

**Evidence Based Medicine**

**ULOGA BIBLIOTEKARA U PRIMENI  
MEDICINE ZASNOVANE NA DOKAZIMA IZ  
KLINIČKE PRAKSE**

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# EVIDENCE BASED MEDICINE

*“Savesna, izričita i razumna primena najboljih dokaza za donošenje odluka u lečenju određenog bolesnika.”*

Sackett D. et al. BMJ 1996; 312:71-72

# KAKO DOĆI DO NAJNOVIJIH DOKAZA

## Zadatak svakog lekara

- pružanje najbolje usluge pacijentu
- dolaženje do prave dijagnoze svojim znanjem i veštinom
- Potreba da se smanjuju greške u dijagnostikovanju i određivanju terapije



## KAKO IZBEĆI GREŠKE



- Ne gubiti vreme u prikupljanju ogromne količine naučnih radova, nepotrebno je i nedovoljno za rad spacijentom
- Polovina medicinskih informacija zastareva od 3 do 7 godina
- Greške su često ishod vremenskog raskoraka između zastarelih naučnih radova-“dokaza” i kliničke prakse

# Pravilno lečenje

**Brzo dijagnostikovanje  
i određivanje terapije**

**Medicinska dokumentacija o pacijentu**

**Razgovor s pacijentom**

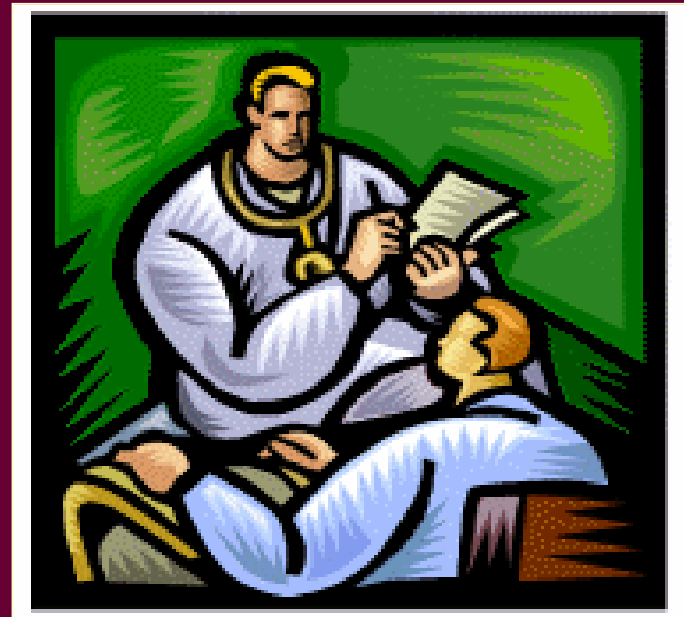
**Najnoviji dokazi –istraživanja  
vodiči kliničke prakse-guidelines**

# POSVEĆENOST PACIJENTU KAO OSOBI

- **ORIJENTISANOST  
PREMA PACIJENTU**

umesto

- **ORIJENTISANOST  
PREMA BOLESTI**



*Studije pokazuju da kliničari provode oko 10 -15 minuta nedeljno s pacijentom...*

## **Za razgovor s pacijentom potrebno je**

- Obezbedi **POTREBNE PODATKE O BOLESTI PACIJENTA** (istorija bolesti)
- Posedovati **KRITIČNOST** u odnosu na nasleđene, tradicionalne metode lečenja
- Izvršiti **SELEKCIJU** najnovijih informacija
- **STARI PROTOKOLI** nemaju uvek adekvatnu primenu

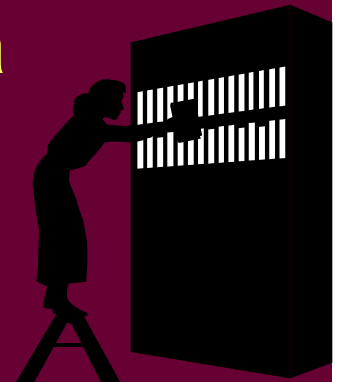


# ULOGA BIBLIOTEKARA

**Bibliotekari u medicinskim ustanovama  
dobijaju sve veću ulogu**

Nekada...

- Pružanje literature koja je bibliotekarima bila na raspolaganju





# BIBLIOTEKAR PRED NOVIM ZADACIMA I IZAZOVIMA...

## Danas .....kompjuteri.....Internet,,,

- Svakodnevni napredak u medicinskim istraživanjima
- Konstantno profesionalno usavršavanje bibliotekara informatora
- Praćenje novina u informatičkom bibliotekarstvu
- Sve veći broj baza podataka



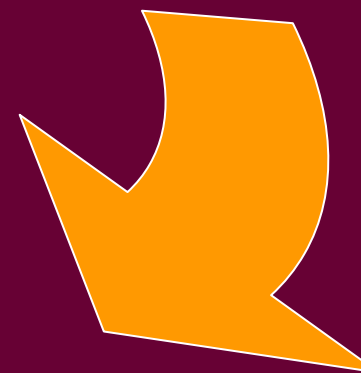
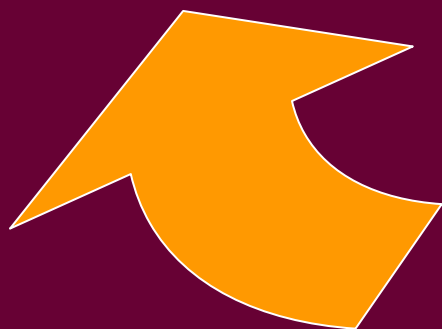
# ODABIR SERVISA –«ALATA»



Od bibliotekara  
informatora  
zavisi odabir servisa

Adekvatan servis  
pruža  
brzu i pravu informaciju

Prava informacija  
dovodi do kvalitetne  
brige o pacijentu



# BROJNI IZVORI INFORMACIJA ZAHTEVAJU

Usavršavanje  
u pretraživanju  
biomedicinskih baza

Savladjivanje medicinske  
terminologije

Poznavanje medicinske  
terminologije  
skraćuje postupak  
pretraživanja

Saradnja bibliotekara  
i zdravstvenih radnika

# FILTRIRANJE KVALITETNIH INFORMACIJA

Kada dođe do željene informacije  
bibliotekar ima zadatak da:

identifikuje

odabere

vrednuje

sistematizuje literaturu



## OD ČEGA ZAVISI ODABIR SERVISA-BAZE

Količina informacija

Kvalitet časopisa (njihov IF)

Lakoća dolaženja do informacija

Dostupnost radovima u punom obliku

Vremenski embargo kojim  
baza ograničava  
dostupnost radovima

Količina servisa  
koje obuhvata određena baza  
(*ScienceDirect,*  
*SprigerLink, ProQuest*  
*baze obuhvaćene u HINARI i OVID bazi*)

GUIDELINES, vodiči kliničke prakse

# EVIDENCE BASED MEDICINE IZVORI

- Cochrane Database of Systematic Reviews  
CDSR
- FIRSTConsult
- National Guideline Clearinghouse
- Cochrane Central Register of Controlled Trials  
CCTR

- ACP Journal Club  
by the American College  
of Physicians
- Clinical Evidence
- Definitive Controlled  
Trials
- The Database of  
Abstracts of  
Review of Effectiveness  
DARE

# **ZAŠTO OVID?**

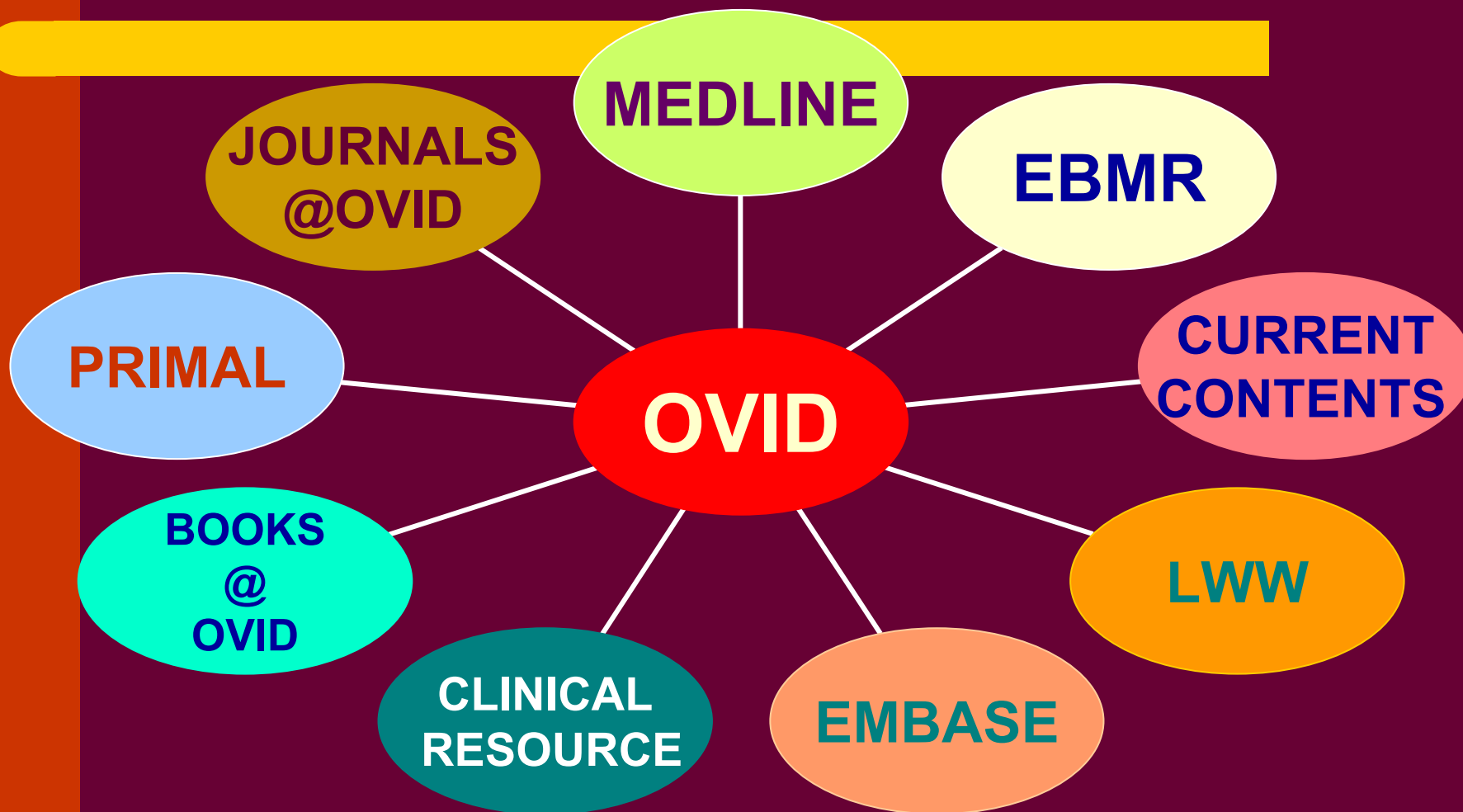
**Nema vremenskog ograničavanja  
u dostupnosti literature**

**Lako rukovanje**

**U pretraživanje uključen MeSH  
(Medical Subject Headings)**

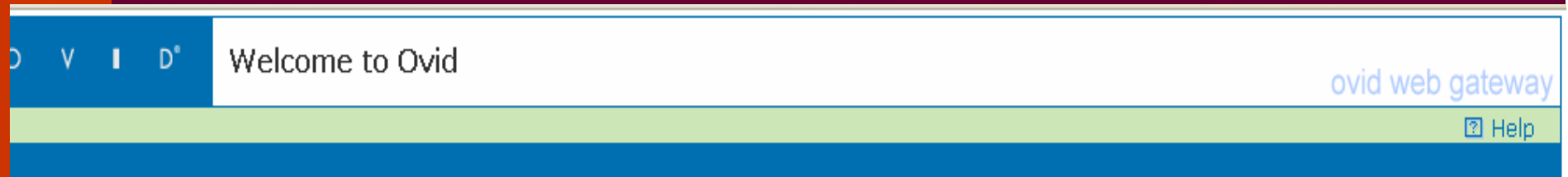


# OVID NIJE JEDNA BAZA VEĆ SKUP BAZA.....



<http://gateway.ovid.com/>

ID sava  
PW ovid06



**To start a session with Ovid:**

- Enter your user ID and password below
- Choose a user mode (Basic or Advanced)
- Click the "Start Ovid" button once

**LOGIN**

ID:

Password:

Mode:  Basic  
 Advanced  
 Find Citation

**START OVID**

If you wish to bookmark this site, please do so at this page.

# Odaberite bazu - kliknite u kvadratić s leve strane imena e-izvora

The screenshot shows the Ovid web gateway interface for selecting a database. At the top, there is a navigation bar with icons for home, search, and other functions, and the text "Choose a database". On the right side of the navigation bar, there are links for "Help" and "LOGOFF". Below the navigation bar, there is a green box containing "Hints" and instructions on how to use the interface. A red button labeled "CONTINUE >>" is positioned above a list of databases. Each database entry includes a checkbox, an information icon, the database name, and its coverage period.

Choose a database

ovid web gateway

Help | LOGOFF

**?** Hints:  
-- To **begin a search**, click the name of the desired database OR select more than one database and click "Continue".  
-- To **get more information** about a database, click the information icon: **i**  
-- NOTE: Databases that don't have a checkbox next to them can not be included in multifile searching.

**CONTINUE >>**

- i** [Primal Pictures](#)
- i** [Books@Ovid](#) November 1, 2006
- i** [Journals@Ovid Full Text](#) November 1, 2006
- i** [Your Journals@Ovid](#)
- i** [LWW Journals@Ovid](#)
- i** [EBM Reviews - ACP Journal Club](#) 1991 to September/October 2006
- i** [EBM Reviews - Cochrane Central Register of Controlled Trials](#) 4th Quarter 2006
- i** [EBM Reviews - Cochrane Database of Systematic Reviews](#) 3rd Quarter 2006
- i** [EBM Reviews - Database of Abstracts of Reviews of Effects](#) 4th Quarter 2006
- i** [EBM Reviews Full Text - Cochrane DSR, ACP Journal Club, and DARE](#)
- i** [All EBM Reviews - Cochrane DSR, ACP Journal Club, DARE, and CCTR](#)
- i** [Current Contents/All Editions](#) 1993 Week 27 to 2006 Week 45
- i** [EMBASE](#) 1996 to 2006 Week 43
- i** [EMBASE](#) 1988 to 2006 Week 43

CONTINUE »

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[EBM Reviews - ACP Journal Club](#) 1991 to September/October 2006

[EBM Reviews - Cochrane Central Register of Controlled Trials](#) 4th Quarter 2006

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[All EBM Reviews - Cochrane DSR, ACP Journal Club, DARE, and CCTR](#)

[Current Contents/All Editions](#) 1993 Week 27 to 2006 Week 45

[EMBASE](#) 1996 to 2006 Week 43

[EMBASE](#) 1988 to 2006 Week 43

[EMBASE](#) 1980 to 2006 Week 43

[EMBASE](#) 1988 to 1995

[EMBASE](#) 1980 to 1987

[Ovid MEDLINE\(R\) In-Process & Other Non-Indexed Citations and Ovid MEDLINE\(R\)](#) 1966 to Present

[Ovid MEDLINE\(R\)](#) 1966 to October Week 4 2006

# key words: hormone replacement therapy

Journals@Ovid, Your Journals@Ovid, LWW Journals@Ovid, ACP Journal Club, CCTR, CDSR... ovid web gateway

[Change Database](#) | [Help](#) | [LOGOFF](#)

[Personal Account \(for Searches\)](#) | [Saved Searches/Alerts](#) | [PayPerView Account](#) | [View Cart](#)

#	Search History	Results	Display
-	-	-	-

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

[Advanced Search](#) | [Basic Search](#) | [Find Citation](#) | [More Fields](#) | [Search Tools](#)

[Keyword](#) | [Author](#) | [Title](#) | [Journal](#)

Enter **Keyword** or phrase (use "\$" for truncation):

[SEARCH](#)

**Limits** [More Limits](#)

<input type="checkbox"/> Abstracts	<input type="checkbox"/> Diagnosis	<input type="checkbox"/> EBM Trends
<input type="checkbox"/> Embase Records	<input type="checkbox"/> English Language	<input type="checkbox"/> Full Text
<input type="checkbox"/> In Process	<input type="checkbox"/> Medline Records	<input type="checkbox"/> New Reviews
<input type="checkbox"/> Original Articles	<input type="checkbox"/> Prognosis	<input type="checkbox"/> Protocols
<input type="checkbox"/> Recently Updated Reviews	<input type="checkbox"/> Review Articles	<input type="checkbox"/> Systematic Reviews
<input type="checkbox"/> Therapeutics	<input type="checkbox"/> Articles	<input type="checkbox"/> Articles with Abstracts
<input type="checkbox"/> Core Clinical Journals (AIM)	<input type="checkbox"/> Daily Update	<input type="checkbox"/> EBM Reviews
<input type="checkbox"/> Etiology	<input type="checkbox"/> Full Text	<input type="checkbox"/> Human
<input type="checkbox"/> Humans	<input type="checkbox"/> In Data Review	<input type="checkbox"/> Latest Update
<input type="checkbox"/> Ovid Full Text Available	<input type="checkbox"/> PsycARTICLES	<input type="checkbox"/> PubMed Not MEDLINE

#	Search History	Results	Display
28	limit 27 to embase records [Limit not valid in: Journals@Ovid,LWW Journals@Ovid,ACP Journal Club,CDSR,DARE,EMBASE,Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations,Ovid MEDLINE(R),Ovid MEDLINE(R) Daily Update; records were retained]	25527	DISPLAY
29	limit 28 to full text [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated]	15063	DISPLAY
30	limit 29 to ovid full text available [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated]	14026	DISPLAY
31	<b>hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]</b>	36026	DISPLAY

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

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[Keyword](#) | [Author](#) | [Title](#) | [Journal](#)

Enter **Keyword** or phrase (use "\$" for truncation):

SEARCH

[Limits](#) | [More Limits](#)

Done

# Suzićemo broj rezultata dodavši i podatak o autoru ako o njemu imamo podatak

Journal@Ovid, LWW Journal@Ovid, ACP Journal Club, CCTR, CDSR, DARE... ovid web gateway

Change Database | Help | LOGOFF

Personal Account (for Searches) | Saved Searches/Alerts | PayPerView Account | View Cart

#	Search History	Results	Display
28	limit 27 to embase records [Limit not valid in: Journals@Ovid,LWW Journal@Ovid,ACP Journal Club,CDSR,DARE,EMBASE,Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations,Ovid MEDLINE(R),Ovid MEDLINE(R) Daily Update; records were retained]	25527	DISPLAY
29	limit 28 to full text [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated]	15063	DISPLAY
30	limit 29 to ovid full text available [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated]	14026	DISPLAY
31	<b>hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]</b>	36026	DISPLAY

Combine Searches | Delete Searches | Save Search/Alert | Remove Duplicates

Advanced Search | Basic Search | Find Citation

--Enter your search in **one or both fields** below and then click the "Search" button--

**Keywords:**

**Author (eg, Smith A):**

**SEARCH**

# Ako se desi da dobijemo 0 pogodaka odlučujemo se za kombinovano pretraživanje

Journals@Ovid, LWW Journals@Ovid, ACP Journal Club, CCTR, CDSR, DARE... [ovid web gateway](#)

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#	Search History	Results	Display
29	limit 28 to full text [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated] <a href="#">Details</a>	15063	<a href="#">DISPLAY</a>
30	limit 29 to ovid full text available [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated] <a href="#">Details</a>	14026	<a href="#">DISPLAY</a>
31	hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm] <a href="#">Details</a>	36026	<a href="#">DISPLAY</a>
32	<b>hormone replacement therapy.mp. and (Ziegler CG\$ or CG Ziegler\$).au. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]</b> <a href="#">Details</a>	0	-

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

[Advanced Search](#) | [Basic Search](#) | [Find Citation](#)

--Enter your search in **one or both fields** below and then click the "Search" button--

**Keywords:**

**Author (eg, Smith A):**

[SEARCH](#)

Limits



# Autor - 9 pogodaka

Journals@Ovid, LWW Journals@Ovid, ACP Journal Club, CCTR, CDSR, DARE... [ovid web gateway](#)

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[Personal Account \(for Searches\)](#) | [Saved Searches/Alerts](#) | [PayPerView Account](#) | [View Cart](#)

#	Search History	Results	Display
30	limit 29 to ovid full text available [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated]	14026	<a href="#">DISPLAY</a>
31	hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]	36026	<a href="#">DISPLAY</a>
32	hormone replacement therapy.mp. and (Ziegler CG\$ or CG Ziegler\$).au. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]	0	-
33	<b>(Ziegler CG\$ or CG Ziegler\$).au. [Ziegler CG as author]</b>	9	<a href="#">DISPLAY</a>

[Combine Searches](#) [Delete Searches](#) [Save Search/Alert](#) [Remove Duplicates](#)

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--Enter your search in **one or both fields** below and then click the "Search" button--

**Keywords:**

**Author** (eg, Smith A):  
 [SEARCH](#)

**Limits**  
Done

#	Search History	Results	Display
30	limit 29 to ovid full text available [Limit not valid in: ACP Journal Club,CDSR,DARE; records were eliminated] <a href="#">Details</a>	14026	DISPLAY
31	hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm] <a href="#">Details</a>	36026	DISPLAY
32	hormone replacement therapy.mp. and (Ziegler CG\$ or CG Ziegler\$).au. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm] <a href="#">Details</a>	0	-
33	<b>(Ziegler CG\$ or CG Ziegler\$).au. [Ziegler CG as author]</b> <a href="#">Details</a>	9	DISPLAY

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

[Advanced Search](#) | [Basic Search](#) | [Find Citation](#) | [More Fields](#) | [Search Tools](#)

Keyword |  Author |  Title |  Journal

Enter full **journal** name, no abbreviations. If name unknown, truncate with "\$" (e.g. diabetes\$).

**Limits** [More Limits](#)

Abstracts |  Diagnosis |  FRM Trends

# Kombinovanje rezultata

The screenshot shows a web browser window with the address bar displaying 'Combine Searches'. The browser's toolbar includes various services like Mail, My Yahoo!, Answers, Games, Music, and Personals. The page header features the 'ovid web gateway' logo and navigation links for 'Main Search Page', 'Help', and 'LOGOFF'.

Below the header, there is a section for combining searches. It shows a dropdown menu set to 'AND' and a 'CONTINUE >>' button. A table displays the search results for each search history entry.

Select	#	Search History	Results
<input checked="" type="checkbox"/>	31	hormone replacement therapy.mp. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]	36026
<input type="checkbox"/>	32	hormone replacement therapy.mp. and (Ziegler CG\$ or CG Ziegler\$).au. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]	0
<input checked="" type="checkbox"/>	33	(Ziegler CG\$ or CG Ziegler\$).au. [Ziegler CG as author]	9
<input type="checkbox"/>	34	<b>(Hormone and Metobolic Research\$).m_jour.</b>	<b>0</b>

Below the table, there is a 'Hints' section with a question mark icon. It contains four bullet points:

- Click two or more "select" boxes
- Choose Combine with **AND** to search for the **intersection** of two or more searches.
- Choose Combine with **OR** to search for the **union** of two or more searches.
- Click "Continue" when you are ready to post the search

At the bottom of the page, there is a copyright notice: 'Copyright (c) 2000-2006 Ovid Technologies, Inc. Version: rel10.3.2, SourceID 1.12052.1.159'. The browser's status bar at the very bottom shows 'Done'.

Dešava se da kombinovanje podatka o autoru sa podatkom o ključnim rečima ne da nijedan pogodak, ostaje autor = 9 pogodaka, klikom na DISPLAY otvara se strana sa sadržajem radova

Journals@Ovid, LWW Journals@Ovid, ACP Journal Club, CCTR, CDSR, DARE... [ovid web gateway](#)

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[Personal Account \(for Searches\)](#) | [Saved Searches/Alerts](#) | [PayPerView Account](#) | [View Cart](#)

#	Search History	Results	Display
32	hormone replacement therapy.mp. and (Ziegler CG\$ or CG Ziegler\$).au. [mp=ti, ot, ab, tx, ct, sh, kw, hw, tn, dm, mf, nm]	0	-
33	(Ziegler CG\$ or CG Ziegler\$).au. [Ziegler CG as author]	9	<a href="#">DISPLAY</a>
34	(Hormone and Metobolic Research\$).m_jour.	0	-
35	31 and 33	0	-

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

[Advanced Search](#) | [Basic Search](#) | [Find Citation](#) | [More Fields](#) | [Search Tools](#)

[Keyword](#) | [Author](#) | [Title](#) | [Journal](#)

Enter **Keyword** or phrase (use "\$" for truncation):

[SEARCH](#)

**Limits** [More Limits](#)

<input type="checkbox"/> Abstracts	<input type="checkbox"/> Diagnosis	<input type="checkbox"/> EBM Trends
<input type="checkbox"/> Embase Records	<input type="checkbox"/> English Language	<input type="checkbox"/> Full Text
<input type="checkbox"/> In Process	<input type="checkbox"/> Medline Records	<input type="checkbox"/> New Reviews

# Kada postoji oznaka Ovid full text znači da je rad u punom obliku

[Find Similar](#) | [Find Citing Articles](#)

---

2. EMBASE Schmid M. **Ziegler** CG, Steinlein C, Nanda I, Scharl M. **Cytogenetics of the bleak (*Alburnus alburnus*), with special emphasis on the B chromosomes.** [Journal: Article] *Chromosome Research*. Vol. 14(3)(pp 231-242), 2006. AN: 2006190879 [Abstract](#) [Complete Reference](#) [Ovid Full Text](#)

[Find Similar](#) | [Find Citing Articles](#)

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3. EMBASE **Ziegler** CG, Bornstein SR. **Incidentaloma and aberrant neuroendocrine regulation.** [Journal: Note] *Hormone & Metabolic Research*. Vol. 37(8)(pp 528-529), 2005. AN: 2005416567 [Complete Reference](#)

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4. EMBASE Schmid M. **Ziegler** CG, Steinlein C, Nanda I, Haaf T. **Chromosome banding in amphibia: XXIV. The B chromosomes of *Gastrotheca espeletia* (Anura, Hylidae).** [Journal: Article] *Cytogenetic & Genome Research*. Vol. 97(3-4)(pp 205-218), 2002. AN: 2003493421 [Abstract](#) [Complete Reference](#)

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5. EMBASE **Ziegler** CG, Lamatsch DK, Steinlein C, Engel W, Scharl M, Schmid M. **The giant B chromosome of the cyprinid fish *Alburnus alburnus* harbours a retrotransposon-derived repetitive DNA sequence.** [Journal: Article] *Chromosome Research*. Vol. 11(1)(pp 23-35), 2003. AN: 2003114375 [Abstract](#) [Complete Reference](#) [Ovid Full Text](#)

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6. Ovid MEDLINE(R) Schmid M. **Ziegler** CG, Steinlein C, Nanda I, Scharl M. **Cytogenetics of the bleak (*Alburnus alburnus*), with special emphasis on the B chromosomes.** [Journal Article] *Chromosome Research*. Vol. 14(3):231-42, 2006. AN: 2006190879 [Abstract](#) [Complete Reference](#)

# Ako su nam poznati svi podaci koje tražimo, možemo referencu naći i preko FIND CITATION

Go back one page

Journals@Ovid, Your Journals@Ovid, LWW Journals@Ovid, ACP Journal Club, CCTR, CDSR... [ovid web gateway](#)

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#	Search History	Results	Display
-	-	-	-

[Combine Searches](#) | [Delete Searches](#) | [Save Search/Alert](#) | [Remove Duplicates](#)

[Advanced Search](#) | [Basic Search](#) | [Find Citation](#)

**Journal Identifier**

Article Title:

Journal Name:   Truncate Name (adds "\$")

Author Surname:   Truncate Name (adds "\$")

Volume:  Issue:  Article First Page:

Publication Year:  (e.g., "2005")

**Hint:** Use truncation if you don't have the full journal or author names (e.g., using truncation, "Ang" will find "Angiogenesis" and "Angiology"; "Smith G" will find "Smith, Glen" and "Smith, George").

[SEARCH](#)

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Version: rel10.3.2, SourceID 1.12052.1.159


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# CLINICAL RESOURCE AT OVID (CR@O)

- **Proizvod OVID platforme**
- **Dizajniran da obezbedi brze odgovore na pitanja kliničara**
- **Omogućava detaljno pretraživanje na jednostavan način**

<http://clinicalresource.ovid.com>

**ID**    **sava**  
**PW**    **ovid06**



LOG IN

User Name:

Password:

The image shows a blue login form with two input fields and a submit button. The submit button is a square with a right-pointing triangle, circled in pink. Below the form is a white horizontal bar.



Ne koriste se ključne reči već se pitanje postavlja  
“prirodnim jezikom”, odabire se servis ili servisi za  
pretraživanje

ClinicalResource@Ovid - Mozilla Firefox

File Edit View History Bookmarks Tools Help

http://clinicalresource.ovid.com/clinicalresource/re/search

Customize Links Free Hotmail Windows Marketplace Windows Media Windows Institute of Oncology... KoBSON - Konzorciju... SezamPro On-line We...

ClinicalResource@Ovid

Help | Logoff

Welcome : sava 02 Nov 2006

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CLINICAL SEARCH DRUG INFORMATION GUIDELINES PATIENT HANDOUTS BOOKS

Search Results: What is the treatment of positive lymph node in breast neoplasm

What is the treatment of positive lymph node in breast

**Select Resources:**

- Clin-evidence Evidence-Based Guidelines
- Books
- EBM Articles
- Facts & Comparisons Drug Information
- MEDLINE 1996-present
- Guidelines
- Patient Handouts

**Quick Interaction Checker:**

Drug 1:

Drug 2:

**ICD9-CM Code Lookup:**

Done

Search Results: What is the treatment of positive lymph node in breast neoplasm

Quick Hits	Evidence Based Medicine				MEDLINE® In-Process & Other Non-Indexed			
	Clin-equide	Books	Articles	Drug Information	MEDLINE	Citations	Guidelines	Patient Handouts
19	0	82	240	7	92	157	1	6

**Books** [\[view all 82 results\]](#)

- ★★★★★ [Principles of Ambulatory Medicine](#)  
[+] [Diseases of the Breast](#)
- ★★★★★ [Cancer: Principles & Practice of Oncology](#)  
[+] [SECTION 2: Malignant Tumors of the Breast](#)
- ★★★ [Martindale: The Complete Drug Reference](#)  
[+] [Patent Blue V](#)

**Evidence Based Medicine Articles** [\[view all 240 results\]](#)

- ★★★★★ 1. **Prognostic significance of tumor grade in clinical trials of adjuvant therapy for breast cancer with axillary lymph node metastasis**  
*Cancer* 1986 [Randomized Controlled Trial] EBM Reviews - Cochrane Central Register of Controlled Trials <4th Quarter 2006>  
[Abstract](#) | [Complete Reference](#)
- ★★★★★ 2. **Postoperative loco-regional radiation therapy for breast cancer patients with four or more involved lymph nodes or extracapsular extension.**  
*The Israel Medical Association journal : IMAJ* 2005 [Clinical Trial, Controlled Clinical Trial, Journal Article] EBM Reviews - Cochrane Central Register of Controlled Trials <4th Quarter 2006>  
[Abstract](#) | [Complete Reference](#)
- ★★★★★ 3. **Endoscopic exploration and lymph node sampling of the axilla. Preliminary findings of a randomized pilot study comparing clinical and anatomic-pathologic results of endoscopic axillary lymph node sampling with traditional surgical treatment.**  
*European journal of obstetrics, gynecology, and reproductive biology* 1996 [Clinical Trial, Journal Article, Randomized Controlled Trial] EBM Reviews - Cochrane Central Register of Controlled Trials <4th Quarter 2006>  
[Abstract](#) | [Complete Reference](#)

**Drug Information** [\[view all 7 results\]](#)

- ★★★ 1. [CORTISONE](#) > Drug Facts & Comparisons

CLINICAL SEARCH

R<sub>x</sub> DRUG INFORMATION

GUIDELINES

PATIENT HANDOUTS

BOOKS

Search Results: [What is the treatment for Alzheimer's Disease](#)

## QUICK SEARCH

All Content

## DRUG INTERACTION CHECKER

Drug 1

Drug 2

Drug Facts &amp; Comparisons

Drug Facts &amp; Comparisons [A-Z]

A to Z Drug Facts [A-Z]

Drug Interaction Facts [A-Z]

MedFacts Patient Handouts [A-Z]

Review of Natural Products [A-Z]

1. "quick search" - ukucava se generičko ime leka
2. hemijska svojstva
3. Interakcija sa drugim lekovima i kontraindikacije
4. podaci o lekovima od A do Z
5. U odnosu na određenu bolest pokazuje se koji lek odgovara datoj bolesti

# Drug information

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CLINICAL SEARCH **R<sub>x</sub> DRUG INFORMATION** GUIDELINES PATIENT HANDOUTS BOOKS

All Content

**Drug Facts & Comparisons**

- [+] Appendix
- [+] DFC Keepup
- [+] Anti-infective Agents
- [+] Antineoplastic Agents
- [+] Biologic and Immunological Agents
- [+] Cardiovascular Agents
- [+] Central Nervous System Agents
- [+] Dermatological Agents
- [+] Diagnostic Aids
- [+] Endocrine and Metabolic Agents
- [+] Gastrointestinal Agents
- [+] Hematological Agents
- [+] Nutrients and Nutritional Agents
- [+] Ophthalmic and Otic Agents
- [+] Renal and Genitourinary Agents
- [+] Respiratory Agents

**Drug Facts & Comparisons [A-Z]**

**A to Z Drug Facts [A-Z]**

**Drug Interaction Facts [A-Z]**

**MedFacts Patient Handouts [A-Z]**

**Review of Natural Products [A-Z]**

ABCDEF GHIJKLM  
NOPQRST UVWXYZ  
0123456789

**QUICK INTERACTION CHECKER**

Drug 1:

Drug 2:

Done i

# Podaci o interakciji sa drugim lekovima biramo od A-Z

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CLINICAL SEARCH DRUG INFORMATION GUIDELINES PATIENT HANDOUTS BOOKS

QUICK SEARCH  
All Content

**Drug Facts & Comparisons** ▶  
**Drug Facts & Comparisons [A-Z]** ▶  
**A to Z Drug Facts [A-Z]** ▶  
**Drug Interaction Facts [A-Z]** ▼

A B C D E F G H I J K L M  
N O P Q R S T U V W X Y Z  
0 1 2 3 4 5 6 7 8 9

MedFacts Patient Handouts [A-Z] ▶  
Review of Natural Products [A-Z] ▶

180 Drugs

- [Tacrine vs. Cimetidine](#)
- [Tacrine vs. Fluvoxamine](#)
- [Tacrine vs. NSAIDs](#)
- [Tacrolimus vs. Androgens](#)
- [Tacrolimus vs. Azole Antifungal Agents](#)
- [Tacrolimus vs. Chloramphenicol](#)
- [Tacrolimus vs. Clotrimazole](#)
- [Tacrolimus vs. Corticosteroids](#)
- [Tacrolimus vs. Cyclosporine](#)
- [Tacrolimus vs. Diltiazem](#)
- [Tacrolimus vs. Felodipine](#)
- [Tacrolimus vs. Hydantoins](#)
- [Tacrolimus vs. Macrolide & Related Antibiotics](#)
- [Tacrolimus vs. Metoclopramide](#)
- [Tacrolimus vs. Metronidazole](#)
- [Tacrolimus vs. Nefazodone](#)
- [Tacrolimus vs. Nifedipine](#)
- [Tacrolimus vs. Protease Inhibitors](#)
- [Tacrolimus vs. Proton Pump Inhibitors](#)
- [Tacrolimus vs. Rifamycins](#)

Done

QUICK SEARCH  
 All Content  
 Drug Facts & Comparisons  
 Drug Facts & Comparisons [A-Z]  
 A to Z Drug Facts [A-Z]  
 Drug Interaction Facts [A-Z]  
 ABCDEFGHIJKLM  
 NOPQRSTU VWXYZ  
 0123456789  
 MedFacts Patient Handouts [A-Z]  
 Review of Natural Products [A-Z]

DRUG INFORMATION: Tamoxifen vs. Rifamycins

Product List

Tamoxifen* (eg, <b>Nolvadex</b> )	Rifabutin ( <b>Mycobutin</b> )
	Rifampin* (eg, <b>Rifadin</b> )
	Rifapentine ( <b>Priftin</b> )

[\* Asterisk indicates drugs cited in interaction reports. Based on pharmacologic and pharmacokinetic considerations, similiar interactions may occur with other drugs that are listed.]

Interactions

Significance: [2]

Onset	Severity	Documentation
<input type="checkbox"/> Rapid	<input type="checkbox"/> Major	<input type="checkbox"/> Established
<input checked="" type="checkbox"/> Delayed	<input type="checkbox"/> Moderate	<input type="checkbox"/> Probable
	<input type="checkbox"/> Minor	<input type="checkbox"/> Suspected
		<input type="checkbox"/> Possible
		<input type="checkbox"/> Unlikely

**Effects:** Plasma concentrations of TAMOXIFEN may be reduced, decreasing the antiestrogenic effect.

**Mechanism:** RIFAMYCINS increase TAMOXIFEN metabolism by inducing CYP3A4.

**Management:** Monitor the clinical response of the patient. It may be necessary to increase the dose of TAMOXIFEN during coadministration of a RIFAMYCIN.

Discussion

In a randomized, placebo-controlled, crossover trial, the effects of rifampin on the pharmacokinetics of tamoxifen were studied in 10 healthy men.<sup>1</sup> Each subject received either rifampin 600 mg or placebo once daily for 5 days. On day 6, tamoxifen 80 mg was taken. Pretreatment with rifampin reduced the peak plasma levels of tamoxifen 56% (from 145 to 64 ng/mL) and increased plasma levels of its active N-demethyltamoxifen metabolite 46% (from 41 to 60 ng/mL). In addition, rifampin administration decreased the AUC of tamoxifen 86% and the elimination t<sub>1/2</sub> 42% (from 118 to 68 hr).

# MEDFACTS

## Podaci o hemijskom svojstvu leka načinu primene i kontraindikacije

The screenshot shows the MedFacts Patient Info page for Hydrocortisone Sodium Phosphate Injection. The page is titled "MEDFACTS: Hydrocortisone Sodium Phosphate Injection (HIGH-droe-CORE-tih-sone SO-dee-uhm FOSS-fate)". It includes a search bar, navigation tabs for Clinical Search, Drug Information, Guidelines, Patient Handouts, and Books. The main content area displays the drug name, brand name, schedule, and last updated date. The "Actions" section describes the drug's effects on the immune system. The "Indications" section lists conditions treated by the drug. The "Contraindications" section states that the drug should not be taken if the patient is unable to take medicine by mouth.

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CLINICAL SEARCH **R** DRUG INFORMATION GUIDELINES PATIENT HANDOUTS BOOKS

MedFacts Patient Info

All Content

**Drug Facts & Comparisons** ▶  
**Drug Facts & Comparisons [A-Z]** ▶  
**A to Z Drug Facts [A-Z]** ▶  
**Drug Interaction Facts [A-Z]** ▶  
**MedFacts Patient Handouts [A-Z]** ▼

ABCDEFGHI | KLM  
NOPQRSTUVWXYZ  
0123456789

**Review of Natural Products [A-Z]** ▶

**MEDFACTS: Hydrocortisone Sodium Phosphate Injection (HIGH-droe-CORE-tih-sone SO-dee-uhm FOSS-fate)**  
[English / Spanish](#)  
**Brand Name(s): Hydrocortone Phosphate Solution**  
**Schedule:Rx** **Last Updated: 2000**

**Actions**

The naturally occurring adrenal cortical steroids (eg, hydrocortisone and cortisol) have both anti-inflammatory (glucocorticoid) and salt-retaining (mineralocorticoid) activity. The synthetic adrenal cortical steroids (eg, prednisone) have much greater anti-inflammatory (glucocorticoid) than salt-retaining (mineralocorticoid) activity. Glucocorticoids cause varied effects, including reducing inflammation (pain, swelling, redness) and modifying the body's immune system.

The naturally occurring adrenal cortical steroids are used most often for replacement therapy when the adrenal cortex is not functioning properly (adrenocortical deficiency states). The synthetic adrenal cortical steroids can also be used as replacement therapy in adrenocortical deficiency states, but are more often used for their potent anti-inflammatory action.

**Indications**

This medicine is used to treat a variety of conditions, including, but not limited to adrenal cortex insufficiency, inflammatory disorders, allergic disorders, and connective tissue disorders. It should be used when the patient is unable to take medicine by mouth.

**Contraindications**

Do not take this medicine if

Done

# Biljni preparati A-Z

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CLINICAL SEARCH **Rx** DRUG INFORMATION **G** GUIDELINES **P** PATIENT HANDOUTS **B** BOOKS

QUICK SEARCH  
All Content   
**Drug Facts & Comparisons** ▶  
**Drug Facts & Comparisons [A-Z]** ▶  
**A to Z Drug Facts [A-Z]** ▶  
**Drug Interaction Facts [A-Z]** ▶  
**MedFacts Patient Handouts [A-Z]** ▶  
**Review of Natural Products [A-Z]** ▼

ABCDEFGHIJKLMNOPQRSTUVWXYZ  
0123456789

**145** Drugs

- [V. agnus castus](#)
- [V. agnus-castus](#)
- [V. album](#)
- [V. album](#)
- [V. alnifolium](#)
- [V. angustifolium](#)
- [V. californicum](#)
- [V. coignetiae](#)
- [V. edule](#)
- [V. erythrocarpum](#)
- [V. fimbriatum](#)
- [V. formosanum](#)
- [V. fragrans](#)
- [V. frigidum](#)
- [V. hastata](#)
- [V. labrusca](#)
- [V. lasianthum](#)
- [V. maacki](#)
- [V. myrtillus](#)
- [V. nigrum](#)

Done



# Guidelines

The screenshot displays the ClinicalResource@Ovid website interface. At the top, there is a blue navigation bar with the site name and user information. Below this is a secondary navigation bar with tabs for Clinical Search, Drug Information, Guidelines, Patient Handouts, and Books. The main content area is divided into a left sidebar and a main panel. The sidebar contains a 'QUICK SEARCH' box and a list of categories under 'NGC Treatment/ Intervention', each with a plus sign icon. The main panel features a heading 'Locate Guidelines on ClinicalResource@Ovid in 2 ways:' followed by a numbered list of instructions. Below the list, there are two paragraphs of text explaining the NGC guidelines and a note about third-party links. The browser's status bar at the bottom shows 'Done' and some system icons.

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CLINICAL SEARCH | DRUG INFORMATION | **GUIDELINES** | PATIENT HANDOUTS | BOOKS

QUICK SEARCH

**ANZ Guidelines** ▶  
**NGC Disease/ Condition** ▶  
**NGC Treatment/ Intervention** ▼

- [+] Amino Acids, Peptides, and Proteins
- [+] Anti-Allergic and Respiratory System Agents
- [+] Anti-Inflammatory Agents, Antirheumatic Agents, and Inflammation Mediators
- [+] Antineoplastic and Immunosuppressive Agents
- [+] Biomedical and Dental Materials
- [+] Carbohydrates
- [+] Cardiovascular Agents
- [+] Central Nervous System Agents
- [+] Chemical Actions and Uses
- [+] Complex Mixtures
- [+] Dermatologic Agents
- [+] Enzymes and Coenzymes
- [+] Growth Substances, Pigments, and Vitamins
- [+] Hematologic, Gastrointestinal, and Renal Agents
- [+] Heterocyclic Compounds
- [+] Hormones, Hormone Substitutes, and

Done

**Locate Guidelines on ClinicalResource@Ovid in 2 ways:**

1. Enter a keyword or phrase in the Quick Search box on the left
2. Browse by Topic
  - ◊ ANZ - Australia/New Zealand
  - ◊ NGC - National Guideline Clearinghouse

The NGC guidelines in this section are from the National Guideline Clearinghouse (TM) (NGC (TM)), a public resource for evidence-based clinical practice guidelines. NGC is sponsored by the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services, in partnership with the American Medical Association and the American Association of Health Plans.

In addition, ClinicalResource@Ovid contains links to other selected publicly available guidelines at Web sites operated by third parties. Ovid does not control these other Web sites and assumes no liability or responsibility for them, including any content or services provided to you by such site. You should not consider any link to a third party Web site as an endorsement of any such Web site by Ovid.

Guidelines will be displayed in a separate browser window.

**Vodiči kliničke prakse su preuzeti iz  
NATIONAL GUIDELINE CLEARINGHOUSE**

# Guidelines kw : breast cancer

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CLINICAL SEARCH DRUG INFORMATION GUIDELINES PATIENT HANDOUTS BOOKS

QUICK SEARCH

**RESULTS: breast cancer**

Viewing 1-20 of 39 Results | 1-20 | 21-39 | > >>

RANKING	#	TITLE
★★★★★	1.	<a href="#">Clinical practice guidelines for the management of advanced breast cancer - Cancer</a> <i>National Breast Cancer Centre. 2001</i>
★★★★★	2.	<a href="#">Clinical practice guidelines for the management of early breast cancer - Cancer</a> <i>National Breast Cancer Centre Early Breast Cancer Working Group. 2001</i>
★★★★★	3.	<a href="#">Chemoprevention of breast cancer. A joint guideline from the Canadian Task Force on Preventive Health Care and the Canadian Breast Cancer Initiative's Steering Committee on Clinical Practice Guidelines for the Care and Treatment of Breast Cancer. - Neoplasms</a> <i>Canadian Breast Cancer Initiative (Health Canada) - National Government Agency [Non-U.S.] Canadian Task Force on Preventive Health Care - National Government Agency [Non-U.S.]. 2001 Jun. 10 pages. NGC:002083</i>
★★★★★	4.	<a href="#">Guidelines for the Surgical Management of Breast Cancer - Breast</a> <i>Royal Australasian College of Surgeons. 1997</i>
★★★★★	5.	<a href="#">Management of breast cancer in women. A national clinical guideline. - Neoplasms</a> <i>Scottish Intercollegiate Guidelines Network - National Government Agency [Non-U.S.]. 1998 Oct (revised 2005 Dec). 50 pages. NGC:004745</i>
★★★★★	6.	<a href="#">The role of trastuzumab (Herceptin®) in the treatment of women with HER2/neu-overexpressing metastatic breast cancer. - Neoplasms</a> <i>Program in Evidence-based Care - State/Local Government Agency [Non-U.S.]. 2005 Nov 8. 28 pages. NGC:004723</i>
★★★★★	7.	<a href="#">The role of aromatase inhibitors in adjuvant therapy for postmenopausal women with hormone receptor-positive breast cancer: a clinical practice. - Neoplasms</a> <i>Program in Evidence-based Care - State/Local Government Agency [Non-U.S.]. 2005 Oct 25. 36 pages. NGC:004716</i>
★★★★★	8.	<a href="#">American Society of Clinical Oncology guideline recommendations for sentinel lymph node biopsy in early-stage breast cancer. - Neoplasms</a> <i>American Society of Clinical Oncology - Medical Specialty Society. 2005 Oct 20. 18 pages. NGC:004562</i>
★★★★★	9.	<a href="#">Breast cancer treatment. - Neoplasms</a> <i>Institute for Clinical Systems Improvement - Private Nonprofit Organization. 1996 Sep (revised 2005 Sep). 57 pages.</i>

# Iz sadržaja se može pronaći guideline koji nam treba ili se može tražiti pod SEARCH

The screenshot shows the National Guideline Clearinghouse website interface. At the top, there is a header with the logo and name of the National Guideline Clearinghouse, the URL www.guideline.gov, and the AHRQ logo. Below the header is a navigation menu with links for 'hide menu', 'What's New', 'Contact Us', 'About', 'Site Map', and 'Help'. The main content area is divided into several sections:

- Search:** A search box with a dropdown menu showing '40 Results' and a 'Search' button. Below the search box are links for 'Search Help', 'Detailed Search', and 'Frequent Searches'.
- Summary:** A section titled 'Brief Summary' with links for 'Complete Summary', 'XML View', 'Full Text', 'Palm Download', 'MS Word', and 'Adobe PDF'.
- Browse:** A section with a list of links: 'Disease / Condition', 'Treatment / Intervention', 'Measures / Tools', 'Organization', 'Guideline Index', 'Guidelines In Progress', and 'Guideline Archive'.
- Compare:** A section with links for 'View My Collection' and 'Add to My Collection'.

The main content area displays the following information:

## Brief Summary

**GUIDELINE TITLE**  
**American Society of Clinical Oncology guideline recommendations for sentinel lymph node biopsy in early-stage breast cancer.**

**BIBLIOGRAPHIC SOURCE(S)**  
Lyman GH, Giuliano AE, Somerfield MR, Benson AB 3rd, Bodurka DC, Burstein HJ, Cochran AJ, Cody HS 3rd, Edge SB, Galper S, Hayman JA, Kim TY, Perkins CL, Podoloff DA, Sivasubramaniam VH, Turner RR, Wahl R, Weaver DL, Wolff AC, Winer EP. American Society of Clinical Oncology guideline recommendations for sentinel lymph node biopsy in early-stage breast cancer. J Clin Oncol 2005 Oct 20;23(30):7703-20. [147 references]  
[PubMed](#)

**GUIDELINE STATUS**  
This is the current release of the guideline.

**BRIEF SUMMARY CONTENT**

- [RECOMMENDATIONS](#)
- [EVIDENCE SUPPORTING THE RECOMMENDATIONS](#)
- [IDENTIFYING INFORMATION AND AVAILABILITY](#)
- [DISCLAIMER](#)

[Go to the Complete Summary](#)

**RECOMMENDATIONS**

## RECOMMENDATIONS

## MAJOR RECOMMENDATIONS

**How Should The Results Of SNB Be Utilized In Clinical Practice?****Can Full Axillary Lymph Node Dissection (ALND) be Avoided in Patients With Negative Findings on Sentinel Lymph Node Biopsy (SNB)?**

The reported test performance characteristics of SNB vary widely across studies reported in the medical literature. However, when carried out by an experienced team, negative findings appear to be predictive of negative axillary nodes for most patients with breast cancer. Significant predictors of posttest probability include the percentage of patients in the study population with positive axillary nodes and the proportion of successful lymphatic mappings. In addition, the incidence of axillary recurrence after negative findings on SNB is comparable to that following ALND. On the basis of the available evidence, the Panel supports the use of SNB for staging disease in most women with clinically negative axillary lymph nodes. The concept of SNB has been so appealing to physicians and patients that the identification and biopsy of sentinel lymph nodes (SLNs) has largely replaced ALND for patients with clinically and histologically tumor-free lymph nodes. The Panel recommends that suspicious palpable nodes should also be submitted as SLNs, and that, in this context, the surgeon should have a low threshold for default to ALND, particularly for patients whose clinical presentation suggests a high risk of axillary metastasis. SNB works well, with a comparable false-negative rate in the setting of both mastectomy and breast-conserving surgery. Nevertheless, the Panel concluded that, on the basis of the available literature, there are compelling reasons for the operating surgeon to default to ALND, including a failed or technically unsatisfactory SNB procedure, and the presence of clinically suspicious nodes in the axilla after the removal of all SLNs. About half of patients in whom the identified SLN proves to be falsely negative will have had clinically suspicious nodes palpable at surgery, because gross tumor involvement may interfere with the uptake of both radiolabeled colloid and dye and deviate lymph flow to a node other than the true SLN.

**Is Full ALND Necessary for All Patients With Positive Findings on SNB?**

The recently reported meta-analysis demonstrates that, among patients with a positive SLN, 48.3% (95% CI, 35 to 62) were found to have additional node disease on ALND. Thus, the Panel recommends routine ALND for patients with a positive SLN according to routine histopathologic examination. More problematic is the management of patients for whom the SLN is positive only with use of special studies, primarily immunohistochemical (IHC) analysis with antibodies to cytokeratin. IHC evaluation can upstage disease for

# Kako informisati pacijenta?

The screenshot shows the ClinicalResource@Ovid website interface. At the top, there is a navigation bar with links for 'CLINICAL SEARCH', 'DRUG INFORMATION', 'GUIDELINES', 'PATIENT HANDOUTS', and 'BOOKS'. The main content area is titled 'Childhood Cancer' and includes sections for 'What is cancer?', 'The most common childhood cancers include:', 'What is the cause?', 'What are the symptoms?', and 'What is the treatment?'. A sidebar on the left contains a 'QUICK SEARCH' box and various topic categories like 'SPECIALTY', 'ADULT HEALTH TOPICS', 'PEDIATRIC HEALTH TOPICS', 'SENIOR HEALTH TOPICS', and 'WOMEN'S HEALTH TOPICS'. The page footer shows 'Done'.

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CLINICAL SEARCH R DRUG INFORMATION + GUIDELINES + PATIENT HANDOUTS + BOOKS

QUICK SEARCH

SPECIALTY ▶  
ADULT HEALTH TOPICS [A-Z] ▶  
PEDIATRIC HEALTH TOPICS [A-Z] ▼  
A B C D E F G H I J K L M  
N O P Q R S T U V W X Y Z  
0 1 2 3 4 5 6 7 8 9  
SENIOR HEALTH TOPICS [A-Z] ▶  
WOMEN'S HEALTH TOPICS [A-Z] ▶

## Childhood Cancer

### What is cancer?

Cancer means that some of cells in your body are no longer functioning normally. These abnormal cells multiply and grow out of control. The cancer cells kill good cells and grow in abnormal shapes and sizes. The cancer cells may eventually spread to other parts of the body. There are different kinds of cancer depending on the type of cancer cell and where in the body the abnormal cells are growing.

The most common childhood cancers include:

- leukemia, which is cancer of the blood
- lymphoma, which is cancer of the lymph nodes.
- brain cancer
- bone cancer
- kidney cancer
- sarcoma, which is an abnormal growth of muscles and other soft tissues.

Although cancer is rare in children, it is still the leading cause of death by disease in children ages 1 to 14.

### What is the cause?

What causes cancer in children is not known. In children, the cell changes occur randomly and there is no way to prevent them. It is possible that certain chemicals may cause some cancers to form. Some viruses, including hepatitis B virus, are associated with the development of certain cancers. Genetics may have something to do with the cause of other cancers.

### What are the symptoms?

There is no one common symptom for childhood cancer. This makes it hard to diagnose cancer at first. Fevers, loss of appetite, pain, and swollen glands may occur. Other symptoms depend on the type of cancer and where the cancer is in the body.

### What is the treatment?

Treatment for cancer may require more than one therapy. The focus of cancer treatment is to slow and eventually kill abnormal cells without hurting healthy ones.

Cancer therapy may include:

Done

# Edukacija pacijenata

The screenshot displays the ClinicalResource@Ovid website interface. At the top, there is a navigation bar with links for 'Help | Logoff', 'Welcome : sava 02 Nov 2006', and 'Legal Disclaimer | Privacy Policy | Contact Us | Jump to Ovid Web Gateway'. Below this is a secondary navigation bar with buttons for 'CLINICAL SEARCH', 'DRUG INFORMATION', 'GUIDELINES', 'PATIENT HANDOUTS', and 'BOOKS'. On the left side, there is a 'QUICK SEARCH' box and a 'SPECIALTY' dropdown menu. The 'SPECIALTY' menu is expanded, showing various categories such as Behavioral & Social Sciences, Clinical Medicine, Health Professions, Life Sciences, Nursing, Patient Education, Health & Fitness, Legal / Social / Family / End-of-Life, Safety, Wellness, and several 'Ask About Your Medicines' and 'Baby Equipment and Supplies' topics. The main content area is titled 'Benefits of Quitting Smoking' and includes a 'Related Topics' link. The text discusses why one should quit smoking, the benefits of quitting, and addresses common arguments for continuing to smoke, such as 'I have to die sometime, so I might as well enjoy life until then.', 'I'm only hurting myself.', and 'I know people who smoke and live to a ripe old age in perfect health.' The page also includes a 'Done' button at the bottom left.

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CLINICAL SEARCH DRUG INFORMATION GUIDELINES PATIENT HANDOUTS BOOKS

QUICK SEARCH

SPECIALTY

- [+] Behavioral & Social Sciences
- [+] Clinical Medicine
- [+] Health Professions
- [+] Life Sciences
- [+] Nursing
- [-] Patient Education
  - [+] Health & Fitness
  - [+] Legal / Social / Family / End-of-Life
  - [+] Safety
  - [+] Wellness
- Adult Immunization Schedule - Womens Health Topics
- Ask About Your Medicines - Adult Health Topics
- Ask About Your Medicines - Womens Health Topics
- Baby Equipment and Supplies - Pediatric Health Topics
- Baby Equipment and Supplies - Womens Health Topics
- Baby Laundry - Pediatric Health Topics
- Benefits of Quitting Smoking - Senior Health Topics
- Blood Donation - Adult Health Topics

## Benefits of Quitting Smoking

[Related Topics](#)

### Why should I quit smoking?

Smoking is bad for you. It causes cancer, heart attacks, hardening of the arteries, bronchitis, emphysema, cough, shortness of breath, wrinkles, and premature aging. It stains teeth and fingers, irritates the eyes, and causes bad breath.

Smoking is also bad for people around you. The smoke exhaled by smokers and given off by the burning end of a cigarette, pipe, or cigar is called second-hand smoke. Second-hand smoke can cause cancer and heart disease in nonsmokers if they are around the smoke much of the time. People, especially children, who live with smokers also have more colds and are more likely to have asthma.

Most Americans are now living into their late seventies. One way to be able to enjoy a long life free of limitations and suffering is to stop smoking now.

### Benefits of quitting smoking

It takes time to reverse many years' worth of smoking damage to your body, but some benefits of quitting smoking begin right away. Your risk of heart disease begins to decrease as soon as you quit. Your general health may start to improve right away, too, because you are removing a constant source of irritation to your lungs. People may comment that you no longer cough. Your blood circulation is likely to get better, so your hands and feet may feel warmer. Your teeth and fingers will gradually lose their nicotine stain. Your breath will be fresher. Other, less obvious benefits that begin to occur include better resistance to colds and other respiratory infections and reduced risk of high blood pressure, stroke, and cancer.

The following arguments are often given by smokers as reasons for continuing to smoke:

**"I have to die sometime, so I might as well enjoy life until then."**

True, but as a smoker you are much more likely to die from a stroke or cancer, neither of which are very pleasant ways to go.

**"I'm only hurting myself."**

True, if you don't count the headache and grief you may cause your loved ones by your early death or permanent disability, or the damage your smoke does to others.

**"I know people who smoke and live to a ripe old age in perfect health."**

True, but this is rare. Nearly all smokers have significant health problems.

Done

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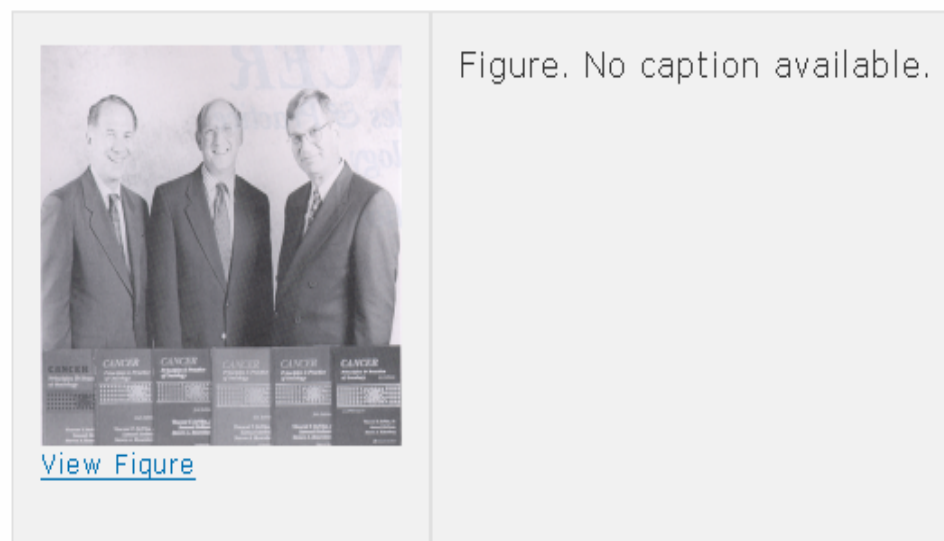
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### Volume 19, Number 1

## Current Concepts in the Staging of Lung Cancer

**Robert B. Cameron M.D., F.A.C.S.<sup>1</sup>**  
**Daniel Schwartz M.D., F.A.C.S.<sup>2</sup>**

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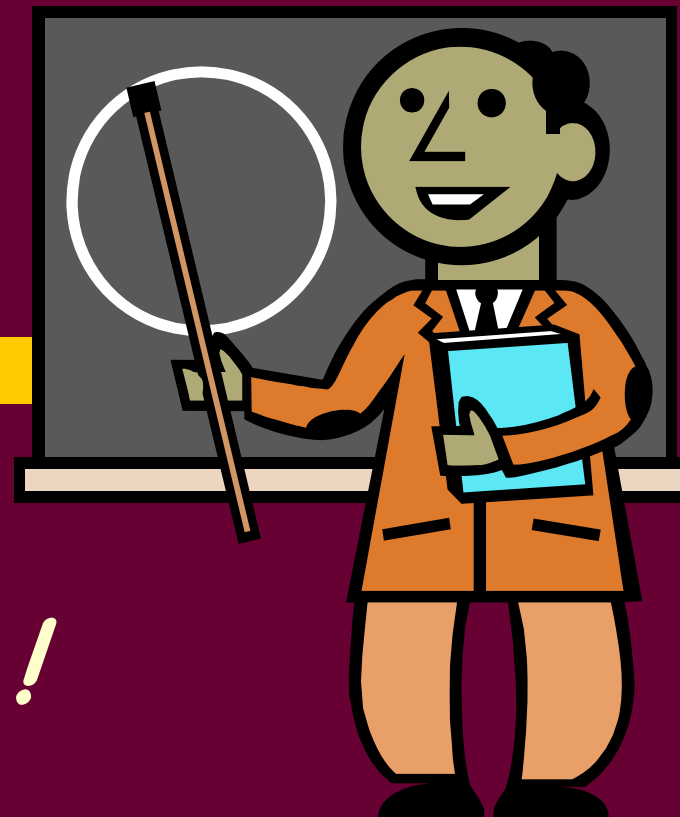
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# ZAKLJUČAK

*“We need less research, better research, and research done for the right reasons.....”*

DG Altman, BMJ 1994;308:283

K R A J



*Hvala na pažnji !*

Ana Ivković

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