



## ***LA RICERCA BIBLIOGRAFICA NEL <NUOVO> PUBMED***

***Dott.ssa Nicoletta Lumina***

**22 gennaio 2020, ore 11.15 – 12.45**

**Laboratorio Informatica 1, Edificio Centrale di Medicina**

# PROGRAMMA

- ***LA RICERCA BIBLIOGRAFICA:*** concetti base
- ***BANCHE DATI:*** cosa sono, contenuto e struttura
- ***PUBMED:*** che cos'è, contenuto, struttura e accesso
- ***PUBMED:*** la ricerca, i filtri, il link al full text
- ***PUBMED:*** la ricerca con MESH
- ***PUBMED:*** Advanced Search Builder
- ***PUBMED:*** gestione dei risultati della ricerca
- ***PUBMED:*** ulteriori strumenti e risorse
- ***LA RICERCA BIBLIOGRAFICA:*** consigli finali

# La ricerca bibliografica <sup>(1)</sup>

E' quel processo che ci permette di soddisfare un bisogno informativo.

Le finalità della ricerca bibliografica **condotta all'interno di una banca dati** possono essere molteplici:

- «**fotografare**» lo **stato dell'arte** di un argomento di nostro interesse
- mantenere un **aggiornamento regolare** su un determinato argomento
- ottenere una risposta ad un **quesito specifico**

# La ricerca bibliografica (2)

In base quindi al nostro bisogno informativo il risultato della ricerca sarà quello di:

- **ottenere una bibliografia (elenco di documenti)**
- **ottenere una risposta precisa, cioè un dato fattuale**, al nostro quesito (ad es. un valore, la composizione di un farmaco, etc.)



# Banche dati: cosa sono

- Si tratta di **archivi elettronici di dati**, omogenei per contenuto e per formato, strutturati in modo tale da poter essere interrogati grazie ad uno o più criteri o parole chiave
- Le banche dati **raccolgono** e **organizzano** informazioni di varia natura
- In base alle informazioni che contengono, possiamo individuare diverse tipologie di banche dati: **BIBLIOGRAFICHE, FATTUALI e CITAZIONALI**

# Banche dati: cosa contengono (1)

- **BANCA DATI FATTUALE:** consente l'accesso diretto ai dati (es.: **JCR**, per ottenere l'Impact Factor di un periodico; **CODIFA**, banca dati del farmaco; **CAS Registry** per strutture chimiche). Ottengo immediatamente l'informazione che sto cercando
- **BANCA DATI BIBLIOGRAFICA:** contiene un insieme di citazioni bibliografiche che rimandano ai documenti cui si riferiscono (es.: **PUBMED**; **CINHAL**; **EMBASE**). Ho bisogno di un ulteriore passaggio per ottenere ciò che mi serve

# Banche dati: cosa contengono (2)

- La distinzione tra le due tipologie di banche dati, grazie alla tecnologia, si sta facendo sempre più sfumata: **le banche dati bibliografiche contengono sempre più frequentemente il collegamento al testo pieno (full text) dei documenti cui si riferiscono.**

# Banche dati: come sono strutturate (1)

- Nel caso di una banca dati bibliografica, l'unità informativa elementare è costituita dalla **citazione bibliografica** (detta anche **record bibliografico**); ogni record bibliografico «rappresenta» un articolo
- Possiamo quindi definire una banca dati anche come un **insieme strutturato di record**
- Ogni **record**, a sua volta, è scomponibile in unità più piccole, chiamate **campi** (es.: autore, titolo dell'articolo, titolo del periodico, data di pubblicazione, abstract, termini MESH)

## Banche dati: come sono strutturate (2)

Da quando detto finora consegue che **ogni campo costituisce un punto di accesso al record**, perché ogni campo contiene un'informazione **rilevante** relativa al documento.

# PubMed: che cos'è

PubMed è l'interfaccia gratuita di Medline, **banca dati bibliografica** sviluppata dal National Center for Biotechnology Information (**NCBI**), una divisione della National Library of Medicine (**NLM**)

- E' la **banca dati bibliografica** più vasta e prestigiosa per la ricerca di letteratura biomedica.
- Dal 1997 è accessibile gratuitamente da qualsiasi postazione collegata alla rete Internet
- Attualmente indicizza circa **5600 periodici**, pubblicati negli Stati Uniti e in altri paesi, per un insieme di circa **30 milioni di citazioni bibliografiche**.

# PubMed: cosa contiene <sup>(1)</sup>

- Le **citazioni bibliografiche** (dette anche **referenze**) provengono per circa il 90% da fonti di lingua inglese; per circa l'80% sono corredate da abstract
- Le citazioni fanno riferimento principalmente ad articoli pubblicati su riviste scientifiche, ma non solo: si trovano anche riferimenti a capitoli di libri, anche elettronici

# PubMed: cosa contiene (2)

- PubMed è una banca dati composta da diversi database (o sezioni).
- Il nucleo principale di **PubMed** è costituito da **Medline**, con il 90% del totale delle citazioni presenti. Contiene citazioni a partire dal 1966 ad oggi, **indicizzate completamente** (corredate cioè di termini MESH e abstract).



# PubMed: cosa contiene (3)



- **OLDMedline:** contiene citazioni relative al periodo 1946 - 1965, per la maggior parte **prive sia di abstract che di termini di soggetto (MESH).**
- **PREMedline:** contiene citazioni di articoli appena pubblicati, la cui indicizzazione non è stata completata (in process). **Sono prive dei termini di soggetto (MESH).**
- **As supplied by publisher:** si tratta di citazioni fornite dall'editore, a volte anche prima della pubblicazione del documento: anche queste non sono ancora indicizzate e quindi **prive di termini di soggetto (MESH).**



influence of antibiotic combination



Search

Advanced

Search results

Save

Email

...

> Antibiot Chemother (Northfield), 3 (8), 778-82 Aug 1953



## The Influence of Antibiotic Combinations on the Growth Response of the Pig

D E BECKER, S W TERRILL, J W LASSITER, T S NELSON, D I GARD

PMID: 24542575

ACTIONS

Cite

Favorites

SHARE



1

### Similar articles

[The Growth Response of the Pig to a Dietary Source of Various Antibacterial Agents and to Intramuscular Injections of Procaine Penicillin](#)

DE BECKER et al. Antibiot Chemother (Northfield) 2 (5), 259-64. May 1952. PMID 24541902.

[The Efficacy of Various Antibacterial Agents for Stimulating the Rate of Gain in the Pig](#)

DE BECKER et al. Antibiot Chemother (Northfield) 2 (8), 421-6. Aug 1952. PMID 24542064.

[Antibiotic as Animal-Growth Stimulants](#)

EM WEBER et al. Rend Ist Sup Sanit 16 (Suppl.), 188-204. 1953. PMID 13134608.

[\[Effect of Antibiotics on Growth of Animals and Plants\]](#)

GIa KIVMAN. Usp Sovrem Biol 38 (2), 163-82. Sep-Oct 1954. PMID 13226575.

[Antibiotics in the Growth of Ruminant Animals](#)

CB KNODT. Antibiot Chemother (Northfield) 3 (4), 442-8. Apr 1953. PMID 24542407.

PAGE NAVIGATION

< Title & authors

Similar articles

MeSH terms

Substances

LinkOut - more resources



# The Influence of Antibiotic Combinations on the Growth Response of the Pig

D E BECKER, S W TERRILL, J W LASSITER, T S NELSON, D I GARD

PMID: 24542575

## Similar articles

The Growth Response of the Pig to a Dietary Source of Various Antibacterial Agents and to Intramuscular Injections of Procaine Penicillin

DE BECKER et al. Antibiot Chemother (Northfield) 2 (5), 259-64. May 1952. PMID 24541902.

The Efficacy of Various Antibacterial Agents for Stimulating the Rate of Gain in the Pig

DE BECKER et al. Antibiot Chemother (Northfield) 2 (8), 421-6. Aug 1952. PMID 24542064.

Antibiotic as Animal-Growth Stimulants

EM WEBER et al. Rend Ist Sup Sanit 16 (Suppl.), 188-204. 1953. PMID 13134608.

[Effect of Antibiotics on Growth of Animals and Plants]

Gia KIVMAN. Usp Sovrem Biol 38 (2), 163-82. Sep-Oct 1954. PMID 13226575.

Antibiotics in the Growth of Ruminant Animals

CB KNODT. Antibiot Chemother (Northfield) 3 (4), 442-8. Apr 1953. PMID 24542407.

Show more similar articles

See all similar articles

## MeSH terms

- > Animals
- > Anti-Bacterial Agents / pharmacology ★
- > Antibiotics, Antitubercular ★
- > Dermatologic Agents ★
- > Growth / drug effects ★
- > Swine

## Substances

- > Anti-Bacterial Agents
- > Antibiotics, Antitubercular
- > Dermatologic Agents

## ACTIONS

“ Cite

☆ Favorites

## SHARE



## PAGE NAVIGATION

< Title & authors

Similar articles

MeSH terms

Substances

LinkOut - more resources

2



breast cancer tamoxifen therapy



Search

Advanced

Search results

Save

Email

...

> Cancer Epidemiol Biomarkers Prev 2020 Jan 13[Online ahead of print]



## Metabolic Pathway Analysis and Effectiveness of Tamoxifen in Danish Breast Cancer Patients

Thomas P Ahern<sup>1</sup>, Lindsay J Collin<sup>2</sup>, James W Baurley<sup>3</sup>, Anders Kjærsgaard<sup>4</sup>, Rebecca Nash<sup>2</sup>, Maret L Maliniak<sup>2</sup>, Per Damkier<sup>5</sup>, Michael E Zwick<sup>6</sup>, R Benjamin Isett<sup>7</sup>, Peer M Christiansen<sup>8</sup>, Bent Ejlersen<sup>9</sup>, Kristina L Lauridsen<sup>10</sup>, Kristina Bang Christensen<sup>10</sup>, Rebecca A Silliman<sup>11</sup>, Henrik Toft Sorensen<sup>4</sup>, Trine Tramm<sup>10</sup>, Stephen Hamilton-Dutoit<sup>10</sup>, Timothy L Lash<sup>12</sup>, Deirdre Cronin Fenton<sup>4</sup>

Affiliations + expand

PMID: 31932415 DOI: 10.1158/1055-9965.EPI-19-0833

### Abstract

**Background:** Tamoxifen and its metabolites compete with estrogen to occupy the estrogen receptor. The conventional dose of adjuvant tamoxifen overwhelms estrogen in this competition, reducing breast cancer recurrence risk by nearly half. Phase 1 metabolism generates active tamoxifen metabolites and phase 2 metabolism deactivates them. No earlier pharmacogenetic study has comprehensively evaluated the metabolism and transport pathways, and no earlier study has included a large population of premenopausal women.

#### ACTIONS

“ Cite

☆ Favorites

#### SHARE



#### PAGE NAVIGATION

< Title & authors

Abstract



Similar articles





## Merkel Cell Carcinoma: Updates on Staging and Management

Christine Cornejo<sup>1</sup>, Christopher J Miller<sup>2</sup>

Affiliations + expand

PMID: 31084721 DOI: 10.1016/j.det.2019.03.001

### Abstract

Merkel cell carcinoma is an aggressive neuroendocrine carcinoma with increasing incidence over the past few decades. The TNM Staging System used for Merkel cell carcinoma was updated by the American Joint Committee on Cancer in 2017. Clinical practice guidelines were updated by the National Comprehensive Cancer Network on August 31, 2018. This article reviews the most recent evidence-based updates on staging and management.

**Keywords:** Immune checkpoint inhibitors; Merkel cell carcinoma; Merkel cell polyomavirus; Mohs micrographic surgery; Sentinel lymph node biopsy; Staging; Wide local excision.

Copyright © 2019 Elsevier Inc. All rights reserved.

### Similar articles

Merkel Cell Carcinoma: An Update and Review: Current and Future Therapy

TL Tello et al. J Am Acad Dermatol 78 (3), 445-454. Mar 2018. PMID 29229573. - Review

Merkel cell carcinoma (MCC) is a rare neuroendocrine tumor of the skin associated with a high risk of local recurrence and distant metastases. It most commonly occurs on ...

[Merkel Cell Carcinoma: Current Care]

C Girard et al. J Am Acad Dermatol 78 (3), 445-454. Mar 2018. PMID 29229573. - Review

#### FULL TEXT LINKS

ELSEVIER  
FULL-TEXT ARTICLE

#### ACTIONS

“ Cite

☆ Favorites

#### SHARE



1

#### PAGE NAVIGATION

< Title & authors

Abstract

Similar articles

Publication types

MeSH terms

Substances

LinkOut - more

## Merkel Cell Carcinoma: An Update and Review: Current and Future Therapy

TL Tello et al. J Am Acad Dermatol 78 (3), 445-454. Mar 2018. PMID 29229573. - Review

Merkel cell carcinoma (MCC) is a rare neuroendocrine tumor of the skin associated with a high risk of local recurrence and distant metastases. It most commonly occurs on ...

## [Merkel Cell Carcinoma: Current Care]

C Girard et al. Ann Dermatol Venereol 137 (5), 402-7; quiz 400, 416. May 2010. PMID 20470926. - Review

## [Merkel Cell Carcinoma]

C Drusio et al. Hautarzt 70 (3), 215-227. Mar 2019. PMID 30701288.

Merkel cell carcinoma is a rare, highly aggressive skin tumor with neuroendocrine features found in older people. The pathogenesis is associated with immunosuppression, c ...

## Merkel Cell Carcinoma: A Review and Update on Aetiopathogenesis, Diagnosis and Treatment Approaches

JC Cardoso et al. Wien Med Wochenschr 163 (15-16), 359-67. Aug 2013. PMID 23797682. - Review

Merkel cell carcinoma (MCC) or primary cutaneous neuroendocrine carcinoma is a relatively uncommon form of skin cancer. It is an aggressive neoplasm with high tendency fo ...

## Current Management of Patients With Merkel Cell Carcinoma

MS Brady. Dermatol Surg 30 (2 Pt 2), 321-5. Feb 2004. PMID 14871227. - Review

Show more similar articles

See all similar articles

## Publication types

> Review

## MeSH terms

- > Antineoplastic Agents / therapeutic use ★
- > Carcinoma, Merkel Cell / diagnosis
- > Carcinoma, Merkel Cell / secondary ★
- > Carcinoma, Merkel Cell / therapy ★
- > Dermatologic Surgical Procedures
- > Humans
- > Lymphatic Metastasis
- > Neoplasm Recurrence, Local / diagnosis
- > Neoplasm Staging ★
- > Radiotherapy, Adjuvant
- > Skin Neoplasms / diagnosis
- > Skin Neoplasms / pathology ★
- > Skin Neoplasms / therapy ★

FULL TEXT LINKS

ELSEVIER  
FULL-TEXT ARTICLE

ACTIONS

“ Cite

☆ Favorites

SHARE



PAGE NAVIGATION

Title & authors

Abstract

< Similar articles

Publication types

MeSH terms

Substances

LinkOut - more resources

2

MESH = campi di tipo semantico

# PubMed: l'accesso <sup>(1)</sup>

- **ACCESSO TRAMITE PORTALE DI ATENEO**, che rende disponibili in modo integrato – grazie a Full Text Finder - **le risorse elettroniche acquistate dall'Ateneo:**

<https://pubmed.ncbi.nlm.nih.gov/?otool=itserpelib>

- **ACCESSO PUBBLICO, DAL SITO NCBI** (National Centre for Biotechnology Information):

<https://pubmed.ncbi.nlm.nih.gov/>





# PubMed: l'accesso (2)



UNIVERSITÀ  
DEGLI STUDI  
DI BRESCIA

unibs.it

Cerca nel portale

@Mail

AteneoDidatticaRicerca

[CORSI DI STUDIO](#) [DIPARTIMENTI](#) [TERZA MISSIONE](#) **BIBLIOTECHE** [Servizi online](#)

## Sistema Bibliotecario di Ateneo

- Organizzazione
- Servizi
- Cerca e trova risorse
- Relazioni e statistiche
- Biblioteca di Economia e Giurisprudenza
- Biblioteca di Ingegneria
- Biblioteca di Medicina**
  - Presentazione
  - Elenco personale
  - Patrimonio
  - Guide e materiali informativi



Home - Biblioteche

## Biblioteca di Ingegneria e Medicina - Sede di Medicina

Sede: Edificio di Medicina e Chirurgia in Viale Europa, 11.

Orari:

- Biblioteca: lunedì-venerdì 8.30-17.45.
- Sale studio ad accesso libero (adiacenti alla biblioteca): lunedì-giovedì 8.00-18.30, venerdì 8.00-17.45.

### Sede

Viale Europa, 11 - 25123 Brescia  
Tel. +390303717368  
[biblioteca.med@unibs.it](mailto:biblioteca.med@unibs.it)

### Pagine Correlate

- Cerca e trova risorse - Sistema Bibliotecario di Ateneo

### Siti correlati

- UniBS Discovery
- Trova e-book e periodici elettronici
- Catalogo
- ACNP - Periodici UniBS
- Elenco risorse in Biblioteca digitale
- PubMed (integrato con Full Text Finder)

### News ed eventi

altre news » altri eventi »

<h4>Nuovi strumenti in UniBS Discovery</h4> <p>Il discovery tool UniBS Discovery offre nuove funzionalità: il link resolver Full Text Finder e l'interfaccia di ricerca Trova e-book e periodici elettronici ... (leggi il testo completo)</p>	<h4>PubMed: novità in arrivo</h4> <p>Ad inizio 2020 sarà disponibile in versione definitiva il "nuovo" PubMed. Leggi il testo completo...</p>	<h4>SciFinder-n</h4> <p>Si avvisa che è disponibile SciFinder-n, la nuova soluzione creata da CAS (Chemical Abstracts Service) per la ricerca nel campo delle scienze correlate ... (leggi il testo completo).</p>
--	---	--



Click here to try the **New PubMed!**

An updated version of PubMed is now available.  
Come see the new improvements to the interface!

**PubMed**

PubMed comprises more than 30 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.

### Using PubMed

[PubMed Quick Start Guide](#)

[Full Text Articles](#)

[PubMed FAQs](#)

[PubMed Tutorials](#)

[New and Noteworthy](#)

### PubMed Tools

[PubMed Mobile](#)

[Single Citation Matcher](#)

[Batch Citation Matcher](#)

[Clinical Queries](#)

[Topic-Specific Queries](#)

### More Resources

[MeSH Database](#)

[Journals in NCBI Databases](#)

[Clinical Trials](#)

[E-Utilities \(API\)](#)

[LinkOut](#)



Welcome to the new PubMed. For legacy PubMed go to [pubmed.gov](https://pubmed.gov).



U.S. National Library of Medicine  
National Center for Biotechnology Information

Log in

**Nuova piattaforma, utilizzabile in via sperimentale da novembre 2019 e che a primavera 2020 diverrà l'interfaccia di ricerca standard**

PubMed.gov

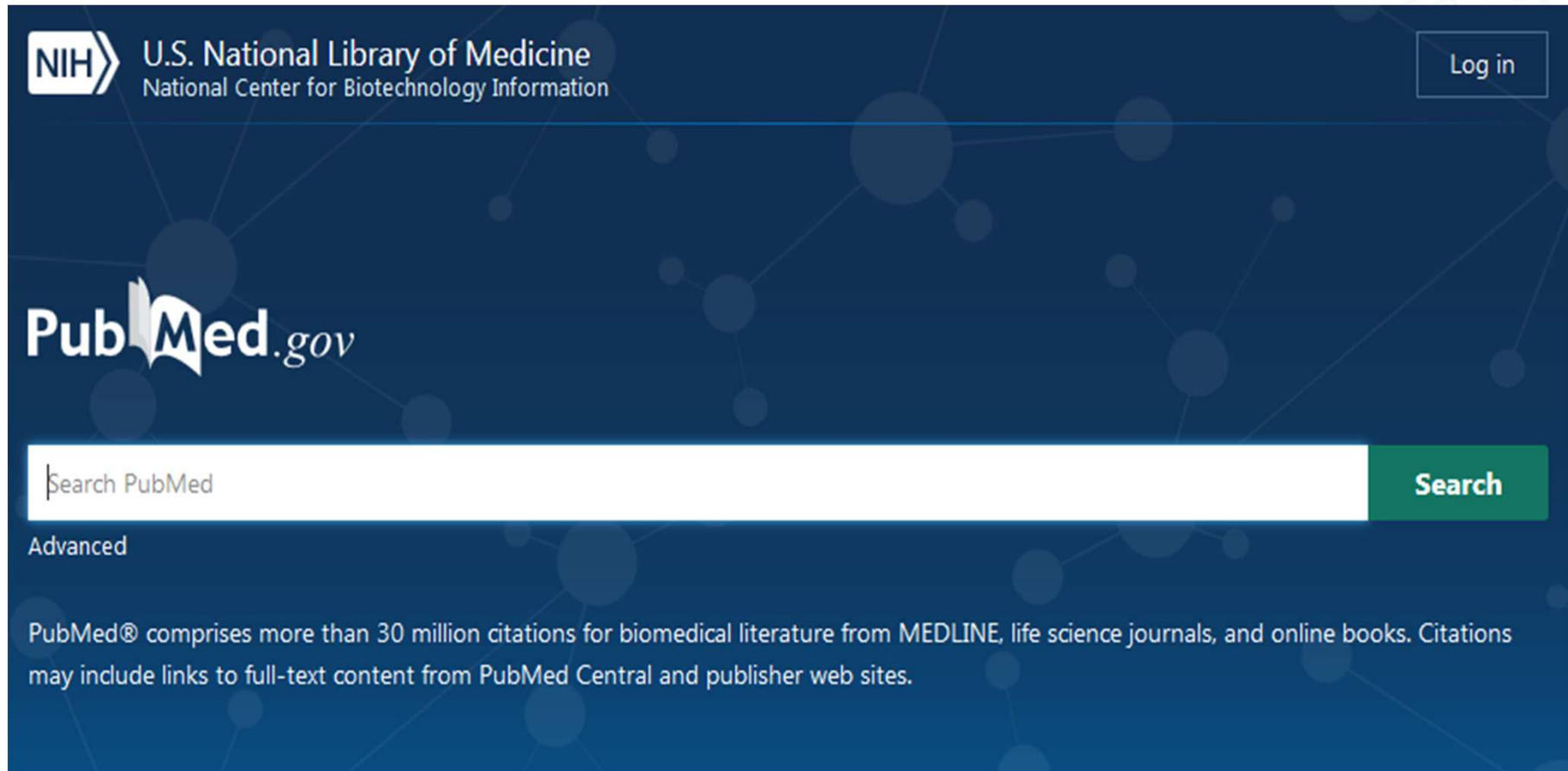
Search PubMed

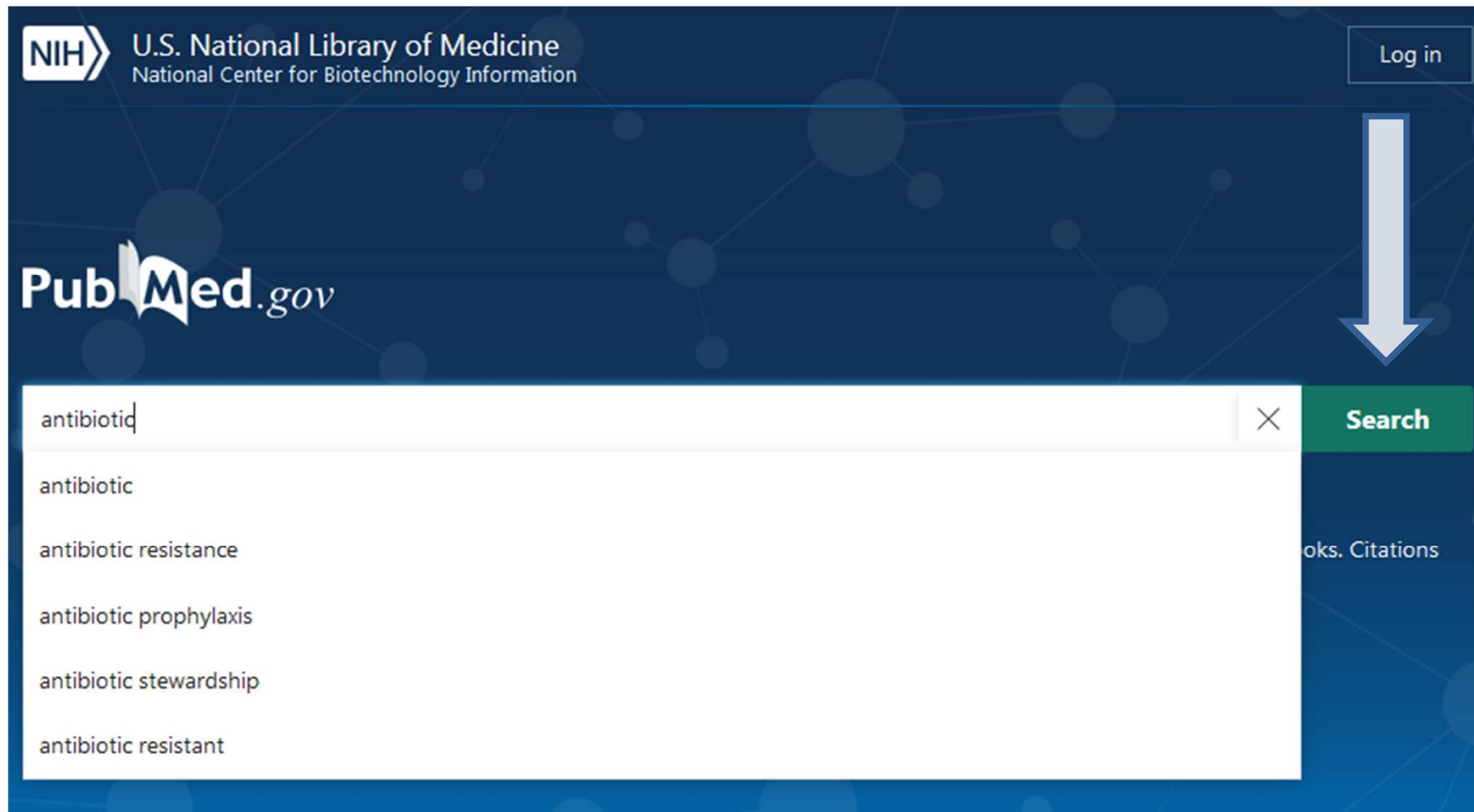
Search

Advanced

PubMed® comprises more than 30 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.

# PubMed: la maschera di ricerca





Inseriamo uno o più termini  
che riteniamo pertinenti, in  
questo caso uno solo

antibiotic

citazione / record bibliografico / referenza

Advanced Create alert

Save

Email

...

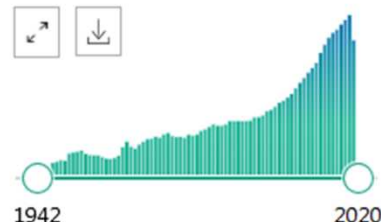
Sort by: Best match



MYNCBI FILTERS

876,090 results

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

**Antibiotic Adjuvants: Rescuing Antibiotics from Resistance.**

1 Wright GD. Trends Microbiol 2016 - Review. PMID 27430191

Rooted in the mechanism of action of **antibiotics** and subject to **bacterial** evolution, **antibiotic** resistance is difficult and perhaps impossible to overcome. ...**Antibiotic** adjuvants are therefore delivered in combination with **antibiotics** and can be divided into two groups: Class I **agents** that act on the pathogen, and Class II **agents** that act on the host. ...

Cite Share

☐ **Fighting antibiotic resistance in the intensive care unit using antibiotics.**

2 Plantinga NL, et al. Future Microbiol 2015 - Review. PMID 25812462

**Antibiotic** resistance is a global and increasing problem that is not counterbalanced by the development of new therapeutic **agents**. ...In addition to classical infection prevention protocols and surveillance programs, counterintuitive interventions, such as selective decontamination with **antibiotics** and **antibiotic** rotation have been applied and investigated to control the emergence of **antibiotic** resistance. ...

Cite Share

☐ **What is an "ideal" antibiotic? Discovery challenges and path forward.**

3 Singh SB, et al. Biochem Pharmacol 2017 - Review. PMID 28087253

An ideal **antibiotic** is an antibacterial agent that kills or inhibits the growth of all harmful bacteria in a host, regardless of site of infection without affecting beneficial gut microbes (gut flora) or causing undue toxicity to the host. Sadly, no such **antibiotics** exist. What exist are many effective Gram-positive antibacterial **agents** as well as broad-spectrum **agents** that provide treatment of certain Gram-negative bacteria but not holistic treatment of all bacteria. ...



# Struttura del record bibliografico (1)

Search results

Save

Email

...

Review

&gt; Trends Microbiol, 24 (11), 862-871 Nov 2016

fonte bibliografica

FULL TEXT LINKS

## Antibiotic Adjuvants: Rescuing Antibiotics From Resistance

titolo articolo

Gerard D Wright<sup>1</sup>

autore/autori (con affiliazione)

Affiliations + expand

PMID: 27430191

Numero univoco identificativo della citazione

### Erratum in

Antibiotic Adjuvants: Rescuing Antibiotics From Resistance: (Trends in Microbiology 24, 862-871; October 17, 2016)

GD Wright. Trends Microbiol 24 (11), 928. Nov 2016. PMID 27522372.

### Abstract

riassunto (in lingua inglese)

Rooted in the mechanism of action of antibiotics and subject to bacterial evolution, antibiotic resistance is difficult and perhaps impossible to overcome. Nevertheless, strategies can be used to minimize the emergence and impact of resistance. Antibiotic adjuvants offer one such approach. These are compounds that have little or no antibiotic activity themselves but act to block resistance or otherwise enhance antibiotic action. Antibiotic adjuvants are therefore delivered in combination with antibiotics and can be divided into two groups: Class I agents that act on the pathogen, and Class II agents that act on the host. Adjuvants offer a means to both suppress the emergence of resistance and rescue the activity of existing drugs, offering an orthogonal strategy complementary to new antibiotic discovery VIDEO ABSTRACT.

**Keywords:** antibacterial; drug combinations; drug discovery; inhibitor.

Copyright © 2016 Elsevier Ltd. All rights reserved.

### Similar articles

Antibiotic Adjuvants: Multicomponent Anti-Infective Strategies

L Kalan et al. Expert Rev Mol Med 13, e5. 2011. PMID 21342612. - Review

The unremitting emergence of multidrug-resistant bacterial pathogens highlights a matching need for new therapeutic options. For example, new carbapenemases such as KPC ( ...

ACTIONS

Cite

Favorites

SHARE



PAGE NAVIGATION

&lt; Title &amp; authors

Erratum in

Abstract

Similar articles

Cited by

Publication types

MeSH terms

Substances

LinkOut - more resources

## Struttura del record bibliografico (2)

### Similar articles

#### articoli dal contenuto simile

Antibiotic Adjuvants: Multicomponent Anti-Infect

S. 2011. PMID 21342612. - Review

ug-resistant bacterial pathogens highlights a matching need for new therapeutic options. For example, new carbapenemases such as KPC ( ...

A Common Platform for Antibiotic Dereplication and Adjuvant Discovery

G Cox et al. Cell Chem Biol 24 (1), 98-109. 2017. PMID 28017602.

Solving the antibiotic resistance crisis requires the discovery of new antimicrobial drugs and the preservation of existing ones. The discovery of inhibitors of antibioti ...

Enhanced Antibacterial Effect of Antibiotics in Combination With Silver Nanoparticles Against Animal Pathogens

M Smekalova et al. Vet J 209, 174-9. Mar 2016. PMID 26832810.

Antibiotic resistant bacteria are a serious health risk in both human and veterinary medicine. Several studies have shown that silver nanoparticles (AgNPs) exert a high I ...

Combination Approaches to Combat Multidrug-Resistant Bacteria

RJ Worthington et al. Trends Biotechnol 31 (3), 177-84. Mar 2013. PMID 23333434. - Review

The increasing prevalence of infections caused by multidrug-resistant bacteria is a global health problem that has been exacerbated by the dearth of novel classes of anti ...

Drug Combinations: A Strategy to Extend the Life of Antibiotics in the 21st Century

M Tyers et al. Nat Rev Microbiol 17 (3), 141-155. Mar 2019. PMID 30683887. - Review

Antimicrobial resistance threatens a resurgence of life-threatening bacterial infections and the potential demise of many aspects of modern medicine. Despite intensive dr ...

Show more similar articles

See all similar articles

Cited by 54 PubMed Central articles

#### articoli che hanno citato l'articolo di partenza

Considerations and Caveats in Combating ESKAPE Pathogens Against Nosocomial Infections

YX Ma et al. Adv Sci (Weinh) 7 (1), 1901872. 2019. PMID 31921562. - Review

ESKAPE pathogens (*Enterococcus faecium*, *Staphylococcus aureus*, *Klebsiella pneumoniae*, *Acinetobacter baumannii*, *Pseudomonas aeruginosa*, ...

Strategies to Overcome Antimicrobial Resistance (AMR) Making Use of Non-Essential Target Inhibitors: A Review

G Annunziato. Int J Mol Sci 20 (23). 2019. PMID 31766441. - Review

Antibiotics have always been considered as one of the most relevant discoveries of the twentieth century. Unfortunately, the dawn of the antibiotic era has sadly correspo ...

An sRNA Screen for Reversal of Quinolone Resistance in *Escherichia coli*

K Bhatnagar et al. G3 (Bethesda) 10 (1), 79-88. 2020. PMID 31744901.

In light of the rising prevalence of antimicrobial resistance (AMR) and the slow pace of new antimicrobial development, there has been increasing interest in the developm ...

Full Text Finder

#### ACTIONS

Cite

Favorites

#### SHARE



#### PAGE NAVIGATION

Title & authors

Erratum in

Abstract

< Similar articles

Cited by

MeSH terms

Substances

LinkOut - more resources

## Struttura del record bibliografico (3)

that is

Show more "Cited by" articles

See all "Cited by" articles

### Publication types

> Review

### MeSH terms

MESH=Medical Subject Heading

- > Adjuvants, Pharmaceutic / pharmacology ★
- > Adjuvants, Pharmaceutic / therapeutic use
- > Anti-Bacterial Agents / chemistry
- > Anti-Bacterial Agents / pharmacology ★
- > Anti-Bacterial Agents / therapeutic use
- > Bacteria / drug effects
- > Bacterial Infections / drug therapy
- > Drug Combinations
- > Drug Discovery
- > Drug Resistance, Multiple, Bacterial / drug effects ★
- > Drug Resistance, Multiple, Bacterial / physiology
- > Drug Synergism
- > Humans
- > beta-Lactamases

### Substances

Farmaci o sostanze chimiche di cui si parla nell'articolo

- > Adjuvants, Pharmaceutic
- > Anti-Bacterial Agents
- > Drug Combinations
- > beta-Lactamases

### LinkOut – more resources

#### Full Text Sources

ClinicalKey  
Elsevier Science

#### Medical

MedlinePlus Health Information

#### FULL TEXT LINKS

CellPress

Full Text Finder

#### ACTIONS

Cite

Favorites

#### SHARE



#### PAGE NAVIGATION

Title & authors

Erratum in

Abstract

Similar articles

< Cited by

Publication types

MeSH terms

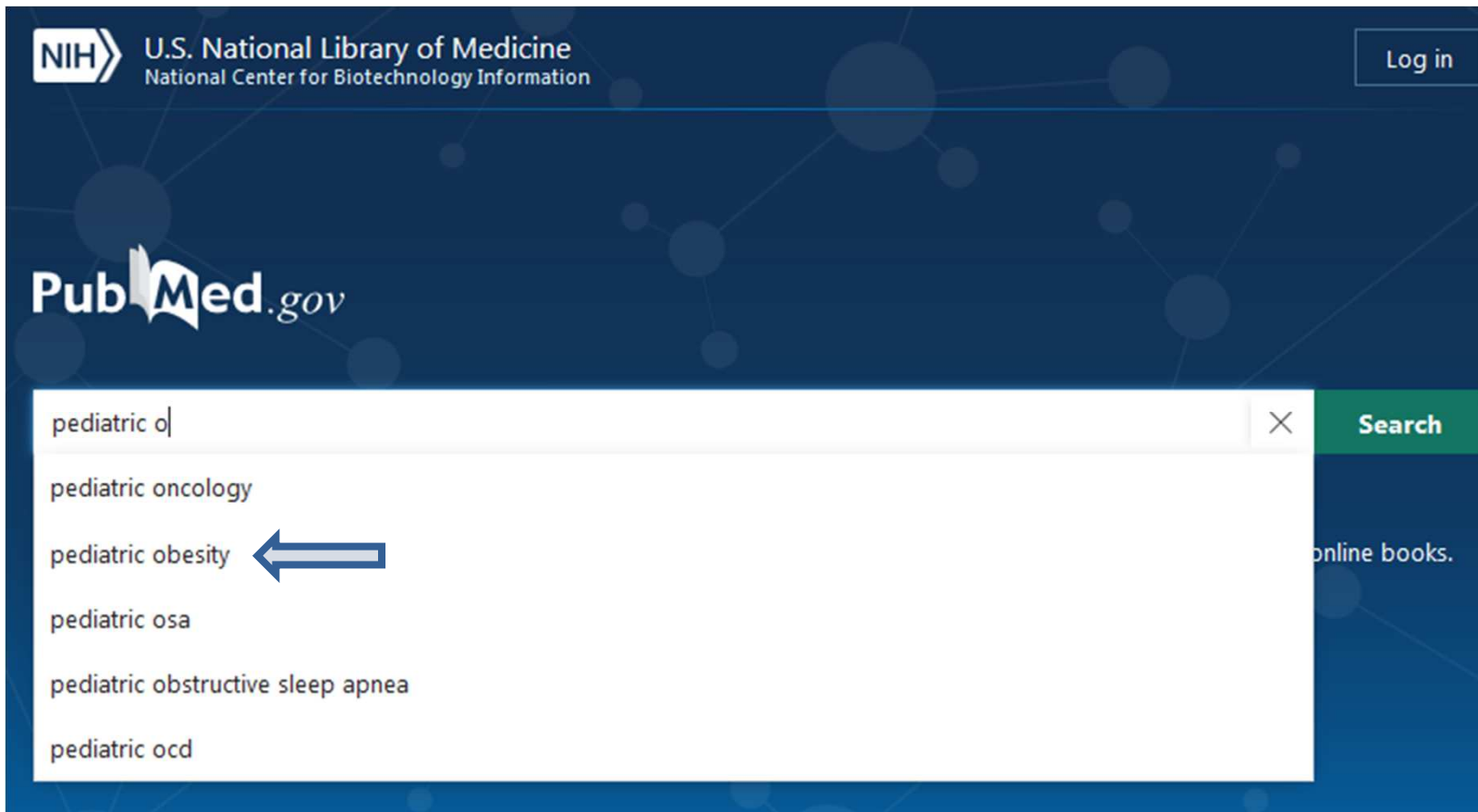
Substances

LinkOut - more resources



# Struttura del record bibliografico: riepilogo

- Ogni record è costituito, come abbiamo appena visto, da molti **campi** (autore, titolo articolo, fonte bibliografica, abstract, etc.)
- I **campi** che costituiscono il record sono contraddistinti da **etichette** (o **tag**) indispensabili per il recupero puntuale dell'informazione: **au; ti; so; pg; la; PMID** e molti altri
- Ai campi **FORMALI**, ricavati direttamente dalla citazione (au; ti; so; pg), vengono aggiunti campi ulteriori di tipo **SEMANTICO**, relativi cioè al contenuto informativo del documento: i **termini MESH (tag=MH)**

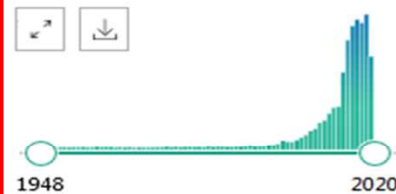


**Inseriamo uno o più termini che riteniamo pertinenti, in questo caso due: la ricerca viene effettuata «per frase»**

## FILTRI (o LIMITI)

18,743 results

### RESULTS BY YEAR



### TEXT AVAILABILITY

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

### ARTICLE ATTRIBUTE

- ☐ Associated data

### ARTICLE TYPE

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

### PUBLICATION DATE

- ☐ 1 year
- ☐ 5 years
- ☐ 10 years

Additional filters

- ☐ **Pediatric Obesity**-Assessment, Treatment, and Prevention: An Endocrine Society Clinical Practice Guideline.  
Styne DM, et al. *J Clin Endocrinol Metab* 2017. PMID 28359099 Free PMC article.  
The psychological toll of **pediatric obesity** on the individual and family necessitates screening for mental health issues and counseling as indicated. The prevention of **pediatric obesity** by promoting healthful diet, activity, and environment should be a primary goal, as achieving effective, long-lasting results with lifestyle modification once **obesity** occurs is difficult. ...  
Cite Share
- ☐ **Pediatric obesity**: Current concepts.  
Greydanus DE, et al. *Dis Mon* 2018 - Review. PMID 29329689  
In addition to emphasis on diet and exercise, research and clinical applications in the second decade of the 21(st) century emphasize the increasing use of pharmacotherapy and bariatric surgery for adolescent and adult populations with critical problems of overweight and **obesity**. We conclude with a discussion of future directions in **pediatric obesity** management....  
Cite Share
- ☐ **Pediatric Obesity**: Influence on Drug Dosing and Therapeutics.  
Ameer B and Weintraub MA. *J Clin Pharmacol* 2018 - Review. PMID 30248198  
**Obesity** afflicts 17% of U.S. children and adolescents. Severe **obesity** ( $\geq 120\%$  of the 95th percentile of body mass index (BMI) for age, or a BMI  $\geq 35$  kg/m<sup>2</sup>) is the fastest-growing subgroup and now approaches 6% of all U.S. youth. ...Classes of drugs commonly prescribed for comorbidities associated with **obesity** should be prioritized for clinical research evaluations aimed at optimizing dosing regimens in **pediatric obesity**....  
Cite Share
- ☐ Review of Childhood **Obesity**: From Epidemiology, Etiology, and Comorbidities to Clinical Assessment and Treatment.  
Kumar S and Kelly AS. *Mayo Clin Proc* 2017 - Review. PMID 28065514  
A staged approach to **pediatric** weight management is recommended with consideration of the age of the child, severity of **obesity**, and presence of **obesity**-related comorbidities in determining the initial stage of treatment. ...For this comprehensive review, the literature was scanned from 1994 to 2016 using PubMed using the following search terms: childhood **obesity**, **pediatric obesity**, childhood overweight, bariatric surgery, and adolescents....

# PubMed: i filtri (limits)

- I filtri permettono di restringere la ricerca sulla base di parametri quali: **data e tipo di pubblicazione**, **lingua**, **età**, **gruppo specifico** (studi sull'uomo o sull'animale), **settori particolari** (AIDS, tumori), **categorie di periodici** (area infermieristica, odontoiatrica).
- L'utilizzo dei filtri **Article Types** (con l'eccezione delle R.S.), **Species**, **Sex**, **Ages**, **Languages** porta la nostra ricerca su record indicizzati (facendoci quindi «perdere» i record bibliografici più recenti).
- I filtri vanno usati con consapevolezza, ricordando che **rimangono attivi per tutta la durata della sessione**. Se cambiamo ambito/strategia di ricerca, oppure iniziamo una nuova ricerca, dobbiamo valutare se i filtri applicati in precedenza sono ancora adeguati.





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

- ☐ Associated data

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

- ☒ 1 year
- ☐ 5 years
- ☐ 10 years



### Gut microbiota and **pediatric obesity**/non-alcoholic fatty liver disease.

1

Yang YJ and Ni YH. J Formos Med Assoc 2019 - Review. PMID 30509561 Free article.

However, there are no single species can be proven to play a key factor in **pediatric obesity** and NAFLD at present. Various probiotics may confer benefit to these gut microbiota-related **pediatric** diseases. ...This review article aimed to elucidate evidently the relationship between gut microbiota and **pediatric obesity**/NAFLD and to discuss the potential probiotics use in **pediatric obesity** and NAFLD....

“ Cite Share



### **Pediatric Obesity** Algorithm: A Practical Approach to **Obesity** Diagnosis and Management.

2

Cuda SE and Censani M. Front Pediatr 2018 - Review. PMID 30729102 Free PMC article.

The **Pediatric Obesity** Algorithm is an evidence based roadmap for the diagnosis and management of children with **obesity**. In this article, we summarize topics from the **Pediatric Obesity** Algorithm pertaining to **pediatric obesity** diagnosis, evaluation, and management including assessment, differential diagnosis, review of systems, diagnostic work up, physical exam, age specific management, comorbidities, use of medications and surgery, and medication associated weight gain. Identifying and treating children with **obesity** as early as possible is important, as is identifying comorbid conditions. Earlier and more comprehensive management through resources such as the **Pediatric Obesity** Algorithm serve to help guide health care practitioners with a practical and evidence based approach to the diagnosis and management of children with **obesity**, and provide families with the tools needed for a healthy future....

“ Cite Share



### Severe **Obesity** in the **Pediatric** Population: Current Concepts in Clinical Care.

3

Fox CK, et al. Curr Obes Rep 2019 - Review. PMID 31054014

PURPOSE OF REVIEW: This review describes (1) the clinical assessment of **pediatric** patients with severe **obesity**, including a summary of salient biological, psychological, and social factors that may be contributing to the patient's **obesity** and (2) the current state of treatment strategies for **pediatric** severe **obesity**, including lifestyle modification therapy, pharmacotherapy, and metabolic and bariatric surgery. ...Treatment of severe **pediatric obesity** requires a chronic care management approach utilizing multidisciplinary teams of health care providers and multi-pronged therapies....



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

- ☐ Associated data

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

- ☒ 1 year
- ☐ 5 years
- ☐ 10 years

Filters applied: Clinical Trial, in the last 1 year. Clear all

- 1 ☐ **A pediatric regimen for older adolescents and young adults with acute lymphoblastic leukemia: results of CALGB 10403.**  
Stock W, et al. Blood 2019 - Clinical Trial. PMID 30658992 Free PMC article.  
Retrospective studies have suggested that older adolescents and young adults (AYAs) with acute lymphoblastic leukemia (ALL) have better survival rates when treated using a **pediatric** ALL regimen administered by **pediatric** treatment teams. ...Pretreatment risk factors associated with worse treatment outcomes included **obesity** and presence of the Philadelphia-like gene expression signature. ...  
Cite Share
- 2 ☐ **Change in eating disorder symptoms following pediatric obesity treatment.**  
Eichen DM, et al. Int J Eat Disord 2019 - Clinical Trial. PMID 30638271 Free PMC article.  
OBJECTIVE: The purpose of this study is to evaluate whether children with overweight or **obesity** participating in an evidence-based treatment, family-based behavioral treatment (FBT) for **obesity**, or a parent-only variant of FBT (PBT), experience an increase of eating disorder (ED) symptoms during and following treatment. ...These findings should help assuage fears of parents that enrolling their child will exacerbate ED symptoms and aid children to access evidence-based treatments that may help reduce significant physical and psychosocial complications of childhood **obesity**....  
Cite Share
- 3 ☐ **Obesity measured as percent body fat, relationship with body mass index, and percentile curves for Mexican pediatric population.**  
Costa-Urrutia P, et al. PLoS One 2019 - Clinical Trial. PMID 30802270 Free PMC article.  
Overall **obesity** prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with **obesity** by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). ...Improving **obesity** diagnosis will allow greater efficiency when searching for comorbidities in clinical practice....  
Cite Share
- 4 ☐ **Imbalance in obesity and mental health among "little emperors" in China.**  
Peng Z, et al. PLoS One 2019 - Clinical Trial. PMID 30969962 Free PMC article.  
..., those living with no siblings) have higher odds of **obesity** during childhood and young adulthood compared with those living with siblings. CONCLUSIONS: Although being an only child

PubMed.gov pediatric obesity X Search

Advanced Create alert

Save Email ... Sorted by: Best match ⚙

Chiedo l'applicazione di filtri ulteriori (additional filters), rispetto a quelli che compaiono in automatico nella colonna di sx: sesso ed età

ARTICLE TYPE

SPECIES

LANGUAGE

SEX ←

SUBJECT

JOURNAL

AGE ←

☐ Address

☐ Autobiography

☐ Bibliography

☐ Biography

☐ Case Reports

☐ Classical Article

☐ Clinical Conference

☐ Clinical Study

☐ Clinical Trial Protocol

☐ Clinical Trial, Phase I

☐ Clinical Trial, Phase II

☐ Clinical Trial, Phase III

☐ Clinical Trial, Phase IV

☐ Introductory Journal Article

☐ Journal Article

☐ Lecture

☐ Legal Case

☐ Legislation

☐ Letter

☐ Multicenter Study

☐ News

☐ Newspaper Article

☐ Observational Study

☐ Observational Study, Veterinary

☐ Overall

☐ Patient Education Handout

Cancel

Show

ARTICLE TYPE

SPECIES

LANGUAGE

SEX

SUBJECT

JOURNAL

AGE

☐ Female

☒ Male

Cancel

Show



## RESULTS BY YEAR



## TEXT AVAILABILITY

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

## ARTICLE ATTRIBUTE

- ☐ Associated data

## ARTICLE TYPE

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

## PUBLICATION DATE

- ☒ 1 year
- ☐ 5 years
- ☐ 10 years

## SEX

- ☒ Male

Additional filters

Reset all filters

Filters applied: Clinical Trial, in the last 1 year, Male. [Clear all](#)

- ☐ **A pediatric regimen for older adolescents and young adults with acute lymphoblastic leukemia: results of CALGB 10403.**  
Stock W, et al. *Blood* 2019 - *Clinical Trial*. PMID 30658992 [Free PMC article](#).  
Retrospective studies have suggested that older adolescents and young adults (AYAs) with acute lymphoblastic leukemia (ALL) have better survival rates when treated using a **pediatric** ALL regimen administered by **pediatric** treatment teams. ...Pretreatment risk factors associated with worse treatment outcomes included **obesity** and presence of the Philadelphia-like gene expression signature. ...  
Cite Share
- ☐ **Change in eating disorder symptoms following **pediatric obesity** treatment.**  
Eichen DM, et al. *Int J Eat Disord* 2019 - *Clinical Trial*. PMID 30638271 [Free PMC article](#).  
OBJECTIVE: The purpose of this study is to evaluate whether children with overweight or **obesity** participating in an evidence-based treatment, family-based behavioral treatment (FBT) for **obesity**, or a parent-only variant of FBT (PBT), experience an increase of eating disorder (ED) symptoms during and following treatment. ...These findings should help assuage fears of parents that enrolling their child will exacerbate ED symptoms and aid children to access evidence-based treatments that may help reduce significant physical and psychosocial complications of childhood **obesity**....  
Cite Share
- ☐ ****Obesity** measured as percent body fat, relationship with body mass index, and percentile curves for Mexican **pediatric** population.**  
Costa-Urrutia P, et al. *PLoS One* 2019 - *Clinical Trial*. PMID 30802270 [Free PMC article](#).  
Overall **obesity** prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with **obesity** by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). ...Improving **obesity** diagnosis will allow greater efficiency when searching for comorbidities in clinical practice....  
Cite Share
- ☐ **Imbalance in **obesity** and mental health among "little emperors" in China.**  
Peng Z, et al. *PLoS One* 2019 - *Clinical Trial*. PMID 30969962 [Free PMC article](#).  
., those living with no siblings) have higher odds of **obesity** during childhood and young adulthood, compared with those living with siblings. ...CONCLUSIONS: Although being an only child was significantly associated with overweight and **obesity** among adolescents in China, participants with history of overweight/**obesity** are less likely to experience symptoms of depression associated with being an only child....  
Cite Share



Reset



1

A **pediatric** regimen for older adolescents and young adults with acute lymphoblastic leukemia: results of CALGB 10403.

Stock W, et al. Blood 2019 - Clinical Trial. PMID 30658992 Free PMC article.

Retrospective studies have suggested that older adolescents and young adults (AYAs) with acute

## ARTICLE TYPE

## SPECIES

## LANGUAGE

## SEX

## SUBJECT

## JOURNAL

## AGE

☐ Child: birth-18 years☐ Newborn: birth-1 month☐ Infant: birth-23 months☐ Infant: 1-23 months☒ Preschool Child: 2-5 years☐ Child: 6-12 years☐ Adolescent: 13-18 years☐ Adult: 19+ years☐ Young Adult: 19-24 years☐ Adult: 19-44 years☐ Middle Aged + Aged: 45+ years☐ Middle Aged: 45-64 years☐ Aged: 65+ years☐ 80 and over: 80+ years

Cancel

Show

## RESULTS BY YEAR



## TEXT AVAILABILITY

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

## ARTICLE ATTRIBUTE

- ☐ Associated data

## ARTICLE TYPE

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

## PUBLICATION DATE

- ☒ 1 year
- ☐ 5 years
- ☐ 10 years

## SEX

- ☒ Male

## AGE

- ☒ Preschool Child: 2-5 years

Additional filters

Filters applied: Clinical Trial, in the last 1 year, Male, Preschool Child: 2-5 years. [Clear all](#)

- ☐ **Obesity** measured as percent body fat, relationship with body mass index, and percentile curves for Mexican **pediatric** population.  
Costa-Urrutia P, et al. PLoS One 2019 - *Clinical Trial*. PMID 30802270 Free PMC article.  
Overall **obesity** prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with **obesity** by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). ...Improving **obesity** diagnosis will allow greater efficiency when searching for comorbidities in clinical practice....  
Cite Share
- ☐ The Healthy Homes/Healthy Kids 5-10 **Obesity** Prevention Trial: 12 and 24-month outcomes.  
Sherwood NE, et al. *Pediatr Obes* 2019 - *Clinical Trial*. PMID 30873752  
BACKGROUND: **Pediatric** primary care is an important setting for addressing **obesity** prevention. OBJECTIVE: The Healthy Homes/Healthy Kids 5-10 randomized controlled trial evaluated the efficacy of an **obesity** prevention intervention integrating **pediatric** primary care provider counseling and parent-targeted phone coaching. METHODS: Children aged 5 to 10 years with a BMI between the 70th and 95th percentile and their parents were recruited from **pediatric** primary care clinics. ...  
Cite Share
- ☐ Coaching and/or education intervention for parents with overweight/**obesity** and their children: study protocol of a single-centre randomized controlled trial.  
Karmali S, et al. BMC Public Health 2019 - *Clinical Trial*. PMID 30922282 Free PMC article.  
Overweight and **obesity** are risk factors for many chronic diseases in both adults and children and can result in lower quality and quantity of life. ...Thus, parent/child interventions are important for reducing **obesity** and promoting long-term healthy weights among members of the family unit. ...  
Cite Share
- ☐ A randomized controlled trial for overweight and **obesity** in preschoolers: the More and Less Europe study - an intervention within the STOP project.  
Ek A, et al. BMC Public Health 2019 - *Clinical Trial*. PMID 31307412 Free PMC article.  
BACKGROUND: Childhood overweight and **obesity** is a serious public health issue with an increase being observed in preschool-aged children. ...METHODS/DESIGN: A two-arm, parallel design randomized controlled trial in 300 2-to 6-year-old children with overweight and **obesity** from Romania, Spain and Sweden (n = 100 from each). ...  
Cite Share
- ☐ A Parent Treatment Program for Preschoolers With **Obesity**: A Randomized Controlled Trial.



Collegamento al full text dell'articolo, oppure al modulo elettronico di richiesta di articolo in copia

Clinical Trial

> PLoS One, 14 (2), e0212792 2019 Feb 25 eCollection 2019

# Obesity Measured as Percent Body Fat, Relationship With Body Mass Index, and Percentile Curves for Mexican Pediatric Population

Paula Costa-Urrutia<sup>1</sup>, Alejandra Vizuet-Gómez<sup>2</sup>, Miryam Ramirez-Alcántara<sup>3</sup>, Miguel Ángel Guillen-González<sup>1</sup>, Oscar Medina-Contreras<sup>1,4</sup>, Mariana Valdes-Moreno<sup>1</sup>, Claudette Musalem-Younes<sup>1</sup>, Jaqueline Solares-Tlapechco<sup>1</sup>, Julio Granados<sup>5</sup>, Valentina Franco-Trecu<sup>6</sup>, M Eunice Rodriguez-Arellano<sup>1</sup>

Affiliations + expand

PMID: 30802270 PMCID: PMC6388924 DOI: 10.1371/journal.pone.0212792

## Abstract

In Mexico, the increase in childhood obesity is alarming. Thus, improving the precision of its diagnosis is expected to impact on disease prevention. We estimated obesity prevalence by bioimpedance-based percent body fat (%BF) and body mass index (BMI) in 1061 girls and 1121 boys, from 3 to 17 years old. Multiple regressions and area under receiver operating curves (AUC) were used to determine the predictive value of BMI on %BF and percentile curves were constructed. Overall obesity prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with obesity by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). The fat mass excess is further underestimated in boys than in girls when using the standard BMI classification. The relationship between %BF and BMI was strong in school children and adolescents (all cases  $R^2 > 0.70$ ), but not in preschool children (girls  $R^2 = 0.57$ , boys  $R^2 = 0.23$ ). AUCs showed greater discriminative power of BMI to detect %BF obesity in school children and adolescents (all cases  $AUC \geq 0.90$ ) than in preschool children (girls  $AUC = 0.86$ ; boys  $AUC = 0.70$ ). Growth percentile charts showed that girls aged 9-17 years and boys aged 8-17 years presented fat excess from the 50th percentile and above. We suggested to change the BMI cut-off for them, considering values at the 75th percentile as overweight, and values at the 85th percentile as obesity, as previously recommended for Mexican children. Improving obesity diagnosis will allow greater efficiency when searching for comorbidities in clinical practice.

## FULL TEXT LINKS



## ACTIONS

Cite

Favorites

## SHARE



## PAGE NAVIGATION

< Title & authors

Abstract

Conflict of interest statement

Figures

Similar articles

Cited by



# Obesity measured as percent body fat, relationship with body mass index, and percentile curves for Mexican pediatric population

Paula Costa-Urrutia, Alejandra Vizuet-Gómez, Miryam Ramirez-Alcántara, Miguel Ángel Guillen-González, Oscar Medina-Contreras, Mariana Valdes-Moreno, Claudette Musalem-Younes, Jaqueline Solares-Tlapechco, Julio Gran, Valentina Franco-Trecu, M. Eunice Rodriguez-Arellano

Published: February 25, 2019 • <https://doi.org/10.1371/journal.pone.0212792>

0 Save	2 Citation
1,905 View	0 Share

Article	Authors	Metrics	Comments	Media Coverage
---------	---------	---------	----------	----------------

Download PDF

Print

Share

## Abstract

- Introduction
- Materials and methods
- Results
- Discussion
- Supporting information
- Acknowledgments
- References

- Reader Comments (0)
- Media Coverage (0)
- Figures

## Abstract

In Mexico, the increase in childhood obesity is alarming. Thus, improving the precision of its diagnosis is expected to impact on disease prevention. We estimated obesity prevalence by bioimpedance-based percent body fat (%BF) and body mass index (BMI) in 1061 girls and 1121 boys, from 3 to 17 years old. Multiple regressions and area under receiver operating curves (AUC) were used to determine the predictive value of BMI on %BF and percentile curves were constructed. Overall obesity prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with obesity by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). The fat mass excess is further underestimated in boys than in girls when using the standard BMI classification. The relationship between %BF and BMI was strong in school children and adolescents (all cases  $R^2 > 0.70$ ), but not in preschool children (girls  $R^2 = 0.57$ , boys  $R^2 = 0.23$ ). AUCs showed greater discriminative power of BMI to detect %BF obesity in school children and adolescents (all cases  $AUC \geq 0.90$ ) than in preschool children (girls  $AUC = 0.86$ ; boys  $AUC = 0.70$ ). Growth percentile charts showed that girls aged 9–17 years and boys aged 8–17 years presented fat excess from the 50<sup>th</sup> percentile and above. We suggested to change the BMI cut-off for them, considering values at the 75<sup>th</sup> percentile as overweight, and values at the 85<sup>th</sup> percentile as obesity, as previously recommended for Mexican children. Improving obesity diagnosis will allow greater efficiency when searching for comorbidities in clinical practice.

Check for updates

ADVERTISEMENT



Crops, Food Security & Food Systems Channel

Topical research & commentary

Publisher agnostic

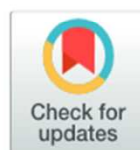
Curated by experts



## RESEARCH ARTICLE

# Obesity measured as percent body fat, relationship with body mass index, and percentile curves for Mexican pediatric population

Paula Costa-Urrutia<sup>1</sup>, Alejandra Vizuet-Gómez<sup>2</sup>, Miryam Ramirez-Alcántara<sup>3</sup>, Miguel Ángel Guillen-González<sup>1</sup>, Oscar Medina-Contreras<sup>1,4</sup>, Mariana Valdes-Moreno<sup>1</sup>, Claudette Musalem-Younes<sup>1</sup>, Jaqueline Solares-Tlapechco<sup>1</sup>, Julio Granados<sup>5</sup>, Valentina Franco-Trecu<sup>6</sup>, M. Eunice Rodriguez-Arellano<sup>1\*</sup>



**1** Laboratorio de Medicina Genómica del Hospital Regional Lic, Adolfo López Mateos, ISSSTE, Mexico City, Mexico, **2** Coordinación de Pediatría Hospital Regional Lic, Adolfo López Mateos, ISSSTE, Mexico City, Mexico, **3** Laboratorio de Investigación Clínica Hospital Regional Lic, Adolfo López Mateos, ISSSTE, Mexico City, Mexico, **4** Laboratorio de Inmunología y Proteómica, Hospital Infantil de México Federico Gómez, Mexico City, Mexico, **5** División de Inmunogenética, Departamento de Trasplantes, Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán, Mexico City, Mexico, **6** Departamento de Ecología y Evolución, Facultad de Ciencias, Universidad de la República, Montevideo, Uruguay

\* [marthaeunice@yahoo.com.mx](mailto:marthaeunice@yahoo.com.mx)

## OPEN ACCESS

**Citation:** Costa-Urrutia P, Vizuet-Gómez A, Ramirez-Alcántara M, Guillen-González M, Medina-Contreras O, Valdes-Moreno M, et al. (2019) Obesity measured as percent body fat, relationship with body mass index, and percentile curves for Mexican pediatric population. PLoS ONE 14(2): e0212792. <https://doi.org/10.1371/journal.pone.0212792>

**Editor:** Massimiliano Ruscica, Università degli Studi di Milano, ITALY

**Received:** October 26, 2018

**Accepted:** February 8, 2019

## Abstract

In Mexico, the increase in childhood obesity is alarming. Thus, improving the precision of its diagnosis is expected to impact on disease prevention. We estimated obesity prevalence by bioimpedance-based percent body fat (%BF) and body mass index (BMI) in 1061 girls and 1121 boys, from 3 to 17 years old. Multiple regressions and area under receiver operating curves (AUC) were used to determine the predictive value of BMI on %BF and percentile curves were constructed. Overall obesity prevalence estimated by %BF was 43.7%, and by BMI it was 20.1%; it means that the diagnosis by BMI underestimated around 50% of children diagnosed with obesity by %BF ( $\geq 30\%$  for girls,  $\geq 25\%$  for boys). The fat mass excess

Collegamento al full text dell'articolo, utilizzando il link fornito dall'editore

Search results

Save

Email

...

Randomized Controlled Trial

> Am J Clin Nutr, 109 (5), 1361-1372 2019 May 1

# Portion Size Has Sustained Effects Over 5 Days in Preschool Children: A Randomized Trial

Alissa D Smethers<sup>1</sup>, Liane S Roe<sup>1</sup>, Christine E Sanchez<sup>1</sup>, Faris M Zuraikat<sup>1</sup>, Kathleen L Keller<sup>1 2</sup>, Samantha M R Kling<sup>1</sup>, Barbara J Rolls<sup>1</sup>

Affiliations + expand

PMID: 30976782 PMCID: PMC6499504 (available on 2020-05-01) DOI: 10.1093/ajcn/nqy383

## Abstract

**Background:** Although short-term studies have found that serving larger portions of food increases intake in preschool children, it is unknown whether this portion size effect persists over a longer period or whether energy intake is moderated through self-regulation.

**Objectives:** We tested whether the portion size effect is sustained in preschool children across 5 consecutive days, a period thought to be sufficient for regulatory systems to respond to the overconsumption of energy.

**Methods:** With the use of a crossover design, over 2 periods we served the same 5 daily menus to 46 children aged 3-5 y in their childcare centers. In 1 period, all foods and milk were served in baseline portions, and in the other period, all portions were increased by 50%. The served items were weighed to determine intake.

**Results:** Increasing the portion size of all foods and milk by 50% increased daily consumption: weighed intake increased by a mean  $\pm$  SEM of  $143 \pm 21$  g/d (16%) and energy intake increased by  $167 \pm 22$  kcal/d (18%; both  $P < 0.0001$ ). The trajectories of intake by weight and energy across the 5-day period were linear and the slopes did not differ between portion conditions (both  $P > 0.13$ ), indicating that there were sustained increases in intake from larger portions without compensatory changes over time. Children differed in their response to increased portions: those with higher weight status, lower ratings for satiety responsiveness, or higher ratings for food responsiveness had greater increases in intake from larger portions (all  $P < 0.03$ ).

FULL TEXT LINKS

OXFORD  
ACADEMIC

Full Text Finder

ACTIONS

Cite

Favorites

SHARE



PAGE NAVIGATION

< Title & authors

Abstract

Similar articles

Cited by

Publication types

MeSH terms

Associated data





Volume 109, Issue 5  
May 2019

< Previous Next >

1

## Portion size has sustained effects over 5 days in preschool children: a randomized trial

Alissa D Smethers, Liane S Roe, Christine E Sanchez, Faris M Zuraikat, Kathleen L Keller, Samantha M R Kling, Barbara J Rolls ✉

*The American Journal of Clinical Nutrition*, Volume 109, Issue 5, May 2019, Pages 1361–1372, <https://doi.org/10.1093/ajcn/nqy383>

Published: 12 April 2019 Article history ▼

“ Cite Permissions Share ▼

### ABSTRACT

#### Background

Although short-term studies have found that serving larger portions of food increases intake in preschool children, it is unknown whether this portion size effect persists over a longer period or whether energy intake is moderated through self-regulation.

#### Objectives

We tested whether the portion size effect is sustained in preschool children across 5 consecutive days, a period thought to be sufficient for regulatory systems to respond to the overconsumption of energy.

#### Methods

With the use of a crossover design, over 2 periods we served the same 5 daily menus to 46 children aged 3–5 y in their childcare centers. In 1 period, all foods and milk were served in baseline portions, and in the other period, all portions were increased by 50%. The served items were weighed to determine intake.

#### Results

Increasing the portion size of all foods and milk by 50% increased daily consumption: weighed intake increased by a mean  $\pm$  SEM of  $143 \pm 21$  g/d (16%)

The most **OUTSTANDING** journals in the field of nutrition!



VIEW the video to learn more

PLAY NOW



### Email alerts

Article activity alert  
Advance article alerts  
New issue alert

Receive exclusive offers and updates  
from Oxford Academic

### More on this topic

Sex differences in the human brain's response to hunger and satiation

Nature and nurture in infant appetite: analysis of the Gemini twin birth cohort



Volume 109, Issue 5  
May 2019

< Previous   Next >

2

## Results

Increasing the portion size of all foods and milk by 50% increased daily consumption: weighed intake increased by a mean  $\pm$  SEM of  $143 \pm 21$  g/d (16%) and energy intake increased by  $167 \pm 22$  kcal/d (18%; both  $P < 0.0001$ ). The trajectories of intake by weight and energy across the 5-day period were linear and the slopes did not differ between portion conditions (both  $P > 0.13$ ), indicating that there were sustained increases in intake from larger portions without compensatory changes over time. Children differed in their response to increased portions: those with higher weight status, lower ratings for satiety responsiveness, or higher ratings for food responsiveness had greater increases in intake from larger portions (all  $P < 0.03$ ).

## Conclusions

This demonstration that preschool children failed to adjust their intake during prolonged exposure to larger portions challenges the suggestion that their self-regulatory behavior is sufficient to counter perturbations in energy intake. Furthermore, overconsumption from large portions may play a role in the development of overweight and obesity, as the magnitude of the effect was greater in children of higher weight status. This trial was registered at [www.clinicaltrials.gov](http://www.clinicaltrials.gov) as NCT02963987.

**Keywords:** portion size, eating behavior, preschool children, energy intake, obesity

**Topic:** obesity, calories, child, child day care centers, preschool child, energy intake, feeding behaviors, food, milk, satiation

**Issue Section:** Growth, development, and pediatrics

Copyright © American Society for Nutrition 2019.

This article is published and distributed under the terms of the Oxford University Press, Standard Journals Publication Model ([https://academic.oup.com/journals/pages/open\\_access/funder\\_policies/chorus/standard\\_publication\\_model](https://academic.oup.com/journals/pages/open_access/funder_policies/chorus/standard_publication_model))

You do not currently have access to this article.

Sex differences in the human brain's response to hunger and satiation

Nature and nurture in infant appetite: analysis of the Gemini twin birth cohort

Chews and swallows and the microstructure of eating

Potential regulators of feeding behavior In anorexia nervosa

## Related articles in

Web of Science

Google Scholar

## Related articles in PubMed

Modification of the effects of prenatal manganese exposure on child neurodevelopment by maternal anemia and iron deficiency.

Permanency and well-being outcomes for maltreated infants: Pilot results from an infant-toddler court team.

The relationship between adverse childhood experiences and self-sufficiency problems in early adulthood among violent offenders.

Decreased placental folate transporter expression and activity in first and second trimester in obese mothers.

## Citing articles via

Web of Science (1)

Crossref

Come ottengo allora il full text?

PubMed.gov

pediatric obesity

Search

Advanced

Search results

1 Full text dell'articolo non disponibile sul sito editore: devo utilizzare il link a Full Text Finder

Randomized Controlled Trial > Am J Clin Nutr, 109 (5), 1361-1372 2019 May 1

## Portion Size Has Sustained Effects Over 5 Days in Preschool Children: A Randomized Trial

Alissa D Smethers<sup>1</sup>, Liane S Roe<sup>1</sup>, Christine E Sanchez<sup>1</sup>, Faris M Zuraikat<sup>1</sup>, Kathleen L Keller<sup>1 2</sup>, Samantha M R Kling<sup>1</sup>, Barbara J Rolls<sup>1</sup>

Affiliations + expand

PMID: 30976782 PMCID: PMC6499504 (available on 2020-05-01) DOI: 10.1093/ajcn/nqy383

FULL TEXT LINKS

OXFORD ACADEMIC

Full Text Finder

ACTIONS

Cite

Favorites

Full Text Finder Risultati Rivedi la richiesta Help Exit

UNIBS.it

### Portion size has sustained effects over 5 days in preschool children: a randomized trial.

Smethers. *The American journal of clinical nutrition* Volume: 109 Issue 5 (2019) ISSN: 0002-9165 Online ISSN: 1938-3207

Sistema Bibliotecario di Ateneo

Full Text Finder Risultati

Risorse disponibili per questa citazione

Richiedi una copia alla biblioteca

2

Schermata di <UniBS Discovery> che collega la citazione:

- al full text eventualmente disponibile presso un fornitore (diverso dall'editore), oppure
- al catalogo, e quindi alla versione cartacea dell'articolo, oppure
- al modulo elettronico di richiesta fotocopie





Il servizio è riservato agli utenti istituzionali dell'Università degli Studi di Brescia (fino ad un massimo di 5 richieste per settimana).

Docenti, ricercatori, dottorandi e assegnisti che desiderino ricevere gli articoli presso le loro strutture sono invitati a compilare il campo relativo all'indirizzo di consegna.

Maggiori informazioni sul servizio sono disponibili alla pagina <https://www.unibs.it/node/14065>

#### Scegli a quale biblioteca inviare la richiesta

	Seleziona la biblioteca:	*
Cognome e Nome		*
Indirizzo email	unibs.it; studenti.unibs.it	*
Matricola		*
Qualifica		
Dipartimento/Sezione		
Indirizzo di consegna		
Note		
Disponibile a eventuale rimborso spese	<input checked="" type="radio"/> Sì <input type="radio"/> No	

Dati anagrafici dell'utente

Invia richiesta

#### Dati della pubblicazione richiesta

Genere	article
Titolo	Portion size has sustained effects over 5 days in presch
Titolo della rivista	The American journal of clinical nutrition
Autore	Smethers AD;Roe LS;Sanchez CE;Zuraikat FM;Keller I
Editore	
Anno di pubblicazione	2019
Volume	109
Numero	5
Pagina iniziale	1361
DOI	10.1093/ajcn/nqy383
ISSN	0002-9165
ISBN	
PubMed ID	30976782
SID	Entrez:PubMed

Citazione importata da  
Pubmed nel modulo  
elettronico di richiesta

Invia richiesta

# PubMed: la ricerca con MESH <sup>(1)</sup>





## The MeSH Tree Structure

MeSH vocabulary is organized by 16 main branches:

1. Anatomy
2. Organisms
3. Diseases
4. Chemicals and Drugs
5. Analytical, Diagnostic and Therapeutic Techniques and Equipment
6. Psychiatry and Psychology
7. Phenomena and Processes
8. Disciplines and Occupations
9. Anthropology, Education, Sociology and Social Phenomena
10. Technology, Industry, Agriculture
11. Humanities
12. Information Science
13. Named Groups
14. Health Care
15. Publication Characteristics
16. Geographicals

**Anatomy [A]**

Body Regions [A01]

Musculoskeletal System [A02]

Digestive System [A03]

Respiratory System [A04]

Urogenital System [A05]

Endocrine System [A06]

Cardiovascular System [A07]

Nervous System [A08]

Sense Organs [A09]

Tissues [A10]

Cells [A11]

Fluids and Secretions [A12]

Animal Structures [A13]

Stomatognathic System [A14]

Hemic and Immune Systems [A15]

Embryonic Structures [A16]

Integumentary System [A17]

Plant Structures [A18]

Fungal Structures [A19]

Bacterial Structures [A20]

Viral Structures [A21]

**Organisms [B]** **Diseases [C]** **Chemicals and Drugs [D]** **Analytical, Diagnostic and Therapeutic Techniques, and Equipment [E]** **Psychiatry and Psychology [F]** **Phenomena and Processes [G]** **Disciplines and Occupations [H]** **Anthropology, Education, Sociology, and Social Phenomena [I]** **Technology, Industry, and Agriculture [J]** **Humanities [K]** **Information Science [L]**

Suddivisioni ulteriori a  
rappresentare concetti  
via via più specifici

[Search](#)[Tree View](#)[MeSH on Demand](#) **NEW**[MeSH 2019](#)[MeSH Suggestions](#)[About MeSH Browser](#)[Contact Us](#)

Anatomy [A]

Body Regions [A01]

Musculoskeletal System [A02]

Digestive System [A03]

Respiratory System [A04]

Larynx [A04.329]

Lung [A04.411]

Bronchi [A04.411.125]

Pulmonary Alveoli [A04.411.715]

Blood-Air Barrier [A04.411.715.025]

Alveolar Epithelial Cells [A04.411.715.512]

Nose [A04.531]

Pharynx [A04.623]

Pleura [A04.716]

Respiratory Mucosa [A04.760]

Trachea [A04.889]

Urogenital System [A05]

Endocrine System [A06]

Cardiovascular System [A07]

Nervous System [A08]

Sense Organs [A09]

Tissues [A10]

Cells [A11]

Fluids and Secretions [A12]

Animal Structures [A13]

Stomatognathic System [A14]

Hemic and Immune Systems [A15]

Embryonic Structures [A16]

Integumentary System [A17]

Plant Structures [A18]

Fungal Structures [A19]

Bacterial Structures [A20]

Viral Structures [A21]

Organisms [B]

Diseases [C]

Chemicals and Drugs [D]

Dal generale...

... al particolare



# PubMed: la ricerca con MESH (2)

- Una ricerca più puntuale è quella che viene effettuata utilizzando il **thesaurus MESH (Medical Subject Headings)**.
- **Il thesaurus è lo strumento con cui le banche dati affrontano la variabilità del linguaggio di interrogazione.**
- Si tratta di un dizionario di voci controllate, inserite e aggiornate costantemente da esperti. Queste voci vengono attribuite ai documenti attuando quel processo che va sotto il nome di **indicizzazione** e che ha lo scopo di descrivere il **contenuto informativo** dei documenti stessi.

# PubMed: la ricerca con MESH (3)

- **INDICIZZAZIONE** nell'ambito della catalogazione: l'analisi concettuale di un documento e la successiva enunciazione dei soggetti che lo compongono
- **INDICIZZAZIONE** nell'ambito dei motori di ricerca e delle banche dati: l'analisi e l'organizzazione di informazioni, per permettere agli utenti di trovare facilmente i contenuti desiderati (non solo soggetti)

# PubMed : la ricerca con MESH (4)

- Il thesaurus MESH è composto da **descrittori** (main headings), **sottodescrittori** (subheadings) e **voci supplementari** (supplementary concept records).
- Risulta molto prezioso nei casi di: **omonimie** (aids); **sinonimie** (cancer / neoplasm); **varianti linguistiche** (tumor / tumour); **singolari e plurali**.
- Il dizionario controllato rappresenta il **punto d'incontro tra l'indicizzatore** (esperto della materia) e **l'utente** (più o meno esperto) che interroga la banca dati.

# PubMed : la ricerca con MESH (5)

- Il thesaurus MESH ha una **struttura gerarchica ad albero**, e questo consente di effettuare ricerche a vari livelli di **specificità**.
- Le voci al suo interno sono collegate tra loro da **relazioni di tipo semantico** che possono essere di **equivalenza, gerarchiche, di affinità**.
- Questa struttura ad albero ci guida verso possibili voci non considerate in fase iniziale della ricerca.

# PubMed: la ricerca con MESH (6)

- La ricerca con MESH ha un grosso **svantaggio**: non viene effettuata sui record relativi a pubblicazioni recentissime (PreMedline e Publisher supplied), che **non sono ancora state indicizzate**.
- Di conseguenza, se sono alla ricerca di documenti recentissimi, dovrò **assolutamente** ricordarmi di questo limite ed effettuare una ricerca per **parole libere** che suppongo compaiano nel **titolo dell'articolo o nell'abstract**.



[Display Settings:](#) ☒ Full[Send to:](#) ☐

## Face

The anterior portion of the head that includes the skin, muscles, and structures of the forehead, eyes, nose, mouth, cheeks, and jaw.

PubMed search builder options

[Subheadings:](#)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> abnormalities         | <input type="checkbox"/> growth and development     | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> adverse effects       | <input type="checkbox"/> immunology                 | <input type="checkbox"/> poisoning                     |
| <input type="checkbox"/> analysis              | <input type="checkbox"/> injuries                   | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> anatomy and histology | <input type="checkbox"/> innervation                | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> blood supply          | <input type="checkbox"/> instrumentation            | <input type="checkbox"/> radiography                   |
| <input type="checkbox"/> chemistry             | <input type="checkbox"/> isolation and purification | <input type="checkbox"/> radionuclide imaging          |
| <input type="checkbox"/> classification        | <input type="checkbox"/> metabolism                 | <input type="checkbox"/> secretion                     |
| <input type="checkbox"/> cytology              | <input type="checkbox"/> microbiology               | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> diagnosis             | <input type="checkbox"/> nursing                    | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> drug effects          | <input type="checkbox"/> parasitology               | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> embryology            | <input type="checkbox"/> pathogenicity              | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> enzymology            | <input type="checkbox"/> pathology                  | <input type="checkbox"/> transplantation               |
| <input type="checkbox"/> epidemiology          | <input type="checkbox"/> pharmacokinetics           | <input type="checkbox"/> ultrasonography               |
| <input type="checkbox"/> ethnology             | <input type="checkbox"/> pharmacology               | <input type="checkbox"/> ultrastructure                |
| <input type="checkbox"/> etiology              | <input type="checkbox"/> physiology                 | <input type="checkbox"/> virology                      |

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): A01.456.505

Entry Terms:

### • Faces

[All MeSH Categories](#)

[Anatomy Category](#)

[Body Regions](#)

[Head](#)

**Face**

[Cheek](#)

[Chin](#)

[Eye](#)

[Eyebrows](#)

[Eyelids +](#)

dal generale  
(broader terms)

allo specifico  
(narrower terms)

## PubMed Search Builder

Add to search builder AND ☐

Search PubMed

[YouTube](#) [Tutorial](#)

## Related information

[PubMed](#)

[PubMed - Major Topic](#)

[Clinical Queries](#)

[NLM MeSH Browser](#)

## Recent Activity

[Turn Off](#) [Clear](#)

[Face](#)

MeSH

[face \(30\)](#)

MeSH

[Chin](#)

MeSH

[chin \(5\)](#)

MeSH

[Neuropeptides and skin aging.](#)

PubMed

[See more...](#)

Summary ▾ 20 per page ▾

Send to: ▾

## Search results

Items: 1 to 20 of 32

&lt;&lt; First &lt; Prev Page 1 of 2 Next &gt; Last &gt;&gt;

☐ [Obesity](#)

1. A status with BODY WEIGHT that is grossly above the acceptable or desirable weight, usually due to accumulation of excess FATS in the body. The standards may vary with age, sex, genetic or cultural background. In the BODY MASS INDEX, a BMI greater than 30.0 kg/m<sup>2</sup> is considered obese, and a BMI greater than 40.0 kg/m<sup>2</sup> is considered morbidly obese (MORBID **OBESITY**).

☐ [Pediatric Obesity](#)

2. BODY MASS INDEX in children (ages 2-12) and in adolescents (ages 13-18) that is grossly above the recommended cut-off for a specific age and sex. For infants less than 2 years of age, **obesity** is determined based on standard weight-for-length percentile measures.

Year introduced: 2014

☐ [Obesity, Abdominal](#)

3. A condition of having excess fat in the abdomen. Abdominal **obesity** is typically defined as waist circumferences of 40 inches or more in men and 35 inches or more in women. Abdominal **obesity** raises the risk of developing disorders, such as diabetes, hypertension and METABOLIC SYNDROME.

Year introduced: 2010

☐ [Anti-Obesity Agents](#)

4. Agents that increase energy expenditure and weight loss by neural and chemical regulation. Beta-adrenergic agents and serotonergic drugs have been experimentally used in patients with non-insulin dependent diabetes mellitus (NIDDM) to treat **obesity**.

Year introduced: 1997

☐ [Obesity Hypoventilation Syndrome](#)

5. HYPOVENTILATION syndrome in very obese persons with excessive ADIPOSE TISSUE around the ABDOMEN and DIAPHRAGM. It is characterized by diminished to absent ventilatory chemoresponsiveness; chronic HYPOXIA; HYPERCAPNIA; POLYCYTHEMIA; and long periods of sleep during day and night (HYPERMORPHOLOGY). It is a condition often related to OBSTRUCTIVE SLEEP APNEA but can occur separately.

Year introduced: 2006 (1970)

☐ [Obesity, Morbid](#)

6. The condition of weighing two, three, or more times the ideal weight, so called because it is associated with many serious and life-threatening disorders. In the BODY MASS INDEX, morbid **obesity** is defined as having a BMI greater than 40.0 kg/m<sup>2</sup>.

Year introduced: 1987

## PubMed Search Builder

Add to search builder

AND ▾

Search PubMed

[YouTube](#) [Tutorial](#)

## Find related data

Database: [Select](#) ▾

Find items

## Search details

`"obesity"[MeSH Terms] OR  
obesity[Text Word]`

Search

[See more...](#)

## Recent Activity

[Turn Off](#) [Clear](#) Pediatric Obesity

MeSH

 obesity (32)

MeSH

 Pulmonary Disease, Chronic Obstructive

MeSH

 copd (2)

MeSH

Full ▾

Send to: ▾

## Pediatric Obesity

BODY MASS INDEX in children (ages 2-12) and in adolescents (ages 13-18) that is grossly above the recommended cut-off for a specific age and sex. For infants less than 2 years of age, obesity is determined based on standard weight-for-length percentile measures.

Year introduced: 2014

PubMed search builder options

[Subheadings:](#)

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

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C18.654.726.500.720, C23.888.144.699.500.750, E01.370.600.115.100.160.120.699.500.750, G07.100.100.160.120.699.500.750

MeSH Unique ID: D063766

Entry Terms:

- Obesity, Pediatric
- Childhood Obesity
- Obesity, Childhood
- Childhood Onset Obesity
- Obesity, Childhood Onset
- Child Obesity
- Obesity, Child
- Childhood Overweight

[s://www.ncbi.nlm.nih.gov/mesh](https://www.ncbi.nlm.nih.gov/mesh)

### PubMed Search Builder

Add to search builder AND ▾

Search PubMed

[YouTube](#) [Tutorial](#)

### Related information

[PubMed](#)

[PubMed - Major Topic](#)

[Clinical Queries](#)

[NLM MeSH Browser](#)

[dbGaP Links](#)

[MedGen](#)

### Recent Activity

[Turn Off](#) [Clear](#)

- Pediatric Obesity MeSH
- obesity (32) MeSH
- Pulmonary Disease, Chronic Obstructive MeSH
- copd (2) MeSH
- Emphysema MeSH

[See more...](#)

Previous Indexing:

- [Obesity \(1963-2013\)](#)



[All MeSH Categories](#)

[Diseases Category](#)

[Nutritional and Metabolic Diseases](#)

[Nutrition Disorders](#)

[Overnutrition](#)

[Obesity](#)

**Pediatric Obesity**

[All MeSH Categories](#)

[Diseases Category](#)

[Pathological Conditions, Signs and Symptoms](#)

[Signs and Symptoms](#)

[Body Weight](#)

[Overweight](#)

[Obesity](#)

**Pediatric Obesity**

[All MeSH Categories](#)

[Analytical, Diagnostic and Therapeutic Techniques and Equipment Category](#)

[Diagnosis](#)

[Diagnostic Techniques and Procedures](#)

[Physical Examination](#)

[Body Constitution](#)

[Body Weights and Measures](#)

[Body Size](#)

[Body Weight](#)

[Overweight](#)

[Obesity](#)

**Pediatric Obesity**

[All MeSH Categories](#)

[Phenomena and Processes Category](#)

[Physiological Phenomena](#)

[Body Constitution](#)

[Body Weights and Measures](#)

[Body Size](#)

[Body Weight](#)

[Overweight](#)

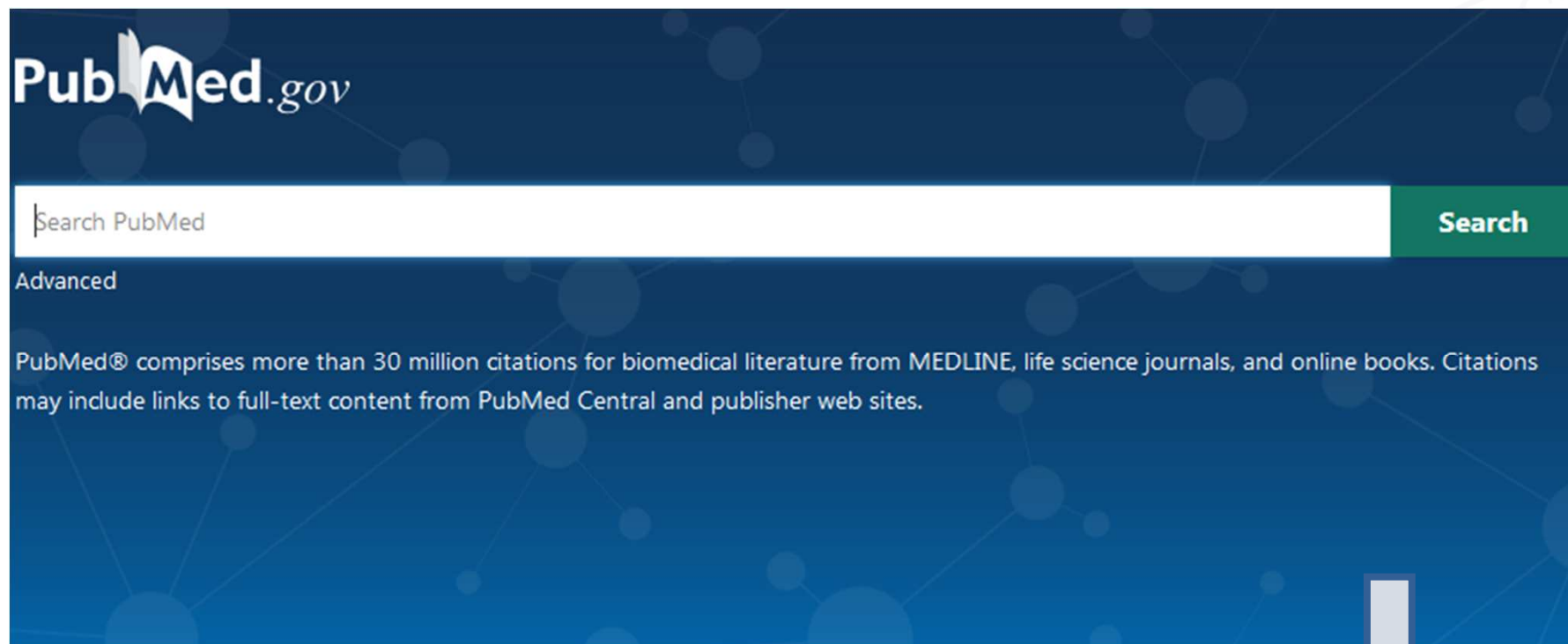
[Obesity](#)

**Pediatric Obesity**

Struttura gerarchica ad albero, con la voce prescelta che compare come termine finale (più specifico) «in cima» a ramificazioni diverse



# PubMed: la maschera di ricerca MESH (1)



## Learn

About PubMed  
FAQs & User Guide  
Finding Full Text



## Find

Advanced Search  
Clinical Queries  
Single Citation Matcher



## Download

E-utilit  
FTP  
Batch Citation Matcher



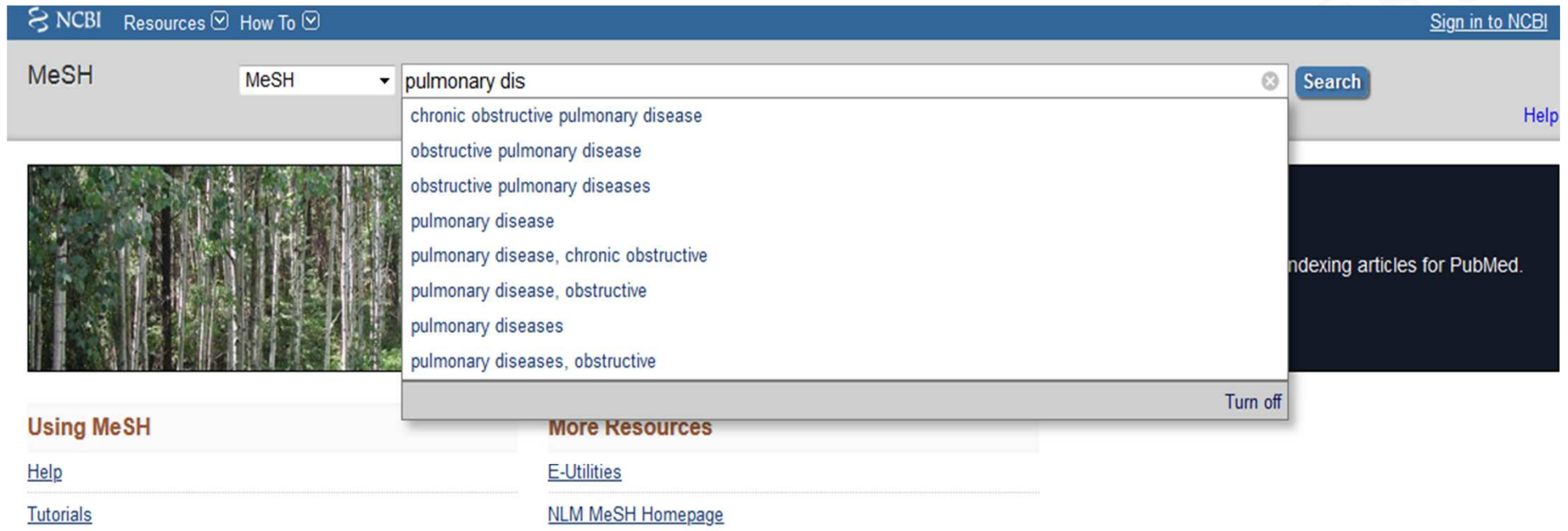
## Explore

MeSH Database  
Journals





# PubMed: la maschera di ricerca MESH (2)



The screenshot displays the PubMed MeSH search interface. At the top, the NCBI logo and navigation links 'Resources' and 'How To' are visible. The 'MeSH' search bar is active, showing a dropdown menu with suggestions for 'pulmonary dis'. The suggestions include: 'chronic obstructive pulmonary disease', 'obstructive pulmonary disease', 'obstructive pulmonary diseases', 'pulmonary disease', 'pulmonary disease, chronic obstructive', 'pulmonary disease, obstructive', 'pulmonary diseases', and 'pulmonary diseases, obstructive'. A 'Search' button is located to the right of the search bar. Below the search bar, there is a section titled 'Using MeSH' with links for 'Help' and 'Tutorials'. To the right, a section titled 'More Resources' includes links for 'E-Utilities' and 'NLM MeSH Homepage'. A 'Turn off' link is also present at the bottom right of the dropdown menu.

Anche in questa maschera di ricerca è attiva la funzione di autocompletamento, che ci permette di individuare rapidamente la MESH di nostro interesse

MeSH

MeSH

pulmonary disease, chronic obstructive

Search

Create alert Limits Advanced

Help

Full

Send to:

MESH corrente

Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

Subheadings:

☐ analysis

☐ anatomy and histology

☐ blood

☐ cerebrospinal fluid

☐ chemically induced

☐ chemistry

☐ classification

☐ complications

☐ congenital

☐ diagnosis

☐ diagnostic imaging

☐ diet therapy

☐ drug therapy

☐ economics

☐ embryology

☐ enzymology

☐ epidemiology

☐ ethnology

☐ etiology

☐ genetics

☐ history

☐ immunology

☐ legislation and jurisprudence

☐ metabolism

☐ microbiology

☐ mortality

☐ nursing

☐ organization and administration

☐ parasitology

☐ pathology

☐ physiology

☐ physiopathology

☐ prevention and control

☐ psychology

☐ radiotherapy

☐ rehabilitation

☐ statistics and numerical data

☐ surgery

☐ therapy

☐ urine

☐ veterinary

☐ virology

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease
- Chronic Obstructive Lung Disease
- Airflow Obstruction, Chronic
- Airflow Obstructions, Chronic
- Chronic Airflow Obstructions
- Chronic Airflow Obstruction

sinonimi

Previous Indexing:

- Lung Diseases, Obstructive (1971-2001)
- Pulmonary Emphysema (1965-1971)

MESH precedente

PubMed Search Builder

Add to search builder AND

Search PubMed

YouTube Tutorial

Related information

PubMed

PubMed - Major Topic

Clinical Queries

NLM MeSH Browser

dbGaP Links

MedGen

Recent Activity

Turn Off Clear

pulmonary disease, chronic obstructive (1)

MeSH

Pulmonary Disease, Chronic Obstructive

MeSH

Pediatric Obesity

MeSH

pediatric obesity (1)

MeSH

epithelial to mesenchymal transition ovarian cancer AND (aged, 80...

(33) PubMed

See more...

"pulmonary disease, chronic obstructive" [MeSH Terms]

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

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease
- Chronic Obstructive Lung Disease
- Airflow Obstruction, Chronic
- Airflow Obstructions, Chronic
- Chronic Airflow Obstructions
- Chronic Airflow Obstruction

Previous Indexing:

- [Lung Diseases, Obstructive \(1971-2001\)](#)
- [Pulmonary Emphysema \(1965-1971\)](#)

[All MeSH Categories](#)

[Diseases Category](#)

[Respiratory Tract Diseases](#)

[Lung Diseases](#)

[Lung Diseases, Obstructive](#)

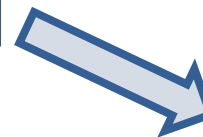
**Pulmonary Disease, Chronic Obstructive**

[Asthma-Chronic Obstructive Pulmonary Disease Overlap Syndrome](#)

[Bronchitis, Chronic](#)

[Pulmonary Emphysema](#)

dal generale  
(broader terms)



allo specifico  
(narrower terms)

Search PubMed

You Tube Tutorial

## Related information

[PubMed](#)

[PubMed - Major Topic](#)

[Clinical Queries](#)

[NLM MeSH Browser](#)

[dbGaP Links](#)

[MedGen](#)

## Recent Activity

[Turn Off](#) [Clear](#)

[Pulmonary Disease, Chronic Obstructive](#)  
MeSH

[pulmonary disease, chronic obstructive \(1\)](#)  
MeSH

[Pediatric Obesity](#)  
MeSH

[pediatric obesity \(1\)](#)  
MeSH

[epithelial to mesenchymal transition ovarian cancer AND \(aged, 80... \(33\)](#)  
PubMed

[See more...](#)

"pulmonary disease, chronic obstructive" [MeSH Terms]

Search

[See more...](#)



Full

Send to:

## Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

[Subheadings:](#)

### SUBHEADINGS

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

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease
- Chronic Obstructive Lung Disease
- Airflow Obstruction, Chronic
- Airflow Obstructions, Chronic
- Chronic Airflow Obstructions
- Chronic Airflow Obstruction

### PubMed Search Builder

Add to search builder

AND

Search PubMed

[YouTube](#) [Tutorial](#)

### Related information

[PubMed](#)

[PubMed - Major Topic](#)

[Clinical Queries](#)

[NLM MeSH Browser](#)

[dbGaP Links](#)

[MedGen](#)

### Recent Activity

[Turn Off](#) [Clear](#)

[pulmonary disease, chronic obstructive \(1\)](#)  
MeSH

[Pulmonary Disease, Chronic Obstructive](#)  
MeSH

[Pediatric Obesity](#)  
MeSH

[pediatric obesity \(1\)](#)  
MeSH

[epithelial to mesenchymal transition ovarian cancer AND \(aged, 80... \(33\)](#)  
PubMed

[See more...](#)

- ***SUBHEADINGS (QUALIFICATORI):*** consentono di descrivere meglio il contenuto concettuale del documento e di definire le relazioni tra descrittori. Il loro uso garantisce **maggior precisione e specificità** alla ricerca.
- ***MAJOR TOPIC:*** il termine viene ricercato solo come **concetto principale** dell'articolo.
- ***DO NOT INCLUDE:*** questo comando consente di escludere dalla ricerca tutti i termini che gerarchicamente si trovano al di sotto del termine cercato, nella struttura ad albero



MeSH

MeSH ▾

pulmonary disease, chronic obstructive

Search

[Create alert](#) [Limits](#) [Advanced](#)

[Help](#)

Full ▾

Send to: ▾

## Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

[Subheadings:](#)

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

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease

1



Add to search builder

AND ▾

Search PubMed

PubMed Search Builder

"Pulmonary Disease, Chronic Obstructive" [Mesh]

2



[YouTube Tutorial](#)

Related information

PubMed

PubMed Topic

Clinical Queries

NLM MeSH Browser

dbGaP Links

MedGen

Recent Activity

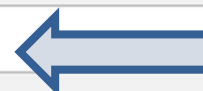
[Turn Off](#) [Clear](#)

pulmonary disease, chronic obstructive (1)  
MeSH

Pulmonary Disease, Chronic Obstructive  
MeSH

Pediatric Obesity  
MeSH

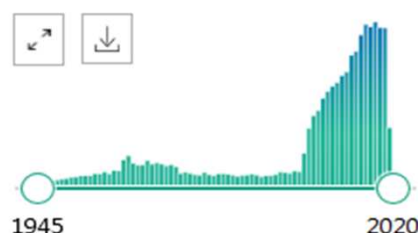
pediatric obesity (1)  
MeSH



MYNCBI FILTERS

53,862 results

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

### Chronic obstructive pulmonary disease.

1 Rabe KF and Watz H. Lancet 2017 - Review. PMID 28513453

**Chronic obstructive pulmonary disease** (COPD) kills more than 3 million people worldwide every year. Despite progress in the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate **disease** progression or affect mortality. A better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

“ Cite Share

### Chronic Obstructive Pulmonary Disease: Evaluation and Management.

2 Duffy SP and Criner GJ. Med Clin North Am 2019 - Review. PMID 30955513

**Chronic obstructive pulmonary disease** (COPD) is a leading cause of death nationally and worldwide. Cigarette smoking is the most common risk factor in the development of COPD. **Disease** course is variable with some patients having a high degree of obstruction and minimal symptoms, whereas others with better lung function have a greater symptoms burden. ...

“ Cite Share

### Chronic Obstructive Pulmonary Disease in Elderly Patients.

3 Cortopassi F, et al. Clin Geriatr Med 2017 - Review. PMID 28991649

**Chronic obstructive pulmonary disease** (COPD) is prevalent in the elderly population, with high impact on quality of life, morbidity, and mortality. ...

“ Cite Share

### Chronic obstructive pulmonary disease subpopulations and phenotyping.

4 Segal LN and Martinez FJ. J Allergy Clin Immunol 2018 - Review. PMID 29884286 Free PMC article.

Full

Send to:

## Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

[Subheadings:](#)

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

☒ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease
- Chronic Obstructive Lung Disease

### PubMed Search Builder

"Pulmonary Disease, Chronic Obstructive"[Majr]

Add to search builder AND

Search PubMed

YouTube Tutorial

### Related information

PubMed

PubMed Major Topic

Clinical

NLM MeSH Browser

dbGaP Links

MedGen

### Recent Activity

Turn Off Clear

pulmonary disease, chronic obstructive (1)  
MeSH

Pulmonary Disease, Chronic Obstructive  
MeSH

Pediatric Obesity  
MeSH

pediatric obesity (1)  
MeSH



RESULTS BY YEAR



AVAILABILITY

Abstract



Chronic obstructive pulmonary disease.

1

Rabe KF and Watz H. Lancet 2017 - Review. PMID 28513453

**Chronic obstructive pulmonary disease** (COPD) kills more than 3 million people worldwide every year. Despite progress in the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate **disease** progression or affect mortality. A better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

Cite Share



Chronic obstructive pulmonary disease.

U, et al. Nat Rev Dis Primers 2015 - Review. PMID 27189863

**Chronic obstructive pulmonary disease** (COPD) is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

Cite Share



Chronic obstructive pulmonary disease.

3

Decramer M, et al. Lancet 2012 - Review. PMID 22314182

**Chronic obstructive pulmonary disease** (COPD) is characterised by progressive airflow obstruction that is only partly reversible, inflammation in the airways, and systemic effects or comorbidities. ...The **disease** is further aggravated by exacerbations, particularly in patients with severe **disease**, up to 78% of which are due to bacterial infections, viral infections, or both. ...

Cite Share

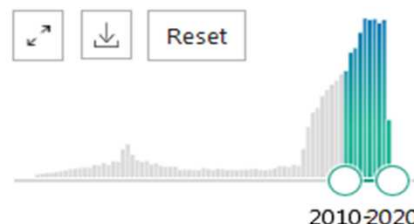
ARTICLE TYPE

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

PUBLICATION DATE

Muovendo il cursore è possibile limitare il numero degli articoli ad un intervallo di tempo specifico

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

PUBLICATION DATE

### Chronic obstructive pulmonary disease.

1 Rabe KF and Watz H. Lancet 2017 - Review. PMID 28513453

**Chronic obstructive pulmonary disease** (COPD) kills more than 3 million people worldwide every year. Despite progress in the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate **disease** progression or affect mortality. A better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

Cite Share

### Chronic obstructive pulmonary disease.

2 Barnes PJ, et al. Nat Rev Dis Primers 2015 - Review. PMID 27189863

**Chronic obstructive pulmonary disease** (COPD) is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchiolitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

Cite Share

### Chronic obstructive pulmonary disease.

3 Decramer M, et al. Lancet 2012 - Review. PMID 22314182

**Chronic obstructive pulmonary disease** (COPD) is characterised by progressive airflow obstruction that is only partly reversible, inflammation in the airways, and systemic effects or comorbidities. ...The **disease** is further aggravated by exacerbations, particularly in patients with severe **disease**, up to 78% of which are due to bacterial infections, viral infections, or both. ...

Cite Share



MeSH

MeSH

pulmonary disease, chronic obstructive

Search

Create alert Limits Advanced

Help

Full

Send to

## Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

[Subheadings:](#)

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

☐ Restrict to MeSH major topic.

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

Tree Number(s): C08.381.495.389

MeSH Unique ID: D029424

Entry Terms:

- COPD
- Chronic Obstructive Pulmonary Disease
- COAD
- Chronic Obstructive Airway Disease
- Chronic Obstructive Lung Disease

1

2



### PubMed Search Builder

"Pulmonary Disease, Chronic Obstructive" [Mesh:NoExp]

Add to search builder

AND

Search PubMed

YouTube Tutorial

### Related Information

PubMed

PubMed Major Topic

Clinical Trials

NLM MeSH Browser

dbGaP Links

MedGen

### Recent Activity

Turn Off Clear

pulmonary disease, chronic obstructive (1)  
MeSH

Pulmonary Disease, Chronic Obstructive  
MeSH

Pediatric Obesity  
MeSH

pediatric obesity (1)  
MeSH

3

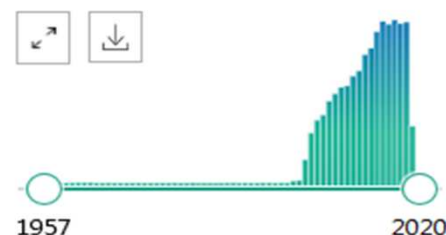




MYNCBI FILTERS

37,960 results

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

### Chronic obstructive pulmonary disease.

- 1 Rabe KF and Watz H. *Lancet* 2017 - Review. PMID 28513453

**Chronic obstructive pulmonary disease** (COPD) kills more than 3 million people worldwide every year. Despite progress in the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate **disease** progression or affect mortality. A better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

“ Cite Share

### Chronic Obstructive Pulmonary Disease: Evaluation and Management.

- 2 Duffy SP and Criner GJ. *Med Clin North Am* 2019 - Review. PMID 30955513

**Chronic obstructive pulmonary disease** (COPD) is a leading cause of death nationally and worldwide. Cigarette smoking is the most common risk factor in the development of COPD. **Disease** course is variable with some patients having a high degree of obstruction and minimal symptoms, whereas others with better lung function have a greater symptoms burden. ...

“ Cite Share

### Chronic obstructive pulmonary disease subpopulations and phenotyping.

- 3 Segal LN and Martinez FJ. *J Allergy Clin Immunol* 2018 - Review. PMID 29884286 Free PMC article.

The diagnosis and treatment of **chronic obstructive pulmonary disease** (COPD) has been based largely on a one-size-fits-all approach. ...However, patients with COPD have distinct features that determine very different evolutions of the **disease**. In this review we highlight distinct subgroups of COPD characterized by unique pathophysiologic derangements, response to treatment, and **disease** progression. ...

“ Cite Share

MeSH

MeSH ▾

pulmonary disease, chronic obstructive

Search

[Create alert](#) [Limits](#) [Advanced](#)

[Help](#)

Full ▾

Send to: ▾

### PubMed Search Builder

```
( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] )
```

## Pulmonary Disease, Chronic Obstructive

A disease of chronic diffuse irreversible airflow obstruction. Subcategories of COPD include CHRONIC BRONCHITIS and PULMONARY EMPHYSEMA.

Year introduced: 2002

PubMed search builder options

[Subheadings:](#)

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

1

2

Add to search builder

AND ▾

Search PubMed

[YouTube](#) Tutorial

### Related information

PubMed

PubMed Topic

Clinical Queries

NLM MeSH Browser

dbGaP Links

MedGen

### Recent Activity

[Turn Off](#) [Clear](#)

🔍 pulmonary disease, chronic obstructive (1)

☐ Restrict to MeSH Major Topic.

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





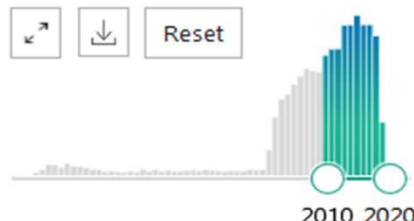
MYNCBI FILTERS

5,091 results

RESULTS BY YEAR



Reset



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

PUBLICATION DATE

1 **Role of Diet in Chronic Obstructive Pulmonary Disease Prevention and Treatment.**

Scoditti E, et al. *Nutrients* 2019 - Review. PMID 31208151 Free PMC article.

**Chronic obstructive pulmonary disease** is one of the leading causes of morbidity and mortality worldwide and a growing healthcare problem. Identification of modifiable risk factors for prevention and treatment of COPD is urgent, and the scientific community has begun to pay close attention to **diet** as an integral part of COPD management, from prevention to treatment. ...

Cite Share

2 **Chronic Obstructive Pulmonary Disease.**

Hattab Y, et al. *Crit Care Nurs Q* 2016 - Review. PMID 26919673

**Chronic obstructive pulmonary disease** (COPD) is a **chronic** smoking-related lung **disease** associated with significant mortality and morbidity. ...

Cite Share

3 **Peak Inspiratory Flow Rate in Chronic Obstructive Pulmonary Disease: Implications for Dry Powder Inhalers.**

Ghosh S, et al. *J Aerosol Med Pulm Drug Deliv* 2017 - Review. PMID 28933581 Free PMC article.

**Chronic obstructive pulmonary disease** (COPD) is the third leading cause of death in the United States with a significant economic burden related to hospital admissions for exacerbations. ...Many devices require a PIFR >60 L/min for adequate medication dispersal, while others appear to have adequate **drug** deaggregation with a PIFR >30 L/min. ...

Cite Share

4 **Mucolytic agents versus placebo for chronic bronchitis or chronic obstructive pulmonary disease.**

Poole P, et al. *Cochrane Database Syst Rev* 2019. PMID 31107966 Free PMC article.

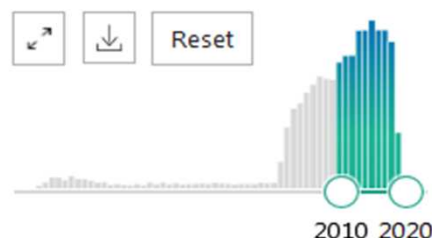
MYNCBI FILTERS

5,091 results

RESULTS BY YEAR



Reset



Previous results

Page 2

TEXT AVAILABILITY



Abstract



Free full text



Full text

ARTICLE ATTRIBUTE



Associated data

ARTICLE TYPE



Books and Documents



Clinical Trial



Meta-Analysis



Randomized Controlled Trial



Review



Systematic Reviews



Diagnosis, Prevention and Treatment of Stable COPD and Acute Exacerbations of COPD: The Swiss Recommendations 2018

11

Stolz D, et al. Respiration 2018. PMID 30138943

Cite Share



Metabolic Disorder in Chronic Obstructive Pulmonary Disease (COPD) Patients: Towards a Personalized Approach Using Marine Drug Derivatives

12

Lamonaca P, et al. Mar Drugs 2017 - Review. PMID 28335527 Free PMC article.

Cite Share



[Research progress in potential drugs for chronic obstructive pulmonary disease therapy]

13

Ke Q, et al. Zhonghua Jie He He Hu Xi Za Zhi 2019 - Review. PMID 30955286 Chinese.

Cite Share



Vitamin D supplementation in respiratory diseases: evidence from randomized controlled trials

14

Mathysen C, et al. Pol Arch Intern Med 2017 - Review. PMID 29112181

Cite Share



Full ▾

Send to: ▾

## Lung Diseases, Obstructive

Any disorder marked by obstruction of conducting airways of the lung. AIRWAY OBSTRUCTION may be acute, chronic, intermittent, or persistent.

Year introduced: 1972(1971)

PubMed search builder options

[Subheadings:](#)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> analysis                | <input type="checkbox"/> embryology                      | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> anatomy and histology   | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> blood                   | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> cerebrospinal fluid     | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> chemically induced      | <input type="checkbox"/> etiology                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> chemistry               | <input type="checkbox"/> genetics                        | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> classification          | <input type="checkbox"/> history                         | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> complications           | <input type="checkbox"/> immunology                      | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> congenital              | <input type="checkbox"/> legislation and jurisprudence   | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> diagnosis               | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> diagnostic imaging      | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> transmission                  |
| <input checked="" type="checkbox"/> diet therapy | <input type="checkbox"/> mortality                       | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> drug effects            | <input type="checkbox"/> nursing                         | <input type="checkbox"/> veterinary                    |
| <input checked="" type="checkbox"/> drug therapy | <input type="checkbox"/> organization and administration | <input type="checkbox"/> virology                      |
| <input type="checkbox"/> economics               | <input type="checkbox"/> parasitology                    |  |

☐ Restrict to MeSH Major Topic.

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

Tree Number(s): C08.381.495

MeSH Unique ID: D008173

Entry Terms:

- Lung Disease, Obstructive
- Obstructive Lung Disease
- Obstructive Lung Diseases
- Obstructive Pulmonary Diseases
- Obstructive Pulmonary Disease
- Pulmonary Disease, Obstructive
- Pulmonary Diseases, Obstructive

2



### PubMed Search Builder

```
( "Lung Diseases, Obstructive/diet therapy"[Mesh] OR "Lung Diseases, Obstructive/drug therapy"[Mesh] )
```

[Add to search builder](#)

AND ▾

[Search PubMed](#)[YouTube Tutorial](#)

### Related Information

[PubMed](#)[PubMed Major Topic](#)[Clinical](#)[NLM MeSH Browser](#)[dbGaP Links](#)[MedGen](#)

### Recent Activity

[Turn Off](#) [Clear](#)[Lung Diseases, Obstructive](#)

MeSH

["Lung Diseases, Obstructive "\[MESH\] \(1\)](#)

MeSH

[Pulmonary Disease, Chronic Obstructive](#)

MeSH

[pulmonary disease, chronic obstructive \(1\)](#)

MeSH

[Pediatric Obesity](#)

MeSH

[See more...](#)

3

# PubMed: gli operatori booleani (1)

- Gli operatori booleani (o operatori logici) permettono di combinare in vario modo più concetti all'interno della stessa ricerca, stabilendo quindi una particolare relazione tra i termini
- In PubMed sono utilizzabili i tre più noti, che vanno scritti rigorosamente in carattere maiuscolo:
  - **AND, OR, NOT**

# PubMed: gli operatori booleani (2)

- **AND** recupera documenti che contengono entrambi i termini. Esegue il prodotto logico.
- **OR** recupera documenti che contengono almeno uno dei due termini, oppure entrambi. Esegue la somma logica.
- **NOT (BUTNOT)** recupera documenti che contengono solo il primo dei due termini, escludendo il secondo o i documenti in cui ci sia compresenza dei due. Esprime la differenza logica.

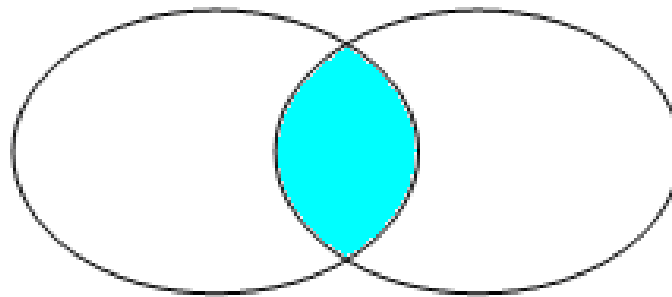
# PubMed: gli operatori booleani (3)

- **AND e OR** : l'ordine dei termini non condiziona il risultato finale
- **NOT** invece esclude l'insieme relativo al termine digitato in seconda posizione (cambiando l'ordine, il risultato sarà completamente diverso).



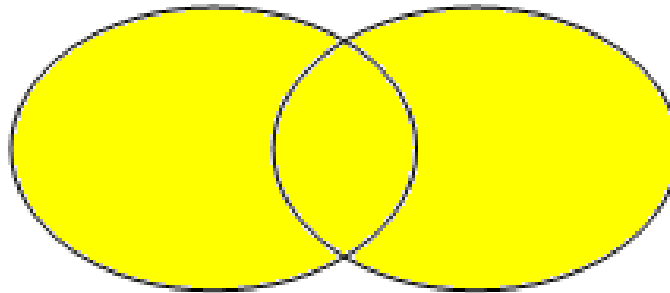
# PubMed: gli operatori booleani (4)

- ***digestive system AND liver*** : i documenti  
contengono contemporaneamente digestive  
system e liver



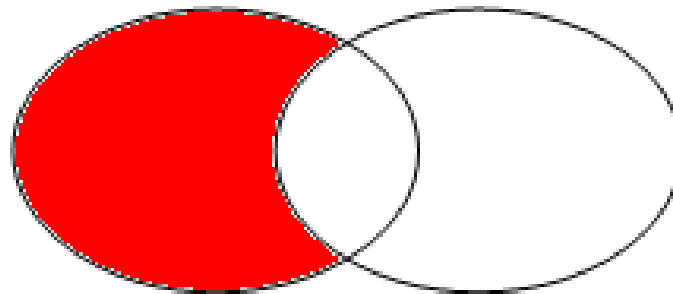
# PubMed: gli operatori booleani (5)

- ***digestive system OR liver*** : i documenti contengono o digestive system, o liver, oppure entrambi;

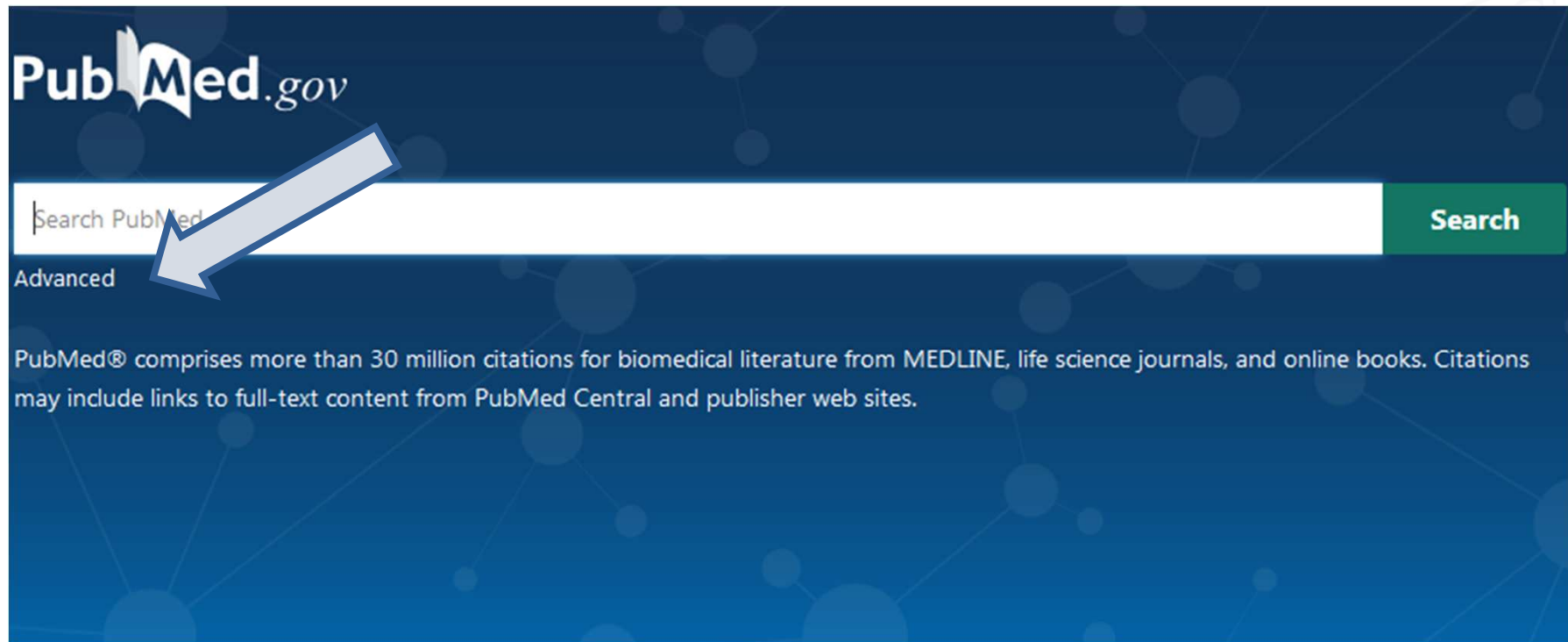


# PubMed: gli operatori booleani (6)

- ***digestive system NOT liver*** : i documenti contengono solo digestive system, escludendo quelli in cui è presente anche liver.



# PubMed: Advanced Search Builder (1)



## Learn

About PubMed  
FAQs & User Guide  
Finding Full Text



## Find

Advanced Search  
Clinical Queries  
Single Citation Matcher



## Download

E-utilities API  
FTP  
Batch Citation Matcher



## Explore

MeSH Database  
Journals



# PubMed: Advanced Search Builder (2)

PubMed Advanced Search Builder

PubMed.gov

Add terms to the query box

All Fields

Enter a search term

ADD

Show Index

Query box

Enter / edit your search query here

Search

History and Search Details

Download

Delete


Search	Actions	Details	Query	Results	Time
#3	...	>	Search: "Lung Diseases, Obstructive "[MESH]	207,112	08:39:11
#1	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] )	8,514	05:42:34
#2	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] ) Filters: from 2010 - 2020	5,091	05:42:32

Showing 1 to 3 of 3 entries

**PubMed Advanced Search Builder**

PubMed.gov


Add terms to the query box


Author  spano

Query box

Enter / edit your search query here

Spano PF  
Spanos NP  
Spano JP  
Spano, Jean Philippe  
Spanos WJ

ADD   
Show Index

Search 


1

Grazie al menù a tendina possiamo scegliere i campi da utilizzare per la ricerca

**PubMed Advanced Search Builder**


PubMed.gov


Add terms to the query box

Author  Enter a search term

Query box

(Spano PF[Author]) AND (pizzi[Author])

AND   
Show Index

Search 

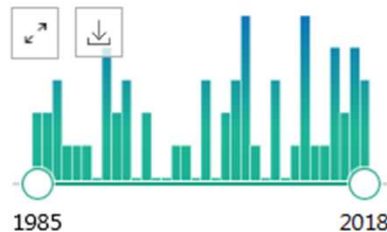
2

... e scegliere l'operatore booleano più appropriato

MYNCBI FILTERS

57 results

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

- ☐ 1 Synapsin III deficiency hampers  $\alpha$ -synuclein aggregation, striatal synaptic damage and nigral cell loss in an AAV-based mouse model of Parkinson's disease

Faustini G, et al. Acta Neuropathol 2018. Among authors: **Spano P, Pizzi M**. PMID 30046897

“ Cite Share

- ☐ 2 Synergistic Association of Valproate and Resveratrol Reduces Brain Injury in Ischemic Stroke

Faggi L, et al. Int J Mol Sci 2018. Among authors: **Spano P, Pizzi M**. PMID 29316653 Free PMC article.

“ Cite Share

- ☐ 3 Synapsin III is a key component of  $\alpha$ -synuclein fibrils in Lewy bodies of PD brains

Longhena F, et al. Brain Pathol 2018. Among authors: **Spano P, Pizzi M**. PMID 29330884

“ Cite Share

- ☐ 4 The Contribution of  $\alpha$ -Synuclein Spreading to Parkinson's Disease Synaptopathy

Longhena F, et al. Neural Plast 2017 - Review. Among authors: **Spano P, Pizzi M**. PMID 28133550 Free PMC article.

“ Cite Share

- ☐ 5 Mild Inflammatory Profile without Gliosis in the c-Rel Deficient Mouse Modeling a Late-Onset Parkinsonism

Porrini V, et al. Front Aging Neurosci 2017. Among authors: **Spano PF, Pizzi M**. PMID 28769786 Free PMC article.

History and Search Details

Download

Delete

Search	Actions	Details	Query	Results	Time
#7	...	>	Search: (Spano PF[Author]) AND (pizzi[Author])	57	09:17:03
#3	...	>	Search: "Lung Diseases, Obstructive "[MESH]	207,112	08:39:11
#1	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] )	8,514	05:42:34
#2	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] ) Filters: from 2010 - 2020	5,091	05:42:32

Showing 1 to 4 of 4 entries

1

Nel box **History and Search Details** possiamo controllare tutti i passaggi effettuati nel corso della sessione di ricerca

History and Search Details

Download

Delete

Search	Actions	Details	Query	Results	Time
#7	...	>	Search: (Spano PF[Author]) AND (pizzi[Author])	57	09:17:03
#3	...	>	Search: "Lung Diseases, Obstructive "[MESH]	207,112	08:39:11
#1	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] )	8,514	05:42:34
#2	...	>	Search: ( "Pulmonary Disease, Chronic Obstructive/diet therapy"[Mesh] OR "Pulmonary Disease, Chronic Obstructive/drug therapy"[Mesh] ) Filters: from 2010 - 2020	5,091	05:42:32

Showing 1 to 4 of 4 entries

2


Con il comando «actions», possiamo: cancellare un set di ricerca (#3), aggiungerlo al Builder oppure salvarlo in MyNCBI




# PubMed: gestire i risultati della ricerca (1)

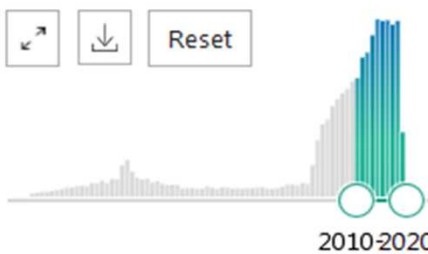
**PubMed.gov** "Pulmonary Disease, Chronic Obstructive"[Majr] × **Search**



[Advanced](#) [Create alert](#)

[Save](#) [Email](#) [...](#) Sorted by: Best match 

MYNCBI FILTERS 

RESULTS BY YEAR

 2010-2020

  [Reset](#)

TEXT AVAILABILITY

☐ Abstract

☐ Free full text

☐ Full text

ARTICLE ATTRIBUTE

☐ Associated data


ARTICLE TYPE

☐ Books and Documents

23,128 results


1 **Chronic obstructive pulmonary disease**  
Rabe KF and Watz H. *Lancet* 2017 - Review. PMID 28546631

**Chronic obstructive pulmonary disease (COPD)** is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

“ Cite  Share

2 **Chronic obstructive pulmonary disease.**  
Barnes PJ, et al. *Nat Rev Dis Primers* 2015 - Review. PMID 27189863

**Chronic obstructive pulmonary disease (COPD)** is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

“ Cite  Share

Opzioni di visualizzazione e riordinamento della bibliografia

Condivisione della citazione bibliografica su Twitter o Facebook

# PubMed: gestire i risultati della ricerca (2)

**PubMed.gov** "Pulmonary Disease, Chronic Obstructive"[Majr]

[Advanced](#) [Create alert](#)

Sorted by: Best match

MYNCBI FILTERS

RESULTS BY YEAR

2010-2020

TEXT AVAILABILITY

☐ Abstract

☐ Free full text

☐ Full text

ARTICLE ATTRIBUTE

☐ Associated data

ARTICLE TYPE

☐ Books and Documents

23,128 results

**Chronic obstructive pulmonary disease.**

1 [Rabe KF and Watz H. Lancet 2017 - Review. PMID](#)

**Chronic obstructive pulmonary disease** (COPD) kills more year. Despite progress in the treatment of symptoms and p advances have been made to ameliorate **disease** progression of and mortality. Better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

“ Cite  Share

**Chronic obstructive pulmonary disease.**

2 [Barnes PJ, et al. Nat Rev Dis Primers 2015 - Review. PMID 27189863](#)

**Chronic obstructive pulmonary disease** (COPD) is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchiolitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

“ Cite  Share

DISPLAY OPTIONS

Format

Sort by

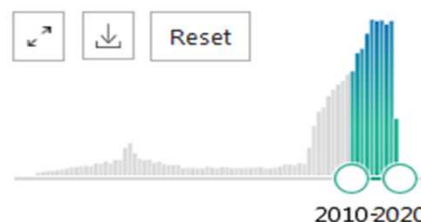
Per page



MYNCBI FILTERS

23,128 results

RESULTS BY YEAR



TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

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

PUBLICATION DATE

- ☐ 1 year

1

Review

> Lancet, 389 (10082), 1931-1940 2017 May 13

## Chronic Obstructive Pulmonary Disease

Klaus F Rabe<sup>1</sup>, Henrik Watz<sup>2</sup>

Affiliations + expand

PMID: 28513453 DOI: 10.1016/S0140-6736(17)31222-9

### Abstract

Chronic obstructive pulmonary disease (COPD) kills more than 3 million people worldwide every year. Despite progress in the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate disease progression or affect mortality. A better understanding of the complex disease mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the disease. However, without a global political and economic effort to reduce tobacco use, to regulate environmental exposure, and to find alternatives to the massive use of biomass fuel, COPD will remain a major health-care problem for decades to come.

Copyright © 2017 Elsevier Ltd. All rights reserved.

“Cited by 60 PMC articles

SUPPLEMENTARY INFO


Publication types, MeSH terms + expand

FULL-TEXT LINKS





# PubMed: gestire i risultati della ricerca (3)





# PubMed: gestire i risultati della ricerca (4)

PubMed.gov

"Pulmonary Disease, Chronic Obstructive"[Majr]

Advanced Create alert

Save Email ...

Sorted by: Best match

MYNCBI FILTERS

RESULTS BY YEAR

2010-2020

TEXT AVAILABILITY

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

ARTICLE ATTRIBUTE

- ☐ Associated data

ARTICLE TYPE

- ☐ Books and Documents

23,111

SEND TO

- Clipboard
- My Bibliography
- Collections

Salvataggio temporaneo o archiviazione permanente

**Chronic obstructive pulmonary disease.**  
Lancet 2017 - Review. PMID 28513453

**Chronic obstructive pulmonary disease** (COPD) kills more than 3 million people worldwide every year. In the treatment of symptoms and prevention of acute exacerbations, few advances have been made to ameliorate **disease** progression or affect mortality. A better understanding of the complex **disease** mechanisms resulting in COPD is needed. Smoking cessation programmes, increasing physical activity, and early detection and treatment of comorbidities are further key components to reduce the burden of the **disease**. ...

Cite Share

2

**Chronic obstructive pulmonary disease.**  
Barnes PJ, et al. Nat Rev Dis Primers 2015 - Review. PMID 27189863

**Chronic obstructive pulmonary disease** (COPD) is a common **disease** with high global morbidity and mortality. COPD is characterized by poorly reversible airway obstruction, which is confirmed by spirometry, and includes obstruction of the small airways (**chronic obstructive** bronchiolitis) and emphysema, which lead to air trapping and shortness of breath in response to physical exertion. ...Although the mechanisms underlying COPD remain poorly understood, the **disease** is associated with **chronic** inflammation that is usually corticosteroid resistant. ...

Cite Share

Registrandosi in MyNCBI si accede ad una sorta di «cloud» dove è possibile salvare le strategie di ricerca, le ricerche effettuate, chiedere l'attivazione di «alert»

**1**

# Log in

 eRA Commons

 Google Account

 NIH Account

 NCBI Account

[more login options](#)

New here? [Sign up](#)

**2**

# Log in

NCBI Username

Password

[logged in](#)

Si può utilizzare il proprio account di posta gmail per registrarsi senza dover creare un nuovo profilo

Oppure ci si registra come nuovo utente seguendo le istruzioni



U.S. National Library of Medicine  
National Center for Biotechnology Information

Log in

PubMed.gov

Search PubMed

Advanced

PubMed® comprises more than 30 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.

Log in

Search



eRA Commons



Google Account



NIH Account



NCBI Account

more login options

Una volta creato il proprio account MyNCBI, si può effettuare il login all'inizio di ogni seduta di ricerca

# MY NCBI: riepilogo

La registrazione in My NCBI consente di:

- salvare le ricerche, le strategie di ricerca e impostare alert automatici con frequenza personalizzata
- creare raccolte di citazioni (**Collections**), con la possibilità di condivisione delle stesse e quindi di rendere «pubblica» la propria bibliografia
- aggiungere manualmente citazioni di provenienza diversa rispetto a Pubmed
- creare e gestire, in qualità di autore, la propria bibliografia (**My bibliography**)

La registrazione è gratuita e l'accesso può avvenire già dalla homepage di PubMed



# PubMed: ulteriori strumenti e risorse

Dalla homepage di PubMed, tra i tanti altri link a disposizione, trovate anche:

- ***SINGLE CITATION MATCHER***
- ***CLINICAL QUERIES***
- ***FAQs & USER GUIDE***



U.S. National Library of Medicine  
National Center for Biotechnology Information

Log in

PubMed.gov

Search

Advanced

PubMed® comprises more than 30 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.



### Learn

About PubMed  
FAQs & User Guide  
Finding Full Text



### Find

Advanced Search  
Clinical Queries  
Single Citation Matcher



### Download

E-utilities API  
FTP  
Batch Citation Matcher



### Explore

MeSH Database  
Journals



## PubMed Clinical Queries

1

Utile per l'individuazione di letteratura  
rilevante dal punto di vista clinico

Results of searches on this page are limited to specific clinical research areas. For comprehensive searches, use [PubMed](#) directly.

### Clinical Study Categories

This column displays citations filtered to a specific clinical study category and scope. These search filters were developed by [Haynes RB et al](#). See more [filter information](#).

### Systematic Reviews

This column displays citations for systematic reviews, meta-analyses, reviews of clinical trials, evidence-based medicine, consensus development conferences, and guidelines. See [filter information](#) or additional [related sources](#).

### Medical Genetics

This column displays citations pertaining to topics in medical genetics. See more [filter information](#).

## PubMed Clinical Queries

2

Results of searches on this page are limited to specific clinical research areas. For comprehensive searches, use [PubMed](#) directly.

### Clinical Study Categories

Category: Scope: 

### Systematic Reviews

### Medical Genetics

Topic: 

#### Results: 5 of 67

##### Renal Denervation in the Medicare Population

Shafi T, Chacko M, Berger Z, Wilson LM, Gayleard J, Bass EB, Sozio SM.  
2016 Jul.

##### Polypharmacy in the Aging Patient: Management of Hypertension in Octogenarians.

Benetos A, Rossignol P, Cherubini A, Joly L, Grodzicki T, Rajkumar C, Strandberg TE, Petrovic M.  
JAMA. 2015 Jul 14; 314(2):170-80.

#### Results: 5 of 88

##### Ambulatory Blood Pressure Monitoring for the Effective Management of Antihypertensive Drug Treatment.

O'Brien E, Dolan E.  
Clin Ther. 2016 Oct; 38(10):2142-2151. Epub 2016 Sep 13.

##### White-coat hypertension and cardiovascular events: a meta-analysis.

Briasoulis A, Androulakis E, Palla M, Papageorgiou N, Tousoulis D.  
J Hypertens. 2016 Apr; 34(4):593-9.

#### Results: 5 of 25

##### Baroreflex sensitivity in children and adolescents: physiology, hypertension, obesity, diabetes mellitus.

Honziková N, Závodná E.  
Physiol Res. 2016 Dec 13; 65(6):879-889. Epub 2016 Aug 19.

##### Blood pressure in children and adolescents: current insights.

Lurbe E, Ingelfinger JR.  
J Hypertens. 2016 Feb; 34(2):176-83.

## PubMed Single Citation Matcher

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

Journal • [Help](#)

Date  (month and day are optional)

Details Volume  Issue  First page

Author name • [Help](#)

Limit authors ☐ Only as first author ☐ Only as last author

Title words

[Search](#)

[Clear form](#)

Strumento da utilizzare per la ricerca o la verifica di una citazione

1

PubMed

clinical evaluation of fluid extract of chamomilla

x

[Search](#)

[RSS](#) [Save search](#) [Advanced](#)

[Help](#)

[Display Settings:](#) ☒ Abstract

[Send to:](#) ☐



[J Drugs Dermatol.](#) 2006 Jul-Aug;5(7):612-7.

**Clinical evaluation of fluid extract of Chamomilla recutita for oral aphthae.**

[Ramos-e-Silva M<sup>1</sup>](#), [Ferreira AF](#), [Bibas R](#), [Cameiro S](#).

[+ Author information](#)

### Abstract

Recurrent aphthous stomatitis is a difficult to treat and quite common chronic inflammatory disease of the oral mucosa. This study evaluates the fluid extract from Chamomilla recutita's safety and effectiveness in pain relief from aphthous stomatitis and other painful ulcers of the oral mucous membrane. The analgesic effect was considered excellent by 82% and good by 18% of the patients, as demonstrated with the Analogical Visual Scale for chronic and experimental pains after 5, 10, and 15 minutes. Tolerance was evaluated as excellent by 97% and good by 1% of the subjects. The fluid extract from Chamomilla recutita, due to its analgesic effect, may give these patients a better quality of life.

PMID: 16865865 [PubMed - indexed for MEDLINE]



[Publication Types](#) [MeSH Terms](#) [Substances](#)

2

[Save items](#)

[★ Add to Favorites](#)

[Related citations in PubMed](#)

The efficacy of a paste containing Myrtus communis (Myrtle) in the [Clin Oral Investig. 2010]  
Effects of camel thorn distillate on recurrent oral aphthous lesions. [J Dtsch Dermatol Ges. 2010]  
Efficacy of Rhizophora mangle aqueous bark extract (RMABE) in th [Curr Med Res Opin. 2005]  
[Review](#) Review of over-the-counter treatments for aphthous ulcers [J Contemp Dent Pract. 2008]  
[Review](#) Treatment of severe recurrent aphthous stomati [Arch Otolaryngol Head Neck Surg. 1988]



# La ricerca bibliografica: consigli

- **Scegliete la banca dati / le banche dati più appropriata/e** alle vostre esigenze (che possono variare nel tempo e/o con lo svilupparsi della tesi).
- **Formulate il quesito scientifico oggetto della ricerca nel modo più chiaro possibile**, scomponendo l'argomento in tanti concetti chiave correlati tra di loro e individuando i termini adeguati e corretti in lingua inglese: potete avvalervi in questa fase di dizionari ed enciclopedie.
- **Siate aperti e disponibili**, via via che il vostro lavoro procede e le vostre conoscenze in materia si fanno più approfondite, **a rivedere e ricalibrare la ricerca bibliografica fatta preliminarmente**.
- **Non restringete eccessivamente la ricerca in fase iniziale**, potreste ritrovarvi frustrati per aver ottenuto un numero limitato di documenti.
- **Sfruttate al meglio le bibliografie di lavori già reperiti....** Se il contenuto di quegli articoli «centra» il vostro argomento, le bibliografie contenute saranno in buona percentuale pertinenti!
- Gestite la bibliografia in modo **accurato** fin dall'inizio!

UNIVERSITÀ  
DEGLI STUDI  
DI BRESCIA

unibs.it

[@Mail](#)

Ateneo

Didattica

Ricerca

[> CORSI DI STUDIO](#)[> DIPARTIMENTI](#)[> TERZA MISSIONE](#)[BIBLIOTECHE](#)[Servizi online](#)

## Sistema Bibliotecario di Ateneo

- [> Organizzazione](#)
- [> Servizi](#)
- [> Cerca e trova risorse](#)
- [> Relazioni e statistiche](#)
- [> Biblioteca di Economia e Giurisprudenza](#)
- [> Biblioteca di Ingegneria](#)
- [> Biblioteca di Medicina](#)
- [> Presentazione](#)
- [> Elenco personale](#)
- [> Patrimonio](#)

[Guide e materiali informativi >](#)[Home](#) > [Biblioteche](#) > [Biblioteca di Medicina](#)

## Guide e materiali informativi - Biblioteca di Medicina

In questa pagina sono disponibili guide e materiali informativi sulle risorse cartacee ed elettroniche della biblioteca e sui servizi erogati.

Alcuni documenti sono in fase di revisione e/o aggiornamento.

### Presentazioni:

- [I servizi bibliotecari: presentazione e istruzioni per l'uso - 15.03.2019](#)
- [Introduzione alla Cochrane Library - 12.04.2018](#)
- [Introduzione alla ricerca bibliografica in PubMed - 18.10.2018](#)
- [Introduzione alla ricerca bibliografica in CINAHL - 29.11.2018](#)

### Pieghevoli:


- [Biblioteca di Ingegneria e Medicina. Sede di Medicina](#)

[Futuro studente](#)[International students](#)[Studenti e Laureati](#)[Personale docente](#)[Personale tecnico amministrativo](#)[Aziende ed enti](#)

### Pagine Correlate

- [> Cerca e trova risorse - Sistema Bibliotecario di Ateneo](#)

Le diapositive presentate durante gli incontri formativi vengono in seguito pubblicate nella sezione «Guide e materiali informativi» del portale

A close-up photograph of a yellow fire hydrant. Water is spraying out from the side outlet, creating a large, white, turbulent plume that fills the right side of the frame. The background is dark, making the yellow hydrant and the white water stand out. The text is overlaid on the right side of the image.

Getting information off the  
Internet is like taking a  
drink from a fire hydrant.

Mitchell Kapor



## ***LA RICERCA BIBLIOGRAFICA NEL <NUOVO> PUBMED***

***Vi ringrazio per l'attenzione***

***Nicoletta Lumina***

BIBLIOTECA DI INGEGNERIA E MEDICINA – SEDE DI MEDICINA

e-mail [biblioteca.med@unibs.it](mailto:biblioteca.med@unibs.it) tel. 030 3717368