

BIBLIO CONNECT

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EDITORIAL

Prezado leitor, é com muito orgulho que apresentamos a 13ª edição do Boletim Informativo de Periódicos Científicos das Bibliotecas do Centro Universitário São Camilo - SP, que tem como objetivo divulgar artigos científicos dos periódicos assinados pela Instituição.

Nessa edição, selecionamos artigos relacionados às datas de conscientização em saúde, que foram: Doenças Infecciosas e Parasitárias, Doenças Pulmonar, Dislexia, Setembro Amarelo e Outubro Rosa, todos artigos com questões relacionadas às áreas temáticas dos cursos ofertados. Aqui você também encontra publicações de docentes da Instituição e temas da atualidade.

No Podcast, tivemos a participação da Profa. Dra. Celina Camargo Bartalotti, Procuradora Institucional e Coordenadora Geral de Graduação do Centro Universitário São Camilo, falando sobre o tema Diversidade e Acessibilidade Educacional: um olhar Camiliano.

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 nas Bibliotecas São Camilo.

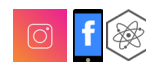
Trazemos nesta edição a base de dados PEDro, que é um banco de dados gratuito com mais de 59.000 ensaios, revisões e diretrizes que avaliam intervenções da área de Fisioterapia.

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 dos temas apresentados.

A todos, uma ótima leitura!

Comissão do Boletim Informativo das Bibliotecas São Camilo - SP



ON AIR

É importante falar sobre diversidade no ambiente acadêmico?

Você sabe o que é acessibilidade atitudinal?

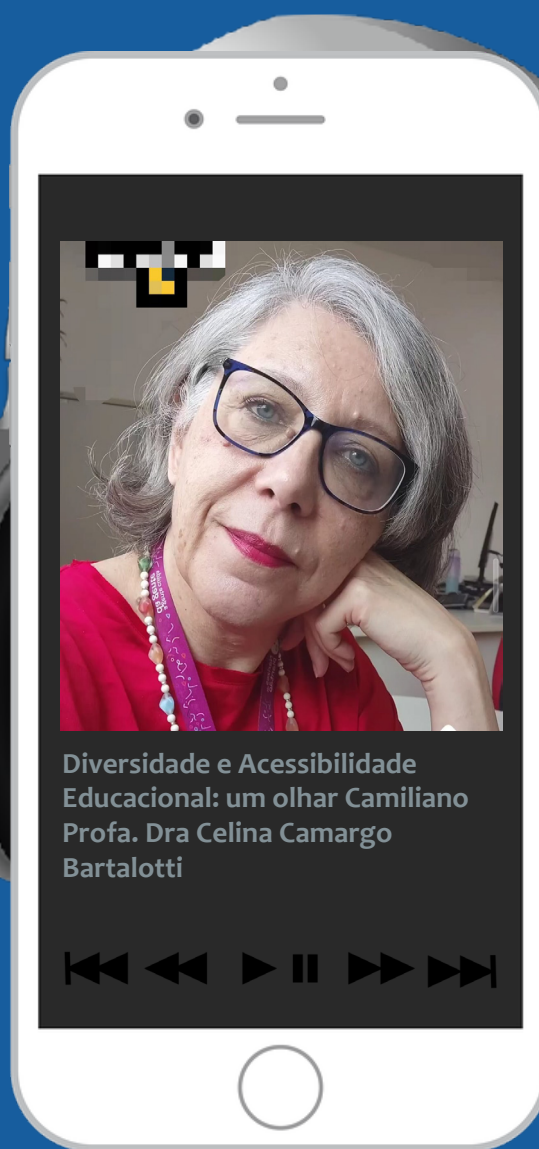


O que há em comum entre diversidade e acessibilidade?

POD CAST #3 DO **BIBLIO CONNECT**



É só dar o play e ficar por dentro do assunto do momento!



Para responder todas as nossas dúvidas, convidamos a Profa. Dra. Celina Camargo Bartalotti, Procuradora Institucional e Coordenadora Geral de Graduação do Centro Universitário São Camilo.





1. Burden of influenza and respiratory syncytial viruses in suspected COVID-19 Patients: a cross-sectional and meta-analysis study. (Carga de influenza e vírus sincicial respiratório em pacientes com suspeita de COVID-19: um estudo transversal e de meta-análise).



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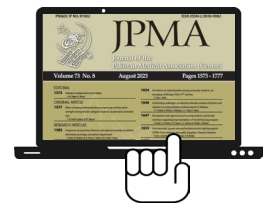
Abstract: Non-SARS-CoV-2 respiratory viral infections, such as influenza virus (FluV) and human respiratory syncytial virus (RSV), have contributed considerably to the burden of infectious diseases in the non-COVID-19 era. While the rates of co-infection in SARS-CoV-2-positive group (SCPG) patients have been determined, the burden of other respiratory viruses in the SARS-CoV-2-negative group (SCNG) remains unclear. Here, we conducted a cross-sectional study (São José do Rio Preto county, Brazil), and we collected our data using a meta-analysis to evaluate the pooled prevalence of FluV and RSV among SCNG patients. Out of the 901 patients suspected of COVID-19, our molecular results showed positivity of FluV and RSV in the SCNG was 2% (15/733) and 0.27% (2/733), respectively. Co-infection with SARS-CoV-2 and FluV, or RSV, was identified in 1.7% of the patients (3/168). Following our meta-analysis, 28 studies were selected (n = 114,318 suspected COVID-19 patients), with a pooled prevalence of 4% (95% CI: 3–6) for FluV and 2% (95% CI: 1–3) for RSV among SCNG patients were observed. Interestingly, FluV positivity in the SCNG was four times higher (OR = 4, 95% CI: 3.6–5.4, p < 0.01) than in the SCPG. Similarly, RSV positivity was significantly associated with SCNG patients (OR = 2.9, 95% CI: 2–4, p < 0.01). For subgroup analysis, cold-like symptoms, including fever, cough, sore throat, headache, myalgia, diarrhea, and nausea/vomiting, were positively associated (p < 0.05) with the SCPG. In conclusion, these results show that the pooled prevalence of FluV and RSV were significantly higher in the SCNG than in the SCPG during the early phase of the COVID-19 pandemic.

Reference: COSTA, V. G. da et al. Burden of influenza and respiratory syncytial viruses in suspected COVID-19 patients: a cross-sectional and meta-analysis study. *Viruses*, [s. l.], v. 15, n. 3, 2023.

2. Risk factors for intensive care unit admission and mortality among adult meningitis patients. (Fatores de risco para internação em unidade de terapia intensiva e mortalidade em pacientes adultos com meningite).

Abstract – Objective: To assess the risk factors for intensive care unit admission and inpatient all-cause mortality among adult meningitis patients. **Method:** The retrospective study was conducted at the Aga Khan University Hospital, Karachi, and comprised of patients of either gender aged ≥18 years diagnosed with bacterial, viral, or tuberculous meningitis between July 2010 and June 2019. Multivariable logistic regression analyses were used to explore independent predictors of inpatient mortality and intensive care unit admission. Data was analysed using SPSS 24. **Results:** Of the 929 patients with suspected meningitis, 506 (54.5%) had confirmatory diagnosis. Of them, 303 (59.9%) were males. The overall median age of the sample was 47.0 years (interquartile range: 33.0 years). The most common aetiology was bacterial meningitis 324 (64%), followed by viral meningitis 141 (27.9%). Incidence of inpatient mortality was 53 (10.5%), while 75 (14.8%) patients required intensive care unit admission. Tuberculous aetiology, intensive care unit admission, concurrent encephalitis, hydrocephalus, inpatient neurosurgery, and longer length of hospital stay were predictors of mortality (p < 0.05). Non-indication of blood culture was found to be associated with reduced risk of mortality (p < 0.05). For intensive care unit admission, diabetes mellitus, presentation with seizure, imaging suggestive of meningitis, and inpatient neurosurgery were associated with higher risk of admission, while hypertension, presentation with headache, viral aetiology and non-indication of blood culture reduced the risk (p < 0.05). **Conclusion:** Adult meningitis patients tend to have poor expected outcomes, and their management strategies should be planned accordingly.

Reference: WAQAR, U. et al. Risk factors for intensive care unit admission and mortality among adult meningitis patients. *JPMA, The Journal of the Pakistan Medical Association*, [s. l.], v. 72, n. 7, p. 1460–1466, 2022.



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3. Evaluation of the accuracy of multiplex polymerase chain reaction in differentiation between bacterial and viral meningitis. (Avaliação da precisão da reação em cadeia da polimerase multiplex na diferenciação entre meningite bacteriana e viral).

Abstract – Background: Meningitis is one of the most dangerous infection affecting children. The need for rapid and accurate diagnosis is mandatory for improving the outcome. **Aim of the work:** To evaluate the role of multiplex polymerase chain reaction (PCR) in diagnosis of meningitis either bacterial or viral and to detect its accuracy. **Results:** The mean age of children was 3.27 ± 1.27 years. Thirty-five (72.9%) cases were bacterial meningitis while 13 (27.1%) cases were viral meningitis. Multiplex PCR had 94% sensitivity and 100% specificity for diagnosis of bacterial meningitis. **Conclusion:** Multiplex PCR may help in diagnosis and differentiation of bacterial and viral meningitis with accurate and rapid results.

Reference: AHMED, M. A. et al. Evaluation of the accuracy of multiplex polymerase chain reaction in differentiation between bacterial and viral meningitis. *Irish Journal of Medical Science*, [s. l.], v. 192, n. 1, p. 403–407, 2023.



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4. Diagnostic value of IgA antibody measurement in tick-borne spotted fever - Astrakhan rickettsial fever. (Valor diagnóstico da medição de anticorpos IgA na febre maculosa transmitida por carrapatos - febre rickettsial de Astrakhan).

Abstract: Tick-borne spotted fevers caused by *Rickettsia* occur worldwide. The symptoms of this bacterial infection are similar to those of viral infection, and thus, diagnostic accuracy has special clinical importance. One of the commonly used methods for the diagnosis of tick-borne spotted fever is enzyme-linked immunosorbent assay (ELISA), which is based on estimation of the presence of specific IgM antibodies in blood. However, IgA analysis has not been used for the diagnosis of rickettsial diseases thus far. We investigated the diagnostic value of IgA antibody determination using patient sera collected in the Astrakhan region of Russia, where an isolated site of Astrakhan rickettsial fever (ARF) caused by *Rickettsia conorii* subsp. *caspia* is located. Our investigation was performed on serum samples collected from 185 patients diagnosed with Astrakhan rickettsial fever from May to October 2019. Western blot analysis revealed that specific IgA antibodies, as well as IgM antibodies, from patient sera bind to high-molecular-weight pathogen proteins with similar masses. The obtained data show that the determination of IgM alone allows for serological confirmation of diagnosis in only 46.5% of cases but that the determination of both IgM and IgA increases this rate to 66.5%. Taken together, the findings show an important diagnostic value of IgA evaluation for tick-borne spotted fever rickettsiosis.

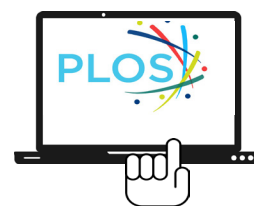


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Reference: SMIRNOVA, N. S. *et al.* Diagnostic value of IgA antibody measurement in tick-borne spotted fever (Astrakhan rickettsial fever). *Microbiology Spectrum*, [s. l.], v. 10, n. 3, e0168721, 2022.

5. Parasite load evaluation by qPCR and blood culture in Chagas disease and HIV co-infected patients under antiretroviral therapy. (Avaliação da carga parasitária por qPCR e hemocultura em pacientes com doença de Chagas e co-infectados pelo HIV sob terapia antirretroviral).

Abstract: Chagas disease also known as American trypanosomiasis, is caused by *Trypanosoma cruzi* and transmitted by triatominae-contaminated feces. It is considered a neglected tropical disease that affects 6 to 7 million people worldwide. The reactivation of Chagas disease occurs when the chronically infected hosts are not able to control *T. cruzi* infection, generating recurrence of the acute phase. HIV is the main immunosuppressive infection that can lead to the reactivation of chronic Chagas disease in AIDS conditions. In co-infected patients, the reactivation of Chagas disease is related to their high parasite load, high HIV viral load, and CD4 T-cell counting less than 200/mm³, which may evolve to meningoencephalitis and myocarditis. Tests for Chagas disease were performed, such as qPCR and *T. cruzi* blood culture. The patient's medical records were analyzed to verify clinical and epidemiological data, viral load, and CD4 T-cell counting since the outset of ART. We suggest that the parasite load be monitored through qPCR in *T. cruzi*/HIV co-infected patients. We conclude that ART in people living with HIV improves infection and immunosuppression control, enabling the natural evolution of the American trypanosomiasis.



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Reference: MARCON, G. E. B. *et al.* Parasite load evaluation by qPCR and blood culture in Chagas disease and HIV co-infected patients under antiretroviral therapy. *PLoS Neglected Tropical Diseases*, [s. l.], v. 16, n. 3, e0010317, 2022.

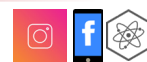
6. Malaria therapeutics: are we close enough? (Terapêutica da malária: estamos perto o suficiente?)

Abstract: Malaria is a vector-borne parasitic disease caused by the apicomplexan protozoan parasite *Plasmodium*. Malaria is a significant health problem and the leading cause of socioeconomic losses in developing countries. WHO approved several antimalarials in the last 2 decades, but the growing resistance against the available drugs has worsened the scenario. Drug resistance and diversity among *Plasmodium* strains hinder the path of eradicating malaria leading to the use of new technologies and strategies to develop effective vaccines and drugs. A timely and accurate diagnosis is crucial for any disease, including malaria. The available diagnostic methods for malaria include microscopy, RDT, PCR, and non-invasive diagnosis. Recently, there have been several developments in detecting malaria, with improvements leading to achieving an accurate, quick, cost-effective, and non-invasive diagnostic tool for malaria. Several vaccine candidates with new methods and antigens are under investigation and moving forward to be considered for clinical trials. This article concisely reviews basic malaria biology, the parasite's life cycle, approved drugs, vaccine candidates, and available diagnostic approaches. It emphasizes new avenues of therapeutics for malaria.



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Reference: TRIPATHI, H. *et al.* Malaria therapeutics: are we close enough? *Parasites & Vectors*, [s. l.], v. 16, n. 1, 2023.





7. Etiology of bacterial pneumonias in patients with COVID-19. (Etiologia das pneumonias bacterianas em pacientes com COVID-19).

Abstract – Background: Aggregate bacterial pneumonia plays a fundamental role in mortality of patients hospitalized with COVID-19. **Objective:** To estimate the association of aggregated bacterial pneumonia with mortality in patients at Hospital Especialidades “La Raza”. **Material and methods:** Analytical cross-sectional study, 252 COVID-19 patients, chest x-ray and culture of bronchial secretion or expectoration. Data taken from the SIOC electronic file and the IZASAlab platform. **Results:** 252 participants, positive culture, 89 patients, 35.3%, isolation of *K. pneumoniae* (22.5%), *A. baumannii* (20.2%), *P. aeruginosa* (13.5%) and *S. aureus* (11.2%), antimicrobial resistance 37.1%. 43.7% died, lung damage greater than 50% RMa 2.25 (95% CI 1.01-5.11) $p = 0.04$ against minor lung damage; microorganism in culture RMa 9.04 (95% CI 3.06-26.74) $p = 0.000$; antimicrobial resistance RMa 7.57 (95% CI 1.34-42.79) $p = 0.02$; *S. aureus* RMa 1.24 (95% CI 0.36-4.23) $p = 0.73$; *A. baumannii* RMa 3.74 (95% CI 1.41-9.91) $p = 0.008$; *K. pneumoniae* RMa 4.12 (95% CI 1.55-10.97) $p = 0.005$; and *P. aeruginosa* RMa 6.89 (95% CI 1.62-17.61) $p = 0.01$. Uncontrolled Diabetes RMa 1.61 (IC95% 1.1-2.9) $p = 0.018$. **Conclusions:** The development of added bacterial pneumonia increases the probability of death 2 times more, it amounts to 6 times more if there is antimicrobial resistance, it is observed to a greater extent for *A. baumannii*, *K. pneumoniae* and *P. aeruginosa*.



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Reference: ANGELES-GARAY, U. *et al.* Etiology of bacterial pneumonias in patients with COVID-19. *Revista medica del Instituto Mexicano del Seguro Social*, [s. l.], v. 60, n. 6, p. 632–639, 2022.

8. Prevalencia de asma en pacientes hospitalizados por neumonía asociada a infección por SARS-CoV-2. (Prevalência de asma em pacientes hospitalizados por pneumonia associada à infecção por SARS-CoV-2).

Resumen – Antecedentes: La asociación el asma con la COVID-19 continúa siendo controversial. **Objetivo:** establecer la prevalencia de asma en una muestra de pacientes con neumonía asociada COVID-19; además, describir las características clínicas de los pacientes con asma en comparación con los pacientes sin asma. **Métodos:** Se analizaron los datos clínicos correspondientes a 120 pacientes hospitalizados por neumonía asociada a infección por SARS-CoV-2. Los pacientes con y sin asma fueron comparados en función de la gravedad de la COVID-19. **Resultados:** La prevalencia de asma en los pacientes con neumonía por COVID-19 fue del 3.5% (IC 95%: 1.5% a 9.6%). Al comparar la gravedad de la COVID-19 entre los pacientes con asma con los pacientes sin asma, ésta no difirió en función de los síntomas, la comorbilidad, la duración de los síntomas, la necesidad de ventilación mecánica asistida, los biomarcadores de inflamación y la ocurrencia de muerte. Los pacientes con asma y COVID-19 mostraron un fenotipo T2 alto, con pobre función respiratoria y sin uso de tratamiento regular para el control del asma. **Conclusiones:** No se observaron diferencias significativas en la frecuencia de la ventilación mecánica asistida o de la muerte entre los pacientes hospitalizados por neumonía asociada con COVID-19 con y sin historia de asma.



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Referencia: PAZ-VELARDE, B. A. *et al.* Prevalencia de asma en pacientes hospitalizados por neumonía asociada a infección por SARS-CoV-2. *Revista Alergia Mexico*, [s. l.], v. 70, n. 1, p. 1–7, 2023.

9. Innovative therapeutic approaches based on nanotechnology for the treatment and management of tuberculosis. (Abordagens terapêuticas inovadoras baseadas em nanotecnologia para o tratamento e manejo da tuberculose).

Abstract: Tuberculosis (TB), derived from bacterium named *Mycobacterium tuberculosis*, has become one of the worst infectious and contagious illnesses in the world after HIV/AIDS. Long-term therapy, a high pill burden, lack of compliance, and strict management regimens are disadvantages which resulted in the extensively drug-resistant (XDR) along with multidrug-resistant (MDR) in the treatment of TB. One of the main thrust areas for the current scenario is the development of innovative intervention tools for early diagnosis and therapeutics towards *Mycobacterium tuberculosis* (MTB). This review discusses various nanotherapeutic agents that have been developed for MTB diagnostics, anti-TB drugs and vaccine. Undoubtedly, the concept of employing nanoparticles (NPs) has strong potential in this therapy and offers impressive outcomes to conquer the disease. Nanocarriers with different types were designed for drug delivery applications via various administration methods. Controlling and maintaining the drug release might be an example of the benefits of utilizing a drug-loaded NP in TB therapy over conventional drug therapy. Furthermore, the drug-encapsulated NP is able to lessen dosage regimen and can resolve the problems of insufficient compliance. Over the past decade, NPs were developed in both diagnostic and therapeutic methods, while on the other hand, the therapeutic system has increased. These “theranostic” NPs were designed for nuclear imaging, optical imaging, ultrasound, imaging with magnetic resonance and the computed tomography, which includes both single-photon computed tomography and positron emission tomography. More specifically, the current manuscript focuses on the status of therapeutic and diagnostic approaches in the treatment of TB.



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Reference: KIA, P. *et al.* Innovative therapeutic approaches based on nanotechnology for the treatment and management of tuberculosis. *International Journal of Nanomedicine*, [s. l.], v. 18, p. 1159–1191, 2023.





10. Radiological findings based comparison of functional status in patients who have postcovid lung injury or idiopathic pulmonary fibrosis. (Comparação baseada em achados radiológicos do estado funcional em pacientes com lesão pulmonar pós-covid ou fibrose pulmonar idiopática).

Abstract – Background: Following COVID-19 infection, some patients acquired lung injury and fibrosis. Idiopathic pulmonary fibrosis is characterized by lung fibrosis. Both post-COVID lung injury and idiopathic pulmonary fibrosis cause loss of respiratory function and involvement of the lung parenchyma. We aimed to compare respiratory related functional characteristics and radiological involvement between post-COVID lung injury and idiopathic pulmonary fibrosis. **Methods:** A single center, cross-sectional study was applied. Patients with post-COVID lung injury and idiopathic pulmonary fibrosis included in the study. All patients underwent the 6-minute walk test, as well as the Borg and MRC scales. Radiological images were evaluated and scored for lung parenchymal involvement. The impact of post-COVID lung injury and idiopathic pulmonary fibrosis on respiratory functions of were compared. The relationship of functional status and radiological involvement, as well as the effect of potential confounding factors were investigated. **Results:** A total of 71 patients were included in the study. Patients with post-COVID lung injury had greater 6-minute walk test distance and duration, as well as higher oxygen saturations. There was no relationship between ground glass opacity and the functional parameters. **Conclusions:** Despite having equal degrees of radiological involvement and dyspnea symptom severity, PCLI patients exhibited higher levels of functional status. This might be due to different pathophysiological mechanisms and radiological involvement patterns of both diseases

Reference: KIZILIRMAK, D. *et al.* Radiological findings based comparison of functional status in patients who have post-covid lung injury or idiopathic pulmonary fibrosis. *BMC Pulmonary Medicine*, [s. l.], v. 23, n. 1, 2023.



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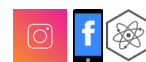
11. Pulmonary rehabilitation and physical interventions. (Reabilitação pulmonar e intervenções físicas).

Abstract: Pulmonary rehabilitation has established a status of evidence-based therapy for patients with symptomatic COPD in the stable phase and after acute exacerbations. Rehabilitation should have the possibility of including different disciplines and be offered in several formats and lines of healthcare. This review focusses on the cornerstone intervention, exercise training, and how training interventions can be adapted to the limitations of patients. These adaptations may lead to altered cardiovascular or muscular training effects and/or may improve movement efficiency. Optimising pharmacotherapy (not the focus of this review) and oxygen supplements, whole-body low- and high-intensity training or interval training, and resistance (or neuromuscular electrical stimulation) training are important training modalities for these patients in order to accommodate cardiovascular and ventilatory impairments. Inspiratory muscle training and whole-body vibration may also be worthwhile interventions in selected patients. Patients with stable but symptomatic COPD, those who have suffered exacerbations and patients waiting for or who have received lung volume reduction or lung transplantation are good candidates. The future surely holds promise to further personalise exercise training interventions and to tailor the format of rehabilitation to the individual patient's needs and preferences.

Reference: TROOSTERS, T. *et al.* Pulmonary rehabilitation and physical interventions. *European respiratory review: an official journal of the European Respiratory Society*, [s. l.], v. 32, n. 168, 2023.



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12. A preliminary study into internet related addictions among adults with dyslexia. (Um estudo preliminar sobre vícios relacionados à internet entre adultos com dislexia).



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Abstract: In recent decades, studies have investigated associations between learning disorders such as Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD), and the various types of internet addictions, ranging from general internet addiction (GIA) to specific internet addictions such as social media addiction (SMA) and internet gaming disorder (IGD). However, to date, no study has investigated such internet addictions among persons with dyslexia. The present study aimed to investigate whether differences exist between adults with dyslexia and controls in terms of GIA, SMA and IGD. A total of 141 adults with dyslexia and 150 controls (all UK based) were recruited. Controlling for age, gender, marital status, employment, and income levels, it was found that adults with dyslexia had higher levels of GIA and IGD compared to controls. However, these participants did not show any significant difference in terms of SMA. The results indicate that internet addictions may have a larger ambit for learning disorders beyond just ASD and ADHD and could be a hidden problem for these individuals.

Reference: KUMAR, S.; JACKSON, S.; PETRONZI, D. A preliminary study into internet related addictions among adults with dyslexia. *PloS One*, [s. l.], v. 18, n. 2, e0280555, 2023.

13. Understanding mental health in developmental dyslexia: a scoping review. (Compreendendo a saúde mental na dislexia do desenvolvimento: uma revisão de escopo).

Abstract: Children with dyslexia are at elevated risk of internalising and externalising mental health concerns. Our aim was to scope the extent and nature of the literature investigating factors which may influence this association. We systematically searched the peer-reviewed and grey literature with no restrictions on the date. We included both qualitative and quantitative studies. Inclusion criteria included: a focus on childhood (≤ 18 years) reading/learning difficulties; internalising and/or externalising symptoms; and a potentially modifiable third factor (e.g., self-esteem). Ninetyeight studies met the inclusion criteria. We organised the studies according to individual, family, and community-level third factors. Whilst a range of third factors were identified, relatively few researchers tested associations between the third factor and mental health in the context of dyslexia. Furthermore, there was a focus on primary rather than secondary school experience and a reliance, in many cases, on teacher/parent perspectives on children's mental health. Future researchers are encouraged to explore links between socio-emotional skills, coping strategies, school connectedness, and mental health in the context of dyslexia. Research of this nature is important to assist with the identification of children who are more (or less) at risk of mental health concerns and to inform tailored mental health programs for children with dyslexia.



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Reference: WILMOT, A. et al. Understanding mental health in developmental dyslexia: a scoping review. *International Journal of Environmental Research and Public Health*, [s. l.], v. 20, n. 2, 2023.

14. Growing up with dyslexia: child and parent perspectives on school struggles, self-esteem, and mental health. (Crescendo com dislexia: perspectivas da criança e dos pais sobre dificuldades escolares, autoestima e saúde mental).

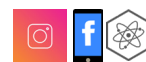
Children with dyslexia, compared with typically reading peers, are at increased risk of internalising (e.g., anxiety) and externalising (e.g., aggression) mental health concerns; why this is the case is largely unknown. Our aim was to explore the socio-emotional experience of growing up with dyslexia from both child and parent perspectives. In so doing, we aimed to gain a better understanding of self-esteem and mental health in the context of dyslexia. One-to-one semistructured interviews with 17 children with reading difficulties (aged 9–14 years; 16 with a diagnosis of dyslexia) and their mothers (interviewed separately) were analysed using Braun and Clarke's reflexive thematic analysis approach with a neurodiversity lens. We developed three themes to address the research aim: (1) Different in a good/bad way; (2) Exhausted and overwhelmed; and (3) It takes a community: Family school connections. Children discussed having “worries” and experiencing school-related stress and embarrassment. Mothers perceived children's internalising and externalising behaviour (meltdowns), school refusal, and homework resistance as emotional responses to children's school struggles due to poor “person-environment fit.” Our analysis highlights the particular importance of parent support, friendship, and school-connectedness for the wellbeing of children with dyslexia.



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Reference: WILMOT, A. et al. Growing up with dyslexia: child and parent perspectives on school struggles, self-esteem, and mental health. *Dyslexia, Chichester: England*, v. 29, n. 1, p. 40–54, 2023.





15. Six major steps to make investigations of suicide valuable for learning and prevention. (Seis passos principais para tornar as investigações sobre suicídio valiosas para o aprendizado e a prevenção).

Abstract – Objective: The decline in suicide rates has leveled off in many countries during the last decade, suggesting that new interventions are needed in the work with suicide prevention. Learnings from investigations of suicide should contribute to the development of these new interventions. However, reviews of investigations have indicated that few new lessons have been learned. To be an effective tool, revisions of the current investigation methods are required. This review aimed to describe the problems with the current approaches to investigations of suicide as patient harm and to propose ways to move forward. **Methods:** Narrative literature review. **Results:** Several weaknesses in the current approaches to investigations were identified. These include failures in embracing patient and system perspectives, not addressing relevant factors, and insufficient competence of the investigation teams. Investigation methods need to encompass the progress of knowledge about suicidal behavior, suicide prevention, and patient safety. **Conclusions:** There is a need for a paradigm shift in the approaches to investigations of suicide as potential patient harm to enable learning and insights valuable for healthcare improvement. Actions to support this paradigm shift include involvement of patients and families, education for investigators, multidisciplinary analysis teams with competence in and access to relevant parts across organizations, and triage of cases for extensive analyses. A new model for the investigation of suicide that support these actions should facilitate this paradigm shift.

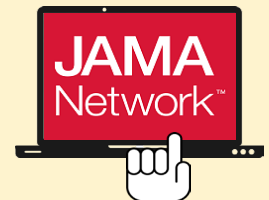


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Reference: FRÖDING, E. *et al.* Six major steps to make investigations of suicide valuable for learning and prevention. **Archives of Suicide Research**, [s. l.], p. 1–19, 2022.

16. Association of 5 α -reductase inhibitors with dementia, depression, and suicide. (Associação de inibidores da 5 α -redutase com demência, depressão e suicídio).

Abstract – Importance: In recent decades, there has been increased interest in the possible adverse neurological effects of 5 α -reductase inhibitors (5-ARIs), which have been used mainly for benign prostatic hyperplasia and androgenic alopecia. Numerous studies and reports have indicated associations of 5-ARIs with depression and suicide. However, most of these studies had methodological shortcomings, and very little is known about the potential association of 5-ARIs with dementia. **Objective:** To investigate the association of 5-ARI use with all-cause dementia, Alzheimer disease, vascular dementia, depression, and suicide. **Main Outcomes and Measures:** A diagnosis of all-cause dementia, Alzheimer disease, vascular dementia, depression, or completed suicide. **Conclusions and Relevance:** This cohort study found that, while men receiving 5-ARI treatment showed a higher risk for dementia in the initial periods after starting treatment, the decreasing magnitude of the association over time suggested that the risk may be, entirely or in part, due to increased dementia detection among patients with benign prostate enlargement. Both finasteride and dutasteride were similarly associated with depression with a constant risk over time, while neither drug was associated with suicide. Prescribing clinicians and potential users should be aware of the possible risks for depression associated with 5-ARI use.



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Reference: GARCIA-ARGIBAY, M. *et al.* Association of 5 α -reductase inhibitors with dementia, depression, and suicide. **JAMA Network Open**, [s. l.], v. 5, n. 12, e2248135, 2022.



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- Instituto Vita Alere de Prevenção e Posvenção do Suicídio
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17. Breast cancer management in the era of Covid-19; key issues, contemporary strategies, and future implications. (Manejo do câncer de mama na era da Covid-19; questões-chave, estratégias contemporâneas e implicações futuras).

Abstract: During the COVID-19 pandemic, several priority diseases were not getting sufficient attention. Whilst breast cancer is a fatal disease affecting millions worldwide, identification and management of these patients did not initially attract critical attention to minimize the impact of lockdown, post-lockdown, and other measures. Breast cancer patients' conditions may not remain stable without proper care, worsening their prognosis. Proper care includes the timely instigation of surgery, systemic therapy, and psychological support. This includes low-and middle-income countries where there are already concerns with available personnel and medicines to adequately identify and treat these patients. Consequently, there was a need to summarize the current scenario regarding managing breast cancer care during COVID-19 across all countries, including any guidelines developed. We systematically searched three scientific databases and found 76 eligible articles covering the medical strategies of high-income countries versus LMICs. Typically, diagnostic facilities in hospitals were affected at the beginning of the pandemic following the lockdown and other measures. This resulted in more advanced-stage cancers being detected at initial presentation across countries, negatively impacting patient outcomes. Other than increased telemedicine, instigating neo-adjuvant endocrine therapy more often, reducing non-essential visits, and increasing the application of neo-adjuvant chemotherapy to meet the challenges, encouragingly, there was no other significant difference among patients in high-income versus LMICs. Numerous guidelines regarding patient management evolved during the pandemic to address the challenges posed by lockdowns and other measures, which were subsequently adopted by various high-income countries and LMICs to improve patient care. The psychological impact of COVID-19 and associated lockdown measures, especially during the peak of COVID-19 waves, and the subsequent effect on the patient's mental health must also be considered in this high-priority group. We will continue to monitor the situation to provide direction in future pandemics.



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Reference: PRODHAN, A. H. M. S. U. *et al.* Breast cancer management in the era of Covid-19; key issues, contemporary strategies, and future implications. *Breast Cancer (Dove Medical Press)*, [s. l.], v. 15, p. 51–89, 2023.

18. Digital solution in the follow-up of early breast cancer a randomized study. (Solução digital no acompanhamento do câncer de mama inicial um estudo randomizado).

Abstract – Background: After primary treatment, patients with early breast cancer (EBC) are followed-up for at least 5 years. At the Helsinki University Hospital (HUS) surveillance includes appointments at 1, 3 and 5 years, and between pre-planned visits a phone call service operated by a nurse practitioner for counseling about symptoms related to side-effects or potential recurrence. In 2015 HUS launched a digital solution for cancer patients. This study was designed to find out patient preference, Health related (HR) quality of life (QoL) and satisfaction with a digital solution compared to a phone call service during the first year of follow-up. **Material and methods:** Patients with EBC were randomized at the final visit of radiotherapy to surveillance by phone calls or by the digital Noona solution during the first year outside pre-planned visits. After six months the groups were crossed over to the other arm. Primary endpoint was patient preference for either follow-up method among those who had contacted the study nurse at least once by both phone service and digital solution. **Results:** Out of the 765 patients randomized, 142 had contacted the hospital with both methods and were eligible for inclusion in the analyses of the present study. Out of the 142 patients, 56 preferred phone calls, 43 the digital solution while 43 considered both modalities equal. Preference for the digital solution was higher among patients aged 65 or less. There were no differences in HR QoL or overall satisfaction between the modalities. However, the patients rated the timeliness of response better while using the digital solution. **Conclusion:** Of the patients 30% preferred the digital solution, 40% phone calls while 30% found them equal as the primary follow-up method for EBC during the first year outside pre-planned visits. There is a need to include also digital solutions in surveillance of EBC.



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Reference: MATTSON, J. *et al.* Digital solution in the follow-up of early breast cancer a randomized study. *Acta Oncologica, Stockholm: Sweden*, v. 62, n. 5, p. 513–521, 2023.

19. Tumour budding is a novel marker in breast cancer: the clinical application and future prospects. (O brotamento tumoral é um novo marcador no câncer de mama: a aplicação clínica e as perspectivas futuras).

Abstract: Breast cancer (BC) is a group of markedly heterogeneous tumours. There are many subtypes with different biological behaviours and clinicopathological characteristics, leading to significantly different prognosis. Despite significant advances in the treatment of BC, early metastatic is a critical factor for poor prognosis in BC patients. Tumour budding (TB) is considered as the first step process of tumour metastasis and is related to the epithelial–mesenchymal transition (EMT). TB has been observed in a variety of cancers, such as colorectal and gastric cancer, and had been considered as a distinct clinicopathological characteristics for early metastasis. However, TB evaluation standards and clinical application are not uniform in BC, as well as its molecular mechanism is not fully understood. Here, we reviewed the interpretation criteria, mechanism, clinicopathological characteristics and clinical application prospects of TB in BC.



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Reference: HUANG, T. *et al.* Tumour budding is a novel marker in breast cancer: the clinical application and future prospects. *Annals of Medicine*, [s. l.], v. 54, n. 1, p. 1303–1312, 2022.

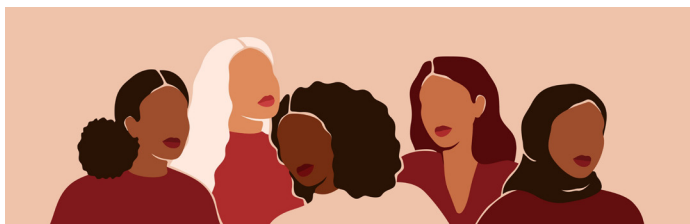


I. PANORAMA MULHERES 2023: o avanço delas na liderança é silencioso, mas contínuo.

O estudo Panorama Mulheres 2023, realizado pelo Talenses Group em conjunto com o Insper e divulgado em primeira-mão por HSM Management, ajuda a enxergar abaixo da superfície e responde a perguntas essenciais sobre a liderança feminina. (Revista HSM Management, 2023)



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III. CÂNCER E GRAVIDEZ: uma relação complexa, mas possível.

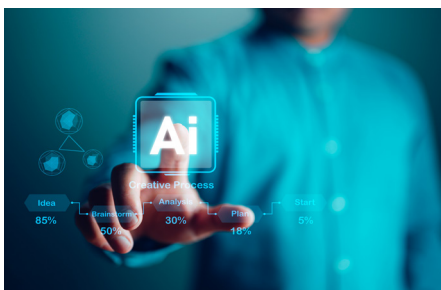
A doença tem acometido pessoas mais jovens, incluindo mulheres em idade fértil. O câncer ainda mata muito mundo afora, cerca de 10 milhões de pessoas por ano. Mas também é verdade que ele mata cada vez menos. As pessoas passam pelo câncer, ressignificam suas vidas e continuam a trabalhar, estudar, sonhar... E engravidar, por que não? (Revista Veja Saúde, 2023)



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V. EMPATIA ARTIFICIAL: a próxima fase da IA.

Inovações recentes acendem alertas sobre possibilidades e desafios na aliança de novas tecnologias com o processo de ensino-aprendizagem formal. O futuro chegou em meio à fascinação e receio do desconhecido, uma Inteligência Artificial ainda mais criativa, ousada – e, aparentemente, ilimitada – tem sido tema de estudos, discussões e embates. (Revista Poli, 2023)



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II. O QUE SÃO MIOMAS UTERINOS? Conheça os sintomas, causas e tratamentos.

Tumores benignos formados no útero tendem a ser assintomáticos, mas devem ser monitorados e, se necessário, retirados cirurgicamente para preservar o órgão. (Revista Veja Saúde, 2023)



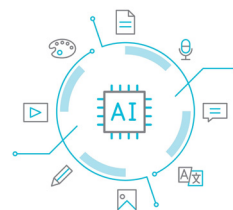
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IV. INTELIGÊNCIA ARTIFICIAL NA EDUCAÇÃO.

Análise de mais de 30 mil artigos sobre mulheres e gênero publicados ao longo de seis décadas evidencia a evolução desse campo do conhecimento no Brasil. Um artigo publicado em novembro na revista científica Scientometrics trouxe dados inéditos sobre a evolução de um campo de pesquisa interdisciplinar que tem produção crescente no Brasil: os estudos sobre a condição feminina e as desigualdades de gênero. (Revista Scientometrics, 2023)



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VI. NOVOS TEMPOS: CANNABIS MEDICINAL GANHA ESPAÇO NO SUS.

Cannabis sativa L., popularmente conhecida no Brasil como planta da maconha, tem se mostrado uma excelente opção no tratamento de diversas condições de saúde. Apesar do acesso restrito devido ao alto preço dos medicamentos, recentes legislações pretendem promover seu fornecimento pelo Sistema Único de Saúde. (Revista Poli, 2023)



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31 de agosto
Dia do Nutricionista

COORDENADORA DE NUTRIÇÃO FALA SOBRE LANCHEIRAS SAUDÁVEIS PARA A TV GLOBO



Nossa coordenadora do curso de Nutrição, Profa. Sandra Chemin, brilhou na tela da TV Globo, participando de uma matéria incrível sobre lancheiras saudáveis para os pequenos. 📺🍎

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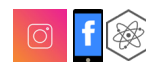


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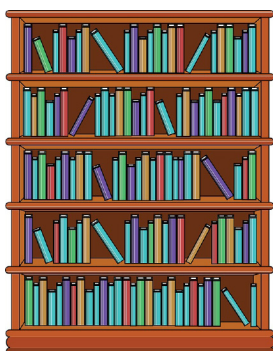


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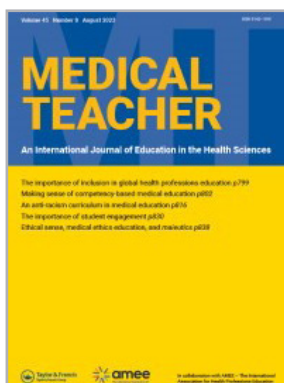
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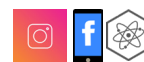
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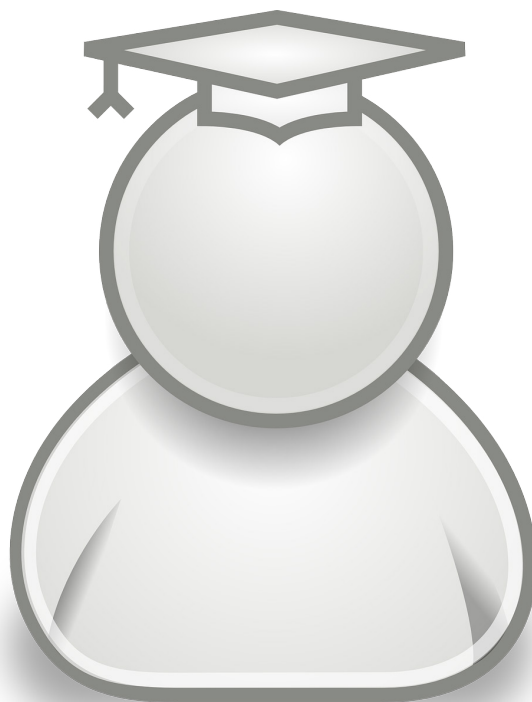
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