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BASE DE DATOS HINARI

- Es un programa establecido por la Organización Mundial de la Salud (OMS) junto a las mayores editoriales del mundo, que facilita el acceso de los países en vías de desarrollo a una de las más extensas **colecciones de literatura biomédica y de salud**. Están disponibles más de 7124 revistas para instituciones de salud en 113 países a un precio adquisitivo.
- Su **objetivo** es permitir el acceso al mayor número de revistas de biomedicina y otros.

Primeramente acceder a la **Biblioteca Virtual de Salud de Cuba** y activar el enlace de **Hinari**

The screenshot shows the homepage of the Biblioteca Virtual en Salud CUBA. The header includes the 'infomed' logo, the 'Cuba bvs' logo, and the text 'Biblioteca Virtual en Salud CUBA'. There are also logos for BIREME, OPS, and OMS, and a 'Contacto' link. The main content area is divided into several sections:

- AYUDA:** Includes a 'CENTRO DE AYUDA' icon.
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- RED BVS EN CUBA:** Lists Cuban BVS networks like Centro Nacional de Información de Ciencias Médicas and Consejo Nacional de.
- BUSCADOR BVS:** A search bar with a magnifying glass icon, a 'Buscar' button, and dropdown menus for 'Todos los índices' and 'BVS Cuba'.
- FUENTES DE INFORMACIÓN:** A section titled 'ACCESO A TEXTOS COMPLETOS' containing lists of scientific journals, Cuban authors' books, reference works, and document repositories.
- DESTACADOS:** A section featuring a 'HINARI ACCESS TO RESEARCH' banner and a 'SUSCRIPCION POR RSS' button.
- NOVEDADES:** A section with news items, including 'Distribución de la producción científica cubana en salud registrada en Scopus y PubMed en 2011, según instituciones 18 febrero, 2013 ...' and 'III Muestra Internacional del Audiovisual en Ciencias de la Salud 14 febrero, 2013'.

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Christopher P. Landrigan, Theodore C. Sectish, and the I-PASS Study Group
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Tammy Chung, Gregory T. Smith, John E. Donovan, Michael Windle, Vivian B. Faden, Chiung M. Chen, and Christopher S. Martin

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Article

Drinking Frequency as a Brief Screen for Adolescent Alcohol Problems

Tammy Chung, PhD^a, Gregory T. Smith, PhD^b, John E. Donovan, PhD^a, Michael Windle, PhD^c, Vivian B. Faden, PhD^d, Chiung M. Chen, MA^e, and Christopher S. Martin, PhD^a

Author Affiliations

ABSTRACT

OBJECTIVE: Routine alcohol screening of adolescents in pediatric settings is recommended, and could be facilitated by a very brief empirically validated alcohol screen based on alcohol consumption. This study used national sample data to test the screening performance of 3 alcohol consumption items (ie, frequency of use in the past year, quantity per occasion, frequency of heavy episodic drinking) in identifying youth with alcohol-related problems.

METHODS: Data were from youth aged 12 to 18 participating in the annual National Survey on Drug Use and Health from 2000 to 2007. The screening performance of 3 alcohol consumption items was tested, by age and gender, against 2 outcomes: any Diagnostic and Statistical Manual, Fourth Edition alcohol use disorder symptom ("moderate"-risk outcome), and a diagnosis of Diagnostic and Statistical Manual, Fourth Edition alcohol dependence ("high"-risk outcome).

RESULTS: Prevalence of the 2 outcomes increased with age; any alcohol use disorder symptom ranged from 1.4% to 29.2%; alcohol dependence ranged from 0.2% to 5.3%. Frequency of drinking had higher sensitivity and specificity in identifying both outcomes, compared with quantity per occasion and heavy episodic drinking frequency. For both outcomes, results indicate the utility of similar cut points for drinking frequency for males and females at each age. Age-specific frequency cut points, however, are recommended for both moderate- and high-risk outcomes to maximize screening performance.

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Valproic Acid
Topiramate
Levetiracetam
Pyridoxine
Ketogenic Diet
Corticosteroids,
Adrenocorticotrophic Hormone, and
Plasmapheresis
Hypothermia
Electroconvulsive Therapy
Surgery
Other Treatment Issues: Delay in
Treatment
Other Treatment Issues: Titration
Goals and Duration
Other Treatment Issues: Weaning
of Coma-Inducing Medications
Importance of Seizures on
Outcome
Issues for Further Study
Protocol Suggestions
Table 1
Questions

Pediatric Neurology
Volume 38, Issue 6, June 2008, Pages 377–390

Review article

Treatment of Refractory Status Epilepticus: Literature Review and a Proposed Protocol

Nicholas S. Abend, MD^{a,1}, , Daniel A. Shinn, MD, MSCE^{a,1}

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¹ Department of Neurology, University of Pennsylvania School of Medicine, Philadelphia, Pennsylvania.

<http://dx.doi.org/10.1016/j.pediatrneurol.2008.01.001>, How to Cite or Link Using DOI

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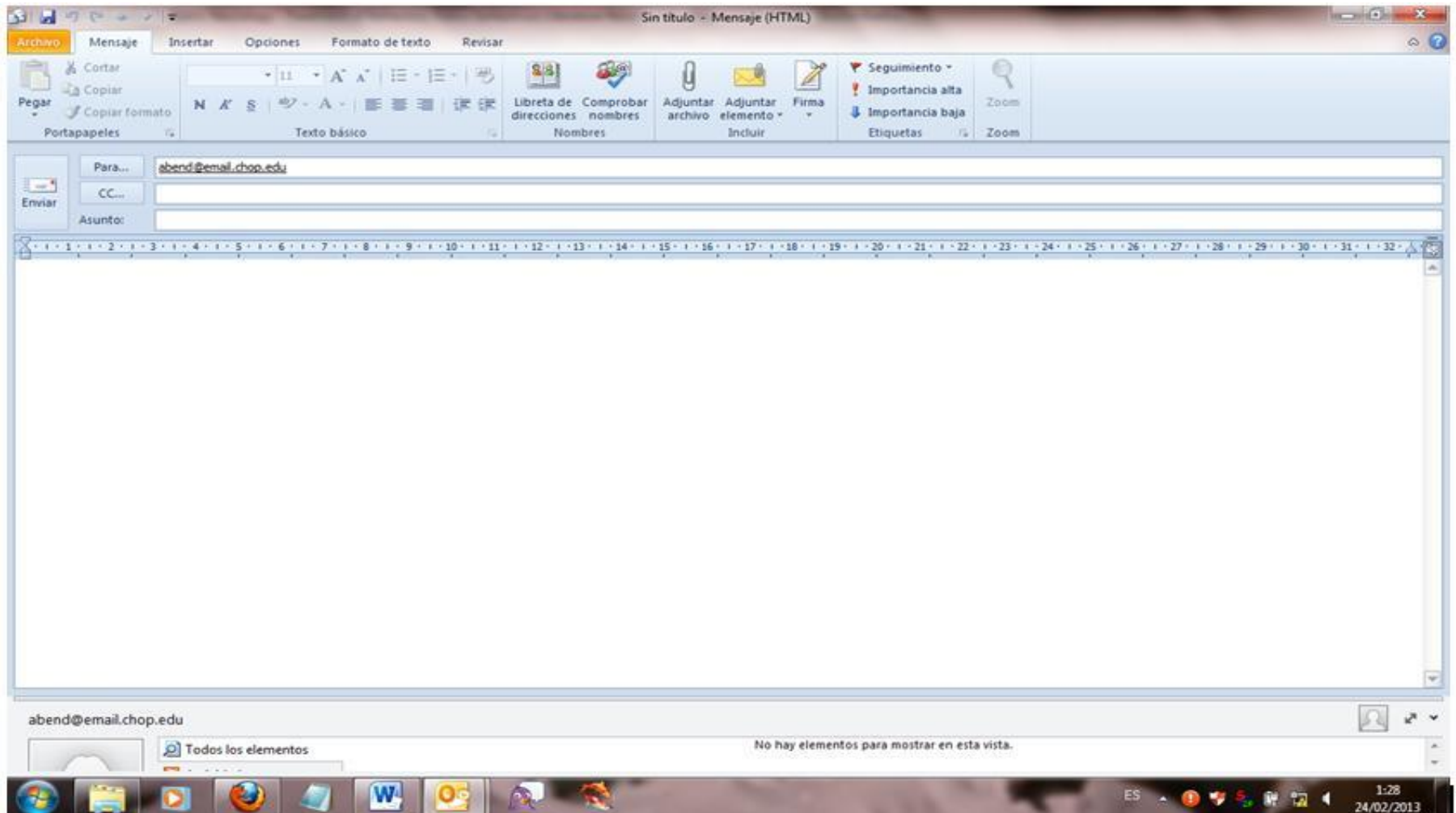
Refractory status epilepticus describes continuing seizures despite adequate initial pharmacologic treatment. This situation is common in children, but few data are available to guide management. We review the literature related to the pharmacologic treatment and overall management of refractory status epilepticus, including midazolam, pentobarbital, phenobarbital, propofol, inhaled anesthetics, ketamine, valproic acid, topiramate, levetiracetam, pyridoxine, corticosteroids, the ketogenic diet, and electroconvulsive therapy. Based on the available data, we present a sample treatment algorithm that emphasizes the need for rapid

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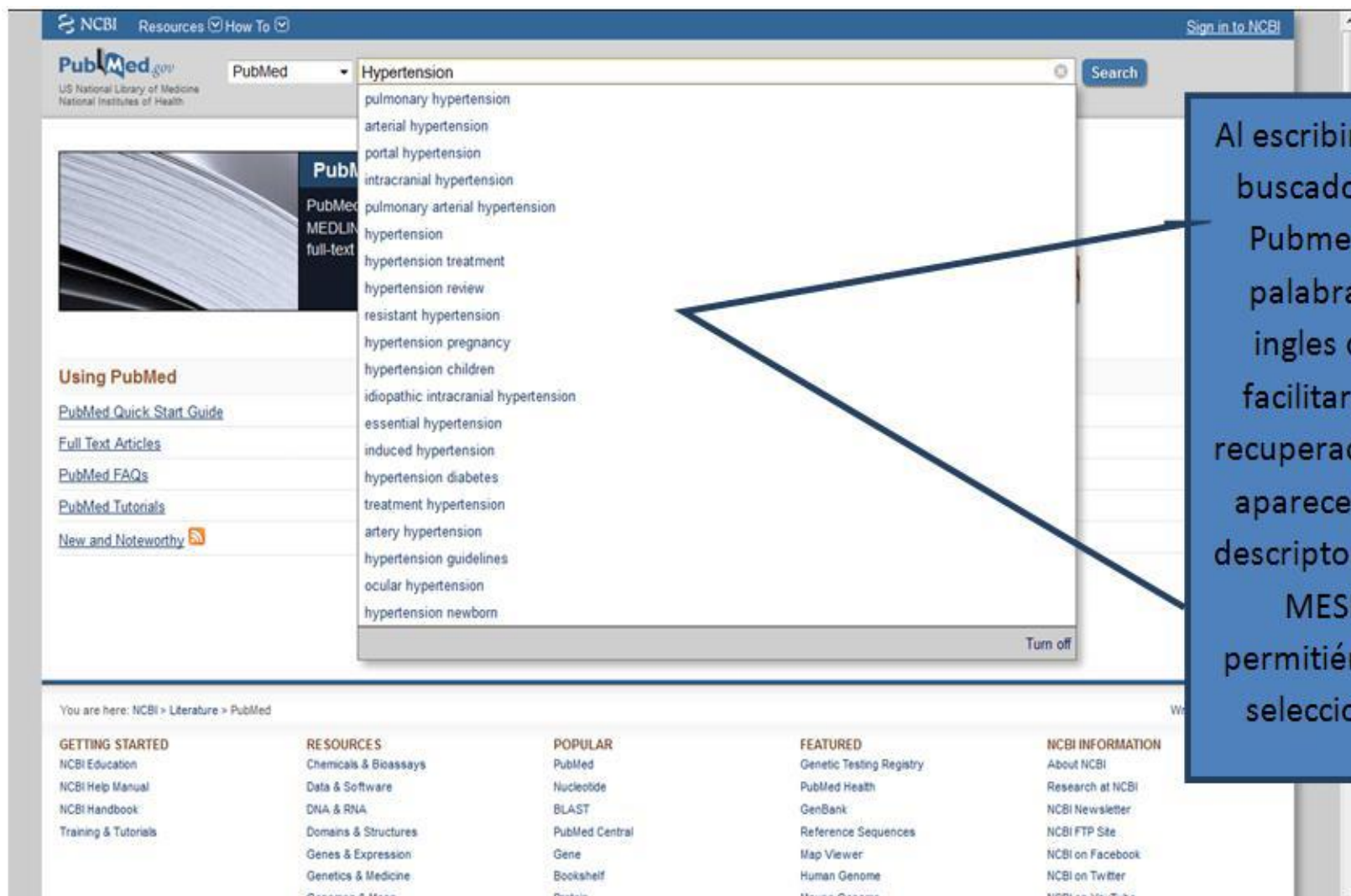
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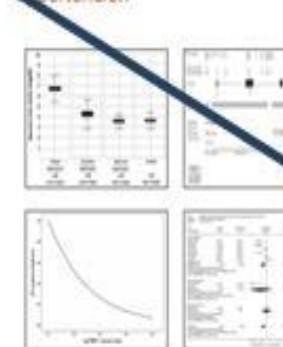
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Association of higher resistin levels with inflammatory activation and endothelial dysfunction in patients with essential hypertension

FANG Chang, LEI Juan, ZHOU Shu-xian, ZHANG Yu-ling, YUAN Gui-yi, WANG Jing-feng

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Correspondence to: **ZHOU Shu-xian** Division of Cardiology, Department of Internal Medicine, and Guangdong Province Key Laboratory of Arrhythmia and Electrophysiology, Sun Yat-sen Memorial Hospital, Sun Yat-sen University, Guangzhou, Guangdong 510120, China (Tel:86-20-81332475 Fax:zzhoushuxian@yahoo.com.cn Email:86-20-81332360)

Keywords: *hypertension-resistin-inflammatory factor-endothelial function*

Abstract:

Background Some studies have shown that serum resistin levels increase in hypertensive patients. Whether the increase of resistin is related to inflammatory or vascular endothelial function is still unknown. We investigated the relationship of increased resistin levels to inflammatory factors and circulating biomarkers of vascular endothelial function in hypertensive patients.

Methods One hundred and forty-four nondiabetic patients with new onset, hypertension were recruited. Blood pressure, blood glucose, insulin, resistin, tumour necrosis factor- α (TNF- α), interleukin-6 (IL-6), von Willebrand factor (vWF), endothelin-1 (ET-1) and nitric oxide (NO) were measured. The homeostasis model assessment, insulin resistance index (HOMA-IR) was calculated. Patients were divided into two groups according to the median level of resistin. Cytokine levels and indicators of vascular endothelial function were compared. Multiple linear

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