

# Pubmed数据库检索与利用



辛继宾

[jbxin@fudan.edu.cn](mailto:jbxin@fudan.edu.cn)

参考咨询部

复旦大学医科图书馆



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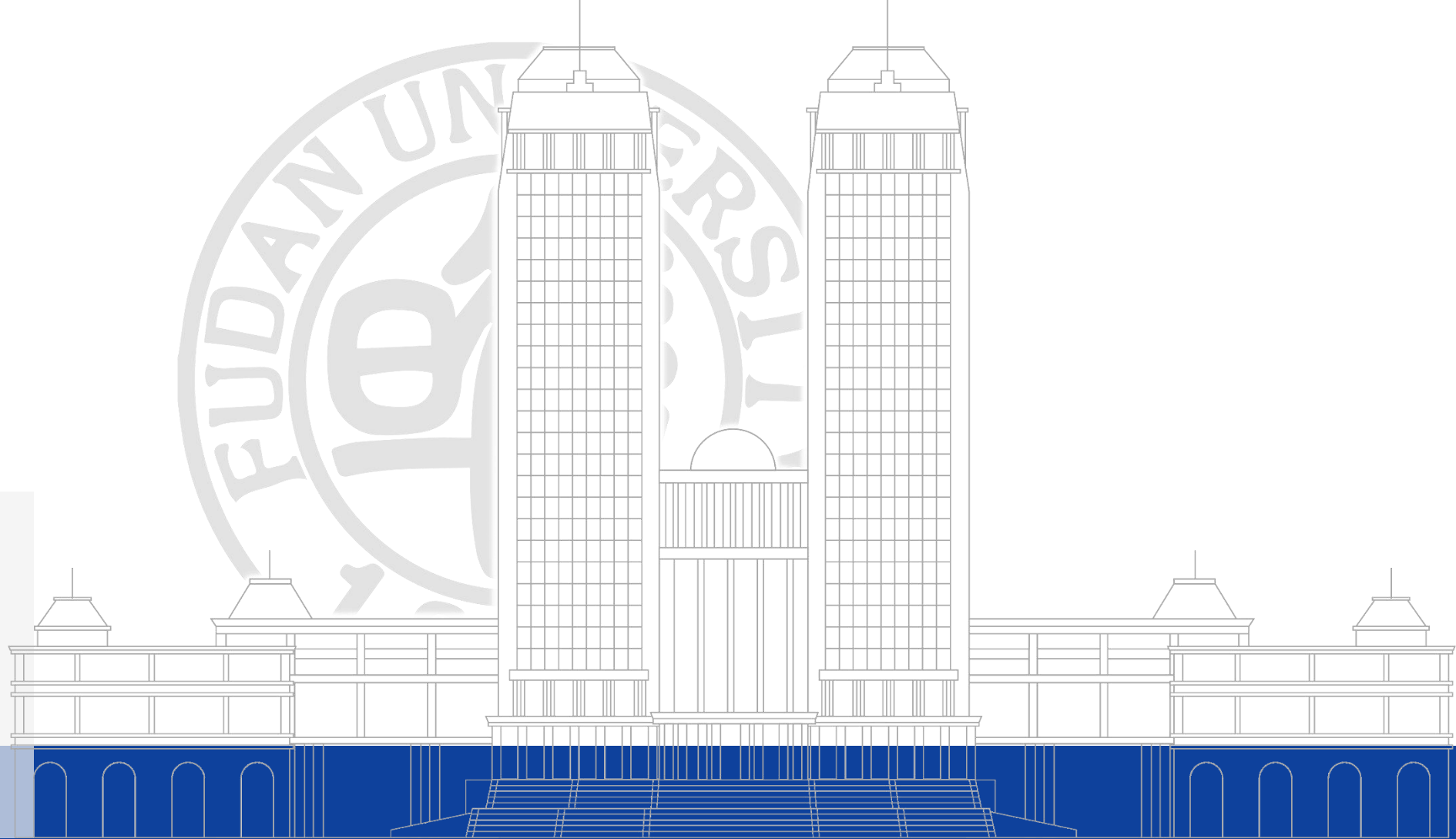
三、检索与利用



四、其他…



01



# Pubmed简介

# 1.1 简介

- Pubmed是美国国立医学图书馆(NLM)所属的国家生物技术信息中心(NCBI)于2000年4月开发的基于WEB的免费的MEDLINE检索系统。
- MEDLINE
- PubMed Central (PMC)
- Bookshelf
- <http://www.pubmed.gov>
- <http://www.ncbi.nlm.nih.gov/pubmed/>

## 1.2 数据来源

- **MEDLINE**是美国国立医学图书馆生产的国际性综合生物医学信息书目数据库，是当前国际上最权威的生物医学文献数据库。
- **MEDLINE (1966~至今)**
  - 收录了全世界70多个国家和地区1940年以来的9000余种生物医学期刊（其中约1600种免费期刊），英文刊物约占90%；75%的文献有英文摘要，每天更新。
  - 内容涉及：医学、药学、牙医学、护理学、卫生保健、兽医学等专业。
- pubmed每天都在不断地接受出版商发送的新数据，其文献条目在标引加工后每天向MEDLINE移动一次。但其中有些条目由于超出了MEDLARS数据库的收录范围，将永远不会被PreMEDLINE或MEDLINE条目所取代，例如在综合性的科学杂志（Science或Nature）上发表的地理学文章等。
- **OldMedline(1951~1965)**
  - 未标引的数据

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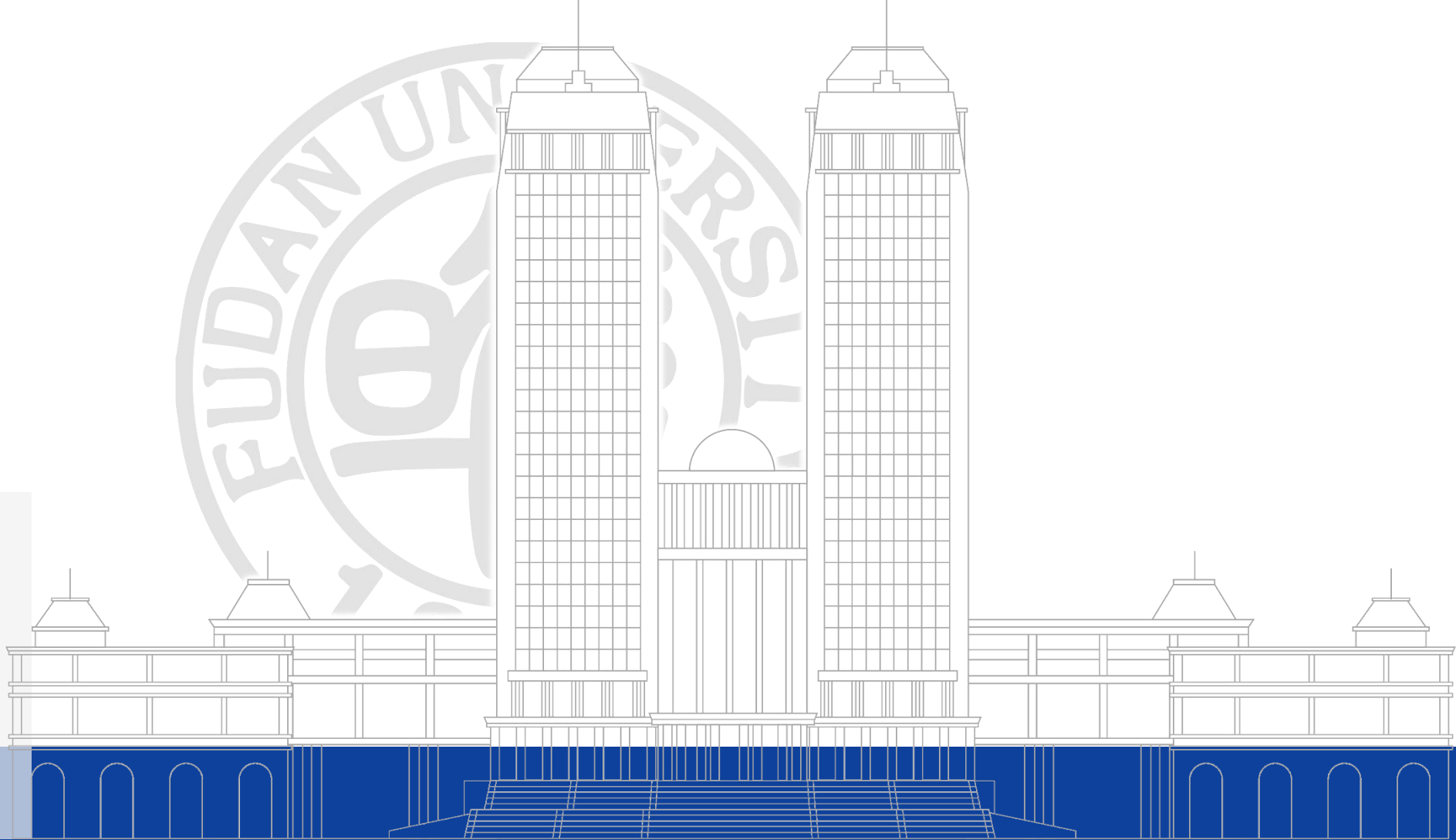
E-utilities API  
FTP  
Batch Citation Matcher



### Explore

MeSH Database  
Journals

02



# 基本规则



## 2.1 记录字段和格式

Send to

Format: Abstract ▾

出处

Ultrasonography, 2019 Jan 4. doi: 10.14366/usg.18053. [Epub ahead of print]

题目

**Future of breast elastography.**

作者

Barr RG<sup>1,2</sup>

⊕ Author information

摘要

**Abstract**

Both strain elastography and shear wave elastography have been shown to have high sensitivity and specificity for characterizing breast lesions as benign or malignant. Training is important for both strain and shear wave elastography. The unique feature of benign lesions measuring smaller on elastography than B-mode imaging and malignant lesions appearing larger on elastography is an important feature for characterization of breast masses. There are several artifacts which can contain diagnostic information or alert to technique problems. Both strain and shear wave elastography continue to have improvements and new techniques will soon be available for clinical use that may provide additional diagnostic information. This paper reviews the present state of breast elastography and discusses future techniques that are not yet in clinical practice.

关键词

**KEYWORDS:** Breast; Breast neoplasms; Elasticity imaging techniques; Shear wave; Strain; Strain ratio

PMID: 30884636 DOI: [10.14366/usg.18053](https://doi.org/10.14366/usg.18053)

Free full text





## 2.1 字段标识符

Affiliation [ad]	Full Investigator Name [fir]	Pagination [pg]
All Fields [all]	Grant Number [gr]	Personal Name as Subject [ps]
Article Identifier [aid]	Investigator [ir]	Pharmacological Action [pa]
Author [au]	ISBN [isbn]	Place of Publication [pl]
Author Identifier [auid]	Issue [ip]	PMCID and MID
Book [book]	Journal [ta]	PMID [pmid]
Comment Correction Type	Language [la]	Publication Date [dp]
Completion Date [dcom]	Last Author Name [lastau]	Publication Type [pt]
Conflict of Interest Statement [cois]	Location ID [lid]	Publisher [pubn]
Corporate Author [cn]	MeSH Date [mhda]	Secondary Source ID [si]
Create Date [crdt]	MeSH Major Topic [majr]	Subset [sb]
EC/RN Number [rn]	MeSH Subheadings [sh]	Supplementary Concept [nm]
Editor [ed]	MeSH Terms [mh]	Text Words [tw]
Entry Date [edat]	Modification Date [lr]	Title [ti]
Filter [filter] [sb]	NLM Unique ID [jid]	Title/Abstract [tiab]
First Author Name [1au]	Other Term [ot]	Transliterated Title [tt]
Full Author Name [fau]	Owner	Volume [vi]

## 2.3 关键词

- 作者提供的从篇名、文摘、全文中直接抽取的表达文献主题内容的词语。
- 特点：未经规范处理的自然检索语言，能及时反映新观点，新方法，新发现及新术语。
- 缺点：用词不统一，易漏检

## 2.4 主题词

- 对同一概念的同义词、近义词进行“规范”化，保证词语和概念的一一对应。
- 特点：规范化、统一化
- 优点：提高查全率和查准率，便于调整检索范围，能限定文献的主题概念。可以集中语言表达不同但概念相同的文献，一般情况下，命中的文献比关键词更准确全面。

# 主题词和关键词的关系

tumor

cancer

carcinoma

癌（非主题词）

Neoplasms

肿瘤（主题词）

## 2.5 医学主题词表

- 目前最权威最常用的标准医学主题词表，动态变化。2万多个词和词组。
- 通过注释、参照系统与树形编码，表达MeSH词的历史变迁、主题词的族性类别、属分关系、揭示主题词之间语义关系
- 对医学文献中的自然语言进行规范，使概念与主题词单一对应。
- 保证文献的标引者和检索者之间在用词上的一致。
- 可进行主题词、副主题词组配，提高主题标引或检索的专指度
- 可以对主题词进行扩检和缩检
- <https://www.nlm.nih.gov/mesh/>
- <https://meshb.nlm.nih.gov/search>

## Medical Subject Headings 2022

The files are updated each week day Monday-Friday by 8AM EST

FullWord ▾

Exact Match

All Fragments

Any Fragment

- All Terms
  - Main Heading (Descriptor) Terms
  - Qualifier Terms
  - Supplementary Concept Record Terms
- MeSH Unique ID
- Search in all Supplementary Concept Record Fields
  - Heading Mapped To
  - Indexing Information
- Pharmacological Action
- Search Related Registry and CAS Registry/EC Number/UNII Code/NCBI Taxonomy ID Number (RN)
  - Related Registry Search
  - CAS Registry/EC Number/UNII Code/NCBI Taxonomy ID Number (RN)
- Search in all Free Text Fields
  - Annotation
  - ScopeNote
  - SCR Note

Sort by: Relevance ▾

Results per Page: 20 ▾



# Mesh表的结构

**MeSh**

- 字 顺 表 (Alphabetic List)
- 树 状 结 构 表 (Tree Structure)
- 副 主 题 词 表 (Subheadings)
- 主 题 词 变 更 表



单个词: Liver、Heart、Abdomen、

复合词: { 顺置式 Stomach Neoplasms

{ 倒置式 Hepatitis, Alcoholic

(肝炎, 乙醇性)

Leukemia, Lymphocytic, Chronic

(白血病, 淋巴细胞, 慢性)





SHOCK

休克

SHOCK, CARDIOGENIC

休克, 心源性

SHOCK, HEMORRHAGIC

休克, 出血性

SHOCK, SEPTIC

休克, 败血症性

SHOCK, TRAUMATIC

休克, 创伤性

主题词倒置的优点: 突出核心词

方便选词

族性检索

## 树状结构表 (Categories and Subcategories)

又叫范畴表，树形结构表用以体现主题词概念间的关系，该表将2万多个主题词按其学科性质、词义范围、上下类属、派生关系，划分为16个大类；每个大类按再划分为若干二级类目、三级类目、……最多可达九级类目。

主题词用逐级缩格的排列方法来表达它们之间的逻辑隶属关系，同级类目下的主题词按字顺编排。

- 作用：从学科分枝的角度选择主题词，满足族性检索的要求。



Anatomy [A] +

Organisms [B] +

Diseases [C] +

Chemicals and Drugs [D] +

Analytical, Diagnostic and Therapeutic Techniques, and Equipment [E] +

Psychiatry and Psychology [F] +

Phenomena and Processes [G] +

Disciplines and Occupations [H] +

Anthropology, Education, Sociology, and Social Phenomena [I] +

Technology, Industry, and Agriculture [J] +

Humanities [K] +

Information Science [L] +

Named Groups [M] +

Health Care [N] +

Publication Characteristics [V] +

Geographicals [Z] +

Organisms [B] +

Diseases [C] -

Infections [C01] +

Neoplasms [C04] +

Musculoskeletal Diseases [C05] +

Digestive System Diseases [C06] -

Biliary Tract Diseases [C06.130] +

Digestive System Abnormalities [C06.198] +

Digestive System Fistula [C06.267] +

Digestive System Neoplasms [C06.301] +

Gastrointestinal Diseases [C06.405] +

Liver Diseases [C06.552] -

alpha 1-Antitrypsin Deficiency [C06.552.074]

Chemical and Drug Induced Liver Injury [C06.552.100] +

Cholestasis, Intrahepatic [C06.552.150] +

Fatty Liver [C06.552.241] +

Focal Nodular Hyperplasia [C06.552.270]

Hepatic Infarction [C06.552.289]

Hepatic Insufficiency [C06.552.308] +

Budd-Chiari Syndrome [C06.552.347]

Hepatic Veno-Occlusive Disease [C06.552.360]

Hepatitis [C06.552.380] -

Hepatitis, Alcoholic [C06.552.380.290]

Hepatitis, Animal [C06.552.380.315] +

Hepatitis, Chronic [C06.552.380.350] +

Hepatitis, Viral, Human [C06.552.380.705] -

Hepatitis A [C06.552.380.705.422]

Hepatitis B [C06.552.380.705.437] -

Hepatitis B, Chronic [C06.552.380.705.437.100]

Hepatitis C [C06.552.380.705.440] +

Hepatitis D [C06.552.380.705.450] +

Hepatitis E [C06.552.380.705.470]

Skin Diseases, Infectious [C01.800] +

Soft Tissue Infections [C01.820]

Suppuration [C01.830] +

Toxemia [C01.861] +

Urinary Tract Infections [C01.915] +

Vaccine-Preventable Diseases [C01.918]

Vector Borne Diseases [C01.920] +

Virus Diseases [C01.925] -

Arbovirus Infections [C01.925.081] +

Bronchiolitis, Viral [C01.925.109]

Central Nervous System Viral Diseases [C01.925.182] +

DNA Virus Infections [C01.925.256] -

Adenoviridae Infections [C01.925.256.076] +

African Swine Fever [C01.925.256.142]

Circoviridae Infections [C01.925.256.200] +

Hepadnaviridae Infections [C01.925.256.430] -

Hepatitis B [C01.925.256.430.400] +

Herpesviridae Infections [C01.925.256.466] +

Papillomavirus Infections [C01.925.256.650] +

Parvoviridae Infections [C01.925.256.700] +

Polyomavirus Infections [C01.925.256.721] +

Poxviridae Infections [C01.925.256.743] +

Eye Infections, Viral [C01.925.325] +

Fatigue Syndrome, Chronic [C01.925.330]

Hepatitis, Viral, Animal [C01.925.407] +

Hepatitis, Viral, Human [C01.925.440] -

Hepatitis A [C01.925.440.420]

Hepatitis B [C01.925.440.435] -

Hepatitis B, Chronic [C01.925.440.435.100]

Hepatitis C [C01.925.440.440] +

Hepatitis D [C01.925.440.450] +

Hepatitis E [C01.925.440.470]

Opportunistic Infections [C01.925.597] +

Pneumonia, Viral [C01.925.705] +

# Hepatitis B MeSH Descriptor Data 2022

Details

Qualifiers

MeSH Tree Structures

Concepts

MeSH Heading	Hepatitis B
Tree Number(s)	C01.221.250.500 C01.925.256.430.400 C01.925.440.435 C06.552.380.705.437
Unique ID	D006509
RDF Unique Identifier	<a href="http://id.nlm.nih.gov/mesh/D006509">http://id.nlm.nih.gov/mesh/D006509</a>
Annotation	chronic = HEPATITIS B, CHRONIC
Scope Note	<b>INFLAMMATION</b> of the <b>LIVER</b> in humans caused by a member of the <b>ORTHOHEPADNAVIRUS</b> genus, <b>HEPATITIS B VIRUS</b> . It is primarily transmitted by parenteral exposure, such as transfusion of contaminated blood or blood products, but can also be transmitted via sexual or intimate personal contact.
Entry Term(s)	Hepatitis B Virus Infection
NLM Classification #	WC 536
Public MeSH Note	77; was HEPATITIS, HOMOLOGOUS SERUM 1963-76
Online Note	use HEPATITIS B to search HEPATITIS, HOMOLOGOUS SERUM 1966-76
History Note	77; was HEPATITIS, HOMOLOGOUS SERUM 1963-76
Date Established	1977/01/01
Date of Entry	1999/01/01
Revision Date	2020/05/27



# Hepatitis B MeSH Descriptor Data 2022

Details

Qualifiers

MeSH Tree Structures

Concepts

## Allowable Qualifiers

blood (BL)  
cerebrospinal fluid (CF)  
chemically induced (CI)  
classification (CL)  
complications (CO)  
congenital (CN)  
diagnosis (DI)  
diagnostic imaging (DG)  
diet therapy (DH)  
drug therapy (DT)  
economics (EC)  
embryology (EM)  
enzymology (EN)  
epidemiology (EP)  
ethnology (EH)  
etiology (ET)  
genetics (GE)  
history (HI)  
immunology (IM)  
metabolism (ME)  
microbiology (MI)  
mortality (MO)

nursing (NU)  
parasitology (PS)  
pathology (PA)  
physiopathology (PP)  
prevention & control (PC)  
psychology (PX)  
radiotherapy (RT)  
rehabilitation (RH)  
surgery (SU)  
therapy (TH)  
transmission (TM)  
urine (UR)  
veterinary (VE)  
virology (VI)



# Hepatitis B MeSH Descriptor Data 2022

Details

Qualifiers

MeSH Tree Structures

Concepts

## Infections [C01]

### Communicable Diseases [C01.221]

#### Blood-Borne Infections [C01.221.250]

##### **Hepatitis B [C01.221.250.500]**

###### Hepatitis B, Chronic [C01.221.250.500.100]

##### Hepatitis C [C01.221.250.750]

##### HIV Infections [C01.221.250.875]

## Infections [C01]

### Virus Diseases [C01.925]

#### DNA Virus Infections [C01.925.256]

##### Hepadnaviridae Infections [C01.925.256.430]

##### **Hepatitis B [C01.925.256.430.400]**

###### Hepatitis B, Chronic [C01.925.256.430.400.100]

## Infections [C01]

### Virus Diseases [C01.925]

#### Hepatitis, Viral, Human [C01.925.440]

##### Hepatitis A [C01.925.440.420]

##### **Hepatitis B [C01.925.440.435]**

###### Hepatitis B, Chronic [C01.925.440.435.100]

##### Hepatitis C [C01.925.440.440]

##### Hepatitis D [C01.925.440.450]

##### Hepatitis E [C01.925.440.470]

## Digestive System Diseases [C06]

### Liver Diseases [C06.552]

#### Hepatitis [C06.552.380]

##### Hepatitis, Viral, Human [C06.552.380.705]

###### Hepatitis A [C06.552.380.705.422]

##### **Hepatitis B [C06.552.380.705.437]**

###### Hepatitis B, Chronic [C06.552.380.705.437.100]

##### Hepatitis C [C06.552.380.705.440]

##### Hepatitis D [C06.552.380.705.450]

##### Hepatitis E [C06.552.380.705.470]

## 副主题词 (Subheadings/Qualifiers)

- 直接加在主题词之后，与主题词组配使用，对主题词起修饰和限定的作用，使主题词具有更高的专指性的一类词。
- 副主题词是限定主题概念的规范化词汇，对主题词起细分作用或揭示多个主题词之间的关系
- 副主题词没有独立的检索意义，其作用是增加主题概念的专指性，提高检索效率。
- 副主题词现有76个。



# 主题词与副主题词的组配规则

- 主题词与副主题词的组配有严格的规定，不是所有的副主题词均能与每个主题词进行组配。计算机数据库中在每个主题词下都列出了当前主题词可以组配的所有副主题词。
- 有专指副主题词，勿用泛指副主题组配。如：药物治疗、饮食治疗
- 若能用主题词与副主题组配，尽量不要用与副主题词等义的主题词。

如：肝炎/药物治疗

不能：肝炎 AND 药物治疗

- 在检索中，主题词/副主题词两者间须有必然的逻辑关系，善于分析两者之间的关系：因果关系、应用关系等
  - 眼结核引起失明，用结核，眼/并发症；盲/病因学
  - 牛奶引起动脉硬化，用牛奶/副作用，动脉硬化/病因学
  - 阿司匹林治疗感冒，用阿司匹林 /治疗应用；感冒/药物疗法

## 2.6 检索规则-词汇自动转换

### 1. MeSH Translation table

- 医学主题词
- 副主题词
- 出版类型
- 款目词
- 统一医学语言系统
- 增补概念词和同义词

作用：将不规范的词语转换成规范的用词，对主题词进行自动扩展检索，使检索结果更准确，全面。



## 2. Journals Translation table

包括刊名全称、缩写和ISSN号。该转换表能把键入的刊名全称转换为“MEDLINE的标准缩写+[Journal Name]”后进行检索。

- New England journal of medicine 转换为 “N Engl J Med”[Journal]
- Clin Lung Cancer. 2010 Jan;11(1):51-6 转换为: "Clin Lung Cancer"[Journal] AND 2010[PDAT] AND 11[VOL] AND 1[ISS] AND 51-6[PAGE]



### 3. Full Author Translation table

2002年以来发表的带有作者全名的文献

作者姓名可以采用正常的或倒置的

(Julia s wong/wong Julia s/wong, Julia s)

### 4. Full Investigator Translation table

### 5. Author index

姓在前，名在后，首字母缩写 o'bren jm adams sh

1966-1984 不限制

1984-1995: 前10个作者

1996-2000:25个作者

2000- : 不限制

1990前: 小语种/日语所有作者名字转成Roman alphabet

1990-2016 转换10个作者

2016年后

不再转换。

中文作者因有英文摘要，不转换



如果仍然找不到匹配词，就会把该词组断开后再重复上述自动词汇转换过程，找到与键入的词语相匹配词语为止。若仍然没有匹配词，单个词会被联一起（用AND）在全部字段中检索。

例如：输入liver cancer

- a) 首先，将“liver cancer”作为一个短语在以上几个表里查找：
- b) 然后，将“liver cancer”分成“liver”和“cancer”两个词，再次在上述表中查找；
- c) 最后，将“liver”和“cancer”及其匹配的主题词，在所有字段查找。

## 转换结果

- liver cancer转换为: "liver neoplasms"[MeSH Terms] OR ("liver"[All Fields] AND "neoplasms"[All Fields]) OR "liver neoplasms"[All Fields] OR ("liver"[All Fields] AND "cancer"[All Fields]) OR "liver cancer"[All Fields]
- Vitamin c 转换为: "ascorbic acid"[MeSH Terms] OR ("ascorbic"[All Fields] AND "acid"[All Fields]) OR "ascorbic acid"[All Fields] OR "vitamin c"[All Fields]
- *单个的数字和字母不进行拆分*

想要查验检索词的转换情况，并进行调整检索策略，可在高级检索历史的“details”部分查看。

## 2.7 检索规则-短语检索

如果在短语上加**半角双引号**后，系统将直接在所有字段中进行查找，不再进行自动转换。

“single cell”

“oxygen free radicals”

短横“-”和双引号功能类似。single-cell 和“single cell”

结果一样。

## 2.8 截词检索

无限截词符：\*

- 在词的末尾加\*号，PubMed就会检索出以该词为词根的所有词
  - infect\*包括infections, infectious, infective, infectivity, infector等。
- 截词检索将关闭自动词语匹配功能，也不能进行扩展检索。
  - 如：heart attack\*（心脏病发作）不会匹配MeSH词，也不会扩展检索myocardial infarction（心肌梗死）、myocardial stunning（心肌顿抑，缺血后心肌功能障碍）、shock、cardiogenic等这些方面的文献。



## 2.9 检索规则-布尔逻辑运算

- 逻辑词符（AND、OR、NOT）

lung AND apoptosis; vitamin c OR ascorbic acid; Lead poisoning NOT children

- 运算优先级为: PubMed按从左到右的顺序处理搜索，使用括号来“嵌套”应该作为一个单元处理的概念，然后将其合并到整体搜索中。

例如: drug therapy AND (asthma OR hay fever)

- 布尔逻辑检索允许在检索词后面附加字段标识

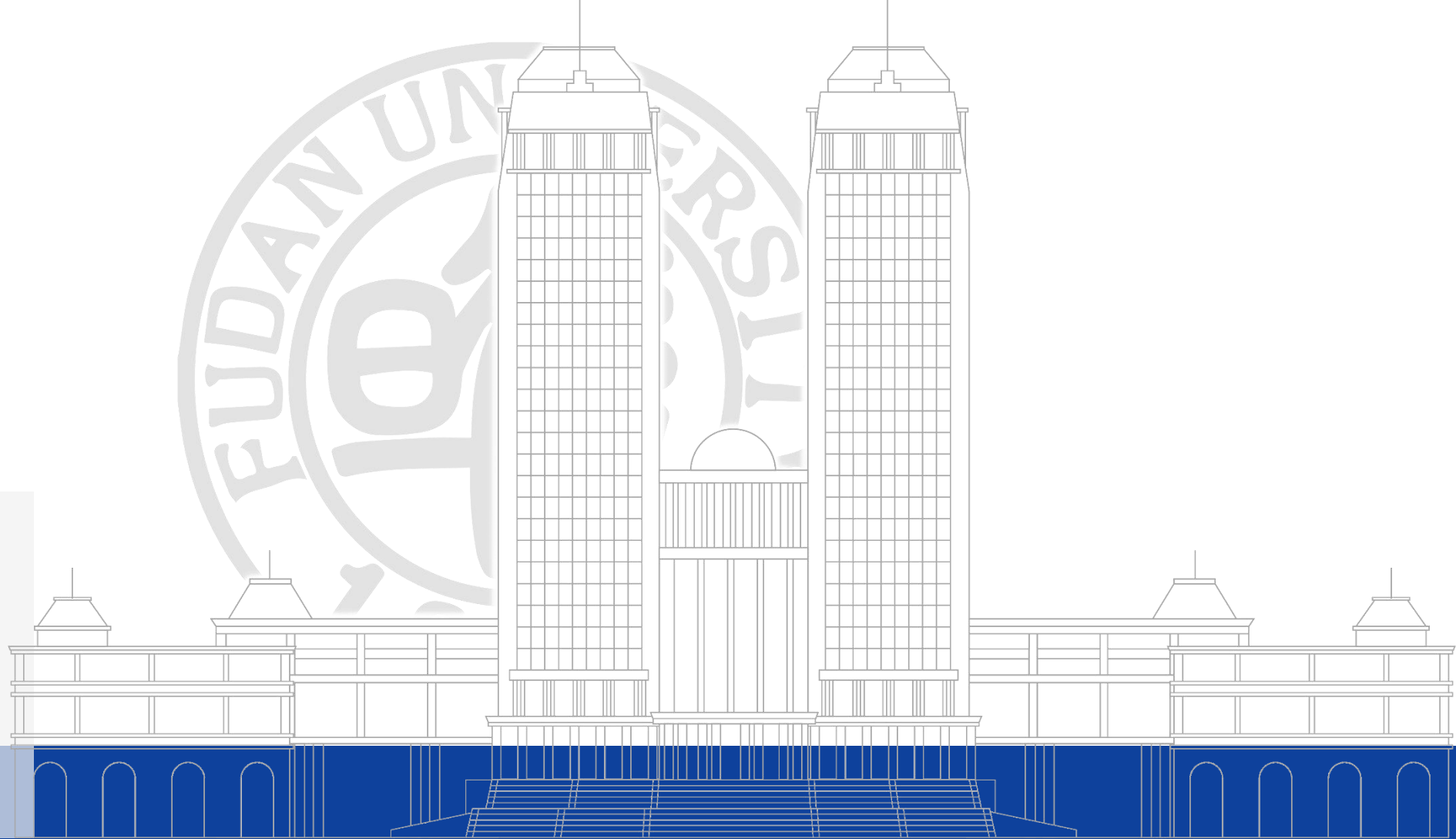
例如: dna[mh] AND crick[au] AND 1993[dp]

- 查带文摘的文献（1975年以后出版的文章）

检索词 AND hasabstract

例如, Neoplasms AND hasabstract

03



# 检索与利用



- 基本检索 - Basic Search
- 高级检索 - Advanced Search
- 主题词检索 - MeSH Databases
- 结果输出与外链 - Send to & Linkout

## 3.1 基本检索

- 检索步骤：
  - a) 进入pubmed主界面，
  - b) 在检索框输入任何有实质性意义的检索词
  - c) 点[search]按钮或按回车键，系统字段匹配进行

- 检索词的输入形式：

输入单词或短语或表达式，也可用\*及双引号

著者姓名：weng xz OR weng xz [au] 全称，2002年以后的文章。

含有禁用词或多个作者时必须带字段名：by[AU]

刊名标题：刊名全称、缩写、ISSN

Journal of leukocyte biology, J leukoc biol, 0741-5400

## 注意：

- 当刊名与主题词相同时，刊名后需要附加字段标识符。如：gene therapy[ta]、science[ta]、cell[ta]
- 单个词刊名的期刊刊名后需要附加字段标识符。 如：Scanning[ta]
- 带括号刊名的期刊，录入时应将括号省略。

J Hand Surg[Am]输入格式为J Hand Surg Am



PubMed.gov

J leukoc biol

Advanced

PubMed® comprises more than 30 million citations for biomedical literature from MEDLINE, life science journals, and other sources. Citations may include links to full-text content from PubMed Central and publisher web sites.



J leukoc biol

Search

[Advanced](#) [Create alert](#) [Create RSS](#)

[User Guide](#)

Save

Email

Send to

Sorted by: Publication date ↓

Display options

MY NCBI FILTERS

8,213 results

RESULTS BY YEAR



- 1 [Cytokine storm and leukocyte changes in mild versus severe SARS-CoV-2 infection: Review of 3939 COVID-19 patients in China and emerging pathogenesis and therapy concepts.](#)

Wang J, Jiang M, Chen X, Montaner LJ.

**J Leukoc Biol.** 2020 Jun 13. doi: 10.1002/JLB.3COVR0520-272R. Online ahead of print.

PMID: 32534467    Review.

“ Cite    Share

TEXT AVAILABILITY

- Abstract
- Free full text
- Full text

- 2 [Targeting NLRP3 and staphylococcal pore-forming toxin receptors in human-induced pluripotent stem cell-derived macrophages.](#)

Chow SH, Deo P, Yeung ATY, Kostoulias XP, Jeon Y, Gao ML, Seidi A, Olivier FAB, Sridhar S, Nethercott C, Cameron D, Robertson AAB, Robert R, Mackay CR, Traven A, Jin ZB, Hale C, Dougan G, Peleg AY, Naderer T.

**J Leukoc Biol.** 2020 Jun 12. doi: 10.1002/JLB.4MA0420-497R. Online ahead of print.

ARTICLE ATTRIBUTE

## 基本检索实例

【例题】检索“尼群地平治疗高血压”方面的文献

- 分析: 自由词检索
- 检索词: nitrendipine;  
hypertension/high blood pressure  
**nitrendipine AND (hypertension OR high blood pressure)**
- 检索方法: 1. 输入综合检索式  
2. 在检索史中进行组配





nitrendipine AND (hypertension OR high blood pressure)



Search

Advanced Create alert Create RSS

User Guide

Save

Email

Send to

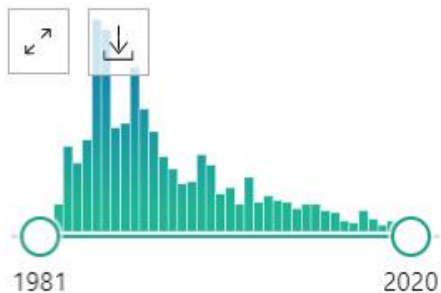
Sorted by: Publication date ↓

Display options

MY NCBI FILTERS

953 results

RESULTS BY YEAR



TEXT AVAILABILITY

- Abstract
- Free full text
- Full text

ARTICLE ATTRIBUTE

- Associated data

1 [PAIT-Survey Follow-Up: Changes in Albuminuria in \*\*Hypertensive\*\* Diabetic Patients with Mild-Moderate Chronic Kidney Disease.](#)

Fici F, Ari Bakir E, Ilkay Yüce E, Kanuncu S, Makel W, Tarim BA, Robles NR.

High Blood Press Cardiovasc Prev. 2020 Feb;27(1):43-49. doi: 10.1007/s40292-020-00358-1. Epub 2020 Jan 9.

PMID: 31916208 Clinical Trial.

**Blood pressure** was measured with a validated digital device. RESULTS: At baseline, albuminuria was present in 310 subjects (46.4%) (microalbuminuria in 263 (84.8%), macroalbuminuria in 15.2%), and normoalbuminuria in 53.6% 358. ...**Blood pressure** was si ...

“ Cite Share

2 [Münchhausen Syndrome as an Unusual Cause of Pseudo-resistant \*\*Hypertension\*\*: A Case Report.](#)

Kobusiak-Prokopowicz M, Marciniak A, Tokarczyk B, Kała M, Leszek J, Mysiak A.

Open Med (Wars). 2019 Nov 7;14:792-796. doi: 10.1515/med-2019-0094. eCollection 2019.

PMID: 31737783 Free PMC article.

Individuals with elevated **blood pressure** due to non-adherence to medication have the so-called

## 3.2 高级检索：一般限制题目或摘要

The screenshot displays the PubMed search interface. On the left, a dropdown menu is open, listing various search filters. The 'Title/Abstract' filter is selected and highlighted in blue. Below the dropdown, a search box contains the text 'nitrendipine'. To the right of the search box are buttons for 'ADD', 'Show Index', and 'Search'. The background shows the PubMed logo and a 'Log in' button.

MeSH Terms  
Other Term  
Pagination  
Pharmacological Action  
Publication Type  
Publisher  
Secondary Source ID  
Subject - Personal Name  
Supplementary Concept  
Text Word  
Title  
**Title/Abstract**

Title/Abstract nitrendipine

ADD Show Index Search

Query box  
Enter / edit your search query here



User Guide

Add terms to the query box

Title/Abstract

hypertension OR high blood pressure

AND

Show Index

Query box

nitrendipine[Title/Abstract]

Search



Query box

(nitrendipine[Title/Abstract]) AND (hypertension[Title/Abstract] OR high blood pressure[Title/Abstract])

Search



(nitrendipine[Title/Abstract]) AND (hypertension[Title/Abstract] OR high bl



Search

[Advanced](#) [Create alert](#) [Create RSS](#)

[User Guide](#)

Save

Email

Send to

Sorted by: Best match

Display options

547 results

« < Page 1 of 28 > »

**Nitrendipine** and Dementia: Forgotten Positive Facts?

1 Novotny M, Klimova B, Valis M.

Cite Front Aging Neurosci. 2018 Dec 18;10:418. doi: 10.3389/fnagi.2018.00418. eCollection 2018.

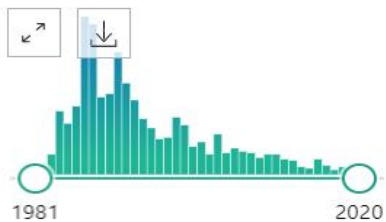
PMID: 30618724 **Free PMC article.** Review.

Share Therefore, researchers attempt to reduce risk factors causing the development of dementia such as **high blood pressure**. Epidemiological studies have shown that **hypertension** increases the risk of dementia at an older age. ...The most significant preventi ...

**Azelnidipine.**

# 3.3 文献筛选

RESULTS BY YEAR



TEXT AVAILABILITY

- Abstract
- Free full text
- Full text

ARTICLE ATTRIBUTE

- Associated data

ARTICLE TYPE

- Books and Documents
- Clinical Trial
- Meta-Analysis
- Randomized Controlled Trial
- Review
- Systematic Reviews

PUBLICATION DATE

- 1 year
- 5 years

## ARTICLE TYPE

SPECIES

LANGUAGE

SEX

SUBJECT

JOURNAL

AGE

- Address
- Autobiography
- Bibliography
- Biography
- Case Reports
- Classical Article
- Clinical Conference
- Clinical Study
- Clinical Trial Protocol
- Clinical Trial, Phase I
- Clinical Trial, Phase II
- Clinical Trial, Phase III
- Clinical Trial, Phase IV
- Introductory Journal Article
- Journal Article
- Lecture
- Legal Case
- Legislation
- Letter
- Multicenter Study
- News
- Newspaper Article
- Observational Study
- Observational Study, Veterinary
- Overall
- Patient Education Handout




## 3.4 主题词检索

- 检索步骤一般为：
  - a) 先分析要检索的课题，找出关键词，用其作为自由词检索，挑选几篇相关的文章进行阅读，查看文章的详细标引，确定MESH词。
  - b) 进入mesh词数据库搜索，选择跟研究内容相关的副主题词。
  - c) 用主题词和副主题词匹配的方法在pubmed里搜索相关文章。

# 主题词检索选择

MeSH入口

输入检索词，点“search”后会自动转换为相应的MeSH词供选择。

 **National Library of Medicine**  
National Center for Biotechnology Information

MeSH

[Create alert](#) [Limits](#) [Advanced](#)

Summary ▾ 20 per page ▾

Send

## Search results

Items: 1 to 20 of 397

<< First < Prev Page  of 20 Next > |

### [Neoplasms](#)

1. New abnormal growth of tissue. Malignant **neoplasms** show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign **neoplasms**.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

### [Hereditary Breast and Ovarian Cancer Syndrome](#)

2. Autosomal dominant HEREDITARY **CANCER** SYNDROME in which a mutation most often in either BRCA1 or BRCA2 is associated with a significantly increased risk for breast and ovarian cancers.

Year introduced: 2012

# 副主题词选择

组配副主题词

## Neoplasms

New abnormal growth of tissue. Malignant **neoplasms** show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign **neoplasms**.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

PubMed search builder options

Subheadings:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> analysis                   | <input type="checkbox"/> epidemiology                  | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> anatomy and histology      | <input type="checkbox"/> ethnology                     | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> etiology                      | <input type="checkbox"/> radiography                   |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> genetics                      | <input type="checkbox"/> radionuclide imaging          |
| <input type="checkbox"/> blood supply               | <input type="checkbox"/> growth and development        | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> cerebrospinal fluid        | <input type="checkbox"/> history                       | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> chemically induced         | <input type="checkbox"/> immunology                    | <input type="checkbox"/> secretion                     |
| <input type="checkbox"/> chemistry                  | <input type="checkbox"/> injuries                      | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> classification             | <input type="checkbox"/> isolation and purification    | <input type="checkbox"/> supply and distribution       |
| <input type="checkbox"/> complications              | <input type="checkbox"/> legislation and jurisprudence | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> congenital                 | <input type="checkbox"/> metabolism                    | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> cytology                   | <input type="checkbox"/> microbiology                  | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> diagnosis                  | <input type="checkbox"/> mortality                     | <input type="checkbox"/> transmission                  |
| <input type="checkbox"/> diet therapy               | <input type="checkbox"/> nursing                       | <input type="checkbox"/> transplantation               |
| <input type="checkbox"/> drug therapy               | <input type="checkbox"/> parasitology                  | <input type="checkbox"/> ultrasonography               |
| <input type="checkbox"/> economics                  | <input type="checkbox"/> pathology                     | <input type="checkbox"/> ultrastructure                |
| <input type="checkbox"/> education                  | <input type="checkbox"/> physiology                    | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> embryology                 | <input type="checkbox"/> physiopathology               | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> enzymology                 | <input type="checkbox"/> prevention and control        | <input type="checkbox"/> virology                      |

可组配一项或多项

Restrict to MeSH Major Topic.

Do not include MeSH terms found below this term in the MeSH hierarchy.

Entry Terms:

- Neoplasm
- Tumors
- Tumor
- **Cancer**
- Cancers
- Benign Neoplasms
- **Neoplasms**, Benign
- Benign Neoplasm
- Neoplasm, Benign

仅作为主要主题词

不对下位主题词进行扩展检索





## Neoplasms

New abnormal growth of tissue. Malignant neoplasms show a greater degree of anaplasia and have the properties of invasion and metastasis, compared to benign neoplasms.

Year introduced: /diagnosis was NEOPLASM DIAGNOSIS 1964-1965

PubMed search builder options

[Subheadings:](#)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> abnormalities              | <input type="checkbox"/> education                     | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> administration and dosage  | <input type="checkbox"/> embryology                    | <input type="checkbox"/> pharmacology                  |
| <input type="checkbox"/> analysis                   | <input type="checkbox"/> enzymology                    | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> anatomy and histology      | <input type="checkbox"/> epidemiology                  | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> ethnology                     | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> biosynthesis               | <input type="checkbox"/> etiology                      | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> genetics                      | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> blood supply               | <input type="checkbox"/> growth and development        | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> cerebrospinal fluid        | <input type="checkbox"/> history                       | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> chemical synthesis         | <input type="checkbox"/> immunology                    | <input type="checkbox"/> secondary                     |
| <input type="checkbox"/> chemically induced         | <input type="checkbox"/> injuries                      | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> chemistry                  | <input type="checkbox"/> innervation                   | <input type="checkbox"/> supply and distribution       |
| <input type="checkbox"/> classification             | <input type="checkbox"/> isolation and purification    | <input checked="" type="checkbox"/> surgery            |
| <input type="checkbox"/> complications              | <input type="checkbox"/> legislation and jurisprudence | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> congenital                 | <input type="checkbox"/> metabolism                    | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> cytology                   | <input type="checkbox"/> microbiology                  | <input type="checkbox"/> transmission                  |
| <input type="checkbox"/> diagnosis                  | <input type="checkbox"/> mortality                     | <input type="checkbox"/> transplantation               |
| <input type="checkbox"/> diagnostic imaging         | <input type="checkbox"/> nursing                       | <input type="checkbox"/> ultrastructure                |

"Neoplasms/surgery" [Majr:NoExp]

Add to search builder AND ▾

Search PubMed

You

### Related information

[PubMed](#)

[PubMed - Major Topic](#)

[Clinical Queries](#)

[NLM MeSH Browser](#)

[dbGaP Links](#)

[MedGen](#)

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[Turr](#)

[Neoplasms](#)

[cancer \(393\)](#)

"Neoplasms/surgery"[Majr:NoExp]



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[User Guide](#)

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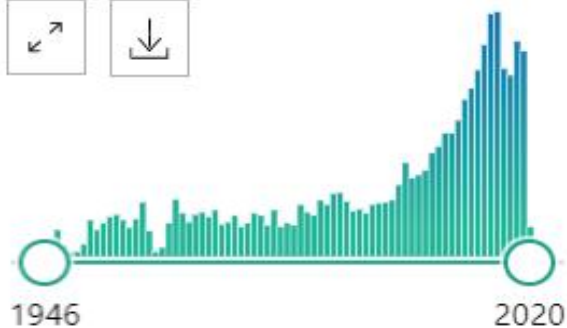
Sorted by: Best match

Display options

MY NCBI FILTERS

3,984 results

RESULTS BY YEAR



[Surgery for Cancer: A Trigger for Metastases.](#)

1 Tohme S, Simmons RL, Tsung A.

Cancer Res. 2017 Apr 1;77(7):1548-1552. doi: 10.1158/0008-5472.CAN-16-1536. Epub 2017 Mar 22.

PMID: 28330928 [Free PMC article.](#) [Review.](#)

Cite Share

[The evolution of cancer surgery and future perspectives.](#)

2 Wyld L, Audisio RA, Poston GJ.

Nat Rev Clin Oncol. 2015 Feb;12(2):115-24. doi: 10.1038/nrclinonc.2014.191. Epub 2014 Nov 11.

PMID: 25384943 [Review.](#)

Cite Share

TEXT AVAILABILITY

Abstract

Free full text

## 【例题】检索新冠肺炎药物治疗（包括中药和西药）的相关文献

- 分析：

自由词1： COVID-19、 SARS-CoV-2、 Coronavirus Disease-19、 2019  
nCoV Disease等等

自由词2: drug therapy

检索式：

(COVID-19 OR SARS-CoV-2) AND drug therapy

# 例子

pubmed.gov

(COVID-19[Title/Abstract] OR SARS-CoV-2[Title/Abstract]) AND "drug therap" X Search

Advanced Create alert Create RSS User Guide

Save Email Send to Sorted by: Publication date ↓ Display options ⚙


220 results << < Page 1 of 5 > >>

1 A novel enhanced substrate for label-free detection of **SARS-CoV-2** based on surface-enhanced Raman scattering.

Cite Zhang Z, Jiang S, Wang X, Dong T, Wang Y, Li D, Gao X, Qu Z, Li Y.  
Sens Actuators B Chem. 2022 May 15;359:131568. doi: 10.1016/j.snb.2022.131568. Epub 2022 Feb 12.  
Share PMID: 35185297 [Free PMC article.](#)

2 Tuberculosis and **COVID-19**: A combined global threat to human civilization.

Cite Patra K, Batabyal S, Mandal K, Ghose D, Sarkar J.  
Clin Epidemiol Glob Health. 2022 May-Jun;15:101031. doi: 10.1016/j.cegh.2022.101031. Epub 2022 Mar 27.  
Share PMID: 35372717 [Free PMC article.](#) [Review.](#)



A bar chart with three bars of increasing height, representing search results for the year 2022. The x-axis is labeled '2022' and has a small circle at the end. The bars are colored in shades of teal and blue.



## Abstract

**Introduction:** Due to functional hypogammaglobulinemia, patients with multiple myeloma are at increased risk for infection and generally have poorer responses to vaccines. In this study, we examined antibody responses after complete COVID-19 vaccination in patients with plasma cell dyscrasias, most of whom were receiving treatment.

**Patients and methods:** Real world study of consecutive patients with multiple myeloma and other plasma cell dyscrasias (PCD) were evaluated after complete vaccination with either the 2-shot mRNA vaccines from BioNTech and Moderna or the 1-shot adenoviral vector vaccine from Johnson & Johnson (J&J). Patients received vaccines 1-4 months before antibody testing without controlling for the type of vaccine or the timing of drug therapy. Patients with a clinical history or antibody evidence of prior infection were excluded. Antinucleocapsid and quantitative anti-spike antibody levels were measured with the Roche Elecsys assay.

**Results:** Ninety-five percent of patients had detectable antibody responses. Multivariate analysis showed that higher age, ongoing anti-CD38 monoclonal antibody therapy and the J&J vaccine negatively affected quantitative response. A small number of ineffectively vaccinated patients receiving IVIG subsequently had detectable nucleocapsid and spike antibodies confirming the presence of the latter in currently administered IVIG.

**Conclusions:** Nearly all PCD had detectable anti-spike antibodies after vaccination but age, anti-CD38 monoclonal antibody therapy, and the single-shot J&J vaccine negatively affected responses. In patients who received the J&J vaccine, second doses or heterologous mRNA vaccines should be tested. Quantitative antibody testing might make future management more rational, particularly in patients with poor responses.

**Keywords:** COVID-19; Immunocompromised; Monoclonal antibody; Multiple myeloma; SARS-CoV-2; Serologic response; Spike antibody detection; Vaccine boosters.

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### PAGE NAVIGATION

< Title & authors

Abstract

Figures

Similar articles

References

MeSH terms

Substances

Related information

LinkOut - more resources

通过阅读，确定主题为COVID-19

### MeSH terms

- > Antibodies, Monoclonal
- > COVID-19 Vaccines / adverse effects
- > COVID-19\* / prevention & control
- > Humans
- > Immunoglobulins, Intravenous
- > Multiple Myeloma\*
- > Vaccination

### MeSH terms

- > Acute Kidney Injury / chemically induced\*
- > Acute Kidney Injury / epidemiology\*
- > Antirheumatic Agents / adverse effects\*
- > COVID-19 / drug therapy\*
- > Humans
- > Hydroxychloroquine / adverse effects\*

### MeSH terms

- > COVID-19\* / drug therapy
- > Common Cold\*
- > Dexamethasone / pharmacology
- > Dextromethorphan
- > Humans
- > Molecular Docking Simulation
- > Molecular Dynamics Simulation
- > Peptide Hydrolases
- > Prednisolone / pharmacology
- > Protease Inhibitors
- > SARS-CoV-2

Summary ▾ 20 per page ▾

Send to: ▾

## Search results

Items: 1 to 20 of 144

&lt;&lt; First &lt; Prev Page 1 of 8 Next &gt; Last &gt;&gt;

 [COVID-19 Testing](#)

1. Diagnosis of COVID-19 by assaying bodily fluids or tissues for the presence of COVID-19 antibodies, SARS-CoV-2 antigens or the VIRAL RNA of SARS-CoV-2.

Year introduced: 2021

 [COVID-19 Vaccines](#)

2. Vaccines or candidate vaccines containing SARS-CoV-2 component antigens, genetic materials, or inactivated SARS-CoV-2 virus, and designed to prevent COVID-19.

Year introduced: 2021

 [COVID-19 Serological Testing](#)

3. Diagnosis of COVID-19 by assaying bodily fluids or tissues for the presence antibodies specific to SARS-CoV-2 or its antigens.

Year introduced: 2021

 [COVID-19 Nucleic Acid Testing](#)

4. Diagnosis of COVID-19 by assaying bodily fluids or tissues for the presence of the VIRAL RNA of SARS-CoV-2.

Year introduced: 2021

 [COVID-19](#)

5. A viral disorder generally characterized by high FEVER; COUGH; DYSPNEA; CHILLS; PERSISTENT TREMOR; MUSCLE PAIN; HEADACHE; SORE THROAT; a new loss of taste and/or smell (see AGEUSIA and ANOSMIA) and other symptoms of a VIRAL PNEUMONIA. In severe cases, a myriad of coagulopathy associated symptoms often correlating with COVID-19 severity is seen (e.g., BLOOD COAGULATION; THROMBOSIS; ACUTE RESPIRATORY DISTRESS SYNDROME; SEIZURES; HEART ATTACK; STROKE; multiple CEREBRAL INFARCTIONS; KIDNEY FAILURE; catastrophic ANTIPHOSPHOLIPID ANTIBODY SYNDROME and/or DISSEMINATED INTRAVASCULAR COAGULATION). In younger patients, rare inflammatory syndromes are sometimes associated with COVID-19 (e.g., atypical KAWASAKI SYNDROME; TOXIC SHOCK SYNDROME; pediatric multisystem inflammatory disease; and CYTOKINE STORM SYNDROME). A coronavirus, SARS-CoV-2, in the genus BETACORONAVIRUS is the causative agent.

## PubMed Search Builder

Add to search builder AND ▾

Search PubMed

YouTube Tutorial

## Find related data

Database: Select ▾

Find items

## Search details

```
"COVID-19"[All Fields] OR "COVID-19"
[MeSH Terms] OR "COVID-19 Vaccines"[All
Fields] OR "COVID-19 Vaccines"[MeSH
Terms] OR "COVID-19 serotherapy"[All
Fields] OR "COVID-19 serotherapy"[All
```

Search

See more...

## Recent Activity

Turn Off Clear

🔍 COVID-19 (144)

MeSH

📄 Asthma

MeSH

🔍 asthma (12)



**National Library of Medicine**  
National Center for Biotechnology Information

MeSH

MeSH



COVID-19

Limits Advanced

Full

Send to

## COVID-19

A viral disorder generally characterized by high FEVER; COUGH; DYSPNEA; CHILLS; PERSISTENT TREMOR; MUSCLE PAIN; HEADACHE; SORE THROAT; a new loss of taste and/or smell (see AGEUSIA and ANOSMIA) and other symptoms of a VIRAL PNEUMONIA. In severe cases, a myriad of coagulopathy associated symptoms often correlating with COVID-19 severity is seen (e.g., BLOOD COAGULATION; THROMBOSIS; ACUTE RESPIRATORY DISTRESS SYNDROME; SEIZURES; HEART ATTACK; STROKE; multiple CEREBRAL INFARCTIONS; KIDNEY FAILURE; catastrophic ANTIPHOSPHOLIPID ANTIBODY SYNDROME and/or DISSEMINATED INTRAVASCULAR COAGULATION). In younger patients, rare inflammatory syndromes are sometimes associated with COVID-19 (e.g., atypical KAWASAKI SYNDROME; TOXIC SHOCK SYNDROME; pediatric multisystem inflammatory disease; and CYTOKINE STORM SYNDROME). A coronavirus, SARS-CoV-2, in the genus BETACORONAVIRUS is the causative agent.

Year introduced: 2021(2020)

PubMed search builder options





## COVID-19

A viral disorder generally characterized by high FEVER; COUGH; DYSPNEA; CHILLS; PERSISTENT TREMOR; MUSCLE PAIN; HEADACHE; SORE THROAT; a new loss of taste and/or smell (see AGEUSIA and ANOSMIA) and other symptoms of a VIRAL PNEUMONIA. In severe cases, a myriad of coagulopathy associated symptoms often correlating with COVID-19 severity is seen (e.g., BLOOD COAGULATION; THROMBOSIS; ACUTE RESPIRATORY DISTRESS SYNDROME; SEIZURES; HEART ATTACK; STROKE; multiple CEREBRAL INFARCTIONS; KIDNEY FAILURE; catastrophic ANTIPHOSPHOLIPID ANTIBODY SYNDROME and/or DISSEMINATED INTRAVASCULAR COAGULATION). In younger patients, rare inflammatory syndromes are sometimes associated with COVID-19 (e.g., atypical KAWASAKI SYNDROME; TOXIC SHOCK SYNDROME; pediatric multisystem inflammatory disease; and CYTOKINE STORM SYNDROME). A coronavirus, SARS-CoV-2, in the genus BETACORONAVIRUS is the causative agent.

Year introduced: 2021(2020)

PubMed search builder options

Subheadings:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> analysis                | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> anatomy and histology   | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> blood                   | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> cerebrospinal fluid     | <input type="checkbox"/> etiology                        | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> chemically induced      | <input type="checkbox"/> genetics                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> classification          | <input type="checkbox"/> history                         | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> complications           | <input type="checkbox"/> immunology                      | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> congenital              | <input type="checkbox"/> legislation and jurisprudence   | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> diagnosis               | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> diagnostic imaging      | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> diet therapy            | <input type="checkbox"/> mortality                       | <input type="checkbox"/> transmission                  |
| <input checked="" type="checkbox"/> drug therapy | <input type="checkbox"/> nursing                         | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> economics               | <input type="checkbox"/> organization and administration | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> embryology              | <input type="checkbox"/> parasitology                    | <input type="checkbox"/> virology                      |

Restrict to MeSH Major Topic.

Do not include MeSH terms found below this term in the MeSH hierarchy.

### PubMed Search Builder

"COVID-19/drug therapy"[Mesh]

Add to search builder AND ▾

Search PubMed

YouTube Tutoria

### Related information

PubMed

PubMed - Major Topic

Clinical Queries

NLM MeSH Browser

### Recent Activity

Turn Off Clear

- COVID-19 MeSt
- Neoplasms MeSt
- cancer (397) MeSt
- wearable (2) MeSt
- Accidental Falls MeSt



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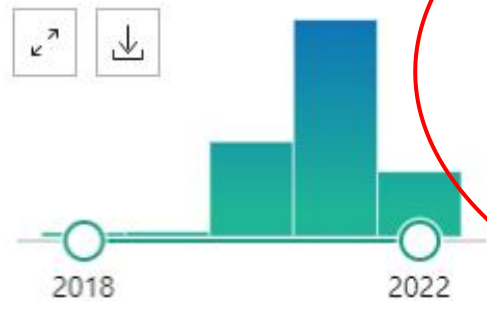
Display options

MY NCBI FILTERS

7275 results

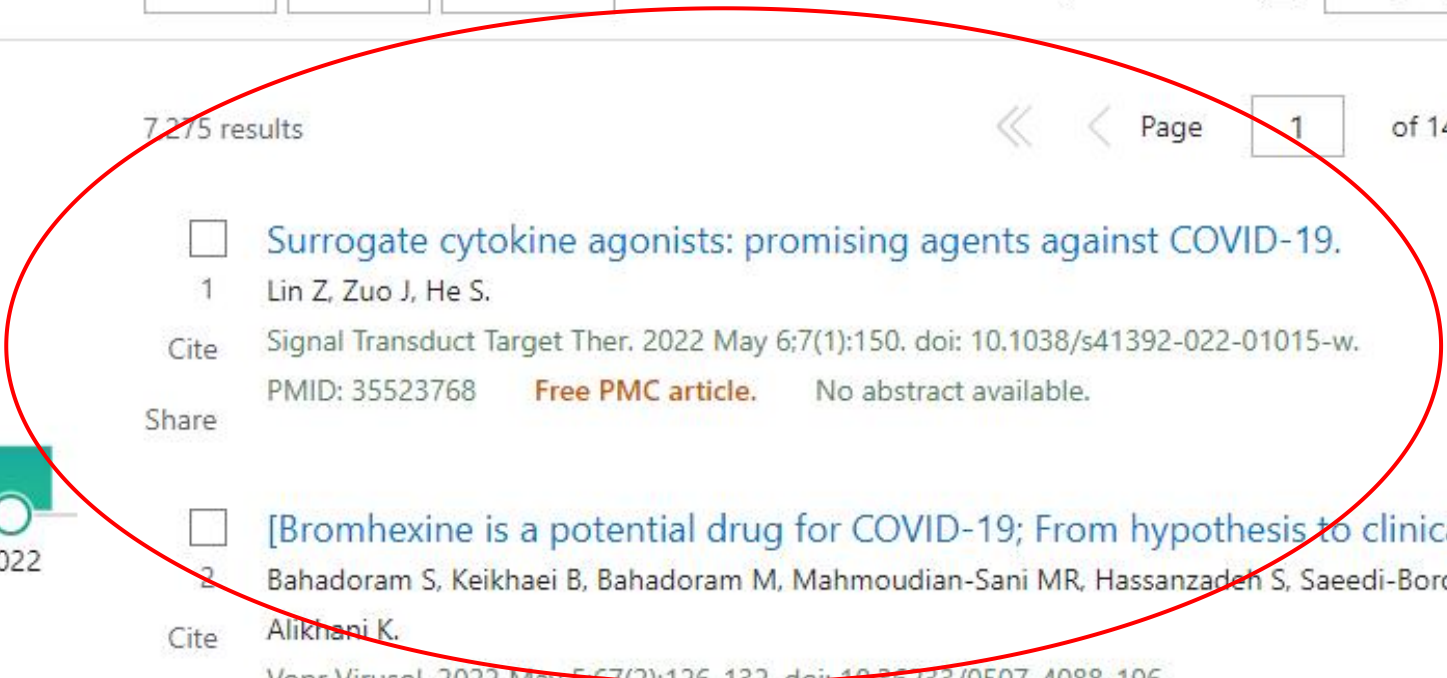
Page 1 of 146

RESULTS BY YEAR



TEXT AVAILABILITY

- Abstract
- Free full text
- Full text



Surrogate cytokine agonists: promising agents against COVID-19.

1 Lin Z, Zuo J, He S.

Cite Signal Transduct Target Ther. 2022 May 6;7(1):150. doi: 10.1038/s41392-022-01015-w. PMID: 35523768 Free PMC article. No abstract available.

Share

[Bromhexine is a potential drug for COVID-19; From hypothesis to clinical trials].

2 Bahadoram S, Keikhaei B, Bahadoram M, Mahmoudian-Sani MR, Hassanzadeh S, Saedi-Boroujeni A, Alikhani K.

Cite

Vopr Virusol. 2022 May 5;67(2):126-132. doi: 10.36233/0507-4088-106.

Share

PMID: 35521985 Russian.

[The problem of the use of interferons in the novel coronavirus disease COVID-19

3 [The problem of the use of interferons in the novel coronavirus disease COVID-19]



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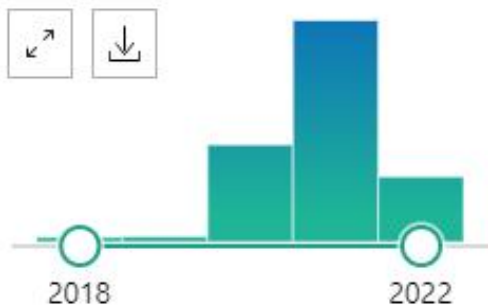
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7,242 results

Page 1 of 145

RESULTS BY YEAR



TEXT AVAILABILITY

Abstract

Clinical efficacy and safety of interleukin-6 receptor antagonists (tocilizumab and sarilumab) in patients with COVID-19: a systematic review and meta-analysis

Cite SCIIF 7.163 SCI基础版 医学2区 SCI升级版 医学2区 SCI Q1 XJU 二区 CUG 医学T3

Yu SY, Koh DH, Choi M, Ryoo S, Huh K, Yeom JS, Yoon YK.

Share Emerg Microbes Infect. 2022 Dec;11(1):1154-1165. doi: 10.1080/22221751.2022.2059405.

PMID: 35343397 Free PMC article.

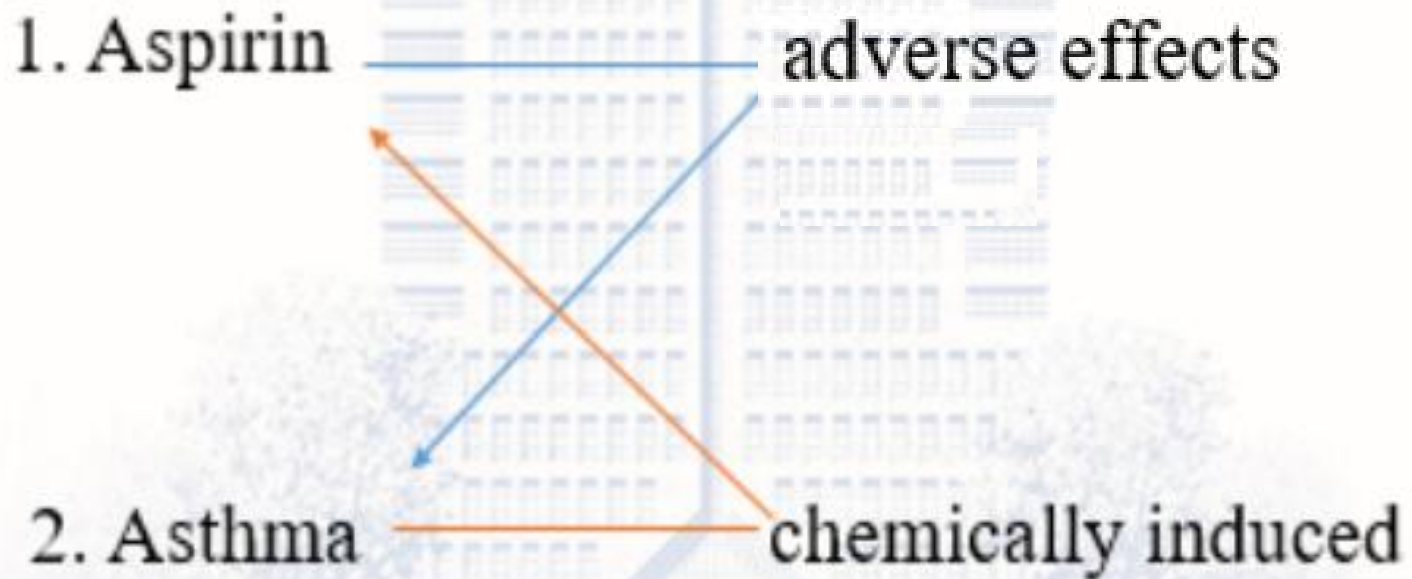
Fusion-inhibition peptide broadly inhibits influenza virus and SARS-CoV-2, including Delta and Omicron variants.

Cite SCIIF 7.163 SCI基础版 医学2区 SCI升级版 医学2区 SCI Q1 XJU 二区 CUG 医学T3

## 例子2

### 【例题】检索阿司匹林诱发哮喘的文献

- 常规分析：有几个主题词？主题词之间的关系





Asthma AND Aspirin



Search

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User Guide

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Sorted by: Best match

Display options

自由词检索的话有2812篇文献需要筛选

2,812 results

Page 1 of 57



**Aspirin** challenge and desensitization: how, when and why.

1

SWJTU A

SCIIF 3.142

SCI基础版 医学3区

SCI升级版 医学3区

SCI Q3

XJU 三区

Cite

CUG 医学T3

Share

Cortellini G, Caruso C, Romano A.

Curr Opin Allergy Clin Immunol. 2017 Aug;17(4):247-254. doi: 10.1097/ACI.0000000000000374.



MeSH

MeSH



asthma

Create alert Limits Advanced

Summary ▾ 20 per page ▾

S

## Search results

Items: 12

[Asthma](#)

1. A form of bronchial disorder with three distinct components: airway hyper-responsiveness (RESPIRATORY HYPERSENSITIV airway INFLAMMATION, and intermittent AIRWAY OBSTRUCTION. It is characterized by spasmodic contraction of airway smc muscle, WHEEZING, and dyspnea (DYSPNEA, PAROXYSMAL).

[Asthma, Occupational](#)

2. **Asthma** attacks caused, triggered, or exacerbated by OCCUPATIONAL EXPOSURE.  
Year introduced: 2012

[Asthma, Aspirin-Induced](#)

3. Asthmatic adverse reaction (e.g., BRONCHOCONSTRICTION) to conventional NSAIDS including aspirin use.  
Year introduced: 2010



## Asthma, Aspirin-Induced

Asthmatic adverse reaction (e.g., BRONCHOCONSTRICTION) to conventional NSAIDS including aspirin use.

Year introduced: 2010

Previous Indexing:

- Asthma/chemically induced (1973-2009)

All MeSH Categories

Diseases Category

Respiratory Tract Diseases

Bronchial Diseases

Asthma

**Asthma, Aspirin-Induced**

这表示2010年以后的文章有了专指的主题词进行标引。如果你只需要2010年以后的文章，理论上这个主题词就够了



[Asthma](#)

1. A form of bronchial disorder with three distinct components: airway hyper-responsiveness, airway INFLAMMATION, and intermittent AIRWAY OBSTRUCTION. It is characterized by cough, muscle, WHEEZING, and dyspnea (DYSPNEA, PAROXYSMAL).

[Asthma, Occupational](#)

2. **Asthma** attacks caused, triggered, or exacerbated by OCCUPATIONAL EXPOSURE.  
Year introduced: 2012

[Asthma, Aspirin-Induced](#)

3. Asthmatic adverse reaction (e.g., BRONCHOCONSTRICTION) to conventional NSAIDS  
Year introduced: 2010





## Asthma, Aspirin-Induced

Asthmatic adverse reaction (e.g., BRONCHOCONSTRICTION) to conventional NSAIDS including aspirin use.

Year introduced: 2010

PubMed search builder options

Subheadings:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> analysis              | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> anatomy and histology | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> blood                 | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> physiopathology               |
| <input type="checkbox"/> classification        | <input type="checkbox"/> etiology                        | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> complications         | <input type="checkbox"/> genetics                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> diagnosis             | <input type="checkbox"/> history                         | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> diagnostic imaging    | <input type="checkbox"/> immunology                      | <input type="checkbox"/> surgery                       |
| <input type="checkbox"/> diet therapy          | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> drug therapy          | <input type="checkbox"/> organization and administration | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> economics             |  |  |

Restrict to MeSH Major Topic.

Do not include MeSH terms found below this term in the MeSH hierarchy.

Tree Number(s): C08.127.108.054, C08.674.095.054, C20.543.206.189, C20.543.480.149, C25.100.468.189

MeSH Unique ID: D055963

Entry Terms:

### PubMed Search Builder

"Asthma, Aspirin-Induced" [Mesh]

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Entry Terms:

- Aspirin-Induced Asthmas
- Asthma, Aspirin Induced
- Asthmas, Aspirin-Induced
- Asthma, NSAID-induced
- Asthma, NSAID induced
- Asthmas, NSAID-induced
- NSAID-induced Asthma
- NSAID-induced Asthmas
- Aspirin-Induced Asthma Syndrome
- Aspirin Induced Asthma Syndrome
- Aspirin-Induced Asthma Syndromes
- Asthma Syndrome, Aspirin-Induced
- Asthma Syndromes, Aspirin-Induced
- Syndrome, Aspirin-Induced Asthma
- Syndromes, Aspirin-Induced Asthma
- Aspirin Induced Asthma
- Aspirin Induced Asthmas
- Asthmas, Aspirin Induced
- Induced Asthma, Aspirin
- Induced Asthmas, Aspirin
- Aspirin-Induced Asthma

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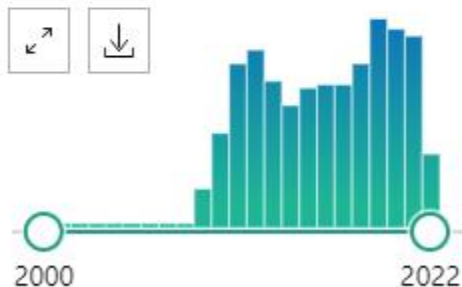
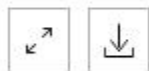
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453 results

Page 1 of 10

RESULTS BY YEAR



TEXT AVAILABILITY

Abstract

1 If aspirin-exacerbated respiratory disease treatment is a jigsaw puzzle, where do the aspirin and biologic pieces go?

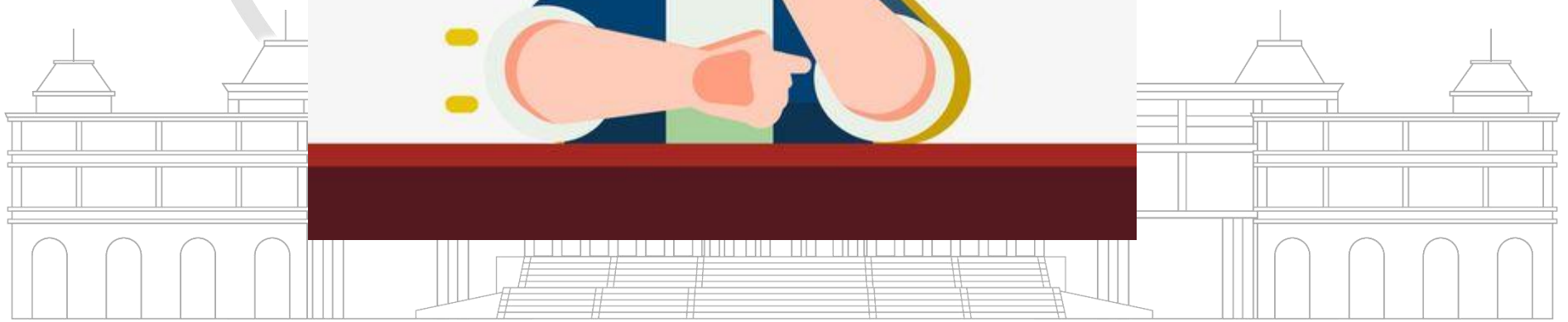
Cite White AA.  
Ann Allergy Asthma Immunol. 2022 May;128(5):484-485. doi: 10.1016/j.anai.2022.03.012.  
Share PMID: 35489798 No abstract available.

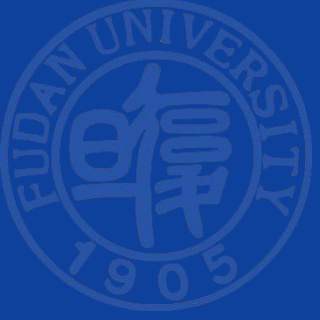
2 Aspirin-Exacerbated Respiratory Disease: A Unique Case of Drug Hypersensitivity.  
Corey KB, Cahill KN.

Cite Immunol Allergy Clin North Am. 2022 May;42(2):421-432. doi: 10.1016/j.jiac.2021.12.005. Epub 2022 Mar 31.



如果还想要标引之前的文章呢?





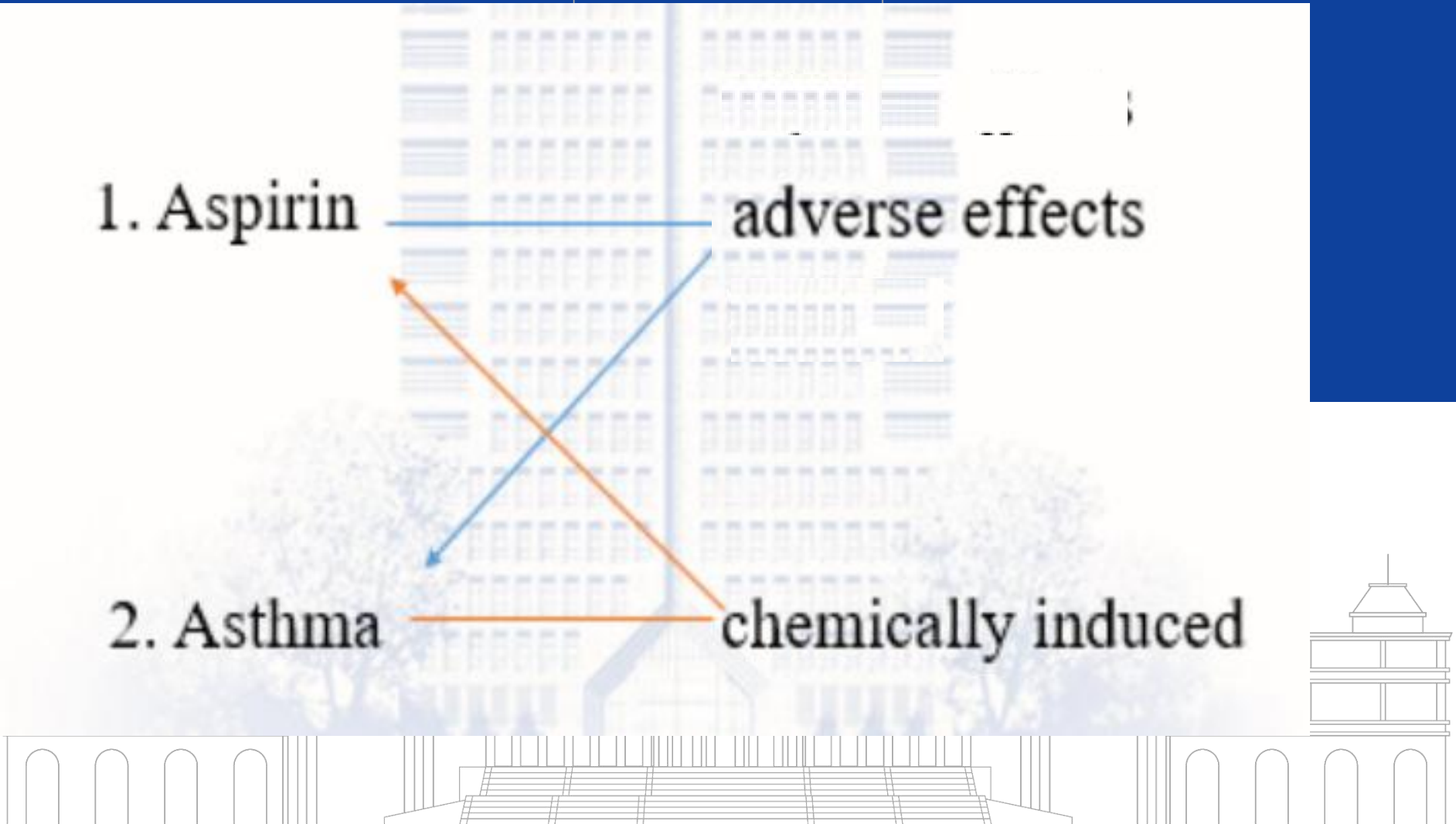
如果还想要标引之前的文章呢?

1. Aspirin

adverse effects

2. Asthma

chemically induced





MeSH

MeSH

aspirin |

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Summary ▾ 20 per page ▾

Send to: ▾

### Search results

Items: 1 to 20 of 40

<< First < Prev Page 1 of 2 Next > Last >>

[Aspirin](#)

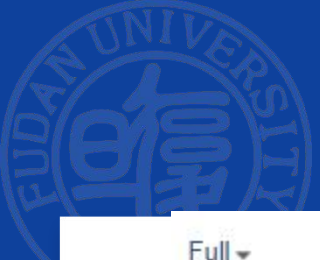
1. The prototypical analgesic used in the treatment of mild to moderate pain. It has anti-inflammatory and antipyretic properties and acts as an inhibitor of cyclooxygenase which results in the inhibition of the biosynthesis of prostaglandins. **Aspirin** also inhibits platelet aggregation and is used in the prevention of arterial and venous thrombosis. (From Martindale, The Extra Pharmacopoeia, 30th ed, p5)  
Year introduced: 1965

[Asthma, Aspirin-Induced](#)

2. Asthmatic adverse reaction (e.g., BRONCHOCONSTRICTION) to conventional NSAIDS including **aspirin** use.  
Year introduced: 2010

[Aspirin, Dipyridamole Drug Combination](#)

3. A drug combination of **aspirin** and dipyridamole that functions as a PLATELET AGGREGATION INHIBITOR, used to prevent THROMBOSIS and STROKE in TRANSIENT ISCHEMIC ATTACK patients.  
Year introduced: 2016 (1986)



Full ▾

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## Aspirin

The prototypical analgesic used in the treatment of mild to moderate pain. It has anti-inflammatory and antipyretic properties and acts as an inhibitor of cyclooxygenase which results in the inhibition of the biosynthesis of prostaglandins. Aspirin also inhibits platelet aggregation and is used in the prevention of arterial and venous thrombosis. (From Martindale, The Extra Pharmacopoeia, 30th ed, p5)

Year introduced: 1965

PubMed search builder options

Subheadings:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> administration and dosage  | <input type="checkbox"/> classification                  | <input type="checkbox"/> physiology                    |
| <input checked="" type="checkbox"/> adverse effects | <input type="checkbox"/> economics                       | <input type="checkbox"/> poisoning                     |
| <input type="checkbox"/> agonists                   | <input type="checkbox"/> etiology                        | <input type="checkbox"/> radiation effects             |
| <input type="checkbox"/> analogs and derivatives    | <input type="checkbox"/> history                         | <input type="checkbox"/> standards                     |
| <input type="checkbox"/> analysis                   | <input type="checkbox"/> immunology                      | <input type="checkbox"/> statistics and numerical data |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> isolation and purification      | <input type="checkbox"/> supply and distribution       |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> metabolism                      | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> cerebrospinal fluid        | <input type="checkbox"/> organization and administration | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> chemical synthesis         | <input type="checkbox"/> pharmacokinetics                | <input type="checkbox"/> toxicity                      |
| <input type="checkbox"/> chemistry                  | <input type="checkbox"/> pharmacology                    | <input type="checkbox"/> urine                         |

Restrict to MeSH Major Topic.

Do not include MeSH terms found below this term in the MeSH hierarchy.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000

adverse effects

poisoning

toxicity

### PubMed Search Builder

"Aspirin/adverse effects" [Mesh]

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### Related information

PubMed

PubMed - Major Topic

Clinical Queries

NLM MeSH Browser

PubChem Compound

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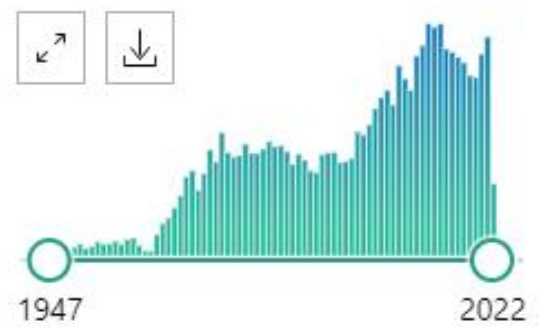
 Aspirin



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10,971 results

RESULTS BY YEAR



TEXT AVAILABILITY

- Aspirin/NSAID Challenge Should Be Performed Routinely in Patients With Self-Reported Aspirin/NSAID Allergy. White AA, Lang DM. J Allergy Clin Immunol Pract. 2022 May;10(5):1293-1294. doi: 10.1016/j.jaip.2022.01.049. PMID: 35526866 No abstract available. [Idiopathic esophageal submucosal hematoma during antithrombotic therapy for essential thrombocythemia]. Kishi Y, Aota Y, Horie Y, Sutoh A, Moriyama M, Okabe M, Iguchi T, Yokouchi Y, Gotoh A, Maetani I.





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## Asthma

A form of bronchial disorder with three distinct components: airway hyper-responsiveness (RESPIRATORY HYPERSENSITIVITY), airway INFLAMMATION, and intermittent AIRWAY OBSTRUCTION. It is characterized by spasmodic contraction of airway smooth muscle, WHEEZING, and dyspnea (DYSYPNEA, PAROXYSMAL).

PubMed search builder options

[Subheadings:](#)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> analysis                      | <input type="checkbox"/> embryology                      | <input type="checkbox"/> parasitology                  |
| <input type="checkbox"/> anatomy and histology         | <input type="checkbox"/> enzymology                      | <input type="checkbox"/> pathology                     |
| <input type="checkbox"/> blood                         | <input type="checkbox"/> epidemiology                    | <input type="checkbox"/> physiology                    |
| <input type="checkbox"/> cerebrospinal fluid           | <input type="checkbox"/> ethnology                       | <input type="checkbox"/> physiopathology               |
| <input checked="" type="checkbox"/> chemically induced | <input type="checkbox"/> etiology                        | <input type="checkbox"/> prevention and control        |
| <input type="checkbox"/> classification                | <input type="checkbox"/> genetics                        | <input type="checkbox"/> psychology                    |
| <input type="checkbox"/> complications                 | <input type="checkbox"/> history                         | <input type="checkbox"/> radiotherapy                  |
| <input type="checkbox"/> congenital                    | <input type="checkbox"/> immunology                      | <input type="checkbox"/> rehabilitation                |
| <input type="checkbox"/> diagnosis                     | <input type="checkbox"/> legislation and jurisprudence   | <input type="checkbox"/> statistics and numerical data |
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| <input type="checkbox"/> diet therapy                  | <input type="checkbox"/> microbiology                    | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> drug effects                  | <input type="checkbox"/> mortality                       | <input type="checkbox"/> urine                         |
| <input type="checkbox"/> drug therapy                  | <input type="checkbox"/> nursing                         | <input type="checkbox"/> veterinary                    |
| <input type="checkbox"/> economics                     | <input type="checkbox"/> organization and administration | <input type="checkbox"/> virology                      |

Restrict to MeSH Major Topic.

### PubMed Search Builder

"Asthma/chemically induced" [Mesh]

Add to search builder AND ▾

Search PubMed

[Tutori](#)

### Related information

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- Clinical Queries
- NLM MeSH Browser
- dbGaP Links
- MedGen

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Asthma

MeS





"Asthma/chemically induced"[Mesh]



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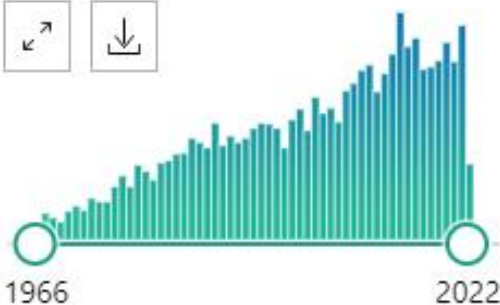
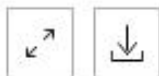
Display options

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5,111 results

Page 1 of 103

RESULTS BY YEAR



TEXT AVAILABILITY



Cleaning Products Commonly Used in Oklahoma Family Child Care Homes: Implications for Respiratory Risk and Children's Health.

1

Cite

Querdibitty CD, Wetherill MS, Sisson SB, Williams B, Aithinne K, Seo H, Inhofe NR, Campbell J, Slawinski M, Salvatore AL.

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Int J Environ Res Public Health. 2022 Apr 3;19(7):4299. doi: 10.3390/ijerph19074299.

PMID: 35409980 **Free PMC article.**



Comparative efficacy of inhalers in mild-to-moderate asthma: systematic review and network meta-analysis.

2

Add terms to the query box


All Fields 

Enter a search term


AND 

Show Index

Query box

("Asthma/chemically induced"[Mesh]) AND ("Aspirin/adverse effects"[Mesh]) 

Search 


("Asthma/chemically induced"[Mesh]) AND ("Aspirin/adverse effects"[Mesh]) 


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631 results

  Page  of 13  

[Aspirin-induced asthma: a still evolving area of basic and clinical research.](#)

1 Sanak M.

Pol Arch Intern Med. 2022 Feb 28;132(2):16219. doi: 10.20452/pamw.16219. Epub 2022 Feb 28.

Add terms to the query box

All Fields



Enter a search term

AND



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Query box

("Asthma, Aspirin-Induced"[Mesh]) OR (("Asthma/chemically induced"[Mesh]) AND ("Aspirin/adverse effects"[Mesh]))



Search



## History and Search Details



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Search	Actions	Details	Query	Results	Time
#9	...	>	Search: " <b>Asthma, Aspirin-Induced</b> "[Mesh] Sort by: <b>Most Recent</b>	453	00:57:16
#8	...	>	Search: (" <b>Asthma/chemically induced</b> "[Mesh]) AND (" <b>Aspirin/adverse effects</b> "[Mesh]) Sort by: <b>Publication Date</b>	631	00:54:56

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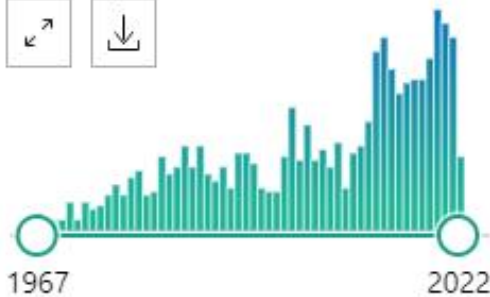
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RESULTS BY YEAR



1 [If aspirin-exacerbated respiratory disease treatment is a jigsaw puzzle, where do the aspirin and biologic pieces go?](#)

Cite White AA.  
Ann Allergy Asthma Immunol. 2022 May;128(5):484-485. doi: 10.1016/j.anai.2022.03.012.  
Share PMID: 35489798 No abstract available.

2 [Aspirin-Exacerbated Respiratory Disease: A Unique Case of Drug Hypersensitivity.](#)  
Corey KB, Cahill KN.



Review > Respir Med. 2018 Feb;135:62-75. doi: 10.1016/j.rmed.2018.01.002. Epub 2018 Jan 10.

# Aspirin exacerbated respiratory disease: Current topics and trends

José Carlos Rodríguez-Jiménez <sup>1</sup>, Fernanda Judith Moreno-Paz <sup>1</sup>, Luis Manuel Terán <sup>2</sup>, Eduardo Guaní-Guerra <sup>3</sup>

Affiliations + expand

PMID: 29414455 DOI: 10.1016/j.rmed.2018.01.002

Free article

## Abstract

Aspirin-exacerbated respiratory disease is a chronic and treatment-resistant disease, characterized by the presence of eosinophilic rhinosinusitis, nasal polyposis, bronchial asthma, and nonsteroidal anti-inflammatory drugs hypersensitivity. Alterations in arachidonic acid metabolism may induce an

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## Respiratory Medicine

Volume 135, February 2018, Pages 62-75



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Review article

# Aspirin exacerbated respiratory disease: Current topics and trends

José Carlos Rodríguez-Jiménez <sup>a, 1</sup>, Fernanda Judith Moreno-Paz <sup>a, 1</sup>, Luis Manuel Terán <sup>b</sup>, Eduardo Guaní-Guerra <sup>a, c</sup>

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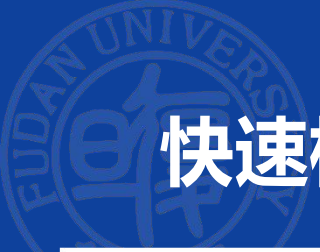
Open archive

# 几种检索方法的对比

查找“厄洛替尼治疗肺癌”的文章。（此实例仅为比较几种检索方法的查全和查准率，未包含所有关键词。一般开题研究时需要尽量找全各个词不同写法和综合多种检索式；跟踪研究时选用主题词检索）

词1：erlotinib

词2：lung cancer



# 快速检索

- 1. **快速检索**, 在快速检索栏输入「lung cancer, erlotinib」点击 search

Search: **erlotinib lung cancer** Sort by: **Most Recent** 4,877

- 2. **快速检索**, 给 lung cancer 和 erlotinib 分别加上引号进行检索

Search: "**erlotinib**" "**lung cancer**" Sort by: **Most Recent** 4,218



### 3. 高级检索

Add terms to the query box

Title/Abstract

Query box

`"lung cancer" [Title/Abstract] AND "erlotinib" [Title/Abstract]`

Search: **(lung cancer[Title/Abstract]) AND (erlotinib[Title/Abstract])**

3,840

Sort by: **Most Recent**

## 4. Clinical Queries

lung cancer



Search

### Filter category

- Clinical Studies
- COVID-19

Clinical Queries filters were developed by [Haynes RB et al.](#) to facilitate retrieval of clinical studies.

### Filter

Therapy



See [Clinical Queries filter details](#).

### Scope

Broad



Returns more results: less specific, but more comprehensive. See [filter details](#).

(lung cancer) AND (Therapy/Broad[filter]) erlotinib



Search

[Advanced](#) [Create alert](#) [Create RSS](#)

[User Guide](#)

Save

Email

Send to

Sorted by: Most recent

Display options

3,383 results



Page

1

of 68



# 5. Mesh 检索

MeSH    [Limits](#) [Advanced](#) [Help](#)

Full ▾

### Lung Neoplasms

Tumors or cancer of the LUNG.

PubMed search builder options  
[Subheadings:](#)

<input type="checkbox"/> analysis	<input type="checkbox"/> embryology	<input type="checkbox"/> physiology
<input type="checkbox"/> anatomy and histology	<input type="checkbox"/> enzymology	<input type="checkbox"/> physiopathology
<input type="checkbox"/> blood	<input type="checkbox"/> epidemiology	<input type="checkbox"/> prevention and control
<input type="checkbox"/> blood supply	<input type="checkbox"/> ethnology	<input type="checkbox"/> psychology
<input type="checkbox"/> cerebrospinal fluid	<input type="checkbox"/> etiology	<input type="checkbox"/> radiation effects
<input type="checkbox"/> chemically induced	<input type="checkbox"/> genetics	<input type="checkbox"/> radiotherapy
<input type="checkbox"/> chemistry	<input type="checkbox"/> history	<input type="checkbox"/> rehabilitation
<input type="checkbox"/> classification	<input type="checkbox"/> immunology	<input type="checkbox"/> secondary
<input type="checkbox"/> complications	<input type="checkbox"/> metabolism	<input type="checkbox"/> statistics and numerical data
<input type="checkbox"/> congenital	<input type="checkbox"/> microbiology	<input type="checkbox"/> surgery
<input type="checkbox"/> cytology	<input type="checkbox"/> mortality	<input checked="" type="checkbox"/> therapy
<input type="checkbox"/> diagnosis	<input type="checkbox"/> nursing	<input type="checkbox"/> transmission
<input type="checkbox"/> diagnostic imaging	<input type="checkbox"/> organization and administration	<input type="checkbox"/> ultrastructure
<input type="checkbox"/> diet therapy	<input type="checkbox"/> parasitology	<input type="checkbox"/> urine
<input type="checkbox"/> drug effects	<input type="checkbox"/> pathogenicity	<input type="checkbox"/> veterinary
<input type="checkbox"/> drug therapy	<input type="checkbox"/> pathology	<input type="checkbox"/> virology
<input type="checkbox"/> economics	<input type="checkbox"/> pharmacology	

Restrict to MeSH Major Topic.  
 Do not include MeSH terms found below this term in the MeSH hierarchy.

Send to: ▾

#### PubMed Search Builder

"Lung Neoplasms/therapy" [Mesh]

▾

[YouTube Tutorial](#)

#### Related information

PubMed  
PubMed - Major Topic  
Clinical Queries  
NLM MeSH Browser  
dbGaP Links  
MedGen

#### Recent Activity

[Turn Off](#) [Clear](#)

Lung Neoplasms MeSH

lung cancer (13) MeSH

Full ▾

Send to: ▾

## Erlotinib Hydrochloride

A quinazoline derivative and ANTINEOPLASTIC AGENT that functions as a PROTEIN KINASE INHIBITOR for EGFR associated tyrosine kinase. It is used in the treatment of NON-SMALL CELL LUNG CANCER.

Year introduced: 2016 (1999)

PubMed search builder options

Subheadings:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> administration and dosage  | <input type="checkbox"/> cerebrospinal fluid             | <input type="checkbox"/> pharmacokinetics           |
| <input type="checkbox"/> adverse effects            | <input type="checkbox"/> chemical synthesis              | <input type="checkbox"/> pharmacology               |
| <input type="checkbox"/> analogs and derivatives    | <input type="checkbox"/> chemistry                       | <input type="checkbox"/> physiology                 |
| <input type="checkbox"/> analysis                   | <input type="checkbox"/> economics                       | <input type="checkbox"/> standards                  |
| <input type="checkbox"/> antagonists and inhibitors | <input type="checkbox"/> metabolism                      | <input checked="" type="checkbox"/> therapeutic use |
| <input type="checkbox"/> blood                      | <input type="checkbox"/> organization and administration | <input type="checkbox"/> toxicity                   |

Restrict to MeSH Major Topic.

Do not include MeSH terms found below this term in the MeSH hierarchy.

Tree Number(s): D03.633.100.786.375

MeSH Unique ID: D000069347

Registry Number: DA87705X9K

### PubMed Search Builder

"Erlotinib Hydrochloride/therapeutic use" [Mesh]

Add to search builder AND ▾

Search PubMed

 Tutorial

### Related information

PubMed

PubMed - Major Topic

Clinical Queries

NLM MeSH Browser

PubChem Compound

### Recent Activity

## Query

Search: ("**Erlotinib Hydrochloride/therapeutic use**"[Mesh]) AND ("**Lung Neoplasms/therapy**"[Mesh]) Sort by: **Most Recent**

## Results

770

# 检索式的选择

## 开题时：

#1 "Lung Neoplasms"[Mesh]

#2 lung cancer\*[TIAB] OR lung tumor\*[TIAB] OR lung carcinoma\*[TIAB] OR lung neoplasm\*[TIAB] OR pulmonary cancer\*[TIAB] OR pulmonary tumor\*[TIAB] OR pulmonary carcinoma\*[TIAB] OR pulmonary neoplasm\*[TIAB]

#3 #1 OR #2

#4 Erlotinib[Mesh]

#5 Erlotinib[TIAB] OR 11C-erlotinib[TIAB] OR OSI-774 [TIAB] OR OSI774[TIAB] OR CP 358774[TIAB] OR CP 358,774[TIAB] OR Tarceva[TIAB] OR "N-(3-ethynylphenyl)-6,7-bis(2-methoxyethoxy)quinazolin-4-amine"[TIAB]

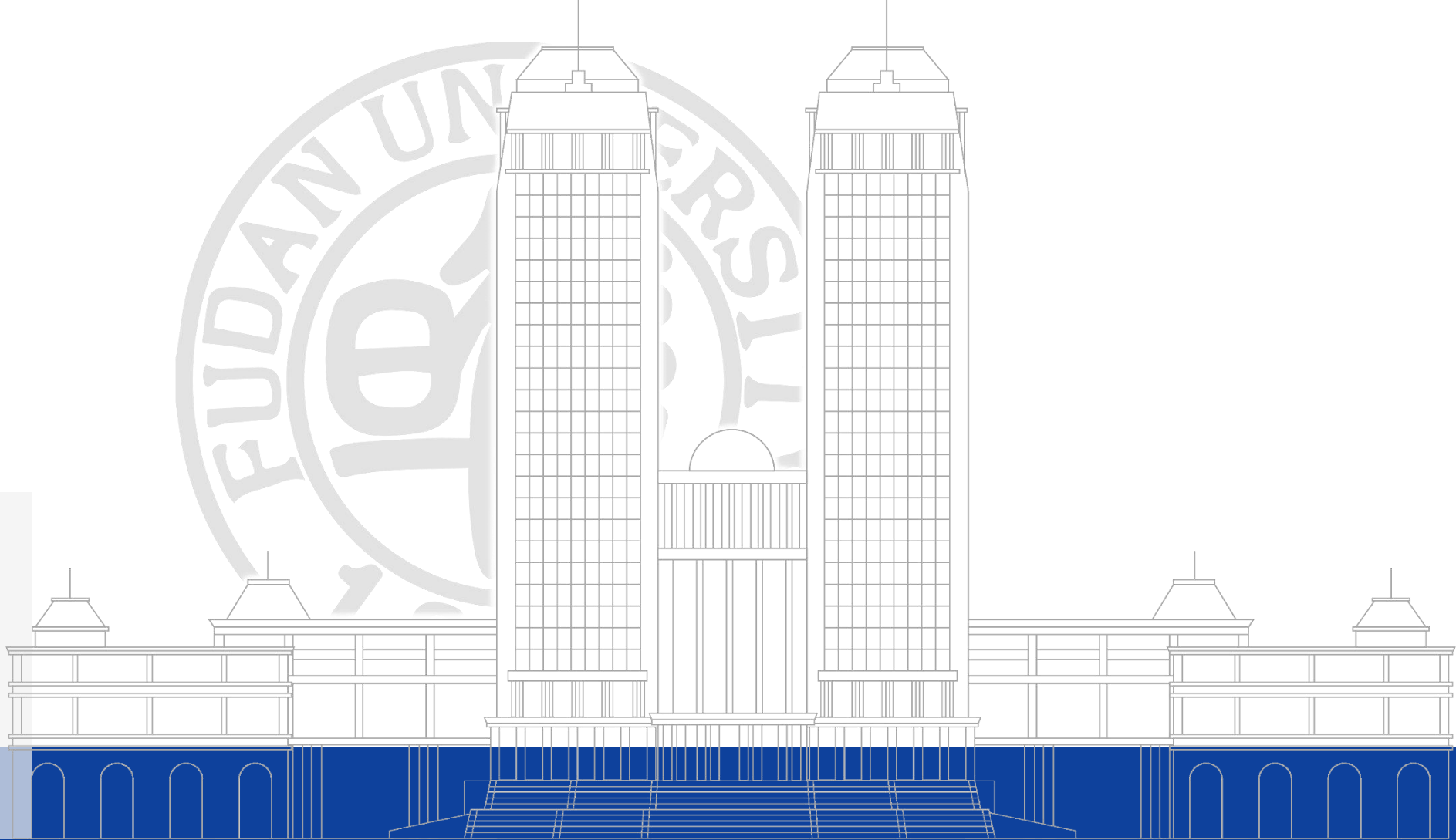
#6 #4 OR #5

#7 #3 AND #6 (4,793 results)

## 文献追踪：

#0 "erlotinib hydrochloride/therapeutic use"[MeSH Terms] AND "lung neoplasms/therapy"[MeSH Terms] AND "last 30 days"[mhda]

04



其他

# 4.1 PubMed Clinical Queries(临床查询)



## Learn

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FAQs & User Guide  
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Clinical Queries  
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Batch Citation Matcher



## Explore

MeSH Database  
Journals



# PubMed Clinical Queries

This tool uses [predefined filters](#) to help you quickly refine PubMed searches on clinical or disease-specific topics. To use this tool, enter your search terms in the search bar and select filters before searching.

**Note:** The Systematic Reviews filter has moved; it is now an option under the "Article Type" filter on the main PubMed search results page.

Enter your search terms

Search

## Filter category

- Clinical Studies
- COVID-19

Clinical Queries filters were developed by [Haynes RB et al.](#) to facilitate retrieval of clinical studies.

## Filter

Therapy

- Therapy
- Clinical Prediction Guides
- Diagnosis
- Etiology
- Prognosis

## Scope

Broad

- Broad
- Narrow results: less specific, but more comprehensive. [See filter details.](#)





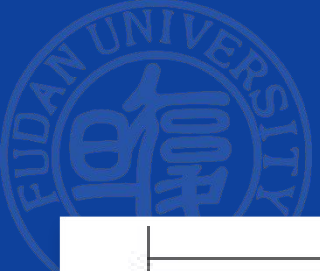
表1 临床查询中研究类型的过滤器细节以及敏感度特异度

分类	优化方向	敏感度/ 特异度	检索过滤器解析
治疗	敏感度/宽	99%/70%	((clinical[Title/Abstract] AND trial[Title/Abstract]) OR clinical trials as topic[MeSH Terms] OR clinical trial[Publication Type] OR random*[Title/Abstract] OR random allocation[MeSH Terms] OR therapeutic use[MeSH Subheading])
	特异度/窄	93%/97%	(randomized controlled trial[Publication Type] OR (randomized[Title/Abstract] AND controlled[Title/Abstract] AND trial[Title/Abstract]))
诊断	敏感度/宽	98%/74%	(sensitiv*[Title/Abstract] OR sensitivity and specificity[MeSH Terms] OR diagnose[Title/Abstract] OR diagnosed[Title/Abstract] OR diagnoses[Title/Abstract] OR diagnosing[Title/Abstract] OR diagnosis[Title/Abstract] OR diagnostic[Title/Abstract] OR diagnosis[MeSH:noexp] OR diagnostic*[MeSH:noexp] OR diagnosis differential[MeSH:noexp] OR diagnosis differential[MeSH:noexp])
	特异度/窄	64%/98%	(specificity[Title/Abstract])
病因	敏感度/宽	93%/63%	(risk*[Title/Abstract] OR risk*[MeSH:noexp] OR risk*[MeSH:noexp] OR cohort studies[MeSH Terms] OR group[Text Word] OR groups[Text Word] OR grouped [Text Word])
	特异度/窄	51%/95%	((relative[Title/Abstract] AND risk*[Title/Abstract]) OR (relative risk[Text Word]) OR risks[Text Word] OR cohort studies[MeSH:noexp] OR (cohort[Title/Abstract] AND study[Title/Abstract]) OR (cohort[Title/Abstract] AND studies[Title/Abstract]))
预后	敏感度/宽	90%/80%	(incidence[MeSH:noexp] OR mortality[MeSH Terms] OR follow up studies[MeSH:noexp] OR prognos*[Text Word] OR predict*[Text Word] OR course*[Text Word])
	特异度/窄	52%/94%	(prognos*[Title/Abstract] OR (first[Title/Abstract] AND episode[Title/Abstract]) OR cohort[Title/Abstract])
临床预测指南	敏感度/宽	96%/79%	(predict*[tiab] OR predictive value of tests[mh] OR score[tiab] OR scores[tiab] OR scoring system[tiab] OR scoring systems[tiab] OR observ*[tiab] OR observer variation[mh])
	特异度/窄	54%/99%	(validation[tiab] OR validate[tiab])

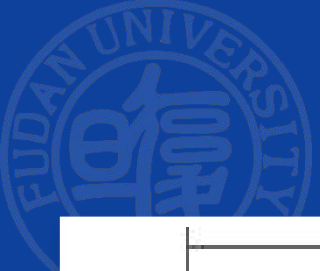
<https://www.ncbi.nlm.nih.gov/pubmed/?term=20671080>



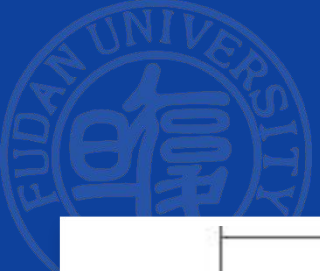
Category	Optimized for	Sensitive/ Specific	PubMed equivalent
Therapy	sensitive/broad	99%/70%	((clinical[Title/Abstract] AND trial[Title/Abstract]) OR clinical trials as topic[MeSH Terms] OR clinical trial[Publication Type] OR random* [Title/Abstract] OR random allocation[MeSH Terms] OR therapeutic use[MeSH Subheading])
	specific/narrow	93%/97%	(randomized controlled trial[Publication Type] OR (randomized[Title/Abstract] AND controlled[Title/Abstract] AND trial[Title/Abstract]))



Diagnosis	sensitive/broad	98%/74%	(sensitiv*[Title/Abstract] OR sensitivity and specificity[MeSH Terms] OR diagnose[Title/Abstract] OR diagnosed[Title/Abstract] OR diagnoses[Title/Abstract] OR diagnosing[Title/Abstract] OR diagnosis[Title/Abstract] OR diagnostic[Title/Abstract] OR diagnosis[MeSH:noexp] OR (diagnostic equipment[MeSH:noexp] OR diagnostic errors[MeSH:noexp] OR diagnostic imaging[MeSH:noexp] OR diagnostic services[MeSH:noexp]) OR diagnosis, differential[MeSH:noexp] OR diagnosis[Subheading:noexp])
	specific/narrow	64%/98%	(specificity[Title/Abstract])



Etiology	sensitive/broad	93%/63%	(risk*[Title/Abstract] OR risk*[MeSH:noexp] OR (risk adjustment[MeSH:noexp] OR risk assessment[MeSH:noexp] OR risk factors[MeSH:noexp] OR risk management[MeSH:noexp] OR risk taking[MeSH:noexp]) OR cohort studies[MeSH Terms] OR group[Text Word] OR groups[Text Word] OR grouped [Text Word])
	specific/narrow	51%/95%	((relative[Title/Abstract] AND risk*[Title/Abstract]) OR (relative risk[Text Word]) OR risks[Text Word] OR cohort studies[MeSH:noexp] OR (cohort[Title/Abstract] AND study[Title/Abstract]) OR (cohort[Title/Abstract] AND studies[Title/Abstract]))



Prognosis	sensitive/broad	90%/80%	(incidence[MeSH:noexp] OR mortality[MeSH Terms] OR follow up studies[MeSH:noexp] OR prognos*[Text Word] OR predict*[Text Word] OR course*[Text Word])
	specific/narrow	52%/94%	(prognos*[Title/Abstract] OR (first[Title/Abstract] AND episode[Title/Abstract]) OR cohort[Title/Abstract])
Clinical Prediction Guides	sensitive/broad	96%/79%	(predict*[Title/Abstract] OR predictive value of tests[MeSH Terms] OR score[Title/Abstract] OR scores[Title/Abstract] OR scoring system[Title/Abstract] OR scoring systems[Title/Abstract] OR observ*[Title/Abstract] OR observer variation[MeSH Terms])
	specific/narrow	54%/99%	(validation[Title/Abstract] OR validate[Title/Abstract])

# 临床查询的优缺点

- 临床查询通过结构化的检索式和交互界面，可以在一定程度上提高工作效率。  
临床查询通过综合使用主题词、关键词和字段限定检索，保证了查全和查准率。
- 设定栏目的检索策略，是随着学科的发展和PubMed数据库的更新不断更新的。
- 临床查询已经定制的内容不能灵活的修改，仅能检索定制的栏目内容。如果需要检索其他研究方向的内容，可以参考临床查询中已经制定好的三个检索式的思路，制定自己的检索策略或者结合My NCBI的自定义过滤器功能定制常用的、适合自己的过滤器。

## 4.2 pubmedplus

<http://www.pubmedplus.cn>

PubMedPlus的名称来源于PubMed和Plus。读者在PubMed输入任意检索式，复制到PubMedPlus检索，都可以得到完全一致的结果；Plus是指PubMedPlus拥有PubMed没有的功能。

- PubMedPlus系统可以对年份、作者、主题词、中药、国家、城市等30多项进行聚类 and 统计，按照出现的频率展示PubMed的检索结果进行分面检索与聚类分析。可以把读者在PubMed的检索结果，按照期刊、机构、部门、给读者。
- PubMedPlus有助于"科研人员"对学者、机构、期刊以及研究领域进行学术评价和评估；
- PubMedPlus为各级各类的学术评价、大学或研究机构的学术排名、学科竞争力分析等提供补充数据；
- PubMedPlus系统提供两类服务：检索分析服务和个性化定制服务（机构库文献分析，馆藏资源发现及全文揭示）。



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PubMed检索

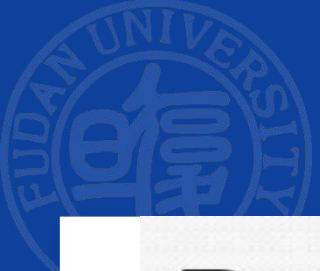
[高级检索](#)

[对比分析](#)

[本机构分析](#)

[期刊投稿指南](#)



 检索

## 机构对比分析

对比机构:  检索

## 学者对比分析

对比学者:  精确匹配   
所属机构:  检索

## 操作步骤

- 1.机构对比:** 依次在对比机构输入框中输入机构名称, 点击"检索"按钮, 在检索列表中找到对应的机构并点击其后的"加入对比"按钮。
- 2.学者对比:** 依次在对比学者输入框中输入学者姓名(如想缩小检索范围, 也可勾选输入框后的精确匹配选项或者在所属机构输入框中输入学者所属机构), 点击"检索"按钮, 在检索列表中找到对应的学者并点击其后的"加入对比"按钮。
- 3.** 在屏幕右侧的对比框中点击"执行"按钮, 即可完成对比分析。
- 4.备注:** 当某个学者有在多家机构工作的经历时, 本系统仅显示其中之一, 但检索和对比的数据是其全部发表的文献。

## 检索列表

 检索

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PubMed检索 高级检索 对比分析 本机构分析 期刊投稿指南

- 搜文献选期刊**
- Medline收录期刊
- PubMed收录期刊
- Embase收录期刊
- PubMed未收录医学期刊

查询方式： 按文献主题查询  按标题或摘要查询  按期刊名称查询

按文献主题查询：

检索表达式预览

All Fields  -

AND All Fields  - +

[编辑](#) [清除](#)

影响因子范围：  至

文献发表年份：  至

文献类型：

查询合适期刊

## 4.3 Open-i

- <https://openi.nlm.nih.gov>
- 国家医学图书馆的Open-i服务支持从开放源码文献和生物医学图像集合中搜索和检索摘要和图像(包括图表、图表、临床图像等)。搜索可以使用文本查询和查询图像来完成。
- Open-i提供了对PubMed中心120万篇文章中370多万幅图像的访问; 7,470例胸部x光片, 3955例放射学报告; 67517幅图像来自NLM医学收藏的历史; 2064幅骨科插图。



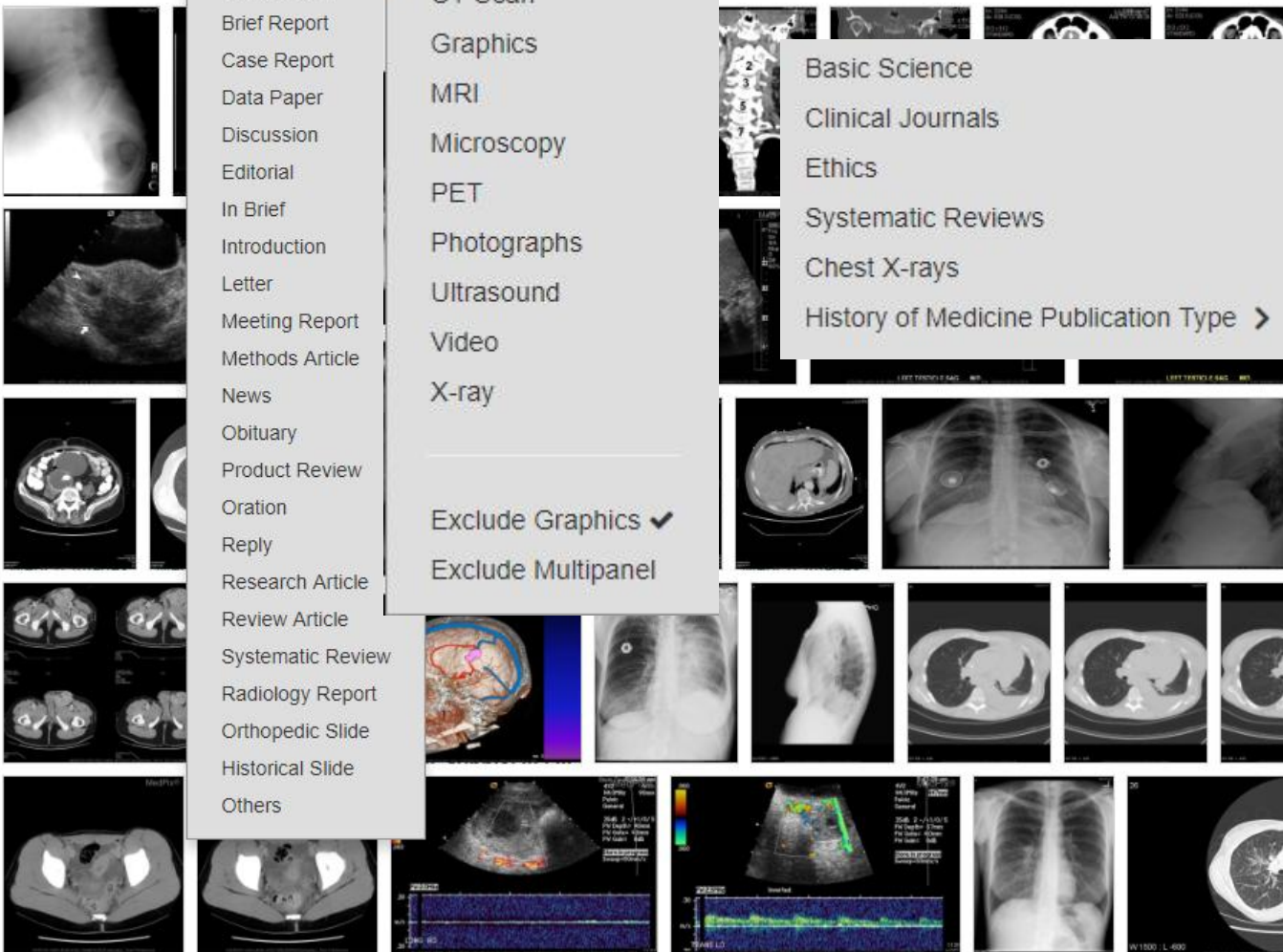
Rank By: Diagnosis

- Abstract
- Book Review
- Brief Report
- Case Report
- Data Paper
- Discussion
- Editorial
- In Brief
- Introduction
- Letter
- Meeting Report
- Methods Article
- News
- Obituary
- Product Review
- Oration
- Reply
- Research Article
- Review Article
- Systematic Review
- Radiology Report
- Orthopedic Slide
- Historical Slide
- Others

- CT Scan
- Graphics
- MRI
- Microscopy
- PET
- Photographs
- Ultrasound
- Video
- X-ray

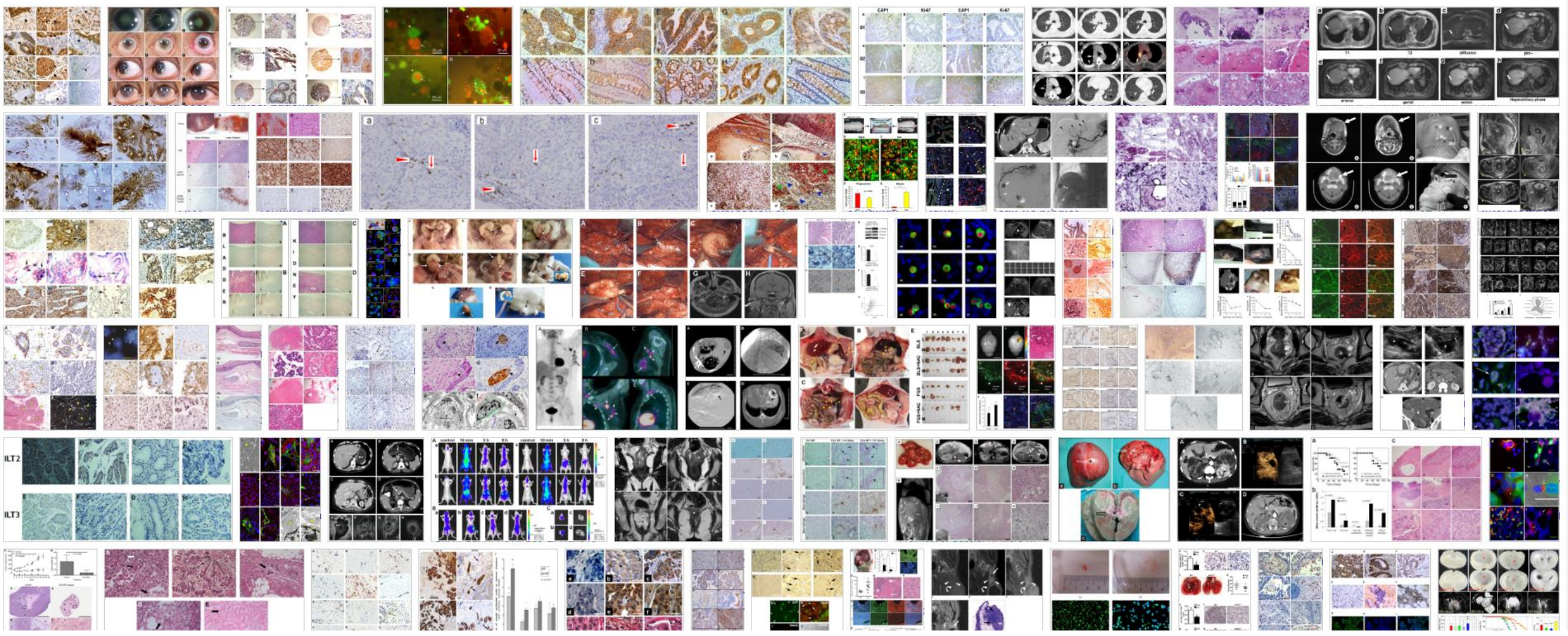
- Exclude Graphics
- Exclude Multipanel

- Basic Science
- Clinical Journals
- Ethics
- Systematic Reviews
- Chest X-rays
- History of Medicine Publication Type >



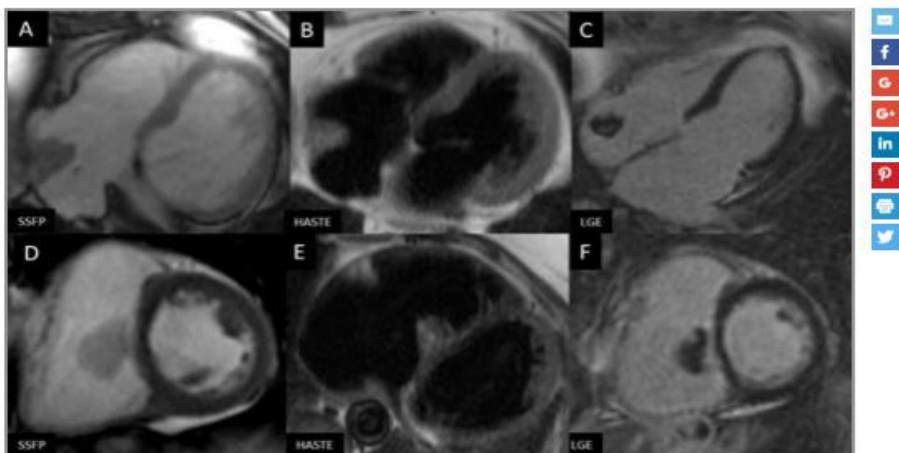
- Behavioral Sciences
- Biochemistry
- Cancer
- Cardiology
- Critical Care
- Dentistry
- Dermatology
- Drug Therapy
- Emergency Medicine
- Endocrinology
- Environmental Health
- Family Practice
- Gastroenterology
- Genetics
- Geriatrics
- Gynecology and Obstetrics
- Hematology
- Immunology
- Infectious Diseases
- Internal Medicine
- Nephrology
- Neurology
- Nursing
- Ophthalmology
- Orthopedics
- Otolaryngology
- Pediatrics
- Psychiatry
- Pulmonary Diseases
- Rheumatology
- Surgery
- Toxicology
- Urology
- Vascular Diseases
- Virology

Search Term: cancer  Image Type: Exclude Graphics 



## Thrombus can enhance on delayed enhancement imaging

[Journal of Cardiovascular Magnetic Resonance](#)



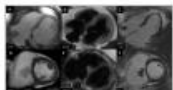
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**F1:** Images A-C: CMR demonstrating a mass with mild delayed enhancement suggestive of myxoma, later proven to be thrombus; Images D-F: CMR demonstrating a mass diagnosed as myxoma, confirmed pathologically.

**View Article:** [PubMed Central - HTML](#)

**Additional Figures:** [Article](#) [Collection](#) [Results](#)



### [-] Automatically Generated Excerpt

To examine the diagnostic accuracy of cardiac magnetic resonance imaging (CMR) in differentiating thrombus from myxoma Thrombus is thought not to enhance on CMR, myxomas are thought to show mild heterogenous enhancement on delayed imaging... It is sometimes difficult to differentiate them, and this may lead to misdiagnosis, which would significantly impact treatment... Thrombi can have varying signal intensities depending on their age and fibrous composition in T1 and T2 imaging... Analysis of a total of 46 masses diagnosed as myxoma or thrombus on CMR were compared with histopathology reports or follow up imaging to determine the diagnostic accuracy of CMR... All patients underwent CMR on a 1.5 Tesla scanner with EKG gating following the same protocol... Of the 46 masses reviewed, sixteen masses were diagnosed as myxoma on CMR, while post-operative pathology reports revealed 11 of these to be myxomas, 4 were found to be thrombi, and 1 was an artifact associated with mitral valve prosthesis... Delayed enhancement is one of the important factors distinguishing a myxoma from a thrombus... However we found in our study that some thrombi may show mild delayed enhancement because of varying tissue composition and result in a misdiagnosis... CMR evaluation can also be difficult in the presence of artifacts (motion, valve prosthesis, intracardiac leads) and arrhythmias... Thrombi may show patchy enhancement on delayed imaging and can be confused as atrial myxoma on CMR.

[+] Mentions

[+] MeSH

**Related in:** [MedlinePlus](#)

## 4.4 Pubmed插件

- Scholarscope (收费)
- EasyPubMed (谷歌和 Edge 的插件商店)
- easyScholar (火狐、谷歌、Edge)
- Pubmed Impact Factor (火狐、谷歌、Edge)

1 Epidemiological characteristics and initial spatiotemporal visualisation of **COVID-19** in a major city in the Middle East. **SWJTU A** **SCIIF 3.295** **SCI升级版 医学3区**  
Cite **SCI基础版 医学3区** **SCI Q2** **XJU 二区** **CUG 医学T3**  
Share MohammadEbrahimi S, Mohammadi A, Bergquist R, Dolatkah F, Olia M, Tavakolian A, Pishgar E, Kiani B. BMC Public Health. 2021 Jul 12;21(1):1373. doi: 10.1186/s12889-021-11326-2. PMID: 34247616 **Free PMC article.**  
BACKGROUND: The **Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2)** emerged initially in **China** in December **2019** causing the **COVID-19 disease**, which quickly spread worldwide. ...

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2 **Case Fatality Risk** of the **First Pandemic Wave** of **Coronavirus Disease 2019 (COVID-19)** in **China**. **SWJTU A++** **NJU A** **SCIIF 9.079** **SCI升级版 医学1区**  
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1 Hayashi Y, Ohnuma K, Furue MK.

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> [Adv Exp Med Biol.](#) 2019;1123:71-94. doi: 10.1007/978-3-030-11096-3\_6.


# Pluripotent Stem Cell Heterogeneity

Yohei Hayashi <sup>1</sup>, Kiyoshi Ohnuma <sup>2</sup> <sup>3</sup>, Miho K Furue <sup>4</sup>

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PMID: 31016596 DOI: [10.1007/978-3-030-11096-3\\_6](#)

## Abstract

Pluripotent stem cells (PSCs), including embryonic stem cells and induced pluripotent stem cells, show heterogeneity with respect to their pluripotency, self-renewal ability, and other traits. PSC heterogeneity may exist among cell lines, among cells within a line, and among temporal states of individual cells. Both genetic and epigenetic factors can cause heterogeneity among cell lines. Heterogeneity among cells within a cell line may arise during long-term culturing even when a PSC cell line is derived from a single cell. Moreover, the expression levels of genes and proteins in PSCs fluctuate continuously at a frequency ranging from a few hours to a few days. Such heterogeneity decreases the reproducibility of research. Thus, methods related to the detection, reduction, and control of heterogeneity in experiments involving human PSCs need to be developed. Further, the presupposition that PSCs are highly heterogeneous should be taken into account by all researchers not only when they plan their own studies but also when they review the studies of other researchers in this field. 

**Keywords:** Embryonic stem cells (ESCs); Human embryonic stem cells (hESCs); Human pluripotent stem cells (hPSCs); Human pluripotent stem cells (hiPSCs); Induced pluripotent stem cells (iPSCs); Pluripotent stem cells (PSCs).



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