

编号: YY003-20210301001

标题: Study: Many cancer survivors worried about treatment disruptions during the pandemic

简介: New study reports that early in the 2020 pandemic in the United States, one-third of cancer survivors worried about treatment and cancer care disruptions. Using a mixed methods approach, investigators utilized survivors' own words to more deeply describe their experiences and worries about the pandemic's impact on their overall health.

全文链接: <https://www.news-medical.net/news/20210224/Study-Many-cancer-survivors-worried-about-treatment-disruptions-during-the-pandemic.aspx>

编号: YY003-20210301002

标题: New guidelines aim to help reduce blood pressure for chronic kidney disease patients

简介: A recommendation for more intensive blood pressure management from an influential global nonprofit that publishes clinical practice guidelines in kidney disease could, if followed, benefit nearly 25 million Americans, according to an analysis led by researchers at the Johns Hopkins Bloomberg School of Public Health.

全文链接: <https://www.news-medical.net/news/20210223/New-guidelines-aims-to-help-reduce-blood-pressure-for-chronic-kidney-disease-patients.aspx>

编号: YY003-20210301003

标题: 互联网医疗在老年慢性病管理中的应用进展

简介: 随着医疗技术和生活水平的提升以及生育率的下降,老龄化已是全球的公共社会问题。据国家统计局最新数据显示,2019年我国老年(≥ 60 岁)人口占总人口的18.1%(约2.5亿)。慢性病是威胁老年人身心健康的重要原因,其中以高血压、DM较常见,老年人的患病率分别为53.2%、20.2%。此外,2015年中国健康与养老追踪调查(China Health and Retirement Longitudinal Study, CHARLS)纳入了11707名 ≥ 60 岁的老年人,发现慢性病共患病率为43.6%。在互联网技术进步、医疗政策驱动、慢性病患者人数不断增多而医疗资源分布不均等背景下,互联网医疗+慢病管理得到飞速发展,现处于病人自我管理、医患沟通管理和第三方服务融合发展阶段。慢性病的主要群体是老年人,随着部分高知、富有老年人的增多和智能手机的普及,围绕线上+线下、“药-医-险-养”一体化闭环式的老年人互联网慢性病管理模式也逐渐成为一个可行、可期的发展方向。本文分析了近年来老年人互联网慢性病管理服务模式现状,针对现实困境提出发展策略,以推动老年人互联网医疗无障碍环境建设,让智慧医疗更加便捷、惠民。

全文链接: http://pan.ckeest.cn/rcservice//doc?doc_id=73541

编号: YY003-20210301004

标题: A pragmatic randomized controlled trial testing the effects of the international scientific SCI exercise guidelines on SCI chronic pain: protocol for the EPIC-SCI trial

简介: Study design Protocol for a pragmatic randomized controlled trial (the Exercise guideline Promotion and Implementation in Chronic SCI [EPIC-SCI] Trial). Primary objectives To test if home-/community-based exercise, prescribed according to the international SCI exercise guidelines, significantly reduces chronic bodily pain in adults with SCI. Secondary objectives To investigate: (1) the effects of exercise on musculoskeletal and neuropathic chronic pain; (2) if reduced inflammation and increased descending inhibitory control are viable pathways by which exercise reduces pain; (3) the effects of chronic pain reductions on subjective well-being; and (4)

efficiency of a home-/community-based exercise intervention. Setting Exercise in home-/community-based settings; assessments in university-based laboratories in British Columbia, Canada. Method Eighty-four adults with chronic SCI, reporting chronic musculoskeletal or neuropathic pain, and not meeting the current SCI exercise guidelines, will be recruited and randomized to a 6-month Exercise or Wait-List Control condition. Exercise will occur in home/community settings and will be supported through behavioral counseling. All measures will be taken at baseline, 3-months and 6-months. Analyses will consist of linear mixed effect models, multiple regression analyses and a cost-utility analysis. The economic evaluation will examine the incremental costs and health benefits generated by the intervention compared with usual care. Ethics and dissemination The University of British Columbia Clinical Research Ethics Board approved the protocol (#H19-01650). Using an integrated knowledge translation approach, stakeholders will be engaged throughout the trial and will co-create and disseminate evidence-based recommendations and messages regarding the use of exercise to manage SCI chronic pain.
全文链接: http://pan.ckcest.cn/rcservice//doc?doc_id=73542

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标题: Identifying adverse childhood experiences in pediatrics to prevent chronic health conditions

简介: Despite evidence that over 40% of youth in the United States have one or more adverse childhood experiences (ACEs), and that ACEs have cumulative, pernicious effects on lifelong health, few primary care clinicians routinely ask about ACEs. Lack of standardized and accurate clinical assessments for ACEs, combined with no point-of-care biomarkers of the "toxic stress" caused by ACEs, hampers prevention of the health consequences of ACEs. Thus, there is no consensus regarding how to identify, screen, and track ACEs, and whether early identification of toxic stress can prevent disease. In this review, we aim to clarify why, for whom, when, and how to identify ACEs in pediatric clinical care. To do so, we examine the evidence for such identification; describe the efficacy and accuracy of potential screening instruments; discuss current trends in, and potential barriers to, the identification of ACEs and the prevention of downstream effects; and recommend next steps for research, practice, and policy.

全文链接: http://pan.ckcest.cn/rcservice//doc?doc_id=73543

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标题: Virtual Medical Education in a Time of Social Distancing

简介: The move to online and virtual medical education has been accelerated by COVID-19, and these new learning opportunities possess multiple advantages which are here to stay. Elective surgeries have been paused out of necessity, travel and scientific conferences have been canceled, and medical post-graduates have been co-opted into more crucial roles. The number of physicians per unit has begun to be limited by hospitals, and some have been forced to eliminate clinical placements completely.

全文链接: <https://www.news-medical.net/whitepaper/20200528/Virtual-Medical-Education-in-a-Time-of-Social-Distancing.aspx>