

Ovid平台 全文期刊库

教程演示



李宁
销售工程师
培训经理

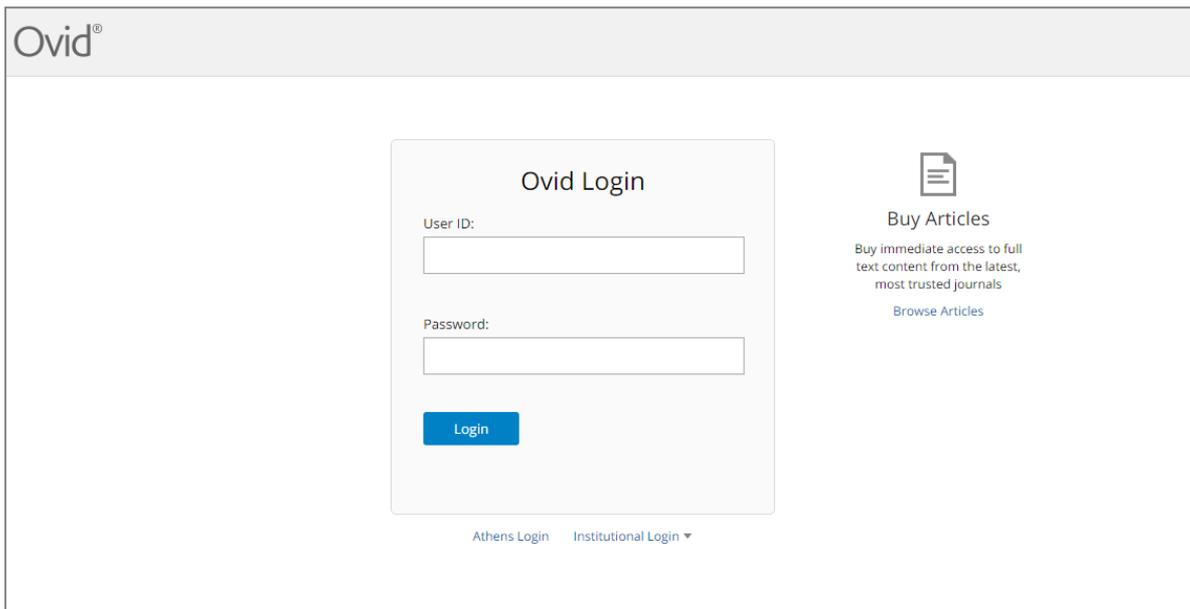
登录Ovid平台

IP地址认证方式直接登录的用户：

- 浏览器直接访问链接 <http://ovidsp.ovid.com/autologin.html>；
- 通过图书馆网页上的链接进入；

用个人账户和密码方式登录的用户：

- 访问链接 <http://ovidsp.ovid.com>，输入用户ID和密码，点击Login登录；



Ovid®

Ovid Login

User ID:

Password:

Login

Athens Login Institutional Login ▾

Buy Articles

Buy immediate access to full text content from the latest, most trusted journals

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登录Ovid平台

其他方式登录的用户：

- 访问链接 <http://ovidsp.ovid.com>，选择您所使用的登录方式

Ovid[®]

Ovid Login

User ID:

Password:

Login

Athens Login Institutional Login ▾

Buy Articles

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- 通过Buy Articles，购买单篇文章。

Ovid平台首页选择您想要检索的资源

The screenshot shows the Ovid platform's search resource selection interface. At the top, the Ovid logo is on the left, and the Wolters Kluwer logo is on the right. Below the logo is a navigation bar with links for 'Search', 'Journals', 'Books', 'Multimedia', 'My Workspace', 'Links', 'OvidMD', and 'EBP Tools'. The main content area is titled 'Select Resource(s) to search:' and contains a list of resources with checkboxes. The resource 'Your Journals@Ovid' is highlighted with a red circle. At the bottom left, the 'OK' button is also highlighted with a red circle. At the bottom right, there are 'Add Group' and 'Delete Group' buttons.

Ovid®

Wolters Kluwer

Top Articles on Ovid®

My Account Support & Training Help Logoff

Search Journals Books Multimedia My Workspace Links OvidMD EBP Tools

Select Resource(s) to search:

- All Resources
 - Books@Ovid September 15, 2015
 - Clinical Evidence
 - Journals@Ovid Full Text September 18, 2015
 - Your Journals@Ovid
 - JWW Journals@Ovid
 - PsycARTICLES Full Text
 - EIRA Journals@Ovid
- Additional Content
- Transplant Library September 09, 2015
- The Joanna Briggs Institute EBP Database - Current to September 16, 2015
- Joanna Briggs Institute EBP Database - Aged Care
- Joanna Briggs Institute EBP Database - Burns Care
- Joanna Briggs Institute EBP Database - Cancer Care
- Joanna Briggs Institute EBP Database - Chronic Disease

OK

Add Group Delete Group

点击TopArticles, 查看全球下载文章排行榜



OvidSP

Select a Month

September 2015

Select a Subject

<All>

Select a Journal

<All>

September 2015 Top Articles

1. I.V. fluids What nurses need to know.

Crawford, Ann; PhD, RN; Harris, Helene; MSN, RN

Nursing

AN: 00152193-201105000-00010

May 2011

2. Focus on central venous pressure monitoring in an acute care setting.

Burchell, Patricia; BSN, RN; Powers, Kelly; BSN, RN

Nursing

AN: 00152193-201112000-00014

December 2011

3. Assessment of Surgical Wounds in the Home Health Patient: Definitions and Accuracy With OASIS-C.

Trexler, Rhonda; BS, RN

Home Healthcare Nurse

AN: 00004045-201110000-00004

October 2011

4. Best Practices in Urinary Catheter Care.

HERTER, REBECCA; KAZER, MEREDITH; WALLACE PHD, APRN

Home Healthcare Nurse

AN: 00004045-201006000-00005

June 2010

5. Assessment of Surgical Wounds in the Home Health Patient: Definitions and Accuracy With OASIS-C.

Trexler, Rhonda; BS, RN

Home Healthcare Nurse

AN: 00004045-201110000-00004

October 2011

点击 了解数据库内容和使用的技巧

Ovid[®]

 Wolters Kluwer

[我的帐户](#) [支持和培训](#) [关闭](#)

Journals@Ovid (OVFT) Database Guide

 | OvidSP

Menu:

- [Fields](#)
- [Stopwords](#)
- [Limits](#)
- [Changing to this Database](#)
- [Producer Information](#)

Database guide last updated November 04, 2009

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Wolters Kluwer Health

Journals@Ovid is the second generation of Ovid Full Text, which combines all the capabilities of Ovid Full Text Collections with several important features and functions. The database is an aggregate of hundreds of scientific, technical, and medical journals from over 50 publishers and societies. While the Ovid Full Text Collections are subsets of journals combined for local access, Journals@Ovid is an aggregated online database of all Ovid journals, with each journal available by individual subscription. Some of the benefits of Journals@Ovid are:

- **Custom Full Text Limit.** With the purchase of any of Ovid's Full Text journals, you gain access to all the bibliographic citations, references, and abstracts in the Journals@Ovid database. You can search the entire database of bibliographic citations, or you can limit your search to the full text journals to which your institution has subscribed.
- **Seamless Linking.** Each Journals@Ovid title is [linked](#) to other Journals@Ovid titles, and to bibliographic databases on Ovid Online such as MEDLINE, CINAHL, and PsycINFO. Bi-directional linking allows you to start your search in a bibliographic database and link to the full text in Journals@Ovid, or link from Journals@Ovid to citations in bibliographic databases. Additionally, you can link from references in an article to other full text articles. Within the Full Text display, hypertext features allow you to display an outline of the document and move immediately to a selected section, and link from cited references in the text to the complete reference.
- **Easy Browsing.** Browsing through journals in Journals@Ovid is easy and intuitive. You can [browse](#) through the journals by title, or by journal subject, where the journals are grouped according to subject areas.
- **Comprehensive Coverage.** We are including additional sections of the print journals in Journals@Ovid, such as [classified advertisements and announcements](#), making the database not only useful for conventional research, but for recreational and professional browsing as well. Journal-specific information is available through [About This Journal](#). This feature provides information such as the publisher-provided journal description, usage statement, and instructions for authors.
- **Limits.** In addition to the [limits](#) already available in Ovid Full Text, Journals@Ovid features a limit to articles with graphics, a limit to one or more journal subsets, and a limit to articles with references.
- **Enhanced Searching.** Because Journals@Ovid is available in 100% SGML, every word of every article in Journals@Ovid is searchable, including references and graphics captions. [Searching the Journals@Ovid Fields](#) describes the searchable fields and provides at least one example for each.

Journals come from many prominent publishers.

When printing a full text article, the default graphic size is full size. The graphic-size option is available through the Full Text Manager at the end of each article. Graphics can be printed in full, medium, or small (thumbnail) size, or omitted entirely.

Ovid平台检索界面将多种检索方式、限制条件、检索历史、以及管理工具等整合在一个界面。

The screenshot displays the Ovid platform search interface. At the top left is the Ovid logo, and at the top right is the Wolters Kluwer logo with navigation links for '我的帐户', '支持和培训', '在线帮助', and '登出'. Below this is a blue navigation bar with tabs for '检索', '期刊', '电子书', '多媒体', '我的工作区', '链接', 'OvidMD', and 'EBP工具'. A '检索历史' (Search History) section shows '(0项检索) (展开)' and a button to '查看已保存的检索历史'. The main search area includes tabs for '基本检索', '常用字段检索', '字段检索', '高级检索', and '多个字段检索'. It features a search input field with a '搜索' button, and options for '1 资源 已选 | 隐藏 | 变更' and 'Your Journals@Ovid'. Below the search field are '常用限制' (展开) options: '包括多媒体' (unchecked) and '包含相关词汇' (checked). At the bottom, a language selection bar is highlighted with a red box, containing options for 'English', 'Français', 'Deutsch', '日本語', '繁體中文', 'Español', '简体中文', and '한국어'. To the right of this bar are links for '关于我们', '联系我们', and '使用条款'. The footer contains copyright information: '© 2015 Ovid Technologies, Inc. 版权所有。 OvidSP_UI03.16.00.110, SourceID 67436'.

运用底部的语种标识，自主切换平台显示语言。

根据研究课题特点，选择合适的检索模式

- 基本检索可用于初步查找某个科研课题或问题，最快速获取最新的文献信息；
- 利用高级检索进行更加全面和精准的查找所有符合条件的结果；
- 多字段检索组合多个字段检索和主题检索；
- 常用字段检索通过常用引文字段定位某篇或某几篇文章
- 字段检索浏览或检索单个、多个或所有字段，更加精准的限定检索部位

以查找2010至2013年出版的有关warfarin treatment for heart failure in men的文章为例

基本检索快速获取初步结果

Ovid®

Wolters Kluwer

我的帐户 支持和培训 在线帮助 登出

检索 期刊 电子书 多媒体 我的工作区 链接

检索历史 (0项检索) (展开)

基本检索 | 常用字段检索 | 字段检索 | 高级检索 | 多个字段检索

1 资源 已选 | 隐藏 | 变更

Your Journals@Ovid

warfarin treatment for heart fa

常用限制 (展开) 包括多媒体 包含

English | Français | Deutsch | 日本語 | 繁體中文 | Español

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基本检索提示

为了更容易使用OvidSP的基本检索功能，请参考以下详细提示以获得最佳的检索结果。

- **输入检索词汇的方式** - 有三种检索方式可以获得最佳检索结果：
 1. **检索词汇组群化**：将检索词汇组合在一起变成可以简洁表达概念的检索主题
 2. **完整句子检索**：以一般日常英文输入一个完整的检索主题或问题。
 3. **复制并贴上文章题名**：混合运用上述一种或两种检索方式。
- **包含相关词汇** - 当勾选“包含相关词汇”，OvidSP会扩展检索所输入的检索词汇，包含同义字，缩写和异体字。
- **检索简洁化** - 例如输入检索主题时排除无关系的形容词。例如：*really big ekg changes in highly advanced hypokalemia*。可以变得更简洁一点，像是：*ekg changes in hypokalemia*。
- **多使用名词而非动词** - 名词可说是一个概念最原始的型态，比较容易被辨识且代表的意义不会含糊不清。相关研究指出在检索时若使用名词作为检索词汇，可以得到质量较佳的检索结果。
- **不强制词组化** - 当使用引号、圆括号或连字符来链接两个检索词汇时，将使无法扩展检索相关的词汇。例如查询*weather related migraine*时，若强制加上一个连字符如*weather-related*，将导致把它当作单一检索词来查询，因此而漏失掉所有关于*weather*这个关键词的所有相关词汇检索结果。
- **勾选“拼字检查”功能** - 在基本检索中使用拼字检查功能可以避免常见的拼字错误。在基本检索中的拼字检查功能会使用英文辞典以及数据库索引典中的所有词汇与检索关键词作匹配确认。

基本检索结果

▼ 检索历史 (1) 查看已保存的检索历史

# ▲	检索内容	结果	检索方式	动作	批注
1	warfarin treatment for heart failure in men {包含相关词汇}	9153	基本	结果显示 更多 ▼	

▼ 检索信息

检索内容:
warfarin treatment for heart failure in men {包含相关词汇}

检索词:
▶ warfarin
warfarin sodium
coumadin
jantoven
treatment
therapeutic aspects
▶ disease management
therapy
therapeutic procedure
therapeutic interventions
therapies
treatments
remedy
relief
amelioration
alleviation
remedies
therapeutic
relieve
ameliorate
alleviate
relieving
alleviating
alleviated
ameliorated
relieved

打印 电子邮件 输出 +我的课题 查看选择

所有 范围 清除已选标记 20 每页 1 开始 > 下一篇 >

1. ★★★★★
Randomized trial of warfarin, aspirin, and clopidogrel in patients with chronic heart failure: the Warfarin and Antiplatelet Therapy in Chronic Heart Failure (WATCH) trial.

摘要数据
完整数据

查询相似文献

Full Text

Massie BM; Collins JF; Ammon SE; Armstrong PW; Cleland JG; Ezekowitz M; Jafri SM; Krol WF; O'Connor CM; Schulman KA; Teo K; Warren SR; WATCH Trial Investigators.
Circulation. 119(12):1616-24, 2009 Mar 31.
[Clinical Trial. Journal Article. Randomized Controlled Trial. Research Support, Non-U.S. Gov't. Research Support, U.S. Gov't, Non-P.H.S.]
UI: 19289640

Title Comment
[Comment in: *Circulation*. 2009 Mar 31;119(12):1559-61; PMID: 19332479 [https://www.ncbi.nlm.nih.gov/pub...]]
[Comment in: *Circulation*. 2009 Nov 17;120(20):e164; PMID: 19917893 [https://www.ncbi.nlm.nih.gov/pub...]]

Authors Full Name
Massie, Barry M; Collins, Joseph F; Ammon, Susan E; Armstrong, Paul W; Cleland, John G F; Ezekowitz, Michael; Jafri, Syed M; Krol, William F; O'Connor, Christopher M; Schulman, Kevin A; Teo, Koon; Warren, Stuart R; WATCH Trial Investigators.

▶ 查看摘要 PDF (按次计费) +我的课题 +批注

OPEN ACCESS RESULTS
Percutaneous Ventricular Restoration Therapy Using the Parachute Device in Chinese Patients with Ischemic Heart Failure
Yang, Yue-Jin Huo, Yong Xu, Ya-Wei Wang, Jian-An Han, Ya-Ling Ge, Jun-Bo Zhang, Rui-Yan Yan,
Straface, Giuseppe
Obstructive Sleep Apnea Hypopnea Syndrome as a Reason for Active Management of Pulmonary Embolism
Xie, Jiang Wei, Yong-Xiang Liu, Shuang Zhang, Wei Zhang, Xiang-Feng Li, Jie
Anesthetic challenges in a pregnant patient with post mitral valve replacement, complete heart block, and

基本检索同时提供开放获取文章的检索结果



高级检索更全面和精准获取结果

- 用概念词细化检索主题，例如:warfarin, heart failure, treatment, male,等
- 数据库是否支持主题词表、检索词是否可以应用主题词，注意主题词自动匹配；
- 步骤化检索，运算符的应用；



检索 全部 Ovid 期刊 我的工作区

▼ 检索历史 (7) 查看已保存的检索历史

# ▲	检索内容	结果	检索方式	动作	批注	收缩 ▲
<input type="checkbox"/>	1 warfarin treatment for heart failure in men {包含相关词汇}	9153	基本	结果显示 更多 ▼	<input type="text"/>	
<input checked="" type="checkbox"/>	2 Heart Failure/	114576	高级	结果显示 更多 ▼	<input type="text"/>	
<input type="checkbox"/>	3 exp Warfarin/	19022	高级	结果显示 更多 ▼	<input type="text"/>	
<input type="checkbox"/>	4 exp Dabigatran/	2952	高级	结果显示 更多 ▼	<input type="text"/>	
<input checked="" type="checkbox"/>	5 3 or 4	21071	高级	结果显示 更多 ▼	<input type="text"/>	
<input type="checkbox"/>	6 2 and 5	294	高级	结果显示 更多 ▼	<input type="text"/>	
<input type="checkbox"/>	7 limit 6 to (yr="2010 - 2013" and male)	46	高级	结果显示 更多 ▼	<input type="text"/>	

保存 移除 合并检索: 与 或

限制功能-与检索同时进行

基本检索 | 常用字段检索 | 字段检索 | 高级检索 | 多个字段检索

1 资源 已选 | 隐藏 | 变更

Your Journals@Ovid

warfarin treatment for heart failure in men

常用限制 (关闭)

包括多媒体

包含相关词汇

常用限制

Daily Update

Articles with References

Original Articles

Publication Year

Ovid Full Text Available

Articles with Graphics

Review Articles

Articles with Abstracts

PsycARTICLES

若需要在下列下拉菜单选择多个项目，持续按着计算机键盘上的Shift键或Ctrl键(或"Apple")，就可以选择或移除多个项目。

Journal Subsets

Alternative & Complementary Medicine
Arts & Humanities
Behavioral & Social Sciences
Clinical Medicine
Health Professions

Star Ranking

***** Five Stars (22)
**** Four Stars (0)
*** Three Stars (512)
** Two Stars (7357)

Publication Types

Advertisements
Announcements
Book or Media Reviews
Corrections
Editorials

Year Published

Last Year
Last 2 Years
Last 3 Years
Last 4 Years
Last 5 Years

限制检索

检索结果工具

 选项

▼ 检索信息

检索内容:
limit 6 to (yr="2010 - 2013" and male)

检索词:
dabigatran
heart
failure
warfarin

搜索返回:
46 个文本结果

排序依据:
-

手动设定显示选项

▼ 过滤方式

 新增到检索历史

仅筛选结果 (0)

▼ 年代

所有年代

Current year

Past 3 years

Past 5 years

▶ 特定年代范围

 打印  电子邮件  输出  + 我的课题  查看选择  要在Ovid上搜索“开放访问”内容, 请转至 [基本检索](#)

所有 范围 清除已选标记 每页 1 [开始](#) [下一篇](#)

1. **Postdischarge international normalized ratio testing and long-term clinical outcomes of patients with heart failure receiving warfarin: findings from the ADHERE registry linked to Medicare claims.** 摘要数据
完整数据

Qualls LG; Greiner MA; Eapen ZJ; Fonarow GC; Mills RM; Klaskala W; Hernandez AF; Curtis LH.
Clinical Cardiology. 36(12):757-65, 2013 Dec.
[Journal Article. Research Support, Non-U.S. Gov't]

UI: 24114926

Authors Full Name
Qualls, Laura G; Greiner, Melissa A; Eapen, Zubin J; Fonarow, Gregg C; Mills, Roger M; Klaskala, Winslow; Hernandez, Adrian F; Curtis, Lesley H.

▶ [查看摘要](#)  + 我的课题  + 批注

2. **Warfarin-induced leukocytoclastic vasculitis: a case report and review of literature. [Review]** 摘要数据
完整数据

Hsu CY; Chen WS; Sung SH.
Internal Medicine. 51(6):601-6, 2012.
[Case Reports. Journal Article. Review]

UI: 22449668

Authors Full Name
Hsu, Chien-Yi; Chen, Wei-Sheng; Sung, Shih-Hsien.

▶ [查看摘要](#)  + 我的课题  + 批注

检索结果工具-检索信息

检索信息

检索内容:
limit 6 to (yr="2010 - 2013" and male)

检索词:
dabigatran
heart
failure
warfarin

搜索返回:
46 个文本结果

排序依据:
-

手动设定显示选项

- 检索信息显示每次检索的具体操作和内容、所使用的词汇和返回结果，以及排序依据；
- 用户个性化设置排序和显示选项

手动设定检索结果显示选项:

选择显示字段

- 题录格式(题名、作者、出处)
- 题录格式 + 摘要
- 题录格式 + 摘要 + 主题词
- 详细题录信息
- 手动设定字段

选择显示格式

Ovid Citation

取消 保存变更

检索结果工具-筛选工具



- 筛选工具可以根据选项对检索结果进行多次快捷筛选；
- 全文期刊库提供相关度、年代、期刊、出版类型的选项；
- 高级检索后的结果没有相关度选项。

例：warfarin treatment for heart failure in men of 2010-2013

我们可通过“特定年代范围”设置出版年份的区间

其他检索模式

基本检索 | 常用字段检索 | 字段检索 | 高级检索 | 多个字段检索

1 资源 已选 | 隐藏 | 变更
① LWW Journals@Ovid

Article Title

Journal Name

Author Surname

Publication Year Volume Issue Article First Page

Publisher

截字检索(自动加上“*”)
 截字检索(自动加上“*”)

常用字段检索通过少量信息找到某篇或某几篇特定文献。

基本检索 | 常用字段检索 | 字段检索 | 高级检索 | 多个字段检索

1 资源 已选 | 隐藏 | 变更
① LWW Journals@Ovid

常用字段 | 所有字段 | 清除选择

af 所有字段 ab: Abstract ct: Caption Text
 tx: Full Text ti: Title

帮助文本
点击加入 (+) 或移出 (-) 将该字段加入或移出“常用字

字段检索浏览和检索任何数据字段，并可进行单独或组合检索。

基本检索 | 常用字段检索 | 字段检索 | 高级检索 | 多个字段检索

1 资源 已选 | 隐藏 | 变更
① LWW Journals@Ovid

与 All Fields
与 All Fields
与 All Fields

+ 新增字段

▸ 常用限制 (展开)

多个字段检索提供便捷的多字段组合检索，建立复杂的检索策略。

Ovid检索结果输出

The screenshot displays the Ovid search results interface. At the top, there are navigation buttons: "所有" (All) is circled in red, along with "打印" (Print), "电子邮件" (Email), and "输出" (Output), which are also highlighted with red boxes. Below these are buttons for "清除已选标记" (Clear selected marks), "查看" (View) with options for "标题" (Title), "题录" (Citation), and "摘要" (Abstract), "10 每页" (10 per page), "开始" (Start), and "下一篇" (Next page).

The main content area is divided into three panels:

- 打印题录列表:** Shows "选择的结果: 1-10". Under "选择显示字段" (Select display fields), options include "题录格式(题名、)" (Citation format (Title,)), "题录格式 + 摘要" (Citation format + Abstract), "题录格式 + 摘要" (Citation format + Abstract), "详细题录信息" (Detailed citation information), and "手动设定字段" (Manually set fields). Under "选择输出格式" (Select output format), "Ovid Citation" is selected. Under "包含" (Include), "检索历史" (Search history) is unchecked.
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This section shows the abstract of the article. The text reads: 'Background—Aspirin use in heart failure (HF) is controversial. The drug has proven benefit in comorbidities associated with HF; however, retrospective analysis of angiotensin-converting enzyme inhibitor trials and prospective comparisons with warfarin have shown increased risk of morbidity with aspirin use. This study aims to evaluate the association of low-dose aspirin with mortality and morbidity risk in a large community-based cohort.'

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Circulation: Heart Failure

卷期: Volume 7(2), March 2014, p 243-250

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关键词: aspirin, heart failure, mortality

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Aspirin Use in Heart Failure: Is Low-Dose Therapy Associated With Mortality and Morbidity Benefits in a Large Community Population?

Birmingham, Margaret PhD; Shanahan, Mary Katherine MPharm; O'Connell, Eoin MLitt; Dawkins, Ian DPhil; Miwa, Saki MB; O'Hanlon, Rory MD; Gilmer, John PhD; McDonald, Kenneth MD; Ledwidge, Mark PhD

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The Data Supplement is available at

<http://circheartfailure.ahajournals.org/lookup/suppl/doi:10.1161/CIRCHEARTFAILURE.113.000132/-/DC1>

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▼ Abstract

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▼ Abstract

Background—: Aspirin use in heart failure (HF) is controversial. The drug has proven benefit in comorbidities associated with HF; however, retrospective analysis of angiotensin-converting enzyme inhibitor trials and prospective comparisons with warfarin have shown increased risk of morbidity with aspirin use. This study aims to evaluate the association of low-dose aspirin with mortality and morbidity risk in a large community-based cohort.

Methods and Results—: This was a retrospective cohort study of patients attending an HF disease management program. Aspirin use at baseline and its association with mortality and HF hospitalization in the population was examined. Of 1476 patients (mean age, 70.4±12.4 years; 63% men), 892 (60.4%) were prescribed aspirin. Low-dose aspirin (75 mg/d) was prescribed to 828 (92.8%) patients. Median follow-up time was 2.6 (0.8–4.5) years. During the follow-up period, 464 (31.4%) patients died. In adjusted analysis, low-dose aspirin use was associated with reduced mortality risk compared with nonaspirin use (hazard ratio=0.58; 95% confidence interval, 0.46–0.74), and this was confirmed by a propensity-matched subgroup analysis. Low-dose aspirin use was associated with reduced risk of HF hospitalization compared with nonaspirin use in the total population (adjusted hazard ratio=0.70; 95% confidence interval, 0.54–0.90). In adjusted analysis, there was no difference in mortality or HF hospitalization between high-dose aspirin users (>75 mg/d) and nonaspirin users.

Conclusions—: In this study, low-dose aspirin therapy was associated with a significant reduction in mortality and morbidity risk during long-term follow-up. These results suggest that low-dose aspirin may have a continuing role in secondary prevention in HF and underline the need for more trials of low-dose aspirin use in HF.

Aspirin use in heart failure (HF) is controversial. The drug has proven benefit in patients with established ischemic heart disease (IHD), a common comorbidity of HF. Aspirin is also recommended in diabetics at high risk of cardiovascular events and as second-line treatment of vascular disorders and atrial fibrillation—all frequently occurring comorbidities in an HF population. However, it has been reported that aspirin use may blunt the beneficial effect of renin-angiotensin-aldosterone system (RAAS) modifying therapy in patients with HF, and several trials have shown increased risk of HF hospitalization when using aspirin. Furthermore, older patients with HF may be at risk of adverse events related to aspirin use especially gastrointestinal hemorrhage.

Editorial see p 237

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大纲

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Results

Patient Demographics

Data were available for 1476 patients with median follow-up time of 2.15 (0.81–4.54) years. Minimum follow-up time was 1 day, and maximum follow-up time was 11.93 years. The mean age of the population was 70.4±12.4 years, and 930 (63.0%) patients returned to baseline to 892 (60.4%) patients.

Of those patients prescribed aspirin, 828 (56.1%) was used by 15 (1.7%) patients and a dose of 81 mg was prescribed concomitantly to 16 patients. Aspirin was prescribed to 248 (27.8%) patients, and triple therapy was prescribed to 15 (1.7%) patients.

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Descriptions of the total population, low-dose aspirin users, high-dose aspirin users, and aspirin nonusers are given in [Table 1](#).

Mortality

A total of 464 (31.4%) patients died during the study. Of these, 30 (46.9%) high-dose aspirin users, and 19 (34.6%) low-dose aspirin users died.

In unadjusted analysis, there was a lower mortality rate in high-dose aspirin users compared with nonaspirin users (hazard ratio [HR]=0.78; 95% CI, 0.59–1.03). In adjusted analysis, low-dose aspirin users had a lower mortality rate compared with nonaspirin users (HR=0.58; 95% CI, 0.41–0.81). In the fully adjusted model including age, sex, BNP, creatinine, heart rate, smoking status, comorbidities, and aspirin use, low-dose aspirin use remained significant (HR=0.58; 95% CI, 0.41–0.81).

In unadjusted analysis, there was no statistically significant difference in mortality between patients with high-dose aspirin use and those with no aspirin use (HR=1.40; 95% CI, 0.95–2.05). In multivariable analysis, there remained no statistically significant difference in mortality between these groups (HR=0.98; 95% CI, 0.59–1.63).

TT1

Characteristic	Total Population (N=1476)	Low-Dose Aspirin Users (n=828)	High-Dose Aspirin Users (n=64)	Aspirin Nonusers (n=584)
Demographics				
Age, y††	70.4±12.4	71.9±11.3	71.9±9.8	68.1±13.8
Male	930 (63.0)	533 (64.4)	40 (62.5)	357 (61.1)
Clinical characteristics				
Systolic blood pressure, mmHg	127.2±39.0	125.9±22.7	130.4±24.3	125.8±21.2
Diastolic blood pressure, mmHg††	73.2±36.7	71.2±13.4	77.0±14.1	72.5±13.3
BNP, pg/mL*	317 (139–668)	352 (157–709)	262 (131–556)	274 (115–598)
Creatinine, μmol/L	103 (87–129)	105 (88–130)	103 (84–141)	101 (85–128)
Ejection fraction, %	40.2±14.5	39.9±14.0	40.2±15.3	40.5±15.1
HFrEF	797 (64.8)	464 (66.9)	37 (63.8)	296 (61.9)
Comorbidities				
Ischemic heart disease*	664 (45.0)	482 (58.2)	27 (42.2)	155 (26.5)
Atrial fibrillation	552 (37.4)	278 (33.6)	21 (32.8)	253 (43.3)
Chronic obstructive pulmonary disease	164 (11.1)	97 (11.7)	6 (9.4)	61 (10.4)
Dyslipidemia*	424 (28.7)	275 (33.2)	23 (35.9)	126 (21.6)
Diabetes mellitus	318 (21.5)	199 (24.0)	15 (23.4)	104 (17.8)
Hypertension	624 (42.3)	376 (45.4)	26 (40.6)	222 (38.0)
Peripheral vascular disease	18 (1.2)	12 (1.4)	0	6 (1.0)
Stroke	47 (3.2)	26 (3.1)	0	21 (3.6)
Medications				
Loop diuretic	1378 (93.3)	783 (94.6)	58 (90.6)	537 (92.0)
ACE inhibitor	1242 (84.1)	699 (84.4)	60 (93.8)	483 (82.7)
Angiotensin receptor blocker	403 (27.3)	217 (26.2)	24 (37.5)	162 (27.7)

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Abstract

Background: Aspirin use in heart failure (HF) is controversial. The drug has proven benefit in comorbidities

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 文件编号: 01337494-201403000-00003
 关键词: aspirin, heart failure, mortality

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TT1

Aspirin Use and Mortality

Birmingham, Miwa, Saki M

单位:

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Characteristic	Total Population (N=1476)	Low-Dose Aspirin Users (n=828)	Hazard Ratio
Demographics			
Age, y††	70.4±12.4	71.9±11.3	
Male	930 (63.0)	533 (64.4)	
Clinical characteristics			
Systolic blood pressure, mmHg	127.2±39.0	125.9±22.7	
Diastolic blood pressure, mmHg‡	73.2±36.7	71.2±13.4	
BNP, pg/mL*	317 (139-668)	352 (157-709)	
Creatinine, μmol/L	103 (87-129)	105 (88-130)	
Ejection fraction, %	40.2±14.5	39.9±14.0	
HFrEF	797 (64.8)	464 (66.9)	
Comorbidities			
Ischemic heart disease*	664 (45.0)	482 (58.2)	
Atrial fibrillation	552 (37.4)	278 (33.6)	
Chronic obstructive pulmonary disease	164 (11.1)	97 (11.7)	
Dyslipidemia*	424 (28.7)	275 (33.2)	
Diabetes mellitus	318 (21.5)	199 (24.0)	
Hypertension	624 (42.3)	376 (45.4)	
Peripheral vascular disease	18 (1.2)	12 (1.4)	
Stroke	47 (3.2)	26 (3.1)	
Medications			
Loop diuretic	1378 (93.3)	783 (94.6)	58 (90.6)
ACE inhibitor	1242 (84.1)	699 (84.4)	60 (93.8)
Angiotensin receptor blocker	403 (27.3)	217 (26.2)	24 (37.5)

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其他链接

4. Aspirin Use in Heart Failure: Is Low-Dose Therapy Associated With Mortality and Morbidity Benefits in a Large Community Population?.

Bermingham, Margaret PhD; Shanahan, Mary Katherine MPharm; O'Connell, Eoin MLitt; Dawkins, Ian DPhil; Miwa, Saki MB; O'Hanlon, Rory MD; Gilmer, John PhD; McDonald, Kenneth MD; Ledwidge, Mark PhD

Circulation: Heart Failure. 7(2):243-250, March 2014.

- Ovid Full Text
- 期刊目录
- 摘要数据
- 完整数据

- 查询相似文献
- 查询引用文献

- Full Text
- Document Delivery
- Bibliographic Links

Aspirin Use in Heart Failure: Is Low-Dose Therapy Associated With Mortality and Morbidity Benefits in a Large Community Population?.

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Circulation: Heart Failure. 7(2):243-250, March 2014.

[Original Articles]

AN: 01337494-201403000-00003.

查找引用了该篇文章的文献

浏览2项检索结果的第1-2项

1. Aspirin in the perioperative period: a review of the recent literature.

Kiberd, Mathew B.; Hall, Richard I.

Current Opinion in Anaesthesiology. 28(3):349-355, June 2015.

[ANESTHESIA AND MEDICAL DISEASE: Edited by Natalie F. Holt]

AN: 00001503-201506000-00020.

▶ æYçæè!

• Bibliographic Links

筛选检索结果

新增到检索历史

PDF (72891KB) + 我的课题 + 批注

期刊浏览

Ovid®

Wolters Kluwer

我的帐户  Ask a Librarian 支持和培训 在线帮助  反馈 登出

Top Articles
on OvidSP 

检索 **期刊** 电子书 多媒体 我的工作区 移动应用

期刊名称 

常用字段检索

▶ 依订阅状态筛选

▶ 依刊名筛选

▶ 依主题筛选

▶ 我的最爱

期刊字顺排序

1-50本书中的第546 期刊



50 每页

◀ 1 2 3 4 5 ... 11 ▶

[A&A Case Reports](#)

[关于](#) |  My Favorites

[A&A Practice](#)

[关于](#) |  My Favorites

[AACN Advanced Critical Care](#)

[关于](#) |  My Favorites

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[ACSM'S Health & Fitness Journal](#)

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[Addictive Disorders & Their Treatment](#)

[关于](#) |  My Favorites

期刊浏览—显示页面

The screenshot displays the Ovid journal browsing interface. At the top, the Ovid logo is on the left, and navigation links for '我的帐户', 'Ask a Librarian', '支持和培训', '在线帮助', '反馈', and '登出' are on the right. A 'Wolters Kluwer' logo and 'Top Articles on OvidSP' are also present. A blue navigation bar contains '检索', '期刊', '电子书', '多媒体', '我的工作区', and '移动应用'. On the left, a search box with '期刊名称' and '常用字段检索' is highlighted with a red box. Below it are filter options: '依订阅状态筛选', '依刊名筛选', '依主题筛选', and '我的最爱'. The main content area is titled '期刊字顺排序' and shows '1-50本书中的第546 期刊'. A pagination bar with '50 每页' is highlighted with a red box. The first journal entry, 'A&A Case Reports', is highlighted with a red box and includes links for '订阅全文', 'Publish Ahead of Print Available', '关于', '我的最爱', 'RSS', and 'eTOC'. The second entry, 'A&A Practice', and the third entry, 'AACN Advanced Critical Care', are also visible.

单刊浏览

输入关键词

所有卷期

检索

高

级检索

期刊信息

Lippincott Williams & Wilkins, Inc.

Academic Medicine (1961, 1989-2018)

ISSN: 1040-2446

关于本期刊

前任出版社:

Journal of Medical Education

(1951-1988)

ISSN: 0022-2577

卷期列表

2018 (6)

Publish Ahead of Print



隐藏封面

Academic Medicine

Volume 93(4) pgs. 513-666 April 2018

ISSN: 1040-2446

(C) 2018 by the Association of American Medical Colleges

RSS

eTOC

电邮链接网址



选择页 | 清除已选标记

范围

显示摘要

50 每页

Moving From Professionalism to Empowerment: Taking a Hard Look at Resident Hours.

页数 513-515

DOI : 10.1097/ACM.0000000000002111

Sklar, David P. MD

Miscellaneous

PDF全文 | + 我的课题

Ovid Full Text
完整数据

Library Holdings
Request Permissions

Accessing Electronic Health Records: A Misperception Corrected.

页数 516

DOI : 10.1097/ACM.0000000000002106

Hammoud, Maya M. MD, MBA; Beck Dallaghan, Gary L. PhD; Morgenstern, Bruce Z. MD

Letter

PDF全文 | + 我的课题

Ovid Full Text
完整数据

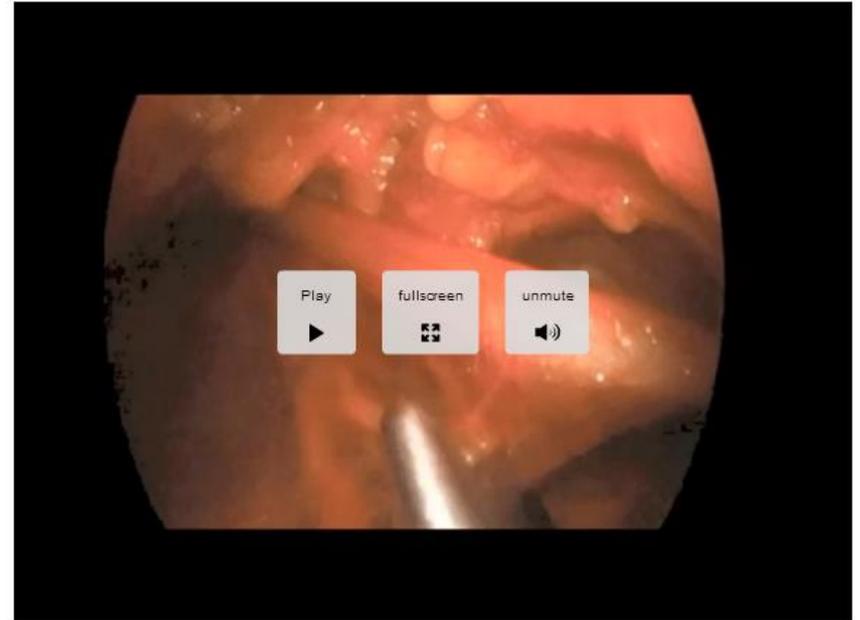
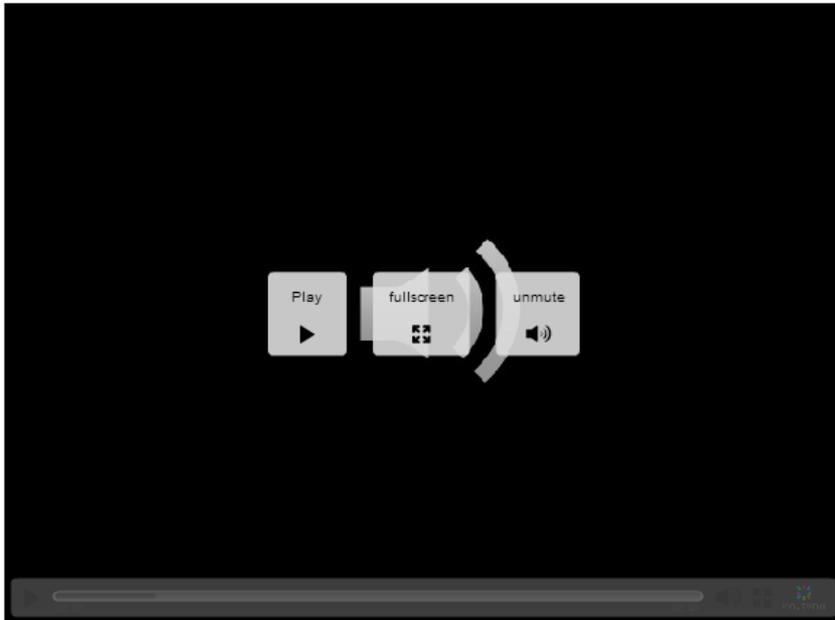
Library Holdings
Request Permissions

Ovid平台上的多媒体资源



丰富的多媒体资源

Ovid平台提供丰富的多媒体资源，包含视频、音频、图片、图表、动画等；并将其与期刊、图书的书目和全文信息全面集成，进行一体化检索和浏览。



多媒体检索

The screenshot shows the Ovid search interface. At the top, there is the Ovid logo and the Wolters Kluwer logo. Below the logo, there are navigation links: 我的帐户, 支持和培训, 在线帮助, 登出. A blue navigation bar contains: 检索, 期刊, 电子书, 多媒体, 我的工作区, 链接, OvidMD, EBP工具. Below this is a search history section with a button to view saved history. The main search area has tabs for: 基本检索, 常用字段检索, 字段检索, 高级检索, 多个字段检索. Below the tabs, it shows 1 resource selected, with options to hide or change. The search term 'Heart disease' is entered in a search box, with a search button. Below the search box, there are filter options: 常用限制 (展开), 包含多媒体 (checked), and 包含相关词汇 (checked). At the bottom, there are language options: English, Français, Deutsch, 日本語, 繁體中文, Español, 简体中文, 한국어. There are also links for 关于我们, 联系我们, and 使用条款. The footer contains copyright information: © 2015 Ovid Technologies, Inc. 版权所有。 OvidSP_UI03.16.00.110, SourceID 67436.

- 基本检索和高级检索都可进行多媒体检索；
- 自然语言检索、包含相关词汇、主题词自动匹配、截词符、布尔运算符等都可以应用于多媒体检索；
- 勾选“包含多媒体”选项

文本和多媒体检索结果一体化显示

点击多媒体结果，查看对应的多媒体资源。

The screenshot displays the Ovid search interface. At the top, there are navigation tabs: 检索 (Search), 期刊 (Journals), 电子书 (E-books), 多媒体 (Multimedia), 我的工作区 (My workspace), 链接 (Links), OvidMD, and EBP工具 (EBP tools). Below this is a search history section showing one search for 'heart disease'. The main search area includes a search bar with 'heart disease' and a search button. There are also checkboxes for '包括多媒体' (Include multimedia) and '包含相关词汇' (Include related terms). The results section shows a list of search results. The first result is 'Ischaemic heart disease - a selected review of recent developments.' by George, Sudhakar a; Calvert, Patrick A. a,b. This result is highlighted with a red box. To the right of the result, there are links for 'Ovid Full Text', '期刊目录' (Journal list), '摘要数据' (Abstract data), and '完整数据' (Full data). Below these links, there are options for '查询相似文献' (Search similar literature) and '查询引用文献' (Search cited literature). On the far right, there is a section for 'OPEN ACCESS RESULTS' with a list of related articles, including 'Estimation of 10-Year Risk of Coronary Heart Disease in Nepalese Patients with Type 2 Diabetes' and 'Profile and Correlates of Health-related Quality of Life in Chinese Patients with Coronary Heart Disease'. The interface also includes a sidebar with '检索结果工具' (Search result tools) and '查看方式' (Viewing methods) options. The '查看方式' section has '文本 (14263 结果)' (Text (14263 results)) and '多媒体 (11379 结果)' (Multimedia (11379 results)) options, with the latter highlighted by a red box. There is also a 'OvidSP 多媒体结果' (OvidSP Multimedia results) section with a '查看多媒体结果 >' (View multimedia results >) link, also highlighted by a red box.

多媒体筛选工具

Ovid设置专门的筛选工具对多媒体结果进行进一步的精炼，如出版类型、持续时间、媒体类型。

The screenshot displays the Ovid search interface with a sidebar on the left and a main content area on the right. The sidebar includes a '手动设定显示选项' (Manual display options) section with a '筛选检索结果' (Filter search results) dropdown. Below this, there is a '新增到检索历史' (Add to search history) button and a '+ 仅筛选结果 (0)' (Only filtered results) section. This section contains several filter categories: '相关性' (Relevance) with options like '5 stars only', '4 or more', '3 or more', and '2 or more'; '年代' (Year); '作者' (Author); '期刊' (Journal); '出版类型' (Publication type); '持续时间' (Duration); '媒体类型' (Media type); and '主题/类别' (Topic/Category). The '我的课题' (My topics) section at the bottom of the sidebar shows '没有课题可使用。' (No topics available) and a '+ 新课题' (New topic) button.

The main content area shows search results for 'prognosis of ischemic heart disease: the cardiac magnetic resonance.' The results are filtered by '出版类型' (Publication type) and '持续时间' (Duration). The '出版类型' filter is expanded, showing options: 'Image', 'Article', 'Miscellaneous Article', 'Review', 'Abstract', and '更多...' (More...). The '持续时间' filter is also expanded, showing options: 'Short (0-4 min.)', 'Medium (4-20 min.)', and 'Long (20+ min.)'. The '媒体类型' (Media type) filter is expanded, showing options: 'video', 'image', and 'audio'. The search results are displayed in a list format, with each result having a checkbox and a '相关' (Relevant) label. The first result is '3. 相关性' and the second is '4. 相关性'. The search results are also displayed in a grid format, with each result having a '查找相关媒体' (Find related media) button, a '+ 我的课题' (Add to my topics) button, and a '+ 批注' (Add comment) button. The search results are also displayed in a list format, with each result having a '查找相关媒体' (Find related media) button, a '+ 我的课题' (Add to my topics) button, and a '+ 批注' (Add comment) button. The search results are also displayed in a list format, with each result having a '查找相关媒体' (Find related media) button, a '+ 我的课题' (Add to my topics) button, and a '+ 批注' (Add comment) button.

多媒体结果页面

检索结果工具 选项

查看方式

文本 (14263 结果)
多媒体 (11379 结果)

检索信息

检索内容:
heart disease {包含有限的相关词汇}
- 检索词:
heart disease
heart diseases
disorder of heart
morbus cordis
cardiac disorder
cardiopathy
heart disorder
diseases heart
diseases cardiac
disease heart
disease cardiac
cardiac disorders

搜索返回:
11379 个多媒体结果

排序依据:
太多结果无法排序。

手动设定显示选项

筛选检索结果

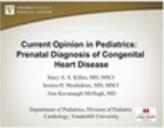
新增到检索历史

所有 范围

打印 电子邮件 输出 新增到我的课题

清除已选标记 查看: 题录 网格 10 每页 1 开始 下一篇

相关性: ★★★★★

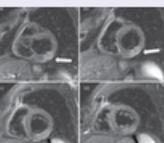
1.  26(5) ? October 2014 - Pediatric prenatal diagnosis of congenital heart disease. VANDERBILT UNIVERSITY MEDICAL CENTER
Journal Current Opinion in Pediatrics
AN: 2C0EB4E4-6910-43F6-B694-34F75204D0A7

26(5) ? October 2014 - Pe ...
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2.  Diagnosis and prognosis of ischemic heart disease: the framework of cardiac magnetic resonance.
Guaricci, Andrea Igores a; Brunetti, Natale Daniele a; Marra, MartinaPerazzolo b; Tarantini, Giuseppe b; di Biase, Matteo a; Pontone, Gianluca c
Journal Journal of Cardiovascular Medicine
AN: 01244665-201510000-00001-FF2

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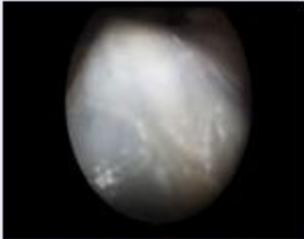
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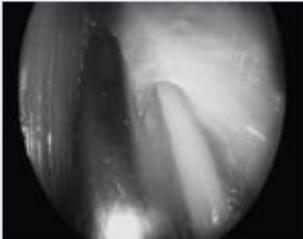
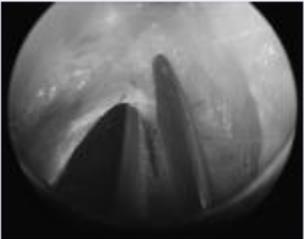
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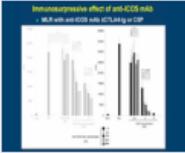
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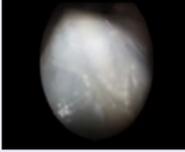
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Introduction by Dr's Storb and Graves on article published in July 15 issue
Sato, Masahiko 1; Storb, Rainer 1,2; Loretz, Carol 1; Stone, Diane 1; Mielcarek, Marco 1,2; Sale, George E. 1,3; Rezvani, Andrew R. 1; Graves, Scott S. 1,2,4
Journal Transplantation
AN: 51F92AE6-CC2A-4898-875B-39D68ECAB1EB
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持续时间: 4:50 min.
Video

2. 
Distal ulnar nerve release
Morse, Levi P. MBMS (Hons), BPhy *; McGuire, Duncan T. MBChB, FC Ortho, MMed +; Bain, Gregory I. MBBS, FRACS, FA (Ortho) A, PhD ++
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The screenshot shows the Ovid platform interface with a modal form for creating a personal account. The form is titled '创建个人帐户' and contains the following fields:

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At the bottom of the form is a blue button labeled '创建'. The background shows the Ovid logo and navigation links like '我的帐户', '支持和培训', '在线帮助', '反馈', and '登出'.

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名称 ▲	项目	变更
创建新课题		

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Circulation: Heart Failure
 卷期: Volume 7(2), March 2014, p 243-250
 版权: (C) 2014 American Heart Association, Inc.
 出版类型: [Original Articles]
 DOI: 10.1161/CIRCHEARTFAILURE.113.000132
 ISSN: 1941-3289

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Aspirin Use Mortality a
 Birmingham, Mar
 MB; O'Hanlon, Ro

▼ 单位:
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 School of Medicin
 of Medicine, Univ
 Blackrock Clinic,
 College, Dublin, I
 The Data Supple
 http://circhearta
 .
 Correspondence:
 E-mail
 mark@heartbeat

▼ Abstract

Characteristic	Total Population (N=1476)
Demographics	
Age, y *†	70.4±12.4
Male	930 (63.0)
Clinical characteristics	
Systolic blood pressure, mm Hg	127.2±39.0
Diastolic blood pressure, mm Hg†‡	73.2±36.7
BNP, pg/mL*	317 (139-668)
Creatinine, μmol/L	103 (87-129)
Ejection fraction, %	40.2±14.5
HFrEF	797 (64.8)
Comorbidities	
Ischemic heart disease*	664 (45.0)
Atrial fibrillation	552 (37.4)
Chronic obstructive pulmonary disease	164 (11.1)
Dyslipidemia*	424 (28.7)
Diabetes mellitus	318 (21.5)
Hypertension	624 (42.3)
Peripheral vascular disease	18 (1.2)
Stroke	47 (3.2)
Medications	
Loop diuretic	1378 (93.3)
ACE inhibitor	1242 (84.1)
Angiotensin receptor blocker	403 (27.3)

Subluxating ul
 Author: Morse,
 FRACS, FA (Ort
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 Community Population?
 ahnan, Mary Katherine MPharm; O'Connell,
 va, Saki MB; O'Hanlon, Rory MD; Gilmer, John
 widge, Mark PhD
 43-250, March 2014.

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 to me. Peak flow is only 65%. Getting worse.*

100 Cases for Me
 Howlett, David C; Gair
 CRC Press, 2013
 ISBN: 978-1-44414-90

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相关性: ★★★★★

7. Dilated Cardiomyopathy and
 Abdo, Ashraf S. MD; Kemp, R
 Stephen A. MD
 American Journal of the Medi

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aspirin and heart dis...	无此项目	2015-Sep-23
Parasite and gene	3	2015-Sep-23

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aims to evaluate the association of low-dose aspirin with mortality and morbidity risk in a large community-based cohort.

Methods and Results-: This was a retrospective cohort study of patients attending an HF disease management program. Aspirin use at baseline and its association with mortality and HF hospitalization in the population was examined. Of 1476 patients (mean age, 70.4+/-12.4 years; 63% men), 892 (60.4%) were prescribed aspirin. Low-dose aspirin (75 mg/d) was prescribed to 828 (92.8%) patients. Median follow-up time was 2.6 (0.8-4.5) years. During the follow-up period, 464 (31.4%) patients died. In adjusted analysis, low-dose aspirin use was associated with reduced mortality risk compared with nonaspirin use (hazard ratio=0.58; 95% confidence interval, 0.46-0.74), and this was confirmed by a propensity-matched subgroup analysis. Low-dose aspirin use was associated with reduced risk of HF hospitalization compared with nonaspirin use in the total population (adjusted hazard ratio=0.70; 95% confidence interval, 0.54-0.90). In adjusted analysis, there was no difference in mortality or HF hospitalization between high-dose aspirin users (>75 mg/d) and nonaspirin users.

Aspirin Use in Heart Failure: Is Low-Dose Therapeutic? Mortality and Morbidity Benefits in a Large Cohort

Bermingham, Margaret PhD; Shanahan, Mary Katherine MPharm; O'Connell, MB; O'Hanlon, Rory MD; Gilmer, John PhD; McDonald, Kenneth MD; Ledwith, Kenneth MD

▼ **单位:**
From the Heart Failure Unit, St. Vincent's University Hospital, Dublin, School of Medicine and Medical Science, University College Dublin, Department of Medicine, University College Cork, Cork, Ireland (S.M.); Centre for Blackrock Clinic, County Dublin, Ireland (R.O.); and School of Pharmacy, University College, Dublin, Ireland (J.G.).
The Data Supplement is available at <http://circheartfailure.ahajournals.org/lookup/suppl/doi:10.1161/CIRCHEARTFAILURE.113.000000>.

Correspondence to Mark Ledwith, PhD, Heart Failure Unit, St. Vincent's University Hospital, Dublin, Ireland.
E-mail mark@heartbeat-trust.org

▼ **Abstract**

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Background-: Aspirin use in heart failure (HF) is controversial. The drug has proven benefit in comorbidities associated with HF;

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Cc:

Subject: 定题 AutoAlert: drugs for hepatitis

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Accession Number
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Author
Luczkowiak, Joanna MSc 1; Martinez-Prats, Lorena MSc 1; Sierra, Olalla 1; Fiorante, Silvana MD 2; Rubio, Rafael MD 2; Pulido, Federico MD 2; Otero, Joaquin R. MD 1; Delgado, Rafael MD 1 Institution
(1)Laboratory of Molecular Microbiology, Hospital Universitario 12 de Octubre, Madrid, Spain
(2)HIV Unit, Hospital Universitario 12 de Octubre, Madrid, Spain Title
Lack of the detection of XMRV or Polytopic MLV-related sequences in blood cells from HIV-1 infected patients in Spain.[Article] Source
JAIDS Journal of Acquired Immune Deficiency Syndromes.

Status
Publish Ahead of Print, POST ACCEPTANCE, 29 September 2011 Abstract
Background: Xenotropic murine leukemia virus-related virus (XMRV) and polytopic MLV-related virus are recently described human gammaretroviruses that have been associated with prostate cancer and chronic fatigue syndrome (CFS). These studies have been controversial since a number of laboratories have been unable to find evidence of XMRV in similar groups of patients or controls. Since the existence of XMRV raises many questions, we decided to study its presence in a group of patients infected with HIV-1 with a high proportion of intravenous drug use (IDU) and co-infection by HCV.

(C) 2011 Lippincott Williams & Wilkins, Inc.
DOI Number
10.1097/QAI.0b013e318238b596

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Author
Mayer, Kenneth H. MD 1; Ducharme, Robert BA 2; Zaller, Nickolas PhD 3; Chan, Philip A. MD 4; Case, Patricia ScD 5; Abbott, David 6; Irma, Rodriguez MS 7; Cavanaugh, Timothy MD 8 Institution
(1)The Fenway Institute, The Miriam Hospital, Beth Israel Deaconess Medical Center, Harvard Medical School
(2)The Miriam Hospital

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The screenshot displays the Ovid journal subscription service interface. The top navigation bar includes the Ovid logo, user account options (我的帐户, Ask a Librarian, 支持和培训, 在线帮助, 反馈, 登出), and a 'Top Articles on OvidSP' badge. The main content area is titled '期刊字顺排序' (Journal Alphabetical Sort) and shows a list of journals. The first journal, 'A&A Case Reports', is highlighted with a red box around its 'Publish Ahead of Print Available' status and the '关于', '我的最爱', 'RSS', and 'eTOC' links. The second journal, 'A&A Practice', and the third, 'AACN Advanced Critical Care', are also visible with their respective details and links.

期刊字顺排序

1-50本书中的第546 期刊

50 每页

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