

KW - \*antibiotic agent/dt [Drug Therapy]

KW - \*antibiotic agent/pd [Pharmacology]

KW - \*antibiotic agent/rc [Rectal Drug Administration]

KW - fidaxomicin/dt [Drug Therapy]

KW - metronidazole/dt [Drug Therapy]

KW - unclassified drug

KW - vancomycin/dt [Drug Therapy]

KW - \*rbx2660/ae [Adverse Drug Reaction]

KW - \*rbx2660/ct [Clinical Trial]

KW - \*rbx2660/dt [Drug Therapy]

KW - \*rbx2660/pd [Pharmacology]

KW - \*rbx2660/rc [Rectal Drug Administration]

XT - abdominal distension / side effect / antibiotic agent

XT - abdominal distension / side effect / rbx2660

XT - abdominal pain / side effect / antibiotic agent

XT - abdominal pain / side effect / rbx2660

XT - anxiety disorder / side effect / antibiotic agent

XT - anxiety disorder / side effect / rbx2660

XT - Clostridium difficile infection / drug therapy / antibiotic agent

XT - Clostridium difficile infection / drug therapy / fidaxomicin

XT - Clostridium difficile infection / drug therapy / metronidazole

XT - Clostridium difficile infection / drug therapy / rbx2660

XT - Clostridium difficile infection / drug therapy / vancomycin

XT - constipation / side effect / antibiotic agent

XT - constipation / side effect / rbx2660

XT - diarrhea / side effect / antibiotic agent

XT - diarrhea / side effect / rbx2660

XT - fever / side effect / antibiotic agent

XT - fever / side effect / rbx2660

XT - flatulence / side effect / antibiotic agent

XT - flatulence / side effect / rbx2660

XT - gastrointestinal disease / side effect / antibiotic agent

XT - gastrointestinal disease / side effect / rbx2660

XT - headache / side effect / antibiotic agent

XT - headache / side effect / rbx2660

XT - mental disease / side effect / antibiotic agent

XT - mental disease / side effect / rbx2660

XT - nausea / side effect / antibiotic agent

XT - nausea / side effect / rbx2660

XT - neurologic disease / side effect / antibiotic agent

XT - neurologic disease / side effect / rbx2660

XT - pneumonia / side effect / antibiotic agent

XT - pneumonia / side effect / rbx2660

XT - sepsis / side effect / antibiotic agent

XT - sepsis / side effect / rbx2660

XT - upper respiratory tract infection / side effect / antibiotic agent

XT - upper respiratory tract infection / side effect / rbx2660

XT - urinary tract infection / side effect / antibiotic agent

XT - urinary tract infection / side effect / rbx2660

XT - antibiotic agent / adverse drug reaction / abdominal distension

XT - antibiotic agent / adverse drug reaction / abdominal pain

XT - antibiotic agent / adverse drug reaction / anxiety disorder

XT - antibiotic agent / adverse drug reaction / constipation

XT - antibiotic agent / adverse drug reaction / diarrhea

XT - antibiotic agent / adverse drug reaction / fever

XT - antibiotic agent / adverse drug reaction / flatulence

XT - antibiotic agent / adverse drug reaction / gastrointestinal disease

XT - antibiotic agent / adverse drug reaction / headache

XT - antibiotic agent / adverse drug reaction / mental disease

XT - antibiotic agent / adverse drug reaction / nausea

XT - antibiotic agent / adverse drug reaction / neurologic disease

XT - antibiotic agent / adverse drug reaction / pneumonia

XT - antibiotic agent / adverse drug reaction / sepsis

XT - antibiotic agent / adverse drug reaction / upper respiratory tract infection

XT - antibiotic agent / adverse drug reaction / urinary tract infection

XT - antibiotic agent / drug therapy / Clostridium difficile infection

XT - fidaxomicin / drug therapy / Clostridium difficile infection

XT - metronidazole / drug therapy / Clostridium difficile infection

XT - rbx2660 / adverse drug reaction / abdominal distension

XT - rbx2660 / adverse drug reaction / abdominal pain

XT - rbx2660 / adverse drug reaction / anxiety disorder

XT - rbx2660 / adverse drug reaction / constipation

XT - rbx2660 / adverse drug reaction / diarrhea

XT - rbx2660 / adverse drug reaction / fever

XT - rbx2660 / adverse drug reaction / flatulence

XT - rbx2660 / adverse drug reaction / gastrointestinal disease

XT - rbx2660 / adverse drug reaction / headache

XT - rbx2660 / adverse drug reaction / mental disease

XT - rbx2660 / adverse drug reaction / nausea

XT - rbx2660 / adverse drug reaction / neurologic disease

XT - rbx2660 / adverse drug reaction / pneumonia

XT - rbx2660 / adverse drug reaction / sepsis

XT - rbx2660 / adverse drug reaction / upper respiratory tract infection

XT - rbx2660 / adverse drug reaction / urinary tract infection

XT - rbx2660 / drug therapy / Clostridium difficile infection

XT - vancomycin / drug therapy / Clostridium difficile infection

JF - BMC Infectious Diseases

JA - BMC Infect. Dis.

LA - English

VL - 22

IS - 1

SP - 245

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1471-2334 (electronic)

SN - 1471-2334

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C3 - rbx2660

UR - http://www.biomedcentral.com/bmcinfectdis/

DO - https://dx.doi.org/10.1186/s12879-022-07256-y

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2015280320

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1186%2fs12879-022-07256-yLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Orenstein&issn=1471-2334&title=BMC+Infectious+Diseases&atitle=Durable+reduction+of+Clostridioides+difficile+infection+recurrence+and+microbiome+restoration+after+treatment+with+RBX2660%3A+results+from+an+open-label+phase+2+clinical+trial&volume=22&issue=1&spage=245&epage=&date=2022&doi=10.1186%2Fs12879-022-07256-y&pmid=35279084&sid=OVID:embase

125.

TY - JOUR

DB - Embase

AN - 2014364841

ID - 34363944 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34363944]

T1 - The human gut mycobiome and the specific role of Candida albicans: where do we stand, as clinicians?

A1 - Musumeci S.

A1 - Coen M.

A1 - Leidi A.

A1 - Schrenzel J.

Y1 - 2022//

N2 - Background: The so-called 'mycobiome' has progressively acquired interest and increased the complexity of our understanding of the human gut microbiota. Several questions are arising concerning the role of fungi (and in particular of Candida albicans), the so-called 'mycobiome', that has been neglected for a long time and only recently gained interest within the scientific community. There is no consensus on mycobiome normobiosis because of its instability and variability. This review aims to raise awareness about this interesting topic and provide a framework to guide physicians faced with such questions. Objective(s): To summarize current knowledge and discuss current and potential implications of the mycobiome in clinical practice. Sources: We performed a review of the existing literature in Medline Pubmed. Content: This review identifies several studies showing associations between specific mycobiome profiles and health. Fungi represent a significant biomass within the microbiota and several factors, such as diet, sex, age, co-morbidities, medications, immune status and inter-kingdom interactions, can influence its structure and population. The human gut mycobiota is indeed a key factor for several physiological processes (e.g. training of the immune system against infections) and pathological processes (e.g. immunological/inflammatory disorders, inflammatory bowel diseases, metabolic syndromes). Moreover, the mycobiome (and C. albicans in particular) could influence an even broader spectrum of conditions such as psychiatric diseases (depression, schizophrenia, bipolar disorder) or chronic viral infections (human immunodeficiency virus, hepatitis B virus); moreover, it could be implicated in tumorigenesis. Implications: Candida albicans is a well-known opportunistic pathogen and a major component of the mycobiome but its role in the gastrointestinal tract is still poorly understood. From a potential screening biomarker to a key factor for several pathological processes, its presence could influence or even modify our clinical practice.Copyright © 2021

KW - bacterial flora

KW - biomass

KW - bipolar disorder

KW - \*Candida albicans

KW - candidemia

KW - clinical practice

KW - comorbidity

KW - depression

KW - diet

KW - hepatitis B

KW - human

KW - Human immunodeficiency virus infection

KW - immune status

KW - inflammatory bowel disease

KW - \*intestine

KW - metabolic syndrome X

KW - \*mycobiome

KW - nonhuman

KW - physiological process

KW - review

KW - schizophrenia

KW - antibiotic agent

KW - \*probiotic agent

JF - Clinical Microbiology and Infection

JA - Clin. Microbiol. Infect.

LA - English

VL - 28

IS - 1

SP - 58

EP - 63

CY - United Kingdom

PB - Elsevier B.V.

SN - 1198-743X

SN - 1469-0691

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UR - https://www.journals.elsevier.com/clinical-microbiology-and-infection

DO - https://dx.doi.org/10.1016/j.cmi.2021.07.034

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2014364841

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1016%2fj.cmi.2021.07.034Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Musumeci&issn=1198-743X&title=Clinical+Microbiology+and+Infection&atitle=The+human+gut+mycobiome+and+the+specific+role+of+Candida+albicans%3A+where+do+we+stand%2C+as+clinicians%3F&volume=28&issue=1&spage=58&epage=63&date=2022&doi=10.1016%2Fj.cmi.2021.07.034&pmid=34363944&sid=OVID:embase

126.

TY - JOUR

DB - Embase

AN - 2013680017

ID - 34518916 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34518916]

T1 - Role of vitamins in the metabolic syndrome and cardiovascular disease

A1 - Aguilera-Mendez A.

A1 - Boone-Villa D.

A1 - Nieto-Aguilar R.

A1 - Villafana-Rauda S.

A1 - Molina A.S.

A1 - Sobrevilla J.V.

Y1 - 2022//

N2 - The prevalence of metabolic syndrome and cardiovascular disease has increased and continues to be the leading cause of mortality worldwide. The etiology of these diseases includes a complex phenotype derived from interactions between genetic, environmental, and nutritional factors. In this regard, it is common to observe vitamin deficiencies in the general population and even more in patients with cardiometabolic diseases due to different factors. Vitamins are essential micronutrients for cellular metabolism and their deficiencies result in diseases. In addition to its role in nutritional functions, increasingly, vitamins are being recognized as modulators of genetics expression and signals transduction, when consumed at pharmacological concentrations. Numerous randomized preclinical and clinical trials have evaluated the use of vitamin supplementation in the prevention and treatment of metabolic syndrome and cardiovascular disease. However, it is controversy regarding its efficacy in the treatment and prevention of these diseases. In this review, we investigated chemical basics, physiological effect and recommended daily intake, problems with deficiency and overdose, preclinical and clinical studies, and mechanisms of action of vitamin supplementation in the treatment and prevention of metabolic syndrome and cardiovascular disease.Copyright © 2021, The Author(s), under exclusive licence to Springer-Verlag GmbH Germany, part of Springer Nature.

KW - abdominal obesity

KW - abiotic stress

KW - acute toxicity

KW - adipogenesis

KW - air pollution

KW - amino acid metabolism

KW - anemia

KW - anorexia

KW - antioxidant activity

KW - apoptosis

KW - arthralgia

KW - ataxia

KW - atherosclerosis

KW - Bacteroides

KW - biotinylation

KW - blood vessel calcification

KW - body mass

KW - bone density

KW - bone pain

KW - brain hemorrhage

KW - carbon metabolism

KW - \*cardiovascular disease

KW - cardiovascular risk

KW - carotid atherosclerosis

KW - cell metabolism

KW - cell proliferation

KW - coronary artery disease

KW - depression

KW - dietary intake

KW - DNA damage

KW - drug overdose

KW - exocytosis

KW - fatigue

KW - female

KW - gene expression

KW - glucose blood level

KW - glycemic control

KW - glycolysis

KW - hair loss

KW - hallucination

KW - headache

KW - heart failure

KW - heartburn

KW - hepatic stellate cell

KW - hip fracture

KW - human

KW - hyperglycemia

KW - hyperlipidemia

KW - hypertension

KW - inflammation

KW - insulin resistance

KW - insulin sensitivity

KW - intestine flora

KW - lactation

KW - LD50

KW - lipid diet

KW - lipid metabolism

KW - lipid oxidation

KW - lipid peroxidation

KW - lipid storage

KW - lipolysis

KW - lipotoxicity

KW - liver cirrhosis

KW - liver fibrosis

KW - liver injury

KW - liver preservation

KW - male

KW - megaloblastic anemia

KW - \*metabolic syndrome X

KW - mineral supplementation

KW - mitochondrial biogenesis

KW - molecular dynamics

KW - muscle weakness

KW - nephrolithiasis

KW - obesity

KW - oxidative stress

KW - parenteral nutrition

KW - peripheral blood mononuclear cell

KW - phenotype

KW - physical activity

KW - physiology

KW - platelet count

KW - prevalence

KW - review

KW - risk factor

KW - scurvy

KW - seborrheic dermatitis

KW - sepsis

KW - signal transduction

KW - sun exposure

KW - \*vitamin D deficiency

KW - vitamin supplementation

KW - vomiting

KW - Western diet

KW - wound healing

KW - adiponectin

KW - alkaloid

KW - ascorbic acid/ec [Endogenous Compound]

KW - berberine

KW - calcitriol/ec [Endogenous Compound]

KW - carotenoid

KW - catalase/ec [Endogenous Compound]

KW - chloramphenicol

KW - chromium picolinate

KW - cobalamin/ec [Endogenous Compound]

KW - cobamamide/ec [Endogenous Compound]

KW - copper/ec [Endogenous Compound]

KW - cyanocobalamin/ec [Endogenous Compound]

KW - cytochrome b5 reductase/ec [Endogenous Compound]

KW - cytochrome P450

KW - ezetimibe

KW - folic acid

KW - haptoglobin/ec [Endogenous Compound]

KW - high density lipoprotein cholesterol/ec [Endogenous Compound]

KW - homocysteine/ec [Endogenous Compound]

KW - hydroxymethylglutaryl coenzyme A reductase inhibitor/ec [Endogenous Compound]

KW - low density lipoprotein cholesterol/ec [Endogenous Compound]

KW - menaquinone

KW - metformin/ec [Endogenous Compound]

KW - methionine synthase/ec [Endogenous Compound]

KW - methylmalonyl coenzyme A mutase/ec [Endogenous Compound]

KW - nicotinic acid/ec [Endogenous Compound]

KW - nifedipine

KW - nitric oxide/ec [Endogenous Compound]

KW - osteocalcin/ec [Endogenous Compound]

KW - osteoclast differentiation factor/ec [Endogenous Compound]

KW - oxidized low density lipoprotein

KW - parathyroid hormone/ec [Endogenous Compound]

KW - phenylephrine/ec [Endogenous Compound]

KW - phytol/ec [Endogenous Compound]

KW - phytosterol/ec [Endogenous Compound]

KW - picolinic acid

KW - procollagen/ec [Endogenous Compound]

KW - pyridoxal kinase/ec [Endogenous Compound]

KW - pyridoxamine/ec [Endogenous Compound]

KW - pyridoxine/ec [Endogenous Compound]

KW - reactive oxygen metabolite/ec [Endogenous Compound]

KW - resistin

KW - retinol

KW - retinol binding protein 4/ec [Endogenous Compound]

KW - simvastatin

KW - sirtuin 1/ec [Endogenous Compound]

KW - superoxide dismutase/ec [Endogenous Compound]

KW - thiamine/ec [Endogenous Compound]

KW - toll like receptor 2/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - transcription factor RUNX2/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - uric acid

KW - \*vitamin D/ec [Endogenous Compound]

KW - warfarin

JF - Pflugers Archiv European Journal of Physiology

JA - Pflug. Arch. Eur. J. Physiol.

LA - English

VL - 474

IS - 1

SP - 117

EP - 140

CY - Germany

PB - Springer Science and Business Media Deutschland GmbH

SN - 0031-6768

SN - 1432-2013

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UR - https://link.springer.de/link/service/journals/00424/index.htm

DO - https://dx.doi.org/10.1007/s00424-021-02619-x

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2013680017

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1007%2fs00424-021-02619-xLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Aguilera-Mendez&issn=0031-6768&title=Pflugers+Archiv+European+Journal+of+Physiology&atitle=Role+of+vitamins+in+the+metabolic+syndrome+and+cardiovascular+disease&volume=474&issue=1&spage=117&epage=140&date=2022&doi=10.1007%2Fs00424-021-02619-x&pmid=34518916&sid=OVID:embase

127.

TY - JOUR

DB - Embase

AN - 637147754

ID - 35127557 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35127557]

T1 - Probiotics: Potential Novel Therapeutics Against Fungal Infections

A1 - Wu Y.

A1 - Hu S.

A1 - Wu C.

A1 - Gu F.

A1 - Yang Y.

Y1 - 2022//

N2 - The global infection rate of fungal diseases is increasing year by year, and it has gradually become one of the most serious infectious diseases threatening human health. However, the side effects of antifungal drugs and the fungal resistance to these drugs are gradually increasing. Therefore, the development of new broad-spectrum, safe, and economical alternatives to antibacterial drugs are essential. Probiotics are microorganisms that are beneficial for human health. They boost human immunity, resist pathogen colonization, and reduce pathogen infection. Many investigations have shown their inhibitory activity on a wide range of pathogenic fungi. However, their antibacterial mechanism is still a secret. This article reviews the progress of probiotics as a new method for the treatment of fungal diseases.Copyright © 2022 Wu, Hu, Wu, Gu and Yang.

KW - antifungal activity

KW - antifungal susceptibility

KW - antimicrobial activity

KW - Aspergillus fumigatus

KW - atopic dermatitis

KW - bacterium adherence

KW - Bifidobacterium

KW - biofilm

KW - Candida albicans

KW - Candida glabrata

KW - Candida parapsilosis

KW - Coccidioides

KW - Cryptococcus neoformans

KW - depression

KW - endosome

KW - Filobasidiella

KW - fungus growth

KW - Helicobacter pylori

KW - Histoplasma

KW - human

KW - immune response

KW - immunity

KW - infection rate

KW - infectious agent

KW - intestine flora

KW - irritable colon

KW - Lactobacillus

KW - microorganism

KW - Mucor

KW - \*mycosis/dt [Drug Therapy]

KW - \*mycosis/th [Therapy]

KW - necrotizing enterocolitis

KW - nonhuman

KW - plant pathogen interaction

KW - review

KW - Saccharomyces cerevisiae

KW - sepsis

KW - Sporothrix

KW - systematic review

KW - systemic mycosis

KW - amphotericin B/dt [Drug Therapy]

KW - antifungal agent

KW - antiinfective agent

KW - fluconazole/dt [Drug Therapy]

KW - itraconazole/dt [Drug Therapy]

KW - prebiotic agent

KW - \*probiotic agent/dt [Drug Therapy]

KW - virulence factor

XT - mycosis / drug therapy / amphotericin B

XT - mycosis / drug therapy / fluconazole

XT - mycosis / drug therapy / itraconazole

XT - mycosis / drug therapy / probiotic agent

XT - amphotericin B / drug therapy / mycosis

XT - fluconazole / drug therapy / mycosis

XT - itraconazole / drug therapy / mycosis

XT - probiotic agent / drug therapy / mycosis

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 11

SP - 793419

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

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UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2021.793419

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=637147754

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3389%2ffcimb.2021.793419Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wu&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Probiotics%3A+Potential+Novel+Therapeutics+Against+Fungal+Infections&volume=11&issue=&spage=793419&epage=&date=2022&doi=10.3389%2Ffcimb.2021.793419&pmid=35127557&sid=OVID:embase

128.

TY - JOUR

DB - Embase

AN - 2017027801

ID - 34791425 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34791425]

T1 - The role of vitamin B12in viral infections: A comprehensive review of its relationship with the muscle-gut-brain axis and implications for SARS-CoV-2 infection

A1 - Batista K.S.

A1 - Cintra V.M.

A1 - Lucena P.A.F.

A1 - Manhaes-De-Castro R.

A1 - Toscano A.E.

A1 - Costa L.P.

A1 - Queiroz M.E.B.S.

A1 - De Andrade S.M.

A1 - Guzman-Quevedo O.

A1 - Aquino J.D.S.

Y1 - 2022//

N2 - This comprehensive review establishes the role of vitamin B12 as adjunct therapy for viral infections in the treatment and persistent symptoms of COVID-19, focusing on symptoms related to the muscle-gut-brain axis. Vitamin B12 can help balance immune responses to better fight viral infections. Furthermore, data from randomized clinical trials and meta-analysis indicate that vitamin B12 in the forms of methylcobalamin and cyanocobalamin may increase serum vitamin B12 levels, and resulted in decreased serum methylmalonic acid and homocysteine concentrations, and decreased pain intensity, memory loss, and impaired concentration. Among studies, there is much variation in vitamin B12 doses, chemical forms, supplementation time, and administration routes. Larger randomized clinical trials of vitamin B12 supplementation and analysis of markers such as total vitamin B12, holotranscobalamin, total homocysteine and methylmalonic acid, total folic acid, and, if possible, polymorphisms and methylation of genes need to be conducted with people with and without COVID-19 or who have had COVID-19 to facilitate the proper vitamin B12 form to be administered in individual treatment.Copyright © 2021 The Author(s) 2021. Published by Oxford University Press on behalf of the International Life Sciences Institute. All rights reserved. For permissions, please e-mail: journals.permissions@oup.com.

KW - aminotransferase blood level

KW - antiviral activity

KW - article

KW - \*B12 deficiency/dt [Drug Therapy]

KW - \*brain-gut axis

KW - chronic hepatitis/dt [Drug Therapy]

KW - \*coronavirus disease 2019/dt [Drug Therapy]

KW - \*coronavirus disease 2019/et [Etiology]

KW - depression

KW - diabetes mellitus

KW - diabetic neuropathy

KW - disease severity

KW - drug dosage form comparison

KW - fatigue

KW - gastrointestinal tract

KW - genetic association

KW - genetic marker

KW - hepatitis C/dt [Drug Therapy]

KW - human

KW - Human immunodeficiency virus infection/dt [Drug Therapy]

KW - immune response

KW - intestine flora

KW - liver cirrhosis

KW - long COVID

KW - megaloblastic anemia

KW - meta analysis (topic)

KW - methylation

KW - Middle East respiratory syndrome coronavirus

KW - mild cognitive impairment

KW - norovirus infection

KW - nutritional deficiency

KW - observational study

KW - overall survival

KW - pain intensity

KW - peripheral neuropathy/dt [Drug Therapy]

KW - postherpetic neuralgia/dt [Drug Therapy]

KW - pregnant woman

KW - prognosis

KW - randomized controlled trial (topic)

KW - sepsis

KW - \*Severe acute respiratory syndrome coronavirus 2

KW - skeletal muscle

KW - symptom

KW - systematic review

KW - treatment outcome

KW - tuberculosis

KW - virus hepatitis/dt [Drug Therapy]

KW - virus infection/dt [Drug Therapy]

KW - virus infection/et [Etiology]

KW - vitamin blood level

KW - vitamin supplementation

KW - aminotransferase/ec [Endogenous Compound]

KW - analgesic agent/dt [Drug Therapy]

KW - antiretrovirus agent/dt [Drug Therapy]

KW - biological marker/ec [Endogenous Compound]

KW - cobalamin

KW - cobamamide

KW - \*cyanocobalamin/ct [Clinical Trial]

KW - \*cyanocobalamin/dt [Drug Therapy]

KW - \*cyanocobalamin/im [Intramuscular Drug Administration]

KW - \*cyanocobalamin/po [Oral Drug Administration]

KW - \*cyanocobalamin/pa [Parenteral Drug Administration]

KW - \*cyanocobalamin/pd [Pharmacology]

KW - \*cyanocobalamin/li [Sublingual Drug Administration]

KW - cytokine/ec [Endogenous Compound]

KW - folic acid

KW - high mobility group B1 protein/ec [Endogenous Compound]

KW - homocysteine

KW - hydroxocobalamin

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lipopolysaccharide

KW - \*mecobalamin/ct [Clinical Trial]

KW - \*mecobalamin/dt [Drug Therapy]

KW - \*mecobalamin/po [Oral Drug Administration]

KW - methylmalonic acid

KW - peginterferon alpha/dt [Drug Therapy]

KW - ribavirin/dt [Drug Therapy]

KW - short chain fatty acid

KW - transcobalamin

KW - tumor necrosis factor/ec [Endogenous Compound]

XT - B12 deficiency / drug therapy / cyanocobalamin

XT - chronic hepatitis / drug therapy / cyanocobalamin

XT - chronic hepatitis / drug therapy / peginterferon alpha

XT - chronic hepatitis / drug therapy / ribavirin

XT - coronavirus disease 2019 / drug therapy / cyanocobalamin

XT - coronavirus disease 2019 / drug therapy / mecobalamin

XT - hepatitis C / drug therapy / peginterferon alpha

XT - hepatitis C / drug therapy / ribavirin

XT - Human immunodeficiency virus infection / drug therapy / antiretrovirus agent

XT - Human immunodeficiency virus infection / drug therapy / cyanocobalamin

XT - peripheral neuropathy / drug therapy / mecobalamin

XT - postherpetic neuralgia / drug therapy / analgesic agent

XT - postherpetic neuralgia / drug therapy / mecobalamin

XT - virus hepatitis / drug therapy / cyanocobalamin

XT - virus hepatitis / drug therapy / peginterferon alpha

XT - virus hepatitis / drug therapy / ribavirin

XT - virus infection / drug therapy / cyanocobalamin

XT - analgesic agent / drug therapy / postherpetic neuralgia

XT - antiretrovirus agent / drug therapy / Human immunodeficiency virus infection

XT - cyanocobalamin / drug therapy / B12 deficiency

XT - cyanocobalamin / drug therapy / chronic hepatitis

XT - cyanocobalamin / drug therapy / coronavirus disease 2019

XT - cyanocobalamin / drug therapy / Human immunodeficiency virus infection

XT - cyanocobalamin / drug therapy / virus hepatitis

XT - cyanocobalamin / drug therapy / virus infection

XT - mecobalamin / drug therapy / coronavirus disease 2019

XT - mecobalamin / drug therapy / peripheral neuropathy

XT - mecobalamin / drug therapy / postherpetic neuralgia

XT - peginterferon alpha / drug therapy / chronic hepatitis

XT - peginterferon alpha / drug therapy / hepatitis C

XT - peginterferon alpha / drug therapy / virus hepatitis

XT - ribavirin / drug therapy / chronic hepatitis

XT - ribavirin / drug therapy / hepatitis C

XT - ribavirin / drug therapy / virus hepatitis

JF - Nutrition Reviews

JA - Nutr. Rev.

LA - English

VL - 80

IS - 3

SP - 561

EP - 578

CY - United States

PB - Oxford University Press

SN - 0029-6643

SN - 1753-4887

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UR - http://nutritionreviews.oxfordjournals.org/

DO - https://dx.doi.org/10.1093/nutrit/nuab092

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2017027801

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1093%2fnutrit%2fnuab092Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Batista&issn=0029-6643&title=Nutrition+Reviews&atitle=The+role+of+vitamin+B12in+viral+infections%3A+A+comprehensive+review+of+its+relationship+with+the+muscle-gut-brain+axis+and+implications+for+SARS-CoV-2+infection&volume=80&issue=3&spage=561&epage=578&date=2022&doi=10.1093%2Fnutrit%2Fnuab092&pmid=34791425&sid=OVID:embase

129.

TY - JOUR

DB - Embase

AN - 2015259448

ID - 35281010 [https://www.ncbi.nlm.nih.gov/pubmed/?term=35281010]

T1 - Regulatory T Cells: Angels or Demons in the Pathophysiology of Sepsis?

A1 - Gao Y.-L.

A1 - Yao Y.

A1 - Zhang X.

A1 - Chen F.

A1 - Meng X.-L.

A1 - Chen X.-S.

A1 - Wang C.-L.

A1 - Liu Y.-C.

A1 - Tian X.

A1 - Shou S.-T.

A1 - Chai Y.-F.

Y1 - 2022//

N2 - Sepsis is a syndrome characterized by life-threatening organ dysfunction caused by the dysregulated host response to an infection. Sepsis, especially septic shock and multiple organ dysfunction is a medical emergency associated with high morbidity, high mortality, and prolonged after-effects. Over the past 20 years, regulatory T cells (Tregs) have been a key topic of focus in all stages of sepsis research. Tregs play a controversial role in sepsis based on their heterogeneous characteristics, complex organ/tissue-specific patterns in the host, the multi-dimensional heterogeneous syndrome of sepsis, the different types of pathogenic microbiology, and even different types of laboratory research models and clinical research methods. In the context of sepsis, Tregs may be considered both angels and demons. We propose that the symptoms and signs of sepsis can be attenuated by regulating Tregs. This review summarizes the controversial roles and Treg checkpoints in sepsis.Copyright © 2022 Gao, Yao, Zhang, Chen, Meng, Chen, Wang, Liu, Tian, Shou and Chai.

KW - adaptive immunity

KW - anxiety

KW - apoptosis

KW - blood brain barrier

KW - brain metabolism

KW - Candida albicans

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - cell differentiation

KW - cytokine production

KW - exosome

KW - female

KW - hospital infection

KW - human

KW - immune response

KW - immunomodulation

KW - immunosuppressive treatment

KW - innate immunity

KW - intestine flora

KW - length of stay

KW - male

KW - morbidity

KW - mortality

KW - multiple organ failure

KW - nervous system inflammation

KW - nonhuman

KW - oxidative stress

KW - \*pathophysiology

KW - Pseudomonas aeruginosa

KW - \*regulatory T lymphocyte

KW - respiratory failure

KW - review

KW - \*secondary infection

KW - \*sepsis

KW - septic shock

KW - splenectomy

KW - Streptococcus pneumoniae

KW - systemic inflammatory response syndrome

KW - Th17 cell

KW - alkaline phosphatase/ec [Endogenous Compound]

KW - bilirubin/ec [Endogenous Compound]

KW - cytotoxic T lymphocyte antigen 4/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 7/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - thymic stromal lymphopoietin/ec [Endogenous Compound]

KW - transcription factor FOXP3/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 13

SP - 829210

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2022.829210

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2015259448

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.3389%2ffimmu.2022.829210Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gao&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Regulatory+T+Cells%3A+Angels+or+Demons+in+the+Pathophysiology+of+Sepsis%3F&volume=13&issue=&spage=829210&epage=&date=2022&doi=10.3389%2Ffimmu.2022.829210&pmid=35281010&sid=OVID:embase

130.

TY - JOUR

DB - Embase

AN - 2012849096

ID - 34152053 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34152053]

T1 - Metabolic dysfunction in OSA: Is there something new under the sun?

A1 - Almendros I.

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Y1 - 2022//

N2 - The growing number of patients with obstructive sleep apnea is challenging healthcare systems worldwide. Obstructive sleep apnea is characterized by chronic intermittent hypoxaemia, episodes of apnea and hypopnea, and fragmented sleep. Cardiovascular and metabolic diseases are common in obstructive sleep apnea, also in lean patients. Further, comorbidity burden is not unambiguously linked to the severity of obstructive sleep apnea. There is a growing body of evidence revealing diverse functions beyond the conventional tasks of different organs such as carotid body and gut microbiota. Chronic intermittent hypoxia and sleep loss due to sleep fragmentation are associated with insulin resistance. Indeed, carotid body is a multi-sensor organ not sensoring only hypoxia and hypercapnia but also acting as a metabolic sensor. The emerging evidence shows that obstructive sleep apnea and particularly chronic intermittent hypoxia is associated with non-alcoholic fatty liver disease. Gut dysbiosis seems to be an important factor in the pathophysiology of obstructive sleep apnea and its consequences. The impact of sleep fragmentation and intermittent hypoxia on the development of metabolic syndrome may be mediated via altered gut microbiota. Circadian misalignment seems to have an impact on the cardiometabolic risk in obstructive sleep apnea. Dysfunction of cerebral metabolism is also related to hypoxia and sleep fragmentation. Therefore, obstructive sleep apnea may alter cerebral metabolism and predispose to neurocognitive impairment. Moreover, recent data show that obstructive sleep apnea independently predicts impaired lipid levels. This mini-review will provide novel insights into the mechanisms of metabolic dysfunction in obstructive sleep apnea combining recent evidence from basic, translational and clinical research, and discuss the impact of positive airway pressure treatment on metabolic disorders.Copyright © 2021 The Authors. Journal of Sleep Research published by John Wiley & Sons Ltd on behalf of European Sleep Research Society

KW - adipose tissue

KW - animal model

KW - brain metabolism

KW - cardiometabolic risk

KW - carotid body chemoreceptor

KW - cerebrovascular disease

KW - circadian rhythm

KW - clinical research

KW - comorbidity

KW - continuous positive airway pressure

KW - dyslipidemia

KW - encephalitis

KW - human

KW - intermittent hypoxia

KW - lipogenesis

KW - lipolysis

KW - mental deterioration

KW - mental disease

KW - \*metabolic syndrome X

KW - metabolism

KW - microflora

KW - non insulin dependent diabetes mellitus

KW - nonalcoholic fatty liver

KW - nonhuman

KW - obesity

KW - review

KW - \*sleep disordered breathing

KW - sleep quality

KW - translational research

KW - upregulation

KW - lipoprotein/ec [Endogenous Compound]

KW - probiotic agent

JF - Journal of Sleep Research

JA - J. Sleep Res.

LA - English

VL - 31

IS - 1

SP - e13418

CY - United Kingdom

PB - John Wiley and Sons Inc

SN - 0962-1105

SN - 1365-2869

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1365-2869

DO - https://dx.doi.org/10.1111/jsr.13418

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed24&NEWS=N&AN=2012849096

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed24&DO=10.1111%2fjsr.13418Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Almendros&issn=0962-1105&title=Journal+of+Sleep+Research&atitle=Metabolic+dysfunction+in+OSA%3A+Is+there+something+new+under+the+sun%3F&volume=31&issue=1&spage=e13418&epage=&date=2022&doi=10.1111%2Fjsr.13418&pmid=34152053&sid=OVID:embase

131.

TY - JOUR

DB - Embase

AN - 639855365

T1 - Psilocybin Alters Behavior and the Intestinal Microbiota in a Wild Type Mouse Model by Mechanisms That Are Not Fully Dependent on 5HT2A and 5HT2C Receptors

T3 - 61st Annual Meeting of the American College of Neuropsychopharmacology, ACNP 2022. Phoenix, AZ United States.

A1 - Cordner Z.

A1 - Prandovszky E.

A1 - Pedicini M.

A1 - Liu H.

A1 - Macias L.

A1 - Pletnikov M.

A1 - Tamashiro K.

A1 - Yolken R.

Y1 - 2022//

N2 - Background: Much enthusiasm has emerged for the therapeutic potential of psilocybin, with growing evidence of remarkable benefit for depression as well as several other psychiatric disorders. However, despite promising clinical data, our understanding of psilocybin's therapeutic mechanisms remains limited. The lack of mechanistic studies appears to be driven, in part, by the assumption that psilocybin's agonism of serotonin receptors in the brain - known to be responsible for the drug's psychedelic effects - also explains its diverse therapeutic benefits, though several recent studies suggest that other mechanisms are likely involved. The microbiome-gut-brain axis, which is increasingly recognized as a driver of behavior and modulator of psychotropic drug effects, is a plausible but largely unexplored target of psilocybin. Here, we begin to assess the effects of psilocybin on behavior, the intestinal microbiota, and the dependence of psilocybin-induced changes on 5HT2A and 5HT2C receptors. Method(s): In the first study, adult male and female C57BL/6 J mice were exposed to a single dose of saline, psilocybin, the 5HT2A and 5HT2C receptor antagonist ketanserin, or psilocybin co-administered with ketanserin. The head twitch response, a validated behavioral measure of central 5HT2A receptor agonism, was measured 30 minutes after treatment. Elevated plus maze, social interaction, and forced swim behaviors were measured between 3 and 6 days after treatment. In a second cohort, male mice were again treated with saline, psilocybin, ketanserin, or psilocybin co-administered with ketanserin. Then, 3 days after treatment, behavior was assessed, and intestinal contents were collected for 16 S rRNA sequencing to determine bacterial composition and diversity. Finally, intestinal contents were collected from mice treated with saline or psilocybin then transplanted by gavage to naive male mice, followed by behavioral analysis. Result(s): Psilocybin induced a robust head twitch response, increased exploratory behavior in the elevated plus maze, increased social behavior in the social interaction test, and decreased immobility in the forced swim test. Co-administration of ketanserin fully blocked the head twitch response without significantly altering psilocybin's effects on other behavioral outcomes. In a separate cohort, treatment with psilocybin produced broad alteration of the intestinal microbiome, with particularly marked changes in the large intestine that were only partially blocked by pre-treatment with ketanserin. Finally, transplantation of intestinal contents from psilocybin-treated mice to naive untreated mice resulted in behavioral changes consistent with the effects of psilocybin treatment. Conclusion(s): Our findings demonstrate that a single dose of psilocybin leads to behavioral changes in mice that are relevant for studies of resilience and affective disorders. Our results further indicate that the behavioral changes may not be fully dependent on psilocybin's agonism of 5HT2A and 5HT2C receptors. Further, psilocybin appears to broadly alter the intestinal microbiome and transplantation of intestinal contents reproduces behavioral change associated with psilocybin treatment, suggesting a previously unknown microbiome-gut-brain mechanism of action.

KW - adult

KW - animal experiment

KW - animal model

KW - animal tissue

KW - \*anxiety disorder

KW - behavior change

KW - \*brain-gut axis

KW - C57BL 6 mouse

KW - cohort analysis

KW - conference abstract

KW - controlled study

KW - \*depression

KW - driving ability

KW - drug therapy

KW - enteric feeding

KW - exploratory behavior

KW - female

KW - forced swim test

KW - head twitch

KW - human

KW - immobility

KW - intestine content

KW - \*intestine flora

KW - large intestine

KW - male

KW - \*mood disorder

KW - mouse

KW - \*mouse model

KW - muscle twitch

KW - nonhuman

KW - social behavior

KW - social interaction test

KW - surgery

KW - transplantation

KW - \*wild type mouse

KW - endogenous compound

KW - ketanserin

KW - \*psilocybine

KW - psychotropic agent

KW - RNA 16S

KW - \*serotonin 2A receptor

KW - serotonin 2C antagonist

KW - \*serotonin 2C receptor

KW - sodium chloride

JF - Neuropsychopharmacology

JA - Neuropsychopharmacology

LA - English

VL - 47

IS - Supplement 1

SP - 245

EP - 246

CY - Netherlands

PB - Springer Science+Business Media B.V.

SN - 1740-634X

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DO - https://dx.doi.org/10.1038/s41386-022-01485-0

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=639855365

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1038%2fs41386-022-01485-0Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cordner&issn=1740-634X&title=Neuropsychopharmacology&atitle=Psilocybin+Alters+Behavior+and+the+Intestinal+Microbiota+in+a+Wild+Type+Mouse+Model+by+Mechanisms+That+Are+Not+Fully+Dependent+on+5HT2A+and+5HT2C+Receptors&volume=47&issue=Supplement+1&spage=245&epage=246&date=2022&doi=10.1038%2Fs41386-022-01485-0&pmid=&sid=OVID:embase

132.

TY - JOUR

DB - Embase

AN - 639758682

T1 - Brain-Gut Microbiome Profile of Neuroticism Predicts Food Addiction: A Transdiagnostic Approach

T3 - 40th Annual Meeting of the Obesity Society at Obesityweek. San Diego, CA United States.

A1 - Zhang X.

A1 - Bhatt R.

A1 - Todorov S.

A1 - Gupta A.

Y1 - 2022//

N2 - Background: Neuroticism is one of the most robust risk factors for psychiatric, behavioral, and addictive disorders such as obesity risk and food addiction (FA), though the underlying mechanisms are not clear. Due to the important role of brain-gut-microbiome interactions in obesity and FA, multimodal data were used to explore the relationship between neuroticism and FA in order to identify the underlying common neuropsychological and metabolomic mechanisms, utilizing a transdiagnostic approach. Method(s): Predictive modeling of neuroticism was implemented using multimodal features (23 clinical, 13531 resting-state functional connectivity (rsFC), and 336 gut metabolomic features) in 114 high BMI participants (32% male, BMI>=25). The most important features were identified using gradient boosting machines (GBM) and then passed into logistic regression models to evaluate the performance in classifying FA. Result(s): There was a significant relationship between neuroticism and FA symptoms (r=0.35, p<0.001). Most important neuroticism-related features derived from GBM predicted FA diagnoses with high performance (AUC=0.89). Model comparisons revealed that multimodal models performed better than single-modal models. Across all models, transdiagnostic alterations corresponded prominently to rsFC involved in the emotion regulation (ventral lateral prefrontal cortex, temporal pole, superior temporal gyrus) reward processing (caudate, orbitofrontal cortex, parahippocampal gyrus and pallidum) and cognitive control and self-monitoring (precentral gyrus and posterior cingulate), and the metabolite 3-(4-hydroxyphenyl) propionate implicated in dopamine synthesis containing anti-inflammatory properties, as well as anxiety symptoms. Further, neuroticism was found to moderate the relationship between BMI and FA symptoms. Conclusion(s): Our study suggests that neuroticism-related brain-gutclinical features predict FA in high BMI individuals and potentially modulates FA symptoms. We demonstrate a neuroticism-based pattern driving neuropsychological and gut microbiota perturbations and increased FA. Such transdiagnostic dysfunctions are critical to identifying the core maladaptive mechanisms that underlie a broad array of diagnostic presentations in order to develop potential interventions to improve comorbid symptoms.

KW - adult

KW - animal experiment

KW - animal model

KW - anxiety

KW - body mass

KW - caudate nucleus

KW - climate model

KW - conference abstract

KW - controlled study

KW - dopamine metabolism

KW - emotion regulation

KW - executive function

KW - female

KW - \*food addiction

KW - functional connectivity

KW - globus pallidus

KW - human

KW - \*intestine flora

KW - lateral prefrontal cortex

KW - male

KW - microbial interaction

KW - \*neurosis

KW - nonhuman

KW - obesity

KW - orbital cortex

KW - parahippocampal gyrus

KW - \*posterior cingulate

KW - primary motor cortex

KW - reward

KW - self monitoring

KW - superior temporal gyrus

KW - unclassified drug

JF - Obesity

JA - Obesity

LA - English

VL - 30

IS - Supplement 1

SP - 292

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1930-7381

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DO - https://dx.doi.org/10.1002/oby.23626

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=639758682

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1002%2foby.23626Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=1930-7381&title=Obesity&atitle=Brain-Gut+Microbiome+Profile+of+Neuroticism+Predicts+Food+Addiction%3A+A+Transdiagnostic+Approach&volume=30&issue=Supplement+1&spage=292&epage=&date=2022&doi=10.1002%2Foby.23626&pmid=&sid=OVID:embase

133.

TY - JOUR

DB - Embase

AN - 639276386

T1 - Long-term real-world follow-up of patients with irritable bowel syndrome educated on a low-FODMAP diet: Symptom control, quality of life, metabolic, microbiome, and disordered eating considerations

T3 - Gastroenterological Society of Australia, GESA and Australian Gastroenterology Week, AGW 2022. Sydney, NSW Australia.

A1 - Silva H.

A1 - Porter J.

A1 - Gibson P.

A1 - Barrett J.

A1 - Hold G.

A1 - Zhang F.

A1 - Knowles S.

A1 - Garg M.

Y1 - 2022//

N2 - Background and Aim: Although efficacy of the FODMAP diet is established as a treatment strategy for irritable bowel syndrome (IBS) in the short term, there is limited information about longer-term outcomes. This study aimed to evaluate longer-term outcomes in patients taught the low FODMAP diet, including real-world patient experiences, symptom control, quality of life, dietary evolution of restrictions, disordered eating, and safety with respect to metabolic syndrome and the microbiome. Method(s): This was a cross-sectional study of individuals with IBS educated on a low-FODMAP diet by a gastrointestinal specialist dietitian during the period 2008-2018. Medical histories were interrogated, and eligible participants attended an appointment with the study dietitian. Clinical data, symptoms (IBS Severity Scoring System [IBS-SSS]; global symptom response), dietary questionnaires including the Comprehensive Nutrition Assessment Questionnaire (CNAQ), 7-day food diaries, Eating Attitudes Test (EAT-26), Nine Item Avoidant/Restrictive Food Intake Disorder (ARFID) Screen (NIAS), seven-item orthorexia screening tool (ORTO-7), quality-of-life surveys (IBS-QOL), anthropometry, and blood pressure were recorded. Blood samples were collected to assess glycated hemoglobin and cholesterol levels and stool samples for microbiota profiling. Participants were stratified into tertiles by total oligosaccharide and polyol intake to assess difference in parameters. Result(s): Of 474 patients invited, 74 (median age, 59 years [range, 47-67]; 62 [84%] female) were included for overall analysis, 73 for metabolic analysis, 60 for dietary intake, and 47 for microbiome with 7-day food diary analysis. The median duration of follow-up after initial education on a low-FODMAP diet was 6.4 years (range, 2.5-13.4). Overall, 47 participants (64%) reported satisfactory relief of symptoms at long-term followup. Of 60 participants (74%) who had a documented initial response to the diet, 37 (62%) had long-term adequate symptom control. Of the 60, 23 (38%) progressed to a personalized FODMAP diet, with nine (15%) reporting ongoing strict restrictions. Of 14 patients who had an inadequate initial response, 10 (71%) had long-term adequate symptom control. Although 11 of these reported returning to their habitual diet, all continued some level of FODMAP restriction to assist with symptom control. Total oligosaccharide and polyol intake correlated with self-described FODMAP intake (r2 = 0.324, P = 0.012, n = 60), with a lower median intake in those reporting to follow a strict low-FODMAP diet, compared with those who returned to their habitual diet (P = 0.026) but not with those reporting to follow a personalized diet (P = 0.178). No differences in total oligosaccharide and polyol intake were observed across those reporting a personalized FODMAP diet (5.8 g/day; 2.9-7.9), habitual diet (8.0 g/day; 4.9-9.8), strict low-FODMAP diet (4.2 g/day; 3.3-5.1), and low-FODMAP diet 50% of the time (7.2 g/day; 4.3-9.4) (P = 0.082). Most participants (42, 57%) did not seek updated advice after initial education. Knowledge of the FODMAP diet was reported to be average or above by 65 participants (87%). Attainment of higher education status and being >50 years of age was associated with improved IBS-SSS and IBS-QOL scores (P = 0.082, P = 0.060, P = 0.006, P = 0.028, respectively), and IBS with diarrhea was associated with improved IBS-SSS (P = 0.031). Risk of an eating disorder was identified in five patients (7%), orthorexia in 16 (22%), and ARFID in 22 (30%). A higher degree of psychological distress and reduced quality of life were observed in those with risk of any type of disordered eating (P < 0.05), and worse symptom control was seen in those with risk of orthorexia or ARFID (P < 0.001). Strict FODMAP restriction was reported by a minority of patients with disordered eating (EAT-26 +ve: 1/5, 20%; ORTO-7 +ve: 2/16, 13%; NIAS +ve: 4/22, 18%). However, on interrogation of the follow-up notes available, 4/5 with positive EAT-26 scores had difficulty reintroducing tolerated FODMAPs. There was no significant increase in age-independent Charlson Comorbidity Index (CCI) score from before FODMAP diet implementation to the time of the study (P = 0.284). Metabolic syndrome was present in 34% of the population (25/73) and was similar across all total oligosaccharide and polyol intake tertiles (P = 0.337). Microbiome composition, including alpha and beta diversity, was not associated with total oligosaccharide and polyol intake. Conclusion(s): Many years after being taught the low-FODMAP diet, two-thirds of patients with IBS had satisfactory control of symptoms. Potential adverse long-term issues were excessive restrictions (10%) and disordered eating behavior (7-30%), but no signals for adverse metabolic or microbiome consequences were observed. Initial education had an impact on food choice in the long term, even in those perceived not to follow the diet. Fewer than one in two patients had ongoing professional advice and education. These data support regular dietitian follow-up of patients educated on the FODMAP diet in the long term to optimize education and efficacy of the diet and identification of potential disordered eating behavior.

KW - adolescent

KW - adult

KW - age

KW - anthropometry

KW - avoidant restrictive food intake disorder

KW - blood pressure

KW - blood pressure monitoring

KW - \*blood sampling

KW - Charlson Comorbidity Index

KW - child

KW - cholesterol level

KW - conference abstract

KW - cross-sectional study

KW - diarrhea

KW - dietary intake

KW - dietitian

KW - \*distress syndrome

KW - drug safety

KW - Eating Attitudes Test

KW - \*eating disorder

KW - education

KW - \*educational status

KW - feces

KW - female

KW - \*follow up

KW - human

KW - Irritable Bowel Syndrome Quality of Life

KW - \*irritable colon

KW - \*low FODMAP diet

KW - major clinical study

KW - male

KW - medical history

KW - mental capacity

KW - mental stress

KW - metabolic syndrome X

KW - \*microbiome

KW - middle aged

KW - nonhuman

KW - nutritional assessment

KW - orthorexia

KW - outcome assessment

KW - personalized nutrition

KW - protein fingerprinting

KW - \*quality of life

KW - scoring system

KW - tertiary education

KW - glycosylated hemoglobin

KW - oligosaccharide

KW - polyol

JF - Journal of Gastroenterology and Hepatology

JA - J. Gastroenterol. Hepatol. Res.

LA - English

VL - 37

IS - Supplement 1

SP - 223

CY - Netherlands

PB - ACT Publishing Group Liminted

SN - 1440-1746

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UR - https://onlinelibrary.wiley.com/doi/epdf/10.1111/jgh.15958

DO - https://dx.doi.org/10.1111/jgh.15958

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=639276386

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1111%2fjgh.15958Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Silva&issn=1440-1746&title=Journal+of+Gastroenterology+and+Hepatology&atitle=Long-term+real-world+follow-up+of+patients+with+irritable+bowel+syndrome+educated+on+a+low-FODMAP+diet%3A+Symptom+control%2C+quality+of+life%2C+metabolic%2C+microbiome%2C+and+disordered+eating+considerations&volume=37&issue=Supplement+1&spage=223&epage=&date=2022&doi=10.1111%2Fjgh.15958&pmid=&sid=OVID:embase

134.

TY - JOUR

DB - Embase

AN - 638291629

T1 - GROWTH AND NEURO-DEVELOPMENTAL OUTCOMES OF PROBIOTIC SUPPLEMENTED PRETERM INFANTS - A SYSTEMATIC REVIEW AND META-ANALYSIS

T3 - Perinatal Society of Australia and New Zealand Annual Congress, PSANZ 2022. Adelaide, SA Australia.

A1 - Panchal H.

A1 - Athalye-Jape G.

A1 - Rao S.

A1 - Patole S.

Y1 - 2022//

N2 - Background: Gut dysbiosis is associated with sepsis and necrotizing enterocolitis in preterm infants, which are associated with adverse long-term growth and neurodevelopment. We aimed to synthesise evidence for effect of probiotic supplementation (PS) on growth and neurodevelopmental outcomes in preterm infants. Method(s): Databases MEDLINE, EMBASE, EMCARE, Cochrane CENTRAL, and grey literature were searched in January 2022. Only randomized controlled trials (RCTs) were included. Outcomes included short-term and long-term growth and neurodevelopmental outcomes. Meta-analysis was performed using random effects model. Effect size was expressed as standardized mean difference (SMD), risk ratio (RR) and 95% confidence intervals (CI). Risk of Bias (ROB) was estimated by ROB-2 tool. Level of evidence (LoE) was summarized using GRADE (Grading of Recommendations, Assessment, Development and Evaluation) guidelines. Result(s): Thirty RCTs (35 publications) (n = 4817) were included. Meta-analysis showed that PS was associated with significantly better short-term weight gain [SMD 0.28 (95% CI 0.06, 0.50); 20 RCTs, (n = 3487); p = 0.01; I2 = 89%; LoE: moderate]. Length [SMD 0.21 (95% CI -0.12, 0.54); 5 RCTs, (n = 665); p = 0.21; I2 = 75%; LoE: low] and head circumference [SMD 0.17 (95% CI -0.13, 0.48); 7 RCTs, (n = 1032); p = 0.27; I2 = 82%; LoE: low] were similar between probiotic and placebo groups. PS had no effect on overall neurodevelopmental impairment [RR 0.93 (95%CI 0.93, 1.10); 5 RCTs; (n = 1588); p = 0.41; I2 = 0%; LoE: low]. Conclusion(s): PS was associated with significantly better shortterm weight gain, but did not affect length, head circumference, long-term growth or neurodevelopmental outcomes of preterm infants. Adequately powered RCTs are needed to assess probiotic effects on long-term growth and neurodevelopment in this population.

KW - body weight gain

KW - clinical trial

KW - Cochrane Library

KW - conference abstract

KW - controlled study

KW - drug therapy

KW - effect size

KW - Embase

KW - grey literature

KW - head circumference

KW - human

KW - Medline

KW - mental disease

KW - meta analysis

KW - nervous system development

KW - outcome assessment

KW - practice guideline

KW - \*prematurity

KW - randomized controlled trial (topic)

KW - risk assessment

KW - systematic review

KW - placebo

KW - \*probiotic agent

JF - Journal of Paediatrics and Child Health

JA - J. Paediatr. Child Health

LA - English

VL - 58

IS - SUPPL 2

SP - 52

CY - Netherlands

PB - Blackwell Publishing

SN - 1440-1754

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M1 - (Athalye-Jape, Rao, Patole) School of Medicine, University of Western Australia, Perth, WA, Australia

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DO - https://dx.doi.org/10.1111/jpc.15945

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=638291629

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1111%2fjpc.15945Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Panchal&issn=1440-1754&title=Journal+of+Paediatrics+and+Child+Health&atitle=GROWTH+AND+NEURO-DEVELOPMENTAL+OUTCOMES+OF+PROBIOTIC+SUPPLEMENTED+PRETERM+INFANTS+-+A+SYSTEMATIC+REVIEW+AND+META-ANALYSIS&volume=58&issue=SUPPL+2&spage=52&epage=&date=2022&doi=10.1111%2Fjpc.15945&pmid=&sid=OVID:embase

135.

TY - JOUR

DB - Embase

AN - 638066261

T1 - NEONATAL ANTIMICROBIAL STEWARDSHIP: DISCONTINUING THERAPY AT 36 HOURS

T3 - 2022 Eastern Regional Meeting. Virginia Beach, VA.

A1 - Borja T.

A1 - Giri P.

A1 - Blau J.

A1 - Vomero B.

Y1 - 2022//

N2 - Purpose of Study Frequent and prolonged use of antibiotics is well-established treatment for term and preterm neonates in the NICU. However, broad-spectrum antibiotics are associated with an increasing risk of NEC, late onset sepsis, neurodevelopmental impairment and even death. Growing evidence also suggests adverse effects of asthma, allergies, obesity and type 1 DM in childhood. Antibiotic use disrupts the developing microbiome and results in less variation in microbial diversity and the emergence of multidrug resistant bacteria. Antibiotics reduced expression of immune-related genes resulting in an impaired immune system which further increases risk of infection. Hospitalization costs also increase, in addition to interference with maternal bonding and breastfeeding. While antibiotics are typically stopped at 48 hours if cultures are negative, empiric treatment of presumed sepsis is increasingly discontinued at 36 hours in term neonates, after multiple reports that 89% - 96% of blood cultures grow the most common pathogenic microorganisms by 36 hours. Mukhopadhyay et al reported similar findings in VLBW infants with time to positivity of EOS blood cultures of 88% at 36 hours. Limiting antibiotic use in term and preterm neonates to 36 hours may decrease risk of prolonged exposure without adverse events of sepsis. Objective To decrease empiric antibiotic utilization by 20% through discontinuation of antibiotics at 36 hours in both term and preterm neonates. The primary outcome will be antibiotic duration and total number of doses. Methods Used Providers were educated on discontinuing antibiotics at 36 hours if blood culture is negative, but will continue antibiotics if clinically indicated. Previous term and preterm neonates with antibiotics discontinued at 48 hours serve as matched historical controls. Demographic, clinical, and laboratory data will be collected for control (April 2018- March 2020) and post-intervention groups (April 2020-March 2022). Preliminary data was analyzed by Chi-Squared test and Fischer's test. Summary of Results There were no significant differences in demographic characteristics between control and post-intervention groups. For both term and preterm groups, p-value was < 0.05 for number of ampicillin doses given comparing historical controls and post-intervention groups. There was no statistically significant increase in LOS cases or blood culture positivity. Control group for neonates < 34 weeks had mortality of ~12%, compared to 2% in experimental group. Conclusions Antibiotics are commonly used in NICU for presumed sepsis, despite risks associated with long-term use. Through antimicrobial stewardship, we hope to continue to decrease number of doses and duration of antibiotics during NICU stay. Preliminary results suggest that neonates receiving only 36 hours of antibiotics have a significantly decrease in antibiotic doses with no cases of missed sepsis. (Figure Presented).

KW - allergy

KW - antimicrobial stewardship

KW - asthma

KW - bacterium culture

KW - blood culture

KW - breast feeding

KW - child

KW - childhood

KW - conference abstract

KW - controlled study

KW - demographics

KW - drug therapy

KW - female

KW - hospitalization cost

KW - human

KW - immune system

KW - immune-related gene

KW - infant

KW - long term exposure

KW - mental disease

KW - microbial diversity

KW - microbiome

KW - mortality

KW - multidrug resistant bacterium

KW - newborn

KW - nonhuman

KW - obesity

KW - outcome assessment

KW - preliminary data

KW - prematurity

KW - sepsis

KW - very low birth weight

KW - ampicillin

KW - antibiotic agent

JF - Journal of Investigative Medicine

JA - J. Invest. Med.

LA - English

VL - 70

IS - 4

SP - 1063

EP - 1064

CY - Netherlands

PB - BMJ Publishing Group

SN - 1708-8267

AD - T. Borja, Pediatrics,Northwell- Staten Island, Staten island, NY, United States

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DO - https://dx.doi.org/10.1136/jim-2022-ERM.99

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=638066261

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1136%2fjim-2022-ERM.99Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Borja&issn=1708-8267&title=Journal+of+Investigative+Medicine&atitle=NEONATAL+ANTIMICROBIAL+STEWARDSHIP%3A+DISCONTINUING+THERAPY+AT+36+HOURS&volume=70&issue=4&spage=1063&epage=1064&date=2022&doi=10.1136%2Fjim-2022-ERM.99&pmid=&sid=OVID:embase

136.

TY - JOUR

DB - Embase

AN - 638065977

T1 - THE EFFECT OF IN UTERO POLYCYCLIC AROMATIC HYDROCARBON EXPOSURE ON THE NEONATAL MECONIUM MICROBIOME

T3 - 2022 Eastern Regional Meeting. Virginia Beach, VA.

A1 - Keerthy D.

A1 - Wen L.

A1 - Seeram D.

A1 - Park H.

A1 - Calero L.

A1 - Hu H.

A1 - Uhlemann A.

A1 - Herbstman J.

Y1 - 2022//

N2 - Purpose of Study In utero exposure to environmental polycyclic aromatic hydrocarbon (PAH) is associated with neurodevelopmental impairments, prematurity and low birth weight. It may also lead to dysbiosis given that the gut microbiome serves as an intermediary between self and external environment. Exploring the impact of PAH on microbiota may help elucidate their role in disease. The objective of this study is to evaluate the effect of in utero PAH exposure on meconium microbiome. Methods Used We evaluated 49 mother-child dyads within Fair Start Birth Cohort with adequate meconium samples who had normal spontaneous vaginal delivery after 37-week gestation. Exclusion criteria included maternal infection, perinatal antibiotics, GBS positive status, prolonged rupture of membranes or neonatal intensive care admission. Prenatal PAH was measured using personal active samplers housed in backpacks worn for 48 hours during third trimester. In first 48 hours of life, meconium was collected and frozen at -80degreeC. DNA extraction, sequencing V3-V4 region of the 16S rRNA gene, Amplicon Sequence Variant analysis using DADA2 pipeline and taxonomy assignment against Silva were performed. Summary of Results Categorical exposure groups (high (H), medium (M), low (L)), were based on total PAH exposure tertile. Low read counts or sequencing failure occurred in 14 samples. Remaining 35 samples were analyzed. No significant difference in bacterial alpha diversity (richness or evenness) was observed between groups for Chao1 nor Shannon index. Within H subset (n=12), there were significant linear relationships between Chao1 (richness) index and log benzo-a-anthracene and log chrysene (figure 1). In terms of beta diversity, no significant difference was observed across groups using UniFrac, weighted UniFrac, or Bray method. Using differential abundance testing, significantly differentially abundant taxa were observed for all comparisons among treatment groups H, M, and L (figure 2). Conclusions Meconium microbiome showed presence of detectable bacterial organisms. In utero PAH exposure may alter bacterial communities. Mechanism of specific PAHs (benzo-a-anthracene and chrysene) having differential effects will need further evaluation. A possible mechanism explaining the differences in species abundance between exposure groups includes activation of inflammatory pathways through the PAH activated aryl hydrocarbon receptor altering gut habitability. These findings are limited by small sample size but demonstrate the feasibility of performing this study on a larger scale. Our next steps include using mixture models to evaluate these diversity metrics. (Figure Presented).

KW - adverse drug reaction

KW - amplicon

KW - birth cohort

KW - child

KW - clinical article

KW - cohort analysis

KW - conference abstract

KW - controlled study

KW - DNA extraction

KW - \*DNA sequence

KW - \*environmental exposure

KW - feasibility study

KW - female

KW - gastrointestinal tract

KW - gene sequence

KW - human

KW - low birth weight

KW - \*meconium

KW - membrane rupture

KW - mental disease

KW - microbial community

KW - \*microbiome

KW - newborn

KW - newborn intensive care

KW - nonhuman

KW - pipeline

KW - population abundance

KW - pregnancy

KW - prematurity

KW - prenatal exposure

KW - sample size

KW - sampler

KW - Shannon index

KW - side effect

KW - signal transduction

KW - taxonomy

KW - third trimester pregnancy

KW - vaginal delivery

KW - antibiotic agent

KW - aromatic hydrocarbon receptor

KW - benz[a]anthracene

KW - chrysene

KW - endogenous compound

KW - \*polycyclic aromatic hydrocarbon

KW - RNA 16S

JF - Journal of Investigative Medicine

JA - J. Invest. Med.

LA - English

VL - 70

IS - 4

SP - 1069

EP - 1070

CY - Netherlands

PB - BMJ Publishing Group

SN - 1708-8267

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M1 - (Keerthy, Wen, Seeram, Park, Calero, Hu, Uhlemann, Herbstman) Columbia University, New York, NY, United States

DO - https://dx.doi.org/10.1136/jim-2022-ERM.108

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=638065977

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1136%2fjim-2022-ERM.108Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Keerthy&issn=1708-8267&title=Journal+of+Investigative+Medicine&atitle=THE+EFFECT+OF+IN+UTERO+POLYCYCLIC+AROMATIC+HYDROCARBON+EXPOSURE+ON+THE+NEONATAL+MECONIUM+MICROBIOME&volume=70&issue=4&spage=1069&epage=1070&date=2022&doi=10.1136%2Fjim-2022-ERM.108&pmid=&sid=OVID:embase

137.

TY - JOUR

DB - Embase

AN - 636668185

ID - 34950603 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34950603]

T1 - Antituberculosis Therapy and Gut Microbiota: Review of Potential Host Microbiota Directed-Therapies

A1 - Diallo D.

A1 - Somboro A.M.

A1 - Diabate S.

A1 - Baya B.

A1 - Kone A.

A1 - Sarro Y.S.

A1 - Kone B.

A1 - Diarra B.

A1 - Diallo S.

A1 - Diakite M.

A1 - Doumbia S.

A1 - Toloba Y.

A1 - Murphy R.L.

A1 - Maiga M.

Y1 - 2021//

N2 - Tuberculosis (TB) remains a major public health concern with millions of deaths every year. The overlap with HIV infections, long treatment duration, and the emergence of drug resistance are significant obstacles to the control of the disease. Indeed, the standard first-line regimen TB treatment takes at least six months and even longer for the second-line therapy, resulting in relapses, drug resistance and re-infections. Many recent reports have also shown prolonged and significant damage of the gut microbial community (dysbiosis) from anti-TB drugs that can detrimentally persist several months after the cessation of treatment and could lead to the impairment of the immune response, and thus re-infections and drug resistance. A proposed strategy for shortening the treatment duration is thus to apply corrective measures to the dysbiosis for a faster bacterial clearance and a better treatment outcome. In this review, we will study the role of the gut microbiota in both TB infection and treatment, and its potential link with treatment duration. We will also discuss, the new concept of "Host Microbiota Directed-Therapies (HMDT)" as a potential adjunctive strategy to improve the treatment effectiveness, reduce its duration and or prevent relapses. These strategies include the use of probiotics, prebiotics, gut microbiota transfer, and other strategies. Application of this innovative solution could lead to HMDT as an adjunctive tool to shorten TB treatment, which will have enormous public health impacts for the End TB Strategy worldwide.Copyright © 2021 Diallo, Somboro, Diabate, Baya, Kone, Sarro, Kone, Diarra, Diallo, Diakite, Doumbia, Toloba, Murphy and Maiga.

KW - antimicrobial activity

KW - anxiety

KW - bacterial clearance

KW - cancer prevention

KW - Clostridiales

KW - colonoscopy

KW - dietary intake

KW - down regulation

KW - dysbiosis

KW - environmental factor

KW - feces microflora

KW - Firmicutes

KW - immune response

KW - immune system

KW - immunomodulation

KW - innate immunity

KW - \*intestine flora

KW - Lactobacillus

KW - meningitis

KW - nonhuman

KW - Proteobacteria

KW - review

KW - sensitivity analysis

KW - sepsis

KW - \*tuberculosis

KW - ethambutol

KW - isoniazid

KW - metronidazole

KW - pyrazinamide

KW - rifampicin

JF - Frontiers in Cellular and Infection Microbiology

JA - Front. Cell. Infect. Microbiol.

LA - English

VL - 11

SP - 673100

CY - Switzerland

PB - Frontiers Media S.A.

SN - 2235-2988 (electronic)

SN - 2235-2988

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UR - http://www.frontiersin.org/Cellular\_and\_Infection\_Microbiology/archive

DO - https://dx.doi.org/10.3389/fcimb.2021.673100

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=636668185

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.3389%2ffcimb.2021.673100Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Diallo&issn=2235-2988&title=Frontiers+in+Cellular+and+Infection+Microbiology&atitle=Antituberculosis+Therapy+and+Gut+Microbiota%3A+Review+of+Potential+Host+Microbiota+Directed-Therapies&volume=11&issue=&spage=673100&epage=&date=2021&doi=10.3389%2Ffcimb.2021.673100&pmid=34950603&sid=OVID:embase

138.

TY - JOUR

DB - Embase

AN - 2014569449

ID - 34836414 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34836414]

T1 - Association between dietary fiber intake and incidence of depression and anxiety in patients with essential hypertension

A1 - Liu Y.

A1 - Ju Y.

A1 - Cui L.

A1 - Liu T.

A1 - Hou Y.

A1 - Wu Q.

A1 - Ojo O.

A1 - Du X.

A1 - Wang X.

Y1 - 2021//

N2 - (1) Background: Our previous study found that the dietary fiber supplement in patients with hypertension increased SCFA-producers, Bififidobacterium and Spirillum in the gut microbiota, which may be associated with improvement of depression and anxiety through the gut-brain axis. However, only a few studies have explored the association between dietary fiber intake (DFI) and the incidence of depression and anxiety in hypertensive patients. (2) Methods: A cross-sectional survey was conducted in one comprehensive hospital and one community clinic aimed at understanding the status of DFI and the association between DFI and incidences of depression and anxiety in hypertensive patients. Levels of DFI were obtained through a two-24 h diet recall. According to the levels of DFI from low to high, the participants were divided into Q1, Q2, Q3 and Q4 groups. The Reported Outcomes Measurement Information System short form v1.0-Depression 8b and Anxiety 8a were used to assess patients' levels of depression and anxiety. (3) Results: A total of 459 hypertensive patients were recruited and the daily DFI was 10.4 g. The incidences of hypertension combined with depression and anxiety were 19.6% and 18.5%, respectively. Regression analysis showed statistically significant associations between DFI and depression (B = -0.346, p = 0.001) and anxiety score (B = -0.565, p < 0.001). In logistic regression, after the covariates were adjusted, DFI was associated with the incidence of depression in Q3 (OR 2.641, 95% CI 1.050-6.640) and with that of anxiety in Q1 (OR 2.757, 95% CI 1.035-7.346), compared with Q4. (4) Conclusion(s): A higher consumption of DF was a protective factor for depression and anxiety in hypertensive patients.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - adult

KW - anxiety

KW - \*anxiety disorder

KW - article

KW - clinical assessment

KW - community care

KW - comorbidity

KW - comparative study

KW - controlled study

KW - cross-sectional study

KW - \*depression

KW - diastolic blood pressure

KW - dietary fiber

KW - disease association

KW - \*essential hypertension/di [Diagnosis]

KW - female

KW - \*fiber intake

KW - genetic association

KW - health survey

KW - hospital care

KW - human

KW - hypertension

KW - hypertensive patient

KW - \*incidence

KW - information system

KW - major clinical study

KW - male

KW - mental disease assessment

KW - middle aged

KW - regression analysis

KW - risk assessment

KW - risk factor

KW - social welfare

KW - systolic blood pressure

KW - antihypertensive agent

KW - electronic sphygmomanometer

KW - Reported Outcome Measurement Information System Short Form v1.0 Depression 8b and Anxiety 8a

KW - Omron HEM-8102A

JF - Nutrients

JA - Nutrients

LA - English

VL - 13

IS - 11

SP - 4159

CY - Switzerland

PB - MDPI

SN - 2072-6643 (electronic)

SN - 2072-6643

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M2 - Omron HEM-8102A: Omron [Japan]

C1 - Omron HEM-8102A: Omron [Japan]

C2 - Omron [Japan]

UR - https://www.mdpi.com/2072-6643/13/11/4159/pdf

DO - https://dx.doi.org/10.3390/nu13114159

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2014569449

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.3390%2fnu13114159Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Liu&issn=2072-6643&title=Nutrients&atitle=Association+between+dietary+fiber+intake+and+incidence+of+depression+and+anxiety+in+patients+with+essential+hypertension&volume=13&issue=11&spage=4159&epage=&date=2021&doi=10.3390%2Fnu13114159&pmid=34836414&sid=OVID:embase

139.

TY - JOUR

DB - Embase

AN - 2014416881

ID - 34876198 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34876198]

T1 - Developments in pediatrics in 2020: choices in allergy, autoinflammatory disorders, critical care, endocrinology, genetics, infectious diseases, microbiota, neonatology, neurology, nutrition, ortopedics, respiratory tract illnesses and rheumatology

A1 - Caffarelli C.

A1 - Santamaria F.

A1 - Procaccianti M.

A1 - Piro E.

A1 - delle Cave V.

A1 - Borrelli M.

A1 - Santoro A.

A1 - Grassi F.

A1 - Bernasconi S.

A1 - Corsello G.

AO - Caffarelli, Carlo; ORCID: https://orcid.org/0000-0001-7710-6995

Y1 - 2021//

N2 - In this article, we describe the advances in the field of pediatrics that have been published in the Italian Journal of Pediatrics in 2020. We report progresses in understanding allergy, autoinflammatory disorders, critical care, endocrinology, genetics, infectious diseases, microbiota, neonatology, neurology, nutrition, orthopedics, respiratory tract illnesses, rheumatology in childhood.Copyright © 2021, The Author(s).

KW - \*allergy

KW - artificial ventilation

KW - atopic dermatitis

KW - \*autoinflammatory disease

KW - B12 deficiency

KW - childhood obesity

KW - clubfoot

KW - community acquired pneumonia

KW - coronavirus disease 2019

KW - cystic fibrosis

KW - cystitis

KW - diabetic ketoacidosis/co [Complication]

KW - echocardiography

KW - \*endocrinology

KW - enterocolitis

KW - familial Mediterranean fever

KW - \*genetics

KW - global health

KW - hip dysplasia

KW - human

KW - \*infection

KW - \*intensive care

KW - intestine flora

KW - juvenile rheumatoid arthritis

KW - kidney polycystic disease

KW - Listeria monocytogenes

KW - malnutrition

KW - metabolomics

KW - \*microflora

KW - \*neonatology

KW - neurodisability

KW - \*neurology

KW - newborn infection

KW - nonhuman

KW - \*nutrition

KW - obsessive compulsive disorder

KW - \*orthopedics

KW - \*pediatrics

KW - protein intake

KW - rare disease

KW - \*respiratory tract disease

KW - review

KW - \*rheumatology

KW - screen time

KW - septic shock

KW - syndrome CHARGE

KW - thrombophlebitis

KW - umbilical cord blood

KW - probiotic agent/pv [Special Situation for Pharmacovigilance]

KW - dacriocystitis

XT - probiotic agent / special situation for pharmacovigilance / pediatric patient

JF - Italian Journal of Pediatrics

JA - Ital. J. Pediatr.

LA - English

VL - 47

IS - 1

SP - 232

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1720-8424

SN - 1824-7288

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UR - http://www.ijponline.net/

DO - https://dx.doi.org/10.1186/s13052-021-01184-4

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2014416881

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1186%2fs13052-021-01184-4Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Caffarelli&issn=1720-8424&title=Italian+Journal+of+Pediatrics&atitle=Developments+in+pediatrics+in+2020%3A+choices+in+allergy%2C+autoinflammatory+disorders%2C+critical+care%2C+endocrinology%2C+genetics%2C+infectious+diseases%2C+microbiota%2C+neonatology%2C+neurology%2C+nutrition%2C+ortopedics%2C+respiratory+tract+illnesses+and+rheumatology&volume=47&issue=1&spage=232&epage=&date=2021&doi=10.1186%2Fs13052-021-01184-4&pmid=34876198&sid=OVID:embase

140.

TY - JOUR

DB - Embase

AN - 2018772184

ID - 33756517 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33756517]

T1 - Supportive care for new cancer therapies

A1 - Rapoport B.L.

A1 - Cooksley T.

A1 - Johnson D.B.

A1 - Anderson R.

Y1 - 2021//

N2 - Purpose of reviewThe past decade has witnessed unprecedented delivery to the clinical arena of a range of novel, innovative, and effective targeted anticancer therapies. These include immunotherapies, most prominently immune checkpoint inhibitors, as well as agents that target growth factors and cancer-related mutations. Many of these new cancer therapies are, however, associated with an array of toxicities, necessitating insight and vigilance on the part of attending physicians to achieve high-quality supportive care alongside toxicity management. In this review, we consider some of the key supportive care issues in toxicity management.Recent findingsAlthough both supportive care and targeted therapies have brought significant benefits to cancer care, the management of novel cancer therapy toxicities is nevertheless often complex. This is due in large part to the fact that target organs differ widely, particularly in the case of checkpoint inhibitors, with minor dermatological disorders being most common, while others, such as pneumonitis, are more severe and potentially life threatening. Accordingly, efficient management of these immune-related adverse events requires collaboration between multiple medical specialists.SummarySupportive care is a key component in the management of new cancer therapy toxicities and needs to be incorporated into treatment pathways.Copyright © 2021 Lippincott Williams and Wilkins. All rights reserved.

KW - abdominal pain/si [Side Effect]

KW - acute febrile neutrophilic dermatosis/si [Side Effect]

KW - adverse drug reaction

KW - analgesia

KW - antimicrobial therapy

KW - cancer immunotherapy

KW - \*cancer therapy

KW - checkpoint inhibitor pneumonitis/si [Side Effect]

KW - chimeric antigen receptor T-cell immunotherapy

KW - colitis/si [Side Effect]

KW - differential diagnosis

KW - disease association

KW - dizziness/si [Side Effect]

KW - DRESS syndrome/si [Side Effect]

KW - drug approval

KW - emergency care

KW - endocrine function

KW - fatigue/si [Side Effect]

KW - fulminant hepatic failure/si [Side Effect]

KW - gastritis/si [Side Effect]

KW - gastrointestinal symptom

KW - gastrointestinal toxicity

KW - gene mutation

KW - headache/si [Side Effect]

KW - hormone substitution

KW - human

KW - hypogonadism

KW - hypophysitis/si [Side Effect]

KW - hypothyroidism/si [Side Effect]

KW - immunological tolerance

KW - immunoreactivity

KW - immunosuppressive treatment

KW - intestine flora

KW - long term care

KW - lung toxicity

KW - managed care

KW - mental disease/si [Side Effect]

KW - molecularly targeted therapy

KW - mucosa inflammation/si [Side Effect]

KW - nutritional support

KW - oxygen therapy

KW - pneumonia/si [Side Effect]

KW - predictive value

KW - review

KW - skin toxicity/si [Side Effect]

KW - Stevens Johnson syndrome/si [Side Effect]

KW - \*supportive care need

KW - target organ

KW - toxic epidermal necrolysis/si [Side Effect]

KW - ulcer/si [Side Effect]

KW - antibiotic agent

KW - autoantibody/ec [Endogenous Compound]

KW - growth factor/ec [Endogenous Compound]

KW - \*immune checkpoint inhibitor/ae [Adverse Drug Reaction]

KW - \*immune checkpoint inhibitor/to [Drug Toxicity]

KW - infusion fluid

KW - interleukin 17/ec [Endogenous Compound]

KW - steroid

XT - abdominal pain / side effect / immune checkpoint inhibitor

XT - acute febrile neutrophilic dermatosis / side effect / immune checkpoint inhibitor

XT - checkpoint inhibitor pneumonitis / side effect / immune checkpoint inhibitor

XT - colitis / side effect / immune checkpoint inhibitor

XT - dizziness / side effect / immune checkpoint inhibitor

XT - DRESS syndrome / side effect / immune checkpoint inhibitor

XT - fatigue / side effect / immune checkpoint inhibitor

XT - fulminant hepatic failure / side effect / immune checkpoint inhibitor

XT - gastritis / side effect / immune checkpoint inhibitor

XT - headache / side effect / immune checkpoint inhibitor

XT - hypophysitis / side effect / immune checkpoint inhibitor

XT - hypothyroidism / side effect / immune checkpoint inhibitor

XT - mental disease / side effect / immune checkpoint inhibitor

XT - mucosa inflammation / side effect / immune checkpoint inhibitor

XT - pneumonia / side effect / immune checkpoint inhibitor

XT - skin toxicity / side effect / immune checkpoint inhibitor

XT - Stevens Johnson syndrome / side effect / immune checkpoint inhibitor

XT - toxic epidermal necrolysis / side effect / immune checkpoint inhibitor

XT - ulcer / side effect / immune checkpoint inhibitor

XT - immune checkpoint inhibitor / adverse drug reaction / abdominal pain

XT - immune checkpoint inhibitor / adverse drug reaction / acute febrile neutrophilic dermatosis

XT - immune checkpoint inhibitor / adverse drug reaction / checkpoint inhibitor pneumonitis

XT - immune checkpoint inhibitor / adverse drug reaction / colitis

XT - immune checkpoint inhibitor / adverse drug reaction / dizziness

XT - immune checkpoint inhibitor / adverse drug reaction / DRESS syndrome

XT - immune checkpoint inhibitor / adverse drug reaction / fatigue

XT - immune checkpoint inhibitor / adverse drug reaction / fulminant hepatic failure

XT - immune checkpoint inhibitor / adverse drug reaction / gastritis

XT - immune checkpoint inhibitor / adverse drug reaction / headache

XT - immune checkpoint inhibitor / adverse drug reaction / hypophysitis

XT - immune checkpoint inhibitor / adverse drug reaction / hypothyroidism

XT - immune checkpoint inhibitor / adverse drug reaction / mental disease

XT - immune checkpoint inhibitor / adverse drug reaction / mucosa inflammation

XT - immune checkpoint inhibitor / adverse drug reaction / pneumonia

XT - immune checkpoint inhibitor / adverse drug reaction / skin toxicity

XT - immune checkpoint inhibitor / adverse drug reaction / Stevens Johnson syndrome

XT - immune checkpoint inhibitor / adverse drug reaction / toxic epidermal necrolysis

XT - immune checkpoint inhibitor / adverse drug reaction / ulcer

JF - Current Opinion in Oncology

JA - Curr. Opin. Oncol.

LA - English

VL - 33

IS - 4

SP - 287

EP - 294

CY - United States

PB - Lippincott Williams and Wilkins

SN - 1040-8746

SN - 1531-703X

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UR - http://journals.lww.com/co-oncology/pages/default.aspx

DO - https://dx.doi.org/10.1097/CCO.0000000000000736

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2018772184

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1097%2fCCO.0000000000000736Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rapoport&issn=1040-8746&title=Current+Opinion+in+Oncology&atitle=Supportive+care+for+new+cancer+therapies&volume=33&issue=4&spage=287&epage=294&date=2021&doi=10.1097%2FCCO.0000000000000736&pmid=33756517&sid=OVID:embase

141.

TY - JOUR

DB - Embase

AN - 2016433917

ID - 34378954 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34378954]

T1 - Canine and Feline Parasitology: Analogies, Differences, and Relevance for Human Health

A1 - Morelli S.

A1 - Diakou A.

A1 - Di Cesare A.

A1 - Colombo M.

A1 - Traversa D.

Y1 - 2021//

N2 - Cats and dogs are treated as family members by most pet owners. Therefore, a high quality of veterinary care and preventive medicine is imperative for animal health and welfare and for the protection of humans from zoonotic pathogens. There is a general perception of cats being treated as "small dogs," especially in the field of clinical parasitology. As a result, several important differences between the two animal species are not taken into proper consideration and are often overlooked. Dogs and cats are profoundly different under evolutionary, biological, ethological, behavioral, and immunological standpoints. These differences impact clinical features, diagnosis, and control of canine and feline parasites and transmission risk for humans. This review outlines the most common parasitoses and vector-borne diseases of dogs and cats, with a focus on major convergences and divergences, and discusses parasites that have (i) evolved based on different preys for dogs and cats, (ii) adapted due to different immunological or behavioral animal profiles, and (iii) developed more similarities than differences in canine and feline infections and associated diseases. Differences, similarities, and peculiarities of canine and feline parasitology are herein reviewed in three macrosections: (i) carnivorism, vegetarianism, anatomy, genetics, and parasites, (ii) evolutionary adaptation of nematodes, including veterinary reconsideration and zoonotic importance, and (iii) behavior and immune system driving ectoparasites and transmitted diseases. Emphasis is given to provide further steps toward a more accurate evaluation of canine and feline parasitology in a changing world in terms of public health relevance and One Health approach.Copyright © 2021 American Society for Microbiology. All Rights Reserved.

KW - abdominal pain

KW - alopecia

KW - anemia

KW - Angiostrongylus

KW - animal health

KW - anorexia

KW - antigenicity

KW - arthralgia

KW - Ascaridoidea

KW - ataxia

KW - Babesia

KW - Bartonella clarridgeiae

KW - bartonellosis

KW - Blastocystis

KW - blepharitis

KW - blood transfusion

KW - bloody diarrhea

KW - body weight loss

KW - Borrelia burgdorferi

KW - bronchopneumonia

KW - \*Canis

KW - \*cat

KW - cat scratch disease

KW - central nervous system

KW - Chagas disease

KW - chorioretinitis

KW - cognitive defect

KW - conjunctivitis

KW - constipation

KW - cryptosporidiosis

KW - Cryptosporidium

KW - depression

KW - diarrhea

KW - Dipylidium caninum

KW - disease transmission

KW - dysbiosis

KW - dysphagia

KW - dyspnea

KW - Echinococcus granulosus

KW - echography

KW - ectoparasite

KW - Ehrlichia canis

KW - ehrlichiosis

KW - epigastric pain

KW - epistaxis

KW - epizootiology

KW - fatigue

KW - feces analysis

KW - fever

KW - genotype

KW - geographic distribution

KW - gestational age

KW - Giardia intestinalis

KW - glaucoma

KW - \*health

KW - heart failure

KW - helminth

KW - hemangiomatosis

KW - hyperesthesia

KW - hyperkalemia

KW - hyperkeratosis

KW - immune response

KW - immune system

KW - immunocompetence

KW - immunology

KW - immunosuppressive treatment

KW - innate immunity

KW - insomnia

KW - intestine flora

KW - intestine parasite

KW - Leishmania

KW - Leishmania chagasi

KW - Leishmania infantum

KW - Leishmania tropica

KW - leishmaniasis

KW - lung edema

KW - lymphadenopathy

KW - macrophage

KW - malaise

KW - meningoencephalitis

KW - murine typhus

KW - myalgia

KW - myocarditis

KW - nematode

KW - Neospora caninum

KW - neosporosis

KW - neuroborreliosis

KW - nonhuman

KW - omnivore

KW - osteomyelitis

KW - paraplegia

KW - parasite clearance

KW - \*parasitology

KW - perception

KW - peritonitis

KW - petechia

KW - piroplasmosis

KW - prevalence

KW - pustule

KW - rectum hemorrhage

KW - rectum prolapse

KW - review

KW - Rhipicephalus sanguineus

KW - Rickettsia rickettsii

KW - risk factor

KW - seizure

KW - serology

KW - seroprevalence

KW - sustained virologic response

KW - systematic review

KW - Th1 cell

KW - Th2 cell

KW - tick infestation

KW - Toxascaris leonina

KW - Toxocara

KW - Toxocara canis

KW - Toxocara cati

KW - toxocariasis

KW - Toxoplasma gondii

KW - toxoplasmosis

KW - Trichuris muris

KW - Trichuris suis

KW - Trichuris trichiura

KW - Trypanosoma cruzi

KW - urticaria

KW - uveitis

KW - vegetarian diet

KW - veterinary medicine

KW - visceral leishmaniasis

KW - vomiting

KW - zoonosis

KW - abortive agent

KW - acaricide

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - alkaline phosphatase/ec [Endogenous Compound]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - cyclosporine

KW - gamma interferon/ec [Endogenous Compound]

KW - immunoglobulin G/ec [Endogenous Compound]

JF - Clinical Microbiology Reviews

JA - Clin. Microbiol. Rev.

LA - English

VL - 34

IS - 4

SP - e00266-20

CY - United States

PB - American Society for Microbiology

SN - 0893-8512

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UR - https://journals.asm.org/doi/10.1128/CMR.00266-20

DO - https://dx.doi.org/10.1128/CMR.00266-20

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2016433917

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1128%2fCMR.00266-20Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Morelli&issn=0893-8512&title=Clinical+Microbiology+Reviews&atitle=Canine+and+Feline+Parasitology%3A+Analogies%2C+Differences%2C+and+Relevance+for+Human+Health&volume=34&issue=4&spage=e00266-20&epage=&date=2021&doi=10.1128%2FCMR.00266-20&pmid=34378954&sid=OVID:embase

142.

TY - JOUR

DB - Embase

AN - 2014976163

ID - 33687904 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33687904]

T1 - Dysregulation of sirt-1 signaling in multiple sclerosis and neuroimmune disorders: A systematic review of sirtuin activators as potential immunomodulators and their influences on other dysfunctions

A1 - Sharma N.

A1 - Shandilya A.

A1 - Kumar N.

A1 - Mehan S.

Y1 - 2021//

N2 - Immune dysregulation, neuronal inflammation, and oligodendrocyte degradation are key causes for autoimmune disorders like multiple sclerosis (MS) and various other immune dysregulated neurodegenerative complications responsible for CNS-mediated immune responses. Sirtuin (SIRT-1) is a nicotinamide adenosine dinucleotide (NAD)-dependent transcriptional protein that deacetylases and removes acetyl groups from its transcription factors like P53, FOXO, NF-Kb, PGC-1alpha. SIRT-1 mediates a wide range of physiological functions, including gene transcription, metabolism, neuronal apoptosis, and glucose production. SIRT-1 dysregulation targets transcription factors, and other molecular alterations such as gene expression modification influence neuronal plasticity, inhibit Th17 cells, and interleukin-1beta can aggravate brain diseases. Preclinical and clinical findings show that the upregulation of SIRT-1 reduces autoimmunity, neurodegeneration, and neuroexcitation. Even though drugs are being developed for symptomatic therapies in clinical trials, there are particular pharmacological implications for improving post-operative conditions in neurodegenerative patients where intensive care is required. Understanding the SIRT-1 signaling and identifying immune-mediated neuron deterioration can detect major therapeutic interventions that could prevent neuro complications. Thus, in the current review, we have addressed the manifestations of disease by the downregulation of SIRT-1 that could potentially cause MS and other neurodegenerative disorders and provided data on existing available and effective drug therapies and disease management strategies.Copyright © 2021 Bentham Science Publishers.

KW - aging

KW - Alzheimer disease

KW - AMPK signaling

KW - amygdala

KW - antioxidant activity

KW - apoptosis

KW - astrocyte

KW - autoimmune disease

KW - autoimmunity

KW - blood brain barrier

KW - brain ischemia

KW - caloric restriction

KW - carcinogenesis

KW - cardiovascular disease

KW - cell cycle arrest

KW - cell proliferation

KW - central nervous system

KW - cerebellar ataxia

KW - cognitive defect

KW - depression

KW - deterioration

KW - DNA damage

KW - down regulation

KW - epigenetics

KW - experimental autoimmune encephalomyelitis

KW - familial hypercholesterolemia

KW - histone acetylation

KW - human

KW - Huntington chorea

KW - hyperalgesia

KW - hyperglycemia

KW - \*immune dysregulation

KW - immune response

KW - induced pluripotent stem cell

KW - inflammation

KW - insulin sensitivity

KW - intensive care

KW - intestine flora

KW - ischemic preconditioning

KW - Lentivirus infection

KW - lipid storage

KW - lipolysis

KW - MAPK signaling

KW - mental disease

KW - metabolic regulation

KW - mitochondrial biogenesis

KW - mitochondrial respiration

KW - \*multiple sclerosis

KW - myelination

KW - nerve cell differentiation

KW - nerve cell plasticity

KW - nerve degeneration

KW - nervous system development

KW - neuroapoptosis

KW - neuropathic pain

KW - neurophysiology

KW - neuroprotection

KW - neurotoxicity

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - oligodendrocyte precursor cell

KW - oxidative stress

KW - protein expression

KW - protein misfolding

KW - review

KW - risk factor

KW - RNA metabolism

KW - seizure

KW - signal transduction

KW - structure activity relation

KW - systematic review

KW - transcription initiation

KW - tumor growth

KW - tumor suppressor gene

KW - ubiquitination

KW - upregulation

KW - vitamin D deficiency

KW - Western blotting

KW - Wnt signaling

KW - alpha interferon

KW - antisense oligonucleotide

KW - baclofen

KW - beta interferon

KW - beta1 interferon

KW - brain derived neurotrophic factor

KW - cladribine

KW - dimethyl fumarate

KW - dinucleotide

KW - donepezil

KW - fingolimod

KW - glatiramer

KW - glucose

KW - HLA DRB1 antigen

KW - immunoglobulin enhancer binding protein

KW - \*immunomodulating agent

KW - interleukin 16

KW - interleukin 17

KW - interleukin 1beta

KW - memantine

KW - microRNA

KW - mitoxantrone

KW - natalizumab

KW - ocrelizumab

KW - peroxisome proliferator activated receptor gamma coactivator 1alpha

KW - protein p53

KW - rituximab

KW - simvastatin

KW - \*sirtuin

KW - sirtuin 1

KW - tau protein

KW - teriflunomide

KW - vitamin D

JF - Endocrine, Metabolic and Immune Disorders - Drug Targets

JA - Endocr. Metab. Immune Disord. Drug Targets

LA - English

VL - 21

IS - 10

SP - 1845

EP - 1868

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1871-5303

SN - 2212-3873

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UR - https://www.eurekaselect.com/node/192153

DO - https://dx.doi.org/10.2174/1871530321666210309112234

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2014976163

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.2174%2f1871530321666210309112234Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sharma&issn=1871-5303&title=Endocrine%2C+Metabolic+and+Immune+Disorders+-+Drug+Targets&atitle=Dysregulation+of+sirt-1+signaling+in+multiple+sclerosis+and+neuroimmune+disorders%3A+A+systematic+review+of+sirtuin+activators+as+potential+immunomodulators+and+their+influences+on+other+dysfunctions&volume=21&issue=10&spage=1845&epage=1868&date=2021&doi=10.2174%2F1871530321666210309112234&pmid=33687904&sid=OVID:embase

143.

TY - JOUR

DB - Embase

AN - 2014345359

ID - 34844479 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34844479]

T1 - The Use of Prebiotic and Probiotic Interventions for Treating Gastrointestinal and Psychosocial Health Symptoms in Cancer Patients and Survivors: A Systematic Review

A1 - Deleemans J.M.

A1 - Gajtani Z.

A1 - Baydoun M.

A1 - Reimer R.A.

A1 - Piedalue K.-A.

A1 - Carlson L.E.

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AO - Baydoun, Mohamad; ORCID: https://orcid.org/0000-0001-5194-1730

AO - Reimer, Raylene A.; ORCID: https://orcid.org/0000-0001-5088-7947

Y1 - 2021//

N2 - Background: Cancer treatments can cause significant gastrointestinal (GI) health issues, and negatively affect patient's psychosocial health and quality of life (QOL). Novel, integrative strategies using prebiotics and probiotics have been explored for treating adverse cancer treatment-related side effects. We evaluated the current literature for interventions using prebiotics or probiotics specifically to treat GI and psychosocial health issues in cancer patients and survivors. Method(s): Five databases (PubMed, MEDLINE (Ovid), CINHAL, PsychINFO, Web of Science) were searched for studies with prebiotic or probiotic interventions where GI and/or psychosocial health outcomes were measured in adult cancer patients and survivors, and published before September 12th 2021. Result(s): Twelve studies (N = 974 participants) meeting the inclusion criteria were identified (randomized controlled trials [n = 10], single-group pre-post studies [n = 2]). Ten studies were conducted with patients on active cancer treatment, and 2 studies treated patients after anti-cancer therapies. Three studies used prebiotics, 7 studies used probiotics, and 2 studies used a combination therapy. The most commonly used probiotic strains were from the Lactobacillus genus. There was minimal evidence for prebiotics to improve GI or psychosocial health. Probiotics were associated with significant improvements in abdominal pain (n = 2), gas/bloating (n = 2), and especially diarrhea (n = 5), and with improvements in anxiety (n = 1), depression (n = 1), fatigue (n = 1), and QOL (n = 2). Conclusion(s): Studies specifically examining effects of prebiotics and probiotics on GI and psychosocial health outcomes are scarce. Probiotic intervention may improve some GI symptoms in cancer patients, and QOL in survivors. Controlled trials that consistently include GI and psychosocial health outcomes are needed.Copyright © The Author(s) 2021.

KW - abdominal cancer

KW - abdominal discomfort

KW - abdominal pain/dt [Drug Therapy]

KW - adult

KW - anxiety disorder

KW - Bacillus cereus

KW - Bacillus subtilis

KW - Bifidobacterium

KW - Bifidobacterium animalis

KW - Bifidobacterium longum subsp. infantis

KW - bloating

KW - cancer chemotherapy

KW - cancer patient

KW - cancer radiotherapy

KW - cancer recurrence

KW - \*cancer survival

KW - cancer survivor

KW - cancer therapy

KW - chemoradiotherapy

KW - clinical evaluation

KW - cognitive defect

KW - colon cancer/rt [Radiotherapy]

KW - colon cancer/su [Surgery]

KW - colon resection

KW - colony forming unit

KW - colorectal cancer/rt [Radiotherapy]

KW - Common Terminology Criteria for Adverse Events

KW - constipation/dt [Drug Therapy]

KW - data extraction

KW - defecation

KW - depression

KW - diarrhea/dt [Drug Therapy]

KW - digestive system disease assessment

KW - dyspepsia

KW - emotional disorder/dt [Drug Therapy]

KW - emotional well-being

KW - endometrium cancer/pc [Prevention]

KW - enteric feeding

KW - Enterococcus faecalis

KW - European Organization for Research and Treatment of Cancer Quality of Life Questionnaire Core 30

KW - fatigue

KW - fear

KW - feces

KW - female

KW - Functional Assessment of Cancer Therapy

KW - Functional Assessment of Cancer Therapy Colorectal

KW - Functional Assessment of Cancer Therapy Fatigue

KW - Functional Assessment of Cancer Therapy General

KW - gastroesophageal reflux

KW - Gastrointestinal Quality of Life Index

KW - gastrointestinal reflux

KW - \*gastrointestinal symptom/dt [Drug Therapy]

KW - head and neck cancer

KW - heartburn

KW - human

KW - ileostomy

KW - incidence

KW - indigestion

KW - intestine flora

KW - intestine function

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - lung cancer

KW - lymphoma

KW - male

KW - mental health

KW - middle aged

KW - mood change

KW - nausea

KW - neutropenia

KW - outcome assessment

KW - pain severity

KW - Patient Health Questionnaire 9

KW - pelvis

KW - prostate cancer/pc [Prevention]

KW - \*psychosocial disorder/dt [Drug Therapy]

KW - quality control

KW - quality of life

KW - quality of life assessment

KW - radiation enteropathy

KW - randomized controlled trial (topic)

KW - rectum anterior resection

KW - rectum cancer/pc [Prevention]

KW - rectum cancer/su [Surgery]

KW - rectum resection

KW - review

KW - Short Form 36

KW - social interaction

KW - stomach lymphoma

KW - stomach pain

KW - stomatitis

KW - Streptococcus thermophilus

KW - systematic review

KW - treatment duration

KW - uterine cervix cancer/rt [Radiotherapy]

KW - vomiting/dt [Drug Therapy]

KW - World Health Organization

KW - fish oil

KW - fructose oligosaccharide

KW - glutamine

KW - guar gum

KW - inulin

KW - osmolite

KW - placebo

KW - \*prebiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/cm [Drug Comparison]

KW - \*probiotic agent/dt [Drug Therapy]

KW - synbiotic agent/dt [Drug Therapy]

KW - unclassified drug

KW - Bifidobacterium tetragenous

KW - Bowel Function Index

KW - Bristol Stool Form Scale

KW - Common Toxicity Criteria of the NCI of Canada Scale

KW - Medical Outcome Study Short 36 Item Health Survey

KW - Memorial Sloan Kettering Cancer Centre

KW - National Health Organization Scale

KW - National Institute of Cancerology of the United States Scale

KW - Rome Chronic Functional Constipation Scale

KW - Wexner Constipation Scale

KW - Wexner Incontinence Scale for Functional Outcome

KW - bifilact/cm [Drug Comparison]

XT - abdominal pain / drug therapy / probiotic agent

XT - constipation / drug therapy / probiotic agent

XT - diarrhea / drug therapy / probiotic agent

XT - emotional disorder / drug therapy / probiotic agent

XT - gastrointestinal symptom / drug therapy / prebiotic agent

XT - gastrointestinal symptom / drug therapy / probiotic agent

XT - psychosocial disorder / drug therapy / prebiotic agent

XT - psychosocial disorder / drug therapy / probiotic agent

XT - vomiting / drug therapy / synbiotic agent

XT - bifilact / drug comparison / placebo

XT - prebiotic agent / drug therapy / gastrointestinal symptom

XT - prebiotic agent / drug therapy / psychosocial disorder

XT - probiotic agent / drug comparison / placebo

XT - probiotic agent / drug therapy / abdominal pain

XT - probiotic agent / drug therapy / constipation

XT - probiotic agent / drug therapy / diarrhea

XT - probiotic agent / drug therapy / emotional disorder

XT - probiotic agent / drug therapy / gastrointestinal symptom

XT - probiotic agent / drug therapy / psychosocial disorder

XT - synbiotic agent / drug therapy / vomiting

JF - Integrative Cancer Therapies

JA - Integr. Cancer Ther.

LA - English

VL - 20

SP -

CY - United States

PB - SAGE Publications Inc.

SN - 1534-7354

SN - 1552-695X

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UR - https://journals.sagepub.com/home/ICT

DO - https://dx.doi.org/10.1177/15347354211061733

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2014345359

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1177%2f15347354211061733Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Deleemans&issn=1534-7354&title=Integrative+Cancer+Therapies&atitle=The+Use+of+Prebiotic+and+Probiotic+Interventions+for+Treating+Gastrointestinal+and+Psychosocial+Health+Symptoms+in+Cancer+Patients+and+Survivors%3A+A+Systematic+Review&volume=20&issue=&spage=1534735421&epage=&date=2021&doi=10.1177%2F15347354211061733&pmid=34844479&sid=OVID:embase

144.

TY - JOUR

DB - Embase

AN - 2014118008

ID - 34416934 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34416934]

T1 - Recurrent Urinary Tract Infections: Diagnosis, Treatment, and Prevention

A1 - Peck J.

A1 - Shepherd J.P.

Y1 - 2021//

KW - Actinobacteria

KW - antibiotic prophylaxis

KW - antibiotic resistance

KW - antimicrobial therapy

KW - backache

KW - Bacteroides

KW - bladder epithelium

KW - body mass

KW - breast cancer

KW - colony forming unit

KW - computer assisted tomography

KW - cranberry juice

KW - cystitis

KW - deep vein thrombosis

KW - diabetes mellitus

KW - dyspareunia

KW - dysuria

KW - Escherichia coli

KW - fever

KW - Firmicutes

KW - Fusobacteria

KW - gastrointestinal tract

KW - glycemic control

KW - hematuria

KW - human

KW - hypertransaminasemia

KW - Klebsiella pneumoniae

KW - Lactobacillus

KW - Lactobacillus crispatus

KW - liver toxicity

KW - lung embolism

KW - lung toxicity

KW - menopause

KW - menstruation

KW - mental health

KW - microbiome

KW - microscopy

KW - nausea and vomiting

KW - neurogenic bladder

KW - pathophysiology

KW - physical examination

KW - prevalence

KW - prolapse

KW - Proteobacteria

KW - pyelonephritis

KW - pyuria

KW - quality of life

KW - review

KW - risk factor

KW - sensitivity and specificity

KW - sexual intercourse

KW - social status

KW - systematic review

KW - urinalysis

KW - \*urinary tract infection

KW - urine culture

KW - urosepsis

KW - vagina bleeding

KW - vaginitis

KW - alpha hemolysin

KW - amoxicillin

KW - beta lactam

KW - cotrimoxazole

KW - estrogen/ec [Endogenous Compound]

KW - fosfomycin

KW - mannose

KW - methenamine hippurate

KW - nitrofurantoin

KW - nonsteroid antiinflammatory agent

KW - RNA 16S/ec [Endogenous Compound]

KW - siderophore

KW - spermicidal agent

KW - condom

KW - culture medium

KW - urine test strip

JF - Obstetrics and Gynecology Clinics of North America

JA - Obstet. Gynecol. Clin. North Am.

LA - English

VL - 48

IS - 3

SP - 501

EP - 513

CY - United States

PB - W.B. Saunders

SN - 0889-8545

SN - 1558-0474

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UR - http://www.elsevierhealth.com

DO - https://dx.doi.org/10.1016/j.ogc.2021.05.005

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2014118008

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1016%2fj.ogc.2021.05.005Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Peck&issn=0889-8545&title=Obstetrics+and+Gynecology+Clinics+of+North+America&atitle=Recurrent+Urinary+Tract+Infections%3A+Diagnosis%2C+Treatment%2C+and+Prevention&volume=48&issue=3&spage=501&epage=513&date=2021&doi=10.1016%2Fj.ogc.2021.05.005&pmid=34416934&sid=OVID:embase

145.

TY - JOUR

DB - Embase

AN - 2012865032

ID - 34164877 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34164877]

T1 - Contemporary Concise Review 2020: Asthma

A1 - Wang G.

A1 - McDonald V.M.

AO - Wang, Gang; ORCID: https://orcid.org/0000-0002-5048-6606

AO - McDonald, Vanessa M.; ORCID: https://orcid.org/0000-0001-9890-3408

Y1 - 2021//

N2 - Bushfires and coronavirus 2019 (COVID-19) were dominate features of 2020. Patients with asthma were significantly affected by the 2019/2020 bushfire season with an increased burden compared to the general population. Patients with controlled asthma do not appear to be at higher risk of severe COVID-19 infection or death than the general population. Personalized medicine is proposed as the next era for asthma management, with treatable traits as a strategy to implement personalized medicine into practice. Patient engagement in personalized medicine strategies is important and needs to be further explored. Oral corticosteroid (OCS) use in asthma is common and contributes a major burden. OCS stewardship is recommended. Biologic therapies reduce exacerbations of severe asthma and biomarkers can be used to predict treatment responders. Epithelia at mucosal and cutaneous surfaces are components in asthma pathogenesis, through airway immunity and inflammation. Dysregulation of resident microbial communities in the lung, gut and skin microbiome is relevant to asthma pathogenesis, but there are still many unknowns in this field.Copyright © 2021 Asian Pacific Society of Respirology.

KW - adaptive immunity

KW - adrenal insufficiency

KW - air pollution

KW - airway epithelium cell

KW - airway obstruction

KW - Alternaria

KW - anxiety

KW - Aspergillus

KW - Asthma Control Questionnaire

KW - bronchiectasis

KW - Candida

KW - cell hyperplasia

KW - cesarean section

KW - chronic obstructive lung disease

KW - Clostridium perfringens

KW - cognitive behavioral therapy

KW - continuous positive airway pressure

KW - coronavirus disease 2019

KW - depression

KW - disease exacerbation

KW - dysbiosis

KW - emergency ward

KW - eosinophil

KW - eosinophilia

KW - Faecalibacterium

KW - Faecalibacterium prausnitzii

KW - fractional exhaled nitric oxide

KW - gastrointestinal tract

KW - goblet cell

KW - hospitalization

KW - human

KW - immune response

KW - immunological tolerance

KW - inflammation

KW - intestine flora

KW - lung clearance

KW - lung microbiota

KW - macrophage

KW - metabolic syndrome X

KW - metagenomics

KW - microbial community

KW - microbiome

KW - microflora

KW - nonhuman

KW - osteoporosis

KW - pandemic

KW - particulate matter

KW - patient care

KW - patient engagement

KW - personalized medicine

KW - phenotype

KW - physical activity

KW - Pseudomonas

KW - quality of life

KW - questionnaire

KW - randomized controlled trial (topic)

KW - respiratory tract inflammation

KW - review

KW - Roseburia

KW - Ruminococcus

KW - \*severe asthma/di [Diagnosis]

KW - \*severe asthma/dm [Disease Management]

KW - \*severe asthma/dt [Drug Therapy]

KW - \*severe asthma/et [Etiology]

KW - \*severe asthma/th [Therapy]

KW - skin surface

KW - smoking cessation

KW - Sphingomonas

KW - Wegener granulomatosis

KW - wildfire

KW - allergen/ec [Endogenous Compound]

KW - azithromycin

KW - benralizumab

KW - biological marker

KW - butyryl coenzyme A dehydrogenase/ec [Endogenous Compound]

KW - corticosteroid/dt [Drug Therapy]

KW - corticosteroid/ih [Inhalational Drug Administration]

KW - immunoglobulin E/ec [Endogenous Compound]

KW - interleukin 13/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 31/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 5/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 7/ec [Endogenous Compound]

KW - interleukin 9/ec [Endogenous Compound]

KW - macrolide

KW - mepolizumab

KW - nitric oxide

KW - omalizumab

KW - ovalbumin

KW - prednisolone

KW - prednisone

KW - reslizumab

KW - thymic stromal lymphopoietin/ec [Endogenous Compound]

KW - transcription factor RUNX2/ec [Endogenous Compound]

XT - severe asthma / drug therapy / corticosteroid

XT - corticosteroid / drug therapy / severe asthma

JF - Respirology

JA - Respirology

LA - English

VL - 26

IS - 8

SP - 804

EP - 811

CY - Australia

PB - John Wiley and Sons Inc

SN - 1323-7799

SN - 1440-1843

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1440-1843

DO - https://dx.doi.org/10.1111/resp.14099

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed23&NEWS=N&AN=2012865032

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed23&DO=10.1111%2fresp.14099Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wang&issn=1323-7799&title=Respirology&atitle=Contemporary+Concise+Review+2020%3A+Asthma&volume=26&issue=8&spage=804&epage=811&date=2021&doi=10.1111%2Fresp.14099&pmid=34164877&sid=OVID:embase

146.

TY - JOUR

DB - Embase

AN - 636263022

ID - 34691057 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34691057]

T1 - Crosstalk of Microorganisms and Immune Responses in Autoimmune Neuroinflammation: A Focus on Regulatory T Cells

A1 - Schroeter C.B.

A1 - Huntemann N.

A1 - Bock S.

A1 - Nelke C.

A1 - Kremer D.

A1 - Pfeffer K.

A1 - Meuth S.G.

A1 - Ruck T.

Y1 - 2021//

N2 - Regulatory T cells (Tregs) are the major determinant of peripheral immune tolerance. Many Treg subsets have been described, however thymus-derived and peripherally induced Tregs remain the most important subpopulations. In multiple sclerosis, a prototypical autoimmune disorder of the central nervous system, Treg dysfunction is a pathogenic hallmark. In contrast, induction of Treg proliferation and enhancement of their function are central immune evasion mechanisms of infectious pathogens. In accordance, Treg expansion is compartmentalized to tissues with high viral replication and prolonged in chronic infections. In friend retrovirus infection, Treg expansion is mainly based on excessive interleukin-2 production by infected effector T cells. Moreover, pathogens seem also to enhance Treg functions as shown in human immunodeficiency virus infection, where Tregs express higher levels of effector molecules such as cytotoxic T-lymphocyte-associated protein 4, CD39 and cAMP and show increased suppressive capacity. Thus, insights into the molecular mechanisms by which intracellular pathogens alter Treg functions might aid to find new therapeutic approaches to target central nervous system autoimmunity. In this review, we summarize the current knowledge of the role of pathogens for Treg function in the context of autoimmune neuroinflammation. We discuss the mechanistic implications for future therapies and provide an outlook for new research directions.© Copyright © 2021 Schroeter, Huntemann, Bock, Nelke, Kremer, Pfeffer, Meuth and Ruck.

KW - acidosis

KW - adaptive immunity

KW - adipose tissue

KW - Akkermansia muciniphila

KW - antibiotic therapy

KW - antigen presenting cell

KW - antiretroviral therapy

KW - apoptosis

KW - aspergillosis

KW - atherosclerosis

KW - \*autoimmune disease

KW - autoimmunity

KW - B lymphocyte

KW - Bifidobacterium

KW - blood analysis

KW - body mass

KW - brain atrophy

KW - Candida albicans

KW - CD4+ CD25+ T lymphocyte

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - cell cycle arrest

KW - cell proliferation

KW - central nervous system

KW - cerebrospinal fluid

KW - Chlamydia trachomatis

KW - chlamydial pneumonia

KW - chronic infection

KW - citric acid cycle

KW - colonic lamina propria

KW - coronavirus disease 2019

KW - Crohn disease

KW - cytokine production

KW - cytokine release

KW - cytolysis

KW - Cytomegalovirus

KW - dendritic cell

KW - dermatomyositis

KW - diabetes mellitus

KW - digestive system inflammation

KW - disease exacerbation

KW - disease severity

KW - dysbiosis

KW - encephalomyelitis

KW - epigenetic modification

KW - Epstein Barr virus

KW - fatty acid oxidation

KW - fatty acid synthesis

KW - follow up

KW - gene expression

KW - glucose metabolism

KW - glycolysis

KW - graft survival

KW - graft versus host reaction

KW - Helicobacter hepaticus

KW - Helicobacter infection

KW - Helicobacter pylori

KW - helminthiasis

KW - Hepatitis B virus

KW - Hepatitis C virus

KW - herpes simplex

KW - Human herpesvirus 6

KW - Human immunodeficiency virus infection

KW - Human T-lymphotropic virus 1

KW - immune evasion

KW - \*immune response

KW - immune system

KW - immunocompetent cell

KW - immunogenicity

KW - immunological tolerance

KW - immunoreceptor tyrosine based inhibition motif

KW - immunosuppressive treatment

KW - immunotherapy

KW - inflammatory bowel disease

KW - Influenza virus

KW - innate immunity

KW - Japanese encephalitis virus

KW - Lactobacillus

KW - Listeria monocytogenes

KW - liver disease

KW - lung lesion

KW - lymph node

KW - lymphocyte

KW - macrophage

KW - major histocompatibility complex

KW - mental disease

KW - microbiome

KW - microenvironment

KW - \*microorganism

KW - monocyte

KW - mortality

KW - multiple sclerosis

KW - Mycobacterium tuberculosis

KW - mycosis

KW - myositis

KW - natural killer cell

KW - \*nervous system inflammation

KW - neutrophil

KW - nonhuman

KW - oligodendrocyte precursor cell

KW - oligodendroglia

KW - parasympathetic nerve

KW - pathogen clearance

KW - pathophysiology

KW - peripheral blood mononuclear cell

KW - phenotype

KW - Pneumocystis carinii

KW - polymyositis

KW - protein expression

KW - \*regulatory T lymphocyte

KW - relapse

KW - respiratory syncytial virus infection

KW - retrovirus infection

KW - review

KW - rheumatoid arthritis

KW - Schistosoma

KW - sepsis

KW - skeletal muscle

KW - steatohepatitis

KW - Streptococcus

KW - systematic review

KW - Th1 cell

KW - Th17 cell

KW - Th2 cell

KW - TLR signaling

KW - Toxoplasma gondii

KW - toxoplasmosis

KW - tumor growth

KW - tumor microenvironment

KW - ulcerative colitis

KW - upregulation

KW - vaccination

KW - Vaccinia virus

KW - vascular disease

KW - virus replication

KW - white matter lesion

KW - 5' nucleotidase/ec [Endogenous Compound]

KW - adenosine triphosphate/ec [Endogenous Compound]

KW - alemtuzumab

KW - azithromycin/ec [Endogenous Compound]

KW - B7 antigen/ec [Endogenous Compound]

KW - beta7 integrin/ec [Endogenous Compound]

KW - butyric acid/ec [Endogenous Compound]

KW - cancer growth factor/ec [Endogenous Compound]

KW - CD103 antigen/ec [Endogenous Compound]

KW - CD28 antigen/ec [Endogenous Compound]

KW - CD39 antigen/ec [Endogenous Compound]

KW - chemokine receptor CCR5/ec [Endogenous Compound]

KW - cryopyrin/ec [Endogenous Compound]

KW - crystallin/ec [Endogenous Compound]

KW - cyclic AMP/ec [Endogenous Compound]

KW - cyclic AMP dependent protein kinase/ec [Endogenous Compound]

KW - cytotoxic T lymphocyte antigen 4/ec [Endogenous Compound]

KW - Epstein Barr virus antigen/ec [Endogenous Compound]

KW - G protein coupled receptor/ec [Endogenous Compound]

KW - gadolinium

KW - gamma interferon/ec [Endogenous Compound]

KW - glucokinase/ec [Endogenous Compound]

KW - glucose transporter 1/ec [Endogenous Compound]

KW - granzyme/ec [Endogenous Compound]

KW - HLA DPB1 antigen/ec [Endogenous Compound]

KW - HLA DQA1 antigen/ec [Endogenous Compound]

KW - HLA DR antigen/ec [Endogenous Compound]

KW - hypoxia inducible factor 1alpha/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - immunoglobulin G4/ec [Endogenous Compound]

KW - indoleamine 2,3 dioxygenase

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 12/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - interleukin 21/ec [Endogenous Compound]

KW - interleukin 22/ec [Endogenous Compound]

KW - interleukin 23/ec [Endogenous Compound]

KW - interleukin 35/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - latent membrane protein 1/ec [Endogenous Compound]

KW - long chain fatty acid/ec [Endogenous Compound]

KW - major histocompatibility antigen class 2/ec [Endogenous Compound]

KW - mammalian target of rapamycin/ec [Endogenous Compound]

KW - matrix metalloproteinase/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - myelin basic protein/ec [Endogenous Compound]

KW - perforin/ec [Endogenous Compound]

KW - phosphatidylinositol 3,4,5 trisphosphate 3 phosphatase/ec [Endogenous Compound]

KW - probiotic agent

KW - programmed death 1 ligand 1/ec [Endogenous Compound]

KW - raltegravir

KW - retinoic acid receptor gamma/ec [Endogenous Compound]

KW - rifampicin

KW - short chain fatty acid/ec [Endogenous Compound]

KW - somatomedin C receptor/ec [Endogenous Compound]

KW - STAT3 protein/ec [Endogenous Compound]

KW - STAT5 protein/ec [Endogenous Compound]

KW - T lymphocyte receptor/ec [Endogenous Compound]

KW - temelimab

KW - toll like receptor/ec [Endogenous Compound]

KW - toll like receptor 2/ec [Endogenous Compound]

KW - toll like receptor 9/ec [Endogenous Compound]

KW - transcription factor FOXP3/ec [Endogenous Compound]

KW - transcription factor GATA/ec [Endogenous Compound]

KW - transcription factor NFAT/ec [Endogenous Compound]

KW - tryptophan/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - tumor necrosis factor receptor 2/ec [Endogenous Compound]

KW - ubiquinol cytochrome c reductase/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

KW - viral protein/ec [Endogenous Compound]

KW - virus envelope protein/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 12

SP - 747143

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2021.747143

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=636263022

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3389%2ffimmu.2021.747143Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Schroeter&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Crosstalk+of+Microorganisms+and+Immune+Responses+in+Autoimmune+Neuroinflammation%3A+A+Focus+on+Regulatory+T+Cells&volume=12&issue=&spage=747143&epage=&date=2021&doi=10.3389%2Ffimmu.2021.747143&pmid=34691057&sid=OVID:embase

147.

TY - JOUR

DB - Embase

AN - 2013840684

ID - 34648081 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34648081]

T1 - Biological and Psychological Factors Determining Neuropsychiatric Outcomes in COVID-19

A1 - Tizenberg B.N.

A1 - Brenner L.A.

A1 - Lowry C.A.

A1 - Okusaga O.O.

A1 - Benavides D.R.

A1 - Hoisington A.J.

A1 - Benros M.E.

A1 - Stiller J.W.

A1 - Kessler R.C.

A1 - Postolache T.T.

AO - Postolache, Teodor T.; ORCID: https://orcid.org/0000-0001-6056-4244

Y1 - 2021//

N2 - Purpose of Review: We present biological and psychological factors implicated in psychiatric manifestations of SARS-CoV-2, as well as its neuroinvasive capability and immune pathophysiology. Recent Findings: Preexisting mental illness leads to worse clinical outcomes in COVID-19. The presence of the virus was reported in the cerebrospinal fluid (CSF) and brain tissue post-mortem. Most common psychiatric manifestations include delirium, mood disorders, anxiety disorders, and posttraumatic stress disorder. "Long-COVID" non-syndromal presentations include "brain-fogginess," autonomic instability, fatigue, and insomnia. Summary: SARS-CoV-2 infection can trigger prior vulnerabilities based on the priming of microglia and other cells, induced or perpetuated by aging and mental and physical illnesses. COVID-19 could further induce priming of neuroimmunological substrates leading to exacerbated immune response and autoimmunity targeting structures in the central nervous system (CNS), in response to minor immune activating environmental exposures, including stress, minor infections, allergens, pollutants, and traumatic brain injury.Copyright © 2021, This is a U.S. government work and not under copyright protection in the U.S.; foreign copyright protection may apply.

KW - aging

KW - allergic reaction

KW - anxiety disorder

KW - autoimmunity

KW - autonomic dysfunction

KW - autopsy

KW - blood clotting disorder

KW - brain tissue

KW - central nervous system

KW - cerebrospinal fluid analysis

KW - clinical outcome

KW - clouding of consciousness

KW - cognitive behavioral therapy

KW - \*coronavirus disease 2019/dt [Drug Therapy]

KW - \*coronavirus disease 2019/et [Etiology]

KW - delirium

KW - disease course

KW - dysbiosis

KW - endotheliitis

KW - environmental exposure

KW - fatigue

KW - gastrointestinal symptom

KW - hematological parameters

KW - human

KW - immune response

KW - immunobiology

KW - infection sensitivity

KW - inflammaging

KW - insomnia

KW - \*mental disease/th [Therapy]

KW - microglia

KW - Middle East respiratory syndrome

KW - mood disorder

KW - neuroimmunology

KW - obesity

KW - peripheral neuropathy

KW - physical disease

KW - physiological stress

KW - pollutant

KW - posttraumatic stress disorder

KW - \*psychological aspect

KW - review

KW - severe acute respiratory syndrome

KW - Severe acute respiratory syndrome coronavirus 2

KW - sex difference

KW - traumatic brain injury

KW - virus entry

KW - virus immunity

KW - angiotensin converting enzyme 2/ec [Endogenous Compound]

KW - immunoglobulin M/dt [Drug Therapy]

XT - coronavirus disease 2019 / drug therapy / immunoglobulin M

XT - immunoglobulin M / drug therapy / coronavirus disease 2019

JF - Current Psychiatry Reports

JA - Curr. Psychiatry Rep.

LA - English

VL - 23

IS - 10

SP - 68

CY - United States

PB - Springer

SN - 1523-3812

SN - 1535-1645

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UR - http://www.springerlink.com/content/1523-3812/

DO - https://dx.doi.org/10.1007/s11920-021-01275-3

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2013840684

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1007%2fs11920-021-01275-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tizenberg&issn=1523-3812&title=Current+Psychiatry+Reports&atitle=Biological+and+Psychological+Factors+Determining+Neuropsychiatric+Outcomes+in+COVID-19&volume=23&issue=10&spage=68&epage=&date=2021&doi=10.1007%2Fs11920-021-01275-3&pmid=34648081&sid=OVID:embase

148.

TY - JOUR

DB - Embase

AN - 635485071

ID - 34276671 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34276671]

T1 - Unraveling the Mystery Surrounding Post-Acute Sequelae of COVID-19

A1 - Ramakrishnan R.K.

A1 - Kashour T.

A1 - Hamid Q.

A1 - Halwani R.

A1 - Tleyjeh I.M.

Y1 - 2021//

N2 - More than one year since its emergence, corona virus disease 2019 (COVID-19) is still looming large with a paucity of treatment options. To add to this burden, a sizeable subset of patients who have recovered from acute COVID-19 infection have reported lingering symptoms, leading to significant disability and impairment of their daily life activities. These patients are considered to suffer from what has been termed as "chronic" or "long" COVID-19 or a form of post-acute sequelae of COVID-19, and patients experiencing this syndrome have been termed COVID-19 long-haulers. Despite recovery from infection, the persistence of atypical chronic symptoms, including extreme fatigue, shortness of breath, joint pains, brain fogs, anxiety and depression, that could last for months implies an underlying disease pathology that persist beyond the acute presentation of the disease. As opposed to the direct effects of the virus itself, the immune response to severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is believed to be largely responsible for the appearance of these lasting symptoms, possibly through facilitating an ongoing inflammatory process. In this review, we hypothesize potential immunological mechanisms underlying these persistent and prolonged effects, and describe the multi-organ long-term manifestations of COVID-19.© Copyright © 2021 Ramakrishnan, Kashour, Hamid, Halwani and Tleyjeh.

KW - abdominal pain

KW - acute kidney tubule necrosis

KW - adult respiratory distress syndrome

KW - allergic encephalitis

KW - anorexia

KW - anosmia

KW - anxiety

KW - arthralgia

KW - autoimmune disease

KW - autoimmunity

KW - cardiovascular disease

KW - chikungunya

KW - chronic fatigue syndrome

KW - chronic kidney failure

KW - chronic obstructive lung disease

KW - clouding of consciousness

KW - cognitive defect

KW - \*coronavirus disease 2019

KW - cytokine release syndrome

KW - daily life activity

KW - degenerative disease

KW - delirium

KW - depression

KW - diabetes mellitus

KW - diabetic ketoacidosis

KW - disability

KW - disease severity

KW - disseminated intravascular clotting

KW - dysautonomia

KW - dysbiosis

KW - dyspnea

KW - fatigue

KW - femur head necrosis

KW - fibromyalgia

KW - gastrointestinal disease

KW - heart failure

KW - heart muscle injury

KW - human

KW - hyperglycemia

KW - hypertension

KW - hypoxia

KW - immune response

KW - immunopathology

KW - incidence

KW - inflammation

KW - insulin resistance

KW - intensive care unit

KW - ischemic heart disease

KW - liver disease

KW - mental disease

KW - metabolic disorder

KW - microbiome

KW - microvascular ischemia

KW - microvascular thrombosis

KW - mitochondrion

KW - muscle weakness

KW - musculoskeletal pain

KW - myocarditis

KW - nerve degeneration

KW - neurologic disease

KW - obesity

KW - peripheral lung lesion

KW - posttraumatic stress disorder

KW - prevalence

KW - renin angiotensin aldosterone system

KW - respiratory tract disease

KW - review

KW - seizure

KW - sepsis

KW - Severe acute respiratory syndrome coronavirus 2

KW - sleep disorder

KW - thorax pain

KW - toxic shock syndrome

KW - venous thromboembolism

KW - virus infection

KW - vomiting

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 12

SP - 686029

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2021.686029

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=635485071

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3389%2ffimmu.2021.686029Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ramakrishnan&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Unraveling+the+Mystery+Surrounding+Post-Acute+Sequelae+of+COVID-19&volume=12&issue=&spage=686029&epage=&date=2021&doi=10.3389%2Ffimmu.2021.686029&pmid=34276671&sid=OVID:embase

149.

TY - JOUR

DB - Embase

AN - 2014116845

ID - 34426171 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34426171]

T1 - A systematic literature review on obesity: Understanding the causes & consequences of obesity and reviewing various machine learning approaches used to predict obesity

A1 - Safaei M.

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A1 - Driss M.

A1 - Boulila W.

A1 - Shapi'i A.

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Y1 - 2021//

N2 - Obesity is considered a principal public health concern and ranked as the fifth foremost reason for death globally. Overweight and obesity are one of the main lifestyle illnesses that leads to further health concerns and contributes to numerous chronic diseases, including cancers, diabetes, metabolic syndrome, and cardiovascular diseases. The World Health Organization also predicted that 30% of death in the world will be initiated with lifestyle diseases in 2030 and can be stopped through the suitable identification and addressing of associated risk factors and behavioral involvement policies. Thus, detecting and diagnosing obesity as early as possible is crucial. Therefore, the machine learning approach is a promising solution to early predictions of obesity and the risk of overweight because it can offer quick, immediate, and accurate identification of risk factors and condition likelihoods. The present study conducted a systematic literature review to examine obesity research and machine learning techniques for the prevention and treatment of obesity from 2010 to 2020. Accordingly, 93 papers are identified from the review articles as primary studies from an initial pool of over 700 papers addressing obesity. Consequently, this study initially recognized the significant potential factors that influence and cause adult obesity. Next, the main diseases and health consequences of obesity and overweight are investigated. Ultimately, this study recognized the machine learning methods that can be used for the prediction of obesity. Finally, this study seeks to support decision-makers looking to understand the impact of obesity on health in the general population and identify outcomes that can be used to guide health authorities and public health to further mitigate threats and effectively guide obese people globally.Copyright © 2021 The Author(s)

KW - adult

KW - alcohol consumption

KW - autoimmunity

KW - caloric intake

KW - cardiovascular disease

KW - child

KW - childhood obesity

KW - chronic stress

KW - cigarette smoking

KW - degenerative disease

KW - depression

KW - diabetes mellitus

KW - diet

KW - disease association

KW - distress syndrome

KW - education

KW - ethnic difference

KW - family

KW - feeding behavior

KW - female

KW - food intake

KW - genetics

KW - healthy diet

KW - heredity

KW - human

KW - income

KW - intestine flora

KW - \*machine learning

KW - male

KW - menopause

KW - \*obesity

KW - obesogenic environment

KW - overnutrition

KW - peer pressure

KW - physical activity

KW - physical disability

KW - physical inactivity

KW - pneumonia

KW - portion size

KW - pregnancy

KW - prostate disease

KW - respiratory tract disease

KW - review

KW - sedentary lifestyle

KW - sleep debt

KW - sleep pattern

KW - sleep time

KW - smoking

KW - smoking habit

KW - social isolation

KW - soft drink

KW - systematic review

JF - Computers in Biology and Medicine

JA - Comput. Biol. Med.

LA - English

VL - 136

SP - 104754

CY - United Kingdom

PB - Elsevier Ltd

SN - 0010-4825

SN - 1879-0534

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UR - https://www.elsevier.com/locate/compbiomed

DO - https://dx.doi.org/10.1016/j.compbiomed.2021.104754

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2014116845

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1016%2fj.compbiomed.2021.104754Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Safaei&issn=0010-4825&title=Computers+in+Biology+and+Medicine&atitle=A+systematic+literature+review+on+obesity%3A+Understanding+the+causes+%26+consequences+of+obesity+and+reviewing+various+machine+learning+approaches+used+to+predict+obesity&volume=136&issue=&spage=104754&epage=&date=2021&doi=10.1016%2Fj.compbiomed.2021.104754&pmid=34426171&sid=OVID:embase

150.

TY - JOUR

DB - Embase

AN - 2010173149

ID - 34546607 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34546607]

T1 - Altered gut microbial metabolites could mediate the effects of risk factors in Covid-19

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Y1 - 2021//

N2 - Coronavirus disease 2019 (Covid-19), caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection, is now pandemic. While most Covid-19 patients will experience mild symptoms, a small proportion will develop severe disease, which could be fatal. Clinically, Covid-19 patients manifest fever with dry cough, fatigue and dyspnoea, and in severe cases develop into acute respiratory distress syndrome (ARDS), sepsis and multi-organ failure. These severe patients are characterized by hyperinflammation with highly increased pro-inflammatory cytokines including IL-6, IL-17 and TNF-alpha as well as C-reactive protein, which are accompanied by decreased lymphocyte counts. Clinical evidence supports that gut microbiota dysregulation is common in Covid-19 and plays a key role in the pathogenesis of Covid-19. In this narrative review, we summarize the roles of intestinal dysbiosis in Covid-19 pathogenesis and posit that the associated mechanisms are being mediated by gut bacterial metabolites. Based on this premise, we propose possible clinical implications. Various risk factors could be causal for severe Covid-19, and these include advanced age, concomitant chronic disease, SARS-CoV-2 infection of enterocytes, use of antibiotics and psychological distress. Gut dysbiosis is associated with risk factors and severe Covid-19 due to decreased commensal microbial metabolites, which cause reduced anti-inflammatory mechanisms and chronic low-grade inflammation. The preconditioned immune dysregulation enables SARS-CoV-2 infection to progress to an uncontrolled hyperinflammatory response. Thus, a pre-existing gut microbiota that is diverse and abundant could be beneficial for the prevention of severe Covid-19, and supplementation with commensal microbial metabolites may facilitate and augment the treatment of severe Covid-19.Copyright © 2020 John Wiley & Sons Ltd.

KW - aging

KW - antiinflammatory activity

KW - cardiovascular disease

KW - chronic disease

KW - chronic liver disease

KW - chronic low grade inflammation

KW - chronic lung disease

KW - \*coronavirus disease 2019/et [Etiology]

KW - diabetes mellitus

KW - distress syndrome

KW - drug use

KW - \*dysbiosis

KW - human

KW - hyperinflammation

KW - immune dysregulation

KW - immune response

KW - intestine cell

KW - \*intestine flora

KW - microbial metabolism

KW - nonhuman

KW - obesity

KW - physiological stress

KW - review

KW - \*risk factor

KW - antibiotic agent

JF - Reviews in Medical Virology

JA - Rev. Med. Virol.

LA - English

VL - 31

IS - 5

SP - 1

EP - 13

CY - United Kingdom

PB - John Wiley and Sons Ltd

SN - 1052-9276

SN - 1099-1654

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UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1099-1654

DO - https://dx.doi.org/10.1002/rmv.2211

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010173149

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1002%2frmv.2211Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Chen&issn=1052-9276&title=Reviews+in+Medical+Virology&atitle=Altered+gut+microbial+metabolites+could+mediate+the+effects+of+risk+factors+in+Covid-19&volume=31&issue=5&spage=1&epage=13&date=2021&doi=10.1002%2Frmv.2211&pmid=34546607&sid=OVID:embase

151.

TY - JOUR

DB - Embase

AN - 634921749

ID - 33910214 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33910214]

T1 - Current Approaches and Future Directions for the Treatment of mTORopathies

A1 - Karalis V.

A1 - Bateup H.S.

Y1 - 2021//

N2 - The mechanistic target of rapamycin (mTOR) is a kinase at the center of an evolutionarily conserved signaling pathway that orchestrates cell growth and metabolism. mTOR responds to an array of intra- and extracellular stimuli and in turn controls multiple cellular anabolic and catabolic processes. Aberrant mTOR activity is associated with numerous diseases, with particularly profound impact on the nervous system. mTOR is found in two protein complexes, mTOR complex 1 (mTORC1) and 2 (mTORC2), which are governed by different upstream regulators and have distinct cellular actions. Mutations in genes encoding for mTOR regulators result in a collection of neurodevelopmental disorders known as mTORopathies. While these disorders can affect multiple organs, neuropsychiatric conditions such as epilepsy, intellectual disability, and autism spectrum disorder have a major impact on quality of life. The neuropsychiatric aspects of mTORopathies have been particularly challenging to treat in a clinical setting. Current therapeutic approaches center on rapamycin and its analogs, drugs that are administered systemically to inhibit mTOR activity. While these drugs show some clinical efficacy, adverse side effects, incomplete suppression of mTOR targets, and lack of specificity for mTORC1 or mTORC2 may limit their utility. An increased understanding of the neurobiology of mTOR and the underlying molecular, cellular, and circuit mechanisms of mTOR-related disorders will facilitate the development of improved therapeutics. Animal models of mTORopathies have helped unravel the consequences of mTOR pathway mutations in specific brain cell types and developmental stages, revealing an array of disease-related phenotypes. In this review, we discuss current progress and potential future directions for the therapeutic treatment of mTORopathies with a focus on findings from genetic mouse models.Copyright © 2021 The Author(s) Published by S. Karger AG, Basel.

KW - abdominal aortic aneurysm

KW - acanthosis

KW - achilles tendon rupture

KW - acromegaly

KW - acute coronary syndrome

KW - acute heart failure

KW - acute heart infarction

KW - acute HIV infection

KW - acute kidney failure

KW - adaptive immunity

KW - Addison disease

KW - adenocarcinoma

KW - adenovirus infection

KW - adipose derived stem cell

KW - adrenal incidentaloma

KW - adrenal insufficiency

KW - agricultural management

KW - AL amyloidosis/dt [Drug Therapy]

KW - allogeneic hematopoietic stem cell transplantation

KW - amenorrhea

KW - anemia

KW - anorexia

KW - anterior cruciate ligament

KW - antibiotic resistance

KW - antigen antibody reaction

KW - aseptic meningitis

KW - asthenia

KW - atherosclerosis

KW - atrial fibrillation

KW - attention deficit disorder

KW - autism

KW - bacterium isolate

KW - barotrauma

KW - Bayley Scales of Infant Development

KW - bipolar hemiarthroplasty

KW - blood vessel injury

KW - body mass

KW - Boston naming test

KW - brain injury

KW - breast cancer

KW - breast hyperplasia

KW - breast papilloma

KW - Burkitt lymphoma

KW - cancer staging

KW - carbohydrate intolerance

KW - cardiovascular disease

KW - carpal tunnel syndrome

KW - cerebrospinal fluid

KW - cholestasis

KW - chronic kidney failure

KW - chronic obstructive lung disease

KW - citrullinemia

KW - Clinical Dementia Rating

KW - clustered regularly interspaced short palindromic repeat

KW - colorectal cancer

KW - communicable disease

KW - congenital adrenal hyperplasia

KW - congestive cardiomyopathy

KW - Coronaviridae infection

KW - coronavirus disease 2019

KW - cortical dysplasia

KW - coughing

KW - CRISPR Cas system

KW - critical limb ischemia

KW - Cushing syndrome

KW - cycle threshold value

KW - cystadenocarcinoma

KW - cytomegalovirus infection

KW - demyelinating disease

KW - developmental delay

KW - dexamethasone suppression test

KW - diabetes insipidus

KW - differential gene expression

KW - diffusion tensor imaging

KW - diphtheria

KW - disease simulation

KW - disorders of amino acid and protein metabolism

KW - distant metastasis

KW - dopaminergic nerve cell

KW - Down syndrome

KW - dry skin

KW - duodenum perforation

KW - dyslipidemia

KW - edema

KW - electroencephalography

KW - electron microscopy

KW - encephalomyelitis

KW - endogenous retrovirus

KW - endoscopic retrograde cholangiopancreatography

KW - endothelial dysfunction

KW - enzyme linked immunosorbent assay

KW - executive function test

KW - extremely low birth weight

KW - facioscapulohumeral muscular dystrophy

KW - false aneurysm

KW - fluorescence microscopy

KW - follow up

KW - forced expiratory volume

KW - fractional anisotropy

KW - fragile X syndrome

KW - gallbladder cancer

KW - gel mobility shift assay

KW - gene expression profiling

KW - gene mutation

KW - gene overexpression

KW - genetic association

KW - genetic marker

KW - genetic susceptibility

KW - gigantism

KW - growth hormone deficiency

KW - Guangxi

KW - gynecomastia

KW - heart arrhythmia

KW - heart failure with reduced ejection fraction

KW - heart left ventricle hypertrophy

KW - heart muscle necrosis

KW - hematopoietic stem cell transplantation

KW - hemophagocytic syndrome

KW - hemorrhagic fever with renal syndrome

KW - high performance liquid chromatography

KW - high throughput sequencing

KW - hippocampal CA1 region

KW - histopathology

KW - Hopkins verbal learning test

KW - human

KW - Human immunodeficiency virus 1

KW - Huntington chorea

KW - hyperthermic intraperitoneal chemotherapy

KW - ICD-9

KW - iliac bone

KW - immobilization stress

KW - immune evasion

KW - in situ hybridization

KW - induced pluripotent stem cell

KW - inflammation

KW - Influenza A virus (H5N8)

KW - innate immunity

KW - insulin release

KW - insulin resistance

KW - insulin signaling

KW - intellectual impairment

KW - intensive care unit

KW - intervertebral disk

KW - intestine flora

KW - intoxication

KW - intraductal carcinoma

KW - ion transport

KW - ischemic heart disease

KW - ischemic stroke

KW - kidney function

KW - knee function

KW - knee osteoarthritis

KW - lactic acidosis

KW - language development

KW - larynx papillomatosis

KW - larynx squamous cell carcinoma

KW - length of stay

KW - leukocyte count

KW - Leydig cell tumor

KW - limit of quantitation

KW - liquid chromatography-mass spectrometry

KW - long term depression

KW - lymph vessel metastasis

KW - lymphocyte count

KW - macrocephaly

KW - marginal zone lymphoma

KW - median survival time

KW - mesenchymal stroma cell

KW - microbial activity

KW - mild cognitive impairment

KW - Mini Mental State Examination

KW - mitochondrial biogenesis

KW - mitochondrial membrane potential

KW - molecular docking

KW - Momordica charantia

KW - mortality risk

KW - \*mTOR signaling

KW - multidrug resistant Pseudomonas aeruginosa

KW - multilocus sequence typing

KW - multiple sclerosis

KW - multiplex polymerase chain reaction

KW - Murine leukemia virus

KW - mutation rate

KW - myelination

KW - myoblast

KW - myoclonus epilepsy

KW - nanopore sequencing

KW - nasopharynx carcinoma

KW - natural killer cell mediated cytotoxicity

KW - nephrolithiasis

KW - nested polymerase chain reaction

KW - neural stem cell

KW - neurofibromatosis type 1

KW - neuromodulation

KW - neutropenia

KW - neutrophil lymphocyte ratio

KW - newborn screening

KW - non ST segment elevation myocardial infarction

KW - nonischemic cardiomyopathy

KW - nuclear magnetic resonance imaging

KW - nucleus pulposus

KW - obesity

KW - obsessive compulsive disorder

KW - oligodendroglia

KW - organs at risk

KW - osteoarthritis

KW - osteochondritis dissecans

KW - out of hospital cardiac arrest

KW - outcome assessment

KW - overall survival

KW - oxidative stress

KW - pancreas islet beta cell

KW - Parkinson disease

KW - pentose phosphate cycle

KW - people by smoking status

KW - percutaneous coronary intervention

KW - percutaneous nephrolithotomy

KW - percutaneous transluminal angioplasty

KW - peripheral blood mononuclear cell

KW - personal experience

KW - phenylketonuria

KW - phyllodes tumor

KW - phylogenetic tree

KW - physiological stress

KW - plant virus

KW - Plasmodium falciparum

KW - pneumonia

KW - podocyte

KW - point mutation

KW - polymerase chain reaction restriction fragment length polymorphism

KW - positron emission tomography-computed tomography

KW - postoperative pain

KW - postsynaptic potential

KW - prefrontal cortex

KW - premature mortality

KW - primary sclerosing cholangitis

KW - primordial follicle

KW - problem behavior

KW - protein blood level

KW - protein expression

KW - protein phosphorylation

KW - protein processing

KW - quantitative analysis

KW - radiation dose distribution

KW - regulated cell death

KW - relapse

KW - review

KW - risk assessment

KW - sarcomere

KW - scrub typhus

KW - Seoul virus

KW - serial interval

KW - Severe acute respiratory syndrome coronavirus 2

KW - shelter-in-place

KW - short bowel syndrome

KW - short tandem repeat

KW - signal transduction

KW - single nucleotide polymorphism

KW - single photon emission computed tomography

KW - six minute walk test

KW - soil

KW - somatic mutation

KW - species difference

KW - spectrophotometry

KW - spliceosome

KW - splicing defect

KW - stress strain relationship

KW - structure analysis

KW - substantia nigra pars compacta

KW - synaptic transmission

KW - systemic lupus erythematosus

KW - systolic blood pressure

KW - tendon graft

KW - tertiary care center

KW - testosterone blood level

KW - thyroid function test

KW - thyroid papillary carcinoma

KW - tracheal extubation

KW - Transmissible gastroenteritis virus

KW - transrectal ultrasonography

KW - treatment duration

KW - treatment response

KW - \*tuberous sclerosis/dt [Drug Therapy]

KW - tumor associated leukocyte

KW - tyrosinemia

KW - ulcerogenesis

KW - unstable angina pectoris

KW - valvular heart disease

KW - vertebra body

KW - virus capsid

KW - virus genome

KW - virus replication

KW - virus strain

KW - virus transmission

KW - viscosupplementation

KW - wastewater

KW - water immersion

KW - Western blotting

KW - whole exome sequencing

KW - 1 (2,3 dichlorobenzoyl) 5 methoxy 2 methyl 3 (2 morpholinoethyl)indole

KW - 2 imidazolidinethione/dt [Drug Therapy]

KW - 6 iodo 3 (4 methoxybenzoyl) 2 methyl 1 (2 morpholinoethyl)indole

KW - adenosine triphosphate/ec [Endogenous Compound]

KW - albumin/ec [Endogenous Compound]

KW - aldehyde dehydrogenase isoenzyme 1/ec [Endogenous Compound]

KW - aldosterone/ec [Endogenous Compound]

KW - aminoglycoside/ec [Endogenous Compound]

KW - amiodarone/ec [Endogenous Compound]

KW - androstenedione/ec [Endogenous Compound]

KW - angiogenic factor/ec [Endogenous Compound]

KW - anticoagulant agent/ec [Endogenous Compound]

KW - antidiabetic agent/ec [Endogenous Compound]

KW - antiinfective agent/ec [Endogenous Compound]

KW - antioxidant/ec [Endogenous Compound]

KW - antivirus agent

KW - apolipoprotein L1/ec [Endogenous Compound]

KW - aquaporin 4 antibody/ec [Endogenous Compound]

KW - argininosuccinic acid/ec [Endogenous Compound]

KW - aromatase/ec [Endogenous Compound]

KW - artemisinin/ec [Endogenous Compound]

KW - aryldialkylphosphatase 1/ec [Endogenous Compound]

KW - azithromycin

KW - bamlanivimab/ec [Endogenous Compound]

KW - beta 2 adrenergic receptor/ec [Endogenous Compound]

KW - beta catenin/ec [Endogenous Compound]

KW - bile acid/ec [Endogenous Compound]

KW - bilirubin/ec [Endogenous Compound]

KW - biological marker/ec [Endogenous Compound]

KW - broxuridine/ec [Endogenous Compound]

KW - C reactive protein/ec [Endogenous Compound]

KW - calcitriol/ec [Endogenous Compound]

KW - calcium ion/ec [Endogenous Compound]

KW - cannabinoid/ec [Endogenous Compound]

KW - cannabinoid 1 receptor/ec [Endogenous Compound]

KW - carbidopa plus levodopa

KW - CD3 antigen/ec [Endogenous Compound]

KW - CD34 antigen/ec [Endogenous Compound]

KW - collagen type 2/ec [Endogenous Compound]

KW - cyclic AMP dependent protein kinase/ec [Endogenous Compound]

KW - cyclin D1/ec [Endogenous Compound]

KW - cytochrome P450 2D6/ec [Endogenous Compound]

KW - cytokine/ec [Endogenous Compound]

KW - cytotoxic T lymphocyte antigen 4/ec [Endogenous Compound]

KW - dickkopf 1 protein/ec [Endogenous Compound]

KW - DNA fragment/ec [Endogenous Compound]

KW - epidermal growth factor receptor/ec [Endogenous Compound]

KW - epinephrine/ec [Endogenous Compound]

KW - epitope/ec [Endogenous Compound]

KW - hyaluronic acid/ec [Endogenous Compound]

KW - immune checkpoint protein/ec [Endogenous Compound]

KW - interferon/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - lactate dehydrogenase/ec [Endogenous Compound]

KW - messenger RNA/ec [Endogenous Compound]

KW - microRNA 182/ec [Endogenous Compound]

KW - mitochondrial transcription factor A/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - \*Muellerian inhibiting factor/ec [Endogenous Compound]

KW - muscle RING finger 1 protein/ec [Endogenous Compound]

KW - \*myelin oligodendrocyte glycoprotein/ec [Endogenous Compound]

KW - myeloperoxidase/ec [Endogenous Compound]

KW - peroxisome proliferator activated receptor alpha/ec [Endogenous Compound]

KW - programmed death 1 ligand 1/ec [Endogenous Compound]

KW - programmed death 1 receptor/ec [Endogenous Compound]

KW - prostaglandin E2/ec [Endogenous Compound]

KW - protein p53/ec [Endogenous Compound]

KW - proteinase/ec [Endogenous Compound]

KW - R factor/ec [Endogenous Compound]

KW - reactive oxygen metabolite/ec [Endogenous Compound]

KW - \*regulator protein/ec [Endogenous Compound]

KW - regulatory associated protein of mTOR/ec [Endogenous Compound]

KW - Rheb protein/ec [Endogenous Compound]

KW - RNA 16S/ec [Endogenous Compound]

KW - secreted frizzled related protein 1/ec [Endogenous Compound]

KW - sirtuin 1/ec [Endogenous Compound]

KW - sirtuin 3/ec [Endogenous Compound]

KW - steroid 17alpha monooxygenase/ec [Endogenous Compound]

KW - transcription activator like effector/ec [Endogenous Compound]

KW - transcription factor FKHRL1/ec [Endogenous Compound]

KW - transcription factor PAX3/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - untranslated RNA/ec [Endogenous Compound]

KW - valproic acid/ec [Endogenous Compound]

KW - virulence factor/ec [Endogenous Compound]

KW - virus spike protein/ec [Endogenous Compound]

KW - xenobiotic agent/ec [Endogenous Compound]

KW - implanted heart pacemaker

KW - MacConkey agar

KW - manikin

KW - Mycobacterium tuberculosis test kit

KW - SARS coronavirus 2 test kit

KW - stent

XT - AL amyloidosis / drug therapy / 2 imidazolidinethione

XT - tuberous sclerosis / drug therapy / 2 imidazolidinethione

XT - 2 imidazolidinethione / drug therapy / AL amyloidosis

XT - 2 imidazolidinethione / drug therapy / tuberous sclerosis

JF - Developmental Neuroscience

JA - Dev. Neurosci.

LA - English

VL - 43

IS - 3-4

SP - 143

EP - 158

CY - Switzerland

PB - S. Karger AG

SN - 0378-5866

SN - 1421-9859

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UR - https://www.karger.com/journals/dne/dne\_jh.htm

DO - https://dx.doi.org/10.1159/000515672

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=634921749

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1159%2f000515672Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Karalis&issn=0378-5866&title=Developmental+Neuroscience&atitle=Current+Approaches+and+Future+Directions+for+the+Treatment+of+mTORopathies&volume=43&issue=3-4&spage=143&epage=158&date=2021&doi=10.1159%2F000515672&pmid=33910214&sid=OVID:embase

152.

TY - JOUR

DB - Embase

AN - 2013947114

T1 - The clinical relevance of the microbiome in hidradenitis suppurativa: A systematic review

A1 - Mintoff D.

A1 - Borg I.

A1 - Pace N.P.

Y1 - 2021//

N2 - Hidradenitis suppurativa is a chronic disease of the pilosebaceous unit. The name of the condition is a testament to the presumed relationship between the disease and the microbiome. The pathophysiology of hidradenitis suppurativa is, however, complex and believed to be the product of a multifactorial interplay between the interfollicular epithelium, pilosebaceous unit, microbiome, as well as genetic and environmental factors. In this review we assimilate the existing literature regarding the role played by the human microbiome in HS in various contexts of the disease, including the pathophysiologic, therapeutic, and potentially, diagnostic as well prognostic. In conclusion, the role played by the microbiome in HS is extensive and relevant and can have bench-to-bedside applications.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - Actinobacteria

KW - Actinomyces

KW - adaptive immunity

KW - antibiotic resistance

KW - atopic dermatitis

KW - bacteremia

KW - bacterium detection

KW - Bacteroides

KW - Bacteroidetes

KW - base pairing

KW - biofilm

KW - chronic disease

KW - chronic rhinosinusitis

KW - cystic fibrosis

KW - cytotoxicity

KW - depression

KW - dermatophytosis

KW - disease activity

KW - disease severity

KW - DNA extraction

KW - downstream processing

KW - drug repositioning

KW - dysbiosis

KW - Enterococcus faecalis

KW - \*environmental factor

KW - epithelium

KW - Escherichia

KW - Escherichia coli

KW - Faecalibacterium

KW - fat mass

KW - fecal microbiota transplantation

KW - fermentation

KW - Firmicutes

KW - genotype

KW - hidradenitis

KW - human

KW - human cell

KW - immune response

KW - immunohistochemistry

KW - immunomodulation

KW - in situ hybridization

KW - inflammation

KW - inflammatory bowel disease

KW - innate immunity

KW - intestine flora

KW - jurisprudence

KW - keratinocyte

KW - Lactobacillus

KW - lipid diet

KW - major depression

KW - metabolic syndrome X

KW - metagenomics

KW - methicillin resistant Staphylococcus aureus

KW - microbial community

KW - microbial diversity

KW - \*microbiome

KW - microflora

KW - mouse

KW - neutrophil

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - nose polyp

KW - obesity

KW - pathophysiology

KW - Peptoniphilus

KW - peripheral blood mononuclear cell

KW - prevalence

KW - Propionibacterium acnes

KW - Proteobacteria

KW - psoriasis

KW - psoriatic arthritis

KW - regulatory T lymphocyte

KW - retrospective study

KW - review

KW - rheumatoid arthritis

KW - risk factor

KW - rosacea

KW - Saccharomyces cerevisiae

KW - septic shock

KW - skin biopsy

KW - skin defect

KW - skin flora

KW - Staphylococcus aureus

KW - Staphylococcus epidermidis

KW - Staphylococcus infection

KW - Staphylococcus lugdunensis

KW - Streptococcus pyogenes

KW - \*suppurative hidradenitis/et [Etiology]

KW - symbiosis

KW - systematic review

KW - toxic shock syndrome

KW - vagina flora

KW - wound healing

KW - adalimumab

KW - antiinfective agent

KW - autoantibody

KW - C reactive protein

KW - cathelicidin

KW - clindamycin

KW - immunoglobulin E

KW - interleukin 16

KW - interleukin 17

KW - interleukin 23

KW - interleukin 6

KW - interleukin 8

KW - isotretinoin

KW - probiotic agent

KW - rifampicin

KW - RNA 16S

KW - short chain fatty acid

KW - triacylglycerol

KW - triamcinolone

KW - carbon dioxide laser

JF - Vaccines

JA - Vaccines

LA - English

VL - 9

IS - 10

SP - 1076

CY - Switzerland

PB - MDPI

SN - 2076-393X (electronic)

SN - 2076-393X

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UR - https://www.mdpi.com/2076-393X/9/10/1076/pdf

DO - https://dx.doi.org/10.3390/vaccines9101076

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2013947114

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2fvaccines9101076Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mintoff&issn=2076-393X&title=Vaccines&atitle=The+clinical+relevance+of+the+microbiome+in+hidradenitis+suppurativa%3A+A+systematic+review&volume=9&issue=10&spage=1076&epage=&date=2021&doi=10.3390%2Fvaccines9101076&pmid=&sid=OVID:embase

153.

TY - JOUR

DB - Embase

AN - 2013711326

T1 - Enhancement of Immunity and Health in Neonates and Infants

A1 - Singh A.

A1 - Kaur H.

A1 - Gupta G.

A1 - Naranje K.

A1 - Verma A.

A1 - Roy A.

A1 - Gautam A.

A1 - Pandey A.

A1 - Gupta A.

A1 - Jaiswal R.

A1 - Bajpai S.

A1 - Dwivedi M.

A1 - Birthare A.

AO - Singh, Anita; ORCID: https://orcid.org/0000-0002-3427-7441

AO - Naranje, Kirti; ORCID: https://orcid.org/0000-0002-8659-7658

Y1 - 2021//

N2 - Immunity is protective mechanism of the body against infection, diseases, and cancers. The stronger the immunity is the healthier we are. With increasing environmental change worldwide, increase of new emerging diseases and infection over last few decades, it has become imperative to move toward prevention more than the treatment. The immune mechanism in pediatric population especially neonates and infants is much different than adults and is yet evolving. The development of immunity starts in utero and is dependent on several factors. The various efforts to improve immunity and health should start from antenatal period focusing on overall health and nutrition of mother. Maternal nutrition, antenatal steroids, and delayed cord clamping are helpful in decreasing various neonatal morbidities which include respiratory distress syndrome, sepsis, necrotizing enterocolitis, intraventricular hemorrhage, and mortality. After birth during initial 6 months, exclusive breastfeeding, growth monitoring, primary immunization, developmentally supportive care, and care of infections are of utmost importance. After 6 months of age, a balanced approach toward introduction of complementary feeding, care of micronutrients, optimal environment, and inclusion of immunity enhancing foods in diet may have considerable benefits.Copyright © 2021 National Neonatology Forum.

KW - actin polymerization

KW - adaptive immunity

KW - antibody response

KW - antigen presenting cell

KW - apoptosis

KW - article

KW - bioremediation

KW - bone density

KW - brain hemorrhage

KW - caloric intake

KW - cellular immunity

KW - complementary feeding

KW - constipation

KW - delayed cord clamping

KW - diet supplementation

KW - dietary intake

KW - enteric feeding

KW - fetus lung maturation

KW - \*health

KW - hospitalization

KW - human

KW - hypoxia

KW - immune response

KW - \*immunity

KW - immunization

KW - immunological tolerance

KW - infant

KW - inflammation

KW - innate immunity

KW - intensive care unit

KW - intestine flora

KW - iron transport

KW - mental stress

KW - microbial diversity

KW - natural killer cell

KW - necrotizing enterocolitis

KW - nerve cell differentiation

KW - newborn

KW - newborn infection

KW - newborn morbidity

KW - newborn sepsis

KW - nutrition

KW - nutritional assessment

KW - organismal interaction

KW - parenteral nutrition

KW - particulate matter

KW - postnatal depression

KW - preeclampsia

KW - premature labor

KW - prenatal period

KW - quality of life

KW - randomized controlled trial (topic)

KW - regulatory T lymphocyte

KW - respiratory distress syndrome

KW - sepsis

KW - signal transduction

KW - systematic review

KW - Th1 cell

KW - Th17 cell

KW - alpha tocopherol

KW - betamethasone

KW - CD40 ligand/ec [Endogenous Compound]

KW - corticosteroid

KW - curcumin

KW - dexamethasone

KW - docosahexaenoic acid

KW - epinephrine

KW - granulocyte colony stimulating factor/ec [Endogenous Compound]

KW - hydrocortisone

KW - icosapentaenoic acid

KW - interleukin 12/ec [Endogenous Compound]

KW - interleukin 2/ec [Endogenous Compound]

KW - lactoferrin

KW - oligosaccharide

KW - prebiotic agent

KW - probiotic agent

KW - selenium

KW - thiamine

KW - thromboxane B2/ec [Endogenous Compound]

KW - toll like receptor 2/ec [Endogenous Compound]

KW - toll like receptor 6/ec [Endogenous Compound]

KW - vitamin B complex

KW - vitamin D

JF - Journal of Neonatology

JA - J. Neonatal.

LA - English

VL - 35

IS - 3

SP - 138

EP - 154

CY - United Kingdom

PB - SAGE Publications Ltd

SN - 0973-2179

SN - 0973-2187

AD - A. Singh, Department of Neonatology, Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow, Uttar Pradesh, India. E-mail: dranitasinghk@gmail.com

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UR - https://journals.sagepub.com/home/nnt

DO - https://dx.doi.org/10.1177/09732179211044332

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2013711326

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1177%2f09732179211044332Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Singh&issn=0973-2179&title=Journal+of+Neonatology&atitle=Enhancement+of+Immunity+and+Health+in+Neonates+and+Infants&volume=35&issue=3&spage=138&epage=154&date=2021&doi=10.1177%2F09732179211044332&pmid=&sid=OVID:embase

154.

TY - JOUR

DB - Embase

AN - 2013047598

T1 - A narrative review on the unexplored potential of colostrum as a preventative treatment and therapy for diarrhea in neonatal dairy calves

A1 - Carter H.S.M.

A1 - Renaud D.L.

A1 - Steele M.A.

A1 - Fischer-Tlustos A.J.

A1 - Costa J.H.C.

Y1 - 2021//

N2 - Diarrhea is the leading cause of morbidity and mortality in pre-weaned dairy calves and, as such, represents a significant animal health and welfare concern. Furthermore, digestive disease early in life is associated with several long-term consequences such as reduced growth rate and decreased milk yield during the first lactation, thus generating severe economic losses. The majority of diarrheic cases in young calves are treated with antimicrobials; however, it is necessary to develop alternative treatments, as excessive antimicrobial usage can lead to antimicrobial resistance and can negatively impact the gut microflora of a calf. Bovine colostrum is abundant in immune and bioactive factors that improve immune function and development. This rich and natural combination of immunoglobulins, natural antimicrobial factors, growth factors, anti-inflammatories and nutrients may be an attractive alternative to antimicrobials in the treatment of diarrhea in young dairy calves. There is evidence that supports the use of colostrum as an early treatment for diarrhea in young calves. Future research should investigate its therapeutic and economic effectiveness.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - Actinobacteria

KW - \*alternative medicine

KW - animal health

KW - animal welfare

KW - anorexia

KW - antibiotic resistance

KW - antimicrobial activity

KW - Bacteroidetes

KW - Bifidobacterium

KW - Bifidobacterium bifidum

KW - body weight gain

KW - calf (bovine)

KW - calf (mammal)

KW - Clostridium perfringens

KW - dairy cattle

KW - dairy industry

KW - depression

KW - dextran sulfate sodium-induced colitis

KW - dysbiosis

KW - endotoxemia

KW - enteric feeding

KW - Escherichia coli

KW - fecal microbiota transplantation

KW - Firmicutes

KW - gastroenteritis

KW - gastrointestinal disease

KW - growth rate

KW - immune response

KW - immunological tolerance

KW - immunosuppressive treatment

KW - infant

KW - \*infantile diarrhea/di [Diagnosis]

KW - \*infantile diarrhea/dt [Drug Therapy]

KW - \*infantile diarrhea/et [Etiology]

KW - innate immunity

KW - intestine flora

KW - intestine mucosa

KW - lactation

KW - Lactobacillus

KW - microbial community

KW - microflora

KW - milk

KW - milk production

KW - milk yield

KW - morbidity

KW - mortality

KW - natural killer cell

KW - nonhuman

KW - \*nutrient

KW - oxidative stress

KW - phagocytosis

KW - physical activity

KW - \*prophylaxis

KW - Proteobacteria

KW - review

KW - Rotavirus

KW - ruminant

KW - salmonellosis

KW - sepsis

KW - upregulation

KW - \*antiinfective agent/dt [Drug Therapy]

KW - essential oil

KW - \*growth factor/dt [Drug Therapy]

KW - \*immunoglobulin/dt [Drug Therapy]

KW - interleukin 1beta

KW - leptin

KW - live vaccine

KW - nanocomposite

KW - oxytetracycline

KW - pathogen associated molecular pattern

KW - prebiotic agent

KW - probiotic agent

KW - sulfadimidine

KW - tetracycline

KW - toll like receptor

KW - toll like receptor 2

KW - triacylglycerol

KW - tumor necrosis factor

XT - infantile diarrhea / drug therapy / antiinfective agent

XT - infantile diarrhea / drug therapy / growth factor

XT - infantile diarrhea / drug therapy / immunoglobulin

XT - antiinfective agent / drug therapy / infantile diarrhea

XT - growth factor / drug therapy / infantile diarrhea

XT - immunoglobulin / drug therapy / infantile diarrhea

JF - Animals

JA - Animals

LA - English

VL - 11

IS - 8

SP - 2221

CY - Switzerland

PB - MDPI

SN - 2076-2615 (electronic)

SN - 2076-2615

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UR - https://www.mdpi.com/2076-2615/11/8/2221/pdf

DO - https://dx.doi.org/10.3390/ani11082221

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2013047598

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2fani11082221Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Carter&issn=2076-2615&title=Animals&atitle=A+narrative+review+on+the+unexplored+potential+of+colostrum+as+a+preventative+treatment+and+therapy+for+diarrhea+in+neonatal+dairy+calves&volume=11&issue=8&spage=2221&epage=&date=2021&doi=10.3390%2Fani11082221&pmid=&sid=OVID:embase

155.

TY - JOUR

DB - Embase

AN - 2011327424

ID - 33909265 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33909265]

T1 - Understanding the Co-Epidemic of Obesity and COVID-19: Current Evidence, Comparison with Previous Epidemics, Mechanisms, and Preventive and Therapeutic Perspectives

A1 - Dalamaga M.

A1 - Christodoulatos G.S.

A1 - Karampela I.

A1 - Vallianou N.

A1 - Apovian C.M.

Y1 - 2021//

N2 - Purpose of Review: A growing body of evidence suggests that obesity and increased visceral adiposity are strongly and independently linked to adverse outcomes and death due to COVID-19. This review summarizes current epidemiologic data, highlights pathogenetic mechanisms on the association between excess body weight and COVID-19, compares data from previous pandemics, discusses why COVID-19 challenges the "obesity paradox," and presents implications in prevention and treatment as well as future perspectives. Recent Findings: Data from meta-analyses based on recent observational studies have indicated that obesity increases the risks of infection from SARS-CoV-2, severe infection and hospitalization, admission to the ICU and need of invasive mechanical ventilation (IMV), and the risk of mortality, particularly in severe obesity. The risks of IMV and mortality associated with obesity are accentuated in younger individuals (age <= 50 years old). The meta-inflammation in obesity intersects with and exacerbates underlying pathogenetic mechanisms in COVID-19 through the following mechanisms and factors: (i) impaired innate and adaptive immune responses; (ii) chronic inflammation and oxidative stress; (iii) endothelial dysfunction, hypercoagulability, and aberrant activation of the complement; (iv) overactivation of the renin-angiotensin-aldosterone system; (v) overexpression of the angiotensin-converting enzyme 2 receptor in the adipose tissue; (vi) associated cardiometabolic comorbidities; (vii) vitamin D deficiency; (viii) gut dysbiosis; and (ix) mechanical and psychological issues. Summary: Mechanistic and large epidemiologic studies using big data sources with omics data exploring genetic determinants of risk and disease severity as well as large randomized controlled trials (RCTs) are necessary to shed light on the pathways connecting chronic subclinical inflammation/meta-inflammation with adverse COVID-19 outcomes and establish the ideal preventive and therapeutic approaches for patients with obesity.Copyright © 2021, The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature.

KW - adaptive immunity

KW - adult respiratory distress syndrome

KW - body mass

KW - cardiometabolic risk

KW - case fatality rate

KW - \*coronavirus disease 2019

KW - cytokine storm

KW - diabetes mellitus

KW - disease exacerbation

KW - disease severity

KW - dysbiosis

KW - endothelial dysfunction

KW - \*epidemic

KW - gene overexpression

KW - herd immunity

KW - hospital admission

KW - hospitalization

KW - human

KW - hypercoagulability

KW - immune dysregulation

KW - incubation time

KW - inflammation

KW - influenza

KW - innate immunity

KW - intensive care unit

KW - intra-abdominal fat

KW - invasive ventilation

KW - mental disease

KW - meta analysis (topic)

KW - mortality

KW - \*obesity

KW - oxidative stress

KW - pandemic

KW - physical inactivity

KW - renin angiotensin aldosterone system

KW - review

KW - risk factor

KW - Severe acute respiratory syndrome coronavirus 2

KW - systematic review

KW - thrombosis

KW - vitamin D deficiency

KW - angiotensin converting enzyme 2/ec [Endogenous Compound]

JF - Current Obesity Reports

JA - Curr. Obesity Rep.

LA - English

VL - 10

IS - 3

SP - 214

EP - 243

CY - United States

PB - Springer

SN - 2162-4968 (electronic)

SN - 2162-4968

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UR - http://www.springer.com/medicine/internal/journal/13679

DO - https://dx.doi.org/10.1007/s13679-021-00436-y

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2011327424

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1007%2fs13679-021-00436-yLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Dalamaga&issn=2162-4968&title=Current+Obesity+Reports&atitle=Understanding+the+Co-Epidemic+of+Obesity+and+COVID-19%3A+Current+Evidence%2C+Comparison+with+Previous+Epidemics%2C+Mechanisms%2C+and+Preventive+and+Therapeutic+Perspectives&volume=10&issue=3&spage=214&epage=243&date=2021&doi=10.1007%2Fs13679-021-00436-y&pmid=33909265&sid=OVID:embase

156.

TY - JOUR

DB - Embase

AN - 2007851845

ID - 34209560 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34209560]

T1 - Chronic kidney disease-associated itch (CKD-aI) in children-A narrative review

A1 - Reszke R.

A1 - Kilis-Pstrusinska K.

A1 - Szepietowski J.C.

Y1 - 2021//

N2 - Chronic kidney disease (CKD) is a condition of widespread epidemiology and serious consequences affecting all organs of the organism and associated with significant mortality. The knowledge on CKD is rapidly evolving, especially concerning adults. Recently, more data is also appearing regarding CKD in children. Chronic itch (CI) is a common symptom appearing due to various underlying dermatological and systemic conditions. CI may also appear in association with CKD and is termed chronic kidney disease-associated itch (CKD-aI). CKD-aI is relatively well-described in the literature concerning adults, yet it also affects children. Unfortunately, the data on paediatric CKD-aI is particularly scarce. This narrative review aims to describe various aspects of CKD-aI with an emphasis on children, based on the available data in this population and the data extrapolated from adults. Its pathogenesis is described in details, focusing on the growing role of uraemic toxins (UTs), as well as immune dysfunction, altered opioid transmission, infectious agents, xerosis, neuropathy and dialysis-associated aspects. Moreover, epidemiological and clinical aspects are reviewed based on the few data on CKD-aI in children, whereas treatment recommendations are proposed as well, based on the literature on CKD-aI in adults and own experience in managing CI in children.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - acute kidney failure

KW - adaptive immunity

KW - adult

KW - air pollution

KW - anemia

KW - apoptosis

KW - arterial stiffness

KW - atherosclerosis

KW - atopic dermatitis

KW - blood brain barrier

KW - blood vessel calcification

KW - bone turnover

KW - brain perfusion

KW - breast cancer

KW - cancer resistance

KW - cardiovascular disease

KW - cell proliferation

KW - child

KW - \*childhood disease/ep [Epidemiology]

KW - cholelithiasis

KW - cholestasis

KW - \*chronic kidney failure/ep [Epidemiology]

KW - clinical feature

KW - constipation

KW - depression

KW - dialysis

KW - disease severity

KW - end stage renal disease

KW - Escherichia coli

KW - estimated glomerular filtration rate

KW - flow cytometry

KW - functional magnetic resonance imaging

KW - glomerulus basement membrane

KW - glomerulus filtration rate

KW - hemodiafiltration

KW - hemodialysis

KW - hemoperfusion

KW - hibernation

KW - histamine release

KW - histochemistry

KW - human

KW - hyperphosphatemia

KW - hyperpigmentation

KW - hypertension

KW - hyperuricemia

KW - hypervitaminosis

KW - hypocalcemia

KW - immune response

KW - \*immunopathology

KW - immunosuppressive treatment

KW - insulin resistance

KW - intestine flora

KW - irritable colon

KW - kidney carcinoma

KW - kidney fibrosis

KW - kidney function

KW - leukocyte count

KW - lipophilicity

KW - liver cirrhosis

KW - lymphocyte differentiation

KW - Mediterranean diet

KW - melanoma

KW - mortality

KW - motor neuropathy

KW - mouse

KW - multidrug resistance

KW - nausea and vomiting

KW - nephrotoxicity

KW - neuropathic pain

KW - neuropathy

KW - neuroprotection

KW - nociception

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - osteodystrophy

KW - oxidative stress

KW - parathyroidectomy

KW - paresthesia

KW - particulate matter

KW - phagocytosis

KW - phosphate blood level

KW - phototherapy

KW - postvoid residual urine volume

KW - prevalence

KW - protein expression

KW - protein intake

KW - protein restriction

KW - pruritus

KW - psoriasis

KW - psoriasis vulgaris

KW - pulse wave

KW - PUVA

KW - questionnaire

KW - respiration control

KW - review

KW - skin water loss

KW - sun exposure

KW - upregulation

KW - urticaria

KW - vaccination

KW - volume of distribution

KW - vomiting

KW - xerosis

KW - 6 n carboxymethyllysine

KW - adrenomedullin

KW - alanine aminotransferase

KW - breast cancer resistance protein

KW - camphor

KW - capsaicin

KW - carbon monoxide

KW - chemokine receptor CXCR3

KW - chymase

KW - creatinine

KW - cystatin C

KW - cytokine

KW - desloratadine

KW - endocannabinoid

KW - endothelin 1

KW - fentanyl

KW - furosemide

KW - gabapentin

KW - homocysteine

KW - hydroxyzine

KW - ibuprofen

KW - immunoglobulin E

KW - interleukin 2

KW - interleukin 6

KW - ketotifen

KW - leptin

KW - liposome

KW - loop diuretic agent

KW - morphine

KW - multidrug resistance protein 4

KW - naltrexone

KW - nemolizumab

KW - oncostatin M

KW - ondansetron

KW - opiate

KW - parathyroid hormone

KW - pimecrolimus

KW - prebiotic agent

KW - pregabalin

KW - probiotic agent

KW - protein p53

KW - psoralen

KW - reactive oxygen metabolite

KW - reduced nicotinamide adenine dinucleotide phosphate oxidase

KW - tacrolimus

KW - tissue inhibitor of metalloproteinase 1

KW - torasemide

KW - toxin

KW - triacylglycerol

KW - tryptase

KW - urate oxidase

KW - vitamin D

KW - \*chronic pruritus

JF - Toxins

JA - Toxins

LA - English

VL - 13

IS - 7

SP - 450

CY - Switzerland

PB - MDPI

SN - 2072-6651 (electronic)

SN - 2072-6651

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UR - https://www.mdpi.com/2072-6651/13/7/450/pdf

DO - https://dx.doi.org/10.3390/toxins13070450

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2007851845

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2ftoxins13070450Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Reszke&issn=2072-6651&title=Toxins&atitle=Chronic+kidney+disease-associated+itch+%28CKD-aI%29+in+children-A+narrative+review&volume=13&issue=7&spage=450&epage=&date=2021&doi=10.3390%2Ftoxins13070450&pmid=34209560&sid=OVID:embase

157.

TY - JOUR

DB - Embase

AN - 2007694030

T1 - A review of systemic minocycline side effects and topical minocycline as a safer alternative for treating acne and rosacea

A1 - Martins A.M.

A1 - Marto J.M.

A1 - Johnson J.L.

A1 - Graber E.M.

Y1 - 2021//

N2 - Resistance of Cutibacterium acnes to topical antibiotics historically used to treat acne (topical erythromycin and clindamycin and, more recently, topical azithromycin and clarithromycin) has been steadily increasing and new topical antibiotics are needed. Minocycline is a semisynthetic tetracycline-derived antibiotic currently used systemically to treat a wide range of infections caused by Gram-negative and Gram-positive bacteria. In addition to its antibiotic activity, minocycline possesses anti-inflammatory properties, such as the downregulation of proinflammatory cytokine production, suppression of neutrophil chemotaxis, activation of superoxide dismutase, and inhibition of phagocytosis, among others. These characteristics make minocycline a valuable agent for treatment of dermatological diseases such as acne vulgaris and papulopustular rosacea. However, more frequent or serious adverse effects have been observed upon the systemic administration of minocycline than with other tetracyclines. Examples of serious adverse effects include hypersensitivity syndrome reaction, drug-induced lupus, idiopathic intracranial hypertension, and other autoimmune syndromes that may cause death. Here, we review adverse effects and drug-drug interactions observed with oral administration of minocycline and contrast this with topical minocycline formulations recently approved or under development for effectively treating dermatological disorders with fewer adverse effects and less drug interaction.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - \*acne/si [Side Effect]

KW - acne vulgaris/si [Side Effect]

KW - alkalinization

KW - allergic pneumonitis/si [Side Effect]

KW - alopecia

KW - angiosarcoma

KW - anxiety

KW - arthralgia/si [Side Effect]

KW - asthma

KW - autoimmune hepatitis

KW - biocompatibility

KW - brain edema/si [Side Effect]

KW - cardiomegaly

KW - cytokine production

KW - death

KW - depression

KW - dizziness

KW - down regulation

KW - drug formulation

KW - drug hypersensitivity

KW - drug release

KW - drug safety

KW - drug stability

KW - dysbiosis

KW - dyspnea

KW - eosinophilia

KW - erythema

KW - face edema

KW - female

KW - fenestration

KW - headache

KW - heart muscle biopsy

KW - hospitalization

KW - hypertension/si [Side Effect]

KW - hypothyroidism

KW - immune response

KW - interstitial pneumonia

KW - intracranial hypertension

KW - intracranial pressure

KW - kidney function

KW - limit of quantitation

KW - lipophilicity

KW - livedo reticularis

KW - lumbar puncture

KW - lupus like syndrome

KW - lymphadenopathy

KW - macrocephaly

KW - male

KW - myalgia/si [Side Effect]

KW - necrotizing arteritis

KW - nephrotoxicity

KW - neutrophil chemotaxis

KW - nonhuman

KW - papilledema

KW - phagocytosis

KW - phototoxicity

KW - Propionibacterium acnes

KW - pruritus

KW - psoriasis

KW - pustule

KW - quality of life

KW - Raynaud phenomenon

KW - review

KW - \*rosacea

KW - sebum secretion

KW - serum sickness

KW - skin biopsy

KW - skin defect

KW - skin pigmentation

KW - spermatogenesis

KW - Staphylococcus aureus

KW - systematic review

KW - thrombosis

KW - tongue swelling

KW - upper respiratory tract infection

KW - urticaria

KW - vagina candidiasis

KW - vertigo

KW - vomiting

KW - antibiotic agent

KW - antihistaminic agent

KW - bendroflumethiazide

KW - chlorothiazide

KW - clindamycin

KW - dabigatran

KW - digoxin

KW - doxycycline

KW - eosinophil peroxidase

KW - erythromycin

KW - hydrocortisone

KW - hydroxychloroquine

KW - indapamide

KW - ipilimumab

KW - methazolamide

KW - methotrexate

KW - metolazone

KW - \*minocycline/ae [Adverse Drug Reaction]

KW - nitric oxide

KW - pilocarpine

KW - rifampicin

KW - spironolactone

KW - tetracycline

KW - tetracycline derivative

KW - torasemide

KW - zinc

XT - acne / side effect / minocycline

XT - acne vulgaris / side effect / minocycline

XT - allergic pneumonitis / side effect / minocycline

XT - arthralgia / side effect / minocycline

XT - brain edema / side effect / minocycline

XT - hypertension / side effect / minocycline

XT - myalgia / side effect / minocycline

XT - minocycline / adverse drug reaction / acne vulgaris

XT - minocycline / adverse drug reaction / acne

XT - minocycline / adverse drug reaction / allergic pneumonitis

XT - minocycline / adverse drug reaction / arthralgia

XT - minocycline / adverse drug reaction / brain edema

XT - minocycline / adverse drug reaction / hypertension

XT - minocycline / adverse drug reaction / myalgia

JF - Antibiotics

JA - Antibiotics

LA - English

VL - 10

IS - 7

SP - 757

CY - Switzerland

PB - MDPI

SN - 2079-6382 (electronic)

SN - 2079-6382

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UR - https://www.mdpi.com/2079-6382/10/7/757/pdf

DO - https://dx.doi.org/10.3390/antibiotics10070757

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2007694030

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2fantibiotics10070757Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Martins&issn=2079-6382&title=Antibiotics&atitle=A+review+of+systemic+minocycline+side+effects+and+topical+minocycline+as+a+safer+alternative+for+treating+acne+and+rosacea&volume=10&issue=7&spage=757&epage=&date=2021&doi=10.3390%2Fantibiotics10070757&pmid=&sid=OVID:embase

158.

TY - JOUR

DB - Embase

AN - 2007647887

ID - 34356595 [https://www.ncbi.nlm.nih.gov/pubmed/?term=34356595]

T1 - On the role of paraoxonase-1 and chemokine ligand 2 (C-c motif) in metabolic alterations linked to inflammation and disease. a 2021 update

A1 - Camps J.

A1 - Castane H.

A1 - Rodriguez-Tomas E.

A1 - Baiges-Gaya G.

A1 - Hernandez-Aguilera A.

A1 - Arenas M.

A1 - Iftimie S.

A1 - Joven J.

Y1 - 2021//

N2 - Infectious and many non-infectious diseases share common molecular mechanisms. Among them, oxidative stress and the subsequent inflammatory reaction are of particular note. Metabolic disorders induced by external agents, be they bacterial or viral pathogens, excessive calorie intake, poor-quality nutrients, or environmental factors produce an imbalance between the production of free radicals and endogenous antioxidant systems; the consequence being the oxidation of lipids, proteins, and nucleic acids. Oxidation and inflammation are closely related, and whether oxidative stress and inflammation represent the causes or consequences of cellular pathology, both produce metabolic alterations that influence the pathogenesis of the disease. In this review, we highlight two key molecules in the regulation of these processes: Paraoxonase-1 (PON1) and chemokine (C-C motif) ligand 2 (CCL2). PON1 is an enzyme bound to high-density lipoproteins. It breaks down lipid peroxides in lipoproteins and cells, participates in the protection conferred by HDL against different infectious agents, and is considered part of the innate immune system. With PON1 deficiency, CCL2 production increases, inducing migration and infiltration of immune cells in target tissues and disturbing normal metabolic function. This disruption involves pathways controlling cellular homeostasis as well as metabolically-driven chronic inflammatory states. Hence, an understanding of these relationships would help improve treatments and, as well, identify new therapeutic targets.Copyright © 2021 by the authors. Licensee MDPI, Basel, Switzerland.

KW - adaptive immunity

KW - aerobic glycolysis

KW - amino acid metabolism

KW - antibiotic resistance

KW - antioxidant activity

KW - antiviral activity

KW - apoptosis

KW - asymptomatic bacteriuria

KW - atherogenesis

KW - atherosclerosis

KW - atrial fibrillation

KW - autopsy

KW - bacteriuria

KW - bariatric surgery

KW - biofilm

KW - bladder cancer

KW - body mass

KW - bronchoalveolar lavage fluid

KW - caloric intake

KW - cancer staging

KW - carbon metabolism

KW - cardiovascular disease

KW - carotid endarterectomy

KW - CD4+ T lymphocyte

KW - cell migration

KW - cell survival

KW - chemoradiotherapy

KW - coinfection

KW - colorectal cancer

KW - coronary artery disease

KW - dengue

KW - depression

KW - diagnostic accuracy

KW - endoplasmic reticulum stress

KW - energy metabolism

KW - environmental factor

KW - fatty liver

KW - food intake

KW - gastrectomy

KW - gene expression

KW - genotype

KW - glioblastoma

KW - glucose metabolism

KW - glycolysis

KW - head and neck cancer

KW - histology

KW - homeostasis

KW - human

KW - Human immunodeficiency virus infection

KW - hypertension

KW - hypoxia

KW - immune response

KW - immune system

KW - immunocompetent cell

KW - \*inflammation

KW - innate immunity

KW - insulin resistance

KW - laparoscopic sleeve gastrectomy

KW - lipid diet

KW - lipid metabolism

KW - lipid oxidation

KW - lipid peroxidation

KW - lipidomics

KW - lipodystrophy

KW - liver biopsy

KW - liver cirrhosis

KW - liver injury

KW - liver transplantation

KW - lung lavage

KW - lymphocyte count

KW - malignant neoplasm

KW - metabolic disorder

KW - \*metabolic regulation

KW - metabolic syndrome X

KW - metabolism

KW - metabolomics

KW - metastasis

KW - microbiome

KW - mouth squamous cell carcinoma

KW - Mycobacterium tuberculosis

KW - neoadjuvant chemotherapy

KW - non communicable disease

KW - nonalcoholic fatty liver

KW - nonhuman

KW - nutrient

KW - obesity

KW - oxidation

KW - oxidative phosphorylation

KW - oxidative stress

KW - percutaneous biopsy

KW - peripheral occlusive artery disease

KW - \*physical disease

KW - physiological stress

KW - prevalence

KW - prostate cancer

KW - protein function

KW - protein synthesis

KW - Pseudomonas aeruginosa

KW - quorum sensing

KW - receiver operating characteristic

KW - review

KW - risk factor

KW - sensitivity and specificity

KW - sepsis

KW - shear stress

KW - signal transduction

KW - sleeve gastrectomy

KW - target tissue

KW - traffic accident

KW - tumor associated leukocyte

KW - tumor growth

KW - tumor microenvironment

KW - unfolded protein response

KW - upregulation

KW - uterine cervix cancer

KW - 4 aminohippuric acid/ec [Endogenous Compound]

KW - activating transcription factor 6/ec [Endogenous Compound]

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - antioxidant/ec [Endogenous Compound]

KW - apolipoprotein E/ec [Endogenous Compound]

KW - \*aryldialkylphosphatase 1/ec [Endogenous Compound]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - betaine/ec [Endogenous Compound]

KW - catalase/ec [Endogenous Compound]

KW - chemokine/ec [Endogenous Compound]

KW - creatinine/ec [Endogenous Compound]

KW - endothelial nitric oxide synthase/ec [Endogenous Compound]

KW - estrogen receptor/ec [Endogenous Compound]

KW - free radical/ec [Endogenous Compound]

KW - ghrelin/ec [Endogenous Compound]

KW - glucose/ec [Endogenous Compound]

KW - glutathione/ec [Endogenous Compound]

KW - glutathione reductase/ec [Endogenous Compound]

KW - high density lipoprotein/ec [Endogenous Compound]

KW - homocysteine/ec [Endogenous Compound]

KW - inflammasome/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - ketone body/ec [Endogenous Compound]

KW - lamin A/ec [Endogenous Compound]

KW - lipid peroxide/ec [Endogenous Compound]

KW - liver X receptor/ec [Endogenous Compound]

KW - low density lipoprotein cholesterol/ec [Endogenous Compound]

KW - lysophosphatidylcholine/ec [Endogenous Compound]

KW - mammalian target of rapamycin/ec [Endogenous Compound]

KW - mammalian target of rapamycin complex 1/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - microRNA 210/ec [Endogenous Compound]

KW - mitofusin 2/ec [Endogenous Compound]

KW - \*monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - nucleic acid/ec [Endogenous Compound]

KW - occludin/ec [Endogenous Compound]

KW - oxidized low density lipoprotein/ec [Endogenous Compound]

KW - phosphatidylcholine/ec [Endogenous Compound]

KW - phosphatidylethanolamine/ec [Endogenous Compound]

KW - phosphatidylserine/ec [Endogenous Compound]

KW - phospholipid/ec [Endogenous Compound]

KW - protein p53/ec [Endogenous Compound]

KW - reactive oxygen metabolite/ec [Endogenous Compound]

KW - reduced nicotinamide adenine dinucleotide phosphate oxidase/ec [Endogenous Compound]

KW - sequestosome 1/ec [Endogenous Compound]

KW - serum amyloid A/ec [Endogenous Compound]

KW - sphingomyelin/ec [Endogenous Compound]

KW - superoxide dismutase/ec [Endogenous Compound]

KW - transcriptome/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - vasculotropin/ec [Endogenous Compound]

JF - Biomolecules

JA - Biomolecules

LA - English

VL - 11

IS - 7

SP - 971

CY - Switzerland

PB - MDPI AG

SN - 2218-273X (electronic)

SN - 2218-273X

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UR - https://www.mdpi.com/2218-273X/11/7/971/pdf

DO - https://dx.doi.org/10.3390/biom11070971

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2007647887

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2fbiom11070971Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Camps&issn=2218-273X&title=Biomolecules&atitle=On+the+role+of+paraoxonase-1+and+chemokine+ligand+2+%28C-c+motif%29+in+metabolic+alterations+linked+to+inflammation+and+disease.+a+2021+update&volume=11&issue=7&spage=971&epage=&date=2021&doi=10.3390%2Fbiom11070971&pmid=34356595&sid=OVID:embase

159.

TY - JOUR

DB - Embase

AN - 2007613393

T1 - Perspectives on emergency medicine in psychiatry

A1 - Nagamine T.

Y1 - 2021//

KW - bacterial translocation

KW - bipolar disorder

KW - cardiovascular disease

KW - Clostridium butyricum

KW - Clostridium difficile infection

KW - depression

KW - diabetic ketoacidosis

KW - editorial

KW - \*emergency medicine

KW - emergency physician

KW - emergency ward

KW - human

KW - hypercholesterolemia

KW - intensive care unit

KW - intestine flora

KW - life expectancy

KW - major depression

KW - mental disease

KW - metabolic syndrome X

KW - metabolite

KW - mortality

KW - obesity

KW - \*psychiatry

KW - psychosis

KW - rhabdomyolysis

KW - schizophrenia

KW - septic shock

JF - International Medical Journal

JA - Int. Med. J.

LA - English

VL - 28

IS - 3

SP - 278

EP - 279

CY - Japan

PB - Japan International Cultural Exchange Foundation

SN - 1341-2051

SN - 2436-3294

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UR - https://www.imj-1994.com/

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2007613393

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&AN=2007613393Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Nagamine&issn=1341-2051&title=International+Medical+Journal&atitle=Perspectives+on+emergency+medicine+in+psychiatry&volume=28&issue=3&spage=278&epage=279&date=2021&doi=&pmid=&sid=OVID:embase

160.

TY - JOUR

DB - Embase

AN - 2013483197

ID - 33059576 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33059576]

T1 - Peripheral and central glutamate dyshomeostasis in neurodegenerative disorders

A1 - Onaolapo A.Y.

A1 - Onaolapo O.J.

Y1 - 2021//

N2 - Glutamate's role as the major excitatory neurotransmitter of the mammalian central nervous system requires that its brain concentrations be kept tightly-controlled. However, in hepatic encephalopathy resulting from liver dysfunction; disruption of central neurotransmission and elevation of brain glutamate levels have been observed. These had been associated with certain neurological changes. While neurological changes resulting from hepatic encephalopathy are believed to be transient, the discovery of alterations in liver enzymes in Alzheimer's disease and the role of glutamate and glutamate homeostasis in hepatic encephalopathy have piqued interests in the possible role of glutamate, and glutamate homeostasis in neurodegenerative diseases. Here, we discuss the evidence in support of the involvement of peripheral/central glutamate homeostasis in the development of neurodegenerative disorders, as well as, the implications of such interactions in the development of new therapies for neurodegenerative disorders.Copyright © 2021 Bentham Science Publishers.

KW - Alzheimer disease

KW - amyotrophic lateral sclerosis

KW - animal model

KW - area postrema

KW - blood brain barrier

KW - bone metabolism

KW - brain depth stimulation

KW - brain development

KW - breast cancer

KW - cancer growth

KW - central nervous system

KW - \*degenerative disease

KW - DNA methylation

KW - down regulation

KW - Down syndrome

KW - electroencephalogram

KW - exocytosis

KW - \*gastrointestinal tract

KW - glaucoma

KW - glioblastoma

KW - glucose blood level

KW - glucose infusion

KW - histology

KW - homeostasis

KW - human

KW - hydrogen bond

KW - intestine flora

KW - liver cirrhosis

KW - liver dysfunction

KW - long term depression

KW - medial prefrontal cortex

KW - microbial diversity

KW - mouse

KW - nerve cell plasticity

KW - nervous system development

KW - neuropathic pain

KW - neuroprotection

KW - neurotransmission

KW - nonhuman

KW - nucleus accumbens

KW - oxidative stress

KW - Parkinson disease

KW - presynaptic membrane

KW - protein expression

KW - protein intake

KW - review

KW - spinal cord injury

KW - transamination

KW - traumatic brain injury

KW - upregulation

KW - alanine aminotransferase

KW - AMPA receptor

KW - \*antiporter

KW - aspartate aminotransferase

KW - autoantibody

KW - ceftriaxone

KW - cystine

KW - dexamethasone

KW - glutamate ammonia ligase

KW - glutamate dehydrogenase

KW - \*glutamate receptor

KW - glutamate sodium

KW - glutamic acid

KW - glutamine

KW - heat shock protein 90

KW - interleukin 18

KW - ionotropic receptor

KW - liver enzyme

KW - microRNA

KW - n methyl dextro aspartic acid receptor

KW - neurotransmitter

KW - prolactin

KW - protein p53

KW - \*sodium

KW - transcription factor AP 1

KW - tumor necrosis factor

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PT - Review

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ER -

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T1 - Antibiotics: Conventional therapy and natural compounds with antibacterial activity-a pharmaco-toxicological screening

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N2 - Antibiotics are considered as a cornerstone of modern medicine and their discovery offers the resolution to the infectious diseases problem. However, the excessive use of antibiotics worldwide has generated a critical public health issue and the bacterial resistance correlated with antibiotics inefficiency is still unsolved. Finding novel therapeutic approaches to overcome bacterial resistance is imperative, and natural compounds with antibacterial effects could be considered a promising option. The role played by antibiotics in tumorigenesis and their interrelation with the microbiota are still debatable and are far from being elucidated. Thus, the present manuscript offers a global perspective on antibiotics in terms of evolution from a historical perspective with an emphasis on the main classes of antibiotics and their adverse effects. It also highlights the connection between antibiotics and microbiota, focusing on the dual role played by antibiotics in tumorigenesis. In addition, using the natural compounds with antibacterial properties as potential alternatives for the classical antibiotic therapy is discussed.Copyright © 2021 by the authors.

KW - abdominal cramp/si [Side Effect]

KW - acute brain disease/si [Side Effect]

KW - acute myeloid leukemia/dt [Drug Therapy]

KW - acute respiratory failure/si [Side Effect]

KW - anemia/si [Side Effect]

KW - anorexia/si [Side Effect]

KW - \*antibacterial activity

KW - antibiotic resistance

KW - article

KW - bacterial flora

KW - bacterial infection/dt [Drug Therapy]

KW - bladder cancer/dt [Drug Therapy]

KW - bleeding/si [Side Effect]

KW - breast cancer/dt [Drug Therapy]

KW - carcinogenesis

KW - carcinoma/dt [Drug Therapy]

KW - cardiotoxicity/si [Side Effect]

KW - codon

KW - colon cancer/dt [Drug Therapy]

KW - colorectal carcinoma/dt [Drug Therapy]

KW - coma/si [Side Effect]

KW - confusion/si [Side Effect]

KW - depression/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - disorientation/si [Side Effect]

KW - drug binding

KW - epigastric pain/si [Side Effect]

KW - epileptic state/si [Side Effect]

KW - female genital tract cancer/dt [Drug Therapy]

KW - fever/si [Side Effect]

KW - gastrointestinal disease/si [Side Effect]

KW - gastrointestinal symptom/si [Side Effect]

KW - germ cell tumor/dt [Drug Therapy]

KW - glioma/dt [Drug Therapy]

KW - headache/si [Side Effect]

KW - heart disease/si [Side Effect]

KW - heart ventricle arrhythmia/si [Side Effect]

KW - hematologic disease/si [Side Effect]

KW - human

KW - hydrogen bond

KW - hypersensitivity/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - interstitial nephritis/si [Side Effect]

KW - intestine flora

KW - kidney disease/si [Side Effect]

KW - life expectancy

KW - liver cell carcinoma/dt [Drug Therapy]

KW - liver fibrosis/si [Side Effect]

KW - liver toxicity/si [Side Effect]

KW - lung cancer/dt [Drug Therapy]

KW - lung disease/si [Side Effect]

KW - lung toxicity/si [Side Effect]

KW - lymphatic leukemia/dt [Drug Therapy]

KW - lymphoma/dt [Drug Therapy]

KW - maculopapular rash/si [Side Effect]

KW - malignant pleura effusion/si [Side Effect]

KW - melanoma/dt [Drug Therapy]

KW - microbial diversity

KW - microbial interaction

KW - minimum inhibitory concentration

KW - myoclonus epilepsy/si [Side Effect]

KW - nausea and vomiting/si [Side Effect]

KW - nephroblastoma/dt [Drug Therapy]

KW - nephrotoxicity/si [Side Effect]

KW - neuroblastoma/dt [Drug Therapy]

KW - neurotoxicity/si [Side Effect]

KW - nonhuman

KW - nucleic acid synthesis

KW - ovary carcinoma/dt [Drug Therapy]

KW - oxidative phosphorylation

KW - peripheral neuropathy/si [Side Effect]

KW - permeability

KW - phototoxicity/si [Side Effect]

KW - pneumonia/dt [Drug Therapy]

KW - protein synthesis

KW - psychosis/si [Side Effect]

KW - rash/si [Side Effect]

KW - rhabdomyosarcoma/dt [Drug Therapy]

KW - \*screening

KW - seizure/si [Side Effect]

KW - soft tissue sarcoma/dt [Drug Therapy]

KW - stomach cancer/dt [Drug Therapy]

KW - thrombocytopenia/si [Side Effect]

KW - \*toxicology

KW - tuberculosis/dt [Drug Therapy]

KW - typhoid fever/dt [Drug Therapy]

KW - 2 oxazolidinone derivative/dt [Drug Therapy]

KW - 2 oxazolidinone derivative/pd [Pharmacology]

KW - 4 aminobenzoic acid/dt [Drug Therapy]

KW - 4 aminobenzoic acid/pd [Pharmacology]

KW - alkaloid/dt [Drug Therapy]

KW - alkaloid/pd [Pharmacology]

KW - Aloe barbadensis extract/dt [Drug Therapy]

KW - Aloe barbadensis extract/pd [Pharmacology]

KW - amikacin/ae [Adverse Drug Reaction]

KW - amikacin/dt [Drug Therapy]

KW - amikacin/pd [Pharmacology]

KW - aminoglycoside/ae [Adverse Drug Reaction]

KW - aminoglycoside/dt [Drug Therapy]

KW - aminoglycoside/pd [Pharmacology]

KW - amoxicillin/ae [Adverse Drug Reaction]

KW - amoxicillin/dt [Drug Therapy]

KW - amoxicillin/pd [Pharmacology]

KW - ampicillin/ae [Adverse Drug Reaction]

KW - ampicillin/dt [Drug Therapy]

KW - ampicillin/pd [Pharmacology]

KW - ansamycin derivative/dt [Drug Therapy]

KW - ansamycin derivative/pd [Pharmacology]

KW - antibiotic agent/ae [Adverse Drug Reaction]

KW - antibiotic agent/dt [Drug Therapy]

KW - antibiotic agent/pd [Pharmacology]

KW - Azadirachta indica extract/dt [Drug Therapy]

KW - Azadirachta indica extract/pd [Pharmacology]

KW - azithromycin/ae [Adverse Drug Reaction]

KW - azithromycin/dt [Drug Therapy]

KW - azithromycin/pd [Pharmacology]

KW - azlocillin/dt [Drug Therapy]

KW - azlocillin/pd [Pharmacology]

KW - aztreonam/dt [Drug Therapy]

KW - aztreonam/pd [Pharmacology]

KW - bacitracin/dt [Drug Therapy]

KW - bacitracin/pd [Pharmacology]

KW - benzathine penicillin/ae [Adverse Drug Reaction]

KW - benzathine penicillin/dt [Drug Therapy]

KW - benzathine penicillin/pd [Pharmacology]

KW - beta lactam/ae [Adverse Drug Reaction]

KW - beta lactam/dt [Drug Therapy]

KW - beta lactam/pd [Pharmacology]

KW - bleomycin/dt [Drug Therapy]

KW - bleomycin/pd [Pharmacology]

KW - cannabis/dt [Drug Therapy]

KW - cannabis/pd [Pharmacology]

KW - carbapenem/dt [Drug Therapy]

KW - carbapenem/pd [Pharmacology]

KW - carbenicillin/ae [Adverse Drug Reaction]

KW - carbenicillin/dt [Drug Therapy]

KW - carbenicillin/pd [Pharmacology]

KW - cefaclor/dt [Drug Therapy]

KW - cefaclor/pd [Pharmacology]

KW - cefalexin/dt [Drug Therapy]

KW - cefalexin/pd [Pharmacology]

KW - cefaloridine/dt [Drug Therapy]

KW - cefaloridine/pd [Pharmacology]

KW - cefalotin/dt [Drug Therapy]

KW - cefalotin/pd [Pharmacology]

KW - cefamandole/ae [Adverse Drug Reaction]

KW - cefamandole/dt [Drug Therapy]

KW - cefamandole/pd [Pharmacology]

KW - cefapirin/dt [Drug Therapy]

KW - cefapirin/pd [Pharmacology]

KW - cefazolin/ae [Adverse Drug Reaction]

KW - cefazolin/dt [Drug Therapy]

KW - cefazolin/pd [Pharmacology]

KW - cefdinir/dt [Drug Therapy]

KW - cefdinir/pd [Pharmacology]

KW - cefepime/ae [Adverse Drug Reaction]

KW - cefepime/dt [Drug Therapy]

KW - cefepime/pd [Pharmacology]

KW - cefixime/dt [Drug Therapy]

KW - cefixime/pd [Pharmacology]

KW - cefmetazole/ae [Adverse Drug Reaction]

KW - cefmetazole/dt [Drug Therapy]

KW - cefmetazole/pd [Pharmacology]

KW - cefoperazone/ae [Adverse Drug Reaction]

KW - cefoperazone/dt [Drug Therapy]

KW - cefoperazone/pd [Pharmacology]

KW - cefotaxime/ae [Adverse Drug Reaction]

KW - cefotaxime/dt [Drug Therapy]

KW - cefotaxime/pd [Pharmacology]

KW - cefoxitin/dt [Drug Therapy]

KW - cefoxitin/pd [Pharmacology]

KW - cefpirome/ae [Adverse Drug Reaction]

KW - cefpirome/dt [Drug Therapy]

KW - cefpirome/pd [Pharmacology]

KW - cefpodoxime/dt [Drug Therapy]

KW - cefpodoxime/pd [Pharmacology]

KW - cefprozil/dt [Drug Therapy]

KW - cefprozil/pd [Pharmacology]

KW - cefradine/ae [Adverse Drug Reaction]

KW - cefradine/dt [Drug Therapy]

KW - cefradine/pd [Pharmacology]

KW - ceftaroline/dt [Drug Therapy]

KW - ceftaroline/pd [Pharmacology]

KW - ceftazidime/ae [Adverse Drug Reaction]

KW - ceftazidime/dt [Drug Therapy]

KW - ceftazidime/pd [Pharmacology]

KW - ceftibuten/dt [Drug Therapy]

KW - ceftibuten/pd [Pharmacology]

KW - ceftizoxime/dt [Drug Therapy]

KW - ceftizoxime/pd [Pharmacology]

KW - ceftobiprole/dt [Drug Therapy]

KW - ceftobiprole/pd [Pharmacology]

KW - ceftriaxone/ae [Adverse Drug Reaction]

KW - ceftriaxone/dt [Drug Therapy]

KW - ceftriaxone/pd [Pharmacology]

KW - cefuroxime/ae [Adverse Drug Reaction]

KW - cefuroxime/dt [Drug Therapy]

KW - cefuroxime/pd [Pharmacology]

KW - cephalosporin/ae [Adverse Drug Reaction]

KW - cephalosporin/dt [Drug Therapy]

KW - cephalosporin/pd [Pharmacology]

KW - chloramphenicol/ae [Adverse Drug Reaction]

KW - chloramphenicol/dt [Drug Therapy]

KW - chloramphenicol/pd [Pharmacology]

KW - chlortetracycline/dt [Drug Therapy]

KW - chlortetracycline/pd [Pharmacology]

KW - ciprofloxacin/ae [Adverse Drug Reaction]

KW - ciprofloxacin/dt [Drug Therapy]

KW - ciprofloxacin/pd [Pharmacology]

KW - clarithromycin/ae [Adverse Drug Reaction]

KW - clarithromycin/dt [Drug Therapy]

KW - clarithromycin/pd [Pharmacology]

KW - cloxacillin/dt [Drug Therapy]

KW - cloxacillin/pd [Pharmacology]

KW - cotrimoxazole/ae [Adverse Drug Reaction]

KW - cotrimoxazole/dt [Drug Therapy]

KW - cotrimoxazole/pd [Pharmacology]

KW - Curcuma longa extract/dt [Drug Therapy]

KW - Curcuma longa extract/pd [Pharmacology]

KW - cycloserine/dt [Drug Therapy]

KW - cycloserine/pd [Pharmacology]

KW - cyclotide/dt [Drug Therapy]

KW - cyclotide/pd [Pharmacology]

KW - Cymbopogon citratus extract/dt [Drug Therapy]

KW - Cymbopogon citratus extract/pd [Pharmacology]

KW - dactinomycin/dt [Drug Therapy]

KW - dactinomycin/pd [Pharmacology]

KW - daptomycin/ae [Adverse Drug Reaction]

KW - daptomycin/dt [Drug Therapy]

KW - daptomycin/pd [Pharmacology]

KW - daunorubicin/dt [Drug Therapy]

KW - daunorubicin/pd [Pharmacology]

KW - demeclocycline/dt [Drug Therapy]

KW - demeclocycline/pd [Pharmacology]

KW - doripenem/dt [Drug Therapy]

KW - doripenem/pd [Pharmacology]

KW - doxorubicin/dt [Drug Therapy]

KW - doxorubicin/pd [Pharmacology]

KW - doxycycline/ae [Adverse Drug Reaction]

KW - doxycycline/dt [Drug Therapy]

KW - doxycycline/pd [Pharmacology]

KW - enoxacin/ae [Adverse Drug Reaction]

KW - enoxacin/dt [Drug Therapy]

KW - enoxacin/pd [Pharmacology]

KW - epirubicin/dt [Drug Therapy]

KW - epirubicin/pd [Pharmacology]

KW - erythromycin/ae [Adverse Drug Reaction]

KW - erythromycin/dt [Drug Therapy]

KW - erythromycin/pd [Pharmacology]

KW - essential oil/dt [Drug Therapy]

KW - essential oil/pd [Pharmacology]

KW - ethambutol/dt [Drug Therapy]

KW - ethambutol/pd [Pharmacology]

KW - farnesol/dt [Drug Therapy]

KW - farnesol/pd [Pharmacology]

KW - fidaxomicin/dt [Drug Therapy]

KW - fidaxomicin/pd [Pharmacology]

KW - fleroxacin/ae [Adverse Drug Reaction]

KW - fleroxacin/dt [Drug Therapy]

KW - fleroxacin/pd [Pharmacology]

KW - gemifloxacin/ae [Adverse Drug Reaction]

KW - gemifloxacin/dt [Drug Therapy]

KW - gemifloxacin/pd [Pharmacology]

KW - gentamicin/ae [Adverse Drug Reaction]

KW - gentamicin/dt [Drug Therapy]

KW - gentamicin/pd [Pharmacology]

KW - ginger extract/dt [Drug Therapy]

KW - ginger extract/pd [Pharmacology]

KW - glycopeptide/dt [Drug Therapy]

KW - glycopeptide/pd [Pharmacology]

KW - guava extract/dt [Drug Therapy]

KW - guava extract/pd [Pharmacology]

KW - imipenem/dt [Drug Therapy]

KW - imipenem/pd [Pharmacology]

KW - isepamicin/dt [Drug Therapy]

KW - isepamicin/pd [Pharmacology]

KW - isoniazid/ae [Adverse Drug Reaction]

KW - isoniazid/dt [Drug Therapy]

KW - isoniazid/pd [Pharmacology]

KW - josamycin/dt [Drug Therapy]

KW - josamycin/pd [Pharmacology]

KW - kanamycin/ae [Adverse Drug Reaction]

KW - kanamycin/dt [Drug Therapy]

KW - kanamycin/pd [Pharmacology]

KW - lectin/dt [Drug Therapy]

KW - lectin/pd [Pharmacology]

KW - levofloxacin/ae [Adverse Drug Reaction]

KW - levofloxacin/dt [Drug Therapy]

KW - levofloxacin/pd [Pharmacology]

KW - lincosamide/ae [Adverse Drug Reaction]

KW - lincosamide/dt [Drug Therapy]

KW - lincosamide/pd [Pharmacology]

KW - lipopeptide/dt [Drug Therapy]

KW - lipopeptide/pd [Pharmacology]

KW - lomefloxacin/ae [Adverse Drug Reaction]

KW - lomefloxacin/dt [Drug Therapy]

KW - lomefloxacin/pd [Pharmacology]

KW - loracarbef/dt [Drug Therapy]

KW - loracarbef/pd [Pharmacology]

KW - macrolide/ae [Adverse Drug Reaction]

KW - macrolide/dt [Drug Therapy]

KW - macrolide/pd [Pharmacology]

KW - meropenem/ae [Adverse Drug Reaction]

KW - meropenem/dt [Drug Therapy]

KW - meropenem/pd [Pharmacology]

KW - metacycline/ae [Adverse Drug Reaction]

KW - metacycline/dt [Drug Therapy]

KW - metacycline/pd [Pharmacology]

KW - meticillin/ae [Adverse Drug Reaction]

KW - meticillin/dt [Drug Therapy]

KW - meticillin/pd [Pharmacology]

KW - mezlocillin/dt [Drug Therapy]

KW - mezlocillin/pd [Pharmacology]

KW - minocycline/ae [Adverse Drug Reaction]

KW - minocycline/dt [Drug Therapy]

KW - minocycline/pd [Pharmacology]

KW - mithramycin/dt [Drug Therapy]

KW - mithramycin/pd [Pharmacology]

KW - mitomycin/dt [Drug Therapy]

KW - mitomycin/pd [Pharmacology]

KW - moxifloxacin/ae [Adverse Drug Reaction]

KW - moxifloxacin/dt [Drug Therapy]

KW - moxifloxacin/pd [Pharmacology]

KW - nafcillin/dt [Drug Therapy]

KW - nafcillin/pd [Pharmacology]

KW - nalidixic acid/dt [Drug Therapy]

KW - nalidixic acid/pd [Pharmacology]

KW - natural product/dt [Drug Therapy]

KW - natural product/pd [Pharmacology]

KW - neomycin/ae [Adverse Drug Reaction]

KW - neomycin/dt [Drug Therapy]

KW - neomycin/pd [Pharmacology]

KW - netilmicin/dt [Drug Therapy]

KW - netilmicin/pd [Pharmacology]

KW - nitrofuran derivative/dt [Drug Therapy]

KW - nitrofuran derivative/pd [Pharmacology]

KW - nitrofurantoin/ae [Adverse Drug Reaction]

KW - nitrofurantoin/dt [Drug Therapy]

KW - nitrofurantoin/pd [Pharmacology]

KW - norfloxacin/ae [Adverse Drug Reaction]

KW - norfloxacin/dt [Drug Therapy]

KW - norfloxacin/pd [Pharmacology]

KW - novobiocin/dt [Drug Therapy]

KW - novobiocin/pd [Pharmacology]

KW - Ocimum sanctum extract/dt [Drug Therapy]

KW - Ocimum sanctum extract/pd [Pharmacology]

KW - ofloxacin/ae [Adverse Drug Reaction]

KW - ofloxacin/dt [Drug Therapy]

KW - ofloxacin/pd [Pharmacology]

KW - oleandomycin/ae [Adverse Drug Reaction]

KW - oleandomycin/dt [Drug Therapy]

KW - oleandomycin/pd [Pharmacology]

KW - Orthosiphon aristatus extract/dt [Drug Therapy]

KW - Orthosiphon aristatus extract/pd [Pharmacology]

KW - oxacillin/ae [Adverse Drug Reaction]

KW - oxacillin/dt [Drug Therapy]

KW - oxacillin/pd [Pharmacology]

KW - oxytetracycline/ae [Adverse Drug Reaction]

KW - oxytetracycline/dt [Drug Therapy]

KW - oxytetracycline/pd [Pharmacology]

KW - paromomycin/dt [Drug Therapy]

KW - paromomycin/pd [Pharmacology]

KW - pefloxacin/dt [Drug Therapy]

KW - pefloxacin/pd [Pharmacology]

KW - penicillin derivative/ae [Adverse Drug Reaction]

KW - penicillin derivative/dt [Drug Therapy]

KW - penicillin derivative/pd [Pharmacology]

KW - penicillin G/ae [Adverse Drug Reaction]

KW - penicillin G/dt [Drug Therapy]

KW - penicillin G/pd [Pharmacology]

KW - penicillin V/ae [Adverse Drug Reaction]

KW - penicillin V/dt [Drug Therapy]

KW - penicillin V/pd [Pharmacology]

KW - phenazine/dt [Drug Therapy]

KW - phenazine/pd [Pharmacology]

KW - phenol/dt [Drug Therapy]

KW - phenol/pd [Pharmacology]

KW - phthalylsulfathiazole/dt [Drug Therapy]

KW - phthalylsulfathiazole/pd [Pharmacology]

KW - piperacillin/ae [Adverse Drug Reaction]

KW - piperacillin/dt [Drug Therapy]

KW - piperacillin/pd [Pharmacology]

KW - pleuromutilin/dt [Drug Therapy]

KW - pleuromutilin/pd [Pharmacology]

KW - polyphenol/dt [Drug Therapy]

KW - polyphenol/pd [Pharmacology]

KW - pomegranate extract/dt [Drug Therapy]

KW - pomegranate extract/pd [Pharmacology]

KW - pyrogallol/dt [Drug Therapy]

KW - pyrogallol/pd [Pharmacology]

KW - pyrrole/ae [Adverse Drug Reaction]

KW - pyrrole/dt [Drug Therapy]

KW - pyrrole/pd [Pharmacology]

KW - quinoline/ae [Adverse Drug Reaction]

KW - quinoline/dt [Drug Therapy]

KW - quinoline/pd [Pharmacology]

KW - quinoline derived antiinfective agent/ae [Adverse Drug Reaction]

KW - quinoline derived antiinfective agent/dt [Drug Therapy]

KW - quinoline derived antiinfective agent/pd [Pharmacology]

KW - quinolone/ae [Adverse Drug Reaction]

KW - quinolone/dt [Drug Therapy]

KW - quinolone/pd [Pharmacology]

KW - quinupristin/dt [Drug Therapy]

KW - quinupristin/pd [Pharmacology]

KW - retapamulin/dt [Drug Therapy]

KW - retapamulin/pd [Pharmacology]

KW - Rosmarinus officinalis extract/dt [Drug Therapy]

KW - Rosmarinus officinalis extract/pd [Pharmacology]

KW - sesquiterpene/dt [Drug Therapy]

KW - sesquiterpene/pd [Pharmacology]

KW - sisomicin/ae [Adverse Drug Reaction]

KW - sisomicin/dt [Drug Therapy]

KW - sisomicin/pd [Pharmacology]

KW - Solanum nigrum extract/dt [Drug Therapy]

KW - Solanum nigrum extract/pd [Pharmacology]

KW - sparfloxacin/ae [Adverse Drug Reaction]

KW - sparfloxacin/dt [Drug Therapy]

KW - sparfloxacin/pd [Pharmacology]

KW - spectinomycin/dt [Drug Therapy]

KW - spectinomycin/pd [Pharmacology]

KW - squalamine/dt [Drug Therapy]

KW - squalamine/pd [Pharmacology]

KW - streptogramin derivative/ae [Adverse Drug Reaction]

KW - streptogramin derivative/dt [Drug Therapy]

KW - streptogramin derivative/pd [Pharmacology]

KW - streptomycin/ae [Adverse Drug Reaction]

KW - streptomycin/dt [Drug Therapy]

KW - streptomycin/pd [Pharmacology]

KW - sulfadiazine/dt [Drug Therapy]

KW - sulfadiazine/pd [Pharmacology]

KW - sulfafurazole/dt [Drug Therapy]

KW - sulfafurazole/pd [Pharmacology]

KW - sulfamethoxazole/dt [Drug Therapy]

KW - sulfamethoxazole/pd [Pharmacology]

KW - sulfamidochrysoidine/dt [Drug Therapy]

KW - sulfamidochrysoidine/pd [Pharmacology]

KW - sulfanilamide/ae [Adverse Drug Reaction]

KW - sulfanilamide/dt [Drug Therapy]

KW - sulfanilamide/pd [Pharmacology]

KW - sulfonamide/ae [Adverse Drug Reaction]

KW - sulfonamide/dt [Drug Therapy]

KW - sulfonamide/pd [Pharmacology]

KW - teicoplanin/dt [Drug Therapy]

KW - teicoplanin/pd [Pharmacology]

KW - temocillin/dt [Drug Therapy]

KW - temocillin/pd [Pharmacology]

KW - tetracycline/ae [Adverse Drug Reaction]

KW - tetracycline/dt [Drug Therapy]

KW - tetracycline/pd [Pharmacology]

KW - thioamide/dt [Drug Therapy]

KW - thioamide/pd [Pharmacology]

KW - Thymus vulgaris extract/dt [Drug Therapy]

KW - Thymus vulgaris extract/pd [Pharmacology]

KW - ticarcillin/dt [Drug Therapy]

KW - ticarcillin/pd [Pharmacology]

KW - tigecycline/dt [Drug Therapy]

KW - tigecycline/pd [Pharmacology]

KW - tobramycin/ae [Adverse Drug Reaction]

KW - tobramycin/dt [Drug Therapy]

KW - tobramycin/pd [Pharmacology]

KW - trimethoprim/dt [Drug Therapy]

KW - trimethoprim/pd [Pharmacology]

KW - trovafloxacin/ae [Adverse Drug Reaction]

KW - trovafloxacin/dt [Drug Therapy]

KW - trovafloxacin/pd [Pharmacology]

KW - unclassified drug

KW - vancomycin/ae [Adverse Drug Reaction]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/pd [Pharmacology]

KW - Vitis vinifera extract/dt [Drug Therapy]

KW - Vitis vinifera extract/pd [Pharmacology]

KW - peripheral eosinophilia/si [Side Effect]

KW - testicular embryonal cancer/dt [Drug Therapy]

KW - 3 acetyl aleuritolic acid/dt [Drug Therapy]

KW - 3 acetyl aleuritolic acid/pd [Pharmacology]

KW - Aleurites moluccanus extract/dt [Drug Therapy]

KW - Aleurites moluccanus extract/pd [Pharmacology]

KW - Bergenia ciliata extract/dt [Drug Therapy]

KW - Bergenia ciliata extract/pd [Pharmacology]

KW - Bryophyllum pinnatum extract/dt [Drug Therapy]

KW - Bryophyllum pinnatum extract/pd [Pharmacology]

KW - Buchenavia Tomentosa extract/dt [Drug Therapy]

KW - Buchenavia Tomentosa extract/pd [Pharmacology]

KW - Caryophyllus aromaticus extract/dt [Drug Therapy]

KW - Caryophyllus aromaticus extract/pd [Pharmacology]

KW - Commiphora molmol extract/dt [Drug Therapy]

KW - Commiphora molmol extract/pd [Pharmacology]

KW - Crataegus azarolus extract/dt [Drug Therapy]

KW - Crataegus azarolus extract/pd [Pharmacology]

KW - Croton doctoris extract/dt [Drug Therapy]

KW - Croton doctoris extract/pd [Pharmacology]

KW - Croton urucurana extract/dt [Drug Therapy]

KW - Croton urucurana extract/pd [Pharmacology]

KW - Dodonaea viscosa extract/dt [Drug Therapy]

KW - Dodonaea viscosa extract/pd [Pharmacology]

KW - Euphorbia helioscopia extract/dt [Drug Therapy]

KW - Euphorbia helioscopia extract/pd [Pharmacology]

KW - ithromycin/dt [Drug Therapy]

KW - ithromycin/pd [Pharmacology]

KW - Jasminum officinale extract/dt [Drug Therapy]

KW - Jasminum officinale extract/pd [Pharmacology]

KW - Melissa offficinalis extract/dt [Drug Therapy]

KW - Melissa offficinalis extract/pd [Pharmacology]

KW - moluccanin/dt [Drug Therapy]

KW - moluccanin/pd [Pharmacology]

KW - Ocimun basilicum extract/dt [Drug Therapy]

KW - Ocimun basilicum extract/pd [Pharmacology]

KW - Origanum vulgare extract/dt [Drug Therapy]

KW - Origanum vulgare extract/pd [Pharmacology]

KW - Pimpinella anisum extract/dt [Drug Therapy]

KW - Pimpinella anisum extract/pd [Pharmacology]

KW - Santalum album extract/dt [Drug Therapy]

KW - Santalum album extract/pd [Pharmacology]

KW - Syzygyum joabolanum extract/dt [Drug Therapy]

KW - Syzygyum joabolanum extract/pd [Pharmacology]

KW - tontetracycline/ae [Adverse Drug Reaction]

KW - tontetracycline/dt [Drug Therapy]

KW - tontetracycline/pd [Pharmacology]

KW - Woodfordia floribunda extract/dt [Drug Therapy]

KW - Woodfordia floribunda extract/pd [Pharmacology]

XT - abdominal cramp / side effect / antibiotic agent

XT - abdominal cramp / side effect / benzathine penicillin

XT - abdominal cramp / side effect / cefazolin

XT - abdominal cramp / side effect / cefmetazole

XT - abdominal cramp / side effect / ceftriaxone

XT - abdominal cramp / side effect / cefuroxime

XT - abdominal cramp / side effect / cephalosporin

XT - abdominal cramp / side effect / clarithromycin

XT - abdominal cramp / side effect / daptomycin

XT - abdominal cramp / side effect / doxycycline

XT - abdominal cramp / side effect / erythromycin

XT - abdominal cramp / side effect / macrolide

XT - abdominal cramp / side effect / metacycline

XT - abdominal cramp / side effect / minocycline

XT - abdominal cramp / side effect / moxifloxacin

XT - abdominal cramp / side effect / oleandomycin

XT - abdominal cramp / side effect / oxytetracycline

XT - abdominal cramp / side effect / penicillin derivative

XT - abdominal cramp / side effect / penicillin G

XT - abdominal cramp / side effect / penicillin V

XT - abdominal cramp / side effect / quinoline derived antiinfective agent

XT - abdominal cramp / side effect / quinoline

XT - abdominal cramp / side effect / tetracycline

XT - abdominal cramp / side effect / trovafloxacin

XT - acute brain disease / side effect / amikacin

XT - acute brain disease / side effect / aminoglycoside

XT - acute brain disease / side effect / amoxicillin

XT - acute brain disease / side effect / ampicillin

XT - acute brain disease / side effect / antibiotic agent

XT - acute brain disease / side effect / azithromycin

XT - acute brain disease / side effect / carbenicillin

XT - acute brain disease / side effect / cefazolin

XT - acute brain disease / side effect / cefepime

XT - acute brain disease / side effect / cefoperazone

XT - acute brain disease / side effect / cefotaxime

XT - acute brain disease / side effect / cefpirome

XT - acute brain disease / side effect / cefradine

XT - acute brain disease / side effect / ceftazidime

XT - acute brain disease / side effect / cephalosporin

XT - acute brain disease / side effect / ciprofloxacin

XT - acute brain disease / side effect / clarithromycin

XT - acute brain disease / side effect / enoxacin

XT - acute brain disease / side effect / erythromycin

XT - acute brain disease / side effect / gemifloxacin

XT - acute brain disease / side effect / gentamicin

XT - acute brain disease / side effect / macrolide

XT - acute brain disease / side effect / moxifloxacin

XT - acute brain disease / side effect / neomycin

XT - acute brain disease / side effect / norfloxacin

XT - acute brain disease / side effect / ofloxacin

XT - acute brain disease / side effect / penicillin derivative

XT - acute brain disease / side effect / penicillin G

XT - acute brain disease / side effect / penicillin V

XT - acute brain disease / side effect / piperacillin

XT - acute brain disease / side effect / sulfonamide

XT - acute brain disease / side effect / tobramycin

XT - acute myeloid leukemia / drug therapy / daunorubicin

XT - acute respiratory failure / side effect / nitrofurantoin

XT - anemia / side effect / antibiotic agent

XT - anemia / side effect / beta lactam

XT - anemia / side effect / cefamandole

XT - anemia / side effect / cephalosporin

XT - anemia / side effect / chloramphenicol

XT - anemia / side effect / cotrimoxazole

XT - anemia / side effect / lincosamide

XT - anemia / side effect / penicillin derivative

XT - anemia / side effect / penicillin G

XT - anemia / side effect / streptogramin derivative

XT - anemia / side effect / sulfanilamide

XT - anemia / side effect / sulfonamide

XT - anorexia / side effect / antibiotic agent

XT - anorexia / side effect / benzathine penicillin

XT - anorexia / side effect / cefazolin

XT - anorexia / side effect / cefmetazole

XT - anorexia / side effect / ceftriaxone

XT - anorexia / side effect / cefuroxime

XT - anorexia / side effect / cephalosporin

XT - anorexia / side effect / clarithromycin

XT - anorexia / side effect / daptomycin

XT - anorexia / side effect / doxycycline

XT - anorexia / side effect / erythromycin

XT - anorexia / side effect / macrolide

XT - anorexia / side effect / metacycline

XT - anorexia / side effect / minocycline

XT - anorexia / side effect / moxifloxacin

XT - anorexia / side effect / oleandomycin

XT - anorexia / side effect / oxytetracycline

XT - anorexia / side effect / penicillin derivative

XT - anorexia / side effect / penicillin G

XT - anorexia / side effect / penicillin V

XT - anorexia / side effect / quinoline derived antiinfective agent

XT - anorexia / side effect / quinoline

XT - anorexia / side effect / tetracycline

XT - anorexia / side effect / trovafloxacin

XT - bacterial infection / drug therapy / 2 oxazolidinone derivative

XT - bacterial infection / drug therapy / 3 acetyl aleuritolic acid

XT - bacterial infection / drug therapy / 4 aminobenzoic acid

XT - bacterial infection / drug therapy / Aleurites moluccanus extract

XT - bacterial infection / drug therapy / alkaloid

XT - bacterial infection / drug therapy / Aloe barbadensis extract

XT - bacterial infection / drug therapy / amikacin

XT - bacterial infection / drug therapy / aminoglycoside

XT - bacterial infection / drug therapy / amoxicillin

XT - bacterial infection / drug therapy / ampicillin

XT - bacterial infection / drug therapy / ansamycin derivative

XT - bacterial infection / drug therapy / antibiotic agent

XT - bacterial infection / drug therapy / Azadirachta indica extract

XT - bacterial infection / drug therapy / azithromycin

XT - bacterial infection / drug therapy / azlocillin

XT - bacterial infection / drug therapy / aztreonam

XT - bacterial infection / drug therapy / bacitracin

XT - bacterial infection / drug therapy / benzathine penicillin

XT - bacterial infection / drug therapy / Bergenia ciliata extract

XT - bacterial infection / drug therapy / beta lactam

XT - bacterial infection / drug therapy / bleomycin

XT - bacterial infection / drug therapy / Bryophyllum pinnatum extract

XT - bacterial infection / drug therapy / Buchenavia Tomentosa extract

XT - bacterial infection / drug therapy / cannabis

XT - bacterial infection / drug therapy / carbapenem

XT - bacterial infection / drug therapy / carbenicillin

XT - bacterial infection / drug therapy / Caryophyllus aromaticus extract

XT - bacterial infection / drug therapy / cefaclor

XT - bacterial infection / drug therapy / cefalexin

XT - bacterial infection / drug therapy / cefaloridine

XT - bacterial infection / drug therapy / cefalotin

XT - bacterial infection / drug therapy / cefamandole

XT - bacterial infection / drug therapy / cefapirin

XT - bacterial infection / drug therapy / cefazolin

XT - bacterial infection / drug therapy / cefdinir

XT - bacterial infection / drug therapy / cefepime

XT - bacterial infection / drug therapy / cefixime

XT - bacterial infection / drug therapy / cefmetazole

XT - bacterial infection / drug therapy / cefoperazone

XT - bacterial infection / drug therapy / cefotaxime

XT - bacterial infection / drug therapy / cefoxitin

XT - bacterial infection / drug therapy / cefpirome

XT - bacterial infection / drug therapy / cefpodoxime

XT - bacterial infection / drug therapy / cefprozil

XT - bacterial infection / drug therapy / cefradine

XT - bacterial infection / drug therapy / ceftaroline

XT - bacterial infection / drug therapy / ceftazidime

XT - bacterial infection / drug therapy / ceftibuten

XT - bacterial infection / drug therapy / ceftizoxime

XT - bacterial infection / drug therapy / ceftobiprole

XT - bacterial infection / drug therapy / ceftriaxone

XT - bacterial infection / drug therapy / cefuroxime

XT - bacterial infection / drug therapy / cephalosporin

XT - bacterial infection / drug therapy / chloramphenicol

XT - bacterial infection / drug therapy / chlortetracycline

XT - bacterial infection / drug therapy / ciprofloxacin

XT - bacterial infection / drug therapy / clarithromycin

XT - bacterial infection / drug therapy / cloxacillin

XT - bacterial infection / drug therapy / Commiphora molmol extract

XT - bacterial infection / drug therapy / cotrimoxazole

XT - bacterial infection / drug therapy / Crataegus azarolus extract

XT - bacterial infection / drug therapy / Croton doctoris extract

XT - bacterial infection / drug therapy / Croton urucurana extract

XT - bacterial infection / drug therapy / Curcuma longa extract

XT - bacterial infection / drug therapy / cycloserine

XT - bacterial infection / drug therapy / cyclotide

XT - bacterial infection / drug therapy / Cymbopogon citratus extract

XT - bacterial infection / drug therapy / dactinomycin

XT - bacterial infection / drug therapy / daptomycin

XT - bacterial infection / drug therapy / daunorubicin

XT - bacterial infection / drug therapy / demeclocycline

XT - bacterial infection / drug therapy / Dodonaea viscosa extract

XT - bacterial infection / drug therapy / doripenem

XT - bacterial infection / drug therapy / doxorubicin

XT - bacterial infection / drug therapy / doxycycline

XT - bacterial infection / drug therapy / enoxacin

XT - bacterial infection / drug therapy / epirubicin

XT - bacterial infection / drug therapy / erythromycin

XT - bacterial infection / drug therapy / essential oil

XT - bacterial infection / drug therapy / ethambutol

XT - bacterial infection / drug therapy / Euphorbia helioscopia extract

XT - bacterial infection / drug therapy / farnesol

XT - bacterial infection / drug therapy / fidaxomicin

XT - bacterial infection / drug therapy / fleroxacin

XT - bacterial infection / drug therapy / gemifloxacin

XT - bacterial infection / drug therapy / gentamicin

XT - bacterial infection / drug therapy / ginger extract

XT - bacterial infection / drug therapy / glycopeptide

XT - bacterial infection / drug therapy / guava extract

XT - bacterial infection / drug therapy / imipenem

XT - bacterial infection / drug therapy / isepamicin

XT - bacterial infection / drug therapy / isoniazid

XT - bacterial infection / drug therapy / ithromycin

XT - bacterial infection / drug therapy / Jasminum officinale extract

XT - bacterial infection / drug therapy / josamycin

XT - bacterial infection / drug therapy / kanamycin

XT - bacterial infection / drug therapy / lectin

XT - bacterial infection / drug therapy / levofloxacin

XT - bacterial infection / drug therapy / lincosamide

XT - bacterial infection / drug therapy / lipopeptide

XT - bacterial infection / drug therapy / lomefloxacin

XT - bacterial infection / drug therapy / loracarbef

XT - bacterial infection / drug therapy / macrolide

XT - bacterial infection / drug therapy / Melissa offficinalis extract

XT - bacterial infection / drug therapy / meropenem

XT - bacterial infection / drug therapy / metacycline

XT - bacterial infection / drug therapy / meticillin

XT - bacterial infection / drug therapy / mezlocillin

XT - bacterial infection / drug therapy / minocycline

XT - bacterial infection / drug therapy / mithramycin

XT - bacterial infection / drug therapy / mitomycin

XT - bacterial infection / drug therapy / moluccanin

XT - bacterial infection / drug therapy / moxifloxacin

XT - bacterial infection / drug therapy / nafcillin

XT - bacterial infection / drug therapy / nalidixic acid

XT - bacterial infection / drug therapy / natural product

XT - bacterial infection / drug therapy / neomycin

XT - bacterial infection / drug therapy / netilmicin

XT - bacterial infection / drug therapy / nitrofuran derivative

XT - bacterial infection / drug therapy / nitrofurantoin

XT - bacterial infection / drug therapy / norfloxacin

XT - bacterial infection / drug therapy / novobiocin

XT - bacterial infection / drug therapy / Ocimum sanctum extract

XT - bacterial infection / drug therapy / Ocimun basilicum extract

XT - bacterial infection / drug therapy / ofloxacin

XT - bacterial infection / drug therapy / oleandomycin

XT - bacterial infection / drug therapy / Origanum vulgare extract

XT - bacterial infection / drug therapy / Orthosiphon aristatus extract

XT - bacterial infection / drug therapy / oxacillin

XT - bacterial infection / drug therapy / oxytetracycline

XT - bacterial infection / drug therapy / paromomycin

XT - bacterial infection / drug therapy / pefloxacin

XT - bacterial infection / drug therapy / penicillin derivative

XT - bacterial infection / drug therapy / penicillin G

XT - bacterial infection / drug therapy / penicillin V

XT - bacterial infection / drug therapy / phenazine

XT - bacterial infection / drug therapy / phenol

XT - bacterial infection / drug therapy / phthalylsulfathiazole

XT - bacterial infection / drug therapy / Pimpinella anisum extract

XT - bacterial infection / drug therapy / piperacillin

XT - bacterial infection / drug therapy / pleuromutilin

XT - bacterial infection / drug therapy / polyphenol

XT - bacterial infection / drug therapy / pomegranate extract

XT - bacterial infection / drug therapy / pyrogallol

XT - bacterial infection / drug therapy / pyrrole

XT - bacterial infection / drug therapy / quinoline derived antiinfective agent

XT - bacterial infection / drug therapy / quinoline

XT - bacterial infection / drug therapy / quinolone

XT - bacterial infection / drug therapy / quinupristin

XT - bacterial infection / drug therapy / retapamulin

XT - bacterial infection / drug therapy / Rosmarinus officinalis extract

XT - bacterial infection / drug therapy / Santalum album extract

XT - bacterial infection / drug therapy / sesquiterpene

XT - bacterial infection / drug therapy / sisomicin

XT - bacterial infection / drug therapy / Solanum nigrum extract

XT - bacterial infection / drug therapy / sparfloxacin

XT - bacterial infection / drug therapy / spectinomycin

XT - bacterial infection / drug therapy / squalamine

XT - bacterial infection / drug therapy / streptogramin derivative

XT - bacterial infection / drug therapy / streptomycin

XT - bacterial infection / drug therapy / sulfadiazine

XT - bacterial infection / drug therapy / sulfafurazole

XT - bacterial infection / drug therapy / sulfamethoxazole

XT - bacterial infection / drug therapy / sulfamidochrysoidine

XT - bacterial infection / drug therapy / sulfanilamide

XT - bacterial infection / drug therapy / sulfonamide

XT - bacterial infection / drug therapy / Syzygyum joabolanum extract

XT - bacterial infection / drug therapy / teicoplanin

XT - bacterial infection / drug therapy / temocillin

XT - bacterial infection / drug therapy / tetracycline

XT - bacterial infection / drug therapy / thioamide

XT - bacterial infection / drug therapy / Thymus vulgaris extract

XT - bacterial infection / drug therapy / ticarcillin

XT - bacterial infection / drug therapy / tigecycline

XT - bacterial infection / drug therapy / tobramycin

XT - bacterial infection / drug therapy / tontetracycline

XT - bacterial infection / drug therapy / trimethoprim

XT - bacterial infection / drug therapy / trovafloxacin

XT - bacterial infection / drug therapy / vancomycin

XT - bacterial infection / drug therapy / Vitis vinifera extract

XT - bacterial infection / drug therapy / Woodfordia floribunda extract

XT - bladder cancer / drug therapy / ciprofloxacin

XT - bladder cancer / drug therapy / epirubicin

XT - bladder cancer / drug therapy / mitomycin

XT - bleeding / side effect / antibiotic agent

XT - bleeding / side effect / beta lactam

XT - bleeding / side effect / cefamandole

XT - bleeding / side effect / cephalosporin

XT - bleeding / side effect / chloramphenicol

XT - bleeding / side effect / cotrimoxazole

XT - bleeding / side effect / lincosamide

XT - bleeding / side effect / penicillin derivative

XT - bleeding / side effect / penicillin G

XT - bleeding / side effect / streptogramin derivative

XT - bleeding / side effect / sulfanilamide

XT - bleeding / side effect / sulfonamide

XT - breast cancer / drug therapy / ciprofloxacin

XT - breast cancer / drug therapy / doxorubicin

XT - breast cancer / drug therapy / epirubicin

XT - breast cancer / drug therapy / gemifloxacin

XT - carcinoma / drug therapy / ciprofloxacin

XT - carcinoma / drug therapy / dactinomycin

XT - cardiotoxicity / side effect / antibiotic agent

XT - cardiotoxicity / side effect / azithromycin

XT - cardiotoxicity / side effect / clarithromycin

XT - cardiotoxicity / side effect / erythromycin

XT - cardiotoxicity / side effect / kanamycin

XT - cardiotoxicity / side effect / levofloxacin

XT - cardiotoxicity / side effect / macrolide

XT - cardiotoxicity / side effect / moxifloxacin

XT - cardiotoxicity / side effect / pyrrole

XT - cardiotoxicity / side effect / quinoline derived antiinfective agent

XT - cardiotoxicity / side effect / quinolone

XT - cardiotoxicity / side effect / sisomicin

XT - cardiotoxicity / side effect / streptomycin

XT - colon cancer / drug therapy / epirubicin

XT - colorectal carcinoma / drug therapy / ciprofloxacin

XT - colorectal carcinoma / drug therapy / epirubicin

XT - coma / side effect / amikacin

XT - coma / side effect / aminoglycoside

XT - coma / side effect / amoxicillin

XT - coma / side effect / ampicillin

XT - coma / side effect / antibiotic agent

XT - coma / side effect / azithromycin

XT - coma / side effect / carbenicillin

XT - coma / side effect / cefazolin

XT - coma / side effect / cefepime

XT - coma / side effect / cefoperazone

XT - coma / side effect / cefotaxime

XT - coma / side effect / cefpirome

XT - coma / side effect / cefradine

XT - coma / side effect / ceftazidime

XT - coma / side effect / cephalosporin

XT - coma / side effect / ciprofloxacin

XT - coma / side effect / clarithromycin

XT - coma / side effect / enoxacin

XT - coma / side effect / erythromycin

XT - coma / side effect / gemifloxacin

XT - coma / side effect / gentamicin

XT - coma / side effect / macrolide

XT - coma / side effect / moxifloxacin

XT - coma / side effect / neomycin

XT - coma / side effect / norfloxacin

XT - coma / side effect / ofloxacin

XT - coma / side effect / penicillin derivative

XT - coma / side effect / penicillin G

XT - coma / side effect / penicillin V

XT - coma / side effect / piperacillin

XT - coma / side effect / sulfonamide

XT - coma / side effect / tobramycin

XT - confusion / side effect / amikacin

XT - confusion / side effect / aminoglycoside

XT - confusion / side effect / amoxicillin

XT - confusion / side effect / ampicillin

XT - confusion / side effect / antibiotic agent

XT - confusion / side effect / azithromycin

XT - confusion / side effect / carbenicillin

XT - confusion / side effect / cefazolin

XT - confusion / side effect / cefepime

XT - confusion / side effect / cefoperazone

XT - confusion / side effect / cefotaxime

XT - confusion / side effect / cefpirome

XT - confusion / side effect / cefradine

XT - confusion / side effect / ceftazidime

XT - confusion / side effect / cephalosporin

XT - confusion / side effect / ciprofloxacin

XT - confusion / side effect / clarithromycin

XT - confusion / side effect / enoxacin

XT - confusion / side effect / erythromycin

XT - confusion / side effect / gemifloxacin

XT - confusion / side effect / gentamicin

XT - confusion / side effect / macrolide

XT - confusion / side effect / moxifloxacin

XT - confusion / side effect / neomycin

XT - confusion / side effect / norfloxacin

XT - confusion / side effect / ofloxacin

XT - confusion / side effect / penicillin derivative

XT - confusion / side effect / penicillin G

XT - confusion / side effect / penicillin V

XT - confusion / side effect / piperacillin

XT - confusion / side effect / sulfonamide

XT - confusion / side effect / tobramycin

XT - depression / side effect / amikacin

XT - depression / side effect / aminoglycoside

XT - depression / side effect / amoxicillin

XT - depression / side effect / ampicillin

XT - depression / side effect / antibiotic agent

XT - depression / side effect / azithromycin

XT - depression / side effect / carbenicillin

XT - depression / side effect / cefazolin

XT - depression / side effect / cefepime

XT - depression / side effect / cefoperazone

XT - depression / side effect / cefotaxime

XT - depression / side effect / cefpirome

XT - depression / side effect / cefradine

XT - depression / side effect / ceftazidime

XT - depression / side effect / cephalosporin

XT - depression / side effect / ciprofloxacin

XT - depression / side effect / clarithromycin

XT - depression / side effect / enoxacin

XT - depression / side effect / erythromycin

XT - depression / side effect / gemifloxacin

XT - depression / side effect / gentamicin

XT - depression / side effect / macrolide

XT - depression / side effect / moxifloxacin

XT - depression / side effect / neomycin

XT - depression / side effect / norfloxacin

XT - depression / side effect / ofloxacin

XT - depression / side effect / penicillin derivative

XT - depression / side effect / penicillin G

XT - depression / side effect / penicillin V

XT - depression / side effect / piperacillin

XT - depression / side effect / sulfonamide

XT - depression / side effect / tobramycin

XT - diarrhea / side effect / antibiotic agent

XT - diarrhea / side effect / benzathine penicillin

XT - diarrhea / side effect / cefazolin

XT - diarrhea / side effect / cefmetazole

XT - diarrhea / side effect / ceftriaxone

XT - diarrhea / side effect / cefuroxime

XT - diarrhea / side effect / cephalosporin

XT - diarrhea / side effect / clarithromycin

XT - diarrhea / side effect / daptomycin

XT - diarrhea / side effect / doxycycline

XT - diarrhea / side effect / erythromycin

XT - diarrhea / side effect / macrolide

XT - diarrhea / side effect / metacycline

XT - diarrhea / side effect / minocycline

XT - diarrhea / side effect / moxifloxacin

XT - diarrhea / side effect / oleandomycin

XT - diarrhea / side effect / oxytetracycline

XT - diarrhea / side effect / penicillin derivative

XT - diarrhea / side effect / penicillin G

XT - diarrhea / side effect / penicillin V

XT - diarrhea / side effect / quinoline derived antiinfective agent

XT - diarrhea / side effect / quinoline

XT - diarrhea / side effect / tetracycline

XT - diarrhea / side effect / trovafloxacin

XT - disorientation / side effect / amikacin

XT - disorientation / side effect / aminoglycoside

XT - disorientation / side effect / amoxicillin

XT - disorientation / side effect / ampicillin

XT - disorientation / side effect / antibiotic agent

XT - disorientation / side effect / azithromycin

XT - disorientation / side effect / carbenicillin

XT - disorientation / side effect / cefazolin

XT - disorientation / side effect / cefepime

XT - disorientation / side effect / cefoperazone

XT - disorientation / side effect / cefotaxime

XT - disorientation / side effect / cefpirome

XT - disorientation / side effect / cefradine

XT - disorientation / side effect / ceftazidime

XT - disorientation / side effect / cephalosporin

XT - disorientation / side effect / ciprofloxacin

XT - disorientation / side effect / clarithromycin

XT - disorientation / side effect / enoxacin

XT - disorientation / side effect / erythromycin

XT - disorientation / side effect / gemifloxacin

XT - disorientation / side effect / gentamicin

XT - disorientation / side effect / macrolide

XT - disorientation / side effect / moxifloxacin

XT - disorientation / side effect / neomycin

XT - disorientation / side effect / norfloxacin

XT - disorientation / side effect / ofloxacin

XT - disorientation / side effect / penicillin derivative

XT - disorientation / side effect / penicillin G

XT - disorientation / side effect / penicillin V

XT - disorientation / side effect / piperacillin

XT - disorientation / side effect / sulfonamide

XT - disorientation / side effect / tobramycin

XT - epigastric pain / side effect / antibiotic agent

XT - epigastric pain / side effect / benzathine penicillin

XT - epigastric pain / side effect / cefazolin

XT - epigastric pain / side effect / cefmetazole

XT - epigastric pain / side effect / ceftriaxone

XT - epigastric pain / side effect / cefuroxime

XT - epigastric pain / side effect / cephalosporin

XT - epigastric pain / side effect / clarithromycin

XT - epigastric pain / side effect / daptomycin

XT - epigastric pain / side effect / doxycycline

XT - epigastric pain / side effect / erythromycin

XT - epigastric pain / side effect / macrolide

XT - epigastric pain / side effect / metacycline

XT - epigastric pain / side effect / minocycline

XT - epigastric pain / side effect / moxifloxacin

XT - epigastric pain / side effect / oleandomycin

XT - epigastric pain / side effect / oxytetracycline

XT - epigastric pain / side effect / penicillin derivative

XT - epigastric pain / side effect / penicillin G

XT - epigastric pain / side effect / penicillin V

XT - epigastric pain / side effect / quinoline derived antiinfective agent

XT - epigastric pain / side effect / quinoline

XT - epigastric pain / side effect / tetracycline

XT - epigastric pain / side effect / trovafloxacin

XT - epileptic state / side effect / amikacin

XT - epileptic state / side effect / aminoglycoside

XT - epileptic state / side effect / amoxicillin

XT - epileptic state / side effect / ampicillin

XT - epileptic state / side effect / antibiotic agent

XT - epileptic state / side effect / azithromycin

XT - epileptic state / side effect / carbenicillin

XT - epileptic state / side effect / cefazolin

XT - epileptic state / side effect / cefepime

XT - epileptic state / side effect / cefoperazone

XT - epileptic state / side effect / cefotaxime

XT - epileptic state / side effect / cefpirome

XT - epileptic state / side effect / cefradine

XT - epileptic state / side effect / ceftazidime

XT - epileptic state / side effect / cephalosporin

XT - epileptic state / side effect / ciprofloxacin

XT - epileptic state / side effect / clarithromycin

XT - epileptic state / side effect / enoxacin

XT - epileptic state / side effect / erythromycin

XT - epileptic state / side effect / gemifloxacin

XT - epileptic state / side effect / gentamicin

XT - epileptic state / side effect / macrolide

XT - epileptic state / side effect / moxifloxacin

XT - epileptic state / side effect / neomycin

XT - epileptic state / side effect / norfloxacin

XT - epileptic state / side effect / ofloxacin

XT - epileptic state / side effect / penicillin derivative

XT - epileptic state / side effect / penicillin G

XT - epileptic state / side effect / penicillin V

XT - epileptic state / side effect / piperacillin

XT - epileptic state / side effect / sulfonamide

XT - epileptic state / side effect / tobramycin

XT - female genital tract cancer / drug therapy / bleomycin

XT - fever / side effect / amikacin

XT - fever / side effect / aminoglycoside

XT - fever / side effect / amoxicillin

XT - fever / side effect / antibiotic agent

XT - fever / side effect / beta lactam

XT - fever / side effect / gentamicin

XT - fever / side effect / norfloxacin

XT - fever / side effect / tobramycin

XT - fever / side effect / vancomycin

XT - gastrointestinal disease / side effect / antibiotic agent

XT - gastrointestinal disease / side effect / benzathine penicillin

XT - gastrointestinal disease / side effect / cefazolin

XT - gastrointestinal disease / side effect / cefmetazole

XT - gastrointestinal disease / side effect / ceftriaxone

XT - gastrointestinal disease / side effect / cefuroxime

XT - gastrointestinal disease / side effect / cephalosporin

XT - gastrointestinal disease / side effect / clarithromycin

XT - gastrointestinal disease / side effect / daptomycin

XT - gastrointestinal disease / side effect / doxycycline

XT - gastrointestinal disease / side effect / erythromycin

XT - gastrointestinal disease / side effect / macrolide

XT - gastrointestinal disease / side effect / metacycline

XT - gastrointestinal disease / side effect / minocycline

XT - gastrointestinal disease / side effect / moxifloxacin

XT - gastrointestinal disease / side effect / oleandomycin

XT - gastrointestinal disease / side effect / oxytetracycline

XT - gastrointestinal disease / side effect / penicillin derivative

XT - gastrointestinal disease / side effect / penicillin G

XT - gastrointestinal disease / side effect / penicillin V

XT - gastrointestinal disease / side effect / quinoline derived antiinfective agent

XT - gastrointestinal disease / side effect / quinoline

XT - gastrointestinal disease / side effect / tetracycline

XT - gastrointestinal disease / side effect / trovafloxacin

XT - gastrointestinal symptom / side effect / antibiotic agent

XT - gastrointestinal symptom / side effect / benzathine penicillin

XT - gastrointestinal symptom / side effect / cefazolin

XT - gastrointestinal symptom / side effect / cefmetazole

XT - gastrointestinal symptom / side effect / ceftriaxone

XT - gastrointestinal symptom / side effect / cefuroxime

XT - gastrointestinal symptom / side effect / cephalosporin

XT - gastrointestinal symptom / side effect / clarithromycin

XT - gastrointestinal symptom / side effect / daptomycin

XT - gastrointestinal symptom / side effect / doxycycline

XT - gastrointestinal symptom / side effect / erythromycin

XT - gastrointestinal symptom / side effect / macrolide

XT - gastrointestinal symptom / side effect / metacycline

XT - gastrointestinal symptom / side effect / minocycline

XT - gastrointestinal symptom / side effect / moxifloxacin

XT - gastrointestinal symptom / side effect / oleandomycin

XT - gastrointestinal symptom / side effect / oxytetracycline

XT - gastrointestinal symptom / side effect / penicillin derivative

XT - gastrointestinal symptom / side effect / penicillin G

XT - gastrointestinal symptom / side effect / penicillin V

XT - gastrointestinal symptom / side effect / quinoline derived antiinfective agent

XT - gastrointestinal symptom / side effect / quinoline

XT - gastrointestinal symptom / side effect / tetracycline

XT - gastrointestinal symptom / side effect / trovafloxacin

XT - germ cell tumor / drug therapy / bleomycin

XT - glioma / drug therapy / mithramycin

XT - headache / side effect / amikacin

XT - headache / side effect / aminoglycoside

XT - headache / side effect / amoxicillin

XT - headache / side effect / ampicillin

XT - headache / side effect / antibiotic agent

XT - headache / side effect / azithromycin

XT - headache / side effect / carbenicillin

XT - headache / side effect / cefazolin

XT - headache / side effect / cefepime

XT - headache / side effect / cefoperazone

XT - headache / side effect / cefotaxime

XT - headache / side effect / cefpirome

XT - headache / side effect / cefradine

XT - headache / side effect / ceftazidime

XT - headache / side effect / cephalosporin

XT - headache / side effect / ciprofloxacin

XT - headache / side effect / clarithromycin

XT - headache / side effect / enoxacin

XT - headache / side effect / erythromycin

XT - headache / side effect / gemifloxacin

XT - headache / side effect / gentamicin

XT - headache / side effect / macrolide

XT - headache / side effect / moxifloxacin

XT - headache / side effect / neomycin

XT - headache / side effect / norfloxacin

XT - headache / side effect / ofloxacin

XT - headache / side effect / penicillin derivative

XT - headache / side effect / penicillin G

XT - headache / side effect / penicillin V

XT - headache / side effect / piperacillin

XT - headache / side effect / sulfonamide

XT - headache / side effect / tobramycin

XT - heart disease / side effect / antibiotic agent

XT - heart disease / side effect / azithromycin

XT - heart disease / side effect / clarithromycin

XT - heart disease / side effect / erythromycin

XT - heart disease / side effect / kanamycin

XT - heart disease / side effect / levofloxacin

XT - heart disease / side effect / macrolide

XT - heart disease / side effect / moxifloxacin

XT - heart disease / side effect / pyrrole

XT - heart disease / side effect / quinoline derived antiinfective agent

XT - heart disease / side effect / quinolone

XT - heart disease / side effect / sisomicin

XT - heart disease / side effect / streptomycin

XT - heart ventricle arrhythmia / side effect / antibiotic agent

XT - heart ventricle arrhythmia / side effect / azithromycin

XT - heart ventricle arrhythmia / side effect / clarithromycin

XT - heart ventricle arrhythmia / side effect / erythromycin

XT - heart ventricle arrhythmia / side effect / kanamycin

XT - heart ventricle arrhythmia / side effect / levofloxacin

XT - heart ventricle arrhythmia / side effect / macrolide

XT - heart ventricle arrhythmia / side effect / moxifloxacin

XT - heart ventricle arrhythmia / side effect / pyrrole

XT - heart ventricle arrhythmia / side effect / quinoline derived antiinfective agent

XT - heart ventricle arrhythmia / side effect / quinolone

XT - heart ventricle arrhythmia / side effect / sisomicin

XT - heart ventricle arrhythmia / side effect / streptomycin

XT - hematologic disease / side effect / antibiotic agent

XT - hematologic disease / side effect / beta lactam

XT - hematologic disease / side effect / cefamandole

XT - hematologic disease / side effect / cephalosporin

XT - hematologic disease / side effect / chloramphenicol

XT - hematologic disease / side effect / cotrimoxazole

XT - hematologic disease / side effect / lincosamide

XT - hematologic disease / side effect / penicillin derivative

XT - hematologic disease / side effect / penicillin G

XT - hematologic disease / side effect / streptogramin derivative

XT - hematologic disease / side effect / sulfanilamide

XT - hematologic disease / side effect / sulfonamide

XT - hypersensitivity / side effect / antibiotic agent

XT - hypersensitivity / side effect / beta lactam

XT - hypersensitivity / side effect / cotrimoxazole

XT - hypersensitivity / side effect / fleroxacin

XT - hypersensitivity / side effect / levofloxacin

XT - hypersensitivity / side effect / lomefloxacin

XT - hypersensitivity / side effect / macrolide

XT - hypersensitivity / side effect / metacycline

XT - hypersensitivity / side effect / meticillin

XT - hypersensitivity / side effect / minocycline

XT - hypersensitivity / side effect / sparfloxacin

XT - hypersensitivity / side effect / sulfonamide

XT - hypersensitivity / side effect / tontetracycline

XT - insomnia / side effect / amikacin

XT - insomnia / side effect / aminoglycoside

XT - insomnia / side effect / amoxicillin

XT - insomnia / side effect / ampicillin

XT - insomnia / side effect / antibiotic agent

XT - insomnia / side effect / azithromycin

XT - insomnia / side effect / carbenicillin

XT - insomnia / side effect / cefazolin

XT - insomnia / side effect / cefepime

XT - insomnia / side effect / cefoperazone

XT - insomnia / side effect / cefotaxime

XT - insomnia / side effect / cefpirome

XT - insomnia / side effect / cefradine

XT - insomnia / side effect / ceftazidime

XT - insomnia / side effect / cephalosporin

XT - insomnia / side effect / ciprofloxacin

XT - insomnia / side effect / clarithromycin

XT - insomnia / side effect / enoxacin

XT - insomnia / side effect / erythromycin

XT - insomnia / side effect / gemifloxacin

XT - insomnia / side effect / gentamicin

XT - insomnia / side effect / macrolide

XT - insomnia / side effect / moxifloxacin

XT - insomnia / side effect / neomycin

XT - insomnia / side effect / norfloxacin

XT - insomnia / side effect / ofloxacin

XT - insomnia / side effect / penicillin derivative

XT - insomnia / side effect / penicillin G

XT - insomnia / side effect / penicillin V

XT - insomnia / side effect / piperacillin

XT - insomnia / side effect / sulfonamide

XT - insomnia / side effect / tobramycin

XT - interstitial nephritis / side effect / amikacin

XT - interstitial nephritis / side effect / aminoglycoside

XT - interstitial nephritis / side effect / amoxicillin

XT - interstitial nephritis / side effect / antibiotic agent

XT - interstitial nephritis / side effect / beta lactam

XT - interstitial nephritis / side effect / gentamicin

XT - interstitial nephritis / side effect / norfloxacin

XT - interstitial nephritis / side effect / tobramycin

XT - interstitial nephritis / side effect / vancomycin

XT - kidney disease / side effect / amikacin

XT - kidney disease / side effect / aminoglycoside

XT - kidney disease / side effect / amoxicillin

XT - kidney disease / side effect / antibiotic agent

XT - kidney disease / side effect / beta lactam

XT - kidney disease / side effect / gentamicin

XT - kidney disease / side effect / norfloxacin

XT - kidney disease / side effect / tobramycin

XT - kidney disease / side effect / vancomycin

XT - liver cell carcinoma / drug therapy / ciprofloxacin

XT - liver fibrosis / side effect / ampicillin

XT - liver fibrosis / side effect / antibiotic agent

XT - liver fibrosis / side effect / carbenicillin

XT - liver fibrosis / side effect / gentamicin

XT - liver fibrosis / side effect / isoniazid

XT - liver fibrosis / side effect / meropenem

XT - liver fibrosis / side effect / meticillin

XT - liver fibrosis / side effect / moxifloxacin

XT - liver fibrosis / side effect / norfloxacin

XT - liver fibrosis / side effect / oxacillin

XT - liver fibrosis / side effect / penicillin G

XT - liver fibrosis / side effect / piperacillin

XT - liver fibrosis / side effect / trovafloxacin

XT - liver toxicity / side effect / ampicillin

XT - liver toxicity / side effect / antibiotic agent

XT - liver toxicity / side effect / carbenicillin

XT - liver toxicity / side effect / gentamicin

XT - liver toxicity / side effect / isoniazid

XT - liver toxicity / side effect / meropenem

XT - liver toxicity / side effect / meticillin

XT - liver toxicity / side effect / moxifloxacin

XT - liver toxicity / side effect / norfloxacin

XT - liver toxicity / side effect / oxacillin

XT - liver toxicity / side effect / penicillin G

XT - liver toxicity / side effect / piperacillin

XT - liver toxicity / side effect / trovafloxacin

XT - lung cancer / drug therapy / bleomycin

XT - lung cancer / drug therapy / doxorubicin

XT - lung cancer / drug therapy / epirubicin

XT - lung disease / side effect / nitrofurantoin

XT - lung toxicity / side effect / nitrofurantoin

XT - lymphatic leukemia / drug therapy / daunorubicin

XT - lymphoma / drug therapy / doxorubicin

XT - lymphoma / drug therapy / epirubicin

XT - lymphoma / drug therapy / mithramycin

XT - maculopapular rash / side effect / antibiotic agent

XT - maculopapular rash / side effect / beta lactam

XT - maculopapular rash / side effect / cotrimoxazole

XT - maculopapular rash / side effect / fleroxacin

XT - maculopapular rash / side effect / levofloxacin

XT - maculopapular rash / side effect / lomefloxacin

XT - maculopapular rash / side effect / macrolide

XT - maculopapular rash / side effect / metacycline

XT - maculopapular rash / side effect / meticillin

XT - maculopapular rash / side effect / minocycline

XT - maculopapular rash / side effect / sparfloxacin

XT - maculopapular rash / side effect / tontetracycline

XT - malignant pleura effusion / side effect / nitrofurantoin

XT - melanoma / drug therapy / bleomycin

XT - melanoma / drug therapy / ciprofloxacin

XT - melanoma / drug therapy / epirubicin

XT - myoclonus epilepsy / side effect / amikacin

XT - myoclonus epilepsy / side effect / aminoglycoside

XT - myoclonus epilepsy / side effect / amoxicillin

XT - myoclonus epilepsy / side effect / ampicillin

XT - myoclonus epilepsy / side effect / antibiotic agent

XT - myoclonus epilepsy / side effect / azithromycin

XT - myoclonus epilepsy / side effect / carbenicillin

XT - myoclonus epilepsy / side effect / cefazolin

XT - myoclonus epilepsy / side effect / cefepime

XT - myoclonus epilepsy / side effect / cefoperazone

XT - myoclonus epilepsy / side effect / cefotaxime

XT - myoclonus epilepsy / side effect / cefpirome

XT - myoclonus epilepsy / side effect / cefradine

XT - myoclonus epilepsy / side effect / ceftazidime

XT - myoclonus epilepsy / side effect / cephalosporin

XT - myoclonus epilepsy / side effect / ciprofloxacin

XT - myoclonus epilepsy / side effect / clarithromycin

XT - myoclonus epilepsy / side effect / enoxacin

XT - myoclonus epilepsy / side effect / erythromycin

XT - myoclonus epilepsy / side effect / gemifloxacin

XT - myoclonus epilepsy / side effect / gentamicin

XT - myoclonus epilepsy / side effect / macrolide

XT - myoclonus epilepsy / side effect / moxifloxacin

XT - myoclonus epilepsy / side effect / neomycin

XT - myoclonus epilepsy / side effect / norfloxacin

XT - myoclonus epilepsy / side effect / ofloxacin

XT - myoclonus epilepsy / side effect / penicillin derivative

XT - myoclonus epilepsy / side effect / penicillin G

XT - myoclonus epilepsy / side effect / penicillin V

XT - myoclonus epilepsy / side effect / piperacillin

XT - myoclonus epilepsy / side effect / sulfonamide

XT - myoclonus epilepsy / side effect / tobramycin

XT - nausea and vomiting / side effect / antibiotic agent

XT - nausea and vomiting / side effect / benzathine penicillin

XT - nausea and vomiting / side effect / cefazolin

XT - nausea and vomiting / side effect / cefmetazole

XT - nausea and vomiting / side effect / ceftriaxone

XT - nausea and vomiting / side effect / cefuroxime

XT - nausea and vomiting / side effect / cephalosporin

XT - nausea and vomiting / side effect / clarithromycin

XT - nausea and vomiting / side effect / daptomycin

XT - nausea and vomiting / side effect / doxycycline

XT - nausea and vomiting / side effect / erythromycin

XT - nausea and vomiting / side effect / macrolide

XT - nausea and vomiting / side effect / metacycline

XT - nausea and vomiting / side effect / minocycline

XT - nausea and vomiting / side effect / moxifloxacin

XT - nausea and vomiting / side effect / oleandomycin

XT - nausea and vomiting / side effect / oxytetracycline

XT - nausea and vomiting / side effect / penicillin derivative

XT - nausea and vomiting / side effect / penicillin G

XT - nausea and vomiting / side effect / penicillin V

XT - nausea and vomiting / side effect / quinoline derived antiinfective agent

XT - nausea and vomiting / side effect / quinoline

XT - nausea and vomiting / side effect / tetracycline

XT - nausea and vomiting / side effect / trovafloxacin

XT - nephroblastoma / drug therapy / ciprofloxacin

XT - nephroblastoma / drug therapy / dactinomycin

XT - nephrotoxicity / side effect / amikacin

XT - nephrotoxicity / side effect / aminoglycoside

XT - nephrotoxicity / side effect / amoxicillin

XT - nephrotoxicity / side effect / antibiotic agent

XT - nephrotoxicity / side effect / beta lactam

XT - nephrotoxicity / side effect / gentamicin

XT - nephrotoxicity / side effect / norfloxacin

XT - nephrotoxicity / side effect / tobramycin

XT - nephrotoxicity / side effect / vancomycin

XT - neuroblastoma / drug therapy / dactinomycin

XT - neurotoxicity / side effect / amikacin

XT - neurotoxicity / side effect / aminoglycoside

XT - neurotoxicity / side effect / amoxicillin

XT - neurotoxicity / side effect / ampicillin

XT - neurotoxicity / side effect / antibiotic agent

XT - neurotoxicity / side effect / azithromycin

XT - neurotoxicity / side effect / carbenicillin

XT - neurotoxicity / side effect / cefazolin

XT - neurotoxicity / side effect / cefepime

XT - neurotoxicity / side effect / cefoperazone

XT - neurotoxicity / side effect / cefotaxime

XT - neurotoxicity / side effect / cefpirome

XT - neurotoxicity / side effect / cefradine

XT - neurotoxicity / side effect / ceftazidime

XT - neurotoxicity / side effect / cephalosporin

XT - neurotoxicity / side effect / ciprofloxacin

XT - neurotoxicity / side effect / clarithromycin

XT - neurotoxicity / side effect / enoxacin

XT - neurotoxicity / side effect / erythromycin

XT - neurotoxicity / side effect / gemifloxacin

XT - neurotoxicity / side effect / gentamicin

XT - neurotoxicity / side effect / macrolide

XT - neurotoxicity / side effect / moxifloxacin

XT - neurotoxicity / side effect / neomycin

XT - neurotoxicity / side effect / norfloxacin

XT - neurotoxicity / side effect / ofloxacin

XT - neurotoxicity / side effect / penicillin derivative

XT - neurotoxicity / side effect / penicillin G

XT - neurotoxicity / side effect / penicillin V

XT - neurotoxicity / side effect / piperacillin

XT - neurotoxicity / side effect / sulfonamide

XT - neurotoxicity / side effect / tobramycin

XT - ovary carcinoma / drug therapy / epirubicin

XT - peripheral eosinophilia / side effect / nitrofurantoin

XT - peripheral neuropathy / side effect / amikacin

XT - peripheral neuropathy / side effect / aminoglycoside

XT - peripheral neuropathy / side effect / amoxicillin

XT - peripheral neuropathy / side effect / ampicillin

XT - peripheral neuropathy / side effect / antibiotic agent

XT - peripheral neuropathy / side effect / azithromycin

XT - peripheral neuropathy / side effect / carbenicillin

XT - peripheral neuropathy / side effect / cefazolin

XT - peripheral neuropathy / side effect / cefepime

XT - peripheral neuropathy / side effect / cefoperazone

XT - peripheral neuropathy / side effect / cefotaxime

XT - peripheral neuropathy / side effect / cefpirome

XT - peripheral neuropathy / side effect / cefradine

XT - peripheral neuropathy / side effect / ceftazidime

XT - peripheral neuropathy / side effect / cephalosporin

XT - peripheral neuropathy / side effect / ciprofloxacin

XT - peripheral neuropathy / side effect / clarithromycin

XT - peripheral neuropathy / side effect / enoxacin

XT - peripheral neuropathy / side effect / erythromycin

XT - peripheral neuropathy / side effect / gemifloxacin

XT - peripheral neuropathy / side effect / gentamicin

XT - peripheral neuropathy / side effect / macrolide

XT - peripheral neuropathy / side effect / moxifloxacin

XT - peripheral neuropathy / side effect / neomycin

XT - peripheral neuropathy / side effect / norfloxacin

XT - peripheral neuropathy / side effect / ofloxacin

XT - peripheral neuropathy / side effect / penicillin derivative

XT - peripheral neuropathy / side effect / penicillin G

XT - peripheral neuropathy / side effect / penicillin V

XT - peripheral neuropathy / side effect / piperacillin

XT - peripheral neuropathy / side effect / sulfonamide

XT - peripheral neuropathy / side effect / tobramycin

XT - phototoxicity / side effect / antibiotic agent

XT - phototoxicity / side effect / beta lactam

XT - phototoxicity / side effect / cotrimoxazole

XT - phototoxicity / side effect / fleroxacin

XT - phototoxicity / side effect / levofloxacin

XT - phototoxicity / side effect / lomefloxacin

XT - phototoxicity / side effect / macrolide

XT - phototoxicity / side effect / metacycline

XT - phototoxicity / side effect / meticillin

XT - phototoxicity / side effect / minocycline

XT - phototoxicity / side effect / sparfloxacin

XT - phototoxicity / side effect / tontetracycline

XT - pneumonia / drug therapy / penicillin G

XT - psychosis / side effect / amikacin

XT - psychosis / side effect / aminoglycoside

XT - psychosis / side effect / amoxicillin

XT - psychosis / side effect / ampicillin

XT - psychosis / side effect / antibiotic agent

XT - psychosis / side effect / azithromycin

XT - psychosis / side effect / carbenicillin

XT - psychosis / side effect / cefazolin

XT - psychosis / side effect / cefepime

XT - psychosis / side effect / cefoperazone

XT - psychosis / side effect / cefotaxime

XT - psychosis / side effect / cefpirome

XT - psychosis / side effect / cefradine

XT - psychosis / side effect / ceftazidime

XT - psychosis / side effect / cephalosporin

XT - psychosis / side effect / ciprofloxacin

XT - psychosis / side effect / clarithromycin

XT - psychosis / side effect / enoxacin

XT - psychosis / side effect / erythromycin

XT - psychosis / side effect / gemifloxacin

XT - psychosis / side effect / gentamicin

XT - psychosis / side effect / macrolide

XT - psychosis / side effect / moxifloxacin

XT - psychosis / side effect / neomycin

XT - psychosis / side effect / norfloxacin

XT - psychosis / side effect / ofloxacin

XT - psychosis / side effect / penicillin derivative

XT - psychosis / side effect / penicillin G

XT - psychosis / side effect / penicillin V

XT - psychosis / side effect / piperacillin

XT - psychosis / side effect / sulfonamide

XT - psychosis / side effect / tobramycin

XT - rash / side effect / amikacin

XT - rash / side effect / aminoglycoside

XT - rash / side effect / amoxicillin

XT - rash / side effect / antibiotic agent

XT - rash / side effect / beta lactam

XT - rash / side effect / gentamicin

XT - rash / side effect / norfloxacin

XT - rash / side effect / tobramycin

XT - rash / side effect / vancomycin

XT - rhabdomyosarcoma / drug therapy / dactinomycin

XT - seizure / side effect / amikacin

XT - seizure / side effect / aminoglycoside

XT - seizure / side effect / amoxicillin

XT - seizure / side effect / ampicillin

XT - seizure / side effect / antibiotic agent

XT - seizure / side effect / azithromycin

XT - seizure / side effect / carbenicillin

XT - seizure / side effect / cefazolin

XT - seizure / side effect / cefepime

XT - seizure / side effect / cefoperazone

XT - seizure / side effect / cefotaxime

XT - seizure / side effect / cefpirome

XT - seizure / side effect / cefradine

XT - seizure / side effect / ceftazidime

XT - seizure / side effect / cephalosporin

XT - seizure / side effect / ciprofloxacin

XT - seizure / side effect / clarithromycin

XT - seizure / side effect / enoxacin

XT - seizure / side effect / erythromycin

XT - seizure / side effect / gemifloxacin

XT - seizure / side effect / gentamicin

XT - seizure / side effect / macrolide

XT - seizure / side effect / moxifloxacin

XT - seizure / side effect / neomycin

XT - seizure / side effect / norfloxacin

XT - seizure / side effect / ofloxacin

XT - seizure / side effect / penicillin derivative

XT - seizure / side effect / penicillin G

XT - seizure / side effect / penicillin V

XT - seizure / side effect / piperacillin

XT - seizure / side effect / sulfonamide

XT - seizure / side effect / tobramycin

XT - soft tissue sarcoma / drug therapy / epirubicin

XT - stomach cancer / drug therapy / epirubicin

XT - testicular embryonal cancer / drug therapy / mithramycin

XT - thrombocytopenia / side effect / antibiotic agent

XT - thrombocytopenia / side effect / beta lactam

XT - thrombocytopenia / side effect / cefamandole

XT - thrombocytopenia / side effect / cephalosporin

XT - thrombocytopenia / side effect / chloramphenicol

XT - thrombocytopenia / side effect / cotrimoxazole

XT - thrombocytopenia / side effect / lincosamide

XT - thrombocytopenia / side effect / penicillin derivative

XT - thrombocytopenia / side effect / penicillin G

XT - thrombocytopenia / side effect / streptogramin derivative

XT - thrombocytopenia / side effect / sulfanilamide

XT - thrombocytopenia / side effect / sulfonamide

XT - tuberculosis / drug therapy / aminoglycoside

XT - tuberculosis / drug therapy / streptomycin

XT - typhoid fever / drug therapy / chloramphenicol

XT - 2 oxazolidinone derivative / drug therapy / bacterial infection

XT - 3 acetyl aleuritolic acid / drug therapy / bacterial infection

XT - 4 aminobenzoic acid / drug therapy / bacterial infection

XT - Aleurites moluccanus extract / drug therapy / bacterial infection

XT - alkaloid / drug therapy / bacterial infection

XT - Aloe barbadensis extract / drug therapy / bacterial infection

XT - amikacin / adverse drug reaction / acute brain disease

XT - amikacin / adverse drug reaction / coma

XT - amikacin / adverse drug reaction / confusion

XT - amikacin / adverse drug reaction / depression

XT - amikacin / adverse drug reaction / disorientation

XT - amikacin / adverse drug reaction / epileptic state

XT - amikacin / adverse drug reaction / fever

XT - amikacin / adverse drug reaction / headache

XT - amikacin / adverse drug reaction / insomnia

XT - amikacin / adverse drug reaction / interstitial nephritis

XT - amikacin / adverse drug reaction / kidney disease

XT - amikacin / adverse drug reaction / myoclonus epilepsy

XT - amikacin / adverse drug reaction / nephrotoxicity

XT - amikacin / adverse drug reaction / neurotoxicity

XT - amikacin / adverse drug reaction / peripheral neuropathy

XT - amikacin / adverse drug reaction / psychosis

XT - amikacin / adverse drug reaction / rash

XT - amikacin / adverse drug reaction / seizure

XT - amikacin / drug therapy / bacterial infection

XT - aminoglycoside / adverse drug reaction / acute brain disease

XT - aminoglycoside / adverse drug reaction / coma

XT - aminoglycoside / adverse drug reaction / confusion

XT - aminoglycoside / adverse drug reaction / depression

XT - aminoglycoside / adverse drug reaction / disorientation

XT - aminoglycoside / adverse drug reaction / epileptic state

XT - aminoglycoside / adverse drug reaction / fever

XT - aminoglycoside / adverse drug reaction / headache

XT - aminoglycoside / adverse drug reaction / insomnia

XT - aminoglycoside / adverse drug reaction / interstitial nephritis

XT - aminoglycoside / adverse drug reaction / kidney disease

XT - aminoglycoside / adverse drug reaction / myoclonus epilepsy

XT - aminoglycoside / adverse drug reaction / nephrotoxicity

XT - aminoglycoside / adverse drug reaction / neurotoxicity

XT - aminoglycoside / adverse drug reaction / peripheral neuropathy

XT - aminoglycoside / adverse drug reaction / psychosis

XT - aminoglycoside / adverse drug reaction / rash

XT - aminoglycoside / adverse drug reaction / seizure

XT - aminoglycoside / drug therapy / bacterial infection

XT - aminoglycoside / drug therapy / tuberculosis

XT - amoxicillin / adverse drug reaction / acute brain disease

XT - amoxicillin / adverse drug reaction / coma

XT - amoxicillin / adverse drug reaction / confusion

XT - amoxicillin / adverse drug reaction / depression

XT - amoxicillin / adverse drug reaction / disorientation

XT - amoxicillin / adverse drug reaction / epileptic state

XT - amoxicillin / adverse drug reaction / fever

XT - amoxicillin / adverse drug reaction / headache

XT - amoxicillin / adverse drug reaction / insomnia

XT - amoxicillin / adverse drug reaction / interstitial nephritis

XT - amoxicillin / adverse drug reaction / kidney disease

XT - amoxicillin / adverse drug reaction / myoclonus epilepsy

XT - amoxicillin / adverse drug reaction / nephrotoxicity

XT - amoxicillin / adverse drug reaction / neurotoxicity

XT - amoxicillin / adverse drug reaction / peripheral neuropathy

XT - amoxicillin / adverse drug reaction / psychosis

XT - amoxicillin / adverse drug reaction / rash

XT - amoxicillin / adverse drug reaction / seizure

XT - amoxicillin / drug therapy / bacterial infection

XT - ampicillin / adverse drug reaction / acute brain disease

XT - ampicillin / adverse drug reaction / coma

XT - ampicillin / adverse drug reaction / confusion

XT - ampicillin / adverse drug reaction / depression

XT - ampicillin / adverse drug reaction / disorientation

XT - ampicillin / adverse drug reaction / epileptic state

XT - ampicillin / adverse drug reaction / headache

XT - ampicillin / adverse drug reaction / insomnia

XT - ampicillin / adverse drug reaction / liver fibrosis

XT - ampicillin / adverse drug reaction / liver toxicity

XT - ampicillin / adverse drug reaction / myoclonus epilepsy

XT - ampicillin / adverse drug reaction / neurotoxicity

XT - ampicillin / adverse drug reaction / peripheral neuropathy

XT - ampicillin / adverse drug reaction / psychosis

XT - ampicillin / adverse drug reaction / seizure

XT - ampicillin / drug therapy / bacterial infection

XT - ansamycin derivative / drug therapy / bacterial infection

XT - antibiotic agent / adverse drug reaction / abdominal cramp

XT - antibiotic agent / adverse drug reaction / acute brain disease

XT - antibiotic agent / adverse drug reaction / anemia

XT - antibiotic agent / adverse drug reaction / anorexia

XT - antibiotic agent / adverse drug reaction / bleeding

XT - antibiotic agent / adverse drug reaction / cardiotoxicity

XT - antibiotic agent / adverse drug reaction / coma

XT - antibiotic agent / adverse drug reaction / confusion

XT - antibiotic agent / adverse drug reaction / depression

XT - antibiotic agent / adverse drug reaction / diarrhea

XT - antibiotic agent / adverse drug reaction / disorientation

XT - antibiotic agent / adverse drug reaction / epigastric pain

XT - antibiotic agent / adverse drug reaction / epileptic state

XT - antibiotic agent / adverse drug reaction / fever

XT - antibiotic agent / adverse drug reaction / gastrointestinal disease

XT - antibiotic agent / adverse drug reaction / gastrointestinal symptom

XT - antibiotic agent / adverse drug reaction / headache

XT - antibiotic agent / adverse drug reaction / heart disease

XT - antibiotic agent / adverse drug reaction / heart ventricle arrhythmia

XT - antibiotic agent / adverse drug reaction / hematologic disease

XT - antibiotic agent / adverse drug reaction / hypersensitivity

XT - antibiotic agent / adverse drug reaction / insomnia

XT - antibiotic agent / adverse drug reaction / interstitial nephritis

XT - antibiotic agent / adverse drug reaction / kidney disease

XT - antibiotic agent / adverse drug reaction / liver fibrosis

XT - antibiotic agent / adverse drug reaction / liver toxicity

XT - antibiotic agent / adverse drug reaction / maculopapular rash

XT - antibiotic agent / adverse drug reaction / myoclonus epilepsy

XT - antibiotic agent / adverse drug reaction / nausea and vomiting

XT - antibiotic agent / adverse drug reaction / nephrotoxicity

XT - antibiotic agent / adverse drug reaction / neurotoxicity

XT - antibiotic agent / adverse drug reaction / peripheral neuropathy

XT - antibiotic agent / adverse drug reaction / phototoxicity

XT - antibiotic agent / adverse drug reaction / psychosis

XT - antibiotic agent / adverse drug reaction / rash

XT - antibiotic agent / adverse drug reaction / seizure

XT - antibiotic agent / adverse drug reaction / thrombocytopenia

XT - antibiotic agent / drug therapy / bacterial infection

XT - Azadirachta indica extract / drug therapy / bacterial infection

XT - azithromycin / adverse drug reaction / acute brain disease

XT - azithromycin / adverse drug reaction / cardiotoxicity

XT - azithromycin / adverse drug reaction / coma

XT - azithromycin / adverse drug reaction / confusion

XT - azithromycin / adverse drug reaction / depression

XT - azithromycin / adverse drug reaction / disorientation

XT - azithromycin / adverse drug reaction / epileptic state

XT - azithromycin / adverse drug reaction / headache

XT - azithromycin / adverse drug reaction / heart disease

XT - azithromycin / adverse drug reaction / heart ventricle arrhythmia

XT - azithromycin / adverse drug reaction / insomnia

XT - azithromycin / adverse drug reaction / myoclonus epilepsy

XT - azithromycin / adverse drug reaction / neurotoxicity

XT - azithromycin / adverse drug reaction / peripheral neuropathy

XT - azithromycin / adverse drug reaction / psychosis

XT - azithromycin / adverse drug reaction / seizure

XT - azithromycin / drug therapy / bacterial infection

XT - azlocillin / drug therapy / bacterial infection

XT - aztreonam / drug therapy / bacterial infection

XT - bacitracin / drug therapy / bacterial infection

XT - benzathine penicillin / adverse drug reaction / abdominal cramp

XT - benzathine penicillin / adverse drug reaction / anorexia

XT - benzathine penicillin / adverse drug reaction / diarrhea

XT - benzathine penicillin / adverse drug reaction / epigastric pain

XT - benzathine penicillin / adverse drug reaction / gastrointestinal disease

XT - benzathine penicillin / adverse drug reaction / gastrointestinal symptom

XT - benzathine penicillin / adverse drug reaction / nausea and vomiting

XT - benzathine penicillin / drug therapy / bacterial infection

XT - Bergenia ciliata extract / drug therapy / bacterial infection

XT - beta lactam / adverse drug reaction / anemia

XT - beta lactam / adverse drug reaction / bleeding

XT - beta lactam / adverse drug reaction / fever

XT - beta lactam / adverse drug reaction / hematologic disease

XT - beta lactam / adverse drug reaction / hypersensitivity

XT - beta lactam / adverse drug reaction / interstitial nephritis

XT - beta lactam / adverse drug reaction / kidney disease

XT - beta lactam / adverse drug reaction / maculopapular rash

XT - beta lactam / adverse drug reaction / nephrotoxicity

XT - beta lactam / adverse drug reaction / phototoxicity

XT - beta lactam / adverse drug reaction / rash

XT - beta lactam / adverse drug reaction / thrombocytopenia

XT - beta lactam / drug therapy / bacterial infection

XT - bleomycin / drug therapy / bacterial infection

XT - bleomycin / drug therapy / female genital tract cancer

XT - bleomycin / drug therapy / germ cell tumor

XT - bleomycin / drug therapy / lung cancer

XT - bleomycin / drug therapy / melanoma

XT - Bryophyllum pinnatum extract / drug therapy / bacterial infection

XT - Buchenavia Tomentosa extract / drug therapy / bacterial infection

XT - cannabis / drug therapy / bacterial infection

XT - carbapenem / drug therapy / bacterial infection

XT - carbenicillin / adverse drug reaction / acute brain disease

XT - carbenicillin / adverse drug reaction / coma

XT - carbenicillin / adverse drug reaction / confusion

XT - carbenicillin / adverse drug reaction / depression

XT - carbenicillin / adverse drug reaction / disorientation

XT - carbenicillin / adverse drug reaction / epileptic state

XT - carbenicillin / adverse drug reaction / headache

XT - carbenicillin / adverse drug reaction / insomnia

XT - carbenicillin / adverse drug reaction / liver fibrosis

XT - carbenicillin / adverse drug reaction / liver toxicity

XT - carbenicillin / adverse drug reaction / myoclonus epilepsy

XT - carbenicillin / adverse drug reaction / neurotoxicity

XT - carbenicillin / adverse drug reaction / peripheral neuropathy

XT - carbenicillin / adverse drug reaction / psychosis

XT - carbenicillin / adverse drug reaction / seizure

XT - carbenicillin / drug therapy / bacterial infection

XT - Caryophyllus aromaticus extract / drug therapy / bacterial infection

XT - cefaclor / drug therapy / bacterial infection

XT - cefalexin / drug therapy / bacterial infection

XT - cefaloridine / drug therapy / bacterial infection

XT - cefalotin / drug therapy / bacterial infection

XT - cefamandole / adverse drug reaction / anemia

XT - cefamandole / adverse drug reaction / bleeding

XT - cefamandole / adverse drug reaction / hematologic disease

XT - cefamandole / adverse drug reaction / thrombocytopenia

XT - cefamandole / drug therapy / bacterial infection

XT - cefapirin / drug therapy / bacterial infection

XT - cefazolin / adverse drug reaction / abdominal cramp

XT - cefazolin / adverse drug reaction / acute brain disease

XT - cefazolin / adverse drug reaction / anorexia

XT - cefazolin / adverse drug reaction / coma

XT - cefazolin / adverse drug reaction / confusion

XT - cefazolin / adverse drug reaction / depression

XT - cefazolin / adverse drug reaction / diarrhea

XT - cefazolin / adverse drug reaction / disorientation

XT - cefazolin / adverse drug reaction / epigastric pain

XT - cefazolin / adverse drug reaction / epileptic state

XT - cefazolin / adverse drug reaction / gastrointestinal disease

XT - cefazolin / adverse drug reaction / gastrointestinal symptom

XT - cefazolin / adverse drug reaction / headache

XT - cefazolin / adverse drug reaction / insomnia

XT - cefazolin / adverse drug reaction / myoclonus epilepsy

XT - cefazolin / adverse drug reaction / nausea and vomiting

XT - cefazolin / adverse drug reaction / neurotoxicity

XT - cefazolin / adverse drug reaction / peripheral neuropathy

XT - cefazolin / adverse drug reaction / psychosis

XT - cefazolin / adverse drug reaction / seizure

XT - cefazolin / drug therapy / bacterial infection

XT - cefdinir / drug therapy / bacterial infection

XT - cefepime / adverse drug reaction / acute brain disease

XT - cefepime / adverse drug reaction / coma

XT - cefepime / adverse drug reaction / confusion

XT - cefepime / adverse drug reaction / depression

XT - cefepime / adverse drug reaction / disorientation

XT - cefepime / adverse drug reaction / epileptic state

XT - cefepime / adverse drug reaction / headache

XT - cefepime / adverse drug reaction / insomnia

XT - cefepime / adverse drug reaction / myoclonus epilepsy

XT - cefepime / adverse drug reaction / neurotoxicity

XT - cefepime / adverse drug reaction / peripheral neuropathy

XT - cefepime / adverse drug reaction / psychosis

XT - cefepime / adverse drug reaction / seizure

XT - cefepime / drug therapy / bacterial infection

XT - cefixime / drug therapy / bacterial infection

XT - cefmetazole / adverse drug reaction / abdominal cramp

XT - cefmetazole / adverse drug reaction / anorexia

XT - cefmetazole / adverse drug reaction / diarrhea

XT - cefmetazole / adverse drug reaction / epigastric pain

XT - cefmetazole / adverse drug reaction / gastrointestinal disease

XT - cefmetazole / adverse drug reaction / gastrointestinal symptom

XT - cefmetazole / adverse drug reaction / nausea and vomiting

XT - cefmetazole / drug therapy / bacterial infection

XT - cefoperazone / adverse drug reaction / acute brain disease

XT - cefoperazone / adverse drug reaction / coma

XT - cefoperazone / adverse drug reaction / confusion

XT - cefoperazone / adverse drug reaction / depression

XT - cefoperazone / adverse drug reaction / disorientation

XT - cefoperazone / adverse drug reaction / epileptic state

XT - cefoperazone / adverse drug reaction / headache

XT - cefoperazone / adverse drug reaction / insomnia

XT - cefoperazone / adverse drug reaction / myoclonus epilepsy

XT - cefoperazone / adverse drug reaction / neurotoxicity

XT - cefoperazone / adverse drug reaction / peripheral neuropathy

XT - cefoperazone / adverse drug reaction / psychosis

XT - cefoperazone / adverse drug reaction / seizure

XT - cefoperazone / drug therapy / bacterial infection

XT - cefotaxime / adverse drug reaction / acute brain disease

XT - cefotaxime / adverse drug reaction / coma

XT - cefotaxime / adverse drug reaction / confusion

XT - cefotaxime / adverse drug reaction / depression

XT - cefotaxime / adverse drug reaction / disorientation

XT - cefotaxime / adverse drug reaction / epileptic state

XT - cefotaxime / adverse drug reaction / headache

XT - cefotaxime / adverse drug reaction / insomnia

XT - cefotaxime / adverse drug reaction / myoclonus epilepsy

XT - cefotaxime / adverse drug reaction / neurotoxicity

XT - cefotaxime / adverse drug reaction / peripheral neuropathy

XT - cefotaxime / adverse drug reaction / psychosis

XT - cefotaxime / adverse drug reaction / seizure

XT - cefotaxime / drug therapy / bacterial infection

XT - cefoxitin / drug therapy / bacterial infection

XT - cefpirome / adverse drug reaction / acute brain disease

XT - cefpirome / adverse drug reaction / coma

XT - cefpirome / adverse drug reaction / confusion

XT - cefpirome / adverse drug reaction / depression

XT - cefpirome / adverse drug reaction / disorientation

XT - cefpirome / adverse drug reaction / epileptic state

XT - cefpirome / adverse drug reaction / headache

XT - cefpirome / adverse drug reaction / insomnia

XT - cefpirome / adverse drug reaction / myoclonus epilepsy

XT - cefpirome / adverse drug reaction / neurotoxicity

XT - cefpirome / adverse drug reaction / peripheral neuropathy

XT - cefpirome / adverse drug reaction / psychosis

XT - cefpirome / adverse drug reaction / seizure

XT - cefpirome / drug therapy / bacterial infection

XT - cefpodoxime / drug therapy / bacterial infection

XT - cefprozil / drug therapy / bacterial infection

XT - cefradine / adverse drug reaction / acute brain disease

XT - cefradine / adverse drug reaction / coma

XT - cefradine / adverse drug reaction / confusion

XT - cefradine / adverse drug reaction / depression

XT - cefradine / adverse drug reaction / disorientation

XT - cefradine / adverse drug reaction / epileptic state

XT - cefradine / adverse drug reaction / headache

XT - cefradine / adverse drug reaction / insomnia

XT - cefradine / adverse drug reaction / myoclonus epilepsy

XT - cefradine / adverse drug reaction / neurotoxicity

XT - cefradine / adverse drug reaction / peripheral neuropathy

XT - cefradine / adverse drug reaction / psychosis

XT - cefradine / adverse drug reaction / seizure

XT - cefradine / drug therapy / bacterial infection

XT - ceftaroline / drug therapy / bacterial infection

XT - ceftazidime / adverse drug reaction / acute brain disease

XT - ceftazidime / adverse drug reaction / coma

XT - ceftazidime / adverse drug reaction / confusion

XT - ceftazidime / adverse drug reaction / depression

XT - ceftazidime / adverse drug reaction / disorientation

XT - ceftazidime / adverse drug reaction / epileptic state

XT - ceftazidime / adverse drug reaction / headache

XT - ceftazidime / adverse drug reaction / insomnia

XT - ceftazidime / adverse drug reaction / myoclonus epilepsy

XT - ceftazidime / adverse drug reaction / neurotoxicity

XT - ceftazidime / adverse drug reaction / peripheral neuropathy

XT - ceftazidime / adverse drug reaction / psychosis

XT - ceftazidime / adverse drug reaction / seizure

XT - ceftazidime / drug therapy / bacterial infection

XT - ceftibuten / drug therapy / bacterial infection

XT - ceftizoxime / drug therapy / bacterial infection

XT - ceftobiprole / drug therapy / bacterial infection

XT - ceftriaxone / adverse drug reaction / abdominal cramp

XT - ceftriaxone / adverse drug reaction / anorexia

XT - ceftriaxone / adverse drug reaction / diarrhea

XT - ceftriaxone / adverse drug reaction / epigastric pain

XT - ceftriaxone / adverse drug reaction / gastrointestinal disease

XT - ceftriaxone / adverse drug reaction / gastrointestinal symptom

XT - ceftriaxone / adverse drug reaction / nausea and vomiting

XT - ceftriaxone / drug therapy / bacterial infection

XT - cefuroxime / adverse drug reaction / abdominal cramp

XT - cefuroxime / adverse drug reaction / anorexia

XT - cefuroxime / adverse drug reaction / diarrhea

XT - cefuroxime / adverse drug reaction / epigastric pain

XT - cefuroxime / adverse drug reaction / gastrointestinal disease

XT - cefuroxime / adverse drug reaction / gastrointestinal symptom

XT - cefuroxime / adverse drug reaction / nausea and vomiting

XT - cefuroxime / drug therapy / bacterial infection

XT - cephalosporin / adverse drug reaction / abdominal cramp

XT - cephalosporin / adverse drug reaction / acute brain disease

XT - cephalosporin / adverse drug reaction / anemia

XT - cephalosporin / adverse drug reaction / anorexia

XT - cephalosporin / adverse drug reaction / bleeding

XT - cephalosporin / adverse drug reaction / coma

XT - cephalosporin / adverse drug reaction / confusion

XT - cephalosporin / adverse drug reaction / depression

XT - cephalosporin / adverse drug reaction / diarrhea

XT - cephalosporin / adverse drug reaction / disorientation

XT - cephalosporin / adverse drug reaction / epigastric pain

XT - cephalosporin / adverse drug reaction / epileptic state

XT - cephalosporin / adverse drug reaction / gastrointestinal disease

XT - cephalosporin / adverse drug reaction / gastrointestinal symptom

XT - cephalosporin / adverse drug reaction / headache

XT - cephalosporin / adverse drug reaction / hematologic disease

XT - cephalosporin / adverse drug reaction / insomnia

XT - cephalosporin / adverse drug reaction / myoclonus epilepsy

XT - cephalosporin / adverse drug reaction / nausea and vomiting

XT - cephalosporin / adverse drug reaction / neurotoxicity

XT - cephalosporin / adverse drug reaction / peripheral neuropathy

XT - cephalosporin / adverse drug reaction / psychosis

XT - cephalosporin / adverse drug reaction / seizure

XT - cephalosporin / adverse drug reaction / thrombocytopenia

XT - cephalosporin / drug therapy / bacterial infection

XT - chloramphenicol / adverse drug reaction / anemia

XT - chloramphenicol / adverse drug reaction / bleeding

XT - chloramphenicol / adverse drug reaction / hematologic disease

XT - chloramphenicol / adverse drug reaction / thrombocytopenia

XT - chloramphenicol / drug therapy / bacterial infection

XT - chloramphenicol / drug therapy / typhoid fever

XT - chlortetracycline / drug therapy / bacterial infection

XT - ciprofloxacin / adverse drug reaction / acute brain disease

XT - ciprofloxacin / adverse drug reaction / coma

XT - ciprofloxacin / adverse drug reaction / confusion

XT - ciprofloxacin / adverse drug reaction / depression

XT - ciprofloxacin / adverse drug reaction / disorientation

XT - ciprofloxacin / adverse drug reaction / epileptic state

XT - ciprofloxacin / adverse drug reaction / headache

XT - ciprofloxacin / adverse drug reaction / insomnia

XT - ciprofloxacin / adverse drug reaction / myoclonus epilepsy

XT - ciprofloxacin / adverse drug reaction / neurotoxicity

XT - ciprofloxacin / adverse drug reaction / peripheral neuropathy

XT - ciprofloxacin / adverse drug reaction / psychosis

XT - ciprofloxacin / adverse drug reaction / seizure

XT - ciprofloxacin / drug therapy / bacterial infection

XT - ciprofloxacin / drug therapy / bladder cancer

XT - ciprofloxacin / drug therapy / breast cancer

XT - ciprofloxacin / drug therapy / carcinoma

XT - ciprofloxacin / drug therapy / colorectal carcinoma

XT - ciprofloxacin / drug therapy / liver cell carcinoma

XT - ciprofloxacin / drug therapy / melanoma

XT - ciprofloxacin / drug therapy / nephroblastoma

XT - clarithromycin / adverse drug reaction / abdominal cramp

XT - clarithromycin / adverse drug reaction / acute brain disease

XT - clarithromycin / adverse drug reaction / anorexia

XT - clarithromycin / adverse drug reaction / cardiotoxicity

XT - clarithromycin / adverse drug reaction / coma

XT - clarithromycin / adverse drug reaction / confusion

XT - clarithromycin / adverse drug reaction / depression

XT - clarithromycin / adverse drug reaction / diarrhea

XT - clarithromycin / adverse drug reaction / disorientation

XT - clarithromycin / adverse drug reaction / epigastric pain

XT - clarithromycin / adverse drug reaction / epileptic state

XT - clarithromycin / adverse drug reaction / gastrointestinal disease

XT - clarithromycin / adverse drug reaction / gastrointestinal symptom

XT - clarithromycin / adverse drug reaction / headache

XT - clarithromycin / adverse drug reaction / heart disease

XT - clarithromycin / adverse drug reaction / heart ventricle arrhythmia

XT - clarithromycin / adverse drug reaction / insomnia

XT - clarithromycin / adverse drug reaction / myoclonus epilepsy

XT - clarithromycin / adverse drug reaction / nausea and vomiting

XT - clarithromycin / adverse drug reaction / neurotoxicity

XT - clarithromycin / adverse drug reaction / peripheral neuropathy

XT - clarithromycin / adverse drug reaction / psychosis

XT - clarithromycin / adverse drug reaction / seizure

XT - clarithromycin / drug therapy / bacterial infection

XT - cloxacillin / drug therapy / bacterial infection

XT - Commiphora molmol extract / drug therapy / bacterial infection

XT - cotrimoxazole / adverse drug reaction / anemia

XT - cotrimoxazole / adverse drug reaction / bleeding

XT - cotrimoxazole / adverse drug reaction / hematologic disease

XT - cotrimoxazole / adverse drug reaction / hypersensitivity

XT - cotrimoxazole / adverse drug reaction / maculopapular rash

XT - cotrimoxazole / adverse drug reaction / phototoxicity

XT - cotrimoxazole / adverse drug reaction / thrombocytopenia

XT - cotrimoxazole / drug therapy / bacterial infection

XT - Crataegus azarolus extract / drug therapy / bacterial infection

XT - Croton doctoris extract / drug therapy / bacterial infection

XT - Croton urucurana extract / drug therapy / bacterial infection

XT - Curcuma longa extract / drug therapy / bacterial infection

XT - cycloserine / drug therapy / bacterial infection

XT - cyclotide / drug therapy / bacterial infection

XT - Cymbopogon citratus extract / drug therapy / bacterial infection

XT - dactinomycin / drug therapy / bacterial infection

XT - dactinomycin / drug therapy / carcinoma

XT - dactinomycin / drug therapy / nephroblastoma

XT - dactinomycin / drug therapy / neuroblastoma

XT - dactinomycin / drug therapy / rhabdomyosarcoma

XT - daptomycin / adverse drug reaction / abdominal cramp

XT - daptomycin / adverse drug reaction / anorexia

XT - daptomycin / adverse drug reaction / diarrhea

XT - daptomycin / adverse drug reaction / epigastric pain

XT - daptomycin / adverse drug reaction / gastrointestinal disease

XT - daptomycin / adverse drug reaction / gastrointestinal symptom

XT - daptomycin / adverse drug reaction / nausea and vomiting

XT - daptomycin / drug therapy / bacterial infection

XT - daunorubicin / drug therapy / acute myeloid leukemia

XT - daunorubicin / drug therapy / bacterial infection

XT - daunorubicin / drug therapy / lymphatic leukemia

XT - demeclocycline / drug therapy / bacterial infection

XT - Dodonaea viscosa extract / drug therapy / bacterial infection

XT - doripenem / drug therapy / bacterial infection

XT - doxorubicin / drug therapy / bacterial infection

XT - doxorubicin / drug therapy / breast cancer

XT - doxorubicin / drug therapy / lung cancer

XT - doxorubicin / drug therapy / lymphoma

XT - doxycycline / adverse drug reaction / abdominal cramp

XT - doxycycline / adverse drug reaction / anorexia

XT - doxycycline / adverse drug reaction / diarrhea

XT - doxycycline / adverse drug reaction / epigastric pain

XT - doxycycline / adverse drug reaction / gastrointestinal disease

XT - doxycycline / adverse drug reaction / gastrointestinal symptom

XT - doxycycline / adverse drug reaction / nausea and vomiting

XT - doxycycline / drug therapy / bacterial infection

XT - enoxacin / adverse drug reaction / acute brain disease

XT - enoxacin / adverse drug reaction / coma

XT - enoxacin / adverse drug reaction / confusion

XT - enoxacin / adverse drug reaction / depression

XT - enoxacin / adverse drug reaction / disorientation

XT - enoxacin / adverse drug reaction / epileptic state

XT - enoxacin / adverse drug reaction / headache

XT - enoxacin / adverse drug reaction / insomnia

XT - enoxacin / adverse drug reaction / myoclonus epilepsy

XT - enoxacin / adverse drug reaction / neurotoxicity

XT - enoxacin / adverse drug reaction / peripheral neuropathy

XT - enoxacin / adverse drug reaction / psychosis

XT - enoxacin / adverse drug reaction / seizure

XT - enoxacin / drug therapy / bacterial infection

XT - epirubicin / drug therapy / bacterial infection

XT - epirubicin / drug therapy / bladder cancer

XT - epirubicin / drug therapy / breast cancer

XT - epirubicin / drug therapy / colon cancer

XT - epirubicin / drug therapy / colorectal carcinoma

XT - epirubicin / drug therapy / lung cancer

XT - epirubicin / drug therapy / lymphoma

XT - epirubicin / drug therapy / melanoma

XT - epirubicin / drug therapy / ovary carcinoma

XT - epirubicin / drug therapy / soft tissue sarcoma

XT - epirubicin / drug therapy / stomach cancer

XT - erythromycin / adverse drug reaction / abdominal cramp

XT - erythromycin / adverse drug reaction / acute brain disease

XT - erythromycin / adverse drug reaction / anorexia

XT - erythromycin / adverse drug reaction / cardiotoxicity

XT - erythromycin / adverse drug reaction / coma

XT - erythromycin / adverse drug reaction / confusion

XT - erythromycin / adverse drug reaction / depression

XT - erythromycin / adverse drug reaction / diarrhea

XT - erythromycin / adverse drug reaction / disorientation

XT - erythromycin / adverse drug reaction / epigastric pain

XT - erythromycin / adverse drug reaction / epileptic state

XT - erythromycin / adverse drug reaction / gastrointestinal disease

XT - erythromycin / adverse drug reaction / gastrointestinal symptom

XT - erythromycin / adverse drug reaction / headache

XT - erythromycin / adverse drug reaction / heart disease

XT - erythromycin / adverse drug reaction / heart ventricle arrhythmia

XT - erythromycin / adverse drug reaction / insomnia

XT - erythromycin / adverse drug reaction / myoclonus epilepsy

XT - erythromycin / adverse drug reaction / nausea and vomiting

XT - erythromycin / adverse drug reaction / neurotoxicity

XT - erythromycin / adverse drug reaction / peripheral neuropathy

XT - erythromycin / adverse drug reaction / psychosis

XT - erythromycin / adverse drug reaction / seizure

XT - erythromycin / drug therapy / bacterial infection

XT - essential oil / drug therapy / bacterial infection

XT - ethambutol / drug therapy / bacterial infection

XT - Euphorbia helioscopia extract / drug therapy / bacterial infection

XT - farnesol / drug therapy / bacterial infection

XT - fidaxomicin / drug therapy / bacterial infection

XT - fleroxacin / adverse drug reaction / hypersensitivity

XT - fleroxacin / adverse drug reaction / maculopapular rash

XT - fleroxacin / adverse drug reaction / phototoxicity

XT - fleroxacin / drug therapy / bacterial infection

XT - gemifloxacin / adverse drug reaction / acute brain disease

XT - gemifloxacin / adverse drug reaction / coma

XT - gemifloxacin / adverse drug reaction / confusion

XT - gemifloxacin / adverse drug reaction / depression

XT - gemifloxacin / adverse drug reaction / disorientation

XT - gemifloxacin / adverse drug reaction / epileptic state

XT - gemifloxacin / adverse drug reaction / headache

XT - gemifloxacin / adverse drug reaction / insomnia

XT - gemifloxacin / adverse drug reaction / myoclonus epilepsy

XT - gemifloxacin / adverse drug reaction / neurotoxicity

XT - gemifloxacin / adverse drug reaction / peripheral neuropathy

XT - gemifloxacin / adverse drug reaction / psychosis

XT - gemifloxacin / adverse drug reaction / seizure

XT - gemifloxacin / drug therapy / bacterial infection

XT - gemifloxacin / drug therapy / breast cancer

XT - gentamicin / adverse drug reaction / acute brain disease

XT - gentamicin / adverse drug reaction / coma

XT - gentamicin / adverse drug reaction / confusion

XT - gentamicin / adverse drug reaction / depression

XT - gentamicin / adverse drug reaction / disorientation

XT - gentamicin / adverse drug reaction / epileptic state

XT - gentamicin / adverse drug reaction / fever

XT - gentamicin / adverse drug reaction / headache

XT - gentamicin / adverse drug reaction / insomnia

XT - gentamicin / adverse drug reaction / interstitial nephritis

XT - gentamicin / adverse drug reaction / kidney disease

XT - gentamicin / adverse drug reaction / liver fibrosis

XT - gentamicin / adverse drug reaction / liver toxicity

XT - gentamicin / adverse drug reaction / myoclonus epilepsy

XT - gentamicin / adverse drug reaction / nephrotoxicity

XT - gentamicin / adverse drug reaction / neurotoxicity

XT - gentamicin / adverse drug reaction / peripheral neuropathy

XT - gentamicin / adverse drug reaction / psychosis

XT - gentamicin / adverse drug reaction / rash

XT - gentamicin / adverse drug reaction / seizure

XT - gentamicin / drug therapy / bacterial infection

XT - ginger extract / drug therapy / bacterial infection

XT - glycopeptide / drug therapy / bacterial infection

XT - guava extract / drug therapy / bacterial infection

XT - imipenem / drug therapy / bacterial infection

XT - isepamicin / drug therapy / bacterial infection

XT - isoniazid / adverse drug reaction / liver fibrosis

XT - isoniazid / adverse drug reaction / liver toxicity

XT - isoniazid / drug therapy / bacterial infection

XT - ithromycin / drug therapy / bacterial infection

XT - Jasminum officinale extract / drug therapy / bacterial infection

XT - josamycin / drug therapy / bacterial infection

XT - kanamycin / adverse drug reaction / cardiotoxicity

XT - kanamycin / adverse drug reaction / heart disease

XT - kanamycin / adverse drug reaction / heart ventricle arrhythmia

XT - kanamycin / drug therapy / bacterial infection

XT - lectin / drug therapy / bacterial infection

XT - levofloxacin / adverse drug reaction / cardiotoxicity

XT - levofloxacin / adverse drug reaction / heart disease

XT - levofloxacin / adverse drug reaction / heart ventricle arrhythmia

XT - levofloxacin / adverse drug reaction / hypersensitivity

XT - levofloxacin / adverse drug reaction / maculopapular rash

XT - levofloxacin / adverse drug reaction / phototoxicity

XT - levofloxacin / drug therapy / bacterial infection

XT - lincosamide / adverse drug reaction / anemia

XT - lincosamide / adverse drug reaction / bleeding

XT - lincosamide / adverse drug reaction / hematologic disease

XT - lincosamide / adverse drug reaction / thrombocytopenia

XT - lincosamide / drug therapy / bacterial infection

XT - lipopeptide / drug therapy / bacterial infection

XT - lomefloxacin / adverse drug reaction / hypersensitivity

XT - lomefloxacin / adverse drug reaction / maculopapular rash

XT - lomefloxacin / adverse drug reaction / phototoxicity

XT - lomefloxacin / drug therapy / bacterial infection

XT - loracarbef / drug therapy / bacterial infection

XT - macrolide / adverse drug reaction / abdominal cramp

XT - macrolide / adverse drug reaction / acute brain disease

XT - macrolide / adverse drug reaction / anorexia

XT - macrolide / adverse drug reaction / cardiotoxicity

XT - macrolide / adverse drug reaction / coma

XT - macrolide / adverse drug reaction / confusion

XT - macrolide / adverse drug reaction / depression

XT - macrolide / adverse drug reaction / diarrhea

XT - macrolide / adverse drug reaction / disorientation

XT - macrolide / adverse drug reaction / epigastric pain

XT - macrolide / adverse drug reaction / epileptic state

XT - macrolide / adverse drug reaction / gastrointestinal disease

XT - macrolide / adverse drug reaction / gastrointestinal symptom

XT - macrolide / adverse drug reaction / headache

XT - macrolide / adverse drug reaction / heart disease

XT - macrolide / adverse drug reaction / heart ventricle arrhythmia

XT - macrolide / adverse drug reaction / hypersensitivity

XT - macrolide / adverse drug reaction / insomnia

XT - macrolide / adverse drug reaction / maculopapular rash

XT - macrolide / adverse drug reaction / myoclonus epilepsy

XT - macrolide / adverse drug reaction / nausea and vomiting

XT - macrolide / adverse drug reaction / neurotoxicity

XT - macrolide / adverse drug reaction / peripheral neuropathy

XT - macrolide / adverse drug reaction / phototoxicity

XT - macrolide / adverse drug reaction / psychosis

XT - macrolide / adverse drug reaction / seizure

XT - macrolide / drug therapy / bacterial infection

XT - Melissa offficinalis extract / drug therapy / bacterial infection

XT - meropenem / adverse drug reaction / liver fibrosis

XT - meropenem / adverse drug reaction / liver toxicity

XT - meropenem / drug therapy / bacterial infection

XT - metacycline / adverse drug reaction / abdominal cramp

XT - metacycline / adverse drug reaction / anorexia

XT - metacycline / adverse drug reaction / diarrhea

XT - metacycline / adverse drug reaction / epigastric pain

XT - metacycline / adverse drug reaction / gastrointestinal disease

XT - metacycline / adverse drug reaction / gastrointestinal symptom

XT - metacycline / adverse drug reaction / hypersensitivity

XT - metacycline / adverse drug reaction / maculopapular rash

XT - metacycline / adverse drug reaction / nausea and vomiting

XT - metacycline / adverse drug reaction / phototoxicity

XT - metacycline / drug therapy / bacterial infection

XT - meticillin / adverse drug reaction / hypersensitivity

XT - meticillin / adverse drug reaction / liver fibrosis

XT - meticillin / adverse drug reaction / liver toxicity

XT - meticillin / adverse drug reaction / maculopapular rash

XT - meticillin / adverse drug reaction / phototoxicity

XT - meticillin / drug therapy / bacterial infection

XT - mezlocillin / drug therapy / bacterial infection

XT - minocycline / adverse drug reaction / abdominal cramp

XT - minocycline / adverse drug reaction / anorexia

XT - minocycline / adverse drug reaction / diarrhea

XT - minocycline / adverse drug reaction / epigastric pain

XT - minocycline / adverse drug reaction / gastrointestinal disease

XT - minocycline / adverse drug reaction / gastrointestinal symptom

XT - minocycline / adverse drug reaction / hypersensitivity

XT - minocycline / adverse drug reaction / maculopapular rash

XT - minocycline / adverse drug reaction / nausea and vomiting

XT - minocycline / adverse drug reaction / phototoxicity

XT - minocycline / drug therapy / bacterial infection

XT - mithramycin / drug therapy / bacterial infection

XT - mithramycin / drug therapy / glioma

XT - mithramycin / drug therapy / lymphoma

XT - mithramycin / drug therapy / testicular embryonal cancer

XT - mitomycin / drug therapy / bacterial infection

XT - mitomycin / drug therapy / bladder cancer

XT - moluccanin / drug therapy / bacterial infection

XT - moxifloxacin / adverse drug reaction / abdominal cramp

XT - moxifloxacin / adverse drug reaction / acute brain disease

XT - moxifloxacin / adverse drug reaction / anorexia

XT - moxifloxacin / adverse drug reaction / cardiotoxicity

XT - moxifloxacin / adverse drug reaction / coma

XT - moxifloxacin / adverse drug reaction / confusion

XT - moxifloxacin / adverse drug reaction / depression

XT - moxifloxacin / adverse drug reaction / diarrhea

XT - moxifloxacin / adverse drug reaction / disorientation

XT - moxifloxacin / adverse drug reaction / epigastric pain

XT - moxifloxacin / adverse drug reaction / epileptic state

XT - moxifloxacin / adverse drug reaction / gastrointestinal disease

XT - moxifloxacin / adverse drug reaction / gastrointestinal symptom

XT - moxifloxacin / adverse drug reaction / headache

XT - moxifloxacin / adverse drug reaction / heart disease

XT - moxifloxacin / adverse drug reaction / heart ventricle arrhythmia

XT - moxifloxacin / adverse drug reaction / insomnia

XT - moxifloxacin / adverse drug reaction / liver fibrosis

XT - moxifloxacin / adverse drug reaction / liver toxicity

XT - moxifloxacin / adverse drug reaction / myoclonus epilepsy

XT - moxifloxacin / adverse drug reaction / nausea and vomiting

XT - moxifloxacin / adverse drug reaction / neurotoxicity

XT - moxifloxacin / adverse drug reaction / peripheral neuropathy

XT - moxifloxacin / adverse drug reaction / psychosis

XT - moxifloxacin / adverse drug reaction / seizure

XT - moxifloxacin / drug therapy / bacterial infection

XT - nafcillin / drug therapy / bacterial infection

XT - nalidixic acid / drug therapy / bacterial infection

XT - natural product / drug therapy / bacterial infection

XT - neomycin / adverse drug reaction / acute brain disease

XT - neomycin / adverse drug reaction / coma

XT - neomycin / adverse drug reaction / confusion

XT - neomycin / adverse drug reaction / depression

XT - neomycin / adverse drug reaction / disorientation

XT - neomycin / adverse drug reaction / epileptic state

XT - neomycin / adverse drug reaction / headache

XT - neomycin / adverse drug reaction / insomnia

XT - neomycin / adverse drug reaction / myoclonus epilepsy

XT - neomycin / adverse drug reaction / neurotoxicity

XT - neomycin / adverse drug reaction / peripheral neuropathy

XT - neomycin / adverse drug reaction / psychosis

XT - neomycin / adverse drug reaction / seizure

XT - neomycin / drug therapy / bacterial infection

XT - netilmicin / drug therapy / bacterial infection

XT - nitrofuran derivative / drug therapy / bacterial infection

XT - nitrofurantoin / adverse drug reaction / acute respiratory failure

XT - nitrofurantoin / adverse drug reaction / lung disease

XT - nitrofurantoin / adverse drug reaction / lung toxicity

XT - nitrofurantoin / adverse drug reaction / malignant pleura effusion

XT - nitrofurantoin / adverse drug reaction / peripheral eosinophilia

XT - nitrofurantoin / drug therapy / bacterial infection

XT - norfloxacin / adverse drug reaction / acute brain disease

XT - norfloxacin / adverse drug reaction / coma

XT - norfloxacin / adverse drug reaction / confusion

XT - norfloxacin / adverse drug reaction / depression

XT - norfloxacin / adverse drug reaction / disorientation

XT - norfloxacin / adverse drug reaction / epileptic state

XT - norfloxacin / adverse drug reaction / fever

XT - norfloxacin / adverse drug reaction / headache

XT - norfloxacin / adverse drug reaction / insomnia

XT - norfloxacin / adverse drug reaction / interstitial nephritis

XT - norfloxacin / adverse drug reaction / kidney disease

XT - norfloxacin / adverse drug reaction / liver fibrosis

XT - norfloxacin / adverse drug reaction / liver toxicity

XT - norfloxacin / adverse drug reaction / myoclonus epilepsy

XT - norfloxacin / adverse drug reaction / nephrotoxicity

XT - norfloxacin / adverse drug reaction / neurotoxicity

XT - norfloxacin / adverse drug reaction / peripheral neuropathy

XT - norfloxacin / adverse drug reaction / psychosis

XT - norfloxacin / adverse drug reaction / rash

XT - norfloxacin / adverse drug reaction / seizure

XT - norfloxacin / drug therapy / bacterial infection

XT - novobiocin / drug therapy / bacterial infection

XT - Ocimum sanctum extract / drug therapy / bacterial infection

XT - Ocimun basilicum extract / drug therapy / bacterial infection

XT - ofloxacin / adverse drug reaction / acute brain disease

XT - ofloxacin / adverse drug reaction / coma

XT - ofloxacin / adverse drug reaction / confusion

XT - ofloxacin / adverse drug reaction / depression

XT - ofloxacin / adverse drug reaction / disorientation

XT - ofloxacin / adverse drug reaction / epileptic state

XT - ofloxacin / adverse drug reaction / headache

XT - ofloxacin / adverse drug reaction / insomnia

XT - ofloxacin / adverse drug reaction / myoclonus epilepsy

XT - ofloxacin / adverse drug reaction / neurotoxicity

XT - ofloxacin / adverse drug reaction / peripheral neuropathy

XT - ofloxacin / adverse drug reaction / psychosis

XT - ofloxacin / adverse drug reaction / seizure

XT - ofloxacin / drug therapy / bacterial infection

XT - oleandomycin / adverse drug reaction / abdominal cramp

XT - oleandomycin / adverse drug reaction / anorexia

XT - oleandomycin / adverse drug reaction / diarrhea

XT - oleandomycin / adverse drug reaction / epigastric pain

XT - oleandomycin / adverse drug reaction / gastrointestinal disease

XT - oleandomycin / adverse drug reaction / gastrointestinal symptom

XT - oleandomycin / adverse drug reaction / nausea and vomiting

XT - oleandomycin / drug therapy / bacterial infection

XT - Origanum vulgare extract / drug therapy / bacterial infection

XT - Orthosiphon aristatus extract / drug therapy / bacterial infection

XT - oxacillin / adverse drug reaction / liver fibrosis

XT - oxacillin / adverse drug reaction / liver toxicity

XT - oxacillin / drug therapy / bacterial infection

XT - oxytetracycline / adverse drug reaction / abdominal cramp

XT - oxytetracycline / adverse drug reaction / anorexia

XT - oxytetracycline / adverse drug reaction / diarrhea

XT - oxytetracycline / adverse drug reaction / epigastric pain

XT - oxytetracycline / adverse drug reaction / gastrointestinal disease

XT - oxytetracycline / adverse drug reaction / gastrointestinal symptom

XT - oxytetracycline / adverse drug reaction / nausea and vomiting

XT - oxytetracycline / drug therapy / bacterial infection

XT - paromomycin / drug therapy / bacterial infection

XT - pefloxacin / drug therapy / bacterial infection

XT - penicillin derivative / adverse drug reaction / abdominal cramp

XT - penicillin derivative / adverse drug reaction / acute brain disease

XT - penicillin derivative / adverse drug reaction / anemia

XT - penicillin derivative / adverse drug reaction / anorexia

XT - penicillin derivative / adverse drug reaction / bleeding

XT - penicillin derivative / adverse drug reaction / coma

XT - penicillin derivative / adverse drug reaction / confusion

XT - penicillin derivative / adverse drug reaction / depression

XT - penicillin derivative / adverse drug reaction / diarrhea

XT - penicillin derivative / adverse drug reaction / disorientation

XT - penicillin derivative / adverse drug reaction / epigastric pain

XT - penicillin derivative / adverse drug reaction / epileptic state

XT - penicillin derivative / adverse drug reaction / gastrointestinal disease

XT - penicillin derivative / adverse drug reaction / gastrointestinal symptom

XT - penicillin derivative / adverse drug reaction / headache

XT - penicillin derivative / adverse drug reaction / hematologic disease

XT - penicillin derivative / adverse drug reaction / insomnia

XT - penicillin derivative / adverse drug reaction / myoclonus epilepsy

XT - penicillin derivative / adverse drug reaction / nausea and vomiting

XT - penicillin derivative / adverse drug reaction / neurotoxicity

XT - penicillin derivative / adverse drug reaction / peripheral neuropathy

XT - penicillin derivative / adverse drug reaction / psychosis

XT - penicillin derivative / adverse drug reaction / seizure

XT - penicillin derivative / adverse drug reaction / thrombocytopenia

XT - penicillin derivative / drug therapy / bacterial infection

XT - penicillin G / adverse drug reaction / abdominal cramp

XT - penicillin G / adverse drug reaction / acute brain disease

XT - penicillin G / adverse drug reaction / anemia

XT - penicillin G / adverse drug reaction / anorexia

XT - penicillin G / adverse drug reaction / bleeding

XT - penicillin G / adverse drug reaction / coma

XT - penicillin G / adverse drug reaction / confusion

XT - penicillin G / adverse drug reaction / depression

XT - penicillin G / adverse drug reaction / diarrhea

XT - penicillin G / adverse drug reaction / disorientation

XT - penicillin G / adverse drug reaction / epigastric pain

XT - penicillin G / adverse drug reaction / epileptic state

XT - penicillin G / adverse drug reaction / gastrointestinal disease

XT - penicillin G / adverse drug reaction / gastrointestinal symptom

XT - penicillin G / adverse drug reaction / headache

XT - penicillin G / adverse drug reaction / hematologic disease

XT - penicillin G / adverse drug reaction / insomnia

XT - penicillin G / adverse drug reaction / liver fibrosis

XT - penicillin G / adverse drug reaction / liver toxicity

XT - penicillin G / adverse drug reaction / myoclonus epilepsy

XT - penicillin G / adverse drug reaction / nausea and vomiting

XT - penicillin G / adverse drug reaction / neurotoxicity

XT - penicillin G / adverse drug reaction / peripheral neuropathy

XT - penicillin G / adverse drug reaction / psychosis

XT - penicillin G / adverse drug reaction / seizure

XT - penicillin G / adverse drug reaction / thrombocytopenia

XT - penicillin G / drug therapy / bacterial infection

XT - penicillin G / drug therapy / pneumonia

XT - penicillin V / adverse drug reaction / abdominal cramp

XT - penicillin V / adverse drug reaction / acute brain disease

XT - penicillin V / adverse drug reaction / anorexia

XT - penicillin V / adverse drug reaction / coma

XT - penicillin V / adverse drug reaction / confusion

XT - penicillin V / adverse drug reaction / depression

XT - penicillin V / adverse drug reaction / diarrhea

XT - penicillin V / adverse drug reaction / disorientation

XT - penicillin V / adverse drug reaction / epigastric pain

XT - penicillin V / adverse drug reaction / epileptic state

XT - penicillin V / adverse drug reaction / gastrointestinal disease

XT - penicillin V / adverse drug reaction / gastrointestinal symptom

XT - penicillin V / adverse drug reaction / headache

XT - penicillin V / adverse drug reaction / insomnia

XT - penicillin V / adverse drug reaction / myoclonus epilepsy

XT - penicillin V / adverse drug reaction / nausea and vomiting

XT - penicillin V / adverse drug reaction / neurotoxicity

XT - penicillin V / adverse drug reaction / peripheral neuropathy

XT - penicillin V / adverse drug reaction / psychosis

XT - penicillin V / adverse drug reaction / seizure

XT - penicillin V / drug therapy / bacterial infection

XT - phenazine / drug therapy / bacterial infection

XT - phenol / drug therapy / bacterial infection

XT - phthalylsulfathiazole / drug therapy / bacterial infection

XT - Pimpinella anisum extract / drug therapy / bacterial infection

XT - piperacillin / adverse drug reaction / acute brain disease

XT - piperacillin / adverse drug reaction / coma

XT - piperacillin / adverse drug reaction / confusion

XT - piperacillin / adverse drug reaction / depression

XT - piperacillin / adverse drug reaction / disorientation

XT - piperacillin / adverse drug reaction / epileptic state

XT - piperacillin / adverse drug reaction / headache

XT - piperacillin / adverse drug reaction / insomnia

XT - piperacillin / adverse drug reaction / liver fibrosis

XT - piperacillin / adverse drug reaction / liver toxicity

XT - piperacillin / adverse drug reaction / myoclonus epilepsy

XT - piperacillin / adverse drug reaction / neurotoxicity

XT - piperacillin / adverse drug reaction / peripheral neuropathy

XT - piperacillin / adverse drug reaction / psychosis

XT - piperacillin / adverse drug reaction / seizure

XT - piperacillin / drug therapy / bacterial infection

XT - pleuromutilin / drug therapy / bacterial infection

XT - polyphenol / drug therapy / bacterial infection

XT - pomegranate extract / drug therapy / bacterial infection

XT - pyrogallol / drug therapy / bacterial infection

XT - pyrrole / adverse drug reaction / cardiotoxicity

XT - pyrrole / adverse drug reaction / heart disease

XT - pyrrole / adverse drug reaction / heart ventricle arrhythmia

XT - pyrrole / drug therapy / bacterial infection

XT - quinoline / adverse drug reaction / abdominal cramp

XT - quinoline / adverse drug reaction / anorexia

XT - quinoline / adverse drug reaction / diarrhea

XT - quinoline / adverse drug reaction / epigastric pain

XT - quinoline / adverse drug reaction / gastrointestinal disease

XT - quinoline / adverse drug reaction / gastrointestinal symptom

XT - quinoline / adverse drug reaction / nausea and vomiting

XT - quinoline / drug therapy / bacterial infection

XT - quinoline derived antiinfective agent / adverse drug reaction / abdominal cramp

XT - quinoline derived antiinfective agent / adverse drug reaction / anorexia

XT - quinoline derived antiinfective agent / adverse drug reaction / cardiotoxicity

XT - quinoline derived antiinfective agent / adverse drug reaction / diarrhea

XT - quinoline derived antiinfective agent / adverse drug reaction / epigastric pain

XT - quinoline derived antiinfective agent / adverse drug reaction / gastrointestinal disease

XT - quinoline derived antiinfective agent / adverse drug reaction / gastrointestinal symptom

XT - quinoline derived antiinfective agent / adverse drug reaction / heart disease

XT - quinoline derived antiinfective agent / adverse drug reaction / heart ventricle arrhythmia

XT - quinoline derived antiinfective agent / adverse drug reaction / nausea and vomiting

XT - quinoline derived antiinfective agent / drug therapy / bacterial infection

XT - quinolone / adverse drug reaction / cardiotoxicity

XT - quinolone / adverse drug reaction / heart disease

XT - quinolone / adverse drug reaction / heart ventricle arrhythmia

XT - quinolone / drug therapy / bacterial infection

XT - quinupristin / drug therapy / bacterial infection

XT - retapamulin / drug therapy / bacterial infection

XT - Rosmarinus officinalis extract / drug therapy / bacterial infection

XT - Santalum album extract / drug therapy / bacterial infection

XT - sesquiterpene / drug therapy / bacterial infection

XT - sisomicin / adverse drug reaction / cardiotoxicity

XT - sisomicin / adverse drug reaction / heart disease

XT - sisomicin / adverse drug reaction / heart ventricle arrhythmia

XT - sisomicin / drug therapy / bacterial infection

XT - Solanum nigrum extract / drug therapy / bacterial infection

XT - sparfloxacin / adverse drug reaction / hypersensitivity

XT - sparfloxacin / adverse drug reaction / maculopapular rash

XT - sparfloxacin / adverse drug reaction / phototoxicity

XT - sparfloxacin / drug therapy / bacterial infection

XT - spectinomycin / drug therapy / bacterial infection

XT - squalamine / drug therapy / bacterial infection

XT - streptogramin derivative / adverse drug reaction / anemia

XT - streptogramin derivative / adverse drug reaction / bleeding

XT - streptogramin derivative / adverse drug reaction / hematologic disease

XT - streptogramin derivative / adverse drug reaction / thrombocytopenia

XT - streptogramin derivative / drug therapy / bacterial infection

XT - streptomycin / adverse drug reaction / cardiotoxicity

XT - streptomycin / adverse drug reaction / heart disease

XT - streptomycin / adverse drug reaction / heart ventricle arrhythmia

XT - streptomycin / drug therapy / bacterial infection

XT - streptomycin / drug therapy / tuberculosis

XT - sulfadiazine / drug therapy / bacterial infection

XT - sulfafurazole / drug therapy / bacterial infection

XT - sulfamethoxazole / drug therapy / bacterial infection

XT - sulfamidochrysoidine / drug therapy / bacterial infection

XT - sulfanilamide / adverse drug reaction / anemia

XT - sulfanilamide / adverse drug reaction / bleeding

XT - sulfanilamide / adverse drug reaction / hematologic disease

XT - sulfanilamide / adverse drug reaction / thrombocytopenia

XT - sulfanilamide / drug therapy / bacterial infection

XT - sulfonamide / adverse drug reaction / acute brain disease

XT - sulfonamide / adverse drug reaction / anemia

XT - sulfonamide / adverse drug reaction / bleeding

XT - sulfonamide / adverse drug reaction / coma

XT - sulfonamide / adverse drug reaction / confusion

XT - sulfonamide / adverse drug reaction / depression

XT - sulfonamide / adverse drug reaction / disorientation

XT - sulfonamide / adverse drug reaction / epileptic state

XT - sulfonamide / adverse drug reaction / headache

XT - sulfonamide / adverse drug reaction / hematologic disease

XT - sulfonamide / adverse drug reaction / hypersensitivity

XT - sulfonamide / adverse drug reaction / insomnia

XT - sulfonamide / adverse drug reaction / myoclonus epilepsy

XT - sulfonamide / adverse drug reaction / neurotoxicity

XT - sulfonamide / adverse drug reaction / peripheral neuropathy

XT - sulfonamide / adverse drug reaction / psychosis

XT - sulfonamide / adverse drug reaction / seizure

XT - sulfonamide / adverse drug reaction / thrombocytopenia

XT - sulfonamide / drug therapy / bacterial infection

XT - Syzygyum joabolanum extract / drug therapy / bacterial infection

XT - teicoplanin / drug therapy / bacterial infection

XT - temocillin / drug therapy / bacterial infection

XT - tetracycline / adverse drug reaction / abdominal cramp

XT - tetracycline / adverse drug reaction / anorexia

XT - tetracycline / adverse drug reaction / diarrhea

XT - tetracycline / adverse drug reaction / epigastric pain

XT - tetracycline / adverse drug reaction / gastrointestinal disease

XT - tetracycline / adverse drug reaction / gastrointestinal symptom

XT - tetracycline / adverse drug reaction / nausea and vomiting

XT - tetracycline / drug therapy / bacterial infection

XT - thioamide / drug therapy / bacterial infection

XT - Thymus vulgaris extract / drug therapy / bacterial infection

XT - ticarcillin / drug therapy / bacterial infection

XT - tigecycline / drug therapy / bacterial infection

XT - tobramycin / adverse drug reaction / acute brain disease

XT - tobramycin / adverse drug reaction / coma

XT - tobramycin / adverse drug reaction / confusion

XT - tobramycin / adverse drug reaction / depression

XT - tobramycin / adverse drug reaction / disorientation

XT - tobramycin / adverse drug reaction / epileptic state

XT - tobramycin / adverse drug reaction / fever

XT - tobramycin / adverse drug reaction / headache

XT - tobramycin / adverse drug reaction / insomnia

XT - tobramycin / adverse drug reaction / interstitial nephritis

XT - tobramycin / adverse drug reaction / kidney disease

XT - tobramycin / adverse drug reaction / myoclonus epilepsy

XT - tobramycin / adverse drug reaction / nephrotoxicity

XT - tobramycin / adverse drug reaction / neurotoxicity

XT - tobramycin / adverse drug reaction / peripheral neuropathy

XT - tobramycin / adverse drug reaction / psychosis

XT - tobramycin / adverse drug reaction / rash

XT - tobramycin / adverse drug reaction / seizure

XT - tobramycin / drug therapy / bacterial infection

XT - tontetracycline / adverse drug reaction / hypersensitivity

XT - tontetracycline / adverse drug reaction / maculopapular rash

XT - tontetracycline / adverse drug reaction / phototoxicity

XT - tontetracycline / drug therapy / bacterial infection

XT - trimethoprim / drug therapy / bacterial infection

XT - trovafloxacin / adverse drug reaction / abdominal cramp

XT - trovafloxacin / adverse drug reaction / anorexia

XT - trovafloxacin / adverse drug reaction / diarrhea

XT - trovafloxacin / adverse drug reaction / epigastric pain

XT - trovafloxacin / adverse drug reaction / gastrointestinal disease

XT - trovafloxacin / adverse drug reaction / gastrointestinal symptom

XT - trovafloxacin / adverse drug reaction / liver fibrosis

XT - trovafloxacin / adverse drug reaction / liver toxicity

XT - trovafloxacin / adverse drug reaction / nausea and vomiting

XT - trovafloxacin / drug therapy / bacterial infection

XT - vancomycin / adverse drug reaction / fever

XT - vancomycin / adverse drug reaction / interstitial nephritis

XT - vancomycin / adverse drug reaction / kidney disease

XT - vancomycin / adverse drug reaction / nephrotoxicity

XT - vancomycin / adverse drug reaction / rash

XT - vancomycin / drug therapy / bacterial infection

XT - Vitis vinifera extract / drug therapy / bacterial infection

XT - Woodfordia floribunda extract / drug therapy / bacterial infection

JF - Antibiotics

JA - Antibiotics

LA - English

VL - 10

IS - 4

SP - 401

CY - Switzerland

PB - MDPI AG

SN - 2079-6382 (electronic)

SN - 2079-6382

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UR - https://www.mdpi.com/2079-6382/10/4/401/pdf

DO - https://dx.doi.org/10.3390/antibiotics10040401

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2006997041

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3390%2fantibiotics10040401Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pancu&issn=2079-6382&title=Antibiotics&atitle=Antibiotics%3A+Conventional+therapy+and+natural+compounds+with+antibacterial+activity-a+pharmaco-toxicological+screening&volume=10&issue=4&spage=401&epage=&date=2021&doi=10.3390%2Fantibiotics10040401&pmid=&sid=OVID:embase

162.

TY - JOUR

DB - Embase

AN - 2006048199

ID - 33092503 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33092503]

T1 - Indolic structure metabolites as potential biomarkers of non-infectious diseases

A1 - Beloborodova N.V.

A1 - Chernevskaya E.A.

A1 - Getsina M.L.

Y1 - 2021//

N2 - Interest in indolic structure metabolites, including a number of products of microbial biotransformation of the aromatic amino acid tryptophan, is increasingly growing. The review prepared by a team of authors is based on in-depthscrutiny of data available in PubMed, Scopus, Cyberleninka, Clinical Trials, and Cochrane Library, eventually narrowing the search to a set of keywords such as tryptophan metabolites; plasma me-tabolomics profiling; metabolomics fingerprinting; gas-, liquid chromatography mass spectrometry; serotonin; melatonin; tryptamine; indoxyl sulfate; indole-3-acetic acid; indole-3-propionic acid; 5-hydroxyindole-3-acetic acid; gut microbiota and microbial metabolites. It provides a summary that outlines the pattern of changes in the level of indolic structure metabolites in a number of diseases and deals with the data from the field of human microbiota metabolites. In modern experimental studies, including the use of gnotobiological (germ-free) ani-mals, it has been convincingly proved that the formation of tryptophan metabolites such as indole-3-acetic acid, indole-3-propionic acid, tryptamine, and indoxyl sulfate is associated with gut bacteria. Attention to some concentration changes of indolic compounds is due to the fact that pronounced deviations and a significant decrease of these metabolites in the blood were found in a number of serious cardiovascular, brain or gastrointestinal dis-eases. The literature-based analysis allowed the authors to conclude that a constant (normal) level of the main metabolites of the indolic structure in the human body is maintained by a few strict anaerobic bacteria from the gut of a healthy body belonging to the species of Clostridium, Bacteroides, Peptostreptococcus, Eubacteria, etc. The authors focus on several metabolites of the indolic structure that can be called clinically significant in certain diseases, such as schizophrenia, depression, atherosclerosis, colorectal cancer, etc. Determining the level of indole metabolites in the blood can be used to diagnose and monitor the effectiveness of a comprehensive treatment approach.Copyright © 2021 Bentham Science Publishers.

KW - article

KW - atherosclerosis

KW - Bacteroides

KW - biotransformation

KW - \*central nervous system disease

KW - \*chemical structure

KW - Clostridium

KW - colorectal cancer

KW - degenerative disease

KW - depression

KW - \*gastrointestinal disease

KW - human

KW - intestine flora

KW - \*kidney disease

KW - liquid chromatography-mass spectrometry

KW - malignant neoplasm

KW - metabolite

KW - metabolome

KW - metabolomics

KW - non communicable disease

KW - nonhuman

KW - Peptostreptococcus

KW - protein fingerprinting

KW - sepsis

KW - traumatic brain injury

KW - 5 hydroxyindoleacetic acid/ec [Endogenous Compound]

KW - \*biological marker/ec [Endogenous Compound]

KW - indican/ec [Endogenous Compound]

KW - \*indole/ec [Endogenous Compound]

KW - indoleacetic acid/ec [Endogenous Compound]

KW - indolepropionic acid/ec [Endogenous Compound]

KW - melatonin/ec [Endogenous Compound]

KW - serotonin/ec [Endogenous Compound]

KW - tryptamine/ec [Endogenous Compound]

KW - tryptophan/ec [Endogenous Compound]

KW - tryptophan derivative/ec [Endogenous Compound]

JF - Current Pharmaceutical Design

JA - Curr. Pharm. Des.

LA - English

VL - 27

IS - 2

SP - 238

EP - 249

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1381-6128

SN - 1873-4286

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UR - https://www.eurekaselect.com/node/187108

DO - https://dx.doi.org/10.2174/1381612826666201022121653

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2006048199

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.2174%2f1381612826666201022121653Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Beloborodova&issn=1381-6128&title=Current+Pharmaceutical+Design&atitle=Indolic+structure+metabolites+as+potential+biomarkers+of+non-infectious+diseases&volume=27&issue=2&spage=238&epage=249&date=2021&doi=10.2174%2F1381612826666201022121653&pmid=33092503&sid=OVID:embase

163.

TY - JOUR

DB - Embase

AN - 633756128

ID - 33346820 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33346820]

T1 - Optimizing Neonatal Nutrition in Resource-Constrained Settings

A1 - Ginsburg A.S.

A1 - Flaherman V.

Y1 - 2021//

KW - artificial milk

KW - birth weight

KW - body mass

KW - body weight gain

KW - body weight loss

KW - \*breast feeding

KW - breast milk

KW - child growth

KW - \*child nutrition

KW - clinical evaluation

KW - clinical trial (topic)

KW - cognitive development

KW - congenital disorder

KW - developmental disorder

KW - diabetes mellitus

KW - diarrhea

KW - diet supplementation

KW - energy consumption

KW - gastrointestinal infection

KW - gestational age

KW - high risk infant

KW - human

KW - Human immunodeficiency virus infection

KW - intestine flora

KW - intrauterine growth retardation

KW - long term care

KW - low birth weight

KW - malnutrition

KW - mental disease

KW - mortality rate

KW - necrotizing enterocolitis

KW - newborn

KW - newborn period

KW - note

KW - nutritional requirement

KW - outcome assessment

KW - parent counseling

KW - pneumonia

KW - premature labor

KW - prematurity

KW - priority journal

KW - retrolental fibroplasia

KW - risk factor

KW - sepsis

KW - short stature

KW - stunting

KW - wasting syndrome

JF - JAMA Pediatrics

JA - JAMA Pediatr.

LA - English

VL - 175

IS - 5

SP - 451

EP - 452

CY - United States

PB - American Medical Association

SN - 2168-6203

SN - 2168-6211

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UR - http://archpedi.jamanetwork.com/issues.aspx

DO - https://dx.doi.org/10.1001/jamapediatrics.2020.5241

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=633756128

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1001%2fjamapediatrics.2020.5241Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ginsburg&issn=2168-6203&title=JAMA+Pediatrics&atitle=Optimizing+Neonatal+Nutrition+in+Resource-Constrained+Settings&volume=175&issue=5&spage=451&epage=452&date=2021&doi=10.1001%2Fjamapediatrics.2020.5241&pmid=33346820&sid=OVID:embase

164.

TY - JOUR

DB - Embase

AN - 633320378

ID - 32818932 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32818932]

T1 - Large Projects Investigating the Microbiota-Gut-Brain Axis and Fecal Transplant Studies Are Needed for Treating Mental Illnesses

A1 - Waszkiewicz N.

Y1 - 2021//

KW - alcoholism

KW - autism

KW - bipolar disorder

KW - \*brain

KW - clinical trial (topic)

KW - Clostridium infection

KW - diet therapy

KW - disease course

KW - drug potentiation

KW - exercise

KW - \*fecal microbiota transplantation

KW - gastrointestinal tract

KW - human

KW - immunocompetent cell

KW - increased appetite

KW - \*intestine

KW - \*intestine flora

KW - intestine mucosa permeability

KW - irritable colon/th [Therapy]

KW - major depression

KW - malnutrition

KW - melanoma/dt [Drug Therapy]

KW - \*mental disease/th [Therapy]

KW - mental health

KW - metabolic disorder/pc [Prevention]

KW - neurologic disease

KW - newborn sepsis/dt [Drug Therapy]

KW - non insulin dependent diabetes mellitus

KW - note

KW - obesity

KW - personalized medicine

KW - pharmacological parameters

KW - psychiatric treatment

KW - publication

KW - randomized controlled trial (topic)

KW - recurrent infection

KW - schizophrenia

KW - therapy effect

KW - Trichuris suis

KW - vaginitis

KW - bacterial antigen/ec [Endogenous Compound]

KW - immune checkpoint inhibitor/dt [Drug Therapy]

KW - immunoglobulin/ec [Endogenous Compound]

KW - levodopa/dt [Drug Therapy]

KW - levodopa/pv [Special Situation for Pharmacovigilance]

KW - prebiotic agent

KW - probiotic agent

KW - tenofovir/dt [Drug Therapy]

KW - tenofovir/pv [Special Situation for Pharmacovigilance]

KW - virus antigen/ec [Endogenous Compound]

KW - \*gut brain axis

XT - melanoma / drug therapy / immune checkpoint inhibitor

XT - newborn sepsis / drug therapy / levodopa

XT - newborn sepsis / drug therapy / tenofovir

XT - immune checkpoint inhibitor / drug therapy / melanoma

XT - levodopa / drug therapy / newborn sepsis

XT - levodopa / special situation for pharmacovigilance / pediatric patient

XT - tenofovir / drug therapy / newborn sepsis

XT - tenofovir / special situation for pharmacovigilance / pediatric patient

JF - Neuropsychobiology

JA - Neuropsychobiology

LA - English

VL - 80

IS - 3

SP - 276

EP - 277

CY - Switzerland

PB - S. Karger AG

SN - 0302-282X

SN - 1423-0224

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UR - https://www.karger.com/journals/nps/nps\_jh.htm

DO - https://dx.doi.org/10.1159/000509573

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=633320378

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1159%2f000509573Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Waszkiewicz&issn=0302-282X&title=Neuropsychobiology&atitle=Large+Projects+Investigating+the+Microbiota-Gut-Brain+Axis+and+Fecal+Transplant+Studies+Are+Needed+for+Treating+Mental+Illnesses&volume=80&issue=3&spage=276&epage=277&date=2021&doi=10.1159%2F000509573&pmid=32818932&sid=OVID:embase

165.

TY - JOUR

DB - Embase

AN - 2011990039

T1 - Malnourished cirrhotic patient: What should we do?

A1 - Sciarrone S.S.

A1 - Zanetto A.

A1 - Russo F.P.

A1 - Germani G.

A1 - Gambato M.

A1 - Battistella S.

A1 - Pellone M.

A1 - Shalaby S.

A1 - Burra P.

A1 - Senzolo M.

Y1 - 2021//

N2 - Malnutrition and sarcopenia have a high prevalence in cirrhotic patients. Frailty generally overlaps with malnutrition and sarcopenia in cirrhosis, leading to increased morbidity and mortality. Rapid nutritional screening assessment should be performed in all patients with cirrhosis, and more specific tests for sarcopenia should be performed in those at high risk. The pathogenesis of malnutrition in cirrhosis is complex and multifactorial and it is not just due to reduction in protein and calorie intake. Nutritional management in malnourished patients with cirrhosis should be undertaken by a multidisciplinary team to achieve adequate protein/calorie intake. While the role of branched-chained amino acids remains somewhat contentious in achieving a global benefit of decreasing mortality- A nd liver-related events, these latter and vitamin supplements, are recommended for those with advanced liver disease. Novel strategies to reverse sarcopenia such as hormone supplementation, long-term ammonia-lowering agents and myostatin antagonists, are currently under investigation. Malnutrition, sarcopenia and frailty are unique, inter-related and multidimensional problems in cirrhosis which require special attention, prompt assessment and appropriate management as they significantly impact morbidity and mortality.Copyright © 2021 Minerva Biotechnology and Biomolecular Research. All rights reserved.

KW - abdominal pressure

KW - abdominal wall

KW - abdominal wall musculature

KW - aerobic exercise

KW - alcohol liver cirrhosis

KW - ammonia blood level

KW - anorexia

KW - area under the curve

KW - ascites

KW - blood vessel shunt

KW - body composition

KW - body mass

KW - body weight loss

KW - bone densitometry

KW - bone density

KW - caloric intake

KW - carbohydrate metabolism

KW - cardiovascular disease

KW - Child Pugh score

KW - computer assisted tomography

KW - constipation

KW - deterioration

KW - diarrhea

KW - dietary intake

KW - digestive system disease

KW - disease severity

KW - dual energy X ray absorptiometry

KW - dysgeusia

KW - end stage liver disease

KW - endurance training

KW - energy expenditure

KW - enteric feeding

KW - enteropathy

KW - exercise

KW - fluid retention

KW - food intake

KW - frailty

KW - gastrointestinal hemorrhage

KW - gastrointestinal pain

KW - gluconeogenesis

KW - hepatic encephalopathy

KW - hepatorenal syndrome

KW - histology

KW - hormone substitution

KW - human

KW - hyperammonemia

KW - hypermetabolism

KW - hypertension

KW - ileus

KW - intestine flora

KW - liver cell carcinoma

KW - \*liver cirrhosis

KW - liver disease

KW - liver transplantation

KW - lymph vessel

KW - malabsorption

KW - \*malnutrition

KW - mental health

KW - micellization

KW - morbidity

KW - mortality

KW - multidisciplinary team

KW - muscle atrophy

KW - muscle mass

KW - nausea

KW - nervous system

KW - nitrogen metabolism

KW - nutritional assessment

KW - obesity

KW - palatability

KW - pancreatic insufficiency

KW - paraspinal muscle

KW - pathogenesis

KW - physical activity

KW - physical performance

KW - portal vein thrombosis

KW - portosystemic anastomosis

KW - predictive value

KW - prevalence

KW - protein diet

KW - protein intake

KW - protein restriction

KW - psoas muscle

KW - quality of life

KW - receiver operating characteristic

KW - review

KW - sarcopenia

KW - satiety

KW - self report

KW - skeletal muscle

KW - stomach disease

KW - systematic review

KW - vomiting

KW - walking speed

KW - weakness

KW - zinc deficiency

KW - amino acid/ec [Endogenous Compound]

KW - ammonia/ec [Endogenous Compound]

KW - anorexigenic agent/ec [Endogenous Compound]

KW - appetite stimulant/ec [Endogenous Compound]

KW - branched chain amino acid/ec [Endogenous Compound]

KW - \*cytokine/ec [Endogenous Compound]

KW - glutamate ammonia ligase/ec [Endogenous Compound]

KW - glycerol/ec [Endogenous Compound]

KW - glycogen/ec [Endogenous Compound]

KW - lactic acid/ec [Endogenous Compound]

KW - lactulose/ec [Endogenous Compound]

KW - long chain fatty acid/ec [Endogenous Compound]

KW - methionine/ec [Endogenous Compound]

KW - myostatin/ec [Endogenous Compound]

KW - \*nutrition supplement/ec [Endogenous Compound]

KW - protein/ec [Endogenous Compound]

KW - pyruvic acid/ec [Endogenous Compound]

KW - sodium/ec [Endogenous Compound]

KW - bone densitometer

KW - computed tomography scanner

KW - protein detection kit

JF - Minerva Gastroenterology

JA - Minerva Gastroenterol.

LA - English

VL - 67

IS - 1

SP - 11

EP - 22

CY - Italy

PB - Edizioni Minerva Medica

SN - 2724-5985

SN - 2724-5365

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UR - https://www.minervamedica.it/en/journals/gastroenterology/archive.php?cod=R08

DO - https://dx.doi.org/10.23736/S2724-5985.20.02776-2

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2011990039

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.23736%2fS2724-5985.20.02776-2Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sciarrone&issn=2724-5985&title=Minerva+Gastroenterology&atitle=Malnourished+cirrhotic+patient%3A+What+should+we+do%3F&volume=67&issue=1&spage=11&epage=22&date=2021&doi=10.23736%2FS2724-5985.20.02776-2&pmid=&sid=OVID:embase

166.

TY - JOUR

DB - Embase

AN - 2010818509

T1 - Fecal Microbiota Transplantation: A New Therapeutic Attempt from the Gut to the Brain

A1 - Xu H.-M.

A1 - Huang H.-L.

A1 - Zhou Y.-L.

A1 - Zhao H.-L.

A1 - Xu J.

A1 - Shou D.-W.

A1 - Liu Y.-D.

A1 - Zhou Y.-J.

A1 - Nie Y.-Q.

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Y1 - 2021//

N2 - Gut dysbacteriosis is closely related to various intestinal and extraintestinal diseases. Fecal microbiota transplantation (FMT) is a biological therapy that entails transferring the gut microbiota from healthy individuals to patients in order to reconstruct the intestinal microflora in the latter. It has been proved to be an effective treatment for recurrent Clostridium difficile infection. Studies show that the gut microbiota plays an important role in the pathophysiology of neurological and psychiatric disorders through the microbiota-gut-brain axis. Therefore, reconstruction of the healthy gut microbiota is a promising new strategy for treating cerebral diseases. We have reviewed the latest research on the role of gut microbiota in different nervous system diseases as well as FMT in the context of its application in neurological, psychiatric, and other nervous system-related diseases (Parkinson's disease, Alzheimer's disease, multiple sclerosis, epilepsy, autism spectrum disorder, bipolar disorder, hepatic encephalopathy, neuropathic pain, etc.).Copyright © 2021 Hao-Ming Xu et al.

KW - Alzheimer disease/th [Therapy]

KW - amyotrophic lateral sclerosis/th [Therapy]

KW - anxiety

KW - autism/th [Therapy]

KW - bipolar disorder/th [Therapy]

KW - cerebrovascular accident/th [Therapy]

KW - chronic fatigue syndrome/th [Therapy]

KW - depression/th [Therapy]

KW - epilepsy/th [Therapy]

KW - \*fecal microbiota transplantation

KW - Gilles de la Tourette syndrome/th [Therapy]

KW - Guillain Barre syndrome/th [Therapy]

KW - hepatic encephalopathy/th [Therapy]

KW - human

KW - Huntington chorea/th [Therapy]

KW - intestine flora

KW - mental disease/th [Therapy]

KW - multiple sclerosis/th [Therapy]

KW - neurologic disease/th [Therapy]

KW - neuropathic pain/th [Therapy]

KW - nonhuman

KW - Parkinson disease/th [Therapy]

KW - phase 1 clinical trial (topic)

KW - phase 2 clinical trial (topic)

KW - phase 3 clinical trial (topic)

KW - randomized controlled trial (topic)

KW - review

KW - sepsis associated encephalopathy/th [Therapy]

JF - Gastroenterology Research and Practice

JA - Gastroenterol. Res. Pract.

LA - English

VL - 2021

SP - 6699268

CY - United States

PB - Hindawi Limited

SN - 1687-6121

SN - 1687-630X

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UR - http://www.hindawi.com/journals/grp/

DO - https://dx.doi.org/10.1155/2021/6699268

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010818509

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1155%2f2021%2f6699268Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Xu&issn=1687-6121&title=Gastroenterology+Research+and+Practice&atitle=Fecal+Microbiota+Transplantation%3A+A+New+Therapeutic+Attempt+from+the+Gut+to+the+Brain&volume=2021&issue=&spage=6699268&epage=&date=2021&doi=10.1155%2F2021%2F6699268&pmid=&sid=OVID:embase

167.

TY - JOUR

DB - Embase

AN - 2010453047

ID - 33432590 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33432590]

T1 - Periodontal diseases and depression: A pre-clinical in vivo study

A1 - Martinez M.

A1 - Martin-Hernandez D.

A1 - Virto L.

A1 - MacDowell K.S.

A1 - Montero E.

A1 - Gonzalez-Bris A.

A1 - Marin M.J.

A1 - Ambrosio N.

A1 - Herrera D.

A1 - Leza J.C.

A1 - Sanz M.

A1 - Garcia-Bueno B.

A1 - Figuero E.

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AO - Herrera, David; ORCID: https://orcid.org/0000-0002-5554-2777

AO - Figuero, Elena; ORCID: https://orcid.org/0000-0002-3129-1416

Y1 - 2021//

N2 - Aim: To analyse, through a pre-clinical in vivo model, the possible mechanisms linking depression and periodontitis at behavioural, microbiological and molecular levels. Material(s) and Method(s): Periodontitis (P) was induced in Wistar:Han rats (oral gavages with Porphyromonas gingivalis and Fusobacterium nucleatum) during 12 weeks, followed by a 3-week period of Chronic Mild Stress (CMS) induction. Four groups (n = 12 rats/group) were obtained: periodontitis and CMS (P+CMS+); periodontitis without CMS; CMS without periodontitis; and control. Periodontal clinical variables, alveolar bone levels (ABL), depressive-like behaviour, microbial counts and expression of inflammatory mediators in plasma and brain frontal cortex (FC), were measured. ANOVA tests were applied. Result(s): The highest values for ABL occurred in the P+CMS+ group, which also presented the highest expression of pro-inflammatory mediators (TNF-alpha, IL-1beta and NF-kB) in frontal cortex, related to the lipoprotein APOA1-mediated transport of bacterial lipopolysaccharide to the brain and the detection of F. nucleatum in the brain parenchyma. A dysregulation of the hypothalamic-pituitary-adrenal stress axis, reflected by the increase in plasma corticosterone and glucocorticoid receptor levels in FC, was also found in this group. Conclusion(s): Neuroinflammation induced by F. nucleatum (through a leaky mouth) might act as the linking mechanism between periodontal diseases and depression.Copyright © 2021 John Wiley & Sons A/S. Published by John Wiley & Sons Ltd

KW - animal experiment

KW - animal model

KW - animal tissue

KW - article

KW - bone level

KW - canine tooth

KW - cementoenamel junction

KW - \*chronic periodontitis

KW - controlled study

KW - corticosterone blood level

KW - decapitation

KW - \*depression

KW - drug potentiation

KW - enteric feeding

KW - enzyme linked immunosorbent assay

KW - forced swim test

KW - frontal cortex

KW - Fusobacterium nucleatum

KW - gingival index

KW - gingivitis

KW - hypothalamus hypophysis adrenal system

KW - immunohistochemistry

KW - intestine flora

KW - male

KW - mental disease

KW - nervous system inflammation

KW - nonhuman

KW - osteolysis

KW - parenchyma

KW - \*periodontal disease

KW - periodontitis

KW - physiological stress

KW - Porphyromonas gingivalis

KW - \*preclinical study

KW - protein blood level

KW - protein expression

KW - rat

KW - real time polymerase chain reaction

KW - sucrose preference test

KW - Western blotting

KW - Wistar Hannover rat

KW - apolipoprotein A1/ec [Endogenous Compound]

KW - bacterium lipopolysaccharide/ec [Endogenous Compound]

KW - corticosterone

KW - fructose/ec [Endogenous Compound]

KW - glucocorticoid receptor/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - inducible nitric oxide synthase

KW - interleukin 1beta/ec [Endogenous Compound]

KW - inulin

KW - ketamine

KW - lipopolysaccharide/ec [Endogenous Compound]

KW - myeloperoxidase/ec [Endogenous Compound]

KW - RNA 16S/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

JF - Journal of Clinical Periodontology

JA - J. Clin. Periodontol.

LA - English

VL - 48

IS - 4

SP - 503

EP - 527

CY - Denmark

PB - Blackwell Munksgaard

SN - 0303-6979

SN - 1600-051X

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1600-051X

DO - https://dx.doi.org/10.1111/jcpe.13420

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010453047

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1111%2fjcpe.13420Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Martinez&issn=0303-6979&title=Journal+of+Clinical+Periodontology&atitle=Periodontal+diseases+and+depression%3A+A+pre-clinical+in+vivo+study&volume=48&issue=4&spage=503&epage=527&date=2021&doi=10.1111%2Fjcpe.13420&pmid=33432590&sid=OVID:embase

168.

TY - JOUR

DB - Embase

AN - 634131375

T1 - Futuristic Non-antibiotic Therapies to Combat Antibiotic Resistance: A Review

A1 - Kumar M.

A1 - Sarma D.K.

A1 - Shubham S.

A1 - Kumawat M.

A1 - Verma V.

A1 - Nina P.B.

A1 - JP D.

A1 - Kumar S.

A1 - Singh B.

A1 - Tiwari R.R.

Y1 - 2021//

N2 - The looming problem of resistance to antibiotics in microorganisms is a global health concern. The drug-resistant microorganisms originating from anthropogenic sources and commercial livestock farming have posed serious environmental and health challenges. Antibiotic-resistant genes constituting the environmental "resistome" get transferred to human and veterinary pathogens. Hence, deciphering the origin, mechanism and extreme of transfer of these genetic factors into pathogens is extremely important to develop not only the therapeutic interventions to curtail the infections, but also the strategies to avert the menace of microbial drug-resistance. Clinicians, researchers and policymakers should jointly come up to develop the strategies to prevent superfluous exposure of pathogens to antibiotics in non-clinical settings. This article highlights the present scenario of increasing antimicrobial-resistance in pathogenic bacteria and the clinical importance of unconventional or non-antibiotic therapies to thwart the infectious pathogenic microorganisms.© Copyright © 2021 Kumar, Sarma, Shubham, Kumawat, Verma, Nina, Devraj, Kumar, Singh and Tiwari.

KW - Acinetobacter baumannii

KW - adult

KW - aged

KW - agricultural worker

KW - \*alternative medicine

KW - antibacterial activity

KW - antibiotic resistance

KW - \*antibiotic resistome

KW - bacterial genome

KW - bacterial infection

KW - bacterial load

KW - bacteriophage

KW - Bacteroides

KW - biofilm

KW - blood transfusion

KW - Clostridioides difficile

KW - Clostridium difficile infection

KW - colonoscopy

KW - constipation

KW - CRISPR Cas system

KW - dog

KW - drug delivery system

KW - Enterococcus faecalis

KW - enterotoxigenic Escherichia coli

KW - Escherichia coli

KW - fecal microbiota transplantation

KW - feces microflora

KW - food industry

KW - gene editing

KW - genetic engineering

KW - global health

KW - goat

KW - \*hand washing

KW - homeostasis

KW - human

KW - \*hygiene

KW - immune response

KW - immune system

KW - immunomodulation

KW - immunotherapy

KW - infectious agent

KW - intestine flora

KW - irritable colon

KW - Klebsiella pneumoniae

KW - lactic acid bacterium

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus rhamnosus

KW - livestock

KW - mastitis

KW - mental disease

KW - metagenomics

KW - methicillin resistant Staphylococcus aureus

KW - microbial community

KW - microbial diversity

KW - multidrug resistance

KW - Mycobacterium tuberculosis

KW - nanotechnology

KW - neutrophil count

KW - nonhuman

KW - personalized medicine

KW - phage therapy

KW - prevalence

KW - pseudomembranous colitis

KW - Pseudomonas aeruginosa

KW - \*quorum sensing

KW - review

KW - ruminant

KW - Saccharomyces cerevisiae

KW - Salmonella

KW - sepsis

KW - sequence homology

KW - Streptococcus pneumonia

KW - Streptococcus pyogenes

KW - ulcerative colitis

KW - very elderly

KW - veterinary medicine

KW - Weissella

KW - whole genome sequencing

KW - acaricide

KW - ampicillin

KW - \*antibiotic agent

KW - bacteriocin

KW - bilirubin

KW - bilirubin glucuronide

KW - ceftaroline

KW - ceftobiprole

KW - ciprofloxacin

KW - cotrimoxazole

KW - dalbavancin

KW - enrofloxacin

KW - extended spectrum beta lactamase

KW - hepcidin

KW - imipenem

KW - macrolide

KW - metal oxide

KW - oritavancin

KW - pegfilgrastim

KW - \*polypeptide antibiotic agent

KW - prebiotic agent

KW - \*probiotic agent

KW - quinolone derivative

KW - reactive oxygen metabolite

KW - recombinant vaccine

KW - tedizolid

KW - telavancin

KW - tetracycline

KW - vancomycin

JF - Frontiers in Microbiology

JA - Front. Microbiol.

LA - English

VL - 12

SP - 609459

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-302X (electronic)

SN - 1664-302X

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UR - https://www.frontiersin.org/journals/microbiology#

DO - https://dx.doi.org/10.3389/fmicb.2021.609459

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=634131375

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.3389%2ffmicb.2021.609459Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kumar&issn=1664-302X&title=Frontiers+in+Microbiology&atitle=Futuristic+Non-antibiotic+Therapies+to+Combat+Antibiotic+Resistance%3A+A+Review&volume=12&issue=&spage=609459&epage=&date=2021&doi=10.3389%2Ffmicb.2021.609459&pmid=&sid=OVID:embase

169.

TY - JOUR

DB - Embase

AN - 2010664035

T1 - COVID-19: An overview and a clinical update

A1 - Krishnan A.

A1 - Hamilton J.P.

A1 - Alqahtani S.A.

A1 - Woreta T.A.

AO - Krishnan, Arunkumar; ORCID: https://orcid.org/0000-0002-9452-7377

AO - Hamilton, James P; ORCID: https://orcid.org/0000-0003-3137-7567

AO - Woreta, Tinsay A; ORCID: https://orcid.org/0000-0001-7292-4518

AO - Alqahtani, Saleh A; ORCID: https://orcid.org/0000-0003-2017-3526

Y1 - 2021//

N2 - The outbreak of coronavirus disease-2019 (COVID-19, previously known as 2019 nCoV) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection in Wuhan City, China, has spread rapidly around the world. Most patients from the first cluster had an epidemiological connection to the Wuhan's Huanan Seafood Wholesale Market. Available evidence has shown that SARSCoV- 2 can be easily transmitted from person to person through close contact and respiratory droplets, posing a substantial challenge to public health. At present, the research on SARS-CoV-2 is still in the primary stages. However, dexamethasone and remdesivir are appeared to be promising medical therapies. Still, there is no definite specific treatment, and the mainstay of treatment is still focused on supportive therapies. Currently, over 150 vaccines are under investigation. It is necessary to understand the nature of the virus and its clinical characteristics in order to find effectively manage the disease. The knowledge about this virus is rapidly evolving, and clinicians must update themselves regularly. The present review comprehensively summarizes the epidemiology, pathogenesis, clinical characteristics, and management of COVID-19 based on the current evidence.Copyright © The Author(s) 2021. Published by Baishideng Publishing Group Inc. All rights reserved.

KW - abdominal pain

KW - acute kidney failure

KW - adaptive immunity

KW - alcohol abuse

KW - anastomosis leakage

KW - anosmia

KW - antiviral therapy

KW - arachnoid cyst

KW - article

KW - artificial ventilation

KW - Bacteroides

KW - cholangitis

KW - \*coronavirus disease 2019

KW - cytomegalovirus infection

KW - depression

KW - disease severity

KW - dyspnea

KW - eosinophilia

KW - fatigue

KW - fecal microbiota transplantation

KW - Firmicutes

KW - headache

KW - heart failure

KW - hemoptysis

KW - Hepatitis C virus

KW - hospitalization

KW - hydronephrosis

KW - hypoglycemia

KW - infection control

KW - intensive care unit

KW - intestine flora

KW - knee meniscus rupture

KW - liver injury

KW - lymphocytopenia

KW - microflora

KW - nausea

KW - needle biopsy

KW - nonalcoholic fatty liver

KW - nutrition

KW - oxygen saturation

KW - palliative therapy

KW - pancreas islet cell tumor

KW - phase 2 clinical trial (topic)

KW - polymerase chain reaction

KW - Proteobacteria

KW - pubis symphysis

KW - randomized controlled trial (topic)

KW - Severe acute respiratory syndrome coronavirus 2

KW - shoulder pain

KW - smoking

KW - sore throat

KW - thyroid cancer

KW - virus pneumonia

KW - vomiting

KW - betamethasone

KW - convalescent plasma

KW - corticosteroid

KW - probiotic agent

KW - remdesivir

KW - vaccine

JF - World Journal of Clinical Cases

JA - World J. Clin. Cases

LA - English

VL - 9

IS - 1

SP - 8

EP - 23

CY - China

PB - Baishideng Publishing Group Co

SN - 2307-8960 (electronic)

SN - 2307-8960

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UR - https://www.wjgnet.com/2307-8960/about.htm

DO - https://dx.doi.org/10.12998/wjcc.v9.i1.08

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010664035

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.12998%2fwjcc.v9.i1.08Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Krishnan&issn=2307-8960&title=World+Journal+of+Clinical+Cases&atitle=COVID-19%3A+An+overview+and+a+clinical+update&volume=9&issue=1&spage=8&epage=23&date=2021&doi=10.12998%2Fwjcc.v9.i1.08&pmid=&sid=OVID:embase

170.

TY - JOUR

DB - Embase

AN - 2010284863

T1 - The role of faecal microbiota transplantation: looking beyond Clostridioides difficile infection

A1 - D. Goldenberg S.

A1 - Merrick B.

AO - D. Goldenberg, Simon; ORCID: https://orcid.org/0000-0002-6061-6064

AO - Merrick, Blair; ORCID: https://orcid.org/0000-0003-0837-7382

Y1 - 2021//

N2 - Faecal microbiota transplantation (FMT) is the transfer of screened and minimally processed faecal material from a 'healthy' donor to 'diseased' recipient. It has an established role, and is recommended as a therapeutic strategy, in the management of recurrent Clostridioides difficile infection (CDI). Recognition that gut dysbiosis is associated with, and may contribute to, numerous disease states has led to interest in exploiting FMT to 'correct' this microbial imbalance. Conditions for which it is proposed to be beneficial include inflammatory bowel disease, irritable bowel syndrome, liver disease and hepatic encephalopathy, neuropsychiatric conditions such as depression and anxiety, systemic inflammatory states like sepsis, and even coronavirus disease 2019. To understand what role, if any, FMT may play in the management of these conditions, it is important to consider the potential risks and benefits of the therapy. Regardless, there are several barriers to its more widespread adoption, which include incompletely understood mechanism of action (especially outside of CDI), inability to standardise treatment, disagreement on its active ingredients and how it should be regulated, and lack of long-term outcome and safety data. Whilst the transfer of faecal material from one individual to another to treat ailments or improve health has a history dating back thousands of years, there are fewer than 10 randomised controlled trials supporting its use. Moving forward, it will be imperative to gather as much data from FMT donors and recipients over as long a timeframe as possible, and for trials to be conducted with rigorous methodology, including appropriate control groups, in order to best understand the utility of FMT for indications beyond CDI. This review discusses the history of FMT, its appreciable mechanisms of action with reference to CDI, indications for FMT with an emerging evidence base above and beyond CDI, and future perspectives on the field.Copyright © The Author(s), 2021.

KW - acute diarrhea

KW - acute myeloid leukemia

KW - adult respiratory distress syndrome

KW - Alzheimer disease

KW - antimicrobial activity

KW - \*bacterial infection

KW - biliary cirrhosis

KW - CD4+ T lymphocyte

KW - chronic fatigue syndrome

KW - \*Clostridioides difficile

KW - colitis

KW - colonoscopy

KW - colorectal cancer

KW - depression

KW - dysbiosis

KW - Escherichia coli

KW - \*fecal microbiota transplantation

KW - Firmicutes

KW - Guillain Barre syndrome

KW - hepatic encephalopathy/pc [Prevention]

KW - hepatitis B

KW - human

KW - immunomodulation

KW - inflammatory bowel disease

KW - intestine flora

KW - intestine pseudoobstruction

KW - irritable colon

KW - liver cirrhosis

KW - liver failure

KW - microbial colonization

KW - multiple sclerosis

KW - nonalcoholic fatty liver

KW - nonhuman

KW - Parkinson disease

KW - portal hypertension

KW - primary sclerosing cholangitis

KW - randomized controlled trial (topic)

KW - regulatory T lymphocyte

KW - review

KW - Ruminococcaceae

KW - Severe acute respiratory syndrome coronavirus 2

KW - Th17 cell

KW - alkaline phosphatase/ec [Endogenous Compound]

KW - alpha synuclein/ec [Endogenous Compound]

KW - bile acid/ec [Endogenous Compound]

KW - immune checkpoint inhibitor/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 18/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - polypeptide antibiotic agent

KW - polysaccharide/ec [Endogenous Compound]

KW - short chain fatty acid/ec [Endogenous Compound]

JF - Therapeutic Advances in Infectious Disease

JA - Ther. Adv. Infect. Dis.

LA - English

VL - 8

SP -

CY - United Kingdom

PB - SAGE Publications Ltd

SN - 2049-9361

SN - 2049-937X

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UR - http://tai.sagepub.com/

DO - https://dx.doi.org/10.1177/2049936120981526

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010284863

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1177%2f2049936120981526Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=+Goldenberg&issn=2049-9361&title=Therapeutic+Advances+in+Infectious+Disease&atitle=The+role+of+faecal+microbiota+transplantation%3A+looking+beyond+Clostridioides+difficile+infection&volume=8&issue=&spage=&epage=&date=2021&doi=10.1177%2F2049936120981526&pmid=&sid=OVID:embase

171.

TY - JOUR

DB - Embase

AN - 2010141539

ID - 33419429 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33419429]

T1 - Impact of selected environmental factors on microbiome of the digestive tract of ruminants

A1 - Cholewinska P.

A1 - Gorniak W.

A1 - Wojnarowski K.

Y1 - 2021//

N2 - Ruminants are an important part of world animal production. The main factors affecting their production rates are age, diet, physiological condition and welfare. Disorders related to low level of welfare can significantly affect the microbiological composition of the digestive system, which is essential to maintain high production rates. The microbiology of the ruminant gastrointestinal tract may be significantly affected by inappropriate keeping system (especially in juveniles), psychological stress (e.g. transport), or heat stress. This results in an increased risk of metabolic diseases, reduced fertility and systemic diseases. Therefore, the paper focuses on selected disorders i.e., aforementioned inappropriate maintenance system, psychological stress, heat stress and their effects on the microbiome of the digestive system.Copyright © 2021, The Author(s).

KW - abomasum

KW - adaptive immunity

KW - anxiety

KW - bacterial translocation

KW - Bacteroides

KW - Bacteroidetes

KW - Bifidobacterium longum subsp. infantis

KW - breathing rate

KW - colostrum

KW - dairy cattle

KW - \*digestive system

KW - dysbiosis

KW - \*environmental factor

KW - Eubacterium

KW - fatigue

KW - feeding

KW - fermentation

KW - fertility

KW - Firmicutes

KW - food intake

KW - greenhouse effect

KW - immune response

KW - Lactobacillus fermentum

KW - lipid metabolism

KW - mental stress

KW - Methanobrevibacter

KW - methanogenesis

KW - Methanosarcina

KW - microbial community

KW - \*microbiome

KW - microflora

KW - milk production

KW - nonhuman

KW - Prevotella

KW - Proteobacteria

KW - quality of life

KW - review

KW - \*ruminant

KW - Ruminococcus

KW - sepsis

KW - solar radiation

KW - ammonia

KW - dopamine

KW - ghrelin

KW - glucose

KW - lactoferrin

KW - leptin

KW - levodopa

KW - mimosine

KW - neurotransmitter

KW - serotonin

KW - short chain fatty acid

KW - thyroxine

KW - tyramine

KW - volatile fatty acid

JF - BMC Veterinary Research

JA - BMC Vet. Res.

LA - English

VL - 17

IS - 1

SP - 25

CY - United Kingdom

PB - BioMed Central Ltd

SN - 1746-6148 (electronic)

SN - 1746-6148

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UR - http://www.biomedcentral.com/bmcvetres/

DO - https://dx.doi.org/10.1186/s12917-021-02742-y

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2010141539

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1186%2fs12917-021-02742-yLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cholewinska&issn=1746-6148&title=BMC+Veterinary+Research&atitle=Impact+of+selected+environmental+factors+on+microbiome+of+the+digestive+tract+of+ruminants&volume=17&issue=1&spage=25&epage=&date=2021&doi=10.1186%2Fs12917-021-02742-y&pmid=33419429&sid=OVID:embase

172.

TY - JOUR

DB - Embase

AN - 2007702968

ID - 33382003 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33382003]

T1 - Tailoring treatment for PCOS phenotypes

A1 - Papadakis G.

A1 - Kandaraki E.A.

A1 - Garidou A.

A1 - Koutsaki M.

A1 - Papalou O.

A1 - Diamanti-Kandarakis E.

A1 - Peppa M.

Y1 - 2021//

N2 - Introduction: Polycystic ovary syndrome (PCOS) is one of the most common endocrinopathies in reproductive-aged women. Hyperandrogenism, polycystic ovaries, chronic anovulation, and metabolic aberrations are its common features. The treatment approach focuses on the main aberrations, which characterize the different phenotypes. Areas covered: Management strategies targeting the metabolic phenotype include lifestyle modifications for weight loss and improvement of dietary habits, as well as medication, such as insulin-sensitizers. The treatment of hyperandrogenic phenotype includes cosmetic procedures and the combined oral contraceptives with or without antiandrogens. The therapeutic approach to reproductive phenotype includes diet and lifestyle modifications, clomiphene citrate, and aromatase inhibitors. Alternative treatments include dietary supplements, herbs, resveratrol, myo-inositol, and acupuncture. Expert opinion: New studies have shown that higher anti-Mullerian hormone levels, gut microbiome composition, and plasma metabolomics are new parameters that are related to the most severe phenotypes. The clinical phenotypes can change over the lifespan with weight gain and can coexist in the same individual. Individualized treatment remains the main approach but grouping the phenotypes and following therapeutic recommendations may prove to be also clinically appropriate.Copyright © 2020 Informa UK Limited, trading as Taylor & Francis Group.

KW - acupuncture

KW - aerobic exercise

KW - alternative medicine

KW - anovulation

KW - anxiety disorder/dt [Drug Therapy]

KW - body weight loss

KW - comorbidity

KW - continuous positive airway pressure

KW - depression/dt [Drug Therapy]

KW - diet supplementation

KW - dietary supplement

KW - dyslipidemia/dt [Drug Therapy]

KW - dyslipidemia/th [Therapy]

KW - eating habit

KW - female infertility/dt [Drug Therapy]

KW - herb

KW - human

KW - hyperandrogenism/dt [Drug Therapy]

KW - insulin resistance/dt [Drug Therapy]

KW - lifestyle modification

KW - menstrual irregularity/dt [Drug Therapy]

KW - \*metabolic phenotype

KW - nonalcoholic steatohepatitis/dt [Drug Therapy]

KW - nonalcoholic steatohepatitis/th [Therapy]

KW - nonhuman

KW - obesity/dt [Drug Therapy]

KW - obesity/th [Therapy]

KW - obesity management

KW - \*ovary polycystic disease/dt [Drug Therapy]

KW - \*ovary polycystic disease/th [Therapy]

KW - pregnancy

KW - priority journal

KW - review

KW - sexual dysfunction/th [Therapy]

KW - sleep disordered breathing/th [Therapy]

KW - antiandrogen/cb [Drug Combination]

KW - antiandrogen/dt [Drug Therapy]

KW - antidepressant agent/dt [Drug Therapy]

KW - antiobesity agent/dt [Drug Therapy]

KW - anxiolytic agent/dt [Drug Therapy]

KW - aromatase inhibitor/dt [Drug Therapy]

KW - clomifene citrate/dt [Drug Therapy]

KW - hydroxymethylglutaryl coenzyme A reductase inhibitor/dt [Drug Therapy]

KW - inositol/dt [Drug Therapy]

KW - insulin sensitizing agent/dt [Drug Therapy]

KW - metformin/dt [Drug Therapy]

KW - oral contraceptive agent/cb [Drug Combination]

KW - oral contraceptive agent/dt [Drug Therapy]

KW - oral contraceptive agent/po [Oral Drug Administration]

KW - resveratrol/dt [Drug Therapy]

XT - anxiety disorder / drug therapy / anxiolytic agent

XT - depression / drug therapy / antidepressant agent

XT - dyslipidemia / drug therapy / hydroxymethylglutaryl coenzyme A reductase inhibitor

XT - female infertility / drug therapy / antiandrogen

XT - female infertility / drug therapy / aromatase inhibitor

XT - female infertility / drug therapy / clomifene citrate

XT - hyperandrogenism / drug therapy / antiandrogen

XT - hyperandrogenism / drug therapy / oral contraceptive agent

XT - insulin resistance / drug therapy / inositol

XT - insulin resistance / drug therapy / insulin sensitizing agent

XT - insulin resistance / drug therapy / resveratrol

XT - menstrual irregularity / drug therapy / oral contraceptive agent

XT - nonalcoholic steatohepatitis / drug therapy / metformin

XT - obesity / drug therapy / antiobesity agent

XT - ovary polycystic disease / drug therapy / metformin

XT - antiandrogen / drug combination / oral contraceptive agent

XT - antiandrogen / drug therapy / female infertility

XT - antiandrogen / drug therapy / hyperandrogenism

XT - antidepressant agent / drug therapy / depression

XT - antiobesity agent / drug therapy / obesity

XT - anxiolytic agent / drug therapy / anxiety disorder

XT - aromatase inhibitor / drug therapy / female infertility

XT - clomifene citrate / drug therapy / female infertility

XT - hydroxymethylglutaryl coenzyme A reductase inhibitor / drug therapy / dyslipidemia

XT - inositol / drug therapy / insulin resistance

XT - insulin sensitizing agent / drug therapy / insulin resistance

XT - metformin / drug therapy / nonalcoholic steatohepatitis

XT - metformin / drug therapy / ovary polycystic disease

XT - oral contraceptive agent / drug combination / antiandrogen

XT - oral contraceptive agent / drug therapy / hyperandrogenism

XT - oral contraceptive agent / drug therapy / menstrual irregularity

XT - resveratrol / drug therapy / insulin resistance

JF - Expert Review of Endocrinology and Metabolism

JA - Expert Rev. Endocrinol. Metab.

LA - English

VL - 16

IS - 1

SP - 9

EP - 18

CY - United Kingdom

PB - Taylor and Francis Ltd.

SN - 1744-6651

SN - 1744-8417

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UR - http://www.tandfonline.com/loi/iere20#.V6Qca01f1Fo

DO - https://dx.doi.org/10.1080/17446651.2021.1865152

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2007702968

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1080%2f17446651.2021.1865152Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Papadakis&issn=1744-6651&title=Expert+Review+of+Endocrinology+and+Metabolism&atitle=Tailoring+treatment+for+PCOS+phenotypes&volume=16&issue=1&spage=9&epage=18&date=2021&doi=10.1080%2F17446651.2021.1865152&pmid=33382003&sid=OVID:embase

173.

TY - JOUR

DB - Embase

AN - 2005678387

T1 - Effect of dietary and lifestyle transitions on functional immune system

A1 - Mohamed S.

A1 - Upendra R.S.

A1 - Bijalwan S.

A1 - Bopte V.B.

A1 - Giri A.K.

Y1 - 2021//

N2 - Globally, the population is experiences increasing food consumption shifts, various diet patterns and also alterations in the entire food choices as well as the lifestyle pattern. The increasing pressure of under-nutrition and deficiency diseases in emerging countries has demonstrated the negative consequences of a dietary transformation on the functionality of immune system. Both under-nutrition and over-nutrition are likely to coexist for a long time in the vast majority of nonindustrial nations, creating a two-fold pressure of hunger and illness. The increasing figures of obesity, degenerative and non-communicable disease, emerging and re-emerging infectious diseases highlights the changes occurring in dietary patterns and altered lifestyle. The functioning of the immune system is dependent on proper nutrition and hence requires a regular intake of all the essential vitamins and minerals. The alteration in the diet as well as the lifestyle of the population are not able to provide these necessary minerals leading to a reduction in immunity levels hence prone to more diseases. This review paper gives an insight on current global trends in eating patterns and lifestyle transitions among the population due to urbanization with a focus on the outcomes on the functionality of the immune system and health.Copyright © 2021, Advanced Scientific Research. All rights reserved.

KW - adaptive immunity

KW - adrenergic system

KW - antibody production

KW - antibody response

KW - article

KW - asthma

KW - autoimmune disease

KW - Bacteroides

KW - Bifidobacterium

KW - CD8+ T lymphocyte

KW - cellular immunity

KW - chronic stress

KW - cigarette smoking

KW - Clostridium

KW - Clostridium perfringens

KW - colorectal cancer

KW - depression

KW - \*diet

KW - dietary fiber

KW - dietary intake

KW - eczema

KW - enteropathy

KW - environmental factor

KW - Escherichia

KW - exercise

KW - Firmicutes

KW - food intake

KW - healthy diet

KW - hepatitis B

KW - human

KW - humoral immunity

KW - hypothalamus hypophysis adrenal system

KW - immune response

KW - \*immune system

KW - inflammatory bowel disease

KW - Influenza virus

KW - innate immunity

KW - intestine flora

KW - Lactobacillus

KW - leukocyte activation

KW - \*lifestyle modification

KW - macrophage activation

KW - malnutrition

KW - microbial community

KW - microbial diversity

KW - microflora

KW - natural killer cell

KW - obesity

KW - overnutrition

KW - phenotype

KW - phylogeny

KW - pneumonia

KW - regulatory T lymphocyte

KW - Ruminococcus

KW - sleep deprivation

KW - smoking

KW - Streptococcus

KW - T lymphocyte receptor gene

KW - virus infection

KW - Western diet

KW - catecholamine/ec [Endogenous Compound]

KW - CD28 antigen/ec [Endogenous Compound]

KW - corticosteroid/ec [Endogenous Compound]

KW - corticotropin releasing factor/ec [Endogenous Compound]

KW - edible oil

KW - leptin/ec [Endogenous Compound]

KW - mineral

KW - secretory immunoglobulin/ec [Endogenous Compound]

KW - short chain fatty acid/ec [Endogenous Compound]

KW - sweetening agent

KW - vegetable oil

KW - vitamin

JF - International Journal of Pharmaceutical Research

JA - Int. J. Pharm. Res.

LA - English

VL - 13

IS - 1

SP - 1978

EP - 1988

CY - India

PB - Advanced Scientific Research

SN - 0975-2366 (electronic)

SN - 0975-2366

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UR - http://www.ijpronline.com/DownloadFile.aspx?FilePath=f6addb20-3206-4434-b46a-8cab0223222c.pdf

DO - https://dx.doi.org/10.31838/ijpr/2021.13.01.308

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2005678387

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.31838%2fijpr%2f2021.13.01.308Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mohamed&issn=0975-2366&title=International+Journal+of+Pharmaceutical+Research&atitle=Effect+of+dietary+and+lifestyle+transitions+on+functional+immune+system&volume=13&issue=1&spage=1978&epage=1988&date=2021&doi=10.31838%2Fijpr%2F2021.13.01.308&pmid=&sid=OVID:embase

174.

TY - JOUR

DB - Embase

AN - 2008431316

ID - 33190766 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33190766]

T1 - The Effect of Aging Physiology on Critical Care

A1 - Darden D.B.

A1 - Moore F.A.

A1 - Brakenridge S.C.

A1 - Navarro E.B.

A1 - Anton S.D.

A1 - Leeuwenburgh C.

A1 - Moldawer L.L.

A1 - Mohr A.M.

A1 - Efron P.A.

A1 - Mankowski R.T.

Y1 - 2021//

N2 - Older patients experience a decline in their physiologic reserves as well as chronic low-grade inflammation named "inflammaging." Both of these contribute significantly to aging-related factors that alter the acute, subacute, and chronic response of these patients to critical illness, such as sepsis. Unfortunately, this altered response to stressors can lead to chronic critical illness followed by dismal outcomes and death. The primary goal of this review is to briefly highlight age-specific changes in physiologic systems majorly affected in critical illness, especially because it pertains to sepsis and trauma, which can lead to chronic critical illness and describe implications in clinical management.Copyright © 2020 Elsevier Inc.

KW - acute kidney failure

KW - \*aging

KW - antibiotic therapy

KW - artificial ventilation

KW - cardiovascular disease

KW - chronic inflammation

KW - contrast induced nephropathy/si [Side Effect]

KW - critical illness

KW - delirium

KW - dementia

KW - dysbiosis

KW - falling

KW - fecal microbiota transplantation

KW - frailty

KW - geriatric patient

KW - hospital mortality

KW - human

KW - immunosenescence

KW - \*intensive care

KW - intestine flora

KW - lung complication/co [Complication]

KW - muscle atrophy

KW - nephrotoxicity/si [Side Effect]

KW - pneumonia/pc [Prevention]

KW - priority journal

KW - review

KW - sarcopenia

KW - sepsis

KW - traffic accident

KW - weakness/si [Side Effect]

KW - aminoglycoside antibiotic agent/ae [Adverse Drug Reaction]

KW - amphotericin B/ae [Adverse Drug Reaction]

KW - contrast medium/ae [Adverse Drug Reaction]

KW - muscle relaxant agent/ae [Adverse Drug Reaction]

KW - nonsteroid antiinflammatory agent/ae [Adverse Drug Reaction]

KW - prebiotic agent

KW - probiotic agent

KW - steroid/ae [Adverse Drug Reaction]

KW - vancomycin/ae [Adverse Drug Reaction]

XT - contrast induced nephropathy / side effect / contrast medium

XT - nephrotoxicity / side effect / aminoglycoside antibiotic agent

XT - nephrotoxicity / side effect / amphotericin B

XT - nephrotoxicity / side effect / nonsteroid antiinflammatory agent

XT - nephrotoxicity / side effect / vancomycin

XT - weakness / side effect / muscle relaxant agent

XT - weakness / side effect / steroid

XT - aminoglycoside antibiotic agent / adverse drug reaction / nephrotoxicity

XT - amphotericin B / adverse drug reaction / nephrotoxicity

XT - contrast medium / adverse drug reaction / contrast induced nephropathy

XT - muscle relaxant agent / adverse drug reaction / weakness

XT - nonsteroid antiinflammatory agent / adverse drug reaction / nephrotoxicity

XT - steroid / adverse drug reaction / weakness

XT - vancomycin / adverse drug reaction / nephrotoxicity

JF - Critical Care Clinics

JA - Crit. Care Clin.

LA - English

VL - 37

IS - 1

SP - 135

EP - 150

CY - United States

PB - W.B. Saunders

SN - 0749-0704

SN - 1557-8232

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UR - http://www.elsevier.com/inca/publications/store/6/2/3/1/3/2/index.htt

DO - https://dx.doi.org/10.1016/j.ccc.2020.08.006

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2008431316

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1016%2fj.ccc.2020.08.006Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Darden&issn=0749-0704&title=Critical+Care+Clinics&atitle=The+Effect+of+Aging+Physiology+on+Critical+Care&volume=37&issue=1&spage=135&epage=150&date=2021&doi=10.1016%2Fj.ccc.2020.08.006&pmid=33190766&sid=OVID:embase

175.

TY - JOUR

DB - Embase

AN - 2004171455

ID - 31996078 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31996078]

T1 - Ketogenic Diet for the Treatment and Prevention of Dementia: A Review

A1 - Davis J.J.

A1 - Fournakis N.

A1 - Ellison J.

AO - Davis, Joshua J.; ORCID: https://orcid.org/0000-0002-6096-2856

Y1 - 2021//

N2 - Dementia (major neurocognitive disorder) is an increasingly common syndrome with a significant burden on patients, caregivers, the health-care system, and the society. The prevalence of dementia will certainly continue to grow as the US population ages. Current treatments for dementia, though, are limited. One proposed nonpharmacologic approach for the delay or prevention of dementia is the use of a ketogenic diet. The ketogenic diet was originally employed to treat refractory epilepsy and has shown promise in many neurologic diseases. It has also gained recent popularity for its weight loss effects. Several preclinical studies have confirmed a benefit of ketosis on cognition and systemic inflammation. Given the renewed emphasis on neuroinflammation as a pathogenic contributor to cognitive decline, and the decreased systemic inflammation observed with the ketogenic diet, it is plausible that this diet may delay, ameliorate, or prevent progression of cognitive decline. Several small human studies have shown benefit on cognition in dementia with a ketogenic diet intervention. Future, large controlled studies are needed to confirm this benefit; however, the ketogenic diet has shown promise in regard to delay or mitigation of symptoms of cognitive decline.Copyright © The Author(s) 2020.

KW - adult

KW - Alzheimer disease

KW - amyotrophic lateral sclerosis

KW - body weight loss

KW - caregiver

KW - cognition

KW - cognitive defect

KW - constipation

KW - controlled study

KW - degenerative disease

KW - dehydration

KW - \*dementia/pc [Prevention]

KW - \*dementia/th [Therapy]

KW - depression

KW - detoxification

KW - diabetic ketoacidosis

KW - diarrhea

KW - drug resistant epilepsy

KW - fatigue

KW - health care system

KW - human

KW - hunger

KW - hypoglycemia

KW - insulin sensitivity

KW - ketoacidosis

KW - \*ketogenic diet

KW - malnutrition

KW - \*memory

KW - memory disorder

KW - microbiome

KW - multiple sclerosis

KW - nausea

KW - nervous system inflammation

KW - neurotransmission

KW - pneumonia

KW - preclinical study

KW - prevalence

KW - priority journal

KW - review

KW - review

KW - vomiting

KW - 3 hydroxybutyric acid

KW - 4 aminobutyric acid

KW - acetoacetic acid

KW - acetone

KW - apolipoprotein E

KW - cryopyrin

KW - hemoglobin

KW - triacylglycerol

JF - Journal of Geriatric Psychiatry and Neurology

JA - J. Geriatr. Psychiatry Neurol.

LA - English

VL - 34

IS - 1

SP - 3

EP - 10

CY - United States

PB - SAGE Publications Inc.

SN - 0891-9887

SN - 1552-5708

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UR - http://www.sagepub.com

DO - https://dx.doi.org/10.1177/0891988720901785

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2004171455

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1177%2f0891988720901785Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Davis&issn=0891-9887&title=Journal+of+Geriatric+Psychiatry+and+Neurology&atitle=Ketogenic+Diet+for+the+Treatment+and+Prevention+of+Dementia%3A+A+Review&volume=34&issue=1&spage=3&epage=10&date=2021&doi=10.1177%2F0891988720901785&pmid=31996078&sid=OVID:embase

176.

TY - JOUR

DB - Embase

AN - 637515773

T1 - Anxiolytic effect of kefir supplementation on female rats

T3 - 56th Annual Congress of the SBFIS. Online.

A1 - Banckes T.

A1 - Rebonato A.

A1 - Buczak I.

A1 - Dos Santos A.P.

A1 - Ferro M.

Y1 - 2021//

N2 - Anxiety is characterized by feelings of tension, fear and worry, along with autonomic distress that can be persistent and decrease quality of life. Both disease severity and medication efficacy can suffer interference of life habits and nutrition. Probiotics are a wide group of microorganisms that cause benefits to a person when ingested in an adequate way. The probiotic of Kefir is a fermented dairy drink produced by the action of Kefir grain microflora, which have been reported to have anti-inflammatory and antidepressive actions, among others. Our objective was to test if milk Kefir (K) can produce an anxiolytic effect in female adult rats. Three-month old female Wistar rats ~250g were fed regular chow with addition of 3 ml of K by daily gavage for three weeks (n=7), while the control group (n=7) received 3 ml pasteurized milk (M), also by gavage. All rats were then submitted to the elevated plus maze and to the open field tests. Results were compared by the Student's T test and expressed as media +/- standard deviation. K supplementation caused a 93.9% +/- 38.80 increase in time spent (p= 0.056), and a significant increase (90.9% +/- 29.62; in entrance frequency in the open arms of the plus maze. There were no differences in the plus maze closed arms entrances (M: 7.1 +/- 2.0; K: 10.0 +/- 1.4) or in open field exploration (M: 98.9 +/- 25.4; K: 117.3 +/- 26.5 lines crossed - M: 23.1 +/- 8.2; K: 30.2 +/- 9.6 rearings). This result indicates an anxiolytic effect of kefir on female rats, which was not related to a locomotor alteration. This effect can be caused by a positive serotonergic modulation and/or an inhibition of the hypothalamus-pituitary-adrenal axis, both possibly linked to a gut bacteria selection. While tests are necessary to clarify the mechanism of action, it is possible that K ingestion might be effective as an alternate anxiolytic treatment or as an adjuvant combined with other drugs.

KW - adult

KW - animal experiment

KW - conference abstract

KW - enteric feeding

KW - female

KW - grain

KW - hypothalamus hypophysis adrenal system

KW - ingestion

KW - intestine flora

KW - milk

KW - nonhuman

KW - open field test

KW - pasteurized milk

KW - rat

KW - rearing

KW - Wistar rat

KW - adjuvant

KW - \*anxiolytic agent

KW - \*kefir

KW - probiotic agent

JF - Biomedical and Biopharmaceutical Research

JA - Biomed. Biopharm. Res.

LA - English

VL - 18

IS - 2

SP - 82

CY - Netherlands

PB - ALIES

SN - 2182-2379

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UR - http://www.alies.pt/BBR%20Editions/Vol-18-2-2021/bbr.18.2.265\_SBFIS2021.pdf

DO - https://dx.doi.org/10.19277/bbr.18.2.265

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=637515773

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.19277%2fbbr.18.2.265Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Banckes&issn=2182-2379&title=Biomedical+and+Biopharmaceutical+Research&atitle=Anxiolytic+effect+of+kefir+supplementation+on+female+rats&volume=18&issue=2&spage=82&epage=&date=2021&doi=10.19277%2Fbbr.18.2.265&pmid=&sid=OVID:embase

177.

TY - JOUR

DB - Embase

AN - 2016915013

T1 - The gut microbiome significantly contributes to the development of chemotherapy-associated, brain-mediated side effects

T3 - 2021 27th Annual PNIRS Meeting. Virtual, Online.

A1 - Grant C.V.

A1 - Loman B.R.

A1 - Bailey M.T.

A1 - Pyter L.M.

Y1 - 2021//

N2 - Chemotherapy (chemo) treatment can cause brain-mediated (fatigue and anxiety) and gut (diarrhea, constipation, and microbial dysbiosis) side effects. In non-oncological patients, facets of mental health correlate with gut microbiome alterations. The role of the gut-to-brain axis in development of chemo-associated side effects remains poorly understood. The hypothesis that chemo dramatically alters the gut microbiome to drive side effect development was tested via cohabitation and presumed coprophagia between chemo- and vehicle-treated mice, antibiotic knockdown of gut microbes, and intra-gastric gavage of germ-free mice with gut content from chemo-treated mice. Cohabitation promoted recovery in chemo-treated mice. Antibiotic treatment did not prevent chemo-associated side effects, however relative genera correlates to circulating inflammatory and behavioral outcomes were identified. Gut content from chemo-treated mice increased anxiety-like behavior and inflammatory mediators in germ-free mice. These data provide the most direct evidence to date that gut microbes contribute to the development of chemo-associated, brain-mediated side effects and suggest patients may benefit from the usage of microbe-based side effect treatments.Copyright © 2021

KW - adult

KW - animal experiment

KW - antibiotic therapy

KW - anxiety

KW - \*brain

KW - \*chemotherapy

KW - cohabitation

KW - conference abstract

KW - controlled study

KW - coprophagy

KW - drug toxicity

KW - enteric feeding

KW - \*gastrointestinal tract

KW - germfree mouse

KW - human

KW - male

KW - \*microbiome

KW - microorganism

KW - mouse

KW - nonhuman

KW - prevention

KW - antibiotic agent

JF - Brain, Behavior, and Immunity

JA - Brain Behav. Immun.

LA - English

VL - 98

IS - Supplement

SP - 19

CY - Netherlands

PB - Academic Press Inc.

SN - 0889-1591

SN - 1090-2139

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DO - https://dx.doi.org/10.1016/j.bbi.2021.08.078

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2016915013

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1016%2fj.bbi.2021.08.078Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Grant&issn=0889-1591&title=Brain%2C+Behavior%2C+and+Immunity&atitle=The+gut+microbiome+significantly+contributes+to+the+development+of+chemotherapy-associated%2C+brain-mediated+side+effects&volume=98&issue=Supplement&spage=19&epage=&date=2021&doi=10.1016%2Fj.bbi.2021.08.078&pmid=&sid=OVID:embase

178.

TY - JOUR

DB - Embase

AN - 637054612

T1 - Tracking Gut Permeability and Microbial Therapeutics in the Pig: PET/MRI of Ingested 89Zr-labeled Probiotic Escherichia coli Nissle 1917

T3 - World Molecular Imaging Congress, WMIC 2021. Virtual.

A1 - Goldhawk D.

Y1 - 2021//

N2 - Introduction: An understanding of the importance of the gut microbiome in many diseases has been rapidly increasing, with connections to many autoimmune diseases (e.g. rheumatoid arthritis, type 1 diabetes); metabolic syndromes (e.g. type 2 diabetes, coronary artery disease); and neuropsychiatric disorders (e.g. depression, psychosis). However, attempts to modulate the microbiome in order to impact these diseases have been hampered by difficulties in assessing the success of microbial delivery, colonization, persistence and clearance using current clinical and research tools. To address these challenges, we are developing the methods needed for in vivo imaging of microbial therapies. Hypothesis: Transplantation of the probiotic Escherichia coli Nissle 1917 labeled with 89Zr (half-life, 3.3 days) will demonstrate the utility of longitudinally tracking microbial cells in the mammalian gut and beyond, using positron emission tomography/magnetic resonance imaging (PET/MRI). The pig provides an ideal large animal model of bacterial transplantation, displaying gastrointestinal anatomy and physiology relevant to humans and permitting imaging on clinical scanners for expedient translation to medical practice. The following research aims to provide needed information about imaging logistics and animal/patient monitoring, required for future clinical studies. Material(s) and Method(s): The cell surface of cultured probiotic E. coli was labeled with 89Zr chelated to p-isothiocyanato-benzyldesferrioxamine (DBN) by adapting a published procedure [1]. Colony forming units (CFUs) were determined at sequential time points to assess viability of 89Zr-DBN labeled bacteria [2]. Stability of the radiotracer was evaluated in co-culture [3]. Radiolabeled bacteria were encapsulated in gelatin pills and introduced to the stomach of an approximately 25 kg pig using a feeding tube. Hybrid PET/MR (Siemens Biograph mMR) was performed at 4 bed positions for whole body coverage between 0-6 hours post-ingestion (day 0) and again on days 4 and 7. Both T1-weighted in-phase Dixon and T2-weighted HASTE sequences were collected at 3 Tesla, simultaneously with PET, and fused for segmentation and to generate maximum intensity projections (MIP). Biodistribution of 89Zr was determined by segmenting coronal images at each time point. Result(s): Live bacteria were radiolabeled with 75% efficiency (0.001 Bq/CFU) and displayed viability comparable to unlabeled cells throughout the time course. Encapsulated 89Zr-DBN labeled Nissle 1917 was appropriately delivered to the stomach (Figure 1). Most of the ingested bacteria (99%) exited the GI tract of a healthy recipient via feces, theoretically leaving only the actively growing bacterial strains to persist in the gut. At day 4 post-ingestion, 89Zr was evident in the intestinal compartment; however, by day 7 the signal was diffuse and near background. Little if any radiolabel appeared in urine and blood while uptake in the liver, kidneys, joints and lungs was recorded. Discussion(s): Pilot data demonstrates the feasibility of our methods and shows for the first time that E. coli (probiotic strain) can be monitored in vivo over days. Ingestion of 89Zr-DBN labeled bacteria has potential for monitoring gut persistence and permeability of microorganisms, with little non-specific background even at early time points. Further improvement to PET/MR image contrast may be obtained with additional sequences and by reducing bowel activity.

KW - adult

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - bacterial strain

KW - bacterium culture

KW - cell surface

KW - cell viability

KW - chelation

KW - coculture

KW - colony forming unit

KW - conference abstract

KW - controlled study

KW - \*depression

KW - \*Escherichia coli

KW - feasibility study

KW - feces

KW - feeding tube

KW - female

KW - \*gastrointestinal tract

KW - half life time

KW - ingestion

KW - kidney tubule absorption

KW - liver

KW - lung

KW - male

KW - medical practice

KW - microorganism

KW - nonhuman

KW - \*nuclear magnetic resonance imaging

KW - patient monitoring

KW - PET-CT scanner

KW - \*pig

KW - pill

KW - positron emission tomography

KW - stomach

KW - transplantation

KW - gelatin

KW - \*probiotic agent

KW - tracer

KW - \*zirconium 89

JF - Molecular Imaging and Biology

JA - Mol. Imaging Biol.

LA - English

VL - 23

IS - SUPPL 2

SP - 1925

EP - 1926

CY - Netherlands

PB - Springer New York LLC

SN - 1860-2002

AD - D. Goldhawk, Lawson Health Research Institute. E-mail: dgoldhawk@lawsonimaging.ca

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DO - https://dx.doi.org/10.1007/s11307-021-01694-x

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=637054612

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1007%2fs11307-021-01694-xLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Goldhawk&issn=1860-2002&title=Molecular+Imaging+and+Biology&atitle=Tracking+Gut+Permeability+and+Microbial+Therapeutics+in+the+Pig%3A+PET%2FMRI+of+Ingested+89Zr-labeled+Probiotic+Escherichia+coli+Nissle+1917&volume=23&issue=SUPPL+2&spage=1925&epage=1926&date=2021&doi=10.1007%2Fs11307-021-01694-x&pmid=&sid=OVID:embase

179.

TY - JOUR

DB - Embase

AN - 2011987926

T1 - BERBERINE AMELIORATES OVARIECTOMY-INDUCED ANXIETY-LIKE BEHAVIORS BY ENRICHMENT IN EQUOL GENERATING GUT MICROBIOTA

T3 - DDW 2021. Virtual, Online.

A1 - Fang Y.

A1 - Zhang J.

A1 - Zhu S.

A1 - He M.

A1 - Ma S.

A1 - Jia Q.

A1 - Sun Q.

A1 - Song L.

A1 - Wang Y.

A1 - Duan L.

Y1 - 2021//

N2 - Background: Decline in circulating ovarian hormone levels is associated with increment in anxiety and alteration in intestinal microbiota. As a kind of gut microbiota modulator, berberine (BBR) has shown efficacy in treating diseases such as menopausal osteoporosis and type 2 diabetes through regulating bacteria. However, the effects of BBR on ovariectomyinduced anxiety are still unclear and whether or not gut microbiota modifies the possible effect of BBR remain to be fully elucidated. Aim(s): To demonstrate that BBR is able to alleviate anxiety through modulating intestinal microbiota under estrogen-deficient conditions. Method(s): Female specific pathogen-free (SPF) SD rats were ovariectomized (OVX) or shamoperated (sham). BBR (100mg/kg) or control vehicle was administered via oral gavage every day for four weeks. Open field test (OFT) and elevated plus maze test (EPM) were used to detect the anxiety-like behaviors. Moreover, the 16S rRNA sequencing and liquid chromatography/ mass spectrometry (LC/MS) analysis were utilized to validate the changes in intestinal microbes and microbiota isoflavone metabolites, respectively. The concentration of serum estradiol (E2) was measured using ELISA. Further, female germ-free (GF) SD rats were operated and treated with BBR or vehicle under sterile conditions. Fecal microbiota transplantation (FMT) was conducted using fecal samples from SPF rats to colonize GF-OVX rats. Result(s): Compared with SPF-sham rats, OFT and EPM showed increased anxiety in SPFOVX rats, and BBR treatment significantly ameliorated anxiety-like behaviors compared with SPF-OVX rats. The serum level of isoflavone metabolite equol and the ratio of equol to daidzein were decreased by ovariectomy and elevated by BBR treatment. Furthermore, BBR treatment altered the microbiota diversity and taxa richness of the gut microbiome. The alpha diversity revealed a significant reduction in richness and diversity after BBR administration compared with SPF-OVX group. The beta diversity showed dissimilarity in composition among each group. At the genus level, BBR-treated rats harbored a higher abundance of beneficial gut microbes, such as Bacteroides, Bifidobacterium, Lactobacillus, and Akkermansia, among which many species are involved in isoflavone bioconversion (Fig.1). Notably, estrogen deficiency in GF rats also resulted in anxiety-like behaviors, however gavage feeding of BBR to GF-OVX rats had no significant effects on behavior improvement and equol metabolism. FMT of SPF-BBR rats to GF-OVX rats improved anxiety-like behaviors and increased the serum concentration of isoflavone metabolite equol (Fig.2). Conclusion(s): Gut microbiota is critical in BBR treatment of ovariectomy-aggravated anxiety, indicating a promising therapeutic strategy for postmenopausal anxiety. (Figure Presented) (Figure Presented)Copyright © 2021 AGA Institute

KW - adult

KW - Akkermansia

KW - animal experiment

KW - animal model

KW - animal tissue

KW - \*anxiety

KW - Bacteroides

KW - Bifidobacterium

KW - biotransformation

KW - conference abstract

KW - controlled study

KW - drug therapy

KW - elevated plus maze test

KW - enteric feeding

KW - enzyme linked immunosorbent assay

KW - estradiol blood level

KW - estrogen deficiency

KW - \*fecal microbiota transplantation

KW - female

KW - germfree rat

KW - human

KW - intestine flora

KW - Lactobacillus

KW - liquid chromatography-mass spectrometry

KW - nonhuman

KW - open field test

KW - oral drug administration

KW - \*ovariectomy

KW - rat

KW - Sprague Dawley rat

KW - \*berberine

KW - daidzein

KW - endogenous compound

KW - \*equol

KW - estrogen

KW - isoflavone

KW - RNA 16S

KW - unclassified drug

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 160

IS - 6 Supplement

SP - S

EP - 63

CY - Netherlands

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

DO - https://dx.doi.org/10.1016/S0016-5085%2821%2900893-3

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=2011987926

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1016%2fS0016-5085%252821%252900893-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fang&issn=0016-5085&title=Gastroenterology&atitle=BERBERINE+AMELIORATES+OVARIECTOMY-INDUCED+ANXIETY-LIKE+BEHAVIORS+BY+ENRICHMENT+IN+EQUOL+GENERATING+GUT+MICROBIOTA&volume=160&issue=6+Supplement&spage=S&epage=63&date=2021&doi=10.1016%2FS0016-5085%252821%252900893-3&pmid=&sid=OVID:embase

180.

TY - JOUR

DB - Embase

AN - 636474947

T1 - The veil of ignorance: A rare complication of colonoscopy

T3 - Annual Scientific Meeting of the American College of Gastroenterology, ACG 2021. Las Vegas, NV United States.

A1 - Mirza Z.

A1 - Roman-Colon D.

A1 - Martinez-Souss J.

Y1 - 2021//

N2 - Introduction: General malaise, gait disturbances poor oral intake and anemia in an aging patient are symptoms that require a high rate of clinical suspicion to arrive at the correct diagnosis. This is further complicated in patients with history of recent endoscopic intervention when an accurate history is not taken. Millions of colonoscopies are done yearly with transient, self-limiting bacteremia affecting 4.4% of procedures reason why current guidelines do not recommend antibiotic prophylaxis. This is the case of a patient who developed Veillonella parvula bacteremia after a colonoscopy. To our knowledge there is only one reported case of said bacteremia after endoscopy and colonoscopy in the literature. Case description/methods: An 88-year-old man with history of hypertension, diabetes mellitus type 2 that came to ER due to two-week onset of generalized weakness, anorexia and gait imbalance. Review of systems was otherwise negative and he was oriented in all spheres. Labs showed microcytic anemia, thrombocytopenia and acute kidney injury. During hospitalization his mental status rapidly deteriorated and workup including brain imaging, toxicology, heavy metal poisoning, TSH, syphilis were negative. A bone marrow biopsy revealed a hypocellular bone marrow. Patient developed worsening leukocytosis, severe metabolic acidosis, acute liver failure and hypotension requiring ICU care, broad-spectrum antibiotics, vasopressors and renal replacement therapy. Blood cultures later were positive for Veillonella parvula. Upon further questioning, patient had recent colonoscopy with multiple biopsies of two small tubular adenomas and a 1 cm serrated adenoma which was likely portal of entry. Multi organ failure ensued and the patient passed away. Discussion(s): Veillonella parvula is strictly anaerobic organism that forms part of the intestinal flora. Sparse reports exist of discitis, osteomyelitis and endocarditis. Risk factors for infection include periodontal disease, immunodeficiency and IV drug use. Our patient had none of the above risk factors. Given his recent colonoscopy with biopsy and subsequent symptomatology, biopsy could be considered as the portal of entry. Identification of this organism is problematic as it is a strict anaerobe and susceptibility testing was not available to tailor treatment. This case highlights the importance of being aware of rare complications of colonoscopies and obtaining a complete history of recent interventions to ascertain possible etiologies of a patient's current symptoms.

KW - acute kidney failure

KW - acute liver failure

KW - adenoma

KW - aged

KW - anaerobe

KW - anorexia

KW - asthenia

KW - bacteremia

KW - blood culture

KW - bone marrow biopsy

KW - brain

KW - cancer size

KW - case report

KW - clinical article

KW - \*colonoscopy

KW - complication

KW - conference abstract

KW - diskitis

KW - endocarditis

KW - gait

KW - heavy metal poisoning

KW - hospitalization

KW - human

KW - hypertension

KW - hypotension

KW - immune deficiency

KW - intestine flora

KW - leukocytosis

KW - male

KW - mental health

KW - metabolic acidosis

KW - microcytic anemia

KW - multiple organ failure

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - osteomyelitis

KW - periodontal disease

KW - renal replacement therapy

KW - risk factor

KW - syphilis

KW - thrombocytopenia

KW - toxicology

KW - Veillonella parvula

KW - very elderly

KW - antibiotic agent

KW - endogenous compound

KW - thyrotropin

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 116

IS - SUPPL

SP - S857

CY - Netherlands

PB - Wolters Kluwer Health

SN - 1572-0241

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DO - https://dx.doi.org/10.14309/01.ajg.0000781368.14450.f9

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=636474947

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.14309%2f01.ajg.0000781368.14450.f9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mirza&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=The+veil+of+ignorance%3A+A+rare+complication+of+colonoscopy&volume=116&issue=SUPPL&spage=S857&epage=&date=2021&doi=10.14309%2F01.ajg.0000781368.14450.f9&pmid=&sid=OVID:embase

181.

TY - JOUR

DB - Embase

AN - 636415798

T1 - Impact of prenatal stress on visceral hypersensitivity and gut microbiota in adulthood

T3 - NeuroGASTRO 2021 Congress. Virtual.

A1 - Petitfils C.

A1 - Payros G.

A1 - Maurel S.

A1 - Hueber A.

A1 - Dietrich G.

A1 - Motta J.

A1 - Serino M.

A1 - Le Faouder P.

A1 - Cenac N.

Y1 - 2021//

N2 - Irritable bowel syndrome (IBS) is the most common intestinal disorder and is characterized by visceral pain and altered gut transit. The pathophysiology of IBS, which differs between patients, is mainly defined by an increased visceral sensitivity and gut microbiota dysbiosis. This syndrome leads to a reduced quality of life and is linked to anxiety and depression, making it a pathology of the microbiota-gut- brain axis. Prenatal stress (PS) has been identified as major risk factor for the onset of IBS symptoms and their severity. However, the causal link between prenatal stress and IBS has to be established. We hypothesized that PS induces a gut microbiota dysbiosis, and a change in bacterial metabolites, predisposing the adult offspring to visceral hypersensitivity and intestinal homeostasis disruption. In mice, PS was induced by restriction stress with bright light for 30 minutes, three times a day between day 13 and 18 of gestation. In the adult offspring of both sexes, we evaluated visceral sensitivity to colorectal distention, paracellular permeability by 4kDa FITC-dextran gavages followed by fluorescence measurements in the plasma 4h later, mRNA expression of inflammatory genes in the colon by qRT-PCR and intestinal bioactive lipid concentration by mass spectrometry. The gut microbiota was assessed by MiSeq-based microbial for taxonomic analyses and by 16S RNA FISH staining to visualise its organization. Bacterial lipopeptides production was identified and quantified by mass spectrometry. PS significantly increased visceral sensitivity to colorectal distensions. Paracellular permeability, gene expression and bioactive lipids concentration in the colon remained unaltered in PS offspring. The gut microbiota organization was modified with a bacterial infiltration in the sterile mucus layer and its composition altered in PS mice. The abundance of Lactobacillus animalis was decreased in PS mice and inversely correlated with visceral hypersensitivity. This bacterium produces two lipopeptides, C14asnGABAOH and C16PheGABAOH. Intracolonic administration of C14AsnGABAOH decreased PS-induced visceral hypersensitivity in mice. Prenatal stress is sufficient to induce microbiota dysbiosis and visceral hypersensitivity in adulthood. This could represent a priming event for the development of functional disorders such as IBS. Bacterial lipopeptides containing GABA could represent a new therapeutic strategy to alleviate visceral hypersensitivity in IBS patients.

KW - adult

KW - \*adulthood

KW - animal experiment

KW - animal model

KW - animal tissue

KW - conference abstract

KW - controlled study

KW - drug therapy

KW - enteric feeding

KW - female

KW - fluorescence

KW - functional disease

KW - gene expression

KW - genetic analyzer

KW - homeostasis

KW - human

KW - \*hypersensitivity

KW - \*intestine flora

KW - intracolonic drug administration

KW - irritable colon

KW - Lactobacillus

KW - male

KW - mass spectrometry

KW - mouse

KW - mucus

KW - nonhuman

KW - polymerase chain reaction

KW - pregnancy

KW - \*prenatal stress

KW - progeny

KW - risk factor

KW - taxonomy

KW - 4 aminobutyric acid

KW - endogenous compound

KW - fluorescein isothiocyanate dextran

KW - lipopeptide

KW - messenger RNA

KW - RNA 16S

JF - Neurogastroenterology and Motility

JA - Neurogastroenterol. Motil.

LA - English

VL - 33

IS - SUPPL 2

SP -

CY - Netherlands

PB - Blackwell Publishing Ltd

SN - 1365-2982

AD - C. Petitfils, INSERM UMR1220, Digestive Health Research Institute, Toulouse, France

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M1 - (Hueber, Le Faouder) INSERM UMR1048, Institute of Cardiovascular and Metabolic Diseases, Toulouse, France

DO - https://dx.doi.org/10.1111/nmo.14244

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=636415798

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1111%2fnmo.14244Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Petitfils&issn=1365-2982&title=Neurogastroenterology+and+Motility&atitle=Impact+of+prenatal+stress+on+visceral+hypersensitivity+and+gut+microbiota+in+adulthood&volume=33&issue=SUPPL+2&spage=&epage=&date=2021&doi=10.1111%2Fnmo.14244&pmid=&sid=OVID:embase

182.

TY - JOUR

DB - Embase

AN - 636332186

T1 - Impact of prenatal stress on visceral hypersensitivity and gut microbiota in adulthood

T3 - 29th United European Gastroenterology Week. Virtual.

A1 - Petitfils C.

A1 - Payros G.

A1 - Maurel S.

A1 - Hueber A.

A1 - Dietrich G.

A1 - Motta J.-P.

A1 - Serino M.

A1 - Le Faouder P.

A1 - Cenac N.

Y1 - 2021//

N2 - Introduction: Irritable bowel syndrome (IBS) is the most common functional intestinal disorder and is characterized by visceral pain and altered gut transit. The pathophysiology of IBS, which differs between patients, is mainly defined by an increased visceral sensitivity and gut microbiota dysbiosis. This syndrome leads to a deeply reduced quality of life and is highly linked to the occurrence of anxiety and depression, making it a pathology of the microbiota-gut-brain axis. Recently, stress and prenatal stress have been identified as major risk factors for the onset of IBS symptoms as well as their severity. However, the causal link between prenatal stress, visceral hypersensitivity and gut microbiota dysbiosis has yet to be established. We hypothesized that prenatal stress would induce a gut microbiota dysbiosis, associated with a change in bacterial metabolites, predisposing the adult offspring to visceral hypersensitivity and intestinal homeostasis disruption. Aims & Methods: In mice, prenatal stress (PS) was induced by restriction stress with bright light for 30 minutes, three times a day between day 13 and 18 of gestation. In male and female offspring, at 8 weeks of age, we evaluated visceral sensitivity to colorectal distention, paracellular permeability by 4kDa FITC-dextran gavages followed by fluorescence measurements in the plasma 4h later, mRNA expression of Cxcl2, Tgfb, Ccl5, Reg3g, Muc2, Occln, Ttf3, Mmp7, Tjp1, Penk and Ifng in the colon by qRT-PCR and intestinal bioactive lipid concentration by mass spectrometry. The gut microbiota was assessed by MiSeq-based microbial taxonomic analysis to determine the faecal microbiota composition and by 16S RNA FISH staining to visualise its organization. Bacterial lipopeptides production was identified and quantified by mass spectrometry. Result(s): In the offspring of both sexes, PS significantly increased visceral sensitivity to colorectal distensions. Paracellular permeability, gene expression and intestinal bioactive lipid concentration in the colon remained unaltered by PS. In PS mice of both sexes, gut microbiota organization was modified with a bacterial infiltration in the sterile mucus layer in PS mice. In addition, the abundance of Akkermansia genera was increased in PS mice and of Lactobacillus animalis decreased. Interestingly, the abundance of L. animalis was inversely correlated with visceral hypersensitivity. We identified that L. animalis produces two lipopeptides, C14asnGABAOH and C16PheGABAOH. Intracolonic administration of C14AsnGABAOH decreased PS-induced visceral hypersensitivity in mice. Conclusion(s): Prenatal stress is sufficient to induce microbiota dysbiosis and visceral hypersensitivity in adulthood. This could represent a priming event for the development of functional disorders such as IBS. Bacterial lipopeptides containing GABA could represent a new therapeutic strategy to alleviate visceral hypersensitivity in IBS patients.

KW - adult

KW - \*adulthood

KW - Akkermansia

KW - animal experiment

KW - animal model

KW - animal tissue

KW - conference abstract

KW - controlled study

KW - drug therapy

KW - enteric feeding

KW - feces microflora

KW - female

KW - fluorescence

KW - functional disease

KW - gene expression

KW - genetic analyzer

KW - homeostasis

KW - human

KW - \*hypersensitivity

KW - \*intestine flora

KW - intracolonic drug administration

KW - irritable colon

KW - Lactobacillus

KW - male

KW - mass spectrometry

KW - mouse

KW - mucus

KW - nonhuman

KW - polymerase chain reaction

KW - pregnancy

KW - \*prenatal stress

KW - progeny

KW - protein expression

KW - risk factor

KW - taxonomy

KW - 4 aminobutyric acid

KW - CXCL2 chemokine

KW - endogenous compound

KW - fluorescein isothiocyanate dextran

KW - gamma interferon

KW - lipopeptide

KW - matrilysin

KW - messenger RNA

KW - mucin 2

KW - RNA 16S

KW - transforming growth factor beta

JF - United European Gastroenterology Journal

JA - United Eur. Gastroenterol. J.

LA - English

VL - 9

IS - SUPPL 8

SP - 626

CY - Netherlands

PB - SAGE Publications Ltd

SN - 2050-6414

AD - C. Petitfils, INSERM, UMR 122O Digestive Health Research Institute, Toulouse, France. E-mail: camille.petitfils@inserm.fr

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DO - https://dx.doi.org/10.1002/ueg2.12144

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=636332186

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1002%2fueg2.12144Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Petitfils&issn=2050-6414&title=United+European+Gastroenterology+Journal&atitle=Impact+of+prenatal+stress+on+visceral+hypersensitivity+and+gut+microbiota+in+adulthood&volume=9&issue=SUPPL+8&spage=626&epage=&date=2021&doi=10.1002%2Fueg2.12144&pmid=&sid=OVID:embase

183.

TY - JOUR

DB - Embase

AN - 636288127

T1 - What Is Your Gut Feeling about Probiotics in the Critically Ill? An ICU Stakeholder Survey

T3 - European Society of Intensive Care Medicine Annual Congress, ESICM 2021. Virtual.

A1 - Zec S.

A1 - Bakken J.

A1 - Bauer B.

A1 - Ahmad S.

A1 - Freeman W.

A1 - Khanna S.

A1 - Shah A.

A1 - Philbrick K.

A1 - Karnatovskaia L.

Y1 - 2021//

N2 - Introduction. Fermented foods, unlike supplements, facilitate digestion, provide nutrition, limit pathogen growth, and contain a wide diversity of microorganisms and signaling molecules that regulate metabolism. Their use in the critical care setting has been limited. Kefir, a fermented dairy product, has demonstrated anti-cancer, antimicrobial, immunomodulatory, anti-inflammatory, and psychobiotic effects in animal models and is one of the most common probiotic foods worldwide. It may also be relatively easy to administer in the intensive care setting, whether to prevent diarrheal illness or evaluate its role in minimizing delirium. Objectives. To gauge stakeholder knowledge base and obtain feedback on the use of probiotics, particularly kefir, in the critically ill. Methods. An anonymous web-based survey was administered to a multidisciplinary, interprofessional group of critical care providers at the Mayo Clinic campuses in Minnesota and Florida. Results. 214 participants completed the survey (20% response rate): 97 (45%) bedside nurses, 97 (45%) physicians, and 20 (9%) critical care nurse practitioners/physician assistants. For the knowledgebased items, of the organ systems that could be affected by gut dysbiosis, the most endorsed systems were immune (79%), hepatic (65%), renal (58%), and neural (57%). Only 42% knew that over 70% of the human immune system is contained within the gastrointestinal tract. Over 90% of respondents considered that antimicrobials, physiologic stress, and proton-pump inhibitors have a role in alteration of the gut microbiome, with 62% agreeing that microbial diversity can be reduced within hours of critical illness onset. Regarding the role of probiotics, most (75%) believed in its ability to prevent and treat diarrhea, followed by use in inflammatory or autoimmune conditions (58%), urinary/vaginal infections (54%), and as prophylaxis to viral infections (43%). A quarter of responders expressed not knowing of the role of probiotics. Interestingly, 30% endorsed that probiotics may improve mental wellbeing. 72% of respondents had heard of kefir and thought it to have more live active probiotic cultures compared to yogurt (58%); a third were unsure. About half of responders did not know of the most effective way to deliver probiotics to the critically ill or whether kefir is safe in patients with lactose intolerance. Regarding overall feedback, perceived barriers to kefir administration included compromised gut integrity (53%), immunosuppression (32%), and poor prognosis (34%); 33 participants saw no barriers. An overwhelming majority (93%) welcomed conducting kefir research in critically ill populations. Conclusion. Most providers are aware of the negative influence of gut dysbiosis in critically ill patients and recognize the need for additional research on finding an optimal probiotic source for this patient population.

KW - adult

KW - animal experiment

KW - animal model

KW - cancer model

KW - cancer patient

KW - cancer prognosis

KW - conference abstract

KW - critical illness

KW - \*critically ill patient

KW - delirium

KW - diarrhea

KW - female

KW - Florida

KW - gastrointestinal tract

KW - gauge

KW - human

KW - immune system

KW - immunosuppressive treatment

KW - intensive care

KW - kidney

KW - knowledge base

KW - lactose intolerance

KW - liver

KW - microbial diversity

KW - microbiome

KW - Minnesota

KW - nonhuman

KW - nurse practitioner

KW - physician assistant

KW - physiological stress

KW - prevention

KW - prognosis

KW - prophylaxis

KW - psychological well-being

KW - urinary tract infection

KW - vaginitis

KW - virus infection

KW - antiinfective agent

KW - kefir

KW - \*probiotic agent

KW - proton pump inhibitor

KW - yoghurt

JF - Intensive Care Medicine Experimental

JA - Intensive Care Med. Exp.

LA - English

VL - 9

IS - SUPPL 1

SP -

CY - Netherlands

PB - Springer

SN - 2197-425X

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DO - https://dx.doi.org/10.1186/s40635-021-00415-6

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=636288127

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1186%2fs40635-021-00415-6Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zec&issn=2197-425X&title=Intensive+Care+Medicine+Experimental&atitle=What+Is+Your+Gut+Feeling+about+Probiotics+in+the+Critically+Ill%3F+An+ICU+Stakeholder+Survey&volume=9&issue=SUPPL+1&spage=&epage=&date=2021&doi=10.1186%2Fs40635-021-00415-6&pmid=&sid=OVID:embase

184.

TY - JOUR

DB - Embase

AN - 635467542

T1 - Task force on BPD-future directions

T3 - 20th International Congress of Pediatric Pulmonology. Virtual.

A1 - Pijnenburg M.W.

Y1 - 2021//

N2 - Introduction Bronchopulmonary dysplasia (BPD) is the most common severe complication of extreme preterm birth, affecting 10,000 to 15,000 children per year in the US. The incidence is higher with decreasing gestational age and varies between > 80% in children born before 24 weeks gestation to 8-38% in children born after 27 weeks. (1) The pathogenesis of BPD is multifactorial and comprises prenatal risk factors such as infections, pre-eclampsia and genetic susceptibility, and postnatal risk factors such as mechanical ventilation, oxygen toxicity and postnatal infections. These risk factors lead to a pulmonary inflammatory response with distorted alveolarization and impaired vasculogenesis. (2) Children with BPD may experience lifelong respiratory and non-respiratory consequences. Respiratory symptoms and hospital admissions are more frequent than in preterm born children without BPD, in particular during the first years of life. Also, lung function in children with BPD is in general lower than normal. In a systematic review it was shown that the mean difference in FEV1 for children with BPD when compared with children born term was -16% (95% CI -20, -12); this lower lung function tracks during adulthood as was shown in a meta-analysis in late adolescence and early adulthood where FEV1 Z-Score was -0.81 for children born very preterm or with a low birthweight compared to a control group of term born controls with normal birth weight. (3,4) More than 85% of patients with BPD have structural abnormalities as shown on Chest CT scans. (5) Except for respiratory sequelae, patients with BPD are also at increased risk of cardiovascular complications such as increased risk of elevated pulmonary vascular resistance, pulmonary hypertension and right ventricular failure. (6) Also, neurodevelopmental consequences (e.g. motor impairment, cognitive delay, lower academic performance) are more common in children with BPD. (7) Although several randomized controlled trials addressed the question how to prevent the development of BPD, only very few studies examined how children with established BPD should be managed. This was the reason to start an ERS guideline on longterm management of children with established BPD after the neonatal intensive care period. ERS guideline on long-term management of BPD The ERS guideline addressed the 8 most clinically relevant and important PICO questions in children with established BPD and who were discharged from hospital, or who were >= 36 weeks postmenstrual age (PMA). (8) After stepwise literature searches and study selection by working groups, evidence synthesis and grading according to GRADE, recommendations were based on the balance of consequences, certainty of evidence and values. Three questions addressed monitoring of children with BPD: monitoring with lung imaging, with lung function and the question if children with BPD should be discouraged to attend day care. The latter question was included as patients and patient representatives assessed this question as highly relevant to them. For lung imaging, the Task Force recommended, based on very low certainty of evidence, to monitor children with BPD with Chest X-ray or CT scan only if they had severe disease and/or recurrent hospital admissions due to respiratory morbidity. The main reason for this was that with imaging other diseases like interstitial lung disease may be excluded. For lung function, the Task Force suggested to monitor all children with lung function. Although this does not improve outcomes, many observational studies have shown lower lung function in later life. There was no evidence on discouraging day care attendance and individual advice to parents regarding day care attendance is needed. Four questions on treatment addressed whether specific treatments can reduce morbidity and related outcomes in children with BPD. These treatments were inhaled bronchodilators, inhaled or systemic corticosteroids, diuretics and supplemental oxygen. All recommendations were based on very low certainty of evidence. Inhaled bronchodilators were only advised for subgroups of patients, for example those with asthma-like symptoms, recurrent hospital admissions due to respiratory morbidity, exercise intolerance or reversibility in lung function. Treatment with inhaled or systemic steroids was not recommended. The Task Force considered that there was no indication for diuretics in children with established BPD but recommended in children who were already on diuretics to wean them by not increasing the dose based on their weight (natural weaning). For supplemental oxygen, there were no randomized controlled trials on the best saturation targets. Based on a RCT in children from the age of 32 weeks PMA, the Task Force suggested that supplemental oxygen should be given with a minimum saturation target of 90%. (9) It is unknown if higher oxygen saturations translate in better outcomes. Future research In contrast to prevention of BPD, there is an impressive lack of studies in children with established BPD. Future research should focus on several areas. First, the definition of BPD is now based on total days of supplemental oxygen and the severity is assessed based on the respiratory support at 36 weeks PMA. This definition is arbitrary and it is well known that extreme preterm born children who do not fit this BPD definition have decreased lung function, although to a lesser extent than children with BPD, and may also show abnormalities on Chest CT. Bronchopulmonary dysplasia, or lung disease due to prematurity, is a gliding scale and, as such, all (extreme) preterm born children deserve thorough follow-up including pulmonary follow-up. Second, like in asthma, BPD is rather an umbrella concept and there may be several subtypes of BPD based on early-life factors, airway-, lung- and vascular-driven pathophysiology, and/or postnatal management strategies. There is a need for biomarkers e.g. in blood or exhaled breath and/or imaging techniques like MRI to predict the development of BPD, severity of disease and long-term outcomes early in life. There is an important lack of knowledge on the pathophysiology of BPD in older children and hence on potential treatment options. Like in other respiratory diseases, the role of the Microbiome may be important. Regarding the treatment of BPD, studies on intratracheal stem cells show promising results. (10) Less appealing but urgently needed are studies on oxygen saturation targets, anti-inflammatory treatments like inhaled corticosteroids, bronchodilators and azithromycin. Long-term follow-up into adulthood in standardized, multidisciplinary follow-up clinics is needed to assess not only respiratory outcomes but also cardiovascular and neurodevelopmental outcomes in the short- and long-term. The ultimate aim of further research is to improve clinical care and quality of life of patients with BPD, and prevent consequences across the life course.

KW - academic achievement

KW - adolescence

KW - adult

KW - adulthood

KW - angiogenesis

KW - assisted ventilation

KW - asthma

KW - child

KW - clinical assessment

KW - complication

KW - conference abstract

KW - controlled study

KW - day care

KW - exercise

KW - female

KW - follow up

KW - forced expiratory volume

KW - heart right ventricle failure

KW - hospital admission

KW - human

KW - human cell

KW - inflammation

KW - intellectual impairment

KW - interstitial lung disease

KW - low birth weight

KW - lung dysplasia

KW - lung function

KW - lung vascular resistance

KW - male

KW - meta analysis

KW - microbiome

KW - morbidity

KW - motor dysfunction

KW - newborn intensive care

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - observational study

KW - oxygen saturation

KW - prematurity

KW - prevention

KW - pulmonary hypertension

KW - quality of life

KW - randomized controlled trial (topic)

KW - respiration depression

KW - respiratory tract disease

KW - risk factor

KW - stem cell

KW - synthesis

KW - systematic review

KW - thorax radiography

KW - weaning

KW - x-ray computed tomography

KW - azithromycin

KW - biological marker

KW - bronchodilating agent

KW - corticosteroid

KW - diuretic agent

KW - oxygen

JF - Pediatric Pulmonology

JA - Pediatr. Pulmonol.

LA - English

VL - 56

IS - SUPPL 2

SP - S64

EP - S66

CY - Netherlands

PB - John Wiley and Sons Inc.

SN - 1099-0496

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DO - https://dx.doi.org/10.1002/ppul.25498

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=635467542

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1002%2fppul.25498Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pijnenburg&issn=1099-0496&title=Pediatric+Pulmonology&atitle=Task+force+on+BPD-future+directions&volume=56&issue=SUPPL+2&spage=S64&epage=S66&date=2021&doi=10.1002%2Fppul.25498&pmid=&sid=OVID:embase

185.

TY - JOUR

DB - Embase

AN - 635444341

T1 - An enriched biosignature of gut microbiota-dependent metabolites characterizes maternal plasma in a mouse model of fetal alcohol spectrum disorder

T3 - 44th Annual Meeting of the Research Society on Alcoholism, RSA 2021. Virtual.

A1 - Virdee M.S.

A1 - Saini N.

A1 - Kay C.D.

A1 - Neilson A.P.

A1 - Kwan S.T.C.

A1 - Helfrich K.K.

A1 - Mooney S.M.

A1 - Smith S.M.

Y1 - 2021//

N2 - Background: Prenatal alcohol exposure (PAE) causes permanent cognitive disability. The enteric microbiome generates microbial-dependent products (MDPs) that may contribute to disorders including autism, depression, and anxiety. Whereas alcohol affects microbiome composition and activity, its impact under PAE is uncharacterized. Method(s): We used a mouse model of PAE, in which C57BL/6J dams received 3 g/kg alcohol (N = 9) or isocaloric maltodextrin (N = 9) on embryonic days (E) 8.5-17.5 by gavage. Maternal and fetal tissues were collected at E17.5, and untargeted metabolite analysis was performed using reverse phase/UPLC-MS/MS under both positive and negative ion mode electrospray ionization. Raw area-count of peaks was normalized by median centering, and significant differences were determined using Mann-Whitney U-test and adjusted for multiple testing. Result(s): Hierarchical clustering by principal component analysis and Pearson's correlation of the 813 metabolites detected in maternal plasma identified MDPs as significant predictors for PAE. Of 146 metabolites having a q <= 0.05, 28.1% (N = 41) were MDPs. The majority (29/41) were phenolic acids enriched by PAE and included salicin (13.0-fold), catechol sulfate (7.4-fold), cinnamate (5.3-fold), and salicylate (3.1-fold). Multiple indoles including indoleacetate, indolelactate, and 3-formylindole were also elevated, whereas secondary bile acids were reduced. Correlational network analyses revealed that alcohol altered plasma MDP-metabolite relationships, and PAE maternal plasma was characterized by subnetworks dominated by phenolic acids (Spearman R > 0.9) and bile acids (Spearman R < -0.9). Importantly, 30 MDPs crossed the placenta and were detected in fetal liver (N = 32) and brain (N = 16), where their impact is unknown. MDPs enriched by PAE included hippurate (2.4-fold), catechol sulfate (1.8-fold), salicylate (1.5-fold), and phenol sulfate (1.3-fold) in fetal liver, and hippurate (1.8-fold), phenol sulfate (2.7-fold), and ergothioneine (1.4-fold) in fetal brain, among others. Conclusion(s): MDPs constitute a characteristic biosignature that distinguishes PAE. These same MDPs are abundant in human plasma, where they influence physiology and disease. Several of these, including 4-ethylphenylsulfate, oxindole, indolepropionate, p-cresol sulfate, catechol sulfate, and salicylate, have been implicated in other neurological disorders. Their altered abundance here may reflect alcohol's known effects on microbiota composition and gut permeability. We propose that the maternal microbiome and its MDPs are a previously unrecognized influence upon the pathologies that typify PAE.

KW - animal experiment

KW - animal model

KW - animal tissue

KW - C57BL 6 mouse

KW - conference abstract

KW - controlled study

KW - drug combination

KW - electrospray

KW - enteric feeding

KW - female

KW - \*fetal alcohol syndrome

KW - fetus

KW - fetus brain

KW - fetus liver

KW - fetus tissue

KW - hierarchical clustering

KW - \*intestine flora

KW - liquid chromatography-mass spectrometry

KW - \*maternal plasma

KW - mouse

KW - \*mouse model

KW - network analysis

KW - neurologic disease

KW - nonhuman

KW - placenta

KW - principal component analysis

KW - rank sum test

KW - reversed phase ultra performance liquid chromatography

KW - alcohol

KW - bile acid

KW - cinnamic acid

KW - hippuric acid

KW - indoleacetic acid

KW - indolepropionic acid

KW - oxindole

KW - salicin

KW - salicylic acid

KW - thioneine

KW - unclassified drug

JF - Alcoholism: Clinical and Experimental Research

JA - Alcohol. Clin. Exp. Res.

LA - English

VL - 45

IS - SUPPL 1

SP - 221A

CY - Netherlands

PB - Blackwell Publishing Ltd

SN - 1530-0277

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M1 - (Kay, Neilson) Plants for Human Health Institute, Dept Food Bioprocessing and Nutrition Sciences, North Carolina State University, Kannapolis, NC 28081, United States

DO - https://dx.doi.org/10.1111/acer.14628

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=635444341

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1111%2facer.14628Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Virdee&issn=1530-0277&title=Alcoholism%3A+Clinical+and+Experimental+Research&atitle=An+enriched+biosignature+of+gut+microbiota-dependent+metabolites+characterizes+maternal+plasma+in+a+mouse+model+of+fetal+alcohol+spectrum+disorder&volume=45&issue=SUPPL+1&spage=221A&epage=&date=2021&doi=10.1111%2Facer.14628&pmid=&sid=OVID:embase

186.

TY - JOUR

DB - Embase

AN - 635077395

T1 - Microbiome phylogenetic diversity changes in emergency department patients with early suspected infection

T3 - Society for Academic Emergency Medicine Annual Meeting, SAEM 2021. Virtual.

A1 - Limkakeng A.T.

A1 - Foott A.

A1 - Robertson J.

A1 - Zhang K.

A1 - Modlieszewski J.

A1 - Griffin M.

A1 - Bouffler A.

A1 - Wischmeyer P.

Y1 - 2021//

N2 - Background and Objectives: There has been much attention to the microbiome, the bacteria present in the human gastrointestinal system. However, changes in the microbiome early in the course of critical illness has not been well described. We hypothesize that in critically ill ED patients, detectable change in phylogenetic microbiome diversity occurs within 24 hours of hospital presentation. Method(s): Prospective observational cohort study in ED patients with suspected infection requiring IV antibiotics AND any of the following: abnormal vital signs, symptoms of dyspnea, chest discomfort, or altered mental status, requiring assisted ventilation, or clinical gestalt of more than 25% likelihood of intensive care unit disposition. Setting(s): Academic tertiary care hospital ED. Exclusion criteria included antibiotic use or hospital/long-term care facility admission prior to presentation, and inability to obtain a sample within 8 hours of initial ED antibiotic administration. After informed consent, we collected 2 microbiomic swabs each from the mouth and perianal area and stored the swabs in an-80 C freezer prior to batch processing. We collected demographics and clinical data, including antibiotics and timing of sample collection relative to antibiotics. Microbiomic data were processed into amplicon sequence variant (ASV) count tables via the Qiime2 pipeline1 (2020.2). Raw sequence data was demultiplexed and quality filtered using the q2-demux plugin followed by denoising with DADA22 (via q2-dada2). Principal component analysis was conducted for dimension reduction. Beta diversity was calculated for all samples using the Bray-Curtis dissimilarity index. We plotted beta diversity of oral and fecal samples for all time points across principal component axes. Result(s): We recruited 6 patients, 2 males, median age 72.5 years. Initial samples were obtained before antibiotic administration in 3 patients (Pt. #'s 4, 5, and 7; range of time before antibiotics = 23-308 minutes; Pt. #'s 1, 3, and 6; range of time after antibiotics = 100-344 minutes). Patients 5, 6, and 7 demonstrated a change in microbiome beta diversity as rapidly as 4 hours after their first sample (Figure 1 for fecal samples). Conclusion(s): This pilot project is proof of principle that patients can exhibit changes in microbiomic diversity as rapidly as 4 hours after antibiotic administration and that microbiomic beta diversity changes differently across patients.

KW - aged

KW - amplicon

KW - assisted ventilation

KW - case report

KW - clinical article

KW - cohort analysis

KW - conference abstract

KW - critically ill patient

KW - demography

KW - drug therapy

KW - dyspnea

KW - \*emergency ward

KW - feces

KW - female

KW - freezer

KW - gestalt psychology

KW - human

KW - human tissue

KW - informed consent

KW - intensive care unit

KW - male

KW - mental health

KW - \*microbiome

KW - mouth

KW - nonhuman

KW - nursing home

KW - pipeline

KW - principal component analysis

KW - prospective study

KW - tertiary care center

KW - thorax pain

KW - vital sign

KW - antibiotic agent

JF - Academic Emergency Medicine

JA - Acad. Emerg. Med.

LA - English

VL - 28

IS - SUPPL 1

SP - S375

EP - S376

CY - Netherlands

PB - Blackwell Publishing Inc.

SN - 1553-2712

AD - A.T. Limkakeng, Duke University, School of Medicine

M1 - (Limkakeng, Foott, Robertson, Zhang, Modlieszewski, Griffin, Bouffler, Wischmeyer) Duke University, School of Medicine

DO - https://dx.doi.org/10.1111/acem.14249

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed22&NEWS=N&AN=635077395

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed22&DO=10.1111%2facem.14249Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Limkakeng&issn=1553-2712&title=Academic+Emergency+Medicine&atitle=Microbiome+phylogenetic+diversity+changes+in+emergency+department+patients+with+early+suspected+infection&volume=28&issue=SUPPL+1&spage=S375&epage=S376&date=2021&doi=10.1111%2Facem.14249&pmid=&sid=OVID:embase

187.

TY - JOUR

DB - Embase

AN - 2005757173

T1 - Clinically Efficacious Probiotics Modulate Neuronal Excitability and Anxiety-Related Behaviors in Germ-Free Mice in a Context-Dependent Manner

T3 - 75th Annual Scientific Convention and Meeting. New York United States.

A1 - Kim J.

A1 - Mason M.

A1 - Misheneva V.

A1 - Woo H.

A1 - O'Donnell E.

A1 - Severance E.

A1 - Yolken R.

A1 - Pletnikov M.

Y1 - 2020//

N2 - Background: Emerging evidence suggests that the intestinal microbiota can influence brain functions and psychological behaviors. However, the underlying neurophysiological mechanisms associated with the gut microbiome-induced behavioral changes are largely unknown. To determine the gut-brain-behavior interaction mechanisms, we characterized both behaviors and electrophysiological effects of clinically efficacious probiotics in germ-free (GF) mice before or after conventionalization of their microbiome. Method(s): 5-month-old male C57BL/6 GF mice or conventionalized GF mice were administered either vehicle or probiotics (lactobacillus and bifidobacterium) by daily gavage for 2 weeks. On test day, mice were tested for anxiety-related behaviors immediately followed by whole-cell patch clamp electrophysiological recordings of hippocampal and amygdala neurons. Result(s): Probiotics administration increased anxiety level in open field test (n = 5-6 mice per group, p = 0.0425, t-test) and increased neuronal intrinsic excitability in both hippocampus and amygdala (p < 0.0001 for both cell types, two-way ANOVA) in GF mice. Conventionalized GF mice did not show significant difference in anxiety level between control and probiotics groups (n = 6 mice per group, p = 0.0631, t-test), but probiotics-treated mice showed decreased intrinsic excitability in hippocampus (p < 0.0016, two-way repeated measures ANOVA). Conclusion(s): We demonstrated that the effects of probiotics were bidirectional between GF and conventionalized GF mice, increasing and decreasing neuronal excitability, respectively with corresponding behavioral changes. Our results suggest that probiotics produce their effects on the gut microbiome in a context-dependent manner to "normalize" homeostatic balance in both neuronal activity and psychological behaviors. Supported By: NIHR01 Keywords: Gut Microbiome, Microbiome-Gut-Brain Axis, Electrophysiology, Anxiety, HippocampusCopyright © 2020

KW - adult

KW - amygdala neuron

KW - analysis of variance

KW - animal cell

KW - animal experiment

KW - animal model

KW - \*anxiety

KW - behavior change

KW - Bifidobacterium

KW - C57BL 6 mouse

KW - conference abstract

KW - drug toxicity

KW - electrophysiological procedures

KW - enteric feeding

KW - gastrointestinal tract

KW - \*germfree mouse

KW - hippocampus

KW - Lactobacillus

KW - male

KW - microbiome

KW - mouse

KW - \*nerve cell excitability

KW - nonhuman

KW - open field test

KW - whole cell patch clamp

KW - \*probiotic agent

KW - unclassified drug

JF - Biological Psychiatry

JA - Biol. Psychiatry

LA - English

VL - 87

IS - 9 Supplement

SP - S124

CY - Netherlands

PB - Elsevier USA

SN - 0006-3223

SN - 1873-2402

M1 - (Kim, Misheneva, Woo, O'Donnell, Severance, Yolken, Pletnikov) Johns Hopkins University

M1 - (Mason) University of New Mexico

DO - https://dx.doi.org/10.1016/j.biopsych.2020.02.335

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005757173

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.biopsych.2020.02.335Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kim&issn=0006-3223&title=Biological+Psychiatry&atitle=Clinically+Efficacious+Probiotics+Modulate+Neuronal+Excitability+and+Anxiety-Related+Behaviors+in+Germ-Free+Mice+in+a+Context-Dependent+Manner&volume=87&issue=9+Supplement&spage=S124&epage=&date=2020&doi=10.1016%2Fj.biopsych.2020.02.335&pmid=&sid=OVID:embase

188.

TY - JOUR

DB - Embase

AN - 634335572

ID - 33058137 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33058137]

T1 - Probiotics to prevent necrotising enterocolitis in very preterm or very low birth weight infants

A1 - Sharif S.

A1 - Meader N.

A1 - Oddie S.J.

A1 - Rojas-Reyes M.X.

A1 - McGuire W.

Y1 - 2020//

N2 - Background: Intestinal dysbiosis may contribute to the pathogenesis of necrotising enterocolitis (NEC) in very preterm or very low birth weight infants. Dietary supplementation with probiotics to modulate the intestinal microbiome has been proposed as a strategy to reduce the risk of NEC and associated mortality and morbidity. Objective(s): To determine the effect of supplemental probiotics on the risk of NEC and mortality and morbidity in very preterm or very low birth weight infants. Search Method(s): We searched Cochrane Central Register of Controlled Trials (CENTRAL; 2020, Issue 2) in the Cochrane Library; MEDLINE Ovid (1946 to 17 Feb 2020), Embase Ovid (1974 to 17 Feb 2020), Maternity & Infant Care Database Ovid (1971 to 17 Feb 2020), the Cumulative Index to Nursing and Allied Health Literature (1982 to 18 Feb 2020). We searched clinical trials databases, conference proceedings, and the reference lists of retrieved articles for randomised controlled trials (RCTs) and quasi-RCTs. Selection Criteria: We included RCTs and quasi-RCTs comparing probiotic supplementation with placebo or no probiotics in very preterm or very low birth weight infants. Data Collection and Analysis: We used the standard methods of Cochrane Neonatal. Two review authors separately evaluated trial quality, extracted data, and synthesised effect estimates using risk ratio (RR), risk difference (RD), and mean difference. We used the GRADE approach to assess the certainty of evidence for effects on NEC, all-cause mortality, late-onset infection, and severe neurodevelopmental impairment. Main Result(s): We included 56 trials in which 10,812 infants participated. Most trials were small (median sample size 149). Lack of clarity on methods to conceal allocation and mask caregivers or investigators were the main potential sources of bias in about half of the trials. Trials varied by the formulation of the probiotics. The most commonly used preparations contained Bifidobacterium spp., Lactobacillus spp., Saccharomyces spp., and Streptococcus spp. alone or in combinations. Meta-analysis showed that probiotics may reduce the risk of NEC: RR 0.54, 95% CI 0.45 to 0.65 (54 trials, 10,604 infants; I2 = 17%); RD -0.03, 95% CI -0.04 to -0.02; number needed to treat for an additional beneficial outcome (NNTB) 33, 95% CI 25 to 50. Evidence was assessed as low certainty because of the limitations in trials design, and the presence of funnel plot asymmetry consistent with publication bias. Sensitivity meta-analysis of trials at low risk of bias showed a reduced risk of NEC: RR 0.70, 95% CI 0.55 to 0.89 (16 trials, 4597 infants; I2 = 25%); RD -0.02, 95% CI -0.03 to -0.01; NNTB 50, 95% CI 33 to 100. Meta-analyses showed that probiotics probably reduce mortality (RR 0.76, 95% CI 0.65 to 0.89; (51 trials, 10,170 infants; I2 = 0%); RD -0.02, 95% CI -0.02 to -0.01; NNTB 50, 95% CI 50 to 100), and late-onset invasive infection (RR 0.89, 95% CI 0.82 to 0.97; (47 trials, 9762 infants; I2 = 19%); RD -0.02, 95% CI -0.03 to -0.01; NNTB 50, 95% CI 33 to 100). Evidence was assessed as moderate certainty for both these outcomes because of the limitations in trials design. Sensitivity meta-analyses of 16 trials (4597 infants) at low risk of bias did not show an effect on mortality or infection. Meta-analysis showed that probiotics may have little or no effect on severe neurodevelopmental impairment (RR 1.03, 95% CI 0.84 to 1.26 (five trials, 1518 infants; I2 = 0%). The certainty on this evidence is low because of limitations in trials design and serious imprecision of effect estimate. Few data (from seven of the trials) were available for extremely preterm or extremely low birth weight infants. Meta-analyses did not show effects on NEC, death, or infection (low-certainty evidence). Authors' conclusions: Given the low to moderate level of certainty about the effects of probiotic supplements on the risk of NEC and associated morbidity and mortality for very preterm or very low birth weight infants, and particularly for extremely preterm or extremely low birth weight infants, further, large, high-quality trials are needed to provide evidence of sufficient quality and applicability to inform policy and practice.Copyright © 2020 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

KW - all cause mortality

KW - artificial milk

KW - Bacillus

KW - Bifidobacterium

KW - breast milk

KW - cerebral palsy

KW - drug megadose

KW - enteric feeding

KW - hearing impairment

KW - human

KW - infant

KW - infection

KW - Lactobacillus

KW - length of stay

KW - low drug dose

KW - mental disease

KW - meta analysis

KW - \*necrotizing enterocolitis/dt [Drug Therapy]

KW - \*necrotizing enterocolitis/pc [Prevention]

KW - \*prematurity

KW - priority journal

KW - randomized controlled trial (topic)

KW - review

KW - Saccharomyces

KW - Streptococcus

KW - systematic review

KW - \*very low birth weight

KW - visual impairment

KW - lactoferrin/cb [Drug Combination]

KW - lactoferrin/dt [Drug Therapy]

KW - lactoferrin/pv [Special Situation for Pharmacovigilance]

KW - placebo

KW - \*probiotic agent/cb [Drug Combination]

KW - \*probiotic agent/cm [Drug Comparison]

KW - \*probiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/na [Intranasal Drug Administration]

KW - \*probiotic agent/po [Oral Drug Administration]

KW - \*probiotic agent/pv [Special Situation for Pharmacovigilance]

KW - unclassified drug

KW - \*very preterm infant

KW - enterogermina/cm [Drug Comparison]

KW - enterogermina/dt [Drug Therapy]

KW - enterogermina/pv [Special Situation for Pharmacovigilance]

KW - infloran/cm [Drug Comparison]

KW - infloran/dt [Drug Therapy]

KW - infloran/pv [Special Situation for Pharmacovigilance]

XT - necrotizing enterocolitis / drug therapy / enterogermina

XT - necrotizing enterocolitis / drug therapy / infloran

XT - necrotizing enterocolitis / drug therapy / lactoferrin

XT - necrotizing enterocolitis / drug therapy / probiotic agent

XT - enterogermina / drug comparison / placebo

XT - enterogermina / drug therapy / necrotizing enterocolitis

XT - enterogermina / special situation for pharmacovigilance / pediatric patient

XT - infloran / drug comparison / placebo

XT - infloran / drug therapy / necrotizing enterocolitis

XT - infloran / special situation for pharmacovigilance / pediatric patient

XT - lactoferrin / drug combination / probiotic agent

XT - lactoferrin / drug therapy / necrotizing enterocolitis

XT - lactoferrin / special situation for pharmacovigilance / pediatric patient

XT - probiotic agent / drug combination / lactoferrin

XT - probiotic agent / drug comparison / placebo

XT - probiotic agent / drug therapy / necrotizing enterocolitis

XT - probiotic agent / special situation for pharmacovigilance / pediatric patient

JF - Cochrane Database of Systematic Reviews

JA - Cochrane Database Syst. Rev.

LA - English

VL - 2020

IS - 10

SP - CD005496

CY - United Kingdom

PB - John Wiley and Sons Ltd

SN - 1465-1858

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M1 - (Oddie) Bradford Neonatology, Bradford Teaching Hospitals NHS Foundation Trust, Bradford, United Kingdom

M1 - (Rojas-Reyes) Department of Clinical Epidemiology and Public Health, Institut de Recerca Hospital Santa Creu i Sant Pau, Barcelona, Spain

C3 - enterogermina: Sanofi Aventis [Italy], infloran

C4 - Dicofarm, Morinaga [Japan], Sanofi Aventis [Italy]

UR - https://www.cochranelibrary.com/cdsr/table-of-contents

DO - https://dx.doi.org/10.1002/14651858.CD005496.pub5

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=634335572

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1002%2f14651858.CD005496.pub5Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sharif&issn=1465-1858&title=Cochrane+Database+of+Systematic+Reviews&atitle=Probiotics+to+prevent+necrotising+enterocolitis+in+very+preterm+or+very+low+birth+weight+infants&volume=2020&issue=10&spage=CD005496&epage=&date=2020&doi=10.1002%2F14651858.CD005496.pub5&pmid=33058137&sid=OVID:embase

189.

TY - JOUR

DB - Embase

AN - 2007626664

T1 - Liver-lung interactions in acute respiratory distress syndrome

A1 - Herrero R.

A1 - Sanchez G.

A1 - Asensio I.

A1 - Lopez E.

A1 - Ferruelo A.

A1 - Vaquero J.

A1 - Moreno L.

A1 - de Lorenzo A.

A1 - Banares R.

A1 - Lorente J.A.

AO - Herrero, Raquel; ORCID: https://orcid.org/0000-0001-8789-0904

Y1 - 2020//

N2 - Patients with liver diseases are at high risk for the development of acute respiratory distress syndrome (ARDS). The liver is an important organ that regulates a complex network of mediators and modulates organ interactions during inflammatory disorders. Liver function is increasingly recognized as a critical determinant of the pathogenesis and resolution of ARDS, significantly influencing the prognosis of these patients. The liver plays a central role in the synthesis of proteins, metabolism of toxins and drugs, and in the modulation of immunity and host defense. However, the tools for assessing liver function are limited in the clinical setting, and patients with liver diseases are frequently excluded from clinical studies of ARDS. Therefore, the mechanisms by which the liver participates in the pathogenesis of acute lung injury are not totally understood. Several functions of the liver, including endotoxin and bacterial clearance, release and clearance of pro-inflammatory cytokines and eicosanoids, and synthesis of acute-phase proteins can modulate lung injury in the setting of sepsis and other severe inflammatory diseases. In this review, we summarized clinical and experimental support for the notion that the liver critically regulates systemic and pulmonary responses following inflammatory insults. Although promoting inflammation can be detrimental in the context of acute lung injury, the liver response to an inflammatory insult is also pro-defense and pro-survival. A better understanding of the liver-lung axis will provide valuable insights into new diagnostic targets and therapeutic strategies for clinical intervention in patients with or at risk for ARDS.Copyright © 2020, The Author(s).

KW - adaptive immunity

KW - \*adult respiratory distress syndrome

KW - apoptosis

KW - article

KW - bacteremia

KW - bacterial clearance

KW - bacterial translocation

KW - critically ill patient

KW - cytotoxicity

KW - distress syndrome

KW - dysbiosis

KW - endothelial dysfunction

KW - gene expression

KW - host resistance

KW - human

KW - hypoglycemia

KW - hypoxemia

KW - inflammation

KW - intestine flora

KW - lipid metabolism

KW - lipid peroxidation

KW - liver cirrhosis

KW - liver function

KW - liver injury

KW - liver regeneration

KW - liver transplantation

KW - lung lavage

KW - lung vascular resistance

KW - macrophage

KW - mononuclear phagocyte

KW - \*organismal interaction

KW - phagocytosis

KW - respiratory distress

KW - septic shock

KW - thrombocyte aggregation

KW - upregulation

KW - alanine aminotransferase/ec [Endogenous Compound]

KW - angiotensinogen/ec [Endogenous Compound]

KW - aspartate aminotransferase/ec [Endogenous Compound]

KW - bilirubin/ec [Endogenous Compound]

KW - CD14 antigen/ec [Endogenous Compound]

KW - cytokine/ec [Endogenous Compound]

KW - dexmedetomidine

KW - endothelin 1/ec [Endogenous Compound]

KW - gamma glutamyltransferase/ec [Endogenous Compound]

KW - gamma interferon/ec [Endogenous Compound]

KW - high mobility group B1 protein/ec [Endogenous Compound]

KW - HLA DR antigen/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - intercellular adhesion molecule 1/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - pathogen associated molecular pattern/ec [Endogenous Compound]

KW - peroxisome proliferator activated receptor alpha/ec [Endogenous Compound]

KW - thiobarbituric acid reactive substance

KW - toll like receptor 4/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - \*liver lung interaction

JF - Intensive Care Medicine Experimental

JA - Intensive Care Med. Exp.

LA - English

VL - 8

IS - Supplement 1

SP - 48

CY - Switzerland

PB - Springer Science and Business Media Deutschland GmbH

SN - 2197-425X (electronic)

SN - 2197-425X

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UR - icm-experimental.springeropen.com/articles

DO - https://dx.doi.org/10.1186/s40635-020-00337-9

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2007626664

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1186%2fs40635-020-00337-9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Herrero&issn=2197-425X&title=Intensive+Care+Medicine+Experimental&atitle=Liver-lung+interactions+in+acute+respiratory+distress+syndrome&volume=8&issue=Supplement+1&spage=48&epage=&date=2020&doi=10.1186%2Fs40635-020-00337-9&pmid=&sid=OVID:embase

190.

TY - JOUR

DB - Embase

AN - 632886221

ID - 32933176 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32933176]

T1 - Pathomechanisms of Non-Traumatic Acute Brain Injury in Critically Ill Patients

A1 - Dabrowski W.

A1 - Siwicka-Gieroba D.

A1 - Gasinska-Blotniak M.

A1 - Zaid S.

A1 - Jezierska M.

A1 - Pakulski C.

A1 - Williams Roberson S.

A1 - Wesley Ely E.

A1 - Kotfis K.

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Y1 - 2020//

N2 - Delirium, an acute alteration in mental status characterized by confusion, inattention and a fluctuating level of arousal, is a common problem in critically ill patients. Delirium prolongs hospital stay and is associated with higher mortality. The pathophysiology of delirium has not been fully elucidated. Neuroinflammation and neurotransmitter imbalance seem to be the most important factors for delirium development. In this review, we present the most important pathomechanisms of delirium in critically ill patients, such as neuroinflammation, neurotransmitter imbalance, hypoxia and hyperoxia, tryptophan pathway disorders, and gut microbiota imbalance. A thorough understanding of delirium pathomechanisms is essential for effective prevention and treatment of this underestimated pathology in critically ill patients.

KW - \*brain injury

KW - critical illness

KW - \*delirium/et [Etiology]

KW - human

KW - intensive care unit

KW - length of stay

KW - tryptophan

JF - Medicina (Kaunas, Lithuania)

JA - Medicina (Kaunas)

LA - English

VL - 56

IS - 9

SP -

CY - Switzerland

PB - NLM (Medline)

SN - 1648-9144 (electronic)

SN - 1648-9144

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DO - https://dx.doi.org/10.3390/medicina56090469

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=632886221

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3390%2fmedicina56090469Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Dabrowski&issn=1648-9144&title=Medicina+%28Kaunas%2C+Lithuania%29&atitle=Pathomechanisms+of+Non-Traumatic+Acute+Brain+Injury+in+Critically+Ill+Patients&volume=56&issue=9&spage=469&epage=&date=2020&doi=10.3390%2Fmedicina56090469&pmid=32933176&sid=OVID:embase

191.

TY - JOUR

DB - Embase

AN - 632916003

ID - 32618649 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32618649]

T1 - Major Trends in Gastroenterology and Hepatology between 2010 and 2019: An Overview of Advances from the Past Decade Selected by the Editorial Board of the American Journal of Gastroenterology

A1 - Bajaj J.S.

A1 - Brenner D.M.

A1 - Cai Q.

A1 - Cash B.D.

A1 - Crowell M.

A1 - Dibaise J.

A1 - Gallegos-Orozco J.F.

A1 - Gardner T.B.

A1 - Gyawali C.P.

A1 - Ha C.

A1 - Holtmann G.

A1 - Jamil L.H.

A1 - Kaplan G.G.

A1 - Karsan H.A.

A1 - Kinoshita Y.

A1 - Lebwohl B.

A1 - Leontiadis G.I.

A1 - Lichtenstein G.R.

A1 - Longstreth G.F.

A1 - Muthusamy V.R.

A1 - Oxentenko A.S.

A1 - Pimentel M.

A1 - Pisegna J.R.

A1 - Rubenstein J.H.

A1 - Russo M.W.

A1 - Saini S.D.

A1 - Samadder N.J.

A1 - Shaukat A.

A1 - Simren M.

A1 - Stevens T.

A1 - Valdovinos M.

A1 - Vargas H.

A1 - Spiegel B.

A1 - Lacy B.E.

Y1 - 2020//

KW - alcohol liver disease/su [Surgery]

KW - autoimmune pancreatitis/di [Diagnosis]

KW - biliary tract drainage

KW - cancer prevention

KW - cancer screening

KW - celiac disease/di [Diagnosis]

KW - celiac disease/ep [Epidemiology]

KW - celiac disease/th [Therapy]

KW - chronic constipation/dt [Drug Therapy]

KW - cognitive behavioral therapy

KW - colonoscopy

KW - colorectal cancer/di [Diagnosis]

KW - colorectal cancer/pc [Prevention]

KW - colorectal disease

KW - depression/si [Side Effect]

KW - diarrhea/dt [Drug Therapy]

KW - digestive system cancer/si [Side Effect]

KW - digestive system function disorder

KW - disinfection

KW - drug efficacy

KW - drug response

KW - drug safety

KW - drug use

KW - dyspepsia/dt [Drug Therapy]

KW - endoscopic retrograde cholangiopancreatography

KW - endoscopic submucosal dissection

KW - endoscopy

KW - esophagus cancer/dt [Drug Therapy]

KW - esophagus cancer/pc [Prevention]

KW - esophagus disease/dt [Drug Therapy]

KW - esophagus dysplasia/dt [Drug Therapy]

KW - esophagus dysplasia/pc [Prevention]

KW - fecal microbiota transplantation

KW - flu like syndrome/si [Side Effect]

KW - gallbladder drainage

KW - \*gastroenterology

KW - gastroenterostomy

KW - gastroesophageal reflux/su [Surgery]

KW - gluten free diet

KW - Helicobacter infection/dt [Drug Therapy]

KW - hepatitis C/dt [Drug Therapy]

KW - human

KW - hypnosis

KW - incidence

KW - inflammatory bowel disease/ep [Epidemiology]

KW - instrument sterilization

KW - interventional ultrasonography

KW - intestine flora

KW - intestine preparation

KW - irritable colon/dt [Drug Therapy]

KW - irritable colon/th [Therapy]

KW - jejunostomy

KW - liver toxicity

KW - liver transplantation

KW - low FODMAP diet

KW - \*medical literature

KW - nonalcoholic fatty liver

KW - nonhuman

KW - pancreas juice

KW - pancreas pseudocyst/su [Surgery]

KW - parenteral nutrition

KW - peptic ulcer

KW - peroral endoscopic myotomy

KW - positron emission tomography

KW - prevalence

KW - priority journal

KW - \*publishing

KW - review

KW - Roux Y anastomosis

KW - short bowel syndrome/dt [Drug Therapy]

KW - short bowel syndrome/su [Surgery]

KW - short bowel syndrome/th [Therapy]

KW - stomach paresis/dt [Drug Therapy]

KW - stomach tumor/su [Surgery]

KW - suicide/si [Side Effect]

KW - therapy effect

KW - transoral incisionless fundoplication

KW - acetylsalicylic acid/dt [Drug Therapy]

KW - amoxicillin/cb [Drug Combination]

KW - amoxicillin/dt [Drug Therapy]

KW - boceprevir/dt [Drug Therapy]

KW - ciluprevir/dt [Drug Therapy]

KW - ciluprevir/to [Drug Toxicity]

KW - clarithromycin/cb [Drug Combination]

KW - clarithromycin/dt [Drug Therapy]

KW - colestyramine/dt [Drug Therapy]

KW - eluxadoline/dt [Drug Therapy]

KW - esomeprazole/dt [Drug Therapy]

KW - interferon/ae [Adverse Drug Reaction]

KW - interferon/dt [Drug Therapy]

KW - linaclotide/dt [Drug Therapy]

KW - liraglutide/dt [Drug Therapy]

KW - liraglutide/sc [Subcutaneous Drug Administration]

KW - loperamide/dt [Drug Therapy]

KW - loperamide/tm [Unexpected Outcome of Drug Treatment]

KW - oxodotreotide lu 177

KW - peginterferon/ae [Adverse Drug Reaction]

KW - peginterferon/dt [Drug Therapy]

KW - peppermint oil/dt [Drug Therapy]

KW - placebo

KW - plecanatide/dt [Drug Therapy]

KW - probiotic agent/dt [Drug Therapy]

KW - prokinetic agent

KW - proton pump inhibitor/ae [Adverse Drug Reaction]

KW - proton pump inhibitor/cb [Drug Combination]

KW - proton pump inhibitor/dt [Drug Therapy]

KW - prucalopride/dt [Drug Therapy]

KW - ribavirin/ae [Adverse Drug Reaction]

KW - ribavirin/dt [Drug Therapy]

KW - rifaximin/dt [Drug Therapy]

KW - serotonin 4 agonist

KW - teduglutide/cm [Drug Comparison]

KW - teduglutide/dt [Drug Therapy]

KW - tegaserod/dt [Drug Therapy]

KW - telaprevir/dt [Drug Therapy]

KW - telotristat

KW - tenapanor/dt [Drug Therapy]

KW - unindexed drug

KW - digestive stent

KW - duodenoscope

KW - metal stent

KW - thermal cautery unit

XT - chronic constipation / drug therapy / linaclotide

XT - chronic constipation / drug therapy / plecanatide

XT - chronic constipation / drug therapy / prucalopride

XT - depression / side effect / interferon

XT - depression / side effect / peginterferon

XT - depression / side effect / ribavirin

XT - diarrhea / drug therapy / colestyramine

XT - diarrhea / drug therapy / eluxadoline

XT - diarrhea / drug therapy / loperamide

XT - digestive system cancer / side effect / proton pump inhibitor

XT - dyspepsia / drug therapy / rifaximin

XT - esophagus cancer / drug therapy / acetylsalicylic acid

XT - esophagus cancer / drug therapy / esomeprazole

XT - esophagus disease / drug therapy / proton pump inhibitor

XT - esophagus dysplasia / drug therapy / acetylsalicylic acid

XT - esophagus dysplasia / drug therapy / esomeprazole

XT - flu like syndrome / side effect / interferon

XT - flu like syndrome / side effect / peginterferon

XT - flu like syndrome / side effect / ribavirin

XT - Helicobacter infection / drug therapy / amoxicillin

XT - Helicobacter infection / drug therapy / clarithromycin

XT - Helicobacter infection / drug therapy / proton pump inhibitor

XT - hepatitis C / drug therapy / boceprevir

XT - hepatitis C / drug therapy / ciluprevir

XT - hepatitis C / drug therapy / interferon

XT - hepatitis C / drug therapy / peginterferon

XT - hepatitis C / drug therapy / ribavirin

XT - hepatitis C / drug therapy / telaprevir

XT - irritable colon / drug therapy / colestyramine

XT - irritable colon / drug therapy / eluxadoline

XT - irritable colon / drug therapy / linaclotide

XT - irritable colon / drug therapy / loperamide

XT - irritable colon / drug therapy / peppermint oil

XT - irritable colon / drug therapy / plecanatide

XT - irritable colon / drug therapy / probiotic agent

XT - irritable colon / drug therapy / rifaximin

XT - irritable colon / drug therapy / tegaserod

XT - irritable colon / drug therapy / tenapanor

XT - short bowel syndrome / drug therapy / liraglutide

XT - short bowel syndrome / drug therapy / teduglutide

XT - stomach paresis / drug therapy / prucalopride

XT - suicide / side effect / interferon

XT - suicide / side effect / peginterferon

XT - suicide / side effect / ribavirin

XT - acetylsalicylic acid / drug therapy / esophagus cancer

XT - acetylsalicylic acid / drug therapy / esophagus dysplasia

XT - amoxicillin / drug combination / clarithromycin

XT - amoxicillin / drug combination / proton pump inhibitor

XT - amoxicillin / drug therapy / Helicobacter infection

XT - boceprevir / drug therapy / hepatitis C

XT - ciluprevir / drug therapy / hepatitis C

XT - clarithromycin / drug combination / amoxicillin

XT - clarithromycin / drug combination / proton pump inhibitor

XT - clarithromycin / drug therapy / Helicobacter infection

XT - colestyramine / drug therapy / diarrhea

XT - colestyramine / drug therapy / irritable colon

XT - eluxadoline / drug therapy / diarrhea

XT - eluxadoline / drug therapy / irritable colon

XT - esomeprazole / drug therapy / esophagus cancer

XT - esomeprazole / drug therapy / esophagus dysplasia

XT - interferon / adverse drug reaction / depression

XT - interferon / adverse drug reaction / flu like syndrome

XT - interferon / adverse drug reaction / suicide

XT - interferon / drug therapy / hepatitis C

XT - linaclotide / drug therapy / chronic constipation

XT - linaclotide / drug therapy / irritable colon

XT - liraglutide / drug therapy / short bowel syndrome

XT - loperamide / drug therapy / diarrhea

XT - loperamide / drug therapy / irritable colon

XT - loperamide / unexpected outcome of drug treatment / lack of drug effect

XT - peginterferon / adverse drug reaction / depression

XT - peginterferon / adverse drug reaction / flu like syndrome

XT - peginterferon / adverse drug reaction / suicide

XT - peginterferon / drug therapy / hepatitis C

XT - peppermint oil / drug therapy / irritable colon

XT - plecanatide / drug therapy / chronic constipation

XT - plecanatide / drug therapy / irritable colon

XT - probiotic agent / drug therapy / irritable colon

XT - proton pump inhibitor / adverse drug reaction / digestive system cancer

XT - proton pump inhibitor / drug combination / amoxicillin

XT - proton pump inhibitor / drug combination / clarithromycin

XT - proton pump inhibitor / drug therapy / esophagus disease

XT - proton pump inhibitor / drug therapy / Helicobacter infection

XT - prucalopride / drug therapy / chronic constipation

XT - prucalopride / drug therapy / stomach paresis

XT - ribavirin / adverse drug reaction / depression

XT - ribavirin / adverse drug reaction / flu like syndrome

XT - ribavirin / adverse drug reaction / suicide

XT - ribavirin / drug therapy / hepatitis C

XT - rifaximin / drug therapy / dyspepsia

XT - rifaximin / drug therapy / irritable colon

XT - teduglutide / drug comparison / placebo

XT - teduglutide / drug therapy / short bowel syndrome

XT - tegaserod / drug therapy / irritable colon

XT - telaprevir / drug therapy / hepatitis C

XT - tenapanor / drug therapy / irritable colon

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 115

IS - 7

SP - 1007

EP - 1018

CY - United Kingdom

PB - Wolters Kluwer Health

SN - 0002-9270

SN - 1572-0241

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M2 - AXIOS

C1 - AXIOS

UR - https://journals.lww.com/ajg/pages/default.aspx

DO - https://dx.doi.org/10.14309/ajg.0000000000000709

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=632916003

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.14309%2fajg.0000000000000709Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bajaj&issn=0002-9270&title=American+Journal+of+Gastroenterology&atitle=Major+Trends+in+Gastroenterology+and+Hepatology+between+2010+and+2019%3A+An+Overview+of+Advances+from+the+Past+Decade+Selected+by+the+Editorial+Board+of+the+American+Journal+of+Gastroenterology&volume=115&issue=7&spage=1007&epage=1018&date=2020&doi=10.14309%2Fajg.0000000000000709&pmid=32618649&sid=OVID:embase

192.

TY - JOUR

DB - Embase

AN - 634335241

ID - 33658992 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33658992]

T1 - Why Septic Patients Remain Sick After Hospital Discharge?

A1 - Gritte R.B.

A1 - Souza-Siqueira T.

A1 - Curi R.

A1 - Machado M.C.C.

A1 - Soriano F.G.

Y1 - 2020//

N2 - Sepsis is well known to cause a high patient death rate (up to 50%) during the intensive care unit (ICU) stay. In addition, sepsis survival patients also exhibit a very high death rate after hospital discharge compared to patients with any other disease. The addressed question is then: why septic patients remain ill after hospital discharge? The cellular and molecular mechanisms involved in the high rate of septic patient deaths are still unknown. We described herein the studies that investigated the percentage of septic patients that died after hospital discharge ranging from 90 days up to 5 years. We also reported the symptoms of septic patients after hospital discharge and the development of the recently called post-sepsis syndrome (PSS). The most common symptoms of the PSS are cognitive disabilities, physical functioning decline, difficulties in performing routine daily activities, and poor life quality. The PSS also associates with quite often reinfection and re-hospitalization. This condition is the cause of the high rate of death mentioned above. We reported the proportion of patients dying after hospital discharge up to 5 years of followed up and the PSS symptoms associated. The authors also discuss the possible cellular and metabolic reprogramming mechanisms related with the low survival of septic patients and the occurrence of PSS.© Copyright © 2021 Gritte, Souza-Siqueira, Curi, Machado and Soriano.

KW - adult

KW - amnesia

KW - anxiety

KW - article

KW - cardiovascular disease

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - cognitive defect

KW - controlled study

KW - daily life activity

KW - depression

KW - DNA damage

KW - dysbiosis

KW - epigenetics

KW - gene expression

KW - helper cell

KW - \*hospital discharge

KW - hospital readmission

KW - human

KW - immune deficiency

KW - immune dysregulation

KW - inflammation

KW - intensive care unit

KW - leukocyte

KW - macrophage

KW - mortality rate

KW - myopathy

KW - neuropathy

KW - neutrophil

KW - nuclear reprogramming

KW - oxidative phosphorylation

KW - physical performance

KW - pneumonia

KW - quality of life

KW - reinfection

KW - rheumatoid arthritis

KW - \*sepsis

KW - septicemia

KW - sleep disorder

KW - survival

KW - Th1 cell

KW - Th17 cell

KW - Th2 cell

KW - high mobility group B1 protein/ec [Endogenous Compound]

KW - toll like receptor 2/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - toll like receptor 9/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 11

SP - 605666

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2020.605666

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=634335241

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3389%2ffimmu.2020.605666Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gritte&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Why+Septic+Patients+Remain+Sick+After+Hospital+Discharge%3F&volume=11&issue=&spage=605666&epage=&date=2020&doi=10.3389%2Ffimmu.2020.605666&pmid=33658992&sid=OVID:embase

193.

TY - JOUR

DB - Embase

AN - 2004947306

ID - 32825327 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32825327]

T1 - Melatonin's impact on antioxidative and anti-inflammatory reprogramming in homeostasis and disease

A1 - Chitimus D.M.

A1 - Popescu M.R.

A1 - Voiculescu S.E.

A1 - Panaitescu A.M.

A1 - Pavel B.

A1 - Zagrean L.

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Y1 - 2020//

N2 - There is a growing consensus that the antioxidant and anti-inflammatory properties of melatonin are of great importance in preserving the body functions and homeostasis, with great impact in the peripartum period and adult life. Melatonin promotes adaptation through allostasis and stands out as an endogenous, dietary, and therapeutic molecule with important health benefits. The anti-inflammatory and antioxidant effects of melatonin are intertwined and are exerted throughout pregnancy and later during development and aging. Melatonin supplementation during pregnancy can reduce ischemia-induced oxidative damage in the fetal brain, increase offspring survival in inflammatory states, and reduce blood pressure in the adult offspring. In adulthood, disturbances in melatonin production negatively impact the progression of cardiovascular risk factors and promote cardiovascular and neurodegenerative diseases. The most studied cardiovascular effects of melatonin are linked to hypertension and myocardial ischemia/reperfusion injury, while the most promising ones are linked to regaining control of metabolic syndrome components. In addition, there might be an emerging role for melatonin as an adjuvant in treating coronavirus disease 2019 (COVID 19). The present review summarizes and comments on important data regarding the roles exerted by melatonin in homeostasis and oxidative stress and inflammation related pathologies.Copyright © 2020 by the authors. Licensee MDPI, Basel, Switzerland.

KW - adult respiratory distress syndrome

KW - aging

KW - Alzheimer disease

KW - angiogenesis

KW - \*antiinflammatory activity

KW - article

KW - artificial ventilation

KW - attention deficit disorder

KW - brain depth stimulation

KW - brain hemorrhage

KW - brain ischemia

KW - cardiac resynchronization therapy

KW - carotid endarterectomy

KW - cerebrovascular disease

KW - cognitive defect

KW - congestive cardiomyopathy

KW - coronary artery atherosclerosis

KW - coronary artery bypass graft

KW - degenerative disease

KW - delirium

KW - dyspnea

KW - endoplasmic reticulum stress

KW - excitotoxicity

KW - heart failure

KW - heart infarction

KW - heart muscle reperfusion

KW - heart rate variability

KW - heart ventricle hypertrophy

KW - \*homeostasis

KW - human

KW - hyperlipidemia

KW - hypertension

KW - hyperthermia

KW - hypothermia

KW - hypoxia

KW - \*inflammation/dt [Drug Therapy]

KW - insomnia

KW - insulin resistance

KW - intestine flora

KW - intrauterine growth retardation

KW - lipid metabolism

KW - lipid peroxidation

KW - lymphocytic infiltration

KW - maternal hypertension

KW - maternal mortality

KW - Mediterranean diet

KW - metabolic syndrome X

KW - mild cognitive impairment

KW - mitochondrial permeability

KW - nervous system development

KW - nervous system inflammation

KW - neurotoxicity

KW - obesity

KW - oxidative stress

KW - perinatal period

KW - peripheral occlusive artery disease

KW - pineal body

KW - placenta disorder

KW - platelet reactivity

KW - pulmonary hypertension

KW - randomized controlled trial (topic)

KW - respiratory failure

KW - risk factor

KW - seizure

KW - sepsis

KW - ST segment elevation myocardial infarction

KW - sudden cardiac death

KW - suprachiasmatic nucleus

KW - systematic review

KW - systolic blood pressure

KW - vasoplegia

KW - Zika fever

KW - acetylsalicylic acid

KW - amyloid precursor protein/ec [Endogenous Compound]

KW - antioxidant

KW - brain derived neurotrophic factor/ec [Endogenous Compound]

KW - corticosterone

KW - dopamine

KW - endoglin

KW - extra virgin olive oil

KW - glucocorticoid

KW - glutathione

KW - hydrocortisone

KW - hydroxymethylglutaryl coenzyme A reductase inhibitor

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 16/ec [Endogenous Compound]

KW - interleukin 1beta

KW - interleukin 6/ec [Endogenous Compound]

KW - \*melatonin/dt [Drug Therapy]

KW - mitochondrial DNA/ec [Endogenous Compound]

KW - mitochondrial permeability transition pore/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - nebivolol

KW - nitric oxide/ec [Endogenous Compound]

KW - noradrenalin

KW - superoxide dismutase/ec [Endogenous Compound]

KW - transcription factor Nrf2/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

KW - vitamin D

XT - inflammation / drug therapy / melatonin

XT - melatonin / drug therapy / inflammation

JF - Biomolecules

JA - Biomolecules

LA - English

VL - 10

IS - 9

SP - 1

EP - 28

CY - Switzerland

PB - MDPI AG

SN - 2218-273X (electronic)

SN - 2218-273X

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UR - https://www.mdpi.com/2218-273X/10/9/1211/pdf

DO - https://dx.doi.org/10.3390/biom10091211

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004947306

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3390%2fbiom10091211Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Chitimus&issn=2218-273X&title=Biomolecules&atitle=Melatonin%27s+impact+on+antioxidative+and+anti-inflammatory+reprogramming+in+homeostasis+and+disease&volume=10&issue=9&spage=1&epage=28&date=2020&doi=10.3390%2Fbiom10091211&pmid=32825327&sid=OVID:embase

194.

TY - JOUR

DB - Embase

AN - 633057010

T1 - Separating the Empirical Wheat From the Pseudoscientific Chaff: A Critical Review of the Literature Surrounding Glyphosate, Dysbiosis and Wheat-Sensitivity

A1 - Barnett J.A.

A1 - Gibson D.L.

Y1 - 2020//

N2 - The prevalence of digestive disorders has increased globally, as countries have adopted a more "Westernized" diet pattern. A Western diet, characterized as high in fat and refined carbohydrates, can also be defined as a product of increased technology and industrialization. Modern farmers rely on agrochemicals to meet the needs of a growing population, and these chemicals have shifted the Western diet's chemical composition. While the number of individuals choosing to live a wheat-free lifestyle without a celiac disease diagnosis has increased, clinical trials have shown that gluten from wheat is not responsible for causing symptoms in healthy individuals suggesting that something else is inducing symptoms. The herbicide, glyphosate, is applied to wheat crops before harvest to encourage ripening resulting in higher glyphosate residues in commercial wheat products within North America. Glyphosate inhibits the shikimate pathway, a pathway exclusive to plants and bacteria. Glyphosate's effect on dysbiosis was not considered when making safety recommendations. Here, we evaluate the literature surrounding glyphosate's effects on the gut microbiome and conclude that glyphosate residues on food could cause dysbiosis, given that opportunistic pathogens are more resistant to glyphosate compared to commensal bacteria. However, research on glyphosate's effects on the microbiome suffers from numerous methodological weaknesses, and these limitations make it impossible to draw any definitive conclusions regarding glyphosate's influence on health through alterations in the gut microbiome. In this review, we critically evaluate the evidence currently known and discuss recommendations for future studies.© Copyright © 2020 Barnett and Gibson.

KW - Actinomyces

KW - anxiety

KW - Bacteroidetes

KW - carbohydrate metabolism

KW - celiac disease

KW - chemical composition

KW - Clostridiaceae

KW - colon cancer

KW - colorectal cancer

KW - crop

KW - depression

KW - desiccation

KW - \*dysbiosis

KW - environmental factor

KW - Escherichia coli

KW - Firmicutes

KW - Fusobacteria

KW - gastrointestinal disease

KW - genotype

KW - heredity

KW - human

KW - industrialization

KW - inflammatory bowel disease

KW - intestine flora

KW - Lachnospiraceae

KW - Lactobacillus

KW - microbial community

KW - microbial diversity

KW - microbiome

KW - nonhuman

KW - obesity

KW - oxidative stress

KW - prevalence

KW - Prevotella

KW - Proteobacteria

KW - review

KW - risk factor

KW - Staphylococcus aureus

KW - Streptococcus pneumonia

KW - Western diet

KW - \*wheat

KW - \*wheat allergy

KW - \*glyphosate

KW - herbicide

JF - Frontiers in Microbiology

JA - Front. Microbiol.

LA - English

VL - 11

SP - 556729

CY - Switzerland

PB - Frontiers Media S.A.

SN - 1664-302X (electronic)

SN - 1664-302X

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UR - https://www.frontiersin.org/journals/microbiology#

DO - https://dx.doi.org/10.3389/fmicb.2020.556729

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=633057010

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3389%2ffmicb.2020.556729Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Barnett&issn=1664-302X&title=Frontiers+in+Microbiology&atitle=Separating+the+Empirical+Wheat+From+the+Pseudoscientific+Chaff%3A+A+Critical+Review+of+the+Literature+Surrounding+Glyphosate%2C+Dysbiosis+and+Wheat-Sensitivity&volume=11&issue=&spage=556729&epage=&date=2020&doi=10.3389%2Ffmicb.2020.556729&pmid=&sid=OVID:embase

195.

TY - JOUR

DB - Embase

AN - 2005174534

T1 - Targeting the hindgut to improve health and performance in cattle

A1 - Sanz-Fernandez M.V.

A1 - Daniel J.-B.

A1 - Seymour D.J.

A1 - Kvidera S.K.

A1 - Bester Z.

A1 - Doelman J.

A1 - Martin-Tereso J.

Y1 - 2020//

N2 - An adequate gastrointestinal barrier function is essential to preserve animal health and well-being. Suboptimal gut health results in the translocation of contents from the gastrointestinal lumen across the epithelium, inducing local and systemic inflammatory responses. Inflammation is characterized by high energetic and nutrient requirements, which diverts resources away from production. Further, barrier function defects and inflammation have been both associated with several metabolic diseases in dairy cattle and liver abscesses in feedlots. The gastrointestinal tract is sensitive to several factors intrinsic to the productive cycles of dairy and beef cattle. Among them, high grain diets, commonly fed to support lactation and growth, are potentially detrimental for rumen health due to their increased fermentability, representing the main risk factor for the development of acidosis. Furthermore, the increase in dietary starch associated with such rations frequently results in an increase in the bypass fraction reaching distal sections of the intestine. The effects of high grain diets in the hindgut are comparable to those in the rumen and, thus, hindgut acidosis likely plays a role in grain overload syndrome. However, the relative contribution of the hindgut to this syndrome remains unknown. Nutritional strategies designed to support hindgut health might represent an opportunity to sustain health and performance in bovines.Copyright © 2020 by the authors. Licensee MDPI, Basel, Switzerland.

KW - acidosis

KW - adaptive immunity

KW - aerobic glycolysis

KW - animal welfare

KW - apoptosis

KW - Bifidobacterium

KW - bovine

KW - cell infiltration

KW - Clostridium

KW - dairy cattle

KW - depression

KW - diarrhea

KW - diet supplementation

KW - duodenum

KW - dysbiosis

KW - endotoxemia

KW - energy expenditure

KW - Enterococcus faecium

KW - feces microflora

KW - fermentation

KW - food intake

KW - gastrointestinal tract

KW - glucose intake

KW - glucose transport

KW - glycolysis

KW - \*hindgut

KW - histology

KW - immune response

KW - inflammation

KW - inflammatory bowel disease

KW - intestine flora

KW - lactation

KW - Lactobacillus

KW - laminitis

KW - lipid metabolism

KW - liver abscess

KW - Megasphaera elsdenii

KW - metabolic disorder

KW - microbial community

KW - milk production

KW - mortality

KW - nonhuman

KW - oxidative phosphorylation

KW - parenteral nutrition

KW - parturient paresis

KW - pregnancy toxemia

KW - prevalence

KW - Propionibacterium acnes

KW - review

KW - risk factor

KW - ruminant

KW - upregulation

KW - acetic acid

KW - alkaline phosphatase

KW - amoxicillin

KW - fructose oligosaccharide

KW - glibenclamide

KW - gluconate calcium

KW - glucose

KW - inulin

KW - lactic acid

KW - lactulose

KW - lipopolysaccharide

KW - macrolide

KW - milk fat

KW - oligosaccharide

KW - prebiotic agent

KW - probiotic agent

KW - short chain fatty acid

KW - starch

KW - tylosin

KW - virulence factor

KW - volatile fatty acid

KW - grain overload syndrome

JF - Animals

JA - Animals

LA - English

VL - 10

IS - 10

SP - 1

EP - 18

CY - Switzerland

PB - MDPI AG

SN - 2076-2615 (electronic)

SN - 2076-2615

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DO - https://dx.doi.org/10.3390/ani10101817

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005174534

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3390%2fani10101817Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sanz-Fernandez&issn=2076-2615&title=Animals&atitle=Targeting+the+hindgut+to+improve+health+and+performance+in+cattle&volume=10&issue=10&spage=1&epage=18&date=2020&doi=10.3390%2Fani10101817&pmid=&sid=OVID:embase

196.

TY - JOUR

DB - Embase

AN - 2004911745

ID - 32824536 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32824536]

T1 - The intestinal barrier and current techniques for the assessment of gut permeability

A1 - Schoultz I.

A1 - Keita A.V.

Y1 - 2020//

N2 - The intestinal barrier is essential in human health and constitutes the interface between the outside and the internal milieu of the body. A functional intestinal barrier allows absorption of nutrients and fluids but simultaneously prevents harmful substances like toxins and bacteria from crossing the intestinal epithelium and reaching the body. An altered intestinal permeability, a sign of a perturbed barrier function, has during the last decade been associated with several chronic conditions, including diseases originating in the gastrointestinal tract but also diseases such as Alzheimer and Parkinson disease. This has led to an intensified interest from researchers with diverse backgrounds to perform functional studies of the intestinal barrier in different conditions. Intestinal permeability is defined as the passage of a solute through a simple membrane and can be measured by recording the passage of permeability markers over the epithelium via the paracellular or the transcellular route. The methodological tools to investigate the gut barrier function are rapidly expanding and new methodological approaches are being developed. Here we outline and discuss, in vivo, in vitro and ex vivo techniques and how these methods can be utilized for thorough investigation of the intestinal barrier.Copyright © 2020 by the authors. Licensee MDPI, Basel, Switzerland.

KW - actin polymerization

KW - Alzheimer disease

KW - apoptosis

KW - autism

KW - bacterial translocation

KW - Caco-2 cell line

KW - celiac disease

KW - cell differentiation

KW - Clostridioides difficile

KW - colon adenocarcinoma

KW - colorectal carcinoma

KW - cystic fibrosis

KW - depression

KW - drug transport

KW - dysbiosis

KW - endocytosis

KW - endothelium cell

KW - endotoxemia

KW - enteropathogenic Escherichia coli

KW - enzyme linked immunosorbent assay

KW - epithelium cell

KW - Escherichia coli

KW - exocytosis

KW - Faecalibacterium

KW - flow cytometry

KW - fluorometry

KW - food intake

KW - gap junction

KW - gastrointestinal tract

KW - HT-29 cell line

KW - immune response

KW - immunocompetent cell

KW - inflammatory bowel disease

KW - innate immunity

KW - \*intestine

KW - intestine flora

KW - intestine innervation

KW - irritable colon

KW - lamina propria

KW - lipid diet

KW - lung metastasis

KW - major depression

KW - Mycobacterium tuberculosis

KW - myofibroblast

KW - necrotizing enterocolitis

KW - non insulin dependent diabetes mellitus

KW - obesity

KW - Parkinson disease

KW - review

KW - rheumatoid arthritis

KW - Salmonella enterica serovar Typhimurium

KW - septic shock

KW - symbiosis

KW - T84 cell line

KW - tight junction

KW - transcytosis

KW - transepithelial resistance

KW - bacteriocin

KW - citrulline

KW - colchicine

KW - cytochalasin D

KW - fatty acid binding protein

KW - gamma interferon

KW - glucagon like peptide 2

KW - horseradish peroxidase

KW - inulin

KW - lactulose

KW - macrogol

KW - methotrexate

KW - prebiotic agent

KW - \*gut permeability

KW - \*intestinal barrier

JF - Cells

JA - Cells

LA - English

VL - 9

IS - 8

SP - 1

EP - 31

CY - Switzerland

PB - MDPI AG

SN - 2073-4409 (electronic)

SN - 2073-4409

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UR - https://www.mdpi.com/2073-4409/9/8/1909/pdf

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PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004911745

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3390%2fcells9081909Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Schoultz&issn=2073-4409&title=Cells&atitle=The+intestinal+barrier+and+current+techniques+for+the+assessment+of+gut+permeability&volume=9&issue=8&spage=1&epage=31&date=2020&doi=10.3390%2Fcells9081909&pmid=32824536&sid=OVID:embase

197.

TY - JOUR

DB - Embase

AN - 2005816953

T1 - Biological effects of tumor necrosis factor alpha (TNF-alpha) in systemic inflammation. running title: TNF-alpha for systemic inflammation

A1 - Masriadi

A1 - Idrus H.H.

A1 - Sukmawati

Y1 - 2020//

N2 - Aim. The purpose of this article review is to investigate the biological effects of TNF-alpha in systemic inflammation at moderate levels. TNF-alpha is a product of macrophages, one of the body's defence systems that is active in the presence of a bacterial infection. Background. TNF-alpha plays a role in host defence for bacterial, viral and parasitic infections. TNF-alpha is produced by macrophages and is activated by T cell lymphocytes, antigens, NK cells, and mast cells. TNF-alpha is usually not detected in healthy individuals but is often found in conditions of inflammation and infection in the serum. TNF-alpha works against leukocytes and endothelium, induces acute inflammation at low levels because TNF-alpha is a strong pyrogen. TNF-alpha plays a role in systemic inflammation at moderate levels. TNF-alpha causes pathological abnormalities in high levels of septic shock, because TNF-alpha is cytotoxic. Riview Results. In the review of this article we get results about the biological effects of TNF-alpha on systemic inflammation at moderate levels and their role in the humoral and cellular immune systems. Conclusion. TNF-alpha has a biological effect on systemic inflammation at moderate levels and has a strong role in the humoral and cellular immune systems.Copyright © 2020, Institute of Medico-Legal Publications. All rights reserved.

KW - acute lung injury

KW - adaptive immunity

KW - Aloe vera

KW - antibody response

KW - antigen presenting cell

KW - apoptosis

KW - article

KW - bacterial infection

KW - \*biological activity

KW - breast cancer

KW - cancer growth

KW - carcinogenesis

KW - cell proliferation

KW - cellular immunity

KW - complement activation

KW - cytokine production

KW - dendritic cell

KW - depression

KW - endothelium

KW - exosome

KW - flow cytometry

KW - gallbladder cancer

KW - glucose blood level

KW - heart muscle contractility

KW - host resistance

KW - human

KW - humoral immunity

KW - \*immune response

KW - \*immune system

KW - \*inflammation

KW - intestine flora

KW - lipid metabolism

KW - macrophage

KW - major depression

KW - mast cell

KW - microbiome

KW - mononuclear phagocyte

KW - multiple sclerosis

KW - natural killer cell

KW - neurotoxicity

KW - neutrophil

KW - nonhuman

KW - phagocytosis

KW - protein function

KW - regulatory T lymphocyte

KW - reperfusion injury

KW - septic shock

KW - T lymphocyte

KW - virus infection

KW - caspase 9

KW - haptoglobin

KW - high mobility group B1 protein

KW - integrin

KW - intercellular adhesion molecule 1

KW - interleukin 2

KW - interleukin 23

KW - interleukin 6

KW - lymphocyte antigen

KW - nitric oxide

KW - pathogen associated molecular pattern

KW - pyrogen

KW - serum globulin

KW - short chain fatty acid

KW - toll like receptor

KW - toll like receptor 4

KW - \*tumor necrosis factor/ec [Endogenous Compound]

KW - von Willebrand factor

JF - Indian Journal of Forensic Medicine and Toxicology

JA - Indian J. Forensic Med. Toxicol.

LA - English

VL - 14

IS - 4

SP - 4361

EP - 4367

CY - India

PB - Institute of Medico-Legal Publications

SN - 0973-9122

SN - 0973-9130

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UR - http://www.ijfmt.com/issues.html

DO - https://dx.doi.org/10.37506/ijfmt.v14i4.12325

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005816953

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.37506%2fijfmt.v14i4.12325Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Idrus&issn=0973-9122&title=Indian+Journal+of+Forensic+Medicine+and+Toxicology&atitle=Biological+effects+of+tumor+necrosis+factor+alpha+%28TNF-alpha%29+in+systemic+inflammation.+running+title%3A+TNF-alpha+for+systemic+inflammation&volume=14&issue=4&spage=4361&epage=4367&date=2020&doi=10.37506%2Fijfmt.v14i4.12325&pmid=&sid=OVID:embase

198.

TY - JOUR

DB - Embase

AN - 2005738416

T1 - South African society of clinical microbiology clostridioides difficile infection diagnosis, management and infection prevention and control guideline

A1 - Nana T.

A1 - Moore C.

A1 - Boyles T.

A1 - Brink A.J.

A1 - Cleghorn J.

A1 - Devenish L.M.

A1 - Toit B.D.

A1 - Fredericks E.S.

A1 - Lekalakala-Mokaba M.R.

A1 - Maluleka C.

A1 - Rajabally M.N.

A1 - Reubenson G.

A1 - Shuping L.

A1 - Swart K.

A1 - Han K.S.S.

A1 - Wadula J.

A1 - Wojno J.

A1 - Lowman W.

Y1 - 2020//

N2 - Clostridioides difficile infection (CDI) is a problem in both developed and developing countries and is a common hospital-acquired infection. This guideline provides evidence-based practical recommendations for South Africa and other developing countries. The scope of the guideline includes CDI diagnostic approaches; adult, paediatric and special populations treatment options; and surveillance and infection prevention and control recommendations.Copyright © 2020. The Authors. Licensee: AOSIS.

KW - adult

KW - article

KW - bone marrow transplantation

KW - child

KW - chronic kidney failure

KW - chronic obstructive lung disease

KW - Clostridioides

KW - Clostridioides difficile

KW - \*Clostridium difficile infection/di [Diagnosis]

KW - \*Clostridium difficile infection/ep [Epidemiology]

KW - \*Clostridium difficile infection/et [Etiology]

KW - \*Clostridium difficile infection/pc [Prevention]

KW - colon resection

KW - cytotoxicity

KW - cytotoxicity assay

KW - developing country

KW - diagnostic accuracy

KW - disease severity

KW - disease surveillance

KW - dysbiosis

KW - enzyme immunoassay

KW - fecal microbiota transplantation

KW - feces analysis

KW - feces microflora

KW - health care facility

KW - health care utilization

KW - heart failure

KW - hemodialysis

KW - Hirschsprung disease

KW - histopathology

KW - hospital cost

KW - hospitalization

KW - human

KW - Human immunodeficiency virus infection

KW - hypotension

KW - immune response

KW - \*infection control

KW - infection prevention

KW - inflammatory bowel disease

KW - intensive care unit

KW - intestinal dysmotility

KW - intestine flora

KW - length of stay

KW - leukocyte count

KW - limit of detection

KW - mental disease

KW - methicillin resistant Staphylococcus aureus

KW - microbiology

KW - neurotoxicity

KW - nonhuman

KW - nucleic acid amplification

KW - phase 3 clinical trial (topic)

KW - \*practice guideline

KW - predictive value

KW - \*prevalence

KW - prospective study

KW - pseudomembranous colitis

KW - quality of life

KW - real time polymerase chain reaction

KW - risk assessment

KW - risk factor

KW - South Africa

KW - Staphylococcus aureus

KW - T lymphocyte

KW - ulcerative colitis

KW - vaccination

KW - 25 hydroxyvitamin D

KW - amoxicillin

KW - azathioprine

KW - bezlotoxumab

KW - cholera vaccine

KW - clindamycin

KW - creatinine

KW - fidaxomicin

KW - glutamate dehydrogenase

KW - metronidazole

KW - peracetic acid

KW - probiotic agent

KW - proton pump inhibitor

KW - tigecycline

KW - vancomycin

KW - voriconazole

JF - Southern African Journal of Infectious Diseases

JA - South. Afr. J. Infect. Dis.

LA - English

VL - 35

IS - 1

SP - 1

EP - 26

CY - United Kingdom

PB - AOSIS OpenJournals Publishing AOSIS (Pty) Ltd

SN - 2312-0053

SN - 2313-1810

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UR - https://sajid.co.za/index.php/sajid/article/view/219/394

DO - https://dx.doi.org/10.4102/sajid.v35i1.219

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005738416

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.4102%2fsajid.v35i1.219Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Nana&issn=2312-0053&title=Southern+African+Journal+of+Infectious+Diseases&atitle=South+African+society+of+clinical+microbiology+clostridioides+difficile+infection+diagnosis%2C+management+and+infection+prevention+and+control+guideline&volume=35&issue=1&spage=1&epage=26&date=2020&doi=10.4102%2Fsajid.v35i1.219&pmid=&sid=OVID:embase

199.

TY - JOUR

DB - Embase

AN - 633443787

ID - 33197883 [https://www.ncbi.nlm.nih.gov/pubmed/?term=33197883]

T1 - Red light exaggerated sepsis-induced learning impairments and anxiety-like behaviors

A1 - Xie B.

A1 - Zhang Y.

A1 - Qi H.

A1 - Yao H.

A1 - Shang Y.

A1 - Yuan S.

A1 - Zhang J.

Y1 - 2020//

N2 - Light exerts critical non-visual effects on a multitude of physiological processes and behaviors, including sleep-wake behavior and cognitive function. In this study, we investigated the effects of continued exposure to different colors of light on cognitive function after sepsis in old mice. We found that exposure to red light, but not green light, exaggerated learning impairments and anxiety-like behaviors after sepsis. Red light also induced remarkable splenomegaly and altered the diversity and composition of the fecal microbiota. Pseudo germ-free mice transplanted with fecal bacteria from septic mice exposed to red light developed the same behavioral defects and splenomegaly as their donors. Intriguingly, splenectomy and subdiaphragmatic vagotomy reversed the learning impairments and anxiety-like behaviors resulting from red light exposure after sepsis. After subdiaphragmatic vagotomy, no differences in behavior or spleen size were observed among pseudo germ-free mice transplanted with fecal bacteria from septic mice exposed to different colors of light. Our results suggested that red light exposure after sepsis in old mice causes gut microbiota dysfunction, thus stimulating signaling through the subdiaphragmatic vagus nerve that induces splenomegaly and aggravates learning impairments and anxiety-like behaviors.

KW - age

KW - animal

KW - \*animal behavior

KW - anxiety

KW - C57BL mouse

KW - comparative study

KW - complication

KW - disease model

KW - dysbiosis

KW - feces

KW - intestine

KW - intestine flora

KW - learning disorder/et [Etiology]

KW - \*light

KW - male

KW - \*maze test

KW - microbiology

KW - open field test

KW - pathophysiology

KW - psychology

KW - sepsis

KW - splenomegaly/et [Etiology]

KW - vagus nerve

JF - Aging

JA - Aging (Albany NY)

LA - English

VL - 12

IS - 23

SP - 23739

EP - 23760

CY - United States

PB - NLM (Medline)

SN - 1945-4589 (electronic)

SN - 1945-4589

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DO - https://dx.doi.org/10.18632/aging.103940

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=633443787

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.18632%2faging.103940Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Xie&issn=1945-4589&title=Aging&atitle=Red+light+exaggerated+sepsis-induced+learning+impairments+and+anxiety-like+behaviors&volume=12&issue=23&spage=23739&epage=23760&date=2020&doi=10.18632%2Faging.103940&pmid=33197883&sid=OVID:embase

200.

TY - JOUR

DB - Embase

AN - 632752380

ID - 32973771 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32973771]

T1 - Critical Neurotransmitters in the Neuroimmune Network

A1 - Hodo T.W.

A1 - de Aquino M.T.P.

A1 - Shimamoto A.

A1 - Shanker A.

Y1 - 2020//

N2 - Immune cells rely on cell-cell communication to specify and fine-tune their responses. They express an extensive network of cell communication modes, including a vast repertoire of cell surface and transmembrane receptors and ligands, membrane vesicles, junctions, ligand and voltage-gated ion channels, and transporters. During a crosstalk between the nervous system and the immune system these modes of cellular communication and the downstream signal transduction events are influenced by neurotransmitters present in the local tissue environments in an autocrine or paracrine fashion. Neurotransmitters thus influence innate and adaptive immune responses. In addition, immune cells send signals to the brain through cytokines, and are present in the brain to influence neural responses. Altered communication between the nervous and immune systems is emerging as a common feature in neurodegenerative and immunopathological diseases. Here, we present the mechanistic frameworks of immunostimulatory and immunosuppressive effects critical neurotransmitters - dopamine (3,4-dihydroxyphenethylamine), serotonin (5-hydroxytryptamine), substance P (trifluoroacetate salt powder), and L-glutamate - exert on lymphocytes and non-lymphoid immune cells. Furthermore, we discuss the possible roles neurotransmitter-driven neuroimmune networks play in the pathogenesis of neurodegenerative disorders, autoimmune diseases, cancer, and outline potential clinical implications of balancing neuroimmune crosstalk by therapeutic modulation.© Copyright © 2020 Hodo, de Aquino, Shimamoto and Shanker.

KW - adaptive immunity

KW - adoptive transfer

KW - adrenergic nerve

KW - angiogenesis

KW - antigen presenting cell

KW - astrocyte

KW - brain development

KW - bronchoconstriction

KW - calcium signaling

KW - CD4+ T lymphocyte

KW - CD8+ T lymphocyte

KW - cell communication

KW - cell infiltration

KW - cell migration

KW - central nervous system

KW - choroid plexus

KW - cytokine production

KW - delayed hypersensitivity

KW - \*demyelinating disease

KW - dendritic cell

KW - depression

KW - disease severity

KW - eosinophilia

KW - gene expression

KW - human

KW - hyperalgesia

KW - hypothermia

KW - hypoxemia

KW - \*immune response

KW - immunosuppressive treatment

KW - intestine flora

KW - lamina propria

KW - medial prefrontal cortex

KW - melanoma

KW - mental stress

KW - mesenchymal stem cell

KW - microglia

KW - natural killer cell

KW - nerve cell plasticity

KW - oxidative stress

KW - quorum sensing

KW - regulatory T lymphocyte

KW - review

KW - rheumatoid arthritis

KW - schizophrenia

KW - seizure

KW - septic shock

KW - thrombocyte activation

KW - tumor associated leukocyte

KW - tumor growth

KW - tumor microenvironment

KW - upregulation

KW - bromocriptine

KW - CD40 ligand/ec [Endogenous Compound]

KW - corticosteroid

KW - dopamine

KW - epinephrine

KW - glutamic acid

KW - inflammasome

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 23/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - ketanserin

KW - moclobemide

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - myelin basic protein/ec [Endogenous Compound]

KW - \*neurotransmitter

KW - noradrenalin

KW - stromal cell derived factor 1/ec [Endogenous Compound]

KW - substance P/ec [Endogenous Compound]

KW - toll like receptor 4/ec [Endogenous Compound]

KW - transcription factor AP 1/ec [Endogenous Compound]

KW - tyrosine 3 monooxygenase/ec [Endogenous Compound]

KW - venlafaxine

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 11

SP - 1869

CY - Switzerland

PB - Frontiers Media S.A. (c/o Michael Kenyon, ch. de la Pecholettaz 6, Epalinges 1066, Switzerland. E-mail: info@frontiersin.org)

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2020.01869

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=632752380

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3389%2ffimmu.2020.01869Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Hodo&issn=1664-3224&title=Frontiers+in+Immunology&atitle=Critical+Neurotransmitters+in+the+Neuroimmune+Network&volume=11&issue=&spage=1869&epage=&date=2020&doi=10.3389%2Ffimmu.2020.01869&pmid=32973771&sid=OVID:embase

201.

TY - JOUR

DB - Embase

AN - 2004300307

ID - 32056780 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32056780]

T1 - The gut microbiota is associated with psychiatric symptom severity and treatment outcome among individuals with serious mental illness

A1 - Madan A.

A1 - Thompson D.

A1 - Fowler J.C.

A1 - Ajami N.J.

A1 - Salas R.

A1 - Frueh B.C.

A1 - Bradshaw M.R.

A1 - Weinstein B.L.

A1 - Oldham J.M.

A1 - Petrosino J.F.

Y1 - 2020//

N2 - Background: Emerging evidence implicates the gut microbiota in central nervous system functioning via its effects on inflammation, the hypothalamic-pituitary axis, and/or neurotransmission. Our understanding of the cellular underpinnings of the brain-gut relationship is based almost exclusively on animal models with some small-scale human studies. This study examined the relationship between the gut microbiota and psychiatric symptom severity and treatment response among inpatients with serious mental illness. Method(s): We collected data from adult inpatients (N = 111). Measures of diagnoses, suicide severity, trauma, depression, and anxiety were collected shortly after admission, while self-collected fecal swabs were collected early in the course of hospitalization and processed using 16S rRNA gene sequencing and whole genome shotgun sequencing methods. Result(s): Results indicate that depression and anxiety severity shortly after admission were negatively associated with bacterial richness and alpha diversity. Additional analyses revealed a number of bacterial taxa associated with depression and anxiety severity. Gut microbiota richness and alpha diversity early in the course of hospitalization was a significant predictor of depression remission at discharge. Conclusion(s): This study is among the first to demonstrate a gut microbiota relationship with symptom severity among psychiatric inpatients as well as a relationship to remission of depression post-treatment. These findings are consistent with animal models and limited human studies as well as with the broader literature implicating inflammation in the pathophysiology of depression. These findings offer the foundation for further studies of novel therapeutic approaches to the treatment, prevention of, or recurrence of serious mental illness.Copyright © 2019 Elsevier B.V.

KW - adult

KW - anxiety

KW - article

KW - Caucasian

KW - depression

KW - female

KW - gastrointestinal disease

KW - hospital patient

KW - hospitalization

KW - human

KW - injury

KW - \*intestine flora

KW - length of stay

KW - major clinical study

KW - male

KW - \*mental disease

KW - mental health care

KW - microbial community

KW - priority journal

KW - remission

KW - suicide

KW - \*treatment outcome

KW - treatment response

KW - biological marker/ec [Endogenous Compound]

KW - RNA 16S/ec [Endogenous Compound]

JF - Journal of Affective Disorders

JA - J. Affective Disord.

LA - English

VL - 264

SP - 98

EP - 106

CY - Netherlands

PB - Elsevier B.V.

SN - 0165-0327

SN - 1573-2517

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UR - https://www.elsevier.com/locate/jad

DO - https://dx.doi.org/10.1016/j.jad.2019.12.020

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004300307

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.jad.2019.12.020Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Madan&issn=0165-0327&title=Journal+of+Affective+Disorders&atitle=The+gut+microbiota+is+associated+with+psychiatric+symptom+severity+and+treatment+outcome+among+individuals+with+serious+mental+illness&volume=264&issue=&spage=98&epage=106&date=2020&doi=10.1016%2Fj.jad.2019.12.020&pmid=32056780&sid=OVID:embase

202.

TY - JOUR

DB - Embase

AN - 2008495897

T1 - Systematic and Symptomatic Review for Parkinson's Disease

A1 - Majhi V.

A1 - Paul S.

A1 - Saha G.

Y1 - 2020//

N2 - After two hundred years of the Shaking Palsy by Dr. James Parkinson, we have revealed many factors and causes behind Parkinson's disease (PD). Before Shaking Palsy the symptoms were known as some disorders. 5000 years ago in Ayurveda, the Indian medical manuscript and 2500 years ago in Nei Ping, the first Chinese medical manuscript some disorders were mentioned those are similar to PD and also several treatment procedures were also described. This proves that PD is not a disease that evolved only in modern industrial age. But it is true that, after Shaking Palsy, this PD comes into spotlight of the modern medical practices. To understand this disease we need to go through the complete etiology of PD including Genetical and Environmental factor that may lead us to the different causative factors of PD. Each factor has its unique signification and outburst as a multiple combination of different Parkinsonian symptoms. In this review we will discuss about all possible etiological factors related to PD with different Parkinsonian symptoms categorized with motor and non-motor symptoms. Before going to the brief review, we will also discuss about several milestone researches which actually open a new window in PD research on its time.Copyright Published by Oriental Scientific Publishing Company © 2020

KW - African trypanosomiasis

KW - Alphavirus infection

KW - article

KW - bloating

KW - blood brain barrier

KW - cognitive defect

KW - color discrimination

KW - computer assisted tomography

KW - contrast sensitivity

KW - degenerative disease

KW - diffusion tensor imaging

KW - electroencephalography

KW - erectile dysfunction

KW - gene mutation

KW - gene sequence

KW - genetic risk

KW - Graves disease

KW - human

KW - intestine flora

KW - intestine innervation

KW - mental disease

KW - meta analysis

KW - motoneuron

KW - muscle rigidity

KW - Mycoplasma pneumonia

KW - nerve cell plasticity

KW - nuclear magnetic resonance imaging

KW - oxidative stress

KW - \*Parkinson disease

KW - photosynthesis

KW - premature ejaculation

KW - quality of life

KW - REM sleep

KW - risk factor

KW - sequence analysis

KW - single photon emission computed tomography

KW - systematic review

KW - Toxoplasma gondii

KW - Unified Parkinson Disease Rating Scale

KW - upregulation

KW - (3 iodobenzyl)guanidine

KW - alpha synuclein

KW - camphor

KW - dopamine

KW - glutathione

KW - levodopa

KW - mitochondrial DNA

KW - paraquat

KW - uric acid

JF - Biomedical and Pharmacology Journal

JA - Biomed. Pharmacol. J.

LA - English

VL - 13

IS - 3

SP - 1367

EP - 1380

CY - India

PB - Oriental Scientific Publishing Company

SN - 0974-6242

SN - 2456-2610

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UR - https://biomedpharmajournal.org/vol13no3/systematic-and-symptomatic-review-for-parkinsons-disease/

DO - https://dx.doi.org/10.13005/bpj/2006

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2008495897

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.13005%2fbpj%2f2006Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Majhi&issn=0974-6242&title=Biomedical+and+Pharmacology+Journal&atitle=Systematic+and+Symptomatic+Review+for+Parkinson%27s+Disease&volume=13&issue=3&spage=1367&epage=1380&date=2020&doi=10.13005%2Fbpj%2F2006&pmid=&sid=OVID:embase

203.

TY - JOUR

DB - Embase

AN - 2005425374

ID - 31642785 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31642785]

T1 - Pediatric acute-onset neuropsychiatric syndrome and mycoplasma pneu-moniae infection: A case report analysis with a metabolomics approach

A1 - Piras C.

A1 - Pintus R.

A1 - Pruna D.

A1 - Dessi A.

A1 - Atzori L.

A1 - Fanos V.

Y1 - 2020//

N2 - Pediatric Acute-onset Neuropsychiatric Syndrome (PANS) is a clinical condition characterized by a sudden and dramatic obsessive-compulsive disorder with a suggested post-infectious immune-mediated etiology. This condition is accompanied by an extensive series of relatively seri-ous neuropsychiatric symptoms. The diagnosis of PANS is made by "exclusion", as the individual PANS symptoms overlap with a multiplicity of psychiatric disorders with the onset in childhood. A number of researchers accumulated evidence to support the hypothesis that PANS was closely associated with a number of infections. In the last decade, metabolomics played an essential role in improving the knowledge of complex biological systems and identifying potential new biomarkers as indicators of pathological progres-sions or pharmacologic responses to therapy. The metabolome is considered the most predictive phenotype, capable of recognizing epigenetic differences, reflecting more closely the clinical reality at any given moment and thus providing extremely dynamic data. In the present work, the most recent hypothesis and suggested mechanisms of this condition are reviewed and the case of a 10-year-old girl with PANS is described, before and after clarithromycin treatment. The main results of this case report are discussed from a metabolomics point of view. The alteration of several metabolic pathways concerning the microbial activity highlights the possible role of the microbiome in the development of PANS. Furthermore, different metabolic perturbations at the level of protein biosynthesis, energy and amino acid metabolisms are observed and discussed. Based on our obser-vations, it is believed that metabolomics is a promising technology to unravel the mysteries of PANS in the near future.Copyright © 2020 Bentham Science Publishers.

KW - aggressiveness

KW - amino acid metabolism

KW - auditory hallucination

KW - behavior disorder

KW - body weight gain

KW - case report

KW - child

KW - clinical article

KW - depression

KW - drug substitution

KW - drug therapy

KW - energy metabolism

KW - female

KW - gastritis

KW - Gilles de la Tourette syndrome

KW - human

KW - \*mental disease

KW - metabolomics

KW - microbiome

KW - motor dysfunction

KW - \*Mycoplasma pneumonia

KW - obsessive compulsive disorder

KW - priority journal

KW - protein synthesis

KW - proton nuclear magnetic resonance

KW - psychosis

KW - review

KW - school child

KW - Streptococcus infection

KW - tic

KW - urinalysis

KW - vomiting

KW - amoxicillin/pv [Special Situation for Pharmacovigilance]

KW - benzathine penicillin/pv [Special Situation for Pharmacovigilance]

KW - clarithromycin/pv [Special Situation for Pharmacovigilance]

KW - clavulanic acid/pv [Special Situation for Pharmacovigilance]

KW - ibuprofen/pv [Special Situation for Pharmacovigilance]

KW - \*pediatric acute onset neuropsychiatric syndrome

XT - amoxicillin / special situation for pharmacovigilance / pediatric patient

XT - benzathine penicillin / special situation for pharmacovigilance / pediatric patient

XT - clarithromycin / special situation for pharmacovigilance / pediatric patient

XT - clavulanic acid / special situation for pharmacovigilance / pediatric patient

XT - ibuprofen / special situation for pharmacovigilance / pediatric patient

JF - Current Pediatric Reviews

JA - Curr. Pediatr. Rev.

LA - English

VL - 16

IS - 3

SP - 183

EP - 193

CY - United Arab Emirates

PB - Bentham Science Publishers

SN - 1573-3963

SN - 1875-6336

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UR - https://www.eurekaselect.com/175999/article

DO - https://dx.doi.org/10.2174/1573396315666191022102925

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005425374

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.2174%2f1573396315666191022102925Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Piras&issn=1573-3963&title=Current+Pediatric+Reviews&atitle=Pediatric+acute-onset+neuropsychiatric+syndrome+and+mycoplasma+pneu-moniae+infection%3A+A+case+report+analysis+with+a+metabolomics+approach&volume=16&issue=3&spage=183&epage=193&date=2020&doi=10.2174%2F1573396315666191022102925&pmid=31642785&sid=OVID:embase

204.

TY - JOUR

DB - Embase

AN - 2005146163

T1 - Reviews of medical journal articles

A1 - McLean W.

Y1 - 2020//

KW - article

KW - constipation/dt [Drug Therapy]

KW - Crohn disease

KW - depression

KW - diet supplementation

KW - dyspepsia/dt [Drug Therapy]

KW - human

KW - hypothyroidism

KW - immune response

KW - intestine flora

KW - lifestyle modification

KW - linseed

KW - low risk patient

KW - major depression

KW - \*medical literature

KW - Mediterranean diet

KW - meta analysis (topic)

KW - metabolic regulation

KW - migraine/dt [Drug Therapy]

KW - onset age

KW - ovary polycystic disease

KW - oxidative stress

KW - pediatrics

KW - pneumonia

KW - randomized controlled trial (topic)

KW - risk assessment

KW - risk factor

KW - systematic review (topic)

KW - young adult

KW - ascorbic acid

KW - palmidrol/dt [Drug Therapy]

KW - palmidrol/pv [Special Situation for Pharmacovigilance]

KW - prebiotic agent/dt [Drug Therapy]

KW - probiotic agent/dt [Drug Therapy]

KW - synbiotic agent/dt [Drug Therapy]

XT - constipation / drug therapy / synbiotic agent

XT - dyspepsia / drug therapy / prebiotic agent

XT - dyspepsia / drug therapy / probiotic agent

XT - migraine / drug therapy / palmidrol

XT - palmidrol / drug therapy / migraine

XT - palmidrol / special situation for pharmacovigilance / pediatric patient

XT - prebiotic agent / drug therapy / dyspepsia

XT - probiotic agent / drug therapy / dyspepsia

XT - synbiotic agent / drug therapy / constipation

JF - Australian Journal of Herbal and Naturopathic Medicine

JA - Aust. J. Herbal and Naturopath. Med.

LA - English

VL - 32

IS - 2

SP - 65

EP - 69

CY - Australia

PB - Naturopaths and Herbalists Association of Australia

SN - 2209-119X

SN - 2209-1203

UR - https://www.nhaa.org.au/publications/australian-journal-of-herbal-medicine

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005146163

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&AN=2005146163Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=McLean&issn=2209-119X&title=Australian+Journal+of+Herbal+and+Naturopathic+Medicine&atitle=Reviews+of+medical+journal+articles&volume=32&issue=2&spage=65&epage=69&date=2020&doi=&pmid=&sid=OVID:embase

205.

TY - JOUR

DB - Embase

AN - 2007841699

ID - 32943305 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32943305]

T1 - Evaluating Mineral Status in Ruminant Livestock

A1 - Ensley S.

Y1 - 2020//

N2 - Determining mineral status of production animals is important when developing an optimum health program. Nutrition is the largest expense in food animal production and has the greatest impact on health and productivity of the animals. Knowing the bioavailability of minerals in the diet is difficult. Evaluating fluid or tissues from animals is the optimum method to determine bioavailability. Evaluating the diet provides some information. Serum/blood or liver from the animal needs to be analyzed to determine bioavailability of vitamin and minerals in the diet. This article reviews how to sample and the function of these minerals in cattle.Copyright © 2020 Elsevier Inc.

KW - actinomycosis

KW - animal lameness

KW - autopsy

KW - B12 deficiency

KW - bronchopneumonia

KW - carbohydrate metabolism

KW - copper deficiency

KW - dairy cattle

KW - depression

KW - dietary intake

KW - emaciation

KW - enzyme activity

KW - food intake

KW - genotype

KW - Heinz body

KW - hematological parameters

KW - homeostasis

KW - hyperthyroidism

KW - hypoalbuminemia

KW - hypogonadism

KW - immunosuppressive treatment

KW - intestine flora

KW - iodine deficiency

KW - iron deficiency anemia

KW - lipid metabolism

KW - liver cirrhosis

KW - \*livestock

KW - mass spectrometry

KW - needle biopsy

KW - nonhuman

KW - point of care testing

KW - review

KW - spermatogenesis

KW - thyroid function

KW - virus virulence

KW - aflatoxin

KW - aflatoxin B1

KW - alkaline phosphatase

KW - alpha tocopherol

KW - calcium

KW - cobalamin

KW - copper

KW - ferritin

KW - folic acid

KW - glutathione

KW - glutathione peroxidase

KW - glycosyltransferase

KW - glyphosate

KW - homocysteine

KW - iodine

KW - iron

KW - iron oxide

KW - lactoferrin

KW - magnesium

KW - methylmalonic acid

KW - \*mineral

KW - molybdenum

KW - monophenol monooxygenase

KW - myoglobin

KW - parathyroid hormone

KW - pesticide

KW - phosphorus

KW - phytate

KW - polyphenol

KW - radioactive iodine

KW - selenium

KW - selenocysteine

KW - selenomethionine

KW - selenoprotein

KW - superoxide dismutase

KW - vitamin D

KW - zinc

JF - Veterinary Clinics of North America - Food Animal Practice

JA - Vet. Clin. North Am. Food Anim. Pract.

LA - English

VL - 36

IS - 3

SP - 525

EP - 546

CY - United States

PB - W.B. Saunders

SN - 0749-0720

M1 - (Ensley) Anatomy & Physiology, Kansas State University, 1800 Dension Avenue, P217 Mosier Hall, Manhattan, KS 66506, United States

UR - http://www2.us.elsevierhealth.com/scripts/om.dll/serve?action=searchDB&searchDBfor=home&id=cvsm

DO - https://dx.doi.org/10.1016/j.cvfa.2020.08.009

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2007841699

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.cvfa.2020.08.009Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ensley&issn=0749-0720&title=Veterinary+Clinics+of+North+America+-+Food+Animal+Practice&atitle=Evaluating+Mineral+Status+in+Ruminant+Livestock&volume=36&issue=3&spage=525&epage=546&date=2020&doi=10.1016%2Fj.cvfa.2020.08.009&pmid=32943305&sid=OVID:embase

206.

TY - JOUR

DB - Embase

AN - 2007566071

ID - 32726437 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32726437]

T1 - Gut microbiome a promising target for management of respiratory diseases

A1 - Trivedi R.

A1 - Barve K.

Y1 - 2020//

N2 - The intestinal microbial flora has risen to be one of the important etiological factors in the development of diseases like colorectal cancer, obesity, diabetes, inflammatory bowel disease, anxiety and Parkinson's. The emergence of the association between bacterial flora and lungs led to the discovery of the gut-lung axis. Dysbiosis of several species of colonic bacteria such as Firmicutes and Bacteroidetes and transfer of these bacteria from gut to lungs via lymphatic and systemic circulation are associated with several respiratory diseases such as lung cancer, asthma, tuberculosis, cystic fibrosis, etc. Current therapies for dysbiosis include use of probiotics, prebiotics and synbiotics to restore the balance between various species of beneficial bacteria. Various approaches like nanotechnology and microencapsulation have been explored to increase the permeability and viability of probiotics in the body. The need of the day is comprehensive study of mechanisms behind dysbiosis, translocation of microbiota from gut to lung through various channels and new technology for evaluating treatment to correct this dysbiosis which in turn can be used to manage various respiratory diseases. Microfluidics and organ on chip model are emerging technologies that can satisfy these needs. This review gives an overview of colonic commensals in lung pathology and novel systems that help in alleviating symptoms of lung diseases. We have also hypothesized new models to help in understanding bacterial pathways involved in the gut-lung axis as well as act as a futuristic approach in finding treatment of respiratory diseases caused by dysbiosis.Copyright © 2020 Portland Press Ltd. All rights reserved.

KW - adult respiratory distress syndrome

KW - asthma

KW - cystic fibrosis

KW - dysbiosis/dt [Drug Therapy]

KW - electrospinning

KW - fecal microbiota transplantation

KW - human

KW - intestine

KW - \*intestine flora

KW - lung

KW - lung cancer

KW - microencapsulation

KW - microfluidics

KW - nonhuman

KW - priority journal

KW - \*respiratory tract disease/dt [Drug Therapy]

KW - respiratory tract infection

KW - review

KW - sepsis

KW - spray drying

KW - \*antibiotic agent/dt [Drug Therapy]

KW - \*prebiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/dt [Drug Therapy]

KW - \*short chain fatty acid/dt [Drug Therapy]

KW - \*synbiotic agent/dt [Drug Therapy]

XT - dysbiosis / drug therapy / antibiotic agent

XT - dysbiosis / drug therapy / prebiotic agent

XT - dysbiosis / drug therapy / probiotic agent

XT - dysbiosis / drug therapy / short chain fatty acid

XT - dysbiosis / drug therapy / synbiotic agent

XT - respiratory tract disease / drug therapy / antibiotic agent

XT - respiratory tract disease / drug therapy / prebiotic agent

XT - respiratory tract disease / drug therapy / probiotic agent

XT - respiratory tract disease / drug therapy / short chain fatty acid

XT - respiratory tract disease / drug therapy / synbiotic agent

XT - antibiotic agent / drug therapy / dysbiosis

XT - antibiotic agent / drug therapy / respiratory tract disease

XT - prebiotic agent / drug therapy / dysbiosis

XT - prebiotic agent / drug therapy / respiratory tract disease

XT - probiotic agent / drug therapy / dysbiosis

XT - probiotic agent / drug therapy / respiratory tract disease

XT - short chain fatty acid / drug therapy / dysbiosis

XT - short chain fatty acid / drug therapy / respiratory tract disease

XT - synbiotic agent / drug therapy / dysbiosis

XT - synbiotic agent / drug therapy / respiratory tract disease

JF - Biochemical Journal

JA - Biochem. J.

LA - English

VL - 477

IS - 14

SP - 2679

EP - 2696

CY - United Kingdom

PB - Portland Press Ltd (E-mail: genadmin@biochemistry.org)

SN - 0264-6021

SN - 1470-8728

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UR - https://watermark.silverchair.com/bcj-2020-0426.pdf?

DO - https://dx.doi.org/10.1042/BCJ20200426

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2007566071

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1042%2fBCJ20200426Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Trivedi&issn=0264-6021&title=Biochemical+Journal&atitle=Gut+microbiome+a+promising+target+for+management+of+respiratory+diseases&volume=477&issue=14&spage=2679&epage=2696&date=2020&doi=10.1042%2FBCJ20200426&pmid=32726437&sid=OVID:embase

207.

TY - JOUR

DB - Embase

AN - 2007086061

T1 - Fecal microbiota transplantation in adults as a modern form of past "coprotherapy": Hope or hype?

A1 - Ksiadzyna D.

Y1 - 2020//

N2 - The influence of intestinal microbiota on human health and disease is of great importance. Fecal microbiota transplantation (FMT) defined as the transfer of the stool-derived microbiota of the distal gastrointestinal (GI) tract from a healthy donor to a patient with a disease attributable to intestinal dysbiosis is, in addition to the use of probiotics, prebiotics, synbiotics and eubiotics, one of the methods to restore eubiosis. Thorough medical history and physical examination followed by a set of blood and stool laboratory tests should be performed in a potential stool donor. Stool-derived microbiota may be administered through the upper and/or lower GI tract. FMT is believed to be a well-tolerated and, in general, safe procedure. The emergence of stool banks of frozen feces-derived material containing intestinal microbiota and the availability of convenient oral capsules with selected components of feces would definitely facilitate the use of this method in both research and the clinics. An inflammation caused by Clostridium difficile is the most often indication for FMT. Other conditions include inflammatory bowel disease, irritable bowel syndrome or the eradication of multi-drug resistant microorganisms. However, the list of potential indications rapidly increases. Further randomized double-blind studies in humans are needed to confirm a real benefit-risk ratio and clinical value of FMT, especially in extraintestinal disorders like obesity, diabetes mellitus, metabolic syndrome, fatty liver disease, hepatic encephalopathy, allergy, autism, depression or dementia.Copyright © 2020 Polish Pharmaceutical Society. All rights reserved.

KW - abdominal discomfort

KW - abdominal pain

KW - adult

KW - allergy

KW - autism

KW - Bacillus thuringiensis

KW - bacteremia

KW - bacterial clearance

KW - bacterial strain

KW - Bacteroidetes

KW - Clostridioides difficile

KW - Clostridium difficile infection/th [Therapy]

KW - colic

KW - colonoscopy

KW - constipation

KW - diarrhea

KW - digestive system perforation

KW - dilution

KW - disease exacerbation

KW - donor selection

KW - dysbiosis

KW - eructation

KW - Eubacterium

KW - Faecalibacterium prausnitzii

KW - fatty liver

KW - \*fecal microbiota transplantation

KW - feces microflora

KW - fever

KW - filtration

KW - Firmicutes

KW - flatulence

KW - gastrointestinal hemorrhage

KW - graft versus host reaction

KW - hepatic encephalopathy

KW - human

KW - infection

KW - inflammation

KW - inflammatory bowel disease/th [Therapy]

KW - intestine flora

KW - irritable colon/th [Therapy]

KW - laboratory test

KW - Lachnospiraceae

KW - loose feces

KW - medical history

KW - metabolic disorder

KW - metabolic syndrome X

KW - mortality

KW - nausea

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - norovirus infection

KW - obesity/th [Therapy]

KW - patient safety

KW - peritonitis

KW - physical examination

KW - pneumonia

KW - Proteobacteria

KW - review

KW - sepsis

KW - stool donor

KW - treatment indication

KW - upper gastrointestinal tract

KW - vomiting

KW - glycerol

KW - macrogol

KW - probiotic agent

KW - sodium chloride

KW - solvent

KW - colonoscope

KW - gastroscope

KW - stomach tube

KW - borborygmi

KW - \*coprotherapy

KW - Eubacterium eligens

JF - Acta Poloniae Pharmaceutica - Drug Research

JA - Acta Pol. Pharm. Drug Res.

LA - English

VL - 77

IS - 3

SP - 391

EP - 401

CY - Poland

PB - Polish Pharmaceutical Society

SN - 0001-6837

AD - D. Ksiadzyna, Department of Pharmacology, Wroclaw Medical University, 2 J. Mikulicza-Radeckiego St., Wroclaw 50-345, Poland. E-mail: dorota.ksiadzyna@umed.wroc.pl

M1 - (Ksiadzyna) Department of Pharmacology, Wroclaw Medical University, 2 J. Mikulicza-Radeckiego St., Wroclaw 50-345, Poland

UR - https://www.ptfarm.pl/download/?file=File%2FActa\_Poloniae%2F2020%2F3%2F391.pdf

DO - https://dx.doi.org/10.32383/appdr/122149

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2007086061

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.32383%2fappdr%2f122149Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ksiadzyna&issn=0001-6837&title=Acta+Poloniae+Pharmaceutica+-+Drug+Research&atitle=Fecal+microbiota+transplantation+in+adults+as+a+modern+form+of+past+%22coprotherapy%22%3A+Hope+or+hype%3F&volume=77&issue=3&spage=391&epage=401&date=2020&doi=10.32383%2Fappdr%2F122149&pmid=&sid=OVID:embase

208.

TY - JOUR

DB - Embase

AN - 2005988089

ID - 32855513 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32855513]

T1 - Safety and efficacy of probiotic administration to preterm infants: ten common questions

A1 - Underwood M.A.

A1 - Umberger E.

A1 - Patel R.M.

Y1 - 2020//

N2 - In spite of a large number of randomized placebo-controlled clinical trials and observational cohort studies including >50,000 preterm infants from 29 countries that have demonstrated a decrease in the risk of necrotizing enterocolitis, death, and sepsis, routine prophylactic probiotic administration to preterm infants remains uncommon in much of the world. This manuscript reflects talks given at NEC Society Symposium in 2019 and is not intended to be a state-of-the-art review or systematic review, but a summary of the probiotic-specific aspects of the symposium with limited additions including a recent strain-specific network analysis and position statement from the European Society for Paediatric Gastroenterology Hepatology and Nutrition (ESPGHAN). We address ten common questions related to the intestinal microbiome and probiotic administration to the preterm infant.Copyright © 2020, International Pediatric Research Foundation, Inc.

KW - article

KW - bloating/si [Side Effect]

KW - brain hemorrhage/si [Side Effect]

KW - breast milk

KW - clinical trial (topic)

KW - developmental delay/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - drug efficacy

KW - drug safety

KW - \*dysbiosis/dt [Drug Therapy]

KW - European

KW - human

KW - infant

KW - intestine flora

KW - lung dysplasia/si [Side Effect]

KW - mental disease/si [Side Effect]

KW - neonatal intensive care unit

KW - nutritional intolerance/si [Side Effect]

KW - \*prematurity

KW - priority journal

KW - prophylaxis

KW - retrolental fibroplasia/si [Side Effect]

KW - sepsis/si [Side Effect]

KW - symposium

KW - vomiting/si [Side Effect]

KW - \*probiotic agent/ae [Adverse Drug Reaction]

KW - \*probiotic agent/ct [Clinical Trial]

KW - \*probiotic agent/dt [Drug Therapy]

KW - \*probiotic agent/pv [Special Situation for Pharmacovigilance]

XT - bloating / side effect / probiotic agent

XT - brain hemorrhage / side effect / probiotic agent

XT - developmental delay / side effect / probiotic agent

XT - diarrhea / side effect / probiotic agent

XT - dysbiosis / drug therapy / probiotic agent

XT - lung dysplasia / side effect / probiotic agent

XT - mental disease / side effect / probiotic agent

XT - nutritional intolerance / side effect / probiotic agent

XT - retrolental fibroplasia / side effect / probiotic agent

XT - sepsis / side effect / probiotic agent

XT - vomiting / side effect / probiotic agent

XT - probiotic agent / adverse drug reaction / bloating

XT - probiotic agent / adverse drug reaction / brain hemorrhage

XT - probiotic agent / adverse drug reaction / developmental delay

XT - probiotic agent / adverse drug reaction / diarrhea

XT - probiotic agent / adverse drug reaction / lung dysplasia

XT - probiotic agent / adverse drug reaction / mental disease

XT - probiotic agent / adverse drug reaction / nutritional intolerance

XT - probiotic agent / adverse drug reaction / retrolental fibroplasia

XT - probiotic agent / adverse drug reaction / sepsis

XT - probiotic agent / adverse drug reaction / vomiting

XT - probiotic agent / drug therapy / dysbiosis

XT - probiotic agent / special situation for pharmacovigilance / pediatric patient

JF - Pediatric Research

JA - Pediatr. Res.

LA - English

VL - 88

IS - Supplement 1

SP - 48

EP - 55

CY - United States

PB - Springer Nature

SN - 0031-3998

SN - 1530-0447

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M1 - (Underwood) Division of Neonatology, Department of Pediatrics, University of California Davis School of Medicine, Sacramento, CA, United States

M1 - (Umberger) Necrotizing Enterocolitis (NEC) Society, Davis, CA, United States

M1 - (Patel) Division of Neonatology, Department of Pediatrics, Emory University School of Medicine and Children's Healthcare of Atlanta, Atlanta, GA, United States

UR - http://www.nature.com/pr/index.html

DO - https://dx.doi.org/10.1038/s41390-020-1080-6

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005988089

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1038%2fs41390-020-1080-6Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Underwood&issn=0031-3998&title=Pediatric+Research&atitle=Safety+and+efficacy+of+probiotic+administration+to+preterm+infants%3A+ten+common+questions&volume=88&issue=Supplement+1&spage=48&epage=55&date=2020&doi=10.1038%2Fs41390-020-1080-6&pmid=32855513&sid=OVID:embase

209.

TY - JOUR

DB - Embase

AN - 2006957255

ID - 32621905 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32621905]

T1 - The ENGAGE-2 study: Engaging self-regulation targets to understand the mechanisms of behavior change and improve mood and weight outcomes in a randomized controlled trial (Phase 2)

A1 - Lv N.

A1 - Ajilore O.A.

A1 - Ronneberg C.R.

A1 - Venditti E.M.

A1 - Snowden M.B.

A1 - Lavori P.W.

A1 - Xiao L.

A1 - Goldstein-Piekarski A.N.

A1 - Wielgosz J.

A1 - Wittels N.E.

A1 - Barve A.

A1 - Patel A.S.

A1 - Eckley T.L.

A1 - Stetz P.

A1 - Gerber B.S.

A1 - Smyth J.M.

A1 - Simmons J.M.

A1 - Rosas L.G.

A1 - Williams L.M.

A1 - Ma J.

Y1 - 2020//

N2 - Despite evidence for effective integrated behavior therapy for treating comorbid obesity and depression, treatment response is highly variable and the underlying neurobiological mechanisms remain unknown. This hampers efforts to identify mechanistic targets in order to optimize treatment precision and potency. Funded within the NIH Science of Behavior Change (SOBC) Research Network, the 2-phased ENGAGE research project applies an experimental precision medicine approach to address this gap. The Phase 1 study focused on demonstrating technical feasibility, target engagement and potential neural mechanisms of responses to an integrated behavior therapy. This therapy combines a video-based behavioral weight loss program and problem-solving therapy for depression, with as-needed intensification of antidepressant medications, and its clinical effectiveness was demonstrated within a parent randomized clinical trial. Here, we describe the ENGAGE Phase 2 (ENGAGE-2) study protocol which builds on Phase 1 in 2 ways: (1) pilot testing of an motivational interviewing-enhanced, integrated behavior therapy in an independent, primarily minority patient sample, and (2) evaluation of a priori defined neural targets, specifically the negative affect (threat and sadness) circuits which demonstrated engagement and malleability in Phase 1, as mediators of therapeutic outcomes. Additionally, the Phase 2 study includes a conceptual and methodological extension to explore the role of microbiome-gut-brain and systemic immunological pathways in integrated behavioral treatment of obesity and depression. This protocol paper documents the conceptualization, design and the transdisciplinary methodologies in ENGAGE-2, which can inform future clinical and translational research in experimental precision medicine for behavior change and chronic disease management. Trial registration: ClinicalTrials.gov #NCT 03,841,682.Copyright © 2020 Elsevier Inc.

KW - adult

KW - article

KW - \*behavior change

KW - \*behavior therapy

KW - \*body weight

KW - BOLD signal

KW - brain

KW - clinical outcome

KW - controlled study

KW - \*depression/dt [Drug Therapy]

KW - \*depression/th [Therapy]

KW - emotion regulation

KW - executive function

KW - feasibility study

KW - female

KW - health behavior

KW - human

KW - intestine flora

KW - major clinical study

KW - \*mood

KW - motivational interviewing

KW - nonhuman

KW - \*obesity/th [Therapy]

KW - parent

KW - perceptive threshold

KW - personalized medicine

KW - physical activity

KW - pilot study

KW - problem solving

KW - psychopharmacotherapy

KW - randomized controlled trial

KW - reward

KW - sadness

KW - \*self control

KW - self monitoring

KW - threat

KW - translational research

KW - videorecording

KW - weight loss program

KW - antidepressant agent/dt [Drug Therapy]

KW - interleukin 1 receptor/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 6 receptor alpha/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - tumor necrosis factor receptor 1/ec [Endogenous Compound]

KW - tumor necrosis factor receptor 2/ec [Endogenous Compound]

XT - depression / drug therapy / antidepressant agent

XT - antidepressant agent / drug therapy / depression

JF - Contemporary Clinical Trials

JA - Contemp. Clin. Trials

LA - English

VL - 95

SP - 106072

CY - United States

PB - Elsevier Inc. (E-mail: usjcs@elsevier.com)

SN - 1551-7144

SN - 1559-2030

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UR - http://www.elsevier.com/wps/find/journaldescription.cws\_home/704636/description#description

DO - https://dx.doi.org/10.1016/j.cct.2020.106072

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2006957255

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.cct.2020.106072Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lv&issn=1551-7144&title=Contemporary+Clinical+Trials&atitle=The+ENGAGE-2+study%3A+Engaging+self-regulation+targets+to+understand+the+mechanisms+of+behavior+change+and+improve+mood+and+weight+outcomes+in+a+randomized+controlled+trial+%28Phase+2%29&volume=95&issue=&spage=106072&epage=&date=2020&doi=10.1016%2Fj.cct.2020.106072&pmid=32621905&sid=OVID:embase

210.

TY - JOUR

DB - Embase

AN - 2005633918

ID - 32298803 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32298803]

T1 - Are we facing a crashing wave of neuropsychiatric sequelae of COVID-19? Neuropsychiatric symptoms and potential immunologic mechanisms

A1 - Troyer E.A.

A1 - Kohn J.N.

A1 - Hong S.

Y1 - 2020//

N2 - The coronavirus disease 19 (COVID-19) pandemic is a significant psychological stressor in addition to its tremendous impact on every facet of individuals' lives and organizations in virtually all social and economic sectors worldwide. Fear of illness and uncertainty about the future precipitate anxiety- and stress-related disorders, and several groups have rightfully called for the creation and dissemination of robust mental health screening and treatment programs for the general public and front-line healthcare workers. However, in addition to pandemic-associated psychological distress, the direct effects of the virus itself (several acute respiratory syndrome coronavirus; SARS-CoV-2), and the subsequent host immunologic response, on the human central nervous system (CNS) and related outcomes are unknown. We discuss currently available evidence of COVID-19 related neuropsychiatric sequelae while drawing parallels to past viral pandemic-related outcomes. Past pandemics have demonstrated that diverse types of neuropsychiatric symptoms, such as encephalopathy, mood changes, psychosis, neuromuscular dysfunction, or demyelinating processes, may accompany acute viral infection, or may follow infection by weeks, months, or longer in recovered patients. The potential mechanisms are also discussed, including viral and immunological underpinnings. Therefore, prospective neuropsychiatric monitoring of individuals exposed to SARS-CoV-2 at various points in the life course, as well as their neuroimmune status, are needed to fully understand the long-term impact of COVID-19, and to establish a framework for integrating psychoneuroimmunology into epidemiologic studies of pandemics.Copyright © 2020 Elsevier Inc.

KW - ageusia

KW - anosmia

KW - anxiety

KW - autoimmunity

KW - brain disease

KW - \*coronavirus disease 2019

KW - depression

KW - evidence based medicine

KW - human

KW - immunity

KW - immunocompetent cell

KW - intestine flora

KW - \*mental disease

KW - neuromuscular disease

KW - nonhuman

KW - pandemic

KW - patient monitoring

KW - priority journal

KW - psychosis

KW - review

KW - Severe acute respiratory syndrome coronavirus 2

KW - virus infection

JF - Brain, Behavior, and Immunity

JA - Brain Behav. Immun.

LA - English

VL - 87

SP - 34

EP - 39

CY - United States

PB - Academic Press Inc. (E-mail: apjcs@harcourt.com)

SN - 0889-1591

SN - 1090-2139

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UR - http://www.elsevier.com/inca/publications/store/6/2/2/8/0/0/index.htt

DO - https://dx.doi.org/10.1016/j.bbi.2020.04.027

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005633918

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.bbi.2020.04.027Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Troyer&issn=0889-1591&title=Brain%2C+Behavior%2C+and+Immunity&atitle=Are+we+facing+a+crashing+wave+of+neuropsychiatric+sequelae+of+COVID-19%3F+Neuropsychiatric+symptoms+and+potential+immunologic+mechanisms&volume=87&issue=&spage=34&epage=39&date=2020&doi=10.1016%2Fj.bbi.2020.04.027&pmid=32298803&sid=OVID:embase

211.

TY - JOUR

DB - Embase

AN - 2005511683

ID - 32615913 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32615913]

T1 - Longitudinal gut microbiome changes in alcohol use disorder are influenced by abstinence and drinking quantity

A1 - Ames N.J.

A1 - Barb J.J.

A1 - Schuebel K.

A1 - Mudra S.

A1 - Meeks B.K.

A1 - Tuason R.T.S.

A1 - Brooks A.T.

A1 - Kazmi N.

A1 - Yang S.

A1 - Ratteree K.

A1 - Diazgranados N.

A1 - Krumlauf M.

A1 - Wallen G.R.

A1 - Goldman D.

Y1 - 2020//

N2 - Many patients with alcohol use disorder (AUD) consume alcohol chronically and in large amounts that alter intestinal microbiota, damage the gastrointestinal tract, and thereby injure other organs via malabsorption and intestinal inflammation. We hypothesized that alcohol consumption and subsequent abstinence would change the gut microbiome in adults admitted to a treatment program. Stool and oral specimens, diet data, gastrointestinal assessment scores, anxiety, depression measures and drinking amounts were collected longitudinally for up to 4 weeks in 22 newly abstinent inpatients with AUD who were dichotomized as less heavy drinkers (LHD, <10 drinks/d) and very heavy drinkers (VHD, 10 or more drinks/d). Next-generation 16 S rRNA gene sequencing was performed to measure the gut and oral microbiome at up to ten time points/subject and LHD and VHD were compared for change in principal components, Shannon diversity index and specific genera. The first three principal components explained 46.7% of the variance in gut microbiome diversity across time and all study subjects, indicating the change in gut microbiome following abstinence. The first time point was an outlier in three-dimensional principal component space versus all other time points. The gut microbiota in LHD and VHD were significantly dissimilar in change from day 1 to day 5 (p = .03) and from day 1 to week 3 (p = .02). The VHD drinking group displayed greater change from baseline. The Shannon diversity index of the gut microbiome changed significantly during abstinence in five participants. In both groups, the Shannon diversity was lower in the oral microbiome than gut. Ten total genera were shared between oral and stool in the AUD participants. These data were compared with healthy controls from the Human Microbiome Project to investigate the concept of a core microbiome. Rapid changes in gut microbiome following abstinence from alcohol suggest resilience of the gut microbiome in AUD and reflects the benefits of refraining from the highest levels of alcohol and potential benefits of abstinence.Copyright © 2020, © 2020 Taylor & Francis Group, LLC.

KW - adult

KW - \*alcohol abstinence

KW - \*alcoholism

KW - anxiety

KW - article

KW - bacterium isolation

KW - body mass

KW - caloric intake

KW - depression

KW - dietary intake

KW - DNA extraction

KW - \*drinking behavior

KW - enteric feeding

KW - enteritis

KW - feces analysis

KW - \*feces microflora

KW - female

KW - food intake

KW - gene sequence

KW - human

KW - intestine flora

KW - liver function test

KW - major clinical study

KW - malabsorption

KW - male

KW - microbial diversity

KW - microbiome

KW - middle aged

KW - Montgomery Asberg Depression Rating Scale

KW - platelet count

KW - prevalence

KW - principal component analysis

KW - Proteobacteria

KW - prothrombin time

KW - pyrosequencing

KW - questionnaire

KW - RNA sequence

KW - Short Form 36

KW - RNA 16S/ec [Endogenous Compound]

JF - Gut Microbes

JA - Gut Microbes

LA - English

VL - 11

IS - 6

SP - 1608

EP - 1631

CY - United States

PB - Taylor and Francis Inc. (325 Chestnut St, Suite 800, Philadelphia PA 19106, United States)

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SN - 1949-0984

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UR - http://www.tandfonline.com/toc/kgmi20/current

DO - https://dx.doi.org/10.1080/19490976.2020.1758010

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005511683

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1080%2f19490976.2020.1758010Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ames&issn=1949-0976&title=Gut+Microbes&atitle=Longitudinal+gut+microbiome+changes+in+alcohol+use+disorder+are+influenced+by+abstinence+and+drinking+quantity&volume=11&issue=6&spage=1608&epage=1631&date=2020&doi=10.1080%2F19490976.2020.1758010&pmid=32615913&sid=OVID:embase

212.

TY - JOUR

DB - Embase

AN - 2004721603

ID - 32313188 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32313188]

T1 - Nutrition amid the COVID-19 pandemic: a multi-level framework for action

A1 - Naja F.

A1 - Hamadeh R.

Y1 - 2020//

KW - article

KW - awareness

KW - caloric intake

KW - \*coronavirus disease 2019

KW - diet supplementation

KW - disease predisposition

KW - emergency care

KW - emotional disorder

KW - epidemic

KW - food availability

KW - food quality

KW - food security

KW - global disease burden

KW - health care utilization

KW - human

KW - immune response

KW - immune system

KW - incidence

KW - infection prevention

KW - intestine flora

KW - lifestyle

KW - mental health

KW - misinformation

KW - \*nutrition

KW - nutrition education

KW - \*pandemic

KW - pneumonia

KW - population risk

KW - sedentary lifestyle

KW - social media

KW - virus transmission

KW - World Health Organization

KW - alpha tocopherol

KW - cyanocobalamin

KW - iron

KW - pyridoxine

KW - retinol

KW - zinc

JF - European Journal of Clinical Nutrition

JA - Eur. J. Clin. Nutr.

LA - English

VL - 74

IS - 8

SP - 1117

EP - 1121

CY - United Kingdom

PB - Springer Nature

SN - 0954-3007

SN - 1476-5640

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UR - http://www.nature.com/ejcn/index.html

DO - https://dx.doi.org/10.1038/s41430-020-0634-3

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004721603

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1038%2fs41430-020-0634-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Naja&issn=0954-3007&title=European+Journal+of+Clinical+Nutrition&atitle=Nutrition+amid+the+COVID-19+pandemic%3A+a+multi-level+framework+for+action&volume=74&issue=8&spage=1117&epage=1121&date=2020&doi=10.1038%2Fs41430-020-0634-3&pmid=32313188&sid=OVID:embase

213.

TY - JOUR

DB - Embase

AN - 2004115936

ID - 31965390 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31965390]

T1 - Gut Dysthymia: Paraneoplastic Chronic Watery Diarrhea

A1 - Wei M.T.

A1 - Scapa J.

A1 - Bingham D.

A1 - Triadafilopoulos G.

Y1 - 2020//

KW - abdominal radiography

KW - abscess

KW - adult

KW - ascending colon

KW - autoimmune disease

KW - cancer chemotherapy

KW - cancer radiotherapy

KW - case report

KW - cecum

KW - \*chronic diarrhea/co [Complication]

KW - \*chronic diarrhea/di [Diagnosis]

KW - clinical article

KW - colitis/di [Diagnosis]

KW - colon biopsy

KW - colonic lamina propria

KW - colonoscopy

KW - computer assisted tomography

KW - diarrhea/dt [Drug Therapy]

KW - duodenum

KW - \*dysthymia

KW - endocrine cell

KW - enteropathy

KW - female

KW - gastrointestinal endoscopy

KW - hematothorax

KW - hemorrhoid/di [Diagnosis]

KW - human

KW - human tissue

KW - idiopathic thrombocytopenic purpura/dt [Drug Therapy]

KW - \*intestine flora

KW - lung

KW - magnetic resonance enterography

KW - mediastinum mass

KW - \*metastasis/di [Diagnosis]

KW - \*metastasis/dt [Drug Therapy]

KW - \*metastasis/rt [Radiotherapy]

KW - \*metastasis/su [Surgery]

KW - neoadjuvant chemotherapy

KW - note

KW - Paneth cell

KW - paraneoplastic syndrome/dt [Drug Therapy]

KW - pericardium

KW - phrenic nerve

KW - pleura thickening

KW - priority journal

KW - radiation injury/dt [Drug Therapy]

KW - rectum mucosa

KW - terminal ileum

KW - thorax pain

KW - thorax radiography

KW - thymectomy

KW - \*thymoma/di [Diagnosis]

KW - \*thymoma/dt [Drug Therapy]

KW - \*thymoma/rt [Radiotherapy]

KW - \*thymoma/su [Surgery]

KW - total parenteral nutrition

KW - treatment failure

KW - budesonide/tm [Unexpected Outcome of Drug Treatment]

KW - cisplatin/cb [Drug Combination]

KW - cisplatin/dt [Drug Therapy]

KW - cyclophosphamide/cb [Drug Combination]

KW - cyclophosphamide/dt [Drug Therapy]

KW - doxorubicin/cb [Drug Combination]

KW - doxorubicin/dt [Drug Therapy]

KW - rituximab/dt [Drug Therapy]

KW - steroid/dt [Drug Therapy]

KW - steroid/iv [Intravenous Drug Administration]

KW - \*metastatic thymoma/di [Diagnosis]

KW - \*metastatic thymoma/dt [Drug Therapy]

KW - \*metastatic thymoma/rt [Radiotherapy]

KW - \*metastatic thymoma/su [Surgery]

XT - diarrhea / drug therapy / steroid

XT - idiopathic thrombocytopenic purpura / drug therapy / rituximab

XT - metastasis / drug therapy / cisplatin

XT - metastasis / drug therapy / cyclophosphamide

XT - metastasis / drug therapy / doxorubicin

XT - metastatic thymoma / drug therapy / cisplatin

XT - metastatic thymoma / drug therapy / cyclophosphamide

XT - metastatic thymoma / drug therapy / doxorubicin

XT - paraneoplastic syndrome / drug therapy / cisplatin

XT - paraneoplastic syndrome / drug therapy / cyclophosphamide

XT - paraneoplastic syndrome / drug therapy / doxorubicin

XT - radiation injury / drug therapy / rituximab

XT - thymoma / drug therapy / cisplatin

XT - thymoma / drug therapy / cyclophosphamide

XT - thymoma / drug therapy / doxorubicin

XT - budesonide / unexpected outcome of drug treatment / lack of drug effect

XT - cisplatin / drug combination / cyclophosphamide

XT - cisplatin / drug combination / doxorubicin

XT - cisplatin / drug therapy / metastasis

XT - cisplatin / drug therapy / metastatic thymoma

XT - cisplatin / drug therapy / paraneoplastic syndrome

XT - cisplatin / drug therapy / thymoma

XT - cyclophosphamide / drug combination / cisplatin

XT - cyclophosphamide / drug combination / doxorubicin

XT - cyclophosphamide / drug therapy / metastasis

XT - cyclophosphamide / drug therapy / metastatic thymoma

XT - cyclophosphamide / drug therapy / paraneoplastic syndrome

XT - cyclophosphamide / drug therapy / thymoma

XT - doxorubicin / drug combination / cisplatin

XT - doxorubicin / drug combination / cyclophosphamide

XT - doxorubicin / drug therapy / metastasis

XT - doxorubicin / drug therapy / metastatic thymoma

XT - doxorubicin / drug therapy / paraneoplastic syndrome

XT - doxorubicin / drug therapy / thymoma

XT - rituximab / drug therapy / idiopathic thrombocytopenic purpura

XT - rituximab / drug therapy / radiation injury

XT - steroid / drug therapy / diarrhea

JF - Digestive Diseases and Sciences

JA - Dig. Dis. Sci.

LA - English

VL - 65

IS - 8

SP - 2217

EP - 2220

CY - United States

PB - Springer

SN - 0163-2116

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UR - https://www.wkap.nl/journalhome.htm/0163-2116

DO - https://dx.doi.org/10.1007/s10620-020-06058-z

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004115936

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1007%2fs10620-020-06058-zLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Wei&issn=0163-2116&title=Digestive+Diseases+and+Sciences&atitle=Gut+Dysthymia%3A+Paraneoplastic+Chronic+Watery+Diarrhea&volume=65&issue=8&spage=2217&epage=2220&date=2020&doi=10.1007%2Fs10620-020-06058-z&pmid=31965390&sid=OVID:embase

214.

TY - JOUR

DB - Embase

AN - 631566709

ID - 32328074 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32328074]

T1 - The Bacterium Akkermansia muciniphila: A Sentinel for Gut Permeability and Its Relevance to HIV-Related Inflammation

A1 - Ouyang J.

A1 - Lin J.

A1 - Isnard S.

A1 - Fombuena B.

A1 - Peng X.

A1 - Marette A.

A1 - Routy B.

A1 - Messaoudene M.

A1 - Chen Y.

A1 - Routy J.-P.

Y1 - 2020//

N2 - Gut dysbiosis, namely dysregulation of the intestinal microbiota, and increased gut permeability lead to enhanced inflammation and are commonly seen in chronic conditions such as obesity and aging. In people living with HIV (PLWH), several lines of evidence suggest that a depletion of gut CD4 T-cells is associated with gut dysbiosis, microbial translocation and systemic inflammation. Antiretroviral therapy (ART) rapidly controls viral replication, which leads to CD4 T-cell recovery and control of the disease. However, gut dysbiosis, epithelial damage and microbial translocation persist despite ART, increasing risk of developing inflammatory non-AIDS comorbidities such as cardiovascular disease, diabetes mellitus, liver steatosis and cancer. In addition to ART, an emerging research priority is to discover strategies to improve the gut microbial composition and intestinal barrier function. Probiotic interventions have been extensively used with controversial benefits in humans. Encouragingly, within the last decade, the intestinal symbiotic bacterium Akkermansia muciniphila has emerged as the "sentinel of the gut." A lower abundance of A. muciniphila has been shown in diabetic and obese people as well as in PLWH. Interventions with high levels of polyphenols such as tea or diets rich in fruit, the antibiotic vancomycin and the antidiabetic drug metformin have been shown to increase A. muciniphila abundance, contributing to improved metabolic function in diabetic and obese individuals. We hypothesize that gut microbiota rich in A. muciniphila can reduce microbial translocation and inflammation, preventing occurrences of non-AIDS comorbidities in PLWH. To this aim, we will discuss the protective effect of A. muciniphila and its potential applications, paving the way toward novel therapeutic strategies to improve gut health in PLWH.© Copyright © 2020 Ouyang, Lin, Isnard, Fombuena, Peng, Marette, Routy, Messaoudene, Chen and Routy.

KW - acquired immune deficiency syndrome

KW - \*Akkermansia muciniphila

KW - antigen presenting cell

KW - cancer immunotherapy

KW - CD4 lymphocyte count

KW - CD4+ T lymphocyte

KW - celiac disease

KW - cell differentiation

KW - clinical outcome

KW - Clostridium difficile infection

KW - colon cancer

KW - depression

KW - diabetes mellitus

KW - dysbiosis

KW - endotoxemia

KW - Faecalibacterium

KW - fatty liver

KW - fecal microbiota transplantation

KW - glucose homeostasis

KW - human

KW - Human immunodeficiency virus infected patient

KW - \*Human immunodeficiency virus infection

KW - immune response

KW - immune system

KW - immunological tolerance

KW - \*inflammation

KW - innate immunity

KW - insulin release

KW - insulin resistance

KW - insulin sensitivity

KW - insulinemia

KW - intestine flora

KW - irritable colon

KW - liver injury

KW - melanoma

KW - Methanobrevibacter

KW - methicillin resistant Staphylococcus aureus

KW - mucosal immunity

KW - nonhuman

KW - note

KW - obesity

KW - parenteral nutrition

KW - Porphyromonas gingivalis

KW - tumor growth

KW - ulcerative colitis

KW - virus load

KW - virus replication

KW - CD14 antigen/ec [Endogenous Compound]

KW - endocannabinoid/ec [Endogenous Compound]

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - interleukin 12/ec [Endogenous Compound]

KW - metformin/ec [Endogenous Compound]

KW - metronidazole/ec [Endogenous Compound]

KW - prebiotic agent/ec [Endogenous Compound]

KW - probiotic agent/ec [Endogenous Compound]

KW - triacylglycerol/ec [Endogenous Compound]

JF - Frontiers in Immunology

JA - Front. Immunol.

LA - English

VL - 11

SP - 645

CY - Switzerland

PB - Frontiers Media S.A. (E-mail: info@frontiersin.org)

SN - 1664-3224 (electronic)

SN - 1664-3224

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UR - https://www.frontiersin.org/journals/immunology#

DO - https://dx.doi.org/10.3389/fimmu.2020.00645

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=631566709

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.3389%2ffimmu.2020.00645Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ouyang&issn=1664-3224&title=Frontiers+in+Immunology&atitle=The+Bacterium+Akkermansia+muciniphila%3A+A+Sentinel+for+Gut+Permeability+and+Its+Relevance+to+HIV-Related+Inflammation&volume=11&issue=&spage=645&epage=&date=2020&doi=10.3389%2Ffimmu.2020.00645&pmid=32328074&sid=OVID:embase

215.

TY - JOUR

DB - Embase

AN - 2004325145

ID - 32350146 [https://www.ncbi.nlm.nih.gov/pubmed/?term=32350146]

T1 - Celiac disease: A multi-faceted medical condition

A1 - Domsa E.-M.

A1 - Berindan-Neagoe I.

A1 - Para I.

A1 - Munteanu L.

A1 - Matei D.

A1 - Andreica V.

Y1 - 2020//

N2 - Celiac disease (CD) is a systemic condition of autoimmune origin, affecting genetically predisposed individuals who at some point lose tolerance towards dietary gluten. Prevalence in the general population is 0.5 - 1%, with a higher frequency in women. The most important environmental factor for CD is ingestion of specific gluten peptides. It triggers a sequence of molecular events, involving the intestinal permeability and the immune system, which ends in damage of the intestinal mucosa. A number of studies have demonstrated the correlation between the intestinal microbiota and celiac disease. MicroRNAs through their regulatory role on gene expression have been implicated in the pathogenesis of CD and suggested as potential biomarkers. In the pediatric and adult population, CD displays different clusters of clinical symptoms. Persistent diarrhea, abdominal pain and involuntary weight loss are the classic symptoms of CD. In the majority of cases diagnosis relies on the combination of serum autoantibodies (anti-transglutaminase and anti-endomisium IgA) and duodenal biopsy showing villous atrophy, crypt hyperplasia and intraepithelial lymphocytes. Observance of a lifelong gluten-free diet, which interrupts the immune response to gluten peptides, is the only effective treatment of CD.Copyright © 2020, Polish Physiological Society. All rights reserved.

KW - abdominal pain

KW - alopecia

KW - amenorrhea

KW - anxiety

KW - apathy

KW - aphthous stomatitis

KW - apoptosis

KW - ataxia

KW - autism

KW - autoimmune hepatitis

KW - balloon enteroscopy

KW - Bifidobacterium

KW - bleeding tendency

KW - capsule endoscopy

KW - \*celiac disease

KW - cerebellar ataxia

KW - chemoradiotherapy

KW - cholangitis

KW - computer assisted tomography

KW - constipation

KW - depression

KW - dermatomyositis

KW - diarrhea

KW - double balloon enteroscopy

KW - duodenum biopsy

KW - duodenum mucosa

KW - dysbiosis

KW - dyspepsia

KW - enamel hypoplasia

KW - environmental factor

KW - esophagus carcinoma

KW - fatigue

KW - flow cytometry

KW - gastrointestinal endoscopy

KW - gene expression

KW - genetic risk

KW - genetic screening

KW - headache

KW - Helicobacter pylori

KW - histology

KW - human

KW - hypoalbuminemia

KW - immune dysregulation

KW - immune response

KW - immunoglobulin A nephropathy

KW - induced pluripotent stem cell

KW - inflammatory bowel disease

KW - intestine biopsy

KW - intestine endoscopy

KW - intestine mucosa

KW - intestine villus atrophy

KW - irritable colon

KW - lamina propria

KW - microscopic colitis

KW - myasthenia gravis

KW - nuclear magnetic resonance imaging

KW - obesity

KW - osteopenia

KW - osteoporosis

KW - oxidative stress

KW - polymyositis

KW - positron emission tomography

KW - prevalence

KW - Proteobacteria

KW - psoriasis

KW - review

KW - rheumatoid arthritis

KW - risk factor

KW - schizophrenia

KW - sepsis

KW - signal transduction

KW - social phobia

KW - systematic review

KW - T cell lymphoma

KW - ulcerative colitis

KW - upregulation

KW - vitamin D deficiency

KW - vomiting

KW - biological marker/ec [Endogenous Compound]

KW - cyclin D1/ec [Endogenous Compound]

KW - fibroblast growth factor 23/ec [Endogenous Compound]

KW - gamma interferon/ec [Endogenous Compound]

KW - histone deacetylase 1/ec [Endogenous Compound]

KW - HLA DQ2 antigen/ec [Endogenous Compound]

KW - immunoglobulin A/ec [Endogenous Compound]

KW - immunoglobulin G/ec [Endogenous Compound]

KW - interleukin 15/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - kruppel like factor 4/ec [Endogenous Compound]

KW - long untranslated RNA/ec [Endogenous Compound]

KW - mitogen activated protein kinase 1/ec [Endogenous Compound]

KW - platelet derived growth factor alpha receptor/ec [Endogenous Compound]

KW - protein glutamine gamma glutamyltransferase/ec [Endogenous Compound]

KW - protein ZO1/ec [Endogenous Compound]

KW - RNA binding protein/ec [Endogenous Compound]

KW - STAT1 protein/ec [Endogenous Compound]

KW - transcription factor RUNX1/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vasculotropin A/ec [Endogenous Compound]

KW - vitamin D/ec [Endogenous Compound]

JF - Journal of Physiology and Pharmacology

JA - J. Physiol. Pharmacol.

LA - English

VL - 71

IS - 1

SP - 1

EP - 12

CY - Poland

PB - Polish Physiological Society (ul. Grzegorzecka 16, Cracow 31-531, Poland)

SN - 0867-5910

SN - 1899-1505

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UR - http://www.jpp.krakow.pl/journal/archive/02\_20/pdf/10.26402/jpp.2020.1.01.pdf

DO - https://dx.doi.org/10.26402/jpp.2020.1.01

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2004325145

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.26402%2fjpp.2020.1.01Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Domsa&issn=0867-5910&title=Journal+of+Physiology+and+Pharmacology&atitle=Celiac+disease%3A+A+multi-faceted+medical+condition&volume=71&issue=1&spage=1&epage=12&date=2020&doi=10.26402%2Fjpp.2020.1.01&pmid=32350146&sid=OVID:embase

216.

TY - JOUR

DB - Embase

AN - 2003890888

ID - 31856399 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31856399]

T1 - The Home Clinic or All in a Day's Work of Dr. Fics

A1 - Timmis K.

Y1 - 2020//

KW - anxiety

KW - doctor patient relationship

KW - driver licence

KW - dysbiosis

KW - editorial

KW - epiluminescence microscopy

KW - human

KW - nevus

KW - patient monitoring

KW - patient referral

KW - patient scheduling

KW - personalized medicine

KW - reminder system

KW - \*teleconsultation

KW - vision test

KW - smartphone

JF - Microbial Biotechnology

JA - Microb. Biotechnol.

LA - English

VL - 13

IS - 1

SP - 3

EP - 10

CY - United Kingdom

PB - John Wiley and Sons Ltd (Southern Gate, Chichester, West Sussex PO19 8SQ, United Kingdom. E-mail: vgorayska@wiley.com)

SN - 1751-7907

SN - 1751-7915

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1751-7915

DO - https://dx.doi.org/10.1111/1751-7915.13520

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2003890888

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1111%2f1751-7915.13520Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Timmis&issn=1751-7907&title=Microbial+Biotechnology&atitle=The+Home+Clinic+or+All+in+a+Day%27s+Work+of+Dr.+Fics&volume=13&issue=1&spage=3&epage=10&date=2020&doi=10.1111%2F1751-7915.13520&pmid=31856399&sid=OVID:embase

217.

TY - JOUR

DB - Embase

AN - 637862573

T1 - Long-term Microbiota-Gut-Brain Axis Deficits Following Neonatal EPEC Infection

T3 - Experimental Biology Meeting, EB 2020. San Diego, CA United States.

A1 - Hennessey C.L.

A1 - Pusceddu M.

A1 - Knotts T.

A1 - Sladek J.

A1 - Rabasa G.

A1 - Stokes P.

A1 - Gareau M.

Y1 - 2020//

N2 - Background Diarrheal diseases remain a leading cause of death in children under age five worldwide. In addition, repeated early life exposures to diarrheal pathogens can result in co-morbidities such as impaired growth and cognitive deficits. Given that neural development, differentiation of the gut, and colonization of the microbiota are interconnected and develop concurrently, it is critical to understand the mechanisms that connect them and how early life dysbiosis can lead to pathology of the microbiota-gut-brain (MGB) axis. Hypothesis Neonatal enteropathogenic Escherichia coli (EPEC) infection disrupts the developing MGB axis leading to long-term behavioral deficits, impaired intestinal physiology, and dysbiosis. Methods Neonatal C57BL/6 mice were infected with EPEC (strain e2348/69), DELTAescV (T3SS mutant), or vehicle (LB broth) via orogastric gavage (10 CFU) at post-natal day (P7). Behavior, intestinal physiology, and the microbiota were assessed in adulthood (6-8 weeks). A battery of three behavioral tests (novel object recognition [NOR] task, light/dark [L/D] box, and open field test [OFT]), 16S Illumina sequencing of fecal samples, Ussing chambers,immunofluorescence (IF), and qPCR were utilized to determine the long-term effects of neonatal bacterial infection on the MGB axis. Results EPEC-infected mice had impaired memory (NOR task) without evidence of anxiety-like behavior (L/D box) or impaired locomotor activity (OFT) compared to DELTAescV or shaminfected controls. This was accompanied by increased expression of pro-inflammatory cytokines (TNF-alpha, IL-12, IL-1beta, IL-22, IL-6), pattern recognition receptors (PRR: Nod1 and Nod2), and the neuroprotective brain-derived neurotropic factor (BDNF) in the hippocampus of EPEC-infected mice. Hippocampal IF revealed increased neurogenesis in the dentate gyrus (DG; cell proliferation [Ki67] and number of immature neurons [DCX]) and neuroinflammation (increased microglia activation [Iba1]) in the DG and CA1 regions following neonatal EPEC infection. Intestinal pathophysiology in EPEC-infected mice was characterized by increased secretory state (short circuit current; Isc), permeability (conductance; G), and FITC-dextran flux in the ileum and colon. In addition, EPEC-infected mice had increased expression of pro-inflammatory cytokines (TNF-alpha, IL-22, IL-12, and IL-6) and increased PRR expression (Nod1, Nod2) in the ileum, but no change in expression in the colon. Using 16S rRNA sequencing, we determined that neonatal infection significantly remodeled the composition of microbiota and decreased alpha diversity. Conclusion and Significance Neonatal EPEC infection disrupts the development of the MGB axis leading to long-lasting physiological and behavioral deficits. These findings may have important clinical implications for pediatric patients exposed to bacterial enteric pathogens during early development.

KW - adult

KW - adulthood

KW - amnesia

KW - animal experiment

KW - animal model

KW - anxiety

KW - bacterial infection

KW - bacterial strain

KW - \*brain-gut axis

KW - C57BL 6 mouse

KW - cell proliferation

KW - colon

KW - conductance

KW - conference abstract

KW - controlled study

KW - dentate gyrus

KW - enteric feeding

KW - enteropathogen

KW - enteropathogenic Escherichia coli infection

KW - feces

KW - gene expression

KW - hippocampal CA1 region

KW - hippocampus

KW - human

KW - ileum

KW - illumina sequencing

KW - immunofluorescence

KW - locomotion

KW - male

KW - microglia

KW - molecular recognition

KW - mouse

KW - nerve cell

KW - nervous system development

KW - nervous system inflammation

KW - newborn

KW - newborn infection

KW - nonhuman

KW - open field test

KW - pediatric patient

KW - protein expression

KW - short circuit current

KW - type III secretion system

KW - allograft inflammatory factor 1

KW - brain derived neurotrophic factor

KW - caspase recruitment domain protein 15

KW - caspase recruitment domain protein 4

KW - cytokine

KW - doublecortin like kinase

KW - endogenous compound

KW - fluorescein isothiocyanate dextran

KW - interleukin 12

KW - interleukin 1beta

KW - interleukin 22

KW - interleukin 6

KW - Ki 67 antigen

KW - pattern recognition receptor

KW - RNA 16S

KW - tumor necrosis factor

JF - FASEB Journal

JA - FASEB J.

LA - English

VL - 34

IS - SUPPL 1

SP -

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1530-6860

AD - C.L. Hennessey

DO - https://dx.doi.org/10.1096/fasebj.2020.34.s1.04699

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=637862573

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1096%2ffasebj.2020.34.s1.04699Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Hennessey&issn=1530-6860&title=FASEB+Journal&atitle=Long-term+Microbiota-Gut-Brain+Axis+Deficits+Following+Neonatal+EPEC+Infection&volume=34&issue=SUPPL+1&spage=1&epage=&date=2020&doi=10.1096%2Ffasebj.2020.34.s1.04699&pmid=&sid=OVID:embase

218.

TY - JOUR

DB - Embase

AN - 637862176

T1 - Acute Administration of Gut Microbial Metabolites Reduces Blood Pressure and Cardiac Contractility

T3 - Experimental Biology Meeting, EB 2020. San Diego, CA United States.

A1 - Poll B.

A1 - Lester L.

A1 - Jun S.

A1 - Berkowitz D.

A1 - Paolocci N.

A1 - Pluznick J.

Y1 - 2020//

N2 - Metabolites produced by the gut microbiota can affect host physiology; one class of these metabolites are short chain fatty acids (SCFAs). Prior work by our laboratory has shown that intravenous administration of SCFAs causes acute hypotension (Pluznick, Protzko et al. 2013) and that treating vessels with SCFAs ex vivo results in vasorelaxation (Natarajan, Hori et al. 2016). To expand upon these findings, we performed IP injections of acetate in mice that were implanted with DSI telemetry transmitters to monitor mean arterial pressure (MAP) and heart rate (HR) in real time. Sodium acetate (acetate is the most abundant SCFA in the circulation) was given at a 1g/kg dose via IP, which elevates plasma acetate by 3-4 fold over baseline (Shubitowski, Poll et al. 2019). Upon sodium acetate IP injection, we observed a rapid and reproducible drop in MAP (-49.2 +/- 10.7 mmHg maximum drop, n=10 males + females, p<0.05) when compared to an IP injection of saline. Surprisingly, in addition to a significant depression of MAP, mice injected with acetate also showed a significant depression in HR (-257.6 +/- 55.8 bpm maximum drop, p<0.05). IP injections of propionate and butyrate, two other SCFA microbial metabolites, had similar depressive effects on MAP and HR, but lactate (control) had no effect. Had SCFAs been solely acting on the vasculature, we would have expected the baroreflex to increase HR. To determine if acetate was having a direct cardiac effect, we used isolated perfused Langendorff hearts from mice. During acetate infusion, Langendorff hearts showed a significant decrease in HR, suggesting a direct mechanism of action (353.8 +/- 39.5 bpm baseline vs 274.6 +/- 21.3 bpm acetate n=5, p<0.05), however the HR drop was on a much slower time scale than seen in vivo. To further probe the effects of acetate on cardiac contractility, pressure volume loops were performed on anesthetized mice and acetate was administered by IP. Inferior vena cava occlusion after acetate IP showed a significant decrease in Preload Recruitable Stroke Work (PRSW, 73.06 +/ - 20.98 vs. 49.06 +/- 22.11 mmHg\*mul baseline vs acetate, n=7 males + females, p<0.05) and end-systolic elastance (Ees, 3.493 +/-1.139 vs. 1.519 +/- 0.5781 mmHg/mul baseline vs. acetate, n=7 males + females, p<0.05), two parameters of load-independent cardiac contractility. Finally, pre-treatment of conscious mice with cardioselective beta antagonist metoprolol blocked the acetate mediated drop in HR in mice implanted with telemetry devices, but the drop in MAP remained intact. We hypothesize that acetate acts independently on the peripheral vasculature and the cardiac muscle, with direct and indirect effects on cardiac function. Both components are likely contributing to the MAP and HR effects seen in whole animals. Together these data demonstrate a previously unknown and potentially detrimental effect of short chain fatty acids on cardiac function.

KW - \*acute drug administration

KW - adult

KW - animal experiment

KW - animal model

KW - animal tissue

KW - \*blood pressure

KW - \*blood pressure monitoring

KW - cardiac muscle

KW - compliance (physical)

KW - conference abstract

KW - controlled study

KW - \*depression

KW - drug toxicity

KW - female

KW - \*gastrointestinal tract

KW - heart function

KW - heart rate

KW - human

KW - in vivo study

KW - inferior cava vein obstruction

KW - intraperitoneal drug administration

KW - male

KW - mean arterial pressure

KW - mouse

KW - nonhuman

KW - \*preload recruitable stroke work

KW - pressoreceptor reflex

KW - telemetry

KW - vascularization

KW - acetic acid

KW - beta adrenergic receptor blocking agent

KW - butyric acid

KW - metoprolol

KW - propionic acid

KW - short chain fatty acid

KW - sodium chloride

JF - FASEB Journal

JA - FASEB J.

LA - English

VL - 34

IS - SUPPL 1

SP -

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1530-6860

AD - B. Poll

DO - https://dx.doi.org/10.1096/fasebj.2020.34.s1.02910

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=637862176

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1096%2ffasebj.2020.34.s1.02910Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Poll&issn=1530-6860&title=FASEB+Journal&atitle=Acute+Administration+of+Gut+Microbial+Metabolites+Reduces+Blood+Pressure+and+Cardiac+Contractility&volume=34&issue=SUPPL+1&spage=1&epage=&date=2020&doi=10.1096%2Ffasebj.2020.34.s1.02910&pmid=&sid=OVID:embase

219.

TY - JOUR

DB - Embase

AN - 633659321

T1 - Fulminant septicemia in a post-olt patient: An important consequence of food-borne illness

T3 - 2020 Annual Scientific Meeting of the American College of Gastroenterology, ACG 2020. Nashville, TN United States.

A1 - Shah T.

A1 - Huq N.

A1 - Begum R.

Y1 - 2020//

N2 - INTRODUCTION: Bacteremia in the liver transplant recipient population can lead to fatality if not recognized and treated early in the disease course. Some etiologies remain nuanced and can be triggered by a change in the gut microbiome. We present a case of fatal enteropathogenic bacteremia with suspected trigger of prior consumption of seafood. CASE DESCRIPTION/METHODS: A 60 year old female with orthotopic liver transplant on tacrolimus monotherapy presented to the emergency department with fever, altered mental status and jaundice. The patient had reportedly been vomiting for four days after ingestion of shrimp at a seafood restaurant and came to the hospital on day 5 of her symptoms. Initial labs were AST of 1,710 U/L, ALT of 416 U/L, ALP of 216 U/L, serum creatinine 1.53 mg/dL(baseline 0.66-0.70 mg/dL), WBC count 31.9 K/mcL, Hgb of 6.5 g/dL(baseline 12.0-13.0), total bilirubin of 51.6 mg/dL (ULN 1.0 mg/dL), direct bilirubin of 0.8 mg/dL, and lactic acid of 17.4 mmol/L. Liver ultrasound showed pneumobilia and echogenic and heterogenic liver parenchyma. The patient was placed on IV broad spectrum antibiotics and triaged to the surgical intensive care unit. Repeat labs revealed hemoglobin of 3 g/dL, lactic acid 20 mmol/L, AST 3,371 U/L, ALT 660 U/L and total bilirubin of 27.3 mg/dL. She developed worsening abdominal distention and hemodynamic instability and bedside explorative laparotomy was performed as the only potential option for survival but no necrosis, purulence, perforation, or hemoperitoneum was found. The patient became pulseless and died less than 6 hours from her initial presentation. Autopsy revealed 3.5 cm of left lobe necrosis/abscess and extensive, illdefined right lobe necrosis/early abscess (>10 cm) with grossly evident purulent material. Cultures from the liver specimen grew clostridium perfringens. DISCUSSION: Fatal septicemia is a rare but significant complication that can be triggered by foodborne illnesses in liver transplant recipients. Clostridium perfringens has also been reported as a rare infectious agent in the literature but is known to cause massive hemolysis as seen in this patient. The exact mechanism of disease in our patient is uncertain, however it is likely that a component of gut dysbiosis played a role. In the setting of an antecedent gastroenteritis certain gut bacteria, such as c.perfringens, can be liberated to cause significant morbidity and transplant patients should be made aware that seafood and undercooked delicacies ought to be avoided altogether.

KW - abdominal distension

KW - abscess

KW - adult

KW - alanine aminotransferase blood level

KW - aspartate aminotransferase level

KW - autopsy

KW - bacteremia

KW - case report

KW - clinical article

KW - Clostridium perfringens

KW - complication

KW - conference abstract

KW - creatinine blood level

KW - drug therapy

KW - emergency ward

KW - female

KW - fever

KW - \*food poisoning

KW - gastroenteritis

KW - hemodynamics

KW - hemolysis

KW - hemoperitoneum

KW - human

KW - human tissue

KW - ingestion

KW - intestine flora

KW - jaundice

KW - laparotomy

KW - leukocyte count

KW - liver graft

KW - liver parenchyma

KW - mental health

KW - middle aged

KW - monotherapy

KW - morbidity

KW - necrosis

KW - nonhuman

KW - perforation

KW - restaurant

KW - sea food

KW - \*septicemia

KW - shrimp

KW - surgical intensive care unit

KW - ultrasound

KW - vomiting

KW - bilirubin glucuronide

KW - endogenous compound

KW - hemoglobin

KW - lactic acid

KW - tacrolimus

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 115

IS - SUPPL

SP - S1271

CY - Netherlands

PB - Wolters Kluwer Health

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DO - https://dx.doi.org/10.14309/01.ajg.0000711612.01727.0c

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=633659321

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.14309%2f01.ajg.0000711612.01727.0cLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Shah&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=Fulminant+septicemia+in+a+post-olt+patient%3A+An+important+consequence+of+food-borne+illness&volume=115&issue=SUPPL&spage=S1271&epage=&date=2020&doi=10.14309%2F01.ajg.0000711612.01727.0c&pmid=&sid=OVID:embase

220.

TY - JOUR

DB - Embase

AN - 633657672

T1 - Epidemiology of Irritable Bowel Syndrome (IBS) in Hospitalized Patients with Inflammatory Bowel Disease (IBD); Nationwide Inpatient Sample Analysis from 2007 to 2016

T3 - 2020 Annual Scientific Meeting of the American College of Gastroenterology, ACG 2020. Nashville, TN United States.

A1 - Ali S.

A1 - Khetpal N.

A1 - Gao Y.

A1 - Hussain S.

A1 - Shuja A.

Y1 - 2020//

N2 - INTRODUCTION: Acute phase of IBD with inflamed gut is clearly different from the apparently normal mucosa of IBS. Studies has detected immune, biochemical, enteric nerve changes and dys-biosis in IBS similar to IBD. With more effective treatments for IBD, more patients with IBD in remission are being detected with persistent abnormalities of sensation, motility and gut microbiota resulting in IBS- like symptoms, reflecting a possible overlap between IBS and IBD. The objectives are to study epidemiology of IBS in IBD patients. METHOD(S): We analysed the Nationwide Inpatient Sample database from 2007-2016 for all subjects > 18 years with discharge diagnosis of IBD (Ulcerative Colitis & Crohn's disease) with or without IBS as primary or secondary diagnosis via ICD 9 and ICD-10 codes. All analyses were performed using SAS (version 4.0). RESULT(S): From 2007-2016 there were total 212,318 discharges of UC and 365,258 of CD patients. There is an annual rise in prevalence of IBS from 2007-2015 in both UC and CD. Most patients with IBS in both cohorts were 18-44 years old (36%, 45%); females (67%, 72%); Caucasians (81%, 82.2%), morbidly obese with BMI > 40 (60%, 63%). Most IBS admission in both cohorts were non elective (84.8%, 85.77%); insurance type private (42.01%, 40.07%), and more prevalent in urban teaching hospitals (54.87%, 53.5 %). IBS was less frequent in fistulizing, obstructive, and stricturing IBD; less frequent in IBD with malnutrition, anemia, perianal disease, hypovolemia, and electrolyte disturbance. Overall, IBS is less frequent in complicated UC and CD. Patients with psychiatric disorders, opioid use, and HIV had statistically significant negative association with the presence of IBS in both cohorts. In UC cohort, mean length of stay (LoS) was lower in IBS patients (5.64 vs. 5.99, < 0.0001). Similarly total charges per admission were lower for IBS patients (40418 vs. 48413, P < 0.0001). In CD cohort, mean LoS was lower in IBS patients (5.06 vs. 5.31, < 0.0001). Similarly, total charges per admission were lower for IBS patients (33712 vs. 39017, P < 0.0001). CONCLUSION(S): Our analysis concludes IBS is increasing in IBD patients, especially those patients who are young, females, Caucasians, morbidly obese, having private insurance and in urban teaching hospitals. IBS in IBD may be predictive of a shorter LoS. With a rising prevalence, it is important to screen and diagnose IBS in IBD and refer patients for evidence-based treatment to address unmet patient needs and reduce health care utilization.

KW - adult

KW - anemia

KW - body mass

KW - Caucasian

KW - cohort analysis

KW - conference abstract

KW - controlled study

KW - \*Crohn disease

KW - electrolyte disturbance

KW - female

KW - health care utilization

KW - \*hospital patient

KW - human

KW - Human immunodeficiency virus

KW - human tissue

KW - hypovolemia

KW - ICD-10

KW - ICD-9

KW - insurance

KW - \*irritable colon

KW - length of stay

KW - major clinical study

KW - male

KW - malnutrition

KW - mental disease

KW - nonhuman

KW - obesity

KW - prevalence

KW - teaching hospital

KW - ulcerative colitis

KW - opiate

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 115

IS - SUPPL

SP - S452

CY - Netherlands

PB - Wolters Kluwer Health

SN - 1572-0241

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DO - https://dx.doi.org/10.14309/01.ajg.0000705556.74428.80

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=633657672

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.14309%2f01.ajg.0000705556.74428.80Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ali&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=Epidemiology+of+Irritable+Bowel+Syndrome+%28IBS%29+in+Hospitalized+Patients+with+Inflammatory+Bowel+Disease+%28IBD%29%3B+Nationwide+Inpatient+Sample+Analysis+from+2007+to+2016&volume=115&issue=SUPPL&spage=S452&epage=&date=2020&doi=10.14309%2F01.ajg.0000705556.74428.80&pmid=&sid=OVID:embase

221.

TY - JOUR

DB - Embase

AN - 2008026657

T1 - EPIDURAL ABSCESS FROM EROSION OF ESOPHAGEAL STENT: A CRYPTIC CAUSE OF SEPTIC SHOCK

T3 - CHEST 2020 Annual Meeting. Virtual, Online.

A1 - Deutch Z.

A1 - Castro C.

A1 - Krewson T.

A1 - Kourouni I.

Y1 - 2020//

N2 - SESSION TITLE: Medical Student/Resident Critical Care Posters SESSION TYPE: Med Student/Res Case Rep Postr PRESENTED ON: October 18-21, 2020 INTRODUCTION: Esophageal stents are commonly utilized as a palliative measure in patients with inoperable esophageal cancer. While stents can significantly improve symptoms, complications may be life-threatening. We present a case of septic shock from a spinal epidural abscess after esophageal stent erosion. CASE PRESENTATION: A 68-year-old female presented with altered mental status, critical hypoglycemia, hypothermia, coagulopathy, severe lactic acidosis, and was admitted to the MICU. Her medical history was remarkable for alcoholic cirrhosis, chronic renal failure, diabetes mellitus, and squamous cell esophageal cancer. She was previously treated with palliative radiation, brachytherapy, and underwent proximal esophageal stent placement 4 months prior to presentation for management of a malignant esophageal stricture that had failed several balloon dilatations. An initial computed tomography (CT) chest exam demonstrated localized bone destruction of the anterior T2 and T3 vertebral bodies immediately adjacent to the proximal end of the stent, along with a small amount of air in the adjacent intervertebral disc and epidural space (Figure 1). Vertebral osteomyelitis was confirmed on magnetic resonance imaging (MRI) of the cervical and thoracic spine, with a ventral epidural abscess spanning the T1-T3 levels, without cord compression. Because the patient also suffered an NSTEMI, the decision was made to medically treat the infection and optimize the patient prior to neurosurgical intervention. An asymmetric lower extremity exam at day 4 prompted a repeat spinal MRI which revealed a new, longitudinally extensive dorsal epidural abscess from T5-T8, causing cord compression (Figure 2). This prompted urgent posterior surgical decompression of the thoracic spine (T4-T7) with abscess evacuation. Blood cultures and intra-operative cultures grew Streptococcus Viridans. While the patient had transient clinical and neurological improvement after this source control, she unfortunately passed away 4 weeks later from complications related to decompensated cirrhosis. DISCUSSION: Esophageal stent placement in a patient with history of malignancy treated with radiation is associated with a substantial incidence of delayed major complications which could be fatal. Complications occur more commonly when the stent is placed more proximally than distally. Spinal epidural abscesses arising from direct stent erosion of the esophagus are rare (1-2). Stents may also erode into adjacent organs such as blood vessels, bronchi, pericardium, and vertebrae. A history of chemoradiation is the largest risk factor. Staphylococcus aureus is the most common pathogen, but infections may be polymicrobial from enteric flora (1). CONCLUSION(S): A high index of suspicion, early identification and source control is the first choice for patients with epidural abscesses. Reference #1: Li CY, et al. "A rare complication of esophageal stent: spinal epidural abscess." The Annals of Thoracic Surgery." 2009 Nov. 88(5): 1700-1702. Reference #2: Boulis NM, et al. "Epidural abscess: a delayed complication of esophageal stenting for benign stricture." The Annals of Thoracic Surgery. 1999 Aug. 68(2): 568-570. DISCLOSURES: No relevant relationships by Chloe Castro, source=Web Response No relevant relationships by Zachary Deutch, source=Web Response No relevant relationships by Ismini Kourouni, source=Web Response No relevant relationships by Thomas Krewson, source=Web ResponseCopyright © 2020 American College of Chest Physicians

KW - aged

KW - alcohol liver cirrhosis

KW - alpha hemolytic Streptococcus

KW - bacterium culture

KW - balloon dilatation

KW - blood clotting disorder

KW - blood culture

KW - blood vessel

KW - bone destruction

KW - brachytherapy

KW - bronchus

KW - cancer patient

KW - cancer surgery

KW - case report

KW - cervical spine

KW - chemoradiotherapy

KW - chronic kidney failure

KW - clinical article

KW - complication

KW - computer assisted tomography

KW - conference abstract

KW - decompensated liver cirrhosis

KW - decompression surgery

KW - diabetes mellitus

KW - epidural abscess

KW - epidural space

KW - esophageal squamous cell carcinoma

KW - esophageal stent

KW - esophagus stenosis

KW - female

KW - human

KW - hypoglycemia

KW - hypothermia

KW - intervertebral disk

KW - intestine flora

KW - lactic acidosis

KW - lower limb

KW - medical history

KW - mental health

KW - non ST segment elevation myocardial infarction

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - osteomyelitis

KW - pericardium

KW - radiotherapy

KW - risk factor

KW - \*septic shock

KW - spinal cord compression

KW - Staphylococcus aureus

KW - surgery

KW - thoracic spine

KW - thorax surgery

KW - vertebra body

KW - cyproterone acetate plus ethinylestradiol

JF - Chest

JA - Chest

LA - English

VL - 158

IS - 4 Supplement

SP - A904

CY - Netherlands

PB - Elsevier Inc.

SN - 0012-3692

SN - 1931-3543

DO - https://dx.doi.org/10.1016/j.chest.2020.08.840

PT - Conference Abstract

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ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.chest.2020.08.840Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Deutch&issn=0012-3692&title=Chest&atitle=EPIDURAL+ABSCESS+FROM+EROSION+OF+ESOPHAGEAL+STENT%3A+A+CRYPTIC+CAUSE+OF+SEPTIC+SHOCK&volume=158&issue=4+Supplement&spage=A904&epage=&date=2020&doi=10.1016%2Fj.chest.2020.08.840&pmid=&sid=OVID:embase

222.

TY - JOUR

DB - Embase

AN - 2008025050

T1 - NONCOMPLIANCE OF CREON: A RARE CAUSE OF HEPATIC ENCEPHALOPATHY

T3 - CHEST 2020 Annual Meeting. Virtual, Online.

A1 - Gulati S.

A1 - Alvarez A.B.

A1 - Burkhart Z.

A1 - Shah K.

Y1 - 2020//

N2 - SESSION TITLE: Medical Student/Resident Critical Care Posters SESSION TYPE: Med Student/Res Case Rep Postr PRESENTED ON: October 18-21, 2020 INTRODUCTION: Non-alcoholic fatty liver disease (NAFLD) caused by excessive nutrition has been recognized as a common cause of chronic liver disease. Recently, studies have shown that malnutrition resulting from exocrine pancreatic insufficiency might cause NAFLD after pancreaticoduodenectomy (PD) (1). Here we present a rare case of NAFLD presenting as hepatic encephalopathy following PD in setting of noncompliance to Creon. CASE PRESENTATION: 37-year-old male with past medical history of chronic pancreatitis status post PD with subsequent pancreatic insufficiency, opiate dependence in setting of chronic pain presented to the Emergency Department (ED) with altered mental status. According to mother patient had become increasingly forgetful and confused over past month. Initial Vitals were temperature 98.6F, blood pressure 124/66, pulse rate 120, respiratory rate 27 saturation at 97% on room air. On physical exam, he was well developed male with waxing and waning attentiveness; oriented only to person with slurred incoherent speech and notable asterixis. Labs were significant for WBC 9.8k, Lactic acid (LA) 6.1, Creatinine 0.47, TSH 1.6, Vitamin D <12.8, AST 93, ALT 40, ALP 166, INR 1.9 and Ammonia 151. Ultrasound abdomen showed hepatomegaly with diffuse hepatic steatosis. Computed tomography (CT) abdomen showed similar findings in addition to severe colonic stool burden and reactive lymphadenopathy. CT head was unremarkable. Over the initial few hours of presentation, patient became increasingly somnolent with worsening of LA 12.1 and Ammonia 213. He was intubated for airway protection. He was started on lactulose, rifaximin and creon (pancreatic enzyme replacement therapy) along with tube feeds. Over the duration of four days while still intubated, his mentation improved, and he started following commands. DISCUSSION: With PD becoming safer and gold standard for treatment of periampullary pathologies, its effect on normal physiology and clinical presentation should be considered in patient care. Pathophysiologic reason for the development of NAFLD after PD include (i) malabsorption of essential amino acids including choline which reduces plasma level of apoprotein B causing impaired hepatic transport of triglycerides; (ii) insufficient secretion of insulin which enhances peripheral lipolysis and increases hepatic free fatty acid uptake; (iii) overgrowth of small intestinal bacteria causing hepatic stimulation of lipopolysaccharide (1,2). Recent studies have shown beneficial effects of pancreatic enzyme supplementation therapy to prevent NAFLD after PD (3). CONCLUSION(S): Prophylactic supplementation of pancreatic enzymes should be considered for prevention of NAFLD in patients who have undergone PD. Reference #1: Kang CM, Lee JH. Pathophysiology after pancreaticoduodenectomy. World J Gastroenterol. 2015;21(19):5794-5804. doi:10.3748/wjg.v21.i19.5794 Reference #2: Kato H, Isaji S, Azumi Y, et al. Development of nonalcoholic fatty liver disease (NAFLD) and nonalcoholic steatohepatitis (NASH) after pancreaticoduodenectomy: proposal of a postoperative NAFLD scoring system. J Hepatobiliary Pancreat Sci. 2010;17(3):296-304. doi:10.1007/s00534-009-0187-2 Reference #3: Sato T, Matsuo Y, Shiga K, Morimoto M, Miyai H, Takeyama H. Factors that predict the occurrence of and recovery from non-alcoholic fatty liver disease after pancreatoduodenectomy. Surgery. 2016;160(2):318-330. doi:10.1016/j.surg.2016.04.009 DISCLOSURES: No relevant relationships by Andres Borja Alvarez, source=Web Response No relevant relationships by Zachary Burkhart, source=Web Response No relevant relationships by Samridhi Gulati, source=Web Response No relevant relationships by kinnari SHAH, source=Web ResponseCopyright © 2020 American College of Chest Physicians

KW - abdomen

KW - adult

KW - airway

KW - alanine aminotransferase blood level

KW - ambient air

KW - aspartate aminotransferase level

KW - attention

KW - blood pressure

KW - breathing rate

KW - case report

KW - chronic pain

KW - chronic pancreatitis

KW - clinical article

KW - colon

KW - computer assisted tomography

KW - conference abstract

KW - drug combination

KW - drug therapy

KW - emergency ward

KW - fatty acid transport

KW - feces

KW - female

KW - flapping tremor

KW - gene expression

KW - gold standard

KW - \*hepatic encephalopathy

KW - hepatomegaly

KW - human

KW - human tissue

KW - international normalized ratio

KW - intestine flora

KW - lipolysis

KW - lymphadenopathy

KW - malabsorption

KW - male

KW - medical history

KW - mental health

KW - nonalcoholic steatohepatitis

KW - nonhuman

KW - opiate addiction

KW - pancreatic insufficiency

KW - pancreaticoduodenectomy

KW - patient care

KW - physical examination

KW - prevention

KW - protein blood level

KW - protein expression

KW - pulse rate

KW - remission

KW - scoring system

KW - small intestine

KW - speech

KW - substitution therapy

KW - surgery

KW - thinking

KW - ultrasound

KW - ammonia

KW - apolipoprotein B

KW - choline

KW - creatinine

KW - endogenous compound

KW - fatty acid

KW - insulin

KW - lactic acid

KW - lactulose

KW - lipopolysaccharide

KW - pancreas enzyme

KW - pancrelipase

KW - rifaximin

KW - thyrotropin

KW - triacylglycerol

KW - vitamin D

JF - Chest

JA - Chest

LA - English

VL - 158

IS - 4 Supplement

SP - A836

CY - Netherlands

PB - Elsevier Inc.

SN - 0012-3692

SN - 1931-3543

DO - https://dx.doi.org/10.1016/j.chest.2020.08.778

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2008025050

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fj.chest.2020.08.778Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gulati&issn=0012-3692&title=Chest&atitle=NONCOMPLIANCE+OF+CREON%3A+A+RARE+CAUSE+OF+HEPATIC+ENCEPHALOPATHY&volume=158&issue=4+Supplement&spage=A836&epage=&date=2020&doi=10.1016%2Fj.chest.2020.08.778&pmid=&sid=OVID:embase

223.

TY - JOUR

DB - Embase

AN - 632595307

T1 - Metabolites of microbiota in assessment of the risk of postoperative complications in cardiosurgery

T3 - 43rd Annual Conference on Shock. Toronto, ON Canada.

A1 - Pautova A.K.

A1 - Beloborodova N.V.

A1 - Babaev M.

A1 - Eremenko A.A.

A1 - Dymova O.V.

Y1 - 2020//

N2 - Introduction: The development of accurate and applicable methods to predict and assess the severity of patient condition is an urgent need in critical care medicine. We have shown that change in serum concentrations of some phenolic metabolites of gut microbiota reflected the dynamics of patient condition and might be used for objective monitoring of the treatment [1]. The aim of this study was to assess if preoperative levels of microbial metabolites can be used to predict complications in cardiac surgery. Method(s): The study included cardiosurgical patients (n = 27), average age 63 years (20 male) with various cardiac surgeries, including coronary bypass surgery, prosthetic valves and thoracoabdominal aorta. Patients were divided into 2 groups. Group A: patients (n = 18) were in ICU less than 36 hours after the surgery (median = 22 hours) and had no postoperative complications. Group B: patients (n = 9) were in ICU more than 37 hours after the surgery (median = 89 hours); 78% of these patients (n = 7) had thoracoabdominal aortic surgery, and 89% (n = 8) had postoperative delirium, which in 2 cases were accompanied by hypercapnic respiratory failure. The serum samples (n = 54) taken before (D0) and after (D1) the surgery were analyzed using GC-MS. The differences in concentrations of benzoic (BA), phenylacetic (PhAA), phenyllactic (PhLA), 4-hydroxybenzoic (p-HBA), 4-hydroxyphenylacetic (p-HPhAA), 4-hydroxyphenyllactic (p- HPhLA) acids, and their sum (Sum) were calculated using Mann- Whitney U test. The clearance of the phenolic acids were calculated as the difference between concentrations in serum samples taken after and before the surgery (D1-D0). Result(s): The median values of Sum concentrations before (D0) and after (D1) the surgery in Group A were 3.8 and 3.9 mmol/l; in Group B they were 6.4 and 9.2 mmol/l. The statistically significant differences in groups A and B were identified in the level of BA (p = 0.046), PhAA (p = 0.002), p-HBA (p = 0.017) and Sum (p = 0.0004) which were measured in the serum samples taken before (D0) the surgery. Also, the differenced in these groups were revealed in the clearance level of PhLA (p = 0.0005) and p-HPhLA (p = 0.00006). The results of a univariate logistic regression analysis showed that the probability of complications was 10.5 times higher in patients with baseline of Sum (D0) more than 3.5 mmol/l (OR - 10.5; 95% CI 1.35-81.7, p = 0.026). Conclusion(s): The preoperative analysis of microbial metabolites allows to reliably identify the group of patients with the highest risk of developing postoperative organ dysfunctions.

KW - adult

KW - aortic surgery

KW - complication

KW - conference abstract

KW - \*coronary artery bypass surgery

KW - heart valve prosthesis

KW - human

KW - human tissue

KW - hypoventilation

KW - major clinical study

KW - male

KW - mass fragmentography

KW - \*microflora

KW - middle aged

KW - nonhuman

KW - \*postoperative delirium

KW - preoperative evaluation

KW - probability

KW - rank sum test

KW - \*risk assessment

KW - surgery

KW - diclofenac

JF - Shock

JA - Shock

LA - English

VL - 53

IS - Supplement 1

SP - 75

CY - Netherlands

PB - Lippincott Williams and Wilkins

SN - 1540-0514

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PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=632595307

ER -

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224.

TY - JOUR

DB - Embase

AN - 632061967

T1 - Acyloxyacyl hydrolase regulates gut dysbiosis-mediated pelvic pain and depressive-like behavior

T3 - 2020 Annual Meeting of the American Urological Association. Washington, DC United States.

A1 - Rahman-Enyart A.

A1 - Yang W.

A1 - Yaggie R.

A1 - Rosen J.

A1 - Rudick C.

A1 - Bushell C.

A1 - Welge M.

A1 - White B.

A1 - Schaeffer A.

A1 - Klumpp D.

Y1 - 2020//

N2 - INTRODUCTION AND OBJECTIVE: Interstitial cystitis/bladder pain syndrome (IC/BPS) is a debilitating condition of chronic pelvic pain often co-morbid with voiding dysfunction and depression. We have previously identified the locus encoding acyloxyacyl hydrolase, Aoah, as a modulator of pelvic pain severity in an IC murine model. AOAHdeficient mice develop spontaneous pelvic pain and an increased response to induced pelvic pain models, in addition to voiding dysfunction and a depressive-like phenotype. Recent studies in female IC/BPS patients have also indicated fecal dysbiosis, suggesting altered gut flora in AOAH-deficient mice. Therefore, we sought to characterize the gut microbiome of AOAH-deficient mice and identify its role in modulating symptoms of IC/BPS. METHOD(S): For these studies we utilized male wild-type (WT) C57BL/6 and AOAH-deficient mice. To determine cecum and cecal content mass, samples were weighed and reported as the fraction of total body mass. Gut microbiome composition was analyzed using 16S rDNA sequencing and liquid chromatography mass spectrometry. Intestinal barrier integrity was measured using transepithelial/transendothelial electrical resistance (TEER). To address the role of the microbiome on symptoms of IC/BPS, AOAH-deficient mice were co-housed with WT mice or received stool slurry gavage prior to analyses of visceromotor response (VMR) to bladder distension and defensive burying. RESULT(S): We observed that AOAH-deficient mice exhibited an enlarged cecum, a phenotype associated with germ-free rodents, and increased mass of cecal contents. Furthermore, AOAH-deficient mice exhibited both altered microbiota and altered metabolomes compared to WT. TEER was significantly lower in the cecum of AOAHdeficient mice, suggesting a "leaky gut" phenotype. Co-housing AOAHdeficient mice with WT mice resulted in converged microbiota and abrogated the pelvic pain phenotype of AOAH-deficient mice. Alleviation of pelvic pain and anxiety/depressive behavior was also observed by gavage of AOAH-deficient mice with stool slurry of WT mice. CONCLUSION(S): Together, these data indicate that AOAH mediates normal gut microbiota and that the dysbiosis associated with AOAH deficiency is linked to pelvic pain and depressive-like behavior. Therefore, the gut flora may be a potential therapeutic target for treating patients with IC/BPS.

KW - adult

KW - animal experiment

KW - animal model

KW - anxiety

KW - bladder distension

KW - C57BL 6 mouse

KW - cecum content

KW - conference abstract

KW - controlled study

KW - electric resistance

KW - enteric feeding

KW - feces

KW - female

KW - housing

KW - human

KW - interstitial cystitis

KW - \*intestine flora

KW - liquid chromatography-mass spectrometry

KW - male

KW - metabolome

KW - mouse

KW - nonhuman

KW - \*pelvic pain

KW - phenotype

KW - wild type mouse

KW - DNA 16S

KW - endogenous compound

KW - \*hydrolase

JF - Journal of Urology

JA - J. Urol.

LA - English

VL - 203

IS - Supplement 4

SP - e103

CY - Netherlands

PB - Lippincott Williams and Wilkins

SN - 1527-3792

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PT - Conference Abstract

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ER -

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225.

TY - JOUR

DB - Embase

AN - 632379157

T1 - Acute brain dysfunction, host inflammation, and gut dysbiosis during critical illness: A prospective cohort study in mechanically ventilated adults

T3 - American Thoracic Society International Conference, ATS 2020. Philadelphia, PA United States.

A1 - Franz C.

A1 - Kitsios G.

A1 - Alexander S.

A1 - Fair K.

A1 - Morris A.M.

A1 - Girard T.D.

A1 - McVerry B.J.

Y1 - 2020//

N2 - Rationale: Acute brain dysfunction defined as delirium or coma is a common complication of critical illness which is associated with both increased mortality and long-term cognitive dysfunction. Because a physiological interaction between the gut and the brain is increasingly recognized, we hypothesized that gut dysbiosis drives an inflammatory host response that contributes to the pathogenesis of acute brain dysfunction. Objective(s): To determine whether gut dysbiosis in mechanically ventilated patients with acute respiratory failure is associated with increased inflammatory biomarkers and prolonged acute brain dysfunction. Method(s): We prospectively enrolled 124 patients admitted to the ICU with acute respiratory failure. Upon enrollment, we collected rectal swabs and/or stool samples for bacterial 16s rRNA gene sequencing and concomitant plasma samples for host-response biomarker measurements. We identified delirium using daily clinical Intensive Care Delirium Screening Checklist (ICDSC) and Confusion Assessment Method for the ICU (CAM-ICU) assessments. We identified coma using Riker Sedation Agitation Scale or Richmond Agitation Sedation Scale scores. We analyzed associations between acute brain dysfunction, defined as total days of delirium or coma, with clinical variables, clinical outcomes, plasma biomarkers measured at enrollment, and gut microbiome profiles with R software in an unadjusted analysis. Result(s): Of 124 patients enrolled (median age 59 years, 58% male), 105 (85%) were delirious or comatose on at least 1 occasion, with median acute brain dysfunction duration of 3 days (IQR=1-5). Patients with increased total days of delirium or coma had increased 30 and 90-day mortality (p=0.05), longer duration of ICU stay and fewer ventilator-free days (p<0.01). Additionally, higher concentrations of the inflammatory biomarkers interleukin-6 (IL-6, p<0.01), angiopoietin-2 (p=0.04), procalcitonin (p<0.02), and receptor for advanced glycation end-products (RAGE, p=0.02) were associated with a longer duration of acute brain dysfunction. Overall, gut microbiome profiles had a low median alpha diversity (Shannon=2.0, IQR=1.7-2.6), suggestive of gut dysbiosis. However, there was not a significant association between duration of acute brain dysfunction and gut microbiome profiles in alpha or beta diversity. We did not identify any significant associations of gut microbiome profiles with host inflammatory biomarkers. Conclusion(s): In a preliminary analysis, increased duration of acute brain dysfunction was not associated with differences in gut microbial community profiles. However, longer delirium duration was associated with increased host inflammation (IL-6, angiopoietin-2 and RAGE) and worse patient-centered outcomes.

KW - acute respiratory failure

KW - adult

KW - \*artificial ventilation

KW - \*brain dysfunction

KW - checklist

KW - clinical outcome

KW - \*cohort analysis

KW - coma

KW - conference abstract

KW - controlled study

KW - \*critical illness

KW - feces

KW - female

KW - \*gastrointestinal tract

KW - gene sequence

KW - human

KW - human tissue

KW - immune response

KW - \*inflammation

KW - intensive care psychosis

KW - major clinical study

KW - male

KW - microbial community

KW - microbiome

KW - middle aged

KW - mortality

KW - nonhuman

KW - \*prospective study

KW - Richmond Agitation Sedation Scale

KW - software

KW - ventilated patient

KW - advanced glycation end product receptor

KW - angiopoietin 2

KW - biological marker

KW - endogenous compound

KW - interleukin 6

KW - procalcitonin

KW - RNA 16S

JF - American Journal of Respiratory and Critical Care Medicine

JA - Am. J. Respir. Crit. Care Med.

LA - English

VL - 201

IS - 1

SP -

CY - Netherlands

PB - American Thoracic Society

SN - 1535-4970

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UR - https://www.atsjournals.org/doi/abs/10.1164/ajrccm-conference.2020.201.1\_MeetingAbstracts.A6323

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=632379157

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&AN=632379157Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Franz&issn=1535-4970&title=American+Journal+of+Respiratory+and+Critical+Care+Medicine&atitle=Acute+brain+dysfunction%2C+host+inflammation%2C+and+gut+dysbiosis+during+critical+illness%3A+A+prospective+cohort+study+in+mechanically+ventilated+adults&volume=201&issue=1&spage=&epage=&date=2020&doi=&pmid=&sid=OVID:embase

226.

TY - JOUR

DB - Embase

AN - 2005915355

T1 - RESTRAINT STRESS INDUCES DEPRESSIVE-LIKE BEHAVIOR AND INCREASES COLONIC LYMPHOID AGGREGATE FORMATION IN A MOUSE MODEL OF CROHN'S DISEASE

T3 - Digestive Disease Week (DDW) 2020. Chicago United States.

A1 - Gomez-Nguyen A.

A1 - Butto L.

A1 - Basson A.R.

A1 - Hsu K.

A1 - Dark L.M.

A1 - Pizarro T.T.

A1 - Cominelli F.

Y1 - 2020//

N2 - PATIENTS WITH CROHN'S DISEASE (CD) suffer from abnormally high rates of depression and anxiety. Depression among patients with CD are higher than other debilitating chronic medical conditions, such as cancer. Behavioral co-morbidities are associated with increased rates of flares, more severe disease course, and increased rate of corticosteroid prescription. Psychological stress, even among CD patients in remission, is recognized as a risk factor for flare-ups. Despite the well-established relationship between stress and symptom relapse, a rigorous mechanistic explanation remains elusive. Here we demonstrate alterations in the behavioral profile and the mucosal immune system in the SAMP1/YitFc (SAMP1) mouse, a spontaneous model of CD-like ileitis, following exposure to acute and chronic psychological stress. Two separate experiments were performed to evaluate the impact of acute and prolonged restraint stress (RS) on our SAMP1 mice. For each experiment SAMP1 littermates were sex matched and divided into two groups (n = 5-8). Mice were restrained for 180 minutes per day in a 50mL conical tube with several air holes drilled for adequate ventilation. Acute RS mice were restrained for 7 consecutive days. Prolonged RS was performed for 56 consecutive days (8 weeks). Stool samples and weights were recorded regularly. Subsequently, each group was subjected to behavioral testing to determine anxiety-like behavior (open field and elevated plus maze), depressive-like behavior (tail suspension), motor deficits (line crossings and rota-rod), and cognitive deficits (Y-maze). Immediately after, mice were sacrificed and tissue samples were collected for immunological analysis. Mice subjected to both acute and prolonged RS displayed increased immobility time during tail suspension indicating a depressive-like phenotype (p < 0.05). All other behavioral characteristics remained unchanged compared to control. A trend of increased mesenteric lymph node (MLN) dendritic cells (DCs) was seen in both the acute and prolonged RS groups (p = 0.07 and p = 0.08 respectively). Mice subjected to prolonged RS, but not acute RS, developed a pronounced increase colonic growths. Histological staining revealed these growths to be large collections of lymphoid cells which we have termed, "stress-enhanced lymphoid aggregates" (SELAs). Further characterization of the SELAs is underway. The marked difference in the MLN DC population is suggestive of abnormal luminal sampling of intestinal bacteria due to stress-induced dysbiosis. We hypothesize that the emergence of SELAs is a result of this dysbiosis. In addition to further investigating SELAs, characterizing the microbiome and its associated metagenome is a vital next step in our work.Copyright © 2020

KW - adult

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - artificial ventilation

KW - cell population

KW - cognitive defect

KW - \*colon

KW - conference abstract

KW - controlled study

KW - \*Crohn disease

KW - dendritic cell

KW - feces

KW - female

KW - histology

KW - human

KW - ileitis

KW - immobility time

KW - \*immobilization stress

KW - intestine flora

KW - lymphoid cell

KW - male

KW - mental stress

KW - mesentery lymph node

KW - metagenome

KW - motor dysfunction

KW - mouse

KW - \*mouse model

KW - nonhuman

KW - \*Peyer patch

KW - phenotype

KW - remission

KW - risk factor

KW - senescence accelerated mouse

KW - suspension cell culture

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 158

IS - 6 Supplement 1

SP - S

EP - 1036

CY - Netherlands

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

DO - https://dx.doi.org/10.1016/S0016-5085%2820%2933271-6

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed21&NEWS=N&AN=2005915355

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed21&DO=10.1016%2fS0016-5085%252820%252933271-6Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gomez-Nguyen&issn=0016-5085&title=Gastroenterology&atitle=RESTRAINT+STRESS+INDUCES+DEPRESSIVE-LIKE+BEHAVIOR+AND+INCREASES+COLONIC+LYMPHOID+AGGREGATE+FORMATION+IN+A+MOUSE+MODEL+OF+CROHN%27S+DISEASE&volume=158&issue=6+Supplement+1&spage=S&epage=1036&date=2020&doi=10.1016%2FS0016-5085%252820%252933271-6&pmid=&sid=OVID:embase

227.

TY - JOUR

DB - Embase

AN - 625543965

ID - 30561131 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30561131]

T1 - Fecal Microbiota Transplantation for the Critically Ill Patient

A1 - Limketkai B.N.

A1 - Hendler S.

A1 - Ting P.-S.

A1 - Parian A.M.

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AO - Parian, Alyssa M.; ORCID: https://orcid.org/0000-0001-9995-7942

Y1 - 2019//

N2 - The gut microbiome has been implicated in a diversity of diseases, such as irritable bowel syndrome, inflammatory bowel disease, hepatic steatosis, metabolic syndrome, obesity, and anxiety. Current research also suggests the presence of a bidirectional relationship between the composition of the gut microbiome and critical illness. In the critical care setting, multiple factors (eg, use of antibiotics, aberrant nutrition, bloodstream infections, bowel ischemia, and abnormal bowel motility) strongly contribute to intestinal dysbiosis. Conversely, early studies have associated intestinal dysbiosis with worse clinical outcomes in the intensive care unit (ICU), such as infection, organ failure, and mortality. The possibility of intestinal dysbiosis influencing these clinical outcomes has prompted the question of whether microbiome manipulation strategies, such as fecal microbiota transplantation (FMT), may have a role in the management of critical illness. After a literature search of FMT used in the ICU for indications other than Clostridium difficile infections, we found 4 case reports that describe the use of FMT in 5 critically ill patients with systemic inflammatory responses and no clear source of infection. This review discusses the relationship between the gut microbiome and critical illness, early data on the use of FMT in critical care, and safety considerations of FMT in the critically ill and immunocompromised populations.Copyright © 2018 American Society for Parenteral and Enteral Nutrition

KW - Acinetobacter

KW - clinical outcome

KW - Clostridium difficile infection

KW - \*critically ill patient

KW - dysbiosis

KW - \*fecal microbiota transplantation

KW - human

KW - infection

KW - intensive care unit

KW - intestine flora

KW - intestine motility

KW - microbiome

KW - mortality

KW - multiple organ failure

KW - Mycoplasma

KW - review

KW - systemic inflammatory response syndrome

JF - Nutrition in Clinical Practice

JA - Nutr. Clin. Prac.

LA - English

VL - 34

IS - 1

SP - 73

EP - 79

CY - United States

PB - John Wiley and Sons Inc

SN - 0884-5336

SN - 1941-2452

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UR - http://www.sagepub.com/journalsProdDesc.nav?prodId=Journal201896

DO - https://dx.doi.org/10.1002/ncp.10228

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=625543965

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1002%2fncp.10228Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Limketkai&issn=0884-5336&title=Nutrition+in+Clinical+Practice&atitle=Fecal+Microbiota+Transplantation+for+the+Critically+Ill+Patient&volume=34&issue=1&spage=73&epage=79&date=2019&doi=10.1002%2Fncp.10228&pmid=30561131&sid=OVID:embase

228.

TY - JOUR

DB - Embase

AN - 631345106

ID - 30925514 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30925514]

T1 - The microbiome: Implications for perioperative and critical care

A1 - Lukovic E.

A1 - Moitra V.K.

A1 - Freedberg D.E.

Y1 - 2019//

N2 - Purpose of reviewThe host-microbiota relationship is integral in human health and can be rapidly disrupted in ways that may contribute to poor recovery from surgery or acute illness. We review key studies by organ system to understand the effect of perioperative and critical illness stress on the microbiota. Throughout the review, our focus is on potential interventions that may be mediated by the microbiome.Recent findingsAlthough any perioperative intervention can have a profound impact on the gut microbiota, it is less clear how such changes translate into altered health outcomes. Preoperative stress (anxiety, lack of sleep, fasting), intraoperative stress (surgery itself, volatile anesthetics, perioperative antibiotics, blood transfusions), and postoperative stress (sepsis, surgical site infections, acute respiratory distress syndrome, catecholamines, antibiotics, opioids, proton pump inhibitors) have all been associated with alterations of the commensal microflora. These factors (e.g. administration of antibiotics or opioids) can create a favorable environment for emergence of pathogen virulence and development of serious infections and multiorgan failure. Data to recommend therapies aimed at restoring a disrupted microbiota, such as probiotics/prebiotics and fecal microbiota transplants is currently scarce.SummaryThe microbiome is likely to play an important role in the perioperative and ICU setting but existing data is largely descriptive. There is an expanding number of mechanistic studies that attempt to disentangle the complicated bi-directional relationship between the host and the resident microbiota. When these results are combined with ongoing clinical studies, we should be able to offer better therapies aimed at restoring the microbiota in the future.Copyright © 2019 Wolters Kluwer Health, Inc. All rights reserved.

KW - adult respiratory distress syndrome

KW - anxiety

KW - blood transfusion

KW - cardiovascular system

KW - central nervous system

KW - commensal

KW - \*critical illness

KW - endocrine system

KW - fasting

KW - fecal microbiota transplantation

KW - gastrointestinal infection

KW - hematology

KW - host microbe interaction

KW - human

KW - \*intensive care

KW - \*intestine flora

KW - \*perioperative period

KW - priority journal

KW - psychological aspect

KW - respiratory system

KW - review

KW - sepsis

KW - sleep debt

KW - surgical infection

KW - urogenital system

KW - virulence

KW - antibiotic agent

KW - catecholamine

KW - opiate

KW - prebiotic agent

KW - probiotic agent

KW - proton pump inhibitor

JF - Current Opinion in Anaesthesiology

JA - Curr. Opin. Anaesthesiol.

LA - English

VL - 32

IS - 3

SP - 412

EP - 420

CY - United Kingdom

PB - Lippincott Williams and Wilkins (E-mail: agents@lww.com)

SN - 0952-7907

SN - 1473-6500

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UR - http://journals.lww.com/co-anesthesiology/pages/default.aspx

DO - https://dx.doi.org/10.1097/ACO.0000000000000734

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=631345106

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1097%2fACO.0000000000000734Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lukovic&issn=0952-7907&title=Current+Opinion+in+Anaesthesiology&atitle=The+microbiome%3A+Implications+for+perioperative+and+critical+care&volume=32&issue=3&spage=412&epage=420&date=2019&doi=10.1097%2FACO.0000000000000734&pmid=30925514&sid=OVID:embase

229.

TY - JOUR

DB - Embase

AN - 630437964

ID - 31892321 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31892321]

T1 - Post-sepsis syndrome- A n evolving entity that afflicts survivors of sepsis

A1 - Mostel Z.

A1 - Perl A.

A1 - Marck M.

A1 - Mehdi S.F.

A1 - Lowell B.

A1 - Bathija S.

A1 - Santosh R.

A1 - Pavlov V.A.

A1 - Chavan S.S.

A1 - Roth J.

AO - Mostel, Zachary; ORCID: https://orcid.org/0000-0003-0077-464X

Y1 - 2019//

N2 - Background: The sequelae of sepsis were once thought to be independent of sepsis itself and assumed to be either comorbid to sick patients or complications of critical illness. Recent studies have reported consistent patterns of functional disabilities in sepsis survivors that can last from months to years after symptoms of active sepsis had resolved. Body: Post-sepsis syndrome is an emerging pathological entity that has garnered significant interest amongst clinicians and researchers over the last two decades. It is marked by a significantly increased risk of death and a poor health-related quality of life associated with a constellation of long-term effects that persist following the patient's bout with sepsis. These include neurocognitive impairment, functional disability, psychological deficits, and worsening medical conditions. Conclusion(s): This "post-sepsis syndrome" has been the subject of active preclinical and clinical research providing new mechanistic insights and approaches linked to survivor well-being. Here we review important aspects of these research efforts and goals of care for patients who survive sepsis.Copyright © 2019 The Author(s).

KW - cardiovascular disease/co [Complication]

KW - clinical research

KW - \*cognitive defect/co [Complication]

KW - disability/co [Complication]

KW - disease exacerbation

KW - dysbiosis/co [Complication]

KW - functional status

KW - generalized anxiety disorder/co [Complication]

KW - health care cost

KW - hospital readmission

KW - human

KW - immune response

KW - inflammation

KW - major depression/co [Complication]

KW - \*mental disease/co [Complication]

KW - mortality

KW - mortality risk

KW - nervous system inflammation

KW - nonhuman

KW - pathophysiology

KW - physical disability/co [Complication]

KW - posttraumatic stress disorder/co [Complication]

KW - preclinical study

KW - priority journal

KW - quality of life

KW - review

KW - \*sepsis/dm [Disease Management]

KW - \*sepsis/ep [Epidemiology]

KW - \*sepsis/et [Etiology]

KW - \*survivor

KW - trend study

KW - wellbeing

KW - functional disability/co [Complication]

KW - \*post sepsis syndrome

JF - Molecular Medicine

JA - Mol. Med.

LA - English

VL - 26

IS - 1

SP - 6

CY - United Kingdom

PB - BioMed Central Ltd. (E-mail: info@biomedcentral.com)

SN - 1076-1551

SN - 1528-3658

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UR - https://molmed.biomedcentral.com/

DO - https://dx.doi.org/10.1186/s10020-019-0132-z

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=630437964

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1186%2fs10020-019-0132-zLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mostel&issn=1076-1551&title=Molecular+Medicine&atitle=Post-sepsis+syndrome-+A+n+evolving+entity+that+afflicts+survivors+of+sepsis&volume=26&issue=1&spage=6&epage=&date=2019&doi=10.1186%2Fs10020-019-0132-z&pmid=31892321&sid=OVID:embase

230.

TY - JOUR

DB - Embase

AN - 626946131

ID - 30785362 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30785362]

T1 - A review of dupilumab in the treatment of atopic diseases

A1 - Thibodeaux Q.

A1 - Smith M.P.

A1 - Ly K.

A1 - Beck K.

A1 - Liao W.

A1 - Bhutani T.

AO - Thibodeaux, Quinn; ORCID: https://orcid.org/0000-0001-7625-7150

Y1 - 2019//

N2 - Dupilumab is a fully human monoclonal IgG4 antibody directed against the alpha subunit of the IL-4 receptor and prevents the signaling of IL-4 and IL-13, two type 2 cytokines known to be important drivers of atopic diseases. In March of 2017, the United States Food and Drug Administration (FDA) approved dupilumab for the treatment of moderate-to-severe atopic dermatitis in adults that is uncontrolled with topical medications, becoming the first biologic agent approved to treat this chronic skin condition. In October of 2018, Dupilumab received approval by the FDA as an add-on maintenance therapy in patients with moderate-to-severe asthma aged 12 years or older with an eosinophilic phenotype or with oral corticosteroid-dependent asthma. This review summarizes the characteristics of dupilumab and the clinical research that has been published to date, including treatment efficacy and adverse events.Copyright © 2019, © 2019 Taylor & Francis Group, LLC.

KW - article

KW - asthma

KW - Asthma Control Questionnaire

KW - atopic dermatitis/dt [Drug Therapy]

KW - \*atopy/dt [Drug Therapy]

KW - body surface

KW - body weight

KW - chronic sinusitis

KW - conjunctivitis

KW - disease exacerbation

KW - drug bioavailability

KW - drug metabolism

KW - eosinophil count

KW - eosinophilia

KW - epidermis hyperplasia

KW - forced expiratory volume

KW - fractional exhaled nitric oxide

KW - headache

KW - herpes virus infection

KW - Hospital Anxiety and Depression Scale

KW - human

KW - immune response

KW - Kaposi varicelliform eruption

KW - maximum concentration

KW - microbiome

KW - mRNA expression level

KW - nose polyp

KW - numeric rating scale

KW - pathogenesis

KW - peak expiratory flow

KW - peak nasal inspiratory flow

KW - phase 1 clinical trial (topic)

KW - phase 2 clinical trial (topic)

KW - phase 3 clinical trial (topic)

KW - phototherapy

KW - pneumonia

KW - pruritus

KW - questionnaire

KW - randomized controlled trial (topic)

KW - rhinopharyngitis

KW - signal transduction

KW - skin disease assessment

KW - skin infection

KW - Th2 cell

KW - trough concentration

KW - upper respiratory tract infection

KW - azathioprine

KW - biological marker/ec [Endogenous Compound]

KW - C-C motif chemokine 18/ec [Endogenous Compound]

KW - calcineurin inhibitor

KW - carcinoembryonic antigen/ec [Endogenous Compound]

KW - corticosteroid

KW - cyclosporine

KW - \*dupilumab/dt [Drug Therapy]

KW - eotaxin 3/ec [Endogenous Compound]

KW - immunoglobulin E/ec [Endogenous Compound]

KW - immunoglobulin G/ec [Endogenous Compound]

KW - interleukin 13/ec [Endogenous Compound]

KW - interleukin 13 receptor alpha1/ec [Endogenous Compound]

KW - interleukin 31/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 4 receptor type I/ec [Endogenous Compound]

KW - interleukin 4 receptor type II/ec [Endogenous Compound]

KW - leukotriene receptor blocking agent

KW - methotrexate

KW - mycophenolate mofetil

KW - placebo

KW - thymus and activation regulated chemokine/ec [Endogenous Compound]

KW - transcription factor RUNX2/ec [Endogenous Compound]

KW - transcriptome

KW - Eczema Area and Severity Index

XT - atopic dermatitis / drug therapy / dupilumab

XT - atopy / drug therapy / dupilumab

XT - dupilumab / drug therapy / atopic dermatitis

XT - dupilumab / drug therapy / atopy

JF - Human Vaccines and Immunotherapeutics

JA - Hum. Vaccines Immunother.

LA - English

VL - 15

IS - 9

SP - 2129

EP - 2139

CY - United States

PB - Taylor and Francis Inc. (325 Chestnut St, Suite 800, Philadelphia PA 19106, United States)

SN - 2164-5515

SN - 2164-554X

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UR - http://www.tandfonline.com/loi/khvi20

DO - https://dx.doi.org/10.1080/21645515.2019.1582403

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=626946131

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1080%2f21645515.2019.1582403Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Thibodeaux&issn=2164-5515&title=Human+Vaccines+and+Immunotherapeutics&atitle=A+review+of+dupilumab+in+the+treatment+of+atopic+diseases&volume=15&issue=9&spage=2129&epage=2139&date=2019&doi=10.1080%2F21645515.2019.1582403&pmid=30785362&sid=OVID:embase

231.

TY - JOUR

DB - Embase

AN - 2002555282

T1 - Probiotics usage and safety concerns - A review

A1 - Pandey S.

A1 - Pahwa S.

A1 - Gupta C.

Y1 - 2019//

N2 - Probiotics use has gained popularity in recent years for the treatment of chronic as well as non- chronic diseases, however, the safety of such products and their adherence to protocols is still questionable. Recently many cases of secondary diseases like fungemia or Bacteremia have been reported in patients receiving probiotics as a supportive agent. The main concern of this review is to focus on safety perspectives of probiotics and rational use of such products. More so because the market is flooded with a variety of such products while the regulations pertaining to these are quite weak. Growing health concerns, complexity of diseases and health awareness has led to indiscriminate use of these products. Further the cost of these products being on higher side poses an additional burden on the overall economy of the treatment.Copyright © 2019, Global Research Online. All rights reserved.

KW - antibiotic therapy

KW - antigen presenting cell

KW - anxiety disorder/dt [Drug Therapy]

KW - anxiety disorder/si [Side Effect]

KW - autism/dt [Drug Therapy]

KW - autism/si [Side Effect]

KW - Bacillus clausii

KW - bacteremia/si [Side Effect]

KW - bacterial infection/si [Side Effect]

KW - Bifidobacterium

KW - Bifidobacterium longum

KW - colon flora

KW - critically ill patient

KW - depression/dt [Drug Therapy]

KW - depression/si [Side Effect]

KW - diarrhea/dt [Drug Therapy]

KW - diarrhea/si [Side Effect]

KW - \*drug safety

KW - eczema/si [Side Effect]

KW - endocarditis/si [Side Effect]

KW - Escherichia coli

KW - fermented dairy product

KW - fungemia/si [Side Effect]

KW - hospital infection/dt [Drug Therapy]

KW - hospital infection/si [Side Effect]

KW - human

KW - immunonutrition

KW - incidence

KW - inflammatory bowel disease/si [Side Effect]

KW - insulin release

KW - intestine cell

KW - intestine flora

KW - irritable colon/si [Side Effect]

KW - Lactobacillus

KW - Lactobacillus acidophilus

KW - Lactobacillus casei

KW - Lactobacillus crispatus

KW - Lactobacillus rhamnosus

KW - lactose intolerance/si [Side Effect]

KW - low density lipoprotein cholesterol level

KW - memory

KW - nonhuman

KW - obsessive compulsive disorder/dt [Drug Therapy]

KW - obsessive compulsive disorder/si [Side Effect]

KW - respiratory tract infection

KW - review

KW - risk factor

KW - Saccharomyces boulardii

KW - sepsis/si [Side Effect]

KW - septicemia/si [Side Effect]

KW - ulcerative colitis/si [Side Effect]

KW - urinary tract infection/si [Side Effect]

KW - viral bronchiolitis/si [Side Effect]

KW - wine

KW - bacteriocin

KW - fructose oligosaccharide

KW - galactose oligosaccharide

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - prebiotic agent

KW - \*probiotic agent/ae [Adverse Drug Reaction]

KW - \*probiotic agent/dt [Drug Therapy]

KW - Saccharomyces boulardii concentrate

KW - synbiotic agent

KW - VSL3

KW - yoghurt/ae [Adverse Drug Reaction]

KW - yoghurt/dt [Drug Therapy]

KW - bifilac

KW - darolac

KW - entero plus

KW - enterogermina

KW - flora BC

KW - sporlac

KW - valgut

KW - vizylac

XT - anxiety disorder / drug therapy / probiotic agent

XT - anxiety disorder / drug therapy / yoghurt

XT - anxiety disorder / side effect / probiotic agent

XT - autism / drug therapy / probiotic agent

XT - autism / side effect / probiotic agent

XT - bacteremia / side effect / probiotic agent

XT - bacterial infection / side effect / probiotic agent

XT - depression / drug therapy / probiotic agent

XT - depression / drug therapy / yoghurt

XT - depression / side effect / probiotic agent

XT - diarrhea / drug therapy / probiotic agent

XT - diarrhea / side effect / probiotic agent

XT - eczema / side effect / probiotic agent

XT - endocarditis / side effect / yoghurt

XT - fungemia / side effect / probiotic agent

XT - hospital infection / drug therapy / probiotic agent

XT - hospital infection / side effect / probiotic agent

XT - inflammatory bowel disease / side effect / probiotic agent

XT - irritable colon / side effect / probiotic agent

XT - lactose intolerance / side effect / probiotic agent

XT - obsessive compulsive disorder / drug therapy / probiotic agent

XT - obsessive compulsive disorder / side effect / probiotic agent

XT - sepsis / side effect / probiotic agent

XT - septicemia / side effect / probiotic agent

XT - ulcerative colitis / side effect / probiotic agent

XT - urinary tract infection / side effect / probiotic agent

XT - viral bronchiolitis / side effect / probiotic agent

XT - probiotic agent / adverse drug reaction / anxiety disorder

XT - probiotic agent / adverse drug reaction / autism

XT - probiotic agent / adverse drug reaction / bacteremia

XT - probiotic agent / adverse drug reaction / bacterial infection

XT - probiotic agent / adverse drug reaction / depression

XT - probiotic agent / adverse drug reaction / diarrhea

XT - probiotic agent / adverse drug reaction / eczema

XT - probiotic agent / adverse drug reaction / fungemia

XT - probiotic agent / adverse drug reaction / hospital infection

XT - probiotic agent / adverse drug reaction / inflammatory bowel disease

XT - probiotic agent / adverse drug reaction / irritable colon

XT - probiotic agent / adverse drug reaction / lactose intolerance

XT - probiotic agent / adverse drug reaction / obsessive compulsive disorder

XT - probiotic agent / adverse drug reaction / sepsis

XT - probiotic agent / adverse drug reaction / septicemia

XT - probiotic agent / adverse drug reaction / ulcerative colitis

XT - probiotic agent / adverse drug reaction / urinary tract infection

XT - probiotic agent / adverse drug reaction / viral bronchiolitis

XT - probiotic agent / drug therapy / anxiety disorder

XT - probiotic agent / drug therapy / autism

XT - probiotic agent / drug therapy / depression

XT - probiotic agent / drug therapy / diarrhea

XT - probiotic agent / drug therapy / hospital infection

XT - probiotic agent / drug therapy / obsessive compulsive disorder

XT - yoghurt / adverse drug reaction / endocarditis

XT - yoghurt / drug therapy / anxiety disorder

XT - yoghurt / drug therapy / depression

JF - International Journal of Pharmaceutical Sciences Review and Research

JA - Int. J. Pharm. Sci. Rev. Res.

LA - English

VL - 57

IS - 2

SP - 68

EP - 75

CY - India

PB - Global Research Online (Plot No: 6, R. K. Lake view, Hebbagudi, Anekal Taluk, Bangalore, India)

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C3 - bifilac: Tablets India, darolac: Aristo Pharmaceuticals, econorm: Dr Reddy's, entero plus: Glaxo SmithKline, enterogermina: Sanofi India, flora bc: Mankind, sporlac: Sanzyme, valgut: Eris life Science, vizylac: Unichem, VSL 3: Sun Pharma

C4 - Tablets India, Aristo Pharmaceuticals, Dr Reddy's, Glaxo SmithKline, Sanofi India, Mankind, Sanzyme, Eris life Science, Unichem, Sun Pharma

UR - http://globalresearchonline.net/journalcontents/v57-2/12.pdf

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=2002555282

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&AN=2002555282Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Pandey&issn=0976-044X&title=International+Journal+of+Pharmaceutical+Sciences+Review+and+Research&atitle=Probiotics+usage+and+safety+concerns+-+A+review&volume=57&issue=2&spage=68&epage=75&date=2019&doi=&pmid=&sid=OVID:embase

232.

TY - JOUR

DB - Embase

AN - 626840264

ID - 30891689 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30891689]

T1 - Functional and Cognitive Status in Clostridium difficile Infection in the Hospitalized Elderly: a Retrospective Study of Two Sites

A1 - Fernandez-Cotarelo M.-J.

A1 - Nagy-Agren S.E.

A1 - Smolkin M.E.

A1 - Jimenez-Diez-Canseco L.

A1 - Perez-Pomata M.-T.

A1 - Shenal B.V.

A1 - Warren C.A.

Y1 - 2019//

KW - acute gastroenteritis

KW - age

KW - aged

KW - case control study

KW - \*Clostridium difficile infection

KW - \*cognitive defect

KW - controlled study

KW - delirium

KW - dementia

KW - deterioration

KW - disease association

KW - disease severity

KW - \*functional status

KW - high risk patient

KW - hospital mortality

KW - hospital readmission

KW - hospitalization

KW - human

KW - length of stay

KW - letter

KW - major clinical study

KW - mental health

KW - poor general condition

KW - prediction

KW - retrospective study

KW - risk factor

KW - very elderly

JF - Journal of General Internal Medicine

JA - J. Gen. Intern. Med.

LA - English

VL - 34

IS - 8

SP - 1392

EP - 1393

CY - United States

PB - Springer New York LLC (E-mail: barbara.b.bertram@gsk.com)

SN - 0884-8734

SN - 1525-1497

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UR - http://www.springerlink.com/content/120414/

DO - https://dx.doi.org/10.1007/s11606-019-04935-6

PT - Letter

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=626840264

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1007%2fs11606-019-04935-6Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fernandez-Cotarelo&issn=0884-8734&title=Journal+of+General+Internal+Medicine&atitle=Functional+and+Cognitive+Status+in+Clostridium+difficile+Infection+in+the+Hospitalized+Elderly%3A+a+Retrospective+Study+of+Two+Sites&volume=34&issue=8&spage=1392&epage=1393&date=2019&doi=10.1007%2Fs11606-019-04935-6&pmid=30891689&sid=OVID:embase

233.

TY - JOUR

DB - Embase

AN - 627609638

T1 - PPI long term use: Risk of neurological adverse events?

A1 - Novotny M.

A1 - Klimova B.

A1 - Valis M.

Y1 - 2019//

N2 - The purpose of this review study is to reveal a potential threat of one type of such widely used and freely distributed drugs, which are proton pump inhibitors that might be the cause of the onset of both dementia and depression. The authors performed a literature review of available studies on the research topic describing the adverse effect of proton pum inhibitors (PPIs) (omeprazole, esomeprazole, lansoprazole, dexlansoprazole, rabeprazole, pantoprazole, dexrabeprazole, ilaprazole). For a long time, PPIs were considered to be completely safe drug substances for both short and long-term use. In recent years, there have been a few contradictory studis of absolute safety, especially in patients, who have long been using PPIs. At this time when depression and dementia are rising in the population, this is a very worrying fact that needs to be highlighted, and which needs to be carefully studied and evaluated, ideally trying to prevent it. The findings of most research studies described in this review indicate that there is a direct association between the onset of dementia and depression on one side and the long-term use of PPIs on the other.Copyright © 2019 Novotny, Klimova and Valis.

KW - abdominal pain/si [Side Effect]

KW - B12 deficiency/si [Side Effect]

KW - bacterial overgrowth

KW - bacterial peritonitis/si [Side Effect]

KW - central nervous system disease/si [Side Effect]

KW - chronic kidney failure/si [Side Effect]

KW - cognitive defect/si [Side Effect]

KW - collagenous colitis/si [Side Effect]

KW - colon cancer/si [Side Effect]

KW - constipation/si [Side Effect]

KW - dementia

KW - depression

KW - diarrhea/si [Side Effect]

KW - disease association

KW - dizziness/si [Side Effect]

KW - drug hypersensitivity/si [Side Effect]

KW - drug interaction

KW - drug safety

KW - fatigue/si [Side Effect]

KW - fracture/si [Side Effect]

KW - gastrointestinal infection/si [Side Effect]

KW - headache/si [Side Effect]

KW - heart muscle ischemia/si [Side Effect]

KW - hematocrit

KW - hepatic encephalopathy/si [Side Effect]

KW - human

KW - hypertrophy/si [Side Effect]

KW - hypomagnesemia/si [Side Effect]

KW - infection/si [Side Effect]

KW - interstitial nephritis/si [Side Effect]

KW - intestine flora

KW - iron deficiency/si [Side Effect]

KW - iron deficiency anemia/si [Side Effect]

KW - \*long term care

KW - mood disorder/si [Side Effect]

KW - nausea/si [Side Effect]

KW - \*neurologic disease/si [Side Effect]

KW - nonhuman

KW - pneumonia/si [Side Effect]

KW - pruritus/si [Side Effect]

KW - rash/si [Side Effect]

KW - review

KW - risk benefit analysis

KW - side effect/si [Side Effect]

KW - stomach cancer/si [Side Effect]

KW - stomach carcinoid/si [Side Effect]

KW - stomach polyp/si [Side Effect]

KW - amyloid beta protein/ec [Endogenous Compound]

KW - dexlansoprazole/ae [Adverse Drug Reaction]

KW - esomeprazole/ae [Adverse Drug Reaction]

KW - hemoglobin/ec [Endogenous Compound]

KW - ilaprazole/ae [Adverse Drug Reaction]

KW - lansoprazole/ae [Adverse Drug Reaction]

KW - omeprazole/ae [Adverse Drug Reaction]

KW - pantoprazole/ae [Adverse Drug Reaction]

KW - \*proton pump inhibitor/ae [Adverse Drug Reaction]

KW - rabeprazole/ae [Adverse Drug Reaction]

KW - gastric fundic mucosal hypertrophy/si [Side Effect]

XT - abdominal pain / side effect / proton pump inhibitor

XT - B12 deficiency / side effect / proton pump inhibitor

XT - bacterial peritonitis / side effect / proton pump inhibitor

XT - central nervous system disease / side effect / omeprazole

XT - chronic kidney failure / side effect / proton pump inhibitor

XT - cognitive defect / side effect / esomeprazole

XT - cognitive defect / side effect / lansoprazole

XT - cognitive defect / side effect / omeprazole

XT - cognitive defect / side effect / pantoprazole

XT - cognitive defect / side effect / proton pump inhibitor

XT - cognitive defect / side effect / rabeprazole

XT - collagenous colitis / side effect / proton pump inhibitor

XT - colon cancer / side effect / proton pump inhibitor

XT - constipation / side effect / proton pump inhibitor

XT - diarrhea / side effect / proton pump inhibitor

XT - dizziness / side effect / proton pump inhibitor

XT - drug hypersensitivity / side effect / proton pump inhibitor

XT - fatigue / side effect / proton pump inhibitor

XT - fracture / side effect / proton pump inhibitor

XT - gastric fundic mucosal hypertrophy / side effect / proton pump inhibitor

XT - gastrointestinal infection / side effect / proton pump inhibitor

XT - headache / side effect / proton pump inhibitor

XT - heart muscle ischemia / side effect / proton pump inhibitor

XT - hepatic encephalopathy / side effect / proton pump inhibitor

XT - hypertrophy / side effect / proton pump inhibitor

XT - hypomagnesemia / side effect / proton pump inhibitor

XT - infection / side effect / proton pump inhibitor

XT - interstitial nephritis / side effect / proton pump inhibitor

XT - iron deficiency / side effect / proton pump inhibitor

XT - iron deficiency anemia / side effect / omeprazole

XT - mood disorder / side effect / proton pump inhibitor

XT - nausea / side effect / proton pump inhibitor

XT - neurologic disease / side effect / dexlansoprazole

XT - neurologic disease / side effect / esomeprazole

XT - neurologic disease / side effect / ilaprazole

XT - neurologic disease / side effect / lansoprazole

XT - neurologic disease / side effect / omeprazole

XT - neurologic disease / side effect / pantoprazole

XT - neurologic disease / side effect / proton pump inhibitor

XT - neurologic disease / side effect / rabeprazole

XT - pneumonia / side effect / proton pump inhibitor

XT - pruritus / side effect / proton pump inhibitor

XT - rash / side effect / proton pump inhibitor

XT - side effect / side effect / proton pump inhibitor

XT - stomach cancer / side effect / proton pump inhibitor

XT - stomach carcinoid / side effect / proton pump inhibitor

XT - stomach polyp / side effect / proton pump inhibitor

XT - dexlansoprazole / adverse drug reaction / neurologic disease

XT - esomeprazole / adverse drug reaction / cognitive defect

XT - esomeprazole / adverse drug reaction / neurologic disease

XT - ilaprazole / adverse drug reaction / neurologic disease

XT - lansoprazole / adverse drug reaction / cognitive defect

XT - lansoprazole / adverse drug reaction / neurologic disease

XT - omeprazole / adverse drug reaction / central nervous system disease

XT - omeprazole / adverse drug reaction / cognitive defect

XT - omeprazole / adverse drug reaction / iron deficiency anemia

XT - omeprazole / adverse drug reaction / neurologic disease

XT - pantoprazole / adverse drug reaction / cognitive defect

XT - pantoprazole / adverse drug reaction / neurologic disease

XT - proton pump inhibitor / adverse drug reaction / abdominal pain

XT - proton pump inhibitor / adverse drug reaction / B12 deficiency

XT - proton pump inhibitor / adverse drug reaction / bacterial peritonitis

XT - proton pump inhibitor / adverse drug reaction / chronic kidney failure

XT - proton pump inhibitor / adverse drug reaction / cognitive defect

XT - proton pump inhibitor / adverse drug reaction / collagenous colitis

XT - proton pump inhibitor / adverse drug reaction / colon cancer

XT - proton pump inhibitor / adverse drug reaction / constipation

XT - proton pump inhibitor / adverse drug reaction / diarrhea

XT - proton pump inhibitor / adverse drug reaction / dizziness

XT - proton pump inhibitor / adverse drug reaction / drug hypersensitivity

XT - proton pump inhibitor / adverse drug reaction / fatigue

XT - proton pump inhibitor / adverse drug reaction / fracture

XT - proton pump inhibitor / adverse drug reaction / gastric fundic mucosal hypertrophy

XT - proton pump inhibitor / adverse drug reaction / gastrointestinal infection

XT - proton pump inhibitor / adverse drug reaction / headache

XT - proton pump inhibitor / adverse drug reaction / heart muscle ischemia

XT - proton pump inhibitor / adverse drug reaction / hepatic encephalopathy

XT - proton pump inhibitor / adverse drug reaction / hypertrophy

XT - proton pump inhibitor / adverse drug reaction / hypomagnesemia

XT - proton pump inhibitor / adverse drug reaction / infection

XT - proton pump inhibitor / adverse drug reaction / interstitial nephritis

XT - proton pump inhibitor / adverse drug reaction / iron deficiency

XT - proton pump inhibitor / adverse drug reaction / mood disorder

XT - proton pump inhibitor / adverse drug reaction / nausea

XT - proton pump inhibitor / adverse drug reaction / neurologic disease

XT - proton pump inhibitor / adverse drug reaction / pneumonia

XT - proton pump inhibitor / adverse drug reaction / pruritus

XT - proton pump inhibitor / adverse drug reaction / rash

XT - proton pump inhibitor / adverse drug reaction / side effect

XT - proton pump inhibitor / adverse drug reaction / stomach cancer

XT - proton pump inhibitor / adverse drug reaction / stomach carcinoid

XT - proton pump inhibitor / adverse drug reaction / stomach polyp

XT - rabeprazole / adverse drug reaction / cognitive defect

XT - rabeprazole / adverse drug reaction / neurologic disease

JF - Frontiers in Neurology

JA - Front. Neurol.

LA - English

VL - 10

IS - JAN

SP - 1142

CY - Switzerland

PB - Frontiers Media S.A. (E-mail: info@frontiersin.org)

SN - 1664-2295 (electronic)

SN - 1664-2295

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UR - http://www.frontiersin.org/Neurology

DO - https://dx.doi.org/10.3389/fneur.2018.01142

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=627609638

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.3389%2ffneur.2018.01142Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Novotny&issn=1664-2295&title=Frontiers+in+Neurology&atitle=PPI+long+term+use%3A+Risk+of+neurological+adverse+events%3F&volume=10&issue=JAN&spage=1142&epage=&date=2019&doi=10.3389%2Ffneur.2018.01142&pmid=&sid=OVID:embase

234.

TY - JOUR

DB - Embase

AN - 2002006666

ID - 31096592 [https://www.ncbi.nlm.nih.gov/pubmed/?term=31096592]

T1 - Nutritional modulation of immune and central nervous system homeostasis: The role of diet in development of neuroinflammation and neurological disease

A1 - Estrada J.A.

A1 - Contreras I.

Y1 - 2019//

N2 - The gut-microbiome-brain axis is now recognized as an essential part in the regulation of systemic metabolism and homeostasis. Accumulating evidence has demonstrated that dietary patterns can influence the development of metabolic alterations and inflammation through the effects of nutrients on a multitude of variables, including microbiome composition, release of microbial products, gastrointestinal signaling molecules, and neurotransmitters. These signaling molecules are, in turn, implicated in the regulation of the immune system, either promoting or inhibiting the production of pro-inflammatory cytokines and the expansion of specific leukocyte subpopulations, such as Th17 and Treg cells, which are relevant in the development of neuroinflammatory and neurodegenerative conditions. Metabolic diseases, like obesity and type 2 diabetes mellitus, are related to inadequate dietary patterns and promote variations in the aforementioned signaling pathways in patients with these conditions, which have been linked to alterations in neurological functions and mental health. Thus, maintenance of adequate dietary patterns should be an essential component of any strategy aiming to prevent neurological pathologies derived from systemic metabolic alterations. The present review summarizes current knowledge on the role of nutrition in the modulation of the immune system and its impact in the development of neuroinflammation and neurological disease.Copyright © 2019 by the authors. Licensee MDPI, Basel, Switzerland.

KW - Actinobacteria

KW - Akkermansia

KW - amino acid metabolism

KW - apoptosis

KW - Bacteroidetes

KW - central nervous system

KW - Clostridium

KW - colon cancer

KW - cytokine production

KW - \*diet

KW - dietary fiber

KW - DNA transcription

KW - dysbiosis

KW - Escherichia coli

KW - Faecalibacterium

KW - Firmicutes

KW - glycemic index

KW - hepatic encephalopathy

KW - \*homeostasis

KW - immune system

KW - insulin resistance

KW - intestine flora

KW - Lactobacillus

KW - Mediterranean diet

KW - mental health

KW - metabolic syndrome X

KW - microbiome

KW - multiple sclerosis

KW - \*nervous system inflammation

KW - \*neurologic disease

KW - neutrophil chemotaxis

KW - non insulin dependent diabetes mellitus

KW - \*nutrition

KW - obesity

KW - oxidative stress

KW - Prevotella

KW - Proteobacteria

KW - review

KW - septic shock

KW - ulcerative colitis

KW - Verrucomicrobia

KW - adenosine triphosphate/ec [Endogenous Compound]

KW - aromatic hydrocarbon receptor/ec [Endogenous Compound]

KW - bile acid/ec [Endogenous Compound]

KW - cobalamin

KW - docosahexaenoic acid

KW - folic acid

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - inulin/ec [Endogenous Compound]

KW - leukotriene B4/ec [Endogenous Compound]

KW - macrophage inflammatory protein 1alpha/ec [Endogenous Compound]

KW - monocyte chemotactic protein 1/ec [Endogenous Compound]

KW - omega 3 fatty acid

KW - peptide YY/ec [Endogenous Compound]

KW - prostaglandin E2/ec [Endogenous Compound]

KW - resveratrol

KW - short chain fatty acid/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - vitamin D

JF - Nutrients

JA - Nutrients

LA - English

VL - 11

IS - 5

SP - 1076

CY - Switzerland

PB - MDPI AG (Postfach, Basel CH-4005, Switzerland. E-mail: indexing@mdpi.com)

SN - 2072-6643 (electronic)

SN - 2072-6643

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UR - https://www.mdpi.com/2072-6643/11/5/1076/pdf

DO - https://dx.doi.org/10.3390/nu11051076

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=2002006666

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.3390%2fnu11051076Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Estrada&issn=2072-6643&title=Nutrients&atitle=Nutritional+modulation+of+immune+and+central+nervous+system+homeostasis%3A+The+role+of+diet+in+development+of+neuroinflammation+and+neurological+disease&volume=11&issue=5&spage=1076&epage=&date=2019&doi=10.3390%2Fnu11051076&pmid=31096592&sid=OVID:embase

235.

TY - JOUR

DB - Embase

AN - 625096533

ID - 30466159 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30466159]

T1 - Lung inflammation and disease: A perspective on microbial homeostasis and metabolism

A1 - Mendez R.

A1 - Bhattacharya S.K.

A1 - Banerjee S.

AO - Banerjee, Santanu; ORCID: https://orcid.org/0000-0002-3749-0387

Y1 - 2019//

N2 - It is now well appreciated that the human microbiome plays a significant role in a number of processes in the body, significantly affecting its metabolic, inflammatory, and immune homeostasis. Recent research has revealed that almost every mucosal surface in the human body is associated with a resident commensal microbiome of its own. While the gut microbiome and its role in regulation of host metabolism along with its alteration in a disease state has been well studied, there is a lacuna in understanding the resident microbiota of other mucosal surfaces. Among these, the scientific information on the role of lung microbiota in pulmonary diseases is currently severely limited. Historically, lungs have been considered to be sterile and lung diseases have only been studied in the context of bacterial pathogenesis. Recently however, studies have revealed a resilient microbiome in the upper and lower respiratory tracts and there is increased evidence on its central role in respiratory diseases. Knowledge of lung microbiome and its metabolic fallout (local and systemic) is still in its nascent stages and attracting immense interest in recent times. In this review, we will provide a perspective on lung-associated metabolic disorders defined for lung diseases (e.g., chronic obstructive pulmonary disease, asthma, and respiratory depression due to infection) and correlate it with lung microbial perturbation. Such perturbations may be due to altered biochemical or metabolic stress as well. Finally, we will draw evidence from microbiome and classical microbiology literature to demonstrate how specific lung morbidities associate with specific metabolic characteristics of the disease, and with the role of microbiome in this context. © 2018 IUBMB Life, 71(1):152-165, 2019.Copyright © 2018 International Union of Biochemistry and Molecular Biology

KW - acquired immune deficiency syndrome/et [Etiology]

KW - asthma/et [Etiology]

KW - breast feeding

KW - chronic obstructive lung disease/et [Etiology]

KW - consensus

KW - cystic fibrosis/et [Etiology]

KW - diet

KW - environmental factor

KW - \*homeostasis

KW - human

KW - Human immunodeficiency virus infection/et [Etiology]

KW - idiopathic disease/et [Etiology]

KW - immunomodulation

KW - lung cancer/et [Etiology]

KW - \*lung disease/et [Etiology]

KW - lung infection/et [Etiology]

KW - metabolic disorder/et [Etiology]

KW - \*microflora

KW - morbidity

KW - nonhuman

KW - \*pneumonia/et [Etiology]

KW - pollution

KW - respiration depression/et [Etiology]

KW - review

KW - surface property

KW - ventilator associated pneumonia/et [Etiology]

KW - virus infection/et [Etiology]

KW - antibiotic agent

JF - IUBMB Life

JA - IUBMB Life

LA - English

VL - 71

IS - 2

SP - 152

EP - 165

CY - United Kingdom

PB - Blackwell Publishing Ltd

SN - 1521-6543

SN - 1521-6551

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UR - http://iubmb.onlinelibrary.wiley.com/hub/journal/10.1002/(ISSN)1521-6551/

DO - https://dx.doi.org/10.1002/iub.1969

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=625096533

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1002%2fiub.1969Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mendez&issn=1521-6543&title=IUBMB+Life&atitle=Lung+inflammation+and+disease%3A+A+perspective+on+microbial+homeostasis+and+metabolism&volume=71&issue=2&spage=152&epage=165&date=2019&doi=10.1002%2Fiub.1969&pmid=30466159&sid=OVID:embase

236.

TY - JOUR

DB - Embase

AN - 638011456

T1 - A short chain fatty acid produced by the gut microbiota plays a role in blood pressure regulation and cardiac contractility

T3 - Experimental Biology, EB 2019. Orlando, FL United States.

A1 - Poll B.

A1 - Steppan J.

A1 - Lester L.

A1 - Berkowitz D.

A1 - Pluznick J.

Y1 - 2019//

N2 - Recent studies by our laboratory and others have highlighted the important role played by short chain fatty acids (SCFA) produced by the gut microbiota and their effect on host physiology. Acetate, the most abundant SCFA present in the blood, has been shown to modulate blood pressure control through at least two mechanisms; renin release in the juxtaglomerular apparatus, and changes in vascular tone in peripheral resistance beds (Pluznick, Protzko et al. 2013). Prior studies by our laboratory have shown that intravenous administration of SCFAs causes acute hypotension in anesthetized mice (Pluznick, Protzko et al. 2013). These prior studies suggested that acetate was acting purely on the peripheral vasculature to cause a vasodilatory effect, as treating vessels with acetate ex-vivo resulted in relaxation (Natarajan, Hori et al. 2016). To expand upon these findings, here we performed IP injections of acetate in mice that were implanted with DSI telemetry transmitters to monitor blood pressure and heart rate (HR) in real time. Sodium acetate was delivered at a 1g/kg dose via IP, a dose which we have previously found to elevate plasma acetate by 3-4 fold over baseline. This resulted in a rapid and reproducible drop in mean arterial pressure (MAP) (-54.32 +/-14.20 mmHg maximum drop, n=4, p<0.05) when compared to an IP injection of the same volume of saline. The duration, but not the magnitude of the blood pressure drop was dose dependent based on IP injections of sodium acetate at 0.625 g/kg (27.08 +/-4.80 minutes to 1/2 recovery vs 15.57 +/-7.24 minutes, n=4, p<0.05). Surprisingly, in addition to a significant depression of blood pressure, mice injected with acetate also showed a significant depression in heart rate (-233.50 +/-101.20 bpm maximum drop, n=4, p<0.05). Preliminary data using combinatory injections of acetate and the vasoconstrictor phenylephrine show a potential attenuation of the blood pressure drop caused by acetate, suggesting a strong vascular component to the physiological effects of acetate. However, had acetate purely been acting on the vasculature, we would have expected heart rate to increase. Lower doses of acetate (0.625g/kg) also yielded a drop in heart rate not significantly different from the 1g/kg dose. To further probe the effects of exogenous acetate administration on specific cardiac functions, pressure volume loops were performed in rats and acetate was administered intravenously at a continuous infusion to provide a steady, measurable effect. Rats treated with acetate showed a significant decrease in cardiac stroke work, developed pressure, and dP/dtmax, and a significant increase in dP/dtmin (n=4, p<0.05), indicating a potential effect on contractility. We hypothesize that acetate acts both on the peripheral vasculature and the cardiac muscle, with both components contributing to the blood pressure and heart rate effects seen in whole animals. Together these data hint at a previously unknown and potentially detrimental effect of short chain fatty acids on cardiac function, and efforts are underway to further what role these effects play in whole organism physiology.

KW - animal experiment

KW - animal model

KW - animal tissue

KW - blood pressure

KW - blood pressure monitoring

KW - \*blood pressure regulation

KW - cardiac muscle

KW - cerebrovascular accident

KW - conference abstract

KW - \*depression

KW - ex vivo study

KW - heart function

KW - \*heart muscle contractility

KW - heart rate

KW - human

KW - \*intestine flora

KW - intraperitoneal drug administration

KW - intravenous drug administration

KW - leisure

KW - low drug dose

KW - male

KW - maximum heart muscle dP-dt

KW - minimum heart muscle dP-dt

KW - mouse

KW - nonhuman

KW - physiology

KW - preliminary data

KW - rat

KW - telemetry

KW - vascularization

KW - acetic acid

KW - phenylephrine

KW - \*short chain fatty acid

KW - sodium chloride

KW - vasoconstrictor agent

JF - FASEB Journal

JA - FASEB J.

LA - English

VL - 33

IS - SUPPL 1

SP - 569.19

CY - Netherlands

PB - John Wiley and Sons Inc

SN - 1530-6860

AD - B. Poll

DO - https://dx.doi.org/10.1096/fasebj.2019.33.1\_supplement.569.19

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=638011456

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1096%2ffasebj.2019.33.1\_supplement.569.19Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Poll&issn=1530-6860&title=FASEB+Journal&atitle=A+short+chain+fatty+acid+produced+by+the+gut+microbiota+plays+a+role+in+blood+pressure+regulation+and+cardiac+contractility&volume=33&issue=SUPPL+1&spage=569.19&epage=&date=2019&doi=10.1096%2Ffasebj.2019.33.1\_supplement.569.19&pmid=&sid=OVID:embase

237.

TY - JOUR

DB - Embase

AN - 630690012

T1 - Current management strategies and neurodevelopmental outcome in necrotizing enterocolitis

T3 - 14th World Congress of Perinatal Medicine. Istanbul Turkey.

A1 - Cetinkaya M.

Y1 - 2019//

N2 - Necrotizing enterocolitis (NEC), primarily a disease of preterms, is a major cause of morbidity and mortality. Although prematurity, formula-feeding, infection, and microbial dysbiosis were reported as the most recognized potential risk factors, the pathogenesis of NEC is complex and multifactorial with the primary end point of an inappropriate and exaggarated inflammatory response that result with intestinal dysfunction, inflammation, injury, and necrosis. There are currently no licensed drugs or therapeutics for both prevention and/or treatment of NEC. The general treatments approach in NEC include stopping enteral feeding, prompt decompression, administration of total parenteral nutrition and intravenous fluid replacement, and broad-spectrum antibiotics. Surgical intervention should be performed in the presence of bowel perforation or necrotic bowel and lack of improvement with medical treatments. At present, new potential prevention and therapies for NEC are mainly focus on the Toll-like receptor 4 inflammatory signaling pathway, the repair of intestinal barrier function, probiotics, antioxidative stress, breast-feeding, and use of immunomodulatory agents. It is well known that exclusive human milk intake may prevent NEC by reducing the incidence and severity of NEC. In addition, minimal enteral nutrition was also established as a successful strategy to reduce the risk of NEC. Some other strategies including the slow increase in enteral feeding, standard feeding regimens, and avoidance of formula-feeding can also prevent NEC. Oral lactoferrin studies reported promising results for prevention of severe NEC. Maternal and neonatal vitamin D supplementation was also stated as a possible strategy to prevent NEC. Nowadays, the most discussed subject in the management of NEC include use of probiotics. Although the beneficial effects of probiotics have been studied extensively, there is still a lack of consensus on specific strain types and dosage. It is also unclear whether a single probiotic or a mixture of probiotics is most effective for the prevention of NEC. Therefore, there is no current recommendation for the routine usage of probiotics in preterm infants for prevention of NEC. Today, several experimental approaches for both prevention and treatment of NEC are on way, we need time to translate the results of experimental studies to clinical usage. Therefore, more high-quality clinical trials are still needed to verify the validity and long-term outcomes of all these potential approaches. The relationship between NEC and neurodevelopmental impairment has been investigated in several studies and infants with severe NEC were found to have increased risk of cerebral palsy, visual, cognitive and pschymotor impairment. These poor neurodevelopmental outcomes in infants with NEC seem to be multifactorial, including both nutritional and non-nutritional factors. However, it is important to know that survivors of NEC require long-term follow-up to monitor for signs of neurodevelopmental impairment to ensure prompt intervention. The long-term follow-up, early diagnosis and intervention are critically important to improve and optimize long-term neurodevelopmental outcomes in infants with severe NEC. As most of the neurodevelopmental follow-up studies are performed at young ages, longitudinal follow-up beyond preschool age seems to be necessary to represent true long-term outcomes in these infants.

KW - artificial milk

KW - avoidance behavior

KW - breast feeding

KW - breast milk

KW - cerebral palsy

KW - child

KW - conference abstract

KW - consensus

KW - controlled study

KW - decompression

KW - drug therapy

KW - early diagnosis

KW - enteric feeding

KW - enteropathy

KW - experimental study

KW - female

KW - follow up

KW - human

KW - infant

KW - intestine perforation

KW - mental disease

KW - morbidity

KW - mortality

KW - \*necrotizing enterocolitis

KW - newborn

KW - oxidative stress

KW - prematurity

KW - prevention

KW - risk factor

KW - signal transduction

KW - surgery

KW - survivor

KW - total parenteral nutrition

KW - validity

KW - antibiotic agent

KW - antioxidant

KW - endogenous compound

KW - infusion fluid

KW - lactoferrin

KW - nutrition supplement

KW - probiotic agent

KW - toll like receptor 4

KW - vitamin D

JF - Journal of Perinatal Medicine

JA - J. Perinat. Med.

LA - English

VL - 47

IS - Supplement 1

SP - eA71

EP - eA72

CY - Netherlands

PB - De Gruyter

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DO - https://dx.doi.org/10.1515/jpm-2019-2501

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=630690012

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1515%2fjpm-2019-2501Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cetinkaya&issn=1619-3997&title=Journal+of+Perinatal+Medicine&atitle=Current+management+strategies+and+neurodevelopmental+outcome+in+necrotizing+enterocolitis&volume=47&issue=Supplement+1&spage=eA71&epage=eA72&date=2019&doi=10.1515%2Fjpm-2019-2501&pmid=&sid=OVID:embase

238.

TY - JOUR

DB - Embase

AN - 2002859781

T1 - GUT MICROBIOTA DEPLETION AFFECTS METABOLIC AND BEHAVIORAL RESPONSES DURING ACTIVITY-BASED ANOREXIA

T3 - 41st ESPEN Congress. Krakow Poland.

A1 - Tirelle P.

A1 - Breton J.

A1 - Bahlouli W.

A1 - L'huillier C.

A1 - Salameh E.

A1 - Amamou A.

A1 - Jarbeau M.

A1 - Guerin C.

A1 - Goichon A.

A1 - do Rego J.C.

A1 - Dechelotte P.

A1 - Ribet D.

A1 - Coeffier M.

Y1 - 2019//

N2 - Rationale: The role of the gut-brain axis in eating behavior and anxiety-depressive disorders has gained increasing attention. Although gut microbiota dysbiosis has been reported in anorectic patients, its pathophysiological role remains poorly understood. Thus, we aimed to characterize the potential role of gut microbiota by evaluating the effects of its depletion in the Activity-Based Anorexia (ABA) mouse model. Method(s): Male C57Bl/6 (n = 16/group) were submitted (ABA group) or not (CT group) to the ABA protocol, which combines access to a running wheel with a progressive limited food access. Gut microbiota was previously depleted or not by antibiotics (ATB) gavages. Body composition, anxiety-like behavior, plasmatic levels of leptin and adiponectin, hypothalamic and hippocampal mRNA levels for neuropeptides, dopamine receptors (DRD) and inflammatory factors were assessed. Data were compared by two-way ANOVA followed by Bonferroni post-tests. Result(s): Body weight loss was less pronounced in ABA+ATB (10.0 +/- 6.5%) compared to ABA (15.1 +/- 6.0%, p < 0.01). An increased fat mass and a decreased lean mass were observed in ABA+ATB compared to ABA (p < 0.001), which was linked with increased levels in plasmatic adiponectin (p < 0.05). In contrast, plasmatic leptin levels were decreased in both ABA and ABA + ATB mice (p < 0.05). ABA + ATB mice showed decreased physical activity compared to ABA (p < 0.05). During open field test, only ABA+ATB mice exhibited lower travelled distance, increased immobility time and lower vertical activity, suggesting increased anxiety. In the hypothalamus, CRH (Corticotropin Releasing Hormone) mRNA upregulation observed in ABA was blunted in ABA+ATB (p < 0.05). Similarly, in the hippocampus, DRD1, DRD2 and TNF-alpha mRNA were increased in ABA compared to CT, but not in ABA+ATB. Conclusion(s): Gut microbiota depletion triggers alterations of metabolic and behavioral responses in the ABA murine model of anorexia.Copyright © 2019 Elsevier Ltd and European Society for Clinical Nutrition and Metabolism

KW - adult

KW - analysis of variance

KW - animal experiment

KW - animal model

KW - \*anorexia

KW - anxiety

KW - body composition

KW - body weight loss

KW - controlled study

KW - enteric feeding

KW - fat mass

KW - hippocampus

KW - hypothalamus

KW - immobility time

KW - \*intestine flora

KW - mouse

KW - mouse model

KW - nonhuman

KW - open field test

KW - physical activity

KW - \*protein expression

KW - transcription initiation

KW - treadmill

KW - upregulation

KW - adiponectin

KW - antibiotic agent

KW - corticotropin releasing factor

KW - dopamine 2 receptor

KW - endogenous compound

KW - leptin

KW - messenger RNA

KW - neuropeptide

KW - tumor necrosis factor

KW - conference abstract

JF - Clinical Nutrition

JA - Clin. Nutr.

LA - English

VL - 38

IS - Supplement 1

SP - S8

CY - Netherlands

PB - Churchill Livingstone

SN - 0261-5614

SN - 1532-1983

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DO - https://dx.doi.org/10.1016/S0261-5614%2819%2932482-3

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=2002859781

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1016%2fS0261-5614%252819%252932482-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tirelle&issn=0261-5614&title=Clinical+Nutrition&atitle=GUT+MICROBIOTA+DEPLETION+AFFECTS+METABOLIC+AND+BEHAVIORAL+RESPONSES+DURING+ACTIVITY-BASED+ANOREXIA&volume=38&issue=Supplement+1&spage=S8&epage=&date=2019&doi=10.1016%2FS0261-5614%252819%252932482-3&pmid=&sid=OVID:embase

239.

TY - JOUR

DB - Embase

AN - 629001151

T1 - Lactic acidosis: Who is to blame?

T3 - 2019 Annual Meeting of the Society of General Internal Medicine, SGIM 2019. Washington, DC United States.

A1 - Gabr M.

A1 - Leader I.

Y1 - 2019//

N2 - Learning Objective #1: Recognize lactic acidosis as a common finding in inpatient settings Learning Objective #2: Identify causesoflactic acidosis and rule out serious etiologies CASE: A 68 year-old man presenting with chest pain was found incidentally to have lactic acidosis. His past history included diabetes mellitus, ischemic heart disease, chronic hepatitis C, alcohol abuse, and cocaine abuse. His last reported cocaine use was two days prior to presentation and last alcohol use was the morning of presentation. Physical examination was unremarkable except for mild abdominal tenderness. Myocardial infarction was ruled out with negative troponins. Lactic acid level was 13.2 mmol/L (normal < 2), with a pH of 7.2 and a sodium bicarbonate level of 15 mmol/L (normal 22-28). Blood glucose level was normal and the anion gap was 36. Liver function tests revealed an AST of 76 U/L (normal < 50) and ALT of 50 U/L (normal < 40). Urine drug screen was positive for cocaine and blood ethanol level was normal. Computed tomography scan revealed no evidence of bowel ischemia. Review of systems and bloodwork were not suggestive of any infectious processes, and vital signs were normal except for elevated blood pressure. Home medications were aspirin, atorvastatin, amlodipine, famotidine, and met-formin; metformin was held at admission. His symptoms gradually improved and lactic acid levels returned to normal. He was counseled regarding alcohol and cocaine cessation and metformin was discontinued. IMPACT/DISCUSSION: Lactic acidosis is defined as serum pH of less than 7.35 with a lactate level greater than 4 mmol/L. It is commonly classified into type A acidosis, occurring as a result of tissue hypoxia with overproduction of lactic acid, or type B acidosis due to causes unrelated to hypoxia. Causes of type A acidosis include sepsis, shock, cardiac failure, hypovolemia, and other causes of hypoperfusion. Physical examination, vital signs, and other signs of tissue perfusion such as urine output and mental status may provide hint. Type B acidosis may be present in ethanol intoxication, hepatic dysfunction due to chronic alcoholism, malignancy, mitochondrial dysfunction, or due to medications (e.g. beta agonists, antiretrovirals, linezolid, and propofol). It may also occur in diabetes mellitus, whether in the setting of diabetic ketoacidosis or due to medications such as biguanides. D-lactic acidosis is another rare cause that occurs as a result of fermentation of carbohydrates by gut bacteria in cases of malabsorption or short bowel syndrome. In our patient's case, it appeared that several factors might have contributed to his type B acido-sis, including alcohol use, drug use, liver disease, and metformin. Conclusion(s): Physicians should promptly aim to identify the etiology of lactic acidosis. Type A lactic acidosis may indicate the presence of a more serious process that warrants urgent treatment. After confidently ruling out Type A, Type B acidosis can be considered through a careful review of patients' medical histories, habits, and medications.

KW - abdominal tenderness

KW - aged

KW - alcohol abuse

KW - alcohol blood level

KW - alcoholism

KW - anion gap

KW - aspartate aminotransferase level

KW - blood pH

KW - cancer patient

KW - case report

KW - chronic hepatitis C

KW - clinical article

KW - computer assisted tomography

KW - diabetic ketoacidosis

KW - diuresis

KW - drug therapy

KW - drug toxicity

KW - elevated blood pressure

KW - fermentation

KW - gene overexpression

KW - glucose blood level

KW - habit

KW - heart failure

KW - heart infarction

KW - hospital patient

KW - human

KW - human tissue

KW - hypovolemia

KW - hypoxemia

KW - intestine flora

KW - intestine ischemia

KW - intoxication

KW - \*lactic acidosis

KW - learning

KW - liver failure

KW - liver function test

KW - male

KW - malignant neoplasm

KW - medical history

KW - mental health

KW - mitochondrion

KW - nonhuman

KW - physical examination

KW - physician

KW - sepsis

KW - short bowel syndrome

KW - side effect

KW - thorax pain

KW - tissue perfusion

KW - urine

KW - vital sign

KW - acetylsalicylic acid

KW - alcohol

KW - amlodipine plus atorvastatin

KW - beta adrenergic receptor stimulating agent

KW - carbohydrate

KW - cocaine

KW - endogenous compound

KW - famotidine

KW - lactic acid

KW - linezolid

KW - metformin

KW - propofol

KW - troponin

KW - conference abstract

JF - Journal of General Internal Medicine

JA - J. Gen. Intern. Med.

LA - English

VL - 34

IS - 2 Supplement

SP - S571

CY - Netherlands

PB - Springer New York LLC

SN - 1525-1497

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DO - https://dx.doi.org/10.1007/11606.1525-1497

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=629001151

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1007%2f11606.1525-1497Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gabr&issn=1525-1497&title=Journal+of+General+Internal+Medicine&atitle=Lactic+acidosis%3A+Who+is+to+blame%3F&volume=34&issue=2+Supplement&spage=S571&epage=&date=2019&doi=10.1007%2F11606.1525-1497&pmid=&sid=OVID:embase

240.

TY - JOUR

DB - Embase

AN - 628867439

T1 - Psychological stress induces alterations in behavior and the mucosal immune system in a spontaneous mouse model of ileitis

T3 - 2019 Crohn's and Colitis Congress. Las Vegas, NV United States.

A1 - Gomez-Nguyen A.

A1 - Butto L.F.

A1 - Basson A.R.

A1 - Pizarro T.

A1 - Cominelli F.

Y1 - 2019//

N2 - Background: Patients with Crohn's disease (CD) sufer from abnormally high rates of depression and anxiety. Depression among patients with CD are higher than other debilitating chronic medical conditions, such as cancer. Behavioral co-morbidities are associated with increased rates of fares, more severe disease course, and increased rate of corticosteroid prescription. Psychological stress, even among CD patients in remission, is recognized as a risk factor for fare-ups. Despite the well-established relationship between stress and symptom relapse, a rigorous mechanistic explanation remains elusive. Here we demonstrate alterations in the behavioral profle and the mucosal immune system in the SAMP1/YITFC (SAMP1) mouse, a spontaneous model of CD-like ileitis, following exposure to acute and chronic psychological stress. Method(s): SAMP1 littermates were sex matched and divided into two groups (n=8). The frst group was subjected to restraint stress (RS) for seven days. Mice were restrained for 180 minutes per day in a 50mL conical tube with air holes drilled for adequate ventilation. Stool samples were collected each day. Subsequently, each group was subjected to behavioral testing to determine anxiety-like behavior (open feld and elevated plus maze), depressive-like behavior (tail suspension), motor def-cits (line crossings and rota-rod), and cognitive defcits (Y-maze). Immediately after, mice were sacrifced and tissue samples were collected for immunological analysis. Result(s): Mice subjected to RS displayed increased immobility time during tail suspension indicating a depressive-like phenotype (p < 0.05). All other behavioral characteristics remained unchanged compared to control. Interestingly, FACS analysis revealed that RS mice had a marked increase in mesenteric lymph node (MLN) dendritic cells (p < 0.01) despite similar T-cell populations. Further analysis, including histopathology, serum cytokine ELISA, fecal corticosterone, 16s rRNA analysis of the microbiome, and RT-PCR analysis of ileum and spleen are currently underway and will be ready by the end of the year. Conclusion(s): The marked diference in the MLN dendritic cell (DC) population suggests increased luminal sampling of intestinal bacteria. Determining how the micro-biome afects or is afected by the altered DC population is of particular interest to us. Is the DC population altered because of the microbiome or is the DC population altering the microbiome? Our preliminary data has suggested that depressive states are associated with alterations in the microbiome. Again, whether the changes are a cause or an effect of depression is yet to be answered but is our immediate goal. CD11c+ MHC 11+ dendritic cell populations were elevated in the restrained (RS) group. Further immunological analysis is currently underway.

KW - adult

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - artificial ventilation

KW - biome

KW - cancer patient

KW - cancer recurrence

KW - cell population

KW - chronic disease

KW - controlled study

KW - Crohn disease

KW - \*dendritic cell

KW - depression

KW - enzyme linked immunosorbent assay

KW - feces

KW - female

KW - fluorescence activated cell sorting

KW - histopathology

KW - \*ileitis

KW - ileum

KW - immobility time

KW - immobilization stress

KW - intestine flora

KW - male

KW - malignant neoplasm

KW - \*mental stress

KW - mesentery lymph node

KW - mouse

KW - \*mouse model

KW - \*mucosa

KW - nonhuman

KW - phenotype

KW - preliminary data

KW - relapse

KW - remission

KW - reverse transcription polymerase chain reaction

KW - risk factor

KW - sampling

KW - senescence accelerated mouse

KW - spleen

KW - suspension cell culture

KW - T lymphocyte

KW - corticosterone

KW - cytokine

KW - endogenous compound

KW - RNA 16S

KW - conference abstract

JF - Inflammatory Bowel Diseases

JA - Inflammatory Bowel Dis.

LA - English

VL - 25

IS - Supplement 1

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AD - A. Gomez-Nguyen

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PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=628867439

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1093%2fibd%2fizy393.179Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gomez-Nguyen&issn=1536-4844&title=Inflammatory+Bowel+Diseases&atitle=Psychological+stress+induces+alterations+in+behavior+and+the+mucosal+immune+system+in+a+spontaneous+mouse+model+of+ileitis&volume=25&issue=Supplement+1&spage=S71&epage=S72&date=2019&doi=10.1093%2Fibd%2Fizy393.179&pmid=&sid=OVID:embase

241.

TY - JOUR

DB - Embase

AN - 628710955

T1 - Indoor air pollution and lung health in low and middle-income countries (LMIC)

T3 - 18th International Congress of Pediatric Pulmonology. Chiba Japan.

A1 - Vanker A.

Y1 - 2019//

N2 - Indoor Air Pollution - A Global Problem: Globally, more than 90% of children under the age of 15 years breathe polluted air, with the World Health Organization (WHO) recently reporting that around 3 billion people still rely on polluting open fires or simple stoves fuelled by kerosene, biomass (wood, animal dung and crop waste) and coal for household cooking and heating.1 This is especially inherent in low and middle income countries (LMIC) and strongly linked to poor socioeconomic circumstances. Despite global attempts to improve lung health in children, lower respiratory tract infections (LRTI) remain the leading cause of under- 5 mortality, particularly in LMIC. Further, increasing evidence points to lung growth trajectories being set in early-life with life-long consequences,2 highlighting this vulnerable period as critical to lung health. Indoor air pollution (IAP) is a consequence of alternate fuel use often in combination with poor ventilation and overcrowding and is strongly linked to the energy ladder which ascribes cleaner and more efficient fuel with improved socioeconomic status.3 Although rapid urbanization and migration of communities occurs, many people still rely on cheaper and often more polluting energy sources. The Sustainable Development Goals (SDGs) recognize the importance of social and environmental factors as determinants of health and in particular SDG 7 focuses on universal access to affordable, reliable, sustainable and modern energy.1 However, it is also the combination of IAP, exposure to tobacco smoke, outdoor pollution and climate change that further compounds the risk of environmental exposures on lung health.1 Indoor Air Pollutants and Assessing Exposure: Indoor air pollutants are a combination of chemical compounds released during household activities including cooking, heating, smoking, use of cleaning products and from building materials. While there may be numerous pollutants, the most common inorganic vapors include ozone (O3), carbon monoxide (CO), nitrogen dioxide (NO2) and sulphur dioxide (SO2), and the vapor forms of organic pollutants, such as polycyclic aromatic hydrocarbons (PAHs), volatile organic compounds (VOCs) [benzene, toluene, xylene], and aliphatic chemicals. Particulate matter (PM) is a further major contributor to IAP ranging in size from ultrafine to up to 10 mum (PM10) still being of respirable size.4 Assessing IAP exposure is either through self-reports, pollutant measurements using personal or fixed samplers, modeling data or biomarkers, all of which carry limitations. There is an increasing need for simple and reliable methods to assess IAP.5 Impact on Lung Health: The impact of IAP on lung health begins in the antenatal period where exposures have been linked to impaired lung development and disturbed development of the immune system with subsequent decreased lung function in infancy and childhood, increased respiratory symptoms and the development of childhood asthma.6 The postulated mechanisms by which antenatal IAP affects lungs is through an interplay of environmental and epigenetic factors.6 A large African birth cohort study found that antenatal, compared to postnatal IAP exposures, were the predominant risk factor for LRTI and wheezing in infancy.7 In terms of postnatal exposure, two independent meta-analyses also found that IAP exposure was associated with an almost doubled to 3-fold increased odds of developing LRTI.8 Further, IAP impacts on lung defense mechanisms and the lung microbiome with increased risk of both acute and chronic respiratory symptoms.9 While there is mounting evidence from high income settings linking air pollution to impaired lung function, this has not been well studied in LMIC settings where the burden of IAP exposures is significant.5 However, novel data from the Drakenstein Child Health Study, a South African birth cohort study, have shown that infants exposed to IAP during pregnancy had impaired lung function at 6 weeks and subsequently had smaller size-adjusted lung volumes, increased lung clearance index and reduced respiratory system compliance at both 1 and 2 years of age, suggesting increasing effects seen with time.10 In terms of non-communicable diseases, asthma is the commonest chronic disease in children in both high income and LMIC settings and a number of studies including the International Study of Asthma and Allergies in Childhood, have shown an association between IAP exposure and the development of both asthma and chronic obstructive airway diseases.9 Children in LMIC often present with chronic respiratory symptoms. There are often limited diagnostic utilities available with a reliance on clinical findings.9 Further, research and health system capacity building is required to improve care of children with these conditions. While interventions such as improved cooking stoves and better household ventilation can decrease children's exposure to IAP, universal access to clean fuel is what is ultimately required. The impact of these exposures on genetic, epigenetic and immunological changes requires further investigation. Studies from high income countries have reported the impact of early-life smoke exposure on the genetic programming that control life-long lung development, aging and susceptibility to obstructive lung diseases.2 A better understanding of this can lead to targeted intervention to improve child lung health.

KW - adolescent

KW - aging

KW - artificial ventilation

KW - \*asthma

KW - building material

KW - capacity building

KW - child

KW - child health

KW - chronic obstructive lung disease

KW - cleaning

KW - climate change

KW - cohort analysis

KW - controlled study

KW - cooking

KW - crowding (area)

KW - diagnostic value

KW - energy resource

KW - environmental exposure

KW - environmental factor

KW - epigenetics

KW - female

KW - genetic susceptibility

KW - heating

KW - high income country

KW - household

KW - human

KW - immune system

KW - \*indoor air pollution

KW - infancy

KW - infant

KW - lower respiratory tract infection

KW - lung clearance

KW - lung development

KW - lung volume

KW - meta analysis

KW - microbiome

KW - \*middle income country

KW - non communicable disease

KW - nonhuman

KW - particulate matter

KW - pregnancy

KW - prenatal period

KW - respiration depression

KW - risk assessment

KW - risk factor

KW - sampler

KW - self report

KW - smoke

KW - smoking

KW - sustainable development

KW - urbanization

KW - vapor

KW - wheezing

KW - biological marker

KW - carbon monoxide

KW - nitrogen dioxide

KW - ozone

KW - polycyclic aromatic hydrocarbon

KW - sulfur dioxide

KW - tobacco smoke

KW - toluene

KW - volatile organic compound

KW - xylene

KW - conference abstract

JF - Pediatric Pulmonology

JA - Pediatr. Pulmonol.

LA - English

VL - 54

IS - Supplement 1

SP - S64

EP - S65

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242.

TY - JOUR

DB - Embase

AN - 628710365

T1 - Management of pre-school wheeze

T3 - 18th International Congress of Pediatric Pulmonology. Chiba Japan.

A1 - Bush A.

Y1 - 2019//

N2 - Worldwide, admissions for pre-school wheeze are a significant health burden. Morbidity and even mortality are common, and treatment strategies are ineffective compared with school age, atopic eosinophilic asthma. Is the diagnosis correct? The first step is a thorough history and examination; many pre-schoolers will correctly be managed without any investigations. The term 'wheeze' is used to describe numerous noises, not just a polyphonic, whistling expiratory noise, and it is essential to determine what the family are describing; a videoquestionnaire may help. After history and examination, the child is placed in one of four categories (1) normal child + /- parental anxiety - and normal child is the hardest diagnosis of all to make; (2) a major underlying illness, such as tuberculosis or cystic fibrosis (differential diagnosis will depend on your geographical area); (3) one of the 'asthmas'; and again the phenotype may vary across the world, and (4) minor morbidity such as allergic rhinitis or gastroesophageal reflux which may mimic or exacerbate the asthmas. The next steps depend on the category into which the child is placed. If history and physical examination suggests that the child has one of the 'asthmas', the second aim of the history is to determine if the infant has pure episodic viral wheeze or multiple trigger wheeze. The child's category may change over time and with treatment, and categorization does depend on accurate symptom perception by the parents, but if symptoms are truly intermittent, then intermittent therapy is appropriate. Management of chronic symptoms: The first step, before any prescription is written, is to ensure the environment is optimal, reducing as far as possible indoor pollution (tobacco, e-cigarettes, biomass fuels; we all need to be aware of what our local issues in terms of indoor and outdoor are). It is also essential that pediatricians be advocates for clean air for children, because we cannot get clean air without engaging politicians. Minor intermittent symptoms may legitimately be treated with short-acting inhaled beta-2 agonists or anticholinergics via a mask and spacer. It is well known that inhaled corticosteroids (ICS) if instituted early do not reduce the risk of progression to school age, atopic eosinophilic asthma, so treatment can be purely symptomatic. If symptom severity and frequency is such that this approach is not effective, then regular daily therapy should be considered. The biggest recent advance has been the first attempt to introduce personalized medicine into the treatment of pre-school wheeze. The Lancet commission1 highlighted that the term 'asthma' should be used as the start, not the end of the patient journey; and in the pre-school years, the question should be not 'at what age can I diagnose asthma?' but 'Does this child have either or both of the treatable airway traits of eosinophilic airway inflammation or bronchodilator responsive variable airflow obstruction'? The INFANT investigators2 attempted to answer the first question in a three-way, cross-over comparison of regular ICS, intermittent ICS, and regular leukotriene receptor antagonists. Regular ICS was the preferred therapy, but only in those with a peripheral blood eosinophil count > 300/mulambda and aeroallergen sensitization. It should be noted that the blood eosinophil count analyses were post-hoc, and so need confirmation, and in a developed world setting. Really importantly, the significance of a raised blood eosinophil count may be very different in an area with a high parasite burden. However, it would seem reasonable to withhold ICS from pre-school children with a normal peripheral blood eosinophil count in any context. However, in many contexts, a more pragmatic approach of a blind therapeutic trial of ICS may have to be undertaken. In that case, a three-step protocol is wise. Step 1 is to institute ICS at a dose of no higher than beclomethasone 200 mug twice daily using an appropriate spacer. A high dose is chosen for the trial, on the basis that if a lower dose were to be chosen, time might be wasted by escalating to a higher dose, before concluding that the symptoms are steroid resistant. Response is (arbitrarily) assessed at 6 to 8 weeks, and, whatever the child's symptoms at that point, treatment is stopped. If there is no response, there is no point continuing with an ineffective therapy. If symptoms have remitted, it is at this stage unclear whether this is spontaneous or as a result of treatment. This is resolved by a period of observation; if the child relapses on stopping treatment, then ICS therapy is re-instituted at the lowest dose needed to control symptoms. This strategy means that children will not be wrongly labeled as asthmatic and committed to long-term therapy because of transient symptoms. Prevention of acute attacks: This is an area of need; attacks are associated with greatly impaired quality of life and adverse future lung function trajectories. We know that ICS are not effective at reducing acute attacks of pre-school wheeze, largely because, unlike in school age asthma where ICS are very effective in reducing attack frequency, there is no background of type 2 inflammation. All we can currently do is modify risk by ensuring annual influenza immunization, optimizing the environment and ensuring there is a treatment plan in place. Treatment of acute attacks: Unlike in school age asthma, oral prednisolone is not indicated in acute, pre-school wheeze unless the attack is very severe. If the child is well enough to stay in the community, prednisolone is not needed, nor is it necessary for the vast majority of pre-schoolers admitted to hospital.3. I reserve prednisolone for pre-schoolers who are deteriorating to the point of high dependency care or have a history of severe attacks. In terms of intermittent ICS, very high doses (1.5 mg/day fluticasone equivalent) may reduce severity of attacks, but with a burden of side-effects,4 and I would not go higher than fluticasone equivalent 150 mcg bd, again discontinuing this strategy if it is ineffective. Montelukast, a cysteinyl leukotriene antagonist, was initially thought to be an effective treatment for acute pre-school wheeze, but unfortunately recent very large studies failed to show any benefit for either intermittent or continuous montelukast therapy in this age-group, and this therapy cannot be recommended.5 Two studies of azithromycin in children with either acute wheeze or troublesome respiratory symptoms showed evidence of benefit,6,7 but unfortunately a third study failed to show benefit.8 There is also the concern of bacterial macrolide resistance if they are widely prescribed. On current evidence, it would be reasonable to treat pre-schoolers with a history of really severe attacks of wheeze with azithromycin when they are in the throes of another such attack to try to prevent progression to the need for Intensive Care, but also not to persist with this strategy if it is ineffective. The future? We currently rely on phenotyping by clinical history, for the most part. We recently studied the relationship between symptom patterns and bronchoalveolar alveolar lavage inflammation and microbiome.9 Worryingly, there was no correlation between clinical and pathological phenotypes. Instead, cluster analysis showed that there was a dysbiotic, Moraxella-rich cluster which was associated with airway neutrophilia, and a second, mixed-microbiota cluster with macrophages and lymphocytes in the lavage. This leads to the intriguing speculation that at least some pre-school wheezers may respond to antibiotics targeted against Moraxella, although this approach cannot be recommended without further data. It is known that respiratory epithelial function is abnormal in children with asthma, for example reduced interferon secretion in response to viruses, although whether this is the primary abnormality in asthma, or secondary to repeated cycles of infection and treatment, is unclear. We are currently 3 years into a five-year study which will determine the developmental biology of epithelial and immune development, and how this relates to the microbiome.10 The aim is to determine the endotypes leading from apparently normal baby at birth to pre-school wheeze to atopic, allergic asthma, and hence determine biomarkers of risk and ultimately, to intervene to reverse this process. However, this will not be achieved without better knowledge of the relevant pathways. However, the differences in the prevalence of wheeze and atopy in genetically almost identical populations who have very different exposures, shows that reduction in risk is absolutely possible. Summary and Conclusion(s): The current state of knowledge of preschool wheeze is woeful. We do not know how to prevent it, we do not know how to predict those who are at high risk of going on to develop atopic, eosinophilic asthma at school age, and we have no treatment strategies to apply even if we could predict a high risk group accurately. We do not know the endotypes of the disease, and we have very few effective treatment strategies, and indeed our therapeutic efforts are primitive. This is a rich area for future research; we must do better, both for the sake of preventing present symptoms and also improving long-term lung disease.

KW - air

KW - airway obstruction

KW - allergic asthma

KW - allergic rhinitis

KW - anxiety

KW - atopy

KW - biomass

KW - child

KW - clinical article

KW - cluster analysis

KW - congenital malformation

KW - cystic fibrosis

KW - developmental biology

KW - diagnosis

KW - differential diagnosis

KW - drug megadose

KW - drug therapy

KW - electronic cigarette

KW - eosinophil count

KW - epithelium

KW - female

KW - gastroesophageal reflux

KW - genetic susceptibility

KW - high risk population

KW - human

KW - human cell

KW - infant

KW - influenza vaccination

KW - intensive care

KW - lavage

KW - long term care

KW - low drug dose

KW - lung alveolus

KW - lung disease

KW - lung function

KW - lymphocyte

KW - macrolide resistance

KW - macrophage

KW - male

KW - microbiome

KW - Moraxella

KW - morbidity

KW - neutrophilia

KW - noise

KW - nonhuman

KW - parasite load

KW - pediatrician

KW - perception

KW - personalized medicine

KW - phenotype

KW - physical examination

KW - prescription

KW - prevalence

KW - prevention

KW - public figure

KW - quality of life

KW - relapse

KW - remission

KW - sensitization

KW - side effect

KW - tobacco

KW - tuberculosis

KW - virus

KW - \*wheezing

KW - azithromycin

KW - beclometasone

KW - beta 2 adrenergic receptor stimulating agent

KW - biological marker

KW - bronchodilating agent

KW - cholinergic receptor blocking agent

KW - endogenous compound

KW - fluticasone

KW - interferon

KW - montelukast

KW - prednisolone

KW - conference abstract

JF - Pediatric Pulmonology

JA - Pediatr. Pulmonol.

LA - English

VL - 54

IS - Supplement 1

SP - S16

EP - S18

CY - Netherlands

PB - John Wiley and Sons Inc.

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243.

TY - JOUR

DB - Embase

AN - 627392776

T1 - Modernization of birth: impact on Clostridioides difficile (C. difficile) colonization in the gut microbiota of Canadian infants at 3 months of age

T3 - 9th AllerGen's Research Conference. Toronto, ON Canada.

A1 - Mc Lean C.A.

A1 - Chari R.S.

A1 - Lee B.

A1 - Lizcano N.M.

A1 - Azad M.B.

A1 - Becker A.B.

A1 - Mandhane P.J.

A1 - Sears M.R.

A1 - Turvey S.E.

A1 - Moraes T.J.

A1 - Subbarao P.

A1 - Scott J.A.

A1 - Kozyrskyj A.L.

Y1 - 2019//

N2 - Background: Medical interventions during childbirth are increasing, with cesarean section (CS) delivery exceeding recommended rates by 13% in Canada. CS has been associated with gut dysbiosis in early life. Infants who bypass the beneficial maternal bacterial inoculation provided during vaginal birth have been found to be commonly colonized by opportunistic bacteria such as C. difficile, but factors leading to colonization remain unknown. This study aimed to determine the impact of labour interventions on the colonization of C. difficile at 3 months of age. Method(s): This was a prospective cohort study utilizing data on 1477 mother-infant pairs from the Canadian Healthy Infant Longitudinal Development (CHILD) population-based birth cohort. Labour interventions (i.e., caesarean delivery, anesthetics and drugs to stimulate labor such as oxytocin, carbetocin, prostaglandins), and maternal and infant covariates were collected from hospital charts or maternal questionnaires. C. difficile was detected in infant fecal samples collected at 3-4 months of age using quantitative polymerase chain reaction and classified as present/absent. Logistic regression models were run to determine whether labour interventions were associated with C. difficile colonization, and adjusted for covariates. Result(s): Almost one-third of infants were colonized with C. difficile at 3 months of age. This varied by birth method; C. difficile rates were 28%, 31%, 41% and 38% in vaginal birth with maternal intrapartum antibiotic prophylaxis (IAP), vaginal birth no IAP, emergency CS and elective CS, respectively. In unadjusted analysis, the risk of colonization with C. difficile was significantly increased with emergency CS and elective CS compared to vaginal birth with no IAP (OR 1.76, 95% CI 1.27-2.44 p = 0.001 and OR 1.55, 95% CI 1.06-2.26 p = 0.024, respectively). Following adjustment for maternal gravida status, birthweight, anaesthetic and oxytocin use during delivery, hospital length-of-stay, maternal ethnicity and age, prenatal depression, postnatal smoking and breastfeeding, the association remained significant for infants born by emergency CS (aOR 1.72, 95% CI 1.15-2.55 p = 0.007). Oxytocin-like drugs and anesthetics were used in 47% and 77% of all births, respectively. After stratification for these drugs, the increased risk of C. difficile in infants born by emergency CS compared to vaginal birth with no IAP remained significant only for infants whose mothers received anesthetics and oxytocin-like drugs during delivery (aOR 1.85, 95% CI 1.21-2.83 p = 0.004). Conclusion(s): Emergency cesarean delivery was significantly associated with C. difficile colonization during infancy and this did not appear to be related to labour induction or anaesthesia. Colonization with this bacterium has been linked to the development of atopic disease.

KW - anesthesia

KW - antenatal depression

KW - antibiotic prophylaxis

KW - atopy

KW - birth weight

KW - breast feeding

KW - \*Canadian

KW - cesarean section

KW - cohort analysis

KW - controlled study

KW - ethnicity

KW - feces

KW - female

KW - genetic susceptibility

KW - human

KW - infancy

KW - infant

KW - \*intestine flora

KW - labor induction

KW - length of stay

KW - mother

KW - nonhuman

KW - prospective study

KW - quantitative analysis

KW - questionnaire

KW - real time polymerase chain reaction

KW - smoking

KW - stratification

KW - vaginal delivery

KW - anesthetic agent

KW - carbetocin

KW - endogenous compound

KW - oxytocin

KW - prostaglandin

KW - conference abstract

JF - Allergy, Asthma and Clinical Immunology

JA - Allergy Asthma Clin. Immunol.

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244.

TY - JOUR

DB - Embase

AN - 2001546608

T1 - PSYCHOLOGICAL STRESS INDUCES ALTERATIONS IN BEHAVIOR AND THE MUCOSAL IMMUNE SYSTEM IN A SPONTANEOUS MOUSE MODEL OF ILEITIS

T3 - 2019 Crohn's and Colitis Congress. Bellagio Las Vegas United States.

A1 - Gomez-Nguyen A.

A1 - Butto L.F.

A1 - Basson A.R.

A1 - Pizarro T.

A1 - Cominelli F.

Y1 - 2019//

N2 - Background: Patients with Crohn's disease (CD) suffer from abnormally high rates of depression and anxiety. Depression among patients with CD are higher than other debilitating chronic medical conditions, such as cancer. Behavioral co-morbidities are associated with increased rates of flares, more severe disease course, and increased rate of corticosteroid prescription. Psychological stress, even among CD patients in remission, is recognized as a risk factor for flare-ups. Despite the well-established relationship between stress and symptom relapse, a rigorous mechanistic explanation remains elusive. Here we demonstrate alterations in the behavioral profile and the mucosal immune system in the SAMP1/YitFc (SAMP1) mouse, a spontaneous model of CD-like ileitis, following exposure to acute and chronic psychological stress. Method(s): SAMP1 littermates were sex matched and divided into two groups (n=8). The first group was subjected to restraint stress (RS) for seven days. Mice were restrained for 180 minutes per day in a 50mL conical tube with air holes drilled for adequate ventilation. Stool samples were collected each day. Subsequently, each group was subjected to behavioral testing to determine anxiety-like behavior (open field and elevated plus maze), depressive-like behavior (tail suspension), motor deficits (line crossings and rota-rod), and cognitive deficits (Y-maze). Immediately after, mice were sacrificed and tissue samples were collected for immunological analysis. Result(s): Mice subjected to RS displayed increased immobility time during tail suspension indicating a depressive-like phenotype (p < 0.05). All other behavioral characteristics remained unchanged compared to control. Interestingly, FACS analysis revealed that RS mice had a marked increase in mesenteric lymph node (MLN) dendritic cells (p < 0.01) despite similar T-cell populations. Further analysis, including histopathology, serum cytokine ELISA, fecal corticosterone, 16s rRNA analysis of the microbiome, and RT-PCR analysis of ileum and spleen are currently underway and will be ready by the end of the year. Conclusion(s): The marked difference in the MLN dendritic cell (DC) population suggests increased luminal sampling of intestinal bacteria. Determining how the microbiome affects or is affected by the altered DC population is of particular interest to us. Is the DC population altered because of the microbiome or is the DC population altering the microbiome? Our preliminary data has suggested that depressive states are associated with alterations in the microbiome. Again, whether the changes are a cause or an effect of depression is yet to be answered but is our immediate goal. [Figure presented] [Figure presented]Copyright © 2019 AGA Institute and the Crohn's & Colitis Foundation

KW - adult

KW - animal cell

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - artificial ventilation

KW - cancer patient

KW - cancer recurrence

KW - cell population

KW - chronic disease

KW - cognitive defect

KW - controlled study

KW - Crohn disease

KW - \*dendritic cell

KW - depression

KW - enzyme linked immunosorbent assay

KW - feces

KW - female

KW - fluorescence activated cell sorting

KW - histopathology

KW - \*ileitis

KW - ileum

KW - immobility time

KW - immobilization stress

KW - intestine flora

KW - male

KW - malignant neoplasm

KW - \*mental stress

KW - mesentery lymph node

KW - motor dysfunction

KW - mouse

KW - \*mouse model

KW - \*mucosa

KW - nonhuman

KW - phenotype

KW - preliminary data

KW - relapse

KW - remission

KW - reverse transcription polymerase chain reaction

KW - risk factor

KW - sampling

KW - senescence accelerated mouse

KW - spleen

KW - suspension cell culture

KW - T lymphocyte

KW - corticosterone

KW - cytokine

KW - endogenous compound

KW - RNA 16S

KW - conference abstract

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 156

IS - 3 Supplement

SP - S104

EP - S105

CY - Netherlands

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

DO - https://dx.doi.org/10.1053/j.gastro.2019.01.242

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed20&NEWS=N&AN=2001546608

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed20&DO=10.1053%2fj.gastro.2019.01.242Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gomez-Nguyen&issn=0016-5085&title=Gastroenterology&atitle=PSYCHOLOGICAL+STRESS+INDUCES+ALTERATIONS+IN+BEHAVIOR+AND+THE+MUCOSAL+IMMUNE+SYSTEM+IN+A+SPONTANEOUS+MOUSE+MODEL+OF+ILEITIS&volume=156&issue=3+Supplement&spage=S104&epage=S105&date=2019&doi=10.1053%2Fj.gastro.2019.01.242&pmid=&sid=OVID:embase

245.

TY - JOUR

DB - Embase

AN - 2004658831

ID - 30217070 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30217070]

T1 - Variability of botulinum toxins: Challenges and opportunities for the future

A1 - Rasetti-Escargueil C.

A1 - Lemichez E.

A1 - Popoff M.R.

Y1 - 2018//

N2 - Botulinum neurotoxins (BoNTs) are the most potent known toxins, and are therefore classified as extremely harmful biological weapons. However, BoNTs are therapeutic drugs that are widely used and have an increasing number of applications. BoNTs show a high diversity and are divided into multiple types and subtypes. Better understanding of the activity at the molecular and clinical levels of the natural BoNT variants as well as the development of BoNT-based chimeric molecules opens the door to novel medical applications such as silencing the sensory neurons at targeted areas and dermal restoration. This short review is focused on BoNTs' variability and the opportunities or challenges posed for future clinical applications.Copyright © 2018 by the authors.

KW - acromegaly

KW - artificial ventilation

KW - biological warfare agent

KW - blood brain barrier

KW - Chryseobacterium

KW - \*Clostridium botulinum

KW - Clostridium butyricum

KW - crystal structure

KW - depression

KW - Enterococcus faecium

KW - exocytosis

KW - fluoroscopy

KW - geographic distribution

KW - hemifacial spasm

KW - human

KW - immune system

KW - intestine flora

KW - lung alveolus epithelium cell

KW - Macaca fascicularis

KW - migraine

KW - nerve cell

KW - neuromuscular junction

KW - neurotoxicity

KW - nonhuman

KW - overactive bladder

KW - phage display

KW - phase 3 clinical trial (topic)

KW - positron emission tomography

KW - psoriasis

KW - review

KW - sensory nerve cell

KW - sequence analysis

KW - transcytosis

KW - urine incontinence

KW - vaccination

KW - Weissella

KW - \*botulinum toxin

JF - Toxins

JA - Toxins

LA - English

VL - 10

IS - 9

SP - 374

CY - Switzerland

PB - MDPI AG (Postfach, Basel CH-4005, Switzerland. E-mail: indexing@mdpi.com)

SN - 2072-6651 (electronic)

SN - 2072-6651

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UR - https://www.mdpi.com/2072-6651/10/9/374/pdf

DO - https://dx.doi.org/10.3390/toxins10090374

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=2004658831

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.3390%2ftoxins10090374Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rasetti-Escargueil&issn=2072-6651&title=Toxins&atitle=Variability+of+botulinum+toxins%3A+Challenges+and+opportunities+for+the+future&volume=10&issue=9&spage=374&epage=&date=2018&doi=10.3390%2Ftoxins10090374&pmid=30217070&sid=OVID:embase

246.

TY - JOUR

DB - Embase

AN - 615098924

ID - 28213891 [https://www.ncbi.nlm.nih.gov/pubmed/?term=28213891]

T1 - Opioids and the immune system - friend or foe

A1 - Plein L.M.

A1 - Rittner H.L.

Y1 - 2018//

N2 - Systemically administered opioids are among the most powerful analgesics for treating severe pain. Several negative side effects (respiratory depression, addiction, nausea and confusion) and the risk of opioid-induced hyperalgesia accompany opioid administration. One other side effect is the potential of opioids to suppress the immune response and thereby to increase the vulnerability to infections. The link between opioids and immunosuppression has been investigated both in vitro and in vivo as well as in patients. However, the results are inconsistent: Exogenous opioids such as morphine and fentanyl have been found to impair the function of macrophages, natural killer cells and T-cells and to weaken the gut barrier in vitro and in animal studies. In epidemiological studies, high doses and the initiation of opioid therapy for non-malignant pain have been correlated with a higher risk of infectious diseases such as pneumonia. However clear randomized controlled studies are missing. Furthermore, immune cells including neutrophils, macrophages and T-cells have been shown to secrete endogenous opioid peptides, which then bind to peripheral opioid receptors to relieve inflammatory and neuropathic pain. In addition to cytokines, hormones and bacterial products, the release of opioid peptides is stimulated by the application of exogenous opioids. In summary, there is a reciprocal interaction between the immune system and endogenous as well as exogenous opioids. Further to the existing epidemiological studies, controlled clinical studies are needed in the future to elucidate the role of the opioid-immune system interaction in patients and to determine its clinical relevance. Linked Articles: This article is part of a themed section on Emerging Areas of Opioid Pharmacology. To view the other articles in this section visit http://onlinelibrary.wiley.com/doi/10.1111/bph.v175.14/issuetoc.Copyright © 2017 The British Pharmacological Society

KW - adaptive immunity

KW - analgesic activity

KW - bacterial translocation

KW - confusion/si [Side Effect]

KW - constipation/dt [Drug Therapy]

KW - constipation/si [Side Effect]

KW - correlation analysis

KW - disease association

KW - dysbiosis/si [Side Effect]

KW - human

KW - hyperalgesia/si [Side Effect]

KW - \*immune deficiency/si [Side Effect]

KW - immune response

KW - in vitro study

KW - in vivo study

KW - infection risk

KW - infection sensitivity

KW - inflammatory pain/dt [Drug Therapy]

KW - innate immunity

KW - intestine mucosa permeability

KW - macrophage

KW - natural killer cell

KW - nausea/si [Side Effect]

KW - neuropathic pain/dt [Drug Therapy]

KW - neutrophil

KW - nonhuman

KW - opiate addiction/si [Side Effect]

KW - pain/dt [Drug Therapy]

KW - pain severity

KW - permeability barrier

KW - pneumonia

KW - priority journal

KW - protein expression

KW - receptor binding

KW - respiration depression/si [Side Effect]

KW - review

KW - T lymphocyte

KW - 17 methylnaltrexone/dt [Drug Therapy]

KW - 3,4 dichloro n methyl n [2 (1 pyrrolidinyl)cyclohexyl]benzeneacetamide

KW - chemokine receptor CCR1/ec [Endogenous Compound]

KW - chemokine receptor CCR2/ec [Endogenous Compound]

KW - chemokine receptor CXCR1/ec [Endogenous Compound]

KW - chemokine receptor CXCR2/ec [Endogenous Compound]

KW - CXCL2 chemokine/ec [Endogenous Compound]

KW - cyclic AMP responsive element binding protein/ec [Endogenous Compound]

KW - endorphin/ec [Endogenous Compound]

KW - enkephalin[2 dextro alanine 4 methylphenylalanine 5 glycine]

KW - enkephalin[2,5 dextro penicillamine]

KW - fentanyl

KW - hormone/ec [Endogenous Compound]

KW - interleukin 10/ec [Endogenous Compound]

KW - interleukin 4/ec [Endogenous Compound]

KW - interleukin 5/ec [Endogenous Compound]

KW - metenkephalin/ec [Endogenous Compound]

KW - microRNA/ec [Endogenous Compound]

KW - morphine/ae [Adverse Drug Reaction]

KW - morphine/dt [Drug Therapy]

KW - \*opiate/ae [Adverse Drug Reaction]

KW - \*opiate/dt [Drug Therapy]

KW - \*opiate/to [Drug Toxicity]

KW - opiate peptide/ec [Endogenous Compound]

KW - opiate receptor/ec [Endogenous Compound]

XT - confusion / side effect / opiate

XT - constipation / drug therapy / 17 methylnaltrexone

XT - constipation / side effect / opiate

XT - dysbiosis / side effect / morphine

XT - hyperalgesia / side effect / opiate

XT - immune deficiency / side effect / opiate

XT - inflammatory pain / drug therapy / opiate

XT - nausea / side effect / opiate

XT - neuropathic pain / drug therapy / opiate

XT - opiate addiction / side effect / opiate

XT - pain / drug therapy / morphine

XT - pain / drug therapy / opiate

XT - respiration depression / side effect / opiate

XT - 17 methylnaltrexone / drug therapy / constipation

XT - morphine / adverse drug reaction / dysbiosis

XT - morphine / drug therapy / pain

XT - opiate / adverse drug reaction / confusion

XT - opiate / adverse drug reaction / constipation

XT - opiate / adverse drug reaction / hyperalgesia

XT - opiate / adverse drug reaction / immune deficiency

XT - opiate / adverse drug reaction / nausea

XT - opiate / adverse drug reaction / opiate addiction

XT - opiate / adverse drug reaction / respiration depression

XT - opiate / drug therapy / inflammatory pain

XT - opiate / drug therapy / neuropathic pain

XT - opiate / drug therapy / pain

JF - British Journal of Pharmacology

JA - Br. J. Pharmacol.

LA - English

VL - 175

IS - 14

SP - 2717

EP - 2725

CY - United States

PB - John Wiley and Sons Inc. (P.O.Box 18667, Newark NJ 07191-8667, United States)

SN - 0007-1188

SN - 1476-5381

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UR - http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1476-5381

DO - https://dx.doi.org/10.1111/bph.13750

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=615098924

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1111%2fbph.13750Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Plein&issn=0007-1188&title=British+Journal+of+Pharmacology&atitle=Opioids+and+the+immune+system+-+friend+or+foe&volume=175&issue=14&spage=2717&epage=2725&date=2018&doi=10.1111%2Fbph.13750&pmid=28213891&sid=OVID:embase

247.

TY - JOUR

DB - Embase

AN - 627434095

ID - 30558014 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30558014]

T1 - Fecal microbiota transplantation relieve painful diabetic neuropathy A case report

A1 - Cai T.-T.

A1 - Ye X.-L.

A1 - Yong H.-J.

A1 - Song B.

A1 - Zheng X.-L.

A1 - Cui B.-T.

A1 - Zhang F.-M.

A1 - Lu Y.-B.

A1 - Miao H.

A1 - Ding D.-F.

Y1 - 2018//

N2 - Rationale: Fecal microbiota transplantation (FMT) has been used in a wide variety of diseases. In this article, we reported a 46-year-old female with diabetic neuropathy (DN) achieved remission by the treatment of FMT. Patient concerns: The patient with an 8-year history of diabetes and hypertension was admitted to hospital due to sensitive pain of her right thigh and poor blood glucose control. The traditional hypoglycemic and analgesic treatment were useless to her symptoms. Diagnosis: Diabetic-induced neuropathy was considered. Intervention(s): This patient received twice FMTs for 3 months. Outcome(s): After twice FMTs, the clinical response of patient was pleasant. The glycemic control was improved, with a remarkable relief of the symptoms of painful DN in particular. No obvious adverse effects were observed during the FMTs and follow-up observation-testing. Lessons: We proposed that FMT could be a promising treatment in patients with diabetes or diabetes-related complications like DN. FMT also appeared to be definitely safer and more tolerable than the pharmacologic treatment in patients with DN.Copyright © 2018 the Author(s). Published by Wolters Kluwer Health, Inc. This is an open access article distributed under the terms of the Creative Commons Attribution-Non Commercial-No Derivatives License 4.0 (CCBY-NC-ND), where it is permissible to download and share the work provided it is properly cited. The work cannot be changed in any way or used commercially without permission from the journal.

KW - adult

KW - analgesia

KW - anesthesia

KW - antihypertensive therapy

KW - anxiety

KW - article

KW - blood pressure monitoring

KW - body weight loss

KW - case report

KW - clinical article

KW - \*diabetic neuropathy/co [Complication]

KW - \*diabetic neuropathy/dm [Disease Management]

KW - \*diabetic neuropathy/dt [Drug Therapy]

KW - \*diabetic neuropathy/th [Therapy]

KW - diabetic retinopathy

KW - diarrhea

KW - electromyogram

KW - evening dosage

KW - \*fecal microbiota transplantation

KW - feces microflora

KW - female

KW - follow up

KW - glucose blood level

KW - glucose homeostasis

KW - glycemic control

KW - hemoglobin blood level

KW - human

KW - hypertension/dt [Drug Therapy]

KW - injection

KW - insulin treatment

KW - intervertebral disk degeneration

KW - intestine endoscopy

KW - limb

KW - limb pain/dt [Drug Therapy]

KW - lipid blood level

KW - lumbar spine

KW - medical history

KW - middle aged

KW - motor nerve conduction

KW - nausea

KW - nociception

KW - non insulin dependent diabetes mellitus/dt [Drug Therapy]

KW - nuclear magnetic resonance imaging

KW - oral glucose tolerance test

KW - paresthesia

KW - polydipsia

KW - polyuria

KW - priority journal

KW - quality of life

KW - sensory dysfunction

KW - sleep disorder

KW - spine radiography

KW - terminal ileum

KW - tibial nerve

KW - triacylglycerol blood level

KW - visual analog scale

KW - vomiting

KW - amlodipine besylate/dt [Drug Therapy]

KW - analgesic agent/dt [Drug Therapy]

KW - glucose/ec [Endogenous Compound]

KW - hemoglobin A1c/ec [Endogenous Compound]

KW - high density lipoprotein cholesterol/ec [Endogenous Compound]

KW - insulin glargine/dt [Drug Therapy]

KW - lipid/ec [Endogenous Compound]

KW - low density lipoprotein cholesterol/ec [Endogenous Compound]

KW - metformin/dt [Drug Therapy]

KW - metformin/po [Oral Drug Administration]

KW - mitiglinide/dt [Drug Therapy]

KW - mitiglinide/po [Oral Drug Administration]

KW - thioctic acid/dt [Drug Therapy]

KW - triacylglycerol/ec [Endogenous Compound]

KW - laboratory device

KW - automatic purification system

XT - diabetic neuropathy / drug therapy / analgesic agent

XT - diabetic neuropathy / drug therapy / thioctic acid

XT - hypertension / drug therapy / amlodipine besylate

XT - limb pain / drug therapy / analgesic agent

XT - limb pain / drug therapy / thioctic acid

XT - non insulin dependent diabetes mellitus / drug therapy / insulin glargine

XT - non insulin dependent diabetes mellitus / drug therapy / metformin

XT - non insulin dependent diabetes mellitus / drug therapy / mitiglinide

XT - amlodipine besylate / drug therapy / hypertension

XT - analgesic agent / drug therapy / diabetic neuropathy

XT - analgesic agent / drug therapy / limb pain

XT - insulin glargine / drug therapy / non insulin dependent diabetes mellitus

XT - metformin / drug therapy / non insulin dependent diabetes mellitus

XT - mitiglinide / drug therapy / non insulin dependent diabetes mellitus

XT - thioctic acid / drug therapy / diabetic neuropathy

XT - thioctic acid / drug therapy / limb pain

JF - Medicine (United States)

JA - Medicine

LA - English

VL - 97

IS - 50

SP - e13543

CY - United States

PB - Lippincott Williams and Wilkins (E-mail: kathiest.clai@apta.org)

SN - 0025-7974

SN - 1536-5964

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UR - http://journals.lww.com/md-journal

DO - https://dx.doi.org/10.1097/MD.0000000000013543

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=627434095

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1097%2fMD.0000000000013543Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cai&issn=0025-7974&title=Medicine+%28United+States%29&atitle=Fecal+microbiota+transplantation+relieve+painful+diabetic+neuropathy+A+case+report&volume=97&issue=50&spage=e13543&epage=&date=2018&doi=10.1097%2FMD.0000000000013543&pmid=30558014&sid=OVID:embase

248.

TY - JOUR

DB - Embase

AN - 2001833692

T1 - Infantile colic

A1 - Sung V.

Y1 - 2018//

N2 - Infantile colic is a common, self-resolving condition. It has important adverse associations including maternal depression, child abuse and early cessation of breastfeeding. There are many proposed causes of colic, however none is definitive. Colic is likely to be an exacerbation of normal infant crying brought about by physiological and psychosocial factors. There is no known single effective treatment for colic. The mainstay of management is exclusion of organic causes, explanation of the natural history of colic, parental support, offering strategies to deal with the infant's feeding and sleep, and exploration of settling techniques. The probiotic Lactobacillus reuteri DSM17938 may be trialled for exclusively breastfed infants with colic. Its efficacy in formula-fed babies is unknown. An allergy to cow's milk protein accounts for a minority of cases. Hypoallergenic formula, and dietary exclusion for breastfeeding mothers, should only be tried in infants with other clinical features of cow's milk allergy.Copyright © 2018 NPS MedicineWise.

KW - abdominal mass

KW - acupuncture

KW - apnea/si [Side Effect]

KW - article

KW - atopy

KW - behavior therapy

KW - body weight gain

KW - breast feeding

KW - child abuse

KW - coma/si [Side Effect]

KW - counseling

KW - crying

KW - diarrhea

KW - distress syndrome

KW - drowsiness/si [Side Effect]

KW - eczema

KW - Escherichia coli

KW - feeding difficulty

KW - fever

KW - foreign body

KW - gastric dysmotility

KW - gastroesophageal reflux

KW - gastrointestinal disease

KW - head circumference

KW - hematemesis

KW - \*infantile colic

KW - inflammation

KW - intestine flora

KW - Lactobacillus

KW - Lactobacillus reuteri

KW - lethargy

KW - macrocephaly

KW - milk allergy

KW - pallor

KW - pathophysiology

KW - petechia

KW - physiology

KW - postnatal depression

KW - rectum hemorrhage

KW - risk factor

KW - sepsis

KW - social psychology

KW - visceral pain

KW - vomiting

KW - dicycloverine/ae [Adverse Drug Reaction]

KW - milk protein/ec [Endogenous Compound]

KW - probiotic agent

KW - proton pump inhibitor

KW - simethicone/ae [Adverse Drug Reaction]

XT - apnea / side effect / dicycloverine

XT - apnea / side effect / simethicone

XT - coma / side effect / dicycloverine

XT - coma / side effect / simethicone

XT - drowsiness / side effect / dicycloverine

XT - drowsiness / side effect / simethicone

XT - dicycloverine / adverse drug reaction / apnea

XT - dicycloverine / adverse drug reaction / coma

XT - dicycloverine / adverse drug reaction / drowsiness

XT - simethicone / adverse drug reaction / apnea

XT - simethicone / adverse drug reaction / coma

XT - simethicone / adverse drug reaction / drowsiness

JF - Australian Prescriber

JA - Aust. Prescr.

LA - English

VL - 41

IS - 4

SP - 105

EP - 110

CY - Australia

PB - Australian Government Publishing Service (E-mail: info@australianprescriber.com)

SN - 0312-8008

SN - 1839-3942

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UR - https://www.nps.org.au/assets/f0a9645971e09083-ba0f775adc09-p105-Sung-v2.pdf

DO - https://dx.doi.org/10.18773/AUSTPRESCR.2018.033

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=2001833692

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.18773%2fAUSTPRESCR.2018.033Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Sung&issn=0312-8008&title=Australian+Prescriber&atitle=Infantile+colic&volume=41&issue=4&spage=105&epage=110&date=2018&doi=10.18773%2FAUSTPRESCR.2018.033&pmid=&sid=OVID:embase

249.

TY - JOUR

DB - Embase

AN - 625397330

ID - 30537997 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30537997]

T1 - Bidirectional gut-brain-microbiota axis as a potential link between inflammatory bowel disease and ischemic stroke

A1 - Zhao L.

A1 - Xiong Q.

A1 - Stary C.M.

A1 - Mahgoub O.K.

A1 - Ye Y.

A1 - Gu L.

A1 - Xiong X.

A1 - Zhu S.

AO - Xiong, Xiaoxing; ORCID: https://orcid.org/0000-0001-6983-8547

Y1 - 2018//

N2 - Emerging evidence suggests that gut-brain-microbiota axis (GBMAx) may play a pivotal role linking gastrointestinal and neuronal disease. In this review, we summarize the latest advances in studies of GBMAx in inflammatory bowel disease (IBD) and ischemic stroke. A more thorough understanding of the GBMAx could advance our knowledge about the pathophysiology of IBD and ischemic stroke and help to identify novel therapeutic targets via modulation of the GBMAx.Copyright © 2018 The Author(s).

KW - article

KW - Bacteroides

KW - Bifidobacterium

KW - blood brain barrier

KW - \*brain ischemia/dt [Drug Therapy]

KW - Clostridium

KW - colitis/dt [Drug Therapy]

KW - colitis/th [Therapy]

KW - Crohn disease/dt [Drug Therapy]

KW - disease association

KW - drug dose comparison

KW - drug targeting

KW - enteric feeding

KW - fecal microbiota transplantation

KW - generalized anxiety disorder

KW - human

KW - hypothalamus hypophysis adrenal system

KW - immune response

KW - \*inflammatory bowel disease/dt [Drug Therapy]

KW - \*inflammatory bowel disease/th [Therapy]

KW - \*intestine flora

KW - major depression

KW - \*microflora

KW - neuroanatomy

KW - nonhuman

KW - obsessive compulsive disorder

KW - panic

KW - pathophysiology

KW - protein expression

KW - psychophysiology

KW - remission

KW - stress

KW - treatment outcome

KW - vagus nerve stimulation

KW - 3 (2,4 dimethoxybenzylidene)anabaseine/pd [Pharmacology]

KW - 4 aminobutyric acid/ec [Endogenous Compound]

KW - acetylcholine/ec [Endogenous Compound]

KW - antibiotic agent/dt [Drug Therapy]

KW - butyric acid/ec [Endogenous Compound]

KW - calcitonin gene related peptide/ec [Endogenous Compound]

KW - corticosteroid/dt [Drug Therapy]

KW - corticotropin/ec [Endogenous Compound]

KW - corticotropin releasing factor/ec [Endogenous Compound]

KW - dopamine/ec [Endogenous Compound]

KW - encenicline/dt [Drug Therapy]

KW - encenicline/pd [Pharmacology]

KW - galantamine/pd [Pharmacology]

KW - histamine/ec [Endogenous Compound]

KW - interleukin 1/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - kynurenic acid/ec [Endogenous Compound]

KW - melatonin/ec [Endogenous Compound]

KW - neuropeptide Y/ec [Endogenous Compound]

KW - probiotic agent/dt [Drug Therapy]

KW - quinolinic acid/ec [Endogenous Compound]

KW - semapimod/ct [Clinical Trial]

KW - semapimod/do [Drug Dose]

KW - semapimod/dt [Drug Therapy]

KW - serotonin/ec [Endogenous Compound]

KW - somatostatin/ec [Endogenous Compound]

KW - substance P/ec [Endogenous Compound]

KW - toll like receptor 10/ec [Endogenous Compound]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - tumor necrosis factor inhibitor/dt [Drug Therapy]

KW - unindexed drug

KW - vasoactive intestinal polypeptide/ec [Endogenous Compound]

KW - \*brain flora

XT - brain ischemia / drug therapy / probiotic agent

XT - colitis / drug therapy / encenicline

XT - Crohn disease / drug therapy / semapimod

XT - inflammatory bowel disease / drug therapy / antibiotic agent

XT - inflammatory bowel disease / drug therapy / corticosteroid

XT - inflammatory bowel disease / drug therapy / probiotic agent

XT - inflammatory bowel disease / drug therapy / tumor necrosis factor inhibitor

XT - antibiotic agent / drug therapy / inflammatory bowel disease

XT - corticosteroid / drug therapy / inflammatory bowel disease

XT - encenicline / drug therapy / colitis

XT - probiotic agent / drug therapy / brain ischemia

XT - probiotic agent / drug therapy / inflammatory bowel disease

XT - semapimod / drug therapy / Crohn disease

XT - tumor necrosis factor inhibitor / drug therapy / inflammatory bowel disease

JF - Journal of Neuroinflammation

JA - J. Neuroinflamm.

LA - English

VL - 15

IS - 1

SP - 339

CY - United Kingdom

PB - BioMed Central Ltd. (E-mail: info@biomedcentral.com)

SN - 1742-2094 (electronic)

SN - 1742-2094

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C3 - cni 1493, gts 21

UR - http://www.jneuroinflammation.com/home/

DO - https://dx.doi.org/10.1186/s12974-018-1382-3

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=625397330

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1186%2fs12974-018-1382-3Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhao&issn=1742-2094&title=Journal+of+Neuroinflammation&atitle=Bidirectional+gut-brain-microbiota+axis+as+a+potential+link+between+inflammatory+bowel+disease+and+ischemic+stroke&volume=15&issue=1&spage=339&epage=&date=2018&doi=10.1186%2Fs12974-018-1382-3&pmid=30537997&sid=OVID:embase

250.

TY - JOUR

DB - Embase

AN - 620772213

ID - 29271563 [https://www.ncbi.nlm.nih.gov/pubmed/?term=29271563]

T1 - Is metformin poised for a second career as an antimicrobial?

A1 - Malik F.

A1 - Mehdi S.F.

A1 - Ali H.

A1 - Patel P.

A1 - Basharat A.

A1 - Kumar A.

A1 - Ashok F.

A1 - Stein J.

A1 - Brima W.

A1 - Malhotra P.

A1 - Roth J.

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AO - Roth, Jesse; ORCID: https://orcid.org/0000-0002-7968-8746

Y1 - 2018//

N2 - Metformin, a widely used antihyperglycaemic, has a good safety profile, reasonably manageable side-effects, is inexpensive, and causes a desirable amount of weight loss. In 4 studies of patients with tuberculosis (1 prospective and 3 retrospective), metformin administration resulted in better outcomes. In mice with several models of endotoxemia, metformin diminished levels of proinflammatory cytokines and improved survival. Laboratory studies showed effectiveness of the drug on multiple pathogens, including Trichinella spiralis, Staphylococcus aureus, Pseudomonas aeruginosa, hepatitis B virus, hepatitis C virus, and human immunodeficiency virus. Metformin administration in humans and mice produced major changes in the composition of the gut microbiota. These recently discovered microbe-modulating properties of the drug have led investigators to predict wide therapeutic utility for metformin. The recent easing in United States Food and Drug Administration (FDA) guidelines regarding administration of metformin to patients with kidney disease, and reduced anxiety about patient safety in terms of lactic acidosis, increase the probability of broadening of metformin's usage as a treatment of infectious agents. In this text we review articles pertinent to metformin's effects on microorganisms, both pathogens and commensals. We highlight the possible role of metformin in a wide range of infectious diseases and a possible expansion of its therapeutic profile in this field. A systematic review was done of PubMed indexed articles that examined the effects of metformin on a wide range of pathogens. Metformin was found to have efficacy as an antimicrobial agent in patients with tuberculosis. Mice infected with Trypanosomiasis cruzi had higher survival when also treated with metformin. The drug in vitro was active against T. spiralis, S. aureus, P. aeruginosa, and hepatitis B virus. In addition there is emerging literature on its role in sepsis. We conclude that metformin may have a potential role in the therapy for multiple infectious diseases. Metformin, in addition to its traditional effects on glucose metabolism, provides anti-microbial benefits in patients with tuberculosis and in a very wide range of other infections encounters in vitro and in vivo.Copyright © 2017 John Wiley & Sons, Ltd.

KW - drug mechanism

KW - glucose metabolism

KW - hepatitis B

KW - Hepatitis C virus

KW - human

KW - Human immunodeficiency virus

KW - Human immunodeficiency virus infection

KW - \*infection/dt [Drug Therapy]

KW - \*intestine flora

KW - kidney failure

KW - microflora

KW - nonhuman

KW - practice guideline

KW - priority journal

KW - Pseudomonas aeruginosa

KW - review

KW - sepsis

KW - Staphylococcus aureus

KW - Trichinella spiralis

KW - trypanosomiasis

KW - tuberculosis

KW - glucose/ec [Endogenous Compound]

KW - lactic acid/ec [Endogenous Compound]

KW - \*metformin/dt [Drug Therapy]

KW - \*metformin/pd [Pharmacology]

XT - infection / drug therapy / metformin

XT - metformin / drug therapy / infection

JF - Diabetes/Metabolism Research and Reviews

JA - Diabetes Metab. Res. Rev.

LA - English

VL - 34

IS - 4

SP - e2975

CY - United Kingdom

PB - John Wiley and Sons Ltd (Southern Gate, Chichester, West Sussex PO19 8SQ, United Kingdom. E-mail: vgorayska@wiley.com)

SN - 1520-7552

SN - 1520-7560

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UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1520-7560

DO - https://dx.doi.org/10.1002/dmrr.2975

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=620772213

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1002%2fdmrr.2975Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Malik&issn=1520-7552&title=Diabetes%2FMetabolism+Research+and+Reviews&atitle=Is+metformin+poised+for+a+second+career+as+an+antimicrobial%3F&volume=34&issue=4&spage=e2975&epage=&date=2018&doi=10.1002%2Fdmrr.2975&pmid=29271563&sid=OVID:embase

251.

TY - JOUR

DB - Embase

AN - 624767427

ID - 30264824 [https://www.ncbi.nlm.nih.gov/pubmed/?term=30264824]

T1 - Chronic lung disease in HIV patients

A1 - Neri S.

A1 - Leung J.

A1 - Besutti G.

A1 - Santoro A.

A1 - Fabbri L.M.

A1 - Guaraldi G.

Y1 - 2018//

N2 - This narrative review discusses literature on chronic obstructive pulmonary disease (COPD) in people living with HIV (PLWH). Existing data indicate that HIV itself, independent of smoking, constitutes a pathogenic agent implicated in this disease condition. COPD can be viewed not exclusively as a pulmonary disease but rather as a systemic syndrome sparked and fueled by a persistent low-grade HIV-attributable inflammatory state. We speculate that even in the absence of airflow obstruction on spirometry, HIV-related lung disease can manifest with respiratory symptoms and structural lung derangement. Although not fully satisfying the global initiative for obstructive lung disease criteria for COPD, this phenotype of small airways lung disease is related to significant impairment of lung health and is associated with a high comorbidity burden. Within the specific context of the aging epidemic affecting HIV patients characterized by a high burden of comorbidities, frailty, and disabilities HIV-related lung disease has to be fit into the framework of the general comorbidity burden that PLWH experience, due to both HIV infection and to incidental HIV-unrelated risk factors. In this review, we will also provide a list of research gaps and an agenda for future studies in HIV patients.Copyright © 2018, Publicaciones Permanyer. All rights reserved.

KW - airway obstruction

KW - antiretroviral therapy

KW - article

KW - cardiovascular disease

KW - CD4 lymphocyte count

KW - CD8 lymphocyte count

KW - CD8+ T lymphocyte

KW - \*chronic lung disease

KW - \*chronic obstructive lung disease/ep [Epidemiology]

KW - \*chronic obstructive lung disease/et [Etiology]

KW - comorbidity

KW - depression

KW - disease burden

KW - disease exacerbation

KW - forced expiratory volume

KW - forced vital capacity

KW - frailty

KW - fungal colonization

KW - highly active antiretroviral therapy

KW - human

KW - \*Human immunodeficiency virus infection

KW - immune response

KW - inflammation

KW - lung function

KW - microbiome

KW - neutrophil count

KW - osteopenia

KW - osteoporosis

KW - oxidative stress

KW - pathogenesis

KW - Pneumocystis jiroveci

KW - Pneumocystis pneumonia

KW - prevalence

KW - risk factor

KW - smoking

KW - spirometry

KW - matrix metalloproteinase/ec [Endogenous Compound]

JF - AIDS Reviews

JA - AIDS Rev.

LA - English

VL - 20

IS - 3

SP - 150

EP - 157

CY - Spain

PB - Publicaciones Permanyer (E-mail: permanyer@permanyer.com)

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UR - http://www.aidsreviews.com/get.php?x=p4240ab173-aids\_20\_3\_p-150-159.pdf

DO - https://dx.doi.org/10.24875/AIDSRev.18000002

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=624767427

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.24875%2fAIDSRev.18000002Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Neri&issn=1139-6121&title=AIDS+Reviews&atitle=Chronic+lung+disease+in+HIV+patients&volume=20&issue=3&spage=150&epage=157&date=2018&doi=10.24875%2FAIDSRev.18000002&pmid=30264824&sid=OVID:embase

252.

TY - JOUR

DB - Embase

AN - 629665191

T1 - Acute demyelinating encephalomyelitis: Maybe it's not all in your head

T3 - Hospital Medicine, HM 2018. Orlando, FL United States.

A1 - Matta S.

A1 - Shidfar S.

Y1 - 2018//

N2 - Case Presentation: 62-year-old man with recent hospitalization for septic shock due to toe osteomyelitis,complicated by severe C. difficile infection requiring fecal transplant 3 weeks prior to admission,presenting with confusion,right-sided weakness,and ataxia.Symptoms were first noted 2 weeks after the fecal transplant and consisted of depressed mood and right shoulder weakness.Neurological exam was notable for neglect of right visual field,sensory neglect of the right side,2/5 motor strength in right upper and lower extremities.Magnetic resonance imaging of the brain showed multiple ring-enhancing lesions throughout the white matter of both cerebral hemispheres,basal ganglia,and bilateral cerebral peduncles,with no edema or mass-effect.Cerebrospinal fluid analysis was unrevealing,with no oligoclonal bands or malignant cells.An echocardiogram didn't reveal vegetations.An extensive infectious workup including serum and CSF testing for toxoplasmosis,HIV,tuberculosis,cryptococcus were negative.CT scan of the chest and abdomen revealed no infection or malignancy.Brain biopsy was consistent with active demyelination.He received IV steroids followed by an oral taper.His mental status and weakness improved slightly, however, subsequent MRI showed multiple new small enhancing white matter lesions,requiring 2 further admission for plasmapheresis and Rituxan.A repeat MRI 2 months later showed decrease in size of most of the lesions with no evidence of new or enhancing lesions and improvement of cognition. Discussion(s): ADEM is a monophasic inflammatory demyelinating disorder,more common in pediatrics.Due to its rarity in adults,there is limited understanding of its triggers,clinical course,or management.Mounting evidence indicates that gut microbiota can influence the immune and nervous system via a bidirectional relationship termed the microbiota-gut-brain axis.This influences the pathogenesis of a number of disorders in which inflammation is implicated,such as mood and demyelinating disorders.In addition,acute stress increases GI and BBB permeability through activation of mast cells,that further induce a strong auto-inflammatory response,leading to inflammation and neuronal damage.We postulate that in our case, ADEM was triggered by severe C. difficile infection.Our patient's symptoms were refractory to steroids and plasmapheresis,which have been previously used for treatment,subsequently requiring 2 doses of Rituxan before clinical and radiological improvement were noted. Conclusion(s): Increasing evidence indicates that a delicate balance of gut microorganisms is necessary for health, disruption of which is associated especially with neuropsychiatric disorders.We present the case of a middle aged adult with refractory ADEM triggered by combination of systemic infection and severe C difficile requiring fecal transplant who improved dramatically after combination of immunotherapies,including IV steroids,plasmapheresis,and Rituxan.

KW - abdomen

KW - \*acute disseminated encephalomyelitis

KW - acute stress

KW - adult

KW - ataxia

KW - basal ganglion

KW - brain biopsy

KW - cancer cell

KW - case report

KW - \*cerebral peduncle

KW - cerebrospinal fluid

KW - cerebrospinal fluid analysis

KW - clinical article

KW - \*Clostridium difficile infection

KW - cognition

KW - complication

KW - demyelinating disease

KW - depression

KW - disease course

KW - drug combination

KW - drug therapy

KW - echocardiography

KW - edema

KW - \*fecal microbiota transplantation

KW - Filobasidiella

KW - hemisphere

KW - hospitalization

KW - human

KW - human cell

KW - Human immunodeficiency virus

KW - human tissue

KW - immunotherapy

KW - intestine flora

KW - lower limb

KW - male

KW - mast cell

KW - mental disease

KW - middle aged

KW - mood

KW - neglect

KW - nerve injury

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - osteomyelitis

KW - pediatrics

KW - \*plasmapheresis

KW - septic shock

KW - shoulder

KW - thorax

KW - toxoplasmosis

KW - tuberculosis

KW - vegetation

KW - visual field

KW - weakness

KW - white matter lesion

KW - x-ray computed tomography

KW - oligoclonal band

KW - \*rituximab

KW - steroid

KW - conference abstract

JF - Journal of Hospital Medicine

JA - J. Hosp. Med.

LA - English

VL - 13

IS - 4 Supplement 1

SP -

CY - Netherlands

PB - Frontline Medical Communications

SN - 1553-5606

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UR - https://www.shmabstracts.com/meetings/shm-annual-meeting-2018/715

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=629665191

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&AN=629665191Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Matta&issn=1553-5606&title=Journal+of+Hospital+Medicine&atitle=Acute+demyelinating+encephalomyelitis%3A+Maybe+it%27s+not+all+in+your+head&volume=13&issue=4+Supplement+1&spage=&epage=&date=2018&doi=&pmid=&sid=OVID:embase

253.

TY - JOUR

DB - Embase

AN - 2002336722

T1 - BRAIN-GUT ALTERATIONS IN GERM-FREE MICE TRANSPLANTED WITH FECAL MICROBIOTA FROM IBS PATIENTS

T3 - 2018 DDW. Washington, DC United States.

A1 - Larauche M.H.

A1 - McGinn J.

A1 - Labus J.S.

A1 - Tillisch K.

A1 - Chang L.

A1 - Mayer E.A.

A1 - Hsiao E.

Y1 - 2018//

N2 - Background: Irritable bowel syndrome (IBS) is associated with changes in the composition and function of the gut microbiota, characterized by alterations in Clostridiales taxa and tryptophan metabolism. In mouse models, spore-forming bacteria, including Clostridiales, sufficiently stimulate colonic serotonin biosynthesis and expedite gut motility. Aim(s): We aimed to determine whether transplant of the human IBS microbiota, including increased levels of Clostridiales, into germ-free mice sufficiently induces IBS-related gastrointestinal (transit, permeability) and/or behavioral symptoms, as compared to mice colonized with microbiota from human healthy controls (HC). Method(s): Germ free male mice (6 weeks old) were gavaged with pooled microbiota from 5 Rome III+ IBS-D male patients with higher abundance of fecal Clostridiales (n=35 mice, 27M/18F) or 5 male HC (n=39 mice, 24M/17F). Two weeks after colonization, mice were assessed for their behaviors in the open field test (OFT), whole gastrointestinal transit (carmine red) and permeability using 4kDa-FITC dextran (FD4) gavage, before and after exposure to a chronic mild psychological stressor (repeated water avoidance stress [rWAS], 1h/day, 10 days). Result(s): There was no difference in age (36+/-7 vs 33+/-6 years), Hospital Anxiety and Depression Scale (HAD) anxiety (5+/-1.8 vs 2.4+/-0.6) or depression (1.2+/-0.4 vs 2.0+/-0.6) in IBS-D patients vs HC. Before rWAS, IBS mice exhibited a 1.7-fold reduction in intestinal permeability and increased fecal output (3.6 +/- 0.3 vs 2.8 +/- 0.2 fecal pellets/10 min) in the open field task compared to HC mice (p<0.05), but no differences in whole gastrointestinal transit or behaviors in OFT. In response to rWAS, IBS and HC mice showed alterations in behaviors in the OFT characterized by a decrease in total distance (1.2 and 1.4-fold, p<0.05 and p<0.01, respectively), decrease in center distance (1.3 and 2-fold, p<0.05 and p<0.01, respectively), decrease in center duration (1. 5 and 1.9-fold, p<0.05, respectively) decrease in center frequency (1.4 and 1.5-fold, p<0.05, respectively) and decrease in total velocity (1.2 and 1.3-fold, p<0.05, respectively), suggesting the development of anxiety in both IBS and HC mice post rWAS. Both IBS and HC groups also presented a similar increase in defecation during rWAS sessions (36.9+/-2.7 vs 34.7+/-3.9 total fecal pellets, respectively, p>0.05). Conclusion(s): Our data support the notion that dysbiosis of the gut as seen in human IBS can alter behavior and GI function in mice, modeling some (increased defecation with mild stress), but not all of the phenotypic features seen in patients. These results suggest that enrichment of the microbiota in Clostridiales as observed in IBS flora sufficiently increases defecation in mice and motivates further studies addressing the specific roles for microbial modulation of brain-gut interactions.Copyright © 2018 AGA Institute. All rights reserved.

KW - adult

KW - animal experiment

KW - animal model

KW - anxiety

KW - avoidance behavior

KW - \*brain

KW - Clostridiales

KW - controlled study

KW - defecation

KW - disease simulation

KW - enteric feeding

KW - \*feces microflora

KW - female

KW - \*gastrointestinal transit

KW - \*germfree mouse

KW - Hospital Anxiety and Depression Scale

KW - irritable colon

KW - male

KW - modulation

KW - mouse

KW - nonhuman

KW - open field test

KW - stress

KW - carminic acid

KW - fluorescein isothiocyanate dextran

KW - water

KW - conference abstract

JF - Gastroenterology

JA - Gastroenterology

LA - English

VL - 154

IS - 6 Supplement 1

SP - S

EP - 116

CY - Netherlands

PB - W.B. Saunders

SN - 0016-5085

SN - 1528-0012

DO - https://dx.doi.org/10.1016/S0016-5085%2818%2930822-9

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=2002336722

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1016%2fS0016-5085%252818%252930822-9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Larauche&issn=0016-5085&title=Gastroenterology&atitle=BRAIN-GUT+ALTERATIONS+IN+GERM-FREE+MICE+TRANSPLANTED+WITH+FECAL+MICROBIOTA+FROM+IBS+PATIENTS&volume=154&issue=6+Supplement+1&spage=S&epage=116&date=2018&doi=10.1016%2FS0016-5085%252818%252930822-9&pmid=&sid=OVID:embase

254.

TY - JOUR

DB - Embase

AN - 627350247

T1 - Extraction of gut microbiota from stressed and burned rats

T3 - 6th Annual United States Army Institute of Surgical Research Summer Undergraduate Research Internship Program 2018. San Antonio, TX United States.

A1 - Manos M.

A1 - Garcia B.

A1 - Sosanya N.M.

A1 - Tongkhuya S.

A1 - Strain M.M.

A1 - Crimmins S.L.

Y1 - 2018//

N2 - Background: The human gastrointestinal (GI) tract contains over 1014 microorganisms that assist the body in a variety of functions including digestion and immune function [1]. These gut microorganisms can interact through the gut brain axis, a bidirectional communication system between the GI tract and the central nervous system (CNS) [1], via immune cells, neuronal pathways, or blood-brain barrier permeable neuroactive metabolites [2]. Dysregulation of gut flora can cause dysbiosis, a state where beneficial bacteria are depleted or overpowered by pathogenic bacteria [2]. Recent studies have shown that dysbiosis increases after burn injury and possibly contributes to the development of sepsis [3]. This may be due to the down regulation of epithelial cell tight junction genes, which allows for opportunistic bacteria to translocate from the gut to peripheral tissue, complicating treatment [3]. In addition, stress can increase dysbiosis and directly impact neurological diseases such as depression and anxiety as well as visceral pain severity [1,4]. The aim of this study was to examine microbiota changes after a combination of burn injury and stress. We believe the combination of stress and burn will disrupt the gut microbial profile, which will be correlated to increased pain behaviors. Material(s) and Method(s): First we compared two methods of DNA extraction. Fecal pellets from pair housed rats were divided into two samples for analysis with Qiamp PowerFecal DNA (10, 25, 100, or 250 mg) and EZ1 DNA Tissue kit (10 or 25 mg). To examine the effects of stress, fecal pellets from pair housed female rats were compared between the first day of and 2 weeks after chronic unpredicted stress (i.e. forced swim, cold, sound, and restraint). Animals in the same groups (i.e., stress/no stress) were housed together. DNA was extracted using the Qiamp PowerFecal DNA Kit (100 mg). After DNA extraction, the concentration as well as the protein and organic material contamination were examined using spectrophotometry. Result(s): While both kits yielded similar concentrations and amount of organic contamination, the EZ1 DNA Tissue Kit had more protein contamination compared to the Qiamp PowerFecal DNA Kit. DNA extracted from experimental sample using the Qiamp PowerFecal DNA Kit produced an adequate yield and purity for later PCR amplification and microbiome analysis. Conclusion(s): Overall, the Qiamp PowerFecal DNA kit provided an adequate amount of DNA with less protein contaminates. Future studies, will use DNA extracted from experimental samples to examine the relationship between gut microbiota, stress, and pain.

KW - adult

KW - animal cell

KW - animal experiment

KW - animal tissue

KW - anxiety

KW - burn

KW - cold stress

KW - contamination

KW - depression

KW - \*DNA extraction

KW - down regulation

KW - epithelium cell

KW - feces

KW - female

KW - forced swim test

KW - \*intestine flora

KW - neurologic disease

KW - nonhuman

KW - pain severity

KW - polymerase chain reaction

KW - rat

KW - sepsis

KW - sound

KW - spectrophotometry

KW - tight junction

KW - visceral pain

KW - endogenous compound

KW - conference abstract

JF - Journal of Translational Medicine

JA - J. Transl. Med.

LA - English

VL - 16

IS - Supplement 3

SP -

CY - Netherlands

PB - BioMed Central Ltd.

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DO - https://dx.doi.org/10.1186/s12967-018-1671-8

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=627350247

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&DO=10.1186%2fs12967-018-1671-8Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Manos&issn=1479-5876&title=Journal+of+Translational+Medicine&atitle=Extraction+of+gut+microbiota+from+stressed+and+burned+rats&volume=16&issue=Supplement+3&spage=&epage=&date=2018&doi=10.1186%2Fs12967-018-1671-8&pmid=&sid=OVID:embase

255.

TY - JOUR

DB - Embase

AN - 622970417

T1 - Gut microbiome dysbiosis and delirium in mechanically ventilated adult patients: A prospective cohort study

T3 - American Thoracic Society International Conference, ATS 2018. San Diego, CA United States.

A1 - Kitsios G.

A1 - Fair K.

A1 - Xie M.

A1 - Shah F.

A1 - Fitch A.

A1 - Rapport S.

A1 - Huwe J.

A1 - Alexander S.

A1 - Morris A.

A1 - Girard T.D.

A1 - McVerry B.J.

Y1 - 2018//

N2 - RATIONALE: Delirium is a common complication in critically ill patients associated with worse short- and long-term clinical and neurocognitive outcomes. Although accumulating evidence supports effects of gut microbiota metabolites on brain function (gut-brain axis), it has not been explored whether gut dysbiosis is associated with delirium during critical illness. OBJECTIVE(S): To test the hypothesis that gut microbiome profiles are associated with delirium in mechanically ventilated ICU patients. METHOD(S): We prospectively recruited consecutive ICU patients with acute respiratory failure and serially collected (every 72hr up to 7 days) rectal swabs or stool samples for bacterial DNA extraction and 16S rRNA gene sequencing (V4 region). Clinical ICU nurses assessed patients for delirium every 12 hours using the Intensive Care Delirium Screening Checklist (ICDSC). We analyzed delirium duration as the proportion of days over ICU stay (up to 7 days) that each patient was positive for delirium (i.e. ICDSC >=4), and further considered two phenotypically discordant groups of high (>75%) vs. low delirium duration (<25%). We performed ecological analyses and regression models (linear and logistic) with the MicrobiomeAnalyst and R. RESULT(S): Of 68 patients enrolled (mean age 56 years, 57% males), 52 (76%) scored positive for delirium at some point, and the median days with delirium was 2(IQR:3). The median Sedation- Agitation Scale (SAS) was 3.6(IQR:1.2). Delirium duration did not differ by hypoxemia, SOFA scores, glycemic control or calorie intake, but was strongly associated with the lung injury prediction score (LIPS, p=0.004). Gut microbiome profiles had overall low mean alpha diversity (Shannon=2.9(SD:1.0)) indicative of intestinal dysbiosis. Profiles from rectal swabs and stool samples were significantly different at enrollment, but these communities became more similar after 48hrs (Figure A). No overall differences in community bacterial composition or diversity were observed with overall delirium duration or between patients with high vs. low delirium duration (Figure B). Patients with higher delirium durations demonstrated a trend for higher Firmicutes abundance (p=0.07, mainly comprising Enterococcus and Staphylococcus taxa) and lower Proteobacteria abundance (p=0.08) (Figure C). We did not find any significant association between early nutritional support (within 48hrs) with gut microbiome profiles and delirium duration. CONCLUSION(S): Gut microbial community profiles did not discriminate groups of patients with different delirium durations. Given the biological plausibility of the gut-brain axis in acute neurocognitive dysfunction, further study with deeper sequencing and functional assessment of the intestinal microbiome in larger patient cohorts is needed.

KW - acute respiratory failure

KW - adult

KW - \*artificial ventilation

KW - brain

KW - caloric intake

KW - checklist

KW - clinical assessment

KW - \*cohort analysis

KW - controlled study

KW - Enterococcus

KW - extraction

KW - feces

KW - female

KW - functional assessment

KW - gene sequence

KW - glycemic control

KW - human

KW - hypoxemia

KW - \*intensive care psychosis

KW - \*intestine flora

KW - lung injury

KW - major clinical study

KW - male

KW - microbial community

KW - middle aged

KW - nonhuman

KW - nurse

KW - nutritional support

KW - prediction

KW - \*prospective study

KW - Proteobacteria

KW - rectum

KW - Sedation Agitation Scale

KW - Sequential Organ Failure Assessment Score

KW - Staphylococcus

KW - bacterial DNA

KW - biological product

KW - endogenous compound

KW - RNA 16S

KW - conference abstract

JF - American Journal of Respiratory and Critical Care Medicine

JA - Am. J. Respir. Crit. Care Med.

LA - English

VL - 197

IS - MeetingAbstracts

SP -

CY - Netherlands

PB - American Thoracic Society

SN - 1535-4970

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M1 - (Girard) CRISMA Center, Department of Critical Care Medicine, University of Pittsburgh and UPMC Health System, Pittsburgh, PA, United States

UR - https://www.atsjournals.org/doi/abs/10.1164/ajrccm-conference.2018.197.1\_MeetingAbstracts.A2777

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=622970417

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&AN=622970417Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kitsios&issn=1535-4970&title=American+Journal+of+Respiratory+and+Critical+Care+Medicine&atitle=Gut+microbiome+dysbiosis+and+delirium+in+mechanically+ventilated+adult+patients%3A+A+prospective+cohort+study&volume=197&issue=MeetingAbstracts&spage=&epage=&date=2018&doi=&pmid=&sid=OVID:embase

256.

TY - JOUR

DB - Embase

AN - 622329321

T1 - Acute demyelinating encephalomyelitis: Maybe it's not all in your head

T3 - 41st Annual Meeting of the Society of General Internal Medicine, SGIM 2018. Denver, CO United States.

A1 - Matta S.K.

A1 - Shidfar S.

Y1 - 2018//

N2 - Learning Objective #1: Effect of gut-microbiota-brain axis dysregu-lation on neuropsychiatric disorders Learning Objective #2: Manage refractory ADEM in adults CASE: 62-year-old man with recent hospitalization for septic shock due to toe osteomyelitis,complicated by severe C. difficile infection requiring fecal transplant 3 weeks prior to admission,presenting with worsening confusion,right-sided weakness,and ataxia.Symptoms were first noted 2 weeks after the fecal transplant and consisted of depressed mood and right shoulder weakness.Neurological exam was notable for neglect of right visual field,sensory neglect of the right side,2/5 motor strength in right upper and lower extremities.Magnetic resonance imaging of the brain showed multiple ring-enhancing lesions throughout the white matter of both cerebral hemispheres,basal ganglia,and bilateral cerebral peduncles,with no edema or mass-effect.Cerebrospinal fluid analysis was unrevealing,with no oligoclonal bands or malignant cells.An echocardiogram didn't reveal vegetations.An extensive infectious workup including serum and CSF testing for toxoplasmosis,HIV,tuberculosis,cryptococcus were negative.CT scan of the chest and abdomen revealed no infection or malignancy.Brain biopsy was consistent with active demyelination.He received IV steroids followed by an oral taper.His mental status and weakness improved slightly, however, subsequent MRI showed multiple new small enhancing white matter lesions,requiring 2 further admission for plasmapheresis and Rituxan.A repeat MRI 2 months later showed decrease in size of most of the lesions with no evidence of new or enhancing lesions and improvement of cognition. IMPACT: There is limited data about acute demyelinating encephalomyelitis (ADEM) in adults and increasing evidence that the gut microbiota can influence the immune and nervous system.We present the case of a middle aged adult with refractory ADEM triggered by severe C difficile infection who improved after combination of immunotherapies,including steroids,plasmapheresis,and Rituxan DISCUSSION: ADEM is a monophasic inflammatory demyelinating disorder,more common in pediatrics.Due to its rarity in adults,there is limited understanding of its triggers,clinical course,or management.Mounting evi-dence indicates that gut microbiota can influence the immune and nervous system via a bidirectional relationship termed the microbiota-gut-brain axis.This influences the pathogenesis of a number of disorders in which inflammation is implicated,such as mood and demyelinating disorders.In addition,acute stress increases GI and BBB permeability through activation of mast cells,that further induce a strong auto-inflammatory response,leading to inflammation and neuronal damage.In this case,we postulate that severe C. difficile infection was the initial trigger.Furthermore,in our case,patient's symptoms were refractory to steroids and plasmapheresis,which have been previously used for treatment,subsequently requiring 2 doses of Rituxan before clinical and radiological improvement were noted.

KW - abdomen

KW - \*acute disseminated encephalomyelitis

KW - acute stress

KW - adult

KW - ataxia

KW - basal ganglion

KW - brain biopsy

KW - cancer cell

KW - cancer resistance

KW - case report

KW - cerebral peduncle

KW - cerebrospinal fluid analysis

KW - clinical article

KW - Clostridium difficile infection

KW - demyelinating disease

KW - depression

KW - disease course

KW - drug combination

KW - drug therapy

KW - echocardiography

KW - edema

KW - fecal microbiota transplantation

KW - Filobasidiella

KW - \*head

KW - hemisphere

KW - hospitalization

KW - human

KW - human cell

KW - Human immunodeficiency virus

KW - human tissue

KW - immunotherapy

KW - intestine flora

KW - learning

KW - lower limb

KW - male

KW - mast cell

KW - mental health

KW - middle aged

KW - mood

KW - neglect

KW - nerve injury

KW - nonhuman

KW - nuclear magnetic resonance imaging

KW - osteomyelitis

KW - pediatrics

KW - plasmapheresis

KW - septic shock

KW - shoulder

KW - thorax

KW - toxoplasmosis

KW - tuberculosis

KW - vegetation

KW - visual field

KW - weakness

KW - white matter lesion

KW - x-ray computed tomography

KW - oligoclonal band

KW - rituximab

KW - steroid

KW - conference abstract

JF - Journal of General Internal Medicine

JA - J. Gen. Intern. Med.

LA - English

VL - 33

IS - 2 Supplement 1

SP - 449

CY - Netherlands

PB - Springer New York LLC

SN - 1525-1497

AD - S.K. Matta, UMass, Worcester, MA, United States

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M1 - (Shidfar) Umassmemorial, Worcester, MA, United States

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed19&NEWS=N&AN=622329321

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed19&AN=622329321Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Matta&issn=1525-1497&title=Journal+of+General+Internal+Medicine&atitle=Acute+demyelinating+encephalomyelitis%3A+Maybe+it%27s+not+all+in+your+head&volume=33&issue=2+Supplement+1&spage=449&epage=&date=2018&doi=&pmid=&sid=OVID:embase

257.

TY - JOUR

DB - Embase

AN - 615488560

ID - 28394706 [https://www.ncbi.nlm.nih.gov/pubmed/?term=28394706]

T1 - Fecal microbiota transplantation-early steps on a long journey ahead

A1 - Khoruts A.

AO - Khoruts, Alexander; ORCID: https://orcid.org/0000-0002-3205-3188

Y1 - 2017//

KW - absence of complications

KW - adult

KW - aged

KW - antimicrobial therapy

KW - bacterial microbiome

KW - \*Clostridium difficile infection/dt [Drug Therapy]

KW - cohort analysis

KW - colonoscopy

KW - editorial

KW - \*fecal microbiota transplantation

KW - feces analysis

KW - female

KW - follow up

KW - human

KW - hypotension

KW - ileus

KW - major clinical study

KW - male

KW - mental health

KW - middle aged

KW - mortality rate

KW - nonhuman

KW - overall survival

KW - polymerase chain reaction

KW - sepsis

KW - survival rate

KW - urinary tract infection

KW - very elderly

KW - fidaxomicin/dt [Drug Therapy]

KW - metronidazole/dt [Drug Therapy]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/po [Oral Drug Administration]

XT - Clostridium difficile infection / drug therapy / fidaxomicin

XT - Clostridium difficile infection / drug therapy / metronidazole

XT - Clostridium difficile infection / drug therapy / vancomycin

XT - fidaxomicin / drug therapy / Clostridium difficile infection

XT - metronidazole / drug therapy / Clostridium difficile infection

XT - vancomycin / drug therapy / Clostridium difficile infection

JF - Gut Microbes

JA - Gut Microbes

LA - English

VL - 8

IS - 3

SP - 199

EP - 204

CY - United States

PB - Taylor and Francis Inc. (325 Chestnut St, Suite 800, Philadelphia PA 19106, United States)

SN - 1949-0976

SN - 1949-0984

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UR - http://www.tandfonline.com/toc/kgmi20/current

DO - https://dx.doi.org/10.1080/19490976.2017.1316447

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=615488560

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1080%2f19490976.2017.1316447Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Khoruts&issn=1949-0976&title=Gut+Microbes&atitle=Fecal+microbiota+transplantation-early+steps+on+a+long+journey+ahead&volume=8&issue=3&spage=199&epage=204&date=2017&doi=10.1080%2F19490976.2017.1316447&pmid=28394706&sid=OVID:embase

258.

TY - JOUR

DB - Embase

AN - 618215328

ID - 29055387 [https://www.ncbi.nlm.nih.gov/pubmed/?term=29055387]

T1 - The colon revisited or the key to wellness, health and disease

A1 - Gonzalez-Correa C.A.

A1 - Mulett-Vasquez E.

A1 - Miranda D.A.

A1 - Gonzalez-Correa C.H.

A1 - Gomez-Buitrago P.A.

Y1 - 2017//

N2 - The hypothesis being advanced in this paper is that there is a new medical paradigm emerging from the biomedical research carried out in this century, mainly due to the explosion of the so called "omics" and associated techniques. The main idea is that there is a common pathway from wellbeing and health to chronic disease ("chronopathy") and even to death, which comprises following steps: 1) unhealthy diet, sedentary life style and permanent exposition to xenobiotics and all kinds of noxious stimuli; -> 2) intestinal dysbiosis; -> 3) alteration of the intestinal mucus layer (especially that of the colon); -> 4) disruption of the endothelial tight junctions; -> 5) metabolic endotoxemia + bacterial translocation; -> 6) inflammation; -> 7) exacerbation of the enteric nervous system (ENS) and consequent maladaptation and malfunctioning of the colon; -> 8) epigenetic manifestations; -> 9) "chronopathy" and premature death. Therefore, in order to maintain a good health or to improve or even reverse chronic diseases in a person, the main outcome to look for is a homeostatic balance of the intestinal microbiota (eubiosis), most of which is located in the colon. Lynn Margulis was one of the main scientists to highlight the importance of the role played by bacteria not only in the origin of all biological species now present on earth, but also on their role in global homeostasis. Bacteria do not rely on other living beings for their existence, while the latter depend completely on the former. Humans are no exemption, and new evidence emerges each day about the pivotal role of intestinal microbiota in human health, disease and, in general, in its wellbeing. The following facts about intestinal microbiota are nowadays generally accepted: there are about 10 times more bacteria in the gut than human cells in every human being; the microbioma is about 100-150 times bigger that the human genome, and there is a clear link between intestinal microbiota and many of the most common chronic diseases, from obesity and diabetes to depression and Parkinson disease and different kinds of cancer. The main implication of this theory is that we should become a sort of microbiota farmers, that is, we ought to be more conscious of our intestinal microbiota, take care of it and monitor it permanently. Thus, as part of our good life habits (healthy eating, physical exercise), we should probably undergo periodic seasons of fasting and colon cleansing, as it was common in older times.Copyright © 2017 Elsevier Ltd

KW - adaptive immunity

KW - article

KW - body mass

KW - \*colon disease

KW - colon lavage

KW - cytoskeleton

KW - depression

KW - diabetes mellitus

KW - dysbiosis

KW - endotoxemia/di [Diagnosis]

KW - enteroendocrine cell

KW - epigenetics

KW - exercise

KW - feeding behavior

KW - genetic predisposition

KW - \*health status

KW - heart muscle contractility

KW - homeostasis

KW - human

KW - innate immunity

KW - intestine flora

KW - intestine innervation

KW - intestine mucosa permeability

KW - lifestyle

KW - mucous cell

KW - nerve cell plasticity

KW - nonhuman

KW - obesity

KW - Parkinson disease

KW - physical activity

KW - risk factor

KW - septic shock

KW - taxonomy

KW - waist hip ratio

KW - \*wellbeing

JF - Medical Hypotheses

JA - Med. Hypotheses

LA - English

VL - 108

SP - 133

EP - 143

CY - United Kingdom

PB - Churchill Livingstone

SN - 0306-9877

SN - 1532-2777

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M1 - (Miranda) Universidad Industrial de Santander, Carrera 27 calle 9, Research Group on Biological and Semiconductor Material Science (CIMBIOS), Bucaramanga, Colombia

UR - http://intl.elsevierhealth.com/journals/mehy/

DO - https://dx.doi.org/10.1016/j.mehy.2017.07.032

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=618215328

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1016%2fj.mehy.2017.07.032Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Gonzalez-Correa&issn=0306-9877&title=Medical+Hypotheses&atitle=The+colon+revisited+or+the+key+to+wellness%2C+health+and+disease&volume=108&issue=&spage=133&epage=143&date=2017&doi=10.1016%2Fj.mehy.2017.07.032&pmid=29055387&sid=OVID:embase

259.

TY - JOUR

DB - Embase

AN - 616901818

ID - 28240840 [https://www.ncbi.nlm.nih.gov/pubmed/?term=28240840]

T1 - Liver transplant modulates gut microbial dysbiosis and cognitive function in cirrhosis

A1 - Bajaj J.S.

A1 - Fagan A.

A1 - Sikaroodi M.

A1 - White M.B.

A1 - Sterling R.K.

A1 - Gilles H.

A1 - Heuman D.

A1 - Stravitz R.T.

A1 - Matherly S.C.

A1 - Siddiqui M.S.

A1 - Puri P.

A1 - Sanyal A.J.

A1 - Luketic V.

A1 - John B.

A1 - Fuchs M.

A1 - Ahluwalia V.

A1 - Gillevet P.M.

AO - Ahluwalia, Vishwadeep; ORCID: https://orcid.org/0000-0003-3143-5835

Y1 - 2017//

N2 - Liver transplantation (LT) improves daily function and cognition in patients with cirrhosis, but a subset of patients can remain impaired. Unfavorable microbiota or dysbiosis is observed in patients with cirrhosis, but the effect of LT on microbial composition, especially with poor post-LT cognition, is unclear. The aims were to determine the effect of LT on gut microbiota and to determine whether gut microbiota are associated with cognitive dysfunction after LT. We enrolled outpatient patients with cirrhosis on the LT list and followed them until 6 months after LT. Cognition (Psychometric Hepatic Encephalopathy score [PHES]), health-related quality of life (HRQOL), and stool microbiota (multitagged sequencing for diversity and taxa) tests were performed at both visits. Persistent cognitive impairment was defined as a stable/worsening PHES. Both pre-/post-LT data were compared with age-matched healthy controls. We enrolled 45 patients (56 +/- 7 years, Model for End-Stage Liver Disease score 26 +/- 8). They received LT 6 +/- 3 months after enrollment and were re-evaluated 7 +/- 2 months after LT with a stable course. A significantly improved HRQOL, PHES, with increase in microbial diversity, increase in autochthonous, and decrease in potentially pathogenic taxa were seen after LT compared with baseline. However, there was continued dysbiosis and HRQOL/cognitive impairment after LT compared with controls in 29% who did not improve PHES after LT. In these, Proteobacteria relative abundance was significantly higher and Firmicutes were lower after LT, whereas the reverse occurred in the group that improved. Delta PHES was negatively correlated with delta Proteobacteria and positively with delta Firmicutes. In conclusion, LT improves gut microbiota diversity and dysbiosis compared with pre-LT baseline but residual dysbiosis remains compared with controls. There is cognitive and HRQOL enhancement in general after LT, but a higher Proteobacteria relative abundance change is associated with posttransplant cognitive impairment. Liver Transplantation 23 907-914 2017 AASLD.Copyright © 2017 by the American Association for the Study of Liver Diseases.

KW - adult

KW - alcohol liver disease/su [Surgery]

KW - antiviral therapy

KW - article

KW - Bifidobacteriaceae

KW - clinical article

KW - Clostridium difficile infection/co [Complication]

KW - cognition assessment

KW - \*cognitive defect/dm [Disease Management]

KW - controlled study

KW - Deltaproteobacteria

KW - digestive system disease assessment

KW - \*dysbiosis/dm [Disease Management]

KW - elective surgery

KW - Enterobacteriaceae

KW - feces microflora

KW - female

KW - Firmicutes

KW - follow up

KW - hepatic encephalopathy/su [Surgery]

KW - hepatitis C/su [Surgery]

KW - hernioplasty

KW - human

KW - immunosuppressive treatment

KW - inguinal hernia/su [Surgery]

KW - \*intestine flora

KW - Lachnospiraceae

KW - liver cell carcinoma/su [Surgery]

KW - \*liver cirrhosis/dm [Disease Management]

KW - liver graft rejection/dt [Drug Therapy]

KW - \*liver transplantation

KW - male

KW - microbial diversity

KW - middle aged

KW - Model For End Stage Liver Disease Score

KW - nonalcoholic fatty liver/su [Surgery]

KW - nonhuman

KW - outpatient

KW - perioperative period

KW - population abundance

KW - postoperative delirium/co [Complication]

KW - postoperative infection/co [Complication]

KW - priority journal

KW - Proteobacteria

KW - quality of life

KW - RNA sequence

KW - Ruminococcaceae

KW - scoring system

KW - sepsis/co [Complication]

KW - Sickness Impact Profile

KW - surgical infection/co [Complication]

KW - taxonomy

KW - bacterial RNA/ec [Endogenous Compound]

KW - mycophenolate mofetil/dt [Drug Therapy]

KW - RNA 16S/ec [Endogenous Compound]

KW - tacrolimus/dt [Drug Therapy]

KW - psychometric hepatic encephalopathy score

XT - liver graft rejection / drug therapy / mycophenolate mofetil

XT - liver graft rejection / drug therapy / tacrolimus

XT - mycophenolate mofetil / drug therapy / liver graft rejection

XT - tacrolimus / drug therapy / liver graft rejection

JF - Liver Transplantation

JA - Liver Transplant.

LA - English

VL - 23

IS - 7

SP - 907

EP - 914

CY - United Kingdom

PB - John Wiley and Sons Ltd (Southern Gate, Chichester, West Sussex PO19 8SQ, United Kingdom. E-mail: vgorayska@wiley.com)

SN - 1527-6465

SN - 1527-6473

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UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1527-6473

DO - https://dx.doi.org/10.1002/lt.24754

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=616901818

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1002%2flt.24754Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Bajaj&issn=1527-6465&title=Liver+Transplantation&atitle=Liver+transplant+modulates+gut+microbial+dysbiosis+and+cognitive+function+in+cirrhosis&volume=23&issue=7&spage=907&epage=914&date=2017&doi=10.1002%2Flt.24754&pmid=28240840&sid=OVID:embase

260.

TY - JOUR

DB - Embase

AN - 616853257

ID - 28609252 [https://www.ncbi.nlm.nih.gov/pubmed/?term=28609252]

T1 - Fecal microbiota transplantation in metabolic syndrome: History, present and future

A1 - de Groot P.F.

A1 - Frissen M.N.

A1 - de Clercq N.C.

A1 - Nieuwdorp M.

AO - Frissen M.N.; ORCID: https://orcid.org/0000-0002-5039-0946

Y1 - 2017//

N2 - The history of fecal microbiota transplantation (FMT) dates back even to ancient China. Recently, scientific studies have been looking into FMT as a promising treatment of various diseases, while in the process teaching us about the interaction between the human host and its resident microbial communities. Current research focuses mainly on Clostridium difficile infections, however interest is rising in other areas such as inflammatory bowel disease (IBD) and the metabolic syndrome. With regard to the latter, the intestinal microbiota might be causally related to the progression of insulin resistance and diabetes. FMT in metabolic syndrome has proven to be an intriguing method to study the role of the gut microbiota and open the way to new therapies by dissecting in whom insulin resistance is driven by microbiota. In this article we review the history of FMT, the present evidence on its role in the pathophysiology of metabolic syndrome and its efficacy, limitations and future prospects.Copyright © 2017 The Author(s). Published with license by Taylor & Francis © 2017, © P. F. de Groot, M. N. Frissen, N. C. de Clercq, and M. Nieuwdorp.

KW - acidosis/co [Complication]

KW - adult

KW - aged

KW - artificial ventilation

KW - clinical article

KW - \*Clostridium difficile infection/co [Complication]

KW - colon resection

KW - comparative study

KW - \*disease severity

KW - \*fecal microbiota transplantation

KW - \*feces microflora

KW - female

KW - fever/co [Complication]

KW - human

KW - hypotension/co [Complication]

KW - hypovolemic shock/co [Complication]

KW - ileus/co [Complication]

KW - length of stay

KW - leukocyte count

KW - male

KW - mental disease/co [Complication]

KW - middle aged

KW - outcome assessment

KW - overall survival

KW - review

KW - risk factor

KW - septic shock/co [Complication]

KW - toxic megacolon/co [Complication]

KW - very elderly

KW - albumin/ec [Endogenous Compound]

KW - fidaxomicin

KW - metronidazole

KW - vancomycin

JF - Gut Microbes

JA - Gut Microbes

LA - English

VL - 8

IS - 3

SP - 253

EP - 267

CY - United States

PB - Taylor and Francis Inc. (325 Chestnut St, Suite 800, Philadelphia PA 19106, United States)

SN - 1949-0976

SN - 1949-0984

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UR - http://www.tandfonline.com/toc/kgmi20/current

DO - https://dx.doi.org/10.1080/19490976.2017.1293224

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=616853257

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1080%2f19490976.2017.1293224Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=de+Groot&issn=1949-0976&title=Gut+Microbes&atitle=Fecal+microbiota+transplantation+in+metabolic+syndrome%3A+History%2C+present+and+future&volume=8&issue=3&spage=253&epage=267&date=2017&doi=10.1080%2F19490976.2017.1293224&pmid=28609252&sid=OVID:embase

261.

TY - JOUR

DB - Embase

AN - 618976271

ID - 29079155 [https://www.ncbi.nlm.nih.gov/pubmed/?term=29079155]

T1 - Urinary Tract Infection and Asymptomatic Bacteriuria in Older Adults

A1 - Cortes-Penfield N.W.

A1 - Trautner B.W.

A1 - Jump R.L.P.

Y1 - 2017//

N2 - Urinary tract infections (UTIs) are a significant cause of morbidity among older adults. However, antibiotic prescriptions for clinically suspected UTIs are often inappropriate. Health care providers frequently struggle to differentiate UTI from asymptomatic bacteriuria, particularly in patients presenting with nonspecific symptoms. Patients with baseline cognitive impairments that limit history-taking can be particularly challenging. This article reviews the epidemiology and pathogenesis of UTI in older adults. It discusses an approach to diagnosis and treatment focused on recognizing patients who would likely benefit from antibiotic treatment and on identifying patients for whom empiric antibiotic therapy should not be given.Copyright © 2017

KW - \*aging

KW - \*asymptomatic bacteriuria/di [Diagnosis]

KW - \*asymptomatic bacteriuria/dr [Drug Resistance]

KW - \*asymptomatic bacteriuria/dt [Drug Therapy]

KW - \*asymptomatic bacteriuria/ep [Epidemiology]

KW - \*asymptomatic bacteriuria/et [Etiology]

KW - \*asymptomatic bacteriuria/th [Therapy]

KW - asymptomatic bacteriuria/dt [Drug Therapy]

KW - bacterium adherence

KW - Candida

KW - catheter infection/ep [Epidemiology]

KW - catheter infection/pc [Prevention]

KW - Clostridium difficile infection/si [Side Effect]

KW - creatinine clearance

KW - delirium/si [Side Effect]

KW - diet supplementation

KW - differential diagnosis

KW - disease predisposition

KW - disease severity

KW - drug blood level

KW - drug choice

KW - drug exposure

KW - drug monitoring

KW - drug penetration

KW - drug response

KW - drug sensitivity

KW - drug tissue level

KW - drug tolerability

KW - drug urine level

KW - dysuria

KW - elderly care

KW - Enterobacteriaceae

KW - Enterococcus

KW - Escherichia coli

KW - fever

KW - human

KW - incidence

KW - infection prevention

KW - infection risk

KW - Klebsiella oxytoca

KW - long term care

KW - microbiome

KW - microflora

KW - multidrug resistance

KW - nephrotoxicity/si [Side Effect]

KW - nonhuman

KW - oral rehydration therapy

KW - ototoxicity/si [Side Effect]

KW - pathophysiology

KW - patient monitoring

KW - prevalence

KW - Proteus mirabilis

KW - Pseudomonas aeruginosa

KW - pyuria/di [Diagnosis]

KW - QT prolongation/si [Side Effect]

KW - quality control

KW - recurrent disease/et [Etiology]

KW - review

KW - risk factor

KW - seizure/si [Side Effect]

KW - single drug dose

KW - tendinitis/si [Side Effect]

KW - tendon rupture/si [Side Effect]

KW - treatment duration

KW - urinalysis

KW - \*urinary tract infection/di [Diagnosis]

KW - \*urinary tract infection/dr [Drug Resistance]

KW - \*urinary tract infection/dt [Drug Therapy]

KW - \*urinary tract infection/ep [Epidemiology]

KW - \*urinary tract infection/et [Etiology]

KW - \*urinary tract infection/pc [Prevention]

KW - \*urinary tract infection/th [Therapy]

KW - urinary tract infection/dt [Drug Therapy]

KW - urine culture

KW - urine sampling

KW - vestibular disorder/si [Side Effect]

KW - aminoglycoside antibiotic agent/ae [Adverse Drug Reaction]

KW - aminoglycoside antibiotic agent/cr [Drug Concentration]

KW - aminoglycoside antibiotic agent/dt [Drug Therapy]

KW - beta lactam antibiotic/cb [Drug Combination]

KW - beta lactam antibiotic/dt [Drug Therapy]

KW - beta lactamase inhibitor/cb [Drug Combination]

KW - beta lactamase inhibitor/dt [Drug Therapy]

KW - canagliflozin

KW - carbapenem/dt [Drug Therapy]

KW - ceftriaxone/cm [Drug Comparison]

KW - ceftriaxone/dt [Drug Therapy]

KW - cephalosporin derivative/dt [Drug Therapy]

KW - ciprofloxacin/cm [Drug Comparison]

KW - ciprofloxacin/dt [Drug Therapy]

KW - colistin/dt [Drug Therapy]

KW - cotrimoxazole/cm [Drug Comparison]

KW - cotrimoxazole/dt [Drug Therapy]

KW - cranberry extract/ct [Clinical Trial]

KW - cranberry extract/dt [Drug Therapy]

KW - creatinine/ec [Endogenous Compound]

KW - dapagliflozin

KW - fosfomycin/cm [Drug Comparison]

KW - fosfomycin/cr [Drug Concentration]

KW - fosfomycin/dt [Drug Therapy]

KW - fosfomycin/po [Oral Drug Administration]

KW - fosfomycin/pd [Pharmacology]

KW - nitrofurantoin/cm [Drug Comparison]

KW - nitrofurantoin/cr [Drug Concentration]

KW - nitrofurantoin/dt [Drug Therapy]

KW - nitrofurantoin/pd [Pharmacology]

KW - piperacillin plus tazobactam/dt [Drug Therapy]

KW - pivmecillinam/cm [Drug Comparison]

KW - pivmecillinam/dt [Drug Therapy]

KW - proanthocyanidin derivative/ct [Clinical Trial]

KW - proanthocyanidin derivative/dt [Drug Therapy]

KW - quinoline derived antiinfective agent/ae [Adverse Drug Reaction]

KW - quinoline derived antiinfective agent/dt [Drug Therapy]

KW - quinoline derived antiinfective agent/po [Oral Drug Administration]

KW - tetracycline/cr [Drug Concentration]

KW - tetracycline/dt [Drug Therapy]

KW - tetracycline/po [Oral Drug Administration]

KW - catheter associated urinary tract infection/ep [Epidemiology]

KW - catheter associated urinary tract infection/pc [Prevention]

XT - asymptomatic bacteriuria / drug therapy / aminoglycoside antibiotic agent

XT - asymptomatic bacteriuria / drug therapy / beta lactam antibiotic

XT - asymptomatic bacteriuria / drug therapy / beta lactamase inhibitor

XT - asymptomatic bacteriuria / drug therapy / carbapenem

XT - asymptomatic bacteriuria / drug therapy / ceftriaxone

XT - asymptomatic bacteriuria / drug therapy / cephalosporin derivative

XT - asymptomatic bacteriuria / drug therapy / ciprofloxacin

XT - asymptomatic bacteriuria / drug therapy / colistin

XT - asymptomatic bacteriuria / drug therapy / cotrimoxazole

XT - asymptomatic bacteriuria / drug therapy / cranberry extract

XT - asymptomatic bacteriuria / drug therapy / fosfomycin

XT - asymptomatic bacteriuria / drug therapy / nitrofurantoin

XT - asymptomatic bacteriuria / drug therapy / piperacillin plus tazobactam

XT - asymptomatic bacteriuria / drug therapy / pivmecillinam

XT - asymptomatic bacteriuria / drug therapy / proanthocyanidin derivative

XT - asymptomatic bacteriuria / drug therapy / quinoline derived antiinfective agent

XT - asymptomatic bacteriuria / drug therapy / tetracycline

XT - Clostridium difficile infection / side effect / quinoline derived antiinfective agent

XT - delirium / side effect / quinoline derived antiinfective agent

XT - nephrotoxicity / side effect / aminoglycoside antibiotic agent

XT - ototoxicity / side effect / aminoglycoside antibiotic agent

XT - QT prolongation / side effect / quinoline derived antiinfective agent

XT - seizure / side effect / quinoline derived antiinfective agent

XT - tendinitis / side effect / quinoline derived antiinfective agent

XT - tendon rupture / side effect / quinoline derived antiinfective agent

XT - urinary tract infection / drug therapy / aminoglycoside antibiotic agent

XT - urinary tract infection / drug therapy / beta lactam antibiotic

XT - urinary tract infection / drug therapy / beta lactamase inhibitor

XT - urinary tract infection / drug therapy / carbapenem

XT - urinary tract infection / drug therapy / ceftriaxone

XT - urinary tract infection / drug therapy / cephalosporin derivative

XT - urinary tract infection / drug therapy / ciprofloxacin

XT - urinary tract infection / drug therapy / colistin

XT - urinary tract infection / drug therapy / cotrimoxazole

XT - urinary tract infection / drug therapy / cranberry extract

XT - urinary tract infection / drug therapy / fosfomycin

XT - urinary tract infection / drug therapy / nitrofurantoin

XT - urinary tract infection / drug therapy / piperacillin plus tazobactam

XT - urinary tract infection / drug therapy / pivmecillinam

XT - urinary tract infection / drug therapy / proanthocyanidin derivative

XT - urinary tract infection / drug therapy / quinoline derived antiinfective agent

XT - urinary tract infection / drug therapy / tetracycline

XT - vestibular disorder / side effect / aminoglycoside antibiotic agent

XT - aminoglycoside antibiotic agent / adverse drug reaction / nephrotoxicity

XT - aminoglycoside antibiotic agent / adverse drug reaction / ototoxicity

XT - aminoglycoside antibiotic agent / adverse drug reaction / vestibular disorder

XT - aminoglycoside antibiotic agent / drug therapy / asymptomatic bacteriuria

XT - aminoglycoside antibiotic agent / drug therapy / urinary tract infection

XT - beta lactam antibiotic / drug combination / beta lactamase inhibitor

XT - beta lactam antibiotic / drug therapy / asymptomatic bacteriuria

XT - beta lactam antibiotic / drug therapy / urinary tract infection

XT - beta lactamase inhibitor / drug combination / beta lactam antibiotic

XT - beta lactamase inhibitor / drug therapy / asymptomatic bacteriuria

XT - beta lactamase inhibitor / drug therapy / urinary tract infection

XT - carbapenem / drug therapy / asymptomatic bacteriuria

XT - carbapenem / drug therapy / urinary tract infection

XT - ceftriaxone / drug comparison / ciprofloxacin

XT - ceftriaxone / drug therapy / asymptomatic bacteriuria

XT - ceftriaxone / drug therapy / urinary tract infection

XT - cephalosporin derivative / drug therapy / asymptomatic bacteriuria

XT - cephalosporin derivative / drug therapy / urinary tract infection

XT - ciprofloxacin / drug comparison / ceftriaxone

XT - ciprofloxacin / drug therapy / asymptomatic bacteriuria

XT - ciprofloxacin / drug therapy / urinary tract infection

XT - colistin / drug therapy / asymptomatic bacteriuria

XT - colistin / drug therapy / urinary tract infection

XT - cotrimoxazole / drug comparison / fosfomycin

XT - cotrimoxazole / drug comparison / nitrofurantoin

XT - cotrimoxazole / drug comparison / pivmecillinam

XT - cotrimoxazole / drug therapy / asymptomatic bacteriuria

XT - cotrimoxazole / drug therapy / urinary tract infection

XT - cranberry extract / drug therapy / asymptomatic bacteriuria

XT - cranberry extract / drug therapy / urinary tract infection

XT - fosfomycin / drug comparison / cotrimoxazole

XT - fosfomycin / drug comparison / nitrofurantoin

XT - fosfomycin / drug therapy / asymptomatic bacteriuria

XT - fosfomycin / drug therapy / urinary tract infection

XT - nitrofurantoin / drug comparison / cotrimoxazole

XT - nitrofurantoin / drug comparison / fosfomycin

XT - nitrofurantoin / drug therapy / asymptomatic bacteriuria

XT - nitrofurantoin / drug therapy / urinary tract infection

XT - piperacillin plus tazobactam / drug therapy / asymptomatic bacteriuria

XT - piperacillin plus tazobactam / drug therapy / urinary tract infection

XT - pivmecillinam / drug comparison / cotrimoxazole

XT - pivmecillinam / drug therapy / asymptomatic bacteriuria

XT - pivmecillinam / drug therapy / urinary tract infection

XT - proanthocyanidin derivative / drug therapy / asymptomatic bacteriuria

XT - proanthocyanidin derivative / drug therapy / urinary tract infection

XT - quinoline derived antiinfective agent / adverse drug reaction / Clostridium difficile infection

XT - quinoline derived antiinfective agent / adverse drug reaction / delirium

XT - quinoline derived antiinfective agent / adverse drug reaction / QT prolongation

XT - quinoline derived antiinfective agent / adverse drug reaction / seizure

XT - quinoline derived antiinfective agent / adverse drug reaction / tendinitis

XT - quinoline derived antiinfective agent / adverse drug reaction / tendon rupture

XT - quinoline derived antiinfective agent / drug therapy / asymptomatic bacteriuria

XT - quinoline derived antiinfective agent / drug therapy / urinary tract infection

XT - tetracycline / drug therapy / asymptomatic bacteriuria

XT - tetracycline / drug therapy / urinary tract infection

JF - Infectious Disease Clinics of North America

JA - Infect. Dis. Clin. North Am.

LA - English

VL - 31

IS - 4

SP - 673

EP - 688

CY - United States

PB - W.B. Saunders

SN - 0891-5520

SN - 1557-9824

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UR - http://www.elsevier.com/inca/publications/store/6/2/3/3/0/2/index.htt

DO - https://dx.doi.org/10.1016/j.idc.2017.07.002

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=618976271

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1016%2fj.idc.2017.07.002Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cortes-Penfield&issn=0891-5520&title=Infectious+Disease+Clinics+of+North+America&atitle=Urinary+Tract+Infection+and+Asymptomatic+Bacteriuria+in+Older+Adults&volume=31&issue=4&spage=673&epage=688&date=2017&doi=10.1016%2Fj.idc.2017.07.002&pmid=29079155&sid=OVID:embase

262.

TY - JOUR

DB - Embase

AN - 615749633

T1 - Current challenges in the treatment of severe Clostridium difficile infection: Early treatment potential of fecal microbiota transplantation

A1 - Van Beurden Y.H.

A1 - Nieuwdorp M.

A1 - Van De Berg P.J.E.J.

A1 - Mulder C.J.J.

A1 - Goorhuis A.

Y1 - 2017//

N2 - Fecal microbiota transplantation (FMT) is a very effective treatment for recurrent Clostridium difficile infection (CDI). Less is known about the application of FMT as a curative treatment of severe or complicated CDI. In this review, we present and discuss evidence supporting the curative use of FMT in severe or complicated CDI. We performed a literature search in PubMed and Embase for studies on the curative use of FMT in severe or complicated CDI. In addition, we describe a patient with severe CDI not responding to initial antibiotic treatment, who was successfully treated with curative FMT. We found 23 reports (12 case reports; 11 case series) about FMT as treatment for severe or complicated CDI. The patients described all had severe or complicated CDI, did not respond to conventional CDI antibiotic treatment and received FMT as last resort treatment. Patients were treated with (sequential) FMT, whether or not followed by additional antibiotic treatment for CDI. FMT, with or without additional antibiotic CDI treatment, appears to be a promising curative treatment option in patients with severe and complicated CDI, or only complicated CDI, who do not respond sufficiently to conventional antibiotic treatment. Treatment with FMT should be considered in these patients before proceeding to emergency bowel surgery.Copyright © The Author(s), 2017.

KW - abdominal distension

KW - abdominal tenderness

KW - aged

KW - antibiotic therapy

KW - bloody diarrhea

KW - case report

KW - \*Clostridium difficile infection/di [Diagnosis]

KW - colon resection

KW - delirium

KW - drug substitution

KW - drug withdrawal

KW - \*fecal microbiota transplantation

KW - human

KW - intestine flora

KW - laryngitis/dt [Drug Therapy]

KW - leukocyte count

KW - male

KW - polymerase chain reaction

KW - priority journal

KW - review

KW - septic shock

KW - x-ray computed tomography

KW - albumin/ec [Endogenous Compound]

KW - amoxicillin plus clavulanic acid/dt [Drug Therapy]

KW - antibiotic agent

KW - C reactive protein/ec [Endogenous Compound]

KW - creatinine/ec [Endogenous Compound]

KW - fidaxomicin/po [Oral Drug Administration]

KW - metronidazole/cb [Drug Combination]

KW - metronidazole/iv [Intravenous Drug Administration]

KW - vancomycin/cb [Drug Combination]

KW - vancomycin/po [Oral Drug Administration]

XT - laryngitis / drug therapy / amoxicillin plus clavulanic acid

XT - amoxicillin plus clavulanic acid / drug therapy / laryngitis

XT - metronidazole / drug combination / vancomycin

XT - vancomycin / drug combination / metronidazole

JF - Therapeutic Advances in Gastroenterology

JA - Ther. Adv. Gastroenterol.

LA - English

VL - 10

IS - 4

SP - 373

EP - 381

CY - United Kingdom

PB - SAGE Publications Ltd (E-mail: info@sagepub.co.uk)

SN - 1756-283X

SN - 1756-2848

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UR - http://tag.sagepub.com/

DO - https://dx.doi.org/10.1177/1756283X17690480

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=615749633

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1177%2f1756283X17690480Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Van+Beurden&issn=1756-283X&title=Therapeutic+Advances+in+Gastroenterology&atitle=Current+challenges+in+the+treatment+of+severe+Clostridium+difficile+infection%3A+Early+treatment+potential+of+fecal+microbiota+transplantation&volume=10&issue=4&spage=373&epage=381&date=2017&doi=10.1177%2F1756283X17690480&pmid=&sid=OVID:embase

263.

TY - JOUR

DB - Embase

AN - 614918524

ID - 28315032 [https://www.ncbi.nlm.nih.gov/pubmed/?term=28315032]

T1 - Novel Indications for Fecal Microbial Transplantation: Update and Review of the Literature

A1 - Cohen N.A.

A1 - Maharshak N.

Y1 - 2017//

N2 - Background and Aims: Fecal microbial transplantation (FMT) is an established successful treatment modality for recurrent Clostridium difficile infection (CDI). The safety profile and potential therapeutic advantages of FMT for diseases associated with dysbiosis and immune dysfunction have led to many publications, mainly case series, and while many studies and reviews have been published on the use of FMT for inflammatory bowel disease (IBD), its potential use for other disease conditions has not been thoroughly reviewed. The aim of this review was to investigate the evidence surrounding the use of FMT in conditions other than IBD and CDI. Method(s): A PubMed search was performed using the terms "Fecal microbiota transplantation" OR "FMT" OR "Bacteriotherapy." Results: A total of 26 articles describing the use of FMT in a variety of both intra-and extraintestinal disease conditions including gastrointestinal, hematologic, neurologic, metabolic, infectious, and autoimmune disorders have been included in this review and have demonstrated some positive results. The studies included were case reports, case series, controlled trials, and cohort studies. Conclusion(s): The findings of these studies demonstrate that FMT, particularly in conditions associated with gastrointestinal dysbiosis, shows promise to provide another effective tool in the therapeutic armament of the practicing physician. FMT was found to be possibly effective in various diseases, mostly associated with enteric dysbiosis or with immune dysfunction. Randomized clinical studies on large populations should be performed to explore the effectiveness of this therapy, and basic research studies should be designed to gain understanding of the mechanisms through which impact these disorders.Copyright © 2017, Springer Science+Business Media New York.

KW - acute graft versus host disease

KW - autoimmune disease

KW - chronic hepatitis B

KW - Clostridium difficile infection

KW - \*fecal microbiota transplantation

KW - gastrointestinal disease

KW - hematologic disease

KW - hepatic encephalopathy

KW - human

KW - ileitis

KW - infection

KW - inflammatory bowel disease

KW - irritable colon

KW - mental disease

KW - metabolic disorder

KW - metabolic syndrome X

KW - neurologic disease

KW - pathogen clearance

KW - priority journal

KW - review

KW - sepsis

KW - thrombocytopenia

JF - Digestive Diseases and Sciences

JA - Dig. Dis. Sci.

LA - English

VL - 62

IS - 5

SP - 1131

EP - 1145

CY - United States

PB - Springer New York LLC (E-mail: barbara.b.bertram@gsk.com)

SN - 0163-2116

SN - 1573-2568

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UR - https://www.wkap.nl/journalhome.htm/0163-2116

DO - https://dx.doi.org/10.1007/s10620-017-4535-9

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=614918524

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1007%2fs10620-017-4535-9Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cohen&issn=0163-2116&title=Digestive+Diseases+and+Sciences&atitle=Novel+Indications+for+Fecal+Microbial+Transplantation%3A+Update+and+Review+of+the+Literature&volume=62&issue=5&spage=1131&epage=1145&date=2017&doi=10.1007%2Fs10620-017-4535-9&pmid=28315032&sid=OVID:embase

264.

TY - JOUR

DB - Embase

AN - 619518652

T1 - Exploring the association between Alzheimer's disease, oral health, microbial endocrinology and nutrition

A1 - Harding A.

A1 - Gonder U.

A1 - Robinson S.J.

A1 - Crean S.

A1 - Singhrao S.K.

Y1 - 2017//

N2 - Longitudinal monitoring of patients suggests a causal link between chronic periodontitis and the development of Alzheimer's disease (AD). However, the explanation of how periodontitis can lead to dementia remains unclear. A working hypothesis links extrinsic inflammation as a secondary cause of AD. This hypothesis suggests a compromised oral hygiene leads to a dysbiotic oral microbiome whereby Porphyromonas gingivalis, a keystone periodontal pathogen, with its companion species, orchestrates immune subversion in the host. Brushing and chewing on teeth supported by already injured soft tissues leads to bacteremias. As a result, a persistent systemic inflammatory response develops to periodontal pathogens. The pathogens, and the host's inflammatory response, subsequently lead to the initiation and progression of multiple metabolic and inflammatory co-morbidities, including AD. Insufficient levels of essential micronutrients can lead to microbial dysbiosis through the growth of periodontal pathogens such as demonstrated for P. gingivalis under low hemin bioavailability. An individual's diet also defines the consortium of microbial communities that take up residency in the oral and gastrointestinal (GI) tract microbiomes. Their imbalance can lead to behavioral changes. For example, probiotics enriched in Lactobacillus genus of bacteria, when ingested, exert some anti-inflammatory influence through common host/bacterial neurochemicals, both locally, and through sensory signaling back to the brain. Early life dietary behaviors may cause an imbalance in the host/microbial endocrinology through a dietary intake incompatible with a healthy GI tract microbiome later in life. This imbalance in host/microbial endocrinology may have a lasting impact on mental health. This observation opens up an opportunity to explore the mechanisms, which may underlie the previously detected relationship between diet, oral/GI microbial communities, to anxiety, cognition and sleep patterns. This review suggests healthy diet based interventions that together with improved life style/behavioral changes may reduce and/or delay the incidence of AD.Copyright © 2017 Harding, Gonder, Robinson, Crean and Singhrao.

KW - aging

KW - \*Alzheimer disease

KW - bacteremia

KW - behavior change

KW - comorbidity

KW - diet

KW - disease course

KW - drinking behavior

KW - dysbiosis

KW - educational status

KW - \*endocrinology

KW - exercise

KW - genetic predisposition

KW - glucose blood level

KW - glucose utilization

KW - \*health

KW - human

KW - incidence

KW - infection

KW - infectious agent

KW - inflammation

KW - insulin resistance

KW - intestine flora

KW - Lactobacillus

KW - lifestyle

KW - mental health

KW - microbial community

KW - microbial consortium

KW - microbial growth

KW - \*microbiome

KW - mouth flora

KW - neurochemistry

KW - nonhuman

KW - \*nutrition

KW - periodontal disease

KW - periodontitis

KW - Porphyromonas gingivalis

KW - review

KW - risk factor

KW - sleep disorder

KW - smoking

KW - social status

KW - supplementation

KW - Western diet

KW - ketone body

KW - probiotic agent

KW - trace element

KW - vitamin

KW - vitamin B group

JF - Frontiers in Aging Neuroscience

JA - Front. Aging Neurosci.

LA - English

VL - 9

IS - DEC

SP - 398

CY - Switzerland

PB - Frontiers Media S.A. (E-mail: info@frontiersin.org)

SN - 1663-4365 (electronic)

SN - 1663-4365

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UR - https://www.frontiersin.org/articles/10.3389/fnagi.2017.00398/full

DO - https://dx.doi.org/10.3389/fnagi.2017.00398

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=619518652

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.3389%2ffnagi.2017.00398Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Harding&issn=1663-4365&title=Frontiers+in+Aging+Neuroscience&atitle=Exploring+the+association+between+Alzheimer%27s+disease%2C+oral+health%2C+microbial+endocrinology+and+nutrition&volume=9&issue=DEC&spage=398&epage=&date=2017&doi=10.3389%2Ffnagi.2017.00398&pmid=&sid=OVID:embase

265.

TY - JOUR

DB - Embase

AN - 618848656

T1 - 1H NMR-Based Metabonomic Study of Functional Dyspepsia in Stressed Rats Treated with Chinese Medicine Weikangning

A1 - Guo Y.

A1 - Li Z.

A1 - Liu X.

A1 - Su X.

A1 - Li Y.

A1 - Zhu J.

A1 - Song Y.

A1 - Zhang P.

A1 - Chen J.D.Z.

A1 - Wei R.

A1 - Yang J.

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Y1 - 2017//

N2 - 1H NMR-based metabolic profiling combined with multivariate data analysis was used to explore the metabolic phenotype of functional dyspepsia (FD) in stressed rats and evaluate the intervention effects of the Chinese medicine Weikangning (WKN). After a 7-day period of model establishment, a 14-day drug administration schedule was conducted in a WKN-treated group of rats, with the model and normal control groups serving as negative controls. Based on 1H NMR spectra of urine and serum from rats, PCA, PLS-DA, and OPLS-DA were performed to identify changing metabolic profiles. According to the key metabolites determined by OPLS-DA, alterations in energy metabolism, stress-related metabolism, and gut microbiota were found in FD model rats after stress stimulation, and these alterations were restored to normal after WKN administration. This study may provide new insights into the relationship between FD and psychological stress and assist in research into the metabolic mechanisms involved in Chinese medicine.Copyright © 2017 Yu Guo et al.

KW - animal model

KW - animal tissue

KW - antioxidant activity

KW - article

KW - Chinese herb

KW - \*Chinese medicine

KW - Codonopsis pilosula

KW - comorbidity

KW - controlled study

KW - Coptis

KW - Corydalis

KW - Curcuma aromatica

KW - depression

KW - \*dyspepsia/dt [Drug Therapy]

KW - dyspepsia/dt [Drug Therapy]

KW - energy metabolism

KW - fruit

KW - ginger

KW - Glycyrrhiza uralensis

KW - high performance liquid chromatography

KW - histopathology

KW - intestine flora

KW - jujube

KW - Magnolia officinalis

KW - male

KW - mental stress

KW - metabolite

KW - \*metabolomics

KW - nonhuman

KW - phenotype

KW - Pinellia

KW - \*proton nuclear magnetic resonance

KW - radix bupleuri

KW - rat

KW - Rheum

KW - Scutellaria baicalensis

KW - serum

KW - stomach

KW - stomach intubation

KW - systems biology

KW - urine

KW - 3 hydroxybutyric acid/ec [Endogenous Compound]

KW - amino acid/ec [Endogenous Compound]

KW - baicalin/pr [Pharmaceutics]

KW - berberine/pr [Pharmaceutics]

KW - biological marker/ec [Endogenous Compound]

KW - carboxylic acid/ec [Endogenous Compound]

KW - \*Chinese drug/dt [Drug Therapy]

KW - \*Chinese drug/pr [Pharmaceutics]

KW - citric acid/ec [Endogenous Compound]

KW - formic acid/ec [Endogenous Compound]

KW - glucose/ec [Endogenous Compound]

KW - glutamic acid/ec [Endogenous Compound]

KW - glycerol/ec [Endogenous Compound]

KW - hange shashin to/pr [Pharmaceutics]

KW - herbaceous agent/dt [Drug Therapy]

KW - herbaceous agent/pr [Pharmaceutics]

KW - isoleucine/ec [Endogenous Compound]

KW - leucine/ec [Endogenous Compound]

KW - methanol/ec [Endogenous Compound]

KW - methionine/ec [Endogenous Compound]

KW - phenylalanine/ec [Endogenous Compound]

KW - proline/ec [Endogenous Compound]

KW - radix paeoniae alba/pr [Pharmaceutics]

KW - unclassified drug

KW - nuclear magnetic resonance spectrometer

KW - metabolic phenotype

KW - \*metabonomics

KW - 1 methylhistidine/ec [Endogenous Compound]

KW - \*weikangning/dt [Drug Therapy]

KW - \*weikangning/ig [Intragastric Drug Administration]

KW - \*weikangning/pr [Pharmaceutics]

KW - xiaoyaosan/pr [Pharmaceutics]

KW - VARIAN VNMRS 600 MHz

XT - dyspepsia / drug therapy / Chinese drug

XT - dyspepsia / drug therapy / herbaceous agent

XT - dyspepsia / drug therapy / weikangning

XT - Chinese drug / drug therapy / dyspepsia

XT - herbaceous agent / drug therapy / dyspepsia

XT - weikangning / drug therapy / dyspepsia

JF - Evidence-based Complementary and Alternative Medicine

JA - Evid.-Based Complement. Altern. Med.

LA - English

VL - 2017

SP - 4039425

CY - United States

PB - Hindawi Limited (410 Park Avenue, 15th Floor, 287 pmb, New York NY 10022, United States)

SN - 1741-427X

SN - 1741-4288

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M2 - VARIAN VNMRS 600 MHz: Varian [United States]

C1 - VARIAN VNMRS 600 MHz: Varian [United States]

C2 - Varian [United States]

UR - http://www.hindawi.com/journals/ecam/contents.html

DO - https://dx.doi.org/10.1155/2017/4039425

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=618848656

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1155%2f2017%2f4039425Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Guo&issn=1741-427X&title=Evidence-based+Complementary+and+Alternative+Medicine&atitle=1H+NMR-Based+Metabonomic+Study+of+Functional+Dyspepsia+in+Stressed+Rats+Treated+with+Chinese+Medicine+Weikangning&volume=2017&issue=&spage=4039425&epage=&date=2017&doi=10.1155%2F2017%2F4039425&pmid=&sid=OVID:embase

266.

TY - JOUR

DB - Embase

AN - 623188995

T1 - Late Breaking Abstracts: 11th EMAS Congress 2017

T3 - 11th Congress of the European Menopause and Andropause Society, EMAS 2017. Amsterdam Netherlands.

A1 - Anonymous.

Y1 - 2017//

N2 - The proceedings contain 14 papers. The topics discussed include: bespoke or one size fits all - vitamin D fortification, targeted supplementation in risk groups or individual measurement?; sarcopenia as a predictor of all-cause mortality among community-dwelling older people: a systematic review and meta-analysis; estrogen-gut microbiome axis: physiological and clinical implications; the role of estrogen in cutaneous ageing and repair; laser therapy for the genitourinary syndrome of menopause. a systematic review and meta-analysis; serum ferritin level is positively associated with insulin resistance and metabolic syndrome in postmenopausal women: a nationwide population-based study; adherence to the western, prudent and Mediterranean dietary patterns and breast cancer risk: MCC-Spain study; the reshaping care for older people programme and changes in unscheduled hospital care: analysis of routinely collected hospital data; poor quality of life in Australian men: cross-sectional associations with obesity, mobility, lifestyle and psychiatric symptoms; self-rated health and all-cause and cause-specific mortality of older adults: individual data metaanalysis of prospective cohort studies in the CHANCES consortium; access to anti-osteoporosis medication after hip fracture in Korean elderly patients; and recommendations of the Spanish menopause society on the consumption of omega-3 polyunsaturated fatty acids by postmenopausal women.

KW - aged

KW - aging

KW - all cause mortality

KW - Australian

KW - breast cancer

KW - cancer risk

KW - clinical trial (topic)

KW - cohort analysis

KW - diet

KW - female

KW - ferritin blood level

KW - gastrointestinal tract

KW - high risk population

KW - hip fracture

KW - hospital care

KW - human

KW - human tissue

KW - lifestyle

KW - low level laser therapy

KW - male

KW - mental disease

KW - meta analysis

KW - metabolic syndrome X

KW - microbiome

KW - multicenter study (topic)

KW - nonhuman

KW - obesity

KW - osteoporosis

KW - postmenopause

KW - prospective study

KW - protein expression

KW - quality of life

KW - sarcopenia

KW - Spain

KW - systematic review

KW - urogenital tract disease

KW - endogenous compound

KW - estrogen

KW - omega 3 fatty acid

KW - conference review

JF - Maturitas

JA - Maturitas

LA - English

VL - 103

SP -

CY - Netherlands

PB - Elsevier Ireland Ltd

SN - 1873-4111

PT - Conference Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=623188995

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&AN=623188995Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=&issn=1873-4111&title=Maturitas&atitle=Late+Breaking+Abstracts%3A+11th+EMAS+Congress+2017&volume=103&issue=&spage=&epage=&date=2017&doi=&pmid=&sid=OVID:embase

267.

TY - JOUR

DB - Embase

AN - 619891752

T1 - Gut dysbiosis can lead to visceral hypersensitivity and depression in germ-free rats

T3 - 25th United European Gastroenterology Week, UEG 2017. Barcelona Spain.

A1 - Zhang L.

A1 - Zhang J.

A1 - Zhu S.

A1 - Zhang W.

A1 - Duan L.

Y1 - 2017//

N2 - Introduction: Gut dysbiosis is implicated in both irritable bowel syndrome (IBS) and depression, which are often comorbid with each other, but the causal relationship is not verified. Our previous study found similar structure but different function of gut microbiota between IBS-D and depression patients. Aims & Methods: Aim: To verify whether shift of gut microbiota function can disturb brain-gut axis function by transplanting fecal microbiota obtained from IBS-D patients and depression patients to germ-free (GF) rats respectively. Method(s): Fecal samples from a health control, an IBS-D patient and a depression patient recruited in our previous study were transplanted to 7 weeks old GF rats by gavage (once/rat, n=5-6/group). Fourteen days after transplantation, fecal samples of rats were collected for 16S rRNA gene sequencing on Illumina Miseq and short-chain fatty acids (SCFAs) measurement on UPLC-MS/MS; open field test, sucrose preference test, forced swimming test (FST) and colorectal barostat were performed for anxiety, depression behavior and visceral sensitivity, respectively. Result(s): The abdominal withdrawal reflex (AWR) is higher in IBS-D recipient (GI) rats than in health control (GH) and depression (GD) recipient rats at colorectal distension of 20 mmHg, 40mmHg and 60 mmHg, and higher in GI and GD rats than in GH rats at 80 mmHg. The percentage of time in open field center area of GD rats was lower than that of GH and GI rats; the sucrose preference rate is lower in GD rats than in GH and GI rats; the immobile time of GD and GI rats in the FST was longer than that of GH rats. Principle component analysis revealed that the fecal microbiota structure of the three groups of rats was significantly different. Fecal formate level was higher in GI rats than in GH and GD rats; fecal acetate and propionate levels were higher in GH rats than in GI and GD rats; fecal valerate level was lower in GD rats than in GH and GI rats (see Table). Conclusion(s): Gut microbiota from IBS-D patients can lead to visceral hypersensitivity, from depression patients can lead to depression behavior in GF rats. Those suggest an important role of gut microbiota in the pathogenesis of IBS-D and depression; and provide clues for the influence of gut microbiota on brain-gut axis.

KW - adult

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - barostat

KW - brain

KW - controlled study

KW - enteric feeding

KW - feces microflora

KW - female

KW - forced swim test

KW - gene sequence

KW - genetically hypertensive rat

KW - \*germfree rat

KW - human

KW - \*hypersensitivity

KW - \*intestine flora

KW - irritable colon

KW - liquid chromatography-mass spectrometry

KW - male

KW - nonhuman

KW - open field test

KW - rat

KW - recipient

KW - sucrose preference test

KW - transplantation

KW - withdrawal reflex

KW - acetic acid

KW - endogenous compound

KW - formic acid

KW - propionic acid

KW - RNA 16S

KW - sucrose

KW - valeric acid

JF - United European Gastroenterology Journal

JA - United Eur. Gastroenterol. J.

LA - English

VL - 5

IS - 5 Supplement 1

SP - A29

CY - Netherlands

PB - SAGE Publications Ltd

SN - 2050-6414

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DO - https://dx.doi.org/10.1177/2050640617725668

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=619891752

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1177%2f2050640617725668Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Zhang&issn=2050-6414&title=United+European+Gastroenterology+Journal&atitle=Gut+dysbiosis+can+lead+to+visceral+hypersensitivity+and+depression+in+germ-free+rats&volume=5&issue=5+Supplement+1&spage=A29&epage=&date=2017&doi=10.1177%2F2050640617725668&pmid=&sid=OVID:embase

268.

TY - JOUR

DB - Embase

AN - 619069717

T1 - Microbiome in cystic fibrosis with and without diabetes

T3 - 31st Annual North American Cystic Fibrosis Conference. Indianapolis, IN United States.

A1 - Hao Y.

A1 - Varga J.

A1 - Kapuria K.

A1 - Wei J.

A1 - Goldberg J.

A1 - Stecenko A.

A1 - Brown S.

Y1 - 2017//

N2 - Background: The development of CF-related diabetes (CFRD) is associated with accelerated rates of decline in lung function, more frequent acute pulmonary exacerbations, and increased mortality compared to CF without diabetes. We hypothesize that CFRD accelerates lung function deterioration via modifying the lung microbiome composition. Method(s): After obtaining informed consent, expectorated sputum was collected in CF patients with or without diabetes. CFRD was diagnosed by a CF endocrinologist and CF without diabetes was defined by having normal glucose tolerance (NGT) on an oral glucose tolerance test performed within one year of sample collection. A total of 77 sputum samples from clinically stable patients (39 CFRD and 38 NGT) were collected. Patient information including age, sex, height, BMI, CFTR genotype, degree of glucose control (HbA1c), and lung function (percent predicted FEV1-ppFEV1) were obtained. Microbiome compositions were determined through Illumina sequencing the V4 region of 16S rDNA gene. A linear model simplification process was employed to determine the factors affecting ppFEV1. We visualized the association between microbiome structure and ppFEV1, HbA1c, CFRD, respectively (using principle components analysis of UniFrac distances); and non-parametric MANOVA was used to test their statistical significance. Result(s): The statistical model indicates that ppFEV1 was significantly lower in CFRD patients (F=10.0, p<0.01), with higher age (F=20.8, p<0.01), higher HbA1c (F=4.2, p<0.05) and higher P. aeruginosa carriage (F=8.7, p<0.01). The significance of the age and CFRD interaction (F=8.3, p<0.01) indicates that lung function of young CFRD patients is already decreased to a significantly lower level, while young NGT patients maintained a higher ppFEV1. We found a significant association between ppFEV1 and CF lung microbiome variation (F=11.9, p<0.001); but no association between microbiome composition and HbA1c (F=1.24, p=0.27) or CFRD status (F=0.47, p=0.77). Conclusion(s): We did not find that the presence of CFRD is predictive of microbiome structure. In contrast we did find significant differentiation in microbiome structure among patients with differing degrees of lung function (ppFEV1) and relevant to CFRD we found that elevated HbA1c values (which indicates poor glycemic control) is associated with decreased lung function. Our current working hypothesis for these relationships is that decreased glucose control leads to physiological and potential microbiome gene expression changes in the lung environment which drive lung damage. The resulting lung deterioration and microbiome structure may then have reciprocal effects on each other. HbA1c -> microbiome gene-expression -> lung damage <-> microbiome structure.

KW - adult

KW - blood glucose monitoring

KW - body mass

KW - \*cystic fibrosis

KW - deterioration

KW - \*diabetic patient

KW - diagnosis

KW - differentiation

KW - endocrinologist

KW - female

KW - forced expiratory volume

KW - gene expression

KW - genotype

KW - glycemic control

KW - height

KW - human

KW - informed consent

KW - lung development

KW - lung function

KW - lung injury

KW - major clinical study

KW - male

KW - \*microbiome

KW - multivariate analysis of variance

KW - nonhuman

KW - oral glucose tolerance test

KW - patient information

KW - respiration depression

KW - sputum

KW - statistical significance

KW - DNA 16S

KW - endogenous compound

KW - hemoglobin A1c

JF - Pediatric Pulmonology

JA - Pediatr. Pulmonol.

LA - English

VL - 52

IS - Supplement 47

SP - 372

CY - Netherlands

PB - John Wiley and Sons Inc.

SN - 1099-0496

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DO - https://dx.doi.org/10.1002/ppul.23840

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed18&NEWS=N&AN=619069717

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1002%2fppul.23840Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Hao&issn=1099-0496&title=Pediatric+Pulmonology&atitle=Microbiome+in+cystic+fibrosis+with+and+without+diabetes&volume=52&issue=Supplement+47&spage=372&epage=&date=2017&doi=10.1002%2Fppul.23840&pmid=&sid=OVID:embase

269.

TY - JOUR

DB - Embase

AN - 617069974

T1 - The role of nutrition in chronic lung diseases in childhood

T3 - 16th Congress of the International Pediatric Pulmonology, CIPP 2017. Lisbon Portugal.

A1 - Soto-Martinez M.E.

Y1 - 2017//

N2 - Introduction Chronic lung diseases, such as asthma or COPD, affectmillions of people and are a major cause of premature death in children and adults worldwide. It is now generally accepted that many chronic lung diseases result from complex genetics and environmental interactions. Therefore, increasing attention has been given to many environmental and lifestyle factors, such as air pollution, smoking, physical activity and diet. Research shows that early nutrition plays a critical role in healthy lung development, and can underpin the increasing propensity for many respiratory and other non-communicable diseases. Diet may be an important modifiable risk factor for the development, progression and management of chronic lung diseases in children and adults (e.g. bronchopulmonary dysplasia (BPD), asthma, cystic fibrosis (CF) and COPD). Under-nutrition and over-nutrition may have significant effects on pulmonary function, poor growth and risk for chronic lung disease. In early life, malnutrition has been related to impaired immunity, which results in more frequent and severe respiratory infections. Additionally, nutritional depletion is a common problem in patients with severe chronic lung diseases such as BPD, CF, and others. Hypermetabolism, malabsorption and depletion of fat free mass are associated with increased morbidity and significant impairment of health status. Obesity has also been related to poor lung function, an increase in the prevalence of asthma and asthma severity. In addition, several of these nutritional deficiencies rarely occur in isolation. Dietary intervention has a potential role in reducing acute respiratory illness related morbidity and mortality, especially in developing countries. In most chronic lung diseases, nutritional interventions have proven to be effective in preventing or improving outcomes, but evidence is scarce in others. Micro- and Macronutrients Related to Chronic Respiratory Diseases Pregnant women (hence, their babies) and children under 5 years of age are particularly vulnerable to micronutrient deficiency, increasing their susceptibility to acute and chronic lung diseases in childhood. In addition, multiple micronutrient deficiencies coexist in the same individuals. Vitamin A deficiency is related to impaired immune function and cell differentiation. Zinc deficiency has been associated with a higher incidence of acute respiratory infections, a major cause of death in children under 5 years in developing countries [1]. Instead, nutritional interventions or diets rich in fruits and vegetables seem to be protective. A recent meta-analysis on the effect of childhood nutrient intake and the risk of developing wheezing or asthma showed that there was some evidence of protective effects from Vitamin A, D and E, zinc, fruit and vegetables, and of a Mediterranean diet against the development of asthma [2]. Also, Saadeh et al. showed that fruit and green vegetable intake was associated with a low prevalence of wheezing and asthma in school children aged 8-12 years old [3]. Adequate dietary vitamin C intake has also been related to reduced wheezing in some observational studies in children. Vitamin D has been extensively investigated in the last 20 years. It has a well-established immunomodulatory effect within the lung. Epidemiological studies show significant associations between vitamin D and several acute and chronic lung diseases such as asthma. There is some evidence on the role of vitamin D deficiency in disease onset, progression and exacerbation in respiratory infections, asthma and COPD [4]. Several observational studies have shown associations between asthma and high intake of omega-6 Long chain polyunsaturated fatty acids (LCPUFAs), whereas omega-3 LCPUFA have been shown to be anti-inflammatory, as they decrease inflammatory cell production of pro-inflammatory prostaglandin E2, Leukotriene B4 and activity of nuclear factor-kappaB (NF-kappaB). Maternal dietary intake of oily fish was found to be protective of asthma in children 5 years of age if born to mothers with asthma. A systematic review of omega-3 fatty acid supplementation studies in women during pregnancy found that the risk of asthma development in children was reduced (OR 0.349, 95% CI 0.15, 0.78) [5]. Asthma Various dietary patterns have been linked to the risk of respiratory diseases. In asthma, dietary exposures (nutrients and diet), and the periods of introduction (antenatal or childhood) are relevant to disease pathogenesis. Several cohort studies have suggested a link between reduced maternal consumption of some micronutrients and childhood asthma. In a systematic review, it was noted that higher maternal intake of vitamin D, vitamin E, and zinc was associated with lower odds of wheeze during childhood [6]. In relation to dietary patterns, the Mediterranean diet (high intake of minimally processed plant foods and low intake of dairy food, fish, poultry and minimal intake of red meat) has been found to have a protective effect for allergic respiratory disease in several epidemiological studies [7]. On the contrary, the "Western" dietary pattern (characterized by high consumption of refined grains, cured and red meats, desserts and sweets, french fries, and high-fat dairy products) has been associated to obesity and increased risk of asthma in children. Observational studies on vitamin D in children with asthma have shown a strong relationship between low levels of vitamin D and lower lung function, increased corticosteroid use, and asthma exacerbations [8]. Over-nutrition and resulting obesity are clearly linked with respiratory disease, particularly asthma [9]. Obese children with asthma have a decreased lung function, reduced response to inhaled corticosteroids, lower quality of life and higher morbidity. Recently, Forno et al. reported that obesity is associated with airway dysanapsis, which is associated with severe disease exacerbations in obese children with asthma [10]. In the obese state, several causal mechanistic pathways have been reported: anatomical changes of airway, circulating free fatty acids which activate immune responses leading to increased inflammation, production of adipokines, higher concentrations of circulating leptin, epigenetics and also microbiome. Chronic Lung Disease of Prematurity (CLDP) or Bronchopulmonary Dysplasia Inadequate growth, weight gain and malnutrition are well-recognized complications of BPD. Given the fact that nutrition plays an important role in lung development and maturation, specific nutritional deficiency in combination with other risk factors may aggravate pulmonary injury involved in BPD. Some of these factors for BPD development include oxygen toxicity, immaturity, mechanical ventilation, infection and inadequate nutritional support. Infants with BPD have low energy intake and increased energy utilization when compared to term infants [11]. This results in a negative energy balance which leads to malnutrition. Following discharge, some infants with BPD are at high risk for persistent growth failure. Possible explanations include increased energy expenditure, poor oral feeding skills and tolerance, concomitant dysfunction of other organs, and recurrent infections and hospitalizations. Therefore, an adequate nutritional intervention is essential to match the increased energy requirements in infants at risk of and with BPD. Although there is no consensus regarding the optimal nutritional management for BPD, many have suggested specific nutrient supplementation (e.g. glutamine, Selenium, LCPUFAs, cysteine, larginine, l-citrulline, inositol, vitamins A, E and C, and others) to prevent or treat BPD. Theoretically, some of these nutrients may curb hyperoxia-induced injury or improve alveolar development. However, evidence for supplementation is still controversial for most of these and their effects on BPD need to be further studied [12]. Current evidence shows that supplementation of vitamin A and omega-3 LCPUFA are effective in preventing BPD. Cystic Fibrosis (CF) There is an intimate close relationship between nutritional status and CF prognosis. Early nutritional interventions and monitoring for respiratory disease in infants and preschoolers with CF is priority to improve long-term outcomes. Poor nutrition leads to poor lung function and increased number of infections. But poor lung function also causes increased energy utilization and growth failure, which ends with unsatisfactory outcomes. Most CF patients are pancreatic insufficient and approximately one third of patients are below the 5th percentile of weight for age. Several studies have shown that malnutrition in early life is related to imparted lung function during childhood [13]. Micronutrient deficiencies also occur in CF patients because of their pancreatic insufficiency and secondary malabsorption. Vitamin A and E deficiency, as well as zinc and magnesium, may be present when either intake or nutrient absorption is inadequate. These deficiencies may also increase susceptibility to respiratory infections and malnutrition. Normal growth in patients with CF is associated with improved pulmonary function and survival. Yen, et al. [14] showed that better nutritional status at age 4 years in children with cystic fibrosis was associated with better lung function, fewer complications and greater survival. Oral supplements have been used with conflicting evidence, therefore, they should be considered with other nutritional and behavioral approaches. Gastrostomy tube feeding has been shown to improve weight and (in some studies) pulmonary function. Also, poor adherence to pancreatic enzymes has been related to difficulties in correcting malabsorption, hence, worst nutrition and outcomes.

KW - acute disease

KW - adult

KW - air pollution

KW - artificial ventilation

KW - \*asthma

KW - attention

KW - caloric intake

KW - candy

KW - cause of death

KW - cell differentiation

KW - child

KW - \*chronic obstructive lung disease

KW - cohort analysis

KW - complication

KW - consensus

KW - cystic fibrosis

KW - dairy product

KW - developing country

KW - disease exacerbation

KW - drug combination

KW - energy balance

KW - energy expenditure

KW - epigenetics

KW - exposure

KW - fat free mass

KW - feeding behavior

KW - female

KW - fruit

KW - gene expression

KW - genetics

KW - growth disorder

KW - health status

KW - hospitalization

KW - human

KW - hypermetabolism

KW - hyperoxia

KW - immune response

KW - infant

KW - inflammatory cell

KW - lifestyle

KW - lung development

KW - lung dysplasia

KW - lung function

KW - lung injury

KW - macronutrient

KW - malabsorption

KW - maturation

KW - \*Mediterranean diet

KW - microbiome

KW - monitoring

KW - morbidity

KW - mother

KW - non communicable disease

KW - nonhuman

KW - normal human

KW - nutritional status

KW - nutritional support

KW - obesity

KW - observational study

KW - organ

KW - oxygen toxicity

KW - pancreatic insufficiency

KW - physical activity

KW - poultry

KW - pregnancy

KW - pregnant woman

KW - preschool child

KW - prevalence

KW - prognosis

KW - quality of life

KW - recurrent infection

KW - red meat

KW - refined grain

KW - respiration depression

KW - respiratory tract infection

KW - retinol deficiency

KW - risk factor

KW - school child

KW - skill

KW - smoking

KW - stomach tube

KW - survival

KW - systematic review

KW - vegetable

KW - vitamin D deficiency

KW - weight gain

KW - wheezing

KW - zinc deficiency

KW - adipocytokine

KW - alpha tocopherol

KW - ascorbic acid

KW - citrulline

KW - corticosteroid

KW - cysteine

KW - endogenous compound

KW - glutamine

KW - immunoglobulin enhancer binding protein

KW - inositol

KW - leptin

KW - leukotriene B4

KW - magnesium

KW - omega 3 fatty acid

KW - pancreas enzyme

KW - prostaglandin E2

KW - retinol

KW - selenium

KW - trace element

KW - vitamin D

KW - zinc

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270.

TY - JOUR

DB - Embase

AN - 617069722

T1 - Sleep-disordered breathing in obese children

T3 - 16th Congress of the International Pediatric Pulmonology, CIPP 2017. Lisbon Portugal.

A1 - Praud J.-P.

Y1 - 2017//

N2 - The worldwide obesity epidemic is responsible for very significant respiratory problems in children and adults. As typically observed for chronic respiratory problems, consequences of obesity on respiration are more pronounced during sleep. The present short update focuses on the respiratory consequences of obesity during sleep in children and adolescents. Nevertheless, I will first briefly summarize the overall consequences of obesity on lung function, which is necessary for a complete understanding of sleep disordered breathing in obese children. Overall Effects of Obesity on Lung Function The most consistent effect of obesity on lung function is decreased functional residual capacity which, in morbid obesity, approaches residual volume. The decrease in functional residual capacity is due to the mass load on the lung of adipose tissue in the abdomen, as well as in the thoracic cavity and around the rib cage. Consequently, resting ventilation takes place at lower lung volumes while the tethering action of the elastic parenchyma on the alveoli and the intrapulmonary bronchi is reduced, leading in turn to deleterious consequences as follows. First, low lung volumes decrease lung compliance and increase work of breathing. Secondly, decreased functional residual capacity decreases pulmonary oxygen stores and increases the risk of bronchial closure during tidal breathing, especially in the lower pulmonary regions. Consequently, ventilation-perfusion mismatch is frequent in these regions, where perfusion is predominant, which explains the frequent mild hypoxemia observed with obesity. In summary, the bronchopulmonary consequences of obesity increase the work of breathing and favor mild hypoxemia, even at rest during wakefulness. Sleep-Disordered Breathing in Obese Children Even in the absence of significant sleep-related upper airway obstruction, the deleterious effects of obesity on lung function tend to be more pronounced at night. Indeed, in the recumbent position, the hyperpression on the diaphragm and the lower pulmonary regions due to the increased abdominal fat mass is the highest. In addition, sleep is normally associated with alterations in breathing, such as the loss of the "wakefulness stimulus" to breathe and a decrease in upper airway and thoracic respiratory muscle activity, especially during REM sleep. Obesity is an important risk factor (4.5-fold) for sleep-disordered breathing (SDB), with at least 30% of obese children potentially having SDB. In addition, the severity of SDB is proportional to the degree of obesity in children, such that every body mass index (BMI) increment of one leads to a 12% increase in the risk of SDB. The Mechanisms of Sleep-Disordered Breathing in obese children have been found to be multiple. First, as described above, the mechanical effects of the adipose tissue mass on lung function are more pronounced in the supine position. Secondly, a number of mechanisms tend to promote upper airway obstruction, explaining the high frequency of obstructive sleep-disordered breathing (OSDB): \* Fatty infiltration of the upper airways, especially at the level of the tongue and parapharyngeal pads, is often considered to be the primary causal factor for upper airway obstruction. However, a magnetic resonance imaging study performed in obese adolescents found that, even at this age, adenotonsillar hypertrophy remains the main factor for explaining upper airway obstruction (1). \* A higher frequency of malocclusions has been recently reported in obese vs. non-obese children with OSDB (2). \* The obesity-related decrease in lung volumes is responsible for a reduced tension on the trachea and upper airways. In turn, the consequent increase in upper airway compliance promotes upper airway collapse. \* Visceral adiposity is now held responsible for upper airway obstruction via inflammation. The high metabolic activity of visceral adipocytes produces pro-inflammatory mediators, which would lead, among others, to upper airway inflammation. In the same vein, OSDB is considered to be one manifestation of the metabolic syndrome, secondary to visceral adiposity (3). \* The release of growth factors secondary to the obesity/insulin resistance statemay lead to soft tissue edemain the upper airways. \* Finally, blunted respiratory reflexes, such as the ventilatory response to CO2, and reduced ventilatory drive, especially to the upper airway dilator muscles, are observed in some patients. Such reduction in ventilatory drive is seemingly related, among others, to a resistance to leptin, a cytokine and hormone secreted in large amount by adipocytes. The Diagnosis of Obstructive Sleep-Disordered Breathing must be made with a high index of suspicion in obese children. Snoring, apneas and breathing difficulties at night are frequently reported at history taking, as well as nocturnal enuresis, excessive daytime sleepiness, hyperactivity, behavioral problems and/or academic difficulties. At clinical examination, in addition to systematically investigating for systemic arterial hypertension, the presence of risk factors for OSDB such as nasal obstruction, orthodontic anomaly, adenotonsillar hypertrophy should be noted. The neck-to-waist ratio independently predicts obstructive sleep apnea syndrome (OSAS) (RR>2.16 per 0.1 unit) and a value>0.41 has been proposed as a screening test to help prioritize overweight and obese children for polysomnography (4). Usual laboratory tests investigating for metabolic syndrome are especially important in the diagnostic workup in obese children. As usual in children, diagnosing the severity ofOSDB is strongly advised and an overnight, attended polysomnography is the preferred test to establish the diagnosis ofOSAS.However, long waiting lists are the rule, and the higher severity of OSDB in obese children requires an early diagnosis and treatment. Although home sleep apnea testing has been reported as a viable alternative for diagnosing pediatric OSAS, the frequency of nocturnal hypoventilation in obese children necessitates performing CO2 monitoring (5). In addition, recent results suggest that an overnight pulse oximetry + clinical examination can help to predict OSAS in obese children in a suggestive clinical context (2). Beyond the above tests seeking to establish the diagnosis of OSAS, drug-induced sleep sedation is gaining popularity to substantiate the site of upper airway obstruction and guide surgical treatment, including in the presence of obesity (6). Whether the test is indicated in all surgical-naive patients or only when OSDB persists following adenotonsillectomy remains a matter of debate. Complications of OSDB Overall, OSDB and obesity potentiate each other to yield more frequent and severe complications compared to OSDB in non-obese children. Cardiovascular Complications. Childhood obesity is a leading cause of arterial hypertension, and OSDB is accompanied by higher sympathetic activity and reactivity, as well as increased arterial stiffness (7). In addition, both childhood obesity and OSDB are responsible for endothelial inflammation and dysfunction. Consequently, both obesity and OSDB favor cardiovascular complications, especially systemic arterial hypertension. Metabolic Syndrome. Both OSDB and obesity interact to provoke metabolic dysfunction, especially via chronic low-grade systemic inflammation. One current hypothesis states that the gut microbiome is the inflammatory connection between obesity and OSDB. Disrupted sleep and other factors facilitating obesity (e.g., a high-fat diet) would alter the gut microbiome and increase the passage of lipopolysaccharides into the systemic circulation, leading in turn to systemic inflammation. Neurobehavioral Consequences. Both OSDB and obesity lead to neurodevelopmental and behavioral consequences, especially hyperactivity/ attention disorder (8) and lower school performance. Hence, obesity and SDB again have an additive effect on neurobehavioral consequences. Quality of Life and Depression. Obesity is associated with lower selfesteem, anxiety disorders and depressive symptoms (9). An extreme reduction in health-related quality of life, similar to children with cancer, has been reported with morbid obesity. A decreased quality of life has also been shown with OSDB. Again, OSDB and obesity potentiate each other to reduce quality of life in affected children. Treatment of Obstructive Sleep-Disordered Breathing in Obese Children Adenotonsillectomy must remain the first line of treatment to consider. However, a recent meta-analysis has shown that, following adenotonsillectomy, OSAS is cured in only ~33% of obese children (10). Postoperative follow-up is thus important to detect residual OSAS, ideally with overnight polysomnography. In addition, obesity in children is a risk factor for postoperative cardiorespiratory complications (25% vs. 1%), such that overnight hospitalization and monitoring is mandatory following adenotonsillectomy. Further treatment options in obese children with OSDB include an intensive weight reduction program, CPAP, exercise aswell as bariatric surgery inmorbidly obese adolescents. Obesity-Hypoventilation Syndrome Obesity-hypoventilation syndrome (Pickwickian syndrome) is defined by the association of a body mass index>30 kg/m2, arterial hypercapnia during wakefulness and SDB in the absence of other causes of alveolar hypoventilation. Children with obesity-hypoventilation syndrome are considered to be at the extreme of the OSDB spectrum. Their lung physiology is grossly impaired due to severe obesity, the marked mechanical loading of the respiratory system being responsible for increased work of breathing and gross ventilation/perfusion anomalies, leading in turn to chronic hypoxemia + hypercapnia.

KW - abdomen

KW - academic achievement

KW - adenotonsillar hypertrophy

KW - adenotonsillectomy

KW - adipocyte

KW - adolescent

KW - \*adolescent obesity

KW - adult

KW - anamnesis

KW - anxiety disorder

KW - apnea monitoring

KW - arterial stiffness

KW - attention

KW - bariatric surgery

KW - body mass

KW - breathing muscle

KW - breathing reflex

KW - bronchus

KW - child

KW - childhood obesity

KW - clinical examination

KW - \*clinical study

KW - collapse

KW - complication

KW - daytime somnolence

KW - depression

KW - diagnosis

KW - diaphragm

KW - dyspnea

KW - early diagnosis

KW - epidemic

KW - fat mass

KW - \*female

KW - follow up

KW - gastrointestinal tract

KW - hospital admission

KW - hospitalization

KW - human

KW - hypercapnia

KW - hypoxemia

KW - inflammation

KW - intraperitoneal fat

KW - laboratory test

KW - lipid diet

KW - lung alveolus hypoventilation

KW - lung compliance

KW - lung function

KW - \*male

KW - malignant neoplasm

KW - malocclusion

KW - mediator

KW - metabolic syndrome X

KW - microbiome

KW - morbid obesity

KW - muscle function

KW - neck

KW - nocturnal enuresis

KW - nonhuman

KW - nose obstruction

KW - nuclear magnetic resonance imaging

KW - \*obesity hypoventilation syndrome

KW - orthodontics

KW - parenchyma

KW - perfusion

KW - physiology

KW - polysomnography

KW - positive end expiratory pressure

KW - problem behavior

KW - quality of life

KW - REM sleep

KW - residual volume

KW - rest

KW - rib cage

KW - risk factor

KW - screening test

KW - sedation

KW - snoring

KW - soft tissue

KW - supine position

KW - surgery

KW - sympathetic tone

KW - systemic circulation

KW - tension

KW - thoracic cavity

KW - tongue

KW - trachea

KW - upper respiratory tract obstruction

KW - vein

KW - wakefulness

KW - weight loss program

KW - work of breathing

KW - carbon dioxide

KW - cytokine

KW - endogenous compound

KW - growth factor

KW - hormone

KW - leptin

KW - lipopolysaccharide

KW - oxygen

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Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed18&DO=10.1002%2fppul.23729Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Praud&issn=1099-0496&title=Pediatric+Pulmonology&atitle=Sleep-disordered+breathing+in+obese+children&volume=52&issue=Supplement+46&spage=S91&epage=S93&date=2017&doi=10.1002%2Fppul.23729&pmid=&sid=OVID:embase

271.

TY - JOUR

DB - Embase

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T1 - "Urinary Tract Infection"-Requiem for a Heavyweight

A1 - Finucane T.E.

Y1 - 2017//

N2 - "Urinary tract infection" ("UTI") is an ambiguous, expansive, overused diagnosis that can lead to marked, harmful antibiotic overtreatment. "Significant bacteriuria," central to most definitions of "UTI," has little significance in identifying individuals who will benefit from treatment. "Urinary symptoms" are similarly uninformative. Neither criterion is well defined. Bacteriuria and symptoms remit and recur spontaneously. Treatment is standard for acute uncomplicated cystitis and common for asymptomatic bacteriuria, but definite benefits are few. Treatment for "UTI" in older adults with delirium and bacteriuria is widespread but no evidence supports the practice, and expert opinion opposes it. Sensitive diagnostic tests now demonstrate that healthy urinary tracts host a ubiquitous, complex microbial community. Recognition of this microbiome, largely undetectable using standard agar-based cultures, offers a new perspective on "UTI." Everyone is bacteriuric. From this perspective, most people who are treated for a "UTI" would probably be better off without treatment. Elderly adults, little studied in this regard, face particular risk. Invasive bacterial diseases such as pyelonephritis and bacteremic bacteriuria are also "UTIs.". Mindful decisions about antibiotic use will require a far better understanding of how pathogenicity arises within microbial communities. It is likely that public education and meaningful informed-consent discussions about antibiotic treatment of bacteriuria, emphasizing potential harms and uncertain benefits, would reduce overtreatment. Emphasizing the microbiome's significance and using the term "urinary tract dysbiosis" instead of "UTI" might also help and might encourage mindful study of the relationships among host, aging, microbiome, disease, and antibiotic treatment.© 2017, Copyright the Author Journal compilation © 2017, The American Geriatrics Society

KW - aging

KW - antibiotic therapy

KW - article

KW - asymptomatic bacteriuria

KW - bacteriuria

KW - cystitis

KW - delirium

KW - dysbiosis

KW - emergency ward

KW - geriatric disorder

KW - human

KW - lower urinary tract symptom

KW - microbiome

KW - patient safety

KW - pyuria

KW - replacement arthroplasty

KW - sepsis

KW - \*urinary tract infection/dt [Drug Therapy]

KW - urinary tract infection/dt [Drug Therapy]

KW - antibiotic agent/dt [Drug Therapy]

XT - urinary tract infection / drug therapy / antibiotic agent

XT - antibiotic agent / drug therapy / urinary tract infection

JF - Journal of the American Geriatrics Society

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272.

TY - JOUR

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T1 - Use of inhaled corticosteroids in COPD: Improving efficacy

A1 - Yang I.A.

A1 - Shaw J.G.

A1 - Goddard J.R.

A1 - Clarke M.S.

A1 - Reid D.W.

Y1 - 2016//

N2 - Chronic obstructive pulmonary disease (COPD) is a chronic, inflammatory lung disease characterized by airflow limitation that is not fully reversible. The pathological changes in COPD lead to alveolar destruction (emphysema) and chronic airway inflammation, resulting in airflow obstruction and recurrent exacerbations. Inhaled corticosteroids (ICS) are anti-inflammatory agents that are widely used, especially in combination with long-acting beta-agonists, in patients with COPD. Here, we will summarize the benefits and risks of ICS use for COPD, and discuss approaches to more personalized medicine when selecting COPD patients to commence (or withdraw) ICS use. The conclusion arising is that further validation of clinical and biological markers should be undertaken in COPD, in order to individualize ICS therapy to maximize efficacy for patients.Copyright © 2016 Taylor & Francis.

KW - adrenal cortex atrophy/si [Side Effect]

KW - adrenal insufficiency/si [Side Effect]

KW - avascular necrosis/si [Side Effect]

KW - calcium absorption

KW - calcium excretion

KW - cataract/si [Side Effect]

KW - \*chronic obstructive lung disease/dt [Drug Therapy]

KW - \*chronic obstructive lung disease/et [Etiology]

KW - collagen synthesis

KW - \*corticosteroid therapy

KW - corticotropin release

KW - depression/si [Side Effect]

KW - drug effect

KW - \*drug efficacy

KW - drug mechanism

KW - drug withdrawal

KW - fracture/si [Side Effect]

KW - genomics

KW - glaucoma/si [Side Effect]

KW - glucose transport

KW - human

KW - hyperglycemia/si [Side Effect]

KW - hypertension/si [Side Effect]

KW - hypogonadism/si [Side Effect]

KW - insulin resistance/si [Side Effect]

KW - meta analysis (topic)

KW - microbiome

KW - muscle atrophy/si [Side Effect]

KW - non insulin dependent diabetes mellitus/si [Side Effect]

KW - nonhuman

KW - osteoporosis/si [Side Effect]

KW - outcome assessment

KW - parathyroid hormone release

KW - pathology

KW - pathophysiology

KW - peptic ulcer/si [Side Effect]

KW - personalized medicine

KW - pneumonia/si [Side Effect]

KW - practice guideline

KW - psychosis/si [Side Effect]

KW - randomized controlled trial (topic)

KW - review

KW - risk assessment

KW - side effect/si [Side Effect]

KW - skin atrophy/si [Side Effect]

KW - sodium retention

KW - systematic review (topic)

KW - water retention

KW - biological marker/ec [Endogenous Compound]

KW - \*corticosteroid/ae [Adverse Drug Reaction]

KW - \*corticosteroid/dt [Drug Therapy]

KW - \*corticosteroid/ih [Inhalational Drug Administration]

KW - \*corticosteroid/pd [Pharmacology]

KW - glucocorticoid/dt [Drug Therapy]

KW - glucocorticoid/pd [Pharmacology]

KW - muscle protein/ec [Endogenous Compound]

KW - parathyroid hormone/ec [Endogenous Compound]

KW - lung microbiome

XT - adrenal cortex atrophy / side effect / corticosteroid

XT - adrenal insufficiency / side effect / corticosteroid

XT - avascular necrosis / side effect / corticosteroid

XT - cataract / side effect / corticosteroid

XT - chronic obstructive lung disease / drug therapy / corticosteroid

XT - chronic obstructive lung disease / drug therapy / glucocorticoid

XT - depression / side effect / corticosteroid

XT - fracture / side effect / corticosteroid

XT - glaucoma / side effect / corticosteroid

XT - hyperglycemia / side effect / corticosteroid

XT - hypertension / side effect / corticosteroid

XT - hypogonadism / side effect / corticosteroid

XT - insulin resistance / side effect / corticosteroid

XT - muscle atrophy / side effect / corticosteroid

XT - non insulin dependent diabetes mellitus / side effect / corticosteroid

XT - osteoporosis / side effect / corticosteroid

XT - peptic ulcer / side effect / corticosteroid

XT - pneumonia / side effect / corticosteroid

XT - psychosis / side effect / corticosteroid

XT - side effect / side effect / corticosteroid

XT - skin atrophy / side effect / corticosteroid

XT - corticosteroid / adverse drug reaction / adrenal cortex atrophy

XT - corticosteroid / adverse drug reaction / adrenal insufficiency

XT - corticosteroid / adverse drug reaction / avascular necrosis

XT - corticosteroid / adverse drug reaction / cataract

XT - corticosteroid / adverse drug reaction / depression

XT - corticosteroid / adverse drug reaction / fracture

XT - corticosteroid / adverse drug reaction / glaucoma

XT - corticosteroid / adverse drug reaction / hyperglycemia

XT - corticosteroid / adverse drug reaction / hypertension

XT - corticosteroid / adverse drug reaction / hypogonadism

XT - corticosteroid / adverse drug reaction / insulin resistance

XT - corticosteroid / adverse drug reaction / muscle atrophy

XT - corticosteroid / adverse drug reaction / non insulin dependent diabetes mellitus

XT - corticosteroid / adverse drug reaction / osteoporosis

XT - corticosteroid / adverse drug reaction / peptic ulcer

XT - corticosteroid / adverse drug reaction / pneumonia

XT - corticosteroid / adverse drug reaction / psychosis

XT - corticosteroid / adverse drug reaction / side effect

XT - corticosteroid / adverse drug reaction / skin atrophy

XT - corticosteroid / drug therapy / chronic obstructive lung disease

XT - glucocorticoid / drug therapy / chronic obstructive lung disease

JF - Expert Review of Respiratory Medicine

JA - Expert Rev. Respir. Med.

LA - English

VL - 10

IS - 3

SP - 339

EP - 350

CY - United Kingdom

PB - Taylor and Francis Ltd.

SN - 1747-6348

SN - 1747-6356

AD - I.A. Yang, Department of Thoracic Medicine, Prince Charles Hospital, Metro North Hospital and Health Service, Brisbane, QLD, Australia. E-mail: Ian.Yang@health.qld.gov.au

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UR - http://www.tandfonline.com/loi/ierx20

DO - https://dx.doi.org/10.1586/17476348.2016.1151789

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=608981491

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&DO=10.1586%2f17476348.2016.1151789Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Yang&issn=1747-6348&title=Expert+Review+of+Respiratory+Medicine&atitle=Use+of+inhaled+corticosteroids+in+COPD%3A+Improving+efficacy&volume=10&issue=3&spage=339&epage=350&date=2016&doi=10.1586%2F17476348.2016.1151789&pmid=26855301&sid=OVID:embase

273.

TY - JOUR

DB - Embase

AN - 612502713

ID - 27698624 [https://www.ncbi.nlm.nih.gov/pubmed/?term=27698624]

T1 - Integrative therapies in anxiety treatment with special emphasis on the gut microbiome

A1 - Schnorr S.L.

A1 - Bachner H.A.

Y1 - 2016//

N2 - Over the past decade, research has shown that diet and gut health affects symptoms expressed in stress related disorders, depression, and anxiety through changes in the gut microbiota. Psycho-behavioral function and somatic health interaction have often been ignored in health care with resulting deficits in treatment quality and outcomes. While mental health care requires the professional training in counseling, psychotherapy and psychiatry, complimentary therapeutic strategies, such as attention to a nutritional and diverse diet and supplementation of probiotic foods, may be integrated alongside psychotherapy treatment models. Development of these alternative strategies is predicated on experimental evidence and diligent research on the biology of stress, fear, anxiety-related behaviors, and the gut-brain connection. This article provides a brief overview on biological markers of anxiety and the expanding nutritional literature relating to brain health and mental disorders. A case study demonstrates an example of a biopsychosocial approach integrating cognitive psychotherapy, dietary changes, and mindfulness activities, in treating symptoms of anxiety. This case study shows a possible treatment protocol to explore the efficacy of targeting the gut-brain-axis that may be used as an impetus for future controlled studies.Copyright © 2016.

KW - adult

KW - \*anxiety disorder/th [Therapy]

KW - article

KW - Beck Anxiety Inventory

KW - case report

KW - clinical effectiveness

KW - \*diet therapy

KW - emotionality

KW - feces analysis

KW - glucose blood level

KW - human

KW - \*intestine flora

KW - lifestyle modification

KW - male

KW - mental health

KW - \*mindfulness

KW - panic

KW - patient counseling

KW - patient monitoring

KW - psychological well-being

KW - \*psychotherapy

KW - glucose/ec [Endogenous Compound]

KW - probiotic agent

JF - Yale Journal of Biology and Medicine

JA - Yale J. Biol. Med.

LA - English

VL - 89

IS - 3

SP - 397

EP - 422

CY - United States

PB - Yale Journal of Biology and Medicine Inc.

SN - 0044-0086

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UR - https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5045149/pdf/yjbm\_89\_3\_397.pdf

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=612502713

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&AN=612502713Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Schnorr&issn=0044-0086&title=Yale+Journal+of+Biology+and+Medicine&atitle=Integrative+therapies+in+anxiety+treatment+with+special+emphasis+on+the+gut+microbiome&volume=89&issue=3&spage=397&epage=422&date=2016&doi=&pmid=27698624&sid=OVID:embase

274.

TY - JOUR

DB - Embase

AN - 612982488

ID - 27363327 [https://www.ncbi.nlm.nih.gov/pubmed/?term=27363327]

T1 - Systematic review of loperamide: No proof of antibiotics being superior to loperamide in treatment of mild/moderate travellers' diarrhoea

A1 - Laaveri T.

A1 - Sterne J.

A1 - Rombo L.

A1 - Kantele A.

AO - Kantele, Anu; ORCID: https://orcid.org/0000-0002-0004-1000

Y1 - 2016//

N2 - Looking at the worldwide emergency of antimicrobial resistance, international travellers appear to have a central role in spreading the bacteria across the globe. Travellers' diarrhoea (TD) is the most common disease encountered by visitors to the (sub)tropics. Both TD and its treatment with antibiotics have proved significant independent risk factors of colonization by resistant intestinal bacteria while travelling. Travellers should therefore be given preventive advice regarding TD and cautioned about taking antibiotics: mild or moderate TD does not require antibiotics. Logical alternatives are medications with effects on gastrointestinal function, such as loperamide. The present review explores literature on loperamide in treating TD. Adhering to manufacturer's dosage recommendations, loperamide offers a safe and effective alternative for relieving mild and moderate symptoms. Moreover, loperamide taken singly does no predispose to contracting MDR bacteria. Most importantly, we found no proof that would show antibiotics to be significantly more effective than loperamide in treating mild/moderate TD.Copyright © 2016 The Authors

KW - abdominal cramp/si [Side Effect]

KW - acute pancreatitis/si [Side Effect]

KW - anaphylaxis/si [Side Effect]

KW - antibiotic resistance

KW - anticholinergic syndrome/si [Side Effect]

KW - bacteremia/si [Side Effect]

KW - bacterial colonization

KW - Campylobacter

KW - catatonia/si [Side Effect]

KW - colon perforation/si [Side Effect]

KW - constipation/si [Side Effect]

KW - dose response

KW - drug efficacy

KW - drug overdose/si [Side Effect]

KW - drug safety

KW - Enterobacteriaceae

KW - faintness/si [Side Effect]

KW - gastrointestinal tract function

KW - headache/si [Side Effect]

KW - heart arrhythmia/si [Side Effect]

KW - heart ventricle tachycardia/si [Side Effect]

KW - human

KW - intestine flora

KW - long QT syndrome/si [Side Effect]

KW - nausea/si [Side Effect]

KW - necrotizing enterocolitis/si [Side Effect]

KW - paralytic ileus/si [Side Effect]

KW - priority journal

KW - prospective study

KW - randomized controlled trial (topic)

KW - rash/si [Side Effect]

KW - respiration depression/si [Side Effect]

KW - retrospective study

KW - review

KW - risk factor

KW - side effect/si [Side Effect]

KW - systematic review

KW - toxic megacolon/si [Side Effect]

KW - travel

KW - \*traveller diarrhea/dt [Drug Therapy]

KW - traveller diarrhea/dt [Drug Therapy]

KW - vomiting/si [Side Effect]

KW - \*antibiotic agent/ae [Adverse Drug Reaction]

KW - \*antibiotic agent/cm [Drug Comparison]

KW - \*antibiotic agent/dt [Drug Therapy]

KW - cotrimoxazole/cm [Drug Comparison]

KW - cotrimoxazole/dt [Drug Therapy]

KW - \*loperamide/ae [Adverse Drug Reaction]

KW - \*loperamide/cm [Drug Comparison]

KW - \*loperamide/dt [Drug Therapy]

KW - macrolide/dt [Drug Therapy]

KW - quinoline derived antiinfective agent/dt [Drug Therapy]

KW - rifaximin/cm [Drug Comparison]

KW - rifaximin/dt [Drug Therapy]

XT - abdominal cramp / side effect / loperamide

XT - acute pancreatitis / side effect / loperamide

XT - anaphylaxis / side effect / loperamide

XT - anticholinergic syndrome / side effect / loperamide

XT - bacteremia / side effect / loperamide

XT - catatonia / side effect / loperamide

XT - colon perforation / side effect / loperamide

XT - constipation / side effect / loperamide

XT - drug overdose / side effect / loperamide

XT - faintness / side effect / loperamide

XT - headache / side effect / loperamide

XT - heart arrhythmia / side effect / loperamide

XT - heart ventricle tachycardia / side effect / loperamide

XT - long QT syndrome / side effect / loperamide

XT - nausea / side effect / loperamide

XT - necrotizing enterocolitis / side effect / loperamide

XT - paralytic ileus / side effect / loperamide

XT - rash / side effect / loperamide

XT - respiration depression / side effect / loperamide

XT - side effect / side effect / antibiotic agent

XT - toxic megacolon / side effect / loperamide

XT - traveller diarrhea / drug therapy / antibiotic agent

XT - traveller diarrhea / drug therapy / cotrimoxazole

XT - traveller diarrhea / drug therapy / loperamide

XT - traveller diarrhea / drug therapy / macrolide

XT - traveller diarrhea / drug therapy / quinoline derived antiinfective agent

XT - traveller diarrhea / drug therapy / rifaximin

XT - vomiting / side effect / loperamide

XT - antibiotic agent / adverse drug reaction / side effect

XT - antibiotic agent / drug comparison / loperamide

XT - antibiotic agent / drug therapy / traveller diarrhea

XT - cotrimoxazole / drug comparison / loperamide

XT - cotrimoxazole / drug therapy / traveller diarrhea

XT - loperamide / adverse drug reaction / abdominal cramp

XT - loperamide / adverse drug reaction / acute pancreatitis

XT - loperamide / adverse drug reaction / anaphylaxis

XT - loperamide / adverse drug reaction / anticholinergic syndrome

XT - loperamide / adverse drug reaction / bacteremia

XT - loperamide / adverse drug reaction / catatonia

XT - loperamide / adverse drug reaction / colon perforation

XT - loperamide / adverse drug reaction / constipation

XT - loperamide / adverse drug reaction / drug overdose

XT - loperamide / adverse drug reaction / faintness

XT - loperamide / adverse drug reaction / headache

XT - loperamide / adverse drug reaction / heart arrhythmia

XT - loperamide / adverse drug reaction / heart ventricle tachycardia

XT - loperamide / adverse drug reaction / long QT syndrome

XT - loperamide / adverse drug reaction / nausea

XT - loperamide / adverse drug reaction / necrotizing enterocolitis

XT - loperamide / adverse drug reaction / paralytic ileus

XT - loperamide / adverse drug reaction / rash

XT - loperamide / adverse drug reaction / respiration depression

XT - loperamide / adverse drug reaction / toxic megacolon

XT - loperamide / adverse drug reaction / vomiting

XT - loperamide / drug comparison / antibiotic agent

XT - loperamide / drug comparison / cotrimoxazole

XT - loperamide / drug comparison / rifaximin

XT - loperamide / drug therapy / traveller diarrhea

XT - macrolide / drug therapy / traveller diarrhea

XT - quinoline derived antiinfective agent / drug therapy / traveller diarrhea

XT - rifaximin / drug comparison / loperamide

XT - rifaximin / drug therapy / traveller diarrhea

JF - Travel Medicine and Infectious Disease

JA - Travel Med. Infect. Dis.

LA - English

VL - 14

IS - 4

SP - 299

EP - 312

CY - United States

PB - Elsevier USA

SN - 1477-8939

SN - 1873-0442

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UR - http://www.elsevier.com/wps/find/journaldescription.cws\_home/643125/description#description

DO - https://dx.doi.org/10.1016/j.tmaid.2016.06.006

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=612982488

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&DO=10.1016%2fj.tmaid.2016.06.006Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Laaveri&issn=1477-8939&title=Travel+Medicine+and+Infectious+Disease&atitle=Systematic+review+of+loperamide%3A+No+proof+of+antibiotics+being+superior+to+loperamide+in+treatment+of+mild%2Fmoderate+travellers%27+diarrhoea&volume=14&issue=4&spage=299&epage=312&date=2016&doi=10.1016%2Fj.tmaid.2016.06.006&pmid=27363327&sid=OVID:embase

275.

TY - JOUR

DB - Embase

AN - 611083280

T1 - Controversies in omega-3 efficacy and novel concepts for application

A1 - Radcliffe J.E.

A1 - Thomas J.

A1 - Bramley A.L.

A1 - Kouris-Blazos A.

A1 - Radford B.E.

A1 - Scholey A.B.

A1 - Pipingas A.

A1 - Thomas C.J.

A1 - Itsiopoulos C.

AO - Radcliffe J.E.; ORCID: https://orcid.org/0000-0001-7416-0320

Y1 - 2016//

N2 - Interest in the cardioprotective effects of long chain omega-3 polyunsaturated fatty acids (LCn3) was largely influenced by the low rates of cardiovascular disease (CVD) amongst the Inuits of Greenland who consumed a high marine fat diet rich in LCn3s. This finding stimulated years of epidemiological and clinical studies investigating the cardioprotective effects of LCn3s, thought to be primarily mediated through anti-inflammatory (and anti-aggregatory) prostaglandins that protect the vascular wall from pro-inflammatory effects of metabolic stress precipitated by poor diet and lifestyle. Although the original hypothesis of the link between LCn3s and CVD protection was based on a high LCn3 containing diet (namely a high marine fat diet) the majority of clinical trials since have focussed on EPA and DHA supplementation, and results of repeated meta-analyses have not shown conclusive evidence in support of their beneficial health effects. In this review we focus on the controversies that surround the efficacy of LCn3s in cardiovascular and other chronic diseases and present emerging areas of research for novel applications. We will examine factors that can impact on the efficacy of LCn3s such as source (plant vs marine vs supplements (algal vs marine)), stability of product, dose, trial duration, ratio of EPA:DHA, and ratio of LCn6:LCn3 fatty acids in the diet.Copyright © 2016

KW - blood vessel wall

KW - \*cardiovascular disease

KW - cardiovascular risk

KW - \*chronic disease

KW - cognition

KW - \*dietary intake

KW - false positive result

KW - Greenland

KW - heart protection

KW - human

KW - intestine flora

KW - liver disease

KW - Mediterranean diet

KW - mental health

KW - metabolic stress

KW - metabolic syndrome X

KW - nonalcoholic fatty liver

KW - parenteral nutrition

KW - priority journal

KW - prophylaxis

KW - protein stability

KW - review

KW - \*supplementation

KW - treatment duration

KW - \*long chain fatty acid

KW - \*omega 3 fatty acid

KW - prostaglandin/ec [Endogenous Compound]

KW - unclassified drug

KW - \*long chain omega 3 polyunsaturated fatty acid

JF - Journal of Nutrition and Intermediary Metabolism

JA - J. Nutr. Intermediary Metab.

LA - English

VL - 5

SP - 11

EP - 22

CY - United States

PB - Elsevier Inc.

SN - 2352-3859 (electronic)

SN - 2352-3859

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M1 - (Scholey, Pipingas) Centre for Human Psychopharmacology, Swinburne University of Technology, Hawthorn, Victoria, Australia

UR - http://www.journals.elsevier.com/journal-of-nutrition-and-intermediary-metabolism/

DO - https://dx.doi.org/10.1016/j.jnim.2016.05.002

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=611083280

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&DO=10.1016%2fj.jnim.2016.05.002Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Radcliffe&issn=2352-3859&title=Journal+of+Nutrition+and+Intermediary+Metabolism&atitle=Controversies+in+omega-3+efficacy+and+novel+concepts+for+application&volume=5&issue=&spage=11&epage=22&date=2016&doi=10.1016%2Fj.jnim.2016.05.002&pmid=&sid=OVID:embase

276.

TY - JOUR

DB - Embase

AN - 608714619

T1 - Toward a Nuanced Understanding of the Role of Infection in Readmissions after Sepsis

A1 - Prescott H.C.

Y1 - 2016//

KW - antibiotic therapy

KW - critically ill patient

KW - editorial

KW - hematuria

KW - \*hospital readmission

KW - hospitalization

KW - human

KW - \*infection

KW - infection prevention

KW - intestine flora

KW - mental health

KW - mortality

KW - neutropenia

KW - priority journal

KW - reliability

KW - \*sepsis

KW - survivor

KW - treatment failure

JF - Critical Care Medicine

JA - Crit. Care Med.

LA - English

VL - 44

IS - 3

SP - 634

EP - 635

CY - United States

PB - Lippincott Williams and Wilkins (E-mail: kathiest.clai@apta.org)

SN - 0090-3493

SN - 1530-0293

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UR - http://journals.lww.com/ccmjournal/pages/default.aspx

DO - https://dx.doi.org/10.1097/CCM.0000000000001508

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=608714619

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&DO=10.1097%2fCCM.0000000000001508Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Prescott&issn=0090-3493&title=Critical+Care+Medicine&atitle=Toward+a+Nuanced+Understanding+of+the+Role+of+Infection+in+Readmissions+after+Sepsis&volume=44&issue=3&spage=634&epage=635&date=2016&doi=10.1097%2FCCM.0000000000001508&pmid=&sid=OVID:embase

277.

TY - JOUR

DB - Embase

AN - 612869095

T1 - All-cause hospital admissions decreased after fecal microbiota transplantation for recurrent clostridium difficile infection

T3 - 81st Annual Scientific Meeting of the American College of Gastroenterology. Las Vegas, NV United States.

A1 - Buers M.

A1 - Quatrara B.

A1 - Niccum B.

A1 - Vance S.

A1 - Hays R.A.

Y1 - 2016//

N2 - Introduction: Clostridium difficileinfection (CDI) is currently the most frequent health-care acquired infection. It is associated with debilitating diarrhea, sepsis, shock, renal failure, and intestinal perforation and has an initial recurrence rate of 20% rising to 65% with subsequent recurrences. Costs in the US are estimated at 4.8 billion annually. Fecal Microbiota Transplantation (FMT) is used to correct the dysbiosis associated with recurrent CDI (rCDI) and prevent future recurrence. We hypothesized a decrease in hospital admissions after successful FMT for rCDI. Method(s): A retrospective chart review was conducted of all recipients of FMT for rCDI at our institution from September 2013 to April 2016 to compare the frequency of CDI-associated hospital admissions in the six months before FMT to frequency six months after FMT. A similar comparison was done for all-cause admissions except CDI. One patient was excluded from analysis due to incomplete preparation for FMT. Result(s): 105 patients with rCDI underwent FMT with a median age of 69 and 74.7% were female. There were 130 hospitalizations for CDI documented in the six months prior to FMT. In the six months post FMT there were 11 admissions for CDI (mean 1.25 compared to 0.10). The cohort was admitted an additional 34 times in the six months prior to FMT for causes other than CDI which included diabetic ketoacidosis, sepsis, hypokalemia, dementia, hypertension, fall with subdural hematoma, altered mental status, alcohol withdrawal, and alcoholic ketoacidosis. In the six months after FMT there 27 admissions for causes other than CDI including feeding tube malfunction, sepsis, pneumonia, diabetes, altered mental status, urosepsis, urinary tract infection, dehydration, fall, subdural hematoma, epilepsy, lactic acidosis, cocaine abuse, and gastroparesis. The mean hospitalization rate decreased from 0.33 to 0.26. Conclusion(s): This retrospective study suggests that the number of hospital admissions for CDI may be dramatically reduced by FMT for rCDI in the six months post FMT. Our results also revealed a decreased number of admissions post FMT for other comorbidities, thus suggesting that FMT improves the overall health the overall health of patients with rCDI. Our results call for a multicenter study of 30-day and 6-month hospital admission rates pre- and post-FMT for rCDI as there may be a role for early intervention with FMT to decrease the deleterious effect of rCDI on all-cause illnesses.

KW - aged

KW - alcohol withdrawal syndrome

KW - alcoholism

KW - clinical trial

KW - \*Clostridium difficile infection

KW - comorbidity

KW - controlled clinical trial

KW - controlled study

KW - dehydration

KW - dementia

KW - diabetic ketoacidosis

KW - disease duration

KW - drug withdrawal

KW - early intervention

KW - epilepsy

KW - \*fecal microbiota transplantation

KW - feeding apparatus

KW - female

KW - \*hospital admission

KW - hospitalization

KW - human

KW - hypertension

KW - hypokalemia

KW - lactic acidosis

KW - major clinical study

KW - male

KW - medical record review

KW - mental health

KW - multicenter study

KW - pneumonia

KW - recipient

KW - relapse

KW - retrospective study

KW - stomach paresis

KW - subdural hematoma

KW - urosepsis

KW - cocaine

JF - American Journal of Gastroenterology

JA - Am. J. Gastroenterol.

LA - English

VL - 111

IS - Supplement 1

SP - S91

EP - S92

CY - Netherlands

PB - Nature Publishing Group

SN - 1572-0241

AD - M. Buers, University of Virginia Medical Center, Charlottesville, VA, United States

M1 - (Buers, Quatrara, Niccum, Vance) University of Virginia Medical Center, Charlottesville, VA, United States

M1 - (Hays) University of Virginia Health System, Charlottesville, VA, United States

DO - https://dx.doi.org/10.1038/ajg.2016.352

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=612869095

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&DO=10.1038%2fajg.2016.352Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Buers&issn=1572-0241&title=American+Journal+of+Gastroenterology&atitle=All-cause+hospital+admissions+decreased+after+fecal+microbiota+transplantation+for+recurrent+clostridium+difficile+infection&volume=111&issue=Supplement+1&spage=S91&epage=S92&date=2016&doi=10.1038%2Fajg.2016.352&pmid=&sid=OVID:embase

278.

TY - JOUR

DB - Embase

AN - 614006657

T1 - Human gut microbiota - A lifetime history: From birth to adulthood (Riviera Maya, Mexico - June 26th, 2015)

T3 - Microbiota intestinal humana - Una historia de vida: Del nacimiento a la edad adulta (Riviera Maya, Mexico - Junio 26, 2015)

A1 - Fernandez L.B.

A1 - Cohen H.

A1 - Guarner F.

A1 - Maruy A.

A1 - Leon K.

A1 - Ramirez-Mayans J.

A1 - Sdepanian V.

A1 - Vandenplas Y.

Y1 - 2016//

N2 - The objective of the Meeting was to raise recognition and expand knowledge of the gut microbiota among gastroenterologists, pediatricians and general practitioners in Latin American countries. Recognized international experts shared new findings on a number of topics including microbiota in health and disease, and probiotics in obtaining physiological effects and clinical benefits. This meeting report aims to provide a general overview of the topics discussed and the reader is referred to the cited references to gain further insight into the meeting's content.Copyright © 2016, Sociedad Argentina de Gastroenterologia. All Rights Reserved.

KW - anxiety

KW - article

KW - bioinformatics

KW - depression

KW - dysbiosis

KW - enterocolitis

KW - gastroenterologist

KW - gastrointestinal tract

KW - general practitioner

KW - genetic susceptibility

KW - human

KW - inflammation

KW - insulin sensitivity

KW - \*intestine flora

KW - knowledge

KW - metabolic syndrome X

KW - microbial colonization

KW - non insulin dependent diabetes mellitus

KW - nonhuman

KW - physiological process

KW - recognition

KW - Saccharomyces boulardii

KW - sepsis

KW - sequence analysis

KW - antibiotic agent

KW - prebiotic agent

KW - probiotic agent

JF - Acta Gastroenterologica Latinoamericana

JA - Acta Gastroenterol. Latinoam.

LA - English

VL - 46

IS - 4

SP - 375

EP - 382

CY - Argentina

PB - Sociedad Argentina de Gastroenterologia (E-mail: secretaria@sage.org.ar)

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UR - http://www.actagastro.org/numeros-anteriores/2016/Vol-46-N4/Vol46N4-PDF14.pdf

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed17&NEWS=N&AN=614006657

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed17&AN=614006657Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Fernandez&issn=0300-9033&title=Acta+Gastroenterologica+Latinoamericana&atitle=Microbiota+intestinal+humana+-+Una+historia+de+vida%3A+Del+nacimiento+a+la+edad+adulta+%28Riviera+Maya%2C+Mexico+-+Junio+26%2C+2015%29&volume=46&issue=4&spage=375&epage=382&date=2016&doi=&pmid=&sid=OVID:embase

279.

TY - JOUR

DB - Embase

AN - 606687891

ID - 26432627 [https://www.ncbi.nlm.nih.gov/pubmed/?term=26432627]

T1 - Update on a proper use of systemic fluoroquinolones in adult patients (ciprofloxacin, levofloxacin, moxifloxacin, norfloxacin, ofloxacin, pefloxacin)

A1 - Chidiac C.

A1 - Cavallo J.D.

A1 - Cohen R.

A1 - Dupon M.

A1 - Galperine T.

A1 - Garraffo R.

A1 - Garo B.

A1 - Gauzit R.

A1 - Gavazzi G.

A1 - Kouzan S.

A1 - Varon E.

A1 - Lecompte T.

A1 - Leroy O.

A1 - Senneville E.

A1 - Tattevin P.

A1 - Thiebault-Bertrand A.

A1 - Voiriot P.

Y1 - 2015//

KW - abdominal infection/dt [Drug Therapy]

KW - acute diarrhea/dt [Drug Therapy]

KW - acute sinusitis/dt [Drug Therapy]

KW - adult

KW - aging

KW - antibacterial activity

KW - antibiotic prophylaxis

KW - antibiotic resistance

KW - article

KW - ascites/dt [Drug Therapy]

KW - bacterial meningitis/dt [Drug Therapy]

KW - bioterrorism

KW - bone infection/dt [Drug Therapy]

KW - breast feeding

KW - bronchopneumonia/dt [Drug Therapy]

KW - child health care

KW - community acquired pneumonia/dt [Drug Therapy]

KW - confusion/si [Side Effect]

KW - cystitis/dt [Drug Therapy]

KW - delirium/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - dizziness/si [Side Effect]

KW - drowsiness/si [Side Effect]

KW - drug absorption

KW - drug bioavailability

KW - drug blood level

KW - drug diffusion

KW - drug dose regimen

KW - drug excretion

KW - drug hypersensitivity/si [Side Effect]

KW - drug indication

KW - drug metabolism

KW - drug safety

KW - drug use

KW - endometritis/dt [Drug Therapy]

KW - febrile neutropenia/dt [Drug Therapy]

KW - gonococcal urethritis/dt [Drug Therapy]

KW - hallucination/si [Side Effect]

KW - headache/si [Side Effect]

KW - heart arrhythmia/si [Side Effect]

KW - hemolytic anemia/si [Side Effect]

KW - hospital acquired pneumonia/dt [Drug Therapy]

KW - human

KW - hyperglycemia/si [Side Effect]

KW - hypoglycemia/si [Side Effect]

KW - in vitro study

KW - infectious arthritis/dt [Drug Therapy]

KW - insomnia/si [Side Effect]

KW - intestine flora

KW - kidney failure

KW - legionnaire disease/dt [Drug Therapy]

KW - liver failure

KW - liver toxicity/si [Side Effect]

KW - meningococcosis/dt [Drug Therapy]

KW - mental disease/si [Side Effect]

KW - mutation

KW - myasthenia/si [Side Effect]

KW - myoclonus seizure/si [Side Effect]

KW - nausea/si [Side Effect]

KW - nonhuman

KW - obesity

KW - peripheral neuropathy/si [Side Effect]

KW - pharmacodynamics

KW - photosensitivity/si [Side Effect]

KW - postoperative infection/dt [Drug Therapy]

KW - postoperative infection/pc [Prevention]

KW - \*practice guideline

KW - pregnancy

KW - prostatitis/dt [Drug Therapy]

KW - pyelonephritis/dt [Drug Therapy]

KW - QT prolongation/si [Side Effect]

KW - restlessness/si [Side Effect]

KW - risk factor

KW - salpingitis/dt [Drug Therapy]

KW - seizure/si [Side Effect]

KW - shigellosis/dt [Drug Therapy]

KW - single drug dose

KW - skin infection/dt [Drug Therapy]

KW - soft tissue infection/dt [Drug Therapy]

KW - tendinitis/si [Side Effect]

KW - torsade des pointes/si [Side Effect]

KW - treatment duration

KW - tuberculosis/dt [Drug Therapy]

KW - typhoid fever/dt [Drug Therapy]

KW - urinary tract infection/dt [Drug Therapy]

KW - uterine cervicitis/dt [Drug Therapy]

KW - aminoglycoside antibiotic agent/cb [Drug Combination]

KW - aminoglycoside antibiotic agent/dt [Drug Therapy]

KW - beta lactam antibiotic/cb [Drug Combination]

KW - beta lactam antibiotic/dt [Drug Therapy]

KW - cephalosporin/cb [Drug Combination]

KW - cephalosporin/dt [Drug Therapy]

KW - \*ciprofloxacin/ae [Adverse Drug Reaction]

KW - \*ciprofloxacin/cr [Drug Concentration]

KW - \*ciprofloxacin/dt [Drug Therapy]

KW - \*ciprofloxacin/iv [Intravenous Drug Administration]

KW - \*ciprofloxacin/po [Oral Drug Administration]

KW - \*ciprofloxacin/pk [Pharmacokinetics]

KW - \*levofloxacin/ae [Adverse Drug Reaction]

KW - \*levofloxacin/cr [Drug Concentration]

KW - \*levofloxacin/dt [Drug Therapy]

KW - \*levofloxacin/iv [Intravenous Drug Administration]

KW - \*levofloxacin/po [Oral Drug Administration]

KW - \*levofloxacin/pk [Pharmacokinetics]

KW - macrolide/cb [Drug Combination]

KW - macrolide/dt [Drug Therapy]

KW - \*moxifloxacin/ae [Adverse Drug Reaction]

KW - \*moxifloxacin/cr [Drug Concentration]

KW - \*moxifloxacin/dt [Drug Therapy]

KW - \*moxifloxacin/iv [Intravenous Drug Administration]

KW - \*moxifloxacin/po [Oral Drug Administration]

KW - \*moxifloxacin/pk [Pharmacokinetics]

KW - \*norfloxacin/ae [Adverse Drug Reaction]

KW - \*norfloxacin/dt [Drug Therapy]

KW - \*norfloxacin/po [Oral Drug Administration]

KW - \*norfloxacin/pk [Pharmacokinetics]

KW - \*ofloxacin/ae [Adverse Drug Reaction]

KW - \*ofloxacin/cr [Drug Concentration]

KW - \*ofloxacin/dt [Drug Therapy]

KW - \*ofloxacin/iv [Intravenous Drug Administration]

KW - \*ofloxacin/po [Oral Drug Administration]

KW - \*ofloxacin/pk [Pharmacokinetics]

KW - \*pefloxacin/ae [Adverse Drug Reaction]

KW - \*pefloxacin/dt [Drug Therapy]

KW - \*pefloxacin/iv [Intravenous Drug Administration]

KW - \*pefloxacin/po [Oral Drug Administration]

KW - \*pefloxacin/pk [Pharmacokinetics]

KW - \*quinoline derived antiinfective agent/ae [Adverse Drug Reaction]

KW - \*quinoline derived antiinfective agent/cb [Drug Combination]

KW - \*quinoline derived antiinfective agent/cr [Drug Concentration]

KW - \*quinoline derived antiinfective agent/do [Drug Dose]

KW - \*quinoline derived antiinfective agent/dt [Drug Therapy]

KW - \*quinoline derived antiinfective agent/po [Oral Drug Administration]

KW - \*quinoline derived antiinfective agent/pk [Pharmacokinetics]

KW - \*quinoline derived antiinfective agent/pd [Pharmacology]

KW - rifampicin/cb [Drug Combination]

KW - rifampicin/dt [Drug Therapy]

KW - sparfloxacin/ae [Adverse Drug Reaction]

KW - trovafloxacin/ae [Adverse Drug Reaction]

XT - abdominal infection / drug therapy / ciprofloxacin

XT - abdominal infection / drug therapy / ofloxacin

XT - acute diarrhea / drug therapy / ciprofloxacin

XT - acute diarrhea / drug therapy / ofloxacin

XT - acute sinusitis / drug therapy / levofloxacin

XT - acute sinusitis / drug therapy / moxifloxacin

XT - ascites / drug therapy / ciprofloxacin

XT - ascites / drug therapy / norfloxacin

XT - ascites / drug therapy / ofloxacin

XT - bacterial meningitis / drug therapy / quinoline derived antiinfective agent

XT - bone infection / drug therapy / ciprofloxacin

XT - bone infection / drug therapy / levofloxacin

XT - bone infection / drug therapy / ofloxacin

XT - bronchopneumonia / drug therapy / levofloxacin

XT - bronchopneumonia / drug therapy / moxifloxacin

XT - community acquired pneumonia / drug therapy / cephalosporin

XT - community acquired pneumonia / drug therapy / levofloxacin

XT - confusion / side effect / quinoline derived antiinfective agent

XT - cystitis / drug therapy / ciprofloxacin

XT - cystitis / drug therapy / ofloxacin

XT - delirium / side effect / quinoline derived antiinfective agent

XT - diarrhea / side effect / quinoline derived antiinfective agent

XT - dizziness / side effect / quinoline derived antiinfective agent

XT - drowsiness / side effect / quinoline derived antiinfective agent

XT - drug hypersensitivity / side effect / quinoline derived antiinfective agent

XT - endometritis / drug therapy / ciprofloxacin

XT - endometritis / drug therapy / ofloxacin

XT - febrile neutropenia / drug therapy / quinoline derived antiinfective agent

XT - gonococcal urethritis / drug therapy / ciprofloxacin

XT - hallucination / side effect / quinoline derived antiinfective agent

XT - headache / side effect / quinoline derived antiinfective agent

XT - heart arrhythmia / side effect / quinoline derived antiinfective agent

XT - hemolytic anemia / side effect / quinoline derived antiinfective agent

XT - hospital acquired pneumonia / drug therapy / beta lactam antibiotic

XT - hyperglycemia / side effect / quinoline derived antiinfective agent

XT - hypoglycemia / side effect / quinoline derived antiinfective agent

XT - infectious arthritis / drug therapy / ciprofloxacin

XT - infectious arthritis / drug therapy / levofloxacin

XT - infectious arthritis / drug therapy / ofloxacin

XT - insomnia / side effect / quinoline derived antiinfective agent

XT - legionnaire disease / drug therapy / ciprofloxacin

XT - legionnaire disease / drug therapy / levofloxacin

XT - legionnaire disease / drug therapy / macrolide

XT - legionnaire disease / drug therapy / ofloxacin

XT - legionnaire disease / drug therapy / rifampicin

XT - liver toxicity / side effect / quinoline derived antiinfective agent

XT - liver toxicity / side effect / trovafloxacin

XT - meningococcosis / drug therapy / ciprofloxacin

XT - mental disease / side effect / quinoline derived antiinfective agent

XT - myasthenia / side effect / quinoline derived antiinfective agent

XT - myoclonus seizure / side effect / quinoline derived antiinfective agent

XT - nausea / side effect / quinoline derived antiinfective agent

XT - peripheral neuropathy / side effect / quinoline derived antiinfective agent

XT - photosensitivity / side effect / ciprofloxacin

XT - photosensitivity / side effect / moxifloxacin

XT - photosensitivity / side effect / ofloxacin

XT - photosensitivity / side effect / sparfloxacin

XT - postoperative infection / drug therapy / levofloxacin

XT - postoperative infection / drug therapy / ofloxacin

XT - prostatitis / drug therapy / aminoglycoside antibiotic agent

XT - pyelonephritis / drug therapy / aminoglycoside antibiotic agent

XT - pyelonephritis / drug therapy / ciprofloxacin

XT - pyelonephritis / drug therapy / levofloxacin

XT - QT prolongation / side effect / levofloxacin

XT - QT prolongation / side effect / norfloxacin

XT - QT prolongation / side effect / ofloxacin

XT - QT prolongation / side effect / quinoline derived antiinfective agent

XT - restlessness / side effect / quinoline derived antiinfective agent

XT - salpingitis / drug therapy / ciprofloxacin

XT - salpingitis / drug therapy / ofloxacin

XT - seizure / side effect / quinoline derived antiinfective agent

XT - shigellosis / drug therapy / ciprofloxacin

XT - shigellosis / drug therapy / ofloxacin

XT - skin infection / drug therapy / ofloxacin

XT - skin infection / drug therapy / pefloxacin

XT - soft tissue infection / drug therapy / ofloxacin

XT - soft tissue infection / drug therapy / pefloxacin

XT - tendinitis / side effect / pefloxacin

XT - tendinitis / side effect / quinoline derived antiinfective agent

XT - torsade des pointes / side effect / quinoline derived antiinfective agent

XT - tuberculosis / drug therapy / moxifloxacin

XT - tuberculosis / drug therapy / quinoline derived antiinfective agent

XT - typhoid fever / drug therapy / ciprofloxacin

XT - typhoid fever / drug therapy / ofloxacin

XT - urinary tract infection / drug therapy / ciprofloxacin

XT - urinary tract infection / drug therapy / levofloxacin

XT - uterine cervicitis / drug therapy / ciprofloxacin

XT - aminoglycoside antibiotic agent / drug combination / quinoline derived antiinfective agent

XT - aminoglycoside antibiotic agent / drug therapy / prostatitis

XT - aminoglycoside antibiotic agent / drug therapy / pyelonephritis

XT - beta lactam antibiotic / drug combination / quinoline derived antiinfective agent

XT - beta lactam antibiotic / drug therapy / hospital acquired pneumonia

XT - cephalosporin / drug combination / quinoline derived antiinfective agent

XT - cephalosporin / drug therapy / community acquired pneumonia

XT - ciprofloxacin / adverse drug reaction / photosensitivity

XT - ciprofloxacin / drug therapy / abdominal infection

XT - ciprofloxacin / drug therapy / acute diarrhea

XT - ciprofloxacin / drug therapy / ascites

XT - ciprofloxacin / drug therapy / bone infection

XT - ciprofloxacin / drug therapy / cystitis

XT - ciprofloxacin / drug therapy / endometritis

XT - ciprofloxacin / drug therapy / gonococcal urethritis

XT - ciprofloxacin / drug therapy / infectious arthritis

XT - ciprofloxacin / drug therapy / legionnaire disease

XT - ciprofloxacin / drug therapy / meningococcosis

XT - ciprofloxacin / drug therapy / pyelonephritis

XT - ciprofloxacin / drug therapy / salpingitis

XT - ciprofloxacin / drug therapy / shigellosis

XT - ciprofloxacin / drug therapy / typhoid fever

XT - ciprofloxacin / drug therapy / urinary tract infection

XT - ciprofloxacin / drug therapy / uterine cervicitis

XT - levofloxacin / adverse drug reaction / QT prolongation

XT - levofloxacin / drug therapy / acute sinusitis

XT - levofloxacin / drug therapy / bone infection

XT - levofloxacin / drug therapy / bronchopneumonia

XT - levofloxacin / drug therapy / community acquired pneumonia

XT - levofloxacin / drug therapy / infectious arthritis

XT - levofloxacin / drug therapy / legionnaire disease

XT - levofloxacin / drug therapy / postoperative infection

XT - levofloxacin / drug therapy / pyelonephritis

XT - levofloxacin / drug therapy / urinary tract infection

XT - macrolide / drug combination / quinoline derived antiinfective agent

XT - macrolide / drug therapy / legionnaire disease

XT - moxifloxacin / adverse drug reaction / photosensitivity

XT - moxifloxacin / drug therapy / acute sinusitis

XT - moxifloxacin / drug therapy / bronchopneumonia

XT - moxifloxacin / drug therapy / tuberculosis

XT - norfloxacin / adverse drug reaction / QT prolongation

XT - norfloxacin / drug therapy / ascites

XT - ofloxacin / adverse drug reaction / photosensitivity

XT - ofloxacin / adverse drug reaction / QT prolongation

XT - ofloxacin / drug therapy / abdominal infection

XT - ofloxacin / drug therapy / acute diarrhea

XT - ofloxacin / drug therapy / ascites

XT - ofloxacin / drug therapy / bone infection

XT - ofloxacin / drug therapy / cystitis

XT - ofloxacin / drug therapy / endometritis

XT - ofloxacin / drug therapy / infectious arthritis

XT - ofloxacin / drug therapy / legionnaire disease

XT - ofloxacin / drug therapy / postoperative infection

XT - ofloxacin / drug therapy / salpingitis

XT - ofloxacin / drug therapy / shigellosis

XT - ofloxacin / drug therapy / skin infection

XT - ofloxacin / drug therapy / soft tissue infection

XT - ofloxacin / drug therapy / typhoid fever

XT - pefloxacin / adverse drug reaction / tendinitis

XT - pefloxacin / drug therapy / skin infection

XT - pefloxacin / drug therapy / soft tissue infection

XT - quinoline derived antiinfective agent / adverse drug reaction / confusion

XT - quinoline derived antiinfective agent / adverse drug reaction / delirium

XT - quinoline derived antiinfective agent / adverse drug reaction / diarrhea

XT - quinoline derived antiinfective agent / adverse drug reaction / dizziness

XT - quinoline derived antiinfective agent / adverse drug reaction / drowsiness

XT - quinoline derived antiinfective agent / adverse drug reaction / drug hypersensitivity

XT - quinoline derived antiinfective agent / adverse drug reaction / hallucination

XT - quinoline derived antiinfective agent / adverse drug reaction / headache

XT - quinoline derived antiinfective agent / adverse drug reaction / heart arrhythmia

XT - quinoline derived antiinfective agent / adverse drug reaction / hemolytic anemia

XT - quinoline derived antiinfective agent / adverse drug reaction / hyperglycemia

XT - quinoline derived antiinfective agent / adverse drug reaction / hypoglycemia

XT - quinoline derived antiinfective agent / adverse drug reaction / insomnia

XT - quinoline derived antiinfective agent / adverse drug reaction / liver toxicity

XT - quinoline derived antiinfective agent / adverse drug reaction / mental disease

XT - quinoline derived antiinfective agent / adverse drug reaction / myasthenia

XT - quinoline derived antiinfective agent / adverse drug reaction / myoclonus seizure

XT - quinoline derived antiinfective agent / adverse drug reaction / nausea

XT - quinoline derived antiinfective agent / adverse drug reaction / peripheral neuropathy

XT - quinoline derived antiinfective agent / adverse drug reaction / QT prolongation

XT - quinoline derived antiinfective agent / adverse drug reaction / restlessness

XT - quinoline derived antiinfective agent / adverse drug reaction / seizure

XT - quinoline derived antiinfective agent / adverse drug reaction / tendinitis

XT - quinoline derived antiinfective agent / adverse drug reaction / torsade des pointes

XT - quinoline derived antiinfective agent / drug combination / aminoglycoside antibiotic agent

XT - quinoline derived antiinfective agent / drug combination / beta lactam antibiotic

XT - quinoline derived antiinfective agent / drug combination / cephalosporin

XT - quinoline derived antiinfective agent / drug combination / macrolide

XT - quinoline derived antiinfective agent / drug combination / rifampicin

XT - quinoline derived antiinfective agent / drug therapy / bacterial meningitis

XT - quinoline derived antiinfective agent / drug therapy / febrile neutropenia

XT - quinoline derived antiinfective agent / drug therapy / tuberculosis

XT - rifampicin / drug combination / quinoline derived antiinfective agent

XT - rifampicin / drug therapy / legionnaire disease

XT - sparfloxacin / adverse drug reaction / photosensitivity

XT - trovafloxacin / adverse drug reaction / liver toxicity

JF - Medecine et Maladies Infectieuses

JA - Med. Mal. Infect.

LA - English

VL - 45

IS - 9

SP - 348

EP - 373

CY - France

PB - Elsevier Masson SAS (62 rue Camille Desmoulins, Issy les Moulineaux Cedex 92442, France)

SN - 0399-077X

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UR - http://www.elsevier.com/journals/medecine-et-maladies-infectieuses/0399-077X

DO - https://dx.doi.org/10.1016/j.medmal.2015.07.003

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=606687891

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1016%2fj.medmal.2015.07.003Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Chidiac&issn=0399-077X&title=Medecine+et+Maladies+Infectieuses&atitle=Update+on+a+proper+use+of+systemic+fluoroquinolones+in+adult+patients+%28ciprofloxacin%2C+levofloxacin%2C+moxifloxacin%2C+norfloxacin%2C+ofloxacin%2C+pefloxacin%29&volume=45&issue=9&spage=348&epage=373&date=2015&doi=10.1016%2Fj.medmal.2015.07.003&pmid=26432627&sid=OVID:embase

280.

TY - JOUR

DB - Embase

AN - 607461523

ID - 26663857 [https://www.ncbi.nlm.nih.gov/pubmed/?term=26663857]

T1 - The very low birth weight infant microbiome and childhood health

A1 - Groer M.W.

A1 - Gregory K.E.

A1 - Louis-Jacques A.

A1 - Thibeau S.

A1 - Walker W.A.

Y1 - 2015//

N2 - This review describes current understandings about the nature of the very low birth weight infant (VLBW) gut microbiome. VLBW infants often experience disruptive pregnancies and births, and prenatal factors can influence the maturity of the gut and immune system, and disturb microbial balance and succession. Many VLBWs experience rapid vaginal or Caesarean births. After birth these infants often have delays in enteral feeding, and many receive little or no mother's own milk. Furthermore the stressors of neonatal life in the hospital environment, common use of antibiotics, invasive procedures and maternal separation can contribute to dysbiosis. These infants experience gastrointestinal dysfunction, sepsis, transfusions, necrotizing enterocolitis, oxygen toxicity, and other pathophysiological consditions that affect the normal microbiota. The skin is susceptible to dysbiosis, due to its fragility and contact with NICU organisms. Dysbiosis in early life may resolve but little is known about the timing of the development of the signature gut microbiome in VLBWs. Dysbiosis has been associated with a number of physical and behavioral problems, including autism spectrum disorders, allergy and asthma, gastrointestinal disease, obesity, depression, and anxiety. Dysbiosis may be prevented or ameliorated in part by prenatal care, breast milk feeding, skin to skin contact, use of antibiotics only when necessary, and vigilance during infancy and early childhood.Copyright © 2015 Wiley Periodicals, Inc.

KW - allergy/et [Etiology]

KW - antibiotic therapy

KW - anxiety disorder/et [Etiology]

KW - article

KW - asthma/et [Etiology]

KW - autism/et [Etiology]

KW - birth

KW - breast milk

KW - cesarean section

KW - \*child health

KW - childhood disease

KW - childhood obesity

KW - depression/et [Etiology]

KW - dietary intake

KW - digestive system function disorder

KW - drug use

KW - dysbiosis

KW - enteric feeding

KW - gastrointestinal disease/et [Etiology]

KW - human

KW - immune system

KW - infant

KW - infant feeding

KW - \*intestine flora

KW - invasive procedure

KW - maternal deprivation

KW - mental disease

KW - necrotizing enterocolitis

KW - obesity/et [Etiology]

KW - oxygen toxicity

KW - pregnancy complication

KW - prematurity

KW - prenatal care

KW - prenatal period

KW - priority journal

KW - problem behavior/et [Etiology]

KW - sepsis

KW - skin flora

KW - \*very low birth weight

JF - Birth Defects Research Part C - Embryo Today: Reviews

JA - Birth Defects Res. Part C Embryo Today Rev.

LA - English

VL - 105

IS - 4

SP - 252

EP - 264

CY - United States

PB - John Wiley and Sons Inc. (P.O.Box 18667, Newark NJ 07191-8667, United States)

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SN - 1542-9768

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UR - http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1542-9768

DO - https://dx.doi.org/10.1002/bdrc.21115

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=607461523

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1002%2fbdrc.21115Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Groer&issn=1542-975X&title=Birth+Defects+Research+Part+C+-+Embryo+Today%3A+Reviews&atitle=The+very+low+birth+weight+infant+microbiome+and+childhood+health&volume=105&issue=4&spage=252&epage=264&date=2015&doi=10.1002%2Fbdrc.21115&pmid=26663857&sid=OVID:embase

281.

TY - JOUR

DB - Embase

AN - 607266842

ID - 26209321 [https://www.ncbi.nlm.nih.gov/pubmed/?term=26209321]

T1 - Resolution of a manic episode treated with activated charcoal: Evidence for a brain-gut axis in bipolar disorder

A1 - Hamdani N.

A1 - Boukouaci W.

A1 - Hallouche M.R.

A1 - Charron D.

A1 - Krishnamoorthy R.

A1 - Leboyer M.

A1 - Tamouza R.

Y1 - 2015//

KW - adult

KW - agitation

KW - \*bipolar disorder/di [Diagnosis]

KW - body mass

KW - brain disease/di [Diagnosis]

KW - case report

KW - delusion/di [Diagnosis]

KW - drug efficacy

KW - DSM-IV

KW - \*evoked response

KW - female

KW - gastrectomy

KW - hallucination/di [Diagnosis]

KW - human

KW - inflammation

KW - intensive care

KW - intestine flora

KW - irritability

KW - letter

KW - logorrhea

KW - maintenance therapy

KW - \*mania/di [Diagnosis]

KW - \*mania/dt [Drug Therapy]

KW - mania/dt [Drug Therapy]

KW - middle aged

KW - morbid obesity/su [Surgery]

KW - neurologic examination

KW - nonhuman

KW - patient monitoring

KW - Positive and Negative Syndrome Scale

KW - psychometry

KW - treatment duration

KW - Wernicke Korsakoff syndrome/di [Diagnosis]

KW - Young Mania Rating Scale

KW - \*activated carbon/dt [Drug Therapy]

KW - \*activated carbon/po [Oral Drug Administration]

KW - \*activated carbon/pd [Pharmacology]

KW - CD14 antigen/ec [Endogenous Compound]

KW - immunoglobulin A/ec [Endogenous Compound]

KW - interleukin 17/ec [Endogenous Compound]

KW - interleukin 1beta/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - macrophage inflammatory protein 1alpha/ec [Endogenous Compound]

KW - macrophage inflammatory protein 1beta/ec [Endogenous Compound]

KW - psychotropic agent

KW - tumor necrosis factor alpha/ec [Endogenous Compound]

KW - \*brain-gut axis

XT - mania / drug therapy / activated carbon

XT - activated carbon / drug therapy / mania

JF - Australian and New Zealand Journal of Psychiatry

JA - Aust. New Zealand J. Psychiatry

LA - English

VL - 49

IS - 12

SP - 1221

EP - 1223

CY - United Kingdom

PB - Taylor and Francis Ltd (E-mail: info@sagepub.co.uk)

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SN - 1440-1614

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UR - http://anp.sagepub.com/content/by/year

DO - https://dx.doi.org/10.1177/0004867415595873

PT - Letter

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=607266842

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1177%2f0004867415595873Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Hamdani&issn=0004-8674&title=Australian+and+New+Zealand+Journal+of+Psychiatry&atitle=Resolution+of+a+manic+episode+treated+with+activated+charcoal%3A+Evidence+for+a+brain-gut+axis+in+bipolar+disorder&volume=49&issue=12&spage=1221&epage=1223&date=2015&doi=10.1177%2F0004867415595873&pmid=26209321&sid=OVID:embase

282.

TY - JOUR

DB - Embase

AN - 605915381

ID - 25694210 [https://www.ncbi.nlm.nih.gov/pubmed/?term=25694210]

T1 - Role of FODMAPs in Patients With Irritable Bowel Syndrome

A1 - Mansueto P.

A1 - Seidita A.

A1 - D'alcamo A.

A1 - Carroccio A.

Y1 - 2015//

N2 - Irritable bowel syndrome (IBS) is a condition characterized by abdominal pain, bloating, flatus, and altered bowel habits. The role of dietary components in inducing IBS symptoms is difficult to explore. To date, foods are not considered a cause but rather symptom-triggering factors. Particular interest has been given to the so-called FODMAPs (fermentable oligo-, di-, and monosaccharides and polyols). We aimed to summarize the evidence from the most common approaches to manage suspected food intolerance in IBS, with a particular interest in the role of FODMAPs and the effects of a low FODMAP diet. We reviewed literature, consulting PubMed and Medline by using the search terms FODMAP(s), fructose, lactose, fructans, galactans, polyols (sorbitol, mannitol, maltitol, xylitol, erythritol, polydextrose, and isomalt), irritable bowel syndrome, and functional gastrointestinal symptoms. FODMAP-restricted diets have been used for a long time to manage patients with IBS. The innovation in the so-called FODMAP concept is that a global restriction should have a more consistent effect than a limited one in preventing abdominal distension. Even though all the potential low FODMAP diets provide good relief of symptoms in many patients, there is just a little relief in others. Several studies highlight the role of low FODMAP diets to improve symptoms in patients with IBS. The evidence on this dietary approach supports the hypothesis that a low FODMAP diet should be the first dietary approach. However, many points remain to be clarified, including the evaluation of possibly significant nutrition concerns.Copyright © 2015 American Society for Parenteral and Enteral Nutrition.

KW - abdominal pain

KW - bloating

KW - \*carbohydrate intolerance/di [Diagnosis]

KW - \*carbohydrate intolerance/th [Therapy]

KW - colon injury

KW - colon mucosa

KW - depression

KW - dietary compliance

KW - disease association

KW - enteric feeding

KW - evidence based medicine

KW - expired air

KW - feeding behavior

KW - fermentation

KW - food composition

KW - food frequency questionnaire

KW - gastrointestinal motility

KW - heartburn

KW - human

KW - intestine flora

KW - intestine mucosa permeability

KW - \*irritable colon/et [Etiology]

KW - lactose intolerance

KW - lethargy

KW - lifestyle

KW - \*low carbohydrate diet

KW - malabsorption

KW - nausea

KW - nonhuman

KW - nutrition education

KW - nutritional assessment

KW - pathogenesis

KW - patient education

KW - randomized controlled trial (topic)

KW - review

KW - small intestine

KW - systematic review

KW - water content

KW - wheat allergy

KW - \*disaccharide

KW - fructose

KW - hydrogen

KW - lactose

KW - \*monosaccharide

KW - \*oligosaccharide

KW - \*polyol

KW - \*low FODMAP diet

JF - Nutrition in Clinical Practice

JA - Nutr. Clin. Prac.

LA - English

VL - 30

IS - 5

SP - 665

EP - 682

CY - United States

PB - SAGE Publications Inc. (E-mail: claims@sagepub.com)

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SN - 1941-2452

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UR - http://www.sagepub.com/journalsProdDesc.nav?prodId=Journal201896

DO - https://dx.doi.org/10.1177/0884533615569886

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=605915381

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1177%2f0884533615569886Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mansueto&issn=0884-5336&title=Nutrition+in+Clinical+Practice&atitle=Role+of+FODMAPs+in+Patients+With+Irritable+Bowel+Syndrome&volume=30&issue=5&spage=665&epage=682&date=2015&doi=10.1177%2F0884533615569886&pmid=25694210&sid=OVID:embase

283.

TY - JOUR

DB - Embase

AN - 605861431

ID - 26105697 [https://www.ncbi.nlm.nih.gov/pubmed/?term=26105697]

T1 - Gut microbiota-derived outer membrane vesicles: Under-recognized major players in health and disease?

A1 - Muraca M.

A1 - Putignani L.

A1 - Fierabracci A.

A1 - Teti A.

A1 - Perilongo G.

Y1 - 2015//

N2 - The role of gut microbiota both in human health and in disease is the subject of intense investigation. The interactions between gut microbiota and the host involve a complex network of metabolic pathways and of biologically active molecules secreted by intestinal bacteria, some of which are packed into nanoparticles known as outer membrane vesicles (OMVs). OMVs can enter the systemic circulation and be delivered to different organs including the brain, eliciting a variety of immunological and metabolic responses. The resulting acute and chronic effects are largely unknown. However, recent studies suggest that OMVs could play a critical role in immune homeostasis and in acute inflammatory reactions. Moreover, the "leaky gut" hypothesis has recently emphasized the role of the brain-gut axis in the pathogenesis of major depressive disorders, pointing to the importance of bacteria and of bacterial products delivered into the circulation in eliciting the low-grade inflammatory response associated with this syndrome. Interestingly, experimental evidence suggests that OMVs can also affect the permeability of the blood-brain barrier. This review also highlights the importance of investigating possible influences of OMVs on the development of the immune system.Copyright © 2015, Discovery Medicine.

KW - antiinflammatory activity

KW - article

KW - autophagy

KW - blood brain barrier

KW - cell expansion

KW - cell maturation

KW - cell proliferation

KW - depression

KW - dysbiosis

KW - experimental colitis

KW - foam cell

KW - gene transfer

KW - homeostasis

KW - human

KW - immune response

KW - immunity

KW - inflammation

KW - \*intestine flora

KW - lymphoid cell

KW - major depression

KW - \*membrane vesicle

KW - microbiome

KW - necrotizing enterocolitis

KW - newborn sepsis

KW - psychomotor disorder

KW - regulatory T lymphocyte

KW - T lymphocyte

KW - very low birth weight

KW - virulence

KW - adenosine triphosphate/ec [Endogenous Compound]

KW - cytoplasm protein/ec [Endogenous Compound]

KW - immunoglobulin enhancer binding protein/ec [Endogenous Compound]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - leukotoxin/ec [Endogenous Compound]

KW - probiotic agent/ec [Endogenous Compound]

KW - toll like receptor 9/ec [Endogenous Compound]

KW - tumor necrosis factor alpha/ec [Endogenous Compound]

JF - Discovery Medicine

JA - Discov. Med.

LA - English

VL - 19

IS - 106

SP - 343

EP - 348

CY - United States

PB - Solariz, Inc. (E-mail: ops@solariz.info)

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SN - 1944-7930

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UR - http://www.discoverymedicine.com/Maurizio-Muraca/2015/05/gut-microbiota-derived-outer-membrane-vesicles-under-recognized-major-players-in-health-and-disease/

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=605861431

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&AN=605861431Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Muraca&issn=1539-6509&title=Discovery+Medicine&atitle=Gut+microbiota-derived+outer+membrane+vesicles%3A+Under-recognized+major+players+in+health+and+disease%3F&volume=19&issue=106&spage=343&epage=348&date=2015&doi=&pmid=26105697&sid=OVID:embase

284.

TY - JOUR

DB - Embase

AN - 602794172

ID - 25732745 [https://www.ncbi.nlm.nih.gov/pubmed/?term=25732745]

T1 - Epidemiology and risk factors for IBD

A1 - Ananthakrishnan A.N.

Y1 - 2015//

N2 - IBD, comprising Crohn's disease and ulcerative colitis, is a chronic immunologically mediated disease at the intersection of complex interactions between genetics, environment and gut microbiota. Established high-prevalence populations of IBD in North America and Europe experienced the steepest increase in incidence towards the second half of the twentieth century. Furthermore, populations previously considered 'low risk' (such as in Japan and India) are witnessing an increase in incidence. Potentially relevant environmental influences span the spectrum of life from mode of childbirth and early-life exposures (including breastfeeding and antibiotic exposure in infancy) to exposures later on in adulthood (including smoking, major life stressors, diet and lifestyle). Data support an association between smoking and Crohn's disease whereas smoking cessation, but not current smoking, is associated with an increased risk of ulcerative colitis. Dietary fibre (particularly fruits and vegetables), saturated fats, depression and impaired sleep, and low vitamin D levels have all been associated with incident IBD. Interventional studies assessing the effects of modifying these risk factors on natural history and patient outcomes are an important unmet need. In this Review, the changing epidemiology of IBD, mechanisms behind various environmental associations and interventional studies to modify risk factors and disease course are discussed.Copyright © 2015 Macmillan Publishers Limited.

KW - appendectomy

KW - biological therapy

KW - counseling

KW - Crohn disease/dt [Drug Therapy]

KW - Crohn disease/ep [Epidemiology]

KW - Crohn disease/et [Etiology]

KW - Crohn disease/th [Therapy]

KW - diet therapy

KW - dietary fiber

KW - enteric feeding

KW - environmental factor

KW - ethnic difference

KW - exercise

KW - fat intake

KW - gastrointestinal surgery

KW - genetic association

KW - genetic epidemiology

KW - help seeking behavior

KW - high risk population

KW - human

KW - hygiene

KW - incidence

KW - infection

KW - \*inflammatory bowel disease/dt [Drug Therapy]

KW - \*inflammatory bowel disease/ep [Epidemiology]

KW - \*inflammatory bowel disease/et [Etiology]

KW - \*inflammatory bowel disease/si [Side Effect]

KW - \*inflammatory bowel disease/su [Surgery]

KW - \*inflammatory bowel disease/th [Therapy]

KW - inflammatory bowel disease/dt [Drug Therapy]

KW - inflammatory bowel disease/si [Side Effect]

KW - innate immunity

KW - intestine flora

KW - lifestyle

KW - migration

KW - nonhuman

KW - pathogenesis

KW - prevalence

KW - priority journal

KW - psychotherapy

KW - review

KW - risk factor

KW - sleep

KW - smoking

KW - smoking cessation

KW - stress

KW - stress management

KW - trend study

KW - twin concordance

KW - ulcerative colitis/dt [Drug Therapy]

KW - ulcerative colitis/ep [Epidemiology]

KW - ulcerative colitis/et [Etiology]

KW - ulcerative colitis/th [Therapy]

KW - urban rural difference

KW - vegetarian diet

KW - acetylsalicylic acid/ae [Adverse Drug Reaction]

KW - antibiotic agent

KW - biological product/dt [Drug Therapy]

KW - colecalciferol/ct [Clinical Trial]

KW - colecalciferol/cm [Drug Comparison]

KW - colecalciferol/dt [Drug Therapy]

KW - corticosteroid/dt [Drug Therapy]

KW - immunosuppressive agent/dt [Drug Therapy]

KW - iron

KW - nonsteroid antiinflammatory agent/ae [Adverse Drug Reaction]

KW - omega 3 fatty acid/ct [Clinical Trial]

KW - omega 3 fatty acid/cm [Drug Comparison]

KW - omega 3 fatty acid/dt [Drug Therapy]

KW - oral contraceptive agent/ae [Adverse Drug Reaction]

KW - placebo

KW - steroid/dt [Drug Therapy]

KW - vitamin D

KW - zinc

XT - Crohn disease / drug therapy / colecalciferol

XT - Crohn disease / drug therapy / corticosteroid

XT - Crohn disease / drug therapy / immunosuppressive agent

XT - Crohn disease / drug therapy / omega 3 fatty acid

XT - Crohn disease / drug therapy / steroid

XT - inflammatory bowel disease / drug therapy / biological product

XT - inflammatory bowel disease / side effect / acetylsalicylic acid

XT - inflammatory bowel disease / side effect / nonsteroid antiinflammatory agent

XT - inflammatory bowel disease / side effect / oral contraceptive agent

XT - ulcerative colitis / drug therapy / omega 3 fatty acid

XT - acetylsalicylic acid / adverse drug reaction / inflammatory bowel disease

XT - biological product / drug therapy / inflammatory bowel disease

XT - colecalciferol / drug comparison / placebo

XT - colecalciferol / drug therapy / Crohn disease

XT - corticosteroid / drug therapy / Crohn disease

XT - immunosuppressive agent / drug therapy / Crohn disease

XT - nonsteroid antiinflammatory agent / adverse drug reaction / inflammatory bowel disease

XT - omega 3 fatty acid / drug comparison / placebo

XT - omega 3 fatty acid / drug therapy / Crohn disease

XT - omega 3 fatty acid / drug therapy / ulcerative colitis

XT - oral contraceptive agent / adverse drug reaction / inflammatory bowel disease

XT - steroid / drug therapy / Crohn disease

JF - Nature Reviews Gastroenterology and Hepatology

JA - Nat. Rev. Gastroenterol. Hepatol.

LA - English

VL - 12

IS - 4

SP - 205

EP - 217

CY - United Kingdom

PB - Nature Publishing Group (Houndmills, Basingstoke, Hampshire RG21 6XS, United Kingdom)

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SN - 1759-5053

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UR - http://www.nature.com/nrgastro/index.html

DO - https://dx.doi.org/10.1038/nrgastro.2015.34

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=602794172

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1038%2fnrgastro.2015.34Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ananthakrishnan&issn=1759-5045&title=Nature+Reviews+Gastroenterology+and+Hepatology&atitle=Epidemiology+and+risk+factors+for+IBD&volume=12&issue=4&spage=205&epage=217&date=2015&doi=10.1038%2Fnrgastro.2015.34&pmid=25732745&sid=OVID:embase

285.

TY - JOUR

DB - Embase

AN - 605449812

T1 - Prenatal stress-induced alterations in major physiological systems correlate with gut microbiota composition in adulthood

A1 - Golubeva A.V.

A1 - Crampton S.

A1 - Desbonnet L.

A1 - Edge D.

A1 - O'Sullivan O.

A1 - Lomasney K.W.

A1 - Zhdanov A.V.

A1 - Crispie F.

A1 - Moloney R.D.

A1 - Borre Y.E.

A1 - Cotter P.D.

A1 - Hyland N.P.

A1 - O'Halloran K.D.

A1 - Dinan T.G.

A1 - O'Keeffe G.W.

A1 - Cryan J.F.

Y1 - 2015//

N2 - Early-life adverse experiences, including prenatal stress (PNS), are associated with a higher prevalence of neurodevelopmental, cardiovascular and metabolic disorders in affected offspring. Here, in a rat model of chronic PNS, we investigate the impact of late gestational stress on physiological outcomes in adulthood. Sprague-Dawley pregnant dams were subjected to repeated restraint stress from embryonic day 14 to day 20, and their male offspring were assessed at 4 months of age. PNS induced an exaggeration of the hypothalamic-pituitary-adrenal (HPA) axis response to stress, as well as an elevation of blood pressure and impairment of cognitive function. Altered respiratory control was also observed, as demonstrated by increased variability in basal respiratory frequency and abnormal frequency responses to both hypoxic and hypercapnic challenges. PNS also affected gastrointestinal neurodevelopment and function, as measured by a decrease in the innervation density of distal colon and an increase in the colonic secretory response to catecholaminergic stimulation. Finally, PNS induced long lasting alterations in the intestinal microbiota composition. 16S rRNA gene 454 pyrosequencing revealed a strong trend towards decreased numbers of bacteria in the Lactobacillus genus, accompanied by elevated abundance of the Oscillibacter, Anaerotruncus and Peptococcus genera in PNS animals. Strikingly, relative abundance of distinct bacteria genera significantly correlated with certain respiratory parameters and the responsiveness of the HPA axis to stress. Together, these findings provide novel evidence that PNS induces long-term maladaptive alterations in the gastrointestinal and respiratory systems, accompanied by hyper-responsiveness to stress and alterations in the gut microbiota.Copyright © 2015 Elsevier Ltd.

KW - adult

KW - animal experiment

KW - animal model

KW - animal tissue

KW - anxiety

KW - article

KW - bacterial count

KW - bacterium

KW - breathing rate

KW - cognitive defect

KW - colonic secretion

KW - controlled study

KW - corticosterone blood level

KW - descending colon

KW - elevated blood pressure

KW - embryo

KW - ex vivo study

KW - female

KW - hypercapnia

KW - hypothalamus hypophysis adrenal system

KW - hypoxia

KW - immobilization stress

KW - \*intestine flora

KW - intestine innervation

KW - Lactobacillus

KW - male

KW - memory disorder

KW - nonhuman

KW - Peptococcus

KW - population abundance

KW - \*prenatal stress

KW - priority journal

KW - pyrosequencing

KW - rat

KW - respiration control

KW - corticosterone/ec [Endogenous Compound]

KW - RNA 16S

KW - Anaerotruncus

KW - Oscillibacter

JF - Psychoneuroendocrinology

JA - Psychoneuroendocrinology

LA - English

VL - 60

SP - 58

EP - 74

CY - United Kingdom

PB - Elsevier Ltd

SN - 0306-4530

SN - 1873-3360

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UR - https://www.elsevier.com/locate/psyneuen

DO - https://dx.doi.org/10.1016/j.psyneuen.2015.06.002

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=605449812

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&DO=10.1016%2fj.psyneuen.2015.06.002Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Golubeva&issn=0306-4530&title=Psychoneuroendocrinology&atitle=Prenatal+stress-induced+alterations+in+major+physiological+systems+correlate+with+gut+microbiota+composition+in+adulthood&volume=60&issue=&spage=58&epage=74&date=2015&doi=10.1016%2Fj.psyneuen.2015.06.002&pmid=&sid=OVID:embase

286.

TY - JOUR

DB - Embase

AN - 71977423

T1 - Shock Society 38th Annual Conference on Shock

T3 - 38th Annual Conference on Shock of the Shock Society. Denver, CO United States.

T3 - (var.pagings).

A1 - Anonymous.

Y1 - 2015//

N2 - The proceedings contain 257 papers. The topics discussed include: the genomic response after burn injury predicts organ dysfunction and mortality; characterization of microbiome in critically ill patients and relationship to clinical outcome: the ICU microbiome multi-center trial project; interleukin (IL)-15 facilitates the pathogenesis of CLP-induced septic shock by activation of NK, NKT and memory CD8+ T lymphocytes; activation of sirtuin 1/3 protects against hemorrhagic shock injury by retaining mitochondrial function; intraoperative hyperoxic reperfusion of the brain and ICU delirium; differential susceptibility of human sp-b genetic variants on lung injury caused by bacterial pneumonia and the effect of chemically modified curcumin; hemodynamic effects of blood pressure-targeted stepwise resuscitation in swine hemorrhagic shock model; and five-year outcomes after long-term oxandrolone administration in severely burned children: a randomized clinical trial of safety and efficacy.

KW - \*society

KW - human

KW - microbiome

KW - hemorrhagic shock

KW - clinical trial (topic)

KW - burn

KW - T lymphocyte

KW - pathogenesis

KW - multicenter study

KW - safety

KW - lung injury

KW - memory

KW - bacterial pneumonia

KW - blood pressure

KW - resuscitation

KW - clinical trial

KW - mortality

KW - genetic variability

KW - delirium

KW - septic shock

KW - brain

KW - reperfusion

KW - hemodynamics

KW - critically ill patient

KW - pig

KW - model

KW - child

KW - injury

KW - CD8 antigen

KW - curcumin

KW - sirtuin

KW - oxandrolone

KW - interleukin 15

JF - Shock

JA - Shock

LA - English

VL - 43

IS - 6 SUPPL. 1

SP -

PB - Lippincott Williams and Wilkins

SN - 1073-2322

PT - Conference Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=71977423

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&AN=71977423Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=&issn=1073-2322&title=Shock&atitle=Shock+Society+38th+Annual+Conference+on+Shock&volume=43&issue=6+SUPPL.+1&spage=&epage=&date=2015&doi=&pmid=&sid=OVID:embase

287.

TY - JOUR

DB - Embase

AN - 71798151

T1 - Genetic modifier of the gut microbiome, GVHD and bacterial translocation following HSCT

T3 - 2015 BMT Tandem Meetings. San Diego, CA United States.

T3 - (var.pagings).

A1 - Rayes A.

A1 - Morrow A.L.

A1 - Ward D.V.

A1 - Payton L.R.

A1 - Lake K.E.

A1 - Lane A.

A1 - Davies S.M.

Y1 - 2015//

N2 - The human gut microbiome is involved in vital biological functions such as maintenance of immune homeostasis, modulation of intestinal development and enhanced metabolic capabilities. Disturbances of intestinal microbiota have been associated with development and progression of inflammatory conditions including GVHD. Non-secretor individuals do not express the H antigen on mucosal surfaces and body fluids due to a homozygous single nucleotide polymorphism in the fucosyltransferase 2 (FUT2) gene (428G>A) and FUT2 genotype has been shown to modify the gut microbiome. We hypothesized that FUT2 genotype influences risk of GVHD and bacterial translocation following allogeneic HSCT. FUT2 genotype was determined in 150 consecutive patients receiving allogeneic HSCT at our center. We abstracted clinical characteristics and outcomes from the transplant database. Median age at transplantation was 6.31 years and male/female ratio was 97/53. Genetic analysis revealed 23% recipients had A/A genotype (n=34), 52% A/G genotype (n=78) and 25% G/G genotype (n=38); Hardy Weinberg equilibrium was confirmed. Hematologicmalignancies comprised 30% (n=45), 29% immune deficiencies (n=43), 22% bone marrow failure (n=33), 12% hemophagocytic lymphohistiocytosis (HLH) (n=18), 4% metabolic diseases (n=6), 3% hemoglobinopathies (n=4), and one patient with Evan's syndrome. 54% received myeloablative conditioning (n=81), while 46% received reduced intensity conditioning (n=68). Stem cell source was bone marrow in 81% (n=122), peripheral blood stem cells in 11% (n=16), cord blood in 7% (n=11), and one patient received both bone marrow and cord blood from a sibling donor. Among donors, 29% were matched sibling donors (n=43), 49% matched unrelated or other family member donors (n=74) and 22% were mismatched donors (n=33). Acute GVHD occurred in 36% of patients (n=54). Cumulative risk of any acute GVHD varied by FUT2 genotype with decreased risk in those with A/A genotype and increased risk in those with G/G genotype (p=0.04) (Fig. 1). A/A genotype (OR=0.4 p-value=0.046), myeloablation (OR=1.99 p-value=0.029) and matched sibling donor (OR=0.41 p-value=0.026) were identified to be significant GVHD risk factors in multivariate analysis. Bacteremia occurred in 34% of patients (n=51), and in contrast to our findings in GVHD cumulative incidence was increased in A/A genotype (p-value=0.01) (Fig. 1). A/A genotype (OR=3.94 p value =0.0047) and A/G genotype (OR=2.46 p-value=0.05) were associated with increased risk in multivariate analysis. FUT2 genotype influences risk of acute GVHD and bacteremia following HSCT. We hypothesize that the mechanism involves altered composition and diversity of gut microbiome, and limited data indicate increased diversity of the gut microbiome in the A/A genotype, but this requires additional studies.

KW - \*microbiome

KW - \*intestine

KW - \*bacterial translocation

KW - genotype

KW - human

KW - statistical significance

KW - donor

KW - risk

KW - patient

KW - sibling

KW - multivariate analysis

KW - bone marrow

KW - transplantation

KW - umbilical cord blood

KW - bacteremia

KW - hemophagocytic syndrome

KW - body fluid

KW - immune deficiency

KW - recipient

KW - inflammation

KW - genetic analysis

KW - risk factor

KW - data base

KW - biological functions

KW - peripheral blood stem cell

KW - intestine flora

KW - gene

KW - modulation

KW - stem cell

KW - reduced intensity conditioning

KW - single nucleotide polymorphism

KW - myeloablative conditioning

KW - hemoglobinopathy

KW - metabolic disorder

KW - homeostasis

KW - bone marrow depression

KW - autoimmune hemolytic anemia

KW - antigen

KW - fucosyltransferase

JF - Biology of Blood and Marrow Transplantation

JA - Biol. Blood Marrow Transplant.

LA - English

VL - 21

IS - 2 SUPPL. 1

SP - S105

PB - Elsevier Inc.

SN - 1083-8791

AD - A. Rayes, Bone Marrow Transplantation and Immune Deficiency, Cincinnati Children's Hospital Medical Center, Cincinnati, OH, United States

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M1 - (Ward) Broad Institute, Cambridge, MA, United States

M1 - (Lane) Division of Biostatistics and Epidemiology, Cincinnati Children's Hospital, Medical Center, Cincinnati, OH, United States

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed16&NEWS=N&AN=71798151

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed16&AN=71798151Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rayes&issn=1083-8791&title=Biology+of+Blood+and+Marrow+Transplantation&atitle=Genetic+modifier+of+the+gut+microbiome%2C+GVHD+and+bacterial+translocation+following+HSCT&volume=21&issue=2+SUPPL.+1&spage=S105&epage=&date=2015&doi=&pmid=&sid=OVID:embase

288.

TY - JOUR

DB - Embase

AN - 600451144

ID - 25253977 [https://www.ncbi.nlm.nih.gov/pubmed/?term=25253977]

T1 - A case of Clostridium difficile infection complicated by acute respiratory distress syndrome treated with fecal microbiota transplantation

A1 - Kim J.E.

A1 - Gweon T.-G.

A1 - Yeo C.D.

A1 - Cho Y.-S.

A1 - Kim G.J.

A1 - Kim J.Y.

A1 - Kim J.W.

A1 - Kim H.

A1 - Lee H.W.

A1 - Lim T.

A1 - Ham H.

A1 - Oh H.J.

A1 - Lee Y.

A1 - Byeon J.

A1 - Park S.S.

Y1 - 2014//

N2 - Acute respiratory distress syndrome is a life-threatening disorder caused mainly by pneumonia. Clostridium difficile infection (CDI) is a common nosocomial diarrheal disease. Disruption of normal intestinal flora by antibiotics is the main risk factor for CDI. The use of broad-spectrum antibiotics for serious medical conditions can make it difficult to treat CDI complicated by acute respiratory distress syndrome. Fecal microbiota transplantation is a highly effective treatment in patients with refractory CDI. Here we report on a patient with refractory CDI and acute respiratory distress syndrome caused by pneumonia who was treated with fecal microbiota transplantation.Copyright © 2014 Baishideng Publishing Group Inc. All rights reserved.

KW - acid aspiration

KW - \*adult respiratory distress syndrome

KW - aged

KW - antibiotic associated diarrhea

KW - antibiotic therapy

KW - arterial gas

KW - article

KW - artificial ventilation

KW - case report

KW - \*Clostridium difficile infection/dt [Drug Therapy]

KW - \*Clostridium difficile infection/th [Therapy]

KW - coughing

KW - diabetes mellitus

KW - distress syndrome

KW - endotracheal intubation

KW - enzyme linked immunosorbent assay

KW - \*feces microflora

KW - human

KW - hypertension

KW - intestine flora

KW - male

KW - pneumonia

KW - prostate hypertrophy

KW - risk factor

KW - thorax radiography

KW - very elderly

KW - ceftriaxone/dt [Drug Therapy]

KW - clarithromycin/dt [Drug Therapy]

KW - levofloxacin/dt [Drug Therapy]

KW - meropenem/dt [Drug Therapy]

KW - tazobactam/dt [Drug Therapy]

KW - teicoplanin/dt [Drug Therapy]

KW - vancomycin/dt [Drug Therapy]

KW - \*fecal microbiota transplanta

XT - Clostridium difficile infection / drug therapy / ceftriaxone

XT - Clostridium difficile infection / drug therapy / clarithromycin

XT - Clostridium difficile infection / drug therapy / levofloxacin

XT - Clostridium difficile infection / drug therapy / meropenem

XT - Clostridium difficile infection / drug therapy / tazobactam

XT - Clostridium difficile infection / drug therapy / teicoplanin

XT - Clostridium difficile infection / drug therapy / vancomycin

XT - ceftriaxone / drug therapy / Clostridium difficile infection

XT - clarithromycin / drug therapy / Clostridium difficile infection

XT - levofloxacin / drug therapy / Clostridium difficile infection

XT - meropenem / drug therapy / Clostridium difficile infection

XT - tazobactam / drug therapy / Clostridium difficile infection

XT - teicoplanin / drug therapy / Clostridium difficile infection

XT - vancomycin / drug therapy / Clostridium difficile infection

JF - World Journal of Gastroenterology

JA - World J. Gastroenterol.

LA - English

VL - 20

IS - 35

SP - 12687

EP - 12690

CY - China

PB - WJG Press

SN - 1007-9327

SN - 2219-2840

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UR - http://www.wjgnet.com/1007-9327/pdf/v20/i35/12687.pdf

DO - https://dx.doi.org/10.3748/wjg.v20.i35.12687

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed15&NEWS=N&AN=600451144

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed15&DO=10.3748%2fwjg.v20.i35.12687Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Kim&issn=1007-9327&title=World+Journal+of+Gastroenterology&atitle=A+case+of+Clostridium+difficile+infection+complicated+by+acute+respiratory+distress+syndrome+treated+with+fecal+microbiota+transplantation&volume=20&issue=35&spage=12687&epage=12690&date=2014&doi=10.3748%2Fwjg.v20.i35.12687&pmid=25253977&sid=OVID:embase

289.

TY - JOUR

DB - Embase

AN - 52898266

T1 - Can medical therapy mimic the clinical efficacy or physiological effects of bariatric surgery?

A1 - Miras A.D.

A1 - Le Roux C.W.

Y1 - 2014//

N2 - The number of bariatric surgical procedures performed has increased dramatically. This review discusses the clinical and physiological changes, and in particular, the mechanisms behind weight loss and glycaemic improvements, observed following the gastric bypass, sleeve gastrectomy and gastric banding bariatric procedures. The review then examines how close we are to mimicking the clinical or physiological effects of surgery through less invasive and safer modern interventions that are currently available for clinical use. These include dietary interventions, orlistat, lorcaserin, phentermine/topiramate, glucagon-like peptide-1 receptor agonists, dipeptidyl peptidase-4 inhibitors, pramlintide, dapagliflozin, the duodenal-jejunal bypass liner, gastric pacemakers and gastric balloons. We conclude that, based on the most recent trials, we cannot fully mimic the clinical or physiological effects of surgery; however, we are getting closer. A 'medical bypass' may not be as far in the future as we previously thought, as the physician's armamentarium against obesity and type 2 diabetes has recently got stronger through the use of specific dietary modifications, novel medical devices and pharmacotherapy. Novel therapeutic targets include not only appetite but also taste/food preferences, energy expenditure, gut microbiota, bile acid signalling, inflammation, preservation of beta-cell function and hepatic glucose output, among others. Although there are no magic bullets, an integrated multimodal approach may yield success. Non-surgical interventions that mimic the metabolic benefits of bariatric surgery, with a reduced morbidity and mortality burden, remain tenable alternatives for patients and health-care professionals. © 2014 Macmillan Publishers Limited.

KW - abdominal pain/co [Complication]

KW - anxiety

KW - appetite

KW - \*bariatric surgery

KW - biliopancreatic bypass

KW - bleeding/co [Complication]

KW - cognitive defect/si [Side Effect]

KW - constipation/si [Side Effect]

KW - depression/si [Side Effect]

KW - device removal

KW - diabetic patient

KW - diarrhea/si [Side Effect]

KW - diet restriction

KW - dizziness/si [Side Effect]

KW - drug efficacy

KW - drug megadose

KW - drug safety

KW - energy expenditure

KW - feeding behavior

KW - food preference

KW - gastric balloon

KW - \*gastric pacemaker

KW - gastrointestinal disease/si [Side Effect]

KW - glycemic control

KW - headache/si [Side Effect]

KW - human

KW - hypoglycemia/si [Side Effect]

KW - insulin resistance

KW - intestine

KW - intestine bypass

KW - lifestyle modification

KW - liver

KW - long term care

KW - medical device

KW - medical device complication/co [Complication]

KW - meta analysis (topic)

KW - \*morbid obesity/su [Surgery]

KW - \*morbid obesity/th [Therapy]

KW - nausea/si [Side Effect]

KW - \*non insulin dependent diabetes mellitus/dt [Drug Therapy]

KW - non insulin dependent diabetes mellitus/dt [Drug Therapy]

KW - nutrient

KW - obesity/dt [Drug Therapy]

KW - obesity/th [Therapy]

KW - obstruction/co [Complication]

KW - pancreas islet beta cell

KW - paresthesia/si [Side Effect]

KW - patient monitoring

KW - phase 3 clinical trial (topic)

KW - portal vein

KW - priority journal

KW - randomized controlled trial (topic)

KW - review

KW - side effect/si [Side Effect]

KW - sleeve gastrectomy

KW - stomach bypass

KW - surgical technique

KW - urogenital tract infection/si [Side Effect]

KW - vomiting/co [Complication]

KW - vomiting/si [Side Effect]

KW - weight reduction

KW - xerostomia/si [Side Effect]

KW - amylin derivative/dt [Drug Therapy]

KW - antidiabetic agent/dt [Drug Therapy]

KW - antidiabetic agent/pd [Pharmacology]

KW - antiobesity agent/dt [Drug Therapy]

KW - antiobesity agent/pd [Pharmacology]

KW - bile acid

KW - \*dapagliflozin/ae [Adverse Drug Reaction]

KW - \*dapagliflozin/dt [Drug Therapy]

KW - \*dapagliflozin/po [Oral Drug Administration]

KW - \*dapagliflozin/pd [Pharmacology]

KW - \*dipeptidyl peptidase IV inhibitor/ae [Adverse Drug Reaction]

KW - \*dipeptidyl peptidase IV inhibitor/cm [Drug Comparison]

KW - \*dipeptidyl peptidase IV inhibitor/dt [Drug Therapy]

KW - \*dipeptidyl peptidase IV inhibitor/pd [Pharmacology]

KW - exendin 4/cm [Drug Comparison]

KW - exendin 4/dt [Drug Therapy]

KW - glucagon like peptide 1/ec [Endogenous Compound]

KW - \*glucagon like peptide 1 receptor agonist/ae [Adverse Drug Reaction]

KW - \*glucagon like peptide 1 receptor agonist/cm [Drug Comparison]

KW - \*glucagon like peptide 1 receptor agonist/dt [Drug Therapy]

KW - \*glucagon like peptide 1 receptor agonist/pd [Pharmacology]

KW - incretin/ec [Endogenous Compound]

KW - insulin/ec [Endogenous Compound]

KW - leptin/ec [Endogenous Compound]

KW - linagliptin/ae [Adverse Drug Reaction]

KW - linagliptin/dt [Drug Therapy]

KW - linagliptin/pd [Pharmacology]

KW - liraglutide/cm [Drug Comparison]

KW - liraglutide/dt [Drug Therapy]

KW - lixisenatide/dt [Drug Therapy]

KW - \*lorcaserin/ae [Adverse Drug Reaction]

KW - \*lorcaserin/ct [Clinical Trial]

KW - \*lorcaserin/dt [Drug Therapy]

KW - \*lorcaserin/pd [Pharmacology]

KW - \*phentermine plus topiramate/ae [Adverse Drug Reaction]

KW - \*phentermine plus topiramate/do [Drug Dose]

KW - \*phentermine plus topiramate/dt [Drug Therapy]

KW - \*phentermine plus topiramate/pd [Pharmacology]

KW - plastic

KW - polymer

KW - \*pramlintide/dt [Drug Therapy]

KW - saxagliptin/ae [Adverse Drug Reaction]

KW - saxagliptin/dt [Drug Therapy]

KW - saxagliptin/pd [Pharmacology]

KW - sitagliptin/ae [Adverse Drug Reaction]

KW - sitagliptin/dt [Drug Therapy]

KW - sitagliptin/pd [Pharmacology]

KW - sodium glucose cotransporter 2

KW - tetrahydrolipstatin/ae [Adverse Drug Reaction]

KW - tetrahydrolipstatin/ct [Clinical Trial]

KW - tetrahydrolipstatin/dt [Drug Therapy]

KW - tetrahydrolipstatin/pd [Pharmacology]

KW - unclassified drug

KW - vildagliptin/ae [Adverse Drug Reaction]

KW - vildagliptin/dt [Drug Therapy]

KW - vildagliptin/pd [Pharmacology]

KW - \*duodenal jejunal bypass liner

KW - duodenojejunal bypass

KW - \*implantable gastric stimulator

KW - sodium glucose cotransporter 2 inhibitor/ae [Adverse Drug Reaction]

KW - sodium glucose cotransporter 2 inhibitor/dt [Drug Therapy]

KW - sodium glucose cotransporter 2 inhibitor/pd [Pharmacology]

XT - cognitive defect / side effect / phentermine plus topiramate

XT - constipation / side effect / phentermine plus topiramate

XT - depression / side effect / phentermine plus topiramate

XT - diarrhea / side effect / glucagon like peptide 1 receptor agonist

XT - diarrhea / side effect / tetrahydrolipstatin

XT - dizziness / side effect / lorcaserin

XT - gastrointestinal disease / side effect / tetrahydrolipstatin

XT - headache / side effect / lorcaserin

XT - hypoglycemia / side effect / dapagliflozin

XT - hypoglycemia / side effect / dipeptidyl peptidase IV inhibitor

XT - hypoglycemia / side effect / glucagon like peptide 1 receptor agonist

XT - hypoglycemia / side effect / linagliptin

XT - hypoglycemia / side effect / lorcaserin

XT - hypoglycemia / side effect / saxagliptin

XT - hypoglycemia / side effect / sitagliptin

XT - hypoglycemia / side effect / sodium glucose cotransporter 2 inhibitor

XT - hypoglycemia / side effect / vildagliptin

XT - nausea / side effect / glucagon like peptide 1 receptor agonist

XT - nausea / side effect / lorcaserin

XT - non insulin dependent diabetes mellitus / drug therapy / amylin derivative

XT - non insulin dependent diabetes mellitus / drug therapy / antidiabetic agent

XT - non insulin dependent diabetes mellitus / drug therapy / dapagliflozin

XT - non insulin dependent diabetes mellitus / drug therapy / dipeptidyl peptidase IV inhibitor

XT - non insulin dependent diabetes mellitus / drug therapy / exendin 4

XT - non insulin dependent diabetes mellitus / drug therapy / glucagon like peptide 1 receptor agonist

XT - non insulin dependent diabetes mellitus / drug therapy / linagliptin

XT - non insulin dependent diabetes mellitus / drug therapy / liraglutide

XT - non insulin dependent diabetes mellitus / drug therapy / lixisenatide

XT - non insulin dependent diabetes mellitus / drug therapy / pramlintide

XT - non insulin dependent diabetes mellitus / drug therapy / saxagliptin

XT - non insulin dependent diabetes mellitus / drug therapy / sitagliptin

XT - non insulin dependent diabetes mellitus / drug therapy / sodium glucose cotransporter 2 inhibitor

XT - non insulin dependent diabetes mellitus / drug therapy / vildagliptin

XT - obesity / drug therapy / antiobesity agent

XT - obesity / drug therapy / lorcaserin

XT - obesity / drug therapy / phentermine plus topiramate

XT - obesity / drug therapy / tetrahydrolipstatin

XT - paresthesia / side effect / phentermine plus topiramate

XT - side effect / side effect / phentermine plus topiramate

XT - urogenital tract infection / side effect / sodium glucose cotransporter 2 inhibitor

XT - vomiting / side effect / glucagon like peptide 1 receptor agonist

XT - xerostomia / side effect / lorcaserin

XT - xerostomia / side effect / phentermine plus topiramate

XT - amylin derivative / drug therapy / non insulin dependent diabetes mellitus

XT - antidiabetic agent / drug therapy / non insulin dependent diabetes mellitus

XT - antiobesity agent / drug therapy / obesity

XT - dapagliflozin / adverse drug reaction / hypoglycemia

XT - dapagliflozin / drug therapy / non insulin dependent diabetes mellitus

XT - dipeptidyl peptidase IV inhibitor / adverse drug reaction / hypoglycemia

XT - dipeptidyl peptidase IV inhibitor / drug comparison / glucagon like peptide 1 receptor agonist

XT - dipeptidyl peptidase IV inhibitor / drug therapy / non insulin dependent diabetes mellitus

XT - exendin 4 / drug comparison / liraglutide

XT - exendin 4 / drug therapy / non insulin dependent diabetes mellitus

XT - glucagon like peptide 1 receptor agonist / adverse drug reaction / diarrhea

XT - glucagon like peptide 1 receptor agonist / adverse drug reaction / hypoglycemia

XT - glucagon like peptide 1 receptor agonist / adverse drug reaction / nausea

XT - glucagon like peptide 1 receptor agonist / adverse drug reaction / vomiting

XT - glucagon like peptide 1 receptor agonist / drug comparison / dipeptidyl peptidase IV inhibitor

XT - glucagon like peptide 1 receptor agonist / drug therapy / non insulin dependent diabetes mellitus

XT - linagliptin / adverse drug reaction / hypoglycemia

XT - linagliptin / drug therapy / non insulin dependent diabetes mellitus

XT - liraglutide / drug comparison / exendin 4

XT - liraglutide / drug therapy / non insulin dependent diabetes mellitus

XT - lixisenatide / drug therapy / non insulin dependent diabetes mellitus

XT - lorcaserin / adverse drug reaction / dizziness

XT - lorcaserin / adverse drug reaction / headache

XT - lorcaserin / adverse drug reaction / hypoglycemia

XT - lorcaserin / adverse drug reaction / nausea

XT - lorcaserin / adverse drug reaction / xerostomia

XT - lorcaserin / drug therapy / obesity

XT - phentermine plus topiramate / adverse drug reaction / cognitive defect

XT - phentermine plus topiramate / adverse drug reaction / constipation

XT - phentermine plus topiramate / adverse drug reaction / depression

XT - phentermine plus topiramate / adverse drug reaction / paresthesia

XT - phentermine plus topiramate / adverse drug reaction / side effect

XT - phentermine plus topiramate / adverse drug reaction / xerostomia

XT - phentermine plus topiramate / drug therapy / obesity

XT - pramlintide / drug therapy / non insulin dependent diabetes mellitus

XT - saxagliptin / adverse drug reaction / hypoglycemia

XT - saxagliptin / drug therapy / non insulin dependent diabetes mellitus

XT - sitagliptin / adverse drug reaction / hypoglycemia

XT - sitagliptin / drug therapy / non insulin dependent diabetes mellitus

XT - sodium glucose cotransporter 2 inhibitor / adverse drug reaction / hypoglycemia

XT - sodium glucose cotransporter 2 inhibitor / adverse drug reaction / urogenital tract infection

XT - sodium glucose cotransporter 2 inhibitor / drug therapy / non insulin dependent diabetes mellitus

XT - tetrahydrolipstatin / adverse drug reaction / diarrhea

XT - tetrahydrolipstatin / adverse drug reaction / gastrointestinal disease

XT - tetrahydrolipstatin / drug therapy / obesity

XT - vildagliptin / adverse drug reaction / hypoglycemia

XT - vildagliptin / drug therapy / non insulin dependent diabetes mellitus

JF - International Journal of Obesity

JA - Int. J. Obes.

LA - English

VL - 38

IS - 3

SP - 325

EP - 333

CY - United Kingdom

PB - Nature Publishing Group (Houndmills, Basingstoke, Hampshire RG21 6XS, United Kingdom)

SN - 0307-0565

SN - 1476-5497

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M1 - (Le Roux) Department of Experimental Pathology, School of Medicine and Medical Sciences, University College Dublin, Dublin, Ireland

M2 - EndoBarrier: GI Dynamics [United States]

C1 - EndoBarrier: GI Dynamics [United States]

C2 - GI Dynamics [United States]

DO - https://dx.doi.org/10.1038/ijo.2013.205

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed15&NEWS=N&AN=52898266

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed15&DO=10.1038%2fijo.2013.205Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Miras&issn=0307-0565&title=International+Journal+of+Obesity&atitle=Can+medical+therapy+mimic+the+clinical+efficacy+or+physiological+effects+of+bariatric+surgery%3F&volume=38&issue=3&spage=325&epage=333&date=2014&doi=10.1038%2Fijo.2013.205&pmid=&sid=OVID:embase

290.

TY - JOUR

DB - Embase

AN - 372150087

ID - 24428449 [https://www.ncbi.nlm.nih.gov/pubmed/?term=24428449]

T1 - Does maternal age affect pregnancy outcome?

A1 - Cohen W.R.

Y1 - 2014//

KW - adolescent pregnancy

KW - anxiety

KW - birth control

KW - comorbidity

KW - conception

KW - decision making

KW - deterioration

KW - diabetes mellitus

KW - DNA methylation

KW - electronic medical record

KW - female infertility

KW - feminism

KW - gene expression

KW - genotype

KW - health care cost

KW - heart disease

KW - heredity

KW - human

KW - hypertension

KW - immaturity

KW - implantation

KW - instrumental delivery

KW - intensive care

KW - kidney disease

KW - low birth weight

KW - \*maternal age

KW - microbiome

KW - morbidity

KW - mortality

KW - note

KW - nullipara

KW - obesity

KW - obstetric procedure

KW - ontogeny

KW - paternal age

KW - perinatal death

KW - placenta previa

KW - population

KW - preeclampsia

KW - pregnancy

KW - pregnancy complication

KW - pregnancy diabetes mellitus

KW - \*pregnancy outcome

KW - premature labor

KW - primigravida

KW - priority journal

KW - radiation exposure

KW - risk factor

KW - sexual maturation

KW - tertiary care center

KW - third trimester pregnancy

KW - uterus contractility

KW - uterus contraction

KW - vaginal delivery

KW - enzyme

KW - oxytocin

KW - toxin

KW - unclassified drug

KW - catecholamine metabolizing enzyme

JF - BJOG: An International Journal of Obstetrics and Gynaecology

JA - BJOG Int. J. Obstet. Gynaecol.

LA - English

VL - 121

IS - 3

SP - 252

EP - 254

CY - United Kingdom

PB - Blackwell Publishing Ltd (9600 Garsington Road, Oxford OX4 2XG, United Kingdom)

SN - 1470-0328

SN - 1471-0528

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DO - https://dx.doi.org/10.1111/1471-0528.12563

PT - Note

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed15&NEWS=N&AN=372150087

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed15&DO=10.1111%2f1471-0528.12563Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Cohen&issn=1470-0328&title=BJOG%3A+An+International+Journal+of+Obstetrics+and+Gynaecology&atitle=Does+maternal+age+affect+pregnancy+outcome%3F&volume=121&issue=3&spage=252&epage=254&date=2014&doi=10.1111%2F1471-0528.12563&pmid=24428449&sid=OVID:embase

291.

TY - JOUR

DB - Embase

AN - 600788778

T1 - Preface

A1 - Yang I.A.

A1 - Zimmerman P.V.

Y1 - 2014//

KW - anxiety disorder

KW - \*chronic obstructive lung disease/rh [Rehabilitation]

KW - \*chronic obstructive lung disease/su [Surgery]

KW - \*chronic obstructive lung disease/th [Therapy]

KW - clinical feature

KW - comorbidity

KW - conservative treatment

KW - depression

KW - disease association

KW - editorial

KW - forced expiratory volume

KW - forced vital capacity

KW - health care access

KW - human

KW - imaging and display

KW - lung transplantation

KW - microbial community

KW - microbiome

KW - oxygen therapy

KW - pneumonia

KW - practice guideline

KW - pulmonary rehabilitation

KW - self care

KW - spirometry

KW - biological marker/ec [Endogenous Compound]

KW - bronchoscopic therapy

KW - functional lung imaging

KW - lung microbiome

JF - Journal of Thoracic Disease

JA - J. Thorac. Dis.

LA - English

VL - 6

IS - 11

SP - 1521

EP - 1524

CY - Hong Kong

PB - Pioneer Bioscience Publishing (E-mail: jtd@thepbpc.org)

SN - 2072-1439

SN - 2077-6624

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UR - http://www.jthoracdis.com/article/view/3491/html

DO - https://dx.doi.org/10.3978/j.issn.2072-1439.2014.11.28

PT - Editorial

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed15&NEWS=N&AN=600788778

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed15&DO=10.3978%2fj.issn.2072-1439.2014.11.28Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Yang&issn=2072-1439&title=Journal+of+Thoracic+Disease&atitle=Preface&volume=6&issue=11&spage=1521&epage=1524&date=2014&doi=10.3978%2Fj.issn.2072-1439.2014.11.28&pmid=&sid=OVID:embase

292.

TY - JOUR

DB - Embase

AN - 368327866

ID - 23381820 [https://www.ncbi.nlm.nih.gov/pubmed/?term=23381820]

T1 - Cyclic parenteral nutrition does not change the intestinal microbiota in patients with short bowel syndrome

T3 - Nutricao parenteral ciclica nao altera a microbiota intestinal em pacientes com a sindrome do intestino curto

A1 - de Castro Furtado E.

A1 - Marchini J.S.

A1 - da Fonseca C.K.

A1 - Coelho P.S.R.

A1 - Menegueti M.G.

A1 - Auxiliadora-Martins M.

A1 - Basile-Filho A.

A1 - Suen V.M.M.

Y1 - 2013//

N2 - PURPOSE: To characterize of the intestinal microbiota of patients with short bowel syndrome (SBS) admitted to the Metabolic Unit of a University Hospital. METHOD(S): Fecal samples were evaluated, and biochemical tests were conducted only in the case of SBS patients. The nutritional status was assessed via anthropometric measurements and evaluation of food intake by means of a food questionnaire. The pathogenic strains were detected with the aid of cultures and specific biochemical tests in aerobic medium, for determination of species belonging to the Family enterobacteriaceae. Anti-sera were applied to each isolated E. coli strain, for determination of their possible pathogenicity. Molecular methodology was employed for establishment of the intestinal bacterial microbiota profile. RESULT(S): A lower amount of microorganisms of the family enterobacteriaceae per gram of stool was observed in the case of patients with SBS. However, molecular analysis showed maintenance of the bacterial species ratio, which is equivalent to a healthy intestinal microbiota. CONCLUSION(S): Despite the massive removal of the small bowel, frequent use of antibiotics, immune system depression, presence of non-digested food in the gastrointestinal tract, and accelerated intestinal transit, the ratio between intestinal bacterial species remain similar to normality.

KW - adult

KW - anthropometric parameters

KW - article

KW - bacterium detection

KW - chemical analysis

KW - clinical article

KW - controlled study

KW - cross-sectional study

KW - DNA sequence

KW - Enterobacteriaceae

KW - Escherichia coli

KW - feces analysis

KW - female

KW - food intake

KW - gene amplification

KW - hospitalization

KW - human

KW - \*intestine flora

KW - intestine resection

KW - male

KW - mesenteric ischemia

KW - nutritional status

KW - \*parenteral nutrition

KW - pathogenicity

KW - questionnaire

KW - \*short bowel syndrome/th [Therapy]

JF - Acta Cirurgica Brasileira

JA - Acta Cir. Bras.

LA - English, Portuguese

VL - 28

IS - SUPPL.1

SP - 26

EP - 32

CY - Brazil

PB - Sociedade Brasileira para o Desenvolvimento de Pesquisa em Cirurgia

SN - 0102-8650

SN - 1678-2674

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UR - http://www.scielo.br/pdf/acb/v28s1/v28s1a06.pdf

DO - https://dx.doi.org/10.1590/s0102-86502013001300006

PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed14&NEWS=N&AN=368327866

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed14&DO=10.1590%2fs0102-86502013001300006Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=de+Castro+Furtado&issn=0102-8650&title=Acta+Cirurgica+Brasileira&atitle=Nutricao+parenteral+ciclica+nao+altera+a+microbiota+intestinal+em+pacientes+com+a+sindrome+do+intestino+curto&volume=28&issue=SUPPL.1&spage=26&epage=32&date=2013&doi=10.1590%2Fs0102-86502013001300006&pmid=23381820&sid=OVID:embase

293.

TY - JOUR

DB - Embase

AN - 601108649

T1 - Non-communicable disease epidemic: epidemiology in action (EuroEpi 2013 and NordicEpi 2013): Aarhus, Denmark from 11 August to 14 August 2013

A1 - Tsukinoki R.

A1 - Murakami Y.

Y1 - 2013//

KW - 2009 H1N1 influenza

KW - abortion

KW - absence

KW - absenteeism

KW - academic achievement

KW - accidental death

KW - acquired immune deficiency syndrome

KW - acute heart failure

KW - acute heart infarction

KW - acute kidney failure

KW - acute liver failure

KW - acute lymphoblastic leukemia

KW - adipose tissue

KW - adolescence

KW - adolescent behavior

KW - adolescent disease

KW - adolescent health

KW - adolescent pregnancy

KW - adulthood

KW - adverse outcome

KW - African

KW - air pollution

KW - air quality

KW - air temperature

KW - Albanian (people)

KW - alcohol consumption

KW - alcohol intoxication

KW - allele

KW - allergy

KW - alternative medicine

KW - Alzheimer disease

KW - ambient air

KW - ambulance transportation

KW - anorectal malformation

KW - anorexia

KW - antibiotic therapy

KW - antibody blood level

KW - anticoagulant therapy

KW - antihypertensive therapy

KW - anxiety disorder

KW - arterial stiffness

KW - artery thrombosis

KW - article

KW - assessment of humans

KW - asthma

KW - atherosclerosis

KW - atopic dermatitis

KW - attributable risk

KW - Australian Aborigine

KW - autism

KW - automutilation

KW - awareness

KW - axillary lymph node

KW - bacterial load

KW - Bangladeshi

KW - bariatric surgery

KW - Barrett esophagus

KW - BCG vaccination

KW - behavior disorder/si [Side Effect]

KW - benign childhood epilepsy

KW - bereavement

KW - billing and claims

KW - binge drinking

KW - biomechanics

KW - bipolar disorder

KW - birth rate

KW - birth weight

KW - blood pressure

KW - body composition

KW - body fat

KW - body fat distribution

KW - body height

KW - body mass

KW - body size

KW - body weight

KW - Bosnia and Herzegovina

KW - Braden Scale

KW - brain hemorrhage

KW - brain ischemia

KW - Brazil

KW - Brazilian

KW - breast cancer/di [Diagnosis]

KW - breast feeding

KW - bronchitis

KW - burn

KW - caloric intake

KW - cancer chemotherapy

KW - cancer diagnosis

KW - cancer epidemiology

KW - cancer incidence

KW - cancer localization

KW - cancer mortality

KW - cancer patient

KW - cancer prevention

KW - cancer prognosis

KW - cancer radiotherapy

KW - cancer recurrence

KW - cancer risk

KW - cancer screening

KW - cancer staging

KW - cancer surgery

KW - cancer survival

KW - cancer survivor

KW - cancer susceptibility

KW - cancer therapy

KW - carbohydrate intake

KW - cardiac patient

KW - cardiometabolic risk

KW - cardiovascular disease

KW - cardiovascular mortality

KW - cardiovascular risk

KW - cardiovascular system

KW - caregiver

KW - carpal tunnel syndrome

KW - Caucasian

KW - cause of death

KW - celiac disease

KW - cellular immunity

KW - central nervous system tumor

KW - cerebral palsy

KW - cerebrovascular accident/pc [Prevention]

KW - cesarean section

KW - child death

KW - child health

KW - child parent relation

KW - child welfare

KW - childbirth

KW - childhood

KW - childhood cancer

KW - childhood disease

KW - childhood injury

KW - childhood leukemia

KW - childhood obesity

KW - cholestatic hepatitis

KW - cholesterol blood level

KW - chronic disease

KW - chronic fatigue syndrome

KW - chronic inflammation

KW - chronic kidney disease

KW - chronic liver disease

KW - chronic obstructive lung disease

KW - chronic stress

KW - chronology

KW - clinical assessment tool

KW - clinical decision making

KW - clinical effectiveness

KW - clinical examination

KW - clinical protocol

KW - clinical research

KW - cognition

KW - cohabitation

KW - cold

KW - colic

KW - colon cancer

KW - colorectal cancer

KW - comorbidity

KW - computer assisted tomography

KW - conduct disorder

KW - congenital diaphragm hernia

KW - congenital heart disease

KW - congenital heart malformation

KW - congenital malformation/si [Side Effect]

KW - consumer

KW - coping behavior

KW - cost effectiveness analysis

KW - Crimean Congo hemorrhagic fever

KW - cubital tunnel syndrome

KW - cutaneous melanoma

KW - cytokine release

KW - cytopathology

KW - daily life activity

KW - daughter

KW - death certificate

KW - decubitus/pc [Prevention]

KW - delivery

KW - dementia

KW - demography

KW - dengue

KW - Denmark

KW - dental caries

KW - dental fluorosis

KW - dental health

KW - depression/di [Diagnosis]

KW - developmental disorder

KW - diabetes mellitus

KW - diarrhea

KW - diet supplementation

KW - diet therapy

KW - dietary fiber

KW - dietary intake

KW - diphtheria

KW - disability

KW - disease association

KW - disease course

KW - disease exacerbation

KW - disease marker

KW - disease severity

KW - disease surveillance

KW - distress syndrome

KW - diverticulosis

KW - drinking behavior

KW - drug classification

KW - drug efficacy

KW - drug metabolism

KW - drug safety

KW - drug surveillance program

KW - drug transport

KW - drug use

KW - drug utilization

KW - eating disorder

KW - economic aspect

KW - ectopic pregnancy

KW - education

KW - educational status

KW - Egypt

KW - electronic medical record

KW - embryo disposition

KW - emergency ward

KW - emphysema

KW - encephalomyelitis

KW - endocrine tumor

KW - endometrium carcinoma

KW - enteric virus

KW - environmental exposure

KW - environmental factor

KW - environmental temperature

KW - \*epidemic/ep [Epidemiology]

KW - epidemiology

KW - ethnicity

KW - evaluation study

KW - exhaust gas

KW - extrapulmonary tuberculosis

KW - family

KW - family history

KW - family planning

KW - family violence

KW - fast food

KW - fat free mass

KW - fat intake

KW - fat mass

KW - fatality

KW - feedback system

KW - feeding behavior

KW - female fertility

KW - female genital mutilation

KW - fertilization in vitro

KW - fetus death

KW - fetus growth

KW - fetus mortality

KW - fetus wastage

KW - fever

KW - fibrinogen blood level

KW - Finland

KW - first-degree relative

KW - first trimester pregnancy

KW - fish meat

KW - follow up

KW - food

KW - food intake

KW - food poisoning

KW - food preference

KW - food security

KW - forced expiratory volume

KW - France

KW - fruit

KW - fruit juice

KW - gender

KW - gene interaction

KW - gene locus

KW - General Health Questionnaire

KW - general practice

KW - genetic association

KW - genetic epidemiology

KW - genetic polymorphism

KW - genetic predisposition

KW - genetic variability

KW - genotype

KW - genotype environment interaction

KW - geographic distribution

KW - geriatric patient

KW - germ cell tumor

KW - Germany

KW - gestational age

KW - Giardia intestinalis

KW - giardiasis

KW - Gilles de la Tourette syndrome

KW - glucose blood level

KW - glucose tolerance

KW - groups by age

KW - Guinea-Bissau

KW - hay fever

KW - head circumference

KW - health behavior

KW - health care access

KW - health care management

KW - health care planning

KW - health care policy

KW - health care quality

KW - health care system

KW - health care utilization

KW - health disparity

KW - health program

KW - health status

KW - health survey

KW - hearing

KW - hearing impairment

KW - heart atrium fibrillation

KW - heart contraction

KW - heart failure

KW - heart infarction

KW - heart rate variability

KW - heart rehabilitation

KW - heart transplantation

KW - Helicobacter infection

KW - hematologic malignancy

KW - hemoglobin blood level

KW - hemorrhoid/dt [Drug Therapy]

KW - hepatitis A

KW - hepatitis B

KW - hepatitis C

KW - Hepatitis C virus

KW - Hepatitis E virus

KW - hereditary nonpolyposis colorectal cancer

KW - heredity

KW - Herpes simplex virus 1

KW - herpes zoster

KW - high risk population

KW - highly active antiretroviral therapy

KW - hip fracture

KW - HIV test

KW - Hodgkin disease

KW - home accident

KW - honey

KW - hormone blood level

KW - hospital admission

KW - hospital care

KW - hospitalization

KW - household

KW - human

KW - Human immunodeficiency virus infected patient

KW - Human immunodeficiency virus infection/dt [Drug Therapy]

KW - hyperactivity/si [Side Effect]

KW - hypertension

KW - hypospadias

KW - Iceland

KW - immigrant

KW - immune response

KW - income

KW - industrial noise

KW - industrial worker

KW - infertility

KW - infertility therapy

KW - inflammatory bowel disease

KW - injury

KW - insomnia

KW - insulin blood level

KW - insulin resistance

KW - intelligence quotient

KW - intensive care unit

KW - Internet

KW - intestine flora

KW - intestine parasite

KW - intoxication

KW - intracytoplasmic sperm injection

KW - intravenous drug abuse

KW - ischemia

KW - ischemic heart disease

KW - Italy

KW - Japanese (people)

KW - job stress

KW - Kazakhstan

KW - kidney function

KW - kinesiotherapy

KW - larynx cancer

KW - latitude

KW - lean body weight

KW - leisure

KW - Lennox Gastaut syndrome

KW - leukemia

KW - life

KW - lifestyle

KW - lipoprotein blood level

KW - liver cell carcinoma

KW - liver cirrhosis

KW - liver fibrosis

KW - liver transplantation

KW - long term care

KW - long term survival

KW - low back pain

KW - low birth weight

KW - low risk population

KW - lung cancer/su [Surgery]

KW - lung development

KW - lung function

KW - lymphoma

KW - Madagascar

KW - malignant neoplastic disease

KW - market

KW - marketing

KW - marriage

KW - maternal age

KW - maternal diabetes mellitus

KW - maternal disease

KW - maternal hypertension

KW - maternal mortality

KW - maternal obesity

KW - maternal serum

KW - maternal smoking

KW - measles

KW - measles vaccination

KW - medical care

KW - medical history

KW - medical information

KW - medical leave

KW - medical school

KW - medical specialist

KW - medical student

KW - medication compliance

KW - melanoma

KW - melanoma skin cancer

KW - menarche

KW - menstrual cycle

KW - mental deterioration

KW - mental disease

KW - mental health

KW - mental patient

KW - mesothelioma

KW - metabolic syndrome X

KW - microcephaly

KW - midwife

KW - migrant

KW - mobilization

KW - mother

KW - motor development

KW - multiple sclerosis

KW - mumps

KW - musculoskeletal disease

KW - musculoskeletal pain

KW - Muslim

KW - myeloid leukemia

KW - myeloma

KW - Namibia

KW - needlestick injury

KW - neighborhood

KW - neonatal hyperbilirubinemia

KW - nerve conduction

KW - neural tube defect

KW - newborn mortality

KW - nicotine replacement therapy

KW - noise

KW - \*non communicable disease/ep [Epidemiology]

KW - non insulin dependent diabetes mellitus/et [Etiology]

KW - nonalcoholic fatty liver

KW - nonhodgkin lymphoma

KW - North African

KW - Norwegian (people)

KW - nursery

KW - nutrition

KW - nutritional assessment

KW - nutritional status

KW - obesity

KW - obsessive compulsive disorder

KW - obstetrician

KW - occupation and occupation related phenomena

KW - occupational accident

KW - occupational exposure

KW - occupational hazard

KW - offender

KW - onset age

KW - organ donor

KW - ovary cancer

KW - Pakistani

KW - Papanicolaou test

KW - parent

KW - parental age

KW - parental attitude

KW - parental deprivation

KW - Parkinson disease

KW - patient care

KW - patient compliance

KW - patient counseling

KW - patient information

KW - patient participation

KW - patient satisfaction

KW - pedigree

KW - pedometer

KW - peer group

KW - pension

KW - percutaneous coronary intervention

KW - perinatal care

KW - peritoneal dialysis

KW - personality

KW - pertussis

KW - pet animal

KW - pharmacoepidemiology

KW - physical activity

KW - physical inactivity

KW - physician

KW - physiological process

KW - placenta weight

KW - pneumonia

KW - policy

KW - poliomyelitis

KW - polypharmacy

KW - Portugal

KW - postmenopause

KW - prediction

KW - predictive value

KW - preeclampsia

KW - pregnancy

KW - pregnancy outcome

KW - premature labor

KW - premature mortality

KW - premenopause

KW - prenatal care

KW - prenatal drug exposure

KW - prenatal exposure

KW - prenatal period

KW - prenatal stress

KW - prescription

KW - primary health care

KW - primary medical care

KW - primary prevention

KW - primary tumor

KW - productivity

KW - progeny

KW - prostate cancer

KW - protection

KW - protein blood level

KW - protein intake

KW - protein polymorphism

KW - psoriasis

KW - psychiatric department

KW - psychodynamics

KW - psychological aspect

KW - psychological well-being

KW - psychophysiology

KW - psychosomatic disorder

KW - puberty

KW - public health problem

KW - publication

KW - puerperal depression

KW - puerperium

KW - quality of life

KW - radiation exposure

KW - rapid response team

KW - reading

KW - recreation

KW - recurrence risk

KW - recurrent disease

KW - religion

KW - reproduction

KW - reproductive health

KW - respiratory tract disease

KW - retirement

KW - return to work

KW - reward

KW - rheumatoid arthritis

KW - risk assessment

KW - risk factor

KW - rubella

KW - rural area

KW - rural population

KW - Russian Federation

KW - saliva level

KW - salt intake

KW - sanitation

KW - sarcoidosis

KW - schizophrenia/dt [Drug Therapy]

KW - school

KW - scientist

KW - screening test

KW - season

KW - second trimester pregnancy

KW - Serbia

KW - seroprevalence

KW - sex difference

KW - sexual behavior

KW - sexual intercourse

KW - shoulder impingement syndrome/et [Etiology]

KW - sibling

KW - single nucleotide polymorphism

KW - skin disease

KW - sleep disordered breathing

KW - sleep pattern

KW - small for date infant

KW - smoking

KW - smoking cessation

KW - social class

KW - social interaction

KW - social norm

KW - social status

KW - social support

KW - socioeconomics

KW - sodium excretion

KW - soft drink

KW - soft tissue sarcoma

KW - solutio placentae

KW - South Africa

KW - South American

KW - Spain

KW - speech

KW - sperm

KW - spontaneous abortion

KW - sport

KW - spouse

KW - standardization

KW - standing

KW - stillbirth

KW - stomach cancer

KW - stress

KW - student

KW - substance abuse

KW - suicidal ideation

KW - suicide/ep [Epidemiology]

KW - suicide attempt

KW - summer

KW - surgical patient

KW - Sweden

KW - systemic lupus erythematosus

KW - Tanzania

KW - telephone interview

KW - television viewing

KW - temperature related phenomena

KW - testis cancer

KW - tetanus

KW - thalassemia

KW - thorax pain

KW - thorax surgery

KW - thyroid cancer

KW - thyroid disease

KW - time series analysis

KW - time to pregnancy

KW - tobacco

KW - tonsil cancer

KW - topical treatment

KW - total knee replacement

KW - toxoplasmosis

KW - traffic and transport

KW - triacylglycerol blood level

KW - tuberculosis/dt [Drug Therapy]

KW - tumor associated leukocyte

KW - Turk (people)

KW - twins

KW - undergraduate student

KW - underweight

KW - United Kingdom

KW - urban area

KW - uric acid blood level

KW - urinalysis

KW - urine incontinence

KW - uterine cervix cancer

KW - uterine cervix carcinoma

KW - uterus cancer

KW - vaccination

KW - vacuum extraction

KW - vaginitis

KW - vagus reflex

KW - varicosis

KW - vegetable

KW - vegetarian diet

KW - vein thrombosis

KW - venous thromboembolism

KW - veterinary clinic

KW - viral clearance

KW - vitamin blood level

KW - volcano

KW - waist circumference

KW - weather

KW - Wegener granulomatosis

KW - weight change

KW - weight gain

KW - weight reduction

KW - welfare

KW - wild boar

KW - work capacity

KW - work disability

KW - work environment

KW - zoonosis

KW - 11beta hydroxysteroid dehydrogenase 2/ec [Endogenous Compound]

KW - anti human immunodeficiency virus agent/dt [Drug Therapy]

KW - BCG vaccine/dt [Drug Therapy]

KW - C reactive protein/ec [Endogenous Compound]

KW - caffeine

KW - clozapine/dt [Drug Therapy]

KW - corticosteroid/ae [Adverse Drug Reaction]

KW - corticosteroid/dt [Drug Therapy]

KW - corticosteroid/tp [Topical Drug Administration]

KW - diazepam/ae [Adverse Drug Reaction]

KW - diphtheria pertussis tetanus vaccine

KW - endothelial nitric oxide synthase/ec [Endogenous Compound]

KW - enterolactone/ec [Endogenous Compound]

KW - fibrinogen/ec [Endogenous Compound]

KW - hemoglobin A1c/ec [Endogenous Compound]

KW - hydrocortisone/ec [Endogenous Compound]

KW - hydroxymethylglutaryl coenzyme A reductase inhibitor

KW - immunoglobulin G antibody/ec [Endogenous Compound]

KW - maternal antibody/ec [Endogenous Compound]

KW - neuronal nitric oxide synthase/ec [Endogenous Compound]

KW - nonsteroid antiinflammatory agent/cb [Drug Combination]

KW - paracetamol/ae [Adverse Drug Reaction]

KW - paracetamol/cb [Drug Combination]

KW - prostaglandin synthase inhibitor/cb [Drug Combination]

KW - serotonin uptake inhibitor/cb [Drug Combination]

KW - tamoxifen

KW - temazepam/ae [Adverse Drug Reaction]

KW - tissue antigen/ec [Endogenous Compound]

KW - tricyclic antidepressant agent

KW - unindexed drug

KW - virus antibody/ec [Endogenous Compound]

KW - vitamin D/ec [Endogenous Compound]

KW - zopiclone/ae [Adverse Drug Reaction]

KW - allostatic load

KW - dietary recall assessment tool

KW - food selectivity

KW - heatwave

KW - hyperkinetic disorder

KW - interpregancy interval

KW - malmo diet

KW - modifiable risk factor

KW - occupational prestige

KW - overeducation

KW - postnatal stress

KW - sandstorm

KW - socioeconomic inequality

KW - strengths and difficulties questionnaire

KW - uterine cervix small cell neuroendocrine carcinoma

XT - behavior disorder / side effect / paracetamol

XT - congenital malformation / side effect / corticosteroid

XT - congenital malformation / side effect / diazepam

XT - congenital malformation / side effect / temazepam

XT - congenital malformation / side effect / zopiclone

XT - hemorrhoid / drug therapy / corticosteroid

XT - Human immunodeficiency virus infection / drug therapy / anti human immunodeficiency virus agent

XT - hyperactivity / side effect / paracetamol

XT - schizophrenia / drug therapy / clozapine

XT - tuberculosis / drug therapy / BCG vaccine

XT - anti human immunodeficiency virus agent / drug therapy / Human immunodeficiency virus infection

XT - BCG vaccine / drug therapy / tuberculosis

XT - clozapine / drug therapy / schizophrenia

XT - corticosteroid / adverse drug reaction / congenital malformation

XT - corticosteroid / drug therapy / hemorrhoid

XT - diazepam / adverse drug reaction / congenital malformation

XT - nonsteroid antiinflammatory agent / drug combination / serotonin uptake inhibitor

XT - paracetamol / adverse drug reaction / behavior disorder

XT - paracetamol / adverse drug reaction / hyperactivity

XT - paracetamol / drug combination / serotonin uptake inhibitor

XT - prostaglandin synthase inhibitor / drug combination / serotonin uptake inhibitor

XT - serotonin uptake inhibitor / drug combination / nonsteroid antiinflammatory agent

XT - serotonin uptake inhibitor / drug combination / paracetamol

XT - serotonin uptake inhibitor / drug combination / prostaglandin synthase inhibitor

XT - temazepam / adverse drug reaction / congenital malformation

XT - zopiclone / adverse drug reaction / congenital malformation

JF - European Journal of Epidemiology

JA - Eur. J. Epidemiol.

LA - English

VL - 28

IS - 1

SP - 1

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UR - https://www.wkap.nl/journalhome.htm/0393-2990

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PT - Article

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ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed14&DO=10.1007%2fs10654-013-9820-0Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Tsukinoki&issn=0393-2990&title=European+Journal+of+Epidemiology&atitle=Non-communicable+disease+epidemic%3A+epidemiology+in+action+%28EuroEpi+2013+and+NordicEpi+2013%29%3A+Aarhus%2C+Denmark+from+11+August+to+14+August+2013&volume=28&issue=1&spage=1&epage=270&date=2013&doi=10.1007%2Fs10654-013-9820-0&pmid=&sid=OVID:embase

294.

TY - JOUR

DB - Embase

AN - 70851159

T1 - Thriving on steroids: An unexpected case of disseminated strongyloidiasis

T3 - American Thoracic Society International Conference, ATS 2011. Denver, CO United States.

T3 - (var.pagings).

A1 - McCannon J.B.

A1 - Huang E.C.

A1 - Vivero M.

A1 - Letourneau A.R.

A1 - McMahon G.

A1 - Rennke H.G.

A1 - Marty F.

A1 - Robinson E.

A1 - Barshak M.

A1 - Sharma S.

Y1 - 2011//

N2 - Introduction: Although disseminated strongyloidiasis is uncommon in the US, it is associated with significant morbidity and mortality. Disseminated infection often occurs in colonized patients who develop immune dysfunction. Case report: A 77 year old man originally from the Azores was hospitalized for progressive edema two months prior to transfer. A 24-hour urine demonstrated nephrotic range proteinuria but a kidney biopsy was deferred because he was anticoagulated for a pulmonary embolism discovered during his evaluation. He was discharged on prednisone 60mg daily. One month later he was admitted with diarrhea and hypotension and found to have E. coli bacteremia. Abdominal CT demonstrated diffuse colonic thickening. An exploratory laparotomy failed to identify a source. The patient had a persistent postoperative ileus and received parenteral alimentation via a PICC line. He developed bacteremia with vancomycin-resistant enterococci (VRE), respiratory failure, and altered mental status. He was transferred to our ICU. Laboratory studies revealed albumin 0.8 g/dL, leukocyte count 17,000 per mm3 with 12% bands, hematocrit 29%, and platelets 139 per mm3. A chest CT showed bilateral, cavitating pulmonary infiltrates. He was treated with imipenem, linezolid and voriconazole. BAL demonstrated filariform and rhabditoid Strongyloides stercoralis larvae (figure 1). The patient was started on subcutaneous ivermectin. CSF examination demonstrated VRE meningitis and 1% eosinophils. Serum beta-glucan and galactomannan were elevated. The serum CMV viral load was positive and he was treated with ganciclovir. Despite aggressive treatment he developed progressive respiratory and renal failure. His family chose not to pursue aggressive interventions. Autopsy revealed pneumonia with angioinvasive aspergillosis, S. stercoralis in the left lower lobe of lung and peritubular and glomerular capillaries (figure 2), and membranous nephropathy. Discussion(s): Immunosuppression is a known risk factor for S. stercoralis dissemination and likely contributed to our patient's presentation (1). There are case reports of disseminated strongyloidiasis in patients with nephrotic syndrome treated with steroids (2,3). These reports have raised the question about a possible causal relationship between parasitic infections and nephritic syndrome, although this has yet to be proven. This case highlights the dangers of empiric corticosteroid use, reminds us to screen for S. stercoralis in patients from endemic areas prior to initiating immunosuppression and to consider the diagnosis of parasitic infection in cases of unexplained bowel flora bacteremia and meningitis in hosts at risk. (Figure presented).

KW - \*strongyloidiasis

KW - \*society

KW - human

KW - patient

KW - bacteremia

KW - serum

KW - meningitis

KW - case report

KW - immunosuppressive treatment

KW - parasitosis

KW - lung embolism

KW - parenteral nutrition

KW - vancomycin resistant Enterococcus

KW - postoperative ileus

KW - laparotomy

KW - eosinophil

KW - kidney biopsy

KW - infection

KW - hypotension

KW - diarrhea

KW - Escherichia coli

KW - kidney failure

KW - pneumonia

KW - glomerulus capillary

KW - respiratory failure

KW - mental health

KW - proteinuria

KW - mortality

KW - urine

KW - thrombocyte

KW - edema

KW - thorax

KW - lung infiltrate

KW - Strongyloides stercoralis

KW - larva

KW - morbidity

KW - examination

KW - hematocrit

KW - leukocyte count

KW - Atlantic islands

KW - virus load

KW - autopsy

KW - membranous glomerulonephritis

KW - aspergillosis

KW - lung

KW - laboratory

KW - male

KW - risk factor

KW - nephrotic syndrome

KW - nephritis

KW - diagnosis

KW - intestine flora

KW - risk

KW - cerebrospinal fluid

KW - \*steroid

KW - ivermectin

KW - imipenem

KW - beta glucan

KW - prednisone

KW - linezolid

KW - voriconazole

KW - albumin

KW - galactomannan

KW - ganciclovir

KW - corticosteroid

JF - American Journal of Respiratory and Critical Care Medicine

JA - Am. J. Respir. Crit. Care Med.

LA - English

VL - 183

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SP -

PB - American Thoracic Society

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UR - http://ajrccm.atsjournals.org/cgi/reprint/183/1\_MeetingAbstracts/A6471?sid=58502103-25cc-46ee-81a7-4a222ef4bf38

PT - Conference Abstract

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed12&NEWS=N&AN=70851159

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed12&AN=70851159Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=McCannon&issn=1073-449X&title=American+Journal+of+Respiratory+and+Critical+Care+Medicine&atitle=Thriving+on+steroids%3A+An+unexpected+case+of+disseminated+strongyloidiasis&volume=183&issue=1+MeetingAbstracts&spage=&epage=&date=2011&doi=&pmid=&sid=OVID:embase

295.

TY - JOUR

DB - Embase

AN - 362454990

ID - 21671865 [https://www.ncbi.nlm.nih.gov/pubmed/?term=21671865]

T1 - Rational design and development of colon-specific prodrugs

A1 - Dhaneshwar S.S.

A1 - Vadnerkar G.

Y1 - 2011//

N2 - Earlier colon was considered as a black-box, acting as a site for production and temporary storage of excreta and responsible for absorption of electrolytes and water. But, with the discovery of sulfasalazine as colon-specific pro-drug, the promising and challenging issue of treating local pathologies was presented with colon as an organ of significance for target-specific delivery of drugs. The need and desirable attributes of colon-specific drug delivery systems have been well recognized, extensively explored and documented in the literature. The success of a colon-specific prodrug depends on its rational design and understanding the demands of the organ to be targeted and the delivery system to be developed. The present review mainly focuses on anatomy/physiology of colon, colonic microbiota, enzymatic set up of colon, pathophysiology of local diseases of colon, factors, obstacles and rationale for designing colon specific drug delivery system, various targets, potential drug candidates and novel colon-targeting carriers along with varied linkages that could be explored, merits and demerits of this design and recent trends in this field. Brief review of methodologies for characterization and in vitro/in vivo release studies is presented. The available animal models with quantifying parameters for evaluating colon-targeting potential and effectiveness of the colon-specific prodrugs for inflammatory bowel disease is also included in this review. © 2011 Bentham Science Publishers.

KW - abdominal pain/si [Side Effect]

KW - acne/si [Side Effect]

KW - agranulocytosis/si [Side Effect]

KW - amebiasis/dt [Drug Therapy]

KW - anorexia/si [Side Effect]

KW - antiinflammatory activity

KW - antioxidant activity

KW - arthralgia/si [Side Effect]

KW - birth defect/si [Side Effect]

KW - bone marrow disease/si [Side Effect]

KW - bone marrow suppression/si [Side Effect]

KW - cancer adjuvant therapy

KW - cancer combination chemotherapy

KW - cataract/si [Side Effect]

KW - cell differentiation

KW - colon flora

KW - colorectal cancer/dt [Drug Therapy]

KW - congenital disorder/si [Side Effect]

KW - connective tissue disease/si [Side Effect]

KW - convulsion/si [Side Effect]

KW - Crohn disease/dt [Drug Therapy]

KW - Crohn disease/et [Etiology]

KW - Crohn disease/pc [Prevention]

KW - cytokine production

KW - depression/si [Side Effect]

KW - diabetes mellitus/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - digestive system ulcer/si [Side Effect]

KW - disease association

KW - drug bioavailability

KW - drug conjugation

KW - drug design

KW - drug efficacy

KW - drug eruption/si [Side Effect]

KW - drug fever/si [Side Effect]

KW - drug formulation

KW - drug hypersensitivity/si [Side Effect]

KW - drug induced headache/si [Side Effect]

KW - drug megadose

KW - drug safety

KW - drug solubility

KW - drug stability

KW - drug targeting

KW - drug tolerance

KW - enteritis/dt [Drug Therapy]

KW - \*enteritis/dt [Drug Therapy]

KW - \*enteritis/et [Etiology]

KW - \*enteritis/pc [Prevention]

KW - fatigue/si [Side Effect]

KW - fetus death

KW - first pass effect

KW - gastrointestinal absorption

KW - gastrointestinal tract

KW - glaucoma/si [Side Effect]

KW - glossitis/si [Side Effect]

KW - hemolytic anemia/si [Side Effect]

KW - hepatitis/si [Side Effect]

KW - hirsutism/si [Side Effect]

KW - histopathology

KW - human

KW - hydrophilicity

KW - hypertension/si [Side Effect]

KW - ileitis/co [Complication]

KW - in vitro study

KW - in vivo study

KW - infection sensitivity

KW - insomnia/si [Side Effect]

KW - intestine transit time

KW - irritability

KW - irritable colon/dt [Drug Therapy]

KW - kidney failure/si [Side Effect]

KW - kidney injury/si [Side Effect]

KW - leukemia/si [Side Effect]

KW - leukopenia/si [Side Effect]

KW - lipid peroxidation

KW - liver disease/si [Side Effect]

KW - lymphocyte function

KW - macrophage activation

KW - male infertility/si [Side Effect]

KW - menstrual irregularity/si [Side Effect]

KW - muscle atrophy/si [Side Effect]

KW - nausea/si [Side Effect]

KW - nephritis/si [Side Effect]

KW - neutropenia/si [Side Effect]

KW - nonhuman

KW - opportunistic infection/si [Side Effect]

KW - osteoporosis/si [Side Effect]

KW - oxidative stress

KW - pancreatitis/si [Side Effect]

KW - paresthesia/si [Side Effect]

KW - patient compliance

KW - personality disorder/si [Side Effect]

KW - pneumonia/si [Side Effect]

KW - psychosis/si [Side Effect]

KW - quality of life

KW - respiratory tract infection/si [Side Effect]

KW - review

KW - rheumatoid arthritis/dt [Drug Therapy]

KW - shelf life

KW - side effect/si [Side Effect]

KW - spontaneous abortion/si [Side Effect]

KW - stomach motility

KW - stomach pH

KW - stomach pressure

KW - stomach secretion

KW - taste disorder/si [Side Effect]

KW - thrombocytopenia/si [Side Effect]

KW - treatment duration

KW - ulcerative colitis/dt [Drug Therapy]

KW - ulcerative colitis/et [Etiology]

KW - ulcerative colitis/pc [Prevention]

KW - urticaria/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - weight gain

KW - aminosalicylic acid/ae [Adverse Drug Reaction]

KW - aminosalicylic acid/cb [Drug Combination]

KW - aminosalicylic acid/dt [Drug Therapy]

KW - aminosalicylic acid/po [Oral Drug Administration]

KW - aminosalicylic acid/pk [Pharmacokinetics]

KW - aminosalicylic acid/pd [Pharmacology]

KW - aminosalicylic acid/rc [Rectal Drug Administration]

KW - aminosalicylic acid/tp [Topical Drug Administration]

KW - azathioprine/ae [Adverse Drug Reaction]

KW - azathioprine/cb [Drug Combination]

KW - azathioprine/pk [Pharmacokinetics]

KW - azathioprine/pd [Pharmacology]

KW - balsalazide/ae [Adverse Drug Reaction]

KW - balsalazide/cb [Drug Combination]

KW - balsalazide/dt [Drug Therapy]

KW - balsalazide/po [Oral Drug Administration]

KW - bevacizumab/cb [Drug Combination]

KW - bevacizumab/dt [Drug Therapy]

KW - budesonide

KW - cetuximab/cb [Drug Combination]

KW - cetuximab/dt [Drug Therapy]

KW - corticosteroid/ae [Adverse Drug Reaction]

KW - corticosteroid/cb [Drug Combination]

KW - corticosteroid/dt [Drug Therapy]

KW - corticosteroid/pk [Pharmacokinetics]

KW - corticosteroid/pd [Pharmacology]

KW - corticosteroid/rc [Rectal Drug Administration]

KW - corticosteroid/tp [Topical Drug Administration]

KW - cyclosporin A/dt [Drug Therapy]

KW - cyclosporin A/iv [Intravenous Drug Administration]

KW - cyclosporin A/pk [Pharmacokinetics]

KW - cyclosporin A/pd [Pharmacology]

KW - fluorouracil/po [Oral Drug Administration]

KW - fluorouracil/pa [Parenteral Drug Administration]

KW - fluorouracil/pd [Pharmacology]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 8/ec [Endogenous Compound]

KW - loperamide/dt [Drug Therapy]

KW - mercaptopurine/ae [Adverse Drug Reaction]

KW - mercaptopurine/cb [Drug Combination]

KW - mesalazine

KW - methotrexate/ae [Adverse Drug Reaction]

KW - methotrexate/dt [Drug Therapy]

KW - metronidazole/ae [Adverse Drug Reaction]

KW - metronidazole/dt [Drug Therapy]

KW - metronidazole/po [Oral Drug Administration]

KW - metronidazole/pk [Pharmacokinetics]

KW - metronidazole/pd [Pharmacology]

KW - metronidazole/rc [Rectal Drug Administration]

KW - mycophenolic acid/ae [Adverse Drug Reaction]

KW - mycophenolic acid/dt [Drug Therapy]

KW - mycophenolic acid/pk [Pharmacokinetics]

KW - mycophenolic acid/pd [Pharmacology]

KW - mycophenolic acid 2 morpholinoethyl ester

KW - olsalazine/po [Oral Drug Administration]

KW - olsalazine/pk [Pharmacokinetics]

KW - olsalazine/pd [Pharmacology]

KW - peroxisome proliferator activated receptor gamma/ec [Endogenous Compound]

KW - polyamidoamine

KW - prednisolone/dt [Drug Therapy]

KW - prednisolone/pk [Pharmacokinetics]

KW - prednisolone/pd [Pharmacology]

KW - \*prodrug

KW - rifaximin/dt [Drug Therapy]

KW - s adenosylmethionine/dt [Drug Therapy]

KW - s adenosylmethionine/pd [Pharmacology]

KW - salazosulfapyridine/ae [Adverse Drug Reaction]

KW - salazosulfapyridine/cb [Drug Combination]

KW - salazosulfapyridine/dt [Drug Therapy]

KW - salazosulfapyridine/po [Oral Drug Administration]

KW - salazosulfapyridine/pd [Pharmacology]

KW - taurine/pd [Pharmacology]

KW - thalidomide

KW - tumor necrosis factor alpha/ec [Endogenous Compound]

KW - unclassified drug

KW - unindexed drug

KW - intestinol

XT - abdominal pain / side effect / balsalazide

XT - acne / side effect / corticosteroid

XT - agranulocytosis / side effect / salazosulfapyridine

XT - amebiasis / drug therapy / metronidazole

XT - anorexia / side effect / salazosulfapyridine

XT - arthralgia / side effect / balsalazide

XT - birth defect / side effect / methotrexate

XT - bone marrow disease / side effect / methotrexate

XT - bone marrow suppression / side effect / azathioprine

XT - bone marrow suppression / side effect / mercaptopurine

XT - bone marrow suppression / side effect / salazosulfapyridine

XT - cataract / side effect / corticosteroid

XT - colorectal cancer / drug therapy / bevacizumab

XT - colorectal cancer / drug therapy / cetuximab

XT - congenital disorder / side effect / methotrexate

XT - connective tissue disease / side effect / salazosulfapyridine

XT - convulsion / side effect / metronidazole

XT - Crohn disease / drug therapy / cyclosporin A

XT - Crohn disease / drug therapy / methotrexate

XT - Crohn disease / drug therapy / mycophenolic acid

XT - Crohn disease / drug therapy / rifaximin

XT - depression / side effect / corticosteroid

XT - diabetes mellitus / side effect / corticosteroid

XT - diarrhea / side effect / balsalazide

XT - digestive system ulcer / side effect / corticosteroid

XT - drug eruption / side effect / mycophenolic acid

XT - drug eruption / side effect / salazosulfapyridine

XT - drug fever / side effect / salazosulfapyridine

XT - drug hypersensitivity / side effect / salazosulfapyridine

XT - drug induced headache / side effect / balsalazide

XT - drug induced headache / side effect / metronidazole

XT - drug induced headache / side effect / salazosulfapyridine

XT - enteritis / drug therapy / s adenosylmethionine

XT - fatigue / side effect / methotrexate

XT - glaucoma / side effect / corticosteroid

XT - glossitis / side effect / metronidazole

XT - hemolytic anemia / side effect / salazosulfapyridine

XT - hepatitis / side effect / mycophenolic acid

XT - hepatitis / side effect / salazosulfapyridine

XT - hirsutism / side effect / corticosteroid

XT - hypertension / side effect / corticosteroid

XT - hypertension / side effect / mycophenolic acid

XT - insomnia / side effect / corticosteroid

XT - irritable colon / drug therapy / loperamide

XT - kidney failure / side effect / mycophenolic acid

XT - kidney injury / side effect / aminosalicylic acid

XT - leukemia / side effect / salazosulfapyridine

XT - leukopenia / side effect / mycophenolic acid

XT - liver disease / side effect / methotrexate

XT - male infertility / side effect / salazosulfapyridine

XT - menstrual irregularity / side effect / corticosteroid

XT - muscle atrophy / side effect / corticosteroid

XT - nausea / side effect / balsalazide

XT - nausea / side effect / methotrexate

XT - nausea / side effect / metronidazole

XT - nausea / side effect / mycophenolic acid

XT - nausea / side effect / salazosulfapyridine

XT - nephritis / side effect / salazosulfapyridine

XT - neutropenia / side effect / salazosulfapyridine

XT - opportunistic infection / side effect / mycophenolic acid

XT - osteoporosis / side effect / corticosteroid

XT - pancreatitis / side effect / aminosalicylic acid

XT - pancreatitis / side effect / salazosulfapyridine

XT - paresthesia / side effect / metronidazole

XT - personality disorder / side effect / corticosteroid

XT - pneumonia / side effect / salazosulfapyridine

XT - psychosis / side effect / corticosteroid

XT - respiratory tract infection / side effect / balsalazide

XT - rheumatoid arthritis / drug therapy / salazosulfapyridine

XT - spontaneous abortion / side effect / methotrexate

XT - taste disorder / side effect / metronidazole

XT - thrombocytopenia / side effect / mycophenolic acid

XT - ulcerative colitis / drug therapy / aminosalicylic acid

XT - ulcerative colitis / drug therapy / balsalazide

XT - ulcerative colitis / drug therapy / corticosteroid

XT - ulcerative colitis / drug therapy / methotrexate

XT - ulcerative colitis / drug therapy / prednisolone

XT - ulcerative colitis / drug therapy / rifaximin

XT - ulcerative colitis / drug therapy / salazosulfapyridine

XT - urticaria / side effect / metronidazole

XT - vomiting / side effect / balsalazide

XT - vomiting / side effect / methotrexate

XT - vomiting / side effect / metronidazole

XT - vomiting / side effect / salazosulfapyridine

XT - aminosalicylic acid / adverse drug reaction / kidney injury

XT - aminosalicylic acid / adverse drug reaction / pancreatitis

XT - aminosalicylic acid / drug combination / balsalazide

XT - aminosalicylic acid / drug combination / salazosulfapyridine

XT - aminosalicylic acid / drug therapy / ulcerative colitis

XT - azathioprine / adverse drug reaction / bone marrow suppression

XT - azathioprine / drug combination / corticosteroid

XT - azathioprine / drug combination / mercaptopurine

XT - balsalazide / adverse drug reaction / abdominal pain

XT - balsalazide / adverse drug reaction / arthralgia

XT - balsalazide / adverse drug reaction / diarrhea

XT - balsalazide / adverse drug reaction / drug induced headache

XT - balsalazide / adverse drug reaction / nausea

XT - balsalazide / adverse drug reaction / respiratory tract infection

XT - balsalazide / adverse drug reaction / vomiting

XT - balsalazide / drug combination / aminosalicylic acid

XT - balsalazide / drug therapy / ulcerative colitis

XT - bevacizumab / drug combination / cetuximab

XT - bevacizumab / drug therapy / colorectal cancer

XT - cetuximab / drug combination / bevacizumab

XT - cetuximab / drug therapy / colorectal cancer

XT - corticosteroid / adverse drug reaction / acne

XT - corticosteroid / adverse drug reaction / cataract

XT - corticosteroid / adverse drug reaction / depression

XT - corticosteroid / adverse drug reaction / diabetes mellitus

XT - corticosteroid / adverse drug reaction / digestive system ulcer

XT - corticosteroid / adverse drug reaction / glaucoma

XT - corticosteroid / adverse drug reaction / hirsutism

XT - corticosteroid / adverse drug reaction / hypertension

XT - corticosteroid / adverse drug reaction / insomnia

XT - corticosteroid / adverse drug reaction / menstrual irregularity

XT - corticosteroid / adverse drug reaction / muscle atrophy

XT - corticosteroid / adverse drug reaction / osteoporosis

XT - corticosteroid / adverse drug reaction / personality disorder

XT - corticosteroid / adverse drug reaction / psychosis

XT - corticosteroid / drug combination / azathioprine

XT - corticosteroid / drug therapy / ulcerative colitis

XT - cyclosporin A / drug therapy / Crohn disease

XT - loperamide / drug therapy / irritable colon

XT - mercaptopurine / adverse drug reaction / bone marrow suppression

XT - mercaptopurine / drug combination / azathioprine

XT - methotrexate / adverse drug reaction / birth defect

XT - methotrexate / adverse drug reaction / bone marrow disease

XT - methotrexate / adverse drug reaction / congenital disorder

XT - methotrexate / adverse drug reaction / fatigue

XT - methotrexate / adverse drug reaction / liver disease

XT - methotrexate / adverse drug reaction / nausea

XT - methotrexate / adverse drug reaction / spontaneous abortion

XT - methotrexate / adverse drug reaction / vomiting

XT - methotrexate / drug therapy / Crohn disease

XT - methotrexate / drug therapy / ulcerative colitis

XT - metronidazole / adverse drug reaction / convulsion

XT - metronidazole / adverse drug reaction / drug induced headache

XT - metronidazole / adverse drug reaction / glossitis

XT - metronidazole / adverse drug reaction / nausea

XT - metronidazole / adverse drug reaction / paresthesia

XT - metronidazole / adverse drug reaction / taste disorder

XT - metronidazole / adverse drug reaction / urticaria

XT - metronidazole / adverse drug reaction / vomiting

XT - metronidazole / drug therapy / amebiasis

XT - mycophenolic acid / adverse drug reaction / drug eruption

XT - mycophenolic acid / adverse drug reaction / hepatitis

XT - mycophenolic acid / adverse drug reaction / hypertension

XT - mycophenolic acid / adverse drug reaction / kidney failure

XT - mycophenolic acid / adverse drug reaction / leukopenia

XT - mycophenolic acid / adverse drug reaction / nausea

XT - mycophenolic acid / adverse drug reaction / opportunistic infection

XT - mycophenolic acid / adverse drug reaction / thrombocytopenia

XT - mycophenolic acid / drug therapy / Crohn disease

XT - prednisolone / drug therapy / ulcerative colitis

XT - rifaximin / drug therapy / Crohn disease

XT - rifaximin / drug therapy / ulcerative colitis

XT - s adenosylmethionine / drug therapy / enteritis

XT - salazosulfapyridine / adverse drug reaction / agranulocytosis

XT - salazosulfapyridine / adverse drug reaction / anorexia

XT - salazosulfapyridine / adverse drug reaction / bone marrow suppression

XT - salazosulfapyridine / adverse drug reaction / connective tissue disease

XT - salazosulfapyridine / adverse drug reaction / drug eruption

XT - salazosulfapyridine / adverse drug reaction / drug fever

XT - salazosulfapyridine / adverse drug reaction / drug hypersensitivity

XT - salazosulfapyridine / adverse drug reaction / drug induced headache

XT - salazosulfapyridine / adverse drug reaction / hemolytic anemia

XT - salazosulfapyridine / adverse drug reaction / hepatitis

XT - salazosulfapyridine / adverse drug reaction / leukemia

XT - salazosulfapyridine / adverse drug reaction / male infertility

XT - salazosulfapyridine / adverse drug reaction / nausea

XT - salazosulfapyridine / adverse drug reaction / nephritis

XT - salazosulfapyridine / adverse drug reaction / neutropenia

XT - salazosulfapyridine / adverse drug reaction / pancreatitis

XT - salazosulfapyridine / adverse drug reaction / pneumonia

XT - salazosulfapyridine / adverse drug reaction / vomiting

XT - salazosulfapyridine / drug combination / aminosalicylic acid

XT - salazosulfapyridine / drug therapy / rheumatoid arthritis

XT - salazosulfapyridine / drug therapy / ulcerative colitis

JF - Current Topics in Medicinal Chemistry

JA - Curr. Top. Med. Chem.

LA - English

VL - 11

IS - 18

SP - 2318

EP - 2345

CY - Netherlands

PB - Bentham Science Publishers B.V. (P.O. Box 294, Bussum 1400 AG, Netherlands)

SN - 1568-0266

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M1 - (Dhaneshwar, Vadnerkar) Department of Pharmaceutical Chemistry, Bharati Vidyapeeth University, Poona College of Pharmacy, Pune-411 038, Maharashtra, India

C3 - colazal, dipentum, imodium, intestinol, salazopyrin

DO - https://dx.doi.org/10.2174/156802611797183249

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed12&NEWS=N&AN=362454990

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed12&DO=10.2174%2f156802611797183249Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Dhaneshwar&issn=1568-0266&title=Current+Topics+in+Medicinal+Chemistry&atitle=Rational+design+and+development+of+colon-specific+prodrugs&volume=11&issue=18&spage=2318&epage=2345&date=2011&doi=10.2174%2F156802611797183249&pmid=21671865&sid=OVID:embase

296.

TY - JOUR

DB - Embase

AN - 362290279

ID - 21810048 [https://www.ncbi.nlm.nih.gov/pubmed/?term=21810048]

T1 - Fidaxomicin: First-in-class macrocyclic antibiotic

A1 - Mullane K.M.

A1 - Gorbach S.

Y1 - 2011//

N2 - The incidence of Clostridium difficile has doubled over the past 15 years, and rising mortality rates associated with this infection have followed in its wake. C. difficile infection (CDI) has supplanted methicillin-resistant Staphylococcus aureus as the major cause of nosocomial infection. An insufficient response rate to currently available CDI therapies has prompted the search for new and alternative treatment modalities for this disease. The investigational pipeline includes evaluation of new antimicrobial agents that exhibit good activity against C. difficile without altering normal gut flora, C. difficile toxin-absorbing compounds, and preformed antibodies and vaccines against C. difficile toxin. In two robust clinical trials comparing fidaxomicin to vancomycin in the treatment of CDI, treatment with fidaxomicin demonstrated a superior global cure (cure without recurrence) rate compared with the current gold standard, vancomycin. Fidaxomicin, the first of a new class of macrocyclic antimicrobial agents, represents an advance in the management of CDI. © 2011 Expert Reviews Ltd.

KW - abdominal distension/si [Side Effect]

KW - abdominal pain/si [Side Effect]

KW - acute kidney failure/si [Side Effect]

KW - anemia/si [Side Effect]

KW - antibacterial activity

KW - arthralgia/si [Side Effect]

KW - backache/si [Side Effect]

KW - bacteremia/si [Side Effect]

KW - bacterial strain

KW - bacterial virulence

KW - blood analysis

KW - blood toxicity/si [Side Effect]

KW - chill/si [Side Effect]

KW - clinical trial (topic)

KW - Clostridium difficile

KW - Clostridium difficile infection/dt [Drug Therapy]

KW - Clostridium difficile infection/si [Side Effect]

KW - connective tissue disease/si [Side Effect]

KW - constipation/si [Side Effect]

KW - coughing/si [Side Effect]

KW - cross resistance

KW - dehydration/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - dizziness/si [Side Effect]

KW - drug absorption

KW - drug blood level

KW - drug dose comparison

KW - drug efficacy

KW - drug feces level

KW - drug fever/si [Side Effect]

KW - drug induced headache/si [Side Effect]

KW - drug potency

KW - drug potentiation

KW - drug structure

KW - drug treatment failure

KW - drug urine level

KW - dyspepsia/si [Side Effect]

KW - dyspnea/si [Side Effect]

KW - edema/si [Side Effect]

KW - falling

KW - fatigue/si [Side Effect]

KW - flatulence/si [Side Effect]

KW - gastrointestinal symptom/si [Side Effect]

KW - hospital infection

KW - human

KW - hyperkalemia/si [Side Effect]

KW - hypoglycemia/si [Side Effect]

KW - hypokalemia/si [Side Effect]

KW - hypomagnesemia/si [Side Effect]

KW - hyponatremia/si [Side Effect]

KW - insomnia/si [Side Effect]

KW - intestine flora

KW - kidney function test

KW - limb pain/si [Side Effect]

KW - liver function test

KW - lymphatic system disease/si [Side Effect]

KW - mediastinum disease/si [Side Effect]

KW - mental disease/si [Side Effect]

KW - metabolic disorder/si [Side Effect]

KW - methicillin resistant Staphylococcus aureus infection

KW - minimum inhibitory concentration

KW - mortality

KW - multiple drug dose

KW - musculoskeletal disease/si [Side Effect]

KW - nausea/si [Side Effect]

KW - nephrotoxicity/si [Side Effect]

KW - neurologic disease/si [Side Effect]

KW - nonhuman

KW - nutritional disorder/si [Side Effect]

KW - outcome assessment

KW - pain/si [Side Effect]

KW - peripheral edema/si [Side Effect]

KW - pneumonia/si [Side Effect]

KW - postantibiotic effect

KW - QT prolongation/si [Side Effect]

KW - recurrence risk

KW - recurrent infection

KW - respiratory tract disease/si [Side Effect]

KW - review

KW - risk reduction

KW - sepsis/si [Side Effect]

KW - side effect/si [Side Effect]

KW - thorax disease/si [Side Effect]

KW - treatment duration

KW - unspecified side effect/si [Side Effect]

KW - upper abdominal pain/si [Side Effect]

KW - urinary tract disease/si [Side Effect]

KW - urinary tract infection/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - ampicillin/it [Drug Interaction]

KW - ciprofloxacin/it [Drug Interaction]

KW - clindamycin/it [Drug Interaction]

KW - Clostridium difficile toxin A

KW - Clostridium difficile toxin B

KW - drug metabolite

KW - \*fidaxomicin/ae [Adverse Drug Reaction]

KW - \*fidaxomicin/ct [Clinical Trial]

KW - \*fidaxomicin/an [Drug Analysis]

KW - \*fidaxomicin/cm [Drug Comparison]

KW - \*fidaxomicin/cr [Drug Concentration]

KW - \*fidaxomicin/do [Drug Dose]

KW - \*fidaxomicin/it [Drug Interaction]

KW - \*fidaxomicin/dt [Drug Therapy]

KW - \*fidaxomicin/po [Oral Drug Administration]

KW - \*fidaxomicin/pk [Pharmacokinetics]

KW - \*fidaxomicin/pd [Pharmacology]

KW - metronidazole/cm [Drug Comparison]

KW - metronidazole/it [Drug Interaction]

KW - metronidazole/dt [Drug Therapy]

KW - rifampicin/it [Drug Interaction]

KW - unclassified drug

KW - vancomycin/ae [Adverse Drug Reaction]

KW - vancomycin/ct [Clinical Trial]

KW - vancomycin/cm [Drug Comparison]

KW - vancomycin/it [Drug Interaction]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/po [Oral Drug Administration]

KW - op 1118

XT - abdominal distension / side effect / fidaxomicin

XT - abdominal distension / side effect / vancomycin

XT - abdominal pain / side effect / fidaxomicin

XT - abdominal pain / side effect / vancomycin

XT - acute kidney failure / side effect / fidaxomicin

XT - acute kidney failure / side effect / vancomycin

XT - anemia / side effect / fidaxomicin

XT - anemia / side effect / vancomycin

XT - arthralgia / side effect / fidaxomicin

XT - arthralgia / side effect / vancomycin

XT - backache / side effect / fidaxomicin

XT - backache / side effect / vancomycin

XT - bacteremia / side effect / fidaxomicin

XT - blood toxicity / side effect / fidaxomicin

XT - blood toxicity / side effect / vancomycin

XT - chill / side effect / fidaxomicin

XT - chill / side effect / vancomycin

XT - Clostridium difficile infection / drug therapy / fidaxomicin

XT - Clostridium difficile infection / drug therapy / metronidazole

XT - Clostridium difficile infection / drug therapy / vancomycin

XT - Clostridium difficile infection / side effect / fidaxomicin

XT - Clostridium difficile infection / side effect / vancomycin

XT - connective tissue disease / side effect / fidaxomicin

XT - connective tissue disease / side effect / vancomycin

XT - constipation / side effect / fidaxomicin

XT - constipation / side effect / vancomycin

XT - coughing / side effect / fidaxomicin

XT - coughing / side effect / vancomycin

XT - dehydration / side effect / fidaxomicin

XT - dehydration / side effect / vancomycin

XT - diarrhea / side effect / fidaxomicin

XT - diarrhea / side effect / vancomycin

XT - dizziness / side effect / fidaxomicin

XT - dizziness / side effect / vancomycin

XT - drug fever / side effect / fidaxomicin

XT - drug fever / side effect / vancomycin

XT - drug induced headache / side effect / vancomycin

XT - dyspepsia / side effect / fidaxomicin

XT - dyspepsia / side effect / vancomycin

XT - dyspnea / side effect / fidaxomicin

XT - dyspnea / side effect / vancomycin

XT - edema / side effect / fidaxomicin

XT - fatigue / side effect / fidaxomicin

XT - fatigue / side effect / vancomycin

XT - flatulence / side effect / fidaxomicin

XT - flatulence / side effect / vancomycin

XT - gastrointestinal symptom / side effect / fidaxomicin

XT - gastrointestinal symptom / side effect / vancomycin

XT - hyperkalemia / side effect / fidaxomicin

XT - hyperkalemia / side effect / vancomycin

XT - hypoglycemia / side effect / fidaxomicin

XT - hypoglycemia / side effect / vancomycin

XT - hypokalemia / side effect / fidaxomicin

XT - hypokalemia / side effect / vancomycin

XT - hypomagnesemia / side effect / fidaxomicin

XT - hypomagnesemia / side effect / vancomycin

XT - hyponatremia / side effect / fidaxomicin

XT - hyponatremia / side effect / vancomycin

XT - insomnia / side effect / fidaxomicin

XT - insomnia / side effect / vancomycin

XT - limb pain / side effect / fidaxomicin

XT - limb pain / side effect / vancomycin

XT - lymphatic system disease / side effect / fidaxomicin

XT - lymphatic system disease / side effect / vancomycin

XT - mediastinum disease / side effect / fidaxomicin

XT - mediastinum disease / side effect / vancomycin

XT - mental disease / side effect / fidaxomicin

XT - mental disease / side effect / vancomycin

XT - metabolic disorder / side effect / fidaxomicin

XT - metabolic disorder / side effect / vancomycin

XT - musculoskeletal disease / side effect / fidaxomicin

XT - musculoskeletal disease / side effect / vancomycin

XT - nausea / side effect / fidaxomicin

XT - nausea / side effect / vancomycin

XT - nephrotoxicity / side effect / fidaxomicin

XT - nephrotoxicity / side effect / vancomycin

XT - neurologic disease / side effect / fidaxomicin

XT - neurologic disease / side effect / vancomycin

XT - nutritional disorder / side effect / fidaxomicin

XT - nutritional disorder / side effect / vancomycin

XT - pain / side effect / fidaxomicin

XT - pain / side effect / vancomycin

XT - peripheral edema / side effect / fidaxomicin

XT - peripheral edema / side effect / vancomycin

XT - pneumonia / side effect / fidaxomicin

XT - pneumonia / side effect / vancomycin

XT - QT prolongation / side effect / fidaxomicin

XT - QT prolongation / side effect / vancomycin

XT - respiratory tract disease / side effect / fidaxomicin

XT - respiratory tract disease / side effect / vancomycin

XT - sepsis / side effect / fidaxomicin

XT - sepsis / side effect / vancomycin

XT - thorax disease / side effect / fidaxomicin

XT - thorax disease / side effect / vancomycin

XT - unspecified side effect / side effect / fidaxomicin

XT - unspecified side effect / side effect / vancomycin

XT - upper abdominal pain / side effect / fidaxomicin

XT - upper abdominal pain / side effect / vancomycin

XT - urinary tract disease / side effect / fidaxomicin

XT - urinary tract disease / side effect / vancomycin

XT - urinary tract infection / side effect / fidaxomicin

XT - urinary tract infection / side effect / vancomycin

XT - vomiting / side effect / fidaxomicin

XT - vomiting / side effect / vancomycin

XT - ampicillin / drug interaction / fidaxomicin

XT - ciprofloxacin / drug interaction / fidaxomicin

XT - clindamycin / drug interaction / fidaxomicin

XT - fidaxomicin / adverse drug reaction / abdominal distension

XT - fidaxomicin / adverse drug reaction / abdominal pain

XT - fidaxomicin / adverse drug reaction / acute kidney failure

XT - fidaxomicin / adverse drug reaction / anemia

XT - fidaxomicin / adverse drug reaction / arthralgia

XT - fidaxomicin / adverse drug reaction / backache

XT - fidaxomicin / adverse drug reaction / bacteremia

XT - fidaxomicin / adverse drug reaction / blood toxicity

XT - fidaxomicin / adverse drug reaction / chill

XT - fidaxomicin / adverse drug reaction / Clostridium difficile infection

XT - fidaxomicin / adverse drug reaction / connective tissue disease

XT - fidaxomicin / adverse drug reaction / constipation

XT - fidaxomicin / adverse drug reaction / coughing

XT - fidaxomicin / adverse drug reaction / dehydration

XT - fidaxomicin / adverse drug reaction / diarrhea

XT - fidaxomicin / adverse drug reaction / dizziness

XT - fidaxomicin / adverse drug reaction / drug fever

XT - fidaxomicin / adverse drug reaction / dyspepsia

XT - fidaxomicin / adverse drug reaction / dyspnea

XT - fidaxomicin / adverse drug reaction / edema

XT - fidaxomicin / adverse drug reaction / fatigue

XT - fidaxomicin / adverse drug reaction / flatulence

XT - fidaxomicin / adverse drug reaction / gastrointestinal symptom

XT - fidaxomicin / adverse drug reaction / hyperkalemia

XT - fidaxomicin / adverse drug reaction / hypoglycemia

XT - fidaxomicin / adverse drug reaction / hypokalemia

XT - fidaxomicin / adverse drug reaction / hypomagnesemia

XT - fidaxomicin / adverse drug reaction / hyponatremia

XT - fidaxomicin / adverse drug reaction / insomnia

XT - fidaxomicin / adverse drug reaction / limb pain

XT - fidaxomicin / adverse drug reaction / lymphatic system disease

XT - fidaxomicin / adverse drug reaction / mediastinum disease

XT - fidaxomicin / adverse drug reaction / mental disease

XT - fidaxomicin / adverse drug reaction / metabolic disorder

XT - fidaxomicin / adverse drug reaction / musculoskeletal disease

XT - fidaxomicin / adverse drug reaction / nausea

XT - fidaxomicin / adverse drug reaction / nephrotoxicity

XT - fidaxomicin / adverse drug reaction / neurologic disease

XT - fidaxomicin / adverse drug reaction / nutritional disorder

XT - fidaxomicin / adverse drug reaction / pain

XT - fidaxomicin / adverse drug reaction / peripheral edema

XT - fidaxomicin / adverse drug reaction / pneumonia

XT - fidaxomicin / adverse drug reaction / QT prolongation

XT - fidaxomicin / adverse drug reaction / respiratory tract disease

XT - fidaxomicin / adverse drug reaction / sepsis

XT - fidaxomicin / adverse drug reaction / thorax disease

XT - fidaxomicin / adverse drug reaction / unspecified side effect

XT - fidaxomicin / adverse drug reaction / upper abdominal pain

XT - fidaxomicin / adverse drug reaction / urinary tract disease

XT - fidaxomicin / adverse drug reaction / urinary tract infection

XT - fidaxomicin / adverse drug reaction / vomiting

XT - fidaxomicin / drug comparison / metronidazole

XT - fidaxomicin / drug comparison / vancomycin

XT - fidaxomicin / drug interaction / ampicillin

XT - fidaxomicin / drug interaction / ciprofloxacin

XT - fidaxomicin / drug interaction / clindamycin

XT - fidaxomicin / drug interaction / metronidazole

XT - fidaxomicin / drug interaction / rifampicin

XT - fidaxomicin / drug interaction / vancomycin

XT - fidaxomicin / drug therapy / Clostridium difficile infection

XT - metronidazole / drug comparison / fidaxomicin

XT - metronidazole / drug interaction / fidaxomicin

XT - metronidazole / drug therapy / Clostridium difficile infection

XT - rifampicin / drug interaction / fidaxomicin

XT - vancomycin / adverse drug reaction / abdominal distension

XT - vancomycin / adverse drug reaction / abdominal pain

XT - vancomycin / adverse drug reaction / acute kidney failure

XT - vancomycin / adverse drug reaction / anemia

XT - vancomycin / adverse drug reaction / arthralgia

XT - vancomycin / adverse drug reaction / backache

XT - vancomycin / adverse drug reaction / blood toxicity

XT - vancomycin / adverse drug reaction / chill

XT - vancomycin / adverse drug reaction / Clostridium difficile infection

XT - vancomycin / adverse drug reaction / connective tissue disease

XT - vancomycin / adverse drug reaction / constipation

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XT - vancomycin / adverse drug reaction / diarrhea

XT - vancomycin / adverse drug reaction / dizziness

XT - vancomycin / adverse drug reaction / drug fever

XT - vancomycin / adverse drug reaction / drug induced headache

XT - vancomycin / adverse drug reaction / dyspepsia

XT - vancomycin / adverse drug reaction / dyspnea

XT - vancomycin / adverse drug reaction / fatigue

XT - vancomycin / adverse drug reaction / flatulence

XT - vancomycin / adverse drug reaction / gastrointestinal symptom

XT - vancomycin / adverse drug reaction / hyperkalemia

XT - vancomycin / adverse drug reaction / hypoglycemia

XT - vancomycin / adverse drug reaction / hypokalemia

XT - vancomycin / adverse drug reaction / hypomagnesemia

XT - vancomycin / adverse drug reaction / hyponatremia

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XT - vancomycin / adverse drug reaction / mediastinum disease

XT - vancomycin / adverse drug reaction / mental disease

XT - vancomycin / adverse drug reaction / metabolic disorder

XT - vancomycin / adverse drug reaction / musculoskeletal disease

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XT - vancomycin / adverse drug reaction / nephrotoxicity

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XT - vancomycin / adverse drug reaction / respiratory tract disease

XT - vancomycin / adverse drug reaction / sepsis

XT - vancomycin / adverse drug reaction / thorax disease

XT - vancomycin / adverse drug reaction / unspecified side effect

XT - vancomycin / adverse drug reaction / upper abdominal pain

XT - vancomycin / adverse drug reaction / urinary tract disease

XT - vancomycin / adverse drug reaction / urinary tract infection

XT - vancomycin / adverse drug reaction / vomiting

XT - vancomycin / drug comparison / fidaxomicin

XT - vancomycin / drug interaction / fidaxomicin

XT - vancomycin / drug therapy / Clostridium difficile infection

JF - Expert Review of Anti-Infective Therapy

JA - Expert Rev. Anti-Infect. Ther.

LA - English

VL - 9

IS - 7

SP - 767

EP - 777

CY - United Kingdom

PB - Expert Reviews Ltd. (2 Albert Place, London N3 1QB, United Kingdom)

SN - 1478-7210

SN - 1744-8336

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DO - https://dx.doi.org/10.1586/eri.11.53

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed12&NEWS=N&AN=362290279

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed12&DO=10.1586%2feri.11.53Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Mullane&issn=1478-7210&title=Expert+Review+of+Anti-Infective+Therapy&atitle=Fidaxomicin%3A+First-in-class+macrocyclic+antibiotic&volume=9&issue=7&spage=767&epage=777&date=2011&doi=10.1586%2Feri.11.53&pmid=21810048&sid=OVID:embase

297.

TY - JOUR

DB - Embase

AN - 355251070

ID - 20614462 [https://www.ncbi.nlm.nih.gov/pubmed/?term=20614462]

T1 - Lactulose versus polyethylene glycol for chronic constipation

A1 - Lee-Robichaud H.

A1 - Thomas K.

A1 - Morgan J.

A1 - Nelson R.L.

Y1 - 2009//

KW - abdominal cramp/si [Side Effect]

KW - abdominal discomfort

KW - abdominal distension/si [Side Effect]

KW - abdominal pain/si [Side Effect]

KW - anus fissure

KW - aspiration pneumonia/si [Side Effect]

KW - atonic colon

KW - bloating/si [Side Effect]

KW - clinical protocol

KW - colic/si [Side Effect]

KW - colostomy

KW - constipation/dt [Drug Therapy]

KW - \*constipation/dm [Disease Management]

KW - \*constipation/dt [Drug Therapy]

KW - \*constipation/th [Therapy]

KW - Crohn disease

KW - depression

KW - diarrhea/si [Side Effect]

KW - dietary fiber

KW - distress syndrome

KW - dysphagia

KW - enteritis

KW - exercise

KW - feces impaction

KW - flatulence/si [Side Effect]

KW - galactosemia

KW - gastrointestinal obstruction/si [Side Effect]

KW - granulomatous inflammation/si [Side Effect]

KW - hemorrhoid

KW - human

KW - hydration

KW - hypokalemia/si [Side Effect]

KW - ileostomy

KW - intestine flora

KW - intestine motility

KW - intestine obstruction

KW - intestine perforation

KW - irritable colon

KW - lifestyle modification

KW - malaise

KW - mood change

KW - nausea/si [Side Effect]

KW - painful defecation

KW - paralytic ileus

KW - peristalsis

KW - quality of life

KW - review

KW - side effect/si [Side Effect]

KW - stomach pH

KW - systematic review

KW - toxic megacolon

KW - treatment contraindication

KW - ulcerative colitis

KW - arachis oil/ae [Adverse Drug Reaction]

KW - arachis oil/dt [Drug Therapy]

KW - bisacodyl/ae [Adverse Drug Reaction]

KW - bisacodyl/dt [Drug Therapy]

KW - docusate sodium/ae [Adverse Drug Reaction]

KW - docusate sodium/dt [Drug Therapy]

KW - ispagula/ae [Adverse Drug Reaction]

KW - ispagula/dt [Drug Therapy]

KW - \*lactulose/ae [Adverse Drug Reaction]

KW - \*lactulose/cm [Drug Comparison]

KW - \*lactulose/dt [Drug Therapy]

KW - \*macrogol/ae [Adverse Drug Reaction]

KW - \*macrogol/cm [Drug Comparison]

KW - \*macrogol/dt [Drug Therapy]

KW - magnesium hydroxide/dt [Drug Therapy]

KW - magnesium salt/dt [Drug Therapy]

KW - mineral oil/ae [Adverse Drug Reaction]

KW - mineral oil/dt [Drug Therapy]

KW - Senna extract/ae [Adverse Drug Reaction]

KW - Senna extract/dt [Drug Therapy]

XT - abdominal cramp / side effect / bisacodyl

XT - abdominal cramp / side effect / docusate sodium

XT - abdominal cramp / side effect / Senna extract

XT - abdominal distension / side effect / ispagula

XT - abdominal distension / side effect / macrogol

XT - abdominal pain / side effect / macrogol

XT - aspiration pneumonia / side effect / arachis oil

XT - aspiration pneumonia / side effect / mineral oil

XT - bloating / side effect / lactulose

XT - colic / side effect / lactulose

XT - constipation / drug therapy / arachis oil

XT - constipation / drug therapy / bisacodyl

XT - constipation / drug therapy / docusate sodium

XT - constipation / drug therapy / ispagula

XT - constipation / drug therapy / lactulose

XT - constipation / drug therapy / macrogol

XT - constipation / drug therapy / magnesium hydroxide

XT - constipation / drug therapy / magnesium salt

XT - constipation / drug therapy / mineral oil

XT - constipation / drug therapy / Senna extract

XT - diarrhea / side effect / lactulose

XT - diarrhea / side effect / macrogol

XT - flatulence / side effect / ispagula

XT - flatulence / side effect / lactulose

XT - gastrointestinal obstruction / side effect / ispagula

XT - granulomatous inflammation / side effect / arachis oil

XT - granulomatous inflammation / side effect / mineral oil

XT - hypokalemia / side effect / bisacodyl

XT - hypokalemia / side effect / docusate sodium

XT - hypokalemia / side effect / Senna extract

XT - nausea / side effect / macrogol

XT - arachis oil / adverse drug reaction / aspiration pneumonia

XT - arachis oil / adverse drug reaction / granulomatous inflammation

XT - arachis oil / drug therapy / constipation

XT - bisacodyl / adverse drug reaction / abdominal cramp

XT - bisacodyl / adverse drug reaction / hypokalemia

XT - bisacodyl / drug therapy / constipation

XT - docusate sodium / adverse drug reaction / abdominal cramp

XT - docusate sodium / adverse drug reaction / hypokalemia

XT - docusate sodium / drug therapy / constipation

XT - ispagula / adverse drug reaction / abdominal distension

XT - ispagula / adverse drug reaction / flatulence

XT - ispagula / adverse drug reaction / gastrointestinal obstruction

XT - ispagula / drug therapy / constipation

XT - lactulose / adverse drug reaction / bloating

XT - lactulose / adverse drug reaction / colic

XT - lactulose / adverse drug reaction / diarrhea

XT - lactulose / adverse drug reaction / flatulence

XT - lactulose / drug comparison / macrogol

XT - lactulose / drug therapy / constipation

XT - macrogol / adverse drug reaction / abdominal distension

XT - macrogol / adverse drug reaction / abdominal pain

XT - macrogol / adverse drug reaction / diarrhea

XT - macrogol / adverse drug reaction / nausea

XT - macrogol / drug comparison / lactulose

XT - macrogol / drug therapy / constipation

XT - magnesium hydroxide / drug therapy / constipation

XT - magnesium salt / drug therapy / constipation

XT - mineral oil / adverse drug reaction / aspiration pneumonia

XT - mineral oil / adverse drug reaction / granulomatous inflammation

XT - mineral oil / drug therapy / constipation

XT - Senna extract / adverse drug reaction / abdominal cramp

XT - Senna extract / adverse drug reaction / hypokalemia

XT - Senna extract / drug therapy / constipation

JF - Cochrane Database of Systematic Reviews

JA - Cochrane Database Syst. Rev.

LA - English

IS - 1

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UR - http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD007570/pdf\_fs.html

DO - https://dx.doi.org/10.1002/14651858.CD007570

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed11&NEWS=N&AN=355251070

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed11&DO=10.1002%2f14651858.CD007570Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Lee-Robichaud&issn=1469-493X&title=Cochrane+Database+of+Systematic+Reviews&atitle=Lactulose+versus+polyethylene+glycol+for+chronic+constipation&volume=&issue=1&spage=CD007570&epage=&date=2009&doi=10.1002%2F14651858.CD007570&pmid=20614462&sid=OVID:embase

298.

TY - JOUR

DB - Embase

AN - 359325757

ID - 20687617 [https://www.ncbi.nlm.nih.gov/pubmed/?term=20687617]

T1 - Laxative abuse: Epidemiology, diagnosis and management

A1 - Roerig J.L.

A1 - Steffen K.J.

A1 - Mitchell J.E.

A1 - Zunker C.

Y1 - 2010//

N2 - Laxatives have been used for health purposes for over 2000 years, and for much of that time abuse or misuse of laxatives has occurred. Individuals who abuse laxatives can generally be categorized as falling into one of four groups. By far the largest group is made up of individuals suffering from an eating disorder such as anorexia or bulimia nervosa. The prevalence of laxative abuse has been reported to range from approximately 10 to 60 of individuals in this group. The second group consists of individuals who are generally middle aged or older who begin using laxatives when constipated but continue to overuse them. This pattern may be promulgated on certain beliefs that daily bowel movements are necessary for good health. The third group includes individuals engaged in certain types of athletic training, including sports with set weight limits. The fourth group contains surreptitious laxative abusers who use the drugs to cause factitious diarrhoea and may have a factitious disorder.Normal bowel function consists of the absorption of nutrients, electrolytes and water from the gut. Most nutrients are absorbed in the small intestine, while the large bowel absorbs primarily water. There are several types of laxatives available, including stimulant agents, saline and osmotic products, bulking agents and surfactants. The most frequently abused group of laxatives are of the stimulant class. This may be related to the quick action of stimulants, particularly in individuals with eating disorders as they may erroneously believe that they can avoid the absorption of calories via the resulting diarrhoea.Medical problems associated with laxative abuse include electrolyte and acidbase changes that can involve the renal and cardiovascular systems and may become life threatening. The renin-aldosterone system becomes activated due to the loss of fluid, which leads to oedema and acute weight gain when the laxative is discontinued. This can result in reinforcing further laxative abuse when a patient feels bloated and has gained weight.Treatment begins with a high level of suspicion, particularly when a patient presents with alternating diarrhoea and constipation as well as other gastrointestinal complaints. Checking serum electrolytes and the acidbase status can identify individuals who may need medical stabilization and confirm the severity of the abuse. The first step in treating laxative misuse once it is identified is to determine what may be promoting the behaviour, such as an eating disorder or use based on misinformation regarding what constitutes a healthy bowel habit. The first intervention would be to stop the stimulant laxatives and replace them with fibreosmotic supplements utilized to establish normal bowel movements. Education and further treatment may be required to maintain a healthy bowel programme. In the case of an eating disorder, referral for psychiatric treatment is essential to lessen the reliance on laxatives as a method to alter weight and shape. © 2010 Adis Data Information BV. All rights reserved.

KW - abdominal cramp/co [Complication]

KW - abdominal cramp/si [Side Effect]

KW - abdominal discomfort/si [Side Effect]

KW - abdominal pain/co [Complication]

KW - abdominal pain/si [Side Effect]

KW - acid base balance

KW - Aconitum

KW - aged

KW - ammonia formation

KW - anorexia

KW - aspiration pneumonia

KW - Ayurveda

KW - bleeding/si [Side Effect]

KW - bloating/si [Side Effect]

KW - borderline state

KW - bulimia

KW - burning sensation/si [Side Effect]

KW - cardiovascular risk

KW - cardiovascular system

KW - case control study

KW - chronic kidney disease/si [Side Effect]

KW - clinical assessment

KW - colitis/co [Complication]

KW - colitis/si [Side Effect]

KW - colon flora

KW - colon melanosis/si [Side Effect]

KW - colorectal cancer

KW - concentration (parameters)

KW - congestive heart failure

KW - constipation

KW - Cyperus

KW - dehydration/si [Side Effect]

KW - diarrhea/co [Complication]

KW - diarrhea/si [Side Effect]

KW - dietary fiber

KW - disease association

KW - disease exacerbation

KW - drug absorption

KW - \*drug abuse

KW - drug coating

KW - drug efficacy

KW - drug hypersensitivity/si [Side Effect]

KW - drug mechanism

KW - drug metabolism

KW - \*drug misuse/di [Diagnosis]

KW - \*drug misuse/ep [Epidemiology]

KW - drug safety

KW - drug tolerability

KW - eating disorder

KW - edema

KW - electrolyte disturbance/co [Complication]

KW - flatulence/si [Side Effect]

KW - gastric melanosis/si [Side Effect]

KW - gastrointestinal motility

KW - gastrointestinal toxicity

KW - gastrointestinal tract function

KW - geriatric patient

KW - health education

KW - heart ventricle tachycardia

KW - hepatic encephalopathy

KW - high risk behavior

KW - human

KW - hyperaldosteronism

KW - hyperemia/si [Side Effect]

KW - hypermagnesemia/si [Side Effect]

KW - hypernatremia/si [Side Effect]

KW - hyperuricemia/si [Side Effect]

KW - hypokalemia/co [Complication]

KW - hypokalemia/si [Side Effect]

KW - hypotension/si [Side Effect]

KW - insulin release

KW - intestine absorption

KW - intestine transit time

KW - intestine ulcer/si [Side Effect]

KW - kidney disease/co [Complication]

KW - kidney dysfunction

KW - kidney tubule disorder/si [Side Effect]

KW - laboratory test

KW - liver failure

KW - melanosis/si [Side Effect]

KW - mental disease

KW - metabolic alkalosis/co [Complication]

KW - middle aged

KW - nausea/si [Side Effect]

KW - neuropathy

KW - osmolality

KW - osmotic pressure

KW - pancreas injury

KW - paresthesia

KW - patient education

KW - peristalsis

KW - positional dizziness

KW - prevalence

KW - protein losing gastroenteropathy/co [Complication]

KW - pseudomelanosis/si [Side Effect]

KW - psychotherapy

KW - radiation induced emesis/si [Side Effect]

KW - rash/si [Side Effect]

KW - rectal burning/si [Side Effect]

KW - rectum prolapse/co [Complication]

KW - renin angiotensin aldosterone system

KW - respiration depression/si [Side Effect]

KW - review

KW - rhabdomyolysis/si [Side Effect]

KW - risk assessment

KW - risk factor

KW - Rosenberg Self-Esteem Scale

KW - self report

KW - Senna

KW - steatorrhea/si [Side Effect]

KW - substance abuse

KW - suicidal behavior

KW - suppository

KW - syncope

KW - tachycardia

KW - training

KW - treatment contraindication

KW - treatment indication

KW - treatment withdrawal

KW - urinalysis

KW - urine discoloration/si [Side Effect]

KW - urogenital system parameters

KW - urolithiasis/si [Side Effect]

KW - urticaria/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - water absorption

KW - weight control

KW - weight gain

KW - benzatropine

KW - bethanechol

KW - bisacodyl/ae [Adverse Drug Reaction]

KW - cascara/ae [Adverse Drug Reaction]

KW - castor oil/ae [Adverse Drug Reaction]

KW - dantron

KW - diphenhydramine

KW - docusate calcium/ae [Adverse Drug Reaction]

KW - donepezil

KW - electrolyte/ec [Endogenous Compound]

KW - glycerol/ae [Adverse Drug Reaction]

KW - lactulose/ae [Adverse Drug Reaction]

KW - \*laxative/ae [Adverse Drug Reaction]

KW - macrogol/ae [Adverse Drug Reaction]

KW - macrolide

KW - magnesium

KW - magnesium citrate/ae [Adverse Drug Reaction]

KW - magnesium salt/ae [Adverse Drug Reaction]

KW - magnesium sulfate

KW - methylcellulose/ae [Adverse Drug Reaction]

KW - metoclopramide

KW - mineral oil

KW - neostigmine

KW - oxyphenisatine

KW - phenolphthalein

KW - polycarbophil calcium/ae [Adverse Drug Reaction]

KW - rhein

KW - Senna extract/ae [Adverse Drug Reaction]

KW - serotonin uptake inhibitor

KW - unclassified drug

KW - unindexed drug

KW - colon melanosis/si [Side Effect]

KW - colonic neuropathy

KW - factitious diarrhea/co [Complication]

KW - gastric melanosis/si [Side Effect]

KW - pseudomelanosis/si [Side Effect]

KW - rectal burning/si [Side Effect]

KW - urine discoloration/si [Side Effect]

KW - magnolax

XT - abdominal cramp / side effect / bisacodyl

XT - abdominal cramp / side effect / cascara

XT - abdominal cramp / side effect / docusate calcium

XT - abdominal cramp / side effect / lactulose

XT - abdominal cramp / side effect / macrogol

XT - abdominal cramp / side effect / magnesium citrate

XT - abdominal cramp / side effect / magnesium salt

XT - abdominal cramp / side effect / Senna extract

XT - abdominal discomfort / side effect / glycerol

XT - abdominal discomfort / side effect / lactulose

XT - abdominal pain / side effect / castor oil

XT - bleeding / side effect / glycerol

XT - bloating / side effect / macrogol

XT - bloating / side effect / methylcellulose

XT - bloating / side effect / polycarbophil calcium

XT - burning sensation / side effect / bisacodyl

XT - burning sensation / side effect / glycerol

XT - chronic kidney disease / side effect / laxative

XT - colitis / side effect / laxative

XT - colon melanosis / side effect / cascara

XT - colon melanosis / side effect / Senna extract

XT - dehydration / side effect / lactulose

XT - diarrhea / side effect / cascara

XT - diarrhea / side effect / lactulose

XT - diarrhea / side effect / macrogol

XT - diarrhea / side effect / Senna extract

XT - drug hypersensitivity / side effect / methylcellulose

XT - drug hypersensitivity / side effect / polycarbophil calcium

XT - flatulence / side effect / lactulose

XT - flatulence / side effect / macrogol

XT - flatulence / side effect / methylcellulose

XT - flatulence / side effect / polycarbophil calcium

XT - gastric melanosis / side effect / laxative

XT - hyperemia / side effect / glycerol

XT - hypermagnesemia / side effect / magnesium citrate

XT - hypermagnesemia / side effect / magnesium salt

XT - hypernatremia / side effect / lactulose

XT - hyperuricemia / side effect / laxative

XT - hypokalemia / side effect / lactulose

XT - hypotension / side effect / magnesium citrate

XT - hypotension / side effect / magnesium salt

XT - intestine ulcer / side effect / laxative

XT - kidney tubule disorder / side effect / laxative

XT - melanosis / side effect / cascara

XT - melanosis / side effect / laxative

XT - melanosis / side effect / Senna extract

XT - nausea / side effect / bisacodyl

XT - nausea / side effect / cascara

XT - nausea / side effect / docusate calcium

XT - nausea / side effect / lactulose

XT - nausea / side effect / macrogol

XT - nausea / side effect / Senna extract

XT - pseudomelanosis / side effect / cascara

XT - pseudomelanosis / side effect / Senna extract

XT - radiation induced emesis / side effect / bisacodyl

XT - rash / side effect / docusate calcium

XT - rectal burning / side effect / bisacodyl

XT - respiration depression / side effect / magnesium citrate

XT - respiration depression / side effect / magnesium salt

XT - rhabdomyolysis / side effect / laxative

XT - steatorrhea / side effect / laxative

XT - urine discoloration / side effect / cascara

XT - urolithiasis / side effect / laxative

XT - urticaria / side effect / macrogol

XT - vomiting / side effect / cascara

XT - vomiting / side effect / lactulose

XT - vomiting / side effect / Senna extract

XT - bisacodyl / adverse drug reaction / abdominal cramp

XT - bisacodyl / adverse drug reaction / burning sensation

XT - bisacodyl / adverse drug reaction / nausea

XT - bisacodyl / adverse drug reaction / radiation induced emesis

XT - bisacodyl / adverse drug reaction / rectal burning

XT - cascara / adverse drug reaction / abdominal cramp

XT - cascara / adverse drug reaction / colon melanosis

XT - cascara / adverse drug reaction / diarrhea

XT - cascara / adverse drug reaction / melanosis

XT - cascara / adverse drug reaction / nausea

XT - cascara / adverse drug reaction / pseudomelanosis

XT - cascara / adverse drug reaction / urine discoloration

XT - cascara / adverse drug reaction / vomiting

XT - castor oil / adverse drug reaction / abdominal pain

XT - docusate calcium / adverse drug reaction / abdominal cramp

XT - docusate calcium / adverse drug reaction / nausea

XT - docusate calcium / adverse drug reaction / rash

XT - glycerol / adverse drug reaction / abdominal discomfort

XT - glycerol / adverse drug reaction / bleeding

XT - glycerol / adverse drug reaction / burning sensation

XT - glycerol / adverse drug reaction / hyperemia

XT - lactulose / adverse drug reaction / abdominal cramp

XT - lactulose / adverse drug reaction / abdominal discomfort

XT - lactulose / adverse drug reaction / dehydration

XT - lactulose / adverse drug reaction / diarrhea

XT - lactulose / adverse drug reaction / flatulence

XT - lactulose / adverse drug reaction / hypernatremia

XT - lactulose / adverse drug reaction / hypokalemia

XT - lactulose / adverse drug reaction / nausea

XT - lactulose / adverse drug reaction / vomiting

XT - laxative / adverse drug reaction / chronic kidney disease

XT - laxative / adverse drug reaction / colitis

XT - laxative / adverse drug reaction / gastric melanosis

XT - laxative / adverse drug reaction / hyperuricemia

XT - laxative / adverse drug reaction / intestine ulcer

XT - laxative / adverse drug reaction / kidney tubule disorder

XT - laxative / adverse drug reaction / melanosis

XT - laxative / adverse drug reaction / rhabdomyolysis

XT - laxative / adverse drug reaction / steatorrhea

XT - laxative / adverse drug reaction / urolithiasis

XT - macrogol / adverse drug reaction / abdominal cramp

XT - macrogol / adverse drug reaction / bloating

XT - macrogol / adverse drug reaction / diarrhea

XT - macrogol / adverse drug reaction / flatulence

XT - macrogol / adverse drug reaction / nausea

XT - macrogol / adverse drug reaction / urticaria

XT - magnesium citrate / adverse drug reaction / abdominal cramp

XT - magnesium citrate / adverse drug reaction / hypermagnesemia

XT - magnesium citrate / adverse drug reaction / hypotension

XT - magnesium citrate / adverse drug reaction / respiration depression

XT - magnesium salt / adverse drug reaction / abdominal cramp

XT - magnesium salt / adverse drug reaction / hypermagnesemia

XT - magnesium salt / adverse drug reaction / hypotension

XT - magnesium salt / adverse drug reaction / respiration depression

XT - methylcellulose / adverse drug reaction / bloating

XT - methylcellulose / adverse drug reaction / drug hypersensitivity

XT - methylcellulose / adverse drug reaction / flatulence

XT - polycarbophil calcium / adverse drug reaction / bloating

XT - polycarbophil calcium / adverse drug reaction / drug hypersensitivity

XT - polycarbophil calcium / adverse drug reaction / flatulence

XT - Senna extract / adverse drug reaction / abdominal cramp

XT - Senna extract / adverse drug reaction / colon melanosis

XT - Senna extract / adverse drug reaction / diarrhea

XT - Senna extract / adverse drug reaction / melanosis

XT - Senna extract / adverse drug reaction / nausea

XT - Senna extract / adverse drug reaction / pseudomelanosis

XT - Senna extract / adverse drug reaction / vomiting

JF - Drugs

JA - Drugs

LA - English

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C3 - magnolax

DO - https://dx.doi.org/10.2165/11898640-000000000-00000

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed11&NEWS=N&AN=359325757

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed11&DO=10.2165%2f11898640-000000000-00000Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Roerig&issn=0012-6667&title=Drugs&atitle=Laxative+abuse%3A+Epidemiology%2C+diagnosis+and+management&volume=70&issue=12&spage=1487&epage=1503&date=2010&doi=10.2165%2F11898640-000000000-00000&pmid=20687617&sid=OVID:embase

299.

TY - JOUR

DB - Embase

AN - 40740218

ID - 15920896 [https://www.ncbi.nlm.nih.gov/pubmed/?term=15920896]

T1 - Antibiotic therapy in pregnancy and lactation

A1 - Reali A.

A1 - Ximenes A.

A1 - Cuzzolin L.

A1 - Fanos V.

Y1 - 2005//

N2 - When considering whether to administer drugs to women during pregnancy and lactation, we have to take into account that these substances may expose the fetus or neonate to multiple effects. This occurs because there is a unique situation where the maternal compartment is connected with the fetal or neonatal compartment through, respectively, the placental barrier or breast milk. The fetus in utero and the breast-fed neonate are to be considered as organisms exposed and sensitive to the effects of drugs that cross the placenta or enter the breast milk. This review focuses on the most frequently used antibiotics during pregnancy and lactation and presents useful suggestions for daily practice. Drugs that must be avoided are clearly underlined. © E.S.I.F.T. srl - Firenze.

KW - anaerobic infection/dt [Drug Therapy]

KW - antibiotic therapy

KW - arthropathy/dt [Drug Therapy]

KW - bacterial infection/dt [Drug Therapy]

KW - blood placenta barrier

KW - bone growth

KW - breast feeding

KW - breast milk

KW - candidiasis/si [Side Effect]

KW - carcinogenicity

KW - cardiovascular disease/si [Side Effect]

KW - cataract/si [Side Effect]

KW - chorioamnionitis/dt [Drug Therapy]

KW - cleft palate/si [Side Effect]

KW - colostrum

KW - depression/si [Side Effect]

KW - diarrhea/si [Side Effect]

KW - drug absorption

KW - drug bioavailability

KW - drug blood level

KW - drug clearance

KW - drug distribution

KW - drug effect

KW - drug elimination

KW - drug hypersensitivity/si [Side Effect]

KW - drug metabolism

KW - endometritis/dt [Drug Therapy]

KW - gastrointestinal symptom/si [Side Effect]

KW - genital tract infection/dt [Drug Therapy]

KW - growth retardation/si [Side Effect]

KW - hemolysis/si [Side Effect]

KW - hemolytic anemia/si [Side Effect]

KW - human

KW - hypoplasia/si [Side Effect]

KW - intestine flora

KW - intrauterine infection/dt [Drug Therapy]

KW - kernicterus/si [Side Effect]

KW - kidney disease/si [Side Effect]

KW - \*lactation

KW - liver toxicity/si [Side Effect]

KW - meningococcosis/dt [Drug Therapy]

KW - mutagenicity

KW - mycosis/dt [Drug Therapy]

KW - nephrotoxicity/si [Side Effect]

KW - newborn jaundice/si [Side Effect]

KW - nonhuman

KW - ototoxicity/si [Side Effect]

KW - pelvic inflammatory disease/dt [Drug Therapy]

KW - pharyngitis/dt [Drug Therapy]

KW - pigment disorder/si [Side Effect]

KW - plasma protein binding

KW - \*pregnancy

KW - prenatal drug exposure

KW - puerperal infection/dt [Drug Therapy]

KW - pylorus stenosis/si [Side Effect]

KW - rash/si [Side Effect]

KW - review

KW - sepsis/dt [Drug Therapy]

KW - side effect/si [Side Effect]

KW - Streptococcus infection/dt [Drug Therapy]

KW - teratogenicity/si [Side Effect]

KW - toxoplasmosis/dt [Drug Therapy]

KW - tuberculosis/dt [Drug Therapy]

KW - urinary tract infection/dt [Drug Therapy]

KW - urinary tract infection/pc [Prevention]

KW - vaginitis/et [Etiology]

KW - vestibulocochlear nerve disease/si [Side Effect]

KW - amikacin/cb [Drug Combination]

KW - amikacin/dt [Drug Therapy]

KW - amikacin/pa [Parenteral Drug Administration]

KW - amikacin/pk [Pharmacokinetics]

KW - amikacin/pd [Pharmacology]

KW - \*aminoglycoside derivative/ae [Adverse Drug Reaction]

KW - \*aminoglycoside derivative/ad [Drug Administration]

KW - \*aminoglycoside derivative/cb [Drug Combination]

KW - \*aminoglycoside derivative/dt [Drug Therapy]

KW - \*aminoglycoside derivative/po [Oral Drug Administration]

KW - \*aminoglycoside derivative/pa [Parenteral Drug Administration]

KW - \*aminoglycoside derivative/pk [Pharmacokinetics]

KW - \*aminoglycoside derivative/pd [Pharmacology]

KW - amoxicillin/pk [Pharmacokinetics]

KW - amoxicillin plus clavulanic acid

KW - amphotericin B/dt [Drug Therapy]

KW - amphotericin B/pk [Pharmacokinetics]

KW - ampicillin/ae [Adverse Drug Reaction]

KW - ampicillin/pk [Pharmacokinetics]

KW - ampicillin/pd [Pharmacology]

KW - azithromycin/dt [Drug Therapy]

KW - azithromycin/pk [Pharmacokinetics]

KW - aztreonam/dt [Drug Therapy]

KW - aztreonam/po [Oral Drug Administration]

KW - aztreonam/pk [Pharmacokinetics]

KW - aztreonam/pd [Pharmacology]

KW - \*carbapenem derivative/dt [Drug Therapy]

KW - \*carbapenem derivative/pk [Pharmacokinetics]

KW - cefaclor

KW - cefalexin/dt [Drug Therapy]

KW - cefalexin/po [Oral Drug Administration]

KW - cefalexin/pk [Pharmacokinetics]

KW - cefalotin/ae [Adverse Drug Reaction]

KW - cefalotin/pa [Parenteral Drug Administration]

KW - cefalotin/pd [Pharmacology]

KW - cefradine

KW - ceftazidime/dt [Drug Therapy]

KW - ceftazidime/pa [Parenteral Drug Administration]

KW - ceftazidime/pk [Pharmacokinetics]

KW - ceftriaxone/ae [Adverse Drug Reaction]

KW - ceftriaxone/pa [Parenteral Drug Administration]

KW - ceftriaxone/pk [Pharmacokinetics]

KW - ceftriaxone/pd [Pharmacology]

KW - \*cephalosporin derivative/cm [Drug Comparison]

KW - \*cephalosporin derivative/pk [Pharmacokinetics]

KW - \*cephalosporin derivative/pd [Pharmacology]

KW - cilastatin plus imipenem/dt [Drug Therapy]

KW - cilastatin plus imipenem/pk [Pharmacokinetics]

KW - ciprofloxacin/pk [Pharmacokinetics]

KW - clarithromycin/dt [Drug Therapy]

KW - clarithromycin/pk [Pharmacokinetics]

KW - clarithromycin/pd [Pharmacology]

KW - clindamycin/cb [Drug Combination]

KW - clindamycin/dt [Drug Therapy]

KW - clindamycin/pk [Pharmacokinetics]

KW - clindamycin/pd [Pharmacology]

KW - cotrimoxazole/cb [Drug Combination]

KW - dicloxacillin/cb [Drug Combination]

KW - dicloxacillin/cm [Drug Comparison]

KW - dicloxacillin/cr [Drug Concentration]

KW - dicloxacillin/pd [Pharmacology]

KW - doxycycline/pk [Pharmacokinetics]

KW - erythromycin/ae [Adverse Drug Reaction]

KW - erythromycin/cr [Drug Concentration]

KW - erythromycin/dt [Drug Therapy]

KW - erythromycin/pk [Pharmacokinetics]

KW - erythromycin/pd [Pharmacology]

KW - ethambutol/dt [Drug Therapy]

KW - fluconazole

KW - gentamicin/cb [Drug Combination]

KW - gentamicin/dt [Drug Therapy]

KW - gentamicin/pa [Parenteral Drug Administration]

KW - gentamicin/pk [Pharmacokinetics]

KW - imidazole/dt [Drug Therapy]

KW - imidazole/tp [Topical Drug Administration]

KW - isoniazid/cr [Drug Concentration]

KW - isoniazid/dt [Drug Therapy]

KW - isoniazid/pk [Pharmacokinetics]

KW - isoniazid/pd [Pharmacology]

KW - kanamycin/ae [Adverse Drug Reaction]

KW - kanamycin/cb [Drug Combination]

KW - kanamycin/dt [Drug Therapy]

KW - kanamycin/pa [Parenteral Drug Administration]

KW - kanamycin/pk [Pharmacokinetics]

KW - ketoconazole

KW - macrolide/dt [Drug Therapy]

KW - macrolide/pk [Pharmacokinetics]

KW - macrolide/pd [Pharmacology]

KW - meropenem/dt [Drug Therapy]

KW - meropenem/pk [Pharmacokinetics]

KW - metronidazole/cr [Drug Concentration]

KW - metronidazole/dt [Drug Therapy]

KW - metronidazole/to [Drug Toxicity]

KW - metronidazole/pk [Pharmacokinetics]

KW - metronidazole/pd [Pharmacology]

KW - minocycline/pk [Pharmacokinetics]

KW - \*monobactam derivative/dt [Drug Therapy]

KW - \*monobactam derivative/pk [Pharmacokinetics]

KW - \*monobactam derivative/pd [Pharmacology]

KW - nalidixic acid/ae [Adverse Drug Reaction]

KW - nalidixic acid/pk [Pharmacokinetics]

KW - nitrofurantoin/ae [Adverse Drug Reaction]

KW - nitrofurantoin/dt [Drug Therapy]

KW - nitrofurantoin/pk [Pharmacokinetics]

KW - norfloxacin/pk [Pharmacokinetics]

KW - nystatin

KW - ofloxacin/pk [Pharmacokinetics]

KW - \*penicillin derivative/ae [Adverse Drug Reaction]

KW - \*penicillin derivative/cb [Drug Combination]

KW - \*penicillin derivative/cm [Drug Comparison]

KW - \*penicillin derivative/cr [Drug Concentration]

KW - \*penicillin derivative/dt [Drug Therapy]

KW - \*penicillin derivative/pk [Pharmacokinetics]

KW - \*penicillin derivative/pd [Pharmacology]

KW - penicillin G/dt [Drug Therapy]

KW - penicillin G/pk [Pharmacokinetics]

KW - penicillin V/dt [Drug Therapy]

KW - penicillin V/pk [Pharmacokinetics]

KW - piperacillin/dt [Drug Therapy]

KW - piperacillin/pk [Pharmacokinetics]

KW - pyrimethamine/cb [Drug Combination]

KW - pyrimethamine/dt [Drug Therapy]

KW - quinolone derivative/to [Drug Toxicity]

KW - quinolone derivative/pk [Pharmacokinetics]

KW - rifampicin/dt [Drug Therapy]

KW - rifampicin/pk [Pharmacokinetics]

KW - spiramycin/dt [Drug Therapy]

KW - spiramycin/pk [Pharmacokinetics]

KW - streptomycin/ae [Adverse Drug Reaction]

KW - streptomycin/cb [Drug Combination]

KW - streptomycin/dt [Drug Therapy]

KW - streptomycin/pa [Parenteral Drug Administration]

KW - streptomycin/pk [Pharmacokinetics]

KW - sulfadiazine/cb [Drug Combination]

KW - sulfadiazine/dt [Drug Therapy]

KW - sulfadoxine/cb [Drug Combination]

KW - sulfadoxine/dt [Drug Therapy]

KW - sulfamethoxazole/cb [Drug Combination]

KW - sulfonamide/ae [Adverse Drug Reaction]

KW - sulfonamide/po [Oral Drug Administration]

KW - sulfonamide/pk [Pharmacokinetics]

KW - sulfonamide/pd [Pharmacology]

KW - \*tetracycline derivative/ae [Adverse Drug Reaction]

KW - \*tetracycline derivative/pk [Pharmacokinetics]

KW - tobramycin/cb [Drug Combination]

KW - tobramycin/dt [Drug Therapy]

KW - tobramycin/pa [Parenteral Drug Administration]

KW - tobramycin/pk [Pharmacokinetics]

KW - trimethoprim derivative/ae [Adverse Drug Reaction]

KW - trimethoprim derivative/cb [Drug Combination]

KW - trimethoprim derivative/pk [Pharmacokinetics]

KW - trimethoprim derivative/pd [Pharmacology]

KW - tuberculostatic agent/ae [Adverse Drug Reaction]

KW - tuberculostatic agent/dt [Drug Therapy]

KW - tuberculostatic agent/pk [Pharmacokinetics]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/pk [Pharmacokinetics]

JF - Journal of Chemotherapy

JA - J. Chemother.

LA - English

VL - 17

IS - 2

SP - 123

EP - 130

CY - Italy

PB - E.S.I.F.T. srl (Via Guinicelli 24, Firenze 50133, Italy)

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DO - http://dx.doi.org/10.1179/joc.2005.17.2.123

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed9&NEWS=N&AN=40740218

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed9&DO=10.1179%2fjoc.2005.17.2.123Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Reali&issn=1120-009X&title=Journal+of+Chemotherapy&atitle=Antibiotic+therapy+in+pregnancy+and+lactation&volume=17&issue=2&spage=123&epage=130&date=2005&doi=10.1179%2Fjoc.2005.17.2.123&pmid=15920896&sid=OVID:embase

300.

TY - JOUR

DB - Embase

AN - 40298067

T1 - Management of intractable diarrhoea in the critically ill

A1 - Yassin J.

A1 - Wyncoll D.

Y1 - 2005//

N2 - Intractable diarrhoea in the critically ill patient may be the cause of illness, a result of illness, or a complication of treatment.This paper reviews the causes and consequences of diarrhoea in the critically ill. The strategy for treatment and the use of the bowel management system is described.

KW - abdominal cramp/si [Side Effect]

KW - abdominal distension/si [Side Effect]

KW - clinical trial

KW - cost effectiveness analysis

KW - \*critical illness

KW - Crohn disease

KW - \*diarrhea/co [Complication]

KW - \*diarrhea/dm [Disease Management]

KW - \*diarrhea/dt [Drug Therapy]

KW - \*diarrhea/et [Etiology]

KW - \*diarrhea/pc [Prevention]

KW - \*diarrhea/si [Side Effect]

KW - \*diarrhea/th [Therapy]

KW - diet restriction

KW - drowsiness/si [Side Effect]

KW - drug absorption

KW - drug efficacy

KW - drug mechanism

KW - enteric feeding

KW - enteropathy

KW - equipment design

KW - feces analysis

KW - fluid balance

KW - fungemia/si [Side Effect]

KW - hospital equipment

KW - human

KW - hypoalbuminemia

KW - iatrogenic disease

KW - intensive care

KW - intestine flora

KW - intestine ischemia

KW - meta analysis

KW - pathophysiology

KW - primary prevention

KW - rehydration

KW - respiration depression/si [Side Effect]

KW - review

KW - safety

KW - skin care

KW - systemic disease/si [Side Effect]

KW - wound infection/pc [Prevention]

KW - antibiotic agent/ae [Adverse Drug Reaction]

KW - antibiotic agent/dt [Drug Therapy]

KW - antibiotic agent/po [Oral Drug Administration]

KW - antidiarrheal agent/ae [Adverse Drug Reaction]

KW - antidiarrheal agent/dt [Drug Therapy]

KW - antidiarrheal agent/pk [Pharmacokinetics]

KW - antidiarrheal agent/pd [Pharmacology]

KW - beta adrenergic receptor blocking agent/ae [Adverse Drug Reaction]

KW - carbamazepine/ae [Adverse Drug Reaction]

KW - cephalosporin derivative/ae [Adverse Drug Reaction]

KW - clindamycin/ae [Adverse Drug Reaction]

KW - codeine phosphate/ae [Adverse Drug Reaction]

KW - codeine phosphate/dt [Drug Therapy]

KW - codeine phosphate/pk [Pharmacokinetics]

KW - codeine phosphate/pd [Pharmacology]

KW - cytotoxic agent/ae [Adverse Drug Reaction]

KW - digoxin/ae [Adverse Drug Reaction]

KW - dipeptidyl carboxypeptidase inhibitor/ae [Adverse Drug Reaction]

KW - docusate sodium/ae [Adverse Drug Reaction]

KW - erythromycin/ae [Adverse Drug Reaction]

KW - furosemide/ae [Adverse Drug Reaction]

KW - laxative/ae [Adverse Drug Reaction]

KW - loperamide/dt [Drug Therapy]

KW - loperamide/pd [Pharmacology]

KW - metoclopramide/ae [Adverse Drug Reaction]

KW - metronidazole/dt [Drug Therapy]

KW - metronidazole/po [Oral Drug Administration]

KW - octreotide/dt [Drug Therapy]

KW - omeprazole/ae [Adverse Drug Reaction]

KW - paracetamol/ae [Adverse Drug Reaction]

KW - probiotic agent/ae [Adverse Drug Reaction]

KW - probiotic agent/ct [Clinical Trial]

KW - probiotic agent/dt [Drug Therapy]

KW - probiotic agent/pd [Pharmacology]

KW - theophylline/ae [Adverse Drug Reaction]

KW - thiazide diuretic agent/ae [Adverse Drug Reaction]

KW - unclassified drug

KW - vancomycin/dt [Drug Therapy]

KW - Lactobacillus extract/ct [Clinical Trial]

KW - Lactobacillus extract/dt [Drug Therapy]

KW - Lactobacillus extract/pd [Pharmacology]

KW - Saccharomyces boulardii extract/ae [Adverse Drug Reaction]

KW - Saccharomyces boulardii extract/ct [Clinical Trial]

KW - Saccharomyces boulardii extract/dt [Drug Therapy]

KW - Saccharomyces boulardii extract/pd [Pharmacology]

JF - Care of the Critically Ill

JA - Care Crit. Ill

LA - English

VL - 21

IS - 1

SP - 20

EP - 24

CY - United Kingdom

PB - Theta Press Ltd. (26 Brickfields Close, Basingstoke, Hants RG24 8UX, United Kingdom)

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M2 - Zassi Bowel Management System: Zassi Medical Evolutions [United States]

C1 - Zassi Bowel Management System: Zassi Medical Evolutions [United States]

C2 - Zassi Medical Evolutions [United States]

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed9&NEWS=N&AN=40298067

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed9&AN=40298067Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Yassin&issn=0266-0970&title=Care+of+the+Critically+Ill&atitle=Management+of+intractable+diarrhoea+in+the+critically+ill&volume=21&issue=1&spage=20&epage=24&date=2005&doi=&pmid=&sid=OVID:embase

301.

TY - JOUR

DB - Embase

AN - 43125372

ID - 17713457 [https://www.ncbi.nlm.nih.gov/pubmed/?term=17713457]

T1 - Antibiotics in the management of hepatic encephalopathy: An evidence-based review

A1 - Rothenberg M.E.

A1 - Keeffe E.B.

Y1 - 2005//

N2 - Hepatic encephalopathy (HE) is an increasingly prevalent and debilitating condition that occurs in functional hepatic insufficiency. It is marked by fluctuating neuropsychiatric and cognitive impairment, which can be severe and life threatening. Hepatic encephalopathy is a diagnosis of exclusion; thus, it is challenging to diagnose definitively and to investigate in clinical trials. High response rates in the placebo arms of well-conducted studies demonstrate that the most effective treatment for HE is the correction of known precipitating triggers. However, pharmacological therapies may also be helpful. Although the precise pathogenesis remains unknown, bacterially derived neurotoxins from enteric flora likely play an important role. Based on this hypothesis and on accumulating clinical experience documented in randomized trials, oral antibiotics have emerged as an important treatment adjunct. This article addresses the qualities of an ideal antibiotic and reviews the literature on 4 antibiotics used to treat HE: neomycin, metronidazole, vancomycin, and rifaximin, with the most promising of these drugs appearing to be rifaximin. Unfortunately, most studies of the treatment of HE are difficult to interpret due to small sample sizes, methodological flaws, vulnerability to bias, and the intrinsic challenges of studying HE. Many studies have erroneously concluded that treatments are equivalent simply because no significant difference between treatment arms was detected. Consequently, the literature generally lacks definitive data from large, randomized, placebo-controlled trials. Nevertheless, the data suggest that minimally absorbed antibiotics are emerging as a safe and effective approach for the treatment of HE. © 2005 MedReviews, LLC.

KW - anorexia/si [Side Effect]

KW - article

KW - ataxia/si [Side Effect]

KW - clinical trial

KW - diaphoresis

KW - diarrhea/si [Side Effect]

KW - dose response

KW - drug absorption

KW - drug alcohol interaction

KW - drug bioavailability

KW - drug efficacy

KW - drug eruption/si [Side Effect]

KW - drug induced headache/si [Side Effect]

KW - drug megadose

KW - drug metabolism

KW - drug safety

KW - enterocolitis/si [Side Effect]

KW - evidence based medicine

KW - flushing

KW - heart palpitation/si [Side Effect]

KW - \*hepatic encephalopathy/dt [Drug Therapy]

KW - \*hepatic encephalopathy/ep [Epidemiology]

KW - \*hepatic encephalopathy/et [Etiology]

KW - hospital infection

KW - human

KW - infection risk

KW - intermethod comparison

KW - intestine flora

KW - mental disease/si [Side Effect]

KW - meta analysis

KW - methodology

KW - morbidity

KW - mortality

KW - muscle cramp/si [Side Effect]

KW - nonhuman

KW - pathogenesis

KW - peripheral neuropathy/si [Side Effect]

KW - prevalence

KW - pruritus/si [Side Effect]

KW - risk assessment

KW - risk reduction

KW - seizure/si [Side Effect]

KW - sepsis

KW - side effect/si [Side Effect]

KW - symptomatology

KW - vancomycin resistant Enterococcus

KW - vertigo/si [Side Effect]

KW - vomiting/si [Side Effect]

KW - \*antibiotic agent/ae [Adverse Drug Reaction]

KW - \*antibiotic agent/ct [Clinical Trial]

KW - \*antibiotic agent/cb [Drug Combination]

KW - \*antibiotic agent/cm [Drug Comparison]

KW - \*antibiotic agent/do [Drug Dose]

KW - \*antibiotic agent/dt [Drug Therapy]

KW - \*antibiotic agent/iv [Intravenous Drug Administration]

KW - \*antibiotic agent/po [Oral Drug Administration]

KW - \*antibiotic agent/pa [Parenteral Drug Administration]

KW - \*antibiotic agent/pk [Pharmacokinetics]

KW - \*antibiotic agent/pd [Pharmacology]

KW - cytochrome P450/ec [Endogenous Compound]

KW - disaccharide/dt [Drug Therapy]

KW - lactulose/ct [Clinical Trial]

KW - lactulose/cb [Drug Combination]

KW - lactulose/cm [Drug Comparison]

KW - lactulose/dt [Drug Therapy]

KW - metronidazole/ae [Adverse Drug Reaction]

KW - metronidazole/cm [Drug Comparison]

KW - metronidazole/do [Drug Dose]

KW - metronidazole/dt [Drug Therapy]

KW - metronidazole/iv [Intravenous Drug Administration]

KW - metronidazole/po [Oral Drug Administration]

KW - metronidazole/pa [Parenteral Drug Administration]

KW - metronidazole/pk [Pharmacokinetics]

KW - metronidazole/pd [Pharmacology]

KW - neomycin/ae [Adverse Drug Reaction]

KW - neomycin/ct [Clinical Trial]

KW - neomycin/cb [Drug Combination]

KW - neomycin/cm [Drug Comparison]

KW - neomycin/do [Drug Dose]

KW - neomycin/dt [Drug Therapy]

KW - neomycin/po [Oral Drug Administration]

KW - neomycin/pk [Pharmacokinetics]

KW - neurotoxin/ec [Endogenous Compound]

KW - placebo

KW - rifaximin/ae [Adverse Drug Reaction]

KW - rifaximin/ct [Clinical Trial]

KW - rifaximin/cm [Drug Comparison]

KW - rifaximin/do [Drug Dose]

KW - rifaximin/dt [Drug Therapy]

KW - rifaximin/pk [Pharmacokinetics]

KW - vancomycin/ae [Adverse Drug Reaction]

KW - vancomycin/ct [Clinical Trial]

KW - vancomycin/cm [Drug Comparison]

KW - vancomycin/dt [Drug Therapy]

KW - vancomycin/po [Oral Drug Administration]

KW - vancomycin/pk [Pharmacokinetics]

JF - Reviews in Gastroenterological Disorders

JA - Rev. Gastroenterol. Disord.

LA - English

VL - 5

IS - SUPPL. 3

SP - S26

EP - S35

CY - United States

PB - MedReviews LLC (1333 Broadway, Suite 1120, New York NY 10018, United States)

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PT - Article

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed9&NEWS=N&AN=43125372

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed9&AN=43125372Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Rothenberg&issn=1533-001X&title=Reviews+in+Gastroenterological+Disorders&atitle=Antibiotics+in+the+management+of+hepatic+encephalopathy%3A+An+evidence-based+review&volume=5&issue=SUPPL.+3&spage=S26&epage=S35&date=2005&doi=&pmid=17713457&sid=OVID:embase

302.

TY - JOUR

DB - Embase

AN - 39162066

ID - 15287849 [https://www.ncbi.nlm.nih.gov/pubmed/?term=15287849]

T1 - Bacterial infections in cirrhosis

A1 - Navasa M.

A1 - Rodes J.

Y1 - 2004//

N2 - Spontaneous bacterial peritonitis, urinary tract infections, respiratory infections and bacteremia are the most frequent infective complications in cirrhosis. These infections are due to the concomitant presence of different facilitating mechanisms including changes in the intestinal flora and in the intestinal barrier, depression of activity of the reticuloendothelial system, decreased opsonic activity of the ascitic fluid, neutrophil leukocyte dysfunction and iatrogenic factors among others. The fact, that the probability of having a microorganism responsible for the infection quinolone resistant is higher than 30% should be taken into account when treating any infection in a cirrhotic patient receiving selective intestinal decontamination with quinolones, and therefore, quinolones as empiric treatment are not indicated. © Blackwell Munksgaard 2004.

KW - antibiotic resistance

KW - ascites fluid

KW - bacteremia/co [Complication]

KW - bacteremia/dr [Drug Resistance]

KW - bacteremia/dt [Drug Therapy]

KW - \*bacterial infection/co [Complication]

KW - \*bacterial infection/dr [Drug Resistance]

KW - \*bacterial infection/dt [Drug Therapy]

KW - bacterial peritonitis/co [Complication]

KW - bacterial peritonitis/dr [Drug Resistance]

KW - bacterial peritonitis/dt [Drug Therapy]

KW - clinical trial

KW - drug choice

KW - drug efficacy

KW - drug safety

KW - Gram negative bacterium

KW - Gram positive bacterium

KW - human

KW - iatrogenic disease

KW - intestine flora

KW - leukocyte function

KW - \*liver cirrhosis

KW - nephrotoxicity/si [Side Effect]

KW - neutrophil

KW - nonhuman

KW - probability

KW - respiratory tract infection/co [Complication]

KW - respiratory tract infection/dr [Drug Resistance]

KW - respiratory tract infection/dt [Drug Therapy]

KW - reticuloendothelial system

KW - review

KW - superinfection/si [Side Effect]

KW - urinary tract infection/co [Complication]

KW - urinary tract infection/dr [Drug Resistance]

KW - urinary tract infection/dt [Drug Therapy]

KW - albumin/ct [Clinical Trial]

KW - albumin/ad [Drug Administration]

KW - albumin/cb [Drug Combination]

KW - albumin/dt [Drug Therapy]

KW - albumin/iv [Intravenous Drug Administration]

KW - amoxicillin/ct [Clinical Trial]

KW - amoxicillin/ad [Drug Administration]

KW - amoxicillin/cb [Drug Combination]

KW - amoxicillin/dt [Drug Therapy]

KW - amoxicillin/po [Oral Drug Administration]

KW - amoxicillin plus clavulanic acid/ct [Clinical Trial]

KW - amoxicillin plus clavulanic acid/ad [Drug Administration]

KW - amoxicillin plus clavulanic acid/dt [Drug Therapy]

KW - amoxicillin plus clavulanic acid/iv [Intravenous Drug Administration]

KW - ampicillin/ct [Clinical Trial]

KW - ampicillin/cb [Drug Combination]

KW - ampicillin/cm [Drug Comparison]

KW - ampicillin/dt [Drug Therapy]

KW - aztreonam/dt [Drug Therapy]

KW - cefadroxil/ct [Clinical Trial]

KW - cefadroxil/ad [Drug Administration]

KW - cefadroxil/cb [Drug Combination]

KW - cefadroxil/dt [Drug Therapy]

KW - cefadroxil/po [Oral Drug Administration]

KW - cefonicid/ad [Drug Administration]

KW - cefonicid/dt [Drug Therapy]

KW - cefonicid/iv [Intravenous Drug Administration]

KW - cefotaxime/ae [Adverse Drug Reaction]

KW - cefotaxime/ct [Clinical Trial]

KW - cefotaxime/ad [Drug Administration]

KW - cefotaxime/cm [Drug Comparison]

KW - cefotaxime/dt [Drug Therapy]

KW - cefotaxime/iv [Intravenous Drug Administration]

KW - ceftriaxone/ad [Drug Administration]

KW - ceftriaxone/dt [Drug Therapy]

KW - ceftriaxone/iv [Intravenous Drug Administration]

KW - cephalosporin derivative/ad [Drug Administration]

KW - cephalosporin derivative/dt [Drug Therapy]

KW - cephalosporin derivative/po [Oral Drug Administration]

KW - ciprofloxacin/dt [Drug Therapy]

KW - clindamycin/dt [Drug Therapy]

KW - cloxacillin/dt [Drug Therapy]

KW - cotrimoxazole/ct [Clinical Trial]

KW - cotrimoxazole/ad [Drug Administration]

KW - cotrimoxazole/cb [Drug Combination]

KW - cotrimoxazole/dt [Drug Therapy]

KW - cotrimoxazole/po [Oral Drug Administration]

KW - erythromycin/cb [Drug Combination]

KW - erythromycin/dt [Drug Therapy]

KW - metronidazole/ct [Clinical Trial]

KW - metronidazole/ad [Drug Administration]

KW - metronidazole/cb [Drug Combination]

KW - metronidazole/dt [Drug Therapy]

KW - metronidazole/po [Oral Drug Administration]

KW - norfloxacin/dt [Drug Therapy]

KW - ofloxacin/ct [Clinical Trial]

KW - ofloxacin/ad [Drug Administration]

KW - ofloxacin/cm [Drug Comparison]

KW - ofloxacin/dt [Drug Therapy]

KW - ofloxacin/po [Oral Drug Administration]

KW - pefloxacin/ct [Clinical Trial]

KW - pefloxacin/ad [Drug Administration]

KW - pefloxacin/cb [Drug Combination]

KW - pefloxacin/dt [Drug Therapy]

KW - pefloxacin/po [Oral Drug Administration]

KW - quinoline derived antiinfective agent/ct [Clinical Trial]

KW - quinoline derived antiinfective agent/ad [Drug Administration]

KW - quinoline derived antiinfective agent/cb [Drug Combination]

KW - quinoline derived antiinfective agent/dt [Drug Therapy]

KW - quinoline derived antiinfective agent/po [Oral Drug Administration]

KW - tobramycin/ct [Clinical Trial]

KW - tobramycin/cb [Drug Combination]

KW - tobramycin/cm [Drug Comparison]

KW - tobramycin/dt [Drug Therapy]

JF - Liver International

JA - Liver Int.

LA - English

VL - 24

IS - 4

SP - 277

EP - 280

CY - United Kingdom

PB - Blackwell Publishing Ltd (9600 Garsington Road, Oxford OX4 2XG, United Kingdom)

SN - 1478-3223

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DO - https://dx.doi.org/10.1111/j.1478-3231.2004.0934.x

PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed8&NEWS=N&AN=39162066

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed8&DO=10.1111%2fj.1478-3231.2004.0934.xLink to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Navasa&issn=1478-3223&title=Liver+International&atitle=Bacterial+infections+in+cirrhosis&volume=24&issue=4&spage=277&epage=280&date=2004&doi=10.1111%2Fj.1478-3231.2004.0934.x&pmid=15287849&sid=OVID:embase

303.

TY - JOUR

DB - Embase

AN - 24347270

ID - 7861440 [https://www.ncbi.nlm.nih.gov/pubmed/?term=7861440]

T1 - Cytokines and metabolic dysfunction after severe head injury

A1 - Ott L.

A1 - McClain C.J.

A1 - Gillespie M.

A1 - Young B.

Y1 - 1994//

N2 - Patients with head injury must overcome central as well as peripheral metabolic insults. In addition to specific tissue damage to the brain, a cellular biochemical cascade occurs that can negatively affect organ function, cause a systemic response to injury, and may cause secondary tissue injury. The metabolites involved in this cascade are numerous and complex. Cytokines are important cell-to-cell communication mediators during injury. It is speculated that cytokines, such as interleukin 1 (IL-1), interleukin 6 (IL-6), tumor necrosis factor (TNF), and interleukin 8 (IL-8), which are found in elevated amounts in both human and basic trials after head injury, play a role in the cellular cascade of injury. Some of the metabolic events produced by small doses of cytokine infusion in animals, as well as humans, include fever, neutrophilia, muscle breakdown, altered amino acid metabolism, depression of serum zinc levels, production of hepatic acute phase reactants, increased endothelial permeability, and expression of endothelial adhesion molecules. These are all known sequelae of severe head injury. Cytokines have also been implicated in organ failure. Infusion of cytokines in basic science trials revealed that organ functions of the gut, liver, and lung are negatively altered by high-dose cytokine infusion. Infusion of certain cytokines has been shown to cause death of brain cells, increase blood-brain barrier permeability, and cause cerebral edema. This suggests that cytokines may also play a role in the sequelae of organ demise. These effects of cytokines have been attenuated in basic trials by blocking the initial signaling system of cytokines or by decreasing serum cytokine activity. We hypothesize that cytokines that are elevated after head injury play a role in the pathology of injury, including altered metabolism and organ demise.

KW - acute phase response

KW - antibiotic therapy

KW - blood brain barrier

KW - blood vessel permeability

KW - cell communication

KW - diet supplementation

KW - enteric feeding

KW - gastritis

KW - \*gastrointestinal disease

KW - \*head injury/et [Etiology]

KW - human

KW - \*inflammation/et [Etiology]

KW - intestine flora

KW - liver dysfunction

KW - lung injury

KW - membrane permeability

KW - \*metabolic disorder/et [Etiology]

KW - neutrophilia/et [Etiology]

KW - nonhuman

KW - review

KW - stomach emptying

KW - acute phase protein/ec [Endogenous Compound]

KW - \*antioxidant/pd [Pharmacology]

KW - C reactive protein/ec [Endogenous Compound]

KW - centoxin/pd [Pharmacology]

KW - cytochrome P450/ec [Endogenous Compound]

KW - \*cytokine/ec [Endogenous Compound]

KW - \*cytokine/pd [Pharmacology]

KW - glutamine

KW - interleukin 1/ec [Endogenous Compound]

KW - interleukin 1/pd [Pharmacology]

KW - interleukin 1 receptor blocking agent/pd [Pharmacology]

KW - interleukin 6/ec [Endogenous Compound]

KW - interleukin 6/pd [Pharmacology]

KW - interleukin 8/ec [Endogenous Compound]

KW - interleukin 8/pd [Pharmacology]

KW - \*pentoxifylline/pd [Pharmacology]

KW - \*prostaglandin derivative/pd [Pharmacology]

KW - somatomedin C/pd [Pharmacology]

KW - \*steroid/pd [Pharmacology]

KW - \*transforming growth factor beta/pd [Pharmacology]

KW - tumor necrosis factor/ec [Endogenous Compound]

KW - tumor necrosis factor/pd [Pharmacology]

KW - zinc/ec [Endogenous Compound]

JF - Journal of Neurotrauma

JA - J. NEUROTRAUMA

LA - English

VL - 11

IS - 5

SP - 447

EP - 472

CY - United States

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PT - Review

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed5&NEWS=N&AN=24347270

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed5&AN=24347270Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Ott&issn=0897-7151&title=Journal+of+Neurotrauma&atitle=Cytokines+and+metabolic+dysfunction+after+severe+head+injury&volume=11&issue=5&spage=447&epage=472&date=1994&doi=&pmid=7861440&sid=OVID:embase

304.

TY - JOUR

DB - Embase

AN - 24052226

T1 - Decontamination/antiinfectious prophylaxis and supportive care

A1 - Beelen D.W.

A1 - Hiddemann W.

Y1 - 1993//

KW - aerobic bacterium

KW - antibiotic prophylaxis

KW - anxiety

KW - bacteremia/et [Etiology]

KW - bacterial infection/dt [Drug Therapy]

KW - bacterial infection/pc [Prevention]

KW - bone marrow suppression/si [Side Effect]

KW - bone marrow transplantation

KW - catheter

KW - clinical article

KW - clinical trial

KW - conference paper

KW - controlled clinical trial

KW - controlled study

KW - cost benefit analysis

KW - depression/co [Complication]

KW - \*disinfection

KW - drug efficacy

KW - drug eruption/si [Side Effect]

KW - drug mixture

KW - graft versus host reaction/pc [Prevention]

KW - Gram positive bacterium

KW - human

KW - \*infection prevention

KW - inhalational drug administration

KW - intestine flora

KW - lung lavage

KW - major clinical study

KW - mycosis/dt [Drug Therapy]

KW - mycosis/pc [Prevention]

KW - neutropenia

KW - oral drug administration

KW - patient information

KW - priority journal

KW - randomized controlled trial

KW - retrospective study

KW - total parenteral nutrition

KW - toxoplasmosis/dt [Drug Therapy]

KW - toxoplasmosis/pc [Prevention]

KW - amphotericin B/ad [Drug Administration]

KW - amphotericin B/dt [Drug Therapy]

KW - antifungal agent/dt [Drug Therapy]

KW - ciprofloxacin/cb [Drug Combination]

KW - ciprofloxacin/dt [Drug Therapy]

KW - fansidar/ae [Adverse Drug Reaction]

KW - fansidar/dt [Drug Therapy]

KW - fluconazole/cb [Drug Combination]

KW - fluconazole/dt [Drug Therapy]

KW - glucose

KW - lipid

KW - pyrimethamine/cb [Drug Combination]

KW - pyrimethamine/dt [Drug Therapy]

KW - sulfadoxine/cb [Drug Combination]

KW - sulfadoxine/dt [Drug Therapy]

KW - teicoplanin/dt [Drug Therapy]

KW - trace element

JF - Bone Marrow Transplantation

JA - BONE MARROW TRANSPLANT.

LA - English

VL - 12

IS - SUPPL. 4

SP - S92

EP - S93

CY - United Kingdom

PB - Nature Publishing Group (Houndmills, Basingstoke, Hampshire RG21 6XS, United Kingdom)

SN - 0268-3369

AD - D.W. Beelen, Dept of Bone Marrow Transplantation, University Hospital, Essen, Germany

M1 - (Beelen, Hiddemann) Dept of Bone Marrow Transplantation, University Hospital, Essen, Germany

PT - Conference Paper

L2 - http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed5&NEWS=N&AN=24052226

ER -

Link to the Ovid Full Text or citation: https://ovidsp.ovid.com/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=emed5&AN=24052226Link to the External Link Resolver: https://libkey.io/libraries/2281/openurl?genre=article&aulast=Beelen&issn=0268-3369&title=Bone+Marrow+Transplantation&atitle=Decontamination%2Fantiinfectious+prophylaxis+and+supportive+care&volume=12&issue=SUPPL.+4&spage=S92&epage=S93&date=1993&doi=&pmid=&sid=OVID:embase