BOLETIM INFORMATIVO DE PERIÓDICOS CIENTÍFICOS DAS BIBLIOTECAS DO CENTRO UNIVERSITÁRIO SÃO CAMILO - SP

BIBLIO CONNECT

ANO 03, N. 15 - FEVEREIRO 2024

EXPEDIENTE

EDITORIAL

Prezado leitor, é com muito orgulho que apresentamos a 15ª edição do Boletim Informativo de Periódicos Científicos das Bibliotecas do Centro Universitário São Camilo - SP, cujo objetivo é divulgar artigos científicos dos periódicos assinados pela Instituição.

Nessa edição, selecionamos artigos considerando as datas de conscientização da saúde, o Dia Mundial das Doenças Raras e o Dia Mundial do Rim. Todos os artigos abordam questões relacionadas às áreas temáticas dos cursos ofertados. Aqui, você também encontrará publicações de docentes da Instituição e temas da atualidade.

No Podcast, convidamos a colaboradora camiliana Mônica Abel, secretária geral da Instituição, para um bate-papo sobre Mulheres na Gestão Educacional.

Se você se interessar por algum artigo, clique no link disponível e será direcionado à página da Biblioteca, em que preencherá o formulário de solicitação e o arquivo será enviado por e-mail em até 48 horas. Lembrando que o acesso aos artigos é destinado a toda comunidade acadêmica: docentes, discentes e colaboradores.

Na coluna "Dicas para elaboração de trabalhos acadêmicos", divulgamos o Guia do Ingressante - Uma visita à Biblioteca, onde todos os alunos terão conhecimento dos produtos e serviços ofertados na Biblioteca.

Outro destaque dessa edição é a divulgação da base de dados UPTODATE. Essa base é assinada pelo Centro Universitário São Camilo e está disponível para toda a comunidade acadêmica através de login e senha. O UPTODATE é uma base de informações médicas, baseada em evidências, revisada por pares, perfeita para o dia a dia dos profissionais da saúde. Ela responde dúvidas clínicas, aumenta o conhecimento clínico e melhora o cuidado com o paciente.

Siga a Biblioteca nas redes sociais e fique por dentro de todas as atividades que realizamos: cursos, dicas, divulgações dos artigos científicos atuais e muito mais.

Esperamos que essa publicação contribua para análise e conhecimento sobre os temas apresentados.

A todos, uma ótima leitura!

Comissão do Boletim Informativo das Bibliotecas São Camilo - SP

ON AIR

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POD CAST #5 DO BIBLIO CONNECT

É só dar o play e conferir a edição completa do nosso podcast #5!

Nesta edição convidamos a Mônica Abel, secretária geral da Instituição, para uma conversa sobre Mulheres na Gestão Educacional.

O Dia Mundial das Doenças Raras é uma data oficial da campanha de sensibilização para as doenças raras, que acontece no último dia de fevereiro de cada ano. As comemorações acontecem desde 2008, com o objetivo de conscientizar o público em geral e os tomadores de decisão sobre o impacto desses agravos na vida dos pacientes, de suas famílias e de seus cuidadores. Doença rara é aquela que afeta até 65 pessoas em cada grupo de 100 mil indivíduos, ou seja, 1,3 pessoas para cada 2 mil indivíduos. O número exato de doenças raras não é conhecido, mas a estimativa é que existam até 8 mil tipos diferentes de doenças raras em todo o mundo. Acesse a lista completa das doenças das raras no site da Biblioteca Virtual em Saúde (BVS).

1. Progress in Guillain–Barré syndrome immunotherapy—A narrative review of new strategies in recent years. (Progresso na imunoterapia com síndrome de Guillain-Barré – Uma revisão narrativa de novas estratégias nos últimos anos).

Abstract: Guillain – Barré syndrome (GBS) is an immune-mediated neuropathy, the pathology of which is not clear. Both cellular and humoral immunity are involved in the occurrence of the disease, and molecular mimicry is currently the most widely recognized pathogenesis. Intravenous immunoglobulin (IVIg) and plasma exchange (PE) have been proven to be effective in improving the prognosis of patients with GBS, but there has been no progress in the treatment of the disease or strategies to improve the prognosisNew treatment strategies for GBS are mostly immunotherapies, including treatment against antibodies, complement pathways, immune cells and cytokines. Some of the new strategies are being investigated in clinical trials, but none of them have been approved for the treatment of GBS. Here, we summarized the current therapies for GBS, and new immunotherapies for GBS according to pathogenesis.

Reference: YAO, J. *et al.* Progress in Guillain-Barré syndrome immunotherapy-A narrative review of new strategies in recent years. **Human vaccines & immunotherapeutics**, [*s. l.*], v. 19, n. 2, 2023.

Clique aqui para solicitar esse artigo na íntegra

2. Long-term outcomes of paediatric Guillain–Barré syndrome. (Resultados a longo prazo da síndrome pediátrica de Guillain-Barré).

Abstract – Aim: To study long-term sequelae in children with Guillain–Barré syndrome (GBS). **Method:** This was a prospective observational study with children from two French tertiary centres. Data were from clinical and several standardized scales or questionnaires. **Results:** Fifty-one patients were included with a median follow-up of 6 years 4months (range 3–20 years) after the acute phase. The sequelae rate was 67% (95% confidence interval [CI] 53–78) and did not vary with time. Most children had minor sequelae (Guillain–Barré Syndrome Disability Score [GBSDS]=1); only one was unable to run (GBSDS=2). The most frequent complaints were paraesthesia (43%), pain (35%), and fatigue (31%). The neurological examination was abnormal in 18% of children, autonomy was compromised in 14%, and symptoms of depression occurred in 34%. The factors associated with late-onset sequelae were correlated with severity during the initial phase (i.e. initial GBSDS>4, odds ratio 6.6, 95% CI 1.8–33; p=0.009). The predictive factors of more severe late-onset conditions were initial severity (p=0.002) and sex (female patients; p=0.01). **Interpretation:** Two-thirds of children with GBS had late-onset sequelae following an episode, often minor, but sometimes with continuing effects on their everyday lives. Particularly affected were those who had severe GBS during the acute phase and who lost the ability to walk.

Reference: STUBLIER, B. *et al.* Long-term outcomes of paediatric Guillain-Barré syndrome. **Developmental medicine and child neurology**, [*s. l.*], v. 66, n. 2, p. 176–186, 2024.

Clique aqui para solicitar esse artigo na íntegra

3. Incidence of Guillain-Barré Syndrome post COVID-19: a systematic review of case reports and case series. (Incidência da Síndrome de Guillain-Barré pós-COVID-19: uma revisão sistemática de relatos de casos e séries de casos).

Abstract – Objective: The purpose of this systematic review was to study the incidence, risk factors and patients subjected to Guillain-Barré Syndrome (GBS) after COVID-19. **Materials and Methods:** For qualitative assessment and assessing the methodological quality, the Cochrane Handbook for Systematic Reviews of Interventions and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA 2020) checklist were utilized. Data from PubMed, Cochrane, Embase, CINAHIL, Medline, ResearchGate, and Scopus were searched. The relevant studies involved patients with confirmed COVID-19 diagnosis by RT-PCR, and GBS diagnosis based on typical clinical symptoms and/or confirmatory diagnostic results. A total of 12 English relevant articles (6 papers were case reports and 8 were case series with a total of 32 patients) published in a peer-reviewed journal from 2019 to 2021 were included. Following the review methodology, two independent raters were responsible for retrieving, extracting and checking for data eligibility. Demographic characteristics are presented as frequencies and percentages. Based on distribution of values, continuous data were expressed as median and interquartile range (IQR). **Results:** Out of 32 patients, 26 patients reported neurological symptoms, 6 cases went unnoticed, 7 cases showed involvement of the cranial nerves, 12 cases did not, and 13 cases went unreported. **Conclusions:** It is too early to draw any conclusions concerning a potential relationship between SARS-CoV-2 infection and GBS. More large-scale observational studies are required to understand the pathogenesis of SARS-CoV-2-associated GBS and to demonstrate a definite causal relationship between GBS and SARS-CoV-2 infection.

Reference: MAHMOUD, H. *et al.* Incidence of Guillain-Barré Syndrome post COVID-19: a systematic review of case reports and case series. **European review for medical and pharmacological sciences**, [*s. l.*], v. 27, n. 5, p. 2152–2164, 2023.

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4. What Is Guillain-Barré Syndrome? (O que é a Síndrome de Guillain-Barré?)

Abstract: Guillain-Barré syndrome (GBS) is a rare neurological disease that affects the peripheral nerves and causes muscle weakness. Guillain-Barré syndrome is an autoimmune disease that affects the nerves outside the brain and spinal cord (the peripheral nerves) and develops over several days to weeks. GBS can cause severe muscle weakness, and death occurs in about 5% of patients. Themost common subtypes are acute inflammatory demyelinating polyradiculoneuropathy (AIDP) and acute motor axonal neuropathy (AMAN). Approximately 90% of people with GBS in North America and Europe have AIDP.

Reference: REVITAL, Marcus. What Is Guillain-Barré syndrome? **JAMA**, [*s. l.*], v. 329, n. 7, p. 602, 2023.

Clique aqui para solicitar esse artigo na íntegra

5. Advances in the treatment of Hodgkin's lymphoma (Review). (Avanços no tratamento do linfoma de Hodgkin - Revisão).

Abstract: Hodgkin's lymphoma (HL) is a unique B-cell lymphoproliferative malignancy that has a critical pathogenesis characterized by a sparse population of Hodgkin and Reed-Sternberg cells surrounded by numerous dysfunctional immune cells. Although systemic chemotherapy with or without radiotherapy, has significantly improved the prognosis of the majority of patients with HL, a subset of patients remains refractory to first-line therapy or relapse after achieving an initial response. With the increased understanding of the biology and microenvironment of HL, novel strategies with notable efficacy and manageable toxicity, including targeted therapies, immunotherapy and cell therapy have emerged. The present review summarizes the progress made in developing novel therapies for HL and discusses future research directions in HL therapy.

Reference: CHE, Y. *et al.* Advances in the treatment of Hodgkin's lymphoma (Review). **International journal of oncology**, [*s. l.*], v. 62, n. 5, 2023.

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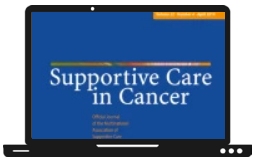
6. Hodgkin lymphoma survivor perspectives on their engagement in treatment decision-making and discussion of late efects. (Perspectivas dos sobreviventes do linfoma de Hodgkin sobre seu envolvimento na tomada de decisões de tratamento e discussão dos efeitos tardios).

Abstract – Background: Hodgkin lymphoma has a bimodal age distribution with the frst peak occurring within young adulthood and the second, among older adults. Although current therapy provides excellent disease control, survivors are at risk of developing treatment-related late efects (LEs). We sought to understand how survivors in active survivorship care perceived their role in treatment decision-making and when they acquired an understanding of LEs. **Methods:** Semi-structured interviews were conducted until saturation was reached. Themes were identifed through direct content analysis and consensus coding by a multidisciplinary team of coders, including hematology/oncology providers, patient navigators, and survivor stakeholders. **Discussion:** Participants highlighted the importance of discussions on LEs early in the care continuum. These preliminary data will be incorporated in a planned treatment decision-making tool that incorporates information on potential LEs. **Implications for cancer survivors:** Patient-centered communication approaches should be embraced to assist in treatment decision-making, while considering long-term health consequences. Survivors must be educated on their risk of LEs and encouraged to disclose their perspectives and preferences with their providers to optimize outcomes.



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Reference: MURPHY-BANKS, R. *et al.* Hodgkin lymphoma survivor perspectives on their engagement in treatment decision-making and discussion of late effects. **Supportive Care In Câncer**, [*s. l.*], v. 30, n. 2, p. 1399–1405, 2022.

7. Chronic fatigue in long-term survivors of Hodgkin's lymphoma after contemporary risk-adapted treatment. (Fadiga crônica em sobreviventes de longo prazo do linfoma de Hodgkin após tratamento contemporâneo adaptado ao risco).

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Abstract - Background: Chronic fatigue (CF), substantial fatigue for six months, can manifest as a late effect (LE) after cancer treatment, and may affect several aspects of life. In a Norwegian cohort of Hodgkin's lymphoma survivors (HLS), more than a decade after contemporary risk-adapted treatment regimens with limited use of radiotherapy (RT), we assessed: (1) Prevalence of, (2) factors associated with (3) and implications of CF on socioeconomic status (SES) and work ability (WA). **Material and methods:** HLS treated between 1997–2006, aged 8–49 years at diagnosis, were invited to participate in a population-based cross-sectional study on late effects in 2018–2019. In a mailed questionnaire, HLS responded to a fatigue questionnaire (FQ), work ability score (WAS) and short-form health survey (SF-36). Disease- and treatment data were extracted from hospital records. Factors associated with CF were identified by uni- and multivariate analysis. To study the implications of CF on SES and WA, a multinomial regression analysis was performed. **Results:** Invitations were extended to 518 HLS and 298 (58%) responded to FQ, of whom 42% had CF with mean (standard deviation [SD]) physical- and mental fatigue scores of 10.2 (4.3) and 5.5 (2.1) respectively. Median age at survey was 45 years, 47% were females. In multivariate analysis female sex (p ¼ 0.03), lower education (p ¼ 0.03), body mass index 30 kg/m2 (p ¼ 0.04), and an increasing number of comorbidities (p ¼ 0.01) were associated with CF. No association with disease stage, chemotherapy or RT was found. CF was associated with poorer WAS scores at survey (p < 0.001), unemployment (p ¼ 0.03), and receiving disability pension (p ¼ 0.003). **Conclusion:** After risk-adapted treatment, CF is still a frequent LE among long-term HLS, without apparent association with disease or treatment-related parameters. CF is associated with reduced WA and SES. As no apparent risk reduction is seen with contemporary treatment, further studies should emphasize etiological factors of CF and treatment to alleviate this common LE.

Reference: EIKELAND, S. A. *et al.* Chronic fatigue in long-term survivors of Hodgkin's lymphoma after contemporary risk-adapted treatment. **Acta Oncologica**, [*s. l.*], v. 62, n. 1, p. 80–88, 2023.

8. A blood mRNA panel that diferentiates Alzheimer's disease from other dementia types. (Um painel de mRNA sanguíneo que diferencia a doença de Alzheimer de outros tipos de demência).

Abstract – Background: Messenger RNAs (mRNAs) have been reported to be associated with Alzheimer's disease (AD). In this study, we investigated whether plasma-based mRNAs could distinguish AD from cognitively normal controls and other types of dementia, including vascular dementia (VaD), Parkinson's disease dementia (PDD), behavioral variant frontotemporal dementia (bvFTD), and dementia with Lewy body (DLB). **Methods:** Plasma mRNA expression was measured in three independent datasets. Dataset 1 (n=40; controls, 20; AD, 20) was used to identify the diferentially expressed mRNAs. Dataset 2 (n=122; controls: 60; AD: 62) was used to develop a diagnostic AD model using an mRNA panel. Furthermore, we applied the model to Dataset 3 (n=334; control, 57; AD, 58; VaD, 55; PDD, 54; bvFTD, 55; DLB, 55) to verify its ability to identify AD and other types of dementia. **Results:** Dataset 1 showed 22 upregulated and 21 downregulated mRNAs. A panel of six mRNAs distinguished AD from the control group in Dataset 2. The panel was used to successfully diferentiate AD from other types of dementia in Dataset 3. **Conclusions:** An AD-specifc panel of six mRNAs was created that can be used for AD diagnosis.

Clique aqui para solicitar esse artigo na íntegra

Reference: FU, X. *et al.* A blood mRNA panel that differentiates Alzheimer's disease from other dementia types. **Journal of Neurology**, [*s. l.*], v. 270, n. 4, p. 2117–2127, 2023.

9. Comparative study of risk factors and cognitive profile of small- and large-vessel vascular dementia – a clinic based study. (Estudo comparativo de fatores de risco e perfil cognitivo da demência vascular de pequenos e grandes vasos - um estudo clínico).

Abstract - Background: Vascular dementia (VaD) is a clinically heterogeneous entity. There is a dearth of studies for comparison of the cognitive profile of cerebral small-vessel disease (SVD) with large-vessel disease. **Objective:** We planned to evaluate and compare the cognitive profile of SVD and large--vessel VaD and evaluate various risk factors associated with them. **Materials and Methods:** Patients of VaD were recruited after excluding mixed and ambiguous cases. Patients were classified into SVD and large-vessel VaD and analyzed for their clinic-epidemiological and cognitive profiles. **Conclusions:** Despite having common vascular risk factors, few are more common in SVD than in large-vessel disease. The different clinical and cognitive profile is due to the diverse anatomical lesions in these two subclasses of VaD.

Clique aqui para solicitar esse artigo na íntegra

Reference: BHAT, A. *et al.* Comparative Study of Risk Factors and Cognitive Profile of Small- and Large-Vessel Vascular Dementia - A Clinic Based Study. **Neurology India**, [*s. l.*], v. 70, n. 1, p. 258–263, 2022.

10. A new framework for dementia nomenclature. (Uma nova estrutura para a nomenclatura da demência).

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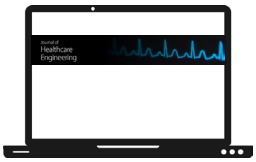
Importance: Nomenclature in the field of neurodegenerative diseases presents a challenging problem. Inconsistent use of terms such as Alzheimer disease and dementia has compromised progress in clinical care, research, and development of therapeutics. Dementia-associated stigma further contributes to inconsistent and imprecise language. The result is a lack of clarity that produces confusion with patients and the general public and presents communication challenges among researchers. Therefore, the Advisory Council on Research, Care, and Services of the National Plan to Address Alzheimer's Disease authorized a committee to make recommendations for improvement. **Objective:** To establish a systematic neurodegenerative disease framework for information collection and communication to standardize language usage for research, clinical, and public health purposes. **Symptoms:** Approximately 1 in 10 patients with allergic rhinitis will develop asthma. **Conclusions and Relevance:** The Dementia Nomenclature Initiative established a framework to guide communication about cognitive impairment among older adults. Wider testing and refinement of the framework will subsequently improve the information used in communicating about cognitive impairment and the way in which the information is used in clinical, research, and public settings.

Reference: PETERSEN, R. C. *et al.* A new framework for dementia nomenclature. **JAMA neurology**, [*s. l.*], v. 80, n. 12, p. 1364–1370, 2023.

11. EEG - Based spectral dynamic in characterization of poststroke patients with cognitive impairment for early detection of vascular dementia. (Dinâmica espectral baseada em EEG na caracterização de pacientes pós-AVC com deficiência cognitiva para detecção precoce de demência vascular).

Abstract: One common type of vascular dementia (VaD) is poststroke dementia (PSD). Vascular dementia can occur in one-third of stroke patients. Te worsening of cognitive function can occur quickly if not detected and treated early. One of the potential medical modalities for observing this disorder by considering costs and safety factors is electroencephalogram (EEG). It is thought that there are diferences in the spectral dynamics of the EEG signal between the normal group and stroke patients with cognitive impairment so that it can be used in detection. Terefore, this study proposes an EEG signal characterization method using EEG spectral power complexity measurements to obtain features of poststroke patients with cognitive impairment and normal subjects. Working memory EEGs were collected and analyzed from forty--two participants, consisting of sixteen normal subjects, ffteen poststroke patients with mild cognitive impairment, and eleven poststroke patients with dementia. From the analysis results, it was found that there were diferences in the dynamics of the power spectral in each group, where the spectral power of the cognitively impaired group was more regular than the normal group. Notably, signifcant diferences in spectral entropy (SpecEn) with a p value <0.05 were found for all electrodes, there was a relationship between SpecEn values and the severity of dementia (SpecEnDem < SpecEnMCI < SpecEnNormal), and a post hoc multiple comparison test showed signifcant diferences between groups at the F7 electrode. Tis study shows that spectral complexity analysis can discriminate between normal and poststroke patients with cognitive impairment. For further studies, it is necessary to simulate performance validation so that the proposed approach can be used in the early detection of poststroke dementia and monitoring the development of dementia.



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Reference: HADIYOSO, S. *et al.* EEG-Based Spectral Dynamic in Characterization of Poststroke Patients with Cognitive Impairment for Early Detection of Vascular Dementia. **Journal of healthcare engineering**, [*s. l.*], v. 2022, p. 5666229, 2022.

12. Revealing the modular similarities and diferences among Alzheimer's disease, vascular dementia, and Parkinson's disease in genomic networks. (Revelando as semelhanças e diferenças modulares entre a doença de Alzheimer, a demência vascular e a doença de Parkinson em redes genômicas).

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Abstract: Alzheimer's disease (AD), vascular dementia (VD), and Parkinson's disease (PD) exert increasingly lethal or disabling efects on humans, but the associations among these diseases at the molecular level remain unclear. In our research, lists of genes related to these three diseases were acquired from public databases. We constructed gene–gene networks of the lists of disease-related genes using the STRING database and selected the plug-in MCODE as the most suitable method to divide the three disease-associated networks into modules through an entropy calculation. Notably, 1173 AD-related, 203 VD-related, and 722 PD-related genes as well as 72 overlapping genes were observed among the three diseases. By dividing the modules from the gene network, we divided the AD-related gene network into 27 modules, the VD-related gene network into 8 modules, and the PD-related gene network into 17 modules. After the enrichment analysis of each disease-related gene, 146 overlapping biological processes and 32 overlapping pathways were identifed. Ultimately, through similarity analysis of the genes, biological processes, and pathways, we found that AD and VD were the most closely related at the biological process and pathway levels, with similarity coefcients of 0.2784 and 0.3626, respectively. After analyzing the overlapping gene network, we found that INS might play an important role in the network and that insulin and its signaling pathways may play a key role in these neurodegenerative diseases. Our research illustrates a new method for in-depth research on the three diseases, which may accelerate the progress of developing new therapeutics and may be applied to prevent neurodegenerative diseases.

Reference: CHEN, Y. *et al.* Revealing the modular similarities and differences among Alzheimer's disease, vascular dementia, and Parkinson's disease in genomic networks. **Neuromolecular medicine**, [*s. l.*], v. 24, n. 2, p. 125–138, 2022.

13. Diagnostic delay of hereditary ataxias in Brazil: the case of Machado-Joseph disease. (Atraso no diagnóstico das ataxias hereditárias no Brasil: o caso da doença de Machado-Joseph).

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Abstract - Background: Spinocerebellar ataxia type 3/Machado-Joseph disease (SCA3/MJD) is a rare disease with diagnosis ofered by the Unifed Health System in Brazil. Our aim was to investigate the diagnostic delay in an interval of 23 years in a public university hospital, and some potentially determining factors. **Methods:** A retrospective review of the medical records of subjects identifed at our institution between 1999 and 2017 was carried out, including residents of Rio Grande do Sul. The diagnostic delay was equivalent to the diference between age at onset of symptoms and age at molecular diagnosis. Calendar years, educational level, sex, distance between the household and the clinics, age and being the index case were studied as modifying factors. **Results:** SCA3/MJD had a median diagnostic delay of 5 years. Index cases had delays of 6 versus 4 years (p<0.001) for subsequent family members. Delay correlated with age (rho=0.346, p<0.001), but not with age at disease onset (rho=0.005, p=0.91). No change was observed with the level of education of individuals or with the distance between household and hospital from 1999 to 2017. **Discussion:** The diagnostic delay of SCA3/MJD is high in our region, where its occurrence has been reported for years. Failure to change the delay over the years suggests inefective dissemination to the population, but a smaller lag among younger people can portray the efect of digital inclusion.

Reference: PINHEIRO, J. S. *et al.* Diagnostic delay of hereditary ataxias in Brazil: the case of Machado-Joseph disease. **Cerebellum**, [*s. l.*] v. 22, n. 3, p. 348–354, 2023.

14. Spinocerebellar ataxia type 3 - Machado–Joseph disease. (Ataxia espinocerebelar tipo 3 - Doença de Machado-Joseph).

Abstract: Ataxia denotes impaired balance and coordination of gait, posture, limbs, and speech. It usually results from disturbances of the cerebellum and its connections (cerebellar ataxia) or senso ry pathways (sensory ataxia). In most patients, it is secondary to toxic (alcohol, antiepileptics), vascular (stroke), immune (paraneoplastic, multiple sclerosis), infectious (SARS-CoV-2, HIV, cerebellar abscess), and neoplastic (metastatic or, more rarely, primary tumor) causes. Genetic ataxias include spinocerebellar ataxias (SCAs), with an average estimated prevalence worldwide of up to per 100 000. There are more than 40 distinct forms of SCA, among which the most common is SCA type 3 (SCA3; also referred to as Machado–Joseph disease), accounting for 20% to 50% of all SCA cases.

Reference: DULSKI, J. *et al.* Spinocerebellar ataxia type 3 (Machado-Joseph disease). **Polish archives of internal medicine**, [*s. l.*], v. 132, n. 10, 2022.

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O Dia Mundial do Rim foi instituído com o objetivo de informar a população sobre as doenças renais, com foco na prevenção e na incorporação de práticas saudáveis. Os rins são dois órgãos localizados em ambos os lados da coluna vertebral. Sua principal função é remover os resíduos e o excesso de água do organismo. O problema é que, muitas vezes, por falta de prevenção, as pessoas podem descobrir problemas renais em fases muito avançadas das lesões.

15. Dengue hemorrhagic fever with bleeding and fluid overload in a patient with active lupus nephritis: a case report of diagnostic and therapeutic challenges. (Dengue hemorrágica com sangramento e sobrecarga hídrica em paciente com nefrite lúpica ativa: relato de caso de desafios diagnósticos e terapêuticos).

Clique aqui para solicitar esse artigo na íntegra

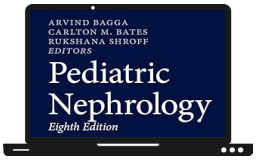
Abstract – Background: Diagnosis and management of dengue hemorrhagic fever (DHF) can be challenging in the presence of confounding comorbidities. Important confounders are conditions that alter hematological parameters and intra/extra vascular fluid distribution. We report the case of a patient with active lupus nephritis, who developed DHF with subsequent bleeding and fluid overload. This is the first case report to highlight a unique set of diagnostic and therapeutic challenges in DHF in this context. **Case presentation:** A seventeen-year-old girl with lupus nephritis class IV developed a renal flare of lupus and subsequently developed DHF with bleeding per vaginum. Due to acute kidney injury, she was managed with a restrictive fluid approach during the ascending limb with blood transfusion when required, and close monitoring for hemodynamic instability. During the descending limb, hourly input was transiently increased due to a rise in hematocrit. This precipitated nephrogenic pulmonary edema, which was managed with mechanical ventilation and continuous renal replacement therapy. **Conclusions:** This patient posed two diagnostic challenges: diagnosis of dengue in a patient with lupus-related bicytopenia, and diagnosis of dengue leakage in a patient with nephrotic syndrome-related ascites. There were three therapeutic difficulties: deciding the fluid quota for DHF in the presence of renal impairment, and balancing the risks and benefits of steroids and anticoagulation in lupus nephritis with dengue. As decisions in such instances are patient-specific, sharing of individual experiences will help guide management decisions.

Reference: VIDANAPATHIRANA, M.; ATUKORALA, I. Dengue hemorrhagic fever with bleeding and fluid overload in a patient with active lupus nephritis: a case report of diagnostic and therapeutic challenges. **BMC Infectious Diseases**, [*s. l.*], v. 23, n. 1, p. 433, 2023.

16. Recent advances in immunotherapies for lupus nephritis. (Avanços recentes em imunoterapias para nefrite lúpica).

Abstract: Childhood-onset systemic lupus erythematosus (SLE) is characterized by increased rates of kidney involvement, termed lupus nephritis. Despite the signifcant morbidity and mortality associated with this disease, lupus nephritis trials have been plagued by repeated failures to meet clinical endpoints. However, improvements in trial design and the development of targeted approaches have begun to yield promising results, including two new FDA-approved lupus nephritis treatments since 2020. These include belimumab, a monoclonal antibody targeting the B cell survival cytokine BAFF (B cell activating factor), and voclosporin, a cyclosporin analog with improved pharmacokinetic characteristics. In this review, we will summarize the data supporting regulatory approval for these agents in lupus nephritis and highlight ongoing clinical trials targeting the diverse immunologic drivers of renal infammation in SLE. While pediatric patients remain underrepresented in lupus clinical trials, given the increased severity of childhood-onset SLE and need for long-term protection from kidney damage, we anticipate the need for of-label use of these targeted therapies in the pediatric population. Future studies are needed to defne optimal patient selection, drug combinations, and treatment duration in pediatric lupus nephritis.

Reference: KANEKO, M.; JACKSON, S. W. Recent advances in immunotherapies for lupus nephritis. **Pediatric Nephrology**, [*s. l.*], v. 38, n. 4, p. 1001–1012, 2023.



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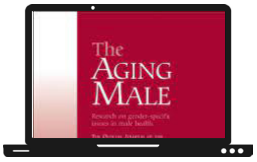
17. Obesity, metabolic dysfunction, and risk of kidney stone disease: a national cross-sectional study. (Obesidade, disfunção metabólica e risco de doença renal: um estudo transversal nacional).

Abstract - Background: This study aimed to investigate the association between different metabolic syndrome-body mass index (MetS-BMI) phenotypes and the risk of kidney stones. **Materials and Methods:** Participants aged 20–80 years from six consecutive cycles of the NHANES 2007–2018 were included in this study. According to their MetS status and BMI, the included participants were allocated into six mutually exclusive groups: metabolically healthy normal weight (MHN)/overweight (MHOW)/obesity (MHO) and metabolically unhealthy normal weight (MUN)/overweight (MUOW)/ obesity (MUO). To explore the association between MetS-BMI phenotypes and the risk of kidney stones, binary logistic regression was used to determine the odds ratios (ORs). **Results:** A total of 13,589 participants were included. It was revealed that all the phenotypes with obesity displayed higher risks of kidney stones (OR ¼ 1.38, p < 0.01 for MHO & OR ¼ 1.80, p < 0.001 for MUO, in the fully adjusted model). The risk increased significantly when metabolic dysfunction coexisted with overweight and obesity (OR ¼ 1.39, p < 0.05 for MUOW & OR ¼ 1.80, p < 0.001 for MUO, in the fully adjusted model). Of note, the ORs for the MUO and MUOW groups were higher than those for the MHO and MHOW groups, respectively. **Conclusions:** Obesity and unhealthy metabolic status can jointly increase the risk of kidney stones. Assessing the metabolic status of all individuals may be beneficial for preventing kidney stones.

Reference: YE, Z. *et al.* Obesity, metabolic dysfunction, and risk of kidney stone disease: a national cross-sectional study. **The Aging Male**, [*s. l.*], v. 26, n. 1, 2023.



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18. A case report of multiple renal calculi treated with individualized homoeopathy. (Relato de caso de cálculos renais múltiplos tratados com homeopatia individualizada).

Abstract - Background: Mineral buildups called kidney stones can be free-floating or affixed to the renal papillae and occur in the renal calyces and pelvis. A major morbidity is associated with the widespread problem of renal stone disease. Open surgical lithotomy and minimally invasive endourological procedures are now the standard for the management of kidney stone symptoms. However, individualized homeopathy (iHOM) has greatly improved treatment of Multiple Renal Calculi. **Methods:** In the OPD of Dr. D. Y. Patil Homoeopathic Medical College and Research Centre, a 26-year-old female patient with multiple renal calculus was treated homeopathically from August 2021 to January 2022. During the follow-up visits outcome was assessed. To assess whether the changes were due to homoeopathic medicine, an assessment using the modified Naranjo criteria was performed. **Results:** Over an observation period of 5 months beneficial result from iHOM medicine was seen and so can be used by the physicians in the treatment of Renal Calculi as a complementary health practice. **Conclusion:** Based on the totality of symptoms, individualized Homoeopathic Medicine (iHOM) Lycopodium Clavatum 30C was given and worked well to dissolve and expel all renal stones. Hence, homeopathy is effective in the fragmentation and ejection of renal calculi and remains one of the most popular treatments for urological problems.

Reference: LAMBA, P.; GUPTA, A. K. A case report of multiple renal calculi treated with individualized homoeopathy. **Alternative therapies in health and medicine**, [*s. l.*], v. 29, n. 8, p. 473–477, 2023.

Clique aqui para solicitar esse artigo na íntegra

19. Quality of life and functional capacity in depressive patients on hemodialysis: a systematic review and meta-analysis. (Qualidade de vida e capacidade funcional em pacientes depressivos em hemodiálise: revisão sistemática e meta-análise).

Clique aqui para solicitar esse artigo na íntegra

Abstract: Depression is a common disorder in patients with chronic kidney disease (CKD), and some data support its relationship with functional capacity and quality of life. However, to date, this has not been evaluated systematically or through meta-analysis. We sought to investigate the relationship of quality of life and functional capacity with depressive disorder in patients with CKD on hemodialysis. This systematic review considered studies published up to 2021 and included cross-sectional and cohort studies. PubMed, Embase, SPORTDiscus, Web of Science, and Cochrane (CENTRAL) databases were used to search for studies. The New Castle-Ottawa Quality Assessment scale was used to measure the quality of the studies. A total of 4,626 studies were found and, after applying the selection criteria, 16 studies (2,175 patients) remained for qualitative analysis and 10 for meta-analysis (1,484 patients). The physical component summary (MD=−6.563; 95%CI: - 9.702 to - 3.424) and mental component summary (MD=−18.760; 95%CI: - 28.641 to - 8.879) were lower in depressive patients, as in all Short Form Health Survey 36 (SF-36) domains. Only one study provided data regarding functional capacity, but it was not evaluated by the defined outcome measure. Twelve studies were classified as "moderate quality" (5 to 6 stars) and four were classified as "lowquality" (0 to 4 stars). This meta-analysis with CKD patients on hemodialysis showed a negative relationship between depression and quality of life, with worsening in all physical and mental domains of the SF-36 in depressed patients.

Reference: MOREIRA, M. B. *et al.* Quality of life and functional capacity in depressive patients on hemodialysis: a systematic review and meta-analysis. **Brazilian journal of medical and biological research**, [*s. l.*], v. 56, p. e12850, 2023.

20. Chronic kidney disease: prevention, diagnosis, and treatment. (Doença renal crônica: prevenção, diagnóstico e tratamento).

Clique aqui para solicitar esse artigo na íntegra

Abstract: Chronic kidney disease (CKD) affects approximately 15% of the U.S. population, and many people are unaware of their diagnosis. Screening may be considered for patients with cardiovascular disease, diabetes mellitus, hypertension, age 60 years and older, family history of kidney disease, previous acute kidney injury, or preeclampsia. Diagnosis and staging of CKD are based on estimated glomerular filtration rate (eGFR), excessive urinary albumin excretion, or evidence of kidney parenchymal damage lasting more than three months. eGFR should be determined using the CKD-EPI creatinine equation without the race variable. Risk calculators are available to estimate the risk of progression to end-stage renal disease. When possible, serum cystatin C should be measured to confirm eGFR in patients with CKD. Blood pressure should be maintained at less than 140/90 mm Hg, with a systolic blood pressure target of 120 mm Hg or less for patients tolerant of therapy, using an angiotensin-converting enzyme inhibitor or angiotensin receptor blocker. Sodium-glucose cotransporter-2 inhibitors and metformin should be considered in patients with CKD and type 2 diabetes who have not reached their glycemic goal. Intravenous iodinated contrast media temporarily reduces eGFR and should be avoided in patients with advanced CKD. Interdisciplinary management of patients with CKD is important for reducing morbidity and mortality, and patients at high risk of progression to end-stage renal disease should be referred to a nephrologist.

Reference: GOODBRED, A. J.; LANGAN, R. C. Chronic kidney disease: prevention, diagnosis, and treatment. **American family physician**, [*s. l.*], v. 108, n. 6, p. 554–561, 2023.

21. Factors associated with subgroups of fatigue in maintenance hemodialysis patients: a cross-sectional study. (Fatores associados a subgrupos de fadiga em pacientes em hemodiálise de manutenção: um estudo transversal).

Clique aqui para solicitar esse artigo na íntegra

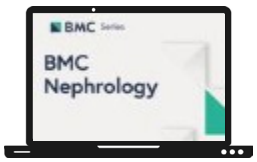
Abstract - Objective: This study aimed to investigate affected factors for subgroups of fatigue and the degree of fatigue in maintenance hemodialysis (MHD) patients. **Methods:** This study included 120 MHD patients. Questionnaires, pre- and post-dialysis clinical data, bioimpedance spectroscopy, and ultrasound assessment were involved. **Results:** The prevalence of fatigue in participants was 83%, including 54% of patients with fatigue worsened by dialysis, 13% with fatigue lessened by dialysis, and 16% with undifferentiated fatigue. Based on multi-nominal logistic regression analysis, age was associated with worsened fatigue by dialysis (odds ratio (OR) = 1.06, 95% confidence interval (CI) 1.01–1.11, p = 0.019), lower post-dialysis phosphorus was associated with lessened fatigue by dialysis (OR = 0.03, 95% CI 0.001–0.981, p = 0.049), and there was an increasing trend of patients experiencing undifferentiated fatigue as the extracellular water / intracellular water (E/I) level increased (p for trend = 0.020). Based on multi-ordinal logistic regression analysis, age was also a significant predictor for more severe fatigue (OR = 1.042, 95% CI 1.008–1.059, p = 0.015). **Conclusions:** Different subgroups of fatigue in MHD patients have different affecting factors. Older patients were prone to worsened fatigue by dialysis, patients with lower post-dialysis phosphorus were prone to lessened fatigue by dialysis, and patients with higher E/I levels were prone to undifferentiated fatigue. Meanwhile, older patients are prone to suffer from more severe fatigue. However, more in-depth studies are needed to clarify the pathogenesis of fatigue in MHD patients.

Reference: ZHENG, X.-Y. *et al.* Factors associated with subgroups of fatigue in maintenance hemodialysis patients: a cross-sectional study. **Renal failure**, [*s. l.*], v. 45, n. 1, 2023.

22. Association between disability in activities of daily living and phase angle in hemodialysis patients. (Associação entre incapacidade nas atividades de vida diária e ângulo de fase em pacientes em hemodiálise).

Abstract – Background: Disability in activities of daily living (ADL) significantly increases the risk of mortality among patients undergoing hemodialysis. Malnutrition and decreased exercise capacity are closely correlated with ADL disability. Phase angle (PhA) has been proposed as a measure of nutritional status and exercise capacity. This study aims to investigate the prevalence of ADL disability in hemodialysis patients and its association with PhA. **Methods:** A prospective, observational study was conducted, involving hemodialysis patients treated between November 2019 and January 2020 in an affiliated hospital of Chinese university. ADL was measured using both basic ADL (BADL) scales and instrumental ADL (IADL) scales. PhA measurements were obtained using a BIA device while the patients were in the supine position after dialysis. **Results:** A total of 237 hemodialysis patients with a mean age of 60.01±13.55 years were included in this study. The prevalence of disability in ADL was 43.5%. Multivariable analysis results showed a robust association between low PhA and disability in both BADL and IADL (for each unit decrease in PhA: odds ratio 4.83 [95% CI: 2.56–9.0], and 3.57 [95% CI: 2.14–5.95], respectively). The optimal cut-off values of PhA for disability in BADL and IADL were 4.8 and 5.4, with the area under the ROC curve (AUC) were 0.783 (0.727, 0.835) and 0.799 (0.743, 0.848), respectively. **Conclusions:** Low PhA is strongly associated with disability in ADL in hemodialysis patients. These findings suggest that PhA may serve as a potentially objective measure of ADL disability in hemodialysis patients.

Reference: LI, J. *et al.* Association between disability in activities of daily living and phase angle in hemodialysis patients. **BMC nephrology**, [*s. l.*], v. 24, n. 1, p. 350, 2023.



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23. Hemodialysis in Brazil: differences across geographic regions regarding demographics, laboratory parameters and drug prescription. (Hemodiálise no Brasil: diferenças entre regiões geográficas em relação a dados demográficos, parâmetros laboratoriais e prescrição de medicamentos).

Introduction: Brazil has a vast territory divided into five geographic regions with important differences in sociodemographic indices. We aimed to present and compare socio-demographic characteristics, biochemical results, and drug prescription of patients on chronic hemodialysis (HD) treatment in the five geographic regions. **Methods:** We evaluated data from the Brazilian Dialysis Registry of all adult patients undergoing chronic HD in 2021. Variables included sociodemographic characteristics, serum levels of phosphate, calcium, and albumin, hemoglobin, urea reduction rate, and prescription of phosphate binders, erythropoietin, and intravenous iron. Data from the North and Northeast regions were combined into one group. **Results:** A total of 13,792 patients (57.9 ± 16.0 years old, 58.5% male, median HD vintage of 31 (11–66) months) from 73 dialysis centers were analyzed. Regional distribution was 59.5% in the Southeast; 21.7% in the South; 5.9% in the Midwest; and 12.9% in the North/Northeast. Sociodemographic features, biochemical results, and medication prescriptions differed across regions. The prevalence of elderly patients was lower in the Midwest and North/Northeast. The South region had the highest prevalence of hyperphosphatemia (41.2%) and urea reduction rate <65% (24.8%), while anemia and hypoalbuminemia were more prevalent in the Southeast, 32.7% and 11.6%, respectively. **Conclusion:** We found differences in socio-demographics, clinical features, and drug prescriptions across Brazilian geographic regions. Some findings reflect the socio-demographic diversity of the country, while others deserve further elucidation.

Clique aqui para solicitar esse artigo na íntegra

Reference: NERBASS, F. B. *et al.* Hemodialysis in Brazil: differences across geographic regions regarding demographics, laboratory parameters and drug prescription. **Jornal brasileiro de nefrologia**, [*s. l.*], v. 45, n. 4, p. 410–416, 2023.

DOCENTE DE PSICOLOGIA FALA DO RECONHECIMENTO DAS EMOÇÕES

☀️ Descubra como as emoções de Riley continuam a nos encantar na vida real! 🎥 O artigo, feito com a docente de psicologia @lidyane.mendess, relata sobre a continuação de "Divertida Mente" e revela como podemos refletir sobre nossos próprios sentimentos através dessa emocionante história.✨

#Divertidamente #EmoçõesReais #Reflexão

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04.03 - DIA MUNDIAL DE COMBATE À OBESIDADE

Segundo a OMS (Organização Mundial da Saúde), em 2022, há mais de 1 bilhão de pessoas no mundo com obesidade – 650 milhões de adultos, 340 milhões de adolescentes e 39 milhões de crianças. Esse número continua aumentando.

No Dia Mundial de Combate à Obesidade, estamos aqui para ajudar você a construir um futuro com mais sorrisos, mais energia e mais saúde.

Uma vida mais saudável começa com pequenas escolhas: um passeio ao ar livre, uma refeição colorida, um momento de relaxamento.

Vamos, juntos, construir um amanhã mais saudável? 😍

08.03 - DIA INTERNACIONAL DA MULHER

Inteligência que inspira, força que transforma, sensibilidade que conecta.

Hoje, no Dia Internacional da Mulher, celebramos não apenas as conquistas, mas também as singularidades de cada uma. É um momento de reconhecimento, mas também de reflexão sobre como nossas atitudes diárias podem ser mais fraternas e respeitosas.

Que essa celebração seja apenas um ponto de partida para uma atitude mais constante e verdadeira.

Feliz Dia Internacional da Mulher! 💪💜

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TEMAS ATUAIS

I. Dengue em 2024: podemos estar perto de uma nova epidemia.

Os tipos da dengue em circulação, o alto número de casos em 2023 e outros fatores preocupam. Especialistas mostram o que fazer para minimizar o problema. (Revista Veja Saúde, 2024)

Clique aqui para solicitar o artigo

II. Como a dengue chegou ao Brasil – e qual é o futuro da doença.

2024 deve se tornar o ano com o maior número de casos de dengue na história do país. Mas a vacina disponível pode ajudar a reduzir as mortes. Entenda como o mosquito se apegou aos humanos ao longo da história e quais são as perspectivas para o combate ao Aedes. (Revista Super Interessante, 2024)

Clique aqui para solicitar o artigo

III. Vacina da dengue do Instituto Butantan: o que sabemos sobre o imunizante.

Em estudo de fase 3, a vacina chamada Butantan-DV mostrou eficácia de 79,6% contra a dengue, com uma única dose. E essa não é a única vantagem dela. (Revista Veja Saúde, 2024)

Clique aqui para solicitar o artigo

IV. Febre oropouche: entenda a doença com sintomas parecidos com os da dengue.

O Amazonas emitiu alerta devido a um aumento expressivo de casos de febre oropouche. Veja se há risco de espalhamento para outros casos e como podemos nos proteger. (Revista Veja Saúde, 2024)

Clique aqui para solicitar o artigo

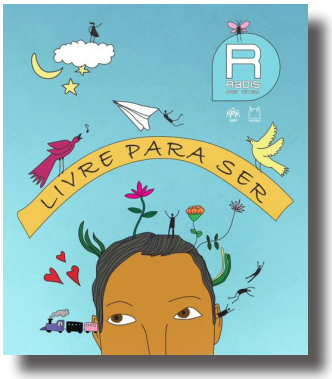
V. Doenças raras, uma causa comum.

"Não se pode calar a voz do povo. Se a gente não falar, as coisas não acontecem". Maria Clara Migowski acabou de completar 60 anos e foi com esse espírito que ela viajou para a sua primeira participação em uma conferência nacional de saúde, uma experiência que considera fundamental para a construção de um sistema de saúde mais próximo do que deseja. "Quando existe a representatividade do usuário, é possível apontar o que pode ser mudado e trazer propostas para o que queremos ver acontecer". (Revista Radis, 2023)

Clique aqui para solicitar o artigo

VI. Cuidado sem amarras.

Tratamento digno e cuidado em liberdade revelam novas possibilidades para pessoas com transtornos mentais e em reabilitação do abuso de álcool e drogas. (Revista Radis, 2024).



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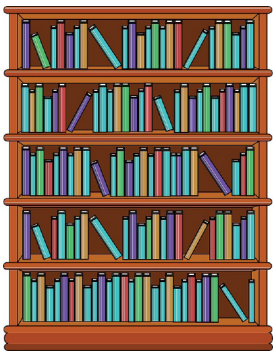

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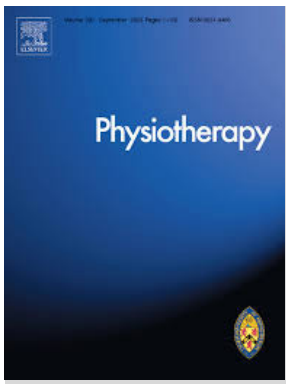

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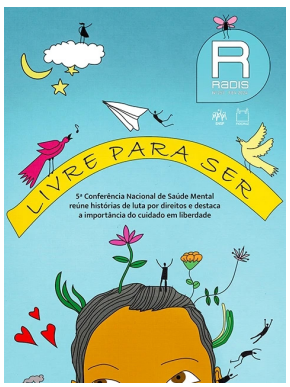

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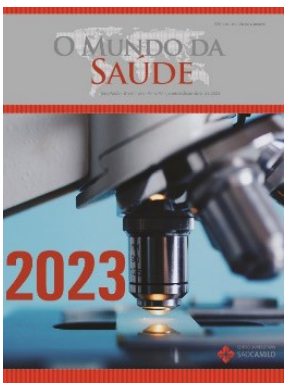

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